

1 **Long-term treatment with fluoxetine induces desensitization of 5-HT₄ receptor-**
2 **dependent signalling and functionality in rat brain**

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20 **Abbreviations used:** SSRI, selective serotonin reuptake inhibitor; 5-HT, serotonin; NE,
21 norepinephrine; ERK, extracellular signal-regulated kinase.

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1 **Abstract**

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3 The mode of action of antidepressant drugs may be related to mechanisms of monoamines
4 receptor adaptation, including serotonin 5-HT₄ receptor subtypes. Here we investigated the
5 effects of repeated treatment with the SSRI fluoxetine for 21 days (5 and 10 mg/kg, p.o., once
6 daily) on the sensitivity of 5-HT₄ receptors by using receptor autoradiography, adenylate
7 cyclase assays and extracellular recording techniques in rat brain. Fluoxetine treatment
8 decreased the density of 5-HT₄ receptor binding in the CA1 field of hippocampus as well as in
9 several areas of the striatum over the doses of 5-10 mg/kg. In a similar way, we found a
10 significant lower response to zacopride-stimulated adenylate cyclase activity in the fluoxetine
11 10 mg/kg/day treated group. Furthermore, postsynaptic 5-HT₄ receptor activity in
12 hippocampus-measured as the excitatory action of zacopride in the pyramidal cells of CA1
13 evoked by Schaffer collateral stimulation was attenuated in rats treated with both doses of
14 fluoxetine. Taken together, these results support the concept that a net decrease in the
15 signalization pathway of 5-HT₄ receptors occurs after chronic SSRI treatment: this effect may
16 underlie the therapeutic efficacy of these drugs.

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19 **Keywords:** Fluoxetine, 5-HT₄ receptors, zacopride, autoradiography, adenylate cyclase and
20 electrophysiology.

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23 **Running title:** Chronic fluoxetine and 5-HT₄ receptors

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1 **Introduction**

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3 Treatment with selective serotonin reuptake inhibitors (SSRIs) benefits many patients with
4 major depression disorders. However, current antidepressant therapies need a sustained
5 treatment of 2-4 weeks to be effective. In this regard, adaptive changes in both serotonergic
6 and noradrenergic neurotransmission, through the activation of the different serotonin (5-HT)
7 and norepinephrine (NE) receptor subtypes are believed to underlie the therapeutic efficacy of
8 antidepressants drugs. Many research studies have been focused in the alterations of 5-HT and
9 NE presynaptic reuptake sites, 5-HT_{1A}, 5-HT₂, β and α_2 receptors in both the pathogenesis of
10 major depression (Klimet *et al.* 1997; González-Maeso *et al.* 2002; Valdizán *et al.* 2003;
11 Mann 1999; Purselle and Nemeroff 2003; Parsey *et al.* 2006) and the antidepressants
12 mechanisms of action (see Brunello *et al.* 2002; Adell *et al.* 2005; Schechter *et al.* 2005;
13 Castro *et al.* 2008). However, despite numerous studies available in the literature, the role of
14 the different neurotransmitter receptors in the mediation of the antidepressant effects of these
15 drugs has not been clearly established. Moreover, except for 5-HT_{1A} and 5-HT₂ receptors, few
16 data are available on the effect of chronic antidepressants administration on the other 5-HT
17 receptor subtypes.

18 The actions of 5-HT are mediated by at least 14 receptor subtypes (Hoyer *et al.* 2002; Barnes
19 and Sharp 1999) and their regulation by antidepressants is not yet fully understood. The 5-
20 HT₄ receptor exhibits a wide distribution throughout the central nervous system. In the brain,
21 this receptor is located postsynaptically primarily in the limbic areas (olfactory tubercle,
22 prefrontal cortex, hippocampus and amygdala) and basal ganglia (caudate-putamen and
23 ventral pallidum) (Waeber *et al.* 1994; Vilaró *et al.* 1996; Vilaró *et al.* 2005). 5-HT₄ receptors
24 are coupled to G proteins and positively linked to the adenylate cyclase in the brain (Hoyer *et*
25 *al.* 2002). The increase in cAMP levels leads to an activation of protein kinase A that
26 mediates closure of potassium channels (Fagni *et al.* 1992; Ansanay *et al.* 1995). Thus, 5-HT₄

