Neuron types and Neurotransmitters

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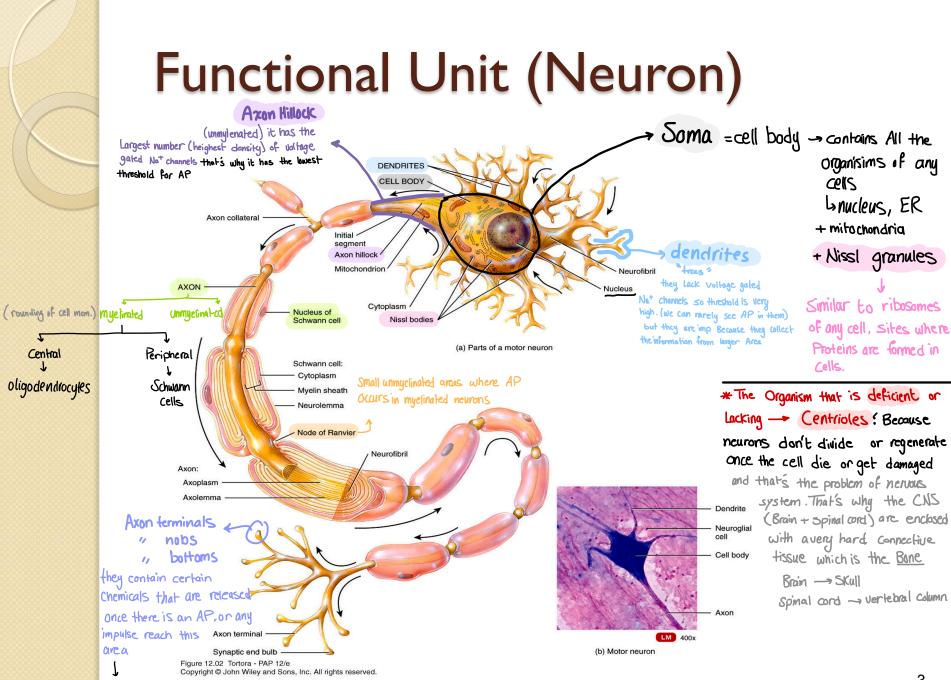
Objectives

• Understand synaptic transmission \leq

"most common"

electrical

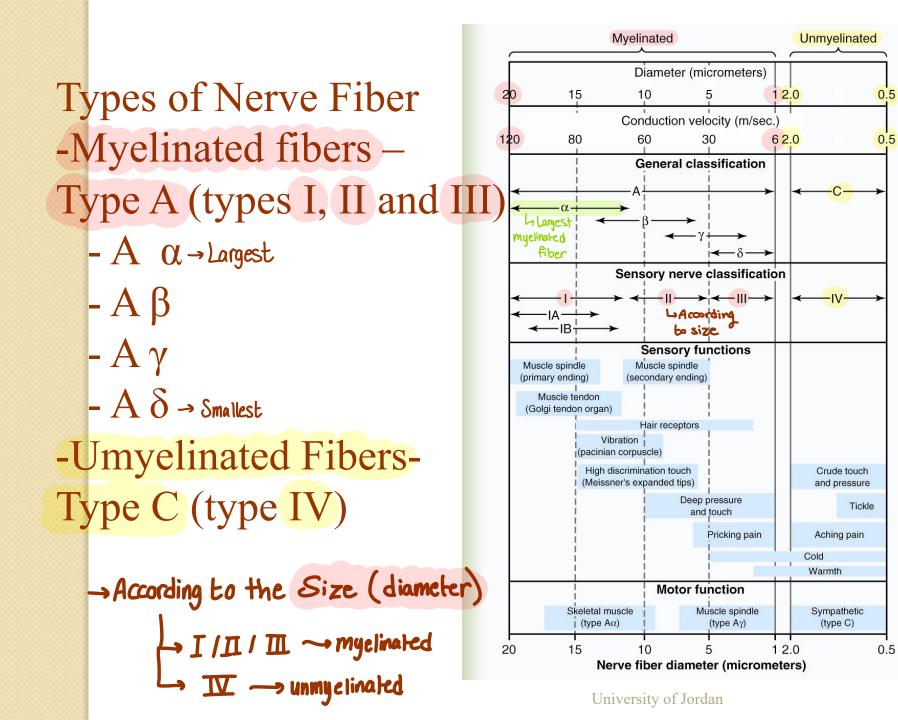
- List types of sensory neurons $\int_{roman}^{A,B,C}$
- Classify neurotransmitters
- Explain the mechanism of neurotransmission
- Judge the types of receptors for the neurotrasmitters

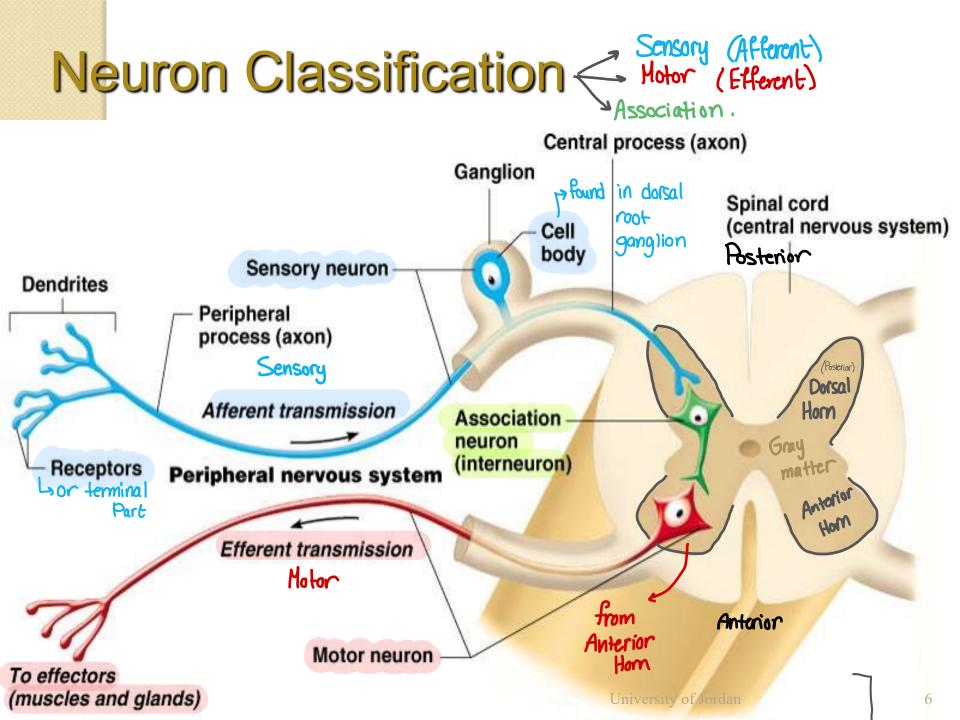


chemicals act as mediators between AP that occures in Pre/Past synaptic nucrons.

