

Mafalda Maria Salvador Campeão

Methylenedioxypyrovalerone (MDPV) and methamphetamine (METH) play with central innate immune system: focusing on RAGE and glial cells

Master Thesis in Biochemistry, under supervision of
Professor Frederico Guilherme Costa Pereira and Professor Ângelo José Ribeiro Tomé and presented to the Life Sciences
Department of the University of Coimbra.

August 2017



UNIVERSIDADE DE COIMBRA

Front Cover:

Image showing the structurally diverse immunolabeling between frontal cortex and the bottom regions of corpus callosum and striatum, respectively, from C57BL/6 mice expressing myelin basic protein, MBP, (green) and DAPI (blue).

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A accção da Methilenedioxipirovalerona (MDPV) e da metamfetamina (METH) no sistema imunitário inato central: com especial foco no RAGE e nas células da glia

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This work was conducted at the Laboratory of Pharmacology and Experimental Therapeutics, Institute for Biomedical Imaging and Life Sciences (IBILI), Faculty of Medicine, University of Coimbra, Portugal, under the supervision of Professor Frederico Guilherme Costa Pereira and Professor Ângelo José Ribeiro Tomé.

Also, part of this work was performed at Center for Neuroscience and Cell biology (CNC) in Institute of Immunology, Faculty of Medicine, University of Coimbra, Portugal, under guidance of Dr. Paulo Santos.



"Na altura aquilo solta-te como um pássaro, mas depois ficas dentro daquela gaiola durante meses, anos." (In *Público online*, a 17 de Fevereiro de 2013)

Nas páginas que se seguirão teremos a perspectiva científica sobre algumas substâncias de abuso. Nesta página, fica o testemunho, multiplicado por muitos, muitos daqueles que se deixaram aprisionar pelo labirintico trilho da adição. Este é um testemunho de alguém que sentiu estar provido de asas, asas na verdade ilusórias, mas que fizeram com que se deixasse abraçar por um vertiginoso e profundamente destruidor labirinto claustrofóbico....

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Table of Contents

Chapter 1 - Introduction	3
1.1. Innate Immunity.....	3
1.1.1. Leading actors in Central Innate Immunity	3
1.1.1.1. Immune role of glial cells, the housekeepers.....	3
1.1.1.1.1. Microglia.....	4
1.1.1.1.2. Astrocytes	5
1.1.1.2. RAGE receptors	6
1.1.1.2.1. RAGE structure and diversity	6
1.1.1.2.2. The nature of RAGE ligands.....	9
1.1.1.2.3. Intracellular pathways.....	10
1.2. Challenging the Innate Immunity:.....	13
1.2.1. Drugs of abuse, the other side of the coin.....	13
1.2.1.1. Amphetamine-Type Stimulants (ATS), as the origin of a season.....	13
1.2.1.1.1. Methamphetamine (METH), a case still open to debate.....	15
1.2.1.1.1.1. Methamphetamine (METH): the one and only	15
1.2.1.1.1.2. Math behind METH: a queen with a solid throne.....	16
1.2.1.1.1.3. “Biography” of a “Crystal” star: some historical facts ...	18
1.2.1.1.1.4. Overall perspective on stimulants & neurotoxic effects .	18
1.2.1.1.1.5. Dopamine, it is never enough	19
1.2.1.1.1.6. METH reinforcing effects.....	20
1.2.1.1.1.7. METH neurotoxic effects: dopamine system as the selected target	21
1.2.1.1.1.8. Central toxicity beyond the dopamine system	21
1.2.1.1.1.9. Neuroinflammation & METH.....	22
1.2.1.2. New Psychoactive Substances (NPS): the novelty in the field.....	22
1.2.1.2.1. Methylendioxypropylone (MDPV) pharmacodynamics and pharmacokinetics: modern ways of bathing	26

1.3. Aims and thesis outlines.....	29
Chapter 2 – Materials and Methods.....	31
2.1. Drugs and Chemicals	31
2.2. Animals	31
2.3. Drug Administration	31
2.4. Behavioral analysis	33
2.4.1. Elevated Plus Maze	33
2.4.2. Open-field test.....	33
2.4.3. Splash test.....	34
2.4.4. Tail Suspension	34
2.5. Real-Time Quantitative PCR	34
2.6. Western Blot analysis.....	35
2.7. Immunohistochemistry.....	36
2.8. Statistical analysis	38
Chapter 3 – Results.....	39
3.1. Behavioral consequences of METH and MDPV administration to mice.....	40
3.2. Molecular and glial changes in frontal cortex induced by METH and MDPV administration to mice.....	43
3.2.1. Impact of METH and MDPV on dopaminergic terminals	43
3.2.2. Impact of METH and MDPV on innate immune players in frontal cortex	45
3.2.2.1. Impact of METH and MDPV in RAGE and s100 β density	45
3.2.3. Impact of METH and MDPV in glial cells	49
Chapter 4 – Main findings and discussion.....	53
4.1. Main findings	53
4.2. Concluding remarks	58
Chapter 5 – References.....	60

Index of Tables

Chapter 2 – Material and Methods	31
Table 2.1 List of primary and secondary antibodies used in western blot analysis.	36
Table 2.2 List of primary and secondary antibodies used in Immunohistochemistry analysis.	38

Index of Figures

Chapter 1 - Introduction	3
Figure 1.1 Illustration of the immunitary response exerted by microglia and astrocytes in response of foreign pathogens or local injuries.	4
Figure 1.2 Images of ramified microglial cells.	5
Figure 1.3 Depiction of an innate immune reaction of an activated astrocyte.	6
Figure 1.4 Schematic illustration of the domains of RAGE receptor. The areas in blue (V and C1 regions) stand for positive charge whereas areas in red (C2 region) represent negative charge. Several RAGE ligands are also depicted at the right-hand side Illustration of the immunitary response exerted by microglia and astrocytes in response of foreign pathogens or local injuries.	7
Figure 1.5 Representation of full-length RAGE and its splice variants. RAGE is composed of an intracellular tail, a transmembrane domain, and an extracellular domain consisting of three immunoglobulin-like domains, one V-type followed by two C-type (C1 and C2) domains.	8
Figure 1.6 Schematic representation of the putative mechanism for regulation and activation of RAGE receptors. After RAGE-ligands binding intracellular signaling pathways are triggered, leading to NF-kB inflammatory regulator molecule activation with consequent production of pro-inflammatory molecules, as well as increased RAGE expression.....	11
Figure 1.7 Schematic illustration of the impact of RAGE-S100β binding on neurons, microglia, and astrocytes.	12
Figure 1.8 Depiction of RAGE oligomerization assembly and subsequent multimeric ligands binding.	13
Figure 1.9 Schematization of some statistics concerning ATS in Europe as well as in Portugal.	14
Figure 1.10 Representation of some of the Amphetamine-type stimulants (ATS) (Boyle et al., 2010).	15
Figure 1.11 Chemical structures of methamphetamine. (Boyle et al., 2010).	16
Figure 1.12 Quantities of amphetamine-type stimulants seized worldwide between 2010 and 2015...	16
Figure 1.13 Schematic depiction on alterations of methamphetamine seizures from 2014 to 2015..	17
Figure 1.14 Global comparison of emergency medical treatment seeking.Schematic depiction on alterations of methamphetamine seizures from 2014 to 2015.	17
Figure 1.15 Dopamine life-cycle	20

Figure 1.16 Proportion of new psychoactive substance category, in December 2016 (left-hand side); and proportion of new psychoactive substance, by pharmacological effect, in December 2016 (right-hand side).	23
Figure 1.17 Schematic representation of NPS consumption statistics in Europe.	24
Figure 1.18 Annual amounts of synthetic new psychoactive substances seized in Europe, 2005-2015, illustrated in upper and bottom pictures.	25
Figure 1.19 Percentages of types of drugs purchased through the so-called “darkmarkets”.	26
Figure 1.20 Chemical representation of natural cathinone and bath salt synthetic cathinones as and Mephedrone, Methyone and MDPV.	27
Chapter 2 – Material and Methods	31
Figure 2.1 Experimental study design performed for METH and MDPV binge drug regimen.	33
Figure 2.2 Drawing of a coronal section at + 0.98 mm anterior from Bregma depicting the diverse areas in mice brain, with particular focus on cingulate cortex, area 2 (Cg 2), cingulate cortex, area 1 (Cg 1), and secondary motor cortex (M2), which are highlighted at the inset at the right-hand side.	37
Chapter 3 – Results	40
Figure 3.1 Impact of METH and MDPV on anxiety-like behavior in mice (Elevated Plus Maze test).	41
Figure 3.2 Impact of METH and MDPV on locomotor behavior in mice (Open Field test).	41
Figure 3.3 Impact of METH and MDPV on exploratory activity in mice (Open Field test (5 minutes)).	42
Figure 3.4 Impact of METH and MDPV on depressive-like behavior in mice, with Tail Suspension test (a) and Splash test (b).	43
Figure 3.5 Impact of an acute binge dose of METH and MDPV on TH density in mice frontal cortices.	44
Figure 3.6 Influence of an acute binge dose of METH and MDPV on receptor RAGE gene expression and protein density in frontal cortex.	47
Figure 3.7 Influence of an acute binge dose of METH and MDPV on s100β gene expression and protein levels in frontal cortex.	48

Figure 3.8 Influence of an acute binge dose of METH on Iba-1 immunolabeling in frontal cortex...
..... 49

Figure 3.9 Influence of an acute binge dose of METH on GFAP levels in frontal cortex. 51

Figure 3.10 Influence of an acute binge dose of METH on MBP levels in frontal cortex. 52

Abbreviations

A

ADAM10 Metalloprotease 10

A β Amyloid-beta peptide

ALR Aim2 like receptors

AGE's Advanced glycation end products

ATS Amphetamine-Type Stimulant

B

BBB Blood brain barrier

bp base pairs

C

3,4-catechol-PV 3,4-dihydroxyprovalerone

Ca²⁺ Calcium

CCL2 Chemokine (C-C motif) ligand 2

cDNA Complementary deoxyribonucleic acid

CNS Central nervous system

ctRAGE C-terminal cytoplasmic tail

CXCL1 Chemokine (C-X-C motif) ligand 1

CXCL10 Chemokine (C-X-C motif) ligand 10

CXCL12 Chemokine (C-X-C motif) ligand 12

CPu Caudate-putamen

D

DA Dopamine

DAergic Dopaminergic

DAMP's Damage-associated molecular patterns

DAT Dopamine transporter

DCs Dendritic cells

DOPAC 3,4-dihydroxyphenylacetic acid

E

EMCDDAE European Monitoring Centre for Drugs and Drug Addiction European

ERK-1/2 Extracellular signal-regulated kinase-1 and -2

esRAGE Endogenous secretory RAGE isoforms

F

FDA Food and Drug Administration

fIRAGE Full-length RAGE isoform, also denominated mRAGE

FOB Functional Observational Bactery

G

GABA γ -aminobutyric acid

GFAP Glial fibrillary acidic protein

H

HIV Human immunodeficiency virus

HMGB-1 Amphoterin protein or high mobility group box-1

I

Iba-1 Ionized calcium-binding adapter molecule 1

IL-1 β Interleukine - 1 β

IL-6 Interleukine - 6

IL-10 Interleukine - 10

i.p. Intraperitoneally

L

L-DOPA Levodopa

LSD (+)-lysergide

M

MAPK Mitogen-activated protein kinase

MBP Myelin Basic Protein

mDia-1 Mammalian Diaphanous-1

MDMA 3,4-methylenedioxymethamphetamine

MDPV 3,4-Metilenedioxipirovalerone

METH Methamphetamine

MHC Major histocompatibility complex

MPTP 1-methyl-4-phenyl-1,2,3,6-tetrahydropyridine

mRNA Messenger Ribonucleic acid **MMP9** Metalloprotease 9

N

NAc Nucleus accumbens

NET Norepinephrine transporter

NF- κ B Nuclear factor kappa B

NLR Nod-like receptors

NO Nitric oxide

NPS New psychoactive substances

NSC Neural stem cell

O

4-OH-3-MeO-PV 4-hydroxy-3- methoxyprovalerone

P

PAMP's Pathogen-associated molecular patterns

PBS Phosphate-buffered saline

PD Parkinson's disease

PRR's Pattern recognition receptors

R

RAGE Receptors for advanced glycation end products

RLR Rig like receptors

ROS Reactive oxygen species

RT-qPCR Real Time quantitative Polymerase chain reaction

S

SDS-PAGE Sodium dodecyl sulphate polyacrylamide gel electrophoresis

S.E.M. Standard error of the mean

SERT serotonin transporter

SNpc Substantia nigra *pars compacta*

sRAGE Soluble RAGE isoforms

s. c. subcutaneously

T

TH Tyrosine hydroxylase

TLR's Toll-like receptors

TNF- α Tumor necrosis factor α

U

UNODOC United Nations Office on Drugs and Crime

V

VMAT-2 Vesicular monoamine transporter

VTa Ventral tegmental area

W

WB Western blot

WDS World Drugs Survey

Abstract

Innate immunity is the first effective line of defense of all organisms, comprising cellular and molecular mechanisms for immediate action, recognizing exogenous pathogen associated molecular patterns (PAMPs), as well as, endogenous danger associated molecular patterns (DAMPs). Such detection is possible through diverse pattern recognition receptors (PRRs), thereby orchestrating the activation of innate responses. One of these receptors is the receptor for advanced glycation end-products (RAGE, also known as AGER), which is a cell-surface receptor belonging to the superfamily of immunoglobulin proteins, thus playing a central role in the inflammatory response mediating events of innate immunity. Moreover, RAGE has been implicated in the sustainment of glial activation and neurotoxicity. Noteworthy, RAGE receptor exhibits broad expression on many different cells including CNS cells, such as neurons, microglia and astrocytes. Also, as a multiligand receptor, RAGE recognizes a broad repertoire of structurally different ligand families, including S100 β , belonging to the S100 protein family.

Nowadays, drug misuse, including amphetamine-type stimulants (ATS) addiction, is a major worldwide issue with an undeniable impact on public health, human rights and security. In parallel, the rapid emergence and abuse of new psychoactive substances (NPS), also termed as “research chemicals” or “design drugs”, including the synthetic cathinone, Methylenedioxypyrovalerone (MDPV), known as "bath salt", clearly seems to worsen this scenario, as it acts as a substitute for illegal stimulant drugs such as cocaine. The incredibly easy access to these cathinones, including the newly synthesized MDPV, in the global drug market, through smart shops, internet (“darknet”), and the aspect of “fake legality” of such substances, as well as the relative affordability and better quality compared with traditional drugs, are on the basis of some of the reasons underlying their increasing popularity.

In the last decades, a great deal of attention has been drawn to the aspects underlying methamphetamine (METH; an ATS)-induced neurotoxicity, in many brain regions. Nevertheless, little is known regarding MDPV neurotoxicity, including in frontal cortex, which is known to be affected by drugs of abuse. Additionally, the behavioral profile of rodents after drug administration is poorly documented for MDPV, in comparison with METH.

Additionally, novel avenues in drug addiction sciences are being explored. As an example, there is a growing body of evidence regarding the impact of drugs of abuse including METH to both peripheral and central innate immunity. However, the effects of new cathinones (including MDPV) in the central innate immunity remain unknown. Therefore, this thesis aimed to characterize, for the first time, the impact of MDPV on frontal cortex glial cells and innate immune players including receptor for advanced glycation end-products (RAGE) and its ligand

S100 β , within first 24 hours following a binge MDPV regimen. In addition, emotional behavior was assessed. A binge neurotoxic regimen of METH was also employed to deepen current knowledge on METH neurotoxicity.

Concerning the behavioral profile, we offer a first evidence that a single binge MDPV regimen did not come with any changes in both emotional and locomotor parameters, but curiously enhanced exploratory activity in mice. Secondly, we concluded that neither drug impose any changes in innate immunity as well as in neurotoxicity parameters including microglial, astrocytic, myelin and dopaminergic markers, as seen by the unaltered levels of RAGE, S100 β , Iba-1, GFAP and, MBP and TH, respectively.

One cannot exclude the hypothesis whereby this is a premature time-window to observe significant molecular changes in frontal cortices following both stimulants. In this context, future studies are required to further characterize neuronal and glial effects of MDPV by using other time-points, dosing regimens and brain regions.

Keywords: Central Innate Immunity; Methylenedioxypropylamphetamine; Methamphetamine; Receptors for advanced glycation end products; glial cells.

Resumo

A imunidade inata é a primeira linha de defesa efectiva de todos os organismos, englobando mecanismos moleculares e celulares com vista a uma acção imediata, reconhecendo padrões moleculares associados a patogénios de origem externa (PAMPs), bem como, padrões moleculares associados a uma ameaça de origem interna (DAMPs). Esse reconhecimento é possível através de diversos receptores de reconhecimento padrão (PRRs), orquestrando, assim, a activação de respostas imunes. Um destes receptores é o receptor dos produtos de glicação avançada (RAGE, também conhecido por AGER), que é um receptor, localizado à superfície das células, pertencendo à superfamília de proteínas imunoglobulinas, tendo um papel central na resposta inflamatória, mediando acções na imunidade inata. Para além do mais, o receptor RAGE tem sido implicado na neurotoxicidade e activação das células da glia. É de salientar que este receptor é expresso em muitos tipos de células incluindo as células do sistema nervoso central (CNS) como os neurónios, microglia, astrócitos. De notar também que, sendo um receptor que interage com múltiplos ligandos, RAGE é capaz de reconhecer um largo espectro de diferentes famílias de ligandos estruturalmente diversos, incluindo o ligando S100 β , pertencente à família de proteínas S100.

Nos dias de hoje, o consumo inadequado e a adição de drogas de abuso, incluindo a dição dos estimulantes do tipo das anfetaminas (ATS), é um problema sério e verificado em todo o mundo, com inegável impacto na saúde pública, direitos humanos e na segurança. A par destes aspectos, a rápida difusão e abuso de novas substâncias psicoactivas (*new psychoactive substances*, NPS), também conhecidas como “substâncias químicas de pesquisa” ou “drogas desenhadas”, engloba a catinonas sintética, Methylenedioxypyrovalerone (MDPV), designada por “sais de banho”, claramente parece piorar a actual situação, já que é usada como um substituto de estimulantes ilegais, como a cocaína. O acesso incrivelmente facilitado a estas catinonas, como o MDPV, no mercado de drogas global, através das “*smart shops*”, *internet* (“*darknet*”), e o aspecto da “falsa legalidade” destas substâncias, assim como, o relativo baixo custo e a sua qualidade, comparativamente a outras drogas tradicionais, são factores que têm contribuído para a sua crescente popularidade.

Ultimamente, têm sido investigados novos aspectos dentro do tema das drogas de abuso. A título de exemplo, existem cada vez mais evidências no que diz respeito à methamphetamine na imunidade inata central e periférica. Contudo, os efeitos de catinonas (como o MDPV) na imunidade inata central ainda estão por investigar. Neste sentido, este trabalho tem como principal foco, caracterizar, pela primeira vez o impacto do MDPV nas células da glia, no córtex frontal e nos intervenientes da imunidade inata, incluindo o receptor dos produtos de glicação avançada (RAGE) e o seu ligando S100 β , 24 horas após a um regime *binge* de MDPV.

Para além disso, o perfil comportamental dos roedores após a administração do MDPV está pouco documentado, em comparação com a METH. Assim sendo, o nosso objectivo com este trabalho foi caracterizar, pela primeira vez, o impacto do MDPV no córtex frontal, nomeadamente nas células da glia e nos intervenientes da imunidade inata, incluindo o receptor dos produtos de glicação avançada (RAGE) e o seu ligando S100 β , nas 24 horas após um regime de “binging”. Em paralelo à administração de MDPV, também foi administrada uma dosagem igualmente aguda de METH, no sentido de aumentar os actuais conhecimentos sobre a neurotoxicidade da METH.

Assim, em primeiro lugar, e no que diz respeito ao perfil comportamental, o nosso estudo oferece a primeira evidência de que um episódio de administração aguda de MDPV não acarretou perturbações emocionais nem locomotoras, aumentando, no entanto, e curiosamente, a actividade exploratória nos ratinhos. Em segundo lugar, ficou demonstrado que nem o MDPV nem a METH influenciaram os parâmetros de neurotoxicidade relacionados com as células da microglia, células astrocíticas, fibras de mielina, bem como, com marcadores dopaminérgicos. Tal foi comprovado pelos níveis inalterados de Iba-1, GFAP, S100 β , MBP e TH, respectivamente. Para além do mais, concluímos que nenhuma droga influenciou marcadamente os níveis de expressão ou os níveis de proteína total correspondentes ao receptor RAGE.

Finalmente, não podemos descartar a hipótese de esta janela temporal de 24 horas corresponder a uma fase prematura para observar quaisquer alterações moleculares e celulares significativas, induzidas por ambos os psicoestimulantes, no córtex frontal. Neste contexto, estudos posteriores serão necessários para caracterizar os efeitos, neuronais e ao nível das células da glia, do MDPV, que podem passar, quer pela adopção de outras janelas temporais, quer por outros regimes de administração, ou ainda quer pela avaliação numa outra área cerebral.

