





Adaptation of cortical but not hippocampal NMDA receptors after chronic citalogram treatment

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Abstract

Chronic treatment with citalopram produced a 6.2-fold reduction in the proportion of high affinity glycine-displaceable [³H]CGP-39653 binding sites and a 1.5-fold reduction in the potency of glycine to inhibit [³H]5,7-dichlorokynurenic acid binding in mouse cortex but not in hippocampus. Chronic citalopram also increased the aspartate concentration by 110% in cortex and 33% in hippocampus, and increased the glycine/threonine concentration by 33% in hippocampus. These results support the hypotheses that: (1) the adaptation of strychnine-insensitive glycine recognition sites and the allosteric coupling of the glycine and glutamate recognition sites are independently regulated by chronic antidepressant treatment; (2) chronic antidepressant administration induces regionally selective adaptation of the NMDA receptor complex; and (3) antidepressant-induced adaptation of the NMDA receptor complex may be mediated by regionally selective changes in excitatory amino acid concentration.

Keywords: Chronic citalopram; NMDA receptor; Excitatory amino acid; Adaptation; Cortex; Hippocampus

1. Introduction

Although the therapeutic efficacy of antidepressant treatments in the treatment of major depressive disorders is well established, the mechanism by which antidepressants exert this effect remains elusive. One of the most robust clinical observations relevant to this mechanism is the fact that antidepressants must be continuously administered for 3-6 weeks in order to achieve therapeutic effects (Heninger and Charney, 1987; Hollister and Csernansky, 1990). It is clear that the pharmacokinetic features of these treatments cannot account for this delay since steady-state blood and CNS concentrations of these drugs that are within therapeutic range can be achieved within 1 week of treatment (Oswald et al., 1972). Thus, the pharmacodynamic effects of these treatments appear to be responsible for the therapeutic response to treatment (see

Hollister and Csernansky, 1990; Maj et al., 1984). This pharmacodynamic response to antidepressant treatment has been described as 'neural adaptation' to encompass the many possible neurobiological responses to the continued presence of antidepressants which may be of relevance to the therapeutic response to these treatments.

Citalopram is an antidepressant with a high potency and selectivity in inhibiting serotonin reuptake, measured in vitro or in vivo (Hyttel, 1978; Pawlowski et al., 1985; Pawlowski and Nowak, 1987). In comparative clinical studies, the efficacy of citalogram was similar to that of amitriptyline, maprotiline, clomipramine, mianserin and imipramine, with a more rapid therapeutic onset than mianserin and a less rapid onset than clomipramine (Milne and Goa, 1991; Bech and Cialdella, 1992; Van Harten, 1993; Rosenberg et al., 1994). Citalopram, like most selective serotonin reuptake inhibitors, is better tolerated by patients than tricyclic antidepressants (Milne and Goa, 1991; Bech and Cialdella, 1992; Van Harten, 1993; Rosenberg et al., 1994). Like the prototypic tricyclic antidepressants. chronic but not acute treatment with citalopram produces D₁ receptor downregulation (Klimek and

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Nielsen, 1987) and α_1 -adrenoceptor upregulation (Vetulani et al., 1984; Nowak and Przegalinski, 1988). However, unlike tricyclics, citalopram treatment is without effect on forebrain β -adrenoceptors (Hyttel et al., 1984; Vetulani et al., 1984; Ordway et al., 1991) and is inactive in the forced swim test (see Hyttel, 1982), a behavioral test predictive for antidepressant activity (Porsolt et al., 1977; Borsini and Meli, 1988). As with other clinically active antidepressant treatments, the therapeutic mechanism of action of citalopram is unknown. Moreover, the acute ability of selective serotonin reuptake inhibitors, such as citalopram, to inhibit the reuptake of serotonin cannot account for the 3-6 weeks delay in the onset of therapeutic response to treatment (Hyttel et al., 1984).

Glutamatergic neurons and the N-methyl-D-aspartate (NMDA) receptor have been implicated in both the behavioral (Trullas and Skolnick, 1990; Trullas et al., 1991; Skolnick et al., 1992; Maj et al., 1992a, b) and the adaptive neuronal response to antidepressant treatments (Nowak et al., 1993; Paul et al., 1993, 1994). Similar to the other ligand-gated ion channels, the 'NMDA receptor complex' is constituted as a heterooligomer (Meguro et al., 1992; Kutswada et al., 1992) with multiple, allosterically coupled recognition sites for glutamate, glycine, polyamines, magnesium, zinc and use-dependent channel blockers (reviewed in Williams et al., 1991; Carter, 1992). However, the NMDA receptor complex differs from other ligandgated ion channels in several respects. For example, the binding of both an agonist (glutamate) to its transmitter recognition site and of glycine to a strychnineinsensitive receptor is required for channel activation (Kleckner and Dingledine, 1988; Carter, 1992).

