



**KEEP CALM,
STUDY HARD,
AND BECOME A
GREAT DOCTOR.**

medschool.inspiration

أَعُوذُ
بِكَلِمَاتِ اللَّهِ
الَّتِي مَاتَ
مِنْ شَرِّ مَا خَلَقَ

@BUTOOF

@J200195



"I can't wait for Summer vacation, I have all these great plans!"

Meanwhile, during Summer vacation:



WHAT EVERYONE
THINKS I DO OVER
SUMMER BREAK...



BORED TEACHERS®

WHAT I REALLY
DO OVER
SUMMER BREAK...

vs.



BORED
TEACHERS®

WHAT IS THE ABNORMALITY ?

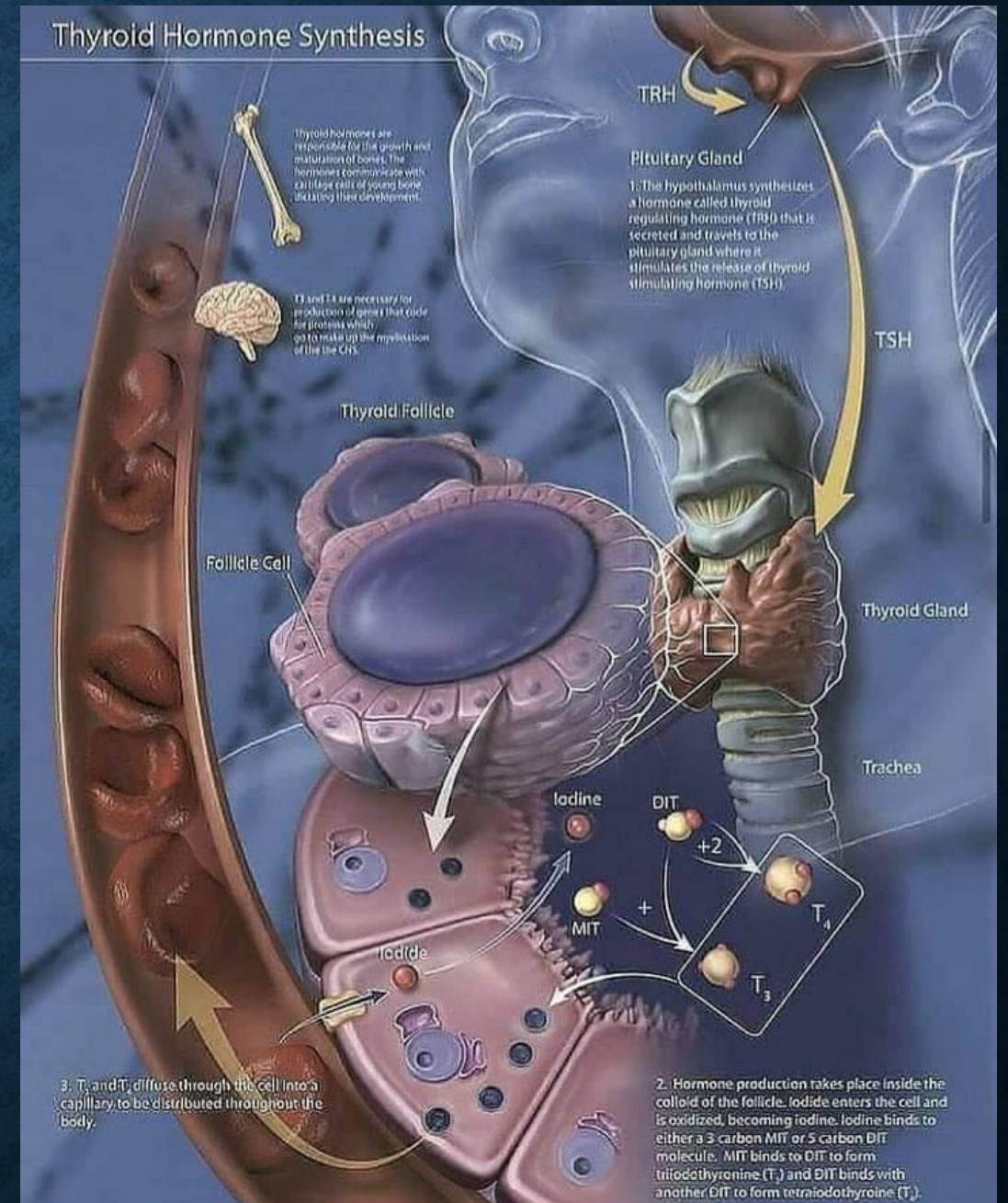


Mike Goldwater/Alamy

GOITER

PHYSIOLOGY OF THYROID HORMONES

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FCPS (Medicine)
M phil Physiology



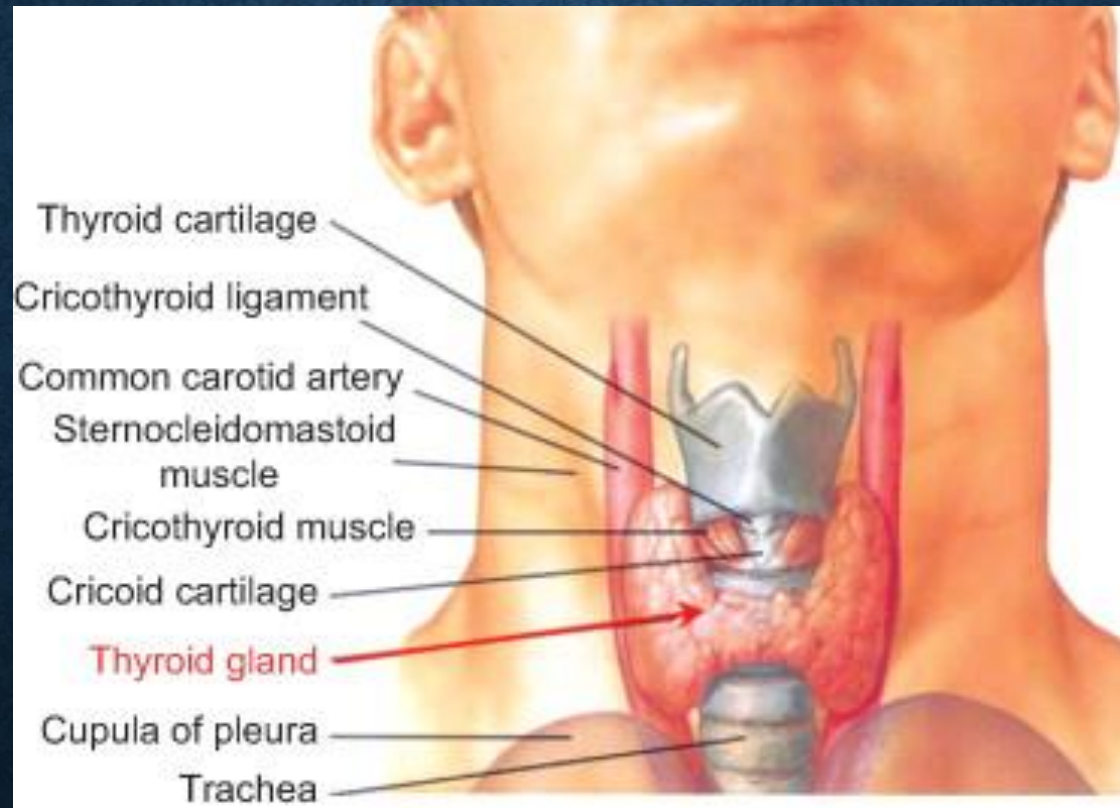


بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

LEARNING OBJECTIVES

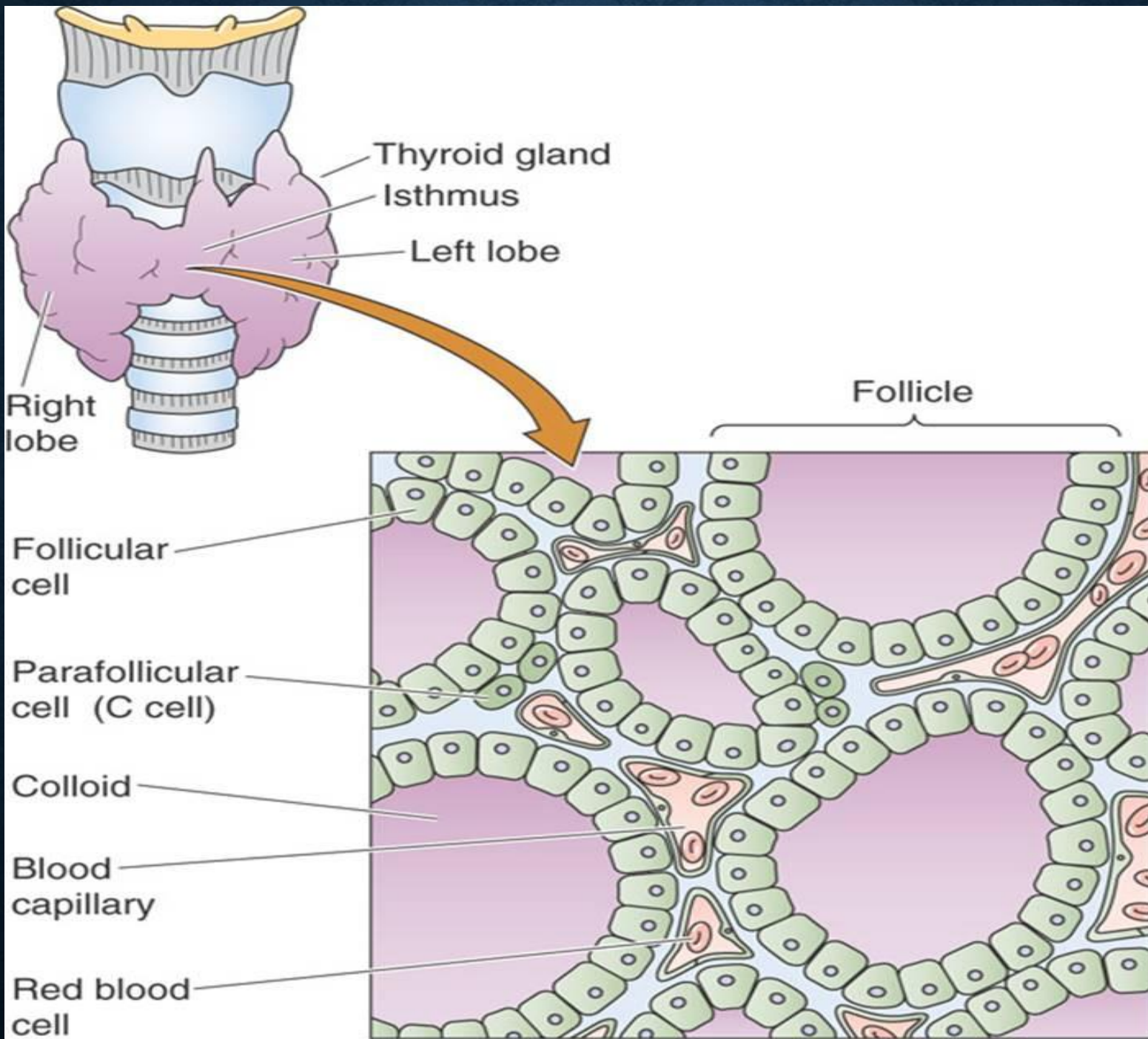
- Describe the thyroid hormones
- Describe formation, Secretion and transport of thyroid hormones
- Explain mechanism of action of thyroid hormones
- Explain the actions of thyroid hormones on cellular metabolism
- Describe Physiological effects of Thyroid Hormone on Growth, metabolism and body systems
- Describe Regulation of Thyroid Hormone Secretion

RECALL YOUR PREVIOUS KNOWLEDGE...



