

Université de Bordeaux I
ECOLE DOCTORALE SCIENCES DU VIVANT, GEOSCIENCES, SCIENCES DE
L'ENVIRONNEMENT

N° d'ordre : 3139

THESE

Présentée en vue de l'obtention du

**DOCTORAT DE L'UNIVERSITE DE BORDEAUX I.
SPECIALITE: NEUROSCIENCES ET PHARMACOLOGIE**

Par

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ETUDE DU ROLE DES RECEPTEURS GABAB DANS L'ANXIETE, LA DEPRESSION ET L'ADDICTION : APPROCHE PHARMACOLOGIQUE ET GENETIQUE.

Soutenue le 27 février 2006.

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Résumé

L'acide gamma aminobutyrique (GABA) étant le principal neurotransmetteur inhibiteur du cerveau, il joue un rôle clé dans la modulation de nombreux processus physiologiques et psychologiques. Il existe deux classes de récepteurs GABAergiques : les récepteurs GABAergiques ionotropiques, comprenant les récepteurs GABA_A et GABA_C, et les récepteurs GABAergiques metabotropiques, incluant uniquement les récepteurs GABA_B. Les récepteurs GABA_B sont des hétérodimères composés de deux sous-unités, la sous-unité GABA_{B(1)} et la sous-unité GABA_{B(2)}. La présence de chacune de ces sous-unités est requise pour que le récepteur soit fonctionnel. De nombreuses études ont montré que les récepteurs GABA_B étaient impliqués dans de nombreuses psychopathologies, comme l'anxiété, la dépression et l'addiction. Le but de la présente thèse a été d'examiner, chez l'animal, la contribution des récepteurs GABA_B dans ces trois différentes pathologies, prenant avantage du récent développement de souris transgéniques GABA_{B(1)} et GABA_{B(2)} knock-out et d'un modulateur positif allostérique du récepteur GABA_B (GS39783).

Dans la première partie de notre travail, nous avons montré que l'ablation du gène codant l'une ou l'autre de ces sous-unités abolissait l'hypothermie induite par le deux GABA_B agoniste (baclofen, GHB). Ces résultats confirment que l'hétérodimérisation de ces deux sous-unités est nécessaire au bon fonctionnement du récepteur GABA_B.

La seconde partie de notre étude avait pour but d'examiner le rôle des récepteurs GABA_B dans l'anxiété. Pour cela, nous avons évalué l'impact de l'inactivation du gène codant pour l'une des deux sous-unités du récepteur GABA_B dans des modèles animaux d'anxiété. Nous avons ainsi observé que les souris GABA_{B(1)}^{-/-} et GABA_{B(2)}^{-/-} présentaient un phénotype hyper-anxieux et étaient insensibles à l'action d'anxiolytiques tels que les benzodiazépines. Afin de confirmer la contribution de l'hétérodimère GABA_B dans l'anxiété, nous avons examiné les effets du GS39783 dans ces mêmes tests. Ainsi, nous avons mis en évidence que le GS39783 possédait des propriétés anxiolytiques. Etant donné que ces modulateurs allostériques sont dépourvus des effets secondaires associés aux benzodiazépines, comme la sédation et la tolérance, ils représentent une nouvelle approche thérapeutique dans le traitement des troubles anxieux.

Dans une troisième partie, nous avons entrepris l'étude de l'implication des récepteurs GABA_B dans les syndromes dépressifs. L'approche génétique, nous a montré que la suppression du gène codant pour l'une ou pour l'autre des deux sous-unités du récepteur GABA_B induit un effet antidépresseur dans le test de la nage forcée, mais pas dans le test de tail suspension. Corroborant ce phénomène, nous avons mis en évidence que le blocage pharmacologique de ces récepteurs induisait aussi avoir des effets antidépresseurs dans ce test, suggérant un rôle des récepteurs GABA_B dans les syndromes dépressifs. Toutefois les processus sous-tendant les propriétés antidépresseurs des antagonistes des récepteurs GABA_B sont à ce jour encore mal connus. Supposant une possible interaction entre les systèmes sérotoninergiques et les récepteurs GABA_B, nous avons étudié les effets des ligands du récepteurs GABA_B sur l'effet antidépresseur de la fluoxétine (un inhibiteur de la recapture de la sérotonine) puis leurs impacts sur la downrégulation des récepteurs sérotoninergiques 5-HT_{1A} dans l'hippocampe induite par le stress chronique. Nous avons observé que les antagonistes GABA_B ne modifiaient pas les propriétés antidépresseurs de la fluoxétine dans le test de la nage forcée, mais bloquaient la downrégulation des récepteurs 5-HT_{1A} induite par un stress chronique. Ces résultats suggèrent un rôle clé du système sérotoninergique dans les propriétés antidépresseurs des antagonistes GABA_B. Inversement, nous avons mis en évidence que la fluoxétine administrée de manière chronique atténuait la réponse hypothermique induite par le baclofen, montrant que le système sérotoninergique participerait aussi à la modulation des fonctions physiologiques liées aux récepteurs GABA_B.

Etant donné que de nombreuses études précliniques et cliniques ont suggéré que les récepteurs GABA_B pourraient moduler les comportements associés aux systèmes de récompenses, nous avons entrepris d'évaluer l'effet de la stimulation des récepteurs GABA_B dans des modèles associés aux comportements addictifs et sur les adaptations moléculaires induites par l'administration aiguë et prolongée de psychostimulants ou de nicotine. Au niveau comportemental, nous avons montré que le GS39783 atténuait l'hyperlocomotion induite par l'administration aiguë de cocaïne, et également la sensibilisation locomotrice à la cocaïne induite par administration répétée de cocaïne. Par ailleurs, nous avons observé que le GS39783 s'opposait à l'établissement d'un conditionnement de place induite par la nicotine. Au niveau moléculaire, le GS39783 réduit l'induction de c-fos dans le noyau accumbens induite par l'administration aiguë de cocaïne et diminue l'activation du CREB et du DARPP-32 provoquée par l'administration chronique de cocaïne. De plus, le GS39783 atténue l'accumulation de Δ fosB dans le noyau accumbens et le striatum dorsal causée par l'administration de cocaïne et de nicotine. Ces observations suggèrent que la stimulation des récepteurs GABA_B par un modulateur allostérique inhibe à la fois la perception des effets renforçants des substances appétitives mais aussi les adaptations moléculaires associées à celles-ci.

Ainsi, ces études nous permettent de conclure que les récepteurs GABA_B pourraient représenter une cible potentielle dans l'élaboration de nouvelles pharmacothérapies des troubles anxieux, de la dépression et des comportements addictifs.

Summary

Although there is much evidence for a role of the inhibitory neurotransmitter γ -aminobutyric acid (GABA) in the pathophysiology of neuropsychiatric disorders, the role of GABA_B receptors in behavioral processes related to these disorders has not yet been fully established. Indeed, further progress in the field has been largely hampered by the lack of appropriate tools. The recent development of new pharmacological and genetic tools offers a novel opportunity to investigate the contribution of GABA_B receptors in anxiety, depression and addiction. Consequently, the studies in the present thesis are focus on addressing a broad hypothesis that GABA_B receptors play a key role in the manifestation of psychiatric disorders. Thus, using recently generated GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice, which lack functional GABA_B receptors, and pharmacological tools; we assessed the role of GABA_B receptors these three neuropsychiatric disorders.

Firstly, we demonstrated that targeted deletion of either of GABA_B receptor subunit induced an exacerbate anxiety in several animal model of anxiety. Indeed, both GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice were more anxious than their wildtype littermates (less time spent in the light; reduced number of transitions) in the light-dark box paradigm. Conversely, we also demonstrated that pharmacological activation, via administration of a novel GABA_B receptor positive modulator GS39783 decreased anxiety in the light-dark box and elevated zero maze tests. Altogether, these data support an involvement of GABA_B receptors in the modulation of anxiety-related behaviors.

Secondly, we also demonstrated that GABA_B receptor might contribute to the modulation of depressive-related behavior. Thus, we showed that genetic inactivation of either of GABA_B receptor subunit induced an increase in the time spent in immobility in the forced swim test, but not in the tail suspension paradigm, suggesting that targeted deletion of either of GABA_B receptor subunit produce an antidepressant-like effect in mice. These behavioral effects are unrelated to alterations in locomotor activity. In confirmation of the genetic data, acute and chronic treatment with CGP56433A, a selective GABA_B receptor antagonist also decreased immobility in the FST, whereas GS39783 did not alter this behavior. In effort to gain a better understanding of processes underlying the antidepressant properties of GABA_B antagonist, we also explored the interaction between GABA_B and serotonergic system. Thus, we demonstrated that pharmacological blockade or genetic inactivation of serotonin transporter affect GABA_B -related function, using baclofen-induced hypothermia. Conversely, we also demonstrated that acute, sub-chronic and chronic treatment with GABA_B ligands affected the expression of 5-HT_{1A} receptor in the hippocampus. Together, these data confirm both the putative involvement of GABA_B receptor in depressive disorder and the strong interaction between 5-HT and GABA_B system.

Finally, the last part of the present thesis addressed the issue of the role of GABA_B receptors in addiction. Indeed, we showed that activation of GABA_B receptor counteract both behavioral and molecular changes associated with a single administration of cocaine. More specifically, both baclofen, a GABA_B receptor agonist, and GS39783 attenuate both hyperactivity and accumbal c-fos induction elicited by a single administration of cocaine. Moreover, we also demonstrated that GS39783 attenuates the acquisition of locomotor sensitization triggered by chronic cocaine administration. GS39783 also differentially attenuated the accumulation of Δ fosB in the CPU, and inhibited CREB and DARPP-32 activation and upregulation in the Nac, suggesting that GABA_B activation counteracted both molecular and behavioral changes triggered by repeated administration of cocaine. Finally, in a nicotine place conditioning paradigm, we showed that repeated treatment with GS39783 inhibits the acquisition of nicotine place preference acquisition. GABA_B positive modulation also inhibited the accumulation of Δ fosB in the NAc, supporting a role for this transcription factor in reinforcing properties of nicotine. Taken altogether, these results show that GABA_B

receptor modulation is effective in attenuating reinforcing properties of drugs of abuse and interferes with drug-induced modulation of several signaling pathways. To conclude, our data support the role of GABA_B receptor in anxiety, depression and addiction and that GABA_B receptor might be considered as one of the most promising therapeutic targets for treating these disorders.

Remerciements

Ce travail a été effectué au centre de recherche du NIBR à Bâle dirigé par le Dr. Graeme Bilbe. Je tiens à lui exprimer ici toute ma reconnaissance pour m'avoir accueilli dans son laboratoire.

Je tiens particulièrement à remercier le Dr. John F. Cryan pour son encadrement, ses conseils et sa disponibilité tout au long de ce travail. Mais aussi, je le remercie pour tout ce qu'il m'a apporté que ce soit sur le plan professionnel que personnel. Finalement, je tiens juste à ajouter que je suis et resterai très fier d'avoir été son premier étudiant en thèse.

Je tiens aussi à exprimer ma gratitude au Pr. Jacques Micheau et au Pr. Robert Jaffard pour m'avoir donné l'opportunité de réaliser ma thèse après mon DESS de psychopharmacologie des processus cognitifs.

Mes remerciements vont également au Dr. Laurence Lanfumey, au Pr. Catherine Belzung, au Pr. Jacques Micheau et au Dr. Georges Di Scala pour le temps consacré à lire et à juger ce travail et pour avoir accepté de siéger à mon jury de thèse. De plus, je les remercie aussi pour les riches discussions scientifiques que j'ai pu avoir avec eux lors de ma soutenance.

Je tiens aussi à remercier toutes les personnes avec qui j'ai pu interagir à Novartis, comme les techniciens, sans qui je n'aurais pas autant appris. Merci Hugo, Merci Christine...Milles mercis aussi à toute l'équipe GABAB chez Novartis, Dr. Klemens Kaupmann, Dr. Wolfgang Froestl, Dr. Sebastien Guery, Dr. David Slattery, Dr. Delphine Dupuis, Dr. Loic Lhuillier (Mon biologiste moléculaire), Laura Jacobson, pour avoir participé, tout comme moi, à cette belle mais triste aventure, qu'est le projet GABAB. Merci à eux pour leur amitié, leur conseil et leur bonne humeur lors des différents meetings, colloques et autre discussion au Fischerstubbe et Cargo. Je remercie aussi tous mes autres collègues et amis de Novartis comme le Dr. Hans Neijt, le Dr. Frédérique Chaperon (ma voisine de bureau), le Dr. Deepack Thakker, le Dr Stéphanie Bissière, le Dr Daniel Hoyer, le Dr. Lucas Lecourtier et Annabelle Millard. Merci aussi à mes ex-collègues et superviseurs de Roche : Dr. Will Spooren, Dr Jean-Luc Moreau, Sean et Carine.

Mes derniers remerciements reviendront à mes amis: les gens de Bâle (Laurent, Ben, Carole, Seb, Anna, Karen, Olivia, Lillette, Tommy); mes colocataires (Sophie et Cédric) et mes amis de Bordeaux. Finalement, je remercie mes parents et celle qui se reconnaîtra pour m'avoir épaulé et supporté le long de cette aventure.

A Paco, Dora et Pierre.....

LIST OF PAPERS.

This thesis is based on the papers listed below:

- Kaupmann, K., Cryan, J.F., Wellendorph, P. **Mombereau, C.** Sansig, G. Klebs, K., Schmutz, M., Froestl, W. van der Putten, H., Mosbacher, J., Bräuner-Osborne, H., Waldmeier, P., and Bettler, B. Specific γ -Hydroxybutyrate (GHB) binding sites but loss of pharmacological effects of GHB in GABA-B(1) receptor deficient mice *Eur. J Neurosci.* 18, 2722-2730, 2003.
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- **Mombereau, C.**, Lhuillier, L., Kaupmann, K. and Cryan, J.F. GABA_B receptor positive modulation blocked reinforcing properties of nicotine and its associated accumbal Δ fosB accumulation. Manuscript in preparation.

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CHAPTER 1: GENERAL INTRODUCTION.

1.1 γ -AMINO BUTYRIC ACID (GABA).

1.1.1 Historical perspective.

GABA is the major inhibitory neurotransmitter in brain. Although the chemical structure of γ -aminobutyric acid (GABA) was first synthesized as far back as 1883 (see (Cooper et al., 2002), GABA was independently identified and reported to be present in the vertebrate brain only in 1950. Indeed, three different groups (Awapara et al., 1950; Roberts and Frankel, 1950; Udenfriend, 1950) discovered a large amounts of GABA in the mammalian brain and suggested that this substance could have some metabolic function. Although subsequently, several groups suspected the existence of a inhibitory neurotransmitter, which was ascribed to an unknown “factor I” (Florey, 1954), the abundance of GABA and its structural analogy with glutamate supported the idea that it seemed to play a role in glutamate metabolism. Thereafter, several key studies demonstrated that GABA could actually function in the inhibition of central neurotransmission.. In 1958, two groups demonstrated that the action of GABA and synaptic inhibition could be quite similar, resulting in a selective increase in membrane Cl^- conductance (Boistel and Fatt, 1958; Kuffler and Edwards, 1958). Although several groups suggested that GABA could be a inhibitory transmitter during the following decade (Hayashi, 1959; Kravitz et al., 1963; Otsuka et al., 1966), GABA had been only been shown to satisfy all the classical criteria of neurotransmitter, in the early 1970s (Krnjevic, 1974; Roberts, 1986a).

Growing interest in GABAergic neurotransmission, during the last four decades, results from evidence of a direct or indirect involvement of the GABAergic system in numerous psychiatric and neurologic disorders; most interestingly in relation to anxiety

disorders. GABA has been shown to be the principal neurotransmitter involved in the action of benzodiazepine drugs (Haefely et al., 1975), historically, the most used class of anxiolytic family. In addition, more recent studies had pointed a role of GABA system in the pathology of mood disorders (Brambilla et al., 2003), drug dependence (Markou et al., 2004) and schizophrenia (Coyle, 2004).

1.1.2 Distribution.

Since its discovery in 1950, it has been shown that GABA is present in high concentration in the mammalian brain. GABAergic neurons in the brain are primarily interneurons, and it has been estimated that 30-40% of all CNS neurons utilize GABA as their primary neurotransmitter (Roberts, 1986b; Hendry et al., 1987). In contrast, GABA seems to be absent or present in only trace amounts in peripheral tissue, such as liver, spleen and heart; or in peripheral nerve tissue such as sciatic nerve, splenic nerve and sympathetic ganglia.

1.1.3 Metabolism, storage and release.

GABA is formed by a closed metabolic pathway known as the GABA shunt (Fig.1.1). The GABA shunt begins with α -ketoglutarate from the Kerbs cycle being changed to the excitatory neurotransmitter glutamate by GABA-transaminase (Blanton et al., 1987).

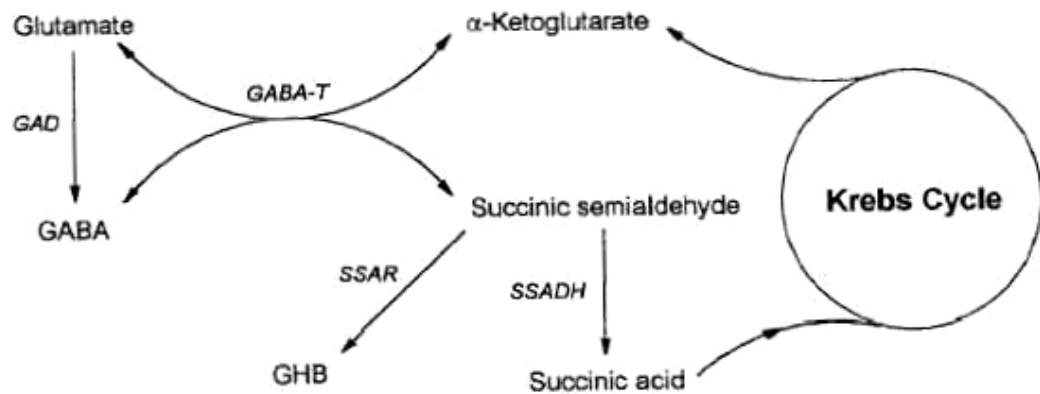


Fig.1.1 GABA metabolism pathway.

GABA-T: GABA transaminase; GAD: Glutamic acid decarboxylase, GHB: γ -hydroxybutyric acid, SSADH: succinic semialdehyde deshydrogenase, SSAR: Succinic semialdehyde reductase.

Fig.1.1 Voies métaboliques de GABA. GABA-T: GABA transaminase; GAD: Glutamic acid decarboxylase, GHB: γ -hydroxybutyric acid, SSADH: succinic semialdehyde deshydrogenase, SSAR: Succinic semialdehyde reductase.

GABA is formed through the decarboxylation of glutamate by glutamic acid decarboxylase (GAD) within neurons (Olsen and DeLorey, 1999). GABA in glial cells can be metabolized to succinic semialdehyde by GABA-T if α -ketoglutarate is available to accept the amino group and thus form glutamate. This creates the closed loop preventing the depletion of GABA. Excess succinic semialdehyde can be oxidized to succinic acid or γ -hydroxybutyric acid (GHB) by succinic semialdehyde deshydrogenase (SSADH). Succinic acid re-enters the Krebs cycle to complete the loop. The rate limiting step in GABA formation is the enzymatic action of GAD. GAD is only found in GABAergic neurons and has two isoforms in most vertebrates, GAD65 and GAD67, named for their molecular weights (in kilodaltons), which derive from two distinct genes (Erlander et al., 1991). GAD will decarboxylates glutamate to form GABA only when it is bound to its cofactor, pyridoxal phosphate (PLP; (Miller and Walters, 1979)). Studies in the rat have shown that GAD65 is usually not associated with PLP while GAD67 is nearly saturated with this cofactor (Kaufman et al., 1991). The amount of

inactive GAD65 and its location at the nerve terminal suggests it is utilized to respond to short-term increases in demand for GABA (Martin and Rinvall, 1993).

Following its synthesis, GABA is stored in synaptic vesicles and its release occurs by the classical Ca^{2+} -dependent mechanism upon depolarization of presynaptic membrane.

1.1.4 GABA receptors subtypes.

Once released into the synaptic cleft, the inhibitory neurotransmitter GABA acts through specific receptors located in both pre-and postsynaptic membranes. In vertebrates , there are two major types of GABA receptors: the ionotropic receptors, including GABA_A receptors and GABA_C receptors and the GABA_B metabotropic receptors(Bormann, 2000).

1.1.4.1 GABA_A receptors.

GABA_A receptors are the most prevalent GABA receptors in the vertebrate brain. They are expressed in the CNS but also in the peripheral nervous system. GABA_A receptors are ionotropic, and mostly postsynaptic. Their activation induces a fast inhibitory postsynaptic activation potential (IPSP, (Eder et al., 2001)).Regarding their structure, they are transmembrane hetero-oligomeric protein composed of five subunits which are organized into a channel. Each subunit comprises for transmembrane domains (TM1-4), a large intracellular loop between TM3 and TM4 containing protein kinase and tyrosine kinase phosphorylation sites and a short C-terminus. By now, seven distinct classes of subunits (α , β , γ , δ , ϵ , π and ρ) have been cloned and several isoform of these subunits were identified (See Fig.2). In the mammalian brain, the major subunit composition of GABA_A receptor is an assembly of one α , two β and two γ subunits (Rudolph et al., 2001). GABA_A receptor activation by GABA allows the chloride ion channel (Cl^-) to open, increasing the conductance of Cl^- (Bormann, 1988). This activation induces an hyperpolarisation of neuronal membranes, reducing the cell excitability.

In terms of pharmacology, GABA_A receptors have a binding site for GABA, as well as sites for agonists, such as muscimol and isoguvacine and competitive antagonists such as bicuculline. In addition, several ligands have been shown to modulate GABA_A receptor activation. Benzodiazepines are allosteric modulators of GABA_A receptors, they increase the probability of channel openings, where barbiturates and neurosteroids increase the period of pore opening. Further, GABA_A receptors present also some bindings sites for picrotoxin (non competitive antagonist) and alcohol (Rudolph et al., 2001).

During the last decade, localization of various binding sites on GABA_A receptor has been investigated. For example, GABA has been shown to bind at the interface of α and β -subunits (Zezula et al., 1996). Benzodiazepines binding site is localized at interface of α and γ -subunits (Skolnick et al., 1997). More recently, genetically engineered mice have added new tools for the dissection of specific pharmacologic function of GABA_A subunits (Rudolph et al., 2001).

Although it is now clear that GABA_A ligands and especially benzodiazepines represent a relevant pharmacotherapy for neuropsychiatric disorders such as anxiety, their associated side-effects, including sedation, muscle-relaxation, and amnesia has led the scientific community to investigate other possible therapeutic targets.

1.1.4.2 GABA_C receptors.

GABA_C receptor structure is relatively analogous to GABA_A receptors. They are also ionotropic receptors, composed of five subunits organized in Cl⁻ channel. In contrast to GABA_A receptors GABA_C receptors can assemble as homoligomers composed exclusively of ρ_{1-3} subunits (See Fig.1.2.). There has been much debate as to whether they represent a novel receptor subunit family distinct from GABA_A receptors (Bormann, 2000), however the current IUPHAR classification feels that it is more appropriate to classify them as part of the

GABA_A superfamily. GABA_C receptors are also characterized by their insensitivity to bicuculline and benzodiazepines. GABA_C receptors are expressed exclusively in retina, spinal cord, superior colliculus and intestinal tract. Thus, their localization limits their relevance as target for the treatment of neuropsychiatric disorders.

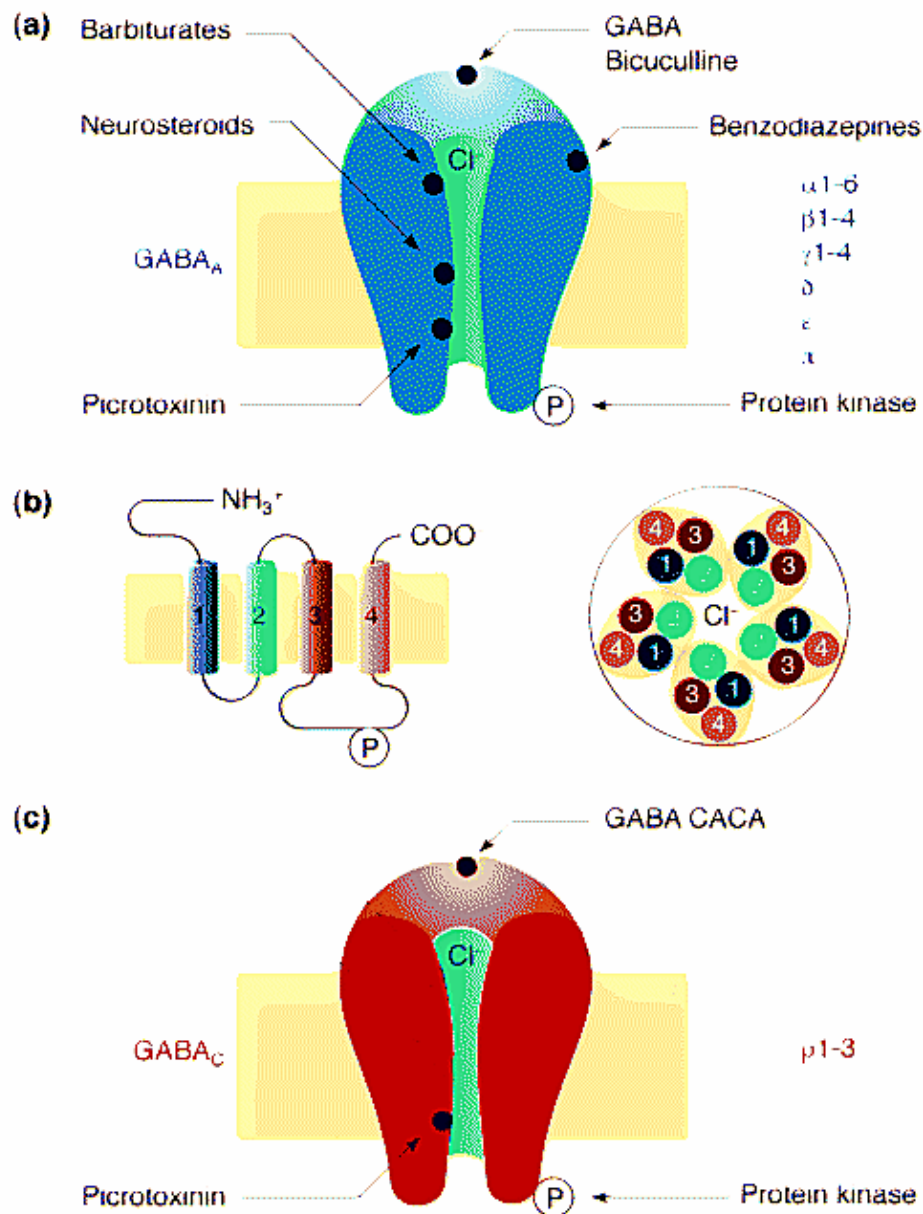


Fig.1.2. GABA_A and GABA_C Receptors

(a) GABA_A receptors and its associated modulatory binding sites. (b) GABA_A receptor subunit structure. Organisation of GABA_A receptor subunits. (c) GABA_C receptors and its associated modulatory binding sites. Adapted from (Bormann, 2000).

Fig.1.2. Les récepteurs GABA_A et GABA_C

(a) Le récepteur GABA_A et ses sites de modulation. (b) La structure des sous-unités des récepteurs GABA_A. Organisation des sous-unités des récepteurs GABA_A. (c) Le récepteur GABA_C et ses sites de modulation.

1.2 GABA_B Receptors

1.2.1 GABA_B receptors structure.

1.2.1.1 General structure.

Initially, GABA_B receptor was identified as a GABA receptor insensitive to the GABA_A receptor antagonist (bicuculline) but sensitive to a GABA analog, baclofen (Bowery et al., 1981). Although a considerable amount of pharmacological tools were developed during the decade subsequent to the discovery of GABA_B receptors (Kerr and Ong, 1995) the cDNAs for GABA_B receptors were not cloned until 17 years later (Kaupmann et al., 1997) a decade after that of GABA_A receptor (Schofield et al., 1987).

Using high-affinity radioligand antagonist, Kaupmann and colleagues isolated two different splice variants of GABA_B receptor, GABA_{B(1a)} and GABA_{B(1b)}, which differ only at their two different N-terminus (Kaupmann et al., 1997). GABA_{B(1a)} and GABA_{B(1b)} receptor splice variants are protein of 960 and 844 amino acids respectively. GABA_{B(1)} recombinant protein are composed of three main regions: the N-terminal extracellular domain (ECD), a region comprising seven transmembrane domains (TMD) and intracellular C-terminal domain (ICD)(Kaupmann et al., 1997). Their molecular structure exhibits some similarities with family 3 G-protein coupled receptors; this family includes metabotropic glutamate receptor, Ca²⁺ sensing, vomeronasal and taste receptors. Surprisingly, in the same study, Kaupmann and collaborators demonstrated that both GABA_{B(1)} proteins exhibited 100 to 150-fold lower binding affinities for agonist compared to native GABA_B receptors. In addition, they also demonstrated that GABA_{B(1)} protein failed to couple to their effector systems. Ultimately,

GABA_{B(1)} proteins have shown to be retained in the endoplasmatic reticulum and not transported to the membrane (Couve et al., 1998). Taken together, these data suggested that GABA_{B(1)} subunit may need a missing factor which traffics it to the membrane and consequently renders them functional.

One year after the discovery of GABA_{B(1)} subunit, six different groups identified a novel subunit, the GABA_{B(2)} receptor subunit (Jones et al., 1998; Kaupmann et al., 1998a; White et al., 1998; Kuner et al., 1999; Martin et al., 1999; Ng et al., 1999). This second GABA_B receptor subunit exhibits many of structural features of GABA_{B(1)}, such as high molecular weight, seven transmembrane domain and a long extracellular chain at the N terminus. Furthermore, GABA_{B(2)} subunit shows 35% of homology and 54% similarity to GABA_{B(1)} receptor subunit. In contrast to GABA_{B(1)} subunit, GABA_{B(2)} is expressed at the surface of plasmatic membrane. Interestingly, this GABA_{B(2)} receptor was shown to be coexpressed with GABA_{B(1)} subunit and transport to the plasma membrane.

1.2.1.2 Heterodimerization : A prerequisite for GABA_B receptors function?

As stated previously, GABA_{B(2)} receptor subunit has been shown to be coexpressed with GABA_{B(1)} receptor subunit. However, the six research groups which contributed to GABA_{B(2)} discovery, suggested that this subunit may play a key role in GABA_B function. Indeed, the co-expression of GABA_{B(1)} and GABA_{B(2)} receptor subunit results in increase in agonistic potency compared to GABA_{B(1)} alone (Kaupmann et al., 1998a). Further, recombinant heteromeric GABA_{B(1,2)} has been shown to couple to all effector system associated to native GABA_B receptor, such as adenylate cyclase, K⁺ channels and Ca²⁺ channels. Moreover, the GABA_{B(2)} receptor subunit facilitates proper trafficking to the cell membrane. Indeed, GABA_B receptor trafficking depends on interaction between GABA_{B(1)} and GABA_{B(2)} at the C-terminal coil-coil domain by masking the retention motif RXRR present at the C terminus of GABA_{B(1)} receptor subunit (Margeta-Mitrovic et al., 2000;

Pagano et al., 2001). However, an exclusive role of this C-terminal coil-coil domain in the heterodimerization process of GABA_{B(1)} and GABA_{B(2)} receptor subunits has not been determined.

Taken together, these data led to the supposition that heterodimerization may be a prerequisite for GABA_B receptors function and offer a putative canvas for GABA_B receptor activation (See Fig.1.3.).

It has been shown that GABA or GABA_B receptor agonists binds to a component of GABA_{B(1)} subunit. Indeed, the ligand site is located within the ECD of the GABA_{B(1)} (Malitschek et al., 1999), named the Venus flytrap modules (VFTMS) (Galvez et al., 1999). Although GABA_{B(2)} also possesses a similar VFTMS, it does not bind any ligands (Kniazeff et al., 2002). The binding of GABA_B receptor ligand to GABA_{B(1)} receptor subunit thus produces a conformational change in GABA_B receptor subunit protein that allows GABA_{B(2)} subunit to engage and activate G protein –coupled signaling system (Marshall et al., 1999)

1.2.1.3 GABA_B receptors isoforms.

Originally, Kaupmann and collaborators described only two different isoforms of the GABA_{B(1)} receptor subunit, but subsequently several GABA_{B(1)} isoforms were identified. To date, nine different isoforms were isolated : GABA_{B(1a)}, GABA_{B(1b)}, GABA_{B(1c)}, GABA_{B(1c-a)}, GABA_{B(1c-b)}, GABA_{B(1d)}, GABA_{B(1e)}, GABA_{B(1f)} and GABA_{B(1g)} (Bettler et al., 2004). These isoforms differ by their ECD (presence or absence of sushi's motifs), the presence or the absence of ER-retention signal, their transmembrane domain and their coiled-coil domain. In addition, certain of these variants are not conserved from the human to the mice (ie. GABA_{B(1c)} or GABA_{B(1c-a)}); and certain isoforms are absent in both human and mouse (ie, GABA_{B(1d)}). However, GABA_{B(1a)} and GABA_{B(1b)} appears to be the major isoform in the brain (Bettler et al., 2004).

These two isoforms have been shown to be conserved in several studies :human, rat, mouse, chicken, frog and zebrafish. As previously mentioned, GABA_{B(1a)} and GABA_{B(1b)} differs in their ECD (Kaupmann et al., 1997). Thus, the first 147 aminoacids of the mature GABA_{B(1a)} subunit are replaced by 18 amino acids in the GABA_{B(1b)} isoform. More specifically, GABA_{B(1b)} subunit does not exhibit repeated sushi motif sequences which exist in the GABA_{B(1a)} receptor subunit (Bettler et al., 1998; Hawrot et al., 1998). Although repeated sushi' motif have been shown to be involved in protein-protein, its role in GABA_{B(1a)} receptor subunit remain elusive.

In addition these two isoforms have been shown to exhibits differences in their temporal and spatial expression patterns. In a elegant study, Fritschy and collaborators have demonstrated that GABA_{B(1a)} receptor subunits are the predominating isoform during early development, whereas GABA_{B(1b)} receptor subunits are generally more expressed in the adult brain (Fritschy et al., 1999). Regarding their respective distribution, it appears that GABA_{B(1a)} receptor subunits would be more located pre-synaptically whereas GABA_{B(1b)} receptor subunits would be more post-synaptic. Indeed, in the cerebellum, the GABA_{B(1a)} receptor subunit is mostly confined to the granular cell and molecular layer whereas GABA_{B(1b)} transcripts are abundant in Purkinje cells that are postsynaptic (Kaupmann et al., 1998b). However, there is no evidence for this pre-post synaptic distinction in other structures to date.

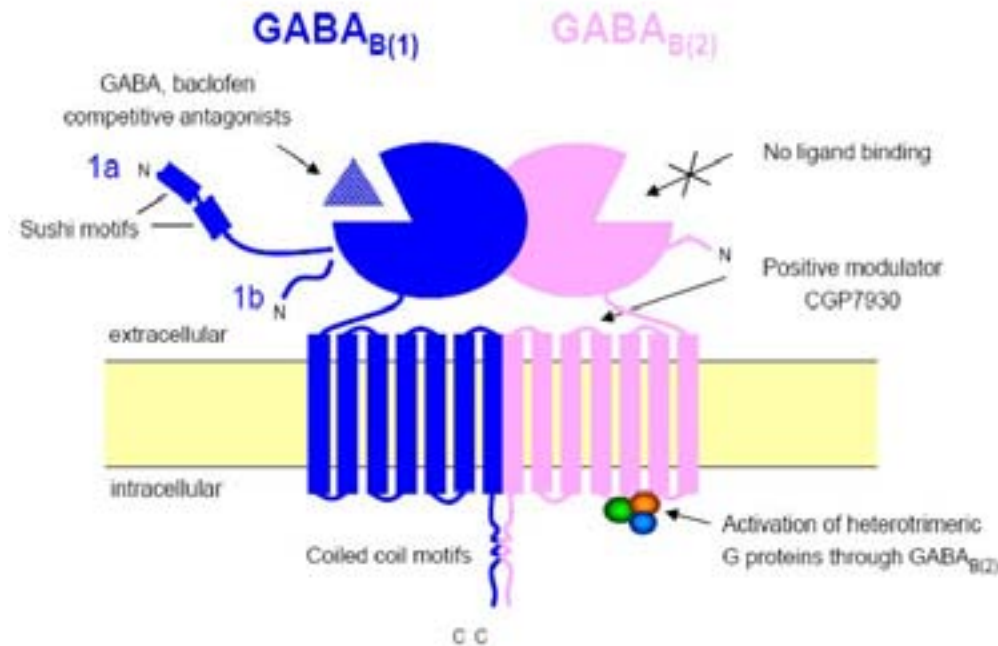


Fig.1.3. The native GABA_B receptor.

GABA_B receptors is an heterodimer composed of two subunits., GABA_{B(1)} and GABA_{B(2)}. Each subunit have N-terminal extracellular domain (ECD), a region comprising seven transmembrane domains (TMD) and intracellular C-terminal domain. GABA_B receptors ligands bind to the GABA_{B(1)} subunit only., inducing a conformational change. This latter process allows GABA_{B(2)} receptor subunit to initiate G protein activation is facilitated. In the brain two predominant GABA_{B(1)} isoforms (1a, 1b) are expressed which differ only at their very N-terminal sequence. GABA_{B(1a)} discriminates from GABA_{B(1b)} by the presence of two ‘Sushi domain’ motifs. The binding site of the positive allosteric modulator CGP7930 has recently been localized to the transmembrane region of GABA_{B(2)} (Binet et al., 2004). Adapted from (Cryan and Kaupman, 2005).

Fig.1.2 le récepteurs GABA_B.

Le récepteur GABA_B est un hétérodimère composé de deux sous-unités. Chacune de ces deux sous-unités possèdent un domaine extracellulaire, une région transmembranaire et un domaine intracellulaire. Les ligands se fixent à la sous-unité GABA_{B(1)} induisant un changement dans la conformation du récepteur autorisant la sous-unité GABA_{B(2)} à initier l’activation des protéine G. Dans le cerveau, les isoforms prédominantes sont GABA_{B(1a)} et GABA_{B(1b)}.

1.2.2 GABA_B receptors distribution and localization.

The distribution of GABA_B receptors in the vertebrate brain has been described using in situ hybridization, immunohistochemistry and autoradiography. In the rat, GABA_{B(1)} receptor mRNA is expressed in most neuronal cell populations with the highest levels in the hippocampus, thalamic nuclei and cerebellum (Bischoff et al., 1999). Moderate levels of GABA_{B(1)} receptor mRNA are found in the olfactory bulb, amygdala, pallidum, septum, hypothalamus and preoptic area (Bischoff et al., 1999). Very low levels of GABA_{B(1)} receptor mRNA are expressed in the molecular layer of the cerebellum and in glial cells (Bischoff et al., 1999). Interestingly, GABA_B receptor mRNA have been shown to be very abundant in the raphé nuclei, including median and dorsal raphé nuclei. In dorsal raphé nucleus (DRN), GABA_{B(1)} transcripts have been shown to be colocalized with the serotonin transporter mRNA: 85% of GABA_{B(1)} labeled cells exhibited serotonin transporter transcript. In contrast; only 5% of GABA_{B(1)} labeled cells expressed GAD mRNA. Thus, it appears that GABA_{B(1)} transcript may be located more on serotonergic neurons than GABAergic interneurons in this structure (Serrats et al., 2003). Furthermore, the distribution pattern of GABA_{B(1)} transcript and GABA_B receptor binding sites overlap in the majority of brain structure (Bischoff et al., 1999).

Regarding GABA_{B(2)} subunit, its transcripts are abundant in the piriform cortex, hippocampus and habenula. The regional distribution of both GABA_{B(1)} and GABA_{B(2)} is mostly similar, suggesting that heterodimerization is crucial for signaling. However, in some brain areas such as caudate putamen, GABA_{B(2)} transcript are not detectable, even though GABA_{B(1)} transcripts are expressed (Bischoff et al., 1999).

However, the lack of GABA_{B(2)} mRNA expression in the striatum/caudate putamen region is not in agreement with immunohistochemical data which shows high levels of

GABA_{B(2)} protein expression in that region (Kaupmann et al., 1998a; Durkin et al., 1999; Clark et al., 2000; Berthele et al., 2001). High levels of GABA_{B(1)} and GABA_{B(2)} protein expression were also found in the neocortex, hippocampus, thalamus, cerebellum and habenula (Charles et al., 2001).

Autoradiography in rat brains has shown that generally, GABA_B receptors have lower expression levels than GABA_A receptors with exceptions in a few distinct brain regions (Bowery et al., 1987; Chu et al., 1990). In one study, GABA_B receptors in the rat were at higher levels than GABA_A receptors in the globus pallidus, lateral posterior thalamus, lateral amygdaloid nucleus, habenula, and the molecular layer of the cerebellum (Bowery et al., 1987). Another other study found GABA_A receptors had higher numbers of binding sites than GABA_B receptors in nearly every brain region (Chu et al., 1990). Thus, GABA_B receptors are widespread in the rat brain, but the ratio between GABA_A and GABA_B receptors may vary between brain regions.

At the cellular level, electron microscopy studies have demonstrated that GABA_{B(1)} protein is abundant in the cytoplasm of neurons (Sloviter et al., 1999). This observation confirms that GABA_{B(2)} is the limiting factor for heterodimer expression at cell surface. In addition, there is no clear evidence for a presence of GABA_{B(1)} protein in the absence of GABA_{B(2)} receptor subunit (Charles et al., 2001). Furthermore, numerous electrophysiological studies demonstrated that GABA_B receptor are located pre- and post-synaptically (Dutar and Nicoll, 1988; Potier and Dutar, 1993). More recently, electron microscopy studies confirmed colocalization of GABA_{B(1)} and GABA_{B(2)} protein at both synaptic and extrasynaptic sites (Kaupmann et al., 1998a; Fritschy et al., 1999; Kulik et al., 2002); see figure.1.4).

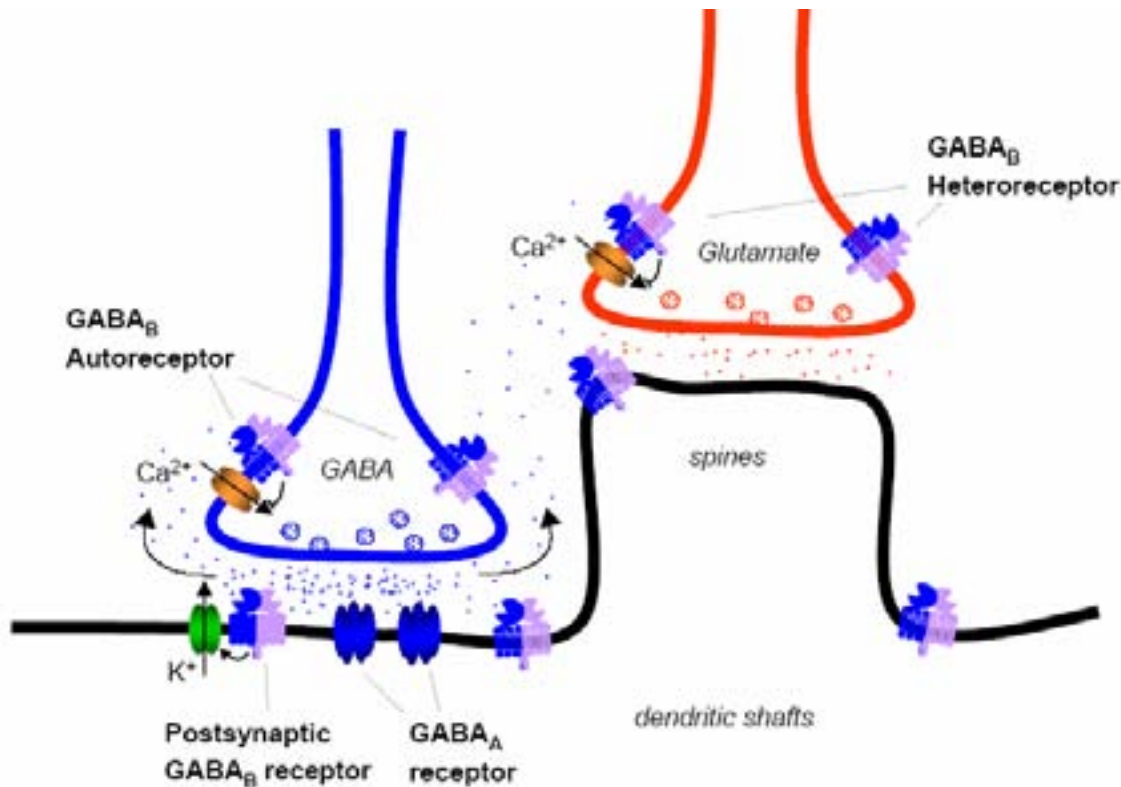


Fig.1.4. Cellular localization of GABA_B receptors in the hippocampus .

GABA_B receptors are located both pre- and postsynaptically as well as on extrasynaptic membranes. Presynaptic GABA_B autoreceptors located on GABAergic terminals inhibit the release of GABA whereas GABA_B heteroreceptors inhibit the release of several other neurotransmitters (e.g. glutamate) as well as of bioactive peptides. Postsynaptic GABA_B receptors activate potassium channels and induce slow inhibitory postsynaptic potentials (IPSPs), the fast component of which is mediated through GABA_A receptors. Extrasynaptic receptors are likely activated via GABA spill-over from adjacent synapses. Adapted from (Cryan and Kaupman, 2004).

Fig 1.4. Localisation cellulaire des récepteurs GABA_B dans l'hippocampe.

Les récepteurs GABA_B sont à la fois pré et post synaptique. Les récepteurs GABA_B présynaptique localisés sur les cellules GABAergique inhibent la libération de GABA alors que les hétérorécepteurs inhibent la libération d'autres neurotransmetteurs. Les récepteurs post-synaptiques, quant à eux, active les canaux potassiques et induisent une IPSP.

1.2.3 GABA_B receptor effector mechanism.

Downstream effects of GABA_B receptor activation are mediated by G-proteins, although G protein independent effects have been described as well (Harrison, 1990). Initially, evidence for a coupling to G proteins came from studies showing binding that at GABA_B receptors was inhibited by GTP analogs (Hill and Bowery, 1981; Asano et al., 1985).

Using various techniques, several groups showed that GABA_B are mainly couple to G_iα – and G_oα-type G proteins (Asano and Ogasawara, 1986; Morishita et al., 1990; Campbell et al., 1993; Menon-Johansson et al., 1993; Greif et al., 2000). These G proteins then interact with Ca²⁺ and K⁺ channels as well as adenylyl cyclase to elicit specific intracellular responses to agonist binding.

1.2.3.1 Coupling to Ca²⁺ channels.

Presynaptic GABA_B receptors can be divided into autoreceptors or heteroreceptors depending on whether or not they control GABA release or a different neurotransmitter (Bettler et al., 2004). GABA_B receptors inhibit neurotransmitter release by blocking Ca²⁺ influx through voltage dependent Ca²⁺ channels via the Gβγ subunits of the G-protein complex (Dascal, 2001; Zamponi, 2001). Ca²⁺ channels of both N- and P/Q-type have been implicated in presynaptic neurotransmitter release (Wu and Saggau, 1997), and inhibition of both of these types of channels by GABA_B receptors has been demonstrated (Menon-Johansson et al., 1993; Mintz and Bean, 1993; Amico et al., 1995; Herlitze et al., 1996; Ikeda, 1996; Poncer et al., 1997; Takahashi et al., 1998; Shen and Slaughter, 1999). This inhibition is voltage-dependent and can be overcome by a high frequency action potentials (Herlitze et al., 1996; Ikeda, 1996) (Brody and Yue, 2000). In addition, both L- and T-type Ca²⁺ channels can either be inhibited or facilitated by GABA_B receptors (Scott and Dolphin, 1986; Scott et al., 1990; Crunelli and Leresche, 1991; Matsushima et al., 1993) dependent on the input site. GABA_B receptors have also been shown to inhibit postsynaptic N- and P/Q-type Ca²⁺ channels in the rat supraoptic nucleus (Harayama et al., 1998).

1.2.3.2 Coupling to K⁺ channels.

Postsynaptically, GABA_B receptors activate inwardly rectifying K⁺ channels (GIRK), via the Gβγ subunits, which creates a slow inhibitory postsynaptic current (Newberry and Nicoll, 1985; Luscher et al., 1997). This IPSP is distinguishable from the faster IPSP of the

GABA_A receptor because of its longer latent period and shorter decay time (Lacaille, 1991; Otis et al., 1993). These IPSCs are stimulated by baclofen, can be inhibited by the GIRK channel blocker barium or GABA_B receptor antagonists and display an inhibitory potential of similar magnitude to the K⁺ equilibrium potential (Lacaille, 1991) (McCormick, 1989; Thompson and Gahwiler, 1992; Pitler and Alger, 1994). There is also evidence that GABA_B receptors may act through K⁺ channels other than GIRKs, such as fast inactivating, voltage-gated K⁺ channels (Saint et al., 1990) and Ca²⁺-sensitive K⁺ channels (Blaxter et al., 1986; Gerber and Gahwiler, 1994). In addition, GABA_B receptors also activate presynaptic K⁺ channels (Thompson and Gahwiler, 1992), although they are likely made up of different subunits than the postsynaptic channels (Luscher et al., 1997).

1.2.3.3 Coupling to adenylyl cyclase.

GABA_B receptors also modulate postsynaptic receptor activity via adenylyl cyclase. There are nine known isoforms of adenylyl cyclase and all of them are expressed in the brain (Simonds, 1999). GABA_B receptors have been shown to both inhibit and stimulate cAMP formation and this is dependent upon the specific G-protein as well as the type of adenylyl cyclase present in the neuron (Bowery et al., 2002; Calver et al., 2002). Adenylyl cyclase types I, III, V and VI are inhibited by G_iα- and G_oα-type proteins, the predominant targets of GABA_B receptors (Bettler et al., 2004). GABA_B receptors can also stimulate adenylyl cyclase types II, IV and VII via Gβγ proteins when G_sα-type proteins from another G protein coupled receptor (GPCR) are activated by norepinephrine, isoprenaline, histamine or vasoactive intestinal peptide (Tang and Gilman, 1991; Simonds, 1999; Bettler et al., 2004). The results of in vitro studies have been confirmed using in vivo microdialysis in rats (Hashimoto and Kuriyama, 1997). GABA_B receptors have been shown to modulate the activity of protein kinase A (PKA). PKA targets many ion channels, and K⁺ channel activation is reduced when GABA_B receptors modulate PKA formation by inhibiting cAMP formation (Gerber and

Gahwiler, 1994). PKA activity can also be reduced by GABA_B receptors in presynaptic neurons which prevents neurotransmitter release (Kubota et al., 2003). Cross-talk also occurs with protein kinase C, but the mechanism is unknown (Kubota et al., 2003).

1.2.3.4 Other Effectors

In addition to their conventional effector mechanism, it was also postulated that GABA_B receptors interact with several proteins. Indeed, three laboratories demonstrated that the coiled coil domain of GABA_{B(1)} receptor subunit interacts with transcriptional factors from ATF/CREB family: ATF4 and ATF_x (Nehring et al., 2000; White et al., 2000). It appears that GABA_B receptors and ATF4 are colocalized in the soma and dendrites of cultured neurons and in retinal cells. Further, GABA_B receptor activation induces an increase in ATF4 transcriptional activity. Interestingly, GABA_B agonists has also been shown to both stimulate (Ito et al., 1995) and inhibit (Barthel et al., 1996) transcription via CREB pathways.

1.2.4 Pharmacology of GABA_B receptors.

1.2.4.1 GABA_B receptors agonists.

β-p-chlorophenyl-GABA, named baclofen, is the prototypical GABA_B receptor agonist. It was synthesized first in 1962 and introduced to the market in ten years later (Bettler et al., 2004) for the treatment of spasticity. Although it has been widely used as pharmacological tool in elucidating the role of GABA_B receptor in several disorders including epilepsy, cognition, pain, its associated side-effects, including sedation and hypothermia, limit its relevance in the context of behavioural pharmacology. Its activity is stereospecific with l-baclofen approximately 3-5 times more potent than the racemic mixture in the rat (Bowery et al., 1983; Bowery et al., 2002). Ten years after its discovery, several groups initiated synthesis of new generation of GABA_B receptor agonist, including CGP 35024 (Froestl et al., 1995). This generation of agonist appears to be 5-7 fold more potent than the active form of baclofen

(Froestl and Mickel, 1997). These ligands served also for the development of radioligands such as CGP27492. Ultimately, a third generation of GABA_B receptor agonist, including CGP44532, was developed in the 1990s.

1.2.4.2 GABA_B receptors antagonists.

The first described GABA_B receptor antagonists were phaclofen, saclofen and 2-hydroxysaclofen in the late 1980s (Kerr et al., 1987; Kerr et al., 1988). These compounds were instrumental in characterizing the GABA_B receptor despite the requirement of doses in the high micromolar range to antagonize baclofen induced hyperpolarizations (Dutar and Nicoll, 1988; Karlsson et al., 1988). The next advance in antagonist development was the creation of compounds that cross the blood-brain barrier after intraperitoneal (CGP35348) (Olpe et al., 1990) or oral (CGP36742) administration (Olpe et al., 1993). The latest generation of GABA_B receptor antagonist, including CGP56433A, in the late 1990s. These ligands now reached nanomolar affinities at GABA_B receptor (Froestl and Mickel, 1997).

1.2.4.3 GABA_B receptors and γ -hydroxy butyric acid (GHB).

γ -hydroxy butyric acid (GHB) is a short-chain fatty acid derived metabolically from GABA (see Fig. 1.1). However, widespread interest in this compound has arisen only in the past 5-10 years, primarily as a result of the emergence of GHB as a major recreational drug and public health problem. Indeed, GHB is currently one of the most frequently used agents for pharmacological-assisted sexual assault. Its administration induces disinhibition, muscle relaxation and lasting anterograde amnesia in the victim. In addition, GHB is also present at micromolar concentration in the brain where high-affinity [³H]GHB binding-sites are located (Bernasconi et al., 1999). GHB is also used medically in the treatment of narcolepsy (Black and Guilleminault, 2001).

Although, there is large body of evidence that GHB may act via an independent GHB-specific receptor site in the brain (Maitre, 1997; Bischoff et al., 1999), it has also been suggested that GABA_B receptors could mediate at least some effects of exogenous GHB. Indeed, GHB has been shown to bind to native and recombinant GABA_B receptors, although with significantly lower affinity than its cognate high-affinity [³H]GHB binding-sites in the brain (Lingenhoehl et al., 1999). In addition, several studies reported that GABA_B receptor antagonists could block GHB-induced effects. For example, CGP35348, a GABA_B receptor antagonist, blocks the effect of GHB and baclofen on locomotor activity and dopamine level in forebrain (Nissbrandt and Engberg, 1996). Together, these data suggested that the involvement of GABA_B receptor in GHB-mediated function remain elusive.

1.2.5 Novel pharmacological and genetic tools.

1.2.5.1 GABA_B receptors positive modulator.

Over the years, GABA_B receptor agonists have been extensively used to assess the role of GABA_B receptors in several pathologies. Nevertheless, as mentioned previously, baclofen exhibited a numerous number of side-effects. Given the above considerations a new strategy to modulate GABA_B receptor function was initiated. Indeed, allosteric modulators of GPCRs have become a major research topic due to their ability to affect a receptor's response to the endogenous agonist (Bettler et al., 2004). Recently, three synthetic allosteric modulators of GABA_B receptors have been described (Urwyler et al., 2001; Kerr et al., 2002; Urwyler et al., 2003). Application of GABA_B receptor positive modulators in the presence of an agonist shifts the concentration-response curve to the left, as the modulators increase the potency of GABA (Urwyler et al., 2001; Kerr et al., 2002; Urwyler et al., 2003). These modulators (CGP7930, CGP13501, GS39783) enhance both the potency and the maximal efficacy of GABA at GABA_B receptors in both native and recombinant (Urwyler et al., 2001; Kerr et al., 2002; Onali et al., 2003; Urwyler et al., 2003). All of these compounds are

hydrophobic, suggesting that they interact with the GABA_B receptors in the TMD, a hypothesis that has recently been verified for CGP7930 (Binet et al., 2004). Allosteric positive modulation of metabotropic receptors is a recently identified phenomena, providing novel means for the pharmacological manipulation of G-protein-coupled receptors acting at a site apart from the orthosteric binding region of the receptor protein (Soudijn et al., 2002). Such properties suggest that allosteric modulators may offer a number of potential pharmacological improvements over the use of conventional agonists as has been demonstrated for modulators acting at ligand-gated ion channels (Costa, 1989). In the case of GABA_A receptors, such modulation has been therapeutically utilized with the benzodiazepines, which amplify the action of the endogenous neurotransmitter GABA. Therefore, we hypothesized that GABA_B receptor positive modulators will be superior drugs, devoid of the side effect profile associated with full agonists such as baclofen.

1.2.5.2 GABA_{B(1)} Knock-out mice.

Recently, three different groups generated mice lacking GABA_{B(1)} receptor subunit (Prosser et al., 2001; Schuler et al., 2001; Queva et al., 2003). Interestingly, these mice exhibit a strong downregulation of GABA_{B(2)} subunit confirming that the expression of this subunit is intricately dependant to the presence of GABA_{B(1)} receptor subunit. Furthermore, these mice were generated on two different genetic backgrounds. Schuler and collaborators used mouse on a BALB/c genetic background while the others groups used a 129Sv/J or a C57BL/6. Although, mice generated on BALB/c background are viable, those on other genetic backgrounds die within 3-4 weeks after birth, limiting their utility in the context of behavioural analysis in adult animals.

Regarding their phenotype, Schuler and collaborators have shown that targeted deletion of GABA_{B(1)} receptor induced spontaneous seizures, hyperalgesia and memory impairment in mice. In addition, they also demonstrated that baclofen, the prototypical

GABA_B receptor agonist, failed to induce its typical muscle relaxant and hypothermic effects in GABA_{B(1)}^{-/-} mice. In line with the behavioural data, this group also demonstrated that GABA_{B(1)}^{-/-} mice exhibited a loss of all biochemical and electrophysiological GABA_B receptor responses. Taken together, these data lead to suggest that GABA_{B(1)} receptor subunit is essential for GABA_B receptor function and that heterodimerization is clearly a prerequisite for GABA_B receptor function.

1.2.5.3 GABA_{B(2)} Knock-out mice.

To date, only one group has generated mice with targeted deletion of GABA_{B(2)} receptor subunit (Gassmann et al., 2004). The original goal of this study was to assess the role of GABA_{B(2)} receptor subunit in brain and also to clarify whether GABA_{B(1)} receptor subunit can participate in functional GABA_B receptor in the absence of GABA_{B(2)} subunit. This group generated the mice using BALB/c genetic background in accordance to previous studies showing reduction of viability in other strain after targeted deletion of GABA_{B(1)} subunit (Prosser et al., 2001; Schuler et al., 2001; Queva et al., 2003). In line with phenotype observed in GABA_{B(1)}^{-/-} mice, GABA_{B(2)} receptor subunit deficient mice exhibit also spontaneous seizures, hyperalgesia and memory impairment. In addition, Gassmann and collaborator observed a strong downregulation of GABA_{B(1)} receptor subunit protein in these mice. In contrast to GABA_{B(1)}^{-/-} mice, mice lacking GABA_{B(2)} receptor subunit exhibit atypical electrophysiological GABA_B-receptor mediated responses in hippocampal slices. Furthermore, the genetic ablation of GABA_{B(2)} subunit induce a relocation of GABA_{B(1)} receptor subunit protein from the distal neuronal sites to the soma and proximal dendrites compared to wild-type animals. Thus, it appears that GABA_{B(2)} receptor subunit is essential for receptor localization. However, it is conceivable, regarding atypical electrophysiological response observed in these mice, that GABA_{B(1)} receptor subunit could be functional in neurons that naturally lack GABA_{B(2)} receptor subunit. Nevertheless, the recent development

of transgenic mice in which the endogenous GABA_{B(2)} gene has been mutated in order to express a C-terminally truncated version of protein contradict this theory (Thuault et al., 2004). Indeed, both pre- and post-synaptic GABA_B functions are abolished in these mice. Therefore, GABA_{B(1)} receptor subunit does not reach to the cell surface in these mice. To conclude, further studies are required in order to understand the exact role of each GABA_B receptor subunits in GABA_B function and to confirm or not a putative GABA_B receptor function in neuron lacking naturally GABA_{B(2)} receptor subunit.

