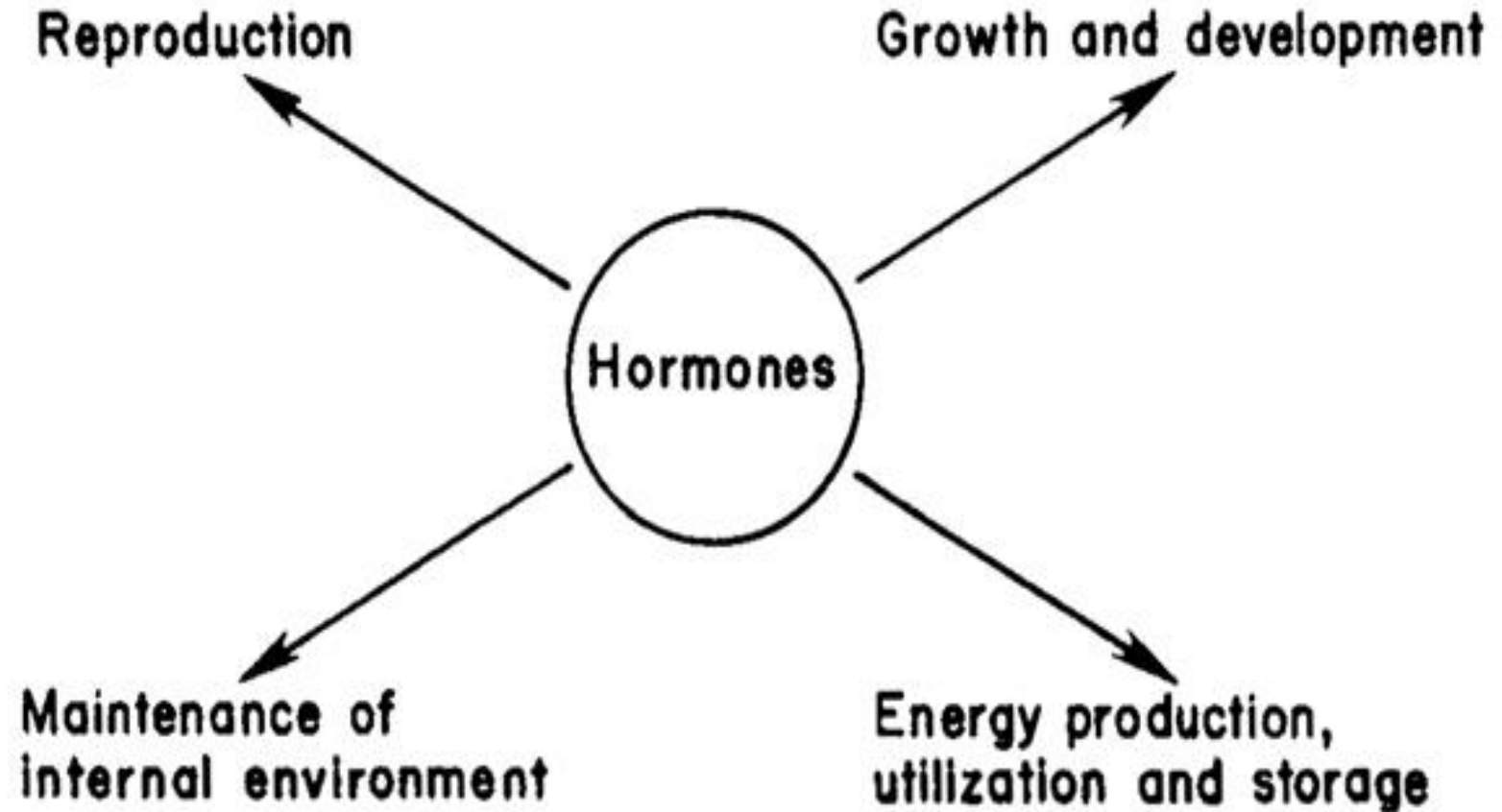


Estrogens and Progestins

ANSC 630 Reproductive Biology I

Hormone Functions



Physiological Roles of Hormones

- Neuromodulation
- Reproductive Processes
- Metabolism (anabolic/catabolic)
- Cellular proliferation and growth
- Excretion and reabsorption
- Behavior
- Immune system
- *More being discovered every day !*

Classical Definition of a Hormone:

Physiological organic substance produced by specialized cells and released into circulating blood or lymph for transport to target tissues in distant organs to exert specific actions.

Classical hormones are cell signaling molecules that:

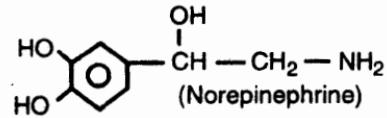
- are synthesized by endocrine cells, e.g., gonadotrophs**
- are secreted into the circulation (blood or lymph)**
- interact with proteins called receptors on target cells (e.g., theca cells of ovarian follicle)**
- have specific effects on target cells (e.g., stimulate theca cells to produce androgens such as testosterone)**

Modern Definition of Hormone

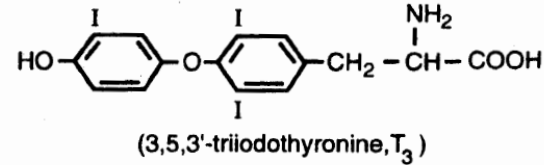
- **Hormone**
 - Substance released by one cell to regulate another cell. Synonymous with chemical messenger.
 - Delivered through endocrine, neuroendocrine, neurocrine, paracrine, autocrine, lactocrine or pheromonal systems
- **Chemical Nature of Hormones:**
 - Amino Acids (norepinephrine, epinephrine, dopamine from tyrosine; thyroid hormones Triiodothyronine (T3) and Thyroxin (T4) from two iodinated tyrosines)
 - Peptides (e.g., oxytocin) and Proteins (e.g., Follicle Stimulating Hormone and Luteinizing Hormone)
 - Steroid Hormones
 - Intact steroid nucleus (cortisol, estrogen, progesterone)
 - Broken steroid nucleus (Vitamin D and metabolites)

Different Categories of Hormones

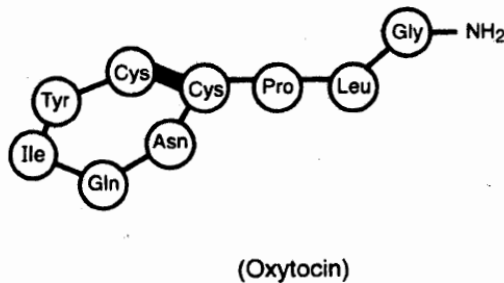
Amines



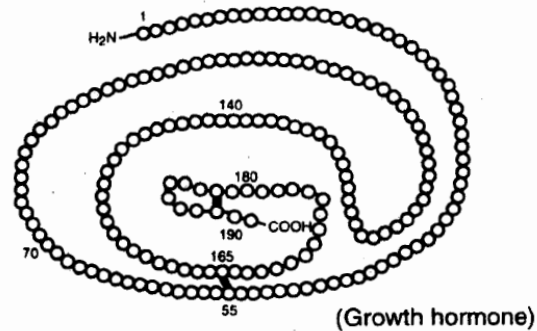
Thyroid Hormones



Polypeptides



Proteins



Steroids

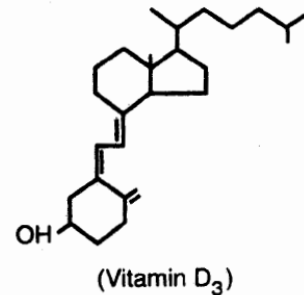
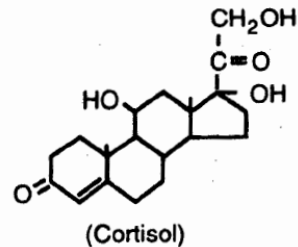


Fig. 1-1 Examples of different categories of hormones. In the case of the protein hormone, each circle represents an amino acid, as shown for the polypeptide hormone.

Methods of Hormone Delivery

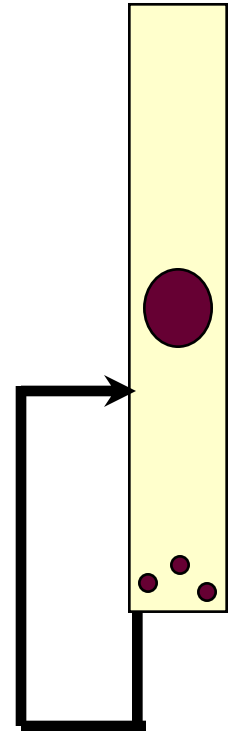
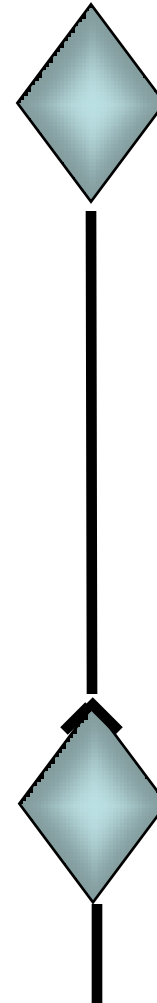
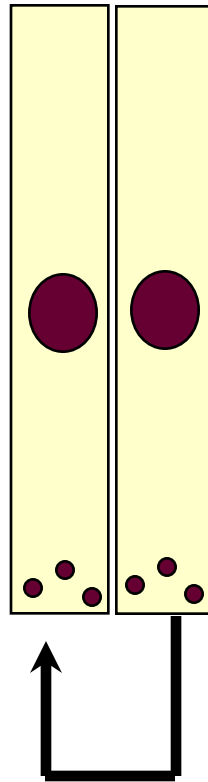
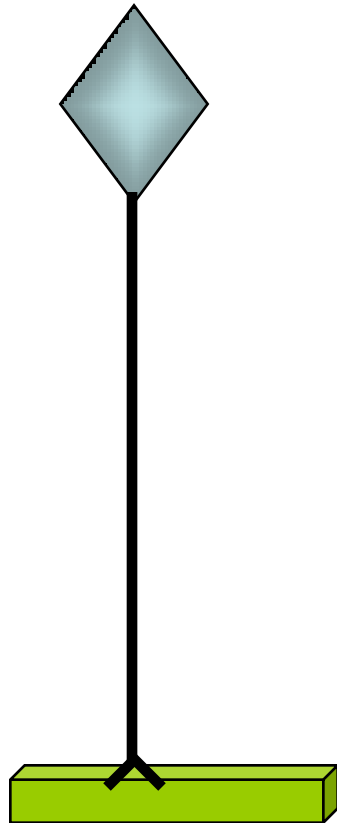
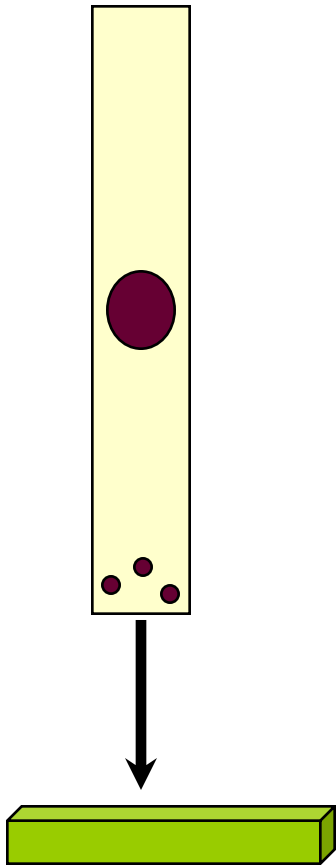
Endocrine

Neuroendocrine

Paracrine

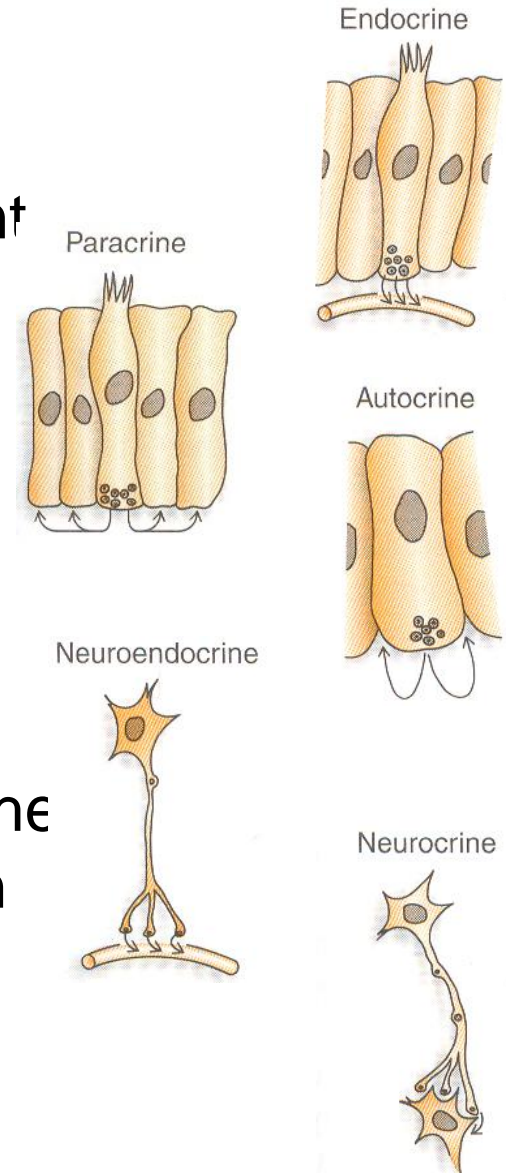
Neurocrine

Autocrine



Modes of hormone action

- **Endocrine:** the hormone is bloodborne
- **Paracrine:** hormone diffuses to adjacent cells through the extracellular space
- **Autocrine:** hormone feed back on cell of origin
- **Neuroendocrine:** hormone is released by a nerve cell into the bloodstream
- **Neurocrine:** neuron terminal contacts the target cell and release neurohormone in specialized sites
- **Lumonal:** hormone is released into the lumen (gut, uterus, cerebral ventricles)



LACTOCRINE

THE TRANSFER OF

BIOLOGICALLY ACTIVE

MOLECULES FROM MOTHER TO

NEONATE VIA COLOSTRUM OR

FIRST MILK; FOR EXAMPLE,

RELAXIN

Classical Endocrine Glands and Their Hormones

Table 1-1 Classical Endocrine Glands and Their Hormones

Gland		Hormone
Pituitary	Anterior lobe	Luteinizing hormone (LH), follicle-stimulating hormone (FSH), prolactin (PRL), growth hormone (GH), adrenocorticotropin (ACTH), β -lipotropin, β -endorphin, thyroid-stimulating hormone (TSH)
	Intermediate lobe	Melanocyte-stimulating hormone (MSH), β -endorphin
	Posterior lobe	Vasopressin (AVP) or antidiuretic hormone (ADH), oxytocin
Thyroid		Thyroxine (T_4), 3,5,3'-triiodothyronine (T_3), calcitonin
Parathyroid		Parathyroid hormone (PTH)
Adrenal	Cortex	Cortisol, aldosterone, dehydroepiandrosterone, androstenedione
	Medulla	Epinephrine, norepinephrine
Gonads	Testis	Testosterone, estradiol, androstenedione, inhibin, activin, müllerian-inhibiting substance
	Ovary	Estradiol, progesterone, testosterone, androstenedione, inhibin, activin, FSH-releasing peptide, relaxin, follistatin
Placenta		Human chorionic gonadotropin (hCG), human placental lactogen (hPL), progesterone, estrogen
Pancreas		Insulin, glucagon, somatostatin, pancreatic polypeptide, gastrin, vasoactive intestinal peptide (VIP)
Pineal		Melatonin, biogenic amines, several peptides

Patterns of Hormone Secretion

- Circhoral (frequency of 1 h)
- Ultradian (frequency of 1-24 h)
- Circadian (periodicity is 1 day)
- Quotidian (recurs every day)
- Circannual or Seasonal (relation to seasonal phases of the year)

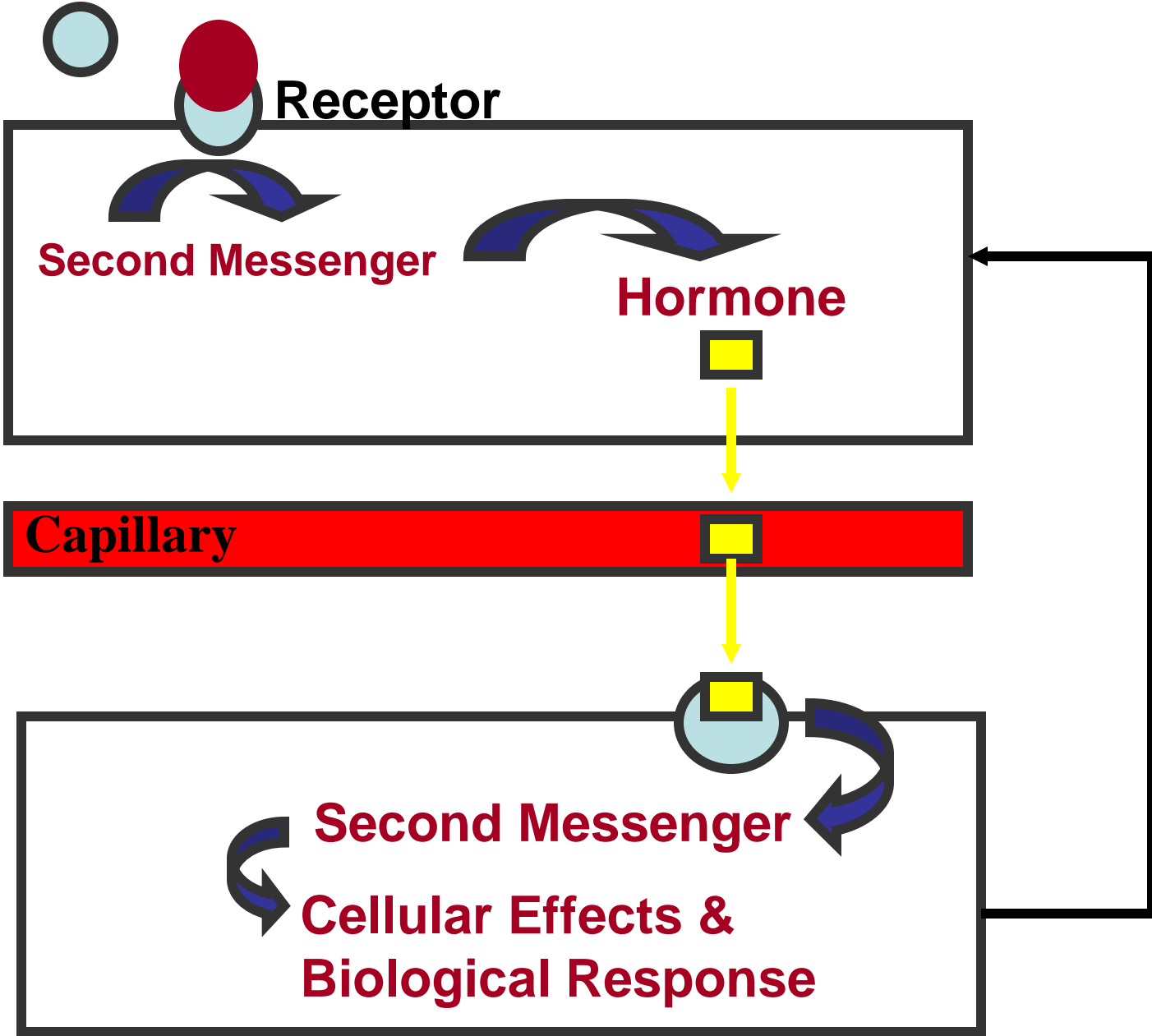
Endocrine System: General Considerations

- **Synthesis of hormones**
 - Regulated at several levels: gene, mRNA, enzyme
- **Distribution network**
 - Blood/cerebral fluid/other body fluids
- **Site of action (target cell/organ)**
 - Transduced through hormone specific receptor and 2nd messengers
- **Loss of hormone action**
 - Mechanism to metabolize or degrade the hormone
- **Feedback**
 - Negative and positive feedback, but also cooperative effects as estrogen increases receptors for progesterone

Control of hormone release

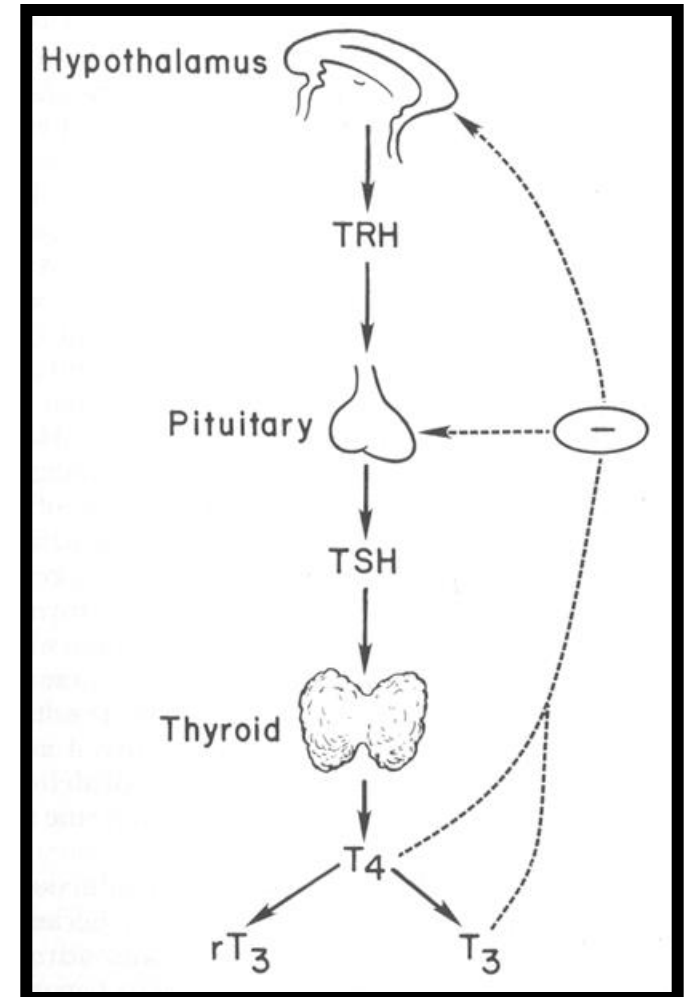
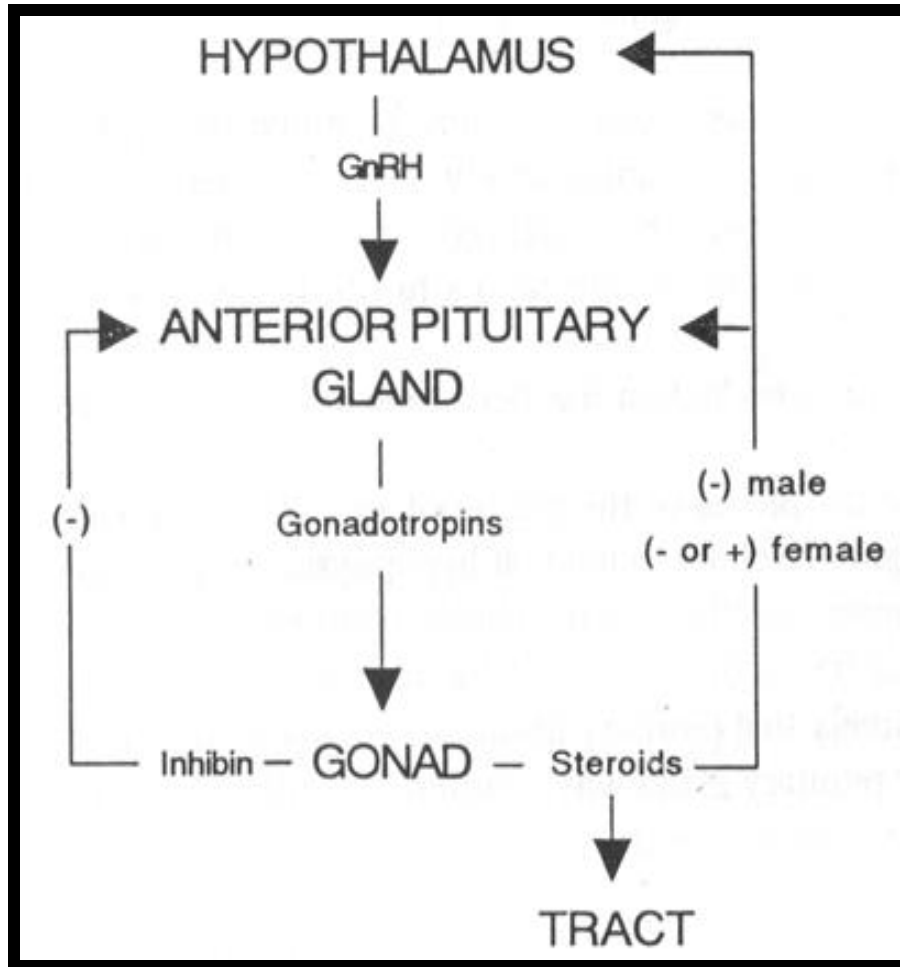
- **Regulated (Small Luteal Cell vs. Constitutive (Large Luteal Cell**
- Peptide and protein hormones
 - Exocytosis such as oxytocin and neurophysin
 - Triggered by stimulatory signal such as releasing factors such as GnRH causes release of FSH and LH or Ca^{2+} induced release of oxytocin and neurophysin 1
- Steroid and thyroid hormones
 - Limited storage within fat droplets
 - Diffusion according to concentration gradient
 - Concentrations in blood and tissues depend on synthesis

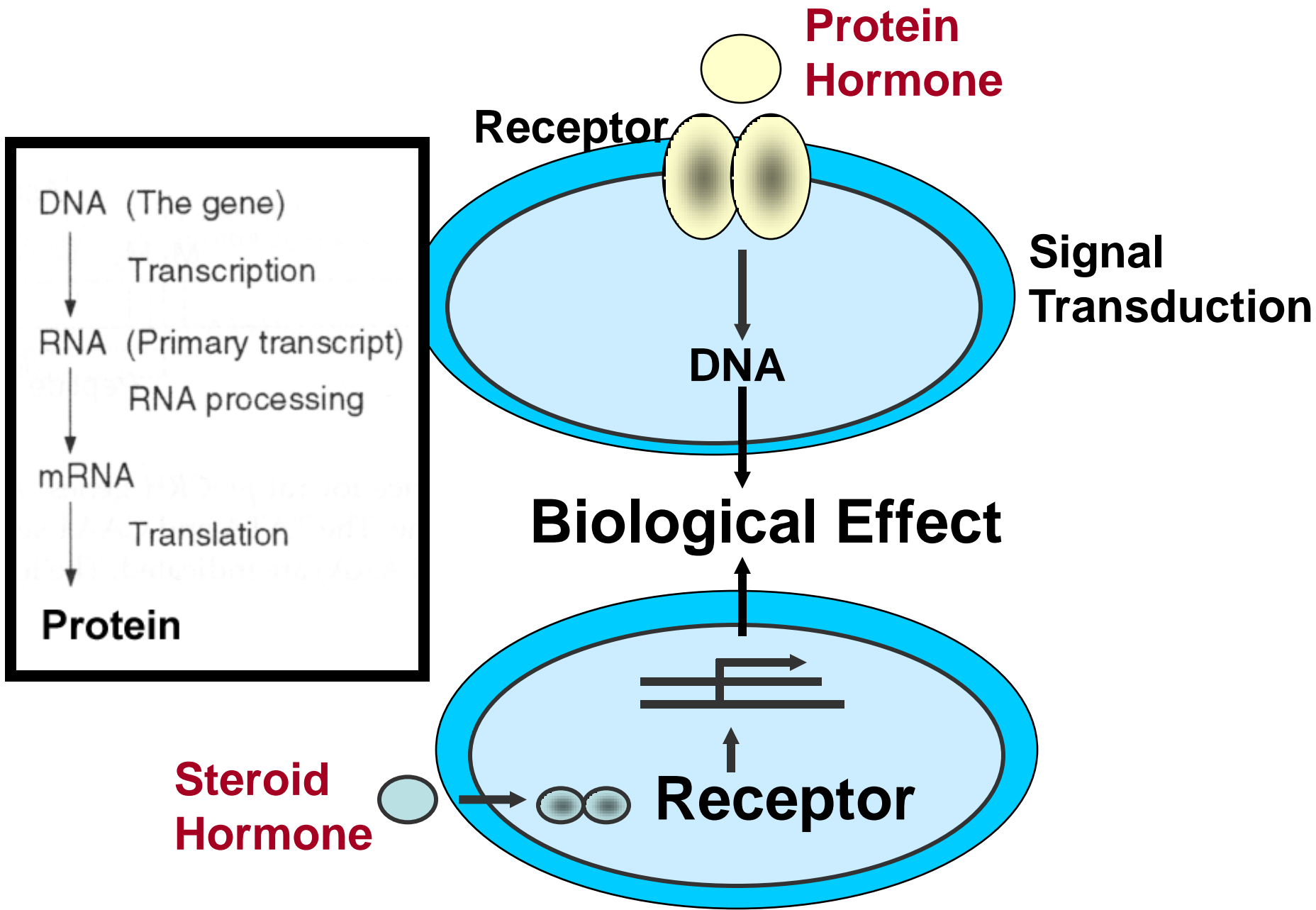
Stimulus for Secretion



Feedback Loop

Classic Feedback Systems





Steroid Hormone Action Overview

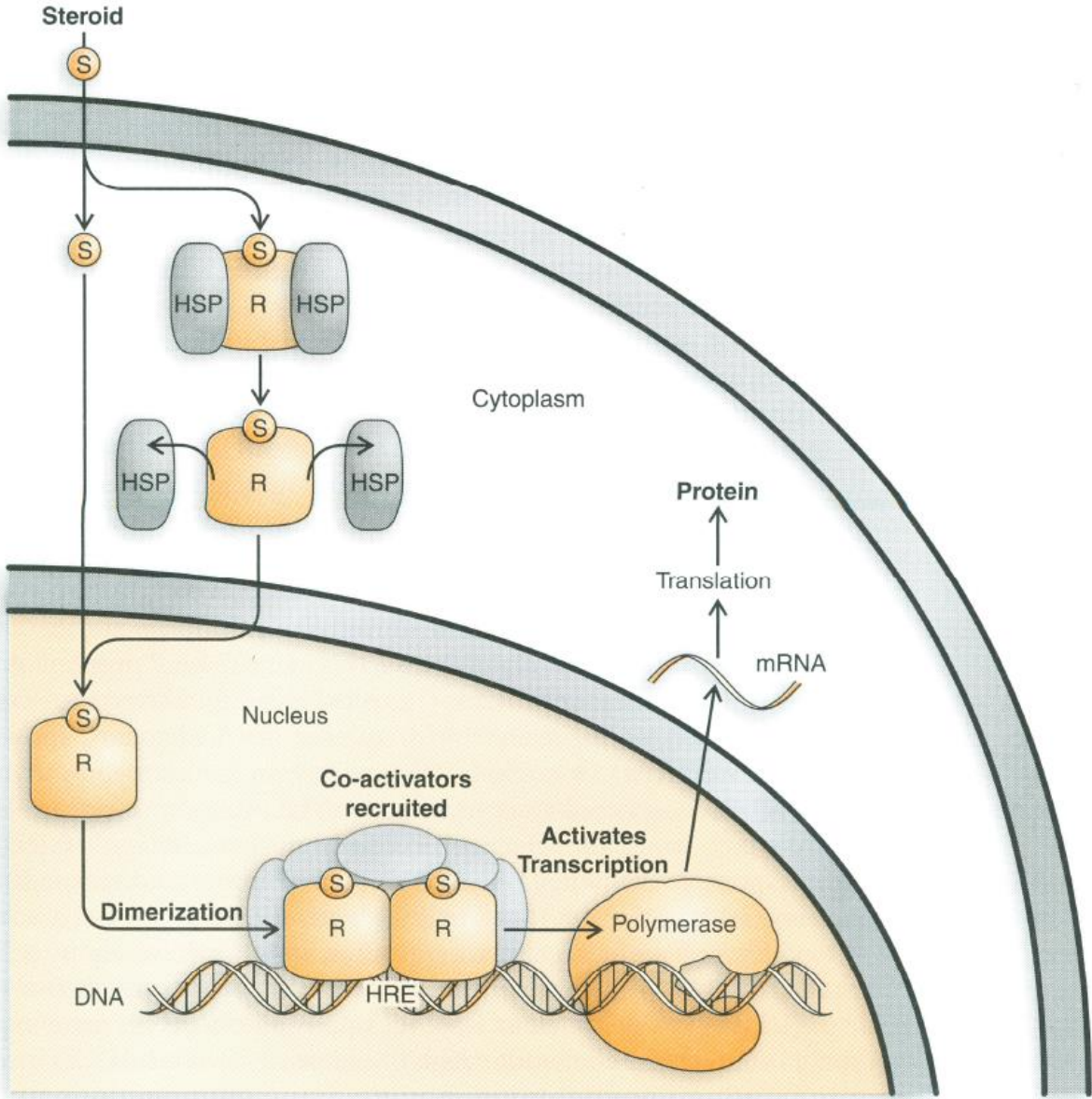


Figure 3.15
Mechanisms of steroid hormone action.

Genomic and Non-genomic Actions of Steroid Receptors

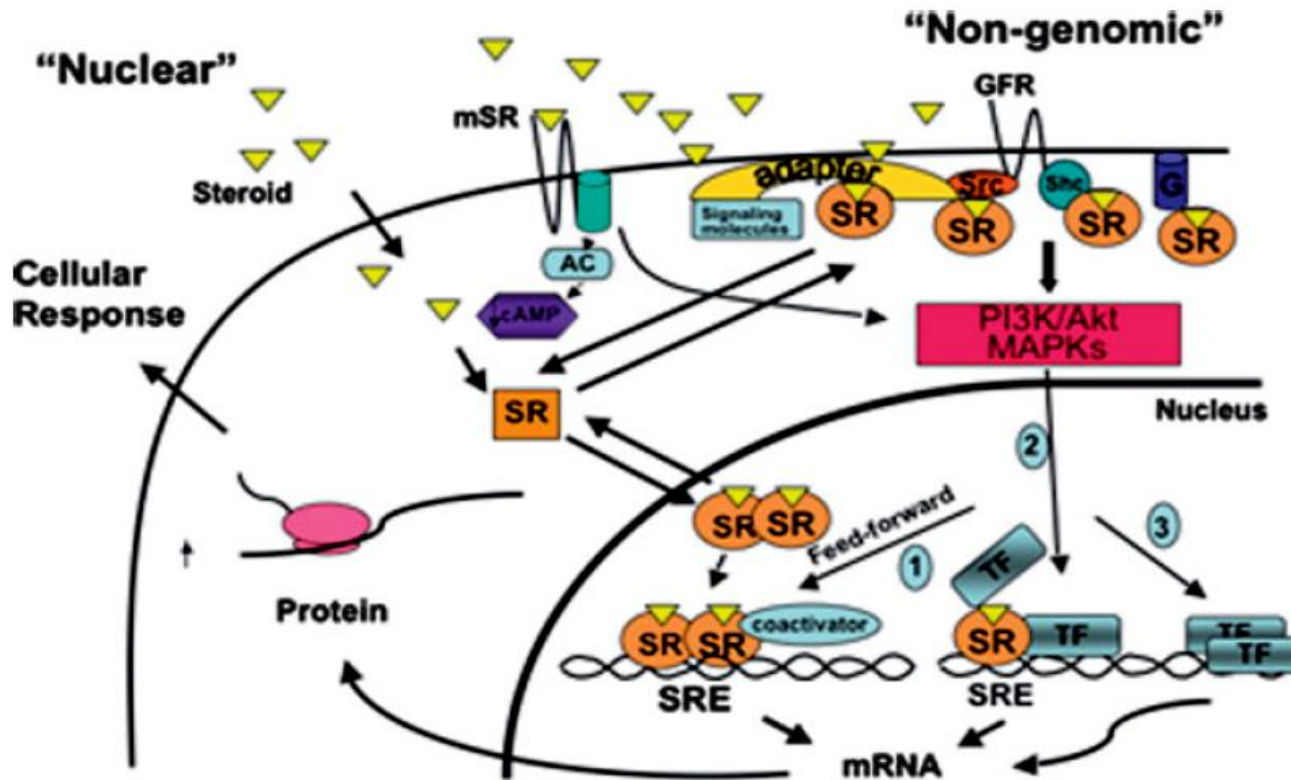


Figure 2 Nuclear transcriptional and non-genomic signaling pathways activated by sex steroid hormones. Sex steroids activate nuclear steroid hormone receptors (SR) by inducing receptor conformational changes, nuclear translocation, dimerization, and binding to steroid hormone response elements (SREs) in promoters/enhancers of target genes. Alternatively, a subpopulation of nuclear steroid receptors localized in cytoplasm/membrane can associate transiently with other signaling molecules including G protein-coupled receptor (GPCR; G), c-Src, Shc, adapter proteins (adapters), or membrane targeting proteins leading to activation of mitogen-activated protein kinase (MAPK) or phosphatidylinositol 3-kinase (PI3K)/Akt signaling cascades. Novel GPCR membrane receptors (mSR) unrelated to nuclear steroid receptors have been reported to also mediate rapid non-genomic effects of steroid hormones through inhibition of adenylate cyclase (AC) and cyclic adenosine monophosphate (cAMP) production and activation of MAPK. A biological consequence of sex steroid-induced activation of cytoplasmic signaling cascades is ultimately to influence gene transcription by three possible mechanisms. (1) A feed-forward regulatory loop whereby the nuclear transcriptional activity of SR or coactivators are enhanced by phosphorylation. (2) Signaling pathways that converge upon and activate target genes that require other transcription factors (TF) to cooperate with SRs either by tethering or by binding on composite SRE promoters. (3) Activation of other transcription factors independent of direct SR binding to DNA.

Hormone (Ligand) Receptors

- Hormones act on specific target tissues.
- How are target tissues “selected” by specific hormones?
 - Determined through **receptors on target cells** that provide the specificity for hormone-cell interactions
- Receptors may be **components of the cell membrane, cytosolic, or nuclear elements.**
- They are hormone-specific binding proteins.

Principles of Receptor Binding

- **1) Hormone specificity**
 - Receptors interact with (bind) a specific hormone
 - Hormones have a primary receptor, but may interact with less affinity with other receptors
 - Insulin receptor will interact with Insulin-Like Growth Factor 1
 - Androgen receptor (AR) will bind progestins
 - Glucocorticoid receptor (GR) will bind aldosterone
 - Testosterone will bind estrogen (ESR1) and glucocorticoid receptors (GR)
- **2) High affinity**
 - Receptor affinity is related to concentration of hormone which is requisite for specificity of receptors. The dissociation constant, K_D is the reciprocal of the affinity constant, K_A and is usually very low (1 nM to 10 pM)

Principles of Receptor Binding

- **3) Tissue Specificity**
 - Target tissues contain receptors that respond specifically to a hormone after it binds to its receptor.
 - The effector system must be operational and coupled to the receptor to elicit a response. That means that there must be a receptor to bind the ligand and that a secondary signal acts at the level of gene expression to elicit a response.
 - Some non-specific binding of hormone to a receptor may occur, but this type of binding is generally of low affinity with no hormonal or tissue specificity.

Principles of Receptor Binding

- **4) Saturable**
 - Usually one specific binding site per molecule
 - Should be a finite number of receptors
- **5) Reversible**
 - Hormone binding must be reversible.
 - The “on/off” rate is dependent on binding affinity



- **6) Must be related to biological effect**
 - Binding of hormone to receptor must elicit a cellular response.

Numbers of Receptors

- **Receptors are not static.**
- **Numbers change with cellular development or differentiation**
- **Hormones regulate their own (homospecific) or other (heterospecific) receptors.**
 - **Prolactin (PRL) upregulates prolactin receptors (PRLR).**
 - **Chronic exposure of lymphocytes to insulin decreases binding due to down-regulation of insulin receptor which decreases the biological effect of insulin**
 - **Long-term exposure to progesterone down-regulates progesterone receptors (PGR) which then allows up-regulation of estrogen receptors (ER) in the uterus.**
 - **Estrogen, on the other hand, up-regulates expression of several receptors such as PGR, ESR1, and Oxytocin Receptor (OXTR)**

Spare Receptors

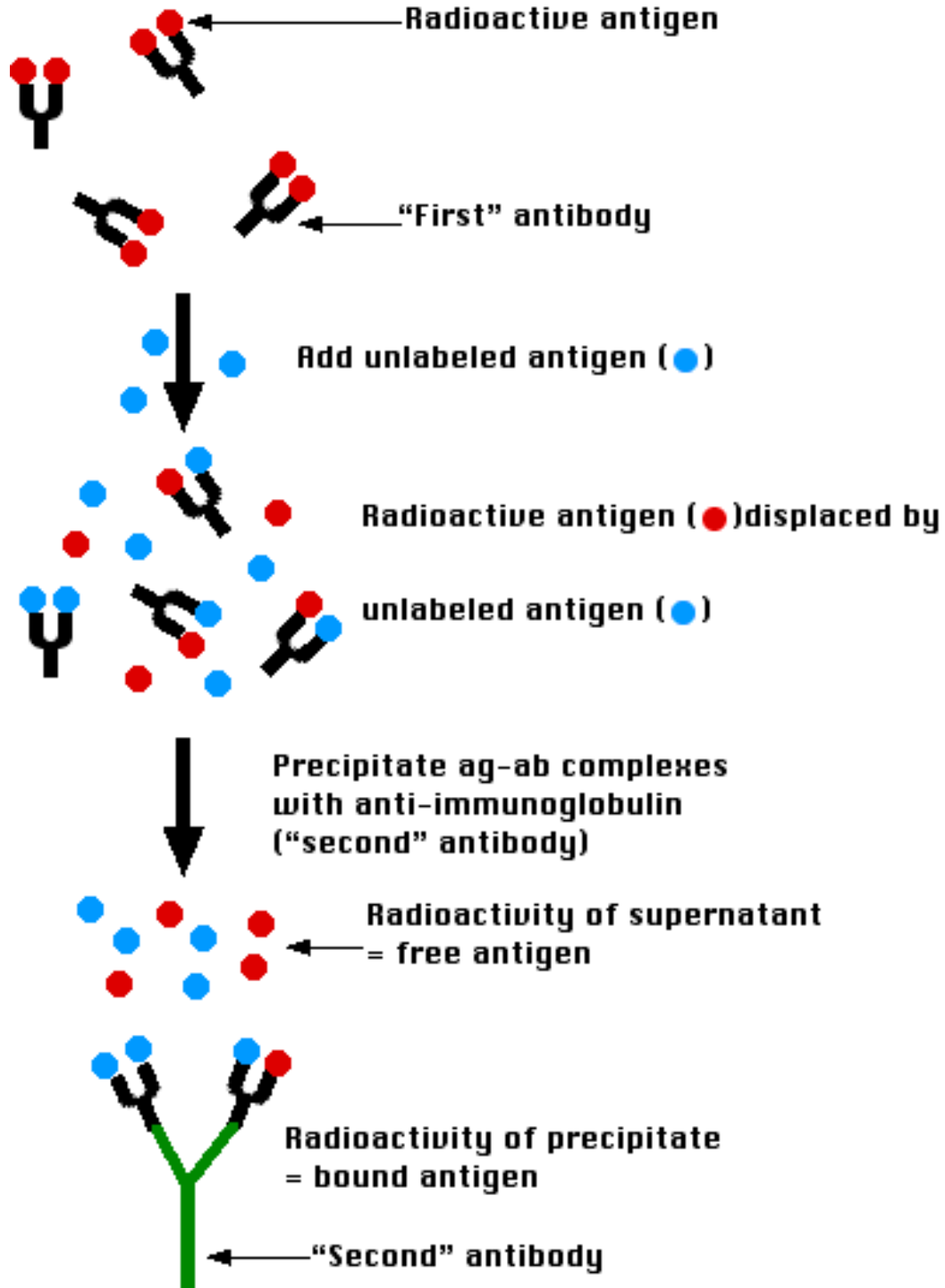
- **Most maximal biological responses are achieved when only a small percentage of receptors is occupied, perhaps 10%.**
- **Remaining receptors: spare or excess receptors**
- **The spare receptors may increase the sensitivity of target cells to activation by low levels of hormone**
 - **Maximal stimulation of steroidogenesis by Leydig cells occurs when only 1% of LHCGR receptors are occupied.**

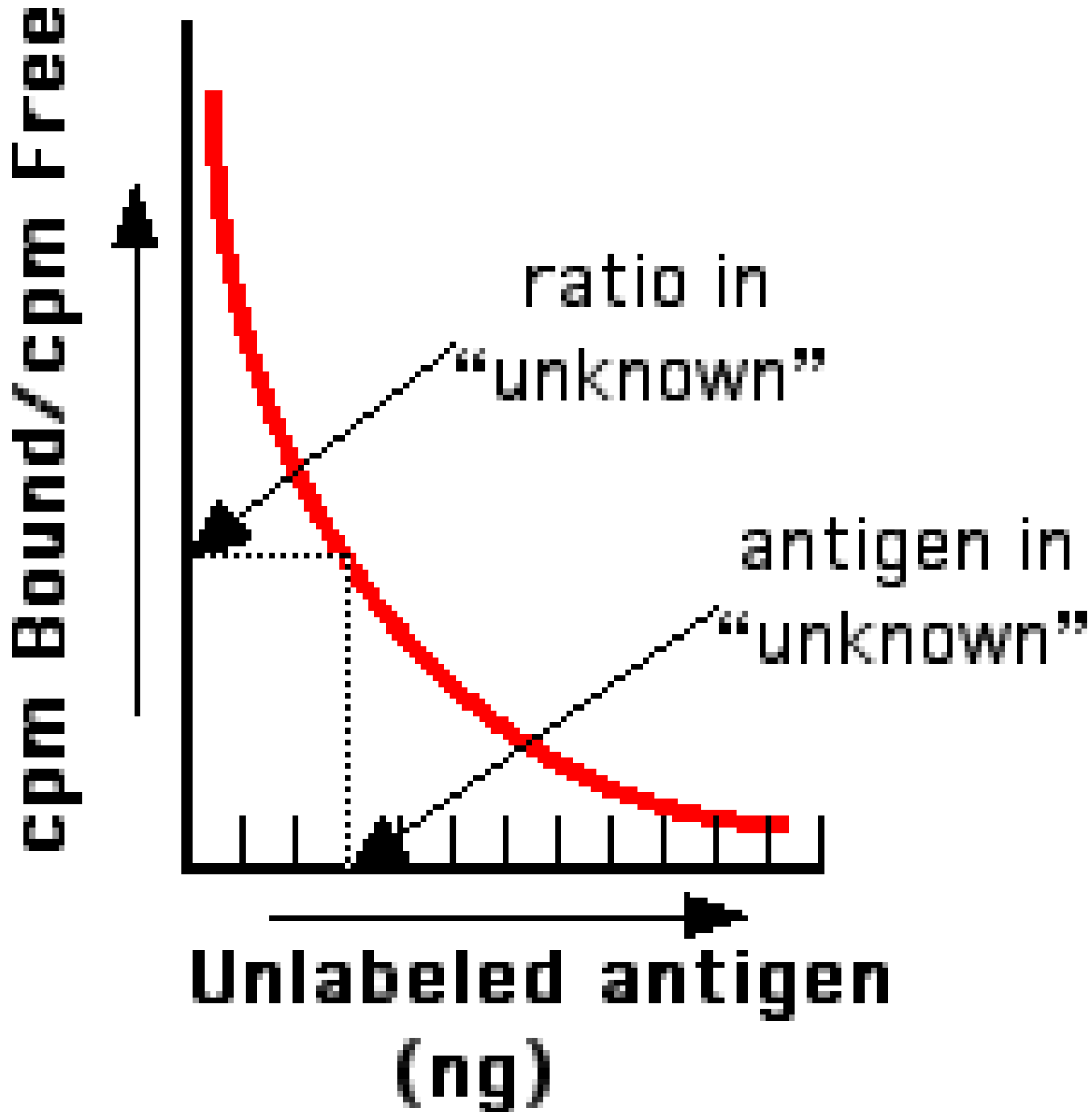
Principles of Receptor Binding

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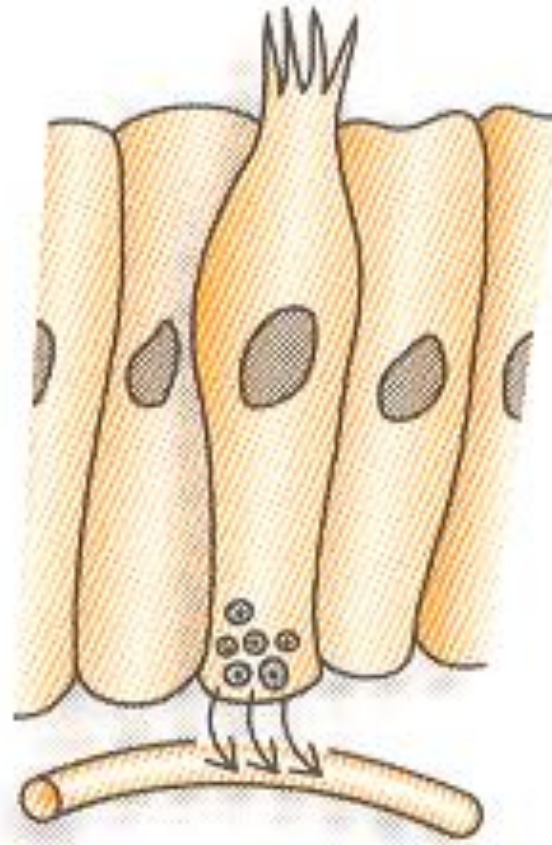




