

**THE TAMIL NADU DR. M.G.R. MEDICAL UNIVERSITY
CHENNAI**

REGULATIONS OF THE UNIVERSITY

In exercise of the powers conferred by section 44 of The Tamil Nadu Dr. M.G.R. Medical University, Chennai , Act, 1987 (Tamil Nadu Act 37 of 1987), the Standing Academic Board of the Tamil Nadu Dr. M.G.R. Medical University, Chennai hereby makes the following regulations.

SHORT TITLE AND COMMENCEMENT

These regulations shall be called “THE REGULATIONS FOR THE MASTER OF SCIENCE (MEDICAL BIOCHEMISTRY) UNDER THE FACULTY OF BASIC SCIENCE OF THE TAMIL NADU DR. M.G.R. MEDICAL UNIVERSITY, CHENNAI”.

They shall come into force from the academic year 2014-2015 session.

The Regulations and the Syllabus are subject to modification by the Standing Academic Board from time to time.

REGULATIONS

1. ELIGIBILITY:

Candidates shall be required to have passed the B.Sc. Degree (3 years duration) Examination in Bio-chemistry or Biotechnology or B.Sc. M.L.T. or a degree with triple major with Biochemistry or Biotechnology as one of the subjects.

2. PHYSICAL FITNESS CERTIFICATE:

Every candidate before admission to the course shall submit to the Principal of the Institution a certificate of medical fitness from an authorized medical officer that the candidate is physically fit to undergo the academic course and does not suffer from any disability or contagious disease.

3. ELIGIBILITY CERTIFICATE:

The candidate, who has passed the qualifying examination from any university other than the T.N. Dr. M.G.R. Medical University, as specified in Regulation No. 1 before seeking admission to any one of the affiliated institutions, shall obtain an Eligibility Certificate from the University by remitting the prescribed fees along with application form.

4. ENROLMENT OF CANDIDATES:

The candidates admitted provisionally shall apply to the University for enrolment within 7 days from the date of admission in a prescribed form which shall be down-loaded from the University web site (www.tnmgrmu.ac.in). The following documents are to be submitted along with the application form:

- i. Provisional admission card issued by the College / Selection Committee
- ii. Eligibility Certificate
- iii. Prescribed fee

5. REGISTRATION:

A candidate admitted in the Master of Science (Medical Biochemistry) course in any one of the affiliated institutions of this University shall submit the prescribed application form for registration duly filled, along with prescribed fee and declaration in the format, (as in Annexure I of the “Regulation for re-admission after break of study”) to the Controller of Examinations of this University through the affiliated institution within 30 days from the cut-off date prescribed for Master of Science (Medical Biochemistry) course for admission.

6. DURATION OF THE COURSE:

- a. The period of certified study and training of the M.Sc. (Medical Biochemistry) course shall be three academic years.
- b. No exemption shall be given from this period of study and training for any other experience gained prior to the admission to the course.

7. COMMENCEMENT OF COURSE:

The Course shall commence from 1st September of the Academic Year

8. COMMENCEMENT OF EXAMINATION:

15th October

Theory examinations commence 15th October not be held on Saturdays and Sundays. If the date of commencement of the examination falls or declared a public holidays, the examination shall begin on the next working day.

9. CUT- OFF DATE FOR ADMISSION TO EXAMINATION:

The cut off date for examination to 30th September of the year concerned shall be registered to take up their first year examination during October of the next year, after fulfillment of the regulations.

All kinds of admissions shall be completed on or before 31st October of the academic year. There shall not be any admissions after to 31st October, even if seats are vacant.

10. CURRICULUM:

The curriculum and syllabus for the course shall be as prescribed by the Standing Academic Board from time to time.

11. MEDIUM OF INSTRUCTION:

English shall be the medium of instruction for all the subjects of study for the M.Sc., (Biochemistry) course.

12. WORKING DAYS IN THE ACADEMIC YEAR:

Each academic year shall consist of not less than 270 working days.

13. ATTENDANCE REQUIRED FOR ADMISSION TO EXAMINATIONS:

a) No candidate shall be permitted to appear in any one of the parts of M.Sc. (Medical Biochemistry) Course Examinations, unless he / she has attended the course in all the subjects for the prescribed period in an affiliated Institution recognized by this University and has produced the necessary certificates of study, attendance, satisfactory conduct and progress from the Head of the Institution.

b) A candidate is required to put in a minimum of 85% of attendance out of 270 working days both in theory and practical separate in each subject before admission to the examination.

c) A candidate lacking in the prescribed attendance and progress in any one subject in theory and practical classes, wherever necessary in the first appearance, shall not be permitted for admission to the entire examination.

14. CONDONATION FOR LACK OF ATTENDANCE:

There shall be no condonation of attendance in Post Graduate Courses. As per University norms.

15. SUBJECTS OF STUDY

Preliminary Examinations (at the end of first year)

Paper – I: Anatomy (50 marks) and Physiology (50 marks)	100 marks
Paper – II: Biochemistry	100 marks

Final Examinations (at the end of third year)

Paper – I: Physical and organic aspects of biochemistry, membranes,
instrumentation and laboratory techniques 100 marks

Paper – II: Enzymes, intermediary metabolism and metabolism of
biomolecules, nutrition and molecular biology 100 marks

Paper – III: Clinical biochemistry, endocrinology, immunology, free radicals and
antioxidants, oncogenesis 100 marks

16. INTERNAL ASSESSMENT:

First year of the course:

Anatomy: 15 marks

Physiology: 15 marks

Biochemistry: 20 marks

Second and third year of the course:

Project work: 15 marks

Internal assessment based on tests: 35 marks

Total marks: 50 marks

17. PROJECT

All candidates must carry out a project during the course. They will be awarded a mark out of 15 for this. This mark will contribute to their internal assessment mark for the second and third years.

18. QUESTION PAPER PATTERN:

The following examination pattern shall be uniformly followed for the M.Sc., (Biochemistry) course and shall come into force for the candidates who join the course in commencing from 1st Oct 2014

For each theory paper

1.	Essay questions	2x 15 marks	=	30 marks
2.	Short notes	10x 5 marks	=	50 marks
	Total			80 marks

Duration of examination: 3 hours.

19. MARKS QUALIFYING FOR A PASS:

Preliminary examinations:

A candidate shall be declared to have passed the preliminary examination if he /she obtains the following qualifying marks:

A candidate should obtain at least 50% of the marks, each in Anatomy (written examination + internal assessment), Physiology (written examination + internal assessment) and Biochemistry (written examination + internal assessment).

A candidate who fails in any one subject, viz. Anatomy, Physiology or Biochemistry, may be permitted to take the repeat examination in that subject only, in order to qualify for the preliminary examinations.

A candidate who fails in any subject of the preliminary examinations shall be permitted to join the second year of the course without loss of time.

No candidate shall be permitted to sit for the preliminary examinations on more than 4 occasions.

Final examinations:

A candidate shall be declared to have passed the final examination if he /she obtains the following qualifying marks:

A candidate should obtain at least 50% of the marks in written and practical examinations separately and at least 50% in aggregate for a pass.

If a candidate fails in either the written or the practical examination, they will re-appear for both components of the examination.

20. REVALUATION OF ANSWER PAPER:

There shall be no re-totaling or revaluation of the answer papers of failed candidates in any post-graduate examination. Answer papers of candidates who are found to fail in any paper of the written examination will be subjected to double valuation.

21. NUMBER OF APPEARANCES:

a. A candidate registered for three years Post-Graduate Degree Course must qualify in the examinations within six years of the date of his / her admission.

b. A candidate will not be permitted to appear for more than 7 attempts in the final examination and shall be discharged from the course if he / she fails to pass the examination in the said number of attempts.

22. DURATION FOR COMPLETION OF THE COURSE OF STUDY:

The duration for the completion of the course shall be fixed as double the time of the course and the students have to pass within the said period.

23. RE-ADMISSION AFTER BREAK OF STUDY:

Please refer to the separate regulations for re-admission after break of study for all courses.

24. MIGRATION / TRANSFER OF CANDIDATES:

Migration or transfer of candidates from one recognized college to another recognized college of this University or from another University shall not be granted.

25. AUTHORITY TO ISSUE TRANSCRIPT:

The University shall be the Authority for issuing Transcript after remitting the prescribed fee of Rs. 1000/- (Rupees one thousand only) or as may be prescribed from time to time.

26. SCHEME OF EXAMINATIONS: (At the end of third year)

The scheme of examinations is as follows:

S.No	Components	Marks	
		Max	Min
Written Paper I	Physical and organic aspects of biochemistry, membranes, instrumentation and laboratory techniques	100	50
Written Paper II	Enzymes, intermediary metabolism and metabolism of biomolecules, nutrition and molecular biology	100	50
Written Paper III	Clinical biochemistry, endocrinology, immunology, free radicals and antioxidants, oncogenesis	100	50
	Practical examination	125	63
	Viva voce examination	25	13
	Internal assessment	50	25
	Total	500	250

Practical examinations (125 marks)

The duration of the practical examinations for M.Sc. Biochemistry shall be two days. It will consist of the following components:

A. Identification of a biochemically important substance and chromatogram marks	50
B. Standard curve for and estimation of an analyte	25 marks
C. Electrophoresis	25 marks
D. Enzyme kinetics	25 marks

	Total 125 marks

SYLLABUS FOR MSc (MEDICAL BIOCHEMISTRY) COURSE
PRELIMINARY YEAR
BIOCHEMISTRY

1. CELL

Cell and cellular organelles

Basics of structure of eukaryotic cells

Overview of cellular organelles (mitochondria, nucleus, ribosomes, proteasomes,

lysosomes, endoplasmic reticulum, peroxisomes and golgi apparatus) and their functions

Membrane structure (fluid mosaic model)

Liposomes

Transport across membranes

2. ENZYMES

Nomenclature and IUBMB classification of enzymes

General properties and mechanism of action of enzymes

Specificity of enzymes

Concept of active site

Cofactors

Factors that affect the activity of enzymes

Zymogens and their activation

Enzyme inhibition

Enzyme regulation: covalent modifications of enzymes, allosteric and feedback regulation; concept of rate-limiting enzymes; constitutive and inducible enzymes

Importance of enzymes in diagnosis and treatment of diseases; isoenzymes

3. VITAMINS

Fat- and water-soluble vitamins: dietary sources, absorption, active forms, recommended dietary

allowances and deficiency manifestations

Hypervitaminosis

4. BIOENERGETICS

Biologic oxidation, electron transport chain and oxidative phosphorylation

5. CARBOHYDRATES

Classification of carbohydrates with physiologically important examples and functions of each type

Digestion and absorption of carbohydrates

Examples of common dietary carbohydrates and the foods that they are present in
Enzymes involved in digestion of carbohydrates: sources, sites of action and effects

End products of digestion and their absorption

Lactose intolerance

Importance of dietary fibre

Glucose transporters

Types, functions, tissue specificity and importance of each

Pathways of carbohydrate metabolism

Glycolysis; Rapaport- Leubering shunt (2, 3-bisphosphoglycerate shunt)

Pentose phosphate pathway and related disorders

Citric acid cycle/ Krebs' cycle/ tricarboxylic acid cycle

Glycogenesis, glycogenolysis and glycogen storage disorders (only names and associated enzyme deficiencies are required for the disorders)

Gluconeogenesis; Cori's cycle and glucose-alanine cycle Uronic acid pathway

Metabolism of galactose; galactosemia

Metabolism of fructose and related disorders

Polyol pathway and its importance in complications of diabetes mellitus

Regulation of blood glucose levels

Diabetes mellitus

Investigations in patients with diabetes mellitus - plasma glucose estimations (fasting

and postprandial), glycated haemoglobin (HbA1c), urine analysis for detection of glucose, ketone bodies and proteins in urine, microalbuminuria, glucose tolerance test

(GTT).

