

Glycogenolysis
Glycogen \rightarrow Glucose

Gluconeogenesis
lactate \rightarrow glucose
pyruvate \rightarrow glucose
glycerol \rightarrow glucose
glucogenic aa \rightarrow glucose

glucose increased

CARBON METABOLISMS

glucose decreased

Krebs
Pyruvate \rightarrow Oxaloacetate

pentose phosphate pathway
glucose-6-phosphate \rightarrow ribose-5-phosphate

Glycolysis
Glucose \rightarrow Pyruvate

Glycogenesis
Glucose \rightarrow Glycogen

Carbon Metabolism

Glycolysis

intro = glucose versatile precursor biosynthetic reaction
expected glucose level 70-100

Glucose \rightarrow oxidation \rightarrow glycolysis \rightarrow pyruvate
 \rightarrow oxidation \rightarrow pentose phosphate \rightarrow ribose
 \rightarrow storage \rightarrow 5 phosphate \rightarrow glycogen

glycolysis general = Glucose $\xrightarrow{\quad\quad\quad}$ 2 pyruvate
 $\downarrow \quad \downarrow$
2 NADH 2 ATP

\hookrightarrow in cells with mitochondria
and adequate supply of energy

Glucose $\xrightarrow{\quad\quad\quad}$ lactate

\hookrightarrow anaerobic glycolysis

\hookrightarrow just bcs pyruvate not enter mito.

reaction of glycolysis = energy investment \rightarrow phosphorylated
energy generation \rightarrow synthesize
of ATP, pyruvate
NADH

Step ① - HEXOKINASE, GLUCOKINASE



- Regulatory Enzyme - irreversible

Hexokinase

- most tissue

K_m - low

V_{max} - low

inhibition - yes
by G6P

inducible - no

- intracellular
glucose concent.

Glucokinase

- in liver parenchymal cells
B cells of pancreas

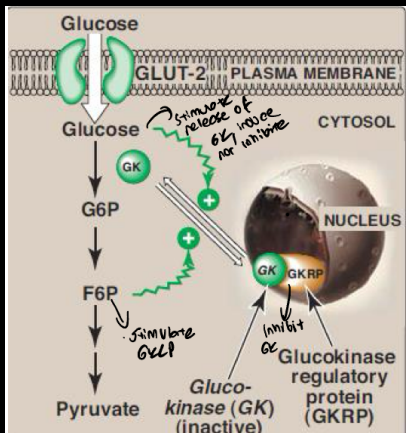
- high

- high

- no

- yes (insulin)

- blood glucose cont.

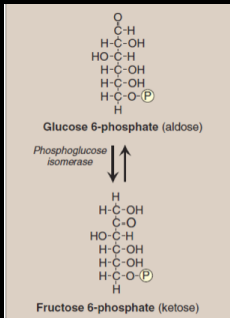


→ glucokinase indirectly
inhibited by fructose 6 phosphate

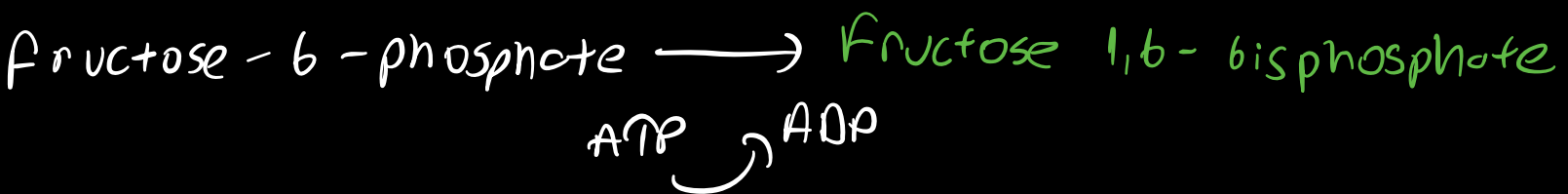
Step ② - PHOSPHOGLUCOSE ISOMERASE



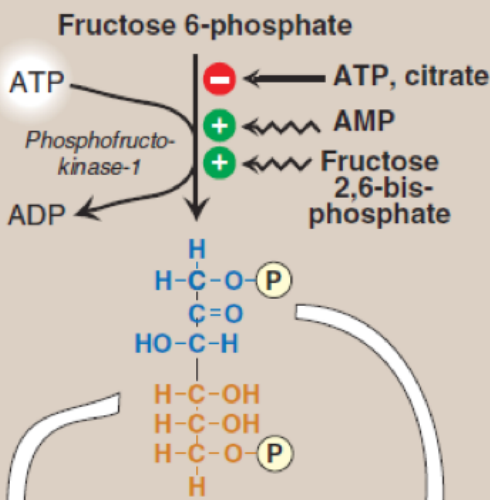
phosphoglucose
isomerase



Step ③ - PHOSPHOFRUCTOKINASE-1



- Regulatory Enzyme - irreversible

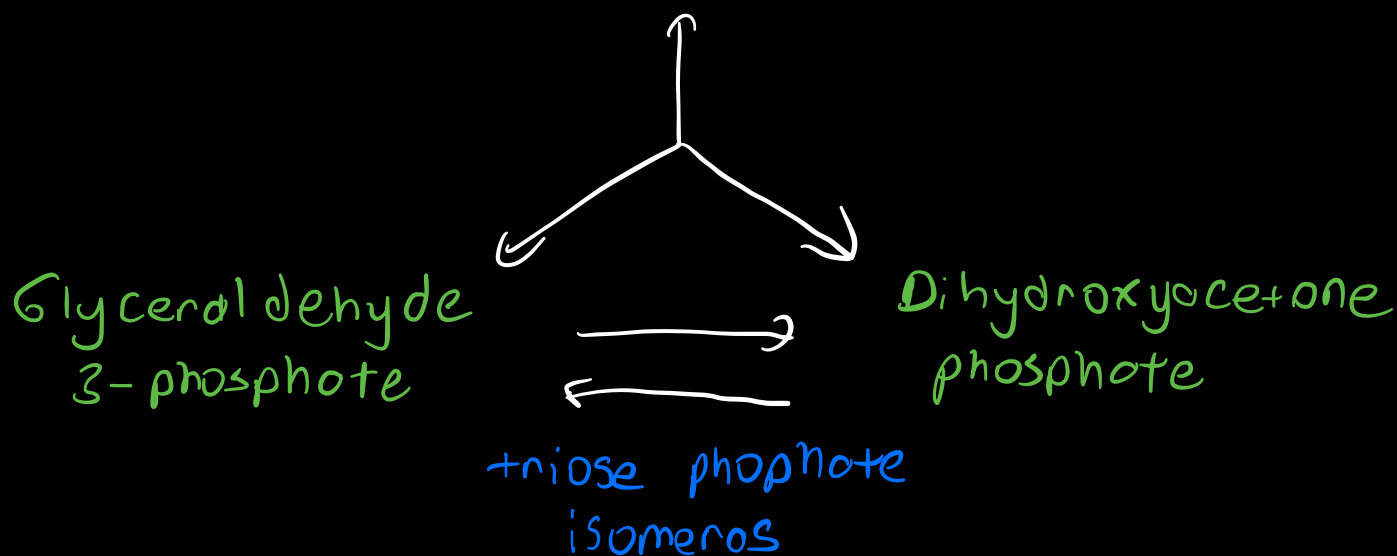


\rightarrow Regulation of PFK-1

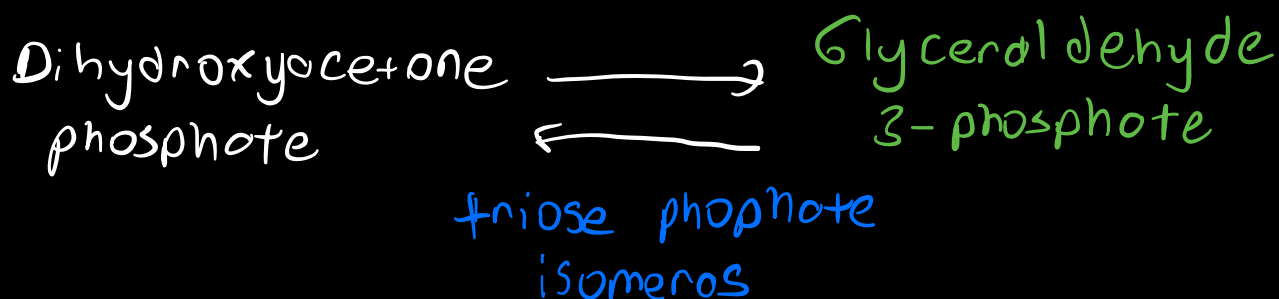
\rightarrow Fructose 2,6-bisphosphate
the most potent activator

