#### **Campbell Reproductive Biology Site Endocrinology Lecture Illustrations**

- 1. What is Endocrinology 2. **Endocrine Functions** 3. Components of Communication Systems 4. Endocrine Analogs of Communication Components 5. Known Hormonal Classes Definition of a Hormone 6. Signal System Types 7. 8. Hormonal Sources Hormonal Sources II 9. 10. Brain Anatomy 11. Limbic System Association 12. Hypothalamic Nuclei Function 13. Hypothalamic Anatomy & Function 14. Hypothalamus & Posterior Pituitary Associations 15. Neurophypophysis Circulation 16. Adenohypophysis Circulation 17. Pituitary & Hypothalamic Anatomy 18. Gross Pituitary Histology 19. Gross Anatomy of the Adrenal 20. Microanatomy of the Adrenal Cortex 21. Information Content and Signal Fluctuation 22. Signal Pulsatility 23. Controls on Bioavailable Hormone Levels 24. Hierarchical Systems of Control 25. Postive and Negative Control Loops 26. Receptor Types 27. Properties of Receptors 28. Receptor Notes 29. Transduction System Properties 30. Transduction Notes 31. Notes on Transduction Systems 32. Hormone and Receptor Evolution 33. Hormone-Receptor Promiscuity 34. Insulin Family Structures 35. Insulin Molecular Structure 36. Evolution of Insulin Family Hormones and Receptors 37. Relative Affinities in the Insulin H-R Group 38. Assessment of Endocrine Function 39. Serpentine Receptors 40. Cytokine/Growth Factor Receptors 41. Acetyl Choline Receptor 42. Intracellular Receptors 43. Nuclear Receptor Response Elements 44. Binding of Nuclear Receptors to DNA 45. Bioassay Dose-Response 46. Biphasic Dose Response of GH 47. Bioassay Notes 48. Chemical Assay Notes
  - 49. Assay Parameters
  - 50. Antibody Binding to Epitopes from Davidson College, MA Campbell
  - 51. Antibody Assay Notes
  - 52. Competitive Immunoassay Characteristics
  - 53. Competitive Immunoassay Error Distributions
  - 54. Competititve Immunoassay Estimation Errors
  - 55. Immunoassay Precision Profile
  - 56. Competitive Immunoassay Precision Profile
  - 57. Competitive Immunoassay, Parallelism
  - 58. Noncompetitive Immunoassay Characteristics
  - 59. Cell and Receptor Sizes

- 60. Adjusting Cellular Response Sensitivity
- 61. Receptor Binding and Numbers of Receptors
- 62. Impact of Losing Receptors on Biological Response
- 63. Hypothalamic Sources of Releasing Hormones
- 64. Adenohypophysial Hormones and Regulators
- 65. Protein Hormone Production
- 66. Images for Review of Cell Physiology and Biochemistry
- 67. Endoplasmic Reticulum Role in Protein Synthesis
- 68. Golgi Actions in Protein Synthesis
- 69. LH. FSH. TSH. hCG Introduction
- 70. More on Glycoprotein Hormone Comparisons
- 71. Yet More on Glycoproteins
- 72. LH Bioassav Setup
- 73. Proopiomelanocortin Metabolism
- 74. TSH Control
- 75. ACTH Control
- 76. Adrenal Function
- 77. Adrenal Function & Regulation
- 78. MSH Control
- 79. FSH Control
- 80. LH Control
- 81. GH Control
- 82. PRL Control
- 83. GH and PRL Gene Properties
- 84. Pituitary Testituclar Axis
- 85. Spelling Is Important!
- 86. Large G Proteins and Protein Kinase A Cascade
- 87. A cAMP Cartoon
- 88. Guanylyl Cyclase Activation
- 89. Large G Proteins and Protein Kinase C Cascade
- 90. Glyceride Chemistry
- 91. Phosphoinositide Metabolism
- 92. Small G Proteins and Tyrosine Kinase Cascades
- 93. Growth Factor/ Tyrosine Kinase Pathway (Examples)
- 94. Transduction Mechanism Networks
- 95. Insulin and Related Receptor Mechanisms
- 96. Oncogenesis Notes
- 97. Cell Cycle Control Points
- 98. Restriction Point Switch
- 99. Cancer Genes
- 100.DNA Replication
- 101.DNA Replication Fork
- 102. Lipoprotein Metabolism
- 103.Receptor Mediated Endocytosis
- 104. Steroid Structure
- 105.Steroid Synthesis
- 106. Steroid Hormones of the Reproductive System
- 107. C21 Metabolic Pathways
- 108.C19 & C18 Metabolic Pathways
- 109. Cellular Steroidogenesis
- 110.STAR Protein
- 111.Enterohepatic Circulation
- 112.Introduction for Reproduction
- 113. Images from Veterinary Reproductive Endocrinology
- 114.Cell Division Notes
- 115.Meiosis
- 116. Prophase Meiosis I
- 117. Meiosis I and II beyond Prophase I 118. Gametogenesis Outline
- 119. Male Reproductive Anatomy