1.3 Involvement of GABA_B receptors in neuropsychiatric disorders.

1.3.1 Role of GABA_B receptors in anxiety.

1.3.1.1 Anxiety disorders..

Anxiety is a common human emotional reaction that occurs in response to a threatening situation. At mild level anxiety is considered “normal” and resulting in a multiplicity of adaptative changes, including increase of heart-rate, blood pressure or arousing states. However, anxiety is considered pathological when it interferes with every day life, or when it becomes persistent, excessive or inappropriately triggered by little or no external stressful stimuli. To date, the diagnostic and statistical manual of mental disorders- Fourth edition (DSM-IV) classification of anxiety describes several forms of anxiety disorders, which currently include: generalized anxiety disorders, obsessive-compulsive disorder, phobias, panic disorder, and post traumatic disorder (American Psychiatric Association.). Each type of anxiety disorder exhibits a unique combination of symptoms that in some cases overlap (see Table 1). Together, these disorders affect over 20 % of the population at some point in their life time, with an annual estimated cost of \$44 billion in the United States (Greenberg et al., 1999). A recent pan-European study demonstrated that anxiety disorders are

the most prevalent medical disorder across E.U. members states (Andlin-Sobocki and Wittchen, 2005).

| Disorder | Symptoms | Lifetime prevalence % | Treatments. |
|---------------------------------------|--|------------------------------|-----------------------------------|
| Generalized anxiety disorders | Excessive anxiety and worry, a difficulty in controlling the worry, sleep disorder, hyperarousal. | 5 | Benzodiazepines, SSRIs, Buspirone |
| Panic disorder | Occurrence of spontaneous panic attacks, presence of anticipatory anxiety and the presence of phobic avoidance. | 3 | SSRIs, benzodiazepines |
| Post-traumatic stress disorder | Recurrent episodes of inappropriate fear resulting of a initial trauma. The traumatic event is persistently reexperienced. Sleep disorders. Irritability. | 3 | SSRIs |
| Social phobia | Marked and persistent fear of one or more social or performances situation. Marked avoidance of these situation interfering with life. | 13 | SSRIs, benzodiazepines |
| Specific phobia | Specific aversion to an element (animals, blood...) | 11 | Mainly behavioural therapy. |
| Obsessive-compulsive disorder | Recurrent obsessions and compulsions: Obsession are persistent, intrusive or inappropriate thoughts that cause anxiety. Compulsion are repetitive acts that the sufferer feels driven to perform to cope with anxiety. | 2 | SSRIs |

Table.1. Classification of anxiety disorders, their prevalence and commonly used treatments. Adapted from (Barlow, 2001)

Tableau.1. Classificatio des troubles anxieux, leur prévalence et leurs traitements.

To date, barbiturates, benzodiazepines, many classes of antidepressants and 5-HT_{1A} receptor agonist have been used as anxiolytics. However, benzodiazepines and selective serotonin reuptake inhibitor (SSRIs) are considered first line treatments for anxiety disorder. Benzodiazepines are shown to be effective in generalized anxiety disorders, social phobia and panic disorders (See Table, 2), whereas SSRIs, including fluoxetine, paroxetine, sertraline, fluvoxamine and citalopram, appears to be more effective in the majority of anxiety disorders. It is important to note that these treatments differ in their onsets. Indeed, benzodiazepines have a rapid onset of action, consequently they are mainly used to treat acute anxiety episode or panic attack. Nevertheless, many factors limit their use for chronic anxiety such as dependence, alcohol interactions, cognitive impairment and sedation (Nemeroff, 2003). Concerning the SSRIs, it has been shown that they have slow onset of action 2 to 8 weeks before benefit may be noticed (Nemeroff, 2003). However, several groups reported that SSRIs may be anxiogenic during the early phase of treatment (Gorman et al., 1987). Currently, the combination of both families of drug seems to be the most effective treatment for panic disorders or social phobia. It has to be noted that buspirone, a partial 5-HT_{1A} receptor agonist, is also currently used in certain anxiety disorders, suggesting that serotonergic might be involved in these pathologies. Although, this strategy still remains effective, side-effects associated with these families, including sedation, tolerance, cognitive impairment for benzodiazepines, sexual dysfunction for SSRIs, has propelled efforts in the scientific community to explore extensively the neurophysiology of anxiety disorder, in attempt to develop new agents.

1.3.1.2 Modeling anxiety in animals.

Given the heterogeneity of symptoms and the multiplicity of anxiety disorders, it appears difficult to recapitulate all of them in animals and particularly in rodents. Nevertheless, several DSM-IV criteria have been successfully modeled in rodents (Rodgers

et al., 1997; Belzung and Griebel, 2001; Cryan and Holmes, 2005). For example, the avoidance of places from which escape, observed in agoraphobia, could be observed in certain rodents model of anxiety. Separation anxiety could be modeled measuring ultrasonic vocalizations in pups separated from their mother (Miczek et al., 1995). However, it is essential not too anthropomorphize emotional human behaviours to mice because “Aberrant behaviours symptomatic of human mental illness, therefore, most of pathological behaviours observed in human can not occur in a recognizable form in rodents”(Crawley, 2000). Indeed, some symptoms of schizophrenia such as hallucination or delusion or some symptoms of depression such as recurrent thoughts of death will be impossible to observe in rodents. Consequently, several authors have proposed criteria for evaluating whether paradigm has validity as a model of psychiatric disease. McKinney and Bunney suggested four major criteria to evaluate animal model of depression, but these criteria are also valid to the others neuropsychiatric disorders (McKinney and Bunney, 1969):

- 1) It has to be “reasonably” analogous to the human disorder in its manifestation or symptomatology.
- 2) Behavioural change observed can be objectively monitored.
- 3) The pharmacological treatments effective in the model have to be similar than observed in humans.
- 4) The system should be reproducible between investigator.

Other groups would prefer three different criteria including: “Predictive validity“ allied with the second criterion proposed by MacKinney; “Face validity”, similar to the first criterion proposed above; “Construct validity”, related to similarities of neurobiology and etiologically between the model and human disorder (Willner and Mitchell, 2002). Regardless

of the differences between these proposals, it appears a real difficulty to satisfy all this criterion, but they provide a useful tool to modeling neuropsychiatric disorders. One pragmatic proposal by Geyer and Markou is that the only criteria that are necessary and sufficient for *initial* use of an animal model, are that the paradigm has strong predictive validity, and that the behavioural readout be reliable and robust in the same laboratory and between laboratories (Geyer and Markou, 1995; Geyer and Markou, 2000). Nevertheless, the term predictive validity does not have not the same meaning for Willner and Mitchell as it does for Geyer and Markou. For the latter investigators, the predictive validity is defined as the ability to make the accurate predictions about human phenomenon of the interest based on the performance of the model. This last definition includes Willner's definition, but extends it to the identification of any variables that influence both experimental preparation and the modeled phenomenon in similar ways.

Regardless of these semantic consideration, many authors have suggested different classification of animal models of anxiety. Thus, Rodgers described two categories of paradigms. (Rodgers et al., 1997). The first includes tests based on conditioned fear whereas the second regroups paradigms based on unconditioned fear. More recently, Cryan and Holmes proposed an alternative classification (Cryan and Holmes, 2005). They distinguished model based of fear-related behaviour from the exploratory-based approach-avoidance test.

Conditioned anxiety paradigms

Using Rodgers classification, conditioned anxiety paradigms assess the ability of an animal to emit or suppress responses induced by the delivery of an unavoidable form of punishment. This category can be further categorized as conflict or non/conflict based paradigms (See Table 2.). In non-conflict based tasks the rodent is re-exposed to an environment or stimuli that result in fear or anxiety related behaviour. This subcategory

includes fear-potential startle (Davis et al., 1993), fear conditioning, conditioned ultrasonic vocalization or defensive burying (Blampied and Kirk, 1983). In contrast, the second subcategory (i.e. Conflict models) involves punishment in response to innate behaviour, including eating or drinking. Classically, conflict paradigms largely comprised Vogel test (Vogel et al., 1971), Geller-Seifter conflict (Geller et al., 1962). Although, conditioned paradigms allow for experimental control over behavioural baselines, they exhibit a huge learning and memory component. Thus, amnesic agent could be considered as false positives in these paradigms. For example, scopolamine has been shown to be active in Geller-Seifter paradigm (Ketelaars and Bruinvels, 1989). Regarding their predictive validity, benzodiazepines appears to be effective (Geller et al., 1962; Vogel et al., 1971) in most part of these models. However, there is only limited number of studies which reported an anxiolytic effect of chronic SSRIs in these tests (Borsini et al., 2002; Millan, 2003).

Unconditioned anxiety paradigms

In the present dissertation, the majority of studies were carried out using unconditioned animal model of anxiety. This category includes exploratory-based approach-avoidance conflicts tests described by Cryan and Holmes, social tests (File and Hyde, 1978) and several other paradigms based on unconditioned behaviours (see Table 2). The first subcategory exploits the natural tendencies of rodents to avoid a potentially dangerous area. In the elevated-zero mazes, the aversive area is the open quadrants (see, material and methods). Thus, anxiolytics tend to decrease both the entries into and the time spent in these quadrants. In addition, several ethological markers of anxiety are monitored during this test, such as stretch-avoidance posture, rearings or head dips. Similarly, the light-dark box test uses the spontaneous tendency of mice to avoid the light area of a test chamber (see material and methods). In this model, anxiolytic activity is characterized by an increase in the latency to enter the safe (dark) compartment, an increase in the number of transitions between dark

and light compartment and an increase in the time spent in light compartment (Bourin and Hascoet, 2003). The staircase test is based on the fact that mice tend to avoid height (Simiand et al., 1984; Pick et al., 1996; Weizman et al., 1999). Anxiolytic, including benzodiazepines, have shown to increase the ratio of the number of the steps climbed compared with number of rearings. Similarly to the elevated zero maze, some behavioural indicators of anxiety are measured in this test such as rearing. This subcategory comprises also the mirrored chamber and the open-field hole-board paradigm. Regarding their predictive validity, classical benzodiazepines and several other anxiolytics have been shown to decrease in avoidance of aversive/threatening areas. Conversely, anxiogenic drugs, such as beta carbolines or yohimbine, often potentiate the anxiety-like avoidance response in these tests (Rodgers et al., 1997). However, chronic SSRIs appear also to be less effective or ineffective in these tests (Borsini et al., 2002). More recently, a novel approach has been shown to be more sensitive to this last treatment, Dulawa and collaborators demonstrated a effect of chronic fluoxetine in the novelty-suppressed feeding (Dulawa et al., 2004; Dulawa and Hen, 2005). Indeed, BALB/c mice have been shown to decrease their food intake when they are in a novel environment. In this study, it has been demonstrated that chronic, but not acute treatment with SSRIs reversed this suppression.

Although, this category of paradigm is widely used in behavioural pharmacology research, there are several potential caveats associated with their used. For example, psychostimulant or sedative effect of a drugs have the potential to cause a false positive anxiety-related behaviour in these tests (Pollard and Howard, 1986).

| Conditioned response tests | Unconditioned response test. |
|--|--|
| <p>Conflict tests</p> <ul style="list-style-type: none"> • Geller-seifter paradigm. • Vogel paradigm. | <p>Exploratory-based approach-avoidance conflicts tests</p> <ul style="list-style-type: none"> • Elevated plus-maze. • Elevated zero-maze. • Light-dark box • Mirrored Chamber. • Staircase test. • Novelty-suppressed feeding. |
| <p>Non-conflict tests</p> <ul style="list-style-type: none"> • Active/passive avoidance. • Conditioned emotional response. • Shock probe defensive burying. • Fear potentiated startle. • Fear conditioned paradigm. • Conditioned ultrasonic vocalization. | <p>Social tests</p> <ul style="list-style-type: none"> • Separation-induced ultrasonic vocalizations. • Social competition • Social interaction |
| | <p>Others</p> <ul style="list-style-type: none"> • Stress-induced hyperthermia. • Acoustic startle. • Hot-plate. • Mouse defensive test battery. • Shock-induced ultrasonic vocalizations • dPAG-induced flight. • Predator odor induced • Lactate or cystokinin administration induced panic-like behaviour. |

Table.2. Classification of animal model of anxiety disorders. Adapted from (Rodgers et al., 1997).

Tableau 2. Classification des modèles animaux d'anxiété.

Quantification of general measures of locomotor activity in a test (e.g., distance traveled in the light/dark test; closed arm entries in the elevated plus-maze) can increase confidence in the anxiety-related specificity. Alternatively, these psychostimulant or sedative effect can be assessed on formal tests of locomotor activity (e.g., open field; (Hascoet and Bourin, 1998) and motor function (e.g., rotarod coordination); however, caution should be taken to minimize the stressful nature of such tasks to avoid cross-contamination with anxiety.

In addition, this category comprises also tests measuring innate response to aversive stimulus or situation, such as maternal separation, electric shock or predator presentation

(Blanchard et al., 1997; Blanchard et al., 2003). The response measure can be a behaviour, including flight (Blanchard et al., 1997; Blanchard et al., 2003) and ultra-sonic vocalization (Miczek et al., 1995), or physiological parameters, such as autonomic arousal or body temperature. For example, the stress-induced hyperthermia (SIH) is mainly based on the increase of core temperature observed after stress. This procedure involves two sequential rectal temperature measurements, spaced 10 min apart. The first rectal temperature measurement (T_1) reflects the basal body temperature, whereas the second measurement, 10 min later reflects the stress-induced temperature (T_2) due to the rectal procedure 10 min earlier. The difference, $\Delta T (=T_2-T_1)$ is the measure for stress-induced hyperthermia. This parameter appears to be an indicator of anticipatory anxiety. Benzodiazepine, including diazepam, chlordiazepoxide; 5-HT_{1A} receptor agonists such as flesinoxan, buspirone are active in blocking stress-induced hyperthermia (Van der Heyden et al., 1997).

Although pharmacological studies have provided a tremendous amount of information regarding the neurobiology of anxiety, the recent development of genetically engineered mice have added innovative new tools to the armamentarium of researchers (Finn et al., 2003) (Cryan and Holmes, 2005). Thus, genetic manipulations, including overexpression or knock-down, allow to examine novel targets for the anxiolytic activity for which few established pharmacological tool exist. Recently, Cryan and collaborators demonstrated that targeted deletion of mGlu7 receptor induced anxiolytic-like behaviour, despite an absence of pharmacological studies (Cryan et al., 2003c). Additionally, genetic manipulation will enable better testing of the validity of current molecular theories of anxiety disorders. Thus, the anxiogenic effect of targeted deletion of 5-HT_{1A} receptor supports the role of serotonergic system in the neurophysiology of anxiety (Parks et al., 1998; Ramboz et al., 1998; Sibille and Hen, 2001). At this time more than 40 different mutant lines have been reported to have phenotypes interpreted as abnormal anxiety related behaviour in these tests and this technology

must be considered as the primary technological advance in neuroscience during these last decades.

1.3.1.3 Neurobiology of anxiety.

The recent development of non-invasive brain imaging techniques generated a large number of studies on the involvement of brain structure in anxiety disorders. In a recent review, Douglas Bremner at Emory University school of medicine, proposed a diagram of key structures involved in the majority of anxiety disorders. Thus, several authors demonstrated that the amygdala, a region generally associated with fear responses, is remarkably overactive in PTSD patients (Bremner, 2004). Similarly, increased amygdala activation was also observed with fMRI during symptom provocation in phobic patients. In addition, some structure such as medial prefrontal cortex or anterior cingulate cortex might be affected in anxiety disorders. PTSD patients exhibit a decrease in medial prefrontal activity. It has been proposed that this structure, including the anterior cingulate, could be involved in the extinction of fear (Maren, 2005), and consequently in the reminiscence of initial trauma observed in PTSD. Regarding obsessive compulsive disorders, studies have reported an increase on orbitofrontal cortex, anterior cingulate cortex, and caudate nucleus function in OCD patients compared to normal subjects, that could be normalized with antidepressant treatments (Bremner, 2004). This data support the theory that OCD disorder could be characterized by abnormal processing within the lateral orbitofrontal loop, including caudate, cingulate and orbitofrontal cortices (Chamberlain et al., 2005).

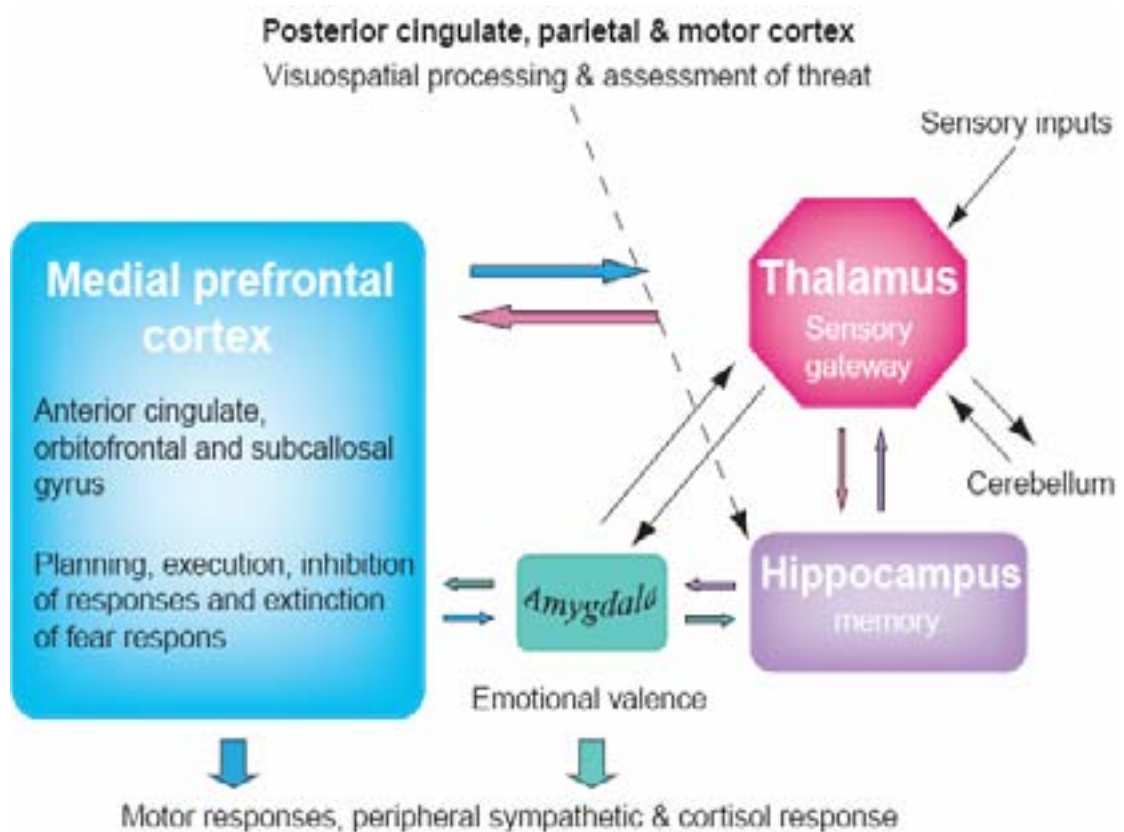


Fig.1.5. Schematic diagram of structures involved in anxiety disorders.
Adapted from (Bremner, 2004)

Fig.1.5. Diagram des structures impliquées dans les troubles anxieux.

In addition to these structures, most of the work on the neurobiology of anxiety has focused on monoamines, including serotonin and norepinephrine, and on the GABAergic system (Millan, 2003). Although serotonergic, noradrenergic and GABAergic system appears to be the major system involved in anxiety disorders, there is emerging evidence for the role of glutamatergic system (Spooren et al., 2003), vasopressin, galanin (Holmes et al., 2003a) or other in the neurobiology of anxiety disorders.

Noradrenaline (NA).

It is now generally accepted that noradrenaline (NA) play a key role in anxiety. Indeed, several studies reported that stressful stimuli such as immobilization, foot-shock, and tail pinch have increase NA turnover in the locus coeruleus, hypothalamus, hippocampus,

amygdala and cortex (Bremner et al., 1996). Clinically, yohimbine, a α_2 -receptor antagonist has been shown to increase anxiety in normal patients (Goldberg et al., 1983) and to increase panic frequency in panic patients (Charney et al., 1984). Moreover, propranolol, a β -adrenoreceptor antagonist is also used to treat some form of anxiety, particularly when physical symptoms are severe (e.g., social phobia; performance anxiety (Noyes, 1985).

Serotonin (5-HT).

Regarding the serotonergic system, the well-established effectiveness of SSRIs and buspirone in the treatment of anxiety (Feighner and Boyer, 1989; Lydiard, 1998) support an eventual role of this system in anxiety disorders. In addition challenge studies have demonstrated that single dose of 5-HT receptor agonist, such as mCPP, is anxiogenic in patient with panic disorders and in control subjects (Charney et al., 1987). In animals, exposure of a variety of stressors produces an increase in 5-HT release in the medial prefrontal cortex, nucleus accumbens and lateral hypothalamus (Inoue et al., 1994). In addition, local injection of 5-HT_{1A} agonist has been shown to affect anxiety behaviour in several animal paradigms (Menard and Treit, 1999). More recently, mice with targeted deletion of 5-HT_{1A} receptor have been shown to exhibit high level of anxiety (Ramboz et al., 1998; Sibille and Hen, 2001). Ultimately, Neumeister and collaborators demonstrated that patients suffering of panic disorder exhibit a marked reduction of cerebral 5-HT_{1A} receptor binding in the anterior and posterior cingulate cortices compared to normal subjects (Neumeister et al., 2004). Regarding the other receptors, some studies have also reported an anxiolytic-like action of 5-HT₂ receptor agonists, an anxiogenic-like effect of 5-HT_{2A} receptor antagonism in mice (Nic Dhonnchadha et al., 2003).

GABA.

As mentioned previously, alterations in the GABAergic system have been linked to the pathophysiology of anxiety disorders. It is widely accepted that patients with anxiety disorders, including panic disorder, PTSD and generalized disorder; have reduced benzodiazepine binding sites in various brain regions, in comparison with healthy subjects (Tiihonen et al., 1997; Malizia et al., 1998; Bremner et al., 2000a). Consistent with these observations patients with panic disorder were found to exhibit lower brain levels of GABA than controls (Goddard et al., 2001). Ultimately, the widespread use of benzodiazepines in the treatment of anxiety disorder corroborated the predominant role of GABA in these disorders.

Preclinically, several pharmacological or genetic manipulations of GABA receptors or GABA levels have been reported to modulate anxiety. Briefly, the majority of preclinical models of anxiety disorders have been validated with classical benzodiazepines, such as diazepam or chlordiazepoxide (Rodgers et al., 1997; Millan, 2003). Interestingly, benzodiazepine receptor inverse agonists, beta-carbolines, have been reported to be anxiogenic in most of the animal models of anxiety (Guidotti et al., 1980). In addition, a large number of studies demonstrated also that GABA_A receptor activation, via agonist, have been reported to induce anxiolytic-like effects in several models of anxiety (Higgins et al., 1988). Moreover, several agents acting on GABA transaminase (GABA-T) have widely been found to produce anxiety reduction in several animal models of anxiety. For example, GABA-T inhibitors, such as vigabatrin appear to be anxiolytic in the social interaction or elevated plus-maze tests (Corbett et al., 1991). Although GABA_A receptor activation or GABA level elevation seems to be clearly involved in the pathophysiology of anxiety, there is no clear preclinical literature, to date, on the possible involvement of GABA_B receptors in anxiolytic-

like activity. To date, there are only a few studies assessing the effect of GABA_B receptors ligands in anxiety paradigm.

1.3.1.4 Role of GABA_B receptors in anxiety: Clinical studies.

To date, clinical data on the specific role of GABA_B receptors are limited. Breslow and collaborators were the first to use baclofen to treat anxiety disorders. In their studies, they treated nine medication-free panic subjects with oral baclofen (30 mg/day for 4 weeks) in a double-blind, placebo-controlled crossover trial. Interestingly, they also reported that baclofen reduced significantly the number of panic attacks and score in Hamilton anxiety scale (Breslow et al., 1989). Correspondingly, baclofen has been also reported to be effective in the treatment of PTSD. Indeed, Drake and collaborators demonstrated that 8-weeks of treatment with baclofen significantly reduced the score in clinician-administered PTSD Scale. Nevertheless, this study was performed in an open-label trial and double-blind, placebo-controlled studies are required to support the efficacy of baclofen in the treatment of PTSD (Drake et al., 2003). In addition, it has been also reported that baclofen reverses the anxiety associated with spinal cord injury. Using a double-blind design, Hinderer reported that decreased level of their Beck Inventory-A anxiety scale scores with 40 mg/day of baclofen, and a further level reduction with 80 mg/day of baclofen (Hinderer, 1990).

Finally, several studies reported that baclofen is effective in the treatment of anxiety associated with alcohol dependence. Indeed, alcohol withdrawal results in several different symptoms, including autonomic hyperactivity, tremor, and nausea or vomiting, hallucinations, psychomotor agitation, grand mal seizures and anxiety. Addolorato and collaborators, using double-blind design assessed the effect of baclofen on alcohol intake, alcohol craving and associated anxiety symptoms (Addolorato et al., 2002b). They showed a significantly decrease of alcohol intake and craving in patients treated with baclofen, but also a decrease in

state anxiety. These data are supported by a recent a self-case reported showing that baclofen relieved anxiety associated with alcohol abstinence (Ameisen, 2005).

At this point, baclofen has been shown to be effective in the treatment of 4 different anxiety disorders; however its use is confined to marginal clinical studies. Largely, this is because baclofen have many unwanted sides effects, including sedation, hypothermia. Moreover, the absence of post-mortem and imaging data supports the idea that more studies are needed to elucidate the role of GABA_B receptor in human populations.

1.3.1.5 Role of GABA_B receptors in anxiety: Preclinical studies.

In the Vogel conflict test, only two studies reported an anxiolytic effect of baclofen. Ketelaars and collaborators demonstrated that 0.46 mg/kg and 1 mg/kg of baclofen increased significantly the number of punished-drinking in rats (Ketelaars et al., 1988). Subsequently, Shephard and collaborators confirmed these effects using higher doses of baclofen (0.5-2 mg/kg, i.p; (Shephard et al., 1992). Although these studies supported a potential anxiolytic effect of baclofen, there is a potential caveat regarding their results. Indeed, baclofen has been shown to induce memory impairment in several animal models. For example, it is now clear that baclofen induces memory deficits in the passive avoidance test (Swartzwelder et al., 1987). In addition, few studies failed to observed anxiolytic-like effect of baclofen in this paradigm (Agmo et al., 1991; Umezu, 1999).

In accordance with clinical data, baclofen has also been shown to counteract anxiety associated with alcohol or benzodiazepines withdrawals in rats. File and colleagues demonstrated that the day after 21 days of treatment with diazepam, animals exhibited decrease in social interaction (File et al., 1991; File et al., 1992). At physiological level, they also reported that baclofen reverses increased in K⁺ evoked release of [³H] 5-HT in hippocampus associated with benzodiazepine withdrawal (File and Andrews, 1993).

Similarly, the same group have shown that baclofen (1.25 and 2.5 mg/kg) reversed also anxiety associated with alcohol withdrawal, using social interaction and elevated plus maze as behavioural readout. Nevertheless, these authors reported also some sedative effect of baclofen at higher dose.

In a more ethological animal model of anxiety, Nastiti and collaborators demonstrated that baclofen (0.5 and 1 mg/kg) decrease significantly ultrasonic calling of mouse pups induced by maternal separation (Nastiti et al., 1991). Surprisingly, they reported that these effects are not due to a potential sedative effect of baclofen.

The most conflicting results, regarding the effects of GABA_B ligands in anxiety paradigm, were observed using the elevated plus maze. In a first study, Dalvi and Rodgers observed that baclofen at 3 mg/kg decreases dramatically the ratio between open/closed arm entries suggesting anxiogenic effect of GABA_B receptor activation in mice. In contrast, they reported that at this dose, baclofen increase the time spent in the central area and decrease the total number of arm entries, suggesting that sedative effect could be contribute to anxiogenic effect observed (Dalvi and Rodgers, 1996). Interestingly, they also observed that the GABA_B receptor antagonist, CGP35348, failed to affect any behavioural parameters in these test. Conversely, a recent study reported that baclofen (0.05, 0.1 and 0.2 µg/rat i.c.v. or 1, 2, 4 mg/kg i.p) failed to affect the locomotor activity and behaviour in rat elevated plus maze. More surprisingly, these authors observed an anxiolytic-like effect of CGP35348 in the same test, when is injected i.c.v (Zarrindast et al., 2001).

Given the discrepancy of results observed in all these studies, it is currently hard to conclude to a conclusive role of GABA_B receptor in anxiety disorders. The major limiting factor of these observation is that the majority of studies use the prototypical GABA_B receptor agonist, baclofen, which has been reported to have a wide constellation of side-effects,

including motor impairment, amnesic effect and hypothermia (Bowery et al., 2002). Thus, the discovery of GABA_B receptor allosteric positive modulators and genetic modified mice might help in the investigation of the involvement of GABA_B receptors in anxiety disorders.

1.3.2 Role of GABA_B receptors in Depression.

1.3.2.1 Depression: Definition.

Depression is one of the most serious disorders in today's society (Wong and Licinio, 2001). The World Health Organization predicts that unipolar depression will be the second most prevalent cause of illness-induced disability by 2020 (Murray and Lopez, 1997) and recently published data suggest that the current lifetime prevalence for depression is as high as 16.2% in the US adult population (Kessler et al., 2003). Further, with the economic burden of depression estimated to be as high as \$44 billion per year in lost productive work time (Stewart et al., 2003), the impetus has never been greater to gain better understanding of the underlying pathophysiology and to develop superior treatment strategies for depression. Since the 1960s, depression has been diagnosed as "major depression" based on symptomatic criteria set in the DSM-IV: Symptomatology of the depression (see Table 3.). Moreover, depression should not be considered as a single disease, but a heterogeneous pathology comprised of numerous diseases, including melancholic depression, psychotic depression and dysthymia.

The first antidepressants were discovered, entirely by serendipity, about fifty years ago. Indeed, imipramine, a tricyclic antidepressant (TCA) (Kuhn, 1957) and iproniazid, a monoamine oxidase inhibitor (MAOI) (Loomer et al., 1957), were derived from work on antihistamine research and antitubercular drugs respectively. These two classes of antidepressant have been demonstrated to dramatically improve the symptom of depression (Frazer, 1997). Nevertheless, they have several side-effects: MAOI are associated with dangerous hypertensive episodes above, which are caused when patients eat food rich in

tyramine. Similarly, TCA have been shown to block sodium channels, which can cause cardiac arrhythmias and cardiac arrest in overdose (Frazer, 1997). Consequently, today psychiatrists generally prefer newer antidepressants such as SSRI or norepinephrine-selective reuptake inhibitors. These new categories share with the TCA the ability to inhibit monoamine reuptake, but they are reported to be more selective and lacking the undesirable binding properties of TCAs. Regarding their onset of action, it is now well accepted that all antidepressants start to be fully effective only after 4 to 6 weeks of treatment (Frazer, 1997). These data support the idea that, although all antidepressant medications elicit their primary pharmacological effects by altering monoamine (serotonin, noradrenalin or dopamine) concentrations in the brain, their mood elevating effects would parallel long term adaptive changes.

1.3.2.2 Animal models of depression-related behaviour and antidepressant activity.

Like anxiety disorders, depression is a heterogeneous disorder with symptoms manifested at the psychological, behavioural and physiological level which leads to difficulty in attempting to mimic the disorder in the laboratory (Table 3). Indeed, many of the human symptoms of depression as described in the DSM-IV (such as recurring thoughts of death or suicide or having excessive thoughts of guilt) are impossible to model in rodents. However, it is conceivable to think that some core symptom of major depression could be modeled in animals. Indeed, the loss of interest or pleasure observed in depressed patient, called anhedonia, has been translated in rodents (see Table 3). Thus, environmental or pharmacological manipulations have been reported to decrease the sucrose consumption in (Willner et al., 1992b) or intracranial self stimulation (Moreau et al., 1992). To date, there is a huge variety of animal models of depression (see Table 3), differing in terms of their predictive validity, face validity and their reliability.

| Depression Symptom in humans | How it is modeled in rodents? | Ref. |
|---|--|---|
| <i>Depressed mood most of the day</i> | Not applicable | |
| <i>Markedly diminished interest or pleasure in all or most activities most of the day</i> | Intracranial Self-Stimulation (ICSS) and progressive ratio responding in response to rewards such as sucrose can assess anhedonia | (Kokkinidis et al., 1986; Gilliss et al., 2002) |
| <i>Large changes in appetite or weight gain</i> | Easily measured | (Nonogaki et al., 1998; Karolyi et al., 1999) |
| <i>Insomnia or excessive sleeping</i> | Sleep architecture can be measured using EEG | (Boutrel et al., 1999; Boutrel et al., 2002) |
| <i>Psychomotor agitation or slowness of movement</i> | Can be assessed in terms of ease of handling. Activity can be measured in novel environment And motor co-ordination assessed using rotarod | (Mizoguchi et al., 2002; Kafkafi et al., 2003; Wahlsten et al., 2003) |
| <i>Fatigue or loss of energy</i> | Social withdrawal Energy Expenditure Treadmill/Running wheel Swimming Nesting Behaviour Active Waking in EEG | (Dixon et al., 1994) (Nonogaki et al., 2003) (Grippe et al., 2003) (Dunn and Crnic, 1993) (Ballard et al., 2002) (Cheeta et al., 1997) |
| <i>Indecisiveness or diminished ability to think or concentrate</i> | Animal models of cognition Working memory Spatial Memory Attention | (Crawley, 2000) (Estape and Steckler, 2002) (Contarino et al., 1999) (van Gaalen et al., 2003) |
| <i>Recurrent thoughts of death or of suicide</i> | Not applicable | |
| <i>Feelings of worthlessness or excessive or inappropriate guilt</i> | Not applicable | |

Table.3. Symptoms of depression and their associated model in rodent. Adapted from (Cryan and Mombereau, 2004).

Tableau 3. Les symptômes de la dépression et leur modèles animaux associés.

Forced swim test.

The forced swim test (FST) is probably the most widely and most frequently used experimental paradigm for detecting antidepressant activity, largely due to its relative reliability across laboratories and its ability to detect activity a broad spectrum of clinically effective antidepressants (Cryan et al., 2002a). The test is based on the observation that rodents, following initial escape-oriented movements, develop an immobile posture in an inescapable cylinder filled with water. If antidepressant treatments are given prior to the test, the subjects will actively persist engaging in escape-directed behaviours for longer periods of time than after vehicle treatment. Recently, the rat FST has been further modified and demonstrated that the test reveals specific behavioural components of active behaviours, namely swimming, which is sensitive to serotonergic compounds such as the selective serotonin (5-HT) reuptake inhibitors and 5-HT receptor agonists, and climbing (a.k.a. struggling), which is sensitive to tricyclic antidepressants and drugs with selective effects on catecholaminergic transmission (Cryan et al., 2002a; Cryan et al., 2002b). In addition, Alcaro and colleagues (Alcaro et al., 2002) have shown that chronic treatment with the serotonergic antidepressant clomipramine increased swimming behaviour whereas the catecholaminergic drugs desipramine and amphetamine primarily increased struggling behaviour in a mouse version of the test. This dissection of active behaviours in the mouse FST has also recently been extended to unveil depressive-like behaviours in mice lacking the corticotrophin releasing factor (CRF) receptor 2 (Bale and Vale, 2003).

Tail suspension test.

The tail suspension test is theoretically similar to the FST, briefly mice are suspended by their tails for six minutes, and the amount of time they spend immobile is recorded (Steru et al., 1985; Cryan et al., 2005). Acute antidepressant treatments will decrease these

immobility scores. Advantages of this test include its ability to detect a broad spectrum of antidepressants; it is inexpensive, methodologically unsophisticated and easily open to automation. This automation enables the assessment of additional parameters such as power and energy of movement (Porsolt et al., 1987; Steru et al., 1987). Furthermore, the TST also circumvents the need of the mouse to swim which may be relevant for examining the effects of certain genetically modified animals where motor co-ordination may be compromised. A relevant example of this is mice of the 129 strain which have problems keeping afloat when tested in the FST following treatment with SSRIs (Lucki, 2001) are suitable for testing in the TST.

Considering the different validity criteria of these tests, both the FST and TST have strong validity. Initially, Porsolt, for the FST, and Steru, for the TST reported that most of clinically effective antidepressants are active in this test (Porsolt et al., 1977; Steru et al., 1985). In addition, non-pharmacological treatments, such as electroconvulsive shock are effective in both of them (Porsolt et al., 1977; Teste et al., 1993). Interestingly, etiological factor of major depression, such as stress or drugs of abuse-induced withdrawal, have been shown to affect the immobility in these test. Thus, withdrawal states induced by chronic administration phenylcyclidine, “angel dust” or amphetamine decreased significantly time spent in immobility in the FST and TST, respectively (Noda et al., 1995; Cryan et al., 2003b). While these tests seem to have remarkable predictive validity, there are major caveats associated with their use. For one, because these tests respond to acute treatment, thus they do not reflect the slow onset of antidepressant in the clinic. However, recent studies demonstrated that sub-effective dose of antidepressant, observed in acute study, is effective when it is administered chronically (Dulawa et al., 2004). Another major issue is the relevance of immobility behaviour in the context of depression. Indeed, several authors debated of the signification of this behaviour (Cryan and Mombereau, 2004; Petit-Demouliere

et al., 2005). Finally, some authors have pointed the major lack of selectivity of these tests. Indeed, the original studies, Steru and Porsolt demonstrated that drugs, such as amphetamine or cocaine non-selectively decrease immobility behaviour in these test. Thus, in order to exclude eventual false positive, it seems to be fundamental to assess locomotor activity, susquently these test (Porsolt et al., 1977; Steru et al., 1985).To conclude, while FST and TST appears to have low and questionable construct validity, they assert them-self as a powerful animal model of antidepressant activity more than animal model of depression.

Chronic mild stress.

In contrast to these to tests, the chronic mild stress might be the model of depression with the strongest construct validity (Willner et al., 1992b; 1992a; Willner, 1997). This test consists of exposing rodents to series of mild unpredictable stressors during a prolonged period. Interestingly, the regimen has been demonstrated to induce anhedonia-like behaviour in animals. Thus, chronically stressed animals exhibit decrease in the consumption for sucrose solution and brain reward function as assessed using ICSS. Although anhedonia-like behaviours has generally, been shown to be reversed by chronic, but not acute, treatment with several classes of antidepressants (Moreau et al., 1992; Willner, 1997), this paradigm appears to have a poor inter-laboratory reliability in rat (Reid et al., 1997; Cryan and Mombereau, 2004). In mice, recent studies interesting modification of the chronic mild stress model, using a 1-3 point scale for the assessment of the physical state of the animals fur. Animals subjected to chronic stress do not groom themselves or take interest in the state of their fur. There is certainly some analogy between this stress-induced state and the observations that depressed patients have a reduced efficiency with which even the smallest tasks are accomplished, leading to the inability to maintain minimal personal hygiene (Griebel et al., 2002b; Santarelli et al., 2003). Further, it has been shown that chronic treatment with the antidepressant fluoxetine and novel antidepressant candidates improved the physical state index of the mice.

In addition to this behavioural readout, several studies demonstrated that chronic mild stress could induce neuroimmune, neuroendocrine or physiological changes observed in patients. For example, chronically stressed animals exhibit high plasma corticosterone analogous to hypercortisolism observed in major depressed patient (Froger et al., 2004). Consequently, this paradigm should be considered as a powerful tool to elucidate the involvement of stress in the etiology of depression.

Learned helplessness.

Similarly, the learned helplessness is also based on exposure to unpredictable stressors. This paradigm is mainly based on the observation that repeated exposure to inescapable and uncontrollable electric shock induce escape deficit in animals. Although, originally observed in dogs (Seligman, 1972), this model was subsequently translated in rodents, including rat (Seligman et al., 1975) and mice. In these tests, antidepressants have been reported to reverse escape deficits usually after short-term treatment (Anisman et al., 1978; Anisman et al., 1979; Leshner et al., 1979; Sherman and Petty, 1982; Martin et al., 1990a). One important caveat that must be considered with the learned helplessness paradigm is that alterations in pain sensitivity caused by pharmacological or genetic manipulation will influence the behaviour of the animals. Indeed, a recent example has pointed the difficulty to distinguish the helplessness from hypoalgesia in this paradigm (MacQueen et al., 2001).

Olfactory bulbectomy model.

The last major animal model of depression is the olfactory bulbectomy model. As the name suggests this paradigm consists in bilateral removal of the olfactory bulbs of rodents. At behavioural level, this manipulation induced an hyperactive response in a novel brightly lit open field apparatus, which is reversed almost exclusively by chronic, but not acute, antidepressant treatment and at doses which do not compromise the performance of sham-

lesioned control animals (Kelly et al., 1997; Cryan et al., 1998). Moreover, olfactory bulbectomy have been shown to induce neurochemical, neuroendocrine and neuroimmune alterations many of which are comparable with changes seen in patients with major depression (Jesberger and Richardson, 1988; van Riezen and Leonard, 1990; Lumia et al., 1992; Kelly et al., 1997). Indeed, studies in the rat have shown that following olfactory bulbectomy there are marked changes in the serotonergic (Zhou et al., 1998; Connor et al., 1999; Watanabe et al., 2003), noradrenergic (van Riezen and Leonard, 1990) and GABAergic (Dennis et al., 1993) systems.

Like in anxiety, several genetic manipulations have been assessed in the majority of test. Nevertheless, some the FST and the TST seem to share the exclusivity of research based on transgenic. Indeed, more than 30 studies, for the FST and 13 studies, assessed the effect of genetic manipulations on antidepressant-like activity (Cryan and Mombereau, 2004).

| Behavioural Model | Readout | Comments | Ref |
|----------------------------------|---|--|--|
| <i>FST</i> | Immobility | Quick, Easy, robust, Sensitive to both acute and chronic treatments | (Porsolt et al., 1977; Lucki et al., 2001) |
| <i>Modified FST</i> | Immobility Swimming Climbing | Sensitive to acute and chronic antidepressant treatments; Differentiates antidepressants from different classes including SSRIs in rat, needs to be further characterized in mouse | (Alcaro et al., 2002; Bale and Vale, 2003) |
| <i>TST</i> | Immobility | Quick, Easy, robust. Sensitive to acute treatments. Certain strains climb their tail | (Porsolt et al., 1987; Bai et al., 2001; Mayorga et al., 2001) |
| <i>Olfactory Bulbectomy</i> | Hyperactivity in a novel environment Passive avoidance deficits | Behavioural effects evident only following chronic treatment; mechanism of action poorly understood | (Otmakhova et al., 1992) (Hozumi et al., 2003) |
| <i>Learned helplessness</i> | Number of escape failures Latency to escape | Sensitive to short-term antidepressant treatments; ethical restrictions in some countries | (Anisman et al., 1979; Shanks and Anisman, 1993) |
| <i>Chronic Mild Stress</i> | Sucrose Preference ICSS Fur State | Behavioural effects reversed in temporal fashion to that seen in depressed patients | (Harkin et al., 2002) (Griebel et al., 2002a; Griebel et al., 2002b; Ducottet et al., 2003) |
| <i>Drug-withdrawal anhedonia</i> | <i>induced</i> ICSS Sucrose Preference FST TST Learned helplessness | Requires further validation; cannot easily assess baseline strain differences using ICSS Is probably dependent on regimen of administration of drug | (Kokkinidis et al., 1986; Barr and Phillips, 1999; Anraku et al., 2001; Barr et al., 2002; Cryan et al., 2003b) (Russig et al., 2003) |
| <i>Prenatal Stress</i> | Progressive ratio (rat) Immobility (FST) Endocrine Parameters (rat) | May not be specific to depression, also proposed as model of schizophrenia | (Koenig et al., 2002) |
| <i>Neonatal Clomipramine</i> | Immobility (FST) Circadian disturbances Endocrine parameters | Only limited testing of antidepressants have been conducted in rat and none in mouse | (Vogel et al., 1990; Velazquez-Moctezuma and Diaz Ruiz, 1992; Hansen et al., 1997) |
| <i>Maternal Deprivation</i> | HPA axis ICSS (RAT) | Only limited testing of antidepressants have been conducted in rat and none in mouse | (Schmidt et al., 2002) (Matthews and Robbins, 2003) |
| <i>DRL 72</i> | Response rate Reinforcement rate | Sensitive to short-term antidepressant treatments in rat | (Wong et al., 2000) (Seiden et al., 1985) |
| <i>Resident Intruder</i> | Agonistic behaviour | Distinguishable behavioural effects only following chronic treatment; Requires further validation in other laboratories | (Mitchell and Redfern, 1997) |
| <i>LPS-induced activation</i> | <i>immunological</i> Temperature responses Cytokines production Endocrine parameters Sickness behaviour | Requires further validation for mouse | (Dunn and Crnic, 1993; Shen et al., 1999; Yirmiya et al., 2001) |

Table 4: Comparative analysis of rodent depression models (adapted from Cryan and Mombereau, 2004)

Tableau 4: Analyse comparative des modèles animaux de dépression.

1.3.2.3 Neurobiology of depression.

Like in anxiety disorders, several brain imaging studies have reported some changes in blood flow or related measures in several brain areas. For example, Drevets and colleagues reported an increased in regional metabolism and cerebral blood flow in the amygdala, orbital cortex and medial thalamus, and decreased in dorsomedial/dorsale anterolateral prefrontal cortex and anterior cingulated cortex in major depressed subjects (Drevets, 2000). As previously reported, these structures have been shown to be particularly involved in emotional behaviour. Therefore, several studies have also investigated the morphological of brain structure in depressed patients. Indeed, it has been observed an enlargement of amygdala during the first episode of depression (Frodl et al., 2002; Frodl et al., 2003). In contrast, several studies demonstrated decrease of hippocampus volume in depressed patients (Sheline et al., 1996; Bremner et al., 2000b; Steffens et al., 2000).

Regarding the neurochemistry of depression, the monoamine hypothesis was first formulated forty years ago (Bunney and Davis, 1965; Coppen, 1968; Schildkraut, 1995). This hypothesis proposes that depression could be a consequence of deficiency of the monoamine neurotransmitters norepinephrine and/or serotonin in the brain. On the basis on this hypothesis, various classes of antidepressant agents have been developed that act in increase levels of monoamines within the synaptic cleft.

Noradrenaline (NA).

Originally, the relationship between NA and depression began with the observation that reserpine-induced depletion of monoamines (including, NA), leads to depressive symptoms in some vulnerable subject (Bernstein, 1957). Subsequently, several post-mortem studies demonstrated alterations in adrenoceptor functions in depressed patients and suicide victims. Thus, it has been shown that major depressed patients exhibit elevated α_2 -adrenoceptor density and affinity in the locus coeruleus compared to healthy subjects

(Ordway et al., 1994; Ordway et al., 2003). Moreover, it has also been reported alteration increase in β -adrenoceptors in frontal cortex of suicide victim (Zanko and Beigon, 1983). Finally, Klimeck and collaborators demonstrated reduced levels of norepinephrine transporter binding in the locus coeruleus of depressed patients (Klimek et al., 1997). Preclinically, it has been reported that chronic treatment with desipramine decreases dramatically the responses induced by α_2 -adrenoceptor agonists, such as clonidine or dexmetdetomidine (Guo et al., 1998; Sacchetti et al., 2001). These data suggest that chronic antidepressant treatment might induce a desensitization of α_2 -autoreceptor. Together, it could be safe to conclude that α_2 -autoreceptors are hypersensitive in depression that could be counteracted by the progressive desensitization induced by chronic treatment with antidepressant.

Serotonin.

Like for NA, the fact that reserpine-induced depletion of monoamines caused depressive symptoms in subjects, lead also to initiate the investigation of the role of serotonin in depression (Coppen, 1968). Concerning 5-HT receptors, it has been demonstrated that 5-HT_{1A} autoreceptors seems to be supersensitized in the midbrain of depressed subject (Stockmeier et al., 1998). Therefore, two different studies, have also demonstrated a decrease of serotonin transporter binding in the midbrain of depressed patients (Pirker et al., 1995; Tauscher et al., 1999). Preclinically, several studies demonstrated that chronic SSRI treatment or targeted deletion of serotonin transporter induced a desensitization of somatodentric 5-HT_{1A} receptor (Fabre et al., 2000; Le Poul et al., 2000). Conversely, it has been shown a hypersensitive response of 8-OH-DPAT, a 5-HT_{1A} receptor agonist, in helpless mice, mice model of depression developed via selective breeding (El Yacoubi et al., 2003). Regarding postsynaptic 5-HT_{1A}, there is no conclusive effect of chronic antidepressant on this receptor. However, some studies demonstrated a supersensitization of postsynaptic 5-HT_{1A} receptor after chronic SSRI treatment (Mongeau et al., 1997). Together, these data suggest

that hypoactivity of serotonergic system could be induced via the hypersensitivity of 5-HT_{1A} autoreceptors in raphe nucleus. Although, the 5-HT_{1A} receptor appears to be the primary 5-HT receptor most implicated in depression, several studies have also shown involvement of 5-HT_{2A} or 5-HT_{1B} in the pathophysiology of depression (see review, (Cryan and Leonard, 2000).

Other neurotransmitters and cell survival pathway.

Like anxiety, several other major systems seem to play an important role in depression, such as glutamatergic system (Krystal et al., 2002) or hypothalamic-pituitary-adrenal axis (Nemeroff, 1989). For example, anhedonia, one of the core symptoms of depression, could be related to dysfunction of dopaminergic system (Willner, 1983b; 1983a; 1983c). However, there is emerging evidence for a role of cell survival pathway dysfunction in the pathophysiology of depression. This hypothesis is mainly based on the observation that depressed patients exhibit a reduction of hippocampal volume and increase of amygdala volume (see above). These results lead to the hypothesis that proteins involved in the neuroplasticity, such as neurotrophic factors could be also affected in depression (Altar, 1999). Indeed, brain derived neurotrophic (BDNF), the most widespread growth factor in the brain, have been shown to be upregulated by chronic, but not acute, antidepressant treatment in the dentate gyrus and pyramidal cell layer of hippocampus of rodents (Nibuya et al., 1996). Conversely, it has been reported that chronic stress decreases levels of BDNF in the same region (Smith et al., 1995; Vollmayr et al., 2001). More recently, Shirayama and collaborators demonstrated that injection of BDNF in hippocampus induced antidepressant-like effect in two animal model of depression. The most compelling evidence comes from a recent study, where antidepressants increase level of hippocampal BDNF level in depressed patient (Chen et al., 2001). These data suggest that drugs which can lead to upregulated BDNF levels have the potential to have antidepressant activity. Another approach to affect BDNF is

to act on the transcription factor CREB (cAMP responsive element binding protein). Indeed, BDNF gene is induced in vivo and in vitro by CREB (Tao et al., 1998; Conti et al., 2002). Thus, it has been demonstrated that chronic antidepressant increases levels of CREB expression in several brain structure, including hippocampus (Thome et al., 2000). Clinically, Levels of CREB are reportedly reduced in temporal cortex of depressed patients (Dowlatshahi et al., 1998; Dowlatshahi et al., 1999). Although, there is currently an extensive literature on these hypotheses, no direct pharmacological approaches to enhance BDNF concentrations have been developed at this time.

GABA.

It is now generally agreed that GABAergic system plays a key role in the pathophysiology of depressive disorders. Indeed, a vast amount of studies have implicated a GABAergic function in the depression (Brambilla et al., 2003). Thus, it has been shown that depressed patient exhibited reduced plasma (Petty et al., 1990) and cerebrospinal GABA levels (Gold et al., 1980). Further, post-mortem studies described a decrease of GABA cortical levels negatively correlate with the severity of depression (Honig et al., 1988). As early observations predicted, studies, using imaging techniques, also demonstrated GABAergic dysfunction in this pathology. Sanacora and collaborators demonstrated reduced GABA concentration in occipital cortex of drug free depressed patients (Sanacora et al., 2002), with a possible normalization after treatment with SSRI or electroconvulsive therapy (Sanacora et al., 2003; Sanacora et al., 2004).

1.3.2.4 Role of GABA_B receptors in depression: Clinical studies.

Paradoxically, only a sporadic number of studies have investigated the role of GABA_B receptor in depression. The majority of these studies used baclofen induced release of growth hormone as an in vivo index of hypothalamic GABA_B receptor function. In healthy subjects, administration of baclofen induced increases in growth hormone concentrations, cortisol and a

lowering of body temperature. It has been reported that depressed patients exhibit a blunted growth hormone response to baclofen (Marchesi et al., 1991; O'Flynn and Dinan, 1993). Marchesi and collaborators demonstrated a significantly lower response to baclofen in depressed compared to healthy subjects. In line with these findings, O'Flynn and Dinan reported also a blunted growth hormone response to baclofen in depressed patient particularly in dexamethasone non-suppressor patients. However, two different studies demonstrated that these parameters are not affected in major depressed subject (Monteleone et al., 1990; Davis et al., 1997). In addition, Monteleone and collaborators also showed that chronic treatment with SSRIs or tricyclic antidepressant failed to affect growth hormone response to baclofen.

In addition, only one study investigated the effects of baclofen on the affect of depressed patient (Post et al., 1991). In this study, the authors reported that baclofen exacerbates depressive symptoms. However, they examined the effect of baclofen only in five patients.

Thus, although GABAergic system seems to play an important role in depressive disorder, no conclusive picture of the potential involvement of GABA_B receptor in depression has emerged to date. Nevertheless, the development of more potent ligands (Froestl et al., 1999) and the cloning of GABA_B receptor (Kaupmann et al., 1997) offer to the scientific community a new opportunity to assess the role of GABA_B receptors in the pathophysiology of depression.

1.3.2.5 Role of GABA_B receptors in depression: Preclinical studies.

Although clinical studies failed to demonstrate a clear picture of the role of GABA_B receptor in depression, numerous preclinical studies have investigated the effect of GABA_B ligands in large number of animal model of depression

Nakagawa and collaborators, using learned helplessness paradigm, reported that systemic baclofen, but not bicuculline, administration exacerbates the escapes failures to the inescapable shocks (Nakagawa et al., 1996a; 1996b). Furthermore, this group also demonstrated that GABA_B activation, via systemic administration of baclofen, counteracted the antidepressant-like effect of desipramine in this paradigm, whereas muscimol appeared to be ineffective at modifying the actions of antidepressant drugs (Nakagawa et al., 1996a). On the contrary, the same group reported that CGP36742, a high potent GABA_B receptor antagonist, dose-dependently improved the escapes failures induced by inescapable shocks (Nakagawa et al., 1999). On the other hand, these studies support an eventual involvement of GABA_B receptors in depression.

Subsequently, Kram and collaborators investigated the impact of learned helplessness paradigm on the expression of GABA_B and GABA_A receptors in several brain structures. Using autoradiography, they demonstrated a downregulation of GABA_B receptors in the medial and lateral septum of rats which did not develop helpless behaviour and the helplessness rat (Kram et al., 2000). However, this group did not find any changes in the GABA_B receptor in the frontal cortex among groups, as it was previously reported by Martin and collaborators (Martin et al., 1990b). In this study, a decreased GABA_B receptor binding density in the frontal cortex of rats with learned helplessness was observed. Moreover, this group also demonstrated that chronic, but not acute, treatments with antidepressants normalize the lower GABA_B receptor binding observed in helpless rats. Regardless of these discrepancies, GABA_B receptor seems to play an important role in coping behaviour.

In the forced swim test, another paradigm involving the ability of animals to cope with stress, baclofen appears to counteract also the antidepressant-like effect induced by desipramine, mianserin and buspirone (Nakagawa et al., 1996c) in rat. Interestingly, baclofen has been shown to decrease the time spent in immobility in the mice paradigm (Aley and

Kulkarni, 1990). Slattery and colleagues recently demonstrated that GABA_B receptor antagonists but not the GABA_B receptor positive modulator GS39783 had an antidepressant-like profile similar to SSRIs in the modified rat FST (Slattery et al., 2005a).

In effort to clarify the effect of GABA_B ligands in animal model of depression, Bittiger and collaborators assessed the effect of CGP 51176A, a highly potent GABA_B receptor antagonist in the chronic mild stress paradigm (Willner, 1997). Indeed, they observed that chronic GABA_B receptor blockade (four weeks of treatment) blocked the reduction of sucrose consumption induced by chronic mild stress in rat (Bittiger et al., 1996).

In accordance with the data observed in learned helplessness model, bulbectomized animals have been shown to exhibit a downregulation of GABA_B receptors in frontal cortex (Lloyd et al., 1989). In this paradigm, animals underwent a surgical ablation of the olfactory bulb which induced hyperactivity in the open-field test and a deficit in the passive avoidance paradigm (Kelly et al., 1997). Initially, baclofen has been reported to be able to block the hyperactive response in this model (Dennis et al., 1993). However the sedative properties of baclofen could interfere with any potential antidepressant-like effect in this paradigm. In contrast, a recent study demonstrated that GABA_B receptor antagonist has an antidepressant like effect in this model (Nowak et al., 2004).

Taken together, results obtained in these different animals model of depression, supported the idea that GABA_B receptor antagonist can be viewed as a potential targeted to treat depressive disorder.

Finally, several groups have also assessed the impact of antidepressant treatment on GABA_B receptor binding and expression in animals' brain. In the majority of these studies, chronic antidepressant treatment appears to up-regulated GABA_B receptors in the frontal cortex and hippocampus. Indeed, the majority of binding studies, demonstrated that

antidepressant, including SSRI, tricyclic antidepressant and MAO inhibitors, increased GABA_B receptor density in the frontal cortex (Gray and Green, 1987). In addition, it has also been shown that antidepressants upregulated GABA_{B(1a)} receptor subunit transcript in hippocampus without affecting GABA_{B(1b)} transcript (Sands et al., 2004). In addition, various studies investigated GABA_B function in vivo after chronic antidepressant treatment. Borsini and colleagues demonstrated that 18 days of treatment with desipramine failed to affect hypothermia response induced by single administration of baclofen (Borsini et al., 1986, 1988). In support of this, MacManus and colleagues reported also absence of effect of chronic antidepressant treatment, using motor-suppressant effect of baclofen as an index of GABA_B receptor function (McManus and Greenshaw, 1991). In contrast, it has been shown that chronic antidepressant treatments enhance baclofen induced hypothermia in mice (Gray et al., 1987). Concerning these data, the differences between the protocols used, including treatment regimen, routes of administration and the species used could explain these discrepancies. Therefore, it has been postulated that motor-suppressant and hypothermic effect of baclofen recruit different subpopulation of neurons (Jacobson and Cryan, 2005). Consequently, we can presume that chronic antidepressant may affect differentially these two subpopulations.

Despite these discrepancies, the recent development of GABA_B receptor engineered mice (Schuler et al., 2001; Gassmann et al., 2004) will provide a useful tool for a better understanding of GABA_B receptor function in antidepressant action. Moreover, further studies are required in order to dissect the multiplicity of physiological function underlied by GABA_B receptors.

1.3.3 Role of GABA_B receptors in addiction.

1.3.3.1 Addiction: Definition.

Drugs dependence is one of the major public health issues in today's society. Recent surveys such as the National household survey on drug abuse revealed that the prevalence of drugs abuse among US adults aged 12 years or older is 29.5% for nicotine abuse, 5.9 % for heavy alcohol abuse and 7.1% for illicit drug abuse (see www.drugabusestatistics.samhsa.gov/nhsda/2k3nsduh/2k3Results.htm). A study prepared by The Levin Group for the National Institute on Drug Abuse and the National Institute on Alcohol Abuse and Alcoholism estimated the total economic cost of alcohol and drug abuse to be \$245.7 billion for 1992 (see www.whitehousedrugpolicy.gov/publications/index.html). Finally, addiction has recently been proposed to be categorized as a chronic medical illness (McLellan et al., 2000).

Addiction can be defined as a chronic disorder that manifests as a psychological compulsion for the affected individual to maintain drug administration without being able to control or reduce intake. Clinically, psychiatrists distinguish at least two different disorders associated with drug intake, the “drug dependence” that is often used synonymously with addiction and “substance abuse” (DSM-IV). In addition to compulsive use of drugs, “drug dependence” include several other symptoms including the tolerance and the withdrawal syndrome observed following chronic use and abstinence respectively (see Table 5). Tolerance is defined by the necessity to administer a drug in increasing doses in order to achieve the same effect. Concerning withdrawal, it represents the physical aspects of drug dependence and can be defined by the repertoire of aversive symptoms when the abused drug is suspended, including agitation, tremor, insomnia and anxious states Although it is currently not described as a required criterion for drug dependence in the DSM-IV, sensitization has

been proposed as key element of drug dependence (Robinson and Berridge, 1993). Sensitization can be defined as the increased response to drug that follows its repeated, intermittent presentation (Robinson and Berridge, 1993). Conversely, “substance abuse” is simply excessive use of a drug or use of a drug for purposes for which it was not medically intended (see Table 5.). In addition, “substance abuse” doesn’t require the development of tolerance or withdrawal (see Table 5.). However, it is important to note that substance abuse may lead to addiction or substance dependence.

| Substance abuse | Drug dependence. |
|--|--|
| <p>A maladaptive pattern of substance use leading to clinically significant impairment or distress, as manifested by one or more of the following occurring over the same 12-month period.</p> <ol style="list-style-type: none"> 1. Recurrent substance use resulting in a failure to fulfill major role obligations at work, school, or home. 2. Recurrent substance use in situations in which it is physically hazardous. 3. Recurrent substance-related legal problems. 4. Continued substance use despite having persistent or recurrent social or interpersonal problems caused by substance. | <ol style="list-style-type: none"> 1. Tolerance. 2. Withdrawal. 3. The substance is often taken in larger amount over a longer period than was intended. 4. Any unsuccessful effort or persistent desire to cut down or control substance use. 5. A great deal of time is spent in activities necessary to obtain the substance or recover from its effects. 6. Important social, occupational, or recreational activities given up or reduced because of substance use. 7. Continued substance despite the knowledge of or having had a persistent or recurrent physical or psychological problem that is likely to be caused or exacerbated by the substance. 8 Three or more symptoms occurring during the last year. |

Table.5. Diagnostic criteria for substance abuse and drug dependence (DSM-IV, the American Psychiatric association).