Palavras-chave: Imunidade inata central; Methilenedioxypropylone; Methamphetamine; Receptores dos produtos de glicação avançada; células da glia.

Chapter 1

Introduction

1.1. Innate Immunity

Innate immunity is the first effective line of defense of all organisms, comprising cellular and molecular mechanisms for immediate action, upon a potential external or internal threat (Kovach & Standiford, 2011; Lester & Li, 2014). Therefore, innate immune system is capable of recognizing exogenous pathogen associated molecular patterns (PAMPs), from bacteria, virus and others, as well as, endogenous danger associated molecular patterns (DAMPs), which can be released from damaged tissues, healthy cells and apoptotic or necrotic cells (Janeway, 1989; Newton and Dixit, 2012;).

Such detection is possible through diverse pattern recognition receptors (PRRs) such as RAGE (receptors for advanced glycation end-products), thereby orchestrating activation of innate responses, ultimately leading to elimination of pathogens and restoration of homeostasis (Lotze & Tracey, 2005; Kawasaki & Kawai, 2014; Lester & Li, 2014). Other pattern recognition receptors include toll-like receptors (TLRs), Rig like (RLR), Nod-like (NLR) and Aim2 like receptors (ALR) (Unterholzner et al., 2010; Takeuchi et al., 2010).

1.1.1. Leading actors in Central Innate Immunity

1.1.1.1. Immune role of Glial Cells, the housekeepers

Infection, injury, toxic agents, or stress are few examples of insults that can be modulated, in the first place, by glial cells, on behalf of central immune system, thus removing or inactivating potentially harmful agents or damaged tissue. (Ransohoff et al., 2012) However, an over-reaction or activation by this system, levered by the elevated levels of immunological markers, such as pro-inflammatory cytokines and chemokines, may result in central nervous system (CNS) infiltration by peripheral immune cells including macrophages, and T lymphocytes. (Hayley et al., 2005; Leonard, 2007) This may result in the mounting of a neuroinflammatory response, with consequent alterations in brain structure and function, and ultimately leading to neurodegeneration (Hayley et al., 2005; Leonard, 2007) (**Figure 1.1**). It is also relevant to highlight that neurons and glia work side-by-side forming an intimate interconnection to support brain activity and development (Ransohoff et al., 2012).

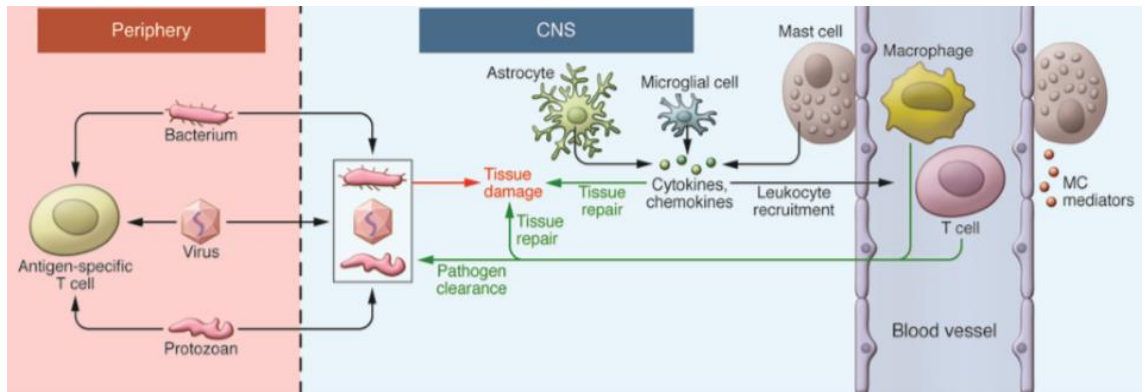


Figure 1.1 Illustration of the immunitory response exerted by microglia and astrocytes in response of foreign pathogens or local injuries. In central innate immunity, microglia and astrocytes are the leading immune players, mitigating foreign invaders and local damage. The cytokines and chemoamines released by those cells will consequently attract macrophages, and T lymphocytes from peripheral innate system, which are able to reach the affected brain area afterwards, because of the lesions in the Blood Brain Barrier (BBB). (Taken from Ransohoff et al., 2012)

1.1.1.1.1. Microglia

Microglia cells belong to a myeloid cell population and was derived from the yolk sac, originated in hematopoietic cells in the embryony stage (Ginhoux et al., 2010). When settled in the CNS parenchyma, microglia are sustained by proliferation of resident progenitors (Ajami et al., 2007), being commonly referred as the macrophages of the CNS due to their phagocytic activity (Geissmann et al., 2010). Microglia are the primary modulators of CNS innate immunity (Stoll et al., 1998) as they constantly surveil the environment, and when they detect a potential threat, they become activated, showing morphological changes (del Rio-Hortega et al., 1892) (**Figure 1.2**). Therefore, it is through the constitutive/inducible expression of PRRs at their surface (including RAGE) that glial cells exert or amplify immune effects in response to a given insult including PAMPs or endogenous damage-associated molecular patterns (DAMPs) (Kagan, 2012).

This glial activation evokes the production of pro-inflammatory and anti-inflammatory cytokines/mediators such as IL-1 β , IL-6, TNF- α , CCL2, ROS, NO and IL-10, being the ultimate effect dependent on the balance between these opposing responses (Kettenmann et al. 2011).

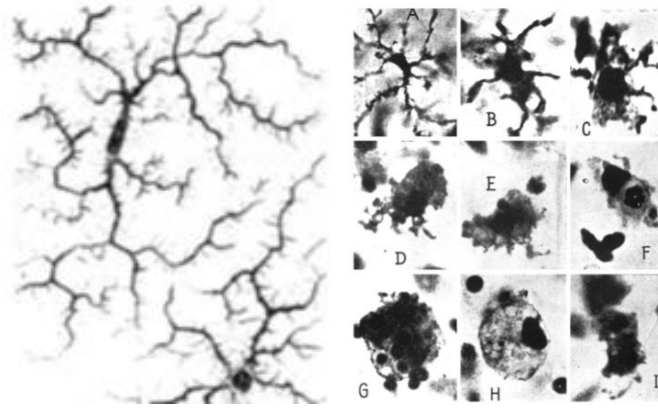


Figure 1.2. Images of ramified microglial cells. Microglial cells drawn by Pio del Rio-Hortega (1882-1945) (Left panel). Hortega. Morphological transformation of microglia to phagocytic macrophage are shown in lettered panels (Right lettered panels) (Ransohoff et al. 2012).

1.1.1.1.2. Astrocytes

Astrocytes, on the other hand, are glial cells that differentiate from a neural stem cell (NSC) pool during embryogenesis—around 16–18 weeks in human gestation (E17 in rodents)—with the peak of astrogliogenesis occurring during late prenatal/early postnatal development (P1 to P10 in rodents) (Rowitch and Kriegstein, 2010). Astrocytes are the best-characterized innate immune neuroglia (Ransohoff et al. 2012). These glial cells have a crucial role in terms of buffering CNS potassium, removing and recycling potentially toxic glutamate, brain water homeostasis, modulating the synaptic activity, blood flow, blood brain barrier (BBB) permeability and neurogenesis (Abbott *et al.*, 2006; Kim *et al.*, 2006; Allaman *et al.*, 2011). Astrocytes are also endowed with trophic, metabolic and antioxidant effects (Nash *et al.*, 2011; Ares-Santos *et al.*, 2013). Astrocyte dysfunction, termed “reactive astrogliosis,” is a common response to all CNS injuries/diseases encompassing a spectrum of changes ranging from hypertrophy to chronic scar-forming proliferating and migrating astrocytes (Sofroniew and Vinters, 2010). Villareal *et al.* (2014) argued that DAMPs/RAGE interaction is essential to expand reactive gliosis in the injured brain being a tempting target for limiting reactive gliosis to prevent the glial conversion into the neurodegenerative profile (Villareal *et al.* 2014). Additionally, upon activation of PRRs, astrocytes participate in innate immune reactions and are the principal CNS sources of innate inflammatory mediators, including several complement components, IL-1 β , IL-6, and chemokines such as CCL2, CXCL1, CXCL10, and CXCL12 (Ransohoff *et al.*, 1993; Vesce *et al.*, 2007; McKimmie *et al.*, 2010) (**Figure 1.3**).

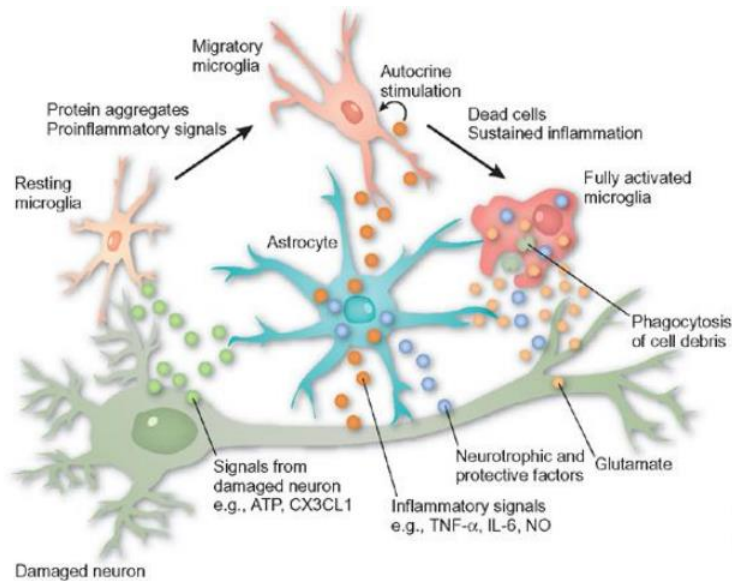


Figure 1.3 Depiction of an innate immune reaction of an activated astrocyte. Upon astrocytes activation through its PRR, an innate response played by astrocytes is triggered and, thus inflammatory mediators are released. (Taken from Monk *et al.*, 2006).

1.1.1.2. RAGE Receptors

The receptor for advanced glycation end-products (RAGE, also known as AGER), plays a central role in the inflammatory response mediating aspects of innate immunity (Tian *et al.*, 2007). In fact, RAGE has been implicated in the sustainment of glial activation and neurotoxicity (Koch *et al.*, 2010)

RAGE, which was described from mouse lung by Neeper and colleagues in 1992, is a cell-surface receptor belonging to the superfamily of immunoglobulin proteins (Neeper *et al.*, 1992). It is encoded on the short arm of chromosome 6 (6p21.3), in the major histocompatibility complex III (MHC), a region containing numerous genes with an inflammatory function, that includes components of the complement system and various cytokines, such as TNF- α (Sugaya *et al.*, 1994; Vissing *et al.*, 1994; Traherne *et al.*, 2008). Since then, increasing attention has been drawn to the molecular nature of RAGE signaling and its role in cellular physiology (Koch *et al.*, 2010) due to its involvement in different pathologies (Leclerc *et al.*, 2010) associated with inflammatory response (Hofmann *et al.*, 1999). For example, increased expression of RAGE was reported in patients with Parkinson’s disease (PD) as well as in PD animal models (Dálfo *et al.* 2005; Viana *et al.*, 2016). Studies in the postmortem human alcoholic brain and in preclinical models of adolescent binge ethanol treatment find increased expression of RAGE in the adult prefrontal cortex (Vetreno *et al.* 2013).

1.1.1.2.1. RAGE Structure and diversity

It has been proven that this receptor is highly conserved across species, for instance, bovine and human RAGE share 90% of homology (Neeper et al., 1992; Brett et al., 1993). Human cDNA comprises 1406 base pairs (bp) encoding an entire mature protein of 404 amino acids. This human form includes an extracellular domain of 321 amino acids, a single transmembranar domain of 19 amino acids and an intracellular domain of 41 amino acids. (Neeper et al., 1992). Thus, the resulting transcribed mRNA is translated into a canonical full-length protein (commonly denominated flRAGE or mRAGE) of 404 amino acids with a molecular mass of ≈ 55 kDa and comprising five domains: three extracellular ligand-binding domains, a membrane-spanning helix, and an intracellular domain as shown in **Figure 1.4** (Neeper et al., 1992).

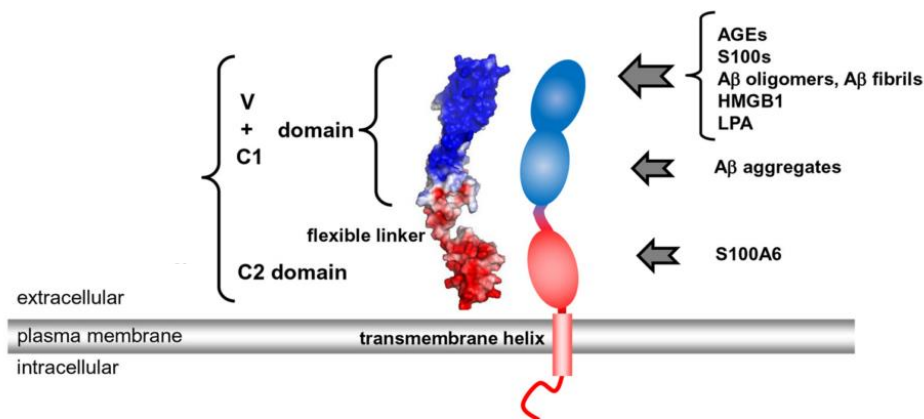


Figure 1.4 Schematic illustration of the domains of RAGE receptor. The areas in blue (V and C1 regions) stand for positive charge whereas areas in red (C2 region) represent negative charge. Several RAGE ligands are also depicted at the right-hand side (Figure extracted from Koch et al., 2010)

The ectodomain of RAGE comprises three immunoglobulin domains, one V-type and two C-type (C1 and C2) (Schmidt et al., 1992), depicted in the **Figure 1.4**. At the N-terminal, V and C1 domains form an integrated structural unit, independent from C2 domain, known as VC1, to which most of the reported RAGE ligands bind (Dattilo et al., 2007; Koch et al., 2010). Lastly, C2 is the third C-type domain and is attached to VC1 unit through a flexible linker (Dattilo et al., 2007). C2 domain is followed by the transmembrane helix which is anchored in the plasma membrane (Schmidt et al., 1992; Dattilo et al., 2007). Other splice variants of RAGE result in changes that might affect the extracellular ligand-binding domain (typically denominated as N-terminal truncated) and the removal of the sequence encoding the transmembrane/cytosolic

region, thus generating C-terminally truncated isoforms (Hudson et al., 2008; Kalea et al., 2011; Lopez-Diez et al., 2013). One C-truncated isoform is an endogenous secretory variant of RAGE (esRAGE), which is soluble (Hudson et al., 2008). Formation of secreted isoforms variants is a common phenomenon amongst membrane receptors, often acting as antagonist versions of their membrane bound version (Muda et al. 2005; Fry & Toker 2010). In fact, sRAGE may prevent RAGE signaling by acting as a “decoy” receptor. Soluble RAGE isoforms can also be produced by constitutive or induced ectodomain shedding of flRAGE by metalloprotease 10 (ADAM10) metalloprotease 9 (MMP9) and/or γ -secretase (Galichet et al., 2008; Braley et al., 2016; Metz et al., 2012) (**Figure 1.5**). Both soluble RAGE isoforms (esRAGE and cleaved RAGE) circulate in human plasma. In addition, RAGE variants, who exhibit decreased ligand binding ability (N-terminally truncated) or lack cytosolic region (C-terminally truncated), may also contribute to the overall regulation of flRAGE cellular function (Chuah et al., 2013)

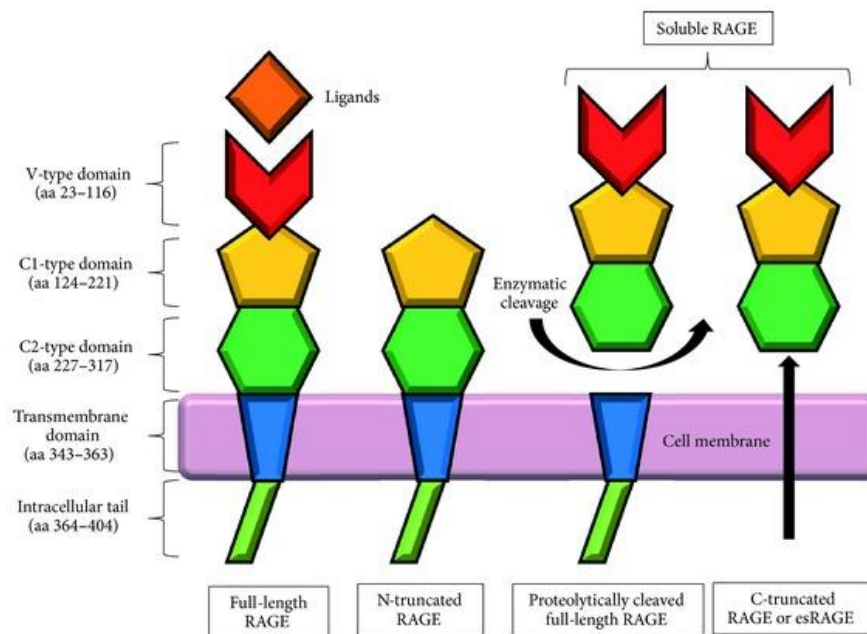


Figure 1.5 Representation of full-length RAGE and its splice variants. RAGE is composed of an intracellular tail, a transmembrane domain, and an extracellular domain consisting of three immunoglobulin-like domains, one V-type followed by two C-type (C1 and C2) domains. C stands for constant whereas V stands for variable. (Picture taken from Chuah et al., 2013)

Chapter 1 - Introduction

The V-type domain is essential for ligand binding, and so the elimination of this domain gives rise to the N-truncated form. On the contrary, the C-truncated, circulating soluble RAGE form, comprises the extracellular domain of RAGE, without the intracellular tail or transmembrane domains. This truncated form may be described to be a consequence of the proteolytic cleavage of full-length RAGE, from the cell surface (cRAGE) or via alternative splicing of RAGE mRNA (esRAGE). (Chuah et al., 2013)

RAGE is constitutively expressed during embryonic development, contributing positively to cellular migration and differentiation of the neuronal tissue and neurite outgrowth (Wang et al., 2008; Saleh et al., 2013), yet it is expressed at lower levels in adulthood (Brett et al., 1993). Whereas, in pathological scenarios, such as neuroinflammation, RAGE tends to be strongly overexpressed, (Fang et al., 2010).

Noteworthy, RAGE receptor exhibits broad expression on many different cells including non-immune cells such as smooth muscle cells, hepatocytes and cardiac myocytes (Brett et al., 1993) and immune cells like mononuclear phagocytes, T and B lymphocytes and dendritic cells (DCs) (Dumitriu et al., 2007; Chen et al., 2008; Manfredi et al., 2008; Akirav et al., 2012). Importantly RAGE is also expressed by CNS cells, including neurons, microglia and astrocytes and endothelial cells (Brett et al., 1993; Schmidt et al., 2001).

1.1.1.2.2. The nature of RAGE ligands

RAGE physiological and pathological effects strongly depend on the cell type and their signaling pathways, the surface concentration of RAGE and adaptor molecules, not to mention the concentration and ligand nature (Leclerc et al., 2008; Hans et al., 2011). As a multiligand receptor, RAGE recognizes a broad repertoire of structurally different ligand families (Hori et al., 1996; Yan et al., 1996; Hofmann et al., 1999).

The first RAGE ligands to be identified were nonenzymatically modified proteins, lipids, and nucleic acids, also known as, advanced glycation end-products (AGEs) (Neeper et al., 1992). These RAGE-AGEs interactions were described in endothelial cells, smooth muscle cells, and mononuclear phagocytes (Basta et al., 2002). AGEs increase concentration as a consequence of aging and inflammatory events. (Cipollone et al., 2003). AGEs cause perturbation in a diverse group of diseases, such as diabetes, inflammation, neurodegeneration, and aging. (Ramasamy et al., 2005)

S100 calgranulins, a family of Ca^{2+} -binding proteins, are among the best characterized ligands to RAGE. Particularly, S100 β is widely expressed in astrocytes and is involved in a large number of cellular functions such as calcium homeostasis, cell growth and differentiation, dynamic of cytoskeleton or energy metabolism (Donato et al., 2003). These intracellular molecules may achieve extracellular space at low concentrations, triggering trophic effects and repair after injury: nanomolar concentrations of S100 β stimulates neurite outgrowth and enhanced neuronal survival during development or after injury (Winningham-Major et al., 1989; Saleh et al., 2013). However, submicromolar-microamolar concentrations of S100 β may engage in neurotoxic/neurodegenerative processes (Donato et al., 2009).

Other ligands include amphoterin protein or high mobility group box-1 (HMGB-1), and amyloid-beta peptide ($\text{A}\beta$) in the form of soluble oligomers, beta sheets containing fibrils, and insoluble aggregates as well (Hori et al., 1995; Yan et al., 1996; Schmidt et al., 2001; Bucciarelli et al., 2002).

