

Current Topics in Behavioral Neurosciences 12



John F. Cryan
Andreas Reif *Editors*

Behavioral Neurogenetics

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Editors

Behavioral Neurogenetics

 Springer

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ISSN 1866-3370

ISBN 978-3-642-27858-7

DOI 10.1007/978-3-642-27859-4

Springer Heidelberg New York Dordrecht London

ISSN 1866-3389 (electronic)

ISBN 978-3-642-27859-4 (eBook)

Library of Congress Control Number: 2012936979

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Printed on acid-free paper

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Preface

The field of behavioural neurogenetics has developed significantly over the past two decades. This has been largely driven by technical advances in the field of molecular genetics both in model systems and in clinical analysis. Indeed, it is hoped that the elucidation and ongoing functionalisation of the human genome may provide new insights into the aetiology, course and, ultimately, treatment of psychiatric illnesses.

This book covers a wide array of topics relevant to behavioural genetics from both a preclinical and clinical standpoint. Indeed in juxtaposing both areas of research the reader will appreciate the true translational nature of the field. Topics covered range from technical advances in genetic analysis in humans and animals to specific descriptions of advances in schizophrenia, attention disorders, depression and anxiety disorders, autism, aggression, neurodegeneration and neurodevelopmental disorders. The importance of gene–environment interactions is emphasised and the role of neuroimaging in unravelling the functional consequences of genetic variability described.

Part I of this book focuses on advances in the basic sciences of behavioural neurogenetics with a strong emphasis on animal models of psychiatric illness. It opens with a chapter by Robert Gerlai highlighting the use of model organisms and specifically zebrafish (*Danio rerio*) in modelling complex human psychiatric disease and its applicability for behavioural genetic studies. Lisa Tarantino follows by giving the state of the art on forward genetic approaches to elucidate the contribution of genetic variation to complex behavioural phenotypes. Carola and Gross illuminate the relative contribution of environment and genetics to psychopathology and how this is informing translational studies in animals and humans. Miczek and colleagues discuss the neurobiological mechanisms underlying aggression and how it can be modified in genetically modified mice. Wegener, Mathe and Neumann describe the utility of various selectively bred rodent strains to ask key questions regarding the underlying pathophysiology of depression and anxiety. Next up is a chapter on how genetic manipulations in rodent models have allowed for analysis of the impact of specific roles of glutamate receptors and transporters in cognitive and emotional behaviours shown to be

altered by stress. The final two chapters are relevant to schizophrenia. First, O’Tuathaigh and colleagues describe how phenotypic characterisation of genetic models of candidate risk genes and/or putative pathophysiological processes implicated in schizophrenia, as well as examination of epidemiologically relevant gene \times environment interactions in these models, can illuminate molecular and pathobiological mechanisms involved in schizophrenia. Powell, on the other hand, reviews the literature on genetic models of sensorimotor gating as they apply to schizophrenia and other neuropsychiatric disorders and discusses the utility of prepulse inhibition as a tool in phenotyping mutant mouse models.

Part II of this volume focuses on advances in clinical genetic analysis as applied to various neuropsychiatric disorders. Bayes and colleagues describe how second generation sequencing technologies are generating unprecedented amounts of sequence data very rapidly and at relatively limited costs. They also describe the challenges associated with such data generation in terms of data interpretation, analysis and management in addition to highlighting where such technologies are moving to in the future. Hakonarson and colleagues follow on with a description of the role of copy number variations in a number of neurodevelopmental disorders including autism, attention-deficit/hyperactivity disorder and schizophrenia. They also discuss relevant methodological considerations for such analysis. The application of neuroimaging has transformed modern neuroscience research, thus Hariri and colleagues describe how such approaches can be used to understand the interplay between genes and behaviour in shaping individual variability in brain function. Christine Freitag, Philip Asherson and Joahannes Hebebrand discuss in detail the behavioural neurogenetics of childhood disorders including autism spectrum disorders, attention deficit/hyperactivity disorder, nocturnal enuresis and obesity. A chapter follows this on the use of new technologies to identify genes relevant to Schizophrenia by Dan Rujescu. As highlighted in the preclinical section there is growing appreciation of gene–environment as an emerging area in psychiatry research. Katja Karg and Srijan Sen give a comprehensive introduction to the field from a clinical context emphasising theoretical and practical problems that are worth considering. The behavioural neurogenetics of affective and anxiety disorders is expertly reviewed by Katharina Domschke and Andreas Reif in the subsequent chapter. This is followed up by a discussion by Quinn and colleagues of the contribution of variable number tandem repeat polymorphisms to a range of psychiatric disorders. Individual variability in response to stimulant drugs has long been known and Amy Hart, Harriet De Wit and Abraham Palmer examine the evidence for the contribution of genetic polymorphisms to this response. The penultimate chapter in the book focuses on the cognitive genetics of psychiatric disorders and reviews evidence for the heritability of the main cognitive phenotypes and early progress in the field using cytogenetic, linkage and candidate gene-based research methodologies. The book closes with a chapter from Daniela Galimberti and Elio Scarpini on the behavioural genetics of neurodegenerative disorders with a special focus on susceptibility genes for Alzheimer’s Disease and Frontotemporal Lobar Degeneration.

These chapters, either individually or as a whole, provide a broad overview of the current status of a rapidly evolving and exciting field. Both the basic scientist and clinician alike will value this volume. It will also be of use to the novice to the field, to whom it will serve as an in-depth introduction to this area of research. Finally, it is worth noting that the advances made in behavioural neurogenetics to date have been very promising and we are particularly optimistic that the parallel advances in both basic and clinical neurogenetics fields will lead to a better understanding and eventual treatment strategies for complex neuropsychiatric disorders where there remains a large unmet medical need.

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Part I
Preclinical Behavioral Genetics

Using Zebrafish to Unravel the Genetics of Complex Brain Disorders

Robert Gerlai

Abstract The zebrafish has been prominently utilized in developmental biology for the past three decades and numerous genetic tools have been developed for it. Due to the accumulated genetic knowledge the zebrafish has now been considered an excellent research tool in other disciplines of biology too, including behavioral neuroscience and behavior genetics. Given the complexity of the vertebrate brain in general and the large number of human brain disorders whose mechanisms remain mainly unmapped in particular, there is a substantial need for appropriate laboratory research organisms that may be utilized to model such diseases and facilitate the analysis of their mechanisms. The zebrafish may have a bright future in this research field. It offers a compromise between system complexity (it is a vertebrate similar in many ways to our own species) and practical simplicity (it is small, easy to keep, and it is prolific). These features have made zebrafish an excellent choice, for example, for large scale mutation and drug screening. Such approaches may have a chance to tackle the potentially large number of molecular targets and mechanisms involved in complex brain disorders. However, although promising, the zebrafish is admittedly a novel research tool and only few empirical examples exist to support this claim. In this chapter, first I briefly review some of the rapidly evolving genetic methods available for zebrafish. Second, I discuss some promising examples for how zebrafish have been used to model and analyze molecular mechanisms of complex brain disorders. Last, I present some recently developed zebrafish behavioral paradigms that may have relevance for a spectrum of complex human brain disorders including those associated with abnormalities of learning and memory, fear and anxiety, and social behavior. Although at this point co-application

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of the genetics and behavioral approaches is rare with zebrafish, I argue that the rapid accumulation of knowledge in both of these disciplines will make zebrafish a prominent research tool for the genetic analysis of complex brain disorders.

Keywords Zebrafish · High throughput behavioral screening · Fetal alcohol syndrome · Alcoholism · Learning and memory · Fear and anxiety

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1 Zebrafish, a Novel Research Tool with Some Advantages

Numerous laboratory organisms are available for one to employ in the analysis of how genes influence behavior or how certain biochemical processes affect the functioning of the brain. For example, rats have been traditionally utilized to screen libraries of compounds to identify drugs that may be beneficial in a range of human brain and behavioral disorders both in academic and biopharmaceutical preclinical research. The house mouse has been employed in a range of behavior genetic applications including those that probe the effects of specific genes (reverse genetics) and their roles in behavior and brain function [e.g. Gerlai et al. (1995), Pekhletski et al. (1996)]. But other, simpler, laboratory organisms including the flat worm (Giles and Rankin 2009), the sea slug (Bailey and Kandel 2008), or the fruit fly (Sokolowski 2001) have also been successfully utilized to study the biological bases of brain function and behavior. Compared to these laboratory model organisms the zebrafish is quite novel. I use the term “model” here in a very loose sense and only mean that the reason for the use of animal species in the laboratory is to isolate and mimic some aspects of complex biological phenomena, a reductionist approach that may yield results faster than in human due to the simpler features of

the studied organism and to the precisely controlled laboratory conditions. In this sense, zebrafish may be an ideal model organism.

The zebrafish strikes an optimal compromise between system complexity and practical simplicity. It is a vertebrate species with a physiology (Alsop and Vijayan 2008), brain anatomy (Tropepe and Sive 2003), and neurochemistry (Chatterjee and Gerlai 2009) characteristic of the prototypical vertebrate, and thus translationally relevant to our own species. Most importantly, the nucleotide sequence of zebrafish genes is often found highly similar (70–80% homology) to the mammalian (and human) counterparts, and the amino acid sequence of functionally relevant domains of its proteins has been found to be even more evolutionarily conserved, i.e. similar to mammalian sequences (Reimers et al. 2004; Renier et al. 2007). It is thus quite probable that a gene identified in zebrafish as involved in particular functions/dysfunctions of its brain, will have a human homolog serving similar functions and vice versa. Briefly, the translational relevance of zebrafish research is expected to be high.

The number of animals one can screen is a crucial factor in forward genetics where one does not know which and how many genes may influence the phenotypical function in question. In case of brain disorders or behavioral function, the number of such genes may be quite large and thus one may have to analyze thousands of mutants to tackle this complexity and identify appropriate mutations and thus the genes involved. One can, of course, generate the same number of zebrafish and mice for screening purposes but there are several reasons why zebrafish may be preferred. First, a single female zebrafish can produce 200 offspring at every spawning and can spawn multiple times a week. Second, zebrafish is small (4 cm long) and is highly social and thus a large number of subjects may be housed cheaply in a small animal holding room. For example, a standard zebrafish stand-alone high density rack system (e.g. Aquatic Ecosystems Inc, FL, or Aquaneering Inc. CA) with six shelves and about 23 liter tanks per shelf, can house about 2,000 zebrafish, and a 40 m² standard vivarium room may be fitted up with up to 10 such racks. Briefly, the same room that may house a couple of hundred mice can have about 20,000 zebrafish in it. Therefore, when it comes to large scale screening, the zebrafish has a definite cost advantage. Given the relative simplicity of this vertebrate species and the fact that it is a phylogenetically older “design” compared to mammals, one may also argue that it may allow the analysis of fundamental core mechanisms of the chosen brain function. Last, adding zebrafish to the list of already well studied vertebrates (e.g. the mouse and the rat) should facilitate cross species comparison and finding common characteristics and mechanisms, which should also enhance our ability to translate the findings to human.

2 Zebrafish, the Favorite of Geneticists

Genetics is one of the strengths of zebrafish and excellent reviews have been published on numerous genetic techniques developed for this species (Amsterdam and Hopkins 2006; Chen and Ekker 2004; Lekven et al. 2000; Patton and Zon 2001).

Here I will discuss these techniques only briefly. In addition to sophisticated gene expression analyses including quantitative reverse transcriptase polymerase chain reaction (q-RT-PCR) and DNA microarrays (gene chip), both reverse genetic and forward genetic methods are available with zebrafish, although the former, the forward genetic approaches, have been more prevalent in zebrafish research. Reverse genetic analysis allows one to study the phenotypical effects of targeted manipulation of known genes. The main goal of forward genetic studies, on the other hand, is to discover novel genes by the introduction of random mutations.

3 Reverse Genetic Tools

Among the reverse genetic tools, TILLING has been employed successfully in zebrafish (Moens et al. 2008). Targeting induced local lesions in genomes (TILLING) allows the identification of mutations in specific genes of interest in chemically mutagenized zebrafish populations. The method was first described for mutation detection in *Arabidopsis* about a decade ago but since then it has successfully been adopted for zebrafish too (Moens et al. 2008). The essence of the TILLING method is the screening of chemically mutagenized populations of zebrafish using the polymerase chain reaction (PCR) for mutations in the gene of interest. Unlike in gene targeting with the use of homologous recombination in embryonic stem cells employed in the mouse (Capecchi 1989), and most recently in the rat (Tong et al. 2010), the actual mutagenesis conducted in TILLING is random, i.e. not targeted. The “trick” of TILLING is then the identification of the mutation(s) in the target gene. The identification of the mutation may be achieved using two different approaches. One is the resequencing of every single mutagenized genome (the gene of interest and its sequence is known and thus alterations in the sequence can be detected), a brute force approach that is becoming increasingly feasible with the ever improving speed of sequencing methods. The other method is based upon the use of cell, a plant-specific extracellular glycoprotein that cleaves heteroduplex DNA at single nucleotide mismatches (resulting from the introduced point mutation). Using fluorescently labeled primers to detect cell cleavage products on a LiCor acrylamide slab gel, cell can identify a heterozygous single nucleotide mismatch [for further details of the TILLING methodology and its use, see Moens et al. (2008)].

Another approach that is principally a reverse genetic method, i.e. it is also aimed at the characterization of the function of known genes, is a knock down method using morpholinos (Bill et al. 2009). Morpholinos are antisense oligonucleotides (usually 25 bases long) composed of a phosphorodiamidate backbone with a morpholine ring and the same bases as DNA (Bill et al. 2009). Morpholinos are injected into the target cells and act by steric hindrance to block ribosome entry and hence prevent protein production. The antisense technology has been long employed in mammalian species but the efficiency and specificity of the oligonucleotide approach has been controversial. In zebrafish, however, the morpholino

approach has been successfully employed. For example, due to the altered backbone of the morpholinos they are not affected by nucleases and are, therefore, highly resistant to breakdown *in vivo*. Furthermore, because of their small size and unusual chemistry, morpholinos remain undetected for the immune system. Morpholinos are traditionally introduced into the yolk of 1–8 cell-stage embryos in which the cytoplasmic bridges connecting the embryonic cells allow rapid diffusion of the hydrophilic morpholinos leading to ubiquitous delivery. The analysis of the result of the gene expression knock down is usually limited to the embryonic stage of zebrafish. However, examples already exist suggesting that modified morpholino chemistry (the VIVO-morpholino, which allows penetration of the oligonucleotide into adult zebrafish cells) may be successfully employed in adult zebrafish as well [e.g. Kim et al. (2010)]. This is a crucial novel development considering that most complex brain disorders and higher behavioral functions can be best modeled, observed, and analyzed in the adult zebrafish.

RNA-interference, or RNAi, is yet another intriguing possibility for targeted modification of gene expression in zebrafish. RNAi is a transcriptional gene silencing mechanism-induced by short (21–23 bases long) double stranded RNA whose main mechanisms are believed to be gene expression regulation via miRNA's (endogenous microRNA's) and defense against viral genetic material mediated by dsRNAs (double stranded RNAs), terms that represent structurally indistinguishable mRNA species. Irrespective of the physiological function, a few years ago it was realized that the cell's RNAi mechanism could be utilized for the induction of targeted knock down of gene expression by delivering double stranded short RNA sequences specific to the chosen target gene. Although zebrafish cells have been shown to possess the RNAi machinery, the functional consequences, especially the specificity of the RNAi-based manipulation, have been questioned [for review see Skromne and Prince (2008)] and thus whether this technology will lead to success in zebrafish remains to be seen. Another technology, transgenic methods, however, may offer a currently existing true and tried alternative.

In the mammalian neurobehavioral genetics field, transgenic methods have been perhaps the most fruitful reverse genetic approaches. Transgenic technologies have also been successfully employed with zebrafish [for a recent review see Skromne and Prince (2008)]. These techniques make use of a variety of methods (e.g. enzymatic approaches, transposons, and retroviruses) to enable the delivery and increase the efficiency of incorporation of foreign DNA into the genome of zebrafish thereby generating stable transgenic fish lines in which the foreign DNA is expressed. Irrespective of the mode of delivery, transgenic zebrafish may be divided into two main classes: transgenic overexpressors and dominant negative transgenics. In the former, overexpression of the transgene is achieved, for example, by delivering multiple copies of the transgene or using a strong promoter, and is used to test the functional consequences of the excess amount of translated gene product. In the latter, the expressed transgene product interferes with or blocks the function of the endogenous gene and thus allows one to test the effect of loss-of-function at the phenotypical level.

In addition to constitutive transgene expression, inducible expression systems are also available in zebrafish. Given that zebrafish tolerate a broad range of temperatures (in its natural geographical range temperatures may vary between 10 and 35°C), heatshock promoters have been successfully employed to induce transgene expression in a temporally controlled manner, and the use of focal heating has also allowed the induction of transgene expression in a spatially restricted manner, at least in superficial structures. Furthermore, the Gal4-UAS system (Scott et al. 2007), well developed for the fruit fly, the tetracycline trans-activator system (Huang et al. 2005), as well as the Cre/loxP system (Langenau et al. 2005) used, for example, in the temporal and spatial control of knock out of genes in the mouse, have all been utilized in the control of transgene expression in zebrafish.

Although the classical knock out technology based upon homologous recombination in embryonic stem cells as employed in the mouse (Capecchi 1989) and most recently in the rat (Tong et al. 2010) is not yet available in the zebrafish, research in this direction is also progressing. For example, germline transmitting embryonic stem cells have been isolated from zebrafish (Fan and Collodi 2006) and methods alternative to classical gene targeting are also being explored. For example, nuclear transfer of genetically modified cultured embryonic fibroblast cells has been achieved in zebrafish, which implies that targeted genetic modification for in vivo analysis of gene function may be possible via this route (Lee et al. 2002). Furthermore, zinc finger nuclease-based knockout technology is also being developed for zebrafish (Ekker 2008). Zinc finger nucleases are genetically engineered restriction enzymes that cut the DNA sequence of interest according to their specific design. Zebrafish embryos injected with the specific custom designed zinc finger nuclease-encoding mRNA are reared to adulthood and crossed with wild type fish. As much as 25% of the resulting offspring has been shown to transmit the induced mutation, usually a frameshift allele in the germline (Ekker 2008). Last, a gene-breaking transposon-based method to generate mutations is also being developed for zebrafish (Sivasubbu et al. 2006) to mention but a few reverse genetic technologies.

The range of reverse genetic approaches discussed above is somewhat misleading, however. Although they do demonstrate how fast zebrafish genetics is evolving, many of these methodologies are not mature enough for reliable use even for embryonic or developmental biology phenotypes, the focus of most of these investigations. For complex neurobehavioral traits, virtually none of these methods have been employed.

4 Forward Genetic Tools

Unlike reverse genetic approaches, forward genetics has provided decades of consistent success with zebrafish. The first two large scale comprehensive forward genetic screens the Tubingen (Haffter et al. 1996) and Boston (Driever et al. 1996)

screens were conducted about 15 years ago and set the stage for subsequent screening studies. Since then, most forward genetic studies have utilized a chemical mutagen, ethyl-nitroso-urea (ENU), which is expected to induce single nucleotide point mutations, and when dosed appropriately, one mutation per genome on average. The advantage of ENU mutagenesis is that ENU is efficient and with it one can achieve a good coverage of the entire genome, i.e. can expect to hit a large proportion of genes as long as a large enough number of animals (thousands) are mutagenized and analyzed. The Achilles heel of ENU mutagenesis, however, is the subsequent linkage analysis, which requires several generations of crosses and cumbersome mapping. Nevertheless, due to the availability of high resolution markers developed for zebrafish, the genes carrying the induced mutations can be successfully identified using linkage analysis-based positional cloning (Knapik 2000; Patton and Zon 2001). Another concern with ENU-based forward genetic analysis is that the point mutation induced by ENU is often recessive and thus may not be observable unless bred into a homozygous form, which requires three generations of breeding to create an F3 or a backcross segregating population (Patton and Zon 2001). Although not without technical complications, an alternative that can speed up the generation of recessive homozygous mutants does exist, it is gynogenesis. For gynogenesis one may use heat shock or pressure to manipulate the cell division cycle at the earliest embryonic stage leading to haploid to diploid genome conversion and allowing the generation of homozygous fish in essentially one step without the cumbersome breeding [for review of experimental examples using gynogenesis, see Patton and Zon (2001)].

ENU has been the most frequently employed mutagen for zebrafish, but other mutagenesis methods have also been successfully utilized. Perhaps the most promising among them is retrovirus mediated insertional mutagenesis (Amsterdam and Hopkins 2006). This method has the advantage over ENU because insertion of the viral genetic material into the zebrafish genome not only induces a mutation but by leaving the unique viral sequences in the genome allows fast and efficient localization and cloning of the mutated gene (Amsterdam and Hopkins 2006).

A potential concern with forward genetic approaches in zebrafish is that this species has undergone a partial genome duplication event in its evolutionary past. The concern is that the genes whose locus is on the duplicated region of the genome (approximately 20% of the genome) may be able to compensate for the induced mutation and could mask its effects if the sister gene remained active and if its function has not changed much since the gene duplication event. However, some argue that the partial “tetraploidy” may be viewed as an advantage in zebrafish for forward genetics especially when it comes to the analysis of the genetics of complex traits: the induced mutations are not expected to be lethal and may only have small quantitative effects on the phenotype, thus making functional phenotypical identification and characterization feasible. Whether these arguments turn out to be correct will have to be seen. But the few already existing examples suggest that we have some reason for optimism. Below I review such examples organized according to their disease relevance.

5 Parkinson's Disease

Parkinson's disease is the second most prevalent human neurodegenerative disease, which primarily affects the nigro-striatal dopaminergic system. Numerous genes have been identified associated with Parkinson's disease in humans three of which are believed to underlie early onset of Parkinson's Disease: PARK2 encoding Parkin, PINK1 encoding PTEN-induced putative kinase 1, and PARK7 encoding DJ-1 [for review see Bandmann and Burton (2010)]. The zebrafish orthologs of the human genes have been identified and, for example, the PARK2 gene product is known to be a 458 amino acid long protein which is 75% similar to the human protein with functionally important regions having 93% similarity. The similarities between the other two human genes with their zebrafish orthologs are also substantial. Morpholino-induced knock down of expression of these genes have led to significant dopaminergic neuron loss and/or to increased sensitivity of these neurons to toxins [although the selectivity of the effects have been questioned in the case of PARK6, reviewed by Bandmann and Burton (2010)]. Behavioral impairments resulting from the knock down have not been shown in zebrafish with one exception: Morpholino antisense knock down induced reduction of PINK1 expression led to loss of tyrosine hydroxylase staining in distinct groups of dopaminergic neurons in the zebrafish brain and when challenged with normally sub-effective concentrations of 1-methyl-4-phenyl-1,2,3,6-tetrapyridine (MPTP) the affected larval zebrafish showed reduced locomotion. Detailed swim path analysis of these larvae was not conducted, however.

6 Tauopathy and Alzheimer's Disease

Another class of neurodegenerative diseases is the tauopathies. These diseases are all defined by their underlying molecular pathology: the presence of hyperphosphorylated insoluble forms of the microtubule associated protein Tau, which is deposited in neurons in the form of observable neurofibrillary tangles. Most of these diseases are sporadic [e.g. progressive supranuclear palsy (PSP), corticobasal degeneration (CBD), and Pick's disease (PiD)], but neurofibrillary tangles have also been associated with familial early onset of Alzheimer's disease. Both transient as well as stable transgenic zebrafish lines overexpressing Tau have been generated and in both structures resembling neurofibrillary tangles have been reported [for review see Bandmann and Burton (2010)]. Behavioral analysis of the effects of these changes has not been conducted except for a rudimentary, observation-based, judgment as to whether tactile stimulation induced a normal escape response in the 48 h post-fertilization embryo expressing a mutant form of Tau (Paquet et al. 2009).

Alzheimer's disease is often mentioned under tauopathies but there are other prominent known genetic factors associated with this disease too. Alzheimer's disease is the most common form of dementia affecting over 25 million people

worldwide (Querfurth and LaFerla 2010). The histological hallmarks of the disease are neurofibrillary tangles (mentioned above) and, perhaps even more characteristically, amyloid plaques. Although the familial (heritable) form of the disease only makes up 4–5% of all cases, clearly demonstrating the importance of environmental factors, the genetic analysis of Alzheimer’s disease has led to major discoveries and clarified some of the biological mechanisms core to the disease. The genes encoding amyloid- β precursor protein (APP), and presenilins PS1 and PS2 have been found to underlie familial Alzheimer’s disease, and the ϵ 4 allele of the gene encoding apolipoprotein E (ApoE) has been found to be a risk factor in sporadic (non-familial) Alzheimer’s cases. The APP, PS1, PS2, and ApoE genes have all been identified in zebrafish and have been found to be highly homologous to their mammalian, and human counterparts, with certain functionally relevant regions approaching 100% identity with human (e.g. the transmembrane region of APP). Furthermore, some of the components of the γ -secretase complex mediating the processing and cleavage of APP, which may lead to the generation of the toxic A β (40, 42) peptide have started to be examined in zebrafish (reviewed in Xia 2010). To characterize the involvement of APP in zebrafish embryonic development, the expression of the APP gene was reduced using morpholinos, which led to significant shortening of the body length of the embryos (Joshi et al. 2009). The involvement of overexpression of APP (as in Down’s patients, for example, who also develop Alzheimer’s disease) or of the expression of mutant forms of APP (identified in familial Alzheimer’s cases), or the role of presenilins have not been investigated in zebrafish, nor has been any studies conducted for the potential behavioral consequences of transgenic manipulations of these genes. The function of ApoE and its potential role in Alzheimer’s disease related abnormalities also has not been investigated with zebrafish.

7 The Anxiety “Cluster”

Perhaps the largest cluster of human brain disorders in terms of prevalence are neuropsychiatric conditions including anxiety and stress disorders, depression, obsessive compulsive disorders, and several forms of phobias. Although both academic and pharmaceutical and biotechnology companies have been studying the potential mechanisms of these disorders and several treatment options have been developed, these diseases still represent an enormous unmet medical need. This is because the causative factors (both genetic and environmental) behind these diseases are difficult to trace and the mechanisms of the diseases are also complex. A recent review paints an optimistic picture as to the potential use of zebrafish in the analysis and modeling of neuropsychiatric conditions (Mathur and Guo 2010) and I share this optimism. For example, zebrafish possess a glucocorticoid and a mineralocorticoid receptor that have been cloned and sequenced, and has a corticoid signaling pathway highly similar to that of mammals (Amsterdam and Hopkins 2006; Denver 2009). Also, the major components

necessary for success, including the genetic tools discussed above and the novel behavioral paradigms, some of which are presented below, already exist for zebrafish. Nevertheless, one must also acknowledge that these studies with zebrafish are only starting now and thus have not produced major breakthroughs.

8 Autism Spectrum Disorders

The zebrafish has also been suggested for the analysis of the mechanisms of autism spectrum disorders (Tropepe and Sive 2003). The number of genetic factors underlying autism spectrum disorders is believed to be much less than in such neuropsychiatric conditions as anxiety or schizophrenia, and thus animal genetic models have been generated with much hope [for a review, see e.g. Gerlai and Gerlai (2003)]. Importantly, several of the genes implicated in the human disease have been shown to have homologs in zebrafish [for a most recent review, see Mathur and Guo (2010)]. It may therefore be possible to recapitulate some aspects of autism spectrum disorders by selectively targeting these genes and testing the effect of the genetic or pharmacological manipulations on developmental as well as behavioral characteristics in zebrafish. It is also notable that the zebrafish is a highly social species, and the novel behavioral paradigms that are being developed to induce and quantify social behavioral responses in zebrafish may also contribute to this research, for example, by allowing large scale mutagenesis screening-based identification of molecular mechanisms involved in vertebrate social behavior.

9 Schizophrenia

Schizophrenia is a neurodevelopmental disorder that often manifests first during adolescence. Unlike in the case of autism spectrum disorders the number of genes involved in schizophrenia may be extremely large (hundreds) and many of these genes may only have a minor “predisposing” effect, which have hindered the unraveling of the mechanisms of the disease. Nevertheless, some of the genes implicated in schizophrenia have been identified in zebrafish. For example, DISC1, a schizophrenia susceptibility gene, has been shown to play roles in cell migration and differentiation in the zebrafish neural crest (Drerup et al. 2009) as well as in the development of oligodendrocytes and neuronal lineages developing from olig2 expressing precursor cells. In addition to delineating the cellular and molecular roles of some schizophrenia associated genes, there is already one example for a genetic manipulation to affect zebrafish behavior. SHANK3 is a synaptic scaffolding protein whose gene was recently identified to carry mutations in some patients suffering from schizophrenia and was also found in autistic patients. Morpholino-induced knock down of the expression of the corresponding gene resulted in robust morphological abnormalities as well as impaired swimming in

response to tactile stimulation in the zebrafish larva (Gauthier et al. 2010). It may be noted, however, that the specificity of the morpholino-induced changes may be questionable given that the attempt to rescue the phenotype by injection of wild type or mutant SHANK3 mRNA sequences led only to partial success at best. Last, psychopharmacological experiments have already started to be utilized with zebrafish in the analysis and modeling of schizophrenia. One behavioral endophenotype often argued to be an important aspect of schizophrenia is reduced prepulse inhibition, or PPI. Prepulse inhibition is believed to be a measure of sensory gating. It is induced by employing a weak stimulus (the prepulse), which is expected to inhibit the reaction to a subsequent stronger startling stimulus (the pulse). Larval zebrafish exhibit PPI of the acoustic startle response similarly to what has been demonstrated in rodents [reviewed in Mathur and Guo (2010)]. PPI can be disrupted by dopamine agonists in the zebrafish larvae, an alteration that is reversed by antipsychotic drugs similarly to the mammalian situation (Braff et al. 2001). In addition to these promising psychopharmacology results, a forward genetic screen has already isolated a mutant “Ophelia”, which exhibited reduced PPI (Burgess and Granato 2007). In summary, the first examples showing how zebrafish may be utilized in the investigation of the genetic mechanisms of complex brain disorders already exist. However, in most of these studies the behavioral consequences of the employed experimental manipulations were not analyzed or were studied in a rudimentary manner. This is, in general, the current weakness of the zebrafish as an experimental tool: its genetics and neurobiology have been traditionally powerful but its behavioral characteristics are largely unmapped because only a few behavioral test paradigms are available (Sison et al. 2006).

10 Expanding Our Horizon: The Need for Sophisticated Behavioral Test Paradigms in Zebrafish Research

Sophisticated behavioral paradigms may be crucial for two main reasons: first, the construct and face validity of the genetic (reverse genetics) or pharmacological models may only be fully established using behavioral tests; and two, behavioral paradigms may represent unbiased screening tools for forward genetic applications (Gerlai 2002). Arguably, behavioral analysis can efficiently probe a broad spectrum of brain functions in a large number of subjects. It is not limited to particular brain regions or neurobiological mechanisms, and it is simple and cheap to conduct (Gerlai and Clayton 1999). Arguably, high throughput behavioral screens may be able to systematically reveal mutation or drug-induced functional changes in the brain. Fortunately, for the past few years a clear upsurge of zebrafish behavioral studies is evident, indicating that behavioral neuroscience and behavior genetics has started to acknowledge the utility of this species. Below I discuss some of these recent studies focusing on the question of how behavioral analysis may be utilized for the discovery of novel genes and compounds affecting brain

dysfunction associated with complex human brain disorders. Three main behavioral focus areas will be represented below: learning and memory, which is relevant for a number of neurodegenerative diseases including Alzheimer's disease; fear and anxiety, which are important behavioral responses and behavioral states relevant for a spectrum of neuropsychiatric conditions; and social behavior, whose abnormalities may be important in the analysis of autism spectrum disorders and schizophrenia, to mention but the two most important diseases in this domain.

11 Learning and Memory

Learning and memory has been extensively studied by scholars of several scientific fields. Numerous mechanistic questions related to how learning occurs, and what memory is, have been successfully tackled. For example, by now a large number of genes and biochemical mechanisms underlying learning and memory have been identified (Sweatt 2010). Can zebrafish add anything to this wealth of knowledge? Although hundreds of genes involved in learning and memory have been identified, the mechanisms of these complex processes are far from being understood. It is likely that the number of undiscovered genes that play roles in learning and memory is large. For example, according to conservative estimates, most vertebrate genomes contain about 30,000 genes. Recent microarray studies suggest that at least 50% of all the genes of the genome are expressed in the vertebrate brain (e.g. in zebrafish), i.e. about 15,000 genes (Pan et al. 2010). Given that plasticity is perhaps the most complex aspect of brain function, it is likely that a large proportion of these genes, i.e. potentially thousands of them, are involved in some mechanisms subserving plasticity, i.e. learning and memory.

A number of laboratories have realized that the cheap and easy to breed zebrafish may offer a solution for high throughput screening which would be costly with traditional laboratory rodents. Investigators have started to characterize the cognitive capabilities of zebrafish and have already developed several test methods that can measure learning and memory efficiently and fast [for examples see Sison et al. (2006), Sison and Gerlai (2010)]. The key in these paradigms concerns automatability. Even if one needs to employ several repeated training trials, as is the case in most learning paradigms, if these trials are administered in an automated manner, and if the behavioral responses that reflect learning and memory performance are easy to measure and do not require the constant presence and attention of an experimenter, the paradigm may be run in multiple test apparatus in parallel and thus become high throughput.

A successful high throughput learning task design utilizes moving (animated) images of conspecifics, which are shown on a computer screen placed by each side of the experimental tank (Pather and Gerlai 2009). Previously, access to view a shoal (group) of zebrafish has been shown to represent a reward for experimental zebrafish and that this visual stimulus (the sight of a group of zebrafish) can support good learning performance (Al-Imari and Gerlai 2008). Subsequently, it has been

demonstrated that computer animated images of zebrafish can serve as a positive reinforcement (Gerlai et al. 2009a). The simple manner with which the reward could be administered allowed the development of an automated learning task (Pather and Gerlai 2009). The task is also simple. For a short period of time [20 s in Pather and Gerlai (2009)] the image of the moving shoal is shown and then it is turned off for 90 s. After this 90 s no-image period the image of the moving shoal is shown on the opposite side of the test tank for again 20 s, and the sequence repeats itself. As a result of the alternating image presentation sides, zebrafish have to make a choice during the no-image period as to whether they stay close to the side where the image was just shown, or move to the opposite side, where the image will appear. The natural tendency of zebrafish is to stay close to its conspecifics and thus initially zebrafish spend the highest amount of time near the side where the image was shown last. However, as the training proceeds, zebrafish spend increasingly longer amount of time near the side that *will* show the image. There are several important points to make about these results. First, the motivation to stay close to conspecifics does not habituate over time and thus the experimental subjects remain motivated to perform in this task, a major advantage compared to the use of food, which satiates zebrafish quickly. Second, the stimulus is a visual cue administered precisely using consumer grade (i.e. cheap) video-equipment. Third, the behavioral response (distance from stimulus screen) is easy to quantify using video-tracking systems and/or motion detectors (e.g. photocell detector arrays). Fourth, multiple trials [in Pather and Gerlai (2009), thirty trials] can be administered without the intervention by the experimenter. The fish stays in the test tank and is given the stimuli and their responses are measured repeatedly across the continuous sequence of trials. As a result of all these above features, the paradigm is fully automated and thus multiple set-ups can be run in parallel. Although the 30 trials required 3,300 s (55 min) per experimental fish (Giles and Rankin 2009), one can easily set up several such test apparatus. Briefly, the throughput of the task can be dramatically increased by scaling up. In our facility a 20 m² test room could be easily fitted with 50 such test apparatus, i.e. in an eight work hour day, one can test 400 zebrafish in a single room using this learning task, a sufficiently high throughput even for large scale mutagenesis screens (Haffter and Nüsslein-Volhard 1996).

The above paradigm is new and thus there are numerous unexplored questions one may need to address. For example, we do not know whether zebrafish can forecast the future, i.e. whether their performance improvement was due to better timing of their responses (knowing when and where the shoaling image will appear in the near future). It is possible that the performance improvement of the fish was simply due to acquisition of CS-US association: disappearance of the stimulus on one side serving as the conditioned stimulus predicted the reappearance of the unconditioned stimulus, the shoal image, on the opposite side. There are many questions that concern possible optimization of the task as well: is the 20/90 s stimulus/no-stimulus interval ratio the best? Could longer tanks (the original experiment was conducted in a 50 cm long tank, a distance that can be easily traversed by the fast zebrafish) be more appropriate allowing more sensitive detection of performance improvements/deficits? Also, how would other

stimulus/no-stimulus schedules (random versus fixed ratio, increasing stringency versus constant) affect the behavior of the fish? Last, mechanistic questions as to what neuroanatomical structures subserve the task, what drugs may influence performance in it, and how sensitive it may be to detect mutation-induced changes all will have to be explored. Clearly, there are many questions when one introduces a new paradigm. Nevertheless, the above example demonstrates how one can utilize species-specific perceptual, motor and motivational characteristics to design relatively simple and high throughput behavioral test methods that may allow addressing many of the above questions in the future.

The above learning task have an important temporal component, the delay between the stimulus presented on one versus the other side of the tank and as such may allow the analysis of a complex forms of learning in zebrafish known to be associated with the hippocampus in mammals, trace conditioning (McEchron and Disterhoft 1999) and/or acquisition of relational memory (Cohen et al. 1997). Although fish do not have a structure whose circuitry resembles that of the mammalian hippocampus, they do possess a brain region, the lateral pallium that is believed to be a structure homologous to the mammalian hippocampus (Vargas et al. 2009). Furthermore, fish without the classical mammalian hippocampal circuitry have also been found to be able to learn spatial learning paradigms, a class of tasks that is associated with hippocampal function in mammals (Salas et al. 1996). Spatial learning has also been demonstrated in zebrafish (Sison and Gerlai 2010), however, the spatial task employed (learning to find a particular location in a plus maze) was extremely time consuming. It required many repeated trials which could be administered only manually. Could one design a high throughput spatial task for zebrafish?

This question was answered in a recent study (Gómez-Laplaza and Gerlai 2010) that demonstrated good learning performance of zebrafish in a latent-learning paradigm. The paradigm consisted of two phases, a long training phase and a brief probe trial. During the training phase zebrafish were allowed to explore a complex maze which consisted of a starting chamber that was connected to a goal chamber by a left and right tunnel. Zebrafish were allowed to explore the maze in groups of ten (a shoal) for 16 consecutive days, each day once for 50 min. Allowing zebrafish to swim around the maze in ten-member shoals facilitated active exploration and reduced passive fear responses. During the exploration of the maze certain shoals were allowed to go through only one of the tunnels, i.e. there was a set of fish for which only the left tunnel was open and the right tunnel was blocked and another for which the left tunnel was blocked and only the right tunnel was open, and yet another group for which both tunnels were open, a spatial exploration task. The second part of the paradigm was a short (10 min long) probe trial, during which both tunnels of the maze were open, a shoal of stimulus fish was placed inside a transparent container and into the goal chamber of the maze, and the experimental fish were tested singly in the maze. Given the social nature of zebrafish, the experimental subject was highly motivated to get as close to the stimulus fish in the goal chamber as possible. Which route, the right versus the left tunnel, the experimental fish took was video-recorded and analyzed. The results showed that those fish that experienced the right tunnel open during the maze

exploration phase of the paradigm also used the right tunnel during the probe trial, those fish that experienced the left tunnel open used the left tunnel during the probe trial and those fish that experienced both the left and right tunnel open chose randomly. Why is this paradigm high throughput? Although the exploration phase of the paradigm took 16 days, because the fish were not monitored and their behavior was not analyzed, one could set up a large number of mazes and train a large number of fish every day. The probe trial was conducted for every fish separately, but it lasted only for 10 min per fish and the swim path of the fish could be quantified using automated video-tracking techniques (Blaser and Gerlai 2006). Thus this phase of the paradigm could also be made high throughput. Furthermore, given the spatial nature of the task, this paradigm is likely to be capable of tapping into complex forms of learning and memory.

There are again many questions about this novel paradigm. What motivates the fish to learn the maze? In other words, why fish remember the tunnel they explored before? This form of learning is termed latent learning because apparently there is no external experimenter controlled motivator (positive or negative reinforcement) presented. However, it has been argued (Gómez-Laplaza and Gerlai 2010), based on prior supporting evidence, that exploration of novelty itself is rewarding in this task and the novel aspect of the maze is what kept the fish motivated to explore and learn. The results of this study also suggested that learning in this paradigm was likely based upon acquiring and remembering external visual cues, i.e. spatial learning, a hypothesis that will need to be proven in the future. But again, despite the novel aspect of the task and the fact that there may be numerous questions one could explore with it, the paradigm does appear to be appropriate for high throughput screening of learning and mnemonic characteristics of zebrafish and mutation-induced changes in these characteristics.

There are numerous human disorders associated with memory loss and/or impairment of cognitive function, perhaps the most devastating and prevalent is Alzheimer's disease discussed above. But milder forms of memory problems, mild cognitive impairment (MCI) and age-related memory decline also affect a large percentage of the aging human population in the twenty-first century. Given the large unmet medical need associated with these diseases and the potential complexity of the genetic mechanisms underlying them (Haffter et al. 1996), the importance of appropriate screening tools with which mutation-induced changes in learning and memory processes may be identified is unquestionable.

12 Fear and Anxiety

Fear (induced by particular negative stimuli) and anxiety (a more diffuse and prolonged behavioral state not associated with particular induction stimuli) affects a large percentage of the human population (Weisberg 2009) and despite concerted efforts by pharmaceutical research companies and academic laboratories and despite the existence of several drugs, proper treatment is still not available for a

proportion of patients. It has been argued by several researchers that zebrafish may be successfully utilized to study and model some of the mechanisms of vertebrate fear and/or anxiety (Gerlai 2010). For example, fear responses have been reliably induced in zebrafish using a chemical cue, the alarm substance (Speedie and Gerlai 2008). Alarm substances have been shown to elicit fear and panic reactions in a broad range of fish species (Speedie and Gerlai 2008). These substances, which are produced by epidermal club cells in the skin of many fish species, are released when the skin is cut or damaged. In nature, the alarm substance is believed to signal danger, perhaps the presence of an actively hunting predator (piscivore fish species or a bird of prey). In the laboratory, the alarm substance has been successfully utilized to experimentally induce fear responses. Zebrafish have also been shown to reliably respond to this chemical cue with alarm reactions that include erratic movements (zig-zagging), jumping (or leaping) and freezing (complete immobility) (Speedie and Gerlai 2008). From the perspective of mutagenesis screening, however reliable these responses may seem, the alarm substance approach suffers from a major disadvantage. This substance has to be extracted from the skin of conspecifics which entails cutting or homogenizing the skin of freshly sacrificed fish and washing, diluting the extract. Because of the variability inherent in this extraction process, the exact dose and potency of the substance can not be ascertained across multiple experiments (multiple extractions). Recently, however, zebrafish has been shown to respond to a synthetic alarm substance that shares a key chemical structural element with that of natural alarm substances from several fish species (Parra et al. 2009). Hypoxantin-3-N-Oxide, H3NO, has been found to induce alarm reactions in zebrafish similar to those elicited by the natural alarm substance (Parra et al. 2009). Thus, it is now possible to precisely control the dose of the alarm substance and reduce unwanted experimental error variation, a crucial requirement for high throughput mutagenesis screens.

Although the synthetic alarm substance, H3NO, now allows precise and replicable fear induction, this method suffers from a drawback. Olfactory cues are notoriously difficult to work with. The onset (delivery) of the cue and now also its dose can be precisely controlled, however, its offset (washout) is difficult to achieve. In most behavioral paradigms, experimenters want to introduce the subject to its test chamber (tank) and let the subject habituate, establish a stable baseline behavior before administering the cue (the alarm substance in this case). This allows pre- and post-cue delivery periods to be compared and thus is a more powerful experimental design. Ideally, after the delivery of the cue and recording the effects of this delivery, one would like to turn it off and again compare periods during and after cue delivery. But this is quite cumbersome with olfactory cues. Furthermore, even if the experimental paradigm does not require turning off the cue during the behavioral session, the cue may be difficult to remove from the tank for the next subject. Residual amounts of the alarm substance may remain in the test tank even after emptying and refilling the test tank. As even trace amounts of the alarm substance may influence the behavior of the fish, this olfactory cue is difficult to work with especially when one wants to run a large number of fish as required for mutagenesis screening.

To circumvent the above issues, cues of other modalities have been tried for the induction of fear responses. Zebrafish, being a diurnal vertebrate, has excellent vision and respond well to visual cues. Zebrafish have been demonstrated to respond differentially to the sight of live fish according to whether the fish species shown were predatory or harmless and whether they were sympatric (cohabiting the geographical region) or allopatric with zebrafish (Bass and Gerlai 2008). The latter study also demonstrated that zebrafish uniquely responded to a sympatric predator, the Indian leaf fish (*Nandus nandus*) and that the sight (solely visual stimuli) of the predator was sufficient to induce a maximal fear response (erratic movements and jumps). Utilizing this finding, subsequently zebrafish have been found to exhibit significant antipredatory responses not only to the sight of live Indian leaf fish but also to animated (moving) computer images of this species (Gerlai et al. 2009b). In this latter paradigm, both the presentation of stimuli and the recording and analysis of the fear responses were conducted in an automated computerized manner, i.e. the test paradigm was scalable and thus potentially appropriate for high throughput screening. Although numerous parameters of this automated fear paradigm will have to be optimized (e.g. size of the test tank, size and speed of movement of the predator image, presence or absence of hiding places, level of illumination, etc.), the results demonstrate the feasibility of high throughput screening for agents (mutations or pharmaceutical compounds) that may have fear altering properties.

13 Social Behavior

The last behavioral focus area I discuss in this paper is social behavior. Social behavior is a common term for a range of complex behavioral phenomena from agonistic (aggressive) encounters to reproductive (courtship) behaviors. Here I focus on a behavior within this broad range termed affiliative behavior, social cohesion or group forming. Affiliative or group forming behaviors are characteristic of our own species. Humans tend to form groups, which in modern history led to the development of the complex society where a set of rules govern. We are particularly sensitive to social signals and tend to spontaneously follow a large number of complex social rules. Briefly, being social is an inherent human trait. There are numerous human disorders that are associated with abnormalities in social behavior, one prominent example is the autism spectrum disorders (ASD). Treatment for ASD and other forms of abnormal social behaviors is lacking for two main reasons. One, the mechanisms underlying these diseases are unclear. Two, the mechanisms underlying social behaviors in general are not understood. Laboratory model organisms have been proposed to speed up the discovery of such mechanisms [for review see Gerlai and Gerlai (2003)]. The question as to whether autism may be modeled using animals is not trivial, however. Some may be skeptical and say that in order to model autism in animals one would need to understand its mechanism first in humans, so what is the use of animal research? Nevertheless, it

is becoming clearer that even such complex phenomena as social behavior has not only face but also construct validity in animal models, i.e. not only looks similar in animals but may also be mechanistically similar to that of our own species. Briefly, it may make sense to study social behavior in vertebrates other than humans, discover the underlying mechanisms in the laboratory organism, and look for translational aspects of the work, i.e. human homologs. Zebrafish is perhaps the most social vertebrate model organism currently under study in the laboratory. Zebrafish are found swimming in groups in nature, a behavior that they maintain under the artificial confines of the laboratory (Engeszer et al. 2007). It is this swimming together response, or shoaling, that may be an excellent behavioral phenomenon to study from a translational perspective. Answering such questions as to what neurobiological mechanisms (circuits, synaptic processes, biochemical interactions) underlie group forming or social cohesion in zebrafish may help us understand human social behavior and ultimately perhaps the mechanisms of the abnormalities of human social behavior. The first step in this research could be the characterization of social behavior in zebrafish followed by the development of behavioral test paradigms that could detect mutation or drug-induced changes in brain function at the level of social behavior. Below I present some examples of recent discoveries with zebrafish that may be useful to make the first steps in this direction.

Zebrafish forms groups and swims in group formation but due to unavailability of appropriate behavioral quantification methods, the complexities of this behavior were not properly described in the past. By now, however, methods have been designed that allow the quantification of numerous parameters of shoaling behavior, including moment to moment changes of the distances among every possible pairs of fish within the shoal (Miller and Gerlai 2007, 2008). A periodic (cyclical) fluctuation of shoal cohesion has been discovered in zebrafish (Miller and Gerlai 2008). Analysis of shoaling is now further developed to allow high throughput automated tracking of multiple fish and thus the precise description of how the entire shoal behaves. This method may enable one to screen for mutations but would require the use of a group of fish that carry the same mutation, which would necessitate breeding an extra generation (i.e. testing not the individual mutant fish but its offspring). Perhaps a faster behavioral screening method may be to test single fish and its response to social stimuli. The disadvantage of the latter approach is that complex group dynamics may not be detected but the advantage is that the test would save the extra generation of breeding.

Testing responses of individual fish to social stimuli has been achieved with an experimental set up similar to the predator visual stimulus paradigm (Gerlai et al. 2009a). Here the computer monitor placed on the side of the experimental tank shows animated (moving) images of zebrafish (five fish in this case). Each fish on the monitor moves independently and in different randomized directions and with a speed that changes from second to second while remaining within the range of the speed of normally swimming zebrafish. This artificial “shoal” elicits a robust behavioral response. The single experimental fish placed in the test tank usually does not exhibit a preference for any sides of the tank, explores the entire tank, and thus its position when averaged over a period of time (e.g. for one minute

intervals) ends up to be in the middle of the tank, which is 25 cm away from the computer screen in case of a 50 cm long tank. However, as soon as the computer screen shows the artificial shoal, the experimental zebrafish moves closer to the computer screen and on average stays about 10 cm away from it, a distance that is similar to what has been obtained with freely moving zebrafish in a real shoal (Miller and Gerlai 2008). Given that the visual stimulus that elicits the response is computer controlled and the subject's distance from the stimulus screen is recorded using computerized video-tracking, the entire test paradigm is automated, i.e. does not require the presence of the experimenter during the behavioral recording session. The paradigm therefore is high throughput and has utility in screening for mutation or drug-induced changes in social behavior. Indeed, this paradigm has been already used to detect strain (genetic) differences between populations of zebrafish, and alcohol and dopamine receptor antagonist-induced changes in social behavior [Gerlai et al. (2009a) and unpublished results].

14 Concluding Remarks

The excellent genetic tools developed for zebrafish have already provided promising results in the analysis of complex brain disorders. Importantly, several genes implicated in a number of human brain disorders have been shown to have zebrafish homologs. The function of these genes in embryonic development, and in a few cases in behavioral responses has started to be investigated. The genetic tools are constantly refined. Increasing number of genetic markers is becoming available for linkage analysis-based gene localization in random mutagenesis. Reverse genetic tools are also rapidly developing. In addition, but also very importantly, numerous novel behavioral paradigms are being developed and our understanding of the behavioral responses and capabilities of zebrafish has been exponentially increasing over the past few years suggesting that efficient and high throughput phenotypical screening applications (Gerlai 2002) are becoming reality for zebrafish. Given the fact that behavior is the output of the brain and that vertebrates share numerous biological features, including nucleotide sequence homologies, it is likely that zebrafish neurobehavioral genetics will facilitate the identification of numerous genes and compounds leading to the understanding and better treatment of human brain disorders.

Acknowledgments Supported by NIH/NIAAA (USA) and NSERC (Canada).

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Forward Genetic Approaches to Understanding Complex Behaviors

Lisa M. Tarantino and Amy F. Eisener-Dorman

Abstract Assigning function to genes has long been a focus of biomedical research. Even with complete knowledge of the genomic sequences of humans, mice and other experimental organisms, there is still much to be learned about gene function and control. Ablation or overexpression of single genes using knockout or transgenic technologies has provided functional annotation for many genes, but these technologies do not capture the extensive genetic variation present in existing experimental mouse populations. Researchers have only recently begun to truly appreciate naturally occurring genetic variation resulting from single nucleotide substitutions, insertions, deletions, copy number variation, epigenetic changes (DNA methylation, histone modifications, etc.) and gene expression differences and how this variation contributes to complex phenotypes. In this chapter, we will discuss the benefits and limitations of different forward genetic approaches that capture the genetic variation present in inbred mouse strains and present the utility of these approaches for mapping QTL that influence complex behavioral phenotypes.

Keywords Mouse • Genetics • Behavior • Mapping • QTL • Mutagenesis

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Animal models, and rodents in particular, have been used extensively to study behaviors that model human psychiatric diseases. While rats have been particularly well-suited to this research, the mouse has recently emerged as the primary model for studying genetic and genomic aspects of human disease (Cryan and Holmes 2005). This is due, in large part, to the availability of a vast array of genetic and genomic resources for such endeavors in the mouse.

The ability to introduce genes into the mouse (transgenics) and retain tissue-specific expression patterns as well as the ability to disrupt gene function (knockouts) represented a significant advance in a field that has now become known as “functional genomics.” Reverse genetic approaches such as these have been useful for identification and analysis of genes believed to increase risk for schizophrenia (Desbonnet et al. 2009), anxiety (Holmes et al. 2003; Lesch et al. 2003), depression (Savitz et al. 2009; Cryan and Slattery 2010) and autism (Sudhof 2008) but are not without limitations. The types of genetic lesions introduced are often severe, completely knocking out gene function over the course of the lifespan, and may not accurately reflect the genetic basis of many complex human diseases. The ability to make conditional knockouts that limit loss-of-function to specific tissues or developmental timepoints has overcome some of these limitations. However, the reverse genetic approach is generally hypothesis-driven, depending on some prior knowledge regarding a gene’s role in a disease or pathway. Understandably, the genes interrogated are often those in pathways that are already targeted by current drug treatments, making the approach inherently biased. More comprehensive phenotyping might result in identification of gene function not yet attributed to a specific gene. Recently, large-scale reverse genetic projects have been launched in the United States (knockout mouse project (KOMP), Texas A&M Institute for Genomic Medicine (TIGM)), Europe (European Conditional Mouse Mutagenesis (EUCOMM)) and Canada (North American Conditional Mouse Mutagenesis (NorCOMM)) to systematically interrogate the role of every gene by producing targeted knockouts and analyzing the resulting mutants in a variety of phenotypic assays (Collins et al. 2007; Gailus-Durner et al. 2009). These efforts to catalog gene function in a non-hypothesis-driven, unbiased manner will surely provide new insights into gene

function. However, studying induced mutants exclusively fails to account for naturally occurring variation, genetic modifiers and gene-gene interactions that may be of primary importance in complex human diseases. In addition, recent research in human populations indicates that loss-of-function variants can occur far more frequently than expected with no discernable effect on health (MacArthur and Tyler-Smith 2010), suggesting that null mutations may not be the best approach for modeling many human diseases.

1 The Importance of Phenotype

In the earliest days of mouse genetics, the phenotype was the primary starting point for genetic analysis. Observations of spontaneous, chemical- or radiation-induced mutations progressed to identification of linkage groups and, eventually, to chromosomal assignment (for excellent reviews, see (Lyon 2002; Paigen 2003)). As molecular tools advanced, starting with the identification of genetic markers and progressing to complete sequencing of the mouse genome, the means for exact gene localization were realized. Knowledge regarding the organization of the genome increased along with an appreciation for the complexities therein, resulting in a renewed interest in the study of complex traits from a systems biology perspective. Recent years have witnessed a resurgence of forward genetic approaches that consider naturally occurring genetic and phenotypic variation and place more emphasis on the genetic complexities that are likely to explain a large portion of human phenotypic variation.

As opposed to reverse genetics, forward genetic studies start with the measurement or observation of a phenotype followed by mapping of the causative loci or genes. A major advantage of this approach is that the role of the gene or genes in a specific biological process is/are proven a priori. In addition, forward genetic approaches are, by definition, unbiased in terms of gene identification since the phenotype is the primary level of measurement. The term “forward genetics” applies to any phenotype-driven mapping approach, including the use of standard inbred strain crosses and haplotype association analysis—both of which result in the identification of quantitative trait loci (QTL).

In this chapter, we will describe forward genetic approaches for gene identification and functional analysis, detailing the advantages, disadvantages, successes and failures of several commonly used forward genetic models.

2 Forward Genetics and Inbred Strains: The QTL Approach

Early mouse geneticists, including pioneers of the field William Castle and Clarence Little, utilized visible characteristics such as coat color and tumor susceptibility to study Mendelian inheritance. These studies eventually led to the

development of inbred mouse strains in the early 1900s (reviewed in (Crow 2002)). These strains are the starting point for most forward genetic approaches. Inbred strains are produced by brother-sister mating for 20 or more consecutive generations to fix all loci in a homozygous state. There are now hundreds of inbred strains available, and while mice within a single inbred strain are genetically identical, substantial genetic and phenotypic variation exists across strains. This phenotypic and genetic variation has been used for decades to further our understanding of the genetic basis of human disease. Inbred lines and the crosses derived from them have been instrumental in the search for genes and genomic loci that contribute to the phenotypic variability for complex behavioral traits. These loci, termed quantitative trait loci, or QTL, are regions of the genome that are associated with the phenotypic expression of complex traits, and the genomic locations of these regions can be identified using a process known as QTL mapping.

3 QTL Mapping: The Basics

In its simplest form, QTL mapping can be described as a statistical association analysis between phenotype and genotype at specific locations across the genome. In order to achieve this, two things are necessary—phenotypic and genetic variation. Phenotypic variation is easily observed among inbred strains (Hamilton and Frankel 2001), and experimental crosses between inbred strains provide both phenotypic and genetic variation. Genetic variation across the genome is measured using a set of markers that can distinguish between the two or more strains used in an experimental cross. The source of these markers has changed over the years with advances in technology and knowledge of genomic structure. Genetic markers initially took the form of linked visible characteristics such as coat color and progressed to restriction fragment length polymorphisms (RFLPs). With the advent of the polymerase chain reaction (PCR), scientists had access to a trove of genetic markers called simple sequence length polymorphisms (SSLPs) that were more numerous and provided dense genetic maps. Single nucleotide polymorphisms (SNPs) are single nucleotide changes that are also detectable by PCR, and millions of them exist between inbred strains, providing even greater resolution for genetic mapping. SNPs are now the primary source of genetic variation measured in mapping studies. Genetic markers need not be causative alleles and simply serve as a means of ascertaining allelic state at a genomic location.

Once genotypes and phenotypes are collected, association of genotype with phenotype can be performed. This aim can be accomplished by single-marker analysis using basic statistical techniques (ANOVA, marker regression) and comparing marker status at each genomic location with phenotype. In the late 1980s a technique for analyzing the interval between two genotyped markers was developed by Lander and Botstein (1989), called interval mapping (IM). This technique involves calculating the likelihood of a particular genotype based on the

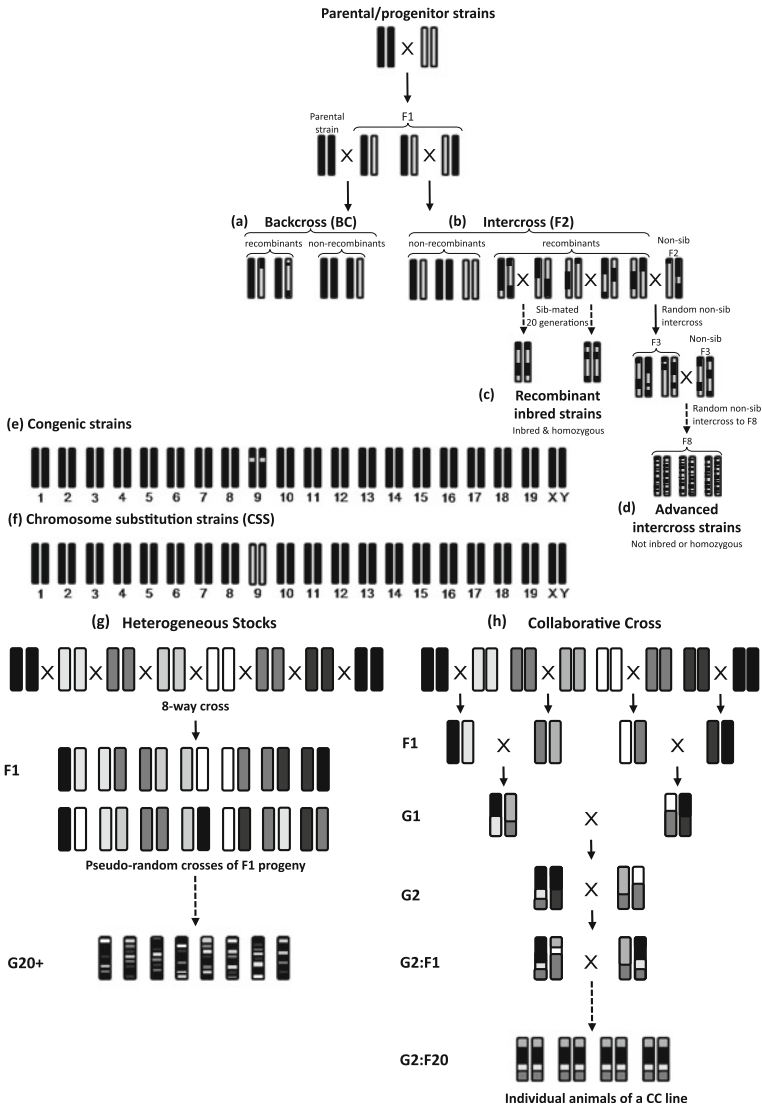
recombination frequency and genetic distance between two markers. A LOD score is calculated to indicate the strength of the association between the phenotype and genotype. This technique has been refined over the years—Jansen (1993) and Zeng (1993) developed an algorithm for composite interval mapping (CIM) that allows for interval mapping in combination with multiple-regression analysis to account for background QTL. The specifics of QTL mapping algorithms are beyond the scope of this chapter, but several books are available that provide a thorough discussion (Broman and Sen 2009; Wu et al. 2010). Linkage and mapping programs are freely available, including mapmaker QTL (Lander et al. 1987), QTL Cartographer (Basten et al. 1994, 2002), map manager QTX (Manly et al. 2001) and R/qtl (Broman et al. 2003) or its graphical user interface, J/qtl (Smith et al. 2009). Most mapping programs were designed to analyze the basic mapping populations described below, but special attention must be given to populations frequently used for fine mapping QTL.

4 Initial QTL Identification: Standard Mapping Populations

4.1 Recombinant Inbred Lines

Donald Bailey and Benjamin Taylor developed RI lines at the Jackson Laboratory with the goal of creating a recombinant population for linkage mapping. RI lines are created by intercrossing the F1 hybrids of two inbred progenitor strains to generate F2 progeny, which are then sib-mated for at least 20 generations, resulting in homozygosity at each locus and a mixture of the parental alleles providing genetic variation necessary for QTL mapping. Each RI line consists of animals that are genetically identical but distinct from other RI lines in the set (Fig. 1c) (Bailey 1971).

The first murine RI panel, the CXB line, was constructed by Bailey from a BALB/cBy \times C57BL/6By cross. Bailey used the seven lines resulting from the initial crosses to identify loci associated with histocompatibility factors and coat color (Taylor 1978). Twelve CXB lines now exist and have been used to map QTL that influence exploratory activity (Blizard and Bailey 1979; Crabbe et al. 1982; Neiderhiser et al. 1992), circadian rhythms of locomotion (Schwartz and Zimmerman 1990), avoidance (Neiderhiser et al. 1992) and sleep behaviors (Tafti et al. 1997). Taylor developed more RI panels, such as the BXH (C57BL/6J \times C3H/HeJ) and AKXL (AKR/J \times C57L/J) RI sets, which were used in the study of murine leukemia virus (Taylor et al. 1971), drug-induced seizures (Taylor 1976) and lipopolysaccharide response (Watson et al. 1977). There are now RI panels for crosses between A/J and C57BL/6J (AXB and BXA), B6(Cg)-Tyrc-2 J/J and C3H/HeJ (BXH) and C57BL/6J and DBA/2J (BXD), as well as RI lines derived from mice selectively bred for righting response to ethanol—the Long Sleep and Short Sleep mice, ILS/IbgTejJ and ISS/IbgTejJ (ILSXISS) (<http://jaxmice.jax.org>).



The BXD RI panel is by far the most frequently used, beginning with an initial set of 25 lines (Taylor et al. 1977) but now consisting of 79 strains (Peirce et al. 2004) (<http://www.genenetwork.org>). QTL for alcohol (Cunningham 1995; Phillips et al. 1994, 1995; Rodriguez et al. 1994, 1995) and drug-related (Alexander et al. 1996; Grisel et al. 1997; Jones et al. 1999; Mogil et al. 1997; Phillips et al. 1998) behaviors were among the first to be dissected using BXD lines. More recently, concerted efforts have been made to characterize the full BXD panel for neurobehavioral phenotypes, particularly those relating to pain,

◀**Fig. 1 a–h** Breeding schemes of various genetic mapping populations. Backcross mice (**a**) are generated by crossing two inbred strains to recover F1 mice and then backcrossing the F1 mice to one of the parental strains, resulting in one copy of a chromosome that has undergone meiotic recombination and another copy from the inbred strain to which the F1 was backcrossed. Intercross mice (**b**) result from crossing F1 mice, resulting in two recombined chromosomes. Recombinant inbred strains (**c**) are produced by continuous brother-sister mating among F2s, resulting in homozygosity at each locus but with a reassortment of alleles from each parental strain. Advanced intercross lines (**d**) are also produced by crossing F2s, but inbreeding is avoided by restricting breeding partners to exclude common parents or grandparents and a large breeding population is maintained to avoid allelic drift. Congenic strains (**e**) have a small portion of one chromosome from a donor strain introgressed onto a recipient background strain, while chromosome substitution strains (**f**) have an entire donor chromosome introgressed onto a recipient background strain (examples of a congenic interval on Chr 9 (**e**) and a Chr 9 CSS (**f**) are shown). Heterogeneous stocks (**g**) are similar to advanced intercross lines but are derived from eight different inbred strains to increase genetic diversity. The collaborative cross (**h**) also has eight parental strains, but the breeding scheme is similar to recombinant inbred lines to maximize recombination while breeding each CC line to homozygosity

drug addiction, anxiety, stress and locomotor activity (Philip et al. 2010). One innovative approach uses brain-specific gene expression data from a microarray analysis of the BXD panel to map neurobehavioral QTL (Bao et al. 2007).

RI lines offer several advantages for QTL mapping. RI lines are genetic reference populations—genetically stable over time and infinitely reproducible. Therefore, each line must be genotyped only once, and that data becomes available to anyone using the line in the future (Taylor 1978). Comparisons of phenotypic data can be made across laboratories enabling genetic correlations and investigation of similarities among phenotypes. Phenotypic data can be examined retrospectively as marker density increases and more phenotypes are collected. This process has been automated by Williams and colleagues, who established the GeneNetwork database that provides tools for RI-QTL mapping and correlations among more than 1,200 phenotype datasets, including gene expression (Wang et al. 2003). RI lines are also particularly well-suited for mapping QTL for phenotypes for which genetic variance is small compared to environmental variance. This feature of RI lines is derived from the ability to conduct repeated sampling from individuals with the same genetic background, resulting in strain means that reduce environmental noise and more accurately reflect the strain phenotype.

The ability to map QTL for complex traits is dependent upon the availability of a sufficiently large RI panel that provides enough power to detect QTL of small effect size (Gora-Maslak et al. 1991). However, the RI strains were developed to investigate Mendelian traits, and the small number of strains per line has limited their usefulness for identifying QTL for complex phenotypes. Prior to the development of dense sets of genetic markers, the utility of RIs was also limited by the availability of loci for mapping. The expansion of the BXD line, along with the development of a more dense set of polymorphic markers, now allows for mapping of QTL responsible for 10% of the phenotypic variance to approximately 1–2 megabases (Mb) (Peirce et al. 2004).

However, even the largest RI sets have several characteristics that mitigate their usefulness in complex trait analysis. Existing RI panels were produced by crossing only two inbred strains and from only a limited number of inbred strains, resulting in limited genetic variability both within and across panels. Both the advantages and disadvantages of RI lines were considered when planning the collaborative cross (CC) (Churchill et al. 2004), an experimental population akin to RI strains but with added genetic variability. The CC is discussed in more detail below.

4.2 Intercross and Backcross Mapping Populations

The limited power for mapping provided by existing RI lines led to the use of other types of mapping populations—either for replication of RI-identified QTL or as alternative crosses for initial QTL identification. The most commonly used QTL mapping populations are intercross (F₂) or backcross (BC) lines produced by breeding two inbred strains known to differ for the complex trait(s) of interest. The resulting F₁ hybrid progeny are either intercrossed to produce an F₂ generation (Fig. 1b) or backcrossed to one of the parental strains to produce a BC generation (Fig. 1a). At each locus, an F₂ animal will have one of three genotypes: homozygous for either of the parental alleles or heterozygous, possessing one allele from each of the parental strains. A BC animal has only two genotype possibilities: heterozygous or homozygous for the allele of the parental strain to which the F₁ progeny were backcrossed.

Unlike RI animals, intercross and backcross progeny are genetically heterogeneous; each F₂ or BC individual within the population is characterized by a unique pattern of genome-wide recombination. Therefore, each set of animals must be genotyped and the informativeness of these genotypes is limited to the set of phenotypes collected for any particular set of animals. When genotyping costs were prohibitive, selective genotyping of animals from the top and bottom 15% of the phenotypic distribution was frequently performed using DNA pools (Darvasi and Soller 1994; Wang and Paterson 1994). The genetic (DNA) contribution of each individual to the pool was often weighted toward individuals at the phenotypic extremes (Taylor et al. 1999, 2001). Individuals in each pool were genotyped only at loci for which a significant or suggestive QTL were identified, and the entire mapping population was only genotyped for those loci that proved significant. As genotyping costs have decreased, the use of pooling has waned.

The number of markers required to genotype either an F₂ or BC is relatively low based on the limited number of recombinations in these populations. A polymorphic marker every 40 Mb provides adequate coverage, as each marker will sweep 20 Mb in each direction. The choice of which type of cross to use is dependent on the genetic architecture of the phenotype of interest. Using an F₂ mapping population is recommended to obtain an overview of the number, location and estimated effect sizes of both additive and dominant QTL segregating in

the population, as well as QTL interactions (Darvasi 1998). Approximately 30% fewer F2 animals are required to detect additive QTL in comparison with a BC population due to the increased number of recombinations in the F2. However, BC mapping populations are generally considered more efficient for QTL identification, specifically for QTL with dominant effects. The decreased genetic variance in a BC—a population with a 1:1 genotypic ratio and only two prospective genotypes at any given locus—results in fewer genetic interactions than in an F2. The LOD threshold for significance is therefore lower for a BC, and gene effects are more prominent because the decreased genetic variance results in fewer genetic interactions in the BC (Darvasi 1998; Silver 1995).

Regardless of the cross type, QTL mapping has been successful in identifying thousands of loci. Conventional F2 populations derived from various inbred parental strains have been used to identify QTL for behaviors such as contextual fear conditioning (Wehner et al. 1997), spatial learning (Steinberger et al. 2003), alcohol preference (Fernandez et al. 2000) and consumption (Boyle and Gill 2008), anxiety (Bailey et al. 2008; Eisener-Dorman et al. 2010; Henderson et al. 2004; Turri et al. 2001a; Turri et al. 2004), home cage activity (Turri et al. 2001b; Umemori et al. 2009), ethanol-induced (Hitzemann et al. 1998) and cocaine-induced (Boyle and Gill 2009) locomotor activation and locomotor activity in the open field (Bailey et al. 2008; Eisener-Dorman et al. 2010; Gershenfeld et al. 1997; Kelly et al. 2003; Koynier et al. 2000). QTL for locomotor activity in the open field (Eisener-Dorman et al. 2010), alcohol preference (Melo et al. 1996) and body weight regulation (Zhang and Gershenfeld 2003) have been identified using BC populations.

The deluge of QTL for various phenotypes caused concerns regarding the possibility of numerous false positives (Type I Error). A paper published in 1995 proposed thresholds for reporting significant or suggestive QTL loci (Lander and Kruglyak 1995). Some researchers worried that the thresholds were too restrictive and that it would be cost prohibitive to phenotype and genotype populations of the size necessary to result in the levels of significance proposed (Yoon 1996). Others recommended the use of multiple strategies, including provisional mapping and replication of suggestive and significant QTL in independent populations and pooling results (Atkins 2001). At the time, however, the significance levels proposed by Lander and Kruglyak were almost universally adopted when reporting QTL. Advances in computational power now make it more common to generate significance thresholds based on individual experimental populations by running permutation tests (Churchill and Doerge 1994), and this function is present in most QTL mapping software packages.

Large F2 or BC populations have substantial power for detecting QTL, but they also have limitations. Neither F2 nor BC mapping panels are capable of providing high-resolution QTL localization due to the relatively low number of recombinations present in these populations. This results in coarsely mapped QTL with broad peaks that can encompass half of a chromosome and contain hundreds of candidate genes. Because the QTL regions identified are so large, the individual effects of closely-linked QTL are difficult to dissect. QTL comprised of multiple

closely-linked, small-effect QTL may fail to be detected if the loci have opposing phenotypic effects. Consequently, the fine mapping necessary to narrow QTL intervals and, ultimately, identify quantitative trait genes (QTG) must be carried out in specialized populations.

4.3 Consomic Lines or Chromosome Substitution Strains

Consomic lines, or chromosome substitution strains (CSS), are produced by introgressing a single chromosome from a donor strain onto a recipient strain background by repeated backcrossing for at least 10 generations (Fig. 1f). A full CSS panel consists of 21 lines—one for each of the 19 autosomes and 2 sex chromosomes. Established CSS lines are genetic reference populations that allow for relatively fast localization of a QTL or group of QTL to a single chromosome and have several advantages over standard mapping populations. Because statistical comparisons are made across 21 CSS lines and the background strain rather than across hundreds of markers in hundreds of F2 or BC animals, the P-value required for significance (corrected for multiple comparisons) in a CSS experiment will be lower. The total number of mice necessary for mapping QTL to a single chromosome in a CSS panel is only slightly lower than in an F2 cross based on sample size estimates required to detect a QTL that accounts for a similar amount of the variance in either population (Belknap 2003). However, no genotyping is required in the initial scan, making the CSS more economical. In addition, the effect size of a QTL will be amplified in the CSS due to the presence of only homozygotes.

These advantages make the CSS an attractive option for initial identification of QTL. However, the end result is an entire chromosome, or multiple chromosomes, on which reside QTL that must be localized and fine-mapped. CSS provide a starting population that requires fewer generations of breeding to produce interval-specific congenic strains or mice for recombinant progeny testing. Since QTL were identified and present on a homogeneous genetic background in the CSS, their effect size should be sufficient for recovery in congenic lines. However, if a significant result on a single chromosome represents a cluster of two or more QTL, the effect might be lost upon construction of congenic or subcongenic lines, as described below.

Constructing a CSS panel is costly and takes years of breeding. Realistically, therefore, most researchers are limited to existing CSS panels and the genetic and phenotypic variability that exists therein. Three CSS panels have been reported in the literature, beginning with the B6. A panel (A/J introgressed on to C57BL/6J) (Singer et al. 2004). This panel has been the most extensively used for mapping QTL for behavioral traits such as prepulse inhibition (Leussis et al. 2009; Petryshen et al. 2005), anxiety (Singer et al. 2005) and sleep-related epilepsy (Strohl et al. 2007) and other complex phenotypes, such as onset of puberty (Nathan et al. 2006) and resistance to diet-induced obesity (Buchner et al. 2008).

Takada et al. produced a CSS panel with MSM/Ms introgressed onto C57BL/6J (Takada et al. 2008) that has been used to identify QTL for emotionality (Takahashi et al. 2008), social interactions (Takahashi et al. 2010) and home cage activity (Nishi et al. 2010). Finally, Gregorova et al. (Gregorova et al. 2008) have introgressed PWD/Ph onto C57BL/6J and have characterized the lines for blood chemistry-related phenotypes.

5 QTL Fine Mapping

The identification of QTL is fairly straightforward, as evidenced by the thousands that now exist in online databases and in the literature (Flint et al. 2005). However, identifying the gene, or genes, underlying a QTL peak has been a persistent limitation of commonly used QTL methods. The limited resolution of standard QTL crosses (RIs, F2s, BCs) results in identification of large genomic regions, usually > 20 Mb, containing hundreds of genes. To identify the quantitative trait gene (QTG), the QTL region must be narrowed considerably before a manageable list of candidate genes can be interrogated. Fine mapping of QTL has been the focus of a great deal of research in recent years (Flint et al. 2005). Initially, congenic and subcongenic strains were pursued and have resulted in some success. However, partitioning QTL in this way is not always possible, and efforts toward the use of primary crosses have resulted in the development of advanced intercross lines (AILs), heterogeneous stocks (HS), outbred mice and the CC.

5.1 Congenic Strains

Congenic strains are derived from repeated backcrossing of a donor strain to a recipient strain until only a small region of the QTL-containing donor strain chromosome is introgressed onto the recipient strain background (Fig. 1e). This process, aided by genotyping the QTL region of interest, takes 13 generations (12 backcrosses followed by an intercross to obtain founders), but the process has been accelerated by marker-assisted selection of both the introgressed region and the remaining recipient background in a strategy called “speed congenics” (Markel et al. 1997; Wakeland et al. 1997). Consequently, it is now possible to produce congenics in less than half the number of generations. QTL intervals in congenic strains can be further narrowed by backcrossing the congenic founders to break up the introgressed region, thereby producing subcongenics.

There have been some successes in using congenic and subcongenic mice to narrow QTL regions. Berrettini and colleagues identified a morphine preference QTL (*Mop2*) in a C57BL/6J (B6) × DBA/2J (D2) F2 (Berrettini et al. 1994). The 20-Mb QTL was confirmed using a marker-assisted breeding strategy to generate a pair of reciprocal congenic mouse strains—the B6 QTL interval was introgressed

onto the D2 recipient background (D2.B6-*Mop2*), and the D2 QTL interval was introgressed onto the B6 recipient background (B6.D2-*Mop2*) (Ferraro et al. 2005). Heterozygous D2.B6-*Mop2* congenic mice were backcrossed to D2 mice, thereby fragmenting the 28.8-Mb QTL interval of the congenic into smaller, discrete intervals of 9.5 and 17.2 Mb in the resulting subcongenic strains (Doyle et al. 2008). Mice from one of these two subcongenic strains exhibited morphine preferences similar to both the D2.B6-*Mop2* congenic and the B6 parental strain mice, thereby narrowing the Chr 10 QTL interval to a 9.5-Mb region containing 39 genes (Doyle et al. 2008). In another study, the obesity-related QTL *Fob3* on Chr 15 was identified in an F2 cross originating from two outbred mouse lines selected for either high or low body fat (fat and lean lines) (Horvat et al. 2000). One mouse, selected because it was recombinant within the *Fob3* interval, was backcrossed for 10 generations to the Fat line to create two subcongenic strains with the Lean line *Fob3* QTL interval introgressed onto the Fat line recipient background (Stylianou et al. 2004). Further backcrossing of the *Fob3* subcongenic strains to the Fat line yielded additional recombinants, allowing the isolation of two smaller QTL (*Fob3a* and *Fob3b*) within the original *Fob3* QTL interval (Stylianou et al. 2004). Continued backcrossing of select recombinants within the 22.39-Mb *Fob3b* interval generated six additional subcongenic strains with overlapping donor intervals. Four subcongenic strains were intercrossed with the Fat line to generate four F2 mapping populations, which identified two closely-linked QTL, *Fob3b1* (4.98 Mb) and *Fob3b2* (7.68 Mb), within the *Fob3b* QTL interval (Prevorsek et al. 2010).

However, QTL effects often disappear during the construction of congenics or subcongenics. Reasons for this loss of QTL effect could be the removal of the QTL from a heterogeneous background, thereby eliminating epistatic interactions that increase QTL effect size. It is also likely that QTL that disappear during congenic production might actually be groups of two or more smaller effect size QTL that appear as a single peak in an F2 or BC but do not have sufficient power alone to result in a statistically significant change in phenotype (Legare et al. 2000; Legare and Frankel 2000).

5.2 *Advanced Intercross Lines*

Although the ability to restrict genetic heterogeneity to only two strains has advantages (Cheng et al. 2010), the limited number of recombinations present in F2 and BC mice also limits the resolution of these mapping resources. AILs are produced by intercrossing two parental strains to obtain an F2 and then intercrossing each successive generation (Fig. 1d). AILs have the advantage of expanding the genetic map by increasing the number of breakpoints, thereby increasing the recombination fraction between markers. The increased number of recombinations in an F10 can reduce the size of a QTL interval by five-fold in comparison with a similarly-sized population of F2 animals (Darvasi and Soller 1995). However, the increase in resolution comes at the cost of power to detect

QTL. This loss in power is due to the increased number of markers necessary to account for the reduction in linkage disequilibrium between markers and genetic drift that results in altered allele frequencies. The latter can be controlled somewhat by choosing an appropriate breeding strategy (Rockman and Kruglyak 2008). In general, maintaining large population sizes and controlling for inbreeding can mitigate concerns about power in an AIL.

One of the largest AILs is the LG/J \times SM/J (LG, SM) AIL produced by Cheverud and colleagues at Washington University in St. Louis, Missouri (Norgard et al. 2008). The F9-F10 LG, SM AILs have been used successfully to identify dozens of QTL for bone-length (Kenney-Hunt et al. 2008; Norgard et al. 2008, 2009). More recently, F34 LG, SM AILs were used to replicate and refine QTL from previous studies. Norgard et al. were able to replicate almost 80% of QTL identified in both F2-F3 and F9-F10 populations. However, QTL interval reduction in the F34 was less than expected compared to previous studies. QTL intervals ranged from 0.6 to 14 Mb with half of the QTL having confidence intervals from 2 to 5 Mb. The authors postulated that family structure bias inflated the QTL peaks and decreased the confidence interval sizes reported in earlier studies. An alternative explanation is the presence of multiple linked loci at the QTL peaks—a problem that is encountered with any fine mapping population.

Cheng et al. (2010) took advantage of the power of an F2 and the mapping resolution of the LG, SM AIL to identify QTL for methamphetamine sensitivity. QTL were identified for both methamphetamine- and saline-induced locomotor behavior in a large LG \times SM F2 and the F34 LG, SM AIL. Both populations were also combined and analyzed as one large intercross. Cheng et al. found that the population structure present in AILs must be considered when mapping to reduce Type I errors. By using a mixed model that considered relatedness of individuals in the AIL for both mapping and significance threshold determination, the authors were able to identify several QTL intervals at sub-centimorgan resolution—one of which contains only a single gene that is now being assessed for its role in methamphetamine sensitivity. Samocha et al. (2010) used a similar approach to map QTL for acoustic startle response, habituation and prepulse inhibition of the startle response. A large set of F2 identified QTL for multiple behaviors. The population size of the AIL used in this study did not provide enough power to detect significant QTL on its own, but combined analysis of both the F2 and AIL populations narrowed QTL intervals identified initially in the F2. Taken together, these studies indicate that the approach of using both an F2 and AILs, along with taking into account population structure, is an effective method for identification and fine-mapping of QTL.

5.3 *Heterogeneous Stocks*

Heterogeneous Stocks (HS) lines are produced by pseudo-random breeding over multiple generations with the aim of increasing the number of meiotic crossovers and, thus, the genetic resolution (Fig. 1g). The term “heterogeneous stock” is

commonly used to describe two independently established eight-way inbred mouse crosses. The Boulder HS was established in 1970 from an eight-way cross between C57BL/6, BALB/c, RIII, AKR, DBA/2, I, A/J and C3H strains and has been breeding for more than 60 generations (McClern et al. 1970). Initially, the Boulder HS mice were conceived as a normative population of mice with increased genetic variation in comparison to individual inbred strains (McClern et al. 1970). The Northport HS, derived from A/J, AKR/J, BALB/cJ, C3H/HeJ, C57BL/6J, CBA/J, DBA/2J and LP/J strains, was established in 1994 as a stock for selective breeding (Hitzemann et al. 1991) and has been breeding for more than 50 generations (Demarest et al. 2001; Hitzemann et al. 1994). More recently, two additional HS lines have been reported. A collaborative cross HS (CC-HS), derived from the same eight founder strains that were used to establish the CC, was recently reported by the Hitzemann laboratory and is currently at the 12th generation of outbreeding (Iancu et al. 2010). In addition, a cross between four inbred strains, C57BL/6J, DBA/2J, BALB/cJ and LP/J, called the HS4 has also been produced and maintained in the Hitzemann laboratory for 19 generations (Malmanger et al. 2006).

It is estimated that HS mice at 60 generations of random breeding could increase mapping resolution by 30-fold over an F2 or BC. Talbot et al. (1999) used the Boulder HS to fine map a QTL for open field behavior identified on Chr 1 in previous studies (Caldarone et al. 1997; Flint et al. 1995; Gershenfeld et al. 1997; Wehner et al. 1997) and were able to refine the chromosomal location to a 1.6-Mb region. Using single-marker association analysis, they also replicated a QTL on Chr 12 but failed to replicate three additional QTL on Chrs 1, 10 and 15. The inability to replicate QTL in the HS was attributed to the inability to distinguish between identical alleles contributed by different progenitor strains. This shortcoming was overcome by the development of a multipoint mapping model that takes into account information from flanking markers and progenitor haplotypes. This mapping algorithm, called HAPPY, is available for download or use as a web-based program (<http://www.well.ox.ac.uk/~rmott/happy.html>). Using the multipoint mapping method, all three previously undetected loci were mapped.

The Northport HS has been used to fine map a QTL on Chr 2 for ethanol-induced locomotor activity. The QTL was initially identified in the BXD RIs and replicated in a B6XD2 F2. Using a G32-35 HS, Demarest et al. (2001) were able to replicate the Chr 2 QTL and resolve the region into three separate peaks.

Mott and Flint (2002) also developed a technique, called the inbred-outbred cross, for using HS mice to both detect and fine map QTL. The technique involves generating an F2 cross using HS and a genetically-distinct line (inbred strain, knockout, transgenic), detecting QTL using standard methods (low marker resolution) and then dense genotyping in candidate QTL regions to take advantage of the increased resolution of the HS-contributed genetic material. Through simulations, Mott and Flint showed that a 5% effect size QTL could be detected and fine mapped with 50% probability to within 6 Mb by genotyping 1,500 animals.

HS mice have been used primarily to fine map previously identified QTL (Demarest et al. 2001; Malmanger et al. 2006; Talbot et al. 1999; Turri et al. 1999), although their increased genetic variability and expanded genetic map also make

them suitable for genome-wide association studies. However, several procedural and analytical hurdles had to be addressed before genome-wide QTL identification in the HS could be realized. First, because of the expansion of the genetic map, 100 times more markers and 10 times more animals are required to have the power to detect QTL with 5% effect or less (Flint et al. 2005; Valdar et al. 2006b), making genome-wide mapping in the HS an expensive proposition. Also, unknown selective pressures and random fluctuations in allele frequencies during production and/or maintenance of the stock may affect the resolving power of the HS. These issues are detailed in the first publication of genome-wide association in the Northport HS (Valdar et al. 2006b). Costs for line production and genotyping were reduced by collecting over 100 phenotypes in parallel for each mouse (Solberg et al. 2006), and model-averaging techniques were developed to analyze multiple QTL models and overcome genotype correlations (linkage disequilibrium) and family structure. Hundreds of QTL for dozens of phenotypes were detected with confidence intervals averaging 2.8 Mb—a substantial improvement over standard F2 crosses.

5.4 Outbred Mice

Outbred stocks are closed populations of genetically variable animals that are bred to maintain maximum heterozygosity (Chia et al. 2005). Dozens of outbred stocks exist, and like HS mice, they offer the advantage of increased mapping resolution but suffer some of the same drawbacks—increased sample size and marker density are required for QTL detection. In addition, outbred stocks (with the exception of HS lines) do not have the advantage of progenitor allele information to derive the origin of alleles in the offspring. This limitation introduces difficulties in the use of these stocks for QTL mapping. Only one example of a behavioral QTL has been published thus far using outbred stocks. The *Rgs2* gene that influences anxiety in mice was identified using outbred MF1 mice (Yalcin et al. 2004). Yalcin et al. determined that the haplotype patterns in MF1 mice were very similar to those found in standard inbred strains. Thus, they were able to use similar techniques for mapping as those used with HS mice.

Aldinger et al. (2009) recently examined genetic variation and population structure in CD-1 outbred stocks and determined that CD-1 mice are reasonably outbred, polymorphic at a significant number of loci and resemble human populations in terms of complex genetic history. Although CD-1 mice have population substructure that may affect mapping results, the authors believe this structure could be exploited and that the CD-1 mice represent a valuable genetic mapping resource. Williams et al. (2009) used CD-1 mice to confirm the effect of a duplication of the *Glo1* gene on anxiety-related behavior in mice. However, outbred mice have not yet been used for genome-wide association mapping of behavioral traits. Perhaps as genomic and analytical resources are developed, these untapped resources of genetic variability will become utilized more frequently in the identification and fine mapping of QTL.

5.5 *The Collaborative Cross*

In the late 1990s and early 2000s, the discussion in the mouse genetics community started to focus on the problem of QTL identification; it was determined that current mouse resources were not suitable for tackling such a difficult problem. Various standard mapping populations had the features necessary for identifying complex trait loci, but not one mapping resource had all of the features that were necessary if such an endeavor was to be successful down to the point of gene identification. Mouse geneticists began to envision a reference population of mice, the CC, that would capitalize on the advantages of existing resources by offering genetic diversity, mapping power and high-resolution. The CC would also provide a platform for systems genetic studies and modeling of complex networks, including gene by gene and gene by environment interactions. The CC was to be derived from eight divergent inbred strains (A/J, C57BL/6J, 129S1/SvImJ, NOD/LtJ, NZO/HILt, CAST/EiJ, PWK/PhJ and WSB/EiJ) to maximize genetic diversity and ensure that the resulting population would provide the phenotypic diversity necessary to study any trait of interest. Like the AIL and HS lines, the CC would be subjected to multiple generations of breeding to increase meiotic recombination and provide the necessary mapping resolution for fine mapping QTL (Fig. 1h). However, the CC would be inbred and, upon completion, would provide a fully-genotyped reference population that could be provided to individual investigators. Finally, the CC would be sufficiently large (~1,000 lines) to provide the power necessary to map QTL of relatively small-effect size.

The initial and largest crosses to produce the CC were begun in 2005 at the Oak Ridge National Laboratory (ORNL). Separate, smaller breeding populations were located in Tel Aviv, Israel and Western Australia. In late 2008, the Department of Energy announced that the ORNL mouse genetics program was being phased out, and the ORNL CC population was transferred to the University of North Carolina (UNC). The Tel Aviv population has recently joined the ORNL lines at UNC. Several CC lines have already reached the inbred state due to an acceleration of the process using marker-assisted inbreeding. At least 100 lines will be completed by the end of 2012, and additional lines will follow over the next several years (personal communication, Darla Miller).

It is likely that the final population of the CC will be closer to 500 rather than 1,000 lines, as first proposed. Simulation studies have shown that 500 lines provide both adequate power and fine resolution for QTL mapping (Broman 2005; Valdar et al. 2006a). A multi-stage strategy has also been proposed using an initial mapping panel of 100 strains followed by a second set of 100 strains that have informative allele combinations and recombination events based on QTL localization from the first stage (Churchill et al. 2004). This strategy will make the CC more accessible for smaller laboratories. The completion of fully-genotyped CC-RI lines would also enable the production of many more CC recombinant inbred intercrossovers (CC-RIX) produced by crossing different CC lines. Each CC-RIX mouse will inherit a chromosome from each CC parent and, thus,

genotype information can be extrapolated. Heterozygosity will be recaptured in the CC-RIX lines, making them a more realistic model for human populations and allowing for more accurate modeling of complex human diseases.

6 Haplotype Association Mapping

Inbred strain surveys are an important initial step in understanding the genetic and phenotypic architecture of complex traits. Until recently, however, strain surveys had become less frequently used, meaning that researchers had a limited set of data on which to base experiments. In 2000, the Mouse Phenome Project was started as an effort to collect phenotypic data from a core set of inbred strains. These data would be stored in a central location, be publicly available on the Mouse Phenome Database (MPD; <http://phenome.jax.org/> and Bogue et al. (2007)) and would offer investigators a wide range of phenotypes with which to inform research decisions for complex trait analysis (Bogue 2003; Paigen and Eppig 2000).

The effort to collect phenotype data for inbred strains coincided with efforts to increase the number of single nucleotide polymorphisms (SNPs) identified in inbred mouse lines and construct a SNP haplotype map of the mouse similar to the HapMap being constructed in humans (2003) (<http://hapmap.ncbi.nlm.nih.gov/>). This convergence of phenotype data and SNP genotype data presented an obvious opportunity to take advantage of both the phenotypic and genotypic diversity among inbred strains. In the context of genetic mapping, inbred strains offer several advantages over existing mapping populations. Inbred strains are, of course, a reference population of mice enabling collection and storage of phenotypic and genetic data that can be utilized repeatedly. In addition, inbred strains, like RIs, allow for repeated sampling within a strain to reduce environmental variance. Inbred strains also have increased genetic and phenotypic diversity in comparison to RI or standard F2 or BC populations, as well as a dense genetic map due to increased recombination.

In 2001, Grupe et al. used existing inbred strain phenotype data from the MPD and over 3,000 SNPs identified in their laboratory and at the Whitehead Institute (Lindblad-Toh et al. 2000) to conduct “in silico QTL mapping” in mouse. The basic approach is straightforward—as described previously, inbred strains are genetically identical within a strain but genetically diverse across strains. Therefore, associating SNP genotypes across the genome with strain phenotypes, similar to an RI-QTL study, can be expected to yield chromosomal regions that are associated with the trait of interest. The in silico mapping technique was successful in identifying QTL that overlapped with previously published reports using standard crosses (Grupe et al. 2001). Nevertheless, subsequent commentary on the method exposed several weaknesses, including lack of power, insufficient genetic variability and failure to control for both Type I and II errors (Chesler et al. 2001; Darvasi 2001). Darvasi (2001) estimated that between 40 and 150 strains would be necessary to identify a QTL affecting a quantitative trait with a heritability of 50%,

and the number of strains used in the Grupe study ranged from 4 to 8. However, Grupe et al. argued that this estimate was based on power calculations using Lander and Schork significance levels based on an infinite density of genetic markers and was not applicable to their study.

Regardless, it was generally agreed that *in silico* mapping, more recently termed haplotype association mapping (HAM), might be a useful tool for identification of QTL. Three factors were necessary for its successful implementation: dense SNP coverage across the genome for more than just a few strains, phenotype data for multiple strains and appropriate analysis tools for genotype/phenotype associations. Pletcher et al. (2004) addressed two of these problems by identifying over 10,000 SNPs in 48 strains and developing a HAM algorithm called SNPster (<http://snpster.gnf.org>) to perform genotype/phenotype associations across the genome using a three-SNP sliding haplotype window. Using this method, the authors were able to identify QTL peaks for several Mendelian traits, including coat color and retinal degeneration. They were also able to replicate previously identified QTL for more complex traits such as saccharin preference, high-density lipoprotein (HDL) levels and gallstone formation. In addition, most map locations spanned intervals of 1 Mb or less—a significant improvement over standard F2 or BC mapping.

However, several hurdles still remained for HAM. As more dense SNP panels were genotyped and more was known about the genetic structure of the inbred strains, it became clear that an extensive family structure existed that could lead to spurious associations. In addition, only a limited number of strains existed for which there was both phenotype and genotype data, resulting in limited power to detect QTL for complex phenotypes. McClurg et al. (2007) attempted to address family structure by calculating a genetic similarity matrix along with a weighted bootstrap method to decrease the significance of nonspecific associations. In addition, gene expression data were used to optimize the power of the SNPster algorithm to identify *cis*-acting expression QTL that are considered, by some, to be a highly-enriched set of true positives with a low false-positive rate (Chesler et al. 2006). Additional analysis programs have been developed to perform association mapping in inbred strains, including Efficient Mixed-Model Association (EMMA; (Kang et al. 2008)) and hmmSNP, which uses a hidden Markov model (HMM)-based algorithm (Tsaih and Korstanje 2009). Each program uses a different algorithm and has a slightly different way of dealing with population structure. However, most programs give qualitatively similar results (unpublished data, Tim Wiltshire).

The full power of HAM has not yet been realized, as the resources for performing such analyzes are still being compiled. The quantity of SNPs in mice now number in the millions across more than 100 inbred strains. The number of phenotypes in the mouse phenome database continue to grow, with over 2,000 phenotypes stored and an average of 19 mouse strains tested per phenotype. However, the HAM technique has been used successfully to narrow down previously identified QTL intervals (Burgess-Herbert et al. 2009; Cervino et al. 2005; Harrill et al. 2009; Park et al. 2003; Wang et al. 2005) and to identify new QTL (Bopp et al. 2010; Liao et al. 2004; Liu et al. 2006; Pletcher et al. 2004).

Few HAM studies have been published for behavior. Webb et al. conducted a whole genome association study for prepulse inhibition and identified QTL on Chrs 1 and 13 (Webb et al. 2009) that overlap with genes that alter PPI when knocked out or regions of the human genome that contain genes that have been implicated in schizophrenia. Miller et al. (2010) measured tail suspension, an animal model of behavioral despair or depression, in 33 inbred strains of mice and identified four QTLs, including one that overlapped a human region that contains a locus associated with major depressive disorder and bipolar disorder.

Initial reports of QTL mapping using HAM resulted in concern about the fate of standard QTL studies (Chesler et al. 2001; Darvasi 2001). However, these concerns have not been realized. In general, HAM is viewed as one step in QTL identification that can be used for initial identification of QTL regions that must then be replicated using standard approaches. More commonly, HAM can be used to both replicate and narrow QTL that were identified using standard approaches (Burgess-Herbert et al. 2008, 2009; DiPetrillo et al. 2005). This technique is particularly effective when using strains that are genetically similar. Although genetic similarity may result in phenotypic similarity, QTL can be detected even when using parental strains that are phenotypically similar (Bailey et al. 2008; Eisener-Dorman et al. 2010). This is due to transgressive segregation, the reshuffling of alleles that occurs when two strains are crossed (Rieseberg et al. 1999). QTL identified in these crosses may be fine mapped to relatively small genomic regions using haplotype comparisons since regions of shared haplotype can be eliminated from consideration (Bailey et al. 2008; Eisener-Dorman et al. 2010).

As more phenotype data are collected for larger numbers of inbred strains and more information is gathered on the genomic structure of the laboratory mouse, HAM analysis will become an even more vital tool with which to identify complex disease genes.

7 Mutagenesis

In the late 1990s, with QTL accumulating in the literature and very few identified genes, the scientific community was looking for alternative approaches to identification of complex disease genes. Mutagenesis, the induction of mutations by chemicals or radiation, was particularly attractive. Mutagenesis in the mouse was not new—radiation-induced mutagenesis experiments to determine the genetic effects of radiation on mammals had been ongoing at the Department of Energy's Oak Ridge National Laboratory (ORNL) since just after World War II. The use of *N*-ethyl-*N*-nitrosourea (ENU) as a chemical mutagen in mice began in 1978 when it was shown to have a mutation rate 12 times higher in male spermatogonia than that of X-rays (Justice 2004).

ENU is an alkylating agent that causes single base pair mutations—usually A–T to T–A transversions or A–T to G–C transitions. ENU induces random heritable mutations at a rate of approximately 1.4×10^{-6} per nucleotide site

(Takahasi et al. 2007), although this rate varies depending on the protocol and the species or inbred strain background. Because of the random nature of mutations resulting from ENU, it was proposed as an unbiased way to induce a single mutation that would affect a complex phenotype. Thus, unlike transgenic and knockout mouse technologies, which target a specific gene of interest, a strength of the ENU mutagenesis approach is that it is not hypothesis-driven and is not limited to the study of known genes previously associated with specific biological pathways. Downstream analysis for ENU studies included mapping of the causative mutation followed by identification of the genetic lesion. The presence of only one causative mutation was anticipated to render the gene easier to identify.

In 1997, several large-scale ENU mutagenesis centers were set up in the UK and Germany to produce and screen ENU-generated mutants using batteries of phenotypic tests, including dysmorphologies, behavior, neurological abnormalities, immunology, clinical chemistry and hearing (Hrabe de Angelis et al. 2000; Nolan et al. 2000). In 2000, the NIH awarded grant funding to three large-scale mutagenesis centers in the United States at the University of Tennessee at Memphis, Northwestern University and the Jackson Laboratory with a mandate on production, identification and dissemination of ENU-induced mutants displaying alterations in nervous system function and behavior (collectively called the Neuromice.org Consortium). Additional ENU mutagenesis centers were formed outside the auspices of NIH, both small and large-scale, in academia and industry (for a complete list see (Cordes 2005)).

The mutagenesis centers quickly began producing hundreds of mutants for dozens of disease-related domains. However, it quickly became obvious that identification of the causative mutation would not be as straightforward as hoped. There have been many successes in gene identification for ENU-induced mutants in the areas of immunology (Hoebe and Beutler 2008; Sandberg et al. 2005; Tabeta et al. 2006; Theodoratos et al. 2010), development (Herron et al. 2002; Garcia-Garcia et al. 2005; Stottmann et al. 2009) and metabolism (Lloyd et al. 2005, 2006, 2010; Wilkes et al. 2009). ENU-disrupted genes responsible for neurological traits that might be considered less susceptible to environmental fluctuations have also been successfully identified in the areas of deafness (Grillet et al. 2009; Mackenzie et al. 2009; Parker et al. 2010; Schwander et al. 2009a, b), ataxia (Sharkey et al. 2009; Swanson et al. 2010; Xie et al. 2010) and epilepsy (Frankel et al. 2009; Tokuda et al. 2011). Mapping mutants for more complex behavioral phenotypes, on the other hand, has proven problematic.

The basic steps in ENU mutagenesis (Fig. 2) include induction of mutations by injection of the mutagen in male mice. These G0 mice are then bred with wildtype females, and the offspring of that cross, the G1, can be screened for dominant mutations. Further breeding of the G1 males to wildtype females produces G2 females that can be bred back to the G1 male. The resulting G3 animals will carry recessive mutations at a rate of one per eight G3s. Once an outlier is identified, the standard course of action is to prove heritability by crossing the animal back to a wildtype, produce F1 mice and then intercross to recover the mutation in the F2 progeny—one-quarter of which should exhibit a fully-penetrant, recessive

Dominant/recessive ENU mutagenesis screen

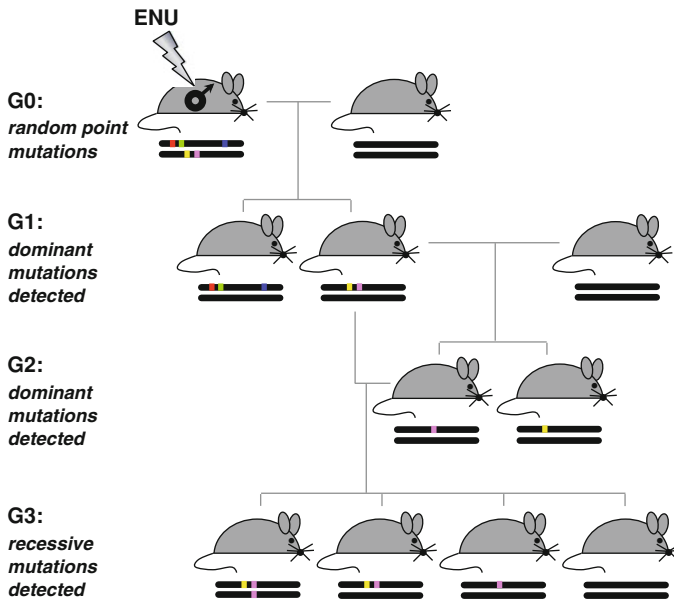


Fig. 2 Standard ENU mutagenesis. The standard ENU mutagenesis scheme includes injecting male mice (G0) with ENU. Doses vary depending upon strain, but generally, three weekly injections of 85–100 mg/kg ENU works well in B6 mice. ENU-treated males become infertile following treatment but many will regain fertility after 10–12 weeks. Loss of fertility is often used as an indicator that the ENU was effective. After regaining fertility, ENU-treated males are bred to wildtype females of the same strain or a different strain. G1 animals produced from this cross can be tested for dominant mutations. G1 mice will inherit a mutagenized genome from the father and the mutations will differ between G1s. To recover recessive mutations, the G1 females are crossed back to the G1 father to generate G2s. Two copies of any mutations that the father and daughter share will be recovered in the G3 at a rate of one mutation per eight G3s. For this reason, G3 pedigrees are often screened for phenotypes in order to recover at least one or two affected animals with which to propagate the new mutant colony

phenotype. If no F2 mice exhibit the expected phenotype, it is assumed that the original outlier had multiple alleles contributing to the phenotype (ENU produces one mutation approximately every 1–2 Mb; Kile and Hilton 2005) that were dissociated by outcrossing OR that the original outlier displayed an abnormal phenotype due to non-genetic reasons (environmental variability, etc.). If the ratio of affected mice in the F2 is lower than expected, reduced penetrance may be an issue that needs to be considered during the mapping process. If, however, the heritability cross proves successful, the mutants enter into a mapping funnel that starts with outcrossing a proven mutant to a different inbred mapping strain and F2 or BC animals are produced and phenotyped. Here we start to enter into familiar “QTL” territory—if the phenotype produced by the mutation is too weak to be observed on a mixed background or interacts with QTL in the mapping cross, the phenotype may disappear and mapping attempts will be unsuccessful.

One way to deal with a non-robust phenotype is to cross the mutant to a number of inbred strains in order to find a heterogeneous background that allows for the recovery of the mutant phenotype in the mapping cross, but this increases mapping costs. Alternatively, sufficient SNP data are now available that allow mapping to strains that are closely related to the background strain and might reduce the number of interacting QTL (Bailey et al. 2008; Eisener-Dorman et al. 2010; Xia et al. 2010). The mutant phenotype might also be preserved by limiting the amount of the mapping strain background by backcrossing the F1 animals to a mutant. This strategy also increases the number of animals in the mapping cross that carry the causative mutation. Finally, a contemporaneous population of mice not carrying the mutation can be produced, phenotyped and genotyped to provide a control for both choosing outliers in the mutant cross and identifying background QTL.

Even with these strategies, however, identification of genes in ENU mutants that exhibit behavioral anomalies has been painfully slow, even when the phenotype appears robust. Many mutants with abnormal behavioral profiles have been reported (Rastan et al. 2004; Reijmers et al. 2006; Hamre et al. 2007; Mathews et al. 2009), yet gene identification for ENU behavioral mutants has been slow to materialize.

Recent publications, however, indicate that ENU-induced behavioral mutants are beginning to yield genes. In 2007, Keays et al. identified an ENU-induced mutation in the guanosine triphosphate (GTP) binding pocket of alpha-1 tubulin (*Tuba1*). *Tuba1* mice exhibited hyperactive behavior but also had a secondary correlated phenotype—body weight. The presence of a secondary phenotype that was more stable and reproducible than the hyperactivity phenotype aided in fine mapping and identifying the gene. Specca et al. (2010) recently reported on the identification of an ENU-induced nonsense mutation in the *Unc-79* gene in a mouse mutant (Lightweight) initially identified in a screen for animals with enhanced locomotor activity. The screen was conducted on a sensitized genetic background (mice heterozygous null for dopamine transporter), but the Lightweight mutation acted independently of this background. As the name implies, this mutant also had a correlated phenotype of low body weight. Peaks for both weight and locomotor activity overlapped, and the use of both phenotypes contributed to the identification of the causative ENU-induced mutation. Finally, an ENU-generated missense mutation in the *Grin1* gene was identified in a mouse mutant that displayed increased spontaneous locomotor activity (Furuse et al. 2010). It should be noted that all three of these mutants were identified in screens for dominant ENU mutations, and all were initially generated on a mixed genetic background (i.e. ENU mutagenized males were crossed to females of a different inbred strain). These results suggest that dominant mutations are ultimately easier to identify than recessive mutations. Furthermore, using a mixed genetic background in the primary ENU screen may increase the chance of recovering mutant mice in the mapping cross, thereby hastening identification of the mutated gene.

The goals of the NIH-funded ENU centers included generation and distribution of mutagenized mice with the idea that individual researchers could follow up on

phenotypes of interest and map the mutated genes. Although gene identification of ENU behavioral mutants has been slow, improvements in next-generation sequencing technologies and decreased costs may accelerate the process. Deep sequencing of ENU-generated mutants, in combination with or independent of mapping information, could yield the causative mutations. Several large libraries of cryopreserved sperm and/or embryos from G1 mice are also available at RIKEN (Yoshiki et al. 2009), Harwell (Glenister and Thornton 2000), the Australian Phenomics Network and the German ENU mutagenesis center. As sequencing prices decrease, these libraries could be screened to identify mutations genome-wide. Cryo-recovery and phenotyping of mice with mutations in specific genes would complement efforts such as the KOMP.

8 Beyond QTL Analysis: Finding the Quantitative Trait Gene

The ultimate goal of QTL mapping is identification of the underlying polymorphism that can provide insight into the biology of the phenotype/disease. Regardless of how a QTL is identified, members of the complex trait community have determined that several methods are appropriate and necessary for QTL validation (Abiola et al. 2003). These criteria include relating the gene function to the QTL phenotype, identifying allelic polymorphisms or assessing gene homology to determine if the sequence is evolutionarily conserved across species. Manipulation of the gene of interest is also advantageous for QTL validation and includes the study of knockout, knockin, transgenic or otherwise genetically-altered mouse models. Genetic or functional complementation of different inbred strains or a genetically-deficient mouse model serves as an additional confirmation of the QTL (Kono et al. 2003; Yalcin et al. 2004).

Identification of the QTG represents the beginning of a new phase of analysis that explores the mechanisms underlying alterations in gene expression and biological pathways (Flint 2003). For example, *Rgs2* was mapped as an anxiety QTL and was later genetically dissected and confirmed using quantitative complementation (Yalcin et al. 2004). These findings have since been translated to human anxiety research, with the human RGS2 ortholog correlating with introversion and social anxiety, thereby becoming a potential target for the treatment of social anxiety disorders (Smoller et al. 2008).

9 The Future of Forward Genetics

As knowledge of the genomic sequence and organization of both the human and mouse genomes increases, an appreciation for the complexities that will likely explain the genetic components of complex behaviors has become more apparent. Single-gene, reverse genetic approaches like knockouts and transgenics still have

much to offer toward functional annotation of genes. However, it is now widely accepted that naturally occurring genetic variation, along with epigenetic effects and environmental variation, may act synergistically to increase risk for complex neuropsychiatric diseases. Although the complex trait community has made consistent advances in the search for QTL that influence behavior, the progress from QTL to QTG has been painstakingly slow. However, genomic tools in the mouse are being developed at a rapid pace and promise to transform complex trait analysis. For example, dense SNP maps now available make it possible to narrow QTL regions using haplotype comparisons—the substantial reduction of a QTL interval that used to take years can now be accomplished in hours depending on the parental strains utilized (Eisener-Dorman et al. 2010).

New sequencing technologies are driving down costs and allowing for more accurate sequencing of entire genomes. As acquiring sequence becomes less cost prohibitive, the ability to sequence individual mice in a specific genomic interval or genome-wide will become a real option even for smaller laboratories. This will be especially useful for gene identification in ENU mutagenized lines.

Using new sequencing technologies, the Sanger Institute is sequencing the entire genome from 17 different inbred mouse strains, including the CC parental strains, as part of its Mouse Genomes Project (<http://www.sanger.ac.uk/resources/mouse/genomes/>). These data will provide an invaluable resource for mapping and haplotype analysis in the CC as it comes online. These sequence data, along with the increased genetic variation and mapping resolution offered by the CC, will provide access to QTL that have been unrepresented in current mapping populations.

This is a particularly exciting time for mouse genetics as resources and technology advance at a rapid pace. Behavioral scientists are poised to gain new insights into the biology and genetic control of complex behaviors with the ultimate goal of translational studies in humans.

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Mouse Models of the 5-HTTLPR × Stress Risk Factor for Depression

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Abstract The incidence of mood disorders is known to be influenced by both genetic as well as environmental factors. Increasingly, however it is becoming clear that few genetic and environmental factors act alone, but that instead they regularly act in concert to determine predisposition to psychiatric disorders. Quite a few cases now have been reported in which stratification of subjects by exposure to environmental pathogens has been shown to alter the association between specific genetic variants and mental illness. The best studied of such measured gene-by-environment risk factors for mental illness is the increased risk for major depression reported among persons carrying the short variant (S allele) of a functional polymorphism in the serotonin transporter (5-HTT, SLC6A4) gene promoter and who have been exposed to stressful life events. Recently, a large number of laboratories have tried to model the interaction between 5-HTTLPR genotype and early/adult stress in mouse. Findings from their studies have helped to define the rodent orthologs of the environmental stressors and behavioral traits involved in risk for depression. Furthermore, several of these studies attempted to identify changes in molecular substrates that might underlie the 5-HTT x stress risk factor, pointing to the hippocampus and frontal cortex as critical brain structures involved in the interaction between 5-HTT gene variation and early and adult stress, respectively. These results will serve to help inform clinical research

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into the origins of major depression and other mental illnesses with interacting genetic and environmental risk factors.

Keywords Gene-by-environment · Serotonin transporter · Mouse models · Early/adult stress risk factor · Anxiety-depression

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1 Challenges of Designing Mouse Models of the 5-HTTLPR × Stress Risk Factor

Risk for mood disorders is moderated by genetic as well as environmental factors. Twin studies suggest that genetic factors contribute only moderately to the variance in incidence of these disorders, while environmental factors presumably explain the majority of their incidence. Increasingly, however, it is becoming clear that few genetic and environmental factors act alone, but that instead they function in concert to determine predisposition to mental illness. Several cases now have been documented in which stratification of subjects by exposure to measured environmental pathogens, ranging from childhood maltreatment to cannabis use, have been shown to alter the association between specific genetic variants and mental illness (Caspi and Moffitt 2006).

Arguably the best studied of such measured gene-by-environment risk factors for mental illness is the increased risk for major depression reported among persons carrying the short variant (S allele) of a functional polymorphism in the serotonin transporter (5-HTT, SLC6A4) gene promoter (called serotonin transporter gene-linked polymorphic region, 5-HTTLPR) and who have been exposed to stressful life events. Originally, the short variant was associated with a small, but significant increase in anxiety-related personality traits, such as neuroticism and disagreeableness (Lesch et al. 1996). However, larger effects of the short variant were found following stratification of subjects by exposure to either childhood maltreatment or adult stress. When environmental exposure was taken into account a significant interaction between 5-HTTLPR genotype and stress exposure was uncovered (Caspi et al. 2003). Subjects carrying one or two of the short variants (S/S or S/L individuals) demonstrated increased risk for major

depression at age 26 when exposed to either childhood maltreatment or stressful life events in the five preceding years. L/L individuals, on the other hand, showed low incidence of depression regardless of environmental exposure. Intriguingly, they observed significant interactions between the short variant and both early (age 0–11) and adult (age 21–26) stress, suggesting that genetic influences on serotonin homeostasis fundamentally altered the physiological or emotional response of an individual to stress throughout life. The increased risk for depression in stressed S allele carriers was later replicated by several laboratories although there have also been failures and controversy (Risch et al. 2009; Kaufman et al. 2004, 2010; for review, see Uher et al. 2011). Studies in non-ill subjects have also shown evidence of a similar 5-HTTLPR \times stress effects on physiological and behavioral traits, including heart rate reactivity and anxiety (Caspi et al. 2010; Williams et al. 2009). Thus, the 5-HTTLPR S allele is likely to act by favoring basic stress coping strategies that subsequently carry an increased risk for depression.

Using electroencephalogram and functional magnetic resonance imaging (fMRI), several groups were able to identify brain regions that showed significantly altered neural activity in response to emotional stimuli in 5-HTTLPR short variant carriers (Hariri et al. 2002; Heinz et al. 2005; Pezawas et al. 2005; Canli et al. 2005, 2006). The most common finding has been an apparent increase in amygdala fMRI signal reactivity to emotional stimuli (Hariri et al. 2002; Canli et al. 2005). However, several studies have suggested that this is a reflection of an increase in baseline neural activity in S allele carriers in a much wider range of forebrain areas, an interpretation supported by perfusion imaging techniques (Canli et al. 2006; Heinz et al. 2007). Several fMRI studies have also shown altered functional connectivity between frontal cortical regions and amygdala in S carriers (Heinz et al. 2005; Pezawas et al. 2005). In one of these studies (Canli et al. 2006) subjects were explicitly stratified by exposure to life stress events. Neural activity in a wide range of forebrain regions showed evidence of a significant 5-HTTLPR \times life stress effect following visual exposure to emotional words. In many brain regions, including amygdala and hippocampus, neural responses in S allele carriers increased with life stress events while they decreased in L/L allele carriers so that under high stress load the genotype effect on neural activation was magnified. In other brain nuclei, including regions implicated in imitative behavior such as superior temporal gyrus and superior parietal lobule, L/L subjects experiencing high stress showed increased neural activity responses compared to S allele carriers. Such regions might mediate the stress resilience seen in L/L persons. Moreover, a similar 5-HTTLPR \times life stress effect was seen on absolute baseline brain activity as measured by perfusion imaging (Canli et al. 2006), suggesting that 5-HTTLPR genotype moderates the effect of life stress on stable levels of neural activity.

These studies have transformed the psychiatric genetics field and have compelled researchers to incorporate information about environmental exposure into the study of genetic risk factors. The new approach to human association studies has also had a significant impact on the pre-clinical research (Caspi and Moffitt 2006). For the very first time, researchers applying animal models to study mood disorders have a genetic variant in their hands that under the right environmental conditions is

expected to show significant and reproducible associations with depression-relevant traits. This is a significant advance because until then no reproducible measured genetic risk factor for mood disorders or associated traits existed.

The mouse has become the premier mammalian model organism for genetic studies due to the amenability of its genome to targeted genetic manipulation. However, because the upstream promoter region harboring the 5-HTTLPR variant is not present in rodents, designing an appropriate mouse model of the 5-HTTLPR \times life stress risk factor for depression is not straightforward. This deficit means that studying the polymorphism in mice requires “humanization” of the mouse gene. However, although present gene targeting technology makes it relatively straightforward to produce a constitutive knockout of a gene or to replace a gene with a variant, the need for a selectable marker (typically a neomycin resistance gene) during embryonic stem (ES) cell targeting means it is difficult to seamlessly replace a specific sequence in the mouse genome without leaving behind a mark of the engineering process. Consequently, precise “humanization” of the mouse promoter region is tricky and has so far not been reported. As a compromise researchers have used constitutive 5-HTT knockout mice (Bengel et al. 1998) as an approximative model either in the gene’s homozygous, complete knockout, or its heterozygous, partially reduced, form. Studies on homozygous 5-HTT knockout mice have been extremely helpful in better understanding the physiological function of the transporter, while heterozygous mice are arguably a better model of the human promoter polymorphism because the 50% reduction of 5-HTT mRNA in heterozygous knockouts mimics that are found in 5-HTTLPR S allele carriers when compared to L allele carriers (Lesch et al. 1996; Bengel et al. 1998).

The use of heterozygous mice as a model of 5-HTTLPR, however, remains problematic because it remains unclear how and in what way 5-HTTLPR affects gene expression. Data documenting an effect of 5-HTTLPR on gene expression in humans derive primarily from studies in cultured non-neuronal cell lines (Lesch et al. 1996) and only a few studies have examined 5-HTT gene expression in L and S allele carriers in neuronal cell lines or postmortem brain tissue (Greenberg et al. 1999; Mann et al. 2000; Eley et al. 2004; Sugden et al. 2009). Moreover, autoradiography and positron emission tomography studies using 5-HTT selective ligands have failed to find consistent differences in 5-HTT protein binding between the variants, suggesting a potential differential effect on mRNA and protein expression. One possibility is that 5-HTTLPR controls transcription in a cell-type specific or temporally controlled manner and that these features have masked differences in gene expression. It may be, for example, that 5-HTTLPR controls transcription primarily during brain development, when serotonin is known to have a critical role in brain wiring (Trowbridge et al. 2010; Ferreira et al. 2010) but only weakly in adulthood. More controversially, it is possible that 5-HTTLPR affects 5-HTT expression in only a subset of cells expressing the gene. Such issues could be addressed using humanized mice carrying the L and S alleles. A more faithful mouse model of 5-HTTLPR could also serve as a test platform to understand the transcription factor binding and chromatin remodeling mechanisms that are presumed to mediate the transcriptional effects of this variant and about which little or nothing is known.