Step ④ - ALDOLASE

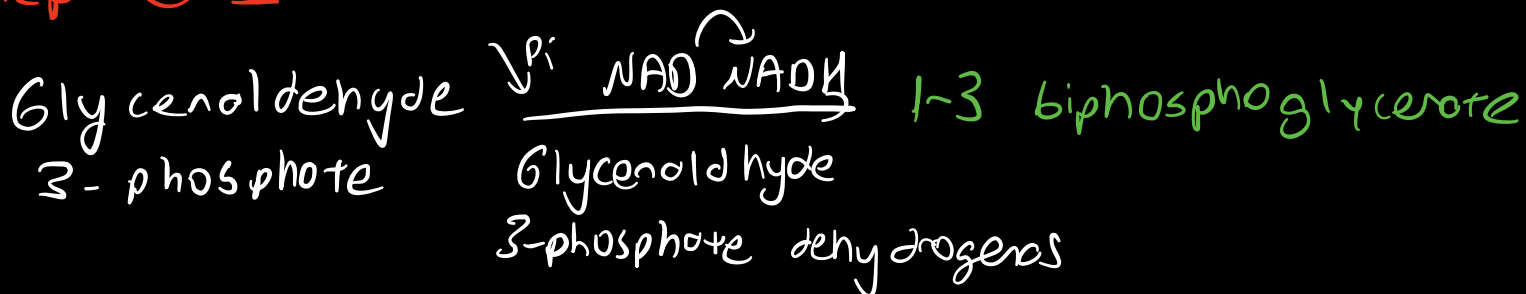
Fructose 1,6-bisphosphate



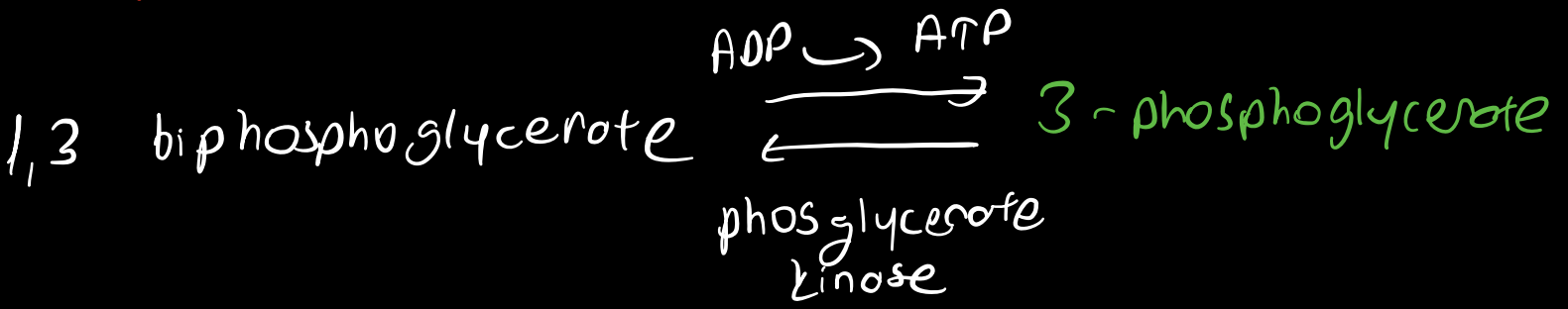
Step ⑤ - TRIOSE PHOSPHATE ISOMERASE



Step ⑥ - GLYCERALDEHYDE 3-PHOSPHATE DEHYDROGENASE

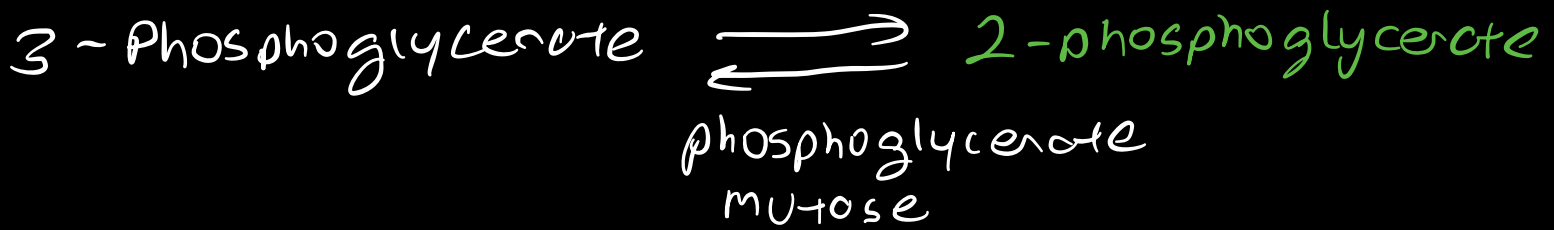


Step ⑦ PHOSPHOGLYCERATE KINASE

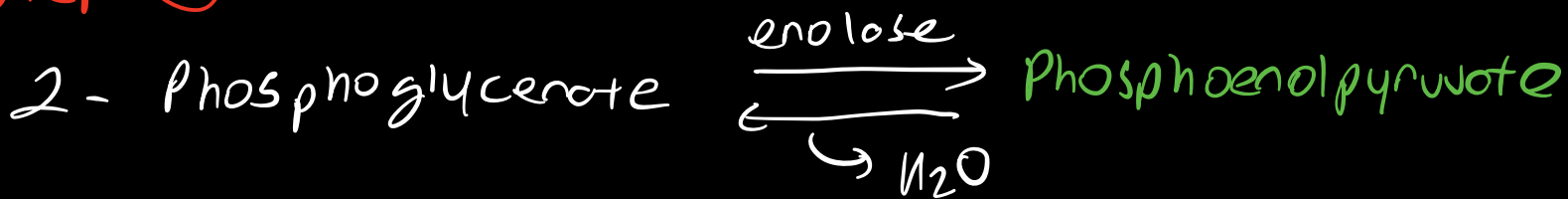


FIRST ATP GENERATION OCCURS

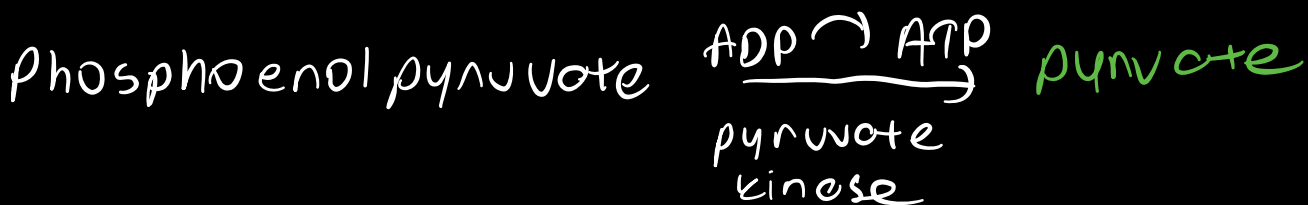
Step ⑧ PHOSPHOGLYCERATE MUTASE



Step ⑨ ENOLASE



Step ⑩ PYRUVATE KINASE



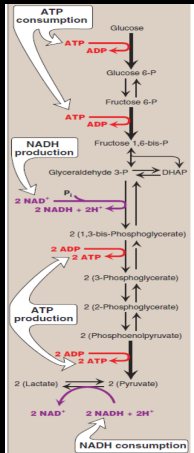
- Regulatory Enzyme - irreversible
- SECOND ATP GENERATION OCCURS

ext no notes

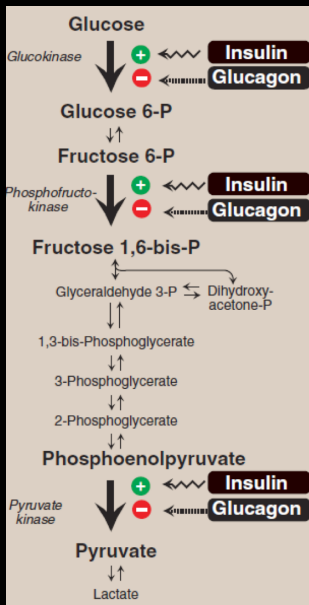
— in liver pyruvate kinase is activated by fructose 1,6 bisphosphate

— Hemolytic anemia caused

- ① glucose 6 phosphate dehydrogenos
- ② pyruvate kinases



→ Anaerobic glycolysis
no net NADH.



→ Hormonal regulation
of glycolysis

Glycogen Metabolism

Utilize glycogen + fat

- fatty acids cannot be metabolized anaerobically
- all humans cannot convert fat to glucose
- muscle cannot do fat as efficiently as glycogen

→ diet

Glucose
Obtained

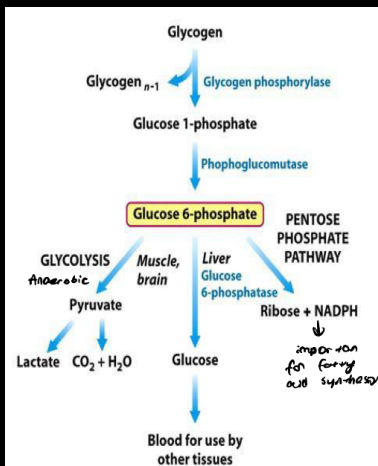
→ degradation of glycogen → rapid
↳ gluconeogenesis → slow

Glycogen - buffer to maintain blood glucose level
- glucose from then energy for strenuous activity
- found in liver and skeletal muscle

Step ① - HEXOKINASE



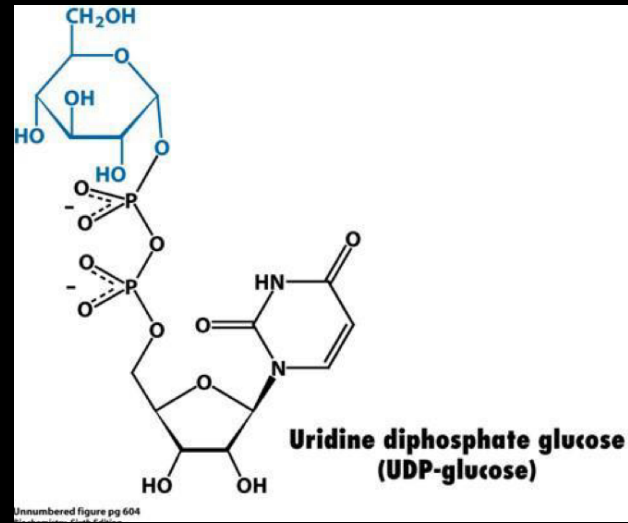
fate of Glucose 6-P



→ glycolysis
↳ pentose phosphate pathway
↳ glycogen synthesis
↳ degradation to free glucose

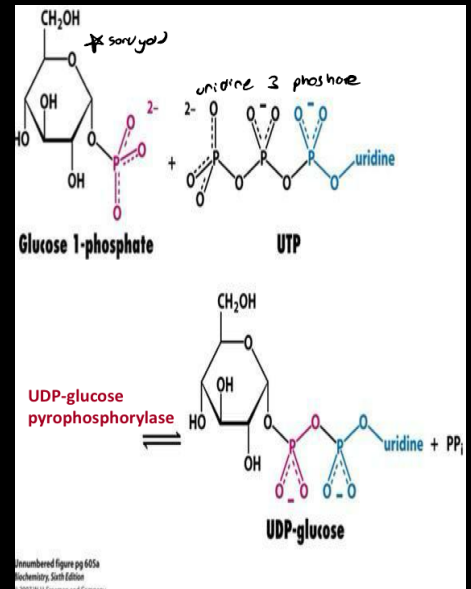
1- activation of glucose

UDP glucose, glucose donor
in biosynthesis of glycogen
ACTIVATED FORMS OF GLUCOSE



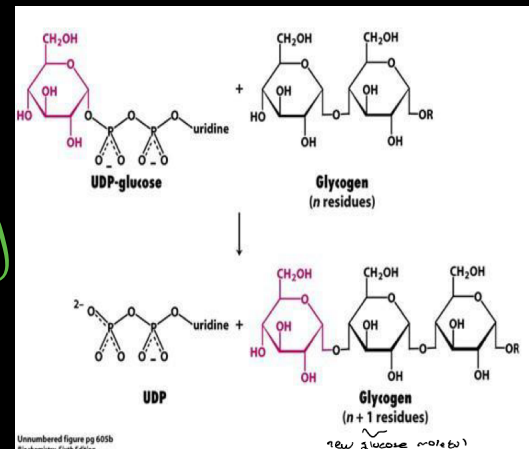
2- synthesis of UDP glucose

glucose 1-phosphate + UTP
 $\xrightarrow{\text{pyrophosphorylase}}$ UDP-glucose



3- adding UDP

UDP-glucose + Glycogen (n residues)
 $\xrightarrow{\text{ATP} \rightarrow \text{ADP}}$ UDP + Glycogen (n+1 residues)



Glycogenin

- primer function
- enzyme
- produces, a (lin) linked glucosyl chain
- glucose receptor absence of glycogen fragment

Step ② Initiation - GLYCOGEN SYNTHESIS

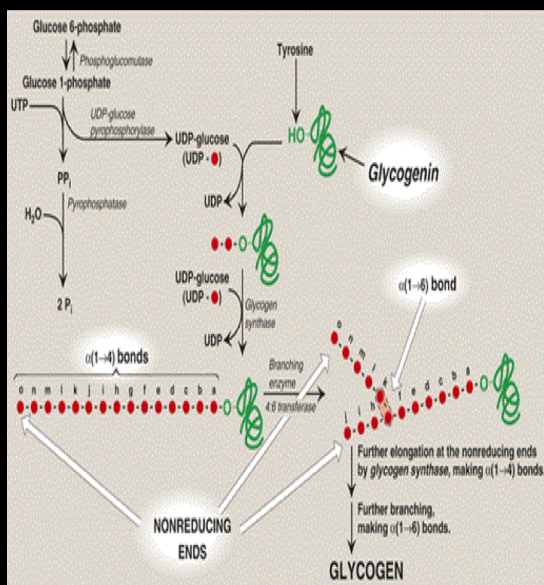
- making a (1 \rightarrow 4) bonds
- elongate existing chain
- each subunit of glycogen catalyzes eight glucose units.
- synthesis of a primer to initiate

Step ③ Elongation - GLYCOGEN SYNTHESIS

- new glucosyl residues added to nonreducing end
- formation of a (1,4) linkage

Step ④ Glycogen Branching TRANSGLUCOSIDASE

- only a (1,4) \rightarrow (1,6)
- increases solubility
- increases terminal residues \rightarrow site for action of synthase and phosphorylase
- rapid storage
- provide degradation of glycogen