Tableau 5. Critère de diagnostique pour les abus de substances et la dépendence.

Regarding the pharmacological treatment of addictive disorders, the multiplicity of primary sites of action of drugs of abuse has led to the thinking that it would be difficult to try to treat all different drug dependences with a common treatment (Heidbreder and Hagan, 2005). Thus, during the last two decades, several medications have been developed for specific drugs of abuse. Currently, there are at least three different approaches for the pharmacotherapeutic treatment of addiction. The first strategy consists of treating the disorder by mimicking drug action. This strategy includes methadone and buprenorphine for heroin addiction and nicotine replacement, such as patch or gum, for nicotine addiction. The first and the best established example of this approach is methadone, a slow-onset, long-acting μ -opioid receptor agonist. Thus, at a specific dose, addicts on methadone have a low level of sustained activation of opioid receptors limiting the craving and consequently allowing the patient to reengage in social activities (Although, the patient can be maintained for many years using appropriate doses, the major caveats of this approaches is that the patient is still being exposed to opiates). The second approach consists in the blockade of drugs target, such as μ -opioid receptor for heroin addiction. Thus, naltrexone, an antagonist with high affinity for μ -opioid receptor, blocks the ability of opiates to produce their many effects including addiction. Nevertheless, its efficacy is relatively limited and its use is usually confined to the “white collar “ addicted, including physicians or nurses addicted to opiates (Roth et al., 1997). The last approach consists in the blockade of the addiction process. Thus, naltrexone as been also shown to be effective in alcoholism-related disorders (Volpicelli et al., 1992). Indeed, preclinical studies have demonstrated that alcohol’s addictive action might be mediated by opioid receptor (Modesto-Lowe and Fritz, 2005). Despite the relative wide amount of medications against addictive disorders, a better understanding of adaptative physiological changes involved in subsequent to chronic drug exposure, of individual genetic susceptibility

and for the environmental factor underlying intake of abused drugs might be helpful in the development of new pharmacological therapeutic.

1.3.3.2 Animal models of addiction.

Although drug addiction might be, as compared to other psychiatric diseases, relatively easy and reliably measurable in laboratory animals, it seems to be difficult to reproduce the entire symptomatology of this pathology within a single animal model. Thus, several models have been developed to investigate a single pattern of symptoms, such as withdrawal, tolerance, sensitization or relapse behaviour. However, the majority of paradigms, including place preference, self-administration or intracranial self-stimulation, are mainly designed in order to appreciate the reinforcing properties of drugs (see below), they can't be considered as model of addiction per se. Nevertheless, these models provides interesting tools in order to investigate the capacity of potential anti-addictive therapeutic to attenuate reinforcing properties of drugs.

Locomotor Activity

In addition, to enhancing cerebral dopamine release, drugs of abuse increase the locomotor activity of animals (for review see (Kalivas and Stewart, 1991). Indeed, it has been speculated that mesolimbic dopaminergic system mediate both the rewarding and the locomotor activity stimulating effects of various abused drugs (for reviews see (Wise and Bozarth, 1987; Wise and Rompre, 1989). Lesion based studies demonstrated that selective 6-OHDA-induced destruction of mesolimbic dopamine neurons results in abolition of psychostimulant-induced locomotor activity in rats (e.g. (Kelly et al., 1975)) suggesting that locomotor activity might be considered as a behavioural index of activation of the dopaminergic system. Thus, an extensive number of studies have assessed the effects of potential anti-addictive agents on the hyperactivity elicited by drugs of abuse. For example, Tessari demonstrated that MPEP, a metabotropic glutamate 5 receptor antagonist, blocked the

hyperlocomotion elicited by a single administration of nicotine (Tessari et al., 2004). Nevertheless, there are several caveats in using this paradigm as a surrogate for the rewarding aspects of abused drugs. Pharmacological agents with muscle relaxant properties can be considered as “false positive” in this test. One approach to overcome such issues is to combine such locomotor paradigms with neurochemical analysis of brain dopamine release, via microdialysis (Kuczenski et al., 1995), or analysis of activity of mesolimbic system, via c-fos analysis (Dalia and Wallace, 1995). Finally, this test is not specific to addictive disorders but to all pathologies relative to hyperdopaminergic alterations. Indeed, locomotor based assays have been extensively used in schizophrenia-related research (Beninger, 1983).

Locomotor sensitization

As mentioned previously, tolerance and sensitization phenomenon are both key components of the behavioural repertoire of addictive disorders. In laboratory animals, repeated treatment with opioids or psychostimulants, including cocaine and amphetamine, has been shown to elicit these two phenomena, depending of the dose and the regimen used (Stewart and Badiani, 1993). Classically, intermittent repeated administration of drugs elicits sensitization whereas continuous administration of drugs results in tolerance phenomenon. A behavioural manifestation of sensitization to many drugs of abuse is progressive and enduring enhancement in motor stimulant effects elicited by repeated administration of drugs. Although the relevance of behavioural sensitization as a model of addiction is matter of debate, Robinson and Berridge have proposed that sensitization may play a role in some of persistent features of drug abuse, such as drug craving and compulsive drug-seeking behaviour (Robinson and Berridge, 1993). Regardless of these considerations, behavioural sensitization paradigms is, currently, used in order to investigate long-lasting molecular changes induced by repeated administration of drugs abuse (Nestler and Aghajanian, 1997; White and Kalivas, 1998). Using this paradigm combined with molecular analysis, Nestler and collaborators have

demonstrated that repeated administration of cocaine elicit both, pointed mutation of DARPP-32 attenuated both behavioural sensitization to cocaine and its associated accumulation in nucleus accumbens, suggesting that DARPP-32 might be involved in behavioural and molecular adaptation induced by repeated administration of cocaine (Zachariou et al., 2005). Thus, this behavioural sensitization might be an elegant approach to assess the effects of potential anti-addictive medications on long-lasting changes induced by repeated treatment with drugs of abuse. For example, γ -vinyl gaba (Vigabatrin), an irreversible inhibitor of the enzyme GABA transaminase, have been shown to alter the acquisition and expression of cocaine-induced sensitization (Gardner et al., 2002). The major limitation of this approach is that drugs are passively administered, limiting his construct validity. In addition, several studies have been shown that passive vs active repeated administration may elicited different molecular and physiological adaptation (Jacobs et al., 2003).

Place conditioning

Another commonly used paradigm to evaluate rewarding effects of drugs of abuse is place conditioning (see review (Tzschentke, 1998). The place conditioning paradigm is based on the principal that was first introduced by Pavlov, that environmental cues that originally possess no incentive salience could acquire such salience by virtue of being repeatedly paired with affective stimuli. In this case, animals would learn to approach or avoid environmental stimuli which have been repeatedly paired with rewarding or aversive events. These responses would be named conditioned place preference (CPP) or conditioned place aversion (CPA). Typically, a conditioned place preference apparatus for rodents consists of at least two compartments, one of which is paired with the administration of a drug of interest, whereas the other associated to vehicle. After the conditioning the animals will be allowed to choose between the two compartments (see review (Tzschentke, 1998). If the animals spend more time in previously drug-paired compartment the animals displays CPP, if they spend more

time in vehicle associate compartment the animals displays CPA. In the context of addiction, the CPP paradigm has been extensively used to appreciate the rewarding properties of drugs (Carr and White, 1983). Thus, most drugs of abuse, such as, morphine, heroin, cocaine, amphetamine, nicotine, alcohol and cannabinoid agonist, have been described to elicit CPP (Stewart and Grupp, 1981; Mucha et al., 1982; Spyraki et al., 1982; Fudala et al., 1985; Lepore et al., 1995). Consequently, several groups have investigated the effect of potential anti-addictive compound on the CPP-elicited by drugs. For example, a recent study demonstrates that ultra-low doses of naloxone blocked the CPP to morphine (Olmstead and Burns, 2005). In addition, the place conditioning model provides also an interesting tool to investigate withdrawal phenomenon. Thus, buprenorphine, a treatment for opiate dependence, has been shown to block the opiate withdrawal-induced conditioned place aversion in rats (Stinus et al., 2005). Recently, this model was also adapted in order to investigate relapse behaviour by the reinstatement of CPP triggered by stress or priming administration of drugs of abuse (Kreibich and Blendy, 2004; Romieu et al., 2004; Popik et al., 2005; Ribeiro Do Couto et al., 2005). Although place conditioning might be viewed as a powerful paradigm to investigate addictive disorders, there are several potential caveats associated with its used. Firstly, this paradigm is devoid of construct validity, mainly because it has not been validated as protocol for measuring rewarding properties of drugs in human (Bardo and Bevins, 2000). In addition, this paradigm has been shown to have a huge learning component, mainly amygdala dependent (White and McDonald, 1993). Thus, NMDA antagonist have been shown to alter the acquisition of ethanol and morphine induced conditioning preference (Biala and Kotlinska, 1999; Ribeiro Do Couto et al., 2005), suggesting that agent with amnesic properties would be considered as a false positive in this paradigm.

ICSS (Intracranial self stimulation)

As mentioned previously, ICSS was the first experimental tools to investigate brain reward system and provides a direct measure of brain reward function (Olds and Milner, 1954; Phillips et al., 1989; Wise et al., 1992). In this paradigm, animals are trained to perform an operant (press a lever, nose poke, turn a wheel, head-dip) in order to obtain electrical stimulation in the so-called “pleasure centers” (see above). As ICSS directly activates the brain reward pathways, there is no satiation, tolerance, or sensitization to its rewarding effects (Phillips et al., 1989; Markou and Koob, 1991). The other main advantage of this paradigm is that it provides a quantitative measure of reward that was demonstrated to be extremely stable over periods of months under baseline conditions (see (Phillips et al., 1989; Wise et al., 1992; Kornetsky, 2004). Different drugs of abuse, including cocaine, morphine, heroin, amphetamine, cocaine, phencyclidine, all reduce the threshold current for ICSS (Kornetsky, 2004). Thus, several groups have investigated the effects of potential anti-addictive drugs on these parameters. For example, the reduction of intracranial self stimulation reward thresholds induced by cocaine have been demonstrated to be counteracted by metabotropic glutamate 5 receptor antagonist (Kenny et al., 2005) or $\alpha 7$ nicotinic receptor antagonist (Panagis et al., 2000). Interestingly, low dose of bupropion, an antidepressant use in the treatment of nicotine addiction, have been also shown to block the reduction of intracranial self stimulation reward thresholds induced by acute nicotine injection (Cryan et al., 2003a). In addition, ICSS paradigm have been widely use in the investigation of withdrawal symptoms. Indeed, ICSS has provided investigators with a reliable behavioural readout to assess such alterations in brain reward after cessation of drug administration (Leith and Barrett, 1976; Markou and Koob, 1991; Cryan et al., 2003b; Spielowoy and Markou, 2003). For example, it has been shown that withdrawal from chronic nicotine induces a dramatic decrease in brain reward function as reflected by elevations in brain reward thresholds, these elevation has been have

been shown to be a great model of anhedonia, a core syndrome of withdrawal (Epping-Jordan et al., 1998; Harrison et al., 2001; Semenova and Markou, 2003). More recently, Cryan and collaborators, using ICSS, demonstrated that bupropion counteracted the anhedonic states induced by cessation of chronic nicotine administration (Cryan et al., 2003a).

Self administration

The most elaborated model in experimental research is self-administration paradigm. In this case rats, monkeys and more recently mice earn an intravenous or intracerebral infusion of the drug of interest by execution of instrumental response, i.e. lever pressing, nose pokes or head dipping. This approach is considered to be one of the best measures of reinforcing properties of a drug in the brain because it appears to be analogous to self-administration observed in humans. Thus, the majority of drugs of abuse, such as cocaine, morphine, heroin, alcohol, nicotine, and cannabinoid receptor agonists; have been shown to elicit self-administration in rats (Pettit et al., 1984; Vaccarino et al., 1985; Corrigall and Coen, 1989; Koob, 1992; Martellotta et al., 1998b). Initially, several groups investigated the reinforcing properties of drugs used a “fixed ratio” schedule of self administration. In this approach, the number of responses required for an infusion of drug is set at fixed number. However, “fixed ratio” paradigm might be viewed as measuring the fact of reinforcement, but not the degree of reinforcing properties (Arnold and Roberts, 1997). In other terms this schedule indicates the presence of reinforcing properties of drugs without measuring its rewarding properties per se. In addition, the other strategy for measuring the degree of reinforcing efficacy is drug self-administration under “progressive ratio” reinforcement (Stretch et al., 1971). In this case, animals are required to increase the number of response for each successive reinforcement. The reinforcing efficacy of the drug is determined by the measure of the breaking point, defined by the largest ratio of responses: reinforcements that the subjects complete or the number of responses: reinforcements ratios completed by the

subject per session. Interestingly, it has been shown that breaking point vary dose-dependently (more the dose is high, more the breaking point is elevated). Consequently, the paradigm was extensively used in order to assess the effects of potential anti-addictive drugs on reinforcing properties of drugs of abuse. For example, MPEP, a metabotropic glutamate 5 receptor antagonist, has been shown to decrease the breaking point maintained by nicotine and cocaine, suggesting that this compound might attenuate reinforcing properties of drugs of abuse (Paterson and Markou, 2005). More recently, self-administration schedules have been adapted to investigate the phenomenon of relapse. After a behavioural extinction of drug-taking habit, the reinstatement of drug administration can be triggered in laboratory animals by stimulus, including drug, stress or drug paired-environmental cues (Shalev et al., 2002). This last approach is analogous to the behavioural aspects observed during human relapse (Epstein and Preston, 2003). To conclude, the self-administration paradigm could be considered as the most powerful tool to investigate addictive disorder, mainly because it exhibit a high face and construct validity and a particularly high reliability. However, its main disadvantage is largely technical, because it requires survival surgery and sophisticated testing apparatus.

1.3.3.3 Neurobiology of addiction.

Despite their diverging primary sites of action, all drugs of abuse can lead to dependence, suggesting that all of them may have a common biological substrate underlying their mechanism of action i.e. the brain reward system. Initially, Olds and colleagues demonstrated that rodents work to electrically stimulate relatively discrete areas of brain, which demonstrates the existence of brain-reward system. In the rat, several brain structures have been shown to elicit intracranial self stimulation including, septal nucleus, the medial forebrain bundle and the mesolimbic dopaminergic system (Porrino et al., 1984; Phillips et al., 1989).

Indeed, it is now generally agreed that dopaminergic system play a key role in reinforced behaviours and consequently in addictive disorders. Briefly, the midbrain dopamine system is composed of two major projections: the nigrostriatal system, which projects from the substantia nigra to the corpus striatum, and the mesocorticolimbic dopamine system, which projects from the ventral tegmental area (VTA) to the nucleus accumbens, olfactory tubercle, frontal cortex, and amygdala. It is the mesocorticolimbic system that has been primarily implicated in the reinforcing actions of drugs of abuse. Virtually all drugs of abuse, including psychostimulant, opioids and nicotine share the common ability to increase the release of dopamine in nucleus accumbens and in the caudate putamen (Bassareo et al., 1996; Pontieri et al., 1996; Tanda et al., 1997; Cadoni and Di Chiara, 1999). Nevertheless, the effects of addictive drugs on brain dopaminergic activity seem to be stronger in the nucleus accumbens than in caudate putamen (Imperato et al., 1987; Imperato et al., 1988). In addition, several groups have performed selective dopaminergic lesion of mesolimbic system in order to confirm the key role of this system in drug reinforcement/reward. Using 6-OHDA, Roberts and collaborators demonstrated that dopaminergic lesions of the nucleus accumbens or VTA decreased cocaine-maintained self-administration (Roberts et al., 1977; Roberts and Koob, 1982). In line with these findings, 6-OHDA lesions of the nucleus accumbens have also been shown to decrease amphetamine self-administration (Lyness et al., 1979).

Although these data support the role of VTA and nucleus accumbens in the reinforcing action of drugs of addiction, these structures also participate in the motivation to seek the drug and in the reinstatement of drug administration. Indeed, inactivation of VTA and the core compartment of the nucleus accumbens using the GABA agonists' baclofen and muscimol prevented cocaine-primed drug-seeking behaviour in an animal reinstatement model of relapse (McFarland and Kalivas, 2001). In addition to these structures, several others brain areas have been implicated in relapse phenomenon. Thus, MacFarland and collaborators have

demonstrated a role for a number of regions including the extended amygdala (including the central nucleus of the amygdala, ventral bed nucleus of the stria terminalis), the shell part of the nucleus accumbens, and the prefrontal cortex in the reinstatement of cocaine self-administration by foot-shock stress, suggesting that these structures would participate in drug seeking behaviour. Similarly, imaging studies have shown that craving for cocaine is associated with metabolic activation of the prefrontal cortex, amygdala, and striatal complex in addicted patients (Childress et al., 1999; Volkow et al., 1999; Kilts, 2001). In addition, recent studies have reported changes in orbitofrontal activity in patients addicted to cocaine. Although these subjects exhibited a reduction of orbitofrontal cortex and cingulate gyrus compared to healthy subject, they have hyperactivity of the orbitofrontal cortex when they are tested shortly after last cocaine use or during drug-induced craving (Volkow and Fowler, 2000). In fact, this groups postulated that hypermetabolism of orbitofrontal may contribute to compulsive behaviours in patients with obsessive compulsive disorders (Volkow and Fowler, 2000). Based on these different findings Kalivas and Volkow (2005) suggested recently a working model substrate involving in addiction (fig.1.6A) and in the reinstatement (Fig.1.6B.) of drug taking(Volkow, 2005).

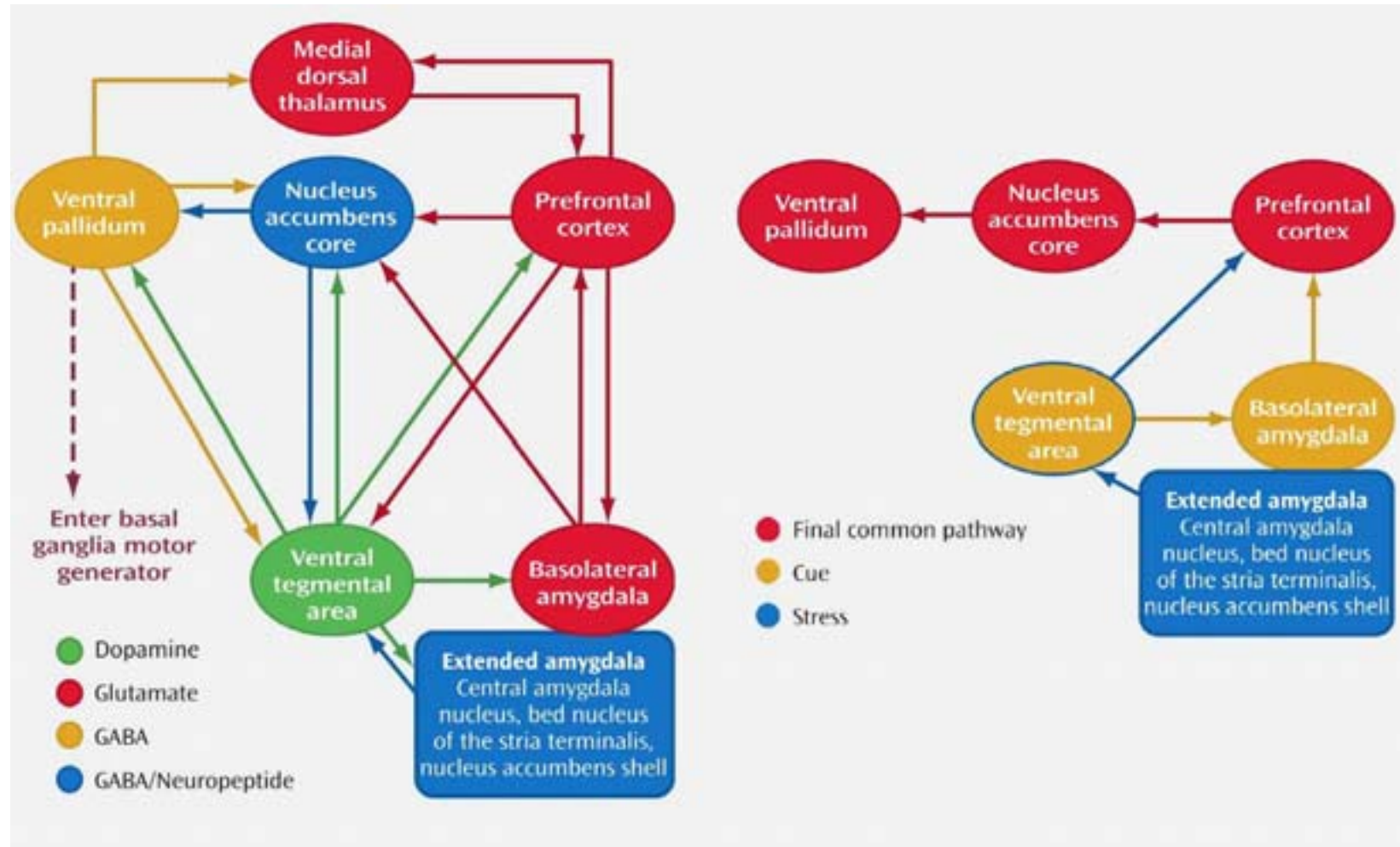


Fig 1.6. Schematic diagram of neural substrates involved in addiction (A) and in reinstatement phenomenon (B).

Fig 1.6. Circuits des substrats neuronaux impliqués dans l'addiction et les phénomènes de rechutes

Although it is undisputed that dopamine plays a key role in addictive behaviours, it appears that other neurotransmitters, including glutamate and GABA, might be involved in these disorders, as it is reported in fig 1.6A. Furthermore, certain neuropeptides, such as corticotropin-releasing factor (CRF) seem to become involved in following chronic drug administration. Thus, it has been demonstrated that injection of CRF antagonist in the central nucleus of amygdala would reverse anxiogenic-like effect of ethanol and opiate withdrawal (Koob, 1996). More recently, several groups have investigated the impact of repeated drug administration on several proteins in order to appreciate the long-lasting molecular changes involved in addictive disorders. At this point, one of the most extensively studied mediators of psychostimulant-induced molecular and behavioural changes is the dopamine and adenosine 3', 5'-monophosphate-regulated phosphoprotein (DARPP-32) (Greengard et al., 1999). Additionally, two different transcription factors have been pointed to be particularly regulated by repeated administration of drugs of abuse: cAMP responsive element binding protein (CREB) and Δ fosB (Nestler and Aghajanian, 1997; Blendy and Maldonado, 1998).

Dopamine and cAMP Regulated Phosphoprotein of 32-kD (DARPP-32) is a converging point of cAMP signaling activated by D1 receptors and the Ca²⁺/Calmodulin pathway activated by NMDA receptors in the Nucleus Accumbens (Liu and Graybiel, 1996; Greengard et al., 1999). DARPP-32 can be either an inhibitor of protein-phosphatase 1 (PP1) or protein kinase A, whether it is phosphorylated on Threonine 34 (Thr34-DARPP-32) or Threonine-75 (Thr75-DARPP-32), respectively. Acute cocaine exposure increases the levels of Thr34-DARPP-32 in NAc, through a PKA-dependent mechanism (Nishi et al., 1999b), while chronic exposure favors the phosphorylation of DARPP-32 on Thr-75 (Bibb et al., 1999). Loss of DARPP-32 in mice decreases the sensitivity to stimulant and rewarding effects

of cocaine, supporting the role of DARPP-32 activation in addictive disorders (Hiroi et al., 1999; Zachariou et al., 2002).

CREB is a member of the bZIP superfamily of transcription factors, including CREM (cAMP response element modulator) and ATF-1 (activating transcription factor 1). CREB activation via phosphorylation at Ser-133 is required to elicit transcription. Furthermore several signal transduction cascades, including the cAMP pathway via protein kinase A, intracellular Ca^{2+} via Ca^{2+} calmoduline-dependant kinases (CaMK) the Ras/extracellular signal regulated kinase (ERK) protein kinase pathway. Initially, it has been demonstrated that repeated, but not acute, administration of morphine upregulated CREB expression in the locus coeruleus (Guitart et al., 1992). In line with these data, mice containing targeted mutation of the α and Δ isoform of the CREB exhibited attenuated physical symptoms of morphine withdrawal (Maldonado et al., 1996), confirming the role of CREB in the modulation of physical opiate dependence. In addition to its role in locus coeruleus, accumbal CREB have been shown to be implicated in addictive disorders. Indeed, chronic cocaine increases CREB phosphorylation in the NAc (Terwilliger et al., 1991; Kano et al., 1995); whereas, viral-mediated overexpression of CREB in this region decreases the reinforcing properties of cocaine (Carlezon et al., 1998). Moreover, overexpression of a mutant form of CREB increased the reinforcing properties of cocaine (Carlezon et al., 1998). Similar effects are seen in mice containing targeted mutation of the α and Δ isoform of the CREB, which are more responsive to the reinforcing effects of cocaine compared to wild-type littermates (Walters and Blendy, 2001). Taken together, these data suggest that CREB may contribute to reinforcing but also dysphoric effects of drugs. More recently, Kreibich and Blendy demonstrated that CREB $\alpha\Delta$ mutant mice exhibited a deficit in the reinstatement of cocaine-induced place preference triggered by stress but not by cocaine administration (Kreibich and

Blendy, 2004) suggesting that CREB might be involved in relapse or drug seeking behaviours.

Δ fosB is a truncated splice variant of the full-length FOSB, a member of the fos family of transcriptional factors, including c-fos, fosB, fos-related antigens 1 and 2 (Fra-1 and Fra-2). Fos family members heterodimerize with Jun family transcription factors to form an activator protein (AP-1) complex, that could induce or repress transcription, depending on the specific AP-1 binding site. Although acute exposure to drugs of abuse, such as cocaine, have been shown to elicit c-fos induction in the nucleus accumbens and dorsal striatum (Graybiel et al., 1990; Young et al., 1991), these protein decline rapidly toward basal levels within 8-12h of drug exposure. Conversely, it appears that although Δ fosB is modestly expressed acutely, it exhibits a particularly high stability and demonstrates in vivo half-life of weeks (Chen et al., 1997). Thus, repeated administration of several drugs of abuse, including cocaine, amphetamine, opiates, ethanol, nicotine and phencyclidine have been shown to induce an accumulation Δ fosB in the nucleus accumbens and dorsal striatum (Hope et al., 1994; Nye et al., 1995; Pich et al., 1997; Kelz and Nestler, 2000). In order to confirm the role of Δ fosB in addictive behaviour, several groups have investigated subsequently the effect of genetic manipulation of Δ fosB in several animal models of addiction. Thus, mice expressing specifically Δ fosB in the nucleus accumbens and dorsal striatum exhibited sensitized behavioural response to cocaine (Kelz et al., 1999). Similarly, these mice exhibit a hypersensitivity to rewarding properties of cocaine and morphine place preference and self-administration paradigms (Kelz et al., 1999; Kelz and Nestler, 2000; Colby et al., 2003). Finally, these mice work harder to self-administer cocaine in a progressive ratio self-administration assay, suggesting that Δ fosB may sensitize animals to the incentive motivational properties of cocaine and thereby lead to a propensity for relapse after drug withdrawal (Colby et al., 2003). As expected, mice expressing the dominant negative

antagonist of antagonist of Δ fosB, Δ c-Jun, in the nucleus accumbens and dorsal striatum exhibit an attenuate sensitivity to cocaine in place-conditioning paradigm (Peakman et al., 2003). Thus, these data indicate that the accumulation of Δ fosB might contribute to long-lasting change induced by repeated administration of drugs of abuse and in their long term reinforcing properties.

Because both CREB and Δ FosB are transcription factors, we can speculate that their downstream effects could participate to the neuroplasticity triggered by repeated administration of drugs of abuse. For example, it has been shown that mice over-expressing Δ FosB exhibit upregulation of the Cdk5, in the remodeling of neuronal processes (Benavides and Bibb, 2004). CREB has been shown to modulate dynorphin, an opioid peptide expressed in a subset of accumbal neurons (Cole et al., 1995). Dynorphin has been shown to be particularly involved in the phenomenon of dysphoria during the withdrawal from cocaine (Shippenberg and Rea, 1997). Nevertheless, further studies are require to confirm an eventual role of these transcriptional factor in regulation of gene primordial to neuroplasticity such as BDNF or receptors involved in long term potentiation or depression.

1.3.3.3 Clinical studies implicating GABA_B in addiction

Emerging clinical data indicate that decreased GABAergic function may represent a major etiological step in the development and maintenance of the addictive state suggesting that manipulations that target the GABA system may be useful as treatments for addiction. For example, it has been demonstrated that the alcoholic withdrawal state induce is associated with reduced plasma and cerebrospinal fluid GABA (Coffman and Petty, 1985; Adinoff et al., 1995). In addition recent studies, using brain imaging technology, reported decrease in of GABA concentration in dorsal prefrontal cortex and occipital cortex of cocaine abusers (Hetherington et al., 1997; Ke et al., 2000).

Concerning alcoholism, preliminary human trial with baclofen has been somewhat encouraging. In a preliminary study, Addolorato and collaborators investigated the effects of short-term baclofen administration on alcoholic patients (Addolorato et al., 2000). Thus, they demonstrated that baclofen, administered for 4 weeks, reduced alcohol craving from the first week the drug administration and remained so throughout the entire treatment period. They also reported that most of subjects exhibit less obsessional thinking about alcohol. In line with these results, Flannery and collaborators, using open-label design, demonstrated that baclofen treatment for, 12 weeks, decrease significantly the number of drinks per drinking day and the number of heavy drinking days and in consequence increase abstinent days (Flannery et al., 2004). In addition, they also reported that baclofen treatment significantly decreased anxiety and craving. Interestingly, a single self-case report by physician reported that baclofen reduces the severity of alcohol craving and produces complete abstinence for 9 consecutive months (Ameisen, 2005).

For opiate addiction, a 12-week, double-blind, placebo controlled, parallel-group experiment in recently detoxified opioid-addicted patients demonstrated that baclofen produced significantly higher treatment retention and non-significant but favorable trend to reduce opioid craving and self-reported alcohol and opiate use (Assadi et al., 2003). Nevertheless, inspection of opiate levels in urine failed to demonstrate differences between baclofen-treated and placebo treated patients ref.

Regarding addiction associated with psychostimulant, such as cocaine, a preliminary open-label, 18 week study revealed that baclofen produced a reduction in both cocaine craving and use, which was verified by urinalysis (Ling et al., 1998). However, patients didn't report an effect of baclofen of cocaine "highs" states. More recently, Shoptaw and collaborators, using a follow-up 16-week, double-blind, placebo-controlled study in 70 patients, demonstrated that baclofen significantly reduced cocaine use which was verified by

urinalysis (Shoptaw et al., 2003). Surprisingly, they also shown that baclofen is more effective in subjects with a high consumption of cocaine compared to subjects with low consumptions. In order to confirm the potential anti-addictive properties of baclofen, a recent study , designed with 7 non-treatment seeking volunteers with recent histories of cocaine use, demonstrated that baclofen failed to affect behavioural and cardiovascular effects of intranasal administration of cocaine (Lile et al., 2004). Interestingly, a study, using PET (Positron Emission Tomography), showed that cocaine users given baclofen 1-2 hours before watching a video of cocaine cues showed a reduced cocaine craving and less activation of anterior cingulate and amygdala compared to placebo treatment (Brebner et al., 2002). Consequently, it is becoming evident that GABA_B receptor is involved in the phenomenon of relapse and craving.

Taken together, these studies confirmed that GABA_B activation, via treatment with an agonist, can be viewed a plausible and rational pharmacology strategy for addictive disorders and that GABA_B receptor may play a role in addictive disorders. Nevertheless, the majority of these studies used the prototypical GABA_B receptor agonist which has been demonstrated to have a wide range of side-effects including sedation and muscle relaxant properties (Bowery et al., 2002). Although several reports suggested that tolerability might be adequate, a few reports demonstrated that abrupt cessation of baclofen treatment could elicit withdrawal, including hallucinations, fever, delirium, hypotension, bradycardia (Peng et al., 1998). At this point, the recent development of GABA_B receptor positive modulator, see section 1.2.4.3, could represent a more interesting approach to avoid these side-effects.

1.3.3.4 Preclinical studies on the role of GABA_B receptors in addiction

It has been long known that GABA plays an important role in the modulation of dopaminergic reward circuit. Thus, GABAergic neuronal inputs have been shown to regulate neural tone within the ventral tegmental area (Kalivas et al., 1990) and the nucleus accumbens

(Christie et al., 1987), suggesting that GABA_B receptors might be involved in “reward system” and addictive behaviours. Thus, intra-VTA infusion of baclofen has been shown to block the enhancement of nucleus accumbens induced by the opioid agonist DAMGO (Kalivas et al., 1990); confirming that activation of GABA_B receptors on dopaminergic cell counteract meso-accumbens dopaminergic function. More recently, systemic administration of baclofen has been demonstrated to attenuated cocaine-, nicotine, and morphine-induced enhancement of nucleus accumbens dopamine as measured by microdialysis (Fadda et al., 2003), suggesting that baclofen might alleviate reinforcing properties of these drugs of abuse in behavioural paradigm. Thus, in contrast to anxiety and depression, an extensive number of studies have assessed the effects of GABA_B receptor ligands in animal models related to addictive disorders.

As we discussed previously, locomotor activity is critically dependent on activation of dopaminergic neurotransmission. Thus, several investigators have assessed the effects of GABA_B receptor activation on the locomotor stimulation induced by psychostimulants or another drugs of abuse. Using locomotor activity as a potential behavioural index of dopaminergic activity, Cott and collaborators demonstrated that baclofen eliminates the hyperactivity induced by acute administration of alcohol (Cott et al., 1976). Similarly, systemic administration of baclofen has been demonstrated to attenuate hyperactivity induced by apomorphine, a dopamine D1-D2 receptor agonist, and d-amphetamine (Phillis et al., 2001). Although these results can't provide information on the effects of GABA_B receptor activation on the reinforcing properties of drugs, they support the fact that GABA_B receptor activation might attenuate dopaminergic stimulation elicited by drugs of abuses. It is clear that the sedative effects of baclofen may confound interpretation of such data.

In self-administration paradigms, baclofen has been shown to dose dependently reduces cocaine self-administration under a “fixed ratio” reinforcement (Shoaib et al., 1998;

Campbell et al., 1999; Di Ciano and Everitt, 2003), and induced a dose-dependent reduction of progressive ratio breaking point for intravenous cocaine (Roberts et al., 1996). Similarly, baclofen has also been demonstrated to reduce the breaking point maintained by methamphetamine and nicotine (Ranaldi and Poeggel, 2002; Markou et al., 2004), suggesting that when is administrated systemically, baclofen attenuates the reinforcing properties of these drugs. In addition, a few studies have shown that micro injection of baclofen in the ventral tegmental area also inhibits also nicotine and cocaine self-administration (Shoaib et al., 1998) (Corrigall et al., 2000). As expected, the highly selective GABA_B receptor CGP44532 shows similar anti-addictive properties as seen with baclofen in cocaine self-administration paradigm, decreasing the progressive ratio breaking point maintained by cocaine (Roberts and Brebner, 2000). More recently, a study, using GABA_B receptors positive modulator CGP7930 and GS39783, reported that GABA_B receptor positive modulation suppresses the initiation of cocaine self-administration (Smith et al., 2004), as it was previously observed with baclofen (Roberts et al., 1996). Thus, these data suggested that GABA_B activation, via both agonist and positive modulator alters reinforcing properties of drugs in the self-administration paradigm.

As we previously mentioned in section 1.3.3.3, GABA_B receptor might be involved in the phenomenon of relapse. Thus, baclofen dose-dependently reduced cocaine-induced reinstatement triggered by re-exposure to cocaine (Campbell et al., 1999). In lines with these data, GABA_B receptor agonist, CGP44532, have been shown to inhibit cue-triggered relapse to nicotine seeking behaviour (Paterson et al., 2005). Finally, Hotsenpiller demonstrated that systemic baclofen administration cocaine-conditioned locomotion in rats (Hotsenpiller and Wolf, 2003) confirming the potential anti-relapse properties of baclofen.

Regarding the ICSS paradigm, baclofen, CGP44532, and GS39783, the GABA_B receptor positive modulator, have been shown to attenuate reinforcing properties of cocaine in this paradigm (Dobrovitsky et al., 2002; Slattery et al., 2005b). Nevertheless, Slattery and

collaborators reported that baclofen, but not GS39783, administration elevates ICSS reward thresholds in absence to cocaine suggesting anhedonic and/or sedative effect of baclofen at the doses used. Similarly results were obtained with CGP44532 (Macey et al., 2001).

In the place conditioning paradigm, microinfusion of baclofen in the ventral tegmental area blocks the acquisition of the morphine-induced place preference and both the acquisition and the expression of alcohol-induced place preference (Tsuji et al., 1996; Bechtholt and Cunningham, 2005). In addition, systemic administration of baclofen blocks the acquisition of morphine induced-place preference and both acquisition and expression of place preference elicited by d-methamphetamine (Li et al., 2001; Kaplan et al., 2003). Although these data strongly suggest that baclofen could attenuate reinforcing properties of drugs of abuse, it should be noted that the place preference has an important cognitive component. Thus, the effects observed systemically with baclofen could be partially due to its amnesic properties (Swartzwelder et al., 1987).

Finally, several groups assessed the effects of GABA_B receptor activation on the phenomenon of sensitization to drugs of abuse. Indeed, systemic injection of baclofen blocks both the establishment and the expression of behavioural sensitization to amphetamine (Bartoletti et al., 2005). Similarly, Broadbent and Harless reported that systemic injection of baclofen attenuate the establishment of behavioural sensitization to ethanol (Broadbent and Harless, 1999). More recently, two studies demonstrated an efficacy of local injection baclofen on behavioural sensitization to drugs of abuse. Leite-Morris demonstrated that baclofen injection in the ventral tegmental area blocks both establishment and the expression of morphine induced sensitization (Leite-Morris et al., 2004). Secondly, Steketee and Beyer demonstrated that intra-prefrontal cortex injection of baclofen attenuates the establishment of cocaine sensitization in rats, suggesting that GABA_B receptor of both structure might be involved in sensitization phenomenon (Steketee and Beyer, 2005). Taken together, these data

demonstrated that baclofen might also counteract long-lasting mechanism involved in sensitization phenomenon.

To conclude, this general overview of the effect of GABA_B receptor ligands in several model of addiction led to the belief that GABA_B receptor activation represents a potential new therapy for drug addiction. Nevertheless, the anhedonic-like effect of baclofen observed in the ICSS paradigm combined with its sedative properties could limit its widespread utility in the context of behavioural pharmacology. Thus, the encouraging result obtained using GABA_B receptor positive modulators in ICSS and self-administration paradigms support the use of this pharmacological approach for the assessment of the role of GABA_B receptor in addictive behaviours.

1.4 Specific Objectives of the Research

Although GABA_B receptors were first proposed to play a role in psychiatric disorders such as depression and anxiety over 20 years ago (Pilc and Lloyd, 1984), further progress in the field has been largely hampered by the lack of appropriate tools. Therefore, they have been little interest in the role of GABA_B in neuropsychiatric disorders in the decade preceding the initiation of my research for this thesis in 2002. The recent development of new pharmacological and genetic tools offers a novel opportunity to investigate their contributions in psychiatric disorders. Consequently, the aim of this thesis was to examine the role of GABA_B receptors in anxiety, depression and addiction, using these novel tools. We consciously decided to adopt a multidisciplinary approach to dissect the relevance of GABA_B receptors as a therapeutic target for all three of these psychiatric disorders, namely anxiety, depression and addiction. Furthermore, the comorbidity of these three disorders validated this approach (Markou et al., 1998).

In the first part of the present thesis, we evaluate the impact of targeted deletion of either receptor subunit, in order to confirm the conventional view that heterodimerization of GABA_{B(1)} and GABA_{B(2)} is a prerequisite for GABA_B receptor function. To this purpose, we assessed the effect of genetic ablation of either of GABA_B receptors subunit on hypothermic and motor deficit elicited by the prototypical GABA_B receptor baclofen. To investigate the contribution of GABA_B receptors to GHB action, we evaluated also the hypothermic response elicited by GHB in GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice.

Although GABA-mediated neurotransmission has long been known to have a crucial role in anxiety, there are only sporadic studies investigating the specific contribution of GABA_B in this pathology. This is largely because investigators have used baclofen for their investigations, which has a narrow window of efficacy before confounding side-effects are

manifested in anxiety paradigms. The recent development of $GABA_{B(1)}^{-/-}$ and $GABA_{B(2)}^{-/-}$ mice and $GABA_B$ positive modulator, offer a novel opportunity to investigate the role of $GABA_B$ receptors in anxiety. Thus, we assessed the effect of targeted deletion of either of $GABA_B$ receptor subunit in well validated models of anxiety, namely the light-dark box test, the staircase test and the elevated-zero maze. In order to corroborate the effect obtained in $GABA_{B(1)}^{-/-}$ and $GABA_{B(2)}^{-/-}$ mice pharmacologically, we assessed also the effect of a highly potent $GABA_B$ receptor antagonist in the light-dark test. Finally, we took the advantage that $GABA_B$ receptor positive modulators are devoid of side effects associated to $GABA_B$ receptor full agonist, to confirm prior findings supporting a anxiolytic like effect of $GABA_B$ receptor stimulation. Thus, we evaluate the effects of GS39783 in several paradigms of anxiety, acutely and chronically.

As mentioned in the introduction, there is growing body of evidence for a putative involvement of $GABA_B$ receptors in depressive disorders. Considering these prior studies, we hypothesized that genetic ablation of $GABA_B$ receptor might result in antidepressant-like phenotype in mice. To this purpose, we assessed the effect of targeted deletion of either $GABA_B$ receptor subunits in well validated model of antidepressant, namely the forced swim test and the tail suspension test. In order to exclude potential false positive result in these test due to hyperactivity, we secondly measured locomotor pattern of $GABA_B$ knock out animals in a new environment. In order to confirm the antidepressant-like phenotype of the $GABA_{B(1)}^{-/-}$ and $GABA_{B(2)}^{-/-}$ mice pharmacologically, we assessed the effects of both $GABA_B$ antagonist CGP56433A and $GABA_B$ receptor agonist in the FST and also measured their effects on locomotor activity. Finally, we investigated the interaction of $GABA_B$ receptors and serotonergic system in the context of depression. Thus, we evaluate the effects of $GABA_B$ receptor antagonist on the antidepressant like-effects of SSRIs. Further, we assessed the effects of $GABA_B$ receptors ligands on the behavioural effects of SSRI and the expression

of 5-HT_{1A} receptor mRNA in the hippocampus. Conversely, we also investigated the impact of pharmacological blockade or genetic ablation of serotonin transporter, on GABA_B receptor function using baclofen induced hypothermia as index of GABA_B receptor function.

Finally, we decided to investigate the role of GABA_B receptors on behavioural and molecular alteration relevant to addictive disorders. To this purpose, we assessed the effect of GABA_B receptor, via administration of baclofen or GABA_B positive modulator, on behaviour and molecular changes elicited by single and repeated administration of drugs of abuse. In a first experiment, we investigated the effect of GABA_B positive modulator and baclofen on hyperactivity and c-fos induction elicited by a single administration of cocaine. Secondly, we evaluated the ability of GS39783 to modulate behavioural sensitization to cocaine and its associated molecular adaptation, namely CREB and DARPP-32 activation and ΔFosB accumulation. In effort to recapitulate these effect in more ethological model of addiction, we decided, finally, to assess the effect of GABA_B receptors positive on conditioned place preference triggered by nicotine and its associated ΔFosB accumulation in nucleus accumbens.

CHAPTER 2 :GENERAL MATERIALS AND METHODS.

2.1 Animals.

2.1.1 Mice.

The GABA_{B(1)} and GABA_{B(2)} knockout mice were generated on a BALB/c genetic background as described previously (Schuler et al., 2001; Gassmann et al., 2004). In order to reduce the influence of strain effects all pharmacological studies were carried out in male BALB/c mice which were obtained from Charles River, France (Formally Iffy Credo). In addition, BALB/c mice have been shown to be highly emotional, or anxious, relative to other strains in several anxiety paradigm such as light-dark box or open-field test (Griebel et al., 2000; Kim et al., 2002). Furthermore, this strain has also been shown to be highly sensitive to the effects of chronic SSRI in forced swim test and novelty-induced hypophagia, confirming that the use of this strain is particularly relevant in anxiety and depression research (Dulawa et al., 2004). Nevertheless, this strain has been also demonstrated to be insensitive to psychostimulant properties of drugs of abuse (see section 6.1). Consequently, all experiment related to cocaine were carried out with C57BL/6J mice which were obtained from Charles River, France.

2.1.2 Rats.

Regarding the studies investigating the effect of role of GS39783 on nicotine-induced place preference, we choose male Wistars Rats (Charles River, France) as a robust place preference to nicotine had been previously validated in our laboratories.

2.2 Assessing GABA_B receptor function in vivo.

2.2.1 Baclofen-induced hypothermia.

Baclofen induces marked hypothermia which can be easily monitored using a rectal probe. This drop in temperature gives a robust indicator of the function of GABA_B receptors in vivo (Serrano et al., 1985; Gray et al., 1987; Jacobson and Cryan, 2005). Rectal temperature was measured to the nearest 0.1 °C by an ELLAB instruments (Copenhagen, Denmark) thermometer Model DM 852 by inserting a lubricated thermistor probe model PRA-22002-A (ELLAB, Copenhagen, Denmark) (2.2 mm diameter) 20 mm into the rectum; the mouse was hand held at the base of the tail during this determination and the thermistor probe was left in place for 15 s. Animals are habituated to the thermometer prior to administration of baclofen

2.2.2 Baclofen-induced impairment of motor coordination.

Rotarod test

Baclofen induces motor impairment which can be easily monitored using the rotarod test. This ability of baclofen to induce motor incoordination also gives a robust indicator of the function of GABA_B receptors in vivo (Schuler et al., 2001; Jacobson and Cryan, 2005). The rotarod apparatus consists of 28 mm diameter rod partitioned into five available lanes 58 mm wide to accommodate individual mice. The rotarod apparatus consists of a cylinder subdivided into five available mice positions of each 6 cm in diameter, which is positioned 30 cm above the Table and rotates at a speed of 12 rpm (Dunham and Miya, 1957). The mice were placed singly on the cylinder. On the day before the start of the experiment animals were trained over two separate sessions to stay on the rotarod for 300 seconds. During the test day the length of time each mouse remained on the cylinder (= 'endurance time', maximal score 300 sec) was measured.



Fig.2.1. The Rotarod apparatus.

2.3 Assessing anxiety behaviour in mice.

2.3.1 Light-dark box test.

The light-dark box test was carried out essentially as described previously (Holmes et al., 2002; Cryan et al., 2003c). This paradigm is one of the most widely used of exploratory-based approach avoidance conflicts tests in mice. It's based on the innate aversion of mouse to illuminated areas. The apparatus consisted of a clear Plexiglas cage (44 x 21 x 21 cm) separated into two compartments by a partition, which had a small opening (12 x 5 cm) at floor level. The open compartment was open topped made of transparent Plexiglas and brightly illuminated by a 60 W desk lamp overhead (approx 1000 Lux). The smaller compartment was 14 cm long and made from black Plexiglas. It was covered on top also by black Plexiglas. Mice were individually placed in the centre of the brightly lit compartment,

facing away from the partition and allowed to freely explore the apparatus for 10 minutes. The apparatus was cleaned thoroughly between subjects. The number of light-dark transitions, time spent in the light compartment and latency to enter dark were recorded by a trained observer, with transitions being the most reliable indicator of anxiety-like behaviour in the test (Crawley and Davis, 1982; Holmes, 2001).



Fig.2.2. The light-dark box.

2.3.2 Staircase test.

Like light-dark box paradigm, staircase test is also exploratory-based approach avoidance conflicts tests. This paradigm exploits the natural tendencies of mice to avoid height. The test was carried out essentially as described earlier (Simiand et al., 1984; Cryan et al., 2003c) and consists of placing an experimentally naïve mouse in an enclosed staircase with five steps made of grey plastic. Each step was 2.5 cm in height 7.5 cm in length and 11 cm in width. The apparatus was 45cm in length with one end 12 cm and the other 25 cm in height. The number of steps climbed and rearings made in a 3-min period was observed. The step-climbing count was increased every time the animal moved from one step to another in

the ascending direction. The apparatus was briefly wiped with a wet paper towel and dried between animals. Animals were moved to the testing room at least one hour prior to testing. The test has been validated using different anxiolytics (Simiand et al., 1984; Pick et al., 1996; Weizman et al., 1999) and has been used to examine anxiety-related phenotypes in genetically modified animals (Cryan et al., 2003c; Salas et al., 2003). The number of steps climbed and the rearing behaviour of the mice are recorded as measures of anxiety-related behaviour.



Fig.2.3. The staircase test.

2.3.3 Elevated-zero maze.

The elevated-zero maze is also a widely used anxiety paradigm. This test uses the spontaneous tendency of rodents to avoid open areas. In contrast to the elevated-plus maze, it has no central area removing any ambiguity in interpretation of the time spent on the central area of the elevated-plus maze allowing uninterrupted exploration. The apparatus was a 5.5-cm-wide circular track constructed of grey Plexiglas with an inside diameter of 34 cm, a mid-track circumference of approximately 121 cm, and an elevation of 40 cm. It consisted of two

open quadrants with a raised, 2-mm edge and two closed quadrants with walls 11 cm high. Mice were placed in one of the closed quadrants designated as the starting quadrant and were allowed to investigate the zero maze for a period of 5 min. During this time, an observer scored mice on several anxiety-related variables as identified in previous studies (Shepherd et al., 1994; Tarantino et al., 2000). These included times spent in both open and closed quadrants, number of transitions between quadrants, latency to leave the closed quadrant, stretchings (elongated body posture with at least snout over open/closed divide) into open quadrant, rearings, head-dips.



Fig.2.4. Elevated-zero maze.

2.3.4 Stress-induced hyperthermia.

As mentioned in the introduction, the stress-induced hyperthermia is a model of anticipatory anxiety. The test procedure for the modified stress-induced hyperthermia was adopted from Van der Heyden et al. (Van der Heyden et al., 1997) and is based on the original

description of stress-induced hyperthermia by Lecci et al. (Lecci et al., 1990): rectal temperature was measured to the nearest 0.1 °C by an ELLAB instruments thermometer (Copenhagen, Denmark) via a lubricated thermistor probe (2 mm diameter) inserted 20 mm into the rectum while the mouse was hand held near the base of the tail. The probe was left in place until steady readings were obtained (\pm 15 seconds). Twenty-four hours before testing the animals were individually housed in smaller cages (26 x 21 x 14 cm). Stress-induced hyperthermia was assessed as follows: The core-temperature of each mouse was measured twice. The second measurement (T2) was 15 minutes after the first measurement (T1), which served as the basal value for each condition. The dependent variable, i.e. the stress-induced hyperthermia, was defined as the difference between T2 - T1. T1 was used to evaluate whether the test-compound by itself would have a potential effect on basal body temperature.

2.3.5 Novelty-induced hypophagia.

The novelty-induced hypophagia is anxiety paradigm with a high predictive validity. Indeed, it has been shown to be highly sensitive acute administration of benzodiazepines, but also to chronic administration of SSRI. In this paradigm, the exposure to a novel environment is anxiety-provoking leading to an increase in latency to drink and decrease in food consumption. In the present thesis, the novelty-induced hypophagia was adopted from that described by Dulawa et al. (Dulawa et al., 2004). Mice were singly housed one week prior experiment began. Mice were trained to drink diluted (1 : 3; milk : water) sweetened condensed milk for 30 min. during 3 consecutive days. Milk was presented in 10 ml serological pipettes cut at the bottom and closed with a 0.5 ml ependorff. Pipettes were positioned through wire cage lids. Home cage testing occurred on day 4 when mice were briefly removed from their cages to position pipettes containing the milk, and testing began when mice were returned to their cages. The latency to drink and the volume consumed were recorded every 5 min for 30 min. Home cage testing occurred under normal lighting. Novel

cage testing occurred on day 5, when mice were placed into new clean cages of the same dimensions but without shavings, with pipets containing the milk positioned. In order to enhance the aversiveness of the new environment, novel cage testing occurred under bright lighting (approx. 1300 lux), with white paper placed under cages.

2.4 Assessing antidepressant-like activity in animals.

2.4.1 Forced-swim test.

As mentioned in the introduction, the forced swim test is probably the most extensively used paradigm to screen antidepressant. Here, it was conducted as previously described (Cryan et al., 2001; Cryan et al., 2003c). Briefly, mice were placed individually into plexiglass cylinders (24 cm tall x 21 cm in internal diameter) filled with water (23 – 25°C) to a depth of 15 cm. All test sessions were recorded by a video camera positioned directly above the cylinders. Videotapes were subsequently scored blind by a trained observer. The behavioural measure scored from videotape was the duration of immobility during the last four minutes of the six minute test period as previously validated (Porsolt et al., 1978). A mouse was judged to be immobile when making only those movements necessary to keep its head above water.

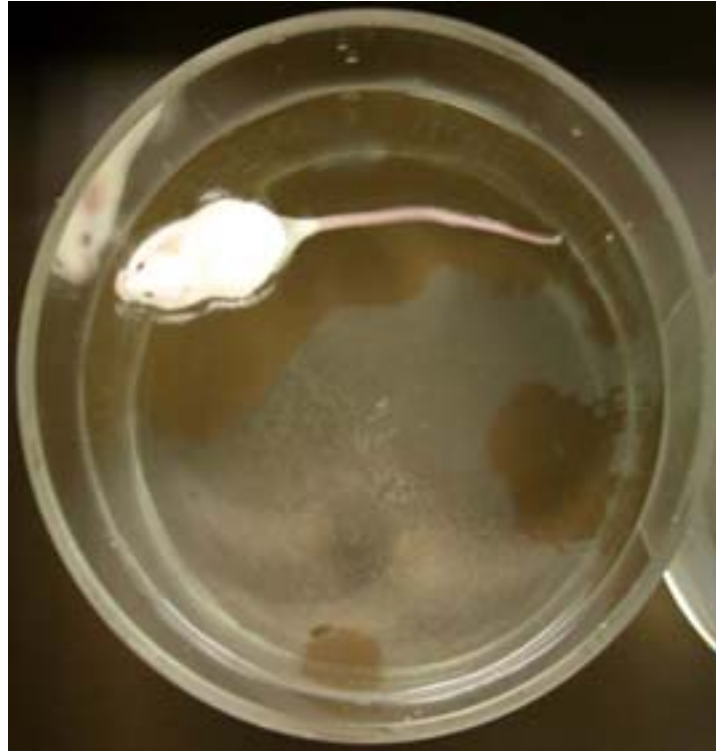


Fig.2.5. The forced swim test.

2.4.2 Tail suspension test.

The second animal of depression used in the present thesis is the tail suspension test. Like the forced swim test paradigm, this paradigm is highly predictive of antidepressive activity and widely used in depression research. The test was carried out essentially as described previously (Steru et al., 1985; Cryan et al., 2003c; Cryan et al., 2005) with the exception that an automated device was used to score immobility (BioSeb, Chaville, France)(Cryan et al., 2005). Mice were individually suspended by the tail to a metal hook (distance from floor = 18 cm) using adhesive tape (distance from tip of tail = 2 cm). Typically, mice demonstrated several escape-oriented behaviours interspersed with temporally increasing bouts of immobility. The computer recorded the number of seconds spent immobile over the entire 6 minute period.

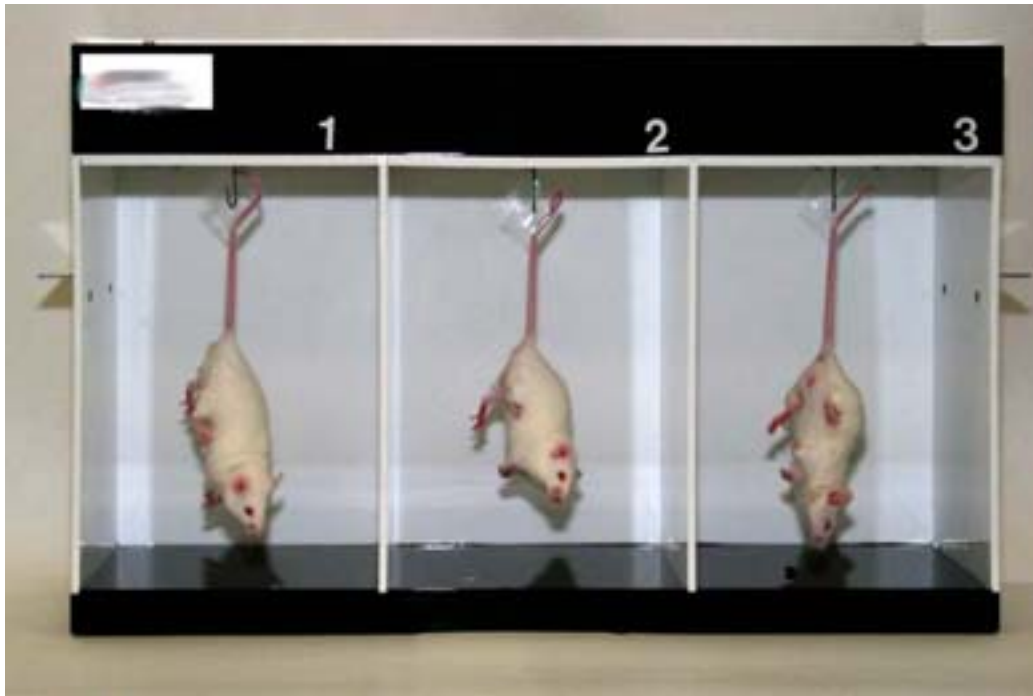


Fig.2.6.The tail suspension test.

2.5 Determination of 5-HT_{1A} receptor mRNA expression in hippocampus.

2.5.1 RNA isolation, DNase I digest and reverse transcription

Hippocampi were disrupted (2 x 2 minutes at 20Hz) using a Mixer Mill 300 (Qiagen). Total RNA was isolated from disrupted brain tissue using the “absolute RNATM” RT-PCR Miniprep Kit (Stratagene) according to manufacturer’s protocol. The quantity and quality of the RNA was determined by optical density (OD) at 260 nm and 280 nm (NanoDrop®). To remove traces of genomic DNA contamination, a small aliquot of total RNA was digested with RNase-free DNase (RNase-free DNase Set, Qiagen). The enzyme was inactivated by addition of EDTA and heating up to 65°C. After the DNase I digest, a spot check of the RNA samples was performed by real-time PCR assays to ensure the absence of genomic DNA. DNase I-treated total RNA was reverse transcribed into cDNA by random priming using the StrataScriptTM Reverse Transcriptase kit (Stratagene).

2.5.2 Real-time quantitative RT-PCR

5-HT_{1A} primers and probe (see Table 1) were designed with the aid of the Primer Express software (Version 1.0; Applied Biosystems). Probes were labeled with 6-carboxyfluorescein (FAM) at the 3'-end and with 6-carbox-tetramethyl-rhodamine (TAMRA) at the 5'-end. For both the amplification of 5-HT_{1A} and the internal control 18S cDNA, the standard amplification program was used (1 cycle of 50°C for 2 min, 1 cycle of 95 °C for 10 min, 40 cycles of 95 °C for 15 s, and 60 °C for 1 min). Direct detection of the PCR product was enabled by the 5'→3' exonuclease activity of Taq polymerase, thereby terminating the close proximity of the reporter dye to the quencher dye by reporter fluorochrome cleavage leading to an increase of reporter dye fluorescence equivalent to the increase of amplified PCR product. Real-time RT PCR assays were performed using the qPCRTM Mstermix (Eurogentec) on an ABI Prism® 7700 Sequence Detection System (Applied Biosystems, Foster City, CA, USA). 5-HT_{1A} primers and probe were used at concentrations of 300 nM and 175 nM, respectively. Real-time RT PCR assays for the internal control gene 18S rRNA were performed by using the “18S Genomic Endogenous Control Kit” (Eurogentec).

Relative levels of target transcripts are reported after normalization to 18S rRNA. The normalized raw data were analyzed with the so-called “comparative C_T method” as described in detail in Livak and Schmittgen, 2001(Livak and Schmittgen, 2001).

2.6 Locomotor activity and animal models relevant to addiction.

2.6.1.Locomotor activity.

Animals were placed in automated locomotor activity cages (31 cm length, 19 cm width, 16 cm height; TSE, Bad Homburg, Germany) and the distance traveled was measured

by the number of horizontal beam-breaks as previously described (Spooren et al., 2000). Data were collected using personal computer in 5-minute intervals.



Fig.2.7.Locomotor activity chamber.

