

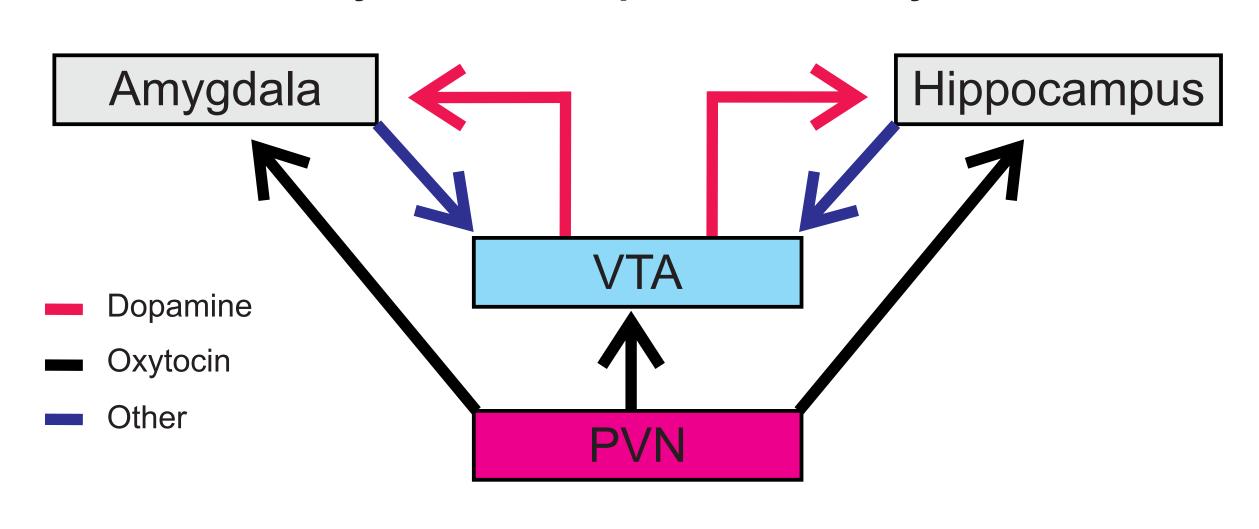
Pharmacological and Deep Brain Stimulation Treatments in a Rodent Model of Post-Traumatic Stress Disorder Eric Janezic¹, Ryan LaHood², David A. Stidd³, Jean-Philippe Langevin⁴, Edward French⁵, and Jean-Marc Fellous⁶ 543.3 543.25/ II5

1: Program in Neuroscience, University of Arizona, Tucson AZ - 2: Program in Molecular and Cellular Biology, University of Arizona, Tucson AZ - 3: Division of Neurosurgery, University of Arizona, Tucson AZ -4: Department of Neurosurgery, University of California, Los Angeles CA - 5: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Program in Applied Mathematics, University of Arizona, Tucson AZ - 6: Department of Psychology and Ps

