

Detailed Description
 Endogenous morphine signalling and sympathetic drive pull the cyclic adenosine monophosphate-protein kinase A axis, abbreviated cAMP-PKA, in opposite directions, yet over time they converge on the same transcription factor, the cAMP response-element binding protein (CREB). Activation of μ -opioid receptors engages the inhibitory G-protein family (Gi), suppresses adenylyl cyclase, lowers basal cAMP and reduces PKA activity. In compensation, neurons and hepatocytes increase expression of certain cyclase isoforms, of the catalytic sub-unit of PKA and of CREB itself, gradually restoring throughput despite continuing receptor inhibition. Sympathetic tone, arriving through β -adrenergic stimulatory G-proteins (Gs), pushes cAMP the other way; each burst of epinephrine now strikes tissue that has already amplified its signalling sensitivity.

The result is a primed system that appears stable while endogenous morphine persists yet stores potential energy in surplus adenylyl cyclase and poised PKA. Once phosphorylated, CREB drives transcription of more cyclase, more PKA and, in neurons, of tyrosine hydroxylase, thereby increasing catecholamine synthesis. Hepatocytes receiving the same molecular message phosphorylate glycogen phosphorylase, switch off glycogen synthase and release glucose immediately. When endogenous morphine production falters or is abruptly blocked, the Gi restraint disappears, cAMP rises rapidly and the accumulated PKA is unleashed within minutes. Sympathetic drive, already high because mitochondrial efficiency is low and hepatic glycogen scarce, now meets no opposition; adrenaline surges, blood glucose oscillates and extra-synaptic N-methyl-D-aspartate (NMDA) receptors become fully phosphorylated, lowering their activation threshold and producing the familiar excitotoxic features of withdrawal.

- 5-HT₁ - Serotonin 1 Receptor Family
- A1AR - Adenosine A1 Receptor
- α -AR - Alpha-2 Adrenergic Receptor
- AC - Adenylyl Cyclase
- Akt - Protein Kinase B
- ALDH - Aldehyde Dehydrogenase
- AMPA - α -Amino-3-Hydroxy-5-Methyl-4-Isoxazolepropionic Acid
- AR - Androgen Receptor
- β -AR - Beta-Adrenergic Receptor
- BHB - Beta-hydroxybutyrate
- Ca²⁺/CaM - Calcium/Calmodulin Complex
- cAMP - Cyclic Adenosine Monophosphate
- CB₁ - Cannabinoid CB1 Receptor
- cGMP - Cyclic Guanosine Monophosphate
- CREB - cAMP Response Element-Binding Protein
- D₂-like - Dopamine D2-like Receptor Family
- DHEA - Dehydroepiandrosterone
- DOPAL - 3,4-Dihydroxyphenylacetaldehyde
- ERK - Extracellular Signal-Regulated Kinase
- GABA - Gamma-Aminobutyric Acid
- G $\beta\gamma$ - G protein $\beta\gamma$ Sub-units
- Gi - Inhibitory G-alpha Sub-unit
- GPR109A - Nicotinic Acid Receptor
- GPER1 - G protein-Coupled Oestradiol Receptor 1 (GPR30)
- GRK3 - G Protein-Coupled Receptor Kinase 3
- Gs - Stimulatory G-alpha Sub-unit
- GSK3 β - Glycogen-Synthase-Kinase-3 β
- HCAR2 - Hydroxycarboxylic Acid Receptor 2
- HMG-CoA - 3-Hydroxy-3-Methylglutaryl-Coenzyme A
- HSD3 β - Hydroxy-Delta-5-Steroid Dehydrogenase 3 β
- ICER - Inducible cAMP Early Repressor
- IR - Insulin Receptor
- mGluR - Metabotropic Glutamate Receptor
- MOR - Mu-Opioid Receptor
- mPR - Membrane Progesterone Receptor
- MT1 - Melatonin Receptor 1
- NAD⁺ - Nicotinamide Adenine Dinucleotide
- NO - Nitric Oxide
- NOS - Nitric Oxide Synthase (coupled)
- NMDA - N-Methyl D-Aspartic Acid
- NMNAT - Nicotinamide Mononucleotide Adenylyltransferase
- PDE - Phosphodiesterase
- PEM - Post Exertional Malaise
- PEPCK - Phosphoenolpyruvate Carboxykinase
- PFK2 - 6-Phosphofructo-2-Kinase
- PI3K - Phosphoinositide 3-Kinase
- PKA - Protein Kinase A
- PKG - cGMP-dependent Protein Kinase
- POTS - Postural Orthostatic Tachycardia Syndrome
- PregS - Pregnenolone Sulphate
- R - Receptor
- RNS - Reactive Nitrogen Species
- ROS - Reactive Oxygen Species
- RSK - Ribosomal S6 Kinase
- RTK - Receptor Tyrosine Kinase
- sGC - Soluble Guanylyl Cyclase
- THDOC - Tetrahydrodeoxycorticosterone
- TRPM3 - Transient Receptor Potential Melastatin 3