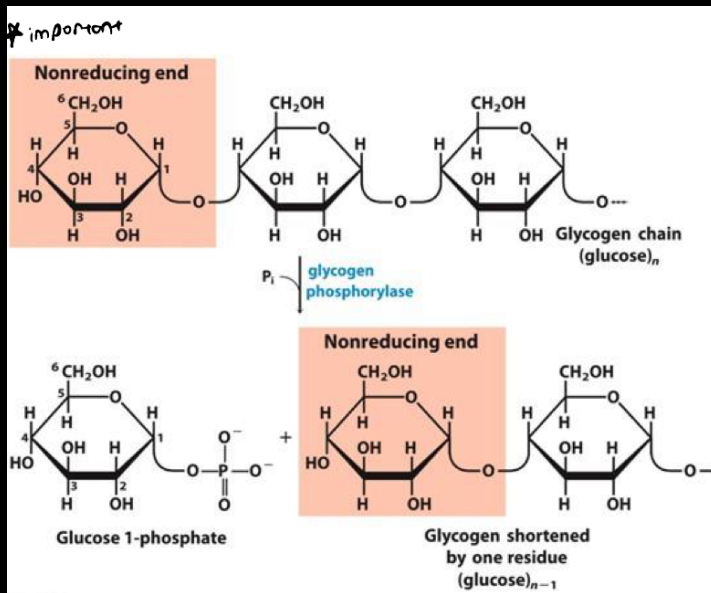
Glycogenolysis

general = not reversible

a separate set of cytosolic enzymes

story begins

①



primary product

glucose 1-phosphate

breaking

α-(1→4) glycosidic bond

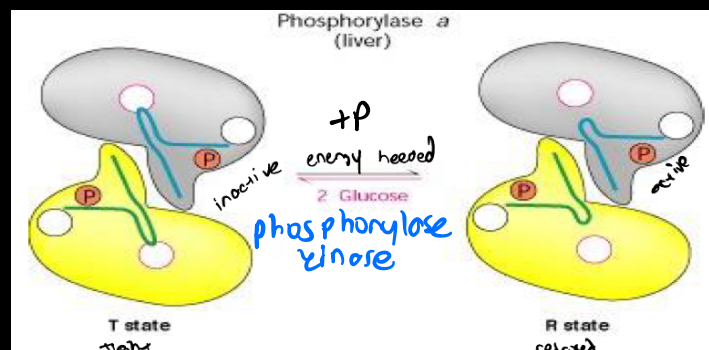
enzyme

Glycogen Phosphorylase

Glycogen Phosphorylase

- Pyridoxal phosphate (PLP), required as coenzyme
- Allosteric enzyme.

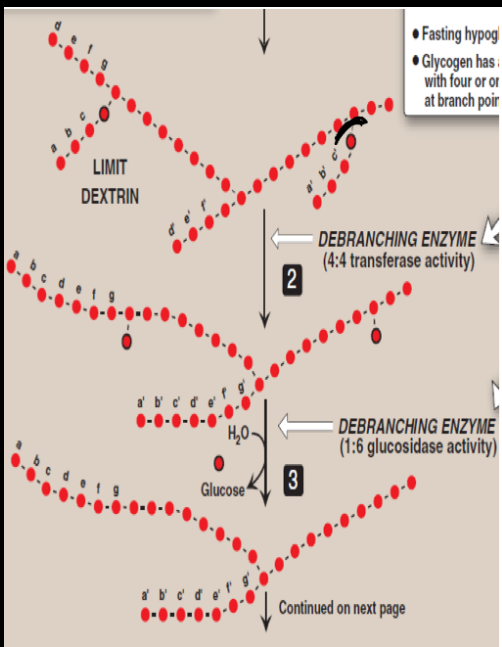
phosphorylase b



phosphorylase a

★ Glycogen Phosphorylase cleaves glucosyl residues from glycogen until four glucosyl residues remain on each chain → LIMIT DEXTRIN

②



Debranching Enzyme

— first, 4:4 transferase removes the outer 3 out of the 4 residues on limit dextrin

— remaining single residues cleaved by 1:6 glucosidase releasing → one free glucose

③ Conversion of G 1-p to G 6-p

Glucose 1-phosphate $\xrightarrow{\text{phosphoglucomutase}}$ Glucose 6-phosphate

↳ common in muscle and liver

Glucose 6-phosphate $\xrightarrow{\text{transferred by}}$ into endoplasmic reticulum

Glucose 6-phosphate translocase

Glucose 6-phosphate $\xrightarrow{\text{glucose 6-phosphatase}}$ glucose

glucose 6-phosphatase

↳ just in liver

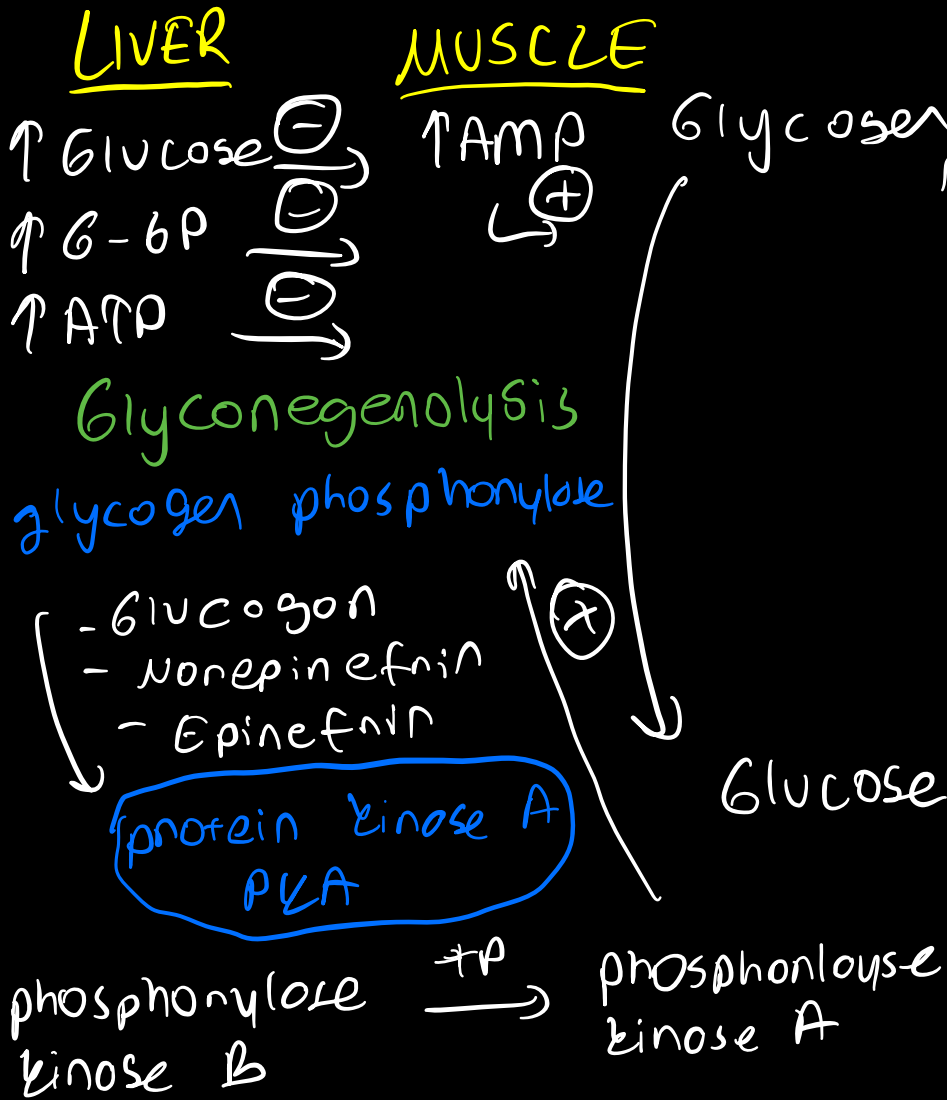
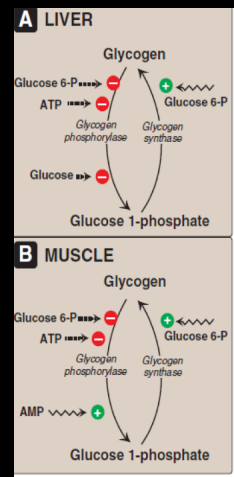
* muscle cannot produce glucose bcs lack of glucose 6-phosphatase

↳ glucose 6-phosphate enters glycolysis

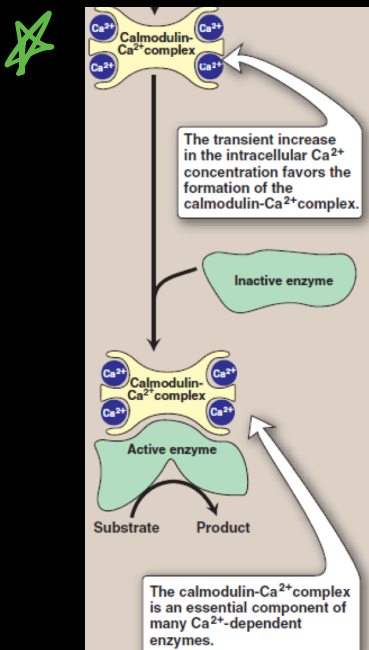
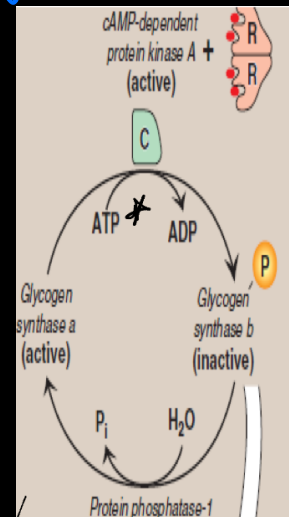
↳ energy for muscle contraction

↳ * reminder: phosphorylated glucose is not transported out of the muscle cells

Regulation of Glycogenolysis



Glycogenesis
 glycogen synthase



→ when there is urgent need for ATP in muscles.