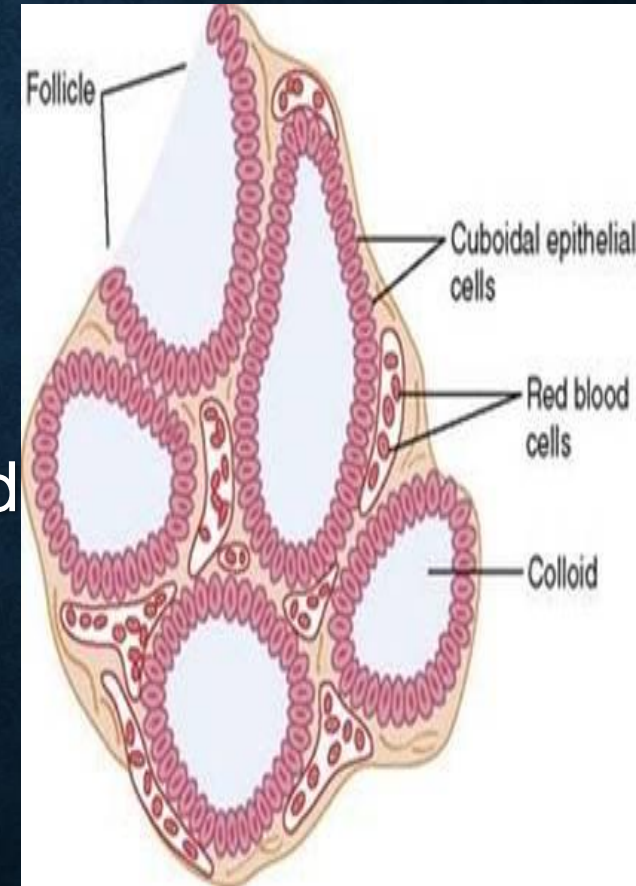
SYNTHESIS OF THYROID HORMONE

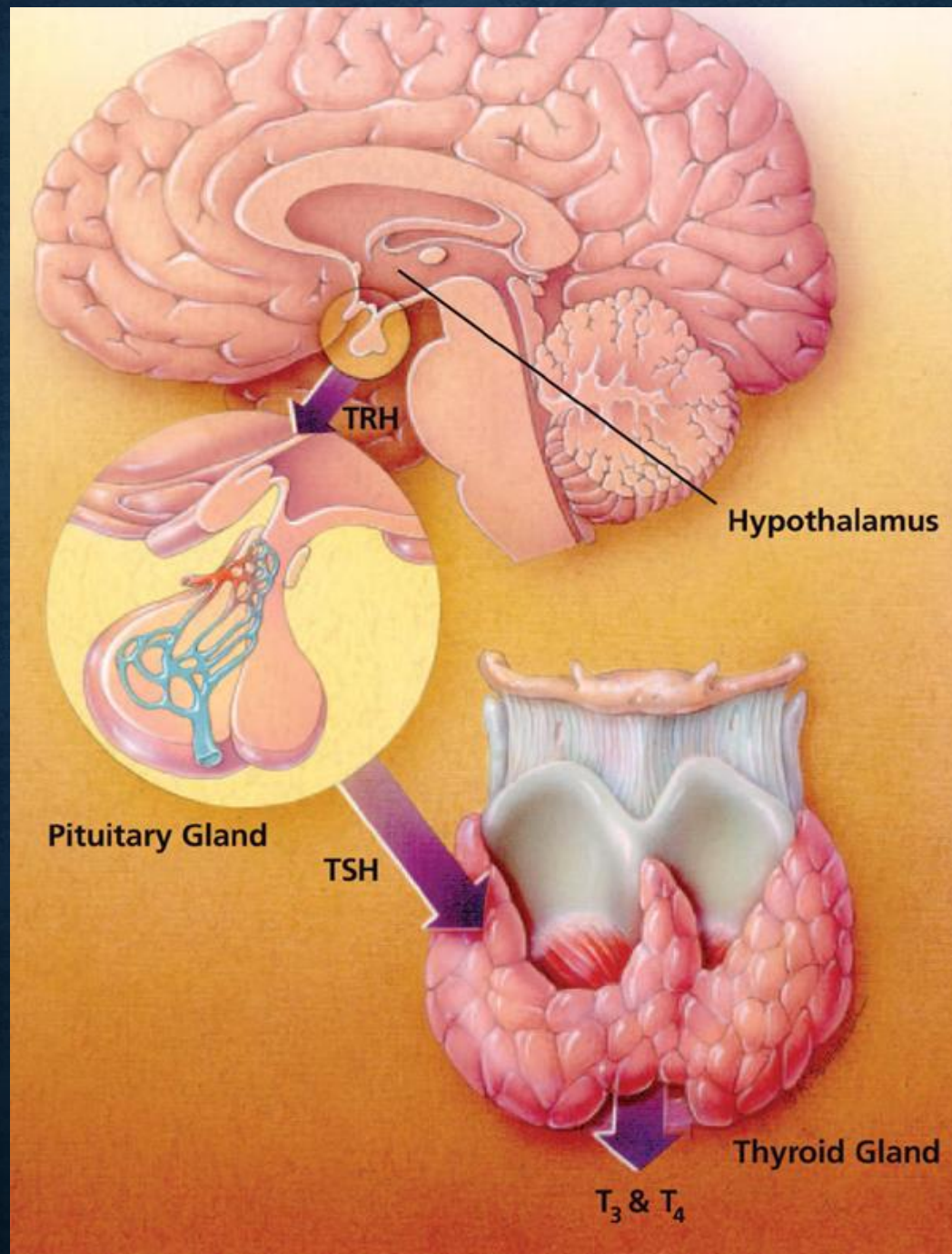
Lecture 1



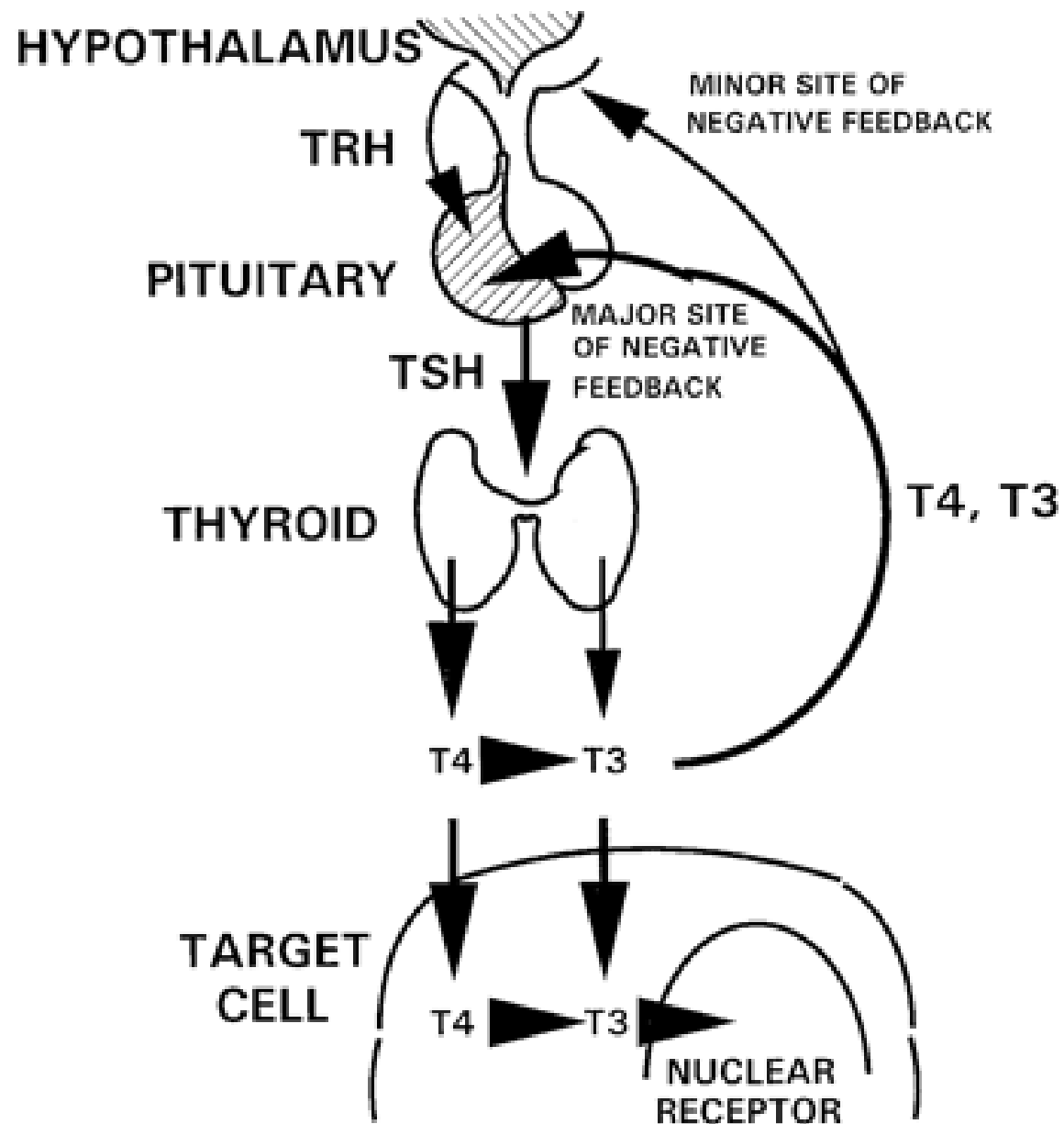
PHYSIOLOGIC ANATOMY OF THE THYROID GLAND

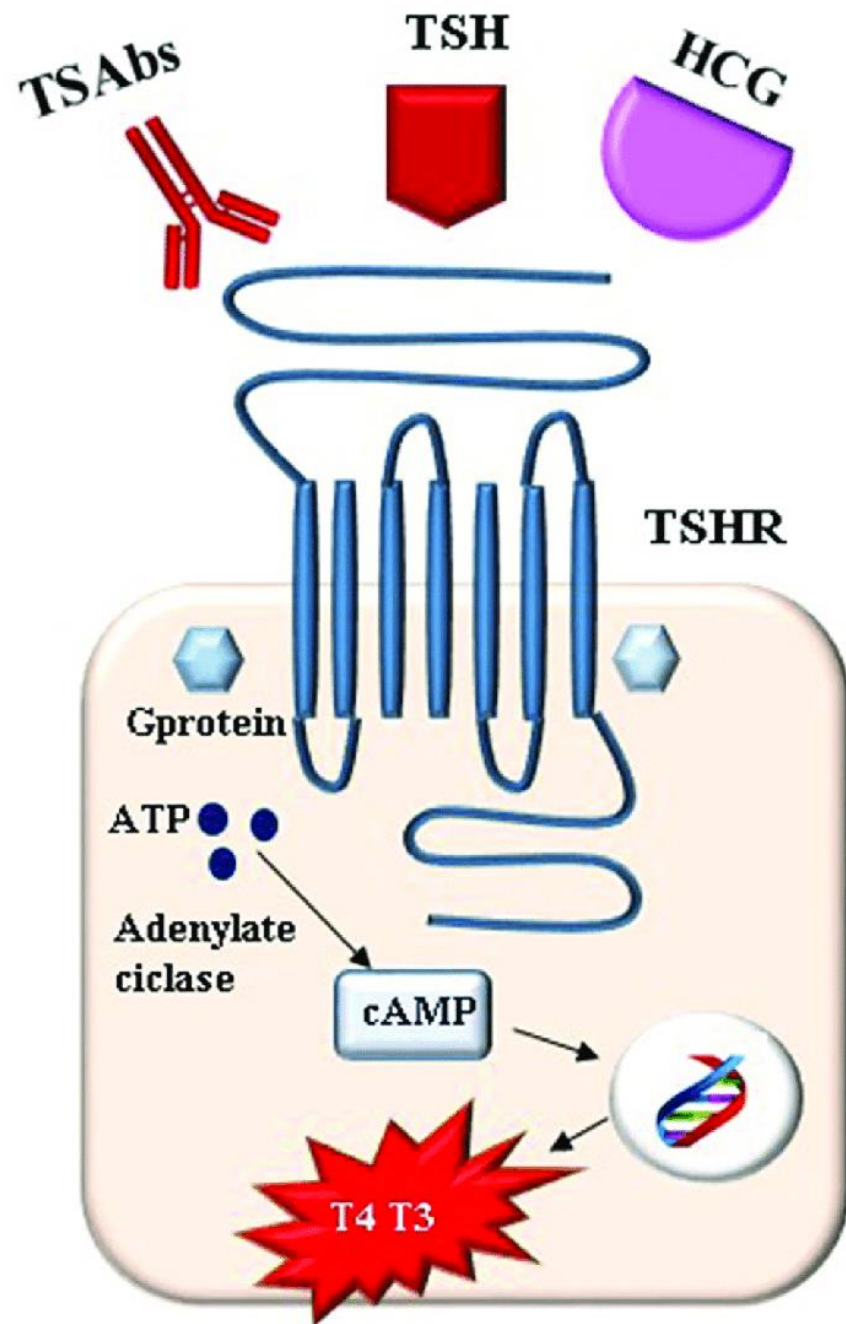
- Composed of large numbers of closed follicles (100-300 micrometers in diameter)
- filled with colloid (major component Thyroglobulin) and
- lined with cuboidal epithelial cells that secrete into the interior of the follicles
- The large glycoprotein Thyroglobulin contains the thyroid hormones within its molecule.
- Secretion enters the follicles → absorbed (through epithelium) back into the blood to function.
- Blood flow/min = 5 times its wt.