1 receptor contributes to the neuronal excitability of pyramidal cells of hippocampus (Chaput *et*
2 *al.* 1990; Andrade and Chaput 1991). In addition to adenylate cyclase stimulation, a direct
3 coupling to both voltage-sensitive calcium channels (Hoyer *et al.* 2002) and extracellular
4 signal-regulated kinase (ERK) pathway (Barthet *et al.* 2007) has also been proposed.

5 Neurochemical and behavioural studies indicate that 5-HT₄ receptor modulate
6 neurotransmitter (acetylcholine, 5-HT, GABA and dopamine) release and enhance synaptic
7 transmission in many brain areas (Yamaguchi *et al.* 1997; Lucas and Debonnel 2002;
8 Bianchi *et al.* 2002; Alex and Pehek 2007) including those implicated in memory, anxiety,
9 anorexia and depression (Matsumoto *et al.* 2001; Manuel-Apolinar *et al.* 2005; Jean *et al.*
10 2007; Lucas *et al.* 2007). Regarding depression, some findings suggest that 5-HT₄ receptors
11 may have a potential interest in this illness. First, chronic antidepressant treatment has been
12 proposed to induce subsensitivity to the 5-HT₄ receptor-mediated excitatory effects in the
13 hippocampus (Bijak *et al.* 1997). Second, an increase in cortical and hippocampal 5-HT₄
14 receptor density has been reported in post-mortem brain samples of patients with major
15 depression (Rosel *et al.* 2004). Finally, it has been recently reported that several 5-HT₄
16 receptor agonists show antidepressant-like effects in some acute and chronic animal models of
17 depression (Lucas *et al.* 2007). Nevertheless, the information about modulation of 5-HT₄
18 receptors by antidepressants is still very limited.

19 In keeping with these observations it is not unlikely that some adaptive changes in 5-HT₄
20 receptors following chronic antidepressants drugs may occur. In the present study we have
21 aimed to evaluate the effect of chronic treatment with the SSRIs fluoxetine at three different
22 levels of 5-HT₄ receptor function (receptor number, regulation of adenylate cyclase activity
23 and receptor functionality in rat brain).

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1 **Materials and Methods**

2 **Animals.** Male Wistar rats weighing 200-250g were group-housed and maintained on 12/12h
3 light/dark cycle, with access to food and water *ad libitum*. All experimental procedures were
4 done according to the Spanish legislation and the European Communities Council Directive
5 on “Protection of Animals Used in Experimental and Other Scientific Purposes”
6 (86/609/EEC).

7 **Drug treatments.** Rats were treated by oral administration (p.o.) with saline or two doses of
8 fluoxetine (5 and 10 mg/kg/day) once a day for 21 days. Six to thirteen animals per group
9 were tested depending on experimental procedures. Drugs were administered at the same time
10 each day, between 11 -12 hours a.m. The animals were killed twenty-four hours after the last
11 administration for all the experimental procedures. For autoradiographic and adenylate
12 cyclase assays the brains were rapidly removed, frozen immediately in isopentane and then
13 stored at -80°C until use.

14 **[³H]GR113808 autoradiography.** For autoradiographic experiments, coronal sections of 20
15 µm thickness were cut at -20°C using a microtome cryostat and thaw-mounted in gelatinized
16 slides and stored at -20°C until use. 5-HT₄ receptor autoradiography was carried out as
17 previously described by Waebber (Waebber *et al.* 1994). The sections were preincubated at
18 room temperature for 15 min in 50 mM Tris-HCl buffer (pH=7.5) containing CaCl₂ 4 mM and
19 ascorbic acid (0.1%). Two sections were then incubated, at room temperature for 30 min, in
20 the same buffer with 0.2 nM of the selective 5-HT₄ antagonist [³H]GR113808. In other
21 consecutive section non-specific binding was determined using 10 µM 5-hydroxytryptamine
22 (5-HT). Following incubation, sections were washed for 30 s. in ice-cold buffer, briefly
23 dipped in deionized water at 4°C, and then cold air-dried. Autoradiograms were generated by
24 apposing the slides to Biomax MR (Kodak, Madrid, Spain) with tritium labeled standards for
25 6 months at 4°C.