→ the Ca^{2+} binds CALMODULIN complex activates muscle and hepatic phosphorylase kinase b

Glycogen Storage Diseases

- ↳ formation of glucose that is abnormal structure
- ↳ excessive amounts of normal glycogen

Ia - Von Gierkes Disease → Glucose 6-phosphatase

Ib - → Glucose 6-P translocase

II - Pompe's disease → Acid maltase

↳ (1-3%) of glycogen degraded by lysosomal enzyme, $\alpha(1 \rightarrow 4)$ -glucosidase by acid maltase

↳ only lysosomal storage disease

III - Coris disease → Debranching enzyme

IV - Anderson disease → Branching enzyme

V - McArdle disease → Glycogen Phosphorylase (muscle)

Glucogenesis

glucogenesis = synthesize glucose from non-carbohydrate precursors.
anabolic pathway
in liver 90%, kidney 10%
↳ prolonged fast kidney up to 40%

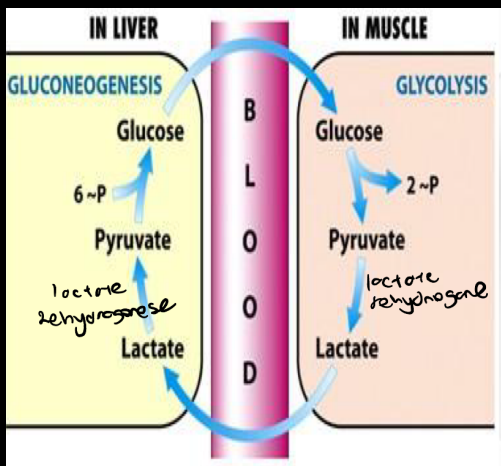
glucose major source

- brain
- nervous system
- erythrocytes
- testes
- renal medulla
- embryonic tissues

substrate for glucogenesis

- ① lactate
- ② pyruvate
- ③ glycerol, from catabolism of triacylglycerol
- ④ α -keto acids, from catabolism of glucogenic aa

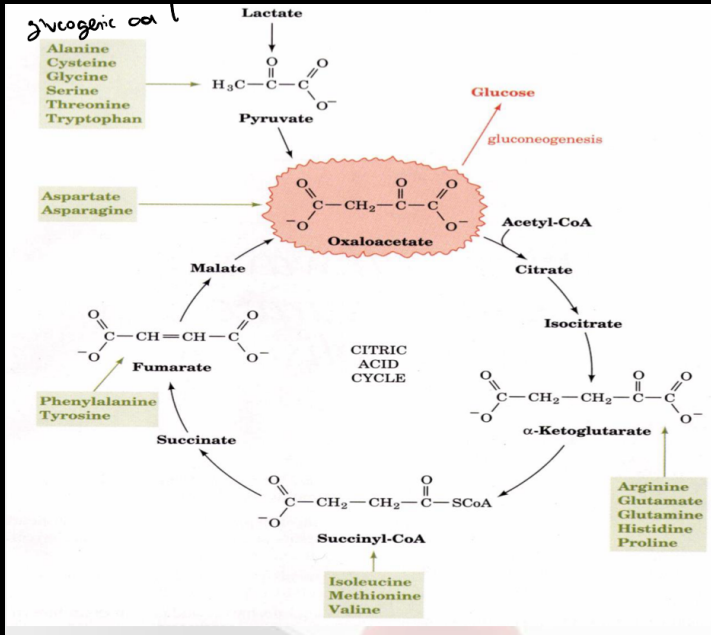
① Lactate as a substrate



→ THE CORI CYCLE

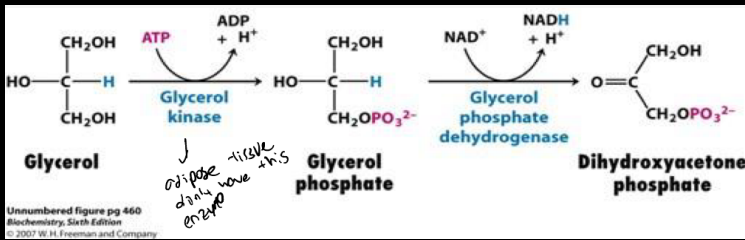
→ lactate formed during strenuous exercise and the tissue lacking mitochondria

④ Amino acids as a substrate

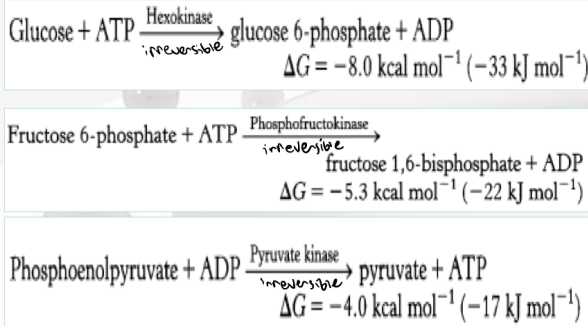


- glucogenic aa converted into glucose
- ketogenic aa converted into ketone bodies
- the source of pyruvate and oxaloacetate for gluconeogenesis is mainly aa catabolism

⑤ Glycerol as a substrate



- source of glycerol hydrolysis of triacylglycerols in adipose tissues
- adipose tissues lack enzyme glycerol kinase.



3 IRREVERSIBLE STEPS SHIFT THE EQUILIBRIUM ON THE SIDE OF GLYCOLYSIS

- these three steps are irreversible in glycolysis
- ! in gluconeogenesis
- three major barriers are bypassed by successive steps.

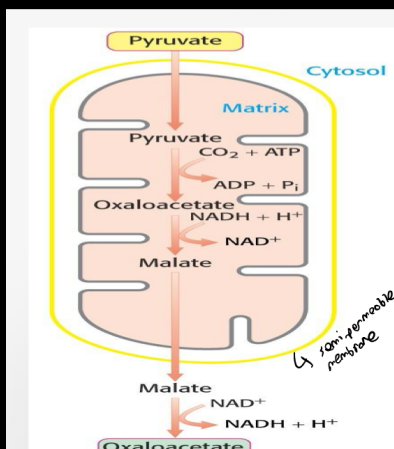
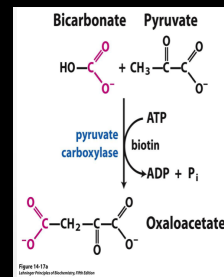
Successive Steps in order

Step ① PYRUVATE CARBOXYLASE

Bicarbonate + Pyruvate + CO_2 + H_2O \longrightarrow Oxaloacetate

in mitochondrial matrix

pyruvate
carboxylase
ATP $\xrightarrow{\text{biotin}}$ ADP + P_i

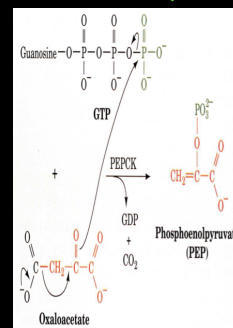


\longrightarrow oxaloacetate can't pass out of the mitochondria
it is converted to malate

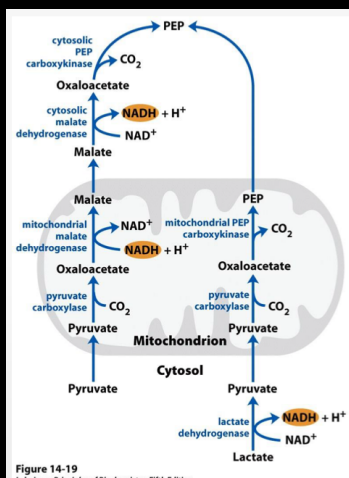
Step ② PEP CARBOXYKINASE

Oxaloacetate
in the Cytosol
Reversible

\longrightarrow Phosphoenolpyruvate + CO_2
PEPCK
GTP $\xrightarrow{\quad}$ GDP

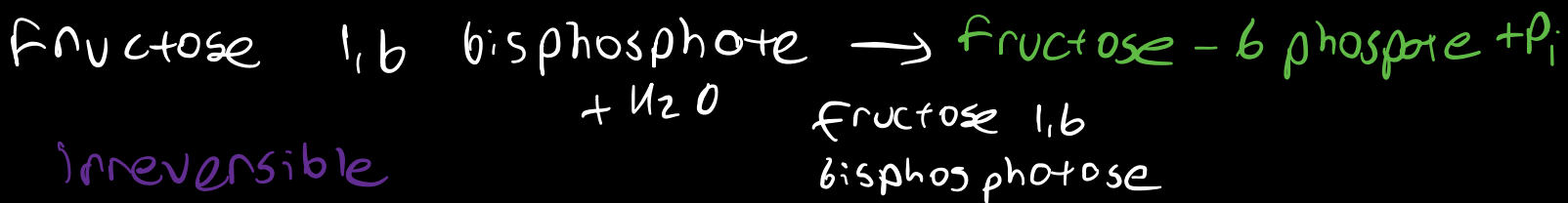


Alternative pathway



\longrightarrow Cytosolic NADH is generated in LDH reaction and not have to be shuttled out of the mitochondrion.

Step ③ FRUCTOSE 1,6 - BISPHOSPHATASE

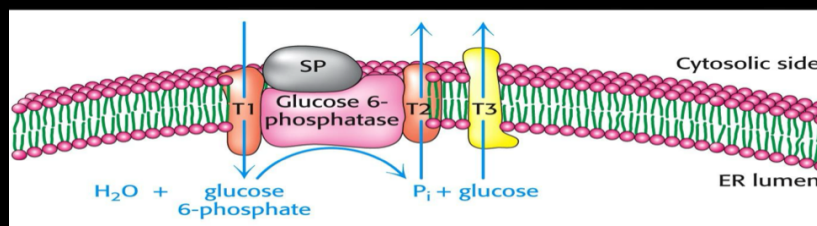


- Mg^{+2} dependent enzyme
- present in liver kidney skeletal muscle
absent from heart and smooth muscle

Step ④ GLUCOSE 6 - PHOSPHATASE



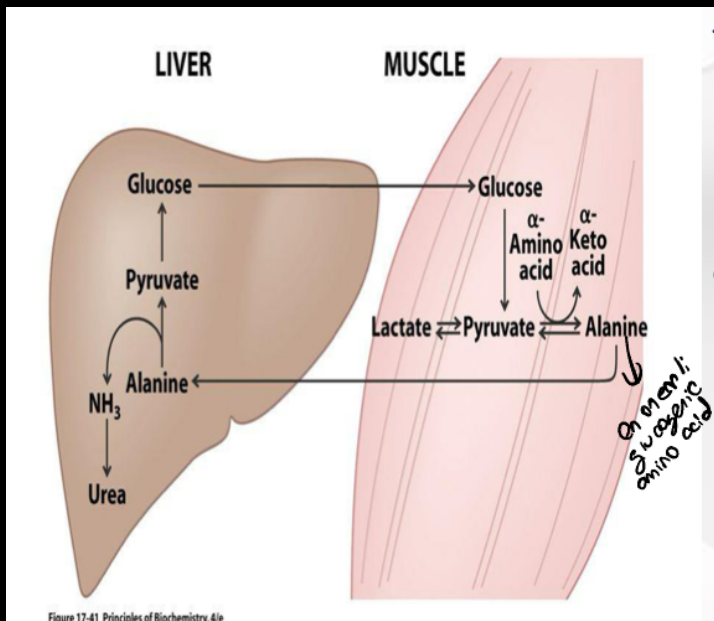
- Not occur in cytoplasm transported into the lumen of the endoplasmic reticulum



- \uparrow_1 - transport glucose 6 phosphate into the lumen of ER
- \uparrow_2 - transport P_i to cytosol
- \uparrow_3 - transport glucose to the cytosol
- \uparrow_4 - Co^{+2} binding protein \rightarrow stabilizing protein essential for phosphatase activity