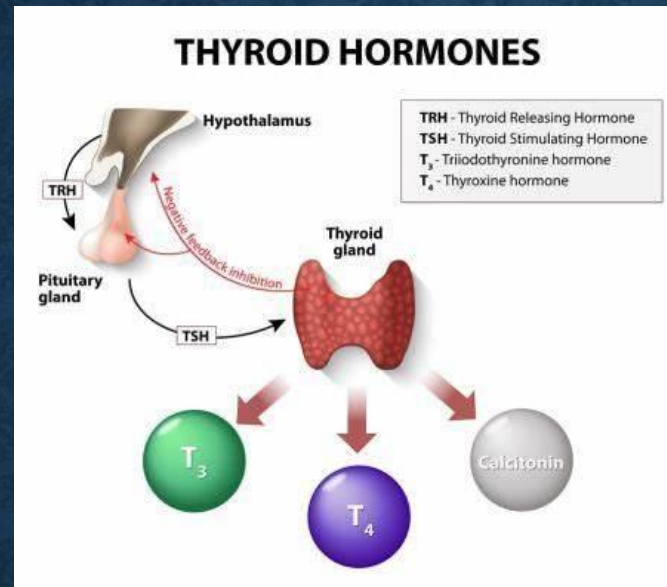
HYPOTHALAMIC-PITUITARY-THYROID AXIS





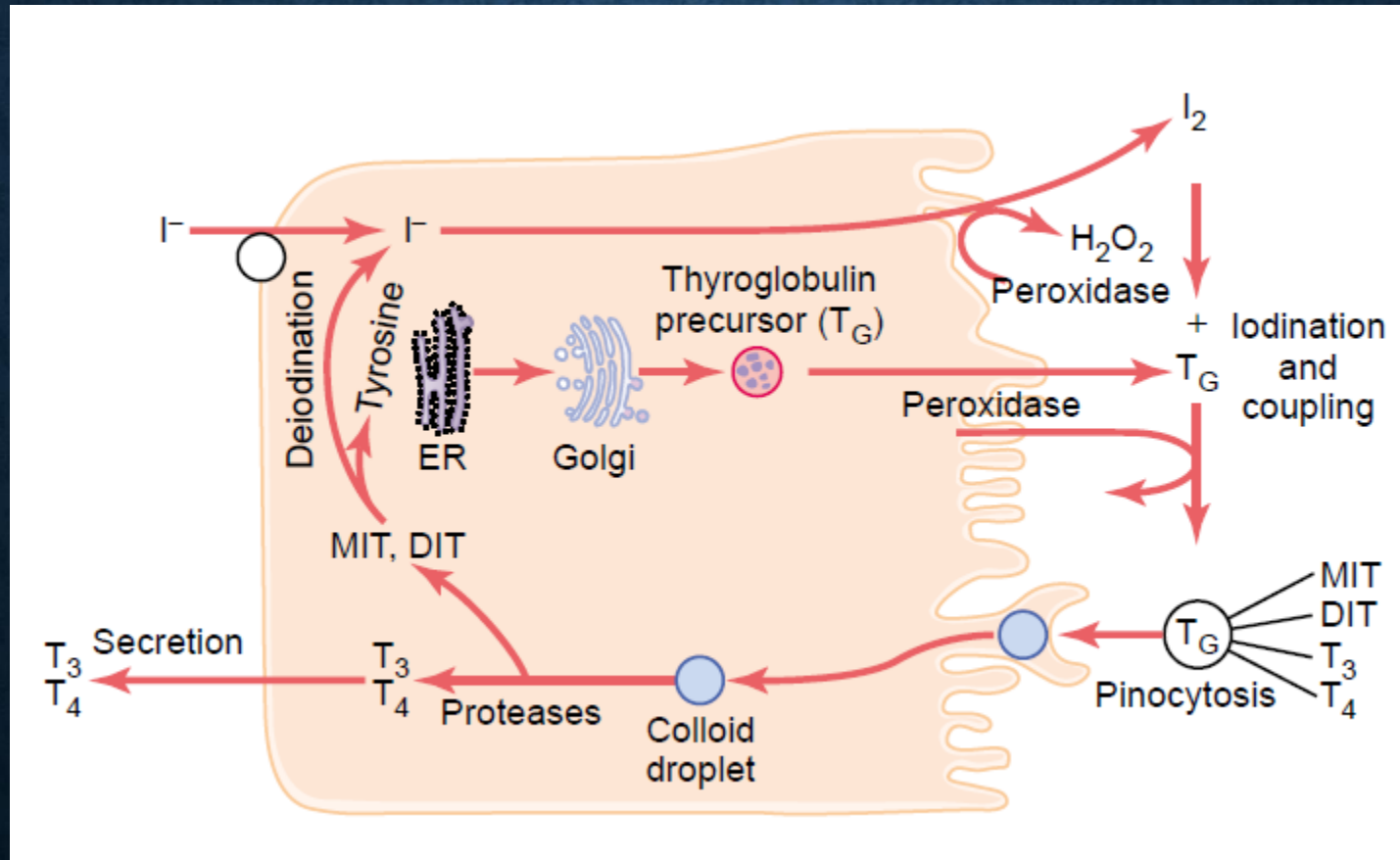
IODINE REQUIREMENT

- 50mg/year
- 1mg/week
- Common table salt is iodized with 1 part sodium iodide to every 100,000 parts NaCl.
- Iodides (absorbed from GIT) → $\frac{1}{5}$ removed from the blood by thyroid cells for synthesis of hormones;
- rest excreted through kidneys.



Synthesis of Thyroid Hormone

Thyroid cellular mechanisms for iodine transport, thyroxine and triiodothyronine formation, release and into the blood.



MIT, monoiodotyrosine; DIT, diiodotyrosine; T_3 , triiodothyronine; T_4 , thyroxine; T_G , thyroglobulin.

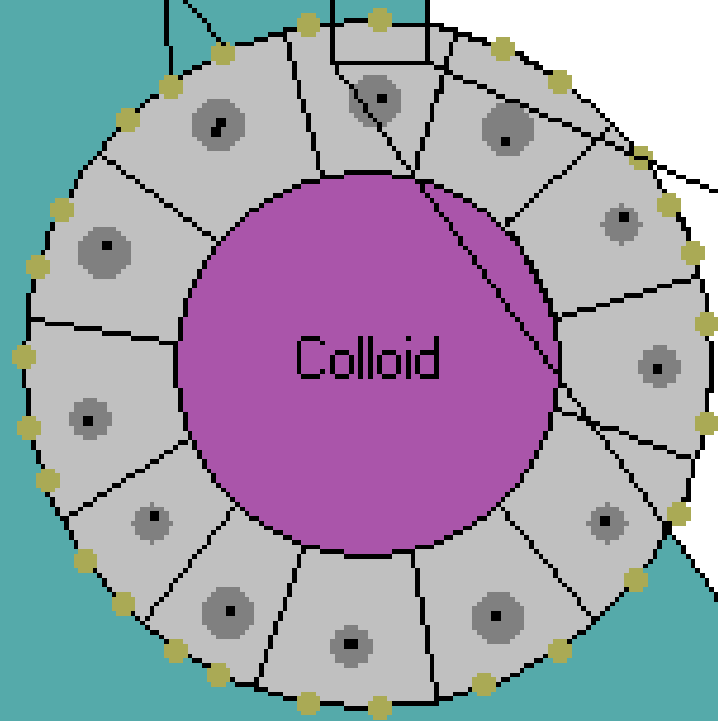
STEP 1: FORMATION AND SECRETION OF THYROGLOBULIN

- The thyroid epithelial cells also secrete into the follicle thyroglobulin that contains tyrosine amino acids to which the iodide ions will bind
- ER and Golgi apparatus synthesize and secrete in to the follicles a large glycoprotein molecules called “Thyroglobulin”
- Each mol. Of Thyroglobulin contain 70 tyrosine amino acids
- Tyrosine + Iodide = Thyroid hormone within Thyroglobulin.

STEP 2: IODIDE TRAPPING

- Transport of iodides from the blood in to the thyroid follicles.
- This is achieved by the action of sodium-iodide symporter (NIS)
- Which cotransport one iodide ion along with two sodium ions.
- the energy for transporting iodide against a concentration gradient comes from the sodium-potassium ATPase pump, which pumps sodium out of the cell, thereby establishing a low intracellular sodium concentration and a gradient for facilitated diffusion of sodium into the cell
- Iodide is transported out of the thyroid cells across the apical membrane into the follicle by a chloride-iodide ion counter-transporter molecule called *pendrin*

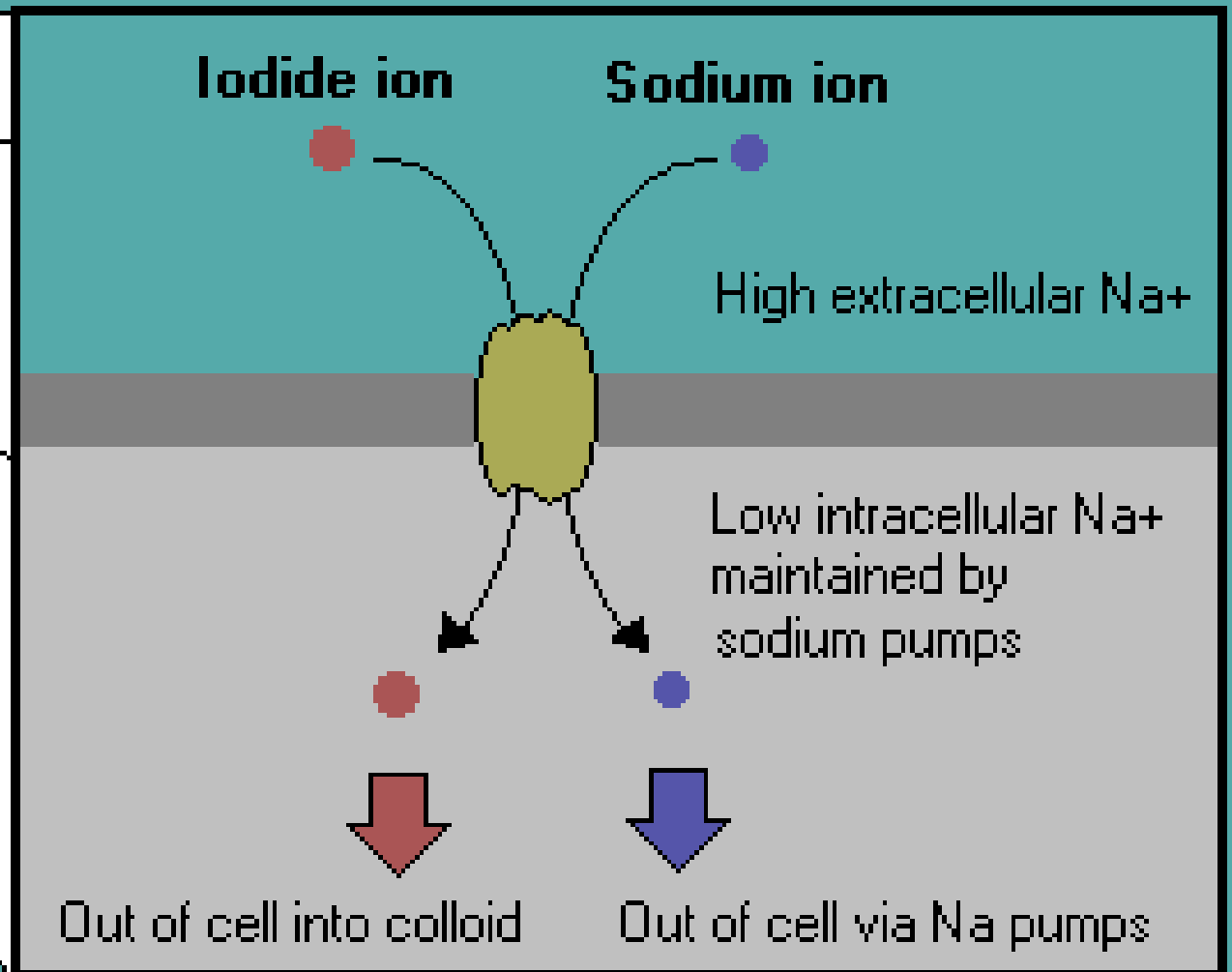
Na/I
symporters



Thyroid follicle

Iodide ion

Sodium ion



STEP 3: OXIDATION OF IODIDE

Conversion of Iodides to oxidized form of Iodine

Oxidized form of iodine is capable of combining directly with amino acid Tyrosine.

Oxidation is promoted by enzyme Peroxidase & Hydrogen Peroxide (H_2O_2)

Peroxidase is in apical membrane of the cell or attached to it

STEP 4: ORGANIFICATION OF THYROGLOBULIN

The Iodination of Tyrosine and Formation of the Thyroid Hormones

The binding of iodine with the thyroglobulin molecule is called *organification* of the thyroglobulin

This reaction is catalyzed by the enzyme TPO

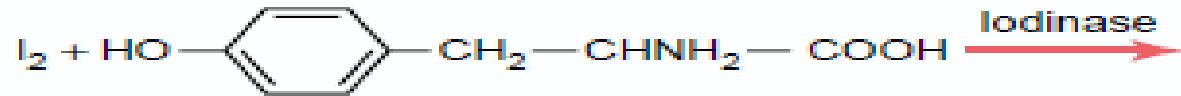
If Peroxidase is not present → Thyroid hormone formation falls to zero.

Iodine is first iodized to moniodotyrosine and then to diiodotyrosine

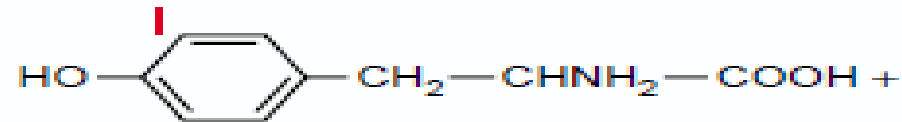
STEP 5: COUPLING REACTION

- Then one molecule of iodine couples with one molecule of diiodotyrosine to form triiodothyronine T3
- $MIT + DIT = T3$
- Two molecules of Diiodotyrosine couple together to form tetraiodothyronine T4
- $DIT + DIT = T4$
- Coupling reactions are also activated by TPO enzymes

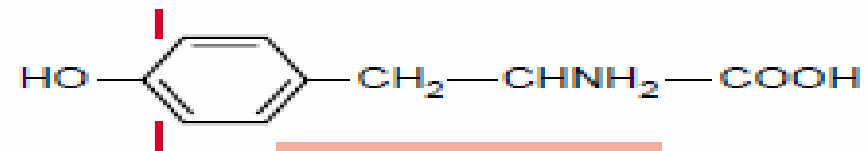
CHEMISTRY OF THYROXINE AND TRIIODOTHYRONINE FORMATION



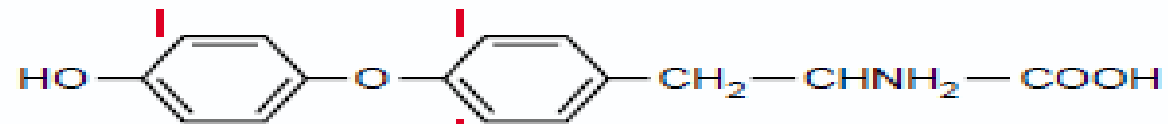
Tyrosine



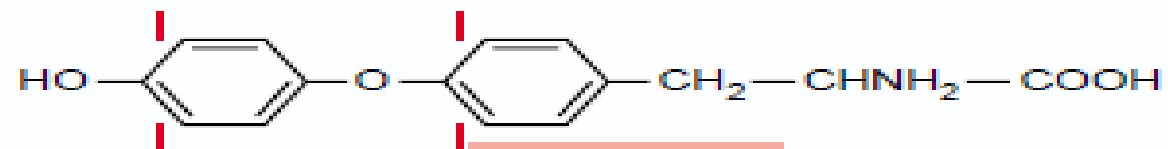
Monoiodotyrosine



Diiodotyrosine



3,5,3'-Triiodothyronine



Thyroxine

STEP 6: STORAGE OF THYROID HORMONE

After synthesis of thyroid hormone, they are stored in the thyroglobulin molecule,

Each Thyroglobulin mol. has 30 thyroxine molecules and a few T₃.

Storage sufficient for body requirements for 2-3 months.