6. LIPIDS

Definition, classification and functions of lipids

Classification of fatty acids

Importance of cholesterol, phospholipids, gangliosides, triacylglycerols and eicosanoids in the body

Lipoproteins: types and functions

Digestion and absorption of lipids

Dietary lipids, sources, sites and action of enzymes involved in digestion of lipids

Absorption of lipids, steatorrhoea, importance of chylomicrons

Pathways of lipid metabolism

Fatty acid oxidation: types of oxidation; beta-oxidation of saturated fatty acids and energetics of the pathway; related disorders.

Concept that fatty acids can be synthesized in the body from acetyl CoA from various sources (pathway not required)
Metabolism in adipose tissue
Metabolism of ketone bodies; regulation and clinical significance of the processes
Metabolism of cholesterol: outline of biosynthesis only with emphasis on regulatory step; regulation of synthesis of cholesterol and bile acids; cholesterol-lowering agents; enterohepatic circulation.
Metabolism of lipoproteins; dyslipidemias; lipoprotein (a); risk factors for atherosclerosis and coronary artery disease; definition of metabolic syndrome
Eicosanoids and their significance
Phospholipids and their significance; lecithin-sphingomyelin ratio in amniotic fluid
Lipid storage disorders (names of conditions and associated enzyme defect only)
Role of liver in lipid metabolism; fatty liver and lipotropic factors

7. INTEGRATED METABOLISM

Overview of metabolism in the fed and fasting states
Overview of metabolism in liver, brain and muscle

8. MINERALS

Metabolism of macro minerals and trace elements and related disorders

9. NUTRITION

Importance of the various macro- and micronutrients in the diet
Calorific value of various macronutrients; glycemic index of food; importance of dietary fibre
Balanced diet; specific dynamic action; basal metabolic rate; respiratory quotient
Parenteral nutrition
Protein energy malnutrition
Body mass index (BMI); obesity

10. PROTEINS

Classification of amino acids
Separation of amino acids by paper chromatography
Classification of proteins.
Structural organization of proteins

Structure and functions of myoglobin, hemoglobin and collagen and associated disorders

Plasma proteins and their functions

Separation of serum proteins by paper and gel electrophoresis

Patterns of serum protein electrophoresis (normal pattern and patterns in multiple myeloma, cirrhosis and nephrotic syndrome)

Digestion and absorption of proteins

Overview of amino acid absorption

Amino acid transporters in the intestine

Meister's cycle

Disorders associated with amino acid absorption

General pathways of amino acid catabolism

Overview and biochemical importance of the processes of transamination and oxidative deamination

Urea cycle and related disorders

Metabolism of individual amino acids

Overview of biosynthesis of non-essential amino acids

Functions of individual amino acids

Physiologically important products derived from amino acids, with overview of the pathways involved.

Catabolism of amino acids

Disorders of amino acid metabolism

11. NUCLEOTIDES

Types and functions of nucleotides and nucleic acids

Synthetic oligonucleotide analogues

Metabolism of nucleotides

Outline of synthesis of purine and pyrimidine nucleotides, with reference to precursors

and endproducts only

Salvage pathways and associated disorders

Degradation of purine and pyrimidine nucleotides and related disorders

12. HOMEOSTATIC MECHANISMS IN THE BODY

Acid base balance: hydrogen ion homeostasis and related disorders; blood gas parameters and clinical applications

Fluid and electrolyte balance; regulation of osmolality and maintenance of fluids in the

various body compartments and related disorders

13. HEME METABOLISM

Heme synthesis, regulation and porphyrias

Heme degradation and related disorders

14. FUNCTION TESTS

Renal, liver and thyroid function tests

15. MOLECULAR BIOLOGY

Overview of cell cycle

Structure of DNA and RNA Outline of DNA synthesis, with relevant enzymes

Types of DNA damage and mention of repair mechanisms of clinical relevance

Outline of RNA synthesis, with relevant enzymes; post-transcriptional

processing in

eukaryotes

Genetic code and outline of protein synthesis in eukaryotes; post-translational modifications

Mutations

Basic concepts of gene expression in eukaryotes

Recombinant DNA technology; principles and applications of various techniques (polymerase chain reaction, blotting techniques, restriction fragment length polymorphism)

Transgenic animals

Human genome project

Gene therapy

16. MISCELLANEOUS TOPICS

Metabolism of xenobiotics

Oxidative stress: mechanisms of generation of reactive oxygen species (ROS) in cells and the role of antioxidants

Physiology syllabus for MSc course

1. General Physiology

Cellular organelles

Homeostasis

Concept of maintenance of internal environment

Feedback systems.

- a. Negative feedback as the most common type of physiological control
- b. Examples of negative feedback
- c. Instances of positive feedback in physiology:
 1. Oxytocin and labor
 2. Estrogen and LH in follicular phase of menstrual cycle
1. Action potential formation - depolarization and sodium channel opening
Coagulation cascade

Body fluids

- d. Total body water
- e. Body fluid compartments: extracellular, intracellular, transcellular.
- f. Composition of extracellular fluid, intracellular fluid and plasma.
- g. Plasma proteins being the major difference between plasma and the rest of ECF.
- h. Concept of electroneutrality: anion gap refers to unmeasured anions in plasma.
- i. Osmolarity of body fluids
- j. Difference between tonicity and osmolarity
- k. Starling's forces
- l. Edema and its causes in terms of Starling's forces

Cell membrane

- a. Fluid mosaic model
- b. Composition - lipids, proteins

Membrane transport

c. Passive transport

1. Simple diffusion of respiratory gases through lipid film
2. Diffusion of ions through ion channels
 1. Sodium, potassium, calcium and chloride channels
 2. Non-gated channels, voltage-gated, ligand-gated channels and mechano-gated channels
3. Facilitated diffusion - glucose transporters (GluTs)

4. Osmosis – special name given to water diffusion

a. Active transport - primary and secondary

1. Primary active transport:

- sodium-potassium pump,
- calcium pumps - plasma membrane calcium pumps (PMCA) and Sarco/endoplasmic reticulum calcium pumps (SERCA)
- Proton pumps - V-type H ATPase, H/K ATPase

1. Secondary active transport: sodium-glucose co-transport (SGLT), sodium-aminoacid co-transport, sodium-hydrogen exchangers, sodium-calcium exchangers, Na/2Cl/K

b. Transport by formation of membrane vesicles

- Endocytosis
- Exocytosis

Membrane potential

c. Resting membrane potential - due to dominance of potassium conductance at rest.

d. Action potential

Cell Signaling

2. Blood

- Composition
- Normal blood volume
- Hematocrit (dealt later)
- Composition of plasma - electrolytes and non-electrolytes
- Plasma versus serum

Plasma proteins

- **Albumin:** Production, Functions
- Oncotic pressure, Normal levels and causes for variation
- **Globulins** - list the alpha, beta and gamma globulins
- Role of major alpha and beta globulins
- Gamma globulins (dealt under B lymphocytes)
- Definition and Normal values, factors influencing ESR (fibrinogen particularly), causes for increased ESR, significance of ESR in disease (acute phase reaction).

Erythrocyte Sedimentation Rate

Red Blood Cells

- Physical characteristics, concentration and causes for physiological variation, functions, sites of red blood cell production, general changes that take place during erythropoiesis, regulation/factors affecting erythropoiesis, Life span and destruction of RBCs, Hematocrit/PCV,
- Normal values for Indian population

Hemoglobin

- Components of Hb, types, normal levels (Indian population also)
- Role in gas transport:
- Oxygen-Hb dissociation curve (done under resp system)
- Oxygen carrying capacity of blood
- hemoglobin as a buffer
- Reduced hemoglobin and cyanosis
- Abnormal Hb
- Breakdown, Hemolytic jaundice

Anemia

- Anemia - Definition, etiological classification, morphological classification , effects, symptoms and signs
- Reticulocyte count – normal value and causes for increased and decreased reticulocyte count, reticulocyte response

Polycythemia

- Polycythemia rubra vera
- Secondary polycythemia- causes
- Effects of polycythemia
- Principles of treatment

Platelets

- Formation from megakaryocytes, normal count, Life span & removal
- Functions,
- Thrombocytopenia – causes and effects

Hemostasis

- Mechanisms involved in hemostasis:
 - Vasoconstriction
 - Platelet plug formation
 - Clotting or coagulation - coagulation factors, intrinsic, extrinsic and common pathways
 - Clot retraction
- Anticlotting and fibrinolytic mechanisms in the body
- Anticoagulants in laboratory
- Abnormalities of coagulation_ Tests of hemostasis: platelet count, BT, CT, PT, APTT, factor assays

Blood groups

- Importance of blood groups
- ABO system
- Genetic determination
- Agglutinins in plasma
- Frequency of different blood groups in India
- Rh blood group
- Rh incompatibility
- Presence of other minor blood group systems
- Blood grouping/typing
- Cross match
- Erythroblastosis Fetalis: prevention, treatment

White blood cells

- Normal count
- Types – granulocytes, agranulocytes
- Morphology
- Differential count
- Conditions in which counts are increased and decreased
- Functions of neutrophils, eosinophils, basophils, mast cells
- Lymphocytes , monocytes.
- Monocyte macrophage system

Leucopoiesis

- gross changes during maturation

Immunity

- Types
 - Innate immunity – cells and mechanisms involved
 - Adaptive – types
 - Lymphoid organs , Development of T and B cells
 - Cell mediated immunity - antigen presenting cells, MHC, antigen recognition, processing and presentation, helper T cell activation, killing by cytotoxic T cells
 - Humoral immunity -
 - B cell activation, plasma cells, immunoglobulins – types and functions
 - Immunological memory
 - Primary and secondary immune response
 - concept of Complement system
- ### **Lymph**
- Formation and composition of lymph, Types of lymphatics, Lymphatic circulation, functions of lymph, lymphedema

3. Muscle

1. Structure of Skeletal Muscle Features

- Striations
- No anatomical connections between muscle fibers
- Voluntary
- Under nervous control

Morphology

- Muscle fibers - myofibrils – filaments
- Fiber - long, cylindrical, multinucleated
- Begin and end in tendons
- Cell membrane – sarcolemma

Proteins

- Actin - two chains
- Myosin - two light chains and two heavy chains
- Tropomyosin
- Troponin I - inhibits interaction between actin and myosin
- Troponin T - connects troponin complex to tropomyosin]
- Troponin C - binds to calcium

Sarcomere

- I band, A band, H band
- Sarcomere - part between two adjacent Z lines
- Z line - Actin filaments attached to Z line

Sarco-tubular system

- T tubule - continuous with the sarcolemma
- Terminal cisterns of the sarcoplasmic reticulum (SR)
- Triads -Present at A-I junction
- T tubules - important for the transmission of action potential
- SR - calcium store

Dystrophin-glycoprotein complex

Neuro-muscular junction (NMJ)

Structure

- Terminal boutons or end feet
- Vesicles
- Motor end plate
- Junctional folds
- Nicotinic acetylcholine receptors
- Synaptic cleft