* Just found on liver and lesser extent kidney

An Extra - Glucose - alanine cycle

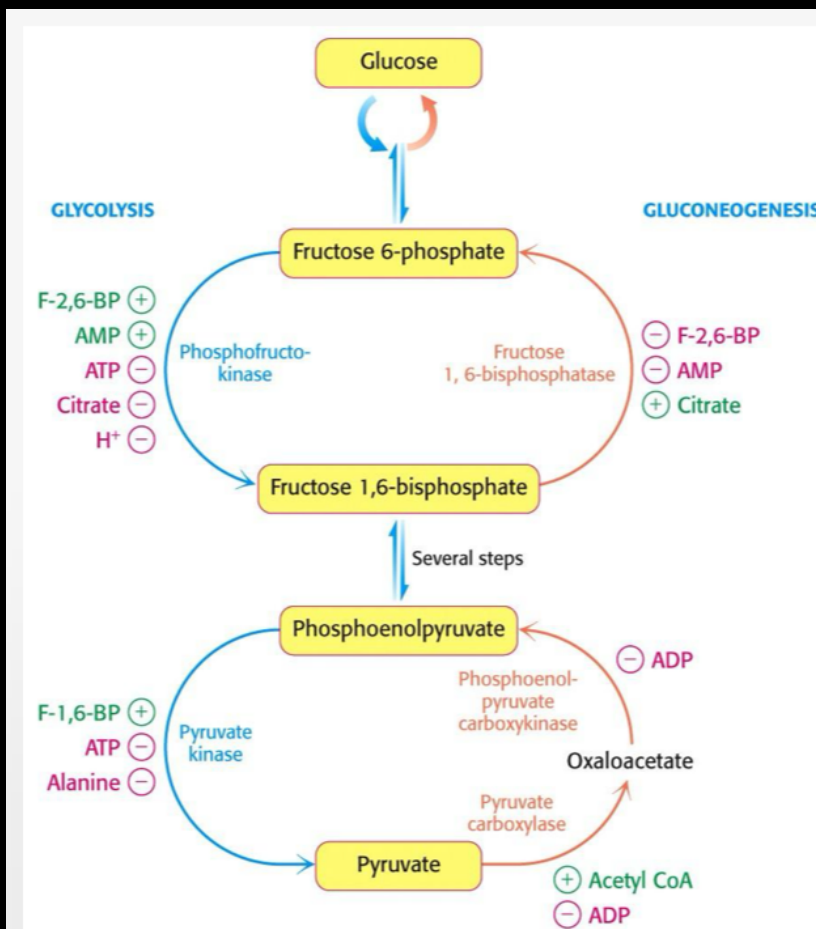


→ alanine produced by transamination

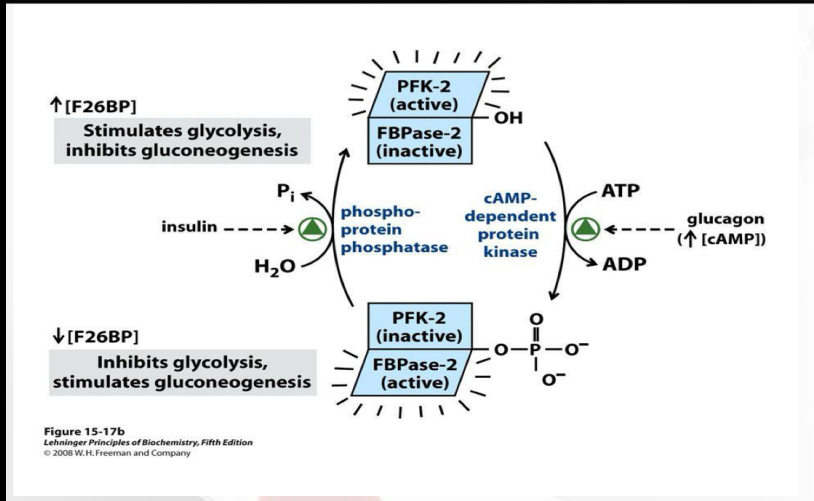
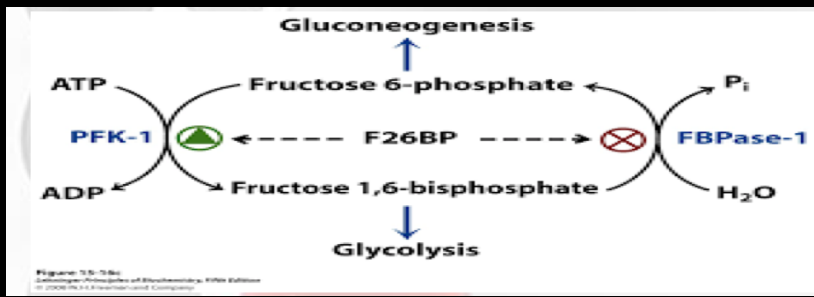
↳ transfer of one $\alpha\text{-CO}$ group one molecule to another

→ in active muscle lactate used in this way

Regulation of Gluconeogenesis



allosteric regulation of gluconeogenesis.

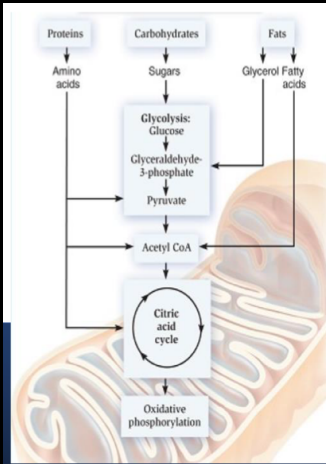


! F2,6-BP formed
! cotolyzed by (PFK-2)
phosphofructokinase 2
! hydrolyzed F-6-BP
! by fructose biphosphatase
(FBPase-2)

— F2,6-BP binds to
allosteric site on PFK-1
increase affinity for
F-6-P, reduces affinity
for allosteric inhibitors
ATP and citrate

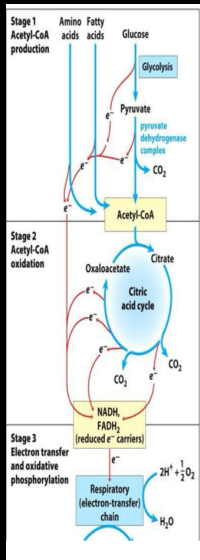
- PFK-1 inactive in the absence of F2,6-BP
- F2,6BP activates PFK-1 → stimulate glycolysis
- F2,6BP inhibits FBPase-1 → slow gluconeogenesis.

Krebs Cycle



general info

- consume O₂, produce CO₂
- captures energy stored in lipids and aa.
- acetyl coA obtained from diverse sources
- intermediates can be used to synthesize different compounds

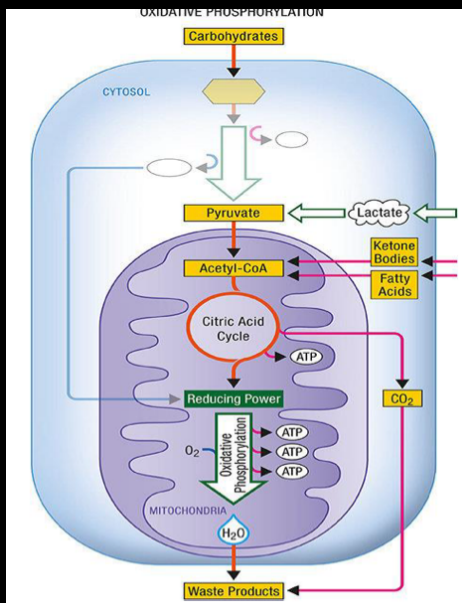


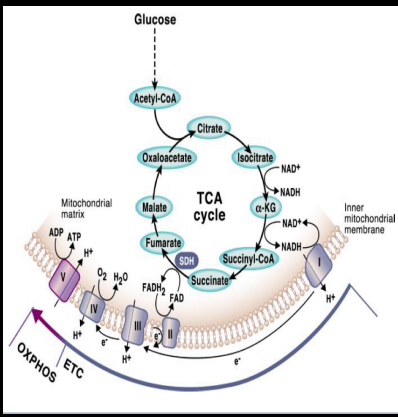
steps of krebs cycle

- 1- Acetyl CoA production (from organic fuels)
- 2- Acetyl CoA oxidation (in TAC to produce CO₂)
- 3- Electron transfer and oxidative phosphorylation (give their e⁻'s to O₂ forming ATP)

location

- 1- Glycolysis in cytoplasm
- 2- TCA cycle in mitochon. matrix
- 3- Just succinate dehydrogenase in mitochondrial inner membrane
- 4- Oxidative phosphorylation in inner membrane

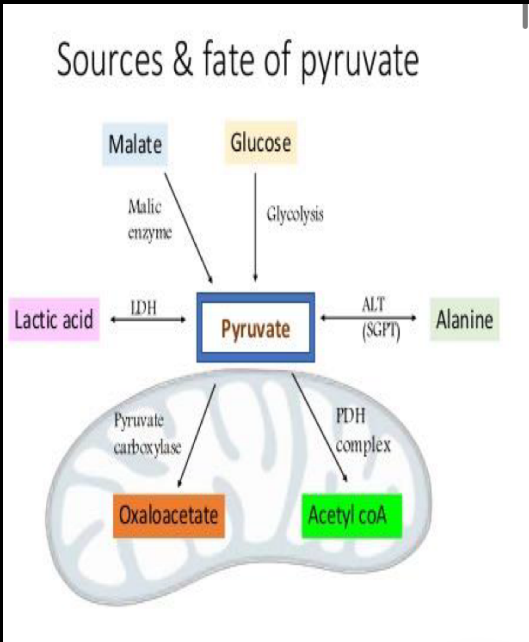




by a series of reactions

— a number of reducing equivalents are removed

↳ oxidized to water in respiratory chain



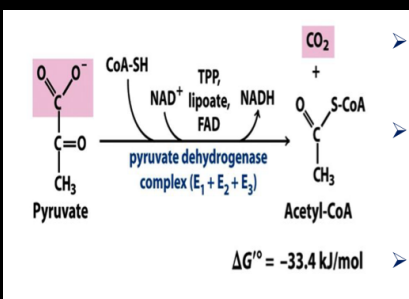
fate of pyruvate

oxidative decarboxylation

- ① $\xrightarrow{+2H^+}$ Acetyl CoA
- ② $\xrightarrow{+NH_4^+}$ lactate (anaerobic)
- ③ $\xrightarrow{+CO_2}$ alanine (aa synt.)
- ④ $\xrightarrow{+CO_2}$ oxaloacetate (gluconeogenesis)
- ⑤ $\xrightarrow{\text{alcoholic fermentation}}$ ethanol + CO_2

① Pyruvate to Acetyl CoA

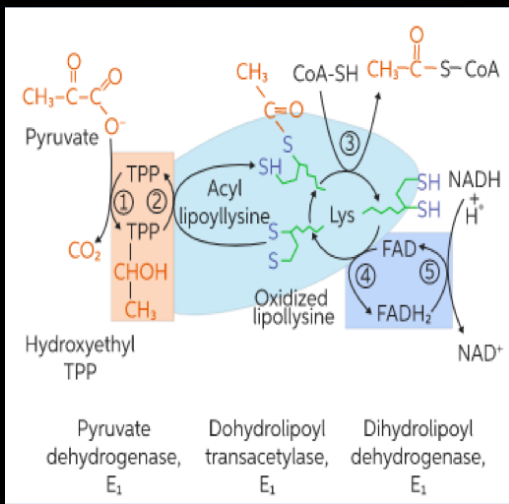
pyruvate $\xrightarrow{\text{oxidative decarboxylation}}$ Acetyl CoA + CO_2
 pyruvate dehydrogenase complex ($E_1 + E_2 + E_3$)
 $NAD^+ \longleftrightarrow NADH$



→ pyruvate transported mitochondrion by a proton symporter

→ decarboxylated by PDH to form Acetyl CoA

→ irreversible reaction



PDH complex

- 1- Pyruvate dehydrogenase
- 2- Dihydrolipoyl transacetylase
- 3- Dihydrolipoyl dehydrogenase

PDH requires 5 coenzymes

→ prosthetic groups = TPP, lipoaate FAD

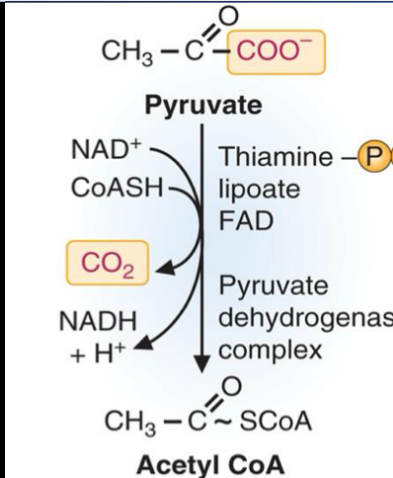
→ co-substrates = NAD⁺, CoA-SH

TPP - Thiamine (B₁)

FAD - Riboflavin (B₂)

NAD - Nicotin (B₃)