	2
120. <u>Testis Anatomy</u>	166. Gonadal Differentiation
121.Seminiferous Tubule Gross Histology	167. Differentiation of the Internal Reproductive Phenotype
122. Seminiferous Tubule Microanatomy	168. Development of the External Reproductive Phenotype
123. Seminiferous Tubule Closeup	169. Term Placenta Villi Histology
124. Seminiferous Tubule SEM	170. Prostaglandin Metabolism & Childbirth Initiation
125. Seminiferous Tubule Architecture	171. Pregnancy & Childbirth
126. <u>ABP Notes</u>	172.Parturition
127. <u>Stages of Spermatogenesis</u>	173. <u>Descriptive Anatomy of the Breast</u>
128. <u>Spermatogenesis</u>	174. <u>Hormonal Control of Breast Development</u>
129. Sperm Cytology	175. <u>Cellular Organization of the Breast Alveolus</u>
130. <u>Epididymal Sperm Notes</u>	176.Progesterone Inhibition of Milk Production in Pregnancy
131. <u>Capacitation and Acrosome Reaction Notes</u>	177. <u>Nonlactating Breast Histology</u>
131. <u>Capacitation and Actosome Reaction Notes</u> 132. <u>Female Reproductive Anatomy</u>	178.Lactating Breast Histology
133. <u>Menstrual Cycle</u>	178. <u>Lactating Dreast Histology</u> 179. Initiation of Puberty & LH Changes during Adolescence
133. <u>Mensidual Cycle</u> 134. <u>Fertile Phase</u>	180. <u>GONADOSTAT Theory of Pubertal Onset</u>
135. <u>Oogenesis</u>	181. <u>Normal Thyroid &amp; Goiter Anatomy</u>
135. <u>Overian Germ Cell Numbers</u>	182.Schematic of Thyroid Cellular Anatomy
	183. Biosynthesis of Thyroid Hormones by the Thyroid Follicular
137. <u>Female Gamete Development</u>	
138. <u>Folliculogenesis</u>	Epithelial Cells
139. <u>Primordial Follicle Histology</u>	184. <u>Chemistry of Thyroid Hormone Biosynthesis</u>
140. <u>Primary Follicle Histology</u>	185. <u>Thyroid Hormone Mechanism of Action</u>
141. <u>Secondary Follicle Histology</u>	186. <u>Schematic of Gross Pancreatic Anatomy</u>
142. Graafian Follicle Histology	187. <u>Pancreatic Histology</u>
143. <u>Follicle Dynamics</u>	188. <u>Schematic of Pancreatic Islet</u>
144. Follicular Estrogen Synthesis: 2 Cell Model	189. <u>Islets of Langerhans Histology</u>
145. <u>Corpus Luteum Histology</u>	190.Hormones from the Pancreatic Islets
146. Proliferative Phase Uterine Histology	191.Notes on Pancreatic Hormones
147. Secretory Phase Uterine Histology	192. Simplified Schematic of Glucose Homeostasis
148. Vaginal Epithelial Histology	193. Hormonal Impacts on Glucose Homeostasis
149. Gamete and Zygote Transport in the Oviduct	194. Some Introductory Notes on Diabetes
150. <u>Fertilization Site</u>	195. <u>Satiety</u>
151. <u>Fertilization</u>	196. <u>Satiety 2003</u>
152. Fertilization: An Illustrated Outline	197. Homeostasis of Blood Pressure Control, Water & Sodium
153. <u>Sperm-Egg Fusion</u>	Balance
154. Initial Stages of Zygote Division & Development	198. The Juxtaglomerular Apparatus & Renin Production
155. Luteal Lifespan & Luteolysis: Nonfertile Cycle	199. Metabolism of Angiotensinogen & Angiotensin
156. Counter-Current Delivery of Prostaglandins to the Ovary	200. The Physiological Problem of Glucocorticoid Binding to
from the Endometrium	Mineralocorticoid Receptors
157. Maternal Recognition of Pregnancy; Luteal Lifespan: Fertile	201. Kallikrein Metabolism
Cycle	202. Integration of Kinin and Renin Metabolism
158. <u>Nidation, Early Stages</u>	203. Effectors of Aldosterone Action
159. <u>Nidation, Late Stages</u>	204. <u>Calcium Homeostasis</u>
160. Normal Profiles of Hormones of Pregnancy	205. Metabolism of Cholecalciferol
161. Steroidogenesis by the Maternal-Feto-Placental Unit	206. Bone Cellular Anatomy, Sagittal View
162. Embryology & Organogenesis in the Primate	207. Bone Cellular Anatomy, Cross Section
163. Sex Determination in Mammals is a Process	208. Calcium Movements Associated with Osteoid Cells
164. SRY Is the Sex Determining Gene in Mammals	
165. Molecular Biological Cascade Involved in Gonadal	
Formation	

#### **Powerpoint Presentations**

- 1. Introduction to Basic, Hypothalamic, and Hypophysial Endocrinology
- 2. Evolution of Basic Digestive Physiology and Endocrinology
- 3. <u>Diabetes: Basics and Drugs</u>
- 4. Introduction to Endocrinology
- 5. Overview of Male Endocrinology
- 6. <u>Overview of Female Endocrinology</u>
- 7. <u>Endocrine Disruptors</u>
- 8. <u>Opportunities and Active Research Areas in Endocrinology</u>
- 9. Training in Endocrinology & Other Biomedical Sciences
- 10. Thyroid Physiology
- 11. <u>RBI Sigma Descriptions of Apoptotic Pathways</u>

## Endocrinology = Intercellular Chemical Communication

This is a course about communication systems and information transfer. It covers the chemistry, biochemistry, molecular biology, genetics, cell biology, cell physiology, organismal physiology, whole animal biology, and behavior associated with chemical communication.

# **Endocrine Functions**

- Maintain Internal Homeostasis
- Support Cell Growth
- Coordinate Development
- Coordinate Reproduction
- Facilitate Responses to External Stimuli

## **Elements of a Communication System**

- Sender
- Signal
- Nondestructive Medium
- Selective Receiver
- Transducer
- Amplifier
- Effector
- Response (2ndary signal)

## **Elements of an Endocrine System**

- Sender = Sending Cell
- Signal = Hormone
- Nondestructive Medium = Serum & Hormone Binders
- Selective Receiver = Receptor Protein
- Transducer = Transducer Proteins & 2ndary Messengers
- Amplifier = Transducer/Effector Enzymes
- Effector = Effector Proteins
- Response (2ndary signal) = Cellular Response (2ndary hormones)

## **Known Hormonal Classes**

- 1. Proteins and peptides
- 2. Lipids (steroids, eicosanoids)
- 3. Amino acid derivatives *(thyronines, neurotransmitters)*
- 4. Gases (NO, CO)

## Hormone

A molecule that functions as a message within an organism; its only function is to convey information.

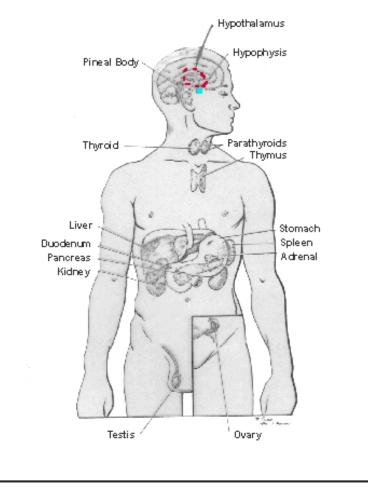
Because of this function, physical descriptions of a chemical suspected of being a hormone are inadequate to indicate the molecule's role in a biological system. <u>A molecule is a hormone only when described in the context of its role in a biological communication system</u>. Definition of a hormone requires testing of that molecule in a biological response system, running a <u>bioassay</u>.