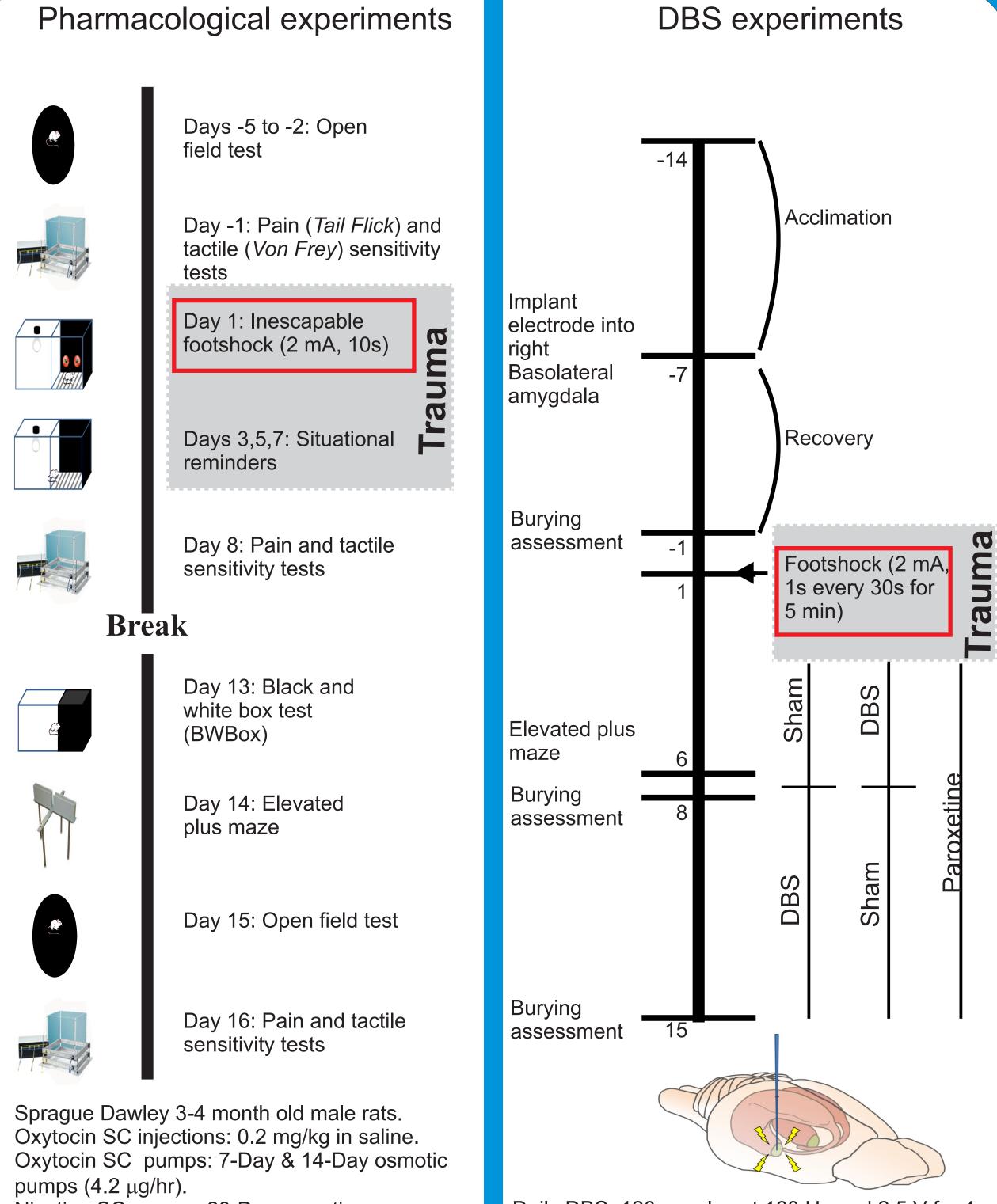
1. Introduction

- Post-Traumatic Stress Disorder (PTSD) has a lifetime prevalence of about 7.8% (Kessler et. al., 1995). • SSRIs are the most commonly prescribed drug treatments
- for PTSD with a full remission rate of 20-30% (Berger et. al., 2009).
- Deregulation of the amygdala (Liberzon and Sripada, 2007) and decreases in baseline dopamine (Corral-Frias et. al., 2013) have been identified as neurophysiological changes in animal models of PTSD.
- Oxytocin (OXT) has been shown to reduce baseline anxiety in fear-potentiated startle paradigms (Missig e.t al., 2010).
- Nicotine (NIC) and OXT are known to interact with the dopaminergic system (Yin and French, 2000; Baskerville et. al., 2010).
- Deep Brain Stimulation (DBS) has emerged as a viable treatment for diseases such as depression in humans and has been shown effective in a rodent model of PTSD (Langevin, et. al., 2010).

