

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ  
(وَفَوْقَ كُلِّ ذِي عِلْمٍ عَلِيمٌ)



Metabolism | Lecture 14

# Alcohol Metabolism

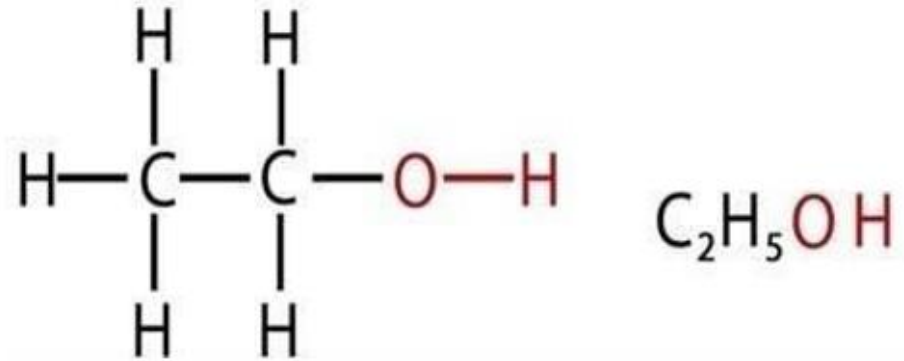


Written by : NST

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Ethanol

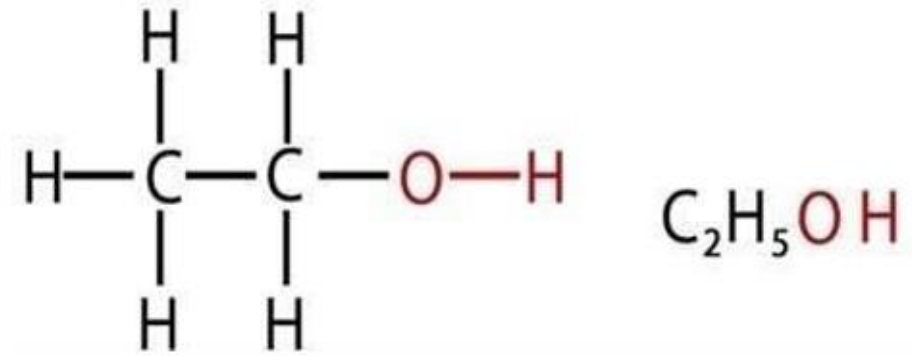


# Alcohol Metabolism

Dr. Diala Abu-Hassan



## Ethanol



Non-Polar side

Polar side

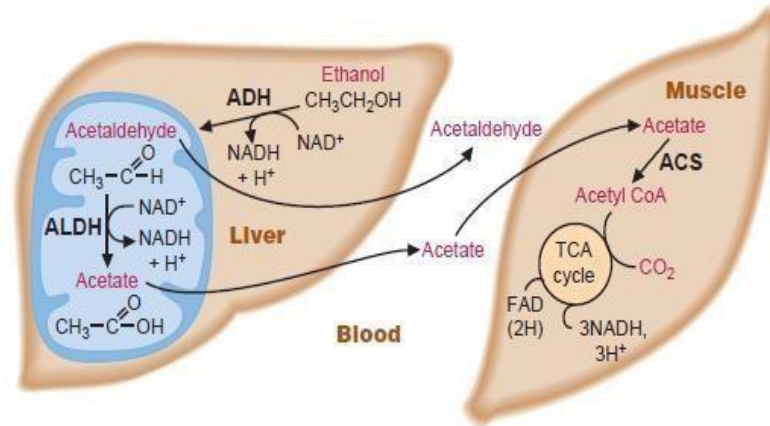
Alcoholic compound composed of 2 carbons non-polar side and 1(OH) group polar side so it's kind of amphipathic, which facilitates its absorption through stomach cells . It's present in alcoholic beverages

**So, in this lecture we're going to discuss how the body cells get rid of it and degrade it to finish its effects on CNS...**



# Metabolism of Alcohol

- ✓ When alcohol is ingested, a small amount is immediately metabolized in the stomach. (ethanol moves easily through cells until it reaches stomach)
- ✓ Most of the remaining alcohol is subsequently absorbed from the gastrointestinal tract, primarily the stomach and upper small intestine

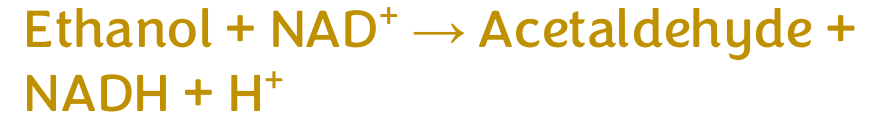


ADH: Alcohol Dehydrogenase  
ALDH: Acetaldehyde Dehydrogenase  
ACS: Acetyl CoA Synthetase

Ethanol enters hepatocytes (liver cells):  
1. In the cytosol of hepatocytes, ethanol (a primary alcohol) is oxidized to acetaldehyde by the enzyme alcohol dehydrogenase (ADH).

