

# Metabolic disorders

MUDr. Miroslav Koblížek

# Metabolic disorders

acid base balance disorders

small molecules disorders  
(aminoacids, saccharides)

ion and water dysbalance

complex molecules disorders  
(intracellular accumulation)

extracellular matrix disorders

organelar metabolic disorders

Intracellular accumulation of ...

**Lipids**

**Glycogen**

**Proteins**

Intracellular accumulation of ...

**Lipids**

**Glycogen**

**Proteins**

# Intracellular accumulation of lipids

## Steatosis

- Acquired disorder of cellular metabolism

X

## Lipidosis

- Inherited disorder of cellular metabolism

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### Lipomatosis

- Multiplication of adipocytes in organ
  - (heart, pancreas...)

# Steatosis

- Intracellular accumulation of lipids from acquired causes
- Generally reversible – sign of cellular metabolic disturbance

## Macrovesicular

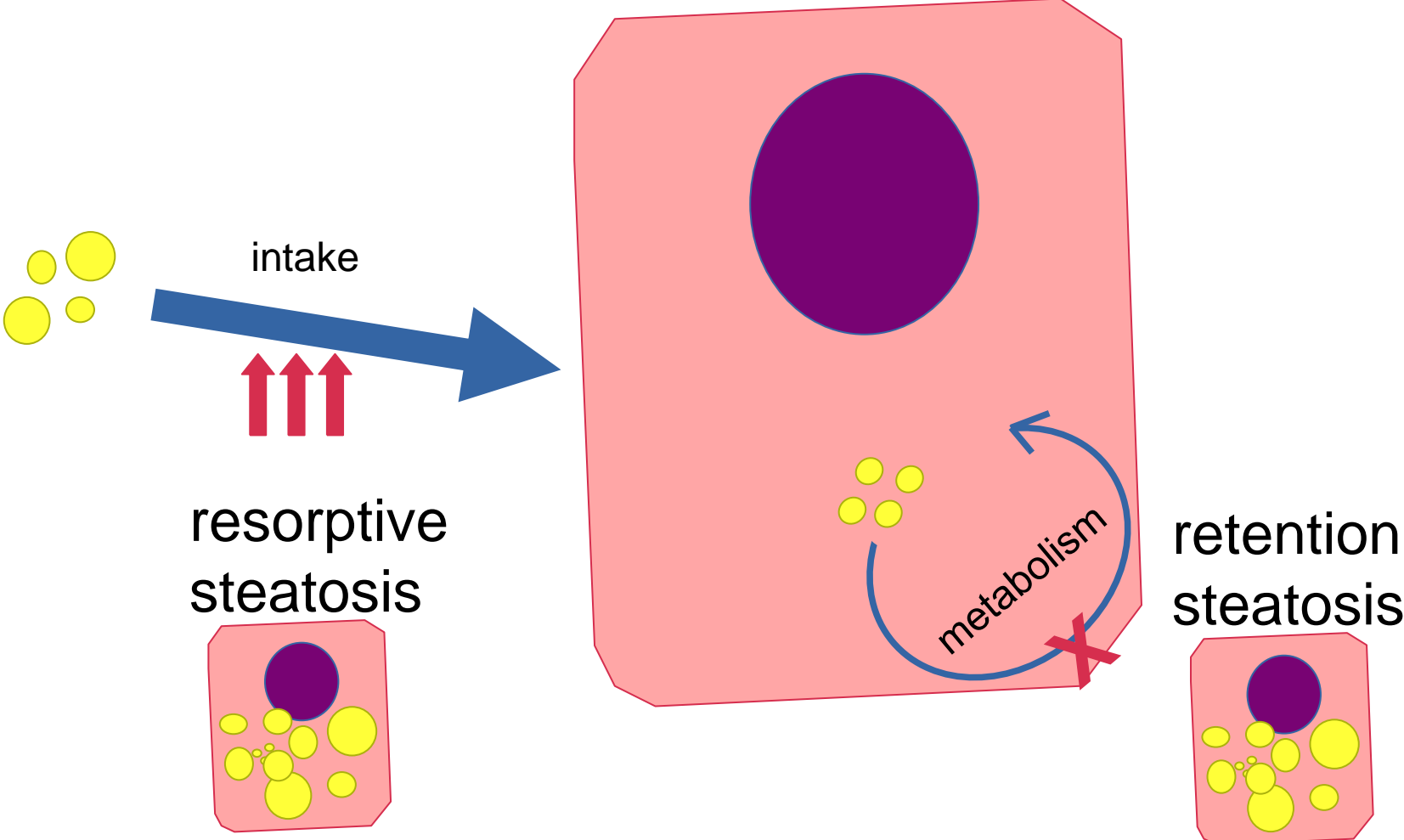
- triglycerids

## Microvesicular

- glykolipids, phospholipids, cholesterol

normal liver

# Steatosis



intake

resorptive  
steatosis

metabolism

retention  
steatosis

# Resorptive steatosis

Chronic  
abscess



Membranes of  
degraded neutrophils



**Foamy  
macrophages**

= *pseudoxanthoma*



# Resorptive steatosis

Cerebral  
infarction



Myelin sheets



**Foamy  
macrophages**

# Resorptive steatosis

High blood  
level of  
cholesterol



High level of  
cholesterol in bile



**Foamy  
macrophages**

*gallbladder  
cholesterolosis*

# Resorptive steatosis

High blood  
level of  
cholesterol



High level of  
cholesterol in bile



**Foamy  
macrophages**

*gallbladder  
cholesterolosis*

# Resorptive steatosis

High blood  
level of  
cholesterol



**Foamy macrophages**  
in arterial intima



*Fatty streaks*

# Resorptive steatosis

High blood  
level of  
cholesterol



**Foamy macrophages**  
in skin



*Xanthomas*

# Resorptive steatosis

Obesity,  
dyslipidemy,  
diabetes



High blood levels of  
cholesterol and other  
lipids



*Non-alcoholic fatty liver  
disease (NALFD)*  
- one of most common liver  
disorders  
- may progress to cirrhosis