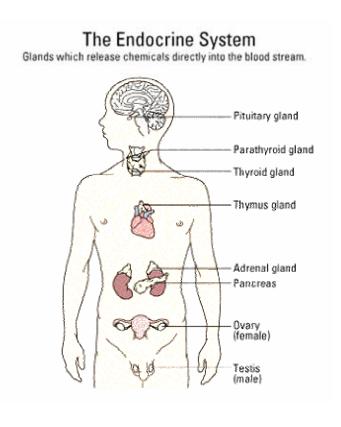
The existence of endocrinology is totally dependent on the existence and use of bioassays. (This is also true for pharmacology and toxicology.)

# Forms of Intercellular Communication

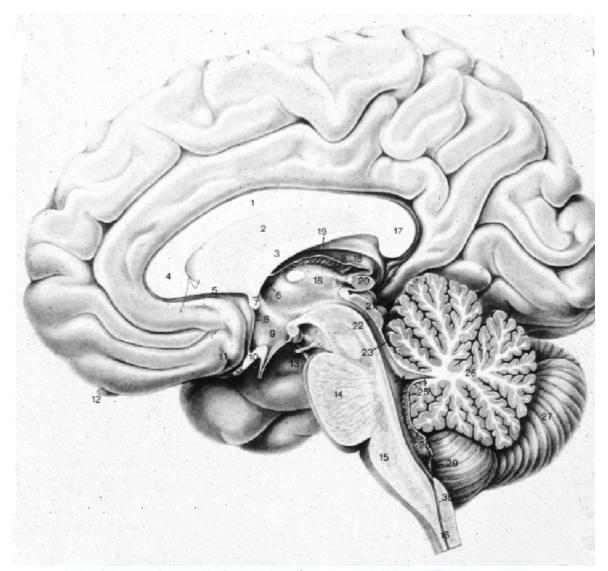
- 1. *Endocrine*: secretion of a hormone by one cell with transmission via the blood, lymph, or intercellular fluid to a second, target, cell.
- 2. *Paracrine*: secretion of a hormone by one cell with transmission via intercellular fluid to a second, nearby cell.
- 3. *Autocrine*: secretion of a hormone by one cell with reception and response by the same cell.
- 4. *Pheromonal*: secretion by one organism and sensation and response by a second.

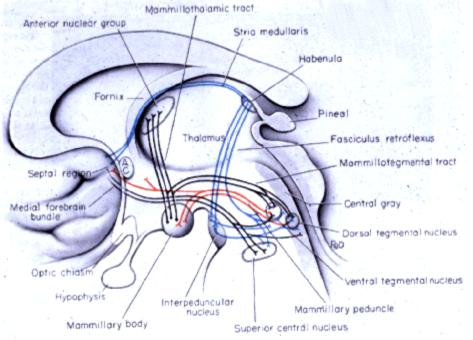
# **Classical Endocrine Tissues**





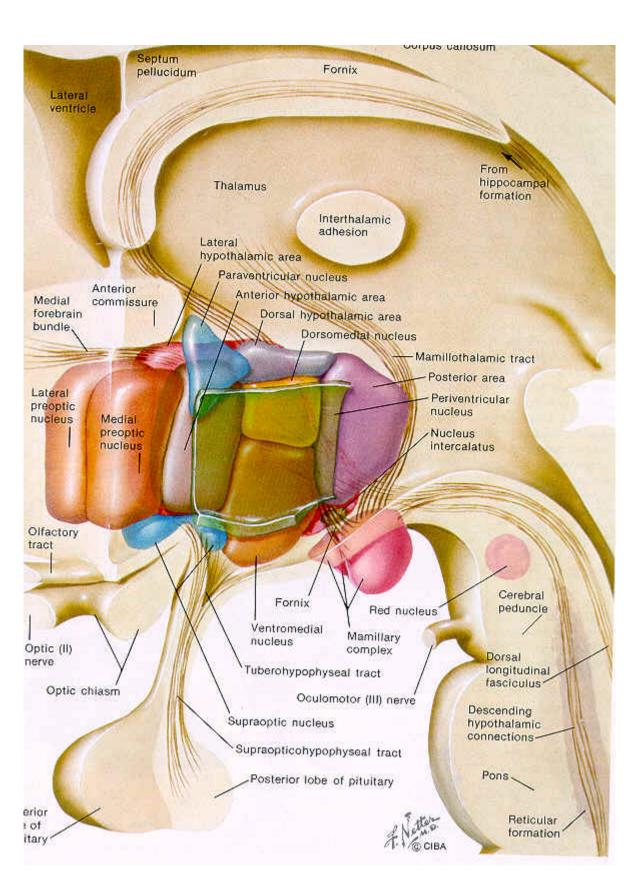
© 2000 Kenneth L. Campbell

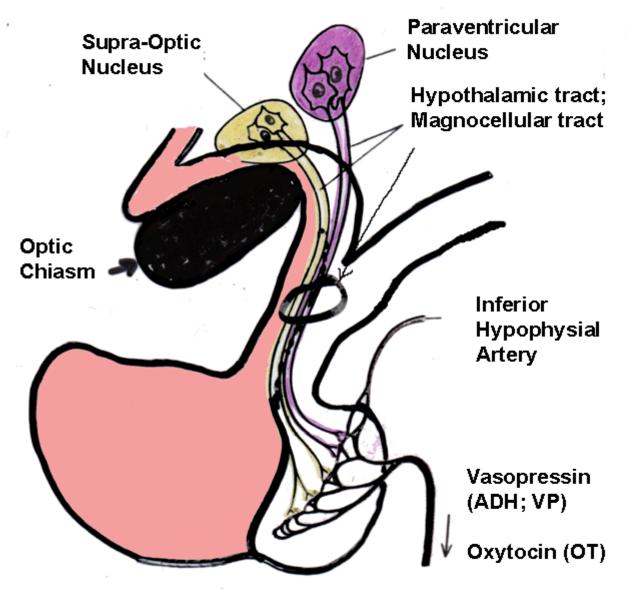




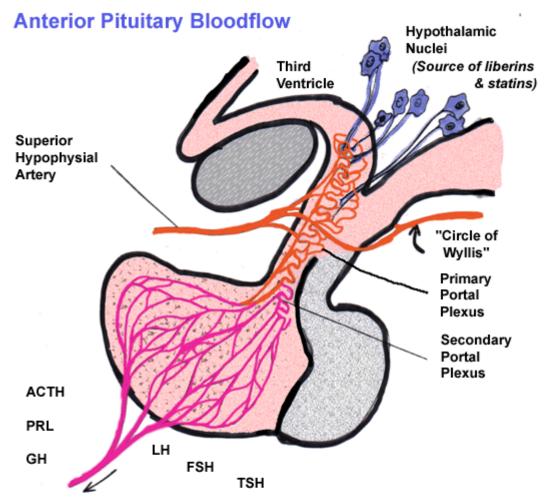
12) <u>Hypothalamic Nuclei Function</u> ~ <u>http://cal.man.ac.uk/student\_projects/2000/mnby6kas/function.htm</u>