1. During this reaction,  $\text{NAD}^+$  is reduced to  $\text{NADH}$ .

2. Reaction:



2. In the mitochondria, the toxic acetaldehyde is further oxidized to acetic acid (acetate) by acetaldehyde dehydrogenase (ALDH).

1. Again,  $\text{NAD}^+$  is reduced to  $\text{NADH}$ .

2. Reaction:



How do you prepare acetic acid from ethanol in organic chemistry?

The resulting **acetate** can:

- Leave the hepatocyte and enter the **bloodstream**, where it is taken up by **muscle cells**.
- In muscles, **acetate** is converted to **acetyl-CoA** by **acetyl-CoA synthetase**, which then enters the **Krebs cycle** for energy production.

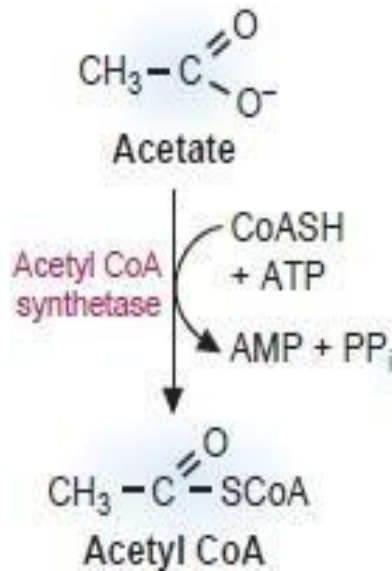
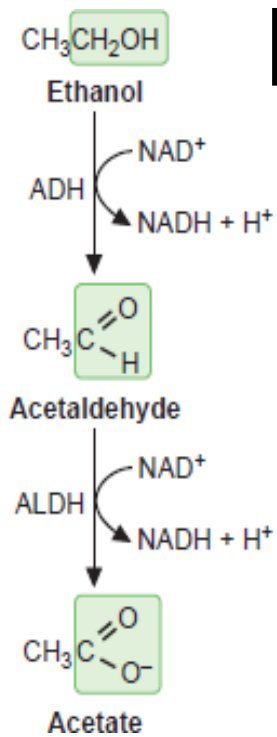
However, **Acetaldehyde** itself is highly toxic and **carcinogenic**.

- **Acetaldehyde** (can go to the bloodstream directly )If it accumulates, it can cause cellular damage and even promote **cancer development**.
- Acetaldehyde also has a **strong odor**, which is why you can often **smell alcohol** on someone who has been drinking.

This pathway – involving **alcohol dehydrogenase** and **acetaldehyde dehydrogenase** – is the **main route** for ethanol metabolism in humans



# Metabolism of Alcohol-Steps



## Consequences of Ethanol Metabolism

Ethanol is metabolized in two oxidation steps:

1. Ethanol  $\rightarrow$  Acetaldehyde (by alcohol dehydrogenase, ADH)

1. Occurs in the cytosol

2.  $\text{NAD}^+ \rightarrow \text{NADH}$

2. Acetaldehyde  $\rightarrow$  Acetate (by acetaldehyde dehydrogenase, ALDH)

1. Occurs in the mitochondria

2.  $\text{NAD}^+ \rightarrow \text{NADH}$

Both reactions **consume**  $\text{NAD}^+$  and produce  $\text{NADH}$ , which **raises the  $\text{NADH}/\text{NAD}^+$  ratio** inside hepatocytes.

What happens when a high amount of Ethanol is metabolized?

- ✓ High  $\text{NADH}/\text{NAD}^+$
- ✓ Inhibition of FA oxidation
- ✓ Inhibition of gluconeogenesis
- ✓ Lactic acidosis

## Major Metabolic Consequences

### a. Inhibition of the Krebs (TCA) Cycle

- High NADH levels **inhibit** key dehydrogenase enzymes in the Krebs cycle.
- This reduces energy (ATP) production from normal oxidative metabolism.