1.1.1.2.3. Intracellular pathways

Upon RAGE ectodomain-ligands interaction, intracellular factors, such as mammalian Diaphanous-1 (mDia-1), are recruited to the site of cytoplasmic domain, triggering a molecular wave propagation of intracellular signals (Hudson et al., 2008). Moreover, activated RAGE is known to recruit extracellular signal-regulated kinase-1 and -2 (ERK-1/2) resulting in downstream activation of NF- κ B via the mitogen-activated protein kinase (MAP kinase) pathway (Ishihara et al., 2003). This transcription factor, NF- κ B, illicit the production of pro-inflammatory molecules and enhances RAGE expression, initiating a positive feedback loop in RAGE signaling, fueling the inflammatory response and further RAGE expression, thereby perpetuating another wave of cellular activation (Schmidt et al., 1999). (**Figure 1.6**).

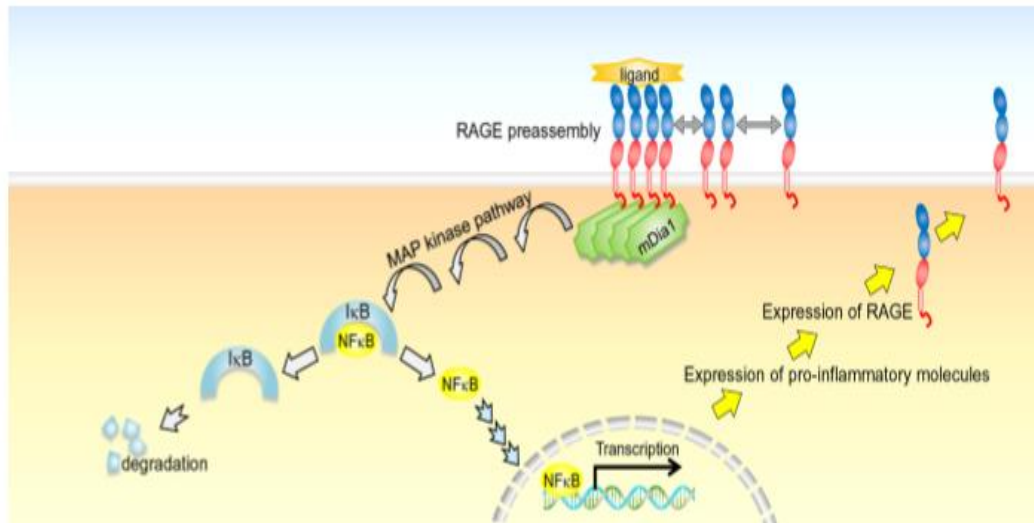


Figure 1.6 Schematic representation of the putative mechanism for regulation and activation of RAGE receptors. After RAGE-ligands binding intracellular signaling pathways are triggered, leading to NF-κB inflammatory regulator molecule activation with consequent production of pro-inflammatory molecules, as well as increased RAGE expression (This image was taken from Kierdorf et al., 2013).

Additionally, intracellular multiple and complex signaling pathways, upon RAGE-ligands binding, occur, as mentioned before, in endothelial cells, microglia, and neurons, with several effector events occurring downstream, as seen in **Figure 1.7.** (Donato and Heizmann, 2010)

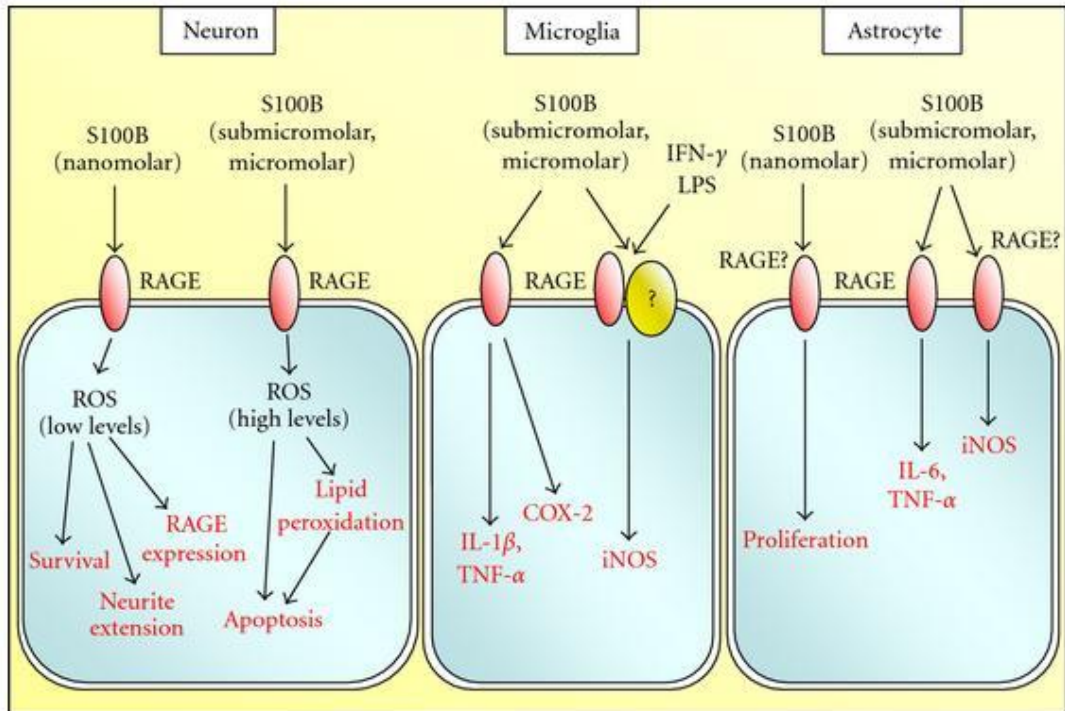


Figure 1.7 Schematic illustration of the impact of RAGE-S100 β binding on neurons, microglia, and astrocytes. (Image taken from Donato and Heizmann, 2010).

Several authors have suggested that RAGE oligomerization assembly enables ligand binding, at the same time that this assembling is stabilized by those binding ligands (S100B, S100A12, or polymeric glycated proteins for instance), which might explain why and how RAGE activation, through multimeric ligands binding, leads and sustains the exerted positive feedback loop. (Koch et al. 2010). **Figure 1.8** In addition, increased RAGE levels will promote preassembly, which possibly explains the consequent hyperactivation of the RAGE pathway in long-term tissues dysfunction (Bierhaus and Nawroth 2009; Rojas et al. 2010) chronic inflammatory or neurodegenerative disorders (Koch et al. 2010).

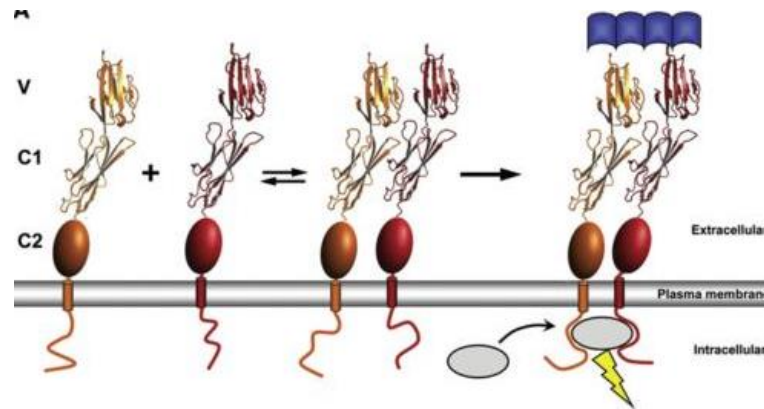


Figure 1.8 Depiction of RAGE oligomerization assembly and subsequent multimeric ligands binding. (Koch et al., 2010)

1.2. Challenging the Innate Immunity:

1.2.1. Drugs of Abuse: the other side of the coin

Drugs of abuse are a global issue with an undeniable expression on public health, development, peace and human rights, not to mention security, with approximately 190,000 people dying every year due to illicit drugs consumption. (UNODOC, 2017). Novel avenues in drug addiction sciences are being explored. As an example, there is a growing body of evidence regarding the impact of drugs of abuse including opioids, cannabinoids, alcohol and the psychostimulants cocaine and amphetamine-type stimulants (ATS) to both peripheral and central innate immunity (Szabo et al., 2015).

1.2.1.1. Amphetamine-Type Stimulant (ATS), as the origin of a season

Psychostimulants are a group of psychoactive substances which are capable of enhancing physical and cognitive activity, being associated with a high potential of addiction (Aghajanian et al., 1999; Greyer et al., 2009). According to a report published by UNODC (2011), ATS such as "ecstasy" and methamphetamine were considered the world's second most widely abused drug type after cannabis, becoming one of the major public health issue worldwide, since the 1990's (UNODOC, 2011) (**Figure 1.9**).

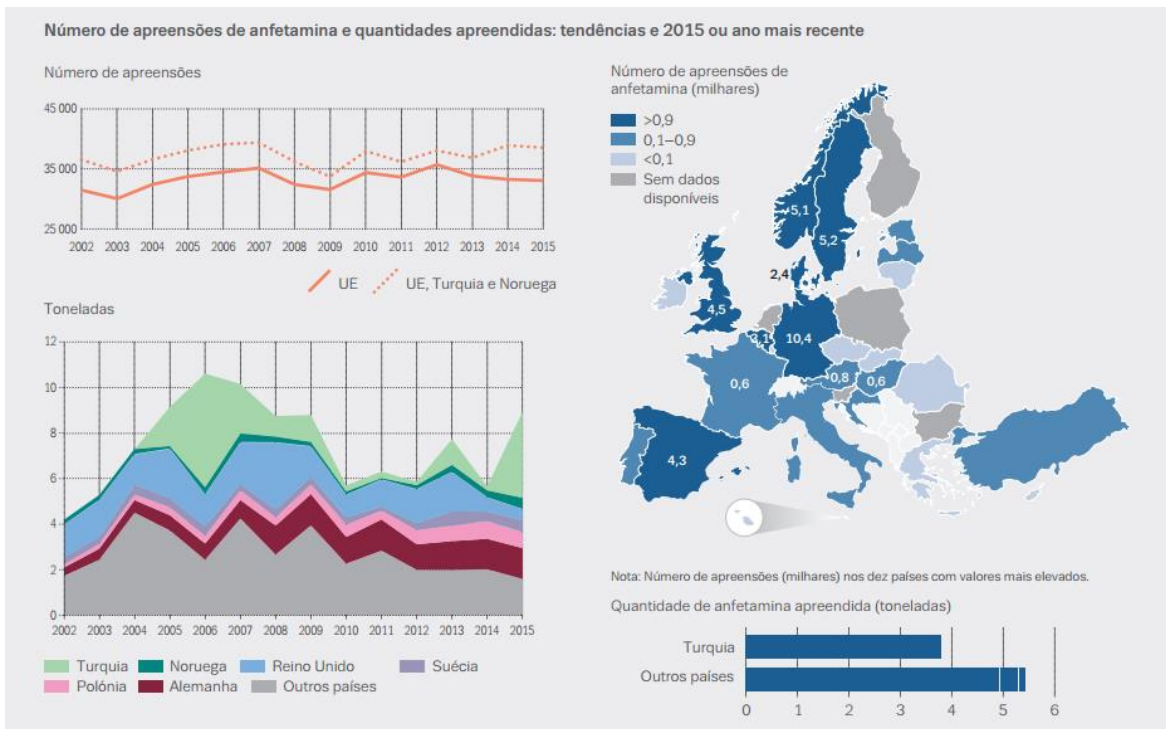


Figure 1.9 Schematization of some statistics concerning ATS in Europe as well as in Portugal. In the upper picture, quantitative expression of MDMA and anfetamines consumption, in Portugal as well in European Union. In the bottom picture, statistics on the quantity of anfetamines reported in the last couple of years, in several countries in Europe. (European Observatory on Drugs and Toxic dependence, 2017).

Chapter 1 - Introduction

In 2011, UNODOC Executive Director, Yury Fedotov, mentioned that: "*The ATS market has evolved from a cottage-type industry typified by small-scale manufacturing operations to more of a cocaine or heroin-type market with a higher level of integration and organized crime groups involved throughout the production and supply chain. We are seeing manufacturing shifting to new markets and trafficking routes diversifying into areas previously unaffected by ATS.*" (UNODOC, 2011)

The recently released World Drug Report 2017 highlights that old drugs of abuse including heroin still continue to be a threat, while, at the same time, methamphetamine and new psychoactive substances (NPS) spread. Moreover, it is highlighted that business models are evolving under the influence of the ever-increasing cybercrime and "darknet" (UNODOC, 2017).

Amphetamine-type stimulants (ATS) are widely used and abused these days and involve chemically-related substances such as methamphetamine (METH), 3,4-metilenedioxi-N-metanfetamina (also known as MDMA or Ecstasy) and metilenedioxiprovalerone (MDPV) **Figure 1.10** (Aghajanian et al., 1999; Greyer et al., 2009). Pharmacologically, these are categorized as indirectly-acting sympathomimetics as they enhance the levels of catecholamines (noradrenaline, dopamine and adrenaline) in the synaptic cleft, both in central and peripheral nervous system (Szabo et al., 2015). Serotonin levels are also increased (Szabo et al., 2015).

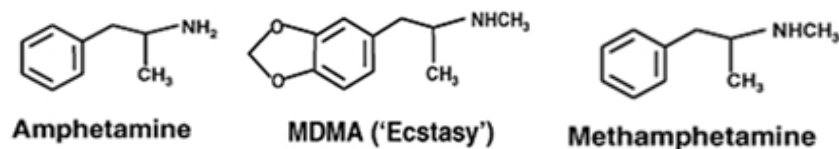


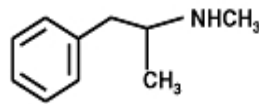
Figure 1.10 Representation of some of the Amphetamine-type stimulants (ATS) (Boyle et al., 2010).

1.2.1.1.1. Methamphetamine (METH), a case still open to debate

1.2.1.1.1.1. Methamphetamine (METH): the one and only

Methamphetamine (METH), as depicted in **Figure 1.11**, is as a highly addictive amphetamine-type stimulant (ATS) which promotes the release of neurotransmitters such as

noradrenalin and dopamine (or mentioned as an indirect agonist of dopamine), and its effects are very similar to the ones produced by cocaine, but tend to be more long-lasting. (Downes et al., 2005; Collins et al., 2014). It is well known that this drug accounts for many major psychiatric disturbances, including mood impairment, severe public health issues and socioeconomic problems (Courtney et al., 2014).



Methamphetamine

Figure 1.11 Chemical structures of methamphetamine. (Boyle et al., 2010).

1.2.1.1.1.2. Math behind METH: a queen with a solid throne

Since the last couple of years, METH is one of the most popular illicit drugs consumed worldwide, (Kaushal et al., 2011), as seen in **Figure 1.12**, and in particular, the second most commonly used illegal substance worldwide, after cannabis (UNODC, 2014), dominating the global ATS market (UNODOC, 2017), as seen in **Figure 1.13**.

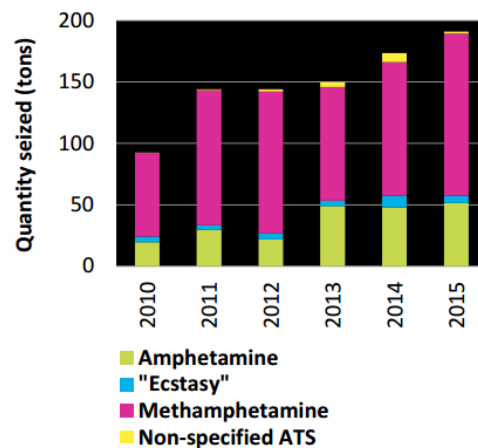


Figure 1.12 Quantities of amphetamine-type stimulants seized worldwide between 2010 and 2015. (UNODOC, 2017)

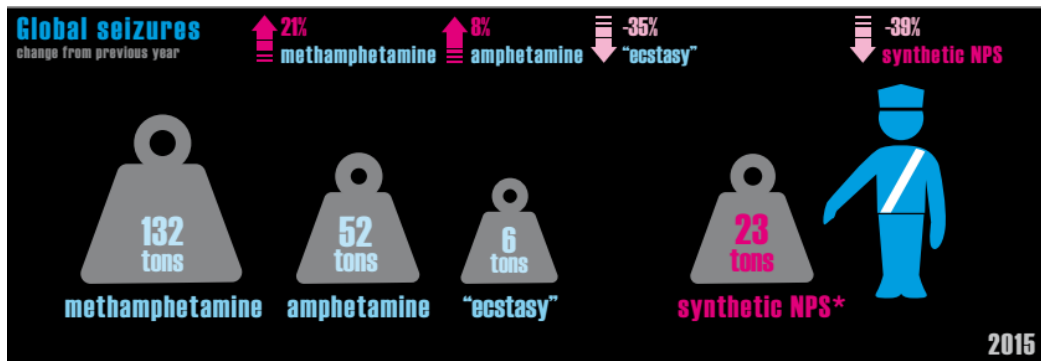


Figure 1.13 Schematic depiction on alterations of methamphetamine seizures from 2014 to 2015. (UNODOC, 2017)

Methamphetamine consumption is still spreading, embodying a major global health issue, consistent with the increasing number of methamphetamine users seeking treatment (World Drugs Survey, 2017) (**Figure 1.14**).

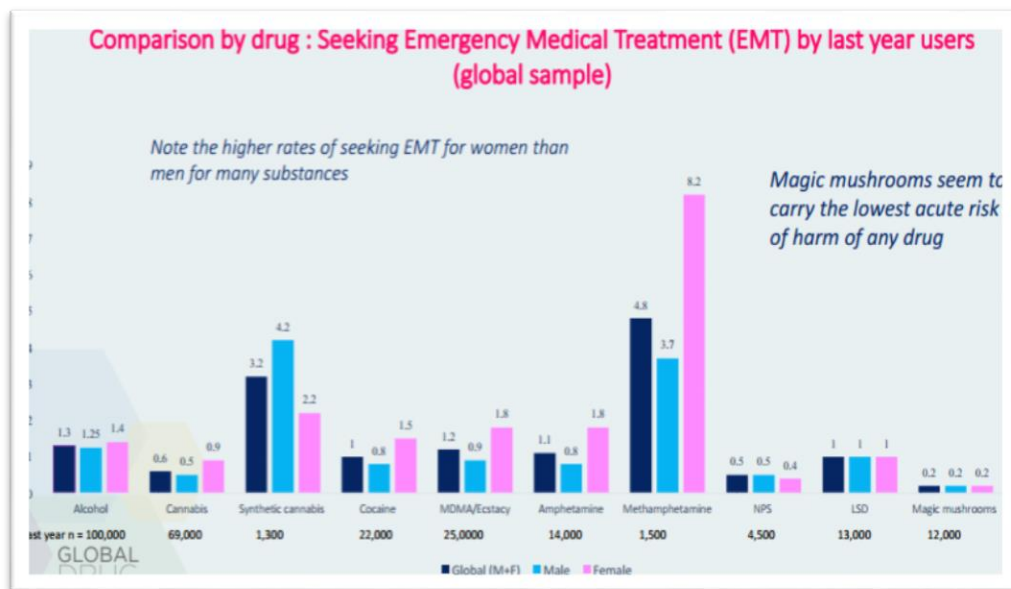


Figure 1.14 Global comparison of emergency medical treatment seeking, in the last 5 years. (World Drugs Survey, 2017)

1.2.1.1.1.3. “Biography” of a “Crystal” star: some historical facts

Literature claims that the Japanese researcher Nagayoshi Nagaiwas was the first to synthesize METH from the precursor ephedrine (Nagai and Kamiyama, 1988).

Historic facts also suggest that METH consumption became to be prominent during World War II, (1945-1948), when it was currently recommended by the governments to the military army to mitigate fatigue, to enhance endurance and alertness (Meredith et al., 2005; McGuinness, 2006). Although amphetamine-type stimulants were banned by the Food and Drug Administration (FDA) in late 1950s due to its high abuse potential (Roll et al., 2006), amphetamine and some derivatives were medically use in cases of hyperactivity, obesity, narcolepsy, and depression (Wolkoff, 1997). In the later 1980s, the consumption of METH increased, as the number of clandestine laboratories boomed (Cunningham and Thielemeir, 1996).

Currently, METH misuse and addition is a worldwide problem and governments and international organizations have begun to tackle this major global epidemic (UNODC, 2014). So far, the most common designations or “street-names” for METH are: crystal, crank, ice, glass, go, speed, and zoom. (UNODC, 2014)

1.2.1.1.1.4. Overall perspective on stimulant & neurotoxic effects

As a psychostimulant substance, METH, **at lower doses**, induces pharmacological effects associated with euphoria and enhanced mood, self-confidence, sociability alertness, concentration and energy boost (Kaushal et al., 2011; FDA, 2014). However, **higher doses** of methamphetamine may induce neurotoxic effects which translate into complex psychiatric symptoms, including depression, anxiety, psychosis, irritability, obsessive behaviors, suicide behavior as well as cognitive impairments (Kaushal et al., 2011; FDA, 2014). On the other hand, **METH overdosing** may be responsible for cardiogenic shock, cerebrovascular accidents, high body temperature, pulmonary hypertension and kidney failure, to name a few (FDA, 2014). Acute as well as long-term neurotoxic effects underlying effects on psychomotor behaviors reflect neurochemical as well as brain structural alterations (Robinson and Becker, 1986; Ernst et al. 2000; Srisurapanont et al., 2003; Chang et al. 2007). Overall, METH abuse may result in addiction, weight loss and in neuropsychological impairments (Scott et al., 2007). Moreover, METH withdrawal may be related to anxiety, drug cravings, fatigue, increased or decreased movement, depression, lack of motivation, sleeplessness or sleepiness, for instance (Shoptaw et al., 2009). Other effects of

METH include excessive sweating, high body temperature, blurred vision, tremors, dry skin, and "meth mouth", which is characterized by abnormal teeth loss (FDA, 2014).