2 Mouse Models of the 5-HTTLPR \times Early Stress Risk Factor for Depression

The first study to incorporate measured environmental stress in the study of behavioral phenotypes in 5-HTT knockout mice involved daily exposure to foot shock (Carroll et al. 2007). From postnatal day 7–13, mouse pups were exposed daily to three mild footshocks over a period of 150 s and then tested in adulthood in a battery of anxiety and depression-related behavioral tests (elevated plus-maze, light/dark test, open field, forced swim test). Although 5-HTT knockout mice showed increased avoidance in anxiety tests and increased behavioral despair in the forced swim test, no interaction between genotype and environmental stressor was detected.

Using a similar battery of behavioral tests a more recent study (Carola et al. 2008) showed that levels of maternal care as measured by maternal licking and grooming of pups during the first 2 weeks of life could significantly modulate the effect of heterozygous 5-HTT knockout mutations on anxiety and depression behavior. Mice were raised by mothers that were genetically identical but nevertheless provided high and low maternal care (C57BL/6 \times BALB/c vs. BALB/c \times C57BL/6, respectively). Heterozygous 5-HTT knockouts showed equivalent level of avoidance and behavioral despair as wild-type littermates when exposed to high levels of maternal care, but when exposed to low maternal care showed significantly more avoidance and behavioral despair than controls. Furthermore, heterozygous knockout mice exposed to low maternal care also showed enhanced fear in response to partially conditioned cues, suggesting enhanced cognitive processing of ambiguous threatening cues. This study suggested that novelty avoidance, behavioral despair, and ambiguous fear conditioning in mice may be useful surrogates of risk for depression in humans (Fig. 1). It also suggested that environmental stressors that perturb critical social cues such as maternal care might be better models of childhood maltreatment than physical stressors such as foot shock. It is important to keep in mind, however, that low maternal care in mice and childhood maltreatment in humans act on only partially overlapping stages of brain development (Fig. 1). Because mice are born relatively prematurely compared to primates the first week of life in rodents when maternal care is most pronounced corresponds to the late gestational period in primates (Clancy et al. 2007). Thus, rodent studies using maternal care as a surrogate for childhood experiences must be interpreted in light of the caveat that the neural substrates of these manipulations are not necessarily equivalent across species.

Another study evaluated anxiety behavior in heterozygous and homozygous 5-HTT knockout mice following exposure to adverse olfactory stimuli across both pre- and post-natal periods (Heiming et al. 2009). During pregnancy and lactation mothers were exposed to soiled bedding from the cage of an unfamiliar adult male. Because adult males tend to attack and kill pups that are not their own, the olfactory cues were assumed to be aversive to both the mother and her offspring. Consistent with previous studies, homozygous 5-HTT knockout mice showed

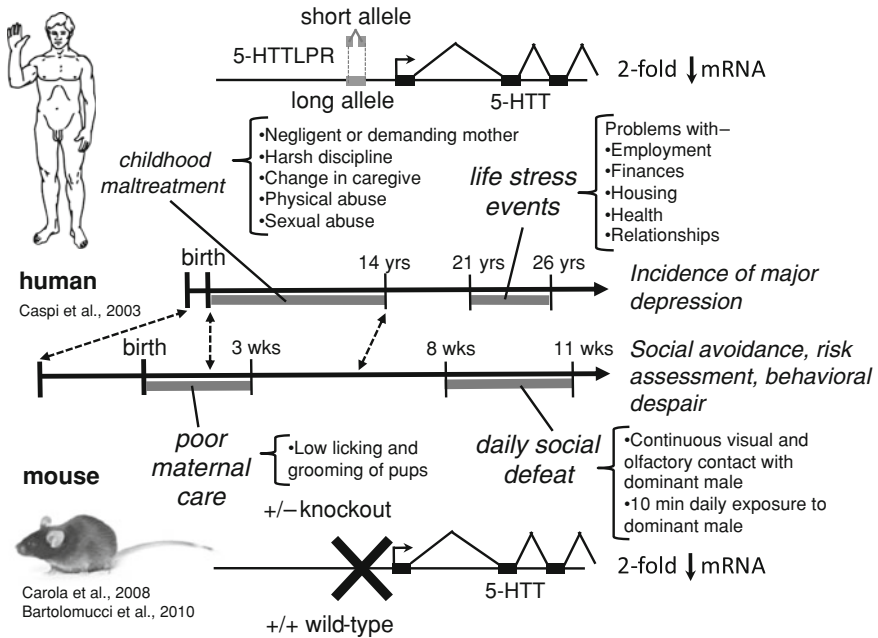


Fig. 1 Mouse models of 5-HTTLPR \times early and adult stress risk factors for depression. In humans, the combination of either childhood maltreatment or adult stress and the 5-HTTLPR S allele results in increased risk for major depression (Caspi et al. 2003). In mice, the 5-HTTLPR S allele was modeled by a heterozygous knockout ($-/+$) mutation in 5-HTT that shows a similar twofold decrease in mRNA expression. Childhood maltreatment was modeled by low maternal care (Carola et al. 2008) and adult stressors were modeled by daily social defeat (Bartolomucci et al. 2010). In both cases the low-expressing heterozygous knockout mice were more susceptible to the effects of stress on anxiety and depression-related behavior, mimicking the human findings. These studies suggest that reduced 5-HTT function is associated with increased responsiveness to environmental stressors in mice and humans (dotted arrows indicate orthologous developmental time periods)

increased anxiety in the open field, elevated plus maze, and dark-light tests. Exposure to unfamiliar male odor was also associated with increased anxiety in all mice. However, the environmental effect was significant in homozygous knockout mice and not in wild-type mice, indicating greater susceptibility of the knockout to threatening olfactory cues than the wild-type. This study confirmed a role for serotonin homeostasis in regulating the long-term effects of early exposure to environmental stressors. Furthermore, these findings are intriguing because they highlight a susceptibility that spans embryonic and early postnatal development and thus points to a relatively non-specific modulation by serotonin of environmental responsiveness during development. It will be important to determine whether environmental pathogens in humans are similarly effective across development in modulating the effect of 5-HTTLPR genotype.

3 Mouse Models of the 5-HTTLPR \times Adult Stress Risk Factor for Depression

A much larger number of studies have tried to model the interaction between 5-HTTLPR genotype and adult stress. The first study used a chronic mild stress procedure involving daily exposure to several stressors (forced swimming, wet bedding, light cycle reversal, unfamiliar cage mate, tilted cage, restraint stress, no bedding material, etc.) each day for 4 weeks (Joeyen-Waldorf et al. 2009). Chronic mild stress was associated with increased anxiety in the novelty suppressed feeding test and this effect was potentiated in both heterozygous and homozygous 5-HTT knockout female mice, while males showed no genotype-by-environment interaction effect. A similar genotype by stress effect was observed following exposure of heterozygous and homozygous 5-HTT knockout mice to a winner or loser experience in a resident-intruder paradigm over a period of 3 days (Jansen et al. 2010). Both winners and losers exhibited increased anxiety behavior in the elevated plus maze, dark-light test, and open field demonstrating an anxiogenic effect of adverse social exposure regardless of outcome. Homozygous, but not heterozygous 5-HTT knockout mice showed exaggerated anxiety when exposed to either repeated winning or losing. These data suggest that 5-HT homeostasis modulates responses to a wider range of social experiences that are previously thought and warrants closer investigation in future human association studies.

Although heterozygous 5-HTT knockout mice did not show interactions with repeated winning or losing in the above study, they did show enhanced response to a continuous psychosocial stress paradigm where mice were exposed to brief daily defeat by an aggressive male mouse with whom they were housed in continuous sensory contact (Bartolomucci et al. 2010), possibly due to the greater intensity of the later stressor. Following 3 weeks of psychosocial stress mice were tested for social interaction toward an unfamiliar male mouse in a novel environment. Stressed mice showed strong avoidance of the unfamiliar mouse, but this effect was significantly greater in heterozygous knockout mice than wild-type littermates. An important feature of this study was the monitoring of behavioral and physiological responses to stress in the home cage on a daily basis. Heterozygous 5-HTT knockout mice showed similar responses to stress as wild-type littermates, including decreased home cage locomotion between encounters, increased body weight, and increased temperature responses to daily social defeat. These data suggest that 5-HTT genotype modulates the generalization of avoidance behavior rather than the direct physiological and behavioral consequences of stress. Such an interpretation is in line with a role of 5-HTT in determining not the physical responses to stress, but in modifying stress coping strategies. Moreover, these findings confirm that a 50% decrease in 5-HTT function is sufficient to modulate the response to environmental stressors if those stressors are sufficiently prolonged or salient. Continuous exposure to psychosocial stressors in particular was most effective in interacting with serotonin homeostasis to increase susceptibility to anxiety and depression behavior.

4 Physiological and Molecular Substrates of the 5-HTT \times Stress Risk Factor in Mice

As discussed above, fMRI studies have identified numerous brain regions whose activity is modulated by 5-HTTLPR genotype and life stress events and which are thus implicated in mediating the effect of this risk factor on behavioral traits. In particular, neural activity in both amygdala and hippocampus was shown to be significantly modulated by 5-HTTLPR \times stress, with S allele subjects showing a positive correlation between life stress events and L/L subjects showing a negative correlation (Canli et al. 2006). Neural activity in the superior temporal gyrus and superior parietal lobule, on the other hand, showed a positive correlation with life stress events in L/L subjects, suggesting a possible role of this structure in the stress resilience of this genotype. In the same study, the authors also presented evidence that resting state brain activity in hippocampus and amygdala as measured while the subjects fixated on a spot was also significantly enhanced in stressed S allele carriers when compared to all other groups. The modulation of resting state brain activity is important as it suggests that serotonin signaling moderates the capacity of stress to reset resting brain activity, and raises the possibility that changes in neural activity homeostasis in selected brain regions may underlie the 5-HTTLPR \times stress risk factor. Unfortunately, this hypothesis has not yet been examined in animal models.

Nevertheless, two mouse model studies did attempt to identify changes in molecular substrates that might underlie the 5-HTT \times stress risk factor. In the first study, where heterozygous 5-HTT knockout mice were shown to be more susceptible to the anxiogenic and depressogenic effects of low maternal care (Carola et al. 2008), molecular substrates were identified in the adult that correlated with the effect of genotype (G), early environment (eE), and genotype \times environment (G \times eE; Table 1). First, levels of GABA-A receptors (as measured by binding to the benzodiazepine flunetrazepam) were reduced in the central nucleus of the amygdala of mice exposed to low maternal care regardless of the genotype. This finding replicated earlier data in rats exposed to low maternal care (Caldji et al. 2003) and suggested that decreased inhibition in this nucleus might underlie the increased risk assessment behavior associated with low maternal care. Second, serotonin turnover as measured by the ratio of the serotonin metabolite 5-hydroxyindole-acetic acid (5-HIAA) to serotonin (5-HT) in the hippocampus was decreased in heterozygous 5-HTT knockout mice regardless of environmental exposure. This finding was consistent with earlier studies showing decreased turnover and serotonin neuron firing in this genotype (Mathews et al. 2004). The absence of an effect of environment on serotonin turnover suggested that stress acts downstream of serotonin homeostasis to affect neural circuit function. Finally, levels of brain-derived neurotrophic factor (BDNF) mRNA in the CA1 region of the hippocampus (but not in other parts of the hippocampus) showed an interacting effect of genotype and environment, with heterozygous 5-HTT knockouts exposed to low maternal care showing the highest BDNF levels. Intriguingly, elevated

Table 1 Physiological and Molecular Correlates of the 5-HTT \times Stress Risk Factor in Mice. Summary of the effects of gene (G), environment (E), and gene-by-environment (G \times E) on molecular substrates as reported by studies measuring anxiety and depression-related behavior in 5-HTT $+/+$ and \pm mice exposed to low maternal care (Carola et al. 2008, 2011) and chronic psychosocial stress (Bartolomucci et al. 2010). Note that molecular substrates following exposure to low maternal care were studied at two time points, postnatal day 10 and adulthood (– no effect; n.d. not determined)

Molecular substrate		Low maternal care		Chronic psychosocial stress
		Adult	Postnatal day 10	
FCtx	5-HT turnover	G	G \times E	G \times E
AMY	GABA-A receptor	E	-	n.d.
HIP	5-HT turnover	G	G	G
	BDNF mRNA	G \times E	E	-
	AMPA receptor	-	G \times E	n.d.

BDNF levels in forebrain are associated with elevated anxiety behavior (Yee et al. 2007) and are a candidate molecular substrate for the elevated neural activity seen in this structure in human 5-HTTLPR S allele carriers exposed to life stress events (Canli et al. 2006). Moreover, genetic variation in BDNF itself moderated the long-term effects of maternal care on anxiety behavior (Carola and Gross 2010). In humans too a non-synonymous variant in BDNF (Val66Met) with reduced functionality is able to reverse the neural activity correlates of associated with the 5-HTTLPR S allele (Pezawas et al. 2008). Consistent with a causal role for these neural substrates in behavior, levels of GABA-A receptor binding, serotonin turnover, and BDNF expression were significantly correlated with anxiety behavior in the mice and estimated to each explain about 15–30% of the variance of relevant behavioral measures (Carola et al. 2008).

A follow-up study by the same group (Carola et al. 2011) investigated the origins of these changes by examining molecular substrates in young mice during the period of maternal care (postnatal day 10). Unlike in adult mice, BDNF mRNA in the hippocampus was elevated in all low maternal care offspring regardless of genotype (Table 1). This finding suggests that the low functioning 5-HTT variant may act to maintain elevated BDNF expression induced by low maternal care. Thus, 5-HTT genotype may not modulate the immediate impact of environment on neurophysiology, but rather to control its perseverance. As a result, 5-HTTLPR S allele carriers might be more vulnerable to repeated stressors and, consequently, recurrent illness, a feature supported by recent epidemiological evidence (Uher et al. 2011). At the same time, levels of excitatory neurotransmitter receptors (of the AMPA class) in the hippocampus at postnatal day 10 showed a G \times eE effect and were elevated in heterozygous 5-HTT knockout mice exposed to low maternal care. These differences did not persist to adulthood (V. Carola, unpublished observations) and thus enhanced excitatory neurotransmission in hippocampus may serve as an immediate substrate for early stress and 5-HTT variation that subsequently triggers long-term G \times eE effects in this or other brain circuits.

Neural substrates of the 5-HTT \times adult stress risk factor were investigated in one study (Bartolomucci et al. 2010). These authors observed that although genotype alone determined serotonin turnover in most brain regions, in the frontal cortex serotonin homeostasis showed a significant G \times E effect, with the lowest serotonin turnover in heterozygous 5-HTT knockout mice experiencing chronic social defeat (Table 1). Intriguingly, serotonin turnover in the frontal cortex was best correlated with levels of 5-HTT protein in the amygdala, suggesting cross-talk between these two connected structures. This finding contrasts with serotonin turnover data from experiments with 5-HTT \times early stress (Carola et al. 2008), where no such interaction was observed. Why frontal cortical serotonin turnover is more plastic in adulthood than in childhood following stress is not clear, but could reflect differences in the predominant circuits engaged by stress at these ages or by the longer time since childhood stress. This difference suggests that the 5-HTTLPR \times early stress and adult stress risk factors are associated with different patterns of neural activity and that these forms of depression may show differential therapeutic responses. It also suggests that, at least following adult stress, altered serotonin homeostasis may directly explain the altered activity and/or connectivity of frontal cortical circuits seen in 5-HTTLPR S carriers by fMRI.

5 Promises of Mouse Models of Gene \times Environment Risk Factors for Clinical Research

Animal models of gene by environment risk factors for mental illness hold several promises for the pre-clinical research aimed at developing new diagnostic markers and therapeutic approaches. One important outcome of a successful animal model is its ability to point out homologous animal and human behavior. Until now, the primary avenue to match animal and human behavioral traits associated with mental illness was pharmacological validation, in which drugs that are used to treat behavioral disorders in humans induce homologous behavioral changes in animals. However, pharmacological validation has several problems. The benzodiazepine class of anxiolytics, for example, is frequently used to validate behavioral tests of anxiety in rodents, and these drugs cause increased exploration of novel environments and reductions in contextual fear (Garner et al. 2009). However, because these drugs act non-selectively to boost GABA-A receptor function throughout the brain, they act on a wide range of behaviors beyond anxiety and just because a particular rodent behavior is modulated by benzodiazepines does not mean it reflects anxiety. In the field of schizophrenia the situation is even less clear since it is not obvious how to measure psychotic symptoms in animals. Some behaviors such as head twitches and scratches selectively induced in mice by hallucinogenics have been reported (González-Maeso et al. 2007), but the relevance of these behaviors to the positive symptoms of schizophrenia remain speculative.

For these reasons, a genetic validation approach using a mouse model incorporating environmental exposure could offer a parallel avenue for the identification

of human–animal behavioral homologs. An excellent example for the use of a genetic validation approach is a mouse engineered to carry a deficiency of a 1.3 Mb region on mouse chromosome 16 whose orthologous region in humans when deleted results in a 30% incidence of schizophrenia (Stark et al. 2008). These mice have deficits in working memory; a negative symptom found in many schizophrenics and electrophysiological recordings in these mice during a working memory task revealed a deficit in connectivity between hippocampus and medial prefrontal cortex, two regions known to contribute to working memory (Sigurdsson et al. 2010). Poor connectivity between these structures is now a candidate for an endophenotype in the wider population of schizophrenics. As this example shows, genetic models offer a powerful approach to validate both behavior and their associated physiological and molecular substrates. Moreover, because genetic models (whether by modeling the gene alone or a gene \times environment risk factor) model the etiology of the disorder rather than its treatment, they are likely to be more specific and informative.

Mouse genetic models have the advantage that current gene targeting technology allows for essentially unrestricted temporal and spatial regulation of transgene expression. Thus, once a genetic model is constructed, follow-up studies can use conditional gene targeting to map the circuitry and time periods involved with a resolution not achievable with pharmacological manipulations. Such approaches then allow for the mapping of G \times E risk factors to specific brain circuitry as a prelude to understanding the cellular and network mechanisms involved. Moreover, genetic manipulation can be used to pinpoint the brain circuitry critical for the processing of stressful environmental stimuli with a specificity not possible with the direct manipulation of the stress itself. In this way, mouse models of G \times E risk factors can help unravel the molecular mechanisms of susceptibility to stress, invariably a major risk factor across all mental illnesses.

In summary, mouse models of the 5-HTTLPR \times stress risk factor for depression have helped to define the rodent orthologs of the environmental stressors and behavioral traits involved in risk for depression. Mouse models have also been able to pinpoint several specific physiological and molecular deficits involved that can now serve to inform clinical research into the origins of major depression. Nevertheless, much still needs to be done to expand on these findings. Additional early stressors (e.g. social defeat, negligence) should be tested for their ability to precipitate depression-related behaviors and determine whether differences between the neural substrates of early and adult stressors are due to their timing or quality. More careful time course analyses are also needed to pinpoint the critical periods for different stressors. These studies will need to be accompanied by physiological, molecular, and anatomical studies aimed at aligning mouse and human development in the postnatal period so as to better understand the human developmental transitions implicated. Work on aligning rodent and primate development during the prenatal period should be used as a model for such research (Clancy et al. 2007).

A more faithful genetic model of the human 5-HTTLPR is needed to help answer outstanding questions about where and when this polymorphism affects

5-HTT expression and the mechanism by which it acts to alter transcription. Conditional genetic and/or pharmacological (Ansgorge et al. 2004) manipulations of 5-HTT will be needed to identify the cell types and developmental periods involved. Pharmacological blockade of 5-HTT has been used to restrict the critical window of 5-HTT activity on depression-related behavior in adulthood to the first 2 weeks of mouse development (Ansgorge et al. 2004). However, it remains to be determined whether the 5-HTT \times stress effects will map to a similar period, particularly as the first weeks of mouse development corresponds to mid-gestation in humans, rather than the postnatal period implicated in human association studies.

Finally, further work on identifying physiological and molecular substrates of the 5-HTT \times stress effects is needed. How is brain activity altered during exposure to stressful or anxiogenic stimuli? Is there evidence for similar widespread effects of the 5-HTT \times stress risk factor on brain activity in mice and humans? What are the serotonin receptors and circuit mechanisms involved in such effects? Are there developmental consequences of the 5-HTT \times stress risk factor on brain wiring that might explain treatment resistance and/or relapse in susceptible individuals? Can novel therapeutic targets be identified in the circuits specifically affected by the 5-HTT \times stress risk factor? And finally, it will be imperative to show that mechanisms identified in rodent studies can be extrapolated back to the clinic so as to develop improved depression medications.

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Behavioral and Pharmacogenetics of Aggressive Behavior

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Abstract Serotonin (5-HT) has long been considered as a key transmitter in the neurocircuitry controlling aggression. Impaired regulation of each subtype of 5-HT receptor, 5-HT transporter, synthetic and metabolic enzymes has been linked particularly to impulsive aggression. The current summary focuses mostly on recent findings from pharmacological and genetic studies. The pharmacological treatments and genetic manipulations or polymorphisms of a specific target (e.g., 5-HT_{1A} receptor) can often result in inconsistent results on aggression, due to “phasic” effects of pharmacological agents versus “trait”-like effects of genetic manipulations. Also, the local administration of a drug using the intracranial microinjection technique has shown that activation of specific subtypes of 5-HT receptors (5-HT_{1A} and 5-HT_{1B}) in mesocorticolimbic

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areas can reduce species-typical and other aggressive behaviors, but the same receptors in the medial prefrontal cortex or septal area promote escalated forms of aggression. Thus, there are receptor populations in specific brain regions that preferentially modulate specific types of aggression. Genetic studies have shown important gene-environment interactions; it is likely that the polymorphisms in the genes of 5-HT transporters or rate-limiting synthetic and metabolic enzymes of 5-HT (e.g., MAOA) determine the vulnerability to adverse environmental factors that escalate aggression. We also discuss the interaction between the 5-HT system and other systems. Modulation of 5-HT neurons in the dorsal raphe nucleus by GABA, glutamate and CRF profoundly regulate aggressive behaviors. Also, interactions of the 5-HT system with other neuropeptides (arginine vasopressin, oxytocin, neuropeptide Y, opioid) have emerged as important neurobiological determinants of aggression. Studies of aggression in genetically modified mice identified several molecules that affect the 5-HT system directly (e.g., Tph2, 5-HT_{1B}, 5-HT transporter, Pet1, MAOA) or indirectly [e.g., BDNF, neuronal nitric oxide (nNOS), α CaMKII, Neuropeptide Y]. The future agenda delineates specific receptor subpopulations for GABA, glutamate and neuropeptides as they modulate the canonical aminergic neurotransmitters in brainstem, limbic and cortical regions with the ultimate outcome of attenuating or escalating aggressive behavior.

Keywords Aggression • Serotonin • Trait • State • Neuropeptides • GABA

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1 Introduction

One of the oldest roots of the neurogenetic analysis of aggressive behavior can be traced to the domestication of feral animals, as illustrated experimentally in the elevated brain levels of serotonin in tame silver foxes (e.g., Popova et al. 1991). No other transmitter system has been more consistently implicated in the neurobiological mechanisms mediating impulsive aggressive behavior than serotonin (Miczek et al. 2002, 2007; Takahashi et al. 2011). Serotonin emerged as the focus in the initial phase of “top-down” genetics of aggressive behavior, when the brains of individuals that were selected for high aggressive traits revealed lower levels of serotonin, its major acidic metabolite and some of the receptor or transporter molecules upon which this amine acts (Brown et al. 1979; Garattini et al. 1967; Linnoila et al. 1983). It continues to be the key transmitter system of interest in the more recent phase of “bottom-up” genetics, when the gene for a specific receptor or transporter was deleted and the behavioral phenotype indicated a higher than normal level of aggressive behavior (Bouwknicht et al. 2001a; Saudou et al. 1994).

The current understanding of serotonergic mechanisms in aggressive behavior has to accommodate two different but interacting sources of influence. Classically, serotonin has been studied for its role in the predisposition to engage in impulsive violent and antisocial behavior. The question of interest continues to be which features of serotonergic transmission—its rate of synthesis, uptake, metabolism, receptor and transporter expression—are characteristic of an aggressive heritable trait that runs in families (Brunner et al. 1993a). It has become clear that the seductively simple serotonin deficiency hypothesis that links low serotonin activity to the propensity for aggressive behavior is being replaced by more sophisticated and detailed schemes. Recent clinical and preclinical data point to important allelic differences in the genes for specific serotonin receptor subtypes, transporter molecules and metabolic enzymes in impulsively aggressive individuals (de Boer and Koolhaas 2005; Lesch and Merschdorf 2000; Miczek et al. 2002, 2007; Nelson and Chiavegatto 2001; Takahashi et al. 2011).

A second role for serotonin is to modulate aggressive behavior by its phasic activity, particularly during the anticipation of aggressive and defensive acts and at the termination of an aggressive bout. Superimposed on the serotonergic tone are transient changes in release, impulse flow and receptor activation that are synchronized with the initiation and termination of bouts of aggressive and defensive acts (Ferrari et al. 2003). Phasic serotonergic activity appears to be linked to bouts of several species-normative consummatory behaviors ranging from feeding, drinking and sexual acts to fighting and to pathological excesses of these activities. Neuroplastic changes in serotonergic pathways from the dorsal raphé neurons to the neo- and paleocortical terminals result from repeated aggressive experiences as reflected in serotonin receptor regulation, firing rate and release. To further our understanding of the interaction between tonic and phasic serotonergic activities ideally requires real-time measurements over the course of a circadian cycle and arranging conditions that provide a challenge behaviorally and neurochemically.

During the last decade, epigenetic mechanisms for the expression of certain genes that encode for serotonergic metabolic enzymes, transporter proteins and receptors have been scrutinized for their role in impulsively violent individuals. Stressful experiences such as abusive maltreatment during a critical developmental period can lead young adults to engage in more impulsive and violent behavior, particularly in those individuals who are characterized by the expression of a certain allelic variety of Monoamine Oxidase A, an important metabolic enzyme for serotonin (Caspi et al. 2002).

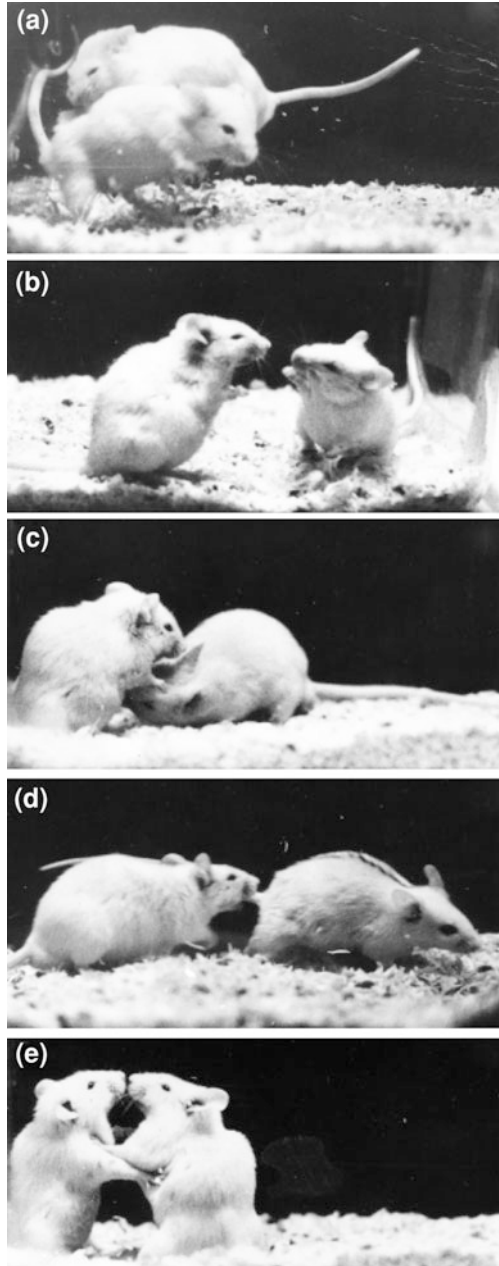
The last decade has seen also a concerted effort to translate more readily between preclinical data and clinical observations, and vice versa. This is evident from both an increasing focus on escalated, atypical forms of aggressive behavior in animal models, and by efforts to define aggressive behaviors using operational and functional definitions and assessments in clinical settings (DSM-V).

2 Definition and Measurement of Aggression

Most research on the neurogenetics of serotonin and aggression in both human and veterinary medicine seeks to understand and control pathological aggression (Volavka et al. 2005), while laboratory experiments using animal models typically deal with adaptive, species-typical aggressive behavior. When studying aggression in animals, it is important to consider the ethological significance of the behavior, including its phylogenetic and ontogenetic development and the functions it serves for individuals and the species. Aggressive signals, postures and acts are used to help an animal obtain specific goals, or to defend against threats actual attacks (Miczek et al. 2002). These behaviors occur when individuals compete for food, water and other resources necessary for survival and reproduction (resident-intruder aggression), when they defend their territory or offspring (territorial and maternal aggression), or in response to frustration or fear (Miczek et al. 2001). Engaging in aggressive behavior is often beneficial to the individual and the species. For example, dominance hierarchies are established and maintained through confrontations between rival males (Fig. 1), and so-called isolation-induced aggression mimics many elements of the behavior used by resident males to exclude other breeding males from their home territory and their mates (Brain and Benton 1979; Miczek et al. 2001, Table 1). However, it should be noted that isolated housing results in social avoidance in a large proportion of a sample of mice, while aggressive behavior is seen in varying numbers of isolated animals depending on species and strain.

Aggressive behavior can be classified as offensive or defensive based upon the distal and proximal conditions that precipitated it, the topography of the behavior, and its consequences (Blanchard and Blanchard 1977; Brain 1979). Defensive behaviors occur in response to threatening or fear-inducing stimuli and often result in escapes (Brain 1979). In male rodents, specific defensive behaviors include escape, freezing, defensive postures and threats, which occur in response to attacks by either predators or conspecifics (Blanchard et al. 2003; Pellis and Pellis 1988; Rasia-Filho

Fig. 1 Mouse agonistic behavior. Behaviors of resident and intruder mice engaged in an aggressive confrontation: **a** the resident leaps and bites the intruder as the intruder attempts to escape; **b** the resident (*right*) threatens as the intruder (*left*) holds a defensive upright posture; **c** the resident investigates the intruder's anogenital region; **d** the resident pursues the fleeing intruder; **e** both resident and intruder engage in a mutual upright defensive posture. *Reprinted with permission from Miczek and O'Donnell (1978)*



et al. 2008). Postpartum female rodents engage in maternal aggression, which includes both defensive and offensive elements, to protect their newborn offspring from male intruders (Lucion and de Almeida 1996; Parmigiani et al. 1998).

Table 1 Types of aggressive behavior in preclinical models

A. Species-typical aggressive behavior				
	Situational or experimental variable	Agonistic behavioral measurements	References	
Dominant resident , mainly in primates and rats	In a stable colony where dominance hierarchy is to be established and maintained	Frequency and duration of agonistic acts, postures and displays including displacement, threat, pursuit and fight	Bennett et al. (2002) Bernstein et al. (1974) Fairbanks et al. (1999) Higley et al. (1996) Mehlman et al. (1994) Steiniger (1950) Vandenbergh (1967) Crawley et al. (1975) Eibl-Eibesfeldt (1950) Miczek and O'Donnell (1978) Van Oortmerssen and Bakker (1981) Haney et al. (1989) Hurst (1987) Lonstein and Gammie (2002) Noirot et al. (1975) Sgoifo et al. (1992)	
Territorial resident (<i>resident-intruder</i> test), mainly in mice and hamsters	Requires an established territory. In the laboratory, home-cage of experimental male (<i>resident</i>) where it is pair-housed with a female. A male stimulus animal (<i>intruder</i>) that is group housed with other males is introduced into resident's cage	Frequency of attack bite, sideways threat, tail-rattle, pursuit, upright posture. Latency to the first bite		
Maternal aggression , mainly in rats, mice and hamsters	Home-cage of lactating females from postpartum day 1-7. Either male or female of intruder is introduced into dam's cage	Frequency of attack bite (especially directed at the snout and the face), sideways threat, tail-rattle, pursuit, upright posture. Latency to the first bite		
Female aggression , mainly in primates and rodents	Dominance hierarchy among female monkeys. In the laboratory settings, female rodent pair-housed with a breeding male. Sexually mature female is introduced as an intruder	Harrassing attacks by dominant female, Frequency of attack bite, sideways threat, tail-rattle, pursuit, upright posture. Latency to the first bite	DeBold and Miczek (1981) Palanza et al. (2005) Smuts (1986) Zitzman et al. (2005)	
Isolation-induced aggression (similar to territorial aggression)	Male isolated for 24 h to 8 weeks prior to <i>resident-intruder</i> encounter	Frequency of attack bite, sideways threat, tail-rattle, pursuit, upright posture. Latency to the first bite	Cairns and Nakelski (1971) Malick (1979) Valzelli and Bernasconi (1979) Yen et al. (1959)	

(continued)

Table 1 (continued)

B. Escalated aggressive behavior		References	
	Situational or experimental variable	Agonistic behavioral measurements	
Alcohol-heightened aggression , mainly in rats and mice	Ethanol (1.0 g/kg) is injected intraperitoneally or orally or self-administered before the resident-intruder encounter	Frequency of attack bite, sideways threat, tail-rattle, pursuit, upright posture. Latency to the first bite Targets of attack bites (head, dorsal areas, ventral areas, appendages)	Blanchard et al. (1987) Miczek and de Almeida (2001) Miczek et al. (1992, 1998a) Peeke and Figler (1981)
Social provocation (instigation), mainly in hamsters, mice, and rats	A resident male is exposed to another male behind a protective screen in his home-cage prior to the resident-intruder encounter		Fish et al. (1999) Heiligenberg (1974) Potegal (1991) Potegal and Tenbrink (1984)
Frustration-heightened aggression	A resident male is positively reinforced. The reinforcement is abruptly omitted before the resident-intruder encounter		Berkowitz (1993) De Almeida and Miczek (2002)
Aggression induced by low glucocorticoids	Resident rats are adrenalectomized and implanted with a low-dose corticosterone pellet		Haller et al. (2001)
Affective defense ("rage"), mainly in cats	Electrical stimulation (0.2–0.8 mA, 63 Hz, 1 ms per half cycle duration) delivered in medial hypothalamus or midbrain periaqueductal gray	Hissing, arching of the back, retraction of the ears, piloerection, unsheathing of the claws, papillary dilatation and paw striking	Hess (1954) Leyhausen (1979) Stegel et al. (1999)

“Violence” is a controversial concept among ethologists. The term has been used to describe escalated, pathological and abnormal forms of aggression characterized by prolonged and frequent attack bites and aggressive behavior with brief latencies (Miczek et al. 2002, 2003). The differences are quantitative rather than qualitative, with violence marked by shorter attack latencies and higher frequencies and longer durations of fighting than adaptive aggression. Violence has been described to be qualitatively different from adaptive aggression. For instance, attack bites aimed at vulnerable parts of the opponent’s body are considered abnormally aggressive, when adaptive aggression consists of less-injurious bites directed at the intruder’s back and flanks (Haller et al. 2005). Additional qualitative distinctions that have been proposed include context-independent attacks, which are directed at an opponent regardless of its sex, responsiveness (free-living/ anaesthetized/dead) or the test environment (home/neutral cage) (Koolhaas 1978), and lack of ritualistic behaviors, quantified as attack/threat (A/T) ratios (Haller et al. 2005). Therefore in principle “violence” could refer either to quantitatively escalated or hyper-aggression, or to qualitatively abnormal forms of aggression, or even rarely to aggression that is both escalated and abnormal [for review see Natarajan and Caramaschi (2010)].

Human and non-human aggressive behaviors have some common features, but most animal aggression is less complex. Social norms establish boundaries for what is accepted as appropriate aggressive behavior, but the array of inappropriate interpersonal behaviors classified as violence is a serious social and mental health issue (Ferris et al. 2008). Numerous psychiatric disorders defined in the DSM-IV R and the new DSM-V (scheduled for publication in May 2013), including schizophrenia, brief reactive psychosis, anxiety disorder, adjustment disorder, impulse control disorder, antisocial personality disorder, attention deficit disorder, mania/depression, PTSD, autism and substance abuse, specify aggressive behavior among their symptoms (Boles and Miotto 2003; Raine 2002; Rydén et al. 2009; Volavka et al. 2005).

It can be useful to classify human aggressive behavior as either defensive, premeditated or impulsive-hostile in nature (Stoff and Vitiello 1996; Vitiello and Stoff 1997). The premeditated (e.g., predatory and instrumental) and impulsive forms of aggression are especially likely to be diagnosed as pathological and in need of treatment. Impulsive, but not premeditated, aggression is linked to biological and environmental causes, as well as pharmacological or psychological treatment response factors, by a growing body of empirical data (Coccaro et al. 2010).

Aggression as a behavioral state in humans has usually been measured by provoking subjects in competitive situations with fictitious opponents and then giving them opportunities to engage in quantifiable responses that are defined as aggressive [see Table 2, for review see Miczek et al. (2002)]. Human aggression as a trait is assessed using psychometric measures including inventories, questionnaires and scales. The role of 5-HT in human aggression has been successfully investigated using such laboratory techniques (Table 2), but relating laboratory indices of aggression to actual violence and aggression outside the laboratory remains a critical challenge for such approaches; identifying subtypes

of human aggression with psychometric and laboratory methods is also difficult. The psychometric instruments used to differentiate between individuals with contrasting aggressive traits such as the impulsive–reactive–hostile–affective subtype versus the controlled–proactive–instrumental–predatory subtype (Stoff and Vitiello 1996) are summarized in Table 2.

3 Aggressive “Trait” Versus “States”

A frequently reiterated theory, based on early clinical and preclinical studies, links impulsive, hostile and violent behavior to a serotonin deficiency (Brown and Goodwin 1986; Goldman et al. 1992; Lesch and Merschdorf 2000; Linnoila and Virkkunen 1992; Mann 1999; Valzelli 1977). Individuals exhibiting such behavior may benefit from pharmacological treatments aimed at inhibiting 5-HT transporters (e.g., SSRIs such as fluoxetine or citalopram), activating 5-HT_{1A} receptors (e.g., buspirone) or blocking 5-HT_{2A} receptors (e.g., risperidone). Acute treatment with these drugs induces phasic changes in 5-HT function that are associated with their transient anti-aggressive effects. In vivo microdialysis allows transient changes in extracellular 5-HT levels to be monitored in anticipation of, during, and after aggressive encounters in rats. One study reported reduced 5-HT levels in the prefrontal cortex during and after the aggressive confrontation, while no changes were detected in the nucleus accumbens, another terminal region (Van Erp and Miczek 2000, Fig. 2). By contrast, chronic treatment with these anti-aggressive compounds may promote as yet undefined neuroadaptive changes in 5-HT function such as autoreceptor desensitization, which may in turn be associated with the emergence of therapeutic effects.

On the other hand, aggression as a “trait” is the focus of genetic studies. While these aggressive traits are clearly polygenic, it is remarkable that several studies have found an interaction between genotypes such as TPH2, MAO-A and 5-HTT polymorphisms and environmental triggers such as social stress underlying an increased likelihood of violent outbursts (see below). For example, a SNP in TPH2 gene (A2051C) has been linked to aggressive behavior in rhesus monkeys. Monkeys with the AA/AC genotype that were reared without their mother (peer-reared) showed increased aggressive acts compared to those with a CC genotype, but the difference disappeared when infants of both genotypes were reared by their mothers (Chen et al. 2010). This review will focus on the interaction between salient environmental events and genes and the subsequent effects on aggressive behaviors.

Gene–gene interactions are also of interest and need to be explored. For example, Passamonti et al. (2008) showed interactions between 5-HTT and MAOA polymorphisms that affected the activity of the anterior cingulate cortex, a brain area that has been implicated in impulsivity, including impulsive aggression. Many other genes may have subtle effects on aggressive phenotypes, and stronger effects may emerge as a result of complex epistatic interactions between those

Table 2 Experimental protocols for assessing 5-HT effects on human aggressive behavior

Experimental manipulations	Measurement	Trait/state	References
A. Experimental manipulations			
Experimental manipulation			
Aggressive responses toward a competitor are measured in the form of electric shock settings	Activate buttons at 5–10 settings, each corresponding to a different intensity or duration of electric shock	State	Buss (1961) Godlaski and Giancola (2009)
A fictitious instigator or competitor is the target of aggressive responses that are measured in the form of electric shock deliveries	Setting of electric shock level on a scale from 1–10	State	Chermack and Giancola (1997) Taylor (1967)
The subjects are provoked by having points subtracted in a competitive task. The point losses are attributed to a fictitious opponent, but are actually random. Subjects responded by retaliation of point subtractions (=aggressive responses)	Number of point subtractions from a fictitious competitor	State	Cherek and Heistad (1971) Cherek and Lane (1999) Gowin et al. (2010)
Aggression was defined as delivery of electric shocks to a fictitious opponent	Uses a modified version of the Buss aggression machine. Setting of shock level on a scale from 1–5	State	Giancola et al. (2009) Zetchner and Pihl (1979)
B. Psychometric inventories			
Psychometric assessment	Instrument	Trait/state	References
Aggression, impulsivity and hostility are measured by Minnesota multiphasic personality inventory (MMPI)	Inventory	Trait	McKinley et al. (1948) Nagtegaal and Rassin (2004)

(continued)

Table 2 (continued)

Psychometric assessment	Instrument	Trait/state	References
Buss–Durkee hostility inventory (BDHI), a self-rating scale of anger and hostility. Sixty six items with false/true answers; also contains seven scales: assault, indirect aggression, irritability, negativism, resentment, suspicion and verbal aggression	Inventory	Trait	Buss and Durkee (1957)
Anger and anxiety are measured by state–trait anger expression inventory (STAXI)	Inventory	State/trait	Kim et al. (2009b) Spielberg et al. (1973)
Aggression is measured by beck anxiety inventory and beck depression inventory	Inventory	Trait	Beck et al. (1961) Lamar et al. (2009)

genes (Miczek et al. 2001). In the past 15 years, most rodent studies on genetics and aggressive behavior have used conventional knockout techniques, in which the expression of a gene is completely deleted, affecting the whole body through all developmental stages and inducing compensatory changes in other genes (trait-like change; see Table 3). Newer, more subtle methods, including conditional knockout, viral vector microinfusion, and drug-inducible knockout techniques, can produce transient and local changes in gene expression, allowing the study of more “phasic” changes in gene expression and how they influence aggression. Such studies may explain some of the discrepancies in the results from previous genetic and pharmacological studies of 5-HT function and aggression.

4 5-HT Receptors

Considerable evidence suggests that serotonin receptors regulate aggressive behaviors in various animal species. Among the multiple 5-HT receptor subtypes, it is mainly the first two families of serotonin receptors (5-HT₁ and 5-HT₂) which have been studied in regard to their role on aggression (Miczek et al. 2002; Olivier 2004). There is some, but less, information on the involvement of 5-HT₃ receptors on aggressive behaviors (McKenzie-Quirk et al. 2005; Ricci et al. 2004; Rudissaar et al. 1999). Further development of adequate pharmacological tools that can activate or inhibit a certain subtype of 5-HT receptor specifically is required to study the role of other receptor subtypes (e.g., 5-HT₅, 6, 7, 1e, 1f) on aggression.

4.1 5-HT₁ Family

4.1.1 Pharmacological Approach

The 5-HT_{1A} receptor partial agonist buspirone has been used clinically to reduce general anxiety. It was shown that buspirone also reduces aggressive behavior in mentally retarded patients (Kavoussi et al. 1997; Ratey et al. 1991), and this compound has been used for the management of aggressive outbursts associated with neuropsychiatric disorders in adults and children (Connor and Steingard 1996; Pabis and Stanislav 1996). Similar findings have been reported in preclinical studies; systemic administration of 5-HT_{1A} receptor agonists (e.g., 8-OH-DPAT, repinotan, alnespirone) dose-dependently decrease aggressive behaviors in a wide range of animal species, including fish, amphibians, birds, rodents, guinea pigs and non-human primates (Bell and Hobson 1994; Blanchard et al. 1988; Clotfelter et al. 2007; de Boer et al. 1999; de Boer and Koolhaas 2005; Dompert et al. 1985; Haug et al. 1990; Joppa et al. 1997; Lindgren and Kantak 1987; McMillen et al. 1988; Miczek et al. 1998b; Muehlenkamp et al. 1995; Nikulina et al. 1992; Olivier et al. 1992; Sanchez et al. 1993; Sperry et al. 2003; Ten Eyck 2008; Tompkins

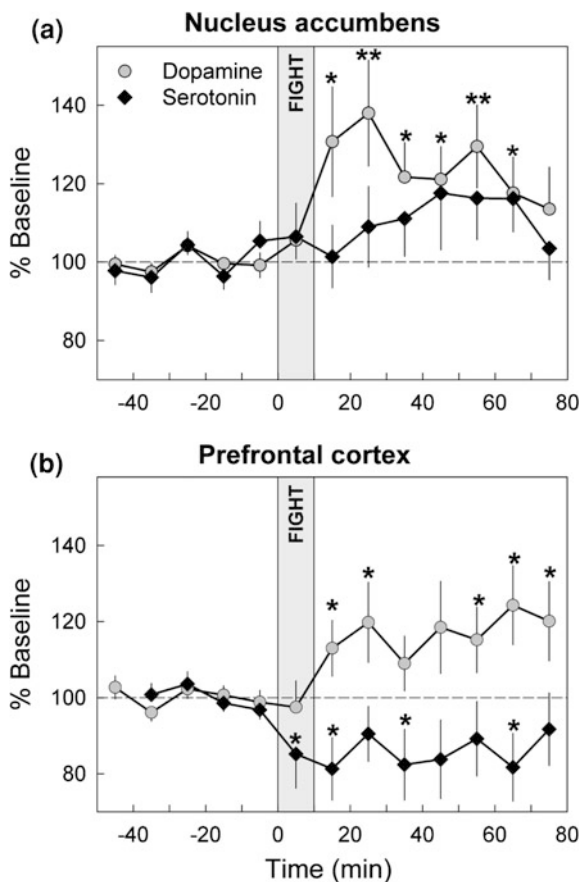


Fig. 2 Dopamine and serotonin during aggression. Measurements of extracellular dopamine and serotonin via *in vivo* microdialysis in resident male rats before, during and after a confrontation with an intruder. **a** In the nucleus accumbens (*top panel*), dopamine levels (*gray circles*) rise and remain elevated after the confrontation, while serotonin levels (*black diamonds*) do not significantly change. **b** In the prefrontal cortex (*bottom panel*), dopamine levels rise after the confrontation, while serotonin decline and remain lower after the confrontation. Samples were collected every 10 min and levels are expressed as mean percent of baseline \pm SEM. Baseline was measured for 50 min before the fight. The vertical *light gray bar* indicates the occurrence of the 10-min fight. *Asterisks* and *double asterisks* represent significant differences from baseline (*dashed line*) at the $p < 0.05$ and 0.01 levels, respectively. *Reprinted with permission from Van Erp and Miczek (2000)*

et al. 1980). One exception are fruit flies (*Drosophila melanogaster*), as they showed increased aggressive behavior after 8-OH-DPAT treatment (Johnson et al. 2009). Selective antagonists of 5-HT_{1A} receptors such as WAY-100635 successfully reversed the effect of 5-HT_{1A} agonists, while the administration of the antagonist by itself did not show any effect on aggression (de Boer and Koolhaas 2005; Mendoza et al. 1999; Miczek et al. 1998b). Notably, in laboratory studies the anti-aggressive effects of most of 5-HT_{1A} agonists are accompanied by nonspecific

Table 3 Genes and aggressive behavior in mice

Gene	Abb	Chr	Background strain (generations of backcross)	Type of aggression	Effects	Serotonin function	References
Plasmacytoma expressed transcript 1	Pet1 (Fev)	1	Mix C57BL/6 and 129 Sv	Isolation-induced resident aggression	Increased	90% reduction of brain 5-HT	Hendricks et al. (2003)
Arginine vasopressin receptor 1B	V1bR	1	Mix C57BL/6 and 129/SvJ	Isolation-induced aggression	Suppressed		Wersinger et al. (2002)
Adenosine A1 receptor	A1AR	1	Mix C57BL and 129/OlaHsd	Neutral cage aggression	Suppressed		Gimenez-Llort et al. (2002)
Regulators of G protein signaling 2	Rgs2	1	C57BL/6J (N5)	Social dominance test	Suppressed		Oliveira-dos-Santos et al. (2000)
v-abl Abelson murine leukemia viral oncogene homolog 2 (Abelson-related gene)	Arg	1	Mix C57BL/6 and 129/SvJ	Resident aggression	Suppressed		Koleske et al. (1998)
Glutamic acid decarboxylase 2	GAD ₆₅	2	Mix C57BL/6 and CBA2	Isolation-induced resident aggression	Suppressed		Stork et al. (2000)
Calcium channel, voltage-dependent, N type, α 1B subunit	Cav2.2	2	Mix C57BL/6J and 129S4/SvJae	Isolation-induced resident aggression	Increased	Increased hypothalamus 5-HT	Kim et al. (2009a)

(continued)

Table 3 (continued)

Gene	Abb	Chr	Background strain (generations of backcross)	Type of aggression	Effects	Serotonin function	References
Dopamine β -hydroxylase	Dbh	2	Mix C57BL/6J and 129/SvEv	Isolation-induced resident aggression	Suppressed		Marino et al. (2005)
Brain-derived neurotrophic factor [\pm]	BDNF	2	C57BL/6J (>N10)	Isolation-induced resident aggression	Increased	Decreased brain 5-HT	Lyons et al. (1999)
β 2-microglobulin	β 2 m	2	129S2/SvPas (Mix C57BL/6J?)	Resident aggression	Suppressed		Loconto et al. (2003)
Oxytocin	Oxt	2	Mix C57BL/6J and 129SvEv	Isolation-induced resident aggression	Increased		Winslow et al. (2000)
Membrane metallo endopeptidase (enkephalinase)	NEP	3	Mix C57BL/6J and 129 Sv	Resident aggression	Increased		DeVries et al. (1997)
Cannabinoid receptor 1	CB1	4	CD1 (N15)	Isolation-induced resident aggression	Increased ^a		Fischer et al. (2000)
Preproenkephalin	Enk	4	Mix CD1 and 129	Isolation-induced resident aggression	Increased ^a		Martin et al. (2002)

(continued)

Table 3 (continued)

Gene	Abb	Chr	Background strain (generations of backcross)	Type of aggression	Effects	Serotonin function	References
Endothelial nitric oxide synthase	eNOS	5	Mix C57BL/6 and 129 Sv	Resident aggression	Suppressed	Increased 5-HT turnover	Demas et al. (1999)
Interleukin-6	IL-6	5	Mix C57BL/6, 129/SvEv	Neutral cage aggression Isolation-induced resident aggression	Suppressed Increased ^b	No difference in brain 5-HT concentration	Alleva et al. (1998)
Adrenergic receptor, $\alpha 2c$	Na $\alpha 2c$	5	C57BL/6J (N7)	Isolation-induced resident aggression	Increased		Sallinen et al. (1998)
Neuronal nitric oxide synthase	nNOS	5	Mix C57BL/6J, 129 Sv, DBA2	Resident aggression Maternal aggression	Increased Suppressed	Reduced brain 5-HT turnover	Nelson et al. (1995) Gammie and Nelson (1999)
Acetylcholinesterase	AChE	5	129S6/SvEvTac	Home-cage hierarchy	Suppressed		Duysen et al. (2002)
Adenylate cyclase activating polypeptide 1 receptor 1	PAC1	6	Mix C57BL/6J and 129 Sv	Resident aggression	Suppressed		Nicot et al. (2004)
Tachykinin receptor 1	NK-1r	6	Mix C57BL/6 and 129 Sv	Isolation-induced resident aggression	Suppressed		De Felipe et al. (1998)
A cluster of vomeronasal receptor genes	VIR α, β	6	129/SvEv	Maternal aggression	Suppressed		De I Punta et al. (2002)

(continued)

Table 3 (continued)

Gene	Abb	Chr	Background strain (generations of backcross)	Type of aggression	Effects	Serotonin function	References
Oxytocin receptor	Oxtr	6	Mix C57BL/6 and 129 Sv	Isolation-induced aggression	Increased		Takayanagi et al. (2005)
Histamine receptor H1	H1	6	Mix C57BL/6J and 129	Cage-mate injury Isolation-induced resident aggression	Increased Suppressed ^b	Increased 5-HT turnover	Yanai et al. (1998)
Amyloid β (A4) precursor protein-binding, family A, member 2	X11L	7	C57BL/6	Competitive feeding	Subordinate	Increased Hypothalamus 5-HT	Sano et al. (2009)
Transient receptor potential cation channel, subfamily C, member 2	TRP2	7	Mix C57BL/6J and 129Sv	Resident aggression	Suppressed		Stowers et al. (2002)
Neuropeptide Y receptor Y1	Y1	8	Mix C57BL/6 and 129SvJ	Resident aggression	Increased	Reduced TPH mRNA expression in the raphe nuclei	Karl et al. (2004)
Prostaglandin E receptor 1 (subtype EP1)	EP1	8	C57BL/6 (N5)	Neutral cage aggression	Increased	No difference in 5-HT turnover	Matsuoka et al. (2005)
Norepinephrine transporter	NET	8	Mix C57BL/6J and 129SvJ	Isolation-induced resident aggression	Increased ^a		Haller et al. (2002)
Neural cell adhesion molecule 1	NCAM1	9	C57BL/6J (>N5)	Isolation-induced resident aggression	Increased		Stork et al. (1997)

(continued)

Table 3 (continued)

Gene	Abb	Chr	Background strain (generations of backcross)	Type of aggression	Effects	Serotonin function	References
Aromatase (Cyp19a1)	Ar	9	Mix C57BL/6 and 129S/SvEv	Resident aggression toward female	Suppressed		Matsumoto et al. (2003)
5-hydroxytryptamine (serotonin) receptor 1B	5-HT _{1B}	9	129S2/SvPas	Resident aggression	Increased	Deleted 5-HT _{1B} receptor expression	Saudou et al. (1994)
Estrogen receptor- α	ER α	10	Mix C57BL/6J and 129	Maternal aggression	Increased		Brunner and Hen (1997)
Fyn tyrosine kinase	Fyn	10	Mix C57BL/6 and CBA	Resident aggression	Suppressed		Ogawa et al. (1998b)
				Female aggression	Increased		Ogawa et al. (1998a)
				Isolation-induced resident aggression	Suppressed		Miyakawa et al. (2001)

(continued)

Table 3 (continued)

Gene	Abb	Chr	Background strain (generations of backcross)	Type of aggression	Effects	Serotonin function	References
Nuclear receptor subfamily 2, group E, member 1	Nr2e1	10	C57BL/6J (> N6)	Resident aggression	Increased		Young et al. (2002)
Adenosine A2a receptor	A2AR	10	CD1 (N4)	Isolation-induced resident aggression	Increased		Ledent et al. (1997)
Tryptophan hydroxylase 2	Tph2	10	FVB/N (N7)	Home-cage injury	Increased	Reduced brain 5-HT	Alenina et al. (2009)
Glutamate receptor, ionotropic, AMPA1 ($\alpha 1$)	GluR-A	11	C57BL/6J (N5)	Isolation-induced aggression	Suppressed	No difference in brain 5-HT level	Vekovischeva et al. (2004)
5-hydroxytryptamine (serotonin) transporter	SERT	11	C57BL/6J (N8)	Neutral cage aggression	Suppressed		
Estrogen Receptor- β	ER β	12	Mix C57BL/6J and 129	Isolation-induced resident aggression	Suppressed	Increased extracellular 5-HT	Holmes et al. (2002)
Dopamine transporter	DAT	13	Mix C57BL/6J and 129SvJ	Resident aggression	Increased ^a		Ogawa et al. (1999)
5-hydroxytryptamine (serotonin) receptor 1A	5-HT _{1A}	13	129S1/Sv	Dyadic encounter aggression	Increased		Rodriguez et al. (2004)
Catechol-O-methyltransferase 1 [\pm]	COMT	16	Mix C57BL/6J and 129SvJ	Resident aggression	Suppressed	Deleted 5-HT _{1A} receptor expression	Zhuang et al. (1999)
				Neutral cage aggression	Increased	No difference in brain 5-HT level	Gogos et al. (1998)

(continued)

Table 3 (continued)

Gene	Abb	Chr	Background strain (generations of backcross)	Type of aggression	Effects	Serotonin function	References
Calcium/calmodulin-dependent protein kinase II alpha [\pm]	α CaMKII	18	Mix C57BL/6, 129/OU, BALB/c	Defensive aggression	Increased	Reduced 5-HT release in the dorsal raphe nucleus	Chen et al. (1994)
Melanocortin-5 receptor	MCR5R	18	C57BL/6 (>N7)	Neutral cage aggression	Suppressed		Morgan et al. (2004)
Monoamine oxidase A	MAOA	X	C3H/HeJ	Resident aggression	Increased	Increased brain 5-HT up to ninefold	Cases et al. (1995)
Cyclic nucleotide-gated channel a2	Cnga2	X	Mix C57BL/6J and 129SvEv	Cage-mate injury	Increased		
Guanosine diphosphate (GDP) dissociation inhibitor 1	Gdi1	X	C57BL/6J (N5)	Resident aggression	Suppressed		Mandiyan et al. (2005)
				Isolation-induced resident aggression	Suppressed		D'Adamo et al. (2002)
Androgen receptor ^c	AR	X	C57BL/6 and 129SvEv	Isolation-induced resident aggression	Suppressed ^b		Raskin et al. (2009)

[\pm] Data obtained from heterozygote of knockout mouse, ^a behavioral change only at the first encounter, ^b behavior change after repeated exposure, ^c Nestine-Cre-LoxP conditional knockout mice that selectively lack AR expression in the nervous system

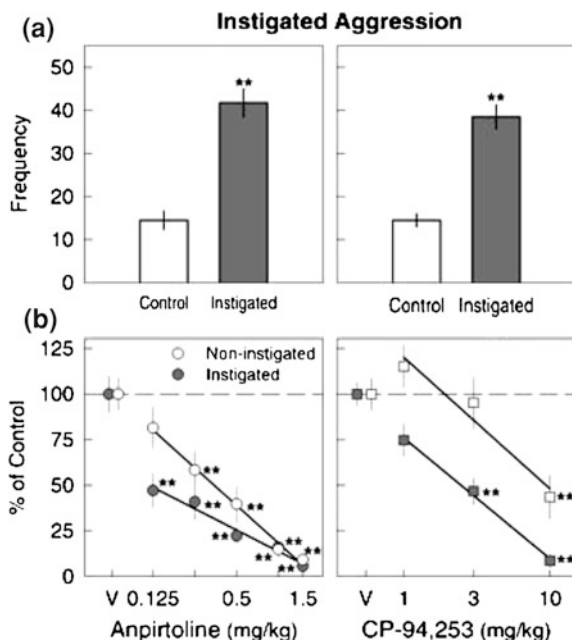


Fig. 3 **a** Effects of social instigation on aggressive behavior by a resident mouse toward a male intruder. Bars represent the mean frequency \pm SEM (vertical lines) of attack bites under control (light gray) and instigated (dark gray) conditions. Asterisks denote statistical significance from control (double asterisks $P < 0.01$). **b** Preferential reduction of instigated aggressive behavior by the 5-HT_{1B} agonist anpirtoline (left panel, filled circles) and CP-94,253 (right panel, filled squares). Symbols represent the mean frequency of attack bites, expressed as a percentage of vehicle (V) baseline, \pm SEM. Light gray symbols represent non-instigated fighting and dark gray symbols represent instigated levels of fighting. Asterisks denote significance from vehicle baseline ($P < 0.05$). Adapted from Fish et al. (1999) and de Almeida and Miczek (2002)

behavioral side effects including sedation, motor inactivity, stereotypic behavior or reduced social interest (de Boer and Koolhaas 2005; Miczek et al. 1998b; Olivier et al. 1995). However, some 5-HT_{1A} agonists (i.e., alnespirone and S-15535) reduced aggressive behavior specifically without changing the other non-aggressive behaviors, at least in a wild-derived rat strain (de Boer et al. 1999, 2000; de Boer and Koolhaas 2005). These compounds are suggested to have different effects on 5-HT receptors on presynaptic and postsynaptic terminals (de Boer and Koolhaas 2005), and thus it is possible that a subpopulation of 5-HT_{1A} receptors on which those compounds acts is involved in anti-aggressive effect specifically.

The 5-HT_{1B} receptor agonists seem more specific in their anti-aggressive effect than 5-HT_{1A} agonists. In mice and rats, the systemic administration of 5-HT_{1B} agonists (e.g., CP-94253, CP-93129, CGS-12066B) reduces aggressive behavior without sedation, or motor or sensory impairment (de Almeida et al. 2001a; de Almeida and Miczek 2002; de Boer and Koolhaas 2005; Fish et al. 1999; Miczek et al. 2002, 2004; Mos et al. 1993; Olivier et al. 1990; Olivier 2004, Fig. 3).

These effects were antagonized by 5-HT_{1B/1D} antagonist GR-127935, further confirming that the anti-aggressive effects of these compounds were mediated by 5-HT_{1B} receptors (de Boer and Koolhaas 2005). However, there are no clinically approved drugs that target 5-HT_{1B} receptors. There is an amino acid difference in the binding domain of 5-HT_{1B} receptors of humans and rodents, and therefore the pharmacological sensitivity and specificity of 5-HT_{1B} agonists in rodents may not compare with those in humans (Olivier 2004).

The precise functions and sites of action for the anti-aggressive effects of 5-HT_{1A} and 5-HT_{1B} receptors still remain to be resolved. One site of inhibitory action for 5-HT is the 5-HT₁ autoreceptors that are localized at either the somata or the synaptic terminal of serotonin neurons. Stimulation of 5-HT₁ autoreceptors inhibits serotonergic neural activities and therefore reduces 5-HT impulse flow and release. On the other hand, 5-HT₁ receptors are also localized at the postsynaptic terminal as heteroreceptors at the projection sites of serotonin neurons. By contrast, the effect of agonists that act on 5-HT₁ heteroreceptors can be interpreted as increasing 5-HT neurotransmission.

Microdialysis studies have shown that both systemic and intra-raphé administration of 5-HT_{1A} and 5-HT_{1B} agonists decreased extracellular levels of 5-HT in the forebrain areas including striatum, hippocampus and frontal cortex (Adell et al. 2001; Bonvento et al. 1992; De Groote et al. 2003; Dekeyne et al. 2000; Gobert et al. 1998; Hjorth and Sharp 1991; Johnson et al. 2001; Knobelmann et al. 2000; Kreiss and Lucki 1994; Sprouse and Aghajanian 1987). These data suggest that the inhibition of 5-HT release by 5-HT_{1A} and 5-HT_{1B} agonists is mediated by the 5-HT₁ autoreceptors. Note that these findings suggest that compounds which decrease 5-HT neurotransmission concurrently reduce aggressive behavior, which challenges the serotonin deficiency hypothesis of aggression.

On the other hand, the importance of the 5-HT_{1A} and 5-HT_{1B} heteroreceptors on projection sites has been emphasized in studies using lesion or depletion of raphé 5-HT neurons either by systemic administration of the tryptophan hydroxylase inhibitor PCPA or by intracerebral injection of the 5-HT neurotoxin, 5,7-dihydroxytryptamine (5,7-DHT). Since these neurotoxic treatments destroy the function of serotonergic neurons, one can observe the effect of 5-HT₁ agonists on postsynaptic receptors exclusively. If only somatodendritic and presynaptic autoreceptors are the site of action of 5-HT_{1A} and 5-HT_{1B} agonists, PCPA or 5,7-DHT treatment should eliminate the anti-aggressive effect of 5-HT_{1A} and 5-HT_{1B} agonists. However, lesions or depletion of 5-HT neurons did not affect the anti-aggressive effects of 5-HT_{1A} and 5-HT_{1B} agonists (de Almeida et al. 2001b; Miczek et al. 1998b) or even had pro-aggressive effects (Sanchez and Hyttel 1994; Sijbesma et al. 1991). While these data may suggest postsynaptic 5-HT₁ receptors as critical sites of action, it is important to note that these pharmacological depletions spared a subpopulation of receptors.

The intracranial microinjection technique has been used to determine the critical brain regions underlying the anti-aggressive effects of 5-HT_{1A} and 5-HT_{1B} receptor agonists (Table 4). 5-HT in the mammalian central nervous system derives mainly from the dorsal and median raphé nuclei (DRN and MRN,

Table 4 Modulation of aggressive behaviors after local infusion of drugs targeting 5-HT receptors in selected brain regions

Brain region	Type of aggression, species	Target; drugs and doses	Pharmacological effects	References
DRN	Resident aggression, male rats	5-HT _{1A} : 8-OH-DPAT, 1–10 µg 5-HT _{1A/5-HT_{1B}} : Eltopronazine, 1–30 µg (agonists)	↓ aggressive behavior, with inactivity and decreased social interaction	Mos et al. (1993)
	Resident aggression, male rats	5-HT _{1A} : Alnespirone, 25 µg (agonist)	↓ aggression; no side effects	Van der Veegt et al. (2003)
	Alcohol-escalated aggression, male mice	5-HT _{1A} : 8-OH-DPAT, 1.0 µg 5-HT _{1B} : CP-94253, 1.0 µg (agonists)	8-OH-DPAT and CP-94253; ↓ baseline aggression, with reduced motor activity; no effects on alcohol-related aggression	Faccidomo et al. (2008)
	Schedule-heightened aggression, male mice	5-HT _{1B} : CP-93129, 0.1–1.0 µg (agonist)	↓ escalated aggression; reduced walking behavior	Bannai et al. (2007)
MRN	Alcohol-escalated aggression, male mice	5-HT _{1B} : CP-93129, 0.1–1.0 µg (agonist)	↓ baseline and alcohol-related aggression (0.5–1.0 µg); concomitant reduction in motor activity	Faccidomo et al. 2012
	Maternal aggression, rats	5-HT _{1A} : 8-OH-DPAT, 0.56 µg (agonist)	↑ maternal aggression (0.56 µg); no motor effects	Veiga et al. (2011)
PAG	Maternal aggression, rats	5-HT _{1A} : 8-OH-DPAT, 0.2–2.0 µg (agonist)	↓ maternal aggression; no side effects	De Almeida and Lucion (1997)
	Maternal aggression, rats	<i>Dorsal PAG</i> 5-HT _{1A} : 8-OH-DPAT, 0.2–2.0 µg (agonist)	↓ maternal aggression (0.2–2.0 µg); no side effects	de Almeida and Lucion (1997)

(continued)

Table 4 (continued)

Brain region	Type of aggression, species	Target; drugs and doses	Pharmacological effects	References
	Maternal aggression, rats	<i>Dorsal PAG</i> 5-HT _{2A/2C} : α -methyl-5-HT maleate, 0.2–1.0 μ g (agonist) 5-HT _{2A/2C} : ketanserin, 1.0 μ g (antagonist)	α -methyl-5-HT maleate: \downarrow maternal aggression; no motor effects	de Almeida et al. (2005)
	Hypothalamic-stimulated defensive aggression, cats	<i>PAG</i> 5-HT _{1A} : 8-OH-DPAT ^a , 0.016 ng–1.0 μ g 5-HT _{2C} : DOI ^a , 3.57 ng–0.54 μ g (agonists)	Ketanserin: no effects on aggression, decreased motor activity 8-OH-DPAT: \downarrow defensive hissing (0.66–1.0 μ g), effect prevented by antagonist p-MPPI. No motor effect DOI: facilitation of defensive hissing (0.54 μ g)	Shaikh et al. (1997)
Septal nuclei	Maternal aggression, rats	<i>Medial septal nucleus</i> 5-HT _{1A} : 8-OH-DPAT, 0.2–2.0 μ g (agonist)	\uparrow maternal aggression (0.2–0.5 μ g); reduced activity only with highest dose (2.0 μ g)	de Almeida and Lucion (1997)
	Maternal aggression, rats	<i>Medial septal nucleus</i> 5-HT _{2A/2C} : alpha-methyl-5-HT maleate, 0.2–1.0 μ g (agonist) 5-HT _{2A/2C} : ketanserin, 1.0 μ g (antagonist)	No effects on aggressive or non-aggressive behaviors (agonist) Ketanserin: no effects on aggression, but decreased motor activity	de Almeida et al. (2005)
	Resident aggression, male mice (castrated males with hormonal replacement)	<i>Lateral septal nucleus</i> 5-HT _{1A} : 8-OH-DPAT ^a , 0.33 ng 5-HT _{1B} : CGS12066 ^a , 18.0 ng (agonists)	8-OH-DPAT: no behavioral effects CGS: \downarrow aggression with CGS, only in androgen-replacement condition; no side effects	Cologer-Clifford et al. (1997)
	Alcohol-escalated aggression, male mice	<i>Lateral septal nucleus</i> 5-HT _{1B} : CP-94253, 1.0 μ g (agonist)	No effects on alcohol-related or baseline aggression	Faccidomo et al. (2008)

(continued)

Table 4 (continued)

Brain region	Type of aggression, species	Target; drugs and doses	Pharmacological effects	References
Hypothalamus	Resident aggression, male mice (castrated males with hormonal replacement)	<i>Medial pre-optic area</i> 5-HT _{1A} : 8-OH-DPAT ^a , 0.16 ng 5-HT _{1B} : CGS12066 ^a , 9.0 ng (agonists)	8-OH-DPAT: ↓ aggression in androgen- and estrogen-replacement conditions; no motor effects CGS: ↓ aggression in androgen- and estrogen-replacement conditions; no motor effects	Cologer-Clifford et al. (1997)
	Vasopressin-escalated aggression, male hamsters	<i>Anterior hypothalamus</i> 5-HT _{1A} : 8-OH-DPAT ^a , 0.03–3.28 ng 5-HT _{1B} : CGS12066 ^a , 4.5–45.0 ng (agonists)	8-OH-DPAT: ↓ escalated aggression (0.33, 3.28 ng); no apparent motor effects 5-HT _{1B} : no effects on aggression (trends toward inhibition)	Ferris et al. (1999)
	PAG-stimulated defensive aggression, cats	<i>Medial hypothalamus</i> 5-HT _{1A} : 8-OH-DPAT ^a , 0.03–1.0 μg 5-HT _{2C} : DOI ^a , 0.036–0.36 μg (agonists)	8-OH-DPAT: ↓ defensive hissing (0.33–1.0 μg); effect prevented by antagonist p-MPPI DOI: facilitates defensive hissing (0.36 μg); effect prevented by antagonist LY-53,857	Hassamain et al. (2003)
Amygdala	Maternal aggression, rats	<i>Corticomедial amygdaloid nucleus</i> 5-HT _{1A} : 8-OH-DPAT, 0.2–2.0 μg (agonist) 5-HT _{1B} : CP-94253, 1.0 μg (agonist)	↓ maternal aggression (0.5–2.0 μg); no side effects	De Almeida and Lucion (1997)
Prefrontal cortex	Resident aggression, male mice	5-HT _{1B} : CP-94253, 1.0 μg (agonist)	No effects on aggressive or non-aggressive behaviors	de Almeida et al. (2006)
	Alcohol-escalated aggression, male mice	5-HT _{1B} : CP-94253, 0.5–1.0 μg (agonist)	↑ alcohol-related aggression (1.0 μg); mild increases in activity; no effects on baseline aggression	Faccidomo et al. (2008)

(continued)

Table 4 (continued)

Brain region	Type of aggression, species	Target; drugs and doses	Pharmacological effects	References
	Alcohol-escalated aggression, male mice	5-HT _{1B} : CP-93129, 0.1–1.0 µg (agonist)	↓ baseline and alcohol-related aggression (0.1–1.0 µg); no motor effects	Faccidomo et al. (2012)
Orbitofrontal cortex	Resident aggression, male mice	5-HT _{1B} : CP-94253, 0.1–1.0 µg (agonist)	↓ aggression (0.56–1.0 µg); no side effects. CP-94253 effects prevented by 1B antagonist, GR-127935.	De Almeida et al. (2006)
	Maternal aggression, rats	5-HT _{1B} : CP-93129, 1.0 µg 5-HT _{1B} : CP-94253, 0.56–1.0 µg (agonists) 5-HT _{1B} : CP-94253, 0.5–1.0 µg (agonist)	CP-93129: ↓ maternal aggression (1.0 µg); no side effects CP-94253: no behavioral effect No effects on alcohol-related or baseline levels of aggression	Veiga et al. (2007) Faccidomo et al. (2008)
	Alcohol-escalated aggression, male mice	5-HT _{1A} : 8-OH-DPAT, 0.1–1.0 µg 5-HT _{1B} : CP-93129, 0.1–1.0 µg (agonists)	8-OH-DPAT: ↓ instigated aggression (0.56–1.0 µg); no side effects CP-93129: ↓ instigated aggression (only 0.1 µg); no side effects	Centenaro et al. (2008)

DRN dorsal raphé nucleus, *M/RN* median raphé nucleus, *PAG* periaqueductal gray area

^a doses calculated based on the following molecular weights (MW) of the compounds (as available at Sigma–Aldrich): 8-OH-DPAT hydrobromide, MW = 328.29; CGS-12066 maleate salt, MW = 450.41; DOI hydrochloride, MW = 357.62

respectively). Activation of 5-HT_{1A} and 5-HT_{1B} receptors in the DRN with microinfusion of selective receptor agonists consistently reduced aggressive behavior in rats and mice, but with concomitant reduction of motor activity and social interactions (Bannai et al. 2007; Faccidomo et al. 2008; Mos et al. 1993; Van Der Vegt et al. 2003). Infusion of a 5-HT_{1A} agonist into the MRN also reduced aggressive behavior of lactating female rats (de Almeida and Lucion 1997). In projection sites of 5-HT neurons, 5-HT_{1B} receptors likely modulate 5-HT release from synaptic terminals as autoreceptors, whereas both 5-HT_{1A} and 5-HT_{1B} receptors modulate postsynaptic neurons (Olivier et al. 1992). In most studies, local activation of 5-HT_{1A} and 5-HT_{1B} in projection regions (e.g., medial preoptic area, lateral septum, orbitofrontal cortex, anterior hypothalamus, medial hypothalamus, periaqueductal gray) reduced aggressive behavior in various procedures and species (see Table 4). Interestingly, under conditions that may escalate aggression, such as consumption of moderate doses of alcohol or maternal aggression, a 5-HT_{1A} or 5-HT_{1B} agonist further increased levels of aggressive behavior when infused into the medial prefrontal cortex (Faccidomo et al. 2008) or the medial septal area (de Almeida and Lucion 1997), respectively. Further studies are required to delineate the mechanisms for such pro-aggressive effects.

4.1.2 Genetic Approach

The 5-HT_{1B} receptor was the first molecule to be linked to aggression by using the gene knockout technique. Male mice with disrupted 5-HT_{1B} receptor expression (*Htr1b*^{-/-}) increased isolation-induced aggressive behavior compared to the wild-type mice (Bouwknacht et al. 2001b; Saudou et al. 1994). However, the aggressive behavior of the background strain of mice (129/Sv-ter) was very low, close to zero, and thus the frequency of attack bites in *Htr1b*^{-/-} was low and the latency to initiate fighting was very long compared to other strains of mice. These mice displayed behavioral disinhibition in other behavioral tests including hyperlocomotor activity (Brunner et al. 1999; Ramboz et al. 1995), drug intake (Crabbe et al. 1996; Rocha et al. 1998), measures of anxiety-like behavior (Brunner et al. 1999; Malleret et al. 1999) and autonomic hyperreactivity to novelty (Bouwknacht et al. 2001a). Females of *Htr1b*^{-/-} increased their aggressive behavior during the postpartum period (Brunner and Hen 1997). These results suggest a role for 5-HT_{1B} receptors in the inhibition of some aggressive and impulsive behaviors. The level of tissue 5-HT concentration in *Htr1b*^{-/-} mice was lower than wild-type in nucleus accumbens and spinal cord (Ase et al. 2000).

There are several polymorphisms in the human 5-HT_{1B} receptor (*HTR1B*) gene. The most frequently studied *HTR1B* polymorphism in relation to aggressive phenotype is a single nucleotide polymorphism (SNP) G861C. This SNP had significant linkage with aggressive behavior in antisocial alcoholism (Lappalainen et al. 1998). Specifically, 861C, the SNP with lower 5-HT_{1B} receptor expression (Huang et al. 1999), was related to antisocial behavior. This SNP is actually a

synonymous polymorphism, in which no amino acid change occurred, and thus this SNP seems not to have any function by itself. Thus, G861C polymorphism may have a linkage with other functional polymorphisms that causes the expression change of 5-HT_{1B} receptors. Jensen et al. (2009) showed that a SNP (A1997G) in a non-coding regulatory region of the HTR1B gene is actually related to the 5-HT_{1B} expression pattern. This SNP is in the binding site for the microRNA miR-96 that inhibits the translation or degrades the HTR1B mRNA. College students homozygous for the A-allele, who have reduced 5-HT_{1B} receptor expression, reported a greater history of aggressive behaviors than G-allele individuals. Also, another SNP in the 5'UTR region of the HTR1B gene, A161T, was found to correlate significantly with a history of aggression in subjects who completed violent suicides (Zouk et al. 2007). Individuals with the T161 locus had more lifetime aggressive behaviors, and again this polymorphism was linked to reduced transcriptional activity of 5-HT_{1B} receptors (Sun et al. 2002). However, these associations between the HTR1B polymorphisms (G861C, G261T, or C129T) and aggression and antisocial behavior are not seen in other studies (Huang et al. 1999; Kranzler et al. 2002; New et al. 2001; Sinha et al. 2003; Van den Berg et al. 2008). Based on the findings from pharmacological studies and gene knockout and polymorphism studies, it is likely that the 5-HT_{1B} receptor has an important role in the inhibition of certain types of aggression.

In contrast to the strong pharmacological evidence implicating the 5-HT_{1A} receptor in aggression, no linkage has yet been reported between the 5-HT_{1A} gene polymorphism and aggression. Also, deletion of 5-HT_{1A} gene (*Htr1a*^{-/-}) reduced aggressive behavior in mice (Zhuang et al. 1999), which is the complete opposite of the findings with 5-HT_{1A} agonists. However, there is evidence for a correlation between 5-HT_{1A} receptor expression and aggression. A human PET study found a higher 5-HT_{1A} receptor distribution in prefrontal cortex of subjects with higher aggression scores based on a self-report questionnaire (Witte et al. 2009). Also, mice selected for short latency to attack showed higher 5-HT_{1A} receptor expression and receptor sensitivity (Korte et al. 1996; Van Der Veegt et al. 2001; van Riel et al. 2002; Veenema et al. 2005), while rats selected for higher defensive reactions showed reduced 5-HT_{1A} receptor expression in several brain areas (Popova et al. 1998). It is possible that the polymorphisms which directly or indirectly affect 5-HT_{1A} receptor transcription may be associated with either aggressive or defensive responses.

4.2 5-HT₂ Family

4.2.1 Pharmacological Approach

Atypical antipsychotic agents (e.g., risperidone) with significant antagonist action at 5-HT_{2A} receptors have been successfully used to reduce aggressive outbursts in patients diagnosed with various neuropsychiatric disorders (Buckley et al. 1997;

Buitelaar et al. 2001; Czobor et al. 1995; De Deyn et al. 1999; Fava 1997; Keck et al. 2000; Zarcone et al. 2001). However, some reports cast doubt on the routine use of antipsychotics (Swanson et al. 2008; Tyrer et al. 2008). In one study, the placebo control group showed the greatest reduction in aggressively challenging behavior compared to antipsychotic drug treatments in people with intellectual disability (Tyrer et al. 2008). In animal models, selective 5-HT_{2A} antagonists (e.g., ketanserin, ritanserin and MDL 100907) reduce aggressive behaviors in a behaviorally non-specific manner (Rodriguez-Arias et al. 1998; Sakaue et al. 2002; Shih et al. 1999; White et al. 1991).

Activation of 5-HT_{2A} and 5-HT_{2C} receptors by DOI and other substituted phenylisopropylamines also reduces aggressive behavior in several species including flies, amphibians, mice and rats (Bonson et al. 1994; de Almeida and Lucion 1994; Johnson et al. 2009; Muehlenkamp et al. 1995; Olivier et al. 1995; Sanchez et al. 1993; Ten Eyck 2008). However, the anti-aggressive effects of 5-HT₂ ligands are accompanied by sedative effects in the same dose range. Local infusion of a 5-HT_{2A/2C} agonist into the PAG reduces maternal aggression in rats (de Almeida et al. 2005), whereas microinjections into the medial hypothalamus and into the PAG increased defensive aggression in cats (Hassanain et al. 2003; Shaikh et al. 1997, see Table 4). This latter effect is likely linked to the role of 5-HT_{2A/2C} receptors in anxiety-like behavior (Lucki and Wieland 1990; Nogueira and Graeff 1995). The development of a more selectively acting pharmacological tools will allow a more adequate differentiation of 5-HT₂ receptor subtypes, and promises to dissociate the anti-aggressive and sedative effects.

4.2.2 Genetic Approach

Platelet 5-HT_{2A} receptor binding is increased in patients with personality disorders and in a psychiatric population with greater lifetime aggression scores (Coccaro et al. 1997; McBride et al. 1994). Positive correlation between impulsive physical aggression and 5-HT_{2A} receptor expressions in orbitofrontal cortex has been reported using PET (Rosell et al. 2010) and a similar finding was reported in a postmortem study of suicide victims (Mann et al. 1986; Oquendo et al. 2006). However, another PET study reported opposite changes in 5-HT_{2A} receptor expression (Meyer et al. 2008). It is possible that polymorphisms that affect the level of expression of 5-HT_{2A} receptors can be associated with self-directed aggression. In some samples, a significant linkage was found between polymorphisms in the 5-HT_{2A} receptor (HTR2A) gene, T102C, A1438G and His452Tyr, and aggressive-impulsive trait or adolescent-onset antisocial behavior in humans (Assal et al. 2004; Bjork et al. 2002; Burt and Mikolaiewski 2008; Nomura et al. 2006), but others have reported no such link between aggression and HTR2A polymorphisms (Khait et al. 2005; Van den Berg et al. 2008). Again, the successful pharmacotherapeutic management of aggressive patients using compounds with affinity for 5-HT_{2A} receptors would suggest that violence-prone individuals may be characterized by distinctive HTR2A polymorphisms.

Linkage of a minor polymorphism in the 5-HT_{2B} receptor (HTR2B) gene with antisocial behavior was reported recently. The HTR2B Q20* allele, which is found exclusively in the Finnish population, contains a stop codon in HTR2B and blocked the expression of the 5-HT_{2B} receptor. Males with the Q20* allele are prone to show more impulsive violence or impulsive suicidal behavior interacting strongly with alcohol than control (Bevilacqua et al. 2010). Male mice with disrupted 5-HT_{2B} receptors (Ht2b^{-/-}) also showed increased impulsive behavior. Interestingly, these mice had three times higher testosterone level in the cerebrospinal fluid, which is also consisted with the Q20* individuals among humans.

5 Serotonin Transporter (5-HTT)

5.1 Pharmacological Approach

Aggressive behavior in humans and animals can be reduced and prevented by blocking serotonin transporter molecules, which in turn presumably increases 5-HT levels in the brain. Clinically, chronic treatment (i.e., >3 weeks) with selective serotonin reuptake inhibitors (SSRIs) has been shown to reduce aggressive outbursts and violent behavior in psychiatric patients (Barkan et al. 2006; Blader 2006; Bond 2005; Coccaro and Kavoussi 1997; New et al. 2004; Reist et al. 2003; Walsh and Dinan 2001). However, SSRIs have occasionally been reported to increase the incidence of aggressive and suicidal behavior, and the causes of these paradoxical effects remain unknown (Spigset 1999; Troisi et al. 1995).

Both acute and chronic SSRI treatment can produce a dose-dependent reduction in aggressive behavior in animal models (Carrillo et al. 2009; Delville et al. 1996; Olivier et al. 1989; Pinna et al. 2003). When given acutely to rodents and non-human primates, several SSRIs including fluoxetine, fluvoxamine and sertraline reduced aggression in various contexts (Abbadie et al. 1994; Carrillo et al. 2009; Cutler et al. 1997; Delville et al. 1996; Fairbanks et al. 2001; Ferris et al. 1997; Fuller 1996; Ho et al. 2001; Sanchez and Meier 1997). Mice treated with the SSRI citalopram daily for three weeks no longer showed increased levels of aggression after consuming a moderate dose of alcohol, and baseline levels of aggression also showed modest reductions (Caldwell and Miczek 2008). On the other hand, the very low levels of agonistic behavior typically seen in laboratory rats may be restored to species-typical levels by chronic SSRI treatment (Mitchell et al. 1991; Mitchell 2005; Mitchell and Redfern 1992, 1997). Thus, SSRIs are more likely to exhibit anti-aggressive effects in conditions of escalated agonistic behavior, such as fighting enhanced by alcohol (Caldwell and Miczek 2008).

Mechanistically, extracellular levels of 5-HT in the prefrontal cortex of rats are elevated by both acute and chronic administration of citalopram or the more potent isomer escitalopram, implying that SSRIs' effects on aggression and other mood disorders is a result of increased cortical 5-HT (Ceglia et al. 2004). However, the

anti-aggressive effects of fluoxetine, another SSRI, may be mediated primarily by acting on neurosteroids and GABA transmission, and only secondarily by elevating 5-HT (Pinna et al. 2003, 2006). In addition, long-term SSRI treatment probably recruits both pre- and post-synaptic mechanisms and neuroplastic events that may also have therapeutic actions (Benmansour et al. 1999; Blier and de Montigny 1998; Ceglia et al. 2004; Pineyro et al. 1994).

5.2 Genetic Approach

The serotonin-transporter-gene-linked polymorphic region (5-HTTLPR) is a variation in the length of the 5'-flanking transcriptional control region (promoter) of the 5-HTT gene that affects the gene's transcriptional activity. The variation has been found in humans (Heils et al. 1996) and also in great apes and rhesus monkeys (Lesch et al. 1997). The short-length (*s*) allele reduces 5-HTT expression in vitro compared to the long length homozygote (*l/l*) and lowers the prolactin response to clomipramine in humans, indicating reduced 5-HT function (Heils et al. 1995; Lesch et al. 1996; Whale et al. 2000). Studies in humans have found that males and females with one or two copies of the *s* allele (*s/s*, *s/l*) exhibit more hostility, aggression, anxiety and depression and lower agreeableness than *l/l* homozygotes (Lesch and Merschdorf 2000). "Type 2" alcoholics who displayed high impulsivity and antisocial behaviors showed a higher frequency of the *s* allele than either "Type 1" alcoholics without antisocial behavior or healthy controls (Hallikainen et al. 1999). As in humans, rhesus monkeys with the *s* allele were more aggressive than *l/l* individuals (Jarrell et al. 2008; Lesch and Merschdorf 2000).

5-HTT polymorphism also exhibits a genotype-environment interaction. Rhesus monkeys with the *s* allele that were peer-reared without their mothers had lower CSF levels of 5-hydroxyindoleacetic acid (5HIAA) than *l/l* individuals, but this difference was not present in maternally reared monkeys (Bennett et al. 2002). Peer-reared male monkeys also showed both altered CSF 5HIAA levels and an increase in aggression-related behavior (Higley et al. 1991; Kraemer et al. 1989). Humans carrying the *s* allele exhibited more suicidal ideations or attempts in response to stressful life events than *l/l* homozygotes, but did not differ in less stressful situations (Caspi et al. 2003). Therefore, it is possible that animals with the *s* allele are more vulnerable to stressful challenges, and subsequently escalate their aggressive behaviors toward others and themselves. However, the presence of the *s* allele did not affect human aggression consistently across sexes (Cadoret et al. 2003) or cultures (Baca-Garcia et al. 2004).

Deletion of the 5-HTT gene in mice (*Slc6a4*) produced seemingly contrary results. Wild-type C57BL/6J mice attacked more and showed shorter latencies to start fighting in the resident-intruder test than homozygote and heterozygote 5-HTT knockouts (Holmes et al. 2002, Table 3). 5-HTT knockout mice have higher extracellular 5-HT concentrations and lower 5-HT uptake in the forebrain compared to wild-type (Mathews 2004). Knockout mice with reduced or absent 5-HTT

function also exhibited more than 50 phenotypic changes, including alterations of behavioral, physiological, morphological and sensory functions (Murphy and Lesch 2008), and those pleiotropic changes in various other phenotypes may contribute to the reduction of aggression in these mice. Comparable findings on 5-HTT and aggression have also been reported in rats; 5-HTT knockout rats on a Wistar/Crl background showed reduced offensive behaviors and longer attack latencies compared to wild-types (Homberg 2007). Thus genetic ablation of 5-HTT has consistently been shown to reduce aggressive behaviors in rodents.

6 Monoamine Oxidase A

6.1 *Pharmacological Approach*

Inhibition of MAO_A leads to a reduction in the oxidative metabolism of monoamines, presumably making 5-HT and other monoamines more available in the brain. Although the importance of MAO inhibitors as antidepressants was soon recognized, only a few studies have evaluated the effects of MAO inhibitors on aggression in preclinical models (Miczek 1987). Non-selective inhibitors of both MAO_A and MAO_B (e.g., phenelzine, isocarboxazid, tranylcypromine) produce acute anti-aggressive effects only at doses that also produce sedation and alter other non-aggressive behaviors (DaVanzo et al. 1966; Sofia 1969; Valzelli et al. 1967; Welch and Welch 1968). Non-selective MAO inhibitors or selective MAO_B inhibitors can be clinically useful for treating patients with personality disorders who exhibit suicidal tendencies and impulsive aggression, but the drugs also have a profile of undesirable side effects (Hollander 1999; Raj 2004).

6.2 *Genetic Approach*

The gene for monoamine oxidase A (MAOA) was the first to be identified as a possible determinant for pathological aggression in humans, and it has remained the focus of most genetic and epigenetic studies. A Dutch family with a syndrome of borderline mental retardation and dysregulated impulsive aggression was identified by Brunner et al. (1993b). Aggressive outbursts were seen in all affected males in the kindred, and some exhibited aberrant sexual behavior, attempted murder and arson. Linkage and sequence analyses identified one missense mutation in the MAOA gene on the X chromosome, so that MAOA function was completely disturbed; the affected males had more serotonin and lower levels of norepinephrine, dopamine and 5-HT metabolites in their urine (Brunner et al. 1993a). MAOA is also an important factor in animal aggression. Aggressive behaviors (skin wounds among cage mates and briefer attack latency in the resident-intruder test) escalated in male mice with a disrupted MAOA gene on either

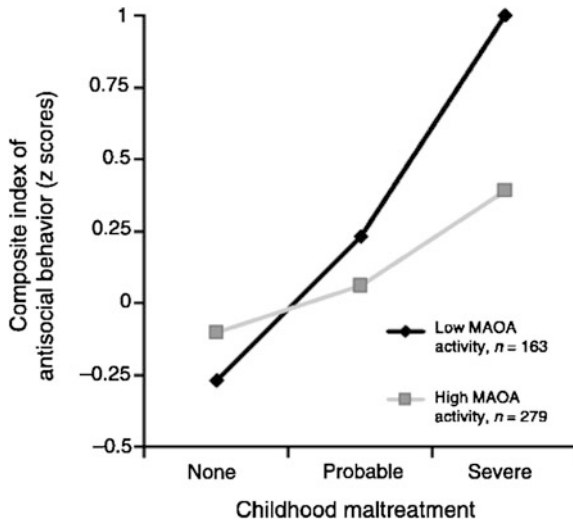


Fig. 4 Means on the composite index of antisocial behavior as a function of MAOA activity and a childhood history of maltreatment. MAOA activity is the gene expression level associated with allelic variants of the functional promoter polymorphism, grouped into low and high activity; childhood maltreatment is grouped into three categories of increasing severity. The antisocial behavior composite is standardized (z score) to a $M = 0$ and $SD = 1$; group differences are interpretable in SD unit differences (d). *Reprinted with permission from Caspi et al. (2002)*

C3H/He or 129 Sv background compared to wild-type mice (Cases et al. 1995; Scott et al. 2008). Mice with an MAOA deficiency also showed a large increase in 5-HT and norepinephrine and a slight elevation in dopamine in the brain and liver (Cases et al. 1995; Kim et al. 1997, Table 3); the behavioral changes in the MAOA-deficient mice are probably caused by this change in 5-HT function. Escalated aggression in MAOA mutant mice was blocked by 5-HT_{2A} receptor antagonists such as ketanserin and MDL100907 (Shih et al. 1999). Some of the behavioral and brain structural abnormalities in the MAOA-deficient mice were ameliorated when 5-HT was depleted by PCPA early in the developmental process (Cases et al. 1995, 1996).

MAOA expression can also be affected by variable-number tandem repeat (VNTR) polymorphism on the upstream region of the MAOA gene. The number of tandem repeats determines MAOA levels: alleles with 3.5 or 4 repeats have 2–10 times higher transcription than 3–5 repeat alleles *in vitro* (Denney et al. 1999; Sabol et al. 1998). A powerful interaction between MAOA genotype and environment on aggressive behavior has been reported (Caspi et al. 2002, Fig. 4). Individuals with low MAOA expression (MAOA-L) polymorphisms who suffered from abuse, neglect or traumatic life events in the first 15 years of their lives were more likely to have a history of adolescent conduct disorder, violence and criminal arrests, and also scored higher on aggressive disposition in a self-report questionnaire compared to MAOA-L individuals without abuse or trauma, or

individuals with higher MAOA expression (MAOA-H) (Caspi et al. 2002; Foley et al. 2004; Frazzetto et al. 2007; Kim-Cohen et al. 2006; Weder et al. 2009; Widom and Brzustowicz 2006). The effect of MAOA genotype disappeared if all subjects were lumped together regardless of rearing environment (Fresan et al. 2007), and MAOA-H individuals sometimes reported higher aggression in interviews and on questionnaires (Manuck et al. 2000, 2002). The finding that individuals with the MAOA-L allele are vulnerable to environmental factors, showing a high propensity to engage in aggressive behaviors when in a stressful environment, is consistent in males but not females (Sjoberg et al. 2007). Rhesus monkeys have a similar repeat length variation polymorphism in the MAOA gene (rhMAOA-LPR) which is also linked to aggression. Monkeys with a low-activity allele who were reared by their mother showed more aggressive behavior and attained higher dominance rank than monkeys with the low-activity allele who were peer-reared separately from their parents (Newman et al. 2005). Higley and Suomi (1986) attributed this inhibition of aggression to increased fear and anxiety in peer-reared monkeys.

Substantial differences in both volume and activity of limbic system and neocortical areas between MAOA-L and MAOA-H individuals have been found in neuroimaging studies [see Buckholtz and Meyer-Lindenberg (2008) for a review]. In healthy male human volunteers with the MAOA-L variant, fMRI showed smaller limbic and orbitofrontal volumes and higher activity in amygdala and hippocampus during aversive recall (Meyer-Lindenberg et al. 2006), which may be related to violent behavior. Lower MAOA activity in cortical and subcortical brain areas is associated with elevated aggression as measured by a self-report questionnaire, with no effect of MAOA polymorphism (Alia-Klein et al. 2008). These data show that the MAOA activity is one determinant of the propensity to aggression. The interaction between MAOA polymorphism and stressful social experiences is especially critical, since it can escalate aggression and can also change relevant brain structures.

7 Modulation of Serotonergic Activity by Other Systems

The 5-HT neurons in the raphé nuclei are modulated by other amines, acids, peptides and steroids (Adell et al. 2002). Several efforts have been undertaken to uncover the nature of the neural systems that modulate 5-HT neurons to promote escalated aggressive behaviors. Here we will focus briefly on inhibitory and excitatory neurotransmitters and some neuropeptides in terms of their interaction with 5-HT system. Especially, dorsal raphé nucleus (DRN), the largest 5-HT nucleus in the brain, will be highlighted because of its important role for aggression (Bannai et al. 2007; Faccidomo et al. 2008; Jacobs and Cohen 1976; Koprowska and Romaniuk 1997; Mos et al. 1993; Sijbesma et al. 1991; Van Der Vegt et al. 2003; Vergnes et al. 1986).

7.1 *Excitatory and Inhibitory Amino acids*

7.1.1 γ -Aminobutyric Acid

γ -Aminobutyric Acid (GABA) is the major inhibitory neurotransmitter in the brain. Large numbers of GABA interneurons and distal GABAergic afferents are found in the DRN (Belin et al. 1983; Gervasoni et al. 2000; Nanopoulos et al. 1982; Wang et al. 1992), and both GABA_A and GABA_B receptors are expressed in the DRN (Bowery et al. 1987). In vivo electrophysiology studies have shown that the activation of either GABA_A or GABA_B receptors can inhibit the cell firing of serotonergic neurons (Colmers and Williams 1988; Gallager and Aghajanian 1976; Innis and Aghajanian 1987; Judge et al. 2004). On the other hand, in vivo microdialysis studies have shown that the 5-HT release may be differentially modulated by GABA_A receptors and GABA_B receptors depending on the projection sites (Tao et al. 1996). In addition, microinjection of a GABA_B receptor agonist into the DRN can induce either increases or decreases of 5-HT neuronal activity (Abellan et al. 2000; Takahashi et al. 2010b; Tao et al. 1996).

Systemic administrations of positive modulators of GABA_A receptors such as benzodiazepines, barbiturates and neurosteroids exert dose-dependent biphasic effects on aggressive behaviors, from escalation to inhibition (Miczek et al. 2003). Low to moderate doses of GABA_A positive modulators escalate aggression in mice, rats, pigs and monkeys (Arnone and Dantzer 1980; Cole and Wolf 1970; Ferrari et al. 1997; Fish et al. 2001; Gourley et al. 2005; Miczek 1974; Miczek and O'Donnell 1980; Mos and Olivier 1989; Rodgers and Waters 1985; Weerts and Miczek 1996). On the other hand, pharmacological activation of GABA_A receptors in the DRN inhibits aggressive behaviors in rats (Van Der Veegt et al. 2003) but has no effect in mice (Takahashi et al. 2010a). However, we found an interaction between alcohol and GABA_A receptor in the DRN on aggressive behavior. Only under the influence of alcohol, local administration of GABA_A receptor agonist muscimol in the DRN also heightened aggressive behaviors (Takahashi et al. 2010a). Therefore, GABA_A modulation of serotonergic neurons may connect to drug-induced escalated aggression (e.g., alcohol, benzodiazepines) but not to species-typical aggression.

GABA_B receptors in the DRN are also involved in the escalation of aggression in mice. Pharmacological activation of GABA_B receptors in the DRN escalates intermale aggression (Takahashi et al. 2010b). The pro-aggressive effect of GABA_B agonist baclofen was blocked by selective agonists of GABA_B receptors (phaclofen, CGP54626). Additionally, the systemic administration of baclofen also escalates aggression in male mice. Therefore, both GABA_A and GABA_B receptors are involved in escalated aggression via different mechanism to modulate different types of aggression. In vivo microdialysis showed that GABA_B activation in the DRN increased extracellular 5-HT level in the medial prefrontal cortex (Takahashi et al. 2010b, Fig. 5). This result suggests that the phasic activation of 5-HT system may be able to promote certain types of escalated aggressive behaviors in mice.

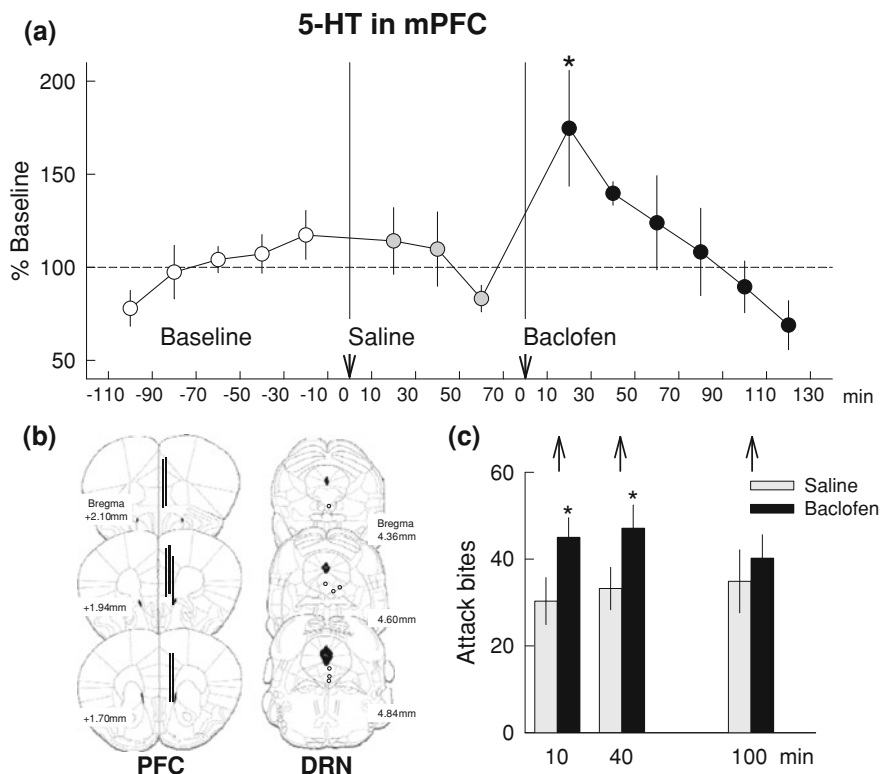


Fig. 5 Extracellular 5-HT concentration in the medial prefrontal cortex (mPFC) of mice after GABA_B receptor activation in the dorsal raphe nucleus (DRN). **a** Baclofen microinjected into the DRN increased the 5-HT level in the mPFC whereas saline injection did not change the 5-HT level. Twenty-minute samples were collected: five samples for baseline, three samples after saline injection and six samples after baclofen (0.06 nmol) injection. Data are means \pm SEM expressed as percentage of baseline ($n = 7$); asterisks = $p < 0.05$ compared to baseline. **b** Histological representation of probe placement in the mPFC for the microdialysis (vertical bars: 2 mm probe membrane) and drug injection site in the DRN (circles). **c** The effect of 0.06 nmol baclofen (black bars) or saline (gray bars) on attack bites at different post-injection intervals (10, 40 and 100 min, corresponding to fractions 9, 11 and 14 in the microdialysis, respectively). Escalated attack bites were observed both 10 and 40 min after the intra-DRN baclofen injection. Values are means \pm SEM; asterisks = $p < 0.05$ compared to corresponding vehicle control. From Takahashi et al. (2010b)

7.1.2 Glutamate

The DRN receives glutamate input by the descending projections from the lateral habenula, periaqueductal gray, lateral hypothalamus, interpeduncular nucleus and medial prefrontal cortex (Aghajanian and Wang 1977; Behzadi et al. 1990; Kalen et al. 1986; Maciewicz et al. 1981). Both the N-methyl-D-aspartate (NMDA) and α -amino-3-hydroxy-5-methyl-4-isoxazolopropionate/kainate (AMPA/kainate),

ionotropic receptors for glutamate, are localized on serotonergic neurons and increase the 5-HT release in the DRN and its projection areas (Celada et al. 2001; Pallotta et al. 1998; Tao et al. 1996; Tao and Auerbach 2000; Vandermaelen et al. 1986). Metabotropic receptors of glutamate (mGluRs) are also found in the DRN, but their function on serotonergic neurotransmission and aggressive behavior needs to be characterized by further investigations. Systemic administrations of classic antagonists of NMDA receptors, including phencyclidine (PCP) and dizocilpine (MK-801), can increase aggressive behavior (Burkhalter and Balster 1979; Krsiak 1974; McAllister 1990; Musty and Consroe 1982; Rewerski et al. 1971; Wilmot et al. 1987), while other studies find that these compounds are suppressive and sedative due to their marked side effects (Belozertseva and Bepalov 1999; Lang et al. 1995; Miczek and Haney 1994; Tyler and Miczek 1982). Memantine and neramxane block the channel of NMDA receptors with different characteristics and promote alcohol-heightened aggression in resident mice confronting an intruder. Anatomically discrete analysis is required to identify the sites of action for NMDA receptors that produce escalated aggressive behavior. The 5-HT system is one of the candidates, especially the descending glutamatergic projection from the medial prefrontal cortex (mPFC) to the DRN will be interesting to investigate. The prefrontal cortex (PFC) is implicated in the emotion regulation including aggression (Davidson et al. 2000; Miczek et al. 2007). This mPFC-DRN glutamatergic projection is involved in the controllability or emotion regulation (Amat et al. 2005) and it is possible that this pathway is also involved in the regulation of aggression.

7.2 *Neuropeptides*

7.2.1 **Corticotropin-Releasing Factor**

The DRN is innervated by corticotropin-releasing factor (CRF) immunoreactive fibers, and is the site for both subtypes of CRF receptors, CRF1 and CRF2 (Chalmers et al. 1995; Potter et al. 1994; Swanson et al. 1983). CRF, CRF receptors and other peptides of the CRF family (i.e., urocortins), play key modulatory roles on DRN 5-HT neurons (Valentino and Commons 2005). Electrophysiological and microdialysis studies consistently report that i.c.v. or intra-DRN microinjections of CRF, or drugs targeting CRF receptors, exert potent modulatory control over 5-HT neural firing (Kirby et al. 2000; Lowry et al. 2000), and 5-HT output to limbic, striatal and prefrontal cortical regions (Amat et al. 2004, 2005; Forster et al. 2008; Lukkes et al. 2008; Meloni et al. 2008; Price et al. 1998; Price and Lucki 2001).

CRF, CRF1 and CRF2 receptors are implicated in maternal and inter-male aggression in mice and hamsters (D'Anna et al. 2005; Farrokhi et al. 2004; Gammie et al. 2004, 2005, 2007; Gammie and Stevenson 2006). In rats, i.c.v. or intra-amygdala infusions of low doses of CRF itself facilitated or induced

pro-aggressive effects (Elkabir et al. 1990; Tazi et al. 1987). Under conditions of escalated aggression promoted by moderate doses of alcohol in male mice, CRF1 receptors are a promising target for pharmacological intervention. Systemic administration of the antagonists of CRF1 receptors reduce alcohol-heightened aggression, but also reduce baseline levels of aggressive behavior (Quadros et al. 2009b). When locally administered into the DRN, CRF1 antagonists (e.g., CP-154526 or MTIP) prevent the escalated levels of aggression observed after consumption of alcohol, with no detectable side effects on other behaviors. Remarkably, such anti-aggressive effects of CRF1 antagonists can be abolished with the infusion of 8-OH-DPAT into the DRN, which transiently slows 5-HT impulse flow. On the other hand, microinfusion of a CRF2 antagonist (e.g., Astressin-2B) into the DRN escalates aggressive behavior (Quadros et al. 2009a).

The modulation of aggressive behaviors by CRF systems depends on the species such as mice or rats, and type of aggression (species-typical, maternal or escalated aggression). Initial evidence suggests the 5-HT cells in the DRN as one of the critical sites for such modulation in escalated aggression that is promoted by alcohol, with presumably opposing roles for CRF1 and CRF2 receptors.

7.2.2 Neuropeptide Y

Neuropeptide Y (NPY) controls primarily food intake, energy balance and metabolic regulation (Herzog 2003). In addition to the critical role for energy homeostasis, NPY is also implicated in aggressive behavior (Emeson and Morabito 2005). Male mice with deleted expression of Y1 receptor ($Y1^{-/-}$) showed obesity and reduced energy homeostasis (Kushi et al. 1998). These animals also exhibited increased aggressive behaviors in the resident-intruder test (Karl et al. 2004). However, escalated aggression was observed only in the home-cage but not in the novel environment in $Y1^{-/-}$ mice. Both NPY and its receptors can be found in the DRN (Martel et al. 1990; O'Donohue et al. 1985; Saria et al. 1984), and NPY inhibits both hyperpolarizing and depolarizing slow synaptic potentials in the DRN (Kombian and Colmers 1992). $Y1^{-/-}$ mice showed reduced expression of tryptophan hydroxylase mRNA in the raphé nuclei, and also 5-HT_{1A} agonists could suppress the heightened aggression of $Y1^{-/-}$ mice (Karl et al. 2004). These results suggest that the disruption of Y1 receptor expression specifically increases territorial aggression by altering 5-HT function.

7.2.3 Arginine Vasopressin

Arginine vasopressin (AVP) is a neuropeptide that modulates a variety of social behaviors including pair-bonding, social recognition, maternal behavior, and aggression (Albers and Bamshad 1998; Coccaro et al. 1998; Ferris et al. 1992;

Goodson 2008; Koolhaas et al. 1990; Neumann et al. 2010; Winslow and Insel 1993). Selective antagonists of vasopressin V1a receptors (SRX251, [d(CH₂)5Tyr(Me)AVP]) inhibited inter-male aggression (Ferris et al. 2006; Ferris and Potegal 1988), suggesting the involvement of V1a receptors in aggressive behaviors. Evidence points to a critical role of the interaction between AVP and 5-HT in certain types of aggressive behaviors. In humans, a positive correlation has been observed between AVP concentrations in the CSF and the life history of aggression, a composite measure of trait aggression. Also, there was a positive correlation between AVP concentrations and prolactin responses to a challenge with d-fenfluramine (Coccaro et al. 1998). This result indicates that individuals that have higher aggression ratings tend to have a high AVP concentration in the CSF and a hyporesponsive 5-HT system. Neuronal interactions between AVP containing neurons and 5-HT neurons are found in the anterior hypothalamus (Ferris et al. 1997, 1999), and this AVP-5-HT link is implicated in aggression. Microinjection of AVP into the anterior or lateral hypothalamus increased aggressive behavior in hamsters, and systemic fluoxetine, a 5-HTT inhibitor, blocked the pro-aggressive effect of AVP (Delville et al. 1996; Ferris et al. 1997). Therefore, 5-HT may have an inhibitory effect on the AVP-heightened aggression. By contrast, mice with disrupted Ca²⁺ channel expression (Cav2^{-/-}) showed escalated level of aggressive behavior and also higher AVP concentration in the CSF. However, these animals showed over-activation of the dorsal 5-HT neurons and increased 5-HT concentration in the hypothalamus (Kim et al. 2009a). Further investigation will uncover how AVP and 5-HT interact and whether there are specific types of aggression that require the activity of either 5-HT or AVP systems independently.

7.2.4 Oxytocin

Oxytocin, which has a structure similar to vasopressin, differing in only two amino acid positions, also plays an important role in the control of social behaviors like vasopressin. Administration of the agonists of oxytocin receptor increased aggressive behavior in lactating females (Bosch et al. 2005; Ferris et al. 1992) but reduced territorial aggression in males (Harmon et al. 2002). Mice in which the gene for oxytocin and its receptor were knocked out, showed enhanced aggressive behaviors in both males and lactating females (Ragnauth et al. 2005; Takayanagi et al. 2005; Winslow et al. 2000) but see (DeVries et al. 1997). In humans, the level of oxytocin in the CSF is inversely correlated with the life history of aggression (Lee et al. 2009). Oxytocin and its receptor are expressed in the DRN, and the effect of local infusion of oxytocin can facilitate passive avoidance in rats (Kovács et al. 1979). However, the exact interactions between the oxytocin and serotonergic systems in their modulatory effects on aggressive behavior remain to be discovered.

7.3 Other Molecules that Directly or Indirectly Affect 5-HT Pathways and Aggression

7.3.1 Tryptophan Hydroxylase

Variations in Tryptophan hydroxylase (TPH) activity can directly affect 5-HT neurotransmission. Polymorphisms in the TPH1 or TPH2 gene change the enzyme activity and 5-HT level (Jonsson et al. 1997) for TPH1 gene; (Cichon et al. 2008; Lin et al. 2007; Zhang et al. 2004, 2005) for TPH2 gene. Two SNPs in tight linkage disequilibrium, A218C and A779C, located in the intron of TPH1 gene [which are often referred to as U (upper) and L (lower) allele], have been shown to be associated with state and trait anger as assessed by interview and self-report questionnaires (Manuck et al. 1999; Rujescu et al. 2002). Lower CSF 5-HIAA levels have been observed in healthy men, but not women, with the U allele (Jonsson et al. 1997), whereas the lowest CSF 5-HIAA was observed in LL carriers diagnosed with antisocial alcoholism (Nielsen et al. 1994). Apparently, both U and L alleles may relate to different types of aggression. Hennig et al. (2005) performed a factor analysis on the Buss-Durkee Hostility Inventory (BDHI) and found two factors, named as “neurotic hostility” and “aggressive hostility”. Neurotic hostility is characterized by irritability, resentment, verbal hostility and guilt, whereas aggressive hostility represents a more “cold” aggression including assault and negativism but low guilt. Individuals with the UU allele showed higher aggressive hostility but slightly lower neurotic hostility (Hennig et al. 2005), whereas LL homozygote showed higher level of impulsivity in the measurements which focused more on neurotic hostility (New et al. 1998). This may explain controversial results about the association between the polymorphisms and aggression; depending on which dimensions of aggressive behavior are measured, the association pattern may change.

In mouse models, the focus has been on the Tph2 gene, because Tph2 is preferentially expressed in the brain, whereas Tph1 is more widely distributed throughout the body (Walther et al. 2003). Mice with an R439H point mutation in the Tph2 gene have strongly reduced 5-HTP, 5-HT and its acidic metabolite levels in (Beaulieu et al. 2008). This mutant mouse showed increased aggressive behaviors in the social interaction test in a neutral arena where typically very low levels of aggression are seen (Beaulieu et al. 2008). In contrast, another polymorphism in Tph2, C1473G, which inhibits Tph2 activity in the midbrain, reduced the intensity of aggression in mice (Osipova et al. 2009). The mouse data on the R439H mutation in the Tph2 gene may be relevant to a large association study in children with attention deficit/hyperactivity disorder (ADHD), which identified a TPH2 gene polymorphism associated with impulsivity (Oades et al. 2008).

7.3.2 Pet-1

Pet-1 (also known as Fev), one of the transcription factors, is specifically expressed in the serotonergic raphé neurons, and has a critical role in 5-HT neural development. Deletion of Pet-1 expression reduced 5-HT levels in the forebrain, and also depleted expression of TPH, 5-HTT, and the vesicular monoamine transporter 2 (Vmat2). In the resident-intruder test, Pet-1 knockout mice (Pet-1^{-/-}) engaged in a higher frequency and intensity of attacks toward a conspecific male (Hendricks et al. 2003). These increases in aggressive behavior in Pet-1^{-/-} mice are embedded in broad behavioral disruptions that also extended to maternal and anxiety-like behaviors (Hendricks et al. 2003; Lerch-Haner et al. 2008), and it is possible that those other behavioral changes promote indirectly aggressive behaviors. Since Pet-1 expresses specifically in the 5-HT neurons, the promoter or enhancer regions of this gene are useful for gene manipulation of 5-HT neurons (Scott et al. 2005).

7.3.3 Brain-Derived Neurotrophic Factor

Brain-derived neurotrophic factor (BDNF) has several important roles in neuronal survival, development, differentiation and plasticity. Mice with decreased BDNF expression including knockout (BDNF^{+/-}) and conditional knockout (BDNF^{2L/1LNes-Cre} and BDNF^{2L/2LCk-Cre}) all showed increased inter-male aggression (Chan et al. 2006; Lyons et al. 1999). Higher extracellular levels of 5-HT in the hippocampus was observed in BDNF^{+/-} mice compared to wild-type (Deltheil et al. 2008). However, fluoxetine could reduce heightened aggressive behavior in BDNF^{+/-} mice (Lyons et al. 1999). All mutants changed 5-HT_{2A} receptor expression, however BDNF^{+/-} showed increased 5-HT_{2A} expression in the lateral frontal cortex and hypothalamus (Lyons et al. 1999) whereas BDNF^{2L/1LNes-Cre} and BDNF^{2L/2LCk-Cre} exhibit reduced 5-HT_{2A} receptor expression in the prefrontal cortex (Chan et al. 2006; Rios et al. 2006). A SNP in the BDNF gene, Val66Met, has attracted considerable interest because of its association with mood disorders and hippocampal function in humans (Egan et al. 2003; Neves-Pereira et al. 2002). Knockin mice with this human Met allele also showed increased aggressive behavior and changed the response to SSRI treatment (Chen et al. 2006). Conditional BDNF knockout mice using kainate receptor promoter lack BDNF expression especially in hippocampal CA3 area. These mice also showed heightened aggression compared to wild-type, suggesting an important role of hippocampal BDNF in aggression (Ito et al. 2011). In contrast to the consistent results on aggressive behavior among BDNF mutant mice, studies on polymorphisms of the BDNF gene in aggressive behavior in humans remain to be resolved. No association was observed between Val66Met polymorphism and proneness to violence in a Chinese male sample (Tsai et al. 2005). Other SNPs in the BDNF gene may be associated with high impulsivity in children with ADHD (Oades et al. 2008). A further role of BDNF is evident in neuroadaptions in the

VTA-accumbens pathway of mice and rats that are repeatedly attacked and show evidence for defeat, submission and disrupted social interactions (Berton et al. 2006; Miczek et al. 2011).

7.3.4 Neuronal Nitric Oxide

Nitric oxide, a free radical gas which diffuses across membranes, is involved in several cellular functions [for review, see Calabrese et al. (2007)]. Mice lacking neuronal nitric oxide synthase (nNOS^{-/-}) show various deficits in their physiological development and also behavior (Huang et al. 1993). nNOS^{-/-} males, but not females, showed higher duration of aggressive behavior and also displayed much fewer submissive postures compared to wild-types (Nelson et al. 1995). Serotonergic dysfunctions were observed in the nNOS^{-/-} mice, specifically reduced 5-HT turnover in the brain and deficient 5-HT_{1A} and 5-HT_{1B} receptor function (Chiavegatto et al. 2001). Escalated aggression in the nNOS^{-/-} was rescued by 5-HTP treatment which increased 5-HT level and turnover. These findings point to an important role of nitric oxide for the normal 5-HT function, and thus increased aggression nNOS^{-/-} may be induced by changing 5-HT activity.

7.3.5 α -Calcium-Calmodulin Kinase II

α -Calcium-calmodulin kinase II (α -CaMKII) is a neural specific enzyme and has been shown to be involved in long-term potentiation (LTP) (Silva et al. 1992). Heterozygotes of α -CaMKII knockout mice showed escalated defensive aggression but not offensive aggression (Chen et al. 1994). In the resident-intruder test, resident α -CaMKII heterozygotes showed similar aggressive behavior as wild-type mice. In contrast, when the mutant was tested as an intruder, they exhibited highly defensive reactions toward the resident. Reduced 5-HT release was observed in the dorsal raphe of α -CaMKII mutant in vitro, and thus the changed 5-HT function may be associated with defensive aggression in this mouse.

8 Concluding Remarks

- Activation of 5-HT_{1A}, 5-HT_{1B} and 5-HT_{2A/2C} receptors in mesocorticolimbic areas reduce species-typical and other aggressive behaviors. In contrast, agonists at 5-HT_{1A} and 5-HT_{1B} receptors in the medial prefrontal cortex or septal area can increase aggressive behavior under specific conditions. 5-HT exerts a complex role in aggression that depends on (1) the subtypes of receptors and the brain in which they are expressed (2) the types of aggressive behaviors, and

(3) the trait characteristics of the human subject or the mouse (i.e., *Mus musculus* is a pugnacious species and many inbred strains are quite placid).

- Based on genetic studies, it is likely that the 5-HT_{1B} receptor has an important role in the inhibition of aggression. For other receptor subtypes such as 5-HT_{1A} or 5-HT_{2A} receptors, the association between aggressive behavior and polymorphisms in receptor genes all failed to have a reliable relationship compared to relatively consistent pharmacological data. It may be important to determine where in the brain of aggressive individuals the gene expression is changed by the polymorphisms.
- An important role of MAOA in aggressive behaviors is supported by genetic studies of deleterious mutation of MAOA gene in humans and knockout mice. In contrast to the serotonin deficiency hypothesis, these results suggest that chronically increased 5-HT levels due to reduced MAOA function—trait-like change—may promote or intensify escalated aggressive displays.
- Consistent anti-aggressive effects of SSRI treatment in several species strongly point to the serotonin transporter as a promising therapeutic target for management of impulsive, escalated aggression. More studies are required to determine the precise neurobiological mechanisms recruited for the anti-aggressive effects of SSRIs to emerge, especially as a result of chronic treatment that induces pre- and post-synaptic neuroadaptive processes.
- The genetic studies in human and nonhuman primates also suggest 5-HTT polymorphisms such as the short allele as a risk factor for violent traits, which seems to be particularly relevant in combination with environmental stress. Results from transgenic mice lacking 5-HTT are more difficult to interpret due to the wide variety of behavioral functions that are affected by the genetic manipulation.
- Gene polymorphism studies of MAOA, 5-HTT and Tph2 revealed critical gene-environment interactions as a risk factor for violent traits. Individuals with a certain allele are particularly prone to engage in violent behavior when they have a history of early life maltreatment, but the effect disappeared when they are reared in an environment with low stress.
- Modulatory mechanisms of serotonergic neurons that induce escalated aggression have gradually been identified. So far, evidence points to the modulations of activity of dorsal raphe nucleus by GABA, glutamate, CRF and its auto-receptors as being particularly relevant to the display of escalated aggression. Genetic analyses of aggressive individuals have identified several molecules that affect the 5-HT system directly (e.g., Tph2, 5-HT_{1B}, 5-HT transporter, Pet1, MAOA) or indirectly (e.g., Neuropeptide Y, α CaMKII, NOS, BDNF).

