

Name Of Eicosanoids

- Eicosanoids is a Generic term for the 20 Carbon related compounds like:
 - I. Prostaglandins (PGs)
 - II. Prostacyclins (PGI2)
 - III. Thromboxanes (TX)
 - IV. Leukotrienes (LT)
 - V. Lipoxins (LX)
 - VI. Resolvins
 - VII. Eoxins



Biosynthesis Of Eicosanoids

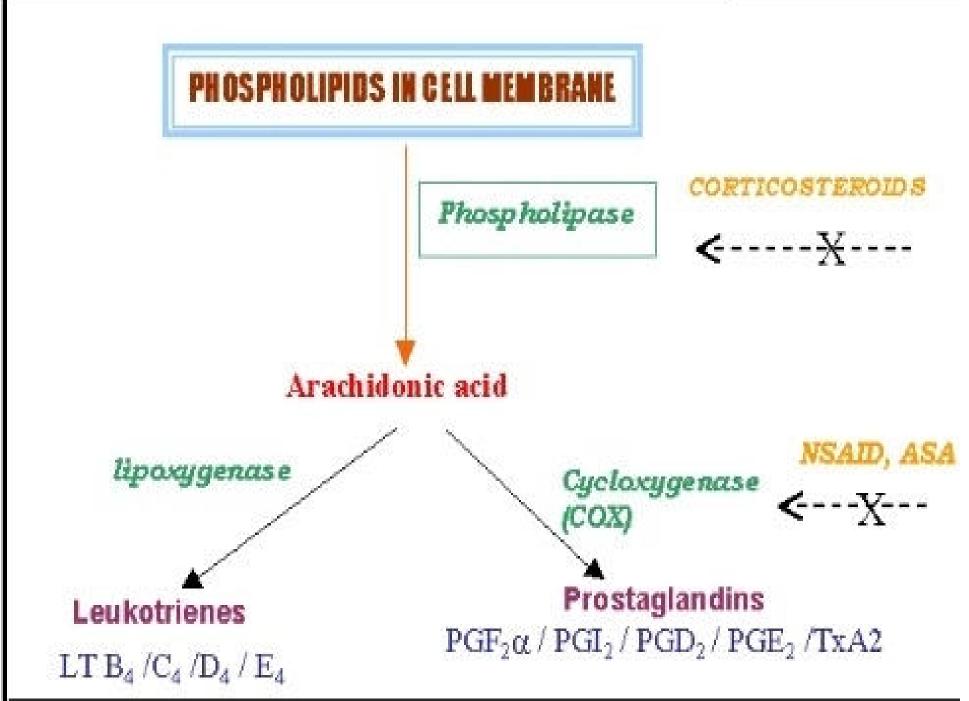
Eicosanoids are derivatives
 of Nutritional Essential
 Fatty acid/PUFAs.



- Eicosanoids are biosynthesized in the body from PUFAs:
 - 1. Mostly from Arachidonic acid/Eicosatetraenoic acid (PUFA)/Omega 6 Fatty acid
 - 2. Minorly from Timnodonic acid/Eicosapentaenoic / Omega 3 Fatty acid

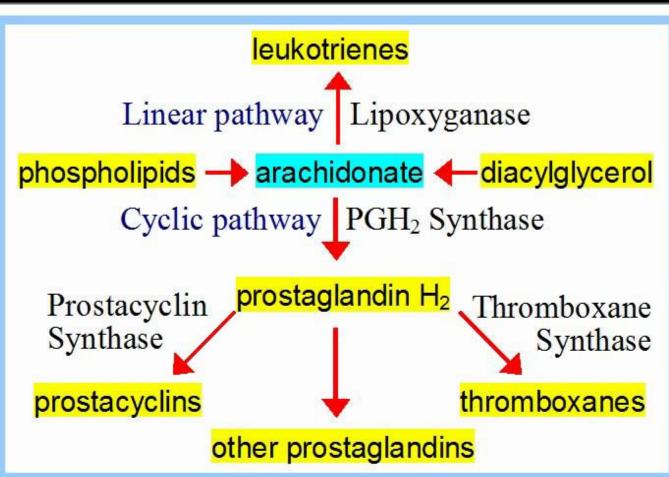
- During Eicosanoid Biosynthesis Mostly
- Arachidonic acid is released by Phospholipids Viz: Lecithin/PIP3
- By Phospholipase A2 activity





Two major pathways of eicosanoid metabolism.

Cyclic pathway:



Prostaglandin H₂ Synthase catalyzes the committed step in the "cyclic pathway" that leads to production of prostaglandins, prostacyclins, & thromboxanes.

Different cell types convert PGH₂ to different compounds.



- Eicosanoids has very short half life
- From seconds to few minutes

Classification Of Eicosanoids



- Prostanoids: Obtained by Cycloxygenase System:
 - Prostaglandin
 - Prostacyclins
 - Thromboxanes
- Leukotrienes and Lipoxins are obtained by Lipoxygenase System

Prostaglandins are Derivative of Arachidonic acid

(a) Arachidonic acid

(b) Prostaglandin E,



1. Prostaglandins (PGs)

- Prostaglandins are type of Eicosanoids.
- PGs also termed as Prostanoids
- Since they are obtained from parent compound Prostanoic acid



Biosynthesis Of Prostaglandins

Per day 1 mg of
 Prostaglandins are
 biosynthesized in human body.

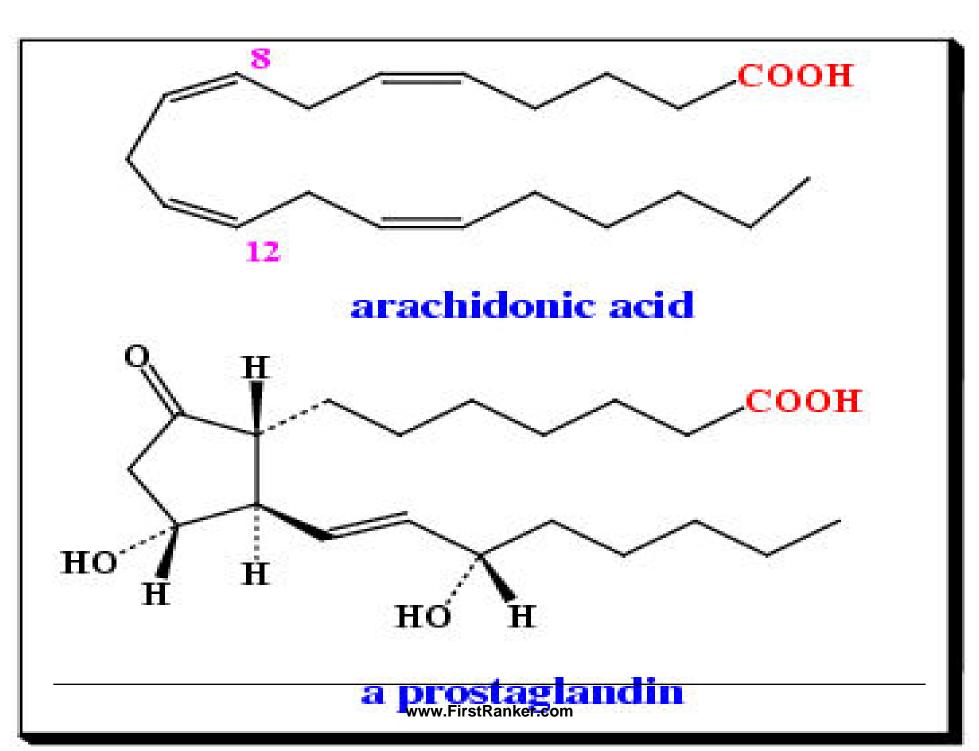


 Prostaglandins are derived from Arachidonic acid by Cycloxygenase system.

- Phospholipid Lecithin releases
 Arachidonic acid
- Arachidonic acid is used for Prostanoic acid synthesis.
- Prostanoic acid then
 biosynthesizes Prostaglandin in
 human body.



Structure and Types Of PGs





- Prostaglandin structure is complex and possess:
 - -Cyclopentane ring
 - –Double bond
 - -Carboxylic and Hydroxyl groups

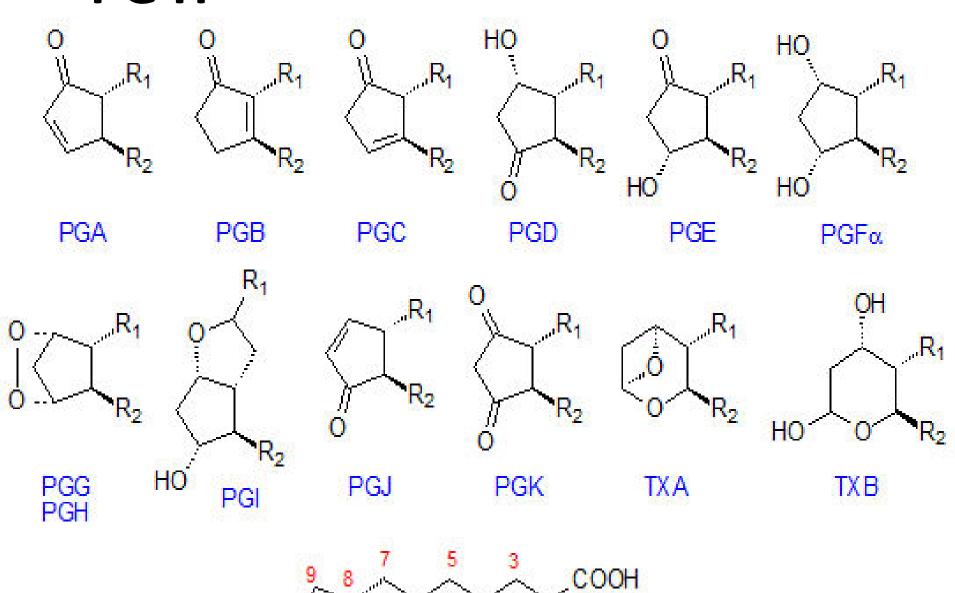
- Prostaglandins containsa
- Cyclopentane ring with Hydroxyl groups at C11 and C15

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Prostaglandins (PG) are of following Types:

- -PG A
- -PG B
- -PG C
- -PG D
- -PG E
- -PG F
- -PG G
- -PG H



10

Prostaglandin E1

Prostaglandin F_{3α}

Occurrence/Distribution Of PGs



Occurrence Of PGs

- Prostaglandin was first seen in Prostatic secretion and Semen.
- Later it was found that Prostaglandins are ubiquitous
- Present all over in human body tissues.