2.6.2 Behavioural sensitization to cocaine.

The mice were habituated to the test environment for three days and basal locomotor activity was measured. After an intraperitoneal injection of saline the mice were placed in the test cages (as above) for 30 min and locomotor activity was recorded. From days 4-10, mice were injected with cocaine (20 mg/kg/d, i.p.) or saline and locomotor activity was recorded. To assess the effects of drugs on the acquisition of behavioural sensitization to cocaine, tested drugs or its associated vehicle was applied 30 minutes before each cocaine injection. This period of acquisition of sensitization was followed by 14 days without drug treatment. In order to investigate the effect of GS39783 on the expression of cocaine sensitization, we designed a challenge trial (see e.g. (Kalivas and Stewart, 1991). On day 23 (challenge day), mice were administrated a dose of 10 mg/kg i.p. cocaine. In order to assess the effect of a

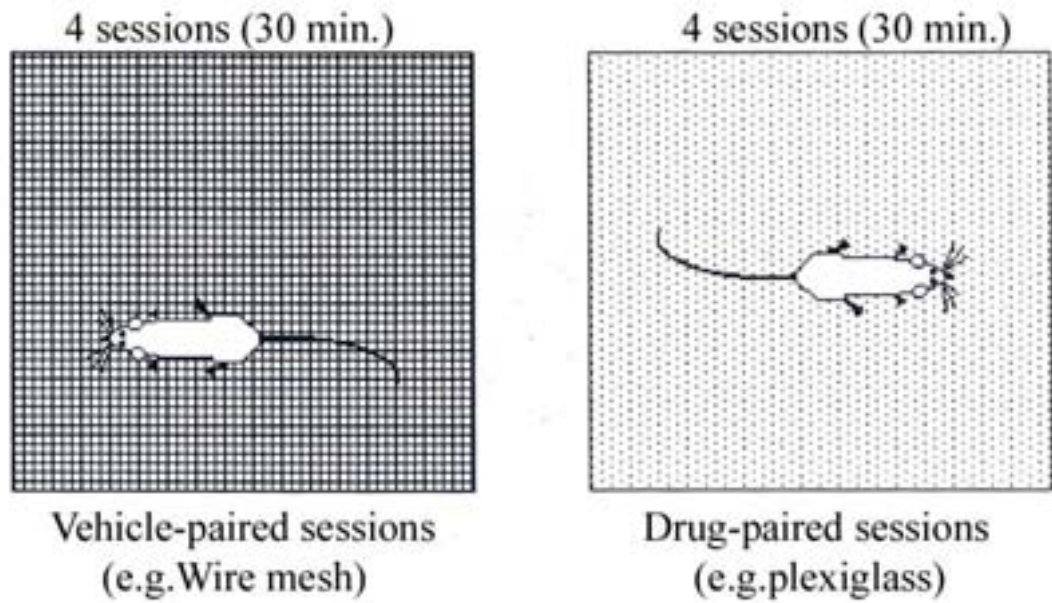
drug on the expression of sensitization, drugs or its associated vehicle was applied 30 min prior to the cocaine injection.

2.6.3 Place conditioning paradigm.

The apparatus was as described previously (Chaperon and Thiebot, 1996). Briefly, rats were trained and tested in black wooden open fields (76×76×50 cm) located in a room dimly lit room (red-light). The floor of each open field was covered with removable quadrants made from one of two textures, wire mesh or rough plexiglas. These textures were chosen on the basis of previous studies indicating that naive rats exhibited no unconditioned preference for either of them.

The general procedure consisted of two phases: conditioning and testing. Conditioning consists of an alternation of four drug-paired conditioning sessions with four vehicle-paired sessions. During drug-paired sessions, drugs were administered prior to exposure to the open-field covered with one floor texture. During the vehicle-paired session, rats received vehicle injection a 30 min exposure to the other floor texture. For half of rats, the first conditioning session was a vehicle-paired session, and for the other half a drugs-paired session. The day following the last conditioning session, rats were placed for a single 20 min testing session in the open field whose floor was made up of two quadrants of the vehicle-paired texture and two quadrants of the dug-paired texture. The quadrants of the same texture were positioned diagonally opposite to each other floor texture. During the test session, time spent on each texture was automatically recorded by means of the video system and analyzed by appropriate in-house developed software (SuperG Software, Hans C. Neijt; Novartis Pharma, Basel, Switzerland).

Conditioning sessions



Test session (20 min.)

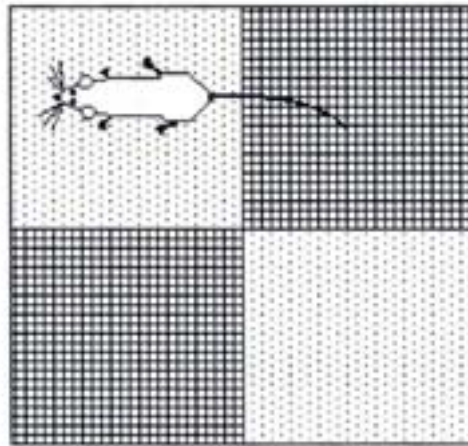


Fig.2.8. Place conditioning paradigm.

2.7. Determination of specific molecular markers affected by administration of drugs of abuse.

2.7.1 Tissue Preparation

Brains were quickly removed, chilled in ice-cold phosphate-buffered saline (PBS) and nucleus accumbens, dorsal striatum and hippocampus were dissected on ice-chilled glass plate and flash-frozen in dry ice.

2.7.2 Immunoblotting

Individual tissue samples for western blot analysis were homogenized with a glass-glass homogenizer in ice-cold buffer containing (in mM) Hepes (pH 7.9) 20, NaCl 400, MgCl₂ 5, EDTA 0.5, EGTA 0.1, including complete protease (Roche) and phosphatase inhibitors (Sigma). Homogenates were kept 20 min on ice and centrifuged 15 min at 20000 g, 4°C. Pellets containing particulate fractions enriched in organelles and nuclei were mixed with 2X Laemmli sample buffer (125 mM Tris pH 6.8, 4% sodium dodecyl sulfate, 0.005% (w/v) bromophenol Blue, 200 mM dithiothreitol, 20% glycerol), heated to 90°C for 5 min and loaded on 10% SDS acrylamide gels (Bio-Rad). After electrophoretic transfer (Biorad blotting device), nitrocellulose membranes were incubated 1 hour at room temperature in PBS containing 0.1% Tween 20 and 5% fat-free powdered milk (PBST/milk). After three washes in PBST the membranes were incubated overnight at 4°C with primary antibodies in PBST/milk, and washed again three times in PBST. Incubation with horseradish-peroxydase-conjugated secondary antibody was for 1-2 hours at room temperature. Peroxydase activity was detected using Supersignal West Pico substrate (Pierce) and Kodak MR-1 X-ray films (Amersham Biosciences). Afterwards, bound antibodies were removed (restore buffer, Pierce) and the membranes incubated with an anti-actin antibody to check for loading. X-ray films were scanned and analyzed with NIH ImageJ software (<http://rsb.info.nih.gov/ij/>, v1.31) according to manufacturer's indications. Intensity values are presented as the ratio of the

optical density of the band of interest and of its actin control. Individual samples were not pooled and care was taken not to overexpose X-ray films in order to ensure linearity of signals. All experiments were performed in duplicate or triplicate.

2.7.3 Reagents

Primary antibodies used were rabbit anti-Fos (sc-253, Santa Cruz Biotechnology, 1:1000), rabbit anti-FosB (sc-48, Santa Cruz Biotechnologies, 1:500), mouse anti-phosphoCREB (clone 1B6, Cell Signaling, 1:1000), rabbit anti-DARPP-32 (2302, Cell Signaling, 1:2000), rabbit anti-CREB (sc-58, Santa Cruz Biotechnology, 1:1000), rabbit anti-actin (A2066, Sigma, 1:5000). Secondary antibodies were HRP-linked goat anti-mouse IgG (1:2000, Bio-Rad) or goat anti-rabbit IgG (7074, Cell Signaling, 1:1000 to 1:5000). All other reagents are from Sigma.

2.8. Drugs

Desipramine, chlordiazepoxide, diazepam, cocaine and (-)-nicotine were obtained from Sigma (St. Louis, MO). Fluoxetine, L-baclofen, GS39783 (N,N'-Dicyclopentyl-2-methylsulfanyl-5-nitro-pyrimidine-4,6-diamine), CGP56433A (3-{1(S)-[3-(cyclohexylmethyl)hydroxyphosphinyl]2(S)hydroxypropylamino]nethyl} benzoic acid) and CGP44532 (((S)-3-amino-2-hydroxy-propyl)-methyl-phosphinic acid) were synthesized in-house. In mice, all drugs were made up fresh prior to use and administered orally in a suspension of 0.5% methylcellulose at a concentration of 10 ml/kg expected cocaine which was administrated intra-peritoneally and dissolved in NaCl 0.9%. Regarding rat studies, GS39783 were dissolved in a suspension of 0.5% methylcellulose at a concentration of 5 ml/kg and administrated orally. (-)Nicotine bitartrate free base dissolved in NaCl 0.9%, and the pH was adjusted between 7.3 and 7.5 with a few drops of 0.1 M NaOH; and administrated at a concentration of 5ml/kg sub-cutaneously.

2.9. Statistics

For all behavioural studies, all data were analyzed using the appropriate within-subject, and mixed-design ANOVAS or Student's *t*-test (in the case of comparisons between just two groups of animals) followed by where appropriate by Fishers's posthoc tests, using the SYSTAT software package. The level of significance was set at $P < 0.05$. Data from Section 5.5.3 were analyzed using *t*-test. Indeed, each group was compared to their proper controls groups. Specifically, chronic handled animals were compared to naïve animals and animals treated with GABA_B ligands and antidepressants were compared individually to chronic handled animals. Finally, all molecular results obtained in chapter 6 were analyzed using the appropriate within-subject, and mixed-design ANOVAS or Student's *t*-test (in the case of comparisons between just two groups of animals) followed by *post hoc* Newmann-Keuls test where appropriate.

CHAPTER 3: IMPACT OF TARGETED DELETION OF GABA_B RECEPTOR SUBUNITS ON GABA_B RECEPTOR FUNCTION: IN VIVO STUDIES.

3.1 Introduction.

In vivo assays receptor function using selective agonists using physiological or behavioural readouts of have been long employed to probe alterations in receptors following specific manipulations (e.g. (Goodwin et al., 1985; Cryan et al., 1999)). A key necessity for such research strategy is to have a robust and rapidly obtainable measure that is able to capture in a temporal and dose dependent manner the actions of the agonist. This is certainly been the case for GABA_B receptors where the selective tool baclofen to probe GABA_B receptor function in both animals and humans.

Among other effects in vivo, stimulation of GABA_B receptors, is known to produce a marked hypothermia which parallels behavioural changes, including impairment of motor coordination (Brogden et al., 1974; Gray et al., 1987; Schuler et al., 2001; Cryan et al., 2004). This effect is considered to be a central origin, since intracerebroventricular injection of the prototypic GABA_B receptor agonist baclofen lowers body temperature. The specific site at which GABA_B receptor agonists act is unknown, but it probably resides within the hypothalamic thermoregulation center (Yakimova et al., 1996). For these reasons, it has been well accepted that baclofen-induced hypothermia might be considered as a good in vivo index of GABA_B receptor function, and in particular the function of hypothalamic GABA_B receptors.

Thus, several investigators have assessed the effects of genetic or pharmacological treatment on this parameter. GABA_B receptor antagonists have been shown to block the

hypothermic response to baclofen (Jackson and Nutt, 1991; Humeniuk et al., 1995). More recently, two different groups used this phenomenon in order to confirm the loss GABA_B receptor function in mice lacking GABA_{B(1)} receptor subunit (Schuler et al., 2001; Queva et al., 2003). In their studies, both of them observed that targeted deletion of GABA_{B(1)} receptor subunit totally blocked hypothermic response associated to systematic administration of baclofen, suggesting that GABA_B receptor function require GABA_{B(1)} subunit.

Another widely used in vivo assay for GABA_B receptor activation is motor incoordination and sedation which can be measured using a rotarod or open field apparatus. Baclofen has long been known to produce motor discoordination in a range of species such as mice (Gray et al., 1987; Schuler et al., 2001; Cryan et al., 2004; Gassmann et al., 2004; Jacobson and Cryan, 2005), rats (Kasture et al., 1996) and rabbits (Frosini et al., 2004). Clearly, it is these muscle relaxant effects that have made baclofen the drug of choice for treatment of spasticity in man (Bowery et al., 2002).

When assessing GABA_B receptor function it is important to look at multiple readouts as they may be controlled by different populations of GABA_B receptors. Indeed, recently Jacobson and Cryan (Jacobson and Cryan, 2005) have shown that certain mice strains had a marked hypothermic response to baclofen in the absence of motor impairing effects and vice-versa.

Accordingly, two different groups corroborated this hypothesis, using in vitro techniques, including electrophysiology and functional approaches. Indeed, these researchers observed that GABA_{B(1)}^{-/-} lack pre or postsynaptic GABA_B responses (Prosser et al., 2001; Schuler et al., 2001). Altogether these data support the idea that heterodimerization of GABA_{B(1)} and GABA_{B(2)} receptor subunits is a prerequisite for GABA_B function (Marshall et al., 1999) excluding that GABA_{B(2)} receptor subunit might assemble functional receptors by itself or in association with a protein other than GABA_{B(1)}.

Nevertheless, several findings lead to speculate that GABA_{B(1)} and GABA_{B(2)} receptor subunit might have separate role. Firstly, GABA_{B(1)} exhibits a more widespread cellular distribution than GABA_{B(2)} (Kaupmann et al., 1998a). In addition, despite the fact that GABA_{B(1)} subunit require GABA_{B(2)} for its delivery to plasma membrane (Margeta-Mitrovic et al., 2000), GABA_{B(1)} was originally cloned by surface expression in mammalian cells (Kaupmann et al., 1997). Finally, GABA_{B(1)} receptor subunit occasionally yields electrophysiological responses when transfected alone into heterologous cells (Kaupmann et al., 1997). Thus, it is conceivable that the GABA_{B(1)} receptor subunit is functional either alone or in combination with unknown protein.

Like baclofen, γ -Hydroxybutyrate (GHB) have been shown to induced hypothermia in rodents (Snead, 1990) and in humans (Chin et al., 1998) and also induce sedation and motor incoordination (Lobina et al., 2005). Although it has been proposed to function as neurotransmitter (Cash, 1994), its receptor interaction are a matter of much debate. As mentioned in the general introduction, two different theories coexist at this time. The first suggest that the action of GHB is mainly mediated by specific GHB receptors, but not by GABA_B receptors. Indeed, it has been shown that GHB binding differ from the GABA_B receptors binding (Snead, 1994). In addition, the putative GHB antagonist NCS-382 has been shown to have no affinity to GABA_B receptors (Maitre et al., 1990). Conversely, the second theory supports the idea that GHB response might be GABA_B receptor dependent. To clarify whether GABA_B can participate in GHB response, we sought to assess the effect of targeted inactivation of GABA_B receptors on hypothermia and rotarod performance induced by GHB.

Thus, the aims of the present chapter were three-fold. In order to confirm that genetic inactivation of GABA_{B(1)} receptor subunit abolish GABA_B receptor function, we analyzed both hypothermic and motor effects of baclofen in GABA_{B(1)}^{-/-} mice. Secondly, using the recently generated GABA_{B(2)}^{-/-} mice, we investigated the effect of targeted on the deletion

GABA_{B(2)} on the physiological and behavioural effects of baclofen. Finally, we examined the effect of genetic ablation of GABA_{B(1)} or GABA_{B(2)} on the well characterized hypothermic response to GHB, in clarify which receptors can be involved in physiological response induced by GHB.

3.2 Experimental Design.

GABA_{B(1)} and GABA_{B(2)} knockout mice were generated on BALB/c genetic background as described previously (Schuler et al., 2001; Gassmann et al., 2004). Mice were used at an age of 10-17 weeks. Regarding baclofen experiments, animals were placed on the rotarod cylinder immediately before and 1, 2 and 4 hours following R-baclofen (12.5 mg/kg, p.o.) administration. Temperatures were taken immediately after completion of the rotarod trial. The dose of baclofen was selected from previous studies (Schuler et al., 2001). Rectal temperature was measured 60 minutes and immediately before; 30 minutes, 60 minutes, 2 hours and 4 hours after GHB administration.

3.3 Effects of targeted deletion of GABA_{B(1)} subunit on GABA_B receptor function.

3.3.1 Results.

3.3.1.1 Effects of targeted deletion of GABA_{B(1)} receptor subunit on baclofen induced hypothermia.

A two-way repeated measures ANOVA revealed a significant effect of baclofen treatment [$F(1,35) = 78.85, P < 0.001$], genotype [$F(1,35) = 9.603, P = 0.004$], a significant genotype X baclofen treatment interaction [$F(1,35) = 45.21, P < 0.001$]. As reported previously, GABA_{B(1)}^{-/-} mice have slightly lower body temperature than their wildtype counterparts (Queva et al., 2003), however in these studies it failed to reach the level of statistical significance ($P > 0.05$). Baclofen induced a dramatic decrease of body temperature during with maximal effect two hours following administration in GABA_{B(1)}^{+/+} mice.

However, GABA_{B(1)}^{-/-} mice had a totally blunted response to baclofen-induced hypothermia (See Fig. 3.1.).

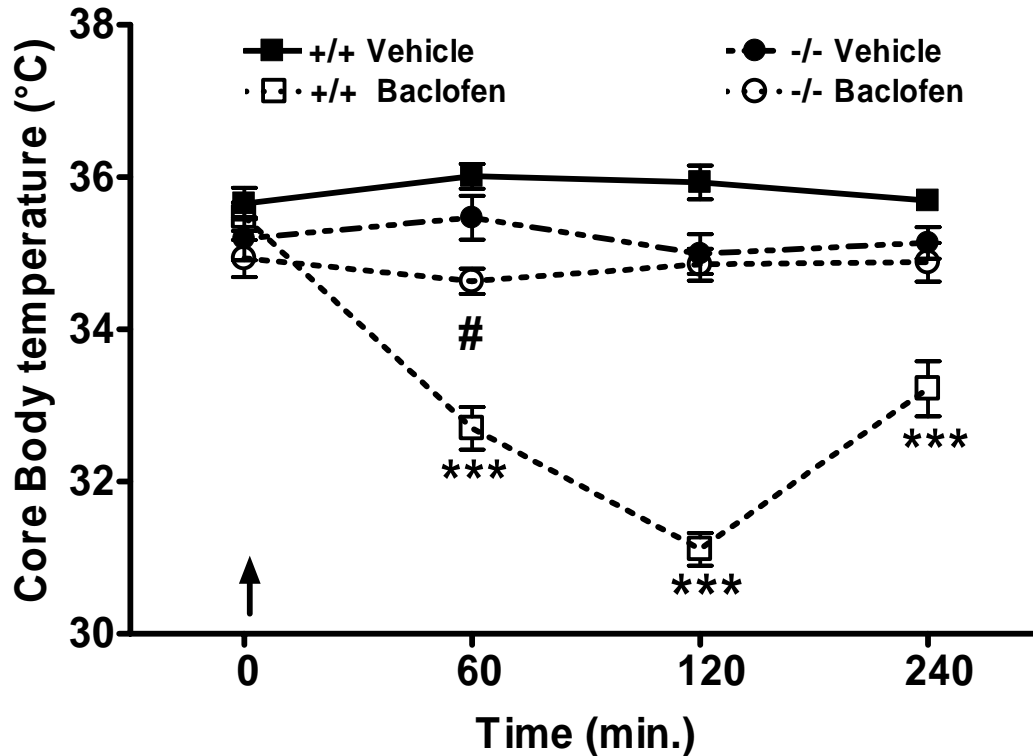


Fig.3.1.Lack of baclofen-induced hypothermia in GABA_{B(1)}^{-/-} mice.

GABA_{B(1)}^{+/+} mice treated with 12,5 mg/kg (p.o.) of baclofen (n = 10) exhibited a decrease of core body temperature compare to GABA_{B(1)}^{+/+} mice treated with vehicle (n = 10). GABA_{B(1)}^{-/-} mice treated with baclofen (n = 10) exhibited no reduction of body temperature compare to GABA_{B(1)}^{-/-} mice treated with vehicle (n = 9). All data points represent mean \pm SEM values. The arrow denotes the time of compound application. ***Groups that differed significantly from to GABA_{B(1)}^{+/+} mice treated with vehicle (p<0.001). # groups that differed significantly to GABA_{B(1)}^{-/-} mice treated with vehicle.

3.3.1.2 Effects of targeted deletion of GABA_{B(1)} receptor subunit on baclofen-induced motor coordination impairment.

On examination of rotarod test ANOVA revealed a significant effect of baclofen treatment [F(1,35) =842.64, P < 0.001] , genotype [F(1,35) = 721.77, P < 0.001] and a [F(1,35) = 758.05, P < 0.001]. No baseline difference in rotarod performance was observed, however GABA_{B(1)}^{-/-} mice were devoid of the motor impairing effects of baclofen which was

clearly observed in GABA_{B(1)}^{+/+} mice (see Fig.3.2). Thus, these results confirm that the absence of GABA_B receptor function in mice lacking GABA_{B(1)} receptor subunit.

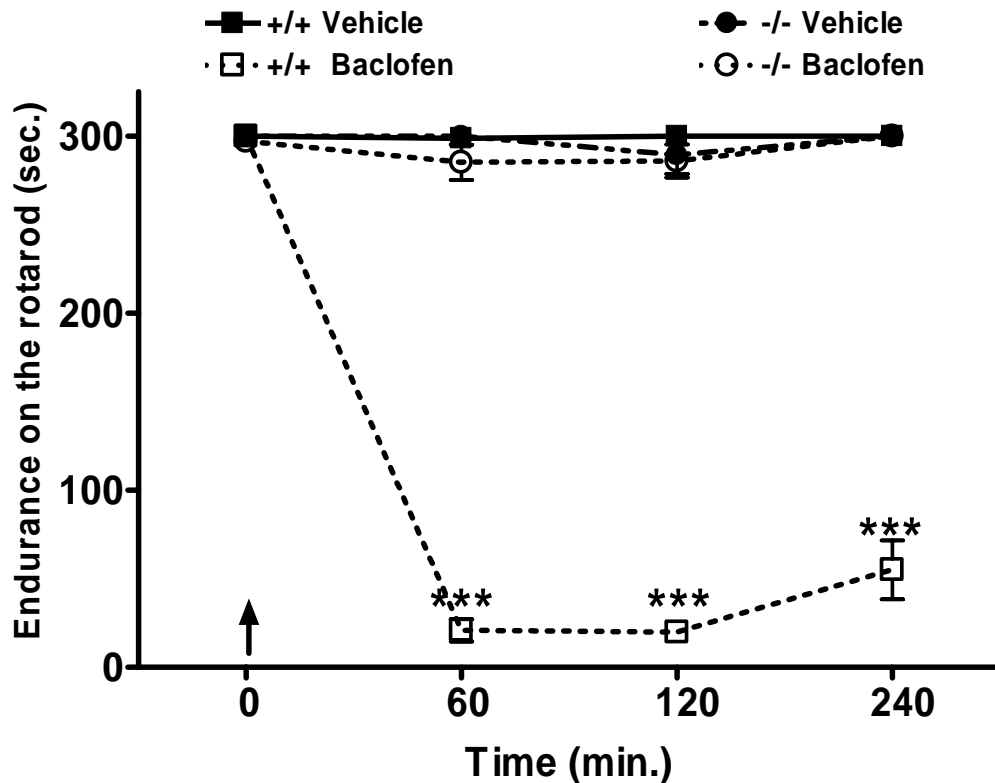


Fig.3.2. Baclofen fails to induced motor impairment in GABA_{B(1)}^{-/-} mice.

GABA_{B(1)}^{+/+} mice treated with 12,5 mg/kg (p.o.) of Baclofen (n = 10) exhibited a motor impairment compare to GABA_{B(1)}^{+/+} mice treated with vehicle (n = 10). GABA_{B(1)}^{-/-} mice treated with baclofen (n = 10) exhibited no change in the endurance on the rotarod compared to GABA_{B(1)}^{-/-} mice treated with vehicle (n = 9). All data points represent mean ± SEM values. The arrow denotes the time of compound application. ***Groups that differed significantly from to GABA_{B(1)}^{+/+} mice treated with vehicle (p<0.001).

3.3.1.3 Effects of targeted deletion of GABA_{B(1)} receptor subunit on GHB-induced hypothermia.

ANOVA (repeated measures) revealed that there was a significant difference in temperature responses to GHB between both genotypes [F(1,15) = 15.05, P < 0.001] and a genotype X time interaction [F(5,75) = 69.40, P < 0.001]. γ -Hydroxybutyrate induced a marked (6 °C) hypothermia in wild-type animals. However, there was no significant effect of GHB on temperature in GABA_{B(1)}^{-/-} mice over the 3-h recording period after GHB application

(Fig.3.3). Posthoc analysis revealed that there was a slightly, but significantly, lower basal temperature in GABA_{B(1)}^{-/-} mice compared with wild-type mice at both time points prior to GHB administration (Fig3.3).

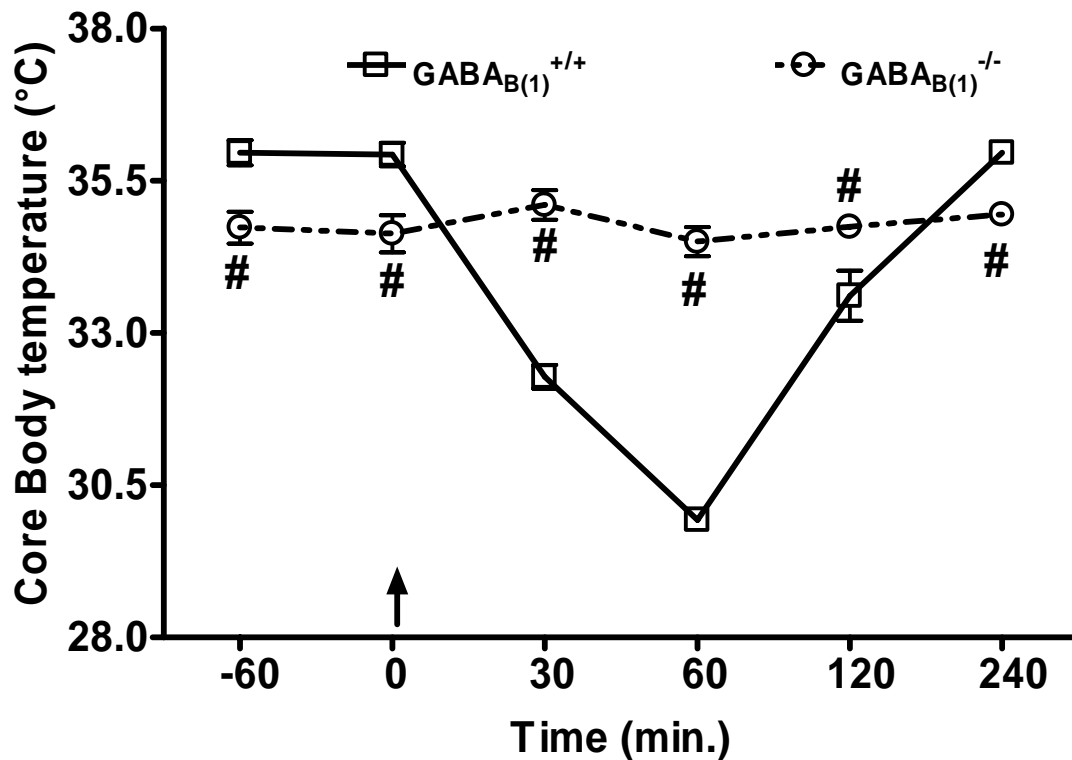


Fig.3.3. Core body temperature after γ -hydroxybutyrate (GHB) application in wild-type and GABA_{B(1)}^{-/-} mice.

Body temperature after application of 1 g/kg GHB (p.o.) to wild-type, white squares, (n = 10) and GABA_{B(1)}^{-/-} mice, white dots (n = 7). The arrow denotes the time of compound application. # Groups that differed significantly from genotype control (P < 0.05, Fisher's posthoc tests). All data points represent mean \pm SEM values.

3.4 Effects of targeted deletion of GABA_{B(2)} subunit on GABA_B function.

3.4.1 Results.

3.4.1.1 Effects of targeted deletion of GABA_{B(2)} receptor subunit on baclofen induced hypothermia.

Somewhat surprisingly, we observed that GABA_{B(2)}^{-/-} mice respond similarly to administration of baclofen. Indeed, a two-way repeated measures ANOVA revealed a significant effect of baclofen treatment [F(1,32) = 79.973, P < 0.001], genotype [F(1,32) = 9.187, P = 0.003], a significant genotype X baclofen treatment interaction [F(1,32) = 95.21, P < 0.001]. Intriguingly, basal temperature of GABA_{B(2)}^{-/-} also was slightly lower than that of wild-type animals. Although baclofen, in wild-type animals, elicits a marked hypothermia which reached its nadir at 120 min after administration, it seems to be without effect in GABA_{B(2)}^{-/-} mice. (see Fig 3.4)

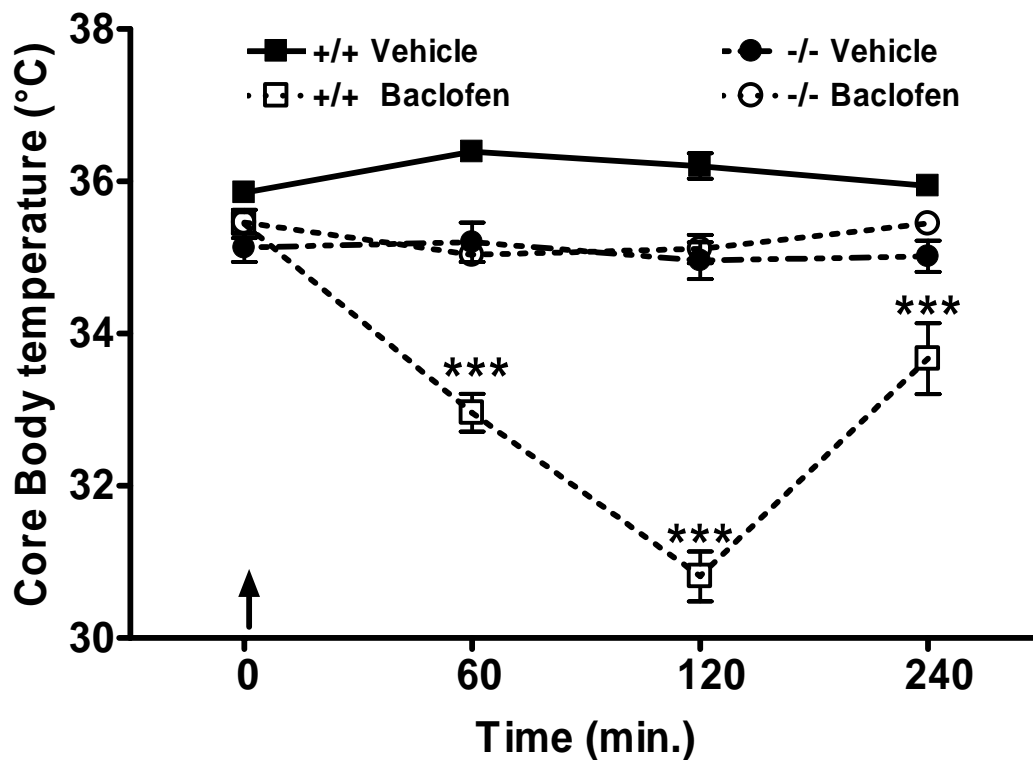


Fig.3.4.Lack of baclofen-induced hypothermia in GABA_{B(2)}^{-/-} mice.

GABA_{B(2)}^{+/+} mice treated with 12,5 mg/kg (p.o.) of Baclofen (n = 10) exhibited a decrease of core body temperature compare to GABA_{B(2)}^{+/+} mice treated with vehicle (n = 10). GABA_{B(2)}^{-/-} mice treated with baclofen (n = 9) exhibited no reduction of body temperature compare to GABA_{B(2)}^{-/-} mice treated with vehicle (n = 7). All data points represent mean ± SEM values. The arrow denotes the time of compound application. ***Groups that differed significantly from to GABA_{B(2)}^{+/+} mice treated with vehicle (p<0.001).

3.4.1.2 Effects of targeted deletion of GABA_{B(2)} receptor subunit on baclofen-induced motor coordination impairment.

Regarding the impact of targeted deletion of GABA_{B(2)} subunit on motor impairment induced by baclofen, analysis of variance (repeated measures) revealed a significant effect of genotype [F(1,32) = 786.013, P < 0.001], and effect baclofen treatment F(1,32) = 786.195, P < 0.001] and a genotype X treatment interaction [F(1,32) = 786.195, P < 0.001]. Post-hoc analysis indicated that baclofen produced a marked hypothermia in wildtype animals (Fig.3.5). Conversely, this response appears to be totally abolished in GABA_{B(2)}^{-/-} mice. Altogether, these data, combined with the experiment on core temperature, suggested that GABA_{B(2)} receptor subunit seems to be essential to GABA_B receptor responses in vivo.

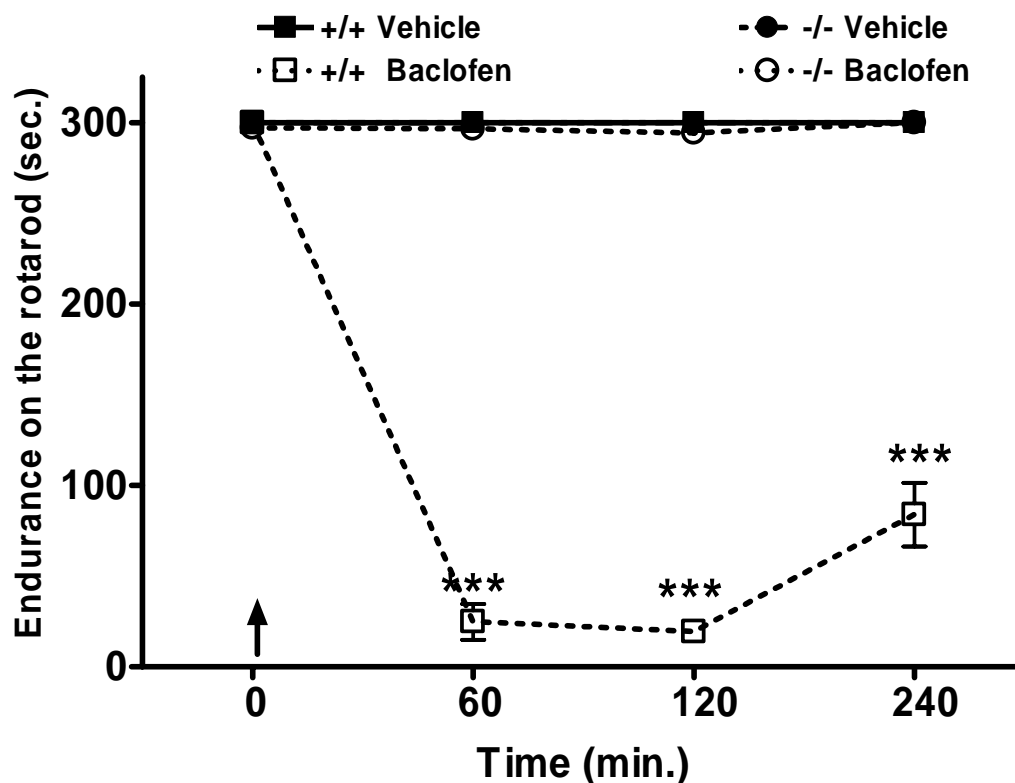


Fig.3.5. Lack of baclofen-induced motor impairment in GABA_{B(2)}^{-/-} mice.

GABA_{B(2)}^{+/+} mice treated with 12.5 mg/kg (p.o.) of Baclofen (n = 10) exhibited a motor impairment compare to GABA_{B(2)}^{+/+} mice treated with vehicle (n = 10). GABA_{B(2)}^{-/-} mice treated with baclofen (n = 9) exhibited no change in the endurance on the rotarod compared to GABA_{B(2)}^{-/-} mice treated with vehicle (n = 7). All data points represent mean ± SEM values. The arrow denotes the time of compound application. ***Groups that differed significantly from to GABA_{B(2)}^{+/+} mice treated with vehicle (p<0.001).

3.4.1.3 Effects of targeted deletion of GABA_{B(2)} receptor subunit on GHB-induced hypothermia.

A one-way repeated measures ANOVA revealed no significant effect of genotype [F(1,14) = 3.695, P = 0.075] but a significant effect of time [F(5,70) = 14.396, P < 0.001] and a significant genotype X time interaction [F(5,70) = 14.223, P < 0.001]. Post-hoc analysis indicated that GABA_{B(2)}^{-/-} exhibit significantly lower basal core temperature. Furthermore, GHB, at 1 g/kg, induced a strong hypothermia in wild-type mice. As we observed in GABA_{B(1)}^{-/-} mice, GHB, at the dose use, failed to induced hypothermia in GABA_{B(2)}^{-/-} mice.

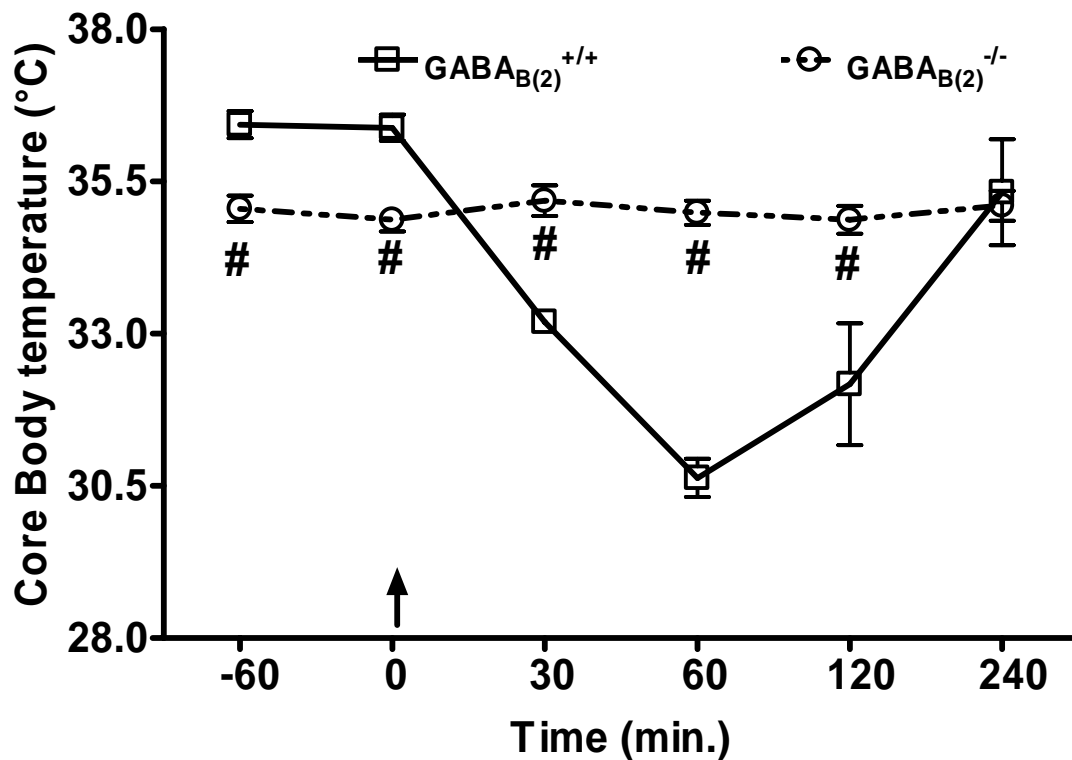


Fig.3.6. Core body temperature after γ -hydroxybutyrate (GHB) application in wild-type and GABA_{B(2)}^{-/-} mice.

Body temperature after application of 1 g/kg GHB (p.o.) to wild-type, white square, (n = 10) and GABA_{B(2)}^{-/-} mice, white dots, (n = 6). The arrow denotes the time of compound application. #Groups that differed significantly from wild type genotype (P < 0.05, Fisher's posthoc tests). All data points represent mean \pm SEM values.

3.5 Discussion.

The present set of data demonstrates that both GABA_B receptor subunits are required to elicit the hypothermic and motor response induced by baclofen. Indeed, in agreement with a previous study, we shown that targeted deletion of GABA_{B(1)} receptor subunit abolished totally motor impairment , measured by endurance on the rotarod, and hypothermic effect of baclofen. Secondly, using recently generated GABA_{B(2)}^{-/-} mice, we observed that that genetic ablation of GABA_{B(2)} receptor subunit blunted also these responses, confirming that heterodimerization of GABA_{B(1)} and GABA_{B(2)} subunit is a prerequisite for GABA_B function. Finally, the hypothermic response triggered by GHB appeared to be totally blocked in both GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice, suggesting that physiological response to GHB seems to be mediated by GABA_B receptors.

In agreement with the study of Schuler and colleagues (2001), baclofen neither affected temperature regulation neither motor coordination in GABA_{B(1)}^{-/-} mice, which confirms the notion that GABA_{B(1)} receptor subunit is necessary for these effects of baclofen and that GABA_{B(2)} receptor subunit can be alone(Schuler et al., 2001). Accordingly, it has been shown also that GABA_{B(1)}^{-/-} exhibits a lack of GABA_B bindings sites, disruption of GABA_B receptor function (characterized by GABA- or baclofen [³⁵S]GTPγS binding), and absence of GABA_B auto-or heteroreceptors and postsynaptic GABA_B receptor function (Prosser et al., 2001; Schuler et al., 2001). In addition, pharmacological studies have demonstrated that GABA_B receptor antagonists are also able to block hypothermic response elicited by baclofen (Humeniuk et al., 1995). Given that both pharmacological blockade and genetic inactivation of GABA_B receptors abolished hypothermic response, it is safe to conclude that baclofen-induced hypothermia and its associated motor response can be viewed as a powerful and simplistic translational in vivo read-out of GABA_B receptor function. Nevertheless, the characterization of the biological and, more specially, specific GABA_B receptors involved in these responses could reinforce its interest. Thus, the discovery that

hypothermic response to 8-OH-DPAT is mainly caused by 5-HT_{1A} autoreceptor stimulation in mice (Goodwin et al., 1985) provided a huge tool in the context of psychiatric research. Indeed, this technique is the most used to assess desensitization of somatodendritic 5-HT_{1A} receptor characterizing antidepressant-like response.

Regarding the GABA_{B(2)}^{-/-} mice, we demonstrated that targeted deletion of GABA_{B(2)} receptor subunit is sufficient to abolish hypothermic response and motor impairment induced by baclofen. These results are analogous to the results obtained in GABA_{B(1)}^{-/-} mice and suggest that these responses relate to GABA_{B(1,2)} heterodimer activation. In addition, parallel studies, obtained in collaboration with the group of Bernhard Bettler, Martin Gassmann, and colleagues at the University of Basel, confirmed the lack of other baclofen-induced responses in GABA_{B(2)}^{-/-} mice (Gassmann et al., 2004). Thus, using saturation binding experiment, they demonstrated a decrease of number of GABA_B receptor binding sites in GABA_{B(2)}^{-/-} mice. In addition, they observed GABA_{B(2)}^{-/-} mice exhibits an absence of functional GABA_B receptor, using GTPγ[³⁵S] binding. In vivo, they also demonstrated that baclofen failed to induce delta waves in EEG. Altogether, these data corroborated the absence of effect of GABA_B receptor agonist in absence of GABA_{B(2)} receptor subunit. Although they demonstrated also a loss of presynaptic GABA_B functions in GABA_{B(2)}^{-/-} mice, electrophysiological experiments demonstrated that these mice exhibit atypical post-synaptic response to baclofen in hippocampus. Indeed, baclofen elicits an inward current, in GABA_{B(2)}^{-/-} mice, instead of the typical outward current observed in wild-type mice, suggesting neurons that lack naturally GABA_{B(2)} receptor subunit might have the potential to express functional GABA_B receptor. Although behavioural and physiological effects of baclofen, such as hypothermia, motor impairment or EEG delta waves induction seems to require heteromeric GABA_{B(1,2)} receptor, it is therefore plausible that the potential functional GABA_B receptor, observed in GABA_{B(2)}^{-/-} mice, could participate to another neurobiological function.

Intriguingly, we also observed a basal hypothermia in both GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-}, suggesting that GABA_B receptors might also participate in thermal homeostasis. Although the hypothermic effects of GABA_B receptor agonists have been known for a long time (e.g. (Gray et al., 1987)) antagonist experiments have to our knowledge not suggested that there would be any endogenous GABA_Bergic tone in this system. Thus, we can hypothesize that basal hypothermia observed in both knock-out lines might be a consequence of compensatory changes.

Concerning the involvement of GABA_B receptors in the GHB-related responses, we demonstrated that hypothermic elicited by GHB is totally abolished in both GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice. Moreover, parallels studies achieved in collaboration with the group of Bernhard Bettler, demonstrated that targeted deletion of GABA_{B(1)} receptor subunit blocked also pharmacological response to GHB, such as hypolocomotion, increase in striatal dopamine synthesis and EEG delta-waves induction. In lines with these data several authors demonstrate that many effects of GHB are antagonized by GABA_B receptor. Indeed, GABA_B antagonist have been shown to block the sedative properties of GHB (Carai et al., 2001), its effects of dopamine release in striatum (Waldmeier, 1991). Together, these studies demonstrated that these pharmacological effects of GHB are directly mediated by the activation of the functional heteromeric GABA_B receptors. Nevertheless, autoradiography and ligands-binding assays revealed the presence of specific high-affinity binding sites for GHB in the brain of GABA_{B(1)}^{-/-}, suggesting GABA_B receptor do not contribute to GHB-binding sites. However, the functional relevance of these GHB binding sites is still unclear.

To conclude, in this chapter, we have demonstrated that hypothermic and motor response to baclofen or GHB require the presence of both GABA_{B(1)} and GABA_{B(2)} receptor subunit receptor, confirming the hypothesis that functional GABA_B receptors assemble from two subunit GABA_{B(1)} and GABA_{B(2)}. However, the atypical electrophysiological response,

observed in GABA_{B(2)}^{-/-} mice, led two think that the GABA_{B(1)} and GABA_{B(2)} subunits might have a differential role in the modulation of neural activity and perhaps in emotional behaviours. Further these studies allowed to concluded that GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice would be very useful tools to assess the role of GABA_B receptor in animal model of psychiatric disorders.

CHAPTER 4: THE ROLE OF GABA_B RECEPTORS IN ANXIETY.

4.1 Introduction.

As mentioned in the introduction, GABA_B receptors seem to play a role in the modulation of anxious behaviour. More precisely, GABA_B activation appears to induce anxiolytic like effect in animal models of anxiety (see (Cryan and Kaupmann, 2005). Nevertheless, previous data investigating GABA_B mechanisms in anxiety are limited and rather variable; this is largely because investigators relied on using the prototypical full GABA_B receptor agonist baclofen for such analysis. Indeed, baclofen has a narrow efficacy window before confounding side-effects are manifested in anxiety paradigms (Dalvi and Rodgers, 1996). Thus, the sedative properties of GABA_B receptor agonists, such as baclofen, limit their used in exploratory-based approach-avoidance conflicts tests (Cryan and Holmes, 2005). Similarly, the memory impairment associated to GABA_B receptor agonist or its analgesic properties (Bowery et al., 2002) may also represent a major problem in animal model of conflict paradigms, such as Vogel test (Vogel et al., 1971), Geller-Seifter conflict (Geller et al., 1962). Consequently, the anxiolytic properties of baclofen observed in these two paradigms (Ketelaars et al., 1988; Shephard et al., 1992) seem to be questionable and could be considered as false positive. Regardless these considerations, sporadic clinical studies report that baclofen reversed the anxiety associated with alcohol withdrawal (Addolorato et al., 2002b) and post traumatic stress (Drake et al., 2003), supporting the involvement of GABA_B receptor in emotional behaviours.

Two recent developments have added innovative new tools to the armamentarium of researchers. Firstly, mice that lack the GABA_{B(1)} subunit or GABA_{B(2)} (Prosser et al., 2001; Schuler et al., 2001; Queva et al., 2003; Gassmann et al., 2004) have been generated. As

mentioned in previous chapter, these mice exhibit an abolished response to baclofen *in vivo*. Furthermore, GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} share atypical phenotype including spontaneous seizures, hyperalgesia or cognitive impairment (Schuler et al., 2001; Gassmann et al., 2004). Secondly, with positive allosteric modulators, novel pharmacological tools for GABA_B receptors have been characterized (Urwyler, et al., 2001; Urwyler, et al., 2003). These molecules enhance the action of GABA at the GABA_B receptor and have little or no intrinsic agonistic efficacy on their own (Urwyler et al., 2001; Urwyler et al., 2003). Application of GABA_B receptor positive modulators in the presence of an agonist shifts the concentration-response curve to the left, as the modulators increase the potency of GABA. In addition, the maximal efficacy of GABA is increased. Allosteric positive modulation of metabotropic receptors is a recently identified phenomena, providing novel means for the pharmacological manipulation of G-protein-coupled receptors acting at a site apart from the orthosteric binding region of the receptor protein (Soudijn et al., 2002). Such properties suggest that allosteric modulators may offer a number of potential pharmacological improvements over the use of conventional agonists as has been demonstrated for modulators acting at ligand-gated ion channels (Costa, 1989). In the case of GABA_A receptors, such modulation has been therapeutically utilized with the benzodiazepines, which amplify the action of the endogenous neurotransmitter GABA. Therefore, we hypothesized that GABA_B receptor positive modulators will be superior drugs, devoid of the side effect profile associated with full agonists such as baclofen.

Thus, these novel tools, including mice lacking GABA_B receptors and positive modulators, provide a new opportunity to explore the role of GABA_B receptor in behavioural paradigms relevant to anxiety. Thus, we investigated the behavioural effect of genetic inactivation of GABA_{B(1)} and GABA_{B(2)} receptor subunit in several anxiety paradigms, such as light-dark box or staircase test. We attempt also to corroborate the effect of targeted

deletion of GABA_B receptor on anxiety with antagonist. Finally, we also assessed the effect of GABA_B receptor positive modulator in several animal model of anxiety.

4.2 Experimental Design.

The GABA_{B(1)} and GABA_{B(2)} knockout mice were generated on a BALB/c background as described previously (Schuler et al., 2001; Gassmann et al., 2004). Age and sex matched mice were used at an age of 3 to 8 months. Both male and female animals were used in all experiments in approximately equal amounts. There was no effect of gender on behaviours observed.

In order to minimize the influence of strain effects all pharmacological studies were carried out in male BALB/c mice (23-26 g) which were obtained from Iffa Credo, France excepted for the elevated zero maze experiment where both BALB/c and OF-1 (30-40g) mice were used. In a number of initial studies heterozygous mice (GABA_B^{+/-}) were also used, no gene dosage effect was found in any of the behaviours analyzed with heterozygotes behaving similarly to wildtypes. Regarding pharmacological studies, all drugs were administrated orally 1 hour prior behavioural testing.

Concerning the novelty-induced hypophagia experiment, the drugs was administrated 1 hour prior the test in the new environment. All drugs were made up fresh prior to use and administered in a suspension of 0.5% methylcellulose at a concentration of 10 ml/kg.

In the case of chronic studies, animals were injected in the afternoon (2-4 pm) for 21 days and tested on the morning following last injection. They were again injected immediately after the initial test and for the consecutive day, locomotor activity testing was carried out approx 24 hours following this last injection. Doses for chronic studies were selected from the dose-response studies of acute administration of the compounds (data presented in these studies).

4.3 Impact of targeted GABA_{B(1)} receptor subunit on anxiety related behaviours.

4.3.1 Light-dark box.

Upon being placed in the light side of the apparatus, freezing behaviours was observed in 30% of the GABA_{B(1)}^{-/-} mice but none of the wildtype. As shown in Fig.4.1, GABA_{B(1)}^{-/-} mice displayed marked increases in anxiety-related behaviours in the light-dark box paradigm compared with wildtype (GABA_{B(1)}^{+/+}) or heterozygous (GABA_{B(1)}^{+/-}) mice. ANOVA revealed a significant effect of genotype on the time spent in light compartments [F(2,45) = 11.02, P = 0.001] and on the number of transitions [F(2,45) = 4.39, P = 0.018]. Further, there was a genotype influence on the latency to enter in the dark compartment [F(2,45) = 4.86, P = 0.012.]. Post-hoc analysis revealed that GABA_{B(1)}^{-/-} mice exhibited a decrease of the latency to enter into the dark compartment compared to wildtype and heterozygous mice. GABA_{B(1)}^{-/-} mice showed a significant decrease in the time spent in light compartment compared to heterozygote or wildtype mice (Fig.4.1B) and exhibited significantly fewer light-dark transitions (Fig.4.1A). This latter parameter being the most reliable indicator of anxiety in the light-dark box test. Heterozygote mice behaved in the same manner as wildtype mice in all parameters in this test. Altogether, these effects are indicative of an increased anxiety in GABA_{B(1)}^{-/-} mice. In order to confirm the reliability of the phenotype a second cohort of animals were tested in the light-dark box. These GABA_{B(1)}^{-/-} mice had both qualitatively and quantitatively the same (anxious) phenotype (data not shown.).

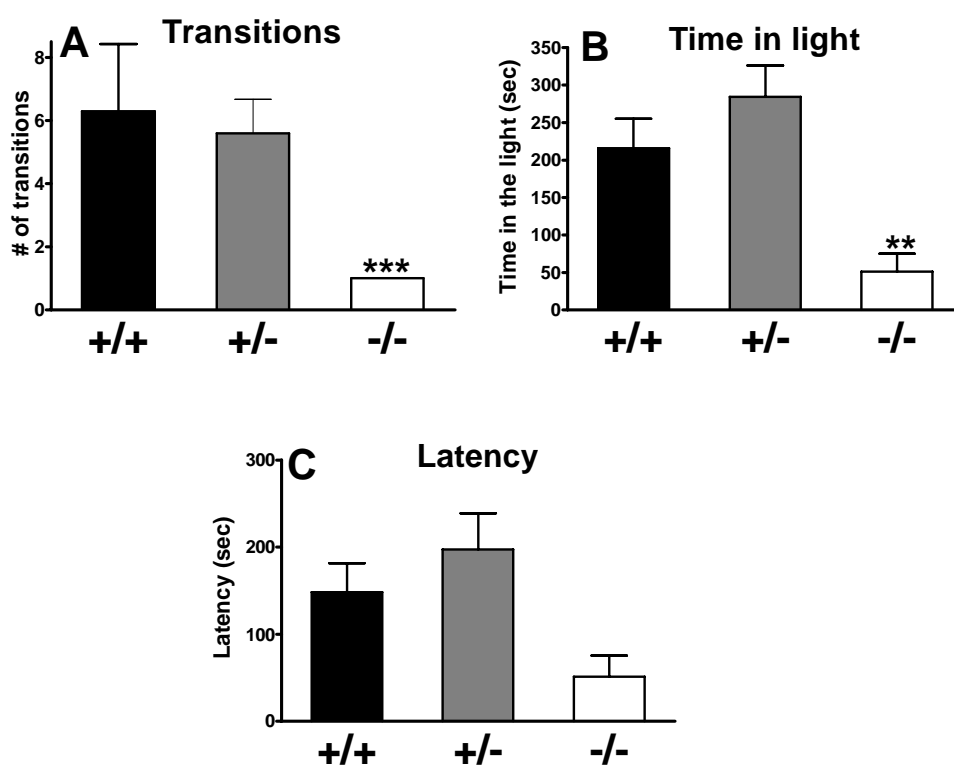


Fig.4.1. Increased anxiety in GABA_{B(1)} deficient mice in light-dark box.

(A) GABA_{B(1)}^{-/-} mice had a marked decrease of transitions between light and dark compartments compared with heterozygote or wildtype mice. (B) GABA_{B(1)}^{-/-} mice spent less time in light compartment in comparison to heterozygous or wildtype mice. (C) GABA_{B(1)}^{-/-} mice (n = 16) exhibited a decrease in latency to enter in the dark compartment, compared to heterozygous (n = 16), but not compared to wildtype mice (n = 16). All bars represent mean values, with vertical lines indicating one SEM. *, **, *** groups that differed significantly to wildtype mice (P < 0.05, P < 0.01 and P < 0.001 respectively).

4.3.2 Response to classical benzodiazepines in the light-dark box.

Regarding the latency to enter in the dark compartment, two-way ANOVA revealed an effect of genotype [F(1,58) = 9.645, P = 0.03], but not effect of treatment [F(2,58) = 0.802, P = 0.453] and no genotype x treatment interaction [F(2,58) = 1.360, P = 0.265]. These data suggest that GABA_{B(1)}^{-/-} mice are more anxious than their wildtype counterparts, but that benzodiazepines failed to significantly affect this parameter in both GABA_{B(1)}^{-/-} mice and wildtype. Concerning the time spent in the light compartment, two-way ANOVA failed to reveal any significant effect of genotype [F(1,58) = 1.867, P = 0.177], but an effect of

treatment [$F(2,58) = 3.390$, $P = 0.041$] and no genotype x treatment interaction [$F(2,58) = 0.188$, $P = 0.829$]. On examination of the number of transitions, Analysis of Variance (ANOVA) revealed an effect of genotype [$F(1,58) = 6.623$, $P = 0.013$], treatment [$F(2,58) = 3.283$, $P = 0.045$], but no genotype x treatment interaction [$F(2,58) = 0.829$, $P = 0.442$]. Post-hoc analysis indicated that diazepam or chlordiazepoxide increased significantly the number of transitions in wildtype mice, but this effect was markedly blunted in GABA_{B(1)}^{-/-} mice (Fig 4.2A). Nevertheless, taking together, these data corroborated that GABA_{B(1)}^{-/-} mice are more anxious than their wildtype counterpart and demonstrated that targeted deletion of GABA_{B(1)} receptor subunit attenuated the response to benzodiazepines in the light-dark box. Intriguingly, it has to be noted that the anxious phenotype of GABA_{B(1)}^{-/-} mice is less robust than in experiment of section 4.3.1. These discrepancies might be due to that many GABA_{B(1)}^{-/-} mice froze upon being placed in the apparatus (30% in vehicle treated animals) in the present study.

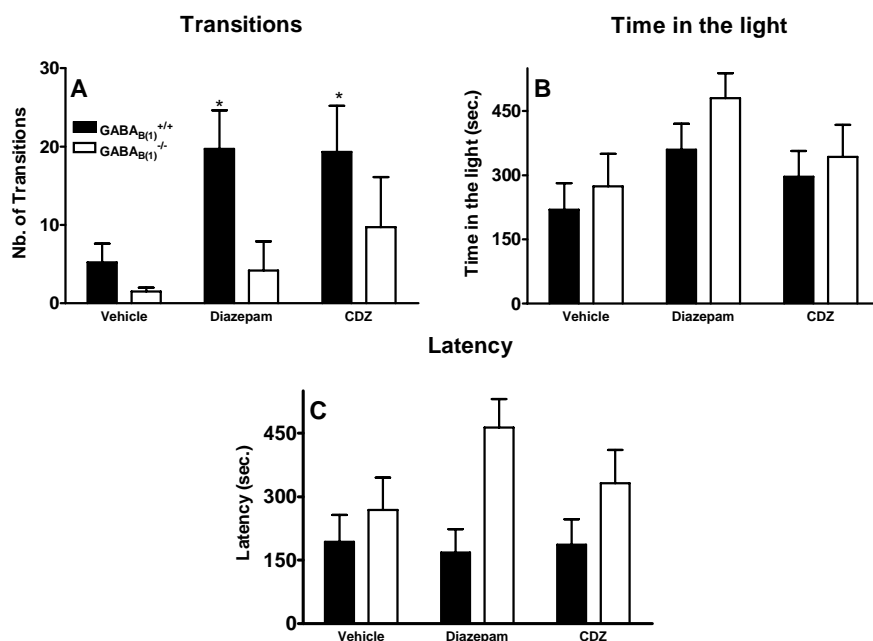


Fig.4.2. Blunted anxiolytic effect of benzodiazepines in GABA_{B(1)}^{-/-} mice.

A) Effects of acute administration of diazepam (7.5 mg/kg, p.o.) and chlordiazepoxide (CDZ, 10 mg/kg, p.o.) on the number of transitions in GABA_{B(1)}^{+/+} and GABA_{B(1)}^{-/-} mice: acute administration of diazepam (7.5 mg/kg, p.o.) and chlordiazepoxide (CDZ, 10 mg/kg, p.o.) increased the number of transitions in GABA_{B(1)}^{+/+} mice. $n = 10-11$ per treatment group. These two treatments didn't affect the number of transitions in GABA_{B(1)}^{-/-} mice. $n = 10-11$ per treatment group. B) Effects of acute administration of diazepam (7.5 mg/kg, p.o.) and chlordiazepoxide (CDZ, 10 mg/kg, p.o.) On the time spent in light compartment in GABA_{B(1)}^{+/+} and GABA_{B(1)}^{-/-} mice. (C) Effects of acute administration of diazepam (7.5 mg/kg, p.o.) and chlordiazepoxide (CDZ, 10 mg/kg, p.o.) on the latency to enter in dark compartment in GABA_{B(1)}^{+/+} and GABA_{B(1)}^{-/-} mice. All bars represent mean. Values, with vertical lines indicating 1 SEM. * groups that differed significantly to vehicle treated GABA_{B(1)}^{+/+} mice treated with vehicle ($P < 0.05$).

4.3.3 Staircase test.

In the staircase test, another paradigm for assessing anxiety-related behaviours, GABA_{B(1)}^{-/-} mice had lower number of rearings than wildtype and heterozygote mice [$F(2,45) = 23.15$, $P = 0.001$] (Fig.4.3B). In addition, the number of steps climbed by GABA_{B(1)}^{-/-} mice was decreased compared to wildtype and heterozygote mice [$F(2,45) = 52.61$, $P = 0.001$] (Fig.4.3A). This lack of exploration in the test was associated with a substantial amount of freezing behaviour.

