

PLAN

MITOCHONDRIE (1)

[P.LEMARCHAND](#)

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- Membrane interne
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PRODUCTION D'ÉNERGIE

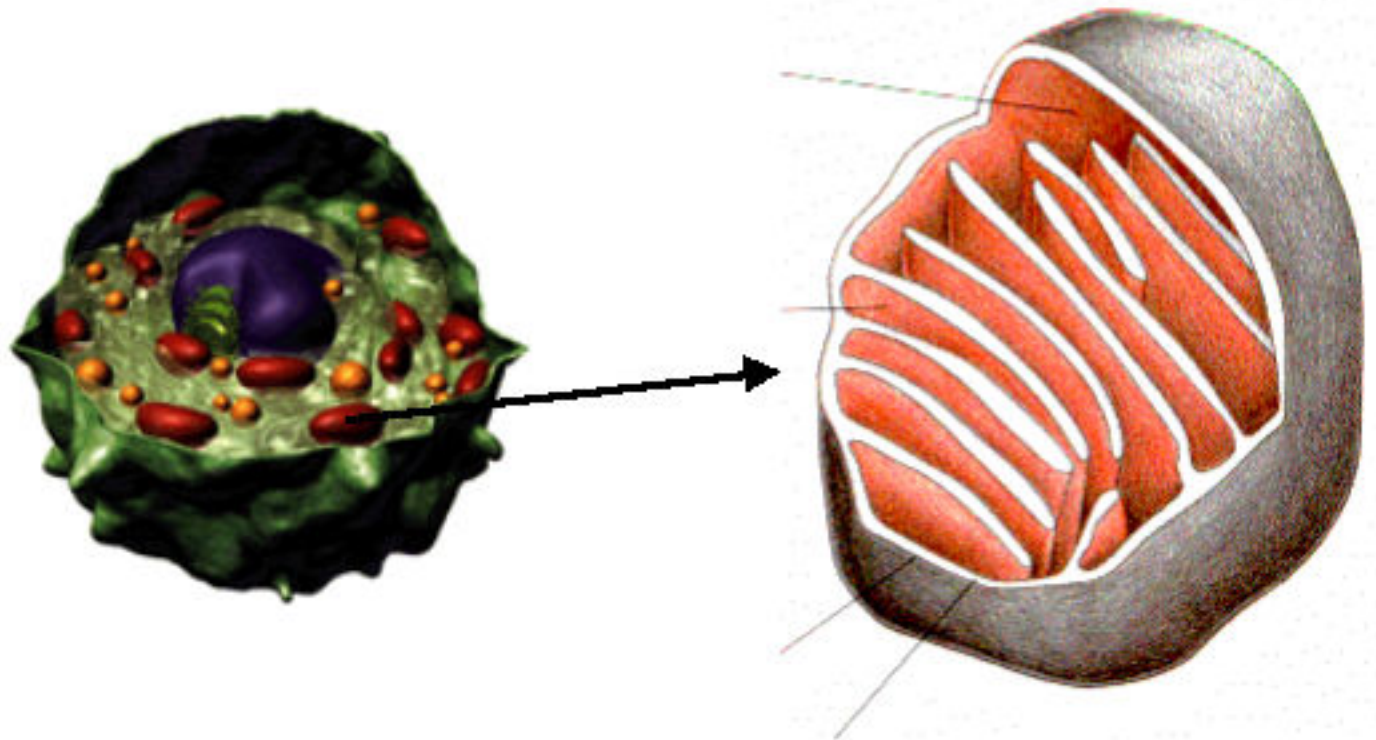
- Généralités (11)
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MITOCHONDRIE