Transmission of Receptor Information to the Brain

- The larger the nerve fiber diameter the faster the rate of transmission of the signal
- Velocity of transmission can be as fast as 120 m/sec or as slow as 0.5 m/sec
- Nerve fiber classification
 - type A myelinated fibers of varying sizes, generally fast transmission speed
 - > subdivided into α , β , γ , δ → According to their Diameter
 - type B- partially myelinated neurons (3-14m/sec speed)→found in ANS type C - unmyelinated fibers, small with slow transmission (Sympathetic + parasympthy speed





According to Function

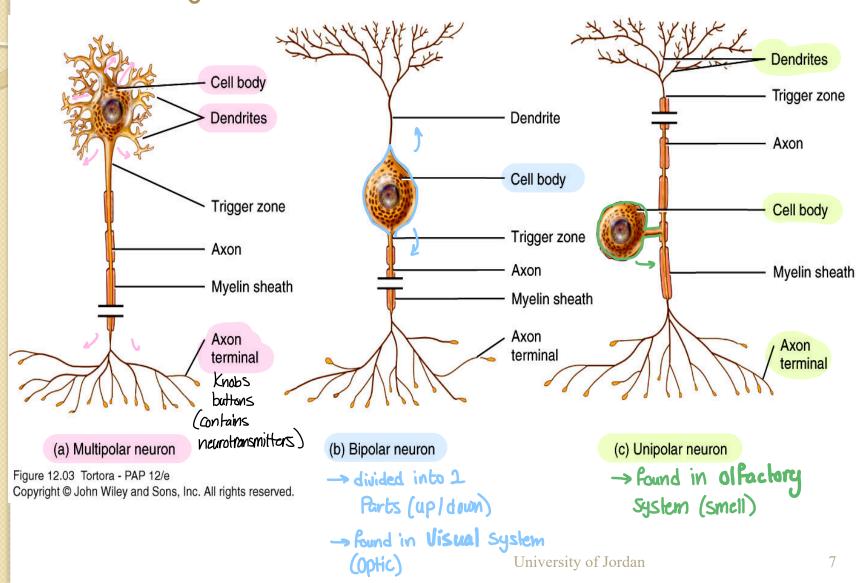
Afferent (Sensory) Association Efferent (Notor) Interneuron Interneuron It goes from Anterior horn of spinal

- -> Collects info. from our body and carry it to CNS. with motor Grd and supplies the effectors
 - (Glands | Muscles)

- -> Collects info. by receptors. -> Cell body is found in dorsal root ganglion.
- -> They enter the dorsal Horn and synapse with
- Interneuron (Association : it associates Afferent with efferent) that
 - connects with Efferent neuron.
- · Connection of cell bodies + dendrites in peripheral nervous system. => Ganglion
- · Connection of Cell body + dendrites in CNS => Nucleus

Structural Classification of Neurons

- Anatomically



Neurotransmitters -> in 1st ne synapse.

Chemicals act as a mediators between AP in 1st neuron 3 2nd neuron around a synapse.

Chemical substances that function as synaptic transmitters

- 1. Small molecules which act as rapidly acting transmitters
 - ♦ acetylcholine, norepinephrine, dopamine, serotonin, GABA, glycine, glutamate, NO. CO Gases
- 2. Neuropeptides (Neuromodulators) -> they modulate the action of type1' modulate the action of type1' modulate the action of type1' more potent than small molecule transmitters, cause more prolonged actions -> Vasoactive Intestinal peptide.
 Intestinal peptide.
- Any thing that comes from typothalamus
 Any thing that comes from typothalamus
 Any thing that comes from typothalamus
 TRH, LHRH, ect. + GnRH
 Gonadatropin Releasing Hormone (In aminoacids)
 ADH
 ACTH, prolactin, vasopressin, ect.

Adreno.corticotropic. Hormone (39 aminoacids) Acts on Adrenal Cortex

Endogenous

Opioids.

they function

like Opioid

derivative

from Opioid

tice

(Morphine)

"milk Hormone" Stimulates milk formation in the breast Anticliuretic Hormone (8 amino Ocids) ~Octa peptide"

All of them are peptides.

University of Jordan

Neurotransmitters

Calcitonin

dont	memorise
	\checkmark

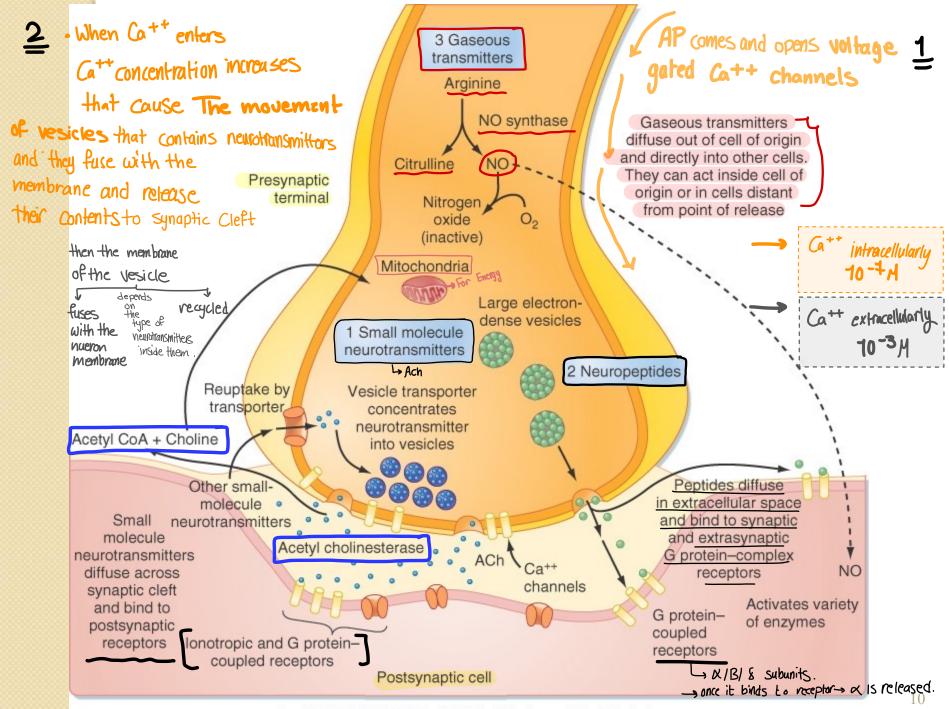
Table 45–1

Small-Molecule, Rapidly Acting Transmitters

Class I Acetylcholine Class II: The Amines -> derived from Tyrosine amino acids. Norepinephrine $\frac{1}{2}$ difference = methyl group in EPI Pituitary peptides (CH3) Dopamine Prolactin Serotonin Histamine Class III: Amino Acids Gamma-aminobutyric acid (GABA) Vasopressin =D inhibitory Glycine Oxytocin Glutamate => excitatory Aspartate Class IV Nitric oxide (NO) +COGastrin - Stomach . released in Larger amounts . their action is short. Neurotensin · Rapidly broken down by enzymes

that doesn't let them stay longer in the synapse.