Neuromuscular transmission

- Action potential reaching the axon terminal
- Opening of voltage gated calcium channels
- Exocytosis of acetyl choline
- Quantal release of neurotransmitter
- End plate potential
- Muscle action potential -RMP -90 mV; action potential duration; Absolute refractory period - 1 to 3 ms
- Acetylcholinesterase

Contraction of skeletal muscle

Contraction

- Muscle twitch - response to single action potential
- Twitch duration

Molecular mechanism

- Sliding filament theory
- Role of ATP in contraction

Excitation-contraction coupling

- Action potential reaches the T tubules
- Activation of dihydropyridine receptors (DHPR)
Activation of ryanodine receptors (RYR)
- RYR and DHPR - physically coupled
- Voltage induced calcium release (VICR) from SR

Relaxation

- Reduction in cytosolic calcium
- Calcium is removed by SERCA
- ATP is required for contraction and relaxation

Types of contraction

- **Isotonic** – shortening
- **Isometric** - no shortening

Length-tension relationship

- **Isometric** contractions
- **Resting length or optimal length** - length of the muscle at which there is maximum active tension
- Muscles at rest are at this length
- Maximum cross-linking between actin and myosin at this length

Muscle fiber types

Heat production

Denervation

- Physiological basis of denervation hypersensitivity
- Atrophy
- Fasciculations

Motor unit

Definition

EMG

Smooth muscle

Structure

- Lack of striations
- Dense bodies
- Lack of troponin

- Sarcoplasmic reticulum less extensive

Types

Response of vascular and non vascular smooth muscle to autonomic influences

Contraction

Differences in EC coupling as compared to skeletal muscle

Autonomic influences

- Action of epinephrine and norepinephrine and acetylcholine on vascular and non vascular smooth muscle
- Bronchodilators - beta adrenergic stimulation – bronchodilation

Cardiac muscle

Morphology

- Intercalated disks
- Gap junction - spread of action potential from one cell to the adjacent cell-functional syncytium

Electrical properties

Dealt with under cardiovascular system

Contraction

- Similar to skeletal muscle
- Duration of contraction longer than that of skeletal muscle
- Length-tension relationship discussed in the Cardiovascular system

Metabolism

- Almost exclusively dependent on aerobic metabolism-rich in mitochondria, dense capillary network.

4. The Endocrine System

Introduction

- Classification of hormones
- concept of feedback regulation of hormone release
- Mechanism of action of hormones
- Receptors
- Second messengers
- Hormone disposal

Hypothalamus

- Relation of hypothalamus to pituitary gland:
- Hypothalamohypophyseal tract
- Hypothalamohypophyseal portal circulation–
- Hypothalamic hormones which control anterior pituitary gland
 - Thyrotropin-releasing hormone (TRH),
 - Corticotropin releasing hormone (CRH),
 - Gonadotropin releasing hormone (GnRH),
 - Growth hormone releasing hormone (GHRH),

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synthesized in hypothalamus and released from posterior pituitary gland:
Anti-diuretic hormone, Oxytocin

Pituitary Gland

- Anterior pituitary gland:
- Hormone secreting cells of anterior pituitary:
Somatotropes, Lactotropes, Corticotropes, Thyrotropes, Gonadotropes

All hormones released here are either short peptides or proteins.

- Anterior pituitary gland hormones:
 - Tropic hormones:
 - Thyroid-stimulating hormone (TSH)
 - Adrenocorticotrophic hormone (ACTH)
 - Follicle-stimulating hormone (FSH)
 - Luteinizing hormone (LH)
 - Growth hormone
 - Prolactin
- Posterior pituitary hormones:
 - Anti diuretic hormone or vasopressin
 - Oxytocin
- Growth hormone:
 - Actions of growth hormone – action on tissue and skeletal growth, carbohydrate, lipid and protein metabolism
 - Insulin-like growth factors (IGFs) or Somatomedins

- Regulation of growth hormone secretion
- Stimuli which affect growth hormone secretion: Stimuli that increase secretion, stimuli that decrease secretion
- Abnormalities related to growth hormone secretion
- Gigantism
 - Causes of gigantism
 - Features of gigantism
- Acromegaly
 - Features of acromegaly
- Pituitary dwarfism
 - Features of pituitary dwarfism

- **Prolactin**
 - Actions of prolactin
 - Regulation of prolactin release

- **Antidiuretic hormone (ADH)**
 - Site of synthesis and release
 - Mechanism of action
 - Main site of action – Distal tubules and collecting ducts
 - Functions of ADH : Role in osmotic regulation, and volume regulation
 - Disorders of ADH secretion : Diabetes insipidus

- **Oxytocin**
 - Site of synthesis and release
 - Actions of oxytocin
 - Role in milk-ejection reflex
 - Role in parturition
 - Regulation of secretion

Thyroid Gland

- Functional anatomy of thyroid gland
- Outline of synthesis of thyroid hormones
- Release of thyroid hormones
- Thyroid hormones – Thyroxine (T4), T3
- Peripheral conversion of T4 to T3

- Mechanism of action
- Actions of thyroid hormones on
 - metabolic rate or calorogenesis
 - heart
 - muscle
 - bone
 - nervous system
 - Gastrointestinal system and lipid metabolism

- Regulation of thyroid hormone secretion
 Role of TRH, TSH
 T3 – the principal feedback regulator

- Pathophysiology of thyroid hormones:
- **Hypothyroidism:**
 - Myxoedema
 - Cretinism
 - Endemic goiter
 - Features of hypothyroidism

- **Hyperthyroidism:**
 - Graves disease
 - Features of hyperthyroidism
 - Thyroid Function tests

Adrenal Gland

- **Adrenal cortical hormones:**
- Outline of synthesis of adrenal cortical hormones
- Layers of adrenal cortex and hormones secreted by each:
 - Glucocorticoids
 - Mineralocorticoids
 - Sex steroids

- **Glucocorticoids**
- Mechanism of action
- Functions of glucocorticoids:
 - Action on carbohydrate metabolism
 - Action on lipid metabolism
 - Action on protein metabolism
 - Glucocorticoids as anti-inflammatory agents
 - Effect on blood cells
- Diseases related to glucocorticoids:
 - Cushing's syndrome:
 - Features of Cushing's syndrome – Moon face, buffalo hump, pendulous abdomen, purple striae, ecchymoses, hypertension, hyperglycemia, osteoporosis
- Regulation of glucocorticoids:
 - Control through ACTH
 - Diurnal rhythm
 - Control via limbic system
- **Mineralocorticoids**
- Mechanism of action of mineralocorticoids:
 - Aldosterone binding to cytoplasmic receptor – formation of receptor hormone complex – effect on gene transcription
- Action of mineralocorticoids:
 - Sodium and water homeostasis
 - Action on epithelial sodium channels (ENaCs)
 - Reabsorption of sodium from nephron, sweat, saliva, colon
 - H⁺ and K⁺ exchange for sodium
- Regulation of aldosterone secretion:
 - Renin-angiotensin II – as the important regulator
 - Plasma K concentration
 - ACTH

- Hormonal imbalances of mineralocorticoids:
- **Hyperaldosteronism:**
- Primary hyperaldosteronism – Conn’s syndrome
- Features of hyperaldosteronism:
 - K depletion
 - Na retention
 - Muscle weakness
 - Hypertension
 - Hypokalemic alkalosis
- Aldosterone escape
- **Adrenal insufficiency:**
- Primary adrenal insufficiency – Addison disease (Disease of adrenal cortex)
 - Hypotension
 - ‘Addisonian Crisis’
 - Increased ACTH levels
 - Skin pigmentation

Clinical features of adrenal insufficiency

Hormones concerned with calcium homeostasis

- Parathyroid hormone, Calcitonin, Vitamin D
- **Calcium:**
- Normal distribution of calcium in the body
- Calcium in bones
- Calcium in plasma – Total calcium and ionized calcium
- **Parathyroid hormone:**
- Actions of parathyroid hormone on bone, kidney, intestine and 1,25-cholecalciferol formation
- Regulation of parathyroid hormone secretion – plasma calcium as the important regulator
- Pathophysiology of Parathyroid hormone:
- **Hyperparathyroidism:**
- Primary hyperparathyroidism

- Hypercalcemia
- Increased bone resorption
- calcium stones in kidney
- **Hypoparathyroidism:**
- Clinical application:
- Parathyroidectomy resulting in hypocalcaemia and associated complications – neuromuscular excitability, tetany
- **Calcitonin:**
- Secretion from parafollicular cells of thyroid gland
- Actions of calcitonin
- **Vitamin D:**
- Sites of synthesis of calcitriol
- Mechanism of action
- Regulation of 1,25-cholecalciferol synthesis – by plasma calcium and PTH
- Clinical application:
- Rickets
 - Deficiency of vitamin D
 - Poor mineralization of bones
 - Feature of rickets – bowing of weight bearing bones, dental defects

Osteomalacia in adults

Hormones of Pancreas

- Islets of pancreas hormones secreted by them
- **Insulin:**
- Mechanism of insulin release
- Actions of insulin – on adipose tissue, muscle, liver
- Insulin as an anabolic hormone
- Regulation of Insulin secretion:
- Regulation of insulin secretion via plasma glucose
- Diabetes mellitus:
- Diabetes mellitus type I
- Diabetes mellitus type II
- Clinical features of diabetes mellitus

- **Glucagon:**

- Actions of glucagon:

Glycogenolytic, gluconeogenic, lipolytic, and ketogenic

Other Endocrine glands & Hormones

- **Pineal gland:**

- Circadian rhythm
- Role of melatonin
- Concept of 'Biological clock'

- **Kidney:**

- As an endocrine organ secreting erythropoietin

- **Atrial natriuretic peptides:**

- ANP
 - Actions of ANP

- **Gastrointestinal hormones:**

Listed under GIT

5. Reproductive System

Sex determination

- Normal chromosomal pattern, Sex chromosomes, Genetic sex determination, Sex chromatin
- Genetic sex, Gonadal sex and phenotypic sex
- Development of gonads – role of SRY gene, testis determining factor
- Development of male and female internal genitalia – development of Wolffian duct and Mullerian duct, role of testosterone and Mullerian inhibiting substance
- Development of external genitalia – role of dihydrotestosterone

Puberty

Definition, age of onset, mechanism of onset of puberty

Menopause

- definition

Pituitary gonadotropins (LH, FSH), prolactin

- receptors, mechanism of action, functions, regulation of secretion

Male reproductive system

• Functional anatomy

- Testis – seminiferous tubules, Sertoli cells, Leydig cells, Blood Testis barrier, Epididymis, Vas deferens, Seminal vesicle, Prostate gland

Spermatogenesis

- Factors regulating spermatogenesis
- Structure of spermatozoa
- **Hormones produced by the testis**
 - Testosterone
 - Source, conversion to DHT in tissues
 - Mechanism of action
 - Physiological actions
 - Other hormones : Inhibin - source and functions
- **Control of testicular function** Hypothalamic and pituitary control on testis
- Feed back control of testicular hormones on hypothalamus and pituitary

Male sexual act

- Erection
- Ejaculation

Female reproductive system

- **Functional anatomy of the female reproductive system** – ovaries, internal genitalia (uterus, vagina, fallopian tubes), external genitalia
- **Oogenesis**
 - Stages
 - Oocyte attrition
 - Differences between spermatogenesis and oogenesis
- **Development of ovarian follicles** Stages of follicle development ovulation, luteinisation, luteal regression
- Control of follicular development, ovulation and luteinisation – role of FSH, estrogen and LH
- Follicle attrition

