

Effects of fluoxetine and PCPA on isolation-induced morphine self-administration and startle reactivity

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ABSTRACT

The present study investigated the effects of the SSRI fluoxetine and the serotonin synthesis blocker – parachlorophenylalanine (PCPA) on morphine self-administration and startle reactivity in rats subjected to social isolation during adulthood. Adult Wistar rats were housed individually or in pairs for 21 days. They were treated with fluoxetine, PCPA, or vehicle and tested for their startle response and intake of a morphine solution (0.5 mg/ml). Socially restricted rats consumed significantly more morphine solution (but not water) than rats living in pairs, in both one-bottle and in two-bottle tests. They also showed significantly higher startle response amplitude. Daily fluoxetine treatment (5 mg/kg i.p.) counteracted these behavioral alterations induced by isolation housing while PCPA treatment (200 mg/kg for 3 consecutive days) further exacerbated it. Social isolation may increase morphine self-administration and emotional reactivity in the startle box by affecting serotonin. Antidepressants (such as fluoxetine) may normalize or stabilize serotonin function and restore the behavioral changes produced by isolation.

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1. Introduction

Clinical studies in humans indicate that social stressors such as social isolation, lack of supporting social network, or antisocial personality disorder are risk factors for hypertension, coronary heart disease, poorer outcomes and increased mortality after life-threatening events, as well as for emotional disorders including stress, anxiety, depression and suicide attempts (Boden-Albala et al., 2005; Cacioppo and Hawkley, 2003; Duberstein et al., 2004; Hawthorne, 2008; Kessler, 1997; Mookadam and Arthur, 2004; Oetzel et al., 2007; Stockdale et al., 2007; Tennant, 1999). Moreover, social isolation is viewed as a major etiological factor in the development of compulsive drug abuse, more chronic and severe addiction, and higher rates of dropouts and relapse after withdrawal attempts (Compton et al., 2003, 2005; Darke et al., 2005; Dobkin et al., 2002; Oetzel et al., 2007; Pelissier and O'Neil, 2000; Stockdale et al., 2007; Westermeyer and Thuras, 2005). Such environmental and situational factors associated with drug use can interact with the behavioral, subjective, and rewarding effects of a given drug, thus influencing the propensity to use the same drug again (Caprioli et al., 2007). It follows that comprehensive laboratory models of drug seeking behavior should include these components.

Preventing rats from normal interaction and communication affects physiological and behavioral processes (Brain and Benton,

1979; Hall, 1998; Valzelli and Garattini, 1972). Many studies have focused on the long-term consequences of isolation at infancy or just before weaning (isolation rearing). In some studies rats were isolated during both weaning and adulthood (isolated housing) confounding whether the resultant behavioral changes could be attributed to isolated rearing, isolated housing or an interaction between these states. A relatively small number of studies have examined social isolation during adulthood (for review see Hall, 1998; Lu et al., 2003).

Individual housing increases aggression and interferes with the performance of a cooperation task in male rats (Byrd and Briner, 1999; Miachon et al., 2000; Rilke et al., 2001; Sanchez and Meier, 1997; Schuster et al., 1993; Swanson and Schuster, 1987; Vale and Montgomery, 1997; Valzelli, 1971; Willner et al., 1989; Wongwitdecha and Marsden, 1996). Rats housed individually tend to be more irritable, restless and hyperactive compared with rats housed in groups (Bakshi and Geyer, 1999; Domeney and Feldon, 1998; Wilkinson et al., 1994). They also show patterns of hypersensitivity, novelty-seeking, anxiety, stress and depressive-like behavior (Brenes et al., 2008; Brenes Saenz et al., 2008; Grippo et al., 2007; Hall et al., 1997; Nunes Mamede Rosa et al., 2005; Robbins, 1992; Serra et al., 2000; Sudakov et al., 2003; Weiss et al., 2004; Westenbroek et al., 2005; Whitaker-Azmitia et al., 2000; Willner, 1984). Isolation also affects physiological parameters such as: hyperfunction of the HPA axis, elevated levels of plasma corticosterone, heavier adrenal glands, increased heart rate, and hypertension (Gadek-Michalska et al., 1994; Grippo et al., 2007; Nagaraja and Jeganathan, 1999; Serra et al., 2000; Stranahan et al., 2006; Weiss et al., 2004; Westenbroek et al., 2005; Wright and Ingenito, 2003).