### b. Lactic Acidosis

- High NADH pushes the conversion of pyruvate → lactate, increasing lactic acid levels.
- This leads to metabolic (**lactic**) acidosis.
  - Reaction shift:  
$$\text{Pyruvate} + \text{NADH} \rightarrow \text{Lactate} + \text{NAD}^+$$
- Occurs because there is not enough  $\text{NAD}^+$  to run aerobic respiration efficiently, so anaerobic glycolysis increases.

### c. Inhibition of Gluconeogenesis

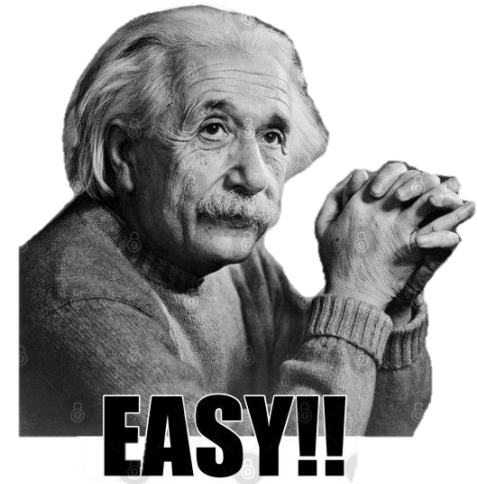
- Gluconeogenesis requires **pyruvate**, **oxaloacetate**, and **NAD<sup>+</sup>**.
- But high NADH:
  - Converts **pyruvate** → **lactate** instead of glucose precursors.
  - Converts **oxaloacetate** → **malate**, removing key substrates from the gluconeogenesis pathway.
- Result → **Hypoglycemia**, especially during fasting or heavy alcohol intake.

### d. Inhibition of Fatty Acid Oxidation

- Fatty acid oxidation also needs **NAD<sup>+</sup>** as an electron acceptor.
- When **NAD<sup>+</sup>** is scarce (due to ethanol metabolism), **β-oxidation stops**.
- Unused fatty acids are converted into **triglycerides**, causing **fatty liver (hepatic steatosis)**.

### e. Acetate Utilization

- The **acetate** produced in the liver can enter the **bloodstream**.
- **Muscle cells** convert acetate → **acetyl-CoA** via **acetyl-CoA synthetase** to use for energy.
- However, this doesn't offset the **metabolic imbalance** caused by excess NADH in the liver.



## Summary: Chain of Effects

**High Ethanol Intake → ↑NADH/NAD<sup>+</sup> ratio → ↓Krebs cycle + ↓β-oxidation + ↓gluconeogenesis → lactic acidosis + hypoglycemia + fatty liver**

### Easy Way to Remember:

“Too much NADH shuts down the liver’s power plants.”

- ◆ Stops Krebs
- ◆ Stops Fat burning
- ◆ Stops Glucose making
- ◆ Starts Lactic acid build-up