1 **Adenylate cyclase assay.** Frozen brain striata were homogenized (1:120 W/V) in ice cold
2 buffer I, containing 20 mM Tris-HCl, 5 mM EGTA, 2 mM EDTA, 0.32M sucrose, 1 mM
3 DTT, 25 µg/ml leupeptin, pH=7.4 and centrifuged at 500 x g for 5 min at 4°C. The
4 supernatants were pelleted 13,000 x g for 15 min at 4°C and resuspended in 20 mM Tris-HCl,
5 1.2 mM EGTA, 0.25 M sucrose, 6 mM Cl₂ Mg, 3 mM DTT, 25 µg/ml leupeptin. The
6 membranes were used immediately after preparation.

7 Membrane suspensions were pre-incubated for 15 min on ice in reaction buffer (75 mM Tris-
8 HCl pH=7.4, 5 mM MgCl₂, 0.3 mM EGTA, 60 mM sucrose, 1 mM DTT, 0.5 mM 3-
9 isobutylmethylxanthine, 5 mM phosphocreatine, 50 U/ml creatine phosphokinase and 5 U/ml
10 myokinase) and 25 µl of either water (basal activity), 10⁻⁵ M GTPγS or zacopride (10⁻³ M- 10⁻⁷
11 M). The reaction was started by the addition of 0.2 mM Mg-ATP and incubated at 37°C for
12 10 min. The reaction was stopped by boiling the samples in water for 4 min and then
13 centrifuged at 13,000 x g for 5 min at 4°C. cAMP accumulation was quantified in 50 µl
14 supernatant aliquots by using a [³H]cAMP commercial kit, based on the competition of a
15 fixed amount of [³H]cAMP and the unlabelled form of cAMP for a specific protein, achieving
16 the separation of protein-bound nucleotide by adsorption on coated charcoal. (TRK 432,
17 Amersham Pharmacia Biotech U.K. Limited, Buckinghamshire, England). Membrane protein
18 concentrations were determined using the Bio-Rad Protein Assay Kit (Bio-Rad, Munich,
19 Germany) using γ-globulin as the standard.

20 **Hippocampal slice preparation and extracellular recording.** After decapitation, the brain
21 was quickly removed and placed in an artificial cerebrospinal fluid (ACSF) consisting of 124
22 mM NaCl, 3 mM KCl, 1.25 mM NaH₂PO₄, 1 mM MgSO₄, 2 mM CaCl₂, 26 mM NaHCO₃ and
23 10 mM glucose. Transverse slices of 400 µm-thick from hippocampus were obtained using a
24 tissue slicer and were left to recover in ACSF for 1h. A single slice was transferred to a
25 recording chamber and continuously superfused at a rate of 1 ml/min with ACSF saturated

1 with 95% O₂ 5% CO₂ and maintained at 30°C. For extracellular recording of population
2 spikes, a glass microelectrode filled with 3 M NaCl (1 - 4 mΩ) was positioned in the stratum
3 pyramidal of the CA1 area. A bipolar, tungsten electrode was placed in the stratum radiatum
4 for stimulation of the Schaffer collateral-commissural pathway. Pulses of 0.05 ms duration
5 were applied at a rate of 0.05 Hz. The population spike signals were amplified, bandpass-
6 filtered (1Hz-1kHz) and stored in a computer using the Spike 2 program (Spike2, Cambridge
7 Electronic Design, Cambridge, UK). On the basis of others studies (Tokarski and Bijak 1996;
8 Bijak *et al.* 1997) half-maximum stimulation intensity was chosen to evaluate the effect of
9 zacopride. After stabilization of the baseline response for at least 1 h (defined as no more than
10 10% variation in the median amplitude of the population spike or stable membrane potential),
11 the slice was superfused for 10 min with different concentrations of zacopride alone or in the
12 presence of the selective 5-HT₄ antagonist DAU 6285. Each slice in the extracellular
13 recording was treated as an independent sample.