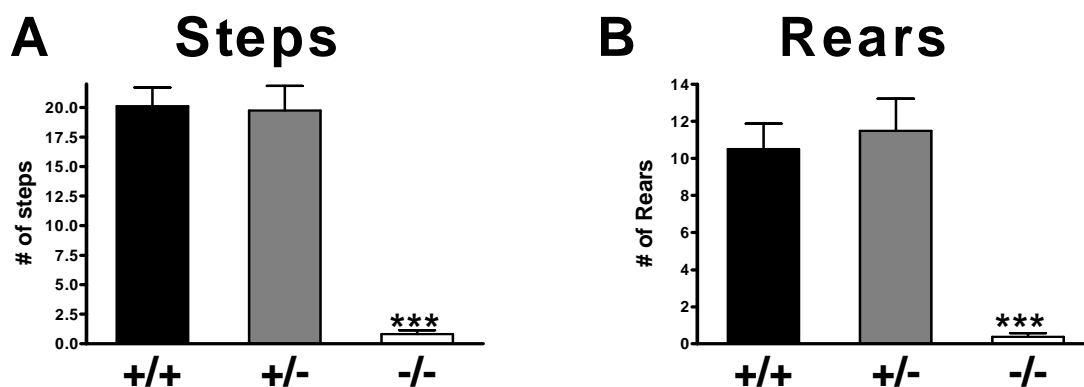


Fig.4.3. Increased anxiety in GABA_{B(1)}^{-/-} mice in the staircase test:

(A) GABA_{B(1)}^{-/-} mice ($n = 16$) exhibited a decrease in the steps climbed compared to heterozygous ($n = 16$) and wildtype ($n = 16$) mice. (B) GABA_{B(1)}^{-/-} mice had significantly less rearing events to heterozygous or wildtype mice. All bars represent mean values, with vertical lines indicating one SEM. *** groups that differed significantly to wildtype mice ($P < 0.001$).

4.3.4 Stress-induced hyperthermia.

Unfortunately, ANOVA revealed no significant effect of genotype on the magnitude of the SIH response [$F(2,46) = 2.657$, $p < 0.081$; Fig.4.4]. However, analysis of variances (repeated measures) indicated a significant effect of genotype on body temperatures [$F(2,46) = 7.960$, $p < 0.001$], effect of stress on the body temperature [$F(1,46) = 91.210$, $p < 0.001$] but no interaction genotype X stress [$F(2,46) = 2.657$, $p < 0.081$]. Thus, the stress induced by the measurement of basal rectal temperature increased significantly the temperature measured 15 min. after. However, post-hoc analysis revealed a significant decrease of temperature during the second measurement in GABA_{B(1)}^{-/-} compared to wild-type animals. Altogether, these data might suggest that targeted deletion of GABA_{B(1)} subunit produced anxiolytic effect in mice, however this phenomenon would be mainly due to dysfunction of thermoregulation processes in these mice.

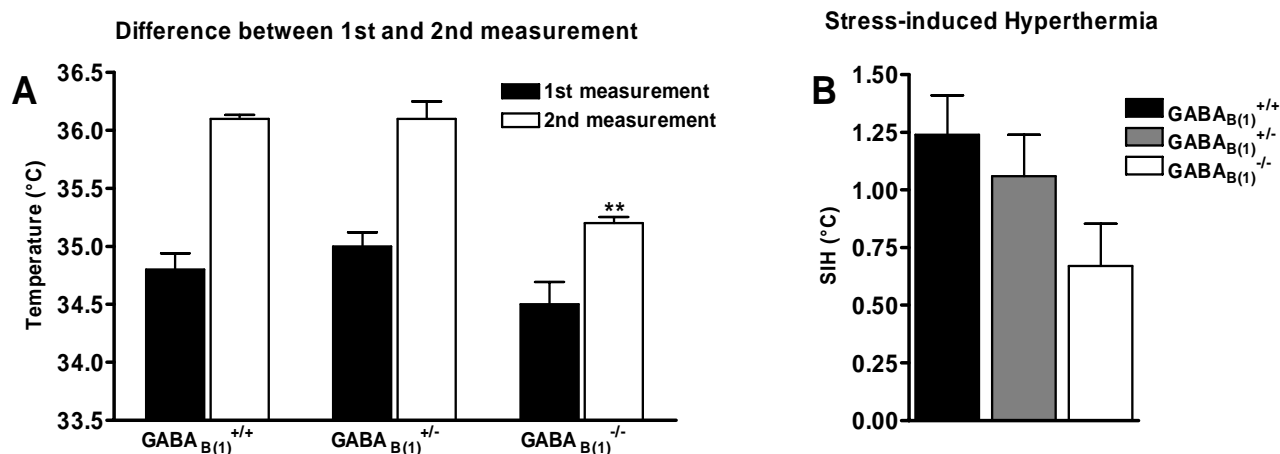


Fig.4.4. Effect of targeted deletion of GABA_{B(1)} receptor subunit in stress-induced hyperthermia paradigm:

(A) Effects of targeted deletion of GABA_{B(1)} receptor subunit on the basal temperature (first measurement) and body temperature (second measurement) 15 min after stress compared with baseline temperature (B) The stress induced hyperthermia in GABA_{B(1)}^{-/-} (n= 16), GABA_{B(1)}^{+/-} (n= 16) and GABA_{B(1)}^{+/+} (n= 17). All bars represent mean values, with vertical lines indicating one SEM. ** groups that differed significantly to wildtype mice (P < 0.01).

4.3.5 Elevated-zero maze.

No functional data were obtained from examining the behavioural response of GABA_{B(1)}^{-/-} mice in the elevated zero maze due to the fact that all of the GABA_{B(1)}^{-/-} mice actively jumped off the maze. Reasons for this increased flight response are likely to reflect an increase in anxiety/panic like behaviour as opposed to lack of motor co-ordination as evidenced by absence of motor deficits in rotarod tests (Schuler et al., 2001)(Schuler et al., 2001; Mombereau and Cryan unpublished observations). Further, similar flight reactions from an unstable elevated maze has been recently characterized as a novel model of panic/anxiety in rodents (King, 1999a; 1999b; Jones et al., 2002a; Jones et al., 2002b). Additionally such an ethological response has also been demonstrated in the wild house mouse (*Mus musculus*) in the elevated plus maze (Holmes et al., 2000).

4.4 Impact of targeted GABA_{B(2)} receptor subunit on anxiety related disorders.

4.4.1 *Light-dark box.*

Given that the most robust effect of targeted deletion of GABA_{B(1)} receptor subunit was observed in the light dark box, we investigate the effect of genetic ablation of GABA_{B(2)} receptor subunit in this test. Somewhat surprisingly, GABA_{B(2)}^{-/-} mice displayed a similar anxious phenotype to that of GABA_{B(1)}^{-/-} mice in the light-dark box. GABA_{B(2)}^{-/-} mice spent less time in the light compartment [t-test, P = 0.0028], and they had significantly lower number of transitions compare to wild-type mice [t-test, P < 0.001]; which is indicative of increased anxiety in this paradigm. In addition, the latency to move from the light to the dark area of the arena was decreased (Fig.4.5C). These data suggest that deletion of either subunit of the functional GABA_B heterodimer results in an enhancement of anxiety-behaviours in the light-dark box paradigm.

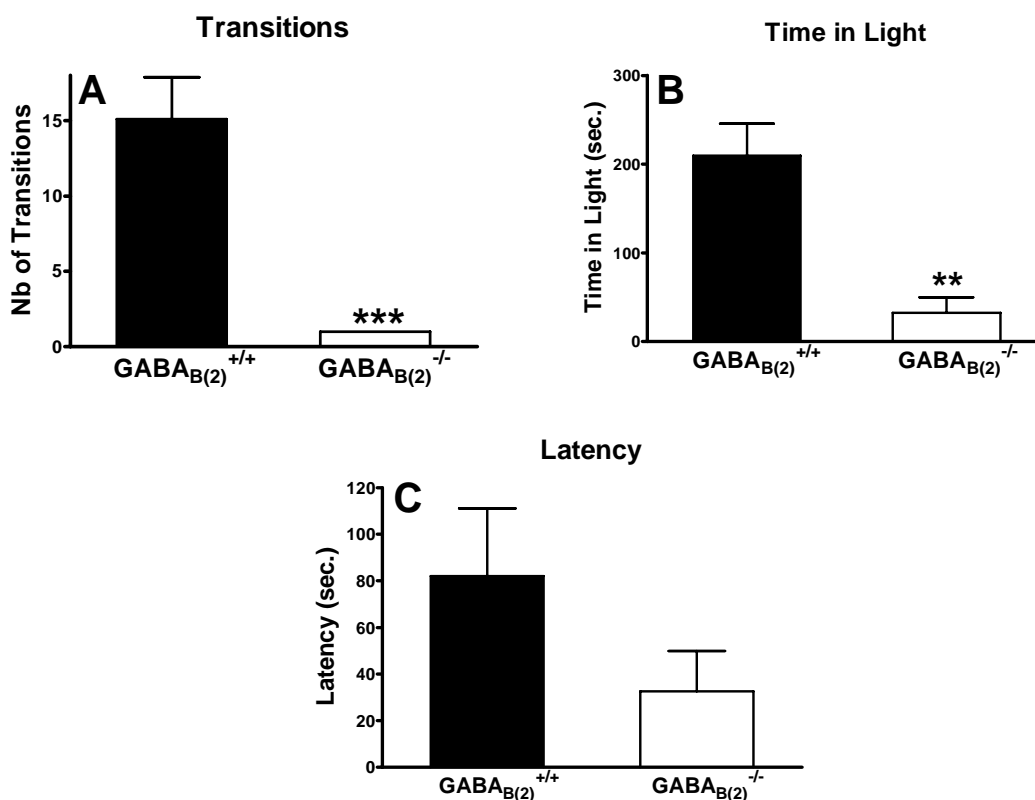


Fig.4.5. Increased anxiety in GABA_{B(2)} receptor subunit deficient mice in light-dark box.

(A) GABA_{B(2)}^{-/-} mice ($n = 6$) had a marked decrease of transitions between light and dark compartments compared with their respective counterpart wildtype mice ($n = 10$). (B) GABA_{B(2)}^{-/-} mice spent less time in light compartment in comparison to wildtype mice. (C) GABA_{B(2)}^{-/-} mice didn't exhibit a decrease in latency to enter in the dark compartment. All bars represent mean values, with vertical lines indicating one SEM. *, **, *** groups that differed significantly to wildtype mice ($P < 0.05$, $P < 0.01$ and $P < 0.001$ respectively).

4.5 Pharmacological studies.

4.5.1 Effects of GABA_B receptor positive modulator on anxiety-related behaviours

4.5.1.1 Light-Dark box.

As shown in Fig.4.6, ANOVA indicated an effect of drug treatment on the number of transitions between dark and light compartments [$F(4,45) = 10.06$, $P = 0.001$]. Post-hoc analysis revealed that GS39783 (0.3-30 mg/kg, p.o.) and the benzodiazepine chlordiazepoxide (10 mg/kg, p.o.) increased the number of transitions. Treatment with GS39783 or

chlordiazepoxide one hour prior to testing failed to influence the latency to enter the dark chamber but increased the time spent in the light compartment [F(4,45) = 9.30, P = 0.001]. Post-hoc analysis indicated a significant effect of both chlordiazepoxide and GS39783 (only at the highest dose tested (30 mg/kg)). These effects are not due to any confounding effect of GS39783 on locomotor activity as acute administration of GS39783 is devoid of any effects on locomotor activity (Cryan et al., 2004). It is of interest that the basal levels of anxiety the light-dark test in Fig.4.6. are considerably different between those in Fig.4.1. The reason for this may lie in the fact that these mice are purchased from Iffa Credo and those in Fig.4.1. are wildtype BALB/c mice which were housed with their more anxious littermates.

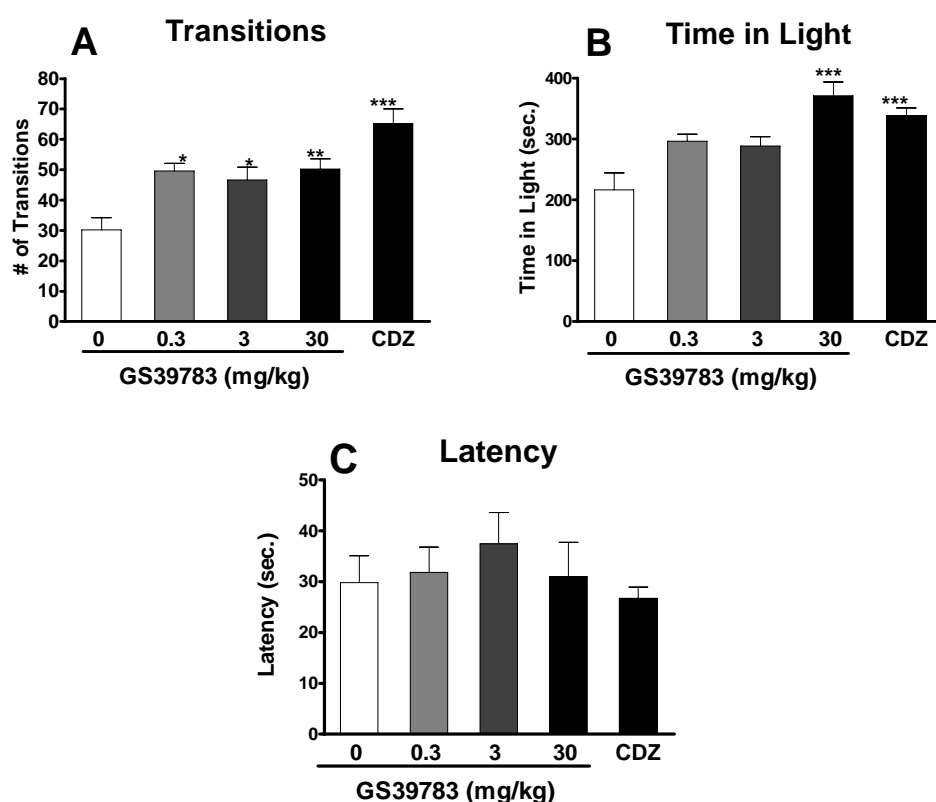


Fig.4.6. Anxiolytic effects of acute treatment with the GABA_B receptor positive modulator GS39783 in the light-dark test.

Effects of acute GABA_B positive modulator treatment (doses: 0, 0.3, 3 or 30 mg/kg, p.o.) and chlordiazepoxide (CDZ, 10 mg/kg, p.o.) on (A) the number of transitions between light and dark compartments during the test, (B) the time spent in light compartment and (C) the latency to enter into the dark compartment. n = 10 per treatment group. All bars represent mean values, with vertical lines indicating one SEM. *, **, *** groups that differed significantly to vehicle treated mice (P < 0.05, P < 0.01 and P < 0.001, respectively).

4.5.1.2 Chronic effects.

In an attempt to assess the effects of chronic administration of the positive modulator on anxiety-like behaviour, we tested GS39783, in addition to CGP56433A (a selective GABA_B receptor antagonist) and the antidepressants fluoxetine and desipramine in the light-dark box (20 to 24 hours following last treatment). ANOVA revealed an effect of chronic drug treatment on the time spent in the light side of the arena [$F(4,55) = 2.573$, $P = 0.04$] and the number of transitions between the light and the dark sides [$F(4,55) = 2.637$, $P = 0.04$], but had no effect on latency to enter into the dark compartment (Fig.4.7A). Post-hoc analysis revealed that GS39783 was the only compound tested to significantly modify the number of transitions (Fig.4.7A) and the time spent in the light side of the arena (data not shown). Taken together, these results indicate a potential anxiolytic effect of acute and chronic GS39783 treatment. As shown in Fig.4.7B, these effects are not due to any confounding effect of GS39783 on locomotor activity as chronic administration of GS39783 did not affect locomotor activity [$F(4,53) = 0.9289$, $P = 0.4543$]. It is of interest that the basal levels of anxiety in the light-dark test in Fig.4.7 are considerably different between those in Fig. 4.6. The reason for this may lie in the fact that although all mice are purchased from Iffa Credo, those in Fig.4.7. have been handled and injected daily for 21 days such stress has been shown to influence anxiety-like behaviours.

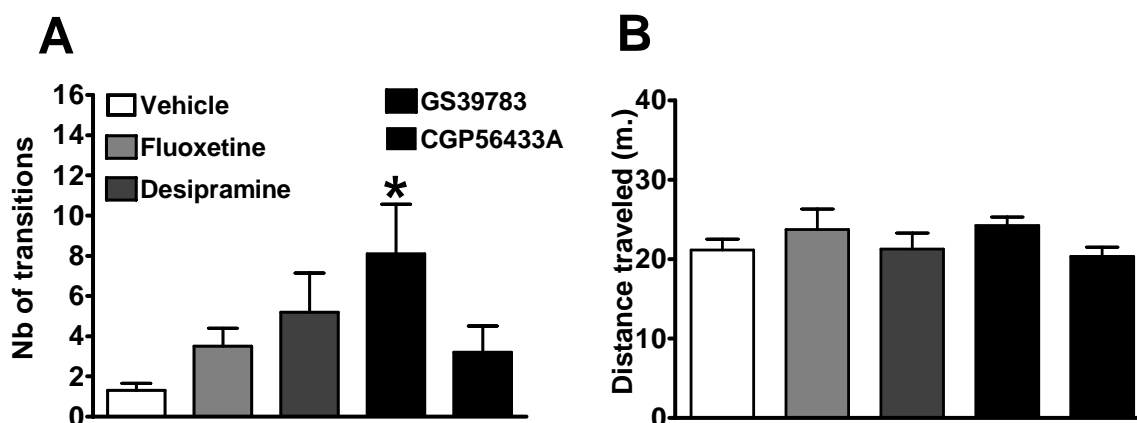


Fig.4.7. Chronic treatment with the GABA_B receptor positive modulator reveals anxiolytic effects in the light-dark box test:

Chronic treatment (21 days) with GABA_B the positive modulator GS 398783 (10 mg/kg, p.o., once daily), significantly increased (A) the number of transitions between light and dark compartments during the test, whereas fluoxetine (10 mg/kg, p.o., once daily), desipramine (15 mg/kg, p.o., once daily) and the GABA_B receptor antagonist (3 mg/kg, p.o., once daily) was without effect. N = 12 per treatment group. All bars represent mean values, with vertical lines indicating one SEM. * groups that differed significantly to vehicle treated mice (P < 0.05). (B) Locomotor activity in a novel environment following chronic (23 days) administration of the GABA_B receptor positive modulator (10 mg/kg, p.o.), fluoxetine (10 mg/kg, p.o.), desipramine (15 mg/kg, p.o.) and GABA_B receptor antagonist (3 mg/kg, p.o.) during the 30 minutes of test. Testing was carried out for thirty minutes 24 hours following last dose in the same animals previously tested in light-dark box. None of the treatments altered locomotor activity, indicating that the effects of GS39783 in the light-dark box are not due to any secondary stimulant effect. n = 12 per treatment group. All bars represent mean values, with vertical lines indicating one SEM.

4.5.1.3 Staircase test.

In the staircase, ANOVA indicated a significant effect of treatment on the number of steps climbed [F(4,55) = 10.362, P < 0.0001] but not on the number of rearings [F(4,55) = 0.745, P = 0.566]. Unfortunately, only the classical benzodiazepine, chlordiazepoxide, increased the number of step climbed and GS39783 appears to be without effect on the number of step climbed and rearings (Fig.4.8). Although GABA_B positive modulator, GS39783, was anxiolytic in light/dark box, it failed to affect behaviour in the staircase test.

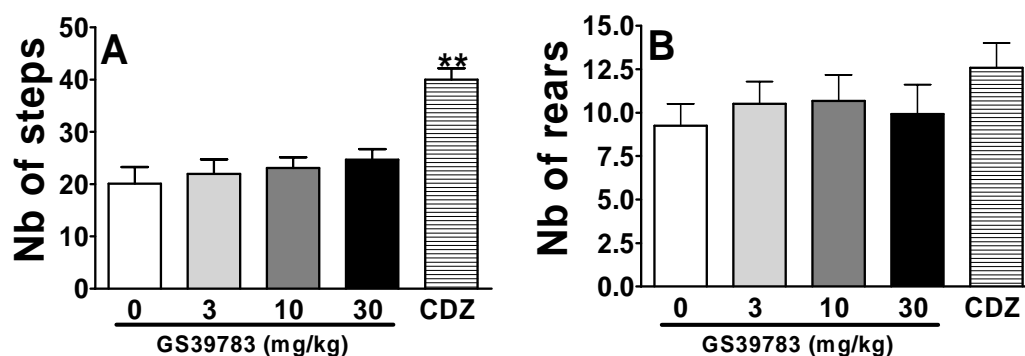


Fig.4.8. The effects of GABA_B receptor positive modulator, GS39783, and chlordiazepoxide in staircase test.

(A) the effects of GS39783, CDZ, on number of steps climbed, 60 min following injection. Values represent mean and S.E.M. (n = 12 animals). **, p ≤ 0.001 versus control group (0) (Fisher's post hoc test after ANOVA). (B) the effects of GS39783, CDZ, on number of rears, 60 min following injection. Values represent mean and S.E.M. (n = 12 animals).

4.5.1.4. Elevated-zero test.

BALB/c

To further confirm the anxiolytic effects of GS39783 we tested it in comparison with chlordiazepoxide in the elevated zero maze in BALB/c mice, the background strain on to which GABA_{B(1)}^{-/-} mice were generated. ANOVA revealed that drug treatment decreased the latency to enter the open sides of the maze [F(4,55) = 3.192, P = 0.020], the number of stretched-attend postures [F(4,55) = 13.16, P < 0.0001] and increased the time spent in the open side of maze [F(4,55) = 3.932, P = 0.007], increased the number of head dips [F(4,55) = 6.995, P < 0.00001], number of rearing [F(4,55) = 8.233, P < 0.0001], and the number of line crossings [F(4,55) = 33.76, P < 0.0001]. Post-hoc analysis revealed that chlordiazepoxide (10 mg/kg p.o.) significantly affected all parameters tested whereas GS39783 treatment reduced the latency to enter the open side at the highest dose tested (30 mg/kg, p.o.; P < 0.05) (Fig.4.9A) and at doses of 3 to 30 mg/kg, reduced the number of stretch-attend postures (Fig.4.9D) only. There was a trend toward GS 39783 increasing the time in the open parts of arena which failed to reach the level of significance (Fig.4.9B). GS 39783 failed to affect the number of head dips, number of rearings and the number of line crossings at any dose. Taken

together, these data further suggest an anxiolytic effect of GS39783, although the magnitude of the effects in this test are much less robust compared with that induced by benzodiazepine anxiolytics.

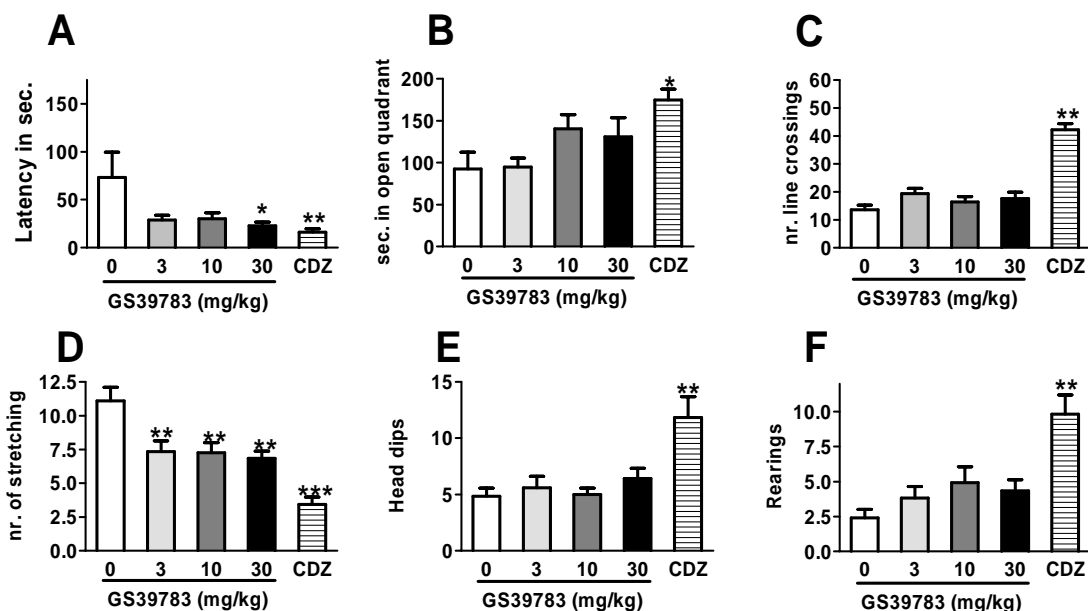


Fig.4.9. Effects of acute treatment with GS39783 in the elevated zero-maze test for anxiety behaviour in BALB/c mice.

Both the effects of acute GABA_B positive modulator GS39783 and chlordiazepoxide (10 mg/kg, p.o.) affected (A) the latency to enter in open side of maze and (D) the number of stretched attend postures. However, only chlordiazepoxide significantly increased the time spent in the open quadrants of the maze (B), increase head-dips (E), rearings (F) and the number of line crossed during the 5 min. of test (C). $n = 12$ per treatment group. All bars represent mean values, with vertical lines indicating one SEM. *, **, *** groups that differed significantly to vehicle treated mice ($P < 0.05$, $P < 0.01$ and $P < 0.001$, respectively).

OF-1

In OF-1 mice, ANOVA revealed that drug treatment decreased the latency to enter the open sides of the maze [$F(5,63) = 2.82$; $p=0.023$], the number of stretched-attend postures [$F(5,63) = 13.89$; $p<0.001$] and increased the time spent in the open side of maze [$F(5,63) = 10.36$; $p<0.001$], increased the number of head dips [$F(5,63) = 5.622$; $p<0.01$], number of rearing [$F(5,63) = 4.162$; $p=0.002$], and the number of line crossings [$F(5,63) = 19.79$; $p<0.001$]. In line with result obtained in BALB/c, posthoc analysis revealed that chlordiazepoxide (10 mg/kg p.o.) significantly affected all parameters tested. Unlike

BALB/c, GS39783 treatment failed to reduce the latency to enter the open side at the highest dose tested (Fig.4.10A), however GS39783 increased significantly the number of rearing at the highest dose used, and significantly decreased the number of stretched attend posture at 10 and 30 mg/kg (Fig.4.10D). In this strain, GS39783 failed to affect the time spent in open quadrants, the number of head dips and the number of line crossings at any dose (Fig.4.10B,C,E). Taken together, these data confirm the anxiolytic-like properties of GS39783 in elevated-zero maze paradigm.

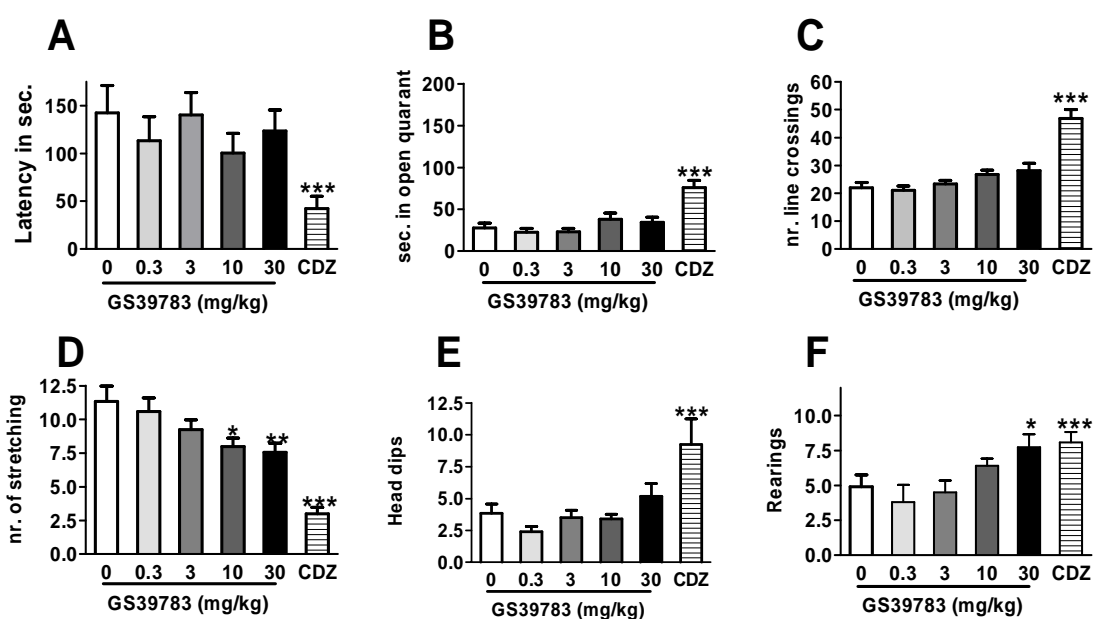


Fig.4.10. Effects of acute treatment with GS39783 in the elevated zero-maze test for anxiety behaviour in OF-1 mice.

Both the effects of acute GABA_B positive modulator GS39783 and chlordiazepoxide (10 mg/kg, p.o.) affected (D) the number of stretched attend postures and (F) the number of rearings. However, only chlordiazepoxide significantly decreased the latency to enter in open quadrant (A) and increased the time spent in the open quadrants of the maze (B), increase head-dips (E) and the number of line crossed during the 5 min. of test (C). n = 10-12 per treatment group. All bars represent mean values, with vertical lines indicating one SEM. *,** groups that differed significantly to vehicle treated mice (P < 0.05, P < 0.01 and P < 0.001, respectively).

4.5.1.5 Novelty-induced hypophagia

As mentioned in the introduction, the novelty induced-hypothermia is currently considered as an interesting model of anxiety in animals, mainly because it is sensitive to chronic antidepressant (Dulawa, 2005). Analysis of variances (repeated measures) indicated a

significant effect of treatment [$F(3,32) = 3.269$; $p=0.034$], of environment (Home vs New) [$F(1,32) = 231.68$; $p<0.001$] and treatment X environment interaction [$F(3,32) = 3.391$; $p = 0.03$] on the latency to drink. Post-hoc analysis revealed that latency to drink is significantly higher in the new environment and that mice treated with chlordiazepoxide exhibit a lower latency to drink in the new environment than vehicle treated animals (Fig.4.11A). In contrast, GS39783 appears to be without effect on this parameter. Concerning the volume intake during the first 5 minutes of test, Analysis of variances (repeated measures) indicated no significant effect of treatment [$F(3,32) = 0.624$; $p=0.605$] and treatment X environment interaction [$F(3,32) = 1.998$; $p = 0.134$], but an effect of environment (Home vs New) [$F(1,32) = 262.586$; $p<0.001$]. Post-hoc analysis revealed that both GS39783, at 30 mg/kg, and chlordiazepoxide increase the volume intake during the first 5 minutes in the new environment (Fig.4.11B). Regarding the total volume intake during the test, analysis of variances (repeated measures) indicated no significant effect of treatment [$F(3,32) = 2.109$; $p=0.119$], but an effect of environment (Home vs New) [$F(1,32) = 24.395$; $p<0.001$] and treatment X environment interaction [$F(3,32) = 4.379$; $p = 0.134$]. Post-hoc analysis revealed that chlordiazepoxide increases the total volume intake (Fig.4.11C).

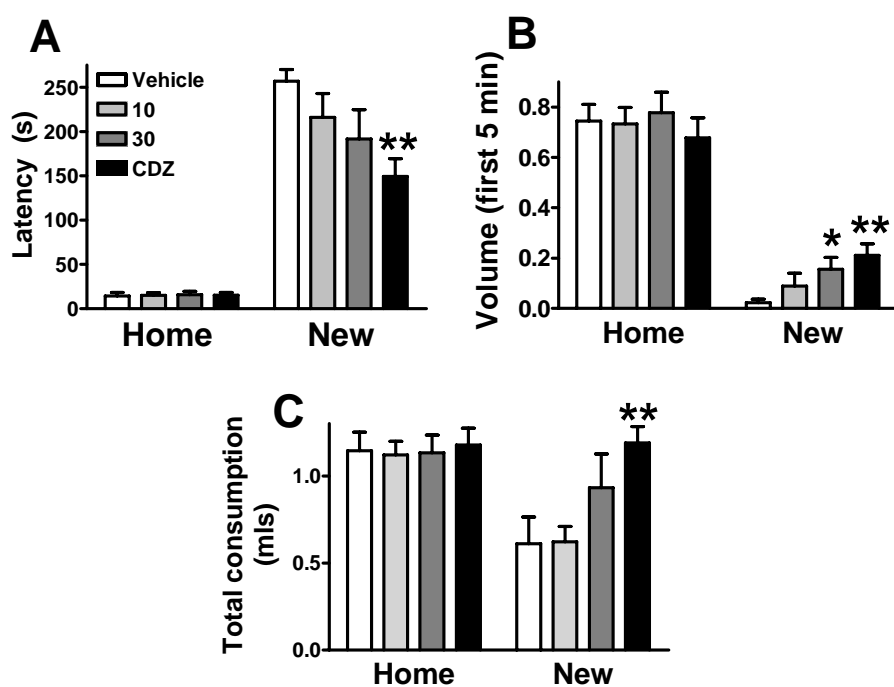


Fig.4.11. Effects of acute treatment with GS39783 novelty-induced hypophagia.

A. Effects of acute GABA_B positive modulator GS39783 and chlordiazepoxide (10 mg/kg, p.o.) on latency to consume in the home vs. a novel cage (B), Effects of acute GABA_B positive modulator GS39783 and chlordiazepoxide (10 mg/kg, p.o.) on the volume intake during the first 5 minutes in the home vs. a novel cage (C) Effects of acute GABA_B positive modulator GS39783 and chlordiazepoxide (10 mg/kg, p.o.) on the total volume intake during the 30 minutes of test. n = 9 per treatment group. All bars represent mean values, with vertical lines indicating one SEM. *,** groups that differed significantly to vehicle treated mice (P < 0.05 and P < 0., respectively).

4.5.2 .Effects of GABA_B receptor antagonist on anxiety-related behaviour.

4.5.2.1 Acute effect.

Given the anxiolytics properties of GABA_B receptor positive modulator in the several paradigms, we also assessed the effect of GABA_B receptor antagonist in the light-dark box. Surprisingly, we observed an anxiolytic like effect of GABA_B receptor antagonist whereas anxiogenic effect would be more expected. Thus, ANOVA revealed a significant effect of treatment on the time spent in light compartment [F(5,54) = 2.692; p = 0.0304], on the number of transitions between both compartments [F(5,54) = 154.9; p < 0.0001] but not on

the latency to enter in the dark compartment [$F(5,54) = 0.245$; $p = 0.940$]. Post-hoc analysis indicated that both Chlordiazepoxide and CGP564333A, at 10 and 30 mg/kg increased the time spent in the lit compartment (Fig.4.12A). In addition, Chlordiazepoxide increased also significantly the number of transitions and there was a trend toward GS 39783 increasing this parameter which failed to reach the level of significance (Fig.4.12B).

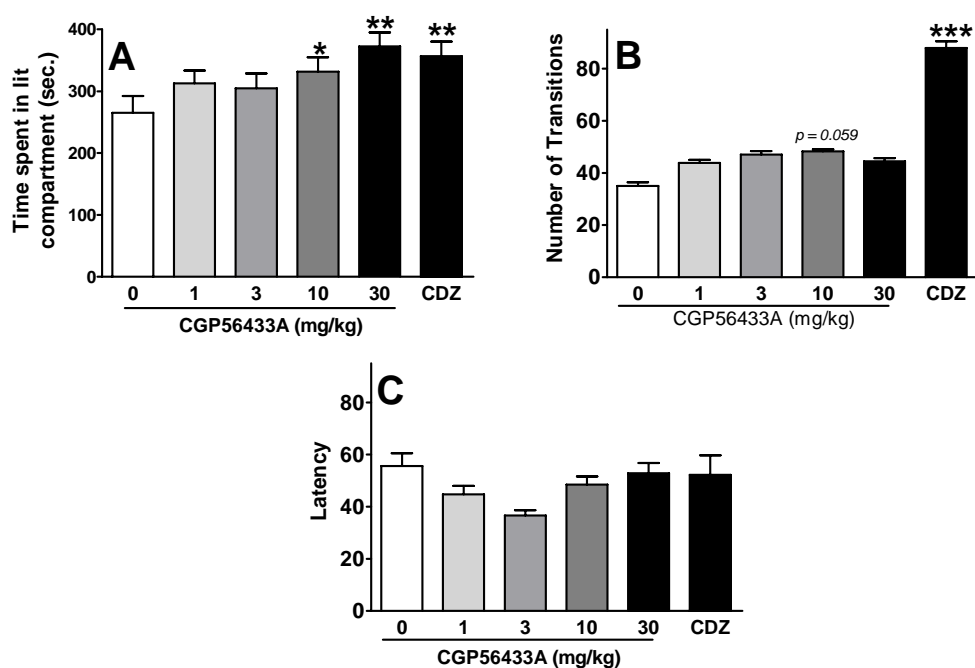


Fig.4.12. Anxiolytic effects of acute treatment with the GABA_B receptor antagonist CGP564333A in the light-dark test.

Effects of acute GABA_B receptor antagonist receptor (doses: 0, 1, 3, 10 or 30 mg/kg, p.o.) and chlordiazepoxide (CDZ, 10 mg/kg, p.o.) on (A) the number of transitions between light and dark compartments during the test, (B) the time spent in light compartment and (C) the latency to enter into the dark compartment. $n = 10$ per treatment group. All bars represent mean values, with vertical lines indicating one SEM. *, **, *** groups that differed significantly to vehicle treated mice ($P < 0.05$, $P < 0.01$ and $P < 0.001$, respectively).

4.6 Discussion.

In this chapter, we sought to combine pharmacological and genetic approaches to obtain converging information on the function of GABA_B receptors in behavioural processes. Using this dual approach, we demonstrate that through differential pharmacologically manipulation of GABA_B receptors one can modify behaviours relevant to anxiety related

behaviours. Thus, deletion of GABA_{B(1)} receptor subunit results in a more anxious phenotype in mice and a decreased sensitivity to classical benzodiazepines in the light-dark box. Similarly, we observed that genetic ablation of GABA_{B(2)} receptor subunits produced analogous anxious phenotype than observed in GABA_{B(1)}^{-/-} mice. Congruent with these data, we demonstrated that activation of GABA_B receptors, via GABA_B receptor positive modulator, results in anxiolysis. Interestingly, treatment with a GABA_B receptor antagonist also resulted in a mild anxiolytic-like effect with no anxiogenic-like effects observed in the light-dark box. Given the complex overt behavioural phenotype of GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice, which includes a high propensity for spontaneous epileptic seizures, hyperalgesia and amnesia (Schuler et al., 2001; Gassmann et al., 2004), it was important to combine both genetic and pharmacological approaches. Together, these studies clearly demonstrate that GABA_B receptors play a role in the modulation of behaviours relevant to anxiety related behaviours (Holmes, 2001).

Using the light-dark box, one of the most widely used tests for assessing anxiety-related behaviour in rodents, we clearly show that GABA_{B(1)}^{-/-} mice are more anxious than their wildtype counterparts (Fig.4.1). Complimentary data were also found in the staircase anxiety test, where GABA_{B(1)}^{-/-} mice had a substantial increase in freezing behaviour and failed to explore the elevated platform compared to wildtype animals (Fig.4.3.). It should be noted that this increase in anxiety related behaviours is robust and not masked by the already high anxiety of the parental strain. In a variety of paradigms it has been shown that BALB/c mice exhibit increased anxiety-related behaviours compared to other inbred strains of mice (Belzung and Griebel, 2001). The use of mice on this background strain was essential for the generation of GABA_B related knockout animals, as mice on other strains died very prematurely (Prosser et al., 2001; Queva et al., 2003). Interestingly, unlike genetic deletion chronic pharmacological antagonism of GABA_B receptors with CGP56433A failed to alter anxiety related behaviour in the light-dark-box (Fig.4.7.). This indicates that loss of GABA_B

receptor during development may be critical for the increased anxiety phenotype to be unveiled, indeed using conditional knockout technology, such an assertion has recently been ascertained for the 5-HT_{1A} receptor (Gross et al., 2002). It is unlikely that the increased anxiety-like behaviour is due to motor failure in the animals. Although GABA_{B(1)}^{-/-} have less activity in locomotor chambers their activity increases over time as they habituate to the environment (See chapter 5).

Concerning the putative anxiolytic effect of targeted deletion of GABA_{B(1)} receptor subunit in stress-induced hyperthermia paradigm, we cannot exclude a putative dysfunction of thermoregulation in these mice. Indeed, as we shown in the previous chapter, GABA_B receptor plays a key role in the regulation of body temperature. Although GABA_B receptor antagonist has no effect on basal temperature, suggesting that there would be any endogenous GABA_B ergic tone under basal condition, we can hypothesize that GABA_B receptor might be recruited under certain circumstances such as stress.

We also demonstrated that that selective ablation of GABA_{B(1)} receptor subunit attenuated the response to benzodiazepines in the light-dark box test (4.2.). This suggests a functional relationship between both GABA_B and GABA_A receptors *in vivo*. Thus, we can speculate that targeted deletion of GABA_{B(1)} receptor subunit might induced an alteration in benzodiazepine binding and/or GABA_A subunit expression as is the case with the 5-HT_{1A} receptor knockout (Sibille et al., 2000). Indeed, an attenuated response to benzodiazepines in 5-HT_{1A} receptor knockout mice has been shown to be correlate with a downregulation of α_1 and α_2 GABA_A subunits and decrease in benzodiazepine binding in the amygdala. Conversely, Queva and collaborators (2003), in a recent study, demonstrated that GABA_{B(1)}^{-/-} mice are more, but not less, sensitive to muscimol, using hypothermia as physiological readout of GABA function. However, we can presume that genetic ablation of GABA_{B(1)} receptor subunit might differentially affect GABAergic function involved in thermoregulation

and in anxiety-related behaviour. Although these results confirm that GABA_B/GABA_A interaction might be involved in the hyposensitivity to benzodiazepines observed in GABA_{B(1)}^{-/-} mice, we cannot exclude that this attenuated efficacy of chlordiazepoxide and diazepam is due to an interaction between loss of GABA_B receptor function and the background strain employed (Lepicard et al., 2000).

In line with the result obtained in GABA_{B(1)}^{-/-} mice, we demonstrated that genetic inactivation of the GABA_{B(2)} receptor subunit produces the same behavioural effects as that following GABA_{B(1)} receptor subunit deletion. Indeed, the GABA_{B(2)}^{-/-} mice exhibited a decreased time spent in the light compartment and a decrease in the number of transitions between the light and dark compartment, analogous to the behaviour observed in GABA_{B(1)}^{-/-} mice. However, it should be noted that although we demonstrated that genetic inactivation of GABA_{B(1)} or GABA_{B(2)} subunit produces an anxiogenic effect, pharmacological studies fail to demonstrate anxiogenic profile of GABA_B antagonists (Fig.4.12.). In addition, the behavioural similarities between GABA_{B(2)}^{-/-} and GABA_{B(1)}^{-/-} mice observed in the present study, agree with the current GABA_B receptor models implying that genetic inactivation of one of the two subunit blocks receptor function (Kaupmann et al., 1998a). Thus, these data confirmed the results obtained in the previous chapter suggesting that GABA_B function require the assemble of GABA_{B(1)} and GABA_{B(2)} receptor subunit. Nonetheless, several studies demonstrated that GABA_{B(1)} subunit may be functional either alone or in combination with an unknown protein (Bettler et al., 2004). Moreover, a differential expression of GABA_{B(1)} and GABA_{B(2)} receptor protein in subpopulations of striatum has been demonstrated (Ng and Yung, 2001). In addition, the recent description of a residual electrophysiological GABA_B receptor response in hippocampal slices from GABA_{B(2)}^{-/-} mice suggests that GABA_{B(1)} receptor subunits may be able to form functional receptors on their own (Gassmann et al., 2004). Therefore, although our data do not provide further evidence for this hypothesis, distinctive roles of individual GABA_B receptor subunits in the regulation of

behaviour cannot be formally excluded. However, heterodimerization seems to be a prerequisite for the contribution of GABA_B in the neurophysiology of anxiety.

Given that GABA_{B(1)}^{-/-} mice have elevated anxiety-like behaviour, we hypothesized that by activating GABA_B receptors we would be able to decrease anxiety in normal animals placed in an aversive environment. As expected, following acute administration of the recently identified GABA_B receptor positive modulator GS39783 (Cryan et al., 2004), animals displayed reduced anxiety in the majority of behavioural paradigms used. More specifically, we demonstrated that GS39783 decreased the avoidance to potentially dangerous area, such as lit compartment in the light-dark box (Cryan and Holmes, 2005). Indeed, GS39783 decreased the time spent in the lit compartment in the light-dark box. Furthermore, we also observed that GABA_B positive modulation increase exploratory behaviour in the elevated zero maze, increasing the number of rearing, and in the light-dark box, increasing the number of transitions between both compartments. Therefore, both BALB/c and OF-1 mice treated with GS39783 exhibits less total stretch attends posture in elevated-zero maze, suggesting that GABA_B positive modulator might decrease risk assessment in this paradigm (Dawson and Tricklebank, 1995). In addition, we also demonstrated that GS39783, (at 30 mg/kg only), attenuated the phenomenon of hyponeophagia, confirming the putative anxiolytic-like properties of GABA_B receptor positive modulator (Dulawa and Hen, 2005). Although we failed to demonstrated any effect of GS39783 in the staircase paradigm, a recent study demonstrated anxiolytic properties of GS39783 in stress-induced hyperthermia suggesting that GABA_B positive modulator could attenuate anticipatory anxiety measured in stress-induced hyperthermia paradigm (Cryan et al., 2003c). Further, the anxiolytic effects of GS39783 were also observed following chronic treatment (Fig.4.7). Thus, the present chapter reports that GS39783 is effective in several models of anxiety and on several forms/aspects of anxiety. Being a positive modulator GS39783 is potentially advantageous over full GABA_B receptor agonists which potentially engenders it more amenable for use *in vivo*, the major side

effects associated with full agonists include sedation, muscle relaxation, hypothermia cognitive impairing effects (Cryan et al., 2004). Therefore, given the clinical effectiveness of baclofen in the treatment of panic disorder and post-traumatic stress disorder (Breslow et al., 1989; Drake et al., 2003), it might be also essential to assess the effect of GABA_B receptor positive modulator in animal model of these disorders. Indeed, paradigms such as lactate-induced panic-like behaviour (Shekhar et al., 2001) or predatory-stress induced memory impairment (El Hage et al., 2005) may be valuable behavioural tools to confirm the putative therapeutic properties of GABA_B receptor positive modulator.

Although positive modulation and genetic ablation of GABA_B receptors appear to modulate anxiety in opposite manners, we also found that pharmacological blockade of GABA_B receptor, via acute administration of CGP56433A, induced moderated anxiolytic effect in the light-dark box paradigm. These data corroborate the results obtained with another highly potent GABA_B receptor antagonist in the elevated plus maze. Indeed, intracerebroventricular injection of CGP35348 has been shown to increased percent of open arm entries (Zarrindast et al., 2001). Although these results need to be confirmed in other behavioural paradigms, we can presume that GS39783 and CGP56433A recruit differentially pre-or post-synaptic GABA_B receptor, leading to the same behavioural effect. On the other hand, these effects could also be due to also agonistic or partial agonistic efficacy of CGP56433A. Indeed, Urwyler and collaborators demonstrated that CGP35348 and 2-OH-saclofen, which did not stimulate GTP(γ)³⁵S binding at all on their own, might become partial GABA_B receptor agonists in the presence of the allosteric modulators (Urwyler et al., 2005).

In summary the present set of data is clearly indicative of potential anxiolytic activity of GABA_B receptor positive modulator and conversely genetic ablation of one of the two GABA_B receptor subunits induced anxious phenotype in mice. Nevertheless, the mechanisms responsible for the influence of GABA_B receptors on anxiety behaviour are not well

understood. Therefore, future studies should focus on behavioural and electrophysiological responses of GABA_B receptor activation in key brain regions that are associated with anxiety. Currently, several neural substrates might be hypothesized to be involved in this phenomenon, such as the amygdala or raphé nuclei. Taking together, these data reconfirm the concept that GABA_B receptors are relevant therapeutic target for anxiety disorders.

CHAPTER 5: THE ROLE OF GABA_B RECEPTORS IN DEPRESSIVE DISORDERS.

5.1 Introduction.

In addition to a putative role of GABA_B receptor in the modulation of anxiety related behaviours, preclinical and clinical data have also implicate GABA_B receptor in the pathophysiology of mood disorders (see section 1.3.2). Indeed, depressed patients exhibit a blunted growth hormone response to baclofen (Marchesi et al., 1991; O'Flynn and Dinan, 1993). Furthermore, learned helplessness has been shown to decrease GABA_B receptor expression in the frontal cortex and that this decrease was reversed following antidepressant administration (Martin et al., 1989). In line with these results, Gray and Green demonstrated an increased GABA_B receptor function in mouse frontal cortex after repeated administration of antidepressant drugs or electroconvulsive shocks (Gray and Green, 1987). More recently, several authors have pointed that GABA_B receptor antagonist might have antidepressant-like properties (Cryan and Kaupmann, 2005). Indeed, GABA_B receptor blockade have been shown to elicit antidepressant-like effects in several depression paradigms , including learned helplessness (Nakagawa et al., 1996a), forced swim test (Nakagawa et al., 1996c; Slattery et al., 2005a) or chronic mild stress (Bittiger et al., 1996). Thus, the recent generation of GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice provide a novel opportunity to further explore the role of GABA_B receptors in depression-related disorders.

The release of monoamines has been shown to be modulated via GABA_B receptors (Bowery et al., 1980). In particular, emerging evidence suggests a strong interaction between GABA_B receptors and serotonergic system. GABA_B receptors are densely localized on, and intricately interact with serotonergic neurons in the dorsal raphé nucleus (Abellan et al., 2000;

Burman et al., 2003; Serrats et al., 2003). Moreover, GABA_B receptor activation is known to inhibit 5-HT cell firing in the raphé nucleus (Innis, 1988). In addition, microdialysis studies have shown that GABA_B receptor activation in raphé nucleus decreases serotonin release (Tao et al., 1996). Mice lacking the 5-HT transporter have been shown to exhibit desensitization of 5-HT_{1A} autoreceptors and of GABA_B receptors in the dorsal raphé nucleus (Mannoury la Cour et al., 2004) providing further evidence supporting an interaction between the serotonergic system and GABA_B receptors. More recently, GABA_B receptor antagonists have an antidepressant-like profile in the forced-swim test similar to that of serotonergic antidepressants (Slattery et al., 2005a) which is blocked via serotonin depletion. Taken together these, data suggest that antidepressant-like effect of GABA_B receptor antagonist might be mediated via serotonin-GABA_B receptor interaction.

The hypothalamic-pituitary-adrenal (HPA) axis is a key regulator of the stress reaction. Dysregulation of this axis is thought to play a central role in the pathophysiology of depressive disorders (de Kloet et al., 2005). In addition, it is clear, from both preclinical and clinical studies that exposure to stressors could participate in the ontogenesis of affective illness, such as depressive syndrome, via alteration of the negative feedback of HPA axis (Holsboer et al., 1980). Furthermore, the serotonin (5-HT) system and the HPA axis have complex inter-relationships (Porter et al., 2004). In particular, the 5-HT_{1A} receptor is very susceptible to modulation by stress and HPA-axis activation and is well known to play an important role in the pathophysiology of mood disorders (Cryan and Leonard, 2000; Leitch et al., 2003). Indeed, it is well accepted that adrenal steroids, such as corticosterone, exerts a tonic inhibitory action on 5-HT_{1A} receptor expression in the hippocampus. In particular adrenalectomy have been shown to up-regulated hippocampal 5-HT_{1A} gene expression (Kuroda et al., 1994; Meijer and de Kloet, 1998). Conversely, several studies have demonstrated that long-term corticosterone treatment can counteract adrenalectomy-induced 5-HT_{1A} receptor

upregulation (Chalmers et al., 1994). More recently, Lopez and co-workers demonstrated, in a series of elegant studies, a down-regulation of hippocampal 5-HT_{1A} receptors in both chronically stressed rats and major depressed patients (Lopez et al., 1998). Additionally, they demonstrated also that chronic administration of desipramine, a tricyclic antidepressant, prevent the effect of chronic stress on hippocampal 5-HT_{1A} receptors mRNA, suggesting that these receptors might be involved in antidepressant response. Supporting this hypothesis, recent studies demonstrated an up-regulation of 5-HT_{1A} receptor mRNA in the hippocampus of mice exhibiting antidepressant-like phenotype (Fabre et al., 2000; Mitsukawa et al., 2005).

In the present studies, we investigated the impact of both genetic inactivation and pharmacological blockade of GABA_B receptors on behaviour in two animal models of antidepressant action, the forced swim test and the tail suspension test. In order to investigate the interaction between GABA_B receptor and serotonergic system, we also assessed the effects of a GABA_B receptor antagonist on the anti-immobility effect of an SSRI. Using baclofen-induced hypothermia, we assessed the impact of pharmacological blockade and genetic inactivation of serotonin transporter on GABA_B receptor function. Finally, we investigated the effects of routine daily handling and oral injection on hippocampal 5-HT_{1A} receptor mRNA in the BALB/c mouse strain. It has been hypothesized that the BALB/c strain may be a relevant strain to model trait, pathological anxiety (Belzung and Griebel, 2001) and are particularly sensitive to the effects of chronic antidepressant treatments (Dulawa et al., 2004). Further, we investigated the effects of antidepressants from two different classes to alter any potential changes. Similarly, we examined whether GABA_B receptors play any role in stress-induced modulation of 5-HT_{1A} receptors and investigated the effects of GABA_B receptor agonist, novel GABA_B receptor positive modulator GS39783 and the GABA_B receptor antagonist CGP56433A on 5-HT_{1A} mRNA expression.

5.2 Experimental Design.

The GABA_{B(1)} and GABA_{B(2)} knockout mice were generated on a BALB/c background as described previously (Schuler et al., 2001; Gassmann et al., 2004). Age and sex matched mice were used at an age of 3 to 8 months. Both male and female animals were used in all experiments in approximately equal amounts. There was no effect of gender on behaviours observed. In order to minimize the influence of strain effects, all pharmacological studies were carried out in male BALB/c mice (23-26 g) which were obtained from Charles River (formally Iffa Credo), France. In a number of initial studies heterozygous mice (GABA_B^{+/-}) were also used, no gene dosage effect was found in any of the behaviours analyzed with heterozygote behaving similarly to knockouts.

Regarding pharmacological studies, all drugs were administered orally 1 hour prior behavioural testing. All drugs were made up fresh prior to use and administered in a suspension of 0.5% methylcellulose at a concentration of 10 ml/kg. In the case of chronic studies, animals were injected in the afternoon (2-4 pm) for 21 days and tested on the morning following last injection. They were again injected immediately after the initial test and for the consecutive day, locomotor activity testing was carried out approx 24 hours following this last injection. Doses for chronic studies were selected from the dose-response studies of acute administration of the compounds (data presented in these studies).

Baclofen-induced hypothermia experiments were carried out using male BALB/c mice (23-26 g) which were obtained from Iffa Credo France. Regarding acute study, (9 mg/kg; p.o.) L-baclofen and fluoxetine (20 mg/kg; p.o.) were injected simultaneously and rectal temperature was measured 60 minutes and immediately before; 60 minutes and 2 hours after L-baclofen administration. Doses were selected from previous studies showing robust effects at these doses.

In the case of chronic studies, animals were injected with fluoxetine (20 mg/kg; p.o.) in the afternoon (2-4 pm) for 21 days and baclofen-induced hypothermia were performed 24, 48 and 72 hours after the last injection of fluoxetine. Rectal temperature was measured immediately before; 60 minutes and 2 hours after L-baclofen administration (9 mg/kg; p.o.). Finally, 5-HTT^{-/-} and 5-HTT^{+/+} (18-24 g) were obtained from heterozygous mutants of C57BL/6. Rectal temperature was measured 60 minutes and immediately before; 30 minutes, 60 minutes, 2 hours and 4 hours after (±)baclofen administration (12 mg/kg; p.o.) (dose corrected in order to have robust effect on hypothermia)

Concerning the experiments assessing the impact of GABA_B receptor ligands and antidepressants on downregulation of 5-HT_{1A} receptor induced by chronic handling, mice were given daily injections (o.d; p.o.) for 21 days. During this period animals they were given active drug treatment for the last 1, 7, or 21 days of this treatment regimen with one of these six treatments (N=12): vehicle, desipramine (15 mg/kg); fluoxetine (20 mg/kg); the prototypical GABA_B agonist L-baclofen, (5 mg/kg), GS39783, a novel GABA_B receptor positive modulator (10 mg/kg) and CGP56433A, a GABA_B receptor antagonist (3 mg/kg). This treatment regimen was adopted to ensure equal amount of daily handling and injection stress in all groups. Handling was minimal and was just the amount needed to restrain the animal for injection and to weigh it daily. In addition, twelve mice were untreated and unhandled but kept in the same environment for the duration of the experiment; these constituted the control group (unstressed group). Hippocampi were collected one hour after the last injection and frozen at -80°C and 5-HT_{1A} receptor mRNA were analyzed via RT-PCR (see section 2.5)

5.3 Impact of targeted deletion of GABA_{B(1)} or GABA_{B(2)} receptor subunits on depression related disorders.

5.3.1 Effects of targeted deletion of GABA_{B(1)} receptor subunit in models of antidepressant activity.

5.3.1.1 Forced swim test.

The FST is the most widely used tool for assessing depression and antidepressant-related phenotypes in genetically altered mice (Porsolt, 2000; Cryan et al., 2002a; Cryan and Mombereau, 2004), hence we examined the effects of mice with a targeted deletion of the GABA_{B(1)} receptor subunit on behaviour in this test. As shown in Fig. 7A, there was a significant effect of genotype on immobility time in the FST [*t*-test, *P* = 0.012]. GABA_{B(1)}^{-/-} mice had a significantly lower immobility time as compared to wildtype control mice. The magnitude of reduced immobility of the GABA_{B(1)}^{-/-} mice in this test is similar to that which we and others have reported for a variety of antidepressants, including selective monoamine reuptake or oxidase inhibitors (Porsolt et al., 1978; Cryan et al., 2001; Lucki et al., 2001). It is noteworthy that there was no observable occurrence of seizures or altered motor patterns in animals subsequent to being submerged in the water.

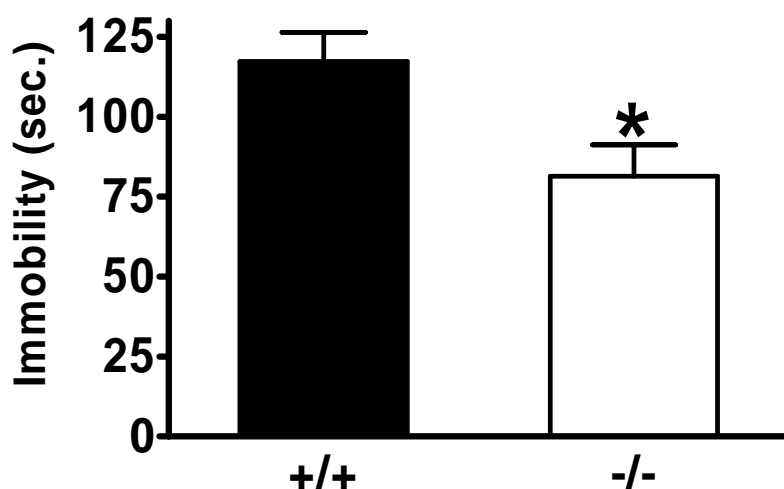


Fig.5.1. Effect of targeted deletion of GABA_{B(1)} receptor subunit in the forced swim test.

GABA_{B(1)}^{-/-} mice (n = 16) had a much lower immobility score than wildtype (n = 16) in the mouse forced swim test, which indicates an antidepressant-like effect. All bars represent mean values, with vertical lines indicating one SEM. *Groups that differed significantly from wildtype mice (P < 0.05).

5.3.1.2 Tail suspension test.

We also tested the animals in the tail suspension test, another well validated model for assessing depression related behaviour in mice (Steru et al., 1985). Further confirming accumulating evidence, that both tests rely on different neurochemical substrates to mediate their behavioural effects (see (Cryan et al., 2005), deletion of GABA_{B(1)} receptor subunit failed to affect the immobility score in this test (*t*-test, P = 0.710) (Fig.7B). There was no observable occurrence of seizures or altered motor patterns in animals subsequent to being suspended by the tail. Further, no tail climbing was observed as has been reported with other background strains of mice (Mayorga and Lucki, 2001).

