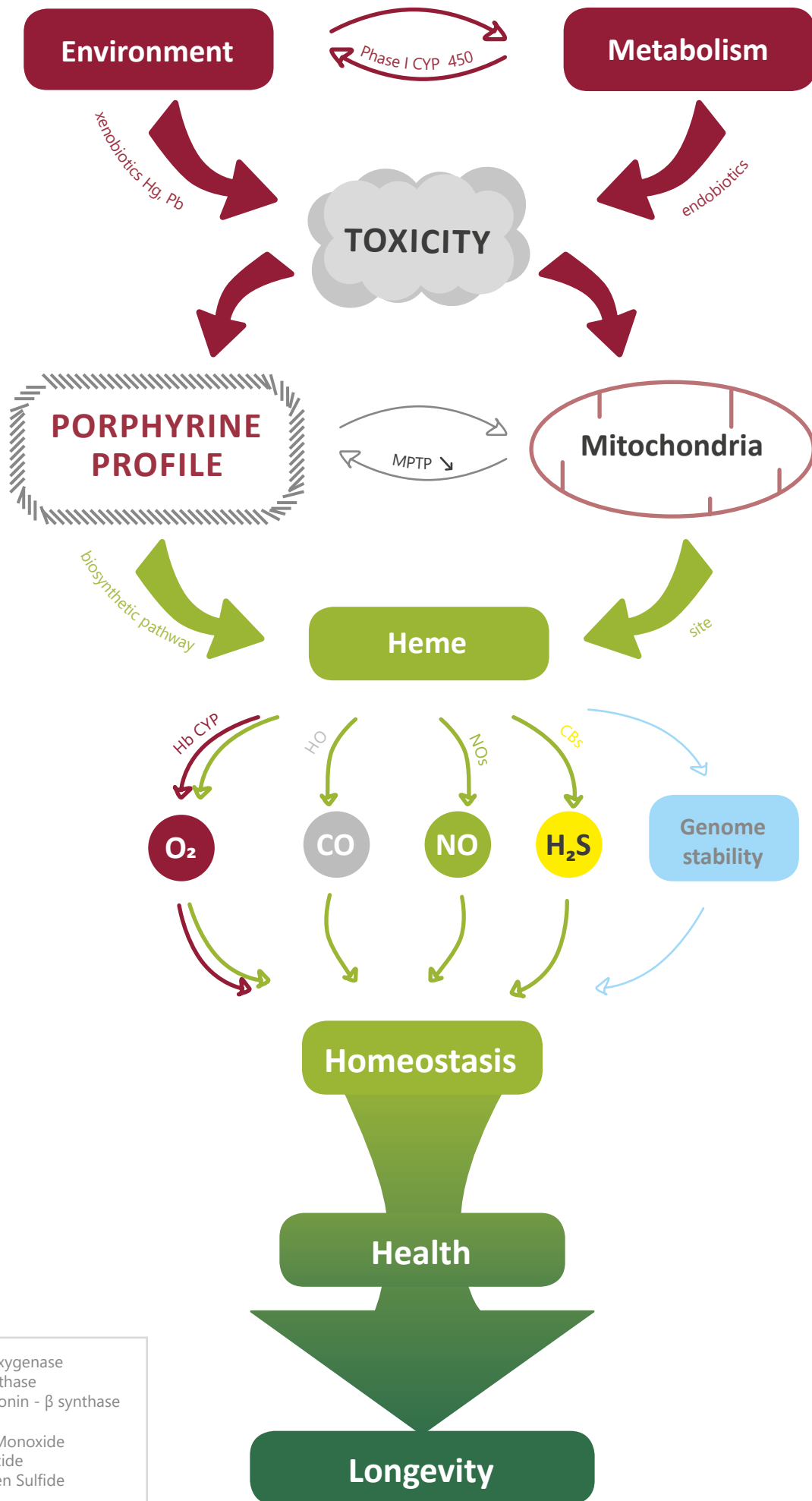


# Porphyryns in the physiological «web»



HO : Heme Oxygenase  
 NOs : NO synthase  
 CBs : Cystathionin - β synthase

CO : Carbon Monoxide  
 NO : Nitric Oxide  
 H<sub>2</sub>S : Hydrogen Sulfide

# Porphyryns in health and disease

**Porphyryns** are components of Heme's biosynthetic pathway. It is synthesized in the mitochondria of all living things' cells. **Heme controls oxygen in breath and detoxication** but also **promote the other gaz production** like Nitric Oxide (NO), Hydrogen Sulfide (H<sub>2</sub>S) and Carbon Monoxide (CO) which are, all three of them, **oxygen savers, antioxidants, anti-inflammatory agents** and have a **tissue protective effect**.

Thus, **Heme is a key component of oxygen homeostasis**. The Porphyryn profile can be altered quantitatively by a rise of their synthesis level, qualitatively by a modification of their respective components proportions, or most of the time in both manners :

- **A rise of porphyrinuria** is related with an **increase of environmental xenobiotics toxic burden** or **endobiotics burden** coming from our metabolism, or whether a **decrease in the potential of the mitochondrial membrane** induced by many toxics including some medecines.
- Qualitatively, a **break in the profile balance**, as a joint increase of the three terminated compounds, 5cxP, PcP and coproporphyrin, has been associated by many authors to a **latent mercury toxicity**.
- Finally, an **isolated rise of coproporphyrin** has been tied to **xeno/endobiotics impact** and/or an **alteration of the mitochondrial function** by MPTP\* decrease, which is generated by many toxics/medecines.