Functions OF Prostaglandins

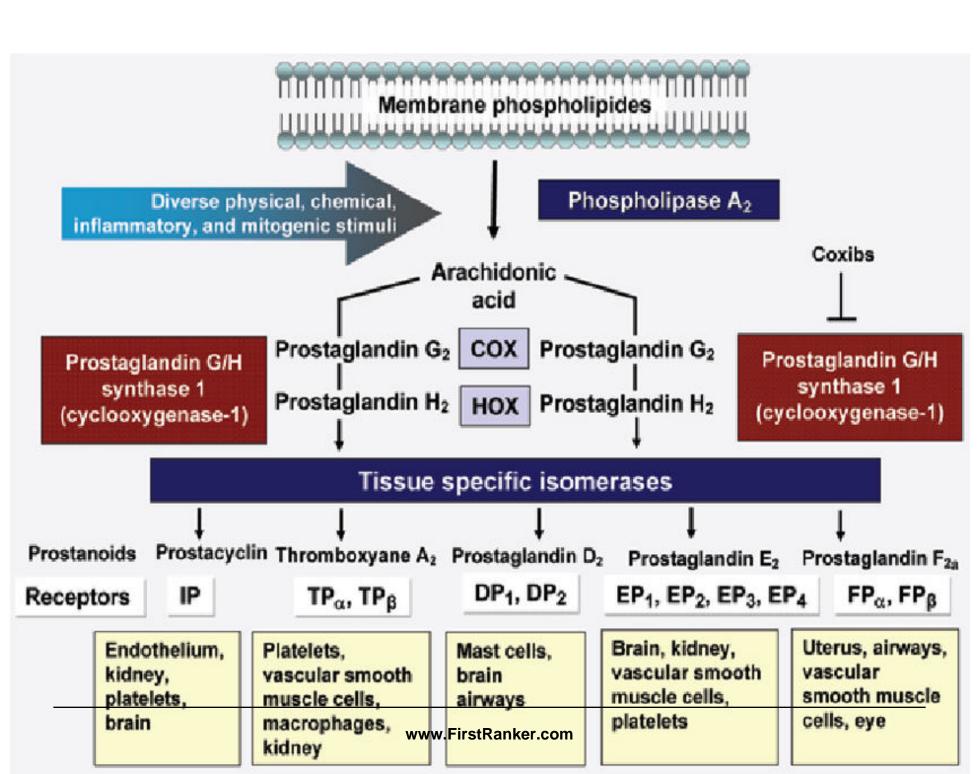


- Prostaglandins serve as Cell Signaling Agents/Local Hormones with.
 - -Paracrine in action (act on sites closely where they are produced/ neighboring cells).
 - -Autocrine in action that the sites where they are produced.

 PGs exert their function through G-Protein linked membrane receptors.



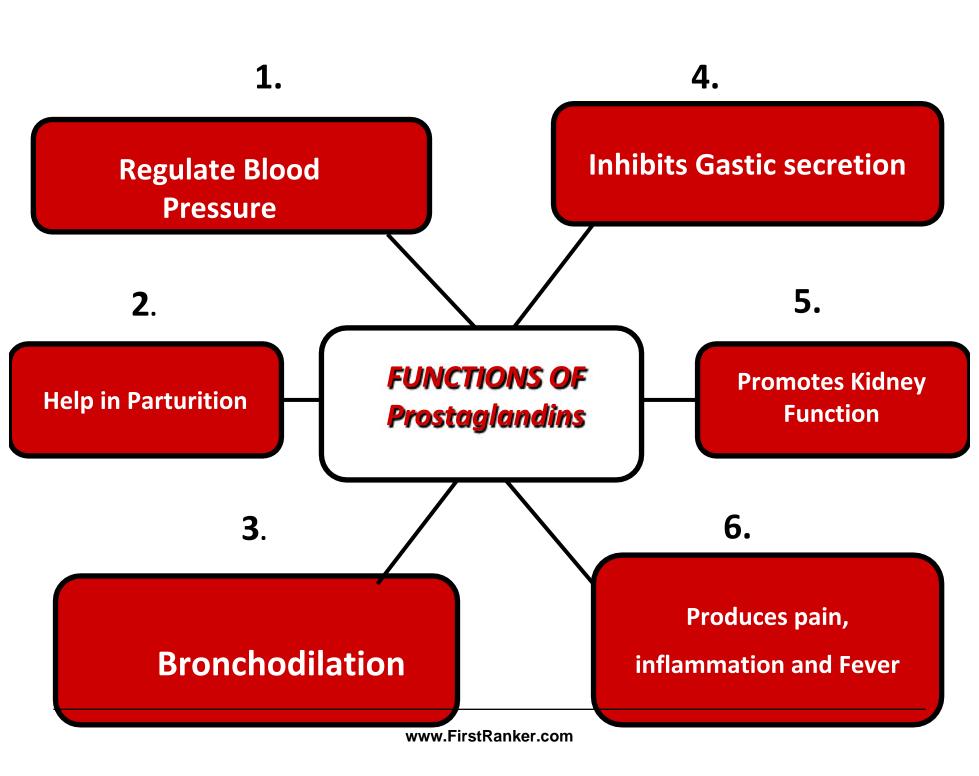
Prostaglandins have diverse functions on many tissues





Action of one PG is different in different tissues.

 Sometimes PGs bring out opposing action in same tissue.





1.Role Of PGs In Blood Vessels

PGs Regulate Blood Pressure

- PG A and PG E are Vasodilators.
- PGs lowers the blood pressure by:
 - -Increasing blood flow and
 - —Decreasing vascular resistance in blood vessels.



 PGs are used Therapeutically in treating Hypertension.

Prostaglandin occur at Platelets Inhibits Platelet Aggregation and

Thrombus formation



2. PGs Has Role in Uterus At The Time Of Parturition

PG naturally increases
 uterine contraction of
 smooth muscles which
 induces the delivery of baby.



- PGs can be therapeutically used as Abortificients during Medical Termination of Pregnancies (MTPs)
- PGs also arrests postpartum hemorrhage.

Prostanoids Therapeutic Uses

- Uterine Stimulation
- Carboprost (15-methyl PGF_{2α})
- Used by IM route for induction of abortion between 12th -20th gestational weeks
- Used at a dose of 250 µg every 1-3 hrs
- Dinoprost (PGF_{2α})
- Injection form for intra-amniotic administration
- Used to induce labour or abortion



3. Role Of Prostaglandins In Lungs

PGs in Lungs serve as
 Bronchodilators and
 Bronchoconstrictor of Lungs.

–PG E-Bronchodilator

-PG F- Bronchoconstrictor



PG E is used in treatment of Bronchial Asthma.

4. Role Of Prostaglandin In GIT



- Prostaglandin in stomach increases its motility and inhibits gastric secretion of HCL.
- PG is used in treatment of gastric ulcers.

5. Role Of Prostaglandins in Kidneys



 PGs in Kidneys increases GFR and promotes urine formation and urine out put.

 Thus helps in removing waste out of the body.

PGs Regulate Sleep and Wake Process

Use of PG D2 promotes Sleep



6.Effect Of PGs on Metabolism

- PGs Decreases Lipolysis (breakdown of TAG).
- PGs increases Glycogenesis.
- PGs promotes Steroidogenesis
 (Biosynthesis of Steroid hormones)
- PGs promotes mobilization of ionic
 Calcium from bones.



Production of PGs Promote Fever, Pain, Nausea Vomiting and Inflammation

Role Of PGs In Immunity And Inflammation

- Prostaglandins are produced in more amounts at the time of :
 - -Fever
 - -Pain
 - Nausea and Vomiting
 - -Inflammation
- Provide non specific immunity to body

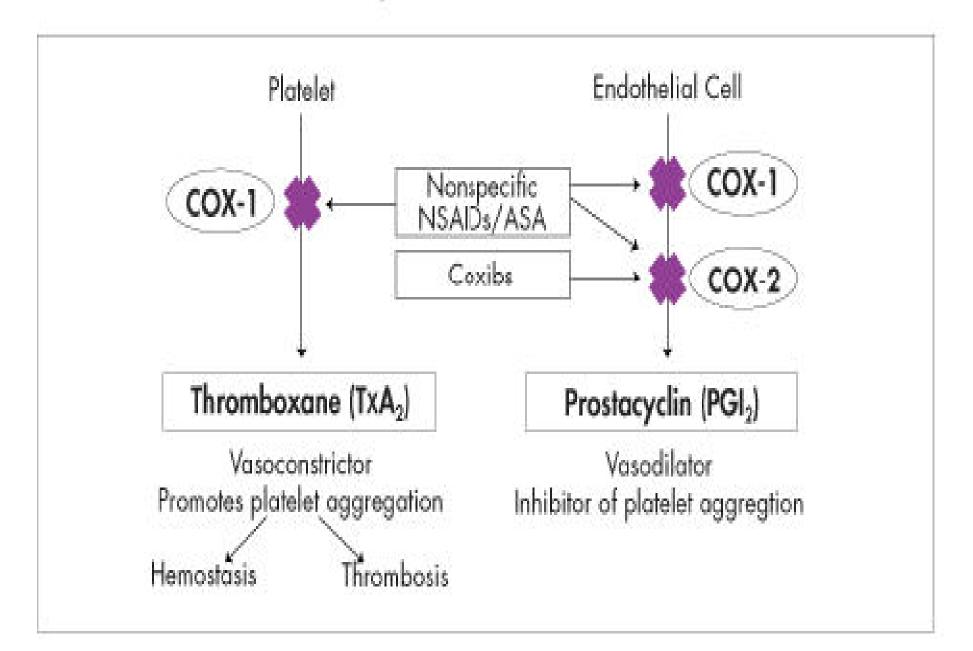


PGs are more produced ir inflammatory disorders like Rheumatoid Arthritis

- Drugs like NSAIDs Aspirin used in treating inflammatory disorders.
- Inhibits the Enzyme of Cycloxygenase system
- Which in turn inhibits the biosynthesis of Prostaglandins.