Chronic, but not acute treatment with clinically effective antidepressants results in adaptation of the NMDA receptor complex. This adaptation is manifest as a reduction in potency of glycine to inhibit [3H]5,7dichlorokynurenic acid (DCKA) binding to strychnineinsensitive glycine receptor and a reduction in the proportion of high affinity glycine binding sites inhibiting the [3H]CGP-39653 binding to glutamate site of the NMDA receptor (Nowak et al., 1993; Paul et al., 1993, 1994). However, chronic citalopram treatment produces only modest effects on the potency of glycine to inhibit of [3H]5,7-DCKA binding (~1.8-fold) compared to the 2-4-fold reductions in the potency of glycine to inhibit [3H]5,7-DCKA binding typically observed after chronic antidepressant treatments (Paul et al., 1994). In contrast, preliminary studies have suggested that chronic citalogram treatment results in the most robust reduction in the proportion of high affinity glycine-displaceable [3H]CGP-39653 binding sites of all antidepressants tested to date. These data suggest that a precise, stoichiometric relationship between adaptation at the strychnine-insensitive glycine recognition site and the glutamate recognition site does not necessarily occur.

Moreover, the mechanism by which antidepressants induce these changes is not known. While some antidepressants directly interact with the NMDA receptor complex in vitro (reviewed in Paul et al., 1994), the affinity of these drugs for the NMDA receptor complex is quite low, indicating that this mechanism is unlikely to account for antidepressant-induced adaptation of the NMDA receptor complex. Since the primary means for inactivating simple amino acid neurotransmitters is probably reuptake (Debler and Lajtha, 1987), one explanation for these preliminary data is that chronic administration of citalopram alters excitatory amino acid neurotransmitter release or uptake and hence might result in alterations in forebrain levels of either glycine or glutamate. The aims of the present study were to test: (1) the hypothesis that the stoichiometric relationship between the adaptation of the glycine and glutamate recognition sites of the NMDA receptor complex is not uniform among antidepressant treatments; (2) whether adaptation of the NMDA receptor complex in response to chronic citalogram treatment is region specific and; (3) whether chronic treatment with citalopram results in regionally selective alterations in forebrain concentrations of excitatory amino acids.

We now report that chronic treatment with citalopram produced only a moderate reduction in the potency of glycine to inhibit [3H]5,7-DCKA binding to strychnine-insensitive glycine receptors, while producing a nearly complete elimination of high-affinity glycine displacement of [3H]CGP-39653 binding to NMDA receptors. Thus, there is no direct stoichiometric relationship between the adaptation of strychnine-insensitive glycine recognition sites and the ability of glycine to displace antagonist binding to the glutamate recognition site of the NMDA receptor complex. In addition, the effects of citalopram treatment on both sites of the NMDA receptor complex were restricted to cortex, supporting the hypothesis that chronic antidepressant administration induces regionally selective adaptation of the NMDA receptor complex. Moreover, regionally specific alterations in forebrain levels of aspartate, but not glycine/threonine appear to parallel citalogram-induced adaptation of the NMDA receptor complex. These data are consistent with the hypothesis that adaptation of cortical glutamatergic neurons and the NMDA receptor complex is involved in the action of antidepressants.

2. Materials and methods

2.1. Animals

Male NIH Swiss-Webster mice (20–25 g, HSD) were housed in groups of 8–10 under a 12 h light/dark cycle

(lights on at 07:00 h) with free access to food and water until 3 h prior to killing. All procedures were conducted according to University of Mississippi Medical Center Animal Care and Use Committee guidelines. Citalopram (20 mg/kg i.p. – Lundbeck A/S – Copenhagen, Denmark) was administered once daily for 14 days. Animals were killed by decapitation 24 h after the last treatment, the brains were removed, neocortices (part of cortex localized above the rhinal sulcus) and hippocampi dissected, and placed on aluminum foil over solid $\rm CO_2$. Tissues were stored at $-80^{\circ}\rm C$ until assayed (2–6 weeks).

2.2. Radioligand binding assays

Radioligand binding assays were conducted essentially as previously described (Baron et al., 1991; Sills et al., 1991; Nowak et al., 1993). Initially, tissues were thawed in 50 volumes ice-cold 5 mM Hepes/4.5 mM Tris (HTS) buffer (pH 7.4) prepared using ultrapurified water exposed to UV light and passed through a final 0.22 μ m filter (Solution 2001BU, Solution Consultants, Jasper, GA). This ultrapurified water preparation has previously been demonstrated to reduce total organic carbon to <10-50 ppb (Solution Consultants) and amino acid concentrations to <1 nM (R. Trullas, personal communication). Thawed tissues were then homogenized with a Brinkmann Polytron (setting 6, 20-30 s) and centrifuged at 20000 × g for 20 min.