To our knowledge, there is no effective treatment for METH addiction. This may reflect a particularly unsatisfying knowledge of the molecular and cellular mechanisms of METH. For this purpose, scientists have proposed repeated administration of METH in rodents as a model to uncover the nature of METH action (Krasnova et al., 2011; McCoy et al., 2011).

1.2.1.1.1.5. Dopamine, it is never enough

Dopamine (DA) regulates important physiological brain's functions, including locomotion, emotion, motivation, reward and cognition through different DAergic pathways, mainly originating in two mesencephalic nuclei, the ventral tegmental area (VTA) and the substantia nigra *pars compacta* (SNpc) (Calabresi *et al.* 2007; Ledonne and Mercuri, 2017; Everitt and Robbins, 2013). DAergic neurons of the VTA project to limbic areas (nucleus accumbens, NAc), hippocampus and amygdala) and cortical regions, including frontal cortex, thus composing the mesolimbic- and mesocortical pathways, respectively, (Wise, 2004; 2005) those of the SNpc constitute the nigrostriatal pathway mainly projecting to the dorsal striatum. (Barbeau, 1974; Smith, Y. & Villalba, R., 2008)

DA is a neuromodulator synthesized in the cytoplasm of dopaminergic neurons and depends on the enzymatic role of tyrosine hydroxylase (TH), which is responsible for the production of L-dihydrophenylalanine (L-DOPA) from tyrosine. (Meiser et al., 2013). This is the rate limiting step of DA synthesis (Meiser et al., 2013). Afterwards, DA is either sequestered into vesicles by vesicular monoamine transporter (VMAT-2) or is metabolically degraded (as reviewed in Pereira et al., 2012) (**Figure 1.15**).

DA receptors are coupled to heterotrimeric G proteins and are grouped according two distinct families: D1-like receptors, including D1 and D5 receptors, and D2-like, including D2, D3 and D4 receptors (Beaulieu and Gainetdinov, 2011). D1-like receptors are found post-synaptically, whereas D2-like receptors are expressed not only pre-synaptically, but also post-synaptically (Beaulieu and Gainetdinov, 2011). DA receptors are expressed in several brain regions, including frontal cortex, striatum, NAc, olfactory bulb, amygdala and also, but in lower concentrations, hippocampus and VTA (Moratalla et al., 1996; Beaulieu and Gainetdinov, 2011; Gangarossa et al., 2012).

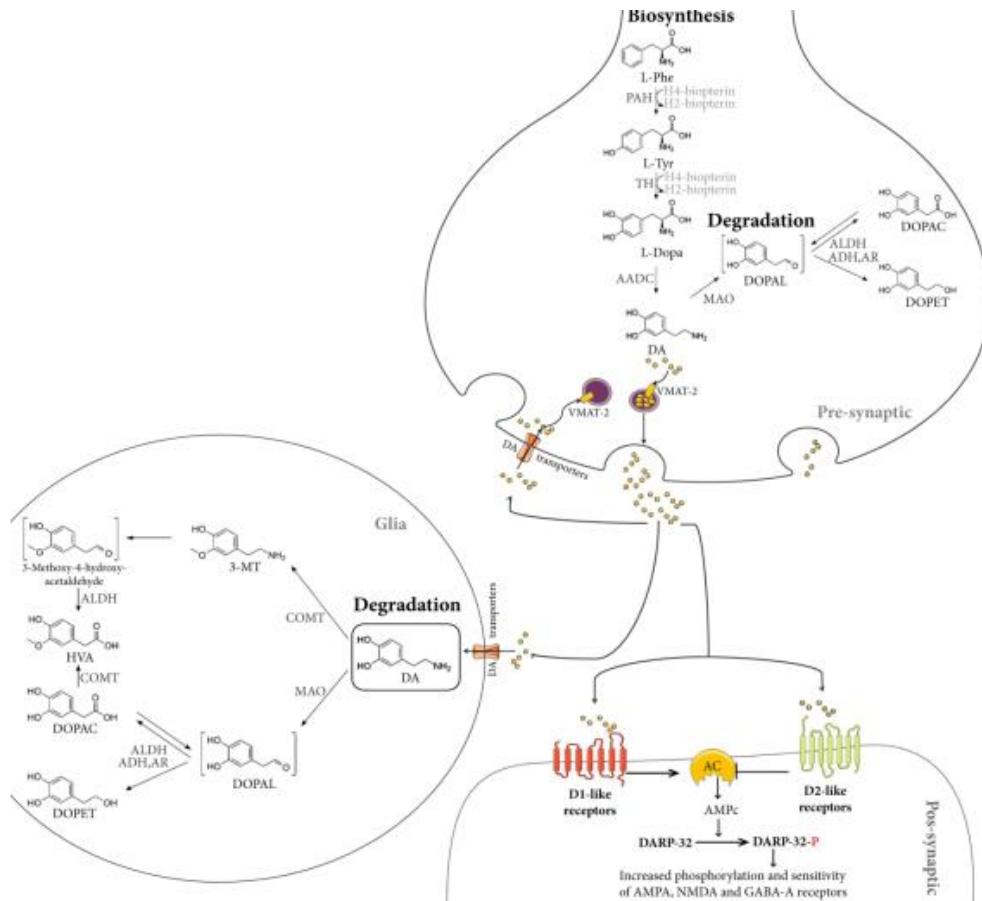


Figure 1.15 Dopamine life-cycle. (Taken from Viana, 2016)

1.2.1.1.1.6. METH reinforcing effects

An acute exposure to METH leads to the activation of the mesocorticolimbic dopaminergic systems, thereby producing rewarding effects (Kalivas and Stewart, 1991; Koob 1992; Brown et al., 2002; Rose & Grant 2008). In fact, reverse transport of dopamine via DAT and inhibition of VMAT-2 are primary mechanisms of action of METH, resulting in the massive outflow of dopamine from the presynaptic terminal into the synaptic cleft (Pereira et al. 2002; 2004; 2011; Fleckenstein et al. 2007; Volkow et al. 2007).

1.2.1.1.1.7. METH neurotoxic effects: dopamine system as the selected target

METH causes neurotoxicity in a dose-dependent manner (Seiden and Sabol, 1996), similarly to other amphetamine-type stimulants such as MDMA (Granado et al., 2008a; 2008b).

A large body of evidence supports that exposure to high doses or repeated doses (chronic exposure) of METH lead to long-lasting striatal dopaminergic axon terminals degeneration in animal models as well as in humans, as evaluated by a decrease in the following dopaminergic markers: DA, TH and VMAT-2 (Kogan et al., 1976; Wagner et al., 1980; Volkow et al., 2001a; Volkow et al., 2001b; Kita et al. 2003; Krasnova and Cadet 2009; McCann et al., 2008). Dopaminergic deficits were also evaluated in other brain regions including frontal cortex (Silva et al. 2014).

That is why some authors coined dopaminergic system as the ultimate target for the neurotoxic effects of METH (Krasnova and Cadet 2009)

Moreover, several lines of evidence suggest that individuals with a history of METH abuse have an increased risk for developing Parkinson's Disease, when compared to healthy people and individuals with a history of cocaine consumption (Callaghan et al., 2010; Callaghan et al., 2012).

1.2.1.1.1.8. Central toxicity beyond the dopaminergic system

In addition to dopaminergic neurons, METH is known to cause disruption to other neurochemical systems: serotonergic pathways - associated with mood - (Krasnova and Cadet, 2009; Silva et al., 2014), glutamatergic pathways – crucial in addiction, memory dysfunctions and psychotic episodes - (Simões et al., 2007; Miyazaki et al., 2013; Zhang et al., 2014), GABAergic pathways – influential on cognitive impairments and anxiety during withdrawal (Zhang et al., 2006; Mizoguchi and Yamada, 2011; Shen et al., 2013) and cholinergic pathways - related with locomotor abnormalities as well (Lim et al., 2014).

Therefore, degenerative brain alterations, from chronic administration, could be verified primarily in terminals of dopamine and serotonin neurons (Seiden and Sabol, 1996; Ricaurte et al., 1980).

It is noteworthy, that final neuronal and behavioral are related with the structural and functional connections between these neurotransmitter and dopaminergic systems (Miyazaki et al., 2013).

1.2.1.1.1.9. Neuroinflammation & METH

It is known that METH treatment induces neuroinflammatory processes in the rodent brain, with glial reactivity, production of pro-inflammatory cytokines (eg. TNF- β and IL-1 β) peripheral immune cells infiltration and BBB disruption (Thomas et al, 2004; Gonçalves et al., 2010; Martins et al., 2011; Silva et al., 2014;). This is highly suggestive that METH impacts both innate as well as adaptative immunity.

Increasing body of evidence highlights the likelihood of the acquisition of human immunodeficiency virus (HIV) and other infectious diseases by METH abusers (Ellis et al., 2003; Urbina et al., 2004; Mansergh et al., 2006; Nakamura et al., 2011). However, there are limited studies about the effects of METH on DAMPs and PRRs that are known to activate glial responses. For example, Frank et al. (2016) suggested that HMGB1 mediates, in part, striatal neuroinflammatory effects of METH. (Frank et al., 2016) However, these authors failed to characterize its cognate receptors including RAGE. However, we previously showed that levels of striatal fRAGE were not altered 3 days post a neurotoxic METH dose (Pereira et al. 2012). Also, DAMPs originated from astrocytes (eg. S100 β) were also never tested. Therefore, more research on the impact of METH on central immune innate players is warranted.

1.2.1.2. New Psychoactive Substance (NPS): the novelty in the field

United Nations Office on Drugs and Crime (UNODOC) filed new synthetic cathinones as new psychoactive substance (NPS) (UNODOC, 2011). UNODOC supports filing substances under NPS according to different categories which include chemical structure (for example, phenethylamines, tryptamines) and/or pharmacological effects (for example, cannabinoid receptor agonists) (**Figure 1.16**). Yet, it is also relevant to note that similar chemical structures do not mean identical pharmacological effects, and vice-versa, similar pharmacological effects might not reflect same chemical structures (UNODOC, 2017).

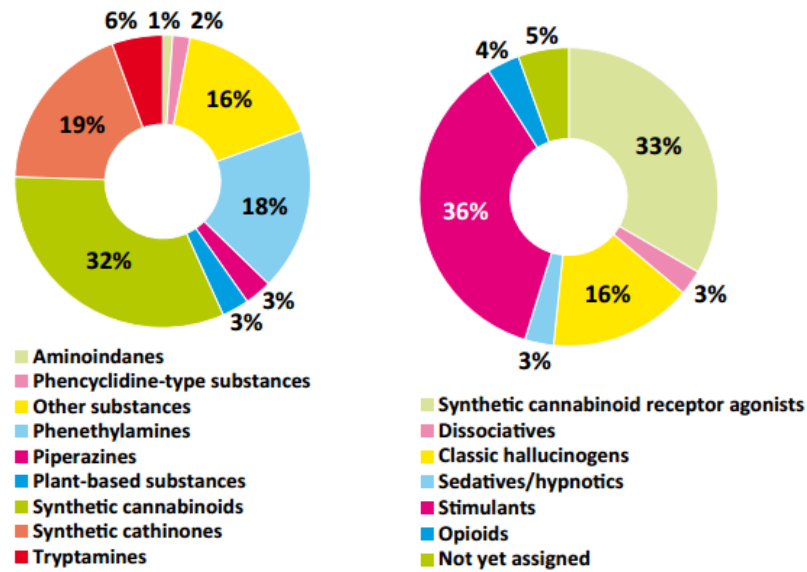


Figure 1.16 Proportion of new psychoactive substance category, in December 2016 (left-hand side); and proportion of new psychoactive substance, by pharmacological effect, in December 2016 (right-hand side). (UNODOC, 2017)

NPS have similar effects to classical drugs such as cannabis, cocaine, heroin, (+)-lysergide (LSD), MDMA (“ecstasy”) and methamphetamine (UNODOC, 2017). Moreover, NPS can be termed as “legal highs” and “research chemicals” or “design drugs”; their increased intake trends are associated with the use of pills, liquids and powders rather than herbal smoking mixtures. (Global Drug Survey, 2017). Synthetic cathinones are sympathomimetic drugs that act on serotonin, dopamine and noradrenaline pathways. It came with little surprise that vertigo, paranoia, convulsions, agitation and restlessness were associated with their intake (Schifano et al., 2012; Loi et al., 2015).

Chapter 1 - Introduction

These cathinones as well as synthetic cannabinoids represent nearly more than 50% of the NPS available in the market, being China or Oriental East the countries with the largest production worldwide (López-Arnau et al., 2012). The incredibly easy access to these cathinones, gauged by the ages of NPS users (**Figure 1.17**) including the newly synthesized MDPV, in the global drug market, through smart shops, internet (“darknet”), and the aspect of “fake legality” of such substances, as well as the relative affordability and better quality compared with traditional drugs, contribute to their increasing popularity (DEA, 2011; UNODC, 2017) (**Figure 1.18**).



Figure 1.17 Schematic representation of NPS consumption statistics in Europe. (European Observatory on Drugs and Toxic dependence, 2017).

Chapter 1 - Introduction

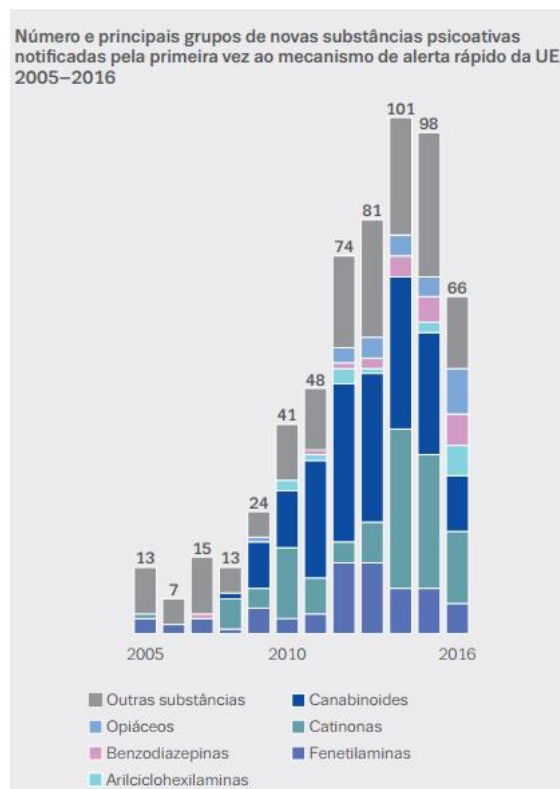
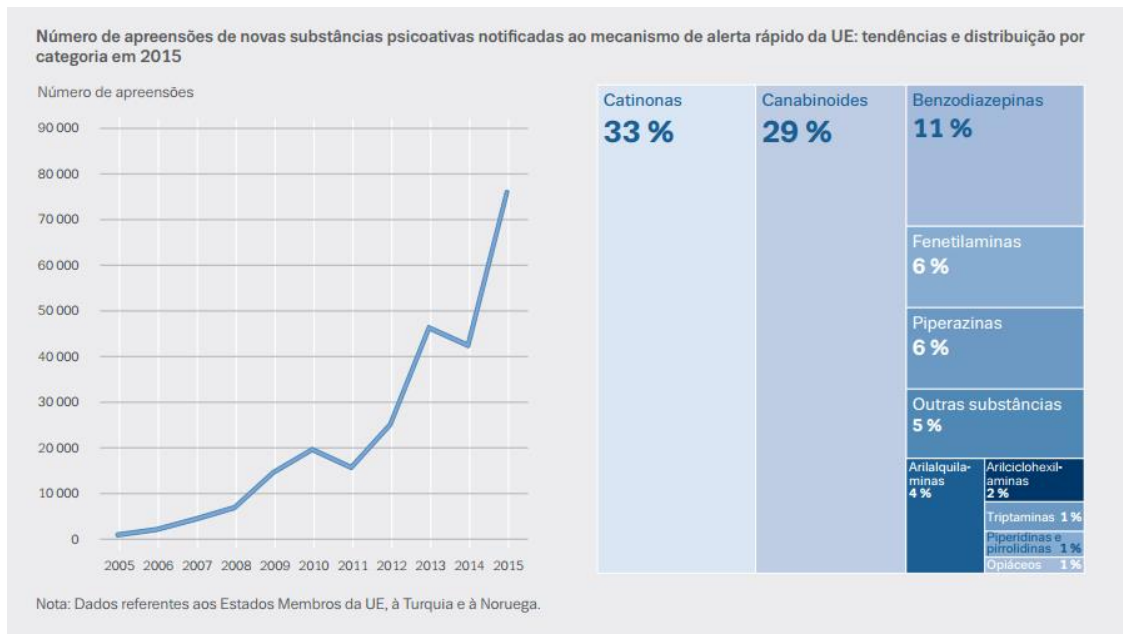


Figure 1.18 Annual amounts of synthetic new psychoactive substances seized in Europe, 2005-2015, illustrated in upper and bottom pictures. (UNODOC, 2017)

Concerning the first aspect, the drug report of European Monitoring Centre for Drugs and Drug Addiction European (EMCDDAE) claimed that, in 2013, the number of sites online selling MDPV was approximately 651, meaning that the internet has emerged as the prominent market, the so-called “darknet” (**Figure 1.19**) (EMCDAE, 2013). It also gives open access to ways of synthesizing and consuming details. In what respects to the aspect of the “fake legality”, it is closely related to the fact that structure of NPSs can easily undergo chemical changes in functional groups, thus being converted into new molecules with brand new chemical designations not being covered by the ongoing legislation (Schifano et al., 2016).

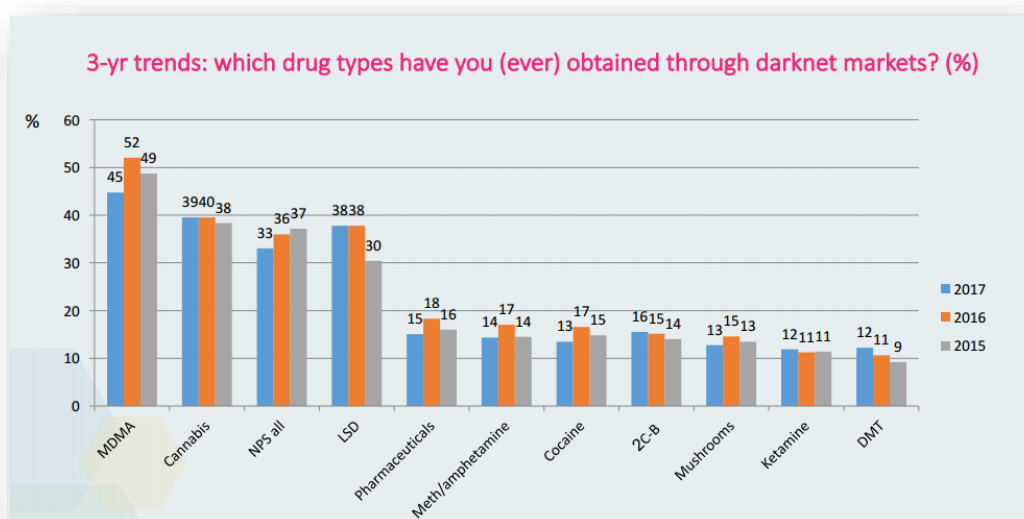


Figure 1.19 Percentages of types of drugs purchased through the so-called “darkmarkets”. (Global Drug Survey, 2017)

1.2.1.2.1. Methylenedioxypropylvalerone (MDPV) pharmacodynamics and pharmacokinetics: modern ways of bathing

Methylenedioxypropylvalerone (MDPV) is a synthetic cathinone and therefore is a psychoactive substance. It is commonly and commercially known as "bath salts" or "plant food", acting as a substitute for illegal stimulant drugs such as cocaine (Karila et al., 2015; UNODOC, 2011).

Chapter 1 - Introduction

Bath salts forensic analysis, in 2010 and 2011, identified, among others, three main synthetic compounds: 4-methyl-N-methylcathinone (mephedrone), 3,4-methylenedioxy-N-methylcathinone (methylone), and 3,4-methylenedioxypropyl-N-methylcathinone (MDPV), (Shanks et al., 2012; Spiller et al., 2011) (**Figure 1.20**). Importantly, these compounds are chemically similar to cathinones, which is naturally originated from the *khat* plant, *Catha edulis*, grown in eastern Africa and southern Arabia East, and consumed for its amphetamine-like effects (Karila et al., 2015). Bath salts were banned in US (in 2013) (Drug Enforcement Administration, 2013) and in Portugal in the 2nd March of the present year (Regulation n. ° 7/2017, 2nd March concerning *Decreto-Lei* n.º 15/93, 22th January, in *Diário da República*.)