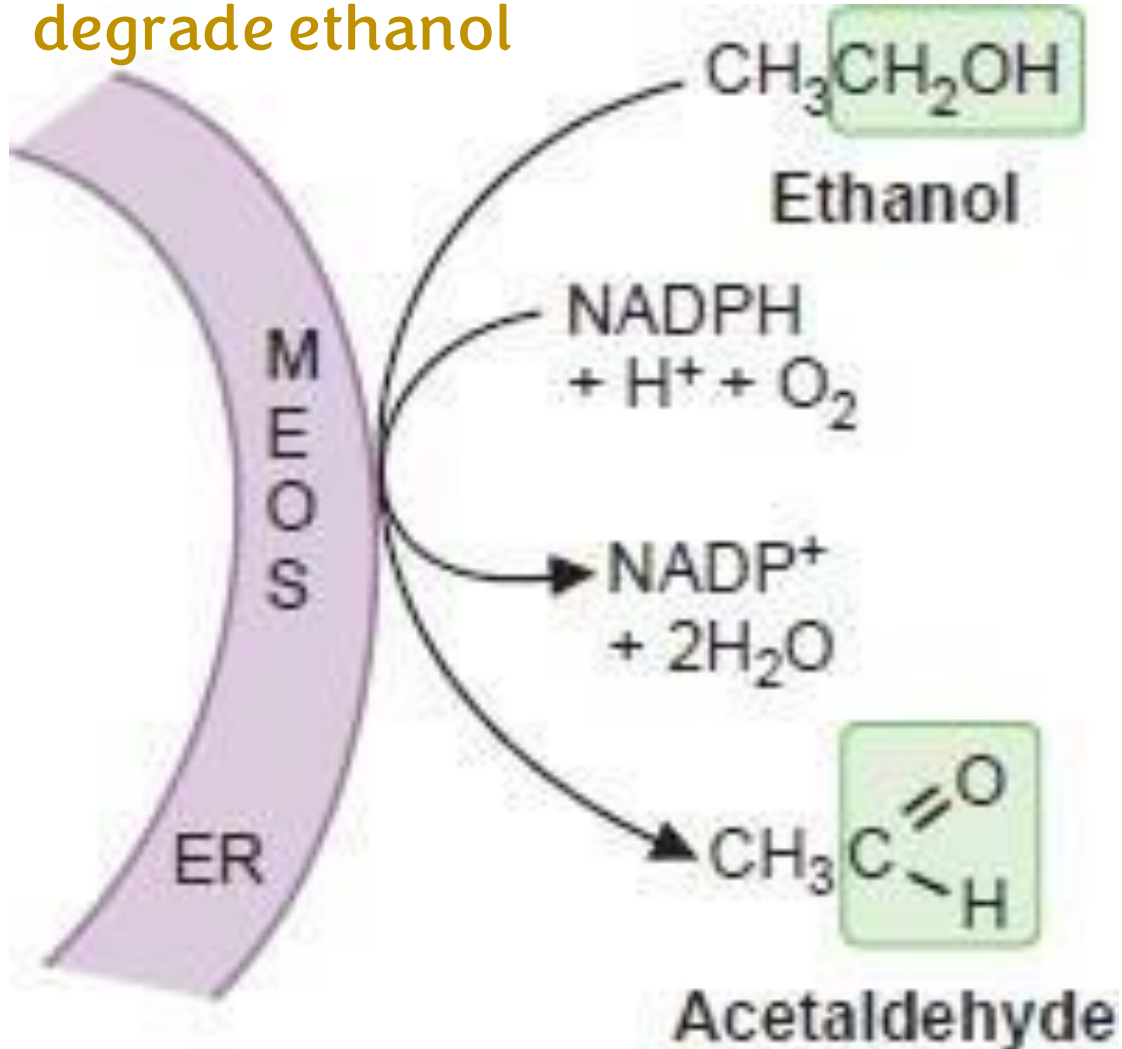


# Metabolism of Alcohol