In the current phase of advanced molecular genetic studies, it is necessary to remind ourselves to match them with more sophisticated behavioral methodologies of aggression. It is evident that the neurogenetic mechanisms differentiate types and patterns of aggressive behavior requiring higher resolution. The current focus

on brain serotonin takes advantage of the most intensively studied neural system that has been implicated in the neurogenetics of aggression. It remains astounding how such trace amounts of this indole amine can engender such profound changes in aggressive traits and states.

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Selectively Bred Rodents as Models of Depression and Anxiety

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Abstract Stress related diseases such as depression and anxiety have a high degree of co morbidity, and represent one of the greatest therapeutic challenges for the twenty-first century. The present chapter will summarize existing rodent models for research in psychiatry, mimicking depression- and anxiety-related diseases. In particular we will highlight the use of selective breeding of rodents for extremes in stress-related behavior. We will summarize major behavioral, neuroendocrine and neuronal parameters, and pharmacological interventions, assessed in great detail in two rat model systems: The Flinders Sensitive and Flinders Resistant Line rats (FSL/FRL model), and rats selectively bred for high (HAB) or low (LAB) anxiety related behavior (HAB/LAB model). Selectively bred rodents also provide an excellent tool in order to study gene and environment interactions. Although it is generally accepted that genes and environmental factors determine the etiology of mental disorders, precise information is limited: How rigid is the genetic disposition? How do genetic, prenatal and postnatal influences interact to shape adult disease? Does the genetic predisposition determine the vulnerability to prenatal and

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postnatal or adult stressors? In combination with modern neurobiological methods, these models are important to elucidate the etiology and pathophysiology of anxiety and affective disorders, and to assist in the development of new treatment paradigms.

Keywords Animal models • Selective breeding • Depression • Anxiety

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1 Introduction

It has been estimated that 127 million Europeans out of a population of 466 million currently live with a brain disorder, with total annual costs (of brain disorders in Europe) of €386 billion in 2004 (Andlin-Sobocki et al. 2005). Of these, mental disorders constitute about 60% of the total costs reflecting the large socioeconomic burden of these diseases. These numbers greatly emphasize the importance of developing new strategies in treating mental disorders.

Stress-related diseases such as depression and anxiety, having a high degree of co-morbidity, represent one of the greatest therapeutic challenges for the twenty-first century. Although it is generally accepted that genes and environmental factors determine depression, precise information is limited: How rigid is the genetic disposition? How do genetic, pre- and post-natal influences interact to shape adult depression? Does the genetic predisposition determine the vulnerability to pre- and post-natal or adult stressors?

When depression, and in some degree anxiety, precipitates, the dominating etiological hypotheses have focused at a dysregulation in the serotonergic and noradrenergic system. This is emphasized by the mechanism of action of the

currently marketed antidepressants, which almost exclusively act by direct modulation of these two systems. Unfortunately, the efficacy of the presently clinically used antidepressant drugs are low, only approximately 30–35% after subtracting the placebo effects. Thus, there exists a major unmet medical need, the resolution of which is contingent on elucidating the disease etiology and pathogenesis.

Therefore, good model systems are needed to answer fundamental neurobiological questions and to predict responses to novel therapeutic agents. Animal models can be assessed on the basis of five major criteria (Willner 1984; Geyer and Markou 1995): face validity (how well the model resembles the disease/condition), construct validity (how well the model is consistent with theoretical rationale), etiological validity (how identical are the etiologies of the disease (phenomenon) in the animal model and in humans), convergent/discriminant validity (the degree to which a test correlates with other tests that attempt to measure the same construct/ the degree to which a test measures aspects of a phenomenon that are different from other aspects of the phenomenon that other tests assess (Campbell and Fiske 1959), and predictive validity (how well the model responds favorably to clinically established drugs). An optimal model fulfills all the criteria. However, a model can even be useful, even if not all conditions are met (Geyer and Markou 1995).

Genetic selection for behavioral and other phenotypic characteristics is a core feature in evolution, and crucial for survival of any species. Selective breeding is the process of breeding plants or animals for particular genetic traits, which is desired by the researcher. Selective breeding has proven to be a valuable tool in the advancement of science. In fact, one of the most commonly used animals in laboratory research, the Wistar rat, may be considered—in the strict terms of selective breeding—an example of selective breeding. This strain was developed at the Wistar Institute in 1906 for use in biological and medical research, and it was the first rat strain developed to serve as a model organism at a time when biological laboratories primarily used mice (Clause 1998; Lindsay and Baker 2006). Several of the laboratory rat strains used today originate from the original Wistar colony established by Donaldson, Greenman, and King (Clause 1998; Lindsay and Baker 2006).

With this development, it is therefore not surprising that several selectively bred animal models also have been established in neuroscience and psychiatric research.

Selectively bred models are essential for studying underlying mechanisms of the disease and have been established for various psychopathological entities/phenotypes, as it appears from Table 1.

The present chapter will highlight the use of selective breeding in order to establish animal models for research in psychiatry, with special focus on depression and anxiety disorders. We will highlight two rat models: the Flinders Sensitive and Flinders Resistant Line (FSL/FRL) and rats selectively bred for high (HAB) or low (LAB) anxiety-related behavior (HAB/LAB model). A very brief description of other existing selectively bred rodents, modeling depression and anxiety is also given. For the remaining models on e.g., schizophrenia and epilepsy, a detailed description can be found in the references listed in Table 1.

Table 1 Overview of some selectively bred animal models

Disease/phenotype	Model	Species	Reference
ADHD/impulsivity	Naples high/low excitability (NHE/NLE)	Rats	Sadile et al. (1988); Carbone et al. (1993); Viggiano et al. (2003)
Aggression	Novosibirsk	Rats	Naumenko et al. (1989)
	Turku	Mice	Sandnabba (1996)
Alcoholism	SAL/LAL	Mice	van Oortmerssen and Bakker (1981)
	HAD/LAD	Rats	Li et al. (1993); Li and Lumeng (1977); Murphy et al. (2002)
	Fawn hooded (FH/Wjld)	Rats	Rezvani et al. (1990), (1991), (2007)
Anxiety	Florida H and L	Rats	Ramos et al. (1998), (2002), (2003)
	HAB/LAB	Rats	<i>See Main Text</i>
	HAB/LAB	Mice	Liebsch et al. (1998b); Landgraf and Wigger (2002); Landgraf et al. (2007)
Depression	Maudsley MRS/MNS	Rats	Kessler et al. (2011); Kromer et al. (2005)
	High/low avoidance: syracuse SHA/BRU and SLA/Bru	Rats	Broadhurst (1960); Blizard and Adams (2002)
	Roman HA/LA	Rats	Brush et al. (1985), (1989); Brush (2003)
	WKY	Rats	Pare and Redei (1993); Lahmame et al. (1997); Will et al. (2003)
	FSL/FRL	Rats	<i>See Main Text</i>
Epilepsy	SwLo/SwHi	Rats	Overstreet et al. (2005); Overstreet (1986)
	LR/HR	Mice	West and Weiss (1998b)
	cLH/cNLH	Rats	Touma et al. (2008)
	Fawn hooded (FH/Wjld)	Rats	Vollmayr and Henn (2001); Vollmayr et al. (2001)
	WAG/Rij	Rats	Rezvani et al. (2002)
Schizophrenia	Gaers	Rats	Van Luijckelaar and Coenen (1986), (1989); Coenen and Van Luijckelaar (2003)
	APO-SUS/APO-UNSUS	Rats	Vergnes et al. (1982); Marescaux et al. (1992); Marescaux et al. (1984)
		Rats	Ellenbroek and Cools (2000); Costall and Naylor (1973); Ellenbroek and Cools (2002)

Table 2 Symptoms in depressed individuals which can be modeled in FSL rats

Symptom/activity	Patients	FSL rats
Suicidal ideas	Frequent	Cannot be modeled
Activity	Psychomotor retardation	Reduced bar pressing for rewards
Anhedonia	Yes	Yes (following stress)
Appetite	Reduced	Reduced
Weight	Weight loss	Lower body weight
Cognitive performance	Reduced	Reduced/normal (dependent on test)
REM Sleep	Elevated	Elevated
Anxiety	Not a core feature	No anxiety
HPA axis dysregulation	Yes	Yes
Treatment response (see text)	Yes	Yes
Killer T-cell activity	Reduced	Reduced
Cardiovascular morbidity	Increased	Increased

2 Selectively Bred Models on Depression

2.1 *The Flinders Sensitive and Resistant Line Rat*

The Flinders Line rats were established by selective breeding for differential responses to the anticholinesterase agent, diisopropyl fluorophosphate (DFP), at Flinders University in Adelaide, Australia. The original rationale was to breed a rat strain that would be genetically resistant to irreversible anticholinesterase agents, DFP. However, the selective breeding of Sprague–Dawley (SD) rats, resulted in a line more sensitive to DFP, the Flinders Sensitive Line (FSL), whereas the Flinders Resistant Line (FRL) rats were not more resistant than an outbred control (Overstreet et al. 1979; Russell et al. 1982). Being less tolerant to DFP, the FSL rat were also found to be more sensitive to drugs targeting the cholinergic system, in particular effects of directly acting muscarinic receptor agonists (Russell and Overstreet 1987; Overstreet and Russell 1982; Overstreet 1986) and to have more muscarinic receptors in several brain regions (Overstreet and Russell 1984).

As it also was reported that depressed individuals were more sensitive to cholinergic agonists than normal controls, defined by behavior, neuroendocrine measures and sleep (Janowsky et al. 1980, 1994; Risch et al. 1981), it was suggested that the FSL rat might be a model for depression.

Today there are now breeding colonies of the FSL rats in Australia, Canada, Denmark, Greece, Israel, Mexico, South Africa, Sweden and United States.

2.1.1 Key Features of the FSL Rat Depression Model

As mentioned, the FSL line phenotypically resembles a number of depression symptoms and has been a useful tool to elucidate the endophenotype of depression. Indeed, extensive work has demonstrated that many of the core symptoms of

depression can be reproduced in the FSL strain; the more salient characteristics are shown in Table 1.

Depression-Related Behavior

Several observations of the unmotivated and motivated behavior of the FSL rat suggest that it exhibits psychomotor retardation, a key behavioral characteristic of depressed individuals (Lecrubier 2006). In particular, the FSL rat is less active in a novel open field (Overstreet and Russell 1982; Overstreet et al. 1986), bar-presses at a low rate for water or food reward (Overstreet and Russell 1982; Bushnell et al. 1995), and does not complete food-motivated nonmatching- to-sample learning trials in a timely manner (Bushnell et al. 1995).

Importantly, the FSL rats show increased immobility in the forced swim test (FST), which is the prototypic screening tool for depression-like behavior in rodents (Overstreet and Russell 1982; Schiller et al. 1992; El Khoury et al. 2006). Especially of interest for the predictive validity of the model, these behaviors are reversible by chronic but not acute treatment with antidepressants.

Anhedonia, the inability to experience pleasure, is often regarded as a core symptom of depression. Interestingly, under basal conditions the FSL compared to FRL rats did not show signs of anhedonia, and signs of anhedonia were only found when FSL rats were exposed to chronic mild stress (Pucilowski et al. 1993; Matthews et al. 1996), supporting this model as being a candidate for Gene \times Environment studies. We have replicated these findings, and found that group housed FSL rats display a higher level of anhedonia following chronic mild stress exposure, when compared with the FRL rats (Mathé et al. unpublished results).

A reduction in appetite is a classical symptom seen in most depressed individuals, while an increase in appetite and weight gain is observed in fewer. Appetite and food intake in the FSL and FRL rats has not been studied in detail, but the FSL rat weighs less than the FRL rat and in a recent study the FSL were found to consume less food than FRL (Abildgaard et al. 2010). It, therefore, appears that the FSL rats have a decreased appetite thus resembling the reduced appetite in depressed individuals.

Anxiety-Related Behavior

Anxiety is not considered a core feature of depression, but there exist a high degree of co-morbidity of anxiety with depression. Therefore, the behavior of FSL was examined in the classical test of anxiety-like behavior, the elevated plus maze (EPM), which is an unconditioned test for anxiety in rodents, and works by creating a conflict between an animal's exploratory drive and its fear of open and brightly-lit areas. Under baseline conditions no differences were discovered between the FSL and FRL lines (Overstreet et al. 1995). Treatment with a benzodiazepine exerted a comparable anxiolytic effect in both FSL and FRL rats

and did not differentiate between the two strains (Schiller et al. 1991; Mathé et al. unpublished data).

However, our own recent results demonstrated that FSL rats had a reduced level of unconditioned anxiety on the EPM compared to the FRL rats (Abildgaard et al. 2010). Specifically, the FSL spent more time on the open arms and had a higher level of full entries onto open arms. Similar findings have been described in young FSL rats compared to SD rats (Braw et al. 2006). It is, however, of interest to note that FSL rats did exhibit some anxiogenic behavior in the social interaction task (Overstreet et al. 2004b), which may reflect enhanced social anxiety, or alternatively, reduced social motivation and social withdrawal.

Taken together, as anxiety does not seem to be a prominent feature of the FSL strain, the FSL rats seem to be a model for depression without comorbidity of anxiety. However, as anxiety can be judged from multiple paradigms, further studies are warranted.

Cognition

Cognitive disturbances in depressed individuals can involve both learning difficulties and memory loss. Most learning and memory studies on FSL rats used foot shock as the motivating stimulus, where the FSL rat show greater difficulty in acquiring a shock-motivated, active avoidance task (Overstreet et al. 1990). On the other hand, the FSL rat exhibited normal memory of a shock-motivated passive avoidance task (Overstreet et al. 1992; Russell et al. 1982). Also in a food-motivated task similar completion rates between the FSL and the FRL were obtained, achieved by reducing the size of the food pellet in the FSL rats (Bushnell et al. 1995). Although the FSL rats did not perform this task as rapidly as the FRL rats, they chose the correct bar just as efficiently (Bushnell et al. 1995). Thus, there is no definitive evidence for cognitive disturbances in the FSL rats under basal conditions, which is further underlined by a recent study from Aarhus, where the FSL show similar spatial memory abilities as the FRL in the Morris Water Maze (Wegener et al. unpublished).

Pain

Affective disorders have been repeatedly linked with alterations in thermal and visceral pain perception (Haug et al. 2004; Vedolin et al. 2009; Robinson et al. 2009). However, only a limited number of studies have been carried out in the FSL model. In a model with partial denervation of the sciatic nerve (PSL model), which produces a chronic decrease in touch and heat withdrawal thresholds (allodynia) and an increased response to noxious mechanical and heat stimuli (hyperalgesia, Fujioka et al. 2001; Fumagalli et al. 2007), the FSL rats expressed significantly lower levels of tactile allodynia and less heat hyperalgesia following PSL injury compared to SD rats

(Shir et al. 2001). These studies have been carried out using a denervation model, and no results for basal pain parameters are available.

Sleep Patterns

Sleeping disorders are very closely associated with depressive disorders, with both insomnia and hypersomnia being observed. Two pronounced changes associated with depression are increases in rapid eye movement (REM) sleep and decreases in slow wave sleep (Jindal et al. 2002; Thase et al. 1995; Benca 1996; Benca et al. 1992; Adrien 2002). Basal sleep recordings in the FSL have demonstrated that the FSL rat exhibited a reduced latency to—and greater amount of REM sleep than the FRL rats (Benca et al. 1996; Shiromani et al. 1991), with no differences in slow wave sleep patterns. Thus, the FSL rat resembled depressed individuals with regard to the elevated REM sleep, but not with regard to the reduced slow wave sleep (Jindal et al. 2002; Benca et al. 1992).

Hypothalamic-Pituitary Adrenal Axis

Distinct changes in the Hypothalamic-Pituitary Adrenal (HPA) axis reactivity and cortisol levels in severe depression (melancholia) are well documented (Keck and Holsboer 2001). However, studies in the FSL/FRL model are conflicting: Whereas no differences in corticosterone levels under basal conditions or in response to a chronic mild stressor have been found (Ayensu et al. 1995), in another study, the FSL rats had significantly lower plasma ACTH concentrations compared with the FRL, but still with no differences in plasma corticosterone concentrations between the two groups (Owens et al. 1991). In the brain, it was found that the density of anterior pituitary CRF receptor binding sites was elevated in the FSL rats compared with the FRL (Owens et al. 1991).

This finding is further substantiated by later studies, where FSL and FRL, were subjected to 1 h acute restraint and the effects of the stress exposure, including possible strain specific changes were studied (Zambello et al. 2008). Under basal conditions, no significant differences between FSL and FRL rats in the CRH mRNA expression were found. However, an upregulation of the CRH mRNA hybridization signal was detected in the central amygdala of the stressed FRL, compared to the non-stressed FRL rats (Zambello et al. 2008). Following these findings, it was hypothesized that, since a hypoactive mechanism of response to stressful stimuli in the FSL rats was present, lack of amygdala CRH activation following stress could suggest a subtype of allostatic load, which may alter the interpretation of environmental stimuli by FSL rats and consequently influence their behavioral response to stressful situations (Zambello et al. 2008). However, these suggestions require further examinations.

Monoamine Metabolism

The monoaminergic hypothesis of depression (Schildkraut 1965) suggests that there are distinct abnormalities of the serotonergic system in depressed individuals, although several inconsistencies exist. For example, both serotonergic 5HT_{1A} receptor overactivity (Arango et al. 1995) as well as 5HT₂ receptor underactivity have been reported (Mikuni et al. 1991).

In the FSL, several differences in the serotonin synthesis, 5HT_{1A} receptor sensitivity and the density of the serotonin transporter were found compared to the FRL strains (Overstreet et al. 1994; Kanemaru et al. 2009; Nishi et al. 2009; Kovacevic et al. 2010). However, whether these abnormalities are comparable to those seen in depressed individuals are not known, and there are some data suggesting inverse pharmacological responses in FSL rats and depressed individuals. For example, studies have shown that the FSL rats are more sensitive to the hypothermic effects of 5-HT_{1A} receptor agonists (Wallis et al. 1988; Overstreet et al. 1994), but depressed individuals are usually less sensitive to these effects of similar agents (Lesch 1991). Moreover, in depressed individuals, both increases (Reddy et al. 1992), decreases (Asberg et al. 1984) or no changes (Roy et al. 1985) in the serotonin metabolite 5-hydroxy-indoleacetic acid (5-HIAA) in cerebrospinal fluid have been reported. How this may relate to the FSL model remains to be established.

The psychomotor retardation and anhedonia-like features following chronic mild stress (CMS) in the FSL rats may suggest the dopaminergic system to be involved. This has been supported by a few studies on dopamine metabolism and release from selected brain regions of FSL rats (Zangen et al. 2001; Yadid et al. 2001), and in behavioral responses to dopaminergic agents (Crocker and Overstreet 1991). However, it is not clear how these findings can be translated to human pathology.

Nitric Oxide Signaling

The atypical neurotransmitter nitric oxide (NO) possesses both neuroprotective and neurodestructive properties (Dawson and Dawson 1996; McCaslin and Oh 1995). Nitric oxide has been implicated in the psychopathology of depression, as postmortem studies on brains from the Stanley Consortium (Bethesda, MD, USA) have demonstrated that patients suffering from depression have an increase in NO synthase-immunoreactivity in the CA1 hippocampal area (Oliveira et al. 2008). By virtue of its unpaired electron, NO promotes the formation of free radicals and has been linked to various neurodegenerative processes (Ischiropoulos and Beckman 2003). Drugs that affect the major NO pathways have also been shown to possess antidepressant-like properties (Wegener and Volke 2010), and antidepressants have been shown to affect the NO signaling (Wegener et al. 2003). Investigation of NO signaling in the FSL rats did not reveal any baseline FSL–FRL differences in hippocampal constitutive NO synthase (cNOS) activity and neuronal nitric oxide

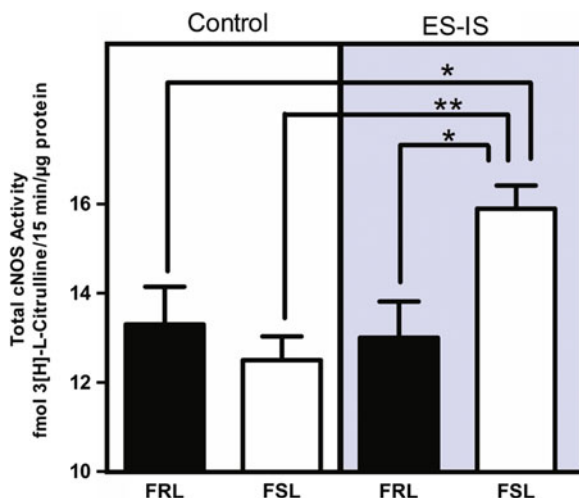


Fig. 1 Hippocampal constitutive nitric oxide synthase (cNOS) activity data under basal conditions [FSL ($n = 8$), FRL ($n = 7$)], and following escapable stress/inescapable stress (ES-*IS*) [FSL ($n = 8$), FRL ($n = 7$)]. Following ES-*IS*, cNOS activity is significantly elevated in FSL rats compared to unstressed FSL controls (** $p < 0.005$) and versus pre- and post-stress FRL animals (* $p < 0.05$). Pre- and post-stress activity levels for FRL rats did not differ from one another. Values shown are means + S.E.M. Reprinted from (Wegener et al. 2010) with permission. © Cambridge University Press

synthase (nNOS) protein levels. However, following exposure to stress in the escapable stress/inescapable stress paradigm, the FSL strain showed a larger activation of the cNOS system (Fig. 1), confirming the NMDA-NO cascade as an important vulnerability factor in the depression-like phenotype of the FSL rat (Wegener et al. 2010). Furthermore, several distinct agents affecting NO synthesis have also been shown to be effective antidepressants in the FSL (Wegener et al. unpublished observations, see Table 3).

Neuropeptides

Neuropeptide Y (NPY) is one of the most abundant peptides in the mammalian brain, interacting with the noradrenaline, serotonin and dopamine systems with effects on multiple brain functions. Several findings suggest that NPY plays an important role in the pathophysiology of depression and anxiety (Mathe et al. 2007; Heilig 2004).

Studying NPY in FSL has revealed marked similarities between vicissitudes of NPY in the rat depression models and human subjects. Thus, we have shown decreased NPY levels in the hippocampus of the FSL rats (Jimenez-Vasquez et al. 2000), and NPY protein and mRNA were found reduced in the CA1-2 regions and the dentate gyrus of FSL rats compared with FRL (Jimenez-Vasquez et al. 2000).

Table 3 Effect of some antidepressants (common and experimental), in the forced swim test (FST) in FSL (See also Overstreet et al. (2005); and Overstreet (1993))

Class	Drug	Response in FST	References
TCA	Desipramine	+	Overstreet et al. (2004b); Overstreet and Griebel (2004); Overstreet et al. (2010a); Overstreet et al. (2004a); Overstreet et al. (2008)
	Imipramine	+	(Schiller et al. (1992); Liebenberg et al. (2010)
	Nortryptiline	+	Petersen et al. (2009)
NaSSA	Nefazodone	+	Dremencov et al. (2004)
SSRI	Citalopram	+	Overstreet et al. (2004b)
	Escitalopram	+	El Khoury et al. (2006); Wegener et al. (unpublished)
	Paroxetine	+	Zangen et al. (2001); Zangen et al. (2002); Zangen et al. (1999), (1997)
	Sertraline	+	Pucilowski and Overstreet (1993)
	Fluoxetine	+	Overstreet and Griebel (2004); Overstreet et al. (2004a); Overstreet et al. (2008)
NOS inhibitors	Methylene blue	+	(Wegener et al. (unpublished)
	L-NAME	+	(Wegener et al. (unpublished)
	7-Nitroindazole	+	(Wegener et al. (unpublished)
NPY R5 antagonist	Lu AA33810	+	Walker et al. (2009)
CRF antagonist	CP-154,526	-	Overstreet et al. (2004b)
	SSR125543	+	Overstreet and Griebel (2004)
NK2 antagonists	Sareductant	+	Overstreet et al. (2010b)
Melatonin antagonists	S 20304	+	Overstreet et al. (1998)
PDE inhibitors	Rolipram	+	Overstreet et al. (1989)
	Sildenafil	+	(together with atropine)
Miscellaneous	ECS	+	Liebenberg et al. (2010)
	Tianeptine	+	Jimenez-Vasquez et al. (2007); Wegener et al. (unpublished)
	Ketamine	+	Wegener et al. (unpublished)
	Exercise	+	Bjornebekk et al. (2005)
	Nerve growth factor	+	Overstreet et al. (2010a)
	Nemifitide	+	Overstreet et al. (2004a)
	Amibegron	+	Overstreet et al. (2008)
	Lu AA21004	+	Mørk et al. (2012)
	Inositol	+	Einat et al. (2002)

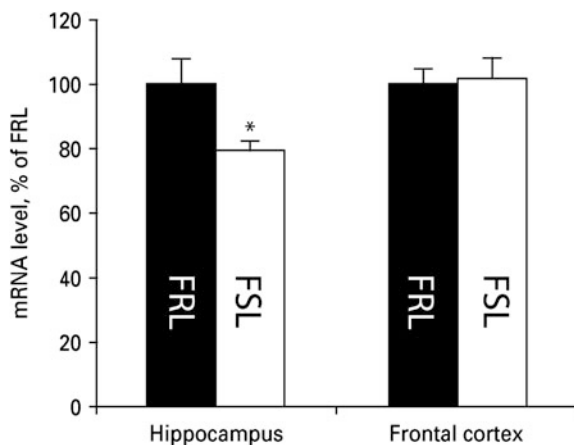


Fig. 2 Messenger RNA samples from hippocampus and frontal cortex of FSL (%; $n = 9$) and FRL (&; $n = 9$) rats were used for quantification of the expression levels of BDNF using real-time qPCR. Values for each individual were normalized with the geometric mean of the reference genes *Ywhaz* and *Hmbs* in the hippocampus and *Ywhaz* and *Actb* in the frontal cortex. Plotted data show mean group values + S.E.M. of mRNA expression as % of FRL rats. * Indicates significant between-group differences ($p < 0.05$). Reprinted from (Elfvig et al. 2010a) with permission. © Cambridge University Press

In contrast, local NPY-Y1 receptor binding was increased, indicating functional significance of the changes in NPY availability (Jimenez-Vasquez et al. 2000a, 2000b; Husum et al. 2001; Caberlotto et al. 1999; Mathe et al. 2007).

Consistent with these data are the findings that antidepressants, lithium and ECS, all increase NPY expression in selected brain regions, and that the increases are larger in the FSL compared with the FRL strain (Husum et al. 2003; Husum et al. 2001; Jimenez Vasquez et al. 2000; Jimenez-Vasquez et al. 2007). For instance, reduced NPY levels in the CSF of depressed patients and altered NPY and NPY receptors mRNA expression in post-mortem brains have been shown (Widdowson et al. 1992; Olsson et al. 2004; Hou et al. 2006; Heilig 2004; Caberlotto et al. 1999; Caberlotto and Hurd 2001). Conversely, increased NPY concentrations in CSF following successful treatment of depressed in-patients with citalopram or ECT have been reported (Nikisch and Mathe 2008; Nikisch et al. 2005).

Neurotrophic Factors

Several studies have found decreased serum or plasma brain-derived neurotrophic factor (BDNF) levels in depressed patients, and a positive correlation between BDNF reduction and the severity of the disease has also been observed (Shimizu et al. 2003; Karege et al. 2002, 2005; Aydemir et al. 2006). Moreover, in

post-mortem hippocampal tissue, increased levels of BDNF immunoreactivity have been reported in subjects treated with antidepressants compared to untreated subjects (Chen et al. 2001). These findings constitute the rationale for studying BDNF also in the FSL model of depression. In a recent study from Aarhus, BDNF expression in the hippocampus was significantly decreased in the FSL compared with FRL rats (Fig. 2), while no differences were found in the frontal cortex or CSF (Elfving et al. 2010a). Contraintuitively, BDNF levels in serum and whole blood of the FSL rats were significantly increased compared with FRL rats (Elfving et al. 2010a). Whether this finding is relevant, or a peculiarity of the FSL, remains to be fully established. However, recent studies underline that multiple factors must be taken into consideration when correlating serum BDNF with clinical state (Elzinga et al. 2011; Bus et al. 2011; Gass and Hellweg 2010; Sartorius et al. 2009). Nevertheless, the regulation of the BDNF levels in hippocampus, serum, and whole blood in FSL and FRL rats adds to the hypothesis that neurotrophic factors may be related to the pathophysiology of depression.

Similar to findings with BDNF, we have recently characterized vascular endothelial growth factor (VEGF) in the FSL rats. VEGF protein, but not mRNA, expression in the hippocampus and frontal cortex were found to be significantly decreased in the FSL compared with FRL rats, while no differences were found in the striatum, hypothalamus or serum (Elfving et al. 2010b).

Neurogenesis and Cell Proliferation

Hippocampal neurogenesis has been implicated in the etiology of depression and has been suggested to constitute the final common mechanism underlying antidepressant treatments (Santarelli et al. 2003). In order to further explore the hypothesis that reduction in hippocampal neurogenesis contributes to the etiology of depression, which was essentially based on studies on healthy rats exposed to repeated or chronic stressors, the FSL model was tested under a variety of circumstances (Petersen et al. 2008, 2009; Husum et al. 2006; Bjornebekk et al. 2007).

We found that adult FSL rats have significantly more BrdU-immunoreactive (IR) cells in the dentate gyrus compared with FRL, and aging caused an exacerbated loss of these cell types in the FSL. FSL animals treated chronically with nortriptyline, there was no apparent effect on the number of BrdU-IR cells, although it significantly decreased the immobility time in the FST (Petersen et al. 2009). Taken together, these results clearly demonstrate a dissociation of the effects of antidepressants on behavior in the FST and cell proliferation. Thus SSRIs and tricyclics can decrease immobility in the FST without affecting the cytogenesis and, conversely, increased cytogenesis is not necessarily reflected in decreased depression-like behavior in FST. These data are of importance since they indicate that changes in cell proliferation may be sufficient, but are not necessary for antidepressant effects of currently used antidepressants in the FSL/FRL model.

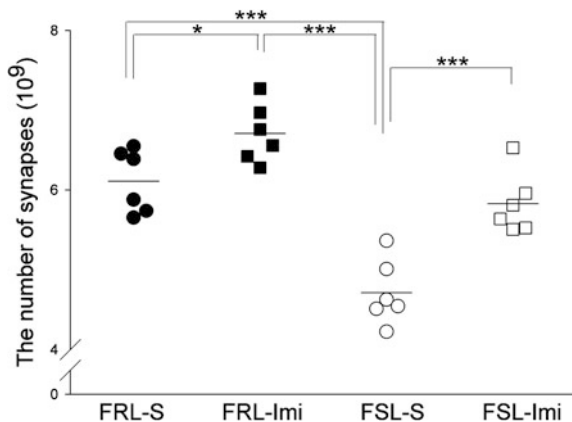


Fig. 3 Effect of Imipramine on the non-perforated spine synapses in FSL and FRL rats. The total number of spine synapses in the CA1 stratum radiatum was significantly smaller in the FSL rats compared to the FRL rats. Following 3 weeks of Imipramine (Imi, 15 mg/kg/day) there were a significant increase in the spine synapses in both FSL and FRL, thereby normalizing the FSL spine synapse numbers. (* $p < 0.05$; *** $p < 0.001$). Modified from (Chen et al. 2010) with permission. © John Wiley & Sons

Also other aspects of brain remodeling have been proposed to be essential for development of disease. Thus, both the hippocampal volume (Videbech and Ravnkilde 2004) and synaptic morphology may play a role (Nestler et al. 2002). Therefore, we have investigated changes in hippocampal volume, neuron and synapse numbers in the FSL and FRL following chronic imipramine therapy, using design-based stereological methods (Chen et al. 2010). We found that the volume and the number of neurons and synapses were significantly smaller in the FSL saline group compared with the FRL saline group, a feature which was reversed following imipramine treatment (Fig. 3). Our experiments illustrate the importance of using a disease model to study cell proliferation and effects of treatments that could potentially be translated to human condition.

Cardiovascular and Metabolic Function

Depression is a well-known risk factor for the development of ischemic heart disease and is associated with increased cardiovascular morbidity and mortality (Barefoot and Schroll 1996; Egede et al. 2005; Hemingway and Marmot 1999; Rugulies 2002). Major depression doubles the risk of adverse cardiovascular events within 12 months in patients with newly diagnosed coronary heart disease (Carney et al. 1988) and increases the risk of mortality after acute myocardial infarction (Frasure-Smith et al. 1993). The presence of diabetes has been found to double the risk of co-morbid depression (Anderson et al. 2001), and a meta-analysis has shown that depression increases the risk of developing type 2 diabetes

in adults by 37% (Knol et al. 2006). In a study comparing the myocardial responsiveness to ischemia/reperfusion injury and the effects of ischemic preconditioning in hearts from FSL rats using SD rats as controls, it was observed that the myocardial infarct size was significantly larger in the FSL rats than in the SD rats following ischemia/reperfusion injury, but have maintained cardioprotective mechanism following ischemic preconditioning (Solskov et al. 2010). In the same study, it was also demonstrated that FSL were hyperinsulinemic, with a strong tendency in different levels of fasting glucose levels compared with SD rats (Solskov et al. 2010).

However, in a recent study performed in Aarhus, we have not been able to detect any difference in fasting glucose levels in FSL compared with FRL (Abildgaard et al. 2010). Metabolic stress induced by a high fat diet increased insulin levels during an oral glucose tolerance test in both FSL and FRL, with fasting blood glucose levels significantly increased by high fat diet in the FSL rat (Abildgaard et al. 2010). Interestingly, the metabolic changes were associated with increased depression-like behavior in the FST and cognitive impairments in the object recognition test in the FSL only. These findings confirm the FSL as a model with a greater metabolic susceptibility, and further highlight the usefulness of the model in translational interdisciplinary depression research.

2.1.2 Gene × Environment Interactions

Interactions with the environment, which can have negative or positive consequences, have also been found to be a major determinant of disease. For example, psychosocial stress in adulthood impairs the health condition of the individual (Lupien et al. 2009; Bale et al. 2010; Reber et al. 2007), whereas social support or exercise exert beneficial effects on somatic and mental health (Brene et al. 2007; Dishman et al. 2006; Dunn and Dishman 1991; Young 1979; Neumann 2009).

The consequences of acute, subchronic or chronic stress are largely dependent on the individual (and genetically determined) stress susceptibility, and there is good evidence that FSL and FRL as well as HAB and LAB rats provide good models to study gene × environment interactions. For example, as mentioned above, a subchronic adult stress paradigm significantly upregulates the NO signaling pathway in the FSL only (Wegener et al. 2010), and metabolic stress more severely impacts the FSL compared with the FRL (Abildgaard et al. 2010). In another series of experiments, we compared adult female FSL and SD rats in a paradigm of 7 weeks of social isolation at the age of 29 weeks, and observed increased number of BrdU-IR cells in the FSL, whereas it had no impact in the SD strain (Bjornebekk et al. 2007). Other environmental stimuli may be experienced positive. Thus, we have examined the effect of physical activity using running wheels. We observed that voluntary wheel running had antidepressant effects and selectively altered NPY and NPY Y1 receptor and opiate expression in the FSL, but not FRL, rats further supporting a role of NPY in their phenotype

(Bjornebekk et al. 2006, 2010). These findings parallel and support the results from human studies (Russo-Neustadt et al. 1999; Ransford 1982).

In addition to adult stress exposure, gene \times environment interactions have been described with respect to early-life stress, either prenatally or postnatally. Thus, a large number of human and animal studies show a strong association between an adverse fetal or immediate postnatal environment and behavioral and emotional development later in life (Abe et al. 2007; Maccari et al. 2003; Nagano et al. 2008; O'Connor et al. 2002; Tazumi et al. 2005; Van Den Bergh et al. 2005). Stressful experiences during early life have been hypothesized to enhance susceptibility (eventually triggered by adult stress) for mental illness (Cottrell and Seckl 2009; Fumagalli et al. 2007; Maynard et al. 2001).

Prenatal stress studies have not yet been carried out in FSL/FRL. However, the classical post-natal stress paradigm, maternal separation, in FSL and FRL have been demonstrated to exacerbate the depression-like behavior of the FSL, but not the FRL (El Khoury et al. 2006). Treatment with escitalopram selectively decreased depression-like behavior in the FST in both maternally non-separated and separated FSL, but not FRL rats (El Khoury et al. 2006). Maternal separation in FSL has been also been found to reduce NPY in dorsal hippocampus of both female and male FSL rats compared with FRL rats (Jimenez-Vasquez et al. 2001; Wortwein et al. 2006).

In another study, we analyzed hippocampal synaptic transmission and plasticity *in vivo* and ionotropic receptors for glutamate in FSL and FRL rats subjected to maternal separation. A strong inhibition of long-term potentiation (LTP) and lower synaptic expression of NR1 subunit of the NMDA receptor were found in FSL rats (Ryan et al. 2009), and unexpectedly maternal separation induced a remodeling of synaptic plasticity only in FSL rats, reducing inhibition of LTP accompanied by marked increase of synaptic NR1 subunit and GluR2/3 subunits of AMPA receptors (Ryan et al. 2009). This finding is in line with the demonstration that maternal separation increased the hippocampal cell number, while consistently with this increase, chronic escitalopram treatment reduced the cell number (Petersen et al. 2008; Husum et al. 2008).

In a study of basal differences in synaptic signaling between FSL and FRL rats, as well as on consequences of maternal separation in adulthood, it was found that the FSL rats showed basal differences in the interaction/activation of distinct synaptic mediators purified hippocampal synaptosomes (Musazzi et al. 2010). In addition, following maternal separation, the FSL rats displayed a blunted response of the mediators, suggesting a synaptic dysfunction in the FSL animals (Musazzi et al. 2010). Escitalopram treatment restored some but not all alterations observed in FSL rats after early-life stress, suggesting that early gene-environment interaction may cause life-long synaptic changes affecting the course of depression-like behavior and response to drugs (Musazzi et al. 2010).

Finally, using an open-ended approach based on a proteomic analysis of serum, maternal separation was found to induce changes in inflammation and transport proteins in FSL rats (Carboni et al. 2010), changes that were partly reversed

following treatment with escitalopram or nortriptyline (Carboni et al. 2010). No comparison between early-life stress in FSL and FRL was carried out.

These experiments underline that the consequences of environmental factors are strongly determined by the genetic background, suggesting that a genetically shaped phenotype can be further modulated by environmental factors.

2.1.3 Response to Treatment

A detailed review of the different studies, where the FSL rat has been used to test for the antidepressant-like effects of drugs lies beyond the scope of this text, and only a brief overview is given in the Table 3. A detailed review of the classical antidepressants and selective serotonin reuptake inhibitors (SSRIs) as well as a variety of novel agents that presumably have different actions from the well-characterized antidepressants, can be found elsewhere (Overstreet 2002, 2005).

2.2 Learned Helplessness Rats (cLH/cNLH)

The learned helplessness (LH) paradigm is a well characterized rat model of depression, in which the animals are exposed to uncontrollable and unpredictable aversive events, i.e., foot shock (Overmier and Seligman 1967). The model has good face and predictive validity, including alterations in HPA axis activity and REM sleep characteristic of depression (Maier 1991; Breier et al. 1987; Henn and Vollmayr 2005). However, in outbred rats not the entire proportion of animals become helpless. Therefore, breeding of helpless lines from Harlan SD outbred rats was initiated in 1990 to achieve a higher yield of helpless animals following inescapable shock-training (Vollmayr and Henn 2001; Henn and Vollmayr 2005). This resulted in congenitally learned helpless (cLH) rats exhibiting a helpless phenotype without exposure to uncontrollable shock, and a congenitally not learned helpless (cNLH) strain being resistant to the effects of inescapable shock (Vollmayr and Henn 2001).

2.3 Fawn Hooded Rats

A high degree of comorbidity between alcoholism and depression have been reported (Merikangas and Gelernter 1990; Cloninger et al. 1979). The Fawn-Hooded (FH/Wjd) rat is an inbred strain of rat, originally selected from a background of platelet serotonin storage abnormality (Tschopp and Zucker 1972). The rat has been reported to exhibit both high immobility in the FST, elevated serum corticosterone and high voluntary ethanol intake, measures that have been linked

with depression and alcoholism in humans (Rezvani et al. 2002, 2007). For example, the FH/Wjd rat drinks up to 6 g/kg 10% ethanol per day, and responds to drugs that are effective in humans with a reduction in alcohol intake (Rezvani et al. 1999). Interestingly, the exaggerated immobility in the FST and the hypercorticotesterone levels can be also attenuated following chronic antidepressant treatments (Aulakh et al. 1988, 1993; Rezvani et al. 1999). The FH/Wjd also exhibits abnormalities in the central serotonergic function (Aulakh et al. 1994; Bendotti and Samanin 1987; Arora et al. 1983; Dumbrille-Ross and Tang 1981), but whether these serotonergic abnormalities contribute to both behaviors remains to be determined. In addition, the first results showing decreased NPY in hippocampus in a model of depression were obtained in the FH, changes that were reversed following ECS (Mathe et al. 1998). These findings were of great heuristic value as they led to subsequent identification of reduced NPY expression in other, both genetic and environmental models, including the FSL/FRL as described above.

2.4 Wistar-Kyoto Rats

The Wistar-Kyoto (WKY) rat strain was developed as the normotensive control strain for the spontaneously hypertensive rat, and bred from the Wistar strain starting in 1963 (Okamoto and Aoki 1963). The WKY presents with hormonal, behavioral, and physiological measures that mimic those found in depressed patients, such as increased immobility in the FST (Lahmame et al. 1997; Rittenhouse et al. 2002; Paré 1992, 1994) and dysregulation of the HPA and hypothalamic–pituitary–thyroid axes (Solberg et al. 2001; Redei et al. 1994; Gómez et al. 1996). However, the WKY responds with variable degree to antidepressants (López-Rubalcava and Lucki 2000; Lahmanie and Armario 1996; Lahmame et al. 1997), and has therefore been proposed as a model of treatment-resistant depression (Lahmame et al. 1997). Therefore, the model has been further developed into ‘WKY most immobile’ (WMI) and ‘WKY least immobile’ (WLI) rats (Will et al. 2003).

2.5 Swim Low-Active/Swim High-Active Rats

Since low motor activity and a condition of passive stress coping in a swim test have been proposed to represent depression-like behavior in the rat, SD rats were bred in accordance with the motor-activities starting in 1987 (Weiss et al. 1998). Two rat lines have been obtained, Swim Low-Active (SwLo) and Swim High-Active (SwHi) rats, which differ dramatically in FST behavior. The SwLo rats show little struggling and much floating, while SwHi rats show the reverse (Weiss et al. 1998). Importantly, when SwLo rats were given antidepressant, chronic but

not acute administration increased swim-test activity of SwLo rats (West and Weiss 1998a). Information on neurotransmitter involvement was limited, but studies suggest involvement of both glutamatergic (Tabb et al. 2007) and dopaminergic (West et al. 1999a, 1999b) mechanisms as well as alterations of the stress axis (Gutman et al. 2008).

2.6 High/Low Stress Reactivity Mice

As mentioned before, dysfunctions (hyper- or hypo-activity) of the HPA axis may play a prominent role in the development of major depressive disorders (De Kloet et al. 1998; Holsboer 2000; Bale 2006). Therefore, attempts of generating animal models mimicking these neuroendocrine core symptoms have been made in order to unravel parameters underlying increased or decreased stress reactivity (Touma et al. 2008). Mice expressing a hyper- or a hypo-reactivity of the HPA axis were selected for the ‘high reactivity’ (HR) and the ‘low reactivity’ (LR) breeding line. Compared with LR animals, the HR males and females were ‘hyperactive’ in some behavioral paradigms (Touma et al. 2008), resembling symptoms of restlessness and agitation often seen in melancholic depression. On the neuroendocrine level, the circadian rhythm of glucocorticoid secretion revealed a flattened diurnal rhythm (Touma et al. 2008), mimicking findings from patients suffering from melancholic depression (Deuschle et al. 1997; Keller et al. 2006).

3 Selectively Bred Models on Anxiety

3.1 Rats Selectively HAB and LAB Anxiety-Related Behavior

An adequate level of innate anxiety and fear is essential for survival of individuals and species. Naturally, there exists a wide individual range in trait anxiety: from extremely low to extremely high. Similarly, in humans, anxiety-related pathologies including generalized anxiety, panic disorders or social phobia, reflect extremes in trait anxiety with significant contributions of adverse life events shaping the individual anxiety phenotype. In order to reveal neuroendocrine, neurochemical and neurogenetic mechanisms of a complex behavioral phenotypes such as anxiety, and in order to identify potential targets for psychotherapy, we have established and extensively studied selectively bred HAB and LAB rats (Landgraf and Wigger 2002; Landgraf et al. 2007; Neumann et al. 2010). This approach is particularly promising to further our understanding of genetic mechanisms underlying anxiety-related disorders. Other relevant rodent models for anxiety-related behavior include exposure to early-life stress (Wigger and

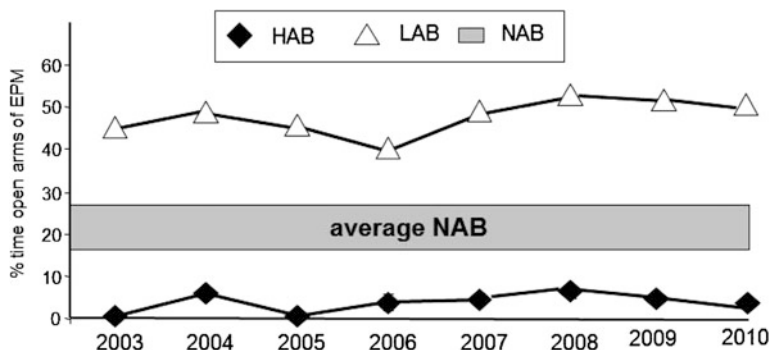


Fig. 4 Anxiety-related behavior of male and female HAB, LAB and non-selected NAB rats on the elevated plus-maze (EPM) which is consistent over the years between 2003 and 2010

Neumann 1999; Huot et al. 2001), chronic stress in adulthood (Barrot et al. 2005; Reber et al. 2007; 2008), or transgenic modifications (Bale 2006; Mantella et al. 2003). Recently, the Landgraf group succeeded in establishing also mice lines selectively bred for high (M-HAB) and low (M-LAB) anxiety-related behavior (see Table 1; Landgraf et al. 2007).

Since 1993, we have selectively and bi-directionally bred outbred Wistar rats for high (HAB) versus low (LAB) anxiety-related behavior based on their behavioral performance on the EPM at the Max Planck Institute of Psychiatry in Munich and, since 2002, at the University of Regensburg (Landgraf and Wigger 2002; Landgraf et al. 2007; Neumann et al. 2010; see Fig. 4). Male and female HAB and LAB rats are selected at the age of 9 weeks for further breeding only, if the percentage of time spent on the open arms of the elevated plus maze (EPM) is below 5% and above 40–45%, respectively. For experimental purposes, HAB rats with an anxiety level of less than 10% and LAB rats with more than 35% time on the open arms during testing at the age of 9 weeks are used.

3.1.1 Key Features of the HAB/LAB Model

Anxiety-Related Behavior

The behavioral profile of HAB and LAB rats with respect to the selection criteria has been reliable and robust over the last 10–15 years (Liebsch et al. 1998b; Neumann et al. 2010; see Fig. 4), is present over all seasons, independent of sex or age and could be confirmed in different European laboratories. The extremes in anxiety could be confirmed in a battery of relevant behavioral tests, including the EPM, the open field, the light dark box and the holeboard (Slattery and Neumann

2010; Ohl et al. 2001; Henniger et al. 2000). In addition, HAB rats are unable to properly extinguish inappropriate fear in tests for conditioned anxiety despite similar acquisition of fear (Muigg et al. 2008). Thus, although bred for high innate non-conditioned anxiety on the EPM, this finding reveals that HAB rats also display exaggerated responses to conditioned fear, which makes them a potentially useful model for posttraumatic stress disorder. Also, LAB rats were able to extinguish this fear faster than non-selected Wistar rats (NAB), again showing robust trait differences between these lines.

Effects of Anxiolytic Treatment

The predictive validity of the HAB/LAB model is substantial, and anxiolytic agents reverse or attenuate the high anxiety phenotype seen in HAB rats.

Acute treatment with the reference anxiolytic drug, diazepam (1 mg/kg, i.p), reduced anxiety in HAB rats on the EPM or in the light–dark box, whereas it was without effect in LAB rats (Liebsch et al. 1998a; Jochum et al. 2007). In addition to its effects on anxiety-related behavior in HAB rats, diazepam also corrected the abnormal pain sensitivity seen in HAB rats (Jochum et al. 2007). Similar to diazepam, we have repeatedly found a reliable and profound anxiolytic effect of chlordiazepoxide (20 mg/kg, i.p.) with relatively low individual differences in responsiveness (Slattery; Beiderbeck and Neumann, unpublished).

Also, manipulation of various relevant anxiogenic and anxiolytic neuropeptide systems of the brain, such as arginine vasopressin, CRH, oxytocin and neuropeptide S, respectively, was found to be effective in reducing the high level of anxiety seen in HAB rats.

Depression-Like Behavior

Importantly, mimicking the high degree of comorbidity of anxiety and depression mentioned above, HAB rats are also characterized by depression-related behavior in the FST, independent of sex (Keck et al. 2003b; Slattery and Neumann 2010; Frank and Landgraf 2008).

Effects of Antidepressant Treatment

Chronic treatment with antidepressant drugs reduces the depression-like status in HAB rats. Treatment of male HAB rats with the SSRI paroxetine during a period of 8 weeks markedly increased active stress coping in the FST to a level similar to that seen in LAB rats. The reversal of the depression-like phenotype was accompanied by a reduction of the high level of hypothalamic vasopressin expression and normalization of the Dexamethasone-suppression/CRH-challenge test (DEX/CRH test) described below (Keck et al. 2003a). However, paroxetine did not alter vasopressin expression or any anxiety-related behavior assessed in LABs, underlining the impact of the genetic predisposition to trait anxiety and comorbid depression-like behavior on drug effects.

Recently, landmark studies have shown that inactivation of Brodmann Area 25 (BA25) using deep brain stimulation alleviated depressive symptoms in severely depressed patients (Mayberg et al. 2005). Interestingly, transient pharmacological inactivation using muscimol of the infralimbic cortex, the rodent correlate of BA25, decreased the high inborn depression-like behavior of the HAB rats supporting their face and predictive validity for affective disorders (Slattery et al. 2010). It remains to be determined whether this region may also be involved in their innate anxiety phenotype.

Several lines of evidence resulting from both preclinical and clinical studies support the view that repetitive transcranial magnetic stimulation (rTMS) of left frontal brain regions exerts antidepressant effects (Post and Keck 2001). Thus, acute, subchronic or long-term rTMS sessions reduced the duration of immobility in rodents in the Porsolt swim test, exert neuroprotective effects both *in vitro* and *in vivo* and change the expression of BDNF and cholecystokinin similar to those reported after antidepressant drug treatment (Post and Keck 2001). To test for rTMS efficacy in a psychopathological rat model, HAB and LAB rats received stimuli over two 3-day series (Keck et al. 2001a). The stimulation point was set at the left frontal cortex in order to mimic clinical conditions. Repetitive transcranial magnetic stimulation increased active stress coping in HAB rats, rendering these animals indistinguishable from LAB rats. The rTMS-induced shift in HAB animals towards active stress coping was markedly higher than has previously been reported in “normal” Wistar rats (Zyss et al. 1997). Furthermore, rTMS treatment resulted in a significant attenuation of the neuroendocrine hyper-response of the HPA axis to and acute ethologically relevant stressors characteristic for HAB rats, whereas their high anxiety level remained unchanged.

Cognition

Emotionality and cognition are closely inter-related, as the assessment of environmental stimuli, in particular of potentially dangerous situations, is dependent on the acquisition and storage of information. To further test this hypothesis, the cognitive performance of HAB and LAB rats has been estimated on the modified holeboard, where HABs showed a clearly improved declarative memory performance indicating a better learning strategy despite (or because of) a more passive performance during the test (Ohl et al. 2002). No differences in working memory in a visual-spatial task were found (Ohl et al. 2002).

In confirmation, line-dependent differences were also seen with respect to social memory and cognition abilities, as HAB, but not LAB, males could distinguish between a known and an unknown juvenile after a 30-min inter-exposure interval (Landgraf and Wigger 2002). The lack of social preference seen in LABs (Lukas and Neumann, unpublished) may underlie their impaired social memory.

To which extent the high central vasopressinergic drive (Wigger et al. 2004; Bosch et al. 2006; Bosch and Neumann 2010) contributes to the improved learning and memory performance in HAB rats, remains to be shown. Brain vasopressin is

an important neuromodulator promoting cognitive functions (Engelmann et al. 1996) and may thus facilitate the storage of adverse emotional situations and shape future stress coping.

Social Behaviors

Other behavioral differences, which have been established over the years of selective breeding for high versus low trait anxiety, include a variety of social behaviors (Neumann et al. 2010), which is of interest as several psychopathologies often are accompanied by various abnormalities in social interactions including aggression, social phobia, or impaired social bonding.

Inter-Male Aggression

Male HAB and LAB rats differ in inter-male aggression with LAB males showing an extreme high level of offensive behavior in the resident-intruder test (Veenema et al. 2007), a finding which is also reflected by an abnormal aggression of LAB males displayed towards females and anesthetized males compared with NAB rats (Neumann et al. 2010). In contrast, HAB males rather display an intermediate level of intermale aggression (Beiderbeck et al. 2007; Neumann et al. 2010; Veenema et al. 2007). Thus, the selective breeding for low trait anxiety resulted in a socio-behavioral phenotype characterized not only by low anxiety and fear responses, reduced risk assessment and an active stress coping style, but also by abnormal social behaviors in different social settings, thus providing an excellent model for studying mechanisms of pathological aggression.

Social Phobia

In a relevant behavioral setup for social phobia/social preference, NAB and HAB rats show social preference. In this test, rats are allowed to explore a small wired cage placed into the cage of the experimental rat. Social preference is seen, when the animal explores the small cage longer and more often, when it contains a conspecific animal. Here, LABs, in general, do not search for social contact, display reduced contact to cage mates (Ohl et al. 2001) and do not show social reference, which can also be interpreted as social phobia (Lukas and Neumann, unpublished).

Maternal Care

Line-differences in social behavior are also found in females with respect to maternal care and maternal defense behavior (maternal aggression). Here, HAB dams are more protective towards their pups, leave the nest less often, show more arched back nursing and more maternal aggression (Bosch et al. 2005; Bosch and Neumann 2010; Neumann et al. 2005a). A significant contribution of high activity of the brain vasopressin system seen in HAB dams to their maternal behavior profile could recently be identified (Bosch and Neumann 2008, 2010). Interestingly, a correlation between high maternal trait anxiety and the intensity of

maternal care has also been found in mouse dams bred for high and low anxiety and, again, line-dependent differences in brain vasopressin appear to underlie the behavioral differences (Kessler et al. 2011).

Pain

Similar to depressed patients, HAB rats have been shown to exhibit decreased sensitivity to thermal pain (Jochum et al. 2007). Acute administration of diazepam partly reversed the abnormal pain response. Also, treatment of male HAB rats with the SSRI citalopram, daily for 8 weeks, reduced anxiety-related behavior as assessed on the EPM and reversed the abnormal thermal pain response in HAB rats (Jochum et al. 2007). As, in contrast to the thermal pain sensitivity, the sensitivity to visceral pain has been found to be elevated in patients suffering from affective disorders (Haug et al. 2004), it would be of interest to test visceral pain threshold in HAB versus LAB rats.

Sleep

In depressed patients, sleep disturbances are a common symptom, as mentioned above. Analysis of sleep patterns in HAB and LAB rats revealed similar circadian fluctuation in sleep-wake behavior, but differences in their spontaneous sleep-wake behavior. HAB rats spend less time awake and more time in non-REM sleep (Lancel et al. 2002). This difference is particularly pronounced during darkness and this is in accord with the observed decreased locomotor activity of HAB rats during the nighttime (Liebsch et al. 1998b). The larger amount of non-REM sleep in the HAB group was not associated with an increased length of non-REM episodes, but with a greater number of sleep episodes, suggesting a higher non-REM sleep fragmentation. HAB rats also displayed less pre-REM sleep and REM sleep than LAB rats during the light period. Thus, the sleep pattern of HAB rats seems to be opposite to that found in depression, and further studies are needed.

Hypothalamic-Pituitary Adrenal Axis

The behavioral differences between HAB and LAB rats are accompanied by distinct neuroendocrine underpinnings. Although basal levels of plasma ACTH or corticosterone reflecting basal activity of the HPA axis do not differ, the responsiveness of the HPA axis to a mild emotional (and non-social) stressor is more pronounced in HAB compared with LAB males (and with non-selected Wistar rats; Landgraf et al. 1999; Neumann et al. 2010), thus resembling psychiatric patients (Holsboer 2000). However, the neuroendocrine response to social stimuli is aggravated in LABs, paralleling their abnormal social behavioral responses described above (Neumann et al. 2010; Veenema et al. 2007). HAB rats also show

an aberrant hormonal secretion pattern during the DEX/CRH test (Keck et al. 2002; Neumann et al. 2010), a clinical test used for the neuroendocrine characterization of depressed patients (Ising et al. 2005). Intravenous administration of DEX revealed DEX-non-suppression and, thus, impairment of negative feedback regulation in HAB rats. Subsequent administration of CRH resulted in pronounced ACTH and corticosterone responses, which are absent in LAB and NAB rats. This indicates a contribution of endogenous vasopressin, which—together with exogenous CRH—triggered pituitary secretion of ACTH despite (impaired) DEX-suppression. Consequently, and in support of this hypothesis, an acute intravenous administration of a vasopressin V1a receptor antagonist abolished the ACTH and corticosterone hyper-response and normalized the DEX/CRH test outcome in HAB rats, pointing towards a significant contribution of the endogenous brain vasopressin system in these neuroendocrine abnormalities (Keck et al. 2002). Furthermore, chronic administration of paroxetine over 8 weeks prevented the abnormal DEX/CRH response in HAB rats with a concomitant attenuation of the vasopressin hyperdrive in the hypothalamic paraventricular nucleus (PVN, Keck et al. 2003b).

Neuronal Activity

In addition to neuroendocrine responsiveness, neuronal responses within brain regions belonging to the anxiety/fear circuitry to anxiogenic, social or pharmacological stimuli also differ between HAB and LAB rats (Muigg et al. 2007; Salchner et al. 2006; Salome et al. 2004; Frank et al. 2006). For example, in response to airjet stimulation, an escape-provoking stimulus, HAB rats show a higher neuronal activity in various hypothalamic areas including the medial pre-optic and anterior hypothalamic areas, and in the nucleus accumbens as estimated by quantification of the expression of the early immediate gene *fos* (Salome et al. 2004). Similarly, in response to forced swimming, neuronal responses within selected cortical, septal, and hypothalamic areas were more pronounced in HAB males. These neuronal responses could be attenuated after chronic paroxetine treatment (Muigg et al. 2007), which could underlie the reduction in depression-like behavior seen after antidepressive treatment in HAB rats.

Neuropeptides

Vasopressin

Given the importance of brain vasopressin in the regulation of anxiety, depression, and neuroendocrine stress coping (Landgraf and Neumann 2004; Frank and Landgraf 2008), the vasopressin gene was considered a candidate gene in high trait anxiety. Indeed, high vasopressin mRNA expression within the parvocellular part of the PVN both under basal conditions and in response to stressor exposure is a reproducible characteristics for male and female HAB rats (Keck et al. 2003b;

Wigger et al. 2004; Bosch et al. 2006; Bosch and Neumann 2010; Frank and Landgraf 2008). Consequently, increased vasopressin immunoreactivity and local neuropeptide release were both found in the HAB hypothalamus. In addition, vasopressin V1a receptor binding is also elevated within the lateral septum of HAB rats, a region relevant for the regulation of anxiety and social behaviors (Keck et al. 2003b).

In line with our hypothesis of a substantial contribution of high endogenous vasopressin activity to the high anxiety and depression-like phenotype of HAB rats, blockade of vasopressin V1a receptors within the hypothalamic PVN reduced their anxiety level and resulted in a more active coping style (Wigger et al. 2004). Further, the V1a antagonist (i.v.) normalized the pathological outcome of the DEX/CRH test in male HABs (Keck et al. 2002). These findings, reflecting both construct and predictive validity, confirm the involvement of endogenous central vasopressin in the behavioral and neuroendocrine phenomena of high trait anxiety and depression.

Interestingly, line-dependent differences in brain vasopressin also appear to contribute to differences in social behavior, i.e. intermale aggression as well as maternal behavior (Beiderbeck et al. 2007; Veenema et al. 2007; Bosch et al. 2010; Bosch and Neumann 2008).

Given the robust increase in brain vasopressin activity in HAB rats in parallel to their anxiogenic and hyperresponsive neuroendocrine phenotypes, underlying genetic mechanisms are likely. Indeed, 10 single nucleotide polymorphisms (SNPs) within the vasopressin promoter were found between the lines. In addition, a single base pair substitution has been identified in the first intron of the vasopressin gene of HAB rats itself (Murgatroyd et al. 2004). One of the SNPs identified was found to be embedded in a potential transcription factor binding site (CArG box), the locus of binding to the transcriptional repressor CBF-A. Functional relevance of the SNP was identified by *in vitro* DNA binding assay and revealed that CBF-A binding to the CArG box derived from the HAB allele was indeed diminished, resulting in an attenuated transcriptional repression of the vasopressin gene. Thus, this genetic mechanism may underlie vasopressin over-expression in the PVN of HAB rats (Murgatroyd et al. 2004; Landgraf et al. 2007). Interestingly, out of 100 outbred Wistar rats, the HAB allele was found in 3 rats (heterozygous) indicating a gene frequency of 1.5% in the general Wistar rat population.

In addition to vasopressin, other brain neuropeptides such as CRH, oxytocin, prolactin, NPY, or neuropeptide S are important neuromodulators of emotionality, in particular of anxiety- and depression-related behaviors. Thus, an endophenotype of high or low anxiety accompanied by differences in active or passive stress coping style is likely to be accompanied by differences in the activity of several endogenous neuropeptide and other neurotransmitter systems.

Corticotropin-Releasing Hormone

Corticotropin-Releasing Hormone (CRH) exerts anxiogenic and depression-like effects, and CRH mRNA expression has recently been found to be up-regulated within the PVN of HAB rats compared with LAB rats (Bosch et al. 2006). In contrast,

line-dependent differences in CRH receptor binding could not be identified. Thus, differences in endogenous CRH system activity are likely to contribute to the emotional phenotype of HAB rats, as suggested in depressed patients (Nemeroff 2004; Keck and Holsboer 2001). Indeed, acute peripheral administration of the non-peptide CRH 1 receptor antagonist R121919 reduced anxiety levels on the EPM in HAB, but not LAB, rats and reduced stress-induced corticotropin secretion in both rat lines (Keck et al. 2001b).

A high level of anxiety could also be due to an attenuation of endogenous anxiolytic neuropeptides such as oxytocin (Neumann et al. 2000; Waldherr and Neumann 2007), prolactin (Torner et al. 2001; Donner et al. 2007) and/or neuropeptide S (NPS; Xu et al. 2004).

Oxytocin

Besides its capacity to modulate complex social behaviors, oxytocin is an established anxiolytic neuropeptide of the brain (Blume et al. 2008; Neumann 2008) and has antidepressive properties (Slattery and Neumann 2010). However, differences in central oxytocin expression or release were not found between HAB and LAB rats, except in lactation (Bosch et al. 2007).

In order to study potential anxiolytic or antidepressive effects of oxytocin in a psychopathological animal model, HAB and LAB rats were treated i.c.v. with either oxytocin or an oxytocin receptor antagonist (Slattery and Neumann 2010), which was only effective in female but not male rats: chronic oxytocin reduced the high anxiety level of HAB females on the EPM, whereas chronic i.c.v. treatment with the oxytocin antagonist increased anxiety only in female LAB rats without any effect in HABs or males. In contrast, acute manipulation of the oxytocin system did not alter anxiety-related behavior independent of sex and trait anxiety. Also, passive/active stress coping in the FST was not altered by any manipulation of the oxytocin system. Thus, chronic oxytocin seems to be a promising therapeutic strategy in particular for the treatment of anxiety disorders in women.

Prolactin

Prolactin has distinct anxiolytic properties, and the brain prolactin is involved in the regulation of anxiety and stress coping (Torner et al. 2004; Bunck et al. 2009; Ditzen et al. 2010). Plasma prolactin levels were found elevated in HAB rats in response to a mild emotional stressor (Neumann et al. 1998; Landgraf et al. 1999). The behavioral significance of this finding needs to be studied, as plasma prolactin does not reflect intracerebral prolactin release patterns (Torner et al. 2004), but peripheral prolactin can cross the blood brain barrier. However, differences in brain prolactin expression, release or receptor binding have not been studied in HAB and LAB rats until now.

Neuropeptide S

Neuropeptide S (NPS) is another powerful anxiolytic neuropeptide (Xu et al. 2004; Leonard et al. 2008; Vitale et al. 2008), and our preliminary results indicate substantial genetic and activity differences of the endogenous brain NPS system between HAB

and LAB rats. For example, the latter express more NPS receptors in the hypothalamus (Slattery, Wegener, Naik, Mathé, Neumann, unpublished). In order to confirm the anxiolytic properties described in non-selected male mice (Xu et al. 2004) and rats (Vitale et al. 2008) in a psychopathological animal model, we acutely treated HAB and LAB rats with i.c.v. NPS 45 min prior to EPM testing can (Slattery et al. 2008). Indeed, preliminary evidence suggest that NPS reversed the high trait anxiety of HABs and exerted modest antidepressant effects (Slattery et al. 2008). Further, i.c.v. NPS improves consolidation of extinguished learned fear (Sartori et al. 2009).

Other Neurochemical Differences

Serotonin Disturbances in serotonergic neurotransmission are likely to contribute to the pathophysiology of anxiety and depression disorders and to underlie the hyperactivity of the HPA axis (Holsboer 2000). In HAB rats, serotonin 1A receptor expression was found to be reduced in the hippocampus, whereas the expression of the serotonin transporter binding sites was increased. Further, the basal availability of extracellular serotonin as estimated in microdialysates did not differ between the lines, but serotonin release in response to emotional stress was abolished in HAB rats. Chronic paroxetine markedly increased the stress-induced rise in hippocampal serotonin release, but did not alter receptor expression (Keck et al. 2005). Thus, the reduced raphe-hippocampal serotonergic transmission of HAB rats, which is evident both at the presynaptic (release) and postsynaptic (receptor) level, are likely to contribute to their high emotionality.

Hippocampal Neurogenesis

Consistent with the generally elevated stress responsiveness including HPA axis hyperreactivity and impaired negative feedback functions, we found reduced hippocampal cell survival and neurogenesis in 43-days old male HAB rats (Lucassen et al. 2009). Specifically, the number of newly generated surviving (BrdU-positive) cells in the subgranular cell layer/subgranular zone of the hippocampal dentate gyrus was found to be lower in HAB versus LAB rats. Further, the number of hippocampal doublecortin-positive cells reflecting neurogenesis is lower in HAB rats (Lucassen et al. 2009).

These results show that the high level of anxiety and activity of the HPA axis may affect cell survival in HAB rats, which may, in turn, also be partly responsible for their behavioral phenotype.

3.1.2 Gene × Environment Interactions

Early life stress, such as prenatal and immediately postnatal stress is a well-characterized risk factor for the development of affective disorders in adulthood,

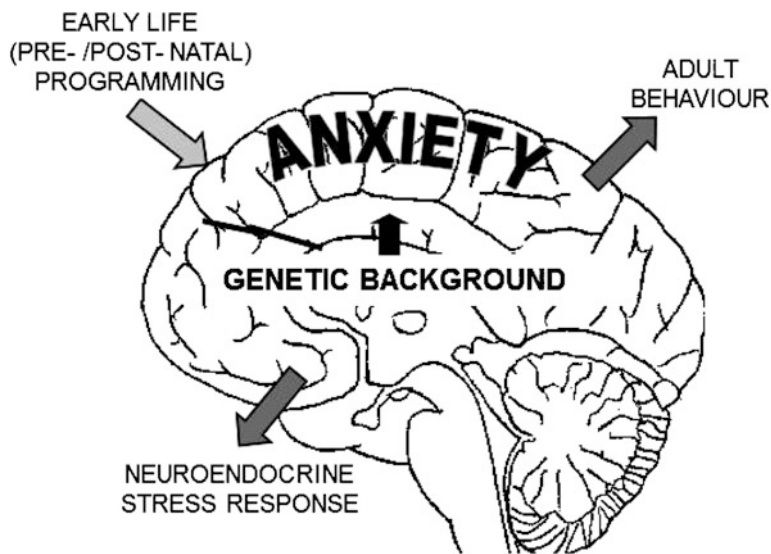


Fig. 5 Gene \times early environment interactions shape adult behavioral and neuroendocrine stress responses as seen in rats with genetic determination of trait anxiety

and there are well documented interactions of genetic and environmental factors (Caspi et al. 2003; Fig. 5, see also Sect. 2.1.2). Selectively bred rodents with clear genetic determinants are valuable models for studying gene \times environment interactions. Both prenatal stress as well as postnatal maternal separation resulted in line-dependent behavioral effects seen in adult HAB and LAB rats.

Gene \times prenatal environment interactions: Surprisingly, after exposure to prenatal stress between pregnancy days 4 and 18 (exposure of the pregnant dam to maternal defeat by an unknown lactating resident daily for 45 min between pregnancy days 4 and 10, and to restraint between pregnancy days 11 and 18 for 60 min daily) adult male HAB rats became less anxious (see Fig. 6). This was confirmed in two independent tests for anxiety-related behavior, i.e. the EPM and the modified holeboard (Bosch et al. 2006). The opposite behavioral consequences of prenatal stress were accompanied by opposing effects on central vasopressin and CRH mRNA expression: whereas the genetically determined high level of hypothalamic vasopressin mRNA expression of HAB rats was not altered by prenatal stress, it was elevated in early life stressed LAB male offspring (Fig. 6). Similarly, the genetic difference in CRH expression within the PVN with high levels in unstressed HAB compared with LAB controls was also at least partly abolished by prenatal stress. Further, after prenatal stress the high HPA axis response to a mild stressor found in HAB rats was reduced and found to be indistinguishable from unstressed and prenatally stressed LABs (Bosch et al. 2006).

Opposing effects of prenatal stress were also found with respect to hippocampal neurogenesis, which has been shown to be stress-sensitive and implicated in depression (Pittenger and Duman 2008). As mentioned above, the survival of

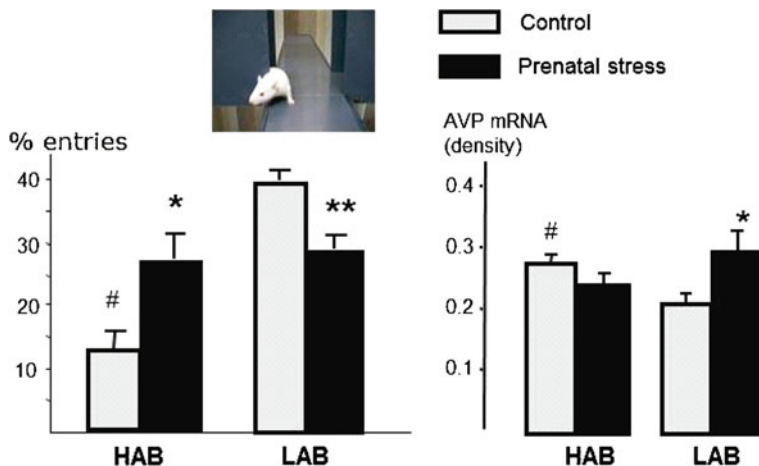


Fig. 6 Opposite effects of prenatal stress on anxiety-related behavior on the EPM (% entries open arms; left) and basal vasopressin mRNA expression in the hypothalamic PVN (right) in male HAB and LAB adult offspring indicating gene \times early environment interactions. # versus LAB; * versus respective control. Adapted from (Bosch et al. 2006)

newly generated hippocampal cells is lower in young unstressed HAB compared with LAB males (day 43 of life). Interestingly, while prenatal stress caused a further reduction in the number of BrdU and doublecortin positive cells in the subgranular zone of the hippocampal dentate gyrus in HAB rats, it did not affect this parameter in the LAB rats (Lucassen et al. 2009). Although detailed mechanisms underlying the opposing effects of prenatal stress in HAB and LAB rats are unknown, line-dependent differences in the activity of the placental enzyme 11-beta hydroxysteroid dehydrogenase type 2, which catalyzes maternal corticosterone to inert 11-dehydrocorticosterone are likely to contribute (Lucassen et al. 2009).

Gene \times postnatal environment interactions: Opposite effects on emotionality and neuroendocrine responsiveness and, consequently, approximation of the HAB and LAB behavioral and neuroendocrine phenotypes were also found after immediate postnatal stress, i.e. after maternal separation (Fig. 7). Daily 3-h separation of HAB and LAB offspring from the mother between postnatal days 2 and 15 reduced anxiety in adult HABs as seen on the modified holeboard, but rather increased (EPM) or had no effect (holeboard) in LABs (Neumann et al. 2005b). Further, the HPA axis hyper-responses seen in HAB control rats became attenuated after postnatal stress, whereas maternal separation did not significantly alter neuroendocrine responses in LAB rats (Neumann et al. 2005b; Fig. 7).

These experiments underline that the consequences of environmental factors are strongly determined by the genetic background. Vice versa, even a robust genetically determined individual behavioral phenotype can be shaped by environmental factors; likely via epigenetic mechanisms (Murgatroyd et al. 2009).

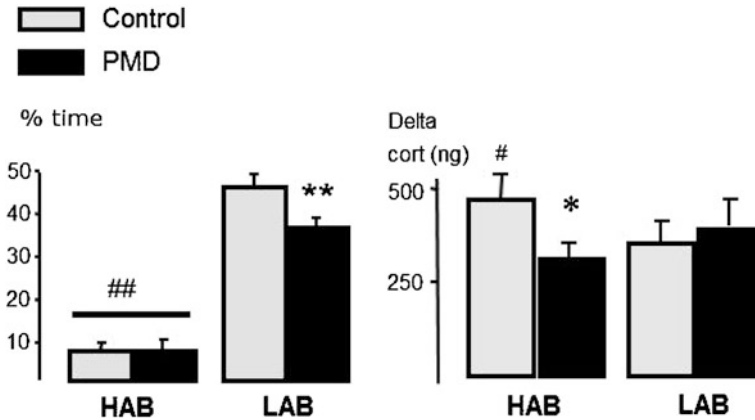


Fig. 7 Opposite effects of postnatal stress (periodic maternal separation; PMD) on anxiety-related behavior on the EPM (% time open arms; left) and plasma corticosterone response to novel environment exposure (elevated platform, right) in HAB and LAB adult offspring indicating gene × early environment interactions. # versus LAB; * versus respective control. Adapted from (Neumann et al. 2005b)

The mitigating effect of early life experiences on behavioral and neuroendocrine parameters in rats representing extremes in trait anxiety may also reflect an evolutionary benefit, as the genetic variability among individuals of a species is sustained, while maintaining adequate responses to potentially dangerous stimuli in adulthood. Our results in HAB and LAB rats after pre- and postnatal stress exposure further indicate that gene × environment interactions can be found at behavioral, neuroendocrine, neuronal and gene levels indicating their complexity.

3.2 HAB LAB Mice

Although various selectively bred rat lines are useful tools for studying behavioral and especially neuroendocrine parameters of depression and anxiety, as well as environmental factors shaping innate stress coping style, genetic studies such as the functional analysis of candidate genes underlying, for example, high trait anxiety or depression-related behavior, are a priori limited in rats. Therefore, Landgraf and co-workers also generated mice selectively bred for high (M-HAB) versus low (M-LAB) anxiety-related behavior (Kromer et al. 2005). After 9 generations of continuous breeding (sibling mating), a robust behavioral divergence had been achieved. High trait anxiety has been confirmed on the EPM and in the light–dark box; further, M-HAB mice pups show more ultrasound vocalization, which was reversed by diazepam (Kromer et al. 2005). In agreement to what has been found in HAB and LAB rats, M-LAB mice are more active in several tests for depression-like behavior (FST, tail suspension). Also, as seen in HAB and LAB

rats, differences in the hypothalamic expression of vasopressin are likely to underlie their trait anxiety and also line-dependent social behavior (Kessler et al. 2011), but here M-LABs show signs of central diabetes insipidus, i.e. low vasopressin expression and availability compared with M-HAB and non-selected CD1 mice (Kessler et al. 2007). A SNP in exon 1 of the vasopressin gene of LAB mice causes an amino acid substitution in the signal peptide of the vasopressin precursor, and is likely to impair processing and trafficking of the precursor (Bunck et al. 2009; Kessler et al. 2007). Besides vasopressin, differences in the expression of the cytosolic enzyme glyoxalase-I, which is of potential interest in the context of various psychopathologies, have been found in these mice (Kromer et al. 2005; Hamsch et al. 2010). Thus, selectively bred mice have a high potential to reveal novel candidate genes underlying high trait anxiety.

3.3 Floripa H and L Rats

The Floripa H and L rat lines, have been developed based on selection for high and low locomotion in the central aversive area of an open field, an experimental measure of fearfulness in rodents (Ramos and Mormede 1998). The Floripa H and L lines differ from each other not only for the selected behavior, but also for other experimental indices of anxiety, such as the approach towards the open arms of the elevated plus maze and the white compartment of the black/white box (Ramos et al. 2003). In addition, compared with Floripa L, the Floripa H rats show less depression-like behavior in the FST (Hinojosa et al. 2006), suggesting the Floripa rats to be a combined model of both anxiety and depression. The Floripa L female rats consumed more ethanol than their Floripa H counterparts at concentrations of 6 and 10% in a two-bottle choice protocol (Izídio and Ramos 2007), however the connection to the anxiety-like phenotype remains to be determined.

3.4 Maudsley Reactive and Nonreactive Rats

Based on reactivity in the open field, with defecation and urination being the central variables, two lines of rats, later termed the Maudsley high reactive (high defecation, MHR) and low, nonreactive (low defecation, MLR) rats, were bred from Wistar in the 1950s aiming to model the human personality dimension of emotionality (Broadhurst 1957, 1960, 1962, 1975). The overall conclusion of the several studies published were that Maudsley reactive rats yielded higher scores in several tests of anxiety-like/avoidance behavior than non-reactive animals (Blizard and Adams 2002). Although this approach was useful to study individual differences in anxiety-like/avoidance behavior, it has not been pursued intensively in recent years (Pawlak et al. 2008; Blizard and Adams 2002).

3.5 High/Low Avoidance Rats: RHA/RLA; SHA/Bru and SLA/Bru

Several rat breeding lines have been selected for learning to actively avoid foot shocks in a two-way shuttle-box. The Roman high avoidance (RHA) and Roman low avoidance (RLA) Wistar rats (Bignami 1965), the Long–Evans rats (Brush et al. 1979, 1985, 1989; Brush 2003), and Syracuse high and low avoidance rats (SHA/Bru and SLA/Bru) are the most prominent examples. Although these attempts differ in nature, some of the common characteristics include differences in learning and memory, and a number of emotion-related behavioral and neuroendocrine characteristics. A detailed review can be found in (Brush 2003).

4 Conclusions

In conclusion, the existing data on selectively bred rodent models, in particular of the FSL/FRL and HAB/LAB rats reviewed above, reveal the importance of rodent breeding lines for studying neurobiological, neuroendocrine and genetic mechanisms underlying anxiety- and depression-related diseases. Essentially, the development of potentially novel therapeutic strategies targeting brain neuropeptide systems such as NPY, vasopressin, CRH, oxytocin or neuropeptide S will be enabled and promoted using such relevant and complementary animal models. Moreover, selectively bred rat and mouse lines provide an important tool in order to provide further evidence for gene \times environment interactions demonstrating differential vulnerabilities, for example to prenatal or immediate postnatal adverse life events. The combination of genetic models with various stress paradigms is likely to mimic the human situation more accurately.

Given their behavioral and neuroendocrine phenotype, the neurobiological mechanisms underlying their anxiety- and depression-related behavior, as well as successful pharmacological attempts to reverse the psychopathological phenotype, the FSL/FRL and HAB/LAB rats fulfill the requirements of face, construct and predictive validity of an animal model. Therefore, they should be further exploited to discover potential novel therapeutic strategies.

Acknowledgments GW was supported by grants from The Danish Medical Research Council (grant 271-08-0768) and the Research Foundation of County Midtjylland. AAM was supported from the Swedish Medical Research Council (grant 10414) and the Karolinska Institutet. IDN was supported by DFG, BMBF and Bayerische Forschungsstiftung.

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Stress-Induced Deficits in Cognition and Emotionality: A Role for Glutamate

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Abstract Stress is associated with a number of neuropsychiatric disorders, many of which are characterized by altered cognition and emotionality. Rodent models of stress have shown parallel behavioral changes such as impaired working memory, cognitive flexibility and fear extinction. This coincides with morphological changes to pyramidal neurons in the prefrontal cortex, hippocampus and amygdala, key cortical regions mediating these behaviors. Increasing evidence suggests that alteration in the function of the glutamatergic system may contribute to the pathology seen in neuropsychiatric disorders. Stress can alter glutamate transmission in the prefrontal cortex, hippocampus and amygdala and altered glutamate transmission has been linked to neuronal morphological changes. More recently, genetic manipulations in rodent models have allowed for subunit-specific analysis of the role of AMPA and NMDA receptors as well as glutamate transporters in behaviors shown to be altered by stress. Together these data point to a role for glutamate in mediating the cognitive and emotional changes observed in neuropsychiatric disorders. Furthering our understanding of how stress affects glutamate receptors and related signaling pathways will ultimately contribute to the development of improved therapeutics for individuals suffering from neuropsychiatric disorders.

Keywords Glutamate · Stress · Emotionality · Cognition

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1 Introduction

Stress is associated with a number of neuropsychiatric disorders either as a trigger, as with post-traumatic stress disorder (PTSD), or a risk factor, as with drug addiction or depression. Thus understanding the neurobiological consequences of stress is critical to treating these diseases. The first part of this chapter focuses on behavioral changes in animal models of stress and structural changes in key cortical regions mediating these behaviors. The second part focuses on the role of the glutamatergic system in mediating these changes and, through genetic approaches, some of the advances made in our understanding of the molecular underpinning of stress and mental disorders.

2 Stress-Induced Executive Dysfunction in Humans and Rodents

Stress is a known risk factor of a number of neuropsychiatric disorders such as depression, PTSD and addiction (Hammen 2005; Lupien et al. 2009; Schneiderman et al. 2005; Sinha 2008). Stress can be defined as the expense or “allostatic load” on the organism’s homeostatic regulating system (McEwen 2000a). When faced with a stressor, the hypothalamic-pituitary-adrenal (HPA) axis is activated, resulting in the release of corticosteroids (de Kloet et al. 2005; Joels et al. 2007; McEwen 2000b). Though short bouts of stress can be tolerated or even be beneficial, prolonged exposure to stress can be detrimental (McEwen 2000a). Early life stress, such as an unstable childhood, is a strong predictor for the development of depression or addictive behavior in adulthood (Lupien et al. 2009). A stressful life event, a death in the family or chronic stress such as poverty is strongly linked with the development of PTSD, depression and alcoholism (Hammen 2005; Schneiderman et al. 2005; Sinha 2008).

Characteristic of these stress-related neuropsychiatric disorders are deficits in emotional regulation and cognition (Ferreri et al. 2011). Patients with panic disorder or PTSD are unable to normally regulate their emotions. These individuals

express greater aversive feelings toward negative stimuli, find themselves preoccupied with worry and are impaired in their ability to suppress feelings of fear (Blechert et al. 2007; Michael et al. 2007). Individuals with attention deficit hyperactivity disorder (ADHD), depression or schizophrenia have deficits in certain learning and memory functions such as spatial working memory and cognitive flexibility (McLean et al. 2004; Murphy et al. 2003; Murray et al. 2008; Rogers et al. 2004; Waltz and Gold 2007). Using various stress paradigms, animal models have begun to show evidence for a direct link between stress and emotional or cognitive dysfunction.

In rodents, exposure to stress can result in increased anxiety- and depression-related behaviors (Sterner and Kalynchuk 2010). Adult rodents that experienced maternal separation as pups, a model of early life stress, have heightened corticosterone secretion following stress and show greater anxiety in the elevated plus-maze (e.g. Eiland and McEwen 2012; Holmes et al. 2005; Huot et al. 2001). Rodents exposed to chronic unpredictable stress (CUS) or repeated restraint stress, or simply injected with corticosterone, show elevated anxiety- like behaviors in the light/dark exploration and the elevated plus-maze test, and a heightened startle response relative to non-stressed controls (e.g. Mozhui et al. 2010; Pego et al. 2008). Cross-strain comparisons indicate the effect of stress is more pronounced in mouse strains with greater trait anxiety-like behavior, suggesting genetic background influences stress susceptibility (Mizoguchi et al. 2000). In addition to heightened anxiety, stress can evoke a behavioral profile reminiscent of depression. Rodents exposed to a stressor or those that received corticosterone orally or systemically show reduced social interaction and increased behavioral despair (e.g. Berton et al. 2006; Gourley et al. 2008; Shirayama et al. 2002; Wood et al. 2008). History of maternal separation or oral corticosterone delivery can decrease sucrose consumption or responding in an appetitive progressive ratio test, measures of anhedonia (Gourley et al. 2009, 2008; Huot et al. 2001).

Also sensitive to stress are fear conditioning and extinction, measures of emotional learning and regulation (Rodrigues et al. 2009). Stress prior to conditioning has a potentiating effect on fear learning resulting in greater freezing during fear conditioning and post-conditioning fear recall tests (Rau et al. 2005; Sandi et al. 2001; Wood et al. 2008; Yamamoto et al. 2009). A series of experiments examining the effect of footshock stress prior to fear conditioning found that stressed rats showed enhanced fear recall when tested the following day (Rau et al. 2005). Using variants of this basic design, fear generalization and reinstatement were ruled out as alternate explanations for the increase in fear. Rather it appears that stress strengthens the fear memory, which may explain the impairing effects of stress on fear extinction, the learned suppression and the fear response (Corcoran and Quirk 2007; Quirk and Mueller 2008). Rats exposed to restraint stress or given oral corticosterone fail to extinguish the fear response, retaining a greater level of freezing after extinction training as compared to non-stressed subjects (Baran et al. 2009; Gourley et al. 2009; Miracle et al. 2006). In mice, a mere three days of 10 min forced swim stress was sufficient to impair fear extinction (Izquierdo et al. 2006). Stress does not have to immediately precede fear conditioning to affect

learning. Rat pups exposed to five days of footshock stress and then tested on fear conditioning as adults fail to extinguish the fear response showing that stress can have long-lasting repercussions on cognition (Judo et al. 2010).

The effects of stress are not limited to cognitive processes associated with emotionality (Arnsten 2009; Holmes and Wellman 2009; Sterner and Kalynchuk 2010). Working memory, the ability to transiently store, recall and utilize recently learned information is vulnerable to stress. Mice exposed to four weeks of cold water submersion are impaired in a delayed alternation T-maze task (Mizoguchi et al. 2000). In rats, four weeks or merely six days of CUS result in impaired spatial working memory in the Morris water maze (MWM) (Cerqueira et al. 2005). This deficit is replicated by four weeks of daily injections of dexamethasone, an agonist of the glucocorticoid receptor, one of the two main corticosterone receptors, suggesting that the effects of stress are mediated at least in part by glucocorticoid receptor activity (Cerqueira et al. 2005).

Spatial learning itself is disrupted by stress. Rats that experienced maternal separation were impaired in an object placement task which examines the ability to discriminate between objects placed in the same or a novel location (Eiland and McEwen 2012). A single session of restraint stress or a corticosterone injection resulted in mice having longer escape latencies in circular hole board maze (Schwabe et al. 2010). In the hidden platform version of the MWM, tail shock stressed rats had greater escape latencies than non-stressed rats (Kim et al. 2001). Predator stress, where the rodent is exposed to either the odor of or an actual predator, impairs spatial working memory in the radial arm version of the MWM (RAWM) (Diamond et al. 1999; Park et al. 2008). In the RAWM, up to six swim paths are available from a center start point, one of which leads to the escape platform. An effect of stress was not present when just four arms were available. However, increasing the difficulty of the task by presenting six arms reveals an effect of stress, suggesting that observable effects of stress may be dependent on task demands (Diamond et al. 1999). Pretreatment with the antidepressants agomelatine or tianeptine can rescue this effect (Campbell et al. 2008; Conboy et al. 2009).

Stress also interferes with cognitive flexibility, the ability to adjust previously learned behavior in response to changing task demands. Rats subjected to either four weeks of CUS or dexamethasone injections or six just days of CUS were impaired on a spatial reversal variant of the MWM, where the escape platform is switched to the quadrant opposite from where it was located during training (Cerqueira et al. 2007; Cerqueira et al. 2005). Two weeks of CUS impaired reversal and extra-dimension set shifting in a texture-odor attention set-shifting task (Bondi et al. 2008). In this rodent adaptation of human cognitive flexibility tasks, the rodent learns to discriminate between digging textures or odors to locate a hidden reward. This stress-induced set-shifting impairment is robust, having been replicated with a number of different stress protocols (Bondi et al. 2008; Lapiz-Bluhm et al. 2009; Liston et al. 2006) and has been shown to be rescued with the antidepressants desipramine and citalopram (Bondi et al. 2008; Lapiz-Bluhm et al. 2009).

From the subset of work highlighted here, there is strong evidence to support the link between stress exposure and altered emotionality and cognitive function. Similar to what is seen in clinical populations, in rodent models stress increases anxiety- and depression-like behaviors, and facilitates the acquisition of fear while impairing control over fear expression. Stress also impairs certain cognitive functions such as spatial learning, working memory and cognitive flexibility. How stress may be affecting these changes via morphological and molecular alterations will be discussed in the following sections.

3 Structural Changes in Response to Stress

Key substrates mediating emotionality and cognition include the prefrontal cortex, hippocampus and amygdala. Changes in cortical volume have been recorded in these regions in human neuropsychiatric patients suggesting possible loci for the behavioral and cognitive pathologies (Sterner and Kalynchuk 2010; van Harmelen et al. 2010). These regions are anatomically interconnected, often working in concert to mediate emotional regulation and cognition (Thierry et al. 2000). Preclinical studies in rodents have not only shown parallel changes but have provided more precise information on morphological changes in these areas.

Loss of prefrontal cortex (PFC) function can impair working memory and cognitive flexibility as well as other higher-order cognitive functions (Chudasama and Robbins 2006; Dalley et al. 2004; Robbins 2007). In rodents, the prelimbic and infralimbic cortices are subregions of the PFC thought to mediate fear expression and fear extinction, respectively (Corcoran and Quirk 2007; Myers and Davis 2007; Quirk and Mueller 2008). Four weeks of CUS result in neuronal atrophy, specifically reduced volume, neuron number and apical dendritic length in layers I–III in both these regions (Cerqueira et al. 2005; Dias-Ferreira et al. 2009). This stress effect is replicated pharmacologically with four weeks of corticosterone or dexamethasone, a corticosterone-receptor agonist, injections (Cerqueira et al. 2005). In addition to neuronal atrophy, decreases in spine density and spine surface area have been observed in the medial PFC following exposure to three weeks of restraint stress (Liston et al. 2006; Radley et al. 2004, 2006, 2008). Interestingly, while restraint stress reduced apical dendritic length in the medial PFC, there was a corresponding increase in the orbitofrontal cortex, suggesting that subregions of the PFC may respond differently to stress (Liston et al. 2006). Shorter stress exposures have highlighted the potential sensitivity of the PFC to stress. A reduced restraint stress paradigm, ten days of two-hour restraint stress, reduced apical dendritic length in rat infralimbic cortex (Shansky and Morrison 2009). Seven days of only ten-minute daily restraint stress was effective in reducing apical branch number and length in layer II/III of the cingulate cortex (Brown et al. 2005). Even more limited, one bout of ten-minute forced swim stress was sufficient to reduce apical dendritic length in layer II/III of the mouse infralimbic cortex though no change was seen in the prelimbic cortex (Izquierdo et al. 2006).

Also key in the fear learning circuitry are the hippocampus and amygdala (Maren and Quirk 2004). The hippocampus has a well-established role in learning and memory and is particularly important for spatial learning, as in the MWM or with contextual fear learning (Bird and Burgess 2008; Ji and Maren 2007; Maren and Holt 2000). Stress has a similar effect on morphology in the hippocampus as it does in the PFC (Joels et al. 2004; McEwen 2001). Five weeks of social conflict decreased cell proliferation and survival in the rat dentate gyrus, an effect rescued by concomitant fluoxetine treatment (Czeh et al. 2007). Rats exposed to either a brief (two days) or chronic (21 days) social stressor induced morphology changes, though changes were more robust following chronic stress (Kole et al. 2004). Four weeks of CUS or pharmacological stress by corticosterone or dexamethasone injections resulted in reduced CA3 and DG volume and decreased dendritic length of granule cells, CA3 and CA1 pyramidal cells (Cerqueira et al. 2007; Sousa et al. 2000). Shorter durations of stress, 21 days of restraint stress or ten days of CUS, also results in hippocampal dendritic retraction which was reversed when tianeptine was given in conjunction with stress (Vyas et al. 2002; Watanabe et al. 1992b).

In contrast to the PFC and hippocampus, stress induces neuronal hypertrophy in the amygdala, a region essential for the acquisition and consolidation of aversive memories (Maren and Quirk 2004; Pare et al. 2004; Roozendaal et al. 2009). While 21 days of restraint stress decreased hippocampal dendritic length, this same stressor increased dendritic length and branching in neurons of the basolateral amygdala (BLA) as well as the bed nucleus of stria terminalis (Vyas et al. 2002, 2003). This effect has been replicated with either CUS or corticosterone injections which lead to increases in dendritic length and spine density in the BLA and bed nucleus of stria terminalis (Pego et al. 2008). Stress-induced changes appear to be longer lasting in the amygdala than in the hippocampus or PFC. Following 21 days of recovery from stress, BLA pyramidal cells of stressed rats were still longer than controls, whereas CA3 hippocampal neurons were no different and overextension was seen in proximal dendritic arbors of IL neurons (Goldwater et al. 2009; Vyas et al. 2004).

As with behavior, stress results in different changes in neuronal structure in the PFC, hippocampus and amygdala. Generally, stress-induced dendritic retraction in the PFC and hippocampus but induced extension in the amygdala. This appears to align with the differing effects of stress on behavior, with impairments in largely PFC and hippocampus-associated behaviors and enhancements in amygdala-associated behaviors. However, it is unlikely that structural changes alone are the cause of stress-induced behavioral changes. More likely stress results in a cascade of changes on a molecular level of which modification to structure is an observable consequence.

4 Molecular Mechanisms of Structural Changes: Focus on Glutamate

It is clear that exposure to stress can alter neuronal morphology in regions associated with the emotional and cognitive changes seen with psychiatric disorders. Stress can alter multiple molecular signaling cascades that could explain the

observed structural changes (a subset of these are reviewed in Pittenger and Duman (2008)). Here, we focus on evidence for the role of the glutamatergic system in mediating stress-induced changes because of its known role in mechanisms of plasticity, cognition, and increasingly, emotional and psychiatric disorders.

Glutamate is the main excitatory neurotransmitter in the CNS and binds to multiple metabotropic receptors and three families of ionotropic receptors: alpha-amino-3-hydroxy-5-methyl-4-isoxazolepropionic acid (AMPA) receptors, kainate receptors and *N*-methyl-D-aspartate (NMDA) receptors. Activity-dependent alterations in glutamate transmission are a key mechanism of synaptic plasticity that in turn influences multiple downstream signaling pathways, including those activating neurotrophic factors involved in cell growth. Activation of synaptic NMDA receptors appears to be crucial for activity-dependent changes in synapses and even neuronal survival (Hardingham and Bading 2003). Changes in synaptic plasticity have been shown to influence spine morphology, as LTP-inducing protocols can lead to new dendritic spines (Engert and Bonhoeffer 1999; Matsuzaki et al. 2004). Conversely, elevated glutamate levels and excessive activation of NMDA receptors can lead to cell damage and even death in many neuropathological conditions, (Dirnagl et al. 1999; Lipton and Rosenberg 1994; Olney et al. 1986; Sapolsky 2000a, 2000b). The opposing effects of glutamate transmission most likely depend on the pattern of NMDA receptor activation and have been reviewed in (Hardingham and Bading 2003). Variations in the pattern of glutamate receptor activation could in part explain a shift in the activation of cell growth versus cell death pathways that influence the observed morphological changes.

Stress is known to lead to changes in glutamate transmission in the same regions showing stress-induced morphological changes. Various forms of stress as well as acute injections of corticosterone lead to a rapid and transient increase in extracellular glutamate in the hippocampus and PFC (Moghaddam 1993; Venero and Borrell 1999). Interference with glutamate signaling using glutamatergic receptor antagonists can attenuate the dendritic atrophy observed after chronic restraint stress. The anti-epileptic drug phenytoin is known to reduce excitatory amino acid release including glutamate and injections of phenytoin block stress-induced atrophy of the CA3 hippocampal neurons (Watanabe et al. 1992a). More specifically, blocking NMDA but not AMPA receptors attenuates CA3 dendritic atrophy suggesting that the NMDA receptor has a particular role in mediating the morphological changes seen with stress (Magarinos and McEwen 1995).

In the PFC, less is understood about how NMDA receptor antagonists alter stress-induced atrophy. However, lesions resulting in cholinergic deafferentation lead to dendritic remodeling and increased spine density in the PFC, an effect shown to be dependent on NMDA receptors (Garrett et al. 2006). Interestingly, systemic administration of the NMDAR antagonist CPP during chronic restraint stress not only blocks dendritic atrophy in the mPFC, but actually induces dendritic hypertrophy in this region, an effect not observed in unstressed control rats (Martin and Wellman 2011). Most recently, the NMDA receptor antagonist ketamine was found to block the loss of synaptic proteins in the PFC after stress

induced by the learned helplessness paradigm (Li et al. 2010). NMDA receptor antagonists not only block stress-induced atrophy but have also been found to increase spine density in medial PFC pyramidal cells 24 h after administration in the absence of stress (Li et al. 2010). While additional data directly studying the role of glutamate transmission in each region showing stress-induced structural changes is sparse, much is known about the effects of glutamate transmission in cognitive and emotional behavioral paradigms mediated by these regions.

5 Glutamate in Rodent Behavioral Correlates of Emotion and Cognition

The NMDA receptors are heteromeric assemblies composed of an obligatory NR1 subunit and one or more NR2 (NR2A-NR2D) (Rosenmund et al. 1998) or NR3 subunits (Ciabarra et al. 1995). *Postmortem* studies of the brains of depressed patients have found reduced NR1 mRNA in the hippocampus (Law and Deakin 2001) and decreased NR2A and NR2B protein levels in the PFC (Feyissa et al. 2009). In rodent models, a single exposure to forced swim stress leads to increases in surface (but not total) NR1, NR2A, NR2B and AMPA receptor subunits in the PFC (Yuen et al. 2009). As mentioned earlier, NMDA, but not AMPA receptor antagonism, attenuates dendritic atrophy resulting from chronic stress or glucocorticoid injections (Magarinos and McEwen 1995). Similarly, NMDA receptor antagonists block stress-induced alterations in long-term potentiation and long-term depression in hippocampal CA1 neurons (Kim et al. 1996). Together, NMDA receptors appear to be modulated by stress and necessary for some stress-induced morphological changes. Further evidence has demonstrated that NMDA receptors are also involved in the cognitive and emotion-related paradigms affected by stress.

Genetic manipulations in rodent models have allowed for a subunit-specific analysis of the NMDA receptor's role in behaviors shown to be altered by stress. While there are no NR2A subunit-specific antagonists, a mutant mouse line lacking this subunit has been developed and displays decreased anxiety- and depression-related behaviors (Boyce-Rustay and Holmes 2006). While wild-type mice normally show restraint stress-induced changes in the light/dark exploration task, this effect was blocked or even reversed in NR2A knockout mice, highlighting the importance of NR2A in behavioral changes consequential to stress (Mozhui et al. 2010). Supporting the importance of NMDA receptors in morphology, these knockout mice also demonstrated decreased spine density on pyramidal neurons of the BLA (Mozhui et al. 2010). As mentioned earlier, stress-induced increases in anxiety-like behavior are often paralleled by increases in BLA spine density. The loss of spine density in the BLA NR2A KO mice could in part explain their reduced anxiety-like behavior. Future studies could evaluate if the increase of spines after stress is also blocked in these mice, and if local NR2A

knockdown in the BLA still blocks the stress-induced behavioral changes in the light/dark exploration task.

Prenatal deletion of the NR1 or NR2B subunit is lethal. However, several genetic models with reduced NR1 or NR2B levels have been successfully used. With the development of a floxed NR1 mouse line, it has been possible to study the effects of NR1 deletion in specific regions of the brain. One such model limited NR1 deletion to hippocampal CA1 pyramidal cells and found a deficit in trace, but not delay, fear conditioning and impaired spatial (MWM, T-maze), but not non-spatial memory (Huerta et al. 2000; Tonegawa et al. 1996; Tsien et al. 1996a, 1996b). Mice with a deletion of NR1 restricted to hippocampal CA3 pyramidal cells are impaired in retention of one-trial context discrimination at three h, but not 24 h after avoidance training (Cravens et al. 2006). Similar results were found in mice with the NR2B subunit deleted in CA1 and cortical pyramidal cells (Brigman et al. 2010). Mice lacking the NR2B subunit on pyramidal cells of the cortex and CA1 also showed multiple learning and memory deficits, including in the MWM, T-maze and trace, but not delay fear conditioning. These same mice additionally showed decreased spine density in pyramidal cells of the CA1. While they demonstrated normal depressive-like behavior in the six-minute forced swim test, these mice developed less depressive-like behavior over the course of a novel 10 day swim stress paradigm, indicating a phenotype specific to repeated stress (Kiselycznyk et al. 2011).

Ketamine and other NMDA receptor antagonists have acute behavioral effects in humans and rodent models that appear to resemble many of the symptoms of schizophrenia. This has in part led to the NMDA receptor hypofunction hypothesis, suggesting that NMDA receptor hypofunction on inhibitory neurons in the PFC is responsible for excessive neuronal excitability in this region thus disrupting executive functions. Mice that are viable with only 5–10% of the normal NR1 levels have been used to test the relationship between NR1 subunits and schizophrenia. These mice have decreased prepulse inhibition, sociability and anxiety-like behavior but increased locomotion, a constellation of behaviors similar to those seen in patients (Halene et al. 2009). A recent study found that deletion of NR1 on interneurons during early postnatal development resulted in schizophrenia-like phenotypes in mice. This included novelty-induced hyperlocomotion, impaired nest building and mating, increased anxiety- and anhedonia-like behaviors, behaviors that were exacerbated by social isolation stress (Belforte et al. 2010). The schizophrenia-like behavior was selective to mice with early postnatal deletion (approximately equivalent to late gestation to age 2 in humans) and was not observed in mice with post-adolescence NR1 deletion. This is consistent with hypotheses proposing a developmental cause in schizophrenia, with stress exacerbating deficits in cortical development.

An additional post-synaptic receptor of glutamate, the AMPA receptor, is also essential for synaptic plasticity. The AMPA receptor is a heteromeric receptor composed of a combination of four subunits: GluR1-GluR4. Various antidepressants with diverse structures have been found to alter the phosphorylation of GluR1 receptors, therefore altering glutamatergic synaptic transmission

(Svenningsson et al. 2007). In schizophrenia, studies have found decreased GluR1 expression in the hippocampus, striatum and PFC that is reversed by treatment with neuroleptics (Sokolov 1998). Mice lacking the GluR1 subunit display novelty-induced hyperlocomotion that is reversed by the antipsychotic haloperidol (Wiedholz et al. 2008). These mice also demonstrated altered social behavior and deficits in prepulse inhibition and impairments in a spatial reversal learning task. In additional studies, GluR1 KO mice were found to demonstrate behaviors indicative of mania-related phenotypes as they also showed stress-induced hyperactivity, reduced immobility in the forced swim test, and alterations in approach/avoid conflict tests. Treatment with lithium reversed the KO's anxiety-like phenotype and partially reversed their stress-induced hyperlocomotion (Fitzgerald et al. 2010). However, deletion of GluR1 did not affect the stress-induced changes in light/dark exploration, as was observed in NR2A knockout mice (Mozhui et al. 2010). As mentioned earlier, AMPA receptor antagonists alone do not block stress-induced changes in morphology as with the NMDA antagonists (Magarinos and McEwen 1995). While this appears contradictory, it is likely that activation of these two types of glutamatergic receptors activate a different collection of downstream signaling pathways (such as calcium-activated pathways), and there are some pathways specific to NMDA receptors that explain stress-induced changes.

The amount of glutamate available to NMDA and AMPA receptors is partially regulated by reuptake with glutamate transporters (EAAT1-5 in humans) located both on neurons and neighboring glial cells (Anderson and Swanson 2000). Postmortem studies of schizophrenic patients have found elevated expression of mRNA but decreased protein expression of EAAT1 in the dorsolateral PFC and anterior cingulate cortex (Bauer et al. 2008) and increased thalamic EAAT1 and EAAT2 (Smith et al. 2001). Similarly, variants of the EAAT1 gene (SLC1A3) have been linked with schizophrenia (Walsh et al. 2008). Conversely, microarrays of postmortem samples of depressed patients found a decrease of EAAT1 and EAAT2 mRNA in the frontal cortex (Choudary et al. 2005) and decreases in EAAT3 and EAAT4 mRNA in the striatum (McCullumsmith and Meador-Woodruff 2002). The antidepressant riluzole has been found to enhance glutamate transporter activity (Fumagalli et al. 2008), and the mood stabilizer valproate has been shown to increase EAAT1 but decrease EAAT2 levels in the hippocampus (Hassel et al. 2001; Ueda and Willmore 2000).

Human EAAT1-4 corresponds to the rodent GLAST, GLT-1, EAAC1 and EAAT4, respectively, (Arriza et al. 1994), with GLT-1 (human EAAT2) responsible for the majority of extracellular glutamate regulation (Arriza et al. 1994; Shigeri et al. 2004; Zarate et al. 2002). Complete GLT-1 knockout results in hippocampal damage and spontaneous epileptic seizures and is often lethal. To avoid these effects, antisense knockdown of GLAST, GLT-1 and EAAC1 have been used and revealed that GLAST and GLT-1 knockdown cause an elevation in extracellular glutamate, neurodegeneration and paralysis while EAAC1 knockdown does not elevate extracellular glutamate and produces only mild neurotoxicity (Rao et al. 2001a, 2001b; Rothstein et al. 1996). GLAST knockout mice are

viable and have a phenotype resembling the positive and negative symptoms of schizophrenia, including increased novelty-induced hyperlocomotion that is reversed by the antipsychotic haloperidol, abnormal sociability, reduced acoustic startle response and impaired visual discrimination (Karlsson et al. 2008, 2009). It is not known, however, how a deficit in glutamate transporters affects depression-related behaviors or response to stress. Future studies could investigate the role of glutamate transporters in buffering pyramidal cells to the increased glutamate release during stress.

Because of their role in synaptic plasticity, these glutamatergic receptors have been extensively studied in animal models of cognition. Animals lacking these receptors often show deficits in cognitive-related tasks that overlap those seen in models of neuropsychiatric disorders. Their role in emotional-related behaviors and stress response, however, has not been systematically studied and still remains untested in many of these mutant models. There have been examples of baseline alterations in emotionality (as with the NR2A mice) and schizophrenia-related behaviors, suggesting that dysfunction of the glutamatergic system alone can result in pathology. A more nuanced approach, however, is seen in those studies analyzing changes in the normal stress response in animals with alterations in the glutamatergic system. As mentioned earlier, stress can act as a predisposing factor for many neuropsychiatric illnesses and it is important to see how stress can lead to a disruption in cognition and emotional regulation. Here, we briefly discussed the dysregulated stress response in NMDA, but not AMPA, receptor-related manipulations. In the future, it will be interesting to see studies of stress response applied to more models of glutamatergic function.

6 Conclusions

Stressful experiences are often reported in the life histories of neuropsychiatric patients and it is well established that stress can be a risk factor for the development of neuropsychiatric disorders. Typical to this clinical population are deficits in emotional regulation and cognitive function. Preclinical data showing parallel behavioral and structural changes in the PFC, hippocampus and amygdala following stress support a direct role for stress modifying these emotional and cognitive functions. Multiple molecular mechanisms could explain these stress evoked changes. Here, we have shown how the glutamate system can be linked to the structural and ultimately behavioral changes seen in neuropsychiatric disorders.

Glutamatergic transmission is integral to multiple levels of neural function. At one level, alterations in glutamate transmission can influence downstream signaling pathways involved in cell death or cell growth. Changes in glutamate transmission during stress could lead to differential activation of these signaling pathways, possibly explaining the morphological changes observed. One such signaling pathway of interest involves brain-derived neurotrophic factor (BDNF).

In its mature form, BDNF promotes neuronal growth and survival and its release is dependent on glutamatergic synaptic activity (Carvalho et al. 2008; Lu 2003). BDNF itself also influences glutamatergic transmission, altering the release of glutamate, glutamate receptor composition and synaptic plasticity (Carvalho et al. 2008; Kuczewski et al. 2009; Lu 2003). BDNF expression is reduced with stress, an effect reversed by antidepressants, and has itself been shown to be reduced in depression-like behaviors (Gourley et al. 2009; Nibuya et al. 1995; Shirayama et al. 2002; Siuciak et al. 1997). Thus far few studies have collectively examined the effects of stress, morphology and behavior in relation to BDNF. Preliminary work has shown that genetically induced BDNF overexpression can prevent stress-induced hippocampal dendritic retraction and reduced learned helplessness, making BDNF a particularly relevant molecule in the study of stress and cognition (Govindarajan et al. 2006). The contributions of BDNF and other downstream signaling pathways will be important targets elucidating the mechanisms of stress-induced morphological changes.

In addition, many studies have used genetic techniques to understand the contribution of glutamate receptors in emotional and cognitive behavioral tasks. These studies have shown that changes in activity and composition of glutamate receptors can lead to changes in emotional regulation and cognitive deficits. However, few studies have used these models to directly investigate the role of receptors in the context of stress. These receptors are integrally involved in synaptic plasticity mechanisms, thus examining the effects of stress on these receptors could help explain why stress is a precursor to the development of neuropsychiatric disorders.

Furthering our understanding of how stress affects glutamate receptors and alters downstream signaling pathways will ultimately contribute to the development of improved therapeutics for individuals suffering from neuropsychiatric disorders.

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Susceptibility Genes for Schizophrenia: Mutant Models, Endophenotypes and Psychobiology

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Abstract Schizophrenia is characterised by a multifactorial aetiology that involves genetic liability interacting with epigenetic and environmental factors to increase risk for developing the disorder. A consensus view is that the genetic component involves several common risk alleles of small effect and/or rare but penetrant copy number variations. Furthermore, there is increasing evidence for broader, overlapping genetic-phenotypic relationships in psychosis; for example, the same susceptibility genes also confer risk for bipolar disorder. Phenotypic characterisation of genetic models of candidate risk genes and/or putative pathophysiological processes implicated in schizophrenia, as well as examination of epidemiologically relevant gene \times environment interactions in these models, can illuminate molecular and pathobiological mechanisms involved in schizophrenia. The present chapter outlines both the evidence from phenotypic studies in mutant mouse models related to schizophrenia and recently described mutant models addressing such gene \times environment interactions. Emphasis is placed on evaluating the extent to which mutant phenotypes recapitulate the totality of the disease

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phenotype or model selective endophenotypes. We also discuss new developments and trends in relation to the functional genomics of psychosis which might help to inform on the construct validity of mutant models of schizophrenia and highlight methodological challenges in phenotypic evaluation that relate to such models.

Keywords Schizophrenia · Psychotic illness · Susceptibility gene · Mutant model · Phenotype · Gene × environment interaction

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1 Introduction

1.1 ‘Missing Heritability’? Evaluating Genetic Evidence for Schizophrenia Risk Genes

Schizophrenia is a highly heritable disorder [having a heritability estimate of approximately 0.8] that is characterised by a multifaceted psychopathology of psychotic symptoms, negative symptoms and cognitive deficits (Tandon et al. 2009; Waddington et al. 2011). The genetic basis of schizophrenia has proven complex and difficult to capture, with the expected breakthrough from genome-wide association studies (GWAS) failing to support the more prominent common risk alleles identified to date (Gill et al. 2009; Owen et al. 2010). Lack of consistent supportive data for specific genes or loci associated with schizophrenia has lead investigators to speculate regarding the underlying causes of ‘missing heritability’ (Manolio et al. 2007; International Schizophrenia Consortium 2009) in schizophrenia.

Two main hypotheses of schizophrenia genetics have suggested that such ‘missing heritability’ reflects either or both of multiple common risk alleles, each of small effect, or the impact of rare but highly penetrant alleles (Allen et al. 2008; Gill et al. 2009; Bassett et al. 2010; Owen et al. 2010). The latter hypothesis is supported by recent microarray findings which have highlighted the involvement of copy number variations (CNVs) in susceptibility to schizophrenia (Xu et al. 2008, 2009; International Schizophrenia Consortium 2008; Walsh et al. 2008). These are not mutually incompatible hypotheses and it is likely that both contribute to risk. It has been noted that genetic studies of schizophrenia might be handicapped by several factors, including genetic and phenotypic heterogeneity, epistatic gene interactions and the role that environmental events play in the development and expression of psychiatric illness (Burmeister 1999; Burmeister et al. 2008). An additional factor is uncertainty as to the genetic-phenotypic boundaries of schizophrenia, with both common risk alleles and rare CNVs associated also with risk for bipolar disorder (Gill et al. 2009; International Schizophrenia Consortium 2009; Grozeva et al. 2010; Steinberg et al. 2011), in accordance with a dimensional, as opposed to a categorical, model of psychotic illness (Waddington et al. 2011). Thus, henceforth, our use of the term ‘schizophrenia’ should be interpreted as shorthand for a breadth of psychotic illness, the boundaries of which remain to be defined.

Evidence to date indicates that while a number of genetic variants have been associated with multiple diagnostic domains, it is clear that some contribute to the expression of a limited set of endophenotypes (van Os et al. 2010). This places considerable emphasis on dissection of the schizophrenia phenotype into distinct and accessible endophenotypes that may relate more closely to underlying pathobiology. Endophenotypes are defined as measurable, intermediate

disease features that bridge the gap between the overt manifestations of schizophrenia and underlying risk genes (Gottesman and Gould 2003; Braff et al. 2007). We have previously noted the utility of endophenotypes in relation to mutant phenotypes, being relatively closer to the genetic basis of the disorder at issue and, therefore, less complex to model; it is assumed that while a single gene can affect multiple behavioural endpoints, an intermediate biological or behavioural endophenotype is less susceptible to confounding influences and is therefore more amenable to investigation (O'Tuathaigh et al. 2007a; Desbonnet et al. 2009; Kirby et al. 2010). An endophenotype-based approach to schizophrenia risk genes may explain how a gene with modest association support may still have a function of potential relevance to the disorder, insofar as it may be associated with one or more putative endophenotype in humans, or their equivalents in mice. Among the most prominent candidate genes implicated in risk for schizophrenia by association or CNV studies of risk for schizophrenia, those for which the evidence is most strong and replicable are Disrupted-in-Schizophrenia-1 (DISC1), dystrobrevin-binding protein 1 (DTNBP1; dysbindin), and neuregulin 1 (NRG1) (Waddington et al. 2007; Allen et al. 2008; Bertram 2008; Gill et al. 2009; Owen et al. 2010).

1.2 The Influence of Technological Progress on Mutant Modelling of Psychosis

Constitutive mutant models involving the construction of mice with gene disruption, either by deletion [i.e. knockout (KO)] or insertion/over-expression [i.e. transgenic/knockin] have been used routinely to study the effect of developmental, whole-body loss-of-target gene function. These techniques have not been without drawbacks, with extrapolation of gene-phenotype relationships potentially confounded by: putative compensatory and redundancy mechanisms; the possibility of embryonic lethality where the gene is functionally pleiotropic; potentially, whole-body ablation or overexpression of a given gene may result in phenotypes that involve both diverse brain regions and extracerebral mechanisms and thus complicate interpretation of phenotypic data. However, each technique presents its own profile of advantage and disadvantage.

Progress in mouse genetic technology over the last decade has facilitated the development of conditional genetic models that are differentiated on the basis of cell-type specificity, regional brain selectivity and temporal activation of the mutation. Unsurprisingly, the evidence indicates that each of these factors can be critical determinants of whether a specific gene disruption can give rise to a given phenotypic outcome or otherwise; indeed, contradictory data have also been reported for the same gene mutation depending on cell-, regional- and possibly temporal specificity (e.g. Singer et al. 2011).

1.3 Assessing Construct Validity of Mutant Models of Schizophrenia

Criteria employed to evaluate a mutant model of schizophrenia involve several forms of validity: face validity [whether the model produces a behavioural phenotype which resemble human disease features]; predictive validity [the degree to which deficits or behavioural signs observed in the model are responsive to agents which either ameliorate or worsen analogous symptoms in patients]; construct validity [whether the experimental/genetic manipulation can be directly related to the known aetiology or pathophysiological features of the illness]. Assessing predictive validity is problematic, due to the lack of efficacy of existing antipsychotic drugs against negative symptoms and cognitive deficits in schizophrenia, both of which have been most strongly associated with prognosis and functional outcome.

The symptoms of schizophrenia, which emerge during adolescence, include positive symptoms [i.e. hallucinations, delusions and thought disorder], negative symptoms [e.g. avolition, anhedonia, blunted affect, poverty of speech and social withdrawal], and cognitive dysfunction [e.g. impairment in working memory, executive function and attention]. Phenotypic modelling of positive symptoms at the level of behaviour is restricted to ‘proxy’ indices of positive symptoms, such as hyperactivity in response to a novel stimulus and to psychotomimetics such as amphetamine or phencyclidine (PCP); prepulse inhibition (PPI) and latent inhibition (LI), involving sensory gating, selective attention to relevant over irrelevant stimuli and attribution of salience, are at the interface of psychotic and cognitive processes (Amann et al. 2010; Desbonnet et al. 2009; Arguello and Gogos 2010; Kirby et al. 2010; O’Tuathaigh and Waddington 2010; van den Buuse 2010). Modelling of negative symptoms has focused primarily on a restricted range of social, emotional, and motivational behaviours that apply to, and are accessible in, both humans and animals, i.e. asociality and, to a lesser extent, anhedonia (Arguello and Gogos 2006; O’Tuathaigh et al. 2010a).

Although the issue of which cognitive domains are disrupted-in-schizophrenia has proven controversial (Harvey et al. 2010), there is some agreement that impairments in working memory, executive function and attention are core features. Disruption to these domains of cognition [including PPI and LI, which are at the interface of cognitive dysfunction and positive symptoms] is amenable to investigation in animals. Particular emphasis has been placed on spatial working memory and executive function, processes which can be accessed using the maze-based and several operant reward-based tasks (Arguello and Gogos 2006, 2010; Amann et al. 2010).

Evaluating the construct validity of a genetic model of psychosis places the focus on (a) how accurately the genetic model mimics the human risk polymorphism, (b) the status of the clinical data linking the risk variant with the entirety of the disorder and/or limited to disease-relevant endophenotypes, and (c) the availability of a valid and reliable phenotypic armamentarium capable of

exploring hypothesised gene-phenotype relationships (Arguello and Gogos 2006; Arguello and Gogos 2010; Desbonnet et al. 2009; Kirby et al. 2010; Low and Hardy 2007).