Oxytocin and Dopamine Pathways



2. Methods



Daily DBS: 120µs pulse at 160 Hz and 2.5 V for 4 Paroxetine (PRX): 5 mg/kg IP

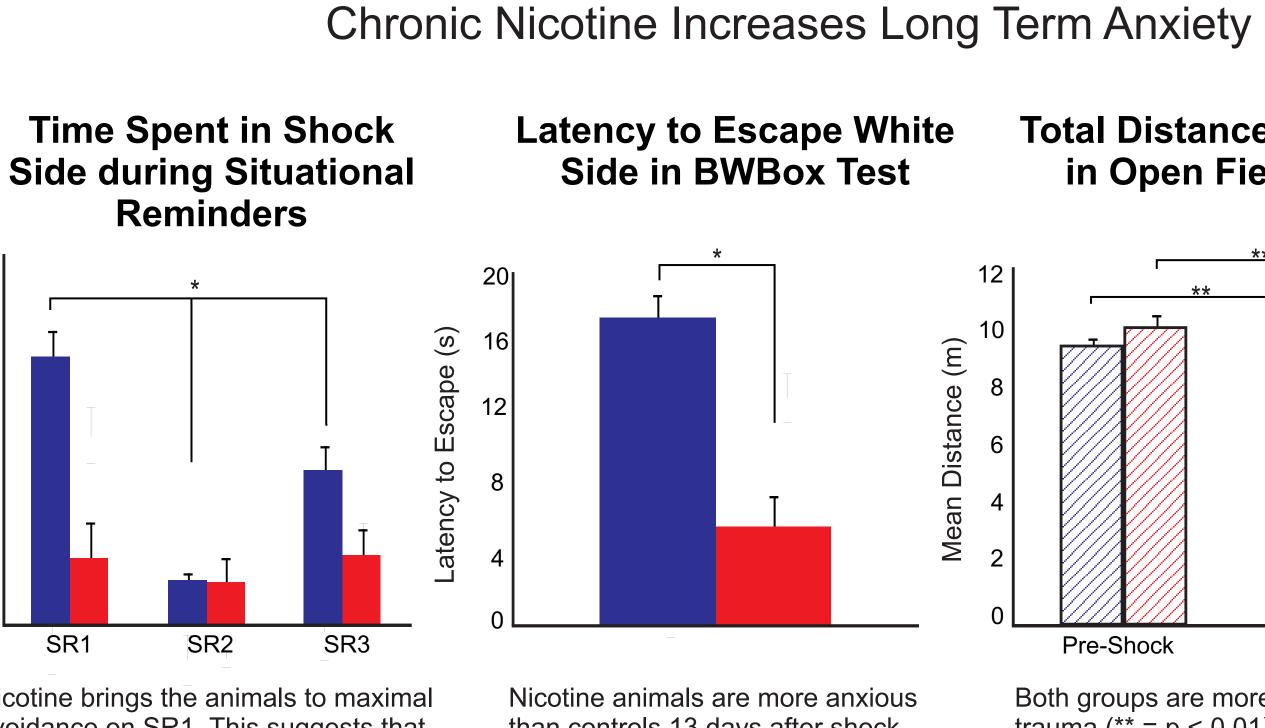
spent ir 120 s) <u>ب</u> 20% 00 vig



Nicotine SC pumps: 28-Day osmotic pumps (0.02µl/hour). hours All controls were the Saline (Sal) equivalent.