STEP 7: RELEASE OF THYROXINE AND TRIIODOTHYRONINE IN THE BLOOD

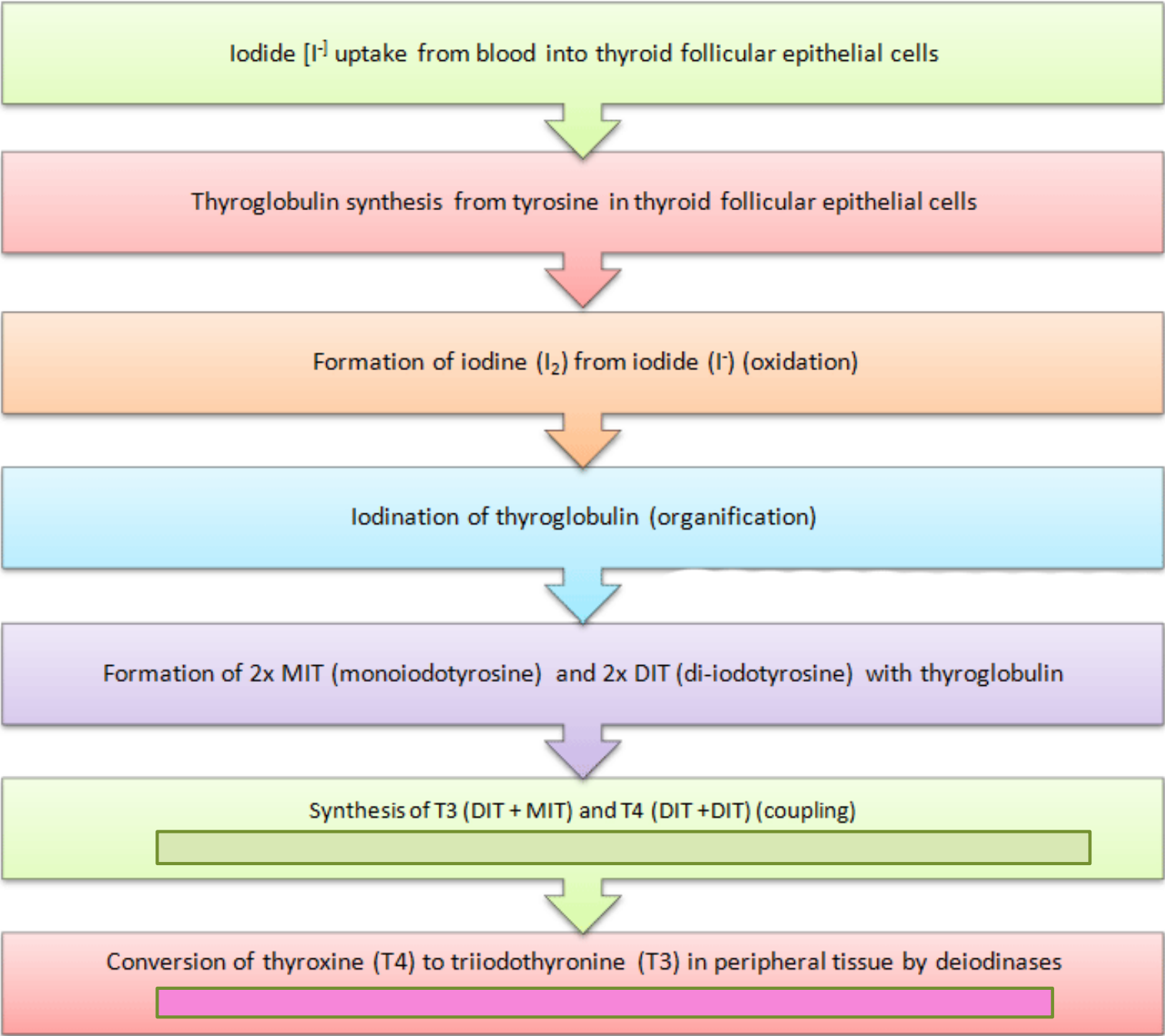
- Cleavage required for the release.
- Pseudopod extensions from the apical surface of the thyroid cells that close around small portions of the colloid → *pinocytic vesicles formed* → *enter the apex of lysosomes*
thyroid cell $\xrightarrow{\text{proteases}}$ digestive vesicles $\xrightarrow{\text{lysosomes}}$
release T4 & T3 in free form →
- diffuse through the base of the thyroid cell into the blood. $\xrightarrow{\text{deiodinase}}$
- $\frac{3}{4}$ of iodinated tyrosinase never forms hormone, remains as mono or di ido-MIT, DIT released from Thyroglobulin Tyrosine + I⁻.
- 75% MIT, DIT is recycled.
- ↓↓↓ of enzyme deiodinase can cause deficiency of

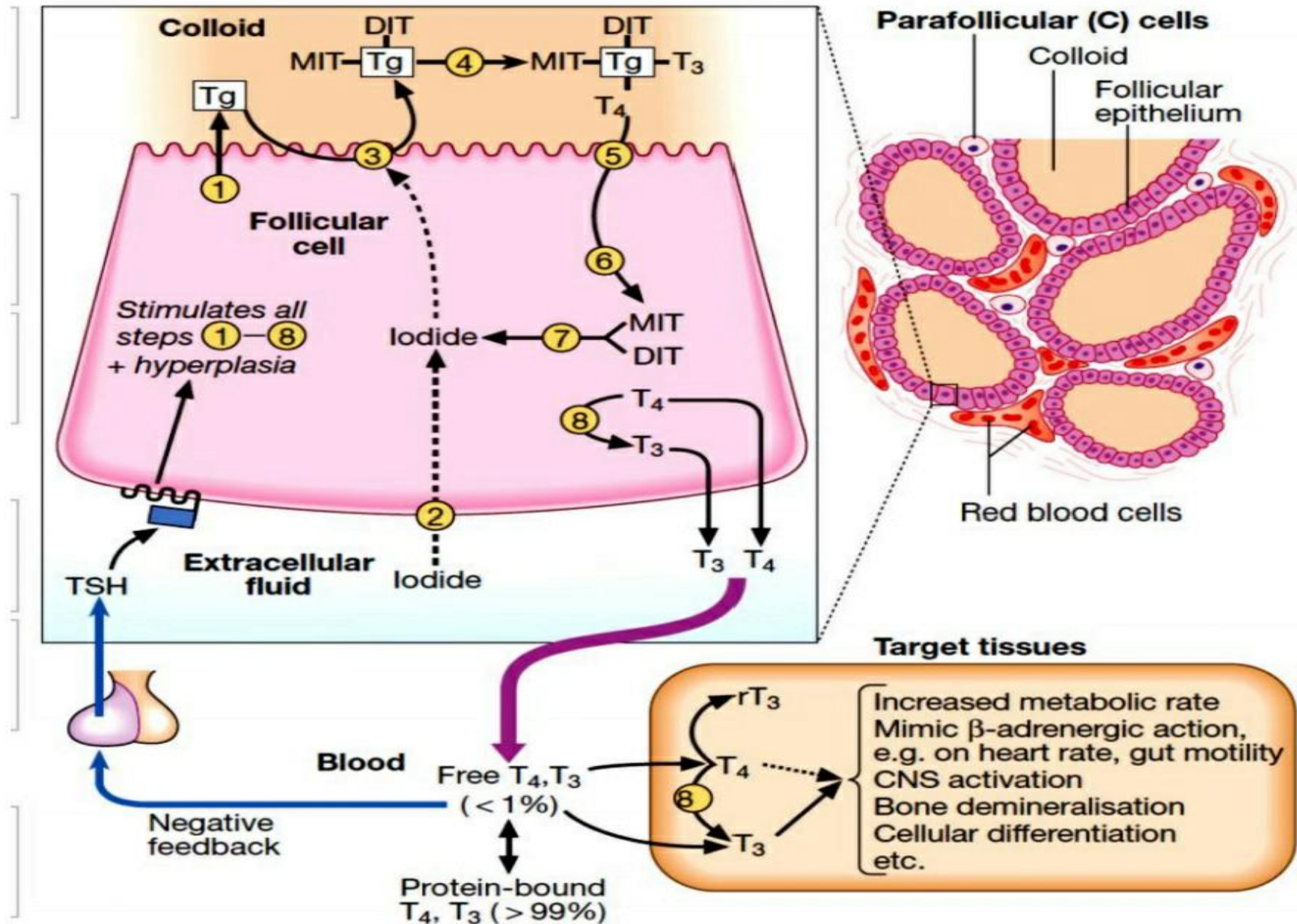
TRANSPORT IN BLOOD

- 99% of T3 & T4 combines with plasma proteins on entering blood.
 - Thyroxine binding globulin
 - Thyroxine binding prealbumins
 - Thyroxine binding albumin

