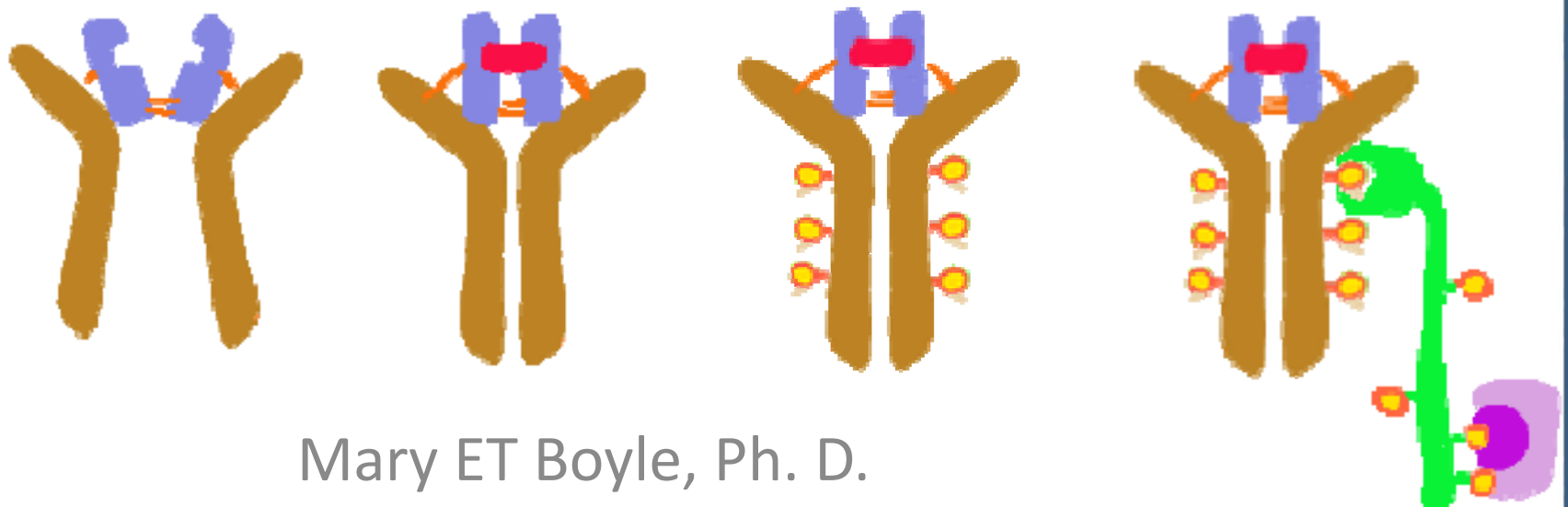


Insulin receptor and signaling



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Hormones receptors are discriminating!

Hormones are present at very low concentrations (atto- to nanomolar range 10^{-15} to 10^{-9} mol/L)

The concentration is much lower than many structurally similar molecules (sterols, aa, peptides, proteins) circulating (micro to millimolar 10^{-6} to 10^{-3} mol/L) range

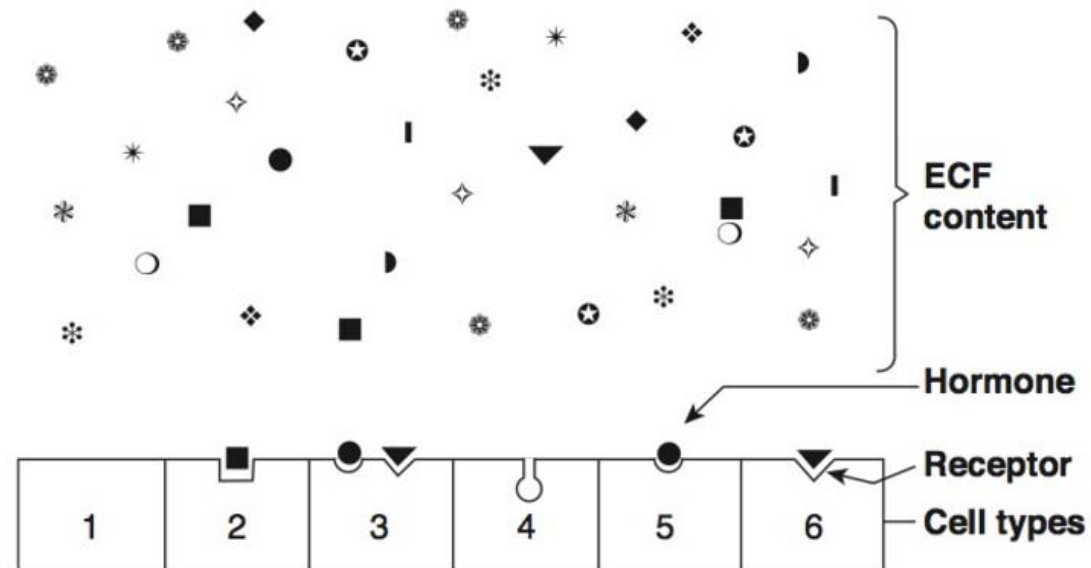
Target cells must distinguish between different hormones and other molecules that have a much higher concentration

Hormones initiate their effects by binding to specific receptors

Terminate the effect of a hormone?