Figura 1.20 Chemical representation of some synthetic cathinones that constitute bath salts and Mephedrone, Methylone and MDPV (Baumann et al., 2016).

Bath salts can be sold as powder or crystals and can be administered through insufflation, orally, intra-nasally, smoking, rectal and intravenous methods to produce their psychoactive effects (Psychonaut, 2009; Winstock et al., 2011). At low doses of, bath salts can evoke enhanced energy, mood and psychomotor capacity, whereas at high doses or upon a binge-like regimen it might induce hallucinations, psychotic episodes, increased heart rate, high blood pressure, hyperthermia and violent behaviors (Prosser et al., 2012; Ross et al., 2012). Additionally, “excited delirium” has also been described and includes higher body temperature, delirium, agitation, breakdown of muscle tissue, and kidney failure and even death (Kesha et al., 2013; Penders et al., 2012).

Chapter 1 - Introduction

Growing body of evidence supports that neurochemical effects of synthetic cathinones are dependent upon on two different mechanisms: the first one is the inhibition of monoamines reuptake through blockade of monoamine transporters (blockers), such as cocaine, whereas the second one is based on monoamines release by transporter-mediated exchange reverse transport (substrates), such as methamphetamine. (Rothman et al., 2001). Compounds reported in bath salts can act either as cocaine-like monoamine reuptake inhibitors, methamphetamine-like releasers, or a hybrid of both mechanisms (Nagai et al., 2007; Baumann et al., 2012; Martinez-Clemente et al., 2012)

MDPV displays a novel pharmacological profile when compared to other synthetic cathinones as it is a potent uptake blocker at DAT and NET with no measurable substrate activity (Angoa-Pérez et al., 2017; Baumann et al., 2016). When compared to the prototypical transporter blocker cocaine, MDPV was 50-fold more potent at DAT, 10-fold more potent at NET, and 10-fold less potent at SERT (Angoa-Pérez et al., 2017). Consistently, it was shown that MDPV increases extracellular levels of DA in the brain (Baumann et al. 2016, Schindler et al., 2016). This is likely to underlie its locomotor stimulant and addictive properties (López-Arnau et al., 2012). As an example, Huang et al. (2012) showed that repeated doses of MDPV induced the need of higher intake of MDPV, hence fueling tolerance and addiction with consequent increased likelihood of *overdosing*. (Huang et al., 2012)

Baumann et al. (2016) summarized MDPV pharmacokinetics profile: MDPV reaches peak plasma concentrations 10–20 min when injected into rats (0.5–2.0 mg/kg), and declines quickly thereafter. Furthermore, motor activation produced by the drug is positively correlated with plasma concentrations of parent drug and not its metabolites [3,4-dihydroxyprovalerone (3,4-catechol-PV) and 4-hydroxy-3-methoxyprovalerone (4-OH-3-MeO-PV)]. (Baumann et al., 2016)

Thus far, some of the benchmarks used to gauge the neurotoxicity induced by amphetamines include disruption of monoaminergic neurotransmitters and glial alterations. However, there is scarce information on the impact of MDPV on these parameters in animal models. Intriguingly, Anneken et al. (2015) suggested that MDPV is not neurotoxic and prevented methamphetamine-induced striatal neurotoxicity. (Anneken et al., 2015) This assumption warrants further clarification. Moreover, emotional parameters associated with MDPV consumption are far from being elucidated.

1.3. Aims and Thesis outlines

This present thesis aimed to characterize, for the first time, the impact of MDPV on frontal cortex glial cells and innate immune players including receptor for advanced glycation end-products (RAGE) and its ligand S100 β , within first 24 hours following a binge MDPV regimen. In addition, emotional behavior was assessed. A binge neurotoxic regimen of METH was also employed to deepen current knowledge on METH neurotoxicity.

Chapter 2

Materials and Methods

2.1. Drugs and chemicals

The psychostimulants used herein were the following: metilenedioxipirovalerone hydrochloride (MDPV.HCl) and metanfetamine hydrochloride (METH.HCl). Our laboratory was issued permission to import Methamphetamine-HCl from Sigma–Aldrich (Sigma–Aldrich, St. Louis, USA) by INFARMED, Portugal (National Authority for approval of Medicines and Health Products). MDPV was kindly gifted by Prof. Félix Carvalho (UCIBIO, REQUIMTE - Laboratory of Toxicology, Department of Biological Sciences, Faculty of Pharmacy, University of Porto, Portugal). All other chemicals (ultrapure and pro analysis quality) were purchased from Sigma-Aldrich and Merck AG (Darmstadt, Germany) and Santa-Cruz Biotecnology.

2.2. Animals

In the present work, male C57BL/6 mice with 10 weeks old and weighing 20-30g (Charles River Laboratories, Barcelona, Spain) were housed four per cage, under controlled environmental conditions. Such conditions included a 12 hour of light/dark cycles at room temperature (RT) of $22 \pm 1^\circ\text{C}$, with food and water supplied *ad libitum*. All experiments were approved by the Institutional Animal Care and Use Committee from Faculty of Medicine, Coimbra University, and were conducted according to the European Community directive (2010/63/EU) as well as with ARRIVE guidelines. (Kilkenny et al, 2010). Additionally, animal procedures were performed in strict accordance with the “Guide for the Care and Use of Laboratory Animals” (Institute of Laboratory Animal Resources, National Academy Press 1996). All efforts were made to minimize animal suffering and to reduce the number of used animals.

2.3. Drug Administration

Animals were randomly divided into three different groups and injected intraperitoneally (i.p.) with four injections of 10mg/kg METH (n= 9) or MDPV (n= 8) or saline solution, 0.9% de NaCl, SAL (n=9), every two hours, in volumes of 0.1 mL/10 g (body weight), as described by Fantegrossi and colleagues (2013). The MDPV regimen used herein compared with a well characterized METH binge regimen in terms of neurotoxicity and behavioral changes (Moratalla et al. ,2017). Furthermore, behavioral tests were conducted approximately 18 hours after last injection. Also, mice were sacrificed within 24 hours after last injection for subsequent molecular assays, as seen in the experimental design bellow (**Figure 1**). This time-point (24 hours) was

chosen since we aimed to evaluate innate immune players, glial changes and behavioral alterations while neurotoxic phenomenon unravels.

Noteworthy, animals were grouped into three independent cohorts of animals. The first two sets of animals, n=18, (n =6 SAL; n = 7 METH; n =5 MDPV) were sacrificed by decapitation and the whole brains were removed from the skull with the aid of blunted curved forceps. Frontal Cortex was dissected on a cold plate and immediately frozen in liquid nitrogen and stored at -80°C (Glowinski & Iversen, 1966) The right hemispheres of frontal cortices of each experimental group were stored in RNA later RNA stabilization Reagent (QiaGen, GmbH Hilden) for subsequent RNA extraction followed by RT-qPCR analysis. On the other hand, the left hemispheres were processed for Western Blot (WB) analysis. Next, the third set of animals, n=8, (n=3 SAL; n=2 METH; n=3 MDPV) was deeply anesthetized with 100mg/kg pentobarbital and transcardially perfused with 0.1 M phosphate buffer saline pH 7.4 (PBS) followed by 4% paraformaldehyde (PFA) in 0.1 M PBS. Finally, brains were removed, post-fixed for 24 h in 4% paraformaldehyde and dehydrated in 30% sucrose in 0.1 M PBS for 24 h for subsequent immunohistochemistry (IHC) analysis.

It is also relevant to note that we focused our study on frontal cortex because it is a rich dopaminergic region and is associated with mood conditions such as depressive-like behavior (Krishnan and Nestler, 2010).

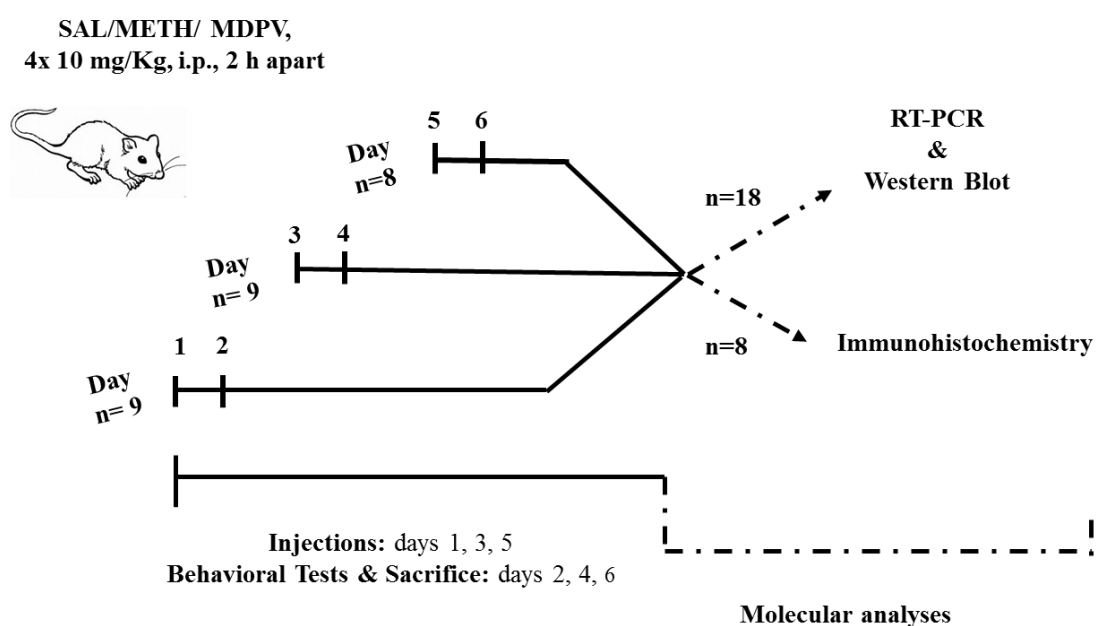


Figure 2.1 Experimental study design performed for METH and MDPV binge drug regimen.

2.4. Behavioral analysis

Within 24 hours after i.p. injection of METH or MDPV or SAL (4 x 10 mg/kg), behavioral tests were conducted in three independent cohorts of animals. All tests were carried out between 9:00 and 15:00 h in a sound-attenuated room under low-intensity light (12 lx) and they were scored by the same rater in an observation room where the mice had been habituated for at least 1 h before the beginning of the tests. Behavior was monitored by a video camera positioned above the apparatuses and the images were later analyzed with the ANY Maze video tracking (Stoelting Co., Wood Dale, IL, USA) by an experienced researcher who was unaware of the experimental group of the animals tested.

2.4.1. Elevated Plus Maze

Elevated plus maze (EPM) probed anxiety-like behavior associated with the use of MDPV and METH. A four-arm apparatus was used consisting of two open and two other closed arms (29,5 cm of length and 6 cm of width). Each animal was placed in the center of the apparatus, facing an open arm, and its exploratory behavior measured during 5 min. All four paws placed on an arm qualified as an entry. The following parameters were evaluated: time spent and the number of entries into open arms and total number of entries in the four arms. The total number of entries in the four arms was used as a measure of locomotor activity. The maze was wiped clean with 10% ethanol between trials (Fonseca et al., 2017).

2.4.2. Open-field test

Open-field (OF) test assessed locomotor and exploratory activity following MDPV and METH injection. Mice were placed in the center of an unexplored arena (45x45 cm) during 15 minutes. The following parameters were scored: total distance travelled (meters) (5 and 15 minutes), rearing number and rearing time (seconds) (5 minutes) (Coelho et al. 2014). The Open field was wiped clean with 10% ethanol between trials (Fonseca et al., 2017).

2.4.3. Splash test

The splash test evaluated grooming behavior following MDPV and METH injection, as an index of self-care and motivational behavior phenotype of experimental groups. This test was performed in each home cage (one mouse at a time) and began after vaporization of a 10% sucrose solution on the dorsal coat of mice. For 5 minutes, grooming time (seconds) was recorded. Grooming parameters scored consisted in nose/face grooming (along the snout), head washing (semicircular movements over the top of the head and behind ears) and body grooming (cleaning of the fur by licking or scratching) (Moretti et al. 2015; Fonseca et al., 2017).

2.4.4. Tail Suspension

Tail suspension test assessed despair-like behavior of mice following MDVA and METH injection. This is a widely used test for characterizing depressive-like behavior in mice (Silva et al. 2014). Briefly, mice were subjected to a short inescapable stress as follows: mice were hanged down by its tail, approximately 50 cm above the floor, using adhesive tape, placed 1 cm from tail tip. Immobile state, characterized by a motionless state, was recorded for 6 minutes (Steru et al. 1985).

2.5. Real-Time Quantitative PCR (RT-qPCR)

RNA was isolated from right frontal cortices according to protocol from Recover All™ Total Nucleic Acid isolation kit (AM1975, Alfacene), as previously performed by Viana and colleagues (Viana et al. 2016). Total amounts of RNA extracted, RNA integrity (RIN, RNA Integrity Number) and purity (A260/A280) were measured by RNA Nano Chip kit in Agilent 2100 Bioanalyzer (2100 expert software, Agilent Technologies, Walbronn, Germany) and ND-1000 spectrophotometer (NanoDrop Technologies, Wilmington, DE, USA), respectively. RNA was reverse transcribed with Transcriptor Universal cDNA Master (Roche Diagnostics, Mannheim, Germany): one microgram of total RNA was mixed with a 5x Transcriptor Universal Reaction Buffer and 20x Transcriptor Universal Reverse Transcriptase (Roche Diagnostics) in a total reaction volume of 20 uL. Afterwards, reactions were carried out in a thermocycler Eppendorf vapo.protect with the following thermal profile: 5 min at 25°C, 10 min at 55°C and 5 min at 85°C. Gene expression was performed by Real Time quantitative Polymerase chain

Reaction (RT-qPCR) using LightCycler 480 II system (Roche Diagnostics). RT-qPCR amplification of S100 β , RAGE and endogenous controls 18SrRNA used optimized primers from Real time ready catalog assays (Cat. No 315571, 31148 and 300236, respectively, Roche Diagnostics) and LightCycler[®] 480 Probes Master 2x (Roche Diagnostics), according to manufacturer's instructions. The primer mouse sequences used were as follows: RAGE, 50-GTC AGCATCAGGGTCACAGA-30 (forward) and 50-AAGGCCAGGG CTAGCGTA-30 (reverse); S100 β , 50-AACAACGAGCTCTCTC ACTTCC-30 (forward) and 50-CTCCATCACTTTGTCCACCA-30 (reverse); 18SRNA, 50-GCAATTATTCCCCATGAACG-30 (forward) and 50-GGGACTTAATCAACGCAAGC-30 (reverse). Non-template control reactions were performed for each gene, in order to assure that there was no unspecific amplification. RT-qPCR results were analyzed with qbase+ software (Biogazelle, Gent, Belgium). The relative expression ratio of each of the target genes was computed based on its real-time PCR efficiencies (E) and the crossing point difference (ΔCq) for an unknown sample versus a control ($E^{\Delta Cq}$ method). Results were obtained in normalized relative quantities and then converted to percentage using control group as reference.

2.6. Western Blot analysis

Left frontal cortices were used for total protein extracts as previously described (Simões et al. 2008; Viana et al. 2016). Total tissue was homogenized in lysis buffer (50 mM TrisHCl pH 7.4, 0.5% Triton X-100) containing protease inhibitor cocktail [1 mM PMSF, 1 mM DTT, 5 μ g/mL CLAP (5 μ g/mL chymostatin, 5 μ g/mL leupeptin, 5 μ g/mL antiparin, 25 mg/mL pepstatin, - Sigma-Aldrich]. Afterwards, total protein concentration was determined by the bicinchoninic acid (BCA) protein assay (Pierce Biotechnology, Rockford, IL, USA). Protein amounts (**Table 2.1**) were separated using 8–15% sodium dodecyl sulfate–polyacrylamide gel electrophoresis (SDS-PAGE) and electrophoretically transferred to a polyvinylidene difluoride membrane (Merck Millipore, Madrid, Spain) and blocked by 5% defatted milk for 2 hours (Silva et al. 2014). Membranes were incubated overnight at 4°C with primary antibodies (**Table 2.1**). Membranes were then incubated with alkaline phosphatase-conjugated IgG secondary antibodies (**Table 2.1**). Finally, membranes were visualized on Typhoon FLA 9000 (GE Healthcare) and analyzed using Image Studio[™] Lite Software (LI-COR Corporate Offices - US, Inc., Lincoln, Nebraska, USA).

Results were normalized against internal controls β -actin (1:1000; A5316,) and then expressed as percentage of control.

Table 2.1 List of primary and secondary antibodies used in western blot analysis.

<i>Primary Antibody</i>	<i>Dilution</i>	<i>Protein amount (μg)</i>	<i>Reference</i>	<i>Secondary Antibody</i>	<i>Dilution</i>	<i>Reference</i>
<i>Rabbit anti-RAGE</i>	1:500	40	Ab3160, Abcam	Goat anti-rabbit	1: 5000	GE Healthcare, Little Chalfont, UK
<i>Goat anti-RAGE</i>	1:200	40	Sc-8230, Santa-Cruz Biotechnology	Donkey anti-goat	1: 5000	Sc-2022, Santa-Cruz Biotechnology
<i>Mouse anti-GFAP</i>	1:2000	10	IF03L, Merck Millipore	Goat anti-mouse	1: 5000	GE Healthcare, Little Chalfont, UK
<i>Rabbit anti-MBP</i>	1:500	30	Ab40390, Abcam	Goat anti-rabbit	1:5000	GE Healthcare, Little Chalfont, UK
<i>Rabbit anti-TH</i>	1:1000	20	AB152, Merck Millipore	Goat anti-rabbit	1: 5000	GE Healthcare, Little Chalfont, UK

2.7. Immunohistochemistry

Frontal cortex anatomical limits were identified (AP, +1.32 to +0.5 mm) by the use of a mouse brain atlas (Paxinos and Frankling 2004), being the following protocol performed as previously described by Viana and colleagues (Viana et al. 2016). Cortical coronal sections of 40 μ m thickness were obtained from cryostat (Leica CM3050S, Nussloch, Germany) in 0.1 M PBS and used for free-floating immunohistochemistry. Firstly, slices were washed twice with 0.1 M PBS, blocked with 0.25% Triton X-100 and 5% normal fetal bovine serum (FBS) in 0.1 M PBS for 1 h at room temperature, and secondly slices were incubated for 24 h at 4°C with the primary antibodies reported in **Table 2.2**. Afterwards, sections were rinsed with 0.1 M PBS (3 x 10 min) and incubated with 4',6-diamidino-2-phenylindole (DAPI; 1:200; D1306, Invitrogen, Carlsbad,

CA, USA) for nuclear staining and the secondary fluorescent antibodies for 2 hours at room. In the end, sections were rinsed with 0.1 M PBS (3 x 10 min), so as to mount with glycergel (Dako mounting medium). Samples were imaged using a confocal laser scanning microscope (LSM 710 Meta, Carl Zeiss, Gottingen, Germany), in which lenses amplifying 40x and 10x were employed. Herein, we draw your attention to three particular areas within frontal cortex, namely, cingulate cortex, area 1 (Cg 1), cingulate cortex, area 2 (Cg 2), and secondary motor cortex (M2) (**Figure 2.2**). Moreover, for presentation purposes, we will show areas in which immunofluorescence is representative for each group.

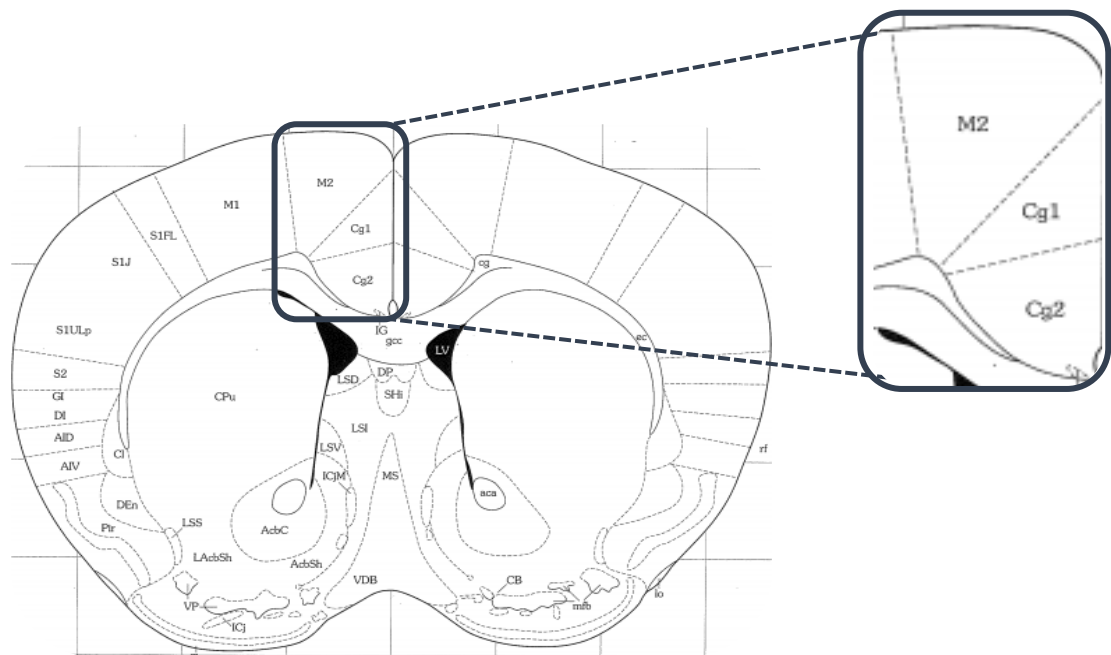


Figure 2.2 Drawing of a coronal section at +0.98 mm anterior from Bregma depicting the diverse areas in mice brain, with particular focus on cingulate cortex, area 2 (Cg 2), cingulate cortex, area 1 (Cg 1), and secondary motor cortex (M2), which are highlighted at the inset at the right-hand side (Paxinos and Frankling 2004).