Table 45-2 Neuropeptide, Slowly Acting Transmitters or Growth Factors neuromodulators ---- All are peptides / proteins that comes from the brain Hypothalamic-releasing hormones -> comes from Hypothalamus Thyrotropin-releasing hormone Luteinizing hormone-releasing hormone · Somatostatin (growth hormone inhibitory factor) 40 aa Adrenocorticotropic hormone (ACTH) • B-Endorphin (endogenous Opioid) α-Melanocyte-stimulating hormone HSH Luteinizing hormone Thyrotropin TSH (Thyroid stimulating H) Growth hormone Peptides that act on gut and brain Leucine enkephalin J (endogenous Opioid) -> similar to morphine Methionine enkephalin in actions but it is Substance P - for pain formed in our body. Cholecystokinin -> released from duodonum Vasoactive intestinal polypeptide (VIP) Nerve growth factor Brain-derived neurotropic factor Insulin Glucagon From other tissues they might be found in the Angiotensin II brain and act as neurotransmitters Bradykinin Carnosine Sleep peptides



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- 3 once Ach diffuses it goes to the postsynaptic membrane and it Binds to it's receptor there ---- then it usually opens ligand/chemical gated Na⁺ channels.
- Membrane becomes depolarized ~ if it reaches the threshold ~ Action Potentia). (Small molecules rapidly acting)
- · On the postsynaptic membrane there's enzymes that breaks Ach Called Acetyl cholinesterase
 - into acetyl CoA + Choline and then Choline Can be revptaken through a transporter that is
 - usually coupled to Nat this called Active reuptake
- once they are reuptaken ---- enter a vesicle again
- peptides are broken down by Proteases / Peptiase

- · once Ach is reuptaken it enters a vesicle again after it being reformed
- 1. Ach vesicle is pashed inside the presynaptic terminal, it's not going to diffuse
 - in the membrane (recycled)
- - Soma (cell body)-since there is no Nissi granules in the terminal so
 - they are only formed in the Soma-
 - once they are formed in the Some (Nissi granule) -> Golgi apparatus for
 - post-translational modification + packaging -> vesicles are punched of the goigi apparatus
 - they reach the terminal by aronal transport which is very slow (1-2 mm/day).
 - -> since these proteins are not going to be reformed in axonal terminals -> they will be
 - hydrolyzed (Broken down) by proteases or peptiases -> not reused or reuptaken.
 - So there's no need for their Vesicle
 - So it diffuses with the membrane of presumptic neuron.

3. Gaseous transmitters ~ NO ~ formed from Arginine by NO synthese

Lygas = High lipid Soluble



so it goes from pre -> post synaptic terminals without

having receptors on post-synaptic neuron. It has receptors inside

post-synaptic cell -> it acts through GMP second messenger

• they can act -> inside cell of origin

distant from point of release.

Comparison between Small Molecules and Neuropeptides Neurotramsmitters (NT)

- Small molecules NT are rapidly acting as compared to slowly acting neuropepides
- Neuron has only one NT but may have one or more NP
- Small molecules NT are have short lived action compared to prolonged time of action for neuropeptides
- Small molecules NT are excreted in larger amounts compared to smaller quantities of neuropeptide -> Why? because they have
- Small molecules NT vesicles are recycled but neuropeptide ones are not

a very long journey to come from the soma where they are formed to terminals

- Neuropeptides are co-secreted with small molecules NT
- Neuropeptides are synthesized at the soma while small molecules could be formed at the presynaptic terminals

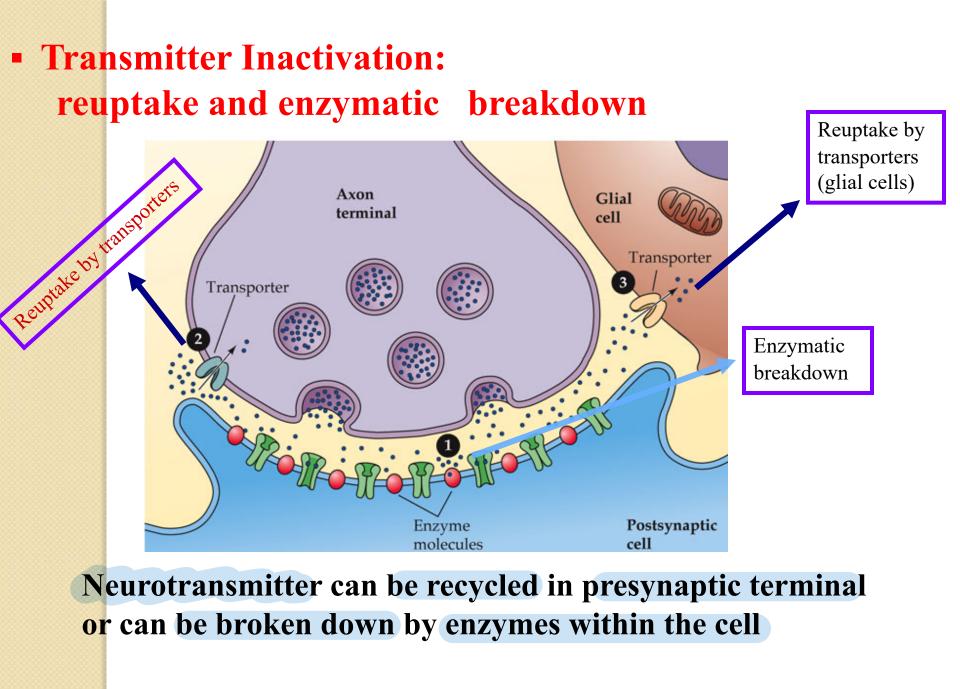
Removal of Neurotransmitter

Diffusion

move down concentration gradient

Enzymatic degradation

Acetylcholinesterase for (Ach), catecholamines ≤ nor cei.
 peptidases for neuropeptides → EPI/NE ⇒ by HonoaminOxidases. (MAO>
 Uptake by neurons or glia cells
 or (COAT)
 neurotransmitter transporters (usually active like Na = Ach Co transport)
 Prozac = serotonin reuptake inhibitor
 drug → For depression