1.4 Gene × Environment Interactions in Schizophrenia: Implications for Modelling

With ongoing progress in the field of psychiatric genetics and the modifying influence of environmental factors, current conceptualisations of schizophrenia have addressed the complex interaction of genes (G) and environment (E) (van Os et al. 2010). Focusing on studies examining the interaction of epidemiologically relevant risk factors and candidate gene mutant models, it has been noted that such an approach has the potential to produce G × E models with increased construct validity (Desbonnet et al. 2009; Kirby et al. 2010). Consistent with the well-considered 'stress-vulnerability' aetiological model, which proposes an interaction between inherited genetic vulnerability and subsequent exposure to adverse environmental risk factors, there is a growing body of evidence linking early pre- and postnatal life trauma (e.g. maternal infection, childhood abuse), societal factors (e.g. urbanicity, migration), and drug use (e.g. cannabis exposure) with risk for schizophrenia (van Os et al. 2010). While clinical studies linking specific genetic factors with the psychosis-inducing or precipitating effects of environmental factors have been slow to emerge, there has been some supportive evidence sensitive enough to detect the interaction of environmental adversity with a putative risk gene within a young population followed prospectively (Caspi et al. 2005).

Recent years have seen a movement towards the generation of animal models of psychosis based on the interaction of genetic mutations and well-characterised environmental factors (Ayhan et al. 2009; Gray and Hannan 2007). As outlined elsewhere (Burrows et al. 2011), the utility of such G × E models depends upon the degree to which the environmental models at a preclinical level possess construct validity with respect to environmental factors which have been epidemiologically linked with increased risk for schizophrenia; thus, although issues of validity have most frequently been explored in relation to the target gene mutation employed in a given model, whether epidemiologically relevant environmental factors have been successfully translated into current preclinical G × E models constituting a particular challenge (Burrows et al. 2011).

The present chapter will discuss the evidence on (a) mutant models relating to the putative pathophysiology of schizophrenia, primarily dopaminergic and glutamatergic dysfunction, (b) mutant models involving candidate risk genes for schizophrenia, with an emphasis on evaluating the extent to which mutant phenotypes recapitulate the totality of the disease phenotype or model selective endophenotypes, and (c) mutant models addressing G × E interactions relevant to schizophrenia.

2 Genetic Models Relating to Dopaminergic Dysfunction

2.1 Dopamine Receptors

Constitutive KO of dopamine (DA) receptor subtypes in mice has been an important experimental tool in understanding their roles in behaviours considered as endophenotypes for schizophrenia (O'Sullivan et al. 2010). Amphetamine has been shown to disrupt sensory-motor gating, considered to be a behavioural proxy for the impaired ability of schizophrenia patients to gate information flux appropriately. The indirect DA agonist d-amphetamine disrupts sensory gating in D1, D3, and D4 KO mice, but not D2 KO mice, suggesting that the D2 receptor is required for its disruption by amphetamine (Ralph et al. 1999; Ralph-Williams et al. 2002). The KO approach has recently suggested dissociable roles for D1 and D2 receptors in habituation and sensitisation to acoustic startle (Halberstadt and Geyer 2009), which may be of relevance to subgroups of patients that display habituation abnormalities. Antipsychotic drugs enhance low levels of LI. This behavioural index of the ability to ignore irrelevant information is abnormal in patients with schizophrenia and is enhanced in D2 KO mice (Bay-Richter et al. 2009), indicating the importance of the D2 receptor in the processes by which antipsychotic drugs exert their behavioural effects. We have recently shown that enhancement of LI by the antipsychotic drugs haloperidol and clozapine is prevented in D2 KO mice, confirming directly that they act via D2 receptors to restore the ability to ignore irrelevant information. However, we have also shown that amphetamine impairment of LI and its restoration by haloperidol and clozapine is intact in D2 KO mice, suggesting that the role of the D2 receptor differs depending on how disruption to LI is produced. New therapeutic approaches are seeking to circumvent direct effects at the D2 receptor, given their association with undesirable motor and other side effects, hence amphetamine disruption of LI in D2 KO mice may prove to be a useful new application of the KO approach to produce animal models for the identification and evaluation of new treatments (Bay-Richter et al., unpublished data).

The D2 receptor has two isoforms, long (D2L) and short (D2S), derived from alternative splicing. Studies in isoform-specific KOs have indicated the D2L isoform to be crucial for antipsychotic drug action (Xu et al. 2002) and may be of greater importance in extrapyramidal side effects (Wang et al. 2000); however, effects on complex cognitive behaviours more specifically related to schizophrenia have yet to receive systematic evaluation.

Cognitive functions such as working memory and cognitive flexibility are known to be impaired in schizophrenia and are underpinned by prefrontal [PFC] cortical brain regions. There is a high density of D1 receptors in these regions, hence it is not surprising that D1 KO mice show deficits in spatial working memory and reversal learning (Holmes et al. 2004; El-Ghundi et al. 2007). The D2 receptor may also be important in set shifting and reversal learning. D2 KO mice show impairment in adjusting responding to previously reinforced stimuli

when unexpected outcomes are encountered and both D2 KO and antipsychotic drugs have recently been shown to produce similar reversal learning deficits in a set shifting paradigm (Glickstein et al. 2002; Kruzich and Grandy 2004; DeSteno and Schmauss 2009). This raises the possibility that the D2 receptor is important in producing drug-induced impairments in these functions. D3 KO mice also show deficits in spatial working memory in some (Glickstein et al. 2002) but not all studies (Xing et al. 2010). Mutants with selective overexpression of subcortical D2 receptors show behavioural changes that include reduced incentive motivation, as indexed by reduced lever pressing for food reward in operant tasks, and abnormal timing behaviour, which may be relevant to perturbations in timing seen in a number of psychiatric diseases, including schizophrenia (Drew et al. 2009).

2.2 Dopamine Transporter

Extracellular DA concentration is regulated via a plasma membrane DA transporter (DAT). Deletion of this entity dramatically alters both presynaptic homeostasis and extracellular dynamics of DA. These models have been particularly useful in understanding the mechanism of action of psychostimulant drugs (Gainetdinov 2008). While most studies have used DAT KO and heterozygous mice (Giros et al. 1996), DAT knockdown (Zhuang et al. 2001) mice with moderately increased DA levels have also been investigated (Gainetdinov 2008). As a consequence of permanently enhanced DAergic tone, DAT KO mice show locomotor hyperactivity and stereotypy in a novel environment, as well as memory and sensory gating deficits (Gainetdinov 2008). These mice also show social interaction deficits related to behavioural inflexibility (Giros et al. 1996; Rodriguiz et al. 2004), a more positive bias towards a hedonically positive tastant (Costa et al. 2007) and enhanced resistance to extinction of food-reinforced operant behaviour (Hironaka et al. 2004), indicating a role for DA in updating rewarding values, habit learning and memory.

A variety of behavioural responses to psychostimulants and other drugs of abuse have been reported in DAT KO mice and have been reviewed previously (Gainetdinov 2008). Sex-dependent effects on ethanol preference and consumption has been reported in DAT KO mice (Savelieva et al. 2002; Hall et al. 2003; Mathews et al. 2006; Gainetdinov 2008) and have been interpreted as reflecting altered hedonic mechanisms; KO mice showed greater motivation for the task than WT (i.e. 'wanting'), without affecting their responsivity for sucrose reward (i.e. 'liking'). These data suggest that chronically elevated tonic DAergic activity produces changes in incentive motivation; however, these are in the opposite direction to those that might form part of the negative symptom profile of schizophrenia (Cagniard et al. 2006). Rodriguiz et al. (2004) found several patterns of abnormal social responsivity in DAT KO mice, including disruption of the

stability of social hierarchies. This suggests that chronic DAergic hyperfunction may play an important role in abnormal social interactions.

2.3 *Catechol-O-Methyltransferase*

The enzyme catechol-*O*-methyltransferase (COMT) is involved in the catabolism of catecholeamine neurotransmitters. COMT is expressed in the pyramidal neurons of the prefrontal cortex and hippocampus and plays a specific role in the catabolism of cortical DA but not noradrenaline (Papaleo et al. 2008). This specificity, together with the COMT gene lying within a chromosomal region of interest for psychosis [22q11] and showing polymorphism that alters activity of the enzyme, has made COMT the subject of extensive study in schizophrenia (Craddock et al. 2006). Several studies suggest that functional polymorphisms of the COMT gene are associated with performance on frontal cortical tasks such as the Wisconsin card sort task in patients with schizophrenia and controls and confer enhanced vulnerability to environmental triggers for schizophrenia such as cannabis (Caspi et al. 2005).

Studies in COMT KO mice have investigated motor activity, anxiety, aggression, and sensorimotor gating (Gogos et al. 1998, Huotari et al. 2002, Haasio et al. 2003, Tammimäki et al. 2008). The findings include impaired emotional reactivity in female but not male KO and increased aggression and ethanol consumption in male but not female KO; these sex-specific effects support an emerging body of evidence that the influence of COMT on a variety of phenotypes may be different in males and females (Harrison and Tunbridge 2008). Babovic et al. (2007) have studied the phenotypic ethogram of COMT mutants and found that heterozygous but not homozygous, mice show abnormal exploration of and habituation to a novel environment. It is likely that behavioural effects are influenced by DA state according to the Yerkes-Dodson arousal curve, which indicates an inverted U-shaped relationship between arousal and behavioural performance; this has been evoked previously to explain paradoxical effects of prefrontal DAergic manipulations on behavioural performance (Seamans and Yang 2004). Male COMT KO show improvement in spatial working memory (Babovic et al. 2008; Papaleo et al. 2008), whereas a transgenic COMT mutant involving overexpression of the human COMT-VAL polymorphism shows deficits in attentional set shifting, recognition memory, and working memory performance (Papaleo et al. 2008); low-dose amphetamine restored recognition memory, confirming DAergic involvement and providing further support for an inverted U-shaped relationship between cognitive function and cortical DAergic activity (Seamans and Yang 2004; Tunbridge et al. 2006).

Recent studies across commonly used inbred strains have shown that a polymorphism in COMT, a B2 SINE insertion, is associated with behavioural differences related to exploration (Kember et al. 2010), altered expression of genes implicated in synaptic function and intracellular signalling, as well as genes linked with DAergic, glutamatergic, and GABAergic systems (Li et al. 2010).

2.4 *AKT1/GSK-3*

Striatal D2 receptors have been shown to exert their action in a cAMP-independent manner by promoting the formation of a signalling complex composed of AKT, protein phosphatase-2A (PP2A), and β -arrestin 2 (Beaulieu et al. 2004, 2005). Formation of this complex leads to the inactivation of AKT after the dephosphorylation of its regulatory threonine 308 (Thr-308) residue by PP2A (Beaulieu et al. 2005). Inactivation of AKT in response to DA results in the activation of glycogen synthase kinase 3 (GSK-3; see below). Antipsychotic drugs such as haloperidol have been shown to activate AKT phosphorylation in the mouse brain (Emamian et al. 2004). A number of studies have indicated a role for β -arrestin, AKT, and GSK-3 in DAergic regulation of behaviour. β -arrestin KO mice show reduced climbing and reduced sensitivity to the effects of amphetamine on locomotor activity, while AKT1 KO mice show enhanced sensitivity to the disruptive effects of amphetamine on PPI (Beaulieu et al. 2009). Recently, deficits in PPI in females only has been demonstrated in AKT1 KO mice (Chen and Lai 2011).

Several studies have identified SNPs in the *DISC1* gene to be associated with schizophrenia and *DISC1* has been shown to regulate the phosphorylation of certain GSK-3 substrates and neuronal progenitor proliferation via modulation of GSK-3 signalling (Mao et al. 2009). Takashima (2009) have shown that GSK-3 KO mice show deficits in memory reconsolidation, but not acquisition deficits, in water maze and contextual fear conditioning paradigms. While direct studies in negative symptom models are awaited, the association between neuroplasticity, neurodevelopment, and DA signalling makes this a very promising candidate for understanding negative symptoms.

GSK-3 is also a central component of the developmentally important Wnt signalling pathway, which has been suggested to be important for certain aspects of neuronal functioning that may relate to negative symptoms, including synaptogenesis (Hur and Zhou 2010). Mice lacking the homologue of the *Drosophila* segment polarity gene *Dvl-1*, a Wnt signalling partner, are reported as having deficiencies in PPI and social interactions (Lijam et al. 1997). The same group replicated their study six years later and included some additional behavioural tasks (Long et al. 2004). In common with the earlier study, *DVL-1* mice were less likely to huddle together and less likely to build nests, although no PPI deficits were seen. Other behavioural tests showed that mice lacking *Dvl-1* had other impairments in behaviours related to group dynamics. It is not clear why, several generations later, mice lost their deficit in PPI; an environmental effect was considered most likely but an interaction with the background strain cannot be excluded. It should be noted that there are very few research groups that have performed follow-up studies of this type within colonies and it is possible that many phenotypic differences reported for a variety of mutant mice could turn out to show similar environmental sensitivity.

3 Genetic Models Relating to Glutamatergic Dysfunction

Hypoglutamatergic function may play an important pathobiological role in schizophrenia (Coyle 2006; Balu and Coyle 2011). The supporting arguments are based on: (a) the properties of NMDA receptor (NMDAR) antagonists to be psychotomimetic in healthy humans (Adler et al. 1999; Kegeles et al. 2000; Coyle 2006) and to exacerbate or precipitate psychotic symptoms in patients with schizophrenia (Malhotra et al. 1997a, 1997b); (b) reports of NMDAR abnormalities in schizophrenia, both in postmortem brain (Stone et al. 2007) and in living patients using SPECT imaging (Pilowsky et al. 2007); (c) limited evidence to suggest that pharmacological enhancement of NMDAR activity may be therapeutically useful against the symptoms of schizophrenia (Javitt et al. 2004; Coyle 2006; Pinard et al. 2010). Clinical genetic evidence linking gene variants associated with NMDAR activity to schizophrenia has proven inconsistent (Allen et al. 2008).

3.1 NMDAR-Mediated Neurotransmission

Mice deficient in the NMDAR NR1 subunit exhibit deficiencies across several schizophrenia-related phenotypes: decreased responsivity to the NMDAR antagonists PCP and MK-801, hyperactivity in a novel environment and deficits in PPI that were reversible particularly by second-generation antipsychotics, and social deficits that were less responsive to antipsychotics (Mohn et al. 1999; Fradley et al. 2005; Duncan et al. 2004, 2006). Mice containing a targeted mutation in NR1 which prevented NR1 phosphorylation at serine 897, shown to be dramatically reduced in patients with schizophrenia (Emamian et al. 2004), induced a marked disruption of NMDAR-mediated synaptic transmission; these mice displayed deficits in both PPI and social interaction, as indexed by a modified sociability and preference for social novelty paradigm, but no genotypic changes in locomotor activity (Li et al. 2009). These mutants also displayed decreased AMPA receptor-mediated transmission and decreased AMPAR GluR1 subunit expression in the synapse.

A recent study further refined our understanding of the role NMDAR signalling in modulation of schizophrenia endophenotypes by examining the effect of targeted postnatal or post-adolescent ablation of the NR1 subunit in cortical and hippocampal GABAergic neurons, based on evidence supporting corticolimbic GABAergic interneurons as a site of NMDA receptor hypofunction (Belforte et al. 2010). Several schizophrenia-related phenotypes, including novelty-induced hyperlocomotion and nest-building behaviour, were found to be present in postnatally targeted NR1 mutants when assessed in adulthood but not before adolescence. These NR1 mutants also displayed social recognition deficits and a mild anhedonic phenotype, measured in the sucrose preference test, as well as

deficits in spatial working memory, assessed by spontaneous alternation behaviour. Deficits in spontaneous alternation and PPI were reversed by risperidone; other schizophrenia-related behaviours which were not reversed by risperidone included nest building. Interestingly, the same schizophrenia-related phenotypic profile was not observed in mice containing post-adolescent ablation of NR1, supporting the neurodevelopmental hypothesis of schizophrenia and highlighting the importance of developmental dysregulation of GABAergic neurons.

An alternative NMDAR mutant line, involving deletion of the NR1-associated NR2A (GluR1) subunit, was associated with hyperactivity that was ameliorated by haloperidol and risperidone, together with deficits in spatial and latent learning and augmented DA metabolism in striatum and frontal cortex (Miyamoto and Nabeshima 2002). Additionally, mice with partial reduction of the gene SP4 (a member of the SP1 family of transcription factors) evidence a reduction in the expression of the NR1 subunit, accompanied by a specific learning deficit in the Barnes maze; no genotypic differences were found in tests of social interaction, anxiety-related behaviour or other measures of cognition (Zhou et al. 2010).

3.2 Glycine

NMDAR activation involves postsynaptic depolarisation and the binding of two agonists, glutamate, and either glycine or D-serine at the glycine modulatory site (Tsien 2000). Glycine acts at an accessory site necessary for NMDAR function to facilitate NMDA-mediated transmission; thus, glycine agonists promote NMDA-mediated transmission and, controversially, may evidence some efficacy against the negative symptoms of schizophrenia (Tuominen et al. 2005; Patil et al. 2007; Pinard et al. 2010). A mutant line carrying a point mutation in the NMDAR glycine binding site, Grin1 (D481 N), has been shown to display hyperactivity in a novel environment that was not reversed by antipsychotics, reduced sociability that was reversed by D-serine and partially by clozapine, as well as abnormalities in spatial learning and memory (Ballard et al. 2002; Labrie et al. 2008).

As the availability of glycine is partially modulated by glycine transporters GlyT1 and GlyT2, with GlyT1 known to be co-expressed with NMDAR in glutamatergic synapses in the forebrain, mutant studies have reported enhanced NMDAR activity in mice with conditional GlyT1 deletion in forebrain neurons (Yee et al. 2006). Forebrain GlyT1 deletion has been associated with enhancement of associative learning (Yee et al. 2006), object recognition memory (Singer et al. 2007), selective attention, as measured by LI (Yee et al. 2006), and reversal learning in a water maze task (Singer et al. 2009); no effect of the mutation was observed on spatial working memory (Singer et al. 2009). Mice with constitutive heterozygous GlyT1 KO (Tsai et al. 2004) or lacking GlyT1 in the hippocampus and cerebellum (Singer et al. 2011) evidence unchanged PPI and non-responsivity to the PPI-disruptive effects of the NMDAR antagonist MK-801. However, conditional forebrain-specific GlyT1 mutants evidenced impaired PPI and intact

responsivity to the PPI-disruptive effects of MK-801 (Singer et al. 2011). Overall, the diverse precognitive profile observed following enhancement of NMDA transmission via GlyT1 inactivation supports a role for GlyT1 inhibitors in the treatment of cognitive symptoms in schizophrenia.

3.3 *D-serine*

D-Serine is a highly selective endogenous activator of NMDAR signalling. A mouse strain lacking activity of D-amino acid oxidase (DAO, an enzyme involved in metabolism of D-serine), due to a spontaneous point mutation in the gene encoding DAO, is accompanied by reduced behavioural sensitivity to MK-801 (Hashimoto et al. 2005) and PCP (Almond et al. 2006); these changes were accompanied by an increase in NMDA receptor-mediated neurotransmission (Maekawa et al. 2005). DAO mutants demonstrated no disruption to PPI but reduced exploration in a novel environment, with attenuation of stereotype and an increase in locomotor response to methamphetamine (Almond et al. 2006). More recently, using a different procedure to that employed by Almond and colleagues, DAO mutants showed enhanced PPI, increased sensitivity to the PPI-disruptive effect of the NMDA receptor antagonist SDZ 220-581 and a subtle performance deficit in the Morris water maze, but no change in anxiety-related behaviours (Zhang et al. 2011).

Grin1 (D481 N) mutants were crossed with the same DAO mutant line in order to examine whether genetic inactivation of DAO would increase availability of D-serine and ameliorate schizophrenia-related phenotypes in a mouse model characterised by deficient NMDA glycine site activation (Labrie and Roder 2010). In agreement with their hypothesis, mice with both DAO inactivation and Grin (D481 N) mutation showed normalisation of social affiliative behaviour, as measured in the sociability and preference for social novelty test, and of LI, with partial reversal of spatial recognition and sensorimotor gating deficits. These data would suggest that inhibition of DAO function may, in a domain-selective manner, partially improve schizophrenia-related behavioural deficits caused by decreased occupancy of glycine sites associated with NMDA receptors.

Mutants unable to produce D-serine due to disruption of its synthetic enzyme serine racemase display mild hyperactivity (Basu et al. 2009). While social interaction and PCP- or amphetamine-induced hyperactivity and disruption of PPI were found to be unaffected in serine racemase mutants, PCP-enhanced startle reactivity was found to be disrupted in these mutants (DeVito et al. 2011; Bennenworth et al. 2011). Serine racemase KO mice also demonstrate a subtle cognitive phenotype characterised by spatial learning deficits (Basu et al. 2009) and disrupted episodic memory performance in an object recognition paradigm, while other aspects of task performance which measured novelty detection, recognition memory, and relational memory were intact (DeVito et al. 2011); these deficits were accompanied by dendritic morphological abnormalities of pyramidal neurons

in the medial prefrontal cortex. In overview, while the endpoint associated with many of these lines is NMDA receptor hypofunction, the diverse modes for achieving this outcome carry distinct phenotypic consequences compensatory mechanisms may account for some of these differences. However, phenotypic diversity may reflect (a) differential availability of D-serine and glycine at the glycine modulatory site and (b) whether the mutation affects receptor function directly or indirectly via limited availability in a subset of glycine modulatory site ligands.

3.4 NMDAR Signalling Complex

Abnormalities in NMDAR-interacting protein function have been implicated in schizophrenia; these include the glial glutamate and aspartate transporter (GLAST), which has been shown to be expressed differentially in the dorsolateral prefrontal cortex, anterior cingulate cortex and thalamus in postmortem brains from patients with schizophrenia (Smith et al. 2001; Bauer et al. 2008). GLAST KO exhibit antipsychotic-sensitive hyperactivity in a novel environment, increased locomotor responsiveness to the NMDAR antagonist MK-801 and impaired sociability (Karlsson et al. 2008, 2009). Knockout of the NMDAR signalling molecule SynGAP is associated with increased novelty-induced hyperlocomotion and reduced behavioural sensitivity to MK-801 administration (Guo et al. 2009). SynGAP mutants evidence intact sociability but impaired social novelty preference, disrupted PPI, enhanced startle reactivity, and deficits in spatial working memory (Guo et al. 2009).

3.5 Metabotropic Glutamate Receptors

Metabotropic glutamate receptor (mGluR) involvement in the pathophysiology of schizophrenia, together with the diverse range of phenotypes associated with mutation for members of this receptor family (mGluR1-8), are discussed in detail elsewhere (Krivoy et al. 2008). Mutants with AMPA GluR1 KO display antipsychotic-sensitive hyperactivity in a novel environment but not in the home cage, reduction of MK-801-induced hyperactivity and impaired PPI, in association with reduced clearance of DA (Wiedholz et al. 2008). Examination of the behavioural phenotype of mGluR4 KO mice revealed impaired PPI and enhanced sensitivity to the locomotor stimulatory effects of the NMDAR antagonist MK-801; no differences, however, were observed in relation to social behaviour and spatial working memory (Sagata et al. 2010). mGluR5 KO mutants show hyperactivity and impaired PPI that are reversible by antipsychotics; hyperactivity induced by the NMDA antagonist MK-801 was also increased following deletion of mGluR5 (Brody et al. 2004; Gray et al. 2009).

In summary, the evidence from metabotropic glutamate receptor mutants would implicate this receptor family in PPI impairment. Other studies have documented depression- and anxiety-related behavioural phenotypes across a variety of assays (Feyder et al. 2007; Chourbaji et al. 2008). GluR1 KO also exhibited increased novelty- or stress (injection, restraint or forced stress)-induced hyperactivity, as well as reduced immobility in the forced swim test (Fitzgerald et al. 2010). These deficits were accompanied by a reduced anxiety phenotype in the elevated plus maze that was normalised following chronic (2 week) treatment with lithium, used as a moods stabiliser in bipolar disorder. The authors suggested that the combination of schizophrenia-related phenotypes and affective/manic behavioural signs in GluR1 KO mice, particularly under conditions of stress, may provide a novel model of schizoaffective disorder.

4 Genetic Models Relating to Candidate Risk Genes and Copy Number Variations

4.1 Disrupted-in-schizophrenia-1

Familial mutation in the disrupted-in-schizophrenia-1 (DISC1) gene, due to a balanced chromosomal translocation at 1q42.1-1q42.3, has been associated with schizophrenia and other psychiatric disorders across diverse populations (Chubb et al. 2008; Johnstone et al. 2011); while there are initial reports of associations between DISC1 and positive symptoms, these are inconsistent as to whether the relationship is with delusions (DeRosse et al. 2007) or hallucinations (Szeszko et al. 2008). Genetic lineage and association studies have further suggested DISC1 as a general risk factor for schizophrenia, schizoaffective disorder, bipolar disorder, major depression, autism, and Asperger syndrome (Chubb et al. 2008). The mechanism through which DISC1 dysfunction may contribute to a wide spectrum of psychiatric disorders remains unknown (Hennah and Porteous 2009). During embryonic development, DISC1 appears to play an important role in neurodevelopment and structural plasticity via interaction with several proteins, including phosphodiesterase-4B, Fez1, NDEL1 and LIS1 (Duan et al. 2007; Chubb et al. 2008; Muir et al. 2008).

While generation of a DISC1 KO model has not been achieved, largely due to the complexity of exon usage of the DISC1 gene (Wang et al. 2008), several mutant models of DISC1 gene function have been described in the literature: (1) A naturally occurring DISC1 mutation (25 base pair deletion at exon 6) in the commonly employed 129S6 Sv/Ev mouse strain, which additionally carries a termination codon in exon 8 and a polyadenylation signal in the adjacent intron, shows impairment in spatial working memory using a delayed-non-match-to-place task, but not using the Morris water maze, tests of associative learning-contextual conditioning or other alternative measures of memory-related processes

(Koike et al. 2006; Kvajo et al. 2008); (2) ENU mutagenesis in exon 2 of DISC1 is characterised by hyperactivity, with antipsychotic-sensitive deficits in PPI and LI and disrupted working memory in a T-maze task (Clapcote et al. 2007); (3) A transgenic line with inducible expression of a DISC1 C-terminal fragment evidenced impaired spatial working memory using the delayed-non-matched-to-place task, as well as reduced sociability (Li et al. 2007); (4) A transgenic line with expression of a dominant-negative truncated form of DISC1 under the CaMKII promoter, mutants showed hyperactivity but no changes in PPI, social interaction or cognition (Hikida et al. 2007); (5) An inducible transgenic line with forebrain-specific expression of mutant human DISC1 (hDISC1) under the CaMKII promoter showed hyperactivity without material disruption to PPI, sex-specific impairment of working memory using the Morris water maze, with a deficit in dyadic social interactions but not sociability (Pletnikov et al. 2008); (6) A transgenic line with expression of truncated DISC1 exhibited normal exploratory activity but disruption to LI (Shen et al. 2008).

Interestingly, lentiviral silencing of DISC1 expression in the adult dentate gyrus was accompanied by an increase in novelty-induced hyperlocomotion; this behavioural effect was reversed following treatment with the GSK-3 β inhibitor SB-216763, suggesting that increased GSK-3 β activity secondary to DISC1 loss-of-function might be associated with schizophrenia-like behaviours (Mao et al. 2009). Further support for this hypothesis has come from a recent report that pharmacological or genetic inactivation of GSK-3 in the ENU-generated DISC1 mutant (L100P) reversed phenotypic deficits in PPI and LI, and normalised their hyperactivity profile (Lipina et al. 2010). This further implicates impaired DISC1-GSK-3 interplay in schizophrenia-relevant behaviours.

Employing the mutant hDISC1 transgenic model (Pletnikov et al. 2008), a follow-up study assessed the effect of timing of the DISC1 mutation on the expression of schizophrenia-related phenotypes (Ayhan et al. 2011). In this study, the effect of mutant hDISC1 expression was compared during prenatal, postnatal, or both periods. Regardless of timepoint of expression, hDISC1 mutants exhibited fewer cortical parvalbumin-positive cells, as well as cortical hypodopaminergia relative to controls. Combined pre- and postnatal mutant hDISC1 expression was associated with the most prominent schizophrenia-related abnormalities; these included decreased social interaction in a test of dyadic interaction, increased sensitivity to psychostimulants and increased immobility in the tail suspension test, with lateral ventricular enlargement and morphological abnormalities in granule cells of the dentate gyrus. In contrast, neither pre- nor postnatal expression alone fully recapitulated the phenotype associated with combined timepoint expression.

Extending these findings and introducing regional specificity, Niwa and colleagues (2010), using *in utero* electroporation to produce selective knockdown of DISC1 in pyramidal neurons in prefrontal cortex of the foetal mouse, reported post-pubertal emergence of disrupted PPI, impaired object recognition memory and delayed T-maze alternation; there was disturbed maturation of mesocortical DAergic projections to and interneurons in the medial prefrontal cortex. Several of

these phenotypes, including impaired PPI and increased extracellular DA levels in the prefrontal cortex, were normalised following administration of clozapine.

In summary, the diversity of DISC1 models available indicates that the variable phenotypic effects of different DISC1 mutations appears to be highly dependent upon time of expression, environmental factors (see 6.1) and, potentially, interactions with other risk genes (Ross et al. 2006; Ayhan et al. 2011; see 6.3).

4.2 *Dysbindin*

Systematic review and meta-analysis has indicated dystrobrevin-binding protein 1 (DTNBP1; dysbindin) to be a replicable risk gene for schizophrenia (Allen et al. 2008; Gill et al. 2009). Initial data indicated that dysbindin mRNA expression was decreased in schizophrenia in PFC and hippocampus (Weickert et al. 2004, 2008) but subsequent studies have failed to replicate this finding in the dorsolateral prefrontal cortex (Tang et al. 2009). In vitro work indicates that reduction in dysbindin can lower glutamate release, while overexpression of dysbindin elevates glutamate release, suggesting a modulatory role for dysbindin in glutamate neurotransmission in cortical neuronal cultures (Numakawa et al. 2004).

The 'sandy' (*sdv*) mouse, a spontaneous mutation identified in the DBA/2J strain, carries a naturally occurring deletion that includes the DTNBP1 gene. Behavioural phenotyping of *sdv* mutants has produced inconsistent findings, there being reports of unaltered (Feng et al. 2008; Bhardwaj et al. 2009; Li et al. 2003), decreased (Takao et al. 2007; Hattori et al. 2008) or increased (Cox et al. 2009; Ji et al. 2009) spontaneous exploratory activity in the open field. Sensitisation to amphetamine is enhanced, with both increased turnover (Murotani et al. 2007) and decreased concentration (Hattori et al. 2008) of DA having been reported. While the DBA/2J strain does not show robust PPI, precluding assessment therein, backcrossing of the *sdv* mutation onto a C57BL6 line revealed either reduced PPI (Talbot 2009) or enhanced PPI and startle reactivity (Papaleo et al. 2012).

Sdv mutants evidence reduction in social contacts and social contact time in a dyadic paradigm (Feng et al. 2008; Hattori et al. 2008); genotypic disruption of spatial learning and working memory using the Barnes maze, the Morris water maze and the T-maze forced alternation task (Takao et al. 2007; Cox et al. 2009), as well as deficits in recognition memory using the novel object recognition paradigm, have also been observed (Feng et al. 2008; Hattori et al. 2008).

It has been suggested that reduction in DTNBP1 expression, associated with decreased glutamatergic neurotransmission (Numakawa et al. 2004), may contribute to aberrant prefrontal cortex function and consequent working memory deficits in schizophrenia (Jentsch et al. 2009). These authors found modest disruption in working memory in *Sdv* mutants using the choice accuracy measure in a delayed-non-match-to-position task; this was accompanied by disturbance of excitatory neurotransmission in the PFC, as indexed by reduction in amplitude of eEPSCs and frequency of miniature EPSCs, with abolition of paired-pulse

facilitation. However, abundant dysbindin expression in the hippocampus may indicate an alternative mechanism for such dysfunction via synaptic plasticity and associated memory functions (Takao et al. 2008; Cox et al. 2009). Mutation of DTNBP1 also caused deficits in working memory, as measured by the delayed-non-match-to-position task; this deficit was accompanied by a decrease in cortical NR1 mRNA expression that was correlated with working memory performance (Karlsgodt et al. 2011).

In a separate study, *Sdy* mice displayed enhanced learning in the acquisition phase of a modified T-maze working memory task; with introduction of delay intervals, DTNBP1 mutants then displayed worse performance (Papaleo et al. 2012). This genotype-specific and delay-dependent disruption was exacerbated by exposure to a mild stressor during testing, where mice were housed in a new, clean cage rather than the familiar home cage; these data are consistent with the recognised ability of mild stressors to impair PFC mediated working memory function. Cellular findings suggest that the interaction between CaMKII and enhanced signalling at cortical D2 receptors may contribute, at least partially, to observed working memory phenotypes (Ji et al. 2009; Papaleo et al. 2012).

4.3 Neuregulin

Neuregulin-1 (NRG1) has been associated functionally with numerous neurodevelopmental processes, including neuronal migration, neurotransmitter receptor expression/activation, myelination, and synaptic plasticity (Mei and Xiong 2008). Multiple NRG1 isoforms have been described, the diversity of which has been attributed to alternative splicing and the existence of multiple 5' flanking regulatory elements. NRG1 I–III share the EGF-like signalling domain; interaction of these EGF-like domains with membrane-associated tyrosine kinases (ErbB receptors) activates intracellular signalling pathways implicated in the pathobiology of schizophrenia (Harrison and Law 2006; Mei and Xiong 2008; O'Tuathaigh et al. 2009). Initially associated with increased risk for schizophrenia in an Icelandic sample (Stefansson et al. 2002), NRG1 has been confirmed on meta-analysis to be a replicable risk gene for schizophrenia (Bertram 2008). Further evidence indicating disruption to NRG1-ErbB signalling in the pathobiology of schizophrenia derives from studies in human postmortem brain tissue and cell lines (Harrison and Law 2006; Mei and Xiong 2008).

A missense mutation in exon 11, which codes for the transmembrane region of NRG1, has been associated with schizophrenia (Walss-Bass et al. 2006). The phenotype of mutants with heterozygous deletion of the transmembrane (TM)-domain of NRG1 [homozygous KO being lethal] is characterised by hyperactivity, including sex-specific effects among individual topographies of the murine repertoire, that is sensitive to amelioration by clozapine (O'Tuathaigh et al. 2006, 2007a; Karl et al. 2007); there is modest disruption to PPI (Stefansson et al. 2002; however, see Van den Buuse et al. 2009; O'Tuathaigh et al. 2008, for

conflicting data). Although initial studies indicated no effect of TM-domain NRG1 loss-of-function on various learning and memory measures such as Y maze alternation and the Barnes maze (O'Tuathaigh et al. 2007b), a separate investigation revealed mild domain-specific cognitive abnormalities in TM-domain NRG1 mutants in novel object recognition memory and in contextual but not cued-directed fear learning (Duffy et al. 2010). Consistent with earlier reports (O'Tuathaigh et al. 2007b), no differences in spatial learning or working memory were observed in this study.

Heterozygous KO of TM-domain NRG1 likely affects several NRG1 isoforms. In terms of phenotypic comparisons with more isoform-specific NRG1 deletions, type III NRG1 mutants exhibit greater deficits in PPI relative to TM-NRG1 mutants (Chen et al. 2007). However, neither type III NRG1 mutants nor those with targeted disruption of type I/type II NRG1 display the hyperactivity that is characteristic of TM-NRG1 mutants (Rimer et al. 2005; Chen et al. 2007). In contrast, mutants with heterozygous deletion in the EGF-like domain [that might be expected to impact on all NRG1 isoforms] exhibit an initial increase in locomotor activity and more rapid habituation of exploration in a novel environment; in the same mutant line, showing baseline PPI to be unaltered, PPI was disrupted by MK-801 but not by amphetamine (Duffy et al. 2008).

To assess the impact of over-expression of NRG1, mice carrying the transgene of mouse type-1 NRG1 cDNA were examined for the presence of schizophrenia-related abnormalities (Kato et al. 2010). Each of two separate transgenic lines displayed: (a) increased novelty-induced hyperactivity, although habituation levels did not differ across genotypes; (b) intact PPI and startle responsivity; (c) impairment in contextual learning; (d) increased aggression and decreased social behaviours in the resident-intruder paradigm. HPLC analysis in various brain regions found decreased DA and DOPAC levels in the hippocampus of over-expressor mutants. Paradoxically, both hypermorphic and hypomorphic expression of NRG1 produce a common behavioural phenotypic profile. A different type-1 NRG1 over-expressor line, driven by a Thy-1 promoter in brain projection neurons, displayed marked impairment of PPI; however, a tremor phenotype likely confounds behavioural assessment (Deakin et al. 2009). Phenotypic differences between both NRG1 Type-1 over-expressor lines may be attributable to the use of distinct gene promoters to regulate transgene expression (Kato et al. 2010).

Although it was initially shown that NMDAR expression is reduced in TM-domain NRG1 mutants (Stefansson et al. 2002), recent evidence has questioned the role of NRG1 in NMDAR function, with brain-specific mutation of ErbB2 and ErbB4 having no effect on the expression of NMDAR subtypes (Barros et al. 2009; Gajendran et al. 2009). However, phosphorylation of NR2B receptor subunits appears reduced in the TM-domain NRG1 mutant (Bjarnadottir et al. 2007). Interestingly, ablation of the ErbB4 receptor in parvalbumin-positive interneurons in the prefrontal cortex prevented NRG1-induced stimulation of GABA and produced a schizophrenia-related phenotype comparable to that observed in heterozygous NRG1 or ErbB4 KO models; these included PPI deficits, impaired working memory and hyperactivity (Wen et al. 2010). This conditional

line also showed impaired working memory in the 4- or 8-arm radial maze; a similar profile has not been observed in NRG1 and ErbB4 mutants (O'Tuathaigh et al. 2007a, b). These data would implicate parvalbumin-positive neurons as a target for NRG1/ErbB4 modulation of behaviours relevant to schizophrenia. Recent experiments demonstrate that ErbB4 also controls the formation and/or maintenance of excitatory synapses on specific populations of GABAergic interneurons and that postsynaptic ErbB4 function is probably required in this process (Fazzari et al. 2010).

A potential role for NRG1 in $G \times E$ interactions related to schizophrenia (see 5.2) is highlighted by a recent study which examined HPA axis activity and stress responsivity in a line of NRG1 mutant rats [generated using the sleeping beauty transposon] with disruption of the NRG1 Type II isoform (Taylor et al. 2011). NRG1 mutant rats displayed increased basal corticosterone levels and decreased corticosterone levels after 30 min restraint stress relative to basal levels, with increased expression of glucocorticoid receptor expression in the pituitary and hippocampus and decreased expression in the paraventricular nucleus. These mutants also displayed slower habituation in a novel environment, consistent with that observed in NRG1 hypomorphic mice (O'Tuathaigh et al. 2006), which the authors interpreted as increased reactivity to environmental stimuli.

4.4 Copy Number Variations

Studies now indicate the importance of rare structural mutations in schizophrenia, although the size of their contribution or possible associations with symptom subtypes remains unclear (Bassett et al. 2010; Owen et al. 2010). These mutations usually consist of DNA sequences that vary between individuals due to either duplication or deletion of chromosomal material. Initial support for CNVs came from patients with velocardiofacial syndrome, caused by a microdeletion at chromosome 22q11 and associated with substantive increase in risk for psychosis (Karayiorgou and Gogos 2006). Mice containing heterozygous disruption in a subset of 22q11.2 genes (Gnb11, Dgcr8 and Tbx1) demonstrate significantly reduced PPI (Long et al. 2006; Paylor et al. 2006; Stark et al. 2008). Other schizophrenia-related phenotypes of mutants carrying a multigene deletion across the 22q11 region include neuronal migratory defects and disruption of cortical neurogenesis (Meechan et al. 2007a, 2007b; Stark et al. 2008).

There is now considerable evidence for an increased number of low-frequency CNVs, across numerous loci, in individuals with schizophrenia (International Schizophrenia Consortium 2008; Walsh et al. 2008; Kirov et al. 2009a; Levinson et al. 2011). Several studies have identified common CNV loci which map to chromosomes 1q21.1 and 15q13.2 (International Schizophrenia Consortium 2008; Stefansson et al. 2002; Levinson et al. 2011). The 15q13.2 region contains the $\alpha 7$ nicotinic cholinergic receptor gene (CHRNA7); mice containing partial knockout of the CHRNA7 gene evidence attentional deficits (Young et al. 2007), while

agonists at the $\alpha 7$ nicotinic cholinergic receptor may have some efficacy against both the positive and negative symptoms of schizophrenia (Hajós and Rogers 2010).

In recent years, several studies have supported a link between increased susceptibility for schizophrenia and microdeletions affecting the gene neurexin 1 (NRXN1; Kirov et al. 2008, 2009b; Ikeda et al. 2010; Rujescu et al. 2009; Levinson et al. 2011). Neurexins are presynaptic proteins that function as synaptic recognition molecules and may contribute to various aspects of synaptic function via binding to neuroligins (Ichtchenko et al. 1995). Mice containing deletion of NRXN1 α display behavioural and electrophysiological deficits relevant to schizophrenia, including disruption to synaptic transmission and PPI (Eherton et al. 2009). Interestingly, dysregulation of NRXN1 expression throughout development has been observed in mice containing mutation of the DISC1 gene (the ENU-generated L100P mutation), providing a measure of functional association between two prominent risk genes.

5 Evaluation of G \times E Hypotheses in Mutant Models of Schizophrenia

According to the neurodevelopmental model of schizophrenia, genetic (G) and environmental (E) influences combine to influence early CNS development and function, producing pathophysiological deficits which precede the onset of psychotic symptoms (Fatemi and Folsom 2009; Waddington et al. 2011). A variety of early insults, ranging from viral infection during pregnancy, through psychosocial adversities during childhood, to psychosocial stressors and substance abuse over adolescence/young adulthood, have been associated with schizophrenia (van Os et al. 2010) and shown to produce behavioural and neurobiological changes reminiscent of schizophrenia in adult rodents and non-human primates (O'Tuathaigh et al. 2007a, 2010a, O'Tuathaigh et al. 2010b). One important consideration in the development of G \times E models is the timing of the environmental insult. The majority of preclinical G \times E studies have sought to employ environmental manipulations at specific periods of brain development, from early stages of pregnancy through to adolescence, which have been identified as critical to the pathogenesis of schizophrenia (Cannon et al. 2003; Waddington et al. 2011).

5.1 DISC1 \times Immune Challenge

A number of recent studies have examined the behavioural consequences of manipulation of the pre- or post-natal environment in mice harbouring genetic mutation. Epidemiological findings have found an association between elevated cytokines in maternal serum and increased risk for schizophrenia in offspring

(Brown et al. 2004), leading some authors to suggest that $G \times E$ interaction in schizophrenia may involve genetic vulnerability to abnormal immune responses following environmental challenge (Ayhan et al. 2009). A recent study examined the interaction of the schizophrenia risk gene DISC1 with neonatal exposure to the immune system activating agent Poly I:C (Ibi et al. 2010). The authors proposed that the neonatal period in mice corresponds to post-conception days 128–158 for cortical events and 93–115 for limbic development in humans (Clancy et al. 2007; Ibi et al. 2010). Transgenic mice expressing a dominant-negative form of DISC1 demonstrated a selective and more pronounced schizophrenia-related phenotype across various cognitive measures (i.e. spontaneous alternation, object recognition memory, contextual fear memory) following neonatal immune challenge; social interaction and MK-801-induced hyperactivity were also selectively altered in Poly I: C-treated DISC1 mutants. These behavioural deficits were accompanied by a decrease in parvalbumin-positive interneurons in the medial prefrontal cortex.

Another model of $G \times E$ interaction related to schizophrenia has been described recently in mice with inducible expression of mutant hDISC1 in fore-brain neurons (Pletnikov et al. 2008; Abazyan et al. 2010). Rather than examining neonatal immune challenge, this study employed the well-characterised prenatal Poly I: C immune challenge paradigm (Meyer et al. 2009). These authors demonstrated in male mice expressing mutant hDISC1 that treatment with Poly I:C at gestational day (GD) 9, corresponding to the end of the first trimester of human pregnancy, produced a behavioural profile that included elevated anxiety, depression-like behaviours and disrupted social interaction; these behavioural deficits were accompanied by altered 5-HT neurotransmission in the hippocampus, decreased HPA axis reactivity and differential modulation of secretion of inflammatory cytokines, as well as attenuation of genotypic enlargement of the lateral ventricles. In contrast with the earlier study (Ibi et al. 2010), no changes in cognition were observed. These data may suggest an environmental mechanism by which the same DISC1 mutation can produce diverse neuropsychiatric phenotypes, in a manner comparable to that observed with the original Scottish chromosomal dislocation (Chubb et al. 2008; Hennah et al. 2009). With respect to potential mechanisms underlying putative interactions between DISC1 dysfunction and immune activation, it has been suggested that a key target may be disturbance of neuronal maturation, which may be effected via proliferation, migration, early dendritic development, and axonal outgrowth, as well as synapse formation and maturation (Ayhan et al. 2009).

5.2 *NRG1/COMT* \times *Exposure to Drugs of Abuse*

Epidemiological data have indicated an association between substance abuse and risk for psychosis. Although clinical data have not indicated a relationship between NRG1 genotype and behavioural responsivity to drugs of abuse, studies conducted in mutant models of NRG1 function have indicated changes in behavioural and

neural sensitivity to cannabis and psychostimulant drugs in heterozygous NRG1 TM-domain mutants and COMT mutants (Boucher et al. 2007a, b; O'Tuathaigh et al. 2010c).

NRG1 male mutants demonstrated increased sensitivity to the hypoactivity-inducing and PPI-disruptive effects of an acute dose of Δ^9 -THC, the psychoactive constituent of cannabis (Boucher et al. 2007a). In a separate follow-up study, female NRG1 mutants were shown to be insensitive to Δ^9 -THC-induced social withdrawal, although its hypoactivity-inducing effects were observed in both genotypes (Long et al. 2010). Increased sensitivity to Δ^9 -THC-induced activation of *c-fos*, a marker of neuronal activation, was also found in NRG1 male mutants across several brain regions (Boucher et al. 2007b). Subchronic exposure to the synthetic cannabinoid CP55, 940 for 15 days in NRG1 TM-domain mutants was associated with more rapid tolerance to its hypoactivity-inducing and hypothermic effects (Boucher et al. 2010); in contrast, NRG1 mutants were insensitive to its anxiety-modulating effects. More recently, it was shown that the effects of subchronic administration of NMDA receptor antagonists, a pharmacological regimen known to produce schizophrenia-related deficits in rodents, were altered in a paradoxical manner in NRG1 TM-domain mutants; specifically, the hyperactivity and social interaction phenotypes reported in vehicle-treated mutants were absent following NMDA receptor antagonist treatment (O'Tuathaigh et al. 2010b).

Cannabis consumption, particularly when used in adolescence, has been associated with a doubling of risk for schizophrenia (Arseneault et al. 2004; Henquet et al. 2005; Moore et al. 2007). A longitudinal birth cohort study has shown that cannabis use was more likely to be followed by psychosis among those exposed during adolescence and homozygous for the COMT Val108Met allele (Caspi et al. 2005). We have recently shown that in COMT KO, genotype exerted specific modulation of responsivity to chronic Δ^9 -THC administration during adolescence in terms of exploratory activity, spatial working memory and anxiety; this illuminates the interaction between genes and adverse environmental exposures over a particular stage of development in the expression of the psychosis phenotype (O'Tuathaigh et al. 2010c).

5.3 Genes Related to the Pathophysiology of Schizophrenia × Exposure to Prenatal Stress

Mice containing either knockdown or a point mutation in the synaptosomal-associated protein of 25 kDa (SNAP-25), a gene associated with synaptic transmission and linked with schizophrenia in meta-analysis of genomic association data (Lewis et al. 2003), were particularly vulnerable to the effects of prenatal stressors on the emergence of schizophrenia-relevant behavioural phenotypes (Oliver and Davies 2009). Specifically, during embryonic day 11.5–17.5, SNAP-25 mutants exposed to a combination of physical (restraint, swim), situational (open field), and social stress, demonstrated significantly enhanced PPI deficits relative

to stressed WT; these deficits were reversed by haloperidol or clozapine. Interestingly, social interaction deficits, in terms of both sociability and preference for social novelty, were observed only in SNAP-25 point mutants that had been exposed to prenatal stress; this indicates that combining genetic vulnerability with exposure to an environmental stressor both modifies and produces novel phenotypes relevant to schizophrenia. Prenatal stress increased anxiety-related behaviour (elevated plus maze, open field) in all mice regardless of genotype.

Reelin is a protein that has been functionally linked with the control of synaptic functions and a dysfunctional Reelin-mediated signalling pathway has been suggested to play a role in the pathophysiology of schizophrenia (Knuesel 2010). Several studies have examined the effect of early life adversity on the heterozygous Reeler mouse phenotype. In Reeler mutants who had been prenatally exposed over GD 14-16 to the neurotoxin chlopyrifos, development was altered in a paradoxical fashion, reversing genotypic abnormalities across a number of behavioural domains: ultrasound vocalisation, increased amphetamine-induced locomotion, and stereotype (Laviola et al. 2006). Interestingly, a similar effect was observed in Reeler mutants who were exposed to early maternal separation (PND2-6); maternally separated Reeler mutants failed to show abnormalities in ultrasonic vocalisations and exploratory behaviour, as well as social interaction (Ognibene et al. 2007). These data illustrate the emergence of unexpected and novel phenotypes in risk gene mutants as a result of gene \times environment interactions.

5.4 Overview of $G \times E$ studies

Going forward, systematic examination of $G \times E$ risk factor manipulations in genetic models will be necessary to identify common and distinct $G \times E$ risk profiles at the level of endophenotypes and underlying neurobiology. With respect to diagnostic categories which may be differentially susceptible to environmental versus genetic influences, a recent review of clinical evidence for $G \times E$ interactions in schizophrenia hypothesised that environmental factors associated with schizophrenia may have a greater impact on affective and psychotic dimensions, while developmental influences may have a greater impact on negative and cognitive dimensions (van Os et al. 2010). One of the criticisms of the genetic model data to date has focused on the translational success of modelling certain environmental factors or stressors (e.g. psychosocial stressors) between human and small animal species (van Os et al. 2010). Additionally, for logistical reasons, the feasibility of studies combining exposure to several environmental factors with any given genetic vulnerability factor(s) may be difficult to realise.

In teasing out the biological mechanisms underlying synergistic effects of environmental and genetic factors on risk for disease, it is known from preclinical studies that exposure to several environmental stressors implicated in schizophrenia (prenatal immune challenge, early life adversity, psychosocial stressors,

adolescent cannabis/psychostimulant exposure) may be associated with disruption to DAergic transmission. Given interactions between DAergic function and GABAergic, glutamatergic and endocannabinoid signalling, future research on the biological impact of these environmental insults should also examine neurodevelopmental processes and functions implicated in schizophrenia, including changes in myelination, synapse formation, and immune system function.

6 Discussion

6.1 Divining gene-Phenotype Associations in Schizophrenia Risk Gene Models

6.1.1 Sex Differences

Despite considerable epidemiological evidence for sex differences in the incidence, psychopathology and course of schizophrenia, the notable absence of mutant studies which have systematically compared male and female murine phenotypes has been noted (O'Tuathaigh et al. 2010a; Chen and Lai 2011). Additionally, it has been noted that aside from the potential explanatory role of sexually dimorphic biology in relation to the epidemiological findings, sex differences in the nature of environmental interactions may also help to explain sex differences in the expression of psychiatric symptoms (Accortt et al. 2008; Burrows et al. 2011). The presence of sexually dimorphic effects of susceptibility gene mutation on the expression of schizophrenia-related endophenotypes, which have been noted throughout our review of the literature, might suggest the involvement of sex hormonal regulation of AKT1, DISC1, NRG1 and other risk gene function in a manner which may contribute to the pathogenesis and/or expression of schizophrenia.

6.1.2 Improved Characterisation of Behavioural Models of Schizophrenia

As others have pointed out, progress in molecular and genomic techniques, and the implications for genetic modelling in schizophrenia, has not been paralleled by comparable advances in the generation of murine behavioural paradigms capable of measuring specific forms of cognition and social and motivational behaviours which are disrupted-in-schizophrenia; furthermore, these relate to clinical features that are largely insensitive to existing antipsychotic treatments (Brigman et al. 2010). While the field has made incremental progress in generating novel murine paradigms to assess these domains, including translating across species from rat to mouse, significant progress have been made in some areas such as the development of tasks employing touchscreen technology to measure executive function processes (Brigman et al. 2010).

Despite cognitive deficits being considered a core feature of schizophrenia, several aspects of cognition have not been addressed in existing behavioural models. Recent studies have described novel assessment methods for problem-solving behaviour, a form of executive functioning (Ben Abdallah et al. 2011). In this paradigm, which is dependent upon a set of ethologically appropriate escape behaviours within a limited time period, the greatest executive function deficits were observed in mice deficient in the GluA1 subunit of AMPA receptors or mice which had received hippocampal lesions. Mice with lesions of the medial prefrontal cortex showed more subtle and specific performance deficits under one of the task conditions, while similarly subtle difficulties in problem-solving behaviour were found in mice containing overexpression of the D2 receptor or in mice which were chronically treated with an NMDA receptor antagonist (Ben Abdallah et al. 2011). Although variable performance in control groups across each of these experimental conditions indicates that further work is required in relation to standardisation of the procedure, the relatively simple box design and experimental procedure indicates a promising new tool for assessment of cognitive processes, including executive functions, relating to schizophrenia.

Stress responsivity has been proposed as a modulating trait which might increase risk for psychotic disorders (Goodwin et al. 2004; Myin-Germeys et al. 2009). Individual differences in affective response to stressful stimuli, alongside the associated physiological response, may play a role in induction of psychosis. It has been suggested that inherited liability to psychotic disorder may be expressed as altered responsivity to everyday stressful situations (Myin-Germeys et al. 2005).

6.1.3 Strain Differences

Even where a single gene mutation has been introduced, evidence indicates that a mutant model bred onto different background genetic strains can show very different phenotypes, suggesting gene \times gene interactions and/or genetic modifier effects (Burrows et al. 2011; see Waddington et al. 2005 for further discussion of implications of strain differences in CNS KO models).

6.2 *Integration of Novel Gene Manipulation Strategies*

Review of single gene mutant and G \times E studies over the past few years, which have increasingly involved the application of conditional transgenic technologies and alternative gene manipulation strategies, demonstrates the power of examining the effect of dynamic genetic manipulations throughout development, followed by multidomain behavioural, cellular, and molecular phenotyping. Further integration of new strategies to modulate gene expression in a phenotypic and regional manner will facilitate the development of more accurate in vivo disease models based on available pathophysiological data for disease states (Garbett et al. 2010).

Table 1 Mutant mouse phenotypes relating to dopaminergic and glutamatergic mechanisms implicated in schizophrenia

	Anxiety			Novelty-induced activity		Cognition		Sociability			Psychopharmacology		
				Working memory	Attention	PPI	Social memory ^a	Social aggression	Social interaction	Increased sensitivity to psychostimulants ^c	Increased sensitivity to stress	Responsivity to antipsychotics	
<i>Dopamine mutation</i>													
D1 Receptor KO	-	↑	↓	-	-	=	-	-	-	=	-	-	
D2 Receptor KO	-	↓	↓	-	-	=	-	-	-	↑/↓	-	-	
D2L KO	-	=	-	-	-	=	-	-	-	=	↓	-	
D2 Receptor OE	-	-	-	-	-	-	-	-	-	-	-	-	
D3 Receptor KO	-	-	↓	-	-	-	-	-	-	-	-	-	
DAT KO	-	↑	↓	-	-	↓	-	↑	↓	-	-	-	
COMT Het	↑	=	=/↑	-	-	=	=	↑	=	-	-	-	
COMT KO	↑/↓	=	↑	-	-	=	=	=	=	↓	↑	-	
COMT-Yal Tg	↓	=	↓	↓	↓	=	-	-	-	↑	↓	-	
AKT1 KO	-	=	-	-	-	↓	-	-	-	↑	-	-	
GSK-3 KO	-	-	-	-	-	-	-	-	-	-	-	-	
DVL-1 KO	-	=	-	-	-	↓/=	=	-	↓	-	-	-	
<i>Glutamate mutation</i>													
NR1 KO	-	↑	-	-	-	↓	↓	↓	↓	↓	↓	=/↓	
NR1 S897	-	-	-	-	-	↓	-	-	↓	-	-	-	
NR1 PND	↑	↑	↓	-	-	↓	↓	-	-	-	-	-	
GluRε1 KO	-	↑	-	-	-	-	-	-	-	-	-	↑	
GlyT1 cKO	=	-	=	↑	-	=	-	-	-	↓/=	-	-	

(continued)

Table 1 (continued)

	Anxiety		Novelty-induced activity		Cognition		Sociability			Psychopharmacology		
	↓	↑	Working memory	Attention	PPI	Social memory ^a	Social aggression	Social interaction ^b	Increased sensitivity to psychostimulants ^c	Increased sensitivity to stress	Responsivity to antipsychotics	
DAO KO	↓	↓/↑	-	-	=/↑	-	-	-	↓/↑	-	-	
DSR KO	-	↑	-	-	=	=	-	=	-	-	-	
GLAST KO	-	↑	-	-	-	-	-	↓	↑	-	↑	
SynGAP KO	-	↑	↓	-	↓	↓	-	=	↓	-	-	
AMPA GluR1 KO	↓	↑	-	-	↓	-	-	-	↓	↑	↑	
mGluR4 KO	-	-	=	-	↓	-	-	↓	↑	-	-	
mGluR5 KO	-	↑	-	-	↓	-	-	-	↑	-	↑	
VGlut1 Het	-	-	-	-	-	-	-	-	-	↑	-	
VGlut2 Het	-	-	-	-	-	-	↓	↑	-	-	-	

↑, increased relative to wildtype; ↓, decreased relative to wildtype; =, no difference; /, separates different findings; -, not reported. Abbreviations: PPI prepulse inhibition, KO knockout mutants, Het heterozygous mutants, OE over-expression, DAT dopamine transporter, COMT Catechol-O-methyltransferase, Tg transgenic mice, GSK-3 glycogen synthase kinase 3, NR1/NMDA receptor 1, NR1/PND NMDA receptor postnatal deletion, GluR2/NR1-associated NR2A subunit, GlyT1 cKO Glycine transporter 1 conditional knockout, DAO D-amino acid oxidase, DSR D-serine, GLAST glutamate and aspartate transporter, mGluR metabotropic glutamate receptor, VGlut vesicular glutamate transporter. ^a Includes social novelty preference and social recognition tests. ^b Includes investigation of stationary mouse within a cage and free social interaction tests. ^c Includes dopamine-enhancing agents, NMDA receptor antagonists

Table 2 Mutant mouse phenotypes relating to genes associated with risk for schizophrenia

	Anxiety		Novelty-induced activity		Cognition		Sociability			Psychopharmacology		
	=/↑	↓/=/↑	Working memory	Attention	PPI	Social novelty preference	Social aggression	Social interaction ^a	Increased sensitivity to psychostimulants ^b	Increased sensitivity to stress	Responsivity to antipsychotics	
Dysbindin sdy	=/↑	↓/=/↑	↓	-	↓/=/↑	-	-	↓	-	↑	-	
DISC1 deletion	↓/=/↑	↑	-	↓/=/↑	-	-	↓	-	↑	-	↓	
DISC1 Q31 L	-	=	-	-	-	-	↓	-	-	↑	-	
DISC1 L100P	-	↑	↓	↓	↓	-	-	-	-	=	↑	
DISC1-C Tg	-	-	↓	-	-	-	-	↓	-	↑	-	
DISC1-DN	=	↑	=	-	=	-	-	=	↓	↑	↓	
DISC1-hu Tg	=	↑	↓	-	=	=	↓	↓	-	-	-	
DISC1-(tr) Tg	-	-	-	↓	-	-	-	-	-	-	-	
NRG1-TM Het	=	↑	=	-	↓	↓	↑	=	↑	-	-	
NRG1 III Het	-	=	↓	-	↓	-	-	-	-	-	-	
NRG1 Ig Het	-	=	-	↓	-	-	-	-	-	-	↑	
NRG1 EGF Het	-	↑	-	-	=	-	-	-	-	-	-	
NRG1 (I) Tg	-	↑	-	-	=	-	↑	↓	-	-	-	
NRG1 (I-Thy1) Tg	=	=	-	-	↓	-	-	-	-	-	-	
ErbB4 Het	-	=/↑	↓	-	-	-	-	-	-	-	-	
ErbB4 PV	-	↑	↓	-	↓	-	-	-	-	-	-	

↑, increased relative to wildtype; ↓, decreased relative to wildtype; =, no difference; /, separates different findings; -, not reported; PPI prepulse inhibition, DAO D-amino acid oxidase, DISC1 disrupted-in-schizophrenia-1, DISC1 C Tg DISC1 C-terminal fragment transgenic mice, DISC1-DN DISC1 dominant-negative mice, DISC1-hu Tg DISC1 human form transgenic mice, DISC1-(tr) truncated DISC1 transgenic mice, NRG1-TM neuregulin 1 transmembrane domain, Het heterozygous mutants, NRG1-EGF neuregulin1 epidermal growth factor domain, NRG1 (I) neuregulin type I over-expressing mice, NRG1 (I-Thy1) Tg neuregulin1 type I (Thy1 promoter driven) over-expressing mice, ErbB4 PV mice with ablation of parvalbumin-positive ErbB4. ^a Includes investigation of stationary mouse within a cage and free social interaction tests. ^b includes dopamine-enhancing agents, NMDA receptor antagonists

In addition to inducible and conditional systems, the in utero gene transfer technique, with expression and/or shRNA constructs for RNAi, may prove a promising methodological innovation by enabling the selection of target cell populations for genetic modulation, while the introduction of inducible expression constructs will allow better temporal control. Furthermore, experimental designs for future studies on mutant models of psychosis would be improved, where appropriate, by the incorporation of a rescue strategy aimed at restoring or compensating for the loss-of-gene function; this would assist in providing mechanistic insight into the role of the gene in mediating schizophrenia-related phenotypes and the development of novel antipsychotic targets. By using the technical advantage of in utero transfer, in which expression of more than one gene can be modified at one time by cotransfection of expression and/or RNAi constructs (Shu et al. 2004; Young-Pearse et al. 2007), it should prove possible to test the synergistic or other epistatic effects of multiple genetic factors.

Evidence from the emerging field of molecular epigenomics suggests a putative deficit in microRNA processing in schizophrenia. MicroRNAs are small, non-coding RNAs that are believed to target at least a third of protein coding genes and are associated with the regulation of mRNA levels for multiple genes in the human cerebral cortex (Farh et al. 2005; Zhang and Su 2008). Dysregulation of miRNA expression may account for some of the neurodevelopmental aspects of psychiatric disorders and the difficulty in identifying individual causative genes (Dinan 2010; Miller and Wahlestedt 2010). For example, disruption of DiGeorge syndrome critical region gene 8 (*Dgcr8*), has been associated with the expression of behavioural and structural brain endophenotypes related to schizophrenia (Stark et al. 2008). Increased study of the role of miRNAs in regulating phenotypic expression in existing mutant models has the potential to provide further insight into the mechanisms by which genes may contribute to specific aspects of the schizophrenia phenotype.

6.3 Examination of Gene × Gene Interactions in Schizophrenia

Assuming a polygenic basis for schizophrenia, neither partial nor complete loss-of-function or over-expression of any single gene in mice is likely to produce an animal model with construct validity for the disease; simultaneous dysregulation of several susceptibility genes likely better reflects the genetic contribution to risk for developing the disorder, emphasising the importance of generating and phenotypically characterising compound heterozygous mutants. In these animals, partial loss- or gain-of-function in several components could perhaps mimic more precisely the etiopathologic mechanisms, as well as the pathophysiological features of schizophrenia. Evidence from cellular and molecular studies conducted till date provides an important framework to understand how several common susceptibility genes and/or multiple, rare CNVs might converge functionally onto common pathways that may reflect the etiopathobiology of schizophrenia.

For example, there is evidence to connect *NRG1*, *AKT*, and *DISC1* in a common pathway that may regulate neurodevelopment and contribute to susceptibility to schizophrenia (Kim et al. 2009). Future characterisation of mice with simultaneous dysregulation of several risk genes may provide novel insights into whether those risk genes may contribute to unique phenotypes and/or whether they might contribute in a synergistic manner with other risk genes to the expression of schizophrenia-related endophenotypes.

7 Conclusions

Increasingly, the evidence from mutant studies is showing that targeted and transient ontogenetic challenges of certain spatial and temporal specificity may be sufficient to invoke a disease process (Thompson and Levitt 2010). Additionally, recent technical advances allowing manipulation of a single gene in a regionally or temporally specific manner has provided the opportunity to assess how specific risk genes might interact with environmental factors to produce schizophrenia-relevant phenotypes. Clearly, the construct validity of any genetic model is determined by the degree to which the mouse gene mutation successfully mimics the disease-associated gene variant or mutation, as well as the available arsenal of accurate and reliable phenotyping instruments. This is particularly the case for a heterogeneous and/or polygenic disorder such as schizophrenia; however, single and compound gene mutant models have enduring potential to inform on the contribution of a given risk gene or networks of genes to the expression of schizophrenia-related endophenotypes (Tables 1, 2).

Acknowledgments The authors' studies are supported by Science Foundation Ireland Principal Investigator grant 07/IN.1/B960 and Health Research Board of Ireland Postdoctoral Fellowship PD/2007/20.

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Genetic Models of Sensorimotor Gating: Relevance to Neuropsychiatric Disorders

Susan B. Powell, Martin Weber and Mark A. Geyer

Abstract Sensorimotor gating, or the ability of a sensory event to suppress a motor response, can be measured operationally via prepulse inhibition (PPI) of the startle response. PPI is deficient in schizophrenia patients as well as other neuropsychiatric disorders, can be measured across species, and has been used widely as a translational tool in preclinical neuropharmacological and genetic research. First developed to assess drug effects in pharmacological and developmental models, PPI has become one of the standard behavioral measures in genetic models of schizophrenia and other neuropsychiatric disorders that exhibit PPI deficits. In this chapter we review the literature on genetic models of sensorimotor gating and discuss the utility of PPI as a tool in phenotyping mutant mouse models. We highlight the approaches to genetic mouse models of neuropsychiatric disease, discuss some of the important caveats to these approaches, and provide a comprehensive table covering the more recent genetic models that have evaluated PPI.

Keywords Prepulse inhibition · Startle · Mouse models · Schizophrenia · Genetic · Mutant

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1 Introduction: Definitions and Measures of Sensorimotor Gating

Sensorimotor gating refers to the regulation of sensory information as it is transmitted to motor output systems. When sensory information is processed centrally, it requires some degree of filtering or “gating” prior to accessing and impinging upon motor output. While this process has long been observed at multiple levels of biology, the synaptic and cellular mechanism of sensorimotor gating (Frost et al. 2003; Nusbaum and Contreras 2004; Rose and Scott 2003) as well as the functional implications (Braff 2010, 2011; Swerdlow et al. 2008) are starting to be elucidated. One form of sensorimotor gating that is widely studied in humans and animals is prepulse inhibition (PPI) of startle. PPI is a form of startle plasticity in which presentation of a weak stimulus (prepulse) preceding an intense startling stimulus (pulse) by 30–500 ms inhibits the startle response (Graham 1975; Hoffman and Ison 1980). The fundamental mechanism underlying this inhibition is thought to resemble the normal process of filtering incoming sensory stimuli (Geyer and Braff 1987). PPI levels may indicate the current integrity of sensorimotor gating mechanisms, providing an operational measure of sensorimotor gating. In humans, startle is measured from the eye blink response through electromyographic recordings of the orbicularis oculi muscle (Fridlund and Cacioppo 1986) and typically involves startle to acoustic stimuli, although tactile stimuli have been used as well (Braff et al. 1992; Kumari et al. 2003; Neuner et al. 2010; Swerdlow et al. 2001b). PPI deficits are observed in schizophrenia patients [for review see (Braff et al. 2001; Swerdlow et al. 2008)], their unaffected first

degree relatives (Cadenhead et al. 2000), and patients with schizotypal personality disorder (Cadenhead et al. 1993). Additionally, several other neuropsychiatric disorders are associated with decreased PPI, including Obsessive–Compulsive Disorder (Swerdlow et al. 1993), Tourette’s syndrome (Swerdlow et al. 2001b), Huntington’s disease (Swerdlow et al. 1995), manic bipolar patients (Perry et al. 2001), Panic Disorder (Ludewig et al. 2002), Fragile X syndrome (Frankland et al. 2004; Hessler et al. 2009), and adults with autism (Perry et al. 2007). Although the core symptoms of these disorders are diverse, a feature common to all of them is deficient gating, with a gating deficit predominating in the cognitive sphere in some disorders and in the sensory or motor domains in others. Thus, deficient gating has been reported across a variety of neuropsychiatric disorders, with PPI deficits in schizophrenia patients being the best characterized and the most widely replicated (Braff et al. 2001; Kumari et al. 2008; Ludewig et al. 2003; Mackeprang et al. 2002; Swerdlow et al. 2008).

Sensorimotor gating abnormalities, as measured by PPI, are being used as an endophenotype in genetic studies of schizophrenia (Braff et al. 2007; Greenwood et al. 2011), and meet the criteria outlined for a viable endophenotype (Turetsky et al. 2007). With an increased focus on observable and measurable behaviors as rational approaches to genetic studies of heterogeneous neuropsychiatric diseases such as schizophrenia (Gottesman and Gould 2003), large-scale genetic studies are examining neurophysiological measures such as PPI, P50 auditory evoked suppression, antisaccade eye movement, mismatch negativity, and P300 event-related potential (Turetsky et al. 2007). Recent studies suggest that PPI is heritable (Hasenkamp et al. 2010) and associated with polymorphisms in the *CHRNA3* gene (Petrovsky et al. 2010), neuregulin 1 (Roussos et al. 2011), and *COMT* (Giakoumaki et al. 2008; Quednow et al. 2008; Roussos et al. 2008). The use of PPI as an endophenotype in genetic studies of schizophrenia, combined with the observation that PPI has a strong genetic component in mice (Francis et al. 2003), indicates that PPI may be a useful behavioral phenotype to consider in genetic mouse models related to neuropsychiatric disease, particularly schizophrenia. While there are certainly many other symptoms, behavioral traits, and neurophysiological deficits observed across the heterogeneous group of patients with schizophrenia, PPI appears to be a viable endophenotype for human genetic studies and thus a reasonable approach to investigate in genetic animal models. Additionally, considering that PPI measures a fundamental component of information processing and is observable across many species, it is a useful endpoint with which to understand the more general impact of specific genes on neurobehavioral function and on the neural substrates underlying this function.

Mutant mouse models related to schizophrenia have been based primarily on the pathophysiology of schizophrenia, the known effects of antipsychotic drugs, and candidate genes for schizophrenia. In this review, we provide an overview of PPI in genetic mouse models, concentrating on the time period since the Swerdlow et al. (2008) review. We discuss the contribution and usefulness of PPI as a phenotype in the context of genetic mouse models and speculate about the significance of PPI deficits and future directions for the field. There have been

previous reviews on candidate genes for schizophrenia (Arguello and Gogos 2010; O’Tuathaigh et al. 2007), and reviews focusing specifically on PPI, which summarized studies of strain differences, genetic mutants, and the pharmacology of PPI in mice (Geyer et al. 2002; Powell et al. 2009; Swerdlow et al. 2008). In this review, we highlight the approaches to genetic mouse models of neuropsychiatric disease, discuss some of the important caveats to these approaches, and provide a comprehensive table covering the genetic models that have evaluated PPI since the Swerdlow et al. (2008) review. To that end, we discuss PPI as a phenotype in genetic mouse models generated to address hypotheses regarding the pathophysiology of neuropsychiatric disease, candidate genes, and basic proteins involved in neural development or synaptic function. We also discuss the usefulness of PPI in phenotype-driven approaches in which a PPI phenotype could lead to “bottom up” approaches of identifying novel genes of relevance to PPI and/or neuropsychiatric disease [i.e. hypothesis-generating; or phenotype-genotype approaches (Jacobson and Cryan 2010)].

2 Utility of Prepulse Inhibition Measures in Genetic Models of Schizophrenia

Mutant mouse models of neuropsychiatric disease have targeted genes involved in the pathophysiology of the disease, candidate or susceptibility genes thought to be involved in the etiology of the disease, or genes involved in basic physiological processes. Because many of the target genes overlap at the functional level across different disorders (e.g. proteins involved in basic processes of neurodevelopment), manipulation of these genes may have relevance to many neuropsychiatric disorders. Thus, it is important to determine the relevant behavioral tests to best understand the underlying brain abnormalities resulting from genetic alterations of proteins. Second, it is critical to develop animal models to screen novel therapeutics for specific domains of function. In this context, PPI has emerged as a useful behavior with which to assess the integrity of basic neural circuits in genetic mouse models and to screen for pharmacological agents, particularly in the context of identifying treatments for schizophrenia.

2.1 Relationship of PPI to Psychiatric Symptoms, Neurocognitive Measures, and Overall Function

Attempts to relate PPI deficits to the positive, negative, and cognitive symptoms of schizophrenia have yielded mixed results (Thaker 2007). PPI negatively correlates with thought disorder (Meincke et al. 2004; Perry and Braff 1994; Perry et al. 1999) and distractibility (Karper et al. 1996) in schizophrenia. PPI increases

observed with risperidone treatment correlated with improvements in PANSS general psychopathology subscale scores (Martinez-Gras et al. 2009) in schizophrenia patients. In a well-powered study with over 300 subjects, PPI did not correlate with cognitive measures using traditional “pen and paper” tests [i.e. Wisconsin card sorting task (WCST), California verbal learning task, etc.], but did correlate positively with global assessment of function (GAF) and Independent Living scales (Swerdlow et al. 2006). There have been some studies demonstrating a relationship between cognitive constructs and PPI levels. For example, converging evidence indicates that PPI is correlated with strategy formation and execution time in the Cambridge Neuropsychological Test Automated Battery (CANTAB) in healthy controls (Bitsios et al. 2006; Csomor et al. 2008; Giakoumaki et al. 2006), a finding that should be examined further in patient populations. The cognitive neuroscience treatment research to improve cognition in Schizophrenia (CNTRICS) program funded by the National institute of mental health considered PPI to provide a measure of the cognitive construct of “gain control” as a specific aspect of the perceptual abnormalities seen in patients with schizophrenia (Green et al. 2009). The series of CNTRICS workshops concluded that PPI may have utility as a biomarker for use in proof of concept studies of potential treatments for the cognitive deficits in schizophrenia that are not ameliorated by existing antipsychotic drugs. For the purpose of evaluating genetic mouse models of neuropsychiatric disease, the more useful comparison to make is not between PPI and specific symptoms of schizophrenia, but rather the relationship between a gene and the observable dependent measure, i.e. PPI. The approach of using endophenotypes in genetic studies has greatly strengthened the ability to conduct cross-species translational studies by providing specific observables for study in experimental animals [reviewed in (Geyer and Markou 2002; Gould and Gottesman 2006) Waddington, chapter in this book]. Useful endophenotypes in this context are measures that are observed in humans and can be measured in animals.

2.2 PPI as an Indicator of Neural Processes and a Pharmacological Screen

A PPI deficit in a genetic mutant could indicate that the gene may be involved in the neural circuitry known to modulate PPI [e.g. cortical, limbic, striatal (Swerdlow et al. 2001a)]; in other words it could function as a “surrogate measure for neural processes” as Swerdlow et al. (2008) suggest. While a PPI deficit per se is not indicative of altered striatal or limbic circuitry, the presence of the deficit may suggest that these brain regions are affected by the genetic manipulation and provide a reasonable starting place for further hypothesis testing regarding the neurobiological implications of the genetic manipulation. Additionally, mutant mouse models offer the opportunity to screen putative antipsychotics that may

involve a novel target and avoid the problems of receptor tautology inherent in many pharmacological studies [e.g. dopamine agonist-induced disruption blocked by a dopamine antagonist; as discussed in Powell et al. (2009)]. Using mutant mice to screen for putative antipsychotics may provide a means to develop novel drug targets not achieved with current pharmacological disruptions of PPI (see Table 1 for examples).

2.3 PPI as a Tool to Evaluate Gene–Environment Interactions

Studies of gene–environment interactions may be particularly informative for neuropsychiatric diseases, most of which likely involve a genetic susceptibility combined with environmental factors (e.g. stress) to observe the full manifestation of the disease (Gottesman 1991) (see also Sen and Karg, Gross and Carola chapters in this book). Three ways in which genetics and environmental manipulations have been utilized in genetic mouse models are: (1) using a mutant [e.g. knockout (KO)] to delineate the physiological mechanism of an environmental manipulation; (2) rescuing a phenotype in a mutant with an environmental manipulation; or (3) potentiating or unmasking a phenotype in a genetic mutant with an environmental manipulation. There are a few examples in which PPI has been a useful endpoint with which to assess gene–environment interactions in mouse models. For example, PPI deficits associated with maternal immune activation (MIA) with PolyI:C during mid-gestation, which typically leads to deficits in PPI in adult offspring (Meyer et al. 2005; Shi et al. 2003), are blocked in interleukin (IL)-6 KO dams (Smith et al. 2007). Thus, PPI in a genetic mutant (IL-6 KO mice) was used to determine the mechanism for the effects of an environmental manipulation (immune activation) on brain development. An example of a PPI phenotype being “rescued” in a KO mouse comes from studies in Phospholipase C $-\beta$ 1 KO mice, in which PPI deficits and locomotor hyperactivity were attenuated in KO mice by environmental enrichment or clozapine (McOmish et al. 2008) (Table 1). More recently, and perhaps most important to etiological models of neuropsychiatric disease, there have been several studies examining the “two-hit” approach (Eells et al. 2006; Ibi et al. 2010). For example, nuclear receptor null *Nurr1* heterozygous mice, which display reduced mesocortical and mesolimbic dopamine (Eells et al. 2002), showed reduced PPI after postnatal isolation rearing, an effect that was not observed with either isolation rearing or genotype alone (Eells et al. 2006). This study provides a good example of the utility of PPI in gene–environment models relevant to schizophrenia, specifically those designed to test the “two-hit” hypothesis for the etiology of schizophrenia. It should be kept in mind, however, that many studies assessing gene–environment effects are evaluating additive effects of two manipulations and must be interpreted with caution.

Table 1 Genetically engineered model organisms based on genes related to: *vulnerability for schizophrenia*

References	Mouse strain, sex	Model description/background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>DISC1</i>					
Hikida et al. (2007)	DN-DISC1 TG, M	DISC1 is a potential SZ susceptibility gene	↓PPI in TG versus WT at lowest PP intensity only		
Ibi et al. (2010)	DN-DISC1 TG, combined with neonatal PolyIC 5 mg/kg or saline (PND2-6), M & F	Two-hit model of SZ, genetic susceptibility combined with environmental insult (immune activation)	∅PPI & ∅PA in TG versus WT		
Niwa et al. (2010)	DISC1 KD via <i>in utero</i> gene transfer (E14), M & F	DISC1 plays important role in brain development. In utero gene transfer allows for analysis of DISC1 function during development and impact on adult brain function	↓PPI & ∅PA in KD versus WT at P56, ∅PPI at P28, effect slightly less in F compared to M		CLO: ↑PPI & ∅PA in KD; ∅PPI & ∅PA in WT
Lipina et al. (2010)	DISCIL100P point mutation	Missense mutation in exon 2 of DISC1 at L100P in mice	↓PPI & ↓PA in mutant versus WT	AMP (0.5 mg/kg) ↓PPI in mutant but ∅PPI in WT	HAL: ↑PPI in mutant (↑PPI in WT at PPI6); ↓PA in WT, ∅PA in mutant
Lipina et al. (2011)	DISCIL100P point mutation (combined with GSK3 mutant)	Missense mutation in exon 2 of DISC1 at L100P in mice; DISCIL100P mice crossed with Glycogen synthase kinase-3 (GSK-3), a serine/threonine protein kinase that interacts with the N-terminal region of DISC1	↓PPI in DISCIL100P mutant vs. WT; ∅PPI in DISCIL100P x GSK-3 α HET		TDZD-8 (GSK-3 inhibitor): ↑PPI & ∅PA in DISCIL100P mutant; ∅PPI & ∅PA in WT

(continued)

Table 1 (continued)

References	Mouse strain, sex	Model description/background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Barr et al. (2008)	Reelin KO, M	<i>Reelin</i> Reelin levels in brains of SZ are reduced	∅(unimodal acoustic) PPI, but ↓crossmodal PPI at 100 ms PP intervals, PPP at PP intervals ≤ 60 ms, ↓PA habituation & ↑PA at 100–110 dB(A) intensity for +/- versus WT		
Chen et al. (2008)	Type III NRG1 mutants, M	<i>Neuregulin</i> NRG1 may represent a SZ susceptibility gene. Involved in cell-cell interaction; signals via erbB TK	↓PPI & ∅PA in +/- versus WT		Chronic NIC (↑PPI in +/-; ∅PPI in WT)
Duffy et al. (2008)	EGF-like domain NRG1 mutants, M	The EGF-like domain of NRG1 is sufficient for NRG's activity	∅PPI in -/- versus WT	MK801 (↓PPI in -/- versus WT); AMPH (↓PPI in -/-and WT; no significant differences between -/- & WT)	
Deakin et al. (2009)	NRG1 ^{Type 1-Tg}	Type I NRG1 increased in Hpc and PFC of SZ patients	↓PPI & ↑PA in Tg versus WT		
Barros et al. (2009)	ERBB2/B4-CNS-specific KO, M & F	NRG1 and ERBB4 are candidate genes for SZ	↓PPI in KO versus WT (M only; ∅PPI in F); PA data not shown		CLO ↓PPI in KO; ∅PPI in WT CLO ↑ spine density

(continued)

Table 1 (continued)

References	Mouse strain, sex	Model description/background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Wen et al. (2010)	PV-Cre; ErbB4 KO	In adulthood NRG1 and ErbB4 may regulate neurotransmission. Evidence that ErbB4 is located at the postsynaptic density of excitatory neurons, likely on GABA interneurons	↓PPI & ∅PA in <i>-/-</i> versus WT		D/AZ: ↑PPI in <i>-/-</i> mice; ∅PPI in WT; PA data not shown
Kato et al. (2010)	NRG1 TG5, TG7, M & F	Postmortem studies indicate increased NRG1 in SZ brain. Transgenic mutants to examine hyper NRG1 signaling	∅PPI & ∅PA in TG versus WT		
Papaleo et al. (2008)	COMT KO, COMT Val-Tg	Polymorphisms in COMT gene reported in SZ; mice overexpress human COMT-Val variant	∅PPI in <i>-/-</i> or TG versus WT; ↑PA in <i>-/-</i> versus WT, ↓PA in TG versus WT		
Tammimiäki et al. (2010)	S-COMT KO, M & F	Two isoforms of COMT, S-COMT and MB-COMT, differentially contribute to DA function in the frontal cortex	∅PPI & ↑PA in <i>-/-</i> versus WT (although lack of ↑PA with ↑ dB in WT mice)		
Kelly et al. (2009)	Forebrain-specific Galpha OE, M, F	<i>G-alpha</i> ↑mRNA G-protein subunit Galpha levels, genetically linked to SZ	↓PPI & ∅PA in +/- versus WT; developmental or adult expression		HAL: ↑PPI in OE; ∅PPI in WT Risperidone (↑cAMP levels); ↑PPI in OE; ∅PPI in WT

(continued)

Table 1 (continued)

References	Mouse strain, sex	Model description/background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Otte et al. (2009)	G72Tg (G72/G30 "humanized" BAC transgenic)	<i>G72/G30</i> G72/G30 gene locus implicated in SZ, BD, and panic disorder	↓PPI & ∅PA in Tg versus WT		HAL ↓PPI in Tg; ∅PPI in WT (slight ↓PPI at low PP intensity in WT); PA data not reported
Koga et al. (2009)	SMARCA2 KO, M & F	<i>SMARCA2</i> SMARCA2 encodes BRM, a chromatin remodeling multi- protein complex; highly expressed in differentiating neurons; SNP in gene found in SZ (this paper)	↓PPI in -/- versus WT; PA data not shown		
Ehretton et al. (2009)	Neurexin-1 α KO, M & F	<i>Neurexin</i> CNVs for neurexin-1 α identified in SZ & Autism. Neurexins bind to neurotrogins and function as synaptic recognition molecules	↓PPI in -/- versus WT; ↑PA to stimuli 80–100 dB in -/- versus WT		
Brzózka et al. (2010)	TCF4-Tg, M	<i>TCF4</i> TCF4, a helix-loop-helix transcription factor; identified in several GWAS studies as susceptibility gene for SZ	↓PPI & ∅PA in Tg versus WT		

(continued)

Table 1 (continued)

References	Mouse strain, sex	Model description/background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Chen and Lai (2011)	AKT1 KO, M & F	AKT1 has been associated with schizophrenia in genetic studies as well as postmortem brain analyses. AKT1 signal transduction pathway important in diverse biological functions	F: ↓PPI & ∅PA in -/- versus WT; PA M: ∅PPI & ∅PA in -/- versus WT	RAC: ∅PPI & ∅PA in -/- or WT (F only) CLOZ: ∅PPI & ∅PA in -/- or WT (F only) 8-OH-DPAT: ∅PPI in -/- versus WT (attenuation weak; no genotype × drug interaction) SB216763: ∅PPI in -/- versus WT (attenuation weak; no genotype × drug interaction)	

Abbreviations: 5-HT serotonin, AAV adeno-associated virus, Aβ amyloid β-peptide, ACE angiotensin converting enzyme, ACH acetylcholine (receptor), AD Alzheimer's disease, ADX adrenalectomy, AIL advanced intercross line, AMP amphetamine, AMY amygdala, APD antipsychotic drug, APP amyloid precursor protein, ARIP arripiprazole, APO apomorphine, AR1 angiotensin, BAC bacterial artificial chromosome, BACE β-site APP cleaving enzyme, BD bipolar disorder, BG background, CaMKIV calcium-calmodulin-dependent protein kinase IV, cAMP cyclic adenosine monophosphate, Ckr chakragati, CLO clozapine, CNS central nervous system, COC cocaine, COMT catechol-O-methyltransferase, CORT corticosterone, CRF corticotropin releasing factor, CTR controls, CTX cortex, DA dopamine (receptor), DAT dopamine transporter, dB decibel, DCC deleted in colorectal cancer, DIAZ diazepam, DIZ dizocipiline, DN dominant-negative, DDO D-aspartate oxidase, E embryonic day, EE environmental enrichment, EGF epidermal growth factor, ENU N-ethyl-N-nitrosourea, f frontal, F female, FABP fatty acid binding protein, FGF fibroblast growth factor, Fmr1 fragile × mental retardation 1 gene, FMRP fragile × mental retardation protein, FXS fragile × Syndrome, GLAST glutamate and aspartate transporter, GLU glutamate, GluR glutamate receptor, GLUT glucose transporter, GR glucocorticoid receptor, GRIP glutamate receptor interacting protein, GSK glycogen synthase kinase, GWAS genome wide association studies, HAL haloperidol, HD Huntington's disease, HPC hippocampus, IC imprinted cluster, IL interleukin, ISI interstimulus interval, KI knock-in, KO knock-out, M male, m metabotropic, MDB methyl-CpG binding protein, mo month, NIC nicotine, MPEP 2-methyl-6-(phenylethyl)-pyridine hydrochloride, METH methamphetamine, Mgat N-acetylglucosaminyltransferase, NAA N-acetyl-aspartate, MAAG N-acetylalpa L-aspartyl-L-glutamate, MAC nucleus accumbens, NCAM neural cell adhesion molecule, NIS nisoxetine, nNOS neuronal nitric oxide synthase, NO nitric oxide, NPS neuropeptide S (receptor), NPY neuropeptide Y, NR NMDA receptor subunit, NRG neuregulin, NRL neurotrophin, ns not significant(dy), NSE neuron-specific enolase, NT neurotensin, OE overexpressor, OXO oxotremorine, PA magnitude of response to pulse alone, PACAP pituitary adenylate-cyclase-activating polypeptide, PD Parkinson's disease, PDE phosphodiesterase, PET-1 plasmocytoma expressed transcript-1, PND postnatal day, PLC phospholipase C, PNS prenatal stress, poly I:C polyinosinic polycyidylic acid, PP prepulse, PPI prepulse inhibition of startle, PPP prepulse potentiation, PSJ presinilin1, PWS Prader-Willi syndrome, QTL quantitative trait locus, QUET quetiapine, RAC raclopride, RAGE receptor for advanced glycation end-products, RasGAP Ras GTPase-activating protein, RE reinin-enhancer, RIS risperidone, SCOP scopolamine, SI social isolation, SNP single nucleotide polymorphism, SOCS suppressor of cytokine signaling: SREB superconserved receptor expressed in brain; 5TR striatum, SYN synapsin, SynGAP synaptic GTP-ase-activating protein, SZ schizophrenia, TAAR trace amine-associated receptor, TG transgenic, TGF-β transforming growth factor beta, TK tyrosine kinase, TMS transcranial magnetic stimulation, V1b vasopressin receptor 1b, WT wild-type
↓ decreased, ↑ increased, ∅ unchanged, -/- homozygous mice, +/- heterozygous mice

2.4 Evaluating the Role of a Susceptibility Gene in Pathology

When evaluating the role of a susceptibility gene implicated in any neuropsychiatric disease, it is important to consider what criteria should be placed on a genetic/etiological model. In the present context, it is relevant to consider whether or not deficient PPI is a necessary phenotype with which to evaluate the usefulness of a targeted gene deletion of potential relevance to the given neuropsychiatric condition under study (e.g. schizophrenia). Using schizophrenia as an example, the failure to see a PPI deficit in a mouse model may indicate a “false negative” particularly if other key behaviors relevant to schizophrenia are observed (e.g. deficient social interaction, disruptions in attentional set shifting). The lack of a PPI deficit in this case does not indicate that the genetic model is not of relevance to schizophrenia. There are several examples provided in Table 1 in which a PPI deficit was not present in a mutant mouse but other behavioral differences such as deficits in memory, social interaction, or set shifting were apparent in the mice. The likelihood of being able to reproduce all aspects of a heterogeneous disease in another species with a genetic mutation (most often a single gene deletion) is very rare if not impossible (see Jones et al. (2008); Powell et al. (2009) for discussion). For that matter, it is not the case that all aspects of schizophrenia are observed in each patient carrying the diagnosis. Rather, support for a model should be based on the convergence of data from multiple sources [e.g. many animal models, human genetic studies, etc. (Jones et al. 2008)]. Thus, no one phenotype should be considered as being either necessary or sufficient to support a model for a neuropsychiatric disease, particularly since the distributions of the behavioral measure often overlap between healthy volunteers and patients, as is the case with PPI and schizophrenia (Swerdlow et al. 2008). Thus an animal model should not be rejected based on “normal” PPI. For example, GLAST KO mice lacking the glutamate and aspartate transporter do not show any deficits in PPI but do show deficits in social approach, nest building, and pairwise discrimination learning (Karlsson et al. 2009). Along the same lines, there is the possibility that a PPI deficit in a mutant mouse model could represent a “false positive”, in which a PPI phenotype may be suggestive of an association between that gene or pathway and disease and no such association is found. As we have argued previously, the PPI phenotype should be interpreted as meaning that the given genetic manipulation may be involved in the regulation of PPI expression and caution that PPI phenotypes should not be automatically associated with a specific disease, e.g. schizophrenia (Powell et al. 2009). Interestingly, there are a few examples where KO or transgenic mice actually had increased PPI relative to wild-type controls. One such example is the FMR1 KO mice (Paylor et al. 2008; Thomas et al. 2011a, b; but see de Vrij et al. 2008; Table 2). It remains unclear how such findings should be interpreted, but the possibility that the loss of the gene may lead to gain of function should be considered.

Table 2 Genetically engineered model organisms based on genes related to: *neurotransmitters, neuropeptides, and orphan receptors*

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>A. DOPAMINE</i>					
DA receptors					
Doherty et al. (2008)	DA D1, D2 & D3 KO, M, F	Abnormalities in DA signaling in SZ patients in part have led to the DA hypothesis for SZ	∅PPI in D1, D2 & D3 -/- versus WT; ↑PA in D1 -/- versus WT; ∅PA in D2 (M only); ↓PA in D2 -/- (F only) & D3 -/- versus WT & in D3 (F) versus D3 (M) -/-	COC (∅PPI in D1 -/-, ↓PPI in D2 -/-, D3 -/- & WT mice; but: attenuated ↓PPI in D2 -/- versus WT and more pronounced ↓PPI in D3 -/- versus WT; ∅PA in WT	RAC; SCH23390 (a D1 antagonist) both ↓COC-induced PPI deficits in WT; ∅PA in WT)
Young et al. (2011b)	DA D4 KO, M	Alterations in D4R may contribute to cognitive and attentional deficits in neuropsychiatric disorders.	∅PPI & ∅PA in -/- or +/- versus WT		
DAT					
Powell et al. (2008)	DAT KO, (F) M	A hyper-DA state and DAT abnormalities have been implicated in SZ	M: ↓PPI & ∅PA in -/- versus WT; F: inconsistent ↓PPI in -/- versus WT		M: CLO (PPI in -/- normalized to WT levels, but ∅PPI in -/- & WT versus VEH) ↓PA (main effect); QUET (↑PPI & ∅PA in -/- & ∅PPI & ↓PA in WT)
<i>Other Dopamine related</i>					
Grant et al. (2007)	DCC KO, M (PPI studies)	DCC mice are netrin 1 receptor KO mice. Netrin 1 is strongly expressed on and may affect development of DA neurons	↓PPI (yet ns) and ↑PA (trend only) in +/- versus +/-	∅AMP (∅PPI in +/-, but ↓PPI in +/+)	

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI deficits	Effects of (presumed) antipsychotics/other treatments
<i>B. GLUTAMATE</i>					
<i>NRI</i>					
Duncan et al. (2010)	NRI hypomorph (NRI ^{neocort}),	Developmental effects of NRI hypomorph on other Glu receptors could contribute to the SZ-like phenotype. Evidence for alterations in kainic acid receptors in SZ.	↓PPI & ↑PA in hypomorph versus WT		LY382884, kainic acid antagonist, ↓PA in hypomorphs & ∅PA in WT; ↑PPI in hypomorphs & WT
Belforte et al. (2010)	Early postnatal NRI reduction in GABA interneurons (<i>Ppp1r2-cre +/-</i> ; <i>NR1loxP/loxP-line A</i> [KO]), M	NMDAR hypofunction, specifically in GABA interneurons, may contribute to SZ pathophysiology. NRI is an obligatory subunit of NMDAR.	Early postnatal NRI reduction: ↓PPI & ∅PA in KO versus Ctrl lines (FloxA & Cre), in isolated & group-housed mice Adult NRI reduction: ∅PPI & ∅PA		
<i>AMPA</i>					
Sagata et al. (2010)	GluR4 KO, M & F	GluR4 subunit of AMPA receptor involved in synaptic plasticity; genetic association between GluR4 and SZ	↓PPI & ↓PA in <i>-/-</i> versus WT		
<i>mGLU</i>					
Gray et al. (2009)	mGlu5 KO, M, F	mGlu5 receptor interacts with NMDA receptor and has been implicated in behavioral endophenotypes of SZ	↓PPI in <i>-/-</i> versus WT; ∅PA in <i>-/-</i> versus WT		Chronic (8 wks) CLO (↑PPI in <i>-/-</i> & ∅PPI in WT); ↑NMDA receptors with CLO treatment

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI deficits	Effects of (presumed) antipsychotics/other treatments
Fendt et al. (2010)	mGlu8 KO, M	mGlu8 is a presynaptic receptor which regulates Glu release; may be important for neuropsychiatric disorders with altered Glu function (e.g. SZ).	∅PPI and ∫PA in <i>-/-</i> versus WT	PCP: ∫PPI in <i>-/-</i> and WT; ∅PA in <i>-/-</i> or WT	
Chen et al. (2010)	mGlu5 KO, M & F	Evidence of NMDA hypofunction in mGlu5 KO mice; mGlu5 KO mice may be useful as novel screen of putative glutamatergic antipsychotics. <i>Vesicular glutamate transporter</i>	∫PPI & ∅PA in <i>-/-</i> versus WT		Sarcosine: ∫PPI in <i>-/-</i> ; ∅∫PPI in WT; ∅PA in <i>-/-</i> or WT LY379268: ∅∫PPI & ∅PA in <i>-/-</i> or WT N-acetylcysteine: ∫PPI in <i>-/-</i> & WT; ∫PPI in <i>-/-</i> not blocked with LY341495
Wallén-Mackenzie et al. (2009)	VGLUT2 ^{flox/flox} Cre forebrain-specific KO), M & F	Forebrain glutamate plays an important role in many sensory and cognitive functions relevant to psychiatric disease; downstream changes in DA (this study)	∫PPI & ∫PA in VGLUT2 ^{flox/flox} versus WT	PCP: ∫PPI in WT; ∅∫PPI in VGLUT2 ^{flox/flox} Cre (no drug versus post-PCP); PA (no data shown)	ARIP (no-drug versus post-ARIP); ∫PPI in KO; ∅∫PPI in WT; PA (no data shown)

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>Glycine</i>					
Bemeyworth et al. (2011)	SR KO, M GCP2 HET, M	D-serine is an agonist and NAG an antagonist at the glycine modulatory site on NMDA receptors. Serine racemate (SR) and glutamic acid decarboxylase 2 (GCP2) regulate D-serine and NAG, respectively.	∅PPI & ∅PA in SR -/- versus WT; ∅PPI & ∅PA in GCP2 +/- versus WT	PCP: ↓PPI in SR -/-. GCP2 +/-, & WT; inverted U-shaped dose response function on PA; high dose (6 mg/kg) ∅PA in WT, ↑PA in SR -/-. 3 mg/kg dose ↑PA in WT, ∅PA in GCP2 +/- AMPH: ↓PPI in SR -/-. GCP2 +/-, & WT; U-shaped dose response function on PA; no difference in SR -/-. GCP2 +/-, & WT	
<i>Other glutamate related</i>					
Karlsson et al. (2009)	GLAST (EAAT1) KO, M, F	Glutamate dysfunction associated with SZ; glutamate transporter may be useful pharmacological target for SZ.	∅PPI in -/- or +/- versus WT; ↓PA in -/- versus +/- & WT		
Guo et al. (2009)	SynGAP +/- gene deletion	SynGAP is a RasGAP and NMDAR-associated protein; interacts with NMDA receptors	↓PPI and ↓PA in +/- versus WT		CLO: ∅PPI in +/- or WT; ↓PA in +/- and WT
Han et al. (2009)	GCP2 +/-, M & F	Glutamate carboxypeptidase II (GCP2) hydrolyzes NAA into glutamate and NAA	∅PPI & ∅PA in +/- versus WT		
Wang et al. (2009)	Norbin KO	Norbin interacts with mGluR5 receptors and positively regulates mGluR5 signaling.	↓PPI & ∅PA in -/- versus WT		

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>C. SEROTONIN (5-HT)</i>					
Semenova et al. (2008)	5-HT7 KO, M	Antipsychotics have high affinity for 5-HT7 receptors.	∅PPI across PP intensities and ISI, ∅PA	PCP ↓PPI in WT, attenuated in -/-; Apo and Amp ↓PPI in WT & -/-; ∅PA with Apo, Amp, PCP	
Shamahan et al. (2009)	5-HTT KO, F	OCD patients have PPI deficits; gain of function 5-HTT alleles associated with OCD	∅PPI in -/-, +/- versus WT	RU24969 (5HT1B agonist) ↓PPI in WT, ∅PPI in -/-, intermediate effect in +/-	
Schaefer et al. (2009)	Pet-1 KO, M & F	Pet-1 is a transcription factor restricted to 5-HT neurons. Gene deletion results in loss of 5-HT.	↑PA & ∅PPI in -/- versus WT		
Hill et al. (2011)	5HT2C KO	5HT and BDNF interact; ↑BDNF levels 5HT2C KO mice (this study)	∅PPI & ∅PA in -/- versus WT		
Groenink et al. (2011)	5HT1A KO, M (129S6, Swiss Webster [SW] backgrounds)	5HT1A gene may interact with adverse life events.	∅PPI & ∅PA in -/- versus WT	129S6: Maternal separation ↓PPI & ↑PA in -/- & WT SW: Maternal separation ∅PPI & ∅PA in -/- & WT	
van den Bause et al. (2011a)	5HT1A KO, M & F	5HT1A receptor may mediate effects of MDMA on PPI	∅PPI & ∅PA in -/- versus WT	MDMA: ↓PPI in -/- at lower doses than WT at 100 ms ISI (M only); ↓PA in -/- & WT	
van den Bause et al. (2011b)	5HT1A KO, M & F	5HT1A receptor may interact with neurotransmitter systems involved in SZ	∅PPI & ∅PA in -/- versus WT	APO: ↓PPI & ∅PA in -/- & WT	

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI- deficits	Effects of (presumed) antipsychotics/other treatments
<i>D. ACETHYLCHOLINE (ACh)</i>					
<i>Nicotinic</i>					
Darvas et al. (2009)	LYPD6 Tg	LYPD6 modulates nicotinic ACh receptors; LYPD6 Tg show enhanced nicotinic tone	↑PPI in Tg versus WT; ∅PA in Tg versus WT		
Young et al. (2011a)	α7-nAChR KO, M & F	α7-nAChR is being investigated as a pro-cognitive target for SZ; comparison of KO mice across several cognitive tests	∅PPI in <i>-/-</i> , <i>+/-</i> , and WT; ↑PA in <i>-/-</i> versus <i>+/-</i> & WT;		
<i>Muscarinic</i>					
Turner et al. (2010)	M2, M4 KO, M	M2 and M4 muscarinic acetylcholine receptors differ in tissue distribution and physiology; may play a role in sleep and arousal	∅PPI in M2 or M4 <i>-/-</i> versus C57BL/6 N mice; ∅PA in M2 <i>-/-</i> versus M4 <i>-/-</i> ; ↑PA in M2 <i>-/-</i> versus C57; ∅PA in M4 <i>-/-</i> versus C57 (store bought mice; not littermates)		

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI deficits	Effects of (presumed) antipsychotics/other treatments
Thomsen et al. (2010)	M1, M4 KO, F M1KO/ M4KO,M,F	Muscarinic receptors may be related to pathophysiology of SZ, and muscarinic agonists have been proposed as targets for antipsychotics and cognition enhancers	F: ↓PPI & ∅PA in M1-/- M4-/- versus WT; ∅PPI & ∅PA in M1-/- versus WT; ∅PPI & ↑PA in M4 -/WT; M: ∅PPI & ∅PA in M1-/-/M4-/- versus WT	SCOP: ↓PPI in WT & M4-/- mice (F) & slight ↓PPI in M1-/- M4-/- (M); ∅PPI in M1-/- (F) or M1-/-/M4-/- (F) ↑PA in all groups; M1-/- M4-/- (F) and M4-/- (F) more sensitive to ↑PA	Xanomeline; blocked SCOP-induced ↓PPI in WT & M1-/-, but not in M4-/- mice; data in M1-/- M4-/- difficult to interpret because ∅PPI with SCOP; blocked SCOP-induced ↑PA in M1-/- & M1-/-/M4-/-; ∅PA in SCOP-treated M4-/- OXO (versus SCOP); blocked SCOP-induced ↓PPI in all genotypes (although SCOP effect not significant in M1-/-/M4-/-); trend for reversal of SCOP-induced ↑PA OXO (alone): ↓PPI in WT & ↑PPI in M1-/- M4-/-; ↓PA in WT & M1-/-/M4-/- (which may lead to variability in PPI) CLO: ↑PPI in M1-/-/M4-/- at doses with ∅PPI in WT; ↓PPI in WT & M1-/-; ∅PPI in M4-/-; ↓PA in WT & M1-/-; ∅PA in M1-/-/M4-/- & M4-/- HAL: ↑PPI in WT & M1-/-/M4-/-; ∅PA in WT or M1-/-/M4-/-
Schmid et al. (2011)	VAcHT KD, M	<i>Vesicular ACh Transporter (VAcHT)</i> Cholinergic transmission associated with cognitive function and startle behavior. VAcHT KD mice have reduced cholinergic tone.	∅PPI & ∅PA in -/- versus WT; ↓ between day HAB in -/- versus WT		

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>E. (NEURO)PEPTIDES</i>					
<i>Angiotensin/Renin</i>					
Martin et al. (2008)	RE KO, NSE-ATI TG, M	AT/Renin may be involved in brain (DA) signaling. ACE levels were reported to be altered in SZ patients. REKO have reduced renin signaling; NSE-ATI TG have over-expression of ATI receptors.	∅PPI (RE -/- & NSE-ATI TG vs. WT); ∅PA in KO (trend) & ∅PA in NSE-ATI versus WT	APO, AMP & DIZ (all ∅PA (RE KO vs. WT; main effect across treatment conditions); ∅PPI in RE -/-, NSE-ATI TG & WT (no genotype x drug interactions); APO (∅PA in RE -/-, NSE-ATI TG & WT); AMP (∅PA in RE -/- & WT (trend), ∅PA in NSE-ATI TG & WT); DIZ (∅PA in RE -/- & WT; more pronounced in RE -/-, ∅PA (trend) in NSE-ATI TG & WT);	
<i>Neurotensin</i>					
Feifel et al. (2010a)	NT1 KO, M & F	Neurotensin (NT) may play a role in SZ pathophysiology. NT levels decreased in CSF from SZ patients, and APDs increase NT levels.	∅PPI in -/- versus WT; ∅PA in -/- versus WT	AMP ∅PPI & ∅PA in -/- & WT; MK801 ∅PPI; MK801 ∅PA (low dose only; more pronounced in WT than -/-)	PD149163, NT1 receptor agonist, ∅PPI in WT, ∅PPI in -/-;
Feifel et al. (2010b)	NT2 KO, M & F	NT2 receptors highly expressed in brain but not well studied	∅PPI & ∅PA in -/- versus WT (both sexes)		

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI deficits	Effects of (presumed) antipsychotics/other treatments
Oliveros et al. (2010)	NT1 KO & NT2 KO, M	NT receptors may play a role in psychotomimetic and antipsychotic effects of drugs	∅PPI & ∅PA in NT1 ^{-/-} , NT2 ^{-/-} , & WT	AMP: ↓PPI in NT2 ^{-/-} & WT, ∅PPI in NT1 ^{-/-} ; ↓PA in WT, ∅PA in NT1 ^{-/-} or NT2 ^{-/-} DIZ: ↓PPI in NT2 ^{-/-} & WT, ∅PPI in NT1 ^{-/-}	CLO: blocks AMP-induced ↓PPI in WT & NT2 ^{-/-} ; blocks DIZ-induced ↓PPI in WT, does not block DIZ-induced ↓PPI in NT2 ^{-/-} NT69L: blocks AMP-induced ↓PPI in WT & NT2 ^{-/-} ; blocks DIZ-induced ↓PPI in NT2 ^{-/-} , does not block DIZ-induced ↓PPI in WT; ↓PA in WT & NT2 ^{-/-}
Groeninck et al. (2008)	CRF-OE, M	<i>CRF</i> Stress physiology, particularly CRF and glucocorticoids, implicated in neuropsychiatric disorders	↓PPI in CRF-OE versus WT at lower PP intensities; ∅PA in CRF-OE versus WT	CORT implant; ∅PPI in CRF-OE or WT mice.	CRF1 antagonists CP154,526 & DMP695 normalized PPI deficit in CRF-OE mice; CR antagonists and ADX did not; CP154,526 ↓PA
Caldwell et al. (2009)	Oxt KO, M, F	<i>Oxytocin</i> Oxytocin has shown antipsychotic potential in animal models of SZ and in some preliminary clinical trials	∅PPI & ∅PA in ^{-/-} versus WT	PCP: Exacerbated ↓PPI in ^{-/-} versus WT, ∅PA; Apo & Amp: ↓PPI in ^{-/-} & WT; ∅PA	
Egashira et al. (2009)	V1aR KO, V1bR KO	<i>Arginine Vasopressin</i> Arginine vasopressin (AVP), a diuretic peptide with receptors widely expressed in the CNS, has been implicated in neuropsychiatric disorders.	↓PPI in V1aR & V1bR ^{-/-} versus WT; ↑PA in V1aR & V1bR ^{-/-} versus WT		
Karl et al. (2010a)	Y2 KO, M & F	<i>Neuropeptide Y</i> NPY levels altered in SZ patients. NPY Y2 receptor expressed in HPC and AMY	M: ↑PPI & ∅PA in ^{-/-} versus WT F: ∅PPI in ^{-/-} versus WT	MK801: ↓PPI & ↑PA in ^{-/-} & WT AMP: ↓PPI & ↑PA in ^{-/-} & WT	

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Karl et al. (2010b)	Y1 KO, M	Decreased Y1 receptor expression in lymphocytes of SZ patients	\emptyset PPI, \downarrow PA, & \downarrow HAB in $-/-$ versus WT	MK801: \downarrow PPI & \uparrow PA in $-/-$ & WT AMP: \downarrow PPI & \emptyset PA in $-/-$ & WT	
Zhu et al. (2010)	NPSRI KO, M & F	<i>Neuropeptide S</i> NPSRI is a G protein coupled receptor located in brain regions involved in anxiety and learning and memory, whose endogenous ligand is NPS. NPSRI SNPs identified in panic disorder.	M: \downarrow PA & \emptyset PPI in $-/-$ versus WT; F: \emptyset PA & \emptyset PPI in $-/-$ versus WT	(effects are ISI & PP dependent)	
Fendt et al. (2011)	NPSR KO, M	NPS implicated in regulation of emotional behavior	\emptyset PPI in $-/-$ or $+/-$ versus WT; \downarrow PA in $-/-$ & $+/-$ versus WT		HAL: \uparrow PPI & \downarrow PA in $-/-$, $+/-$, & WT
Hashimoto et al. (2007)	PACAP KO, M	PACAP PACAP affects neurotransmission; potential SZ susceptibility gene	\downarrow PPI in $-/-$ versus WT		RIS (\uparrow PPI in $-/-$; \emptyset in WT)
Ishihama et al. (2010)	PACAP KO, M	Genetic susceptibility plus environmental factors may contribute to SZ	\downarrow PPI in $-/-$ versus WT (PA data not shown)	SE: \downarrow PPI & \emptyset PA in $-/-$ & WT	EE: \downarrow PPI in $-/-$ & WT

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI deficits	Effects of (presumed) antipsychotics/other treatments
Smith et al. (2009)	Relaxin-3 KO, M & F	<i>Relaxin-3</i> Relaxin-3 modulates feeding, stress response, exploratory behavior, and arousal	∅PPI in <i>-/-</i> versus WT; PA data not reported		
Matsumoto et al. (2008)	SREB2 KO, SREB2 TG, M	<i>F. ORPHAN RECEPTORS</i> SREB (= GPR85) highly conserved GPCR; expressed in brain regions of high plasticity; overtransmission of 2 SNPs in SZ (this study)	↓PPI & ∅PA in TG versus WT; ∅PPI & ∅PA in <i>-/-</i> versus WT		
Logue et al. (2009)	GPR88 KO, M & F	GPR88 is highly expressed in brain regions implicated in SZ and regulates DA function (this paper).	↓PPI in <i>-/-</i> versus WT; ∅PA in <i>-/-</i> versus WT		HAL; ↑PPI in <i>-/-</i> ; ∅PPI in WT; ↓PA in <i>-/-</i> & WT RISP; ↑PPI in <i>-/-</i> & WT; ↓PA in <i>-/-</i> & WT
Kim et al. (2010)	TAK1 KO, M	TAK1 is a nuclear orphan receptor that regulates transcription; TAK1 deletion delays migration of cerebellar granular neurons	↓PPI, ↓PA, ↓HAP in <i>-/-</i> versus WT		

(continued)

Table 2 (continued)

References	Mouse Strain, Sex	Model description/ background/ rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Karmacharya et al. (2011)	TAAR1 KO, M	Trace amines are very similar to biogenic amines and are implicated in neuropsychiatric disease; trace amine receptors may mediate effects of antipsychotic drugs	∅PPI in <i>-/-</i> versus WT (PA data not shown)		CLO: ↑PPI in WT, ∅PPI in <i>-/-</i>

G. TRACE AMINES

Abbreviations: 5-HT serotonin, AAV adeno-associated virus, Aβ amyloid β-peptide, ACE angiotensin converting enzyme, ACH acetylcholine (receptor), AD Alzheimer's disease, ADX adrenalectomy, AIL advanced intercross line, AMP amphetamine, AMY amygdala, APD antipsychotic drug, APP amyloid precursor protein, ARIP arripiprazole, APO apomorphine, AT angiotensin, BAC bacterial artificial chromosome, BACE β-site APP cleaving enzyme, BD bipolar disorder, BG background, CaMKIV calcium-calmodulin-dependent protein kinase IV, cAMP cyclic adenosine monophosphate, Ckr chakraganti, CLO clozapine, CNS central nervous system, COC cocaine, COMT catechol-O-methyltransferase, CORT corticosterone, CRF corticotropin releasing factor, CTR controls, CTX cortex, DA dopamine (receptor), DAT dopamine transporter, dB decibel, DCC deleted in colorectal cancer, DIAZ diazepam, DIZ dizocipine, DN dominant-negative, DDO D-aspartate oxidase, E embryonic day, EE environmental enrichment, EGF epidermal growth factor, ENU N-ethyl-N-nitrosourea, Ffrontal, F female, FABP fatty acid binding protein, FGF fibroblast growth factor, Fmr1 fragile × mental retardation 1 gene, FMRP fragile × mental retardation protein, FXS fragile × Syndrome, GLAST glutamate and aspartate transporter, GLU glutamate, GluR glutamate receptor, GLUT glucose transporter, GR glucocorticoid receptor, GRIP glutamate receptor interacting protein, GSK glycogen synthase kinase, GWAS genome wide association studies, HAL haloperidol, HD Huntington's disease, HPC hippocampus, IC imprinted cluster, IL interleukin, ISI interstimulus interval, KI knock-in, KO knock-out, M male, m metabotropic, MDB methyl-CpG binding protein, mo month, NIC nicotine, MPEP 2-methyl-6-(phenylethyl)-pyridine hydrochloride, METH methamphetamine, Mgat N-acetylglucosaminyltransferase, NAA N-acetyl-L-glutamate, NAAG N-acetylalpha L-aspartyl-L-glutamate, NAC nucleus accumbens, NCAM neural cell adhesion molecule, NIS nisoxetine, nNOS neuronal nitric oxide synthase, NO nitric oxide, NPS neuropeptide S (receptor), NPY neuropeptide Y, NR NMDA receptor subunit, NRG neuregulin, NRL neurotrophin, ns not significant(y), NSE neuron-specific enolase, NT neurotensin, OE overexpressor, OXO oxotremorine, PA magnitude of response to pulse alone, PACAP pituitary adenylate-cyclase-activating polypeptide, PD Parkinson's disease, PDE phosphodiesterase, PETA-1 plasmocytoma expressed transcript-1, PND postnatal day, PLC phospholipase C, PNS prenatal stress, poly IC polyinosinic: polycytidylic acid, PP prepulse, PPI prepulse inhibition of startle, PPP prepulse potentiation, PSI presinilin1, PWS Prader-Willi syndrome, QTL quantitative trait locus, QUETI quetiapine, RAC raclopride, RAGE receptor for advanced glycation end-products, RasGAP Ras GTPase-activating protein, RE reelin-enhancer, RIS risperidone, SCOP scopolamine, SI social isolation, SNP single nucleotide polymorphism, SOCS suppressor of cytokine signaling, SREB superconserved receptor expressed in brain; STR striatum, SYN synapsin, SynGAP synaptic GTPase-activating protein, SZ schizophrenia, TAAR trace amine-associated receptor, TG transgenic, TGF-β transforming growth factor beta, TK tyrosine kinase, TMS transcranial magnetic stimulation, V1b vasopressin receptor 1b, WT wild-type

↓ decreased, ↑ increased, ∅ unchanged, *-/-* homozygous mice, *+/-* heterozygous mice

2.5 Methodological Considerations with Specific Relevance to Genetic Models of Sensorimotor Gating

For a detailed description of the methods of acoustic startle and PPI in mice see Geyer and Dulawa (2003). When conducting an initial analysis of startle and PPI in a genetic mutant, several considerations should be made when evaluating PPI. Typically, startle sessions involve variable prepulse intensities (e.g. 3, 6, 12 dB above background), which should produce an incremental increase in PPI with increasing prepulse intensities. Of course any evaluation of a PPI phenotype should be considered in the context of a thorough assessment of physical and sensory abnormalities (e.g. hearing loss), as pointed out in Geyer et al. (2002). In a study examining strain differences in hearing and PPI, Willot et al. (1994) showed a relationship between PPI levels and hearing impairments. Hearing loss is also exacerbated by age, particularly in specific strains of mice such as C57s, which experience high frequency hearing loss with age (Willott et al. 1994). One way to avoid relying solely on auditory processing is to assess multimodal PPI using light as a prepulse and/or airpuffs as a startling stimulus (Brody et al. 2004; Young et al. 2010). This multi-sensory approach can avoid potential confounds of hearing loss and still enable the evaluation of PPI. It should be noted, however, that some degree of noise is often produced with the delivery of airpuff stimuli, therefore, data on airpuff-tactile startle should be interpreted with this consideration in mind. Other tactile stimuli, such as mild footshock could provide an alternative approach to this issue. Another way to provide a gross measure of hearing in genetic mutants is to incorporate a “startle threshold” block into the session, in which increasing decibels of acoustic stimuli are presented to measure startle magnitude across these intensities (Brody et al. 2004). The threshold at which the mouse begins to startle can then be evaluated. Additionally, differences in baseline startle magnitude can confound effects on PPI. Although dissociations between startle and PPI have been reported in mice (Brody et al. 2004) and rats (Sipes and Geyer 1994), large differences in baseline startle magnitude can complicate interpretations of changes in PPI. If large differences in baseline startle are observed, startle magnitude can be “matched” either by using a range of startle stimuli (e.g. 110, 120 dB) paired with the prepulse stimuli or doing a post hoc analysis of only those animals across genotypes that have comparable levels of startle. We have included results on startle magnitude [pulse alone (PA)] in Tables 1–5 when the data were provided and indicated studies that did not report data on startle magnitude. A good example of testing over a wide range of startle amplitudes can be found in Savonenko et al. (2009) in their studies of EP2 KO mice. The background strain on which genetic mutants are made should be considered as well. For a discussion of the issue surrounding background strain the reader is referred to Crawley (2007) and Geyer et al. (2002).

3 Approaches to Genetic Models of Sensorimotor Gating

3.1 Overview of Molecular Genetic Techniques

Broadly defined, behavioral genetic approaches can be divided into two main approaches either beginning with the gene of interest or the behavior of interest (Jacobson and Cryan 2010). Gene-based or “reverse genetics” approaches begin with the targeted gene being manipulated in the animal and the resultant behavior evaluated. Phenotype-based or “forward genetics” approaches begin with the targeted behavioral phenotype (trait) and then involve subsequent genetic analysis of the trait. Most genetic studies of sensorimotor gating have focused on gene-based approaches, and as such, these approaches are discussed in more detail than phenotype-based approaches, which are discussed more extensively in Tarantino and Eisener-Doman (2011). The goals for any genetic approach can be very different—some approaches seek to understand the more global role of a specific gene in a particular phenotype related to a disease, while others may be designed to elucidate the role of a particular gene in a cellular process, in neural circuit abnormalities, or in brain development. Studies representing all of these goals are well represented in the literature on genetic models of sensorimotor gating (see Tables 1–5). The techniques used to generate molecular genetic models using the gene-based (reverse genetic) approach include constitutive gene deletion (knock-out), insertion of exogenous DNA into the genome (transgenic), and insertion of gene at a particular locus via homologous recombination (knockin) [reviewed in (Crawley 2007; Tecott and Wehner 2001)]. Conditional genetic manipulations, which restrict the expression of a targeted gene either temporally or regionally, are useful in avoiding complications of in utero lethality or compensatory brain changes, or when specific hypotheses exist regarding the developmental expression of a gene or the specific neuroanatomical function of the gene. Examples of conditional genetic manipulations include the Cre-LoxP system in which the targeted gene is floxed with lox-p sites. When combined with Cre recombinase, the floxed gene is expressed, giving regional, cell-specific, or temporal control over expression or deletion of targeted gene (van der Neut 1997; Wang 2009). Restriction to specific brain regions can be achieved through the use of specific promoters used to drive expression. For example, the CaMKII α promoter restricts expression of a genetic mutation to the forebrain (Mayford et al. 1996). Additional examples of tools to achieve temporal control over gene function involve the Tet-On and Tet-Off systems. With these systems, the target gene is linked to either the tetracycline-controlled transactivator (tTA) or the reverse tTA (rtTA) and can be either turned “on” with doxycycline administered (tTA; Tet-On) or turned “off” in the presence of doxycycline (rtTA; Tet-Off) (Mansuy and Bujard 2000). Thus, by combining some of these approaches, conditional and inducible gene expression in mouse brain can be achieved. Additionally, insertion of large segments of DNA into the genome can be achieved through the use of bacterial artificial chromosomes (BAC transgenics) (Heintz 2001). The BAC transgenic

technique is a useful approach when a large segment of DNA has been implicated in a disease (e.g. 22q11.2 microdeletion or microduplications). For example, BAC transgenic technology was used to generate two lines of transgenic mice expressing different genes located on the 22q11.2 segment of the chromosome. Interestingly, mice overexpressing *Prodh* and *Vpreb2* showed increased PPI, while mice overexpressing *Zdhhc8*, *Ranbp1*, *Htf9c*, *T10*, *Arvcf*, *COMT* showed no differences in PPI (Stark et al. 2009). More recent techniques, such as in utero gene transfer, are being developed to modulate the expression of genes during specific stages of embryonic development (Niwa et al. 2010).