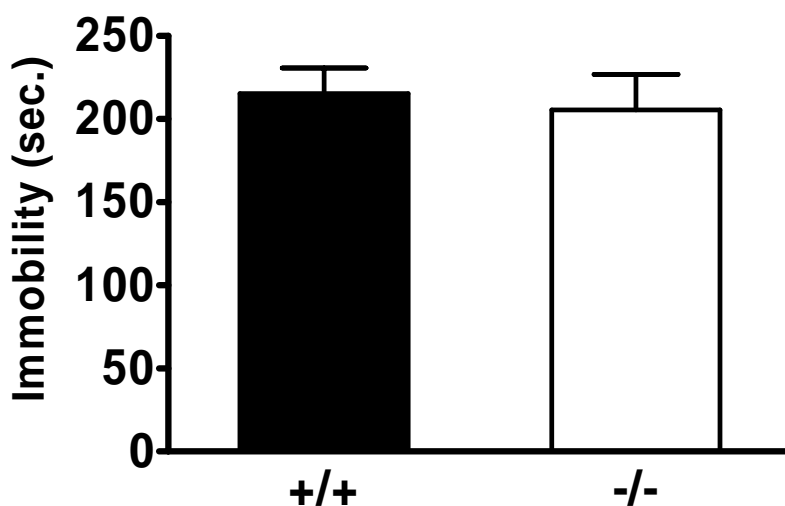


Fig.5.2. Effect of targeted deletion of GABA_{B(1)} receptor subunit on tail suspension test.

GABA_{B(1)}^{-/-} mice ($n = 15$) exhibited no difference in immobility compared to wildtype mice ($n = 16$) in the mouse tail suspension test. All bars represent mean values, with vertical lines indicating one SEM.

5.3.1.3 Locomotor activity.

In order to address the issue of whether the behavioural effects of GABA_{B(1)}^{-/-} mice seen in the FST are related to potential hyperactivity, we analyzed the locomotor pattern of both GABA_{B(1)}^{-/-} and GABA_{B(1)}^{+/+} mice. In a novel environment the locomotor activity of the same mice that had previously undergone the FST was recorded over a period of 30 minutes. Repeated measures ANOVA revealed a clear impact of the targeted deletion of GABA_{B(1)} receptor subunit on locomotor activity [$F(1,29) = 9.9$, $P = 0.001$]. As shown in Fig. 8A, GABA_{B(1)}^{-/-} mice exhibited a lower horizontal activity compared to wildtype mice during the first 20 minutes of the trial. This reduction of locomotor activity during the first minutes of trial, could translate into a deficit in habituation to a novel environment in GABA_{B(1)}^{-/-} mice and/or to an increased freezing behaviour, conforming the anxious phenotype observed in anxiety paradigms.

Correlations were also made between activity in the FST and the first 10 minutes in the novel locomotor activity chambers. Similar correlations were made with data obtained in

tail suspension test. As shown in Fig. 8B, there was no correlation between locomotor activity (distance travelled) and immobility in forced swim test in wildtype mice [$R = 0.349$, $P = \text{n.s.}$] as well as in GABA_{B(1)}^{-/-} mice [$R = 0.008$, $P = \text{n.s.}$]. These results suggest an absence of a stimulant effect as a result of GABA_{B(1)} deletion. Additionally, no correlation was observed between immobility in tail suspension test and locomotor activity in a novel environment (data not shown).

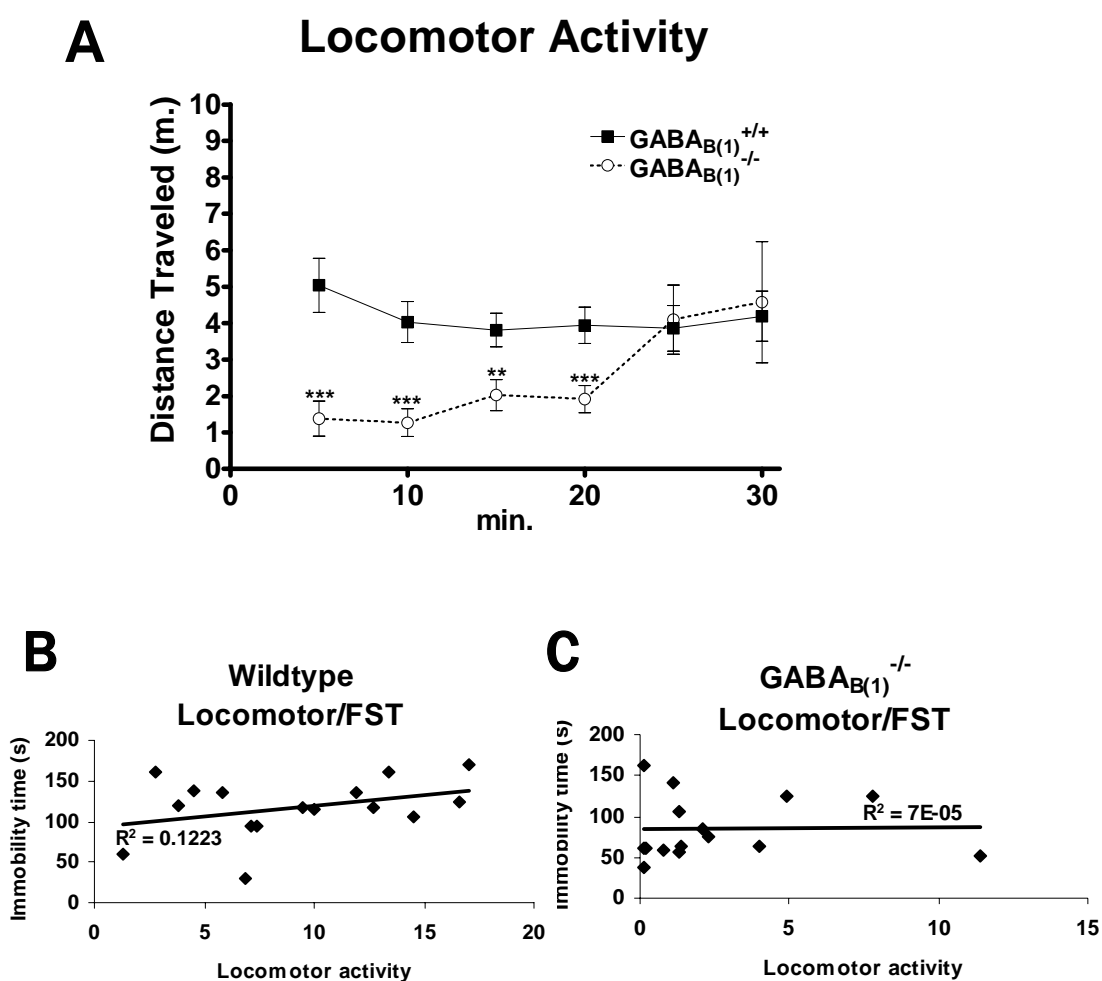


Fig.5.3. Effect of GABA_{B(1)} deletion on locomotor activity in mice pre-tested with FST: Deficits in habituation and lack of correlation with FST.

(A) GABA_{B(1)}^{-/-} mice ($n = 15$) had a much lower locomotor activity score than wildtype mice ($n = 16$) during the first 20 minutes of the 30-minute trial. There was no consistent correlations between immobility score in the FST and locomotor activity score in (Panel B) wildtype mice and (Panel C) GABA_{B(1)}^{-/-} mice. All bars represent mean values, with vertical lines indicating one SEM. **, ***Groups that differed significantly from to wildtype mice ($p < 0.01$ and $p < 0.001$ respectively).

5.3.3 Effects of targeted deletion of GABA_{B(2)} receptor subunit in models of antidepressant activity.

5.3.3.1 Forced swim test.

In the previous chapter, we provide evidence that GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice behave similarly in paradigm related to anxiety disorders. In effort to assess whether these similarities generalize across other behavioural domains we assessed the effects of targeted deletion of GABA_{B(2)} receptor subunit in the well characterized animal model of antidepressant activity, the FST. As we expected, GABA_{B(2)}^{-/-} mice spent less time in immobility than their littermate wild-type [*t-test*, $P < 0.0001$], indicating an antidepressant-like effect. Combined with the antidepressant-like phenotype observed in GABA_{B(1)}^{-/-} mice, these data suggest that disruption of GABA_B receptor function *via* genetic ablation of one of the two GABA_B subunits, induced antidepressant-like effect in the forced swim test.

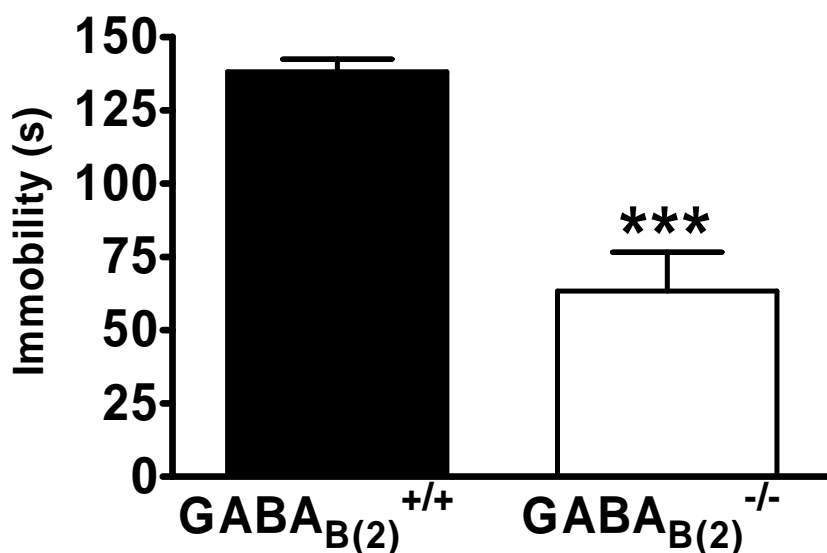


Fig. 5.4. Targeted deletion of GABA_{B(2)} receptor subunit induced antidepressant-like behaviour.

GABA_{B(2)}^{-/-} mice (n=11) had a much lower immobility score than wildtype (n = 12 in the mouse forced swim test), which indicates an antidepressant-like effect. All bars represent mean values, with vertical lines indicating one SEM. ***groups that differed significantly to wildtype mice ($P < 0.001$).

5.4 Pharmacological studies.

5.4.1 Effects of GABA_B receptors antagonist in models of antidepressant activity.

5.4.1.1 Forced swim test.

To test whether the antidepressant-like effect due to genetic inactivation of GABA_B receptor could be recapitulated following pharmacological antagonism, we tested the highly selective and potent GABA_B receptor antagonist CGP56433A in the FST. As shown in Fig. 9A, acute administration of CGP56433A affected immobility time in the FST [$F(4,53) = 4.56$, $P = 0.003$]. Post-hoc analysis revealed that CGP56433A (10 and 30 mg/kg) produced a significant decrease in immobility, supporting that genetic inactivation or pharmacological blockade of GABA_B receptor result in the same antidepressant-like effect in the forced swim test. As shown in fig. 5.5, CGP56433A failed to significantly influence locomotor activity in habituated mice [$F(4,55) = 0.8533$, $P = 0.49$]. These data exclude any potential stimulant effect of CGP56433A contributing to behaviour in the FST.

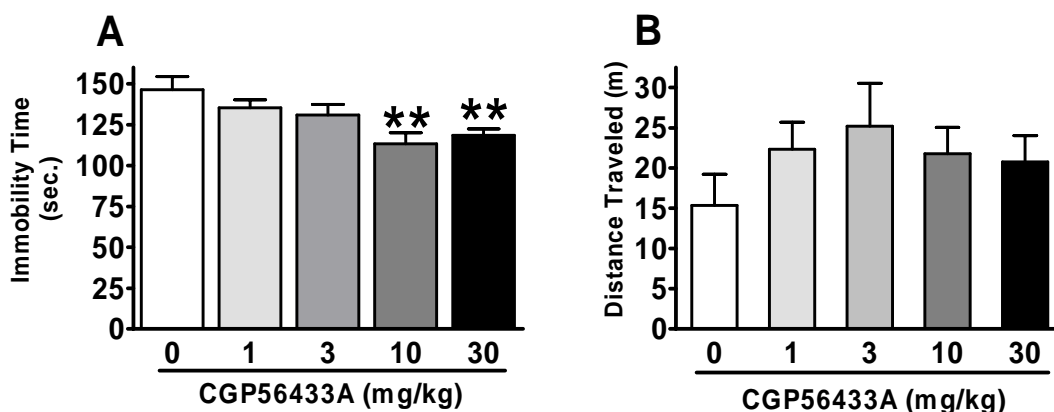


Fig.5.5. Acute treatment with CGP56433A reduces immobility in FST but not TST.

(A) Effect of CGP56433A treatment (doses: 1, 3, 10 and 30 mg/kg, p.o.) on immobility time in forced swim test. $n = 10-12$ per treatment group. (B) Effect of CGP56433A treatment (doses: 1, 3, 10 and 30 mg/kg, p.o.) on locomotor activity (60 minutes) in mice that were habituated (for 60 minutes) to the novel environment. $n = 12$ per treatment group. All bars represent mean values, with vertical lines indicating one SEM. **groups that differed significantly to vehicle treated mice ($P < 0.01$).

5.4.1.2 Tail suspension test.

Targeted deletion of GABA_{B(1)} receptor decrease the time spent in immobility in the FST but not in the TST. In attempt to assess whether this behavioural profile can be replicated the following pharmacological antagonism, we also assessed the effect of GABA_B receptor antagonist in TST. Interestingly, ANOVA revealed no effect of treatment on time spent in immobility in the TST [$F(2,27)=0.24$, $P=0.791$]. Combined with results observed in FST, these data confirmed a growing body of data which suggest that the FST and the TST don't recruit the same neurochemical substrate (see Cryan et al, 2005).

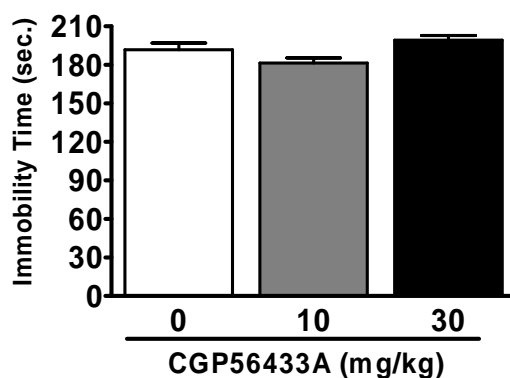


Fig.5.6. Acute treatment with CGP56433A failed to reduce immobility in TST.

Effect of CGP56433A treatment (doses:0, 10 and 30 mg/kg, p.o.) on immobility time in tail suspension test. $n = 10$ per treatment group. All bars represent mean values, with vertical lines indicating one SEM. **groups that differed significantly to vehicle treated mice ($P < 0.01$).

5.4.1.3 Chronic studies

Although acute administration of antidepressants produces effects in the FST, depressive patients must be treated with antidepressants chronically for several weeks to produce full therapeutic effects (Mann, 2005). Thus, we assessed the effect of chronic treatment (21 days) with sub-effective dose of CGP56433A, 3 mg/kg, in addition to GS39783 (a GABA_B receptor positive modulator) and desipramine in the forced swim test (20 to 24 hours following last treatment). As shown fig.5.7, animals administered chronically (21 days) with both CGP56433A (3 mg/kg, p.o., once daily) and desipramine (10 mg/kg, p.o., once daily) reduced immobility times in the FST whereas GS39783 was without any effect [$F(3,44) = 7.966$, $P = 0.001$]. Taken together, these data further suggest an antidepressant effect of CGP56433, although the magnitude of the effects after chronic treatment are less robust compared with that induced by the antidepressant desipramine.

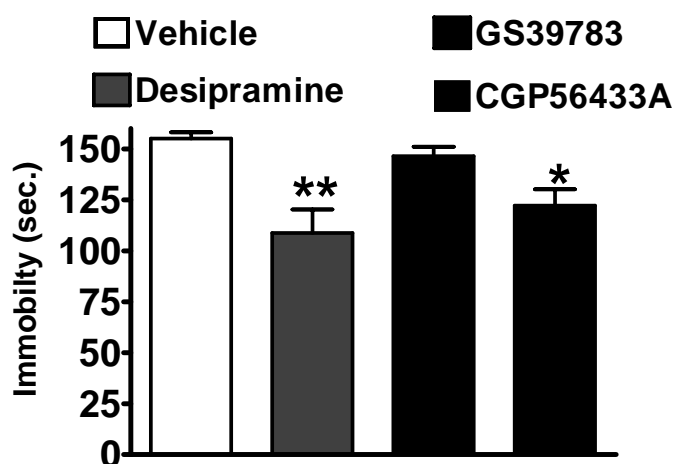


Fig. 5.7. Chronic treatment with CGP56433A and desipramine reduces immobility in the FST.

Effects of chronic treatment (21 days) with the GABA_B antagonist CGP56433A (3 mg/kg, p.o.), desipramine (15 mg/kg, p.o.) and the GABA_B positive modulator GS39783 (10 mg/kg, p.o.) on immobility time in the FST. $n = 12$ per treatment group. All bars represent mean values, with vertical lines indicating one SEM. *, ** groups that differed significantly to vehicle treated mice ($P < 0.05$ and $P < 0.01$, respectively).

5.4.2 Effects of GABA_B receptors agonist in models of antidepressant activity.

Given the antidepressant-like properties of GABA_B receptor antagonist, we assessed the effect of selective and potent GABA_B receptor agonist, CGP44532, in the forced swim test. Analysis of variance indicates a significant effect of treatment [$F(4,53) = 9.039$, $P = 0.001$]. Post-hoc analysis indicated that CGP44532, at 0.3 and 1 mg/kg, increase the time spent in immobility in the forced swim test paradigm ($P < 0.05$ and $P < 0.001$, respectively). In order to exclude a potential sedative effect of CGP44532, we assessed the effects of this ligand on locomotor activity. Although ANOVA revealed an absence of effect of treatment on distance travelled during the 60 minutes of test [$F(4,55) = 2.414$, $P = 0.0597$], there was a trend toward CGP44532 decreasing the distance travelled which failed to reach the level of significance. Although GABA_B receptor activation appears to induce depressant effect in the forced swim test, we cannot exclude that the sedative properties of GABA_B receptor agonist confounds this effect.

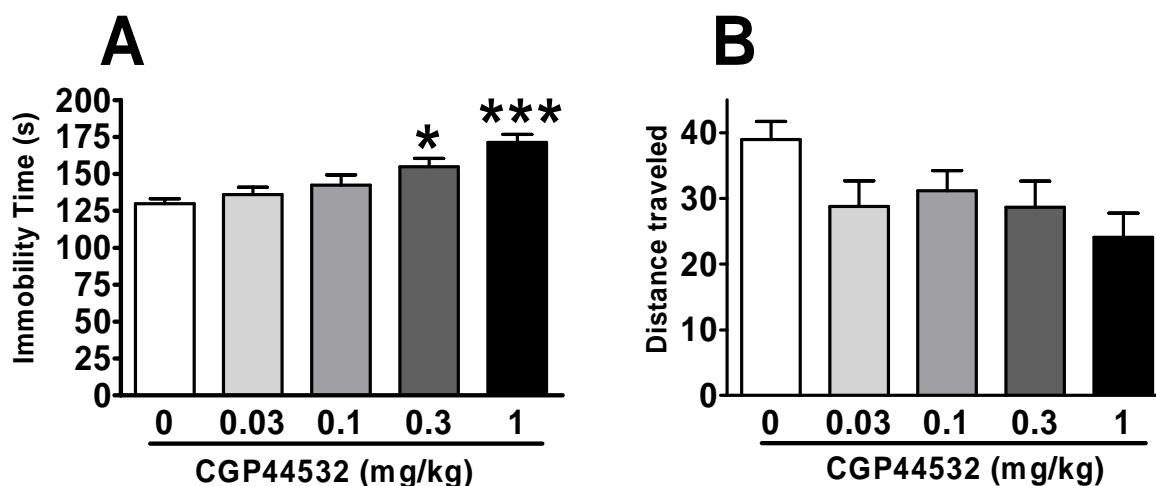


Fig.5.8. Acute treatment with GABA_B receptor agonist increases immobility in FST.

(A) Effect of CGP44532 treatment (doses: 0.03, 0.1, 0.3 and 1 mg/kg, p.o.) on immobility time in forced swim test. $n = 10-12$ per treatment group. (B) Effect of CGP44532 treatment (doses: 1, 3, 10 and 30 mg/kg, p.o.) on locomotor activity (60 minutes) in mice that were habituated (for 60 minutes) to the novel environment. $n = 12$ per treatment group. All bars represent mean values, with vertical lines indicating one SEM. *, ***groups that differed significantly to vehicle treated mice ($P < 0.05$ and $P < 0.001$, respectively.).

5.5 Assessing interactions between GABA_B receptors and serotonergic system.

5.5.1 Effects of GABA_B receptor antagonist on anti-immobility properties of SSRI in the forced swim test.

Emerging evidence suggest that GABA_B receptor antagonists may recruit serotonergic mechanisms to elicit their behavioural effects (Slattery et al., 2005a). In order to investigate the interactions between GABA_B and serotonergic system, we examined the combinations of different doses of GABA_B receptor antagonist (0, 3 and 10 mg/kg) with fluoxetine treatments (0, 3, 10 and 30 mg/kg) in the forced swim test. Two-way ANOVA revealed an significant effect of treatment with CGP56433A [$F(2,132) = 8.470$, $P = 0.001$], of fluoxetine [$F(3,132) = 3.068$, $P = 0.05$], nevertheless there is no fluoxetine X CGP56433 interactions [$F(3,132) = 0.919$, $P = 0.483$]. Although post-hoc tests revealed an antidepressant like effect of fluoxetine alone at 10 and 30 mg/kg and CGP56433A at 10 mg/kg, GABA_B

receptor antagonist failed to potentiate anti-immobility effect of fluoxetine in the forced swim test.

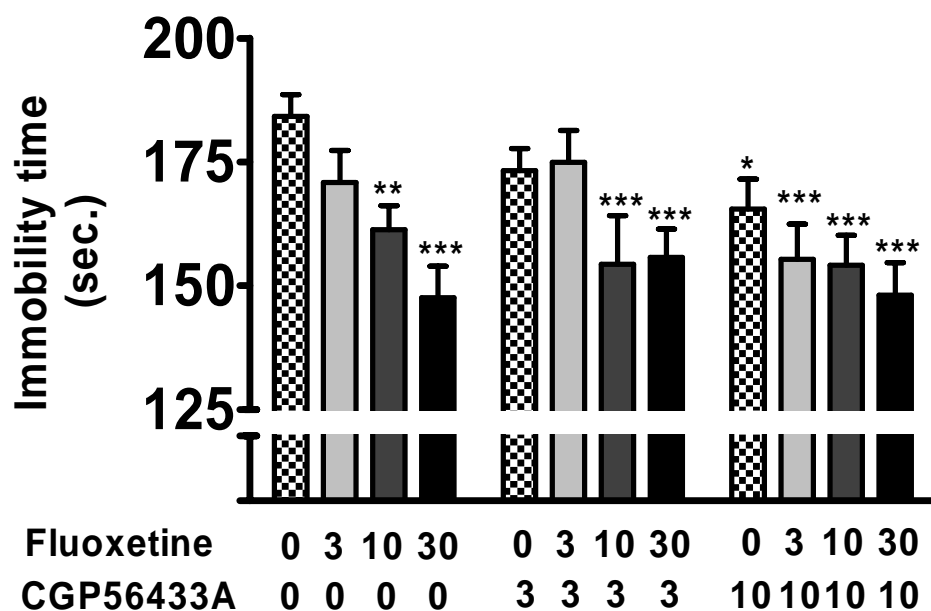


Fig. 5.9. Effects of GABA_B receptor antagonist on anti-immobility properties of SSRI in the forced swim test.

(A) Effect of CGP56433A treatment (doses: 0, 3, 10 mg/kg, p.o.) combined with Fluoxetine treatment (doses: 0, 3, 10 and 30 mg/kg, p.o.)immobility time in forced swim test. $n = 12$ per treatment group. All bars represent mean values, with vertical lines indicating one SEM. *, **, ***groups that differed significantly to vehicle treated mice ($P < 0.05$ and $P < 0.001$, respectively).

5.5.2 Differential hypothermic response to baclofen following pharmacological or genetic blockade of serotonin transporter.

5.5.2.1 Impact of acute fluoxetine treatment on baclofen-induced hypothermia.

As mentioned in the third chapter, baclofen-induced hypothermia can be considered as a good in vivo index of GABA_B receptor function. Consequently, it provides a powerful tool in order to investigate the impact of serotonergic treatment on GABA_B receptors function. Thus, we assessed the effect of acute treatment with fluoxetine on the hypothermic response induced by baclofen. The ANOVA (repeated measures) indicate a significant effect of treatment with baclofen [$F(1,36) = 223.224$, $P < 0.001$], an fluoxetine X baclofen interaction

[F1,32) = 13.802, P =0.001] but no effect of treatment with fluoxetine [F(1,36) = 01.245, P =00.272]. Therefore, the two-way repeated measures ANOVA revealed also an effect of time [F3,108) = 172.66, P <0.001], time X baclofen interaction [F3,108) = 13.802, P =0.001] but no time X fluoxetine interaction [F3,108) = 1.423, P <0.241] and time X fluoxetine X baclofen interaction [F3,108) = 1.655, P <0.183]. Acute administration of fluoxetine (in vehicle treated animals) failed to affect temperature. In contrast, baclofen induced a marked decrease in body temperature in mice treated with fluoxetine and with vehicle. Finally, acute administration of fluoxetine attenuated the hypothermic response induced by baclofen one hour but not two hours after administration of baclofen. Thus, we can conclude that acute blockade of serotonin transporter failed to affect GABA_B receptor function.

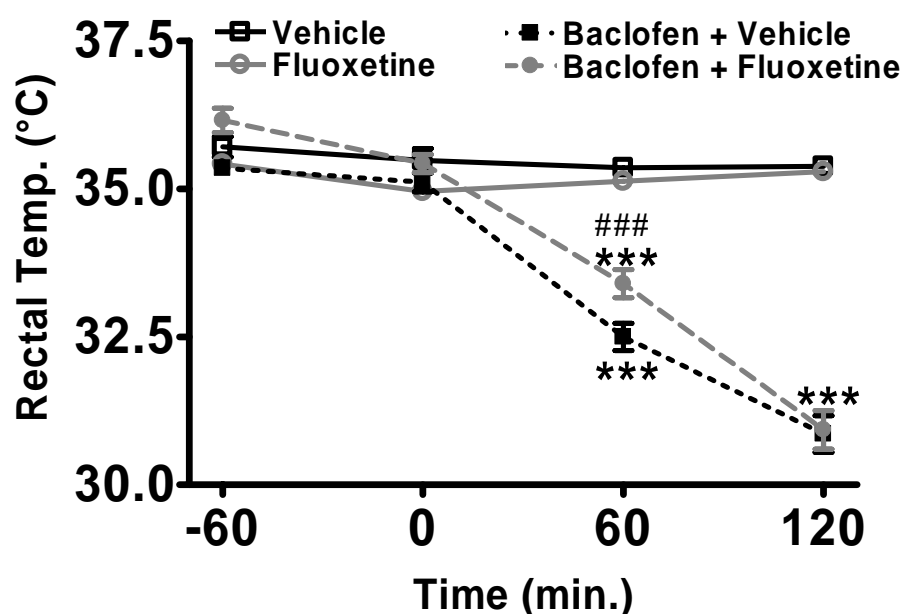


Fig.5.10. Effect of acute fluoxetine treatment on baclofen-induced hypothermia. Acute administration of fluoxetine (20 mg/kg; p.o.) failed to affect body temperature compared to mice treated with vehicle. Baclofen (9 mg/kg, p.o.) induced a strong hypothermia in group treated with fluoxetine and in the group treated with vehicle. N = 12 per treatment group All data points represent mean \pm SEM values.. ***Groups that differed significantly from to vehicle treated animals (p<0.001).. ### groups that differed significantly to animals control animals treated with baclofen(p<0.001).

*5.5.2.2 Impact of chronic fluoxetine treatment on baclofen-induced**hypothermia.*

Although the acute administration of fluoxetine appears to have no effect on GABA_B receptors function, blunted GABA_B-receptor-induced effects (including electrophysiological and signalling responses) have been demonstrated in the DRN of mice lacking the 5-HT transporter that is the molecular substrate for SSRI antidepressants (Mannoury la Cour et al., 2004) suggesting that chronic treatment with SSRI may affect GABA_B receptor function. In order to corroborate these results in vivo, we investigated the effect of chronic fluoxetine treatment (20 mg/kg/day during 21 days.) on the hypothermic response elicited by baclofen. Fig.5.11A showed the effect of chronic treatment with fluoxetine on baclofen-induced hypothermia 24 hours after the last injection of fluoxetine. One-way repeated measures ANOVA revealed a significant effect of fluoxetine treatment [$F(1,22) = 47.247, P < 0.001$], of time [$F(3,66) = 80.429, P < 0.001$] and time X fluoxetine interaction [$F(3,66) = 37.717, P < 0.001$]. Although baclofen elicited a marked hypothermia in vehicle-treated animals, this hypothermic response was totally blunted in mice treated chronically with fluoxetine. Similarly, we also observed this phenomenon 48 hours and 72 hours after the last injection of fluoxetine (Fig 5.11B and C, respectively). 48 hours later the last injection of fluoxetine, the one-way repeated measures ANOVA revealed a significant effect of fluoxetine treatment [$F(1,9) = 20.650, P = 0.0014$], of time [$F(2,18) = 16.032, P < 0.001$] and time X fluoxetine interaction [$F(2,18) = 29.933, P < 0.001$]. Finally, 72 hours after the last injection of fluoxetine, the one-way repeated measures ANOVA revealed a significant effect of fluoxetine treatment [$F(1,10) = 11.890, P = 0.0062$], of time [$F(2,20) = 9.562, P = 0.0012$] and time X fluoxetine interaction [$F(2,20) = 9.733, P = 0.0011$]. In summary, we demonstrated that chronic, but not acute treatment with fluoxetine blocked hypothermic response elicited by

baclofen, suggesting that chronic blockade of 5-HT transporter alter GABA_B receptor function.

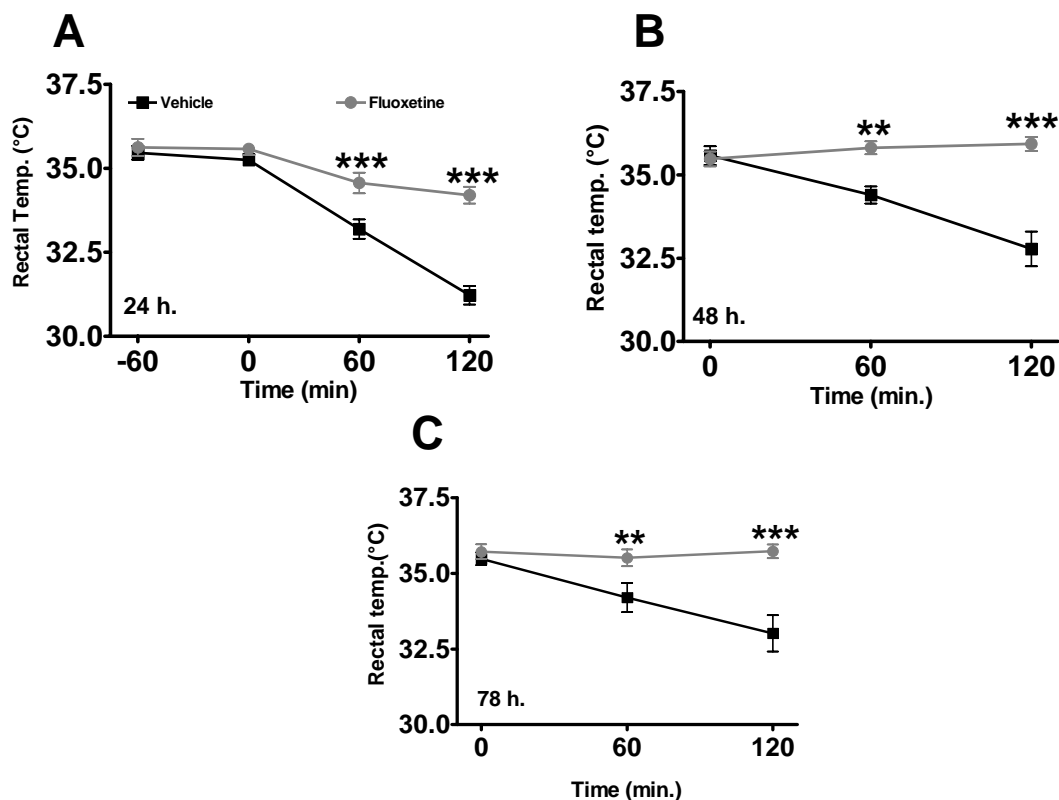


Fig.5.11. Effect of chronic fluoxetine treatment on baclofen-induced hypothermia.

Chronic administration of fluoxetine (20mg/kg/day during 21 days) blunted totally the hypothermic response triggered by baclofen, 24 hours (A), 48h hours (B) and 72 hours (C) after the last injection of fluoxetine. N = 12 per treatment group for the experiment made 24 hour after the last injection of fluoxetine and N =5-6 per treatment group for experiment made 48h and 72h after the last injection of fluoxetine. All data points represent mean \pm SEM values.**, ***Groups that differed significantly from to vehicle treated animals ($p < 0.01$ and $p < 0.001$, respectively).

5.5.2.3 Effects of targeted deletion of serotonin transporter on baclofen-induced hypothermia.

In an attempt to confirm the results obtained after chronic treatment with fluoxetine, we also investigated the effect of genetic inactivation of serotonin transporter on the

hypothermic response induced by baclofen. The one-way repeated measures ANOVA revealed a significant effect of genotype treatment [$F(1,19) = 14.492$, $P = 0.0012$], of time [$F(5,95) = 157.990$, $P < 0.001$] and time X genotype interaction [$F(5,95) = 6.507$, $P < 0.001$]. Intriguingly, post-hoc analysis revealed that 5-HTT^{-/-} mice exhibited more pronounced hypothermia than wild-type animals. Interestingly, we demonstrated that chronic pharmacological blockade and genetic inactivation of serotonin transporter modulate hypothermic response elicited by baclofen in opposite manners. Nevertheless, it is important to note that compensatory changes in 5-HTT^{-/-} mice cannot be excluded.

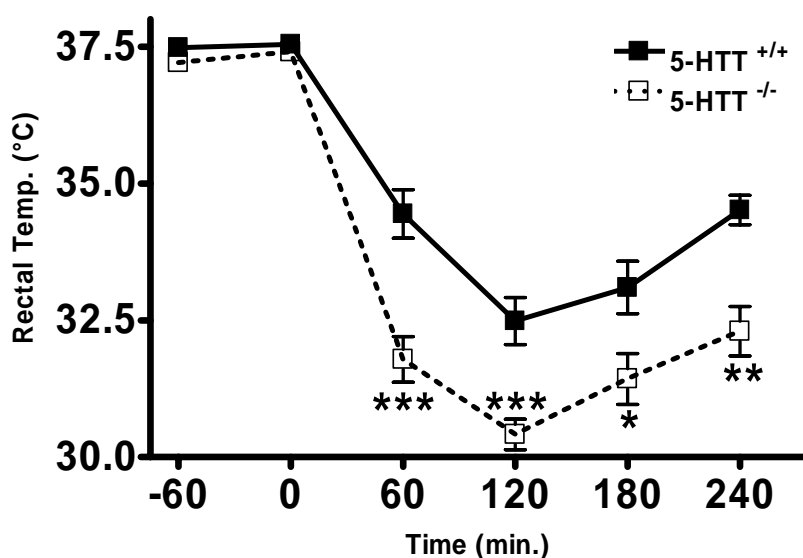


Fig.5.12. Effect of targeted deletion of serotonin transporter on baclofen-induced hypothermia.

Acute administration of (+/-)baclofen (12 mg/kg) elicited a pronounced hypothermia in both genotype. Nevertheless the amplitude of hypothermic response was more marked in 5-HTT^{-/-} mice (N=14) compared to wild-type animals (N=7).. All data points represent mean \pm SEM values.. *, **, ***Groups that differed significantly from to vehicle treated animals ($p < 0.05$, $p < 0.001$ and $p < 0.001$, respectively).

5.5.3 Effects of GABA_B receptors ligands and antidepressants on downregulation of hippocampal 5-HT_{1A} receptors mRNA induced by chronic handling stress.

We hypothesized that GABA_B receptor ligands, by interacting with serotonergic neurotransmission, would counteract the downregulation of hippocampal 5-HT_{1A} receptor mRNA induced by handling-stress. In order to confirm this hypothesis, we investigated the effects of chronic handling on 5-HT_{1A} mRNA receptor in hippocampus and attempted to reverse these effects with antidepressants and GABA_B receptor ligands.

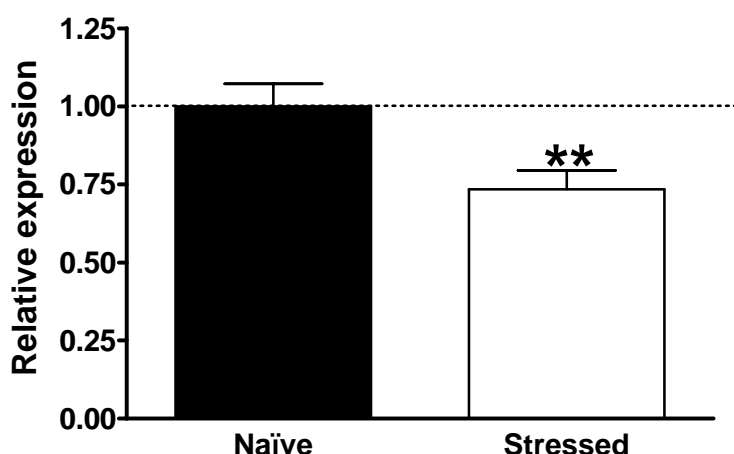


Fig.5.13. Effect of chronic handling and injections of vehicle on 5-HT_{1A} receptor mRNA in hippocampus of BALB/c mice.

Data represent mean \pm s.e.m. Student's t-test was performed where ** P < 0.01 represents statistical difference compared with vehicle.

As shown in Fig.5.13, we observed a downregulation of 5-HT_{1A} receptor mRNA (-26.6 %) in the hippocampus after chronic handling (combined with injection) compared to naïve animals (p = 0.012). In contrast, as shown in Fig.5.14A, acute administration of fluoxetine increased 5-HT_{1A} mRNA expression in the hippocampus compared to vehicle treated animals. Similarly, sub-chronic and chronic fluoxetine treatment up-regulated hippocampal 5-HT_{1A} receptor mRNA (+31.6 %, p= 0.028 and +20.4%, p=0.06 respectively). Although, neither acute nor sub-chronic treatment with desipramine up-regulated 5-HT_{1A} mRNA, we observed that 21 days treatment with desipramine significantly increased 5-HT_{1A} mRNA expression in hippocampus (+35%, p=0.003, Fig. 2B).

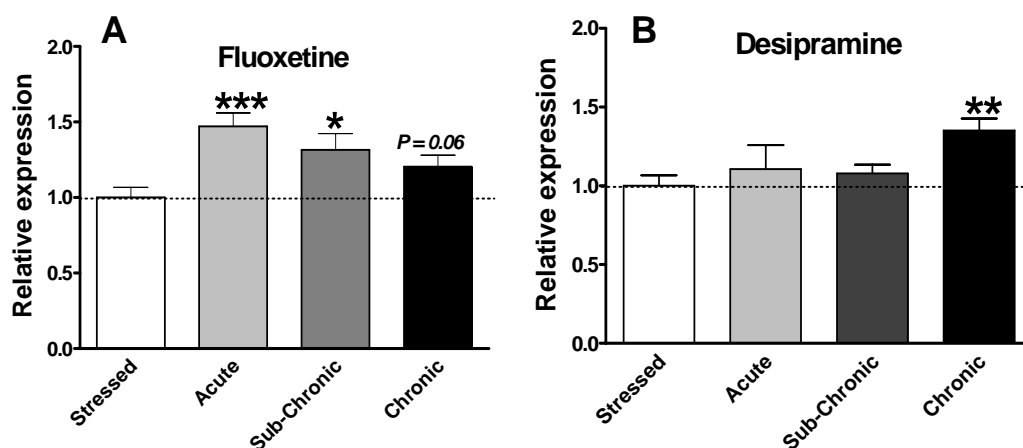


Fig.5.14. Effects of (A) fluoxetine (20 mg/kg p.o) and (B) desipramine (15 mg/kg, p.o) treatments (acute , sub-chronic and chronic) on 5-HT_{1A} receptor mRNA in hippocampus of BALB/c mice.

Data represent mean \pm s.e.m. Student's t-test was performed where * $P < 0.05$, ** $P < 0.01$ and *** $P < 0.001$ represent statistical difference compared with vehicle.

As shown in figure 5.15, 5-HT_{1A} receptors mRNA level were significantly higher in all baclofen treated groups. There was a 42% increase of 5-HT_{1A} receptor mRNA after acute treatment with baclofen, 53% increase of 5-HT_{1A} receptor mRNA level after sub-chronic baclofen treatment whereas chronic baclofen treatment increased expression level by 34.3% ($p=0.0028$, $p=0.0005$ and $p=0.031$ respectively) (Fig.5.15 A). Similarly, GS39783, the novel GABA_B receptor positive modulator, significantly increased 5-HT_{1A} expression in hippocampus acutely, sub-chronically and chronically (+53%, $p=0.005$; +39%, $p=0.0024$ and +44 %, $p=0.003$ respectively, Fig.5.15B). We also observed that CGP564333A, a GABA_B receptor antagonist, failed to change 5-HT_{1A} mRNA expression after acute and sub-chronic treatment (Fig.5.15 C), while 21 days treatment with CGP564333A increased significantly hippocampal 5-HT_{1A} mRNA level (+30.7, $p=0.015$). To conclude, we demonstrate that even a relatively minor stressor, such as daily handling and injections can induce marked changes in hippocampal 5-HT_{1A} receptor expression levels of BALB/c mice. These data confirm, and expand upon, the results obtained from previous preclinical and clinical studies which demonstrated that chronic unpredictable stress downregulates, whereas antidepressant

treatments up regulates hippocampal 5-HT_{1A} receptors (Lopez et al., 1998). Furthermore, we demonstrate that antidepressants and GABA_B receptor ligands, can counteract this phenomenon

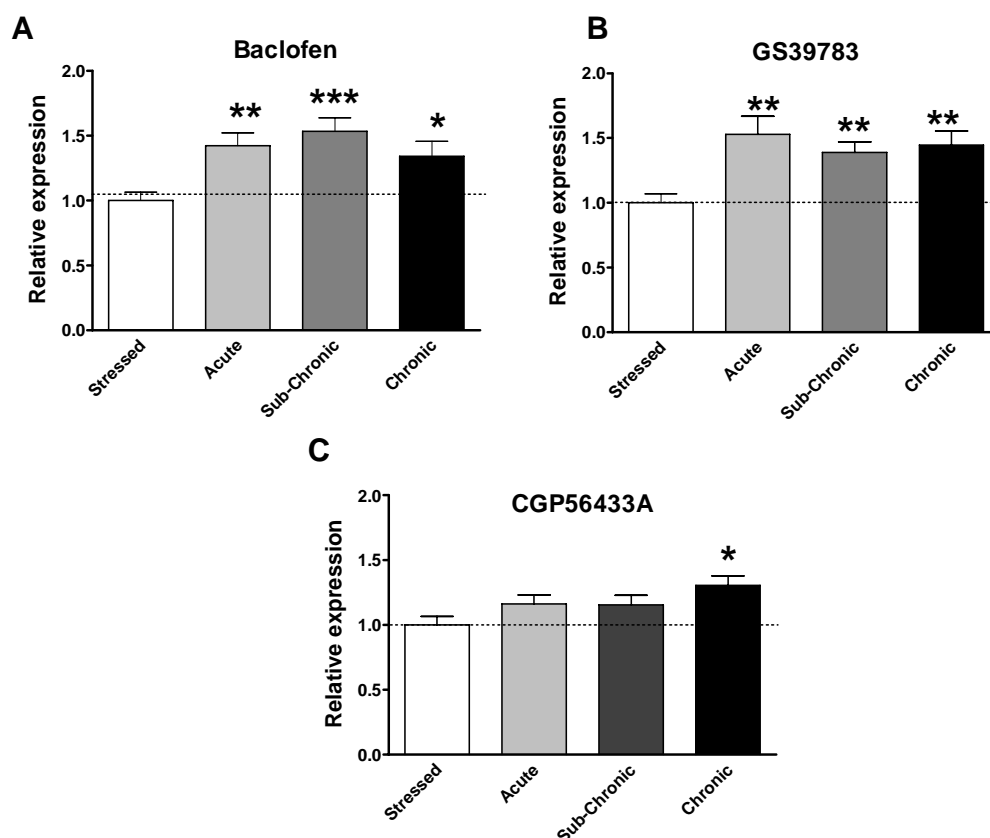


Fig. 5.15. Effects of (A) baclofen (5 mg/kg p.o.) , (B) GS39783 (10 mg/kg p.o.) and (C) CGP56433A (6 mg/kg p.o.) treatments (acute , sub-chronic and chronic) on 5-HT_{1A} receptor mRNA in hippocampus of BALB/c mice.

Data represent mean \pm s.e.m. Student's t-test was performed where * $P < 0.05$, ** $P < 0.01$ and *** $P < 0.001$ represent statistical difference compared with vehicle

5.6 Discussion.

In the present chapter, we demonstrated that both genetic inactivation and pharmacological blockade of GABA_B receptors, results in the same antidepressant-like effect in the forced swim test but not in tail suspension paradigm. Conversely, we also demonstrated that GABA_B receptor activation elicited depressant-like effect in the forced swim test. In

order to elucidate the interaction between serotonergic system and GABA_B receptors and their involvement in antidepressant like effect, we assessed the effect of GABA_B receptor antagonist on the anti-immobility effect of fluoxetine in the forced swim test. Somewhat surprisingly, CGP56433A failed to potentiate the antidepressant-like effect elicited by fluoxetine. Secondly, we assessed the effect of several pharmacological and genetic manipulation of serotonin transporter on well characterized index of GABA_B receptor function baclofen-induced hypothermia. Although acutely fluoxetine failed to affect hypothermic response elicited by baclofen, chronically, fluoxetine totally blocked this response, suggesting an alteration of GABA_B receptor after chronic pharmacological blockade of serotonin transporter. Intriguingly, we observed an enhancement of hypothermic response induced by baclofen in 5-HTT^{-/-} mice. Finally, we demonstrated that both antidepressants and GABA_B receptor ligands, including agonist, antagonist and positive modulator; counteract the downregulation of hippocampal 5-HT_{1A} receptor mRNA elicited by chronic handling.

The mouse FST is the most widely used experimental paradigm for detecting antidepressant activity and to assess alterations in depression-like behaviour in genetically modified animals (Borsini and Meli, 1988; Cryan et al., 2002a; Cryan and Mombereau, 2004). The behavioural responses in the FST is thought to comprise a coping strategy (Thierry et al., 1984) in which immobility behaviours represent the psychological concept of "entrapment" described in clinical depression (Dixon, 1998; Gilbert and Allan, 1998; Lucki, 2001). Here we demonstrate that GABA_{B(1)}^{-/-} mice have an antidepressant-like effect in the FST as indicated by significantly lower immobility than their wildtype controls. This effect is not due to hyperactivity per se, as a reduced locomotor response was observed in the very same mice after being placed in a novel locomotor activity chamber, with activity increasing over time. This is compatible with the anxious phenotype of GABA_{B(1)}^{-/-} mice and suggests that they are more fearful upon being placed in a novel environment. In opposition to normal habituation

responses in a novel environment, locomotor activity in GABA_{B(1)}^{-/-} mice slowly increased with time indicating a disinhibition of their initial anxiety. Further, there was no correlation between activity in the FST and that in the locomotor activity apparatus (Fig. 8). This initial hypoactivity was unrelated to prior exposure to swim stress or age, as it was also evident (although not as pronounced) in experimentally naïve mice (Fig. 2). However, at later time-points these animals became somewhat more active than wildtype controls, which is in accordance with previous data (Schuler et al., 2001).

Interestingly, GABA_{B(1)}^{-/-} mice behave similarly to their wildtype controls in the tail suspension test. The tail suspension test is another well characterized test for assessing depression-like and antidepressant-like activity (Porsolt, 2000; Cryan et al., 2002a; Cryan and Mombereau, 2004; Cryan et al., 2005). Although this test is similar to the FST in the constructs that it purports to assess (immobility) and for its ability to detect a broad spectrum of antidepressants (Steru et al., 1985), it is becoming clear that both tests are probably different from each other in terms of the biological substrates that underlie their observed behaviours (Bai et al., 2001; Renard et al., 2003; Cryan and Mombereau, 2004; Cryan et al., 2005). Accordingly, it is believed that using both paradigms can give complementary and/or converging information on activities of novel potential antidepressants or molecular pathways including those altered in genetically modified animals (Bai et al., 2001) (Conti et al., 2002; Cryan et al., 2005). The current data are among the first to show differential effects of a genetic modification in the FST and the tail suspension test and confirms the assertion of a differential neurochemical underpinning to each test.

In agreement with what we previously observed in the light-dark box test of anxiety, GABA_{B(2)}^{-/-} mice also behaved similarly to GABA_{B(1)}^{-/-} mice in the forced swim test. Indeed, targeted deletion of GABA_{B(2)} receptor subunit induced a marked decrease in the time spent in immobility in the forced swim test. Consistent with the anxiety data, the GABA_{B(1,2)}

heterodimer appears to be required for the neurophysiologic processes involved in the forced swim test.

In order to confirm the antidepressant-like phenotype of the GABA_{B(1)}^{-/-} mice and GABA_{B(2)}^{-/-} mice pharmacologically, we assessed the effects of the GABA_B receptor antagonist CGP56433A in the FST. Our data demonstrate that this GABA_B receptor antagonist when administered acutely also decreases immobility in the FST without having any significant change in locomotor activity (Fig. 9). Chronic administration of CGP56433A also produced an antidepressant-like effect similar to that of the antidepressant desipramine (Fig. 10). These data corroborated previous results obtained in another depression paradigm, such as chronic mild stress (Bittiger et al., 1996) or learned helplessness (Nakagawa et al., 1999). Conversely, we observed that GABA_B receptor agonist elicited depressant like effect in FST. These results are in line with previous observation describing that baclofen increased susceptibility to helplessness and attenuated the effects of antidepressants (Nakagawa et al., 1996a; 1996b). Furthermore, baclofen also reduced the efficacy of antidepressants in the FST (Nakagawa et al., 1996c). Taken together our current data support the contention that antagonism of GABA_B receptors may be a suitable target for the development of antidepressant agents.

Although we demonstrated that GABA_B receptors appear to be involved in the neuropathophysiology of depression, the mechanism implicated in the antidepressant-like effect of GABA_B receptor antagonist are not clear. Nevertheless, several authors have speculated that antidepressant-like effects of GABA_B receptor antagonist might be mediated via the serotonergic system. Indeed, Slattery and coworkers have demonstrated that GABA_B receptor antagonist increased swimming behaviour in the modified rat forced swim test (Slattery et al., 2005a). This behavioural pattern has been shown to be selectively affected by SSRIs and serotonergic agonists (Cryan et al., 2002a). Moreover, they also demonstrated that

serotonin depletion attenuates the increase in swimming induced by CGP564333A, confirming the involvement of serotonergic system in the antidepressant-like effect of GABA_B receptor antagonists. Congruently, it has been shown that GABA_B receptor stimulation in the dorsal raphe inhibits the firing of serotonergic neurons (Innis et al., 1988). Thus, we hypothesized that GABA_B receptor antagonist should potentiate the effect of SSRIs, via alleviation of the inhibition of firing serotonergic neurons in raphe. Although both the GABA_B receptor antagonist and fluoxetine induced an antidepressant-like effect in the forced swim test, we demonstrated that GABA_B receptor blockade failed to potentiate the anti-immobility effect of fluoxetine in this test. Despite these negative data without neurochemical studies, we cannot definitively conclude that GABA_B receptor antagonists do not enhance serotonin release induced by fluoxetine. Similarly, there is extensive data available which demonstrate that SSRI effects on extracellular 5-HT concentration (Gartside et al., 1995) might be increased by administration of 5-HT_{1A} autoreceptor antagonists, however they appear to be without effect on behavioural response elicited by SSRI (Moser and Sanger, 1999). Nevertheless, this hypothesis was recently validated using phaclofen and citalopram in the tail suspension. Indeed, Cremers et al. demonstrated that systemic administration of GABA_B antagonist augment both anti-immobility effect and serotonin release elicited by citalopram SSRI injection (Jongsma et al., 2004). Taking this research into account, it appears that GABA_B receptor antagonist might also be considered for accelerate the onset of action and increase the effectiveness of antidepressant. The use of animal model requiring chronic antidepressant treatment, such as chronic mild-stress or olfactory bulbectomy will confirm the reduction of onset of action of antidepressant by GABA_B receptor. Thus, further studies, such as microdialysis studies, are clearly required in order to more appreciate the impact of GABA_B receptor blockade on the antidepressant-like effect of SSRI and their associated release of serotonin.

As mentioned in the introduction, several studies investigated the impact of antidepressant on GABA_B receptor function. Kasture and co-workers demonstrated that acute administration of fluoxetine reversed the catatonia induced by baclofen. In the present study, we demonstrated that acute administration of fluoxetine appears to attenuate, but not block, the baclofen-induced hypothermia (Kasture et al., 1996). Conversely, Gray and co-workers demonstrated that repeated treatment with amitriptyline, a tricyclic antidepressant, enhanced temperature and sedation induced by baclofen (Gray et al., 1987). Nevertheless, we demonstrated in the current study that chronic treatment with fluoxetine totally blunted the baclofen-induced hypothermia, suggesting that chronic blockade of serotonin transporter might induce a functional desensitization of GABA_B receptor. These results are consistent with the findings that 5-HTT^{-/-} mice exhibited altered GABA_B-induced responses (Mannoury la Cour et al., 2004). Specifically, these animals present a functional desensitization of 5-HT_{1A} autoreceptors in the dorsal raphe. Moreover, the GABA_B receptor agonist inhibited 5-HT cell firing in the DRN, which occurred with a 30-fold decrease in potency in 5-HTT knock-out mice and was blocked by administration of GABA_B receptor antagonist. In addition, [³⁵S]GTP-γ-S binding induced by baclofen was also significantly decreased in the DRN of 5-HTT knockout mice after baclofen administration. Altogether, the findings herein, combined with the data of Mannoury la Cour and collaborators, suggest that both chronic administration of SSRI or genetic ablation of serotonin transport might result in a concomitant functional desensitization of 5-HT_{1A} and GABA_B receptor, mediated by alteration of common pool of G-proteins (Andrade et al., 1986). More recently, targeted deletion of GIRK2 has been shown to attenuated hypothermic response elicited by 5-HT_{1A} and GABA_B receptors agonist (Costa et al., 2005). Given that GABA_B and 5-HT_{1A} receptors are coupled to the same GIRK, we can also presume that modulation of their common GIRK channels might be also responsible of functional desensitization of both 5-HT_{1A} and GABA_B receptors in the raphe nucleus. Nevertheless, further studies are required in order to understand the exact mechanism

underlying this downstream effect. Thus, it might be also interesting to recapitulate our present data using these techniques in effort to better understanding the potential adaptation of GABA_B receptors induced by chronic administration of SSRI. However, we present findings were obtained using baclofen-induced hypothermia as an index of GABA_B receptors and there is no clear evidence, at this time, for a real involvement of GABA_B receptor of raphé in this response. Surprisingly, we also observed that targeted deletion of serotonin transporter potentiated the hypothermic response induced by baclofen. Nevertheless, we cannot exclude compensation mechanism in these mice. Previous studies have shown that SERT deficient animals have behavioural effects that are opposite to that observed following adult knockdown/inhibition of the transporter (Holmes et al., 2003b; Ansorge et al., 2004), which may be due to early life loss of the transporter.

Chronic stress has been shown to be implicated in the aetiology of depressive disorders (Charney and Manji, 2004). In the present studies, we demonstrated that a relatively minor stressor such as daily handling and injections induce marked changes in the hippocampal 5-HT_{1A} mRNA receptor expression of BALB/c mice. These data corroborate, and expand upon, the results obtained from previous preclinical and clinical studies which demonstrated that chronic stress downregulates 5-HT_{1A} receptor mRNA (Lopez et al., 1998). Interestingly, only few studies have investigated the impact of handling and saline injection on behavioural and neurochemical parameters. Saline administration have been shown to induced depressive-like behaviour in the tail-suspension test combined with a suppression of cAMP formation stimulate (Izumi et al., 1996), confirming that chronic handling might be considered as chronic mild stressor. Several other studies demonstrated that different regimen of stressor induced 5-HT_{1A} receptor adaptation in the hippocampus. For example, it has been shown that chronic restraint stress decreased [³H]8-OHDPAT bindings sites in the hippocampus of rat (Watanabe et al., 1993) or tree shrew (Flugge, 1995). Taken together, this

result suggests that chronic mild stress might affect 5-HT_{1A} receptor in the hippocampus. Conversely, we observed that antidepressant, including the tricyclic desipramine and the SSRI fluoxetine, could counteract the effect of stress on hippocampal 5-HT_{1A} receptor mRNA. In agreement with these results, several electrophysiological studies have demonstrated a sensitization of hippocampal 5-HT_{1A} receptor function after long term antidepressant (see (Mongeau et al., 1997) for review). Nevertheless, the effects of chronic antidepressant treatment on the densities, bindings and expression of 5-HT_{1A} receptor in hippocampus have drowned controversial results. Although we corroborated the fact that chronic desipramine treatment counteracted the downregulation of hippocampal 5-HT_{1A} receptor mRNA described by Lopez and coworkers (Lopez et al., 1998), further studies recapitulating these results on the 5-HT_{1A} receptor protein or function, are required to confirm the role of postsynaptic 5-HT_{1A} receptor in depression an antidepressant-like effect. In addition to effects observed after sub-chronic and chronic treatment, we also observed that acute administration of fluoxetine up-regulated hippocampal 5-HT_{1A} receptor mRNA. Nevertheless, there is no information in the literature regarding this effect and the mechanism involved in this acute effect is still elusive. Finally, we demonstrated that GABA_B activation, via systemic administration of GABA_B receptor agonist and positive modulator, induced an increase in hippocampal 5-HT_{1A} receptor mRNA level following acute treatment that was sustained following sub-chronic and chronic treatment. Considering that bath application of the GABA_B receptor agonist, baclofen, was found to cause a concentration-dependent inhibition of dorsal raphe nucleus 5-HT cell firing (Innis et al., 1988), it is conceivable to believe that activation of GABA_B receptor could decrease serotonin tone leading to a up-regulation of hippocampal 5-HT_{1A} receptor. Nevertheless, the effects of chronic GABA_B receptor antagonist treatment on this parameter is more difficult to explain, we demonstrate that chronic treatment only, with CGP56433A upregulated 5-HT_{1A} receptors in stressed animals. However, the alleviation of the effects of stress by anxiolytics or antidepressants can be conceivable and we demonstrated that GABA_B

positive modulator and GABA_B antagonist have respectively anxiolytic and antidepressant profile in several behavioural paradigms. Nevertheless, it would be simplistic to assume that this effect was induced by a direct action of GABA_B receptor on serotonergic system. Indeed, in a recent study, Mitsukawa and collaborators demonstrated a up-regulation of hippocampal 5-HT_{1A} mRNA in mGlu₇^{-/-} (Mitsukawa et al., 2005) in this studies, the authors speculated that this adaptation might be a consequence of regulatory effect of HPA axis on post-synaptic 5-HT_{1A} receptors. Nevertheless, further studies are required to understand the differential onset of action of GABA_B receptor antagonist vs GABA_B positive modulator and to determinate their role in anxiolytic and antidepressant elicited by GS39783 and CGP56433A.

In summary, the present studies demonstrated that genetic inactivation or pharmacological blockade of GABA_B receptors produced antidepressant-like effects in the forced swim test, confirming the role of GABA_B receptor in the modulation of emotion. Although the antidepressant-like effects of GABA_B receptor antagonist have been shown to be mediated by serotonergic system, the desensitization of GABA_B receptor observed after chronic SSRI treatment suggests that GABA_B receptor might be involved in the therapeutic properties of SSRI. These data, combined with the alleviative effect of GABA_B ligands on downregulation of 5-HT_{1A} receptor mRNA induced by chronic handling, confirm that GABA_B receptors antagonists may represent a novel approach to the treatment of depression.

CHAPTER 6: THE ROLE OF GABA_B RECEPTORS IN ADDICTION.

6.1 Introduction.

There is accumulating evidence indicating that GABA_B receptor activation could be beneficial in the treatment of drug addiction. Baclofen has indeed shown efficacy in human clinical trials in reducing cocaine, opiate and alcohol craving (Brebner et al., 2002). Baclofen also inhibits the rewarding properties of cocaine (Brebner et al., 2000; Di Ciano and Everitt, 2003; Hotsenpiller and Wolf, 2003), amphetamine (Brebner et al., 2005), nicotine (Corrigall et al., 2000) and opiates (Tsuji et al., 1996; Xi and Stein, 1999) in a variety of preclinical models.