II Neurotransmitters and receptors

Basic Concepts of NT and receptor

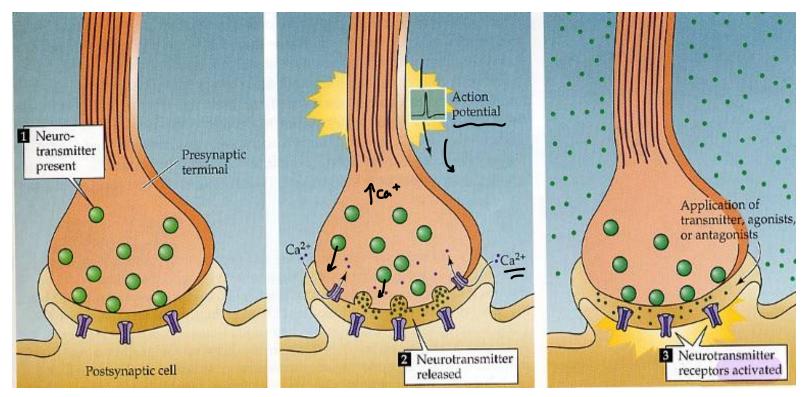
Neurotransmitter: Endogenous signaling molecules that alter the behaviour of neurons or effector cells.

Neuroreceptor: Proteins on the cell membrane or in the cytoplasm that could bind with specific neurotransmitters and alter the behavior of neurons of effector cells

•Vast array of molecules serve as neurotransmitters Small molecules Rapidly acting •The properties of the transmitter do not determine its effects on the postsynaptic cells •The properties of the receptor determine whether a transmitter is excitatory or inhibitory Ach Heart - inhibitory (decreases the I rate) GI - excitatory (Increases movement, secretion...) depending on the <u>receptor</u> S- coupled to K⁺ ions

A neurotransmitter must (classical definition)

- Be synthesized and released from neurons
- Be found at the presynaptic terminal
- Have same effect on target cell when applied externally
- Be blocked by same drugs that block synaptic transmission
- Be removed in a specific way





A substance that mimics a specific neurotransmitter,

is able to attach to that neurotransmitter's receptor

and thereby produces the same action that the neurotransmitter usually produces.

Drugs are often designed as receptor agonists to treat a variety of diseases and disorders when the original chemical substance is missing or depleted.

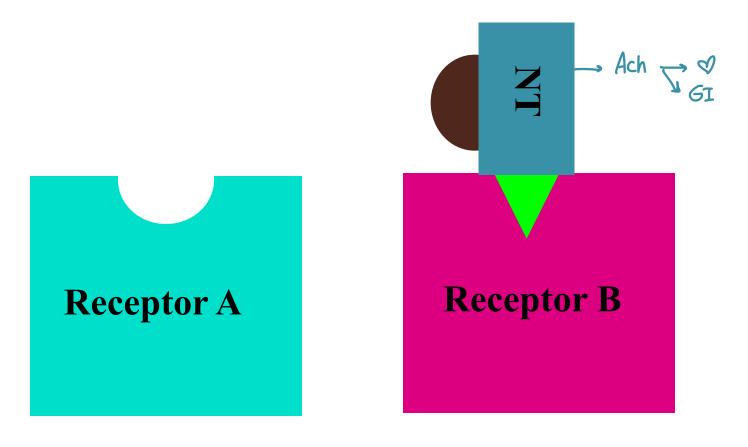
Antagonist

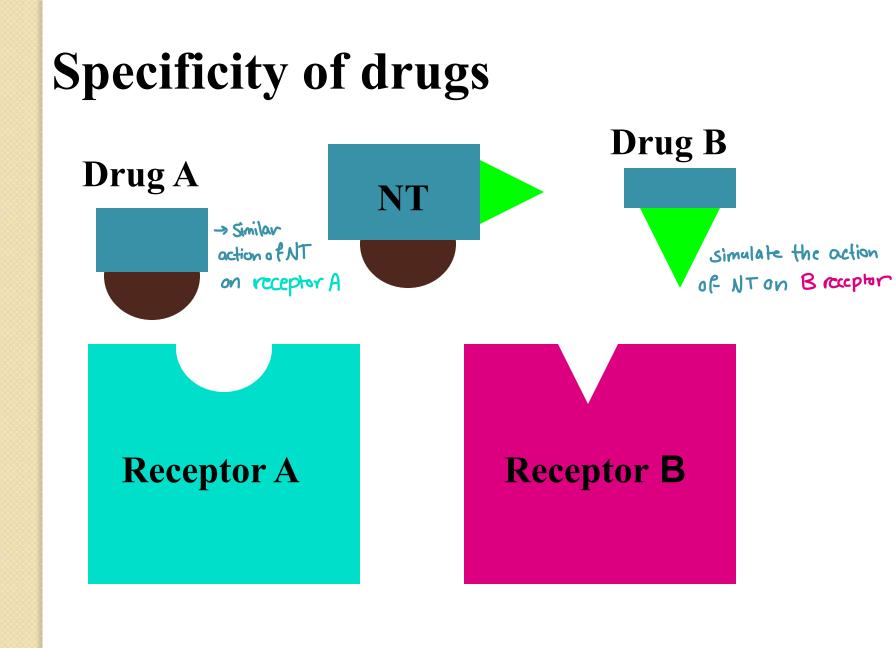
Drugs that bind to but do not activate neuroreceptors,

thereby blocking the actions of neurotransmitters or the neuroreceptor agonists.

-> Beta receptor Blocker/Alpha receptor Blocker _, To treat certain diseases.