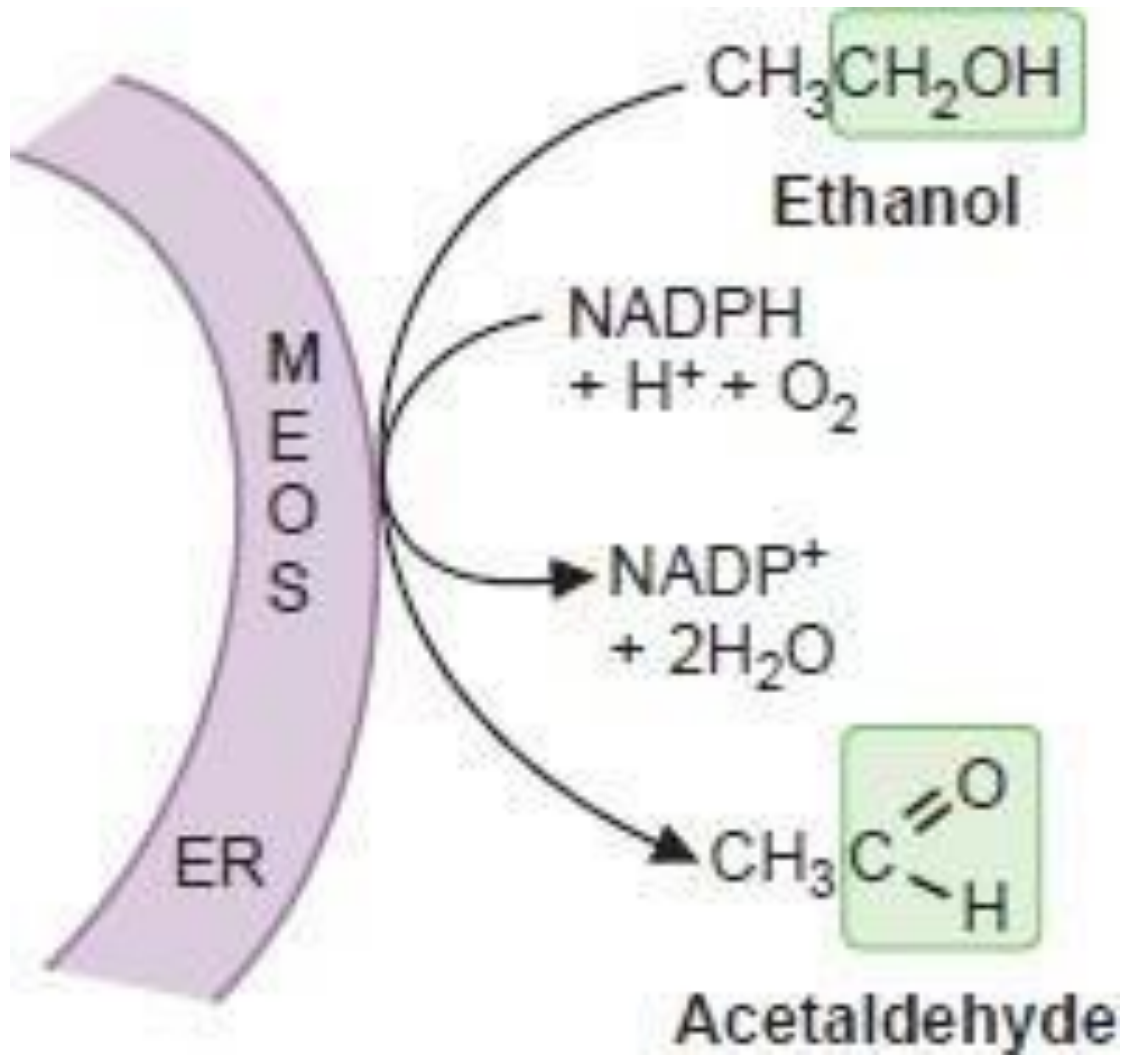
The most  
important  
Pathway to  
degrade ethanol