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Social isolation has also been shown to affect psychoactive drug self-administration, though the results of these studies are not consistent, perhaps due to variations in experimental design, drug delivery system, type of drug, dosage, etc (Caprioli et al., 2007). However, several studies have reported that exposure of rats to environmental and social stressors, correlate with enhanced tendency to consume psychostimulants, opiates and alcohol (for review see Lu et al., 2003; Stairs and Bardo, 2009). Morphine has been shown to be effective in reversing isolation effects on various behavioral and physiological parameters (Bardo et al., 1997; Hol et al., 1996; Jimenez and Fuentes, 1993; Sudakov et al., 2003; Van den Berg et al., 1999; Van den Berg et al., 2000). Several studies have shown that rats housed in isolation tend to consume higher amounts of morphine and other opiates compared with grouped housed rats (Alexander et al., 1978; Alexander et al., 1981; Heyne, 1996; Shaham et al., 1992). We have reported that adult rats housed in isolation self administer significantly higher amounts of morphine solution (but not water) compared with rats housed in pairs (Raz and Berger, 2010).

Social isolation is associated with alterations in multiple brain structures and functions, particularly with changes in serotonin function (Hall, 1998; Hall et al., 1998; Fone and Porkess, 2008; Robbins et al., 1996; Serra et al., 2007; Whitaker-Azmitia et al., 2000). In general, isolation-rearing and isolation-housing of rats has been found to decrease serotonin concentration, disrupt serotonin synthesis and release and alter serotonin turnover in prefrontal cortex, hippocampus and nucleus accumbens (Brenes et al., 2008; Brenes and Fornaguera, 2009; Dalley et al., 2002; Fone and Porkess, 2008; Hall, 1998; Hall et al., 1998; Heibreder et al., 2000; Jones et al., 1992; Muchimapura et al., 2002; Muchimapura et al., 2003; Parker and Morinan, 1986; Preece et al., 2004; Robbins et al., 1996; Segal et al., 1973; Whitaker-Azmitia et al., 2000). Further support, though indirect, for serotonergic changes subsequent to isolation-housing involve the ability of some antidepressant drugs especially those acting to enhance or to balance serotonin activity (i.e. fluoxetine, fluvoxamine, sertraline, femoxetine, anpirtoline, fluprazine and imipramine) to reverse isolation-induced aggression, sucrose consumption, immobility behavior, impaired coping, cognitive deficits, anxiety and cooperation deficits (Berger and Schuster, 1987; Brenes and Fornaguera, 2009; Greco et al., 1990; Heritch et al., 1990; Maissonette et al., 1993; Olivier et al., 1989; Ramanathan et al., 2003; Rilke et al., 2001; Ruedi-Bettschen et al., 2004; Sanchez and Hyttel, 1994; Sanchez and Meier, 1997; Willner, 1984).

Fluoxetine was the first selective serotonin re-uptake inhibitor to be widely available for treatment of depression and other neuropsychiatric disorders. It has been also suggested as a treatment for drug abuse and dependence though with mixed results.

In rats, fluoxetine has been found to change or reverse some of the neuronal and behavioral effects of morphine including: oral stereotypy (Wennemer and Kornetsky, 1999); morphine sensitization (Sills and Fletcher, 1997); and neuronal hyperactivity (Akaoka and Aston-Jones, 1993). However, while there is some evidence for the attenuating effect of fluoxetine on alcohol and cocaine self administration in rats (Glatz et al., 2002; Homberg et al., 2004; Le et al., 1999), there is, to our knowledge, no evidence for the effect of fluoxetine on opiates and especially on morphine self administration in socially isolated rats.

The aim of the present study is to further investigate the relationship between social isolation at adulthood, morphine self administration, startle response and drug manipulations that affect serotonin. Therefore, we examine the effect of the SSRI fluoxetine (Exp. 1) and of the serotonin synthesis blocker, parachlorophenylalanine (PCPA) (Exp. 2) on startle reactivity and morphine self-administration of isolation-housed vs. paired-housed rats. We hypothesize that fluoxetine would reduce startle response amplitude and intake of morphine solution self-administration and that PCPA would further enhance these behaviors in socially restricted rats.

2. Materials and methods

2.1. Subjects

Subjects were adult male Wistar rats (Harlan). Their age at the beginning of the experiments was 56 days and their average weight was 210 g. Throughout the study, subjects were kept in room controlled for temperature (23 ± 1 °C) and maintained on a 12-hour light/dark cycle (lights on – 0700 h) in standard cages with transparent walls and sawdust bedding. Water and other solutions were given through external bottles hanging on the cage. Daily fluid consumption was measured by weighing bottles before presentation and again after 24 h. All procedures were conducted in accordance with the NIH Guidelines for the Care and Use of Laboratory Animals and approved by the institutional ethics Committee. Morphine sulfate was obtained from Rafa Laboratories, Jerusalem. Fluoxetine hydrochloride and parachlorophenylalanine (PCPA) were obtained from Sigma-Aldrich.

2.2. Experimental procedures

Upon arrival, animals were housed 6 per cage and allowed to adapt to the animal facility for 1 week.