2.2.1. $[^{3}H]CGP-39653$ binding assays

Tissue pellets were reconstituted in 50 volumes of HTS buffer containing 10 mM EDTA and centrifuged at $20\,000 \times g$ for 20 min. The resulting tissue pellet was resuspended in 50 volumes of HTS buffer and stored at -80° C for at least 3 days. On the day of the assay, the frozen aliquot was thawed and washed 3 times with 50 volumes HTS. Assays consisted of membrane suspension (0.1–0.2 mg of protein), 10 nM [³H]CGP-39653 (46 Ci/mmol; DuPont-NEN) and buffer and/or drugs to a final volume of 0.5 ml. Nonspecific binding was defined in the presence of 1 mM L-glutamate. Sixteen concentrations $(10^{-2} \text{ to } 10^{-10} \text{ M})$ of glycine were used to construct inhibition curves. Samples were incubated at 0-4°C for 1.5 h. Bound ligand was separated by vacuum filtration over Whatman GF/C filters presoaked in 0.03% polyethyleneimine and washed twice with 5 ml of ice-cold HTS buffer. The filters were placed in 0.5 ml of Microscint-20 scintillation cocktail and the radioactivity measured in a Packard TopCount microplate scintillation counter.

2.2.2. $[^3H]$ 5,7-DCKA binding assays

Tissue pellets were washed twice in HTS containing 1 mM EDTA. The resulting tissue pellet was reconstituted in 5-10 volumes of HTS and stored at -80°C for

at least 2 days prior to assay. On the day of the assay the frozen aliquot was washed once. The final tissue suspension was prepared in 50 mM Hepes-KOH buffer (pH 8.0). Assays consisted of membrane suspension $(0.1-0.2 \text{ mg of protein}), 20 \text{ nM } [^3\text{H}]5,7\text{-DCKA} (15.8)$ Ci/mmol; DuPont-NEN) and buffer and/or drugs to a final volume of 1 ml. Nonspecific binding was defined in the presence of 100 μ M of glycine. Eleven concentrations $(10^{-4}-10^{-9} \text{ M})$ of glycine were used to construct inhibition curves. Incubation was terminated in a refrigerated centrifuge (15 min at $20000 \times g$). After aspirating the supernatant, pellets were superficially washed once with 1 ml Hepes-KOH buffer, dissolved in tissue solubilizer (Solvable, NEN-Research Products), and neutralized with glacial acetic acid. Scintillation cocktail (4 ml – Cytoscint, ICN Biomedicals, Irvine, CA) was added to this mixture and the radioactivity measured in a Beckman LS 3801 liquid scintillation counter.

All assays were performed in duplicate. Protein content was determined using Pierce (Rockford, IL) Protein Assay kits using the bicinchoninic acid method (Smith et al., 1985).

2.2.3. Amino acid analysis

Concentrations of amino acids were measured by high-performance liquid chromatography with electrochemical detection as previously described (Donzanti and Yamamoto, 1988). Tissue samples were sonicated in ice-cold HCLO₄ containing 10 μg/ml homoserine as an internal standard and were centrifuged at 13000 $\times g$ for 5 min at 4°C. The supernatant was collected and filtered through a 0.2 μ m nylon syringe (Millipore, MA). Protein content of the pellet was determined as described above. The supernatant was analyzed using a Waters Maxima 820 analytical work station using coulometric electrochemical detection equipped with a dual electrode high sensitivity analytical cell (ESA Model 5100A, at a working potential of -0.03 and Model 5011 at a working potential of +0.65 V). The column was packed with Adsorbosphere C18 (100×4.6 mm – Alltech). The mobile phase was 0.1 M Na₂HPO₄, 0.13 mM Na₂EDTA and 33% methanol (pH 5.92) at a flow rate of 1.2 ml/min and pressure of 3.88 p.s.i. Concentrations of amino acids were determined by a comparison of peak area ratios of the samples with those of standards and are reported in ng of substance per μg of protein.

2.2.4. Data analysis and statistics

Data were analyzed using iterative curve fitting routines (GraphPAD/InPlot Ver. 4.04 or GraphPAD Prism Ver. 1.01). Group differences were assessed using analysis of variance (ANOVA) followed by Dunnett's post-hoc comparisons (Genstat 3.0, Research Triangle Park, NC) or repeated measures ANOVA

followed by Bonferoni-corrected univariate F-test (SYSTAT 5.0, Evanston, IL) as appropriate. Data were deemed significant when P < 0.05.