**MEOS: Microsomal Ethanol Oxidizing System**

The second  
Mechanism

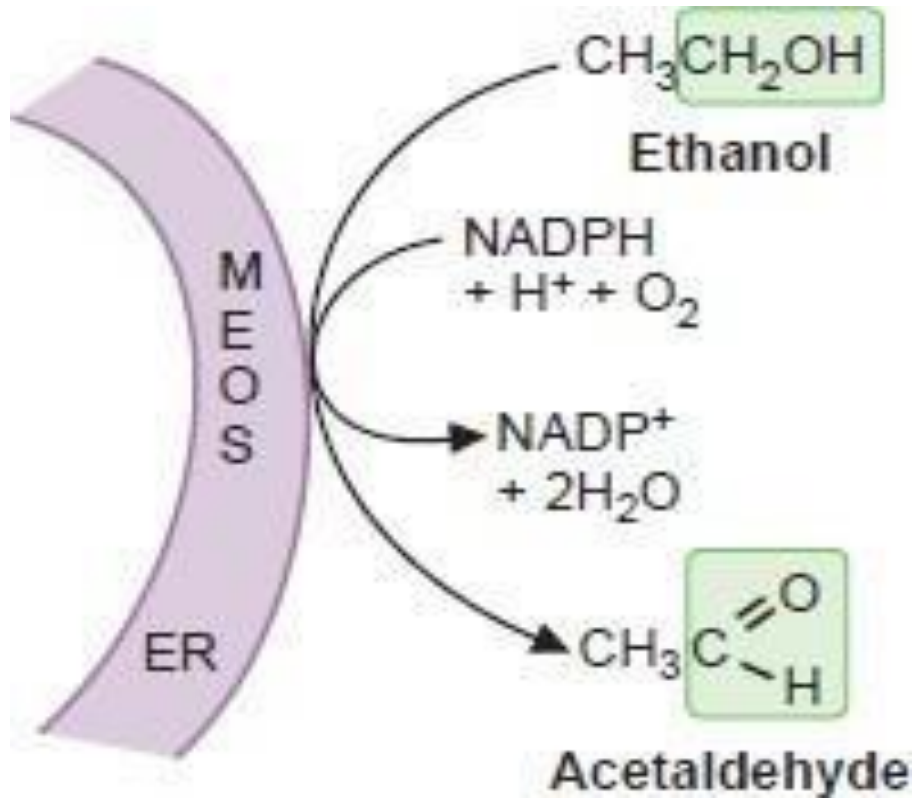


- ✓ An alternative pathway for ethanol metabolism
- ✓ **10-20%** of the ingested ethanol
- ✓ Involves primarily the **cytochrome P450 2E1 (CYP2E1)**
- ✓ CYP2E1 is associated with NADPH-cytochrome P450 reductase in the
- ✓ High  $K_m$  for ethanol
- ✓ Inducible by ethanol
- ✓ CYP2E1 is a major contributor of oxidative stress in the hepatocytes by generating several reactive oxygen species (ROS) such as hydrogen peroxide ( $\text{H}_2\text{O}_2$ ), hydroxyethyl radical ( $\text{HER}\cdot$ ), hydroxyl radical ( $\text{OH}\cdot$ ) and superoxide ( $\text{O}_2^-$ )



This one is going to depend mainly on the cytochrome P450 2E1 to do this oxidation

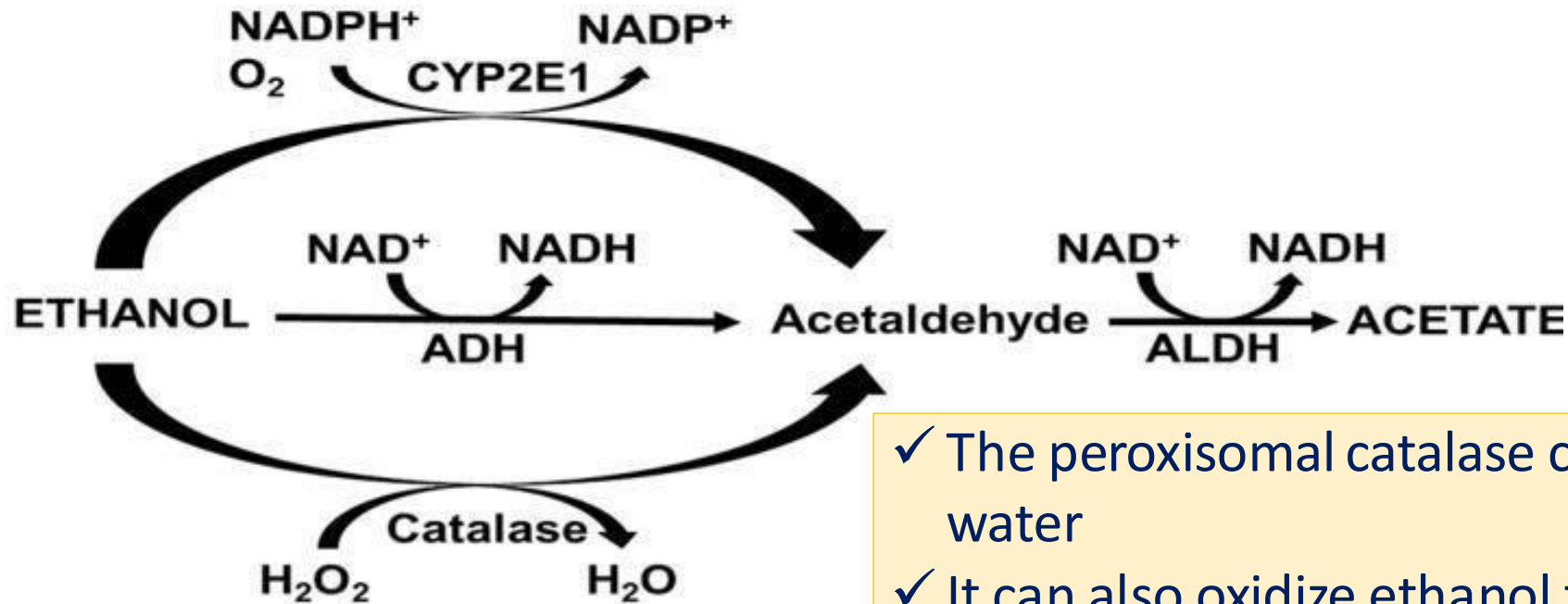
1) We're going to oxidise ethanol to acetaldehyde (but the enzyme used and the system used is different) in this case we will use MEOS (Microsomal Ethanol Oxidizing) system that has a high  $k_m$  for ethanol (which means low affinity) it has to be induced by high concentration of ethanol (that's why it's just responsible for metabolism of a small amount of ethanol)



This oxidation is associated with another oxidation of NADPH to  $\text{NADP}^+$ . So oxygen will be reduced taking electrons from both ethanol and NADPH to reduce the oxygen molecule into two  $\text{H}_2\text{O}$  molecules. This process is associated with the production of reactive oxygen ROS such as  $\text{H}_2\text{O}_2$ , hydroxyl radical, superoxide ions .... These are toxic to the **hepatocytes** in which this process is going to happen.