“Phenotype-based” approaches to behavioral genetics include “forward genetic screens” such as mutagenesis via radiation or chemical means [e.g. ENU mutagenesis; (Tarantino and Bucan 2000) and quantitative trait loci (QTL) studies on crosses of inbred mouse strains with distinct phenotypes or on mice or rats selectively bred for PPI levels (Hitzemann et al. 2008; Tarantino and Eisener-Doman 2011)]. Thus far, most of the PPI mutants identified through ENU mutagenesis screens have had some amount of hearing loss, and thus the specificity of the PPI “phenotype” was most likely confounded by deafness (Lisa Tarantino, personal communication). Other molecular genetic tools such as siRNA, in which double stranded RNA homologous to the targeted gene is made and then inserted into the cell to block expression of that gene, and viral transfection, in which genes are inserted into viral vectors and injected into the nucleus of cells, are additional techniques used in neuroscience research assessing sensorimotor gating, but will not be discussed in this chapter. Due to the increasingly large number of genetic models generated in which PPI was evaluated, we will provide some examples in the text of different genetic approaches undertaken to study sensorimotor gating, but the reader is referred to Tables 1–5 for a comprehensive review of the recent genetic models assessing PPI.

3.2 Models Based on Hypotheses Regarding the Pathophysiology of Disease

Genetic models of sensorimotor gating deficits were based initially on the hypothesized pathophysiology of schizophrenia or the known mechanism of action of both antipsychotic and psychotomimetic drugs [e.g. amphetamine, PCP]. Thus, early genetic mutants focused primarily on dopamine (Ralph et al. 2001) and glutamate (Brody and Geyer 2004; Duncan et al. 2004) neurotransmitters and receptors (e.g. dopamine-related genes, glutamate-related genes). Many of these observed effects [e.g. PPI deficits in dopamine transporter KO mice (Ralph et al. 2001)] were not surprising based on the extensive pharmacology of PPI deficits in rodents, but nevertheless the genetic models provided proof of concept that constitutive gene deletion could produce dramatic functional effects on sensorimotor gating in adult animals. PPI deficits in dopamine transporter knockout mice strengthened the converging evidence that dopamine hyperfunction played an

important role in sensorimotor gating and potentially the pathophysiology of schizophrenia. Similarly, PPI deficits in metabotropic glutamate mutants (Brody et al. 2003; Brody and Geyer 2004; Gray et al. 2009; Kinney et al. 2003) have stimulated interest in these receptors as targets for drug development (Cleva and Olive 2011). Genetic approaches to pathophysiology of neuropsychiatric disease are becoming increasingly sophisticated and many of these models incorporate assessments of PPI as a relevant behavioral phenotype (Tables 3, 4). Jumping off from the original observation that N-methyl-D-aspartate (NMDA) NR1 hypomorphs show PPI deficits in addition to other behavioral abnormalities (Duncan et al. 2004), several genetic mutants have been made based on reduced NMDA receptor expression, including NMDA subtype-specific mutants (reviewed in Powell et al. (2009)) and downstream signaling proteins (Table 3).

The converging GABA-glutamate theory of schizophrenia stems from two lines of evidence (Coyle 2004). First, the glutamate hypothesis of schizophrenia is derived from evidence that acute administration of phencyclidine (PCP), a non-competitive NMDA antagonist, produces schizophrenia-like symptoms in healthy humans (Javitt 2004; Javitt and Zukin 1991). Extending such observations, several experimental studies have utilized another NMDA antagonist, ketamine, to induce a model psychosis in normal volunteers (Abel et al. 2003; Krystal et al. 1994; Oranje et al. 2002; van Berckel et al. 1998) and to exacerbate symptoms in patients with schizophrenia (Malhotra et al. 1997a, b; Krystal et al. 1994, 2003). Additionally, studies on postmortem brain tissue from schizophrenia patients show altered GABAergic interneuron function, particularly in parvalbumin (PV) interneurons (Benes and Berretta 2001; Lewis et al. 2005). Evidence that NMDA hypofunction specifically on GABA interneurons plays a role in the pathogenesis of schizophrenia comes from several lines of preclinical research. First, NMDA antagonists increase the firing rate of pyramidal cells and increase prefrontal glutamate release (Jackson et al. 2004; Moghaddam et al. 1997), suggesting that NMDA antagonists are preferentially blocking inhibitory interneurons. Second, preclinical studies suggest that GABA interneurons are more sensitive to NMDA antagonists than other neuronal subtypes such as pyramidal neurons (Grunze et al. 1996). Third, repeated exposure to NMDA antagonists such as ketamine decreases PV and GAD67 expression (Behrens et al. 2007). Based on these converging lines of evidence, Belforte et al. (2010) used the Cre-LoxP system to engineer mice with deletion of NR1 specifically in GABAergic interneurons (Table 1). Their elegant set of studies showed that reduction in NR1 early in postnatal development produced deficits in PPI, but that adult NR1 reduction had no effect on PPI. These studies corroborate previous studies reporting PPI deficits with constitutive NR1 reduction throughout the brain (Duncan et al. 2004). There have been several other genetic mutants created to test hypotheses regarding glutamate signaling (see Table 4). For example, mice with pre-adolescent forebrain-specific deletions of the vesicular glutamate transporter *VGLUT2^{ff};CKII^{Cre}* show PPI deficits, which are attenuated with the antipsychotic drug aripiprazole (Wallén-Mackenzie et al. 2009). Genetic mutants of specific proteins involved in NMDA receptor signaling such as mice heterozygous for SynGAP gene deletion also show PPI deficits in

Table 3 Genetically engineered model organisms based on genes related to: *miscellaneous biological processes*

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>Second messengers</i>					
Siuciak et al. (2008)	PDE4B KO, M	PDE4 catalyzes the degradation of cAMP. Widely expressed in brain	↓PPI & ↑PA in $-/-$ versus WT (↓PPI not dependent on ↑PA)		
McOmish et al. (2008)	PLC- β 1 KO	PLC- β 1 is a rate-limiting enzyme involved in the intracellular signaling cascade linked to several metabotropic receptors implicated in SZ; PLC- β 1 reduced in SZ brain	↓PPI & PA ($-/-$ vs. WT)		EE (main effects): ↑PPI & ↓PA (trend) versus standard housing); EE \times genotype \times PP intensity effect on PPI (↑PPI in $-/-$); EE \times genotype effect on PA (↓PA in WT); HAL (no rescue of PPI deficit of $-/-$ vs. VEH treated WT; \emptyset PA); CLO (main effect ↓PPI; genotype \times CLO \times PP intensity effect; rescue of PPI deficit of $-/-$ vs. VEH treated WT; main effect: ↓PA vs. VEH; genotype \times CLO: more pronounced ↓PA in WT)
Koh et al. (2008)	PLC- β 1 KO		↓PPI & trend for ↓PA ($-/-$ vs. WT)		HAL: normalized PPI in $-/-$, no effect in WT; \emptyset PA
<i>Growth factors</i>					
Ransome et al. (2008)	SOCS-2 TG	SOCS-2 affects growth hormone signaling & potentially hippocampal neurogenesis	\emptyset PPI in TG versus WT		
Seacore-Levie et al. (2008)	Fgf17 KO, M & F	Fgf17 is involved in region-specific development of the rodent ICTX	\emptyset PPI & \emptyset PA in $-/-$ versus $+/-$ or WT		

(continued)

Table 3 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Oigake et al. (2009)	Mdk KO, M & F	Mitkine involved in neurodevelopment and adult neuroplasticity; abnormal serum levels in SZ and AD; KO produces ↓DA and DAR in striatum (this paper)	↓PPI in $-/-$ versus WT, $+/-$ intermediate (adult); ∅PPI in $-/-$ versus WT (4 wk old); ∅PA in $-/-$, $+/-$, WT (adult, 4wk)		HAL: ↑PPI in $-/-$; ∅PPI in WT CLO: ↑PPI in $-/-$; ∅PPI in WT Overall ↓PA with APD; CLO (3 mg/kg) ↓PA in WT
Sun et al. (2010)	Forebrain-specific SMAD4 KO, M	SMAD4 is an intracellular transducer of TGF- β signaling; TGF- β signaling important for neurodevelopment and shown to be abnormal in SZ	↓PPI & ∅PA in $-/-$ versus WT		
Nguyen et al. (2011)	PDGFR- $\beta^{\beta}/Nestin^{Cre+}$ KO, M (neuron-specific PDGFR KO)	Platelet derived growth factor (PDGF) is important for embryogenesis and CNS development. PDGFR- β has been associated with SZ and ASD	↓PPI & ∅PA in $-/-$ versus WT		
Bersudsky et al. (2008)	GSK3 β KO, M	<i>Protein kinase</i> GSK3 β levels were reported to be reduced in SZ patients. Li inhibits GSK3 β <i>in vitro</i>	∅PPI & ∅PA in $+/-$ versus WT		
Kaidanovich-Bellin et al. (2009)	GSK3z KO, M & F	GSK3 implicated in several neuronal signaling pathways	↑PPI & ∅PA in $-/-$ versus WT		
Takao et al. (2010)	CaMKIV KO, M	CaMKIV is a protein kinase that activates transcription factor CREB and thus may play a role in synaptic plasticity	∅PPI & ∅PA in $-/-$ versus WT		

(continued)

Table 3 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Stuta et al. (2010)	Rictor β : <i>NesCre</i> KO (neuron-specific Rictor KO)	Rictor is a component of mTOR2C, the kinase responsible for phosphorylation of Akt. Akt deficiencies associated with SZ	\downarrow PPI & \emptyset PA in $-/-$ versus WT		NIS: (\downarrow PPI in $-/-$; no data in WT; PA data not shown) CLO: (\emptyset PPI in $-/-$; PA data not shown)
Horii et al. (2008)	Neurospain KO, M	<i>Proteases</i> The serine protease neurospain may be involved in neuronal plasticity/ degeneration	\emptyset PPI & PA in $-/-$ versus WT		
Savonenko et al. (2008)	BACE1 KO, M	BACE1 is critical for APP cleavage/ amyloid β production. May also play a role in SZ via proteolysis of NRG & axon myelination	\downarrow PPI in $-/-$ & \emptyset PPI in $+/-$ versus WT; \emptyset PA in $-/-$ & $+/-$ versus WT; \uparrow PA latency in $-/-$ versus $+/-$ & WT		CLO: (amelioration of PPI deficits in $-/-$; \emptyset PPI in $+/-$ & WT)
Dyck et al. (2007)	SYN II KO	<i>Synaptic proteins</i> SYN II, a vesicle-linked phosphoprotein plays a role in neuronal development & transmitter release; hypothesized to contribute to the etiology of SZ	\downarrow PPI ($-/-$ relative to $+/-$ & WT)		
Dyck et al. (2009)	SYN II KO, M & F	\downarrow SYNII in mPFC of SZ patients; \uparrow SYNIII levels with chronic APD	\downarrow PPI in $-/-$ versus $+/-$ and WT; \downarrow PA in $-/-$ versus $+/-$ and WT; lack of HAB in $-/-$		

(continued)

Table 3 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Savonenko et al. (2009)	EP2 KO, F	EP2 is a prostaglandin receptor involved in activity-dependent synaptic plasticity	↓PPI in $-/-$ versus WT; \emptyset PA in $-/-$ versus WT		
Oliver and Davies (2009)	SNAP-25 <i>Bdr</i> (<i>Blind drunk</i> mutant), SNAP-25 $+/-$, combined with prenatal stress (PNS), M	SNARE protein SNAP-25 important for synaptic function and neurotransmitter release; SNAP-25 genomic region linked to SZ	↓PPI & \emptyset PA in <i>Bdr</i> mutant versus WT, ↓PPI exacerbated by PNS; \emptyset PPI & \emptyset PA in $+/-$ versus WT, no effect of PNS in $+/-$		<i>CLO</i> : ↓PPI in BDR/NS & BDR/PNS; \emptyset PPI in WT/NS or WT/PNS <i>HAL</i> : ↓PPI in Bdr/PNS at 86dB PP only; \emptyset PPI in WT/NS, Bdr/NS, or WT/PNS
Blundell et al. (2010)	<i>Rim1z</i> KO, M Rab3A KO, M <i>SytlR233Q</i> (point mutation) KI, M&F <i>Rim1zS413A</i> KI, M	Presynaptic proteins involved in neurotransmitter release and associated with SZ in genetic studies	<i>Rim1z</i> : ↓PPI & \emptyset PA in $-/-$ versus WT <i>Rab3A</i> : ↓PPI & \emptyset PA in $-/-$ versus WT <i>SytlR233Q</i> : ↓PPI & \emptyset PA in KI versus WT <i>Rim1zS413A</i> : \emptyset PPI & \emptyset PA in KI versus WT		
Matsuo et al. (2009)	RyR3 KO	<i>Calcium Signaling</i> Ryanodine receptor 3 is an intracellular calcium release channel preferentially expressed in HPC and STR and involved in synaptic transmission and plasticity. RyR3 forms a signaling complex with calcineurin, a potential susceptibility gene for SZ and BD	↓PPI in $-/-$ versus WT at 78 dB PP + 110 dB startle pulse only; \emptyset PA in $-/-$ versus WT		

(continued)

Table 3 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Nakagawasa et al. (2010)	Ca _v 2.2 KO, M	N-type calcium channels are important for neurotransmitter release, brain development, and activity-dependent plasticity	↓PPI & ∅PA in -/- versus WT		
<i>Potassium channel signaling</i>					
Kapfhammer et al. (2010)	<p>PPP2r5δ KD, M & F</p> <p>GSK3β KD, M</p> <p>KCNQ2 KD, M & F</p> <p>KD created via gene trap (GT), reduced expression by 50%</p>	<p>KCNQ2 gene encodes an M-type potassium channel subunit and may be a substrate for GSK3β; PP2A regulates GSK3β; GSK3β and M-type potassium channels may be linked to SZ</p>	<p>PPP2r5δGi: ↓PPI & ∅PA in GT/+ versus WT</p> <p>GSK3β: ↓PPI & ∅PA in +/- versus WT</p> <p>KCNQ2: ↓PPI & ∅PA in +/- versus WT</p>		
<i>Immune activation</i>					
Smith et al. (2007)	IL6 KO	Maternal immune activation (here simulated via poly I:C injection) has been implied in the pathogenesis of SZ		Maternal poly I:C injection.	
Asp et al. (2010)	Tap1 KO mice	Prenatal influenza infection associated with increased SZ risk. Transporter associated with antigen processing 1 mice have reduced expression of MHC class I	No direct comparisons between -/- and WT mice; C57BL6/J WT mice purchased from Jackson Laboratories	<p>Effects in offspring: ∅PPI in -/- but ↓PPI in WT</p> <p>Influenza infection on PND 3 or 4: ↓PPI in adult -/- mice (during ISI block), trend for ↑PA in infected mice in startle threshold block; ∅PPI & ∅PA in infected versus non-infected WT C57 mice</p>	

(continued)

Table 3 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
López-Ramos et al. (2010)	TgIE96, M	Mice expressing pseudorabies virus immediate-early protein IE180 (TgIE96) have cerebellar abnormalities	↓PPI & ∅PA in Tg versus WT (C57BL/6J WT mice purchased from Jackson Laboratories)		
<i>Glucose metabolism</i>					
Schmidt et al. (2008)	GLUT3 (Slc2a3) KO, M	GLUT is widely expressed in brain. Role in neuronal glucose homeostasis and likely role in diverse behaviors	↓PPI at lower PP intensities & ↓PA in +/- versus WT		
<i>Neuromodulatory functions</i>					
Errico et al. (2008)	DDO KO, M	The enzyme DDO degrades D-aspartate, an amino acid with elusive function in the CNS. A neuromodulatory function at NMDA receptors has been implied	∅PPI & ∅PA in -/- versus WT	AMP (∅PPI in DDO -/-; ↓PPI in WT) DIZ (↓PPI in -/- & WT, more pronounced in WT)	Chronic D-aspartate (∅PPI & PA) antagonized AMP & DIZ-induced ↓PPI in WT (not tested in -/-)
Tanda et al. (2009)	nNOS KO, M	nNOS synthesizes NO from L-arginine; involved in many intracellular signaling processes; ↓nNOS expression in STR and HPC of SZ; polymorphisms of nNOS associated with SZ	∅PPI & ∅PA in -/- versus WT	SKF81297 (DA D1 agonist); ↓PPI & ∅PA in -/-; ∅PPI & ↓PA in WT	
<i>Altered myelination</i>					
Tanaka et al. (2009)	PLP1 ^(op/-)	Myelin and oligodendrocyte dysfunction may contribute to schizophrenia pathogenesis. Myelin proteolipid protein (plp1) decreased in brains of SZ patients	↓PPI in Tg versus WT at higher PP intensity (78dB), PA data not shown		

(continued)

Table 3 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>Spine morphogenesis</i>					
Cahill et al. (2009)	KALRN KO	Kalirin1, a guanine-nucleotide exchange factor (GEF) for Rac-like GTPases, regulates spine morphogenesis. KALRN $-/-$ have decreased spine density (this paper)	\downarrow PPI in $-/-$ versus WT; PA data not shown		
<i>Oxidative stress</i>					
Benoit et al. (2010)	QR2 KO, M	QR2 enhances production of quinone and reactive oxygen species (ROS) and is upregulated in cognitively impaired aged rats; polymorphism in QR2 promoter region weakly associated with SZ	\emptyset PPI in $-/-$ versus WT; PA data not shown		
Cole et al. (2011)	GCLM KO, M	GCLM is rate-limiting enzyme in glutathione (GSH) synthesis; GSH defends against oxidative stress	\emptyset PPI & \emptyset PA in $-/-$ versus WT		
<i>Metallothionines</i>					
Koumura et al. (2009)	MT3 KO, M	Metallothionines (MTs) bind zinc and other metals and are neuroprotective in some models	\downarrow PPI & \emptyset PA in $-/-$ versus WT		
<i>Neurodevelopmental genes (other)</i>					
Willi et al. (2010)	Nogo-A KO, M	Nogo-A inhibits growth during development and in adulthood and thus may be involved in neurodeve and neural plasticity; some evidence of pathology in SZ	\downarrow PPI & \emptyset PA in $-/-$ versus WT		

(continued)

Table 3 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Takata et al. (2010)	XBPI KO, M	XBPI gene encodes transcription factor in the ER unfolded protein response; involved in brain development and potentially pathogenesis of bipolar disorder and depression	↑PPI & ∅PA in +/- versus WT		
Sakatani et al. (2009)	RAGE KO, M	<i>Glycoproteins</i> RAGE is a receptor for multiple ligands including Aβ, HMGB1, and S100B, which contribute to the pathology of AD, epilepsy, and ischemia	↑PPI in -/- versus WT ↑PA in -/- versus WT at low sound pressure levels (70–100 dB); ↓PA in -/- versus WT at 120 dB		
Fukuda et al. (2011)	Fut8 KO, M	α1,6 fucosyltransferase (Fut8) ² transfers fucose from a GDP-fucose to position 6 of N-acetylglucosamine to form N-linked oligosaccharides of glycoproteins. Fucosylated glycoproteins widely distributed in brain	↓PPI & ∅PA in -/- versus +/- & WT	After restraint stress: ↓PPI & ∅PA in +/- versus WT	

(continued)

Table 3 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>Sex hormones</i>					
Chavez et al. (2009)	ArKO, M, F	Gender differences in the age of onset, severity, and response to treatment in SZ. Second increase in SZ incidence in older age for women when estrogen levels decline. Thus, estrogen may be neuroprotective against development of SZ. Aromatase (Ar) converts androgens to estrogens	∅PPI in <i>-/-</i> versus WT	AMP ↓PPI in <i>-/-</i> & WT (↓PPI slightly attenuated in F <i>-/-</i>), ↓PA in <i>-/-</i> & WT Apo: ↓PPI in <i>-/-</i> & WT (↓PPI slightly attenuated in F <i>-/-</i>), ↓PA in <i>-/-</i> & WT MK801: ↓PPI & ↓PA in <i>-/-</i> & WT	

Abbreviations: 5-HT serotonin, AAV adeno-associated virus, Aβ amyloid β-peptide, ACE angiotensin converting enzyme, ACH acetylcholine (receptor), AD Alzheimer's disease, ADX adrenalectomy, AIL advanced intercross line, AMP amphetamine, AMY amygdala, APD antipsychotic drug, APP amyloid precursor protein, ARIP aripiprazole, APO apomorphine, AT angiotensin, BAC bacterial artificial chromosome, BACE β-site APP cleaving enzyme, BD bipolar disorder, BG background, CalMKIV calcium-calmodulin-dependent protein kinase IV, cAMP cyclic adenosine monophosphate, Ckr chakragati, CLO clozapine, CNS central nervous system, COC cocaine, COMT catechol-O-methyltransferase, COR1 corticosterone, CRF corticotropin releasing factor, CTR controls, CTX cortex, DA dopamine (receptor), DAT dopamine transporter, dB decibel, DCC deleted in colorectal cancer, DIAZ diazepam, DIZ dizocipiline, DN dominant-negative, DDO D-aspartate oxidase, E embryonic day, EE environmental enrichment, EGF epidermal growth factor, ENU N-ethyl-N-nitrosourea, f/ frontal, F female, FABP fatty acid binding protein, FGF fibroblast growth factor, Fmr1 fragile × mental retardation 1 gene, FMRP fragile × mental retardation protein, FXS fragile × Syndrome, GLAST glutamate and aspartate transporter, GLU glutamate, GluR glutamate receptor, GLUT glucose transporter, GR glucocorticoid receptor, GRIP glutamate receptor interacting protein, GSK glycogen synthase kinase, GWAS genome wide association studies, HAL haloperidol, HD Huntington's disease, HPC hippocampus, IC imprinted cluster, IL interleukin, ISI interstimulus interval, KI knock-in, KO knock-out, M male, m metabotropic, MDB methyl-CpG binding protein, mo month, NIC nicotine, MPEP 2-methyl-6-(phenylethyl)-pyridine hydrochloride, METH methamphetamine, Mgat N-acetylglucosaminyltransferase, NAA N-acetyl-aspartate, NAAG N-acetyl-alpha L-aspartyl-L-glutamate, NAC nucleus accumbens, NCAM neural cell adhesion molecule, MIS misoxetine, nNOS neuronal nitric oxide synthase, NO nitric oxide, NP5 neuropeptide S (receptor), NPY neuropeptide Y, NR NMDA receptor subunit, NRG neuregulin, NRL neuroigin, ns not significant, NSE neuron-specific enolase, NT neurotensin, OE overexpressor, OXO oxotremorine, PA magnitude of response to pulse alone, PACAP pituitary adenylyl-cyclase-activating polypeptide, PD Parkinson's disease, PDE phosphodiesterase, PEF-1 plasmocytoma expressed transcript-1, PND postnatal day, PLC phospholipase C, PNS prenatal stress, poly I:C polyinosinic: polycytidylic acid, PP prepulse, PPI prepulse inhibition of startle, PSL presenilin1, PWS Prader-Willi syndrome, QTL quantitative trait locus, QUET quetiapine, RAC raclopride, RAGE receptor for advanced glycation end-products, RasGAP Ras GTPase-activating protein, RE reelin-enhancer, RIS risperidone, SCOP scopolamine, SI social isolation, SNP single nucleotide polymorphism, SOCS suppressor of cytokine signaling, SREB superconserved receptor expressed in brain; STR striatum, SYN synapsin, SynGAP synaptic GTP-ase-activating protein, SZ schizophrenia, TAAR trace amine-associated receptor, TGF-β transforming growth factor beta, TK tyrosine kinase, TMS transcranial magnetic stimulation, V1b vasopressin receptor 1b, WT wild-type
↓ decreased, ↑ increased, ∅ unchanged, *-/-* homozygous mice, *+/-* heterozygous mice

Table 4 Genetically engineered model organisms (ca. 07/01/2007-06/28/2011) based on genes related to: *models for specific disorders*

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>Alzheimer's disease</i>					
Dejaegere et al. (2008)	Alpha 1B/C γ -secretase KO	γ -secretases have been implicated in the cleavage of membrane proteins incl. APP, & NRG (a SZ vulnerability gene) & in NOTCH signaling	↓PPI (most pronounced at high PA intensities) & ↓PA in $-/-$ versus WT		HAL: (↑PPI & ↓PA in $-/-$ & WT) CLO: (↑PPI in $-/-$; ↓PPI in WT; ↓PA in $-/-$ & WT)
Guart et al. (2008)	APP, PS1, APP+PS1 TG, M	Neuropathological changes in brain regions regulating PPI may occur in AD models & may affect PPI	↓PPI in 18 mo old WT, APP KO, PS1 KO & APP+PS1 TG versus 3 mo old WT. Most pronounced ↓PPI in 18 mo APP+PS1 TG. PA data not shown		
Tsujimura et al. (2008)	KF-1 KO, M	KF-1 gene increased in AD patients; localized in hippocampus, cerebellum; modulates protein levels as a ubiquitin ligase; increased in frontal cortex after chronic antidepressant treatment, electroconvulsive therapy, and TMS	↑PPI in $-/-$ versus WT; ↓PA in $-/-$ versus WT		
Takeuchi et al. (2011)	P301S TG, M	Tau, a microtubule-associated protein, can cause cell death and is associated with AD and other neurodegenerative diseases. FTDP17 (frontotemporal dementia and PD linked to chromosome 17) is linked to a point mutation in tau (P301S)	↑PPI & ↓PA at 120 dB only in TG versus WT		

(continued)

Table 4 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>Autism</i>					
Allan et al. (2008)	MDB1 KO, M & F	Via DNA methylation, MDB1 mediate epigenetic gene regulation, which has been linked to neurodevelopmental disorders, including autism	↓PPI & ∅PA in -/- versus WT		
Chadman et al. (2008)	NL3 KI, M & F	Neurologin-3 (NL3) is a cell adhesion molecule involved in synapse development & implicated in autism; "knock in" of point mutation identified in autism	∅PPI in KI versus WT; ↓PA in KI versus WT		
Radyushkin et al. (2009)	NL3 KO, M	Point mutations in neurologin-3 are associated with autism	∅PPI & ∅PA in -/- versus WT		
Moy et al. (2009)	NRCAM KO, M & F	NRCAM identified as a candidate gene for autism; involved in cell-cell interactions during brain development and thus affect axonal guidance and neural circuit development	↓PPI in -/- versus WT (M only); ∅PPI in F); ∅PA in -/- versus WT		
DeLorey et al. (2011)	GABRB3 KO, M & F	GABRB3 gene associated with autism	∅PPI (F) & ↑PPI (M) in +/- versus WT; ↓PA (M & F) in +/- versus WT		
Mejias et al. (2011)	GRIPI/2 DKO (double KO, Grip1 flox/KO, Grip2 KO/KO)	GRIPI scaffolding protein that interacts with GLUJ3 via PDZ domains 4-6. SNP in PDZ4-6 domain and 5 missense variants identified in ASD (this paper)	↓PPI in -/- versus WT mice		

(continued)

Table 4 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>Fragile X-syndrome (FXS)</i>					
deVrij et al. (2008)	FMR1 KO	FXS involves mental retardation & is caused by the absence of FMRP. PPI is reduced in FXS patients	↓PPI at most PP intensities in $-/-$ versus WT		MPEP (mGluR5 antagonist: ↑PPI in $-/-$ & WT)
Paylor et al. (2008)	FMR1 KO, FMR1 KO with a yeast artificial chromosome containing human FMR1 gene, M		↑PPI & ↓PA (trend) in $-/-$ versus WT		Addition of human FMR1 gene normalized, i.e. ↓PPI & ↑PA in FMR1 KO to WT levels, & ↓PPI & ∅PA in WT
Baker et al. (2010)	FMR1 KO, M & F	Background strain may affect behavioral phenotype in FMR1 KO mice; bred to albino C57BL/6J-Tyr(c-Brd) background	↑PPI & ↓PA in $-/-$ versus WT (both sexes)		
Levenga et al. (2011)	FMR1 KO, M	FMRP involved in translation of mRNA at the synapse, downstream from mGlu5 signaling	↓PPI in $-/-$ versus WT; PA data not reported (startle measured via eyeblink)		<i>AFQ056</i> , <i>mGluR5</i> antagonist: ↑PPI in $-/-$; ∅PPI in WT
Veeraragavan et al. (2011)	FMR1 KO, M	Increased M1 muscarinic signaling in FMR1 KO mice	∅PPI & ∅PA in $-/-$ versus WT		<i>Dicyclomine</i> : ∅PPI & ∅PA in $-/-$ or WT
Thomas et al. (2011a)	mG1.FMR1 (mGlu1 HZ + FMR1 KO); mG5.FMR1 (mGlu5 HZ + FMR1 KO); FMR1 KO	FMR1 may increase signaling through Group I mGluRs (mGlu1, mGlu5)	↑PPI & ↓PA in FMR1 $-/-$ & mG5.FMR1 versus WT; ↑PPI & ↓PA in FMR1 $-/-$ & mG1.FMR1 versus WT		

(continued)

Table 4 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Thomas et al. (2011b)	FMRI KO, M & F	Group 1 mGluRs may be pharmacological target in Fragile X	↓PA & ∅PPI (trend for predicted ↑ in -/- versus WT)	<i>JNJ (mGlu1 antagonist)</i> ; ↓PPI in WT; ∅PPI in -/-; ∅PA in -/- & WT <i>MPEP (mGlu5 antagonist)</i> ; ∅PPI & ∅PA in -/- & WT	Effects of (presumed) antipsychotics/other treatments
<i>Huntington's disease</i>					
Menalled et al. (2009)	R6/2 TG, YAC128 TG, YAC128B TG, BACHD TG, HDH ^{Q111} /KI.M & F	HD results from a known genetic CAG repeat mutation; ↓PPI in HD patients; HD mutant mice show varying degrees of neuropathology and behavioral abnormalities; comparison controlling for many factors including sex, background strain, husbandry, and handling	R6/2: ↓PPI in TG versus WT beginning at 12 wks; ↓PA R6/2B: ↓PPI in TG versus WT <i>BACHD</i> : ↓PPI beginning at 24 wks; ∅PA <i>YAC128B</i> : ↓PPI at 54 wks; ∅PA <i>YAC128</i> : ∅PPI; ∅PA HDH ^{Q111} /KI: ∅PPI; ∅PA		
Brooks et al. (2010)	Hdh ^{CAG150} KI, M & F	Longitudinal characterization of KI mouse carrying 150 CAG repeats on the mouse Htt locus	↓PPI & ↓PA in KI versus WT		
Brooks et al. (2011)	R6/1 TG, M & F	R6/1 TG mouse contains ~115 CAG repeats on exon 1 of the HD gene. Characterization of R6/1 TG mice on C57BL/6 background is needed	↓PPI & ↓PA in TG versus WT		

(continued)

Table 4 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Pietropaolo et al. (2011)	R6/1 TG, M & F	Investigate neuropsychiatric symptoms in pre-motor stage of pathology	\emptyset PPI & \emptyset PA in TG versus WT		
Allen et al. (2008)	Kv1.1 KO	<i>Hearing disorders</i> PPI in rodents is a powerful means to identify hearing deficits. The role of Kv1.1 channels in PPI gap detection paradigms was assessed	\downarrow PPI (for long gaps only)		
Suzuki et al. (2009b)	SEPT5 (Septin5) KO, M	<i>22q11 deletion & duplication syndromes</i> 22q11.2 microdeletions result in cognitive & behavioral abnormalities and are associated with SZ and autism; SEPT5 gene located on 200kb region spanning the deletion	\uparrow PPI & \emptyset PA in $-/-$ versus WT		
Stark et al. (2009)	BAC <i>Tg-1</i> : Overexpress Prodh & Vpreb2 BAC <i>Tg-2</i> : overexpress Zdhhc8, Ranbp1, Hnf9c, T10, Arvcf, & COMT	22q11.2 microduplications are also associated with behavioral problems and learning disabilities; gain of function mutations can also be informative for the deletion syndrome	<i>Tg-1</i> : \uparrow PPI & \emptyset PA in Tg-1 versus WT <i>Tg-2</i> : \emptyset PPI & \emptyset PA in Tg-2 versus WT		

(continued)

Table 4 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Suzuki et al. (2009a)	BAC Tg, M: overexpress 190 kb segment of 22q11.2 including TXNRD2, COMT, ARVCF	22q11.2 is a hotspot for CNVs, 97% of children with 22q11.2 duplications show cognitive deficits	∅PPI & ∅PA in Tg versus WT		
Ortiz-Abalia et al. (2008)	TG DyrK1A overexpressors, M	<i>Down syndrome</i> DyrK1A overexpression has been implicated in Down Syndrome	↓PPI at higher PP intensities in TG versus WT (trend only); PA not shown		<i>Intrastriatal infusion of AAV hRNA against Dyrk1A</i> : PP intensity-dependent ↑PPI in TG treated with functional versus scrambled viral vectors & pre versus post-treatment with functional vector; PA not shown
Soleimani et al. (2008)	Mgat5 KO, M & F	<i>Glycosylation IIa congenital disorders</i> Mgat5 is involved in glycosylation of cell surface glycoproteins, including receptors & transporters. Abundant in the CNS	∅PPI & PA in -/- versus WT; ↑PA in M versus F (main effect)		

(continued)

Table 4 (continued)

References	Mouse strain, sex	Model description/background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Relkovic et al. (2010)	PWS-IC (+/-), M & F	<p><i>Prader-Willi syndrome</i></p> <p>neurodevelopmental disorder resulting from deletion of paternally expressed imprinted genes of chromosome 15q11-q13, a region also implicated in autism and SZ</p>	↓ PPI & ↑ PA in +/- versus WT in M & F (only at P105 in M)		

Abbreviations: 5-HT serotonin, AAV adeno-associated virus, Aβ amyloid β-peptide, ACE angiotensin converting enzyme, ACH acetylcholine (receptor), AD Alzheimer's disease, ADX adrenalectomy, AIL advanced intercross line, AMP amphetamine, AMY amygdala, APD antipsychotic drug, ARIP aripiprazole, APO apomorphine, AT angiotensin, BAC bacterial artificial chromosome, BACE β-site APP cleaving enzyme, BD bipolar disorder, BG background, CaMKIV calcium-calmodulin-dependent protein kinase IV, cAMP cyclic adenosine monophosphate, Ctr chakragati, CLO clozapine, CNS central nervous system, COC cocaine, COMT catechol-O-methyltransferase, CORF corticotropin releasing factor, CTR controls, CTX cortex, DA dopamine (receptor), DAT dopamine transporter, dB decibel, DCC deleted in colorectal cancer, DIAZ diazepam, DIZ dizocipine, DN dominant-negative, DDO D-aspartate oxidase, E embryonic dry, EE environmental enrichment, EGF epidermal growth factor, ENU N-ethyl-N-nitrosourea, ffrontal, F female, FABP fatty acid binding protein, FGF fibroblast growth factor, Fmr1 fragile × mental retardation 1 gene, FMRP fragile × mental retardation protein, FXS fragile × Syndrome, GLAST glutamate and aspartate transporter, GLU glutamate, GluR glutamate receptor, GLUT glucose transporter, GR glucocorticoid receptor, GRIP glutamate receptor interacting protein, GSK glycoen synthase kinase, GWAS genome wide association studies, HAL haloperidol, HD Huntington's disease, HPC hippocampus, IC imprinted cluster, IL interleukin, ISI interstimulus interval, KI knock-in, KO knock-out, M male, m metabotropic, MDB methyl-CpG binding protein, mo month, NIC nicotine, MPEP 2-methyl-6-(phenylethyl)-pyridine hydrochloride, METH methamphetamine, Mgat N-acetylglucosaminyltransferase, NAA N-acetyl-aspartate, NAAG N-acetyl-alpha L-aspartyl-L-glutamate, NAC nucleus accumbens, NCAM neural cell adhesion molecule, NIS nisoxetine, nNOS neuronal nitric oxide synthase, NO nitric oxide, NPS neuropeptide S (receptor), NPY neuropeptide Y, NR NMDA receptor subunit, NRG neuregulin, NRL neuroigin, ns not significant(ly),NSE neuron-specific enolase, NT neurotensin, OE overexpressor, OXO oxotremorine, PA magnitude of response to pulse alone, PACAP pituitary adenylylate-yclase-activating polypeptide, PD Parkinson's disease, PDE phosphodiesterase, PET-1 plasmacytoma expressed transcript-1, PND postnatal day, PLC phospholipase C, PNS prenatal stress, poly IC polyinosinic; polycytidylic acid, PP prepulse, PPI prepulse inhibition of startle, PPP prepulse potentiation, PS1 presenilin1, PWS Prader-Willi syndrome, QTL quantitative trait locus, QUET quetiapine, RAC raclopride, RAGE receptor for advanced glycation end-products, RasGAP Ras GTPase-activating protein, RE reinin-enhancer, RIS risperidone, SCOP scopolamine, SI social isolation, SNP single nucleotide polymorphism, SOCS suppressor of cytokine signaling, SREB superconserved receptor expressed in brain; STR striatum, SYN synapsin, SynGAP synaptic GTP-ase-activating protein, SZ schizophrenia, TAAR trace amine-associated receptor, TGf transforming growth factor beta, TK tyrosine kinase, TMS transcranial magnetic stimulation, V1b vasopressin receptor 1b, WT wild-type

↓ decreased, ↑ increased, ∅ unchanged, -/- homozygous mice, +/- heterozygous mice

addition to other behavioral abnormalities (Guo et al. 2009). For a review of other neurotransmitter-related genetic mutants [e.g. acetylcholine, serotonin, dopamine (see Table 4)].

In addition to classic neurotransmitters, the important role of neuropeptides in neuropsychiatric disease is becoming more widely appreciated. PPI has been assessed in genetic mutants for many neuropeptides including angiotensin, neurotensin, corticotropin releasing factor (CRF) overexpression, oxytocin, arginine vasopressin, neuropeptide Y, PACAP, and Relaxin-3 (Table 4). Stress physiology, particularly CRF and glucocorticoids, has been implicated in neuropsychiatric disease. Mice overexpressing a CRF transgene exhibit deficits in PPI (at low prepulse intensities), which are normalized by CRF1 antagonists, whereas glucocorticoid receptor antagonists did not reverse the PPI deficit (Groenink et al. 2008). Moreover, several genetic mutants have been created to determine the role of specific proteins in brain processes, including second messenger signaling, synaptic proteins, synaptic vesicles, protein kinases, etc. (Table 3). While the direct link for many of these proteins has not necessarily been established for specific neuropsychiatric diseases, a thorough behavioral evaluation of these mice including an assessment of PPI can help elucidate the functional implications of the target protein. For example, gene deletion of PDE4B, which catalyzes the degradation of cAMP and is widely expressed in brain, is associated with PPI deficits (Siuciak et al. 2008). Decreased presynaptic proteins such as synaptophysin, SNAP-25, and complexin II have been observed in postmortem brains of schizophrenia patients (Harrison and Weinberger 2005). These data, combined with evidence of problems with neuronal migration and abnormal neuronal processes, have led investigators to conceptualize schizophrenia as a disease of functional “dysconnectivity” (Friston and Frith 1995; McGlashan and Hoffman 2000; Weinberger et al. 1992) or a “disorder of the synapse” (Frankle et al. 2003; Mirnics et al. 2001) reviewed in (Harrison and Weinberger 2005). Thus many genetic mutants have been created for specific synaptic proteins (Table 3). For example, SYNII, a vesicle-linked phosphoprotein that plays a role in neuronal development and neurotransmitter release (Cesca et al. 2010), is genetically associated with schizophrenia, decreased in brain of schizophrenia patients, and increased with chronic antipsychotic drug treatment (Chen et al. 2004; Chong et al. 2002). SYNII KO mice exhibit decreased PPI, providing more evidence for the essential role of SYNII in synaptic function and behavior (Dyck et al. 2007, 2009). Similarly, a mutation of SNAP-25, a SNARE protein that is integral to synaptic function and neurotransmitter release, is associated with PPI deficits (Oliver and Davies 2009).

3.3 Genetic Mouse Models as Pharmacological Tools

Because many of the early molecular genetic approaches focused on neurotransmitter receptor genes, several of these mutants have also been used to delineate the receptor mechanisms of drugs that disrupt PPI in order to expand our

understanding of the neurotransmitter systems and neural circuitry underlying deficient PPI (Doherty et al. 2008; Dulawa et al. 1997; Ralph et al. 1999; van den Buuse et al. 2011a) (Table 4). Since most of these genetic mutants were built on rat pharmacology, we must keep in mind several important species differences between the pharmacology of mouse versus rat PPI (e.g. differential effects of dopamine D1 and D2 receptors, 5-HT agonists, etc.; Powell et al. 2009). Pharmacological disruptions of PPI and their reversal with antipsychotics have been better characterized in rats than in mice, although the literature on PPI pharmacology in mice is rapidly increasing (Swerdlow et al. 2008). In order to use mutant mouse models to examine the receptor mechanisms for alterations in PPI, more complete dose response studies are warranted in mice. Nevertheless, drugs that both impair and improve PPI continue to be investigated in genetic mutants. This approach is particularly useful in determining the functional role of a receptor (e.g. does the gene deletion alter the response to a psychotomimetic drug) and in determining the receptor mechanisms for a drug effect when either receptor-selective drugs are not available or when novel drugs are being evaluated. For example, amphetamine disrupts PPI in WT mice, but not in mice with gene deletions of DDO, an enzyme that degrades D-aspartate (Errico et al. 2008), suggesting a functional role of DDO in PPI disruptions. Interestingly, oxytocin KO mice show an increased sensitivity to the PPI-disruptive effects of PCP (Caldwell et al. 2009), suggesting that endogenous oxytocin may protect against PCP-induced disruptions of PPI, a finding that supports the clinical data showing putative antipsychotic properties of oxytocin (Feifel et al. 2010a). A similar approach was used to show protective properties of nNOS, which synthesizes NO from L-arginine, against PPI-induced disruptions with the dopamine D1 agonist SKF81297 (Tanda et al. 2009).

3.4 Genetic Models of Candidate Genes for Neuropsychiatric Diseases

As the field of neuropsychiatric genetics has grown, several gene targets have been identified consistently for particular disorders and have thus been modified in mouse models through gene deletion, the addition of a transgene, etc. When evaluating candidate genes for mouse models, one should consider that many single nucleotide polymorphisms (SNPs) identified in genetic screens for neuropsychiatric disease involve mutations in introns of genes. Thus, it is very important to consider (1) whether or not functional mutations in the gene have been identified before embarking on mutant mouse models, and (2) the impact of species-specific alterations in gene function in the mutant mouse (Low and Hardy 2007). Table 1 summarizes genetic mouse models of vulnerability genes for schizophrenia, and Table 2 summarizes genetic models of other neuropsychiatric disorders in which PPI deficits have been observed. Two approaches in human

studies have increased our understanding of the genetics of sensorimotor gating (1) assessing the relationship between polymorphisms in a target gene (e.g. NRG1, COMT) and PPI levels in healthy volunteers and (2) endophenotype-based genetic studies of schizophrenia (e.g. Consortium on the Genetics of Schizophrenia; COGS). For example, recent studies suggest that PPI is associated with polymorphisms in CHRNA3 (Petrovsky et al. 2010), neuregulin 1 (Roussos et al. 2011), and COMT (Giakoumaki et al. 2008; Quednow et al. 2008; Roussos et al. 2008) genes. Some of these same genes (e.g. NRG1, COMT) are also associated with prepulse inhibition in the COGS data set (Greenwood et al. 2011).

Several different mutants for neuregulin 1 isoforms have been created with varying effects on behavior and neuroanatomy (reviewed in Duffy et al. 2008; O'Tuathaigh et al. 2007). Overall, the PPI phenotype in NRG1 mutants has been inconsistent (O'Tuathaigh et al. 2011, 2009). The Type III NRG1 heterozygote mouse has shown abnormalities in multiple neuroanatomical and behavioral endpoints relevant to schizophrenia, including PPI deficits that are improved with chronic nicotine administration (Chen et al. 2008). CNS-specific ERBB2/B4 KO mice exhibit PPI deficits, which are attenuated by the antipsychotic drug clozapine (Barros et al. 2009). Conditional knockouts with better temporal and regional specificity have allowed for evaluation of more specific roles of NRG1 and its receptors. For example, deletion of ErbB4 selectively in PV interneurons produces PPI deficits, suggesting a functional interaction between NRG1 and the integrity of PV interneurons (Wen et al. 2010).

The COMT Val allele is associated with reduced P300 and P50 ERPs (Gallinat et al. 2003; Golimbet et al. 2006; Lu et al. 2007) and reduced PPI (Quednow et al. 2008; Roussos et al. 2008), presumably due to decreased dopamine function in the prefrontal cortex. There have been several mice created to examine the effects of COMT gene on schizophrenia relevant phenotypes, COMT KO mice (Gogos et al. 1998; Papaleo et al. 2008; Yavich et al. 2007), COMT Tg mice that overexpress the human COMT-Val polymorphism (Papaleo et al. 2008), and S-COMT isoform KO (Tammimäki et al. 2010). Thus far, none of the COMT mouse models have shown robust deficits in PPI (Table 1), although other behaviors probing prefrontal cortex such as the attentional set shifting task (ASST) are altered in the COMT-Val TG mice (Papaleo et al. 2008).

The disrupted in Schizophrenia 1 (DISC1) gene has shown association with schizophrenia and behavioral and neuroanatomical biomarkers for schizophrenia (for review see Mackie et al. 2007; Porteous et al. 2006). DISC1 is associated with schizophrenia neuropathology (Cannon et al. 2005; Callicott et al. 2005), abnormal P300 ERP (Blackwood et al. 2001), and neurocognitive function (e.g. learning and memory; Burdick et al. 2005; Cannon et al. 2005; Hennah et al. 2005). The data on the dominant negative DISC1 models have reported both decreased PPI (Hikida et al. 2007) and no change in PPI (Ibi et al. 2010); whereas, the DISC1L100P mutations have shown more consistent decreases in PPI (Lipina et al. 2011; Lipina et al. 2010). The new technology of in utero gene transfer, allows for the knockdown of DISC1 into the mouse brain during early embryonic development.

Mice with in utero knockdown of DISC1 show reduced PPI when tested in adulthood (Niwa et al. 2010). As we have discussed previously, modeling the human DISC1 mutation in mice is difficult because most of the models have assumed that the mutation in neuropsychiatric disease is due to the formation of a truncated DISC1 protein (Powell et al. 2009). Another gene, Boymaw, is also disrupted on chromosome 11 in the Scottish family. Two fusion transcripts are generated between DISC1 and Boymaw genes in the translocation carriers in the Scottish schizophrenia family (Zhou et al. 2008). Thus, expressing the two fusion transcripts may be a better strategy for creating mutant DISC1 mice for the study of neuropsychiatric disorders. The increasing identification of copy number variants (CNVs) associated with schizophrenia and large-scale GWAS studies identifying novel candidate genes will lead to even greater potential to create new mouse models (see Tables for examples). Additionally, PPI is being used more widely to characterize mutant mouse models of candidate genes for other neuropsychiatric disorders such as autism and Huntington's Disease (Table 2).

3.5 Phenotype-Based Models Revealing the Function of Genes

PPI deficits have also been used in phenotype-to-genotype approaches, or “forward genetic” screens such as ENU mutagenesis, QTL on strain crosses, and QTL with selective breeding. For example, using F2 mice from a C57BL/6 x C3h/HE cross, QTL identified 6 loci for PPI, including the gene FABP7, which has been linked to NMDA receptor function (Watanabe et al. 2007). In a study comparing A/J, C57Bl6/J, and congenic crosses thereof (recombinant congenic mouse strains) (Torkamanzehi et al. 2008) found some common markers for startle but not PPI compared to previous studies (Jooper et al. 2002). Selective breeding for high and low levels of PPI has identified QTLs on chromosomes 11 and 16 in low PPI versus high PPI mouse lines (Hitzemann et al. 2008; Schwabe et al. 2007). An ENU mutagenesis screen produced 2 PPI mutants (Cook et al. 2007). One major problem with these approaches is that many of the PPI mutants, particularly with ENU mutagenesis, will likely be deaf or have some degree of hearing loss. In the (Torkamanzehi et al. 2008) study on crosses of A/J, C57Bl6/J and congenic crosses, light prepulses and tactile startle pulses were used to measure PPI to avoid this potential confound (but airpuff startle also has an acoustic component to it).

The field of molecular genetics continues to produce new mutant mouse models with unknown effects on the central nervous system. Many of these mutants have behavioral abnormalities that have been observed anecdotally. Phenotypic characterization of mice with mutations of genes heretofore not known to be relevant to CNS disease (some examples found in Tables 1–5) may reveal novel genes for further study of neuropsychiatric genetics. Although these approaches were gene-based, some have the capacity to identify novel genes for a particular disease, which is why we have included these examples here. Two examples of the way a novel gene of relevance to psychiatric conditions can be discovered through the

Table 5 Phenotype-based approaches

References	Mouse strain, sex	Model description/ background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
<i>QTL approaches</i>					
Cook et al. (2007)	ENU-mutagenesis-induced variants	Genome-wide screening for neurobehavioral phenotypes, including PPI	2 PPI mutants with ↓PPI		
Watanabe et al. (2007)	F2 mice from C57BL/6 × C3H/HE crosses, M, & F	Screening for PPI and startle phenotypes	6 loci for PPI, 6 for startle and four for startle latency were identified, incl. FABP7 (linked to NMDAR function (↓PPI & ↓PA latency)		
Hitzemann et al. (2008)	C57BL/6J, DBA/2J, BALBc/J and L/PJ crosses, M & F	Selective breeding for high and low PPI	∅PPI & PA in M versus F and no correlation between PPI & PA initially. Breeding line × generation effects on PPI (low vs. high PPI line) after five generations. No line × generation effects on PA, but ↑PA in low PPI line versus ↓PA in high PPI line (main effect only). QTL on chromosomes 11 & 16 in low PPI versus high PPI line	METH (Line × dose interaction. ↓PPI in high PPI line, but ∅PPI in low PPI line at highest METH dose). Diz (↓PPI; main effect of dose only, no line × dose interaction)	HAL(↑PPI; main effect of dose only, no line × dose interaction)
Torkamanzehi et al. (2008)	A/J, C57Bl6/J and congenic crosses thereof, M	Screening for PPI and PA phenotypes using light prepulses and tactile startle pulses	Comparable PPI, but not PA in parental strains. Significant variation for congenic strains for PA for both BG and for PPI in C57Bl6 BG strains. Common markers with acoustic PA, but not acoustic PPI from previous study (Joerber et al. 2002)		
Samocha et al. (2010)	LG/J × SM/J F ₂ cross & F ₃₄ advanced intercross line (AIL), M, F	PPI and PA phenotyping followed by QTL in F ₂ generation and genotyped F ₃₄ line at 3000 SNP markers	QTLs found at chromosome 12 for all PP intensities; QTLs for PP6 & PP12 on chromosome 7; QTLs on chromosomes 7 & 17 for startle response; QTLs on chromosome 4 for startle habituation; AIL mice reduced size of some QTLs to less than 5 cm		

(continued)

Table 5 (continued)

References	Mouse strain, sex	Model description/ background/rationale	Basal PPI	Effects of drugs or manipulations typically used to induce PPI-deficits	Effects of (presumed) antipsychotics/other treatments
Verma et al. (2008)	Ckr mouse, M, F	<i>Insertional mutagenesis</i> <i>Ckr</i> serendipitous mutation resulted in mouse with abnormal circling behavior	↓PPI (modest) at all PP intensities in Ckr versus (+/- & WT); ∅PA in Ckr versus +/- or WT		CLO (↑PPI in Ckr; ∅PPI in WT); RIS (∅PPI in Ckr & WT), HAL (∅PPI in Ckr & WT); PA data not shown
<p><i>Abbreviations:</i> 5-HT serotonin, AAV adeno-associated virus, Aβ amyloid β- peptide, ACE angiotensin converting enzyme, ACH acetylcholine (receptor), AD Alzheimer's disease, ADX adrenalectomy, AIL advanced intercross line, AMP amphetamine, AMY amygdala, APD antipsychotic drug, APP amyloid precursor protein, ARIP arripiprazole, APO apomorphine, AT angiotensin, BAC bacterial artificial chromosome, BACE β-site APP cleaving enzyme, BD bipolar disorder, BG background, CalMKIV calcium-calmodulin-dependent protein kinase IV, cAMP cyclic adenosine monophosphate, Ckr chakragati, CLO clozapine, CNS central nervous system, COC cocaine, COMT catechol-O-methyltransferase, CORT corticosterone, CRF corticotropin releasing factor, CTR controls, CTX cortex, DA dopamine (receptor), DAT dopamine transporter, dB decibel, DCC deleted in colorectal cancer, DIAZ diazepam, DIZ dizocipiline, DN dominant-negative, DDO D-aspartate oxidase, E embryonic day, EE environmental enrichment, EGF epidermal growth factor, ENU N-ethyl-N-nitrosourea, f frontal, F female, FABP fatty acid binding protein, FGF fibroblast growth factor, <i>Fmr1</i> fragile × mental retardation 1 gene, <i>FMRP</i> fragile × mental retardation protein, <i>FXS</i> fragile × Syndrome, <i>GLAST</i> glutamate and aspartate transporter, <i>GLU</i> glutamate receptor, <i>GLUT</i> glucose transporter, <i>GR</i> glucocorticoid receptor, <i>GRIP</i> glutamate receptor interacting protein, <i>GSK</i> glycogen synthase kinase, <i>GWAS</i> genome wide association studies, HAL haloperidol, HD Huntington's disease, HPC hippocampus, IC imprinted cluster, IL interleukin, ISI interstimulus interval, KI knock-in, KO knock-out, M male, m metabotropic, <i>MDDB</i> methyl-CpG binding protein, <i>mo</i> month, <i>NIC</i> nicotine, <i>MPEP</i> 2-methyl-6-(phenylethyl)-pyridine hydrochloride, <i>METH</i> metamphetamine, <i>Mgat</i> N-acetylglucosaminyltransferase, <i>NAA</i> N-acetyl-aspartate, <i>NAAG</i> N-acetyl-alpha L-aspartyl-L-glutamate, <i>NAC</i> nucleus accumbens, <i>NCAM</i> neural cell adhesion molecule, <i>NIS</i> nitoxetine, <i>nNOS</i> neuronal nitric oxide synthase, <i>NO</i> nitric oxide, <i>NPS</i> neuropeptide S (receptor), <i>NPY</i> neuropeptide Y, <i>NR</i> NMDA receptor subunit, <i>NRG</i> neuregulin, <i>NRL</i> neuroigin, <i>ns</i> not significant(y), <i>NSE</i> neuron-specific enolase, <i>NT</i> neurotensin, <i>OE</i> overexpressor, <i>OXO</i> oxotremorine, <i>PA</i> magnitude of response to pulse alone, <i>PACAP</i> pituitary adenylylate-cyclase-activating polypeptide, <i>PD</i> Parkinson's disease, <i>PDE</i> phosphodiesterase, <i>PET-1</i> plasmocytoma expressed transcript-1, <i>PND</i> postnatal day, <i>PLC</i> phospholipase C, <i>PNS</i> prenatal stress, poly IC polyinosinic: polycytidylic acid, <i>PP</i> prepulse, <i>PP1</i> prepulse inhibition of startle, <i>PPP</i> prepulse potentiation, <i>PS1</i> presenilin 1, <i>PWS</i> Prader-Willi syndrome, <i>QTL</i> quantitative trait locus, <i>QUET</i> quetiapine, <i>RAC</i> raclopride, <i>RAGE</i> receptor for advanced glycation end-products, <i>RasGAP</i> Ras GTPase-activating protein, <i>RE</i> renin-enhancer, <i>RIS</i> risperidone, <i>SCOP</i> scopolamine, <i>SI</i> social isolation, <i>SNP</i> single nucleotide polymorphism, <i>SOCS</i> suppressor of cytokine signaling; <i>SREB</i> superconserved receptor expressed in brain; <i>STR</i> striatum, <i>SYN</i> synapsin, <i>SynGAP</i> synaptic GTP-ase-activating protein, <i>SZ</i> schizophrenia, <i>TAAAR</i> trace amine-associated receptor, <i>TG</i> transgenic, <i>TGF-β</i> transforming growth factor beta, <i>TK</i> tyrosine kinase, <i>TMS</i> transcranial magnetic stimulation, <i>V1b</i> vasopressin receptor 1b, <i>WT</i> wild-type</p> <p>↓ decreased, ↑ increased, ∅ unchanged, -/- homozygous mice, +/- heterozygous mice</p>					

creation of a mutant mouse are the SP4 and the SREB2 genes. SP4 is a member of the Sp1 family of transcription factors. Hypomorphic Sp4 mice showed vacuolization in the hippocampus, age-dependent decrease in neurotrophin-3 expression in the dentate granule cells, and robust deficits in both PPI and contextual memory (Zhou et al. 2004). These studies revealed a novel Sp4 pathway that is important for hippocampal development and essential to many behaviors, including PPI, relevant to schizophrenia (Zhou et al. 2004). Zhou et al. (2009) have gone on to examine the role of the human SP4 gene in schizophrenia and bipolar disorder. Several SNPs from the human SP4 gene are found to associate with both bipolar disorder and schizophrenia in both Caucasian and Chinese samples. This work represents an example in which a PPI phenotype, in combination with other behavioral abnormalities, suggested the association of this gene with neuropsychiatric disorders. A similar finding was also observed with SREB2 Tg mice, which display PPI deficits. Follow-up genetic studies in schizophrenia found a genetic association between SREB2 and schizophrenia (Matsumoto et al. 2008).

4 Discussion

Mutant mouse models of schizophrenia provide a unique way to assess the function of a susceptibility gene, test hypotheses about the pathophysiology of disease, address receptor mechanisms of drugs, and generate hypotheses about the function of relatively unknown genes. In this review, we provided a comprehensive overview of PPI deficits in genetic models since July, 2007 and elaborate on specific examples where appropriate. As illustrated in Tables 1–5, perhaps the most notable advances in genetic approaches to sensorimotor gating over the last few years have come from candidate genes for schizophrenia and other neuropsychiatric diseases exhibiting PPI deficits, genes involved in basic synaptic processes and receptor signaling, and conditional genetic approaches that help in understanding the dynamic function of specific genes both regionally and temporally. In particular, since our last reviews (Powell et al. 2009; Swerdlow et al. 2008), many genetic mutants of proteins involved in synaptic plasticity, second messenger systems, calcium signaling, etc. have been developed. In this case, PPI is used as a functional measure of sensorimotor processing in models of basic brain development. Whether or not these cellular processes turn out to be relevant for a specific disease such as schizophrenia remains to be determined. Thus far, most models are still in the “characterization” phase—testing multiple behavioral/cognitive constructs that are deficient across neuropsychiatric disorders (e.g. sensorimotor gating, attention, social interaction, learning, and memory, etc.). Few models, however, have shown any predictive power for drug development. Perhaps this new wave of mutants based on susceptibility genes, synaptic function, or brain development, as opposed to genetic manipulation based on mechanism of action of antipsychotics or psychotomimetics, will be better models to lead the field forward in medication development for mental illness. As Moore (2010)

argues, too many models that are not based on either “etiologic or pathogenic” theories, may result in too many “false positives” in drug screens. Rather, refined models that more closely mimic the etiological risk factors and/or neuropathology of disease (e.g. schizophrenia) may generate more predictive models for drug development (Moore 2010). While this approach might be very useful if the goal is to use the mutant mice for drug development, we have illustrated the benefits of careful behavioral characterization in genetic models of basic brain processes as well. As mentioned above, it is unlikely that all aspects of a heterogeneous disease will be recapitulated in another species with a genetic mutation. Investigators must rely on convergence of behavioral and neuroanatomical or neurochemical data in a given mutant mouse to support clinical data on the link between the candidate gene and disease. No single phenotype such as PPI should be considered as being either necessary or sufficient to substantiate a model as having relevance to neuropsychiatric disease.

Animal studies addressing neuropsychiatric disease would benefit greatly from more neurobiologically based biomarkers for these disorders. Such an approach has been taken in the CNTRICS initiative, in an explicit attempt to incorporate more cognitive neuroscience-based testing into treatment trials of putative cognitive therapies for schizophrenia. Along the same lines, genetic studies of schizophrenia have focused on psychophysiological endophenotypes such as PPI instead of the broader, more heterogeneous diagnosis of schizophrenia. In fact, many laboratories are now using PPI as an endophenotype in genetic studies of schizophrenia (Braff et al. 2007; Greenwood et al. 2007; Greenwood et al. 2011; Hokyo et al. 2010). Some of these genetic studies have generated further support for a genetic contribution to PPI (Greenwood et al. 2007, 2011), and other studies have suggested that genetic variants in COMT (Quednow et al. 2008; Roussos et al. 2008), *CHRNA3* (Petrovsky et al. 2010), and neuregulin 1 (Roussos et al. 2011) directly affect PPI levels (as reviewed above). Thus, as human studies materialize with more neurobiologically defined behavioral measures, the ability to translate these measures or “endophenotypes” into animal models should improve dramatically. PPI in genetic models offers a behavioral endpoint that has shown predictive validity in rat pharmacological models, cross-species homology with the same measure in humans, and alterations in response to genetic manipulations implicated in the pathogenesis of schizophrenia. While these mutant mouse models are not without shortcomings, they offer some of the best attempts at etiological models that are possible in rodents. Merging the genetic etiological models with a second hit approach may strengthen some of the mutant mouse models. Hence, consideration for other factors, such as the importance of environmental risk factors (e.g. prenatal infection) and the role of epigenetics (e.g. DNA methylation) in the etiology of schizophrenia, should also be incorporated with genetic models.

Acknowledgments This work was supported by grants from the National Institute of Mental Health (R01MH042228, R01MH052885, R01MH091407) and by the Veterans Affairs VISN 22 Mental Illness Research, Education, and Clinical Center.

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Part II
Clinical Behavioral Genetics

Applications of Second Generation Sequencing Technologies in Complex Disorders

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Abstract Second generation sequencing (2ndGS) technologies generate unprecedented amounts of sequence data very rapidly and at relatively limited costs, allowing the sequence of a human genome to be completed in a few weeks. The principle is on the basis of generating millions of relatively short reads from amplified single DNA fragments using iterative cycles of nucleotide extensions. However, the data generated on this scale present new challenges in interpretation, data analysis and data management. 2ndGS technologies are becoming widespread and are profoundly impacting biomedical research. Common applications include whole-genome sequencing, target resequencing, characterization of structural and copy number variation, profiling epigenetic modifications, transcriptome sequencing and identification of infectious agents. New methodologies and instruments that will enable to sequence the complete human genome in less than a day at a cost of less than \$1,000 are currently in development.

Keywords Sequencing technologies · Bioinformatics · Personalized genomics

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1 Sequencing Technologies

In 1977 two very different methods were presented for directly sequencing DNA: the Maxam–Gilbert chemical cleavage method (Maxam and Gilbert 1977) and the Sanger chain-termination method (Sanger et al. 1977). The Sanger sequencing method relies on base-specific termination of the growing chain during DNA synthesis caused by the incorporation of dideoxy-nucleotides (ddNTPs) that lack the hydroxyl group necessary for DNA chain elongation. The labeled DNA fragments are then separated according to their length on a gel matrix. Sanger and Gilbert shared the Nobel prize in 1980. Sanger’s method became widely used first in slab-gel implementations with radioactive detection and later in capillary electrophoretic systems using fluorescent-labeled ddNTPs. It revolutionized the genetics field and eventually led to the sequencing of the human (Lander et al. 2001; Venter et al. 2001) and many other genomes. However, the effort to sequence the human genome required many hundreds of automated capillary sequencers over a ten-year period and cost over \$10 M. At the present time, automated capillary sequencing instruments with up to 384 capillaries can generate around 1 Mbase of sequence every 24 h.

In 2005 there was a paradigm shift in DNA sequencing with the introduction of the first second generation sequencing (2ndGS) technologies (for a review see Ansorge 2009). While Sanger sequencing relies on the individual analysis of DNA fragments (one fragment per capillary), second generation sequencers are able to analyze millions of DNA templates in parallel (Fig. 1, Table 1). This is achieved first by placing single DNA molecules into individual and miniaturized reaction vessels for amplification. In emulsion PCR, template DNA molecules are individually captured on beads, and compartmentalized and clonally amplified in droplets within an oil emulsion (Diehl et al. 2006). An alternative approach is to spread out the DNA fragments on a planar surface and generate clonally amplified

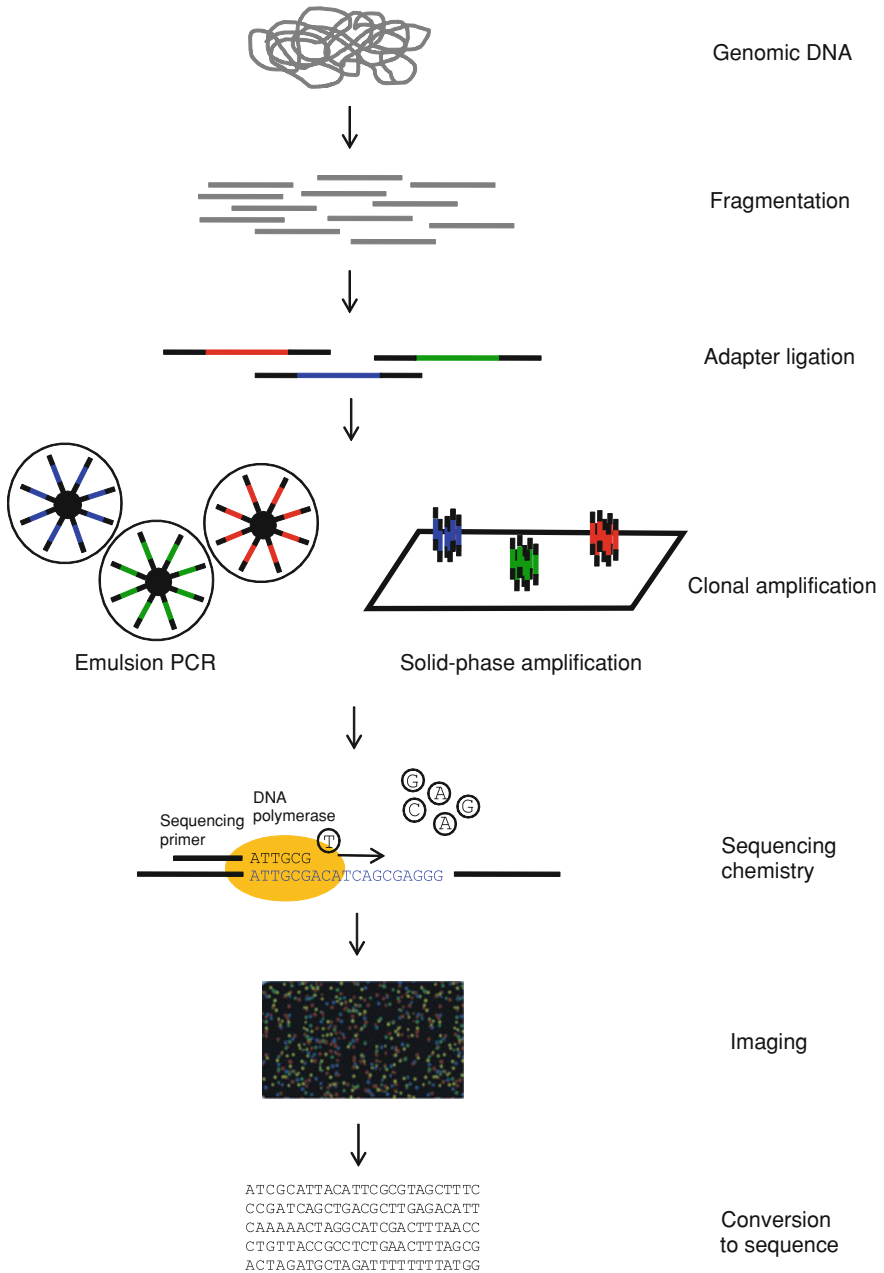


Fig. 1 Schematic representation of the principles of 2ndGS technologies. Genomic DNA (gray) is randomly sheared and ligated to universal adapter sequences (black). Clonal amplification of the fragments is achieved either in droplets within an oil emulsion (emulsion PCR; left) or on the surface of a solid substrate (solid-phase amplification; right). The sequencing process consists of iterative cycles of enzyme-driven nucleotide extension and imaging-based data acquisition

Table 1 Comparison of sequencing platforms

	ABI3730xl (Applied Biosystems)	GS FLX (454, Roche)	HiSeq2000 (Solexa, Illumina)	5500xl SOLiD (Life Technologies)	PacBio RS (Pacific Biosciences)
Amplification approach	PCR/ cloning	Emulsion PCR	Solid-phase amplification	Emulsion PCR	None
Sequencing chemistry	Sanger method	Pyrosequencing sequencing	Reversible dye terminators Single-molecule real-time sequencing	Ligation based	
Reads per run	1,536	1 M	3,000 M ^a	2,400 M ^a	NA
Bases per read	850 bp	700 bp	2 × 100 bp	2 × 60 bp	1,000 bp
Output per run	1.3 Mb	700 Mb	600 Gb ^a	300 Gb ^a	NA
Time per run	1.5 days	1 day	11 days	7 days	<1 day

^a From two flowcells or slides

templates in situ (Bentley et al. 2008). Once the clonal amplification of the original templates is completed, millions of DNA “polymerase clones” or “colonies” are subjected to a sequencing chemistry in a microfluidic device coupled with a high-resolution imaging system. For each DNA “colony”, the resulting images are converted into sequence reads.

1.1 Pyrosequencing (454-Roche-IonTorrent)

The Roche/454 system (www.454.com) was the first 2ndGS system released to the market. The templates are amplified by emulsion PCR and the sequences are obtained by iterative pyrosequencing (Magulies et al. 2005). Pyrosequencing (Ronaghi et al. 1996) is a sequencing-by-synthesis method that relies on an enzymatic cascade in which the release of pyrophosphate during the incorporation of a nucleotide drives a chemiluminescent reaction that can be detected with a high-resolution charge-coupled device (CCD) camera. It uses regular deoxynucleotides that are flowed sequentially in a known order. The amount of light emitted is proportional to the number of base incorporations. Because dNTPs are used, homopolymers in the template DNA are the main source of errors due to the difficulty to unambiguously assign the number of bases incorporated. The current 454/Roche platform provides reads that are several hundred bases, more than any other 2ndGS technology. Roche markets two different systems, the Genome Sequencer (GS) FLX instrument that can generate about 0.7 Gbase of sequence per run, and the GS Junior that produces about 35 Mbases (Table 1).

Recently Ion Torrent introduced an instrument that uses the same underlying methods as the Roche system for clonal amplification and parallel sequencing but

with a different detection method (www.iontorrent.com). Rather than detecting chemiluminescence generated through an enzymatic cascade, the Ion Torrent system measures directly the pH change caused by the release of a positively charged hydrogen ion during each base incorporation. The system uses semiconductor technology that converts chemical information into digital, without any optics. The specification that currently is being provided moves this instrument into the realm of the Roche FLX junior.

1.2 Sequencing with Reversible Terminators (Illumina)

The first Solexa sequencing platform (Genome Analyzer 1G) was commercialized in late 2006 and Illumina acquired the company soon after the launch of this instrument (www.illumina.com). In this technology templates are amplified in near vicinity by solid-surface bridge amplification using a microfluidic cluster station (Bentley et al. 2008) (Fig. 1). Sequencing proceeds on the same surface using four reversible terminator nucleotides each labeled with a different fluorescent dye. The identity of each incorporated nucleotide is determined by recording the fluorescence with a CCD camera. After each imaging cycle the fluorescent moiety is cleaved from the base and the 3' end is regenerated to enable next nucleotide incorporation. The technology has undergone several technical and chemical upgrades to give read lengths over 100 bases. The new version of the Illumina instrument, the HiSeq2000, can run two slides simultaneously and generate over 600 Gbases of sequence in 11 days of operation (Table 1). This equates to 30x coverage of six human genomes in a single run.

1.3 Sequencing by Ligation (Applied Biosystems)

Applied Biosystems introduced the SOLiD system in late 2007 (<http://www.appliedbiosystems.com/absite/us/en/home/applications-technologies/solid-next-generation-sequencing.html>). As for the Roche/454 system, this system uses emulsion PCR for clonal amplification. The key distinguishing feature of this platform is the sequencing chemistry that uses a DNA ligase rather than a DNA polymerase (for a review see Ansorge 2009). A set of four fluorescently labeled octamers whose fourth and fifth bases are encoded by the attached fluorescent group are hybridized to the template. The probes that match the templates are then ligated to a primer oligonucleotide in a template-directed reaction. The fluorescent readout identifies the fixed bases. A cleavage reaction removes the last four bases with the fluorescent tag and hybridization and ligation cycles are repeated to determine in successive cycles bases 9 and 10, 14 and 15 and so on. After completion of a defined number of cycles, a new primer is annealed that is offset from the first primer by one base. The ligation procedure is repeated to give the

sequence of bases 3 and 4, 8 and 9, and 13 and 14. The same procedure is repeated for the two-base, three-base and four-base offset primers, which completes the sequence. Because in the whole process each base is interrogated twice, the SOLiD technology shows the greatest accuracy. The latest version of the SOLiD instrument, 5500xl, can generate 60 base reads and process two slides simultaneously to produce more than 300 Gbases of sequence in a 7-day run (Table 1).

All of the three 2ndGS systems described above can be used with paired-end protocols that enable the sequence to be obtained from the two extremities of the templates (for a review see Holt and Jones 2008). Paired-end protocols partially compensate for the shortcoming of short read lengths of these systems compared to Sanger sequencing by providing linking information. Illumina offers a paired-end protocol to read 2×100 bases at a distance of up to 600 bases and a mate-pair procedure in which the insert size can be up to 5 kbases.

1.4 Single-Molecule Sequencing (Pacific Biosciences)

A new system from Pacific Biosciences was introduced in 2011 (www.pacificbiosciences.com). It is considered the first of a third generation of DNA sequencing instruments because it can sequence single DNA fragments without the need for PCR amplification. Single molecules of DNA polymerase are immobilized at the bottom of nanometer scale aperture chambers called zero-mode waveguides (ZMWs) (Korlach et al. 2010). The template-directed primer extension reaction with nucleotides labeled with fluorescence at the end of the phosphate moiety is monitored in real time. The zero-mode wave guides restrict the observation to the volume containing the DNA polymerase. This dramatically reduces the perturbation due to background fluorescence of the labeled nucleotides that are not involved in the nucleotide incorporation reaction. Because the individual base incorporation error rate is quite high, DNA molecules are circularized and read several times to generate a consensus sequence. Reads of several kbases in length have been achieved by the developers, although total throughput of the system is still in the order of Mbases.

1.5 Novel Technologies in Development

There are several companies and academic groups working in the development of new methodologies and instruments to enable sequencing of the complete human genome in less than a day at a cost of less than \$1,000 (for a review see Schadt et al. 2010). Oxford Nanopore Technologies is developing a nanopore-based sequencing platform (www.nanoporetech.com). The principle of the method is the detection of nucleotides as they are driven by an electrophoretic field pass through an α -hemolysin membrane nanopore that is coupled with an exonuclease.

The change in the membrane potential at the nanopore is used to determine the identity of the nucleotide passing through. The system offers the potential to identify individual nucleotide modifications including 5-methylcytosine.

The unprecedented resolution of the new generation of sequencing technologies will allow high-throughput single cell DNA and RNA sequencing in the near future. The underlying concept is that a target sequence of DNA is generated in all of the cells of a histological section simultaneously. Several studies have already shown the feasibility of sequencing the transcriptome of individual cells with current instruments using whole-genome or transcriptome amplification procedures (Tang et al. 2010).

Current sequencing methods do not provide long-range haplotype information than can be very important for applications such as disease mapping or population history analysis. Molecular procedures for the determination of haplotypes will become more important when the methods for the determination of simple sequence motifs are well established. There are several approaches to stretch and immobilize long lengths of single genomic DNA molecules on a surface, allowing molecular sequencing tests to be carried out in situ that will provide haplotype information.

1.6 Comparison of Cost, Throughput and Accuracy

The three second generation platforms described in this chapter have their own advantages and disadvantages. Currently the HiSeq2000 and 5500xl SOLiD platforms have the higher sequencing capacity, 25–50 Gbases per day, while the GS FLX can generate up to 1 Gbase per day (Table 1). In addition, the reagent cost per Gbase on the GS FLX is more than two orders of magnitude higher than on the other platforms. However, these numbers have to be taken with caution because the rapid increase in throughput at constant reagent consumption has raised the importance of other cost components such as instrument depreciation, labor and data management that need to be considered.

The GS FLX system provides intermediate read length, with an average of 700 bases. In contrast, the 5500xl SOLiD and HiSeq2000 platforms read many more DNA molecules in parallel (up to 3000 million) but have shorter read lengths (up to 100 bp) (Table 1). This would be a severe limitation if the companies were not offering paired-end reads, which facilitate their mapping onto the reference sequence.

Error rates largely dictate the read length limits of different sequencing platforms. However, the different systems are difficult to compare in terms of accuracy because base quality values are not comparable across platforms. Raw accuracies of >99.94, >99 and >98.5% are reported in 5500xl SOLiD, GS FLX and HiSeq2000 specifications, respectively. In the GS FLX platform, the most common errors are insertions and deletions in homopolymer segments. By contrast, the 5500xl SOLiD and HiSeq2000 instruments have a very distinct error profile, with

the vast majority of the sequencing errors being base substitutions. The Life-Technologies two-base encoding system shows the highest individual base call accuracy, although it needs to be pointed out that the method uses the reference sequence to make corrections to the raw base calls. At present, the error distribution of third generation technologies based on single-molecule sequencing is much higher than that of PCR-based methods.

As with genotyping technologies, it is essential to use the right 2ndGS instrument for the application in hand. For applications requiring long reads, such as metagenomic sequencing, and *de novo* sequencing of genomes, GS FLX is the technology of choice. The long reads guarantee best possible assembly of the data. The 5500xl SOLiD and HiSeq2000 systems work better for tag counting applications such as mRNA and smallRNA profiling and identification of DNA–protein binding sites, because they provide very high number of individual reads with just enough sequence to map them to the reference genome. Because of the lower reagent cost, HiSeq 2000 and 5500xl SOLiD are also the ideal solution for resequencing of genomes or exomes where reference sequences are available. The use of the SOLiD platform with the very accurate two-base encoding system is recommended for low coverage projects and for detecting rare variants and somatic mutations. In some cases, the use of various 2ndGS platforms is recommended to take the advantages of each technology: error profile, read length, paired-end reads, number of tags, etc.

2 Informatics and Bioinformatics for Second Generation Sequencing

The use of 2ndGS technologies that produce hundreds of millions of short reads brings with it a collection of informatics and bioinformatics challenges. The most immediate issue is that of data storage, with even small projects needing tens of terabytes of storage, and sequencing centers having storage requirements in the petabyte range. The next concerns the assessment of the quality of the produced sequence data. Each sequencing platform produces its own quality metrics, but it is often advisable to add additional quality checks to check the consistency of the results. The final challenge that will be addressed in this chapter is that of the primary data analysis, which will generally include assembly and/or alignment of the individual sequence reads followed by subsequent analyses that will depend on the particular sequencing experiment being performed. A survey of all the analyses used for the different types of sequencing experiments that have been described using 2ndGS technologies is beyond the scope of this chapter, but a short description of variant calling for the case of the resequencing of genomic data will be given. A list of available 2ndGS software has not been included as such lists become quickly out of date with the development of new packages and the improvement of existing packages. Up-to-date information on analysis packages

can be found from online forums such as SEQanswers (<http://www.seqanswers.com>), while the focus of this chapter is on the important features that such packages should possess, allowing the reader to make their own selection.

2.1 Data Storage

The principal data produced by the sequencers are the sequence reads and associated quality measures, which alone can require a large amount of storage space. For example, WGS of a human genome at 30× coverage will require almost 100 Gbases of sequence. The common data formats used for this type of data require 2 bytes per base (1 for the base and 1 for the quality) with some extra to store the read identity, so 100 Gbases of sequence will require >200 Gbytes of storage, although this can be reduced to <50 Gbytes using data compression techniques. The sequence reads, however, are only a part of the story, and to get full picture of the storage requirements it is necessary to look at the complete analysis pipeline from the initial data produced by the sequencers (depending on the platform these could be the sequence reads or could be unprocessed data such as images) to the final products of the pipeline (i.e., called variants). Each stage of the pipeline will require space to calculate and store the results of the analysis, and a working space of at least several Tbytes will typically be required to work on WGS data from higher organisms.

An important decision to be made that has a large impact on the total storage requirements is how long the results files from different stages of the pipeline should be kept. Many of the stages in the analysis pipeline (particularly the early stages) involve data reduction and some consequent data loss, so that it is often not possible to take the results of a particular analysis stage and recreate the results of an earlier stage. A balance must therefore be struck between the cost of recreating the data from a particular stage if necessary, and the costs of storing them.

2.2 Checks of Sequence Quality and Integrity

Current 2ndGS platforms provide measures of sequencing quality for each sequenced base. Base calling is generally done by calculating the probability that the true base at a given read position is A, C, G or T, and selecting the most likely base at each position. A common measure of quality is based on the negative of the log ratio of the probability of the most likely base to that of the next most likely base. A low quality score indicates that the probability of the called base being incorrect is high, whereas a high quality score indicates that the probability of a false call is low (e.g., an Illumina quality score of 30 means that the probability that this base is called incorrect is 0.01%).

It is important to keep account of the quality scores, both as a measure of the overall quality of the sequencing run, and for downstream analyses.

For example, a useful metric to assess the overall quality of a sequencing run is the proportion of sequenced bases that have quality scores that exceed a certain threshold. For downstream analyses there are two basic approaches to use quality scores: (a) reads with low quality bases can be trimmed so that all remaining bases are high quality and (b) the analyses explicitly take account of the quality scores by weighing bases according to their qualities, with low quality bases being down weighted and so having less effect on the analyses.

In addition to errors in the base calling, another potential source of problems is sample mix-ups, leading to the sample that is being analyzed not being what is expected. Such mix-ups can occur at many points in the process, for example at the collection facility, during library preparation, at the moment the samples are placed on the sequencer or during the analyses themselves. It is difficult to completely eliminate the possibility of sample mix-ups, but a combination of good laboratory practice and analysis checks can both greatly reduce the chances of mix-ups and detect the majority of mix-ups that do occur. For example, a common practice is to perform systematically SNP genotyping on the same samples that are sequenced using one of the genome-wide SNP array platforms. This provides a set of reference genotypes that can be checked against genotypes predicted from the sequence data (Koboldt et al. 2010).

2.3 Sequence Alignment to the Reference Genome

For species for which a good reference sequence exists, the first analysis to be performed after base calling and initial quality control is to align the short sequence reads to the reference. When 2ndGS technologies were first developed, existing sequence aligners were not adapted to handle efficiently the very large number of short reads. In recent years a large number of aligners have been developed explicitly for short sequence reads, and now aligning hundreds of Gbases of sequence for WGS studies is a matter of hours rather than days or weeks (Li and Homer 2010; Koboldt et al. 2010). The aim of this section is not to give an exhaustive survey of available alignment software but rather to discuss the features that a good aligner should have, that may itself depend on the type of analysis that is required. All aligners report for each read the number of matches that have been found with an indication of the differences between the read and the reference at the match position. To reduce the number of possible matches, aligners only consider matches that are close to the reference, although how ‘close’ is defined can vary between aligners, and can often be adjusted by the user. A typical definition of close would be where the read differs from the reference at n or less positions, possibly only considering high quality bases in the comparison with the reference. Important considerations when choosing an aligner are whether the search for matches is exhaustive (i.e., is there a guarantee that all close matches will be found), what the behavior is with reads that map to repetitive regions (are all matches returned in these cases, or a subset of matches or a single match

selected using some criterion), whether the aligner can find gapped or split alignments (discussed below), and the computational requirements. For variant calling (discussed below) it is important that only uniquely mapping reads are used otherwise there is a high risk of false calls being made, but for different analyses (i.e. of CNVs), nonuniquely mapping reads give important information and should be made available by the aligner.

The alignment of reads from paired-end libraries requires a post-processing step after alignment where the potential matches from both ends of the same fragment are examined to see if a consistent pair of matches exists where the orientation and distance of the two ends is as expected given the library construction method. In this way a nonuniquely mapping read can be ‘rescued’ if the corresponding pair is itself uniquely mapped. Paired-end reads are useful for the detection of structural variation as large deletions/insertions or translocations and inversions will create sets of paired-reads with incoherent matches (i.e., with the wrong distance between the pairs or with the two ends mapping in the wrong orientation or on different chromosomes).

This approach is powerful for larger structural variants in the order of several hundred base pairs or larger, but for smaller variants the distortion of the distance between paired-reads is too small to allow detection by this method. Smaller insertion/deletion variants can be detected using gapped and split alignments, if the aligner can generate these. Gapped alignments allow a short insertion/deletion (typically <30 bp to be present) within the reads, while split alignments are a generalization of gapped alignments where an arbitrary gap can exist in a read, with the two extremities of the same read being potentially mapped to different chromosomes. The use of gapped/split alignments along with paired-end reads allows the detection of deletions across the entire scale of the genome from single bases up to entire chromosomes. Other types of structural rearrangements can also be detected across most of the range, although with current technologies there is a gap between very short features (<30 bp) and features >~200 bp where rearrangements cannot be reliably detected, although increasing read lengths should reduce this gap in the near future. It should also be mentioned here that gapped/split alignments are also very useful in the mapping of reads from the transcriptome on to the genomic reference, allowing the mapping of exon/intron boundaries (Trapnell et al. 2009; Bryant et al. 2010).

2.4 Single-Nucleotide Variant Calling

The principle of Single-Nucleotide Variant (SNV) calling is straightforward; at each position the number of reads of each base is counted, and the genotype at the position is called using the base counts. All SNV callers work very similarly; if only one base is seen then the most likely genotype is homozygous for the observed base, and if a more or less equal number of two different bases are seen then a heterozygous call will be the most likely. However, different callers do differ in the details of how ambiguous situations are dealt with, and how the

confidence for the call is calculated. Simple callers use heuristic filters to determine thresholds for calling different genotypes, while more sophisticated callers use explicit statistical models that allow statements to be made about the precision of the estimation, and that permit the incorporation of prior information such as the base quality scores and knowledge about the frequency and location of known variants (Li et al. 2009; Koboldt et al. 2009).

3 Application of Second Generation Sequencing Technologies

Current high-throughput sequencing technologies are becoming widespread and allow even individual research groups to generate unprecedented amounts of sequence data very rapidly and at relatively limited costs. They enable new lines of experimental investigation in basic and clinical research (Voelkerding et al. 2009; Mardis 2009). In the near future, the cost of genome sequencing will be greatly reduced and will make personalized genomics for medical purposes a close reality.

The next sections describe current applications of 2ndGS technologies in the medical field. With the development of 2ndGS technologies, searching for changes in DNA sequence, copy number, structure, methylation status and expression profile can be accomplished with a single platform.

3.1 Whole-Genome Sequencing

Today, 2ndGS technologies are being applied to sequence complete human genomes in order to unravel the complexity of the normal and disease genomes in terms of single-nucleotide variants (SNVs), small insertions and deletions (indels), structural variants (SVs) and copy number variations (CNVs). The number of individual genomes that has been publicly announced to be sequenced is rapidly increasing. However, it is difficult to identify variants contributing to disease from individual sequences (Fig. 2b). As for the Genome-Wide Association Studies (GWAS) performed with SNP arrays, sample size needs to be very large to establish genotype-phenotype relationships for most disorders.

There are several ongoing large-scale projects that aim to sequence the whole genome of several hundreds or even thousands of individuals. The 1,000 Genome Project (www.1000genomes.org) aims to sequence the genomes of a large number of people to provide a comprehensive catalog of human genetic variation, including rare variants (present in <5% in the population) that are thought to play a major role in the genetic basis of complex diseases and that are not readily screened by current genotyping technologies. The International Cancer Genome Consortium (ICGC, www.icgc.org) has been organized as an international effort to obtain a comprehensive description of genomic, transcriptomic and epigenomic changes in 50 different tumor types (The International Cancer Genome Consortium 2010).

(a) De novo whole genome sequencing

```

Ref ATCCGCATGGTCTATCCCCGACTATCAGTT          CTCCCTTGCTAGCTTTCAGCTTCGATC
    CATGGTCTATCCCCGACT                    CTTGTCTAGCTTTCAGCTTCGATCGTGG
    GTCATATCCCCGACTATCAGTTCAGGCA          CTCCTTGCTAGCTTTCAGCTTCGATCGTGGCCGT
    GGTCTATCCCCGACTATCAGTTCAGGCATATCTCCC TAGCTTTCAGCTTCGATCGTGGCCGTACGT
                                     CAGTTCAGGCATATCTCCCTTGCTAG
    
```

(b) Whole genome resequencing

```

Ref ATCCGCATGGTCTATCCCCGACTATCAGTTCAGGCATATCTCCCTTGCTAGCTTTCAGCTTCGATCGTGGCCGTACGT

ATCCGCATGGTCTATCCCCGACTATCAGTT          CTCCCTTGCTCT--CTTTCAGCTTCGATC
CATGGTCTATCCCCGACT                    CTTGTCT--CTTTCAGCTTCGATCGTGG
GTCATATCCCCGACTATCAGTTCAGGCA          CTCCTTGCTAGCTTTCAGCTTCGATCGTGGCCGT
GGTCTATCCCCGACTATCAGTTCAGGCATATCTCCC TAGCTTTCAGCTTCGATCGTGGCCGTACGT
                                     CAGTTCAGGCATATCTCCCTTGCTAG
    
```

(c) Targeted resequencing

```

Ref ATCCGCATGGTCTATCCCCGACTATCAGTTCAGGCATATCTCCCTTGCTAGCTTTCAGCTTCGATCGTGGCCGTACGT

CATGGTCTATCCCCGACTATCAGTT          CTTGTCTAGCTTTCAGCTTCGATC
CATGGTCTATCCCCGACT                    TTGTCTAGCTTTCAGCTTCGA
GTCATATCCCCGACTATCAGTTCAG          GTCTAGCTTTCAGCTTCGAT
GGTCTATCCCCGACTATCAGTTC          CTTGTCTAGCTTTCAGCTTCGAT
TCCCCGACTATCAGTTC
    
```

(d) Characterization of structural and copy number variation

```

Ref Chr 1 ATCCGCATGGTCTATCCCCGACTATCAGTTCAGGCATATCTCCCTTGCTAGCTTTCAGCTTCGATCGTGGCCGTACGT
Ref Chr 2 ATATCTCCCTTGCTAGCTTTCAGCTTCGATCGTGGCCGTACGT

CATGGTCTATCCCCGACT.....TCCCTTGCTAGCTTTCAGC
GGTCTATCCCCGACTTATCA.....TGCTAGCTTTCAGCTTCG
    
```

(e) Profiling epigenetic modifications

```

Ref ATCCGCACGGTCTATCCCCGACTATCAGTTCAGGCATATCTCCCTTGCTAGCTTTCAGCTTCGATCGTGGCCGTACGT

ATTTGTATGGTTTATTTTGTATGTTGGTT          CCGCGCGCGGTGTTTGTAGTTTTAGTTTTGATT
TATGGTTTATTTTGTACT                    GCGGTGTTTGTAGTTTTAGTTTTGATT
GTTTATTTTGTATGTTGGTTCCGCGG          GCGCGCGGTGTTTGTAGTTTTAGTTTTGATTGTG
GGTTTATTTTGTATGTTGGTTCCGCGTACGCG          GTTGTAGTTTTAGTTTTGATTGTGGTTGTA
CGTTCCGCGGTACGCGCGCGGTGTT
    
```

(f) Transcriptome sequencing

```

Ref ATCCGCATGGTCCATCCCCGACTATCAGTTCAGGCATATCTCCCTTGCTAGCTTTCAGCTTCGATCGTGGCCGTACGT

GGCATATCTTCCATCCCCGACTATCATTTGCTAGCTTT
GCTTTCAGCTTCGAATCGCTCTTAGCTCCGCC
    
```

Fig. 2 Examples of the sequencing reads obtained in different applications. When appropriate the genome reference sequence (Ref) is shown above, with exons marked with different colors. Sequence variants in the reads (SNVs and indels) are shown in red (b, c). Paired-end reads mapping to different chromosomal locations are shown in d. Positions displaying complete methylation (C), no methylation (T) and partial methylation (T or C) after bisulfite treatment are depicted in blue (e)

Application of 2ndGS technologies to tumor samples has already yielded significant insights. Several landmark studies have determined the complete DNA sequences of clinical tumor samples or cell lines, and compared these to normal tissues from the same individual. In this way, genome-wide molecular profiles of cancer have been obtained for individuals with acute myeloid leukemia, lung cancer, glioblastoma, malignant melanoma and breast cancer revealing a large range of mutation loads, ranging from 10 somatic missense mutations in leukemia genomes to more than 100 mutations in tumors subjected to substantial exogenous mutagenic exposures such as lung and skin cancer (Robison 2010). Results obtained so far support the hypothesis that there is extensive genetic heterogeneity within a given tumor type, with a large number of infrequently mutated genes and a few genes with mutations of high incidence (Stratton et al. 2009). In addition, resequencing complete cancer genomes from multiple samples from the same patient allows the identification of changes that occur during cancer progression and will possibly lead to improved drug therapies (Ding et al. 2010).

Whole genome sequencing (WGS) has the potential to identify mutations located outside the protein-coding regions of genes, including putative deep intronic mutations or pathogenic variants in regulatory regions that are not being addressed by other methods. All the genomes sequenced so far have yielded similar results in terms of SNVs: around 3 million SNVs per genome of which around 0.5 million are novel SNVs not present in dbSNP. However, because of the difficulties of establishing the pathological relevance of these variants, the analysis of WGS data has been focused on the identification of a subset of variants located in protein-coding regions and large SVs. Comprehensive mutation databases such as COSMIC (Catalog of Somatic Mutations in Cancer, www.sanger.ac.uk/genetics/CGP/cosmic) will substantially facilitate the interpretation of findings.

Reduced costs are causing a rise in WGS. Two recent studies have applied WGS for genetic diagnosis in two patients with Charcot-Marie-Tooth disease and metachondromatosis (Lupski et al. 2010; Sobreira et al. 2010). Some companies and Institutions, such as Complete Genomics (www.completegenomics.com), Illumina (www.illumina.com) and the Beijing Genomics Institute (www.genomics.cn), offer individual genome sequencing services to researchers and also directly to consumers. However, WGS is still not affordable for large genetic epidemiologic studies that require large sample sizes to find out genome-wide significant associations. WGS of carefully selected individuals that are at the extreme ends of a trait distribution sequencing selected families with multiple affected individuals or the use of pooled samples are appealing alternatives.

3.2 Targeted Sequencing

Because whole-genome sequencing is still an expensive endeavor, many researchers need to focus their analysis on specific genomic regions, specific genes or the whole exome to approach disease genetics (Fig. 2c). 2ndGS can be coupled

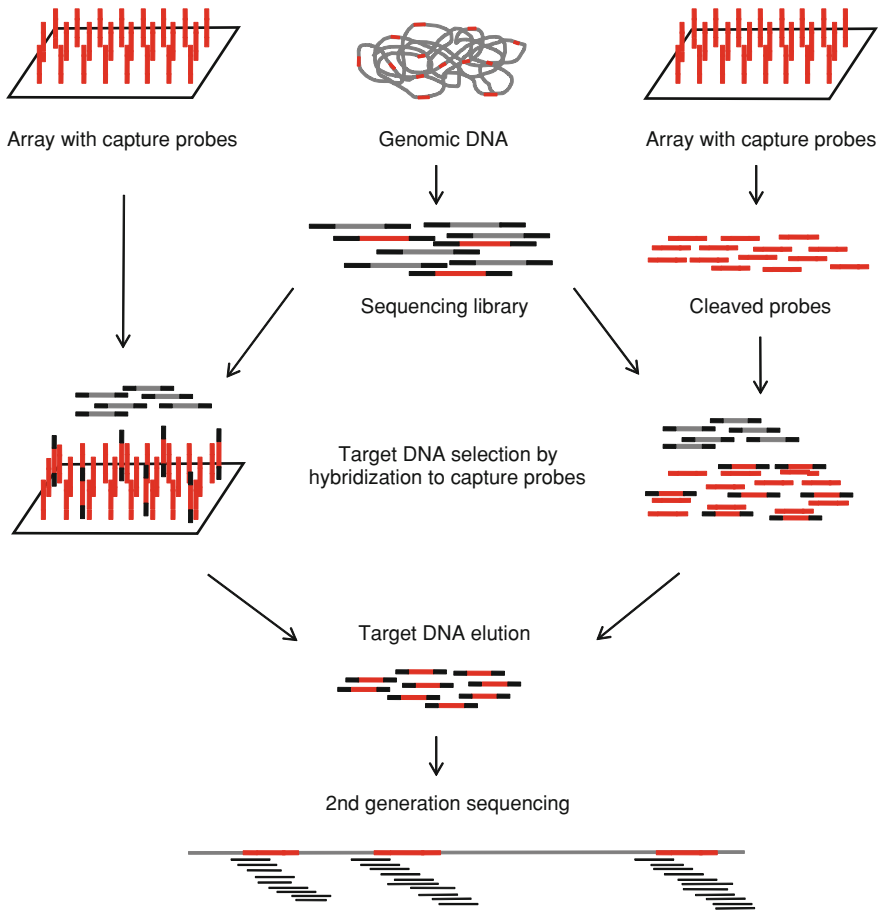


Fig. 3 Strategies for selecting specific regions of interest. Genomic DNA (*gray*, with regions of interest in *red*) is randomly sheared and ligated to universal adapter sequences (*black*). The fragments of interest are then captured by hybridization to target-specific probes either on a microarray surface (*left*) or in solution (*right*). The hybrid-selected enriched output library is eluted and sequenced

with DNA capturing or enrichment methods to resequence targeted regions of interest (Fig. 3).

Hybridization-based methods have been developed to capture specific genomic regions using a set of long oligonucleotide probes that are complementary to the regions of interest. Randomly fragmented, denatured genomic DNA is hybridized to the oligonucleotide probes that are immobilized on a solid surface or used in solution. The bound DNA is recovered and processed for sequencing. After sequencing, the percentage of mappable reads that target to the region of interest is typically >60%, although this is highly variable between regions

(Mamanova et al. 2010). Robust and reproducible protocols are currently being worked out in order to minimize variations in capture uniformity across regions.

3.2.1 Sequencing Specific Genes

Some Mendelian disorders are known to be caused by mutations in tens or hundreds of different genes. For these diseases, it is desirable to sequence a panel of candidate genes at high depth of coverage to identify the causal mutations in a particular family. PCR coupled with 2ndGS can be used to screen for mutations in disease-causing genes but it is unpractical if the number of exons to analyze is very large. High-throughput PCR systems that are based on microfluidics, such as the ones developed by RainDance Technologies (www.raindancetechnologies.com) or Fluidigm (www.fluidigm.com), partially circumvent the limited multiplex capability and high costs of traditional PCR. Alternatively, hybridization-based capturing procedures can be used to enrich the sample for the genes of interest. As an example, Vasta et al. (2009) developed an assay for the diagnosis of mitochondrial disorders that allows the simultaneous capture and sequencing of the entire mitochondrial genome and the exons of 362 nuclear gene encoding mitochondrial proteins. Other groups have designed similar multigene-resequencing assays for disorders that exhibit a high degree of locus and allelic heterogeneity such as breast/ovarian cancer (Morgan et al. 2010; Walsh et al. 2010) and familial hypertrophic cardiomyopathy (Dames et al. 2010).

At some point in the future these methods are likely to replace some of the genetic disease diagnostic products that are on the market today. In addition to reductions in cost and time, the digital nature of 2ndGS-based methods will allow for the detection of somatic variants that are present in a subpopulation of cells and that may indicate the presence of a preclinical disease.

3.2.2 Sequencing Exomes

Most Mendelian disorders are caused by mutations in protein-coding regions that represent a small part (up to 2%) of the human genome. Given the elevated cost of WGS at high coverage, exome sequencing (sequencing the collection of all human exons) has emerged as an alternative screening strategy to find variants underlying a mendelian disease. Companies such as Agilent (www.agilent.com) and Nimblegen (www.nimblegen.com) have developed user-ready products that enable to capture the human exome very cost-effectively (Mamanova et al. 2010).

These exome-capture methods coupled with 2ndGS technologies are extremely valuable for finding mutations that cause rare Mendelian disorders using small family pedigrees that are not tractable to linkage analysis. The approach has successfully been applied to familial pancreatic cancer (Jones et al. 2009), Miller syndrome (Ng et al. 2010) and other rare monogenic diseases. A typical project of this type involves sequencing a few individuals with highly selected clinical

phenotypes, identifying all variants with respect to the reference sequence, filtering out common variation present in public SNV databases and selecting and validating the putative pathogenic variants shared by the affected individuals.

In the near future, exome sequencing will probably trigger the discovery of non-recurring variants with large effects on complex phenotypes such as schizophrenia, autism, amyotrophic lateral sclerosis and X-linked mental retardation (McCarthy 2009).

3.2.3 Sequencing Large Genomic Regions

Several GWAS in complex disorders have identified regions of the genome that are significantly associated with the risk of the disease (www.genome.gov/26525384). However, the majority of these reported associations involve variants that lie outside known genes, with no obvious functional consequences, and it remains a challenge to pinpoint the true causative variants.

Using targeted capture and 2ndGS methods, large contiguous stretches of genome (up to few Mbases) identified through GWAS can be sequenced to help refine association signals and find the biologically causative mutation among these correlated variants. Following this approach, Yeager et al. (2008) resequenced the gene-poor 8q24 region that is associated to breast, prostate and colorectal cancer and generated a detailed map of common and rare genetic variation across the region. Hopefully, this kind of data together with the development of assays that test directly the effect of the newly discovered variants will shed some light on the biologically relevant variants that predispose to complex disorders.

In a similar way, other groups have used targeted capture methods to quickly and cost-effectively sequence the genomic intervals identified by linkage analysis in rare Mendelian disorders (Brkanac et al. 2009; Volpi et al. 2010 and Nikopoulos et al. 2010). In both applications, a major limitation of this approach is that in all hybridization-based capture methods, repetitive regions are masked during the probe design process leaving only the unique fraction of the genomes represented.

3.3 *Characterizing Structural and Copy Number Variation*

Like SNVs, CNVs and SVs may account for the modulation of many complex phenotypic traits and disease susceptibility in humans. 2ndGS has been quickly applied to obtain single-base resolution data on CNVs and SVs partially supplanting array Comparative Genome Hybridization (aCGH) and SNP genotyping arrays.

An adequate capture of SVs can be obtained with the analysis of sequence reads from both ends of contiguous DNA fragments that are few hundred base pairs long (paired-reads) or from captured distal ends of larger fragments (mate pairs). Long mate paired-reads are more sensitive for detecting large events, although they have

a broader size distribution and therefore have less resolution for breakpoint localization. The analysis of the separation distance of the paired-reads with respect to the reference genome enables the identification of genomic insertions and deletions. In addition and unlike microarrays, 2ndGS can also provide data on copy neutral variations such as translocations and inversions by searching for read pairs with ends mapping to different genomic locations or in opposite orientation, respectively (Fig. 2). The formation of chimeric clones during the library preparation and the sequencing errors resulting in incorrectly mapped reads are the major limitations (Medvedev et al. 2009).

In a massively parallel sequencing experiment with several millions of reads, the number of sequences aligning to a genomic region is proportional to the number of times this region appears in the genome. Therefore, CNVs can be detected at high sensitivity by determining the depth of coverage across the genome after correcting for differences in GC content and uniqueness across the genome. Reports on WGS of individual genomes have identified several thousands of CNVs which is in several fold more than the numbers that were reported in array-based studies (Ku et al. 2010).

However, paired-end WGS may be not meaningful for those patients in which cytogenetic techniques have previously localized the disease-associated chromosome rearrangement. In these cases, sequencing of sorted derivative chromosomes or microdissected chromosomal regions has proven to be a feasible approach for the characterization of chromosomal breakpoints (Chen et al. 2008; Weise et al. 2010).

3.4 Profiling Epigenetic Modifications

Eukaryote genomes carry relatively stable chemical marks that are added to either DNA or its packing histones. These epigenetic changes are known to play an important role in the regulation of gene expression and to contribute to the understanding of some cancers, congenital anomaly syndromes and other complex non-neoplastic disorders, including some metabolic and cardiovascular diseases. 2ndGS using slightly modified sample preparation protocols allows for an unbiased exploration of DNA methylation and histone modifications and has substantially accelerated epigenetic research.

Standard methodology for the detection of cytosine methylation, the most commonly studied epigenetic modification, is based on bisulfate treatment that converts the cytosine residues to uracils while leaving 5'-methylcytosines unchanged. Bisulfite Sequencing (BS-Seq) combines bisulfite treatment with 2ndGS technology, providing a digital measure of the frequency that a cytosine is methylated (Lister and Ecker 2009) (Fig. 2e). Other methods such as reduced representation BS sequencing or MeDIP sequencing allow saving some costs by targeting only CpG-rich or highly methylated regions, respectively. In the near future, novel single-molecule sequencing approaches, such as the ones being developed by Pacific Biosciences (www.pacificbiosciences.com) and Oxford

Nanopore Technologies (www.nanoporetech.com), will directly detect 5-methylcytosine (mC) and 5-hydroxymethylcytosine (hmC) without prior bisulfite treatment thus enabling comprehensive epigenome mapping.

Post-translational covalent modifications of histone tails, including methylation, acetylation and phosphorylation, can be characterized by chromatin immunoprecipitation with an antibody that specifically recognizes the histone variant and characterization of the bound DNA by massive parallel sequencing (ChIP-Seq) (Park 2008). Follow-on bioinformatic analysis enables the genome-wide characterization of the binding sites of the histone of interest with high precision and provides new insights into how eukaryotic genomes are organized.

Several consortium projects such as the Human Epigenome Project (HEP, www.epigenome.org) and the Encyclopedia of DNA Elements (ENCODE) aim to produce reference epigenome maps for a variety of human cells. Lister et al. (2009) provided the first complete methylation map, also called the methylome, of two human cell types and interpreted this data in relation to mRNA expression levels. Several other groups are currently using 2ndGS technologies to study the influence of cytosine methylation and histone modifications in developmental stages and disease states.

3.5 Transcriptome Sequencing

2ndGS technologies have been proven to be very useful for sequencing RNA (RNA-Seq) and are currently replacing microarray-based methods. They not only provide a digital overview of gene expression profiles but also enable the characterization of splice variants, antisense transcription, fusion genes, allele-specific expression, RNA editing and other forms of sequence variation in the transcribed portion of genes (Fig. 2f).

In RNA-Seq, the expression level of a gene is deduced from the total number of reads each gene sequence appears and normalized by the length of the gene. Low abundant transcripts that would escape detection by microarray-based methods can be detected by increasing sequencing depth. In this regard, short read sequencing technologies provide much deeper coverage at lower cost although they may be problematic when characterizing novel exon junctions (Morozova et al. 2009).

Aberrant transcriptional events resulting from chromosomal rearrangements play a causative role in many human cancers. In recent years several studies have successfully used paired-end RNA-Seq to detect fusion transcripts in cancer at single-nucleotide resolution (Maher et al. 2009; Zhao et al. 2009). In addition, sequencing the transcriptome is an alternative to exome sequencing for identifying expressed genetic variants when performed in the appropriate tissue type (Cirulli et al. 2010). For example, a recurrent somatic mutation in *FOXL2* gene has been found in granulosa-cell tumors using this approach (Shah et al. 2009).

A related application of 2ndGS technologies is the discovery and profiling of non-coding RNAs (ncRNA) in order to elucidate their role in health and disease. ncRNAs are small RNA molecules involved in post-transcriptional regulation of

gene expression that have been suggested to modulate parameters such as disease onset, severity or progression. The short length of ncRNAs makes 2ndGS platforms ideal for ncRNA characterization on a genome-wide basis, as illustrated by a recent study by Uziel et al. (2009) that demonstrated how miRNA overexpression collaborates with the Sonic Hedgehog pathway in medulloblastoma. Similarly, other groups have reported the involvement of specific microRNAs in the etiology of ovarian and breast cancer that could be used as biomarkers for tumor classification and prognosis (Wyman et al. 2009; Nygaard et al. 2009).

3.6 Identification of Infectious Agents

2ndGS has also been used for the rapid identification of pathogens in chronic as well as acute disease replacing conventional Sanger sequencing methods. This is typically accomplished by extracting all nucleic acids from the sample of interest, sequencing the complex DNA or RNA mixture and then assembling the non-human sequence reads derived from the infectious agents. In 2008, a new arena virus and a new polyomavirus were associated with febrile illness after visceral organ transplantation and Merkel cell carcinoma, respectively, by sequencing RNA from affected tissues (Palacios et al. 2008; Feng et al. 2008).

For known pathogens, the high sensitivity of 2ndGS has proven to be ideal to detect rare variants that might confer to the pathogen some resistance to treatment or other virulence markers. Given the high throughput of second GS technologies, hundreds of samples individually tagged with a molecular barcode can be analyzed simultaneously. This approach has been used to identify drug-resistant HIV strains in patients at the earliest stages (Hofmann et al. 2007).

The Human Microbiome project (<http://nihroadmap.nih.gov/hmp/>) aims to analyze the entire collection of microbes (microbiome) that are present in the inner and outer surfaces of our body, including the skin, the oral cavity, the vagina and the intestine, and analyze its role in human health and disease. It uses a metagenomic approach that allows the study of native microbial or viral communities with no initial cloning steps combined with the pyrosequencing technology that provides with long (>300 bp) and highly accurate reads (>99.5%) (MacLean et al. 2009). In the near future, sequencing the microbiome at intermediate stages from health to disease will greatly increase our understanding of some human conditions such as obesity and cancer. In addition, WGS of the host genomes will allow us to investigate the genetic basis of susceptibility to microbial infection.

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Rare Genomic Deletions and Duplications and their Role in Neurodevelopmental Disorders

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Abstract Copy number variations (CNVs) are deletions and duplications of DNA sequences that vary in length from a few base pairs to several million. While these structural variations are often benign, they can disrupt vital biological functions and result in disease. CNVs have been identified as causal in a number of neurodevelopmental disorders (NDs), including but not limited to, autism, attention-deficit/hyperactivity disorder (ADHD), and schizophrenia. Here, we examine CNV research into these disorders, and discuss relevant methodological considerations. By identifying specific rare deletions and duplications, we may be better able to determine the etiology of neurodevelopmental disorders and identify appropriate treatments.

Keywords Copy number variation · Neurodevelopmental disorder · Autism · Schizophrenia · Attention deficit hyperactivity disorder

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1 Introduction

NDs are present in approximately 6% of children (Polanczyk et al. 2007; Newschaffer et al. 2007; Arajärvi et al. 2005), require lengthy evaluation, can be difficult to treat, and contribute significantly to overall disease burden and healthcare costs. While the causes of NDs remain largely unknown, recent research efforts have identified CNVs as potentially important pathogenic factors. In the past several years, techniques used to identify CNVs have advanced considerably, making it easier to identify structural variations. Two common techniques for detecting CNVs include 1) using microarray assays from single nucleotide polymorphism (SNP) genotypes and 2) using comparative genomic hybridization (CGH) arrays based on intensity data to identify contiguous probes that signal CNV events. The improved sophistication of whole-genome discovery approaches necessitates a renewed emphasis on rigorous statistical oversight and validation methods. In the section below, we discuss some of the challenges present in studying CNVs, while later we focus on these structural variations in relation to specific NDs.

2 Methodological Considerations

2.1 CNV Detection and Validation

Identifying CNVs using high-density microarrays requires high-quality genotype signals. Factors that help validate the genome signal include increasing the proportion of SNPs in genotype regions, minimizing the standard deviations of intensity signals, monitoring the number of CNVs putatively associated with given loci (a high number of CNVs may indicate erroneous identification), controlling population substructures, and validating calls by using an alternate method (e.g. quantitative PCR or multiplex ligation-dependent probe amplification (MLPA)).

Table 1 Deletions and duplications associated with neurodevelopmental disorders

Locus	CNV Type	Disease	Gene
22q11.2	Del/Dup	DiGeorge syndrome and velocardiofacial syndrome	<i>TBX1+</i>
17p13.3	Del	Miller–Dieker syndrome	<i>LIS1 +</i>
17q11.2	Del/Dup	Neurofibromatosis type 1	<i>NF1 +</i>
Xq22	Del/Dup	Pelizaeus–Merzbacher disease	<i>PLP1</i>
15q11–q13	Del	Prader–Willi syndrome/Angelman syndrome	<i>UBE3A +</i>
15q11–q13	Dup	Autism	<i>UBE3A +</i>
17p11.2	Del	Smith–Magenis syndrome	<i>RAI1 +</i>
17p11.2	Dup	Potocki–Lupski syndrome	<i>RAI1 +</i>
7q11.23	Del/Dup	Williams syndrome (WS)	<i>many</i>
11q14.2–14.3	Del	Attention-Deficit/Hyperactivity Disorder	<i>GRM5</i>
3p26.1	Del	Attention-Deficit/Hyperactivity Disorder	<i>GRM7</i>
22q13	Del	Autism	<i>SHANK3</i>
Xp22.33	Del	Autism	<i>NLGN4</i>
16p11.2	Del	Autism	<i>many</i>
4q28.3	Del	Autism	<i>PCDH10</i>
3q24	Del	Autism	<i>NHE9</i>
15q11–q13	Dup	Autism	<i>many</i>
2p16.3	Del	Autism	<i>NRXN1</i>
3p26.3	Del/Dup	Autism	<i>CNTN4</i>
22q11.21	Dup	Autism	<i>TBX1+</i>
6q26	Del	Autism	<i>PARK2</i>
1q25.2	Dup	Autism	<i>RFWD2, PAPP2</i>
7p14.3	Dup	Autism	<i>AK057321</i>
3q13.33	Dup	Autism	<i>FBXO40, GOLGB1</i>
2p24.3	Dup	Autism	<i>AK123120</i>
3p26.2	Del	Autism	<i>UNQ3037</i>
10q23.2	Del	Autism	<i>GRID1</i>
3q26.31	Dup	Autism	<i>NLGN1</i>
4q31.21	Dup	Autism	<i>GYPELOC441046</i>
3q13.3	Dup	Bipolar disorder	<i>GSK3B</i>
Xq28	Del	Rett syndrome	<i>MECP2</i>
2q34	Del	Schizophrenia	<i>ERBB4</i>
5p13.3	Del	Schizophrenia	<i>SLC1A3</i>
2q31.2	Del	Schizophrenia	<i>RAPGEF4</i>
12q24	Dup	Schizophrenia	<i>CIT</i>
16q22.1	Del	Schizophrenia	<i>PDPR</i>
16p11.2	Dup	Schizophrenia	<i>QPRT, DOC2A, TBX6+</i>
22q11.21	Del	Schizophrenia	<i>COMT, TBX1+</i>
9q34.3	Del	Schizophrenia	<i>CACNA1B</i>
10q11.21	Del	Schizophrenia	<i>RET</i>
4p16.1	Del	Schizophrenia	<i>WDR1</i>
18q12.3	Del	Schizophrenia	<i>RIT2, PIK3C3</i>
3p26.2	Del	Schizophrenia	<i>SUMF1</i>
Xp22.33	Del	Tourette’s syndrome	<i>NLGN4</i>

Another important validation measure is to limit signal intensity waves—genome-wide artifacts of signal intensities that alternately yield inflated or deflated signals (Marioni et al. 2007). Typically, these correlate with genomic content (total guanines (Gs) and cytosines (Cs) per total of the four bases) and require the imposition of wave-correction models. In a study of Illumina®'s BeadStudio software, we previously demonstrated that approximately 10% of DNA samples from commercial cell line repositories show visually discernable wavy patterns (Diskin et al. 2008). Because CNVs are typically inferred from gains and losses of intensity signals, the imposition of wave-correction models are critical for accurate detection.

CNV detection algorithms, including the methods and options they implement, are still under development and debate—although PennCNV (Wang et al. 2007) and BirdSuite (Korn et al. 2008) have gained popularity. Similarly, while Illumina® (San Diego, CA) (Steemers and Gunderson, 2007) and Affymetrix® (Santa Clara, CA) (Fodor et al. 1991) genome-wide arrays are widely used, the actual array content is constantly evolving, and new versions and probe designs make the task of integrating datasets a difficult one (Fig. 1). The CNV signal can vary depending on the type of source sample used (e.g. cell lines or saliva), batch effects, equipment variation, reagent variation, and the approach taken to signal normalization. All of these factors can introduce disparities that need to be modeled and statistically corrected.

Some individuals with associated CNVs may not show any notable phenotypic variation. This indicates a threshold effect or a possible second-hit modifying mutation. The second hit is extremely hard to determine given the rarity of the initial CNV, which limits the sample size. At rare CNV frequencies, small numbers of controls with a given CNV quickly dilute significance tests *versus* CNVs not detected in a large control cohort. It should also be noted that differences in the number of statistical tests being performed on CNV regions mean that classical multiple-test statistical corrections or Bonferroni corrections are difficult to adapt to rare CNV association. A more practical alternative is to use the significance observed in control-excess as a model for the null distribution. This model allows us to accept CNV regions where case-excess is of greater significance as surpassing the null distribution.

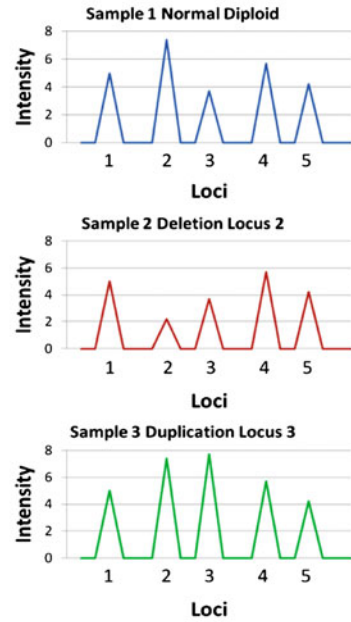
Related to this are issues of pleiotropy and/or variable expressivity of the underlying genes. More dense continuous coverage is needed to confidently call CNVs, culminating in genome-sequencing technologies. Individual SNPs and their underlying probe sequences have different efficiencies in differentiating modes of CNVs. Enrichment for clearly differentiating probes is essential for SNP arrays with strong CNV detection utility. Nevertheless, rare CNVs may be so rare that individual labs evaluating their own dataset may lack the requisite power to reach confident association. Collaboration and data sharing are important to boosting marginally significant signals. Collaboration is becoming more widespread based on collegial agreements and a trend among funding agencies to stipulate that raw data be deposited in the public domain.

The development of public datasets such as the rapidly growing dbGaP has the added benefit of facilitating replication studies, which are critical to validation. Existing CNV data can also be integrated into the major public databases.

