

# EFFECT ON MENTAL STRESS ON INTERMEDIATE CARBOHYDRATE-AND LIPID-METABOLISM

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**Summary:** Changes in blood levels of Glucose, Pyruvic acid, Lactic acid, Glycogen, Free Fatty Acids and total Serum Cholesterol have been studied in normal healthy human adults under the effect of mental stresses of pre-examination tension and pre-operative apprehension. A highly significant rise in all the parameters was noted.

**Key words:** mental stress      pre-examination tension      pre-operative apprehension  
intermediate metabolism      FFA

## INTRODUCTION

Metabolic changes occurring in an organism during 'stress' have received considerable attention since its advent by Selye (15) in 1937. The effects of various grades of physical exercise specially on carbohydrate metabolism are well-documented, physical stress being simple to produce under controlled experimental conditions. The same, however, is not true of mental stress, which is a non-specific condition. Statistical data suggests a higher incidence of atherosclerosis in conditions of mental tensions, responsibilities and frustrations. Emotional stress also has been etiologically linked with the development of coronary heart diseases (22). Selye (16) describes a biphasic response of serum cholesterol and lipids during stress in man. Friedmann *et al.* (8) reported no rise in the level of blood pyruvic acid in persons under usual stress of office work or work in laboratory. However, the effects on intermediate carbohydrate metabolism in correlation with the changes on the concentration of lipids in blood are scarcely reported. In the present study, blood levels of glucose, glycogen, pyruvic acid, lactic acid, total serum cholesterol and free fatty acids are studied under the effect of mental stress in pre-examination tension and pre-operative apprehension.

## MATERIAL AND METHODS

The effect of two types of emotional stimuli were studied.

(a) *Pre-examination tension:* Twentyfive normal healthy medical students of both sexes were selected. The control blood samples were taken during the midsemester session in fasting state. The test samples (fasting) were obtained during their university examinations.

(b) *Pre-operative apprehension:* Twentyfive subjects of both sexes admitted to the hospital for elective surgery were selected after careful screening to rule out any endocrinal,

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metabolic or renal disorder. The control fasting blood samples were obtained two days after their hospitalization so as to allow for their adjustments to the hospital surroundings. The test sample was collected in the operation-theatre prior to the premedication of anaesthesia.

Each of the blood samples were analysed for blood glucose (11), blood glycogen (12), blood pyruvic acids (7), blood lactic acid (1), serum cholesterol (14), and plasma free fatty acids (FFA) (21).

## RESULTS

The observations are tabulated below:

TABLE I: Effects of pre-examination tension.

Series	Glucose mgs/100 ml	Glycogen mgs/100 ml	Pyruvic acid mgs/100 ml	Lactic acid mgs/100 ml	Total cholesterol mgs/100 ml	FFA mEq/L
Control	74.36 ± 4.75	5.99 ± 1.28	1.17 ± 0.27	8.81 ± 1.60	173.40 ± 21.40	0.51 ± 0.19
Test	90.64 ± 6.65	7.62 ± 1.55	1.58 ± 0.28	12.10 ± 1.50	213.80 ± 26.10	0.85 ± 0.25
Difference	+16.28	+ 1.62	+0.41	+ 3.28	+ 40.36	+ 0.33
% Increase	17.80	26.60	31.46	26.60	23.30	64.70
Significance	P<.01	P<.01	P<.01	P<.01	P<0.1	P<.01

TABLE II: Effects of pre-operative apprehension.

Series	Glucose mgs/100 ml	Glycogen mgs/100 ml	Pyruvic acid mgs/100 ml	Lactic acid mgs/100 ml	Total cholesterol mgs/100 ml	FFA mEq/L
Control	68.78 ± 3.72	6.00 ± 1.50	1.00 ± 0.23	9.20 ± 1.92	178.92 ± 28.22	0.44 ± 0.11
Test	86.84 ± 5.84	7.77 ± 0.72	1.32 ± 0.27	12.77 ± 2.80	223.64 ± 27.40	1.14 ± 0.30
Difference	+17.76	+ 1.68	+ 0.32	+ 3.57	+ 44.76	+ 0.70
% Increase	20.01	28.30	32.00	40.20	24.90	159.09
Significance	P<.01	P<.01	P<.01	P<.01	P<.01	P<.01

The effect of emotional stress in both the forms: pre-examination tension and pre-operative apprehension, showed a significant increase in the concentrations of glucose, glycogen, pyruvic acid, lactic acid, total cholesterol and FFA in blood.