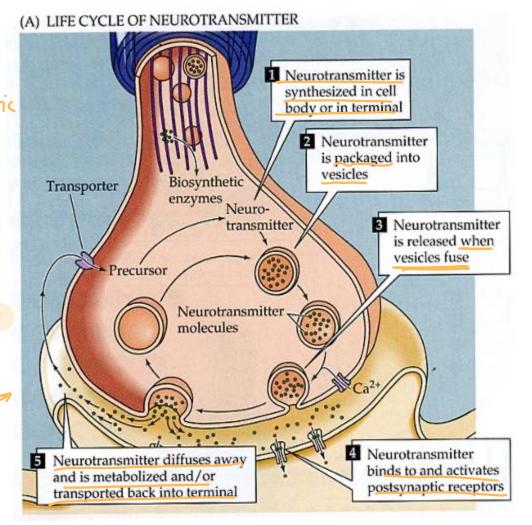
Same NT can bind to different -R (two types of receptors)
different part of NT ~



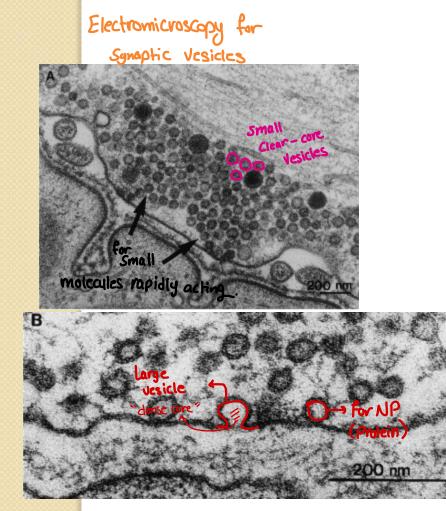


Five key steps in neurotransmission

- Synthesis In presynaphic terminal
- Storage → inside vesicle in Presynaptic terminal
- Release
- Receptor Binding
- Inactivation



Synaptic vesicles



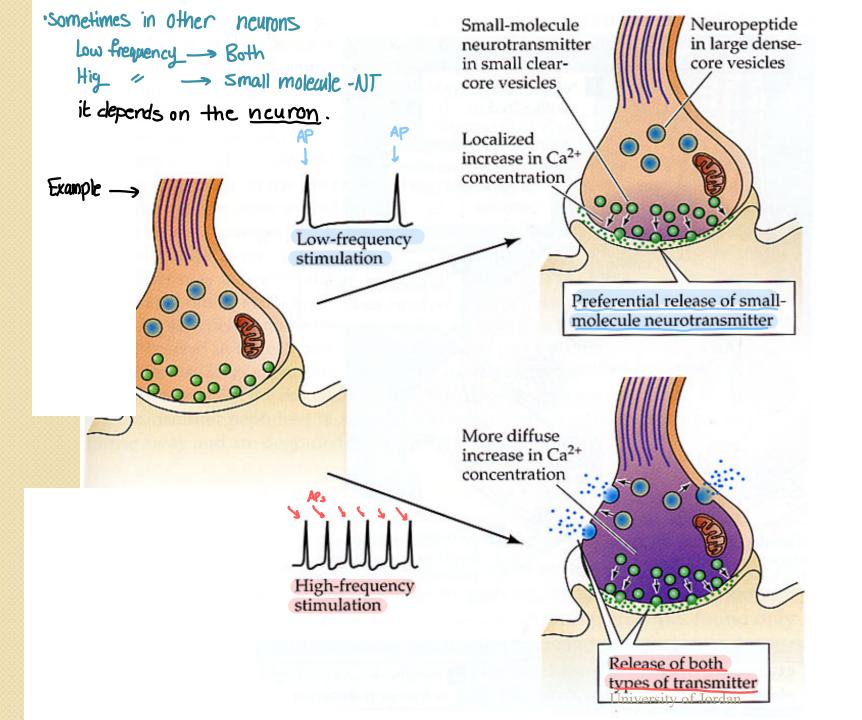
- Concentrate and protect transmitter
- Can be docked at active zone
- Differ for classical transmitters (small, clear-core) vs.
 neuropeptides (large, dense-core)

Neurotransmitter Co-existence (Dale principle)

Some neurons in both the PNS and CNS produce both a classical neurotransmitter (ACh or a catecholamine) and a polypeptide neurotransmitter.

They are contained in different synaptic vesicles that can be distinguished using the electron microscope.

The neuron can thus release either the classical neurotransmitter or the polypeptide neurotransmitter under different conditions.



Receptors determine whether:

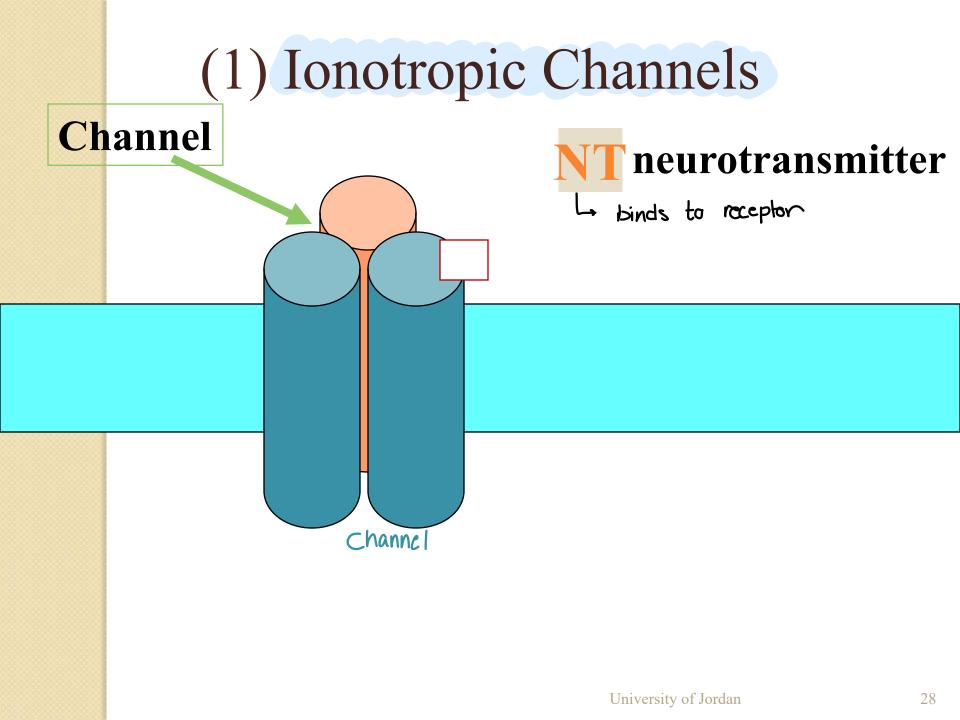
- Synapse is excitatory or inhibitory
 - NE is excitatory at some synapses, inhibitory at others
- Transmitter binding activates ion channel directly or indirectly.
 - Directly -> The receptor itself is an in channel (ionophores)
 - ionotropic receptors /
 - fast
 - Indirectly
 - metabotropic receptors
 - G-protein coupled Activated Alpha subunit dissociate & Subunit and opens a channel
 - slow