(a) FISH



(b) qPCR



(c) Genome-wide Array

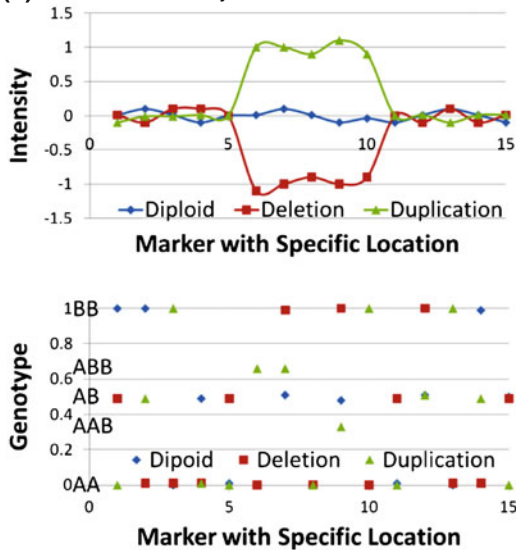


Fig. 1 CNV detection methods and data. **A** Two-color FISH shows large CNV, deletion shown. **B** Based on a control value, a ratio of observed to control for specific loci signal CNV. **C** SNP arrays or aCGH assay contiguous SNPs or CN probes are bound to the genome allowing for detection of variations from normal diploid

Genome-wide association remains focused on SNP genotypes by the current definition, but the underlying principles can be incorporated into copy number variations. The central databases for disease association results such as Online Mendelian Inheritance in Man (OMIM) and NHGRI: A Catalog of Published Genome-Wide Association Studies largely exclude CNV association results. While the CNV event is certainly more difficult to represent, a central consensus region SNP ID could be very analogous to reporting significant SNPs. Single loci reporting is complicated by factors that include varying confidence of specific calls, association, and marginal success in replication (due to rarity of individual variants). Because of the lack of CNV entries in disease association resources, such a query becomes a large primary literature search. An alternative is to present a gene network of related function or interaction of around 100 genes. Further abstract is the idea that psychiatric patients have a CNV burden in genic regions, meaning there are more large rare CNVs in psychiatric patients than controls.

The primary catalog for CNVs is currently the Database of Genomic Variants (projects.tcag.ca/variation/), which is also integrated into the UCSC browser. There are key caveats for interpreting this data. Firstly, a variety of array platforms and CNV-calling algorithms are used. Secondly, the subjects are part of studies which typically focus on a specific phenotype. By virtue of being de-identified for research purposes, they do not have a complete phenotype to apply to other disease studies. Thirdly, acquiring the source sample to validate the CNV with the array and calling algorithm from an alternate laboratory is not straightforward and is often unsuccessful. Since 2004, papers describing genome-wide maps of copy number variation have revealed that CNVs and segmental duplications are very abundant features of the human genome.

Given the massive amounts of CNVs that can be detected and specifically assayed, collections of CNV-specific markers such as copy number polymorphisms (CNPs) can be developed. Similar to SNPs, CNPs are assumed to be common in above 1% population frequency. Although the hypothesis of common disease explained by common variants makes intuitive sense, mounting support for common disease rare variants in the form of CNVs are being found associated with NDs.

2.2 Interpretation

When CNVs are observed in a parent but not in a child, this may indicate an error in the CNV call. The converse is not necessarily the case, and de novo CNVs have been strongly associated with a number of NDs (e.g. Sebat et al. 2007). De novo CNVs may be particularly informative for pronounced NDs such as brain malformations, where the parent is often annotated as healthy. De novo mutations may also be of special relevance to heterogeneous NDs such as autism and ADHD, where etiologies are complex and a specific disease label can have very different phenotypes and combinations (Geschwind and Levitt 2007). Further, CNVs may have prospective diagnostic value in differentiating behaviorally similar NDs. In certain cases, the parent may have an attenuated ND or an additional protective

variant, which has obvious implications for treatment. Rare private mutations in certain families are expected from a population genetics perspective without detrimental effect. This necessitates observation of recurrent rare CNVs in unrelated individuals from diverse geographic and ethnic populations, which can be detected by different array technologies.

Proximal to CNV regions, highly homologous low-copy-number repeats (LCRs) are frequently observed, which can predispose to recombination between non-allelic LCRs (non-allelic homologous recombination) (Britten and Davidson, 1976; Lupski 1998). Evolution and genome condensation occur through various mechanisms, including chromosome splicing of highly similar sequences known as homologous recombination (HR). In somatic cells, HR is needed to repair extreme DNA damage such as double strand breaks (DSB). If spliced incorrectly, CNVs and genomic instability can result. An intermediate state is formed between two DNA strands, which proceeds by crossover (two-way sharing, meiosis, and DSB) or gene conversion (one-way sharing, DSB). The human genome has much segmental duplication, which provides similar sequences for HR to occur. HR may expand gene families with diverse functions but also leads to more mistakes. Segmental duplications can masquerade as allelic sequences during meiosis and lead to erroneous splicing, termed non-allelic homologous recombination. Gene conversion can result in inserts of non-expressed poor function elements into homologous expressed genes. Segmental duplications are also referred to as low-copy repeats. Non-homologous end-joining (NHEJ) (Moore and Haber, 1996), fork stalling, and template switching (FoSTeS) (Lee et al. 2007) can result in less typical CNV generation.

The widespread and, in some regions, high prevalence of CNVs is somewhat counterintuitive for such an aberration from the classical genetics of a maternal and paternal diploid chromosome set. However, it is likely that CNVs may contribute to evolutionary mechanisms, whereby gene families with homologous sequences are extended into complementary functions over time. Perhaps CNVs involving genes responsible for behavior, cognition, and psychological state are most active in humans representing a successful expansion of gene functions based on ancestral duplications.

3 Large Constitutional Deletions and Duplications in Neurodevelopmental Disease

Early studies with chromosomal karyotypes and fluorescent in situ hybridization (FISH) were limited in their ability to detect only the largest CNVs, but increased resolution of SNP microarrays and DNA sequencing technologies have made smaller CNVs far easier to identify. Large CNVs inevitably have a greater likelihood of disrupting crucial functional elements but examples exist of small targeted CNV that can cause phenotype variation. Certain CNVs can give rise to very specific phenotypes while others may have variable expressivity. Some genes may have complementary function to other genes such that deletion of one gene homolog does not result in significant phenotypic variation.

Perhaps the most familiar CNV linked with ND involvement is trisomy 21 or Down syndrome, which results from the duplication of an entire chromosome 21 (Lejeune et al. 1959). Symptoms include distinct facial features, as well as delayed mental and social development. The CNV variant is highly penetrant since the duplication is directly associated with a specific phenotype.

Williams syndrome is associated with a deletion of 7q11.23 and is characterized by a distinctive facial appearance, visuospatial deficits, learning disorders, ADHD, and hypersociability (Francke 1999; Fishman et al. 2010) (Table 1).

Deletion and duplication of 15q11–q13 have been described with variable expressivity based on maternal or paternal inheritance. Maternal 15q11–q13 deletion results in Angelman syndrome (AS), which is characterized by developmental delay, sleep disturbance, seizures, jerky movements (especially hand-flapping), frequent laughter or smiling, and a happy demeanor (Greenberg et al. 1991). AS is caused by the under-expression of *UBE3A*, whose protein product E6-AP is involved in the transfer of ubiquitin molecules for degradation (Kishino et al. 1997; Matsuura et al. 1997). Paternal deletion of 15q11–13 causes Prader–Willi syndrome (PWS), which is characterized by hypotonia in infancy, hypogonadotrophic hypogonadism, facial dysmorphism, obesity, short stature, and cognitive and behavioral impairments (Cassidy, Dykens, and Williams, 2000). The microdeletions associated with PWS all share a 4.3 kb deleted region, which includes the promoter region, first exon, and part of the first intron of the *SNRPN* gene (Rodriguez-Jato et al. 2005). A number of phenotypes have also been associated with duplication in the 15q11–13 region. Hypotonia, language and motor delay, epilepsy, facial dysmorphism, and cognitive and learning impairments are key features of 15q duplication syndrome. Maternal 15q11–q13 duplication results in autism, while paternal duplication often is of no effect or slight developmental delay (Gillberg et al. 1991). These same features are associated with 15q trisomy (Chamberlain and Lalande, 2010).

Miller–Dieker syndrome (MLS) is associated with deletion of 17p13.3 impacting the *LIS1* gene (Dobyns et al. 1993). Features of MLS include lissencephal (smooth brain), mental retardation, and facial dysmorphism (Schiff et al. 2010). Other than brain malformations, many patients also present epilepsy, spastic behavior, and shortened life expectancy. Larger deletions incorporating proximal genes result in more severe phenotypes, indicating the involvement of long range regulation or epistatic interaction between genes.

Another example is the 22q11.2 deletion that causes a multi-systemic disorder. Many patients with the deletion have a learning disorder, congenital heart defects, a malformed palate, mild facial abnormalities, schizophrenia, and sensitivity to infections (Liu et al. 2002). The 22q11.2 deletion syndrome (also known as velocardiofacial syndrome or DiGeorge syndrome) is caused by a microdeletion in chromosome 22. The phenotype is variable and can include facial dysmorphism, cardiovascular abnormalities, short stature, cognitive and behavioral impairments, and a high risk of schizophrenia (Karayiorgou et al. 2010). Genes in the 22q11.2 region include *COMT* (Shashi et al. 2006) and *TBX1* (Paylor et al. 2006). Duplication of 22q11.2 also has variable clinical presentations, including

developmental delay, dysmorphic facial features, autism, and cognitive and behavioral impairments (Portnoi 2009). Additional structural variation of this locus includes (11;22) translocation causing the der(22) syndrome and (2) the formation of a supernumerary chromosome resulting in Cat-Eye syndrome. Eight different LCRs are located in proximal 22q, and are presumably susceptible to homologous recombination events and promote nonallelic homologous recombination (Shaikh et al. 2001). The 22q13 deletion causes Phelan–McDermid syndrome, characterized by pervasive developmental disorders, speech delay, and hypotonia (McDermid and Morrow, 2002).

Rett syndrome (RTT), which is found almost exclusively in females, is associated with deletion of Xq28 including the *MECP2* gene. Duplications of *MECP2* were found in males exhibiting severe intellectual disability, and autistic features (Ramocki et al. 2010). *MECP2* appears to be the singularly important gene that is impacted by the Xq28 CNV.

Pelizaeus–Merzbacher disease is associated with *PLP1* duplication and disease is characterized by coordination, motor abilities, and intellectual function deterioration, which were described as early as 1885 (Pelizaeus 1885). Xq26.2–q27.1 duplication impacting the *SOX3* gene was identified in females in a family with language impairments that included stuttering and dyslalia, short height, and dysmorphic features. Deletions on chromosome X may be due to submicroscopic X-to-autosome translocation, Alu–Alu recombination, and non-homologous end-joining (Inoue et al. 2002).

Thus, large CNVs are high confidence calls that can be detected on different resolution arrays. These large CNVs often encompass many genes and in turn cause multi-systemic syndromes rather than singular features. As such, they are straightforward to detect with available technology but in the majority of cases the actual critical gene(s) or variant(s) within the CNV, or the micro level instability, remains to be elucidated.

4 Common Neurodevelopmental Disorders

Taken together, multiple rare CNVs have been implicated in the pathogenesis of NDs. However, a few common variant models have also been implicated in predisposing to several of the NDs, including autism and schizophrenia (Wang et al. 2009; International Schizophrenia Consortium 2009). While common SNP genotypes have been implicated to a greater degree in inflammatory and metabolic disorders, such as type 1 diabetes, inflammatory bowel disease and type 2 diabetes, it is conceivable that with greater sample sizes that many more common SNP variants will be uncovered that predispose to ND susceptibility. In addition, common CNVs are also hypothetically possible but current methods often under call their true frequency. Thus, rare CNVs have been most successful in NDs lending support to a common disease-rare variant model that is disparate from the more typical common disease-common variant model, previously implicated by many (Schork et al. 2009).

4.1 Autism

A potentially efficient approach to identifying CNVs in neurodevelopmental disorders is to target functional gene clusters of associated loci. Previously reported ASD candidate genes, such as *NRXN1* (Kim et al. 2008) and *CNTN4* (Roohi et al. 2008; Fernandez et al. 2008) have been independently replicated by Glessner et al., Glessner et al. 2009. We also identified several new susceptibility genes encoding neuronal cell-adhesion molecules, including *NLGN1* and *ASTN2*, which were enriched with CNVs in ASD cases. Moreover, CNVs within or surrounding genes in ubiquitin pathways—*UBE3A*, *PARK2*, *RFWD2*, and *FBXO40*—were observed in cases but not in controls. Duplications 55 kilobases upstream of complementary DNA *AK123120* were identified (Glessner et al. 2009). Using a ~550,000 SNP array, we observed an average, 15.5 CNV calls for each individual, with a similar frequency observed in cases and controls.

Recently, Pinto et al. (2010) identified inherited and de novo CNVs associated with 25 genes that were enriched in a large ASD sample. These include *SHANK2*, *SYNGAP1*, *DLGAP2*, and the *DDV53-PTCHD1* locus. Interestingly, the group also found that individuals with ASDs have neither significantly more, nor significantly larger, CNVs than matched controls. However, they are more likely to have CNVs in genic regions, particularly in loci previously associated with ASDs and/or intellectual disability. This is important because it replicates our previous finding that CNV frequencies are comparable for cases and controls. This underscores the point that individuals with NDs may not be any more prone to duplications or deletions *per se*, but more importantly to CNVs in specific coding regions. The localization of CNVs at genes linked with intellect is also theoretically significant in that it suggests a putative link between the two (Skuse 2007). CNVs impacting *DPP6*, *DPP10*, and *PCDH9* were also associated with ASDs (Marshall et al. 2008). CNVs on 16p11.2 and genotype association on 5p15 (*SEMA5A/TAS2R1*) were also found in autism (Weiss et al. 2008; Weiss and Arking 2009).

4.2 Schizophrenia

We recently used 1.7 million probes to perform a whole-genome CNV analysis on a cohort of 977 schizophrenia cases and 2,000 controls, validating positive findings in an independent cohort of 758 schizophrenia cases and 1,485 controls (Glessner et al. 2010). The gene ontology synaptic transmission family of genes was notably enriched for CNVs in the cases ($P = 1.5 \times 10^{-7}$). Among these, *CACNA1B* and *DOC2A*, both calcium-signaling genes responsible for neuronal excitation, were deleted in 16 cases and duplicated in 10 cases, respectively. In addition, *RET* and *RIT2*, both ras-related genes important for neural crest development, were significantly affected by CNVs. *RET* deletion was exclusive to seven cases, and *RIT2* deletions were overrepresented in the schizophrenia cases. Similar to the ASD

studies above, rare CNVs were not overrepresented in cases *versus* controls. This is largely consistent with the literature, though (Walsh et al. 2008) found novel large rare deletions and duplications of genes observed in 15% of cases versus 5% of controls. A study of CNVs in Chinese schizophrenia patients detected no significant difference in rare CNVs between cases and controls (Shi et al. 2008). Another study of 1,013 cases and 1,084 controls of European ancestry also failed to find more rare CNVs >100 kb in cases or enrichment for neurodevelopmental pathways (Need et al. 2009).

Previous studies have associated various CNVs with schizophrenia, including deletions of 22q11.2 (Liu et al. 2002), *NRXN1* (Kirov et al. 2007), *APBA2* (Kirov et al. 2007), and *CNTNAP2* (Friedman et al. 2008). However, each of these CNVs is rare and they account for a relatively small proportion of the overall genetic risk in schizophrenia. Large rare CNVs impacting many different genes enriched in neurodevelopmental pathways have been reported elsewhere (Walsh et al. 2008; International Schizophrenia Consortium 2008; Stefansson et al. 2008). Specific loci exhibiting runs of homozygosity (ROHs) have also been associated with schizophrenia (Lencz et al. 2007), and de novo CNVs ($P = 7.8 \times 10^{-4}$) were recently observed in sporadic schizophrenia cases in comparison with controls (Xu et al. 2008). Comparison of genomic findings in schizophrenia and autism has suggested a diametric etiology (Crespi et al. 2010).

4.3 ADHD

Attention-deficit/hyperactivity disorder (ADHD), the most common neuropsychiatric disorder in children, with a 5.2% worldwide prevalence, causes significant academic, behavioral, and social impairment throughout the life span (Polanczyk et al. 2007). The phenotype consists of extreme manifestations of continuous traits, including hyperactivity, impulsivity, and dysfunction in executive and self-regulatory skills that involve working memory, temporal organization, planning, organizing, maintaining focus, effort, and motivation (Elia and Devoto 2007). Genome-wide association studies of ADHD including CNVs have been few despite high prevalence.

Specific genetic factors underlying risk for ADHD remain elusive. To assess the role of structural variation in ADHD, we previously identified 222 inherited copy number variations (CNVs) within 335 ADHD patients and their parents that were not detected in 2,026 unrelated healthy individuals. (Elia et al. 2010). Again, no excess CNVs, either deletions or duplications, were found in the ADHD cohort relative to controls. Inherited rare CNVs impacted candidate genes of autism, schizophrenia, and Tourette syndrome, including *A2BPI*, *AUTS2*, *CNTNAP2*, and *IMMP2L*. The ADHD CNVs enriched in cases were related to psychological and neurological functions, including learning, behavior, synaptic transmission, and central nervous system development. A deletion within the glutamate receptor gene, *GRM5*, was found in an affected parent and all three affected offspring.

GRM7 deletion was also observed in cases and not in controls (Elia et al., 2010). Rare inherited structural variations play an important role in ADHD development and indicate a set of putative candidate genes for further study in the etiology of ADHD.

5 Conclusion

In summary, both common and rare variants have been implicated in NDs. While considerable progress has been made over the past few years in unveiling the genetic causes of NDs, genome-wide studies explain roughly 10–15% of the heritability of NDs. A recent simulation study suggests that some of the ‘missing’ heritability might be accountable for synthetic associations—a term used to describe the relationship between a (common) causal variant and a (rarer) non-causal variant. Dickson et al. (2010) simulated output from a genome-wide association study (GWAS), where some individuals had rare variants (0.5–2% of the population) that likely caused a disease. They found that the GWAS technique erroneously identified the synthetically associated variant as causal, essentially obscuring the signal from the rarer “at risk” variant. In other words, synthetic associations infer that many people share a variant that confers some small risk of disease. In fact, only a few of these individuals share a rarer variant that carries a much higher risk.

CNV studies, which are sensitive to specific rare deletions and duplications, provide a potential route around this problem. However, as noted above, this approach is relatively insensitive to second-hit variants because of the limits of sample size. A combination of the two approaches is arguably the most attractive. The explosion of GWAS publications in the past several years has generated numerous loci putatively associated with NDs. Perhaps the most important replication that can be made without the need for genotyping multitudes of additional samples is in functional gene clusters of associated loci. This also boosts confidence in association signals of rare CNVs, which singularly may have arisen by chance. The CNVs were recently identified at *CNTN4* and *NRXN1* have well-established associations with autism (Glessner et al. 2009).

Some of the missing heritability should also disappear as arrays with increasingly powerful resolutions are developed. Although much progress has been made to this end, further resolution of data is needed to gain confidence in CNV calls, and to establish clear breakpoints. Forty-two million probes have already been achieved with genome-tiling set of multiple arrays (Conrad et al. 2010). The best resolution, of course, is sequencing the genome for every contiguous base, which has also been investigated (Kidd et al. 2008).

Many of the issues allied to structural studies will doubtless be resolved by technological advances. Nevertheless, additional complexity in the CNV theme exists in mosaicism, translocations, and inversions. Neither translocations nor inversions can be detected with a SNP array, and clone paired-end sequencing

(fosmid) and sequence-assembly comparison are the only genome-wide technologies that can detect these structural variants (excepting targeted methods such as FISH and Southern blotting). Other challenges are organizational, and these include issues of data-integration, sharing, and management, all of which have been touched-on above.

With the ability to recognize sequence-level variation already a diagnostic reality, the necessity of quickly dissociating benign and disease-causing changes will become more pressing. Rett syndrome, a ND on the autism spectrum, is one example of a specific microdeletion associated with a specific phenotype. Similar associations are likely to emerge from the CNV field over the coming years. Similarly, family based studies may help to differentiate de novo and inherited forms, and may ultimately help identify protective variants.

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Toward a Mechanistic Understanding of How Variability in Neurobiology Shapes Individual Differences in Behavior

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Abstract Research has begun to identify how variability in brain function contributes to individual differences in complex behavioral traits. Examining variability in molecular signaling pathways with emerging and established methodologies such as pharmacologic fMRI, multimodal PET/fMRI, and hormonal assays are beginning to provide a mechanistic understanding of how individual differences in brain function arise. Against this background, functional genetic polymorphisms are being utilized to understand the origins of variability in signaling pathways as well as to efficiently model how such emergent variability impacts behaviorally relevant brain function and health outcomes. This chapter provides an overview of a research strategy that integrates these complimentary levels of analysis; existing empirical data is used to illustrate the effectiveness of this approach in illuminating the mechanistic neurobiology of individual differences in complex behavioral traits. This chapter also discusses how such efforts can contribute to the identification of predictive risk markers that interact with unique environmental factors to precipitate psychopathology.

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Keywords Neurogenetics • Amygdala • Striatum • Threat • Reward • Aggression • Stress

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1 Introduction

Individual differences in trait affect, personality and temperament critically shape complex human behaviors, successfully navigating social interactions and overcoming challenges from our ever changing environments. Such individual differences may also serve as important predictors of vulnerability to psychopathology including depression, anxiety, addiction, and antisocial personality disorder, especially upon exposure to environmental adversity. Accordingly, identifying the biological mechanisms which give rise to trait individual differences affords unique opportunity to develop a deeper understanding of complex human behaviors, disease liability and treatment. Having established multiple modal neural processes supporting specific aspects of complex social behavior, research has now begun to reveal the neural substrates of inter-individual variability in these and related constructs. Moreover, recent studies have established that these neural substrates represent temporally stable and reliable indices of brain function. Thus, much like their behavioral counterparts, brain function represents an enduring, trait-like phenomenon, which in and of themselves may serve as important markers of individual differences as well as disease liability and pathophysiology.

As research continues to illustrate the predictive relationship between brain activation and trait-like behaviors (e.g., increased amygdala reactivity predicts trait anxiety), an important next step is to systematically identify the underlying mechanisms driving variability in brain circuit function. In this regard, neuroimaging studies employing pharmacologic challenge paradigms, principally targeting monoamine neurotransmission and hormonal systems, have revealed that even subtle alterations in dopaminergic, noradrenergic, serotonergic and neuroendocrine signaling can have profound impact on the functional response of brain circuitries supporting affect, personality and temperament. Similarly, multimodal neuroimaging approaches have provided evidence for directionally specific

relationships between key components of monoaminergic signaling cascades, assessed with radiotracer positron emission tomography (PET), and brain function, assessed with BOLD fMRI. Collectively, pharmacological challenge neuroimaging and multimodal PET/fMRI are revealing how variability in behaviorally relevant brain activation emerges as a function of underlying variability in key brain signaling pathways (e.g., increased serotonin signaling predicting increased amygdala reactivity). The next logical step is to identify the sources of inter-individual variability in these key neurochemical signaling mechanisms.

In the modern era of human molecular genetics, one step is firmly planted in the direction of identifying common variation in the genes that influence the functioning or availability of components in these pathways. As DNA sequence variation across individuals represents the ultimate wellspring of variability in emergent molecular, neurobiological and related behavioral processes, understanding the relationships between genes, brain and behavior is important for establishing a mechanistic foundation for individual differences in behavior and related psychiatric disease. Moreover, such genetic polymorphisms can be readily identified from DNA collected via cells from individual blood or even saliva samples using relatively well-tolerated, inexpensive and standardized laboratory protocols. Once collected and isolated, an individual's DNA can be amplified repeatedly providing an almost endless reservoir of material for genotyping of additional candidate polymorphisms as they are identified. When a precise cascade of related neurobiological and behavioral effects are clearly established, common polymorphisms can represent incredibly powerful predictive markers of such emergent properties that are more readily accessible (e.g., samples can be collected in doctor's offices), applicable (e.g., even newborns can be genotyped) and economical (e.g., costing only tens of dollars per sample in comparison to the hundreds and even thousands required for fMRI and PET) than their technological counterparts in neuroimaging and neuropharmacology. Of course, arriving at this ultimate reduction requires intensive and expansive efforts wherein all these technologies as well as epidemiological and clinical studies are first brought to bear on explicating the detailed biological mechanisms mediating individual differences in trait behaviors and related risk for neuropsychiatric disease.

In the last 5 years, significant progress has been made in describing the contributions of multiple common genetic polymorphisms to individual differences in complex behavioral phenotypes and disease liability—in particular, by identifying effects of functional genetic variation on the neural processes that mediate behavioral responses to environmental challenge (Caspi and Moffitt 2006; Hariri and Holmes 2006). The current chapter will review how the integration of psychology, neuroimaging, neuroendocrinology, neuropharmacology and molecular genetics can work toward the ultimate goal of understanding the detailed mechanisms mediating individual differences in human behavior and, in turn, establish predictive markers of disease vulnerability. The vast potential of such an integrated approach will be highlighted by reviewing recent studies whose collective results demonstrate that common sequence variation in human genes that bias key components of molecular signaling cascades results in altered brain

circuit function that mediates individual differences in complex behavioral traits such as temperamental anxiety, aggression, stress responsiveness and impulsivity. With their increased utilization and continued expansion each level of analysis in this integrative strategy—brain circuit function, neural signaling cascades and molecular genetics—also has the potential to uniquely illuminate clinically relevant information that can be used in efforts to devise individually tailored treatment regimes and establish predictive disease markers. In lieu of further describing a general framework, five specific examples will be used to illustrate the effectiveness of this integrated strategy to parse biological mechanisms mediating individual differences in complex behaviors.

Multiple mechanisms involving *de novo* biosynthesis, vesicular release, active reuptake, metabolic degradation as well as a myriad of both pre- and post-synaptic receptors contribute to the regulation of neurotransmission and its subsequent modulation of brain function. To illustrate the powerful capacity of functional genetic polymorphisms to model emergent variability in signaling pathways, the five exemplars below focus on different critical node in regulating the magnitude of neurotransmission, namely autoregulatory negative feedback, active synaptic reuptake, post-synaptic receptor binding, intracellular receptor binding, and enzymatic degradation. In the first example, individual differences in trait anxiety will be mapped onto threat-related amygdala reactivity. Variability in amygdala reactivity will, in turn, be mapped to serotonin signaling. Finally, variability in serotonin signaling will be mapped to a common functional polymorphism impacting the capacity for negative feedback inhibition of serotonergic neurons in the midbrain. In the second example, a similar relationship will be described between variability in aggression, amygdala reactivity, testosterone signaling and a variable number of tandem repeats in the androgen receptor. The third example describes variability in impulsivity, reward-related ventral striatum reactivity, dopamine signaling and a polymorphism impacting synaptic clearance of striatal dopamine. In the fourth example, a common polymorphism affecting the enzymatic degradation of endocannabinoids will be linked to divergent effects on threat-related amygdala reactivity and reward-related ventral striatum reactivity. In the fifth and last example, variability in stress-responsiveness and hypothalamic–pituitary–adrenal axis function will be linked to a missense polymorphism affecting the mechanistic action of the mineralocorticoid receptor.

2 Trait Anxiety, the Amygdala and Serotonin

The experience of anxiety is commonplace amongst both human and non-human primates as well as other highly social animals. In the context of social interactions, especially within delimited social hierarchies consisting of dominant and subordinate individuals, anxiety serves to shape appropriate and often opposing responses to precipitating events such as competition for limited resources (e.g., food, water, reproductive partners). Sensitivity to potentially threatening social

cues (e.g., affective facial expressions) varies considerably between individuals and represents a core component of commonly employed constructs representing trait anxiety. Individuals with high trait anxiety exhibit a propensity to more frequently appraise situations as more threatening than do others and are generally more sensitive to social cues including those representing both explicit and implicit threat (e.g., angry and fearful facial expressions). In turn, these individuals are at increased risk for developing psychopathology characterized by abnormal social and emotional behaviors such as depression and often precipitated by exposure to chronic or severe stressors. Examining the neural correlates of individual variability in dispositional temperament such as trait anxiety represents an important step in understanding key socioemotional behaviors as well as an effective means of elucidating pathophysiological processes contributing to related disordered states.

Converging evidence from animal and human studies clearly demonstrates that the amygdala is centrally involved in mediating both physiological (e.g., autonomic reactivity) and behavioral (e.g., reallocation of attentional resources) effects that allow an individual to respond adaptively to varied environmental and social challenges (LeDoux 2000). A large corpus of human neuroimaging research reveals that the amygdala is robustly engaged by varied biologically salient stimuli, most notably emotional facial expressions especially those representing threat. However, individuals differ appreciably in the magnitude of amygdala activation on exposure to emotionally expressive facial expressions, and these individual differences appear to be stable over time (Johnstone et al. 2005; Manuck et al. 2007). Thus, they may contribute to the emergence of stable differences in temperament such as trait anxiety.

Recent neuroimaging studies have reported positive relationships between the magnitude of amygdala reactivity to affective, especially threatening, stimuli and inter-individual variability in indices of trait (Dickie and Armony 2008; Etkin et al. 2004; Haas et al. 2007; Killgore and Yurgelun-Todd 2005; Most et al. 2006; Ray et al. 2005) and also state anxiety (Bishop et al. 2004; Somerville et al. 2004). In one study, Stein et al. (2007) report that high trait anxiety is associated with greater amygdala reactivity not only to angry and fearful but also happy facial expressions. Consistent with this pattern of normal variability, various mood and anxiety disorders (e.g., unipolar and bipolar depression, generalized anxiety disorder, social phobia) have been linked with greater amygdala responses to facial expressions depicting fear and anger, as well as sadness and disgust, and, more variably, to emotionally neutral facial expressions (Cooney et al. 2006; Evans et al. 2008; Phan et al. 2006; Phillips et al. 2003; Stein et al. 2002; Whalen et al. 2002). Such findings demonstrate that anxiety-related psychopathology is associated with a heightened amygdala response to diverse affective stimuli. More importantly, in the absence of such disorders, variability in the magnitude of threat-related amygdala reactivity is an important predictor of individual differences in trait anxiety.

Having first established a predictive link between amygdala reactivity and trait anxiety, factors that drive such behaviorally relevant variability in brain function can be now be identified in the broader context of detailing the biological

mechanisms mediating individual differences in temperamental anxiety. Converging preclinical and clinical evidence indicates that amygdala functioning is sensitive to the effects of central serotonin (Sadikot and Parent 1990), whose principle forebrain innervation is provided by the midbrain dorsal raphe nuclei (DRN). Available data from animal studies indicate that relative increases in local 5-HT result in potentiation of amygdala activation and associated behavioral phenomenon, such as fear conditioning (Amat et al. 1998, 2004; Burghardt et al. 2004, 2007; Forster et al. 2006; Maier and Watkins 2005). As advanced in the introduction of this chapter, recent neuroimaging studies using multimodal PET/fMRI or pharmacological challenge BOLD fMRI have provided direct evidence for parallel effects of 5-HT in humans. Specifically, in vivo PET has revealed that decreased endogenous capacity for local 5-HT reuptake (Rhodes et al. 2007) is associated with relatively increased amygdala reactivity. Acute IV administration of a selective serotonin reuptake inhibitor, which reduces capacity for 5-HT reuptake, during BOLD fMRI is likewise associated with not only increased amygdala reactivity but also decreased habituation of amygdala reactivity over time (Bigos et al. 2008). These data clearly indicate that variability in the regulation of 5-HT signaling is an important source of individual differences in amygdala reactivity.

Crucial among components regulating 5-HT neurotransmission and its subsequent modulation of brain function is activation of somatodendritic 5-HT_{1A} autoreceptors, which mediate negative feedback on DRN neurons resulting in decreased 5-HT release at postsynaptic targets in the forebrain (Sharp et al. 2007). Using multimodal PET/fMRI, we previously reported that the density of 5-HT_{1A} autoreceptors accounts for 30–44% of variability in amygdala reactivity in healthy adults (Fisher et al. 2006), confirming the important role of 5-HT_{1A} autoreceptors in modulating the activity of serotonergic target regions. Given the critical role of 5-HT_{1A} autoreceptors in regulating 5-HT signaling and its resulting influence on the functioning of major brain targets, such as the amygdala, as well as complex behavioral processes (Cowen et al. 1994; Hansenne et al. 2002; Lesch and Gutknecht 2004), it is important to identify sources of emergent variability in 5-HT_{1A} function.

Common sequence variation in the human 5-HT_{1A} gene (*HTR1A*) represents one potential source of such inter-individual variability. Recently, a relatively frequent single nucleotide polymorphism, C(-1019)G, in the promoter region of *HTR1A* was demonstrated to impact transcriptional regulation of the gene through altered binding of the transcription factors. Specifically, the -1019G allele abolishes or impairs transcriptional repression of the promoter and, as a consequence, is associated with increased 5-HT_{1A} expression (Lemondé et al. 2003), a phenomenon that appears to be specific to autoreceptors (Czesak et al. 2006). Consistent with this finding, in vivo human PET has revealed specifically increased 5-HT_{1A} autoreceptor density in both healthy adults and depressed patients carrying the -1019G allele (Parsey et al. 2006). However, a similar effect was not observed in an earlier PET study (David et al. 2005). Regardless, the in vitro effects of the *HTR1A* -1019G allele and the more general relationship

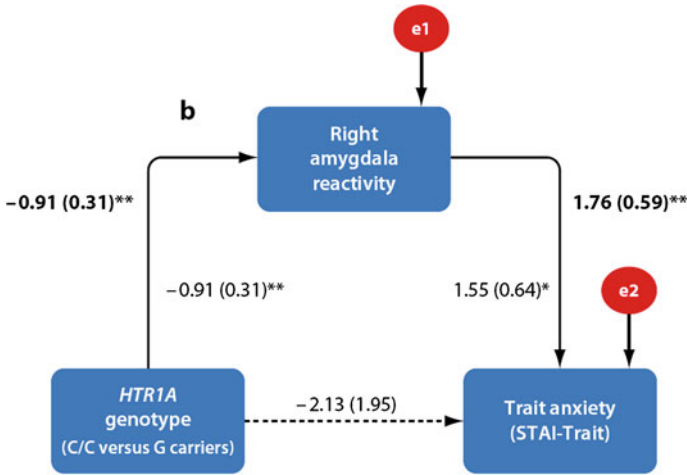


Fig. 1 Trait anxiety is indirectly predicted by *HTR1A* genotype (rs6295) through amygdala reactivity (adapted from Fakra et al 2009; Hariri 2009). Lines are labeled with unstandardized path coefficients and standard errors in parentheses. Bolded coefficients outside of the lines represent values from the trimmed model. Unbolded coefficients presented internally represent values from the full model with all paths included. Significant indirect effects of *HTR1A* genotype on trait anxiety were observed ($\alpha\beta = -1.60$, SE = 0.73, $P < 0.05$) while direct effects were nonsignificant and dropped from the model. E1 and e2 represent the residual variances not explained by variables included in the model. * $P < 0.05$, ** $P < 0.01$

documented between increased 5-HT_{1A} autoreceptor density and decreased amygdala reactivity (Fisher et al. 2006) suggest that this common functional genetic variation may contribute significantly to the emergence of inter-individual variability in serotonin signaling which, in turn, biases amygdala reactivity.

Consistent with the existing data (i.e., increased 5-HT_{1A} autoreceptors leading to increased negative feedback inhibition of DRN and decreased 5-HT release), we recently demonstrated that the *HTR1A* -1019G allele is associated with significantly decreased threat-related amygdala reactivity (Fakra et al. 2009). In addition, we found that *HTR1A* genotype effects on trait anxiety were mediated through its impact on threat-related amygdala reactivity, which presumably reflects the genotypes modulation of postsynaptic 5-HT release. Specifically, while path models revealed no significant direct genotype effect on trait anxiety they demonstrated that *HTR1A* C(-1019)G and amygdala reactivity indirectly predicted a significant proportion (9.2%) of individual differences in trait anxiety through their respective indirect and direct paths (Fig. 1). The data from this study is remarkably consistent with that reported for other common functional polymorphisms also associated with relatively increased 5-HT signaling, most notably the 5-HTTLPR short allele (Hariri et al. 2002b; Munafò et al. 2008) and *MAOA* low-activity alleles (Meyer-Lindenberg et al. 2006). More importantly, these findings represent an important step in this avenue of research by providing empirical documentation for the basic premise that genetic variation in neural signaling cascades indirectly

impact emergent behavioral processes by biasing the response of underlying neural circuitries (Hariri et al. 2006b; Hariri and Weinberger 2003).

3 Aggression, the Amygdala and Testosterone

Aggression, defined as any behavior directed toward the goal of harming or injuring another living being (Baron and Richardson 1994), has a major negative impact on society. For instance, the World Health Organization estimated that over 500 individuals between the ages of 10 and 29 die every day as a result of inter-personal conflict while countless more suffer psychologically and physically from aggression-related events. Nevertheless, despite these negative consequences, the use (or threat) of aggression can be beneficial under certain conditions (e.g., athletic competition, self-defense and establishment of status hierarchies).

Two factors contributing to the expression of aggressive behavior are the pursuit of a desired goal (e.g., money, territory, status, mates) and interpersonal provocation. Accordingly, researchers have typically classified aggressive behavior as either proactive or reactive. Proactive aggression, also referred to as instrumental aggression, occurs in the absence of direct provocation, does not involve physiological arousal, and is a goal-oriented behavior aimed at the acquisition of a valued resource (Dodge and Coi 1987). On the other hand, reactive aggression is a defensive response to perceived or actual provocation and is characterized by anger, impulsivity, affective instability and high levels of physiological arousal (Dodge and Coi 1987). Many cases of proactive aggression are highlighted in the media (e.g., assassinations, serial murders); however, reactive aggression likely accounts for most societal problems (Nelson and Trainor 2007). Thus, in the current section, we will focus primarily on putative neurobiological mechanisms underlying reactive aggression.

Non-human animal and human neuroscience research indicates that aggressive behavior is regulated by several inter-connected nodes of a 'social behavior network' including the hypothalamus, amygdala, bed nucleus of the stria terminalis, lateral septum, periaqueductal gray, and orbitofrontal cortex (see Nelson and Trainor 2007; Davidson et al. 2000 for reviews). In humans, a number of studies converge to implicate amygdala hyper-reactivity and/or reduced amygdala-orbitofrontal cortex (OFC) coupling in response to social threat among individuals prone to anger and reactive aggression (see Siever 2008 for review). For example, in a PET study with criminal offenders, Raine et al. (1997) reported that affective murderers (i.e., reactively aggressive inmates) demonstrated increased glucose metabolism in subcortical structures (including the amygdala) and decreased glucose metabolism in the prefrontal cortex. Subsequent imaging studies found differences in neural responses to threat among individuals characterized by reactive aggressive behavior. For instance, Coccaro et al. (2007) reported that adults diagnosed with intermittent explosive disorder displayed amygdala hyper-reactivity and decreased amygdala-OFC coupling to angry facial expressions.

Patients with borderline personality disorder, who are prone to engage in reactive aggression, demonstrate relatively increased amygdala reactivity to facial expressions depicting threat (Mauchnik and Schmahl 2010) and decreased amygdala-PFC coupling (New et al. 2007). Finally, spousal abusers characterized by reactive (but not proactive) aggression display heightened amygdala reactivity and also demonstrate attentional biases for aggressive words (Lee et al. 2008; Chan et al. 2010).

Studies in non-clinical samples indicate that even normal variation in constructs linked to aggressive behavior maps onto variability in threat-related neural responses. For instance, Beaver et al. (2008) reported that individual differences in approach motivation, a construct linked to reactive aggression (Harmon-Jones 2003), were positively correlated with amygdala reactivity to angry facial expressions. Other research has found that individual differences in approach motivation were associated with decreased ventral ACC-amygdala coupling during processing of angry facial expressions (Passamonti et al. 2008). Given the important role of highly interconnected prefrontal regions (e.g., ventral ACC, OFC) in mediating top-down regulation of amygdala driven emotional reactivity (see Davidson et al. 2000 for review), such decreased functional coupling may, in part, explain the positive link between approach motivation and aggressive behavior. Also, individual differences in trait anger are positively correlated with amygdala reactivity to angry faces, but only among men with relatively elevated trait anxiety scores (Carré et al. *in press-a*). Finally, in a more direct test of the hypothesis that amygdala reactivity to facial cues of threat represents a neurobiological marker for reactive aggression, we have found that variation in self-reported physical aggression is positively correlated with amygdala reactivity to neutral and angry facial expression in two independent samples of healthy men (Carré et al. *in press-b*). Together, these findings converge to suggest that amygdala hyper-reactivity and/or decreased amygdala-OFC coupling during processing of threat-related stimuli may represent a distinct neural signature for one's propensity to engage in reactive aggression (Siever 2008). It is important to note that individuals characterized by callous-unemotional traits and proactive aggression (e.g., conduct disorder, psychopathy) display amygdala and OFC *hypo*-reactivity to facial signals of threat (see Blair 2010 for review).

As described above, it is important to consider the underlying molecular substrates that give rise to individual variation in threat-related amygdala reactivity and amygdala-OFC coupling. Testosterone, the end-product of the hypothalamic pituitary gonadal axis, is one prime candidate. The physiological effects of testosterone occur mainly through binding to intra-cellular steroid hormone receptors (i.e., androgen and estrogen receptors) to ultimately influence gene transcription. Importantly, androgen (and estrogen) receptors are abundantly located in the amygdala and interconnected limbic structures involved in mediating aggressive behavior (see Newman 1999; Simon 2002 for reviews). Thus, through stimulation of steroid hormone receptors and subsequent modulation of cell function (see Adkins-Regan 2005 for review) testosterone can influence the functioning of neural circuits implicated in the expression of human aggression.

Recent functional neuroimaging studies have detailed some of the neural structures that are sensitive to individual differences in testosterone concentrations. In particular, individual differences in baseline testosterone concentrations are positively correlated with amygdala reactivity to facial expressions signaling threat (Derntl et al. 2009; Manuck et al. 2010) and negatively correlated with OFC reactivity to provocation (Mehta and Beer 2010). Consistent with these correlational studies, pharmacologic challenge experiments indicate that acutely raising testosterone concentrations causes an increase in amygdala reactivity and a decrease in amygdala-OFC connectivity in response to facial signals of threat (Hermans et al. 2008; van Wingen et al. 2008, 2010). These findings suggest that the association between acute fluctuations in testosterone and reactive aggression in men (Carré and McCormick 2008; Carré et al. 2009, 2010) may be due to the influence of testosterone on neural processing of threat (e.g., angry faces or provocation), which may ultimately bias aggressive behavior during social challenges.

As discussed above, many of the physiological effects associated with testosterone are mediated by activation of intra-cellular androgen receptors. Specifically, when activated by testosterone, androgen receptors (AR) migrate to the cell nucleus where they regulate gene transcription by activating hormone response elements (HRE) located within gene regulatory sequences. Importantly, the transcription potential of the androgen receptor varies with the expansion of a polyglutamine stretch in the N-terminal domain of the AR protein, as encoded by a trinucleotide (CAG) repeat polymorphism in exon 1 of the X chromosome-linked *AR* gene (Zitzmann and Nieschlag 2003). Specifically, *in vitro* work indicates that the transactivation potential of the androgen receptor declines in relation to an increase in the number of CAG repeats (Chamberlain et al. 1994), and that androgen receptor concentrations decline with an increasing number of CAG repeats (Choong et al. 1998).

Recent evidence indicates that the number of CAG repeats correlate negatively with testosterone responses to social interactions with attractive women (Roney et al. 2009). In other words, men with fewer *AR* CAG repeats demonstrate a more robust neuroendocrine response to potential mates, suggesting that this androgen receptor polymorphism may influence the efficiency with which an individual may mount an endocrine response to social interactions. Furthermore, genetic studies have found that high testosterone men with fewer CAG repeats are more aggressive (Rajender et al. 2008; Vermeesch et al. 2010). Finally, Manuck et al. (2010) found that individual differences in CAG repeat length were negatively correlated with ventral amygdala reactivity to facial expressions depicting threat, particularly among men with relatively high baseline testosterone concentrations. Thus, variation in the number of *AR* CAG repeats modulates testosterone responses to social interactions and amygdala reactivity to facial signals of threat.

Collectively, these findings provide support for the idea that heightened amygdala reactivity to social threat (e.g., provocation and/or facial signals of threat) may represent a neurobiological mechanism through which androgens modulate human aggressive behavior. Pharmacologic challenge experiments in

which aggressive behavior is measured directly during fMRI are needed to confirm the causal role of testosterone in modulating human aggressive and threat-related neural responses.

4 Impulsivity, the Ventral Striatum and Dopamine

Discounting future outcomes underlies much of human decision making and figures prominently in several overlapping psychological constructs such as self-regulation, impulse-control, delay of gratification and intertemporal choice (Manuck et al. 2003). Moreover, individuals who strongly prefer immediate over deferred rewards of larger nominal value are often generally impulsive or lacking in self-control and at risk for addictive disorders such as pathological gambling, cigarette smoking and drug and alcohol abuse (Alessi and Petry 2003; Bickel et al. 1999; Kirby et al. 1999; Madden et al. 1997). In experimental research on intertemporal choice, discounting of future rewards or delay discounting (DD) is a well-characterized behavioral measure of preference for immediate over delayed rewards and provides an index of impulsive tendencies in humans (Green and Myerson 2004). Behavioral tests used to derive estimates of DD commonly ask participants to choose between multiple immediate rewards that vary in value and a constant, larger reward available after varying intervals of delay. In such tasks, rates of discounting often differ appreciably and consistently among individuals (Simpson and Vuchinich 2000). Thus, DD represents a potentially important psychometric index of individual differences in present versus future-oriented tendencies.

Similar to the research on trait anxiety and amygdala reactivity explication of the underlying neural processes that give rise to such inter-individual variability has the potential to allow for a more comprehensive understanding of the mechanisms leading not only to normal variability in such behaviors but also the pathophysiology of addiction and related disorders. Through reciprocal cortical and subcortical connections, the nucleus accumbens (NAcc) and, more broadly, the ventral striatum (VS), contribute to the motivational salience of stimuli and abet appetitive or reward-dependent behaviors (Berridge and Robinson 2003). Activity of the VS increases in response to both the anticipation and receipt of rewarding stimuli including primary (e.g., food) and secondary (e.g., money) reinforcers (O'Doherty 2004). Moreover, in addiction, craving and compulsive drug seeking as well as sensitivity to drug cues are associated with dysregulated increases in VS activity (Kalivas and Volkow 2005). Because the response of the VS involves an immediate response to rewards, the magnitude of VS activity may contribute to individual differences in a relative preference for immediate, compared to delayed, rewards.

Using BOLD fMRI, we have demonstrated that the magnitude of VS reactivity predicts individual differences in a simple laboratory measure of DD (Hariri et al. 2006a). Specifically, analyses revealed that individual differences in DD correlate

positively with magnitude of VS activation in response to both positive and negative feedback as well as with differential reward-related VS activation in response to positive compared with negative feedback. Consistent with the strong general correlation between DD and traditional self-report measures of impulsivity (De Wit et al. 2004, 2007), we have also found that reward-related VS reactivity is positively correlated with scores from the Barratt Impulsiveness Scale (Forbes et al. 2009). Collectively, our results suggest that increased self-reported impulsivity as well as the preference for smaller immediate over larger delayed rewards reflect both a relatively indiscriminate and hyper-reactive VS circuitry. Similar variability in VS function has also been associated with more complex measures of incentive-based decision making (Knutson et al. 2007). Moreover, dysregulation of the VS contributes to addiction, perhaps by affecting impulsive decision making (Kalivas and Volkow 2005). As such, inter-individual variability in VS reactivity to reward-related stimuli likely contributes to the emergence of differences in the intermediate behavioral risk factors for, as well as the clinical expression of, addiction. Identifying variability in neural signaling pathways that contributes to individual differences in VS function offers additional traction in the search for underlying biological mechanisms.

Dopamine modulation of neuronal activity, especially in the VS (i.e., mesolimbic system), serves as a nexus for the expression of DA signaling at the level of reward-related behaviors (Cardinal et al. 2004; Kelley 2004). Functioning of the DA system has been linked to normal individual differences in reward-related traits (Depue et al. 1994), and disorders involving enhanced reward-seeking, such as addiction, have been hypothesized to reflect maladaptive alterations of this mesolimbic reward system (Hyman et al. 2006; Volkow et al. 1999). Multimodal and pharmacological neuroimaging studies of DA effects on brain function again offer a unique opportunity to more directly evaluate underlying molecular mechanisms regulating this circuitry. A recent *in vivo* human study reported a direct relationship between striatal DA synthesis, assessed with PET and brain activity, assessed with BOLD fMRI (Siessmeier et al. 2006). Acute increase of DA release via oral amphetamine has also been linked with relatively increased extent of BOLD fMRI assessed VS activity (Menon et al. 2007). More generally, acute pharmacologic increase of DA in both healthy volunteers (Hariri et al. 2002a) and patients with Parkinson's disease (Tessitore et al. 2002) results in relatively increased BOLD fMRI assessed activity in closely related limbic brain regions, namely the amygdala. Given the importance of DA in modulating this behaviorally relevant neural circuitry, identifying factors that determine inter-individual variability in DA signaling and its related impact on the reactivity of the VS will facilitate our understanding of the neurobiological mechanisms governing reward-related behaviors and augment efforts to improve the treatment and even prevention of pathological behaviors such as drug abuse and addiction.

We have explored the role of altered DA signaling, resulting from a common functional polymorphism impacting active synaptic reuptake in the striatum, in determining inter-individual variability in reward-related VS reactivity and correlated variability in behavioral impulsivity. Consistent with the research on serotonin

signaling, amygdala reactivity and trait anxiety, the selection of our candidate polymorphism was driven by available *in vitro* and/or *in vivo* assays demonstrating significant impact of the variant on aspects of biological function related to DA neurotransmission and not on available data from association studies with behavioral (e.g., impulsivity) or clinical (e.g., alcoholism) phenotypes. While association studies are necessary for understanding the ultimate contribution of genetic polymorphisms to variability in behavioral and clinical phenomena, they do not readily allow for inferences regarding polymorphic effects on gene or protein function. Such inferences are instrumental for the development of biologically plausible and tractable hypotheses regarding the impact of genetic variation on inter-individual variability in brain function and associated behaviors such as those pursued in our current work (Hariri et al. 2006b; Hariri and Weinberger 2003).

The dopamine transporter is responsible for the active clearance of synaptic DA and, thus, plays a critical role in regulating the duration of postsynaptic DA signaling, especially in the striatum (Sesack et al. 1998). Accumulating evidence indicates that a 40-base pair variable number of tandem repeats (VNTR) polymorphism in the 3' untranslated region of the DAT gene (*SLC6A3*) impacts the expression and availability of DAT (Bannon et al. 2001). Although a genotype effect has not been consistently observed across all studies (Martinez et al. 2001; Michelhaugh et al. 2001; Mill et al. 2005; van Dyck et al. 2005), several suggest that in comparison to the 9-repeat allele, the 10-repeat is associated with relatively increased levels of DAT both *in vivo* (Cheon et al. 2005; Heinz et al. 2000) and *in vitro* (Mill et al. 2002; Van Ness et al. 2005). We hypothesized that there would be relatively greater VS reactivity associated with the 9-repeat allele, which is linked with reduced DAT expression and presumably greater striatal synaptic DA, in comparison with the 10-repeat allele. Consistent with our hypothesis, the DAT1 9-repeat allele was associated with relatively greater VS reactivity and accounted for nearly 12% of the inter-individual variability. In contrast, genetic variation directly affecting DA signaling only in the prefrontal cortex (i.e., COMT Val158Met) was not associated with variability in VS reactivity. These results highlight an important role for a genetic polymorphism affecting striatal DA neurotransmission in mediating inter-individual differences in reward-related VS reactivity. They further suggest that altered VS reactivity may represent a key neurobiological pathway through which these polymorphisms contribute to variability in behavioral impulsivity and related risk for substance use disorders.

5 Endocannabinoids, Threat- and Reward-Related Brain Functions

Modern neuroscience methodologies have greatly advanced our understanding of the intrinsic mechanisms mediating and regulating endogenous cannabinoid or endocannabinoid (eCB) signaling in the CNS (Piomelli 2003). Such eCB signaling has emerged as a potent modulator of neural circuitries mediating both basic

physiological (Calignano et al. 1998; Meng et al. 1998) and advanced behavioral responses (Maldonado et al. 2006; Scherma et al. 2008; Viveros et al. 2005). Experimental manipulation of these mechanisms has revealed significant behavioral effects, especially in threat- and reward-related domains, which are generally consistent with the effects of *Cannabis* intoxication, which are largely driven by the constituent chemical Δ^9 -tetrahydrocannabinol (Robson 2005). The elucidation of molecular mechanisms regulating eCB signaling, akin to that for serotonin and dopamine, has motivated attempts to understand its possible contribution to the emergence of variability in brain circuit function and related individual differences in behavioral attributes (e.g., anxious or impulsive temperament) associated with increased risk for psychiatric disorders.

After their biosynthesis from arachidonic acid, eCBs such as anandamide (AEA) and 2-arachidonoylglycerol (2-AG) typically modulate synaptic neurotransmission through stimulation of CB1, the principal CNS cannabinoid receptor widely expressed on multiple neuronal subtypes and their distributed circuitries. In turn, the duration and intensity of eCB signaling, especially for AEA, is regulated by two complementary mechanisms: enzymatic degradation via fatty acid amide hydrolase (Cravatt et al. 1996) and active synaptic clearance via the AEA transporter (Piomelli et al. 1999). The psychotropic and THC-like effects of AEA, however, appear to be coupled with fatty acid amide hydrolase (FAAH), but not AEA transporter function (Solinas et al. 2007). Thus, FAAH, an integral membrane enzyme, may uniquely regulate behaviorally relevant eCB signaling by mediating the hydrolytic breakdown of AEA into arachidonic acid and ethanolamine.

Again, common genetic variation (i.e., polymorphisms) affecting the functioning of components involved in eCB neurotransmission (e.g., AEA, CB1, FAAH) may represent a significant potential source of inter-individual variability in eCB signaling that mediates emergent differences in emotion- and reward-related behaviors (Onaivi et al. 2002). Because of its critical role in regulating the signaling duration and intensity of AEA (Cravatt et al. 1996), and its selective contribution to the psychotropic effects of AEA (Solinas et al. 2007), we have recently examined the neurobiological and behavioral effects of a common functional nonsynonymous SNP resulting in the conversion of a conserved proline residue to threonine (P129T) in the amino acid sequence of FAAH (Hariri et al. 2009). In vitro, *FAAH* 385A is associated with normal catalytic properties, but reduced cellular expression of FAAH, possibly through enhanced sensitivity to proteolytic degradation (Chiang et al. 2004; Sipe et al. 2002). Moreover, the C385A is the only common mutation in *FAAH* (Flanagan et al. 2006) and the 385A, which putatively augments AEA signaling via decreased enzymatic degradation, has been associated with reward-related pathologies including street drug use and problem drug/alcohol abuse, as well as being overweight and obese (Flanagan et al. 2006; Sipe et al. 2002).

In animal models, both pharmacologic and genetic disruption of FAAH function result in *decreased* anxiety-like behaviors, as well as *increased* consumption and preference for ethanol (Basavarajappa et al. 2006; Blednov et al. 2007; Kathuria et al. 2003; Moreira et al. 2008; Solinas et al. 2007). Moreover, a recent pharmacologic fMRI study in human subjects has reported that acute oral administration of

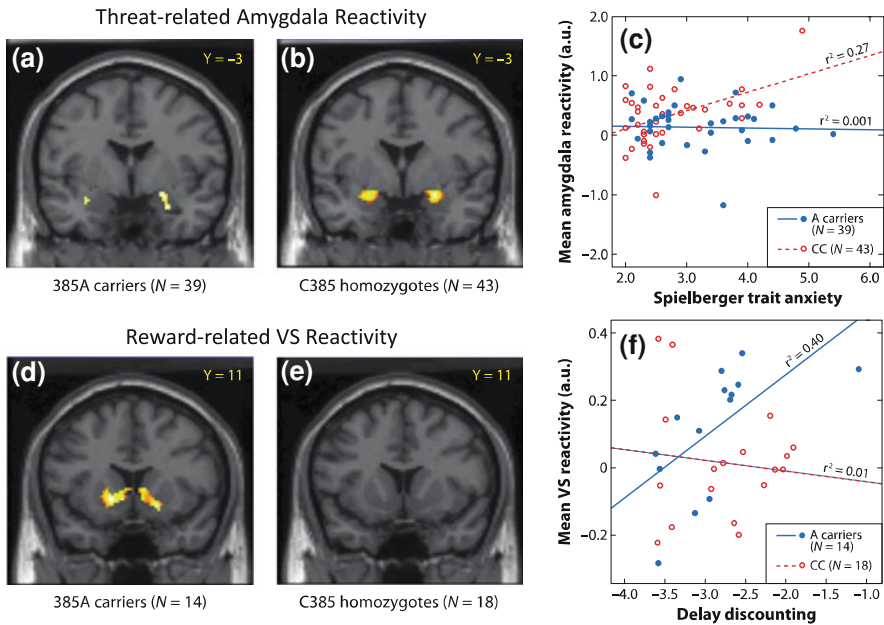


Fig. 2 Effects of *FAAH* genotype (rs324420) on threat- and reward-related brain activation (adapted from Hariri et al. 2009; Hariri 2009). Statistical parametric maps displaying the correlation between threat-related amygdala reactivity and trait anxiety in **a** *FAAH* 385A carriers and **b** C385 homozygotes. **c** Plots of the correlation between threat-related amygdala reactivity and trait anxiety according to *FAAH* C385 genotype. Statistical parametric maps displaying the correlation between reward-related ventral striatal (VS) reactivity and delay discounting in **d** *FAAH* 385A carriers and **e** C385 homozygotes (no significant correlation observed). **f** Plots of the correlation between reward-related VS reactivity and delay discounting according to *FAAH* C385A genotype. *FAAH*: fatty acid amide hydrolase

THC is associated with reduced amygdala reactivity to threat-related facial expressions of emotion (Phan et al. 2008). Consistent with these effects, we hypothesized that the *FAAH* 385A would be associated with relatively *decreased* threat-related amygdala reactivity, but *increased* reward-related reactivity in the VS. Analyses revealed that carriers of the *FAAH* 385A, associated with reduced enzyme expression and, presumably, increased AEA signaling, have decreased threat-related amygdala reactivity. In contrast, carriers of the *FAAH* 385A exhibited increased reward-related VS reactivity in comparison to C385 homozygotes. Moreover, divergent effects of *FAAH* C385A genotype on brain function were manifest in a consistent manner at the level of brain-behavior relationships (Fig. 2). Relative to C385 homozygotes, *FAAH* 385A carriers showed a diminished relationship between amygdala reactivity and trait anxiety. In contrast, 385A carriers exhibited a markedly increased relationship between VS reactivity and delay discounting, a behavioral index of impulsivity and reward-sensitivity.

It is important to note that there were no direct associations between *FAAH* genotype and behavioral phenotypes (i.e., anxiety or impulsivity) in this study, a common occurrence when working with relatively small samples, possibly reflecting the minimal effect the proximal biological impact associated with any genotype has on any distal behavioral phenotype (Hariri et al. 2006b; Hariri and Weinberger 2003), as well as the importance of environmental stressors in unmasking genetically driven effects on behavior (Caspi and Moffitt 2006). However, there were robust differences in the relationships between regional brain function and complex behaviors as a function of *FAAH* C385A genotype. These observed brain-behavior patterns may reflect the influence *FAAH* C385A associated differences in endogenous eCB tone on stimulus-driven neural circuit function mediating complex behavioral processes. Relatively higher levels of AEA in the amygdala of *FAAH* 385A carriers may reduce the responsivity of this structure to salient input (possibly through CB1-mediated potentiation of local GABAergic interneurons) and, as a consequence, lead to reduced anxiety-like behaviors predicted by amygdala function. In contrast, higher levels of AEA may increase the responsivity of the VS in *FAAH* 385A carriers (possibly through CB1-mediated increased dopamine release and potentiation of VS neuron activity) leading to increased reward-sensitivity predicted by VS function. Support for this speculation exists in studies reporting a failure of restraint stress to effect changes in amygdala activation in knockouts lacking *FAAH* or animals treated with *FAAH* inhibitors (Patel et al. 2005), and increased food-intake as a result of local *FAAH* inhibition in the nucleus accumbens (Sorice-Gomez et al. 2007). Thus, the endogenous state of eCB signaling associated with either constitutive genetic variation such as the *FAAH* C385A or acute pharmacologic manipulation likely biases the responsivity of neural circuits to behaviorally relevant information and their subsequent regulation of complex behaviors.

Decreased threat-related amygdala reactivity and associated trait anxiety may contribute to the emergence of pathologies such as addiction and obesity, previously associated with the *FAAH* 385A (Flanagan et al. 2006; Sipe et al. 2002; Tyndale et al. 2007), by reducing the sensitivity of these individuals to potential environmental threat or harm. In fact, blunted amygdala reactivity has been reported in individuals at high familial risk for alcoholism and this has been interpreted as possibly contributing to decreased threat-sensitivity and subsequently increased risk-taking behaviors in these genetically predisposed individuals (Glahn et al. 2007). An increase in reward-related VS reactivity and associated impulsivity (e.g., steeper discounting of future, relative to immediate rewards) may likewise contribute to disinhibitory psychopathologies through heightened reward-sensitivity and impulsive decision making. Studies in addicted patients have generally reported a sensitization of the neural circuitry for reward, including the VS (Kalivas and Volkow 2005). And, increased behavioral impulsivity and reward-sensitivity are significant risk factors for addiction (de Wit and Richards 2004). Thus, through divergent effects on both threat- and reward-related brain functions, the influence of *FAAH* C385A on eCB signaling may have a compound and accelerated effect on risk for related pathologies.

6 Stress, the HPA Axis and the Mineralocorticoid Receptor

All organisms strive to maintain homeostasis by regulating physiological states within a dynamic equilibrium. Stress, the perception of inadequate coping resources in the context of environmental demands appraised as threatening, is a common experience that disrupts homeostasis, and triggers a biological-behavioral stress response to promote adaptation/survival. While stress can promote adaptive coping to environmental challenges by recruiting necessary resources, it is also associated with many adverse physical and mental health conditions such as cardiovascular disease, depression, post-traumatic stress disorder (PTSD) and immune system dysfunction (Cohen et al. 2007; McEwen and Gianaros 2010). Importantly, there is tremendous variability in which environmental demands individuals perceive as stressful as well the extent of physiological and psychological response to these demands (Dickerson and Kemeny 2004; Kudielka et al 2009). Because this variability is associated with stress-related physical and mental health outcomes and differences in related neural activation (Marques et al. 2009; Yehuda 2002), identifying the factors that contribute to variability in stress reactivity is an important step for understanding the etiology of stress-related disorders as well as limiting the sequelae of stressful experiences.

A wealth of research has established that stress reactivity is centrally regulated by the hypothalamic–pituitary–adrenal (HPA) axis (for reviews see de Kloet et al. 2005; Ulrich-Lai and Herman 2009). Briefly, pathways from the medial prefrontal cortex, hippocampus, amygdala and brainstem involved in the behavioral, neuroendocrine, autonomic and immune responses to stress converge within the paraventricular nucleus of the hypothalamus to regulate the release of corticotropin releasing hormone (CRH) in response to perceived stress. CRH triggers the release of adrenocorticotrophic hormone (ACTH) from the anterior pituitary gland, which upon binding to receptors in the adrenal gland, stimulates cortisol release. As part of a negative feedback loop, increases in cortisol inhibit CRH and ACTH release from the hypothalamus and anterior pituitary gland, respectively. At all levels in the cascade, HPA axis function varies widely across individuals and is relatively stable over time (Fox et al. 2006; Kudielka et al. 2009; Márquez et al. 2005) suggesting that trait-like variation in HPA axis function may contribute to stable differences in responses to stressors.

Rodent knockout and non-human and human pharmacologic challenge studies have demonstrated that disruption at all nodes of the HPA axis (e.g., hypothalamus, pituitary, adrenal gland) can induce anxiety and depressive-like behavior (e.g., Kolber and Muglia 2009; Marques et al. 2009; Müller et al. 2002). Moreover, nearly 50 years of research has strongly linked abnormal function at all levels of the HPA axis to stress-related psychopathology (Gibbons and McHugh 1962; Marquis et al. 2009; Yehuda 2002). For instance, depression is characterized by elevated CRH, ACTH and cortisol as well as a disrupted negative feedback loop whereby cortisol does not effectively inhibit CRH and ACTH (van Praag et al. 2004). PTSD is associated with elevated CRH but diminished ACTH and cortisol

as well as an enhanced cortisol-induced inhibition of CRH and ACTH (Yehuda 2002). Furthermore, HPA dysregulation is associated with a number of risk factors for psychopathology such as childhood maltreatment (Tarullo and Gunnar 2006) and low social support (Abercrombie et al. 2004).

More recently, and consistent with earlier non-human animal work (Rodrigues et al. 2009; Ulrich-Lai and Herman 2009), translational neuroimaging research suggests that HPA axis function is associated with structural and functional differences in brain regions, such as the hippocampus, amygdala, basal ganglia and prefrontal cortex, that are relevant to stress-related psychopathology (for review see Pruessner et al. 2010; McEwen and Gianaros 2010). For example, Urry et al. (2006) show that heightened amygdala and reduced ventromedial prefrontal cortex activation during the regulation of negative affect is associated with dysregulated HPA axis function. Moreover, prefrontal glucose metabolism, an index of neuronal activity, predicts variability in HPA axis function (Jahn et al. 2010; Kern et al. 2008), and lesions to these brain regions result in HPA axis dysregulation (Buchanan et al. 2010).

Given the firm association between HPA axis function and stress-related psychopathology and related neural circuitry, factors that shape the responsiveness of this system can be studied with the ultimate goal of identifying mechanisms underlying individual differences in response to stress. As mentioned above, in addition to numerous regulatory mechanisms inside and outside of the HPA axis, cortisol is a major regulator of HPA axis function and related neural systems. In support of a causal relationship between cortisol and stress-related psychopathology, 20% of patients prescribed chronic high doses of hydrocortisone (a synthetic form of cortisol), develop psychopathology including depression, mania and psychosis. In addition, while 75% report some psychiatric symptoms these disappear following treatment cessation (see Marques et al. 2009).

Cortisol operates through a binary corticosteroid receptor system, binding to both the high affinity mineralocorticoid receptor (MR) and low affinity glucocorticoid receptor (GR) which are widely co-expressed in limbic neurons including those in the amygdala (de Kloet et al. 2005; Joëls et al. 2008). These intracellular receptors function as transcriptional regulators whereby binding can alter the expression of 70–100 genes (de Kloet et al. 2005), which likely has widespread consequences for neural activation and stress responsiveness. Recent research provides support for the existence of long-hypothesized membrane-bound MR and GR, although the mechanism(s) through which these effects occur remain unclear (Bartholome et al. 2004; Karst et al. 2006; Joëls et al. 2008).

Because of its low affinity, the GR is only extensively occupied in the wake of large spikes in cortisol such as those associated with stressors or circadian rhythms. One of the primary functions of the GR is to normalize brain activity following the extinction of a stressor and to inhibit continued HPA axis response. On the other hand, because of its high affinity, the MR is almost always occupied and non-human animal research suggests that it is necessary for a stable excitatory tone in the hippocampus which inhibits the HPA axis under basal and stressful circumstances (Reul et al. 2000). In addition to tonically inhibiting HPA axis

response, MR binding is relevant to behavioral stress response functions including the appraisal of novel situations as well as the selection of appropriate responses to deal with challenge (de Kloet et al. 2005; Joëls et al. 2008). Thus, it is believed that the MR is prominently involved in basal stress system regulation and the onset of a stress response while the GR primarily functions to terminate an initial stress reaction. As such, the MR is an ideal candidate to contribute to differences in stress reactivity.

In mice, MR knockout or antagonism increases basal and stress-evoked HPA axis activity (Gass et al. 2001) and worsens response to antidepressant medication (DeRijk et al. 2008). Conversely, enhanced MR expression is associated with reduced depressive- and anxiety-like behaviors and corticosterone (the rodent homolog of cortisol) secretion under stressful and basal conditions (Mitra et al. 2009; Rozeboom et al. 2007). Consistent with these mechanisms, antidepressant medications increase MR expression (Brady et al. 1991). Collectively, these findings suggest that reduced MR function may contribute to elevated HPA axis activity at baseline and in dysregulated responses to stressors. Thus, given the prominent role of the MR in stress-responsiveness, stress-related behavior and psychopathology, it is important to identify sources of variability in MR function.

A missense isoleucine(Iso)/valine(Val) polymorphism (rs5522) located in exon 2 of the MR gene (*NR3C2*) occurs in approximately 10% of the Caucasian population. Importantly, *in vitro* studies show that the Val allele is associated with reduced cortisol, but not aldosterone, binding and reduced cortisol-induced transactivation (De Rijk et al. 2006; Arai et al. 2003). Thus, the MR Val allele may promote elevated HPA axis activity under basal conditions and in response to small stressors due to reduced cortisol-MR binding and subsequently decreased inhibition of the HPA axis. The Val allele may promote the development of HPA axis dysregulation, not only through reduced inhibition of HPA axis responsiveness but also because of reduced MR expression typically elicited by cortisol.

Consistent with these functional associations and speculations, the MR Val allele has been linked to heightened endocrine and autonomic responses to acute stress and stress perception. Specifically, the Val allele is associated with elevated cortisol and heart rate responses to acute social stress (DeRijk et al. 2006), skin conductance responses evoked by acute physical stress (threat-of-shock, Bogdan et al. 2010), perceptions of the aversiveness of shock levels (Bogdan et al. 2010) and waking cortisol levels (van Leeuwen et al. 2010). Furthermore, relative to Iso homozygotes, youth Val carriers have heightened threat-related amygdala reactivity, particularly in the context of low emotional neglect (Bogdan et al. *in press*). Collectively these findings suggest that the functional effect of the Val allele does result in enhanced stress responsiveness and perception. Furthermore, the Val allele has been associated with enhanced reward learning under basal conditions, but a vulnerability to stress-induced reward learning deficits (Bogdan et al. 2010) as well as depressive symptoms (Kuningas et al. 2007). Thus, it appears that the heightened stress responsiveness characteristic of the Val allele may translate to important behaviorally relevant differences related to psychopathology.

Taken together, individual differences in HPA axis function are predictive of stress-related physical and mental health disturbance in what appears to be a causal relationship. In addition to work showing that environmental experience (e.g., childhood maltreatment) can have long-lasting and even epigenetic effects (McGowan et al. 2009) on HPA axis system function, emerging research has shown that common polymorphisms including that in the MR gene detailed here as well as in the genes for GR (DeRijk et al. 2008), CRHR1 (Binder 2009; Binder and Nemeroff 2010; Thode et al. unpublished observation) and FKBP5 (REF) influence variability in HPA axis function, stress sensitivity and psychopathology. Given the association of both environmental and genetic factors with individual differences in HPA axis function, this system may be a particularly fruitful area to further pursue gene-by-environment interactions research.

7 Summary and Future Directions

As detailed above, multimodal techniques assessing brain function, have begun to identify how variability in neural substrates associated with processing specific forms of information contribute to emergent individual differences in stable and enduring aspects of human behaviors such as personality and temperament. In parallel, the application of pharmacologic fMRI, multimodal PET/fMRI, and neuroendocrinology is allowing for an understanding of how variability in specific molecular signaling pathways influences individual differences in behaviorally relevant brain function. Moreover, information on DNA sequence variation in humans and related identification of functional genetic polymorphisms is now being utilized to understand the biological origins of variability in component processes of molecular signaling pathways as well as to efficiently model how such emergent variability impacts behaviorally relevant brain function. Such ongoing efforts to understand the detailed mechanisms that mediate individual differences in complex behavioral traits and related psychopathology at the level of brain circuit function, molecular signaling pathways and functional genetic polymorphisms have the potential to inform clinically relevant issues and provide guiding principles for the development of more effective and individually tailored treatment regimes. In addition, the elucidation of such mechanisms, especially those mapped to functional genetic polymorphisms, can lead to identification of predictive risk markers that interact with unique environmental factors to precipitate psychopathology.

While the five examples highlighted in this chapter are evidence for the potential of an informed and integrated research strategy to identify the neurobiology of individual differences in complex behavioral traits and their related clinical endpoints, much work is left to be done. First, to allow for tractable experimental designs and testable hypotheses in existing samples, the studies highlighted above have focused on the effects of a single signaling pathway on behaviorally relevant brain circuitry. Of course, it is very clear that there are

numerous complex interactions between signaling pathways and that more than one pathway contributes to the regulation of any brain circuitry. For example, we know that DA plays an important role in modulating amygdala function and anxiety (Hariri et al. 2002a; Tessitore et al. 2002), and that 5-HT can influence reward-related brain circuitry and impulsivity (Manuck et al. 1998). However, existing studies lack the power and sophistication to model such complex interactions while effectively controlling for other important modulatory factors (e.g., age, gender, stress exposure) in the context of BOLD fMRI, pharmacologic fMRI or multimodal PET/fMRI protocols. To do so, we must aggressively expand the scale and scope of our studies to include hundreds and, preferably, thousands of subjects. This will afford opportunities to effectively examine interactions between signaling pathways (e.g., 5-HT and DA) on brain function and behavior through modeling of multiple functional polymorphisms (e.g., *HTR1A* -1019 and *DAT1*), and examine the effects of genetically driven variation in signaling pathways on multiple behaviorally relevant brain circuitries.

A second important consideration is that existing studies have been largely conducted in ethnically and racially homogenous populations. Thus, the observed effects may not generalize to other populations. This is especially true of studies utilizing functional genetic polymorphisms because the potential effect of any single genetic variant on a complex biological and behavioral phenotype is likely to be small against the background of the approximately 20,000–25,000 human genes and the multitude of other neurobiologically relevant functional variants they likely harbor. In fact, we have already seen that the well-replicated effects of a common functional polymorphism affecting 5-HT signaling on amygdala reactivity in Caucasian subjects may be reversed in those of Asian ancestry (Lee and Ham 2008; Munafo et al. 2008). Importantly, our most recent studies have experimentally controlled for occult genetic stratification independent of self-reported race or ethnicity as well as the independence of the target genotype from other functional polymorphisms impacting the brain functions under study. While such efforts allow for the attribution of emergent variability in brain and behavior to the candidate variant of interest and not to other possible polymorphisms or more general differences between genotype groups in genetic background, it is important to explicitly test the independence of functional polymorphisms through rigorous statistical modeling in larger samples and also to test the validity of any associations derived in one sample population (e.g., Caucasian) to populations with different genetic backgrounds (e.g., Asian or African).

A third important consideration for the future of this research is the need to conduct large-scale prospective studies beginning in childhood to determine any developmental shifts in neurogenetic pathways mediating individual differences in behavior as well as their predictive utility in identifying risk for psychopathology as a function of environmental or other stressors. All of the studies described above and most of the studies available in the literature as a whole have been conducted in adults carefully screened for the absence of psychopathology. Because of this, these findings identify mechanisms contributing to variability in the normative range of behavior only. The utility of these markers of individual

differences in behavior be they neural, molecular or genetic in predicting vulnerability to psychopathology is unclear. Such predictive utility is ideally tested through prospective studies beginning with premorbid populations that account for the moderating effects of environmental stress in the emergence of clinical disorder over time (Caspi and Moffitt 2006; Viding et al. 2006).

A fourth issue is the need to further integrate pharmacologic challenge protocols with multimodal PET/fMRI to determine if variability in molecular components of signaling pathways mediate effects of specific neurotransmitters or neuromodulators on individual differences in behaviorally relevant brain circuit function. For example, despite the remarkable convergence of findings implicating variability in eCB signaling in threat- and reward-related brain functions, the exact nature of the downstream signaling pathways through which *FAAH* C385A may modulate neuronal and neural circuit function cannot be determined from the available results. *FAAH* catalyses the hydrolysis of other biologically active endogenous fatty acid amides (e.g., oleamide and oleoylethanolamide), which impact threat- and reward-related behaviors independently of AEA (Wei et al. 2007; LoVerme et al. 2005). Although, *FAAH* has high selectivity for AEA (Desarnaud et al. 1995) the effects of *FAAH* C385A cannot be specifically linked to AEA neurotransmission without additional data. If the neural and behavioral effects of *FAAH* C385A are mediated by genotype-driven differential availability of AEA, then these effects should be sensitive to manipulation of CB1 receptors. An interesting test of this putative mechanism would be to examine the impact of CB1 antagonists, such as rimonabant, on neural phenotypes associated with *FAAH* C385A genotype using pharmacologic fMRI. The availability of a PET radiotracer for CB1 (Burns et al. 2007) also allows for the determination of any *FAAH* C385A effects on endogenous receptor concentrations. If this polymorphism biases brain function through AEA stimulation of CB1, then antagonism of the receptor should eliminate the divergent effects on amygdala and VS reactivity documented here. Any genotype related alterations in AEA concentrations may also be reflected in relative up- or down-regulation of CB1 receptors assayed via PET. If CB1 antagonism fails to abolish the differential effects of *FAAH* C385A on brain function or if there are no differences in CB1 concentrations based on the genotype, then the existing effects are likely mediated by non-eCB fatty acid amides. In addition to testing this mechanistic hypothesis with pharmacologic fMRI and multimodal PET/fMRI, future studies with substantially increased sample sizes can model allele load effects of *FAAH* 385A, as well as potential *FAAH* interactions with functional genetic polymorphisms affecting other components of eCB neurotransmission (Chakrabarti et al. 2006).

Fifth, in light of evidence for environmental modulation (Tarullo and Gunnar 2006), gene-by-environment interactions (Caspi and Moffitt 2006) and epigenetic regulation (MacGowan et al. 2009), it is important for future research to not only assess genetic variation, but also to optimize assessments available to assess the objective and subjective impact of positive and negative environmental variables. Examples of this include interview-based methods to assess the objective and subjective impact of stressful life events and prospective study designs to examine the influence of stress over the course of study assessments (e.g., the Life Events and

Difficulties Schedule; Brown and Harris 1978; Monroe 2008; Williamson et al. 2003). Furthermore, in light of theoretical arguments that genotypes associated with adversity may reflect plasticity to the environment and not just vulnerability (e.g., Belsky et al. 2009; Manuck 2010), it is critical for these assessments to also assess positive effects of the environment such as social support (e.g., Hyde et al. 2011).

Finally, there is tremendous potential in developing large databases (again preferably thousands of subjects) with detailed measures of behavioral traits, neuroimaging-based measures of multiple brain circuitries and extensive genotyping. One of the most exciting applications of molecular genetics is in identifying novel biological pathways contributing to the emergence of complex traits (Gibson and Goldstein 2007; McCarthy et al. 2008). The continued refinement of a detailed map of sequence variation across the entire human genome (i.e., SNPs that “tag” every gene) and production of technologies supporting efficient high-throughput identification of such variation in individuals have dramatically accelerated the discovery of genes involved in the emergence of complex disease processes (Fellay et al. 2007; Link et al. 2008) as well as normal variability in continuous traits (Lettre et al. 2008). Many of the genes identified in such studies have illuminated novel pathways not previously implicated in these processes or traits, spurring intensive efforts to understand the potential biological effects of the proteins produced by these genes. As such, these “genome-wide” screens represent an opportunity to leap forward beyond the available pool of candidate molecules and pathways in parsing the mechanisms of complex biological processes. Because neuroimaging-based measures of brain function reveal key mechanisms involved in the emergence of individual differences in behavioral traits and are closer to the biological effects of functional genetic polymorphisms, they are ideal substrates for genome-wide screens. For example, BOLD fMRI estimates of amygdala reactivity predicting variability in trait anxiety can be used as the continuous trait in a genome-wide screen. Any significant associations that emerge between genetic variation and amygdala reactivity may confirm existing relationships (e.g., the importance of genes biasing 5-HT signaling) or, more importantly, reveal unexpected candidate molecules or pathways (e.g., a gene producing a molecule that is expressed in the brain and may function in second-messenger signaling cascades). Once identified and, ideally, replicated in large-scale databases that effectively address confounds common to genome-wide screens (e.g., controlling for multiple comparisons resulting from testing the association of a phenotype with hundreds of thousands or millions of SNPs), the impact of variation in novel genes associated with amygdala reactivity can be explored at each level of the biological cascade leading to trait anxiety (i.e., be fed back into the discovery loop outlined in the introduction). In addition to exponentially improving our understanding of neurobiological pathways leading to individual differences in complex behavioral traits these efforts may lead to the discovery of novel therapeutic strategies targeting related disease processes.

Acknowledgment This manuscript is largely based on an earlier publication in the *Annual Review of Neuroscience* (Hariri 2009).

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Behavioural Genetics of Childhood Disorders

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Abstract After a general introduction into genetic risk factors for child psychiatric disorders, four specific child psychiatric disorders with a strong genetic component, namely, Autism Spectrum Disorders, Attention Deficit / Hyperactivity Disorder, Nocturnal Enuresis, and obesity, are discussed in detail. Recent evidence of linkage, candidate gene, and genome-wide association studies are presented. This chapter ends with a prospectus on further research needs.

Keywords Autism spectrum disorders • Attention deficit/hyperactivity disorder • Nocturnal enuresis • Obesity • BMI • Linkage • Association • Genetic

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1 Introduction

Over the past 50 years, substantial progress has been made in linking specific behavioural and psychiatric phenotypes to chromosomal aberrations or genetic variation at the DNA level. Prerequisites of this development were significant conceptual, methodological and technical advances in both molecular and statistical genetics as well as in phenotypic assessment.

Advances in *cytogenetics* allowed the identification of specific syndromes based on quantitative chromosomal imbalances of complete chromosomes, as in trisomy 21 in 1959, and of chromosomal regions, as in the cri du chat syndrome due to monosomy 5p, in 1963. Approximately five megabases represent the resolution limits of banding techniques; fluorescent in situ hybridisation (FISH) allows detection of deletions as small as 1.5 Mb. Recently, microarray-based comparative genomic hybridisation (array CGH) has been introduced as a complementary method with even higher resolution (Miller et al. 2008).

Micro-deletions can result in syndromes with distinct behavioural features such as the Williams-Beuren Syndrome (7q11.23), Prader-Willi syndrome (paternal 15q11), Angelman syndrome (maternal 15q11), 16p11.2 deletion, the velocardiofacial/DiGeorge syndrome (22q11) and 22q13.3 deletion syndrome (Xiang et al. 2010). Because a single gene on average encompasses 10–15 (kb), the phenotypes of micro-deletion syndromes result from the loss of a number of genes (partial monosomy). Corresponding to micro-deletions, several *micro-duplication syndromes* exist, e.g., corresponding to the Williams-Beuren Syndrome region at 7q11.23, and the chromosome 16p11.2-duplication (Shen et al. 2010). The numerous findings of copy number variations (CNVs) in recent whole genome studies on child psychiatric disorders, as Attention-Deficit/Hyperactivity Disorder (ADHD) or Autism Spectrum Disorders (ASD) (see below) emphasises the relevance of small cytogenetic findings for psychiatric disorders.

Quantitative imbalances can functionally result in over expression (e.g., trisomy or partial trisomy) or under expression (monosomy or partial monosomy) of those genes located on a chromosome or within a specific chromosomal region. Due to the high proportion of genes expressed in the central nervous system, e.g., ~ 80% in mice (Lein et al. 2007), brain function is almost always perturbed in such disorders.

Findings in Down syndrome have revealed that of the approximately 200 genes on chromosome 21, only a subset is responsible for the characteristic phenotype. One well-known example is the early onset of dementia in subjects with Down syndrome, which can partially be attributed to the over expression of the amyloid- β precursor protein gene (APP) located at 21q21-22. In addition to the quantitative imbalance, the Down syndrome phenotype is affected by allelic variation; for example, differences in length of a tetranucleotide repeat in intron 7 of the APP locus explain substantial variation in age at onset of dementia in subjects with trisomy 21 (Margallo-Lana et al. 2004).

The first large scale and systematic genotype–phenotype studies with a primary behavioural, psychological and psychiatric focus centred on sex chromosome (gonosome) disorders. Long-term follow-up of their development into adulthood revealed that these disorders are characterised by subtle neuropsychiatric and neuropsychological symptoms such as an IQ distribution shifted slightly to the left and elevated rates of attention problems, speech and reading difficulties and reduced impulse-control. Nevertheless, the dissection of a highly specific behavioural phenotype associated with any one of these sex chromosome disorders was not possible (Hebebrand 1990; Walzer 1985).

The ability to detect variation at the DNA level, e.g., mutations, formed the basis for the successful elucidation of the molecular mechanisms underlying many monogenetic disorders, which can entail more or less specific behavioural phenotypes. Examples are shown in Table 1. Frequently, such variation is detectable in exons of genes underlying monogenetic disorders and simplistically either entails that the respective gene product is structurally altered or not formed at all. For example, missense mutations entail the substitution of the regular amino acid at a specific position of the protein with another; this alteration of the amino acid sequence of the respective protein can have functional implications at the levels of the cell, tissue and organism. Two monogenetic disorders, which can cause autism, tuberous sclerosis (TSC1-/TSC2-gene) and fragile X syndrome, have been studied thoroughly, and due to the elucidation of the cellular pathways affected by a lack of hamartin or tuberin (tuberous sclerosis) or the FMR1 proteine (fragile X syndrome), new treatment options have been developed which are currently tested in randomised controlled trials (Ehninger et al. 2009; Hagerman et al. 2009).

The majority of DSM-IV TR psychiatric disorders are most likely complex implying that they only infrequently result from single gene mutations. Instead, it is assumed that several gene variants interact in a complex manner with environmental factors to produce the phenotype (Kendler 2005). Complex disorders typically show higher concordance rates in monozygotic than dizygotic twins; concordance rates in monozygotic twins are typically below 1 implying that environmental factors play a role in the manifestation of the disorder. Family studies have shown that complex psychiatric disorders are characterised by elevated recurrence risks in first and second degree relatives which are below those expected for classical monogenetic dominant or recessive traits. Moreover, for the complex psychiatric disorders a steep decline in recurrence risks is observable between first and second degree family members. In third degree relatives recurrence risks are usually only minimally elevated above population based rates of the respective disorder (Hill et al. 2006; Knoblauch 2007).

Table 1 Examples of the influence of single gene disorders on cognition and behaviour

Monogenic disorder	Mode of inheritance	Gene	Cognitive phenotype	Behavioural phenotype
Lesch-Nyhan syndrome	X-chromosomal recessive	Hypoxanthine guanine phosphoribosyltransferase (<i>HPRT</i>)	Mental retardation	Self-mutilative biting of fingers and lips
Tuberous sclerosis	Autosomal dominant	Tuberous sclerosis-1 and -2 (<i>TSC1/-2</i>)	Learning difficulties, low IQ, mental retardation	Behavioural problems, autism, autism spectrum disorder
Fragile X syndrome	X-chromosomal, triplet repeat expansion	Fragile X mental retardation protein (<i>FMR1</i>)	Mental retardation,	Autism spectrum disorder, social phobia, ADHD
Leptin deficiency	Autosomal recessive	Leptin (<i>lep</i>)		Diminished perception of food reward, decreased response to satiety signals, hyperphagia
Chorea Huntington	Autosomal dominant, triplet repeat expansion	Huntingtin	Dementia	Depression, schizophrania, personality change, obsessive-compulsive behaviour
Phenylketonuria	Autosomal recessive	Phenylalanine hydroxylase (<i>PAH</i>)	Mental retardation	Autism
Wilson disease	Autosomal recessive	Membrane copper-transport protein (<i>ATP7B</i>)		Psychiatric symptoms (personality changes, depression, psychosis)
Neurofibromatosis	Autosomal dominant	<i>Neurofibromin</i>	Mental retardation	ADHD

Table 2 Heritability estimates of selected behaviours and developmental milestones

	Assessments	Heritability estimates	
<i>Behaviours</i>			
Dieting	EAT	42%	
Body dissatisfaction	EDI	52%	
Drive for thinness	EDI	44%	
Disinhibition of eating	TFEQ	40%	
Restrained eating	TFEQ	28%	
Hunger	TFEQ	28%	
Obsessive compulsive behaviour	CBCL	45–58%	
<i>Developmental milestones</i>			
Motor	Crawling, sitting	0–90%	
Development	Standing, walking		
		<i>Female</i>	<i>Male</i>
Expressive language “vocabulary”	MCD-I-R	8%	20%
“Two-word-combination-use”	MCD-I-R	28%	10%

EAT= Eating Attitudes Test; *EDI*= Eating Disorder Inventory; *MCD-I-R*= MacArthur Communicative Development Inventories-Short Form; *CBCL*= Child Behaviour Checklist; *TFEQ*= Three Factor Eating

Table adapted from Hebebrand et al. (2010)

Within child and adolescent psychiatry, most twin, family and adoption studies have been carried out for attention-deficit/hyperactivity disorder (ADHD) (Freitag et al. 2010a). ADHD is also noteworthy because large population-based twin studies have analysed quantitative dimensions of the disorder; complex gene-environment twin studies have also been performed. For many behavioural traits and developmental milestones heritability estimates based on categorical or dimensional (quantitative) data indicate that overall approximately half of the variance is explained by genetic factors (Plomin 2005), the other half by the environment (Table 2). For many behavioural traits the environmental influences are predominantly unique effects that explain differences for familial traits; with some exceptions, such as conduct problems, where the familial environment also plays an important role. It is worth noting that in the absence of direct evidence for the impact of the familial environment on a trait, there may still be a role for such influences through gene-environment interactions, which are part of the heritable component in genetic model fitting studies.

For most psychiatric disorders, which are usually assessed categorically, genetic factors have also been shown to play an important role (Table 3). Heritability estimates typically exceed 0.5. ADHD and autistic disorders have been shown to be one of the most highly heritable child and adolescent psychiatric disorders (Asherson et al. 2005; Freitag et al. 2010a, b; Hebebrand et al. 2010). Knowledge of the magnitude of the genetic basis of a particular disorder is valuable for interpreting psychiatric findings within a patient’s family and for probing for specific disorders in relatives of the index patient.

Until recently, candidate gene and linkage studies dominated the attempts to uncover genetic variation underlying such complex disorders. However, viewed in

Table 3 Heritability estimates of selected psychiatric disorders

Disorder	Heritability estimates	Reference
PDD	70–90%	Freitag (2007)
Enuresis	67–70%	Von Gontard et al. (2001)
Conduct Disorder	53%	Gelhorn et al. (2005)
OCD	47%	Bolton et al. (2007)
Anxiety Disorders	30–40%	Eley et al. (2003)
ADHD	70–80%	Faraone et al. (2005)
Anorexia Nervosa	48–88%	Hinney et al. (2010)
Bulimia Nervosa	28–83%	Hinney et al. (2010)
Schizophrenia	73–90%	Sullivan et al. (2003)
Bipolar Disorder	85%	McGuffin et al. (2003)
Major Depression	31–42%	Sullivan et al. (2000)

Table adapted from Hebebrand et al. (2010)

OCD= Obsessive Compulsive Disorder; *PDD*= Pervasive Developmental Disorders (including autistic disorder, Asperger disorder, disintegrative disorder and PDD Not Otherwise Specified); *ADHD*= Attention-Deficit and Hyperactivity Disorder

retrospect it can be concluded that these large scaled efforts were largely unsuccessful; progress in the molecular dissection of complex psychiatric phenotypes proved to be exceedingly slow for a period of over 20 years (Burmeister et al. 2008). Candidate gene studies could only be performed for those genes for which an a priori hypothesis existed as to their relevance for the respective disorder; obviously for each disorder this represented only a very limited number in light of the totally known number of human genes. In addition, candidate gene studies in different psychiatric disorders frequently focussed on the same set of genes of a particular neurotransmitter system, such as dopamine and serotonin transporters and receptors. In other words, the candidate gene studies reflected the paucity of hypotheses as to the underlying pathways involved in complex psychiatric disorders.

In 2006, the first genome-wide association studies (GWAS) based on DNA chip technology were introduced (Hardy et al. 2009). Whereas it is still too early to judge the total insight that this novel technology will provide into the pathogenesis of complex disorders, we can nevertheless already conclude that GWAS have entailed a paradigm shift, thus justifying the nomination as ‘breakthrough of the year’ by Science magazine in 2007 (Pennisi 2007). For many complex somatic and neuropsychiatric disorders, novel genes have been detected which provide initial insights into frequently unknown pathways involved in the respective disorders. For many disorders, different groups pooled their data to come up with several thousand cases and controls, such numbers had almost never been analysed in the pre-GWAS era. A major finding has been that the effect sizes of validated trait or disease-related SNPs are in most cases extremely small. According to a recent synopsis (Hindorff et al. 2009) the median odds ratio was 1.33 with an interquartile range of 1.2–1.61, although more recent evidence for very large-scale studies of traits such as height and body mass index in samples of 100,000–200,000 individuals, indicate effect sizes equivalent to odds ratios of 1.1 or less, with hundreds or risk alleles involved (Speliotes et al. 2010).

Developmental aspects represent a key feature of child and adolescent psychiatry. The unfolding of gene expression provides virtually all of the information necessary to guide the orderly succession of events underlying the development of any organism and the central nervous system in particular. A behavioural trait or the symptoms of any given mental disorder are more uniform for a specific developmental stage than across all of infancy, childhood and adolescence; in addition, comorbidity is dependent on developmental stage. Many traits and disorders must be viewed in the context of brain development, elucidation of the underlying molecular mechanisms will contribute to the identification of genes involved in normal development of the central nervous system and its function. Dyslexia genes, which are involved in global brain-development processes such as neural migration and axonal guidance represent just one such example (Scerri et al. 2010).

Specific disorders run their course during specific developmental phases. Examples include nocturnal enuresis which at age 7 affects approximately 10% and at age 18 only 1% (von Gontard et al. 2001). The reduction of hyperactivity in ADHD during adolescence is another example (Kessler et al. 2005). Both anorexia and bulimia nervosa rarely start in childhood and only infrequently persist beyond 30 years of age (Holtkamp et al. 2005); and in Tourette's disorder both comorbid disorders and the development of the tics show age-related patterns. It appears probable that alterations in expression levels of specific genes partially account for disorder specific manifestation ages and the symptom development over time.

2 Selected Child Psychiatric Disorders with a Strong Genetic Component

Genetic findings in four exemplary child psychiatric disorders, ASD, ADHD, nocturnal enuresis (NE) and obesity will be presented in more detail in the second part of this chapter.

2.1 Autism Spectrum Disorders

ASD are characterised by social interaction and communication difficulties as well as stereotyped behaviour and special interests. ASD show a heritability of around 80–90% (Freitag 2007; Lichtenstein et al. 2010). *Linkage* has been found in at least two independent studies in regions 2q21–33, 3q25–27, 3p25, 4q32, 6q14–21, 7q22, 7q31–36, 11p12–13, 17q11–21 (Alarcon et al. 2008; Duvall et al. 2007; Freitag 2007; Ma et al. 2007; Schellenberg et al. 2006; Szatmari et al. 2007). A meta-analysis confirmed the region 7q22–32, and reported suggestive evidence for linkage to 10p12–q11.1 and 17p11.2–q12 (Trikalinos et al. 2006).

Following linkage studies, genes in replicated linkage regions have been screened for *mutations or common variants* increasing the risk for ASDs. In the

following overview on *candidate gene association studies*, only replicated findings of genes in linked regions will be presented.

Chromosome 2

Different common variants in the mitochondrial aspartate/glutamate carrier (*SLC25A12*) gene located on 2q24 were associated with ASD in several studies (Freitag 2007; Silverman et al. 2008).

Chromosome 3

Oxytocin plays a crucial role in social cognition and behaviour (Donaldson et al. 2008) and the oxytocin receptor gene (*OXTR*) is located under the linkage peak on 3p25. Several single nucleotide polymorphism (SNP) alleles and haplotypes of *OXTR* were associated with ASD (Jacob et al. 2007; Lerer et al. 2008; Wu et al. 2005).

Chromosome 6

Three studies found evidence for association of different SNP genotypes or alleles in the Glutamate receptor 6 (*GluR6*) gene under the linkage peak on chromosome 6 (Freitag 2007).

Chromosome 7

Most candidate genes assessed in ASD are located on chromosome 7q22–36, as this area is best replicated from linkage studies. Mutations or variants in the following candidate genes could not clearly be replicated as risk factors for ASD (Freitag 2007): *FOXP2* (a gene which was mutated in a severe monogenic form of speech and language impairment in one family) (Fisher et al. 1998), *RELN* (neuronal migration, formation of cortical layers, synaptogenesis), *PTPRZI* (highly expressed during embryogenesis), *NRCAM*, *WNT2* and *HOXA1* (hindbrain development in mouse).

The *RELN* (Reelin) gene codes for a signalling protein that plays a crucial role in neuronal migration, formation of cortical layers and synaptogenesis. Three studies supported the involvement of a trinucleotide repeat polymorphism in the 5'UTR region in Reelin in ASD (Persico et al. 2001; Serajee et al. 2006; Skaar et al. 2005), whereas five other, at least similarly powered, studies did not (Bonora et al. 2003; Devlin et al. 2004; Krebs et al. 2002; Li et al. 2004; Zhang et al. 2002).

Different rare and common, possibly functional variants in *LAMB1* were associated with ASD in two studies (Bonora et al. 2005; Freitag 2007; Hutcheson et al. 2004). *LAMB1* encodes the $\beta 1$ chain of laminin, which is an important glycoprotein promoting neuronal migration and neurite outgrowth in the developing nervous system.

Different alleles of two SNPs in the Engrailed 2 (*EN2*)-gene on chromosome 7q36 were associated with ASD in several independent samples (Brune et al. 2008; Freitag 2007; Wang et al. 2008; Yang et al. 2008). *EN2* is a homeobox transcription factor which plays a role during the development of cerebellar and brainstem functions.

Common variants as well as rare mutations in the contactin-associated protein-like 2 (*CNTNAP2*), a member of the neurexin superfamily involved in cell-adhesion and neuronal migration (Alarcon et al. 2008; Arking et al. 2008; Bakkaloglu et al. 2008) also increased the risk for ASD in several independent samples. Gene-expression analyses in the developing human brain identified *CNTNAP2* as enriched in circuits important for language development.

The gene encoding the pleiotropic MET receptor tyrosine kinase plays a role in brain development and gastrointestinal repair. As some individuals with ASD suffer from gastrointestinal symptoms (GIS), this gene was specifically assessed in individuals with ASD and GIS. A functional promoter variant, several other SNP genotypes or alleles as well as rare mutations were associated with ASD in several independent samples, predominantly in individuals with GIS (Campbell et al. 2006, 2009; Sousa et al. 2009). In a post-mortem brain protein expression analysis, ASD individuals showed lower levels of the MET protein compared to controls (Campbell et al. 2007).

Chromosome 17

Due to findings of platelet hyperserotonemia in children with autism and their first-degree relatives, common variants in the Serotonin-transporter gene (*SLC6A4*) were assessed by several studies (Freitag 2007). A recent meta-analysis, however, did not report an effect of 5-HTTLPR and STin2 alleles on ASD risk (Huang et al. 2008).

In addition to association of common variants, co-occurrence of ASD and *single gene disorders* has been observed for a long time. The most prevalent single gene disorders in ASD are tuberous sclerosis (*TSC1/TSC2*; around 1%) and fragile X syndrome (around 3–5%). More rare ($\ll 1\%$), but medically treatable single gene disorders are phenylketonuria (PKU) and Smith-Lemli-Opitz (SLO) syndrome caused by mutations in 7-dehydrocholesterol reductase (*DHCR7*) (Baieli et al. 2003; Freitag 2007; Sikora et al. 2006). The rate of ASD in these disorders also is increased, but ASD is not observed in all individuals carrying the mutation: fragile X syndrome ca. 25% (males), tuberous sclerosis ca. 20%; SLO ca. 50%; PKU ca. 10% (Abrahams et al. 2008). Mutation screening and subsequent association studies have elucidated other rare causes of (most likely) single gene disorders in individuals with ASD. Despite rare positive linkage findings for loci on the X-chromosome, several variants in genes on the X-chromosome were assessed for association with ASD, as the sex distribution in ASD is markedly skewed (male:female = 4:1). Two neuroligin genes on Xq13 and Xp22 were screened for mutations in several studies. Neuroligins are essential components of synaptogenesis. Despite the findings of several non-conservative mutations in

single families in *NLGN3* and *NLGN4* these could not be replicated in larger samples of individuals with ASD (Freitag 2007). Similarly, two mutations identified in the ribosomal protein gene *RPL10* on Xq28 were not replicated in a subsequent study (Gong et al. 2009; Klauck et al. 2006).

For a long-time suspected causes of heterogeneity, ASD are *chromosomal abnormalities* which can be observed by standard karyotyping (Vorstman et al. 2006b). With a rate of approximately 1%, the most prevalent cytogenetic abnormalities are observed on chromosome 15q11-13 (Depienne et al. 2009; Freitag 2007) in most cases maternally, but also paternally inherited duplications. Further, relatively frequent findings are deletions of chromosome 2q37, chromosome 7q31 and deletions or duplications of chromosome 22q13. In addition, Klinefelter Syndrome (XXY) as well as duplications of the Williams-Beuren Syndrome region 7q11.23 and deletions of 22q11 (Velo-cardio-facial syndrome) are associated with increased autistic traits (Berg et al. 2007; van Rijn et al. 2008; Vorstman et al. 2006a).

Due to technological advances, it is now possible to also assess small cytogenetic abnormalities ('copy number variations' CNVs) not detected by standard karyotyping (Henrichsen et al. 2009). Recent publications show that some—especially rare—CNVs are observed more frequently in ASD patients compared to control subjects (Bucan et al. 2009; Glessner et al. 2009; Kumar et al. 2008; Marshall et al. 2008; Mefford et al. 2008; Pinto et al. 2010; Sebat et al. 2007; Weiss et al. 2008). Similar to the cytogenetic findings obtained by standard karyotyping, most CNVs represent rare, unique events rather than representing recurrent deletions or duplications. *Replicated rare CNVs from genome-wide studies*, which were observed more frequently in ASD compared to control individuals, are located on the following chromosomes: 1q21, 2p16.3 (*NRXN1*), 3p25–26 (*CNTN4*), 7q36.2 (*DPP6*), 15q11–13 (*UBE3A*, *OR4M2*, *OR4N4*); 16p11.2 (*MAPK3*, *MAZ*, *DOC2A*, *SEZ6L2*, *HIRIP3*, *IL6*); 22q11.2; X (*DDX51-PTCHD1*; maternally inherited). Some of these CNVs were observed also more frequently in individuals with mental retardation or schizophrenia than in controls. ASD specific CNVs were not exclusively observed in ASD individuals with specific dysmorphic features or mental retardation but were also present in high functioning patients with autism with only minor dysmorphology (van der Zwaag et al. 2009).

Molecular genetic studies in ASD have come a long way from the early linkage studies, which aimed at describing a few loci and subsequently finding one or a few genes of major effect relevant for all cases of ASD. It has now become clear that ASD are heterogeneous disorders, caused by several rare—most likely—monogenetic disorders (as fragile X syndrome, mutations in *TSC1/TSC2*, *LAMB1*, *CNTNAP2*, *PTEN*, *DHCR7*, *SHANK3*, *NLGN3/4* or *RPL10*). In addition, 'contiguous gene syndromes' are likely causes of ASD, as the overall rate of rare CNVs and large chromosomal deletions, duplications and translocations is increased in individuals with ASD compared to controls.

Common variants, on the other hand, may shape the phenotype or eventually may lead to the disorder by interacting with rare mutations or rare CNVs. A mechanism like this has been shown for *PTEN* haploinsufficient individuals.

The serotonin-transporter gene *SLC6A4* has been discussed as both an ASD susceptibility gene and a second-site modifier in ASD (Bartlett et al. 2005; Hessler et al. 2008). A study in *PTEN* haploinsufficient mice (Page et al. 2009) demonstrated that the phenotypes of these mice were modified in an additive fashion by *SLC6A4* haploinsufficiency. In addition, the role of *PTEN* in the maintenance of genomic stability (Shen et al. 2007; Stiles 2009) makes it likely that *PTEN* haploinsufficiency may increase the probability of a secondary modifying event, such as a copy number variation in a chromosomal region relevant to ASD. Common variants also might increase the risk for autistic traits in the general population as well as for less severe autistic disorders as Asperger Syndrome or PDD-NOS.

From results of current genetic findings in ASD, it is likely that mutations or common variants in genes coding for gene products involved in (1) cell–cell interaction and synaptic function, including development of dendritic spines, (2) neuronal migration and growth or (3) excitatory and inhibitory neurotransmission are causes of ASD. The pathway influencing cell–cell interaction and synaptic function includes *NRXNs*, *NLNGs*, *CNTN3/4*, *CNTNAP2* and *SHANK3*. In addition, the FMR protein, which is missing in fragile X syndrome, modulates dendritic spine formation and synaptic plasticity by inhibiting mGluR1/5-mediated dendritic protein synthesis (Hagerman et al. 2009). Neuronal migration and growth are influenced by gene products of *LAMB1*, *EN2* or the MET receptor tyrosine kinase gene. The mTor/PI3-kinase (PI3 K) pathway involves *PTEN*, *TSC1/2* and several other genes, which were observed in rare CNVs in individuals with ASD (CUSCO et al. 2009). It strongly influences (neuronal) cell growth. Gene products influencing the regulation of excitatory and inhibitory neurotransmission are GABA and glutamate receptors. In addition, disbalance of excitatory and inhibitory neurotransmission was also observed in fragile X syndrome. Clearly, this list of possibly involved pathways is not exhaustive, and other mechanisms or pathways may emerge as results of further studies will be published.

2.2 Attention-Deficit/Hyperactivity Disorder

ADHD is characterised by age-inappropriate hyperactivity, impulsivity and attention problems (American Psychiatric Association 2000). The disorder usually starts in early childhood and persists into adults in around two-thirds of cases (Faraone et al. 2006). It is thought to be caused by the interplay of genetic and environmental risk factors and shows a heritability of 60–80% (Freitag et al. 2010a). A recent meta-analysis on twin studies in ADHD has reported additive and dominant genetic as well as non-shared environmental effects in ADHD (Burt 2009), a finding, which was discussed and challenged by a comment, emphasising the role of appropriate data transformation and analysis as well as the limitations of models obtained on twins reared together, possibly underestimating common environmental effects obtained from twin studies on ADHD (Wood 2010). Nevertheless, based on current data common (familial) environment is not thought to play an important role in ADHD.

The genetic effects on the development of ADHD throughout the life span are not well understood. The heritability of self-rated ADHD symptoms in adults is far lower than that reported for children and adolescents, based on parent and teacher reports; being around 30% (Boomsma et al. 2010) compared to the average heritability in children of around 76% (Faraone et al. 2005). This may be a measurement artefact, based on self versus informant ratings, and confounding with adult onset disorder that might mimic some of the symptoms of ADHD, or might reflect a growing impact of unique environmental effects on the long-term course of ADHD into adulthood. Further work is needed to clarify this important question.

In terms of the genetic architecture, a segregation study resulted in a model implicating non-Mendelian major gene effects with low penetrance in ADHD (Maher et al. 1999). However, these findings are partly in contrast to the observation of twin studies, which point to a model implying multiple common genetic variants of small effect in the aetiology of the disorder (Levy et al. 1997).

Results of hypothesis free molecular genetic studies are currently supportive of both models, too, indicating clear genetic heterogeneity in ADHD. Linkage studies elicited several loci likely containing rare genetic variants of major effect only present in single large families, but also common variants of smaller effect present across several families (Romanos et al. 2008). In addition, genome-wide association studies indicate a very limited number of common variants of small effect to date (Franke et al. 2009; McCarthy et al. 2008) and rare copy number variants that confer greater (moderate) levels of risk (Elia et al. 2010; Williams et al. 2010). We therefore conclude that on the basis of current data, both types of genetic effects likely play a role with evidence for both common risk alleles of minor effect, and variants that are individually rare in the population but have a larger impact on risk for the disorder. As we shall see much more work is needed to clarify the balance between these two types of genetic effects and it remains feasible that at least some of the risk for ADHD is conferred by many individually rare alleles of minor effect; which would be extremely difficult to detect.

Another question that can be addressed by quantitative genetic approaches is the aetiological relationship between inattention and hyperactivity-impulsivity. Twin studies that have investigated this have found that these are separable traits with only partially overlapping genetic influences. While the correlation between the two domains is largely accounted for by shared genetic effects there are in additional unique genetic effects acting on each of the two domains (McLoughlin et al. 2007). Genetic investigation of the two domains would therefore be expected to provide some evidence for unique as well as shared aetiological pathways.

In support of this general conclusion we see differential relationships between each of the two domains and comorbid traits. One example is reading disability (RD) and inattention where the correlation between ADHD and RD was found to be largely driven by genetic factors not shared with hyperactivity-impulsivity (Paloyelis et al. 2010). A contrasting example is a recent study of ADHD and oppositional behaviour that found very highly phenotypic and genetic correlations with hyperactivity-impulsivity but much lower with inattention

(Wood et al. 2009). These data suggested that in middle childhood ADHD and conduct problems may represent the same underlying liability, distinct from the inattentive domain.

Twin studies have found that there are many other examples of overlapping genetic influences between ADHD symptoms and comorbid disorders and traits including autism spectrum disorder (Ronald et al. 2008), motor coordination (Francks et al. 2003), conduct disorder (Thapar et al. 2001) and depression (Cole et al. 2009) among others. These studies demonstrate the complexity of shared and unique genetic and other aetiological influences among many mental health disorders and comorbid traits. At a basic level further work using longitudinal twin designs can further delineate the causal relationships between ADHD and co-occurring traits which include pleiotropic effects (multiple effects of individual sets of genes), mediating effects (brain functions or behaviours that mediate genetic effects on ADHD) and risk models (one disorder leading to another).

Dopaminergic Candidate Gene Studies

Molecular genetic studies on ADHD started with candidate gene association studies in the mid 1990s with the first two reported associations between repeat length polymorphisms in the dopamine D4 receptor (*DRD4*) (LaHoste et al. 1996; Swanson et al. 1998a, b) and dopamine transporter (*DAT1*) genes (Cook et al. 1995). Subsequently association was reported with a microsatellite marker near to the dopamine D5 receptor gene (*DRD5*) (Lowe et al. 2004). Since then there have been numerous further studies with relatively few independent replications. However, meta-analysis of available data reports strong evidence for the association of dopamine system genes, in particular with the 7-repeat allele of a variable number tandem repeat (VNTR) polymorphism within *DRD4* and the microsatellite which lies upstream of *DRD5*. These two associations are significant because they are as yet the only genetic association findings to reach genome-wide levels of significance, in the meta-analytic study of Li et al. (2006), which is generally accepted as the gold standard for determining that a genetic association is true. The recommended level of significance, in the region of 5×10^{-8} (Dudbridge et al. 2008) is important because it means that in a systematic screen of the genome for association, these findings would occur less than 5% of the time by chance alone; whereas conventional levels of significance such as 0.05 would be detected by chance every 20th selection of a random independent genetic polymorphism, of which there are hundreds of thousands across the genome. We can therefore be confident that these two findings are truly associated with ADHD.

The other genetic association that is often cited in the previous literature is between the 10-repeat allele of a VNTR within the 3'-UTR of the dopamine transporter gene (*DAT1*). However, the evidence for this association from meta-analytic studies is far from convincing with three negative reports (Li et al. 2006; Maher et al. 2002; Purper-Ouakil et al. 2005) while three other reports found only weak evidence of association (Faraone et al. 2005; Gizer et al. 2009; Yang et al. 2007) far below the stringent criteria reached by *DRD4* and *DRD5*. Whether *DAT1*

is associated with ADHD therefore remains a contentious question, yet there is evidence for heterogeneity across the datasets included in the meta-analytic studies suggesting that there may be identifiable sources for differences in the strength of the association across the various studies (Gizer et al. 2009; Li et al. 2006).

One potential source of error in the analysis of *DAT1* comes from undetected genotyping errors that cause apparent over transmission of common alleles when using the transmission disequilibrium test (TDT). Mitchell and colleagues found that in studies reporting a positive association using the TDT, 87% identified an association with alleles that were present at a frequency of >50%, whereas in case-control studies, the proportion of common allele associations was 40% (Mitchell et al. 2003). This highly significant difference could only be explained by systematic genotype error related to the method, especially with high frequency alleles such as the *DAT1* 10-repeat which occurs on around 70% of chromosomes from people of European ancestry.

There are, however, more interesting sources of heterogeneity for *DAT1*. First, recent studies of ADHD in adults find evidence for association with the 9-repeat rather than the more common 10-repeat allele, suggesting that the effects of *DAT1* may differ depending on the developmental age, indicating a role for *DAT1* in the modulation of symptoms at different ages, rather than the aetiology of ADHD (Franke et al. 2008). Second, the *DAT1* VNTR has been found to interact with measures of the pre-natal environment including maternal use of tobacco during pregnancy on oppositional and hyperactive-impulsive symptoms (Becker et al. 2008; Kahn et al. 2003) and maternal use of alcohol during pregnancy (Brookes et al. 2006). Interestingly, recent research has shown that when genetic factors are controlled for studies of the association mothers smoking during pregnancy and ADHD, the association appears to be accounted for mainly genetic factors, suggesting that the environmental measure may be correlated with maternal genes (Thapar et al. 2009); suggesting that the observed interactions with *DAT1* may be explained by gene-gene interactions.

Third, there is evidence that two or more haplotypes of *DAT1* may be involved in the association with ADHD, indicating that more than one genetic variant is likely to be involved. Further, the known VNTR may not be the primary functional variant but may tag other genetic variants; and there appears to be more than associated region with the gene (Asherson et al. 2007; Brookes et al. 2006, 2008). Strength of the association would then depend on the relationships between the various functional genetic variants involved, which may differ across sample populations. Fourth, there is evidence that the association with genetic variants across *DAT1* may be specific to non-comorbid ADHD and is not found in children with ADHD plus conduct disorder (Zhou et al. 2008a).

Other Candidate Gene Association Studies

There have now been numerous candidate gene association studies in ADHD and these are best summarised in the recent review and meta-analysis from Gizer et al. (2009). They conducted a systematic review of the association literature with

the aim of identifying the most consistent findings in ADHD research to date. They further tested for heterogeneity across studies because other genes, like *DAT1*, might show significant sources of variability due to identifiable moderating factors. Overall they concluded that the following genes were significantly associated with ADHD: *DAT1*, *DRD4*, *DRD5*, *5HTT* (serotonin transporter), *HTR1B* (serotonin 1B receptor) and *SNAP-25* (synaptosomal associated protein); and the following genes showed significant evidence of heterogeneity: *DAT1*, *DRD4*, *DRD5*, *DBH*, *ADRA2A* (adrenergic 2A receptor), *5HTT*, *TPH2* (Tryptophan hydroxylase 2), *MAOA* (monoamine oxidase A) and *SNAP25*. For the candidate genes showing heterogeneity future studies could usefully investigate the potential moderating factors that lead to variability in effect size across studies.

Despite significant progress, the total estimated impact of the most replicated candidate gene findings is around 3.3% of the phenotypic variance of ADHD; accounting for 4.3% of the estimated average heritability of ADHD of 76% (Kuntsi et al. 2006). Further work is clearly needed to explain the rest of the genetic influences on ADHD.

Genome-Wide Association Studies (GWAS)

Other approaches to the identification of novel genes for ADHD include genome-wide association studies which have the potential to detect entirely novel associations where there is no previous a priori hypothesis. Given that we know so little about the function of the brain and how molecular processes lead to susceptibility for ADHD, it makes sense for aetiological research to focus efforts on empirical approaches that systematically screen the entire genome for associations.

The first GWAS study of ADHD investigated 438,784 SNPs in 958 combined type ADHD proband–parent trios. No genes of moderate to large effect were identified and no findings passed genome-wide levels of significance (Neale et al. 2008). However, when a set of 51 candidate genes were investigated, there was significant evidence at the group level that positive association signals were emerging from the selected SNPs, implicating mainly dopamine, noradrenalin and serotonin neurotransmitter genes. Similar findings were subsequently reported in a study that combined genome-wide association data from several studies, with a total sample size of 2,064 trios, 896 cases and 2,455 controls (Neale et al. 2010), confirming the important role of the traditional neurotransmitter systems genes in ADHD.

Overall, the total number of samples analysed in GWAS studies of ADHD to date is far too small and the disappointing findings to date are not unexpected. Further work is required to obtain GWAS information on much larger sets of samples for ADHD. There are, however, potentially interesting new findings that emerge from the GWAS studies of ADHD (Franke et al. 2009). Of particular interest is the Cadherin gene (*CDH13*) which was found to be associated with ADHD in two out of five GWAS studies (Lasky-Su et al. 2008; Lesch et al. 2008) and lies within the only region that reached genome-wide significance in a meta-analysis of linkage studies of ADHD (Zhou et al. 2008b). Furthermore *CDH13* is among the most consistent findings on a wide range variety of phenotypes related

to drug abuse and dependence (Uhl et al. 2008). This finding and other hints from GWAS indicate that genes involved in cell division, cell adhesion, neuronal migration and neuronal plasticity may also confer risk for ADHD (Franke et al. 2009).

Overall there is a long way to go to delineate the specific genetic factors that explain the high heritability of the disorder. This is, however, a common phenomenon in common disorders research and several possible explanations for the so-called ‘dark-matter’ of (missing) heritability has been put forward—dark matter in the sense that we know it exists can detect its influences but simply cannot see it (Manolio et al. 2009). Potential reasons include numerous genes of very small effect, genetic heterogeneity with risk conferred by many different genes and variants within genes, higher order interactions between genes and with environment and aetiological heterogeneity (Manolio et al. 2009).

Copy Number Variations

An important contribution to ADHD risk is rare copy number variants (CNVs) or other types of rare genetic variation. Recent data suggested that in a few cases CNVs may exert a major influence on risk for ADHD and that this risk overlaps with other neurodevelopmental disorders, including schizophrenia and autism (Elia et al. 2010). These initial findings have now been confirmed in one of the most robust studies of ADHD genetics to date. Thapar and colleagues (Williams et al. 2010) investigated a sample of 410 children with ADHD and 1,156 ethnically matched controls. The analysis focused on large CNVs greater than 500,000 base pairs in size, that are robust to call from genome-wide SNP arrays, and further validated all identified CNVs using a separate technology. Furthermore, findings were evaluated in a further sample of 825 patients with ADHD from Iceland and 35,243 controls. There were several key findings from this paper. First, the overall burden of risk was increased, with 16% of ADHD cases carrying CNVs, compared to 8% of controls, giving an overall twofold risk. Second, the increased risk was particularly striking for a subgroup of ADHD cases with intellectual disability: 42%, giving an approximate sixfold risk compared to the control population. Third, that the burden of risk remained significant, but much lower, in the group with no intellectual impairment, around 1.7-fold risk. Fourth, there was a clear excess on chromosome 16p13.11, identifying a specific region. Finally, the identified CNVs were significantly enriched for loci previously reported for schizophrenia and autism.

Linkage Analysis and Genes of Major Effect

There is evidence that genes of major effect might lead to ADHD in a few rare families. Furthermore, variation in some of these genes may have more general effects on ADHD. There are two main examples.

The first is a gene called latrophilin 3 (*LPHN3*) that is located within a linkage region on chromosome 4q13.2. This region was first identified in a large

multi-generational pedigrees from the Paisa population in Columbia (Arcos-Burgos et al. 2004). Subsequent fine-mapping narrowed the region. Subsequently genetic association analysis in worldwide samples totalling 2,627 ADHD cases and 2,531 controls confirmed the association of *LPHN3* with an average odds ratio of 12, although not yet at genome-wide levels of significance (Arcos-Burgos et al. 2010). Since then further replication was reported in a sample of adults with ADHD, which is interesting because the original extended pedigrees used to identify the linked regions included both children and adults with ADHD (Ribases et al. 2010).

The second example comes may represent a private mutation found in one or a few families in Germany (Lesch et al. 2010). To detect micro-deletions and micro-duplications, they carried out a genome-wide screen for copy number variations in a sample of 99 children and adolescents with severe ADHD. Among several genes containing CNVs in ADHD, they identified the gene encoding neuropeptide Y which was included within a 3 megabase region on chromosome 7p15.2–15.3. Investigation of other family members found evidence that the duplication co-segregated with ADHD.

Conclusion

Overall current molecular genetic studies of ADHD find evidence for both frequent and rare variants that influence the risk for ADHD. The level of evidence is sufficient to confirm that identity of some of the genes and gene regions involved, although the data only explains a very small amount of the total genetic variation that impacts on risk for ADHD. Future studies will need to include very much larger sample sizes and take advantage of the improving technology to screen for both common and rare variants. The specific findings confirm the old neurotransmitter hypotheses of ADHD, but also extend the focus to many other neurobiological processes that impact on brain development and brain function.