# Retention steatosis

Venostasis



Hypoxia in liver  
centrilobular zone



***Nutmeg liver***  
steatosis + venostasis

# Retention steatosis

Venostasis



Hypoxia in liver  
centrilobular zone



***Nutmeg liver***  
steatosis + venostasis



# Retention steatosis

**Alcohol or  
intoxication**



Liver steatosis

# Lipidosis

- Intracellular accumulation of lipids from inherited causes
- Defect of enzymes for metabolism of **complex lipids**
  - Lot of different diseases, depending on type of deficient **enzyme**
  
- Rare diseases = *orphan diseases*
  - Only a few hundreds in Czech Republic

# Lipidosis

- All cells have enzyme deficit
- X
- Disease manifests only in specific tissues
  - Spleen, liver, bone marrow – macrophages – metabolism of phagocytosed membranes
  - Brain – metabolism of sphingolipids of membranes

# Lipidosis

## *Gaucher disease*

- Defect of **glucocerebrosidase** → accumulation of glucocerebroside
- Prevalence 1:80 000, but much more higher in Ashkenazi Jews (up to 1:500)
- **Macrophages** with “*wrinkled paper appearance*”

# Lipidosis

## *Gaucher disease*

- Accumulation of macrophages
  - Hepatosplenomegaly – spleen up to 10 kg
  - Accumulation in bone marrow
    - Inhibition of hematopoiesis
      - Anaemia
      - Thrombocytopaenia
      - Leucopaenia
    - Pain
    - Fractures

# Other lipidoses

## ***Tay-Sachs disease***

- Accumulation of gangliosides in *neurons*
- Rapid psychomotoric retardation – death in age of 3-4 years
- “*Cherry-red spot*” in retina – foveola centralis is the only spot in retina without lipid accumulation

## ***Fabry disease***

- XR inherited
- Visceral symptoms
  - Periferal neuropathy
  - Kidney failure
  - Myocardial hypertrophy

# Other lipidoses

## *Niemann-Pick disease*

- Types A and B
  - Deficit of sphingomyelinase
  - Accumulation of sphingomyelin in macrophages (spleen, liver, bone marrow)
    - CNS involvement in type A (not in type B)
  
- Type C
  - Defect of **transport protein** (not enzyme)
  - Heterogeneous symptoms
    - Mostly neurodegenerative

Intracellular accumulation of ...