13) <u>Hypothalamic Anatomy & Function</u> ~ <u>http://www.endotext.org/neuroendo3b/neuroendo3b/htm</u>

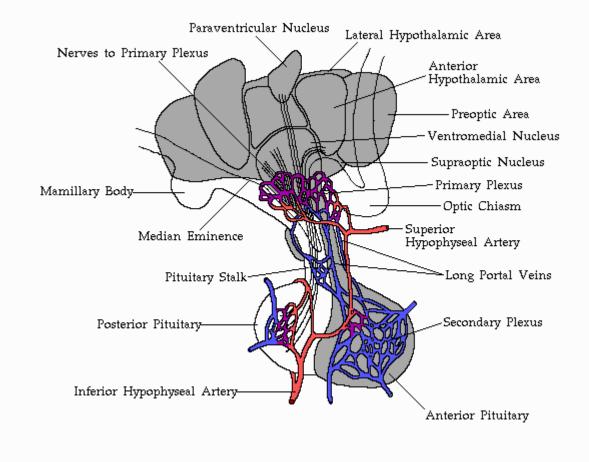


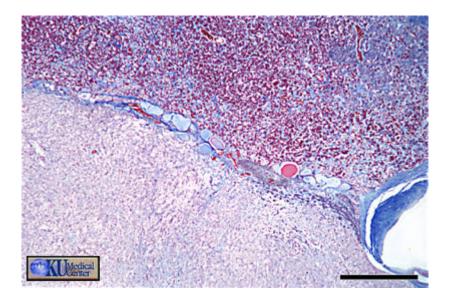


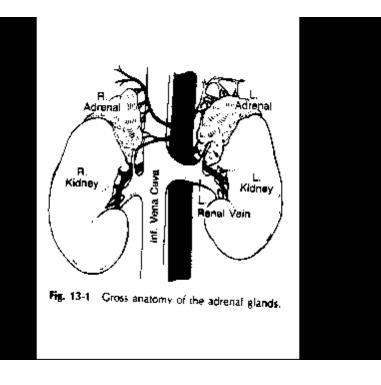
**Neuroendocrine Products of the Neurohypophysis** 

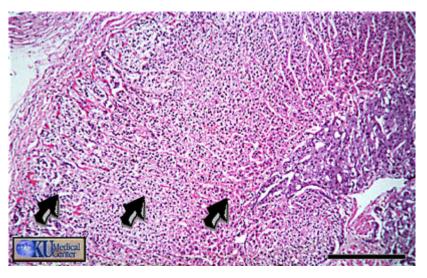


The primary portal plexus, a "priviledged" or "leaky" portion of the brain vasculature, provides a port of entry for the neuroendocrine secretions of the cells of many hypothalamic nuclei. These are carried by pulsing capillary bloodflow to the cells of the adenohypophysis (anterior pituitary) where they bind and modulate the synthesis and secretion of the six anterior pituitary hormones. Note that the products of the anterior, posterior, and intermediate (where it exists) lobes may diffuse back to the hypothalamus during the nadir of capillary blood flow.









# Information Content is Greatest When Levels of a Signal Fluctuate

- Fluctuations with distance provide cues to the position of the source, *e.g.*, developmental gradients.
- Fluctuations with time prevent saturation, *desensitization, down regulation*, habituation.

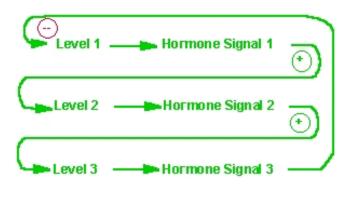
# **Hormones Usually Released as Pulses**

- Pulses reflect the packaging of proteins, peptides, and neurotransmitters.
- Pulses reflect the coordinated actions of groups of releasing cells.
- Each pulse has an *amplitude* and *period*.
- Groups of pulses have a *frequency*.
- Basal levels of hormone often reflect the spacing between pulses and its relation to hormonal clearance.

# Biologically Available Hormone Levels Can Vary Due To:

- Changes in synthesis
- Changes in secretion
- Changes in clearance
- Changes in degradation
- Changes in binding proteins
- Age
- Gender
- Developmental stage
- Reproductive status
- Stage of temporal rhythm

# Hierarchical Control Systems



Different hormones are secreted by different tissues. These may be linked into control loops of varying complexity. Often noncontrol functions are performed on additional target tissues at one or more levels.

# **Control Loop Types**

# 1. Negative

• These maintain hormonal balance and are often linked to homeostatic processes.

• If the multiplicative effect of the several links in a control loop is negative, the entire control loop is negative.

# 2. Positive

• These cause physiologic changes in the system involved.

• If the multiplicative effect of the several links in a control loop is positive, the entire control loop is positive.

Receptor Types Protech (ange) malor change hormones (peptides or neuro transmitters) In nucleus for Small, neutral, hydroiphabin molecules (e.g. steroids, thyroid hormone) Non covalent binding to hormones, reversible

# **Receptor Characteristics**

- Proteins
- Highly Specific for Hormone
- High Affinity for Binding (high K<sub>a</sub>, low K<sub>d</sub>)
- Saturable (low numbers per cell)
- Localized in responding tissues and necessary for specific cellular responses

# **Hormone Receptors**

Binding to hormones is noncovalent and reversible.

