

# Effect of 2,3-BPG 19

- It is an important regulator of  $O_2$ -binding
- It is the most abundant organic phosphate in the RBC  
 $[2,3-BPG] = 4-5 \text{ mM} = [Hb]$
- It is synthesized from an intermediate of the Glycolytic pathway
- High affinity for  $O_2$  in its absence  
 $P_{50}$  is 7 to 10 mmHg
- BPG stabilize the T state
- BPG binds the  $\beta$  subunits in (1:1) in a pocket lined with positively charged amino acids
- BPG conc. is increased in response to chronic hypoxia. e.g.
  - chronic obstructive pulmonary disease [COPD] like emphysema
  - High altitude
  - Chronic anemia. e.g. PK deficiency

## - Stored blood in Blood Bank.

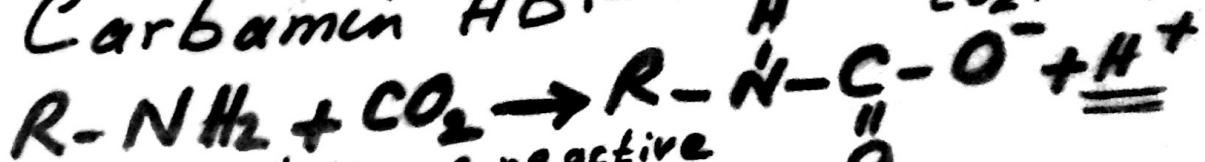
- storage  $\rightarrow$  2,3-BPG  $\rightarrow$   $O_2$ -trap
- transfused blood restore BPG in 6-24 hrs.
  - Supplement of Adenine and changes of  $H^+$ , phosphate and hexoses restores ATP and improves [BPG]  
 $\rightarrow$   $\uparrow$  storage time from 21 d to 42 days

# CO<sub>2</sub> Transport

Hb is imp't in the transport of CO<sub>2</sub> from tissues where it is generated to the lung where it is excreted:

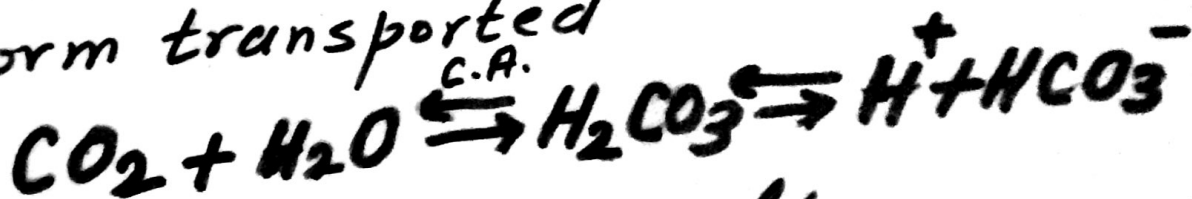
A. Dissolved CO<sub>2</sub> - accounts for ~ 10%