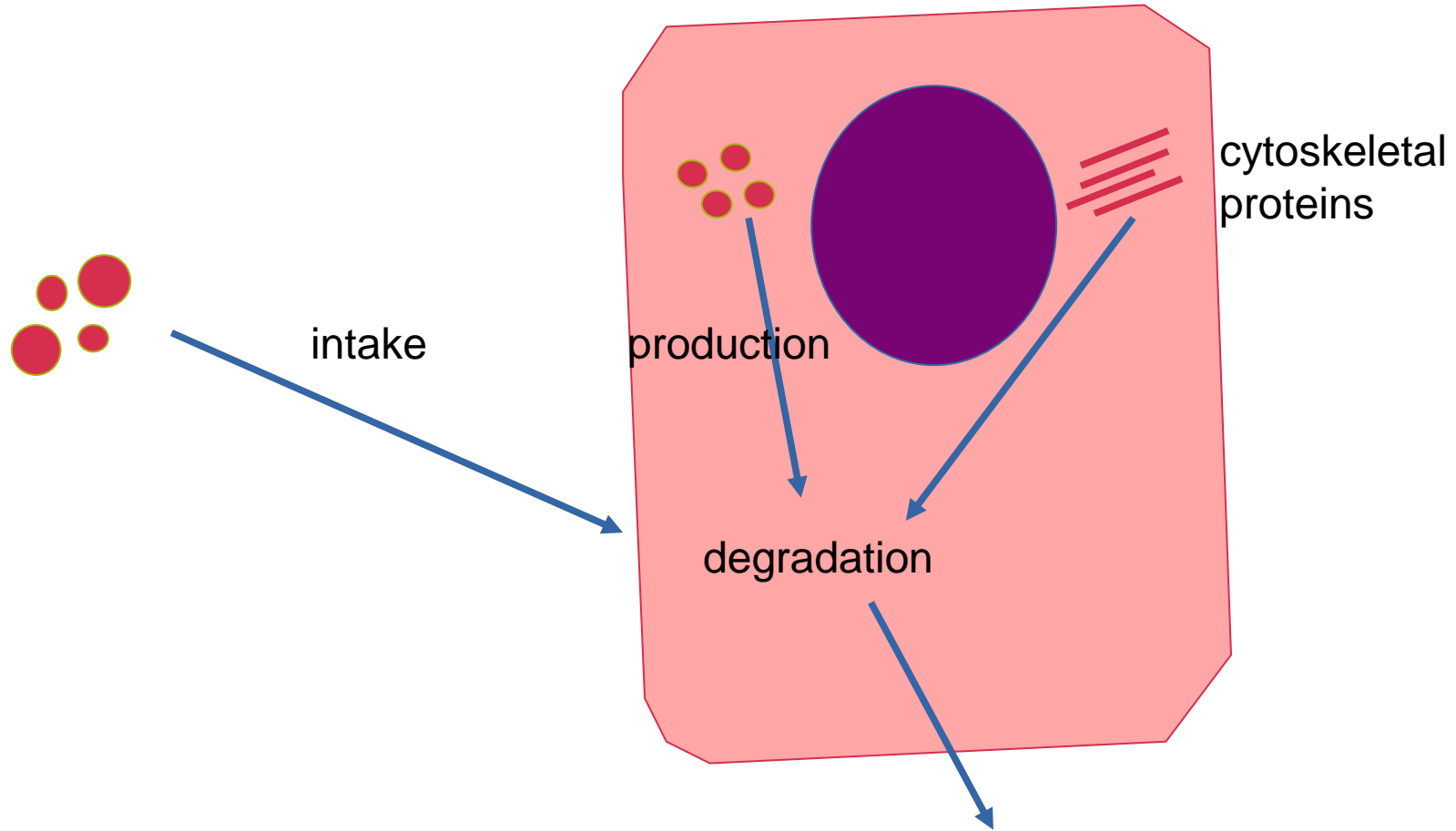
**Lipids**

**Glycogen**

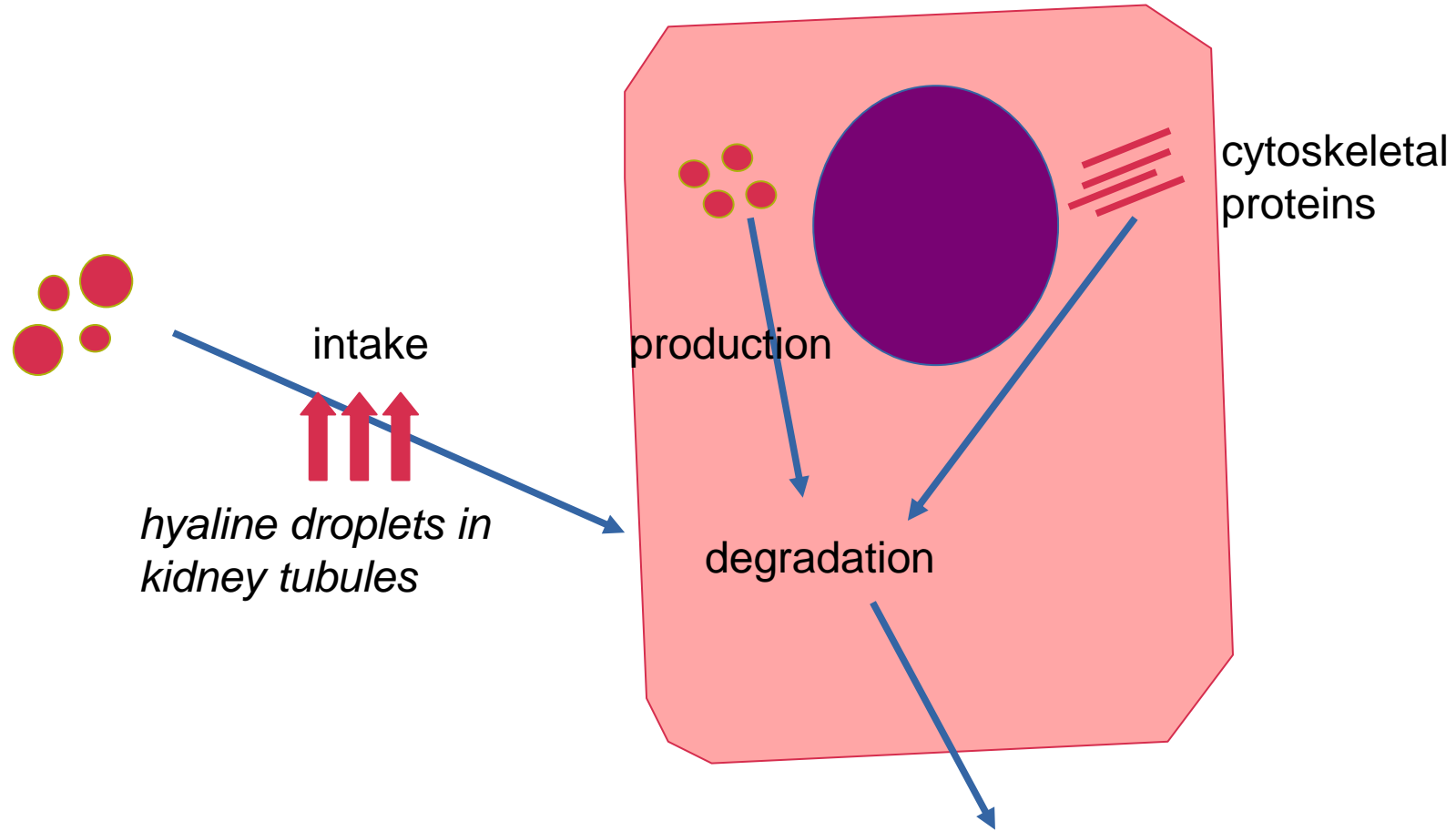
**Proteins**



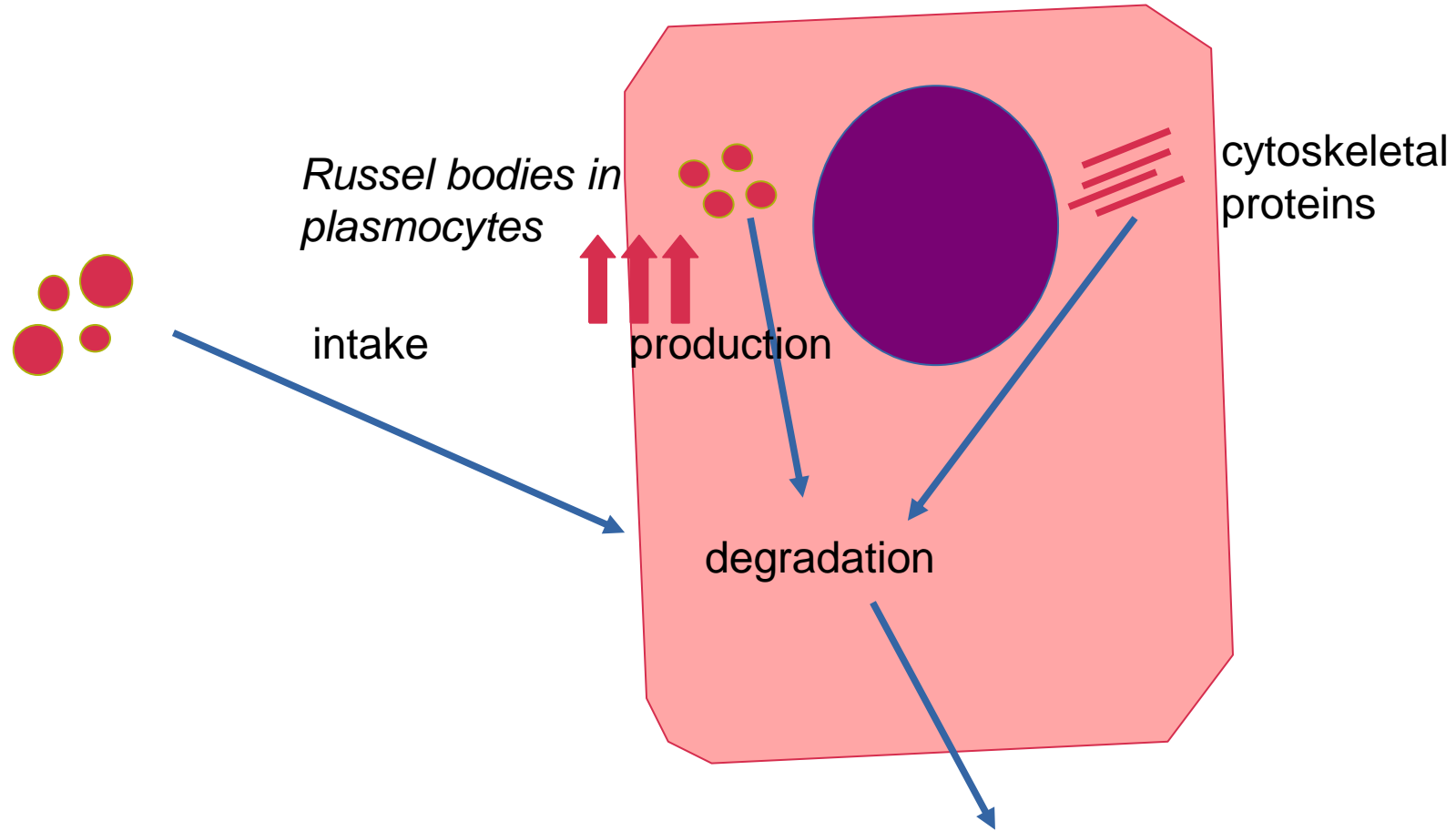