## Membrane Receptors

- Imbedded in the cell membrane, integral proteins, glycoproteins
- At the surface of target cells for protein molecules and charged hormones (peptides or neurotransmitters)

Three major groups

- Serpentine (7 transmembrane domains)
- Growth factor, cytokine receptors (1 transmembrane domain)
- Ion channels

## **Nuclear Receptors**

- In the nucleus for small, neutral, hydrophobic molecules (steroids, thyroid hormones)
- Often involve cycling of R from cytoplasm where it resides as an inactive complex with heat shock proteins (HSPs) until binding of H and/or phosphorylation or dephosphorylation of the R or HSPs to the nucleus where the HR complex binds to specific Hormone Recognition Elements (HREs) or sequences on the DNA in the promoter regions of target genes. The HR often binds as a homodimer to palindromically oriented HREs and bends the DNA at the site of binding to allow transcriptional enzymes access to gene sequences. The HR may disaggregate as H levels fall or the complex may be phosphorylated or dephosphorylated so as to cause H loss and movement of the R back to the cytoplasm where HSPs can again bind.

# **Transduction Systems:**

- Function to translate information contained in hormonal messages, when these are sensed by a receptor, into a language that can be interpreted and acted upon by target cells.
- For proteins, peptides, and hormones with a significant ionic charge at neutral pH, receptors are usually integral membrane proteins located at the cell surface. When hormones bind to the receptors, the receptors interact with membrane-bound or intracellular transducer proteins to begin the cascade of events leading to cellular response.
- Some membrane receptors, e.g., the acetyl-choline receptor, act as ion channels that open or close in response to hormone binding and induce changes via changes of the intracellular ion/charge balance.

- For many lipophilic hormones, *e.g.*, steroids or thyronines, receptors are intracellular, usually intranuclear, proteins. When their specific *ligands* bind, the hormone-receptor complexes undergo conformational changes that allow them to interact with specific hormone recognition sites (HREs) in the DNA of the regulatory regions of certain genes.
- These transduction processes involve allosteric changes in receptor and/or transducer protein shape. The signaling cascades of membrane-bound receptors almost universally involve protein phosphorylation by kinases. These kinases may be activated initially via generation of secondary messengers produced by allosteric activation of enzymes like adenylyl or guanylyl cyclase or via unmasking of kinase activities that are part of the cytoplasmic portions of the receptor proteins themselves.
- Both allosteric changes and/or phosphorylation, which often changes protein charge, alter protein shape and/or intercellular location and protein *function*. These are exactly the kind of changes that would be needed to trigger a biochemical and cellular response. This may occur without the intervention of protein synthesis and therefore may be very rapid, milliseconds to minutes.
- Opening or closing of ion channels will also precipitate rapid responses either directly or via the intervention of phosphorylation cascades with their associated changes in protein functions.
- Intranuclear receptor transduction also involves allosteric and phosphorylation changes. It normally triggers changes in gene transcription and subsequent protein production and frequently modulates changes during a longer time course of minutes to days.

# **Transduction Systems**

2 Features of transduction that both alter protein shape and function:

- 1. Allosteric changes
- 2. Phosphorylation

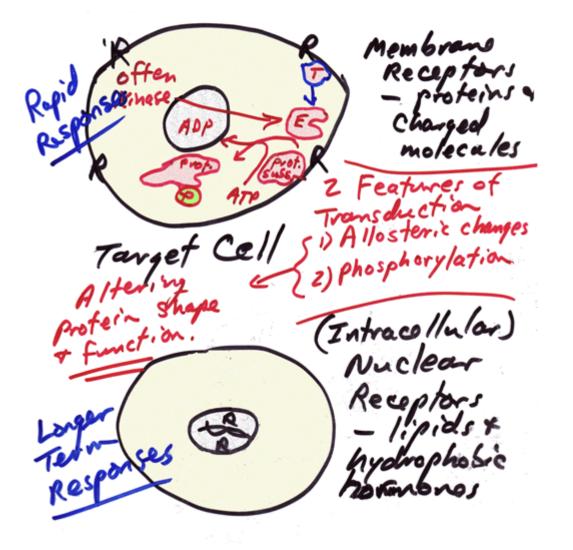
# **Membrane Receptors**

- usually for proteins and charged molecules
- rapid response systems, sec-min

# Intranuclear Receptors

- lipids and hydrophobic hormones
- longer term responses, min-days

Transduction Systems

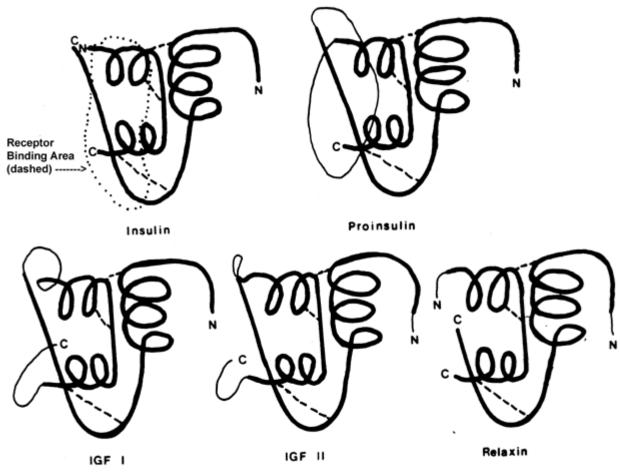


Hormones are often evolutionarily and genetically closely related to other hormones.

Receptors are often related to one another in similar ways.

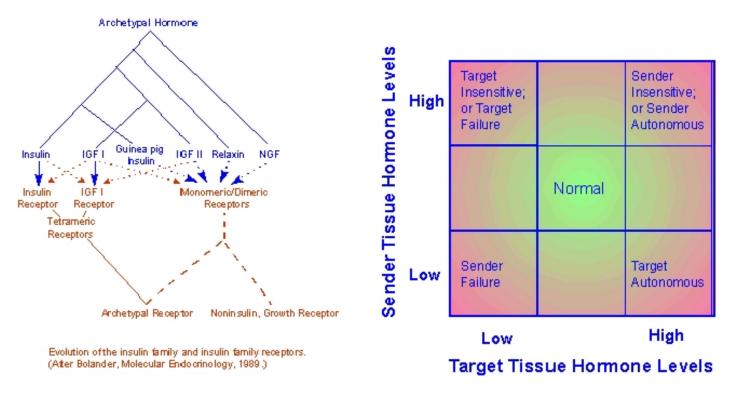
# Genetic relatedness among hormones or receptors leads to *promiscuity* among hormone/receptor systems.