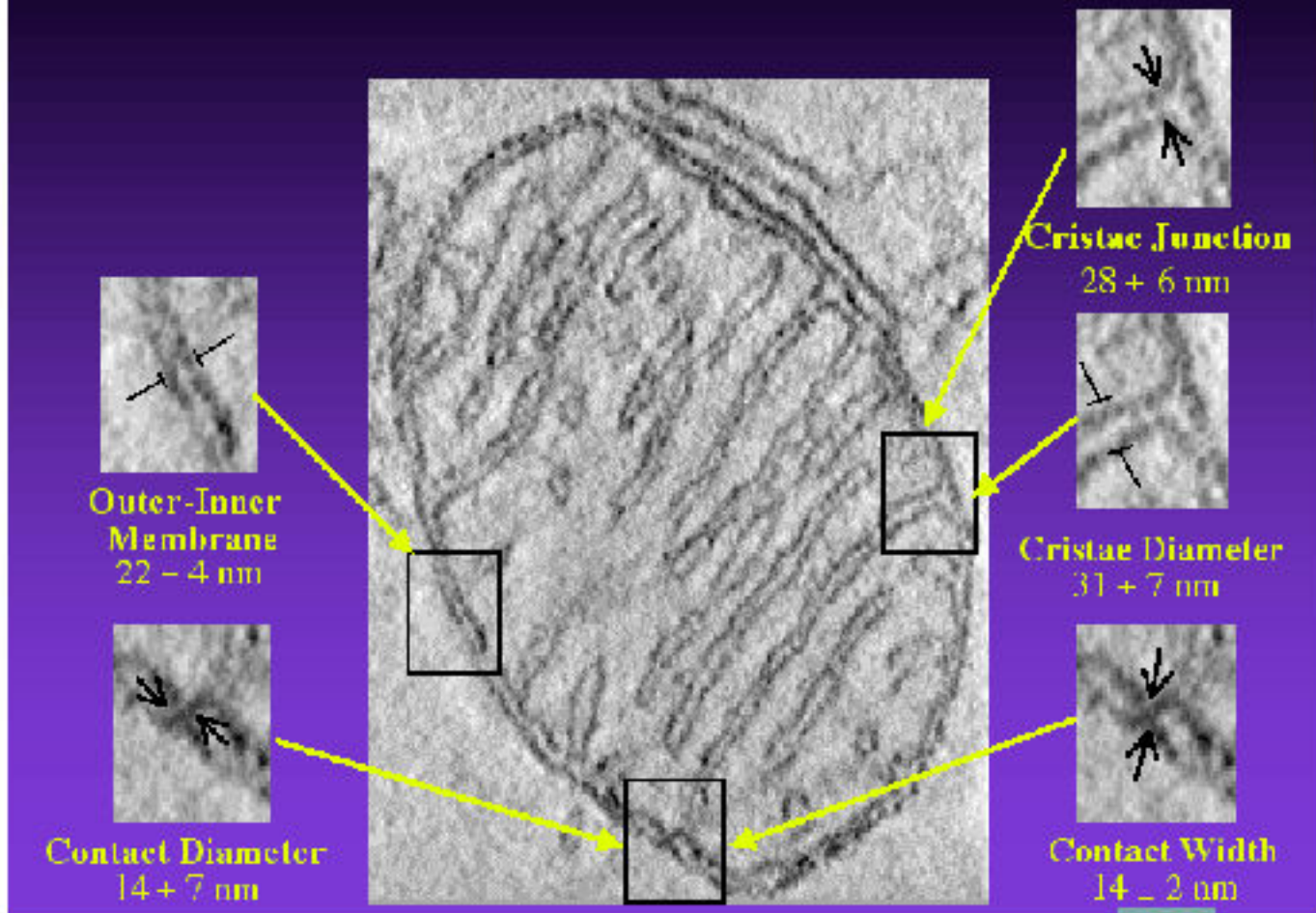
généralités

D'après A Textbook of
Histology
by D Fawcett. Chapman
and Hall, N.Y. 1994



Morphologie

Measurements of Mitochondrial Membrane Structures

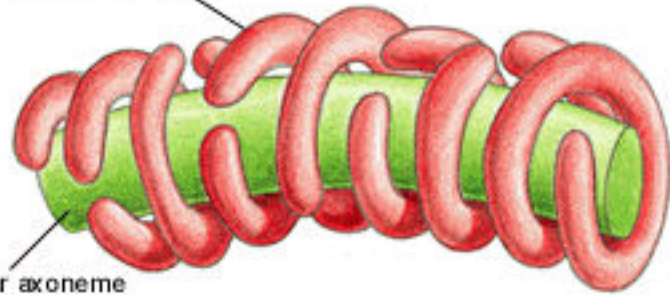


Localisation



mitochondria

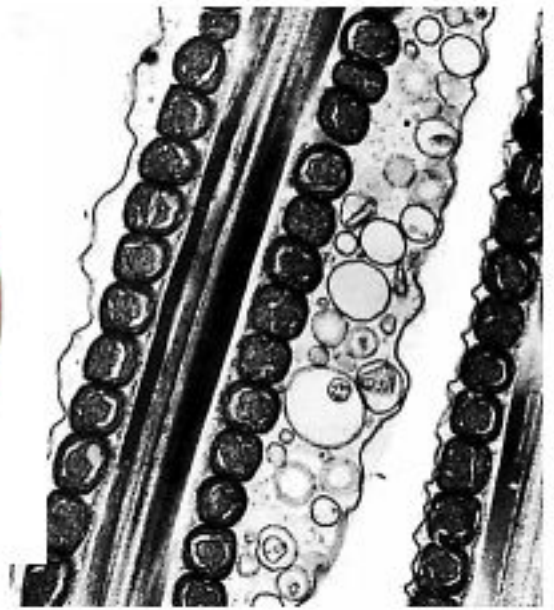
CARDIAC MUSCLE



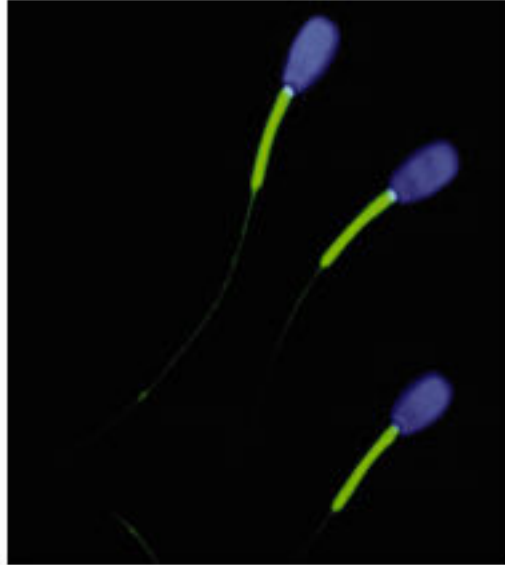
flagellar axoneme

