

Increased Homocysteine Mediated Oxidative Stress as Key Determinant of Hepatitis

Tangchun Long*

Department of Medicine and Therapeutics, Chinese University of Hong Kong, Hong Kong, China

*Corresponding author: Tangchun Long, Department of Medicine and Therapeutics, Chinese University of Hong Kong, Hong Kong, China, E-mail: longtangchun@gmail.com

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Description

It causes an increase in oxidative stress, which causes damage to vascular endothelial cells and encourages the growth of vascular smooth muscle cells during the autoxidation process. Reactive oxygen species production also rises as a result. High HCY also disrupts the normal coagulation mechanism, significantly increasing the risk of coronary heart disease, peripheral vascular disease, and cerebrovascular disease. Endothelial cell injury decreases protein C activation and thrombomodulin expression, both of which contribute to the local pro-coagulant in HHcy. There is a link between increased HCY in pregnant women and preeclampsia, early placental loss, placental abruption, intrauterine growth restriction, and other conditions. In the Zn-treated group, folate levels increased after an 8-week zinc treatment. Over the course of the follow-up period, the ratio of zinc to placebo decreased homocysteine. After the intervention, homocysteine and folate levels in the zinc-supplemented group were inversely correlated. The first study to look at how zinc supplementation affected homocysteine, vitamin B12, and folate levels after menopause.

Cerebrovascular Dementia

The risk of deficiencies in essential micronutrients like zinc and changes in methylation cycle-related markers is increased by the menopause-associated drop in estrogen levels. In this study, a group of postmenopausal women's circulating concentrations of Hcy, B12, and Fol are evaluated after eight weeks of Zn supplementation. Menopause occurs when ovarian hormone secretion decreases, resulting in the end of menstrual cycles. Along with certain menopausal physiological disorders, the decrease in estrogen production may cause changes in the lipid profile, which may disrupt clinical-nutritional cardiovascular health-related parameters that are associated with cardiovascular diseases. In addition, if this menopausal situation is not monitored, deficiencies in a number of essential micronutrients, such as minerals, are seen to increase. One of the most essential trace elements, zinc deficiency is a major global health issue. Zn protects the cardiovascular system by combating oxidative stress and inflammation, which are risk factors for cardiovascular diseases. Zn is a cofactor of more than 300 enzymes. Since Zn deficiency may cause multiple systemic

disturbances, including cardiovascular disease and dyslipidemia, abnormalities in Zn homeostasis have been reported in patients with metabolic disorders. Atherosclerosis and other cardiovascular diseases appear to begin at least partially in childhood. Studies of autopsies have demonstrated that the pathogenesis of atherosclerosis-related intimal thickening and fatty streaks, both of which begin in childhood and have even been observed in fetus's Lower distensibility and increased carotid artery intima-media thickness are thought to be early and related symptoms of atherosclerosis.

Adult cardiovascular events are strongly predicted by these non-invasively measured markers. Higher carotid intima-media thickness and/or impaired arterial distensibility in children are linked, among other things, to higher body mass index and blood pressure, higher insulin and cholesterol concentrations, unfavorable body fat distribution, diabetes mellitus type I, and a parent's history of premature myocardial infarction. This suggests that fetal growth and nutrition may play a significant role in atherogenesis. Micronutrients like folate, vitamin B12, and homocysteine interact in the one-carbon metabolism, which is necessary for cellular growth and differentiation, the synthesis of nucleic acids, and DNA methylation. Homocysteine metabolism is controlled by folate and vitamin B12. It is thought to be a separate risk factor for ischemic heart disease and stroke.

Trans-Sulfuration Pathway

Lower folate or vitamin B12 concentrations during fetal life and higher circulating homocysteine concentrations have been linked to a poor cardiometabolic profile at school age. Hypoperfusion-related vascular cognitive impairment accounts for at least 20% of Alzheimer's disease-related cerebrovascular dementia cases. As a well-known independent risk factor for atherosclerosis, hyperhomocysteinemia also raises the risk of vascular dementia and cardiovascular illness. Dementia patients have an inverse relationship between their cognitive functions and their serum homocysteine level, and VCI patients are more likely than Alzheimer's disease patients to experience an elevation. Although a connection has been made between HHcy and cognitive impairments, the underlying molecular mechanism remains a mystery. The attack of hypoperfusion,

which is a prelude to VCI and vascular dementia typically, begins with dysfunction of cerebrovascular endothelial cells. The primary factor that determines endothelial dysfunction and, consequently, age-related cardiovascular diseases is endothelial senescence. Due to its anti-inflammatory, anti-thrombotic, anti-proliferative, and antioxidant properties, nitric oxide produced by endothelial NO synthase is essential for cardiovascular homeostasis. To fully link NADPH oxidation and NO production, the eNOS must be completely saturated with tetrahydrobiopterin. Homocysteine is an important amino acid that is made when the essential amino acid methionine is broken down. It is used to make energy and neurotransmitters. Depression and cardiovascular disease have been linked to high homocysteine levels, but studies of depression have not always been consistent, possibly due to differences in methodology.

In clinical research, studying twins can be useful for controlling for confounding factors. In a twin study, the aim of

this research was to examine the connection between depression and plasma homocysteine. In the presence of an excessive amount of methionine, the trans-sulfuration pathway is triggered, and homocysteine is converted into cysteine during this process. In the presence of the cofactor vitamin B6, the enzyme cystathionine synthase acts as the catalyst for the reaction. Hcy can be remethylated into methionine when the concentration of methionine is low. Folic acid is required as a methyl group donor for the Hcy to methionine conversion, which is vitamin B12-dependent. Theanine content and activity of theanine synthetase were both reduced by refrigeration. Refrigerated tea turned brown as a result of the polymerization of epicatechin and epigallocatechin. Utilizing the DCEC algorithm and similarity network, we were able to conduct a quantified fusion omics analysis.