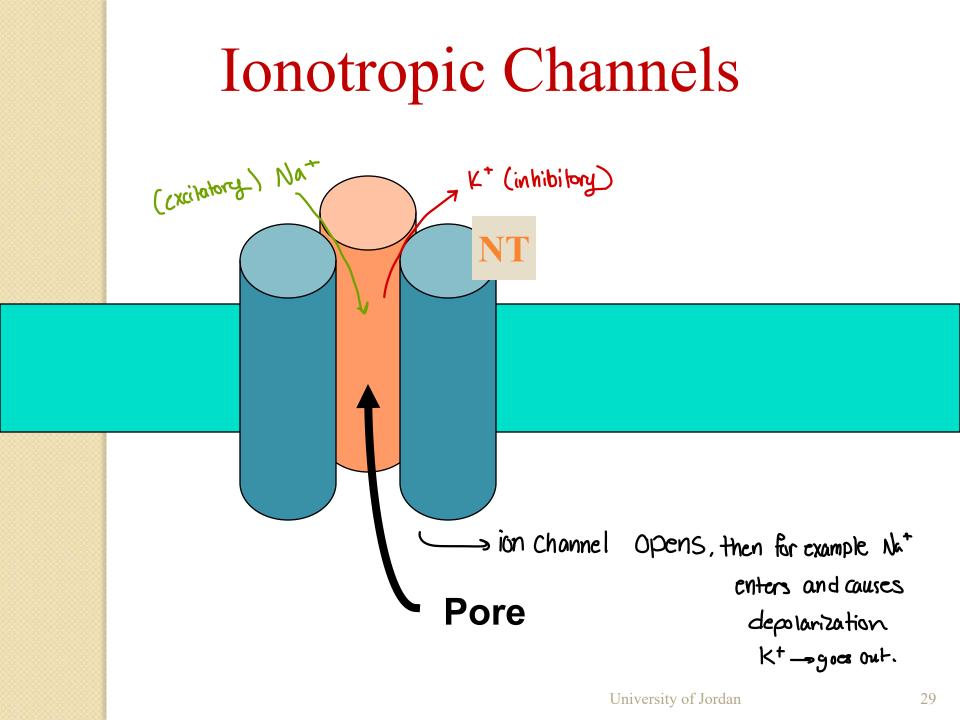
does other actions

like 2rd messenger actions.

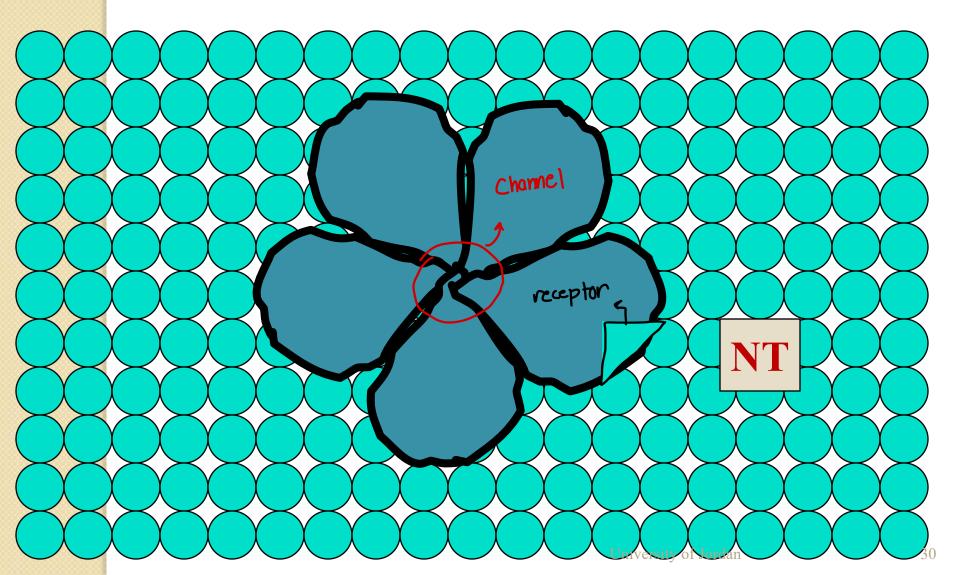
Receptor Activation

- Ionotropic channel
 - directly controls channel
 - fast
- Metabotropic channel
 - second messenger systems
 - receptor indirectly controls channel \sim



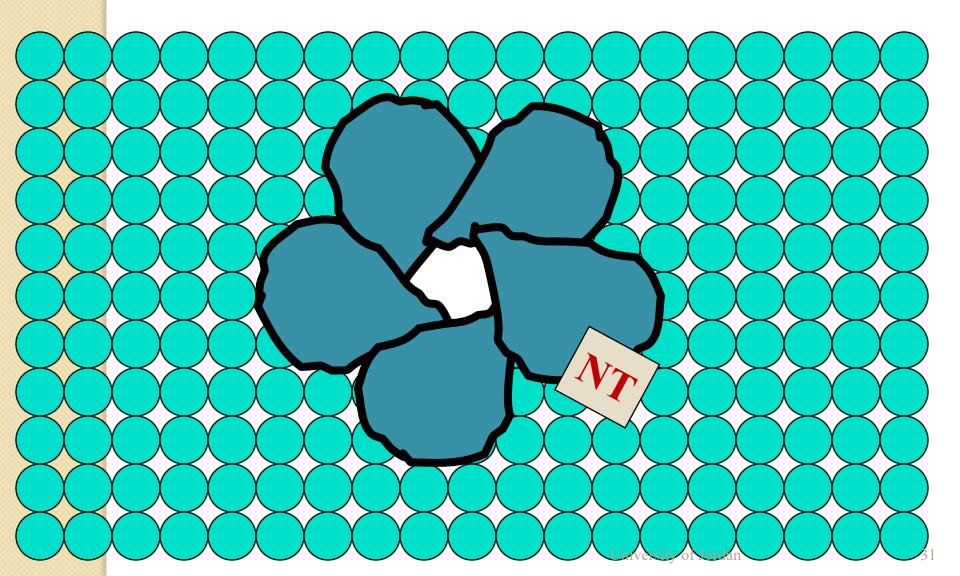


Ionotropic Channels



Ionotropic Channels

NT Binds to receptor -> opens channel.