Modes of hormone action

- **Endocrine: hormone is bloodborne**

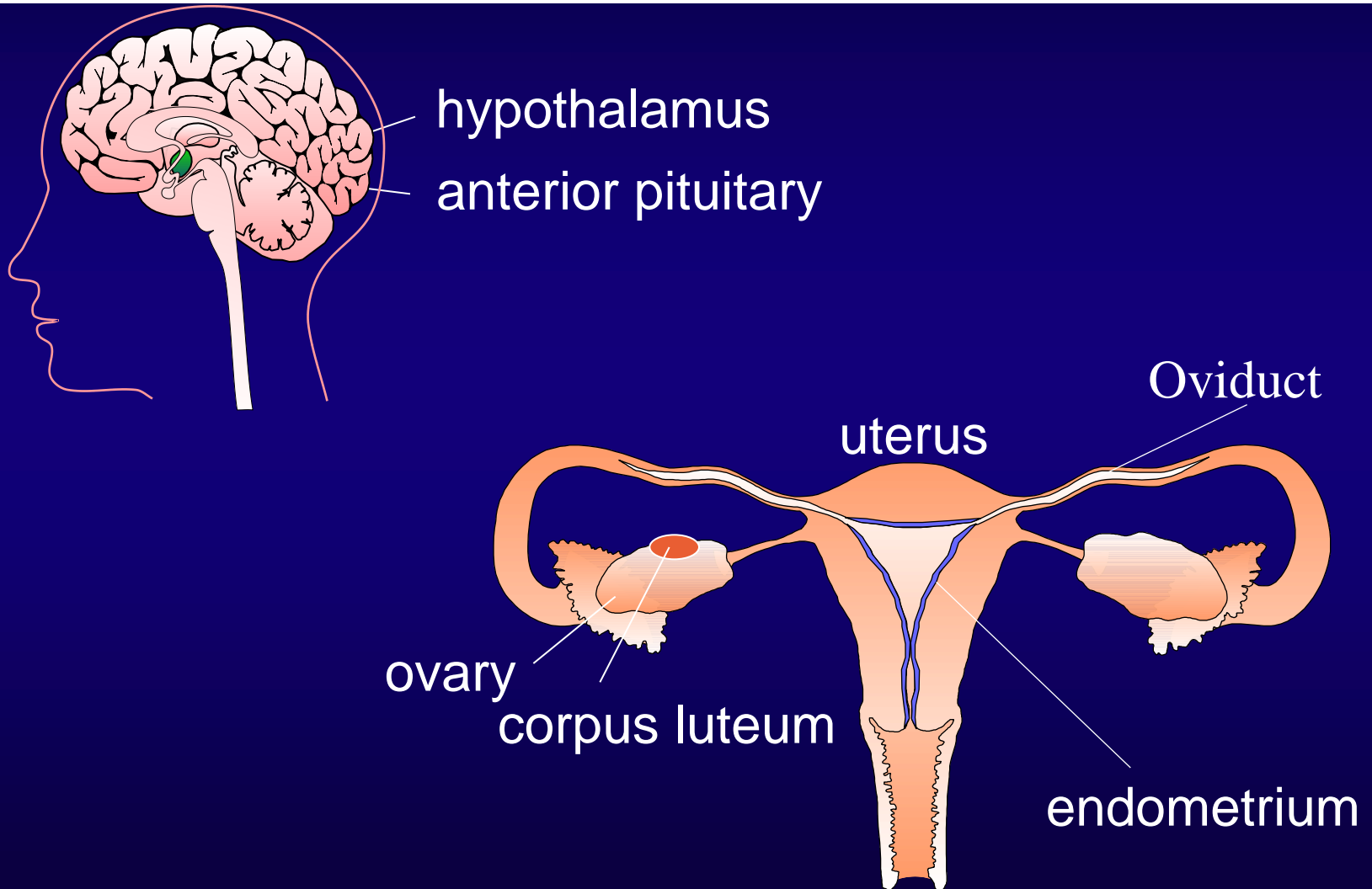
Endocrine



Transport and Metabolism of Hormones

- Circulate freely (water soluble)
 - Amines, peptides, proteins
- Bound to a carrier protein
 - Steroids and thyroid hormones
 - IGFs
- Albumin non-selectively transports low MW hormones
- Globulins are specific transport proteins that have high affinity, saturable binding sites for hormones
 - TBG (thyroid hormone-binding globulin)
 - TeBG (testosterone-binding globulin)
 - CBG (cortisol-binding globulin)
- Binding proteins and globulins affect half-life and clearance rate
- Liver and kidneys perform the bulk of hormone clearance via hydrolysis, oxidation, hydroxylation, methylation, decarboxylation, sulfation and glucuronidation.
 - Less than 1% of any hormone is excreted intact in urine or feces

Organs involved in female reproductive cycle

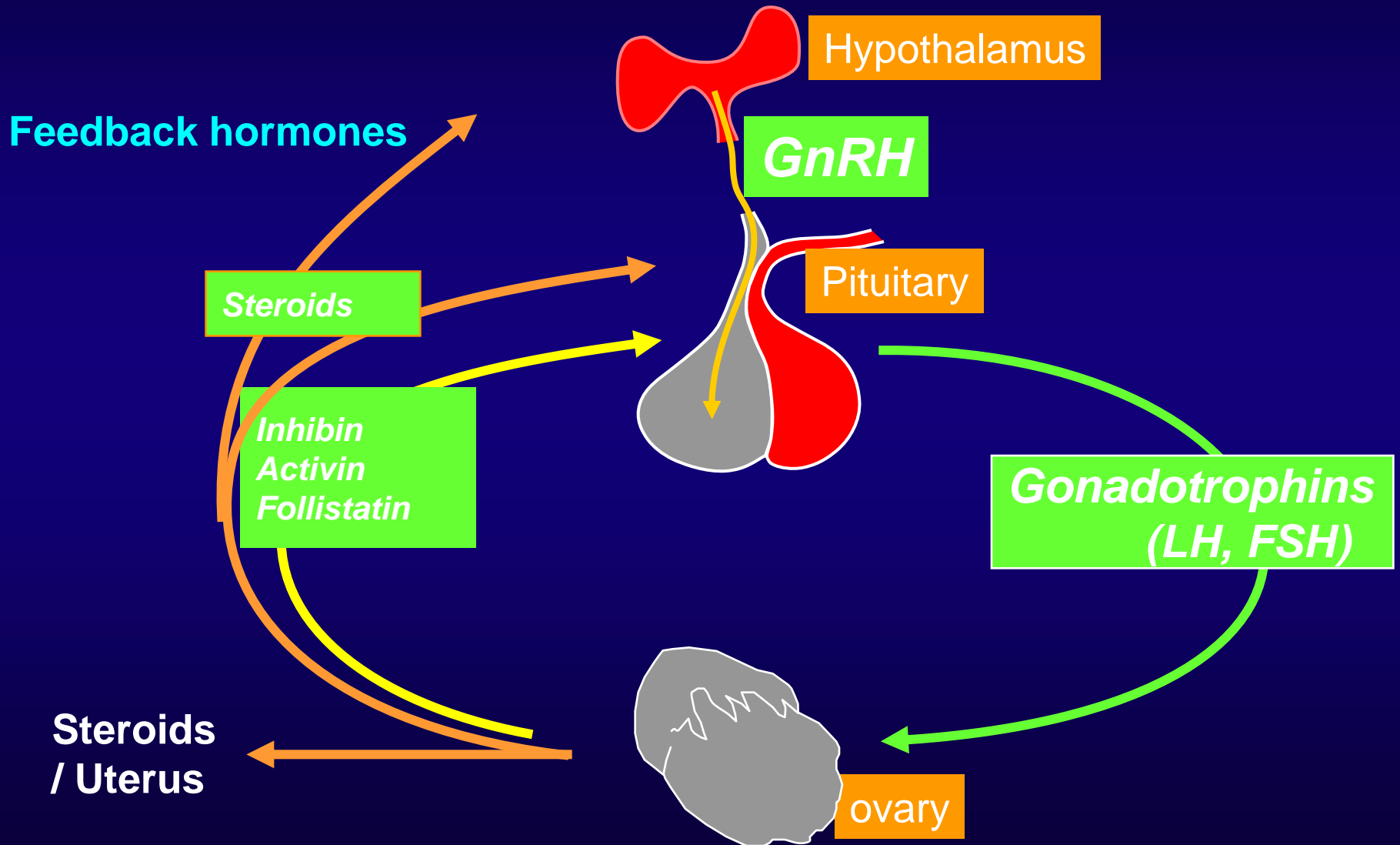


Major hormones regulating the female reproductive cycle

Hormone	Site of production
➤ gonadotropin-releasing hormone - GnRH	hypothalamus
➤ luteinizing hormone - LH	} anterior pituitary (gonadotroph)
➤ follicle stimulating hormone - FSH	
➤ estradiol 17 β (E2)	ovarian follicle
➤ Progesterone (P4)	corpus luteum

After ovulation, cells of dominant follicle give rise to the CL

The female hypothalamo-pituitary ovarian axis



Estrous cycles consist of two major phases

Follicular phase

Ovarian **FOLLICLES** - dominant structures in the ovary

ESTROGEN is the dominant hormone

Luteal phase

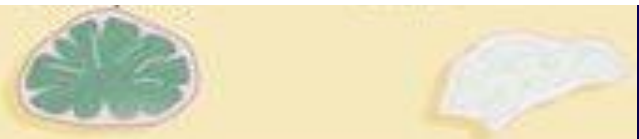
CORPORA LUTEA – dominant ovarian structures

PROGESTERONE is the dominant hormone

Follicles grow

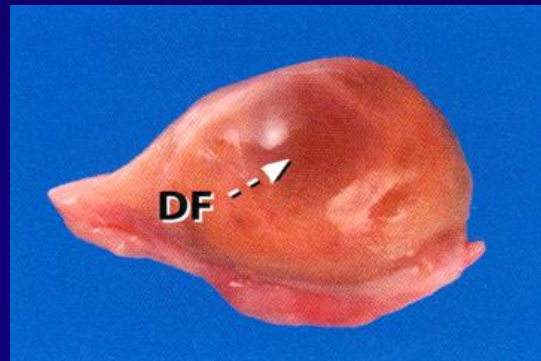


Corpus luteum develops / regresses



The estrous cycle has 4 stages

- **Pro-estrus** – formation of ovulatory follicles + E2 secretion



- **Estrus** – sexual receptivity + peak E2 secretion + ovulation
- **Metestrus** – CL formation + early P4 secretion
- **Diestrus** – substantial secretion of P4

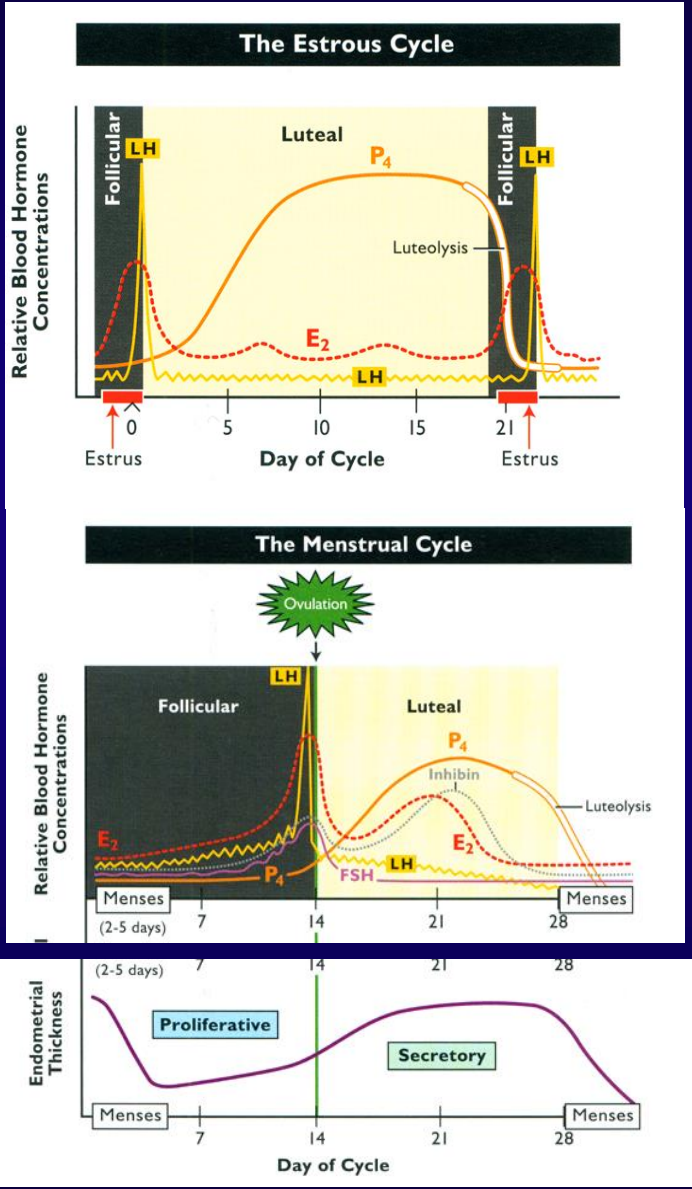
➤ In women, the two phases are of equal length

➤ The phases are named for the changes that occur in the endometrium

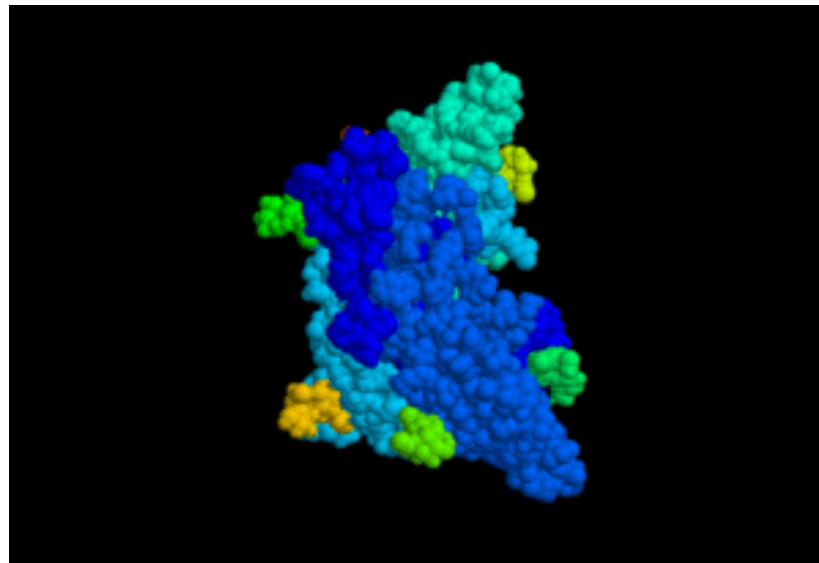
➤ Follicular phase = proliferative phase

➤ Luteal phase = secretory phase

➤ Subprimates: Proestrus, Estrus, Metestrus and Diestrus



FSH

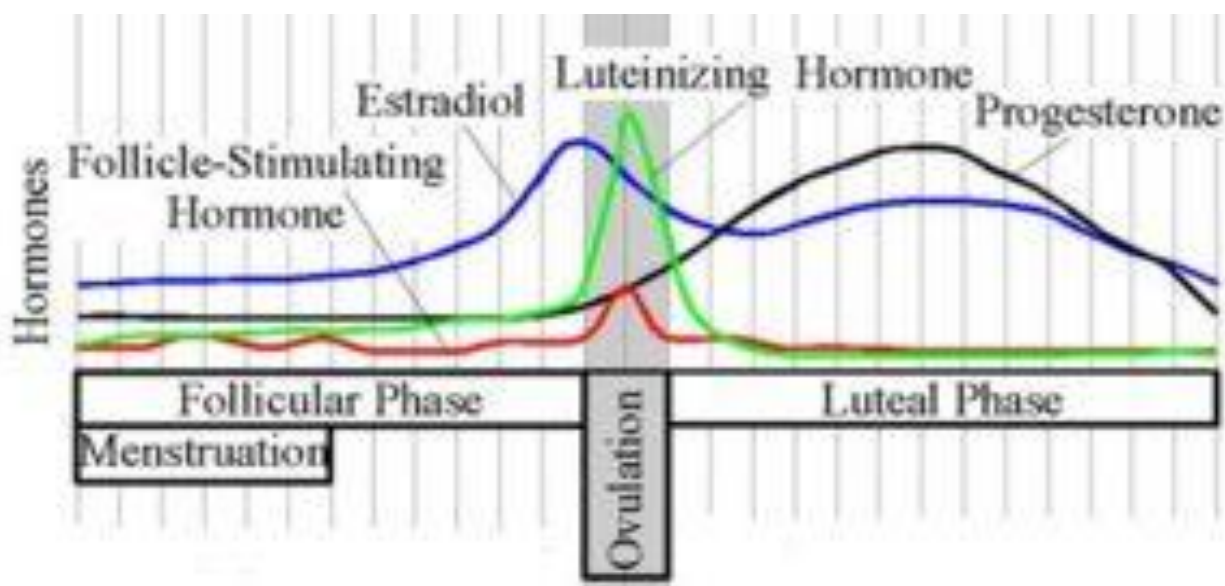


FSH is a [glycoprotein](#). Each monomeric unit is a protein molecule with a sugar attached to it; two of these make the full, functional protein. Its structure is similar to [LH](#), [TSH](#), and [hCG](#). The protein dimer contains 2 polypeptide units, labelled alpha and beta subunits. The [alpha subunits](#) of LH, FSH, TSH, and hCG are identical, and contain 92 [amino acids](#). The beta subunits vary. FSH has a beta subunit of 118 amino acids (FSHB) that confers its specific biologic action and is responsible for interaction with the [FSH-receptor](#). The sugar part of the hormone is composed of [fucose](#), [galactose](#), [mannose](#), [galactosamine](#), [glucosamine](#), and [sialic acid](#), the latter being critical for its biologic [half-life](#). The half-life of FSH is 3-4 hours.

Functions of FSH in Female and Male

- In both *males* and *females*, FSH stimulates the maturation of germ cells
 - FSH $-/-$ mice have no phenotype
- In *males*, FSH induces Cells of Leydig to Secrete Inhibin
- Inhibin stimulates the formation of sertoli-sertoli tight junctions (zonula occludens) to form blood-testis barrier
- In *females*, FSH initiates follicular growth and maturation and stimulates granulosa cells to secrete inhibin and follistatin

LH



LH is a dimeric glycoprotein with 2 polypeptide units, alpha and beta, connected by two disulfide bridges. alpha subunits of LH, FSH, TSH, and hCG are identical, and contain 92 amino acids.

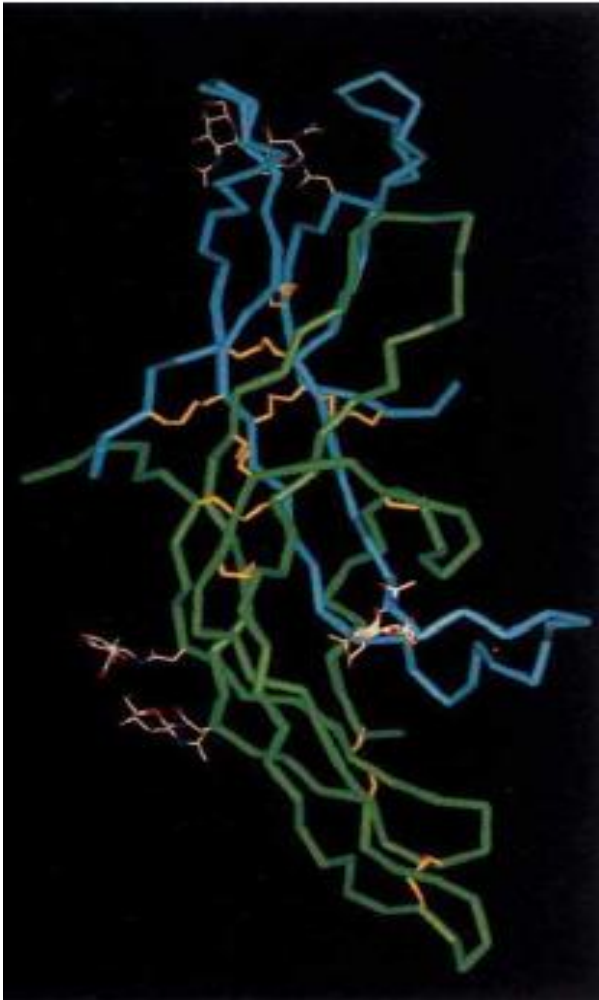
beta subunits: LH beta subunit of 121 amino acids confers specific biologic action and binding to LH receptor. This beta subunit identical to beta sub unit of hCG and both bind LH receptor, but hCG beta subunit contains an additional 24 amino acids

half-life of LH is 20 minutes, shorter than that of FSH (3-4 hours) or hCG (24 hours).

Classes and chemical structures of hormones

- **Proteins – dimeric structure**

- Glycoprotein hormones
(LH, FSH, hCG, TSH)



- Common alpha, but specific beta chain
- Product of distinct genes

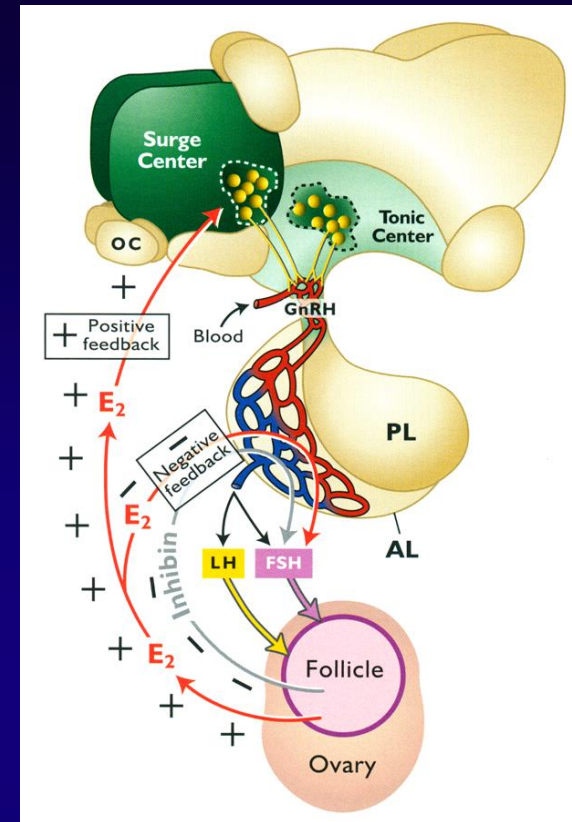
Crystal structure of human chorionic gonadotropin (hCG). The alpha subunit is shown in blue and the beta subunit in green. (hydrogens bonds - red dotted lines, and disulfide atoms and bonds – yellow are shown). Laphorn et al. (1994) Nature 369: 338.

Roles of LH

- LH induces ovulation of mature Graffian follicles on the ovaries of females to:
 - Release oocyte into oviduct for fertilization
 - Induce luteinization of granulosa and theca cells of the ovarian follicle which form a corpus luteum and produce progesterone
 - Stimulate production of progesterone by corpus luteum
 - Progesterone essential for endometrium to support implantation of blastocyst and maintain pregnancy
 - Chorionic gonadotrophin produced by trophoctoderm of primate conceptuses has LH activity and is the pregnancy recognition signal in primates

Primary steps required for the pre-ovulatory LH surge

- In follicular phase GnRH pulse frequency increases to increase secretion of FSH and LH
- Increase in Estrogen (E₂) production
- E₂ stimulates:
 - increases in GnRH Receptors on Gonadotrophs;
 - increase in GnRH pulse frequency
 - surge in GnRH responsible for the ovulatory surge of LH
- Granulosa cells of follicles secrete inhibin to suppress secretion of FSH



HORMONES FROM GRANULOSA CELLS OF FOLLICLE AND SERTOLI CELLS OF TESTES THAT REGULATE FSH SECRETION

Inhibin: a peptide inhibitor of FSH synthesis and secretion participates in regulation of estrous and menstrual cycles.

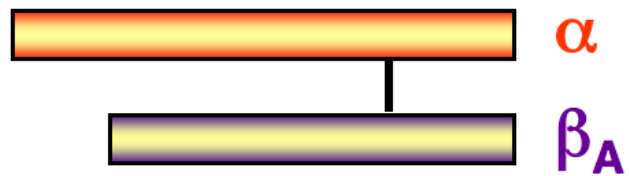
Structure: contains an alpha and beta subunit linked by disulfide bonds. Two forms of inhibin differ in their beta subunits (A or B), while alpha subunits are identical. Inhibin belongs to the transforming growth factor- β (TGF- β) superfamily.

Activin: a peptide stimulator of FSH synthesis and secretion participates in regulation of estrous and menstrual cycles

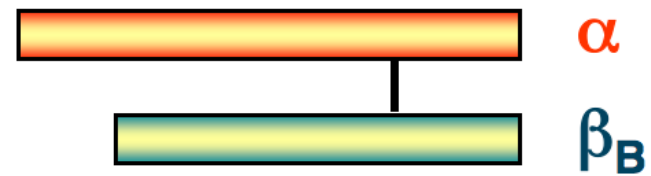
Structure: two beta subunits identical to the two beta subunits (A or B) of inhibin, allowing for the formation of three forms of activin: A, AB, and B; linked by a single covalent disulfide bond.

Follistatin: a single chain gonadal protein that inhibits FSH synthesis and release by binding and antagonizing Activin.

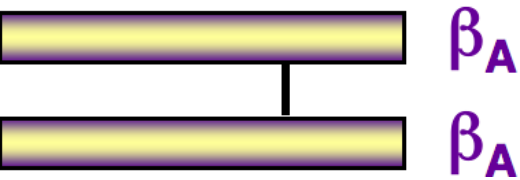
Inhibin A



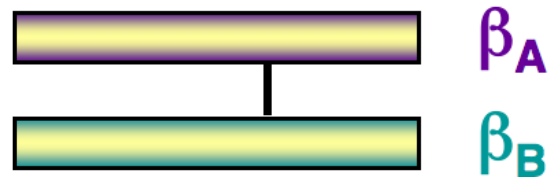
Inhibin B



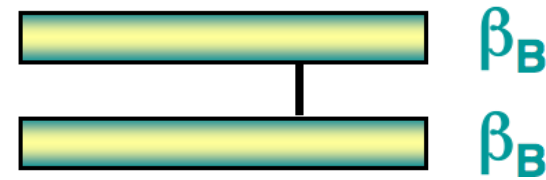
Activin A

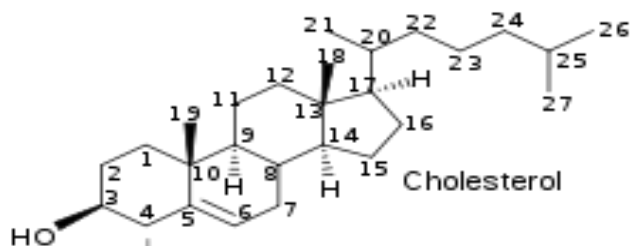


Activin AB

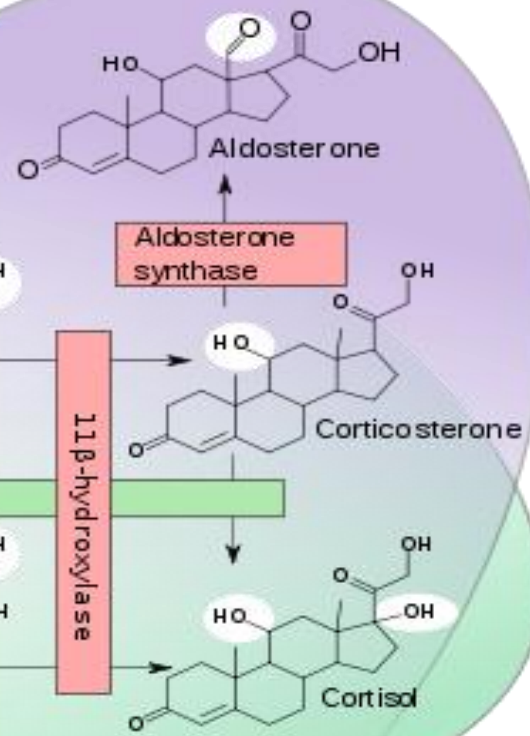


Activin B

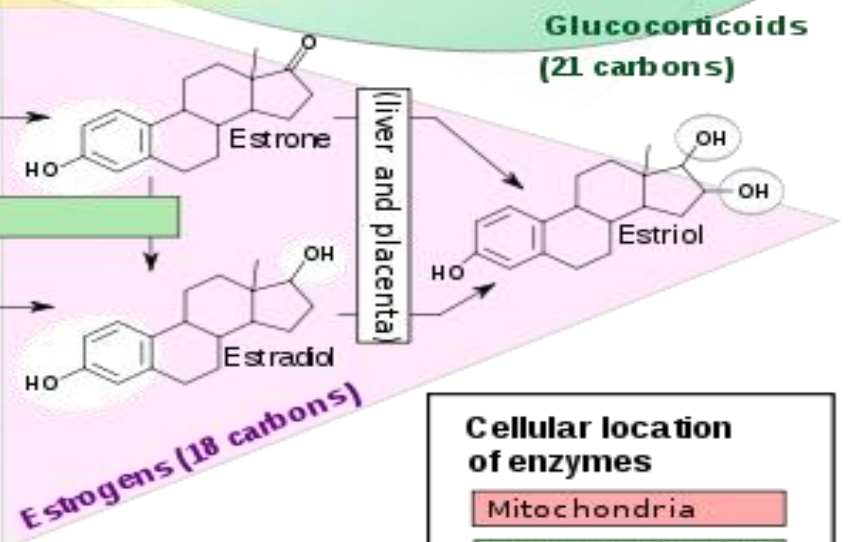




Mineralocorticoids (21 carbons)



Glucocorticoids (21 carbons)



Estrogens (18 carbons)

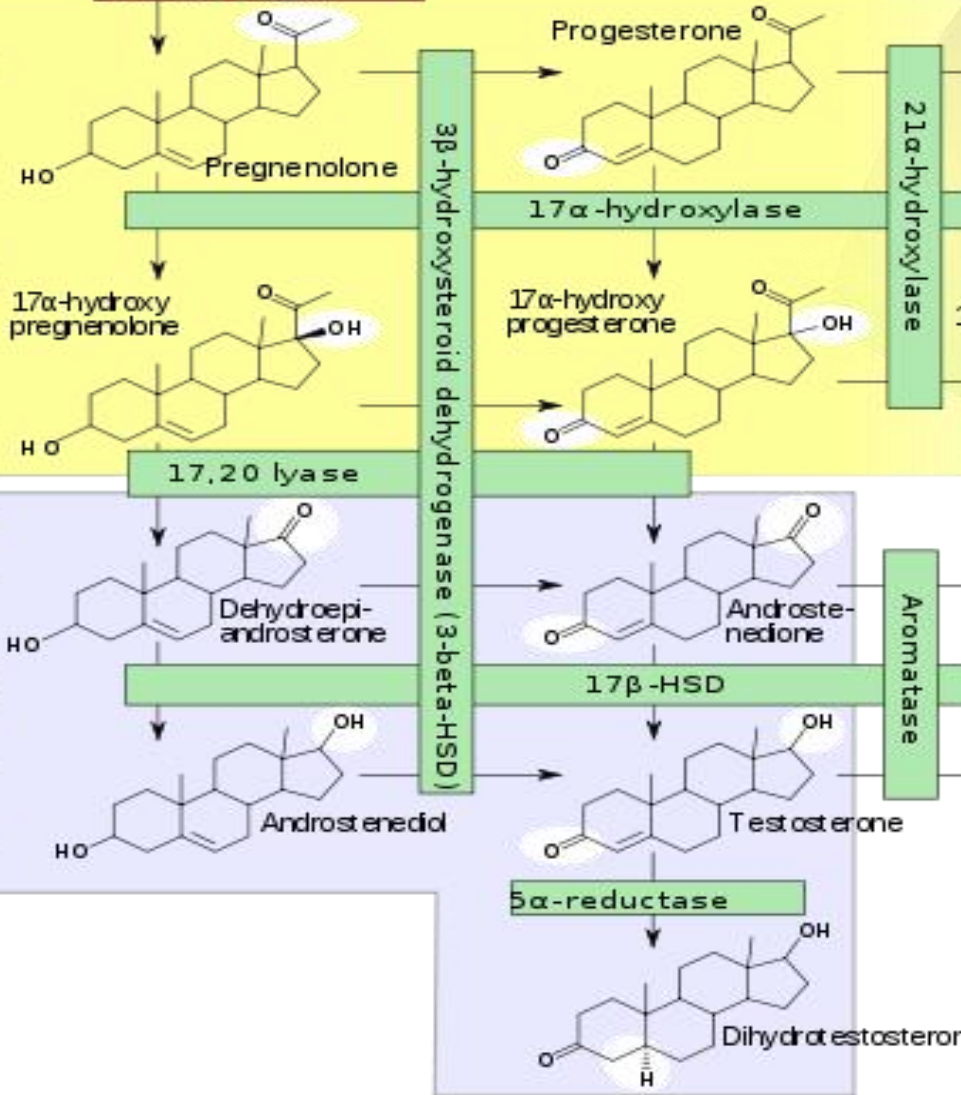
Cellular location of enzymes

- Mitochondria
- Smooth endoplasmic reticulum

Cholesterol side-chain cleavage enzyme

Progestagens (21 carbons)

Androgens (19 carbons)



Steroid Hormone Action: Classical

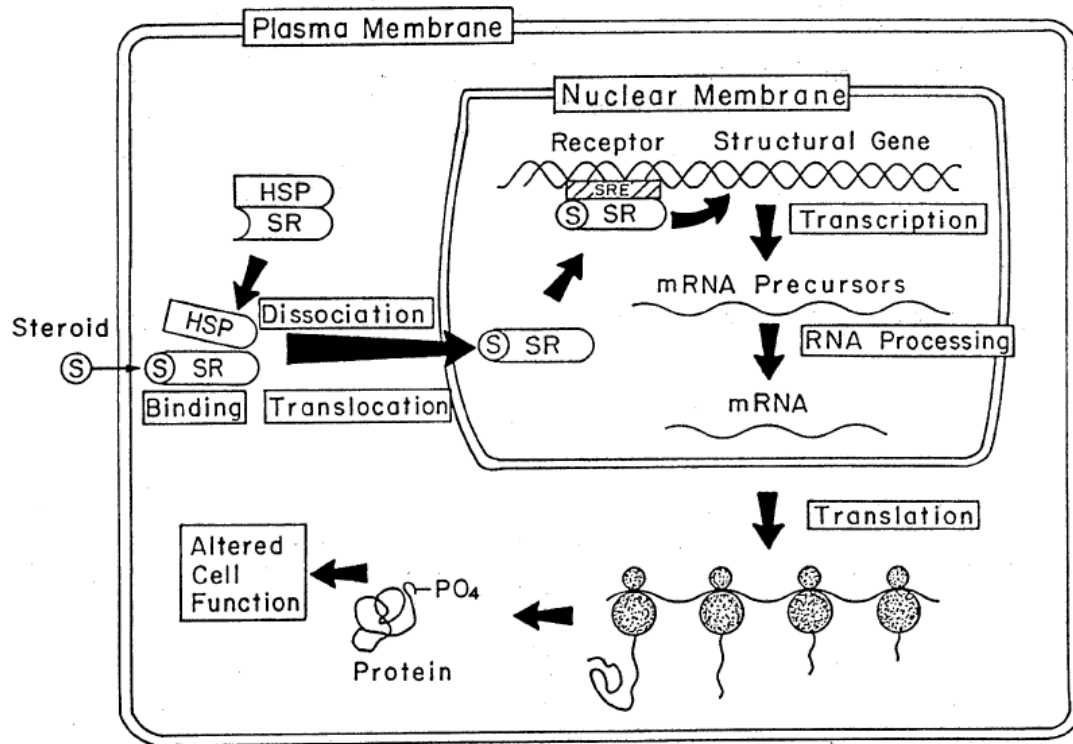


Figure 2-19. Proposed mechanism of action of steroids (glucocorticoids, estrogens, and progesterone) in activation of specific gene transcription. In this model the steroid (S) readily diffuses across the plasma membrane and binds to a cytosolic receptor (SR). In the absence of steroid, the receptor resides in the cytoplasm as an inactive complex with heat shock protein (hsp). When the steroid binds to the receptor, the hsp dissociates from it. The steroid-receptor complex is translocated to the nucleus, where it binds to a chromatin receptor consisting of the steroid receptor response DNA element (SRE), thereby activating the transcription of specific genes involved in steroid hormone action. RNA transcripts are translated into proteins that mediate changes in cell function. Some evidence suggests an alternative model in which steroid receptor resides in the nucleus and not in the cytoplasm. In this model, presumably, steroid diffuses through the cytoplasm into the nucleoplasm, where it binds to the receptor before gene activation occurs. (Adapted from Chan L, O'Malley BW. Mechanism of action of the sex steroid hormones. Reprinted by permission of The New England Journal of Medicine 1976; 294:1322-1328, 1372-1382, 1429-1437.)

Steroid Hormone Action Overview

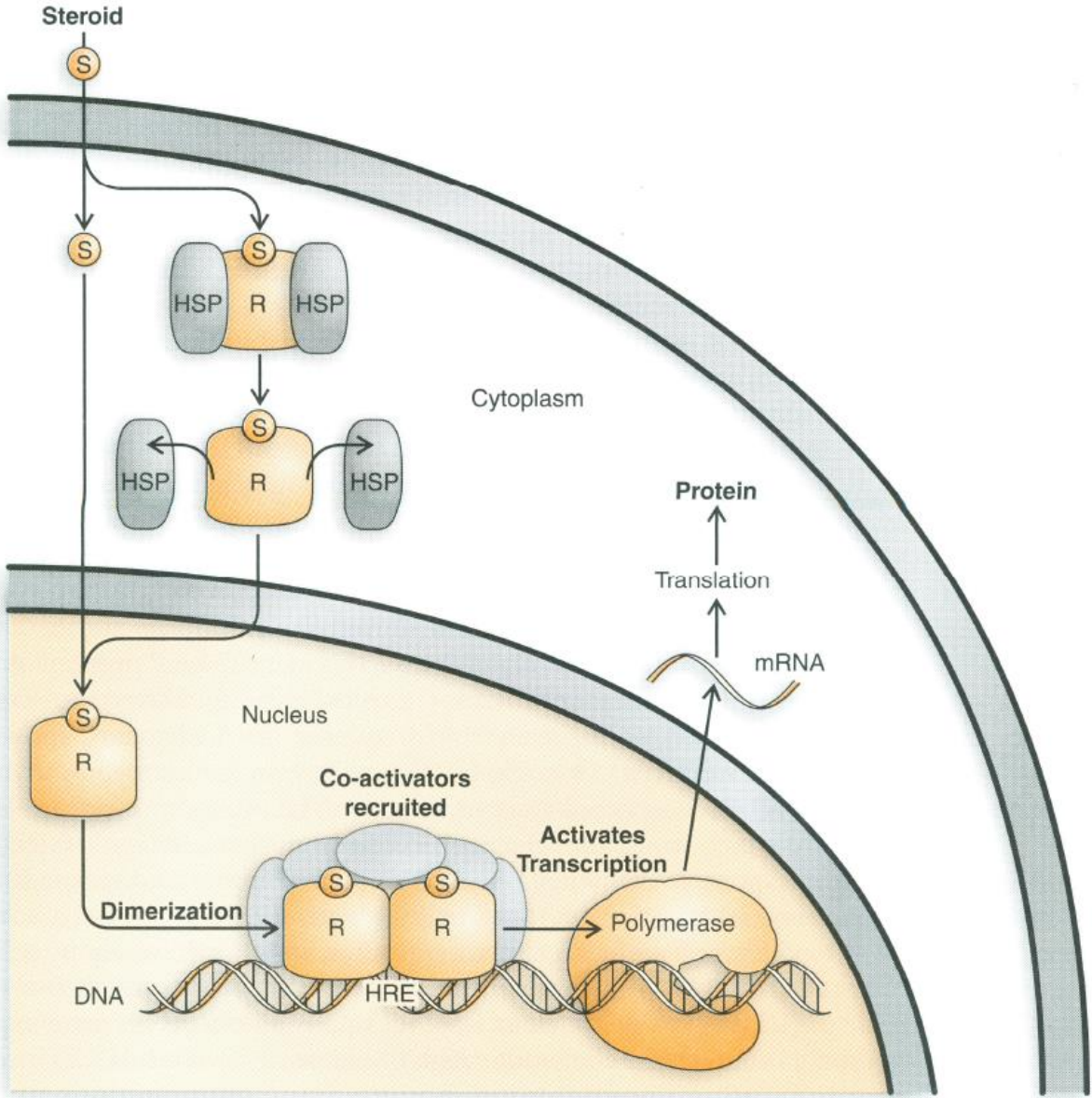


Figure 3.15
Mechanisms of steroid hormone action.

Cyclic AMP Production and Action

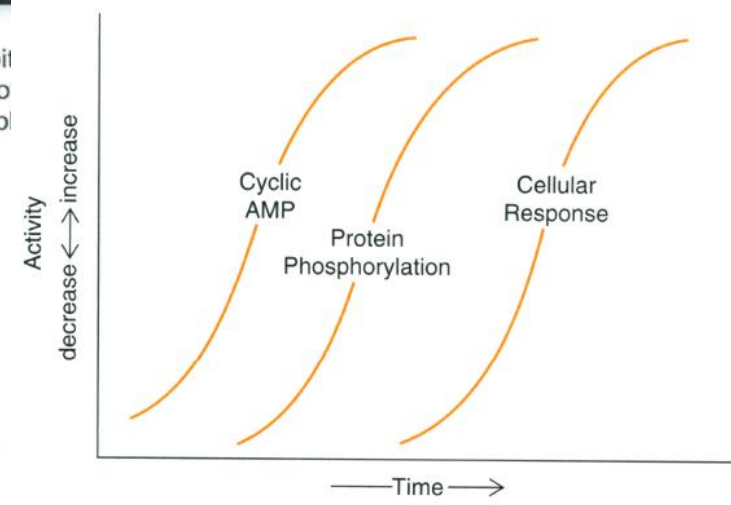
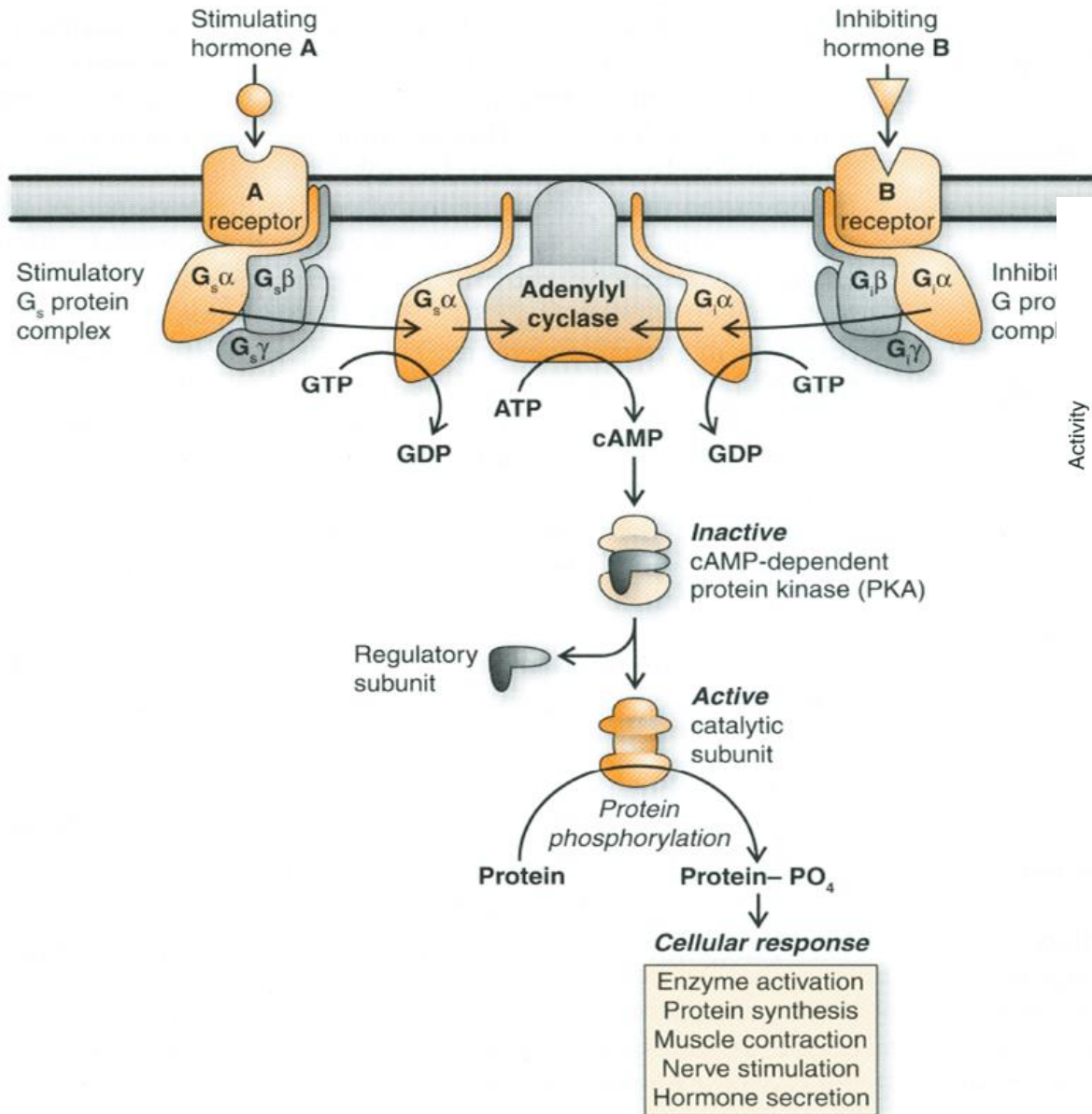
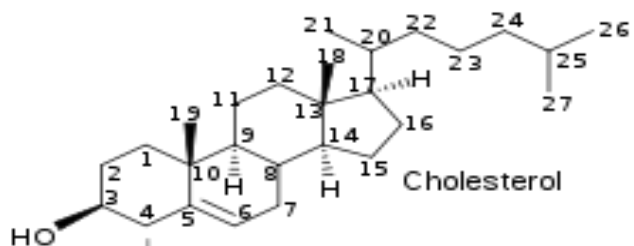
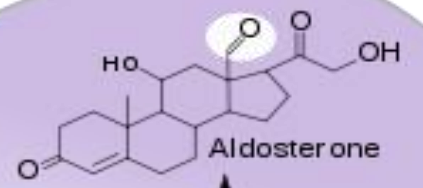


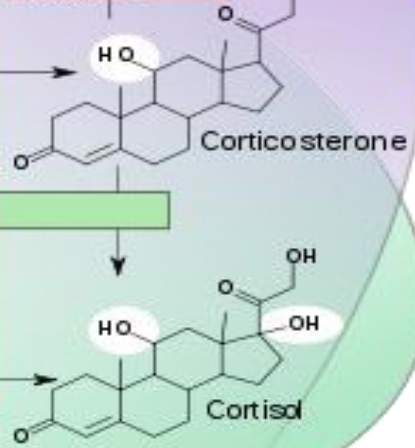
Figure 3.8 Temporal cellular events in hormone-mediated cyclic AMP production and action.