Exposure to cocaine elicits specific biochemical, physiological and behavioural modifications which are hypothesized to be responsible for the development of addictive behaviours, such as craving and relapse (Nestler and Aghajanian, 1997). Acutely, cocaine elicits motor stimulant effects which are thought to be mediated via an increase in dopaminergic transmission in the mesocorticolimbic system. Cocaine inhibits dopamine (DA), norepinephrine and serotonin reuptake and thereby causes an increase in synaptic concentrations of these neurotransmitters. In the nucleus accumbens (NAc) elevated DA levels cause a dysregulation of D1/D2-like DA receptor signalling. This in turn leads to the upregulation of several molecular markers of DA signalling, mainly through activation of the adenylyl cyclase/ protein kinase A (PKA) pathway (for review see (Anderson and Pierce, 2005). Fos is a marker of cell activation and is upregulated in the striatum by acute cocaine (Graybiel et al., 1990). In addition, repeated administration of cocaine has been shown to elicit behavioural sensitization. As mentioned in the introduction, cocaine sensitization is thought to underlie some facets of cocaine addiction, including craving and relapse (Kalivas et al., 1993;

Robinson and Berridge, 1993). Furthermore, repeated administration of cocaine has been shown to induce Δ FosB, a truncated form of FosB, which slowly accumulates in NAc and dorsal striatum during chronic drug exposure (Hope et al., 1994). Acute and chronic cocaine administration also increases the expression of Ca²⁺-and cAMP-response element binding protein (CREB) and dopamine-and-cAMP-regulated-phosphoprotein of 32 kD (DARPP-32) in the NAc(Terwilliger et al., 1991; Kano et al., 1995; Bibb et al., 1999; Nishi et al., 1999a). Therefore, such increases are thought to play a role in addiction, since viral-mediated overexpression of CREB in this region decreases the reinforcing properties of cocaine (Carlezon et al., 1998). Moreover, mice expressing specifically Δ fosB in the nucleus accumbens and dorsal striatum exhibited sensitized behavioural response to cocaine (Kelz and Nestler, 2000).

Nicotine is the primary psychostimulant component of the tobacco smoke and has pharmacological properties leading to a progressive and long-lasting dependence, as shown in clinical and preclinical studies (Stolerman and Jarvis, 1995). Indeed, the positive reinforcing properties of nicotine has been shown in a wide variety of species (Goldberg et al., 1989; Donny et al., 1998; Picciotto, 1998; Stolerman, 1999) in self-administration paradigms. In addition, nicotine was also found to increase the rewarding efficacy of intracranial self-stimulation (Panagis et al., 2000; Harrison et al., 2002). Place conditioning paradigms, conditioned place preference and conditioned place aversion (CPP and CPA, respectively) are based upon the principle that animals, like humans, would learn to seek or avoid environmental stimuli which have been previously associated with rewarding or aversive events, respectively (Carr et al., 1989)(see section 1.3.3.2). Further, most drugs of abuse, such as cocaine, amphetamine, morphine are effective in supporting place preference (Tzschentke, 1998). Furthermore, several studies demonstrated that nicotine induces conditioned place

preference, making it an ideal model to assess nicotine-induced reinforcement (Tzschentke, 1998; Pierce and Kumaresan, 2005).

Baclofen's mechanism of action as an anti-addictive agent likely involves modulation of dopamine (DA) activity in the VTA. GABA_B receptors are highly expressed in the limbic system and can have both pre- and postsynaptic localizations (Bettler et al., 2004). Activation of postsynaptic GABA_B receptors hyperpolarizes the resting membrane potential through activation of potassium channels whereas activation of presynaptic receptors, via Ca²⁺ channel inhibition, reduces the release of neurotransmitters such as DA, glutamate and GABA. In the VTA, GABA_B receptors are expressed on dopaminergic cell bodies and presynaptically on glutamatergic terminals (Johnson and North, 1992; Fadda et al., 2003). Activation of these receptors would hyperpolarize DA neurons and/or lead to a reduction in excitatory inputs, respectively, thereby functionally counteracting the effects of cocaine. Supporting this hypothesis, micro-injection of the GABA_B receptor agonist baclofen into the VTA decreases DA release in the NAc in a model of heroin self-administration (Xi and Stein, 1999). Further, Fadda et al (2003) have also shown that baclofen antagonizes nicotine, cocaine and morphine induced dopamine release in the NAc in rats.

Nevertheless, baclofen induces unwanted side effects such as muscle relaxation, hypothermia and sedation. Conversely, positive GABA_B receptor modulators such as GS39783 are active only in presence of GABA and are devoid of the sedative and muscle relaxant effects of full agonists (Urwyler et al., 2001; Cryan et al., 2004). GS39783 reduces cocaine self-administration in rodent models (Smith et al., 2004) and inhibits the rewarding properties of acute cocaine in an intracranial self-stimulation paradigm (Slattery et al., 2005b). Although mice lacking GABA_B receptor would provide a powerful tool in effort to study the role of GABA_B receptor in addictive disorders, there are several potential caveats associated with their used in animal model of addiction. First, GABA_B receptor mice are generated on

BALB/c background. Indeed, BALB/c mice have been shown to be insensitive to psychostimulant-properties of drugs of abuse such as amphetamine (Logan et al., 1988), cocaine (Seale and Carney, 1991) and to phencyclidine (Freed et al., 1984). Secondly, the pro-convulsant properties of cocaine (Grabarits et al., 1966) might enhance the frequency of spontaneous seizures observed in GABA_B knockout mice (Schuler et al., 2001; Gassmann et al., 2004), that could interfere with their locomotor activity pattern

The goals of the present chapter were to assess the efficacy of GABA_B receptor activation, via administration of GABA_B receptor agonist or positive modulator, in modulating the reinforcing properties of cocaine and nicotine. First, we investigated the effect of baclofen and GS39783 on both locomotor activity induced by a single administration of cocaine and on its associated striatal Fos upregulation. In addition, we assessed the effects of GS39783 on behavioural sensitization elicited by repeated administration of cocaine. In order to identify the molecular pathways underlying the anti-addictive properties of GABA_B receptor positive modulation, we also examined the effects of GS39783 on specific molecular markers of dopamine signalling, such as CREB, DARPP-32 or Δ FosB. We also investigated the effects of the novel GABA_B positive modulator GS39783 on the reinforcing properties of nicotine, using an unbiased place conditioning paradigm. We first evaluated the intrinsic reinforcing properties of GS39783 in rats. We then assessed the effect of GS39783 on the establishment and the expression of nicotine-induced place preference. Finally, we examined whether that GABA_B positive modulation could alter Δ FosB accumulation induced by repeated administration of nicotine associated with place preference paradigm.

6.2. Experimental Design.

6.2.1 Effects of GABA_B receptor activation on cocaine-related behaviours and their associated molecular markers.

Concerning the effects of baclofen and GS39783 on the hyperlocomotion elicited by a single administration of cocaine, male C57BL/6J mice (18-20g) were individually placed in locomotor test chambers (see chapter 2 for details). After 30 min of habituation GS39783 (10, 30, 100 mg/kg p.o.), baclofen (3, 6 mg/kg p.o.) or methylcellulose was applied and the locomotor activity recorded. 30 min later mice were injected with cocaine (10 mg/kg i.p.) or saline and locomotor activity was recorded for additional 60 min. Doses of GS39783 were selected based on previous studies showing activity in anxiety models at this dose range (Mombereau et al., 2004). The doses of baclofen were selected based on it being maximal doses before behavioural inhibition occurs (Cryan et al., 2004; Jacobson and Cryan, 2005).. The dose of cocaine was selected as it produced a robust hyperactivity in previous studies (Cryan et al., unpublished). In order to assess the effects of a GABA_B receptor agonist and a positive modulator on Fos induction triggered by cocaine, mice were sacrificed 1 hour after cocaine application and the brains were quickly removed, chilled in ice-cold phosphate-buffered saline (PBS) and cut in 1-mm thick slices using a mouse brain matrix (RBM 2000C, Asi Instruments). NAc and dorsal striatum were dissected on an ice-chilled glass plate and flash-frozen in dry ice. Subsequently, c-fos expression was analyzed using the method described in section 2.8.

In studies addressing the effect of GS39783 on behavioural sensitization-induced by cocaine, we used the design described in Chapter 2, using male C57BL/6J mice (18-20g). The mice were habituated to the test environment for three days and basal locomotor activity was measured. After an intraperitoneal injection of saline the mice were placed in the test cages (as above) for 30 min and locomotor activity was recorded. From days 4-10, mice were

injected with cocaine (20 mg/kg i.p.) or saline and locomotor activity was recorded. To assess the effects of GABA_B receptor positive modulation on the acquisition of behavioural sensitization to cocaine, GS39783 (30 mg/kg p.o.) or vehicle (0.5% methylcellulose) was applied 30 minutes before each cocaine injection. This period of acquisition of sensitization was followed by 14 days without drug treatment. In order to investigate the effect of GS39783 on the expression of cocaine sensitization, we designed a challenge trial. On day 23 (challenge day), mice were administered a dose of 10 mg/kg i.p. cocaine. In order to assess the effect of GABA_B receptor positive modulator on the expression of sensitization, GS39783 (30 mg/kg p.o.) or methylcellulose was applied 30 min prior to the cocaine injection. Separate groups of animals were used for molecular studies. The same regimen of cocaine administration was employed as in behavioural studies. 24 hours after the last injection of cocaine animals were killed and brains were quickly removed, chilled in ice-cold phosphate-buffered saline (PBS) and cut in 1-mm thick slices using a mouse brain matrix (RBM 2000C, Asi Instruments). NAc and dorsal striatum were dissected on an ice-chilled glass plate and flash-frozen in dry ice. Δ FosB, CREB, phospho-CREB and DARPP-32 was analyzed using techniques described in section 2.8.

6.2.2 Effects of GABA_B receptor activation on nicotine-related behaviours and their associated molecular markers.

We chose to investigate the effects of GS39783 on the behavioural effects of nicotine in rats as a robust CPP procedure had been previously validated in our laboratories (Forget et al., 2005). All experiments were carried out on experimentally naïve Male Wistars (Iffa Credo, F-69592 L'Arbresle, Cedex France) weighing 180-220g at the beginning of the experiments. They were housed four per cage (55x33x19 cm) in a humidity- and temperature-controlled room under a 12 h light/dark cycle (lights on at 0700). One week prior

to the beginning of the experiments, all animals were food-restricted (20 g/day) until the end of the study.

In the study addressing the intrinsic reinforcing\aversive properties of GABA_B receptor positive modulator, naïve rats were given GS39783 (10, 30 and 100 mg/kg, i.p.), or its vehicle for the control group, 30 minutes prior to the drug-paired conditioning sessions. All of the rats received vehicle before the vehicle-paired sessions. A single test session took place the day following the last conditioning session, i.e. 48 h after the last injection of GS39783. Rats were given no injection before this session.

Concerning the effect of GS39783 on the acquisition of place preference to nicotine, naïve rats were handled and pre-exposed to the conditioning dose of nicotine (0.06 mg/kg, s.c., o.d.) or saline for associated control group, on each of 5 days of the week prior the first conditioning session. For the four drugs-paired sessions, rats received nicotine (0.06 mg/kg s.c.) or saline immediately before the sessions. 30 minutes prior to the drug-paired conditioning session, nicotine-treated rats were given GS39783 (30 and 100 mg/kg; p.o.) or its vehicle. In addition, non-nicotine treated received vehicle 30 minutes before drugs-paired conditioning session. During the four vehicle-paired sessions, all the rats received saline and vehicle (immediately before session and 30 min. prior session respectively). A single test session was conducted the day following the last conditioning session, i.e. 48 h after the last injection of nicotine.

Regarding the effects of GS39783 on the expression of conditioned place preference to nicotine, naïve rats were handled and pre-exposed to the conditioning dose of nicotine (0.06 mg/kg, s.c., o.d.) or saline for associated control group on each of 5 days of the week prior the first conditioning session. During the four drug-paired sessions, rats received nicotine (0.06 mg/kg s.c.) or saline immediately before the sessions, where all the rats received saline before the four vehicle-paired sessions. GS39783 (30 and 100 mg/kg, p.o.), or

its vehicle (methylcellulose) for the associated control group, was administered only once, 45 min before a single test session, which was conducted the day following the last conditioning session, i.e. 48 h after the last.

In order to assess the effects of GS39783 and nicotine regimen on Δ FosB, animals were decapitated immediately after the test phase of place conditioning paradigm. Brains were quickly removed, chilled in ice-cold phosphate-buffered saline (PBS) and cut in 1-mm thick slices using a brain matrix. NAc and Dorsal Striatum were dissected on ice-chilled glass plate and flash-frozen in dry ice. Subsequently, Δ FosB expression was analyzed using the method described in section 2.8.

6.3 Effects of GABA_B receptors activation on specific cocaine-induced behavioural and molecular alterations.

6.3.1 GABA_B receptor activation decreases selective molecular and behavioural effects of acute cocaine administration.

6.3.1.1 GABA_B receptor activation attenuates cocaine-induced hyperlocomotion.

In rodents, a behavioural consequence of acute cocaine administration is increased locomotor activity (see section 1.3.3.2). We used locomotor activity as readout to assess the behavioural effects of baclofen and GS39783 on cocaine exposure. A single injection of cocaine (10 mg/kg i.p.) resulted in a marked increase in ambulatory activity, compared with administration of saline (Fig.6.1). *Post hoc* analysis revealed that baclofen at 6 mg/kg lowered spontaneous locomotor activity at 0 to 10 minutes time point in animals injected with saline ($p < 0.05$; Fig.6.1A). Unexpectedly, animals that had been administered baclofen (3 mg/kg) 30 minutes prior to saline injection had a brief, exaggerated increase in locomotor activity immediately after saline injection which normalized 10 minutes later (Fig.6.1A). In contrast to

the effects of baclofen, GS39783 (at 10, 30, 100 mg/kg) did not affect spontaneous locomotor activity (Fig. 6.1C).

The effects of baclofen and GS39783 on cocaine-induced locomotor activity are shown in Fig. 6.1B and 1D. *Post hoc* analysis revealed that both GS39783 and baclofen blunted the stimulatory effect of cocaine. Although baclofen significantly attenuated cocaine-induced hyperactivity at all doses investigated (Fig.6.1B), interpretation of the effect obtained with the higher dose (6 mg/kg) is confounded by baclofen's sedative properties as evidenced by reduced basal activity at this dose (Fig.6.1A, B). The GABA_B receptor positive modulator GS39783 significantly attenuated hyperlocomotion between 10 and 60 minutes after cocaine administration (Fig.6.1D). However, in contrast to baclofen, GS39783 did not affect basal locomotor activity. Taken together, these data suggested that activation of GABA_B receptors with the agonist baclofen or with the positive modulator GS39783 can attenuate the locomotor-stimulation induced by a single administration of cocaine. Further, we confirmed previous observations showing that GS39783 is devoid of sedative properties of the GABA_B receptor agonist baclofen (Cryan et al., 2004).

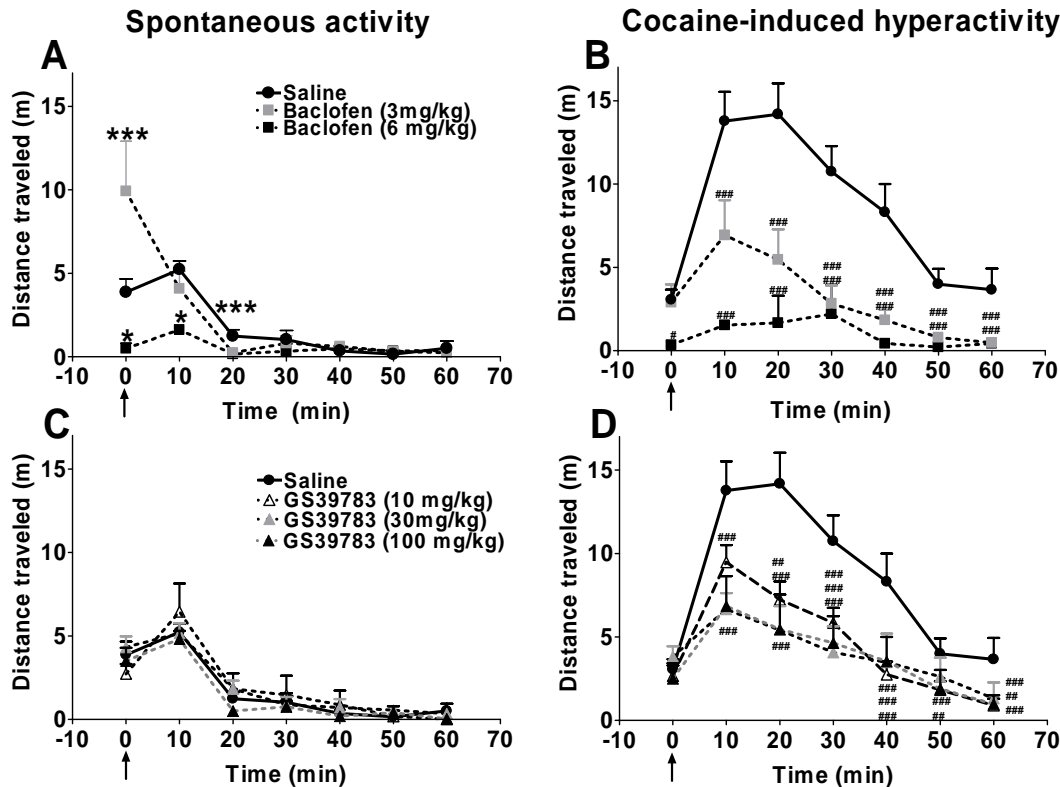


Fig.6.1. GABA_B receptor activation attenuates cocaine-induced hyperlocomotion.

A, C; Effects of baclofen and GS39783 on locomotor activity in mice ($n = 12$) during a period of 60 minutes after saline injection. Values are means \pm S.E.M. *, ***, groups that differed significantly from vehicle-treated animals ($p < 0.05$ and $p < 0.001$, respectively). B, D, effects of baclofen and GS39783 on cocaine induced hyperactivity (10 mg/kg, i.p.) in mice ($n = 12$) during a period of 60 minutes after cocaine injection. Values are means \pm S.E.M. #, ## and ###, groups that differed significantly from vehicle-treated animals ($p < 0.05$, $p < 0.01$, $p < 0.001$, respectively). The arrows indicate the time point of saline or cocaine injection; baclofen or GS39783 were applied 30 min before saline/ cocaine.

6.3.1.2 Striatal fos upregulation by acute cocaine is inhibited by GABA_B

receptor activation.

To date, in the context of drug addiction only few studies have focused on the investigation of the molecular mechanisms affected by potential therapeutic strategies, including those focused on GABA_B receptors. One of the most robust responses to acute cocaine is the activation of immediate early gene expression, most notably Fos, the product of the immediate early gene *cfos* in the NAc and dorsal striatum (Graybiel et al., 1990; Curran et al., 1996). To investigate a possible effect of GABA_B receptor activation on cocaine-induced

Fos upregulation we conducted an experiment with a separate group of animals. The mice were treated with baclofen, GS39783 or saline 30 min prior to cocaine or saline injection. Fos expression was detected by immunoblots on dorsal striatum and NAc samples and normalized to actin controls (Fig.6.2). Treatment with cocaine triggered a robust upregulation of Fos expression in both dorsal striatum and NAc ($p < 0.001$ versus saline; Fig.6.2C-F). Baclofen dose-dependently attenuated cocaine-induced Fos expression in both structures ($p < 0.001$, 6 mg/kg baclofen) but did not affect basal Fos levels ($p > 0.1$; Fig.6.2C, D). Similarly to baclofen, GS39783 dose-dependently inhibited Fos induction in both dorsal striatum and NAc ($p < 0.001$; 30, 100 mg/ kg GS39783; Fig.6.2E, F) without affecting basal Fos expression at any dose used ($p > 0.1$). Taken together these data show that GABA_B receptor activation by baclofen and GS39783 attenuated acute cocaine-induced Fos expression.

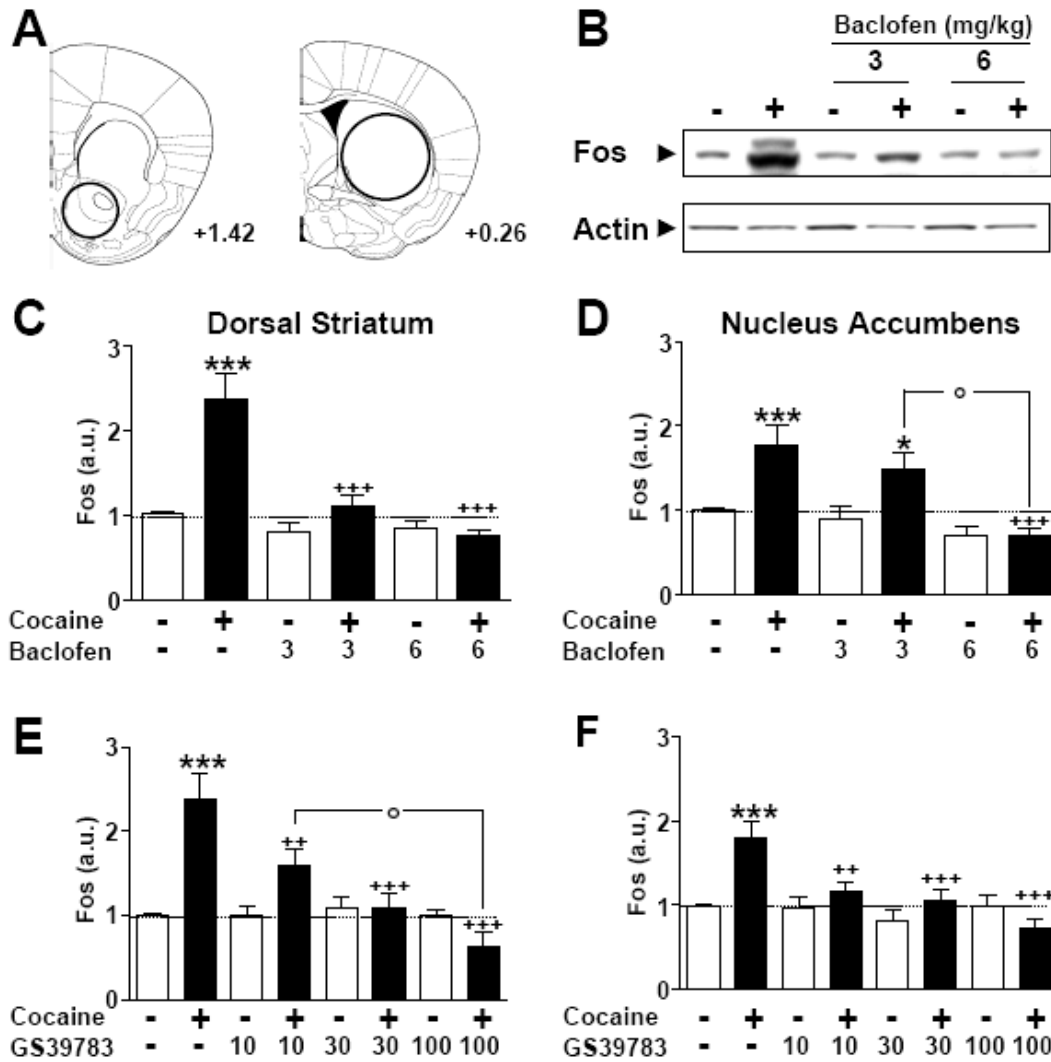


Fig.6.2. GABA_B receptor activation inhibits cocaine-induced Fos accumulation:

Baclofen and GS39783 were applied 30 min prior to cocaine and the mice were sacrificed 2 hrs after cocaine injection (20mg/ kg i.p; n = 5 for each group). A, circles in schematic drawing after Paxinos and Franklin (2001) indicate dissected brain regions (NAc, left panel; Dorsal Striatum, right panel; bregma coordinates are given). Fos was detected by immunoblot in Dorsal Striatum (B, C, E) and NAc (D, E) samples. B, representative Fos immunoblot obtained from Dorsal Striatum samples, with its corresponding actin control. Mice were either injected with saline or cocaine in absence or presence of Baclofen (3 or 6 mg/kg); S, saline; C, cocaine. C, D, Effect of baclofen on Fos-upregulation by cocaine. Averaged densitometric values obtained from Dorsal striatum (C) and NAc (D) samples are shown. E, F, GS39783 attenuates cocaine-induced Fos upregulation in Dorsal striatum (E) and NAc (F) samples. *, + indicate differences to saline controls or cocaine groups, respectively; o indicates differences within treatment groups. *, +, o, $p < 0.05$; **, ++, $p < 0.01$; ***, +++, $p < 0.001$; a.u., arbitrary units.

6.3.2 GABA_B receptor activation alters behavioural sensitization to cocaine and associated specific molecular markers.

6.3.2.1 GABA_B receptor positive modulation alters the acquisition of cocaine sensitization without affecting its expression.

Chronic cocaine induces locomotor sensitization, which results in an enduring enhancement of behavioural responses during repeated drug administration. In behavioural sensitization studies at least two different phases are recognized, acquisition and expression (for a review, (Kalivas et al., 1993)). Briefly, acquisition is the phase in which behavioural and physiological changes develop due to repeated, intermittent exposure to psychostimulants. The expression phase is the resulting long-term behavioural changes that are the result of underlying neuroadaptations.

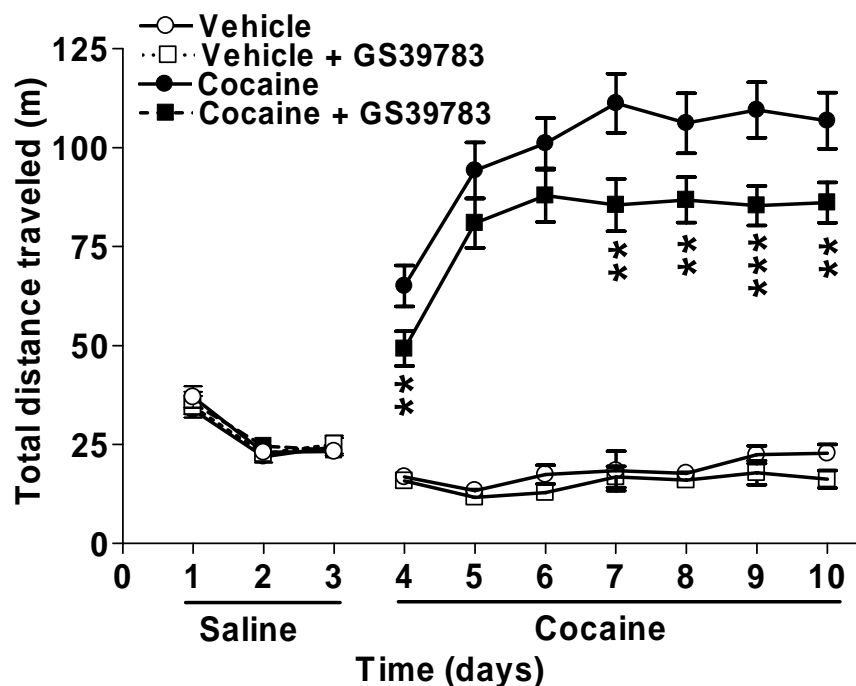


Fig.6.3. The GABA_B receptor positive modulator GS39783 attenuates the acquisition of cocaine sensitization.

Mice ($n = 12$) were habituated to the locomotor activity chambers during three daily sessions (days 1-3) of 30 minutes after receiving intraperitoneal saline injection. GS39783 (30 mg/kg p.o.) or vehicle were administered 30 minutes before cocaine injection (20 mg/kg i.p.) on 7 consecutive days (days 4-10). Locomotor activity was recorded immediately after cocaine injection for 30 minutes. Values are means ($n = 10$ per group) \pm S.E.M. of the total distance traveled during the total 30 minutes of daily session. Two-way repeated measures ANOVA revealed a significant effects of GS39783 ($F_{1,68} = 8.632$; $p = 0.005$), of cocaine ($F_{1,68} = 378.082$; $p < 0.001$) and a significant interaction GS39783 \times cocaine ($F_{1,68} = 4.446$; $p = 0.039$). Statistical analysis demonstrated an effect of time ($F_{6,408} = 23.966$; $p < 0.001$) and interaction cocaine \times time ($F_{6,408} = 19.626$; $p < 0.001$). Groups that differed significantly from cocaine treated animals are indicated (**, $p < 0.01$; ***, $p < 0.001$).

In order to assess the effect of GS39783 on the acquisition of behavioural sensitization to cocaine, we measured locomotor activity of mice immediately after daily cocaine injection for 30 min during the acquisition phase (Fig.6.3). Statistical analysis (see legend) suggested that behavioural sensitization to cocaine occurred. Furthermore, as in the experiments shown in Fig. 1D, GS39783 attenuated the hyperlocomotion induced by a single administration of cocaine (Fig.6.3, day 4; $p < 0.01$). In addition, *post hoc* analysis revealed that mice treated daily with cocaine and GS39783 exhibited less hyperactivity than mice treated with cocaine alone (days 7 to 10; Fig.6.3). These data suggested that GS39783 attenuated the acquisition of

cocaine sensitization. Repeated treatments did not affect locomotor activity compared with the vehicle treated group, confirming the absence of sedative properties of GS39783.

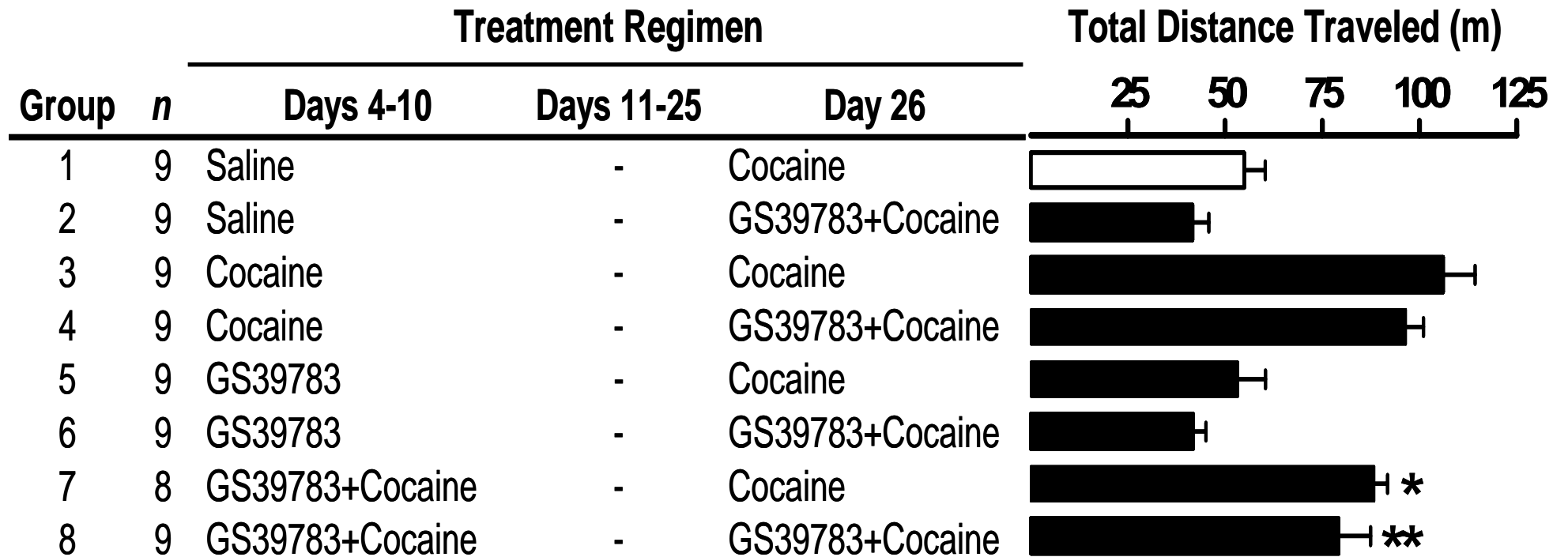


Fig.6.4. GS39783 does not attenuate the expression of cocaine sensitization.

The effects of different GS39783 regimen (30 mg/kg p.o.) on hyperactivity induced by challenging dose of cocaine (10 mg/kg i.p., day 26) injected after 14 days of drug-free period are shown. Treatment during the acquisition phase (days 4-10) was as described in Fig. 3. Three-way ANOVA revealed significant effects of repeated cocaine treatment ($F_{1,63} = 113.408$; $p < 0.001$). There was an effect of GS39783 administration both during the acquisition period ($F_{1,63} = 4.708$; $p = 0.034$) and prior to the challenge ($F_{1,63} = 6.795$; $p = 0.005$), and an interaction between repeated cocaine treatment and GS39783 administered during the acquisition phase ($F_{1,63} = 4.022$; $p = 0.049$). Bar graphs show means \pm S.E.M. of the total distance traveled during the 30 minutes of challenge session. ** and ***, groups that differed significantly from cocaine sensitized animals ($p < 0.05$ and $p < 0.01$, respectively).

To investigate the effect of GS39783 on the expression of cocaine sensitization, we designed a challenge trial, 14 days after the last cocaine injection (Kalivas and Stewart, 1991). During this challenge, all mice received 10 mg/kg of cocaine. As expected, mice treated repeatedly with cocaine exhibited an enhancement of total distance traveled compared to mice treated only with the challenging dose of cocaine (Fig.6.4, groups 3 versus 1; $p < 0.001$). These data confirmed the presence of behavioural cocaine sensitization. Cocaine sensitized mice pretreated with GS39783 before the cocaine challenge did not differ significantly in their locomotor response compared with mice receiving only the challenging dose of cocaine (Fig. 6.4, groups 4 versus 3) indicating that GS39783 does not affect the expression of sensitization. Mice treated concomitantly with GS39783 and cocaine during the acquisition phase of exhibited significantly less locomotor activity compared to mice treated only with cocaine (Fig.6.4, groups 7 versus 3; $p < 0.05$), confirming the data shown in Fig.6.3. Dual administration of GS39783 during the acquisition and prior to the challenge reduced locomotor activity (Fig.6.4, groups 8 versus 3). Altogether, these data suggest that GS39783 attenuated the acquisition of behavioural sensitization to cocaine without affecting its expression.

6.3.2.2 GS39783 blunts chronic cocaine-associated Δ FosB upregulation in dorsal striatum.

In the mesolimbic circuit, chronic cocaine administration triggers the accumulation of Δ FosB, which is thought to play a pivotal role in long-lasting effects of a variety of drugs of abuse including cocaine. Over-expression of Δ FosB increases the sensitivity to cocaine and the motivational aspects of reward (Kelz et al., 1999; Colby et al., 2003). We studied Δ FosB expression after 7-days of daily treatment with saline/ cocaine or GS39783/ cocaine (Fig.6.5). The animals were sacrificed 24 hours after the last administration. A separate group of animals from those used in behavioural studies were used. Δ FosB expression was measured using semi-quantitative Western blot analysis employing selective antibodies (Zhang et al.,

2002; Muller and Unterwald, 2005). Cocaine stimulated a robust increase in Δ FosB expression in dorsal striatum (Fig. 6.5B; $p < 0.001$ versus saline) that was partially blocked by GS39783 ($p < 0.05$). In NAc, Δ FosB levels were also upregulated by chronic cocaine (Fig. 6.5A; $p < 0.001$) however, in this brain region GS39783 failed to modulate Δ FosB induction by cocaine ($p = 0.92$). Basal levels of Δ FosB expression were not affected in either structure ($p > 0.1$). During protracted withdrawal Δ FosB levels decrease to basal levels, i.e. 10-12 days after cessation of chronic cocaine treatment (Hope et al., 1994). In line with these observations we did not detect Δ FosB 14 days after cessation of cocaine repeated administration (Fig. 6.5C). Chronic treatment with GS39783 before withdrawal had no effect on Δ FosB levels. In summary, our data therefore suggest that the mode of action of GS39783 has a modest impact on cocaine-modulated Δ FosB expression in the dorsal striatum but not in NAc.

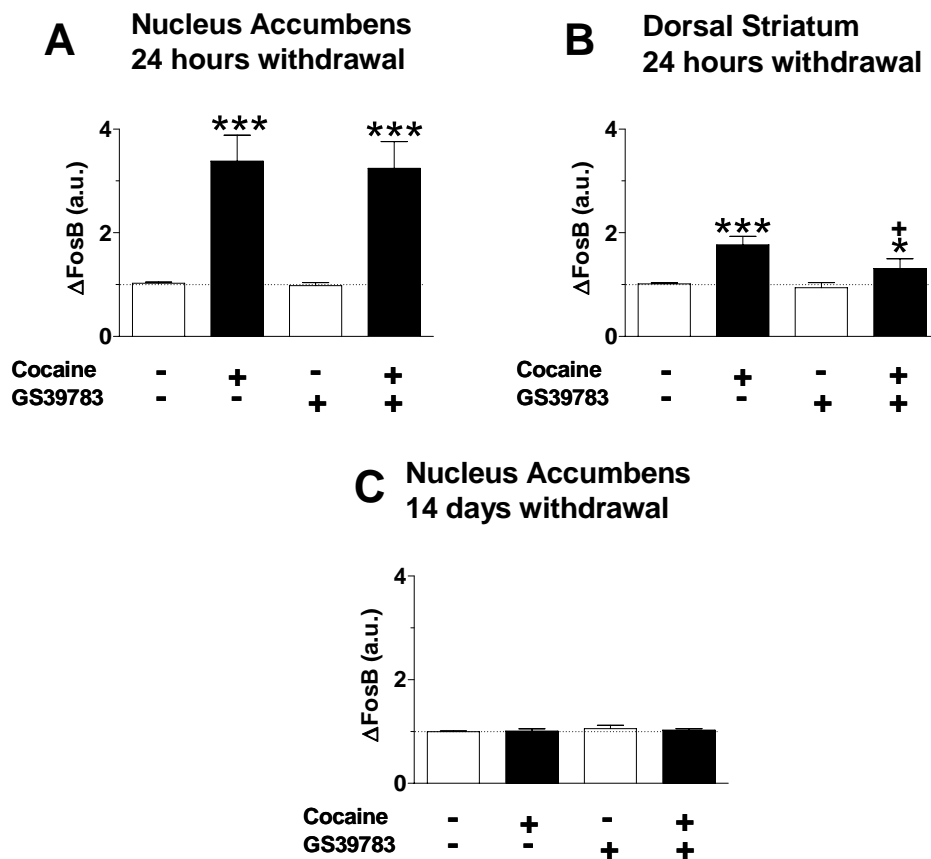


Fig.6.5. GS39783 has a weak inhibitory effect on ΔFosB induction by chronic cocaine.

Mice (n = 5-10 animals/experimental group) were treated daily with cocaine, (20 mg/kg i.p.), GS39783 (30 mg/kg p.o.), saline (-) and respective combinations as indicated on 7 consecutive days. 24 hours after the last treatment the mice were sacrificed and NAc and dorsal striatum dissected and processed for immunoblot analysis. Averaged densitometry values (bottom panels) are shown. A, B, Cocaine induces ΔFosB upregulation in NAc and dorsal striatum. GS39783 partially inhibits ΔFosB induction in dorsal striatum (B) but not in NAc (A). C, Mice (9 animals/group) were administered saline/cocaine for 7 days, after which cocaine exposure was stopped for 14 days. Then the mice received a cocaine challenge (20 mg/kg i.p.) 24 hours after which NAc samples were processed for immunoblotting. ΔFosB protein levels are high immediately after repeated cocaine treatment (24 hours of withdrawal) whereas expression levels decline to basal levels after 14 days of cessation of chronic cocaine. * and + represent differences to saline or cocaine groups, respectively; *, +, $p < 0.05$; ***, +++, $p < 0.001$.

6.3.2.3 GS39783 blocks chronic cocaine-induced upregulation and activation

of DARPP32 and CREB.

Previous studies have shown that chronic cocaine induces a strong activation of DARPP-32 and CREB through increased DA signaling (Kano et al., 1995). We therefore examined whether such changes on DARPP-32 and CREB are modulated by GS39783 (Fig.6.6, Fig.6.7). An experimental setup identical to the Δ FosB studies as described above was used. In the dorsal striatum a trend towards a decrease of DARPP-32 expression by chronic cocaine as well as GS39783 treatments was observed ($F_{3,50} = 2.44$; $p = 0.07$; Fig.6.6). In NAc however, chronic cocaine stimulated DARPP-32 expression. In agreement with previous studies (Lin et al., 2002; Hu et al., 2005) chronic cocaine administration increased DARPP-32 expression in NAc ($p < 0.001$), but not in dorsal striatum. DARPP-32 upregulation was not observed when GS39783 was applied 30 minutes prior to each daily cocaine administration ($p < 0.001$). GS39783 did not affect basal DARPP-32 levels ($p > 0.1$; Fig.6.6B).

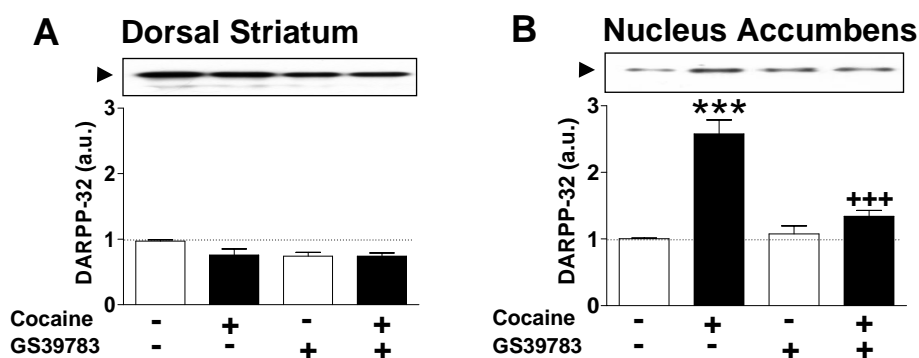


Fig.6.6. GS39783 inhibits DARPP-32 upregulation by chronic cocaine.

Dorsal striatum and NAc samples were prepared 24 hours after cessation of repeated cocaine treatment, as described in Fig. 4. Treatments with cocaine (20 mg/kg i.p.), GS39783 (30 mg/kg p.o.), saline (-) and respective combinations are indicated. Representative immunoblots (top panels) and averaged densitometry values (bottom panels, $n = 5-10$) are shown. A, GS39783 does not affect DARPP-32 expression in dorsal striatum. B, DARPP-32 upregulation in NAc by repeated cocaine is inhibited by GS39783. * and + indicate differences to saline or cocaine groups, respectively. ***, +++, $p < 0.001$.

CREB is activated by phosphorylation and this active form is shuttled to the nucleus where it drives expression of its target genes (Shaywitz and Greenberg, 1999). In addition to total CREB we therefore investigated the levels of phosphorylated CREB (pCREB), and determined the pCREB/CREB ratios. In dorsal striatum, cocaine and GS39783 had a minor effect and the ratio of pCREB/CREB remained unmodified (Fig.6.7A; $F_{3,81} = 1.75$; $p = 0.16$). In the NAc chronic cocaine increased CREB activation as evidenced from the pCREB/CREB ratio, confirming previous studies (Fig.6.7B; $p < 0.01$) (Terwilliger et al., 1991; Kano et al., 1995). Calculation of the pCREB/CREB ratios demonstrated that GS39783 effectively inhibited chronic cocaine-induced CREB stimulation.

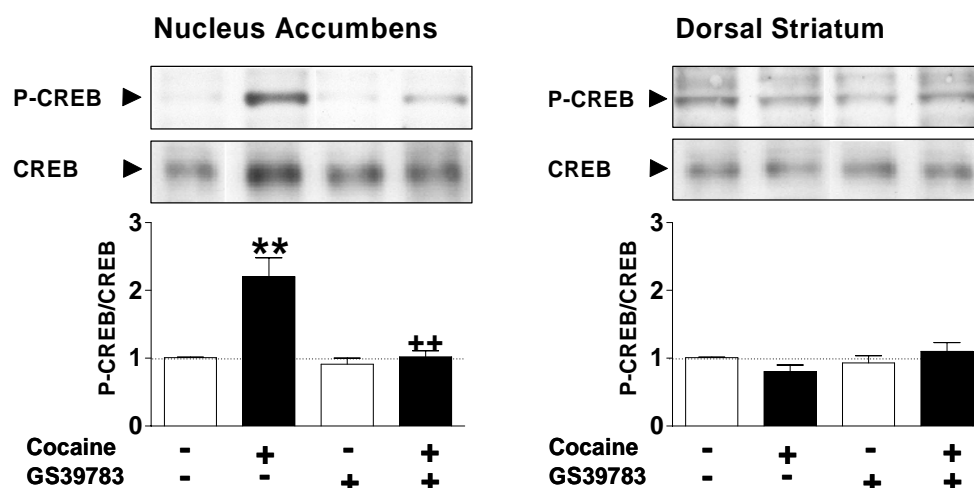


Fig.6.7. GS39783 inhibits CREB activation by chronic cocaine.

Mice were treated for 7 days with daily combinations of cocaine (20 mg/kg i.p.), GS39783 (30 mg/kg p.o.), saline (-) and respective combinations as indicated. dorsal striatum and NAc samples were dissected 24 hours after the end of treatment. P-CREB/CREB ratios were calculated from immunoblots ($n = 5-10$); representative blots are shown (top panels). GS39783 does not modify CREB expression in dorsal striatum (B) but inhibits cocaine-induced CREB activation in NAc (A). * and + mark differences to saline or cocaine groups, respectively; **, ++, $p < 0.01$.

6.4 Effects of GABA_B receptors positive modulation in a model of nicotine reinforcement.

6.4.1 GABA_B receptor activation blocks the establishment of nicotine-induced place preference but not its expression.

6.4.1.1 Intrinsic reinforcing properties of GS39783

On average, control animals (given saline before both drugs-paired sessions and vehicle-paired sessions) did not significantly exhibit preference for either floor texture, demonstrating that there was no unconditioned environmental preference. One-way ANOVA revealed a significant effect of GS39783 on the time spent in paired quadrant [$F(3,47) = 4.771$, $P = 0.006$]. Subsequently, post-hoc analysis indicates a significant reduction of the time spent in modulator-paired quadrants in animals treated with 100 mg/kg of GS39783, when compared to control group ($p < 0.001$). In contrast, at 10 mg/kg and 30 mg/kg, GS39783 did not affect the time spent in drug-paired quadrants (Fig.6.8). Together, these results suggest that although GS39783 supports conditioned place aversion at 100mg/kg, both lower doses tested are hedonically neutral.

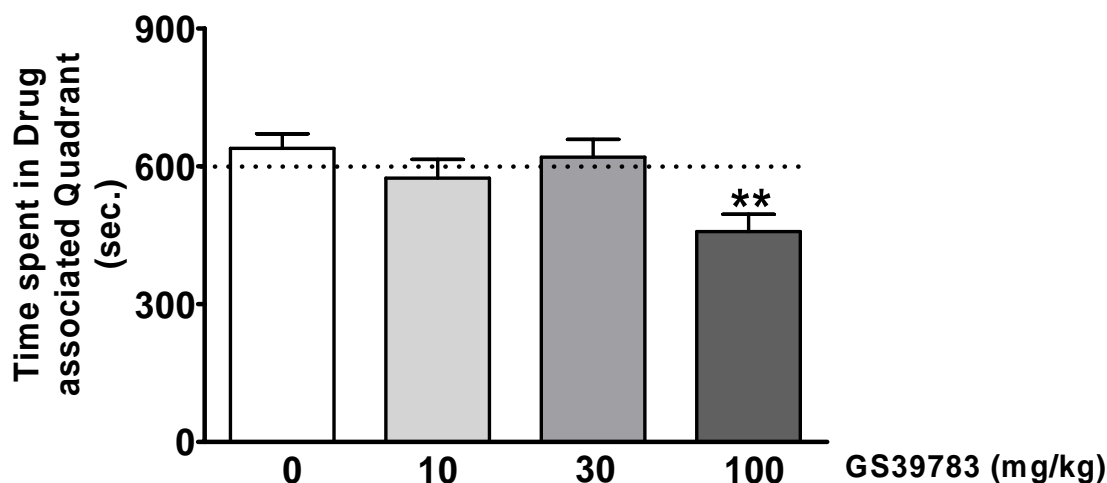


Fig.6.8. Intrinsic reinforcing properties of GS39783 in the place conditioning paradigm.

At 100 mg/kg, GS39783 elicits a significant place aversion. Each bar represents the mean ($n = 12$ per group) \pm S.E.M. of the time spent in drugs associated quadrants. *, **, groups that differed significantly from vehicle treated animals ($p < 0.05$ and $p < 0.01$, respectively).

6.4.1.2 *Effects of GS39783 on the establishment of nicotine-induced place preference.*

In order to test the effect of GABA_B receptor positive modulation on the establishment of nicotine place conditioning, GS39783 was administered 30 min prior to the nicotine injection during the acquisition phase. Regarding the effect of GS39783 on the establishment of nicotine-induced place preference, one-way ANOVA revealed an overall effect of treatment [$F(3,40) = 3.524$, $P = 0.023$] and subsequent post-hoc test revealed a significant effect of nicotine on time spent in drug-paired quadrants (Fig.6.9). Indeed, rats given nicotine at the 0.06 mg/kg, during the conditioning phase spent significantly more time on the paired nicotine-paired quadrants, compared to control animals ($p = 0.044$). This result suggested that 0.06 mg/kg of nicotine supports conditioned place preference as previously reported (Forget et al., 2005). Post-hoc analysis revealed that GS39783 at 30 mg/kg and 100 mg/kg, when it was given 30 min prior each drug-paired session, decreased significantly the amount of time the animals spent in nicotine-paired quadrants compared to animals treated only with nicotine (30 mg/kg, $p = 0.005$ and 100 mg/kg, $p = 0.013$). Consequently, these data show that GABA_B receptor positive modulation during the conditioning phase antagonizes the establishment of nicotine-induced place preference

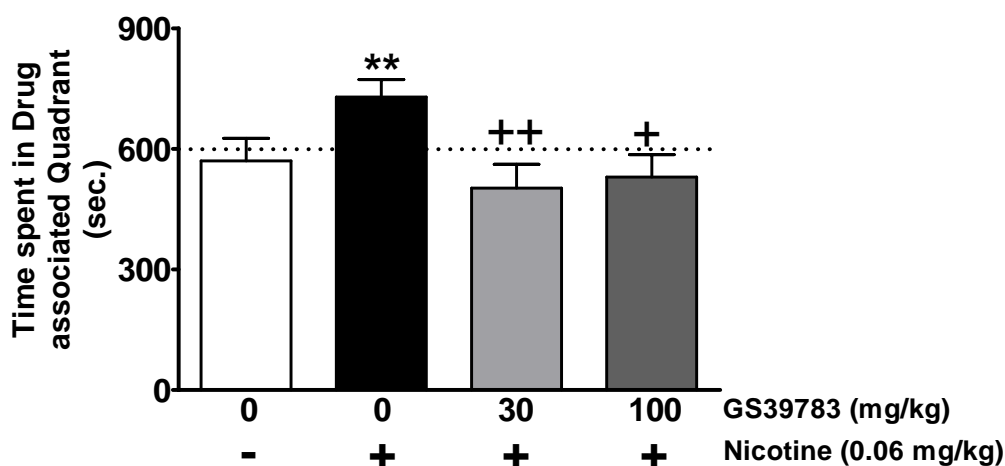


Fig.6.9. Effects of GS39783 on the acquisition of the nicotine-induced place preference.

Nicotine, at 0.06 mg/kg s.c, elicits a significant place preference (black bar) that could be blocked by administration of GS39783, at both 30 and 100 mg/kg, during the conditioning phase (Grey Bars). Each bar represents the mean ($n = 11$ per group) \pm S.E.M. of the time spent in drugs associated quadrants. * and + represent differences to saline or nicotine groups, respectively; **, $p < 0.01$; +, $p < 0.05$ and ++, $p < 0.01$.

6.4.1.3 Effects of GS39783 on the expression of nicotine-induced place preference.

The effects of GS39783 on the expression of nicotine-induced place preference are shown in Fig.6.10. The one-way ANOVA revealed an overall effect of treatments on the time spent in drugs associated quadrants [$F(3,40) = 3.352$, $P = 0.028$]. As shown in Fig.6.10., nicotine supported conditioned place preference ($p = 0.03$, compared to control group). Post-hoc analysis however, revealed that GS39783 at 30 mg/kg and 100 mg/kg, when given 45 min prior to the testing session, failed to decrease significantly the amount of time spent in nicotine-paired quadrant compared to animals treated only with nicotine ($p = 0.558$ and $p = 0.167$, respectively). However, the time spent on the nicotine-paired texture by rats given GS39783 (100 mg/kg) did not differ from the control level ($p = 0.408$). Consequently, although GS39783 seems to affect the acquisition of nicotine-induced place preference, it appears to be without effect on its expression.

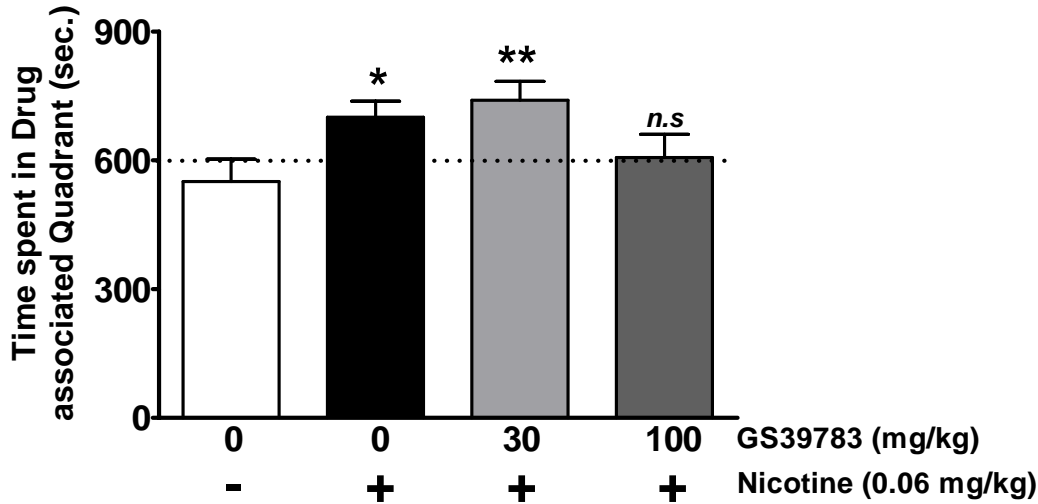


Fig.6.10. Effects of GS39783 on the expression of nicotine-induced place preference.

Nicotine, at 0.06 mg/kg s.c, induces an significant place preference (black bar) but a single administration of GS39783 (Grey bars) prior test phase failed to block the nicotine-induced conditioned place preference. Each bar represents the mean ($n = 11$ per group) \pm S.E.M. of the time spent in drugs associated quadrants. *, **, groups that differed significantly from vehicle treated animals ($p < 0.05$ and $p < 0.01$, respectively).

6.4.2 Effects of GABA_B positive modulator on selective molecular marker associated with nicotine administration.

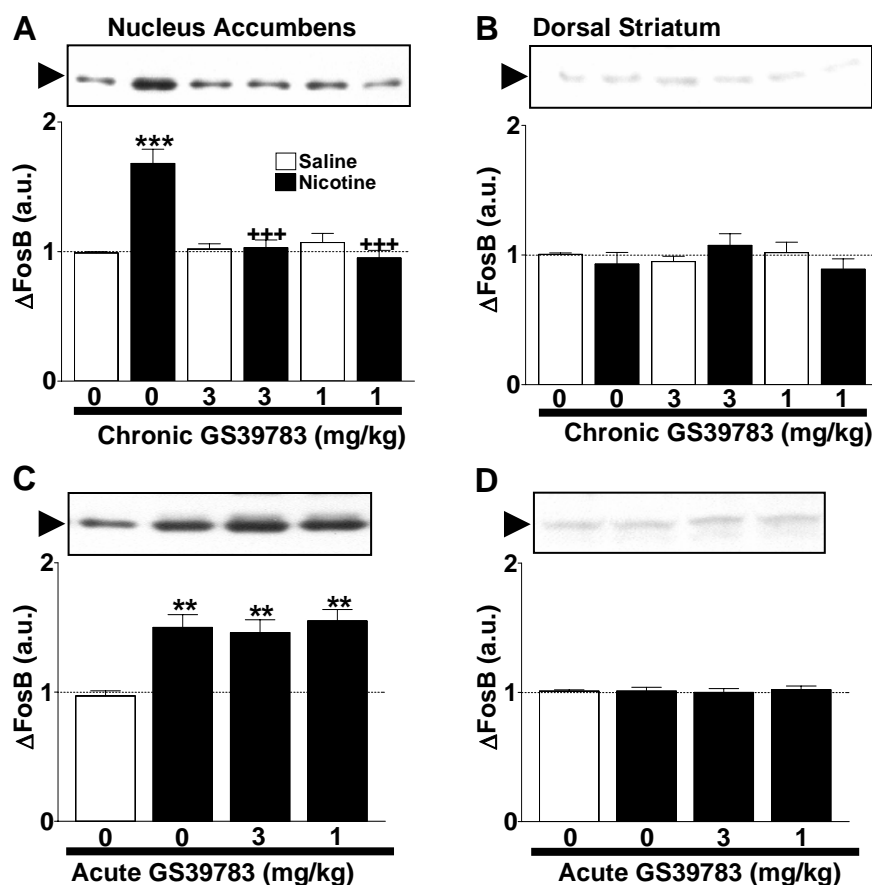


Fig.6.11. GS39783 inhibits Δ FosB induction in the NAc by chronic nicotine but not acute.

Effects of chronic GS39783 administration on Δ FosB accumulation (A, B). Rats ($n = 5-8$ animals/experimental group) were treated daily with saline (white bars) or nicotine, (0.06mg/kg i.p; black bars) during the 5 days of pre-exposure and the acquisition phase of place preference. During conditioning, GS39783 was injected (at indicated concentrations, p.o.) 30 minutes prior to nicotine/saline administration. Animals were sacrificed 48 hours after final test (no nicotine, no GS39783). NAc and Dorsal striatum dissected and processed for immunoblot analysis. Representative immunoblots (top panels) and averaged densitometry values (bottom panels) are shown. Nicotine induces Δ FosB upregulation in NAc (A) but not in Dorsal Striatum (B). Further, GS39783 completely inhibits Δ FosB induction in NAc at both doses used (A). C and D, lack of effect of a single administration of GS39783 on Δ FosB accumulation. Rats ($n=10$ animals/group) underwent nicotine pre-conditioning and conditioning without exposure to GS39783. The modulator was administered 30 min prior to final test at the doses indicated. Δ FosB protein levels are upregulated by nicotine pre-treatment in NAc (C) and not in dorsal striatum (D). Moreover acute GS39783 treatment fails to inhibit this upregulation in NAc. * and + represent differences to saline or nicotine groups, respectively; **, $p < 0.05$; ***, +++ $p < 0.001$.

Given that Δ FosB was the most robust change in cocaine experiment, we studied the influence of both repeated and single administration of GS39783 on Δ FosB expression in NAc and dorsal striatum by semi-quantitative Western blot analysis immediately after

completion of the final test. Chronic nicotine stimulated a robust increase in Δ FosB expression in NAc (Fig.6.11A; $p < 0.001$ versus saline). This upregulation was completely blocked by GS39783 ($p < 0.001$ versus nicotine) at both doses used, when daily injected during the acquisition phase. It should also be noted that both doses of GS39783 did not have any intrinsic effect on basal Δ FosB levels. In NAc, a single administration of GS39783 before the final CPP testing failed to inhibit Δ FosB induction at both doses (Fig.6.11C). One potential concern of the experimental procedure we used is that the Δ FosB signal observed might be a direct consequence of the last CPP test, as opposed to a slow build-up of the protein during chronic nicotine exposure. This hypothesis can however be ruled out since 1) only chronic treatment with GS39783 resulted in inhibition of Δ FosB induction and 2) in experiment 2, the last GS39783 administration was performed 48 hours before CPP testing. In dorsal striatum, Δ FosB levels were not altered by chronic nicotine, chronic or acute GS39783 (Fig.6.11B, D; $p > 0.05$ versus saline). Finally, fig.6.12 shows a plot of the data obtained from individually paired behavioural and biochemical data. A significant positive correlation between CPP scores and levels of Δ FosB expression can be observed ($p < 0.0001$, $R^2=0.38$).

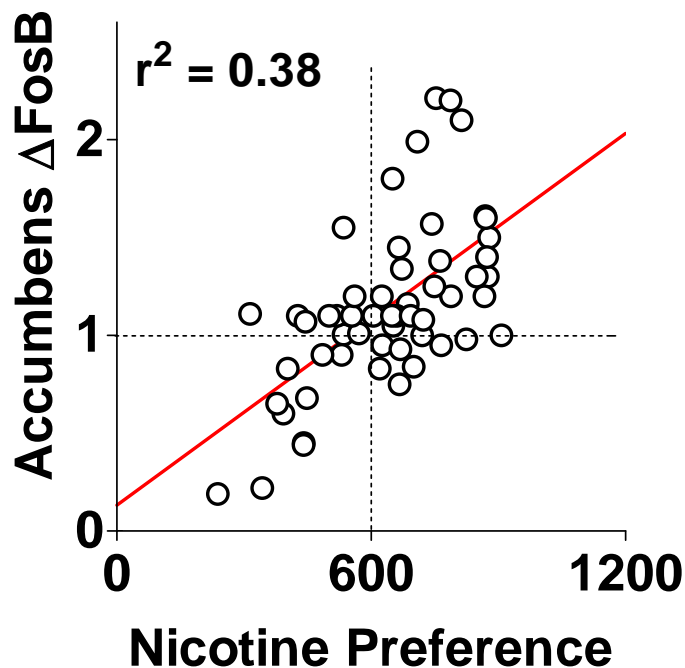


Fig.6.12. Δ FosB induction is correlated to nicotine reinforcement.

All data available for animals in both behavioural and biochemical analyses are included. Accumbal Δ FosB relative abundance is plotted against the subject's CPP score. All experimental groups were mixed and no animals for which both variables were available were discarded. The red line represents the best fit with a least-square methods. Dashed lines indicate chance level (x-axis) and Δ FosB basal level (y-axis).