2.2.1. Stage I – adaptation (Days 1–21)

Rats were assigned randomly to the different experimental groups. In both experiments, subjects were first divided in two groups of differing housing conditions: Isolated housing: 1 animal per $40 \times 25 \times 18$ cm cage ($n = 20$) and Social housing: 2 animals per $56 \times 34 \times 19$ cm cage ($n = 20$). Each group then subdivided again in two to create 4 ($n = 10$) groups.

In Experiment 1, half the animals (10 isolated and 10 paired) were treated with fluoxetine hydrochloride (5 mg/kg dissolved in distilled water in a volume of 2.5 ml/kg, IP) and half (10 isolated and 10 paired) were treated with vehicle (distilled water at 2.5 ml/kg). Fluoxetine or vehicle treatment was given daily, starting after 7 days of adaptation to housing conditions and lasting throughout the experiment (Days 8–34).

In Experiment 2, half (10 isolated and 10 paired) were treated with PCPA (200 mg/kg dissolved in saline 0.9% in a volume of 4 ml/kg, IP) and half (10 isolated and 10 paired) with saline (at 4 ml/kg). PCPA or saline treatment was given acutely in three consecutive days on Days 16–18 of the adaptation phase. On Days 19–21, rats were given the chance to recover before the starting of behavioral tests. This acute PCPA treatment has been found to result in up to 90% depletion of brain serotonin (Koe and Weissman, 1966; Richter-Levin and Segal, 1989).

Animals in both experiments were maintained under these different housing conditions for 21 days with access to food and water *ad libitum*. Water intake was measured during the last 3 days of this phase (Days 19–21). Behavioral tests began on Day 22.

2.2.2. Stage II – startle response (Day 22)

Startle response was measured using an automated, ventilated, sound-attenuated JR. startle box (Hamilton-Kinder, USA) that was positioned in a dimly lighted room. The startle box consisted of a Plexiglas chamber mounted on a piezoelectric accelerometer. Movements of the rats inside the chamber resulted in changes of the voltage output of the accelerometer. These signals were amplified, digitized, and fed into a data-acquisition board in a computer for further analysis. Rats were habituated for 30 min to the startle test room before being placed in the chamber. The startle session started with a 5-min acclimatization period, with a background noise level of 57 dB which was maintained throughout the session. Rats were subjected to 10 tones (40 ms, 110 dB noise stimulus) with intervals of 1 min. The maximum startle response for each trial was measured by

arbitrary units (AU). The average of the 10 responses of each animal was taken as an index of the intensity of its startle reflex response.

2.2.3. Stage III – forced morphine consumption (one-bottle test) (Days 23–28)

Subjects were given access to Morphine sulfate solution only (0.5 mg/ml) for 6 days. Morphine solution intake was measured every 24 h by weighing the bottles. Rats in the social housing were provided with one bottle. So as to obtain an estimate of the morphine consumption for a single animal, the total intake was divided in half.

2.2.4. Stage IV – choice test (two-bottle test) (Days 29–34)

Subjects were given access to both water and morphine solution (0.5 mg/ml) for 6 days. Again, intake amounts were estimated by weighing bottles every 24 h and total intake of paired housed rats was divided in two.

2.3. Statistical analysis

For the startle response test, data were analyzed using One-Way ANOVA followed by post-hoc Tukey tests (HSD). For the morphine consumption tests, data were analyzed by ANOVA for repeated measures (mixed design). Housing condition (isolated vs. paired rats) and treatment (fluoxetine or PCPA vs. vehicle) was assessed as between-group factors and day was assessed as within-subject factor. Tukey (HSD) was used as the post hoc test when appropriate. For pairs of rats, the best estimate of the intake for a single animal was taken as the mean intake of the pair. To reduce statistical bias, we considered each pair as a single animal for analysis. Numeric results are presented as Mean \pm SEM (in both text and figures) and considered significant for p -values less than 0.05.

We assumed that 1 g equals 1 ml, and therefore we present morphine solution and water consumption in ml units.

3. Results

3.1. Experiment 1

Effects of fluoxetine on startle response amplitude and morphine self-administration of isolated vs. paired housed rats.

3.1.1. Weight

Throughout the experiment no significant differences in body weight were seen as a function of housing conditions or fluoxetine treatment (Table 1). Data are presented as total volume of morphine solution or water consumed. “Mean” represents the average morphine solution or water consumption of all days of measurements.