Mineralocorticoids (21 carbons)

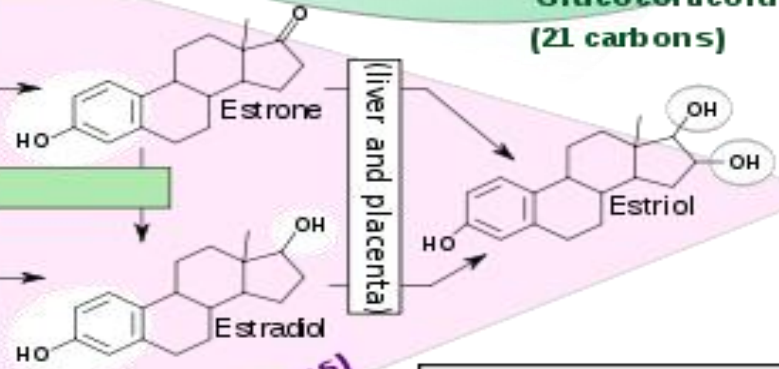


Aldosterone synthase



Glucocorticoids (21 carbons)

Estrogens (18 carbons)

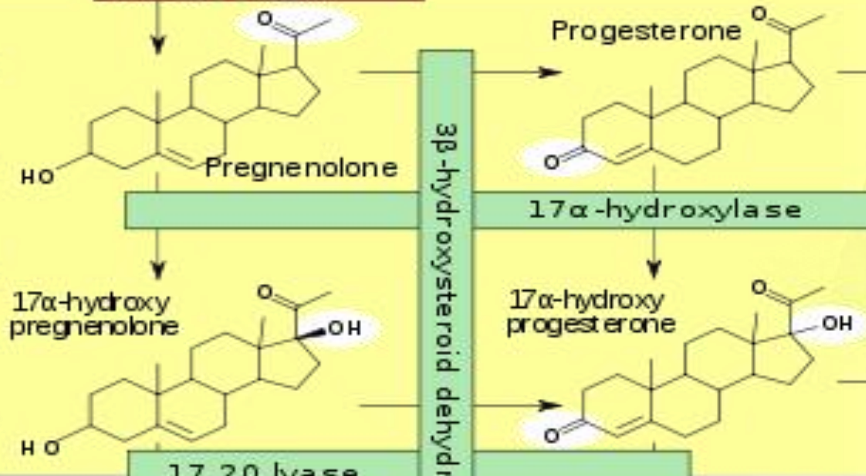


Cellular location of enzymes

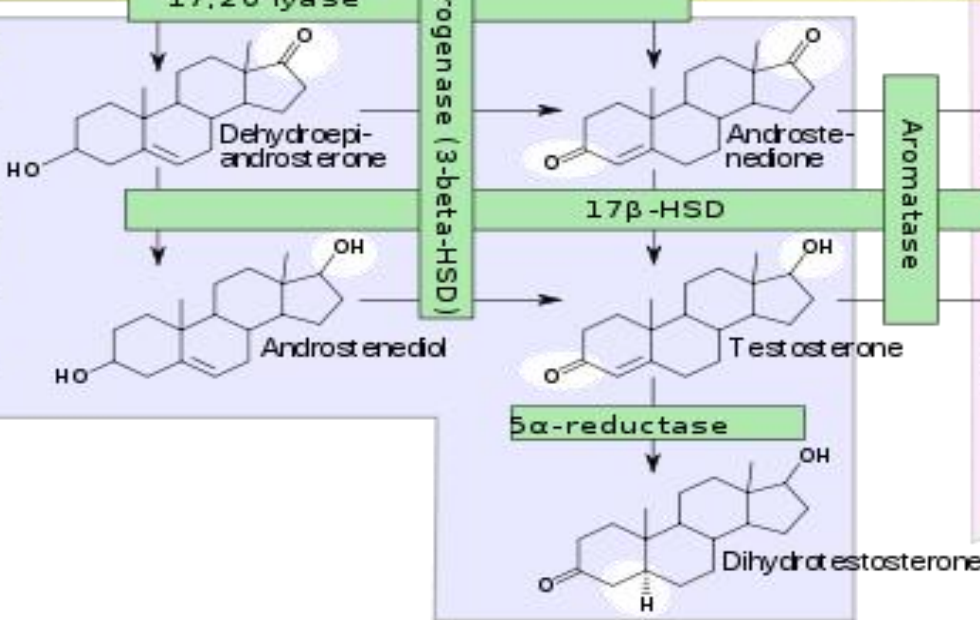
- Mitochondria
- Smooth endoplasmic reticulum

Cholesterol side-chain cleavage enzyme

Progestagens (21 carbons)



Androgens (19 carbons)



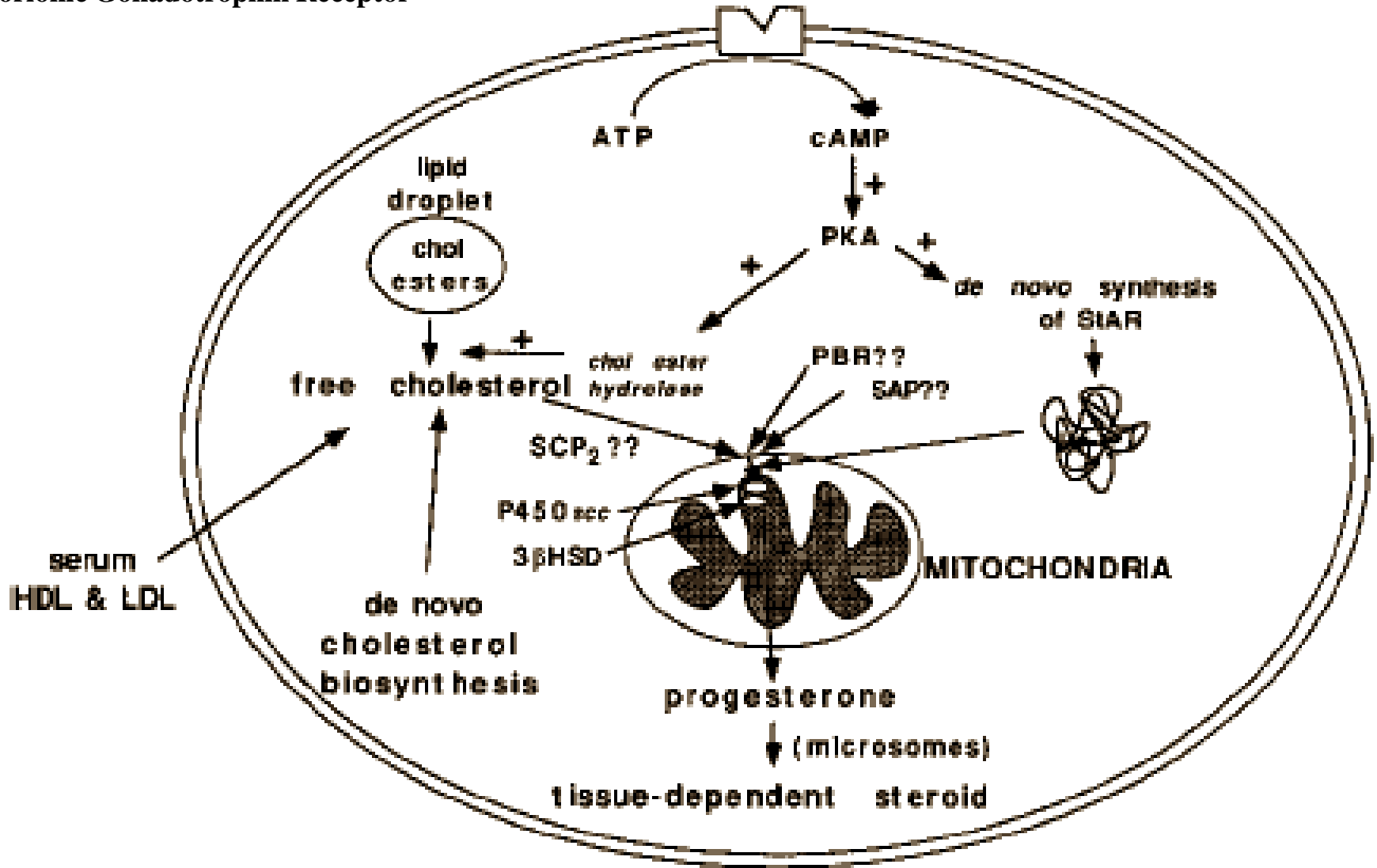
SCP2: Sterol Carrier Protein

StAR – Steroid Acute Regulatory Protein

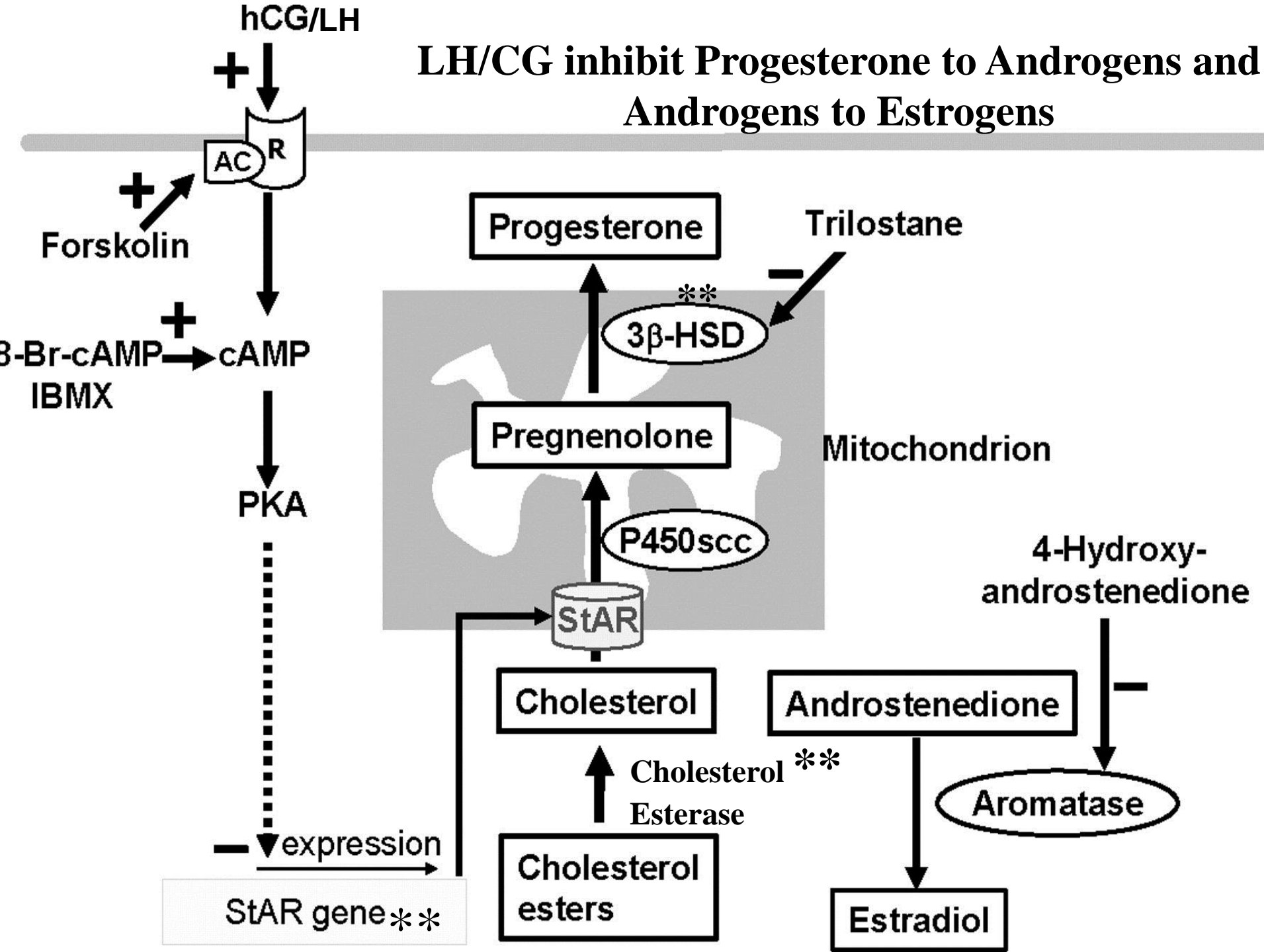
LHCGR: Luteinizing Hormone
Chorionic Gonadotrophin Receptor

Trophic Hormone **LH, FSH**

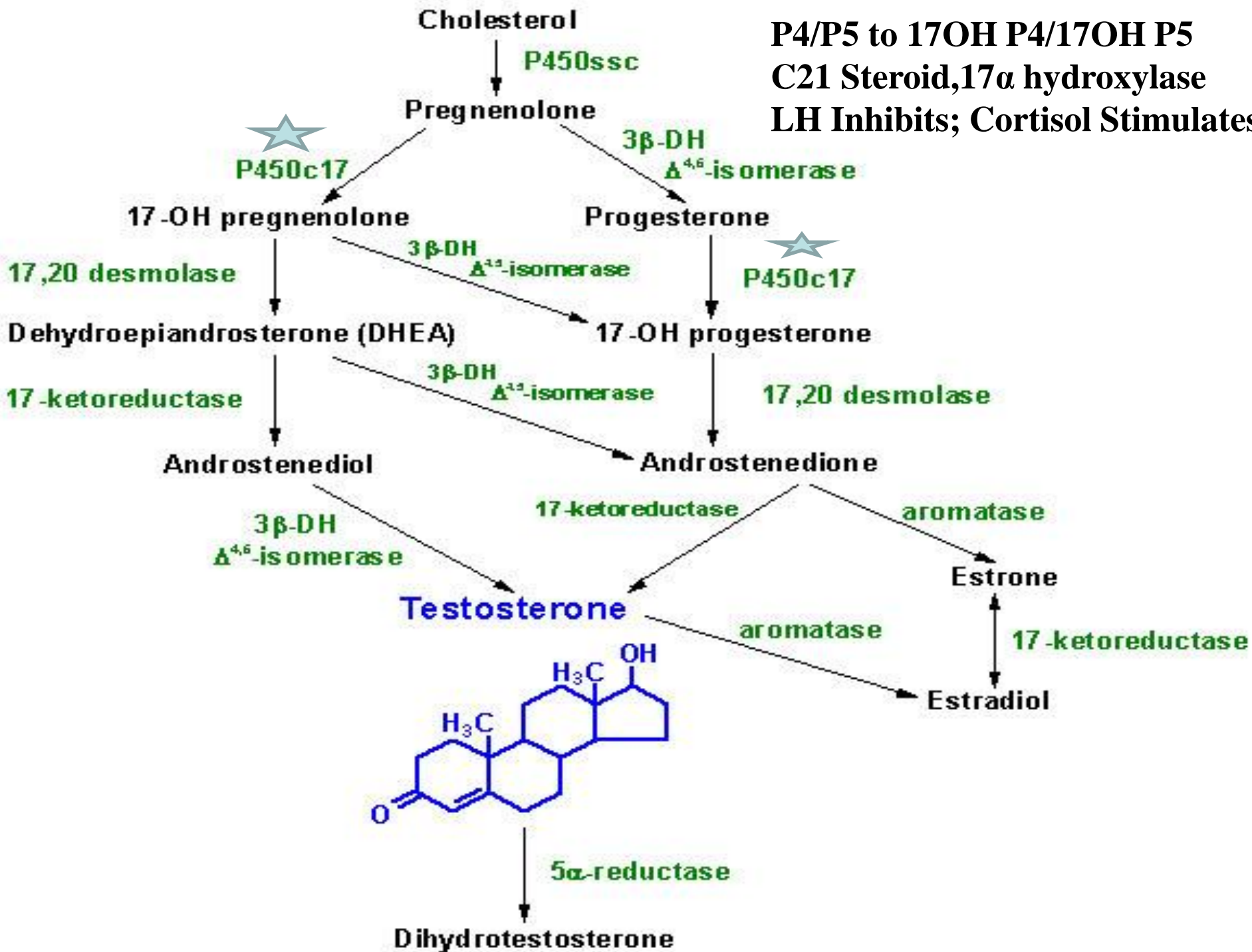
LHCGR Trophic Hormone Receptor



LH/CG inhibit Progesterone to Androgens and Androgens to Estrogens

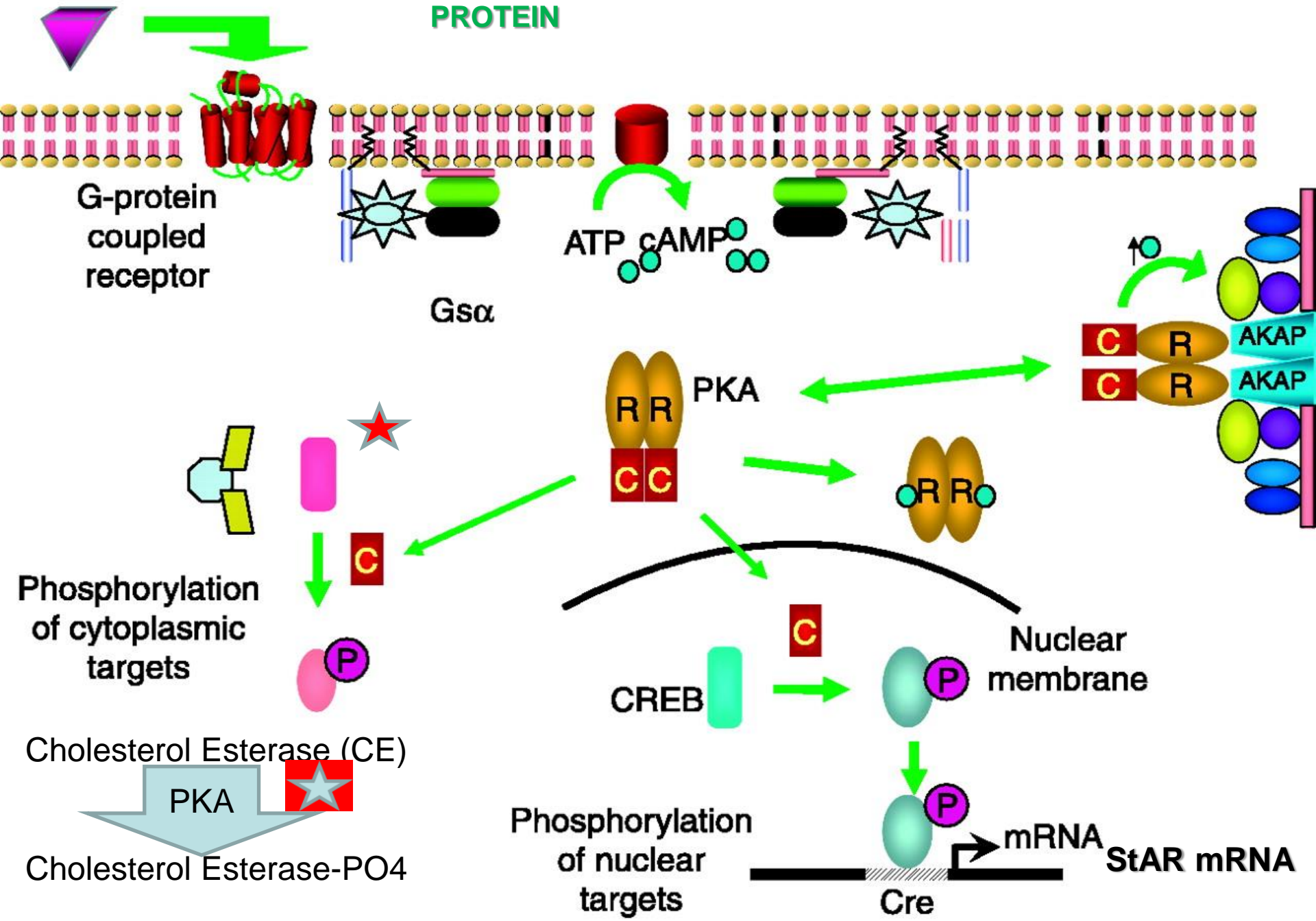


P4/P5 to 17OH P4/17OH P5
C21 Steroid, 17 α hydroxylase
LH Inhibits; Cortisol Stimulates



Hormone

CREB – CYCLIC AMP RESPONSE ELEMENT BINDING PROTEIN



Cyclic AMP Production and Action

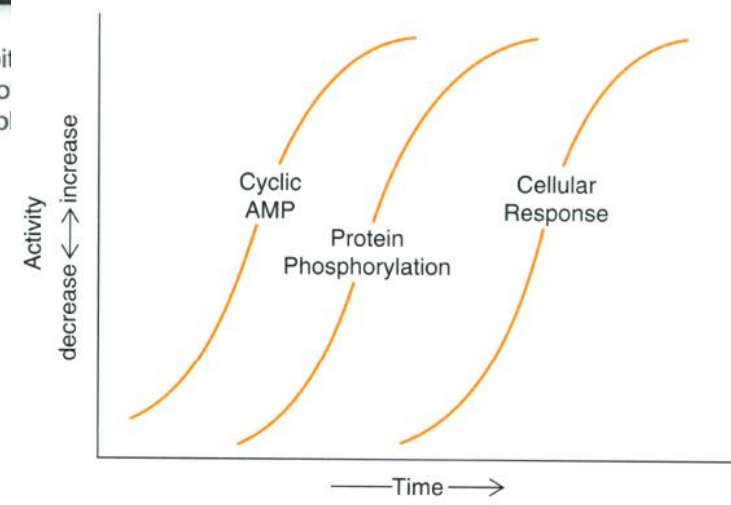
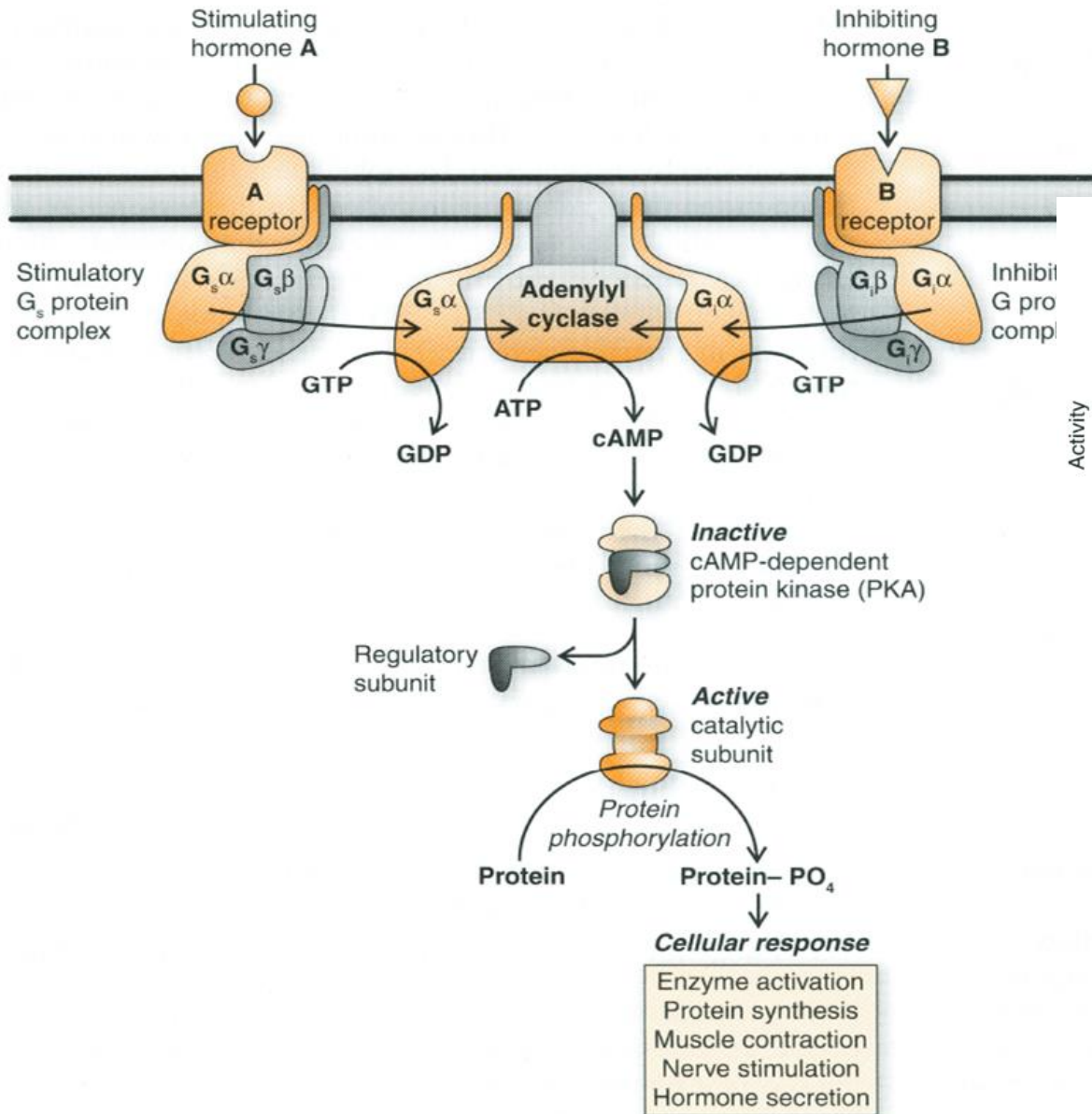
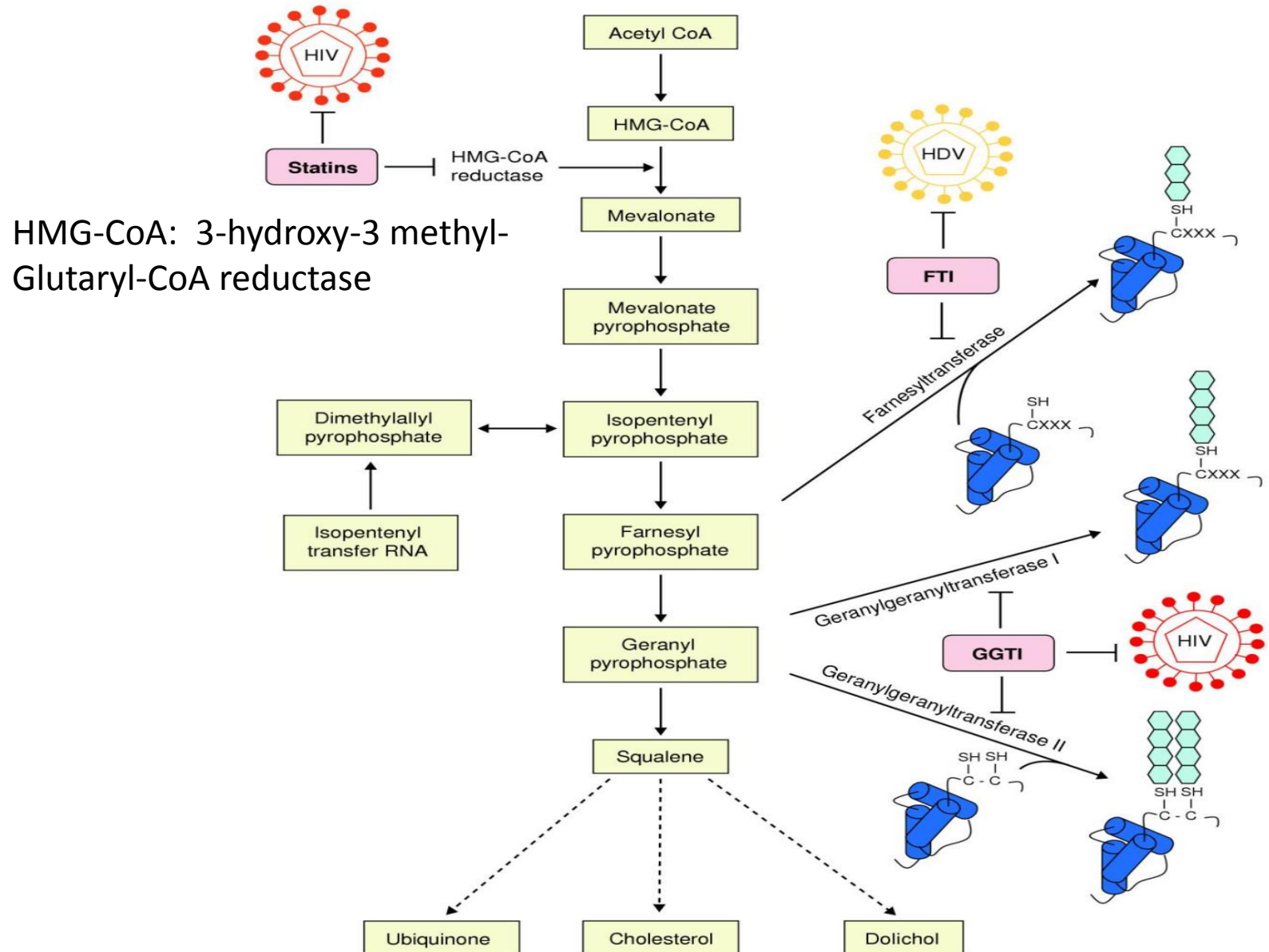
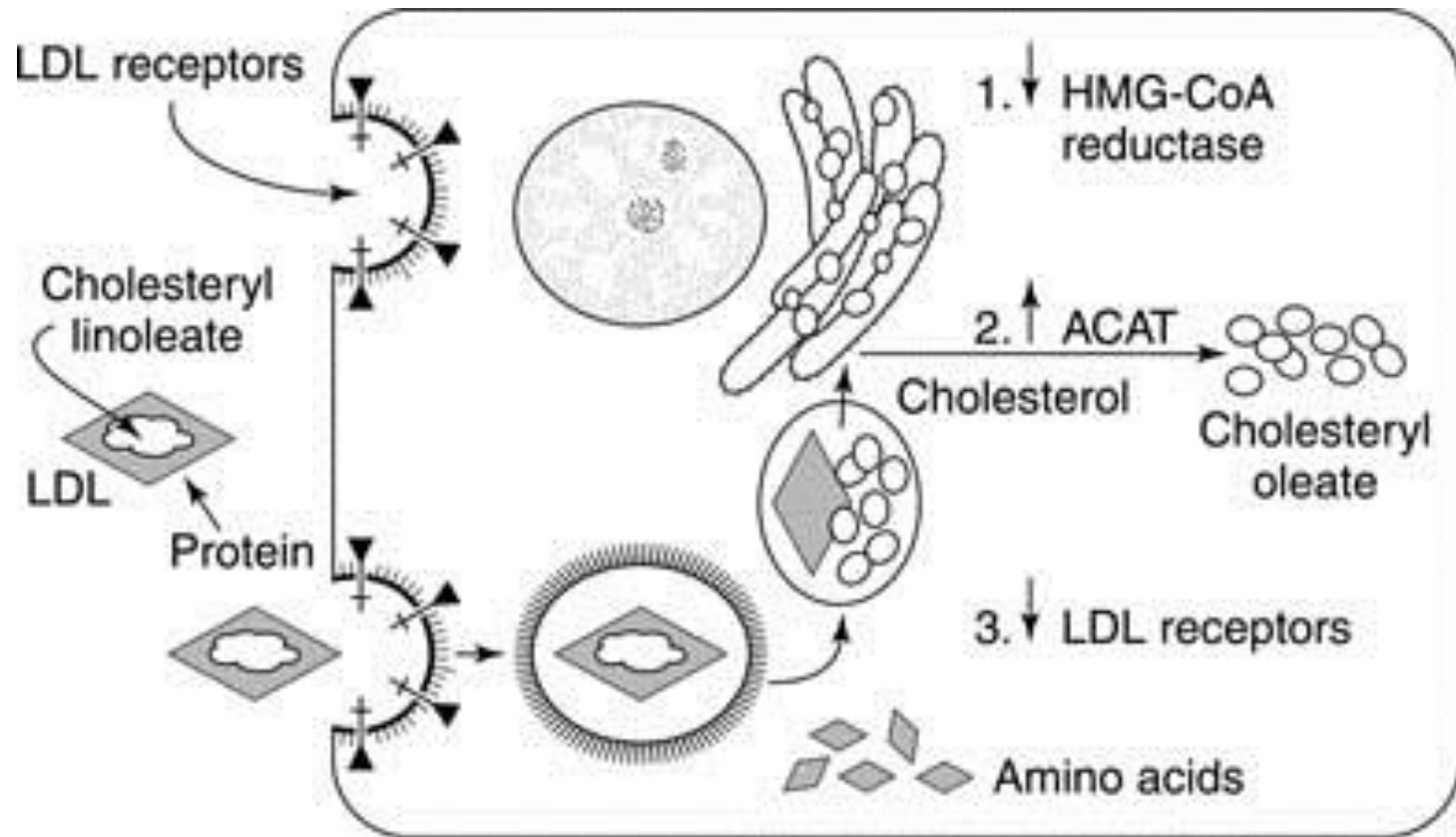


Figure 3.8 Temporal cellular events in hormone-mediated cyclic AMP production and action.

STEROID BIOSYNTHESIS



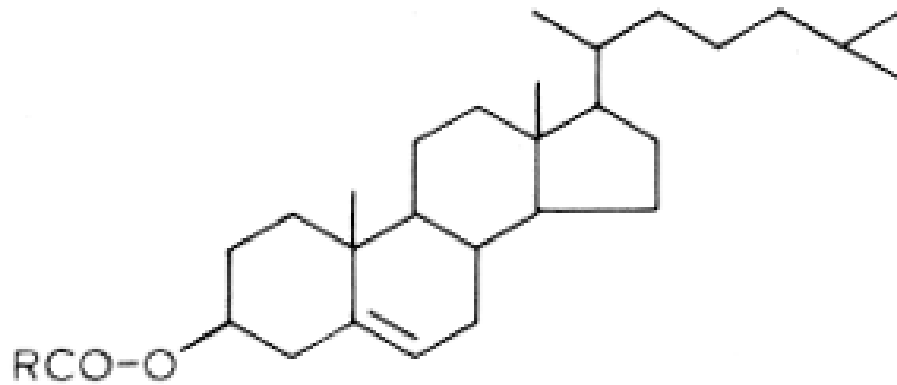
INTERNALIZATION OF CHOLESTEROL INTO CELLS



LDL binding → Internalization → Lysosomal hydrolysis → Regulatory actions

ACAT: Acetyl-Coenzyme A acetyltransferase – cholesterol to cholesterol esters

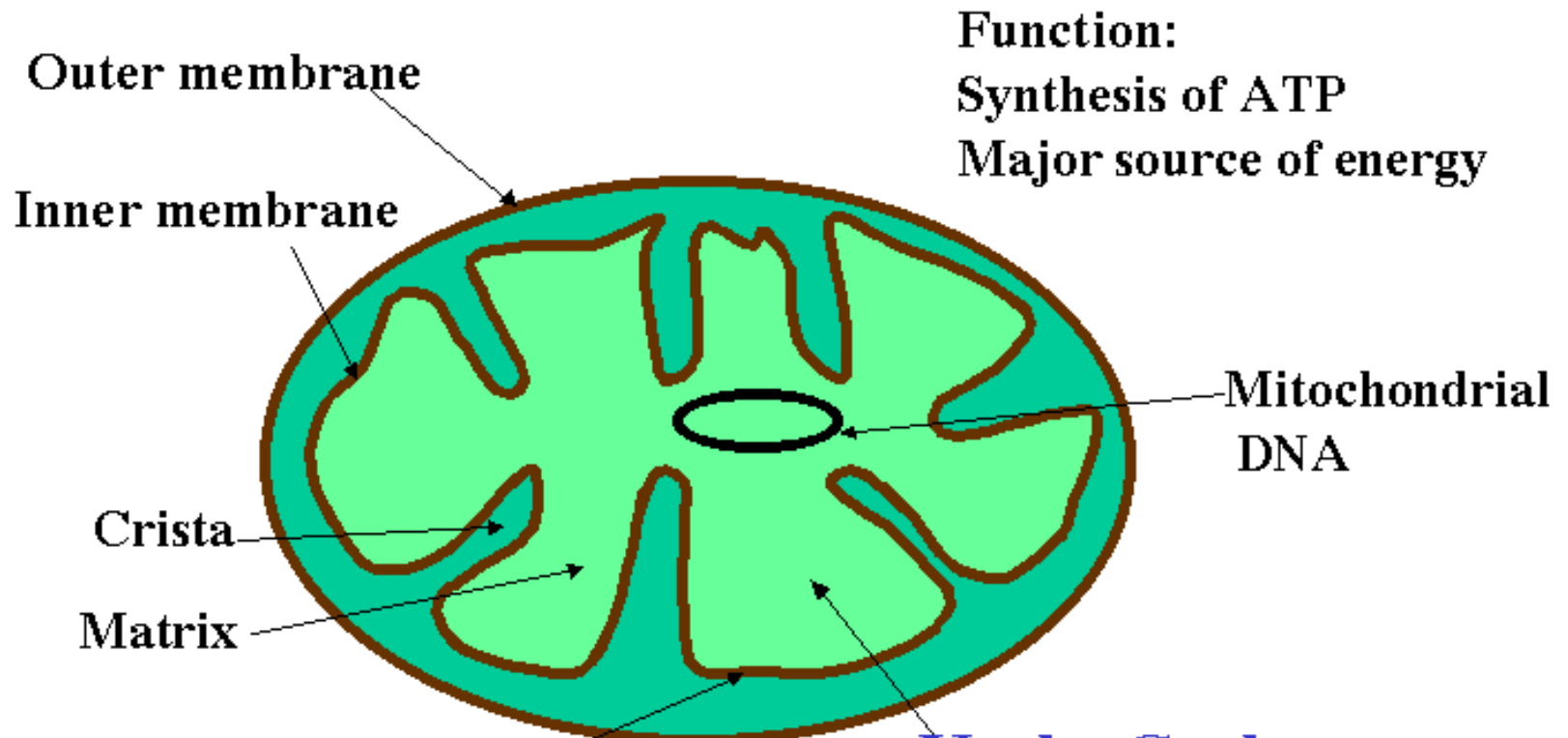
cholesteryl esters



3-O-acyl-cholest-5-en-3 β -ol

RCO = linoleic acid, palmitic acid, oleic acid etc

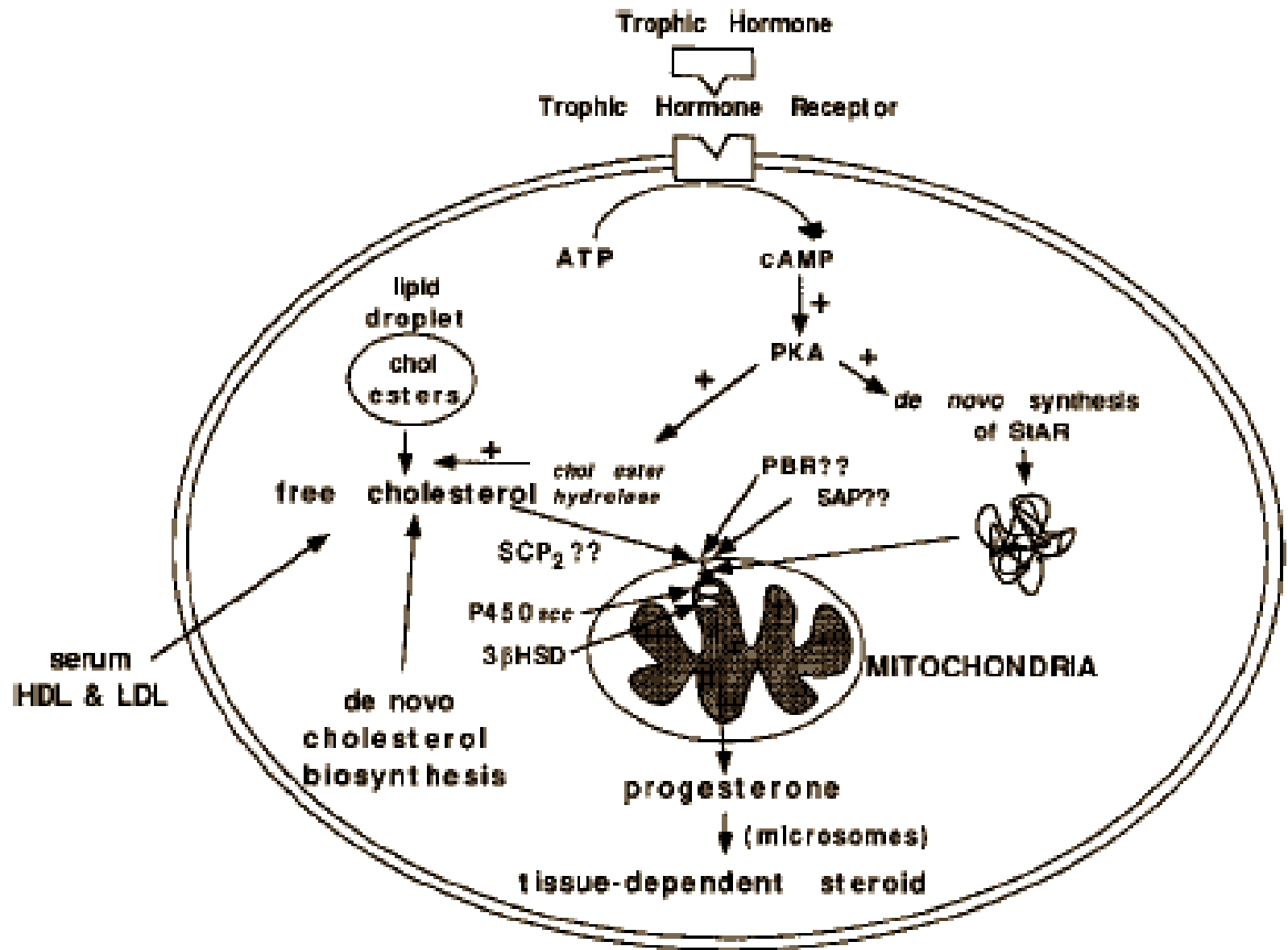
Mitochondria



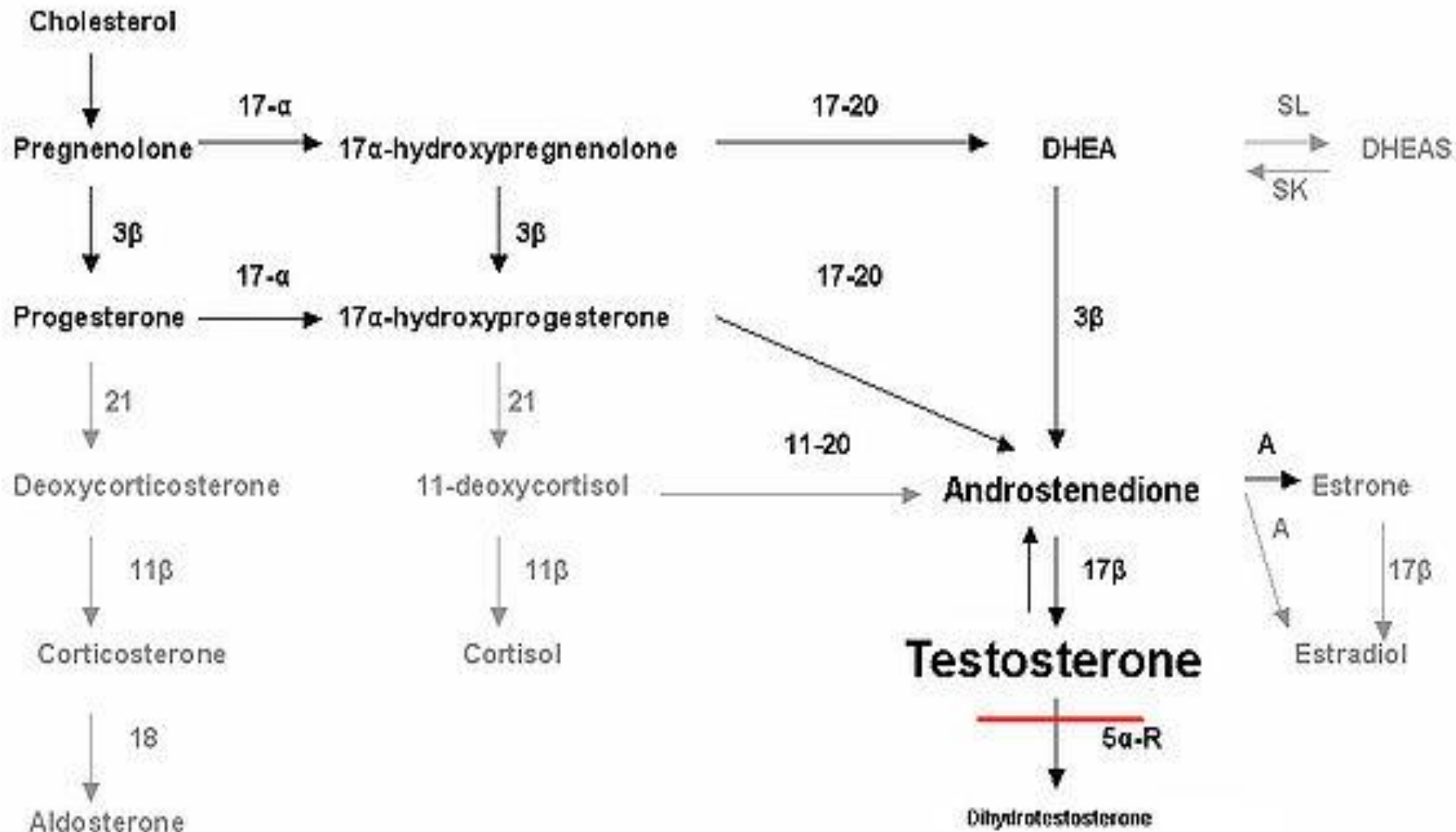
Function:
Synthesis of ATP
Major source of energy