6.4 Discussion.

Although molecular adaptations to repeated administration of drugs of abuse have been hypothesized to play a major role in the manifestation of dependence (Nestler and Aghajanian, 1997) very few studies to date have investigated the ability of potential therapeutic agents to modulate such responses. In the present chapter, we demonstrated that GABA_B receptor positive modulator attenuates both behavioural effects, such as psychostimulant effects, sensitization or place preference, elicited by drugs of abuse and is also effective in preventing the induction of several molecular markers triggered by single or repeated administration of these substances.

Effects of GABA_B receptor activation on cocaine-related behaviour and molecular adaptations. Both the GABA_B receptor agonist baclofen and the positive modulator GS39783 attenuated the hyperlocomotion induced by a single administration of cocaine. Further, we have shown that GS39783 affects the acquisition but not the expression of cocaine sensitization. These data are in line with studies demonstrating that intra-prefrontal injection of the GABA_B agonist baclofen alters the induction of cocaine sensitization without affecting its expression (Steketee and Beyer, 2005). On the other hand, intra-VTA baclofen administration attenuated both the induction and the expression of behavioural sensitization to opiates (Leite-Morris et al., 2004) and a single systemic administration of baclofen attenuated the expression of sensitization to locomotor stimulant effect of amphetamine (Bartoletti et al., 2005).

GS39783 induced similar effects as a non-sedative dose of baclofen (3mg/kg) in attenuating acute cocaine-induced hyperlocomotion (Fig.6.1), which is relevant as clinical studies suggest efficacy of baclofen in cocaine dependence (Shoptaw et al., 2003). The observations that GS39783, in contrast to baclofen, does not alter baseline locomotor activity is in agreement with the lack of effects in other behavioural tests in both rats and mice which are sensitive to baclofen administration; these include the rotarod motor co-ordination task, cognitive tasks and hypothermia measurements (Cryan et al., 2004; Jacobson and Cryan, 2005). Of note, the effects of GABA_B receptor ligands on cocaine-induced hyperactivity appear not as robust as that reported with D1 selective DA receptor antagonists such as SCH23390, which almost completely block the locomotor stimulant effects of cocaine (O'Neill and Shaw, 1999; Adams et al., 2001). However, a thorough evaluation of GABA_B receptor positive modulators in comparison to other drugs attenuating locomotor stimulant effects of cocaine requires side-by-side experiments and a careful investigation of their side effect profile which may influence locomotor-based behavioural readouts.

Locomotor activity is critically dependent on activation of dopaminergic neurotransmission (Kelly et al., 1975). A pivotal role of VTA DA neurons in mediating the hyperlocomotor effects of DA has been described (Kalivas and Stewart, 1991). VTA DA neurons project to numerous limbic loci including the NAc and the prefrontal cortex. Activation of GABA_B receptors on the cell bodies of VTA DA neurons reduce their excitability which in turn leads to a reduction in DA release in the NAc (Olpe et al., 1977; Lacey et al., 1988; Westerink et al., 1996; Wirtshafter and Sheppard, 2001). In addition, the activity of VTA DA neurons is modulated by excitatory (glutamatergic) and inhibitory (GABAergic) afferents. Activation of GABA_B receptors on glutamatergic afferents would reduce excitatory inputs into the VTA (Johnson and North, 1992; Wu and Saggau, 1997; Hotsenpiller and Wolf, 2003). In support of a key role of GABA_B receptors in the VTA in blocking cocaine-induced hyperlocomotion, baclofen pretreatment dose dependently reduced nicotine-, morphine, and cocaine-evoked DA release in the NAc (Fadda et al., 2003). Furthermore, baclofen injection into the VTA blocked an increase in firing of NAc neurons induced by reward-predictive cues (Yun et al., 2004). Further, Brebner et al. (2005) demonstrated that pretreatment with baclofen dose-dependently reduces d-amphetamine self-administration and blunts associated elevation of DA release in NAc (Brebner et al., 2005). Taken together these data provide evidence that GABA_B receptor activation reduces VTA DA neuron excitability and thereby functionally antagonizes effects of cocaine. However, contributions of other components of the mesocorticolimbic circuitry such as the ventral pallidum or the prefrontal cortex are also possible (Gong et al., 1998; Kalivas and Volkow, 2005). Interestingly, Liu et al. (2005) recently reported that cocaine exposure in vivo facilitates LTP formation in midbrain DA neurons and that drug induced synaptic plasticity could be prevented by enhanced GABAergic inhibition (Liu et al., 2005). The consequence of GABA_B receptor activation on the formation of drug-associated memories however, has not yet been investigated.

GABA_B receptor positive modulators such as GS39783 are devoid of intrinsic agonistic activity (Urwyler et al., 2003; Cryan et al., 2004). Their action therefore is dependent on the presence of GABA (i.e. synaptically released GABA). Several lines of evidence suggest that VTA DA neurons are under tonic inhibitory control by GABA_B receptors. Intra-VTA application of the selective GABA_B receptor antagonist CGP55845A increased extracellular DA levels (Giorgetti et al., 2002). Furthermore, systemic application of the GABA_B receptor antagonist CGP35348 increased firing of VTA DA neurons (Erhardt et al., 2002) whereas the GABA_B receptor positive modulator CGP7930 decreased the firing frequency of VTA DA neurons in midbrain slice preparations (Chen et al., 2005). Taken together with the data for baclofen as described above these studies suggest that GABA_B receptor positive modulators such as GS39783 may attenuate effects of cocaine by decreasing VTA DA neuron excitability.

We have demonstrated that the modulation of several molecular markers by chronic cocaine exposure is attenuated by GS39783. In the NAc GS39783 blocked the induction of both CREB (as evidenced by the ratio of pCREB/CREB) and DARPP-32, without affecting basal levels (Fig.6.6, Fig.6.7). Cocaine treatment increases synaptic DA concentrations which in turn causes a dys-regulation of DA receptor signaling. In the NAc this leads to an upregulation of the adenylyl cyclase signalling pathway, via increased D1-like DA receptor activity (Anderson and Pierce, 2005). Increased cAMP pathway activation in turn augments the expression and activation by phosphorylation of CREB and DARPP-32 (Terwilliger et al., 1991; Bibb et al., 1999). Therefore, most likely GS39783 attenuated CREB and DARPP-32 induction through GABA_B receptor mediated reduction of DA neuron excitability, thus preventing selective cocaine-induced changes in DA receptor signaling. Furthermore, GABA_B receptors negatively couple to adenylyl cyclase (Bettler et al., 2004). GS39783 mediated inhibition of cAMP formation would be expected to decrease the effect of DA receptor

signalling induced upregulation of the adenylyl cyclase pathway, in addition to reducing DA neuron excitability.

Fos expression can be stimulated by a variety of regulators including CREB. After acute treatment Fos is induced in NAc and striatum by several drugs of abuse, including cocaine (Graybiel et al., 1990; Young et al., 1991; Nye and Nestler, 1996; Zhang et al., 2002; Zhang et al., 2004). Leite-Morris et al. (2002) provided evidence that baclofen treatment in the VTA blocks Fos immunoreactivity in the NAc, by inhibiting the activation of dopaminergic neurons. We have shown that systemic applications of either baclofen or GS39783 effectively blocked cocaine-induced Fos induction. These data are in line with the observed attenuation of behavioural effects of cocaine and support the hypothesis that GABA_B receptor activation inhibits the activation of dopaminergic neurons after cocaine treatment.

Δ FosB is accumulated in different brain regions in response to various chronic stimuli including cocaine. We observed an increase of Δ FosB levels subsequent to a chronic cocaine treatment regimen in NAc, and to a lesser extent in dorsal striatum (Fig.6.5), in agreement with previous studies (Hope et al., 1994; Nye et al., 1995; McClung et al., 2004). Interestingly, GS39783 did not significantly affect Δ FosB upregulation in NAc but attenuated the induction in the dorsal striatum. Δ FosB induction is D1-like DA receptor dependent but very little information is available about the downstream signaling cascades/transcription factors responsible for its induction (Nye et al., 1995). It is conceivable that Δ FosB expression is regulated via several tissue specific signaling pathways, which could explain the differential effects of GS39783 on Δ FosB induction in NAc versus dorsal striatum.

Effects of GABA_B receptor positive modulator on place preference induced by nicotine and its associated molecular markers. Although it appears that GS39783, at 100 mg/kg, elicited a place aversion in the present study which can be interpreted as an aversive or

anhedonic property of the compound at this relatively high dose (Fig.6.8). It should be noted that the same dose of GS39783 has been shown to have no effect on baseline intracranial self stimulation (ICSS) thresholds (Slattery et al., 2005b) and spontaneous locomotor activity (Cryan et al., 2004). Nevertheless, the place conditioning protocol employed here requires four administrations of GS39783 versus one for the ICSS and locomotor activity. Although these dissimilarities in the regimen of GS39783 could explain the differences between the studies, the processes involved in the aversive effect of GABA_B positive modulator in the present paradigm remain elusive. Furthermore, we cannot rule out a somatic or peripheral mediation of this aversive behaviour as the solubility of GS39783 is poor and the texture of the gavage treatment may have some taste component that induces aversion. ICSS directly targets the reward pathway and thus bypasses sensory inputs such as taste (Wise et al., 1992). Further, studies using conditioned taste aversion protocols may help in the elucidation of such intrinsic behavioural effects of GS39783. In addition, future studies using GABA_B receptor antagonist might clarify if this effect is totally GABA_B receptor dependent. Regardless of these considerations, we clearly demonstrated that GS39783, when administered during conditioning phase, blocked conditioned place preference elicited by nicotine at both doses used (Fig.6.9) suggesting that GABA_B positive modulation blocked the acquisition of nicotine-induced place preference, even at doses that were without intrinsic activity. Thus, we can deduce that administration of GS39783 prior each drug pairing session attenuates reinforcing properties of nicotine during the conditioning phase. As discussed in the previous section, we can assume that GS39783 might attenuate the increase of dopamine release, via its action dopaminergic neurons of the VTA, resulting in a reduction of the salience of rewarding stimulus. Thus, this reduction might limit the establishment of the association between nicotine and paired cues. These data are in line with the ability of GS39783 to decrease rewarding properties of cocaine in both self administration and ICSS paradigms (Smith et al., 2004; Slattery et al., 2005b). Correspondingly, it has been shown also that GABA_B receptor

activation, via agonist administration, decreases also nicotine self-administration (Corrigall et al., 2000; Paterson et al., 2004, 2005). Interestingly, we also observed that a single administration of GS39783 prior the test failed to significantly affect the expression of nicotine-induced place preference. These present results are consistent with previous data showing that GABA_B receptor positive modulator blocked the establishment but not the expression of behavioural sensitization to cocaine (see Fig.6.4.). This absence of effects of GS39783 on the expression of CPP might be attributed to the inability of GABA_B receptor positive modulator to affect conditioned motivational properties of nicotine-paired cues. Nevertheless, it has been shown that CGP44532, a GABA_B agonist has been shown to block cue-induced reinstatement of nicotine-seeking in rats (Paterson et al., 2005). Moreover, a number reported that baclofen affects the expression of place preference elicited by ethanol, methamphetamine or morphine (Li et al., 2001; Bechtholt and Cunningham, 2005). Thus, it is might be postulated that these response require agonistic activity and that enhancement of GABA_B tone induced by GS39783 is not sufficient to affect the expression of place preference elicited by nicotine. Nevertheless, further studies are required in order confirm this hypothesis.

Moreover, as mentioned in the introduction, the major caveat of place conditioning paradigm consists in its large learning component. While the GABA_B receptor agonist baclofen have been shown to induce memory impairment in several paradigm, such as passive avoidance or water-maze (Swartzwelder et al., 1987; Nakagawa and Takashima, 1997), there is no evidence for amnesic-like effects of GS39783. Indeed, GS39783 did not have any deleterious effects on cognitive performance in the passive avoidance task (Cryan et al., 2004). However, these results were obtained with only one injection of GS39783 before a single session of training whereas GS39783 was administrated before each conditioning session in the present study. Thus, it might be relevant to evaluate the effect of GS39783 in more

sensitive paradigm like water-maze, for spatial memory or delayed non-matching to position, for working memory, requiring administration of the drugs before each training session.

Repeated nicotine self-administration have been also shown to induce a strong accumulation of Δ FosB in the NAc, but not in dorsal striatum (Pich et al., 1997) Here, we confirm these results in our model of nicotine reinforcement (Fig.6.9). Indeed, we observed that GS39783 was effective in inhibiting Δ FosB accumulation in the nucleus accumbens when injected chronically during the acquisition phase of place preference. Nevertheless, we observed, in the previous section, that GS39783 attenuated cocaine-induced induction of Δ FosB in dorsal striatum, but not in nucleus accumbens. This discrepancy might be explained by the fact that cocaine has higher reinforcing efficacy than nicotine (Risner and Goldberg, 1983). Moreover, Pich and collaborators demonstrated that cocaine elicited a greater accumulation of Δ FosB in nucleus accumbens than nicotine, at doses known to maintain self-administration (Pich et al., 1997). Conversely, a single administration of GS39783 before the final test failed to block nicotine-induced Δ FosB accumulation. Taken together, these results suggested that administration of GABA_B receptor positive modulator may limit the gradual accumulation of Δ FosB occurring during the acquisition phase of conditioned place preference to nicotine. Furthermore, we took advantage of the fact that both behavioural and biochemical tests in this study were performed on the same group of animals to compare both data. We found a strong positive correlation between Δ FosB expression and preference for nicotine. Genetic overexpression of Δ FosB in striatal tissues enhances cocaine place preference at low doses (Kelz et al., 1999) while, mice carrying an inactivating mutation of FosB show reduced preference for cocaine (Hiroi et al., 1997). Our data therefore strengthen this existing body of literature suggesting strong associations between the accumulation of Δ FosB and the manifestation of reinforcing properties of drugs of abuse.

Conclusions. In the present chapter, we demonstrated that GABA_B receptor positive modulator attenuated both molecular and behavioural changes induced by cocaine and nicotine, supporting a beneficial role of GABA_B receptor modulation as a pharmacotherapeutic strategy for addictive disorders. Nevertheless, the observation that GS39783 attenuated the acquisition but not the expression of both behavioural sensitization and conditioned place preference elicited by cocaine and nicotine, may raise concerns on the potential clinical efficacy of GABA_B positive modulators, as patients are already sensitized or conditioned at the time of treatment. However, in a recent study in rodents also baclofen failed to affect the expression of sensitization in a recent study in rodents (Steketee and Beyer, 2005), despite having clinical efficacy (Addolorato et al., 2002b; Brebner et al., 2002). Further, our data demonstrate that several molecular adaptations after repeated cocaine and nicotine are attenuated by GS39783 are significant in this respect. It seems evident that additional facets to the addiction process need to be addressed in order to develop successful pharmacotherapeutic strategies. Therefore, interventions should not be limited to inhibiting the rewarding effects of a drug, but should also include strategies to enhance the saliency value of natural reinforcers, strengthen inhibitory control, decrease conditioned responses and improve withdrawal-induced deficits in mood and anxiety (Volkow and Li, 2004). The fact that GABA_B receptor positive modulators reduce anxiety in preclinical paradigms (Chapter 3; Cryan et al., 2004) suggests that they may assist in the treatment of addiction beyond simply reducing the primary rewarding effects of the reinforcer.

CHAPTER 7: GENERAL DISCUSSION.

The studies in the current thesis are focused on addressing a broad hypothesis that GABA_B receptors play a role in the manifestation of psychiatric disorders. More specifically, we investigated the involvement of GABA_B receptors in anxiety, depression and addictive disorders. The resurgence in interest in GABA_B receptors biology can be dated to the cloning of GABA_{B(1)} receptor subunit in 1997 (Kaupmann et al., 1997). Thus, we firstly evaluated the impact of targeted deletion of either GABA_B receptor subunit on GABA_B receptor function and confirmed the conventional view that functional GABA_B receptors assemble from two subunit GABA_{B(1)} and GABA_{B(2)}. Further, we demonstrated that these mice are useful tools for assessing GABA_B receptor function *in vivo*. Secondly, we focused on the involvement of GABA_B receptors in anxiety disorders, using both genetic and pharmacological approaches. In the third part of the present thesis, we assessed the effect of both genetic ablation and pharmacological blockade of GABA_B receptor in animal models of antidepressant-activity. In an effort to gain a better understanding of processes underlying the antidepressant properties of GABA_B receptor antagonist, we explored the interaction between GABA_B receptor and serotonergic system. Thus, we assessed the impact of GABA_B receptors ligands on behavioural effects of SSRIs and the expression of 5-HT_{1A} receptor mRNA in the hippocampus. Conversely, we also investigated the influence of blockade of serotonin transporter on GABA_B function, using baclofen-induced hypothermia as an index of GABA_B receptor function. Finally, the last part of the present thesis addressed the issue of a role of GABA_B receptors in addiction by evaluating the effect of GABA_B receptor stimulation, via GABA_B agonist or positive modulator, on both molecular changes and behaviours elicited by administration of drugs of abuse, such as cocaine or nicotine.

In addition to these topics which have been individually discussed at the end of the individual chapter there are a number of other issues arising from the studies in this thesis that are worthy of further elaboration and which are detailed below.

7.1 Heterodimerization: A prerequisite for GABA_B receptor function?

As mentioned in the introduction, molecular biological and biochemical approaches have suggested that, in contrast to the established dogma for the G protein coupled receptor superfamily, the GABA_B receptor exists as a heterodimer rather than as a single subunit (Calver et al., 2002). In the heteromeric GABA_B receptor, GABA_{B(1)} subunit have been demonstrated to be responsible for binding of GABA, whereas GABA_{B(2)} subunit is necessary for surface trafficking and the initiation of G-protein signalling (Bettler et al., 2004). Challenging this theory, several researchers hypothesized that functional GABA_B receptors may exist in neurons that naturally lack GABA_{B(2)} receptor subunits. Specifically, GABA_{B(1)} subunit exhibits a more widespread distribution throughout the neuroaxis compared with GABA_{B(2)} subunit (Ng and Yung, 2001). Additionally, GABA_{B(1)} have been shown to yield infrequent electrophysiological biochemical responses, when expressed alone in heterologous cells (Kaupmann et al., 1998a; Kaupmann et al., 1998b).

Taking such research into account, we investigated the impact of targeted deletion of GABA_{B(1)} and GABA_{B(2)} subunit on GABA_B receptor function. In chapter 3, we demonstrated that both GABA_{B(1)} and GABA_{B(2)} knockout animals exhibited a blunted hypothermic response to baclofen, suggesting that heteromeric GABA_{B(1,2)} receptor is required for GABA_B function involved in thermoregulation, in agreement with the general view that heterodimerization is a prerequisite for GABA_B function. Correspondingly, we also observed absence of impairment of motor coordination induced by baclofen in both knock-out lines. Similarly, we also demonstrated that genetic ablation of one of the two receptor subunit abolished totally the hypothermic response associated with GHB, response that have been

demonstrated to be mediated by GABA_B receptor. Additionally, we also demonstrated that GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice exhibited similar behavioural profiles in anxiety and depression-related paradigm. More specifically, both lines showed both anxious phenotype and antidepressant-like behaviour in several paradigms (Chapter 4 and Chapter 5 respectively). Altogether, these results agrees with the general view that most of functions mediated by GABA_B receptor require the assembly of two GABA_B receptor subunits and that potential GABA_{B(1)} homodimer or monomer are not involved in the modulation of emotions, thermoregulation and motor coordination.

Although our studies failed to demonstrated differences in the baseline (FST, TST, light-dark box) and GABA_B receptor agonist-induced (baclofen-induced hypothermia) behavioural trait of both lines, electrophysiological and molecular studies have shown atypical electrophysiological GABA_B responses in hippocampal slices of GABA_{B(2)}^{-/-} mice and a redistribution of GABA_{B(1)} receptor subunit in GABA_{B(2)}^{-/-} neurons from distal neuronal sites to the soma and proximal dendrites respectively (Gassmann et al., 2004). These observations imply that neurons naturally lack GABA_{B(2)} receptor subunit have the potential to express functional GABA_B receptors at membrane surface. While in the general view GABA_{B(2)} receptor subunit appears to be essential for the correctly trafficking of GABA_{B(1)} receptor subunit to cell surface, several studies have pointed that GABA_{B(1)} could also exported by another protein. For example, GABAA receptor gamma2S, when expressed with GABA_{B(1)} receptor subunit have be shown to promote cell surface expression of the GABA_{B(1)} receptor subunit (Balasubramanian et al., 2004). Nevertheless, the GABA_{B(1)}/gamma2S complex is not detectably functional when expressed alone, as assessed in both ERK (extracellular regulated kinase) activation assays and physiological analyses in oocytes. Additionally, coexpression of mGluR4 and GABA_{B(1)} receptor subunit have also been demonstrated to led assist plasma membrane expression of GABA_{B(1)} receptor, which appears,

unfortunately, not functional (Sullivan et al., 2000). Consequently, we can predict that GABA_{B(1)} receptor might be expressed at the membrane level, nevertheless, the effector mechanism underlying atypical current is still elusive. Altogether, we demonstrated that the majority of GABA_B functions in CNS are mediated by GABA_{B(1,2)} assemblies and, although electrophysiological studies suggest that GABA_{B(1)} monomers could be functional on its own, their physiological relevance are still unclear and therefore difficult to assess their pertinence if any in the context of psychiatric disorders.

7.2 GABA_B receptors: pharmacological target of GHB?

Given both the therapeutic effects and emerging public health issues related to the use of GHB (Snead), it was particularly crucial to investigate the physiological processes involved in GHB mediated response. GHB have been shown to be effective in the treatment of sleep disorders and alcohol dependence (Agabio et al., 1998). In addition to these therapeutic properties, GHB is readily self-administrated and has been recognized as a drug with a strong abuse potential (Martellotta et al., 1998a; Nicholson and Balster, 2001). Nevertheless, the processes underlying these responses are a matter of debate. Some evidence suggests that GHB acts as a weak agonist at GABA_B receptors (Mathivet et al., 1997; Lingenhoehl et al., 1999), whereas other studies indicate that GHB binds to specific receptor (Maitre, 1997; Snead, 2000). In the present thesis, we took the advantage of recently generated mice lacking GABA_{B(1)} and GABA_{B(2)} receptor in order to assess the involvement of GABA_B receptor in the well characterized GHB-elicited hypothermic responses.

In chapter 3, we observed that targeted deletion of GABA_{B(1)} receptor subunit totally abolished the hypothermic responses induced by oral administration of GHB. Interestingly, these observations combined with the lack of GHB-elicited sedation and the absence of GBL-induced delta waves in GABA_{B(1)}^{-/-} mice (Kaupmann et al., 2003), suggested that most of pharmacological effects of GHB might be GABA_B receptor dependent. Nevertheless, in the

same study, Kaupmann and collaborators demonstrated specific binding sites in the brains of $GABA_{B(1)}^{-/-}$ mice for GHB and NCS-382, a GHB antagonist, confirming the previous notion that $GABA_B$ receptors do not significantly contribute to GHB-binding sites in the brain (Bernasconi et al., 1999). Given that the expression pattern in the brain of $GABA_{B(1)}$ and $GABA_{B(2)}$ receptor subunits do not fully overlap, it is also conceivable that the $GABA_{B(2)}$ receptor subunit might contribute to the binding of GHB. Although the absence of hypothermic response induced by GHB observed in $GABA_{B(2)}^{-/-}$ mice cannot exclude this last theory, these results confirmed that GHB requires a functional $GABA_{B(1,2)}$ receptor assembly in order to elicit its hypothermic responses.

Thus, our data combined with data assessed in collaboration with the laboratory of Kaupmann and collaborators, provided physiological evidence for a contribution of $GABA_B$ receptors in the majority of response induced by GHB and that GHB might be a weak agonist of $GABA_B$ receptors. Although GHB and $GABA_B$ receptor agonists share a large number of their *in vivo* effects, including sedation, hypothermia and also beneficial effects in certain conditions of drug dependence (Gallimberti et al., 1994; Addolorato et al., 2002a), GHB itself may cause physical dependence whereas no abuse potential has been reported for baclofen after more than 30 years of clinical use. One possible explanation for this is provided by the recent elegant study of Cruz et al., (2004) suggesting that GHB, acts like low-affinity $GABA_B$ ligands and inhibits mesolimbic dopamine system whereas baclofen and other high-affinity agonists, will inhibit the system ((Cruz et al., 2004), Fig.7.1). Nevertheless, we cannot exclude that some specific GHB receptors might participate also to these differential effects. Indeed, the recent development of GHB analogs sharing some, but not all, effect of GHB and $GABA_B$ receptors agonists offer a new opportunity to dissect GHB receptor mediated effect from those mediated by $GABA_B$ receptors (Carter et al., 2004). Given that ataxic effects of these GHB analogs are not counteracted by $GABA_B$ receptor antagonist, it might be

interesting to evaluate these compounds in mice lacking GABA_B receptor. Moreover, these novel GHB analogs represent also exciting new tools for studying the involvement of GHB receptors in addictive or anti-addictive properties of GHB.

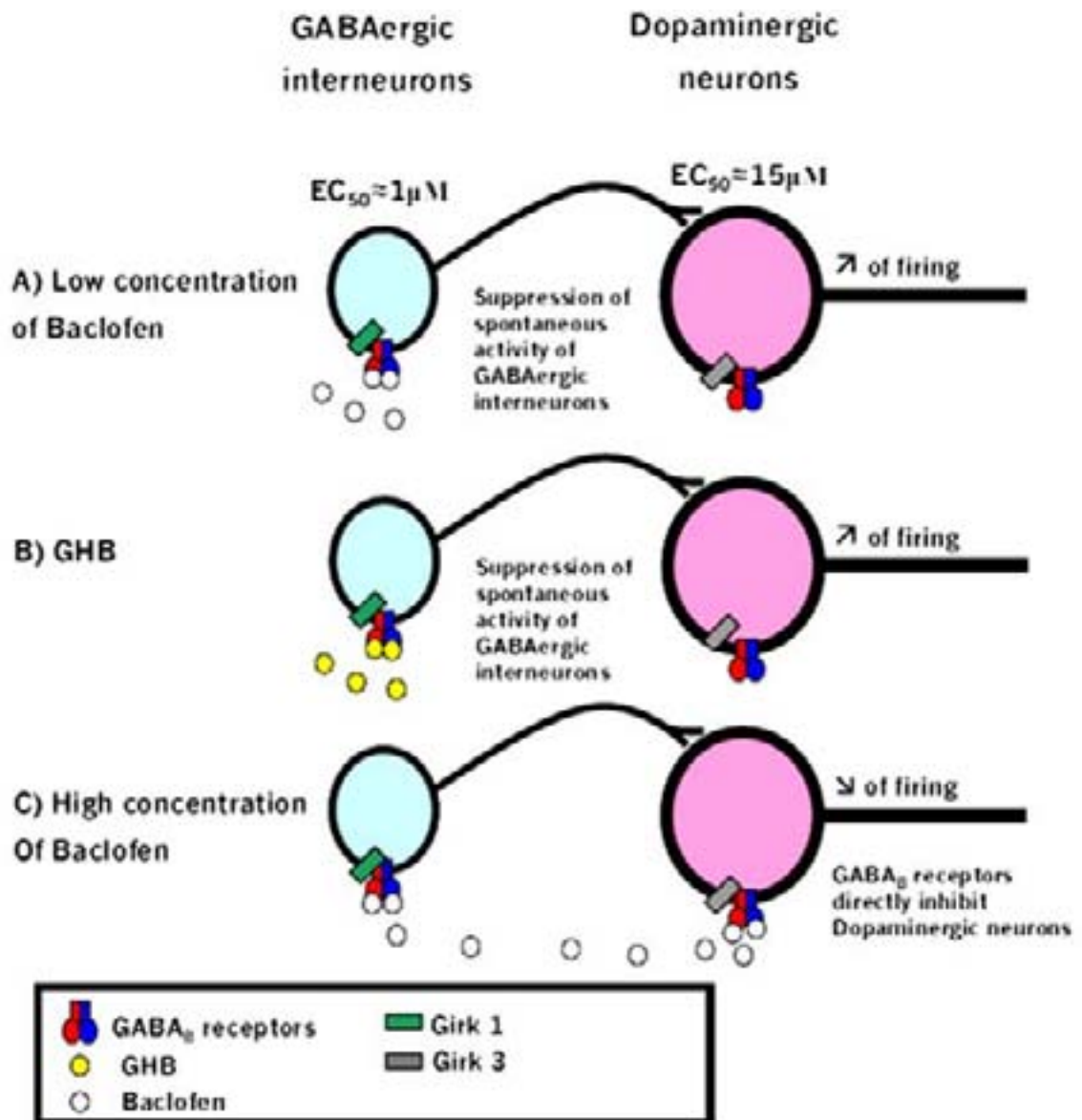


Fig.7.1. Bi-directional effects of GABA_B receptor agonists on the mesolimbic dopamine system.

At low concentration, baclofen stimulate preferentially GABA_B receptor included in GABAergic interneuron leading to disinhibition of dopaminergic. Similarly, GHB, as a weak GABA_B receptor agonist induced the same effect than low concentration of baclofen. C) GABA_B agonist at high dose stimulates GABA_B receptors in dopaminergic neurons of VTA, inhibited mesolimbic system. (based on Cruz et al., 2004)

7.3 Pharmacological vs genetic approaches to investigate role of GABA_B receptors in anxiety.

The results of the section 4.3 and 4.4 provided evidence that targeted deletion of either subunit of GABA_B receptor induced exaggerated anxious phenotype compared to wild-type animals. This was clearly illustrated in the light-dark box for both transgenic lines, and in staircase test and elevated-zero maze for GABA_{B(1)}^{-/-} mice. Supporting earlier findings suggesting that GABA_B receptors stimulation decreases anxiety in several paradigm (Cryan and Kaupmann, 2005), the present data confirm the key role of GABA_B receptor in the neurophysiology of anxiety. However, we also observed that GABA_B receptor antagonist CGP56433A failed to induce anxiogenic effects in light-dark box paradigm, acutely and chronically. The observed mismatch between the phenotype of knockout animals and the effects of antagonist in normal animals could be explained in three ways.

- First, one can assume that GABA_{B(1)} or GABA_{B(2)} disruption activated compensatory changes during development, and these may have affected behaviour in addition to gene disruption. For example, the loss of sensitivity to classical benzodiazepine observed in GABA_{B(1)}^{-/-} mice suggested that lack of GABA_B receptor during the course of early development may result in alterations in GABA_A system.
- Alternatively, we can presume that spontaneous seizures observed in both GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice may contribute to their hyper-anxious phenotype. Indeed, both preclinical and clinical studies suggested that repeated episodes of seizures can result in anxiety (Sayin et al., 2004; Beyenburg et al., 2005).

- Thirdly, we also observed that both pharmacological blockade and genetic ablation of GABA_B receptor result in the same antidepressant effects in mouse forced swim test (Chapter 5), suggesting that the anxiogenic and antidepressant-like effect might recruit different GABA_B receptors population in brain. Indeed, it is conceivable that CGP56433A might bind preferentially at post-or pre-synaptic level resulting in antidepressant-like effect but not in anxiogenic effects.

In order to elucidate the contribution of both genetic compensation and seizures, it would be interesting in future experiments to use conditional knock-down approaches, using cre-lox or siRNA approaches, in the same anxiety paradigm (Haller et al., 2004; Thakker et al., 2005). Moreover, the development of GABA_B receptor antagonists able to bind specifically to pre-or post synaptic receptor would provide a powerful tools in order to investigate the impact of GABA_B receptor blockade on anxiety and depression.

Regardless of the interpretation problems surrounding the data observed using GABA_B knockout animals and GABA_B receptor antagonists, we also demonstrated that GABA_B activation, via administration of recently developed GABA_B receptor positive modulator GS39783, elicits a clear anxiolytic effect in several animal models of anxiety, including ethological tests such as the novelty-induced hypophagia, the elevated plus maze and the light–dark box. Moreover the anxiolytic effects of chronic treatment with GS39783 persist over 21 days, suggesting that there is no obvious tolerance. Moreover, earlier studies indicated that GS39783 is devoid of side-effects associated to both GABA_B full agonist and benzodiazepines (Cryan et al., 2004). Altogether, these findings implicate that GABA_B receptor positive modulation might represent a novel approach in the treatment of anxiety disorder and support the putative role of GABA_B receptors in anxiety disorders. Nevertheless, the behavioural characterization of other GABA_B receptor positive modulator, including

CGP7930 and CGP13501 (Urwyler et al., 2001; Kerr et al., 2002; Urwyler et al., 2003) is required, before it can be definitively stated that they might represent a novel class of anxiolytic with a superior side-effect profile than benzodiazepines.

While we demonstrated that genetic inactivation or pharmacological activation of GABA_B receptor modulates anxiety in opposite manners, the mechanisms underlying the influence of GABA_B receptors on anxiety behaviour are not well understood at present. Firstly, GABA_B receptor has been shown to modulate several monoaminergic systems involved in anxious behaviours. As suggested in Chapter 5, GABA_B receptors strongly interact with serotonergic system in raphé nuclei. Indeed, it has been shown that GABA_B receptors are densely localized on serotonergic neurons of the dorsal raphé and their activation results in the inhibition of firing of these neurons (Innis et al., 1988; Serrats et al., 2003). In the context of anxiety, Andrews and File reported that baclofen reversed both anxiogenic response elicited by benzodiazepine withdrawal and its associated increased of hippocampal 5-HT release (Andrews and File, 1993). In line with these studies, we demonstrated in the section 5.5.3 that both GABA_B receptor positive modulator and GABA_B receptor agonist counteracted the downregulation of hippocampal 5-HT_{1A} receptor mRNA-induced by a chronic handling. Thus, it might be conceivable that GABA_B receptor positive modulator could attenuate the elevation of 5-HT in hippocampus induced by stress via their inhibiting action on the firing of serotonergic neurons in the raphé. However, it would be simplistic to assume that anxiolytic effect of GABA_B agonists can be attributed to a direct suppression of serotonergic transmission. Indeed, GABA_B receptors have been also shown to modulate of noradrenalin that could also participate in their influence on anxious states (Olpe et al., 1988; Losada, 1991). Secondly, GABA_B receptor are broadly distribute in several structure involved in the regulation of anxiety states, such as prefrontal cortex, hippocampus, dorsal periaqueductal grey matter and amygdala (Bischoff et al., 1999; Margeta-Mitrovic et

al., 1999). Thus, local injection of GABA_B receptor agonist or positive modulator may provide more insight into the physiological processes and structure involved in the anxiolytic properties of GABA_B receptor stimulation. For example, recent studies demonstrated a panicolytic-like effect of stimulation of GABA_B receptors in the dorsal periaqueductal grey of rats (Bueno et al., 2005).

7.4 GABA_B receptor blockade a novel therapeutic strategy for antidepressant development ?

One major purpose of the present thesis was to evaluate the therapeutic benefits of altering GABA_B receptor function in animal models of antidepressant-like behaviour. As reported previously, several studies have demonstrated that GABA_B receptor blockade was effective in several animal models of depression (Cryan and Kaupmann, 2005) Given the emerging evidence for a role of serotonergic system in the antidepressant-like effect associated to GABA_B receptor blockade (Slattery et al., 2005a); it appeared essential to investigate these interactions using appropriate tools.

In section 5.3, we observed an antidepressant-like phenotype in both GABA_{B(1)}^{-/-} and GABA_{B(2)}^{-/-} mice and pharmacological antagonism in the forced swim test but not the tail suspension test. In contrast of data observed in anxiety sections, we demonstrated that both genetic inactivation and pharmacological blockade of GABA_B receptor result in the same effect. Consequently, we can exclude a potential involvement of compensatory changes in the antidepressant-like effect observed in both knockout lines. Nevertheless, more studies using paradigms other than the forced swim test, (e.g. the chronic mild stress or in olfactory bulbectomy paradigm) are required to confirm the putative role of GABA_B receptors in depression. For example, Bilkei-Gorzo and collaborators illustrated these needs in a recent study (Bilkei-Gorzo et al., 2002). Although they demonstrated an effect of targeted deletion of *Tac-1* a gene involved in Neurokinin metabolism, in both the forced swim test and tail

suspension, they also observed that this genetic manipulation rescued behavioural changes elicited by bulbectomy. Regardless of its effect in behaviour, it might be also intuitive to explore the effects of GABA_B receptors ablation on physiological aspects of depression (Cryan and Mombereau, 2004). For example, we demonstrated recently that a clear hypersensitivity to dexamethasone suppression test in mGlu⁷^{-/-} mice (Mitsukawa et al., 2005). Interestingly, this enhanced suppression is opposite to that seen in many depressed patient (Holsboer et al., 1980), corroborating their antidepressant-like phenotype observed previously in forced swim test and tail suspension (Cryan et al., 2003c).

In the second part of chapter 5, we recapitulated the antidepressant-like effects of genetic ablation of GABA_B receptor using GABA_B receptor antagonist CGP56433A. Although the influence of GABA_B receptor on serotonergic system is probably still the most parsimonious mechanism so far to account for antidepressant-like of GABA_B receptor antagonist (Chapter 5), GABA_B receptors are also known to alter other neurotransmitter. As mentioned previously, GABA_B receptors actively inhibit the firing in the locus coeruleus (Olpe et al., 1988). Thus, it is therefore possible that GABA_B receptors antagonist would enhance noradrenergic activity, resulting in potential antidepressant-like effect. Nevertheless, the absence of effect of GABA_B receptor antagonist CGP56433A of climbing behaviour in the modified rat forced swim test led to exclude a potential involvement of noradrenergic system in antidepressant-like effect mediated by GABA_B receptor antagonist (Slattery et al., 2005a). Indeed, this pattern of behaviour have been shown to be modulated by catecholamine compounds (Detke et al., 1995; Lucki, 1997; Cryan et al., 2002a). Consistent with this idea, microdialysis studies reported that injection of GABA_B receptor antagonist in the locus coeruleus does not affect the noradrenergic release in frontal cortex (Kawahara et al., 1999). In addition, prior studies combined with the findings of chapter 6 provided evidence for a modulatory effect of GABA_B receptor on dopaminergic system that could participate in

antidepressant action of GABA_B receptor antagonist. Indeed, anhedonic component of depression have been propose to be mediated by dysfunction of brain reward circuitry (Gambarana et al., 2001; Tremblay et al., 2005). Given the fact that GABA_B receptor blockade in the ventral tegmental area elicits increased of local dopamine release (Giorgetti et al, 2002), it is conceivable that antidepressant-like potential of GABA_B receptors antagonists may be due in part to an increase of dopaminergic transmission in brain reward circuitry, which may help to alleviate anhedonic-like symptoms. Moreover, GABA_B receptor stimulation have been demonstrated to increase release of corticosterone and ACTH in rats, suggesting a role of HPA axis in the antidepressant-like effect of GABA_B receptor (Hausler et al., 1993). Based on the fact that behavioural immobility in the FST seems to be contingent upon the presence of corticosterone, as elimination of the effects of corticosterone through an adrenalectomy (Jefferys and Funder, 1996), inhibition of corticosterone synthesis (Baez and Volosin, 1994) alter immobility in this test. It is, therefore, conceivable that the effect observed in the present thesis might be partially due to the influence of GABA_B antagonist of HPA axis activation. Conversely, the pro- depressant effect of CGP44532 observed in the present thesis could be also mediated by an enhancement of corticosterone release during the forced swim test. As mentioned in the introduction, there is growing body of evidence for an involvement of cell survival pathway in therapeutic action of antidepressant (Nestler et al., 2002). Thus, the recent findings suggesting that GABA_B receptor antagonist increase the concentration of BDNF in the hippocampus and cortex, adds another facet to the complexity in the process of understanding mechanism involved in antidepressant-like effect of GABA_B receptors antagonist (Heese et al., 2000). Actually, this elevation of BDNF represents a possible mechanism which may contribute to the antidepressant-like effects of GABA_B receptors antagonist in the forced swim test, as local injection of BDNF in hippocampus decreases time spent in the forced swim test (Shirayama et al., 2002). Together, the above neurochemical and behavioural findings provide clear evidence for a antidepressant-like

effect of GABA_B receptor antagonist. Nevertheless, the exact mechanism underlying this effect is still unclear and the evaluation pharmacological or genetic manipulation of these on the antidepressant-like effect of GABA_B receptor will new insights on how GABA_B receptors influence depression states and antidepressant action.

7.5 Therapeutic relevance of GABA_B receptor activation and blockade in the context of co-morbidity of anxiety and depression.

Superficially at least, it may seem counterintuitive that modulation of a given receptor may induce a differential effect on anxiety and depression-like behaviours, given the extensive co-morbidity of such disorders clinically (Moller, 2002). However, GABA_B receptors are localized both pre- and post-synaptically, and the elucidation of the relative contribution of these individual receptor populations to behavioural phenotypes is currently not possible. It should be noted that there are a number of other receptor systems which genetic and/or pharmacological manipulation gives opposite effects in animal models of depression and anxiety. Interestingly, mice lacking the 65-kDa isoform of glutamic acid decarboxylase (GAD65), which plays an essential role for GABA synthesis, have a similar phenotype to GABA_B knockout mice (increased anxiety and decreased depression-related behaviour; (Stork et al., 2000; Stork et al., 2003)). GAD65^{-/-} mice have a deficit in the temporal increase in GABA synthesis which occurs postnatally in wildtype animals. It is tempting to speculate that the phenotype of these mice may be in part related to insufficient agonist occupancy at GABA_B receptors especially during critical postnatal periods. Also of note is the fact that such a behavioural pattern is also observed for mice lacking the 5-HT_{1A} receptor (Ramboz et al., 1998). These mice have been demonstrated to display more anxious-like behaviour in open-field and elevated-plus maze and antidepressant-like phenotype in the forced swim test. Although these phenotypes might seem paradoxical, since anxiety and depression are often associated in humans, there is also evidence that serotonin can modulate

anxiety and depression in opposite manners, with high serotonergic activity being associated with anxiety and low activity with depression (Graeff et al., 1996). Based of this idea, it is conceivable that the opposite action of GABA_B receptor stimulation and blockade on serotonergic system might contribute to the contradictory phenotype of mice lacking GABA_B receptor and to the anxiolytic and antidepressant-like effect of GABA_B receptor positive modulator and antagonist. On the other hand, targeted deletion of serotonin transporter induced both antidepressant-like effect and anxiogenic effect while chronic SSRI have been shown to be effective as treatment for anxiety disorders both preclinically and clinically (Holmes et al., 2003b). Therefore, recent study demonstrated that blockade of serotonin transporter during the early-life a might contribute to the anxious phenotype observed in 5-HTT^{-/-} mice (Ansorge et al., 2004). Consequently, we can hypothesize that anxious phenotype observed in mice lacking GABA_B knock-out animals might be caused by the alleviation of inhibition of GABA_B receptor on serotonergic neuron of raphe during early-life phase. Considering this, it would be also pertinent to evaluate the effect of chronic pharmacological blockade of GABA_B receptor in anxiety paradigm sensitive to SSRI, such as novelty-induced hypophagia (Dulawa et al., 2004; Dulawa and Hen, 2005) in mature organism, considering the putative enhancement of serotonergic system induced GABA_B receptor antagonist.

Another receptor system of interest is the nociceptin (aka Orphanin FQ, NOP) which has been implicated in anxiety and depression (Jenck et al., 2000; Gavioli et al., 2003; Gavioli et al., 2004). As in the case with GABA_B receptors most of the available literature data suggest that the activation of the nociceptin receptor produces anxiolytic-like effects, while its blockade elicit antidepressant-like actions. Interestingly, several other biological features are shared by these two receptors: i) both NOP and GABA_B receptors are coupled with the same type of G-proteins i.e. the Gi/o and reduce neurotransmitter release at presynaptic sites

and cellular excitability at postsynaptic sites (Calo et al., 2000; Bowery et al., 2002) ii) both receptors are widely expressed in the brain, and densely located in 5-HTergic neurons of the dorsal raphe nucleus (Serrats et al., 2003; Le Maitre et al., 2005); iii) both nociceptin and GABA_B seems to exert a similar and powerful control of the 5-HT system functions by activating K⁺ conductance in the dorsal raphe nucleus neurons (Williams et al., 1988; Vaughan and Christie, 1996) and reducing 5-HT release in the cerebral cortex (Schlicker et al., 1984; Siniscalchi et al., 1999; Sbrenna et al., 2000). The similar pattern of anatomical distribution, transductional mechanisms, effects in models of affective disorders, and ability to modulate 5-HT neuron functions displayed by nociceptin and GABA_B receptors are certainly impressive and strongly suggest that serotonergic signalling represents the target of NOP and GABA_B mediated actions on anxiety and depression. As stated previously, the fact that 5-HT has long been linked with the pathophysiology of depression and anxiety and particularly that clinical and pharmacological studies point to dysfunctions in the dorsal raphe 5-HT system as critical for the pathophysiology of affective disorders (Valentino and Commons, 2005) strongly corroborate this view.

7.6 GABA_B receptors activation, a novel therapeutic approach to treat addictive disorders?

Prior to the emergence of new genetic and pharmacological tools, there had been a decreased interest in examining the role of GABA_B receptor in anxiety and depression, however at this time (mid 1990's) researchers began to shown positive effects of baclofen in animal model of addiction (Roberts et al., 1996). Over the past decade, GABA_B receptor activation has emerged as the most interesting therapeutic strategies for the treatment of dependence to drugs such as cocaine and nicotine. Further, the last aim of the present thesis was to evaluate the putative anti-addictive properties of GABA_B receptor stimulation. We focused particularly on elucidating both behavioural and molecular changes following chronic

exposure to either cocaine or nicotine. Our data suggest that GABA_B receptor activation (either directly or via positive modulation) can reduce the rewarding aspects of abused drugs at both the molecular and behavioural level. Nevertheless, we have to be particularly cautious regarding the linkage between the effects observed in behaviour and molecular changes. Indeed, the inhibition of DARPP-32 upregulation by GS39783 does not intuitively agree with the reduced locomotor activity observed upon the cocaine challenge trial. Although, in line with our findings, total DARPP-32 has been shown to be increased after repeated administration of cocaine (Hu et al., 2005). The majority of studies investigating DARPP-32's role in addiction are focused on its phosphorylation, and more specifically, on its phosphorylation on Thr-75. Since DARPP-32 is preferentially phosphorylated on Thr-75 by repeated administration of cocaine and DARPP-32 Thr-75 mutant mice exhibit attenuation of cocaine sensitization, study of phosphorylation state of DARPP-32 after cocaine and GS39783 treatments could help clarify this matter. While *CREB^{Δ1}* mutant mice, have been shown to be more responsive to the reinforcing effects of cocaine compared to wild-type littermates (Walters and Blendy, 2001), CREB activation have been further presumed as regulating the aversive such as tolerance and dysphoria (Carlezon et al., 1998). Nevertheless, the reduction of Δ FosB induction observed in CPU could be related to the blunting effect of GS39783 on cocaine sensitization. Indeed, mice overexpressing Δ FosB have heightened cocaine-induced locomotor activity during the sensitization (Kelz et al., 1999).

In order to further confirm the putative anti-addictive properties of GABA_B receptor stimulation, we also assessed the effect of GS39783 on reinforcing properties of nicotine in the place conditioning paradigm. Interestingly, GS39783 attenuated the acquisition but not the expression of place preference triggered by nicotine. Similarly with data obtained with cocaine, we also observed that GABA_B receptor activation via application of GS39783, blocked also the accumulation of Δ FosB in the nucleus accumbens only when is injected prior

the test. Although it seems difficult and perhaps premature to clearly link these molecular adaptations to the behaviours observed, the findings provide in this thesis provide evidence for the ability of GS39783 to have anti-addictive potential.

However, the exact mechanisms underlying these effects are not clear and can only be speculated upon at this point. According to the hypothesis that mesolimbic dopaminergic pathway involved in reward, we can presume that GABA_B receptor might modulate dopaminergic release in several structures. As mentioned in chapter 6, the more simplistic scenario would be that GABA_B receptor positive modulators enhance the stimulation of GABA_B receptor on dopaminergic neurons in the VTA. Nevertheless, this response might recruit GABA_B receptor from other structure such as prefrontal cortex or ventral pallidum. GABA_B receptor antagonists have been shown to increase ventral pallidal dopamine release (Gong et al., 1998). Given the fact that dopaminergic lesions of the ventral pallidal terminals impairs the development of place preference elicited by cocaine (Gong et al., 1997), we can assume that GABA_B receptor positive modulators might also recruit GABA_B receptors within the ventral pallidum to attenuate the reinforcing properties of nicotine as observed in the studies presented in Chapter 6 of this present thesis. On the other hand, we can also speculate that the GABA_B receptor positive modulator effect might also recruit GABA_B receptors within the prefrontal cortex. Indeed, local GABA_B receptor stimulation in the median prefrontal cortex have been shown to attenuate the hyperactivity induced by a single administration of cocaine, and the establishment of behavioural sensitization to cocaine (Steketee and Beyer, 2005). Similarly, Doherty and Gratton demonstrated that local injection of baclofen in this area inhibits accumbal dopamine release triggered by stress (Doherty and Gratton, 1999). Further studies, using local administration of GS39783 in these different structures may help to deduce a schema of the neuroanatomical pathways where GABA_B receptors recruited in the anti-addictive response of GS39783.

Similar complexity is observed in order to explain the ability of GABA_B receptor positive modulator to counteract the activation of CREB, DARPP-32 and the induction of Δ fosB triggered by repeated administration of nicotine or cocaine. As mentioned in chapter 6, we presume that this downstream effect is principally mediated by the inhibition of adenylyl cyclase by GABA_B receptor. Indeed, repeated exposure to stimulant increases activity of cAMP-PKA pathway within the nucleus accumbens resulting in an activation of CREB and DARPP-32, via the stimulation of D1 receptors. This action might be partially inhibited by inhibitory action of GABA_B receptor on adenylyl cyclase. Nevertheless, we cannot exclude that the effect elicited by GS39783 could be simply the reduction of dopaminergic tone at D1-receptor elicited by the stimulation of GABA_B receptors in the ventral tegmental area. Thus, it might be relevant to investigate these processes electrophysiologically in nucleus accumbens slices, in order to limit the interfering effect of GABA_B-mediate dopaminergic regulation from the VTA.

Additionally, the multiplicity of pathway mediating the activation of CREB, DARPP-32 and Δ fosB, add a real complexity in the effort to understand the mechanism of action of GS39783 at cellular level. For example, CREB activation have been shown to be modulate by three different pathways (see fig.7.2): the cyclic AMP-dependant protein kinase pathway (cAMP-PKA pathway), the calmodulin kinase pathway (CAMK pathway) and mitogen-activated protein kinase pathway (MAPK pathway, see Carlezon et al, 2005 for review). Although it has been postulated that repeated injection of drugs of abuse recruit mainly the cyclic cAMP-PKA pathway (Anderson and Pierce, 2005), a recent study demonstrated also an involvement of MAPK pathway in the phosphorylation of CREB elicited by repeated administration of cocaine (Mattson et al., 2005). Thus, it is likely, given that GABA_B stimulation have been shown to decrease MAPK activation (Ren and Mody, 2003), that the effect of GS39783 on activation of CREB might be mediated via inhibition of MAPK

pathway. Thus, further studies on accumbal slices or cell culture might help to clarify all cellular pathway involved in the downstream effects of GS39783 on molecular changes elicited by administration of drugs of abuse.

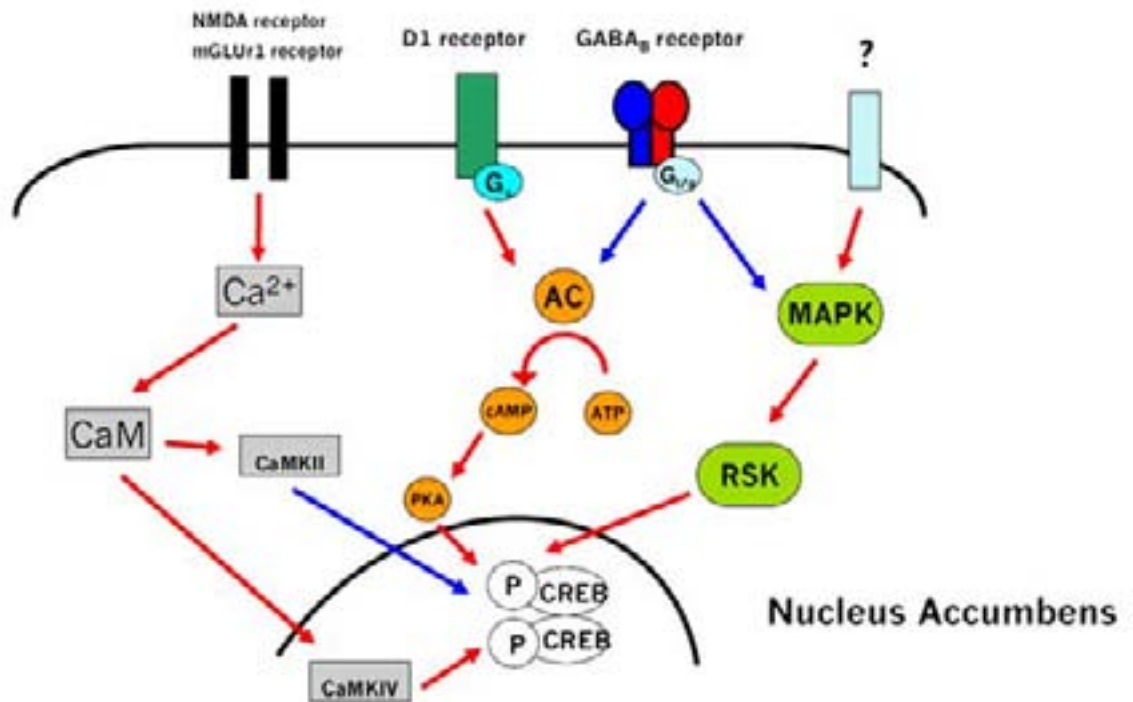


Fig.7.2 Cellular pathway involved in regulation of CREB activity.

There are three different pathways regulating CREB activity :the cAMP-PKA pathway (orange),the CAMK pathway (grey) and the MAPK pathway (Green). Repeated administrations of drugs have been shown to stimulate both cAMP-PKA pathway, via D1 stimulation, and MAPK pathway. GABA_B receptors might counteract activation of CREB via : diminution of dopaminergic tone at D1 receptors, inhibition of adenylyl cyclase and inhibition of activation of MAPK. Red arrows signify activation. Blue arrows signify inhibition. Abbreviation: CaM, calmoduline; CaMK; Ca²⁺Calmoduline dependent kinase; RSK, MAPK-activated ribosomal S6 kinases; AC, adenylyl cyclase; PKA ; cAMP dependent protein kinase.

In conclusion, the findings of the present thesis suggest a putative anti-addictive property of GABA_B positive modulator. Indeed, administration of GS39783 attenuated both behavioural effect and molecular adaptation elicited by administration of drugs of abuse. Nevertheless, it should be noted that the major caveat of models used in the present thesis is that drugs were passively administrated by the animal. Given the fact that passive vs active

administration of drugs of abuse elicited common but also different molecular and physiological changes (Jacobs et al., 2003), it would be pertinent to assess the effect of GS39783 in self-administration paradigms in order to compare with the present findings. Additionally, addiction is a multifaceted disorder including different states such as craving or withdrawal. Although we demonstrated that GS39783 might attenuate the reinforcing properties of drugs of abuse, it would be appropriate to investigate its effect in paradigm relevant to these syndromes. Considering that it has been postulated that sensitization plays a major role in some of the persistent features of drug abuse, such as drug craving and compulsive drug-seeking behaviour (Robinson and Berridge, 1993), it would be conceivable that GS39783 might reduce craving behaviour and drugs seeking. This hypothesis is supported by the fact that GABA_B receptor agonist, namely baclofen and CGP44532, have been shown to inhibit cue-triggered relapse to nicotine and cocaine-seeking behaviour. On the other hand, it might be also essential to assess the effect of GS39783 in animal model of withdrawal. Considering that baclofen has been shown to decrease the abstinence sign of morphine, alcohol and barbital (Sandoval and Palermo-Neto, 1985; File et al., 1992; Kemmling et al., 2002), we can speculate a putative effect of GS39783 in these models. Taken together, these findings suggest that GABA_B receptor activation, and more specifically, GABA_B receptor positive modulation might be considered as a novel approach to treat addictive disorder. Moreover, its effectiveness in counteracting the effects of a wide spectrum of drugs of abuse and in different symptoms of addictive disorder leads one to consider the GABA_B receptor as one of the most promising therapeutic targets for treating addiction.

7.7 Concluding remarks

Since its cloning, GABA_B receptor research has undergone a renaissance over the past decade. Through the development and subsequent access to novel pharmacological and genetic tools, such as GABA_B positive modulator and mice lacking GABA_B receptor, I have

generated strong evidence that GABA_B receptors play a key role in psychiatric disorders, such as anxiety, depression or addiction. The exact physiological and molecular mechanisms by which modulation of GABA_B receptor system contribute to these disorders are still elusive. Nevertheless, the emergence new technology such as conditional knockdown (Haller et al., 2004) or RNA interference (Thakker et al., 2005) will help to dissect the brain structure recruited in the beneficial properties of GABA_B ligands. Moreover, the relative contribution of presynaptic and postsynaptic receptors to behavioural effects of GABA_B receptors ligands needs to be clarified. To this purpose, the group of Bernard Bettler (University of Basel), in collaboration with colleagues at Novartis, generated mice lacking GABA_{B(1a)} or GABA_{B(1b)} isoforms. Electrophysiology in the CA1 region of mutant mice demonstrates that GABA_{B(1a,2)} receptors and GABA_{B(1b,2)} receptors fulfil distinct pre- and postsynaptic roles. This novel advance give the opportunity to explore the involvement of these two isoforms the modulation of emotion and reward system (Biermann et al., 2005; Jacobson et al., 2005).

Additionally, the recent initiation of mapping of GS39783 positive modulator binding site at the GABA_B receptor heterodimer (Binet et al., 2004; Dupuis et al., 2004) will hopefully provide new tools, such as antagonist of GABA_B positive modulator or mutant mice lacking GABA_B positive modulation allosteric site. Consequently, these approaches may help clarify the localization of GABA_B receptor recruited in anxiolytic and anti-addictive effects of GABA_B positive modulator. Finally, although we focused this thesis on these three psychiatric disorders, GABA_B receptor system might be involved in other pathology such as cognitive dysfunction, epilepsy or schizophrenia, pain food intake (Patel et al., 2001; Treiman, 2001; Mizukami et al., 2002; Froestl et al., 2004; Bowery, 2005; Buda-Levin et al., 2005; Foltin, 2005). The use of the novel tools employed in this thesis should also help to further delineate the therapeutic potential of GABA_B receptor activation in animal models of these diseases.

Taken together, it's hoped that these studies presented here have, and will continue to, renew interest in the behavioural pharmacology of GABA_B receptor. Further, we inspire that these data will serve as a primer for the development of novel therapies for anxiety, depression and drugs dependence where is a huge unmet medical need.

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ETUDE DU ROLE DES RECEPTEURS GABA_B DANS L'ANXIETE, LA DEPRESSION ET L'ADDICTION : APPROCHE PHARMACOLOGIQUE ET GENETIQUE.

Notre travail visait à caractériser le rôle des récepteurs GABA_B dans l'anxiété, la dépression et l'addiction, prenant avantage du récent développement de souris GABA_B knockout et d'un modulateur positif allostérique du récepteur GABA_B (GS39783). Dans un premier temps, nous avons observé que l'ablation du gène codant pour le récepteur GABA_B induisait un effet anxiogène. Inversement, la stimulation pharmacologique de ces récepteurs produisait une réponse anxiolytique. De plus, nous avons mis en évidence que l'inactivation génétique de ces récepteurs et leur blocage pharmacologique induisait un effet antidépresseur. Finalement, nous avons observé que le GS39783 s'opposait à la fois aux comportements et aux adaptations moléculaires associés à l'administration de psychostimulants. Ainsi, ces études nous permettent de conclure que les récepteurs GABA_B pourraient représenter une cible dans le développement de nouvelles stratégies thérapeutique dans le traitement de ces trois pathologies.

Taking advantage of the recent development of GABA_B positive modulator GS39783 and mice lacking GABA_{B(1)} or GABA_{B(2)} receptor subunits, the studies in the present thesis are focus on addressing a broad hypothesis that GABA_B receptors play a key role in the manifestation of psychiatric disorders, such as anxiety, depression and addiction. In a first time, we demonstrated that targeted deletion of either GABA_B receptor subunit induced strong anxiety. Conversely, we also observed that GABA_B activation, via administration of GS39783, induced anxiolytic-like effect in several paradigms. Secondly, we also demonstrated that genetic inactivation of either GABA_B receptor subunit induced antidepressant-like effects. In confirmation of the genetic data, acute and chronic blockade of GABA_B receptor decreased immobility in the forced swim test. Finally, we also demonstrated that pharmacological activation of GABA_B receptor counteracted both molecular and behavioural adaptations elicited by a single administration of cocaine or nicotine. Altogether, our data support the role of GABA_B receptor in anxiety, depression and addiction and that GABA_B receptor might be considered as one of the most promising therapeutic targets for treating these disorders.

ROLE OF GABA_B RECEPTORS IN ANXIETY, DEPRESSION AND ADDICTION: PHARMACOLOGICAL AND GENETIC APPROACHES.