3. Results

3.1. Glycine displacement of [3H]CGP-39653 binding

In both citalopram- and saline-treated mice, glycine displaced [³H]CGP-39653 binding to cortical homogenates over a concentration range from 10⁻⁹ to

 10^{-2} M (Fig. 1A). In controls, the single-site model for glycine displacement of [3 H]CGP-39653 possessed a very shallow slope (for pooled data, $n_{\rm H}=0.21$) and the data were significantly better fit for all subjects using a two-site model (for pooled data F(1,75)=5.10, P=0.027). However, in citalopram-treated mice, glycine displacement of [3 H]CGP-39653 possessed a slope that did not differ from unity (for pooled data, $n_{\rm H}=0.75$) and was best fit by one-site model for five of six subjects (for pooled data, F(1,76)=3.06, P=0.084). As a consequence, chronic treatment with citalopram reduced the proportion of high affinity glycine-dis-

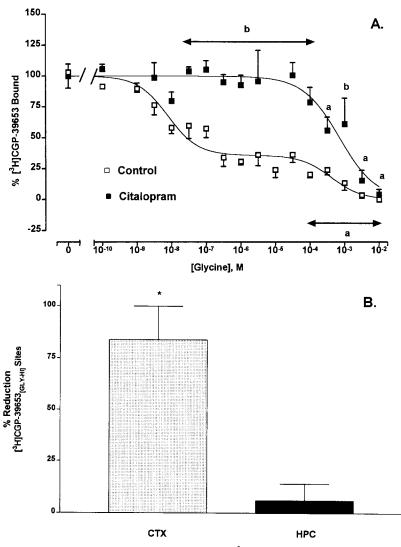


Fig. 1. Effect of chronic treatment with citalopram on glycine inhibition of [3 H]CGP-39653 binding. (A) Glycine inhibition [3 H]CGP-39653 binding to cortical membranes. Data are expressed as percent specific binding. Untransformed values are presented in Table 1. Data for saline-treated mice were best fit to a two-site model [F(1,75) = 5.10, P = 0.027] and to a one-site model for citalopram-treated mice [F(1,76) = 3.06, P = 0.084]. Two-factor (citalopram treatment by glycine concentration) ANOVA revealed main effects of citalopram [F(1,123) = 134.6, P < 0.001], glycine concentration [F(14,123) = 22.1, P < 0.01] and an interaction between citalopram treatment and glycine concentration [F(14,123) = 3.48, P < 0.01]. P < 0.05 vs. 10^{-10} M glycine, P < 0.05 vs. saline-control (Bonferoni-corrected univariate P < 0.05). (B) Effect of chronic treatment with citalopram on glycine inhibition of [P < 0.05] binding in cortex (CTX) and hippocampus (HPC). Data are expressed as the percent reduction in the apparent density of high-affinity, glycine-displaceable [P < 0.05] binding sites and represent the means P < 0.05 vs. saline treatment (Dunnett's post hoc comparison).

Table 1
Effect of chronic treatment with citalopram on glycine inhibition of [³H]CGP-39653 binding to mouse cortex and hippocampus

Treatment	Specific binding (fmol/mg protein)	Site 1 IC ₅₀ (nM)	% Site 1	Site 2 IC ₅₀ (μM)	2 Site/ 1 site
Cortex					
Control	389 ± 40	44.0 ± 26.0	68 ± 4	2310 ± 1707	6/0
Citalopram	317 ± 32	0.13 ± 0.13	11 ± 11 a	1058 ± 386	1/5 ^b
Hippocampus					
Control	624 + 76	165 ± 105	52 ± 7	1139 ± 492	4/0
Citalopram	$\frac{-}{766 \pm 47}$	116 ± 66	44 ± 4	2492 ± 1368	5/0

Animals were treated with saline or citalopram (20 mg/kg i.p.) for 14 days. 24 h after the last administration, the animals were killed and [3 H]CGP-39653 binding was assayed as described in Methods. A one-site model was assumed unless the sum of squares of the model was significantly reduced by employing a two-site model (F-test, GraphPAD Prism 1.01). Data represent the means \pm S.E.M. of four to six mice/group. a P < 0.05 vs. control (Dunnett's t-test), b P < 0.01 vs. control (Fisher's Exact Test – 2 site/1 site).

placeable [³H]CGP-39653 binding sites in cortex by 89% (Table 1; Fig. 1A). In contrast, citalopram treatment did not affect either specific [³H]CGP-39653

binding or the potency of glycine to inhibit [³H]CGP-39653 binding at either the high or low affinity sites in cortical homogenates (Table 1; Fig. 1A).