# Intracellular accumulation of proteins



# Intracellular accumulation of proteins



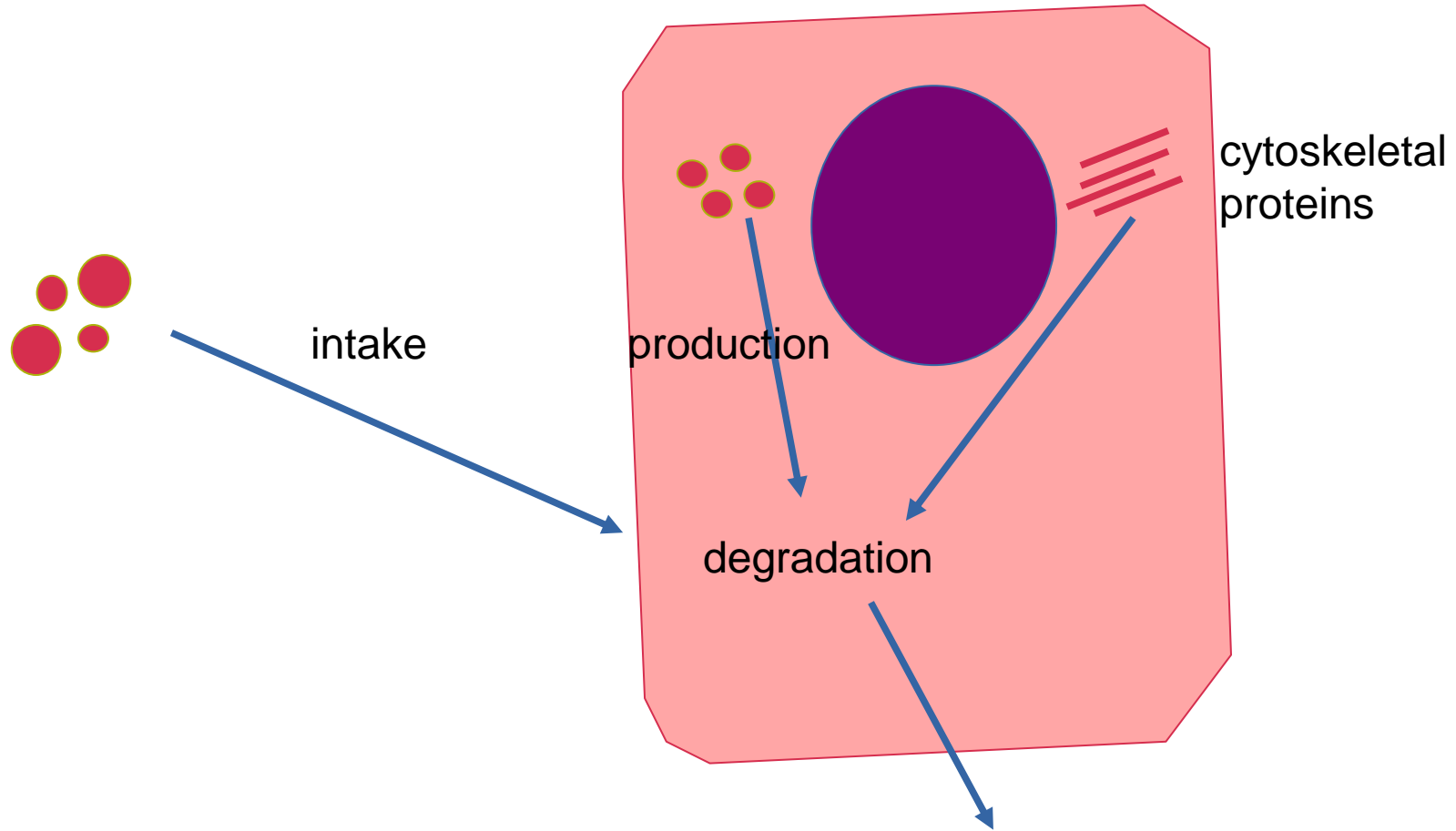
# Intracellular accumulation of proteins