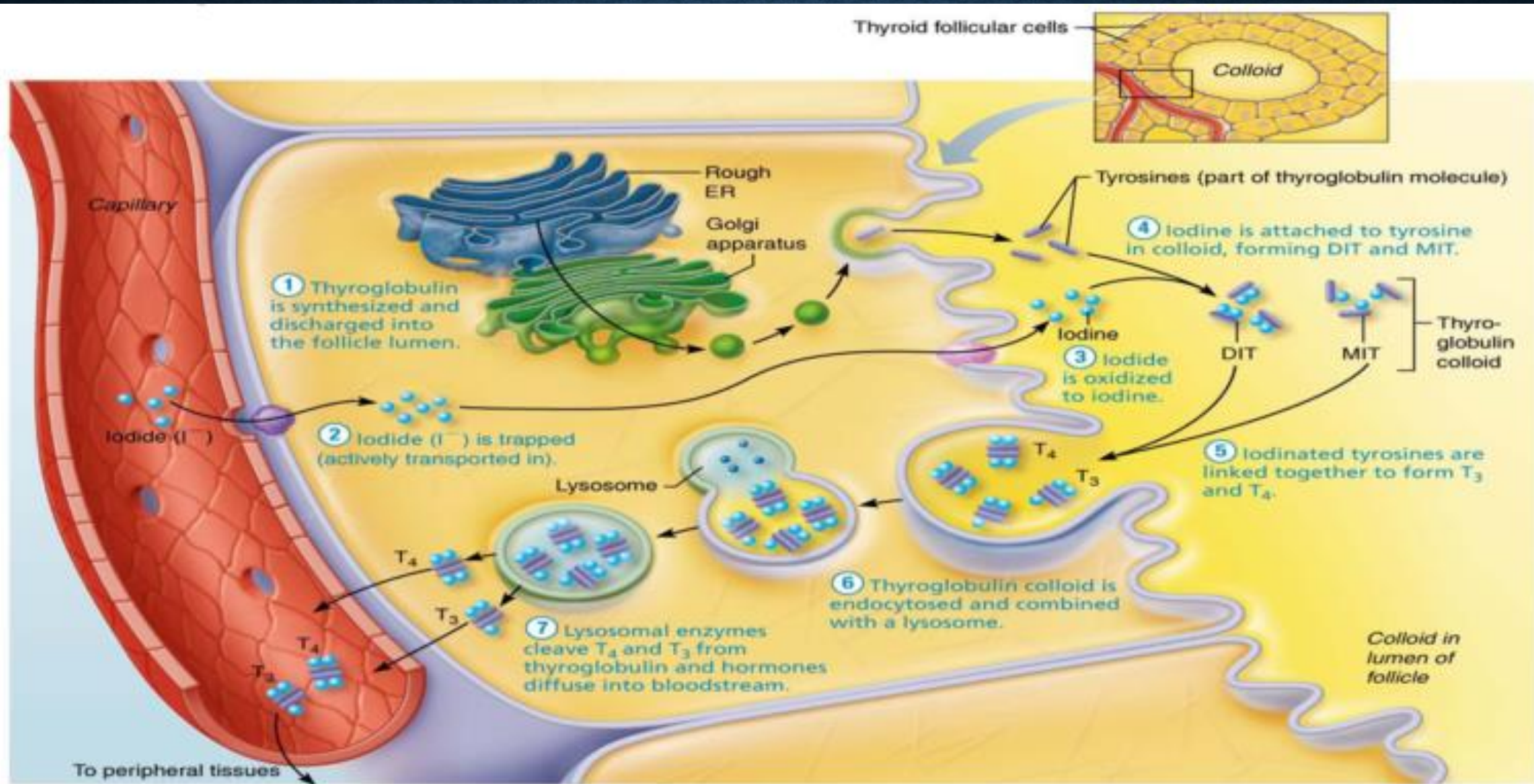
TARGET TISSUES

- Hormone used by tissues is Triiodothyroxine 35 $\mu\text{g}/\text{day}$

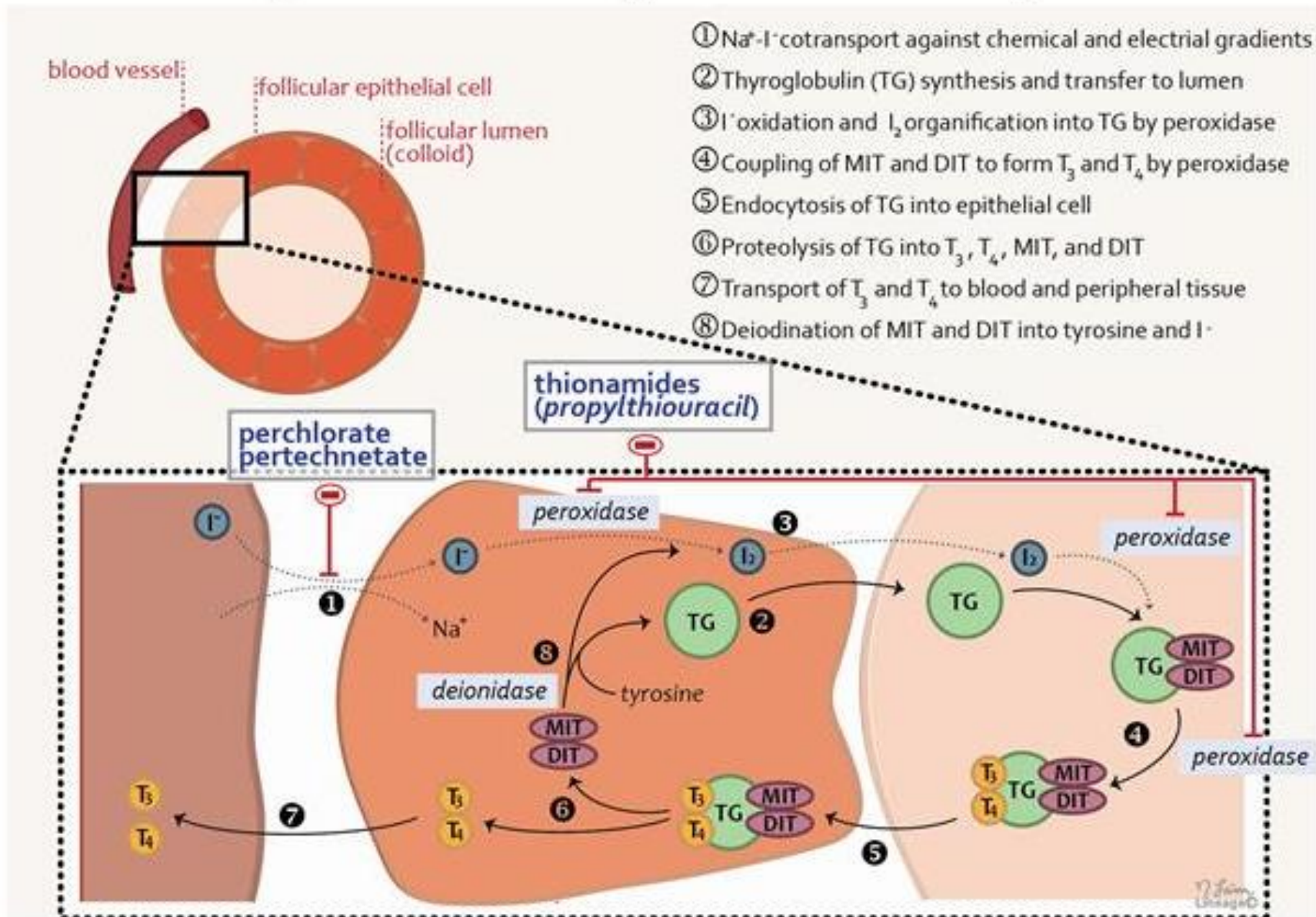




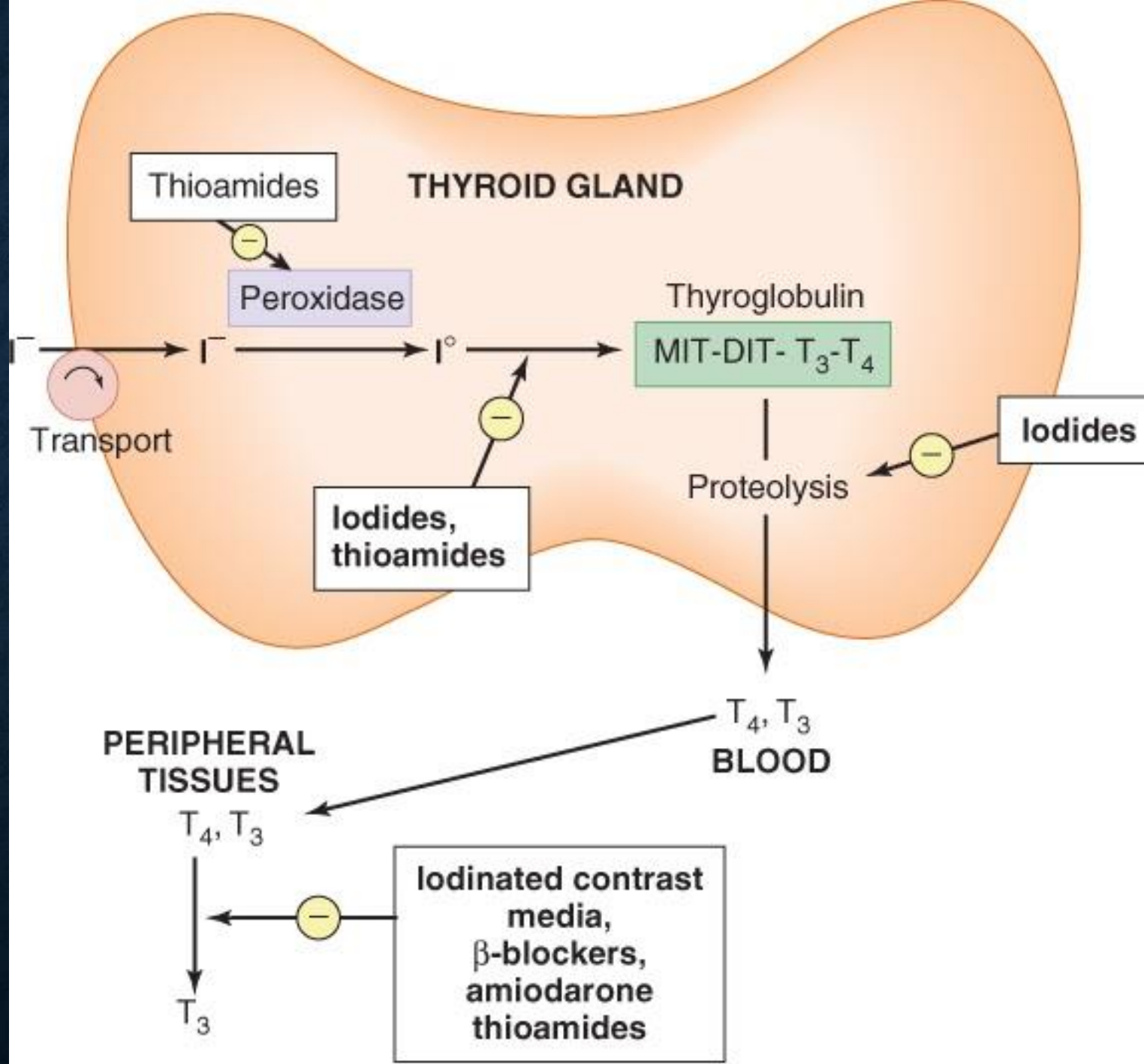
Synthesis and action of Thyroid hormones (T₃ and T₄)



Thyroid Hormone Synthesis and Transport



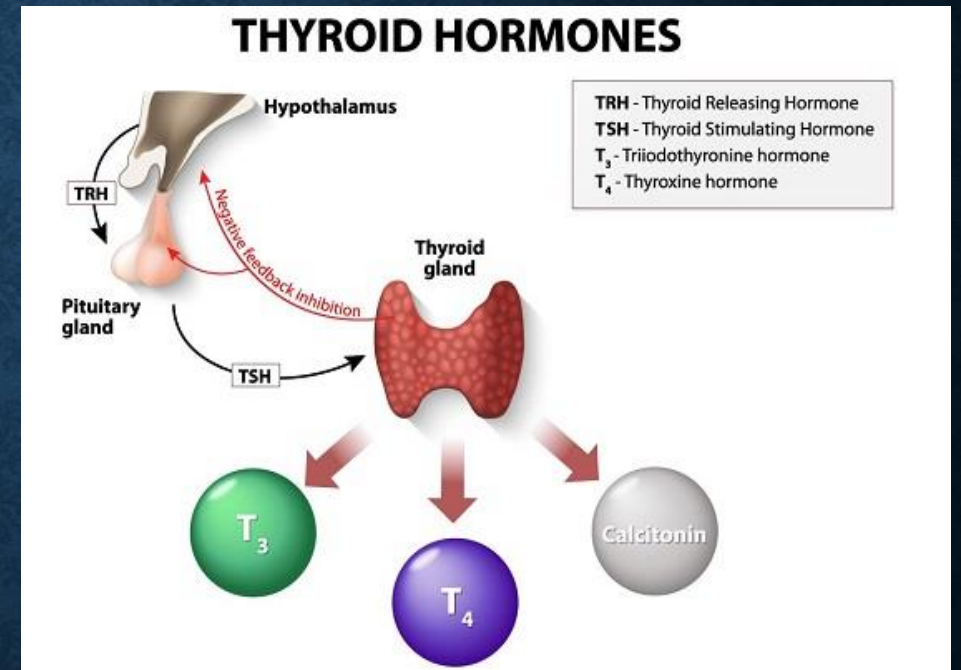
Key steps in thyroid hormone synthesis.



SECRETION, TRANSPORT & MECHANISM OF ACTION

WHAT ARE THE THYROID HORMONES?

- **Thyroxine** : {3,5,3',5' - Tetra-Iodothyronine} (T₄)
- **Tri-Iodothyronine**: {3,5,3' - Tri-Iodothyronine} (T₃)
- T₄ contains Four Iodine atoms, • T₃ contains Three Iodine atoms
- T₃: Biological active form of Thyroid hormones, because it binds to receptors and trigger end-organ effects
- **Reverse T₃**: {3,3',5'-Tri-Iodothyronine} (rT₃):
- Is the Biological Inactive form of Thyroid hormones



▲ TABLE 4-4

Chemical Classification of Hormones

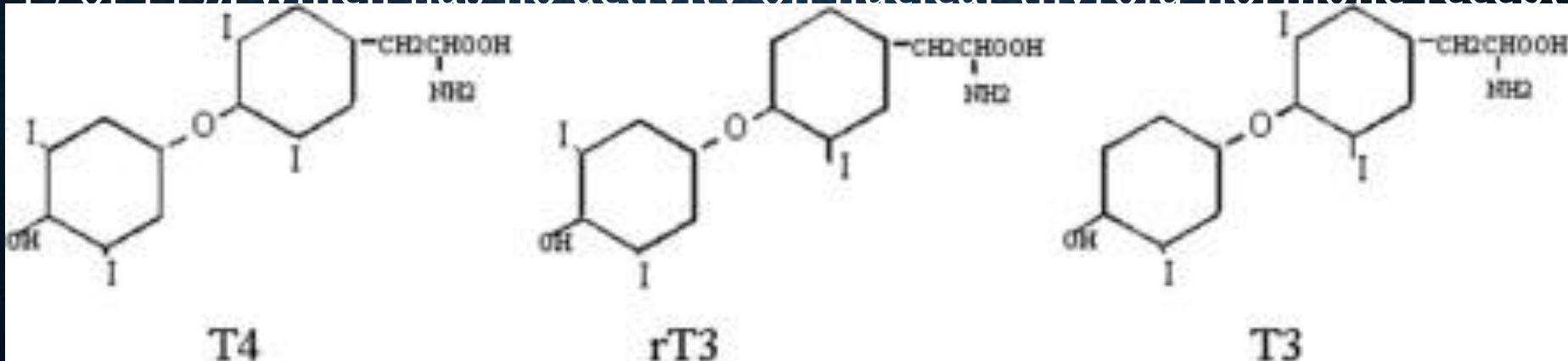
Properties	AMINES			
	Peptides	Catecholamines and Indoleamines	Thyroid Hormone	Steroids
Solubility	Hydrophilic	Hydrophilic	Lipophilic	Lipophilic
Structure	Chains of specific amino acids	Tyrosine derivative (catecholamines) or tryptophan derivative (indoleamines)	Iodinated tyrosine derivative	Cholesterol derivative
Synthesis	In rough endoplasmic reticulum; packaged in Golgi complex	In cytosol	In colloid within thyroid gland (see p. 691)	Stepwise modification of cholesterol molecule in various intracellular compartments
Storage	Large amounts in secretory granules	In secretory granules	In colloid	Not stored; cholesterol precursor stored in lipid droplets
Secretion	Exocytosis of granules	Exocytosis of granules	Endocytosis of colloid	Simple diffusion
Transport in Blood	As free hormone	Half bound to plasma proteins	Mostly bound to plasma proteins	Mostly bound to plasma proteins
Receptor Site	Surface of target cell	Surface of target cell	Inside target cell	Inside target cell
Mechanism of Action	Activation of second-messenger pathway to alter activity of preexisting proteins that produce the effect	Activation of second-messenger pathway to alter activity of preexisting proteins that produce the effect	Activation of specific genes to make new proteins that produce the effect	Activation of specific genes to make new proteins that produce the effect
Hormones of This Type	Majority of hormones	Catecholamines: hormones from the adrenal medulla, dopamine from hypothalamus. Indoleamines: melatonin from pineal	Only hormones from the follicular cells of the thyroid	Hormones from the adrenal cortex and gonads and some placental hormones; vitamin D (a hormone) is steroidlike

Differences between T3 and T4

T3	T4
Four time more potent than T4	Less potent
Peak effect reaches with in 24-48 hrs.	Peak effect reaches in 6-8 hrs
Plasma protein binding capacity is less	It bind more tightly to plasma proteins
It is active in vitro	It is inactive invitro
Thyroid gland produce 20% of T3	Thyroid gland produces 80% of T4
T3 is the active form	T4 is less active than T3

CHEMICAL STRUCTURE OF THYROID HORMONES

- Thyronines may contain iodine atoms at the 3 and 5 positions on the inner ring as well as at the 3' and 5' positions on the outer ring.
- If all four sites are iodinated, the molecule is called 3',5',3,5-tetraiodothyronine (thyroxine or T_4).
- If a single iodine is missing from the outer ring, the result is 3',3,5-triiodothyronine (T_3),
- whereas if one is missing from the inner ring, it yields 3',5',3-triiodothyronine (reverse T_3 or rT_3), which has no activity on nuclear thyroid hormone receptors (TRs)



THE REACTION

When someone asks a medical Student.... "How is life in Medical School"?



RECOMMENDED BOOKS

- Text book of Medical Physiology-Guyton and Hall
- Principles of human Physiology- Lauralee Sherwood
- Color Atlas of human Physiology
- https://www.youtube.com/watch?v=BeI0-xw_cSQ



That's all Folks!