2.3 Nocturnal Enuresis

Nocturnal enuresis is characterised by bed wetting after age 5 years old in otherwise healthy children after exclusion of urinary tract infections, malformations, other organic causes or intellectual disability (Von Gontard et al. 1997). Population based twin studies have resulted in heritability estimates of around 70% for NE (Hublin et al. 1998). Despite this relatively large heritability, there is a scarcity of research into NE. Linkage studies have predominantly been performed in large families with autosomal dominant inheritance pattern replicating loci on 4p16.1, 12q24.2, 13q13–q14.3, and 22q11.21 (Arnell et al. 1997; Eiberg et al. 1995, 2001; Eiberg 1995, 1998; Loeys et al. 2002; Von Gontard et al. 1999). Hardly any fine-mapping or candidate gene association studies were performed. Given that nocturnal enuresis can be a persistent disorder more research should be done to elucidate its genetic basis, e.g., by sequencing the replicated segregating

loci in the respective families. Interestingly, a recent study reported higher rates of nocturnal enuresis in individuals with schizophrenia, and individuals with enuresis showed a worse performance on two frontal lobe cognitive tests compared to individuals without (Hyde et al. 2008).

2.4 Obesity

Numerous twin, adoption and family studies have allowed for the calculation of heritability estimates for body mass index (BMI), which typically range from 0.4 to 0.7; twin studies have consistently led to higher estimates. Based on complex statistical modelling single family studies have nevertheless also led to estimates in the range of 0.7 (Maes et al. 1997). A recent review of 13 longitudinal studies found a strong genetic continuity in BMI from early childhood to onset of adulthood (Silventoinen and Kaprio 2009). There was also evidence for an effect of a common environment on the tracking of BMI during childhood; in adults the influence of the non-shared environment substantially exceeded that of the shared environment.

Monogenic Obesity

The cloning and initial detection of mutations in the mouse and human (Montague et al. 1997; Zhang et al. 1994) leptin gene marked the beginning of the large-scale elucidation of DNA variation underlying inter-individual differences in body weight. Currently, several types of monogenic forms of obesity have been elucidated. All of the respective mutations are rare, some have only been reported in single cases worldwide; the genes are all expressed in the hypothalamus. The elucidation of such mutations and the successful treatment of leptin deficient extremely obese (Farooqi et al. 1999) individuals has firmly established that the behavioural phenotype hyperphagia/overeating and as a consequence obesity can be caused by mutations in specific genes.

Several of the detected novel monogenic forms of obesity encompass other clinically recognisable features. For instance, mutations in the leptin gene entail hypothalamic hypogonadism, other endocrinological abnormalities and immune system dysfunction (Hinney et al. 2008). In the original report of the clinical features of patients with mutations in the pro-opiomelanocortin gene (*POMC*) adrenal insufficiency and red hair were characteristic features in addition to extreme obesity (Krude et al. 1998). Developmental delay was shown to co-occur with severe obesity in a patient with a mutation in the neurotrophin receptor TrkB (Yeo et al. 2004).

The detection of mutations in the melanocortin-4 receptor gene (*MC4R*) (Hinney et al. 1999; Vaisse et al. 1998; Yeo et al. 1998) marked a turning point in the sense that for the first time the molecular basis of a subgroup of patients with idiopathic obesity was identified. The detection of the association between *MC4R*

mutations and obesity is also noteworthy because the combined frequency of all functionally relevant mutations is in the range of 1–6% among extremely obese children and adolescents (Hinney et al. 2003).

Two family-based studies have attempted to quantify the effect of functionally relevant *MC4R* mutations (Dempfle et al. 2004; Stutzmann et al. 2008) by comparing BMI of mutation and wild-type carriers of relatives ascertained via the index cases. According to Dempfle et al. (2004) and Stutzmann et al. (2008) adult male carriers were 4 and 4.3 kg/m² heavier than their male relatives with the wildtype genotype. In females the mean effect size of *MC4R* mutations is larger; the corresponding values were 9.5 and 8.7 kg/m².

In the pre-GWAS era, the *MC4R* was the first gene shown to harbour a common variant with a small effect size (Geller et al. 2004). The association of the minor allele, coding for Ile103, with leanness was confirmed in subsequent larger meta-analyses with up to almost 124,000 probands (Heid et al. 2008; Speliotes et al. 2010; Wang et al. 2010a; Young et al. 2007). Roughly 3–6% of different populations are heterozygous for this variant, which according to German population-based data for adults entails a 0.5 kg/m² reduction in mean BMI. This would qualify this SNP as the one with the strongest effect size of all currently known common variants including the SNPs in intron 1 of the fat mass and obesity associated gene (*FTO*) (Frayling et al. 2007). A second coding *MC4R* variant also protects from obesity (Stutzmann et al. 2007). The *MC4R* is thus currently unique in that it harbours variants of considerably different effect sizes both within and outside the coding region whose minor alleles both increase and decrease BMI.

There are over 90 known coding variants in the *MC4R* that lead to a reduced receptor function seemingly support the common disease—rare variant hypothesis, according to which a substantial proportion of the predisposition to complex disorders is due to rare variants (Bodmer et al. 2008). Indeed, it seems likely to assume that other such loci exist in the genome that cannot readily be picked up via linkage or association analyses due to locus heterogeneity and the low overall combined rate of such mutations at a specific gene locus.

Polygenic Obesity

The results of genome-wide association studies (GWAS) indicate that the common disease—common variant hypothesis is potentially also important. Prior to the most recent meta-analysis of GWAS, ten loci with genome-wide significance defined via a p -value $<5 \times 10^{-8}$ had been identified (*FTO*, *MC4R*, *TMEM18*, *GNPDA2*, *BDNF*, *NEGR1*, *SH2B1*, *ETV5*, *MTCH2* and *KCTD15*; Hinney et al. 2009; Willer et al. 2009). The most recent and up-to-date worldwide largest meta-analysis of the GIANT (Genetic Investigation of ANthropmetric Traits) Consortium included 46 studies in total encompassing 123,865 individuals of European ancestry (Speliotes et al. 2010). In a joint analysis of the original data and the confirmatory study encompassing data of up to almost 1,25,000 individuals, a total of 32 SNPs revealed p -values $<5 \times 10^{-8}$.

The per allele change in BMI ranged from 0.06 (*MTCH2*, *KCTD15*, *PTBP2*, *RPL27A*, *NUDT3*) to 0.39 (*FTO*) kg/m²; a total of 10 SNPs showed per allele changes <0.1 kg/m² equivalent to less than 324 and 289 g in males and females of average heights (1.8 and 1.7 m). Five SNPs with the lowest per allele change of 0.06 kg/m² each account for approximately one half of the aforementioned weights of individuals of average height.

The 32 identified variants explained a mere 1.5% of the BMI variance; this roughly corresponds to 3% of the genetic variance based on an estimated BMI-heritability of 0.5. Speliotes et al. (2010) estimated that there are approximately an additional 200 loci (95% CI: 98–350) with similar effect sizes as the detected 32, which together would account for roughly 3.5% of the variation in BMI or 7% of the genetic variation.

Sub-analyses based on children and adolescents revealed a substantial overlap with the genetic predisposition to adult obesity. Directionally consistent effects were found for 23 of the 32 SNPs. Common variants detected in adults are seemingly important throughout different developmental stages. In accordance with the low heritability estimates for BMI in early life, a significant effect of the *FTO* genotypes was not detectable in children prior to age 4 in two birth cohort studies (Rzehak et al. 2010).

Because most obesity genes are expressed in the central nervous system, the role of the brain in the regulation of body weight is seemingly substantiated. However, the high proportion of all genes expressed centrally needs to be considered prior to drawing firm conclusions. Pathway-based analyses based on the genes identified via the association signals revealed evidence of enrichment for pathways involved in the platelet-derived growth factor signalling, translation elongation, hormone or nuclear hormone receptor binding, homeobox transcription, regulation of cellular metabolism, neurogenesis and neuron differentiation, protein phosphorylation and numerous other pathways related to growth, metabolism, immune and neuronal processes (Speliotes et al. 2010).

The Role of Copy Number Variants in Obesity

Willer et al. (2009) reported genome-wide significant association with BMI of a SNP capturing a common 45-kb deletion near *NEGR1* (neuronal growth regulator 1 precursor gene). Recently, another common CNV (chromosome 10p11.22) was shown to be associated with BMI (Sha et al. 2009) in a Chinese sample (unadjusted *p*-value 0.011). In contrast to the common CNV with relevance for BMI reported above, three recent reports (Bochukova et al. 2010; Walters et al. 2010; Wang et al. 2010b) showed the importance of rare large CNVs for body weight regulation. Two studies (Bochukova et al. 2010; Walters et al. 2010) depicted a genomic region on chromosome 16p11.2 which harbours highly penetrant micro-deletions (about 500 kb) associated to (extreme) obesity. This region had previously been associated with autism and mental retardation (Bochukova et al. 2010; Walters et al. 2010; Weiss et al. 2008); in fact, some of the obese patients analysed by Farooqi and co-workers (Bochukova et al. 2010) additionally had

developmental disorders. However, Walters and co-workers found the association of these microdeletions and obesity also in individuals ascertained only for the obese phenotype, suggesting a possible direct association of the deletions at 16p11.2 with obesity, distinct from their implications for cognition.

Wang et al. (2010b) found that CNVs larger than 1 Mb were over-represented in obese cases versus normal weight controls (non-significant odds ratio of 1.5) with a stronger effect for larger CNVs (above 2 Mb). As the effect was more pronounced for CNVs disrupting genes, these genes should be further analysed (Wang et al. 2010b).

3 Prospectus

The genetics of four childhood conditions was elaborated in more detail in this chapter. Other common psychiatric disorders of childhood, adolescence and adulthood also show a heritability >50%, especially anxiety disorders. Gene–environmental effects are likely for this condition, as it is also the case for ADHD and obesity.

Research over the last 10 years in the genetic of child psychiatric disorders has resulted in many promising findings, but also has shown that elucidating the genetic background of psychiatric disorders is challenging and will require new technologies. With sequencing approaches, methylation pattern assessment, and functional studies, new and clinically relevant results are to be expected and will ultimately result in more individualised and targeted treatment options.

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Schizophrenia Genes: On the Matter of Their Convergence

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Abstract Schizophrenia is a common mental disorder, affecting 0.5–1% of the population. The mode of inheritance is complex and non-Mendelian with a high heritability of ca. 65–80%. Given this complexity, until most recently it was difficult to identify disease genes. But fortunately this has changed. Due to new technologies the last few years have brought highest interest in human genetics of complex diseases. The knowledge resulting from the availability of the complete sequence of the human genome, the systematic identification of single nucleotide polymorphisms (SNPs) throughout the genome, and the development of parallel genotyping technology (microarrays) established the conditions that brought about the current successful time in our ability to probe the genome for identifying disease genes. All these studies showed up new avenues for the biology of common complex diseases and yielded a multitude of genes showing strong association with complex diseases.

Keywords Schizophrenia · Genetics · CNV · Copy number variant · GWA · Polymorphism

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1 Schizophrenia

A major challenge in medicine is to understand genetic, molecular and cellular mechanisms underlying common mental disorders including schizophrenia, which involve complicated genetic and environmental determinants. Schizophrenia is a common mental disorder, affecting 0.5–1% of the population. Schizophrenia mostly presents with several episodes and tends to become chronic. Approximately 30% of patients with schizophrenia require support throughout their lives. Roughly 50% will have lifelong disabilities and social problems. Its direct costs in western countries range between 1.6 and 2.6% of total health care expenditures, and is the seventh most costly medical illness to western societies. Active psychosis has been ranked the third most-disabling condition after quadriplegia and dementia (Ustün et al. 1999), and life expectancy is reduced by ten to twelve years, due to increased physical health problems and a high suicide rate. There is evidence for a strong genetic component in the etiology of schizophrenia, as demonstrated by family, twin and adoption studies. The relative contribution of genetic factors has been estimated to be ca. 80% (Cardno et al. 1999). The mode of inheritance is complex and non-Mendelian (Ross et al. 2006). Given this complexity, together with imprecise and differing definitions of phenotype, until most recently it was notoriously difficult to identify genes involved in this chronic disabling brain disease.

2 Structural Genetic Variants

Several approaches have been used to find causative genetic variants including linkage studies, candidate gene or genome wide association studies as well as studies on structural genetic variants. It is not a new assumption that structural genetic variants including deletions or duplications may play a role in schizophrenia. However, the assumption that rare genetic variants with large effects may account for a significant number of schizophrenia cases has been somehow neglected. This occurred despite the fact that rare variants with large effects on schizophrenia risk are already well established, with the 22q11 deletion syndrome and DISC1 being among the more prominent findings.

David St Clair et al. (1990) identified a balanced 1q43:11q14 translocation associated with major mental illness in a large pedigree showing several psychiatric phenotypes associated with this translocation (St Clair et al. 1990). Within this translocation a disrupted gene (DISC1) was identified which is now an important risk gene for psychosis. Although the mutation is very rare, its discovery boosted a series of studies on the potential pathobiology underlying psychosis. Twenty years of intensive work went by and much research has been undertaken to define the biological function of the DISC1 protein and to further understand how it contributes to the pathogenesis of schizophrenia. There is evidence for

a role in multiple cell functions including cAMP signalling, centrosomal and microtubule-based functions, kinesin-mediated intracellular transport and neurite extension which have led to its description as a 'hub protein' for both the developing and adult brain (for review see Gill et al. 2009; Muir et al. 2008). Interestingly, DISC1 expression is regulated by beta-site amyloid precursor protein cleaving enzyme-1-neuregulin cascade (Seshari et al. 2010), implicating another potential schizophrenia risk gene, neuregulin 1 (Stefansson et al. 2003) and its receptors in the same schizophrenia risk pathway as DISC1 (for review see Gill et al. 2010). DISC1 has multiple identified protein interaction partners that highlight pathologically relevant molecular pathways. Amongst these are proteins involved in neuronal migration (e.g. APP, Dixdc1, LIS1, NDE1, NDEL1), neural progenitor proliferation (GSK3 β), neurosignalling (Girdin, GSK3 β , PDE4) and synaptic function (Kal7, TNIK). Furthermore, emerging evidence of genetic association (NDEL1, PCM1, PDE4B) and copy number variation (NDE1) implicate several DISC1-binding partners as risk factors for schizophrenia (Bradshaw and Porteous 2010).

A microdeletion at 22q11.2 has been repeatedly linked to schizophrenia although it is responsible for the Velo-Cardio-Facial Syndrome (VCFS) also known as DiGeorge syndrome. The first connections starting when Shprintzen et al. (1992) reported schizophrenia-like psychotic symptoms in VCFS affected adolescents and young adults, beside other characteristic symptoms like different physiognomy or cardiac defects. Several follow up studies occurred and provided hope that this deletion could serve as a model for schizophrenia (Karayiorgou and Gogos 2004). A series of animal model and cell culture studies started. One major focus was on the genes lying in this deleted region (for review see Gothelf et al. 2008; Karayiorgou and Gogos 2004). One of the genes within this region is the COMT (Catechol-O-methyl transferase) gene which encodes for the COMT enzyme responsible for the degradation of dopamine, especially in the prefrontal cortex. Although there is evidence for a contribution of COMT to neuropsychological and neurophysiological domains, no clear picture is seen for a major contribution of COMT in schizophrenia *per se* as demonstrated in a recent meta-analysis by Okochi et al. (2009) in 13,088 cases and 16,531 controls. Most probably COMT seems to be more generally involved in neuropsychological and neurophysiological functions including executive functioning, working memory, fluid intelligence and attentional control (for review see Dickinson and Elvevåg 2009).

Other genes which were intensively studied within the 22q11.2 region are e.g. TBX1 and GNB1L. It has been shown that prepulse inhibition deficits in Df1/+ mice are caused by haploinsufficiency of these two genes TBX1 and GNB1L (Paylor et al. 2006). In humans, sequence variation in GNB1L was associated with gene expression and psychosis in VCFS (Williams et al. 2008). Furthermore, mouse models of 22q11.2 deletion syndrome suggest that diminished dosage of certain 22q11 genes disrupts neurogenesis and cortical development (Meechan et al. 2009). Interestingly, Maynard et al. (2008) studied six genes in the 1.5 Mb of the 22q11.2 region which encode mitochondrial proteins (Prodh, Slc25a1, Txnrd2, T10, Zdhhc8). All six genes are expressed in the brain, and maximal expression

coincides with peak forebrain synaptogenesis shortly after birth. Furthermore, their protein products are associated with brain mitochondria, including those in synaptic terminals. The authors concluded that 22q11 deletion may alter metabolic properties of cortical mitochondria during early post-natal life, and that several 22q11 mitochondrial genes, particularly during early post-natal cortical development, may disrupt neuronal metabolism or synaptic signalling which seems highly interesting for the pathophysiology of schizophrenia (Maynard et al. 2008).

These two regions were the most prominent large structural variants associated with schizophrenia until recently. However, the rapid technological development which paved the way for genome wide association studies provided new unexpected possibilities for the detection of shorter structural variants, namely for copy number variants (CNVs). The first report on submicroscopic microdeletions or microduplications in schizophrenia was provided by Walsh et al. (2008) and was the starting point for the revival of structural aberrations in schizophrenia. Novel deletions and duplications of genes were present in 5% of controls versus 15% of cases and 20% of young onset cases. These mutations disrupted genes disproportionately more often from signalling networks controlling neurodevelopment, including neuregulin and glutamate pathways. Although the sample size for the detection of these rare events was small, Walsh et al. (2008) suggested that multiple, individually rare mutations altering genes in neurodevelopmental pathways contribute to schizophrenia.

The first well powered study on CNVs associating with schizophrenia was performed by the SGENE+ consortium. A population based sample was used to identify de novo CNVs by analysing 9,878 transmissions from parents to offspring (Stefansson et al. 2008). The 66 de novo CNVs identified were tested for association in a sample of 1,433 schizophrenia cases and 33,250 controls. Three deletions at 1q21.1, 15q11.2 and 15q13.3 showing nominal association with schizophrenia in the first sample were followed up in a second sample of 3,285 cases and 7,951 controls and all three deletions were significantly associated with schizophrenia and related psychoses in the combined sample. Interestingly, two of these regions (1q21.1 and 15q13.3) could be replicated independently by the International Schizophrenia Consortium in 3,391 patients with schizophrenia and 3,181 controls (ISC 2008). The third (15q11.2) association has also been replicated independently by Kirov et al. (2009a). These studies have brought highest interest in human genetics of complex diseases and encouraged other groups to analyse CNVs.

Another main finding in schizophrenia is that deletions within the neurexin 1 gene (NRXN1; 2p16.3) are associated with schizophrenia (Kirov et al. 2008; Walsh et al. 2008). The SGENE+ consortium examined Neurexin 1 for CNVs in 2,977 schizophrenia patients and 33,746 controls from seven European populations using microarray data. The association analysis was restricted to CNVs that disrupt exons. These were significantly associated with a high odds ratio (OR 8.97), showing that Neurexin 1 deletions disrupting exons confer risk of schizophrenia (Rujescu et al. 2009). A meta-analysis which included 8,789 cases and 42,054 controls provided further evidence for the involvement of Neurexin 1 in Schizophrenia.

An excess of deletions >100 kb in patients (0.19 vs. 0.04%, $p = 0.000013$, OR = 4.78) with higher ORs for deletions >100 kb that disrupt exons ($p = 0.000037$, OR = 7.44) was detected (Kirov et al. 2009b).

Interestingly, these microdeletions are also found in patients with a broad overlapping spectrum of other neurodevelopmental phenotypes like autism (Sebat et al. 2007; Abrahams and Geschwind 2008; Weiss et al. 2008), mental retardation (de Vries et al. 2005; Sharp et al. 2006; Murthy et al. 2007; Mefford et al. 2008), epilepsy (Sharp et al. 2008) and further diseases (for review see (Cook and Scherer 2008; Ramocki and Zoghbi 2008; Slavotinek 2008). Therefore, a genomic region on chromosome 16p13.1, which has been implicated in childhood-onset developmental disorders, was studied in schizophrenia by the SGENE consortium (Ingason et al. 2011a). Deletions were detected in 0.12% of cases and 0.04% of controls ($p > 0.05$). Furthermore, also duplications were present in 0.30% of cases versus 0.09% of controls ($p = 0.007$). The region can be divided into three intervals defined by flanking low copy repeats. Duplications spanning intervals I and II showed the most significant ($p = 0.00010$) association with schizophrenia. The age of onset in duplication and deletion carriers among cases ranged from 12 to 35 years, and the majority were males with a family history of psychiatric disorders. In a single Icelandic family, a duplication spanning intervals I and II was present in two cases of schizophrenia, and individual cases of alcoholism, attention deficit hyperactivity disorder and dyslexia (Ingason et al. 2011a).

Given that also duplications seem to be involved in the risk of schizophrenia, another large study on copy number variants was conducted studying maternally derived 15q11–q13 duplication overlapping the Prader-Willi/Angelman syndrome critical region (Ingason et al. 2011b). In a discovery sample of 22 schizophrenia patients with a very early onset of illness (10–15 years of age), one duplication was observed in a patient. Based on this, 7,582 patients with schizophrenia or schizoaffective disorder and 41,370 comparison subjects without known psychiatric illness were screened for copy number variants at 15q11–q13. Duplications were found in further four patients and five comparison subjects. All four patients had maternally derived duplications (0.05%), while only three of the five comparison duplications were maternally derived (0.007%), resulting in a significant excess of maternally derived duplications in case patients (OR = 7.3). This excess is compatible with earlier observations that risk for psychosis in people with Prader-Willi syndrome caused by maternal uniparental disomy is much higher than in those caused by deletion of the paternal chromosome. These findings suggest that the presence of two maternal copies of a fragment of chromosome 15q11.2–q13.1 that overlaps with the Prader-Willi/Angelman syndrome critical region may be a rare risk factor for schizophrenia and other psychoses. Given that maternal duplications of this region are among the most consistent cytogenetic observations in autism, the findings provide further support for a shared genetic etiology between autism and psychosis (Ingason et al. 2011b).

Actually first whole-genome sequencing efforts are under way and raise hope that further rare variants will be found. A recent study based on whole-genome DNA sequencing data from 185 human genomes mapped over 22,000 deletions

and 6,000 additional CNVs. Over half of them could be mapped to nucleotide resolution, which facilitates analysing their origin and functional impact. This study shows that CNVs are abundant in humans, differing from other forms of variation in extent, origin and functional impact (Milles et al. 2011). Therefore it is very possible that based on these new findings, rare new genomic disorders will be defined and that our understanding of neurodevelopmental disorders including schizophrenia will hopefully be highly enlarged.

3 Common Genetic Variants

Also common polymorphisms (SNPs) were analysed using genome wide association studies. The first study of this type included 178 cases and 144 controls and was performed by Lencz et al. (2007). The best associated SNP out of 500,000 SNPs was located in CSF2RA (colony stimulating factor, receptor 2 alpha). A second genome wide association (GWA) study did not achieved genome wide significance Sullivan et al. (2008). Both studies were clearly underpowered to provide conclusive result. Therefore, O'Donovan (2008) performed an initial GWAS on a much larger sample including 479 cases and 2,937 controls. Loci surpassing $p < 10^{-5}$ were followed up in 6,829 cases and 9,897 controls. Of 12 of these loci, 3 had strong independent support and the overall pattern of replication was unlikely to occur by chance. The evidence for association for the top SNP in the ZNF804A gene strengthened when the affected phenotype included bipolar disorder (O'Donovan et al. 2008). Interestingly, this result was replicated independently in the Irish Case Control Study of Schizophrenia (ICCS) sample (Riley et al. 2010) as well as in an independent sample of 5,164 schizophrenia cases and 20,709 controls (Steinberg et al. 2011). A fine-mapping, replication and meta-analysis study of 18,945 schizophrenia and schizoaffective disorder patients, 21,274 schizophrenia plus bipolar disorder cases and 38,675 controls showed further evidence for this SNP (Williams et al. 2010). Additionally, there is evidence for the involvement of this SNP in neuropsychological phenotypes. Walters et al. (2010) investigated whether the identified risk allele of the SNP rs1344706 is associated with variations in neuropsychological performance in patients and controls. Patients with DSM-IV diagnosed schizophrenia and healthy controls from independent samples of Irish ($n = 297$ cases and $n = 165$ controls) and German ($n = 251$ cases and $n = 1472$ controls) nationality were included. In the Irish samples ZNF804A genotype was associated with differences in episodic and working memory in patients but not controls. These findings replicated in the same direction in the German sample. Furthermore, in both samples, when patients with lower IQ were excluded the association between ZNF804A and schizophrenia strengthened (Walters et al. 2010). Taken together, the ZNF804A gene is one of the most promising genes for schizophrenia to date.

The largest GWA study to date on schizophrenia was led by Stefansson et al. (2009). 2,663 schizophrenia cases and 13,498 controls from eight European

locations were studied within the SGENE+ consortium. Findings from the top 1,500 markers were combined with results for these markers from both the International Schizophrenia Consortium (ISC 2,602 cases/2,885 controls) and the European–American portion of the Molecular Genetics of Schizophrenia Consortium (MGS 2,687 cases/2,656 controls). The best markers were followed up in 5,013 cases and 15,559 controls from four sets of additional samples from Europe. This approach could identify three novel schizophrenia loci: Neurogranin (NRGN), TCF4 and the HLA region (Stefansson et al. 2009). Interestingly, the HLA associations were also found in the large GWAS by the International Schizophrenia Consortium ISC (2009) studying 3,322 European individuals with schizophrenia and 3,587 controls as well as by (Shi et al. 2009) suggesting further evidence for the inflammation theory of schizophrenia. The second gene, TCF4 (transcription cell factor 4), is of high interest too as the Pitt–Hopkins Syndrome’s gene was identified by unrelated groups by comparative genomic hybridization (CGH) in 2007 showing that the haploinsufficiency of the TCF4 gene (18q21.2) is due to an autosomal dominant de novo mutation, which is considered to be causative (for review see Taddeucci et al. 2010). Finally, NRGN (neurogranin), the third gene is highly promising. It is a calmodulin-binding protein expressed exclusively in the brain. It is the main postsynaptic protein regulating the availability of calmodulin, binding to it in the absence of calcium (Stefansson et al. 2009). Neurogranin belongs to the calpacitin family and contains an IQ domain that interacts with the Ca^{2+} free form of calmodulin (apo-calmodulin). Depending on the intracellular Ca^{2+} concentration, neurogranin releases calmodulin, so that it can bind Ca^{2+} and activate downstream signalling molecules. Calmodulin furthermore binds different proteins including CaMKII, the calcium/calmodulin-dependent protein kinase II gamma (Hayashi 2009). Zhong et al. (2009) show that neurogranin is concentrated in dendritic spines and that the number of neurogranin molecules available determines the efficiency of calmodulin signalling in the synapse and the strength of AMPA receptor transmission (Zhong et al. 2009). An exogenous overexpression of neurogranin is sufficient to trigger a Ca^{2+} signal that normally induces Long Term Potentiation (LTP) which is crucial for learning and memory. This neurogranin-induced synaptic potentiation and LTP share common signalling mechanisms. Like LTP, neurogranin-induced potentiation requires the activity of NMDA receptors and CaMKII. Furthermore, in such neurons that overexpress neurogranin and where the AMPA receptor response is therefore already potentiated, LTP can no longer be electrophysiologically induced. Taken together, these observations in turn imply the involvement of neurogranin in the signalling pathway of LTP (Hayashi 2009).

Further large genome wide association studies on schizophrenia are currently under way and will hopefully add new relevant knowledge on schizophrenia. Based on this, functional studies including cell and animal models will be necessary. There is new hope that these new avenues will help understanding the neurobiology of schizophrenia in more depth leading to the development of new innovative diagnostic tools and therapies.

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Gene × Environment Interaction Models in Psychiatric Genetics

Katja Karg and Srijan Sen

Abstract Gene–environment ($G \times E$) interaction research is an emerging area in psychiatry, with the number of $G \times E$ studies growing rapidly in the past two decades. This article aims to give a comprehensive introduction to the field, with an emphasis on central theoretical and practical problems that are worth considering before conducting a $G \times E$ interaction study. On the theoretical side, we discuss two fundamental, but controversial questions about (1) the validity of statistical models for biological interaction and (2) the utility of $G \times E$ research for psychiatric genetics. On the practical side, we focus on study characteristics that potentially influence the outcome of $G \times E$ interaction studies and discuss strengths and pitfalls of different study designs, including recent approaches like Genome–Environment Wide Interaction Studies (GEWIS). Finally, we discuss recent developments in $G \times E$ interaction research on the most heavily investigated example in psychiatric genetics, the interaction between a serotonin transporter gene promoter variant (5-HTTLPR) and stress on depression.

Keywords Genomic · Stress · Behavior · Serotonin

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1 Introduction

One of the oldest and most enduring questions in psychiatry is whether mental illness is caused by nature (genes) or nurture (environment). Decades of epidemiology studies have tried to answer this question through twin and adoption studies. These studies have demonstrated a moderate genetic component for some disorders (depression and alcohol dependence) and a high genetic component for others (schizophrenia and autism). The relatively high heritability of psychiatric disorders has prompted investigators to look deeply for direct connections between genes and mental illness. Over the past 20 years, thousands of studies have been performed assessing the direct relationship between genes and mental illness in the form of candidate gene association studies, linkage studies and more recently, genome-wide association studies (GWAS). Despite the intense effort, very few direct genetic effects have been identified (Moffitt et al. 2005; Rutter et al. 2006). Therefore, researchers have increasingly directed their attention to the investigation of interactions between genes and environment, a possibility that has traditionally been understudied in behavioral and psychiatric genetics (Caspi 1998; Scarr 1992). In contrast, $G \times E$ interactions have been demonstrated consistently in other branches of medicine (van Os et al. 2008). Hence, $G \times E$ interaction research is an emerging discipline in psychiatric genetics with growing numbers of novices in need of a comprehensive introduction to the field. In this chapter we aim to give such an introduction, starting with a detailed definition of $G \times E$ interaction. We then discuss two fundamental, but controversial theoretical questions about the validity of statistical models for biological interaction and the utility of $G \times E$ interaction research for the field of psychiatric genetics. Finally, we discuss practical aspects of studying $G \times E$ interactions, with an emphasis on study designs and assessment methods that may affect the success of $G \times E$ interaction studies, and present relevant examples from the field.

1.1 What is a $G \times E$ Interaction?

The term “ $G \times E$ interaction” stems from regression models that seek to divide the population variance for disorder risk into environmental and genetic parts. Effects of these factors that are independent from one another are called

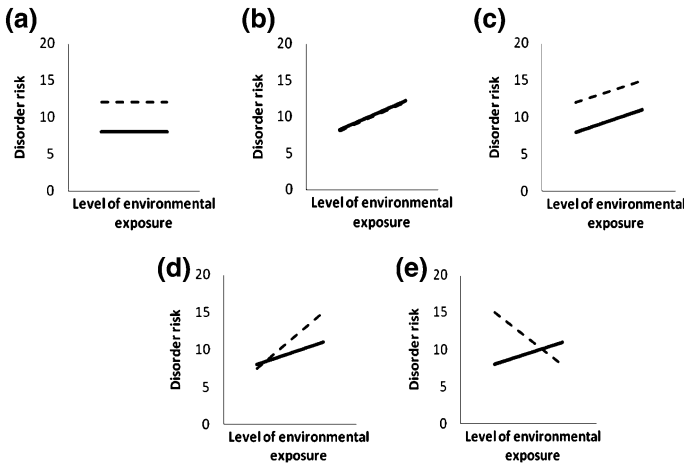


Fig. 1 Illustration of main and interaction effects of genes and environmental exposure on disorder risk. *Solid line* Genotype A, *dashed line* Genotype B. **a** Genetic main effect **b** Environmental main effect **c** Additive effect of genes and environmental exposure **d** Quantitative interaction effect **e** Qualitative interaction effect

main effects. The main effect of either the genetic or the environmental factor can explain the variance for the disorder entirely (Fig. 1a, b) or both factors can coact and explain the variance additively, operating independently alongside each other (Fig. 1c). Consider a child with a retinoblastoma, a malignant tumor of the retina caused by an inherited mutation in one allele of the tumor suppressor gene *Rb1*. If the patient's unaffected eye gets injured through an accident and the eyesight of this patient becomes worse, the genetic and the environmental factor operate together on the same outcome (eyesight), but are not involved in the same biological pathway and fully independent factors. In contrast, in an interaction effect, the factors depend from each other (Fig. 1d, e). In biological terms, such a $G \times E$ interaction effect occurs when *the effect of exposure to an environmental factor on the disorder status depends on the person's genotype* (Moffitt et al. 2006). In other words, a $G \times E$ interaction is defined by differences of genotypes in susceptibility to environmental exposure (Kendler and Eaves 1986). For example, our patient with retinoblastoma has an impaired DNA repair system causing her to be markedly more susceptible to UV light compared to an individual without the mutation. By exposure to UV light, tumors develop and worsen the patient's eyesight. Thus, the effect of the exposure to the environmental factor (radiation) on the outcome (eyesight) depends on the person's genotype, constituting an example for $G \times E$ interaction. $G \times E$ interactions can be quantitative, i. e. the exposure to the environmental pathogen increases the disorder risk for all genotypes, but to different extends (Fig. 1d) or they can be qualitative, i.e. the exposure to the environmental factor increases the risk for one genotype, but decreases it for another (Fig. 1e) (Ottman 1990). With respect to our previous example, a qualitative interaction would occur if UV radiation decreases the risk for retinoblastoma for one genotype, whereas it would increase it for another.

1.2 Other Forms of Gene–Environment Co-Action: Gene–Environment Correlations

Genes and environmental factors can co-act in different ways, and not all of them are $G \times E$ interactions [see (Moffitt et al. 2006) for details]. Gene–environment correlations (rGE) are of particular importance, because they can produce false-positive findings in $G \times E$ interaction research. rGE can occur when a person's genotype influences her probability of exposure to environmental risks (Plomin et al. 1977; Rutter and Silberg 2002). Several mechanisms have been proposed to drive rGE (Plomin et al. 1977; Jaffee and Price 2007). In active rGE an individual actively selects her environment according to her (genetically influenced) traits and behaviors. For instance, an individual characteristically risk-seeking and impulsive may be much more prone to risk environments than a cautious individual. The presence of rGE has been demonstrated through twin and adoption studies for a wide range of factors, including the occurrence of life events, such as divorce, job loss and serious accidents (Rutter et al. 2006; Rutter and Silberg 2002). The common nature of rGE underscores the danger in the independence assumption of genotype and environment in $G \times E$ interaction research. This assumption can be a major problem for some study designs, in particular case-only studies (Jaffee and Price 2007) (further details below).

2 Theoretical Considerations for $G \times E$ Interaction Studies

There are two fundamental, theoretical questions about $G \times E$ interaction studies that are currently the subject of considerable debate in the literature: (1) Whether the current state of our knowledge about the neurobiology underlying psychiatric disorders allows us to explore $G \times E$ interactions in a meaningful way; (2) Whether the expected benefits derived from this research are important enough to justify the considerable resources that these studies require. We address both questions here and try to accurately represent the two opposing camps in the discussion.

2.1 Can We Model $G \times E$ Interaction in Statistics?

Although the biological definition of $G \times E$ interaction is straightforward, its implementation into statistics is far less clear. Two models are commonly used, the additive and the multiplicative model. The additive model constitutes a $G \times E$ interaction when the disorder risk if exposed to both the risk gene (G) and the risk environment (E) differs from the *sum* of the risks if exposed only to G or to E. In biological terms, this is equivalent to the deviation from a simple additive main

Table 1 Illustration of the additive and multiplicative model in statistical G × E interaction testing

		E−	E+
(a)			
G−		2	5
G+		3	10 (6)
		Condition for G × E interaction Example 1	Example 2
(b)			
Additive model	Risk (G+, E+) ≠ ¹	10 ≠ ¹ 3+5−2	6 = ¹ 3+5−2
	Risk (G+, E−) + Risk (G−, E+) − Risk (G−, E−)	(G × E present)	(G × E absent)
Multiplicative model	Risk (G+, E+) ≠ ¹ Risk (G+, E−) × Risk (G−, E+)	10 ≠ ¹ 3 × 5	6 ≠ ¹ 3 × 5
		(G × E present)	(G × E present)

In Table a, two numerical examples for (disorder risk depending on the absence (−) or presence (+) of exposure to the genetic risk factor (G) and environmental risk factor (E) are given, differing only in the (G+, E+) field. Table b illustrates the statistical problem associated with G × E interaction testing: Whereas example 1 leads to the consistent positive result for G × E interaction across the additive and the multiplicative model, the models yield conflicting results for example 2

¹ Statistical significance of the deviation needs to be tested

effects model. This model is used for continuous outcomes, such as depression scores. The multiplicative model constitutes a G × E interaction when the disorder risk if exposed to both G and E differs from the *product* of the risks if exposed only to G or to E. This is used for categorical outcomes, e.g. diagnosis of depression with the two categories “depressed” and “non-depressed”. The biological meaning of a multiplicative model is hard to grasp and most researchers argue that the additive model better reflects biological concepts (Rutter et al. 2009). The problem is that in some cases, a study result might deviate significantly from a multiplicative model, but not from an additive model, and vice versa (Kendler and Gardner 2010) (Table 1a, b). This is particularly problematic as continuous outcomes can be converted to categorical outcomes by setting an arbitrary threshold. Given sufficient statistical power, this threshold can be chosen so that either of both models indicate a significant interaction effect. Some researchers argue that this model-dependency renders positive G × E interaction findings arbitrary (Zammit et al. 2010a) and testing for interactions across multiple models is therefore “no different from trawling through many statistical tests looking for those that are significant” (Kendler and Gardner 2010). Therefore, the statistical model to be tested should be carefully selected a priori, based on biological background considerations, and thresholds for categorical data should be set before the analysis. Unfortunately, our current knowledge about neurological pathways is very limited, and, as a result, it is still unclear which statistical model is appropriate (Thompson 1991). This situation has caused some leaders to conclude that we might be unable to move back and forth between statistical and biological

interaction models (Kendler and Gardner 2010). The debate remains controversial (Rutter et al. 2006; Zammit et al. 2010a; Caspi and Moffitt 2006; Munafò et al. 2009). One way that investigators have used to circumvent this statistical problem is utilizing new study designs such as case-only or exposed-only designs. These designs do not rely on testing statistical interactions, but directly test differences in exposure rate (case-only design) or in disorder status (exposed-only design) between genotype groups. To date, these designs have mostly been applied in psychiatric $G \times E$ interaction research to investigate the interaction between a serotonin transporter gene promoter variant (5-HTTLPR) and stress on the risk of depression (Caspi et al. 2003), with mostly positive results (Karg et al. 2010).

2.2 Is $G \times E$ Interaction Research Worth the Effort?

There are three primary arguments for why the identification of $G \times E$ interaction effects will substantially advance the field. First, they can help identify new genetic and environmental main effects associated with psychiatric disorders (Kraft et al. 2007). Some risk genes and environments might be masked from detection in scans for direct genes-to-disorder or environment-to-disorder associations because of genotype-specific environmental effects on the disorder status due to $G \times E$ interactions. Second, knowledge about the interaction effect of gene and environment on a psychiatric disorder might enhance the identification of the biological pathway underlying the interaction by revealing the genetic and environmental factors involved and thus channel neuroscience studies in a productive direction (Caspi and Moffitt 2006). Third, $G \times E$ interaction findings may have clinical relevance and drive the development toward personalized medicine or individual lifestyle recommendations based on the genetic profile (Dempfle et al. 2008; Uher and McGuffin 2007). They could explain differences in response to pharmacological and psychological treatments by differences in the susceptibility of genotypes to environmental factors. Individuals with high-susceptibility genotypes could be identified and prevented from suffering exposure to the relevant environmental pathogens.

Several researchers have criticized this optimistic view, pointing out that the $G \times E$ interaction effects identified to date are small, with odds ratios generally between 0.67 and 1.5 (Manolio et al. 2008), limiting the potential influence of $G \times E$ interaction on advances in psychiatric genetics and clinical practice (Zammit et al. 2010a, b; Hunter et al. 2008). In particular, the power for finding main effects might only marginally increase by including $G \times E$ interaction effects in the statistical model (Munafò et al. 2009). In addition, $G \times E$ findings might help identify the underlying biological pathway only through the detection of qualitative $G \times E$ interactions, a case known to be rare in epidemiology (Thompson 1991). Thus, there is an ongoing debate about the benefit of $G \times E$ interaction research and the considerable amounts of resources spent in the field (Kendler and Gardner 2010; Uher and McGuffin 2007; Zammit et al. 2010b).

3 Practical Considerations for $G \times E$ Interaction Studies

Investigating $G \times E$ interactions is challenging. For each participating subject, detailed information from three distinct domains is needed: (1) genotype, (2) environmental exposure, (3) psychiatric disorder status. Fortunately, it has become increasingly inexpensive to reliably determine the genotypes of large numbers of subjects due to improved molecular genetic techniques. Gathering valid information in the domains of environmental exposure and disorder status, however, remains expensive and time consuming. This mismatch has led to an increasing number of studies where a huge sample of subjects is genotyped but the quality of phenotype information is comparatively poor. Further, researchers have taken advantage of declined genotyping costs by adding genotype data to studies originally not designed for $G \times E$ interaction research (Caspi et al. 2010). Here we give a brief overview on the consequences of these trends and the other methodological issues associated with $G \times E$ interaction research. We will present different study design approaches, each with particular advantages and limitations as well as examples from the psychiatric genetics literature (Table 2). For further detailed information on $G \times E$ interaction testing see (Caspi and Moffitt 2006; Kendler and Gardner 2010 and Rutter 2002). Complementary research guidelines can be found in (Moffitt et al. 2005, 2006).

3.1 Methodological Issues in $G \times E$ Interaction Research

Three major methodological confounding issues are important to consider in planning $G \times E$ interaction research: Selection bias, population stratification and recall bias. Selection bias can occur when cases and controls are not drawn from the same underlying population, resulting in erroneous conclusions about associations between genotype, environmental exposure and disorder risk (Hunter 2005). For example, gene–environment correlations can arise in a situation where the presence of a genotype group is correlated with exposure to a particular risk environment. This can result in an overrepresentation of cases with this genotype and therefore steer the study outcome toward false-positive findings regarding differences between cases and controls. Population stratification is the presence of a systematic difference in allele frequencies between subpopulations in a population possibly due to different ancestry (Hunter 2005). Specifically, populations differ with regard to allele frequencies at loci throughout the genome. If these populations also differ in their prevalence of the disorder of interest, spurious associations can be found between this disorder and genetic loci that neither affect the relevant disorder nor are linked to a causative loci. Fortunately, methods have been developed to control for stratification, using unlinked genetic markers to identify and correct for population structure (Cardon and Palmer 2003). These genomic control methods should be utilized in modern day $G \times E$ studies.

Table 2 Study designs in $G \times E$ interaction

	Design	Description	Advantages	Disadvantages
Family-based designs	Twin study	Comparison of disorder frequency between twin pairs in different environments	No genetic data required; reduced selection and stratification bias	High costs and efforts
	Trio design	Comparison of expected genes in cases to possibly transmitted genes from both parents, stratified by case's environment	Increased power; reduced selection and stratification bias	High costs and efforts
	Sib design	Case-control design with unaffected relative as control	Increased power; reduced selection and stratification bias	High costs and efforts
Traditional population-based designs	Prospective cohort	Comparison of disorder frequency across groups defined by genotype and environment; exposure assessed previous to diagnosis	Reduced selection and stratification bias; reduced recall bias; high-quality measurement for environmental exposure	High costs and efforts; time-consuming; Low, possibly biased follow-up rates
	Cross-sectional	Like prospective cohort, but exposure assessed simultaneously with diagnosis	Reduced selection and stratification bias; more cost-efficient compared to prospective cohort design	Increased recall bias
Novel population-based designs	Retrospective case-control	Comparison of genotype frequencies and exposure between cases and controls	Increased power and more cost-efficient compared to cohort designs	Increased selection and stratification bias; increased recall bias
	Prospective nested case-control	Comparison of cases with matched non-affected cohort members	Combined advantages of prospective cohort and retrospective case-control designs	–
	Case-only	Comparison of exposure across groups defined by genotype	Increased power compared to case-control; cost-efficient	High risk of bias due to confounding with rGE
	Exposed-only	Comparison of genotype frequencies across exposed individuals grouped by genotype	Cost-efficient	Risk of bias due to confounding with rGE; increased selection bias

The third major problem in $G \times E$ interaction research is recall bias. Recall bias occurs when subjects cannot accurately recall past events or when particular events become more or less important in retrospect than when they occurred. In particular, patients often overcount potential environmental causes for their disorder, a phenomenon termed mood-congruent memory revision (Joormann et al. 2009; Schwarz and Clore 1983). Recall bias tends to become greater with the greater length of time between the environmental exposure and its report. However, this retrospective forgetting is often selective and its magnitude and character differs between affected and unaffected individuals (Monroe 2008). The difficulties in overcoming the problem of recall bias in retrospective studies provide the impetus for specific novel study designs that we will discuss in later sections.

3.2 Assessment of Environmental Exposure and Disorder Status

An important, but underappreciated factor affecting the power of $G \times E$ studies is the assessment method for environmental exposure (Caspi et al. 2010). Poor measurement quality has been correlated with negative findings (Uher and McGuffin 2007, 2010). Simulation studies have demonstrated that in $G \times E$ interaction studies, moderate decreases in the measurement accuracy of the environmental variable can result in a 20-fold reduction in statistical power to detect interaction (Moffitt et al. 2005). In line with this simulation result, in a recent meta-analysis on studies investigating the moderating effect of a serotonin transporter gene polymorphism (5-HTTLPR) on the relationship between stressful life events and depression, we found that studies that utilized more intensive stress assessment methods, such as in-person interviews, were more likely to detect an effect than studies that utilized self-report questionnaires (we will discuss the set of 5-HTTLPR-stress studies in more detail in Sect. 4). One reason for these findings is likely that the effect of measurement error, such as recall bias, is more pronounced in self-report questionnaires than in personal interviews because trained interviewers can counteract poor recall by using appropriate techniques such as life event calendars and memory enhancement (Caspi et al. 2010). Self-report event checklists have been shown to result in more imprecise information (Monroe 2008). Objective measurements may also be superior to self-report questionnaires because they minimize the effects of recall bias by focusing objective information. Further, the objective stressor design reduces between-subject heterogeneity by the use of clearly operationalized and objectively identifiable environmental factors, resulting in an increase of internal validity (Caspi et al. 2010). These findings underscore the importance of choosing assessment methods for $G \times E$ studies carefully. The use of several independent measurements such as self-report, diagnostic interview or informant reports are excellent possibility to increase the accuracy of assessment (see Caspi et al. (2003), for a good example). A similar set of methodological considerations apply to the assessment of disorder status. In comparison to many systemic disorders, psychiatric disorders are difficult to

diagnose, relying on arbitrary thresholds on symptom severity scales (Eaton et al. 2007). For instance, a wide range of threshold scores (12–23) have been suggested for diagnosing depression with the commonly used Beck Depression Inventory (Nuevo et al. 2009). While commonly used diagnostic instruments for many psychiatric disorders (such as depression, alcohol and drug use disorder) have acceptable measurement characteristics, others perform poorly (e.g. panic disorder, obsessive–compulsive disorder, bipolar disorder and schizophrenia), with particularly poor sensitivity (40%) and specificity (89%) for schizophrenia (Eaton et al. 2007).

3.3 Study Designs

$G \times E$ interaction study designs can broadly be categorized into family-based designs and population-based designs. Both designs have particular strengths and limitations regarding the methodological issues described above (Table 2). Family-based studies generally assess whether there is a greater than expected transmission of specific alleles to affected family members (Ewens and Spielman 1995). The specific family-based study designs include twin studies (Ottman 1994), trio designs with an affected individual and both parents (Schaid 1999; Witte et al. 1999), and sib designs with one affected and one unaffected sibling or relative (Gauderman et al. 1999). If the frequency of transmission differs between exposed and non-exposed cases, a $G \times E$ interaction is present (Schaid 1999). The main advantages of family-based designs is a per subject increase in power compared to population-based designs, and robustness against population stratification. However, family-based designs have some major drawbacks that have limited their use. One is that it is often harder to recruit an adequate number of sibling or twin pairs than unrelated subjects, and the unavailability of living parents can limit the scope of trio studies (Hunter 2005). Further, newer genomic control methods can robustly control for stratification, rendering the primary advantage of family-based methods less useful. Therefore, in most cases of $G \times E$ interaction research, population-based designs are used.

In contrast to the family-based design, design studies generally draw from a set of unrelated subjects. These studies differ according to how these subjects are selected. Subjects can be drawn from a cohort [cohort study design (Collins 2004)], selected and matched as cases and controls [case-control design (Yang and Khoury 1997)], drawn from affected individuals only [case-only design (Khoury and Flanders 1996)], or from individuals exposed to the environmental risk factor only [exposed-only design (Moffitt et al. 2006)].

Cohort study design. In cohort study designs, the sample studied should accurately represent the target population in terms of genotype, exposure rate and disorder status. Information can be assessed either once (cross-sectional design) or repeatedly over time (prospective/longitudinal design). When analyzing the data, subjects can be assigned to groups according to their genotype and their exposure

rate (e.g., genotype A with low environmental exposure vs. genotype B with low environmental exposure), and disorder frequencies can be compared between these groups. If high follow-up rates are obtained, the prospective cohort design can provide high-quality data because it efficiently handles the three major methodological issues facing $G \times E$ studies: it minimizes selection bias, because the disorder usually occurs after subjects are selected (Yang and Khoury 1997), it minimizes population stratification by sampling from a defined cohort and it reduces recall bias to a minimum if the baseline information is assessed early in life of the cohort and when it can be followed several times over years (Hunter 2005).

Three of the most important findings in psychiatric $G \times E$ interaction research were produced by utilizing through a study a prospective cohort study design, the Dunedin Multidisciplinary Health and Development Study (Dunedin Longitudinal Study) (Caspi et al. 2002, 2003, 2005). The Dunedin Longitudinal Study investigated a large birth cohort of 1,037 children born in 1972–73 in Dunedin, New Zealand. The cohort was first assessed at age three and since then followed up every two years for two decades (Silva 1990). Data from this cohort demonstrated significant $G \times E$ interaction effects on violent behavior (Caspi et al. 2002), depression (Caspi et al. 2003) and adult psychosis (Caspi et al. 2005). These landmark studies provide evidence supporting the strength and accuracy of the prospective cohort design.

The downside of this study design is the long time frame necessary to conduct these studies. For instance, the Dunedin Longitudinal Study was started 30 years before the first $G \times E$ interaction finding was published. In addition, large samples are needed because the environmental exposure and/or the disorder might be at low prevalence in the cohort (Hunter 2005). As a result, many investigators opt for quicker and less expensive designs. The cross-sectional modification of the cohort study assesses cohort information only once. Although this design loses some of the advantages of a prospective study, the cost and time frame necessary to carry out the study is often more feasible.

Retrospective case-control. Another inexpensive and popular alternative to the prospective cohort design is the retrospective case-control design. Here, affected subjects with the disorder are selected and matched with subjects who do not have the disorder ('controls'). This procedure allows for the controlled sampling of subjects with disorder and/or environmental exposure, yielding the advantage of increased power compared to cohort studies (McClelland and Judd 1993). Information about past exposure is gathered and the exposure rates and genotype frequencies are compared between cases and controls. Due to the selection and matching process, this design is particularly prone to selection bias and population stratification, especially when the source population for controls is hard to define (Hunter 2005). The prospective-nested case-control design is a more sophisticated study design that addresses these methodological problems by selecting cases and controls from a predetermined longitudinal cohort. As cases and controls stem from the same cohort, confounding from selection bias and population stratification is avoided. In addition, recall bias is eliminated because exposure is assessed

before the diagnose. Compared to a full cohort approach, this design offers substantial reductions in costs and efforts.

Case-only. Recently, investigators have proposed a study design that eliminates the use of control subjects (Khoury and Flanders 1996; Piegorsch et al. 1994). In the case-only design, affected subjects are selected from the population and grouped according to their genotype and then compared for their exposure rates. In the presence of $G \times E$ interaction, some genotypes are more susceptible to the environmental pathogen than others, resulting in an overrepresentation of subjects with environmental exposure in this genotype group. Therefore, differential distributions of exposure rates across genotype groups can be interpreted as a $G \times E$ interaction effect. As an example, Mandelli et al. (2006) utilized the case-only design to investigate the interaction effect of 5-HTTLPR and stress on depression. They studied a sample of 686 patients diagnosed for major depression or bipolar disorder and classified them into six groups according to their genotype and the presence or absence of environmental exposure to life stress in the year before depression onset. On comparing the proportion of the sample exposed between each genotype group, they found higher proportions of previously exposed subjects in the genotype groups carrying the short allele. The authors interpreted this finding as evidence for higher stress susceptibility of short allele carriers. However, this conclusion has to be viewed with some caution because the case-only design is prone to confounding. Differential distributions in exposure rates across genotypes can also emerge through G-E correlation, with specific genotypes being more likely to be exposed to the environmental factor than others (Khoury and Flanders 1996). In this study, it is possible that short allele carriers are more prone to experience stressful situations and that this causes their overrepresentation in the exposed group. The only safe way to rule out this potential bias is through the verification of the underlying assumption of gene-environment independency. Therefore, the case-only design should be used only if the independency assumption is verified or for exploratory studies (Albert et al. 2001).

Exposed-only. A related, but subtly different approach that has become increasingly popular is the exposed-only design. Here, subjects exposed to the same environmental factor are selected, grouped according to their genotype and compared for their disorder status. In the presence of $G \times E$ interaction, disorder frequencies should be higher in the genotype group with higher susceptibility to the environmental exposure. However, as we discussed concerning the case-only design, this conclusion is only valid in the absence of G-E correlation. An example might illustrate this problem. A recent study utilized an exposed-only design to explore a moderating effect of the FKBP5 (FK506 binding protein 5) gene on the relationship between severe injury and peritraumatic dissociation (Koenen et al. 2005). Peritraumatic dissociation is an evolutionary conserved response to life-threatening events and a risk factor for the development of post-traumatic stress disorder (Ozer et al. 2003). The study sample consisted of 46 severely injured hospitalized children who were genotyped and compared for their peritraumatic dissociation scores with logistic regression analysis. The study revealed a significant $G \times E$ interaction effect of FKBP5 genotype and severe injury on the

development of peritraumatic dissociation. However, this finding could have arisen through rGE, with one genotype group particularly prone to risk-seeking and therefore more likely to suffer severe injury and corresponding peritraumatic dissociation. This could lead to the erroneous conclusion that this genotype is more susceptible to peritraumatic dissociation than others. In this study, however, injury severity was taken into account in the statistical analysis, rendering a false-positive result due to rGE less likely. Another elegant way to guard against bias due to rGE is exact matching for exposure across participants (Moffitt et al. 2006). This allows investigators to bypass the model-dependency problem. Hence, the problem of rGE in exposed-only designs is much easier to handle than in case-only designs where additional empirical evidence is needed. The exposed-only design is thus an attractive cost-efficient design that can be used to test $G \times E$ interaction for candidate genes as well as for the discovery of unknown risk genes (Moffitt et al. 2006).

3.4 Wide Interaction Studies

With the advent of genome-wide association studies (GWAS) it is now possible to genotype up to one million SNPs for each participant, allowing investigators to scan the entire genome for relevant genes without prior hypothesis. While most GWAS to date have explored direct associations, groups have begun to modify GWAS to include assessment of environmental variables in order to conduct Gene–environment wide interaction studies (GEWIS) (Khoury and Wacholder 2009). GEWIS allow us to investigate several candidate pathways at once at relatively low costs and hold the promise to identify new possible $G \times E$ interactions. The greatest challenge for GEWIS involves finding a balance between dismissing true findings through stringent correction for multiple testing and reporting false-positive results (Sebastiani et al. 2005). Without any prior hypothesis it is hard to distinguish false from true positives, especially as interaction effects in complex traits such as mental disorders are supposed to be small. However, systematic approaches to the problem are emerging (Onkamo and Toivonen 2006; Wacholder et al. 2004). Despite the great remaining conceptual challenges, GEWIS paired with thorough phenotyping holds promise in producing advances in the field of $G \times E$ interaction research.

4 Empirical Evidence for $G \times E$ Interaction in Psychiatric Genetics

$G \times E$ interactions in psychiatric genetics have been reported for various disorders such as depression, attention deficit/hyperactivity disorder (ADHD), schizophrenia, obesity and substance use disorders (Table 3). The identified environmental pathogens range from prenatal factors such as maternal smoking (Kahn et al. 2003)

Table 3 Selected G × E interaction findings in psychiatric genetics

Gene	Risk environment	Disorder	Original finding
SLC6A4	Stressful life events	Depression	Caspi et al. (2003)
SLC6A4	Childhood maltreatment	Depression	Caspi et al. (2003)
SLC6A4	Mother's expressed emotion	ADHD	Sonuga-Barke et al. (2009)
SLC6A4	Early life stress	Alcohol abuse	Olsson et al. (2005)
MAOA	Childhood maltreatment	Antisocial personality; Conduct disorder	Caspi et al. (2002)
DRD4	Priming alcohol doses	Alcohol craving	Hutchison et al. (2002a)
DRD4	Smoking cues	Tobacco craving	Hutchison et al. (2002b)
DAT1	Prenatal maternal smoking	ADHD	Kahn et al. (2003)
DAT1	Prenatal maternal use of alcohol	ADHD	Brookes et al. (2006)
DAT1	Season of birth	ADHD	Seeger et al. (2004)
DAT1	Psychosocial adversity in childhood	ADHD	Laucht et al. (2007)
DAT1	Mother's expressed emotion	ADHD	Sonuga-Barke et al. (2009)
DAT1	Institutional deprivation	ADHD	Stevens et al. (2009)
COMT	Cannabis use in adolescence	Adult psychosis	Caspi et al. (2005)
COMT	Low birth weight	ADHD	Thapar et al. (2005)
COMT	Stress	Psychosis	van Winkel et al. (2008)
CRHR1	Stress	Alcohol abuse	Blomeyer et al. (2008)
CRHR1	Childhood trauma	Mood and anxiety disorders	Bradley et al. (2008)
FTO	Physical inactivity	Obesity	Andreasen et al. (2008)
FKBP5	Acute injury	Psychological dissociation	Koenen et al. (2005)
FKBP5	Childhood abuse	Mood and anxiety disorders	Binder et al. (2008)

or maternal alcohol use (Brookes et al. 2006) to factors relevant at birth [e.g. season of birth (Seeger et al. 2004), birth weight (Thapar et al. 2005)] and early development [e.g. childhood maltreatment (Caspi et al. 2003), childhood trauma (Bradley et al. 2008)] to factors affecting adolescence [e.g. cannabis use (Caspi et al. 2005)] and adulthood [e.g. stress (Blomeyer et al. 2008), physical inactivity (Andreasen et al. 2008)]. However, track record of replications has often been poor, casting doubt on the validity of these findings (Thomas 2010). Nonreplication can be due to false-negative results, false-positive results or true heterogeneity between studies. False-negative results in psychiatry studies are most often caused by insufficient power, either due to a small sample size or suboptimal phenotyping or genotyping quality. False-positive results can often result from multiple testing and population stratification. True heterogeneity occurs if the interaction exists in some populations studied or with some environmental factors studied but not with others. Here, we present the most heavily investigated example in psychiatric G × E interaction research, a G × E interaction between a polymorphism in the promoter region of the serotonin transporter gene (5-HTTLPR) and both adult stressful life

events and childhood maltreatment on the risk of depression (Caspi et al. 2003). We will discuss conflicting results between studies exploring this interaction and potential reasons for the conflict.

The original study exploring this interaction utilized a prospective-longitudinal cohort design with almost 1,000 children and found that individuals homozygous or heterozygous for the low-expressing short variant of 5-HTTLPR are more susceptible to depression after stress than individuals homozygous for the alternate long variant. The same pattern was found for childhood maltreatment. This study caused a great deal of excitement in $G \times E$ interaction research and encouraged further research on this issue. To date, there have been 55 follow-up studies with some confirming the original finding, some finding evidence of higher stress susceptibility of individuals with the alternate long allele, and others finding no interaction effect at all (Karg et al. 2010). This inconsistency might be due to the heterogeneity of studies in many relevant aspects. First, studies exploring the relationship between 5-HTTLPR, stress and depression have utilized very different research designs, including longitudinal, cross-sectional, case-control, case-only, exposure-only and family-based designs. Second, studies have measured many different depression phenotypes using diverse assessment strategies, including clinical interviews and self-report checklists, and diverse depression scales, variously yielding both categorical and continuous outcome measures. Third, studies have investigated an extraordinarily varied set of stressors with various assessment methods. For instance, stressors counted in different studies for stressful life events ranged from becoming homeless, and the death of a parent or spouse to growing up in a household with siblings who quarreled or as the child of a father in an unskilled occupation. Other studies used more specific, but highly diverse stressors such as stroke survival, hurricane exposure, bullying victimization or childhood maltreatment. To clarify this confusion, three meta-analyses have been carried out to date. The first two (Uher and McGuffin 2007; Risch et al. 2009) concluded that there was no evidence supporting the presence of an interaction. However, these analyses investigated only small subsamples of all 55 studies due to methodological constraints. The latest meta-analysis (Karg et al. 2010) included all relevant studies and detected stressor type (stressful life events, childhood maltreatment, and specific medical conditions) and stress assessment method (questionnaire, interview, objective) as two critical sources for variability in study outcomes. In particular, studies with childhood maltreatment or specific medical conditions as environmental stressor were more likely to find a significant $G \times E$ effect than studies with broader defined stressful life events, as were studies with objective or interview assessment methods for environmental stressors. This again supports the assumption that measurement quality can affect results in $G \times E$ research.

Since this original study, further evidence from various fields has emerged (Caspi et al. 2010). First, several empirical studies link the short 5-HTTLPR variant to stress-sensitive phenotypes such as post-traumatic stress disorder (Xie et al. 2009), post-trauma suicide (Roy et al. 2007), stress-related sleep disturbance (Brummett et al. 2007) and anxiety (Stein et al. 2008). Second, a multitude of neuroimaging studies confirmed increased and faster amygdala

reactivity following threat in carriers of the short allele e.g. (Furman et al. 2010; Heinz et al. 2005) and linked it to specific brain anatomy characteristics e.g. (Pacheco et al. 2009; Pezawas et al. 2005). Third, Rhesus macaques carrying the short variant exhibit greater anxiety-related behaviors in response to adverse rearing conditions compared to their conspecific with the long alternate (Barr et al. 2004; Spinelli et al. 2007). Fourth, in addition to 5-HTT knockout mice, 5-HTT knockout rats showed increased anxiety levels in response to stress (Homberg et al. 2007). Taken together, these outcomes across a wide variety of techniques, models and species as well as the numerous positive $G \times E$ studies robustly demonstrate the interaction effect between stress and 5-HTTLPR genotype on depression and are to date the most intriguing finding of $G \times E$ interaction in psychiatric genetics.

5 Future Directions

Although much progress has been made in the past two decades, many questions in $G \times E$ interaction research in psychiatric genetics remain open. New, more carefully conducted epidemiological studies could shed light on these questions. Another major step for clarification is the identification of the biological mechanisms underlying interaction effects. Not much is known about how environmental factors can interact with a person's genotype and her nervous system to moderate the disorder risk. Therefore, joining forces with neuroscience is an important step in making progress in the field (Caspi and Moffitt 2006). Many epidemiological studies on $G \times E$ interaction in psychiatric genetics were motivated by findings of neuroscience research and positive epidemiological findings, in turn, can stimulate new studies in neuroscience. The interaction between 5-HTTLPR and life stress on depression provides an example where neuroscience studies can illuminate the black box between genes, environment and disorder (Merikangas and Risch 2003) and confirm and explain epidemiological findings. Another fruitful approach for advances in the understanding $G \times E$ interaction might be the collaboration with epigenetic research. Many environmental risk factors operate early in development, and fine-tuning of neuronal pathways is known to be affected by environmental factors (Abdolmaleky et al. 2004). If these epigenetic modifications depend on the person's genotype, a plausible mechanism is constituted for $G \times E$ interaction in psychiatric genetics. Epigenetic studies for psychiatric disorders are still in their infancy, and new exciting insights in the interplay of genes and environment on the development of mental disorders are to be awaited.

6 Summary

Although the fundamental questions about the validity of statistical models for biological interaction and the utility of $G \times E$ interaction findings for advances in psychiatric genetics are still highly debated, novel study designs such as case-only

and exposed-only designs can overcome at least some of the statistical concerns. Study designs differ broadly in their strengths and limitations regarding selection bias, population stratification and recall bias. Previously undetermined study characteristics that might additionally affect the outcome of $G \times E$ interaction studies are the assessment methods for environmental exposure and disorder status, as shown for the $G \times E$ interaction effect between the serotonin transporter promoter variant and stress on depression. New insights into the interplay between genes and environment on the development of mental disorders may emerge through more carefully conducted $G \times E$ interaction studies as well as through collaboration with neuroscience and epigenetic research.

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Behavioral Genetics of Affective and Anxiety Disorders

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Abstract As shown by clinical genetic studies, affective and anxiety disorders are complex genetic disorders with genetic and environmental factors interactively determining their respective pathomechanism. Advances in molecular genetic techniques including linkage studies, association studies, and genome-wide association studies allow for the detailed dissection of the genetic influence on the development of these disorders. Besides the molecular genetic investigation of categorical entities according to standardized diagnostic criteria, intermediate phenotypes comprising neurobiological or neuropsychological traits (e.g., neuronal correlates of emotional processing) that are linked to the disease of interest and that are heritable, have been proposed to be closer to the underlying genotype than the overall disease phenotype. These intermediate phenotypes are dimensional and more precisely defined than the categorical disease phenotype, and therefore have attracted much interest in the genetic investigation of affective and anxiety disorders. Given the complex genetic nature of affective and anxiety disorders with an interaction of multiple risk genes and environmental influences, the interplay of genetic factors with environmental factors is investigated by means of gene-environment interaction (GxE) studies. Pharmacogenetic studies aid in the dissection of the genetically influenced heterogeneity of psychotropic drug response and may contribute to the development of a more individualized treatment of

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affective and anxiety disorders. Finally, there is some evidence for genetic factors potentially shared between affective and anxiety disorders pointing to a possible overlapping phenotype between anxiety disorders and depression.

Keywords Intermediate phenotype • GWAS • CNV • Gene-environment interaction (GxE) • Pharmacogenetics

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1 Affective Disorders

The group of affective disorders comprises both major depressive disorder (MDD; unipolar depression) with various subtypes as well as bipolar disorder (BPD). The latter displays by changes between (hypo-)manic and depressive phases, with intermittent euthymic phases, while the course of MDD is characterized by depression and euthymia. As patients rarely develop their first manic phase only years after their first depression, they might well be initially mischaracterized as MDD patients (so-called “hidden bipolars”), which is a challenge for genetic studies on affective disorders. To overcome this problem, several indicators for the presence of BPD in depression have been suggested, e.g. subthreshold hypomanic symptoms (Angst et al. 2010; Fiedorowicz et al. 2011). This however has not been incorporated in current genetic studies and thus one should always consider that MDD studies might well include a substantial amount of “hidden bipolar” patients, obfuscating MDD-specific findings. Furthermore, in the following section more recent approaches such as genome-wide association studies (GWAS) and copy-number variant (CNV) analyses are reviewed, as there are already plenty of scholarly review articles on linkage and association studies. These issues will therefore be touched upon more briefly; with respect to intermediate phenotype and gene x environment (GxE) studies in affective disorders, the reader is referred

to more specialized reviews for the sake of space, as this extensive topic is beyond the scope of this article.

1.1 Clinical Genetics (Family, Twin, Adoption Studies)

There is ample evidence that BPD is a highly genetic condition featuring an estimated heritability of 0.75 as evidenced by numerous clinical genetic studies. The risk for a bipolar patient to have a bipolar first-degree relative is increased about tenfold, and the risk to have an MDD relative is even higher (10- to 15-fold). The largest study to date, that investigated more than two million Swedish nuclear families (Lichtenstein et al. 2009), demonstrated a heritability of bipolar disorder of 59%. Furthermore, relatives of bipolar patients also had a two to fourfold increased risk to suffer from schizophrenia. Environmental influences were mainly due to non-shared environment. In line with these data, twin studies also argue for a heritability ranging from 59 to 87% (for an overview see Shih et al. 2004). As little as two adoption studies on bipolar disorder have been carried out to date (Mendlewicz and Rainer 1977; Wender et al. 1986), also argued for a genetic cause of the disorder. An excellent overview on clinical genetic studies in bipolar disorder can be obtained from Smoller and Finn (2003).

On the other hand, the heritability of MDD is comparatively lower (estimated to be around 0.37 in the most comprehensive review and meta-analysis available to date; Sullivan et al. 2000) and environmental influences (unique, but not shared environment) are considered to play a more important role as compared to BPD. This is also reflected in twin and adoption studies. However, especially older studies do not discriminate between bipolar and unipolar depression and hence explicit data on unipolar depression is in fact quite limited; only five family and six twin studies, but no adoption study meet the stringent inclusion criteria in a comprehensive analysis (Sullivan et al. 2000). Across the five family studies, the summary odds ratio for MDD in first relatives of MDD patients was 2.84 and significant. Interestingly, the odds ratio increased when only considering controls which have been screened for absence of psychiatric disorders. Two of the three reported twin studies argued for a substantial genetic component of MDD, and finally, the twin studies including more than 21,000 individuals yielded a heritability of 37% and an influence of individual-specific environmental effects of 63%. No large differences in heritability indices were found between community and clinical studies, and the influence of shared environment was negligible. Hence, taken together, there is a clear genetic liability towards MDD although it is much smaller as compared to BPD—which has also been taken into account when reviewing studies where both conditions were not carefully treated separately. Furthermore, it is evident for both MDD as well as BPD that these disorders do not follow a strict Mendelian pattern of inheritance, but rather are complex genetic in nature featuring polygenic and oligogenic models (“common variant, common

disease” model), but probably also—for a part of the patients—highly penetrant risk genes (“multiple rare variant, common disease” model, see below).

1.2 Molecular Genetics (Linkage, Association, GWAS, CNV Analysis)

1.2.1 Linkage Studies

More than 40 linkage scans for BPD have been published to date which generated plenty of disparate findings. However, quite a number of loci meeting significance criteria were described by two or more groups: 3p12-14, 4p16, 4q31-35, 5q31-33, 6q16/21-25, 8q21-24, 10q25-26, 11p15.5, 12q23-24, 13q14-32, 18p11, 18q21-22, 20q13, 21q21-22, 22q11-12, and Xq24-28. Confirmed positional candidate genes however are yet to emerge from these studies. An initially highly promising linkage peak on chromosome 11p15 is considered meanwhile to be due to type I error (Egeland et al. 1987; Berrettini 2001). Also, other loci which have been initially promising could subsequently not be confirmed. A paradigmatic case in this respect is for e.g. the 12q23-24 locus (Dawson et al. 1995; Ewald et al. 1998, 2002; Green et al. 2005), which is noteworthy due to the co-segregation of Darier’s disease with BPD (Maziade et al. 2001). It has been shown that, in some families suffering from both disorders, the BPD locus lies outside of the Darier’s disease causing ATP2A2 gene, yet is in linkage disequilibrium with this variant (Jones et al. 2002). Hence, there might indeed be intermediately penetrant variants in this region which are exclusive to only a few families and which are lost in noise when combining many families, or cases, respectively. Similarly, a functional mutation in the gene encoding the brain-specific tryptophan hydroxylase 2 (TPH2) has been described which segregates with BPD in three families (Cichon et al. 2008; Grigoriou-Serbanescu et al. 2008). Findings like these argue for a “common disease, multiple rare variant” model (McCarthy et al. 2008) and underscore the clinical and genetic heterogeneity of BPD. This however does not argue against the concurrent existence of a “common disease, common variant model”. As both models most likely are present in clinical samples, this additional level of complexity further hampers the identification of BPD risk genes.

Different meta-analyses found the strongest evidence for BPD susceptibility loci on 13q and 22q (Badner and Gershon 2002; 1228 patients from 353 families), or 9p22.3-21.1, 10q11.21-22.1 and 14q24.1-32.12 (948 to 2437 patients; Segurado et al. 2003). The latter study used the rank-based genome scan (GSAM) method which, together with sample heterogeneity, might account for the different findings as compared to the first study. Finally, in a combined analysis, 6q21-q25 and 8q24 showed genome-wide significance (5179 patients from 1067 families; McQueen et al. 2005). Again, the underlying genes have not yet been identified. Further scholarly reviews on this topic have been provided by Schulze and McMahon

(2003), Serretti and Mandelli (2008), Barnett and Smoller (2009), and Craddock und Sklar (2009).

Also in MDD, numerous linkage scans were carried out (reviewed e.g. by Lohoff (2010)) yet did not point to clear regions of susceptibility, as expected from the lower heritability rate of MDD as compared to BPD. No meta-analysis has been performed to date, which is surprising given the recent efforts to uncover the genetic basis of MDD and hence there is a clear need for further research. There is no meaningful overlap of linkage peaks between studies, although it is noteworthy that two linkage signals have previously been implicated in BPD: one on chromosome 18q (Camp et al. 2005) and the locus mentioned above on 12q23-24 (McGuffin et al. 2005; Abkevich et al. 2003). Therefore, this region appears to be a promising region for affective disorders, yet most likely carries more than just one risk gene.

1.2.2 Association Studies

With regard to candidate gene studies, many genes were shown to be associated with BPD, but none of them has been established as a specific BPD susceptibility gene. Among the best replicated genes are DAOA/G72 (which was associated in a case-control study, but not in a meta-analysis; Muller et al. 2011; Shi et al. 2008), BDNF (again, meta-analyses provided differing data: Kanazawa et al. 2007; Fan and Sklar 2008), DISC1, NRG1, ARNTL/CLOCK, FAT, and GSK3B (Barnett and Smoller 2009; Serretti and Mandelli 2008; Luykx et al. 2010). Not surprisingly, many genes encoding for components of neurotransmitter pathways have been tested for an association with BPD (such as SLC6A3, HTR2A, TPH2, MAOA, COMT, DRD1, and SLC6A4). Coming from GWAS on schizophrenia, the risk gene ZNF804A was demonstrated not to be specific for this disorder, but rather was also associated with BPD (O'Donovan et al. 2008; Williams et al. 2011; Steinberg et al. 2011). The same was true for the GWAS schizophrenia risk loci around the MHC region and NRG1 (Williams et al. 2011) and other genes which initially have been described as schizophrenia risk genes: the above-mentioned DISC1 and DAOA/G72 genes, but also NRG1, DTNB1, and NPAS3 (Huang et al. 2010; Pickard et al. 2009).

Most of the association studies published to date suffer from the drawback of small sample sizes and lack of replication, and hence, the combination of large, well described international samples (as done in the Psychiatric GWAS consortium [PGC]) is paramount especially in the search for risk variants assuming a “common variant, common disease” model. Furthermore, meta-analytic treatment of existing data might shed some light on the contribution of suggested BPD risk genes. Such have been performed on considerably sized samples on only a few genes. The gene encoding for methylenetetrahydrofolate reductase (MTHFR) has been tested for an analysis with mood disorders several times. While the first study on 1222 MDD patients yielded negative results (Gaysina et al. 2008), the latest analysis comprising 9648 cases (MDD, BPD and schizophrenia combined) yielded

again a significant yet unspecific association of MTHFR with mood disorders (best OR = 1.26; Peerbooms et al. 2011). This is in line with a positive meta-analysis on BPD by Gilbody et al. (2007), but in discrepancy to three further meta-analyses on MTHFR in BPD (Zintzaras 2006, 1415 cases; Chen et al. 2009, 1260 cases; Cohen-Woods et al. 2010, 2584 cases). Given that the original genotyping data which was presented in the Cohen-Woods study ($n = 897$ BPD patients) was negative, but not included in the Peerbooms study, which demonstrated a significant effect only when all mood disorders were combined, the role of MTHFR in affective disorders seems to be rather unspecific and small.

A meta-analysis on all mood disorders found borderline evidence for an association of the dopamine receptor 2 (DRD2) *TaqI* polymorphism (which in fact localizes to the neighboring gene ANKK1) with affective disorders, yet two more SNPs in DRD2 proved to be negative in much larger data sets so that there is only weak evidence for this gene being associated with BPD or MDD (Zou et al. 2010). The gene for catechol-O-methyltransferase (COMT) that degrades dopamine, features a well described functional polymorphism resulting in a Val to Met transition and which has been shown to be linked to BPD in a meta-analysis on 2944 cases (Zhang et al. 2009b), although this seemed to be more pronounced in Asian populations. Obviously, also genes coding for components of the serotonin system were subjected to meta-analyses, which often were combined with genuine genotyping efforts. A functional SNP in the promoter region of the serotonin receptor gene HTR1A (rs6295) was demonstrated to be significantly associated with BPD (1148 cases, Kishi et al. 2011). In the MAOA gene, three polymorphisms (sample sizes mostly >1000 cases) were meta-analyzed and the main finding was an association of an intronic CA repeat with BPD in Caucasians (Fan et al. 2010). The SLC6A4 promoter polymorphism (5-HTTLPR), which has mainly been studied in MDD GxE (see below) was also included in several meta-analyses that conclusively demonstrated a small yet significant association of the short variant with BPD (Lasky-Su et al. 2005; Cho et al. 2005, 1712 cases). Two meta-analyses focused on the TPH1 gene (Chen et al. 2008, 2011) and in unison came to the conclusion that TPH1 is not associated with MDD (2340 and 1812 patients, respectively), but with BPD (1951 and 2083 cases). Given that in the brain only the TPH2 isoform of tryptophan hydroxylase is expressed, this finding is rather surprising; however, as the foetal brain depends on maternal 5-HT production which is accomplished by placental TPH1 the observed association might in fact be true but rather due to maternal and not case genotype as has been described for rare TPH1 mutations in ADHD (Halmoy et al. 2010).

The lower heritability of MDD as compared to BPD notwithstanding, plenty of case-control association studies have been published thereon as well. A scholarly overview on candidate gene studies is provided by Lohoff (2010). In order to separate the wheat from the chaff, replication is key and meta-analytic aggregation of data is a possible route to success. Accordingly, a thorough meta-analysis on the data available until June 2007 examined 183 papers on 393 polymorphisms (Lopez-Leon et al. 2008). Twenty-two of these polymorphisms have been tested in at least three studies and were thus subjected to further meta-analysis. Here,

significant association was demonstrated for the genes APOE2 (827 cases), GNB3 (375 cases), MTHFR (875 cases), SLC6A4 (3752 cases), and SLC6A3 (as little as 151 cases). Negative results were obtained for ACE, BDNF, COMT, DRD3, GABRA3, HTR1A, HTR1B, HTR2A, HTR2C, MAOA, SLC6A2, and TPH1. Further meta-analyses which have been published before this study were performed on ACE, DRD4, HTR2A, MTHFR, SLC6A4, and TH; positive findings were obtained for DRD4 (Lopez Leon et al. 2005; 917 cases). In the years following the meta-analysis by Lopez Leon, only few other meta-analytic studies have been published including those on MTHFR and TPH1 cited above. Furthermore, Franke and associates recently conducted a meta-analysis on the functional BDNF Val66Met polymorphism. As BDNF has been implicated both in the pathogenesis of depression as well as the mechanism of action of anti-depressant treatment (Duman and Monteggia 2006), it is an obvious candidate gene and accordingly was shown to be associated with depression in this meta-analysis of 2812 cases, although the association is sex-specific and only detectable in males (Verhagen et al. 2010).

The largest body of evidence, and by far the largest sample sizes, exists for the gene encoding the serotonin transporter (SLC6A4). Following the seminal finding by Caspi et al. (2003) that environmental influences interact with SLC6A4 genotype to increase the risk toward depression, emphasis has been put on studies aimed to test such GxE interactions adding a further level of complexity. Following positive meta-analyses confirming a main gene effect of SLC6A4 in depression (Furlong et al. 1998; Lopez-Leon et al. 2008; Clarke et al. 2010), also meta-analyses on GxE interaction studies yielded support for the notion that SLC6A4 has a role in the etiology of depression (Karg et al. 2011). As Karg and Sen elaborate in depth on this topic in this book, the reader is referred to their contribution as well as the review articles by Uher and McGuffin (2008, 2010).

Also, genes encoding components of the cortisol pathway have proven to be interesting candidates for GxE in MDD. The glucocorticoid receptor-regulating co-chaperone FKBP5 has first been associated with recurrence of depression and response to antidepressant treatment in 2004 (Binder et al. 2004). This has later been replicated (Lekman et al. 2008) and FKBP5 was shown to interact with HTR2A and GRIK4 in moderating the response to antidepressant treatment (Horstmann et al. 2010). Most interestingly, FKBP5 has been shown to interact with severity of childhood abuse on later-life PTSD symptoms (Binder et al. 2008) which however might be confined to African Americans (Xie et al. 2010). One of the involved SNPs (rs1360780) was later replicated to interact with childhood maltreatment to affect depression measures (BDI-II) in adult life (Appel et al. 2011). This SNP also displayed a main gene effect on suicidal events in depressive adolescents (Brent et al. 2010), a categorical diagnosis of depression (Lekman et al. 2008) and general depressive symptoms (Lavebratt et al. 2010; Zobel et al. 2010; Velders et al. 2011) and interestingly is associated with decreased cortisol levels (Velders et al. 2011) providing a possible pathophysiological mechanism for the association data. Also, rs1360780 went along with smaller right hippocampal volume in patients with depression (Zobel et al. 2010). Taken together, there is

good evidence (Binder 2009) that risk genotypes in FKBP5 (especially rs1360780) interact with early life adversity on later life depression, possibly by long-term adaptive changes of the HPA axis and subsequent morphological changes of the hippocampus increasing vulnerability to disease. In line with these findings, it was also shown that rs110402 in the corticotropin-releasing hormone receptor (CRHR1) interacted with child abuse to increase the risk toward later life depression (Bradley et al. 2008), most interestingly in interaction with the serotonin transporter risk genotype mentioned above (Ressler et al. 2010).

It seems to be a common phenomenon that candidate genes rarely replicate when tested for in GWAS (see below) data sets. A thorough study on MDD candidate genes (Bosker et al. 2011) tested 57 genes in the Genetic Association Information Network (GAIN) MDD sample ($n = 1862$ cases). From 93 selected candidate SNPs, only 18 were present on the array, and a further 47 were imputed. Of those, only five (including an SNP in NPY) were associated in the GAIN sample, all with $p > 0.03$. When candidates were tested on a gene-based level, analyzing 4870 SNPs, the TNF and NET genes yielded suggestive evidence. In general, heavy use of imputation might have introduced a further source of noise in this particular study. Likewise, when candidate genes were targeted in other individual GWAS, rarely more than expected by chance replicated.

Taken together, numerous association studies on MDD and BPD—actually too many to mention in this overview—hitherto only presented few convincing findings. Amongst them, associations of affective disorders with MTHFR, BDNF, and SLC6A4 seem to be robust. A length variant in the latter gene shows solid evidence for GxE effect; FKBP5 is another promising candidate for the moderating effects of early life stress regarding depression in adult life. Lessons that can be learned from the plethora of false-positive findings to date are that large and well-characterized samples have to be accrued, with careful evaluation of life events and the assessment of biological measures such as neuroimaging endophenotypes or therapy response.

1.2.3 Genome-Wide Association Studies

Along with autism, attention-deficit hyperactivity disorder (ADHD) and schizophrenia affective disorder comprise the core disorders of the Psychiatric GWAS Consortium (Sullivan 2010; Psychiatric GWAS Consortium [PGC] 2009), and at the time of writing, more than 12,000 cases of BPD and 14,000 cases of MDD are available within the PGC, with 20,000 more cases each expected to be included over the next 2 to 3 years. While these numbers may at first sound impressive, one has to consider that GWAS are the method of choice to pick common risk alleles conveying only small individual risk. Other complex-genetic traits might provide some clues for appropriate sample sizes: it took almost a quarter million people to detect and respectively confirm 32 risk variants for body mass index, explaining as little as 2–4% of genetic variance, and it was estimated that another 284 variants would carry comparable effect sizes and together would explain 6–11% of the

genetic variation. The authors assumed that further 730,000 individuals would have to be genotyped to uncover 95% of these variants (Speliotes et al. 2010). Likewise, a recent study on body height (Lango Allen et al. 2010) examined 180,000 subjects and found 180 loci explaining 16% of phenotypic variants. As body weight and height are for sure somewhat easier to determine than depression, which is a heterogeneous condition from the start, one can easily see the obstacles one has to face when dealing with these kinds of studies. Having said this, and thereby also lowering the bar of expectations somehow, the above-mentioned studies are also encouraging and can be seen as proof-of-principle: GWAS can detect novel pathways and provide meaningful results, and thus larger scale studies should be encouraged in order to identify the molecular determinants of affective disorders, as previous linkage and association studies fell short in conclusively delineating these. Concluding these introductory remarks, the recent debate on the missing—or, rather, hidden—heritability has to be mentioned. The discussion whether the major endogenous psychoses are due to the sum of multiple common alleles with small individual effects (e.g. Purcell et al. 2009) or due to many rare variants, also including copy number variants (CNV), and causing “synthetic associations” (Dickson et al. 2010) and resulting in phenocopies (Gershon et al. 2011) is held lively and far from being resolved. These authors’ personal view is that both models might exist—which however complicates matters even more.

BPD

GWA studies on BPD, which has a higher heritability and presumably less GxE effects as compared to depression, have (probably due to these facts) provided stronger findings than MDD GWAS. The following section elaborates on the most interesting findings from BPD GWAS at the time of writing (04/2011) with focus on replicated risk genes and pathways, while issues like population admixture, microarray technology, and statistical comments are not further commented upon.

In one of the first published GWAS on BPD, Baum et al. (2008a) reported genome-wide significance of rs10120253 in intron 1 of diacylglycerol kinase eta (DGKH) in a German and US American population using a pooling approach. The gene product of DGKH metabolizes diacylglycerol (DAG), which is produced upon cleavage of PIP2 into IP3 and DAG by phospholipase C. DAG, in turn, activates protein kinase C which phosphorylates a variety of proteins including Dishevelled, an inhibitor of GSK3 β (which itself has been considered an outstanding candidate gene for BPD due to several lines of molecular genetic evidence; Luykx et al. 2010). Furthermore, DGKH knockdown in HeLa cells impaired the MEK/ERK pathway, while overexpression activated the pathway (Yasuda et al. 2009). DGKH might therefore be involved in crucial pathways for psychiatric disorders and especially the mechanism of action of lithium. However, replication of DGKH failed in three studies on BPD and/or lithium response, respectively (Manchia et al. 2009; Tesli et al. 2009; Takata et al. 2011) while four other studies were ambiguous or positive (Baum et al. 2008b; Ollila et al. 2009; Squassina et al. 2009; Zeng et al. 2011). A recent study provided evidence for

an association of a DGKH risk haplotype with MDD, BPD, and adult ADHD (Weber et al. 2011). Meta-analyses on Caucasian (Weber et al. 2011) as well as Asian (Takata et al. 2011) samples however demonstrated that DGKH is significantly associated with BPD. Furthermore, increased expression of DGKH in BPD (Moya et al. 2010) was demonstrated in human post-mortem tissue, so that DGKH represents one of the most promising candidate genes for BPD to date. Other candidates from the Baum et al. GWAS include NXN, VGCNL1, DFNB31, and SORCS2, the latter two of which were replicated in a later study (Ollila et al. 2009).

The UK Wellcome Trust Case Control Consortium (WTCCC 2007) aims at the investigation of several complex genetic disorders with high prevalence. As evident from the first glance on the Manhattan plots in this paper, there are no “skyscraping” BPD risk SNPs as compared to very clear signals in cardiovascular or metabolic disorders. The WTCCC BPD GWAS provided genome-wide evidence for a non-gene marker next to PALB2, NDUFAB1, and DCTN5; other signals were observed for KCNC2, GABRB1, GRM7, and SYN3, all of which are in pathways previously implicated in BPD. Shortly after the WTCCC report, Sklar et al. reported on the STEP-UCL study and provided significant findings for MYO5B, TSPAN8, CDH7, and EGFR (Sklar et al. 2008). Some of those genes were attempted to replicate using a targeted approach; both TSPAN8 (Scholz et al. 2010) and CDH7 (Soronen et al. 2010) were confirmed in doing so. When the significant signals from the WTCCC and Baum data sets were tested in Sklar’s STEP-BD/UCL sample, negative findings were observed for DGKH and PALB2, however, this analysis provided further support for CACNA1C and DFNB31 arguing for the rationale to combine large data sets. Accordingly, the fourth GWAS study, ED-DUB-STEP2 (Ferreira et al. 2008), investigated another 1000 patients and included meta-analytic treatment of the WTCCC and STEP-UCL data sets (total $n = 4387$ cases). In doing so, the holy grail of genome-wide significance was reached for markers in two genes: CACNA1C (alpha-1 subunit of a voltage dependent calcium channel) and ANK3 (ankyrin 3). Other interesting candidate genes from this study include SYNE1, SPRED1, CMTM8 (which interacts with EGFR), NPAS3 (which has previously been suggested to be associated with schizophrenia and bipolar disorder; Pickard et al. 2009), and ARNT2. In a subsequent meta-analysis including two samples from Nordic countries, the breast cancer risk genes PALB2 and BRCA2 were followed up in these as well as the WTCCC and STEP-UCL/ED-DUB-STEP2 samples (total case $n = 5547$). In doing so, variants in both genes were shown to be associated with BPD (Tesli et al. 2010). Not surprisingly nevertheless, CACNA1C and ANK3 drew most attention in follow-up studies.

For both ANK3 and CACNA1C, it is noteworthy that replication attempts not only provided evidence that these genes are associated with BPD; rather, they were demonstrated to be associated with a broad range of disorders across diagnostic boundaries arguing for a more unspecific role of these genes in psychiatric disorders. For example, ANK3 was not only replicated in BPD (Lee et al. 2010; Schulze et al. 2009; Scott et al. 2009; Smith et al. 2009), but also associated with schizophrenia (Athanasou et al. 2010). Likewise, CACNA1C was again found to be

associated with BPD (Keers et al. 2009), but also with schizophrenia (Green et al. 2009; Moskvina et al. 2009; Nyegaard et al. 2010), MDD (Green et al. 2009), and psychopathological features (e.g., agitation) therein (Casamassima et al. 2010). Neuroimaging studies demonstrated an effect of the CACNA1C risk variant rs1006737 on brain structure (Franke et al. 2010; Kempton et al. 2009) as well as function (Erk et al. 2010; Krug et al. 2010; Wessa et al. 2010).

In the last 2 years, several other GWAS and meta-analyses on BPD have been published. A small study from Japan (Hattori et al. 2009), which applied a two-stage design, provided nominal although not corrected significance for markers within AUTS2 (previously implicated in autism), SNAP25 (which is a schizophrenia and ADHD candidate gene), PLXNA2 (which has been found in schizophrenia and anxiety GWAS) and CSMD1, which was already one of the candidates from the Baum et al. study (Baum et al. 2008a). No other top hits from previous BPD GWAS however were replicated. In Han Chinese patients suffering from BPD type I, Lee et al. (2010) likewise did not provide findings on the genome-wide level, yet interestingly also found suggestive association of BPD with SNPs in another voltage-dependent calcium channel subunit, CACNB2 (other highly significant SNPs were located in KCTD12, SP8, and ST8SIA2) pointing again to calcium signalling having a role in BPD. Targeted investigation of previously identified GWAS candidate genes yielded a $p = 10^{-5}$ for an SNP near ANK3, yet no other gene has been replicated.

Scott and colleagues combined two GWAS studies from the US, Canada, and UK (the NIMH/Pritzker and GSK GWAS) and analyzed them separately as well as in conjunction with the WTCCC study (Scott et al. 2009). In doing so, no genome-wide significant finding was observed; yet three regions with a p around 10^{-7} were reported encompassing the genes MCTP1 (which encodes a high-affinity calcium binding protein which is highly expressed in the brain), ITIH1 and GLN3. Furthermore, CTNNA2 was amongst the top hits which also gained support from other hypothesis-free approaches in psychiatric disorders such as ADHD (Lesch et al. 2008). Neither DGKH, ANK3 nor CACNA1C were confirmed in this GWAS, however the latter yielded convincing support upon a fixed-effects meta-analysis including the Ferreira and Schulze studies. In 2009, Kelsoe and associates reported on two GWAS examining US Americans of European and African ancestry (Smith et al. 2009), respectively, with a combined $n = 1346$ BPD cases. Again, no genome-wide significant findings emerged and interestingly, significant findings were discrepant for each subsample. One of the promising top hits in this study is NTRK2, as this gene which encodes a neurotrophin receptor has been implicated in mood disorders previously. When previous GWAS risk genes were tested for, ANK3 yielded further support, while CACNA1C was negative. It should be noted that this sample overlaps with the one tested by Baum et al.; generally, the sample overlap between different studies will become the rule rather than the exception due to the need for international cooperation and large sample sizes. Furthermore, a small GWAS from Norway ($n = 194$), which however was followed up in a larger Icelandic sample (Djurovic et al. 2010), provided suggestive evidence for several interesting candidate genes (e.g. GUCY1B2, SHANK, and CNTNAP5), none of which however was amongst the top hits in

previous studies. The largest study to date has employed a two-stage design using a discovery cohort of 682 BPD patients and carried over the top 48 SNPs to replication samples; SNPs surviving this procedure were subjected to a meta-analysis with previous BPD GWAS data sets (Cichon et al. 2011). The total case number investigated in this study was thus $n = 8441$ BPD patients. In doing so, the neurocan (NCAN) gene was identified as a susceptibility factor for BPD with the best SNP yielding a $p = 2.1 \times 10^{-9}$, i.e. genome-wide significance.

In conclusion, GWAS on BPD and subsequent meta-analysis provided evidence that BPD shares risk variants with schizophrenia, MDD, and ADHD; furthermore, calcium and GABA signalling pathways were repeatedly found to be associated with disease, along with genes modifying neuronal plasticity. At the time of writing, CACNA1C, ANK3, and DGKH can be considered the risk genes with the most compelling body of evidence. Accordingly, those are scrutinized more thoroughly and first functional studies already provided evidence for changes in brain function in risk allele carriers.

MDD

While the prevalence of MDD is five to tenfold higher as compared to BPD, its heritability is lower and presumably heterogeneity is even higher. These issues complicate GWAS on this phenotype, probably explaining the lack of genome-wide findings despite the fact that studies on MDD and schizophrenia feature the largest of all disorders analyzed in the PGC.

The NIH sponsored Genetic Association Information Network (GAIN) studies also featured major depression and these studies were amongst the first published GWAS on MDD (Sullivan et al. 2009). Discovery sample patients came from two Dutch longitudinal studies (NESDA and NTR, combined $n > 1700$). The top 25 SNPs featured four SNPs in the PCLO gene, which encodes for a subunit of the presynaptic vesicle fusion complex, although none of them met the criteria for genome-wide significance. Considerable overlap was noted for the mood disorder candidate genes CACNA1C, ANK3, GRM7, and DGKH. While PCLO did not clearly replicate in the Sullivan et al. study, a later reanalysis questioned this initial notion and argued for an association of a non-synonymous coding SNP with MDD in the very same replication cohorts (Bochdanovits et al. 2009). Furthermore, a later population-based study demonstrated an association of PCLO rs2522833 with depressive disorders (Hek et al. 2010), which also held true when a meta-analysis of all published data was conducted especially when only population-based studies were considered ($p = 1.9 \times 10^{-9}$). Most interestingly, in a hypothesis-free approach, PCLO was demonstrated to be differentially expressed and associated with BPD again questioning the diagnostic specificity of GWAS candidate genes (Choi et al. 2011). However, meta-analysis of an MDD and a BPD GWAS did not support a role of PCLO in BPD (Liu et al. 2011).

In a medium-sized GWAS from Germany (Rietschel et al. 2010), there was a suggestive finding for HOMER1 which replicated in an independent sample. In this study, the authors also conducted a genomic imaging study and demonstrated decreased dorsolateral prefrontal cortex activation in the n -back task as well as

decreased anterior cingulate cortex activation upon anticipation of a monetary reward in risk allele carriers. Especially the latter might be related to anhedonic behavior, one of the key features of depression. Most interestingly, also *CACNA1B* was amongst the highest ranked genes, again implicating calcium signalling in affective disorders. A larger ($n = 1636$ cases) UK-based GWAS argued for the *BICC1* gene in MDD (almost needless to say, genome-wide significance was missed); however, it was not replicated in samples from Munich and Lausanne. When all three studies were treated by meta-analysis, the schizophrenia/autism candidate gene *NLGN1* was amongst the most promising findings with a $p_{\text{combined}} = 8.5 \times 10^{-6}$ (Lewis et al. 2010). When the STAR*D study was analyzed for the phenotype MDD ($n = 1,221$; Shyn et al. 2011), no genome-wide significant findings also emerged. Promising or previously implicated candidate genes—however, all at a $p > 10^{-5}$ —included *ANKRD46*, *CTNND2*, and *CSMD3*. Another recent GWAS focused on recurrent early onset MDD, as defined by an onset before the age of 31 (GenRED, $n = 1020$; Shi et al. 2011). Nested candidate gene analysis yielded the lowest p value in *CACNA1C*; as is common for all mood disorder GWAS, there were no findings meeting the genome-wide significance threshold, but several highly suggestive findings with the top hit in a brain-expressed transcript of unknown function. Other interesting candidates include *GDNF*, *SP4*, *STIM1*, *KCNQ1*, *VAMP4*, and *CSMD1*. Most noteworthy, the *SP4* signal (which almost entirely came from female subjects) became stronger when the GenRED sample was treated meta-analytically with the STAR*D and GAIN studies (total $n_{\text{cases}} = 3,957$; Shyn et al. 2011). This meta-analysis yielded better, although still only suggestive significance levels and also argued for an association of the *GRM7* gene. While *SP4* encodes a transcription factor orchestrating gene networks implicated in affective disorders (and most notably, as mentioned above, the *SP8* transcription factor has been found in a BPD GWAS), *GRM7* which encodes a glutamate receptor was not only of suggestive significance in the WTCCC BPD GWAS, but also amongst the top hits of another MDD GWAS (Muglia et al. 2010). This study was performed in two European samples from Southern Bavaria and Lausanne (total $n > 1,500$), yet also did not result in genome-wide significant findings or meaningful overlap of top SNPs between both samples. The authors computed a meta-analysis of both samples as well, along with the implementation of gene-wide tests. This interesting method yielded several genes which also survived a correction procedure, the genes with the lowest p -values being *SMG7* and *NFKB1*. Candidate genes from previous studies however did not replicate in this analysis, apart from the glutamate receptor gene *GRM7*. A similar approach (i.e., discovery GWAS followed by meta-analysis and gene-based tests) was taken by the largest MDD GWAS to date, the MDD2000 + study (Wray et al. 2012). Here, a total of >2400 cases were examined and a meta-analysis was conducted by including the GAIN sample and the UK-based study reported by Lewis et al. (total $n > 5700$ cases). Suggestive findings ($p < 10^{-5}$) include *NOS1AP*, *ADCY3*, and the schizophrenia/autism risk gene *CNTNAP2* (the latter in males only). The adenylate cyclase *ADCY3* gene was ranked second in the gene-based test, and also the gene encoding galanin (which was previously shown to be associated with antidepressant treatment response and disease severity in MDD and anxiety disorders; Unschuld et al. 2010)

was amongst the top ten hits in this analysis. From the pre-selected candidate genes, IL10, OPRM1 (being a candidate stemming from the GAIN MDD GWAS), HTT, HTR1B, GRIN1, and the apparently pleiotropic risk gene CACNA1C were associated with disease. Meta-analysis did not yield significant findings and in particular did not support PCLO as a risk gene for MDD.

Trait depression, as assessed with the NEO-PI personality questionnaire (where “depression” is a subscale of the Neuroticism domain) was assessed in two GWAS in the general population from Sardinia and the US (combined $n = 4811$; Terracciano et al. 2010). The top hit, at a $p = 6 \times 10^{-7}$, was an intronic SNP in the RORA gene. Two other noteworthy high-ranking candidates include the glutamate receptor gene GRM8, which hitherto has mainly been associated with cognitive phenotypes, and CDH13, which has been identified in an ADHD linkage scan meta-analysis (Zhou et al. 2008) as well as GWAS on ADHD (Lesch et al. 2008) and substance use disorders.

Cross-Disorder Analyses

In order to yield larger samples, several meta-analyses have been conducted. The largest meta-analysis combined the WTCCC, STEP-BD, NIMH-BD, and the German BPD sample, as well as the GAIN-MDD GWAS on MDD. The total number of cases exceeded 6600, compared against >9000 controls (McMahon et al. 2010). An inherent problem with this kind of study is the use of different genotyping platforms, diagnostic heterogeneity, as well as ethnic heterogeneity; to minimize these limitations, only subjects of European descent have been analyzed. In doing so, six SNPs which were located in the PBRM1 gene met the criteria for genome-wide significance. The best SNP was also significant in the replication sample, yielding a final $p = 1.7 \times 10^{-9}$. When the ED-DUB-STEP2 GWAS was analyzed together with an MDD GWAS (Liu et al. 2011), CACNA1C SNPs passed the hurdle of genome-wide significance while ANK3 was not supported in the meta-analysis, probably suggesting that this gene is more specific to BPD. SYNE1 was one of the candidates where the significance level actually increased upon meta-analysis, and which interestingly also turned up in the primary PGC BPD GWAS meta-analysis. Not surprisingly, also schizophrenia and BPD were treated meta-analytically (Wang et al. 2010). In this study, meta-analysis provided evidence for the genes ASTN2 and CNTNAP2, both of which have been implicated in ADHD, as well as the GABA receptors GABRR1 and GABRR2. When the three large US American GWAS on psychiatric disorders and treatment efficacy—namely, STEP-BD (BPD), CATIE (schizophrenia), and STAR*D (MDD) were analyzed jointly (yielding a total $n_{\text{cases}} > 3000$; (Huang et al. 2010), one locus met the criteria for being genome-wide significant (near the ADM gene, and apparently being specific for bipolar II disorder). A total of 24 more SNPs reached the defined Omnibus GWAS Test Threshold; however, more than half of them were imputed. Promising candidates are again CTNND2, SP8, ODZ4, and NPAS3.

An alternative rationale is to search for risk variants influencing phenotypic features of mood disorders. Suitable phenotypes include, for example, therapy

response (see below) or suicidal ideation. Accordingly, the STEP-BP, WTCCC, UCL, and STAR*D studies were evaluated with respect to the latter (Perlis et al. 2010). None of the 11 loci which were identified in the discovery cohorts however replicated. Also, candidate genes which were selected according to previous data (such as HTR1A or TPH2) did not yield convincing evidence. Meta-analysis of all samples argued for an involvement of SORBS1 and PRKCE, a gene with some a priori biological evidence. Analysis of STAR*D alone, where 90 out of 1953 patients developed treatment-emergent suicidal ideation (Laje et al. 2009), revealed a highly significant association of an SNP in PAPLN and suggestive association of an IL28RA SNP. Additive effects with previous risk alleles for treatment-associated suicidal ideation in the GRIK2 and GRIA3 genes were observed. However, paucity of psychometric data on the suicidal patients along with the very limited sample size bears the high chance of a type-I error. Similar analyses in GENDEP (total $n = 706$, thereof $n = 244$ with treatment-associated suicidal ideation under treatment with either escitalopram or nortriptyline; Perroud et al. 2010) provided some evidence for the genes GDA, KCNIP4, and ELP3 to be associated with escitalopram-associated suicidal ideation. Nested candidate-driven approaches did not yield significant results. A major concern regarding these studies is whether or not treatment-associated suicidal ideation is genetic at all and whether these studies are homogeneous—the striking differences in the percentage of suicidal ideation casts some doubts on this assumption.

Analysis of the complete PGC data set, comprising 12,000 BPD cases and 52,000 controls, yielded 21 SNPs with a corrected $p < 0.05$, the best candidate genes being CACNA1C, ODZ4, and two regions of chromosome 11 and 12. As also suggested from earlier cross-disorder analyses demonstrating a significant overlap of common risk variants for BPD and schizophrenia (including also CACNA1C, as well as another voltage-dependent calcium channel and a member of the diacylglycerol kinase family [DGKI]; Moskvina et al. 2009), the latest cross-disorder analysis of the PGC yielded strong evidence for an association of CACNA1C with endogenous psychoses as evidenced by $p = 8.45 \times 10^{-9}$ when BPD and schizophrenia samples were combined. In these analyses, it became also evident that BPD risk genes were highly predictive for schizophrenia, and vice versa. On the other hand, BPD neither predicted MDD nor did MDD predict BPD or schizophrenia. When all three disorders were pooled together (total $n_{\text{cases}} > 25,000$), six genes met the criteria for genome-wide significance: ITIH3, the HLA/HIST cluster on chromosome 6p21-p22, CACNA1C, TCF4, NT5C2/CNNM2, and IFI44/ELTD1. In MDD alone, the situation is much more frustrating: when combining more than 11,000 cases from the GAIN, GenRED, GSK, mdd2000, MPIP, RADIANT, STAR*D, and NGFN Germany studies, only two SNPs (in the genes NVL and GPHN, which is a highly interesting candidate) came near the level of genome-wide significance. Lower heritability in conjunction with increased heterogeneity might explain the scarcity of solid findings in MDD as compared to BPD.

1.2.4 Copy Number Variations

Currently, there is increasing interest about the role of deletions/duplications of large chunks of the genome (copy number variations, CNVs) in psychiatric disorders. Especially large (>100 kb) and rare CNV harboring many different genes seem to occur more often in schizophrenia, mental retardation, and autism—although there is no diagnostic specificity and some CNVs might underlie any of these three conditions. In any case, these CNVs are rare and can only account for a small percentage of cases, again arguing for a “common disease, multiple rare variant” model. In bipolar disorder, there are only two studies to date which yielded conflicting findings. While the first study (Zhang et al. 2009a; 1001 patients) demonstrated an excess of large (>100 kb) and rare CNVs in BPD, Grozeva et al. (2010) did not find an increased rate of large and rare CNVs in almost 1700 patients suffering from BPD. Hence, even larger samples are needed to unequivocally evaluate the contribution of CNVs in BPD, although from the present data it seems to be clear that at least large and rare CNVs can only account for a very small fraction of BPD cases, if at all.

1.3 Pharmacogenetics

In the treatment of depression, antidepressive pharmacotherapeutic agents have proven to be highly effective for a large proportion of patients. However, two major problems have to be faced: (1) treatment resistance: 30–40% of all patients fail to respond sufficiently to the initial treatment (Fava and Davidson 1996) and (2) treatment intolerance: There is a considerable rate of “treatment emergent adverse effects” associated with antidepressive pharmacotherapy such as hypotension, weight gain, anticholinergic effects, antidepressant-induced mania, or sleep disturbance, which leads to discontinuation of treatment in about 10% of the cases (MacGillivray et al. 2003).

Among multiple reasons underlying non-response to antidepressive pharmacotherapy or differential development of treatment emergent adverse effects under antidepressants, it has been suggested that psychotropic drug response may be heritable with first-degree relative pairs being significantly concordant for antidepressant treatment response (Pare et al. 1971; O’Reilly et al. 1994; Franchini et al. 1998). Pharmacogenetic studies allowing for the detailed dissection of the genetically influenced heterogeneity of psychotropic drug response have revealed several risk genes on a pharmacokinetic as well as on a pharmacodynamic level to drive antidepressant treatment response. On a pharmacokinetic level, variation in the CYP2D6 gene resulting either in poor metabolizers (PM; 7% of the Caucasian population) or in rapid (RM) or even ultrarapid metabolizers (UM; 3% of the Caucasian population) has been reported to be associated with response to tricyclic antidepressants and SSRIs, particularly paroxetine (cf. Kirchheiner et al. 2004). On a pharmacodynamic level, association of response to antidepressants has been

observed with variation in candidate genes of depression, especially those involved in the serotonergic system (e.g. SLC6A4, HTR1A, HTR2A, MAOA, TPH1 (for a review see Kato and Serretti 2010; Serretti et al. 2005)). Additionally, there is first evidence for differential genetic effects on treatment response specifically in melancholic depression (Baune et al. 2008), depression with comorbid anxiety (Domschke et al. 2008a, 2010) or in gender subgroups (Domschke et al. 2008c). The identification of genetic risk factors for antidepressant treatment response as known to date tremendously helps in better understanding the mechanism of action of antidepressants. These rapidly growing molecular genetic findings might nourish further biochemical, physiological, or pharmacological studies and eventually lead to a personalized medicine with an individually tailored antidepressive pharmacotherapy according to genotype reducing the patients' suffering and lowering healthcare costs at the same time.

Most of the MDD GWAS were embedded in efficacy studies; thus not surprisingly, treatment response GWAS were reported frequently. It should be noted that treatment response of course encompasses a plethora of diverse factors ranging from adherence to medication to exogenous pharmacokinetic influences, adding further noise to already noisy genetic data. The first report was on the German MARS trial and also included an independent German sample as well as the STAR*D study (Ising et al. 2009). Obviously, not only diagnostic but also treatment heterogeneity has to be taken into account in the interpretation. The best signal, which however was not significant on the genome-wide level, came from an SNP in the 5' region of CDH17; when the 338 best SNPs from the German samples were tested in the STAR*D sample, 46 were associated at the nominal level of significance. Amongst them, interestingly, was HOMER1 (see above). When the level 1 participants of STAR*D, which received citalopram, were analyzed separately (743 remitters versus 608 non-remitters; Garriock and Hamilton 2009a, b), as little as three SNPs were associated with response on the $p < 1 \times 10^{-5}$ level. The most interesting finding from this study probably is ARNTL, which is also a member of the PAS superfamily and related to NPAS3. In 2010, the GWAS data of the multicentre European GENDEP study was published ($n = 811$ cases, treated with either nortriptyline or escitalopram; Uher et al. 2010). Analysis of the complete sample did not provide meaningful signals, while analysis of either compound alone pointed to the IL11, UST, and RGL1 genes. Genotype by drug interaction analyses interestingly implicated a region 11 kb downstream of NOL4, which was also one of the four top regions in the STAR*D study. As both studies were published in parallel, this was not mentioned in either paper, yet can be considered a true independent replication.

As compared to MDD, pharmacogenomics studies in BPD are sparser. As treatment response to lithium, the gold standard drug treatment in BPD, is familial, lithium treatment response studies seem to be most worthwhile; as only ca. 40% of all BPD patients can be considered clear lithium responders, and as treatment might go along with considerable side effects in the case of non-response, data on genetic prediction of lithium response would directly translate into the clinical routine. Several case-control association studies comparing responders to

non-responders have suggested a variety of risk genes such as the SLC6A4 (seven studies, mixed findings) and other hypothesis-driven targets mainly of neurotransmitter pathways, intracellular signal transduction pathways involved in the mechanism of action of lithium, and circadian clock genes. GSK3B and CREB1 are amongst the candidates with the best empirical support and also good face validity and hence should be further tested, as evidence is far from being solid. Samples were often rather small and again, most genes lack replication. Scholarly overviews on published association studies can be obtained from McCarthy et al. (2010) and Smith et al. (2010). Although not specifically designed for this question, the STEP-BD trial tested for lithium response as well by means of a GWA study, which was replicated in a second, independent sample ($n = 458$, and $n = 359$ bipolar I or II patients, respectively). Not surprisingly, there were no genome-wide significant findings, however five SNPs associated in the STEP-BD cohort replicated in the second sample including a polymorphism within the GRIA2 gene (Perlis et al. 2009). To specifically search for lithium response genes, the ConLiGen consortium (Schulze et al. 2010) has gathered more than 1200 lithium treated BPD patients whose treatment response has been evaluated using the Alda scale. Genome-wide genotyping has been accomplished and initial data are expected for the second half of 2011.

2 Anxiety Disorders

2.1 Clinical Genetics

Panic disorder has been found to be highly familial with an up to three to fivefold increased prevalence of the disorder in first-degree relatives of patients with panic disorder (Horwath et al. 1995; Maier et al. 1993; Hettema et al. 2001). In relatives of the subgroup of patients with panic disorder and suffocation anxiety, an even higher familiarity has been discerned (Horwath et al. 1997). Furthermore, familiarity of panic disorder seems to depend on the age of onset in the index patient with an onset before the age of 20 years predicting a 17-fold increased risk of panic disorder in first-degree relatives (Goldstein et al. 1997). Also for generalized anxiety disorder and specific phobias a significant familial aggregation was reported (Hettema et al. 2001; Marks and Herst 1970).

Twin studies have identified up to 2–3 times higher concordance rates for panic disorder in monozygotic as compared to dizygotic twins (Skre et al. 1993), with an even higher concordance rate for the subgroup of patients with carbon dioxide-sensitive panic disorder (Bellodi et al. 1998). According to a comprehensive meta-analysis, the contribution of genetic factors has been calculated to be as high as up to 48%, with the remaining 52% being attributable to individual environmental factors. Generalized anxiety disorder has been estimated to have a heritability of about 32%, while the common heritability of phobias was reported to be about

30%, with highest estimates for agoraphobia (67%), blood-injection-phobia (59%), and social phobia (51%). The heritability of posttraumatic stress disorder was reported to be about 20–30% (Kendler et al. 1999; Hettema et al. 2001; Segman and Shalev 2003). Finally, several studies point towards overlapping genetic risk factors for panic disorder and agoraphobia or other phobias, respectively (Kendler et al. 1995; Mosing et al. 2009; Tsuang et al. 2004). In panic disorder and other anxiety disorders, segregation analyses failed to identify a mode of inheritance according to Mendelian patterns, which points to a complex genetic inheritance with an interaction of multiple “vulnerability” or “risk genes”, each with only a minor individual influence (“oligo- or polygenic model”), and environmental influences (Vieland et al. 1996).

2.2 Molecular Genetics

2.2.1 Linkage Studies

In panic disorder, linkage studies have yielded a variety of potential risk loci on chromosomes 1p, 4q, 7p, 9q, 11p, 15q, und 20p (Crowe et al. 1987, 2001; Knowles et al. 1998; Gelernter et al. 2001; Hamilton et al. 2003; Thorgeirsson et al. 2003; Fyer et al. 2006; Kaabi et al. 2006). In subgroups of patients with panic disorder with comorbid bipolar disorder or kidney/bladder dysfunction, respectively, risk loci on chromosomes 2, 12, 13, and 18 or 13 and 22, respectively, have been described (MacKinnon et al. 1998; Logue et al. 2009; Weissman et al. 2000; Hamilton et al. 2003). In social or specific phobia, linkage studies have excluded a major influence of HTR2A and SLC6A4 loci, with however, some evidence for potential risk loci on chromosomes 16q and 14p (Stein et al. 1998; Gelernter et al. 2003, 2004).

2.2.2 Association Studies

In panic disorder, a variety of association studies has been published so far. Most studies have investigated variation in classical candidate genes for panic disorder as suggested by animal models (e.g. knock-out mice), challenge experiments (e.g. cholecystokinin [CCK] challenge, caffeine challenge), or pharmacological observations (e.g. clinical efficacy of selective serotonin reuptake inhibitors (SSRIs), monoamine oxidase (MAO) inhibitors). Most significant evidence has been yielded for association of variants in the CCKBR (Kennedy et al. 1999; Hösing et al. 2004), MAOA, particularly in female patients (Deckert et al. 1999; Samochowiec et al. 2004; Maron et al. 2005b), COMT (again restricted to female patients, Hamilton et al. 2002; Domschke et al. 2004; Woo et al. 2002; Woo et al. 2004; Domschke et al. 2007; Zintzaras and Sakelaridis 2007), HTR1A (Rothe et al. 2004; Huang et al. 2004) and ADORA2A (Deckert et al. 1998; Hamilton et al.

2004a; Hohoff et al. 2010). Furthermore, there is some evidence for several other potential risk variants to be involved in the pathogenesis of panic disorder such as polymorphisms in HTR2A (Inada et al. 2003; Rothe et al. 2004; Maron et al. 2005a; Unschuld et al. 2007; Yoon et al. 2008), SLC6A4 (Ohara et al. 1998; Maron et al. 2005a, b; Strug et al. 2010; but: Deckert et al. 1997; Hamilton et al. 1999; Blaya et al. 2007), TPH2 (Maron et al. 2007; Kim et al. 2009; but: Mössner et al. 2006), NET (Lee et al. 2005; but: Sand et al. 2002a), CCK (Wang et al. 1998; Hattori et al. 2001), ACE (Olsson et al. 2004; Erhardt et al. 2008; Bandelow et al. 2010; but: Shimizu et al. 2004), the transcription factor CREM (Domschke et al. 2003; Hamilton et al. 2004b), ‘regulator of G-protein signaling’ (RGS2, RGS7) (Leygraf et al. 2006, Smoller et al. 2008b; Hohoff et al. 2009b) and several hormone receptors (Sand et al. 2002b; Ho et al. 2004; Keck et al. 2008; Hodges et al. 2009). However, since most of these studies either did not withstand replication in independent samples or still warrant replication, these results have to be considered preliminary. The role of the GABA-ergic system in panic disorder remains to be further elucidated on a molecular genetic level with only little evidence so far for the glutamate decarboxylase (GAD) or GABA receptors and transporters, respectively (Crowe et al. 1997; Sand et al. 2000; Hettema et al. 2006; Nakamura et al. 2006; Kobayashi et al. 2007; Thoeringer et al. 2007, 2009; Unschuld et al. 2009). Recently, besides the classic neurotransmitter systems much attention has been paid to the role of neuropeptides in the mediation of anxiety. Significant association of anxiety or panic disorder in particular have been reported for variants in genes for galanin (Unschuld et al. 2008), the neuropeptide Y (NPY) system (Domschke et al. 2008b) and the neuropeptide S receptor (NPSR) (Domschke et al. 2011). Finally, there is preliminary support for possible interactive effects of several genetics variants in the mediation of the genetic risk for panic disorder, e.g. for HTR1A and COMT (Freitag et al. 2006). For social phobia and generalized anxiety disorder, association has been reported with variation in the dopamine transporter (SLC6A3) gene (Rowe et al. 1998), while DRD2 variants seem to play a role in the pathogenesis of posttraumatic stress disorder (Segman and Shalev 2003). Further associations were observed for COMT in specific phobias (McGrath et al. 2004), for HTR2A in social phobia (Lochner et al. 2007) and MAOA in generalized anxiety disorder (Tadic et al. 2003).

In summary, consistent with findings from clinical genetic and linkage studies, molecular genetic association studies point to a complex genetic etiology of anxiety disorders with an additive or rather interactive effect of multiple risk variants.

2.2.3 Genome-Wide Association Studies

The first genome-wide association study in panic disorder in a Japanese sample yielded evidence for several markers in genes, which have not been implicated in the pathogenesis of anxiety before (PKP1, PLEKHG1, TMEM16B, CALCOCO1, SDK2, and CLU) (Otowa et al. 2009). However, these findings could not be

replicated in a follow-up GWAS by the same group (Otowa et al. 2010). Another genome-wide association study in three German samples points to a potential role of the TMEM132D gene in the pathogenesis of panic disorder (Erhardt et al. 2011). Currently, another large GWAS on a homogenous sample from Germany is under analysis (Reif et al., in preparation).

2.3 Genetics of Intermediate Phenotypes of Anxiety Disorders

Dimensional markers such as neuroticism, anxiety sensitivity, state or trait anxiety or behavioral inhibition have been proposed as valid intermediate phenotypes of anxiety disorders with aggregation in families and elevated concordance rates in monozygotic twins pointing to a significant heritability (e.g. Rosenbaum et al. 1991; Maier et al. 1992; Stein et al. 1999). Linkage studies have discerned risk loci on chromosomes 8, 18, 20, and 21 for harm avoidance (e.g. Cloninger et al. 1998), and association studies have reported a potential role of genetic variation of e.g. SLC6A4 for harm avoidance and neuroticism (Lesch et al. 1996) and the corticotropin releasing hormone (CRH) for behavioral inhibition (Smoller et al. 2003, 2005), respectively.

Besides neuropsychological markers, more recently, neurobiological traits have been investigated as intermediate phenotypes of anxiety disorders. Here, significant association was observed, for e.g. increased sympathetic activity and ADORA2A as well as COMT gene variation (Hohoff et al. 2009a; Kang et al. 2010), blushing propensity in social phobia with SLC6A4 variation (Domschke et al. 2009), an increased startle response with COMT and SLC6A4 variants (e.g. Montag et al. 2008; Brocke et al. 2006), as well as CO₂-sensitivity to panic attacks with again SLC6A4 variation (Schmidt et al. 2000; Schruers et al. 2011).