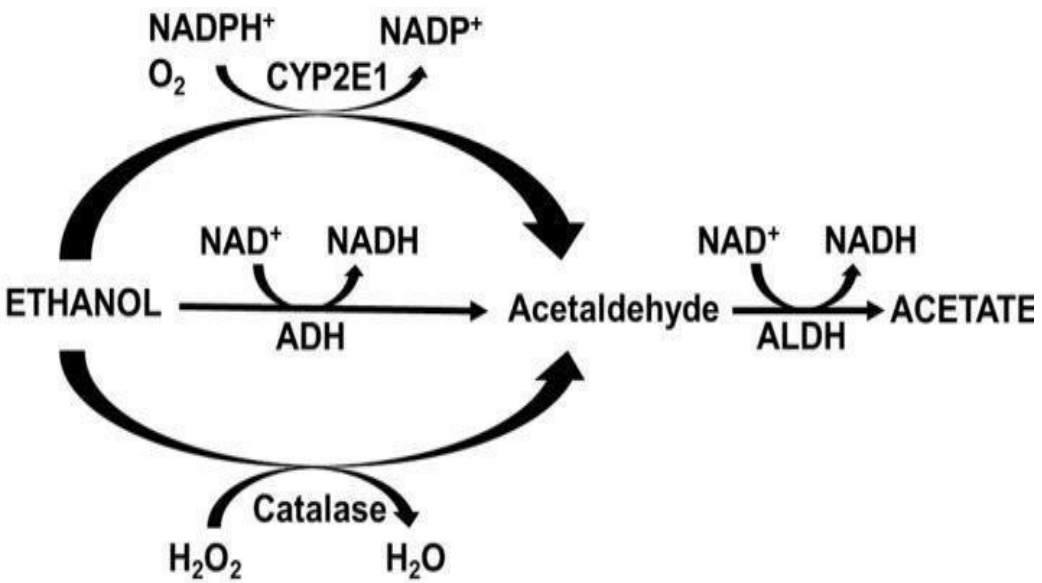
# Metabolism of Alcohol-Catalase

سُبْحَانَ اللَّهِ وَبِحَمْدِهِ  
عَدَدَ خَلْقِهِ ، وَرِضَا نَفْسِهِ ،  
وَرِثَةَ عَرْشِهِ ، وَمِدَادَ كَلِمَاتِهِ ..



The third mechanism to get rid of alcohol again  
The Ethanol will be oxidised to acetaldehyde  
Same idea but using different enzyme system

- ✓ The peroxisomal catalase converts  $\text{H}_2\text{O}_2$  to oxygen and water
- ✓ It can also oxidize ethanol to acetaldehyde
- ✓ Is not a key pathway for ethanol elimination
- ✓ Catalase is ubiquitously expressed in almost all tissues
- ✓ Catalase is also expressed by colonic floras which may lead to acetaldehyde production in the lower gastrointestinal tract
- ✓ Catalase activity relies on the cellular level of  $\text{H}_2\text{O}_2$



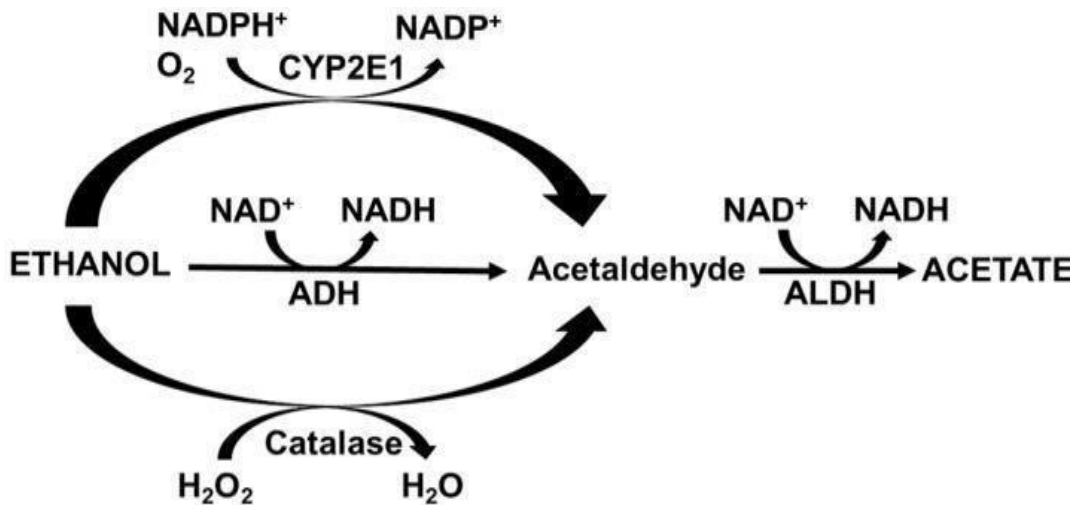
We use catalase that's present in the peroxisome so the peroxisomal catalase that normally gets rid of H<sub>2</sub>O<sub>2</sub> and makes it H<sub>2</sub>O and oxidise ethanol to Acetaldehyde this is a very minor pathway to get rid of ethanol and eliminate it

