

Corrigendum

Corrigendum to 'Naloxonazine antagonism of levorphanol-induced antinociception and respiratory depression in rhesus monkeys'
[Eur. J. Pharmacol. 298 (1996) 31–36]¹

Michael B. Gatch^{a,*}, Anthony Liguori^{b,2}, S. Stevens Negus^a, Nancy K. Mello^a,
Jack Bergman^b

^a Alcohol and Drug Abuse Research Center, McLean Hospital, Belmont, USA

^b Laboratory of Psychobiology, Harvard Medical School, Belmont, USA

Received 31 July 1995; revised 2 November 1995; accepted 10 November 1995

Abstract

The μ -opioid receptor antagonist effects of naloxonazine on levorphanol-induced thermal antinociception and respiratory depression were examined in rhesus monkeys. Levorphanol (0.032–3.2 mg/kg) produced dose-dependent increases in tail-withdrawal latencies from 50°C water in a warm-water tail-withdrawal assay and dose-dependent decreases in ventilation in both air and 5% CO₂ mixed in air. Naloxonazine (0.1–3.0 mg/kg) antagonized both the antinociceptive and ventilatory effects of levorphanol to a similar degree, and the antagonist effects of naloxonazine were greater after 1 h than after 24 h. Under all conditions, the antagonist effects of naloxonazine were fully surmountable. Schild analysis of the antagonist effects of naloxonazine after 1 h pretreatment in the antinociception assay yielded a pA₂ value of 7.6 and a slope of –0.50; by comparison, quadazocine yielded a pA₂ value of 7.5 and a slope of –1.05. These results suggest that naloxonazine acts as a potent and fully reversible μ -opioid receptor antagonist with a moderately long duration of action in rhesus monkeys. In addition, these results suggest that the antinociceptive and ventilatory effects of μ -opioid receptor agonists in rhesus monkeys are mediated by pharmacologically similar populations of μ -opioid receptors.

Keywords: Antinociception; Respiratory depression; Opioid receptor; Naloxonazine; Levorphanol; Quadazocine; (*Macaca mulatta*)

In the above-mentioned paper, Dr. Anthony Liguori was incorrectly named as Tony Liguori, and Dr. Liguori should have been given second authorship, rather than fourth. Above, please find the amended order of authorship.

The Authors

* Corresponding author. Alcohol and Drug Abuse Research Center, McLean Hospital, Harvard Medical School, 115 Mill Street, Belmont, MA 02178, USA. Tel.: 617-855-2899; fax: 617-855-3268.

¹ SSDI of original article: 0014-2999(95)00769-5.

² Current address: Department of Psychiatry, University of Vermont, Burlington, VT 05401-1429, USA.