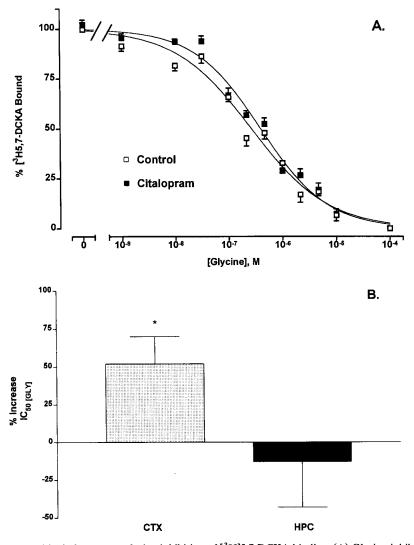


Fig. 2. Effect of chronic treatment with citalopram on glycine inhibition of $[^3H]5,7$ -DCKA binding. (A) Glycine inhibition $[^3H]5,7$ -DCKA binding to cortical membranes. Data are expressed as percentages specific binding. Untransformed values are presented in Table 1. (B) Effect of chronic treatment with citalopram on glycine inhibition of $[^3H]5,7$ -DCKA binding in cortex (CTX) and hippocampus (HPC). Data are expressed as the percentages increase in IC₅₀ vs. saline and represent the means \pm S.E.M. of six to nine animals/group). * P < 0.05 vs. saline (Dunnett's t-test).

Glycine also displaced [3H]CGP-39653 binding to hippocampal homogenates over a concentration range from 10^{-9} to 10^{-2} M (Fig. 1B). However, in contrast to the results obtained with cortical homogenates, in both control and citalogram-treated mice, the singlesite model for glycine displacement of [³H]CGP-39653 possessed a very shallow slope (for pooled data, $n_{\rm H}$ = 0.28 and $n_{\rm H} = 0.19$, for saline- and citalogram-treated, respectively) and the data were significantly better fit for all subjects using a two-site model (pooled data F(1,43) = 4.20, P = 0.047 and F(1,65) = 12.50, P =0.0008, for saline- and citalogram-treated, respectively). Likewise, citalopram treatment did not affect either specific [3H]CGP-39653 binding or the potency of glycine to inhibit [3H]CGP-39653 binding at either the high or low affinity sites in hippocampal homogenates (Table 1; Fig. 1B).

3.2. Glycine displacement of [3H]5,7-DCKA binding

Chronic treatment with citalopram reduced the potency (increased the IC₅₀ value) of glycine to inhibit [³H]5,7-DCKA binding 1.5-fold in cortex, but not in hippocampus (Fig. 2A,B). This treatment did not affect specific [³H]5,7-DCKA binding in either brain region (Table 2).

3.3. Amino acid concentrations

Chronic treatment with citalopram resulted in a $110 \pm 29\%$ increase in the concentration of aspartate in cortex but, did not significantly affect cortical concentrations of glutamate, serine, glutamine, glycine/threonine, taurine or alanine (Table 3). Similarly, chronic citalopram treatment resulted in a significant increase in the hippocampal concentration of asparatate (33 \pm 10%) and glycine/threonine (33 \pm 7%)

Table 2
Effect of chronic treatment with citalopram on glycine inhibition of [³H]5,7-DCKA binding to mouse cortex and hippocampus

Treatment	Specific binding (fmol/mg protein)	IC ₅₀ (nM)	$n_{ m H}$
Cortex			
Control	910 ± 54	275 ± 32	0.64 ± 0.06
Citalopram	861 ± 57	417 ± 50^{a}	0.71 ± 0.07
Hippocampus			
Control	520 ± 84	495 ± 146	0.82 ± 0.21
Citalopram	460 ± 71	433 ± 149	0.67 ± 0.08

Animals were treated with saline or citalopram (20 mg/kg i.p.) for 14 days. 24 h after the last administration, the animals were killed and [3 H]5,7-DCKA binding was assayed as described in Methods. A one-site model was assumed unless the sum of squares of the model was significantly reduced by employing a two-site model (F-test, GraphPAD Prism 1.01). Data represent the means \pm S.E.M. of six to nine mice/group. a P < 0.05 vs. control (Dunnett's t-test).

Table 3
Effect of chronic treatment with citalopram on excitatory amino acid concentrations in mouse cortex and hippocampus

Amino acid	Cortex		Hippocampus	
	Control	Citalopram	Control	Citalopram
Aspartate	14.4 ± 0.9	30.2 ± 4.2 a	10.1 ± 0.4	13.4 ± 1.0 a
Glutamate	32.0 ± 2.5	44.4 ± 6.3	64.4 ± 3.6	72.5 ± 2.6
Serine	2.4 ± 0.4	3.2 ± 0.6	5.7 ± 0.2	6.2 ± 0.3
Glutamine	18.5 ± 1.7	24.5 ± 3.9	13.3 ± 0.4	13.7 ± 0.7
Glycine/threonine	1.7 ± 0.3	1.7 ± 0.4	3.0 ± 0.1	4.0 ± 0.2^{-a}
Taurine	73.1 ± 8.0	107.2 ± 11.8	60.1 ± 2.2	62.2 ± 2.3
Alanine	1.0 ± 0.1	1.5 ± 0.2	1.9 ± 0.1	2.3 ± 0.2

Animals were treated with saline or citalopram (20 mg/kg i.p.) for 14 days. 24 h after the last administration, the animals were killed and excitatory amino acid concentrations were assayed as described in Methods. Data are expressed in ng/ μ g protein and represent the means \pm S.E.M. of four mice/group. ^a P < 0.05 vs. control.

without affecting hippocampal concentrations of other excitatory amino acids (Table 3).