To the extent that **Heme's biosynthetic pathway**, sensitive to many toxics, is **protected in the mainstay by an effective and multifaceted detoxication system**, which is composed of Phase I CYP 450, Phase II transferases, peroxidases, epoxydases, dehydrogenases, including the ALDH (type II) ; a **Porphyryn profile alteration** can be regarded more broadly like an **insufficient detoxication capacity of the metabolism** regarding the stress it have to deal with.

\*MPTP : Membran Pore Transition Potential which is the mitochondrial membran support.

Sources:

1. Fowler BA, Porphyriurias induced by mercury and other metals, Toxicol Sci [5/2001] 61(2):197-8
2. Pingree SD, Simmonds PL, Rummel KT, Woods JS, Quantitative evaluation of urinary porphyrins as a measure of kidney mercury content and mercury body burden during prolonged methylmercury exposure in rats, Toxicol Sci [05/2001] 61(2):234-40
3. Apostoli M, Sarnico M, Bavazzano P, Bartoli D, Arsenic and porphyrins, American Journal ou Industrial Medecine 42180-187[2002]
4. A cascade analysis of the interaction of mercury and coproporphyrinogen oxidase(CPOX) polymorphism on the heme biosynthetic pathway and porphyrin production, Toxicol Left [Oct 2005]
5. The association between genetic polymorphisms of coproporphynogen oxidase and an atypical porphyrinogenic response to mercury exposure in humans, Toxcol Appl Pharmacol [aug 2005] 206(2):113-20
6. Validity of spot urine samples as a surrogate measure of 24-hour porphyrin excretion raes. Evaluation of diurnal variations in porphyrin, mercury, and creatinine concentrations among subjects with very low occupational mercury exposure. J Ocup Environ Med [Dec 1999] 40(12):1090-101
7. The validity of spot urine samples for low-level occupational mercury exposure assesement and relationship to porphyrin and creatinine excretion rates., J Pharmacol Exp ther [Apr 1996] 277(1):239-44
8. Altered porphyrin metabolism as a biomarker of mercury exposure and toxicity. Can J Physio Pharmacol [Feb 1997] 74(2)/210-5
9. Behavioral effects of low-level exposure to elemental Hg among dentists. Neurotoxicol Teratol [1995] 17(2):161-5