Usually when the hormone disassociates from the receptor (but not always)

Specificity and Selectivity of Hormone Receptors



Features for effective hormone-receptor interactions:

1

Binding should be specific

2

Binding should be saturable

3

Binding should occur within the concentration range of the expected biologic response

Regulation of Glucose Homeostasis

Insulin and leptin – info on long term energy supplies

Short term energy availability is conveyed by glucose and free fatty acids (FFA)

Food intake vs. reduced energy expenditure

Nutrient availability (increased endogenous glucose production) vs. excess energy storage – promote negative energy balance and limit endogenous glucose production.

Acute elevation of plasma glucose

Cognitive functions

Impaired neural function

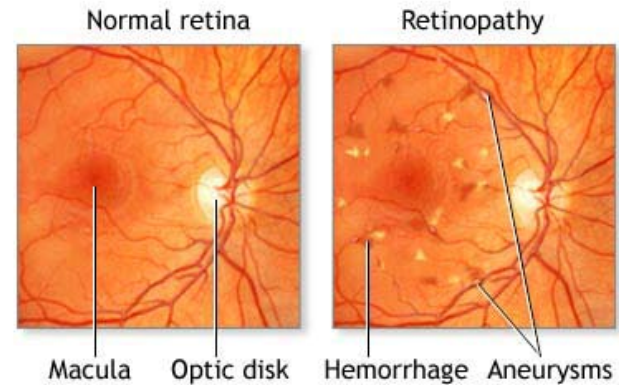
Damage of proteins causes diabetic complications:

neuropathy

nephropathy

retinopathy

Microvascular complications



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Elevation of plasma glucose

Chronic hyperglycaemia

Myocardial infarction

Stroke

Amputations

Normal



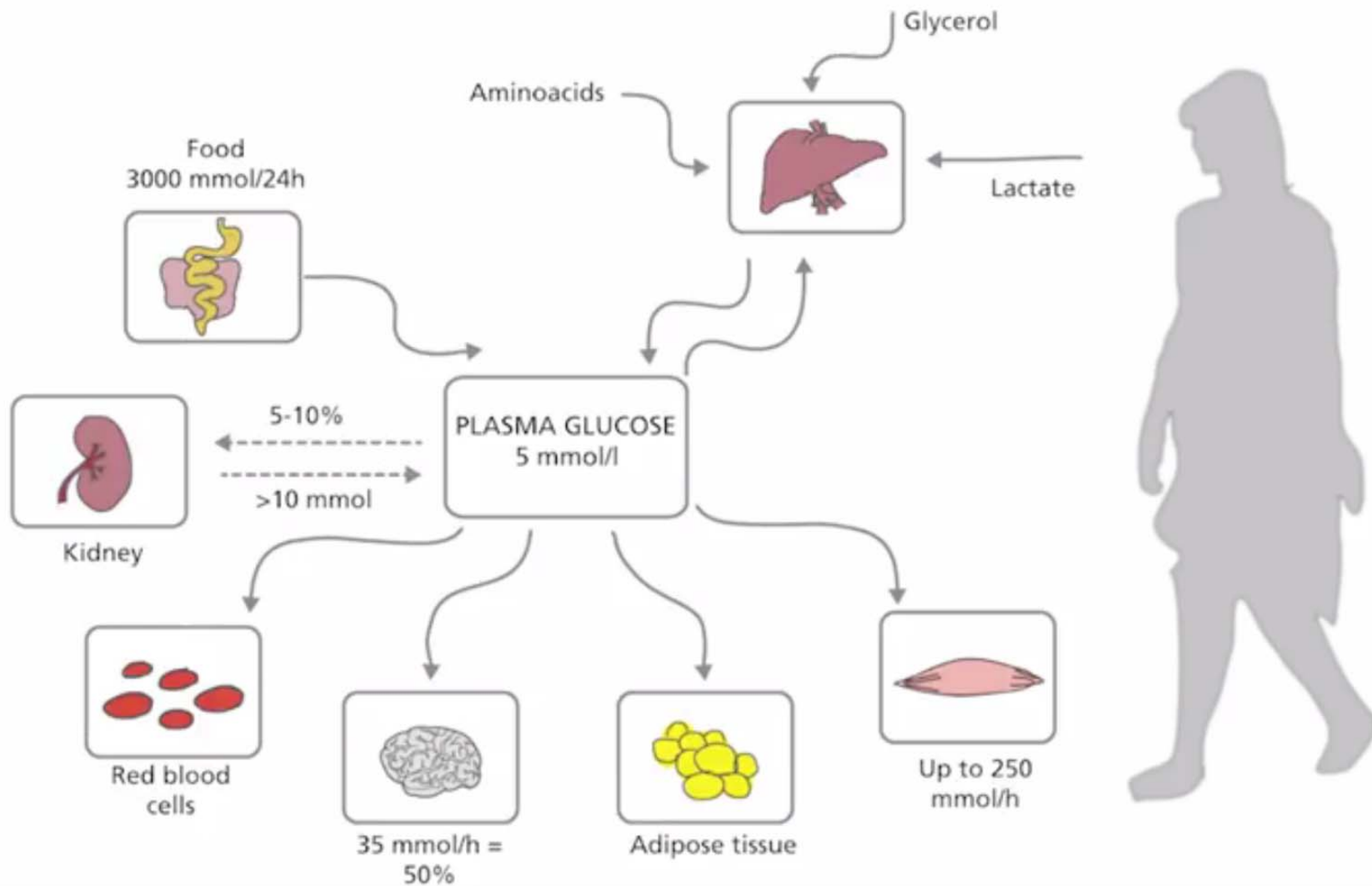
Diabetic risk



Blood vessel damage in the feet may cause tissue damage

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Macrovascular complications



RECOGNITION



HORMONE
RELEASE



SIGNAL
GENERATION



EFFECTS

← hyperglycemia

← β. cells

← Bind to IR

← $Y \rightarrow Y-R \Rightarrow IRS1-4 \dots$

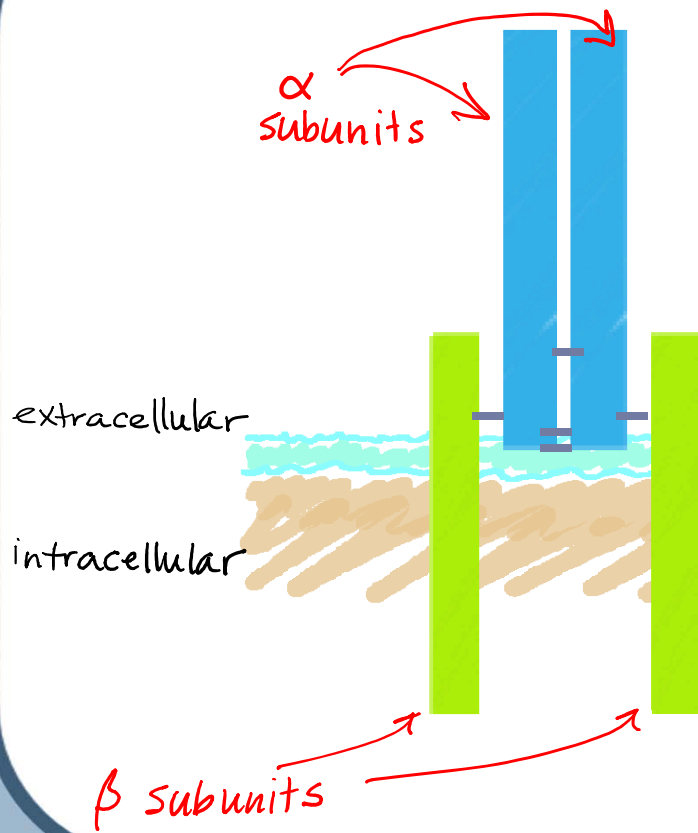
Insulin receptor is:

The effector of insulin action

A member of the tyrosine kinase receptor family

Insulin has effects on CNS

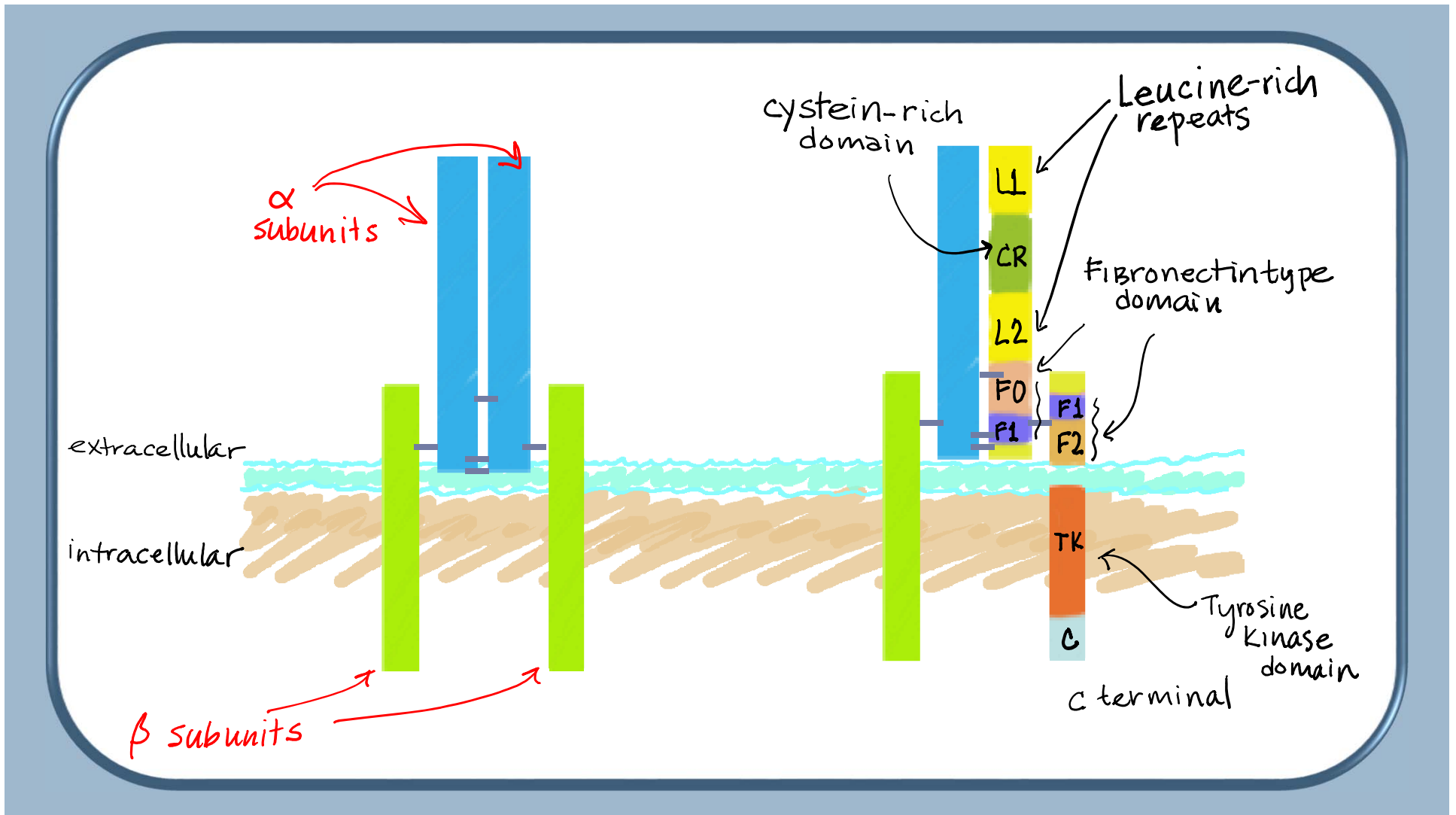
Regulation of energy homeostasis, reproductive endocrinology and neuronal survival.