Electron transport chain



SCP2 – Sterol Carrier Protein; StAR – Steroid Acute Regulatory Protein



17 α : 17 α -hydroxylase

17,20 : 17,20-lyase

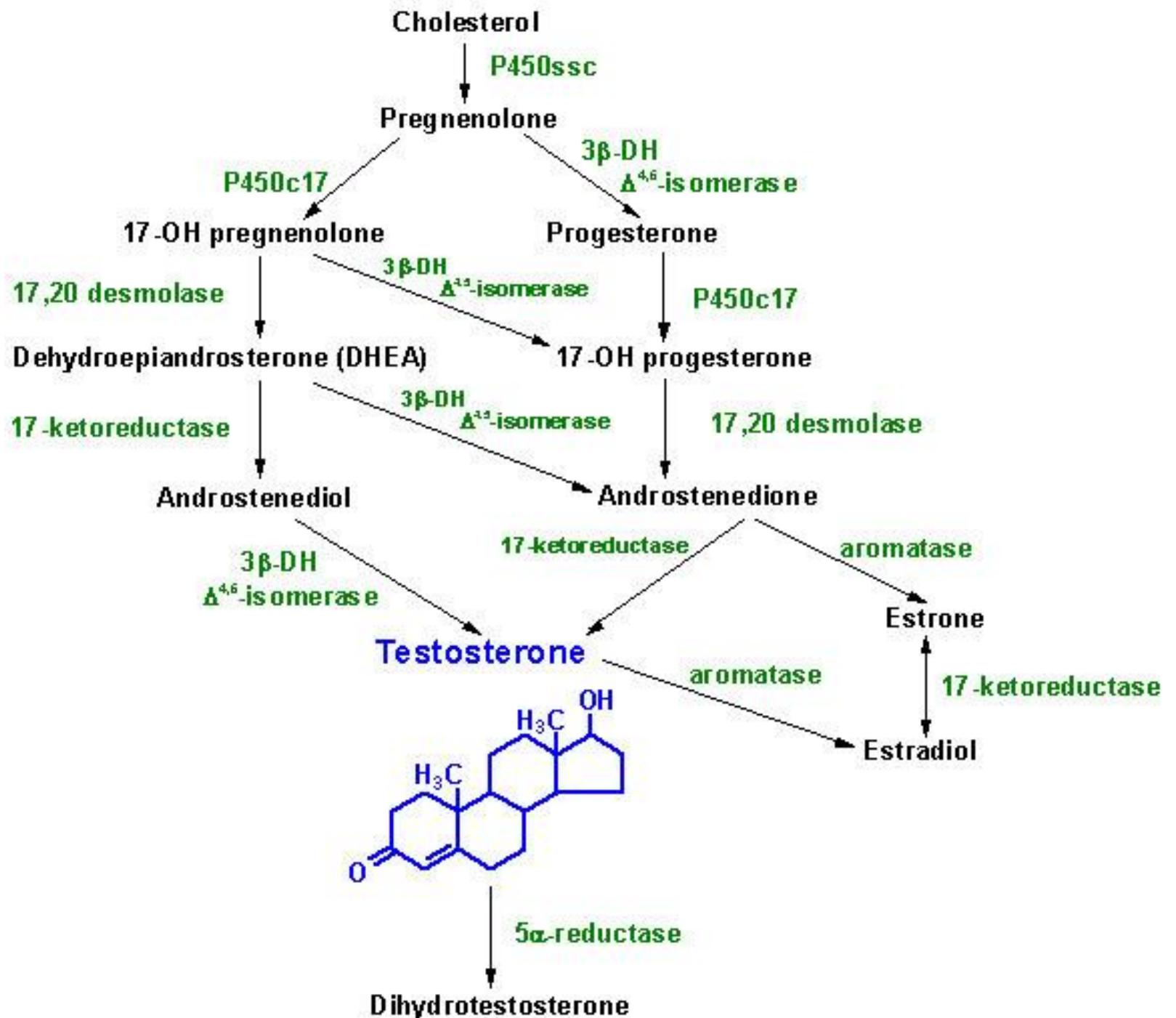
21 : 21-hydroxylase

3 β : 3-HSD (hydroxysteroid dehydrogenase)

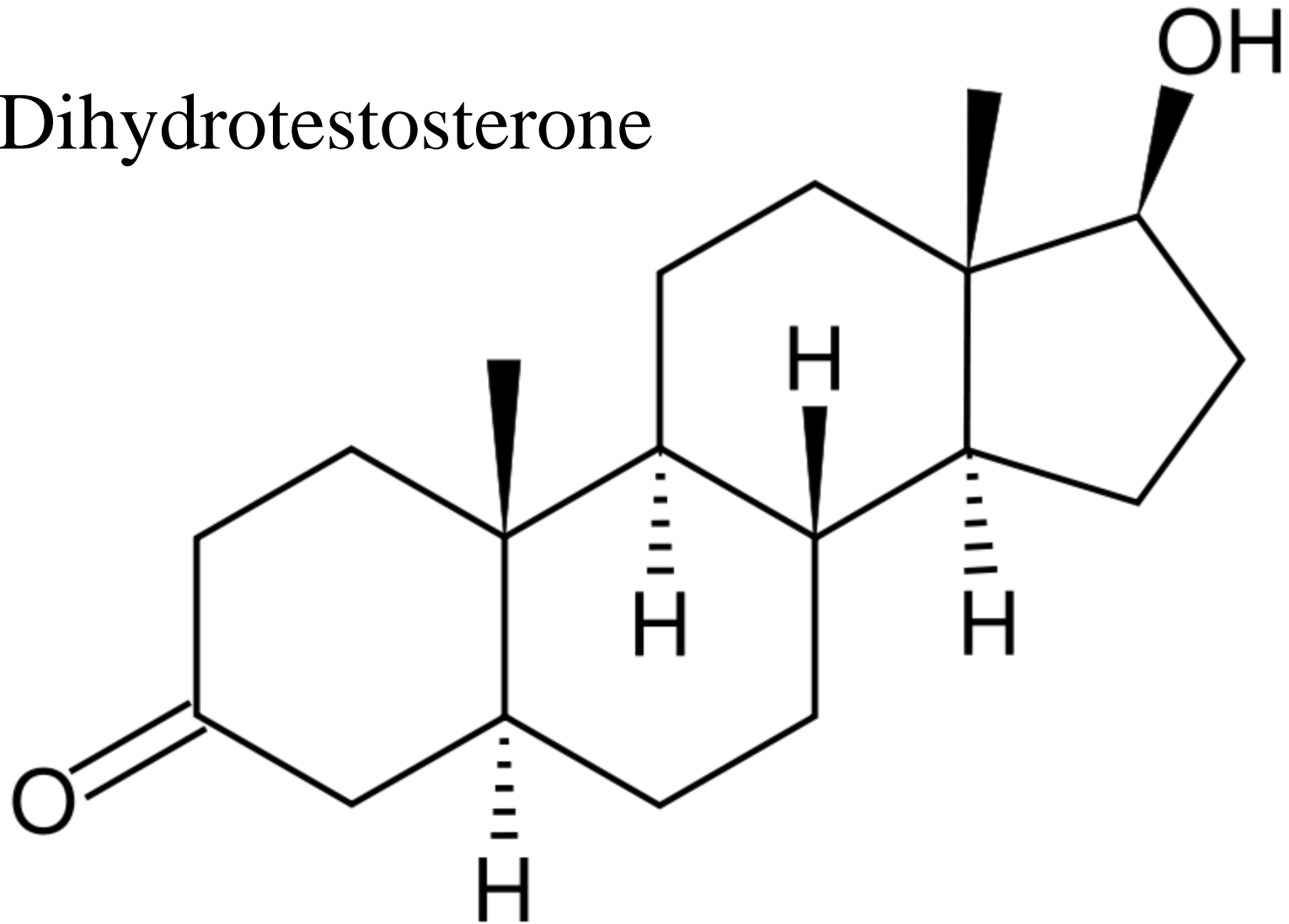
17 β : 17 β -HSD (hydroxysteroid dehydrogenase)

5 α -R : 5 α -reductase

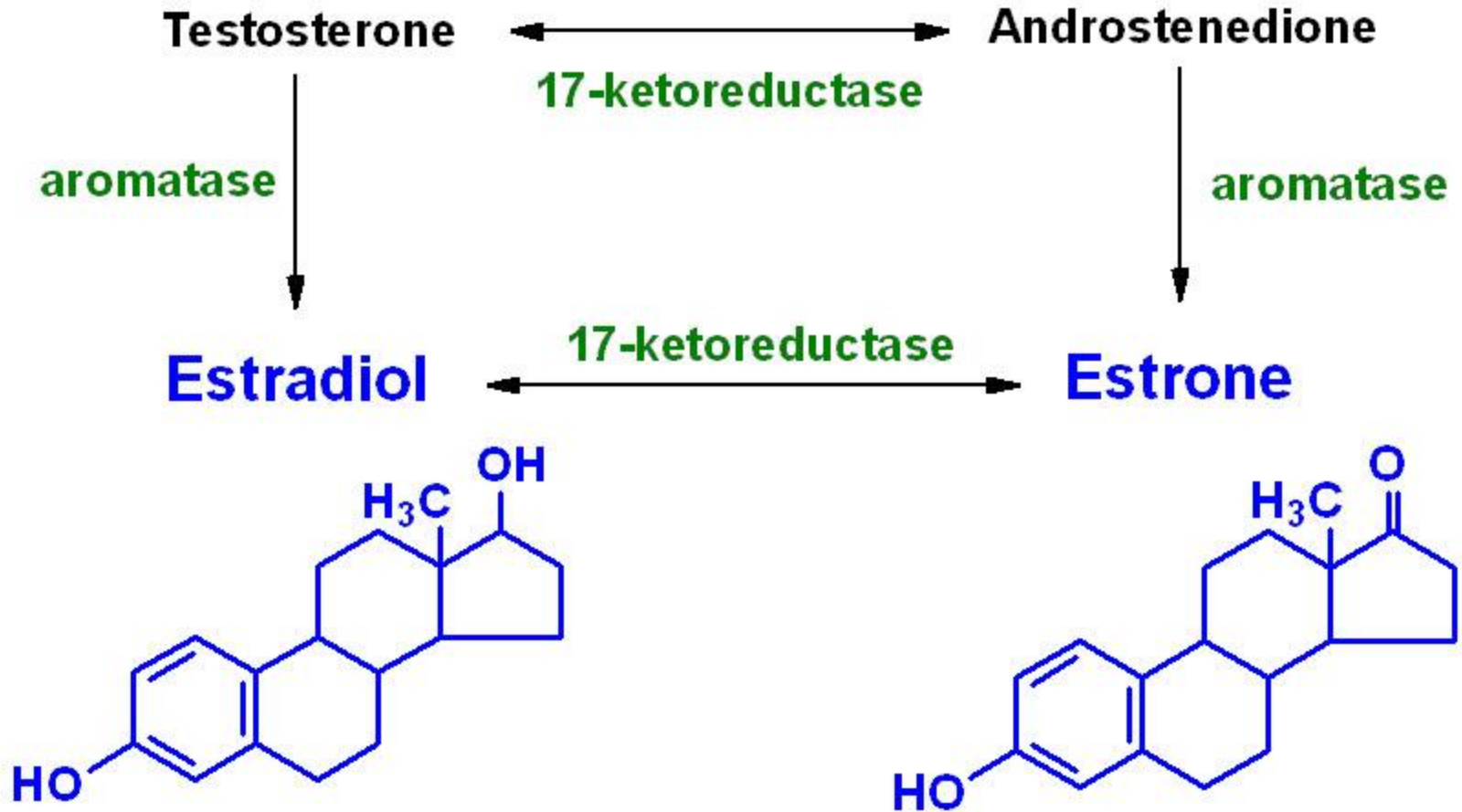
LH Inhibits and Cortisol Stimulates 17 α -hydroxylase



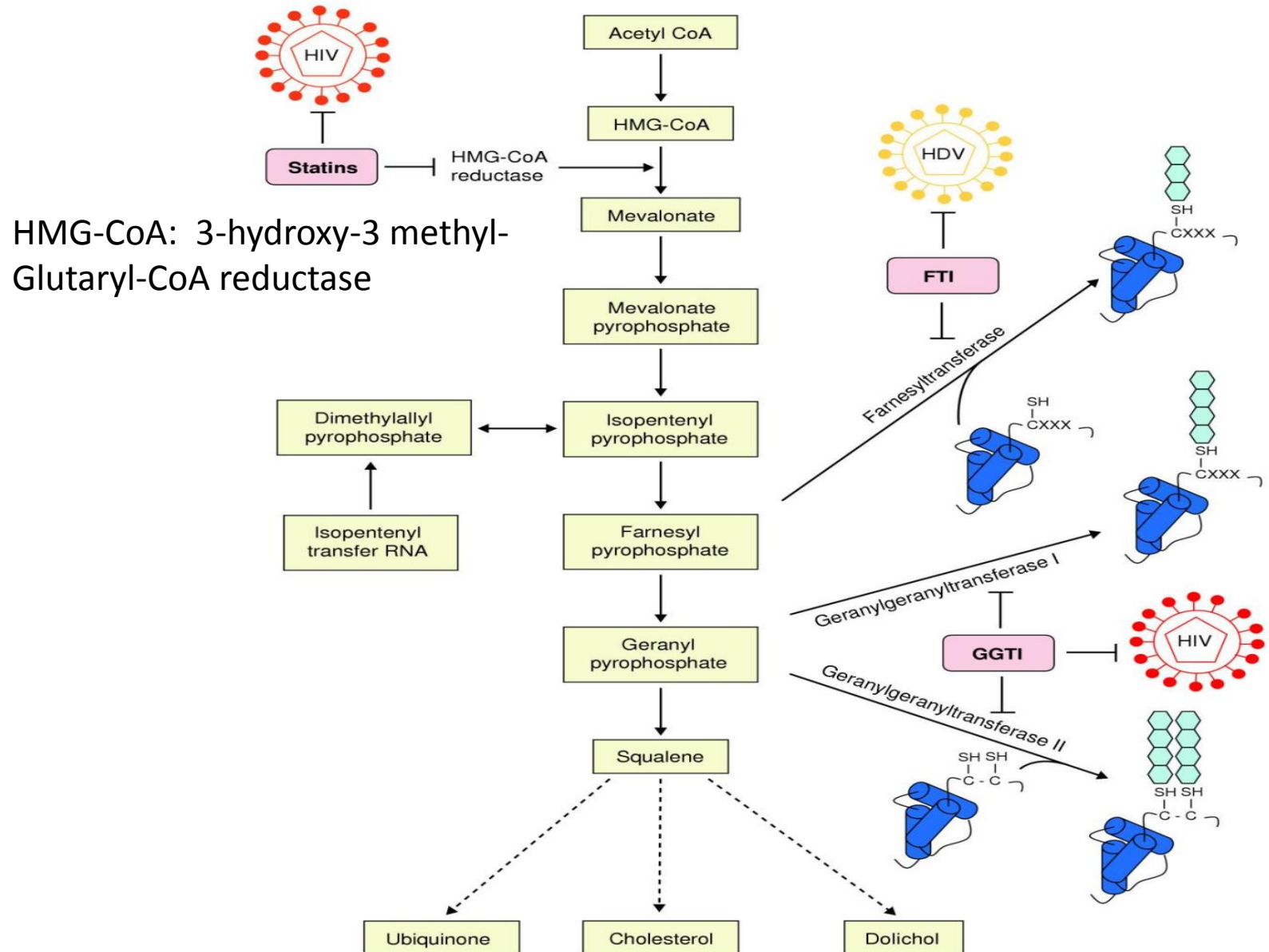
Dihydrotestosterone



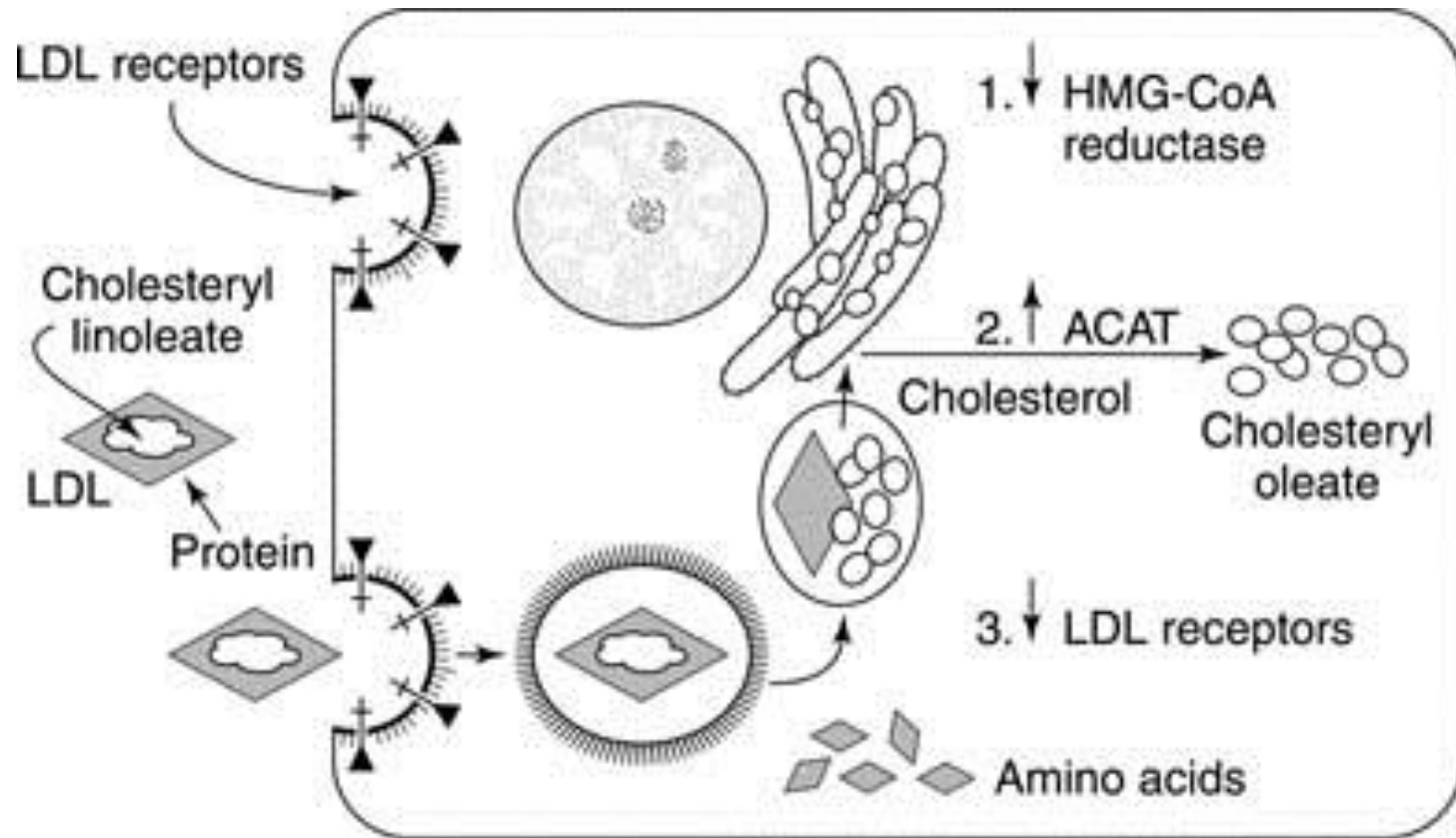
NON-AROMATIZABLE TO ESTROGENS
MALE SECONDARY SEX CHARACTERISTICS



STEROID BIOSYNTHESIS



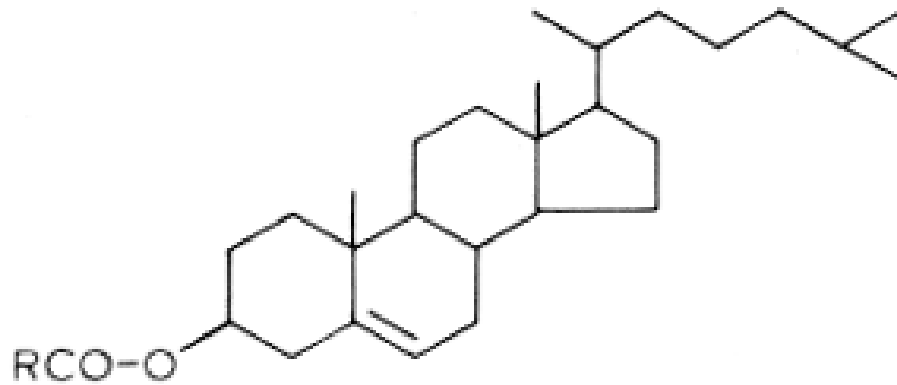
INTERNALIZATION OF CHOLESTEROL INTO CELLS



LDL binding → Internalization → Lysosomal hydrolysis → Regulatory actions

ACAT: Acetyl-Coenzyme A acetyltransferase – cholesterol to cholesterol esters

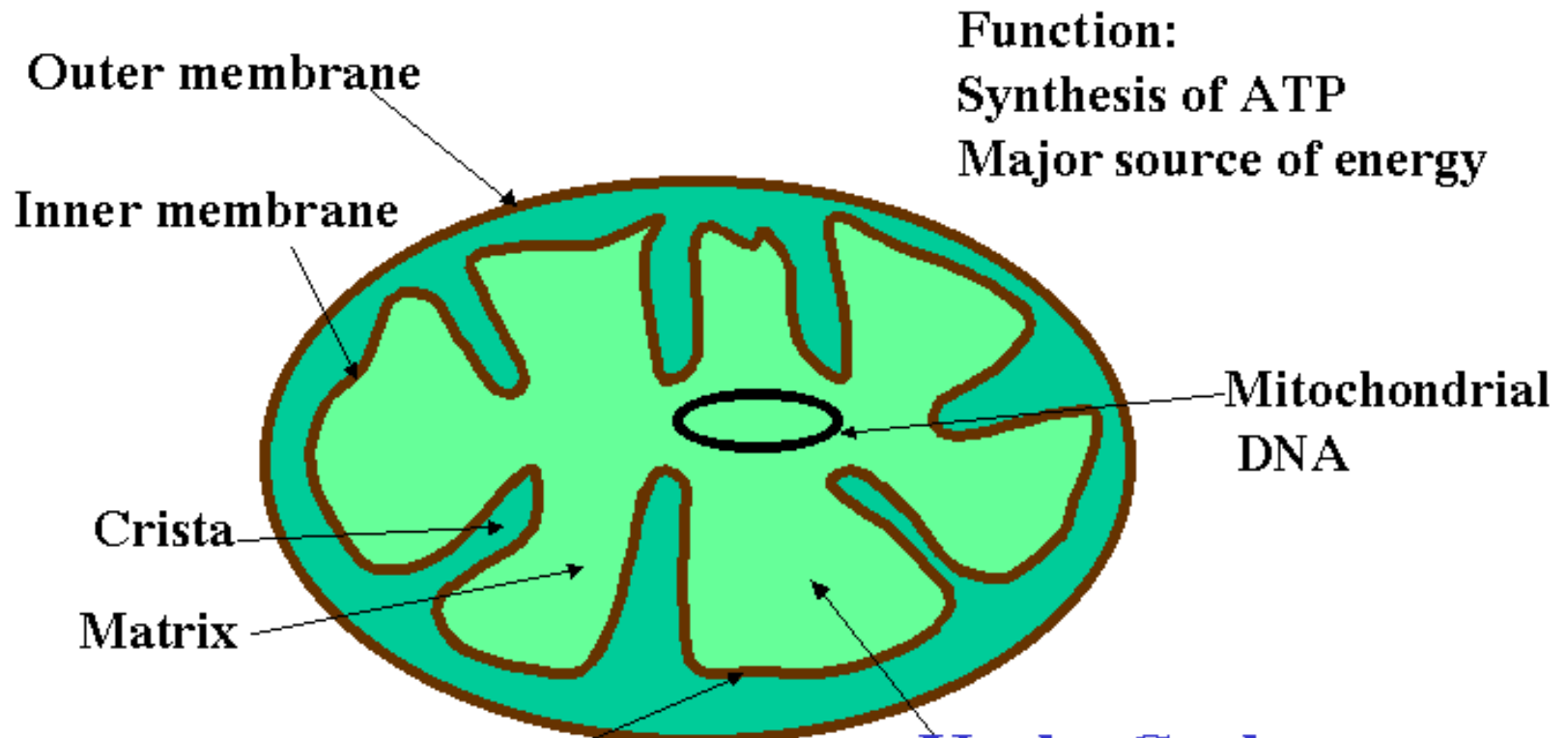
cholesteryl esters



3-O-acyl-cholest-5-en-3 β -ol

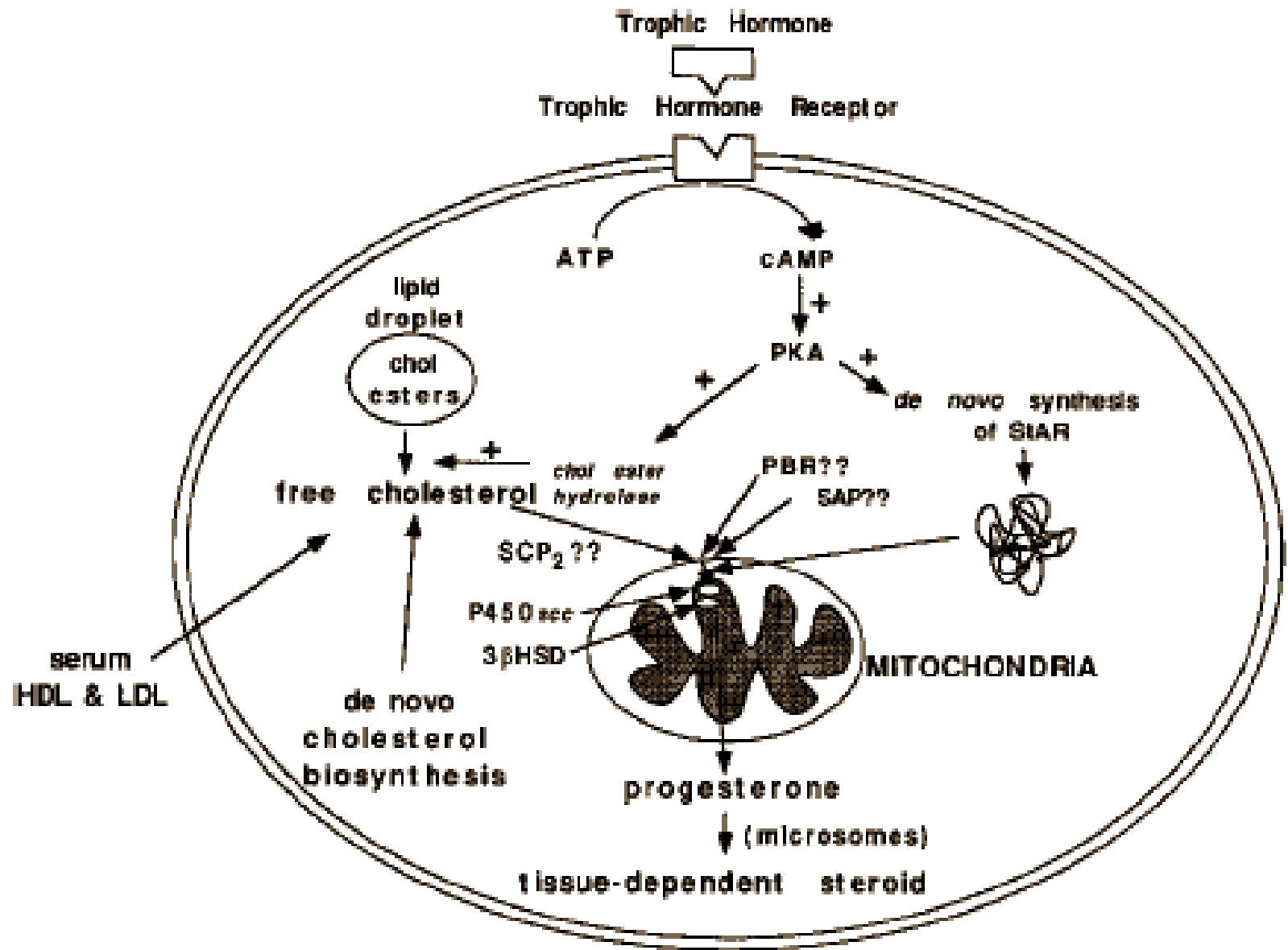
RCO = linoleic acid, palmitic acid, oleic acid etc

Mitochondria

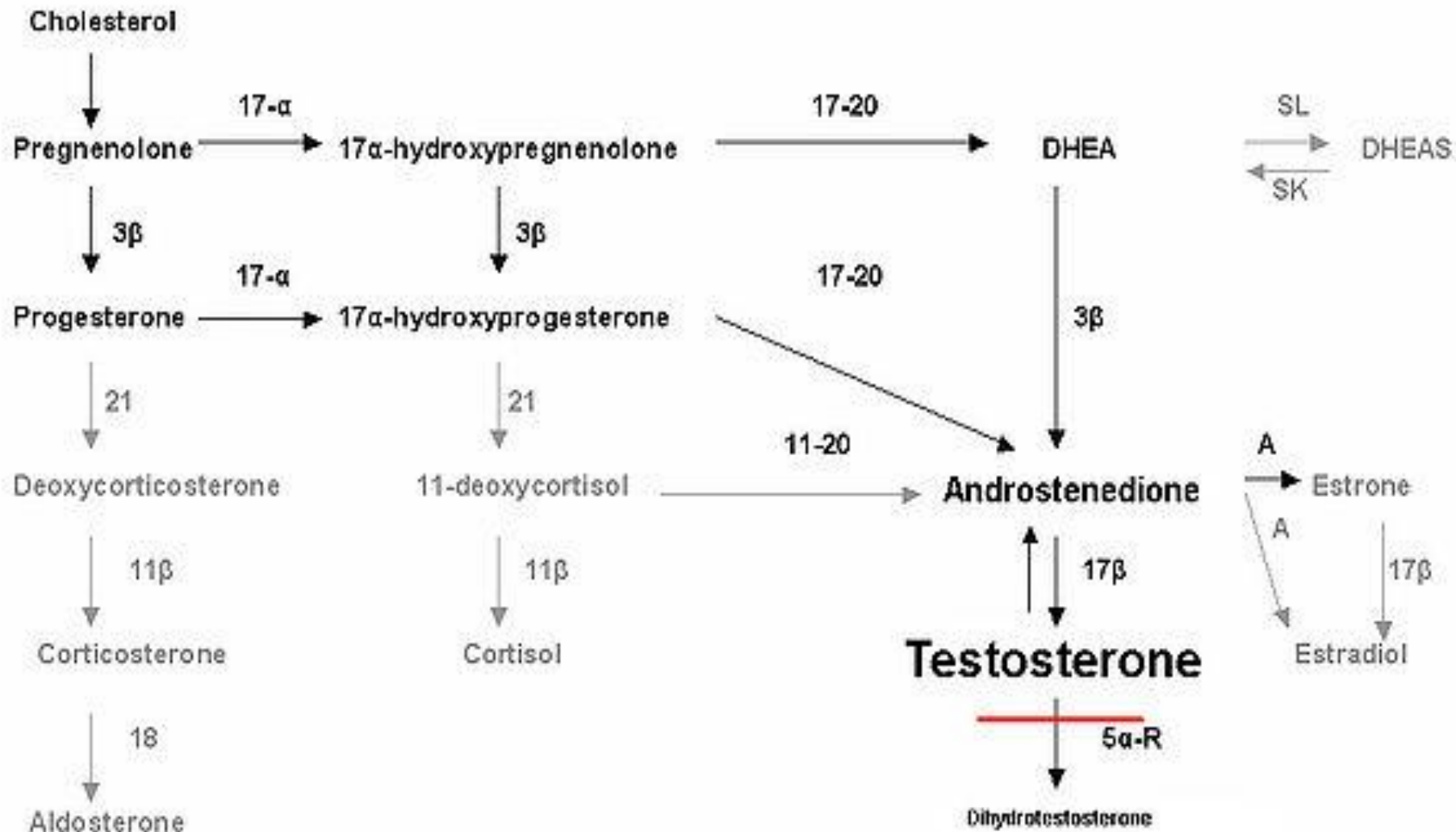


Function:
Synthesis of ATP
Major source of energy





SCP2 – Sterol Carrier Protein; StAR – Steroid Acute Regulatory Protein



17 α : 17 α -hydroxylase

17,20 : 17,20-lyase

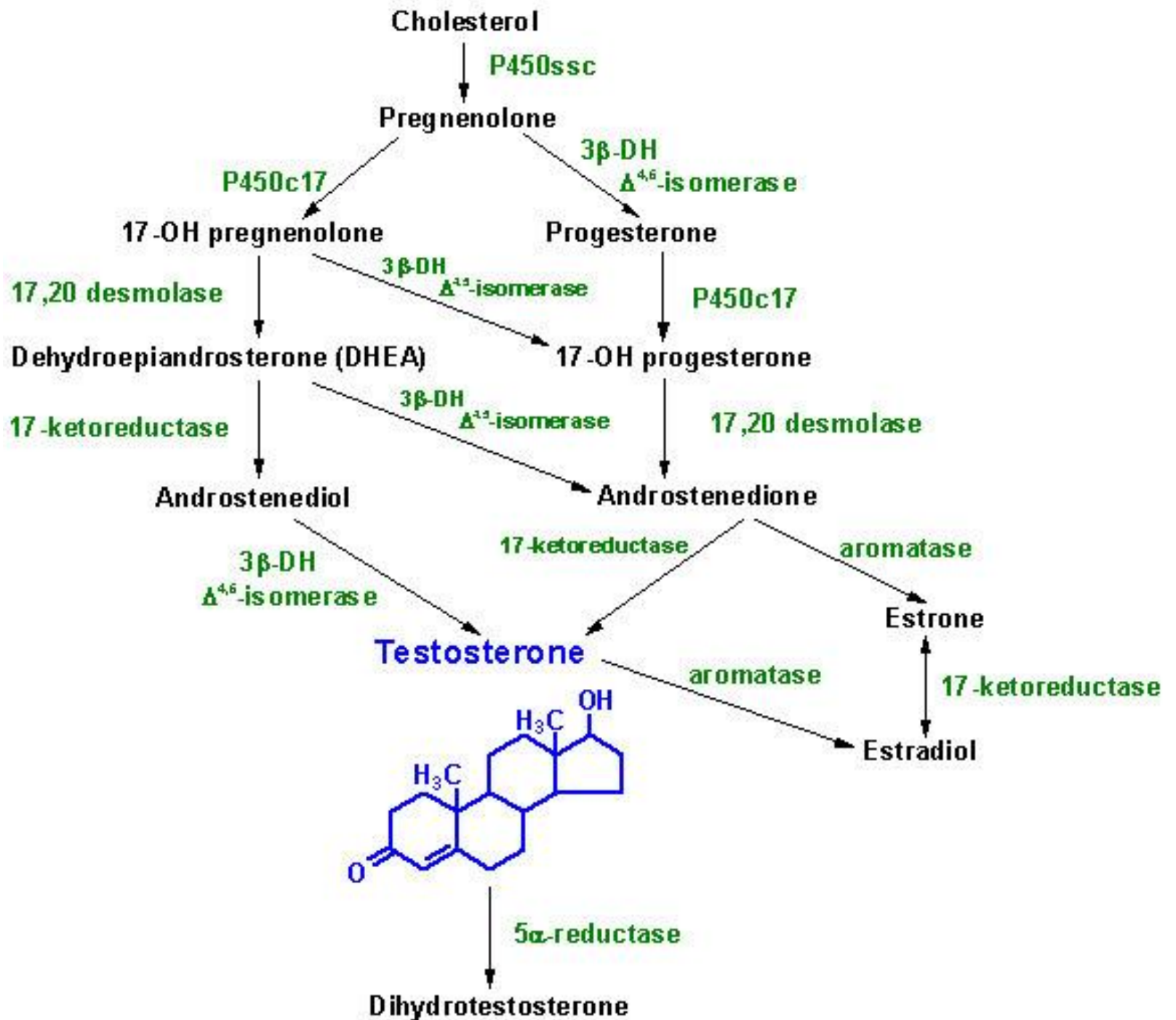
21 : 21-hydroxylase

3 β : 3-HSD (hydroxysteroid dehydrogenase)

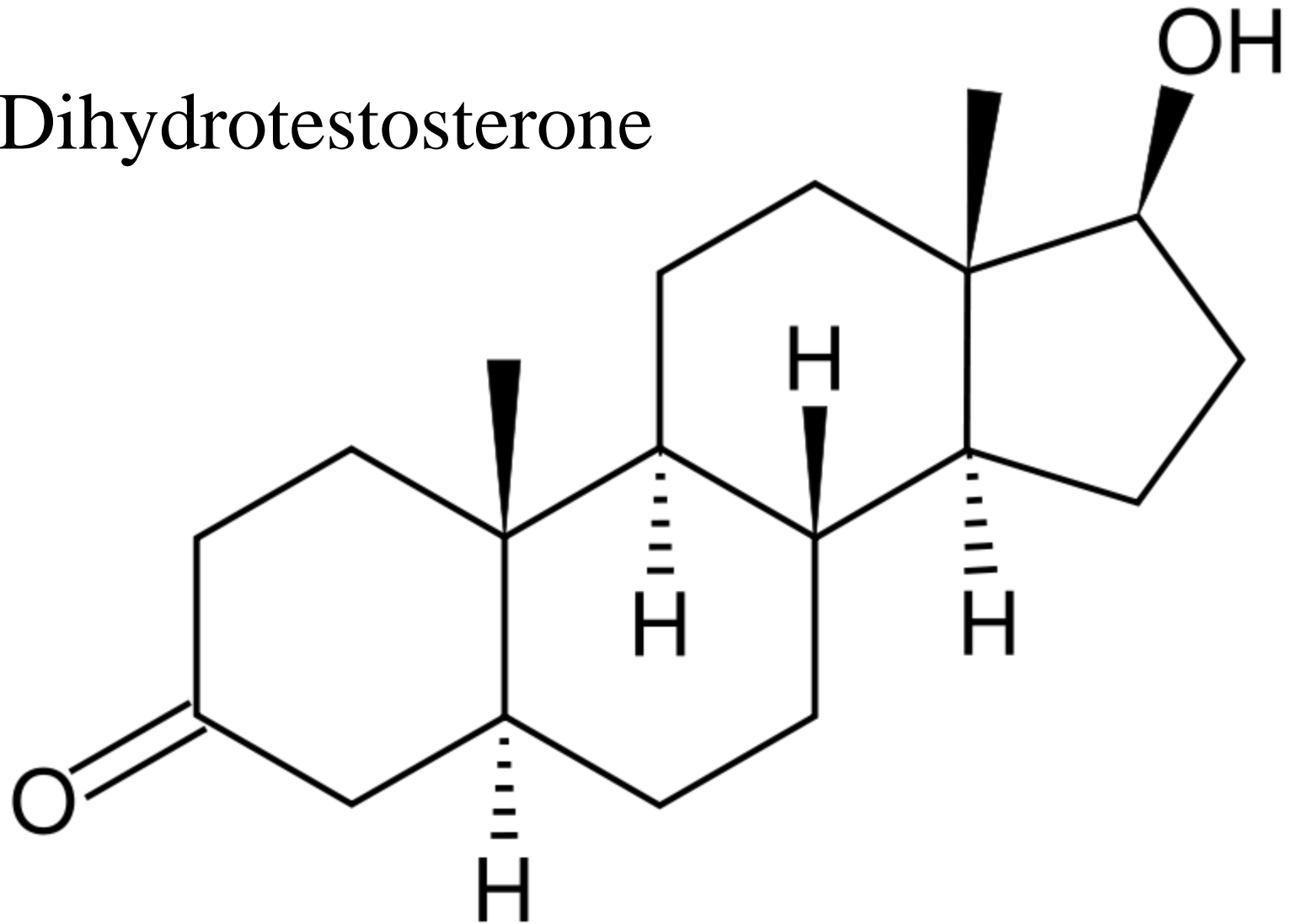
17 β : 17 β -HSD (hydroxysteroid dehydrogenase)

5 α -R : 5 α -reductase

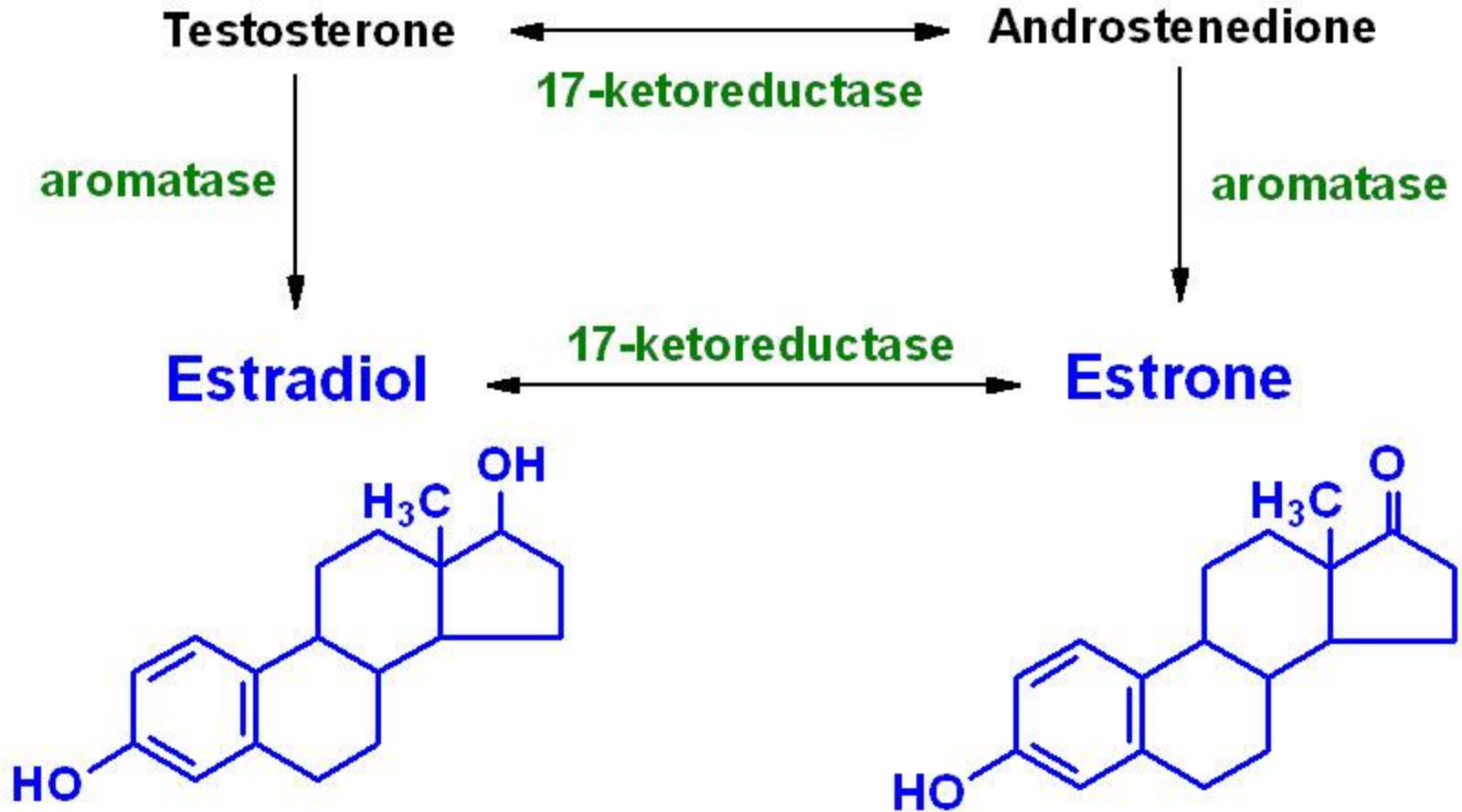
LH Inhibits and Cortisol Stimulates 17 α -hydroxylase