14 **Data analysis and statistics.** Autoradiograms were analyzed and quantified using a
15 computerized image analysis system (Scion Image, Scion Corporation, Maryland, USA). In
16 electrophysiological records, the effect of zacopride is expressed as mean (± SEM) percentage
17 change of the baseline (predrug). Emax and ED₅₀ values in both adenylyl cyclase assays and
18 electrophysiological recordings were calculated using the program GraphPad Prism program
19 (GraphPad Software 1998). The statistical analysis of the results was performed using One-
20 way ANOVA followed by *post hoc* comparisons (Student Newman-Keuls test).

21 Drugs. [³H]GR113808 (specific activity 83 Ci/mmol) was purchased from Amersham
22 (England), DAU 6285 was generously donated by Boehringer-Ingelheim Pharma GmbH &
23 Co. KG (Germany) and fluoxetine-HCl was kindly donated by FAES FARMA S.A. (Lejona,
24 Spain).

1 5-Hydroxytryptamine chlorhydrate was purchased from Sigma-Aldrich (Madrid, Spain). 4-
2 amino-5-chloro-2-methoxy-substituted benzamide (R,S) zacopride (zacopride) was obtained
3 from RBI (Madrid, Spain). All other chemicals used were analytical grade. Fluoxetine was
4 dissolved in saline (0.9%) and given by oral administration (p.o.) in a volume of 5 ml/kg body
5 weight.

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7 **Results**

8 **Effect of chronic fluoxetine on the density of 5-HT₄ receptors.** 5-HT₄ receptor binding
9 sites were labeled with the selective 5-HT₄ receptor antagonist [³H]GR113808 at a
10 concentration close to the K_d value (0.2 nM). Autoradiogram of [³H]GR113808 binding in
11 vehicle and fluoxetine-treated rats at different rostral-caudal levels are shown in Figure 1.
12 Basal ganglia and hippocampal formation showed the highest levels of 5-HT₄ receptors in rat
13 brain (Table 1 and figure 1A) whereas medial prefrontal cortex exhibited moderate densities
14 of this receptor as previously reported (Vilaró *et al.* 1996). In rats treated with 10 mg/kg of
15 fluoxetine a significant decrease in the density of specific [³H]GR113808 binding was
16 observed in caudate-putamen (% red = 16.0 ± 3.7), ventral pallidum (% red = 21.1 ± 3.5),
17 CA1 field of hippocampus (% red = 38.5 ± 6.3) and substantia nigra (% red = 58.5 ± 2.4)
18 (Figure 1C). At the low dose of fluoxetine (5 mg/kg) a significant decrease in 5-HT₄ receptor
19 density, compared to vehicle-treated rats, was only observed in caudate-putamen (% red
20 $\text{mean} \pm \text{s.e.m} = 13.0 \pm 2.6 \%$; $p < 0.05$). In contrast, chronic fluoxetine did not significantly alter the
21 specific [³H]GR113808 binding of 5-HT₄ receptors in the medial prefrontal cortex at any dose
22 assayed, although a tendency to the decrease was observed (Table 1).

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1 **Effect of chronic fluoxetine in zacopride-induced cAMP accumulation in rat striatum**