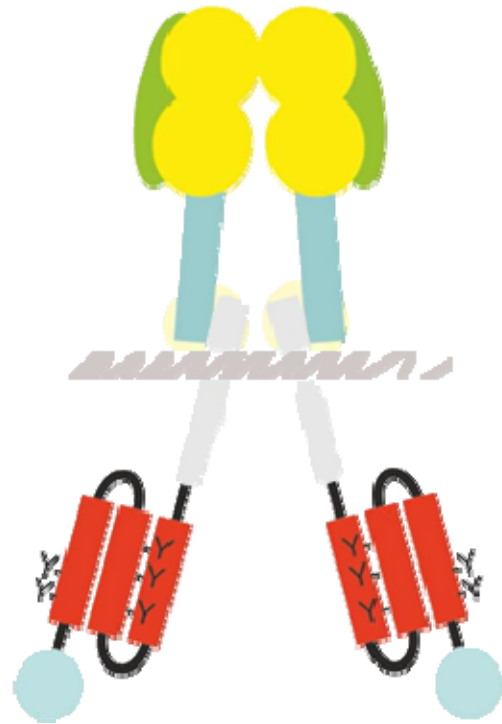
The alpha chain is entirely extracellular and contains the insulin-binding site.

The alpha and beta chains are linked together by disulfide bonds.

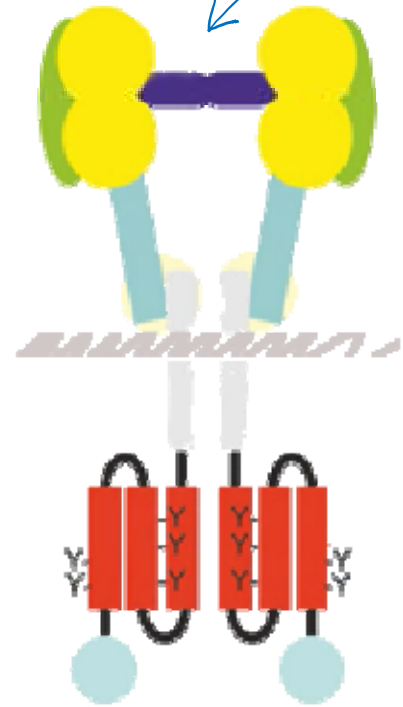
The beta chain is composed of an extracellular region, a single transmembrane region and a cytoplasmic region.



inactive ↓



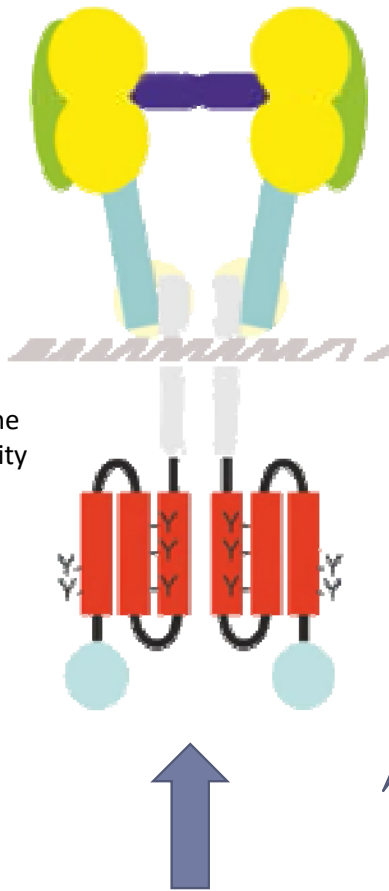
INSULIN
(2 molecules)



ACTIVE

Insulin receptors are inactive in the absence of ligand (like other RTKs)

Low tyrosine kinase activity



When insulin binds, there is a conformational change and the tyrosine kinase domains come into close physical proximity.