3.1.2. Startle response

Fluoxetine treatment resulted in significant reduction of mean startle amplitude of isolated rats. There were significant differences between groups [$F(3,36) = 4.83, p < 0.006$]. Post hoc analysis revealed that the mean startle response of isolated rats treated with vehicle was higher (1374.7 ± 352.98) relative to paired rats treated with vehicle (950.4 ± 325.06) (HSD, $p < 0.04$). However, Isolated rats treated with fluoxetine exhibited lower levels of startle reactivity

(871.05 ± 349.93) compared with isolated rats treated with vehicle (1374.7 ± 352.98) (HSD, $p < 0.01$). No differences were found between isolated rats treated with fluoxetine and paired rats treated with either fluoxetine or vehicle (Fig. 1a).

3.1.3. Morphine self-administration

3.1.3.1. Forced test (one-bottle test). Significant differences in morphine solution intake were seen between groups [$F(3,26) = 5.63, p < 0.004$]. The days*group interaction was not significant. Isolated rats treated with vehicle consumed higher amounts of morphine solution (16.54 ± 1.21) compared with paired rats treated with vehicle (10.53 ± 1.5) (HSD, $p < 0.02$) or fluoxetine (9.68 ± 1.03) (HSD, $p < 0.01$). Isolated rats treated with fluoxetine consumed significantly lower amounts of morphine solution (11.77 ± 1.31) relative to isolates treated with vehicle (16.59 ± 1.21) (HSD, $p < 0.03$). No differences were found between isolates treated with fluoxetine and paired animals treated with either fluoxetine or vehicle (Fig. 1b).

3.1.3.2. Choice test (two-bottle test). Significant differences in morphine solution intake were seen between groups [$F(3,26) = 67.1, p < 0.0001$]. A significant days*group interaction was also found [$F(15) = 4.2, p < 0.0001$]. Isolated rats treated with vehicle self-administered higher amounts of morphine solution (11.35 ± 0.21) than paired housed rats treated with vehicle (7.78 ± 0.29) (HSD, $p < 0.0001$) or fluoxetine (7.78 ± 0.29) (HSD, $p < 0.0001$). Isolates treated with fluoxetine consumed lower amounts of morphine solution (8.38 ± 0.16) than isolates treated with vehicle (11.35 ± 0.21) (HSD, $p < 0.0001$). There were no differences in morphine intake between isolates treated with fluoxetine and pairs treated with either fluoxetine or vehicle. No differences in water intake were seen between all 4 groups (Fig. 1c).

3.2. Experiment 2

Effects of PCPA on startle response amplitude and morphine self-administration of isolated vs. paired housed rats.

3.2.1. Weight

Throughout the experiment, no significant differences in body weight were seen as a function of housing conditions. PCPA treatment resulted in decreased body weight of isolates as well as paired rats compared with control rats [$F(3,36) = 20.14, p < 0.0001$]. However, those differences “disappeared” on the third day of the forced morphine test (Day 24) and from then on remained similar in all groups (Table 2).

3.2.2. Startle response

PCPA treatment resulted in significant enhancement of mean startle amplitude of isolated and paired housed rats. There were significant differences between groups [$F(3,36) = 14.87, p < 0.0001$]. Post hoc analysis revealed that the mean startle response of isolated rats treated with saline was higher (1098 ± 241.59) relative to paired rats treated with saline (814.32 ± 204.54) (HSD, $p < 0.02$). However, Isolated rats treated with PCPA exhibited higher levels of startle reactivity ($1421.164.41$) compared with isolated rats treated with

Table 1
Body weight development during the duration of Experiment 1.

Time point in study	Isolation-vehicle	Isolation-fluoxetine	Pairs-vehicle	Pairs-fluoxetine
Day of housing (Day 1)	208.4 \pm 4.37	209.2 \pm 3.8	211.7 \pm 4.52	214 \pm 5.19
First day of fluoxetine/vehicle treatment (Day 8)	254 \pm 4	252.3 \pm 4.21	259.7 \pm 4.59	261.4 \pm 4.25
Day of startle response test, after 14 days of fluoxetine/vehicle treatment (Day 22)	307.8 \pm 6.73	301.7 \pm 6.73	320 \pm 3.44	302.2 \pm 5.65
First day of morphine/water choice test (Day 29)	294.1 \pm 13.1	280.3 \pm 9.75	301.9 \pm 9.12	286.1 \pm 7.82
End of study (Day 34)	317.9 \pm 7.6	310.9 \pm 8.16	329.8 \pm 5.03	306.2 \pm 6.32

Values are given in grams as mean \pm SEM.