B. Carbamin Hb: - accounts for 15-20% of CO<sub>2</sub> transported



Deoxy Hb is more reactive

C. Bicarbonate is the major form transported



- 1- Isohydric shift
- 2- Chloride shift

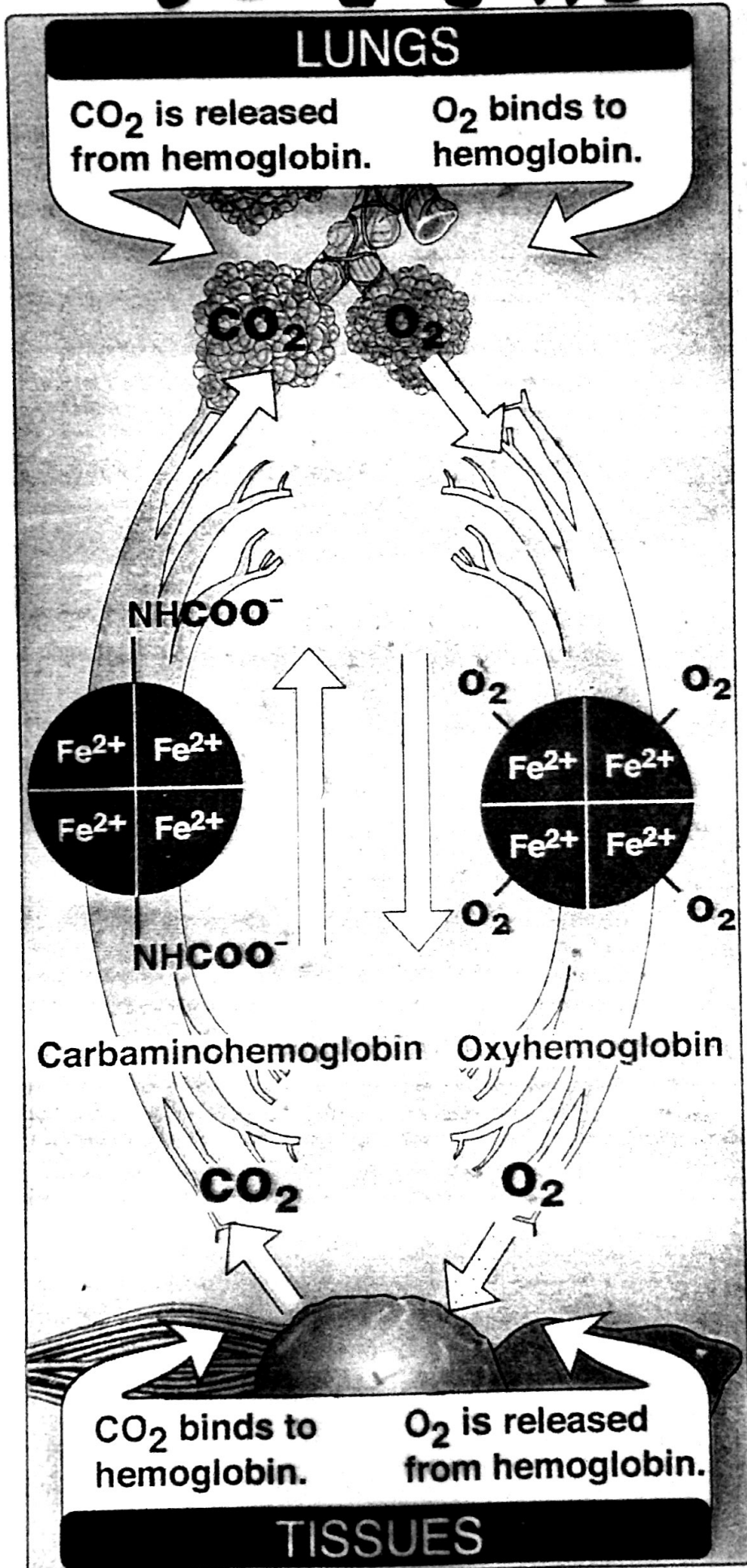
- Distribution of the H<sup>+</sup> generated during normal CO<sub>2</sub> transport: -