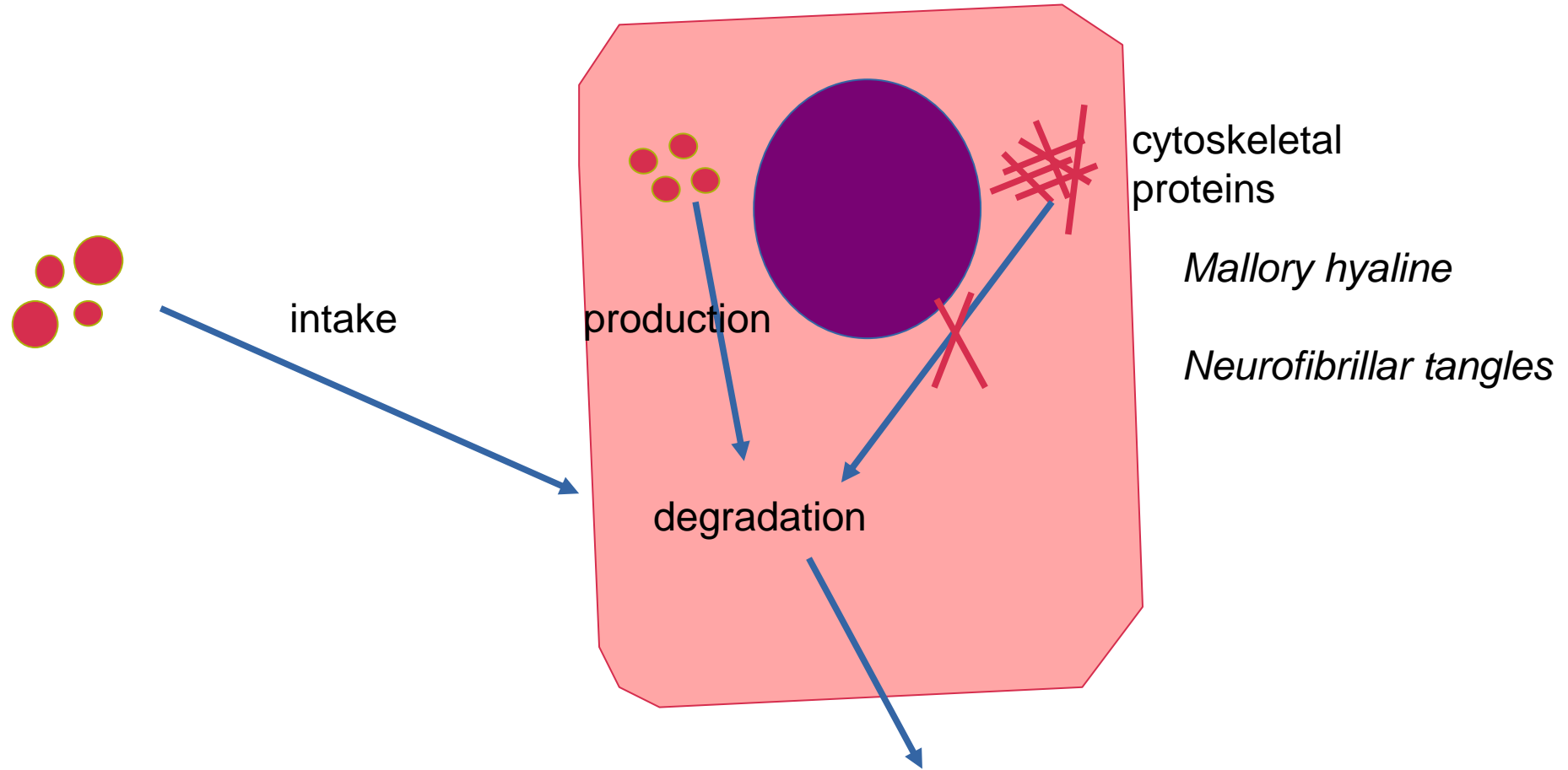
*Russel bodies*

- accumulation of immunoglobulines produced in plasmocytes
- chronic inflammation or plasmocytoma