Table 2.2 List of primary and secondary antibodies used in Immunohistochemistry analysis.

<i>Primary Antibody</i>	<i>Dilution</i>	<i>Reference</i>	<i>Secondary Antibody</i>	<i>Dilution</i>	<i>Reference</i>
<i>Rabbit anti-RAGE</i>	1:500	Ab3160, Abcam	donkey anti-rabbit Alexa Fluor 594	1: 1000	Invitrogen, Carlsbad, CA, USA
<i>Goat anti-RAGE</i>	1:100	Sc-8230, Santa-Cruz Biotechnology	donkey anti-goat Alexa Fluor 488	1: 1000	Invitrogen, Carlsbad, CA, USA
<i>Rabbit anti-s100β</i>	1:500	ABN59, Merck Millipore	donkey anti-rabbit Alexa Fluor 594	1:1000	Invitrogen, Carlsbad, CA, USA
<i>Mouse anti-GFAP</i>	1:100	IF03L, Calbiochem	donkey anti-mouse Alexa Fluor 488	1: 1000	Invitrogen, Carlsbad, CA, USA
<i>Rabbit anti-iba-1</i>	1:250	019-19741, Wako	donkey anti-rabbit Alexa Fluor 594	1: 1000	Invitrogen, Carlsbad, CA, USA
<i>Rabbit anti-MBP</i>	1:1000	Ab40390, Abcam	goat anti-rabbit Alexa Fluor 488	1:1000	Invitrogen, Carlsbad, CA, USA
<i>Rabbit anti-TH</i>	1:250	AB152, Merck Millipore	goat anti-rabbit Alexa Fluor 488	1: 1000	Invitrogen, Carlsbad, CA, USA

2.8. Statistical analysis

Results are presented as mean values \pm standard error of mean (S.E.M.). Data concerning to molecular and behaviour tests were analysed by a one-way ANOVA followed by Tukey's *post hoc* multiple comparison test, or by Kruskal-Wallis followed by Dunn's *post hoc* test. All tests were considered significant at $P < 0.05$ (*/#), $P < 0.01$ (**/##) and $P < 0.001$ (***/###). The symbol * refers to a comparison between each drug and SAL and # refers to a comparison between MDPV and METH. Analyses were performed using GraphPad Prism 6.01 software for Windows (GraphPad Software, San Diego, CA, USA, www.graphpad.com).

Chapter 3

Results

3.1. Behavioral consequences of METH and MDPV administration to mice

Considerable body of evidence has described locomotor and emotional alterations underpinning METH ab(use). However, the impact of the psychostimulant MDPV on emotional behavior has yet to be characterized. In this context, behavioral tests were conducted to assess the influence of a binge dosage of MDPV, in comparison with a binge dosage of METH, in emotion and locomotor parameters in 10-weeks-old male adult C57BL/6J mice.

First, anxiety-like mood was addressed by the use of Elevated Plus Maze. Both METH and MDPV did not significantly change time spent in open arms (**Figure 3.1b**; $P > 0.05$ vs SAL). However, there was a significant increment in the number of METH-mice entries into open arms (**Figure 3.1a**; $**P < 0.01$ vs SAL). In addition, METH-mice but not MDPV-mice, showed a statistically significant reduction in the total number of arm entries (**Figure 3.1c**; $**P < 0.01$ vs SAL; $^{\#}P < 0.05$ vs MDPV). Together, these observations suggest that METH and MDPV exerted no anxiogenic-like behavior in mice. Additionally, these data led us to speculate whether METH, but not MDPV, elicited locomotor deficits.

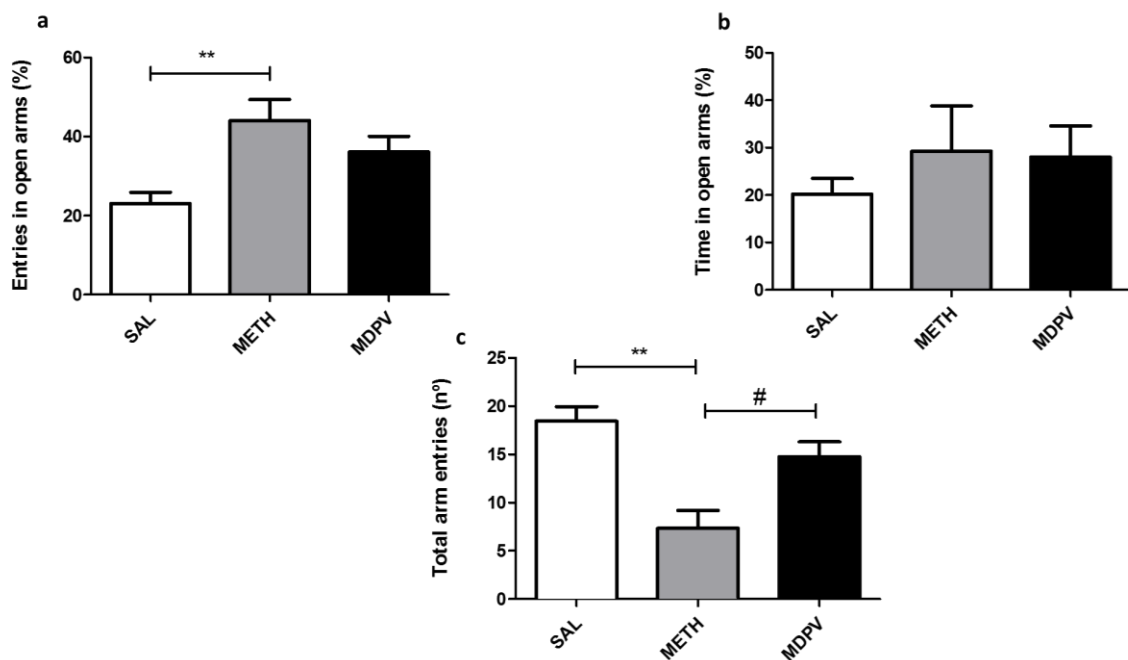


Figure 3.1 Impact of METH and MDPV on anxiety-like behavior in mice (Elevated Plus Maze test). Effects of METH and MDPV (4 x 10 mg/kg, i.p., 2-hours apart) in mice on (a) the entries in open arms (%), on (b) the time spent in open arms (%), and on (c) total arm entries (n°), within 24 hours post-injection. Data are presented as mean % of control \pm S.E.M (n=8-9) and was considered significant at $**P < 0.01$; vs SAL; $^{\#}P < 0.05$; vs METH. Statistical analysis was performed Kruskal-Wallis followed by Dunn's *post hoc* test (a, b), or by one-way ANOVA followed by Tukey's *post hoc* multiple comparison test (c).

Locomotor profile of mice was further elucidated by using Open Field test. Our findings indicated a statistically significant decrease in total distance traveled (meters) in the METH group, but not in the MDPV group, further confirming locomotor deficits in METH-mice (**Figures 3.2a, b**). Figure 2c illustrates a representative track plot for each experimental group during the first 5 minutes.

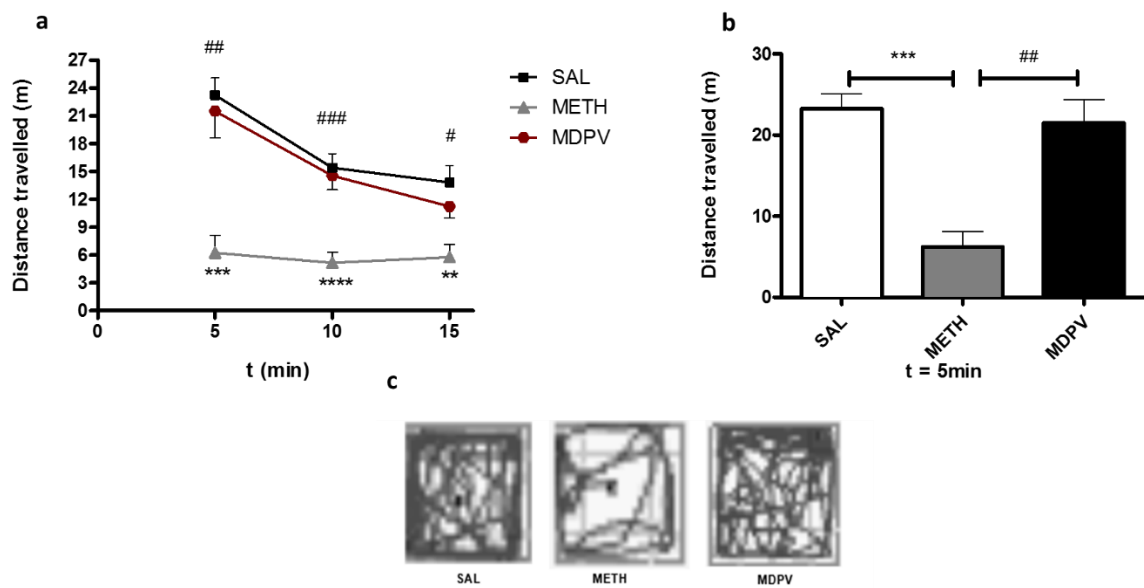


Figure 3.2 Impact of METH and MDPV on locomotor behavior in mice (Open Field test). Effects of METH and MDPV (4 x 10 mg/kg, i.p., 2-hours apart) in mice on distance travelled during 15 minutes (m) and during first 5 minutes (a, b), within 24 hours post-injection. c represents a schematic track plot of the path made by the three groups of mice in a 5 minute-test. Data are presented as mean % of control \pm S.E.M (n=8-9) and was considered significant at $**P < 0.01$; $***P < 0.001$; $****P < 0.0001$ vs SAL; $^{\#}P < 0.05$; $^{\#\#}P < 0.01$; $^{\#\#\#}P < 0.001$ vs METH. Statistical analysis was performed by Kruskal-Wallis followed by Dunn's *post hoc* test in 5 minute-test in (b) as well as in (a), and, by One-way ANOVA followed by Tukey's *post hoc* test in 10 and 15 minute-test, (a).

Furthermore, mice exploratory behavior was also addressed with Open Field. METH and MDPV displayed opposite effects on rearing behavior: while METH decreased number of rearings and rearing time, MDPV showed increased rearing behavior (**Figure 3.3a, b**). These data suggest that MDPV increases exploratory behavior. The decrease in rearing behavior in METH-mice might be shadowed by a decrease in general locomotor behavior in these mice.

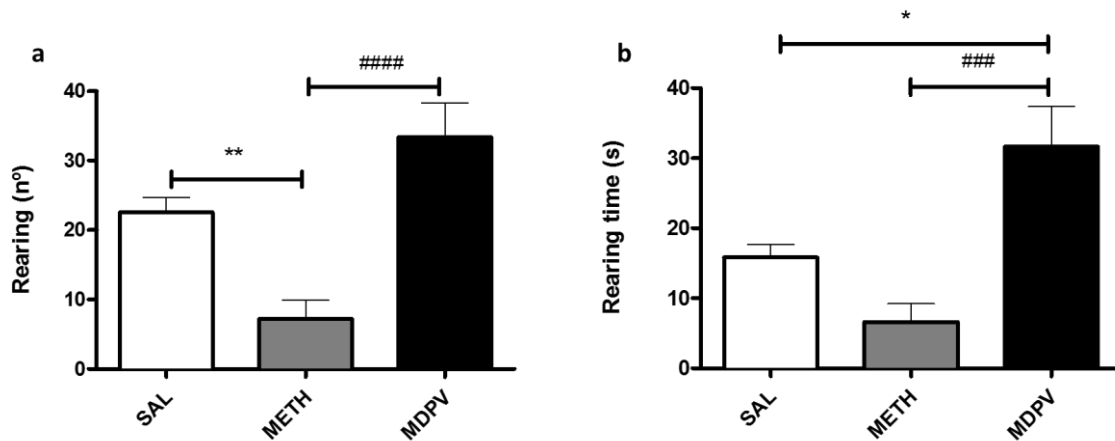


Figure 3.3 Impact of METH and MDPV on exploratory activity in mice (Open Field test (5 minutes)). Effects of METH and MDPV (4 x 10 mg/kg, i.p., 2-hours apart) in mice on (a) number of rearings, and on (b) rearing time (s), within 24 hours post-injection. Data are presented as mean % of control \pm S.E.M (n=8-9) and was considered significant at * $P < 0.05$; ** $P < 0.01$ vs SAL; ### $P < 0.001$; #### $P < 0.0001$ vs METH. Statistical analysis was performed by One-way ANOVA followed by Tukey's *post hoc* test (a), and by Kruskal-Wallis followed by Dunn's *post hoc* test (b).

We consolidated emotional characterization by evaluating depressive-like alterations in mice using both tail suspension test and splash test. METH, but not MDPV, significantly increased immobility time in tail suspension test (**Figure 3.4a**; ** $P < 0,01$ vs SAL; ### $P < 0,001$ vs MDPV). Again, the general locomotor impairment triggered by METH might contribute to this effect. Additionally, no significant changes were observed in mice grooming in both METH and MDPV groups (**Figure 3.4b**; $P > 0,05$). This is suggestive that there are no self-care and motivational behavior alterations in place.

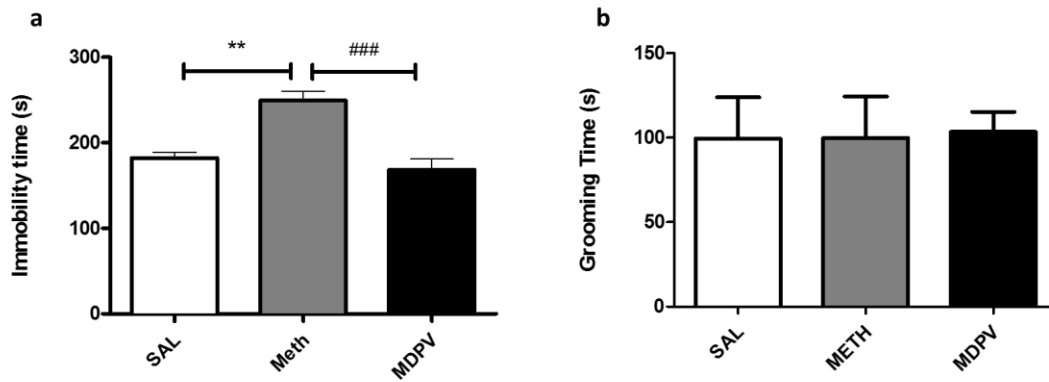


Figure 3.4 Impact of METH and MDPV on depressive-like behavior in mice, with Tail Suspension test (a) and Splash test (b). Effects of METH and MDPV (4 x 10 mg/kg, i.p., 2-hours apart) in mice on (a) immobility time (s), and on (b) grooming time (s) Data are presented as mean % of control \pm S.E.M (n=7-9) and was considered significant at $**P < 0.01$ vs SAL; $###P < 0.001$ vs METH. Statistical analysis was performed by Kruskal-Wallis followed by Dunn's post hoc test (a) and by a one-way ANOVA followed by Tukey's *post hoc* multiple comparison test (b).

3.2. Molecular and glial changes in frontal cortex induced by METH and MDPV administration to mice

3.2.1. Impact of METH and MDPV on dopaminergic terminals

TH levels were not changed in frontal cortices of both METH-and MDPV-mice compared to saline as gauged by immunoblotting (**Figure 3.5a**; $P > 0,05$) and immunofluorescence labeling (**Figure 3.5b**).

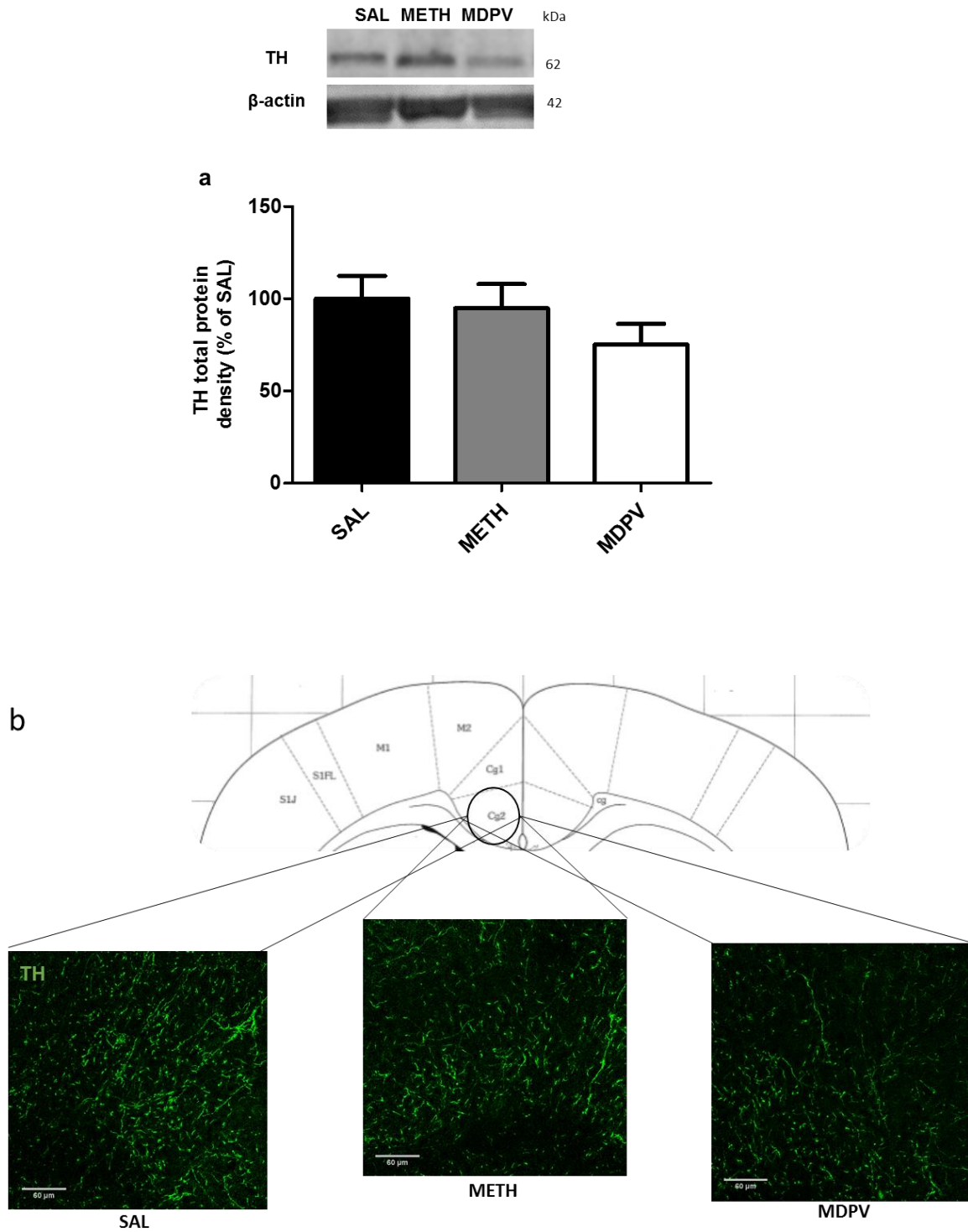


Figure 3.5 Impact of an acute binge dose of METH and MDPV on TH density in mice frontal cortices. TH density was evaluated by western blot, expressed as mean % of control \pm S.E.M (n=5-7) (a), and by immunofluorescence (n=2-3) (b), 24 h post-injection of METH and MDPV (4 x 10 mg/kg, i.p. 2-hours apart). Statistical analysis was performed by Kruskal-Wallis followed by Dunn's post hoc test (a). In

(b) illustrative images of immunofluorescence of dopaminergic fibers through TH staining (green), particularly in cingulate cortex, area 2 (Cg 2), are shown. *Scale bars* = 60 μm .