- GH, PRL
- · Insulin, IGF-I, IGF-II
- · hCG, TSH



Insulin family structural homologies. A and B chains are heavy lines. C-peptides or N- and C- terminal extensions are thin lines. S-S bonds are dashed lines. (Modified from Bolander, *Molecular Endocrinology,* Academic Press:San Diego, CA, 1989.)

35) Insulin Molecular Structure ~ http://c4.cabrillo.cc.ca.us/projects/insulin\_tutorial/index.html

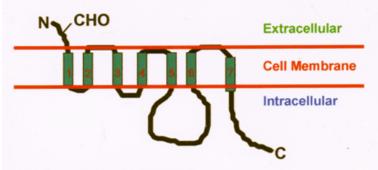


# Diagnostic Relationships in Negative or Homeostatic Feedback Loops

# Relative Affinities for Receptors of the Insulin Family to Family Members

Receptor	Relative Affinities
Insulin	Insulin >Proinsulin (10%) >IGF II >IGF I >>Relaxin(~0)
IGF I	IGF I > IGF II >Insulin ~ Proinsulin
IGF II	IGF II = IGF I >>Insulin ~ Proinsulin
Relaxin	Relaxin >NGF >Proinsulin > IGF >>Insulin (~0)
NGF	NGF (only)

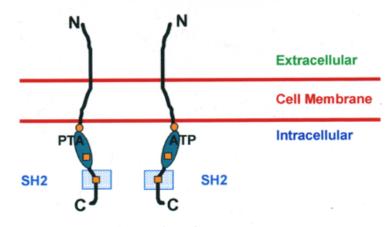
# Serpentine Receptors



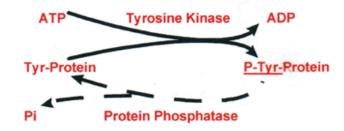
- 7 Transmembrane helices
- · Coupled to "G" Proteins
- Interactions (allosteric) with intracellular proteins on intracellular loops, especially the third, and on the C-terminal tail
- · Often phosphorylated on the third intracellular loop
- Additional phosphorylations can occur on ser/thr on the intracellular tail
- Examples:

β Adrenergic receptors LH receptor ACTH receptor VP receptor Glucagon receptor

# Cytokine/Growth Factor Receptors



- 1 Transmembrane domain
- Often folded extracellularly
- · Often form dimers upon hormone binding
- Have multiple phosphorylation sites on intracellular C-terminus at ser/thr (
   ) and tyr (
   ) residues
- Have an ATP binding site and a tyrosine kinase activity that is activated by hormone binding
- Phosphorylated receptors participate in multiple intracellular signalling pathways via SH2 and SH3 domains



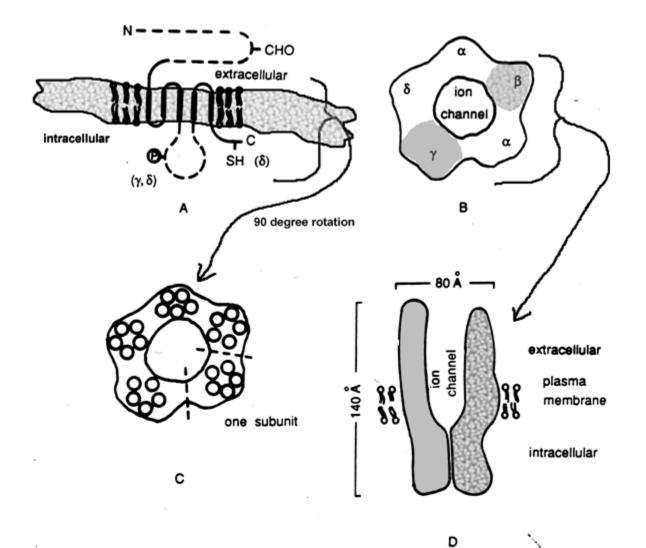
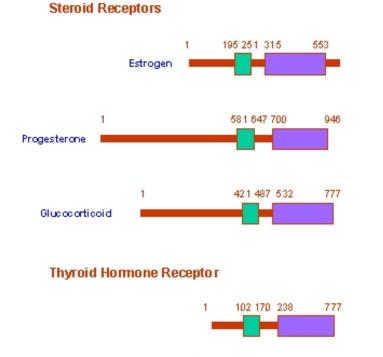
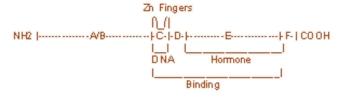
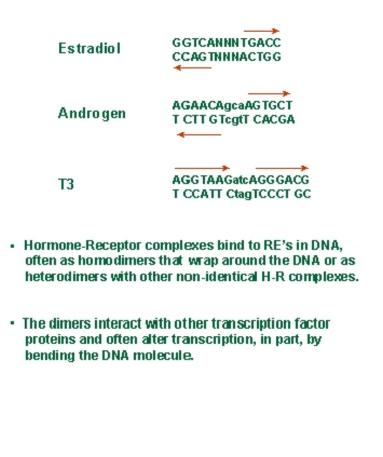


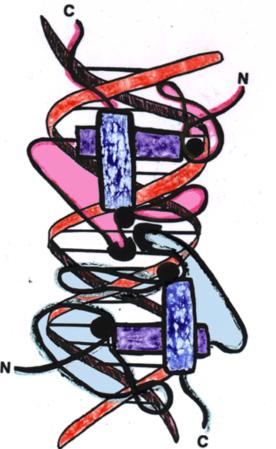
Fig. 5-6. The nicotinic ACh receptor. (A) Membrane orientation of a typical subunit; (B) transverse section showing the arrangement of the five subunits as viewed from the extracellular side; (C) transverse section showing the hypothetical arrangement of the five transmembrane helices within each subunit; (D) longitudinal section of the receptor *in situ*. The figure in (D) is adapted and modified from *Nature* (London) **315**(6019), **474**-**477**. Copyright © 1985 MacMillan Magazines Limited.