# Intracellular accumulation of proteins



# Intracellular accumulation of proteins



*Mallory hyaline*

- liver

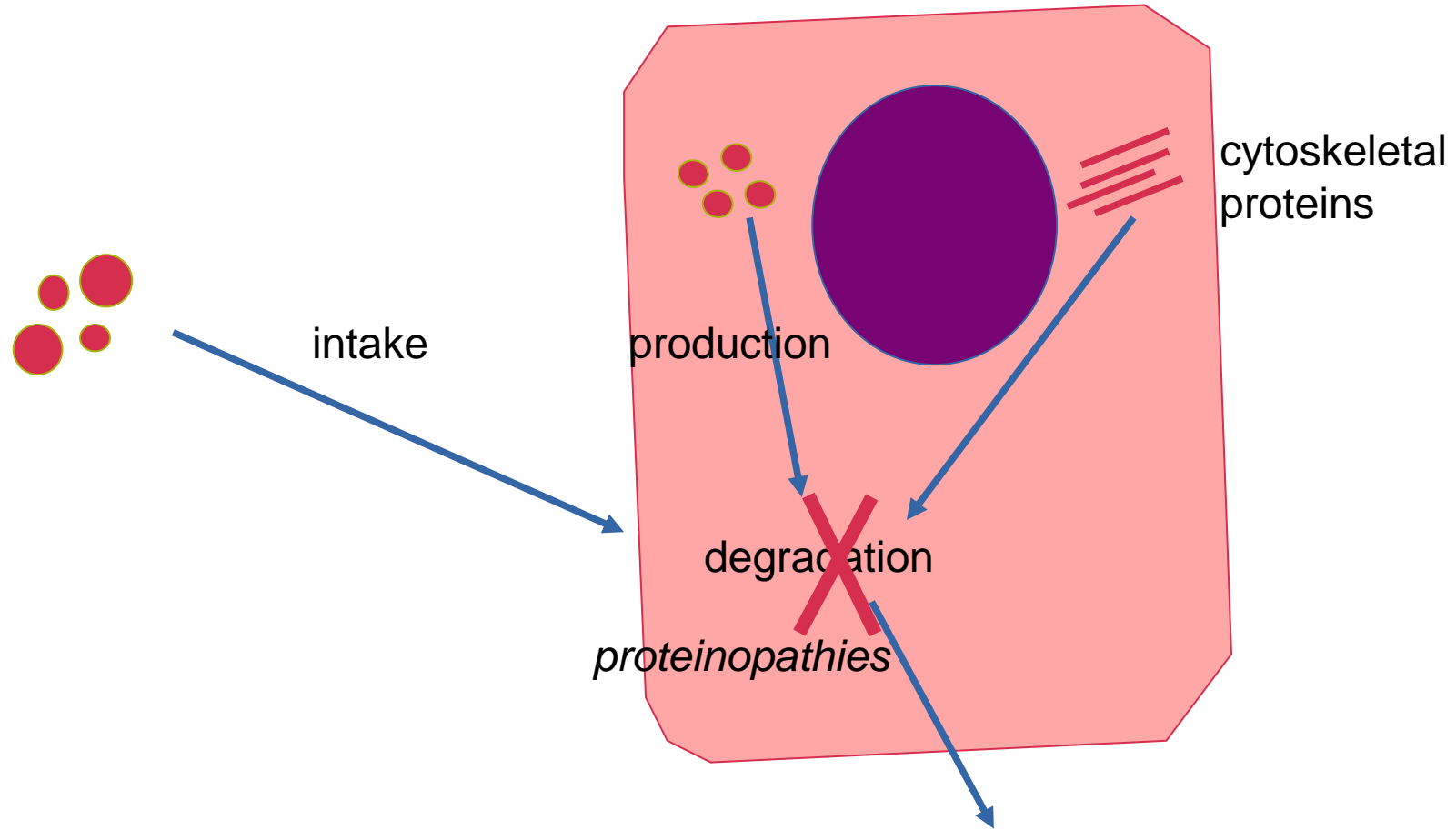
- accumulated cytokeratines damaged by alcohol

*Neurofibrillar tangles*

- brain
- Alzheimer disease



# Intracellular accumulation of proteins



# Proteinopathies

## ***Protein misfolding disorders***

- abnormal conformations of alpha-helix and beta-sheets (more beta-sheets)

Misfolded proteins are

- unable to be degraded by enzymes
- not immunogenous
- leading the cell to apoptosis
  
- ...also loss of normal protein function (i.e. alpha1-antitrypsine)

# Proteinopathies

## Etiology

### Gene mutation

- familiar type of *Creutzfeldt-Jakob disease*
- inherited *alpha1-antitrypsine deficiency*

### Acquired disorders of protein folding – toxic damage or senescence

- *Alzheimer disease*
- *Parkinson disease*

### *Chaperonopathies*

(chaperones – cytoplasmatic structures protecting protein folding)

Intracellular accumulation of ...

**Lipids**

**Glycogen**

**Proteins**

# Glycogen storage diseases

## Liver

- Degradation of glycogen for regulation of glucose blood level

## Muscles

- Glycogen for own metabolism
- Hyperaccumulated glycogen impairs muscle function

## Predominantly **hepatal** glycogen storage diseases

### ***von Gierke disease*** (GSD I)

- Deficiency of glucose-6-phosphatase → normally changes glucose-6-phosphate into free glucose, possible to transfer in blood
- Hypoglycemia
  - After stress or physical activity
  - Hypoglycemia of newborns in most serious cases
- Hepatomegalia
  - Accumulation of glycogen

## Predominantly **muscular** glycogen storage diseases

### ***Pompe disease*** (GSD II)

- Deficiency of alpha-1,4-glucosidase (acidic maltase) – lysosomal enzyme
- Curable with enzyme replacement therapy
  
- *Infant type*
  - Cardiomyopathy, hypotonia etc. in first year of life
  
- *Late onset type*
  - Myopathy – predominantly in proximal muscles

### ***McArdle disease*** (GSD V)

- Deficiency of muscle phosphorylase – cutting glucose-1-phosphate from glycogen
- Muscle weakness, cramps and myoglobinuria

# Organelar metabolic disorders

Lysosomes

Peroxisomes

Mitochondria



# Organelar metabolic disorders

Lysosomes

Peroxisomes

Mitochondria

## Lysosomal disorders

Lysosomes are normally part of heterophagy (phagocytosis, endocytosis) and autophagy.