Juxtaposition of the kinase domains leads to trans-autophosphorylation and receptor activation.

There are three phosphorylation sites present in the activation loop.

In the unphosphorylated state, the activation loop assumes a conformation in which it occupies these sites.

Upon phosphorylation of the three tyrosine residues

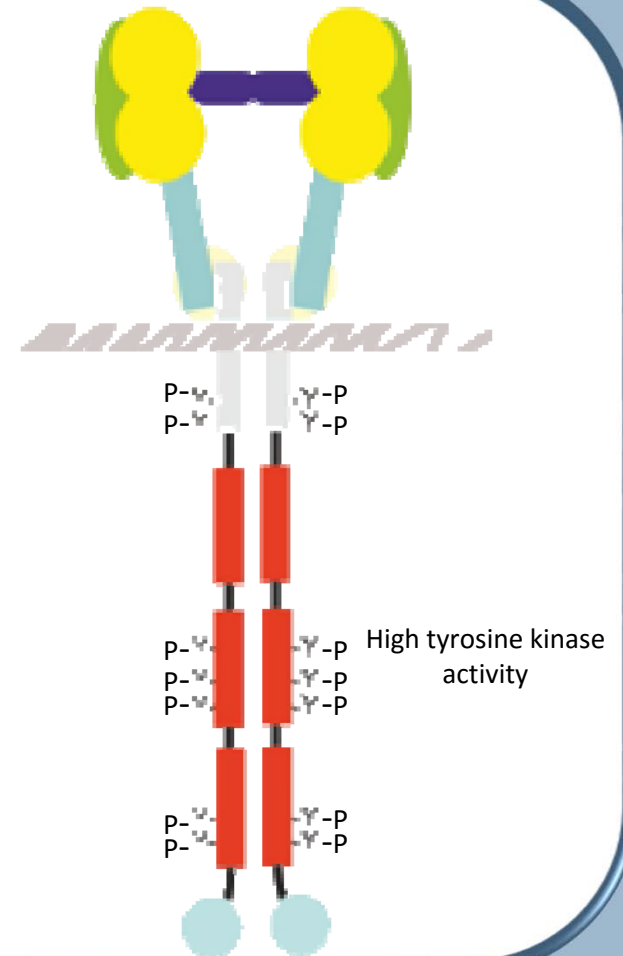
the activation loop assumes a new conformation away from the catalytic cleft

the activation loop assumes a new conformation away from the catalytic cleft

This conformation requires a rotation of the small and large lobes of the kinase domain with respect to each other, thereby bringing residues that are essential for catalysis closer together.

the activation loop now leaves the catalytic cleft open so that it can bind substrates.

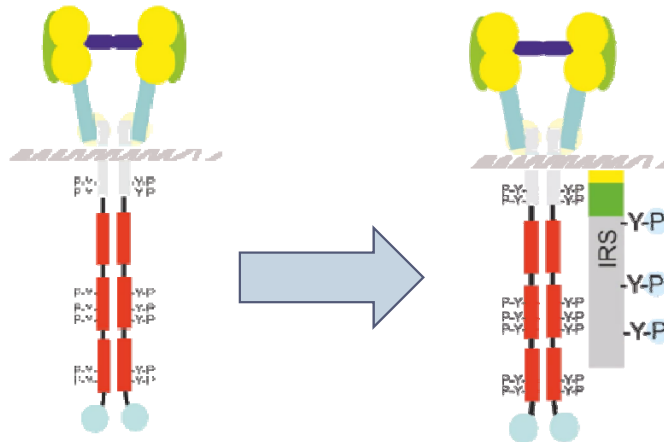
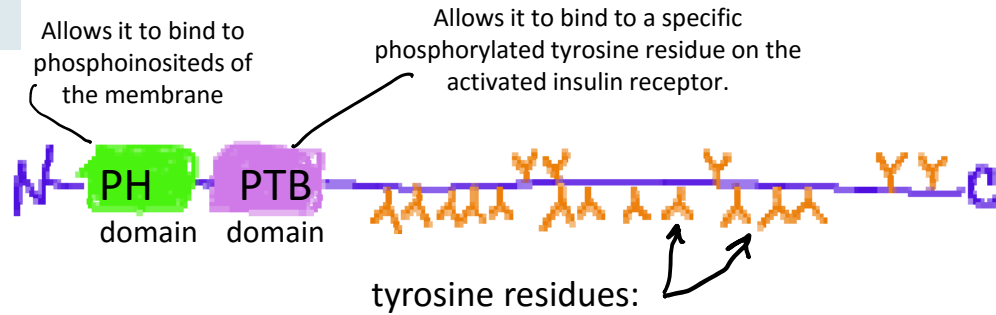
Following activation of the kinase domain, the receptor phosphorylates itself on tyrosine residues that are present adjacent to the membrane and in the carboxyl-terminal tail.