SPERM TAIL

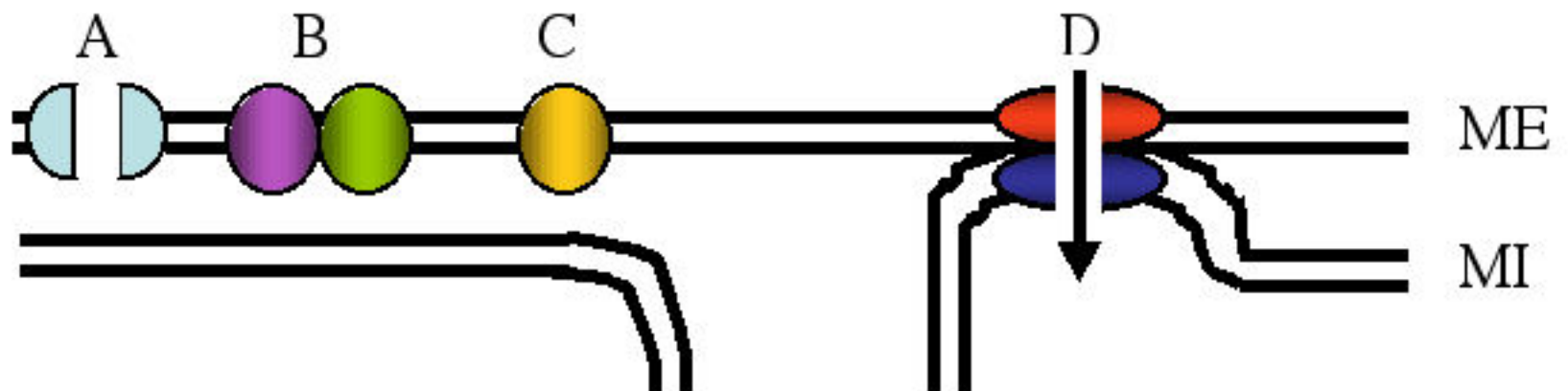
myofibril



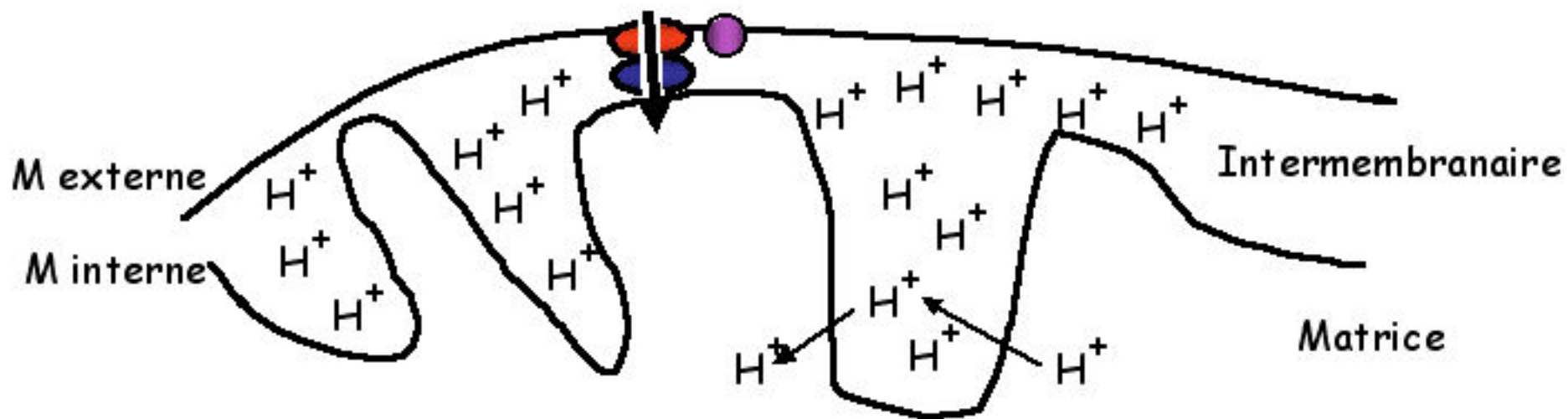
Molecular Biology of the Cell, 3rd edn



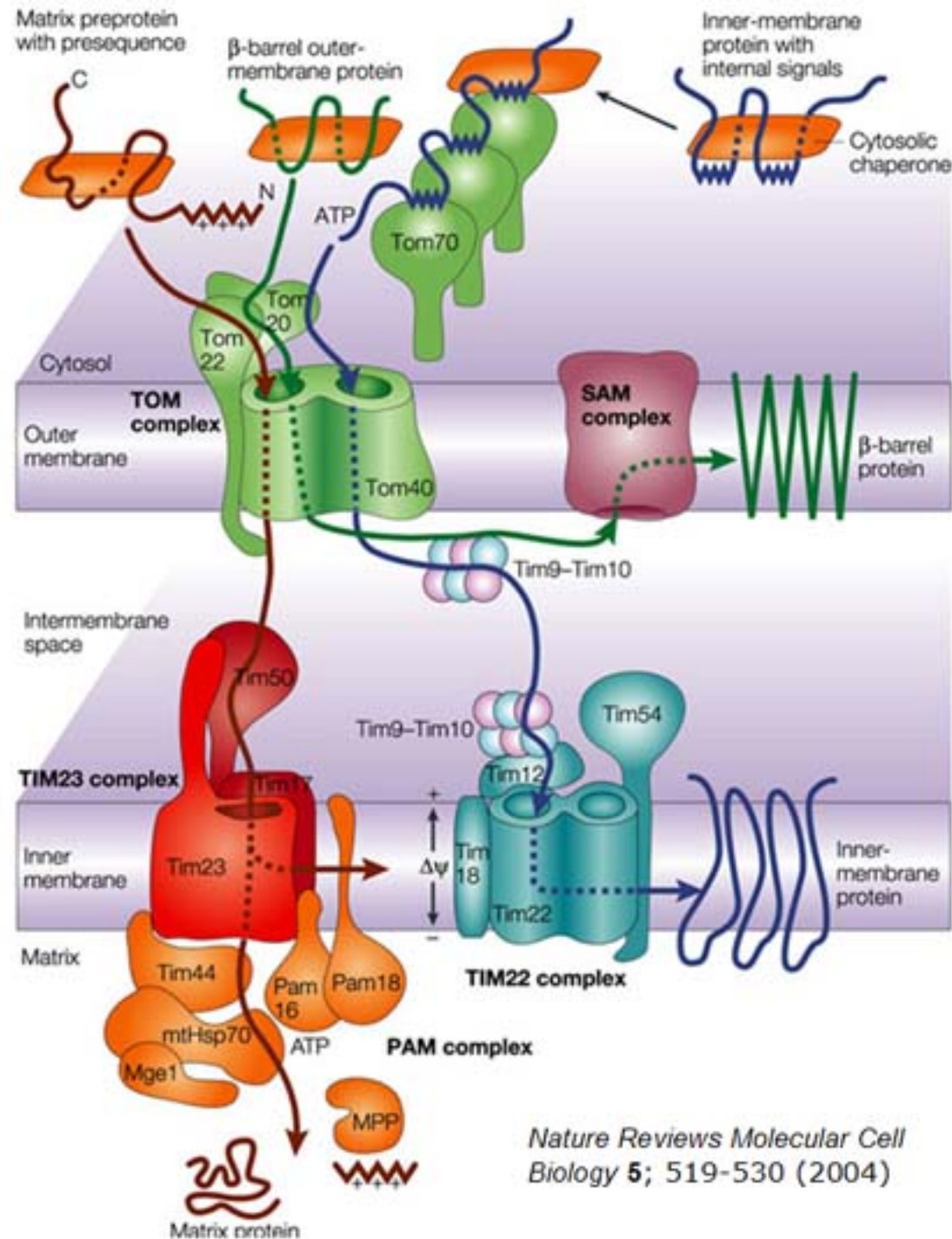
Membrane externe



Espace intermembranaire

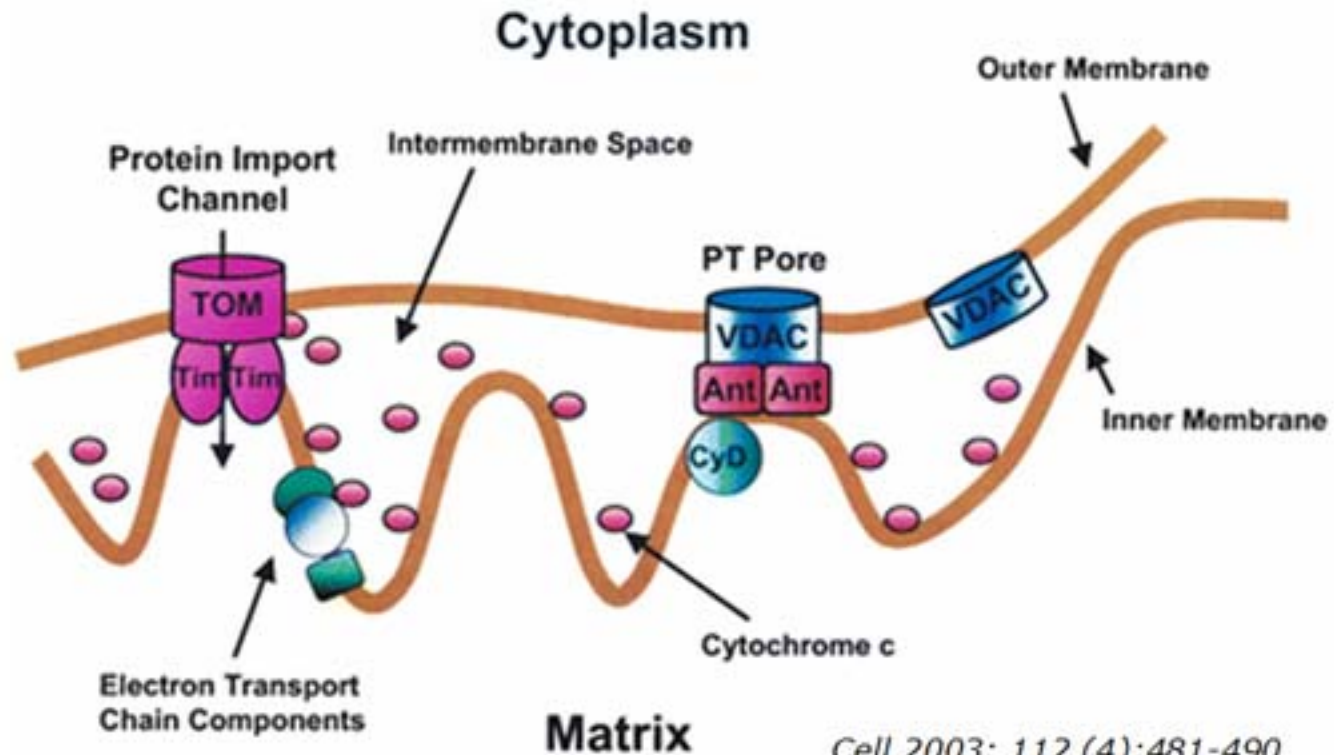


Importation de protéines cytosoliques



Nature Reviews Molecular Cell Biology 5; 519-530 (2004)