## DISCUSSION

The 'stress' enhances the activity of the cortico-hypothalamic-hypophysio-sympatho-adrenocortical axis, resulting into the increased liberation of catecholamines and corticoids in circulation. This subsequently causes increased hepatic glycogenolysis and gluconeogenesis, thus increasing the concentration of glucose in peripheral circulation (13). It is known that the blood-glycogen is localised in granulocytes (19). Exercise and various emotional stresses have



been shown to cause the polymorphonuclear leucocytosis. Dobreff and Tomoff (4) also observed similar type of leucocytosis of emotional origin in subjects before undergoing operative surgery and in students taking an examination. Ellis has reported (6) an increased concentration of the enzyme glucose-6-phosphatase in blood during stressful stimulation. This may help in the increased biosynthesis of glycogen by the granulocytes. Thus, the increased concentration of glycogen in peripheral blood can possibly be attributed to the increased concentration of glucose-6-phosphatase and the polymorphonuclear leucocytosis under the effect of mental stress.

The hyperlactacidaemia and the hyperpyruvic acidaemia can be taken as the essential metabolic corollaries of various types of stressors including exercise and mental stress. This can be possibly due to increased formation and liberation of epinephrine which enhances the activation of the enzyme phosphorylase (10) resulting into an overall increase in the aerobic as well as anaerobic carbohydrate metabolism, thus raising the blood-levels of both lactic acid and pyruvic acid. One of the causative factors for the raised concentrations of the two acids in blood may be the increased secretion of adreno-corticoids during emotional stress. Epinephrine induces liberation of gluco-corticoids during the stresses which affect carbohydrate metabolism leading to increased concentration of the intermediary metabolites, lactic acid and pyruvic acid in blood.

Pre-examination tension and pre-operative apprehension, both caused a highly significant rise in the concentration of serum total cholesterol in the present study. There are reports (2, 9) stating similar rise in accountants during the audit session. Dreyfuss and Czaczkes (5) found the blood cholesterol in medical students higher during the examinations than it was two days after the examination. This can be attributed to the increased mobilization of cholesterol as it is a potential source for the adrenal steroid hormones. These cortico-steroids are required in large quantities in order to cope with the situation of tension, which may be under the effect of the released lipid mobilising hormone (LM) under stress. Zarafonitis and his associates (23) have reported the release of LM during surgical stress in human beings.

Plasma free fatty acids (FFA), is the major transport form of fatty acids which are carried from adipose tissue depots to tissues for oxidative purposes. Both pre-examination tension and pre-operative apprehension caused a significant rise in plasma FFA level. Taggart *et al.* (20) have reported rise in the concentration of plasma FFA in the racing drivers. Also Somerville *et al.* (18) reported rise in FFA in speakers immediately before and also after addressing a medical meeting. Probably, the increase of catecholamines which results as a normal emergency response to stress causes mobilization of fat leading to an increase in FFA concentration in peripheral blood. During stress, there is activation of ACTH and this further causes release of cortico-steroids which potentiate the action of epinephrine (3). As the uptake of FFA by the tissues from the plasma is not much altered under emotional stress, the increased influx causes the high levels of FFA in circulation. As postulated by Siperstein (17), it is likely that glucose in addition to serving the vital functions of providing the substrate for the operation of Krebs's cycle, acts as a generating system for the reduced pyridine nucleotides. It is through these co-enzymes that stress-induced glycolysis is able to exert its regulatory influence on lipid metabolism.

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