FIGURE 7. Effects of NSAIDs on platelets and endothelium.



Drug	Preparation	Use
Dinoprostone	Vaginal tab/gel	Induction labour Mid term abortion
Dinoprost	Intra amniotic inj	Mid term abortion
Carboprost	IM, Intra amniotic inj	Mid term abortion Control of PPH
Gemeprost	Vaginal pessary	Cervical priming in early pregnancy
Alprostadil	IV infusion, IV inj Intra cavernosal inj	Maintenance of a patent ductus arteriosus in neonates Erectile dysfunction
Misoprostol Enoprostil	Oral	Abortion & Peptic ulcer Peptic ulcer
Epoprostenol	IV infusion	Pulmonary hypertension
Latanoprostol	Topical	Glaucoma
iloprost	IM www.FirstRan	Dec. infact size, when given IM



Prostaglandin	Locations	Effects
$\overline{D_2}$	Airways, brain, mast cells	Bronchoconstriction
E ₂	Brain, kidneys, vascular smooth muscle cells, platelets	Bronchodilation
		Gastroprotection
		 Increased activity of GI smooth muscle
		 Increased sensitivity to pain
		 Increased body temperature
		Vasodilation
F ₂	Airways, eyes, uterus, vascular smooth muscle	Bronchoconstriction
		 Increased activity of GI smooth muscle
		 Increased uterine contraction (eg. menstrual cramps)
I ₂ (Prostacyclin)	Brain, endothelium, kidneys, platelets	Decreased platelet aggregation
		Gastroprotection
		Vasodilation
Thromboxane A ₂	Kidneys, macrophages, platelets, vascular smooth muscle	 Increased platelet aggregation
(*)		Vasoconstriction

PHYSIOLOGICAL EFFECT

Inflammation

- PGs are natural mediators of inflammation
- PGE2 & PGE1

 induce signs of inflammation-redness, heat (vasodilation), swelling, edema, etc

Pain & Fever

- Pyrogen stimulates PG synthesis & release of PGE2 in the Hypothalamus region of brain where temp is regulated.
- PGE2 can enhance the intensity & duration of pain caused by bradykinin & histamine.

Reproduction

- PGE2 and PGF2 have been used to induce parturition as well as to terminate pregnancy.
- Cytotec
- PGE series of PG may play a role in male infertility



PHYSIOLOGICAL EFFECTS

Peptic Ulegr

 Synthetic PGs have been useful in inhibiting gastric secretions in patients with gastric ulcers.

Regulation of Blood Pressure

- PGE, PGA & PGI2
 being vasodilators
 lower the systemic
 arterial pressure;
 increase local
 blood flow.
- Might help in treating
 Hypertension

Puetus Arteriosus

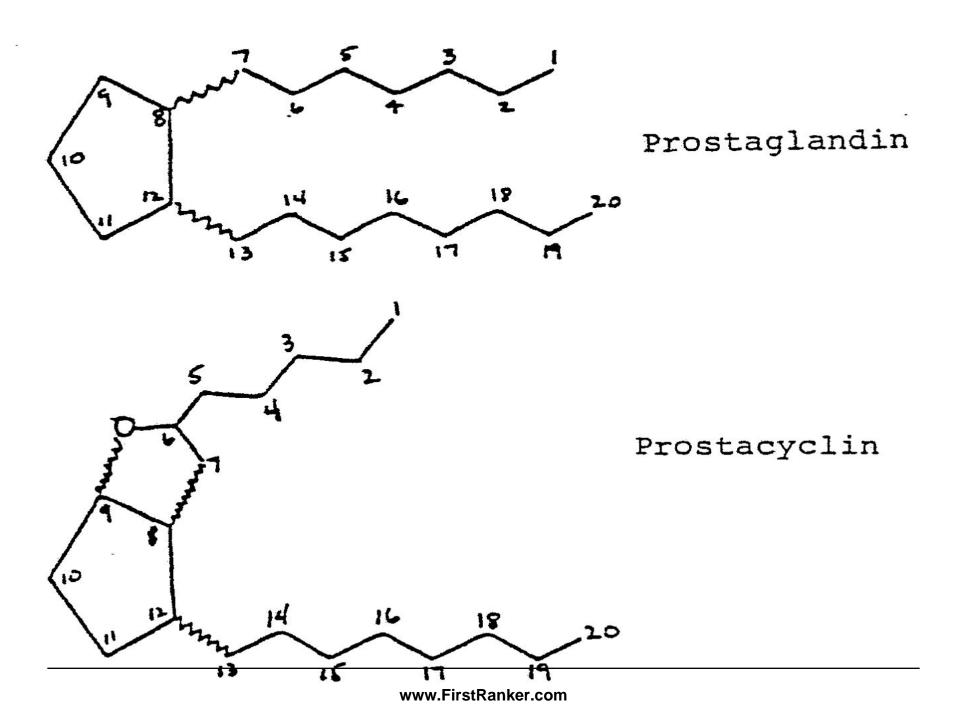
- PGE2 maintains the patency of DA prior to birth.
- If DA remains open after birth COO inhibitor like indomethacin can be given
- Infants with congenital abnormalities are administered PG to maintain blood flow.

2. Prostacyclins (PGI₂)



Prostacyclins (PGI₂)

- Prostacyclins are type of Eicosanoids/
 Prostanoids.
- Principally formed in vascular endothelium
- They are Platelet Aggregation Inhibition Factors
- Biosynthesized by enzyme Prostacyclin Synthetase.





Roles of Prostacyclins

- Prostacyclins are Vasodilators.
- Prostacyclins like Prostaglandins inhibit platelet aggregation.
- Prostacyclins prevent Thrombus/clot formation.

3. Thromboxanes (TX)



Thromboxanes (TX)

 Thromboxanes are also termed as Platelet Aggregating Factor (PAF).

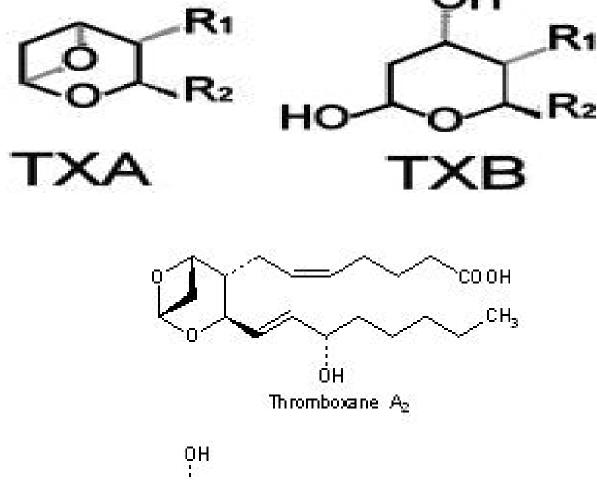
 Thromboxanes are Prostanoids produced by Thrombocytes (platelets)

By Enzyme Thromboxy
 Synthase.



Structure Of Thromboxanes

 Thromboxanes possess a cyclic Ether in their structures.





Types Of Thromboxanes

- TX A and TX B are types of Thromboxanes.
- TXA2 is more prominent in human body.

Functions Of Thromboxanes

- Thromboxanes are vasoconstrictors.
- Thromboxanes enhances platelet aggregation.
- Thromboxanes favors blood clot formation during blood coagulation.



- Thromboxanes and Prostacyclins are antagonistic to each other balancing their activities.
- Increased Thromboxane activity results in Thrombosis.

4. Leukotrienes



Leukotrienes

- Leukotrienes are type of Eicosanoids
- Biosynthesized through Lipoxygenase system in Leukocytes.

 Leukotrienes are a family of Eicosanoid

 They are Inflammatory mediators produced in leukocytes.



Structure And Types Of Leukotrienes

LEUKOTRIENE E4 www.FirstRanker.com

LEUKOTRIENE D4



Leukotrienes Structure and Types

- Leukotrines are Hydroxy derivatives possessing conjugated Trienes.
 - Types of Leukotrienes:
- LTB4, LTC4, LTD4 and LTE4

Occurrence Of Leukotrienes



 Early discovery of Leukotrienes was in Leukocytes.

- Leukotrienes are also produced and present in.
 - -Mast cells
 - -Lung
 - -Heart
 - -Spleen



Effect Of Leukotrienes

- Leukotrienes are biologically active components of Slow Reacting Substances (SRS-A).
- SRS-A are released during Allergic reactions/Anaphylaxis.