4. Discussion

Antidepressant drugs possess high to moderate affinity for the NMDA receptor complex in radioreceptor binding in vitro and in functional studies ex vivo (Reynolds and Miller, 1988; Sills and Loo, 1989; Kitamura et al., 1991; Cai and McCaslin, 1992; McCaslin et al., 1992; Mjellem et al., 1993). In addition, chronic antidepressant treatment in vivo affects excitatory amino acid concentrations in both mouse brain (Kitamura et al., 1991) and in cerebrospinal fluid (CSF) samples from depressed patients (Pangalos et al., 1992).

Functional antagonists at both the glycine and glutamate recognition sites of the NMDA receptor complex are active in preclinical rodent behavioral screening procedures sensitive to antidepressants (Trullas and Skolnick, 1990; Trullas et al., 1991; Skolnick et al., 1992; Maj et al., 1992a, b). Likewise, chronic administration of NMDA receptor antagonists reverses chronic mild stress-induced reductions in sucrose drinking in rats, a rodent model of depression (Papp and Moryl, 1993, 1994). Moreover, chronic but not acute treatment with NMDA receptor antagonists results in a reduction in the density of β -adrenoceptors (Paul et al., 1992; Klimek and Papp, 1994).

Our previous studies have demonstrated that chronic treatment with antidepressants from all of the principal pharmacological groups as well as electroconvulsive shock reduce the potency of glycine to inhibit [³H]5,7-DCKA binding in both mouse and rat cortex (Nowak et al., 1993; Paul et al., 1993, 1994). In addition, we have demonstrated that chronic administration of imipramine or electroconvulsive shock reduces the proportion of high affinity glycine-displaceable [³H]CGP-

39653 binding sites in rodent cortex (Nowak et al., 1993; Paul et al., 1993). In both measures, imipramine-induced adaptation of the NMDA receptor complex was regionally selective, being observed in cerebral cortex, but not in hippocampus, striatum or basal fore-brain (Nowak et al., 1993). In preliminary studies we found that chronic treatment with some other antide-pressants (amitriptyline, pargyline and citalopram) also reduces the proportion of high affinity glycine-displaceable [³H]CGP-39653 binding sites in mouse cortex (Layer et al., 1995).

The present studies confirm and extend these preliminary results, demonstrating that chronic administration of citalopram results in robust, regionally selective effects on the displacement of [³H]CGP-39653 and [³H]5,7-DCKA binding by glycine. Thus, chronic citalopram treatment resulted in reductions in the proportion of high-affinity, glycine-displaceable [³H]CGP-39653 binding sites and in the potency of glycine to inhibit [³H]5,7-DCKA binding in cortical, but not hippocampal membranes.

In addition, the present study demonstrates that the effect of chronic treatment with antidepressants does not necessarily result in stoichiometrically equivalent effects on both the glycine and glutamate recognition sites of the NMDA receptor complex. Thus, chronic administration of citalogram results in essentially complete elimination of the high-affinity component of glycine displacement of [3H]CGP-39653 to the glutamate site while resulting in a modest ~ 1.5-fold increase in the IC₅₀ of glycine to displace [3H]5,7-DCKA binding to the glycine site. By comparison, the effect of chronic imipramine and electroconvulsive shock treatments, ranges between 2- to 4-fold for both the proportion of high-affinity glycine-displaceable [3H]CGP-39653 binding sites and for the reduction in the potency of glycine to displace [3H]5,7-DCKA binding (Nowak et al., 1993; Paul et al., 1993, 1994). Thus, it appears that antidepressants can regulate the glycine and glutamate recognition sites of the NMDA receptor complex independently of one another.

In earlier studies of the time-course and dose-response of antidepressant-induced adaptation of the NMDA receptor complex we have demonstrated that imipramine is significantly more efficaceous than citalopram (~330% vs. 200%, respectively) at reducing the potency of glycine to inhibit [3H]5,7-DCKA binding to the glycine recognition site of the NMDA receptor complex (Paul et al., 1994). However, the minimum effective dose for these treatments to induce adaptation of this site is similar (Paul et al., 1994). In the present study, chronic administration of citalopram resulted in nearly complete elimination (~6.2-fold reduction) of the high affinity component of glycine-displaceable [3H]CGP-39653 binding to the glutamate recognition site of the NMDA receptor complex. By