3. Results

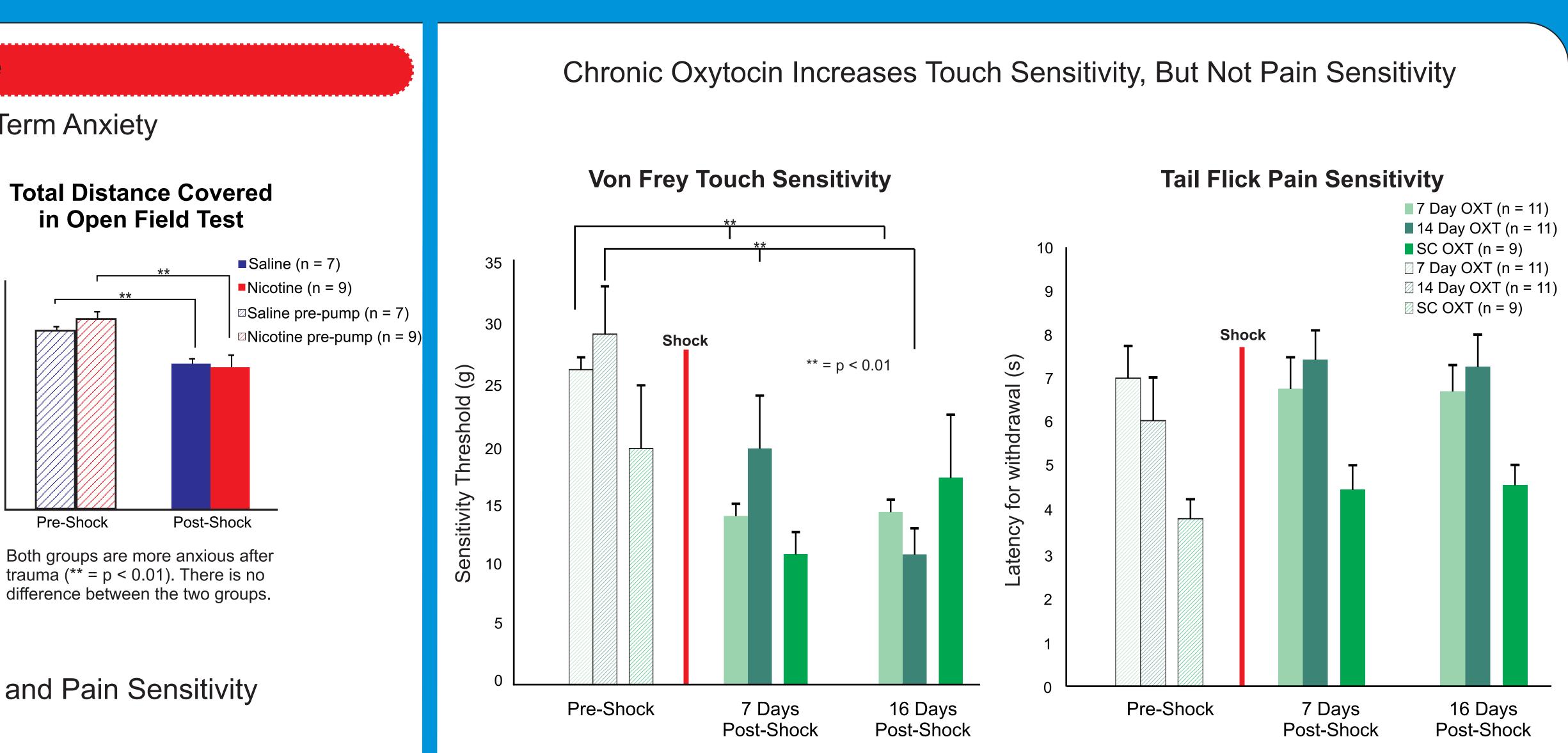
A. Effect of Nicotine



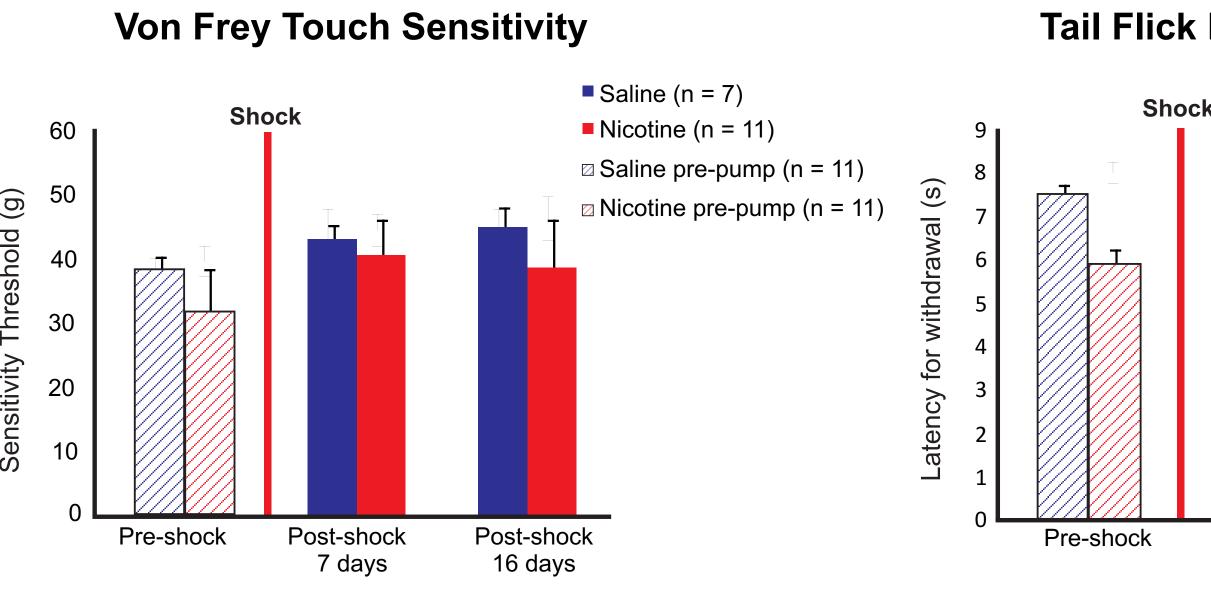
voidance on SR1. This suggests that nicotine increases sensitivity to context (* = p < 0.05).

than controls 13 days after shock (* = p < 0.05).