Dihydrotestosterone

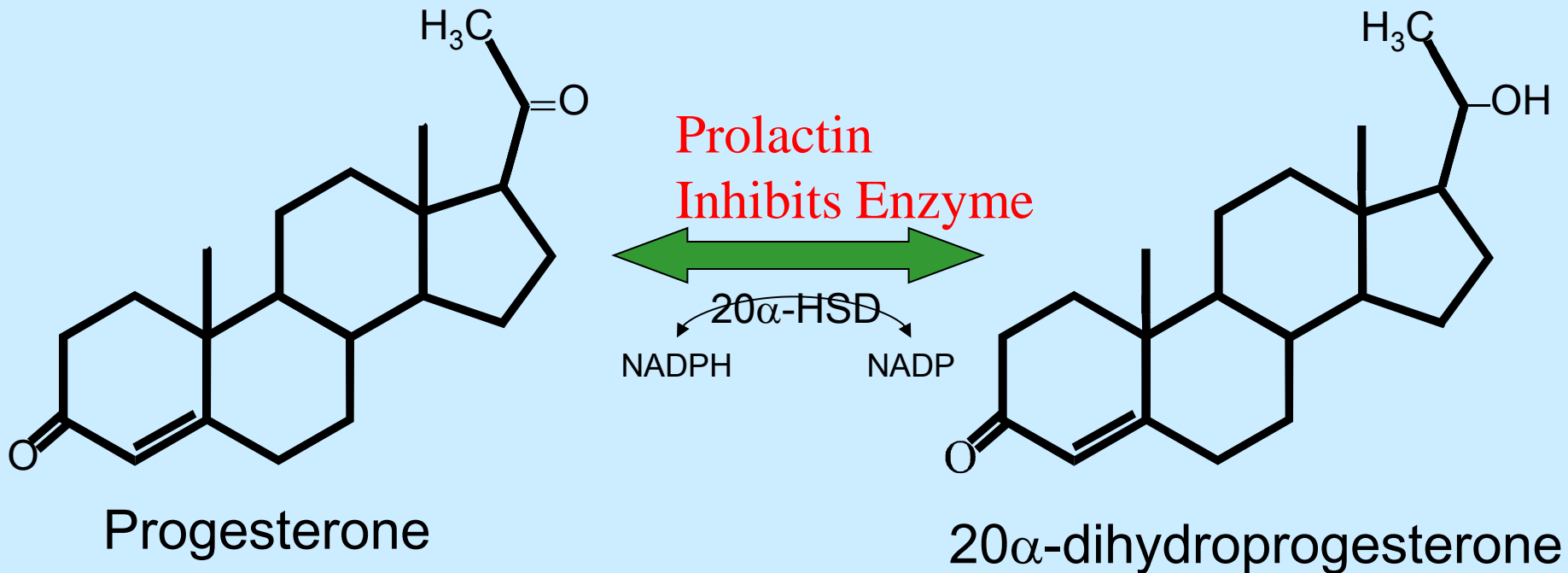


NON-AROMATIZABLE TO ESTROGENS
MALE SECONDARY SEX CHARACTERISTICS



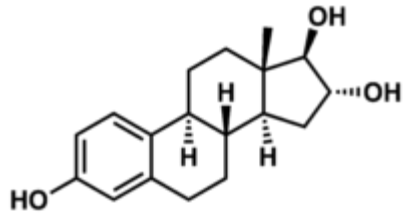
20 α -Hydroxysteroid Dehydrogenase

20 α -HSD

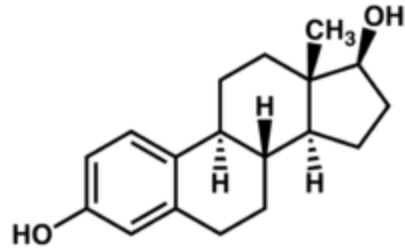


Does not support pregnancy
or decidualization in rodents

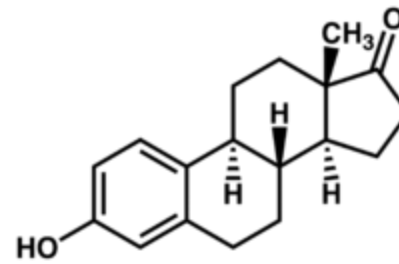
ESTRIOL, E3



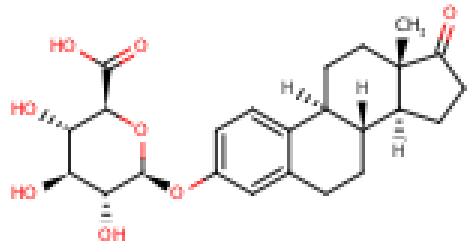
ESTRADIOL, E2



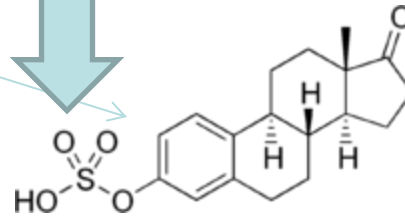
ESTRONE, E1



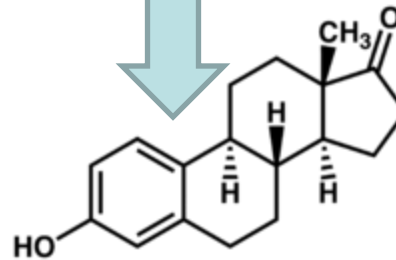
UDP glucuronyltransferase



Sulfotransferase



Sulfatase



Nuclear Hormone Receptor Functional Domains

FIGURE 9

GENERAL STRUCTURE AND FUNCTIONAL ORGANIZATION OF THE NUCLEAR HORMONE RECEPTORS

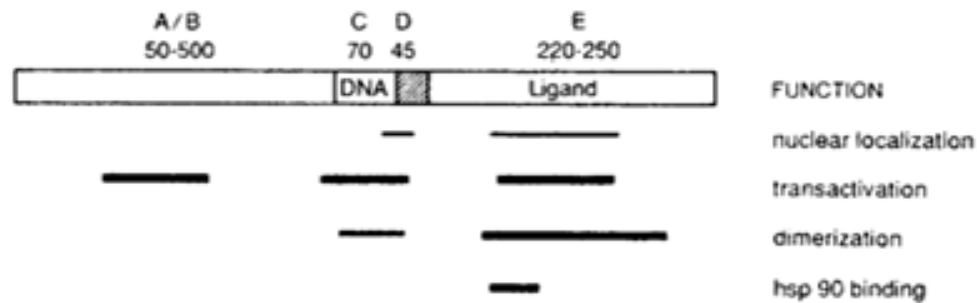
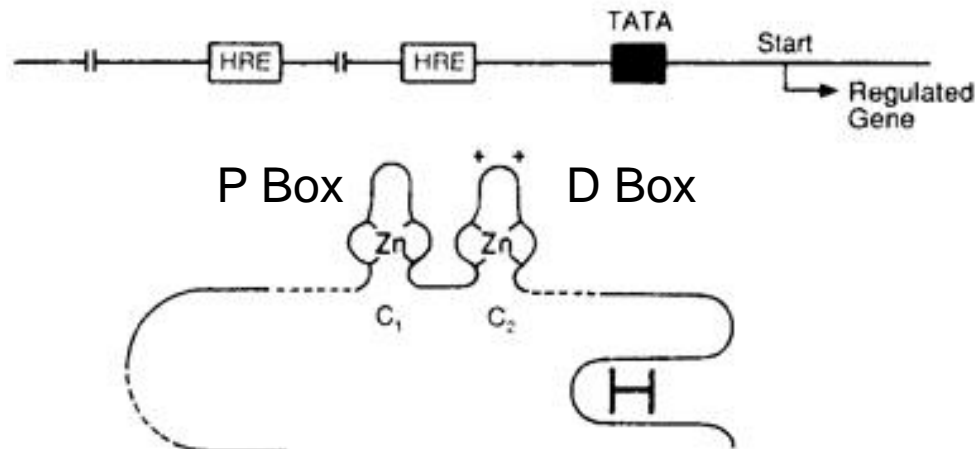


FIGURE 10

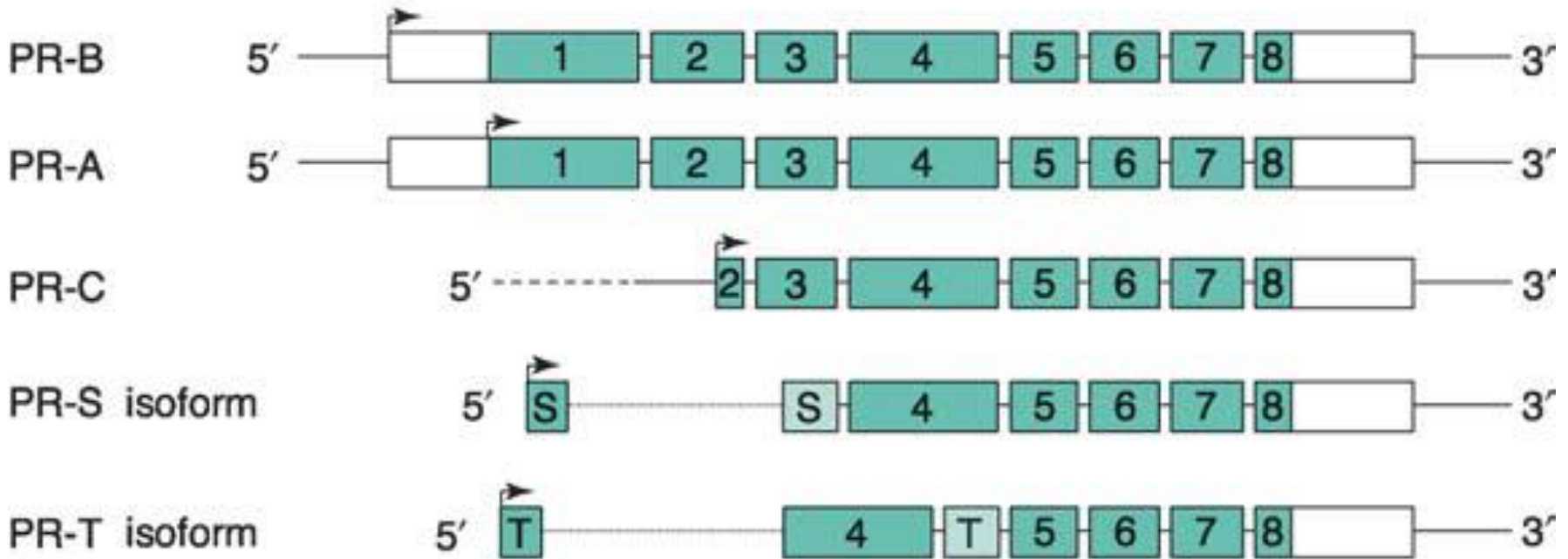
CONFORMATION OF THE DNA BINDING DOMAIN



Progesterone Receptors (PGR)

- Progesterone receptor (hPGR), a member of the steroid-receptor superfamily of nuclear receptors.
- Single-copy PGR gene uses separate promoters and translational start sites to produce two primary isoforms
 - PGRA and PGRB
 - identical except for an additional 165 amino acids present only in the N terminus of PGRB
 - PGRB shares important structural domains with PGRA, but they are two functionally distinct transcription factors.
 - Selective ablation of PGRA in mice revealed that PGR-B stimulated, rather than inhibited epithelial cell proliferation in response to estrogen alone and to progesterone and estrogen.
 - PGRA isoform opposes estrogen-induced proliferation and PGRB-dependent proliferation.

Exon structure



Protein domains



A/B: Activation Domains

C: DBD or DNA Binding Domain

D: Hinge Region for binding certain regulatory elements such as RU486

E: LBD or ligand Binding Domain

PLC – phospholipase C

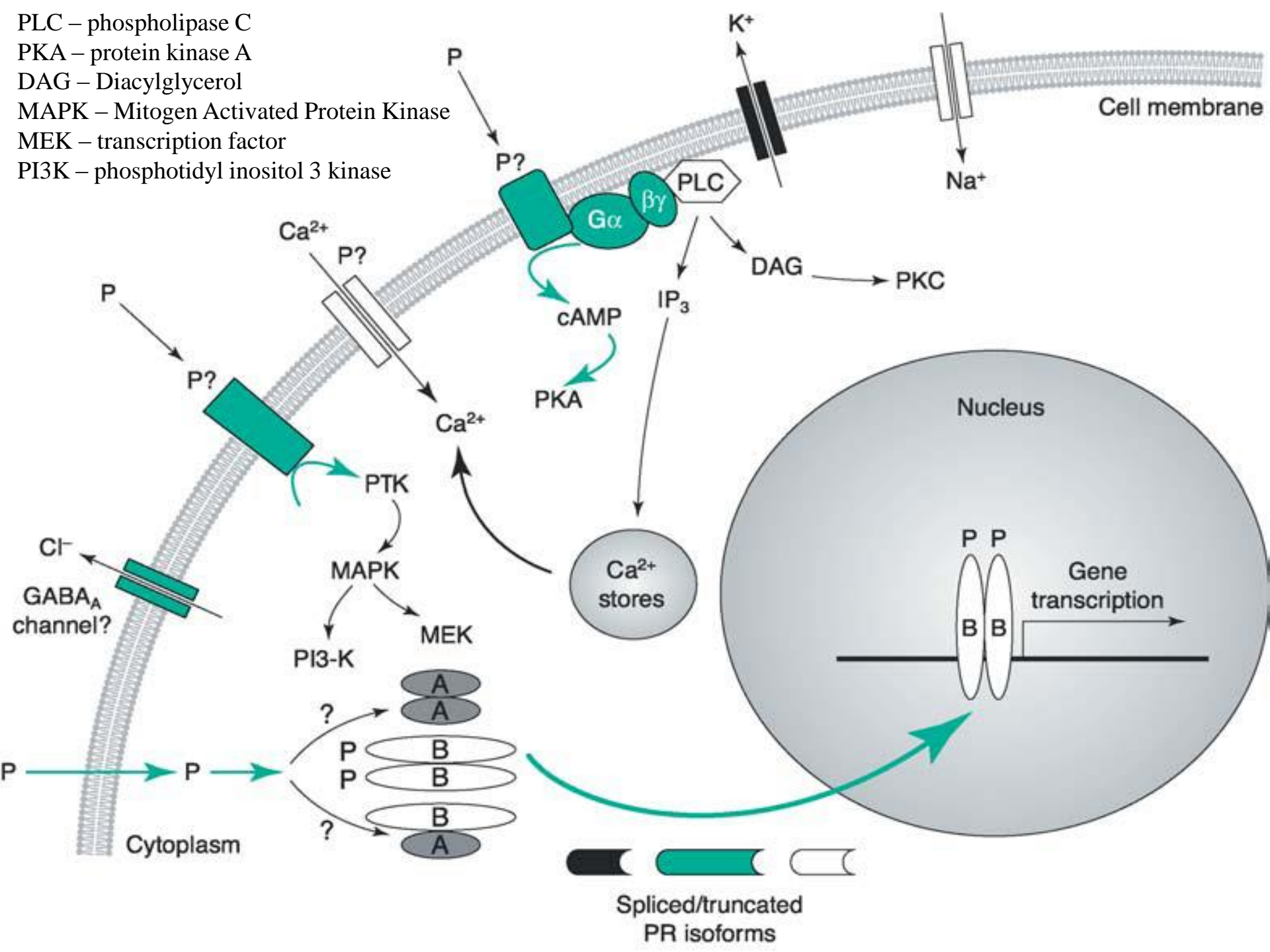
PKA – protein kinase A

DAG – Diacylglycerol

MAPK – Mitogen Activated Protein Kinase

MEK – transcription factor

PI3K – phosphotidyl inositol 3 kinase



Cell membrane

Na⁺

K⁺

PLC

Gα

βγ

DAG

PKC

IP₃

cAMP

PKA

Ca²⁺

Ca²⁺

P?

PTK

MAPK

MEK

PI3-K

Nucleus

P P

B B

Gene transcription

Cl⁻

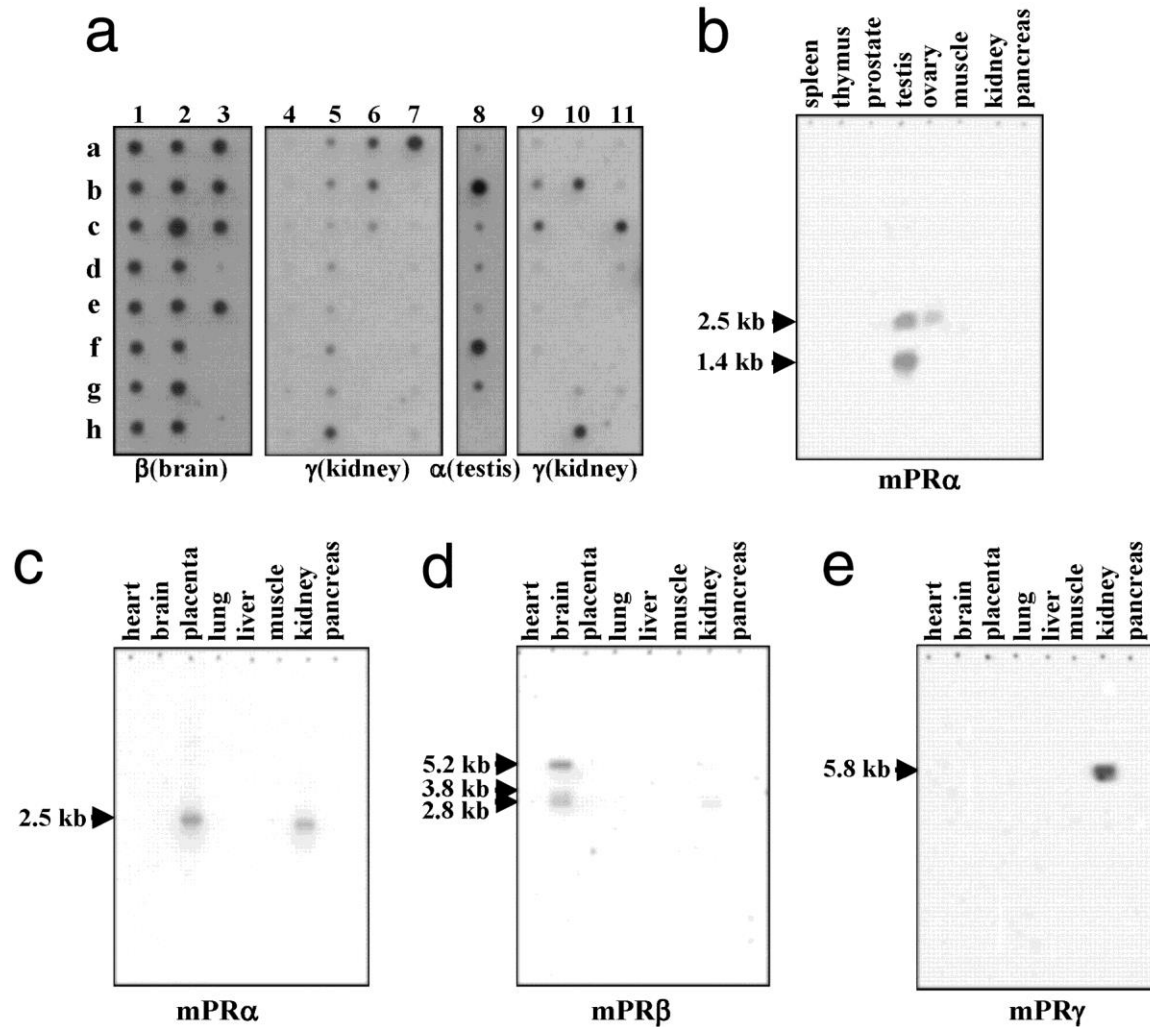
GABA_A channel?

Cytoplasm



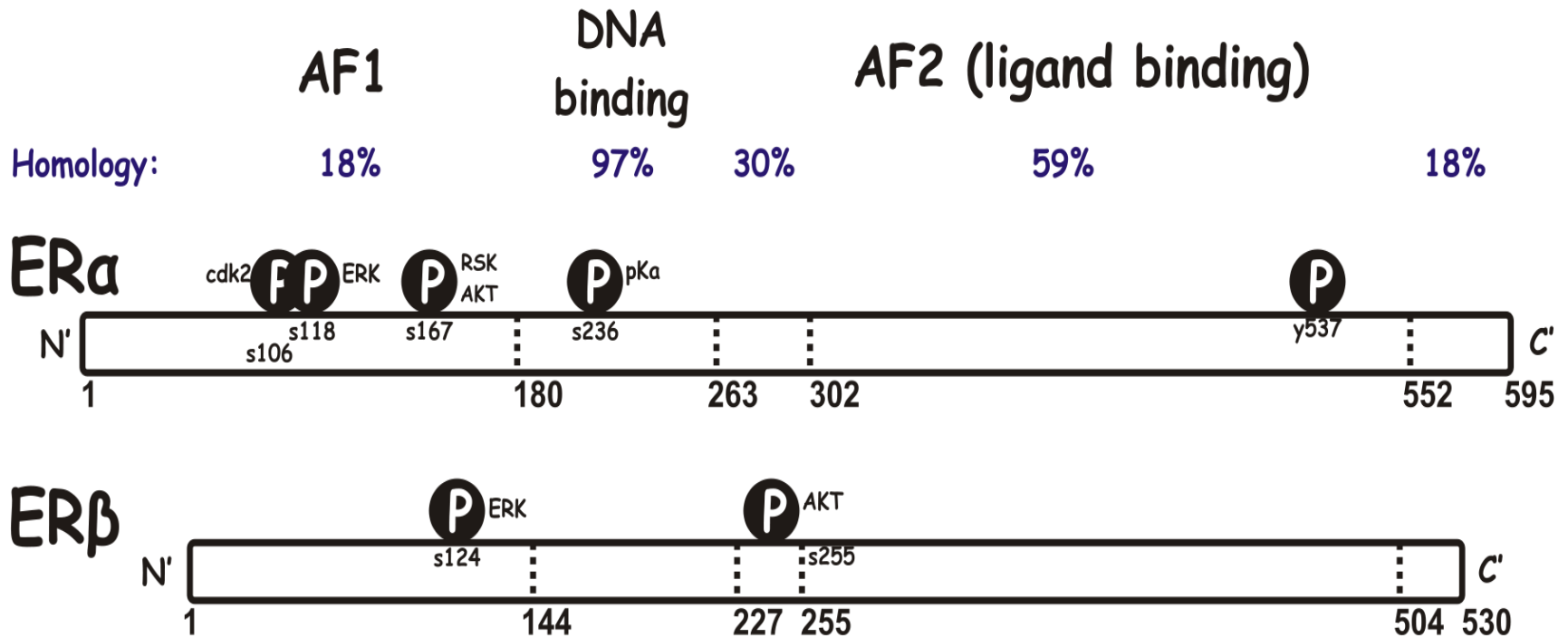
Spliced/truncated PR isoforms

(a) Dot blot hybridization of human mPR α (testicular), β (brain), and γ (kidney) mRNA probes with human multiple tissue arrays (CLONTECH).



Zhu Y et al. PNAS 2003;100:2237-2242

ESTROGEN RECEPTORS (ESR1 and ESR2)



AF1 = A/B Domain

DNA Binding Domain = C Domain

263-302 = D – Hinge Region

AF2 = E Ligand Binding Domain

TISSUE DISTRIBUTION OF ESR1 AND ESR2

- Both ESR1 and ESR2 are widely expressed in different tissue types with some notable differences
- ESR1 is found in uterus, breast cancer cells, ovarian stroma cells and hypothalamus.
- ESR2 is found in kidney, brain, bone, heart, lungs, intestinal mucosa, prostate, and endothelial cells.

Membrane ER Action

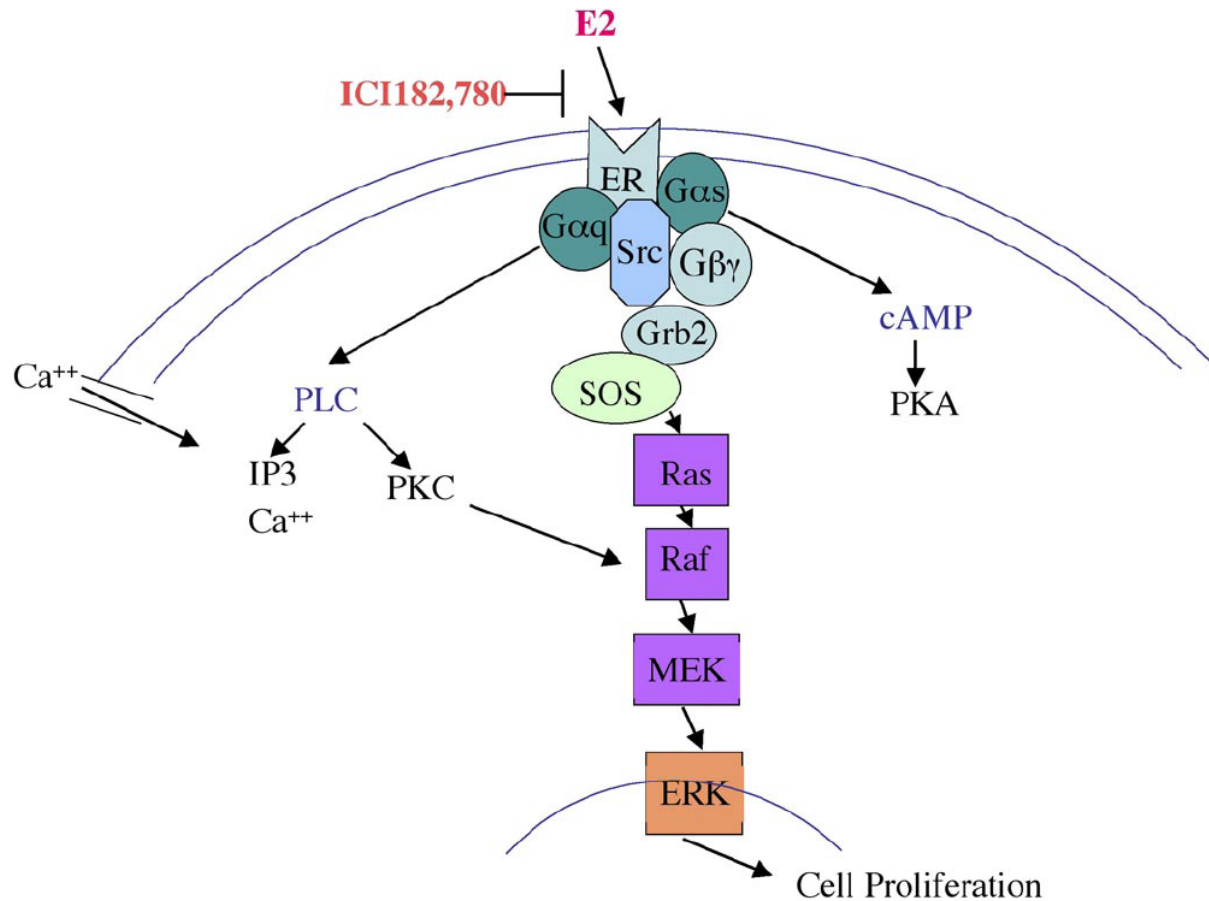


Fig. 1. Cartoon of membrane estrogen receptor (ER)- α rapid signaling in breast cancer cells. Membrane-translocated ER- α dimerizes in response to 17 β -estradiol (E₂), resulting in rapid G protein subunit activation. G protein activation results in other rapid signals generated, leading to kinase cascades and resulting cell biology. MEK, mitogen-activated protein kinase/extracellular regulated kinase; IP₃, inositol 1,4,5-trisphosphate.

Genomic and Non-genomic Actions of Steroid Receptors

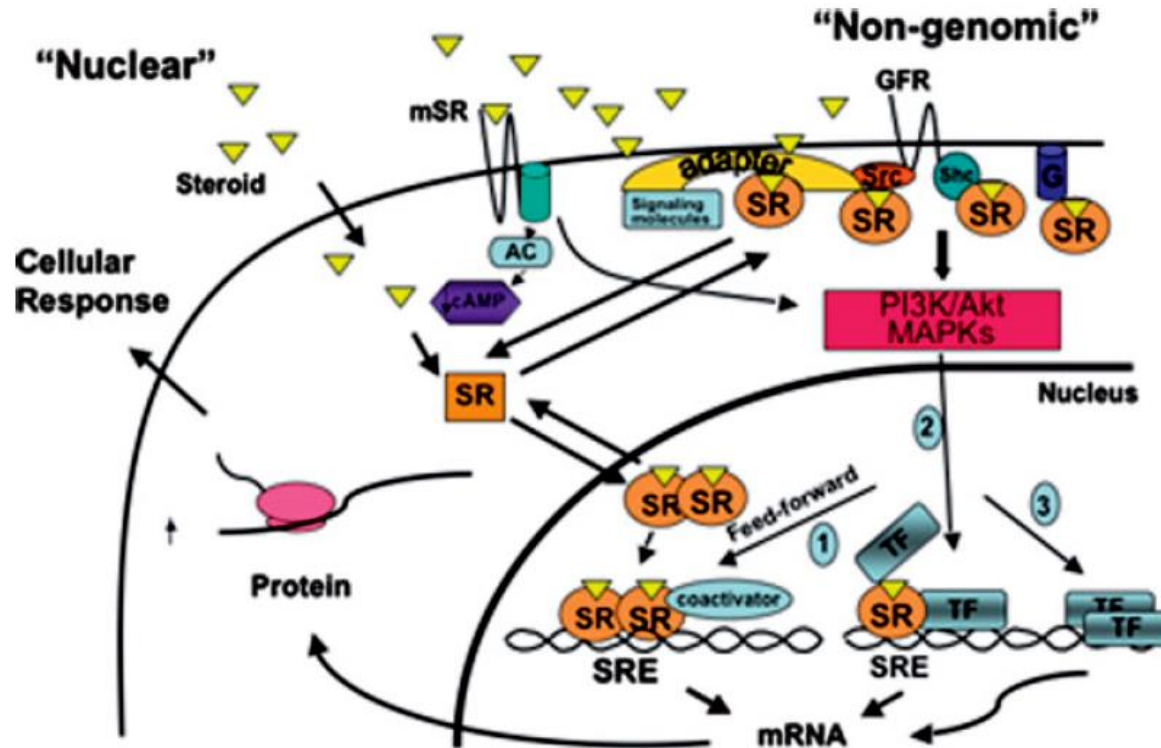


Figure 2 Nuclear transcriptional and non-genomic signaling pathways activated by sex steroid hormones. Sex steroids activate nuclear steroid hormone receptors (SR) by inducing receptor conformational changes, nuclear translocation, dimerization, and binding to steroid hormone response elements (SREs) in promoters/enhancers of target genes. Alternatively, a subpopulation of nuclear steroid receptors localized in cytoplasm/membrane can associate transiently with other signaling molecules including G protein-coupled receptor (GPCR; G), c-Src, Shc, adapter proteins (adapters), or membrane targeting proteins leading to activation of mitogen-activated protein kinase (MAPK) or phosphatidylinositol 3-kinase (PI3K)/Akt signaling cascades. Novel GPCR membrane receptors (mSR) unrelated to nuclear steroid receptors have been reported to also mediate rapid non-genomic effects of steroid hormones through inhibition of adenylate cyclase (AC) and cyclic adenosine monophosphate (cAMP) production and activation of MAPK. A biological consequence of sex steroid-induced activation of cytoplasmic signaling cascades is ultimately to influence gene transcription by three possible mechanisms. (1) A feed-forward regulatory loop whereby the nuclear transcriptional activity of SR or coactivators are enhanced by phosphorylation. (2) Signaling pathways that converge upon and activate target genes that require other transcription factors (TF) to cooperate with SRs either by tethering or by binding on composite SRE promoters. (3) Activation of other transcription factors independent of direct SR binding to DNA.

Gene Structure

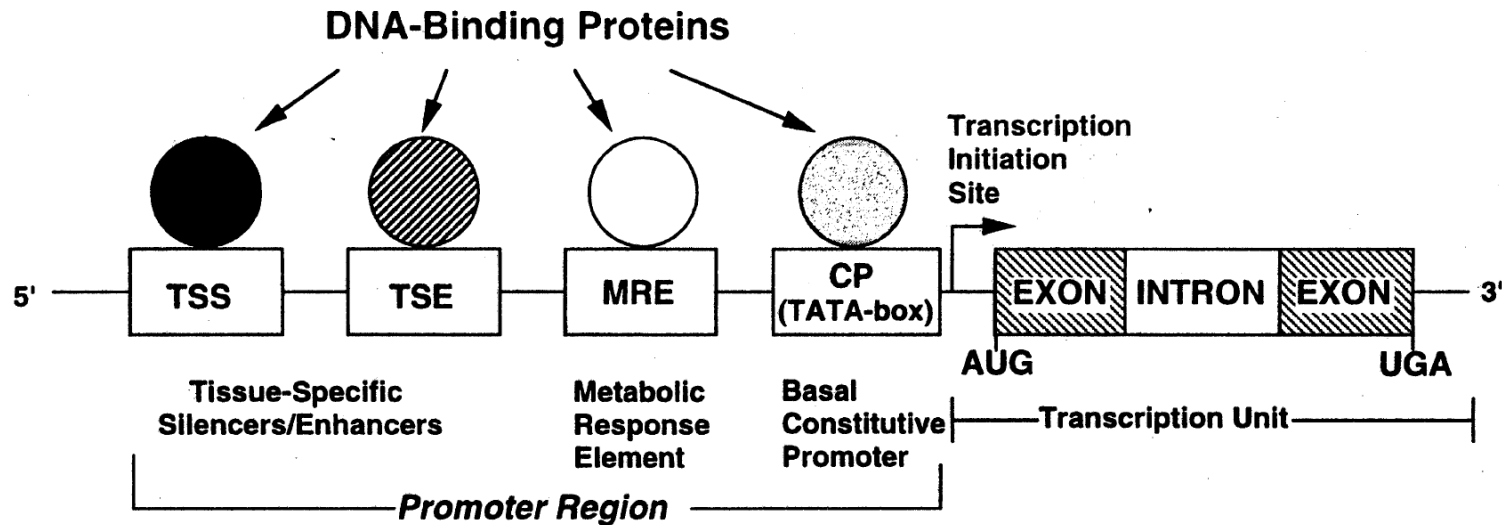


Figure 2-8. Diagrammatic structure of a "consensus" gene encoding a prototypical polypeptide hormone. Such a gene typically consists of a promoter region and a transcription unit. The transcription unit is the region of DNA composed of exons and introns that is transcribed into a mRNA precursor. Transcription begins at the cap site sequence in DNA and extends several hundred bases beyond the poly(A) addition site in the 3' region. During post-transcriptional processing of the RNA precursor, the 5' end of mRNA is capped by addition of methylguanosine residues. The transcript is then cleaved at the poly(A) addition site approximately 20 bases 3' to the AATAAA signal sequence, and the poly(A) tract is added to the 3' end of the RNA. Introns are cleaved from the RNA precursor, and exons are joined together. Dinucleotides GT and AG are invariably found at the 5' and 3' ends of introns. Translation of mRNA invariably starts with the codon ATG for methionine. Translation is terminated when the polyribosome reaches the stop codons TGA, TAA, or TAG. The promoter region of the gene located 5' to the cap site contains numerous short regulatory DNA sequences that are targets for interactions with specific DNA-binding proteins. These sequences consist of the basal constitutive promoter (TATA box), metabolic response elements that modulate transcription, e.g., in response to cAMP, steroid hormone receptors, and thyroid hormone receptors, as well as tissue-specific enhancers and silencers that permit or prevent transcription of the gene, respectively. The enhancer and silencer elements direct expression of specific subsets of genes to cells of a given phenotype. Whether a gene will or will not be expressed in a particular cellular phenotype depends on complex interactions of the various DNA-binding proteins among themselves and, most important, with the TATA box proteins of the basal constitutive promoter.

Anatomy of Nuclear Receptors and Typical Gene Structure

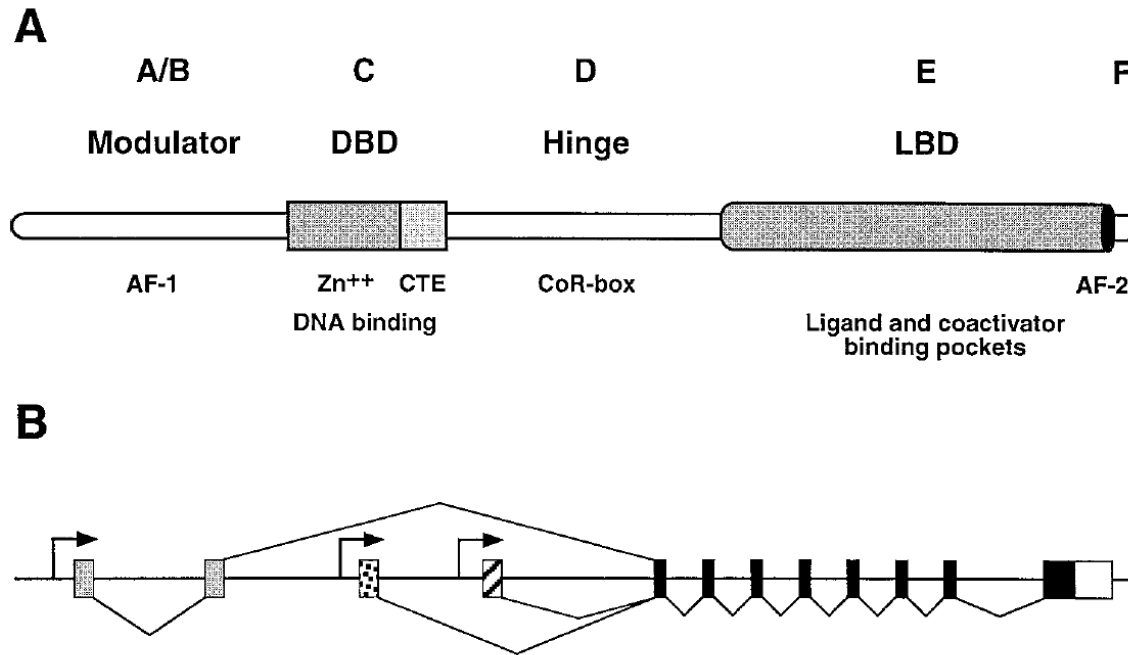
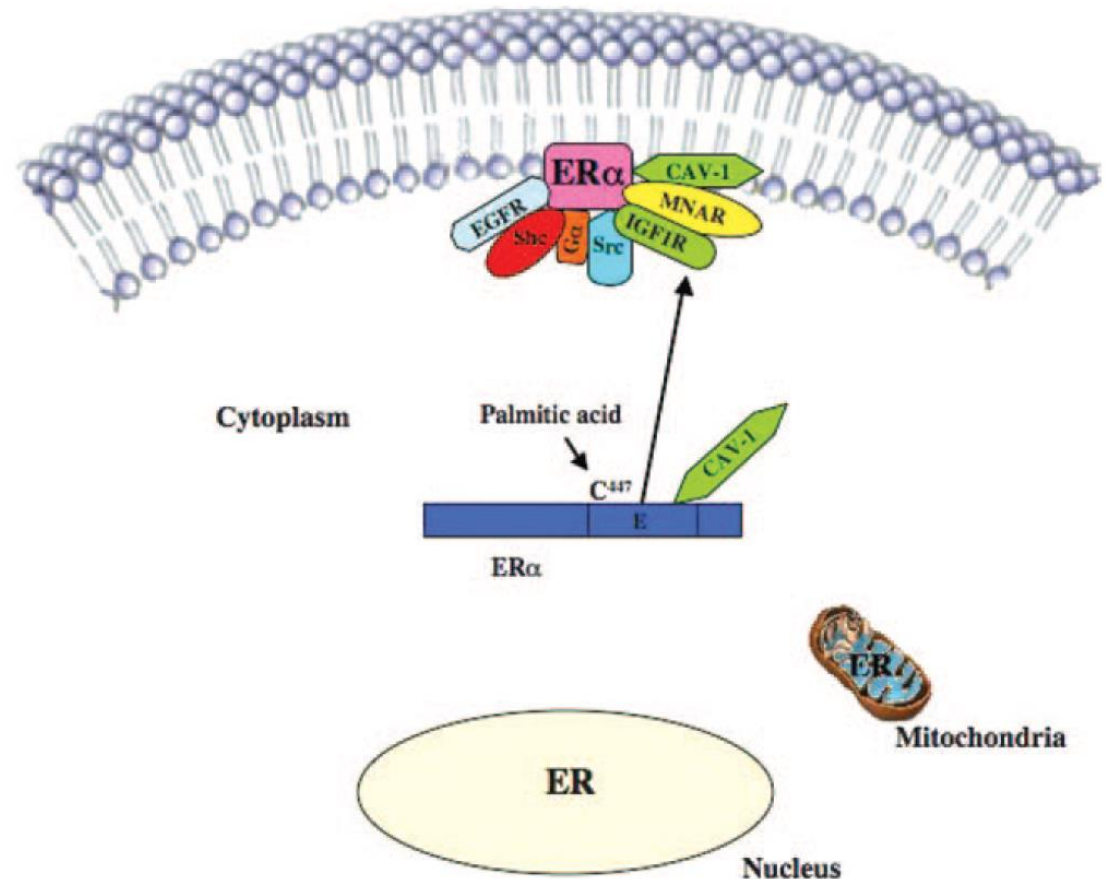


FIG. 2. Anatomy of nuclear receptors and typical gene structure. A, Nuclear receptors are composed of independent functional domains that include the DBD and LBD, the primary functions of which are to recognize specific DNA sequences and ligands, respectively. Nuclear receptors generally possess two transcription activation functions (AF-1 and -2) located at the amino and carboxy termini. The division of nuclear receptors into domains A–F is based on the degree of amino acid sequences conservation between the same receptor in different species. B, Schematic representation of the exon-intron organization of a typical nuclear receptor gene. The modulator domain is usually encoded by one or two exons. Distinct modulator domains can be generated by alternative promoter usage (*arrows*) and splicing (*linked exons*). The two zinc finger modules are generally encoded by distinct exons while the hinge and LBD are encoded by 6 to 10 exons. Additional alternative splicing may generate nuclear receptors with modified LBDs.

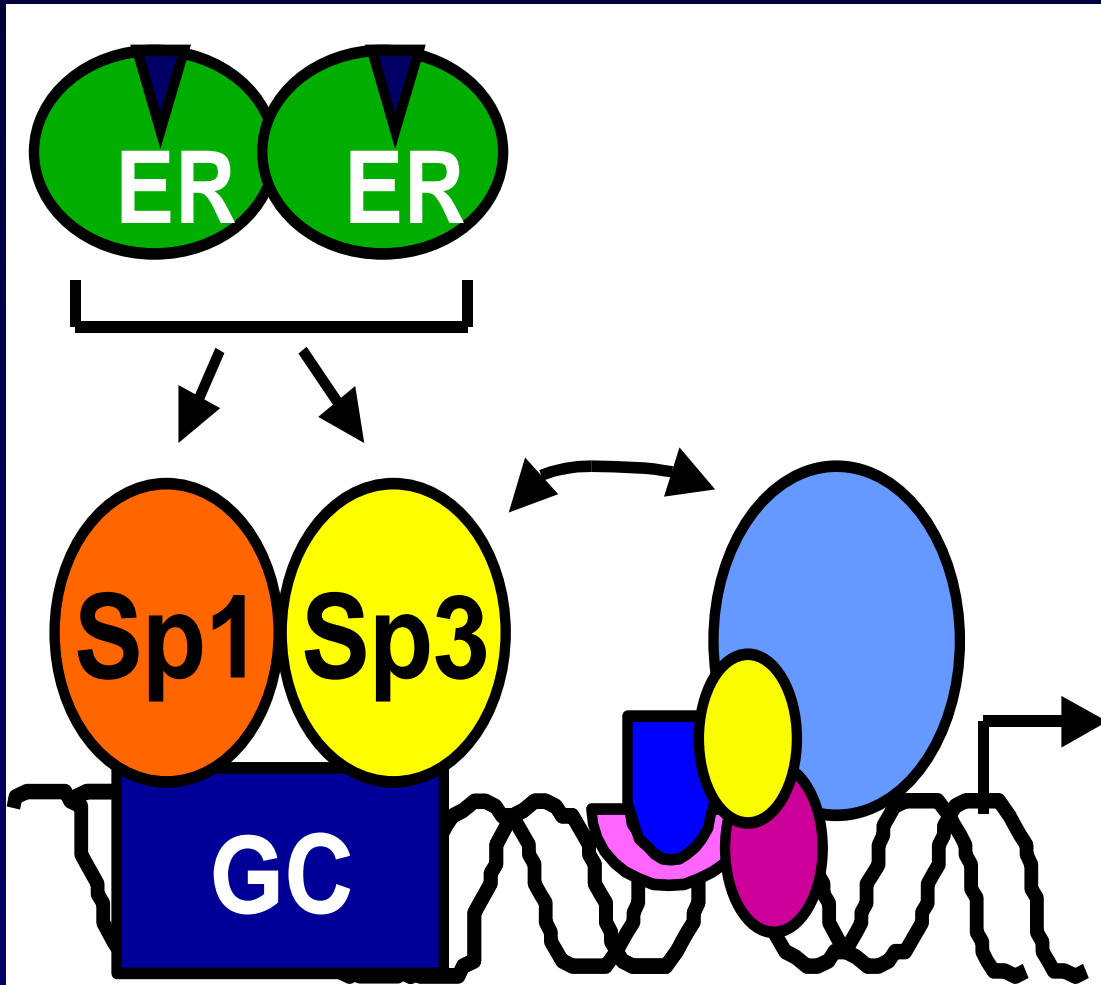
AF = activation function DBD = DNA binding domain LBD = ligand binding domain
 CoR = coregulator interaction box

Translocation of ESR1

FIG. 1. Translocation of ER α to the plasma membrane. Palmitoylation at cysteine 447 of ER α promotes the association of the steroid receptor with caveolin 1. The scaffolding domain of caveolin-1 (amino acids 80–100) then facilitates the translocation of caveolin and ER to the caveolae rafts in the membrane. Here, ER associates with a large protein complex, changing in nature depending upon the cell and signal context, to effect G protein activation and downstream signaling to cell biology.