Positive Mind

Positive Vibes

Positive Life



إِنَّ اللَّهَ

وَمَلَائِكَتَهُ

يُصَلُّونَ عَلَى النَّبِيِّ

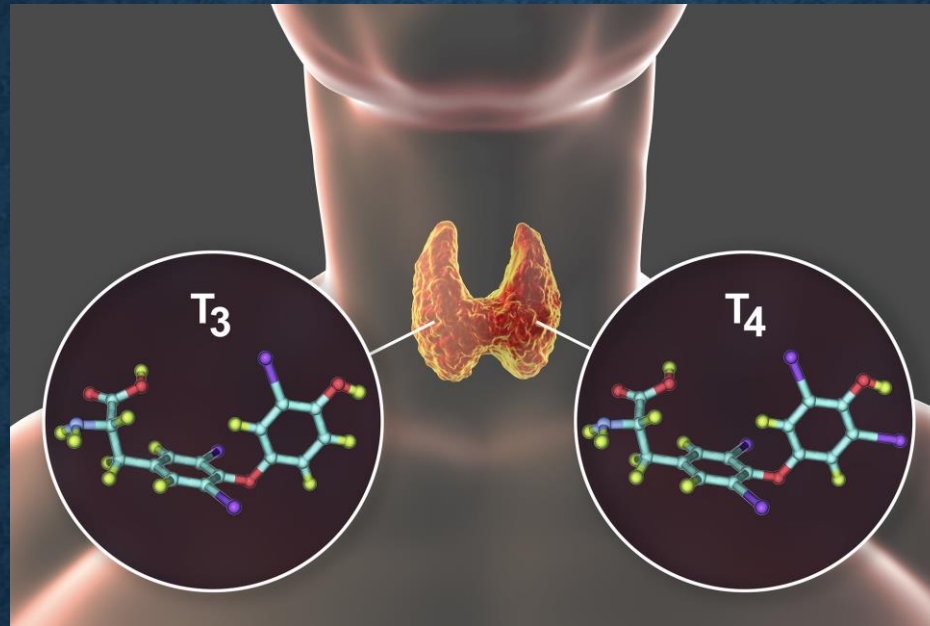
يَا أَيُّهَا الَّذِينَ ءَامَنُوا صَلُّوا عَلَيْهِ

وَسَلِّمُوا تَسْلِيمًا

سورة الأحزاب

٥٦

© HAJAR ALFI



FUNCTIONS OF THYROID HORMONES

Lecture 2

I want this Book 😂😂



What it takes to become a
Doctor


TikTok
@sashahaddad11

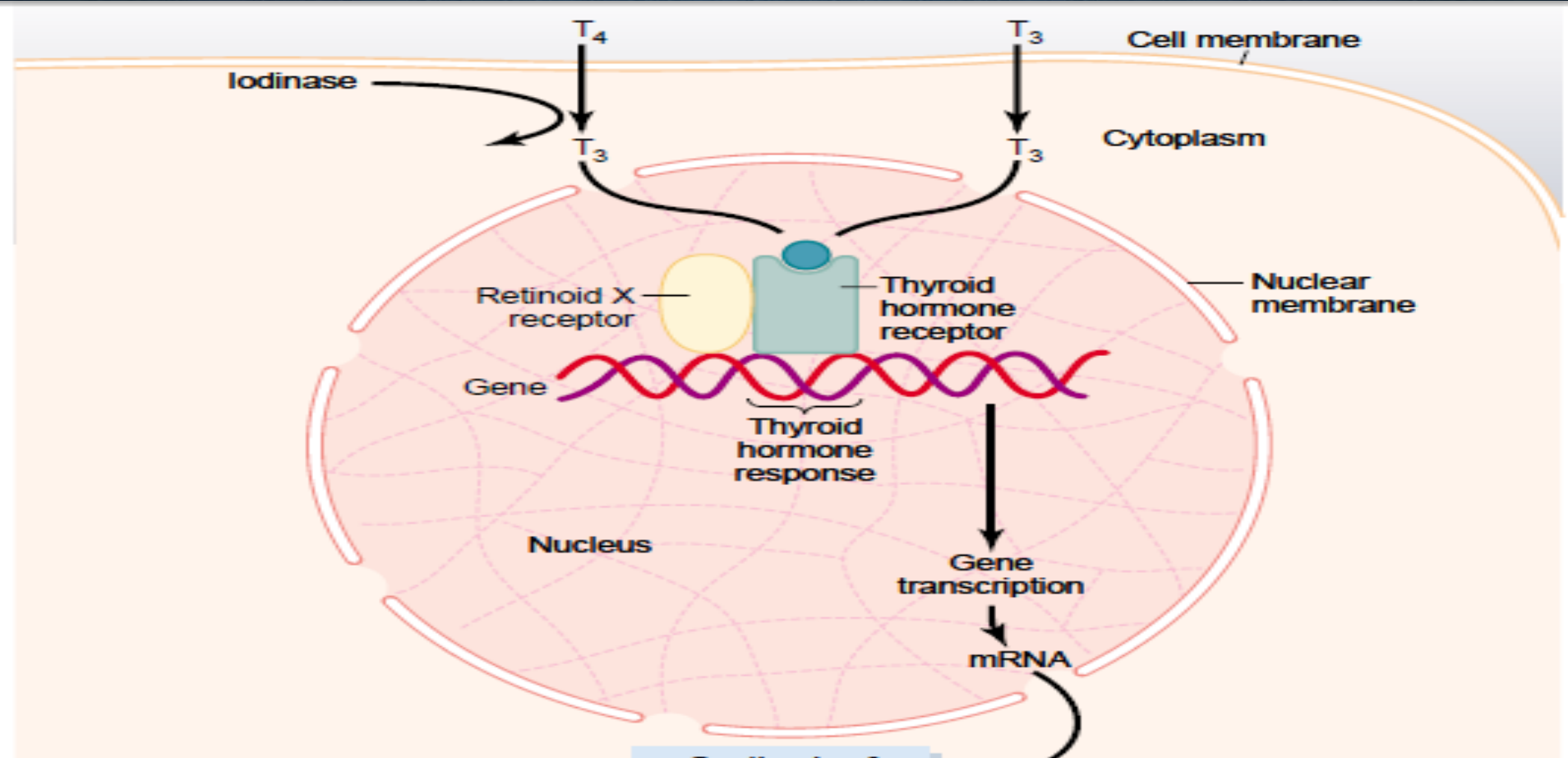


MECHANISM OF ACTION

PHYSIOLOGIC FUNCTIONS OF THE THYROID HORMONES

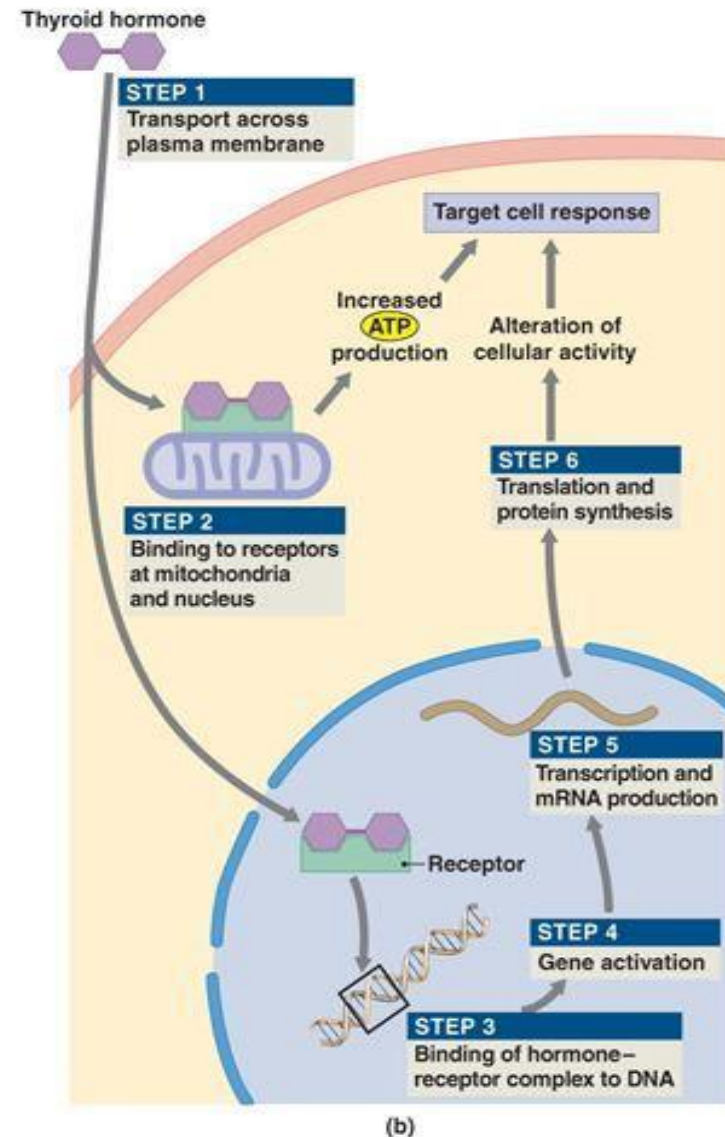
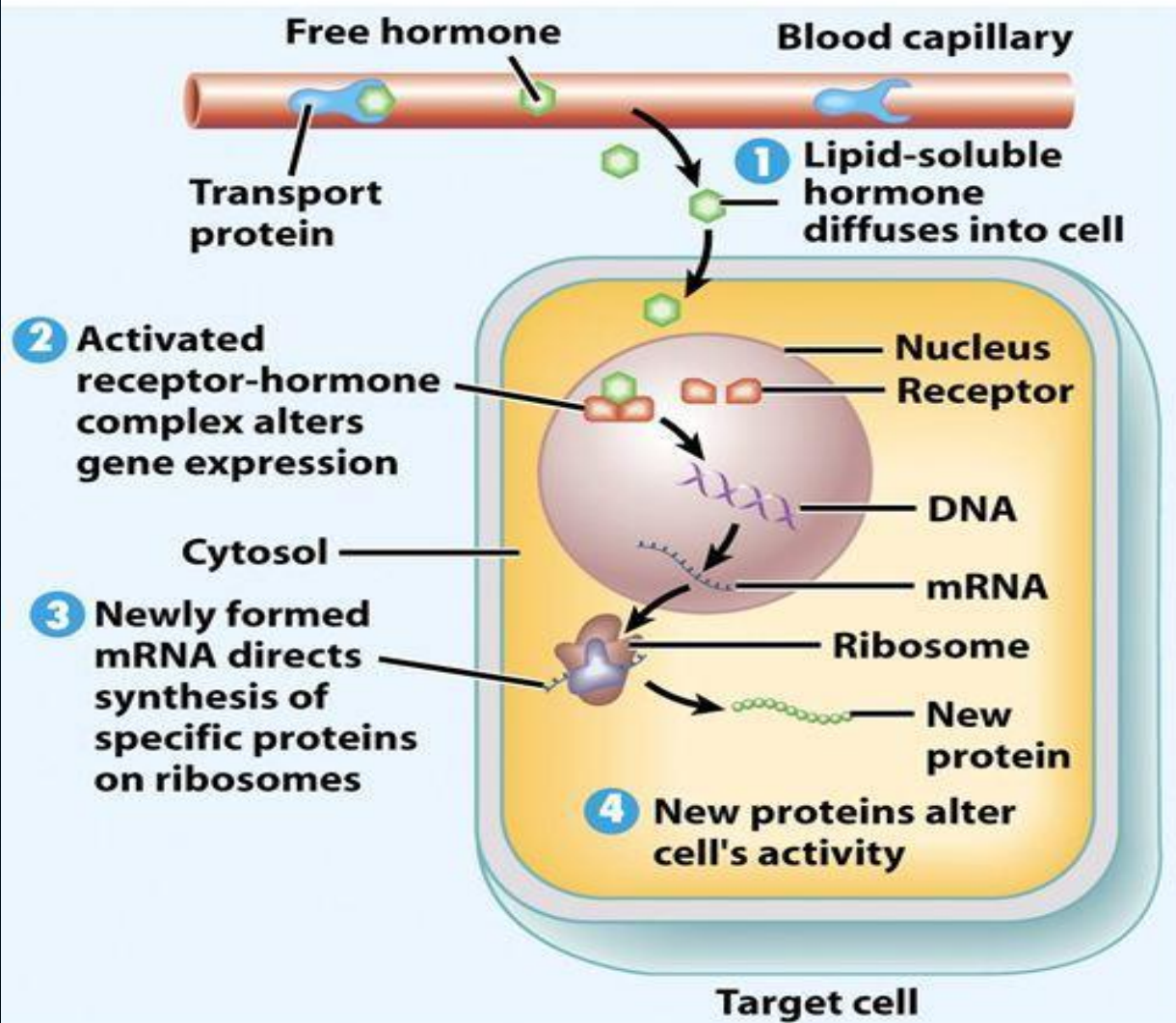
Thyroid Hormones Increase the Transcription of Large numbers of Genes

- Activates Nuclear Transcription → Protein synthesis → Generalised increase in function.
- Almost all cells in the body are targets for thyroid hormones and have thyroid receptors
- Thyroid Hormone Receptor usually forms a heterodimer with Retinoid X receptor (RXR) at specific thyroid hormone response element on DNA.
- Receptor+Hormone → Messenger RNA → Translation