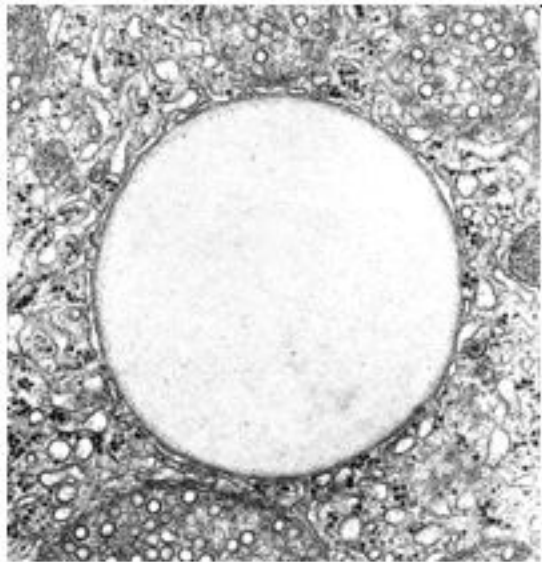
Composition: résumé



*Cell 2003: 112 (4):481-490
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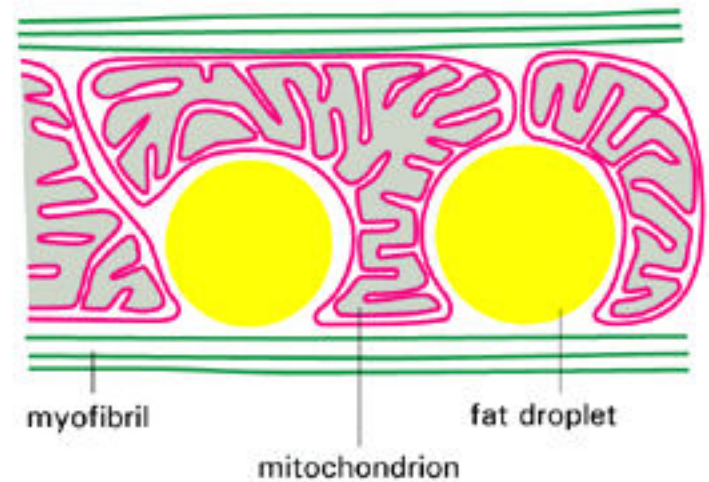
Fonctions

□ β -oxydation des acides gras:



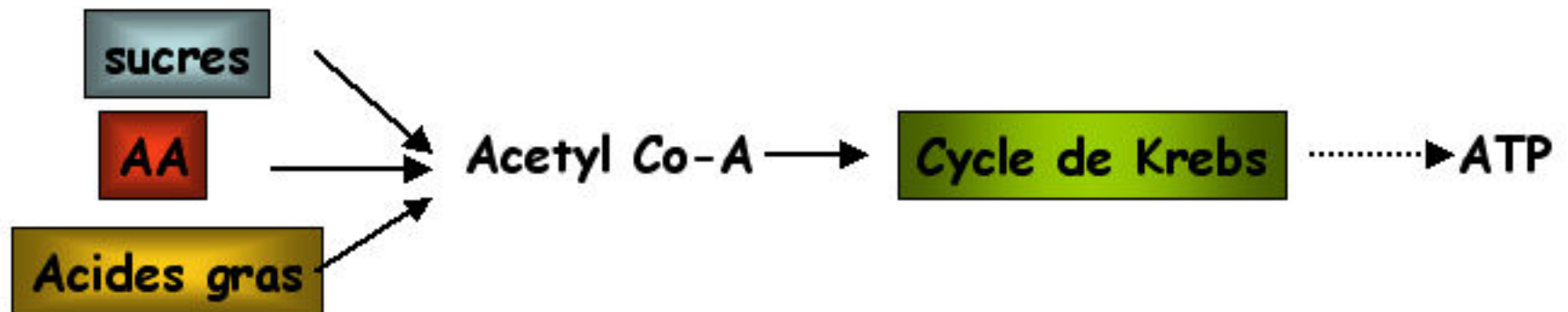
(A)

1 μm

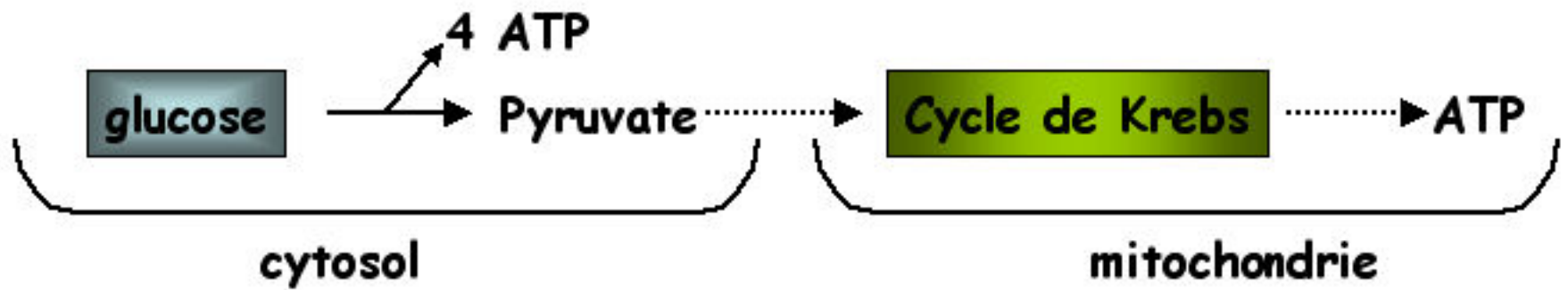


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Production d'énergie: organisation générale



Cycle de Krebs



Vocabulaire

□ Le NADH.

NADH = Nicotinamide Adénine Dinucléotide réduit.

Le NAD⁺ est converti en NADH au cours de l'oxydation d'une molécule.

Le NAD⁺ est capable d'accepter deux électrons et un proton pour donner un NADH.

Le NADH est produit au cours de nombreuses réactions : glycolyse, hélice de Lynen et cycle de Krebs .

□ Le FADH₂.

FADH₂ = Flavine Adénosine Dinucléotide réduit.

Le FAD est converti en FADH₂ au cours de l'oxydation d'une molécule.