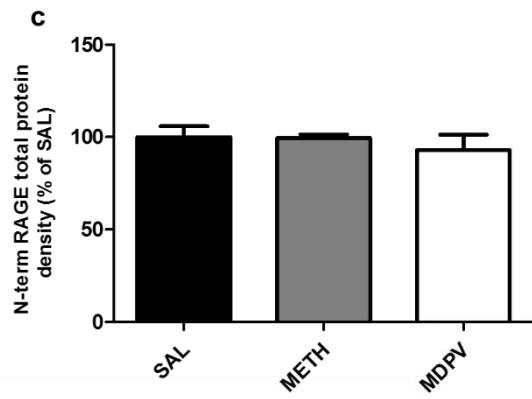
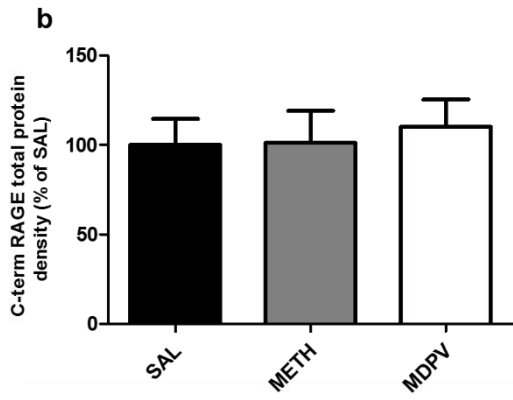
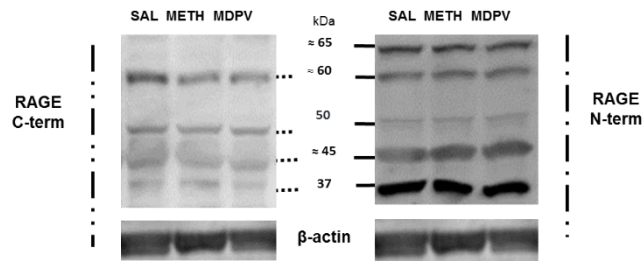
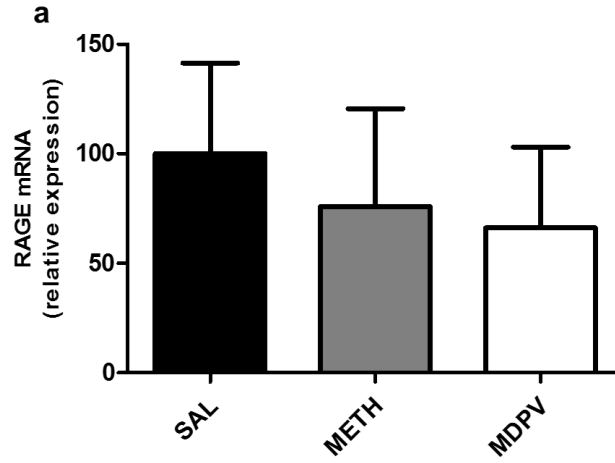
3.2.2. Impact of METH and MDPV on innate immune players in frontal cortex

3.2.2.1. Impact of METH and MDPV in RAGE and S100 β density

Firstly, RAGE biology was characterized. This is a pattern-recognition receptor which is operative in the innate immune system. RAGE gene expression was analyzed by RT-qPCR. RAGE mRNA levels were not significantly changed by both drugs when compared to saline (**Figure 3.6a**; $P > 0,05$). Then RAGE protein levels were assessed. To this end, total C-terminal and N-terminal RAGE terminally truncated isoforms density were analysed to dissect the complex proteomic of RAGE variants. We used an antibody raised against C-terminal, intracellular domain of RAGE (anti-C-terminal RAGE Ab) that revealed immunoreactivity at 50, 45 and 37 kDa, which probably reflect monomeric fRAGE, pre-glycosylated fRAGE/N-truncated isoforms and a proteolytic product of RAGE, respectively. Neither METH nor MDPV changed RAGE density, when quantifying all obtained bands (**Figure 3.6b, c**; $P > 0,05$). Also, the absence of alterations was verified when quantifying each band individually (data not shown). RAGE proteomic analysis was further performed by immunohistochemistry.

In saline mice, RAGE was predominantly found in cytosol, when labeling was performed with anti-N-terminal RAGE Ab (**Figure 3.6d**). In, contrast, cells displayed RAGE immunoreactivity in the nucleus and practically no cytoplasmic immunoreactivity when anti-C terminal RAGE Ab was used (**Figure 3.6d**). These distinct immunolabeling patterns were confirmed by the absence of co-localization profile obtained when both anti-RAGE antibodies were used (**Figure 3.6d**). Importantly, again, neither MDPV nor METH changed RAGE immunolabeling pattern as gauged by both RAGE antibodies (**Figure 3.6d**). These observations indicate that neither MDPV nor METH changed RAGE proteomic at this time point at frontal cortex.

Chapter 3 - Results



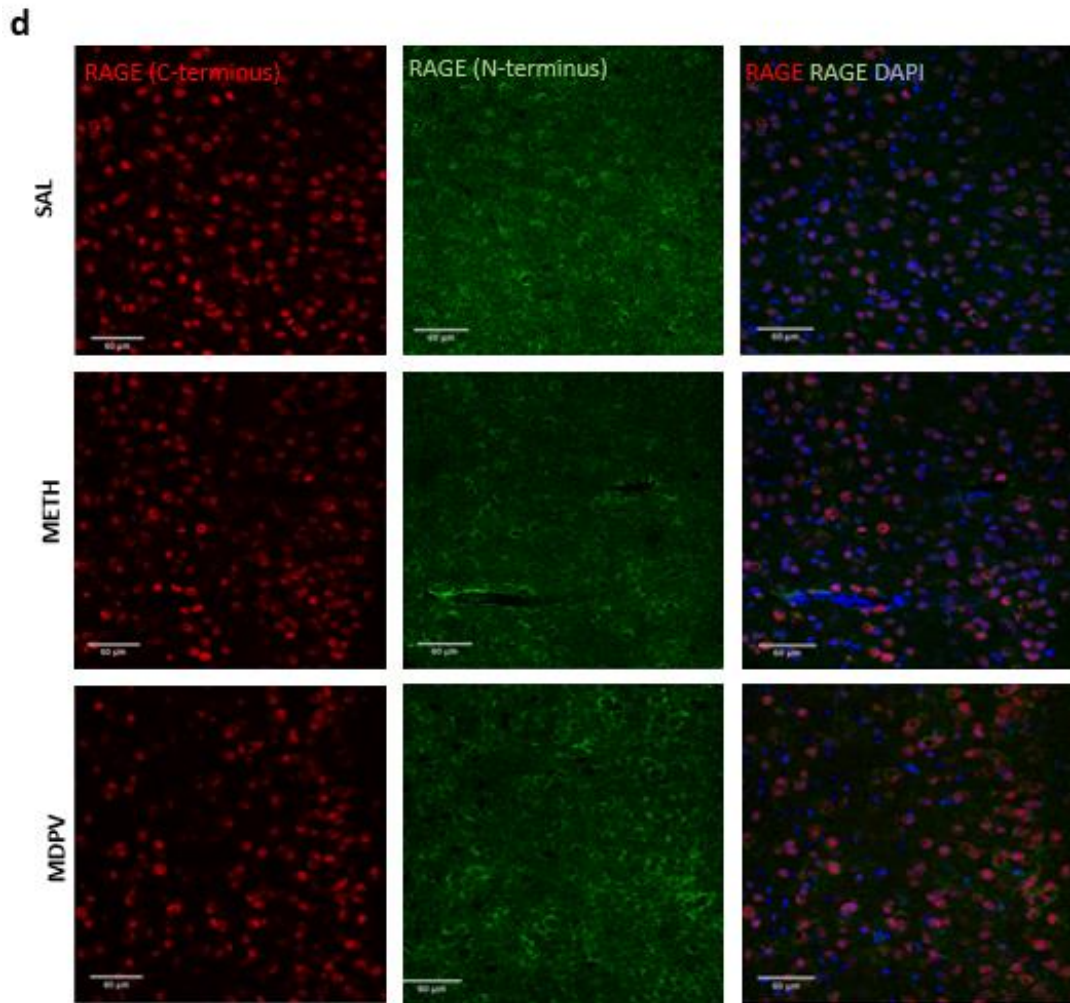


Figure 3.6 Influence of an acute binge dose of METH and MDPV on receptor RAGE gene expression and protein density in frontal cortex. RAGE mRNA quantification (a), RAGE protein levels (b, c), and its cellular distribution (d, e) were assessed 24 h post-injection of METH and MDPV (4 x 10 mg/kg, i.p. 2-hours apart). Above, RAGE mRNA quantification by RT-PCR, expressed as mean % of control \pm S.E.M (n=4-5) (a). Representative quantification by western blot of RAGE protein with polyclonal rabbit anti-RAGE C-terminal antibody, expressed as mean % of control \pm S.E.M (n=5-7) (b), and polyclonal anti-RAGE N-terminal antibody, expressed as mean % of control \pm S.E.M (n=2-4) (c) are shown. In (d), illustrative images of immunofluorescence (n=2-3), particularly in cingulate cortex, area 2 (Cg 2), are shown (RAGE C-terminus (red), RAGE N-terminus (green) and nuclei stained with DAPI (blue)). Scale bars = 60 μ m. Statistical analysis was performed by Kruskal-Wallis followed by Dunn's post hoc test (a, b, c).

Secondly, we aimed to characterize the impact of both MDPV and METH in s100 β , which acts as a DAMP (dangerous-associated molecular pattern) and is a well-known RAGE ligand. S100 β gene expression was not significantly changed by any of the tested drugs (Figure

3.7a; $P > 0,05$). S100 β protein levels were assessed by immunofluorescence and no statistically significant alterations in S100 β immunolabeling were detected between groups (**Figure 3.7b, c;** $P > 0,05$).

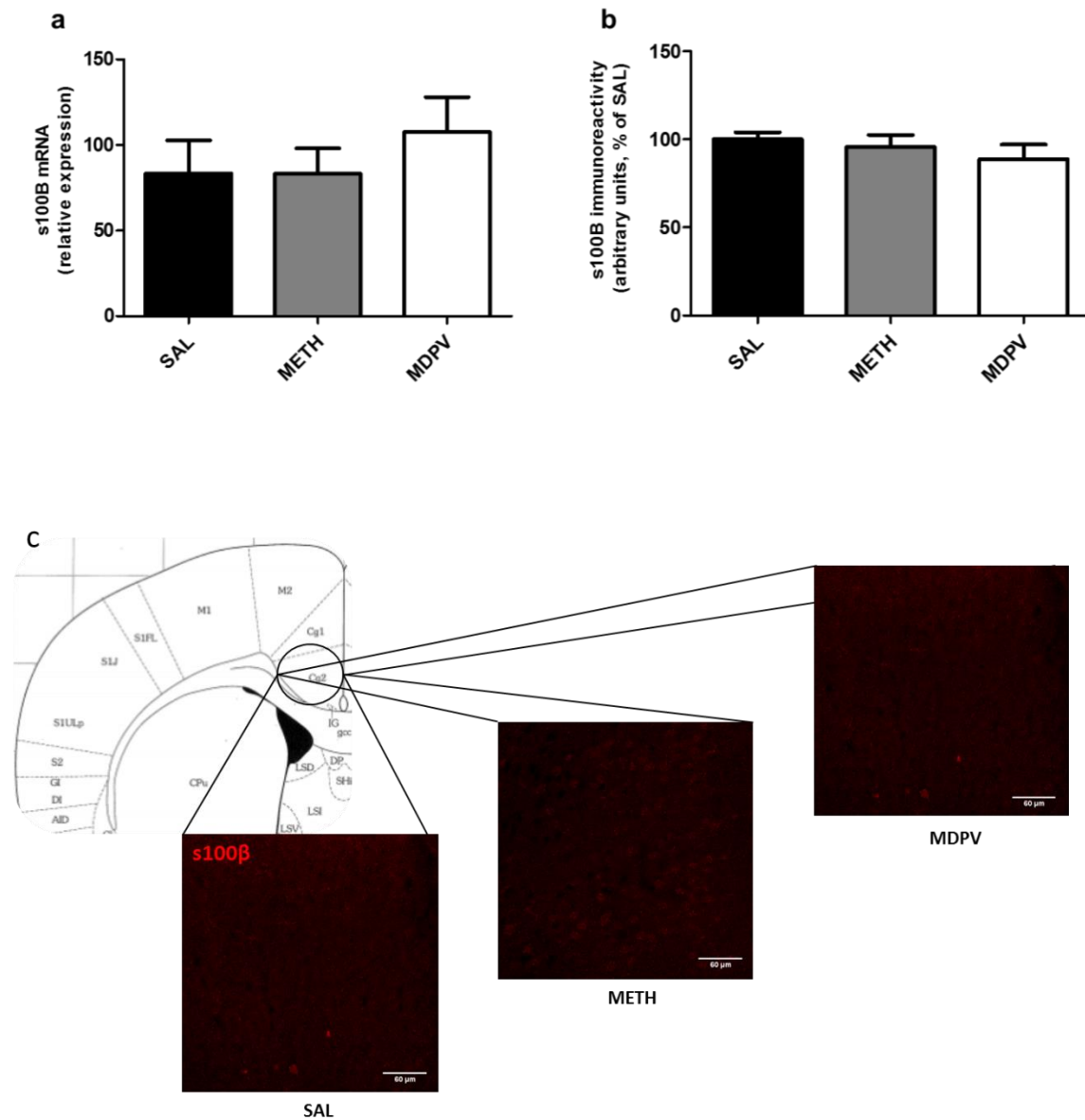


Figure 3.7 Influence of an acute binge dose of METH and MDPV on s100 β gene expression and protein levels in frontal cortex. S100 β mRNA quantification was assessed by RT-PCR, expressed as mean % of control \pm S.E.M (n=5-7) (**a**), S100 β density by immunofluorescence, expressed as mean % of control \pm S.E.M (n=2-3) (**b**), 24 h post-injection of METH and MDPV (4 x 10 mg/kg, i.p. 2-hours apart). In (**c**) illustrative images of S100 β immunostaining (red), particularly in cingulate cortex, area 2 (Cg 2),

are shown. *Scale bars* =60 μm . Statistical analysis was performed by Kruskal-Wallis followed by Dunn's post hoc test (a), or by One-way ANOVA followed by Tukey's *post hoc* test, b).

3.2.3. Impact of METH and MDPV in glial cells

Several lines of evidence have demonstrated that METH consumption has implications on microglia and astrocytes that belong to brain innate immune system. However, the effects of MDPV in glial cells was never studied. The influence of MDPV and METH in microglia, astrocytes from frontal cortices in mice was also assessed. Both MDPV and METH did not significantly change Iba-1, GFAP density, as seen by western blot analysis and confirmed by immunofluorescence (Figures 3.8, 3.9; $P > 0,05$). Additionally, the impact of MDPV and METH in cortical myelin fibers was evaluated. Again, both MDPV and METH did not significantly change MBP density, as seen by western blot analysis, in which, all obtained bands were quantified (Figures 3.10a; $P > 0,05$) and each band was individually quantifying (data not shown), as well. Such assumption was thereafter confirmed by immunofluorescence.

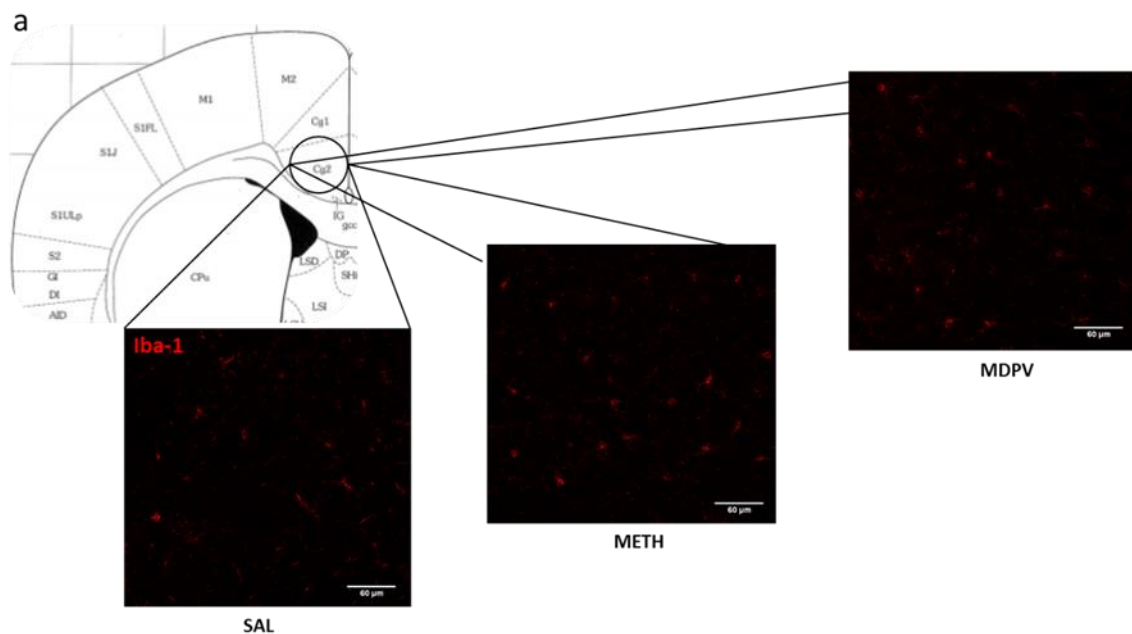


Figure 3.8 Influence of an acute binge dose of METH on Iba-1 immunolabeling in frontal cortex. Iba-1 density was evaluated by immunofluorescence (red), particularly in cingulate cortex, area 2

Chapter 3 - Results

(Cg 2), (n=2-3) (a), 24 h post-injection of METH and MDPV (4 x 10 mg/kg, i.p. 2-hours apart). Scale bars = 60 μ m.

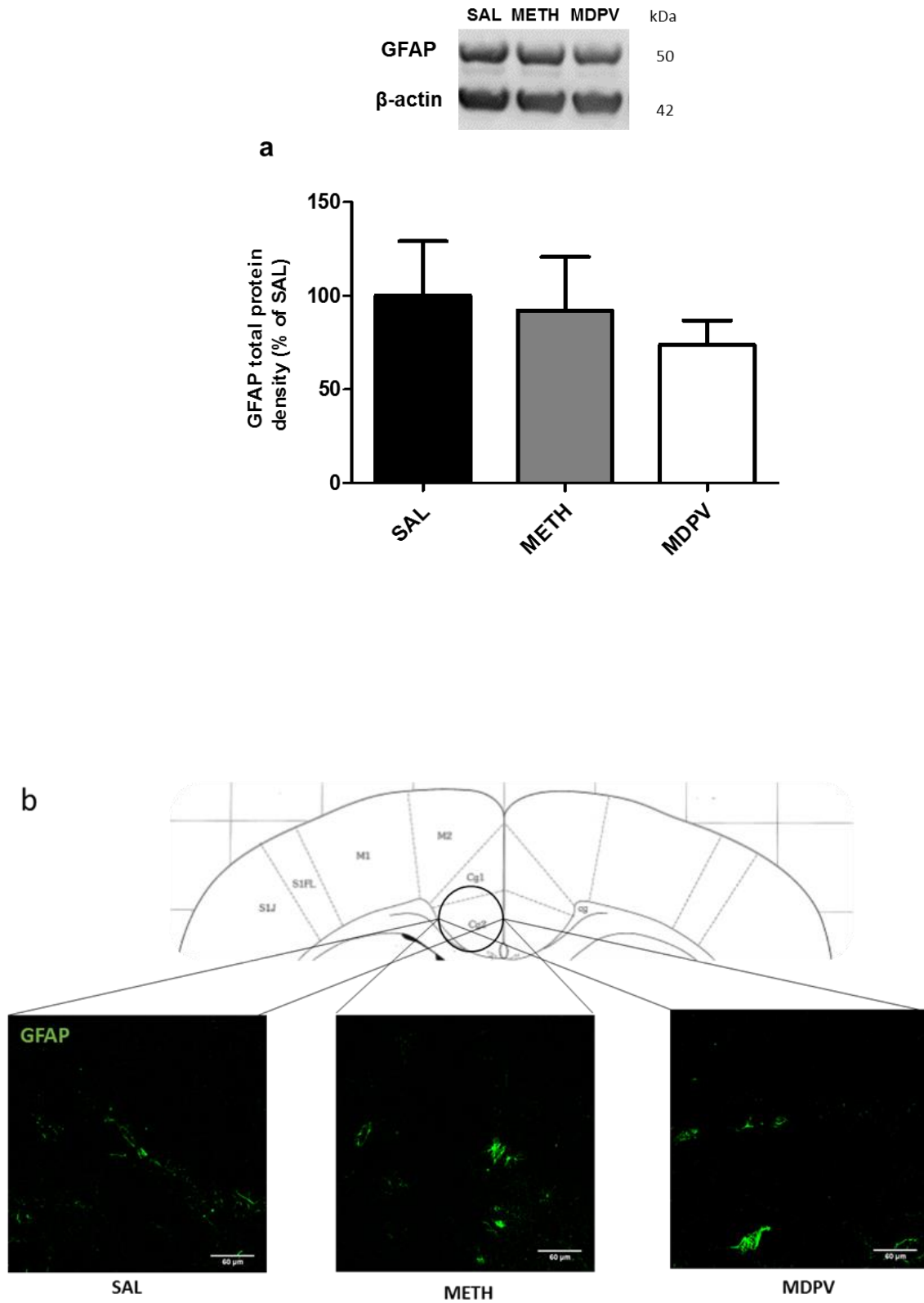
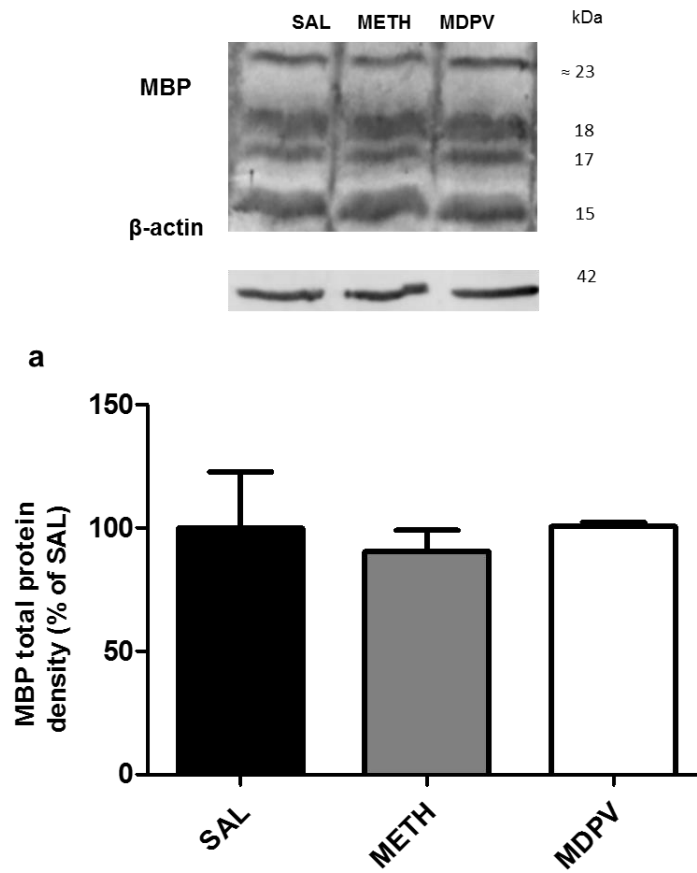


Figure 3.9 Influence of an acute binge dose of METH on GFAP levels in frontal cortex. GFAP density was evaluated by western blot, expressed as mean % of control \pm S.E.M (n=5-7) (a), and by immunofluorescence (n=2-3) (b), 24 h post-injection of METH and MDPV (4 x 10 mg/kg, i.p. 2-hours apart). Statistical analysis was performed by Kruskal-Wallis followed by Dunn's post hoc test (a) In (b), illustrative images of GFAP immunostaining (green), particularly in cingulate cortex, area 2 (Cg 2), are shown *Scale bars* = 60 μ m.