Hormones produced by the ovaries

- **Steroids** – estrogens and progestins
 - Synthesis-synergistic role of thecal and granulosa cells
 - Mechanism of action
 - Functions – effect on organs of reproductive system, secondary sexual characteristics and systemic effects
 - Synthetic estrogens and progestins – use as oral contraceptives
- **Feedback regulation of ovarian function**
- **Menstrual cycle**
 - Ovarian cycle: Phases and duration, hormonal changes during the cycle -changes in FSH, LH, estrogen, progesterone
 - Uterine cycle : Phases and duration, Cyclical changes in the uterus (correlated with ovarian and hormonal changes). Mechanism of menstrual bleeding. Normal menstruation- composition, amount of blood loss
 - Cyclic changes in the cervix, vagina and breast
 - **Ovulation** : Mechanism, Indicators of ovulation, importance of detecting ovulation and its time
- **Contraception** – rhythm, barrier, oral contraceptives, IUCD, permanent – physiological basis of their use as contraceptives

Physiology of pregnancy

- **Fertilization and implantation** (not to dealt in detail – covered in embryology) : Transport of sperm, changes occurring in the sperm in the female genital tract, fusion of gametes – acrosomal reaction, zygote formation, blastocyst formation, implantation, formation of placenta – chorionic villi, placental sinus
- Corpus luteum of pregnancy
- **Hormones secreted by the placenta :**
 - hCG - secretion, functions, hCG as the basis for the immunological tests for pregnancy.
 - Roles of estrogen and progesterone secreted by placenta.

Parturition : Onset of labor- hormonal factors, mechanical factors, mechanism of labor – positive feed back

Lactation

- breast development- role of estrogen and progesterone
- Initiation of lactation after delivery
- Milk ejection reflex
- Effect of lactation on menstrual cycle

6. Gastro Intestinal System

Salivary glands

- Function of saliva
- Control of secretion

Gastric secretion

- Chief cells - pepsinogen & gastric lipase
- Parietal cells - HCl & intrinsic factor
- Mechanism of gastric secretion
- Stimuli for secretion - gastrin, histamine and acetylcholine
- Phases of secretion - cephalic, gastric & intestinal
- Importance of mucus-bicarbonate barrier
- Proton pump
- Physiological basis for the use of proton pump blockers and histamine receptor blockers

Pancreatic secretion

- Enzymes – Trypsin, Chymotrypsin, Elastase, Carboxypeptidase, Lipase, Amylase, Nucleases
- Activation of trypsinogen by enterokinase
- Activation of other pro-enzymes by trypsin
- Alkaline pH and its importance
- Regulation of secretion
- Mainly Hormonal regulation – secretin and cholecystokinin
- Neural regulation

Small intestine

- Succus entericus and the enzymes in it
- Enterokinase

Liver

- Portal system
- Functions of liver
 - Metabolism
 - Detoxification
 - Synthesis of proteins like albumin, fibrinogen, alpha globulins, clotting factors II, VII, IX, X (vitamin K dependent), angiotensinogen, transport and storage proteins

- Hormone metabolism
- Cholesterol excretion
- Biliary secretion

Bile

- Composition
- Bilirubin
- Bile acids
- Functions of bile acids
- Emulsification of fat
- Absorption of fat
- Micelles
- Entero-hepatic circulation - terminal ileum
- Regulation of biliary secretion

Gall bladder

- Concentration of bile

Digestion and absorption

Digestion and absorption of carbohydrates

- Digestion
 - Salivary amylase
 - Pancreatic amylase
 - Brush border enzymes - lactase, sucrase, maltase

- Absorption
 - Sodium-dependent glucose transporter
 - Glucose transporter

Digestion and absorption of proteins

- Pepsin
- Endopeptidases – trypsin, chymotrypsin and elastase
- Exopeptidase – carboxypeptidase, Aminopeptidases
- Dipeptidases
- Intracellular peptidases

Absorption - co-transport with sodium

Digestion and absorption of lipids

- Digestion -Pancreatic lipase
- Absorption
 - Chylomicrons
 - Lacteals
 - Fat soluble vitamins

Iron

Absorption

Water movement in intestine

GI Motility

Mouth and oesophagus

- Deglutition
- Lower oesophageal sphincter and its importance

Stomach

- Gastric emptying
- Factors affecting gastric emptying
- Vomiting

Movements of small intestine

- Peristalsis
- Segmentation contractions or mixing contractions
- Tonic contractions

Movements of large intestine

- Peristalsis
- Segmentation contractions
- Mass action contraction
- Defecation reflex

Gastro intestinal hormones

- Gastrin
- Cholecystokinin
- Secretin

Enteric nervous system

- Myenteric plexus
- Meissner's plexus
- Control by autonomic nervous system

7. The Cardiovascular System

Functional anatomy of heart

- 4 chambers, 4 valves, Input and output vessels
- Conducting system
- AV ring and electrical discontinuity
- Coronary supply

Myocardial cell Physiology:

SA nodal cell

- Contour of action potential: phases 4, 0 and 3
- Currents responsible for generation of action potential: I_f , I_{CaT} , I_{CaL}
- Intrinsic rate of the SA node and Influence of autonomic nervous system, hormones and temperature.
- Sinus arrhythmia, sinus bradycardia, sinus tachycardia

Ventricular cell

- Contour of action potential, phases 0,1,2,3,4
- Currents responsible for AP
- Calcium-handling in ventricular cell:
- L-type calcium channels, RyR, SERCA, CICR (Calcium-Induced Calcium Release)
- Excitation-contraction coupling - Calcium binding to Troponin C

Atrial cell

Cells of conducting pathway:

- AV node: Main site of conduction delay
- Purkinje fibres are fastest

ECG

- Basics of ECG
- 12 Leads
- P, QRS, T and U waves
- PR, QT intervals
- Significance of ST segment being on the isoelectric line;

Properties of cardiac muscle:

Automaticity

- Of SA node
- Regulation of heart rate

Excitability and Refractoriness

Refractory period and its significance

Conductivity

AV node as the point of conduction delay

Contractility

• Determinants of force of contraction:

○ **Preload (Starling's law)**

- Venous return (considered in detail later) as preload;
- Family of Starling curves
- Different parameters used to construct Starling curves: X axis: Right atrial pressure (RAP); Left Ventricular end diastolic pressure (LVEDP), Left Ventricular end diastolic volume (LVEDV). Y axis: Stroke volume (LVEDV-LVESV),
- Cardiac output
- Ejection fraction (EF) as a measure of cardiac function.

○ **Afterload**

- Aortic impedance and
- Arterial pressure (considered in detail later) as afterload

○ **Inotropic status**

- Determined by neural, hormonal influences and ECF milieu

Frequency (or heart rate), (Bowditch phenomenon or Force-frequency relation)

Cardiac cycle

Chronological relationship of the following events shown on the same time axis:

- ECG
- Valvular events
- Heart sounds
- Pressure curves: Ventricular, atrial (RAP), aortic
- Volume curve: Ventricular

Cardiac output

- Determinants of cardiac output:

$$CO = SV \times HR$$

Stroke volume

Determinants of stroke volume: same as those of force of contraction. Refer to cell 4.4

Heart rate

Considered under cell 4.1

Vascular Physiology

- **Aorta and Arteries as windkessel vessels**
- Elasticity of these vessels serves to minimize extreme excursions of blood pressure during systole and diastole
- **Aortic impedance** as a long term determinant of Blood pressure – this is not regulatable by neural or hormonal mechanisms.
- (age-related hypertension) -
- **Arterioles as resistance vessels**
- **Vascular resistance** in regional circulations as determinant of **blood flow**
- **Total Peripheral Resistance** (TPR, in all arterioles) as determinant of **arterial pressure**.

Total Peripheral Resistance

- **Determinants of TPR:**
 - From Poiseuille's flow equation: the determinants should be **length** of vessels, **viscosity** of blood and **radius of arterioles**.
 - Consider the importance or otherwise of each determinant
 - **Radius (or Diameter) of arterioles** - is the most important determinant of TPR and is capable of being regulated.
- **Factors affecting arteriolar diameter:**
 - sympathetics
 - hormones (adrenalin, AT II, ANP)
 - local metabolic factors (carbon dioxide, pH, K, adenosine)
 - EDRF or NO
- **Capillaries** as exchange vessels
- **Veins** as capacitance vessels
- **Venous return (VR)** - forms the preload
- Factors which affect VR:
 - Venomotor tone
 - Blood volume (ECF vol)
 - Right atrial pressure (RAP)
 - Posture

- Atrial contractility
- Significance of JVP
- The relationship between RAP, VR and Cardiac output (CO)

Blood pressure

- **Determinants of blood pressure:**
 - Poiseuille's flow equation rearranged to get arterial pressure
 - Mean Art Press = CO X TPR
 - Determinants of CO - Refer to item 6
 - Determinants of TPR - refer to item 7
- **Regulation of blood pressure:**
 - Short-term
 - Long-term

Measurement of blood pressure

Non-invasive – Sphygmomanometry – its principles

Invasive – arterial pressure transducer

Cardiovascular autonomic reflexes

- Baroreceptor reflexes
- Chemoreceptor reflexes
- Vasovagal syncope
- Cushing's reflex
- The reflex pathways for the above and the purpose of each of those reflexes

Effects of exercise on cardiovascular system

- Immediate effects
- Long term effects

Pathophysiology

Hypertension

Essential, secondary, age-related

Hypotension or Shock

- Pathophysiology of shock:
 - Hypovolemic, cardiogenic, Distributive (septic, anaphylactic, neurogenic)
 - Obstructive

Heart failure

- Definition; effects of forward and backward failures
- Congestive heart failure - in terms of Starling curves

Myocardial infarction or heart attack

- Definition; Gross ECG changes
- Difference between ischemia and infarction
- Angina

Valvular diseases

Congenital heart diseases

Regional circulations with emphasis on peculiarities and what controls flow in them

- **Coronary**
- **Cerebral**
- **Renal** circulation - autoregulatory mechanisms to override global sympathetic discharge -
- myogenic factors and TG feedback

- **Splanchnic**
- **Cutaneous circulation and temperature regulation**
- **Skeletal muscle**
- **Pulmonary** (its pressures, hypoxic vasoconstriction)

Miscellaneous

8. The Respiratory System

Functional anatomy

- Overview of the respiratory tract
- Functions of the nose and para-nasal sinuses.
- The structure of the bronchial tree.
- conducting zone
- respiratory zone.
- Bronchial musculature: Influences of sympathetics and parasympathetics
- Overview of the pulmonary vasculature

Ventilation

Muscles of respiration

- Muscles of inspiration and expiration
- Accessory muscles of respiration
- The normal respiratory rate

Applied Physiology

- The importance of recognizing usage of the accessory muscles of respiration

Respiratory pressures

- Intra alveolar pressure
- Intra pleural pressure. Emphasis on the importance of the negative intra pleural pressure.
- Trans pulmonary pressure
- Changes in alveolar and intra pleural pressures during respiration

Applied Physiology

- The negative intrapleural pressure as a cause for pneumothorax in trauma, and iatrogenic cases

Airway resistance

- Sites of air way resistance
- Changes in airway resistance with inspiration and expiration
- Role of the sympathetics and parasympathetics on bronchial tone

Compliance

- Definition
- factors affecting compliance – elasticity of lung tissue and surface tension of alveolar lining

Applied Physiology

- Conditions of increased and decreased compliance

Surface tension, surfactant

- Surface tension in air-liquid interface
- Law of Laplace
- Surfactant – its role in reducing surface tension and keeping the lung dry

Lung volumes and capacities

- Spirogram
- Lung volumes & capacities
- The physiological significance of the functional residual capacity
- Changes in FEV1 and FVC and the FEV1/FVC ratio in obstructive and restrictive diseases.