Tyrosine-phosphorylated IRS activates signaling pathways

(IRS: insulin-receptor substrates)

A schematic representation of an IRS polypeptide:



The insulin receptor associates with a small family of docking proteins, called insulin-receptor substrates (IRSs) which provide binding sites for SH2 domain-containing signaling proteins

Abundant in muscle tissue

IRS1



p85 binding

Grb2 binding

p85 binding

SHP-2 binding

Abundant in liver and adipose tissue

IRS2

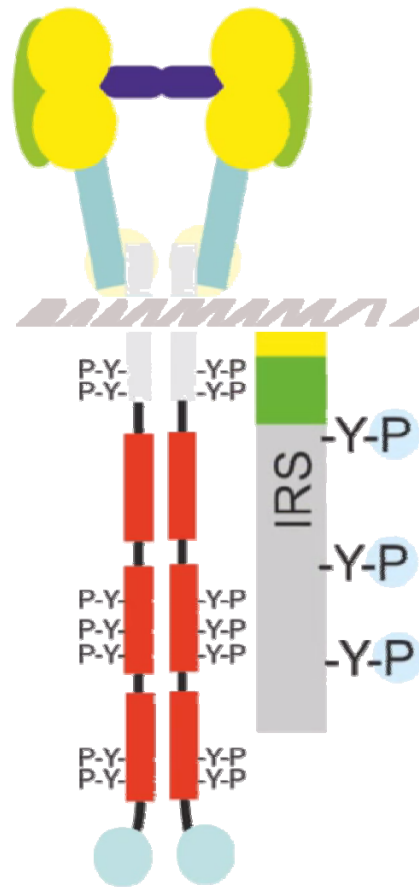
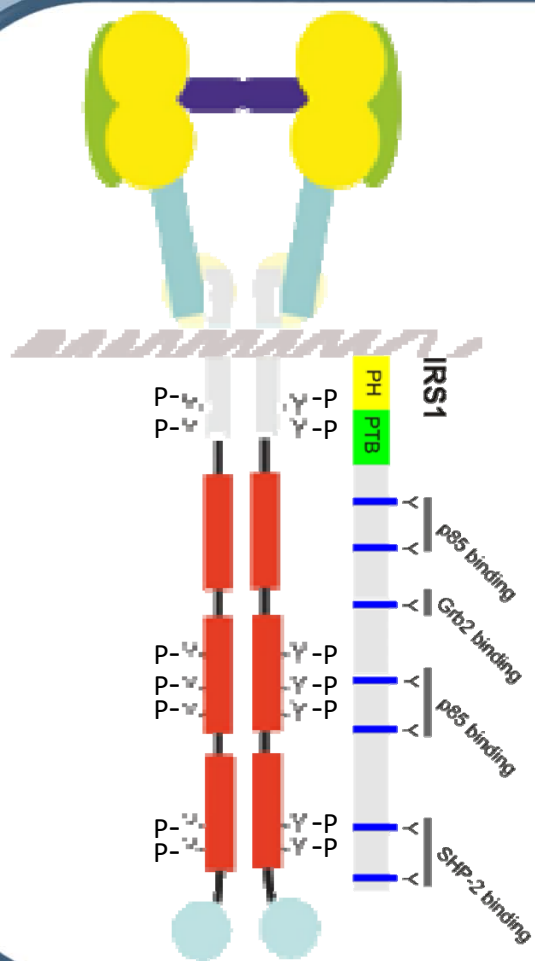