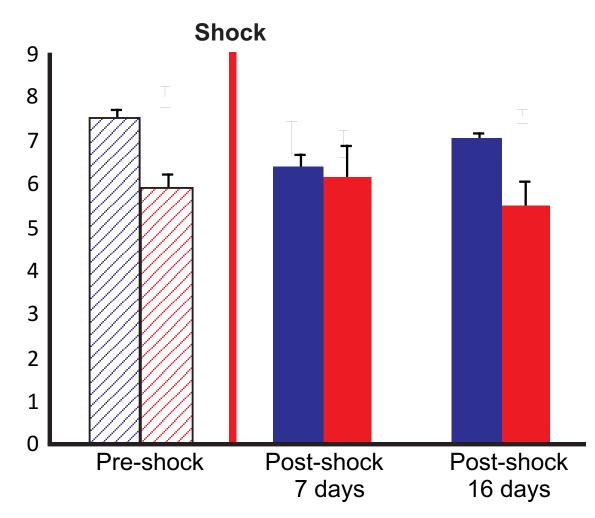
in Open Field Test



Chronic Nicotine Does Not Affect Touch and Pain Sensitivity

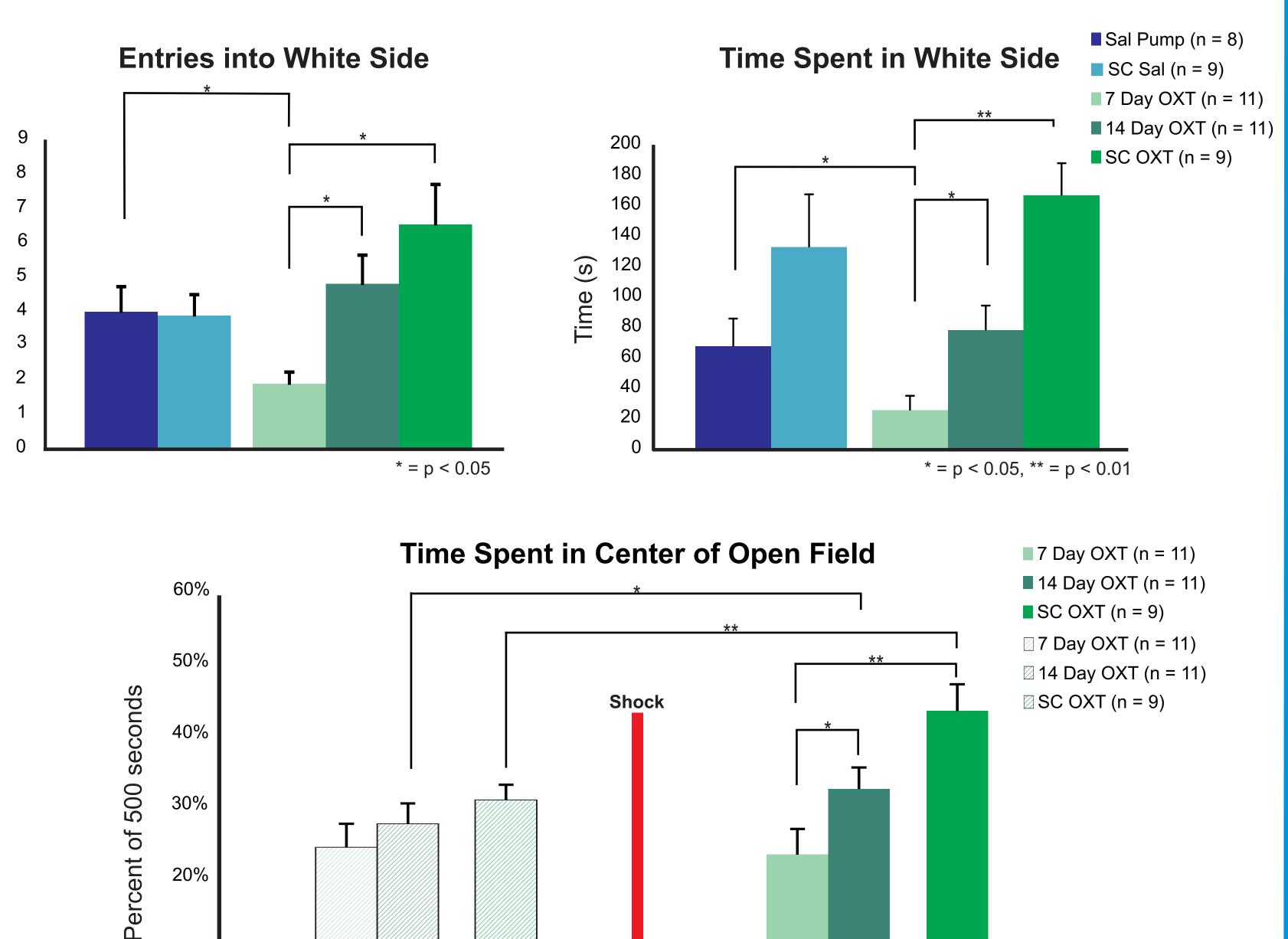


Tail Flick Pain Sensitivity



B. Effect of Oxytocin

7-Day Chronic Oxytocin Administration Increases Anxiety in BWBox Test



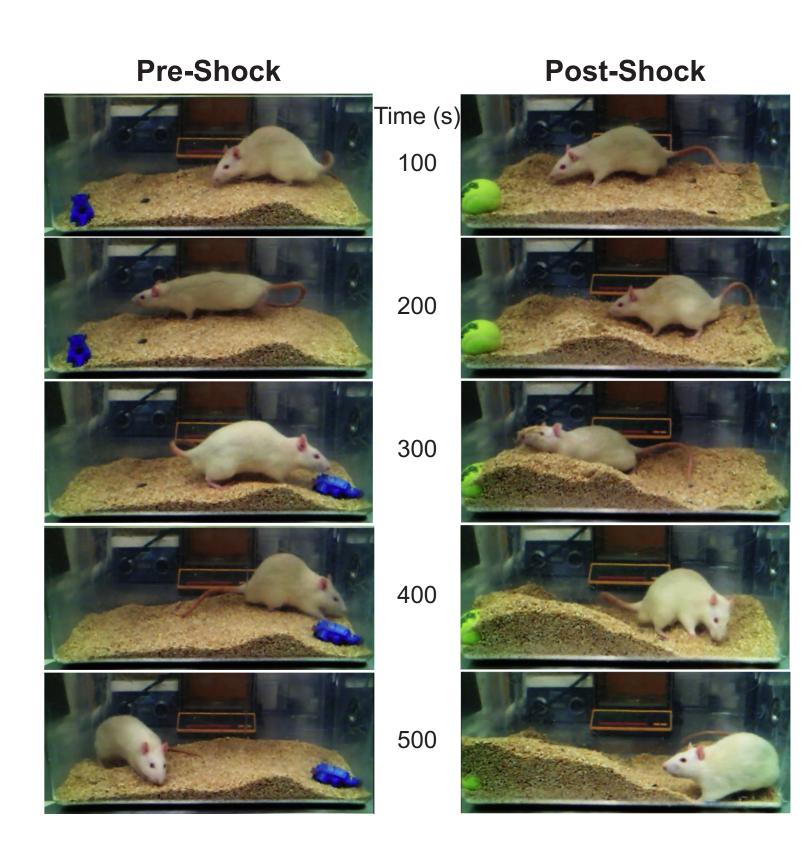
Acute administration of OXT immediately after reactivation of the traumatic context may block memory consolidation, and decrease long term anxiety. Chronic OXT post trauma but not during trauma reduces anxiety (* = p < 0.05, ** = p < 0.01).