• Leukotrienes are 1001000 times more
potent than Histamine
during allergic
reactions.



LTB₄ is a potent chemotactic agent.

(chemical substance which mediates movement of cells).

- Leukotrienes by action are:
 - -Bronchoconstrictors
 - -Vasoconstrictors



- LTC₄, LTD₄ and LTE₄ are Slow Releasing Substance of anaphylaxis (SRS A),
- SRS-A causes fluid leakage from blood vessels to an inflamed area.

Levels Of Leukotrienes Increased In

- Allergies
- Allergic rhinitis
- Asthma

(Tightening of airways, difficult to breathe)

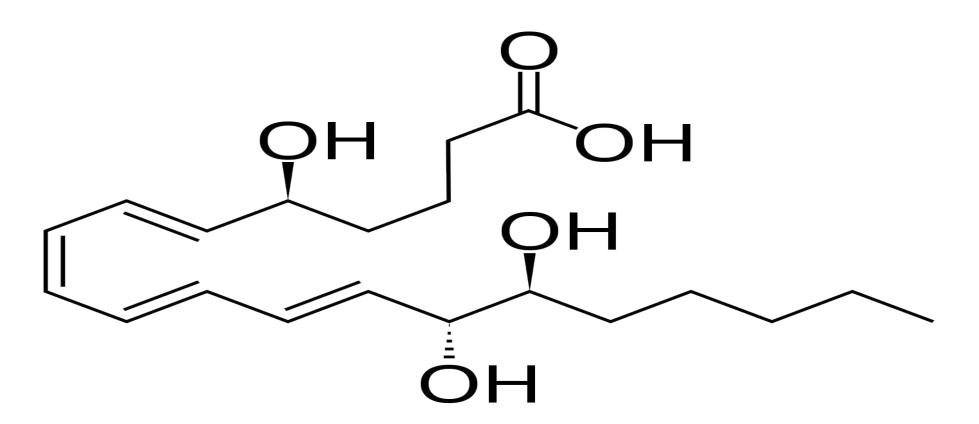


 Overproduction of Leukotrienes causes
 Anaphylactic shocks.

An Antiasthmatic drug
 Prednisone inhibits
 Leukotriene
 biosynthesis.



5.Lipoxins



Lipoxins

 Lipoxins are Eicosanoids produced in Leukocytes of human body.



Roles Of Lipoxins

Lipoxins are essential in maintaining tissue homeostasis and resolve inflammation.

Lipoxins are:

- -Vasoactive/Vasodilators
- -Anti-inflammatory
- -Anti-proliferative
- —Pro-resolving
- —Immunoregulatory
- -Chemotactic substances

Omega 6 and Omega 3 Derived Eicosanoids Are Opposite in Action



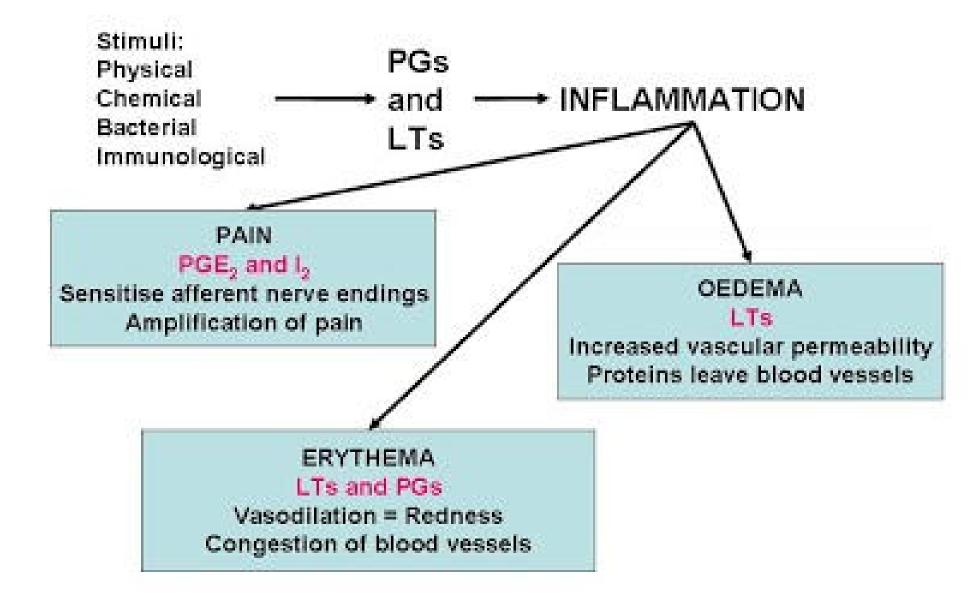
- Omega 6 Derived Eicosanoids
- Prostaglandins:
 - -Promotes Inflammation
- Omega 3 Derived Eicosanoids

Resolvins and Eoxins are:

- —Anti inflammatory
- —Anti allergy
- —Anti hypertensive
- -Anti cancer
- Anti atherosclerotic

Effects of Eicosanoids





- Local pain and irritation
- Bronchospasm
- Gastrointestinal disturbances: nausea, vomiting, cramping, and diarrhea.

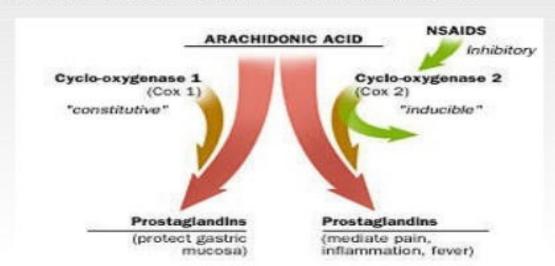


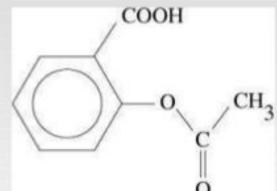
NSAID: ASPIRIN

- Acetyl salicylic acid (Aspirin) is an effective anti-platelet aggregator.
- It irreversibly acetylates the platelets COO system and inhibits it thus hampering in formation of Thromboxane A2
- At time same time it opposes the formation of PGI2 in the endothelial cells, which is a vasodilator.

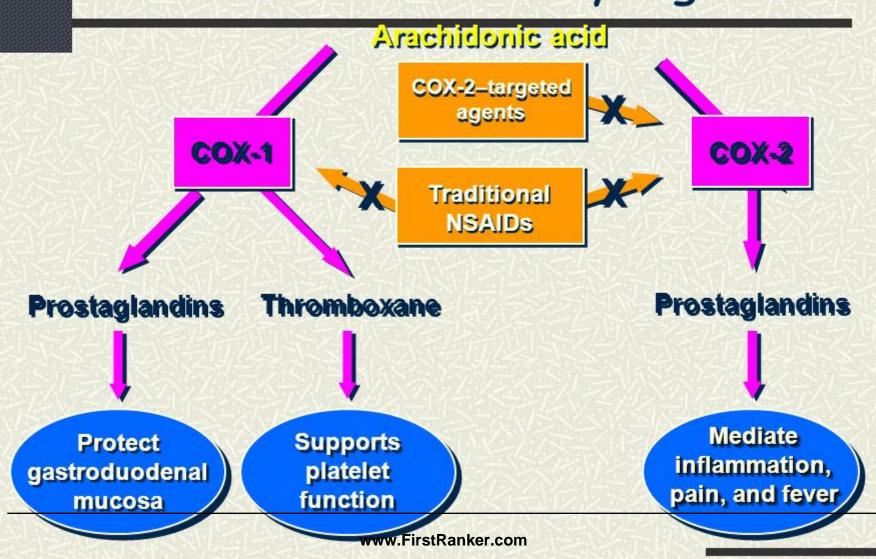
CLINICAL USES:

- Management of angina & MI
- Prevention of stroke & cerebral ischemic attacks



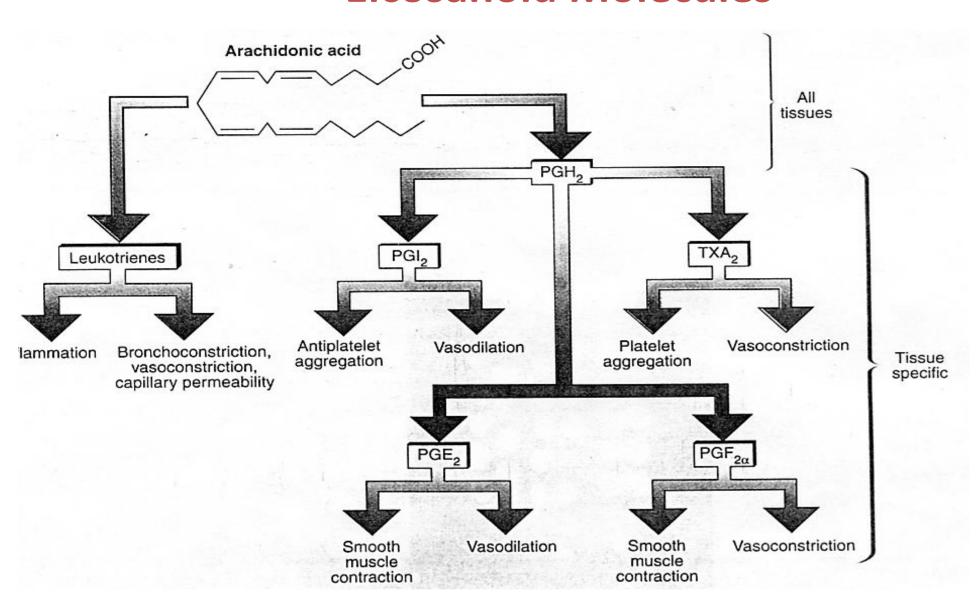


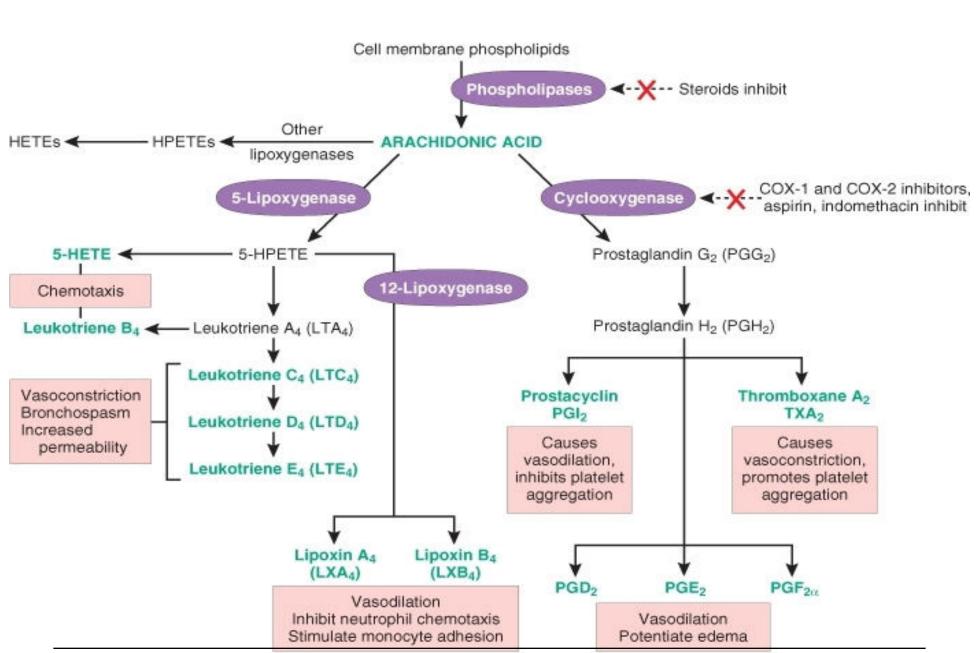
Mechanism of Action of Anti-inflammatory Agents





Biological Actions of Selected Eicosanoid Molecules







Amphipathic Lipids

Examples Of Amphipathic Body Lipids

- Phospholipids
- Glycolipids
- Free Fatty acids
- Free Cholesterol



Features Of Amphipathic Lipids

- Structure has both polar and non polar groups
- Partially soluble
- Orientation of groups:
 - —Polar group directed towards water phase
 - -Non polar group directed in oil phase/away from water.

Role Of Amphipathic Lipids



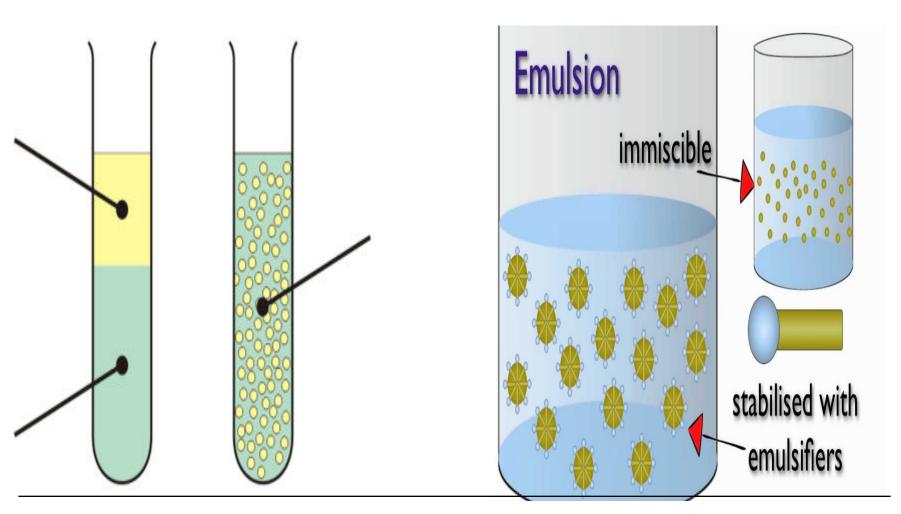
Amphipathic Lipids have following biological Significances in forming:

-Biomembranes:

(Phospholipid bilayer, Glycolipids and Cholesterol)

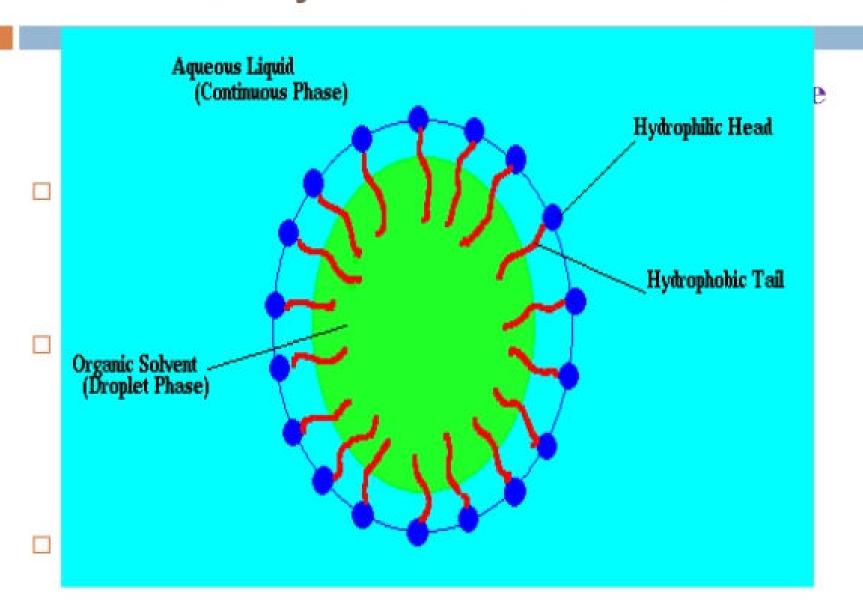
- -Emulsions:
- In intestine PL help in Lipids Digestion
- -Micelles:
- -In intestine help in Lipids Absorption
- -Lipoproteins:
- For transport of nonpolar/neutral Lipids
- -Liposomes:
- Agents for Drug / Gene carrier

Emulsions





Theory of emulsification



Emulsions

- Emulsions are small droplets of oils miscible in aqueous phase.
- Emulsions are usually formed by Nonpolar and Amphipathic Lipids along with Bile Salts in aqueous phase.



In Human GIT

 Emulsions are formed as small, miscible dietary Lipid droplets in aqueous phase of intestinal juice in intestinal lumen.

• Emulsions are formed during the process of Emulsification in GIT.



Requirements For Emulsification

- Emulsifying agents:
 - —Bile salts (Major)
 - -Amphipathic Lipids (Minor)
- Mechanical force aids emulsification.

- Emulsifying agents reduces surface tension.
- Emulsifying agents form a surface layer of separating main bulk of nonpolar Lipids from aqueous phase.



Emulsions are stabilized by detergent action of emulsifying agents.

Emulsification Process

- Emulsification process takes place in an aqueous phase of intestinal juice in intestinal lumen and forms Emulsions.
- During Emulsification Hydrophobic or nonpolar dietary Lipids (TAG) are mixed with an emulsifying agents:
 - -Bile salts
 - —Lecithin(Amphipathic Lipids)

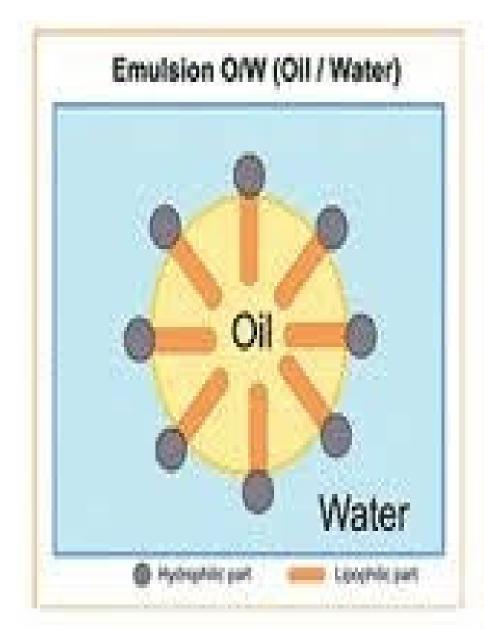


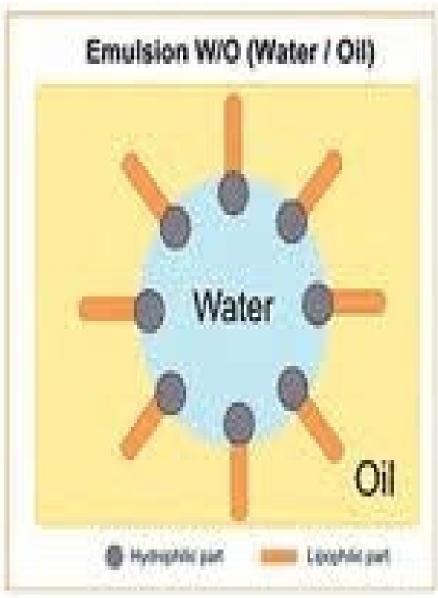
 Mechanical force(provided by intestinal peristaltic movement) facilitates the process of Emulsification.

Types Of Emulsions

- I. Oil In Water
- II. Water In Oil







Significance Of Emulsions

- Emulsions formed in the intestinal lumen help in the digestion of dietary Lipids.
- The dietary large droplets of Fat/Oil are transformed to small, miscible droplets as Emulsions.