2 A slight tendency to the increase in basal cAMP levels (pmol/min/mg protein) in rat striatum
3 homogenate membranes (11.7 ± 1.6 for vehicle, 12.4 ± 3.4 for fluoxetine 5 mg/kg and $22.7 \pm$
4 3.7 for fluoxetine 10 mg/kg) was observed, although it only reached statistical significance
5 ($p < 0.01$) for the 10 mg/kg dose. In the vehicle group the incubation with zacopride resulted
6 in a concentration-dependent increase of cAMP production yielding an $E_{max} = 141.8 \pm 3 \%$
7 stimulation. Figure 2 shows the effect of two doses of chronic fluoxetine on zacopride-
8 induced accumulation of cAMP in rat striatum. Repeated fluoxetine induced an attenuation in
9 zacopride-stimulated cAMP accumulation in homogenate membranes reaching the statistical
10 significance only at the dose of 10 mg/kg/day ($E_{max} = 28.0 \pm 3.4 \%$ stimulation; $p < 0.05$)
11 with no changes on potency ($pEC_{50} = 6.1 \pm 0.2$ vs $pEC_{50} = 5.4 \pm 0.2$ for vehicle and fluoxetine
12 group, respectively).

14 **Effect of chronic fluoxetine on population spikes of CA1 field**

15 The application of zacopride increases the population spike amplitude in the hippocampal
16 CA1 field evoked by Schaffer collateral stimulation. As shown in figure 3A, the excitatory
17 effect of zacopride was concentration-dependent with an $E_{max} = 205.2 \pm 13.5 \%$ change
18 (considering the basal amplitude value as 100%) and $pEC_{50} = 5.7 \pm 0.2$. As illustrated in figure
19 3B, this stimulation was significantly reduced by pre-perfusion with the selective 5-HT₄
20 antagonist DAU 6285 (5 μ M) following a competitive pattern of antagonism. This shows the
21 pharmacological specificity of this response. Two concentrations of zacopride (1 and 10 μ M),
22 around to its EC_{50} value, were chosen for chronic studies. For both concentrations of
23 zacopride, a significant decrease in the excitatory action of zacopride was observed after 5
24 mg/kg of fluoxetine administration. This decrease was less pronounced with the higher dose
25 of SSRI (Figure 3B and Figure 4).

1 **Discussion**

2 Antidepressant treatments affect the serotonergic system in the brain by inducing adaptive
3 changes in various 5-HT receptors subtypes (see Adell *et al.* 2005; Schechter *et al.* 2005). In
4 the present work we have investigated the effect of repeated treatment with fluoxetine in the
5 regulation of 5-HT₄ receptor-dependent signaling pathway. The main finding of this study is
6 that chronic treatment with the antidepressant selectively decreased the density of 5-HT₄
7 receptors and resulted in both attenuated 5-HT₄ receptor-mediated adenylyl cyclase activity
8 and 5-HT₄-dependent neuronal excitability of CA1 neurons.

9 In order to evaluate the responses mediated by the stimulation of 5-HT₄ receptors we have
10 used the 5-HT₄ receptor agonist zacopride (Bockaert *et al.* 2004) since it has shown good
11 affinity for this receptor subtype. In addition, the few studies available focused on the
12 functionality of 5-HT₄ receptors suggests that this agonist represent an adequate
13 pharmacological tool (Bijak *et al.* 1997; Bijak *et al.* 2001). In the present study the potency of
14 the 5-HT₄ agonist in both, stimulation of adenylyl cyclase system and amplitude of
15 population spike assays, is around 1-2 μ M. Although this potency is lower than that reported
16 in binding assays (Wong *et al.* 1996), it is noteworthy that it is quite similar to the one
17 previously reported in studies analyzing the excitatory action of zacopride on population
18 spikes (Bijak *et al.* 1997; Bijak *et al.* 2001). On the other hand, this is the first time that
19 adenylyl cyclase activation mediated by 5-HT₄ receptors in native tissue has been
20 demonstrated: it is well established that the potency of agonists of different systems to induce
21 modifications in adenylyl cyclase activation is significantly lower than the radiometric
22 affinity (Mato *et al.* 2002).