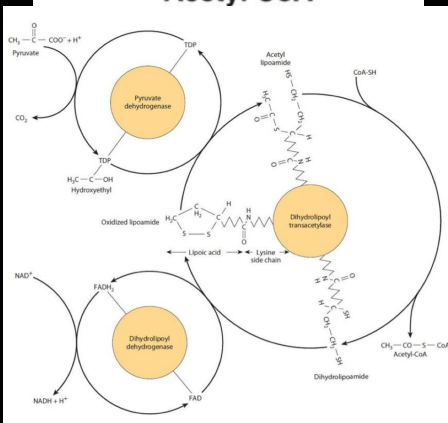
CoA - Pantothenic acid (B₅)



How it works

→ lipoic acid join by an amide link to enzyme complex

→ it forms a long flexible arm to rotate btw active sites of enzymes



Regulation of PDH

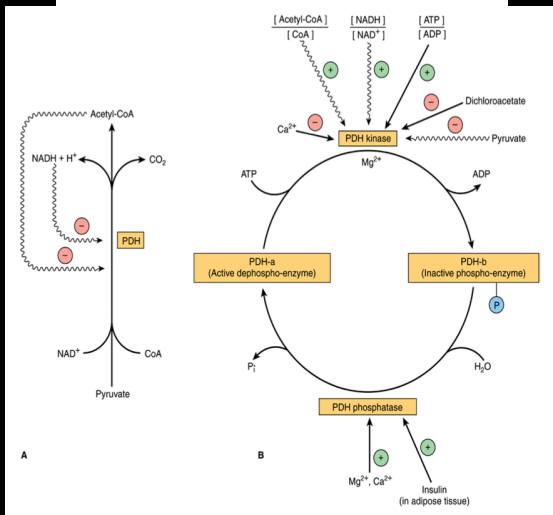
→ inhibited by Acetyl-CoA and NADH

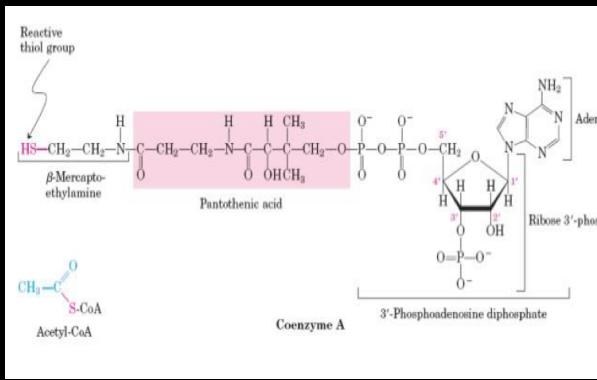
→ PDH Kinase - phosphorylated \hookrightarrow inactive

PDH Phosphatase - dephos.

\hookrightarrow active

→ inhibited by ATP





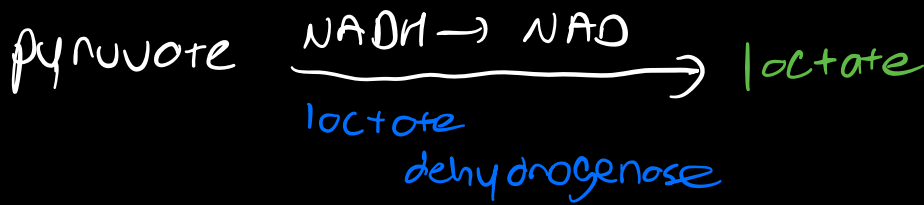
An Extra = Structure of CoA

→ associate, complete function, disso.

→ function: accept and carry acetyl groups

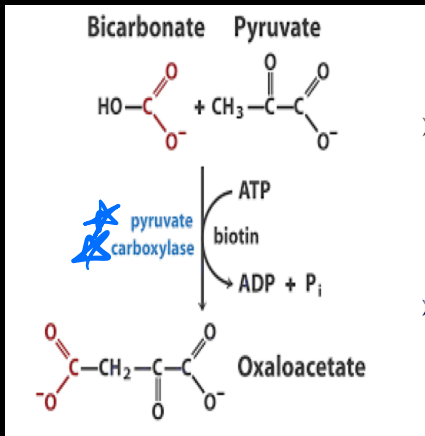
→ thioesters: high acyl group transfer potential

② Pyruvate to lactate



! regeneration of NAD sustains the continued glycolysis under anaerobic conditions

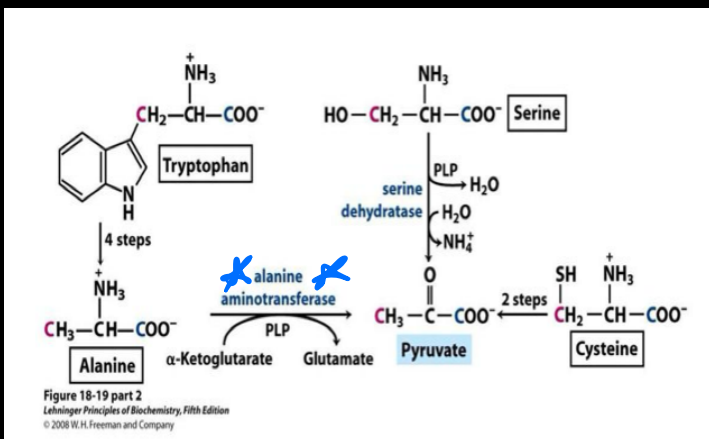
③ Pyruvate to oxaloacetate



→ biotin is coenzyme

→ oxaloacetate used for synthesis of: aspartate, phosphoenolpyruvate or utilized in TAC

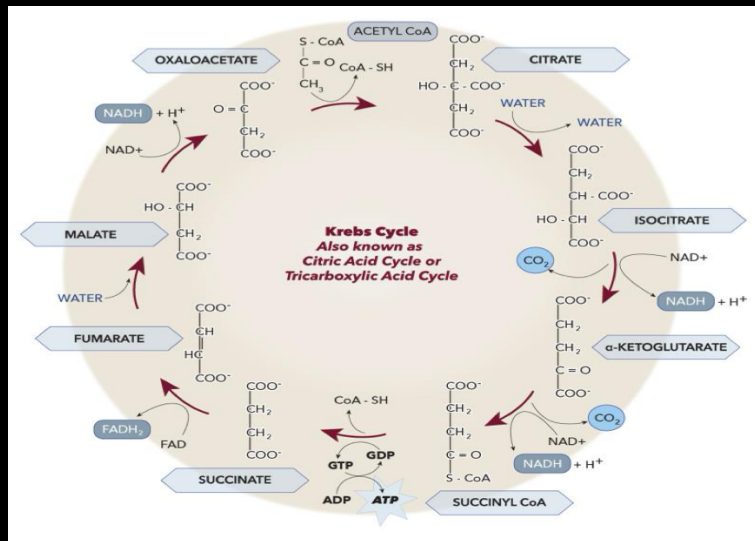
④ Pyruvate to Alanine



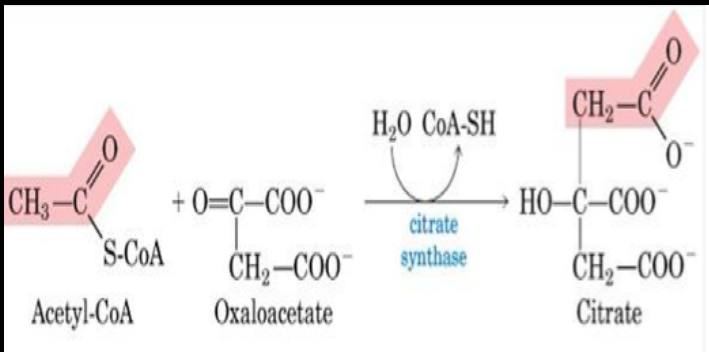
→ transamination

→ important for catabolism and synthesis of non-essential aa.

Krebs Cycle step by step



Step ① Citrate Synthase



– uses acid/base catalysis

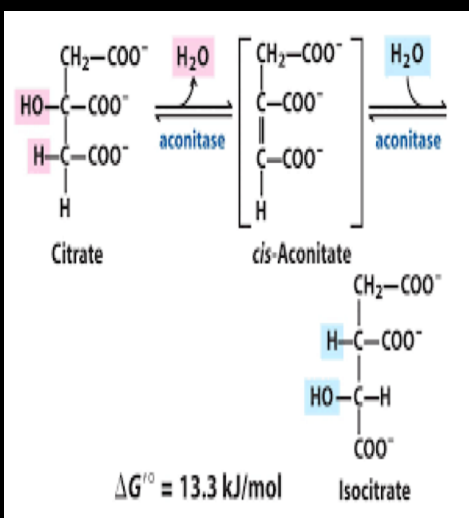
↳ ① carbonyl of oxaloacetate is good electrophile

② methyl group converted to methylene

– activity largely depends on oxaloacetate.

– irreversible

Step ② Aconitase



– isomerization by dehydration

– two steps → ① dehydration *cis* aconitate

→ ② rehydration *isocitrate*

– this asymmetric behavior provides citrate in the cytosol as a source of acetyl CoA for fatty acid synthe.

Aconitase extras:

- water removal from citrate addition to ^{cis}aconitate catalyzed by **iron-sulfur center**
 - ↳ function as electron carrier
 - ↳ act both substrate binding catalyzing
- when Fe is deficient, aconitase loses its FeS center acquire new role in Fe homeostasis

Cytosolic Aconitase a regulator of protein synthesis
transferrin carries Fe in blood (L-Fe)

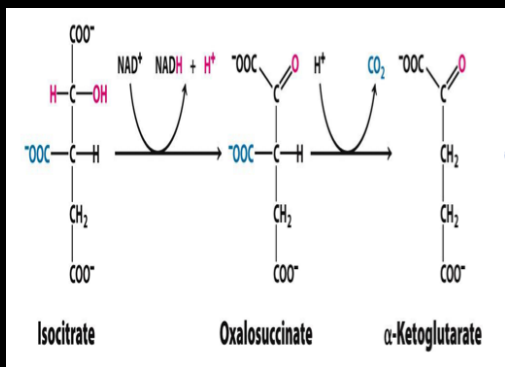
transferrin receptor receive, endocytoses Fe
ferritin stores excess Fe in the cell

apoaconitase regulates protein levels by stabilize or unstabilize the mRNA of transferrin receptor or ferritin

! **fluoroacetate** → strong inhibitor of aconitase

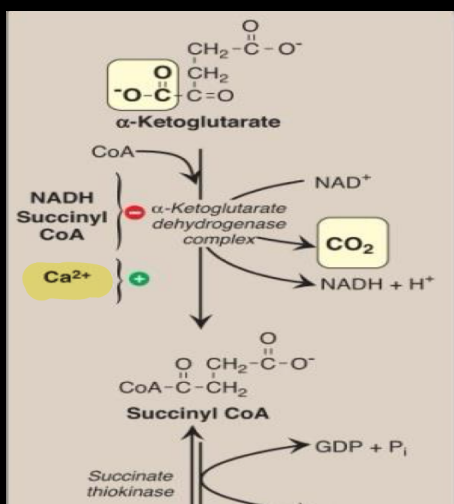
- fluoroacetyl-CoA condenses with oxaloacetate to form fluorocitrate, which inhibits aconitase, cause citrate accumulate.
- anticancer agents, industrial chemicals (pesticides)

Step ③ Isocitrate Dehydrogenase



- CO_2 generated
- irreversible

Step ④ α -Ketoglutarate Dehydrogenase Complex



- net full oxidation of all carbons of glucose

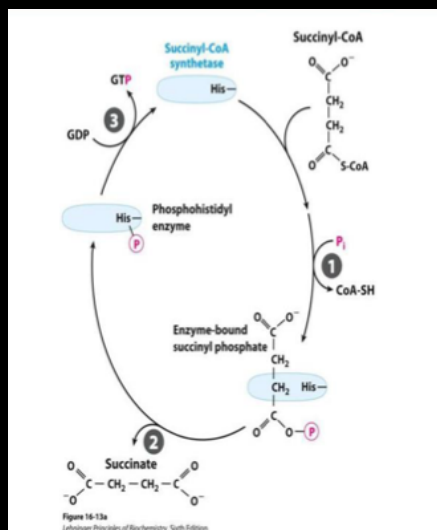
- irreversible

α ketoglutarate dehydrogenase comp.