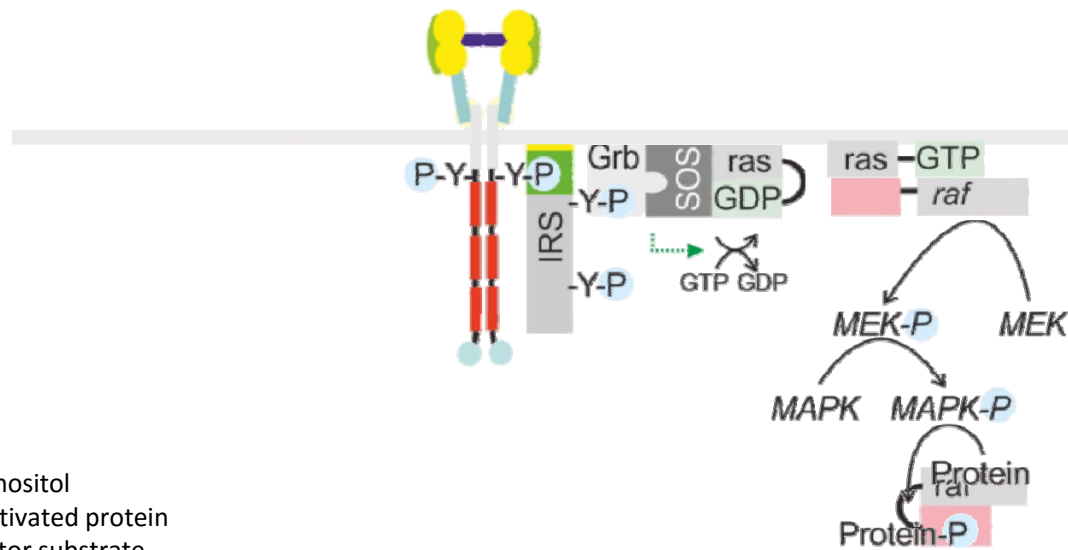
p85 binding

p85 binding

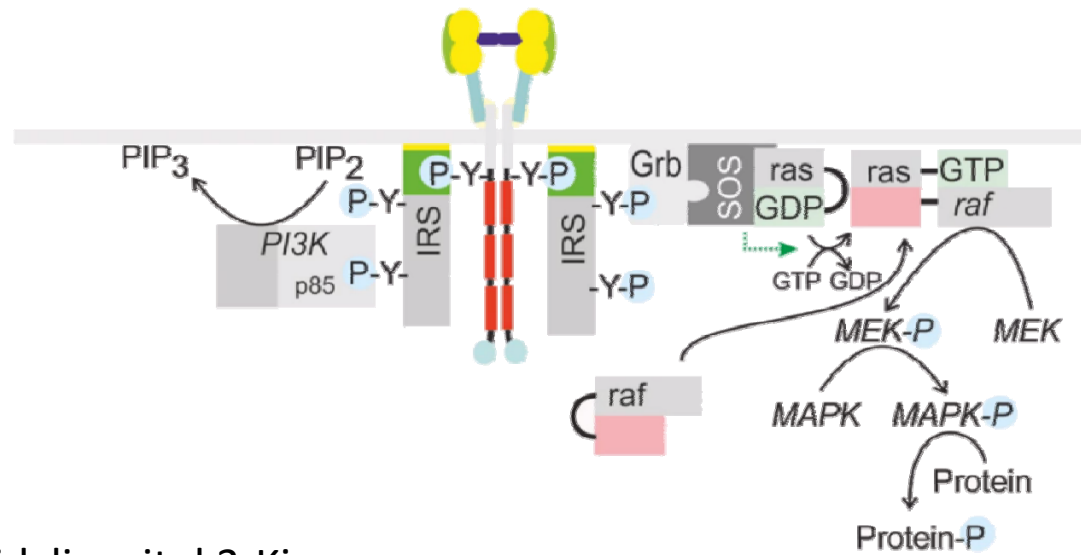
Grb2 binding

SHP-2 binding



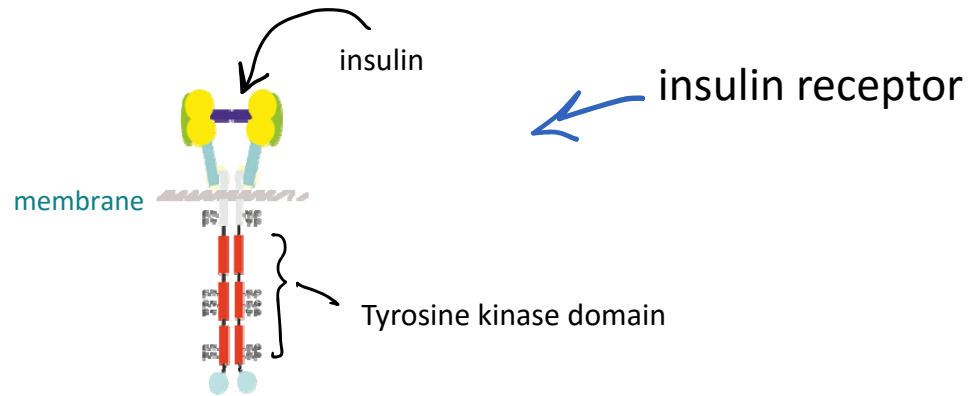


PI: phosphatidylinositol
 MAP: mitogen activated protein
 IRS: insulin receptor substrate
 Grb: growth factor receptor bound protein



PI3K-phosphatidylinositol 3-Kinase
 PIP₃ -phosphatidylinositol (3,4,5)-trisphosphate

Insulin signaling cascade



PI: phosphatidylinositol
MAP: mitogen activated protein
IRS: insulin receptor substrate

Phosphorylation of docking proteins
(IRS1-4, Shc, Gab-1)

Activation of signaling pathways
(PI3 kinase, MAP kinase)