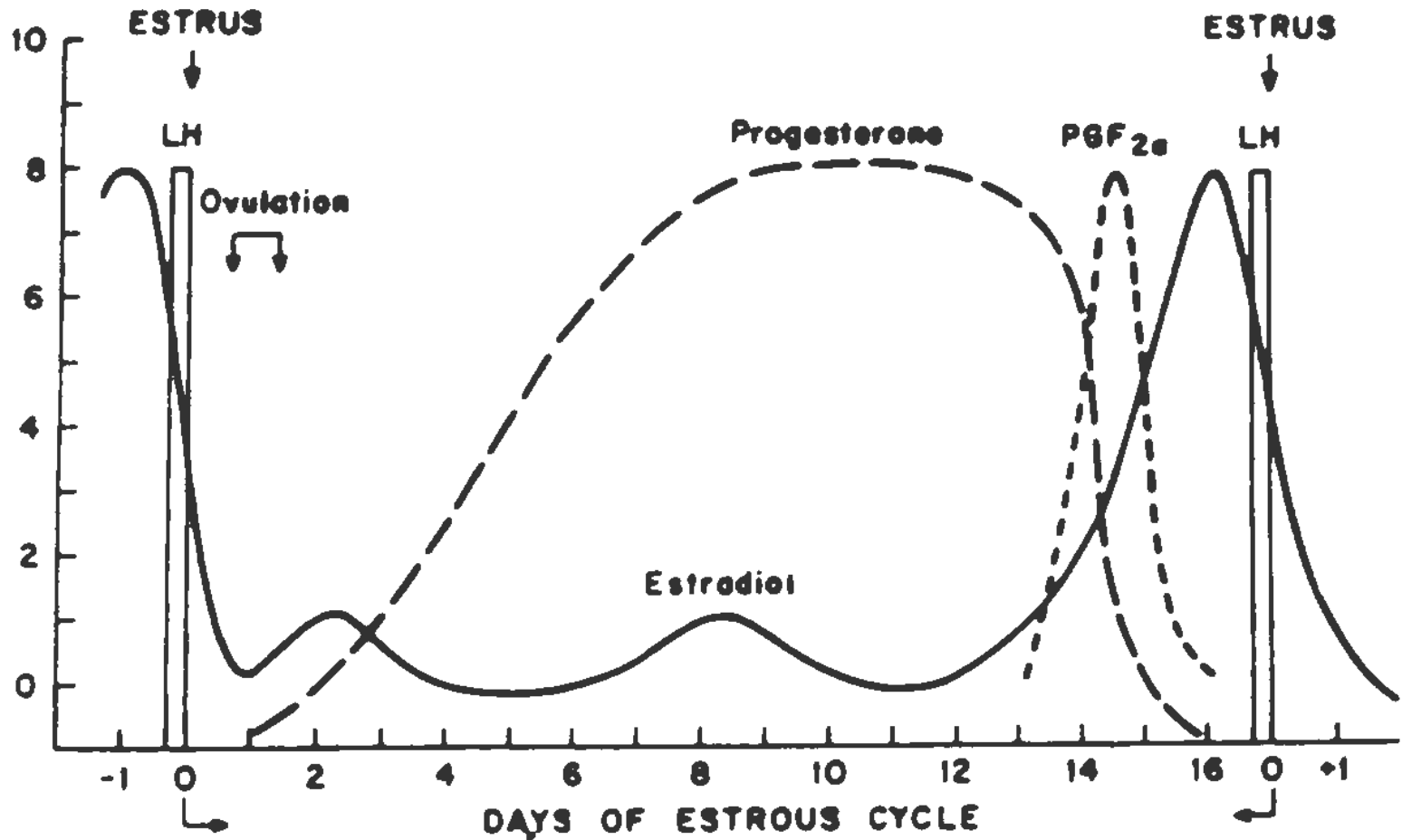


DNA-INDEPENDENT ER/Sp1 ACTION TRANSACTIVATION



- ER α /Sp1 or ER α /Sp3 upregulation
- Enhances cofactor recruitment

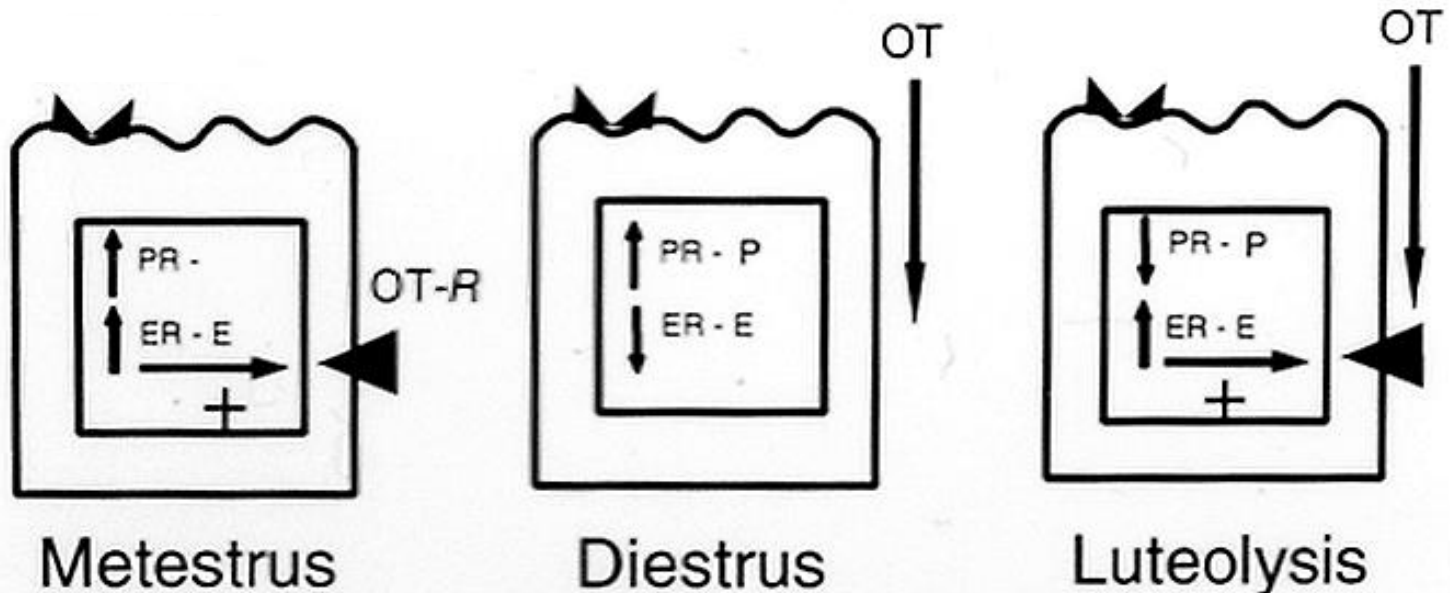
Hormone Profile in Cyclic Ewes



McCracken Hypothesis

(Anim Reprod Sci 1984; 7:31-55)

Regulation of Luteolysis



"Progesterone Block"

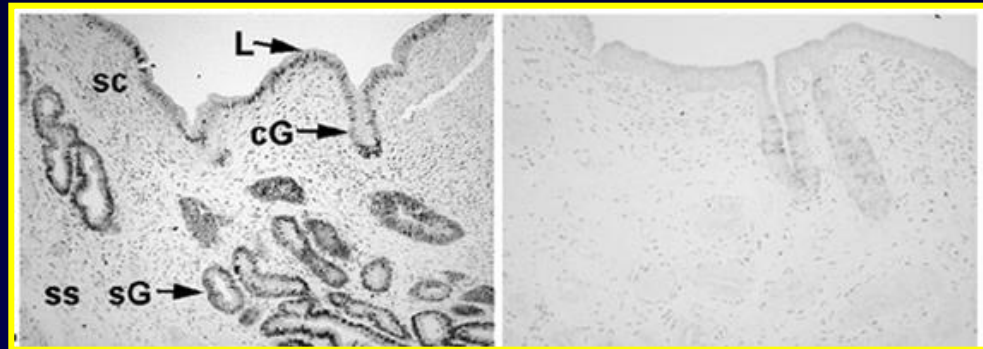


Hormone Receptors During Development of the Endometrial Luteolytic Mechanism in Cyclic Ewes

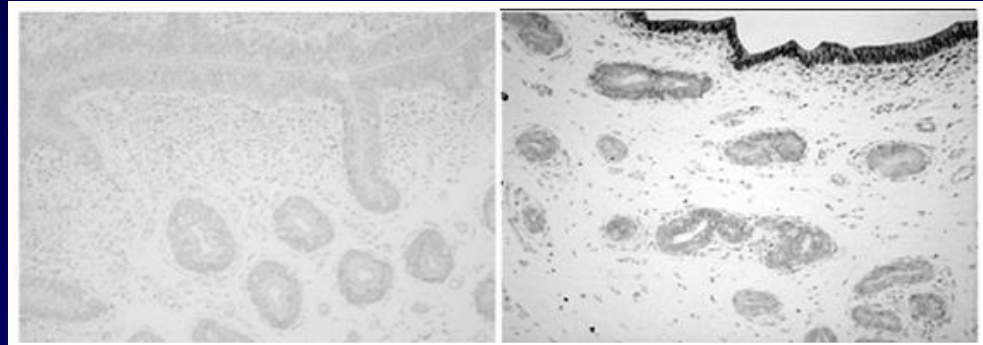
Day 9

Day 15

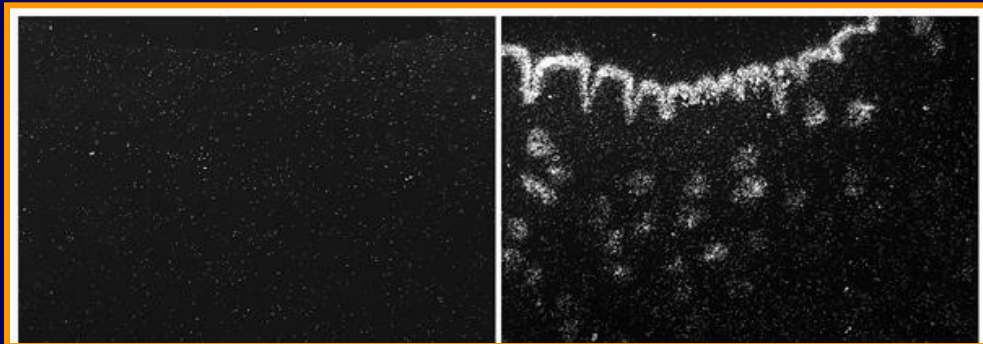
**Progesterone
Receptor
(PGR)**



**Estrogen
Receptor α
(ESR1)**

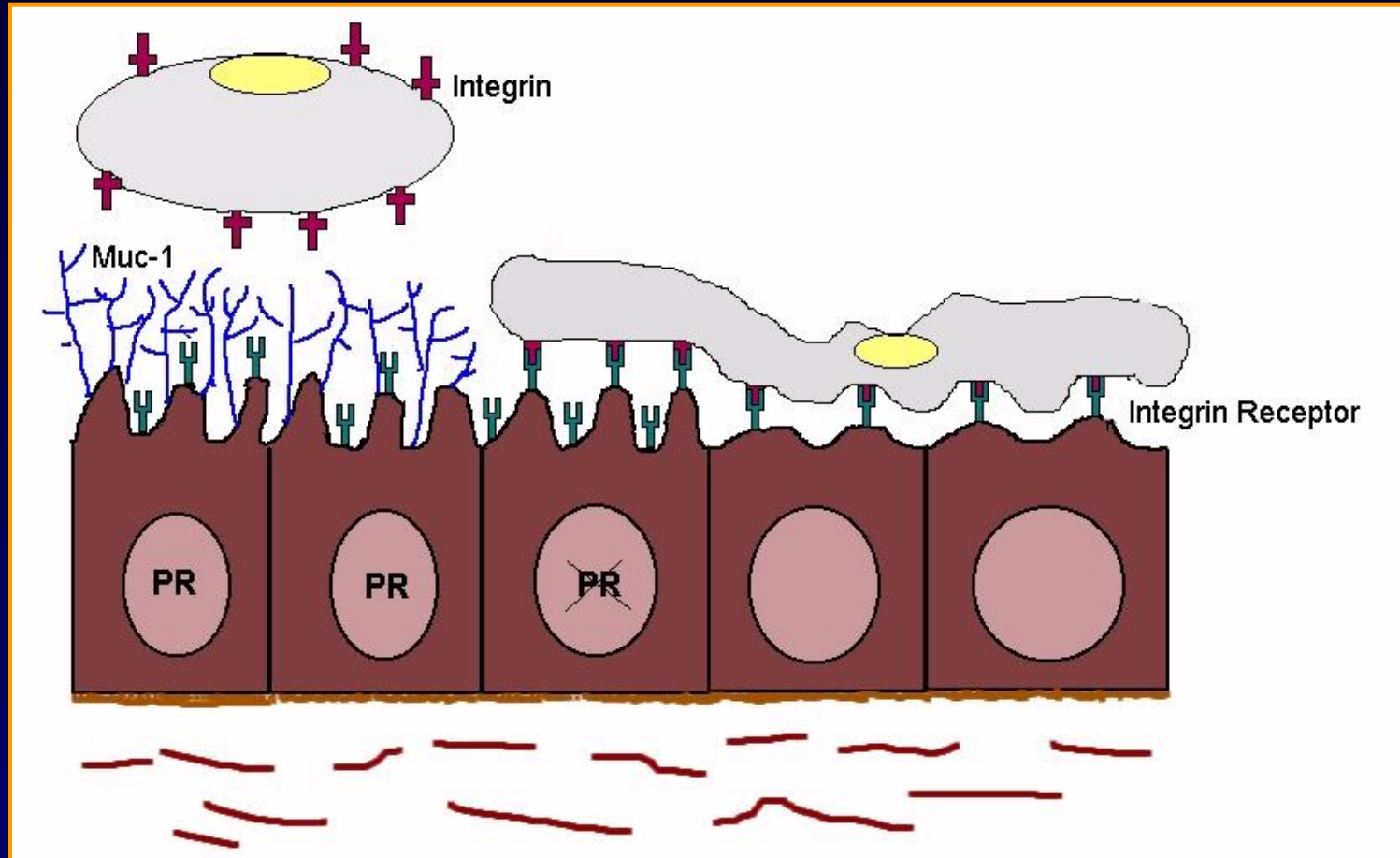


**Oxytocin
Receptor
(OXTR)**



Common Feature of Pregnancy

Loss of PGR is universal event in rodents, pig, ruminants, ferret, skunk, shrew and human



- Decline in anti-adhesive Muc-1
- Increase in certain adhesive integrins
- Change in patterns of epithelial gene expression

Fibroblast Growth Factors 7 and 10: Progestamedins

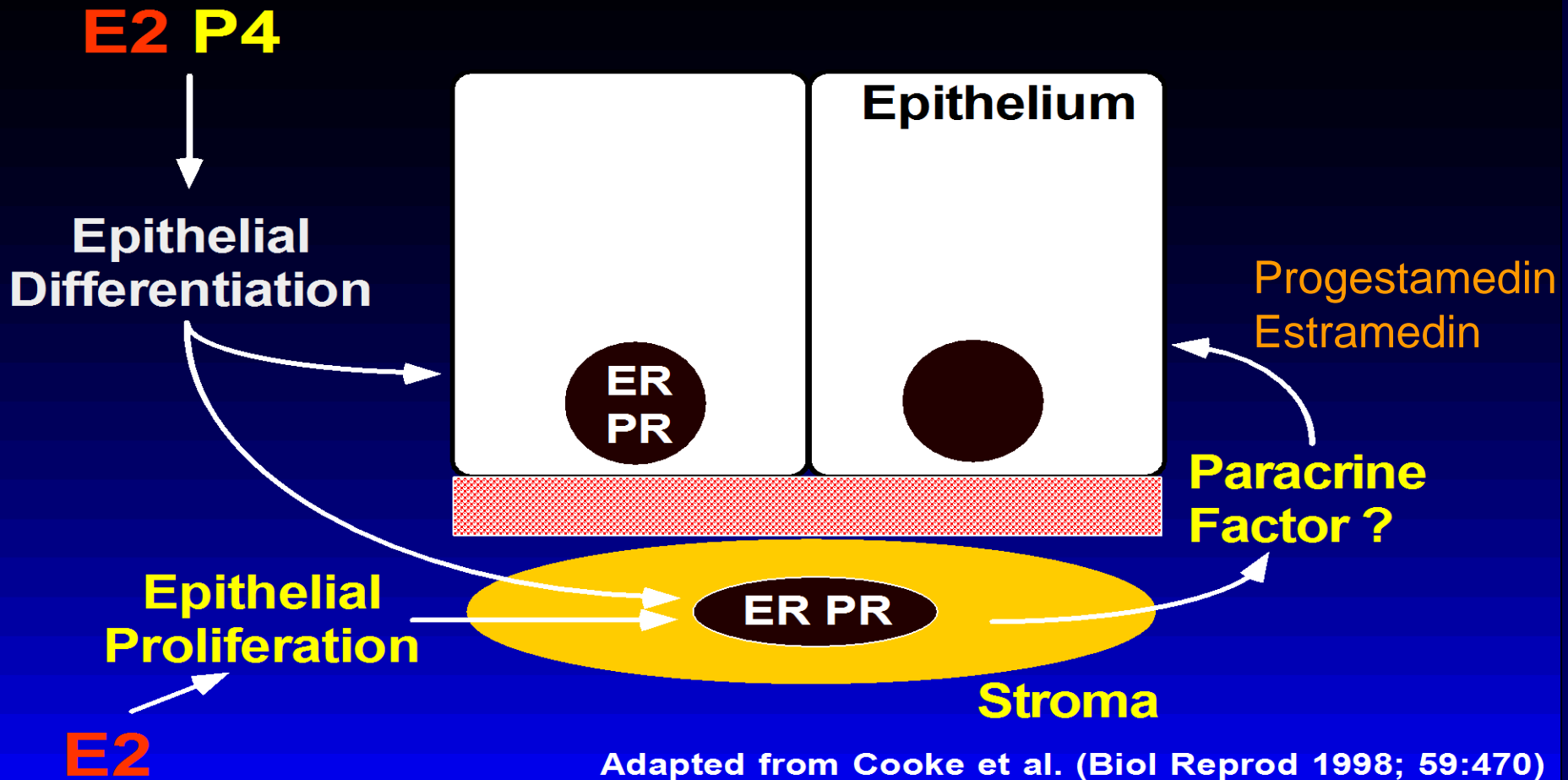
- Fibroblast growth factor-7 (FGF-7)
- 25 - 30 kDa monomeric polypeptide
- Binds to KGFR (FGFR2IIIb) for signaling
- Cell proliferation, differentiation, morphogenesis, anti-apoptosis
- Mesenchymal origin in skin, lung, ovary, prostate, uterus
- **Paracrine growth factor in epithelial-mesenchymal interaction(EMI)**

Hepatocyte Growth Factor(HGF, Progestamedin/Estramedin

- 728 amino acid heparin binding protein**
- Isolated from rat platelets as a mitogen for hepatocytes in primary culture**
- Pro-HGF is converted to heterodimer**
- Multi-function: mitogenesis, morphogenesis, angiogenesis, motogenesis**
- Widely expressed (testis, prostate, ovary, uterus, placenta)**
- Estrogen up-regulates HGF mRNA in mouse ovary and primate uterus**
- Paracrine Growth Factor that mediates stromal-epithelial cell signaling**

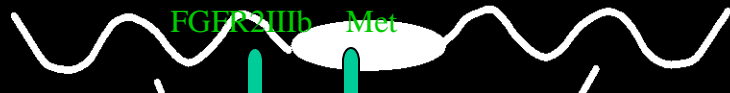
COMMON FEATURES OF PREGNANCY

STEROID RECEPTOR CONTROL OF ENDOMETRIAL CELL FUNCTION



Why Do SC Remain PGR Positive? Does P4 regulate progesterones?

Conceptus



IFN τ

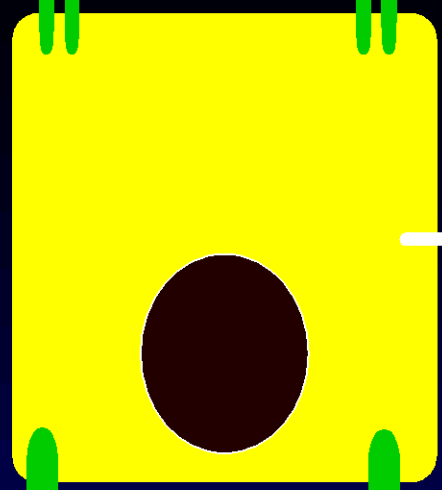
PL/GH

Paracrine

IFNAR

PRL-R/GH-R

Epithelium



Uterine Secretory Response

FGFR2IIIb

c-met

FGF-7/FGF-10

HGF

Paracrine

Stroma



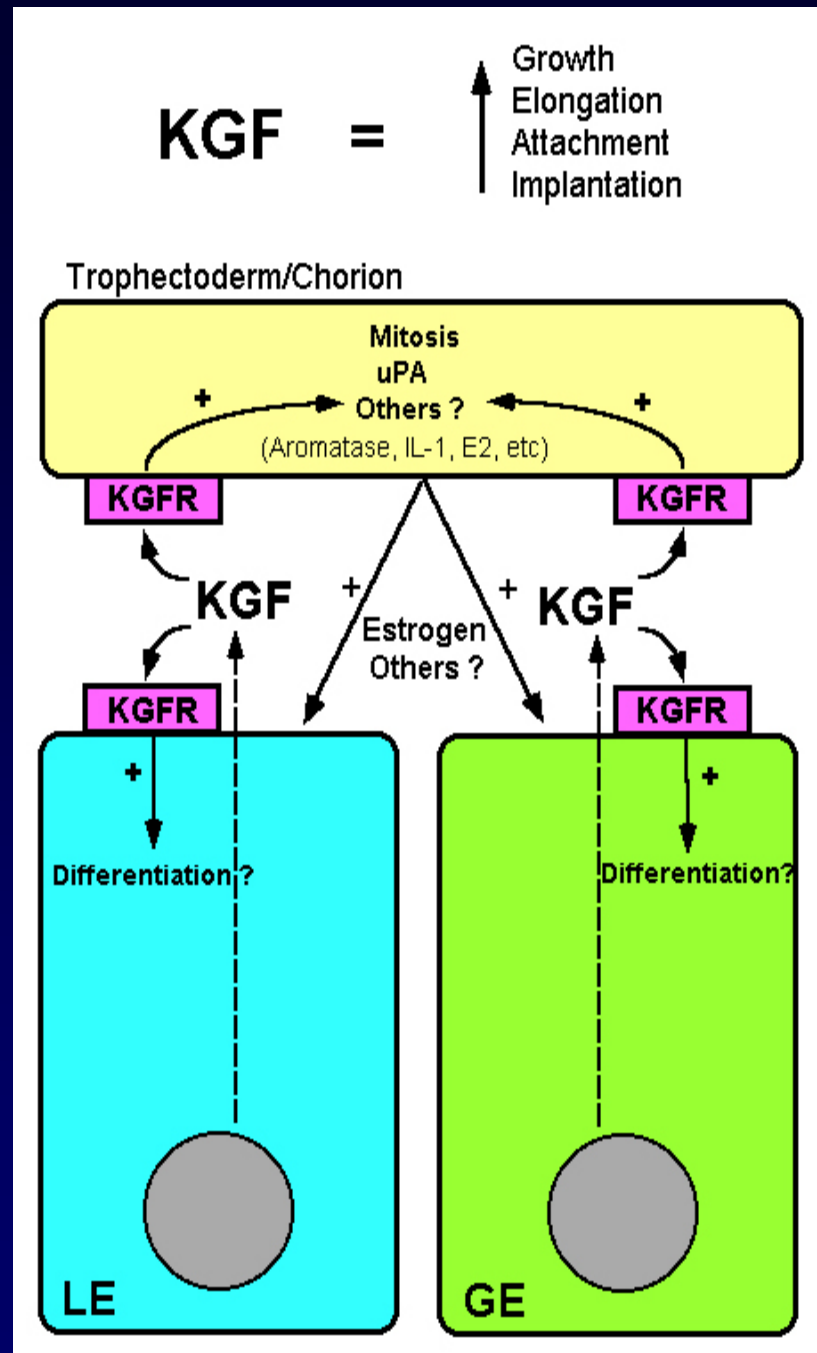
Endocrine

Ovarian Steroids

Working Model of FGF7/KGF Expression and Function in the Porcine Uterus

FGF7 Expressed by LE to Day 20 and then by GE

FGFR2IIIb Expressed by LE, GE and Tr



Responses to target cell to E2:

1. Histamine mobilization
2. Hyperemia
 - a.growth of blood vessels
 - b.vasodilation
3. Lysosome labilization (lysosomal membrane becomes more fragile.
4. in RNA and protein synthesis
5. in lipid metabolism because Ca mobilization and arachadonic acid production
6. in secretion-due to release of secretory vesicles (stimulus-secretion coupling)-some pancreatic proteins can be release this way.
7. precursor uptake-amino acid production and glucose
8. _mitotic activity
9. cell hypertrophy
10. in membrane excitability
11. in OXTR (parturition, luteolytic mechanism)
12. in Ca mobilization
13. water inhibition of tissue

Responses to target cells to progesterone:

1. RNA and protein synthesis
 2. growth of uterine glands
 3. water inhibition
 4. membrane potential (smooth muscle cell relaxed)
- LD50 -because can cause relaxation of the diaphragm and kill rat
5. phospholipid stores
 6. PG synthesis (PG synthase and phospholipid stores must be present)
 7. substrate (AA and glucose) uptake
 8. mitotic activity

Biological Effects of Progesterone

- Converts uterine endometrium to secretory stage for implantation and pregnancy.
- Increases thickness of vaginal epithelium and cervical mucus to form cervical “plug”
- Prepares uterus to produce prostaglandin F₂-alpha to regress CL in subprimate mammals
 - Increase phospholipids in uterine epithelia that yield arachadonic acid
 - Increase Prostaglandin Synthase II that converts arachidonic acid to prostaglandins, e.g., PGF₂ α

Biological Effects of Progesterone

- Stimulates development of uterine glands for pregnancy
- Stimulates uterine secretions to support development of conceptus to term
- Decreases contractility of uterine myometrium
- Inhibits lactation during pregnancy: decrease in P4 necessary for milk production.
- Decreases to allow myometrial contractions
- Precursor for placental estrogens and adrenal cortisol

Biological Effects of Progesterone

- Down-regulates estrogen receptors in uterine epithelia
- Down-regulates progesterone receptors in uterine epithelia
 - A prerequisite for implantation
 - A prerequisite for gene expression by uterine epithelia
- Induces expression of progestamedins by uterine stromal cells, e.g., FGF7, FGF10, HGF

Biological Effects of Progesterone

- Neuroprotective - protects nerve myelination
- Improves memory and cognitive functions
- Suppresses apoptotic (cell death) genes
- Mood stabilizer with analgesic effects
- LD50 due to relaxation of neuronal inputs into smooth muscle such as diaphragm
- Increases endorphins, enkephalins and dynorphins to decrease pain

Other Biological Effects of Progesterone

- Increase epidermal growth factor to induce cell proliferation and sustain stem cells
- Increases core body temperature
- Anti-inflammatory and regulates immune cells
- Normalizes blood clotting and vascular tone
- Prevents uterine cancer, perhaps by ensuring down-regulation of progesterone and estrogen receptors in uterine epithelia
- Prevents mammary tumors, perhaps by ensuring down-regulation of progesterone and estrogen receptors in mammary epithelia

Biological Effects of Estrogen

Female Sex Hormone

- Promote development of female secondary sexual characteristics
 - breasts, uterus, recovery of endometrium after menses
 - thickening of the endometrium during follicular phase of menstrual cycle
 - regulate menstrual cycle via effects on GnRH and uterine production of $\text{PGF2}\alpha$

Biological Effects of Estrogen

Female Sex Hormone

- Induces closure of epiphyseal plate on long bones
- accelerate metabolism (burn fat)
- reduce muscle mass
- stimulate endometrial growth
- increase uterine growth
- increase vaginal lubrication
- thicken the vaginal wall
- maintenance of blood vessels and skin
- reduce bone resorption, increase bone formation –
supresses acid phosphatase 5/uteroferrin

Biological Effects of Estrogen

- protein synthesis
 - Increase production of steroid binding proteins in liver
- coagulation
 - increase circulating level of factors 2, 7, 9, 10, plasminogen
 - decrease antithrombin III
 - increase platelet adhesiveness
- Lipid
 - increase HDL, triglyceride
 - decrease LDL, fat deposition
- Fluid balance
 - Sodium and water retention

Biological Effects of Estrogen

- Hormones
 - increase cortisol, Steroid Hormone Binding Globulin
- Gastrointestinal tract
 - reduce bowel motility
 - increase cholesterol in bile
- Melanin
 - increase pheomelanin, reduce eumelanin (skin pigments)
- Cancer
 - support hormone-sensitive breast cancers
- Lung function
 - promotes lung function by supporting alveoli
- Sexual desire is dependent on androgen levels and estrogen levels

Biological Effects of Estrogen

- In mice, estrogens (which are locally aromatized from androgens in the brain) play an important role in psychosexual differentiation
- Estrogen withdrawal: mood lowering and depression - recovery from postpartum, perimenopausal, and postmenopausal depression
- Negative feedback on hypothalamus and anterior pituitary to reduce circulating levels of FSH and LH
- Estrogen during proestrus increases GnRH Receptors in Anterior Pituitary (gonadotrophs) and release of ovulatory surge of LH

Biological Effects of Estrogen

- Increase receptors for progesterone and estrogens in reproductive tissues and mammary tissues
- Induces expression of genes, e.g., oxytocin
- Stimulates cell proliferation
- Increases mobilization of histamines and lipids, such as lysophosphatidic acid that stimulates migration of embryos in pigs and rodents and perhaps other species
- Induces increases in vasodilation of blood vessels
- Key component of uterine luteolytic mechanism

Half-Life of Protein, Amine and Steroid Hormones in Plasma

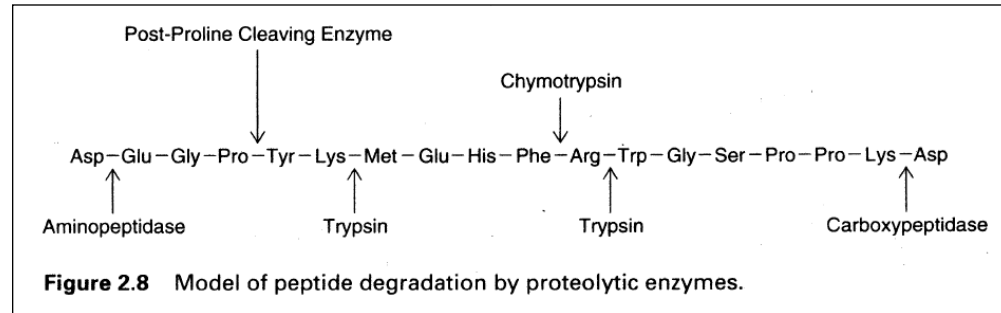
Table 1-3 Half-Life of Protein, Amine, and Steroid Hormones in Plasma

Hormone	Half-life
Amines	2–3 minutes
Thyroid hormones	
T ₄	6.7 days
T ₃	0.75 day
Polypeptides	4–40 minutes
Proteins	15–170 minutes
Steroids	4–120 minutes

Hormone metabolism

• Inactivation

- Regulatory mechanism
- Intracellular and extracellular
- Enzymatic

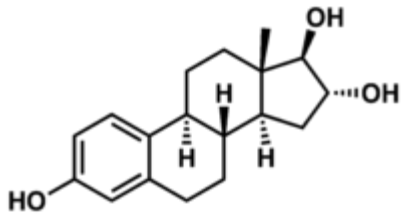


- Carboxypeptidases, aminopeptidases, endopeptidases
- Deamination
- Reduction of disulfide bonds

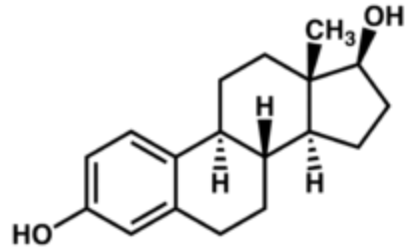
• Conjugation (steroid hormones – sulfate and glucuronide forms)

- Deiodination (thyroid hormone)

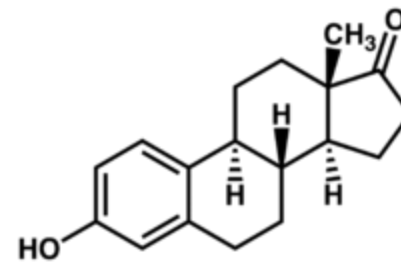
ESTRIOL, E3



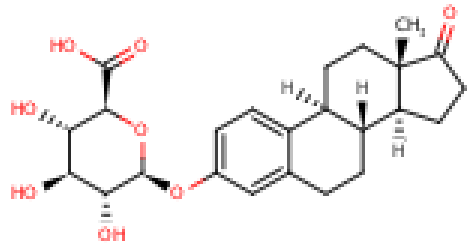
ESTRADIOL, E2



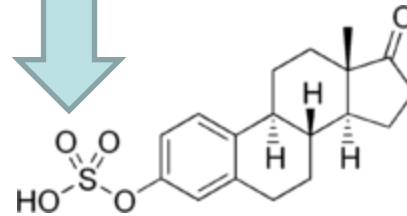
ESTRONE, E1



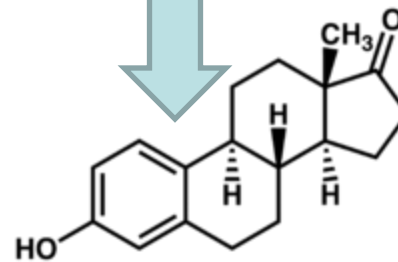
UDP glucuronyltransferase



Sulfotransferase



Sulfatase



PROLACTIN



Prolactin is a single chain polypeptide of 199 amino acids with a molecular weight of about 24,000 daltons. Its structure is similar to that of growth hormone and placental lactogen. The molecule is folded due to the activity of three disulfide bonds.

Major Functions of Prolactin

- Mammogenesis and Lactogenesis
- Formation and Function of Corpus Luteum, particularly in rodents
- Immunological Competence
- Uterine Secretory Activity
- Lung Maturation in Fetus
- Activates Janus Kinase – Signal Transducer and Activator of Transcription Cell Signaling
- Transport of Water and Electrolytes Across Membranes
- Rapid Eye Movement (REM) Sleep

Lactogenic Hormones

- PROLACTIN - PRL
- PLACENTAL LACTOGEN - PL
- DECIDUAL PROLACTINS -dPRL

**ALL SIGNAL VIA HOMODIMER OF
PROLACTIN RECEPTORS OR
HETERODIMER OF PROLACTIN
RECEPTOR AND GROWTH HORMONE
RECEPTOR**

Rodents

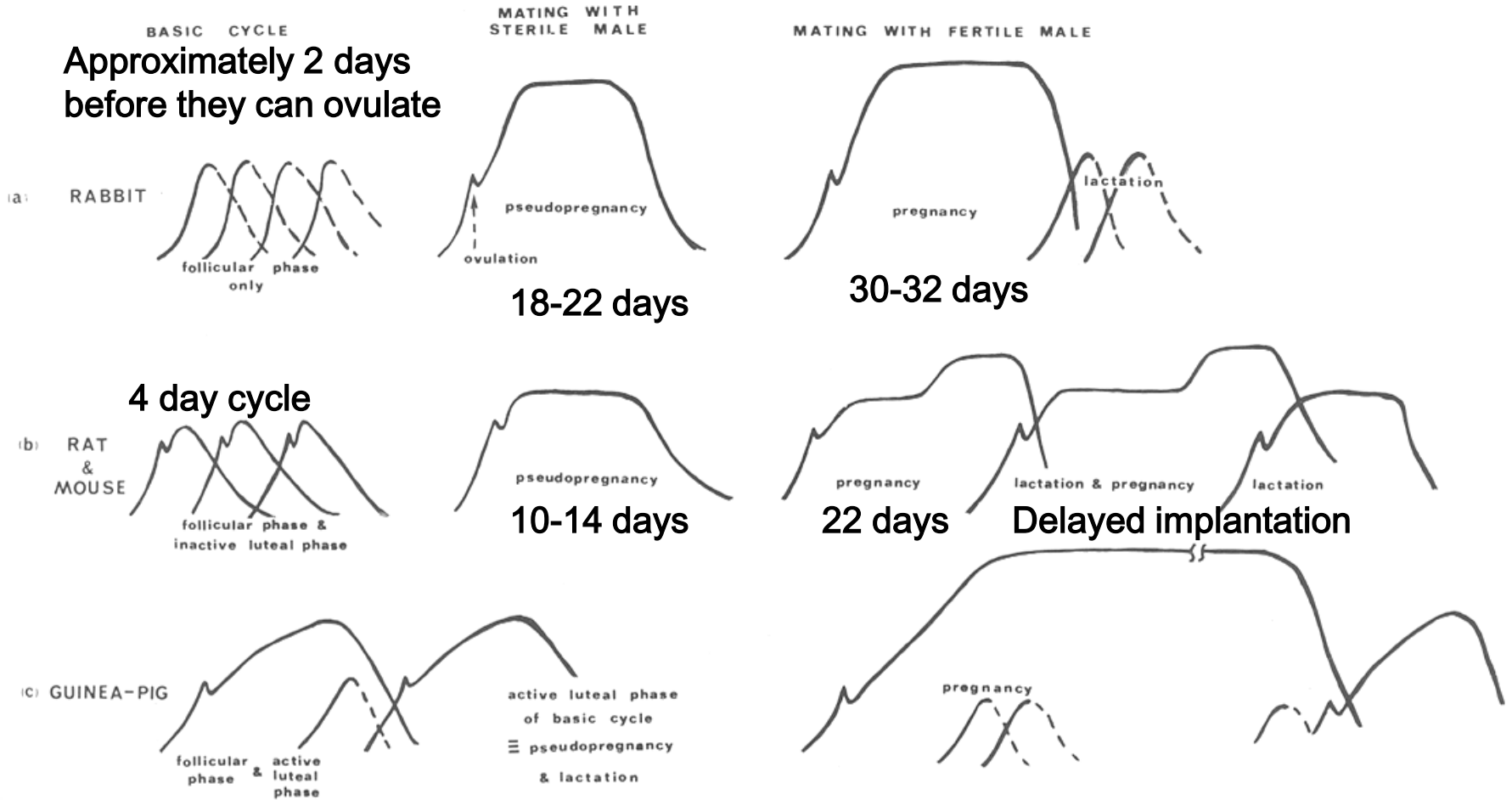
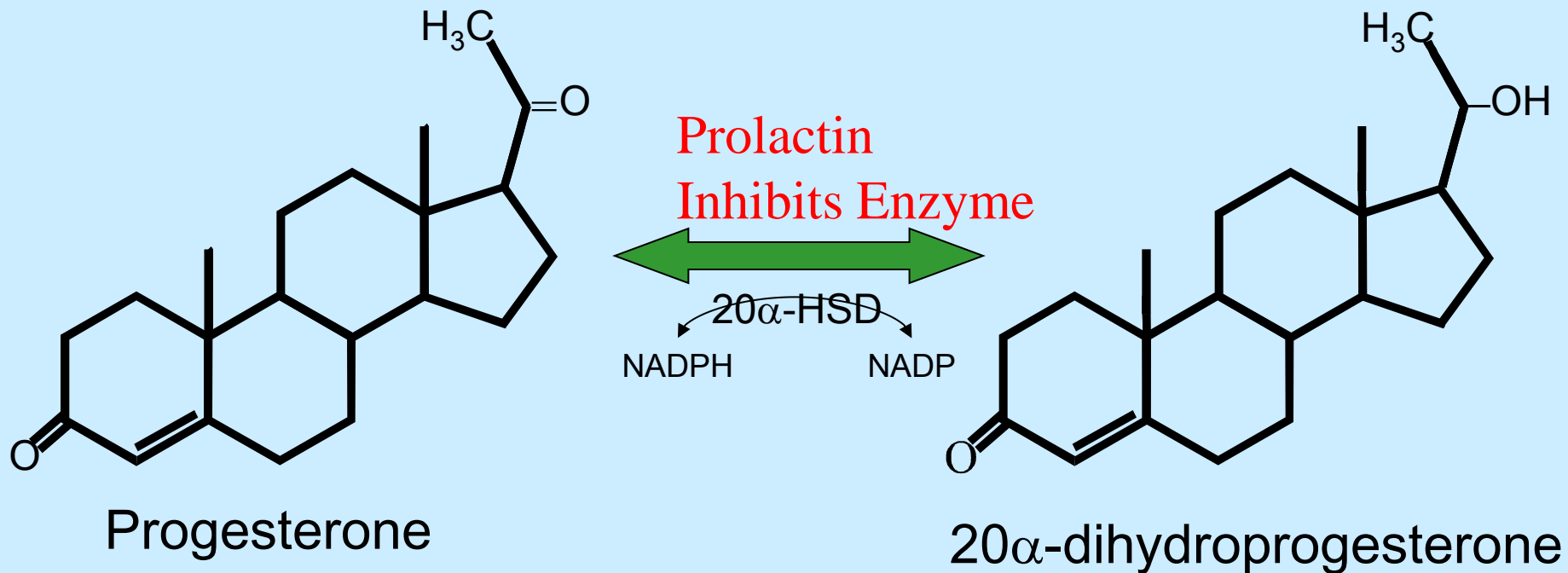


Fig. 7.1 Diagram of various types of ovarian cycle depicting the growth of the follicles and the corpora lutea as modified in various reproduction states in (a) reflexly and (b, c) spontaneously ovulating mammals. (From Rowlands & Weir 1977)

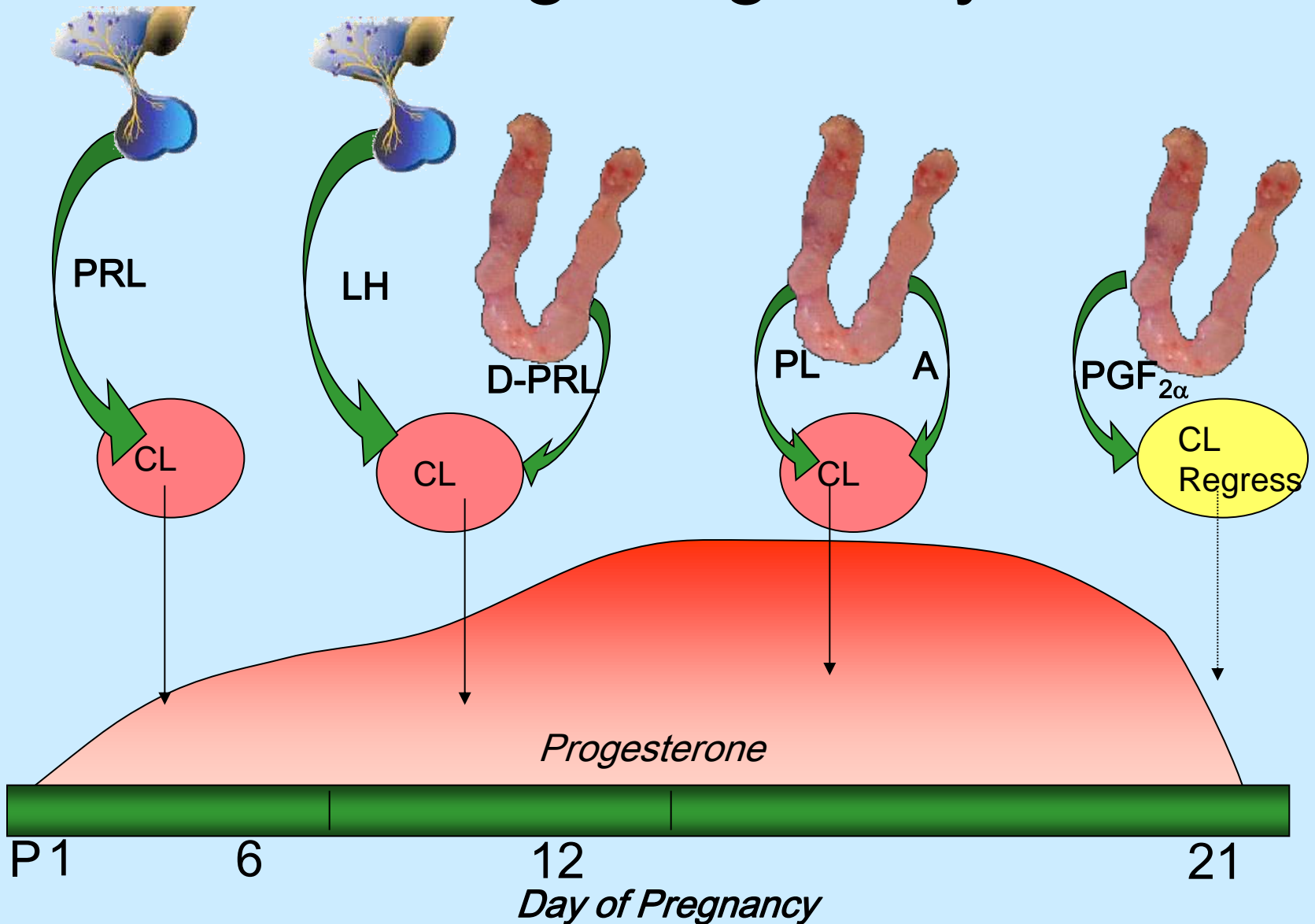
20 α -Hydroxysteroid Dehydrogenase

20 α -HSD



Does not support pregnancy
or decidualization in rodents

Regulation of Rat Corpus Luteum during Pregnancy



NOMENCLATURE

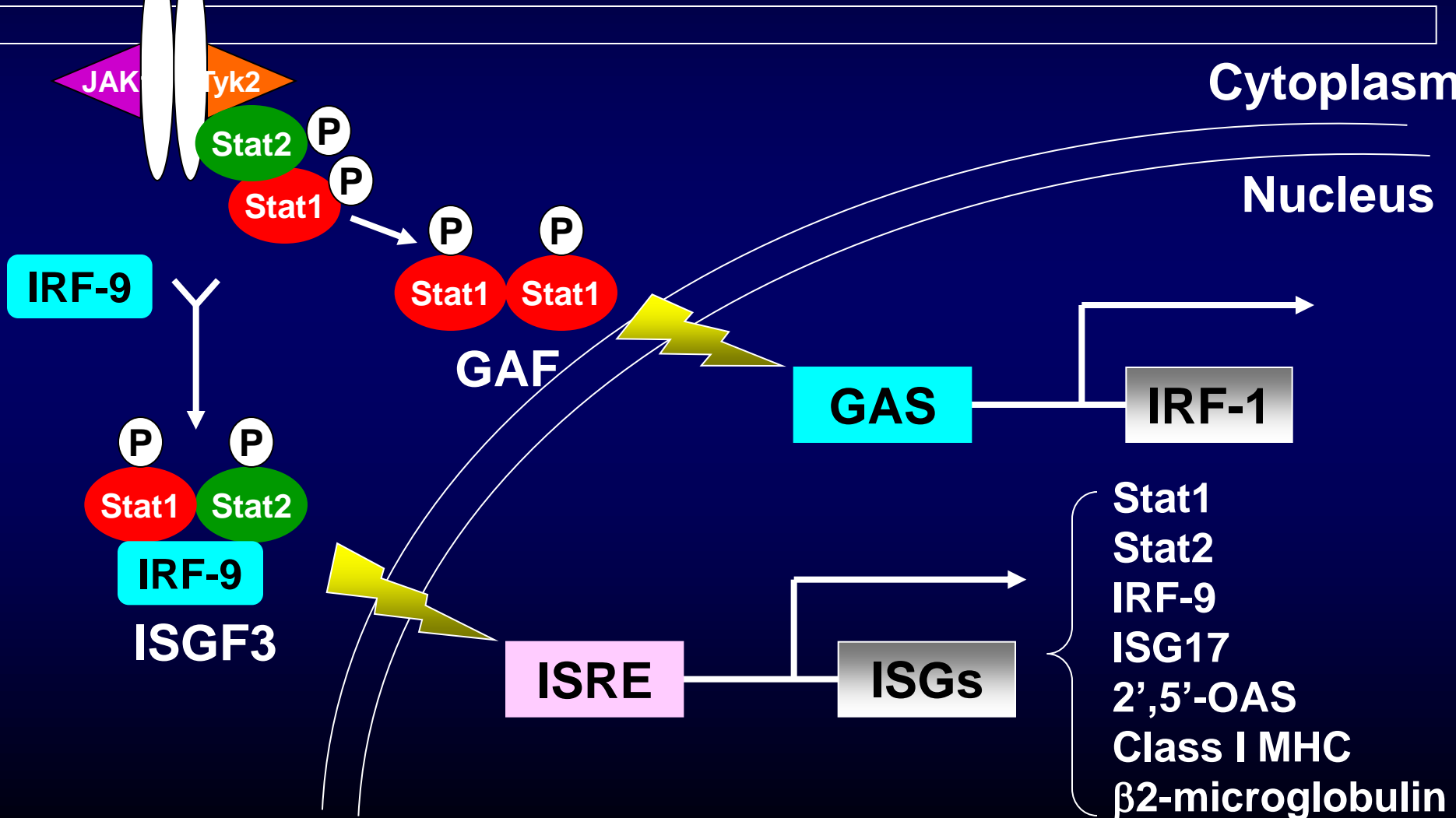
- PKA: protein kinase A –
- JAK: Janus Kinase
- STAT: Signal Transducer and Activator of Transcription
- GAF: Gamma Activation Factor
- GAS: Gamma Activation Sequence
- IRF: Interferon Regulatory Factor
- IRE: Interferon Response Element
- ISRE: Interferon Stimulatory Response Element
- ISGF3: Interferon Stimulated Gene Factor 3