contrast, previous studies with imipramine have resulted in a much less robust reduction in the proportion of high affinity, glycine-displaceable [3H]CGP-39653 binding (~ 1.4-fold - Nowak et al., 1993). As recently demonstrated by Mugnaini et al. (1993) this high affinity component of the displacement of [³H]CGP-39653 binding to the glutamate recognition site by glycine is a consequence of an allosteric coupling between glycine and glutamate sites of the NMDA receptor complex. In contrast, Yoneda et al. (1993) have reported that the inhibition of [3H]5,7-DCKA binding by glycine is consistent with a competitive mechanism. Taken together, these data indicate that imipramine treatment has a more significant impact on the strychnine-insenstive glycine recognition site of the NMDA receptor complex than on the allosteric coupling of the glycine and glutamate recognition sites. Conversely, citalogram robustly disrupts the allosteric coupling between the glycine and glutamate recognition sites while slightly affects the strychnine-insensitive glycine recognition site. While further studies will be required, these differences in the response of the NMDA receptor complex to antidepressant treatments, provide a potential mechanism to account for the nonuniform clinical response to antidepressant treatments.

Recently, Grimwood et al. (1993) have demonstrated that glutamate site antagonists appear to interact with the distinct glutamate recognition site of the NMDA receptor complex. These glutamate recognition site subtypes are diffentially sensitive to glutamate antagonists with a 5 or 7 carbons linking carboxyl-phosphonate moeities (so called 'C-5' and 'C-7' antagonists). Moreover, the modulation of radioligand binding to these subtypes by stychnine-insensitive glycine site ligands is distinct (Grimwood et al., 1993). Thus it could be argued that CGP-39653 (and other so called 'C-5' antagonists such as CGS-19755) may bind not only to the glutamate site of the NMDA receptor complex but also to the strychnine-insensitive glycine recognition site. This hypothesis would imply that the high affinity component of glycine displacement of [³H]CGP-39653 from the glutamate binding site is in reality glycine displacement of [3H]CGP-39653 binding to glycine sites. However, only agonists of the strychnine-insensitive glycine recognition site (glycine and D-serine) displace [3H]CGP-39653 binding with both high and low affinity components. In contrast glycine site antagonists, such as 7-chlorokynurenic acid displace [3H]-CGP-39653 with only a single low affinty component (Mugnaini et al., 1993). Moreover, the high affinity component of glycine inhibition of the [3H]CGP-39653 binding is dose dependently reversed by 7-chlorokynurenic acid. These findings indicate that it is unlikely that high affinity glycine-displaceable [3H]CGP-39653 binding is due to a competitive interaction between glycine and [³H]CGP-39653 at the strychnine-insensitive glycine sites. In spite of the possible arguments that the antidepressant treatment induce alterations in spanning (or spatial arrangement) of these two sites (glutamate and glycine), we accept as more likely the hypothesis that [³H]CGP-39653 binds to glutamate sites which are modulated by glycine site agonists and that this modulation is altered by chronic antidepressant treatment.

The present data also demonstrate that, like imipramine, citalopram induces adaptative changes in a regionally selective manner with effects being observed in cortex but not in hippocampus. It is noteworthy that in spite of the robust effect of citalopram on the proportion of high affinity glycine-displaceable [³H]CGP-39653 binding sites in cortex, this effect is not present in hippocampus, supporting the notion that adaptation of the NMDA receptor complex is specific to cerebral cortex. Moreover, these data suggest that antidepressant-induced adaptation of the NMDA receptor involves a relatively discrete subpopulation of glutamatergic neurons with projections in or to the cortex but not hippocampus.

As discussed previously, the significance of the adaptation of the response of the NMDA receptor complex to glycine would be of little importance if strychnine-insensitive glycine receptors were saturated in vivo (Paul et al., 1993, 1994). The reported concentration of glycine in extracellular extracts and cerebrospinal fluid is high enough to saturate these receptors (reviewed in Kemp and Leeson, 1993). However, several lines of evidence indicate receptor saturation may not be obtained in situ (reviewed in Thomson, 1990). For example, glycine has been shown to potentiate the actions of NMDA in both neocortical slices ex vivo (Thomson, 1990) and thalamic, spinal cord and hippocampal neurons in vivo (Salt, 1989; Budai et al., 1992; Thiels et al., 1992). Moreover, administration of glycine, D-serine (a high affinity ligand at strychnine-insensitive glycine receptors) or D-cycloserine (a partial agonist at the strychnine-insensitive glycine receptors) elevates in vivo cerebellar cyclic GMP levels and this effect is antagonized by NMDA antagonists (Wood et al., 1989; Danysz et al., 1989; Rao et al., 1990) and enhances the excitability of the hippocampal dentate granule cells in vivo (Pitkanen et al., 1994). These findings, taken together with the presence of a high capacity, low affinity uptake system for glycine in the central nervous system (Trullas et al., 1991) indicate that the antidepressant-induced reductions in the potency of glycine for strychnine-insensitive glycine sites and in the ability of glycine to allosterically modulate glutamate sites could have a profound impact on the operation of the NMDA receptor complex.