Emulsions bring the dietary
 Lipids in contact with Lipid
 digesting Enzymes present in
 aqueous phase of intestinal
 juice.

Micelles

- Micelles have a disc like shape.
- Critical concentration of Amphipathic Lipids in aqueous medium form Micelles(~200 nm).
- Bile salts help in forming Mixed Micelles.



- Mixed Micelles are formed in Intestine after digestion of Lipids.
- By an aggregation of various forms of dietary digested Lipids with Bile salts.

Aggregation of various
 digestive end products of
 dietary Lipids covered with a
 peripheral layer of Bile salts
 form Mixed Micelles in
 intestinal lumen.



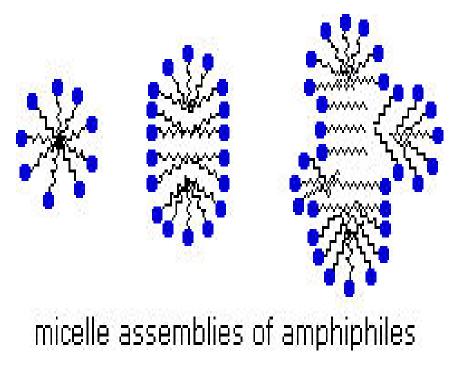
 Mixed Micelles contain the non polar Lipids in the interior portions and polar Bile salts on the exterior.

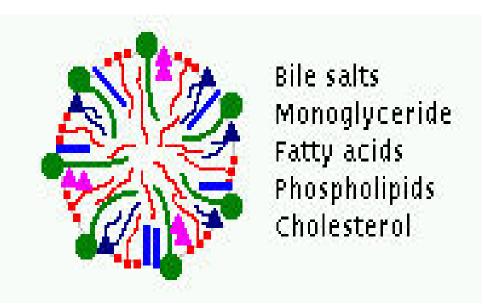
Significance Of Mixed Micelles

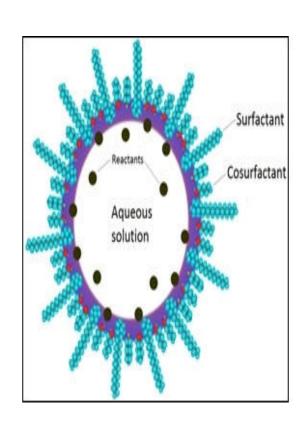
- Mixed Micelles helps in absorption of dietary Lipids
- From intestinal lumen into intestinal mucosal cells.









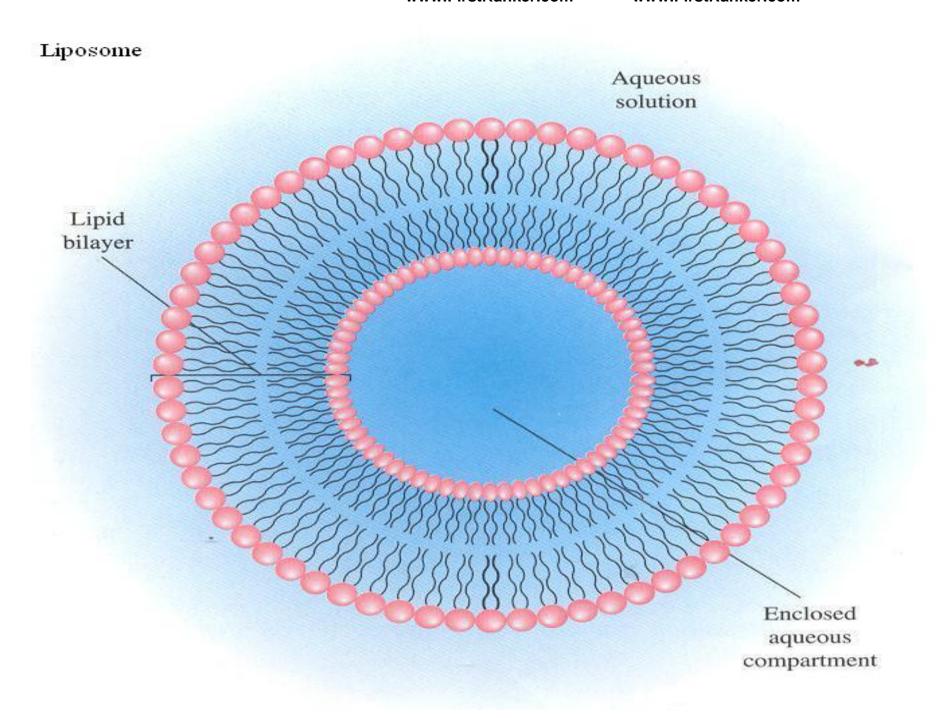


Liposomes

- Amphipathic Lipids when exposed to high frequency sound waves (Ultra Sonication) in aqueous medium to agitate particles and form Liposomes.
- Liposomes can be prepared by disrupting biological membranes by ultra

sonication(>20 Kww.FiZstRanker.com





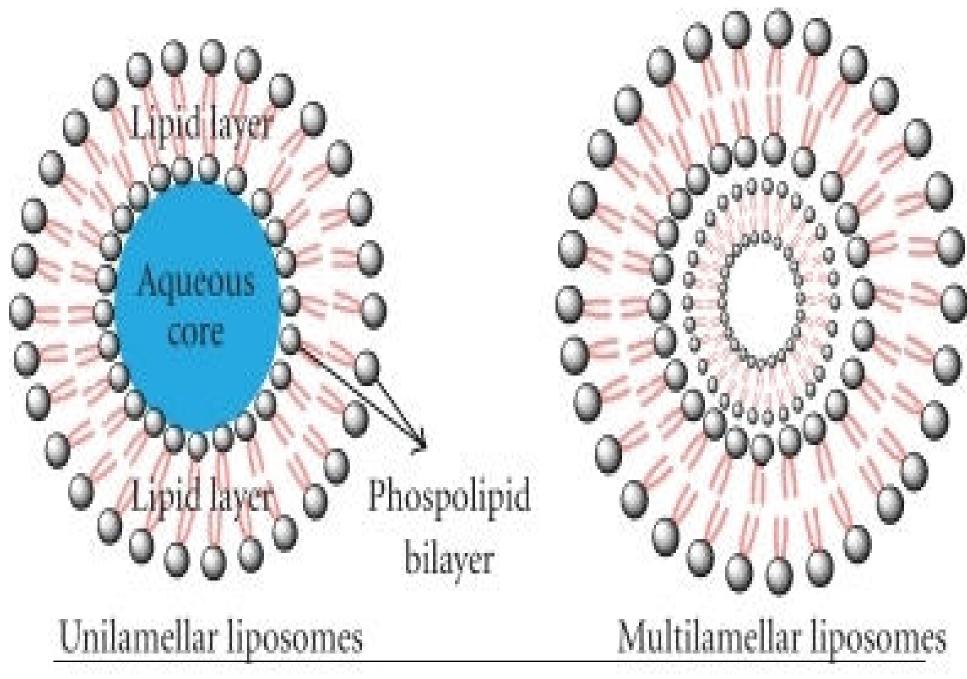
Structures Of Liposomes

- Liposomes are composite structures made of largely phospholipids and small amounts of other molecules
- Liposomes has spheres of one/ many Lipid bilayers.
- Liposomes contain aqueous regions(polar phase) and intermittently lipid bilayer (non polar phase).



Types Of Liposomes

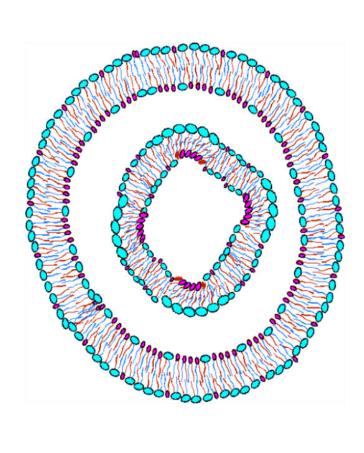
- Unilamellar Liposome
- Multilamellar Liposome











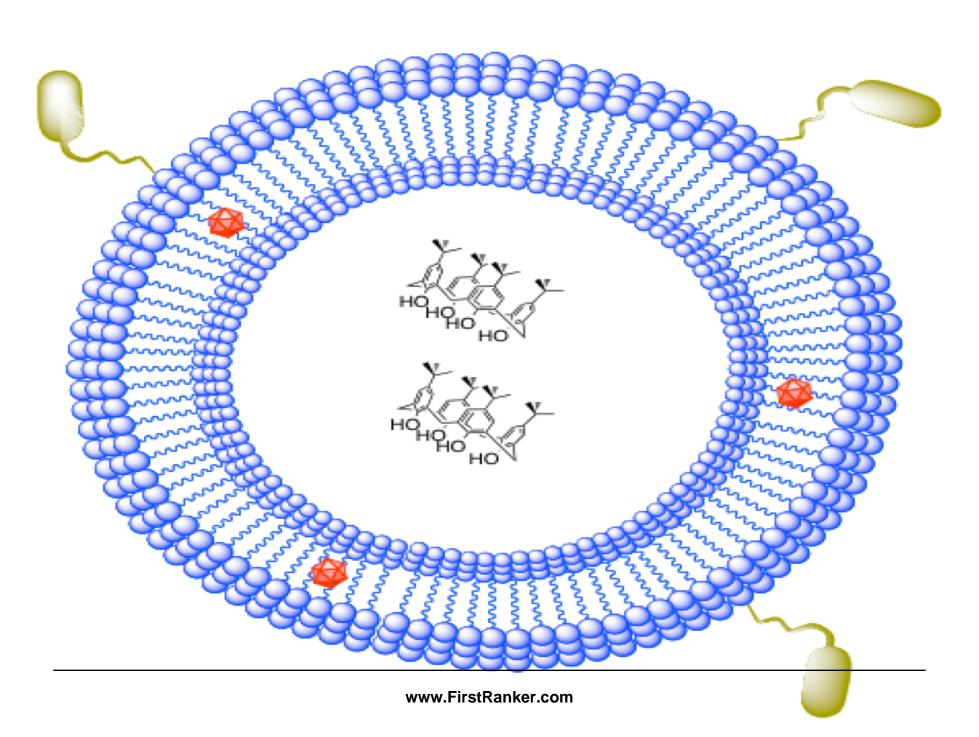
Applications Of Liposomes

- Liposomes are vehicles for administration of drug through blood, targeted to specific organs.
- Topical transdermal delivery of drugs.
- Transfer of Gene into vascular cells



 Water insoluble drugs are carried in Hydrophobic region of Liposome.