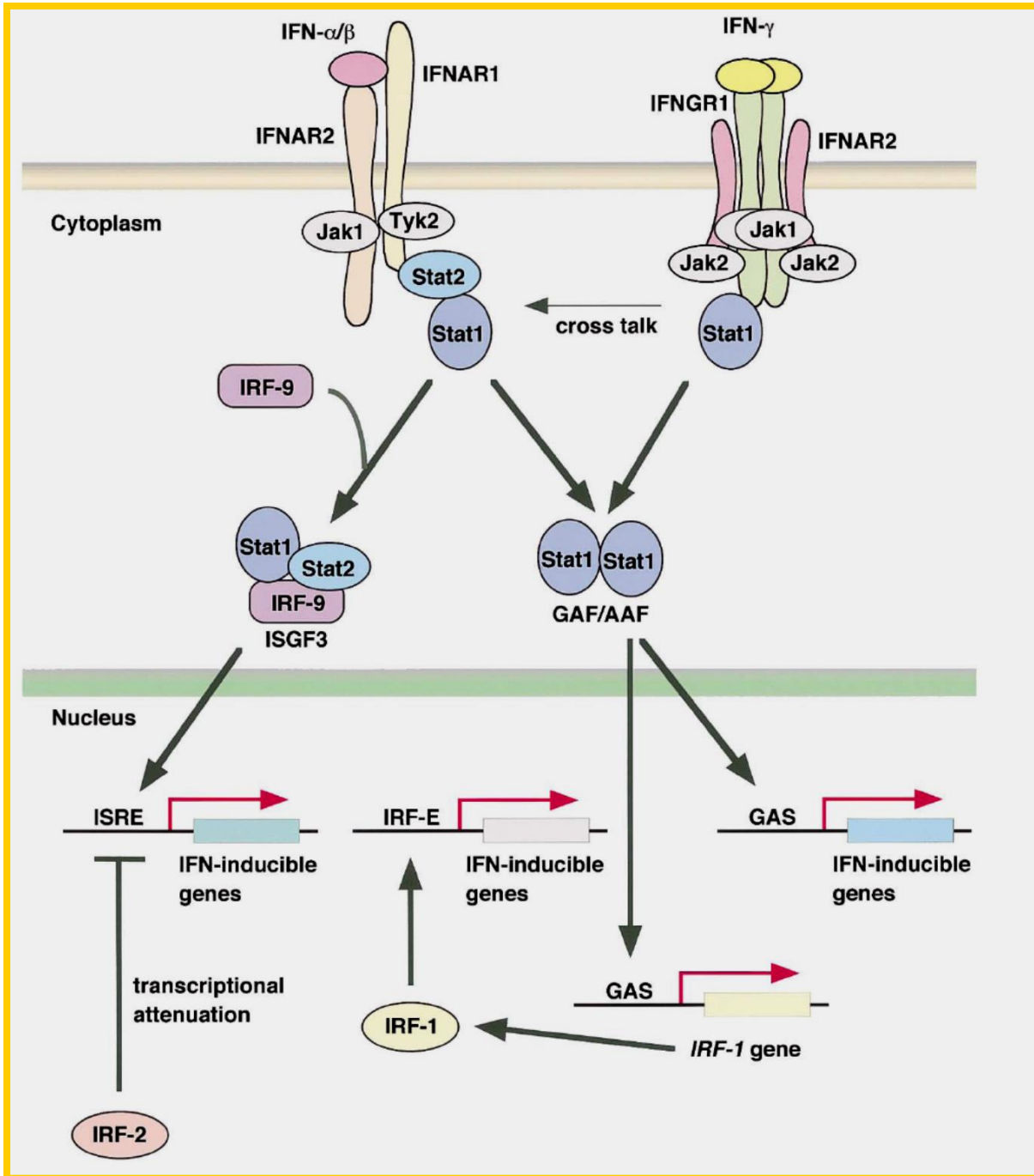
JAK/STAT CELL Signaling Pathway

LIGAND



RECEPTOR ACTIVATING JAK/STAT PATHWAY





Type I Interferon (IFN)

Alpha

Beta

Omega

Tau

Type II IFN

Gamma

PROLACTIN

GROWTH HORMONE

IFNAR = IFNA receptor

IFNGR = IFNG receptor

IRF= IFN regulatory factor

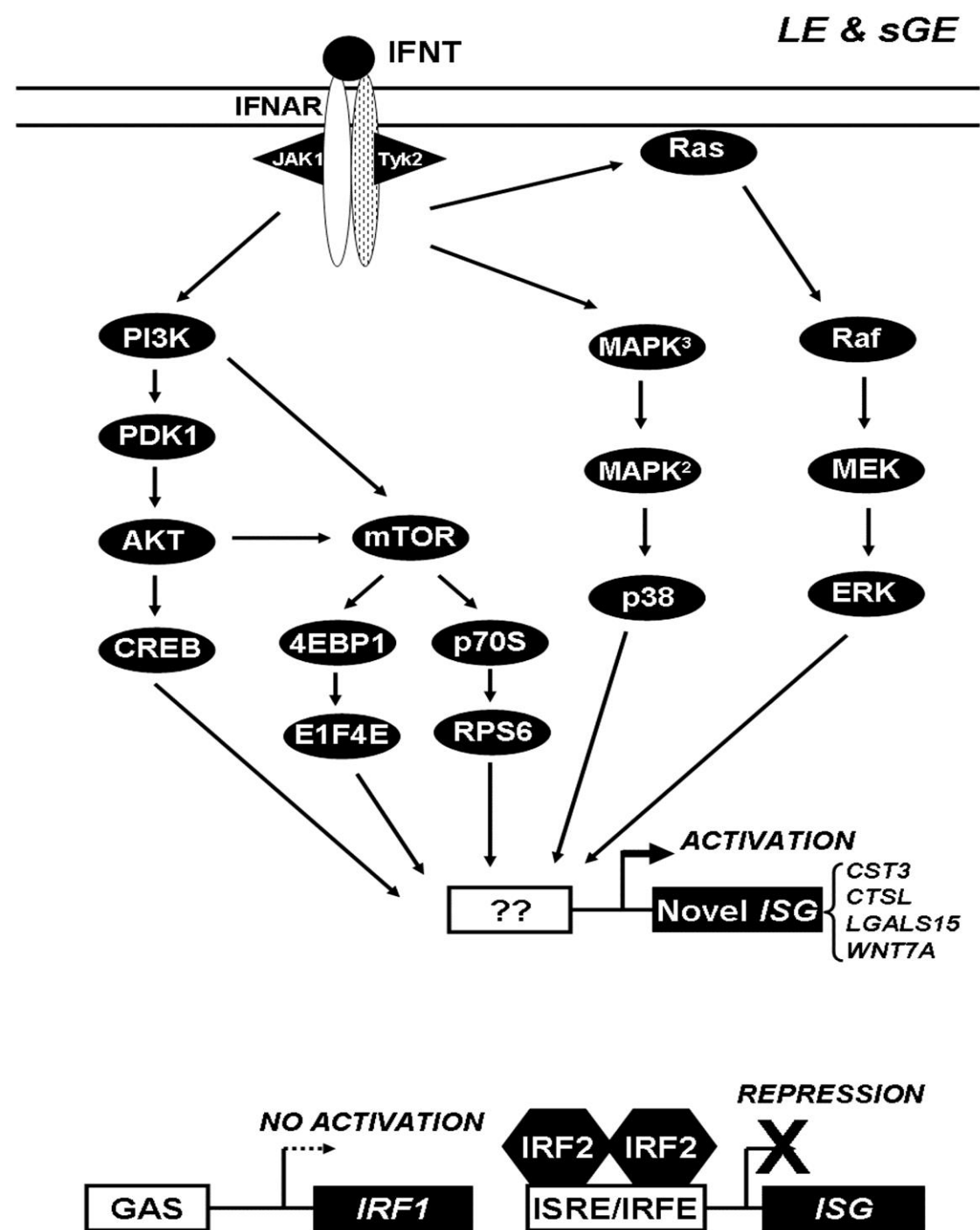
GAS= gamma activation sequence

ISRE = IFN-stimulated response element 121

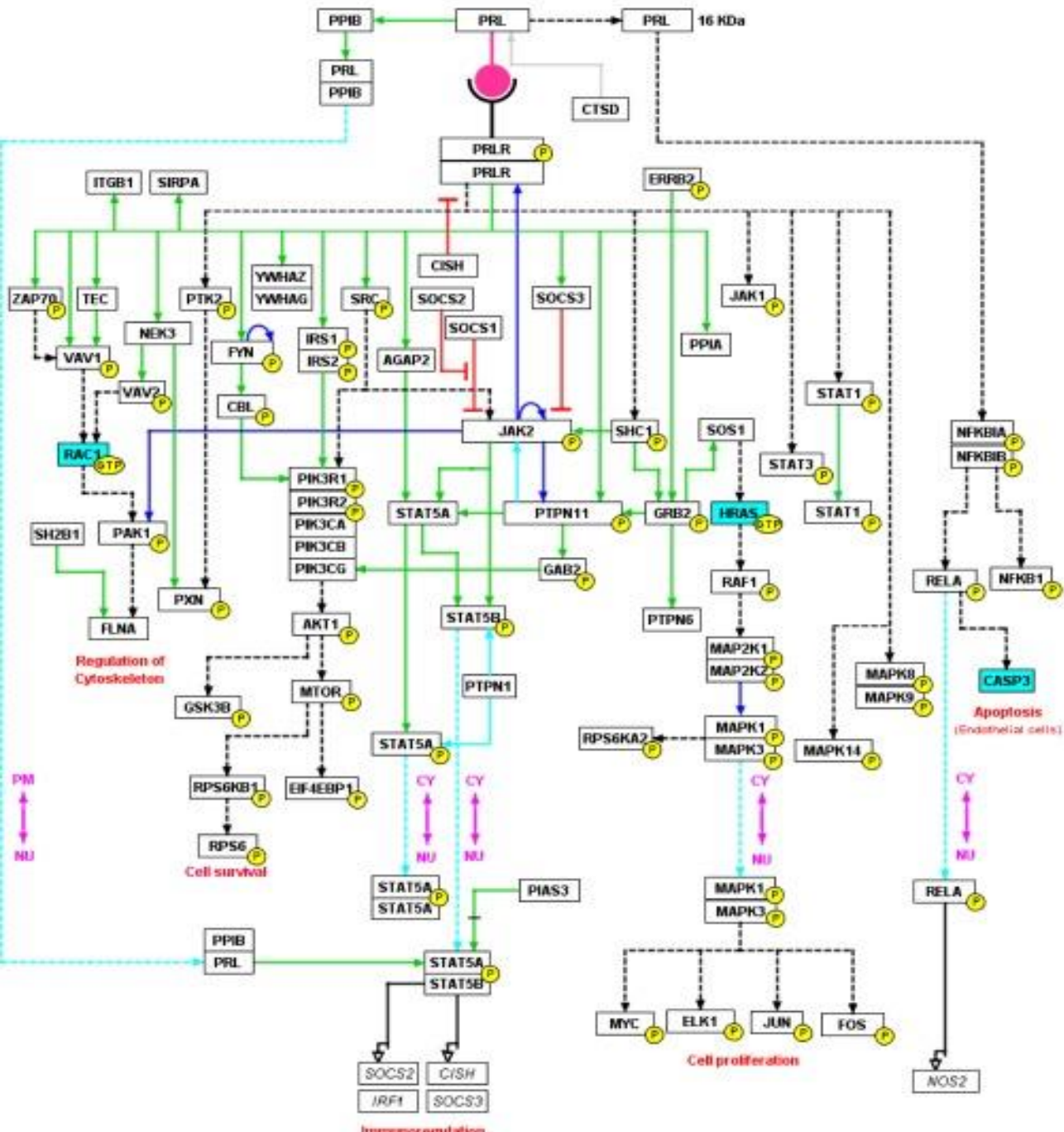
Alternate Type I IFN Cell Signaling Pathways

Platanias LC,
Nature Reviews
Immunology 2005:
5:375-386

Cross-Talk: IFN Cell
Signaling and
Stromal Cell Derived
Progesterone(s)
Cell Signaling



Prolactin Signaling Pathway

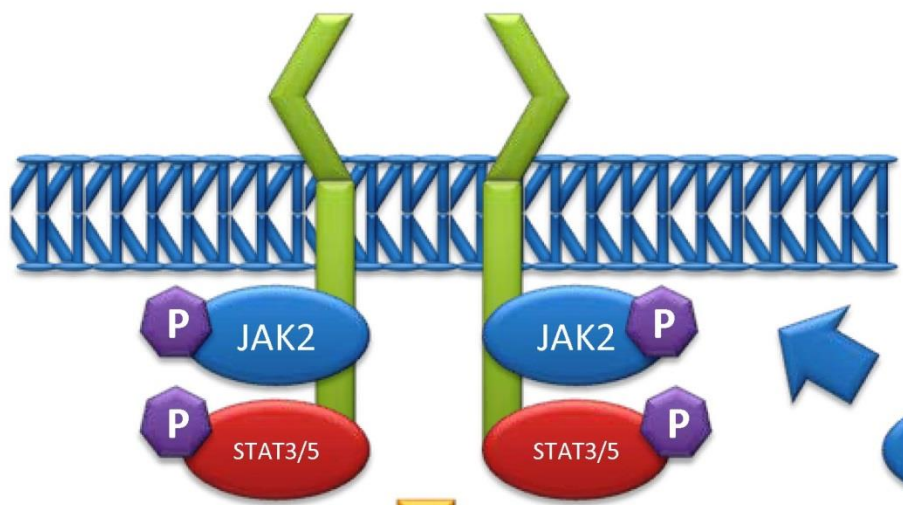


LEGEND

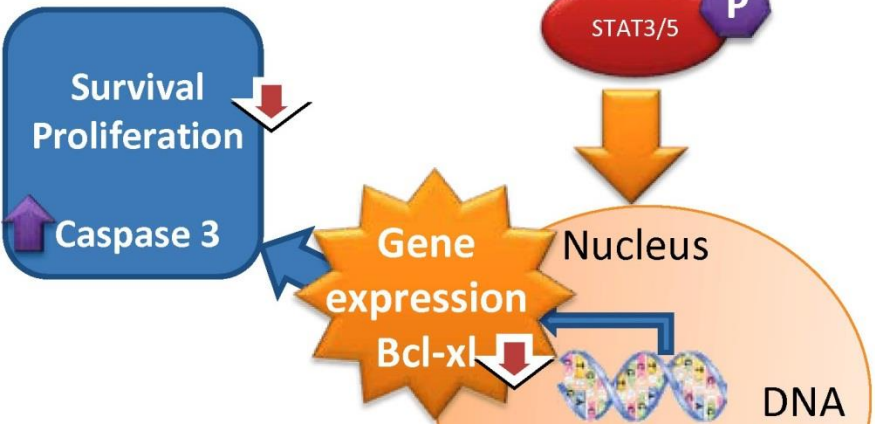
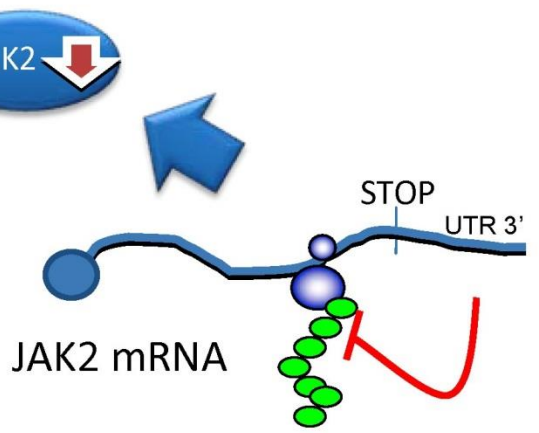
	Ligand		Receptor		Protein		mRNA
	Protein-protein interaction		Protein-protein dissociation		Leads to through unknown mechanism		Positive regulation of gene expression
	Negative regulation of gene expression		Auto catalysis		Acetylation		Deacetylation
	Phosphorylation		Dephosphorylation		Sumoylation		Desumoylation
	Methylation		Demethylation		Palmitoylation		Proteolytic cleavage
	Inhibition		Transport		Protein		Induced activation
	Translocation						
	PM		CY		EN		ER
	GO		MT		NU		

JAK: Janus Kinase

STAT: Signal Transducer and Activator of Transcription

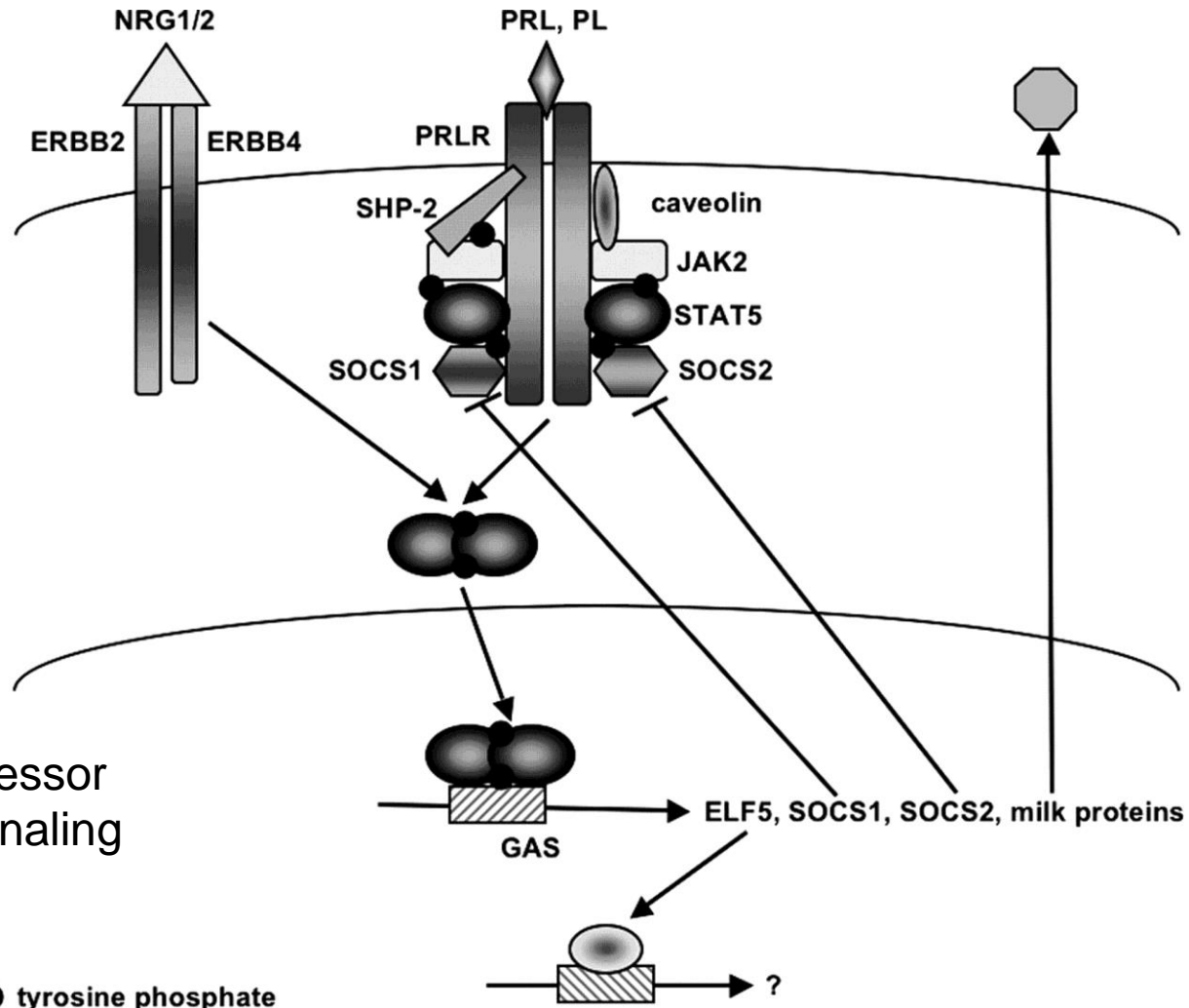


- EPO
- GM-CSF
- TPO
- Growth Hormone
- Prolactin
- IL-3
- IL-5




miR-135a

Regulation of STAT signaling in mammary epithelial cells.



SOCS – Suppressor of Cytokine Signaling

● tyrosine phosphate

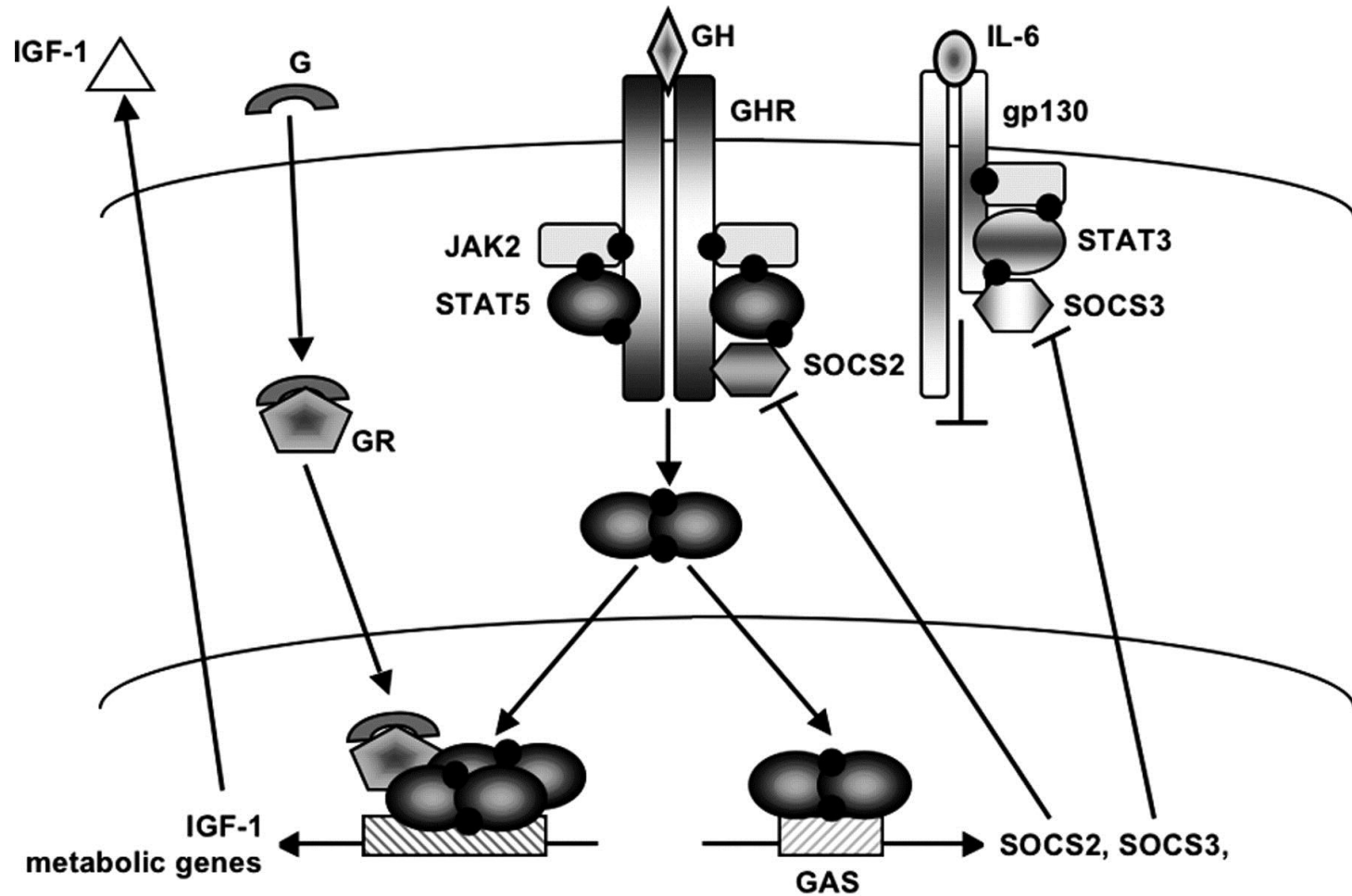
Hennighausen L , and Robinson G W Genes Dev. 2008;22:711-721

GAS: Gamma Activation Sequence

ETS: Epithelium Specific Transcription Factor



Interaction of GHR and GR signaling through STAT5 in hepatocytes.

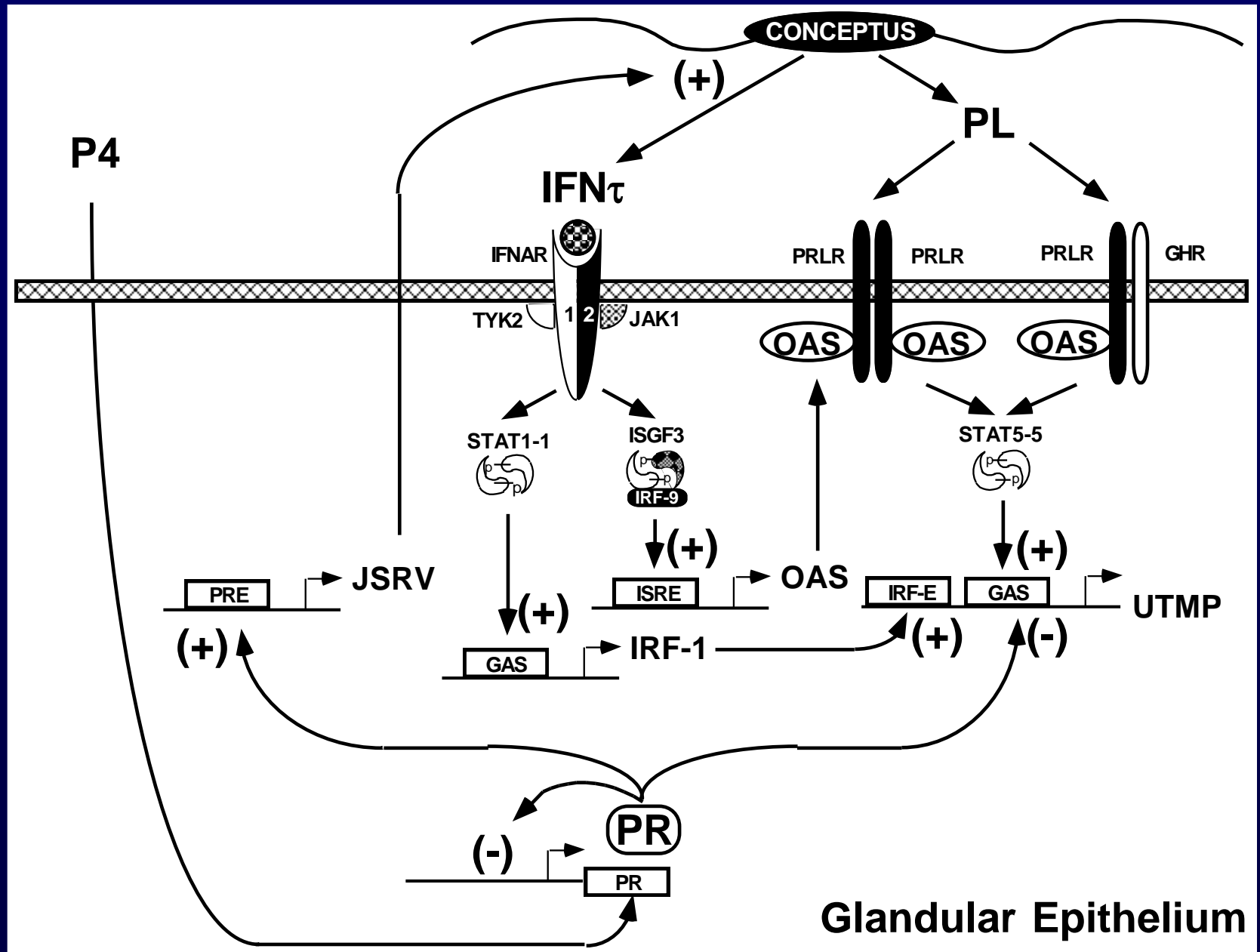


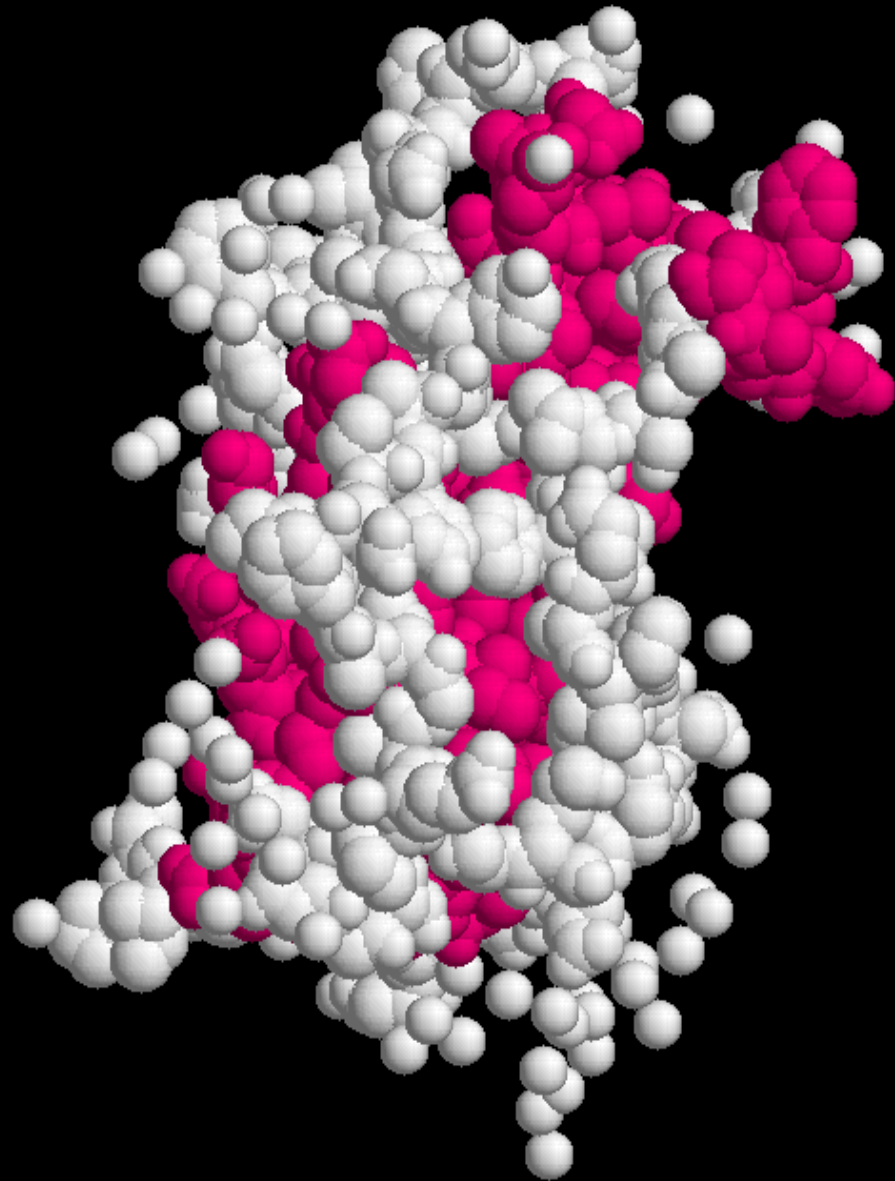
● tyrosine phosphate

Hennighausen L, and Robinson G W *Genes Dev.* 2008;22:711-721



Servomechanism of Pregnancy Hypothesis





GROWTH HORMONE

Growth Hormone (GH)

- A 191-amino acid, single-chain polypeptide hormone that is synthesized, stored, and secreted by the somatotroph cells within the anterior pituitary gland.
- *Stimulators* of GH secretion include:
 - GH releasing hormone (GHRH) or somatotrophin
 - Androgens from adrenal cortex and testes
 - Estrogen
 - L-DOPA stimulates
 - Arginine by inhibiting somatostatin release
 - vigorous exercise

Growth Hormone

- *Inhibitors* of GH secretion include:
 - somatostatin from the periventricular nucleus
 - circulating concentrations of GH and IGF-1 (negative feedback on the pituitary and hypothalamus)
 - hyperglycemia
 - glucocorticoids
 - dihydrotestosterone

Pituitary gland

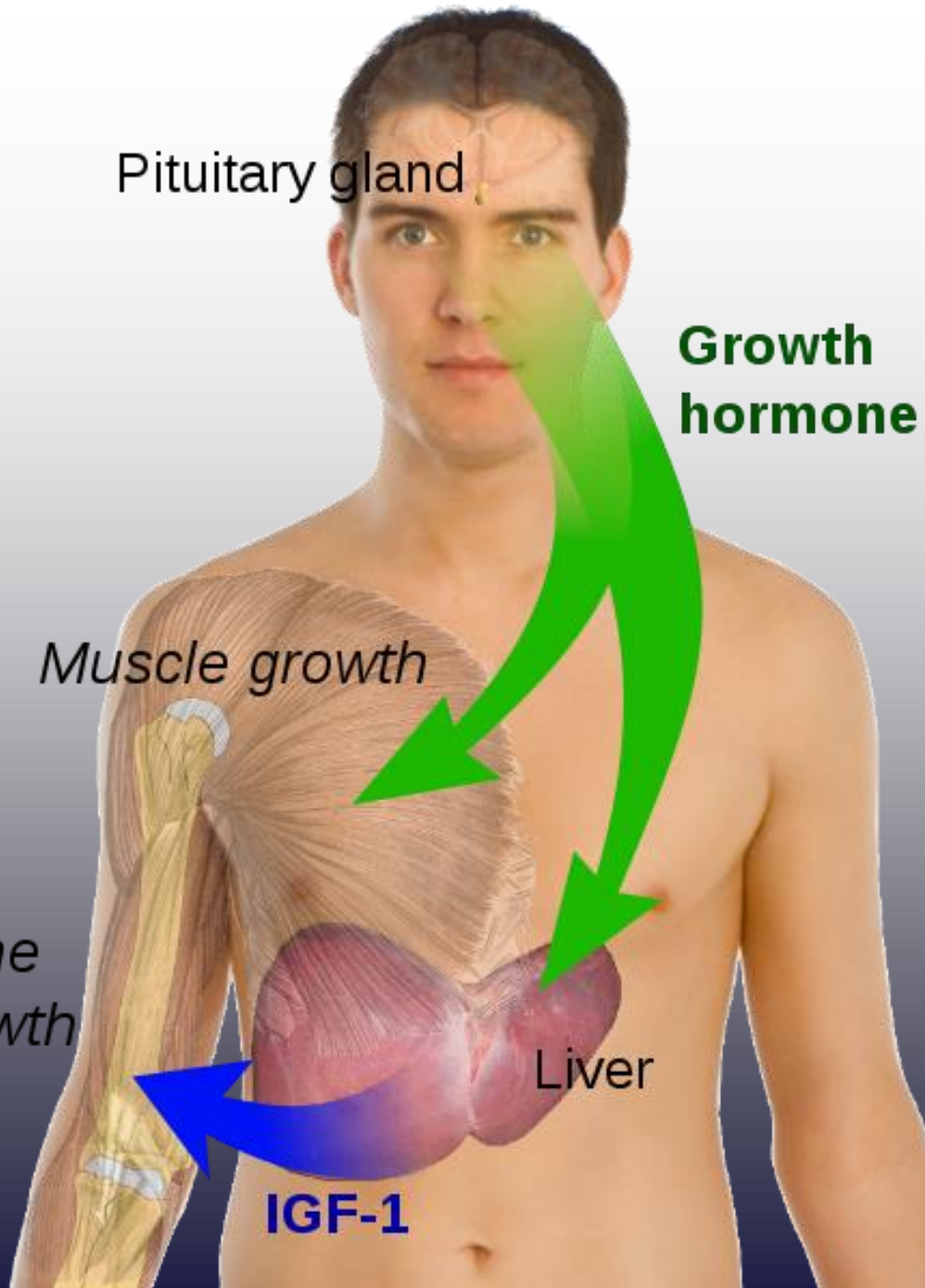
Growth hormone

Muscle growth

Bone growth

Liver

IGF-1



Functions of Growth Hormone

- stimulates division and multiplication of chondrocytes of cartilage.
- stimulates production of insulin-like growth factor 1 by liver and IGF-1 has:
 - growth-stimulating effects on a wide variety of tissues. stimulatory effects on osteoblast and chondrocyte activity to promote bone growth.
 - Increases calcium retention, and strengthens and increases the mineralization of bone
- Increases muscle mass through sarcomere hyperplasia

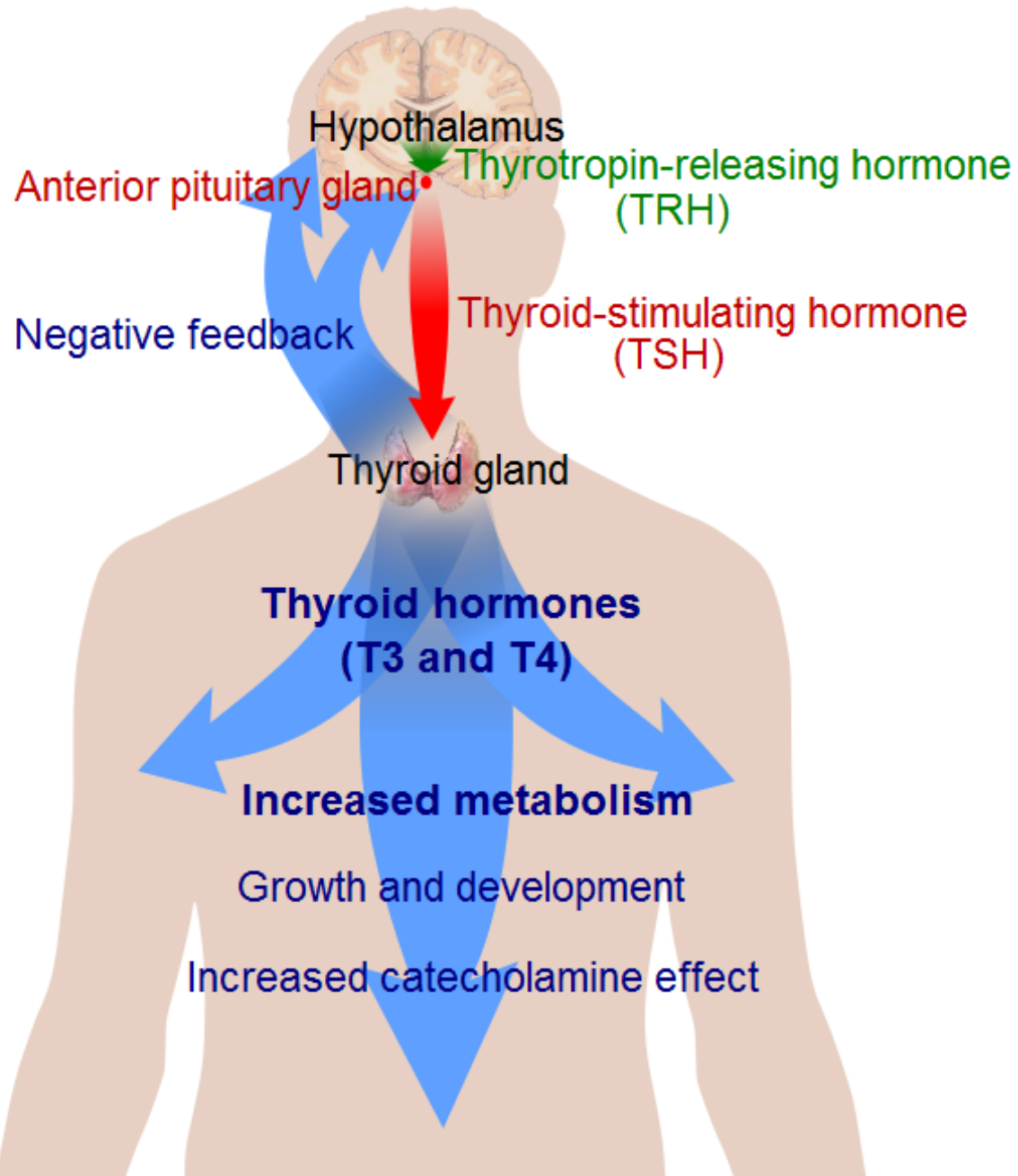
Functions of GH

- Promotes lipolysis
- Increases protein synthesis
- Stimulates growth of all internal organs excluding the brain
- Reduces liver uptake of glucose
- Promotes gluconeogenesis in the liver
- Contributes to maintenance and function of pancreatic islets
- Stimulates the immune system

Thyroid Stimulating Hormone

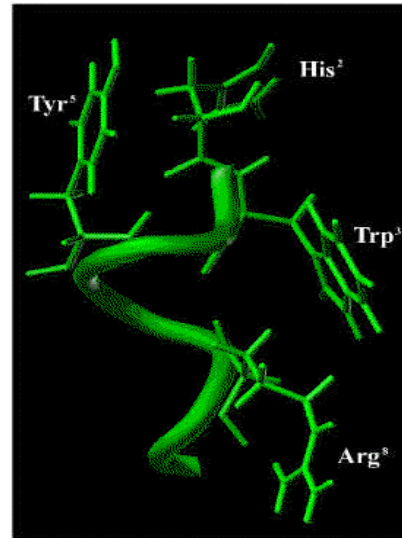
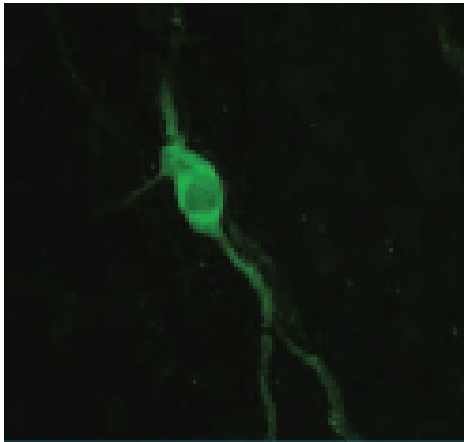
- TSH is a glycoprotein and consists of two subunits, the *alpha* and the *beta* subunit.
- The α (*alpha*) subunit is identical to that of HCG, LH, and FSH .
- The β (*beta*) subunit (TSHB) is unique to TSH, and therefore determines its function.
- The TSH receptor
- found mainly on thyroid follicular cells and stimulates T_3 and T_4 production and secretion.

Thyroid system



Gonadotropin-Releasing Hormone (GnRH) and GnRH network

GnRH Neuron: common pathway for the central control of reproduction



Watts et al. 2001. J Biomol Struct Dyn 18: 733

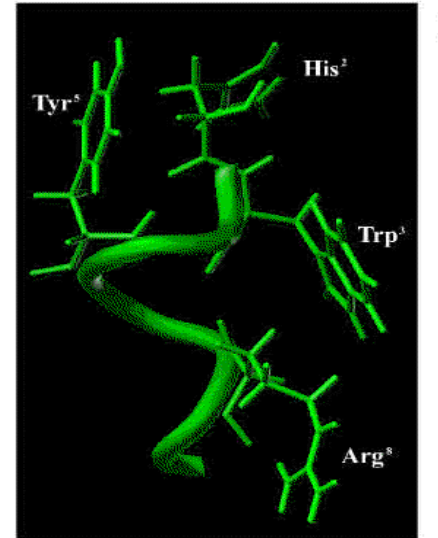
(with permission)

Functions of various GnRH isoforms

- **Release of gonadotropins**
- **Release of growth hormone (GH) in some fish species**
- **Gonadal activation in tunicates**
- **Cell growth (placenta, breast and prostate cancer)**
- **Neurotransmitter in central nervous system**
 - **Sensory (pheromones in bony fish)**
 - **Reproductive behavior**
 - **Stimulation of GnRH firing activity**

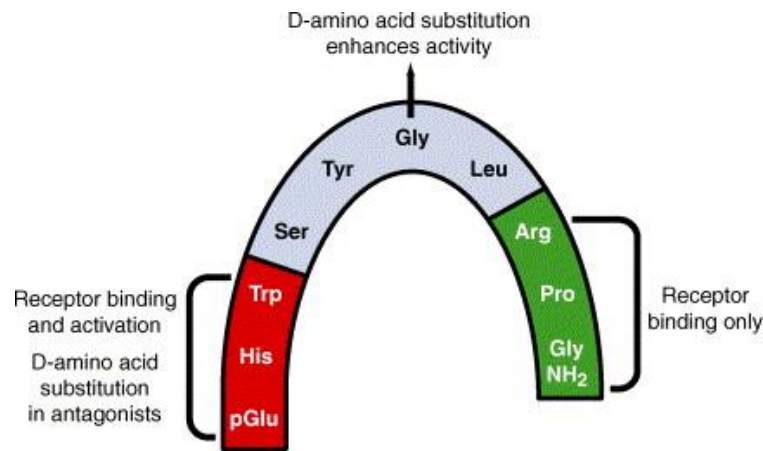
GnRH1

- Conserved NH₂ and COOH terminus
 - Receptor binding and activation
- Non-conserved residues
 - Receptor specificity?