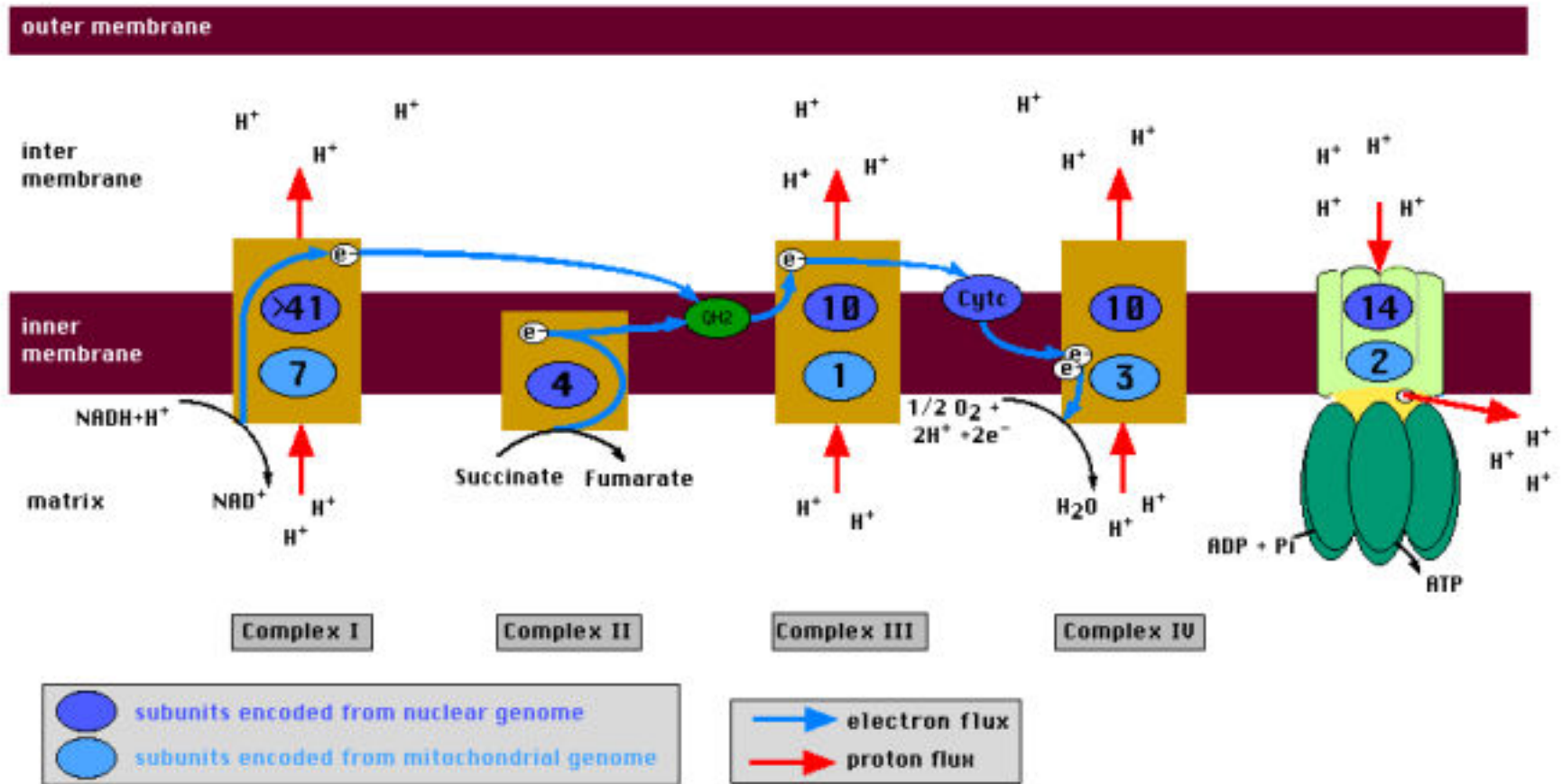
Le FAD est capable d'accepter deux électrons et deux protons pour former le FADH₂.

La principale réaction mitochondriale qui produit du FADH₂ est l'oxydation du succinate en fumarate au cours du cycle de Krebs .

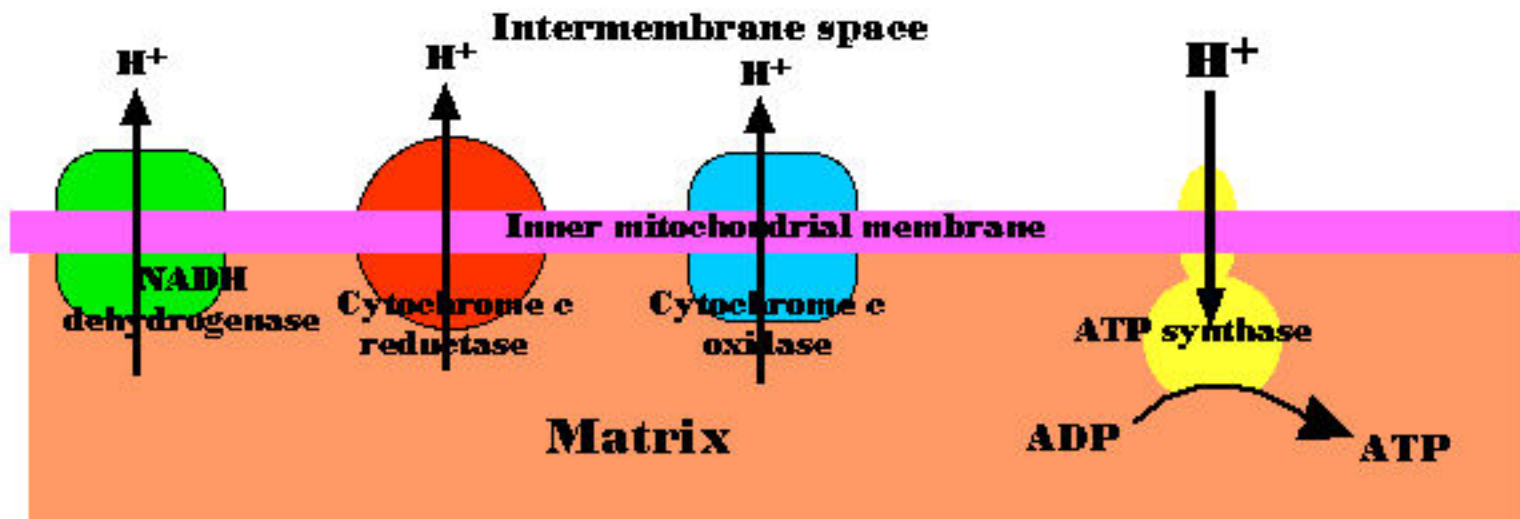
L'enzyme qui catalyse cette réaction (succinate déshydrogénase) est un des complexes de la chaîne respiratoire.

Le FADH₂ est également produit au cours de la transformation d'acides gras en acétylCoA .