In view of the essential role of glycine in the operation of NMDA receptor-coupled cation channels

(Kleckner and Dingledine, 1988; Carter, 1992), the present and the previous (Nowak et al., 1993; Paul et al., 1993, 1994) findings indicate that chronic antidepressant treatment impairs operation of NMDA receptor-coupled cation channels selectively in the cerebral cortex. Thus, it is of interest to note that in vivo computer tomography and magnetic resonance imaging studies have reported frontal cortical dysfunction in both unipolar and bipolar depression in humans (Robinson and Szetela, 1981; Starkstein et al., 1987, 1988, 1989; Sinyor et al., 1986; Baxter et al., 1989; Coffey et al., 1993). The present data together with our previous results are thus in good accord with these studies in humans and support the hypothesis that involvement of a cortical glutamate-NMDA system represents a final common pathway of antidepressant activity and potentially of the pathophysiology of human depression.

The mechanisms by which antidepressant treatments such as citalogram effect adaptative changes in ligand binding to the NMDA receptor complex are unknown. Reynolds and Miller (1988) and Kitamura et al. (1991) have reported that certain tri- and tetracyclic antidepressants inhibit [3H]dizocilpine binding to rodent brain. Likewise, we have found citalogram to possess moderate affinity to displace [3H]dizocilpine $(IC_{50} = 37 \pm 3 \mu M - Nowak et al., unpublished data)$ which is comparable to that of imipramine (IC₅₀ = 16 $\pm 1 \mu M$ - Nowak et al., unpublished data) and other antidepressants in this system (Reynolds and Miller, 1988; Kitamura et al., 1991). While it is possible that the adaptation produced by antidepressants such as citalogram at the dose employed in the present study might be achieved by a direct interaction with the NMDA receptor complex, the relatively low affinities of other antidepressants (e.g. mianserin, $IC_{50} \sim 300$ μM) makes this an unlikely mechanism to account for the adaptation of the NMDA receptor complex across treatments. Moreover, this explanation cannot account for the distinct differences in the response of the NMDA receptor complex to antidepressants such as imipramine and citalopram which possess very similar potency to displace [3H]dizocilpine.

In the present study, we examined the possibility that an antidepressant which induces a robust 'decoupling' of the glycine and glutamate sites of the NMDA receptor complex might also induce changes in forebrain excitatory amino acid levels. The observed doubling of cortical aspartate levels following chronic citalopram treatment is robust (~110%) and could potentially be involved in the mechanism of the disruption in the coupling between glycine and glutamate sites in cortex via a hyperstimulation of the glutamate recognition site of the NMDA receptor complex. This hypothesis is supported by the fact that chronic citalopram treatment did not result in decoupling of the

glycine-glutamate sites in hippocampus where aspartate concentrations were more modestly affected than in cortex. Conversely, the concentration of glycine/threonine is increased only in the hippocampus where no adaptation of the NMDA receptor complex was evident. Thus, alterations in forebrain concentrations of these amino acids do not appear to be directly related to the the adaptation of the NMDA receptor complex, since this effect is observed only in cortex.

Kitamura et al. (1991) detected 8–15% reductions in excitatory amino acid concentrations in mouse hippocampus following chronic treatment with desipramine. The differences between the present study and that of Kitamura et al. (1991) may be related to differences in the mechanism of action of citalogram and desipramine. Alternatively, it is possible that citalogram produces transient changes in the excitatory amino acid concentrations during chronic treatment, which participate in inducing receptor adaptation, but are not detectable 24 h after the last treatment. Additional studies will be needed to resolve this issue. Nevertheless, the present data represent the first demonstration of alterations in forebrain concentrations of excitatory amino acids following chronic treatment with an antidepressant drawn from the class of 'selective serotonin uptake inhibitors'. In addition, these data suggest that selective alterations in presynaptic concentrations of excitatory amino acids may play a role in the adaptation of the NMDA receptor complex, induced by chronic antidepressant treatment. Thus, these data indicate that both pre- and postsynaptic elements of glutamatergic pathways may be affected by chronic antidepressant administration.

In summary, the present data are consistent with the hypothesis that adaptation of glutamatergic neurons and the NMDA receptor complex is involved in the action of antidepressants. In addition, these data lend further support to the hypothesis that these effects are specific within forebrain structures. Moreover, the present findings demonstrate that the adaptation of strychnine-insensitive glycine recognition sites and the allosteric coupling of the glycine and glutamate recognition sites of the NMDA receptor complex are independently regulated by chronic antidepressant treatment.

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