23 Our autoradiographic data show a significant decrease of striatal and hippocampal 5-HT₄
24 receptors density after repeated administration with the SSRI. To our knowledge, this is the
25 first study measuring the density of this receptor after chronic fluoxetine treatment. Indeed,

1 only one study has previously addressed the issue of antidepressants and 5-HT₄ receptor
2 density, reporting no significant changes in substantia nigra after chronic citalopram
3 administration (Gobbi *et al.* 1997) without any information about other brain areas. The
4 apparent discrepancy between our data (down-regulation) and those previously reported by
5 Gobbi (Gobbi *et al.* 1997) in substantia nigra may be related with the type of antidepressant
6 (citalopram), the length of the treatment (14 vs 21 days), the route of administration (i.p. vs
7 p.o.) or the radioligand ([¹²⁵I]SB207710) used to quantify the receptor density. In contrast
8 with the clear reduction observed in striatum and hippocampus, the modifications in the
9 density of 5-HT₄ receptors in medial prefrontal cortex after chronic fluoxetine did not reach
10 statistical significance. This difference could be of relevance, since it has been described that
11 cortical 5-HT₄ receptors may induce an increase in raphe nuclei 5-HT cell firing (Lucas and
12 Debonnel 2002; Lucas *et al.* 2005): thus, a normosensitivity of cortical 5-HT₄ receptors could
13 facilitate an antidepressant action. Anyway, it seems likely that the 5-HT₄ receptor down-
14 regulation here reported may occur secondary to the antidepressant-induced increase of 5-HT
15 within the synaptic cleft. Furthermore, in line with our results, an up-regulation of 5-HT₄
16 receptors has been described in depressed suicide victims, particularly in striatum and frontal
17 cortex (Rosel *et al.* 2004). Thus, our results suggest that a down-regulation of 5-HT₄ receptors
18 induced by antidepressant may be a relevant therapeutic mechanism.

19 It has been proposed that the molecular basis of antidepressant action could be related to
20 changes in the postreceptorial elements involved in cAMP production, such as alterations in
21 the coupling between G proteins and the catalytic unit of adenylate cyclase (Donati and
22 Rasenick 2003). In this regard, our group has observed an increase in basal cAMP levels after
23 chronic fluoxetine-treatment in different brain regions such as hippocampus (Valdizán *et al.*
24 2002) and striatum (present study). This sensitization of adenylate cyclase might represent a
25 cellular adaptive response to the chronic modification of neurotransmitter levels. The

1 mechanism by which chronic antidepressants treatment alters basal cAMP values is currently
2 under discussion. It has been suggested that some antidepressant facilitate the activation of
3 adenylate cyclase by G_s (Chen and Rasenick 1995; Donati and Reasenick 2003) without
4 changes in the amount of G-proteins (Chen and Rasenick 1995). A differential regulation of
5 each AC isoform by G_{αs} protein subunits has also been implicated in the heterologous
6 sensitization process (Watts 2002). Further studies should be carried out in order to clarify the
7 exact role of basal cAMP in long-term administration with antidepressants. Although a direct
8 relationship between the increased endogenous 5-HT tone on 5-HT₄ receptors and the cAMP-
9 related molecular changes could be suggested, the modifications in the functionality of many
10 other receptor subtypes following chronic antidepressants could be involved in the regulation
11 of basal cAMP levels.

12 We have found that repeated treatment with fluoxetine causes a dose-dependent decrease in
13 zacopride-stimulated cyclic AMP accumulation (E_{max} value). As previously reported for
14 other 5-HT receptors, it is possible that the functional desensitization in 5-HT₄ receptors may
15 be due to a change in G-protein level. Nevertheless, the data available in the literature about
16 the regulation of G proteins by antidepressants have reported contradictory results. Several
17 studies have reported a decrease in G_{αs} protein after repeated administration of
18 antidepressants (Lesch *et al.* 1991; Lesch *et al.* 1992) and electroconvulsive therapy
19 (McGowan *et al.* 1996) in different areas of rat brain, although other studies have not
20 confirmed these findings (Chen and Rasenick 1995; Emamghoreishi *et al.* 1996; Dwivedi and
21 Pandey 1997); these differences may be due either the class of antidepressant or the duration
22 of treatment. However, since it is well known that G_s proteins are coupled to 5-HT₄ receptor
23 (see Barnes and Sharp 1999; Hoyer *et al.* 2002), the possibility that a modification in G_S
24 expression contribute to this effect could not be ruled out. Fluoxetine-induced down
25 regulation of 5-HT₄ receptor-mediated cAMP stimulation could well be the consequence of a

1 change in the coupling of the receptor to G-proteins, or in the modulation of a particular
2 enzyme isoform (Watts 2002).