Metabotropic Channels

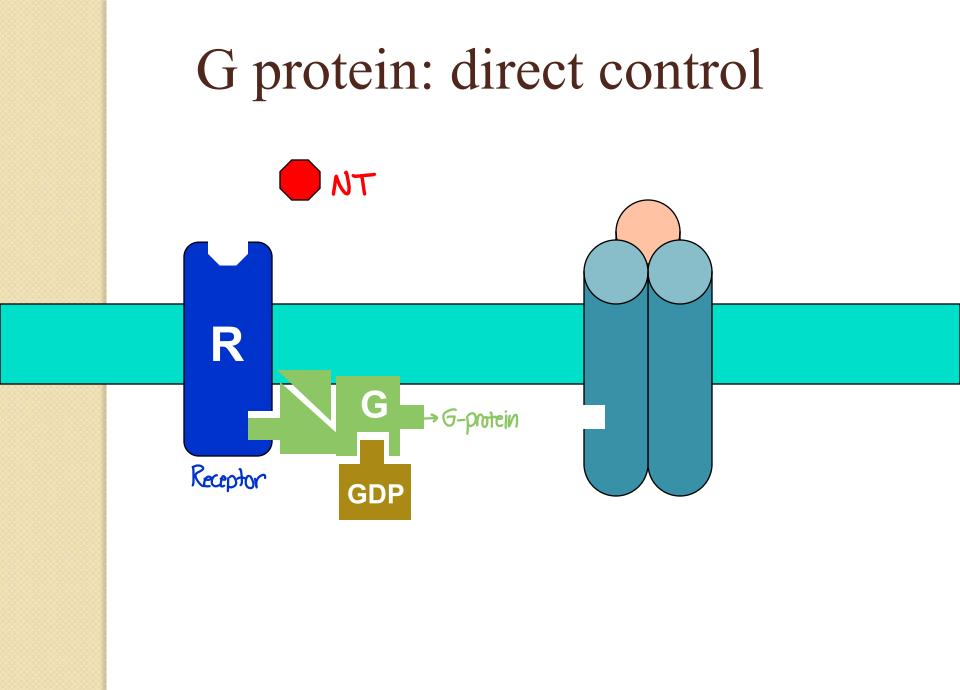
- Receptor separate from channel
- G proteins → Subunits : x /B/8
- 2nd messenger system
 cAMP
 - other types
- Effects
 - Control channel
 - Alter properties of receptors
 - regulation of gene expression \sim

when & Subunit dissociates - might stimulate Adenylate cyclase : converts ATP -> C-Amp Second m essenger

DNA -> Alter gene / receptor properties.

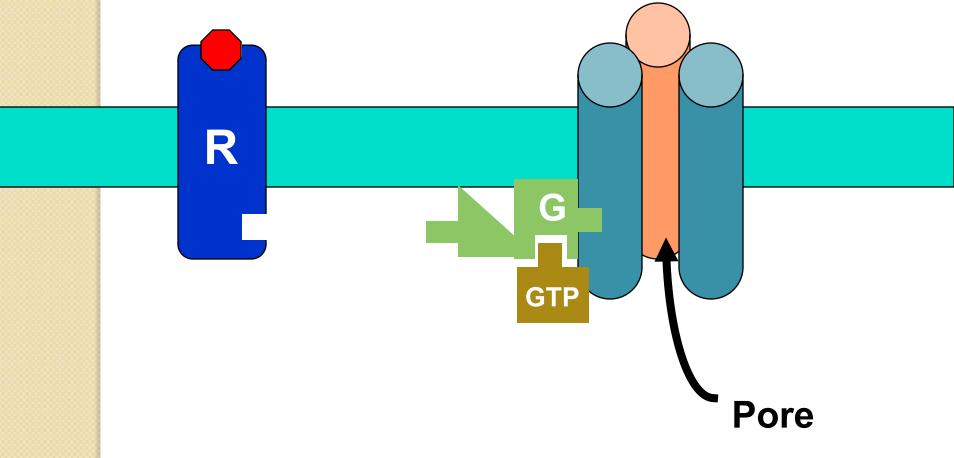
G protein: direct control

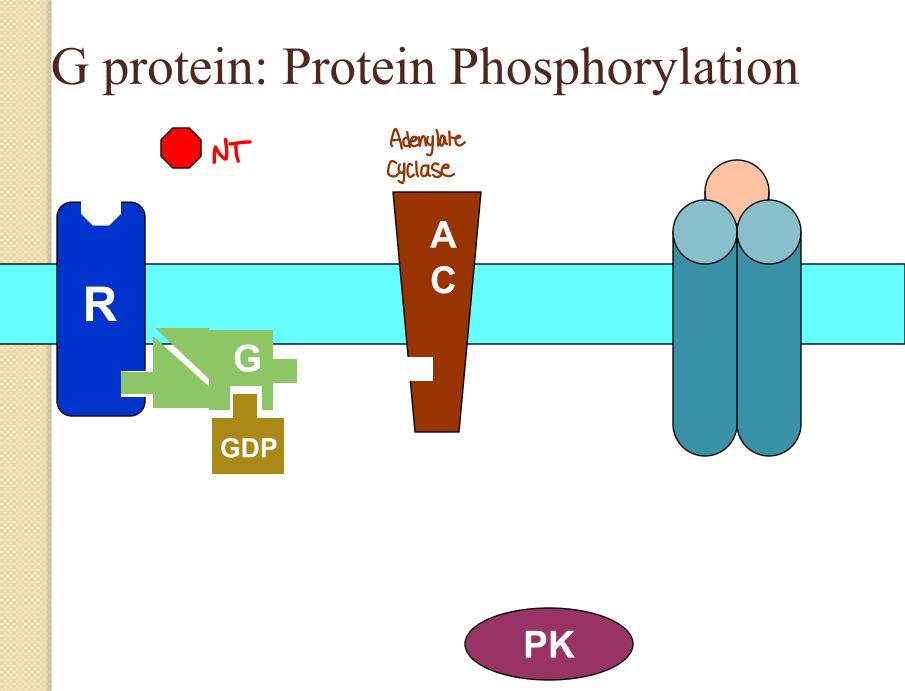
- NT is 1st messenger
- G protein binds to channel
 - opens or closes
 - relatively fast ~ (ionotropic is faster)