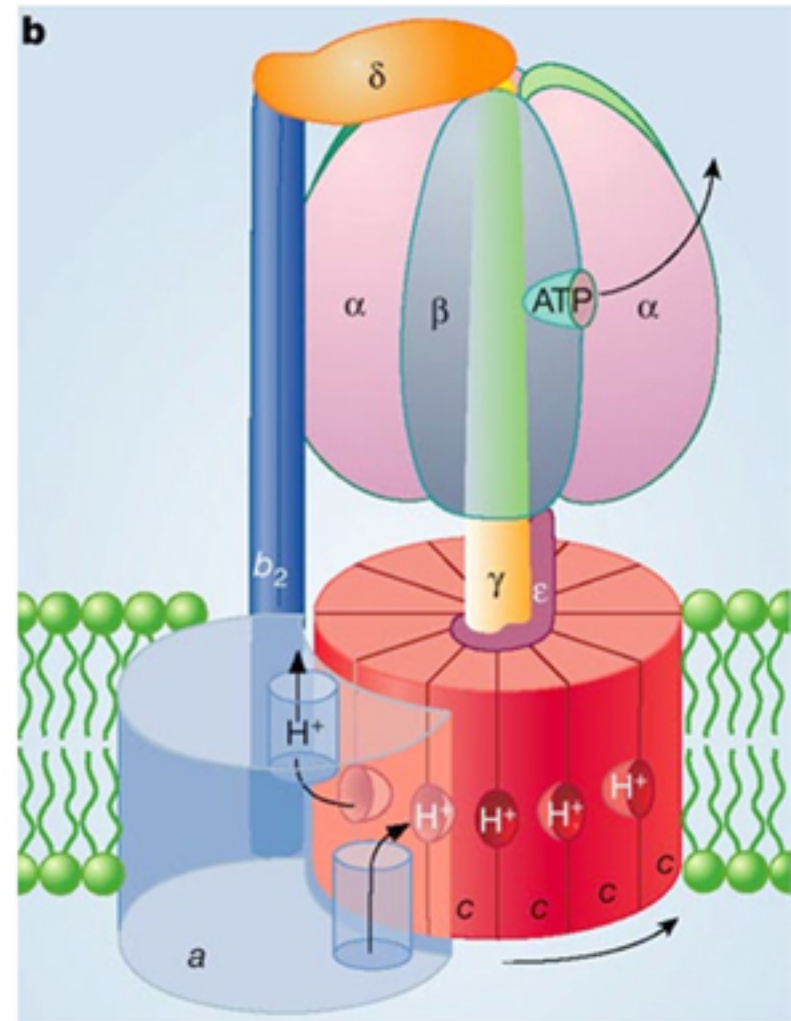
Chaîne respiratoire



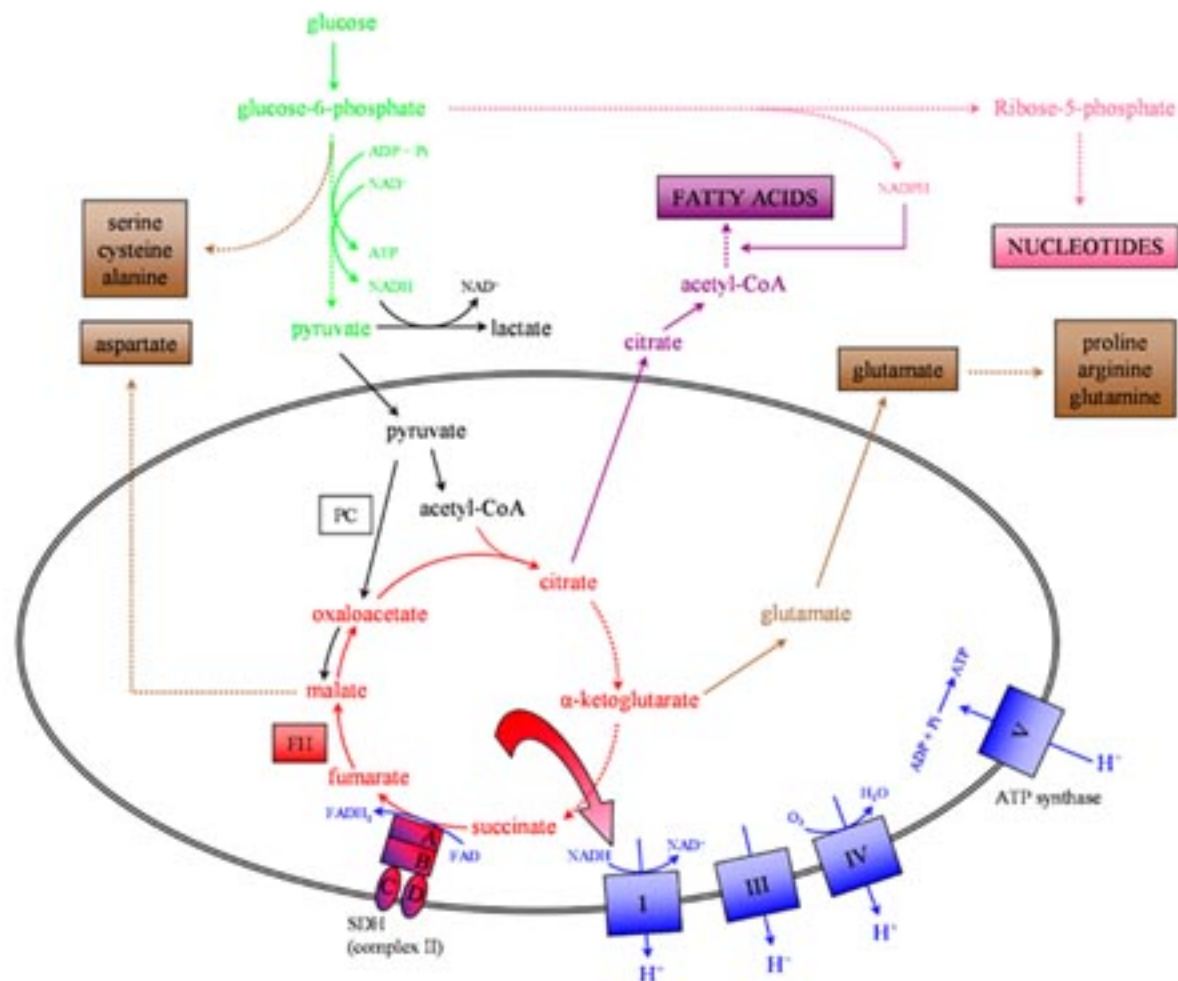
Gradient électrochimique



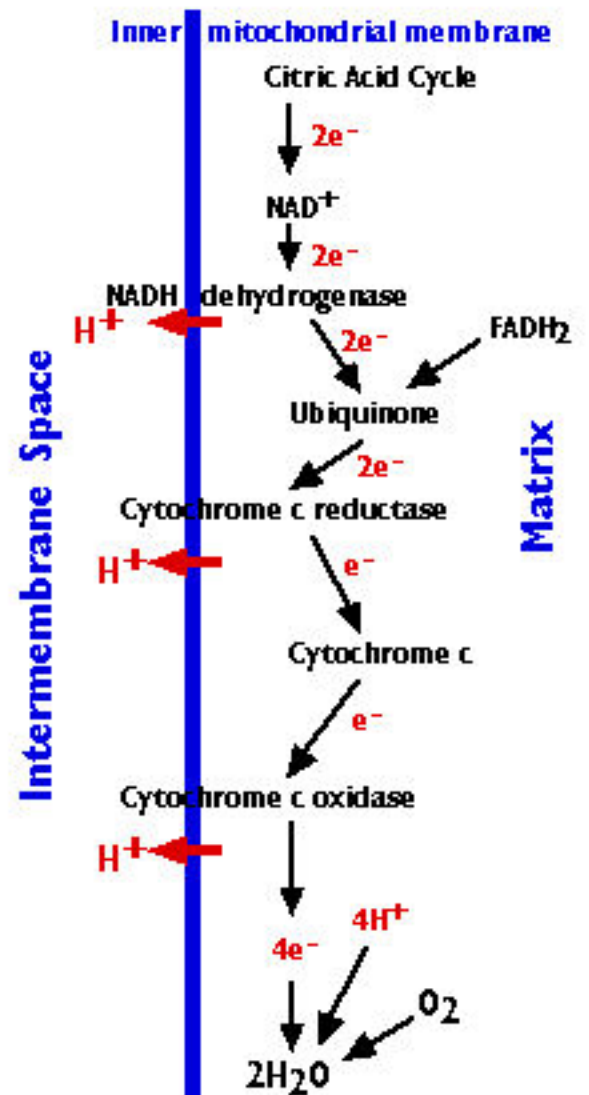
ATP synthase



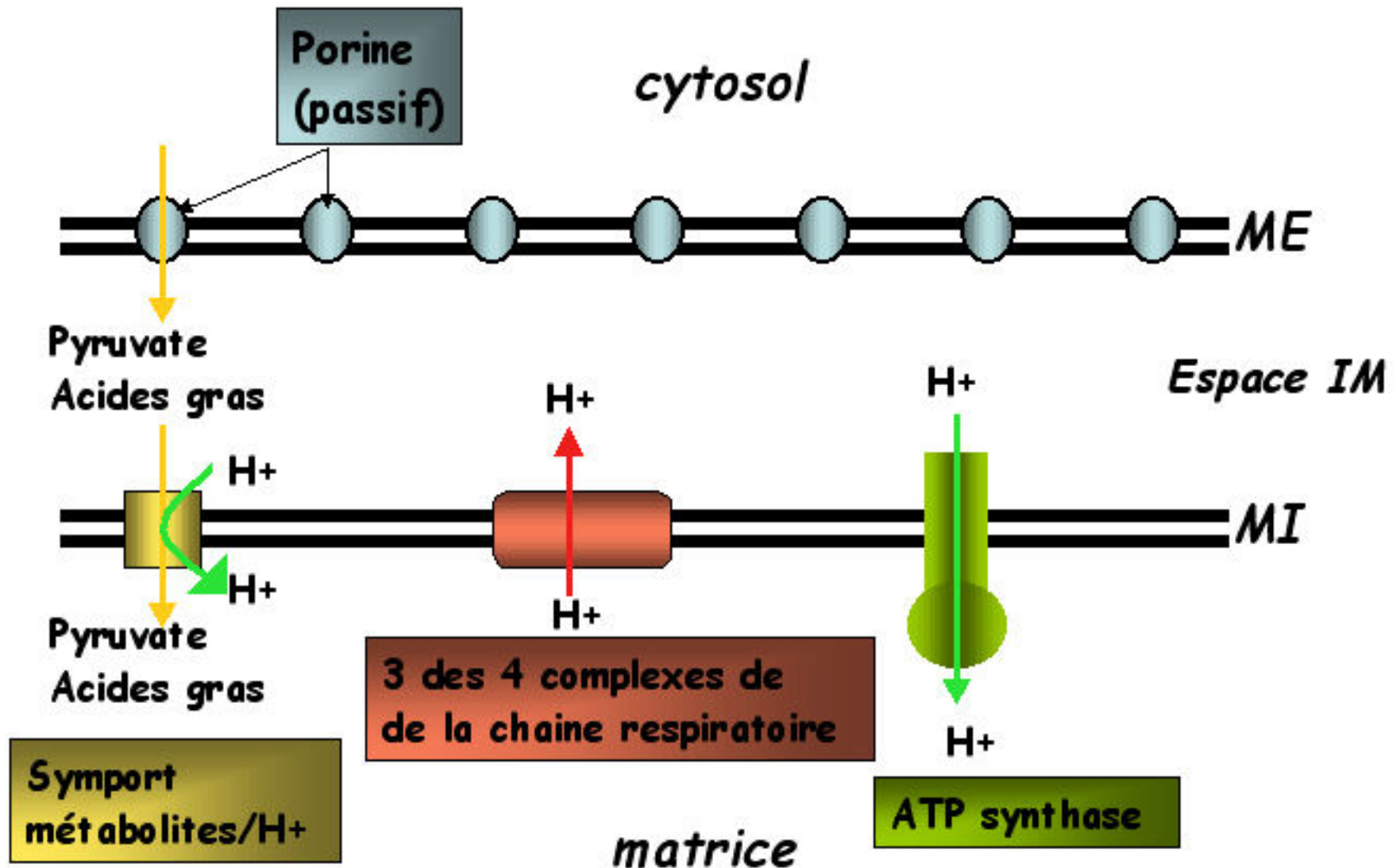
Résumé du métabolisme énergétique



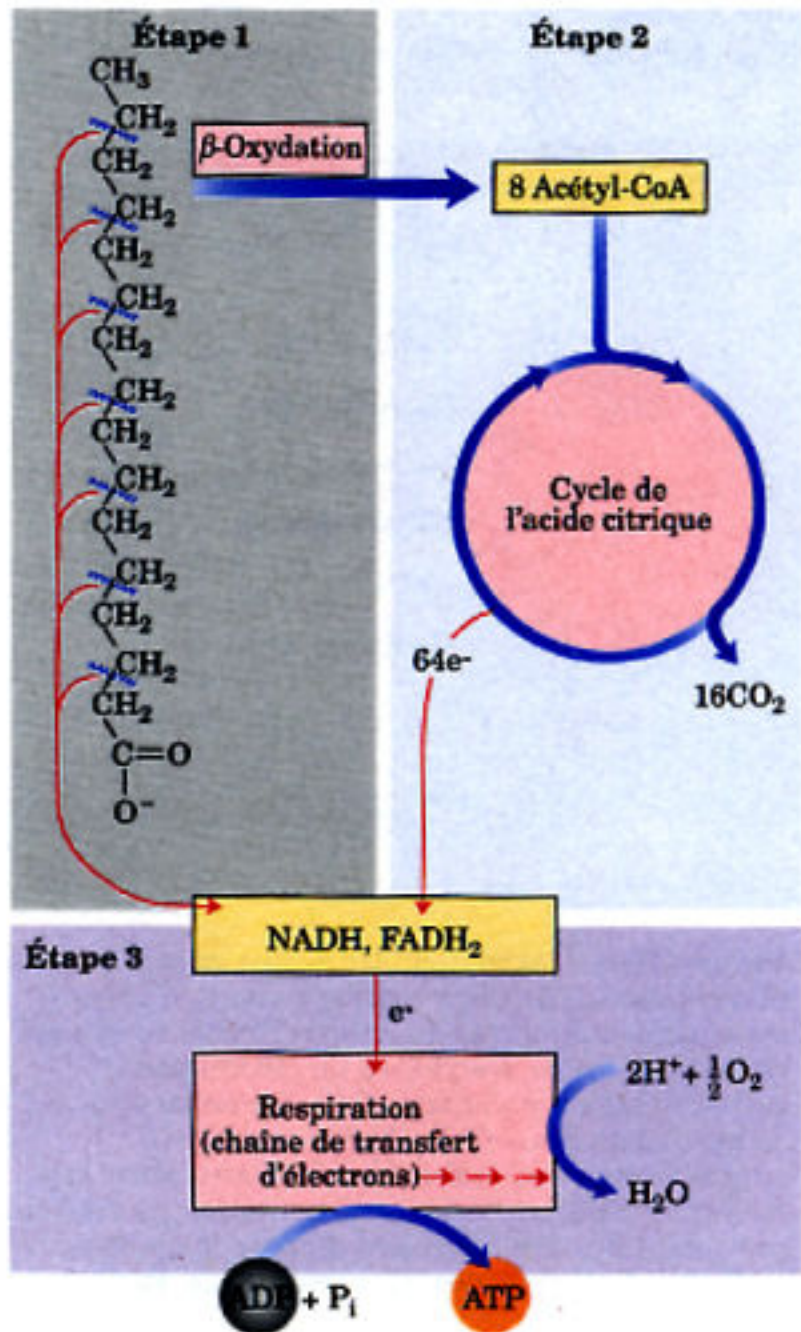
Résumé



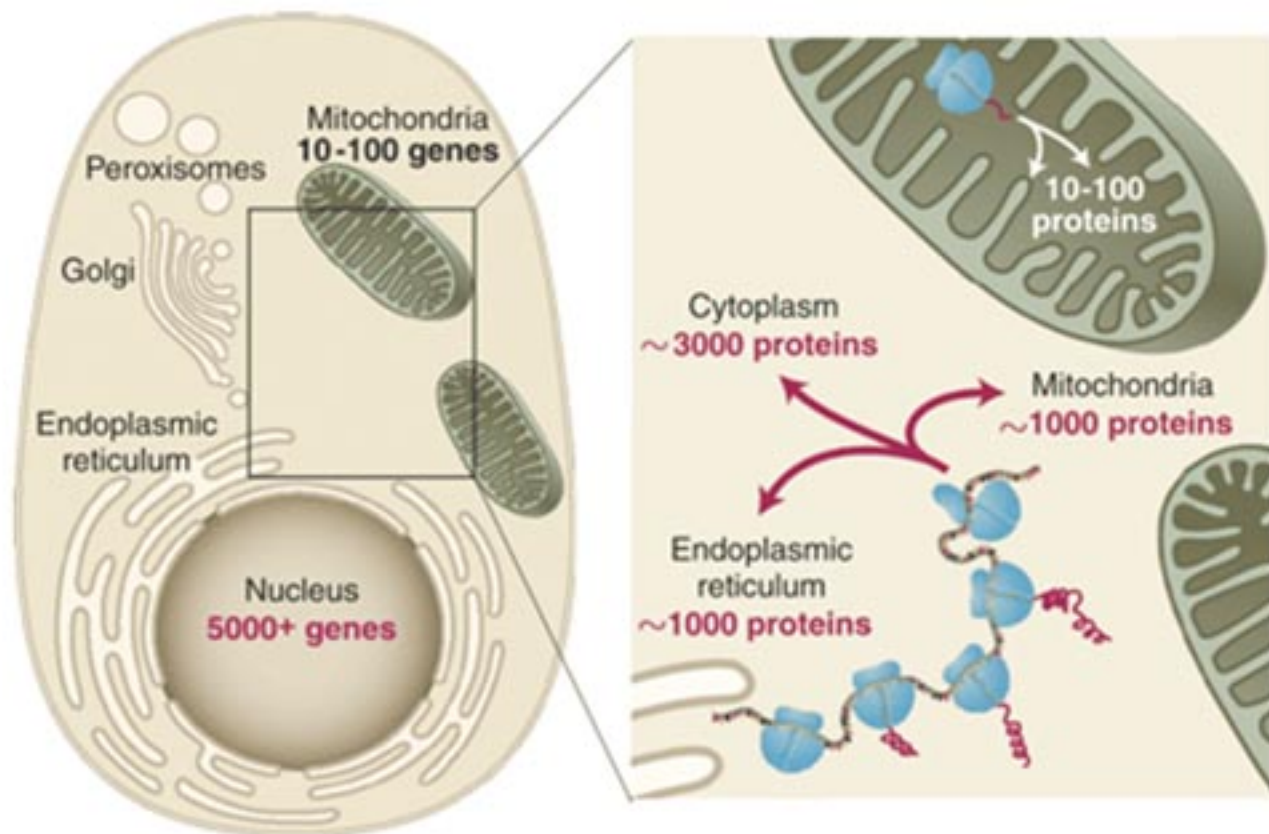
Résumé: transport des protons



Résumé: lipides



Génome de la mitochondrie



Science (2006) 313; 5785: 314 - 318
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Maladies génétiques

The Spectrum of Mitochondrial Disease.

This table presents just a sample of the many genetic and acquired disorders that can result in primary or secondary disturbances of mitochondrial function. It demonstrates the importance of the intergenomic dialogue in contributing to the wide variety of disorders associated with mitochondrial dysfunction.

Some disorders known to be associated with mtDNA mutations

MELAS
MERRF
NARP
Myoneurogastrointestinal disorder and encephalopathy (MNGIE)
Pearson Marrow syndrome
Kearns-Sayre-CPEO
Leber hereditary optic neuropathy (LHON)
Aminoglycoside-associated deafness
Diabetes with deafness

Some mendelian (nDNA) disorders of mitochondrial function involving regulation of fuel homeostasis

Luft disease
Leigh syndrome (Complex I, COX, PDH)