3 Several lines of evidence suggest that, in addition to other brain structures, the hippocampus
4 play a relevant role in the mechanism of action of antidepressant drugs: the proposed
5 relationship between antidepressants' responses and neurogenetic inputs strongly reinforces
6 the role of hippocampus in the mediation of their effects (see Fujita *et al.* 2000; Schmidt and
7 Duman 2007). Focusing on 5-HT neurotransmission, *ex vivo* electrophysiological studies
8 have shown that endogenous 5-HT-mediated synaptic transmission in CA1 field of
9 hippocampus is mediated by, at least, two 5-HT receptor subtypes: 5-HT_{1A} and 5-HT₄
10 receptors that exerts opposite effects on neuronal excitability (Mongeau *et al.* 1997). Our
11 results indicate that chronic fluoxetine modify the sensitivity of postsynaptic 5-HT₄ receptors
12 in the hippocampus as resulted in an attenuation of zacopride-induced increase of the
13 amplitude of population spike. It is known that fluoxetine is a potent blocker of voltage-gated
14 Ca²⁺ channels (Deak *et al.* 2000), Na⁺ channels (Pancrazio *et al.* 1998) and K⁺ channels
15 (Yeung *et al.* 1999). However, it is unlikely that under our experimental conditions fluoxetine
16 exert any effect in the electrical activity of CA1 pyramidal cells since the slices had been
17 washed-out thoroughly for 90 min. The apparent decrease in sensitivity of postsynaptic
18 hippocampal 5-HT₄ receptors induced by long-term administration of fluoxetine is also in
19 agreement with the results of others groups (Tokarski and Bijak 1996; Bijak *et al.* 1997), who
20 found a decrease in the response of CA1 pyramidal cells forebrain after administration of
21 citalopram, paroxetine or imipramine for 14 days. The mechanism by which long-term
22 antidepressants induce desensitization of the responsiveness of 5-HT₄ receptors in CA1 area
23 may be complex, but is conceivable to involve increased levels of extracellular 5-HT.
24 Nevertheless, it has been reported that forskolin, a direct activator of cAMP, also produce an
25 increase in population spike and this effect is decreased after the administration of the

1 tricyclic imipramine (14 days, twice daily, 10 mg/kg) (Bijak 1997). Taking in account this
2 observation, it seems likely that the functional desensitization of 5-HT₄ receptors by
3 antidepressants on the membrane excitability observed in this report may implicate a
4 mechanism involving adenylate cyclase system. In fact, the effects observed with the
5 antidepressants in CA1 neurons excitability are correlated with those previously described in
6 striatum membranes, thus pointing out that a possible desensitization of cAMP effector
7 systems also taking place in hippocampus. Nevertheless, it is necessary to remark that caution
8 is needed when extrapolating data from the striatum to the hippocampus, since different
9 adenylate cyclase isoforms could be expressed depending on the brain area analyzed (see
10 Hanoune and Defer 2001). It is possible that the desensitization in zacopride-mediated
11 stimulation of population spike could be a direct consequence of the decrease in 5-HT₄
12 receptor density in hippocampus.

13 Our results have to be also analyzed with regard to the recent report of an antidepressant
14 response for 5-HT₄ agonists. Short-term administration of these agonists could in fact result in
15 a desensitization of 5-HT₄ receptors, similar to the one reported in this study following
16 fluoxetine administration, although with an accelerated pattern of development. In this regard,
17 it is noteworthy that a 3 days exposure to the selective 5-HT₄ receptor agonist RS67333
18 induces a rapid desensitization of 5-HT_{1A} autoreceptors in dorsal raphe nucleus (Lucas *et al.*
19 2007). Thus, the recent data suggesting a rapid antidepressant response induced by 5-HT₄
20 agonists, involving activation of hippocampal plasticity (Lucas *et al.* 2007) strongly support
21 the relevance of our results.