It's responsible for a very small percentage of ethanol metabolism

This enzyme is also expressed by the **microflora** in the colon so there might be some production of acetaldehyde in the GI tract this system is connected/ restricted to **H<sub>2</sub>O<sub>2</sub> availability** so there has to be H<sub>2</sub>O<sub>2</sub> to be able to oxidise ethanol

That's why it's a **minor** system for metabolism alcohol





Then after acetaldehyde is formed whether it's going to form by alcohol dehydrogenase P452E1 or catalase it's going to be further oxidised into acetate


 الْحَمْدُ لِلَّهِ عَدَدَ مَا خَلَقَ،  
 وَالْحَمْدُ لِلَّهِ مِثْلَ مَا خَلَقَ،  
 وَالْحَمْدُ لِلَّهِ عَدَدَ مَا فِي السَّمَاوَاتِ وَمَا فِي الْأَرْضِ،  
 وَالْحَمْدُ لِلَّهِ عَدَدَ مَا أَحْصَى كِتَابُهُ،  
 وَالْحَمْدُ لِلَّهِ مِثْلَ مَا أَحْصَى كِتَابُهُ،  
 وَالْحَمْدُ لِلَّهِ عَدَدَ كُلِّ شَيْءٍ،  
 وَالْحَمْدُ لِلَّهِ مِثْلَ كُلِّ شَيْءٍ،  
 وَقَسَّيَ اللَّهُ مِثْلَهُنَّ

# Ethanol Metabolism Application



- ✓ ADH has **5 classes or isoenzymes**
- ✓ Different isoforms are expressed in different tissues such as liver, lung, stomach and esophagus.
- ✓ People with different races inherit different sets of ADH isoenzymes, for example African Americans have an isoform with a high maximal velocity resulting in fast ethanol metabolism



Different kinetics : some of them are faster in metabolism of ethanol than the others



The isoforms that are faster are going to remove the effect of ethanol on the CNS faster so the people will be **more** efficient in degradation of ethanol, and they **won't** get drunk easily, whereas the **Southeast Asians** have problems and mutations or the so-called **polymorphisms in alcohol dehydrogenase** resulting in **less** efficient and slower degradation of ethanol that's why they can get drug **easily** in compared to other races



## Additional Resources:

## رسالة من الفريق العلمي:

قناة قُصَي عاصم الغسيلي

إِيَّاكَ يَا فَتَى..

أَنْ تُسْقِطَ نَفْسَكَ لِمَجَرَّدِ أَنَّهَا قَلَّتْ هِمَّتُكَ، أَوْ  
صَيَّعَتْ شَيْئًا مِنْ وَقْتِكَ، أَوْ رَاكَمَتْ جِزْءًا  
مِنْ بَرَامِجِكَ! وَأَنَّكَ مَا عُدْتَ قَوِيًّا، وَارْتَكَبْتَ  
ذَنْبًا خَفِيًّا! إِيَّاكَ أَنْ تُغْلِقَ بَابًا فُتِحَ لَكَ،  
اَنْتَبِهْ جَيِّدًا؛ لَا تَكْسِرِ اللَّحْظَةَ ظَهْرَكَ، وَلَا  
تَحْذِفِ الْعَثْرَةَ ثَغْرَكَ.



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For any feedback, scan the code or click on i



- Corrections from previous versions:

| Versions | Slide # and Place of Error | Before Correction | After Correction |
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| V0 → V1  |                            |                   |                  |
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