Post-Shock

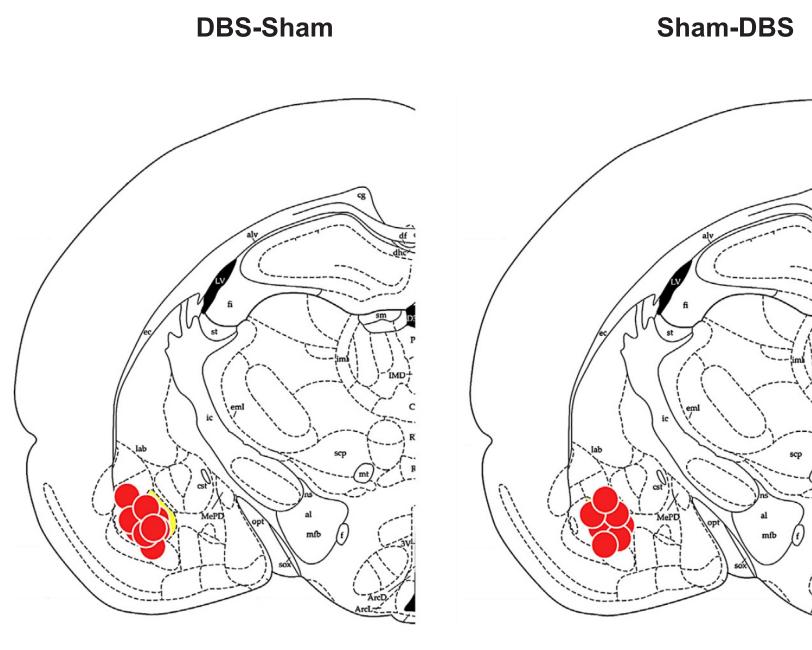
Pre-Shock

C. Effect of DBS of the Amygdala

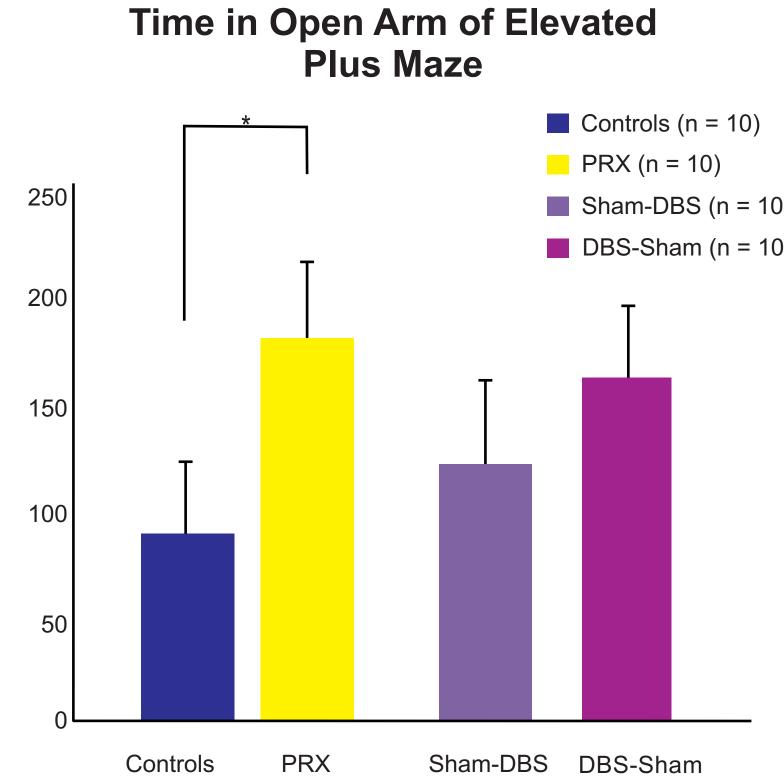
Time-lapse of Ball-Burying Behavior



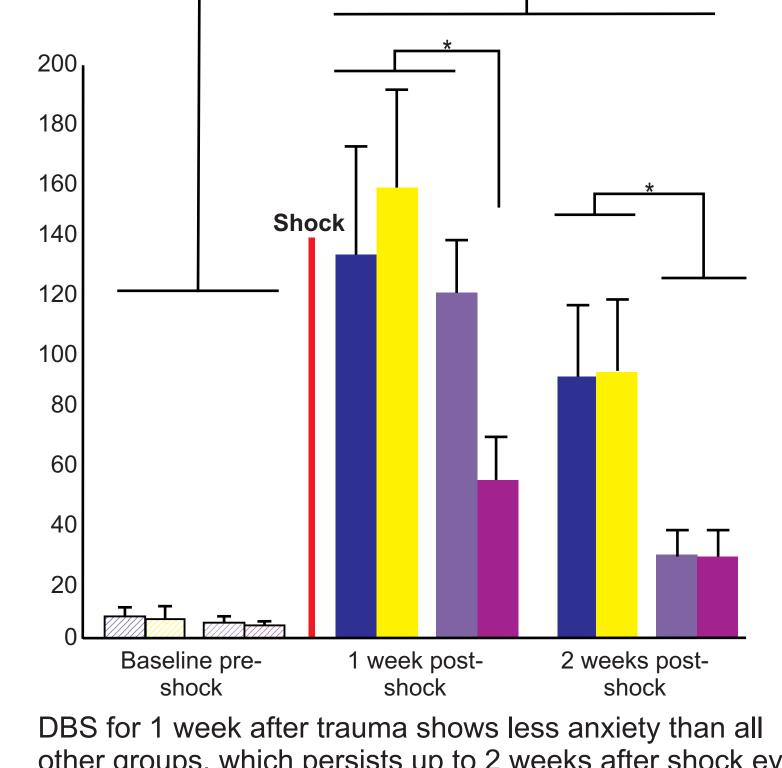
Left: In control conditions, rats do not bury a novel object. Right: After shock, rats bury the item that was present during trauma (Stidd et. al., 2013).



Histology shows that the electrodes were correctly placed in the right basolateral amygdala (Stidd et. al., 2013).



DBS does not affect general anxiety as shown by the elevated plus maze, but paroxetine does (* = p < p0.05, adapted from Stidd et. al. 2013).



other groups, which persists up to 2 weeks after shock even when DBS has stopped. DBS also reduces anxiety even when started one week after initial trauma (* = p < 0.05). Paroxetine is uneffective (Adapted from Stidd et. al., 2013).

Time Spent Burying Object

4. Conclusions

- Avoidance of the shock compartment is increased by chronic nicotine suggesting its possible role in memory consolidation.
- Chronic nicotine increases long term anxiety in the BWBox test but not in the open field test.
- Acute administration of OXT immediately after reactivation of the traumatic context may block memory consolidation, and decrease long term anxiety. Chronic OXT post trauma but not during trauma reduces anxiety.
- Chronic Oxytocin affects touch but not pain sensitivity.
- DBS immediately after trauma causes a lasting reduction in anxiety, even after DBS has ceased.
- The DBS effect can be delayed and still cause reduction in anxiety.
- DBS affects cue-related anxiety, while paroxetine affects general anxiety.

5. References

