REVIEW OF CLINICAL PHARMACOLOGY AND PHARMACOKINETICS, INTERNATIONAL EDITION 18: 177-178 (2004)

©PHARMAKON-Press

# Somatostatin Receptors in the Ventral Pallidum Modulate Rat Locomotor Activity

K. Thermos<sup>1</sup>, A. Kastellakis<sup>1,2</sup>, D. Papasava<sup>1</sup>, K. Antoniou<sup>3</sup>, S. Kyrkouli<sup>1,4</sup> and A. Marazioti<sup>1</sup>

<sup>1</sup>Laboratory of Pharmacology, Department of Basic Sciences, Faculty of Medicine, <sup>2</sup>Department of Psychology, <sup>4</sup>Philosophy and Social Sciences, University of Crete, Crete, Greece; <sup>3</sup>Laboratory of Pharmacology, School of Medicine, University of Athens, Athens, Greece

S u m m a r y. The aim of the present study was to examine the effect of somatostatin and selective ligands on locomotor activity, after infusion in the ventral pallidum of the rat.

# INTRODUCTION

The neuropeptide somatostatin is found in medium sized aspiny neurons in nuclei of the basal ganglia, such as the striatum and the nucleus accumbens, where it is implicated in dopaminemediated behaviors. Somatostatin mediates its actions by activating six somatostatin receptor subtypes, namely sst<sub>1</sub>, sst<sub>2A</sub>, sst<sub>2B</sub>, sst<sub>3</sub>-sst<sub>5</sub>. Somatostatin receptors (sst<sub>1</sub> and sst<sub>2</sub>) have been localized in areas implicated in motor control such as the nucleus accumbens (NAc), the globus pallidus (GP), and the ventral pallidum (VP) (1), yet their role in locomotor activity has not been established.

### **METHODS**

Male Sprague-Dawley rats weighing 300-350g were used for all experiments. Animals were housed one per cage before and after the surgery, in a room maintained at 22 °C with an alternating 12h light/dark cycle. Food and water was provide ad libitum. Each rat was anaesthetized [ketamine HCl (100 μg/kg), xylazine (10 μg/kg)] and secured in the stereotaxic frame. Guide canulae made from 24 gauge stainless steel tube were positioned bilaterally towards the ventral pallidum [AP-0.8, ML ±2.2, VD-7.9] according to Paxinos and Watson (2). A six days post-operative interval was allowed. A cannula for injecting drug solutions into the brain through the guides was made with a 30 gauge needle connected by

polyethylene tube (PE 10) to a 1 µl Hamilton syringe. The injection sites were reached by the cannula tip extending beyond the implanted guides by 0.5 mm. Somatostatin (60, 120, 240 ng/0.5µl/side), CH275 (sst<sub>1</sub> analog;120, 240, 480 ng/0.5µl/side), MK678 (sst<sub>2</sub> analog;120, 240, 480 ng/0.5µl/side), and L-809,087(sst<sub>4</sub> 240ng/0.5µl/side) were delivered bilaterally via the 30 gauge needle. Sterile normal saline (0.5 μl/ side) was injected into control animals. Spontaneous motor activity was measured using a rectangular activity cage (56x56x30cm), provided with horizontal/vertical infra-red sensors. Each rat was adapted to the room for 60min, and then in the activity cage for 30 min (habituation). The animal was then removed, microinjected bilaterally with somatostatin ligands or saline and returned to the activity cage for 60 min.

# RESULTS

Somatostatin infusion in the ventral pallidum attenuated the locomotor activity of the rat in a concentration dependent manner. This effect was mimicked by both sst<sub>1</sub> and sst<sub>2</sub> selective ligands. The sst<sub>1</sub> agonist CH275 decreased locomotor activity at concentrations of 240 and 480 ng/0.5ul/side. This decrease was reversed by the selective sst<sub>1</sub> antagonist SRA-880, while the antagonist alone had no effect. The sst<sub>2</sub> agonist MK678 also decreased locomotor activity in a concentration dependent manner. This effect was reversed by the selective sst<sub>2</sub> antagonist CYN-154806. The selective sst<sub>4</sub> agonist L-809,087 had no effect on locomotor activity.

### CONCLUSIONS

The present data complement the immunohistochemistry findings supporting the presence of sst<sub>1</sub> and sst<sub>2</sub> in the ventral pallidum. Somatostatin via the activation of sst<sub>1</sub> and sst<sub>2</sub>receptors regulates the physiology of the ventral pallidum and reduces locomotor activity. The mechanism of somatostatin's actions may involve the decrease of somatostatin either in the nucleus accumbens via the GABAergic projection from the VP to the NAc [3] or the inhibition of the VTA dopaminergic neurons again via a GABAergic projection from the VP to the VTA, and subsequent activation of GABA-B receptors [4,5]. This hypothesis is presently under investigation in our laboratory.

#### REFERENCES

- Schulz S., Handel M., Schreff M., Schmidt H., Hollt V.: Localization of five somatostatin receptors in the rat central nervous system using subtype-specific antibodies. *J. Physiol. (Paris)* 94: 259-264
- Paxinos G., Watson C.: The rat brain in stereotaxic coordinates. 2<sup>nd</sup> ed. Academic Press, 1986
- Churchill L., Kalivas P.W.: A topographical organized gamma-aminobutyric acid projection from the ventral pallidum to the nucleus accumbens in the rat. J. Comp. Neurol. 345: 579-595 (1994)
- 4. Kalivas P.W., Churchill L., Klitenick M.A.: GABA and enkephalin projection from the nucleus accumbens and VP to VTA. *Neuroscience* 57: 1047-1060 (1993)
- 5. Erhardt S., Mathe J.M., Chergui K., Engberg G., Svensson T.H.: GABA<sub>B</sub> receptor-mediated modulation of the firing pattern of ventral tegmental area dopamine neurons in vivo. Naunyn-Schmiedeberg's Archives Pharmacology 365: 173-180 (2002)