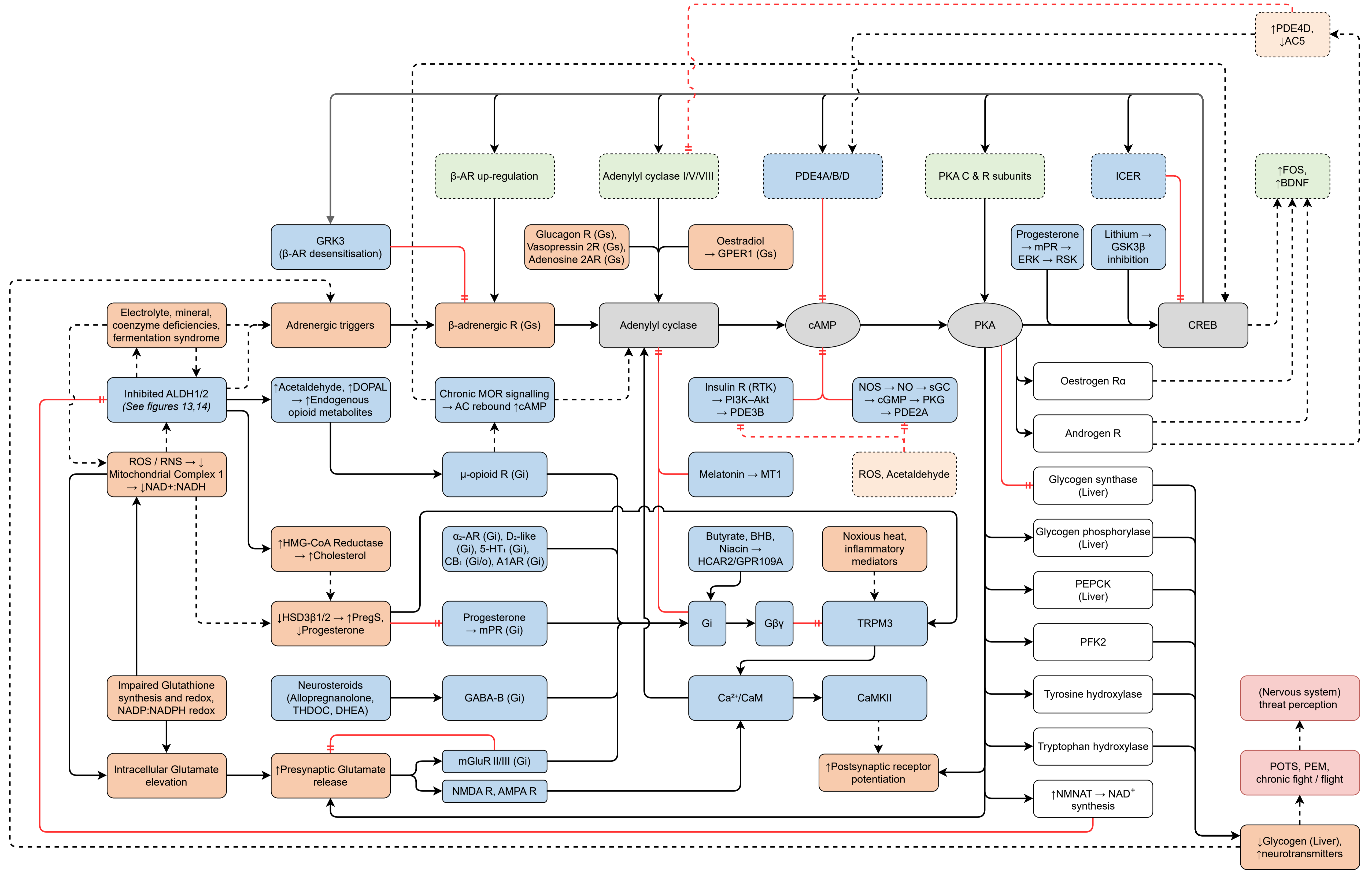


Figure 18. Pathway Diagram: Simplified overview of cAMP-PKA alterations in fermentation syndrome

ME/CFS: Correcting Chronic Mitochondrial Dysfunction

Author: Joshua Leisk ©2026, [DRAFT / INCOMPLETE - may contain errors]

v0.54

Connector Key:

- Promoted \rightarrow
- Inhibited \rightarrow +
- Abbreviated - - - -