•Baskerville, T. A., & Douglas, A. J. (2010). Dopamine and oxytocin interactions underlying behaviors: potential contributions to behavioral disorders. CNS neuroscience & therapeutics, 16(3), e92-e123. •Berger, William, et al., "Pharmacologic Alternatives to Antidepressants in Post-Traumatic Stress Disorder: A Systematic Review." Progress in Neuro-psychopharmacology & Biological Psychiatry 33.2 (2009):169 •Corral-Frias, Nadia S., et al. "Involvement of the Ventral Tegmental Area in a Rodent Model of Post-Traumatic Stress Disorder." Neuropsychopharmacology (2012)

•Kessler RC, et al., "Post-Traumatic Stress Disorder in the National Comorbidity Survery." Arch Gen Psychiatry 52:1048-1060. (1995) •Langevin, Jean-Philippe, et al. "Deep brain stimulation of the amygdala alleviates post-traumatic stress

disorder symptoms in a rat model." Journal of psychiatric research 44.16 (2010): 1241-1245. •Liberzon, Israel, and Chandra Sekhar Sripada. "The functional neuroanatomy of PTSD: a critical review." Progress in brain research 167 (2007): 151-169.

•Missig et al. Oxytocin reduces background anxiety in fear-potentiated startle paradigm. *Neuropsychopharmacology* 2010; 35:2607-16

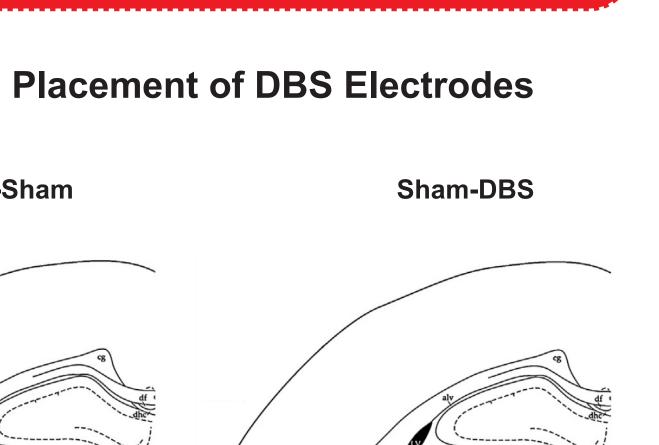
•Stidd, D. A., Vogelsang, K., Krahl, S. E., Langevin, J. P., & Fellous, J. M. (2013). Amygdala deep brain stimulation is superior to paroxetine treatment in a rat model of posttraumatic stress disorder. Brain

•Yin, R., & French, E. D. (2000). A comparison of the effects of nicotine on dopamine and non-dopamine neurons in the rat ventral tegmental area: an in vitro electrophysiological study. Brain research bulletin, 51(6), 507-514.