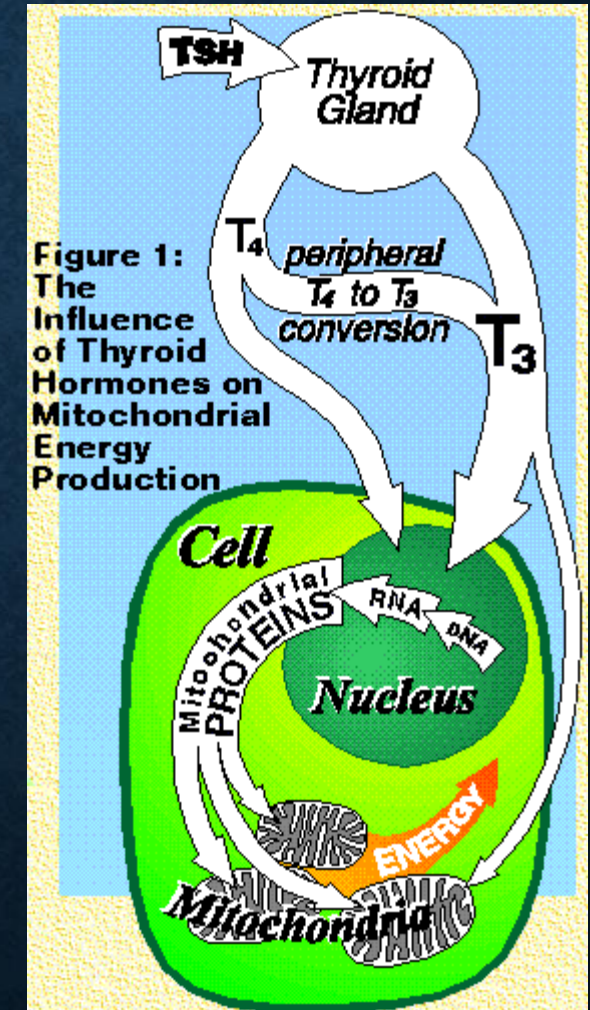
- Synthesis of new proteins**
- Many other systems
 - Growth
 - CNS development
 - Cardiovascular
 - ↑ Cardiac output
 - ↑ Tissue blood flow
 - ↑ Heart rate
 - ↑ Heart strength
 - ↑ Respiration
 - Metabolism
 - ↑ Mitochondria
 - ↑ $Na^+ - K^+ - ATPase$
 - ↑ O_2 consumption
 - ↑ Glucose absorption
 - ↑ Gluconeogenesis
 - ↑ Glycogenolysis
 - ↑ Lipolysis
 - ↑ Protein synthesis
 - ↑ BMR

Action of thyroid hormones



EFFECTS ON MITOCHONDRIA

- Increases the number and size of mitochondria.
- Increases the activity of mitochondria.
- Increases ATP formation.
- Increases intracellular enzymes, such as the oxidative enzymes of mitochondria. Due to an increase in protein synthesis.



EFFECT ON BMR & HEAT PRODUCTION

- Thyroid hormones stimulate diverse metabolic activities in most tissues, leading to an increase in basal metabolic rate.
- It increases the oxygen consumption in metabolically active tissues
- BMR can ↑ by 60 – 100%
- Increase in metabolism results in increase heat production-calorigenesis

EFFECTS ON INTERMEDIARY METABOLISM

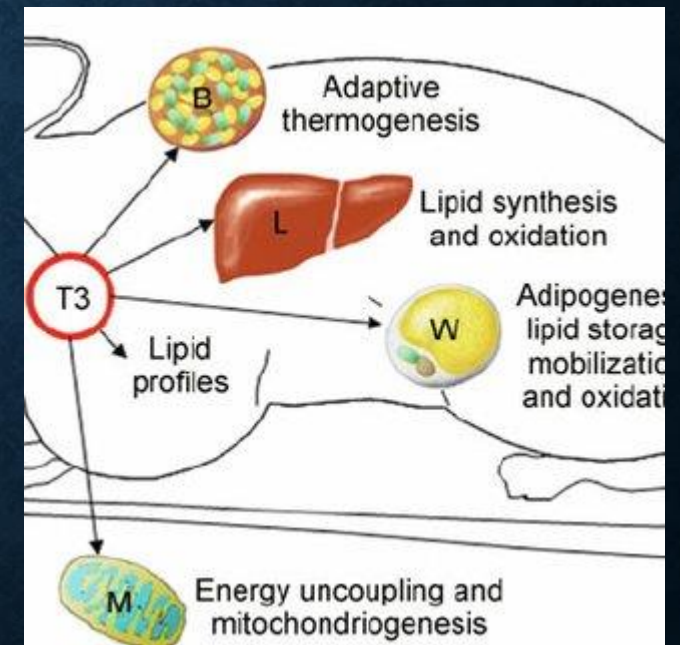
The effects on the metabolic fuels are multifaceted;

- ❖ *Influences the synthesis and degradation of carbohydrate, fat, and protein*
- ❖ **small or large amounts of the hormone may induce opposite effects.**
 - the conversion of glucose to glycogen, is facilitated by small amounts of thyroid hormone,
 - the breakdown of glycogen into glucose, occurs with large amounts of the hormone
 - Adequate amounts of thyroid hormone are essential for the protein synthesis needed for normal bodily growth,
 - high doses favors protein degradation.

In general, the overall metabolic effect of thyroid hormone at normal physiologic levels is to favor the consumption rather than storage of body fuels.

EFFECT ON LIPID METABOLISM

- Increased thyroid hormone levels stimulate fat mobilization, leading to increased concentrations of fatty acids in plasma.
- They also enhance oxidation of fatty acids in many tissues.
- Plasma concentrations of cholesterol and triglycerides are inversely correlated with thyroid hormone levels



EFFECT ON CARBOHYDRATE METABOLISM:

- **Thyroid hormones stimulate almost all aspects of carbohydrate metabolism**
- **enhancement of insulin-dependent entry of glucose into cells**
- **increased gluconeogenesis**
- **Increased glycogenolysis to generate free glucose.**
- **Increased absorption from GIT**
- **Increased insulin production**

EFFECTS ON PROTEIN METABOLISM:

Increases the synthesis of proteins in the cells.

The protein synthesis is accelerated by the following ways:

1. By Increasing the Transcription of DNA to RNA
2. By Increasing the Translation of RNA
3. By Increasing the Activity of Mitochondria
4. By Increasing the Activity of Cellular Enzymes

Though thyroxine increases synthesis of protein, it also causes catabolism of proteins

EFFECTS ON VITAMIN METABOLISM

Thyroid hormone increases quantities of hormones i.e increase in Formation of enzymes & coenzymes → increase need for vitamins

A relative vitamin deficiency can occur when excess thyroid hormone is secreted, unless at the same time increased quantities of vitamins are made available.

EFFECT ON GROWTH & DEVELOPMENT

- **Thyroid hormones are clearly necessary for normal growth in children and young animals, as evidenced by the growth-retardation observed in thyroid deficiency.**
- **the growth-promoting effect of thyroid hormones is synergistic with that of growth hormone**
- **Normal levels of thyroid hormone are essential to the development of the fetal and neonatal brain.**

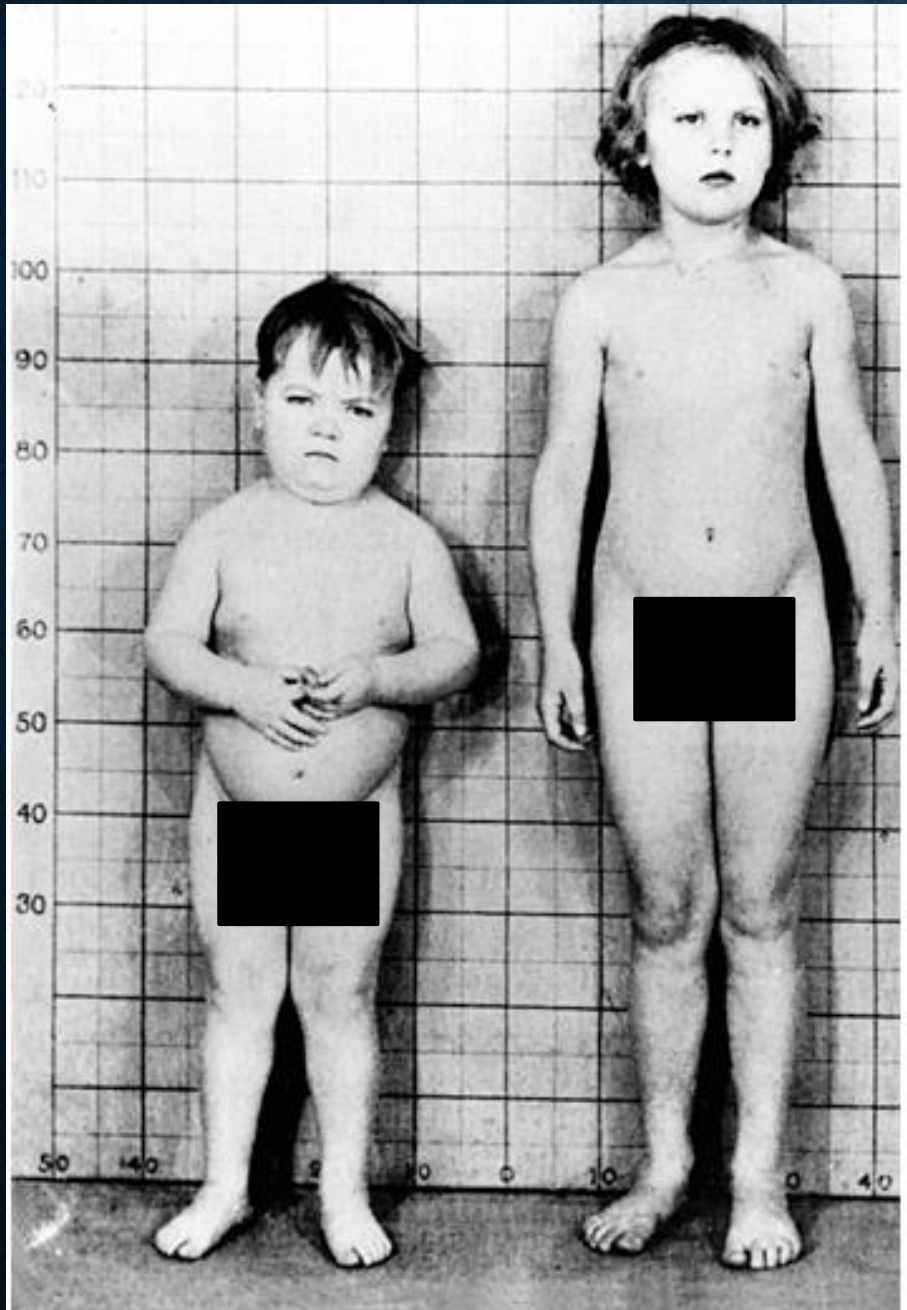


Figure 18-13. Fraternal twins, age 8 years. The boy has congenital hypothyroidism. (Reproduced, with permission, from Wilkins L in: *Clinical Endocrinology I*. Astwood EB, Cassidy CE [editors]. Grune & Stratton, 1960.)

EFFECT ON CARDIOVASCULAR SYSTEM:

Increased number and affinity of beta-adrenergic receptors in the heart → increase its sensitivity to inotropic and chronotropic effects of catecholamines.

- thyroid hormone *increases heart rate and force of contraction, thus increasing cardiac output.*
- in response to the heat load generated by the calorogenic effect of thyroid hormone, *peripheral vasodilation* occurs to carry the extra heat to the body surface for elimination to the environment

EFFECT ON CENTRAL NERVOUS SYSTEM:

- Both decreased and increased concentrations of thyroid hormones lead to alterations in mental state.
- Too little thyroid hormone, and the individual tends to feel mentally sluggish, while too much induces anxiety and nervousness.

EFFECT ON REPRODUCTIVE SYSTEM:

- Normal reproductive behavior and physiology is dependent on having essentially normal levels of thyroid hormone. Hypothyroidism in particular is commonly associated with infertility.

- **EFFECTS ON RESPIRATION:**

- Causes increased utilization of O₂ and formation of CO₂.
- Increases pulmonary ventilation.
- Increases the rate and depth of respiration.
- Increased the formation of surfactant.

- **EFFECTS ON GIT:**

- Increases the rate of absorption.
- Increases appetite.
- Increases food intake.
- Increases secretion of digestive juices.
- Increases motility of GIT.
- Causes diarrhea.

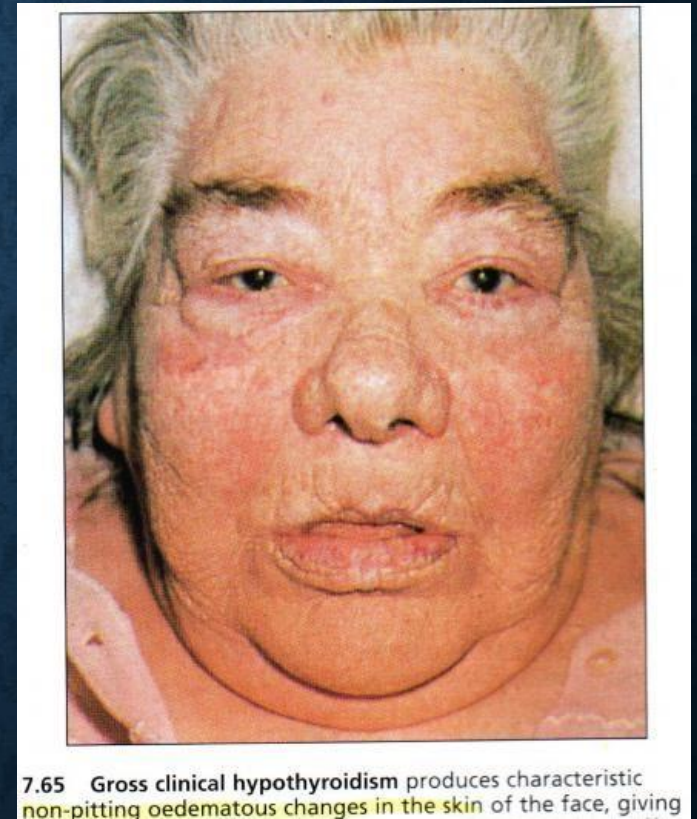
EFFECTS ON MUSCLE

- A muscle weakness occurs in most patients with hyperthyroidism called thyrotoxic myopathy. When the hyperthyroidism is severe and prolonged, the myopathy may be severe.
- Hypothyroidism is also associated with muscle weakness, cramps, and stiffness.