Dead space

- Anatomical dead space
- Physiological dead space
- Ventilation/perfusion ratio V/Q

Applied Physiology

- High V/Q contributing to the physiological dead space

Low V/Q effectively serving as a shunt

Gas Exchange

- Fick's law of diffusion
- Factors that affect rate of gas diffusion
- Composition of atmospheric, tracheal and alveolar air
- Oxygen uptake is diffusion-limited
- Type I respiratory failure

Transport of oxygen

- The forms of transport of oxygen
- Oxygen carrying capacity of the blood
- Oxygen hemoglobin dissociation curve
- Gradient of partial pressures of oxygen from atmosphere to tissues

Applied physiology

Type I respiratory failure

- Hypoxia - types

- Asphyxia
- High altitude physiology – acute and chronic mountains sickness
- High altitude pulmonary edema
- Cyanosis

Transport of Carbon dioxide

- Forms of transport of carbon dioxide in blood
- Chloride shift
- Haldane effect
- Respiratory acidosis and alkalosis Carbon dioxide expulsion is ventilation-limited.
Hypercapnea, Type II respiratory failure

Control of Respiration

- Respiratory centres
- Neural control of respiration
- Chemical control of respiration

Pulmonary Circulation

- Pressure within pulmonary blood vessels
- Blood volume in lungs and its significance in posture
- Hypoxic vasoconstriction.

Exercise

- Effect of exercise on the respiratory system
- Types of exercise – aerobic (endurance) and anaerobic (resistance) exercises, and their benefits
- Concept of VO_2 maximum
- The concept of oxygen debt

Integrated lectures

Acid base balance

Respiratory failure I and II

Interpretation of arterial blood gases

Pulmonary Function testing

- Spirometry
- Arterial blood gases

- Peak flow

Miscellaneous

9. The Renal System

Overview of the structure and functions of the kidney

Overview of Functions of kidneys

- Formation and composition of urine
- Regulation of:
 - Blood volume
 - BP
 - Plasma electrolytes
 - Plasma osmolarity
 - Plasma pH

Synthesis of enzymes and hormones (Renin, Erythropoietin, Calcitriol, Kinins-Bradykinin, Prostaglandins)

Macroscopic Structure

- **L.S of kidney:** Hilum, cortex, medulla, renal pyramids, papilla, minor calyces, major calyces, Renal pelvis

Nephron

- Cortical Nephron (CN)
- Juxta medullary nephrons (JMN).
- Differences between the two types of nephrons
- PCT, LOH, DCT, Collecting duct
- Afferent arteriole, Glomerulus and the efferent arteriole; Peritubular capillaries and vasa recta
- Juxtaglomerular apparatus:
 - Its role in RAA axis to regulate blood pressure
 - Its role in Tubuloglomerular feedback to autoregulate Renal Blood flow and therefore GFR

Formation of Urine

- Glomerular filtration
- Tubular reabsorption
- Tubular secretion.

Glomerular filtration

- Glomerular filtration:
- Factors affecting filtration:

- Surface area of Glomerular Capillaries
- Starling's forces: $[GFR = K_f \times (P_G - P_B - \pi_G + \pi_B)]$
- MW of the substances
- Electrical charge of the substance

Glomerular filtrate as an ultrafiltrate of plasma

- Glomerular filtration rate (GFR) – determinants and regulation
- Renal blood Flow (RBF) – Determinants and regulation
- Regulation of GFR parallels regulation of renal blood flow
- Autoregulation of GFR and RBF
 - Myogenic mechanism
 - Tubulo-Glomerular feed back.

• Juxtaglomerular apparatus

- Macula densa of tubule
- JG cells of the arteriole

Role of JG cells in:

Autoregulation of GFR and RBF (TG feedback)

Regulation of blood pressure via the Renin-AT-Aldosterone axis

Concept of Renal clearance

- Inulin clearance (to measure GFR) and PAH clearance (to measure Renal blood flow)
- Creatinine clearance to assess GFR
- Serum creatinine as renal function test

Tubular reabsorption and Secretion

PCT

- Important transporters in PCT
- Reabsorption of sodium, chloride and water (2/3 of filtered load)
- Glomerulotubular balance.
- Almost 100 % reabsorption for glucose, bicarbonate and amino acids;
- Details of bicarbonate reabsorption

Loop of Henle (LOH)

- **Permeability characteristics**
 - **Descending Limb:** Impermeable to solutes, permeable to water

- **Ascending Limb:** Impermeable to water, permeable to solutes;
- Na⁺/2Cl⁻/K⁺ transporter and the sodium potassium pump in the TAL segment of ascending limb.
- Function of LOH₂: Creation of hyperosmolar medullary interstitium (MI) by two mechanisms:
 - Active transport of salt in TAL segment
 - Counter-current multiplication of the active transport
 - Role of vasa recta in maintaining the hyperosmolarity of the MI. Transporters in the luminal and basolateral borders

Distal Convoluted Tubules (DCT)

- Regulated reabsorption of sodium (aldosterone)
- Regulated secretion of potassium (aldosterone)
- Generation of bicarbonate including factors affecting the same:
 - Presence of proton pumps
 - Luminal electronegativity
 - Urinary buffers - Phosphate and ammonia

Collecting duct (CD)

Site of concentration of urine.

- Role of ADH in regulated water absorption
- Gradient for water absorption provided by hyperosmolarity of the medullary interstitium(MI) (created by LOH)
- Role of ADH in urea absorption abetting the hyperosmolarity of MI.

Micturition reflex

- Reflex pathway
- Cystometrogram

Kidney Function Tests

- Urine volume, urine albumin, urine microscopy
- Plasma Creatinine
- Creatinine clearance

Diuretics

Pathology

- Definition of acute and chronic renal failures

Artificial kidney

Regulation of Na⁺ conc. & ECF osmolarity

Regulation of K concentration

- Osmoreceptor, Thirst mechanism
- ADH
- Aldosterone, Angiotensin II, ANP
- Handling of K at DCT, (Aldosterone)
- Relationship between K concentration and pH of blood.

Regulation of Acid base balance

- Buffer systems: Bicarbonate, hemoglobin, Intracellular Proteins
- Respiratory regulation of Acid Base balance
- Renal regulation of Acid Base balance: Bicarbonate reabsorption in PCT and Bicarbonate generation in DCT
- Primary acid base disturbances: Respiratory acidosis, Respiratory alkalosis
Metabolic acidosis, Metabolic alkalosis.
- Concept of Anion gap

10. Autonomic Nervous System

Organization

- Sympathetic and parasympathetic divisions

- Pre-ganglionic neuron
- Post-ganglionic neuron

Sympathetic division

- Thoraco-lumbar outflow
- Ganglia close to vertebral column
- Post ganglionic neurons longer – travel along vessels to reach viscera
- Adrenal medullary cells are post-ganglionic neurons that have lost their axons

Parasympathetic division

- Cranio-sacral outflow
- Head - through the oculomotor, facial and glossopharyngeal nerves
- Thorax and upper abdomen - through the vagus
- Sacral - through S2, S3 and S4 sacral nerves to the viscera
- Ganglia are within or close to the organ of supply
- post-ganglionic neurons are short

Chemical transmission

- Acetylcholine - all pre-ganglionic neurons, post-ganglionic parasympathetic neurons, sympathetic post-ganglionic neurons that innervate sweat glands,
- All other sympathetic post-ganglionic neurons secrete nor-epinephrine

Acetylcholine

- Removal by acetylcholinesterase
- Receptors
- Muscarinic receptors - distribution and difference in action through these receptors
- Nicotinic receptors – distribution

Catecholamines

- Receptors
 - alpha 1 – vasoconstriction
 - alpha 2
 - beta 1 increases heart rate
 - beta 2 – bronchodilation
 - beta 3

Effects of sympathetic and parasympathetic stimulation

General functions

Sympathetics - fight or flight response

Eye

- Parasympathetic – accommodation, miosis
- Sympathetic – mydriasis

Heart

- SA node
 - Parasympathetic - decreases heart rate – muscarinic receptor
 - Sympathetic - Increases heart rate - beta 1 receptors
- Atria & Ventricle
 - Parasympathetic - decreases force of contraction
 - Sympathetic - increases force of contraction - beta 1 & 2 receptors
- AV node and Purkinje fibers
 - Parasympathetic - decreases conduction velocity
 - Sympathetic - increases conduction velocity - beta 1 & 2 receptors

Lungs

- Parasympathetic – bronchoconstriction
- Sympathetic
 - Dilation - beta 2

Vessels

- Arterioles
 - Sympathetic - vasoconstriction - alpha 1 & 2

- Veins

Sympathetic - constriction - alpha 1 & 2

Stomach and intestine

- Parasympathetic
 - Increases motility & secretion
 - Relaxes sphincters
- Sympathetic
 - Decreases motility & secretion
 - Contracts sphincters

Gall bladder

- Parasympathetic – contraction
- Sympathetic – relaxation

Urinary bladder

- Detrusor
 - Parasympathetic – contraction

- Sympathetic – relaxation
- Sphincter
 - Parasympathetic – relaxation
 - Sympathetic – contraction

Male sex organs

- Erection – parasympathetic
- Ejaculation – Sympathetic

Skin

- Pilomotor - Sympathetic – contraction
- Sweat glands
 - Parasympathetic - generalized dilute secretion

Liver

Sympathetic – glycogenolysis

Pancreas

- Exocrine
- Parasympathetic increases secretion
- Sympathetic -decreases

Salivary gland

- Parasympathetic - profuse watery secretion
- Sympathetic - thick viscous secretion rich in enzyme

Lacrimal gland

Parasympathetic – secretion

Adipose tissue

Drugs acting on the autonomic nervous system

Higher control

- Hypothalamus
- Medulla – RVLN

Diseases

11. The Nervous System

Organisation

1. CNS

2. PNS
 - Somatic NS
 - Autonomic NS
 - Enteric NS

Neural tissue

1. Neuron - Structure, functional features, types - structural & functional classification
 - Ganglion & Nucleus
 - Neuroglia - General features, types, functions, myelination

Nerve fibres

1. Broad principles of Erlanger & Gasser's classification
 - Functions & susceptibility to damage
2. Anterograde & retrograde axoplasmic transport, with clinical application
3. Neural growth, Nerve injury & repair of injured peripheral nerve fibre with clinical application

Nerve impulses

1. Concept, characteristics, genesis & ionic basis of Resting membrane potential, Electrotonic potential, Action potential in the neuron
 2. Continuous & Saltatory conduction of action potential
- Factors affecting conduction velocity