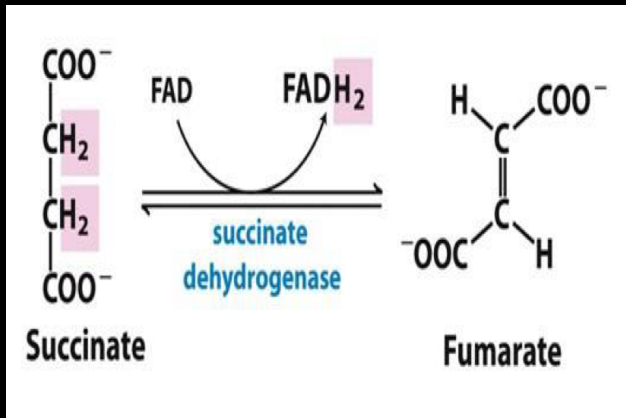
- + thiamin disphosphate, lipoate, NAD⁺, FAD and CoA \rightarrow same as PDH comp.

Substrate level phosphorylation

- Succinyl CoA \rightarrow high energy thioester bond
- this bond allows for incorporation of inorganic phosphate into ADP or GDP
- goes through phospho enzyme intermediate
- produces GTP, converted ATP directly
- reversible



Step ⑤ Succinate Dehydrogenase

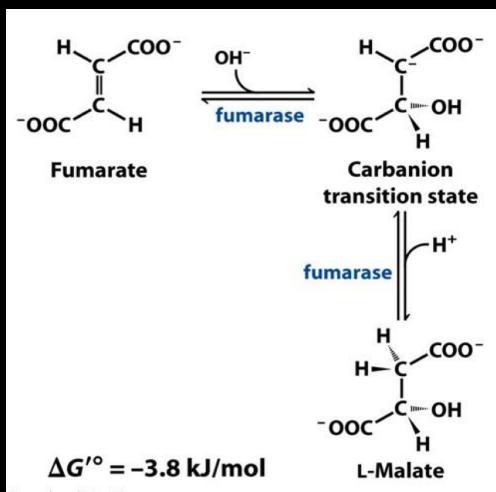


succinate dehydrogenase

- flavoprotein
- bind to mitochondrial inner membrane
- three different iron-sulfur cluster and FAD

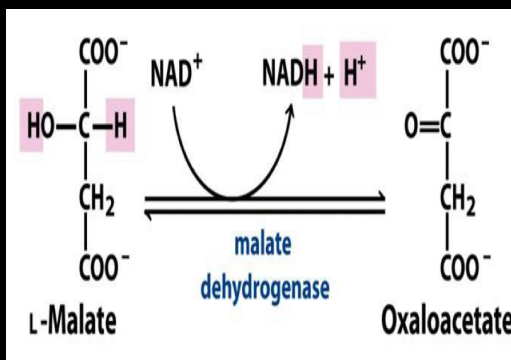
– Electron pass from succinate through the FAD and iron sulfur center before entering ETS.

Step ⑥ Fumarate



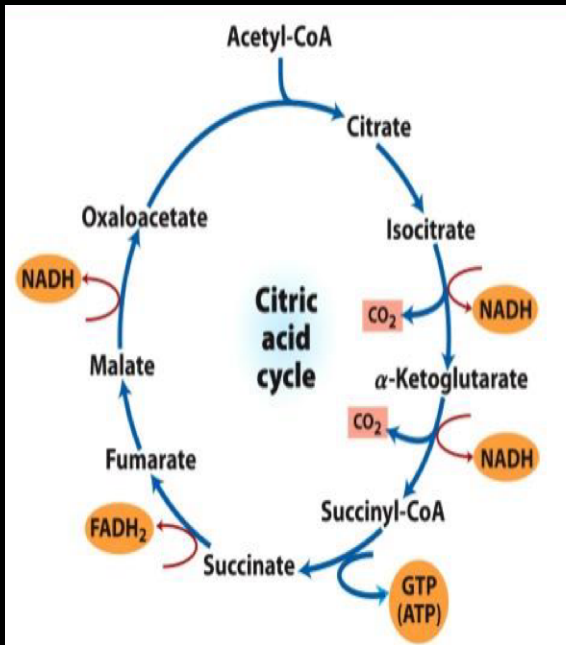
- addition of water is always trans, forms L-malate
- cannot work on malate

Step ⑦ Malate Dehydrogenase



- regenerates oxaloacetate
- oxaloacetate concentration kept very low by citrate synthase

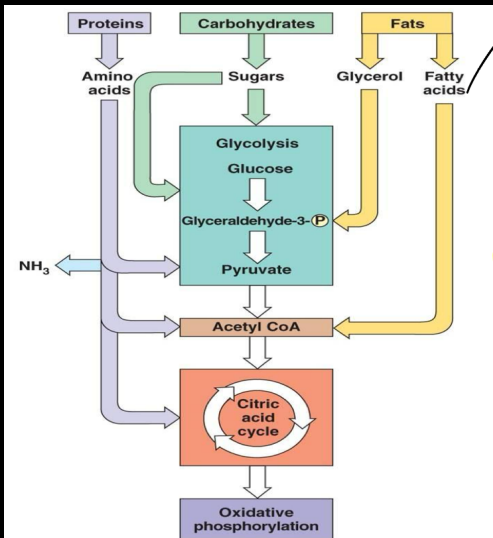
Overview to Krebs Cycle



- net oxidation of two carbons to CO₂
- generates 1 GTP
- 3 NADH, 1 FADH₂ generated
- the efficiency of oxidation of glucose is nearly 40%

importance of it

- ① final catabolic pathway for carbohydrates, lipids and protein
- ② glucose, fatty acids and many amino acids can be synthesized from intermediates
- ③ Capture of energy as ATP



regulation of it

- 1- regulatory enzyme → inactive in the absence of acetyl coA
 - 2- more acetyl coA, more activity
- Irreversible steps

PDH, citrate synthase, IDH, α-KDH

inhibitors: NADH, ATP

activators: NAD, AMP

* Co²⁺ in muscles activates cycle

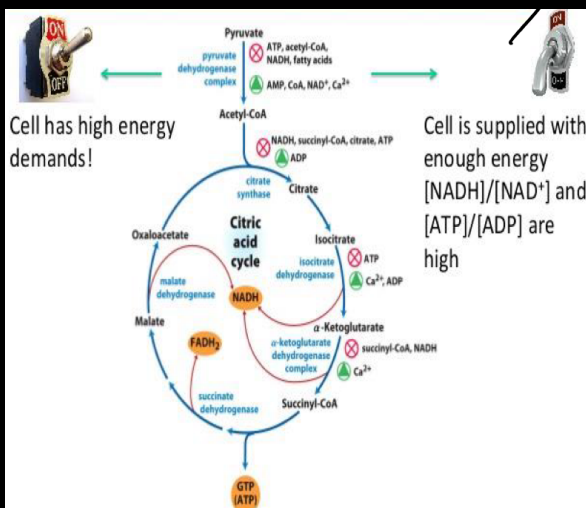


TABLE 16-1 Stoichiometry of Coenzyme Reduction and ATP Formation in the Aerobic Oxidation of Glucose via Glycolysis, the Pyruvate Dehydrogenase Complex Reaction, the Citric Acid Cycle, and Oxidative Phosphorylation

*This is calculated as 2.5 ATP per NADH and 1.5 ATP per FADH₂. A negative value indicates consumption.

Table 16-1
Lehninger Principles of Biochemistry, Sixth Edition
© 2013 W. H. Freeman and Company

- Oxidation of fatty acids \rightarrow Acetyl CoA
- Propionyl CoA formed from fatty acids
 - \hookrightarrow converted into succinyl CoA
- glycerol released from lipids
 - \hookrightarrow can be converted into pyruvate by glycolytic pathway

amino acids

GLYCINE

ALANINE

SERINE

THREONINE

CYSTEINE

TRYPTOPHAN

HYDROXYPROLINE



PYRUVATE

PHENYLALANINE

TYROSINE



FUMARATE

GLUTAMINE

ARGININE

HISTIDINE

PROLINE



GLUTAMATE



α-KETOGLUTARATE

VALINE

ISOLEUCINE

METHIONINE



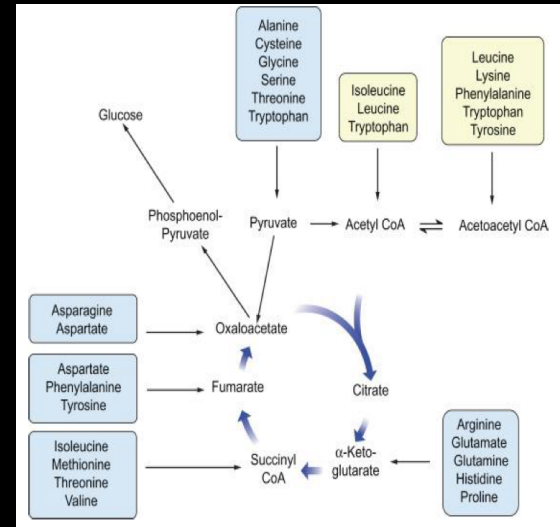
SUCCINYL CoA

LEUCINE

LYSINE



Acetyl CoA



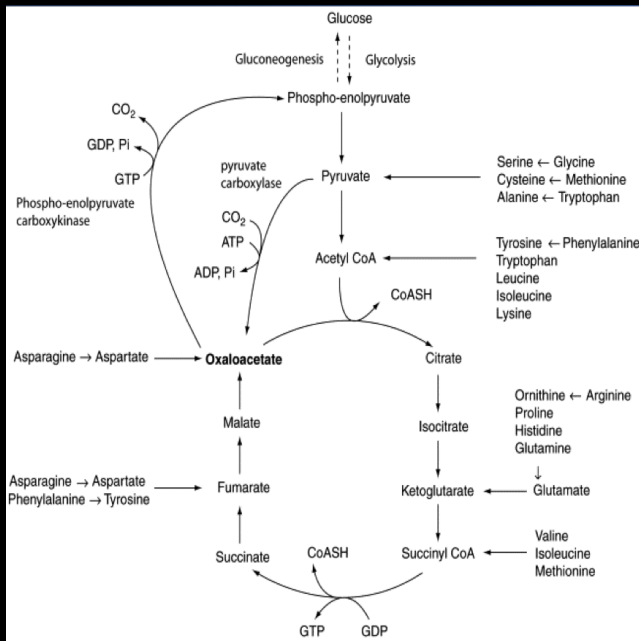
ASPARAGINE

ASPARTATE



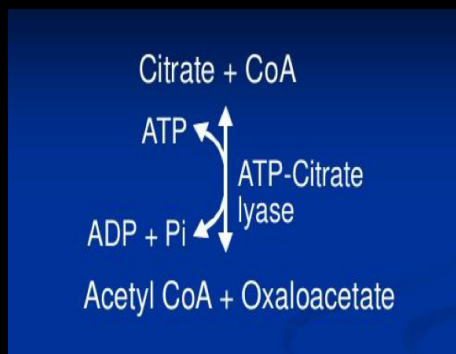
OXALOACETATE

catabolic roles



①

- glucose, fatty acids, many aa synthesized from intermediates of krebs cycle
- interconversion of nutrients
- all intermediates converted to oxaloacetate
- oxaloacetate substrate for to produce ← gluconeogenesis glucose



- ② • **fatty acids** synthesized from **acetyl CoA**
- **acetyl CoA** formed in mitochondria but **fatty acids** are synthesized in **cytosol**.