EFFECT ON BODY WEIGHT

- Thyroxine is essential for maintaining the body weight.
- Increase in thyroxine secretion decreases the body weight and fat storage.
- Decrease in thyroxine secretion increases the body weight because of fat deposition.



PHYSIOLOGICAL EFFECTS OF THYROID HORMONES

TABLE 1 ■ Physiologic Effects of Thyroid Hormones^{1,4,7}

System	Effects
Cardiovascular	Increases heart rate Increases the force of cardiac contractions Increases cardiac output as a result of the previous two effects Promotes peripheral vasodilation
Central nervous	Essential for normal brain development, such as cerebellar growth and nerve myelination Necessary for normal intellectual development in infants Necessary for emotional stability in adults
Gastrointestinal	Increases appetite Increases secretion of "digestive juices" Increases gastric motility
Hematopoietic	Influences erythropoiesis
Metabolic	Profoundly affects oxidative metabolism Increases oxygen consumption in all tissues except the brain, gonads, and spleen Promotes heat production Influences synthesis and degradation of carbohydrate, fat, and protein
Respiratory	Influences lung development Necessary for surfactant production Increases rate and depth of respirations
Skeletal	Indirectly promotes growth formation by actions on the pituitary gland Acts synergistically with growth hormone and other growth factors that promote bone formation Directly affects skeletal maturation Necessary for progression of tooth development and eruption
Skin	Necessary for growth and maturation of the epidermis and hair follicles

Factors that Affect Thyroid Function

Factors that contribute to proper production of thyroid hormones

- Nutrients: iron, iodine, tyrosine, zinc, selenium, vitamin E, B2, B3, B6, C, D



T4

Factors that inhibit proper production of thyroid hormones

- Stress
- Infection, trauma, radiation, medications
- Fluoride (antagonist to iodine)
- Toxins: pesticides, mercury, cadmium, lead
- Autoimmune disease: Celiac

Factors that increase conversion of T4 to RT3

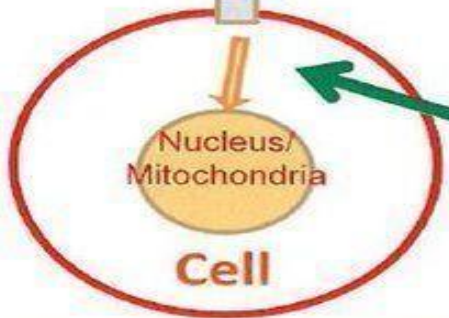
- Stress
- Trauma
- Low-calorie diet
- Inflammation (cytokines, etc.)
- Toxins
- Infections
- Liver/kidney dysfunction
- Certain medications

Factors that increase conversion of T4 to T3

- Selenium
- Zinc

RT3 T3

T3 and RT3 compete for binding sites



Factors that improve cellular sensitivity to thyroid hormones

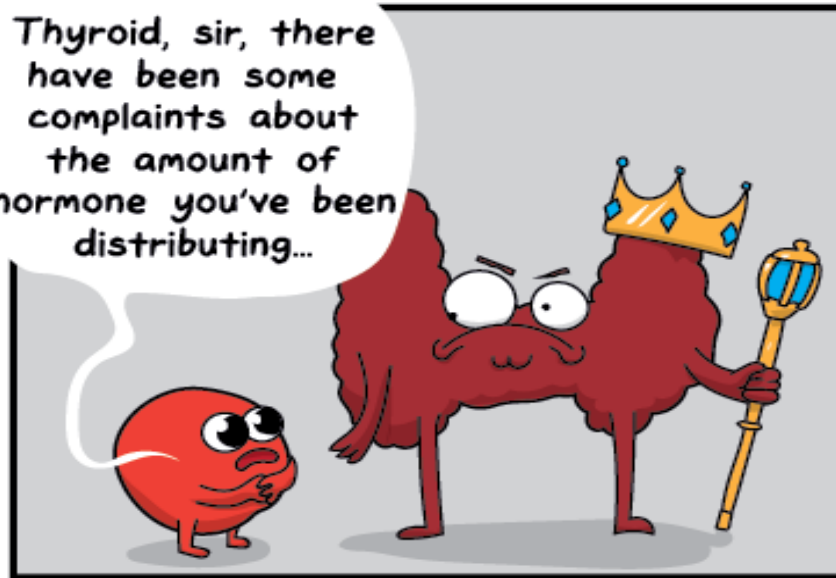
- Vitamin A
- Exercise
- Zinc

No one
Me after choosing Medical:

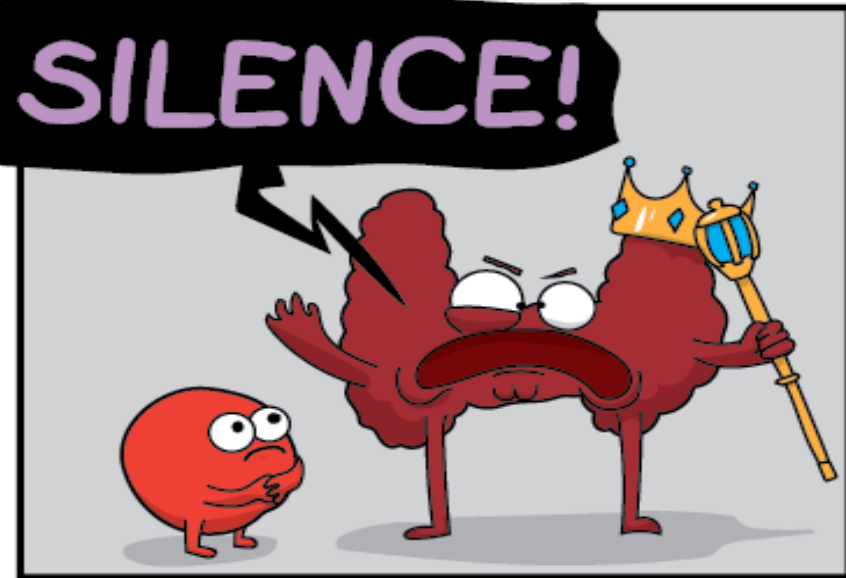


**Intehai Chawlana, Bewakoofana
or Jabirana Faisla tha yeh**

Thyroid, sir, there have been some complaints about the amount of hormone you've been distributing...

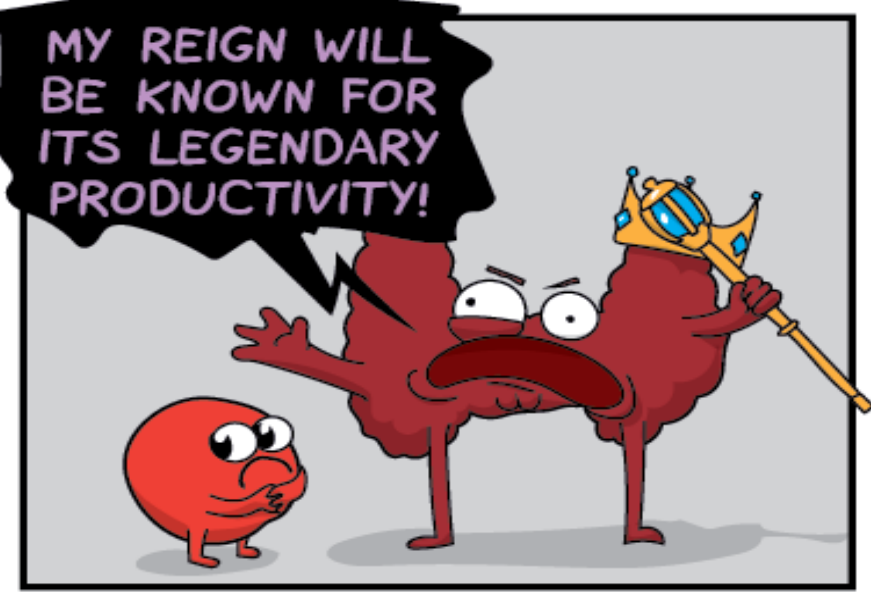


SILENCE!



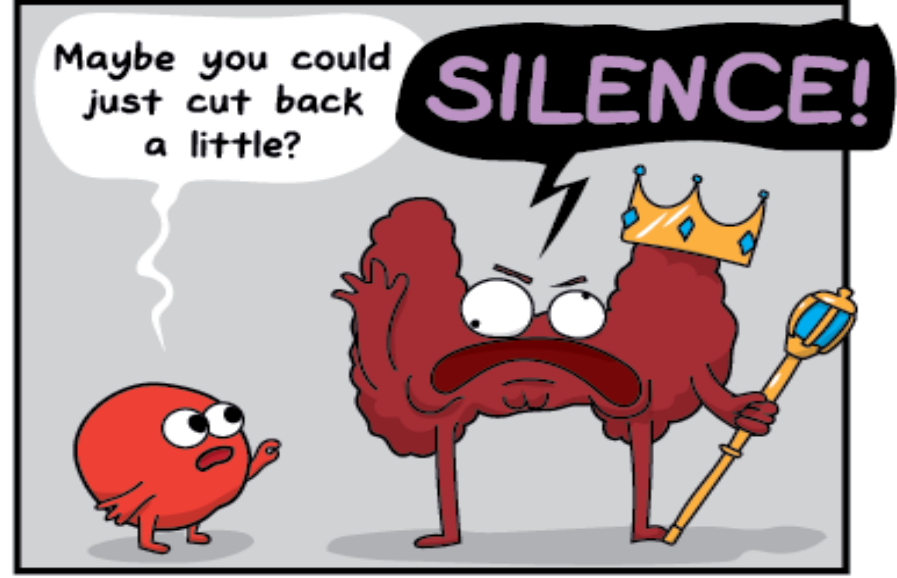
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MY REIGN WILL BE KNOWN FOR ITS LEGENDARY PRODUCTIVITY!



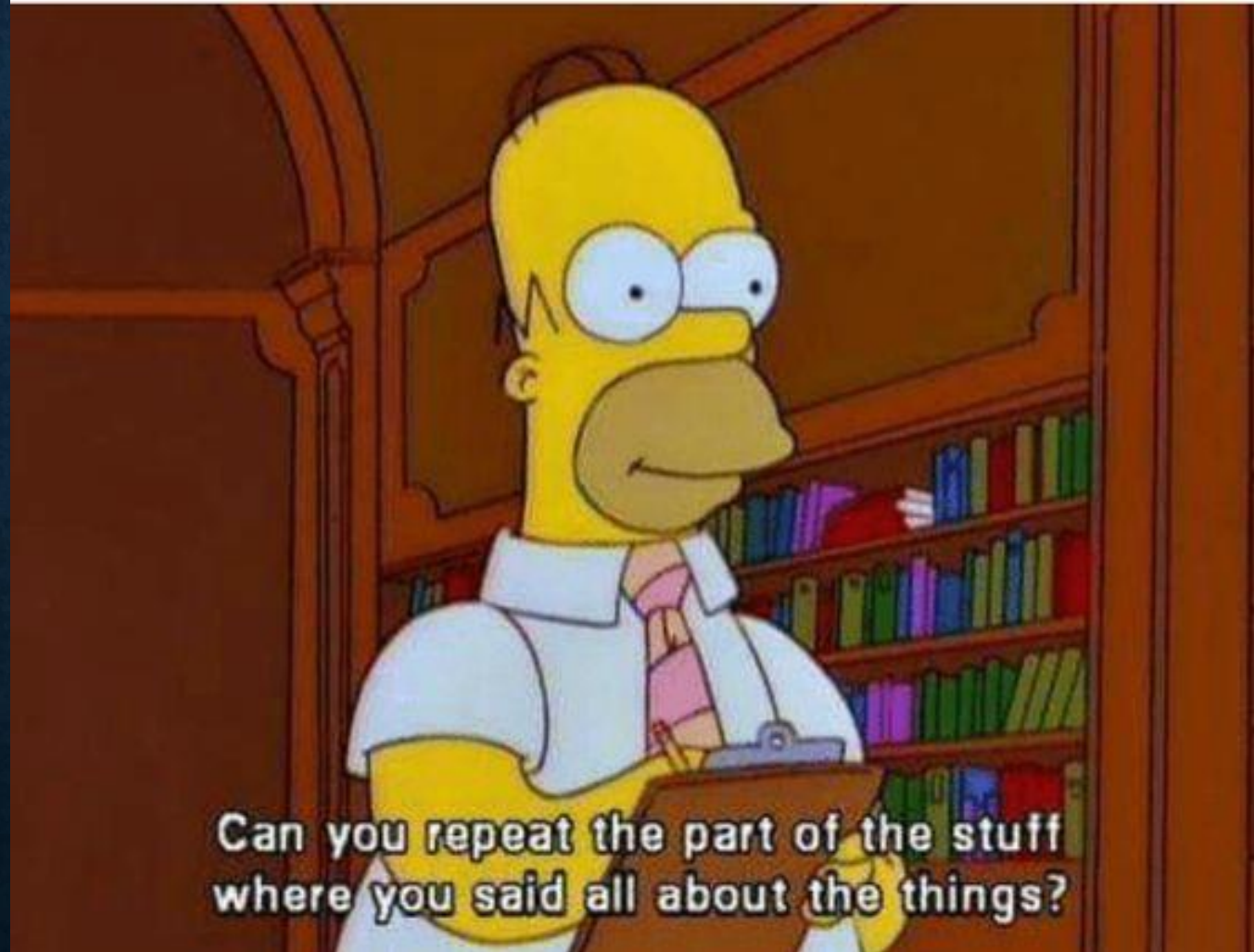
Maybe you could just cut back a little?

SILENCE!



My class after I give very
clear instructions:

**BORED
TEACHERS**



Can you repeat the part of the stuff
where you said all about the things?

RECOMMENDED BOOKS

- Text book of Medical Physiology-Guyton and Hall
- Principles of human Physiology- Lauralee Sherwood
- Color Atlas of human Physiology



FOR FEEDBACK

If you have any questions or confusion regarding this topic plz contact me at:

dr_sarah@yahoo.com

That's all Folks!