Alpers Disease
MCAD, SCAD, SCHAD, VLCAD, LCHAD
Glutaric aciduria II
Lethal infantile cardiomyopathy
Friedreich ataxia
Maturity onset diabetes of young
Malignant hyperthermia
Disorders of ketone utilization
mtDNA depletion syndrome
Reversible COX deficiency of infancy
Various defects of the Krebs Cycle
Pyruvate dehydrogenase deficiency
Pyruvate carboxylase deficiency
Fumarase deficiency
Carnitine palmitoyl transferase deficiency

Some other primary disorders of intramitochondrial enzymes

Methylmalonic acidemia
Erythropoietic porphyria
Propionic acidemia
Acute intermittent porphyria
Variegate porphyria
Maple syrup urine disease
Nonketotic hyperglycinemia
Hereditary sideroblastic anemia
OTC Deficiency
CPS Deficiency

<http://www.mitoresearch.org/>

Maladies avec dysfonctionnement mitochondrial non génétique

Disorders Sometimes Associated with Mitochondrial Dysfunction.

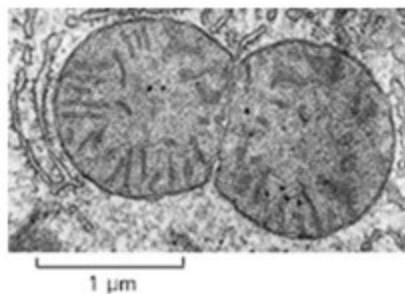
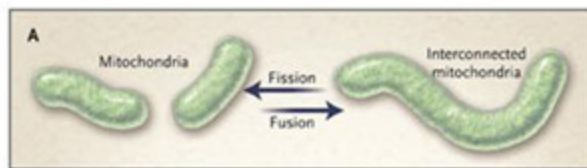
| Some mendelian (nDNA) disorders with secondary disturbances in mitochondrial function† | <i>Polygenic and Genetotropic</i> | <i>Autoimmune</i> | <i>Environmental</i> |
|---|---|---|--|