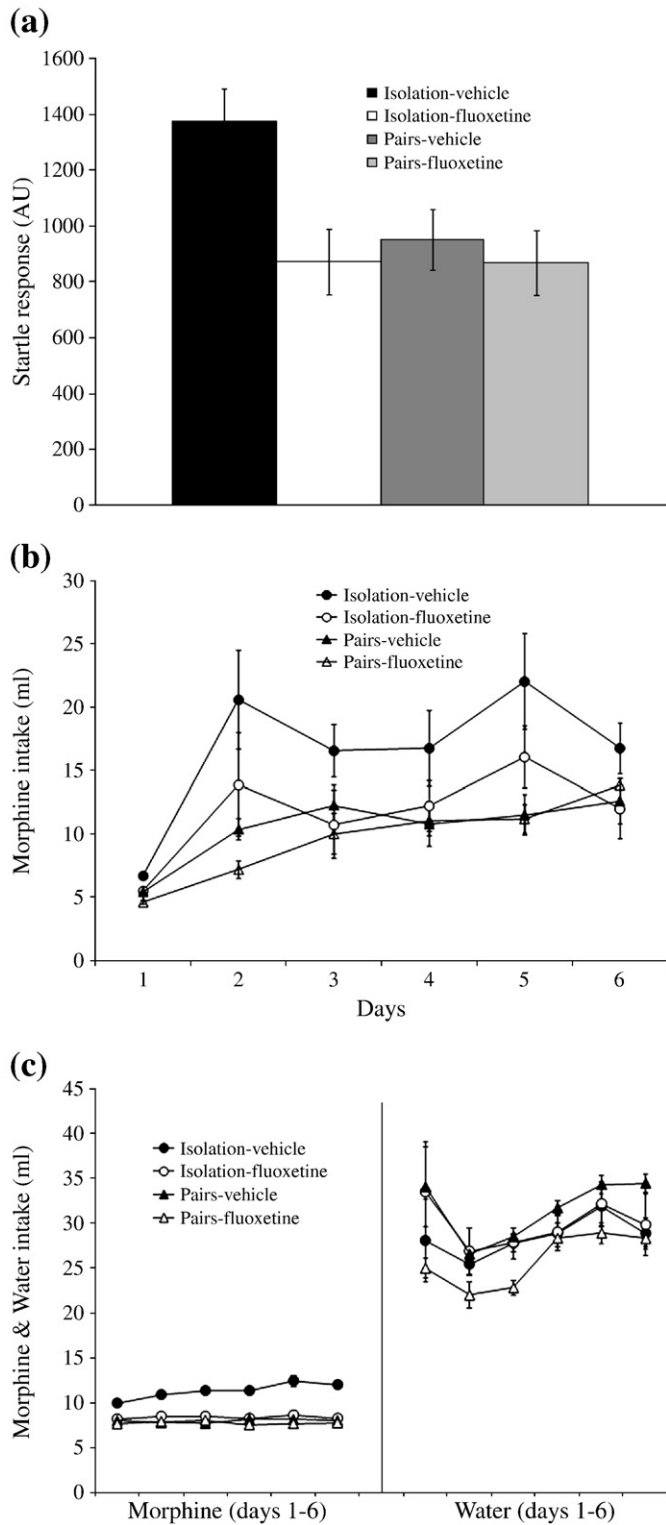


Fig. 1. Mean startle response amplitude (in arbitrary units) (a); Morphine solution intake (ml) during 6 days of one-bottle test (b); Morphine solution and water intake (ml) during 6 days of two-bottle test (c), among isolated vs. paired rats treated with fluoxetine or vehicle. Error bars represent SEM.

saline (1098 ± 241.59) (HSD, $p < 0.009$). Paired rats treated with PCPA exhibited higher levels of startle reactivity (1277.62 ± 238.43) compared with pairs treated with saline (814.32 ± 204.54) (HSD, $p < 0.0001$). No differences were found between isolated rats treated with PCPA and paired rats treated with PCPA (Fig. 2a).

3.2.3. Morphine self-administration

3.2.3.1. Forced test (one-bottle test). Significant differences in morphine solution intake were seen between groups [$F(3,26) = 14.98$, $p < 0.0001$]. The days*group interaction was not significant. Isolated rats treated with saline consumed higher amounts of morphine solution (12.38 ± 0.76) compared with pairs treated with saline (6.82 ± 0.89) (HSD, $p < 0.05$). Isolated rats treated with PCPA consumed significantly higher amounts of morphine solution (18.19 ± 1.55) relative to isolates treated with saline (12.38 ± 0.76) (HSD, $p < 0.01$) and to pairs treated with saline (6.82 ± 0.89) (HSD, $p < 0.0001$). Pairs treated with PCPA consumed higher amounts of morphine solution (20.94 ± 2.34) compared with pairs treated with saline (6.82 ± 0.89) (HSD, $p < 0.0001$) and compared with isolates treated with saline (12.38 ± 0.76) (HSD, $p < 0.002$). No differences were found between isolates treated with PCPA and paired animals treated with PCPA (Fig. 2b).