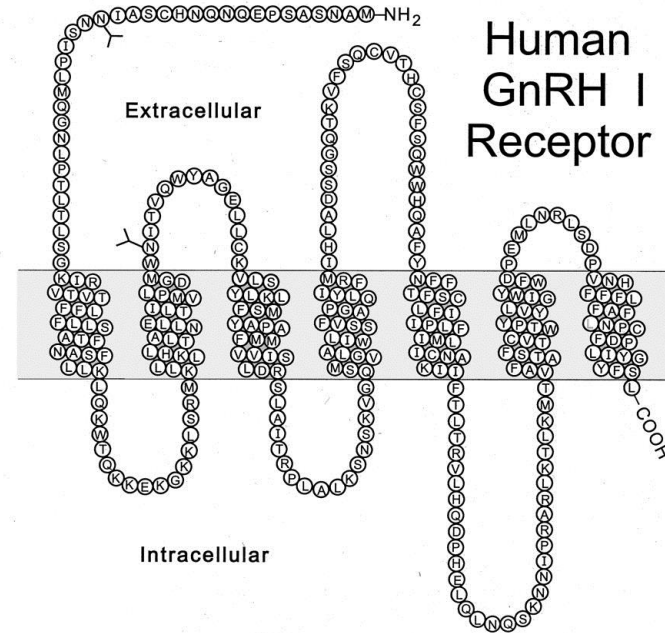
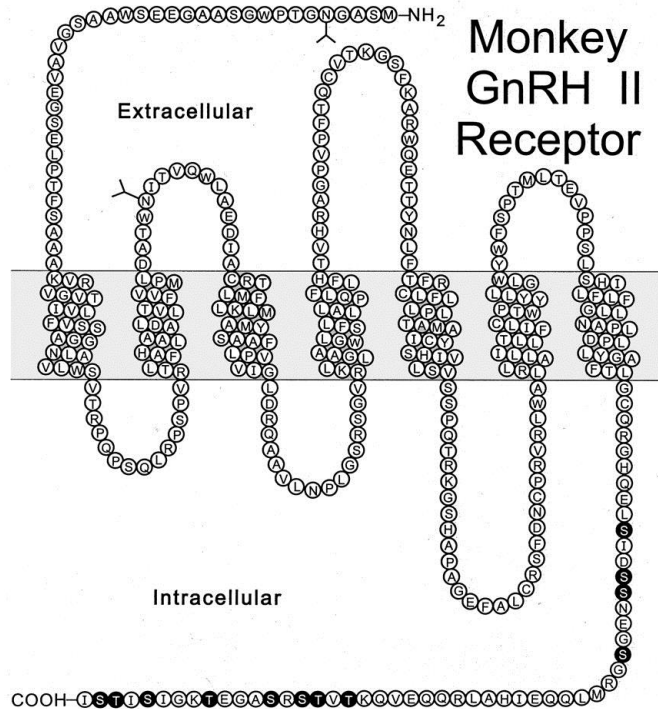
Watts et al. 2001. J Biomol Struct Dyn 18: 733

(with permission)



Millar 2005 Anim Reprod Sci 88 5

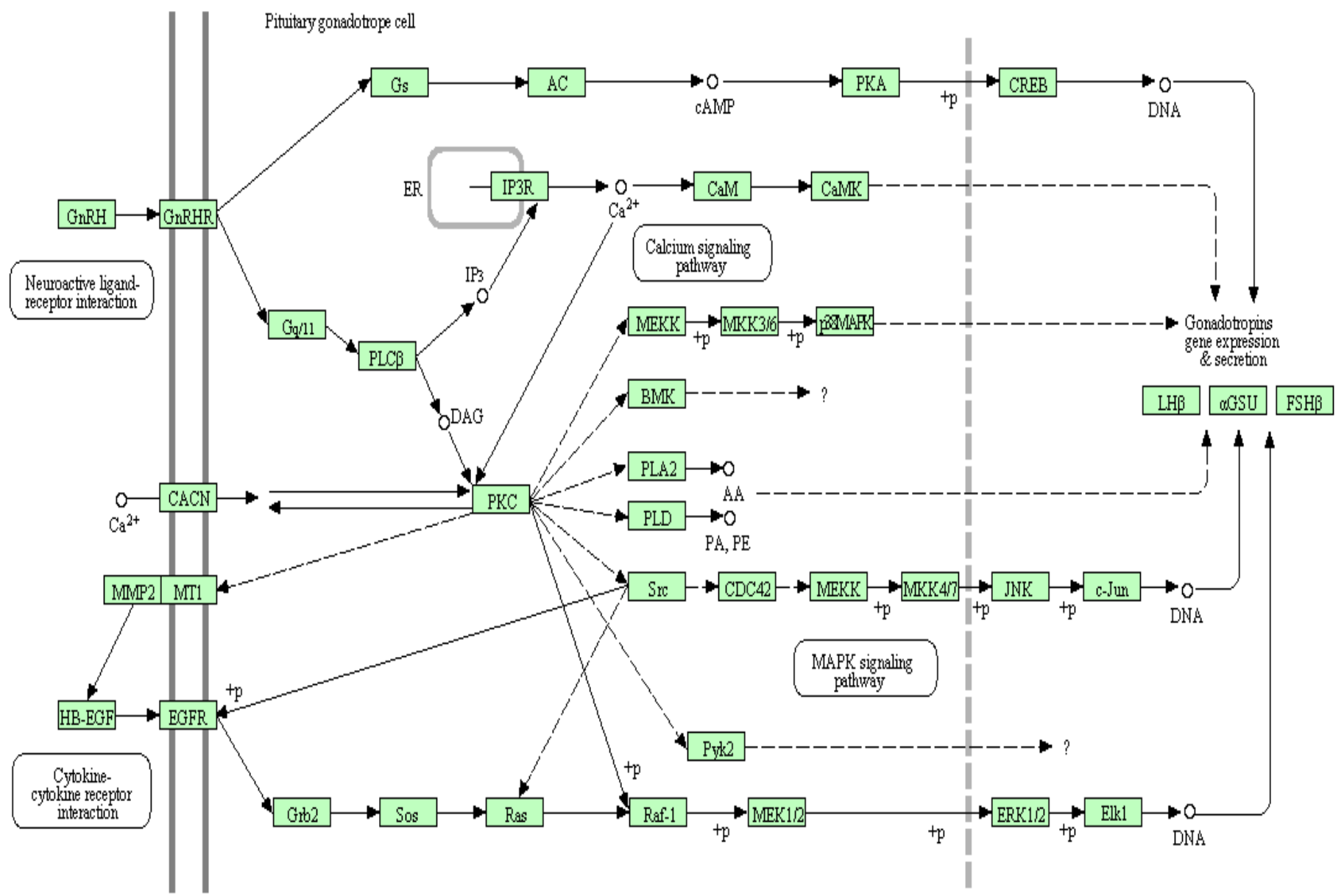
GnRH Receptors



Neill 2002 Endocrinology 143:737-743

- 7 transmembrane, G protein-coupled receptor
- Cytoplasmic C-terminus

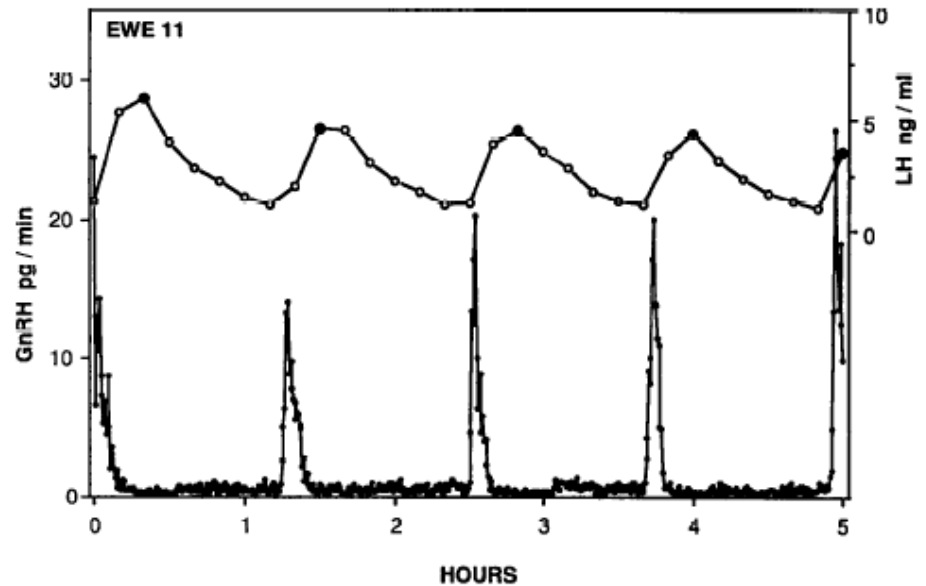
GnRH SIGNALING PATHWAY



What is the functional significance of episodic nature of GnRH/LH release?

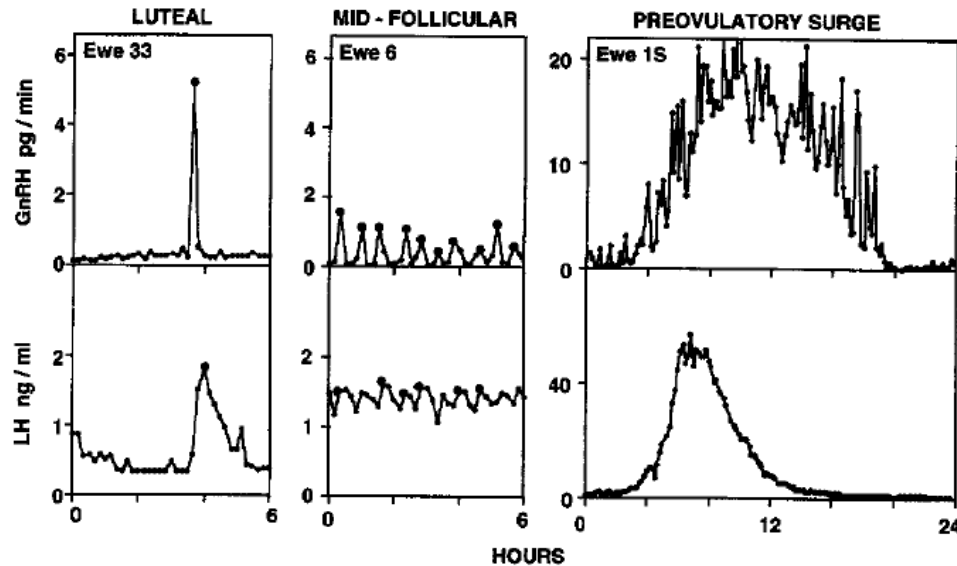
- **Functional characteristics associated with release of LH**

- **Frequency of pulses**
- **Amplitude of pulses**
- **Mean concentrations**
- **Area under the curve**



Moenter et al., 1992. Endocrinology 130: 503.

Changes in Episodic Release of LH During the Estrous Cycle



Karsch et al 1997 Biol Repro 56 303

- **Preovulatory surge of GnRH**

- “Continuous dampening” of GnRH into portal vasculature

What is the physiological function of the GnRH surge?

Preovulatory Surge of GnRH

Monkey

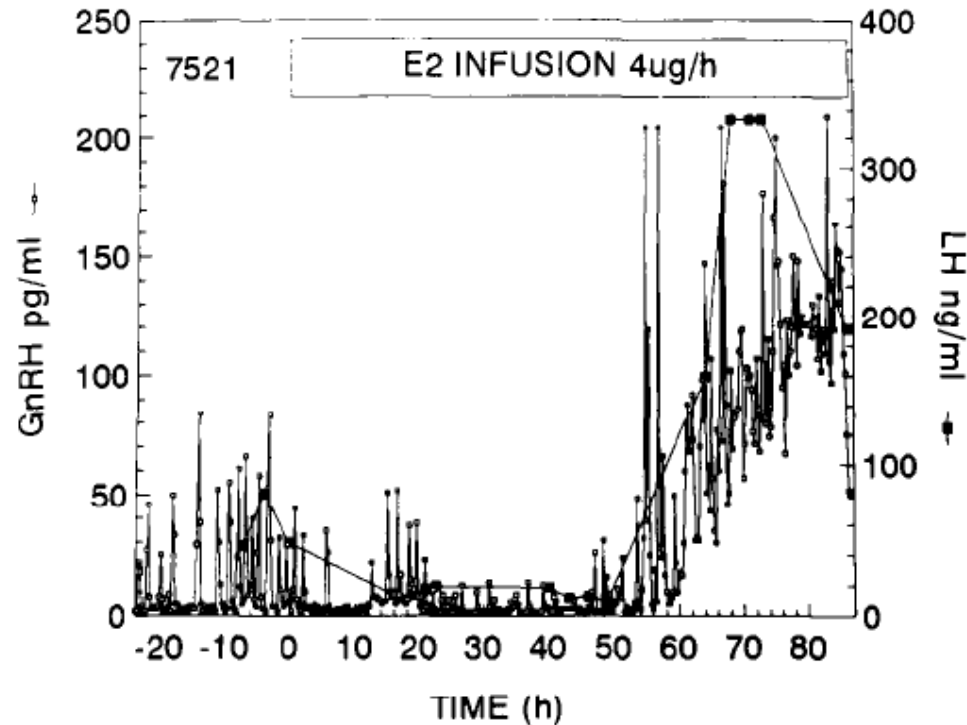
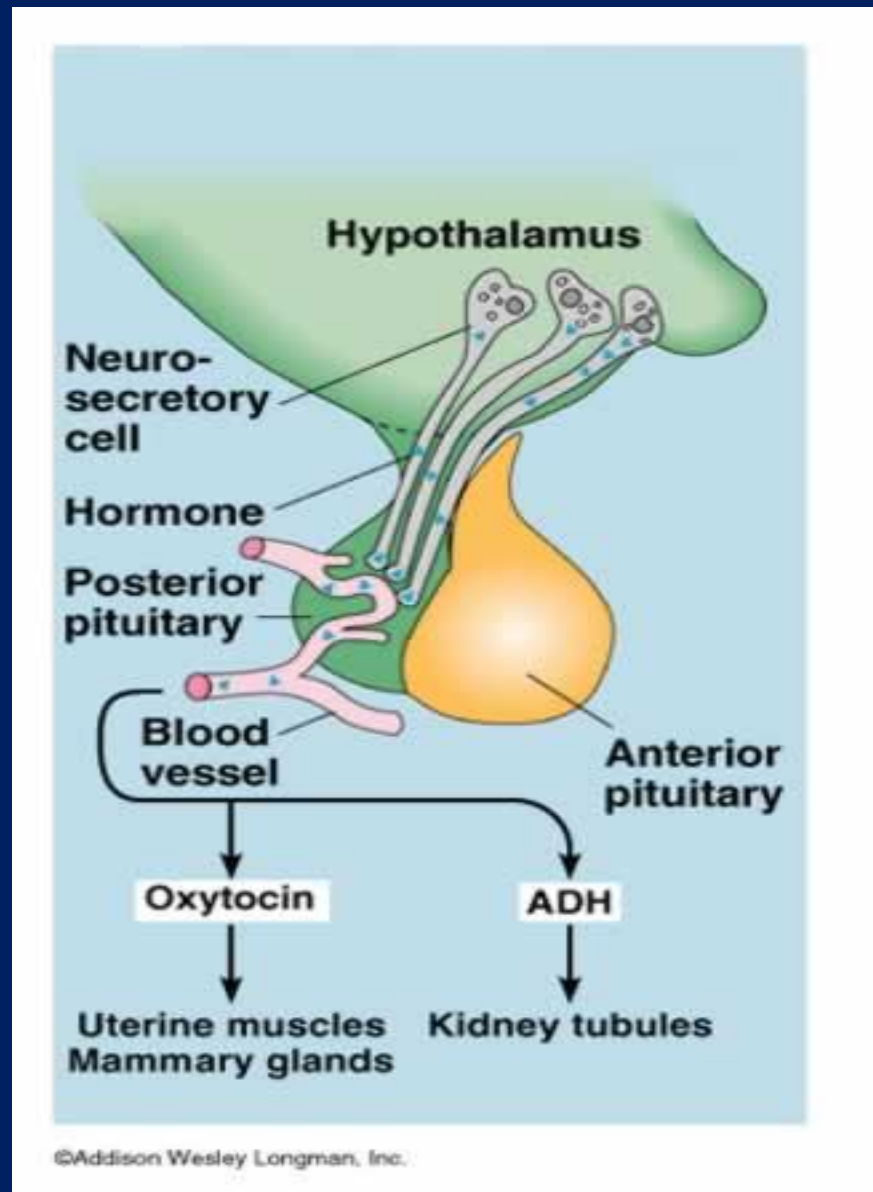
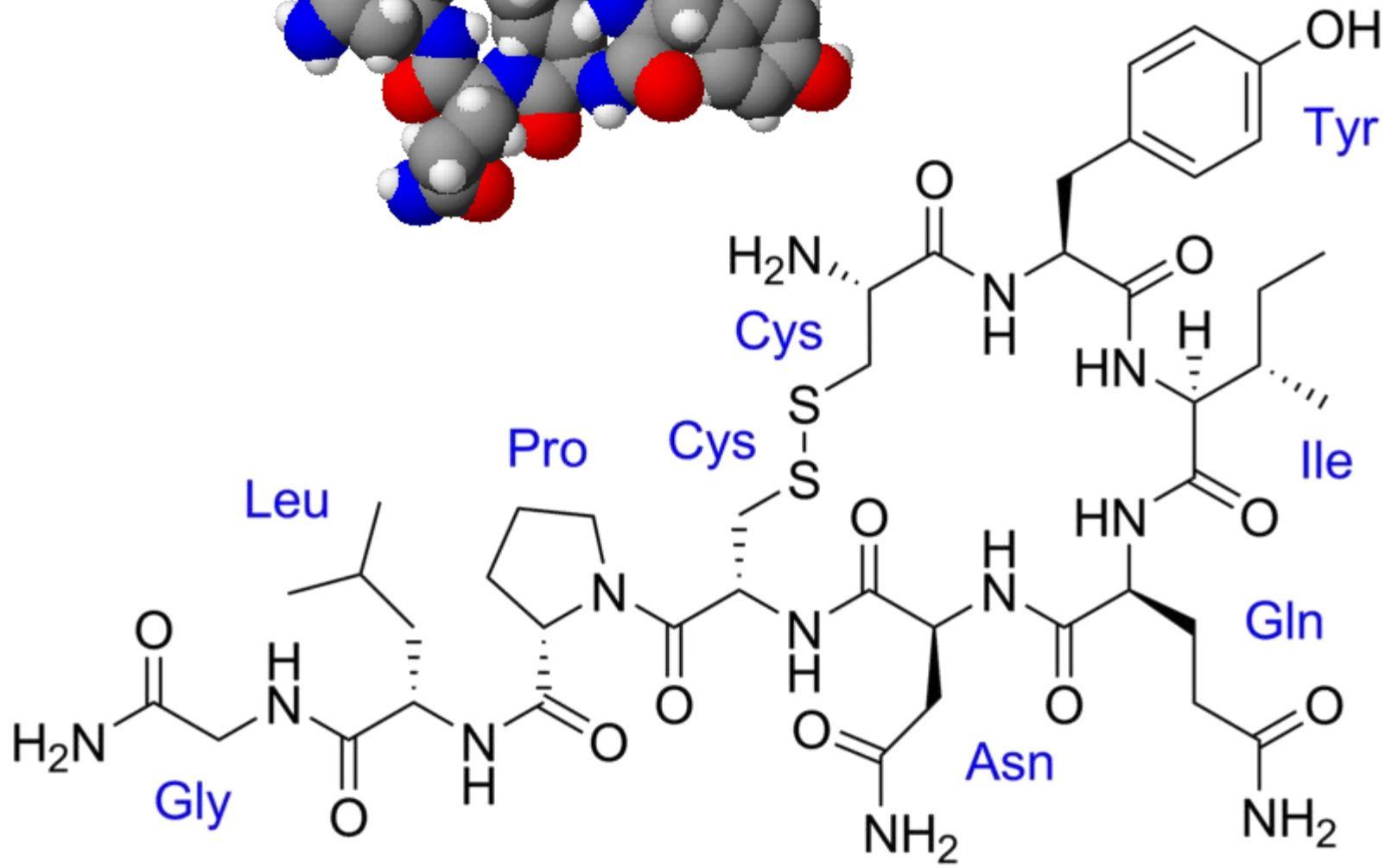
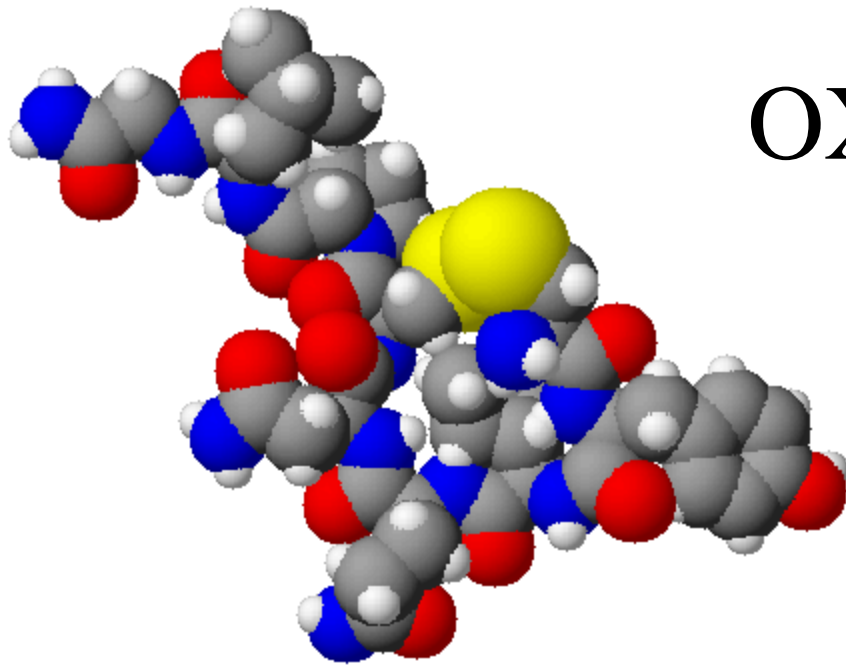


FIG. 4. GnRH and LH responses to estradiol-17 β (E₂) iv infusion in one OVX monkey. Time 0 denotes the start of the E₂ infusion, which lasted throughout the experimental period. The animal was tethered within its cage.

THE PARS NERVOSA OR PARS DISTALIS OR POSTERIOR PITUITARY GLAND



OXYTOCIN



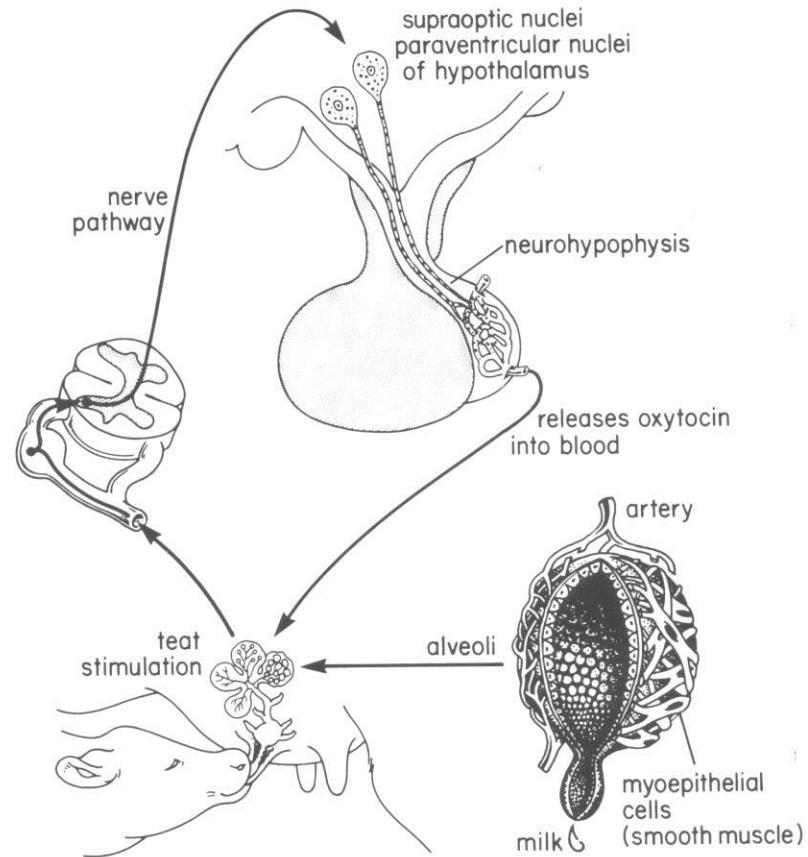
Neuronal Sources of Oxtocin

- **Neural sources**
- **Magnocellular neurons of paraventricular nuclei** in hypothalamus and stored in axon terminals in the posterior pituitary as oxytocin-neurophysin I.
- Released from axon terminals after cleavage from neurophysin I as free oxytocin by the enzyme maturase.
- Secretion of oxytocin from the neurosecretory nerve endings by exocytosis is regulated by the electrical activity of the axon terminals upon depolarization.

Hormones of the Neurohypophysis

- Oxytocin
 - Smooth Muscle Contractions
 - Female Reproductive Tract
 - Sperm Transport
 - Parturition
 - Mammary Gland
 - Milk Ejection
 - Brain
 - Bonding
 - Sexual Partners
 - Mother and Offspring
 - Erection in male mice when injected into CSF

Neuro-Endocrine Reflex



Estrus = heat = period of sexual receptivity

Mating – Stimulation of Female Genitalia – Oxtocin
Release – Vaginal/Cervical/Uterine/Oviductal Contractions for
Sperm Transport

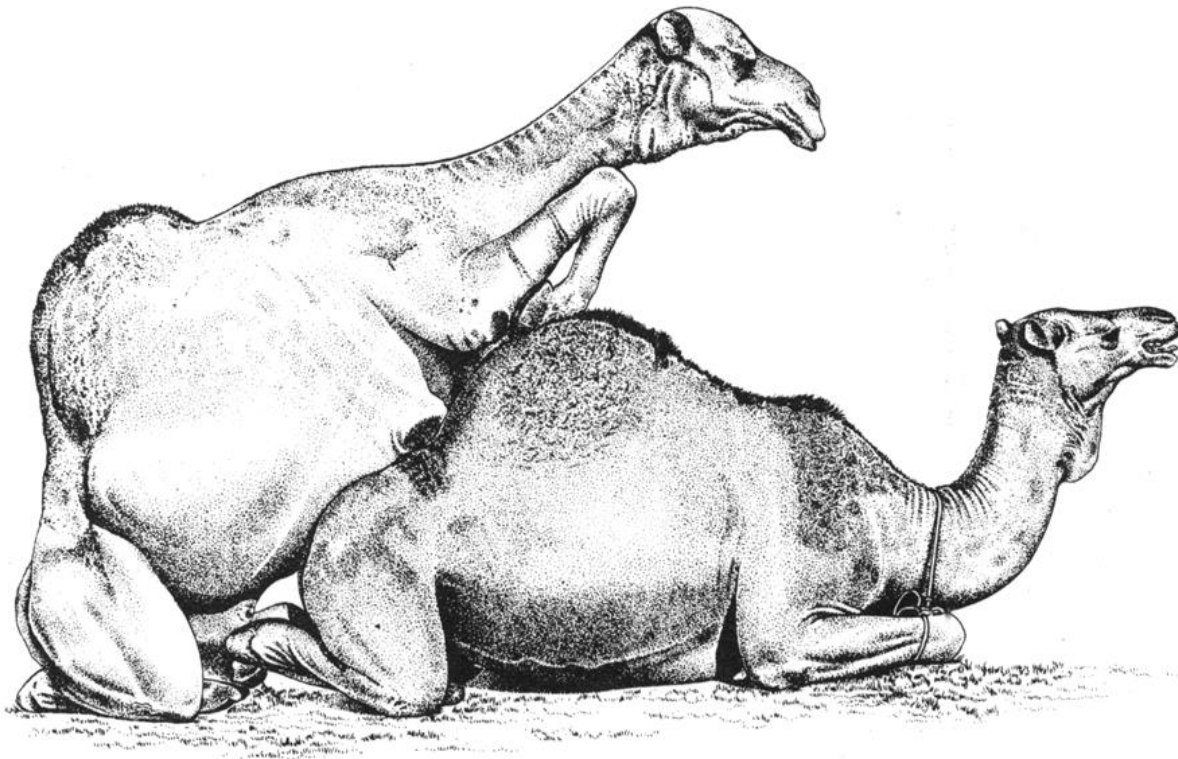
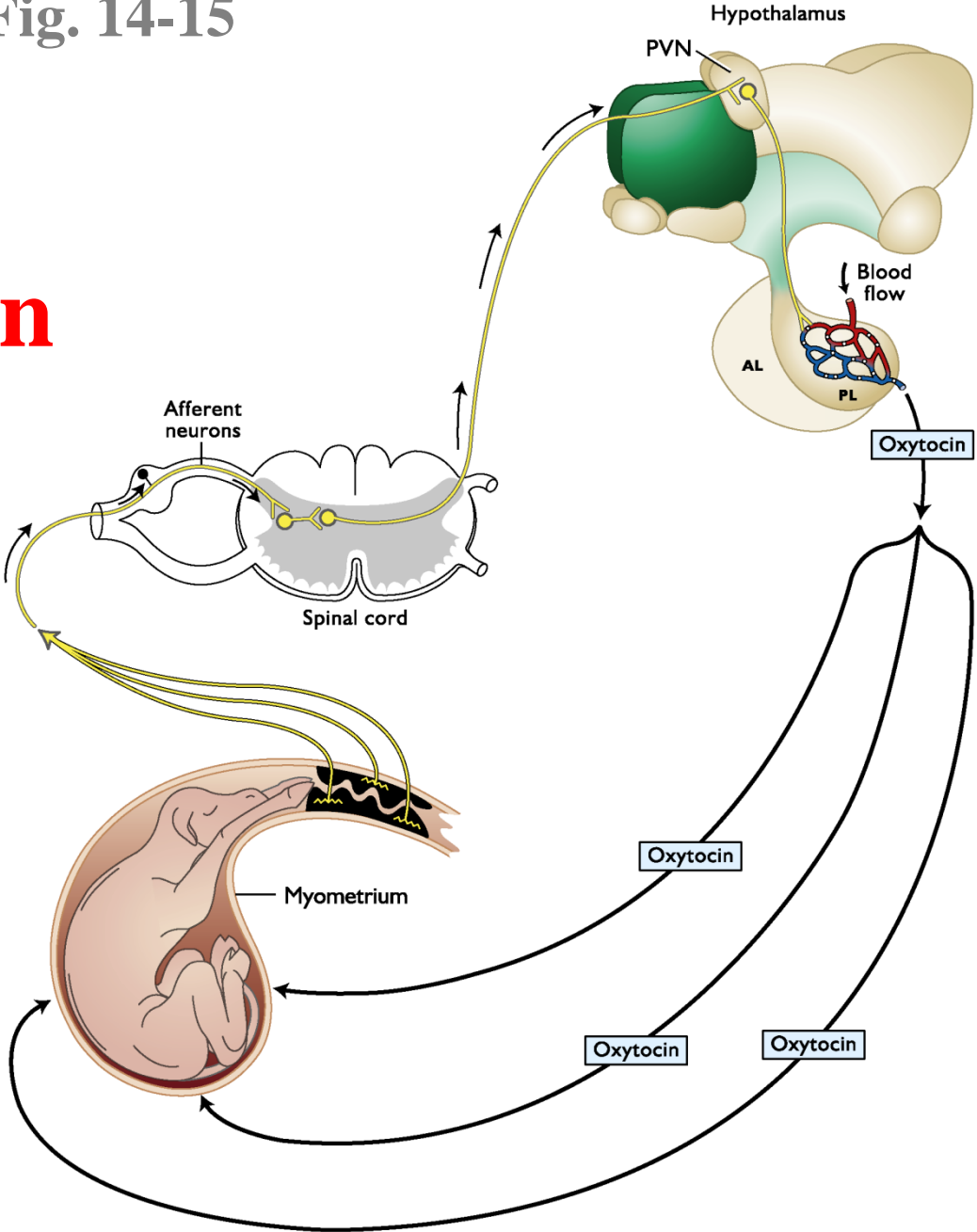
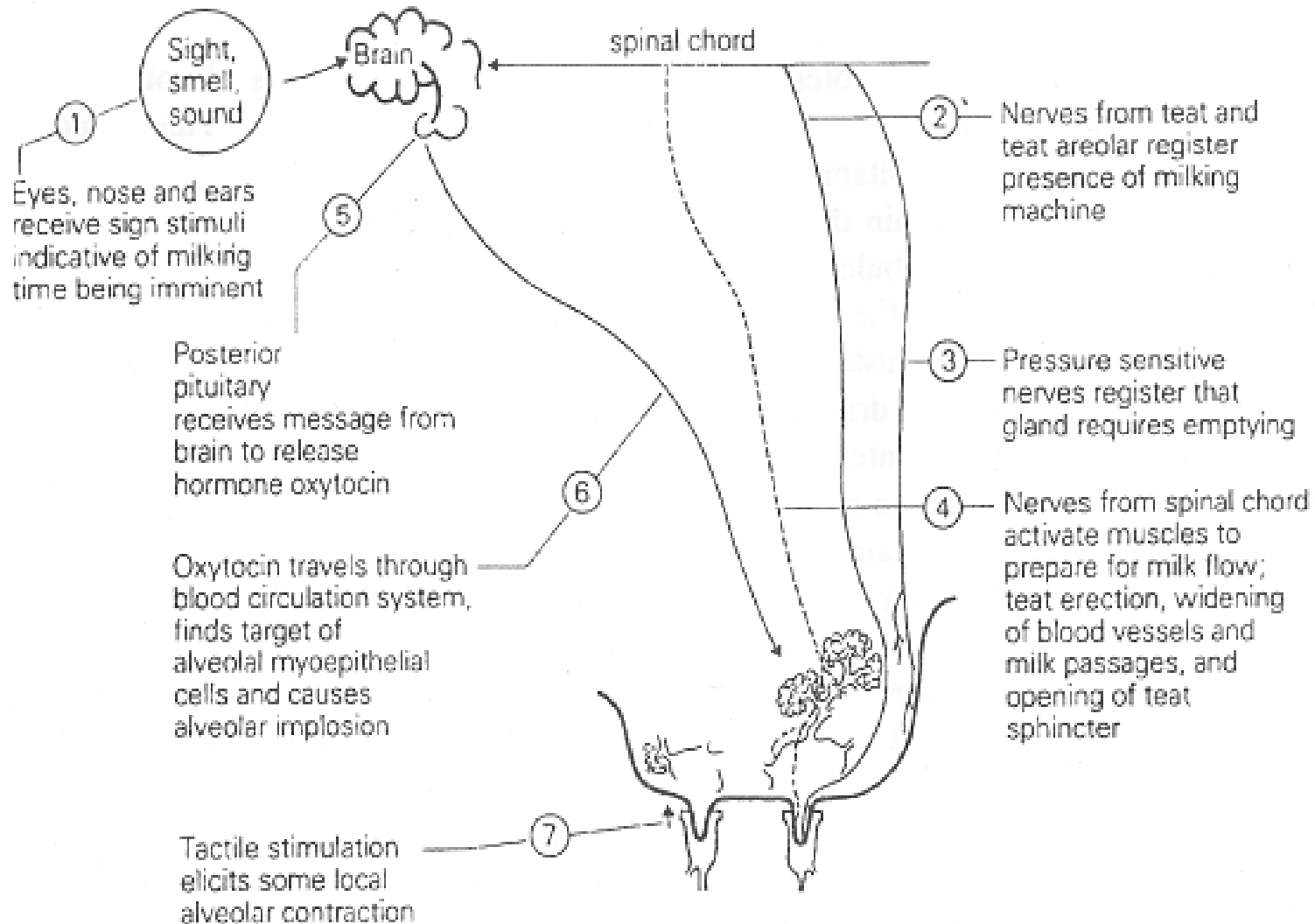


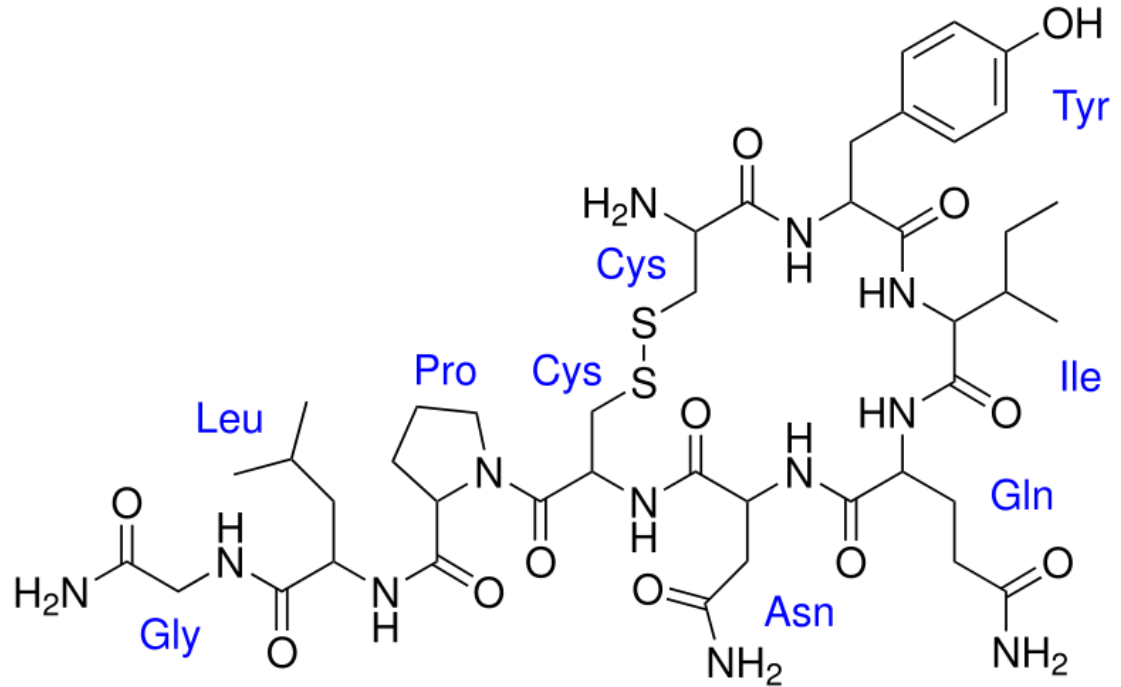
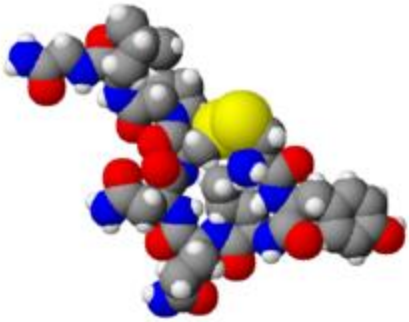
Fig. 14-15

Ferguson Reflex



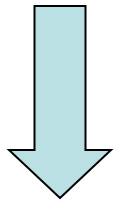


OXYTOCIN

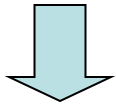


Oxytocin-Neurophysin

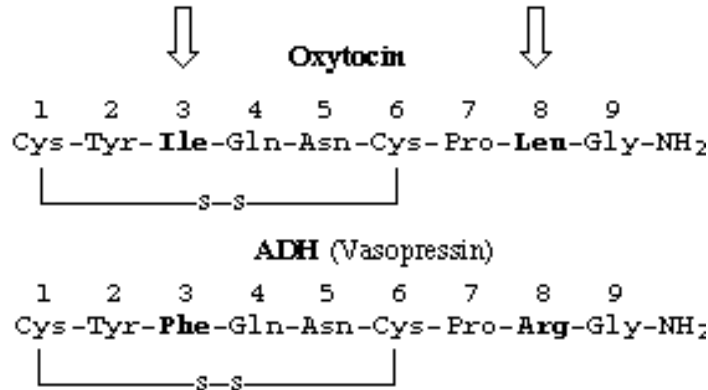
Maturase



Oxytocin + Neurophysin



Circulation
To Target
Tissues



Non-Neuronal Sources of Oxytocin

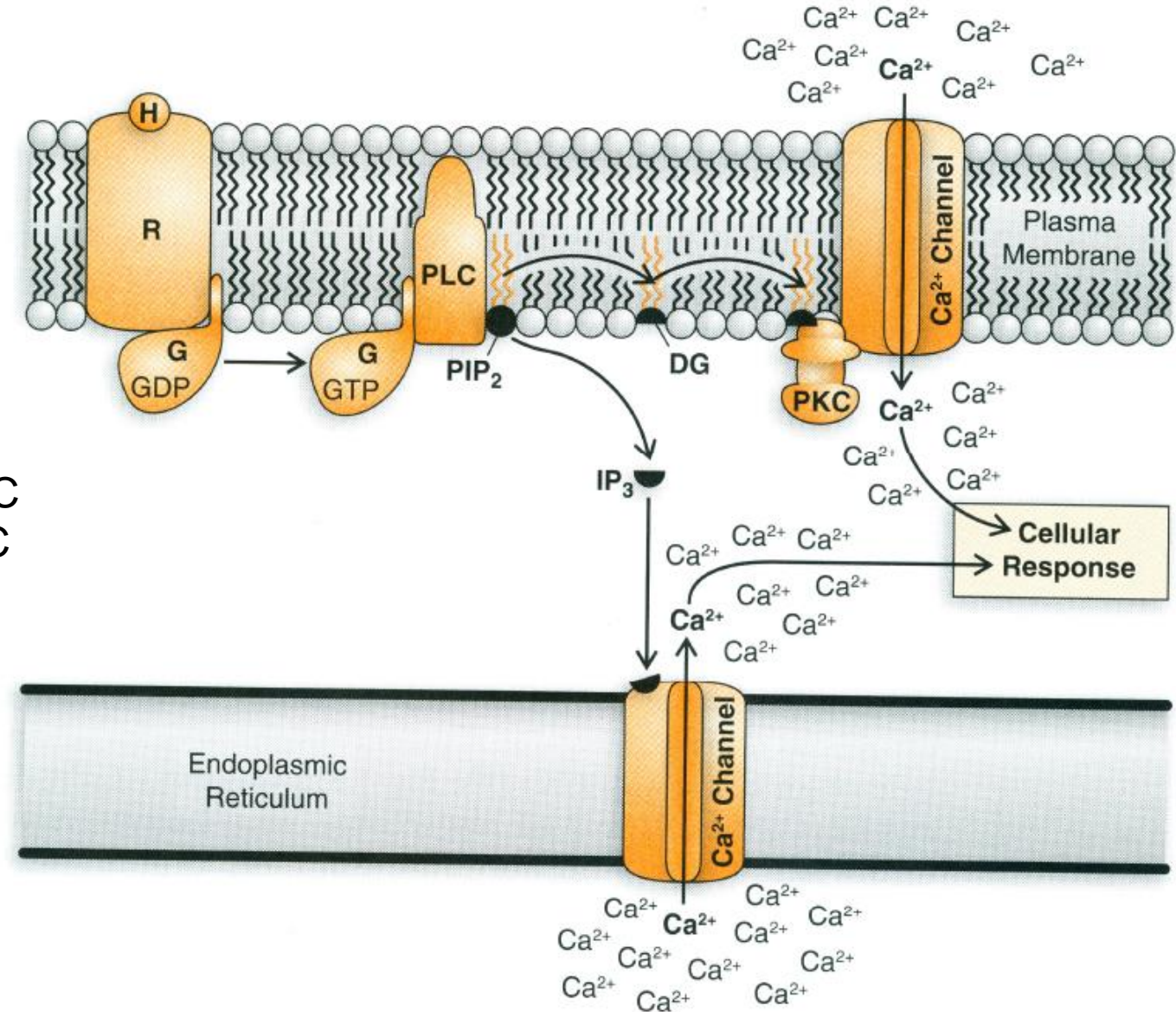
These Sources Vary Among Species

- Corpus luteum of ruminants and humans
- Interstitial Cells of Leydig in the testis
- Retina
- Adrenal medulla
- Placenta
- Thymus
- Pancreas

Oxytocin Receptor

- **Oxytocin receptor polymorphism exists in humans with those having the G allele being less prone to stress and to have better parenting skills.**

Inositol Phosphate and Receptor Signal Transduction

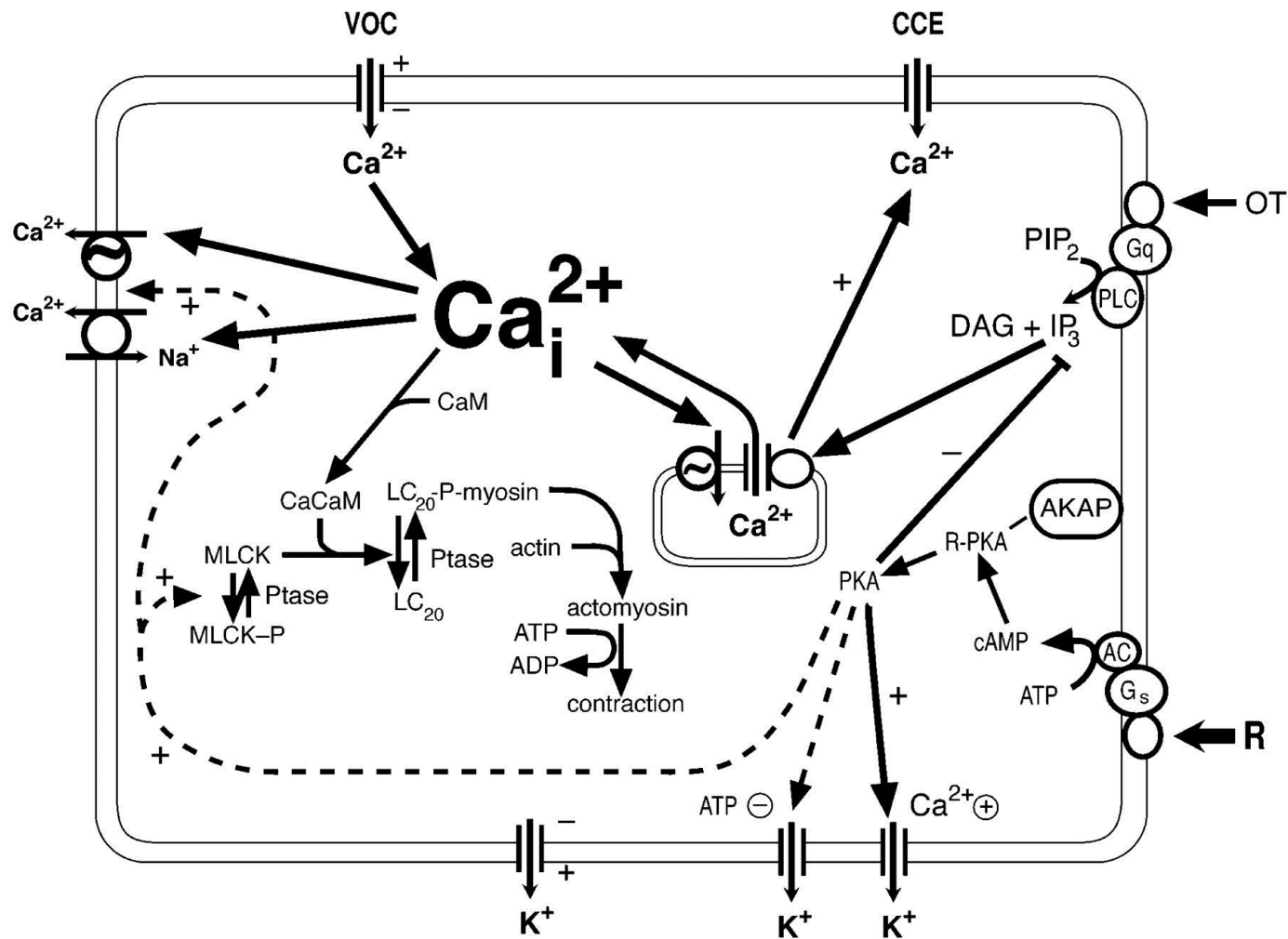


DG – Diacylglycerol
PLC- Phospholipase C
PKC-Protein Kinase C

Figure 3.12 Inositol phosphate and receptor signal transduction.

Intracellular mechanisms whereby relaxin and oxytocin regulate contractions of uterine myometrial cells

Sherwood, O. D. Endocr Rev 2004;25:205-234



**MLCK – Myosin Light Chain Kinase; DAG – diacylglycerol
CaM-Calmodulin; CaCaM – Calcium Calmodulin Kinase**

ENDOCRINE
REVIEWS