- Accumulation of metabolic intermediate product
  - May be toxic
  - May cause deficiency of end product
- Secondary accumulation
  - Impaired autophagy due to lysosomal dysfunction

## Lysosomal disorders

- Lipidoses
  - Gaucher disease
  - Tay-Sachs disease
  - Fabry disease
  - Niemann-Pick disease
- Glycogenosis – only Pompe disease (GSD II)
- Mucopolysaccharidoses
  - Disorders of extracellular matrix
    - Hurler syndrome
    - Hunter syndrome
    - Morquio syndrome

# Therapy of lysosomal disorders

Historically untreatable fatal diseases.

New ways of treatment available:

- *Enzyme replacement therapy*
  - substitution of deficient enzyme
    - Gaucher disease
    - Pompe disease
    - Hurler syndrome
    - etc.
- *Molecular chaperon therapy*
  - Helps the deficient protein to fold correctly
    - i.e. Gaucher disease
- *Substrate reduction therapy*

# Organelar metabolic disorders

Lysosomes

Peroxisomes

Mitochondria

## Peroxisomal disorders

Peroxisomes normally metabolise very long chain fatty acids (VLCFA).

- Multiorgan disorder with neurological symptoms, liver dysfunction, craniofacial dysmorphism and other bone deformities.
- *Zellweger syndrome*
- *X-linked adrenoleukodystrophy*

# Organelar metabolic disorders

Lysosomes

Peroxisomes

Mitochondria

# Mitochondrial disorders

Maternal hereditability

Heteroplasmia

Threshold effect

Symptoms in most energetically dependent tissues

- CNS
- Muscles
- Kidneys
- Heart
  
- - lactate acidosis
  
- MELAS syndrome
  - *Myopathy, Encephalopathy, Lactate Acidosis, Stroke-like events*
- MERRF syndrome
  - *Myoclonical Epilepsy and Ragged-Red Fibres*
- Leber's hereditary optical neuropathy



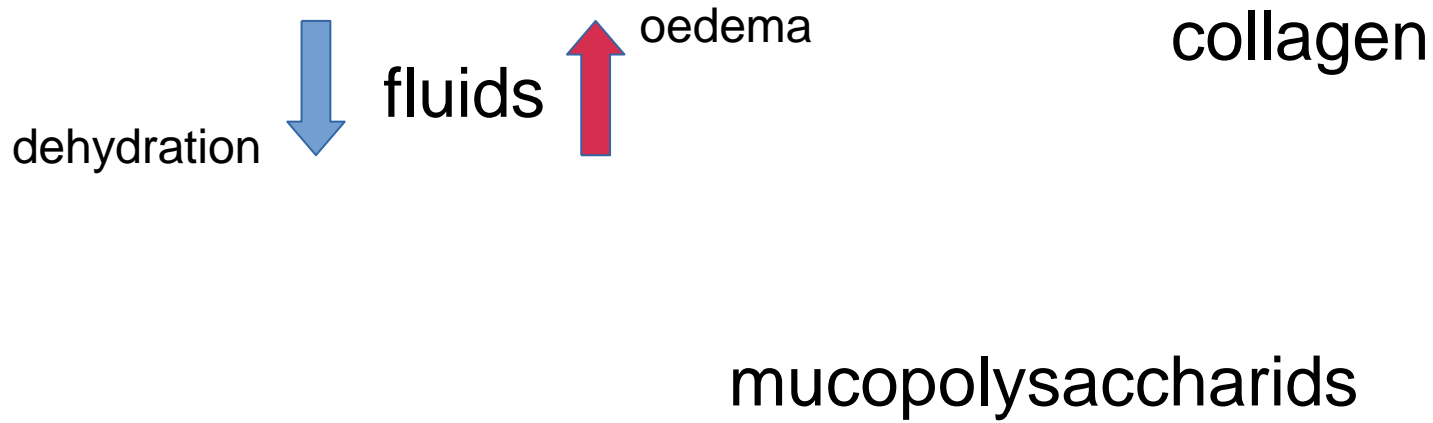
# Extracellular matrix disorders

fluids

collagen

mucopolysaccharids

# Extracellular matrix disorders



# Acquired extracellular matrix disorders

Fibrosis  
Sclerosis/hyalinisation



collagen

mucopolysaccharids



Fibrinoid change  
Myxoid change

# **Inherited** extracellular matrix disorders

elastin

collagen

mucopolysaccharids

**Inherited** extracellular matrix  
disorders

elastin

collagen

mucopolysaccharids

# Inherited disorder of elastin

## *Marfan syndrome*

Mutation of fibrillin gene → impaired elastin synthesis

- High astenic body, long members, long thin fingers
- Joint hypermobility
- Lens subluxation
- Cardiovascular disorders
  - Mitral valve prolaps
  - ***Cystic medionecrosis of aorta*** – prone to rupture and dissection

# Inherited disorder of collagen

## *Ehlers-Danlos syndrome*

Mutation of gene for some collagen subunit

- Joint hypermobility
  - Subluxations
  - Arthrosis
- Vessel wall fragility

# Inherited disorder of mucopolysaccharides = *mucopolysaccharidoses*

Lysosomal disorders

Gene defect of lysosomal enzymes => impaired degradation of extracellular matrix  
mucopolysaccharides => accumulation in phagocytosing cells

- **CNS damage**

- Accumulation in microglia => long time inflammatory stress => secondary destruction of neurons – “*neuroinflammation*”

- Eye damage

- Accumulation in cornea – opacity and loss of transparency => blindness

- **Skeletal deformations**

- Accumulation in chondrocytes => impaired enchondral ossification => disorder of long bones growth

- **Soft tissues deformities**

- Cardiovascular disorders

- Mitral valve regurgitation
- Intimal fibrosis



# Inherited disorder of mucopolysaccharides = *mucopolysaccharidoses*

## **Hurler syndrome** (MPS type I)

- Deficiency of *alpha-L-iduronidase* => accumulation of heparan-sulphate and dermatan sulphate
- **Gargoylism**
- Cognitive impairment
- Cardiovascular complications – death around 10 years

# Inherited disorder of mucopolysaccharides = *mucopolysaccharidoses*

Hunter syndrome (MPS type II)

- X-linked disorder
- Milder clinical course than MPS type I

Morquio syndrome (MPS type IV)

- AR disorder
- May have quite normal cognitive functions

# Another acquired disorders of extracellular matrix

fluids

collagen

mucopolysaccharids

**+ deposits of pathological  
substances**

calcifications

amyloid

# Calcification

## Dystrophic

In **pathologically altered** tissues.