3.2.3.2. Choice test (two-bottle test). Again there were significant differences in morphine solution intake between groups [$F(3,26) = 10.1$, $p < 0.0001$]. A days*group interaction was found [$F(15) = 2.83$, $p < 0.001$]. Isolated rats treated with saline self-administered higher amounts of morphine solution (10.18 ± 0.4) than paired housed rats treated with saline (6.84 ± 0.32) (this finding reached marginal statistical significance; HSD, $p < 0.06$). Isolates treated with PCPA consumed higher amounts of morphine solution (13.29 ± 0.83) than isolates treated with saline (10.18 ± 0.4) (HSD, $p < 0.03$) and than pairs treated with saline (6.84 ± 0.32) (HSD, $p < 0.0001$). Pairs treated with PCPA consumed more morphine solution (13.07 ± 1.78) compared with pairs treated with saline (6.84 ± 0.32) (HSD, $p < 0.001$). There were no differences in morphine intake between isolates treated with PCPA and pairs treated with PCPA. There were no differences in water intake between all 4 groups (Fig. 2c).

4. Discussion

The major aim of the present study was to investigate the effects of the SSRI fluoxetine and the serotonin synthesis blocker, PCPA, on morphine self-administration and on the startle response of rats subjected to social isolation during adulthood.

In keeping with earlier studies (Raz and Berger, 2010), social isolation in adult rats increased morphine intake relative to socially housed control groups. In addition, isolated housing augmented a non-conditioned startle response.

The SSRI, fluoxetine, counteracted these behavioral alterations induced by isolation housing while the 5HT synthesis inhibitor, PCPA, further exacerbated them. Rats in isolation treated with fluoxetine self-administered lower amounts of morphine and had lower startle response compared with isolates treated with vehicle and had similar morphine intake as paired rats. Isolates treated with PCPA self-administered higher amounts of morphine and had higher startle response compared with isolates treated with saline. Paired rats treated with PCPA consumed much more of the drug and had much higher startle response than paired rats treated with saline.

In laboratory rats, isolation-rearing and isolation-housing have been reported to decrease serotonin concentration, alter turnover, and disrupt presynaptic serotonin activity (release and synthesis) in several brain areas (Bickerdike et al., 1993; Brenes et al., 2008; Brenes and Fornaguera, 2009; Dalley et al., 2002; Fone and Porkess, 2008; Hall, 1998; Hall et al., 1998; Heibredner et al., 2000; Jones et al., 1992; Lapis et al., 2003; Miura et al., 2005; Muchimapura et al., 2002; Muchimapura et al., 2003; Parker and Morinan, 1986; Preece et al., 2004; Robbins et al., 1996; Segal et al., 1973; Whitaker-Azmitia et al., 2000). These effects of social isolation on serotonin function vary as a function of age, period of isolation, duration of isolation, and the brain region studied.

Table 2

Body weight development during the duration of experiment 2.

Time point in study	Isolation-saline	Isolation-PCPA	Pairs-saline	Pairs-PCPA
Day of housing (Day 1)	227.3 ± 1.95	228.2 ± 2.14	229 ± 1.93	224.4 ± 2.35
First day of PCPA/saline treatment (Day 16)	283.1 ± 3.95	284.8 ± 4.19	287.2 ± 3.07	284.3 ± 3.69
Day of startle response test, after 3 recovery days from PCPA (Day 22)	304.8 ± 4.86	275.8 ± 5.44	310.7 ± 3.12	274.5 ± 2.94
First day of morphine/water choice test (Day 29)	248.1 ± 12.13	253.5 ± 9.44	256.3 ± 11.52	239.9 ± 11.54
End of study (Day 34)	269 ± 12.75	277.7 ± 8.24	283.8 ± 12.39	265.7 ± 10.88

Values are given in grams as mean ± SEM.

The majority of such studies use “isolation rearing” in which rats are housed individually from a relatively young age (mostly starting on post natal days 21–28). There are fewer studies in which isolated housing is initiated during adulthood (for review see Hall, 1998). In addition, there are a small number of studies comparing individually housed versus socially housed adult rats on opiate self-administration and especially morphine self-administration of (Alexander et al., 1978; Alexander et al., 1981). Finally, to our knowledge, there are no reports examining the effects of SSRI's and of PCPA on morphine self-administration or startle reactivity of isolated adult rats.