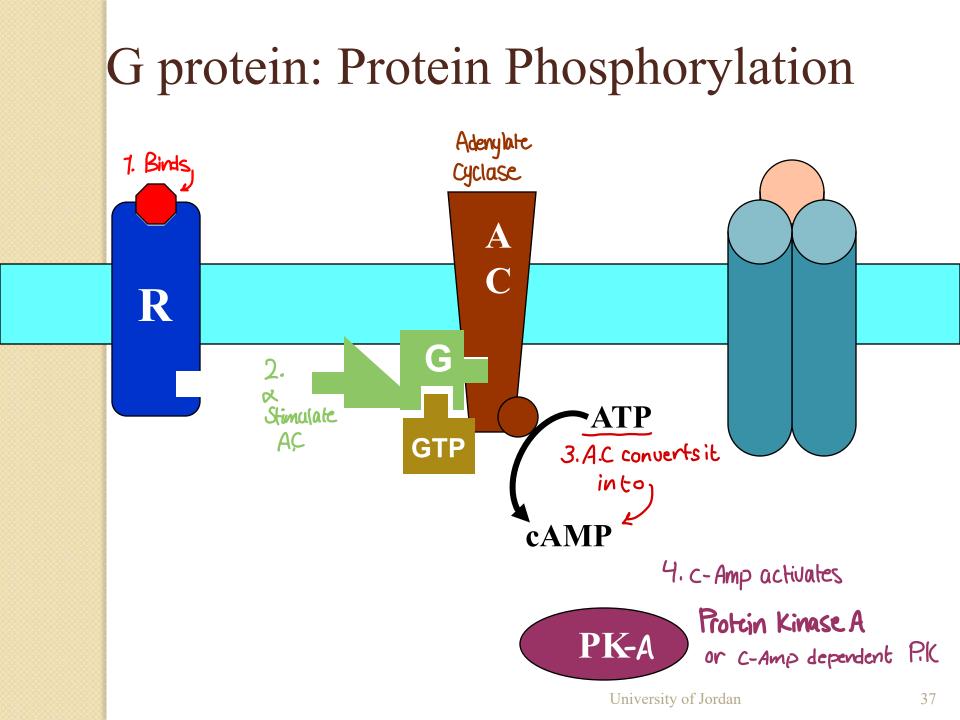


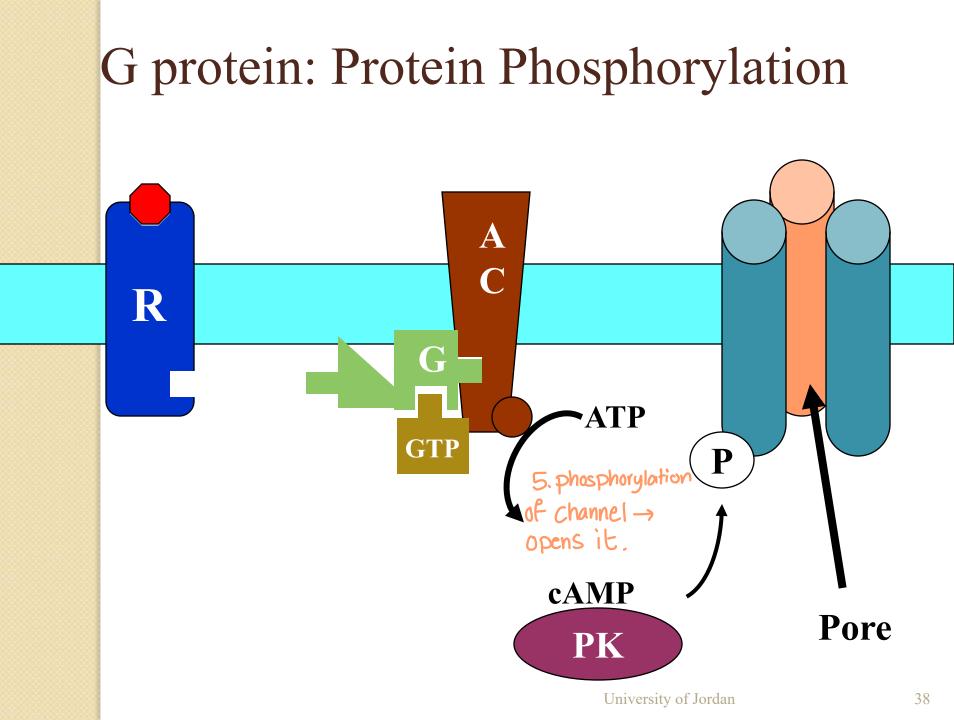
G protein: direct control

once NT binds to receptor -> K subunit of Gprotein dissociate and Opens a channel.









Protein Kinases types

generally phosphorylates proteins

- Protein Kinase A -> Activated by C-AMP
 - C-Amp dependent PK
- or Calmodulin dependent PK Calmodulin : intracellular protein that binds Ca⁺⁺ to be active, each can bind <u>4</u> Ca⁺² ions

Lythen it activates PK-B

IR DAG

· Protein Kinase C ~ Activated by Gatz and phospholipid (DAG)

(at-phospholipid dependent PK DAG = comes from breaking down phospholipids (PIP2)

Transmitter Inactivation

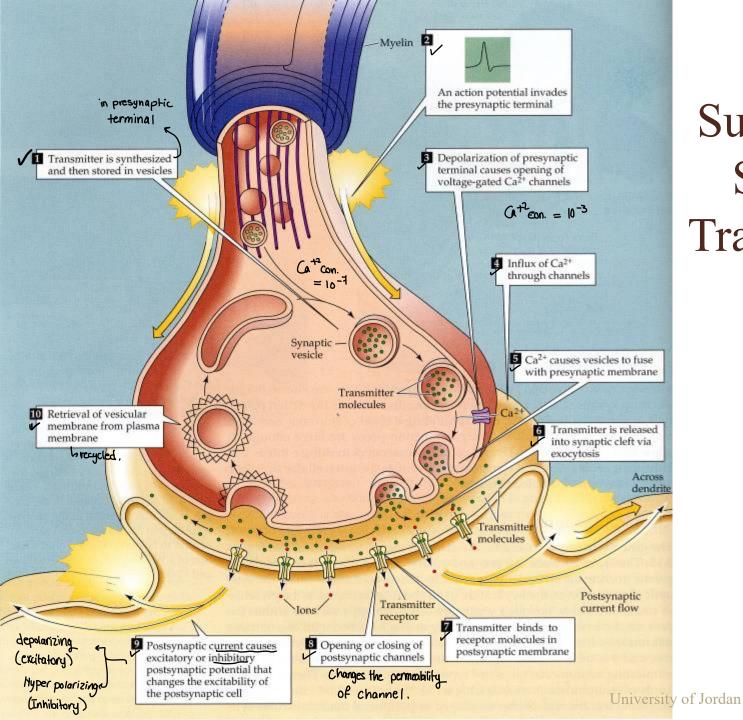
- Reuptake by presynaptic terminal
- Uptake by glial cells
- Enzymatic degradation → Ex: Acetylcholinesterase
- mignt Presynaptic receptor
 - Diffusion

deactivated

Combination of above

We can have drugs than inhibits it -> prolongs the action of Ach or there might be an agonist that breaks down Ach Vay fast.

• Hyasthenia Gravis : autoimmune disease where there's deficiency in Ach receptors — to prolong the action of Ach you give Acetylcholinesterase inhibitar University of Jordan 39



Summary of Synaptic Transmission

Purves,2001 40

اللهم نستودعك أهالى غزّة وفلسطين فانصرهم واحفظهم بعينك التى لا تنام، واربط على قلوبهم وأمدهم بجُندك وأنزل عليهم سكينتك وسخر لهم الأرض ومن عليها.

Duaa_blessings_

