Water and minerals metabolism 304 Biochen

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Sulfur (S)

- Adult male body weighing 60 kg contain about **150** g of sulfur
- It is widely distributed all over the body tissues and cells.
- It is present in the body in the following forms:
- 1. Mucopolysaccharides (chondriotin sulfate, keratin sulfate, dermatan sulfate, heparin and heparan sulfate)
- 2. Lipids as sulfolipids
- 3. Amino acids (cysteine, cystin, methionine and homocystiene)
- 4. Protiens contain sulfer amino acids
- 5. Bile salts(sodium and potassium taurocholate)
- 6. Vitamins (thiamin, biotin, lipoic acid)
- 7. Hormones (insulin and posterior pituitary hormones)
- 8. Coenzymes (CoASH and TPP)
- 9. Other compounds (glutathione,....)

Sulfur (S)

- Food sources: it is mainly supplied in two forms in the diet:
 - 1. Organic form: S-containing amino acids present in protiens, chondriotin sulfate present in cartilages, sulfolipids and sulfur containing vitamins
 - 2. Inorganic form: e.g. Na, K, and Mg sulfate (minor portion and poorly absorbed)

Absorption:

- Inorganic sulfates are poorly absorbed from small intestine
- Sulfur containing amino acids are absorbed after adequate protein digestion
- Sulfur in chondriotin sulfate and glycoproteins splits at first after digestion, then oxidized to sulfate and absorbed
- RDA
 - adult: 2-5 g/day

<mark>Sulfur (S</mark>)

• Excretion:

- In urine: about 80% of sulfur is excreted as inorganic sulfates, 10% as neutral sulfur compounds e.g. vitamins and amino acids and 10% as ethereal sulfate e.g. indican
- In feces: this represent the unabsorbed dietary sulfate, small amounts of taurine and taurocholate and mercaptides formed by intestinal bacteria

Sulfur (S)

• Utilization of sulfur in the body:

• Organic sulfates:

- 1. The majority is changed to inorganic sulfate and excreted in urine
- 2. Small portion is changed to S-containing compounds in the body e.g. glutathione
- 3. Remaining amounts are excreted as neutral sulfur compounds in urine e.g. thiocyanate, thiosulfate

• Inorganic sulfate:

- 1. The majority passes to urine
- 2. Conjugated with phenolic compounds (e.g. phenol, indoxyl) and with certain hormones (e.g. estrogens, testosterone) forming ethereal sulfate excreted in urine



Trace elements are classified according to biological role into 3 groups:

- Essential: an essential element is an element required for life; its absence results in death or a sever malfunction.
 They are (10 minerals): Fe, I, Cu, Zn, Mn, Co, Se, Mo, Cr and F
- 2. Possibly essential: Nickel, tin, vanadium and silicon
- **3.** Nonessential: Aluminum, boron, cadmium, arsenic, germanium, lead and mercury



- iron
- zinc
- iodine
- selenium
- copper
- manganese
- fluoride
- chromium
- cobalit
- molybdenum

Iron (Fe)

• Adult male body weighing 60-70 kg contain about 4-5 g of iron

Distribution of iron in the body:

About 77% is present in the heme compounds (65% hemoglobin, 10% myoglobin, <2% cytochromes, <1% peroxidase, <1% catalase) About 21% is present in the nonheme iron compounds (10-15% ferritin, 9% hemosiderin, < 1% transferrin) About <5% is present in other iron compounds (mainly present bound to proteins)

Iron metabolic turnover:

- It is unique in that it operates as a closed system
- <1% mg/day is lost</p>
- <10% of dietary iron is absorbed</p>
- Iron stores are utilized

CHIEF FUNCTIONS:

Carries oxygen as part of hemoglobin in blood or myoglobin in muscles; required for cellular energy metabolism

Iron (Fe)

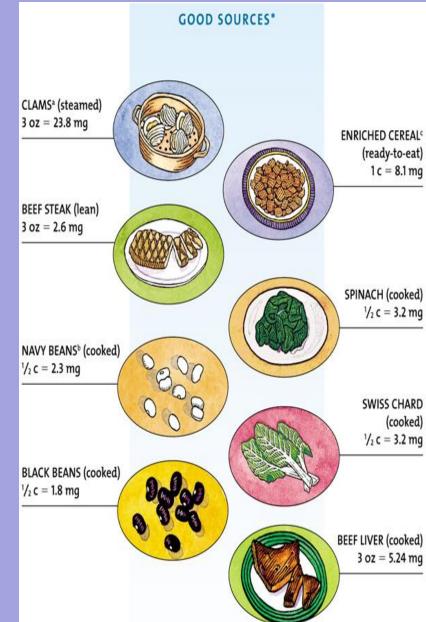
• Food sources: red meats, liver, heart, spleen, kidney, fish, poultry, eggs, legumes, date, molasses, nuts, sipnach are good sources

• RDA

- adults: 10-19 mg/day

Plasma normal values :

- Total iron binding capacity (TIBC): 300-360 microgram%
- Iron free transferrin-unsaturated iron binding capacity (UIBC): 60-70% of the total
- Plasma protein bound iron: 30-40% of the total



Iron (Fe)

- Absorption, transport and storage:
- Absorption:
 - Ordinary diet contain 10-20 mg of iron, < 10% of them is absorbed into mucosal cells of the doudenum&proximal jejnum
 - Heme iron is absorbed as it is then broken down and iron released within the intestinal mucosal cells
 - Nonheme iron is absorbed in ferrous state
 - Ferric ion is reduced to ferrous ion before absorption
 - Reducing substances in the diet like vitamin C enhance iron absorption
 - While substances that decrease the solubility of iron in the intestine (such as phosphate, oxalate, phytic acid, fatty acids) and increased pH inhibit iron absorption