Glucose transport

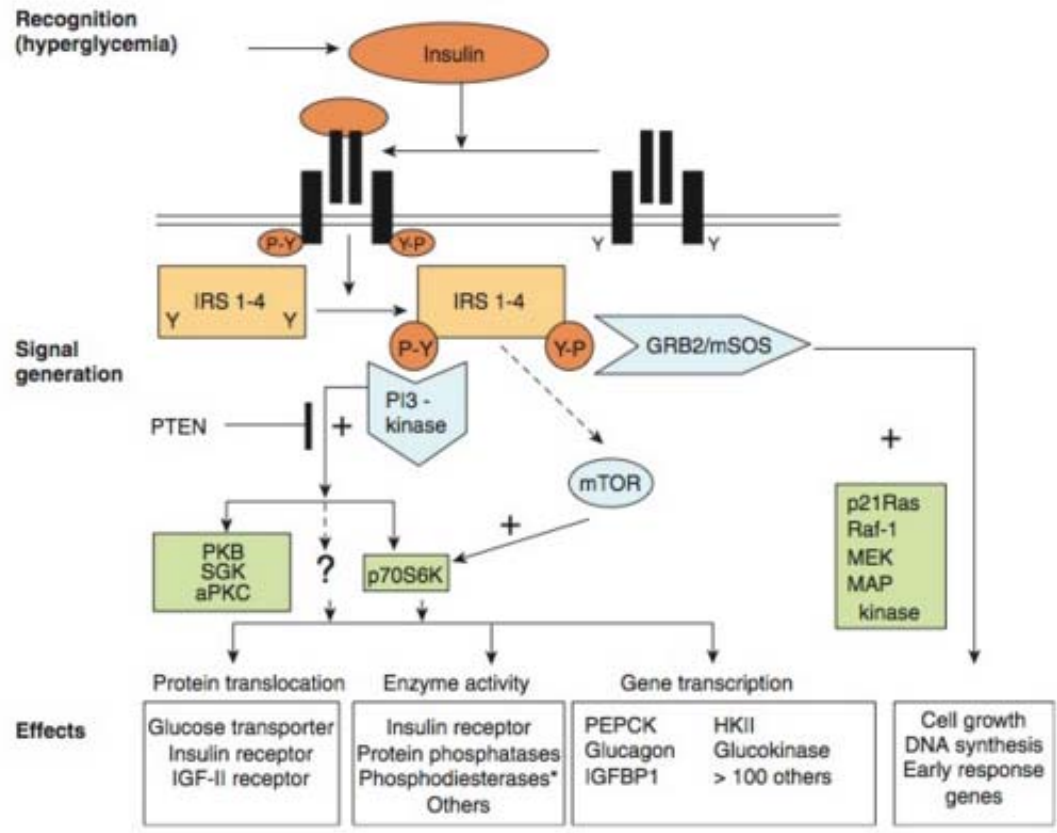
Glycogen synthesis

Lipogenesis
Lipolysis

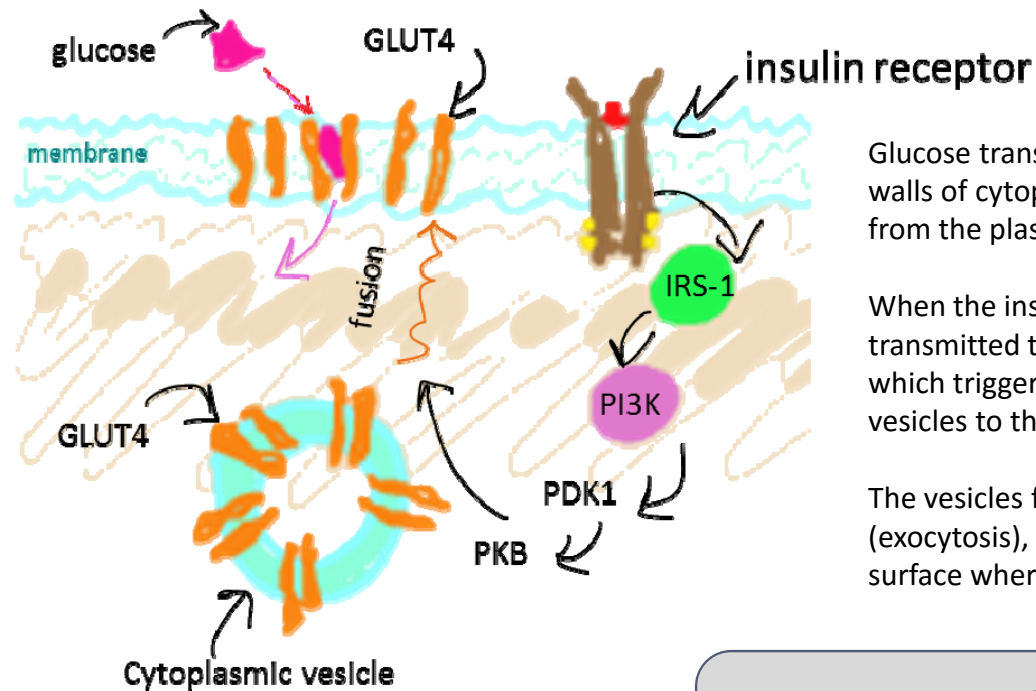
Protein synthesis

Gene expression

Cellular growth



PKB regulates glucose transport: GLUT4



Glucose transporters (GLUT4) are stored in the walls of cytoplasmic vesicles that form by budding from the plasma membrane (endocytosis).

When the insulin level increases, a signal is transmitted through the IRS-PI3K-PKB pathway, which triggers the translocation of cytoplasmic vesicles to the cell periphery.

The vesicles fuse with the plasma membrane (exocytosis), delivering the transporters to the cell surface where they can mediate glucose uptake.

PKB-Protein kinase B (aka: Akt) – key role in glucose metabolism, apoptosis, cell proliferation, transcription and migration.