Buffering: Hb buffer 50%  
other buffers 10%

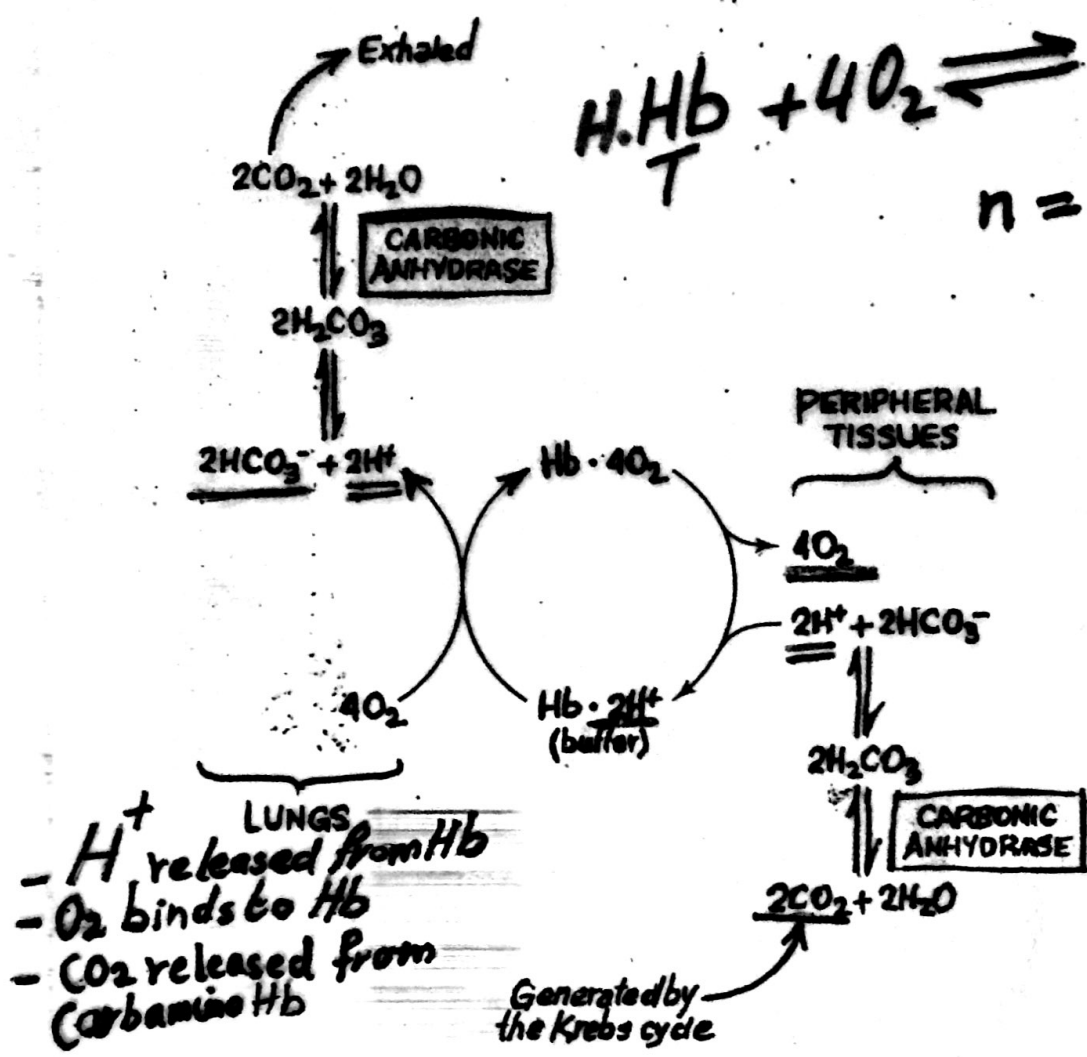
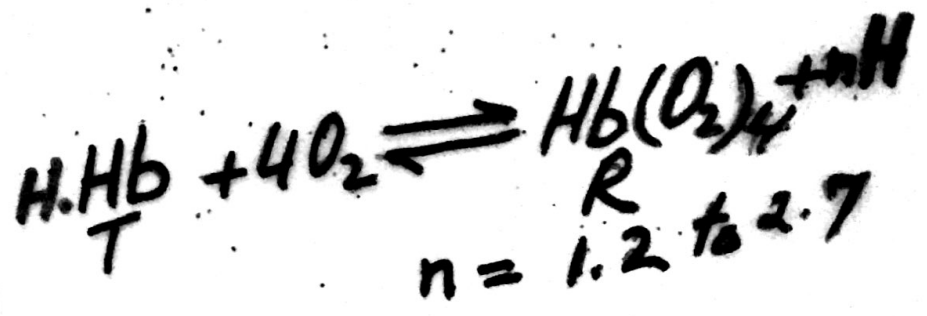
Isohydric Mechanism 40%