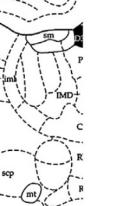
6. Acknowledgements

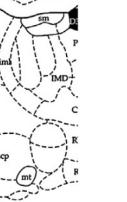
Thanks to the Fellous lab for helpful input and discussions. Funding in part by NSF grants 1117388 and 1010172, and the Undergraduate in Biology Research Program at the University of Arizona.

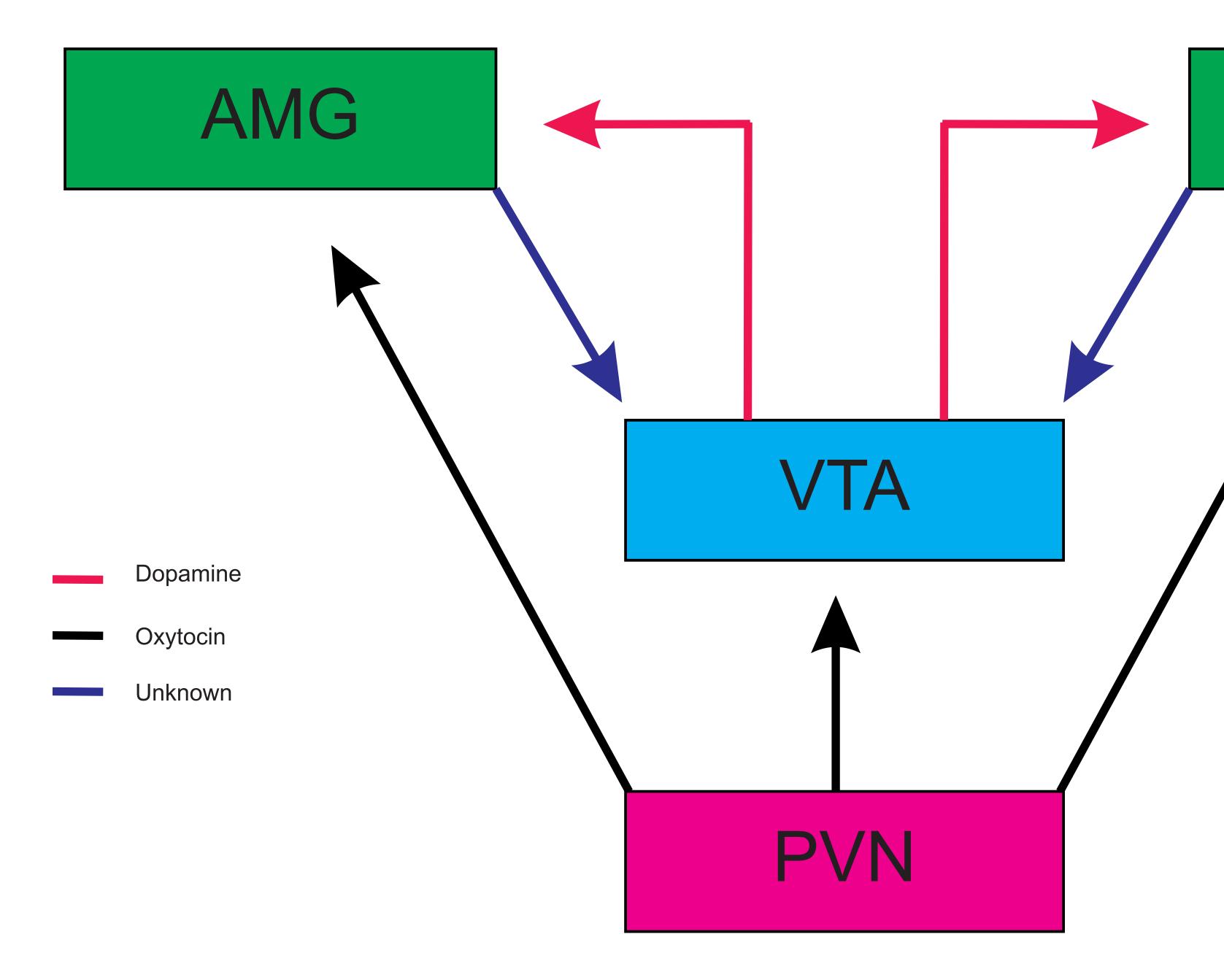
Contact Information: ejanezic@email.arizona.edu











HC