- **Acetyl CoA** cannot pass mitochondrial membrane but **citrate** can
- **Acetyl CoA** converted into **citrate** in mitochondria
- **Citrate** goes to **cytosol** cleaved into **acetyl CoA** + **oxaloacetate**
- this way **acetyl CoA** used for **fatty acid synthesis**

~~***~~ Bcs Krebs cycle perform both **catabolic** and **catabolic** functions → it is **amphibolic pathway**

Pentose Phosphate Pathway

General info: - all cell types and tissues

- in liver %30 glucose metabolized by it
- occurs in cytoplasm
- produces **NADP**

↳ fatty acid synthesis
↳ oxidative stress homeos.
↳ cytochrome P450 enzymes

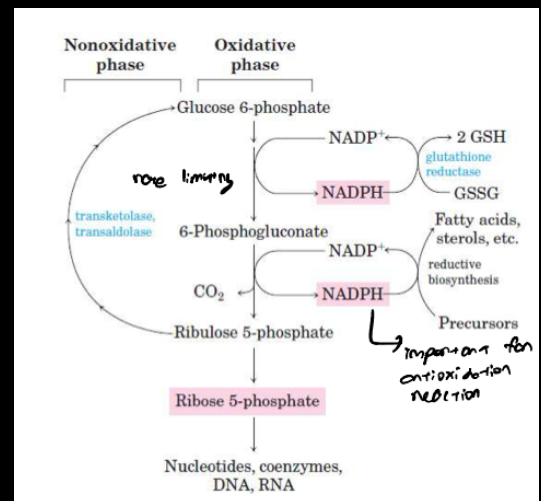
- not produce ATP

form NADPH, the synthesis of ribose

- happen in two steps

① Oxidative nonreversible dehydrogenation and decarboxylation
- Ribulose 5- Phosphate

② Nonoxidative reversible mainly two enzymes transketolase + transaldolase
- Glucose 6- Phosphate



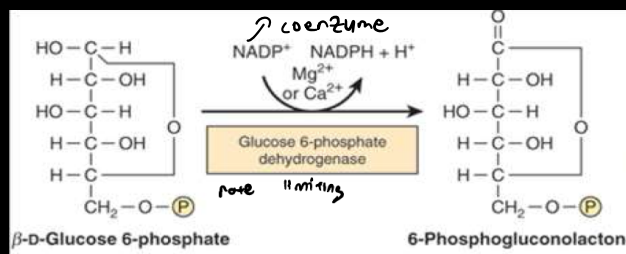
① Oxidative nonreversible

final product = ribulose 5-phosphate, CO_2 ,
two molecules of NADPH for
each molecule of glucose-6
phosphate.

important pt = ① in liver and adipose active in
↳ NADPH dependent synthesis of
② in testes, ovaries, placenta ^{fatty acids}
adrenal cortex
↳ NADPH dependent synthesis of ^{steroid} hormones
③ in erythrocytes
↳ NADPH to keep ^{glutathione} reduced

irreversible
oxidative
reaction

Step ① GLUCOSE 6 PHOSPHATE DEHYDROGENASE



Step ② ① 6-PHOSPHOGLUCONOLACTONE HYDROLASE ② 6-PHOSPHOGLUCONATE DEHYDROGENASE

1) 6-phosphogluconolactone $\xrightarrow{\text{①}}$ 6-phosphogluconate
2) 6-phosphogluconate $\xrightarrow{\text{②}}$ Ribulose-5-phosphate + NADPH

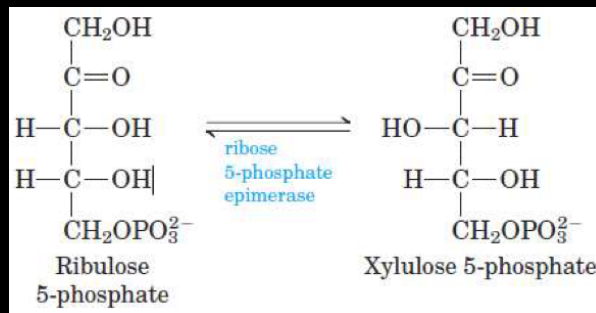
1) irreversible, not rate limiting
2) reversible, rate limiting

! regulation of $66PO \rightarrow NADPH$, insulin inhibits

reversible
nonoxidative reaction

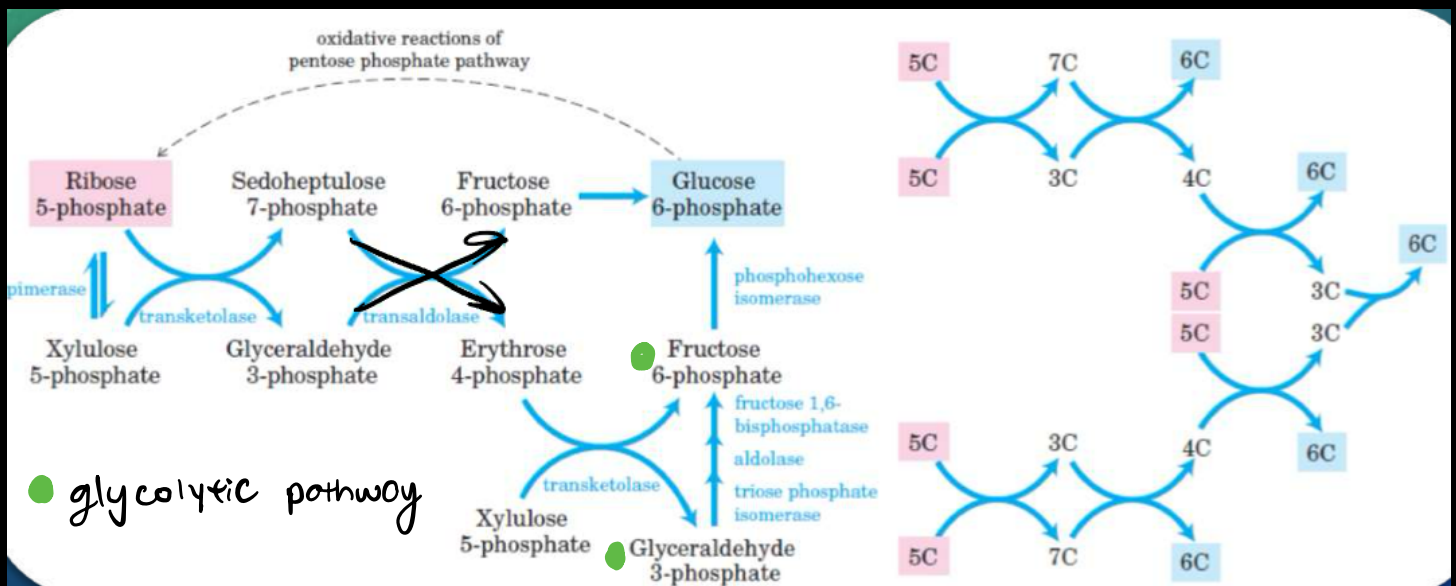
goal = permit ribulose 5-phosphate to be converted
ribose 5-phosphate or intermediate of glycolysis
(fructose 6-phosphate
glyceraldehyde 3-phosphate)

step ① RIBULOSE 5-PHOSPHATE EPIMERASE



! transketolase = transfers two carbon (2C) units in
thiamine pyrophosphate (TPP) requiring
reaction.

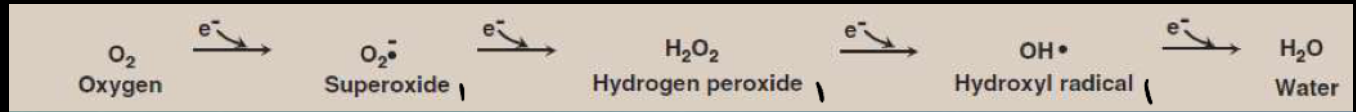
transaldolase = transfers three carbon (3C) units



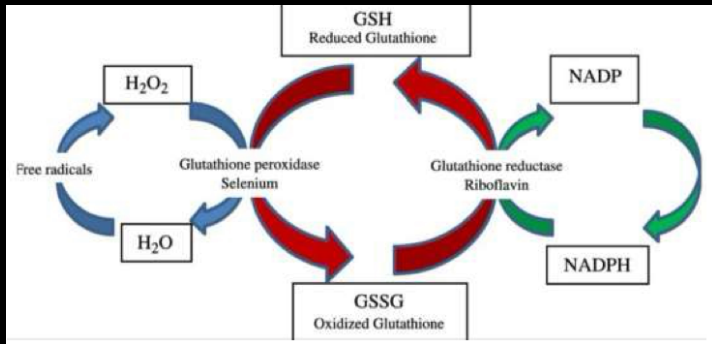
Uses of NADPH

① NADPH provides reducing power for biosynthetic rxn.
↳ NADPH-dependent biosynthesis of fatty acids and steroid hormones

② Reduction of hydrogen peroxide



- reactive oxygen intermediates → injury, cancer, aging, inflammatory disease



→ the cell regenerate reduced glutathione in Glutathione reductase using NADPH as a reducing equivalents.

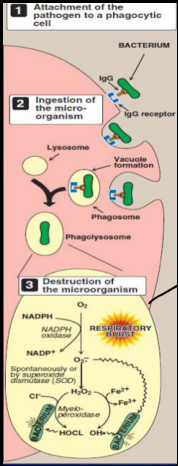
→ thus indirectly provides electrons for the reduction of hydrogen peroxide.

③ Cytochrome P450 Monooxygenase System

mitochondrial system = in steroidogenic tissues, used to hydroxylate intermediates in the conversion of cholesterol to steroid hormones

microsomal system = associated with the membranes of smooth ER → the detoxification of foreign compounds.

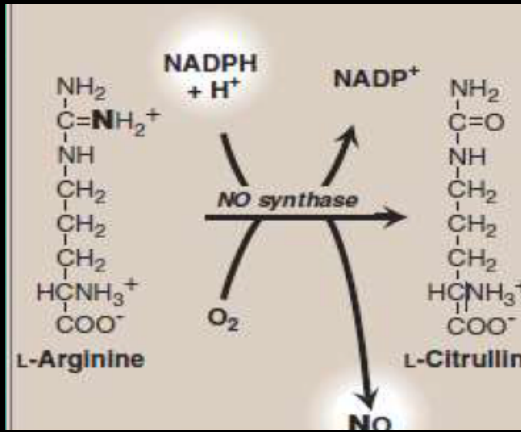
④ Phagocytosis by White Blood Cell



→ oxygen independent = use pH changes in phagolysosomes and lysosomal enzymes to destroy pathogen

→ oxygen dependent = include enzymes NADPH oxidase and myeloperoxidase (MPO) work together in killing bacteria

⑤ Synthesis of Nitric Oxide



→ NO is endothelium relaxing factor causes vasodilation by relaxing vascular smooth muscle.

→ act as neurotransmitter prevent platelet aggregation plays essential role in macrophage function.

G6PD Deficiency

- inherited disease characterized by hemolytic anemia caused by the inability to detoxify oxidizing agents.
- most common enzyme abnormality
- impair ability to produce NADPH
- result in a decrease in the cellular detoxification
- treated by → oxidant drugs
→ favism (fava beans)
→ infection