Synapses

1. Electrical & chemical synapse
2. Functional anatomy of chemical synapse
3. Types of chemical synapse
4. Steps in synaptic transmission
5. Post-synaptic potential
- 1. Properties of synapse:**
 - One-way conduction
 - Synaptic delay
 - Convergence and Divergence of synapses
 - Summation
 - Spatial summation
 - Temporal summation
 - Pre-synaptic inhibition & Facilitation
 - Post-synaptic inhibition

Neurotransmitters

1. Important neurotransmitters of the CNS - Excitatory, Inhibitory
2. Receptors - determine action of neurotransmitters; 2 types - Ionotropic & metabotropic with examples
3. Types of acetylcholine & adrenergic receptors
4. Names of ionotropic receptors of Glutamate
5. Denervation hypersensitivity

Introduction to CNS

1. Anatomical parts of CNS
2. Functional divisions - Sensory & Motor systems, Higher functions

Spinal cord

1. Functional anatomy
 - Horns
 - Neurons - motor, sensory, autonomic, interneurons
 - Spinal nerves - Bell-Magendie law
 - Tracts

Sensory system

1. Classification of sensations
2. List of receptors of somatic sensations
3. Sensory nerves
4. Concept of adaptation of receptors

Muscle spindle

1. Structure - intrafusal fibres with actin & myosin at its ends
2. Afferent & efferent innervation
3. Mechanism of stimulation
4. Branches (divergence) of muscle spindle afferents in the spinal cord & its terminations
5. Effects of spindle stimulation - Proprioception, Stretch reflex, Muscle tone & reciprocal innervation
6. Deep tendon reflexes - monosynaptic reflex, reflex arc
7. Physiological basis for hypertonia, hypotonia & exaggerated deep tendon reflexes

Golgi tendon organ

1. Mechanism of stimulation
2. Inverse stretch reflex - a polysynaptic reflex, reflex arc

Reflexes

1. Definition
2. Types/ classification of reflexes
3. Components of reflex arc
4. Monosynaptic reflex
5. Polysynaptic reflexes
6. Flexor or withdrawal reflex
7. Crossed extensor reflex
8. Mass reflex & its use in spinal cord injury patients

Ascending sensory tracts

1. Names of tracts
2. Three neuron pathway of sensory system
3. **Dorsal column & spinothalamic tracts** - sensations carried, receptors involved, pathway up to the cortex, with salient features
 - Pathway for sensations from face
 - Clinical application of lesions of above pathways at various levels

Pain sensation

1. Visceral pain - causes, pathway, special features
2. Referred pain - concept, examples
3. Collaterals from pain pathway to reticular formation - stimulates the ARAS
4. **Endogenous pain control mechanisms & Endogenous analgesia** -
Concept of & mechanism of activation of
 - Gate control theory of pain
 - Descending pain control pathways
 - Endogenous opioid systems – endorphins

Sensory System – underlying principles

1. Labeled line code
2. Law of projection
3. Sensory Cortex-Primary sensory area SI & SII
 - Sensory homunculus
 - Cortical sensations
 - Cortical plasticity
4. Clinical application - Phantom limb pain

Motor system

1. Outline of motor control
2. Concept of UMNs & LMNs

Descending motor tracts

1. Corticospinal & cortico-bulbar tracts
 - Pathway
 - Functions
2. Extra-pyramidal tracts
 - Names of tracts
 - Origin & termination
 - Gross functions
 - Net influence on spinal motor neurons & spinal reflexes
 - Effect of its lesion on spinal motor neurons, spinal reflexes & muscle tone

Lesions of motor system

1. Features of Upper motor neuron & lower motor neuron lesion
 - Physiological basis of the same
2. Effects of lesion of pyramidal tract fibres at different levels, stroke
3. Muscle paralysis - Hemiplegia, quadriplegia, paraplegia
 - Hemiparesis, quadriparesis & paraparesis
4. Hemisection of spinal cord - Brown sequard syndrome
5. Approach to a patient with muscle weakness or paralysis

Postural reflexes

1. Need for maintenance of posture & balance
2. Role of postural reflexes in maintaining posture and balance
 - Need for sensory input to initiate these motor reflexes
 - Parts of the CNS integrating these reflexes

Cerebellum

1. Functional divisions
2. Outline of inputs & outputs
3. Functions of cerebellum & its connections
4. Features of cerebellar lesions

Basal ganglia

1. Nucleii forming the basal ganglia
2. Input & output nuclei
3. Skeletomotor circuit- Input & output connections

4. Mention of the direct & indirect pathways
 - Effect on motor activity due to activation of these pathways
5. Function of dopaminergic nigro-striatal pathway

6. Functions of Basal ganglia
7. Movement disorders of basal ganglia - special emphasis on Parkinson's disease

Reticular formation

1. Groups of nuclei forming
 - o Vital centres
2. Ascending Reticular Activation System
3. Functions of reticular formation

EEG

- Physiological basis of EEG
- Types of EEG waves with trends in their amplitude & frequency, and conditions in which they are recorded
- Uses of EEG

Sleep

1. Definition
2. Stages of NREM & its features
3. Features of REM
4. Cycles of above stages

Thalamus

1. Parts of the Diencephalon
2. Groups of thalamic nuclei
3. Outline of connections of thalamus

Functions of thalamus

Hypothalamus

1. 4 major regions of hypothalamus
2. Functions of hypothalamus

Limbic system

1. Outline of components of Limbic system
2. Importance of Papez circuit
3. New concept of the Limbic circuit - emphasis on Amygdala
4. Functions of the limbic system

Cerebrum

1. Blood brain barrier - components, functions, clinical applications
2. CSF - composition, pressure, secretion, circulation, drainage, functions & clinical application - papilloedema & hydrocephalous

1. Blood-CSF barrier
 2. Hemispheric specialisation (dominance), handedness
 3. Main sensory, motor & association areas - and their functions
- Wernicke's area

Higher functions of nervous system

1. Language - definition
2. Physiology of language & speech - Role of Wernicke's & Broca's areas in language & speech

Learning & memory - definition, classifications, basic principles of each type of memory & learning with examples, role of the Hippocampus

12. Special Senses

Overview of functions of structures of Eye

1. Broad functions of Orbit, Eyelids, Extra-ocular muscles, layers of eyeball, Iris, Ciliary body, Intra-ocular muscles, Lens, Aqueous humor, Vitreous body, Optic nerve
2. Secretion, circulation & drainage of Aqueous humor

Optics of eye

1. Optics of the eyes – similar to a camera
2. Normal image formation - refracting media & refractive interfaces, refractive power,
3. Mechanism of accommodation for near vision
4. Physiological basis of Refractive errors & their spectacle correction

Retina

1. Optic disc, Macula lutea & Fovea - Structural features & its functional significance
2. Photoreceptors - rods & cones, bipolar cells & ganglion cells
3. Function of rods & cones

Photo-transduction

1. Visual pigments - breakdown by light
2. Resulting in a Hyperpolarizing receptor potential in rods & cones
3. RMP of rods & cones - depolarized potential

Light & Dark adaptation

1. Events occurring during light & dark adaptation
2. Nyctalopia

Colour vision

1. By Cone pigments
2. Overlap in spectra of light absorbed by them
3. Colour blindness

Optic pathway

1. Visual pathway from the photoreceptors to the striate cortex of occipital lobe
2. Visual field defects produced by lesions at various levels of the pathway

Pupillary reflexes

1. Direct & indirect light reflex and its pathway (afferent & efferent)
2. Accommodation reflex & its pathway
3. Argyl Robertson pupil

4. Horner's syndrome

Clinical tests of Vision

1. Test of Visual acuity - method of testing for distant & near vision
2. Recording of visual fields - Confrontation test - Blind spot
3. Testing for colour vision - Ishihara's chart
4. Testing for pupillary light reflexes

Miscellaneous

Hearing

External ear

Functions of Pinna, External auditory canal and Tympanic membrane

Middle ear

1. Components of the middle ear
2. Functions of the middle ear
3. Clinical application: Eustachian tube block, Hyperacusia

Sound

Pitch & loudness of sound

Inner ear

1. Name the components
2. General outline of the anatomy & structural relationship between the various parts of inner ear
3. Organ of corti with its hair cells - sense organ of hearing with auditory receptors

Mechanism of hearing

1. Role of external ear & middle ear
2. Setting up of vibrations of cochlear membranes
3. Mechanotransduction by auditory hair cells
4. Firing of cochlear afferent fibres
5. Difference between Air conduction & Bone conduction of sounds to the cochlea

Pitch discrimination

'Place principle' of hearing

Auditory pathway

1. Auditory pathway
2. Cause for unilateral deafness - damage to cochlea, 8th cranial nerve & cochlear nuclei

Deafness

Types of deafness - Conductive & Neural

Tests of hearing

1. Tests of tuning fork - Rinne's, Webers, Schwabach
2. Principle of the Audiogram

Ear – Vestibular Apparatus

Semicircular canals

1. Orientation
2. General outline of structure
3. Receptors - hair cells & its innervation
4. Mechanism of stimulation of vestibular hair cells
5. Function

Otolith organs

1. Utricule & saccule - structural details to explain function
 - o Macula & vestibular hair cells
 - o Otolithic membrane
 - o Otoconia
2. Orientation of hair cells & mechanism of stimulation
3. Function

Vestibular pathway

1. Vestibular hair cells - vestibular division of the 8th cranial nerve to vestibular nuclei
2. Connections to cerebellum & the Vestibulospinal tracts
3. Function of Vestibular system - Maintenance of Balance, Equilibrium, & Posture

Tests of Vestibular function

Smell

Chemical senses

Similarities between Smell & Taste

Olfaction

1. Olfactory membrane & its cells in Nose
2. Olfactory neurons - features, life span
3. Mechanism of detection of smell

Olfactory pathway

1. Special features
2. Key structures of the pathway - up to olfactory cortex on lower medial aspect of temporal lobe

Abnormalities of smell

1. Test of olfaction
2. Common causes for Anosmia, Hyposmia, Parosmia

Gustation

Taste sensation

1. Importance
 2. Taste buds - structure, cells & renewal
- Mechanism of stimulation of taste cell

Taste pathway

1. Special feature
2. The 3 cranial nerves carrying taste sensation
3. Key synapses before projection to Gustatory cortex

Clinical application

1. Testing for taste sensation
2. Abnormalities of taste sensation

M.Sc – List of Physiology Practicals

I. Haematology

1. Collection of Blood
2. Microscope and Haemocytometer
3. Erythrocyte count
4. Total Leucocyte count
5. Absolute Eosinophil count
6. Differential Leucocyte count
7. Estimation of Hemoglobin
8. Blood grouping
9. Packed Cell Volume
10. Erythrocyte Sedimentation Rate
11. Osmotic fragility
12. Specific gravity of blood
13. Bleeding time
14. Clotting time
15. Erythrocyte indices
16. Clinical problems in Hematology

II. Cardiovascular system

1. Examination of Arterial Pulse
2. Determination of Arterial blood pressure
3. Recording of Electrocardiogram
4. Effect of Posture on Blood pressure and heart rate
5. Effect of rhythmic Muscular exercise on Blood pressure and Heart rate
6. Tests of Physical fitness
7. Cutaneous Circulation

III. Respiratory System

- | | |
|---------------|--|
| a.i.1. | Volumetric measurements in Respiration and the effect of posture |
| a.i.2. | Forced Expiratory Volume |
| a.i.3. | Recording of chest movements |
| a.i.4. | Effect of Exercise on Ventilation |

M.SC. (PRELIMINARY) – ANATOMY SYLLABUS

INTRODUCTION:

Definition and subdivisions of human anatomy
Anatomical position of the body and terminology
Regions and systems of the body
Cavities of the body and their contents

TISSUES OF THE BODY:

Definition and types of the tissues
Characteristics and locations of different types of tissues

BONES:

Definition of skeleton, axial and appendicular skeleton
Types of bones, bony prominences, names, locations and general features of the bones of the body

JOINTS:

Definition and types of joints with examples
Kinds of movements possible
Names, locations, types, bony parts and joints, ligaments (no attachments), movements possible and chief muscles producing such movements of the main joints of the body

MUSCLE:

Parts of a skeletal muscle.
Definition of origin and insertion.
Names and locations of skeletal muscles.
Actions and nerve supply of muscles

NERVOUS SYSTEM:

Subdivisions of nervous systems

Spinal cord:

Location, extent, spinal segments, external features, gross internal structure.
Examples of important ascending and descending tracts.