# Transport of CO<sub>2</sub> by Hb

206



# BOHR EFFECT:-

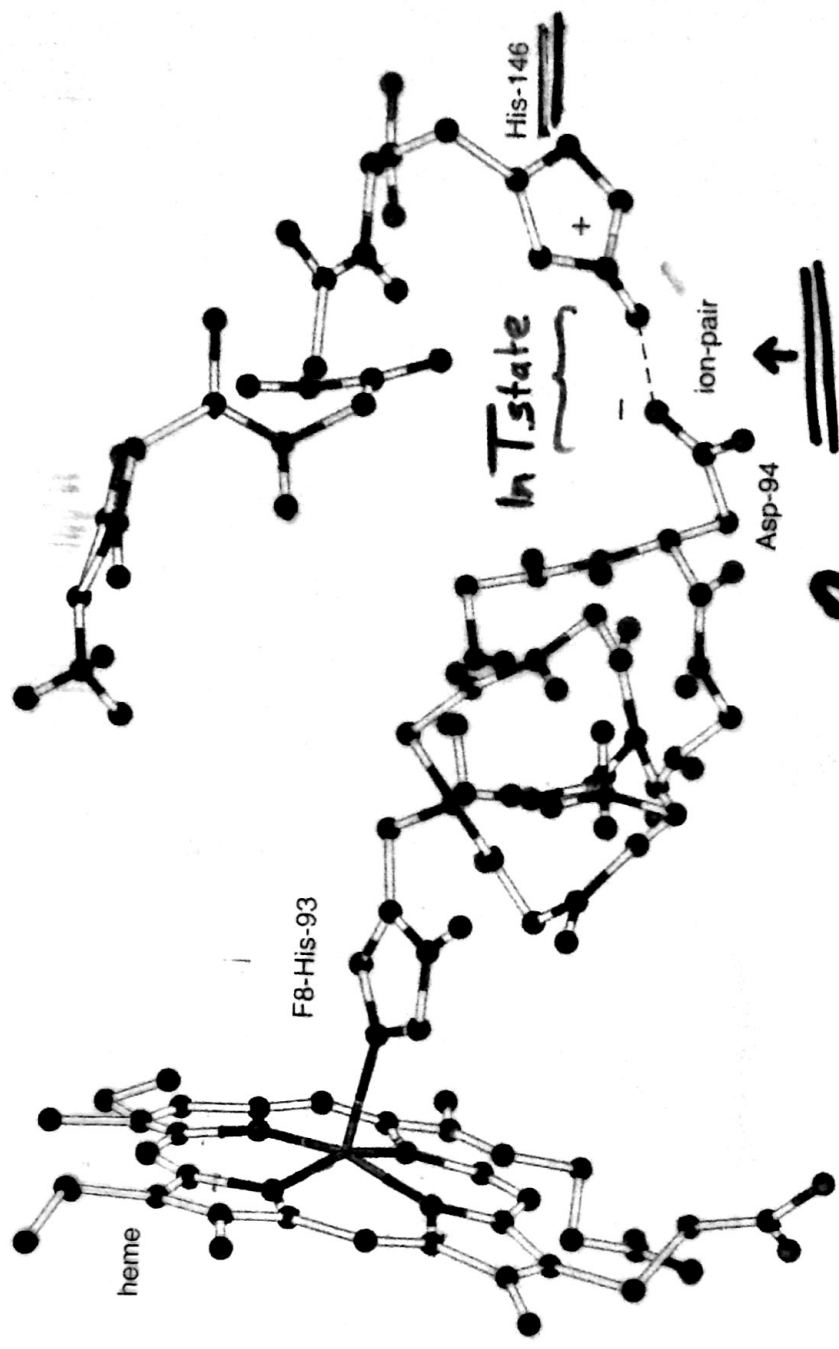


- $H^+$  released from Hb
- $O_2$  binds to Hb
- $CO_2$  released from Carbamino Hb

Figure 6-9. The Bohr effect. Carbon dioxide generated in peripheral tissues combines with water to form carbonic acid, which dissociates into protons and bicarbonate ions. Deoxyhemoglobin acts as a buffer by binding protons and delivering them to the lungs. In the lungs, the uptake of oxygen by hemoglobin releases protons that combine with bicarbonate ion, forming carbonic acid, which when dehydrated by carbonic anhydrase becomes carbon dioxide, which then is exhaled.

Mechanism of the Bohr Effect:-  
 pKa of N-terminal  $\alpha$ -amino groups and some his residues e.g.  $\beta 146$  his is INCREASED upon deoxygenated.  $pK_{7.3} \rightarrow 7.7$   
 • Protonated oxy deox  
 • charged  
 • formation of ionic bonds in T state

# Mechanism of Bohr Effect



**FIGURE 9.29**  
 Ion-pair between the  $\beta$ His-146 imidazolium and the  $\beta$ Asp-94 carboxylate side-chain groups in the deoxy(T)-conformation of hemoglobin.