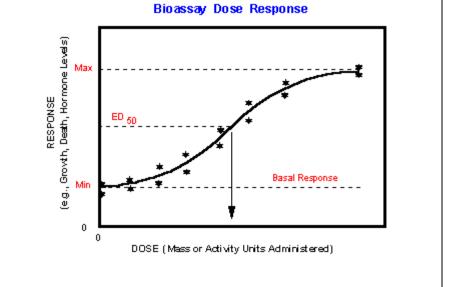




# Nuclear Receptor Response Elements

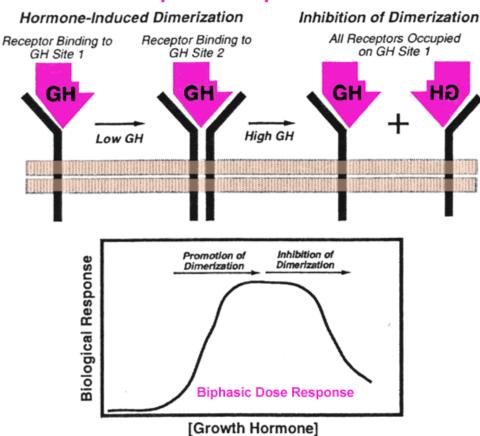






Model of the binding of two nuclear receptors as a dimer with the partners facing in opposite directions. Note this fails to convey the tendency such dimers have to bend the DNA, thereby opening it up to interactions with transcription factors. The D-boxes of the two molecules are shown in blue and purple. (After Bolander, *Molecular Endocrinology, 2nd Ed*, Academic Press:San Diego, CA, 1994.)

Down Regulation or Desensitization; Loss of Unoccupied Receptors or Transduction?



Modified from Mayo, Receptors: Molecular mediators of hormone action, In Conn & Melmed, ed., *Endocrinology: Basic and Clinical Principles,* Humana Press: Totowa, NJ, 1997.

Bibassays - useful but slow & relatively imprecise, consume animals + lots of reagents; expensive To run other assays to allow running many samples quickly + accurately Chiar 14 Antibodies allow production of highly specific reagents in reasonable volume which can be used in Chemical-type assay. - This is an improvement over trictly physical-Chemical assays, trictly physical-Chemical assays, e.g., UV-assorption, Gas Chromatographic behavior, IR-desorption, Mass-spectra.

# **Chemical Assays Include Those Using Biochemical Reagents Like Receptors or Antibodies**

# **Competitive Binding Assays**

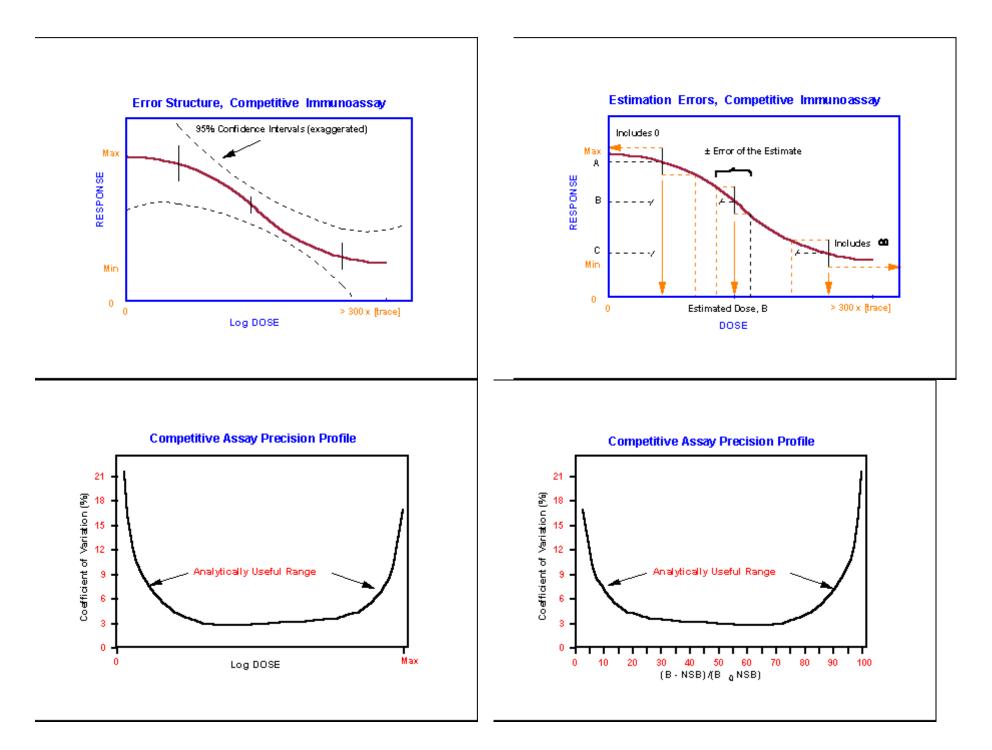
- 1. Isolate/prepare a receptor suspension, or a serum binding protein, or an antibody
- 2. Isolate/prepare a small amount of purified hormone
  - 1. Need to label part of it so it can be visualized
  - 2. Need pure hormone for standards or references, analytical references.
- 3. In each of a series of tubes or wells place the same small amount of label and binder *the binder will be the limiting reagent in this assay*
- 4. In part of this series of tubes add increasing amounts of unlabeled hormone, one amount in each tube or well starting at zero additional.
- 5. In the rest of this series of tubes add a measured volume of the unknowns, one unknown per tube.
- 6. Incubate for a period of hours
- 7. Separate the hormone bound to the binder from the remaining free hormone by some simple method.
- 8. Quantify the amount of label that is bound to the binder; it will be inversely proportional to the amount of unlabeled hormone present since the binder is the limiting reagent this is a molecular game of musical chairs.

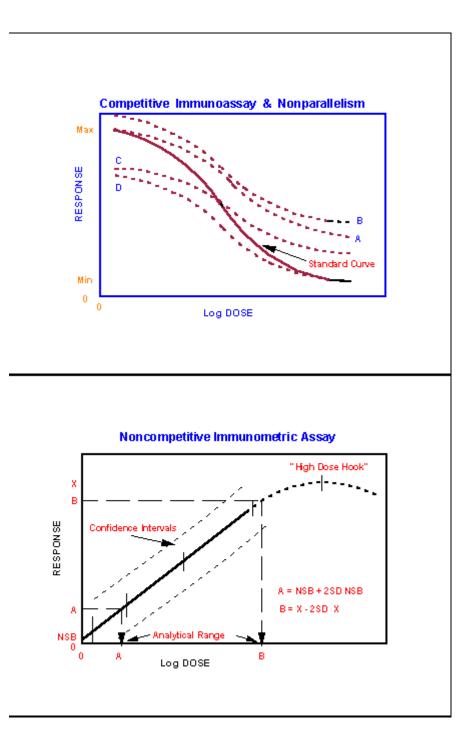
# **Analytical Assay Performance Parameters**