22 In conclusion, the results of this study indicate that long-term fluoxetine administration
23 produces important biological and physiological changes in 5-HT₄ receptors: down-regulates
24 the density of 5-HT₄ receptors, reduces their ability to stimulate the activity of adenylate
25 cyclase and produces a functional desensitization. All these findings provide strong evidence

1 for 5-HT₄ receptors playing a relevant role for the mechanism of action of SSRIs reuptake
2 inhibitors, contributing to the mediation of their clinical effects.

3

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20

1 **Tables**

2

3 **Table 1.** Effect of chronic fluoxetine on the specific [³H]GR113808 binding in rat brain. Data
 4 are expressed in Bound (fmol/mg tissue).

Region	Vehicle (n=13)	Fluoxetine (5 mg/kg/day) (n=7)	Fluoxetine (10 mg/kg/day) (n=6)
mPFCx	13.6 ± 1.0	11.6 ± 0.4	12.7 ± 0.3
Caudate-putamen	18.8 ± 0.7	16.3 ± 0.5*	15.8 ± 0.7*
VP	18.8 ± 0.8	16.3 ± 0.3	14.8 ± 0.7**
CA1, hippocampus	15.1 ± 0.8	14.2 ± 0.8	9.3 ± 0.9*
SN	15.1 ± 1.0	14.9 ± 0.8	6.3 ± 0.4**

5

6 Coronal sections of rat brain were incubated with [³H]GR113808 (0.2 nM) and non-specific
 7 binding was defined in the presence of 10 M μ5-HT. Specific binding is expressed as fmol/mg
 8 tissue and the data are the mean ±S.E.M. **p*< 0.05; ***p*< 0.01. One-way ANOVA followed
 9 by Student Newman-Keuls test. mPFCx: medial prefrontal cortex; GP: globus pallidus; SN:
 10 substantia nigra. Between brackets: number of rats per group.

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1 **Titles and legends to figures**

2

3 **Figure 1.** Representative autoradiograms of [³H]GR113808 binding in rats chronically treated
4 with vehicle (A, A'), fluoxetine 5 mg/kg (B, B') and fluoxetine 10 mg/kg (C, C') at the levels
5 of basal ganglia (left) and hippocampus (right). CP: caudate-putamen; VP: ventral pallidum
6 and CA1: CA1 field of hippocampus. Bar = 2 mm

7

8 **Figure 2.** Effect of increasing concentrations of zacopride on cAMP levels (expressed as
9 mean ± SEM of the percentage of increase over the basal) in striatum membranes from
10 vehicle and fluoxetine-treated rats. Six rats per experimental group were included. **p* < 0.05
11 significantly different from vehicle by Student Newman-Keuls *post hoc* test.

12

13 **Figure 3.** A. Dose-response curve of the zacopride-induced stimulation of population spike
14 recorded in pyramidal cells of hippocampal slices (n=7 rats). A population spike which was
15 50% of the maximum amplitude was chosen. B. Administration of zacopride mediated
16 stimulation of population spike in the presence of DAU6285 (5 μM) to block 5-HT₄ receptors
17 (n = 4 rats). C. Effect of chronic SSRI on the stimulatory action of zacopride on population
18 spike in rats treated with vehicle (n=8), fluoxetine (10 mg/kg, n=9) and fluoxetine (5
19 mg/kg/day; n=7). +*p* < 0.05; ++*p* < 0.01 from zacopride stimulations (Student t-test paired
20 data) and ***p* < 0.01 from vehicle treated group (One-way anova and Student Newman-Keuls
21 *post hoc* test).

22

23 **Figure 4.** Representative electrophysiological recordings of pyramidal cells during the
24 perfusion of 10 μM of zacopride after stimulation of the Schaffer collateral-commissural
25 pathway in vehicle (A), fluoxetine 5 mg/kg (B) and fluoxetine 10 mg/kg (C) treated groups.