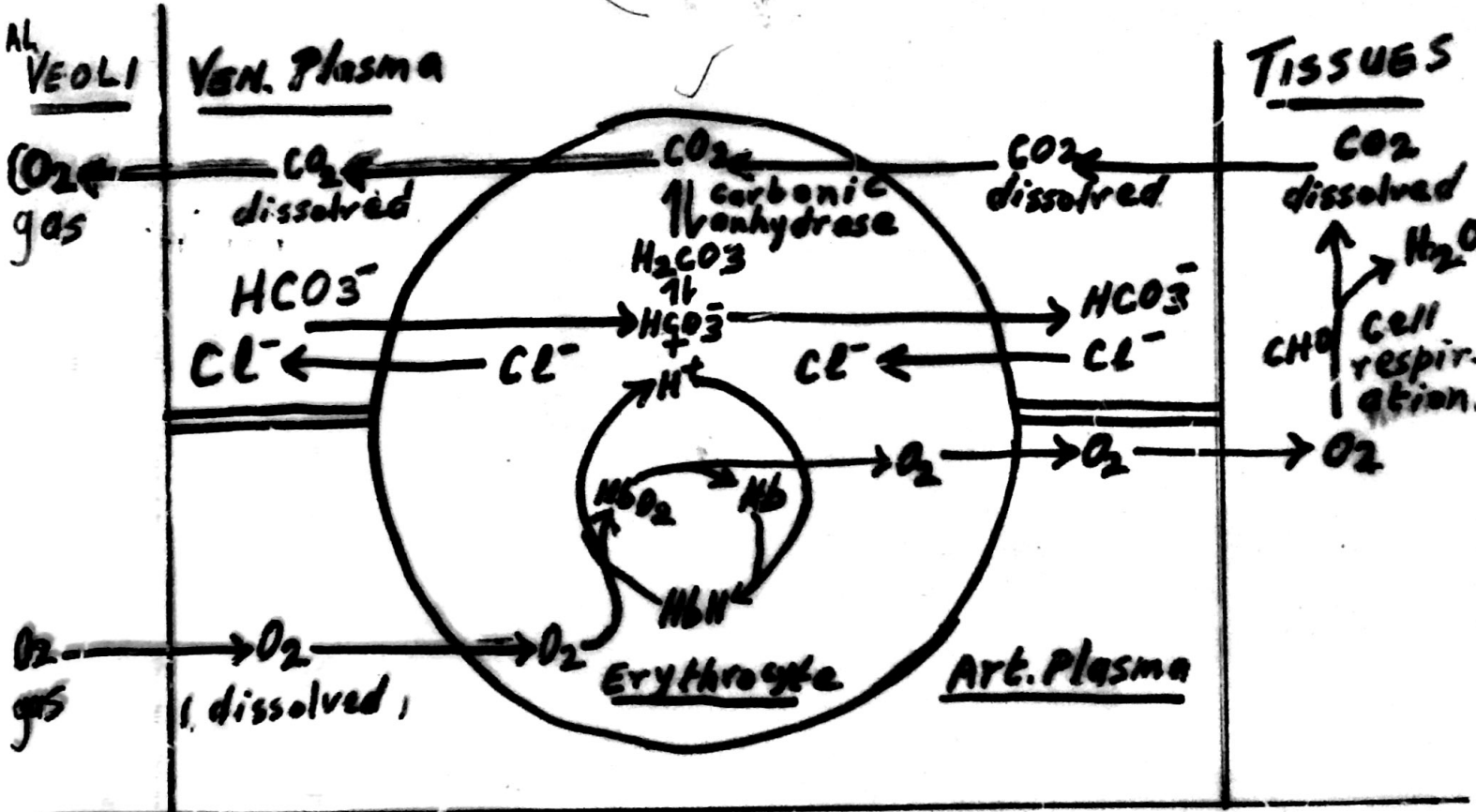
**T**  
 $\beta$  His-146  
 pKa 7.7

**R**  
 $\beta$ -His-146  
 pKa = 7.3

50% of proton release come from  $\beta$ -His 146

# BOHR Effect

# Haldane Effect

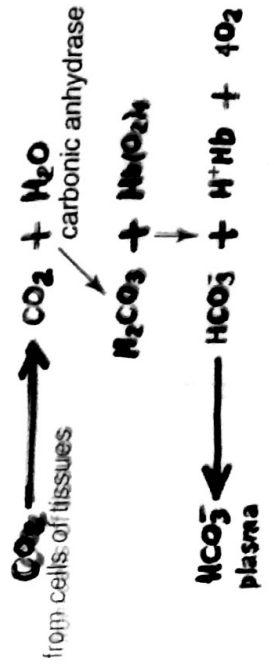


Isohydric shift

Chloride shift



(a) Red Blood Cell in Capillaries of Tissues



(b) Red Blood Cell in Capillaries of Lung