Startle response is a common behavioral test for assessment of emotional reactivity in rodents, and is often used to assess the effects of anti-anxiety drugs (Bourin et al., 2007; Grillon, 2002; Grillon, 2008; Rodgers, 1997). In trying to understand the putative mechanisms underlying the effects of fluoxetine and PCPA on startle response in the present study, it is important to differentiate between conditioned and unconditioned startle responses. Many studies have focused on fear-conditioning or fear-potentiated startle paradigm. In this model, the animals are trained to associate a neutral stimulus with an aversive stimulus and hence, after a few pairings, the CS induces a state of fear as measured by a potentiation of the startle response. The suggested neuronal basis of the fear-potentiated startle involves primarily the amygdaloid complex and its connections with some other rostral brain structures (reviewed by Davis et al., 1993 and by Koch, 1999). However, a growing number of studies suggest that fear-potentiated startle reflects a rapid conditioned response to the fear provoking stimulus, and does not provide an ideal model for more general and durable states of stress, anxiety, discomfort and apprehension (Davis et al., 1997; Gewirtz et al., 1998; Grillon and Baas, 2003; Koch, 1999). In the present study, no conditioning was used so the startle reflex was basically an unconditioned response. In this case, the startle response is thought to be mediated by a relatively simple neuronal circuit located in the lower brain stem including, among others, the caudal pontine reticular nucleus and the dorsal periaqueductal gray (Brandao et al., 2008; Koch, 1999). It has been also suggested that another structure may play an important role in the startle-enhancing effects of more durable states of stress and anxiety – the bed nucleus of the stria terminalis (BNST) (Davis et al., 1997; Gewirtz et al., 1998; Grillon and Baas, 2003; Koch, 1999). In view of this, it is possible that those lower brain stem structures or the BNST, rather than the amygdala, were the main neural substrates for the action of fluoxetine in counteracting (and of PCPA exacerbating) the effects of isolation-potentiated startle seen in the present study.

A commonly held view is that in the rat and in other species isolated housing and restricted social interaction produce physiological and behavioral changes that may be catalogued under the general category of “stress”. Indeed, social isolation in laboratory animals has been suggested as a model for stress, anxiety and depression in humans (Brenes et al., 2008; Brenes et al., 2009; Cryan and Holmes, 2005; Cryan and Slattery, 2007; Fone and Porkess, 2008; Fuchs and Flugge, 2006; Harris, 1989; Heidbreder et al., 2000; Katz, 1981; McKinney, 1984; Pryce et al., 2005; Thorsell et al., 2006; Willner, 1984). Consumption of morphine in isolated rats may be seen as “self-medication”, hypothetically bringing relief from the unpleasant state of stress. Since socially housed rats are not exposed to the stressful consequences of social isolation, they do not benefit in the same