 Water soluble drugs are carried in Hydrophilic region of Liposomes.





Biomedical Importances Of Body Lipids

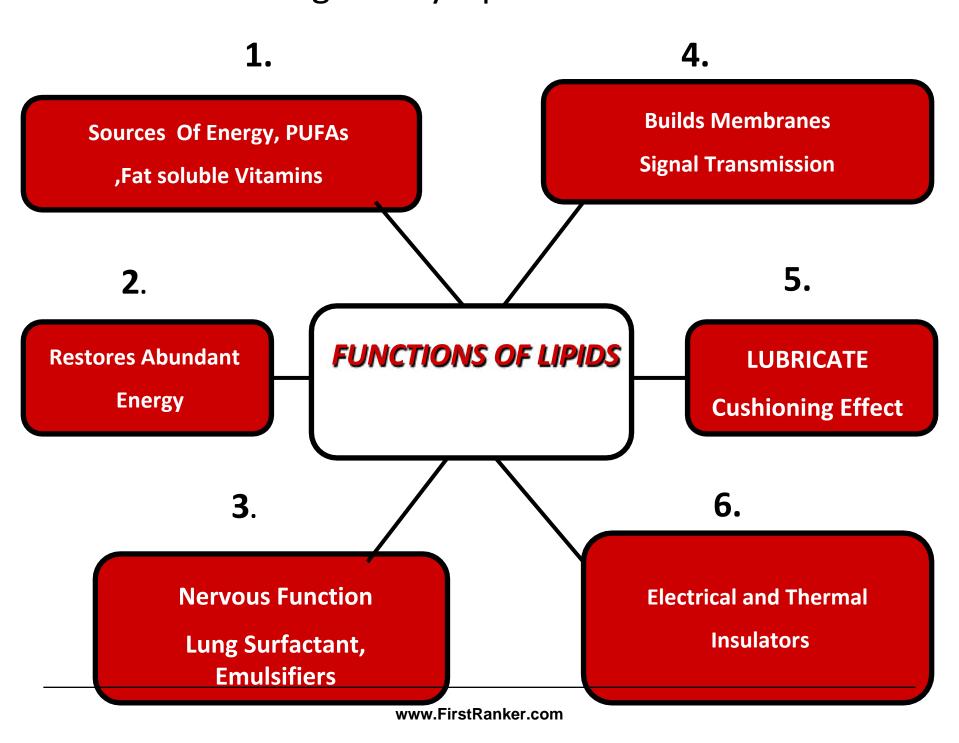
Roles of 7 Biomedically Important Lipids

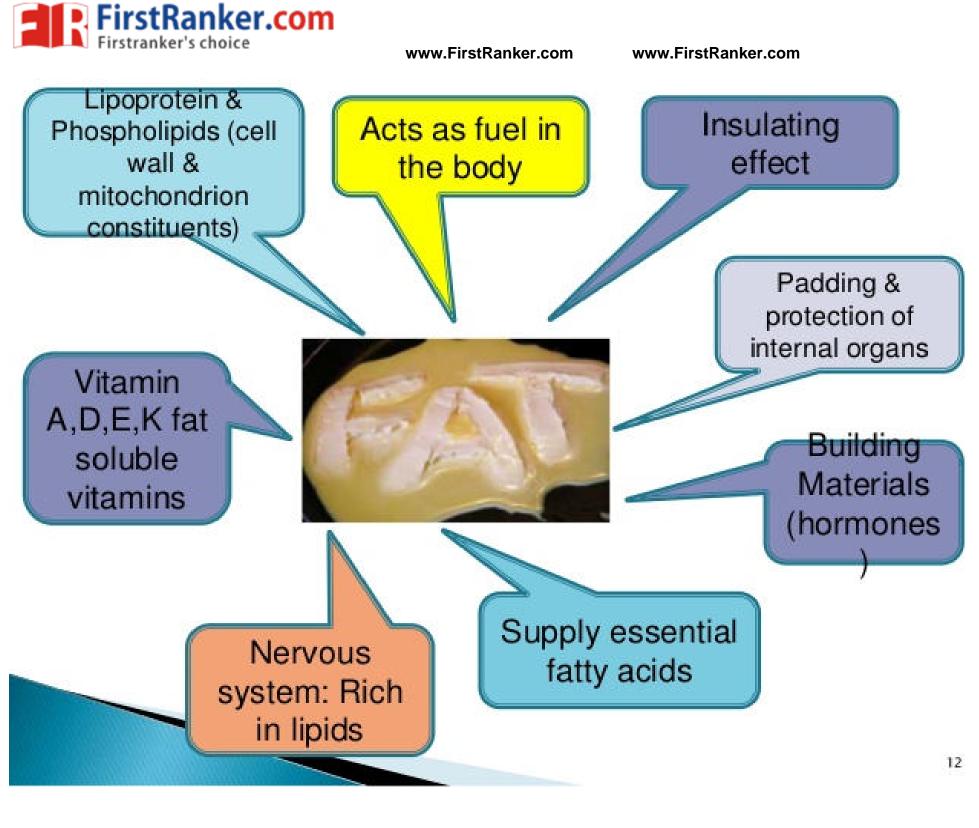
- 1. Fatty Acids (FAs)
- 2. Triacylglycerol (TAG)
- 3. Phospholipids (PL)
- 4. Lipoproteins (LP)
- 5. Glycolipids
- 6. Cholesterol (Free)Cholesterol-Ester(Esterified
- 7. Eicosanoids (PGs,PGI,TX,LT,LX,Resolvin)



Body Lipids Functions

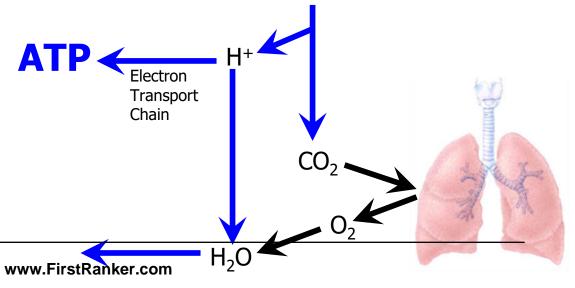
- 1. Secondary Source of Energy
- 2. Energy Storage Lipids- Long term use
- 3. Thermal and Electrical Insulators
- 4. Cushioning Effect and Shock absorber
- 5. Shape and Contour to body
- 6. Structural Lipids- Biomembrane components
- 7. Cell antigens, receptors, anchoring sites
- 8. Signal Transduction and Nerve Impulse conduction
- 9. Lung Surfactant helps in normal respiration
- 10. Emulsifiers helps in Lipid digestion and absorption
- 11. Transport Lipids
- 12. Metabolic regulatory Lipids





Fatty acids of TAG is a Source of Energy

Energy-Containing Nutrients (C and H)

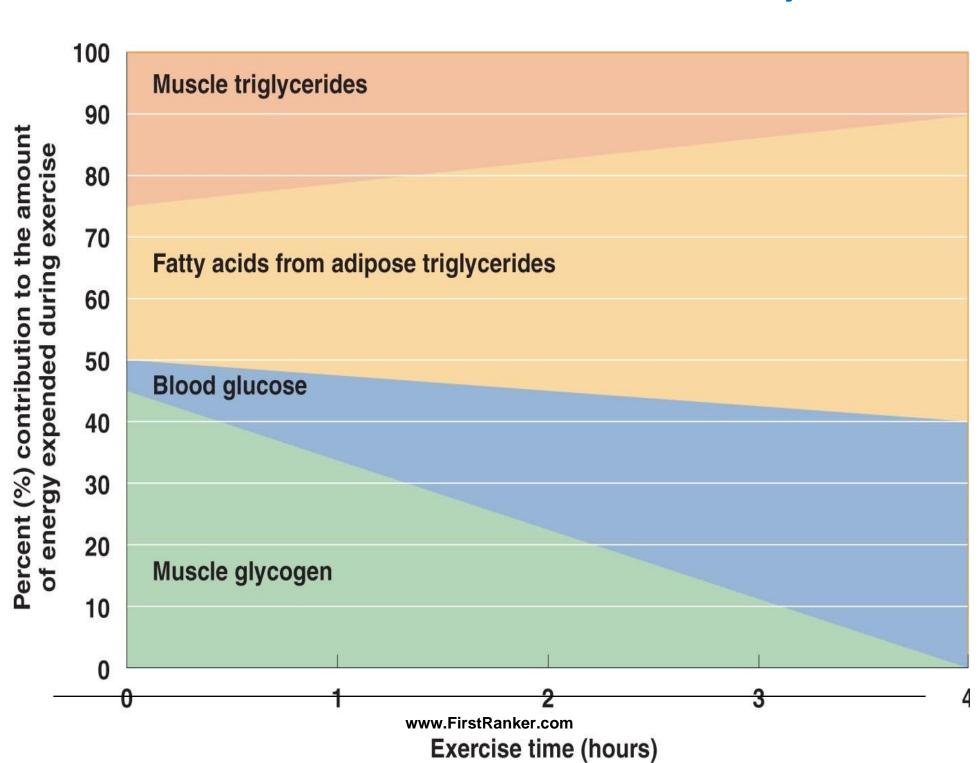




Good About Body Lipids

- Liberate 9 kcal per gram of TAG.
- Major fuel at rest
- Endurance Exercise
- Source of:
 - Essential fatty acids
 - Fat-soluble vitamins