Brain:

Subdivisions – location and external features of medulla oblongata, pons, midbrain, cerebellum and cerebrum.
Location and general features of thalamus and hypothalamus
Location and subdivisions of basal ganglia.
Names of meninges and spaces around them.

Name and location of ventricles of brain and circulation of cerebrospinal fluid.

Names of blood vessels supplying brain and spinal cord.

Cranial nerves:

Name, serial number and general distribution.

Spinal nerves:

Typical spinal nerve.

Groups of spinal nerves

Name and location of plexuses.

Nerves forming and main branches of each plexus.

Location and distribution of each main branch.

Autonomic nervous system:

An overview of sympathetic and parasympathetic nervous system.

Sense organs:

Location, general features of nose, tongue, eye, ear and skin.

CARDIOVASCULAR SYSTEM:

Shape, size, location, coverings and general external and internal features of heart.

List of blood vessels supplying the heart (development of blood vessels not necessary).

Name and location of principal arteries and veins.

Name, location and features of the lymphatic organs.

RESPIRATORY SYSTEM:

Location and general features of nose, pharynx, larynx, trachea, bronchi and lungs.

Pleura (definition).

DIGESTIVE SYSTEM:

Location and general features of mouth, pharynx, oesophagus, stomach, small and large intestine.

Location and general features of salivary glands, liver, gall bladder and pancreas.

Peritoneum (definition).

URINARY SYSTEM:

Location and general features of the male reproductive organs – scrotum, testis, epididymis, vas deferens, seminal vesicle, ejaculatory duct, prostate gland and penis, spermatic cord.

Location and general features of the female reproductive organs – uterus, uterine tube, vagina, ovary, breast.

ENDOCRINE SYSTEM:

Location and general features of the pituitary, thyroid, parathyroid and suprarenal gland.

METHODS OF TEACHING:

1. Lecture
2. Seminars
3. Demonstration
 - a) Skeleton
 - b) Dissected specimens

SYLLABUS FOR MSc (BIOCHEMISTRY) COURSE – 2nd and 3rd YEARS

PAPER I - PHYSICAL AND ORGANIC ASPECTS OF BIOCHEMISTRY, MEMBRANES, INSTRUMENTATION AND LABORATORY TECHNIQUES

A. PHYSICAL AND ORGANIC ASPECTS OF BIOCHEMISTRY AND MEMBRANES

Electrolytic dissociation, mass law, acids and bases, pH, buffers, surface tension, viscosity, colloidal state, Donnan equilibrium, osmosis, colloids, diffusion, dialysis, applications to biological systems, hydrogen bonding, hydrophobic interactions and ionic bridges, determination of molecular weights. Prokaryotic and eukaryotic cells. Structure of eukaryotic cells – sub cellular organelles, and their functions.

Sub-cellular fractionation – density gradient centrifugation, differential centrifugation, markers for each organelle and fraction

Biomembrane and its structure, fluid mosaic model and assembly of membranes

Properties of biological membranes artificial membranes and liposomes

Transport across membranes – active, facilitated and passive

Transport mechanisms – ion channels including gated channels, carrier proteins, glucose transporters (GLUT), active transporters, symporters and antiporters.

Cell interactions and adhesion – types of junctions : tight junctions and gap junctions.

Surface glycoproteins and cell surface labeling – ABO blood groups, major histo-compatibility complex (MHC), adhesion molecules

Carbohydrates: Classification of carbohydrates, structure, configuration, reactions and functions of pentoses, hexoses, oligosaccharides and polysaccharides (including glycosaminoglycans, glycoproteins)

Lipids: Classification, Structure, physical and chemical properties of lipids
Fatty acids, saturated and unsaturated fatty acids, polyunsaturated fatty acids, triacylglycerols, phospholipids, glycolipids, lipoproteins, steroids, eicosanoids

Amino acids: Classification of amino acids, their physical and chemical properties and general reactions, peptides, modified amino acids, amino acids as buffers, amino acid titration, zwitterions and isoelectric point, dissociation constant

Proteins: Classification of proteins, structure, properties and function; hemoglobin, myoglobin, collagen, elastin
Relationship of function to the three dimensional structure of myoglobin,

haemoglobin, collagen and elastin

Biologically important peptides, cross-links, hydrogen bonds, disulphide bonds, non-covalent and ionic bonds in peptides

Primary, secondary, tertiary and quaternary structure of proteins and elucidation of these

Nucleotides and nucleic acids: Chemistry of purine and pyrimidines, nucleic acids, DNA structure and function, organisation of chromatin, role of histones in chromatin formation

Types of RNA, their structures and functions, biologically important nucleotides and their derivatives, analogues of purines, pyrimidines, nucleosides and nucleotides and their clinical importance

B. INSTRUMENTATION AND LABORATORY TECHNIQUES (PRINCIPLES AND APPLICATIONS)

Centrifugation

Ultracentrifugation

Radio-immuno assay

Radioactivity, properties of radionuclides and measurement of radioactivity, techniques, autoradiography, *Geiger-Müller* counter, scintillation counting
Immuno-radiometric assay (IRMA), stable isotopes and mass spectrometry

Colorimetry

Beer- Lambert's law, spectrophotometry, reflectance photometry, automated techniques, semi- and random autoanalysers, flow cytometer

Flame emission photometry, atomic absorption spectrophotometry

Flurometry, phosphorescence, chemiluminescence and bioluminescence

Nephelometry, turbidimetry

Direct vision spectroscope

Electrochemistry

Chemical sensors, potentiometry, ion selective electrodes, optical chemical sensors, enzyme electrodes and enzyme immobilization

Osmometry

Electrophoresis

Paper, agarose gel, polyacrylamide gel electrophoresis (PAGE), SDS - PAGE, iso-electric focusing

Chromatography

Column, paper, thin layer chromatography (TLC), gas liquid chromatography (GLC), high pressure liquid chromatography (HPLC), gel filtration, ion exchange and their applications

Immunochemistry

Principles of immunochemistry, immune-electrophoresis, enzyme-linked immunosorbent assay (ELISA) techniques, blotting techniques

Principles of laboratory analyses and safety:

Automation in a clinical chemistry laboratory

Units of measurement, international system of units in laboratory medicine

Conversion from conventional units to SI units, IFCC and IUPAC system recommendations, reference materials, reagent grade water production

Basic bio-statistic principles as applied to health sciences

Mean, standard deviation, standard error of mean, tests of significance (confidence interval student's t test, chi-square test, ANOVA), correlation coefficient, probability

Selecting an analytical method, evaluation of an analytical method, evaluation of a diagnostic test

PAPER II : ENZYMES, INTERMEDIARY METABOLISM AND METABOLISM OF BIOMOLECULES, NUTRITION AND MOLECULAR BIOLOGY

A. ENZYMES

Nomenclature, classification, chemistry, isolation, purification and characterization, general properties, co-enzymes, metal-activated enzymes, metallo-enzymes, mechanisms of action, factors influencing enzyme activity, Michaelis- Menten constant, kinetics of enzyme action, K_m value and its significance, influence of activators and enzyme inhibitors, regulation of enzyme activity, allosteric enzymes, isoenzymes, clinically important enzymes and role of enzymes in clinical medicine, enzyme therapy, immobilized enzymes, serine proteases

B. INTERMEDIARY METABOLISM AND METABOLISM OF BIOMOLECULES

Vitamins

Chemistry, structure, functions, natural occurrence, dietary sources, daily human requirements and deficiency manifestations of water soluble and fat soluble vitamins, hyper-vitaminosis, antivitamin, assays of vitamins and screening of vitamin status in humans

Bioenergetics and biological oxidation

The role of ATP and other high-energy phosphates, biologic oxidation, respiratory chain, oxidative phosphorylation, inhibitors and uncouplers, mitochondrial diseases

Carbohydrate metabolism

Digestion and absorption, glycolysis, Rapaport-Leubering cycle, pentose phosphate pathway, glycogenesis and glycogenolysis, citric acid cycle, uronic acid pathway, gluconeogenesis and their regulation, metabolism of fructose and galactose, regulation of blood glucose, metabolism of glycosaminoglycans and glycoproteins and associated disorders, hypoglycemia, hyperglycemia, renal glycosuria, diabetes mellitus, glucose tolerance tests (GTT), inborn errors of carbohydrate metabolism, disorders of fructose metabolism, lactose intolerance, glycogen storage diseases, metabolism of alcohol

Lipid metabolism

Digestion and absorption, fatty acid synthesis and elongation, synthesis of unsaturated fatty acids, oxidation of fatty acids, metabolism of ketone bodies and unsaturated fatty acids, essential fatty acids, metabolism of eicosanoids and their biological role, metabolism of triglycerides, phospholipids, sphingolipids and cholesterol, compounds derived from cholesterol, fatty liver, lipotropic factors, metabolism of lipoproteins, inborn errors of lipid metabolism, metabolism in adipose tissue (including brown adipose tissue), disorders of lipid metabolism, lipid storage disorders, obesity, metabolic adaptations in starvation and obesity

Proteins

Digestion and absorption of proteins, gamma-glutamyl cycle, catabolism of amino acids, ammonia production, nitrogen balance, inter-organ transport of amino acids, urea cycle and associated disorders, hyperammonemia
Catabolism of carbon skeleton of amino acids, biosynthesis of nonessential amino acids.

degradation of individual amino acids, creatinine and creatinine metabolism, biogenic amines, specialized products formed from amino acids, neurotransmitters, polyamines, biologically important peptides, plasma proteins, paraproteins, aminoacidurias, inborn errors of amino acid metabolism

Nucleic acids

Metabolism of purines, disorders associated with abnormalities in the metabolism of purines, primary and secondary gout, metabolism of pyrimidines, disorders associated with abnormalities in the metabolism of pyrimidines,

nucleotide analogues in chemotherapy

Integration of metabolism and metabolic adaptation during fed state and starvation

Metabolism in specialized tissues

Erythrocytes, liver, muscle, central nervous system, adipose tissue, lens, kidney

Metabolism of haem

Biosynthesis, disorders associated with defects in biosynthesis

Degradation of haem, metabolism of bilirubin, disorders associated with abnormalities in the metabolism of bilirubin, laboratory diagnosis in these disorders

Abnormal haemoglobins and haemoglobinopathies, thalassemia, sickle cell anemia, methemoglobinemia

Biochemical and molecular aspects of processes in the body

Muscle contraction, nerve conduction, coagulation of blood

Metabolism of minerals

Sodium, potassium, calcium, phosphorus, magnesium, copper, zinc, iron, chromium, selenium, cobalt, manganese, other trace minerals