- Specificity: uniqueness of the detected species, lack of crossreactivities, parallelism of diluted samples
- Precision: reproducibility of measurements
- Accuracy: ability to estimate the "correct," known, amount of analyte contained in standards or reference samples; lack of Bias: comparability of results with other assays for the same analyte
- Sensitivity: (analytically) slope of the assay response curve, height of the response/amount of analyte yielding the response; also, (diagnostically) limit of detection or the lowest measurable, nonzero, amount of analyte

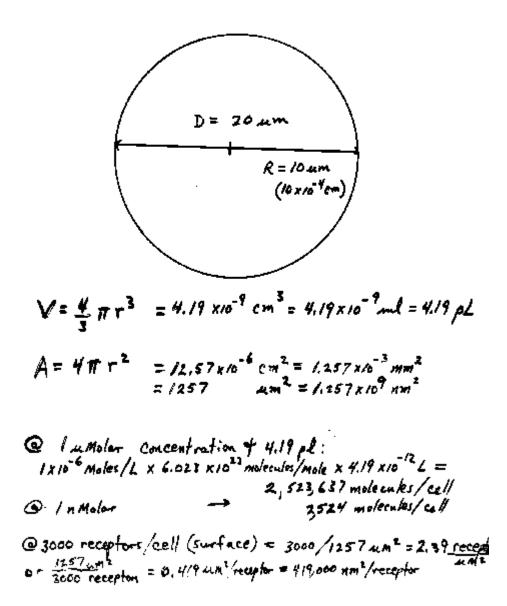
Antibody-based assays-Immuno assay 5 1. Competitive assay -2. Non competitive assay -Competitive -Antibody is the /imiting reagent "Molecular game of musical charts" - work regardless of the size of antigen (hormone) molecules used. Noncompetitive 2 complementary antibodies used, I is labeled (think "sandwich") ctivity, Color, Fluorescence e of hormone (it must hind 2 Ab's at sometime) Competitive Immuno assay RESPONSE (e.g., CPM or OD bound to Ab) Ma: ED 50 NSB Min 0 0 > 300 x [trace] DOSE (Massion Activity Units / Volume)

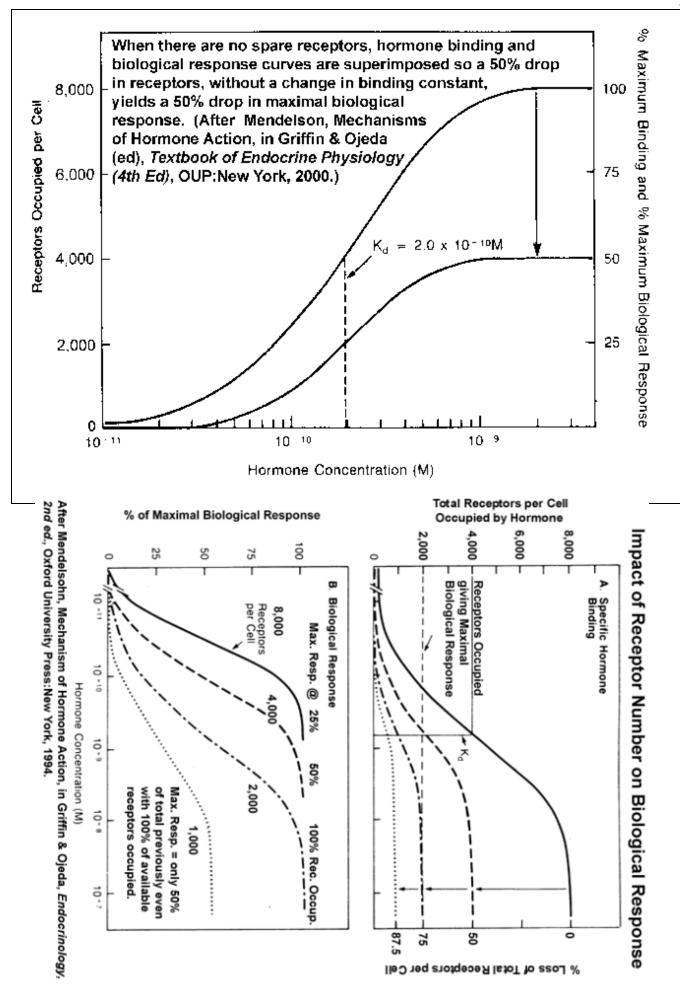
26





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#### 1. Number of Receptors

**Spare Receptors - Multiple Hypotheses** 

- 1. Cell has 2 pools, 1 "true" or active, 1 "spare" or inactive
- 2. "Spare" R only reflect those not coupled to the response being monitored
- 3. Spare R [R] [H] + [R] [HR], favors [HR] and responses to HR, allows regulation without altering K<sub>a</sub>
- 2. Location of Receptors

Expression on part of the cell surface regulates exposure to hormone, may allow directional or polar responses to hormone

#### 3. Biochemical Status of Receptors

- 1. Receptor aggregation alters surface location and may trigger cellular internalization of HR with proteolysis of H and/or R (*receptor mediated endocytosis*; associated with at least temporary R inactivation and inaccessibility to H)
- 2. Receptor aggregation may trigger tyrosine kinase activities that alter receptor association with hormone (K<sub>a</sub>), other receptors or with transducers
- 3. Transducer/Effector molecules may phosphorylate receptors and alter receptor associations as in 3b.

#### 4. Number of Transducers

Interactions with multiple transducer systems may deplete available molecules.

#### 5. Location of Transducers

Intracellular localization of transducers in membranes, near receptors make them more available than if they must diffuse along cytoskeletal elements in the cytoplasm; recruitment to one end of the cell by a highly localized receptor may make them unavailable for coupling to receptors at the other end of the cell.

#### 6. Biochemical Status of Transducers

- 1. Allosteric interactions mediated by binding to GTP/GDP, ATP, IP<sub>3</sub>, DAG, or other small molecules may activate or inactivate transducer elements.
- 2. Phosphorylation, or other covalent biochemical modifications may activate or inactivate transducer elements.

#### 7. Number of Effectors

As for transducers.

8. Location of Effectors

Proximity to receptor/transducer elements helps speed modulations of activity.

#### 9. Biochemical Status of Effectors

As for transducers, except that availability of suitable substrates may also alter activity levels and these may be affected by activities of transducers.