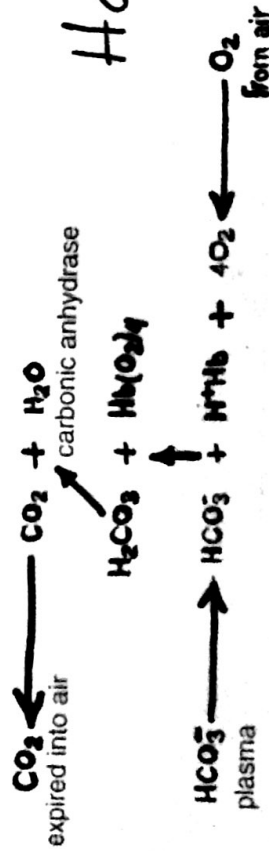


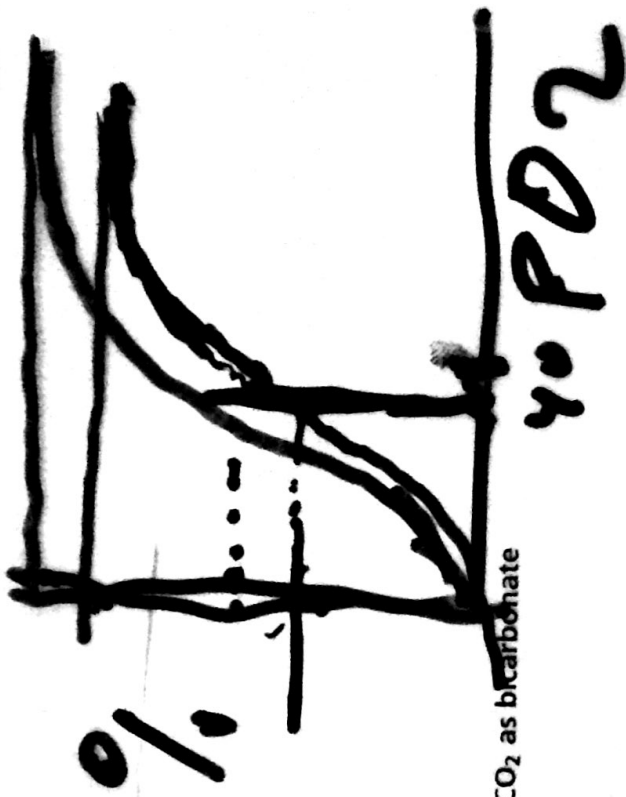
FIGURE 9.32

Transport of CO<sub>2</sub> as carbamino-hemoglobin.

Bohr effect

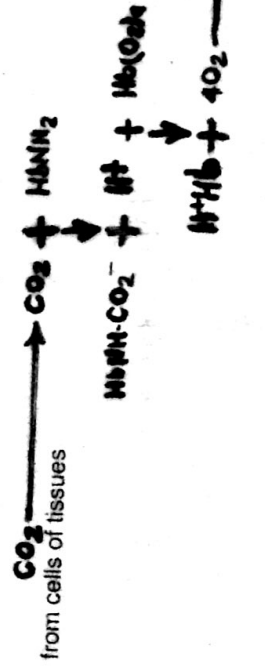
FIGURE 9.31

The isohydric transport of CO<sub>2</sub> as bicarbonate



Haldane effect

(a) Red Blood Cell in Capillaries of Tissues



(b) Red Blood Cell in Capillaries of Lung