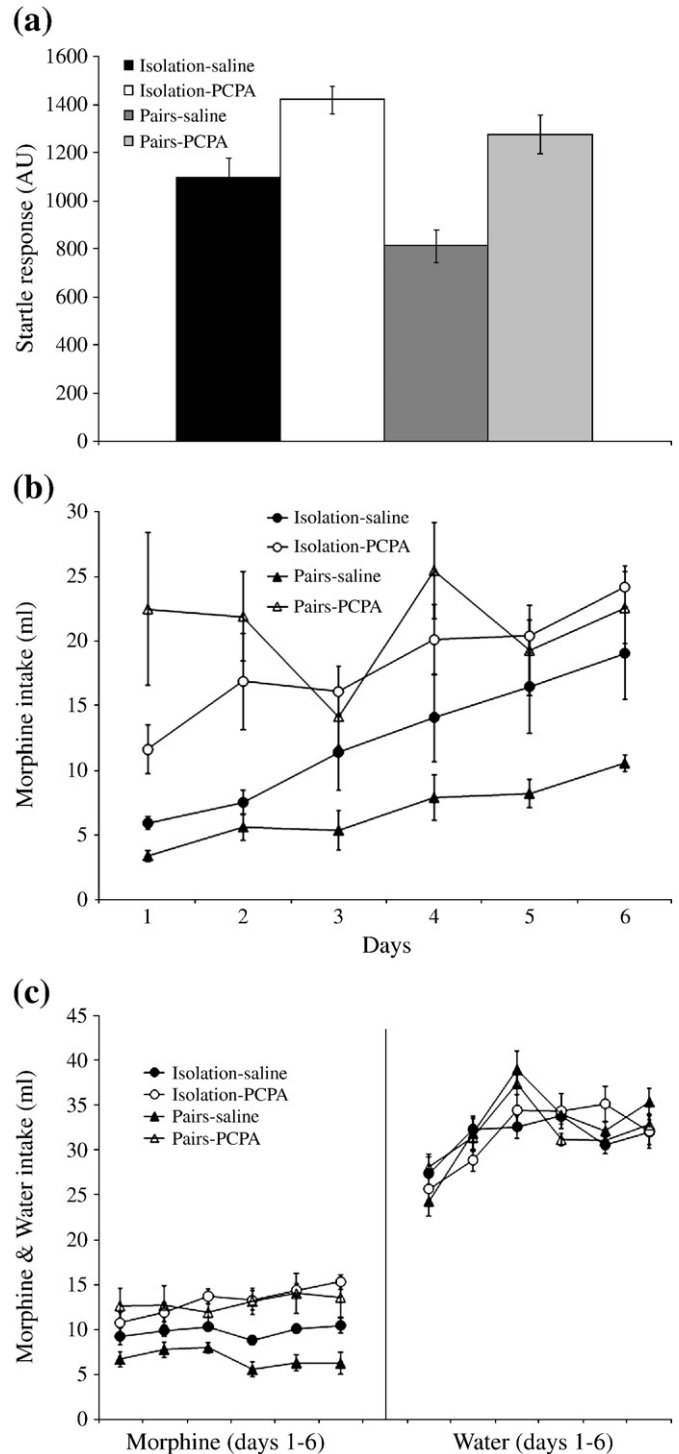


Fig. 2. Mean startle response amplitude (in arbitrary units) (a); Morphine solution intake (ml) during 6 days of one-bottle test (b); Morphine solution and water intake (ml) during 6 days of two-bottle test (c), among isolated vs. paired rats treated with PCPA or saline. Error bars represent SEM.

manner from morphine consumption which might even interfere with the performance of normal social interaction and therefore is consumed at lower doses (Alexander et al., 1978, 1981; McIntosh et al., 1980; Panksepp et al., 1979).

Opioid systems are involved in the regulation of social behaviors in juvenile and adult rats and several lines of evidence suggest an involvement of opioid systems in changes associated with social isolation. Social interaction has been found to induce release of opioid peptides in several brain areas, suggesting that isolation might reduce release of endogenous opioid peptides (Benton and Brain, 1988; Hol et al., 1996; Panksepp et al., 1980; Petkov et al., 1985; Schenk et al., 1987; Van den Berg et al., 1999). These authors postulate that exogenous opioid treatment during the isolation period might substitute for social interaction-induced endogenous opioid peptide release. Indeed, it has been observed that morphine treatment in rats subjected to isolation increases adult social activity and enhances opioid peptide release as compared with saline treated rats. Both social activity and opioid peptide release were unaffected by morphine treatment in non-isolated rats (Van den Berg et al., 1999).

There are other possible explanations for the effects of social isolation on morphine intake (Raz and Berger, 2010). The fact that there were no differences in water intake between the groups suggests that this finding cannot be explained by a general enhancement of fluid intake by isolates, but rather due to selective enhancement in morphine intake. Moreover, since there were no significant differences in body weight between isolated vs. paired subjects during the course of experiments (see also Thorsell et al., 2005; Thorsell et al., 2006) these results cannot be explained by differences in body weight, that might affect daily intake and/or drug reactivity.

Social isolation may change the sensitivity and reactivity to various stimuli. Therefore isolated rats may be more or less reactive to the bitter taste of morphine or to the novelty of the taste as opposed to the psychoactive action of the drug. Indeed, in our laboratory we have preliminary data that isolation housing may increase the intake of a bitter solution of quinine. Supporting our assumption of a pharmacological action of the drug as the most appropriate explanation of the pattern of results in our studies, we have found in preliminary experiments that the opiate antagonist naltrexone reversed the increase in morphine consumption following isolated housing (Raz and Berger, 2005). Isolated rats treated daily with naltrexone (5 mg/kg), consume significantly lower amounts of morphine solution than isolated rats treated with saline and similar amounts as their socially housed counterparts. Since naltrexone is not known to affect taste reactivity (Arbisi et al., 1999; Goodwin et al., 2001; Scinska et al., 2000) it is perhaps more likely that it reduces drug intake of isolates because it attenuates the psychopharmacological action of morphine.

Changes in serotonin pathways following social restriction have been linked to the development of aggressive behavior, depression, anxiety and substance abuse in both humans and animals (Heinz et al., 2001; Tamashiro et al., 2005; Matsumoto et al., 2005; Wrase et al., 2006). Moreover, the therapeutic effects of SSRI drugs and some anti-anxiety treatments are often attributed to modulation of dysfunctional serotonergic systems (Berger and Schuster, 1987; Brenes and Fornaguera, 2009; Greco et al., 1990; Heritch et al., 1990; Maissonette et al., 1993; Olivier et al., 1989; Ramanathan et al., 2003; Rilke et al., 2001; Ruedi-Bettschen et al., 2004; Sanchez and Hyttel, 1994; Sanchez and Meier, 1997; Willner, 1984).

Taken together, it therefore is reasonable to speculate that social isolation alters serotonergic function and underlies the behavioral changes such as higher tendency to self-administer morphine and higher emotional reactivity in the startle box. Antidepressants (such as fluoxetine) act to normalize or stabilize serotonin tone and function, and therefore restore the behavioral changes observed in isolated rats.

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