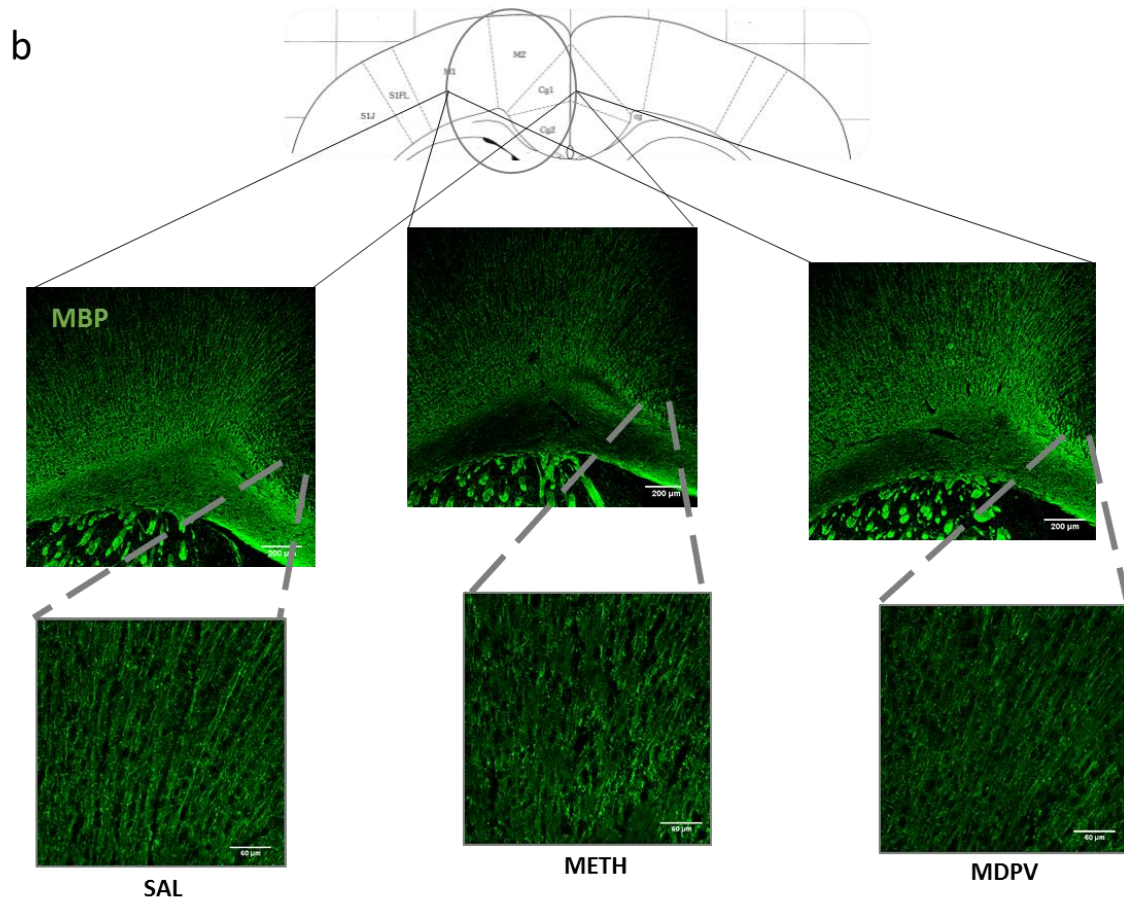


Figure 3.10 Influence of an acute binge dose of METH on MBP levels in frontal cortex. MBP density was evaluated by western blot, expressed as mean % of control \pm S.E.M (n=4-6) (a), and by immunofluorescence (n=2-3) (b), 24 h post-injection of METH and MDPV (4 x 10 mg/kg, i.p. 2-hours apart). Statistical analysis was performed by Kruskal-Wallis followed by Dunn's post hoc test (a) In (b), illustrative images of MBP immunostaining (green), particularly in cingulate cortex, area 2 (Cg 2), are shown. Scale bars = 200 μ m (pictures at the top); 60 μ m (pictures at the bottom).

Chapter 4

Main findings and discussion

4.1. Main findings and discussion

Nowadays, drug misuse and addiction, including METH addiction, is a major worldwide issue with an undeniable impact on public health, human rights and security (UNODOC, 2017). In parallel, the rapid emergence and abuse of new psychoactive substances (NPS) regarding the synthetic cathinone, Methylenedioxypropylvalerone (MDPV), known as "bath salt", clearly seems to worsen this scenario (Baumann et al. 2016). Nevertheless, there is currently sparse information regarding MDPV neurotoxicity, including in frontal cortex. Therefore, herein we aimed to characterize, for the first time, the impact of MDPV on frontal cortex glial cells and innate immune players including receptor for advanced glycation end-products (RAGE) and its ligand S100 β , within first 24 hours following a binge MDPV regimen. In addition, emotional behavior was assessed. A binge neurotoxic regimen of METH was also employed to deepen current knowledge on METH neurotoxicity.

METH is implicated in dopaminergic system alterations and in emotional impairment including depressive-like behavior (Krishnan and Nestler, 2010; Silva et al., 2013; Fonseca et al., 2016). Herein, METH animals showed undoubtedly impaired locomotor function, as seen by a robust decrease in the distance travelled in the open field arena. This is consistent with previous findings within 24 hours following a similar METH binge protocol (Boger et al., 2007; Grace et al., 2010; Leitão et al., 2017). This further consolidates our previous findings following 24 and 48 hours post-an acute single dose of 30 mg/kg of METH (Pereira et al., 2012). This locomotor impairment might have shadowed emotional characterization due to a putative carry over effect to other behavioral tests. In fact, one cannot exclude the hypothesis whereby locomotor impairment might have contributed to the increasing immobility time seen in METH animals, in the Tail Suspension test. Although both Leitão et al., (2017) and Fonseca et al., (2016) reported a decrease in grooming time in METH-mice, herein we failed to see alterations in this test in the METH group. Again, locomotor impairment together with low basal grooming activity seen in control animals might contribute to our apparently contradictory result with METH. This locomotor impairment is seemingly transient since we previously showed that at 3 days post-single high METH there were no longer statistical significant differences in distance travelled compared to saline (Fonseca et al., 2016). In spite of locomotor confounds, elevated plus maze test suggested that METH did not apparently induce an anxiogenic-like effect. This is consistent with our previous data (Fonseca et al., 2016).

Surprisingly, the behavioral profile of rodents after a single binge episode of MDPV has not yet been documented so far. Regarding MDPV bingeing, there is only one work recently published by Philogene and colleagues (2017). These authors verified that rats displayed anxiety-

and depressive-like behavior 48 hours after a chronic MDPV binge paradigm (1 mg/kg MDPV 3 x/day for 10 days) (Philogene-Khalid et al., 2017). We newly show that a single binge MDPV paradigm did not change emotional and locomotor behavior in mice. Although, and interestingly, high MDPV doses (1–20 mg/kg) facilitated the spontaneous locomotor activity in mice within 2 hours after drug administration. In fact, psychomotor stimulants are known to increase locomotor motion in rodents, which is strongly associated with their high addiction potential (Wise and Bozarth, 1987; Calabrese et al., 2008). Moreover, it is plausible that more than 12 hours following the last MDPV administration, locomotor activity returned to basal values. Consistently with our observations, MDPV is reported as a with rapid initial rises in locomotor activity which deteriorated throughout time. (Calabrese et al., 2008; Fischman et al., 1989)

Nonetheless, and interestingly, MDPV enhanced exploratory activity in mice as gauged by an increase in rearing numbers and duration in the Open Field test. In agreement with our results but in a different behavioral assessment, Marusich and colleagues, also verified an increase in exploratory activity, after administration doses ranging from 1 to 30mg/kg, Functional Observational Battery (FOB) (Marusich et al., 2012). This increased spontaneous exploratory behavior seemingly outlasts the well-known increase in locomotor activity, which is no longer apparent. In this study, operative neuronal mechanisms underlying this behavioral phenomenon were not evaluated, reinforcing the need to dissect such occurrence.

This increase in exploratory behavior is consistent with MDPV-mice portraying normal emotional behavior, for example, mice showing depressive-like behavior tended to exhibit a lower level of exploratory activity (Kalueff et al. 2004). Conversely, METH mice showed a decrease in number and duration of rearings as previously shown by Leitão et al. (2017). This exploratory behavior impairment is aligned with METH-mice also showing a decrease in spontaneous locomotor in the open field arena.

Disruption in dopaminergic structures are a well-known hallmark of METH neurotoxicity (Krasnova and Cadet 2009; Silva et al., 2013). Also, mesocorticolimbic dopaminergic system, involving dopaminergic projections from ventral tegmental area onto frontal cortex plays a major role in motivation and reward (Phillips et al. 2008; Yim et al. 1980; D'Ardenne et al. 2008). Therefore, frontal cortex is thought to be affected by drugs of abuse (Goldstein & Volkow, 2011). In fact, METH users were reported to display anomalies in the frontal cortical structure and function (for review see Goldstein & Volkow, 2011). Also, MDPV is documented to have a greater potency as a reinforcer compared to cocaine or methamphetamine (Aarde et al., 2013; Watterson et al., 2014) and also, the psychostimulant effects of synthetic cathinones are suggested to be underlined by dopaminergic mechanisms (Simmler et al. 2012). Herein, neither METH nor MDPV significantly changed TH density in mice frontal cortices. Our

group previously showed that a single-high dose of METH (30 mg/kg) evoked DA and TH depletion 3 days following METH-dosing (Silva et al. 2013). This is suggestive that dopaminergic derangements are not yet in place as early as 24 hours post-METH. Importantly, this is the first report showing the impact of MDPV in frontal cortex. It is not surprising that MDPV is not inducing dopaminergic toxicity, considering that MDPV is a non-substrate blocker of the DA transporter and also inhibits reuptake of norepinephrine (Meltzer et al., 2006; Psychonaut et al., 2009), effects that are similar to those produced by cocaine (Rothman et al., 2001). This is in contrast with METH which is a substrate for DAT-mediated uptake. Moreover, MDPV failed to affect striatal dopaminergic markers of neurotoxicity, (DA, DAT or TH expression) in mice 2–3 days following drug administration (Lopez-Arnau et al., 2014; Anneken et al., 2015). However, *in vivo* dopaminergic toxicity data regarding MDPV seems parsimonious and warrants further investigation.

Considering that microglial activation represents an early step in methamphetamine-induced neurotoxicity (Thomas et al., 2004a), we aimed to characterize for the first time the cellular and molecular elements of the innate immune players residing in frontal cortex following MDPV administration. METH effect in the same parameters was also evaluated.

In the first place, we aimed to quantify RAGE expression and levels following MDPV and METH dosing. We measured RAGE mRNA levels by RT-PCR and RAGE protein levels by western blot and immunohistochemistry. Gene expression data revealed that neither MDPV nor METH changed RAGE gene transcription. In order to explore the influence of MDPV and METH on cortical RAGE variants, two different anti-RAGE antibodies raised against extracellular as well as intracellular epitopes were employed. We observed RAGE immunoreactivity in a broad spectrum of molecular weight patterns likely reflecting diverse RAGE isoforms, as previously shown (Viana et al., 2016). Again, neither drug changed RAGE levels. This is highly suggestive that RAGE inhibitory isoforms as well as full-length RAGE were not affected by any tested drug at this time-point. These data were confirmed by immunohistochemistry analysis. We found RAGE immunoreactivity homogeneously distributed in cellular cytoplasm when an antibody raised against the extracellular portion of receptor was utilized. This is consistent with our previous observations in striatum using the same antibody (Viana et al., 2016). On the other hand, a very dense nuclear staining was observed when an antibody raised against RAGE cytosolic tail was employed, in agreement with other reports focused on RAGE expression in rat cortical neurons using an anti-C-terminal RAGE antibody (Greco et al., 2012; Li et al., 2014). Importantly, this RAGE immunolabeling pattern was not altered by both drugs. These data may suggest that there is no RAGE-dependent *immune response deregulation* occurring within 24 hours post-drug administration.

Brain deleterious events have been linked to RAGE ligands, including S100 β . This protein plays a crucial role in astrocytes, including cytoskeleton organization and dynamics, astrocytic cell shape as well as migration (Donato et al., 2009). Regarding extracellular functions, S100 β can either act as a neurotrophic or neurotoxic molecule, depending on the concentration reached. Herein, S100 β mRNA as well S100 β levels were not altered by any of the tested drugs. This is, definitely, the first report combining psychostimulants and S100 β targeting. This data is suggestive that S100 β remains within physiological levels, thus maintaining its neurotrophic properties.

Microglia are a widely described resident macrophages within the CNS, comprising the first line of defense in response to diverse injurious stimuli, including viral infection, neuron injury or exposure to drug abuse. In the absence of a stimuli, they are characterized by a quiescent state, or resting state, but upon certain stimuli, microglia undergo morphological changes resulting in the production and secretion of a plethora of cytokines, chemokines, and neurotoxic factors (Streit et al. 1999; Streit et al. 2002). Moreover, microglial activation is known to be the hallmark as a cellular response related with neuroinflammation (Kreutzberg 1996; Graeber and Streit 2010; Streit 2010; Prinz et al. 2011). Importantly, it was demonstrated that microglial activation represents an early step in methamphetamine-induced striatal neurotoxicity (Thomas et al. 2004b). Furthermore, it was demonstrated that a single high dose of METH (30 mg/kg, i.p.) triggered the activation of microglia in mice hippocampi (Gonçalves et al. 2010). However, neither METH nor MDPV changed Iba-1 immunolabeling, thus suggesting that there were no morphological alterations, and so microgliosis is not in place in frontal cortex at 24 hours post-injection. This is aligned with 20 mg/kg METH (i.p.) having not caused a change in proinflammatory cytokine or chemokine expression in the frontal cortex at 12 hours post-dosing (Kelly et al., 2012). Furthermore, these authors argued that only subtle neurotoxic effects of METH have been seen in frontal cortex. As for MDPV, this is the first report looking at microglia. However, further studies are warranted to finely dissect the time-course of putative microglia morphology alterations, if any, following MDPV injection.

It is now accepted that astrocytes, the most abundant glial cell population of the CNS, participate in the local innate immune response triggered by a variety of insults, including neurotoxicity triggered by methamphetamine (Farina et al. 2007; Zhang et al., 2015). Additionally, these cells express RAGE receptors, similarly to microglia (Viana et al., 2016). Glial fibrillary acidic protein (GFAP) is the hallmark intermediate filament protein in astrocytes (Hol and Pekny, 2015). Astrocytes assume a reactive phenotype following administration of neurotoxins, including drugs of abuse (Hol and Pekny, 2015; Loftis and Janowsky, 2015). This coincides with an upregulation of GFAP.

Increase in GFAP expression occurs following to a decrease in striatal dopaminergic markers following METH (O'Callaghan and Miller, 1994; O'Callaghan et al., 2014). On the other hand, MDPV failed to alter striatal TH and GFAP levels (Anneken et al., 2015). Herein we characterize the impact of MDPV and METH on astrocytes in frontal cortex. Our data showed that both drugs failed to change GFAP levels as evidenced by western-blot and as gauged by the unaltered astrocytic morphology, in immunohistochemistry. GFAP data regarding METH is not surprising considering that TH levels were not altered at this time-point. Moreover, we also showed that frontal cortical GFAP levels were still unchanged in mice, 3 days post-METH injection (30 mg/kg of METH) (Silva et al., 2013). Consistently, Kelly and colleagues (2012) demonstrated that GFAP levels, in frontal cortex, were normal 12 and 72 hours, following a METH single dose of 20 mg/kg (s.c.) (Kelly et al., 2012). As for MDPV, again, this is the first report looking at astrocytes in frontal cortex. GFAP data further suggests that MDPV is not inducing an overt neurotoxic effect at this time-point. Further studies are warranted to fully characterize MDPV impact on astrocytic function. Overall, GFAP data is consistent with S100 β results. Together it suggests that both drugs are not inducing astrocytic reactivity in frontal cortex.

Myelin is a cholesterol and glycolipidic rich plasma membrane structure, known as an extension of oligodendrocytes (myelin forming cells) in the central nervous system (CNS) that comprises an insulation sheath for axons. (Baumann et al., 2001; Miron and Franklin, 2014). Myelin is expressed in oligodendrocytes in the CNS and is localized in the cytoplasmic surface of the plasma membrane and myelin membrane produced by these cells (Barbarese et al., 1988). As an essential component for axons structure, function and sustainment (Nave and Trapp, 2008), myelin disruption, characterized by demyelination, caused by an insult, leads to major CNS pathologies from congenital and autoimmune disorders to metabolic disturbances (Love, 2006). Importantly, myelin, is drawing investigators attention due to its apparent involvement not only in various psychiatric disorders (such as schizophrenia, bipolar disorder and depression) but also in drug addiction, and in particular, recently myelin was identified as a potential target of many psychotropic drugs. (Bora et al., 2012; Eschenroeder et al., 2012) Nevertheless, only a few scientists have explored the impact of METH in myelin. Bowyer and colleagues, are the mentioned authors, who provided the first insights of CPU myelin damage, 4 hours post-METH administration (40 mg/kg, s.c.) to mice (Bowyer et al. 2008). Myelin basic protein (MBP) is a structural protein that plays a vital role in myelin compaction and thickening in the CNS (Condorelli et al., 2003; Eftekharpour et al., 2007). Herein we characterized MBP levels, as an evaluation of myelinization, in frontal cortex following MDPV and METH. MBP levels were not altered by any drug as assessed by western-blot and displayed by inaltered morphologic profile, in immunohistochemistry. This is suggestive that fibers demyelination in frontal cortex were

not grossly perturbed by both drugs at this time-point. Again, one should stress that, to our knowledge, this is the first report on the impact of a binge episode of MDPV in myelinated structures.

4.2. Concluding remarks

Overall, our study characterizes for the first-time behavioral profile as well as cortical innate immune parameter, 24 hours following a binge MDPV paradigm. Therefore, we offer a first evidence that a single binge MDPV regimen did not come with any changes in both emotional and locomotor parameters, but curiously enhanced exploratory activity in mice. Moreover, MDPV did not impose any changes in innate immunity as well as in neurotoxicity parameters including RAGE, microglial, astrocytic, myelin and dopaminergic markers. Finally, METH is not seemingly imposing any innate immune deregulation at this time-point. One cannot exclude the hypothesis whereby this is a premature time-window to observe significant molecular changes in frontal cortices following both stimulants. In this context, future studies are required to further characterize neuronal and glial effects of MDPV by using other time-points, dosing regimens and brain regions. Moreover, despite pharmacological effects of synthetic cathinones is described to have similar effects to known stimulants of abuse, further studies will be required with a larger spectrum of substances, reported in available illegal products.

Chapter 5

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Chapter 5 - References

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