Inborn errors of mineral metabolism

Metabolism of xenobiotics and detoxification

Environmental hazards, biochemical aspects of environmental hazards, occupational hazards (exposure to lead and organophosphorous compounds), hazards due to modern industrialization and noise pollution

C. NUTRITION

Energy metabolism, basal metabolic rate and specific dynamic action, energy requirements, macronutrients and their roles, balanced diets, biological value of proteins, essential amino acids, dietary fibre, dietary deficiencies, supplementary relationship among proteins, dietary requirements in the elderly, diabetes mellitus, etc, parenteral nutrition, disorders of nutrition (protein malnutrition, protein energy malnutrition, obesity), biochemical assessment of nutritional status, laboratory diagnosis of nutritional disorders, National Nutrition Programmes

MOLECULAR BIOLOGY

Organisation of nucleosomes, chromatin and chromosome, histones, structure and types of DNA and RNA, mitochondrial and plasmid DNA, eukaryotic and prokaryotic DNA replication, DNA damage and repair, eukaryotic and prokaryotic RNA synthesis and processing, post-transcriptional modifications, mutation, operon concept, gene rearrangement, gene amplification and transposons, gene-protein interaction, helix turn helix motif, zinc finger motif and leucine zipper motif, signal peptides, protein targeting and chaperones, protein synthesis and post-translational modifications of proteins, recombinant DNA technology and its application in medicine, restriction enzymes, cloning, vectors (definition, characteristics of different vectors), genome library, cDNA library, DNA probes and blot transfer techniques, polymerase chain reaction (PCR), reverse transcription PCR (RT-PCR), restriction fragment length polymorphism and its applications, fluorescent in-situ hybridization (FISH), transgenic animals, RNA interference, gene therapy, DNA diagnostics (methods of identifying genes in human disease), Human Genome Project, gene mapping, DNA and RNA viruses

Cell cycle, regulation of cell cycle, regulators, cyclins and their regulators, extracellular regulators of cell cycle, programmed cell death

PAPER – III. CLINICAL BIOCHEMISTRY, ENDOCRINOLOGY, IMMUNOLOGY, FREE RADICALS AND ANTIOXIDANTS AND ONCOGENESIS

A. CLINICAL BIOCHEMISTRY

Collection of samples and preservation, pre-analytical errors in clinical biochemistry, standardization of laboratory methods, use of pooled serum, acquisition of standards for laboratory estimations, quality control methods, use of reference values, selection of methods for estimation of common analytes like blood glucose, urea, creatinine, plasma proteins, etc, automation in clinical biochemistry, microprocessors and use of computers in clinical biochemistry, statistical methods of analysis of results.

Metabolism of minerals

Metabolism of calcium, phosphorous, magnesium, sodium, potassium and chloride – their relation to endocrinology

Trace elements and their metabolism

Acid -base, water and electrolyte balance: Buffers of the body, acidosis and alkalosis, interpretation of acid-base disorders

Function tests

Investigation of kidney function, liver function, gastric function and pancreatic function

Renal calculi, tumor markers, cerebrospinal fluid analysis, amniotic fluid analysis and prenatal diagnosis of inborn errors of metabolism

Clinical enzymology

Estimation of serum enzymes like aspartate transaminase, alanine transaminase, alkaline phosphatase, acid phosphatase, amylase, lactate dehydrogenase, creatine phosphokinase and gamma-glutamyl transferase

Diagnostic tests

In diabetes mellitus, myocardial infarction, nephrotic syndrome, liver diseases

B. ENDOCRINOLOGY, IMMUNOLOGY AND ANTIOXIDANTS

Endocrinology

General mechanism of action of hormones, evaluation of endocrine functions, hormones of hypophysis, hypothalamus, thyroid, parathyroid, pancreas, adrenals and gonads, hormones secreted by the gastrointestinal tract and kidneys, fetoplacental functions

Immunology

Immune system, immunoglobulins, monoclonal antibodies, antigen-antibody reactions, complement system, cell-mediated immunity, mononuclear phagocytes, immunoassays, organ transplantation and histocompatibility, principles of immunization, immunological techniques in clinical chemistry.

Free radicals and anti-oxidants

ONCOGENESIS

Biochemical basis of cancer, oncogenes, tumor suppressor genes, tumor markers, genetic cancer syndromes (familial breast cancer, familial adenomatous polyposis coli and retinoblastoma), inherited conditions that predispose to development of cancer (e.g., ataxia telangiectasia, xeroderma pigmentosum, Fanconi syndrome), basics of cytogenetics

PRACTICALS

GENERAL BIOCHEMISTRY

<i>Qualitative Analysis</i>
Reactions of carbohydrates
1. Reactions of monosaccharides - glucose, fructose and galactose, mannose and arabinose
2. Reactions of disaccharides - maltose, lactose and sucrose

3. Reactions of polysaccharides – starch, dextrans and glycogen; hydrolysis of starch by acid
4. Analysis of carbohydrate mixtures
5. Paper chromatography of carbohydrates
Reaction of amino acids
6. General reactions of amino acids
7. Reactions of cysteine, cystine, methionine, phenylalanine, tryptophan, tyrosine, histidine and arginine.
8. Analysis of amino acid mixtures
9. Paper chromatography of amino acids
Reactions of proteins
10. Colour reactions of proteins
11. Precipitation of proteins (with cations and anions, by acidic and alkaloidal reagents, by concentrated salt solutions and by alcohol)
12. Action of mineral acids on albumin and globulin
13. Heat coagulation of albumin and globulins
14. Reactions of casein and gelatin
Reaction of lipids
15. Reactions of fatty acids, glycerol, fats and cholesterol
Examination of bile
16. Tests for bile salts and bile pigments
Urinary analysis
17. Identification of normal and abnormal constituents in urine
Experiments on milk
18. Identification of constituents in milk
Haemoglobin derivatives
19. Identification of hemoglobin derivatives using direct vision spectroscopy
Quantitative Analyses
20. Determination of iodine number of edible oils
21. Determination of saponification number of fats
22. Estimation of nitrogen – Micro Kjeldahl method
23. Estimation of phosphorus - Fiske and Subharao method
24. Estimation of glycogen in rat liver – anthrone method
25. Study of enzyme kinetics - effects of pH, temperature, substrate concentration, enzyme concentration and time - using catalase (from rat liver) and acid phosphatase (from potatoes)
26. Agarose gel electrophoresis (for separation of serum proteins)

Demonstrations	
27.	Enzyme-linked immunosorbant assay (ELISA)
28.	Polymerase chain reaction
29.	Extraction of DNA and RNA.
30.	Animal feeding and care (2-day observership in the animal house)

ESTIMATIONS OF CLINICALLY RELEVANT ANALYTES

GLUCOSE	
1.	Estimation of plasma glucose
2.	Glucose tolerance test
3.	Stability check of glucose standards
LIPIDS	
4.	Estimation of serum cholesterol
5.	Estimation of serum triglycerides
6.	Estimation of HDL cholesterol
LIVER FUNCTION TESTS	
7.	Estimation of serum bilirubin
8.	Estimation of serum total protein
9.	Estimation of serum albumin
10.	Estimation of serum transaminases
11.	Estimation of serum alkaline phosphatase
12.	Estimation of serum alkaline phosphatase
RENAL FUNCTION TESTS	
13.	Estimation of serum urea
14.	Estimation of serum creatinine
15.	Estimation of creatinine clearance
16.	Estimation of urine protein levels
17.	Estimation of urine protein-creatinine ratio
18.	Estimation of uric acid
19.	Analysis of calculi
MINERALS AND ELECTROLYTES	
20.	Estimation of serum calcium
21.	Estimation of serum phosphorus
22.	Estimation of serum iron
23.	Estimation of serum iron-binding capacity

24.	Estimation of serum copper
CSF ANALYSIS	
25.	Estimation of CSF glucose (GOD-POD method)
26.	Estimation of CSF protein (sulphosalicylic acid method)
27.	Estimation of CSF chloride (Schales and Schales method)
MISCELLANEOUS ENZYME ASSAYS	
28.	Estimation of serum amylase, creatine kinase, lactate dehydrogenase, acid phosphatase, glucose-6-phosphate dehydrogenase and cholinesterase
MISCELLANEOUS	
29.	Estimation of serum ceruloplasmin and methemoglobin
30.	Estimation of vanillyl mandelic acid (VMA)
HANDS-ON EXPERIENCE WITH AUTOMATED TECHNOLOGY (FOR ESTIMATION OF ALL THE ANALYTES LISTED ABOVE) IN DIAGNOSTIC LABORATORY TO WHICH POSTED	
DEMONSTRATIONS	
31.	Arterial blood gas analyses
32.	Estimation of lipoproteins by nephelometry
33.	Estimation of insulin by radioimmunoassay
34.	Estimation of serum magnesium (atomic absorption spectrometry)
35.	Detection and estimation of Bence-Jones proteins
36.	Estimation of glycated hemoglobin (HPLC)

REFERENCE BOOKS :

General Biochemistry

1. Robert K. Murray, David A. Bender, Peter J. Kennelly, Victor W. Rodwell and P. Antony Weil. Harper's Illustrated Biochemistry, 29th edition.
2. John Baynes and Marek Dominiczak. Medical Biochemistry, 3rd edition,
3. Albert L. Lehninger, David Lee Nelson, Michael M. Cox. Lehninger's Principles of Biochemistry, 5th edition.
4. Donald Voet & Judith Voet, Biochemistry, 4th edition.
5. Thomas M. Devlin. Text book of Biochemistry with clinical correlations – 6th edition.
6. Lubert Stryer. Biochemistry, 5th edition.
7. N. V. Bhagavan. Medical Biochemistry, 4th edition.
8. David E. Metzler. Biochemistry: The Chemical Reactions of Living Cells, 2nd edition.
9. Reginald H. Garrett, Charles M. Grisham. Biochemistry, 2nd edition.
10. Vasudevan DM, Sreekumari S and V. Kannan: Text Book of Biochemistry for Medical Students, 7th edition
11. U. Satyanarayana and U. Chakrapani: Biochemistry, 4th edition.

Clinical Biochemistry

1. Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics, 5th edition.
2. Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Fundamentals of Clinical Chemistry – 6th edition.
3. Michael L. Bishop, Edward P. Fody, and Larry Schoeff: Clinical Chemistry: Principles, Procedures, Correlations, 7th edition.
4. Richard A. McPherson, Matthew R. Pincus. Henry's Clinical Diagnosis and Management by Laboratory Methods. 21st edition.
5. Alan H. Gowenlock, Janet R. McMurray and Donald M. McLauchlan. Varley's Practical Clinical Biochemistry. 6th edition
6. Philip D. Mayne. Clinical Chemistry in Diagnosis and Treatment. 6th edition

Analytical Biochemistry

1. Wilson, K, Walker, J. Principles and Techniques of Practical Biochemistry. 5th edition.
2. Rodney Boyer. Modern Experimental Biochemistry, 3rd edition.

Cell and Molecular Biology

1. Bruce Alberts. Molecular Biology of the Cell, 5th edition.
2. Geoffrey M. Cooper and Robert E. Hausman. The Cell: A Molecular Approach, 5th edition.
3. Benjamin Lewin. Genes IX.
4. De Robertis, De Robertis Jr. Cell and Molecular Biology, 8th edition.