| <p>Hemochromatosis Wilson disease Batten disease Wolff-Parkinson-White†† Huntington disease Menkes disease Lesch-Nyhan syndrome</p> | <p>Aging Type II diabetes mellitus Atherosclerotic heart disease Parkinson disease Alzheimer dementia Congestive heart failure Maternally inherited migraine Niacin-responsive hypercholesterolemia Postpartum cardiomyopathy Alcoholic myopathy Wernicke encephalopathy Reye syndrome Burkitt lymphoma (BCL2) Cancer metastasis (NM23) Irritable bowel syndrome Gastroparesis-GI dysmotility</p> | <p>Multiple sclerosis Systemic lupus erythematosus Rheumatoid arthritis Thyrotoxicosis Primary biliary cirrhosis Procainamide lupus Guillain-Barré syndrome</p> | <p>AZT toxicity FIAU toxicity Lead, cyanide and mercury poisoning Ackee fruit toxic hypoglycemia Doxorubicin cardiotoxicity Aminoglycoside ototoxicity and nephrotoxicity Amytal poisoning Carbon monoxide poisoning Amphotericin nephrotoxicity MPTP Parkinsonism Vitamin deficiencies such as pellagra, beriberi, rickets, and ICU axonal neuropathy and pernicious anemia</p> |

† nDNA mutations affecting proteins that are not located in the mitochondria but which alter mitochondrial function.

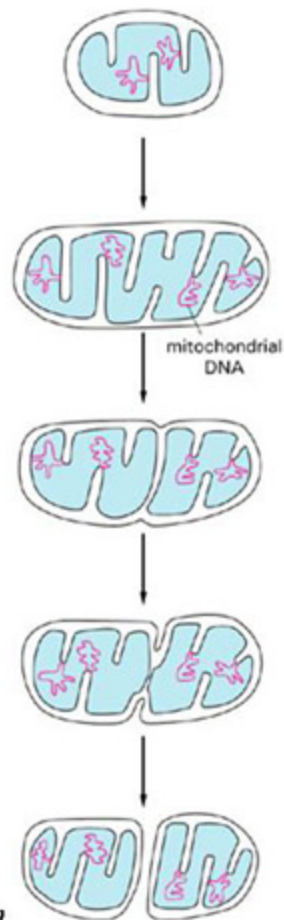
†† WPW generally has a non-mitochondrial cause but is sometimes seen in conjunction with cases of Complex I deficiency.

<http://www.mitoresearch.org/>

Division



Chan DC. N Engl J Med 2007;356(17):1707-9
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