- Necrosis
  - Caseous necrosis (TBC)
- Newly formed fibrous tissue in inflammation
  - *Pericarditis petrosa*
  - *Porcelain gallbladder*
- Hyaline degenerated fibrous tissue
  - Mitral valve calcification
- Atherosclerotic plates
- Tumors
  - Leiomyoma

## Metastatic

In **normal** tissues during **hypercalcemia**.

### *Hypercalcaemia*

- Parathyroideal adenoma
- Paraneoplastic production of parathormone in other tumor
- Plasmocytoma
- Sarcoidosis
  
- Tissues producing acidic metabolites =>
- => having alcalic stroma
  - **Lungs**
  - **Kidneys**
  - **Stomach**

# Calcification

Tuberculosis

# Calcification

Low grade glioneural tumor

# Calcification

Lung – metastatic calcification

# Calcification

Kidney – metastatic calcification



# Amyloidosis

Accumulation of amorphous protein material in **extracellular** matrix.

# Amyloidosis

Accumulation of amorphous protein material in **extracellular** matrix.

# Amyloidosis

Kongo red staining

# Amyloidosis

Kongo red staining in *polarized light*

# Amyloid

Lot of different types of proteins (nowadays 37 suspicious proteins) are able to form amyloid.

Changed protein structure – majority of beta sheets =>

=> Unable to be degraded => Accumulation

# Amyloidosis

- Accumulation in various locations
  - Vessel walls
  - Kidneys (mainly in glomeruli)
  - Spleen
    - Red pulp – “*ham-like spleen*”
    - White pulp – “*sago spleen*”
  - Heart – myocardium
  - Muscles – tongue
  - GIT mucosa
  - Adipose tissue – good material for diagnostics
- 
- Amyloid is *toxic* for neighbouring cells.
  - Impaired diffusion through thickened vessel walls.
  - Mechanical obstruction.

# Amyloidosis

- Generalised amyloidoses
  - AL amyloidosis
  - AA amyloidosis
- Localised amyloidoses
  - Endocrine amyloidosis
  - Senile (ATTR) amyloidosis
  - Amyloidosis of chronically dialysed patients
- Hereditary amyloidoses
  - Hereditary transthyretin amyloidosis
  - Familial mediterranean fever

# AL amyloidosis

- So called *primary amyloidosis*.
- Associated with hemathological malignity – ***plasmocytic myeloma*** or MGUS
  - Tumor cells differentiate to plasmocytes – producing immunoglobulines – monoclonal production (physiological is polyclonal) -
    - - only one type of *kappa* or *lambda* light chains
- Immunoglobuline light chains can aggregate into amyloid
  - Immunohistochemical visualisation
- TREATMENT
  - Treat the hemathological malignity



# AA amyloidosis

- So called *secondary amyloidosis*
- **Serum amyloid protein A** (SAA protein) – one of proteins of acute inflammatory phase
  
- Associated with chronic inflammation
  - Chronic infections
    - Osteomyelitis
    - Tuberculosis
  - Autoimmune diseases
    - Rheumatoid arthritis
    - Crohn disease
    - Psoriasis
    - Bechterev disease
  
- TREATMENT
  - Treat the cause of chronic inflammation
    - Antibiotic therapy for chronic infections
    - Immunosuppressive therapy for autoimmune diseases

# Other amyloidoses

## Endocrine amyloid

- Medullary carcinoma of thyroid gland
- Insulinoma

## Senile amyloidosis

- Predominantly in heart
- Transthyretin as precursor of amyloid

## Amyloidosis of chronically dialysed patients

- Beta-2 microglobulin – ineffectively eliminated by hemodialysis
- Affinity to osteoarticular system – arthropaties, carpal tunel syndrome

## Alzheimer disease

- A-beta amyloid

# Hereditary amyloidoses

Hereditary transthyretine amyloidosis

= *familial amyloid polyneuropathy*

- Mutated transthyretine – prone to accumulation and amyloidogenesis
- TREATMENT
  - Liver transplantation

Familial mediterranean fever

- Mutation of gene for *pyrin* – pathologically activated pyrin activates hyperproduction of IL-1 => *persistent inflammation*
- Hyperproduction of SAA => AA amyloidosis

# Recapitulation

# Recapitulation

Intracellular accumulation of metabolites

## **Lipids**

- steatosis

X

- lipidosis

  - lysosomal

diseases

## **Proteins**

- hyperproduction,  
increased intake

- misfolding

## **Glycogen**

- glycogen storage  
diseases

# Recapitulation

## Organelar metabolic disorders

### **Lysosomes**

- lipidoses
- Pompe disease
- mucopolysacharidoses

### **Peroxisomes**

- Zellweger syndrome
    - VLCFA
- metabolism

### **Mitochondria**

- different hereditability
- MELAS
- MERRF

# Recapitulation

## Extracellular matrix disorders

### Acquired

Normal  
components

Fluids + -

Collagen

Mucopolysaccharides

Pathological  
components

Calcifications

- dystrophic
- metastatic

Amyloidosis

- AL
- AA

### Inherited

Marfan syndrome – elastin

Ehlers-Danlos syndrome – collagen

Mucopolysaccharidoses

- Hurler syndrome
- Hunter syndrome
- Morquio syndrome