- Regulates cell function
- Maintains membrane structure
- Improve nerve function
- Provides flavors and textures of foods
- Gives satiety value





Disorders Associated To Lipids

- Obesity
- Atherosclerosis
- Respiratory Distress Syndrome
- Fatty Liver
- Hyperlipoproteinemias
- Hypolipoproteinemias
- Necrosis ,Oxidative damage of biomembranes due to Lipid peroxidation
- Lipid Storage Disorders

Common Lipids Associated Disorders

- Obesity
- Metabolic Syndrome
 - -Atherosclerosis
 - -Coronary Heart Disease
 - -Hypertension
 - -Diabetes Mellitus



Table I Lipid levels (mg/DL) in human beings with known heart disease

Test	Desirable	Borderline	Undesirabl
Total cholesterol	< 200	200-240	>240
HDL cholesterol	>45	35-45	<35
Triglycerides	< 200	200-400	>400
LDL cholesterol	<130	130-160	>160
Cholesterol/HDL	< 4.5	4.5-7.5	>5.5
LDL/HDL	< 3.0	3.5	>5.0

Lipid Storage Disorders Inborn Errors Of Lipid Metabolism

- Congenital Defects where deficient of Enzymes
- Affects an Abnormal accumulation of Lipid forms
- In cells and tissues affecting
 there functionality.

Galactocerebrosides

Accumulation of

Ceramides



		WWW. Hoteldin	ker.com www.FirstRank	
S.No	Lipid Storage Disorder		Enzyme Defect and Abnormal Accumulation of	
1	Niemann Picks Disease		Sphingomyelinase Sphingomyelins	
2	Gaucher's Disease		Beta Glucocerebrosidase Glucocerebrosides	
3	Krabbe's Disease		Beta Galactosidase Galactocerebrosides	
4	Tay Sach's Disease		Hexoseaminidase-A Gangliosides	
5	Farber's Dis	sease	Ceramidase Ceramides	
Huma	an body Lipids	Associated Disorders	Biochemical Defects	Biochemical Alterations
	an body Lipids acylglycerol	Associated Disorders Obesity Metabolic syndrome fatty Liver	Excess deposition of TAG in Adipocytes and Liver	Hyperlipidaemias Hypertriglyceridemia Atheroma's
		Obesity Metabolic syndrome	Excess deposition of TAG in Adipocytes and	Hyperlipidaemias Hypertriglyceridemia
Tria	acylglycerol	Obesity Metabolic syndrome fatty Liver	Excess deposition of TAG in Adipocytes and Liver	Hyperlipidaemias Hypertriglyceridemia Atheroma's
Tria	acylglycerol PUFA's	Obesity Metabolic syndrome fatty Liver Phrynoderma Familial	Excess deposition of TAG in Adipocytes and Liver Deficiency of PUFA's	Hyperlipidaemias Hypertriglyceridemia Atheroma's Hypolipoproteinemia Atherosclerosis Occlusions
Tria C	acylglycerol PUFA's holesterol	Obesity Metabolic syndrome fatty Liver Phrynoderma Familial hypercholesterolemia Respiratory distress	Excess deposition of TAG in Adipocytes and Liver Deficiency of PUFA's LDL receptor defects Low lung surfactant	Hyperlipidaemias Hypertriglyceridemia Atheroma's Hypolipoproteinemia Atherosclerosis Occlusions Tissue Infarcts No reduction of surface
Tria Ca Ph	PUFA's holesterol	Obesity Metabolic syndrome fatty Liver Phrynoderma Familial hypercholesterolemia Respiratory distress syndrome Hyperlipoproteinemias	Excess deposition of TAG in Adipocytes and Liver Deficiency of PUFA's LDL receptor defects Low lung surfactant LPL defects LDL defect HDL defect	Hyperlipidaemias Hypertriglyceridemia Atheroma's Hypolipoproteinemia Atherosclerosis Occlusions Tissue Infarcts No reduction of surface tension of Alveoli Atherosclerosis Occlusions
Tria C	PUFA's holesterol ospholipid poprotein Lipidosis	Obesity Metabolic syndrome fatty Liver Phrynoderma Familial hypercholesterolemia Respiratory distress syndrome Hyperlipoproteinemias Tangier's disease	Excess deposition of TAG in Adipocytes and Liver Deficiency of PUFA's LDL receptor defects Low lung surfactant LPL defects LDL defect HDL defect	Hyperlipidaemias Hypertriglyceridemia Atheroma's Hypolipoproteinemia Atherosclerosis Occlusions Tissue Infarcts No reduction of surface tension of Alveoli Atherosclerosis Occlusions Tissue Infarcts Accumulation of
Tria C	PUFA's holesterol cospholipid poprotein Lipidosis OR	Obesity Metabolic syndrome fatty Liver Phrynoderma Familial hypercholesterolemia Respiratory distress syndrome Hyperlipoproteinemias Tangier's disease a. Tay Sach's disease b. Niemann pick's	Excess deposition of TAG in Adipocytes and Liver Deficiency of PUFA's LDL receptor defects Low lung surfactant LPL defects LDL defect HDL defect HDL defect Hexoseaminidase	Hyperlipidaemias Hypertriglyceridemia Atheroma's Hypolipoproteinemia Atherosclerosis Occlusions Tissue Infarcts No reduction of surface tension of Alveoli Atherosclerosis Occlusions Tissue Infarcts Accumulation of Gangliosides Accumulation of

Galactosidase

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Questions

- Long Answer Questions
- Define Lipids (Bloor's Definition).
 Classify Lipids with suitable examples.
- Define Fatty acids. Classify them with different modes and suitable examples.



- What are Compound lipids?
 Describe Phospholipids wrt
 Chemistry, Types, Nature, Sources Distribution, Functions and associated disorders of.
- What are Sterols? Describe the structure, dietary sources, properties & functions of Cholesterol.
 - Write Short Notes.
 - Biomedical importance of various forms of body Lipids
 - Enlist various disorders associated to Lipid forms with biochemical defect and alterations.
 - Essential fatty acids (PUFAs) & their role in the body.
 - Triacylglycerol/Neutral Fats- Structure
 & Function.



- Rancidity- Causes & Prevention.
- Gycolipids/Cerebrosides/Gangliosides
- Lipoproteins- Chemistry, types & functions
- Eicosanoids/Prostaglandins

- Therapeutic uses of Prostaglandins
- Distinguish between Fats & Waxes
- Nomenclature & Isomerism of fatty acids
- Omega 3 fatty acids and their importance
- Amphipathic nature of lipids and their roles
- Distinguish between Fats & Oils
- Enumerate biomedical important lipids with their classes
- Properties of Fatty acids.



- Simple Lipids with their examples
- Enumerate Compound Lipids & one function of each
- Name Derived lipids & their functions
- Trans Fats and their harmful effects
- Tests to check the purity of fats & oils/Characteristic number of Fats

Revision Questions



- Define Lipids
- Number and Names of Lipid Classes
- Define Derived Lipids
- Examples of Derived Lipids
- Define Fatty acids
- What is Delta and Omega end of FAs
- What is Beta Carbon of a Fatty acid
- 6 Modes of Classification of Fatty acids
- Fatty acids with one double bond is:-----
- Name most predominant Fatty acid of human body-----
- Fatty acid with odd and even number carbon atoms are:
- PUFAs are Fatty acids with------
- Name PUFAs of Omega 3 and 6 types
- Enumerate Lipidosis with enzyme defects



- Are Nutritionally Essential Fatty acids and PUFAs same
- Name branched Chain and Odd Number Fatty acids
- Name Cyclic and Hydroxy Fatty acids
- What are Cis and Trans Fatty acids
- Enlist Omega 3 Fatty acids and 3 Main Roles

- Criteria for Sub classification of Simple Lipids
- Define Simple lipids
- Examples/Subtypes of Simple Lipids
- What is a Class of Fat/Oil and its chemical name
- Define Waxes
- Name human body Wax



- Differences of Fats and Oils
- Differentiate between
 Cerebrosides and Gangliosides
- Occurrence and Role of TAG
- Definition of Compound Lipids
- Types of Compound lipids
- Sphingophospholipid Example

- Number and Names Of Glycerophospholipids
- Hormonal role of Phospholipds
- Chemical composition of Lung Surfactant
- Which Compound Lipid is classified under classes of Lipid and Protein?



- Enzyme defect in Niemann Picks Disease
- Red Spot Macula is noted in which all conditions
- In which disorder Ceramides get accumulated in joints
- Emulsions and Liposomes results due to which Lipid forms.
- On what criteria's TAG is selected as reservoir of energy for long term use
- Enumerate various Lipid Storage disorders with biochemical defect and abnormal accumulated Lipid form
- What value of L/S ratio shows lung maturity and immaturity?
- What are components of Lung Surfactant?
- What are roles of Lung surfactant?
- What form of energy source helps in endurance of exercises of body?
- Which Lipids are associated to biomembranes?
- What are applications of Amphipathic Lipids?
- What clinical conditions shows Hypercholesterolemia?
- Enzymes associated for Eicosanoids biosynthesis.
- Therapeutic roles of Prostaglandins



Thank You

Biochemistry Department

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