Another very promising intermediate phenotype of mental disorders in general and affective and anxiety disorders in particular are neuronal activation correlates of emotional processing as captured by functional imaging techniques such as magnetic resonance imaging (fMRI). In panic disorder, first imaging genetics findings may indicate a distorted corticolimbic interaction depending on variants of the COMT and HTR1A (Domschke et al. 2006, 2008d). In patients with social phobia, polymorphisms in SLC6A4 and TPH were found to be associated with increased amygdala excitability (Furmark et al. 2004, 2008, 2009). Finally, markers spanning RGS2 were reported to be associated with childhood behavioral inhibition and with increased limbic activation during emotion processing (Smoller et al. 2008b). In summary, these first imaging genetics findings in panic disorder, social phobia, and anxiety-related traits may indicate that—depending on variants of COMT, SLC6A4, HTR1A, and RGS2—patients with anxiety disorders are prone to impaired cerebral processing of anxiety-related stimuli in cortical regions known to play a crucial role in the evaluation of emotional stimuli and determination of salient events (for a review see Domschke and Dannlowski 2010).

2.4 Gene-Environment Interaction

In contrast to a multitude of gene-environment studies (GxE) available in depression (see 1.2.2., e.g. SLC6A4 and FKBP5), with respect to anxiety disorders as a categorical nosological entity or anxiety-related traits, to the best of our knowledge only few GxE studies have been performed yet (for a review see Klauke et al. 2010). No associations were found between 5-HTTLPR, childhood emotional abuse, and neuroticism (Antypa and Van der Does 2010). An exemplary GxE study with respect to anxiety-related traits has been published by Stein et al. (2008), who observed a significant interaction between levels of childhood maltreatment and the less active 5-HTTLPR S allele on anxiety sensitivity as measured by the anxiety sensitivity index (ASI). 5-HTTLPR S and L_G haplotypes were furthermore reported to be associated with increased anxiety in interaction with daily stressors (Gunthert et al. 2007). Conversely, assessing 5-HTTLPR genotype and environmental adversity at birth (family adversity) and at 19 years of age (stressful life events), Laucht et al. (2009) found an interactive effect of more active 5-HTTLPR LL genotype and high family adversity on anxiety disorders. Other studies have identified association of the ADORA2A with increased anxiety after caffeine administration in healthy volunteers, demonstrating that a panic disorder risk gene might drive the sensitivity to an environmental stimulus and, therefore, the vulnerability to anxiety (Alsene et al. 2003; Childs et al. 2008).

2.5 Pharmacogenetics

In anxiety disorders, so far only three exemplary studies have investigated the impact of genetic variants on response to a pharmacological treatment regime. Two groups reported significant association of 5-HTTLPR with response to SSRI treatment in panic disorder as well as in generalized anxiety disorder (Perna et al. 2005; Stein et al. 2006). Furthermore, SSRI treatment in panic disorder might in part be driven by variation in HTR1A (Yevtushenko et al. 2010).

3 Overlapping Phenotypes

Depression and anxiety are highly comorbid with up to 60% of patients with depression also displaying anxiety (Leckman et al. 1983) and about 58% of those patients actually meeting DSM criteria for anxiety disorders (see review by Lydiard 1991; e.g. de Graaf et al. 2002; Kessler et al. 1996; Zimmerman et al. 2002). Comorbidity of affective and anxiety disorders has a significant impact on the course and treatment of the respective leading disease with a more chronic course and a significantly detrimental effect on treatment response (e.g. Clayton

et al. 1991; Liebowitz 1993; Lydiard 1991). Patterns of occurrence allow for both affective and anxiety disorders preceding the respective other disease.

Besides either simultaneous or sequential true comorbidity of anxiety disorders and major depression there is a continuous debate about a possible overlapping phenotype between anxiety disorders and depression. The clinical phenotype of “anxious depression” (Overall et al. 1966; Overall and Zisook 1980) capturing major depression with subthreshold anxious features has been suggested to constitute a diagnostic entity of its own requiring specific diagnostic and therapeutic attention (see Levine et al. 2001; Lydiard and Brawman-Mintzer 1998; Silverstone and von Studnitz 2003). Dual action drugs acting as reuptake inhibitors on both transporters (serotonin and norepinephrine reuptake inhibitors, SNRI) have been suggested to be superior to SSRI only or tricyclic antidepressants TCA in the treatment of anxious depression (Rudolph et al. 1998; Silverstone and Ravindran 1999). While three large meta-analyses discerned similar response rates to antidepressant treatment in highly anxious and less anxious patients with major depression (Levine et al. 2001; Nelson et al. 2009; Papakostas et al. 2008; see Nelson 2008), there is accumulating evidence for anxious features of depression potentially complicating the course of antidepressant treatment (e.g. Altamura et al. 2004; Domschke et al. 2010; Fava et al. 2008; Joffe et al. 1993; see review by Bagby et al. 2002).

Apart from the individual genetic risk for affective and anxiety disorders, both disease entities also exhibit a common familial risk (as reviewed by Middeldorp et al. 2005). There is evidence from twin studies that depression and general anxiety disorder, panic disorder, and post-traumatic stress disorder share a considerable proportion of their genetic risk (Kendler et al. 1992, 2007; Kendler 1996; Roy et al. 1995). Consistently, molecular genetic studies have yielded evidence for specific genetic loci that may generally influence susceptibility across the anxiety-depression spectrum, e.g. on chromosome 18q (cf. Camp et al. 2005; Hettema 2008). In particular, the combined clinical phenotype of anxious depression has been suggested to constitute a specific subtype with an increased familial risk of depression (Clayton et al. 1990, 1991), which points to a possibly increased heritability of anxious depression with a specific set of genetic risk factors mediating the vulnerability for the development of anxious depression. First imaging and pharmacogenetic studies in anxious depression have implied CNR1, NPY, and SLC6A4 to confer parts of antidepressant treatment response particularly in the clinical phenotype of anxious depression, potentially via a dysfunctional cortico-lymbic interaction underlying distorted emotional processing (e.g. Baffa et al. 2010; Domschke et al. 2008a; 2010).

These molecular and imaging genetic findings of overlapping genetic variants as well as common brain networks of emotional processing partly driving both clinical phenotypes of anxiety and affective disorders point to similar neurobiological mechanisms underlying these disorders and therefore possibly a common clinical sub-phenotype shared by anxiety and affective disorders. Particularly, the clinical phenotype of “anxious depression” might thus possibly constitute a diagnostic entity of its own requiring specific diagnostic and therapeutic attention

(cf. Lydiard and Brawman-Mintzer 1998; Silverstone and von Studnitz 2003). So, back from bench to bedside, genetic and imaging studies might inspire a re-evaluation and refinement of DSM-IV categorized nosological concepts of depression and anxiety. Alternatively, the current and still emerging body of knowledge in the field of neurobiological research in anxiety and depression might have even more far-reaching consequences in the future by challenging the DSM concept in itself in favor of a more neurobiologically oriented taxonomy of mental disorders. As suggested by Smoller et al. (2008a), genetic and imaging research revealing etiological mechanisms of mental disorders might infer a novel nosological concept based on pathogenesis more than phenomenology. To date, however, despite first essential steps having been made, neurobiological knowledge about the pathomechanism of depression and anxiety has still not progressed far enough to provide a reliable and valid fundament for diagnostic decisions in daily clinical practice. So, in summary the presently known vulnerability genes and patterns of affective and anxiety disorders are slowly beginning to challenge the DSM-defined nosological boundaries and might have the potential to evolve into a valuable tool to more precisely delineate the diagnostic system of mental disorders in the future.

4 Outlook

Future research with respect to the genetic dissection of affective and anxiety disorders will have to comprise technical as well as clinical aspects. On a molecular genetic level, more comprehensive analyses such as tagging SNP approaches, haplotype analyses, as well as the investigation of epistasis of several genes constituting relevant biochemical pathways or cascades are warranted. Here, novel genomic techniques such as duplication/deletion analysis using genotyping arrays and next-generation sequencing of the whole exome or genome for point mutation identification might have a large impact on risk gene identification. Furthermore, it will be of utmost importance to analyze the functional consequences of the associated genetic variants and thereby gain more knowledge about the pathomechanism of the disease of interest. Additionally, there is a need for more detailed gene-environment interaction studies potentially also in a genome-wide fashion (cf. Poulton et al. 2008; Thomas 2010) in order to disentangle the interactive effect of genetic and environmental factors conferring risk or resilience, respectively, to affective and anxiety disorders. In this respect, epigenetic studies investigating e.g. DNA methylation or histone modifications regulating gene activity will tremendously contribute to the elucidation of the interplay between environmental and genetic factors in the pathogenesis of affective and anxiety disorders (cf. for bipolar disorder and schizophrenia: Abdolmaleky et al. 2006, 2008).

Besides the more technical aspects as detailed above, future research in the genetics of affective and anxiety disorders will greatly benefit from clinical

considerations. Given that—apart from very few results—most linkage and association findings either did not withstand replication in independent samples or still warrant replication and given that genome-wide association studies in affective as well as in anxiety disorders so far fell short of expectations regarding replicating previous candidate genes or generating novel hypotheses, one possible reason might be the great neuropsychological and neurobiological heterogeneity of the investigated phenotypes of categorical nosological entities as defined by DSM- or ICD-criteria. Thus, besides the recruitment of even larger sample sizes, a more precise definition of the clinical phenotype will be key. In the latter respect, the approach of investigating intermediate phenotypes of affective and anxiety disorders will have to be intensified with the search for novel depression- and/or anxiety-related neurophysiological, biochemical, endocrinological, neuroanatomical, cognitive, or neuropsychological endophenotypes (cf. for major depression: Hasler et al. 2004) and their analysis with respect to their genetic basis.

In summary, to date there is some support for several risk genes contributing to the development of affective and anxiety disorders or their intermediate phenotypes and some light has been shed on gene-environment interactions contributing to the disease risk. However, so far the identified genetic risk factors are of no diagnostic or predictive value, which will only change if the entirety of all genetic risk factors interdependent with environmental factors is identified, which is not foreseeable in the near future. Nevertheless, the increasing elucidation of genetic risk factors tremendously helps in better understanding the pathophysiology of affective and anxiety disorders and might nourish the development of innovative pharmacotherapeutic substances in the treatment of these diseases (e.g. Domschke and Zwanzger 2008), preferably in an individually tailored manner according to genotype.

Acknowledgments This paper was supported by the DFG (Grant RE1632/1-1,/1-3 and/5 to AR, KFO 125 TP4 to AR, DE357/4-1 to AR, SFB TRR 58 C2 and Z2 to AR and KD, respectively; RTG 1252, to AR) and the BMBF (Panik-Net Subproject 6, to AR). We thank A. Alttoa for valuable discussions and her kind help in the preparation of the manuscript.

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Behavioural Genetics of the Serotonin Transporter

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Abstract The serotonin transporter is a key regulator of the bioavailability of serotonin and therefore any modulation in the expression or action of the transporter would be expected to have consequences on behaviour. The transporter has therefore become a target for pharmaceutical intervention in behavioural and mood disorders. The search for polymorphic variants in the transporter that would associate with neurological disorders has been extensive but has become focused on two domains which are both termed variable number tandem repeat (VNTR) polymorphisms. Both of these VNTRs are in non-coding DNA and therefore proposed to be mechanistically involved in a disorder through their ability to modulate transcriptional or post-transcriptional regulation of the transporter. The most extensively studied is in the promoter and is a bi-allelic insertion/deletion found in the 5' promoter region of the gene 1.2 kb upstream of the transcriptional start site. This VNTR, termed, 5-HTTLPR was initially identified as two variants containing either, 14 (short/deletion) or 16 (long/insertion) copies of a 22 bp repeat. A second widely studied VNTR found in the non-coding region of the transporter is located within intron 2 and comprises 9, 10 or 12 copies of a 16–17 bp repeat termed, STin2.9, STin2.10 and STin2.12, respectively. These VNTR polymorphisms have been associated with a range of behavioural and psychiatric disorders including depression, OCD, anxiety and schizophrenia,

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however often the lack of reproducibility in different cohorts has led to debate on the actual association of the polymorphisms with this extensive range of neurological conditions. Here we review these two polymorphic VNTRs in depth and relate that to pharmaceutical response, their ability to regulate differential transporter expression, their core involvement in gene-environment interaction and their genetic association with specific disorders.

Keywords Mood disorders • Genetic polymorphism • Serotonin • Serotonin transporter • Variable number tandem repeat • Gene regulation • Monoaminergic signaling

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1 Introduction

The monoaminergic signaling system is a key component in maintaining physiological control over many aspects of human health including emotional behaviour and psychological states. One of the major players in this system is the neuromodulator, serotonin (5-HT). Disturbances in the 5-HT system have been implicated in the pathophysiology of many CNS-related disorders such as anxiety (Lesch et al. 2003), depression (Ressler and Nemeroff 2000), Obsessive Compulsive Disorder (OCD) (Bengel et al. 1999), aggression and antisocial behaviour (Lesch and Merschedorf 2000), addiction (Kreek et al. 2005a, b) and suicide (Arango et al. 2002). The level of neuromodulatory 5-HT present in the synaptic cleft and available for action at cell surface serotonin receptors is

dependent on reuptake by the serotonin transporter (5-HTT) that belongs to the Na^+/Cl^- dependant solute-carrier family of transporters and is encoded for by the SLC6A4 gene. In the CNS, 5-HT and 5-HTT are mostly localised on the perisynaptic membrane of neurons of the raphe nuclei whose processes innervate many areas of the brain thought to be involved in cognition and behaviour regulation (McLaughlin et al. 1996). Since this transporter regulates the spatiotemporal fine-tuning of 5-HT signalling and is paramount in the processes controlling many aspects of mood and behaviour, it is naturally a major target for several antidepressants, drugs of abuse and potent neurotoxins and is a major focus in the investigation of several affective disorders.

Genetic variability between individuals comes in many guises including single nucleotide polymorphisms (SNPs), which may be coding or non-coding, and micro- or mini-satellites. Micro-satellites such as simple tandem repeats exist as di, tri or tetra nucleotide repeats, whilst mini-satellites consist of 10–100 nucleotides repeated several times in tandem bordered by unique DNA sequences. Mini-satellites are more stable than micro-satellites and are believed to be present in the genome due to unequal crossover (non-allelic homologous recombination) or unequal sister chromatid exchange. Mini-satellites frequently exist as a multi-allelic polymorphism due to variation in the number of the tandem repeat units (reviewed in Haddley et al. 2008). Here we will focus on a subclass of mini-satellite known as a variable number tandem repeat (VNTR). VNTRs show some degree of degeneration where one repeat may be slightly different from the next but overall the core consensus sequence is maintained (Jeffreys et al. 1985; Naslund et al. 2005). The majority of VNTRs are found in non-coding regions of the genome and many are found at higher density in gene enriched areas compared to non-genic regions. VNTRs have the potential to act as transcriptional regulatory domains as they have a number of sequence specific DNA motifs within the repeat that can act as transcription factor binding sites. They may display evolutionary conservation between humans and non-human primates but are often not found in lower mammals (Lesch et al. 1997; Soeby et al. 2005). The SLC6A4 gene locus presents a number of polymorphisms within non-coding regions and it has been shown that the allelic variation in these VNTRs can function in a tissue-specific and stimulus-inducible manner, *in vitro* and *in vivo*, to fine-tune gene expression (Lesch et al. 1996; Heils et al. 1996; MacKenzie and Quinn 1999; Hariri et al. 2002; Hranilovic et al. 2004; Roberts et al. 2007). This fine tuning may be correlated, mechanistically, not only with normal physiological function and variation between individuals, but also with a predisposition to behavioural disorders by altering neurotransmitter signaling in response to challenges and stress. Furthermore, if stimulus-inducible expression varies with a specific disorder-associated polymorphism then that may have similar implications in the response of an individual to therapeutics (Fiskerstrand et al. 1999; Lovejoy et al. 2003; Klenova et al. 2004; Roberts et al. 2007). In addition, VNTRs can participate in regulation of gene expression at other levels. For example, it has been suggested that VNTRs located in untranslated (UTR) regions may play an important role in mRNA stability, which can also affect levels of transcript available in the cellular

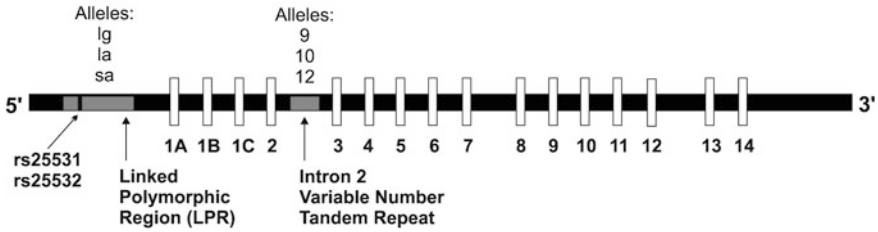


Fig. 1 Schematic representation of the 5-HTTLPR, STin2VNTR and rs25531/2 SNP in the SLC6A4 gene

environment (Nakamura et al. 1998; Zamorano et al. 2006). Further, VNTRs located in exons are known to affect protein folding and have been associated with differential levels of mature RNA availability in the cytoplasm (Nakamura et al. 1998). More recently the role of VNTRs in the epigenetic regulation of response to challenges has been investigated (Olsson et al. 2010; Kinnally et al. 2010; Ali et al. 2010b; Vasiliou et al. 2011; Van Ijzendoorn et al. 2010). We have previously reviewed clinical correlation and function with VNTR genotype in the SLC6A4 gene including the linked polymorphic region (5-HTTLPR) found in the promoter region of the gene and the STin2 VNTR found in intron 2, also sometimes referred to as intron 3, Fig. 1 (Haddley et al. 2008). Here we include more recent findings and create a picture of how these correlations stand to date.

2 Investigating Polymorphic Variation

Beside genome wide association studies, which link a specific polymorphism to a particular disorder, there are a number of applications both *in vitro* and *in vivo*, by which the putative molecular function of a polymorphism can be assessed. *In vitro* techniques that can be applied to investigate gene expression under basal conditions and in response to challenge e.g., drugs (cocaine, citalopram) or transcription factors (CTCF) include: (1) Production of polymorphism-reporter gene constructs to examine the ability of a polymorphism to alter gene expression in clonal or primary cell lines (Klenova et al. 2004; Guindalini et al. 2006; Roberts et al. 2007; Ali et al. 2010a, b; Vasiliou et al. 2011); (2) Quantitative or real-time PCR in lymphoblast cell lines of known genotype to determine relative quantities of gene expression as a function of a specific genotype (Hranilovic et al. 2004); (3) Allelic expression imbalance (AEI) that can determine the relative abundance of transcript derived in an allele-specific manner (Lim et al. 2006; Martin et al. 2007). *In vivo* techniques that can be applied to examine allele-specific changes include: (1) Chromatin immunoprecipitation (ChIP) in a cell line to examine transcription factor-DNA binding and associated changes in histone modifications over a specific polymorphism (Vasiliou et al. 2011). This can also be performed genome-wide using Geneseq arrays; (2) The generation of “humanised” transgenic mice, in

Fig. 2 a Sequence of the 5-HTTLPR. The deletion in the short variant is represented in *grey*.

b Sequence of the STin2VNTR. * Denotes repeats absent from both the nine and ten copy variants and ** denotes a repeat missing in the nine copy variant

(a) Linked Polymorphic Region	(b) Intron 2 Variable Number Tandem Repeat
ccctactgcagccctccagcatccc	ggctgtgaccagggtg
ccctgcaacctccagcaact	ggctgtgaccggagtg
ccctgtaccctcctagatcgc	ggctgtcaccgggggtg
tcctgcatccccattatcccc	ggctgtgacctgggtg
ccctcaccctcggcgcaccc	ggctgtgacctgggtg **
ccctgcaacccccagcatccc	ggctgtgacctgggtg *
ccctgcagccccccagcatc	ggctgtgacctgggtg
ccctgcacccccagcatccc	ggctgtgacctgggtg
ccctgcagccctccagcatcc	ggctgtgacctgggtg *
ccctgcacctctccagatctc	ggctgtgacctgggtg *
ccctgcaacccccattatccc	ggctgtgacctgggtg
ccctgcacccctcgcagatccc	ggctgtgacctgggtg
ccctgcacccccagcatccc	
ccatgcacccccggcatccc	
ccctgcacccctccagcattct	
ccctgcacccctaccagtat	

which a VNTR driving marker gene expression for example, β -galactosidase, may be transiently expressed to identify tissues in which the VNTR may be active in response to certain challenges or at particular developmental stages (Mackenzie and Quinn 1999); (3) Formaldehyde assisted identification of regulatory elements (FAIRE) that identifies genome-wide open regions of chromatin allowing assessment of changes in chromatin structure over polymorphic regions in response to challenge (Esquivel et al. 2011); (4) DNA methylation that identifies regions which are not accessible to regulation by transcription factors; (5) Nuclear imaging including single-photon emission computed tomography (SPECT) and positron emission tomography (PET) that allow resolution of events at a molecular level (for example transporter/receptor binding potentials and density) and functional magnetic resonance imaging (fMRI) that allows analysis of a whole system activity and connectivity approach between brain regions (see Sect. 6).

Used in combination these techniques provide a powerful armoury for delineating the functional mechanism of action of polymorphisms with the observed clinical associations for such polymorphisms.

3 Serotonin Transporter: Variable Number Tandem Repeats and Clinical Association Studies. The Linked Polymorphic Region (5-HTT LPR)

The 5-HTT LPR is a biallelic insertion/deletion found in the 5' promoter region of SLC6A4 approximately 1.4 kb upstream of the transcription start site (Heils et al. 1995, 1996). Initially the LPR was identified as an allelic variant comprising 14 (short) or 16 (long) copies of a 22–23 bp repeat, Fig. 2a. More recently, Nakamura et al. verified the existence of subgroups within these variants to uncover as many

as 14 allelic variations of this locus. Most studies focus on the more common biallelic 14 (s) and 16 (l) alleles of the LPR, however, since the discovery of a functional SNP (rs25531) within the long variant of the LPR (an A to G substitution) this is now referred to as the triallelic LPR variant. Inclusion of this SNP (lg) has conferred clinical properties normally associated with the s-allele onto the l-allele (Nakamura et al. 2000; Hu et al. 2005; Kraft et al. 2005; Wendland et al. 2006). However, no significant variation was observed between la and lg variants in a study employing the use of AEI (Martin et al. 2007). The distribution of these genotypes varies, with individuals Hm for the s-allele appearing at lower or similar frequencies to those Hm for the l-allele in the Caucasian population (Heils et al. 1995, 1996). However, allelic frequencies vary among different ethnic groups. The frequency of the alleles for the Caucasian population has been shown to be 27.4–28.3% (l/l), 43.4–51.0% (s/l) and 21.6–28.3% (s/s), whilst that of Asian population has been shown to be 4.2–10.0% (l/l), 30.0–39.2% (s/l) and 55.6–60.0% (s/s) (Smits et al. 2004).

We have previously discussed the clinical and functional associations of this variant with a number of affective disorders and behaviour traits (Table 1) and levels of gene expression *in vitro* and *in vivo* (Table 2) (extensively reviewed in Haddley et al. 2008). In general the l-allele of 5-HTTLPR has been associated with increased levels of reporter gene activity, mRNA abundance and transporter binding. We will now extrapolate on these associations using more recent data and meta-analyses.

Early and promising associations were made between 5-HTT polymorphisms and a number of affective disorders with the Hm s-allele believed to be predisposing to affective disorders. However, these initial findings were not always consistent and even the result of meta-analysis found some of these association to be lacking in power. More recent investigations have sought to clarify the specifics of these associations including more detailed parameters such as age, population, environment and co-morbidities, as well as the mechanisms by which these variants may mediate their effect. Recent meta-analysis found a significant association of the Hm s-allele genotype with an increased risk of major depressive disorder (MDD) in Caucasians but not in Asians (Kiyohara and Yoshimasu 2010). In agreement with the latter, when studied in a Thai population no association could be made between 5-HTTLPR genotype and MDD (Tencomnao and Wongpiyabovorn 2010). A recent investigation in a Northern Swedish population could not find any association of the 5-HTTLPR with bipolar depression (Alaerts et al. 2009).

Overall the picture remains unclear on the exact role of the LPR polymorphism risk associations particularly in Asian populations, where the s-allele is present at a higher frequency than the l-allele, but taking into account other factors, especially gene \times environment (G \times E) interactions and treatment response, may go some way to clarifying current understanding.

Homozygosity for the s-allele has conferred threefold higher odds of a patient suffering from post-stroke depression (PSD) compared to those with one or more l-allele (Kohen et al. 2008). Similarly, in a Chinese population, homozygosity for the s-allele has been associated with a higher incidence of PSD (Fang et al. 2011). The mechanism(s) by which these alleles may confer susceptibility to mood

Table 1 A sample of previously reported clinical associations for the 5-HTT LPR polymorphism

Author	Disorder	Cohort/ethnicity	Predisposing genotype
<i>5-HTTLPR genotype positively associated with affective disorder</i>			
Cervilla et al. (2006)	Depression	European (Spanish)	s/s
Zalsman et al. (2006)	Depression	Caucasian (European)	s/s
Collier et al. (1996a)	Unipolar depression	European	s/s
Hauser et al. (2003)	Unipolar depression	European	s/s
Collier et al. (1996a)	Bipolar depression	European	s/s
Cho et al. (2005) ^a	Bipolar depression	Mixed	s/s
Lotrich and Pollock (2004) ^a	Bipolar depression	–	s/s
Lasky-Su et al. (2005) ^a	Bipolar depression	Mixed	s/s
Hauser et al. (2003)	Bipolar depression	European	s/s
Lotrich and Pollock (2004) ^a	Major depressive disorder	–	s/s
Lesch et al. (1996)	Anxiety	Caucasian (German)	s/s
Mazzanti et al. (1998)	Anxiety	European (Finnish)	s/s
Katsuragi et al. (1999)	Anxiety	Japanese	s/s
Du et al. (2000)	Anxiety	Caucasian (predominantly)	s/s
Melke et al. (2001)	Anxiety	Caucasian	s/s
Feinn et al. (2005) ^a	Substance abuse (alcohol)	Mixed	s
Caspi et al. (2003)	Suicide	Caucasian (non-Maori)	s/s
Bengel et al. (1999)	OCD	Caucasian	l/l
Malhotra et al. (1998)	Psychosis/hallucinations	Mixed (N.American)	l/l
Dubertret et al. (2005)	Schizophrenia	Mixed	l
<i>5-HTTLPR genotype not positively associated with affective disorder</i>			
Lasky-Su et al. (2005) ^a	Unipolar depression	Mixed	
Mendlewicz et al. (2004)	Unipolar depression	European	
Mansour et al. (2005)	Bipolar depression	Caucasian (N.America)	
Meira-Lima et al. (2005)	Bipolar depression	Brazilian	
Mendlewicz et al. (2004)	Bipolar depression	European	
Ospina-Duque et al. (2000)	Bipolar depression	Columbian	
Arango et al. (2003)	Major depressive disorder	–	
Frisch et al. (1999)	Major depressive disorder	European (Jewish)	
Middelorp et al. (2007)	Anxiety	European (Dutch)	
Deary et al. (1999)	Anxiety	British	
Mendlewicz et al. (2004)	Suicide	European	
Arango et al. (2003)	Suicide	–	
Geijer et al. (2000)	Suicide	Caucasian (European)	
Serretti et al. (2002)	Major Psychosis	European	
Dickel et al. (2007)	OCD	Mixed	

(continued)

Table 1 (continued)

Author	Disorder	Cohort/ethnicity	Predisposing genotype
Rao et al. (1998)	Schizophrenia	Caucasian (N. American)	
Rao et al. (1998)	Schizophrenia	African-American	
Rao et al. (1998)	Schizophrenia	Caucasian (Swedish)	

Where cohort states European or British, ethnicity was either mixed or not stated

^a meta-analysis

disorders is unknown, however, Gillihan et al. (2010) suggested that individuals with an s-allele display greater amygdala activity during intentional mood regulation and suggested that hyperactivity of the amygdala during mood recovery may be a potential mechanism by which the s-allele could increase the risk of depression. In addition, the chronicity of depression has been associated with homozygosity for the l-allele in a Korean population who showed a higher rate of chronicity, but not recurrent tendency, compared to those with at least one s-allele (Myung et al. 2010).

The observation that genotype can affect amygdala response would imply a role for the polymorphism in mood and anxiety disorders and higher anxiety scores have been shown to be significantly associated with s-allele or l-allele homozygosity in a Turkish population concomitant with improved academic performance (Calapoglu et al. 2011). Interestingly, it has also been demonstrated that these anxiety-related associations can have an influence as early on as foetal developmental. Maternal anxiety during pregnancy and negative emotionality in early infancy was significant in infants carrying one or more copies of the s-allele (Pluess et al. 2011). Allelic variation at the LPR has also been shown to influence mother-offspring bonding; mothers with an s- or l-allele showed higher sensitivity and greater attachment during mother-infant interactions (Mileva-Seitz et al. 2011).

The importance of tighter definition of sub-group classification can be seen in two recent studies investigating genotype interactions and OCD, for example, meta-analysis suggests that the l-allele may be associated with childhood-onset OCD and OCD in Caucasians (Bloch et al. 2008). A further study found little effect of the triallelic LPR in OCD in a mostly male population and the authors suggest that further replication in a larger cohort with an equal number of female subjects might be more predictive of risk associations with OCD (Tibrewal et al. 2010).

The s-allele of the 5-HTTLPR has also shown considerable associations in relation to alcohol dependence (McHugh et al. 2010; Wang et al. 2011), consumption in adolescents (Van der Zwaluw et al. 2010) and relapse in recovering alcoholics (Pinto et al. 2008). Furthermore, the risk association of the LPR with substance abuse has been demonstrated to display age-dependant bias: prior to the age of 15 individuals Hm for the s-allele did not show any difference to those with an l-allele, however, post 15 years of age they showed higher tobacco use and in early adulthood they were more active alcohol, drug and tobacco users (Merenakk et al. 2011).

A recent multi-centre study paired with meta-analysis failed to detect any association with the 5-HTTLPR polymorphism and attention deficit hyperactivity

Table 2 A sample of previously reported functional effects for the 5-HTT LPR polymorphism

Author	Model	Experimental detail	Gene expression bias
Heils et al. (1996)	Placental choriocarcinoma cell line (JAR)	VNTR within the promoter (reporter)	l > s
Lesch et al. (1996)	Lymphoblast cell lines	VNTR with the promoter (reporter)	l > s
Sakai et al. (2002)	Immortalised serotonergic raphe neurons (RN46A)	Isolated VNTR (reporter)	l = s
	Cos-7 cell lines		
	PC12 cell lines		
Mortensen et al. (1999a, b)	Placental choriocarcinoma cell line (JAR)	1.8 kb fragment upstream to the cap site including VNTR and a novel internal 379 bp fragment (reporter)	l = s
Mortensen et al. (1999a, b)	Immortalised serotonergic raphe neurons (RN46A)	1.8 kb fragment upstream to the cap site including VNTR and a novel internal 379 bp fragment (reporter)	l > s
Lesch et al. (1996)	Lymphoblast cell lines	mRNA quantification	l/l > l/s or s/s
Hranilovic et al. (2000)		mRNA quantification	l/l > l/s or s/s
Bradley et al. (2005)		mRNA quantification	l/l > l/s or s/s
Lim et al. (2006)	Human pons tissue post mortem	mRNA quantification	l = s
Lesch et al. (1996)	Lymphoblast cell lines	5-HT binding	l/l > l/s or s/s
Lesch et al. (1996)	Lymphoblast cell lines	5-HT uptake rate	l/l > l/s or s/s
Greenberg et al. (1999)	Blood platelets from healthy controls	5-HT uptake rate	l/l > l/s or s/s
Hanna et al. (1998)	Blood platelets OCD patients	5-HT uptake rate	l/l > l/s or s/s
Nobile et al. (1999)	Blood platelets from depressed patients	5-HT uptake rate	l/l > l/s or s/s

disorder (ADHD) in a Norwegian sample (Landaas et al. 2010). Other studies have also shown a lack of association in schizophrenia, neurocognition or core psychotic symptoms (Konneker et al. 2010), migraine in Europeans and Asians (Schurks et al. 2010a) and bulimia nervosa (Lee and Lin 2010). Recent associations have been made between the presence of an s-allele and insomnia (Deuschle et al. 2010) and anorexia nervosa (Lee and Lin 2010).

4 The Serotonin Transporter Intron 2 VNTR (STin2 VNTR)

The STin2VNTR comprises 9, 10 or 12 copies of a 16-17 bp repeat giving rise to six possible genotypes 9/9, 10/10, 12/12, 9/10, 9/12 and 10/12 based on copy number alone without the added complexity of SNPs within each VNTR domain, Fig. 2B (Lesch et al. 1994). We have previously discussed the clinical and functional associations of this variant with a number of affective disorders and behaviour traits (Table 3) and levels of gene expression in vitro and in vivo (Table 4) (extensively reviewed in Haddley et al. 2008).

Clinical associations with the STin2VNTR have been less prevalent than those of the 5-HTTLPR over the last 5 years. In contrast to the 5-HTTLPR polymorphism, a significant effect of the STin2VNTR genotype on susceptibility to MDD was seen with the 10-allele in a Chinese Han population (Pan et al. 2009). In addition, individuals with the 9/12 or 12/12 genotype displayed a fourfold higher incidence of PSD compared with those Hm for the 10-allele (Kohen et al. 2008). Furthermore, chronicity and recurrent tendency of depression were not associated with STin2VNTR (Myung et al. 2010). Meta-analysis in a migraine population of European descent found a protective effect in the absence of the 12-allele (Schurks et al. 2010b).

Individually the serotonin polymorphisms have various effects across affective disorders and populations and more often than not results are conflicting or no associations can be made. However, when taken in combination with other polymorphisms both intra- and intergenic or when considering haplotypes, distinct associations have been made, for example, in a recent migraine study the STin2VNTR genotype had no significant effect, however when taken as a haplotype in conjunction with a serotonin receptor SNP, which also showed no solo association, a positive correlation was seen with the two polymorphisms having a synergistic influence on susceptibility to migraine (Joshi et al. 2010). Many haplotype associations for affective disorders are now being considered investigating not only interactions between the serotonin transporter LPR and VNTR but also other SNPs within the SLC6A4 gene locus and between other genes such as the dopamine receptor 4 (DRD4), serotonin precursor genes, and brain derived neurotrophic factor gene (BDNF). Such haplotype associations are seen with other gene synergies in which individual polymorphisms have no association with a particular condition whereas when addressed together they do demonstrate significant association (Bellivier et al. 1998; Wendland et al. 2007; Miyajima et al. 2008; Hiio et al. 2011).

Table 3 A sample of previously reported clinical associations for the STin2VNTR polymorphism

Author	Disorder	Cohort/ethnicity	Predisposing genotype
<i>StIN2 genotype positively associated with an affective disorder</i>			
Ogilvie et al. (1996)	Major depression	British	9
Battersby et al. (1996)	Uni/bipolar depression	British	9
Evans et al. (1997)	Anxiety	British	9
Ogilvie et al. (1998)	Migraine with aura	British	9/9
Hranilovic et al. (2003)	Suicide	Croatian/southern Slavic	10/10
Jernej et al. (2004)	Suicide	Croatian/southern Slavic	10/10
Gutierrez et al. (1998b)	Major depression with melancholia	Caucasians (Spanish)	10
Collier et al. (1996b)	Bipolar depression	Caucasian (English, European and other)	12
Kirov et al. (1999)	Bipolar depression	Caucasian (British)	12
Ohara et al. (1999)	Anxiety + OCD	Asian	12
Baca-Garcia et al. (2007)	OCD	Caucasians (Spanish)	12
Liu et al. (1999)	Schizophrenia	–	12
Hranilovic et al. (2000)	Schizophrenia	Croatian/southern Slavic	12
Kaiser et al. (2001)	Schizophrenia	Caucasian (German)	12
Ogilvie et al. (1998)	Migraine without aura	British	12/12
<i>StIN2 genotype not associated with an affective disorder</i>			
Furlong et al. (1998) ^a	Unipolar depression	Caucasian (English and European)	
Collier et al. (1996b) ^a	Unipolar depression	Caucasian (English, European and other)	
Furlong et al. (1998) ^a	Bipolar depression	Caucasian (English and European)	
Stober et al. (1996)	Uni/Bipolar depression	Caucasian (German)	
Bellivier et al. (1998)	Bipolar depression	Caucasian (French)	
Kunugi et al. (1996) ^a	Uni/Bipolar depression	Japanese	
Lasky-Su et al. (2005) ^a	Uni/Bipolar depression	Mixed	
Lotrich and Pollock (2004) ^a	Bipolar and major depression	–	
Gutierrez et al. (1998a)	Bipolar depression	Caucasians (Spanish)	
Hoehe et al. (1998)	Bipolar and major depression	Western European	
Rees et al. (1997)	Bipolar and major depression	Caucasian (British)	
Anguelova et al. (2003) ^a	Suicide	–	
(Collier et al. 1996b)	Schizophrenia	Caucasian (English, European and other)	

Where cohort states European or British, ethnicity was either mixed or not stated

^a Meta-analysis

Table 4 A sample of previously reported functional effects for the S_Tin2VNTR polymorphism

Author	Model	Experimental detail	Gene expression bias
Fiskerstrand et al. (1999)	Embryonic stem cells	VNTR in isolation cloned into a reporter vector showed responses following differentiation	12 > 10
Lovejoy et al. (2003)	Murine embryonic stem cells	Trimeric oligonucleotides composed of individual repeat elements cloned into reporter vector showed varied responses following differentiation.	
Lovejoy et al. (2003)	JAR human clonal cell line	VNTR in isolation	9 > 12 > 10
Ktenova et al. (2004)	Monkey Cos 7 clonal cells Human HEK293 clonal cells	Differential expression and regulation by transcription factors CTCF and YB1	12 > 10 > 9 > 10 >
MacKenzie and Quinn (1999)	Transient transgenic mice	Differential expression driven by the human S _T in2VNTR 10 or 12 variant supporting LacZ expression	
Hranilovic et al. (2003)	Lymphoblasts	Allelic expression imbalance/semi-quantitative real time PCR	12/12 > 10
Roberts et al. (2007)	Stably transfected human JAR clonal cell line, Human HEK293T clonal cells	Differential binding of CTCF and YB-1 transcription factors to the allelic variants in response to lithium chloride	
Kaiser et al. (2002)	Human blood platelets	The maximum rate of 5-HT uptake by platelets was unaffected although the affinity of uptake varied as a function of genotype	12/12 < 9/10

5 Pharmacogenetics of the 5-HTT Polymorphisms and Selective Serotonin Reuptake Inhibitor (SSRI) Response

There is vast variability in the response of patients to antidepressant treatment which is believed to be in part due to heritable characteristics. This would suggest that polymorphisms that may affect the expression of “mood-related genes” may also account for variation in treatment response. A number of studies have investigated such variability in treatment response as a function of genotype particularly in relation to 5-HT specific reuptake inhibitors (SSRIs) e.g., citalopram, escitalopram, paroxetine and fluoxetine. The SSRIs selectively block the 5-HTT maintaining the concentration of 5-HT in the synaptic cleft. There are a myriad of published papers that analyse the effect of the 5-HTT polymorphisms on antidepressant response and tolerance in patients with affective disorders and in particular MDD (extensively reviewed in Keers and Aitchison 2011 and Porcelli et al. 2011). Initially in MDD patients a better response to SSRIs was associated with those individuals with an l-allele in the 5-HTTLPR (Serretti et al. 2007) however, a recent meta-analysis of 5408 participants found no correlation between 5-HTTLPR genotype and drug response (Taylor et al. 2010). In the recent STAR*D analysis an association was found between adverse events to citalopram and the triallelic lg-allele (Hu et al. 2007). Other studies have also pointed to 5-HTT triallelic variant affecting not only tolerance to antidepressants but also interaction with other polymorphisms such as the STin2VNTR (Kraft et al. 2005; Smeraldi et al. 2006). It has also been reported that genotype and response associations may be dependent on (1) the minor allele frequencies between populations because a significant association between genotype (l-allele) and treatment response was seen only in non-Hispanic Caucasians (Mrazek et al. 2009), (2) gender differences (Keers and Aitchison 2010) and (3) environment (stress) (Keers et al. 2011).

Fewer studies have assessed the effect of the STin2VNTR genotype however having a 10/12 genotype has been associated with a poor response and tolerance (Kim et al. 2000; Peters et al. 2004; Mrazek et al. 2009; Min et al. 2009) although these observations were not replicated in other studies (Ito et al. 2002; Ham et al. 2005; Smits et al. 2007). Finally, the recent review by Keers and Aitchison, highlights the difficulties in coming to a standard agreement on the effect of polymorphisms due to the heterogeneity between studies but also the probability that an amalgamation of small genotypic effects could be responsible for variation in response and that gene x environment interactions must also be considered in these analyses (Keers and Aitchison 2010).

6 Gene × Environment (G × E) Interaction Role in the SLC6A4 Polymorphism

Personality traits are suggested to be generated by a complex interaction of environmental and genetic factors. Various studies suggest that the effect of the SLC6A4 polymorphisms might only be unmasked following specific environmental cues, for

example SLC6A4 Knockout (KO) mice displayed more fearful behaviour compared to wild-type (WT) only in response to stress (Murphy et al. 2001; Wellman et al. 2007). The potential interaction between the 5-HTTLPR and early experiences was demonstrated in non-human primates; rhesus macaques with an s-variant analogous to that of human s-allele, displayed decreased serotonergic function but only in animals reared under stressful conditions (Bennett et al. 2002). Furthermore, peer-reared females with the s-variant were more vulnerable to alcoholism and showed more aggressive behaviour whereas those reared by their mothers were not differentiated by genotype (Champoux et al. 2002; Barr et al. 2003, 2004). Furthermore, in agreement with a seminal study by Caspi et al. demonstrating a greater risk of depression and suicide in those individuals Hm for the s-allele dependant on the number of past stressful life events and childhood maltreatment, it has been found that individuals in a Spanish population Hm for the s-allele acquired a higher risk of depression after considerably fewer stressful life episodes (Caspi et al. 2003; Cervilla et al. 2007). Moreover, in an adult twin study, individuals Hm for the s-allele displayed increased sensitivity of depressogenic effects of stressful-life events than those with one copy of the l-allele (Kendler et al. 2005).

Recently, a potential role for the 5-HTTLPR polymorphisms has been investigated in post-traumatic stress disorder (PTSD) as a function of a gene \times environment interaction. Having one or more copies of the s-allele predisposed individuals who had suffered both childhood adversity and adult traumatic events to develop lifetime PTSD (Xie et al. 2009). A similar effect has also been seen in patients with a copy of the la-allele with more than 60% of carriers developing PTSD following three or more stressful life events (Grabe et al. 2009). At first, these results would seem conflicting, however, other environmental factors may need to be considered, for example the s-allele has been associated with decreased risk of PTSD in low-risk environments (low crime/unemployment rates) but increased risk of PTSD in high-risk environments (Koenen et al. 2009).

These studies emphasise the significant impact of the environment and early experiences on genetic polymorphisms and suggest that with a particular genotype an individual may be more vulnerable to environmental stress and have higher tendency to develop psychiatric disorders, depending on their genotype. The interaction between SLC6A4 polymorphisms and stressful life events is striking and one that has stood up to scrutiny particularly in longitudinal studies (reviewed in Uher and McGuffin 2008).

7 Haplotype Analysis of the SLC6A4 Polymorphisms, Gene \times Gene (G \times G) and Gene \times Gene \times Environment (G \times G \times E) Interactions

Greater associations have been made between genotype and phenotype now that focus has begun to shift towards investigating polymorphisms in gene-gene interactions or as haplotypes rather than as standalone entities. According to the

international HapMap project the SLC6A4 gene exists as two haplotype blocks. A recent study in a Chinese Han population found that when assessed alone no association could be made between the STin2VNTR and schizophrenia, however, significant association was found when the locus was studied as a haplotype in conjunction with a number of tagging SNPs, identifying two haplotypes with positive association (Lin et al. 2009). Similar results were also found in a North European population, in that schizophrenia was associated with a haplotype block but not with single loci (Zaboli et al. 2008). Furthermore, haplotype analysis has revealed that having the l-allele and the STin2VNTR 10-allele predisposes Russian females, but not males to suicide (Gaysina et al. 2006). In a Turkish population predisposition towards suicidal behaviour was not observed for either the 5-HTTLPR or STin2VNTR polymorphisms, however when combined it was found that those with an s/10 or l/12 genotype were predisposed to suicidal behaviour (Akar et al. 2010). Moreover, in a study of German alcoholics the sa/10 and lg/12 haplotypes were more prevalent in type 2 alcoholics compared with controls (Reese et al. 2010).

Polymorphic interactions are not limited to those in-cis and evidence is emerging for in-trans interaction between genes as predisposing factors for disease. A recent investigation by Lorenzi et al. (2010) found that in an Italian sample of patients with Alzheimers linked dementia that s-allele homozygosity was particularly abundant and the 5-HTTLPR synergistically interacted with a polymorphism in the saitojin gene (Q7R) to increase susceptibility. In addition, interactions between the Hm s-allele 5-HTTLPR genotype and polymorphisms within the cannabinoid receptor 1 locus have been associated with increased anxiety scores in Caucasian Hungarians (Lazary et al. 2009). Finally, Armbruster et al. found a significant interaction between the 5-HTTLPR and DRD4 polymorphisms in response to stress in a German population with individuals Hm for the 5-HTTLPR la-allele and one copy of the DRD4 7R allele having a lower cortisol response compared to other genotypes (Armbruster et al. 2009).

In addition to two-way interactions many studies have identified three-way interactions, so called $G \times G \times E$ interactions. Ressler et al. conducted an analysis of SLC6A4 interaction with corticotropin-releasing hormone haplotypes as a function of child abuse in an African-American cohort. They found that the 5-HTTLPR s-allele interacted with CRHR1 haplotypes and child abuse to predict current depressive symptoms (Ressler et al. 2010). Similarly, Conway et al. (2010) found that in individuals Hm for the catechol-o-methyltransferase (COMT) val158 mutation, a Hm 5-HTTLPR l-allele genotype exerted a protective effect in adolescents in response to stress-related depression.

8 Nuclear Imaging of SLC6A4 Polymorphic Variants in Affective Disorders

Over the last decade advances in in vivo imaging techniques have enabled further investigation into the in vitro and genome-wide associations made between polymorphic variation, changes in brain activity and affective disorders, in the

hope of clarifying not only whether these associations are accurate but also in the hope of determining biological endophenotypes associated with genotype. Such investigations have included examining differences in brain structure, brain metabolism, transporter and receptor-ligand binding and the signaling interactions between brain regions.

The three most widely used techniques in brain imaging for affective disorders are SPECT, positron emission tomography (PET) and fMRI. MRI is used to give a whole system overview of brain activity, whereas SPECT and PET provide resolution of events at a molecular level allowing the investigation of binding of a radiolabelled ligand to its target receptor or transporter. MRI is rapid but gives low resolution and is generally used as a functional measure of activity. Both SPECT and PET are used to determine binding potential, target density or distribution, and volume ratios (Innis et al. 2007). The most commonly used ligands for assessing binding potentials and distribution for the monoamine transporters are summarised in Table 5. Many studies concentrating on affective disorders and polymorphisms using these techniques analyse multiple brain regions, whereas others focus on specific regions for example the midbrain or striatum which are both rich in serotonin or the amygdala and limbic systems which are central regions involved in the control of mood, anxiety and emotion. For this reason and in combination with the different techniques available there is still conflict over the role of polymorphisms and their associations however a clearer picture is emerging. The results of these investigations, with a focus on the serotonin LPR are discussed below.

9 Effects of 5-HTTLPR on Serotonin Signalling Systems (MRI)

Functional MRI studies have been undertaken to determine the effects of the 5-HTTLPR polymorphism on brain organisation and structure in brain regions associated with affective disorders. Healthy individuals with an s or lg-allele displayed reduced grey matter volumes, when compared to those with a la-allele, suggesting that the polymorphism plays a role in development of brain structure. Interestingly, the same study found that patients with depression suffered from reduced bilateral hippocampal volumes and this was particularly pronounced in those who were Hm for the la-allele, compared to those who were lg/lg, lg/s or s/s suggesting that individuals Hm for the la-allele are more susceptible to morphological changes during depressive episodes (Frodl et al. 2004, 2008a, b). A further study assessed hippocampal volumes in an elderly cohort in a similar manner but on the basis of the age of onset of depression. This study determined that those individuals Hm for the l-allele and with late-onset depression had significantly smaller hippocampal volumes than those with early-onset depression or healthy controls. In addition they found that in individuals Hm for the s-allele early onset of depression was associated with smaller hippocampal volumes suggesting that genotype and age interact to affect the timing of depression (Taylor et al. 2005).

Tracers used in nuclear imaging studies of the 5-HTT

Ligand	A.K.A	Cocaine analogue	Selectivity	Application
[123I](-)-2 β -Carbomethoxy-3 β -(4-iodophenyl)tropane	[123I] β -CIT	Cocaine analogue	DAT1 5-HTT NET	SPECT
[1-123I]-N-omega-fluoropropyl-2beta-3beta-(4-iodophenyl)nortropane	[123I] FP-CIT	[123I]- β -CIT analogue	DAT1 5-HTT NET	SPECT
[11C]3-amino-4-[2-[(di(methyl)amino)methyl]phenyl]sulfany]benzotrile	[11C]DASB		5-HTT	PET
[11C](+)-6 β -(4-Methylthiophenyl)-1,2,3,5,6 α ,10 β -hexahydrodropyrrolo[2,1-a]isoquinoline	[11C]McN 5652		5-HTT	PET
[F-18]fluoro-2-deoxy-D-glucose	FDG		Glucose metabolism	PET

Functional MRI has been used by both Hariri et al. and Heinz et al. in healthy individuals to demonstrate that those with at least one s-allele were found to have stronger amygdala reactivity and stronger amygdala-prefrontal cortex coupling in response to aversive pictures or uncertain contexts, which could be considered stressful (Hariri et al. 2006; Heinz et al. 2005, 2007). Furthermore, in individuals exposed to fearful faces those Hm for the s-allele showed greater activity in the right fusiform gyrus (FG), and greater positive functional connectivity between right amygdala and FG and between right FG and right ventrolateral prefrontal cortex, compared to those with other genotypes (Surguladze et al. 2008). These replications are a good indicator that the 5-HTTLPR polymorphism can contribute to differential hyper-responsiveness of the amygdala, the control centre for emotions, and go some way towards defining a mechanism for the clinical and in vitro observations that the s-allele is associated with a predisposition to anxiety-depression spectrum disorders. It has also been suggested that these findings may also be key in other psychiatric disorders because those Hm for the l-allele displayed what could be considered “hypo-responsiveness” a trait that may be important where a lack of emotion is a key factor e.g., psychopathy (Surguladze et al. 2008; reviewed in Glenn 2011). The effect of 5-HTTLPR genotype on connectiveness between the ventral anterior cingulate cortex and the amygdala has also been examined as this pathway is hyporesponsive in patients with bipolar disorder. When patients with bipolar depression or healthy controls were presented with happy and fearful facial imagery those with bipolar disorder showed decreased activity in this pathway as expected. Furthermore, in healthy individuals and in those with bipolar depression Hm for the s-allele, this pathway was found to be hypoactive compared to those with an l-allele (Shah et al. 2009). Taken together these data strongly suggest an effect of the 5-HTTLPR polymorphism, in particular the s-allele, on amygdala responsiveness and connectivity although the molecular mechanisms behind these differences cannot be delineated using MRI.

10 Effects of 5HTTLPR on Serotonin Transporter Binding

A SPECT study in 22 individuals, 14 of which were alcoholics assessed the effect of the 5-HTTLPR polymorphisms on transporter-ligand binding using [123I] β -CIT. In healthy individuals Hm for the l-allele the binding capacity of the 5-HTT in the midbrain was almost twice that of those with an s-allele. By contrast, the same study noted a modest reduction in binding in alcoholics Hm for the l-allele compared to those with an s-allele (Heinz et al. 2000). These initial results in healthy individuals were not confirmed by further SPECT studies using [I-123] β -CIT that showed no differences in binding on consideration of genotype (Jacobsen et al. 2000; Willeit et al. 2001). In a further study the predominant findings were opposed to those of Heinz et al. in that these subjects Hm for the s-allele displayed significantly higher ligand-binding potential compared to any l-allele containing genotypes (Van Dyck et al. 2004), however, in this assessment all s-allele

homozygotes were much younger than non-s-allele homozygotes and it should be noted that decreased ligand-binding in nuclear imaging has been associated with increasing age (Pirker et al. 2000). Supporting a lack of function in vivo seen with SPECT, quantitative autoradiography in the prefrontal cortex of post-mortem brains of suicide victims also failed to show any correlation between 5-HTT binding and genotype (Mann et al. 2000).

Decreased levels of 5-HTT binding have been observed across a number of brain regions in a PET study using [C-11]DASB (Selvaraj et al. 2011) or [11C]McN 5652 (Parsey et al. 2006a) in depressed individuals. The activity of serotonin re-uptake and metabolism in the context of LPR polymorphisms was assessed in healthy individuals using PET with fludeoxyglucose F18 (FDG). The results of this study showed genotype dependant differences in serotonin metabolism across the brain. In particular, individuals Hm for the s-allele ($n = 6$) showed higher activity in the limbic system, prefrontal and temporal cortices, whilst in those Hm for the l-allele ($n = 6$) higher activity was noted in bilateral frontal structures. Overall the authors suggest that a more widespread effect could be the foundation for individuals Hm for the s-allele being more susceptible to anxiety-depression spectrum disorders (Graff-Guerrero et al. 2005).

Interestingly, high-resolution PET FDG imaging showed that monkeys with the s-allele of the LPR variant displayed increased brain activity in orbitofrontal cortical regions, amygdala and the bed nucleus of the stria terminalis in response to stress (relocation to a foreign environment) which provides further support that the s-allele may confer a susceptibility to stress by mediating aberrant activity in limbic structures (Kalin et al. 2008).

Similar to investigations using SPECT imaging, correlation between genotype and binding has also been negative in PET studies utilising the 5HTT-selective radioligand [11C]McN 5652 (Parsey et al. 2006b; Shioe et al. 2003). However, PET studies utilising the more sensitive and preferable 5HTT-selective tracer, [11C]DASB, have demonstrated positive correlations between genotype and binding capacity. These studies analysed the triallelic variants of the 5-HTTLPR (la, lg, s). Replicable studies found that, when compared to non-la-allele homozygotes, those Hm for the la-allele demonstrated higher 5HTT-ligand binding capacity in brain regions associated with high transporter expression in the putamen, caudate and the midbrain (Kalbitzer et al. 2009; Praschak-Rieder et al. 2007; Reimold et al. 2007, respectively). It is worth noting that the study of Reimold et al. found a significant effect of genotype on 5-HTT binding in the midbrain but no effect in the amygdala or thalamus, further stressing the importance of experimental design in assessing genotype effects, as these effects are likely to be tissue-specific or context dependant.

In contrast, in a study using the selective 5-HTT ligand, [11C]DASB, in alcoholic subjects and healthy controls, Martinez et al. (2009) did not find any significant association between genotype and 5-HTT binding across a number of brain regions.

The majority of genotypic effects examined for 5-HTT have been in the mid-brain but little evidence exists for other regions. Since the origin of serotonergic

projections is the midbrain this may point to an important affect of polymorphism during development which may have an impact on the circuitry projections to other brain regions which may affect signaling in later life and be the basis for the effect of a transporter polymorphism. It follows that a lack of polymorphism-dependant effects on binding potential in limbic areas may not necessarily be seen in adults despite differential metabolic activity being observed by FDG PET.

It is particularly interesting to note that a number of studies have found differential effects on ligand-binding dependant on the season of the year at which the experiments were performed with higher binding in healthy controls noted in the autumn and winter months in both PET (Praschak-Rieder et al. 2008) and SPECT (Ruhe et al. 2009) scanning.

11 Effect of the Serotonin Transporter Polymorphisms on Functional Gene Expression

The regulation of expression of a given gene can vary between individuals because of epigenetics and polymorphic variation in regulatory domains where for example, transcription factors may bind. Many studies have shown that cis-regulatory loci (regulatory polymorphisms) in promoters and other non-coding regions of a gene, in addition to transcription factors (trans-acting modulators) regulate allele-specific expression (Heils et al. 1996; Yan 2002; Bray et al. 2003; Lo et al. 2003; Klenova et al. 2004; Roberts et al. 2007). In the absence of these cis-regulatory domains, paternal and maternal alleles of a gene are equally expressed, unless one allele is imprinted. However, when an individual is heterozygous for a cis-regulatory domain, mRNA expression level may vary from each allele; termed differential allelic gene expression. Different combinations of these polymorphisms within our genome create the 'genetic fingerprint' that contributes to determining phenotypic diversity and leads in part to individuality amongst us. Nearly three decades ago, King and Wilson pointed out that changes in the mechanisms controlling the gene expression, rather than the DNA sequence itself account for the morphological, behavioural and cognitive differences between human beings and other primates (King and Wilson 1975). Therefore, it is suggested that the person we are is not solely determined by our genes but how we control their expression, hence drugs such as cocaine vary our behaviour in part by modulating gene expression.

We and others have previously demonstrated the transcriptional capacity of the VNTRs to support tissue-specific and stimulus inducible gene expression (Table 4) (reviewed in Haddley et al. 2008). We further extended our studies to investigate the possible combinatorial interaction of these polymorphisms with one another in regulating gene expression and recently demonstrated that the 5-HTTLPR and STin2VNTR can act in concert, in the context of a transient or stable reporter gene assay in human 5-HTT-expressing JAr cells and primary rodent neurons, to demonstrate differential reporter gene expression which was not a simplistic additive effect of the individual domains (Ali et al. 2010a).

One characteristic feature of psychiatric disorders, particularly depression, is the long-lasting nature of the disease and the slow response to treatment. Recent psychiatric research suggests that these long-lasting changes in gene expression might be due to modulation of the epigenetic mechanisms regulating neuronal gene expression. A better understanding of how epigenetic changes associate with psychiatric disorders, polymorphisms and drug addiction will help in the understanding of the neurobiology of these diseases. A study by Tsankova et al. revealed robust and long lasting histone modifications associated with the promoter of the BDNF gene in the hippocampus of a mouse model of depression. Interestingly, the negative-histone modifications marks were present for 4 weeks following ending of defeat-stress and were not reversed by anti-depressant treatment, indicating the stability of these 'acquired marks', the anti-depressant drugs exerted their effect by establishing positive-histone marks; methylation of H3K4 and acetylation of histone H3 across the promoter (Tsankova et al. 2004). Similarly, research suggests that drugs of abuse and drug-associated cues or stress, exert long lasting changes in gene expression through changes in epigenetic mechanisms (Levine et al. 2005; Kumar et al. 2005; Renthal et al. 2007). Transcription factors play an early role in regulating gene expression and histone modifications and one mechanism by which drugs of abuse and antipsychotic drugs can exert their effect on chromatin modification is via modulating intracellular signalling cascades, for example, cocaine elicits phosphorylation of the cAMP response element (CREB) initiating a transcriptional DNA-binding cascade that results in histone modifications leading to further recruitment of transcriptional activators (Carlezon et al. 1998). Acute cocaine treatment was also found to increase H4 histone acetylation in *cfos* and *fosb* promoters within 30 min which disappeared by 3 h (Kumar et al. 2005). Cocaine was also found to regulate the specific histone methyl-transferases and demethylases (Maze et al. 2010).

The SLC6A4 gene is an important modulator of addictive behaviour (Hall et al. 2004), and studies have demonstrated the role of the serotonergic system in cocaine addiction (Cabrera-Vera et al. 2000; Uhl et al. 2002). Little et al. (1998) suggested that SLC6A4 expression could be regulated in a region-specific pattern and that this could be affected by the genotype of the LPR variant. Although performed in post-mortem material, this would be consistent with the action of these domains as tissue-specific or stimulus-induced regulators (Haddley et al. 2008; Ali et al. 2010a). We hypothesised that cocaine could differentially modulate epigenetic markers on the SLC6A4 gene based on the genotype of the polymorphisms. We focused on the transcription factor CTCF, which has been implicated in epigenetic remodelling (Ishihara et al. 2006), and which we had previously characterised as a regulator of both the 5-HTTLPR and STin2VNTR (Klenova et al. 2004; Roberts et al. 2007; Ali et al. 2010a). The identification of CTCF suggested epigenetic changes operational at these loci might also involve MeCP2, known to bind to methylated DNA, which we confirmed occurs at the LPR domain. Specifically, we demonstrated that exposure of JAr cells to acute cocaine treatment resulted in CTCF binding only to the l-allele of the 5-HTTLPR whereas MeCP2 was observed to bind only to the s-allele and to recruit the histone deacetylase complex (HDAC) to this allele. These changes

correlated with an increase in the association of positive histone marks and RNA polymerase II binding within the SLC6A4 promoter. Similarly, we have also demonstrated that the mood stabiliser lithium chloride alters the binding of CTCF to the STin2VNTR dependent on genotype (Roberts et al. 2007). These observations suggest a potent mechanism by which genotype can effect gene regulation and indirectly the level of 5-HTT protein present by altering the transcription factor complexes bound by allelic variants under basal conditions and in response to stimuli and may provide further insight into the mechanism(s) behind genotypic influence on susceptibility to affective disorders.

12 Lessons from the 5-HTT Polymorphisms and Their Application to Other Gene Polymorphisms

We have focused in this chapter on two of the many polymorphisms present in the SLC6A4 gene there are many others including SNPs and other mini-satellites present and more are being identified as deep sequencing of the human genome takes place. All genes contain what could be considered functional SNPs and these are not only present in protein coding regions. SLC6A4 is obviously not the only gene involved in the plethora of psychosis and affective disorders and many other genes contain functional and disorder-associated polymorphisms. For example, the widely studied DAT1 (SLC6A3) gene from the same family as the 5-HTT contains VNTRs in non-coding regions that have been associated with a range of disorders including ADHD and drug addiction (Guindalini et al. 2006; Yang et al. 2007). The SLC6A3 polymorphisms have thus been investigated with as much vigour as the SLC6A4 and the conclusions of such studies have been similar with association both negatively and positively correlated with disorders, conflicting imaging studies and differential frequency distribution of alleles in different populations. Nevertheless, molecular models have shown that these polymorphisms support differential gene expression and the lessons that can be learnt from studies with one group of polymorphisms can be applied to other polymorphisms for example the SLC6A4 and SLC6A3 VNTRs share similar transcription factor binding sites within their sequences implying that they may be functional on similar pathways and in response to similar challenges such as stress. The same can be said for many other VNTRs within other neuronal genes such as those in the dopamine R4 receptor (DRD4), monoamine oxidase A (MAOA), neuronal restrictive silencer factor (NRSF) and N-methyl-D-aspartic acid (NMDA) glutamate receptor (GRIN1).

13 Summary

After almost two decades of research the importance of the link between individual genetic polymorphisms as standalone agents and their relation to disease susceptibility remains somewhat controversial and tenuous for many polymorphisms. Initial

twin studies pointed towards a genetic component for many psychiatric disorders making the polymorphisms a likely candidate. Early indications linking the serotonin transporter polymorphisms to a range of psychiatric disorders including depression, OCD, anxiety, schizophrenia and treatment response while at first positive have fallen under recent scrutiny in the light of many negative associations. Amongst most researchers, however, there is little doubt that these functional polymorphisms do have a role to play in the aetiology of psychiatric disorders but the key to unlocking these roles is more complex than a simple 'one polymorphism equals one disorder model'. It has been apparent for a long time that the same polymorphism occurs at different frequencies within distinct populations and that an 'at risk' allele in a Caucasian population of European descent will not be an at risk allele for the same disorder in, for example, a Chinese Han population. This points to a more complex network of other factors being involved and recent investigations have begun to expand on this idea looking not only for single polymorphism associations but examining haplotype associations where one polymorphism may only exert an effect in the presence of a distinct polymorphism in the same or another gene, as has been shown on many occasions for the BDNF Val66Met polymorphism (Miyajima et al. 2008; Wells et al. 2010; Hiiio et al. 2011). In addition to haplotype analysis it is also apparent that $G \times G \times E$ interactions play as big a role as the polymorphisms themselves. A polymorphism can be a marker or predictor for susceptibility but its effect may only become apparent under certain circumstances; it may only have an adverse (or in some cases positive) effect within a specific context for example following stressful-life events (Caspi et al. 2003).

Advances in sequencing and array technologies are allowing rapid and cost effective analysis of the thousands of human polymorphisms that exist allowing large scale mapping projects worldwide in different populations such as the 1,000 man genome project and the international HAPMAP project. Genome wide association studies are being supported by functional genome wide studies such as ChIP-Geneseq and FAIRE which expand current knowledge on how polymorphisms may regulate gene expression at a molecular level by interaction with transcription factors and by epigenetic remodelling. Perhaps most useful in human functional studies are the advances made in nuclear medicine. Imagining is certainly an effective tool for assessing genotype effects on binding and possible function although like all methods compounding factors must also be considered and not just those inherent in the experimental design e.g., tracer sensitivity or brain region under study. Environmental effects on endogenous transporter expression must also be taken into account for example, underlying pathologies, seasonal changes, age and lifestyle, as these may mask any underlying mechanisms apparent due to polymorphic variation. A large proportion of imaging studies failed to detect any effect of a polymorphism on transporter function, not solely in the serotonin transporter but also in other monoaminergic transporters such as the dopamine transporter. This could be due to the heterogeneity of such studies, as of yet there are still no clear parameters in place that make comparing studies wholly effective. Studies have, however, found differences in brain region volumes, connectivity and activity and it has been suggested by Keers and

Atchinson, that polymorphisms may be involved in indirect effects such as skewing the hypothalamic-pituitary-adrenal (HPA) axis, the neuroendocrine system that mediates mood and which is severely affected in psychiatric disorders, or by affecting neurogenesis, which when suppressed can lead to dysfunction in the HPA axis (Schloesser et al. 2009). Further imaging studies of whole brain function in conjunction with haplotype analysis and epigenetic investigations may help to further elucidate indirect effects of polymorphisms that until recently have been neglected. There is still much to be uncovered and understood about how genetic variation can affect an individual's mental state and capacity, and how small changes in genetic sequence can have major effects on complex systems. Within the next 10 years it is hoped that with the rapid expansion in post-genomic analysis, functional assessments and more concerted effort on implementing a degree of homogeneity between association studies that the true clinical value of polymorphisms as markers of disease and markers and targets of therapeutic response will be revealed.

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Genetic Factors Modulating the Response to Stimulant Drugs in Humans

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Abstract Individuals vary in their responses to stimulant drugs, and several lines of evidence suggest that the basis for this variation is at least partially genetic in origin. Association studies have examined the effects of polymorphisms in specific genes on acute and chronic responses to stimulant drugs. Several of these genetic polymorphisms are also associated with other psychiatric dimensions and disorders. This chapter examines the evidence for genetic associations between the genes that have been most carefully examined for their influence on the response to stimulant drugs.

Keywords Stimulants · Inter-individual variation · Drug response · Candidate gene · Genetic association · Genetic polymorphism

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1 Introduction

A growing body of evidence suggests that genetic variation underlies inter-individual variability in the response to drugs, including stimulant drugs. Stimulant drugs produce behavioral and subjective effects that include increased vigilance and attention, and feelings of energy and euphoria (Lamb and Henningfield 1994; Martin et al. 1971; Sevak et al. 2009). However, there is substantial individual variation in these responses (Brown et al. 1978; de Wit et al. 1986; Holdstock and de Wit 2001), and some of this variation has been shown to be heritable (Crabbe et al. 1983; Nurnberger et al. 1982). Genetic variation in the response to stimulants may contribute to the potential to develop drug abuse (Fergusson et al. 2003; Haertzen et al. 1983), and may also be relevant for therapeutic uses of stimulants.

In this review we will focus on five prototypic stimulant drugs that have been studied most intensively: amphetamine, methamphetamine, methylphenidate, cocaine, and bupropion. All of these drugs inhibit the reuptake of dopamine, norepinephrine, and serotonin, thereby increasing the levels of these monoamine neurotransmitters in the synaptic cleft. These drugs differ in their potency, synaptic actions, degree of reuptake blockade, pharmacokinetic properties and their specificity and actions on other neurotransmitter systems. Some of the drugs (e.g., amphetamine) also cause the reuptake transporters to work in reverse, leading to non-impulse dependent release of neurotransmitters. Additionally, some stimulants inhibit the monoamine oxidase enzymes (MAO-A and MAO-B), thus preventing the degradation of monoamines (Seiden et al. 1993). Finally, there is evidence that stimulant drugs disrupt the function of the vesicular monoamine transporter type 2 (VMAT2), which transports monoamine neurotransmitters from stores in the cytoplasm to synaptic vesicles (Uhl et al. 2000). Genetic variation in these genes as well as in their up- or down-stream neighbors make them likely candidates to contribute to inter-individual variation in the response to stimulant drugs.

We will focus on two types of genetic studies in this review, twin and association studies. Twin studies estimate the heritability of traits, whereas association studies examine specific polymorphisms in relation to a phenotype. We will not include family-based linkage studies of drug abuse or animal studies on genetic determinants of stimulant effects, both which have been carefully reviewed elsewhere (Phillips et al. 2008; Kreek et al. 2005; Uhl 2006). We will also not discuss the stimulant caffeine, because it acts by distinct neurochemical mechanisms and because we have recently reviewed the genetics of caffeine elsewhere

(Yang et al. 2010). We will discuss two types of association studies: candidate gene studies and genome-wide association studies. Candidate gene studies draw on prior pharmacological knowledge of how stimulants affect the brain to select 'candidate' genes that are likely to be the source of genetic differences. In these studies, polymorphisms within or near the candidate gene are tested to see if they are statistically associated with relevant phenotypes. Phenotypes might include measures of acute response, patterns of drug use or therapeutic response in patients, or clinical diagnoses of drug dependence or abuse. Other studies use a genome-wide association (GWAS) approach to examine many or most of the common polymorphisms in the genome; these studies do not depend on prior hypotheses about which genes might be important.

In all of the studies discussed: twin, candidate gene association, and genome-wide association, we will address two types of genetic polymorphisms: single nucleotide polymorphisms (SNPs) and variable number tandem repeats (VNTRs). SNPs are sites at which a single nucleotide differs among individuals within a population. SNPs can either occur in the coding sequence of a gene and thus alter amino acid sequence (termed non-synonymous) or, more commonly, they may be outside the coding sequence and alter gene regulation. In both cases, a SNP may alter a biological function itself (coding or gene expression), or be linked to another polymorphism that is functionally significant. VNTRs are polymorphisms in which a variable number of short repetitive sequences (tandem repeats) are present at a given locus; as with SNPs they may have direct functional consequences or may be linked to some other functionally significant polymorphism.

We will attempt to synthesize genetic studies of acute, sub-chronic, and chronic administration of stimulant drugs in this review. First, we will discuss overall heritability of stimulant drug-related phenotypes based on twin studies. Next, we will discuss candidate gene and genome-wide association studies that implicate specific genes in modulating responses. Last, we will highlight the key conclusions and identify future directions for study.

2 Twin Studies of Stimulant Drug Phenotypes

Two early twin studies provide strong evidence for the heritability of acute responses to stimulant drugs (Nurnberger et al. 1982; Crabbe et al. 1983). Twin studies estimate heritability by comparing the concordance rate between monozygotic twins, who share a familial environment and all genes, to dizygotic twins, who share the same environment but only half of their genes. Typically, biometric modeling is used to explain variability due to genetic or environmental effects. Heritability estimates can range from 0 (no variation contributed by genetic sources) to 1 (all variation contributed by genetic sources). Nurnberger et al. (1982) administered *d*-amphetamine intravenously (0.3 mg/kg) to 13 pairs of monozygotic twins and 3 pairs of dizygotic twins and measured physiological and subjective effects of the drug. Responses to the drug in monozygotic twins were

highly concordant for a subjective measure of excitation, as well as growth hormone and prolactin release, suggesting a large genetic component underlying these traits. Consistent with this, Crabbe et al. (1983) administered 10 mg *d*-amphetamine sulfate to six pairs of monozygotic twins and found less variation in physiological and subjective responses within pairs than between pairs, which suggests these traits are heritable.

More recently, twin studies have examined the heritability of lifetime stimulant use, dependence, and abuse using liability threshold model fitting (Kendler et al. 1999, 2003, 2000). In their most recent study, Kendler et al. (2005) estimated heritability for lifetime use of stimulant drugs excluding cocaine to be 0.42, and heritability for lifetime use of cocaine to be 0.70. They also found substantial familial environmental contributions to the variance (i.e., 0.20) for lifetime use of other stimulant drugs, but not for cocaine use. Specific environmental effects, which are distinguished from shared familial environmental effects, were estimated at 0.38 for other stimulant use and 0.30 for cocaine use. In addition to this study, a study of male twin war veterans yielded similar results (Tsuang et al. 1996). That study estimated the heritability of stimulant abuse (including cocaine abuse) based on *DSM-III-R* criteria (American Psychiatric Association 1987) to be 0.44, but with 0.49 of the variance contributed by specific environmental effects, and no contribution of familial environment in the best-fit model. Although this was a slightly higher estimate of heritability than by Kendler et al. (2005), both studies suggest a fairly large contribution of genetic factors to heritability of stimulant drug abuse.

3 Association Studies

Genetic determinants of response to acute, sub-chronic, and chronic administration of stimulant drugs have been examined using association studies in several different populations. We have conducted a series of association studies of the acute responses to amphetamine (e.g., Lott et al. 2005; Dlugos et al. 2010). In this double-blind, placebo-controlled study, healthy young adults (ranging from $n = 99$ to $n = 152$, depending on the analysis) received oral doses of *d*-amphetamine (10 and 20 mg) and placebo over the course of three different sessions. Measures of subjective, cardiovascular and behavioral responses were obtained at regular intervals. The subjective measures included the Profile of Mood States (POMS; McNair et al. 1971), Drug Effects Questionnaire (DEQ; Johanson and Uhlenhuth 1980) and Addiction Resource Center Inventory (ARCI; Martin et al. 1971). In children diagnosed with ADHD, methylphenidate is typically administered daily or several times a day in a therapeutic context, and the outcome measure is usually therapeutic response as measured by the Clinical Global Impression-Severity scale (CGI-S; Guy 1976) and the ADHD Rating Scale-IV (ARS; DuPaul et al. 1998). In both studies of healthy adults and studies of children diagnosed with ADHD, neuroimaging has also been used to examine variation

in brain responses to acute amphetamine and methylphenidate administration. These include techniques such as single photon emission computerized tomography (SPECT), functional magnetic resonance imaging (fMRI) and positron emission tomography (PET) to assess the binding of specific ligands (Warwick 2004; Cabeza and Nyberg 2000).

Sub-chronic (i.e., <8 weeks) or chronic (>8 weeks) stimulant responses have been measured in patients receiving methylphenidate for ADHD or bupropion for smoking cessation. Other studies have examined the phenotypes of dependence, abuse, and consequences of abuse such as drug-induced psychosis. Although it is not possible to accurately determine the doses in studies of active drug abusers, it is safe to assume that they involve higher doses than are found in acute or therapeutic studies. In addition, drug users commonly self-administer drugs via injection, inhalation (smoking) or intranasal routes, where the acute laboratory studies and therapeutic studies most commonly involve oral administration.

Studies of responses to stimulant drugs have focused on a small number of candidate genes that have also been associated with other psychiatric phenotypes. Many of these genes are the direct targets of stimulant drugs or other known psychoactive agents. Table 1 lists these studies and they are also discussed in the following sections. Genes that have been less well studied both in relation to stimulant drugs and other psychiatric phenotypes are only briefly mentioned in the “Exploratory Studies” section and summarized in Table 2.

4 Monoamine Transporters

SLC6A3

The dopamine transporter (*SLC6A3*; *DAT1*; *DAT*) is a direct target of stimulant drugs and thus a logical candidate gene for studies of stimulant sensitivity. Polymorphisms in this gene have been extensively studied in relation to stimulant drug responses and susceptibility to ADHD (reviewed in Banaschewski et al. 2010). In particular, attention has focused on a 40 bp variable nucleotide tandem repeat (VNTR) located in the 3'-untranslated region (UTR) of the gene, with a range of 3–11 repeats. The two most common alleles have either 9, or more commonly, 10 repeats (Vandenbergh et al. 1992). The 10-repeat allele has been associated with both higher and lower expression of the dopamine transporter in the brain (Fuke et al. 2001; van de Giessen et al. 2009; Van Dyck et al. 2005). The evidence described below suggests that polymorphisms in *SLC6A3* play an important role in responses to stimulant drugs, although the direction of the association is inconsistent across studies.

In analyses examining associations of amphetamine response with the *SLC6A3* 3'-UTR VNTR, we found that individuals homozygous for the 9-repeat allele showed decreased responses to amphetamine at 20 mg, compared to heterozygous (9/10) and homozygous (10/10) individuals (Lott et al. 2005). Using a larger

Table 1 Candidate genes associated with responses to stimulant drugs and associated SNPs

Candidate Genes	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
Dopamine transporter	<i>SLC6A3; DAT1; DAT</i>	Chronic	Belgrave et al. (2005)	Methylphenidate therapeutic response	43	Irish	Children with ADHD	-	3'-UTR VNTR	10-repeat allele associated with better treatment response
		Acute	Cheon et al. (2005)	Methylphenidate therapeutic response	11	Korean	Children with ADHD	Up to 0.7 mg/kg/day	3'-UTR VNTR	10/10 associated with poor treatment response
		Chronic	Gelernter et al. (1994)	Cocaine-induced paranoia	58	Caucasian, African-American	Cocaine users	-	3'-UTR VNTR	9-repeat allele associated with increased risk
		Acute	Hamidovic et al. (2010a)	Amphetamine subjective response	152	Caucasian	Healthy volunteers	Placebo, 10 mg, 20 mg	rs460000	C/C increased Euphoria and Stimulation at 10 and 20 mg
		Acute	Kooji et al. (2008)	Methylphenidate therapeutic response	42	-	Adults with ADHD	Placebo, 0.5 mg/kg/day by week 1, 0.75 mg/kg/day by week 2, up to 1.0 mg/kg/day by week 3	3'-UTR VNTR	10/10 associated with poor response

(continued)

Table 1 (continued)

Strong Candidate Genes	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
		Sub-chronic	Joober et al. (2007)	Methylphenidate therapeutic response	159	-	Children with ADHD	Placebo, 0.5 mg/kg/day	3'-UTR VNTR	9/9 associated with poor treatment response
		Acute	Lott et al. (2005)	Amphetamine subjective response	101	67 Caucasian, 20 African-American, 12 Asian, 2 unknown	Healthy volunteers	Placebo, 10 mg, 20 mg	3'-UTR VNTR	9/9 associated with poor response at 20 mg
		Acute	Purper-Ouakil et al. (2008)	Methylphenidate therapeutic response	141	132 Caucasian, 8 Other	Children with ADHD	10-60 mg/day	3'-UTR VNTR	10/10 associated with poor treatment response
		Acute	Rohde et al. (2003)	Methylphenidate therapeutic response	8	-	Children with ADHD (male)	0.35-0.7 mg/kg	3'-UTR VNTR	10/10 associated with higher cerebral blood flow
		Sub-chronic	Stein et al. (2005)	Methylphenidate therapeutic response	47	-	Children with ADHD	Placebo, 18 mg, 36 mg, 54 mg	3'-UTR VNTR	9/9 associated with poor response
		Chronic	Ujike et al. (2003)	Methamphetamine-induced psychosis	124 cases	160 Japanese controls	Methamphetamine dependence/psychosis patients	-	3'-UTR VNTR	Possession of allele with 8 = 9 or fewer repeats associated with prolonged psychosis

(continued)

Table 1 (continued)

Strong Candidate Genes	Gene name	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
	Serotonin transporter	<i>SLC6A4</i> ; <i>5-HTT</i>	Acute	Lott et al. (2006)	Amphetamine subjective response	101	67 Caucasian, 20 African-American, 12 Asian, 2 unknown	Healthy volunteers	Placebo, 10 mg, 20 mg	5-HTTLPR & Intron 2 VNTR haplotype	L/L and 12/12 genotype combination associated with weak subjective response Frequency of S allele higher in patients with prolonged psychosis L _G /L _G associated with best treatment response
			Chronic	Ezaki et al. (2008)	Methamphetamine-induced psychosis	166 cases 197 controls	Japanese	Methamphetamine-induced psychosis patients	-	5-HTTLPR	
			Sub-chronic	Thakur et al. (2010)	Methylphenidate therapeutic response	157	-	Children with ADHD	Placebo, 0.5 mg/kg/day	5-HTTLPR triallelic	

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Table 1 (continued)

Strong Candidate Genes	Gene name	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
Norepinephrine transporter	<i>SLC6A2</i> ; <i>NET</i>	Acute	Dlugos et al. (2007)	Amphetamine subjective response	99	65 Caucasian, 20 African-American, 12 Asian, 2 unknown	Healthy volunteers	Placebo, 10 mg, 20 mg	rs36017, rs47958, rs36017- rs2270935- rs47958 haplotype	rs36017 C/C, G-C-C haplotype associated with increased positive mood; rs47958 C/C associated with increased elation	
											rs36017, rs1861647, rs36017- rs10521329- rs3785155 haplotype
		Acute	Dlugos et al. (2009a)	Amphetamine subjective response	159	Caucasian	Healthy volunteers	Placebo, 10 mg, 20 mg	rs36017, rs1861647, rs36017- rs10521329- rs3785155 haplotype	rs36017 C/C, rs1861647 A/A associated with increased elation and vigor; C-C-G haplotype associated with increased vigor	

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Table 1 (continued)

Strong Candidate Genes	Gene name	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes									
Dopamine D2 receptor	<i>DRD2</i>	Sub-chronic	David et al. (2007)	Bupropion therapeutic response	722	Caucasian	Smokers	Placebo, 150 mg/day first 3 days, then 300 mg/day	Taq1A (rs1800497; T/C)	A2/A2 3x more likely to abstain from smoking after treatment; no effect for A1/A1, A1/A2	rs12364283 A/G, G/G increased reaction time at 10 mg									
												Acute	Hamidovic et al. (2009)	Impulsivity amphetamine response	93	Caucasian	Healthy volunteers	Placebo, 10 mg, 20 mg	rs12364283	rs12364283 A/G, G/G increased reaction time at 10 mg

(continued)

Table 1 (continued)

Strong Candidate Genes	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
Dopamine D4 receptor	<i>DRD4</i>	Acute	Lee et al. (unpublished data) (2004a)	Amphetamine subjective response	100	66 Caucasian, 20 African-American, 12 Asian, 2 unknown	Healthy volunteers	Placebo, 10 mg, 20 mg	Exon III VNTR	Single 7-repeat allele associated with increased elation, friendliness, heart rate, decreased dysphoria and anxiety at 10 and 20 mg
		Chronic	Chen et al. (2004a)	Methamphetamine abuse	416 cases, 435 controls	Taiwanese	Methamphetamine abusers	-	Exon III VNTR	Higher frequency of 6-repeat allele in cases
		Chronic	Hamman et al. (2004)	Methylphenidate therapeutic response	45	-	Children with ADHD	-	Exon III VNTR	Subjects with 7-repeat allele require higher doses of methylphenidate
		Chronic	Li et al. (2004)	Methamphetamine abuse	416 cases, 435 controls	Taiwanese	Methamphetamine abusers	-	Promoter VNTR + exon III VNTR haplotype	Higher frequency of 7-repeat allele in cases
μ -opioid receptor	<i>OPRM1</i>	Acute	Dlugos et al. (2010)	Amphetamine subjective response	162	Caucasian	Healthy volunteers	Placebo, 10 mg, 20 mg	rs510769, rs2281617 C/C	rs510769 G/G A/G, rs2281617 C/C associated increased euphoria and energy at 10 mg
		Chronic	Ide et al. (2004)	Methamphetamine psychosis	138 cases, 213 controls	Japanese	Methamphetamine dependence/psychosis patients	-	A118G (rs1799971)	G/G associated with psychosis within 3 years of first use
		Chronic	Ide et al. (2006)	Methamphetamine abuse/psychosis	128 cases, 232 controls	Japanese	Methamphetamine dependence/psychosis patients	-	IVS2 + G691C (rs2075572)	G/G associated with methamphetamine abuse and psychosis

(continued)

Table 1 (continued)

Strong Candidate Genes	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
Adenosine A _{2A} receptor	<i>ADORA2A</i>	Acute	Hohoff et al. (2005)	Amphetamine subjective response	99	65 Caucasian, 20 African-American, 12 Asian, 2 unknown	Healthy volunteers	Placebo, 10 mg, 20 mg	1976C/T (rs5751876 & rs3032740) 2592C/T ins (rs3032740)	rs5751876 & rs3032740 associated with increased anxiety at 10 & 20 mg
Catechol O-methyl transferase	<i>COMT</i>	Acute	Hamidovic et al. (2010b)	Cognitive response to amphetamine	161	Caucasian	Healthy volunteers	Placebo, 10 mg, 20 mg	val158met (rs4680; G/A)	Val/Val, Val/Met performance improves with amphetamine; Met/Met no change
		Chronic	Li et al. (2004)	Methamphetamine abuse	416 cases 435 controls	Taiwanese	Methamphetamine abusers	-	val158met (rs4680; G/A)	Val allele frequency higher in abusers
		Chronic	Lohoff et al. (2008)	Cocaine dependence	330	African-American	Cocaine dependence patients	-	val158met (rs4680; G/A)	Met allele frequency higher in abusers
		Acute	Mattay et al. (2003)	Amphetamine brain response	123	-	Healthy volunteers	Placebo, 0.25 mg/kg of body weight	val158met (rs4680; G/A)	Val/Val performance improves with amphetamine; Met/Met perform worse with amphetamine
		Chronic	Suzuki et al. (2006)	Methamphetamine-induced psychosis	143 cases 200 controls	Japanese	Methamphetamine-induced psychosis patients	-	val158met (rs4680; G/A)	Met allele frequency higher in cases with spontaneous relapse

(continued)

Table 1 (continued)

Strong Candidate Genes	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
Monoamine oxidase A	<i>MAOA</i>	Chronic	Nakamura et al. (2009)	Methamphetamine-induced psychosis	118 cases 199 controls	Japanese	Methamphetamine-induced psychosis patients	-	MAOA-u VNTR	4-repeat allele associated with transient psychosis in males
Dopamine beta-hydroxylase	<i>DBH</i>	Chronic	Cubells et al. (2000)	Cocaine-induced paranoia	45	European-American	Cocaine dependence/paranoia patients	-	Del-A haplotype	Frequency higher in cases
	<i>DBH</i>	Acute	Kalayasiri et al. (2007)	Cocaine-induced paranoia	31	European-American, African-American	Cocaine dependence patients	0, 8, 16, and 32 mg/70 kg body weight	-1021C→T (rs1611115)	T/T genotype associated with increased risk for paranoia
Tryptophan hydroxylase 2	<i>TPH2</i>	Acute	Manor et al. (2008)	Methylphenidate therapeutic response	498	-	Children with ADHD	0.3–1 mg/kg	rs1386488- rs2220330- rs1386495- rs1386494- rs6582720- rs1386492- rs4760814- rs1386497 haplotype	C-G-C-A-A-G-A-C "Yang" haplotype associated with better response to methylphenidate
Fatty acid amide hydrolase	<i>FAAH</i>	Acute	Dlugos et al. (2009b)	Amphetamine subjective response	72	Caucasian	Healthy volunteers	Placebo, 10 mg, 20 mg	rs3766246, rs2295633, rs3766246, rs324420, rs2295633 haplotypes	C/C genotype for both SNPs associated with increased arousal and decreased fatigue at 10 mg

(continued)

Table 1 (continued)

Strong Candidate Genes	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
Brain-derived neurotrophic factor	<i>BDNF</i>	Acute	Flanagin et al. (2006)	Amphetamine subjective response	100	66 Caucasian, 20 African-American, 12 Asian, 2 unknown	Healthy volunteers	Placebo, 10 mg, 20 mg	val66met (rs6265; G/A)	Val/Val associated with higher response at 10 mg
Casain kinase 1 epsilon	<i>C5NK1E</i>	Acute	Veenstra-VanderWeele et al. (2006)	Amphetamine subjective response	101	67 Caucasian, 20 African-American, 12 Asian, 2 unknown	Healthy volunteers	Placebo, 10 mg, 20 mg	rs135745 (C/G)	C/C associated with greater sensitivity at 10 mg
Adenosine A _{2A} receptor	<i>ADORA2A</i>	Acute	Hohoff et al. (2005)	Amphetamine subjective response	99	65 Caucasian, 20 African-American, 2 Asian, 2 unknown	Healthy volunteers	Placebo, 10 mg, 20 mg	1976C/T (rs5751876) 2592C/T ins (rs3032740)	rs5751876 & rs3032740 associated with increased anxiety at 10 mg & 20 mg
Cytochrome P450 2D6	<i>CYP2D6</i>	Chronic	Ojani et al. (2008)	Methamphetamine dependence	202 cases 337 controls	Japanese	Methamphetamine dependence patients	-	CYP2D6*10, *14 CYP2D6 *14	*10 and *14 alleles at lower frequency in cases

(continued)

Table 1 (continued)

Strong Candidate Genes	Gene name	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
	Glycoprotein endo-alpha-1, 2-mannosidase	MAM2A	Chronic	Farrer et al. (2009)	Cocaine-induced paranoia	1,612 individuals for family-based; 1,921 unrelated subjects for case-control replication	European-American, African-American	Cocaine dependence/paranoia patients	–	rs9387522 and all populations; rs6937479 from family based	rs9387522 A allele associated with cocaine induce paranoia in all populations

Genes are discussed in the following order: transporters, receptors, biosynthetic enzymes, and miscellaneous

Table 2 Association studies of less commonly studied genes with responses to stimulant drugs

Possible candidate genes	Gene name	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
Glutathione S-transferase Mu 1	<i>GSTM1</i>	Chronic	Nakatome et al. (2009)	Methamphetamine abuse	100 cases 150 controls	Japanese	Methamphetamine users	–	Null allele	Null/null associated with abuse in females	
Glutathione S-transferase theta-1	<i>GSTT1</i>	Chronic	Nakatome et al. (2009)	Methamphetamine abuse	100 cases 150 controls	Japanese	Methamphetamine users	–	Null allele	Higher liability to abuse in combination with <i>GSTM1</i> null genotype	
Glutathione S-transferase P	<i>GSTP1</i>	Chronic	Hashimoto et al. (2004)	Methamphetamine abuse/psychosis	189 cases 199 controls	Japanese	Methamphetamine-induced psychosis patients	–	Ile105Val (rs947894; A/G)	G/G, A/G associated with abuse and psychosis	
Prodynorphin	<i>PDYN</i>	Chronic	Nomura et al. (2006)	Methamphetamine dependence	143 cases 206 controls	Japanese	Methamphetamine dependence patients	–	Promoter VNTR	3- and 4-repeat alleles associated with increased risk	
Prokineticin receptor 2	<i>PROKR2</i>	Chronic	Kishi et al. (2010)	Methamphetamine dependence	199 cases 337 controls	Japanese	Methamphetamine dependence patients	–	rs3746684, rs6085086, rs17721321-rs6085086-rs3746684-rs3746682-rs4815787 haplotype	Individual SNPs and G-G-G-C-G haplotype associated with dependence	
Solute carrier family 22 member 3	<i>SLC22A3</i>	Chronic	Aoyama et al. (2006)	Methamphetamine dependence	213 cases 443 controls	Japanese	Methamphetamine-induced psychosis patients	–	rs509707-rs4709426 haplotype	Associated with polysubstance abuse	
Glycine transporter	<i>GLYT1</i>	Chronic	Morita et al. (2008)	Methamphetamine dependence/psychosis	204 cases 210 controls	Japanese	Methamphetamine users	–	IVS3 + 411C > T (rs2486001); rs2486001-rs2248829 haplotype	T/T and C/T genotypes associated with methamphetamine use disorder	
Alpha-synuclein	<i>SNCA</i>	Chronic	Kobayashi et al. (2004)	Methamphetamine dependence/psychosis	170 cases 161 controls	Japanese	Methamphetamine dependence/psychosis patients	–	rs1372520, rs3756063, rs756059	Association only in females	
Gamma-aminobutyric acid receptor subunit gamma-2	<i>GABRG2</i>	Chronic	Nishiyama et al. (2005)	Methamphetamine use disorder	178 cases 288 controls	Japanese	Methamphetamine use disorder patients	–	315 C > T-1128-99C > A haplotypes	Increased susceptibility to methamphetamine use disorder	

(continued)

Table 2 (continued)

Possible candidate genes	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
Dystrobrevin-binding protein 1	<i>DTNBP1</i>	Chronic	Kishimoto et al. (2008a)	Methamphetamine-induced psychosis	197 cases 243 controls	Japanese	Methamphetamine-induced psychosis patients	–	rs3213207, rs2619538, rs2619539, rs3213207, rs2619538 haplotype	rs3213207 G allele, rs3213207 T allele at higher frequency in cases
Frizzled-3	<i>FZD3</i>	Chronic	Kishimoto et al. (2008b)	Methamphetamine-induced psychosis	288 cases 240 controls	Japanese	Methamphetamine-induced psychosis patients	–	rs2241802-rs2323019-rs352203-rs880481 haplotype	G-A-T-G and A-G-C-A haplotypes negative risk factors for psychosis
D-amino acid oxidase activator	<i>G72</i>	Chronic	Kotaka et al. (2009)	Methamphetamine-induced psychosis	209 cases 291 controls	Japanese	Methamphetamine-induced psychosis patients	–	rs778293 (A/G), rs3916965, rs2391191 (G-A) and rs947267-rs1421292 (T-T)	rs778293 G/G associated with Methamphetamine-induced psychosis
Glutamate receptor, metabotropic 2	<i>GRM2</i>	Chronic	Tsunoka et al. (2010)	Methamphetamine-induced psychosis	196 cases 802 controls	Japanese	Methamphetamine dependence/psychosis patients	–	rs3821829-rs12487957-rs4687771 haplotype	C-C-A, C-T-T haplotypes associated with Methamphetamine-induced psychosis
NAD(P)H dehydrogenase, quinone 2	<i>NQO2</i>	Chronic	Ohgake et al. (2005)	Methamphetamine-induced psychosis	191 cases 207 controls	Japanese	Methamphetamine dependence/psychosis patients	–	Promoter indel	Del/Del associated with prolonged psychosis
PRKCA-binding protein	<i>PICK1</i>	Chronic	Matsuzawa et al. (2007)	Methamphetamine-induced psychosis	208 cases 218 controls	Japanese	Methamphetamine abusers	–	rs713729, rs2076369	rs713729 methamphetamine abuse; rs713729 and rs2076369 spontaneous relapse of psychosis

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Table 2 (continued)

Possible candidate genes	Gene name	Locus symbol	Administration type	Study	Phenotype	Number	Ethnicity	Group	Dose	Associated polymorphisms	Notes
Superoxide dismutase 2		<i>SOD2</i>	Chronic	Nakamura et al. (2006)	Methamphetamine-induced psychosis	116 cases 189 controls	Japanese	Methamphetamine-induced psychosis patients	–	Ala/Val exon 2 (rs4880)	Ala/Val associated with prolonged psychosis; Ala allele at higher frequency
Carboxylesterase 1		<i>CE1</i>	Sub-chronic	Nemoda et al. (2009)	Methylphenidate therapeutic response	122	Hungarian	Children with ADHD	10–30 mg (by body weight) twice daily (0.22 to 0.95 mg/kg/day)	Gly143Glu (rs71647871)	Glu/Glu, Glu/Gly associated with better treatment response

The genes here are not as well studied in relation to the phenotypes discussed in this review; they are therefore denoted 'possible candidate genes'. The associations described have primarily been performed for methamphetamine use-related phenotypes

sample from the same study, Hamidovic et al. (2010a) tested 4 additional SNPs near the 5' end of *SLC6A3* that were not in linkage disequilibrium with the 3'-UTR VNTR, and found a significant association between the rs460000 C/C genotype and increased scores on the ARCI Euphoria and Stimulation composite scales after 10 and 20 mg amphetamine administration, when compared to A/A and A/C individuals. Interestingly, this SNP is in perfect linkage disequilibrium with rs463379, a SNP that has been associated with increased risk of ADHD (Friedel et al. 2007), which suggests that variants underlying acute response to amphetamine may also underlie disease risk. Overall, these results suggest that both the 3'-UTR VNTR and SNPs in *SLC6A3* affect acute response to amphetamine.

The 3'-UTR VNTR polymorphism has also been studied in relation to acute responses to methylphenidate in children that have been diagnosed with ADHD. In a pilot study, eight children received acute doses of methylphenidate before SPECT neuroimaging (Rohde et al. 2003). Children homozygous for the 10-repeat allele exhibited greater cerebral blood flow, which may reflect higher transporter activity, in the frontal and basal ganglia brain areas in response to methylphenidate than children who were not homozygous for the 10-repeat allele.

SLC6A3 has also been analyzed for its role in modulating therapeutic responses to sub-chronic (8 weeks) administration of methylphenidate. Similar to the Rohde et al. (2003) study discussed above, Cheon et al. (2005) used SPECT to measure dopamine transporter density in several brain regions (basal ganglia, right basal ganglia, and occipital cortex) of 11 children diagnosed with ADHD treated with varying doses of methylphenidate, and measured both clinical response and transporter density. Children with at least one copy of the 9-repeat allele ($n = 4$) showed a better therapeutic response to methylphenidate than 10/10 individuals (4 out of 4 responders versus 2 out of 7 responders in the 10/10 group), and significantly lower dopamine transporter density than 10/10 individuals. This suggests that 10/10 individuals may require more methylphenidate due to increased dopamine transporter density within the brain.

The association between the 3'-UTR VNTR and response to sub-chronic methylphenidate has also been examined in a larger cohort of children and adolescents with ADHD (Purper-Ouakil et al. 2008). Individuals received placebo and varying doses of methylphenidate until no further clinical improvement or limiting side effects occurred (mean dose 31.19 mg/day). They were phenotyped with the ARS, the Stroop test (Stroop 1935), the Trail Making Test (Reitan 1958), and the Continuous Performance Test (Rosvold et al. 1956). Subjects that were homozygotes for the 10-repeat allele had significantly lower treatment responses. However, the final methylphenidate doses reached did not differ across genotype group. These results suggest that the maximal response to methylphenidate may be lower in 10/10 homozygotes and cannot be overcome with larger doses. Similarly, another study of adults with ADHD found that the 10/10 genotype was associated with non-statistically significant lower therapeutic response to 3 weeks of treatment with methylphenidate as assessed by the CGI-S and ARS (Kooij et al. 2008).

Although the results discussed above suggest that the 10-repeat allele may be associated with poor treatment response to methylphenidate, other studies have

reported that therapeutic responses are poorer in patients with the 9-repeat allele. In a double-blind study, Stein et al. (2005) found that children with the 9/9 genotype showed poor response to methylphenidate treatment as measured by ARS and CGI-S when they received higher (36 and 54 mg) but not lower (placebo or 18 mg) doses of methylphenidate. These results suggest that individuals with at least one copy of the 10-repeat allele responded better when given higher doses of methylphenidate. Joober et al. (2007) also performed a double-blind, placebo-controlled fixed-dose study, in which children diagnosed with ADHD were treated with methylphenidate for two weeks (0.5 mg/kg/day) and the effect of 3'-UTR VNTR was assessed. Similar to the results of Stein et al. (2005), children with the 9/10 and 10/10 genotypes showed significant improvement in ADHD symptoms following treatment as measured by the CGI-Parents scale when compared to 9/9 children; no difference was observed between the 9/10 and 10/10 groups. The 10-repeat allele was also associated with better treatment response to methylphenidate following longer term treatment in children diagnosed with ADHD using family-based association testing (Bellgrove et al. 2005). In addition to these studies, three studies have observed no association between the 3'-UTR VNTR polymorphism and methylphenidate response (da Silva et al. 2010; McGough et al. 2006; Roman et al. 2001). Therefore, the reported effects of the 3'-UTR VNTR on treatment response are contradictory and warrant further investigation.

The dopamine transporter has also been studied in relation to stimulant drug abuse. In these studies, the exact doses of drug are unknown and presumed to be high relative to laboratory or clinical studies. A case-control study examined methamphetamine dependence and drug-induced psychosis in a cohort of individuals with methamphetamine use disorder and psychosis (Ujike et al. 2003). No associations were found between the four polymorphisms tested and methamphetamine dependence or psychosis. However, when the patients with prolonged psychosis were analyzed separately from those with transient psychosis, there was a strong association indicating that individuals with nine or fewer repeat alleles of the 3'-UTR VNTR had prolonged psychosis. The 9-repeat allele was also marginally associated with increased risk of cocaine-induced paranoia in cocaine dependent subjects when the frequency of the 9-repeat allele was compared in individuals with and without psychosis (Gelernter et al. 1994). The reasons for these associations are unclear, given the lack of information about the doses that were ingested. The findings may indicate that drug users with the 9-repeat allele of the 3'-UTR VNTR polymorphism are more sensitive to stimulant-induced psychotic phenotypes, or, alternatively, they may have ingested higher doses of the drug to achieve their desired effect, thus increasing their risk for psychosis.

Lastly, the effects of an additional polymorphism in *SLC6A3* and cocaine-related behaviors have also been examined. Guindalini et al. (2006) examined the *SLC6A3* Intron 8 VNTR (Int8 VNTR), which consists of either five or six repeats and is in moderate to low linkage disequilibrium with the 3'-UTR VNTR (Asherson et al. 2007), and found that the 6-repeat allele was associated with cocaine abuse in a case-control study of cocaine abusers. When the 5- and 6-repeat alleles were cloned into expression vectors and transfected into a dopaminergic

cell line, the 6-repeat allele showed increased *SLC6A3* expression following treatment with various stimuli (including cocaine), while the 5-repeat allele showed no change in expression. This study, along with Hamidovic et al. (2010a), suggests that polymorphisms other than the 3'-UTR VNTR may also contribute to responses to stimulant drugs.

SLC6A4

The serotonin transporter (*SLC6A4*; *5-HTT*) is another direct target of stimulant drugs, and has been associated with numerous psychiatric phenotypes including obsessive-compulsive disorder (Bloch et al. 2008), autism (Huang and Santangelo 2008), and depression (Brown and Harris 2008; Kato and Serretti 2008; Risch et al. 2009). The 5-hydroxytryptamine transporter gene-linked polymorphic region (5-HTTLPR), which may be the most widely studied polymorphism in all of psychiatric genetics, has at least two common alleles: a short (S) 14-repeat and a long (L) 16-repeat allele (Nakamura et al. 2000; Rausch 2005). The 5-HTTLPR S allele has been associated with reduced gene expression (Hranilovic et al. 2004) and increased risk for psychiatric phenotypes like depression. The long allele has been further refined into two alleles (L_A and L_G) distinguished by an A→G polymorphism within the first repeat; the L_G allele is reported to have equivalent expression to the S allele (Hu et al. 2006). In addition to 5-HTTLPR, a VNTR in Intron 2 of *SLC6A4* has also been described, which consists of either a 10- or 12-repeat allele. The 12-repeat allele has been associated with increased gene expression (Hranilovic et al. 2004).

We have examined both of the *SLC6A4* polymorphisms mentioned above to determine whether they influence acute responses to amphetamine using our sample of healthy volunteers described in the previous section (Lott et al. 2006). When these two polymorphisms were analyzed separately, individuals homozygous for the 10-repeat allele of the Intron 2 VNTR showed a stronger euphoric response. When the polymorphisms were analyzed jointly, no significant association was observed, but trends in the predicted directions were observed—subjects homozygous for the low expressing alleles (S and 10-repeat) had the strongest responses to amphetamine (for the POMS Anxiety, DEQ Feel Drug, and ARCI Euphoria scales). These data identify a non-significant trend towards decreased expression of the serotonin transporter being associated with increased responses to stimulants.

The serotonin transporter has also been investigated for its role in sub-chronic methylphenidate treatment response in children diagnosed with ADHD (Thakur et al. 2010). In a 2 week trial, children received placebo and methylphenidate at varying doses. Subjects homozygous for the higher expressing L_A had the worst response to placebo but the best response to methylphenidate, heterozygotes were intermediate, and individuals homozygous for the L_S and L_G alleles exhibited the best response to placebo but deterioration with methylphenidate treatment as measured by the CGI-Parents subscale. Thus, lower expression of *SLC6A4* is associated with stronger euphoric, but weaker therapeutic responses to stimulant drugs.

The 5-HTTLPR polymorphism has also been associated with adverse responses in methamphetamine abusers. The 5-HTTLPR polymorphism was tested for association with prolonged methamphetamine-induced psychosis in a case-control study of methamphetamine abusers (Ezaki et al. 2008), utilizing the sample and methods described in the previous section (Ujike et al. 2003). *SLC6A4* was chosen as a candidate gene for this phenotype based on previous neuroimaging findings from the same group showing that methamphetamine abusers had lower serotonin transporter density than non-abusers (Sekine et al. 2006). The lower expressing S allele was significantly associated with methamphetamine psychosis, and in particular with prolonged psychosis. Thus, the S allele (and the L_G allele in the one instance where it was differentiated from the L_A allele) appears to be associated with more intense acute and chronic responses to various different stimulants. Furthermore, it appears that the lower expressing alleles of both the dopamine and the serotonin transporters are associated with greater propensity to methamphetamine-induced psychosis.

SLC6A2

The norepinephrine transporter (*SLC6A2*; *NET*) is a third direct target of stimulant drugs (Sulzer et al. 2005). Variants in *SLC6A2* have been associated with psychiatric phenotypes including depression (Haenisch et al. 2009; Min et al. 2009), antidepressant response (Min et al. 2009), and panic disorder (Lee et al. 2005). Using our sample of healthy adults (Dlugos et al. 2007) we found that rs36017 (C/C genotype) was associated with increased positive mood, as measured by a composite scale composed of “elation” minus “depression”, following amphetamine administration (20 mg), while rs47958 (C/C genotype) was associated with increased elation. Haplotypes containing these SNPs (rs36017-rs10521329-rs3785155, G–C–C and C–C–A) were also associated with increased positive mood. A follow-up study with a larger number of individuals replicated the association between rs36017 and the POMS Elation scale, as well as with the POMS Vigor scale, and identified a new association between the A/A genotype at rs1861647 and these scales (Dlugos et al. 2009a). In addition, a different haplotype than those mentioned above, which was also constructed from rs36017, rs10521329, and rs3785155 (C–C–G), was associated with increased vigor following amphetamine administration. In sum, these studies suggest that multiple variants in *SLC6A2* influence responses to acute amphetamine administration.

5 Neurotransmitter Receptors

DRD2

The dopamine D2 receptor (*DRD2*) has been studied in relation to a variety of psychiatric traits, including schizophrenia (Allen et al. 2008), smoking cessation (David and Munafò 2008) and impulsivity (Eisenberg et al. 2007; Rodriguez-

Jimenez et al. 2006). In particular, the historically named *Taq1A* SNP (also known as rs1800497) has been widely studied. Historical nomenclature describes the A1 (T) and the A2 alleles (C). This polymorphism was initially described as being located in *DRD2*, but is now recognized to be located in a neighboring gene, *ANKK1* (Neville et al. 2004). However, this polymorphism appears to influence the expression of the *DRD2* gene and thereby alter *DRD2* function. In a study of *DRD2* polymorphisms and gene expression in postmortem human brain tissues, rs1800497 was not associated with *DRD2* expression, but the G allele of another SNP in *DRD2*, rs12364283, was found to be associated with enhanced expression (Zhang et al. 2007).

Variation in *DRD2* has been investigated in relation to amphetamine-induced impulsive behavior. Amphetamine increases behavioral inhibition, and the degree of this inhibition varies across individuals (de Wit et al. 2000). We examined the role of several SNP polymorphisms in *DRD2* and the effects of amphetamine on behavioral inhibition utilizing the sample of healthy human subjects that is described above. Individuals were phenotyped with the stop task (Logan et al. 1984), a measure of behavioral inhibition, and genotyped at 12 SNPs in *DRD2* (but not the *Taq1A* polymorphism). One SNP, rs12364283, was significantly associated with better performance on the stop task following 10 mg amphetamine administration in the G/G and A/G groups. This G allele of this SNP, as discussed earlier, is associated with increased *DRD2* expression (Zhang et al. 2007); increased *DRD2* expression may be related to better task performance (Cropley et al. 2006).

Variation in *DRD2* has been investigated for its effect on bupropion treatment response (David et al. 2007). David et al. (2007) found that smokers with the A2/A2 genotype at *Taq1A* who received bupropion (150 mg/day for the first 3 days, then 300 mg/day) were three times more likely to abstain from smoking at the end of the trial compared to A2/A2 subjects receiving placebo. This difference was not observed for the other genotypic groups.

Finally, *DRD2* has also been investigated for association with methamphetamine dependence and methamphetamine-induced psychosis. Šerý et al. (2001) found no association between polymorphisms in *DRD2* and methamphetamine dependence. Ujike et al. (2009) tested 3 SNPs in *DRD2*: 141C insertion/deletion (rs1799732; -/C), Ser311Cys (rs1801028; C/G) and *Taq1A*, and found that the *Taq1A* A2 (C) allele, which was associated with good response to bupropion for smoking cessation, was associated with prolonged methamphetamine psychosis (A2/A2, A1/A2 genotypes). Additionally, they found that the Del/Del and Ins/Del genotypes of 141C insertion allele (rs1799732) were associated with rapid onset of psychotic symptoms (within 3 years of initial abuse). Therefore, the *Taq1A* polymorphism, along with other polymorphisms in *DRD2*, may influence development of stimulant-induced psychosis as well as drug dependence.

DRD4

The dopamine D4 receptor (*DRD4*) has been associated with smoking behavior (Laucht et al. 2008), schizophrenia (Shi et al. 2008), novelty seeking (Munafò

et al. 2008) and impulsivity (Munafò et al. 2008), as well as responses to stimulant drugs. The exon III VNTR polymorphism of *DRD4* is the most commonly studied. This polymorphism has 8 alleles, varying from 2 to 8 and 10 repeats (Lichter et al. 1993). The 7-repeat allele has been associated with ADHD in some studies (Brookes et al. 2006; Faraone et al. 2001; Li et al. 2006), but not in all (Johansson et al. 2008). Because of its association with ADHD, the 7-repeat allele has been the focus of most studies involving stimulant drug responses.

We have investigated the effect of the exon III VNTR polymorphism and acute subjective and physiological responses to amphetamine in our sample (Lee et al. 2006), and found that individuals with a single copy of the 7-repeat allele experienced more rewarding effects of the drug, with increased scores on the POMS Friendliness, POMS Elation, and heart rate scales at 20 mg and on the DEQ More scale at 10 mg and decreased scores on the ARCI Dysphoria and POMS Anxiety scales at 20 mg when compared to individuals lacking the 7-repeat allele. Therefore, the 7-repeat allele may modulate subjective and physiological responses to acute amphetamine administration.

Variation in *DRD4* has also been tested for association with therapeutic response following sub-chronic methylphenidate administration in children diagnosed with ADHD (Hamarman et al. 2004). Children with the 7-repeat allele of the exon III polymorphism required higher doses of methylphenidate (about two times more) to achieve the same therapeutic response over a 2-week period as measured by the CGI-S. Cheon et al. (2006) undertook a similar study and found that the 4-repeat allele was associated with the best treatment responses based on the ARS and the Kiddie-Schedule for Affective Disorders and Schizophrenia-Present and Lifetime Version (K-SADS-PL; Kaufman et al. 1997). Only one individual in that study had the 7-repeat allele, and therefore the previous finding could not be examined; conversely, the 4-repeat allele was not analyzed in the Hamarman et al. (2004) study. Therefore, these two sub-chronic studies found associations with different alleles of the exon III polymorphism and different measures of methylphenidate response.

DRD4 has also been investigated for association with methamphetamine dependence. Chen et al. (2004a) reported a higher frequency of the 7-repeat exon III VNTR allele in methamphetamine abusers as compared to controls, although the association did not reach statistical significance. A subsequent study utilizing the same population examined another VNTR polymorphism in the promoter region of *DRD4*, with a long (240 bp) and short allele (120 bp) (Li et al. 2004). Although no association between methamphetamine abuse and the promoter VNTR was found, when the promoter and exon III VNTR polymorphisms were analyzed as a haplotype, there was a significant association of the 7-repeat allele exon III VNTR and short promoter VNTR allele with methamphetamine abuse. Therefore, the 7-repeat allele of the exon III VNTR increases the dose of methylphenidate needed for therapeutic effects and may also increase the risk for development of methamphetamine abuse.

OPRM1

The μ -opioid receptor, *OPRM1*, has been investigated for a role in the subjective response to acute amphetamine. Stimulation of μ -opioid receptors by endogenous beta-endorphins in the ventral tegmental area increases dopamine release (Spanagel et al. 1992); therefore, variation in *OPRM1* may influence dopamine release and therefore response to stimulants. A commonly studied coding polymorphism within *OPRM1*, Asp40Asn (A118G; rs1799971; A/G), was first described by Bergen et al. (1997) and has been associated with numerous phenotypes, including heroin addiction (Drakenberg et al. 2006), schizophrenia (Šerý et al. 2010), and naltrexone treatment response (Oroszi et al. 2009). This SNP has also been shown to alter binding of beta-endorphin to the receptor (Bond et al. 1998). We examined associations between several SNPs (including rs1799971) and the acute responses to amphetamine on the ARCI Euphoria, Energy and Stimulation scales (Dlugos et al. 2010), and found that two polymorphisms (rs510769 G/G, A/G and rs2281617 C/C) were associated with increased euphoric responses to amphetamine at 10 mg; rs510769 is in strong linkage disequilibrium with rs1799971. The results indicate that variation in *OPRM1* may be related to variation in positive, euphoric responses to amphetamine.

Rs1799971 has been associated with the duration of methamphetamine-induced psychosis in a case-control study of individuals with methamphetamine dependence/psychosis; G/G individuals were more likely to become psychotic within 3 years of their first methamphetamine intake (Ide et al. 2004). In a more recent study using the same population, the previous association did not replicate, but the G/G genotype of an additional SNP in *OPRM1* (IVS2 + G691C; rs2075572; G/C) was associated with both methamphetamine dependence and psychosis (Ide et al. 2006). These results suggest the possibility that additional variants underlie chronic methamphetamine response, although rs1799971 has been the main target of the literature in investigating acute and chronic stimulant responses.

ADORA2A

The adenosine A_{2A} receptor (*ADORA2A*) is a major target of caffeine (Daly and Fredholm 1998) and forms a heterodimer with the dopamine D₂ receptor (Fuxe et al. 2005). We investigated the effect of *ADORA2A* polymorphisms on the anxiety response to amphetamine in healthy human subjects (Hohoff et al. 2005) and found that two polymorphisms (rs5751876; T/T and rs3032740; T_{ins}/T_{ins}), were associated with increased anxiety at the 10 and 20 mg doses.

6 Biosynthetic Enzymes

COMT

Various enzymes involved in the synthesis and breakdown of neurotransmitters have also been analyzed for associations with acute response to stimulant drugs.

One major candidate gene is catechol *O*-methyl transferase (*COMT*). This gene codes for an enzyme that preferentially metabolizes dopamine in the prefrontal cortex, rather than in the limbic and striatal brain regions, where the dopamine transporter is more important for clearance (Chen et al. 2004b). *COMT* contains a *val*→*met* coding polymorphism (*val*¹⁵⁸-*met*; rs4680; G(*val*)/A(*met*)) that has been associated with a variety of phenotypes including personality, cognition, risk for psychiatric disorders (Tunbridge et al. 2006), and pain sensitivity (Andersen and Skorpen 2009). The *met* allele has been associated with 3–4 times lower activity compared to the *val* allele (Lachman et al. 1996).

Polymorphisms in *COMT* have been associated with acute amphetamine response. In a landmark study (Mattay et al. 2003), healthy volunteers completed the Wisconsin Card Sorting Test (WCST; Heaton et al. 1993) after placebo or amphetamine, and underwent fMRI while performing the N-back working memory task (Kirchner 1958). Amphetamine administration reduced prefrontal cortical activity at all working memory loads when compared to placebo in individuals homozygous for the *val* allele. This was interpreted as a more efficient physiological response; this reduction was associated with improved reaction time and no decrease in accuracy on the task. Conversely, amphetamine increased prefrontal cortical activity in the most difficult part of the working memory task in *met* homozygotes. This was interpreted as a reduction in efficiency, because increased prefrontal cortical activity was associated with increased reaction time and decreased accuracy. The authors proposed that amphetamine increased dopamine levels above an optimum level in *met/met* individuals and thus negatively impacted cortical function. In contrast, in *val/val* individuals, amphetamine increased the lower pre-drug dopamine levels so that they were closer to optimal and thus enhanced function. The WCST also showed genotypic effects, with *val/val* subjects improving following amphetamine administration and *met/met* individuals performing worse. Taken together, the results of this study suggest that an optimum level of dopamine in the prefrontal cortex is necessary for efficient prefrontal cortex function, and that this efficiency is in part mediated by *val*¹⁵⁸-*met* genotype. Another study (Hamidovic et al. 2010b) evaluated the effect of *val*¹⁵⁸-*met* on a processing speed task (Digit Symbol Substitution Test; Wechsler 1958) and a reaction time test measuring attention lapses (Deviation from the Mode; de Wit 2009) and reported that when compared to placebo, amphetamine improved DSST performance in *val* homozygotes and heterozygotes, but not in *met* homozygotes. However, *val* homozygotes and heterozygotes exhibited more lapses in attention under placebo conditions, suggesting that the drug improved a preexisting deficit in one genotypic group. Taken together, these findings suggest that individuals with the *met* allele are less sensitive to the cognitive enhancing effects of stimulant drugs.

COMT has been investigated for association with chronic stimulant drug phenotypes. The *val* allele has been associated with polysubstance abuse (Vandenbergh et al. 1997), and in a later case–control study, Li et al. (2004) found that the *val/val* genotype was significantly associated methamphetamine abuse. In addition, Lohoff et al. (2008) found that cocaine-dependent individuals possessed the lower activity *met* allele more often than controls, suggesting that this polymorphism may

play some role in dependence. These results differ from the Vandenberg et al. (1997) and Li et al. (2004) studies described above; Lohoff et al. suggest their finding of the *met* allele association may also be due to linkage disequilibrium or population stratification.

MAOA

Monoamine oxidase A (*MAOA*) degrades monoamine neurotransmitters and has been most commonly associated with aggressive behavior (reviewed in Griorenko et al. 2010). *MAOA* contains a 30 bp VNTR polymorphism within its promoter that consists of 3, 3.5, 4, or 5 repeats (*MAOA-u* VNTR); the 3.5 and 4 repeat alleles are transcribed more efficiently than the 3- or 5-repeat alleles (Sabol et al. 1998). Nakamura et al. (2009) tested the *MAOA-u* VNTR polymorphism for association with methamphetamine-induced psychosis, and found that in males, the 4-repeat allele was associated with having prolonged psychosis rather than transient; this effect was not seen in females.

DBH

Dopamine beta-hydroxylase (*DBH*) catalyzes the conversion of dopamine to norepinephrine (Kaufman and Friedman 1965) and has been associated with ADHD (reviewed in Banaschewski et al. 2010); additionally, a locus near *DBH* was recently associated with smoking cessation (Furberg et al. 2010). Cubells et al. (2000) investigated the effects of *DBH* polymorphisms on cocaine-induced paranoia in patients with cocaine dependence/paranoia, and identified a haplotype found more frequently in cocaine-dependent individuals reporting paranoia, that was also associated with low *DBH* plasma levels in normal subjects (−4784–4803del-444A→G; del-A haplotype). Individuals from the same group later sequenced *DBH* in eight individuals at the phenotypic extremes for *DBH* plasma levels, and identified a putative functional polymorphism (−1021C→T; rs1611115; C/T) accounting for 35–52% of phenotype variance in *DBH* activity (Zabetian et al. 2001); the T allele was associated with low *DBH* plasma levels, and found to be in positive linkage disequilibrium with the del and A alleles associated with low *DBH* plasma levels and paranoia in the Cubells et al. (2000) study (Zabetian et al. 2003). A controlled laboratory study was later conducted in which 31 cocaine-using volunteers acutely self-administered intravenous doses of the cocaine (0, 8, 16, and 32 mg/70 kg body weight) over four sessions (Kalayasiri et al. 2007). The previously identified −1021C→T polymorphism was tested for association with cocaine-induced paranoia, and the low *DBH* plasma level T/T genotype group reported higher paranoia when compared to the C/T and C/C groups.

TPH2

Tryptophan hydroxylase 2 (*TPH2*) catalyzes the rate-limiting step in the synthesis of serotonin, and *TPH2* polymorphisms have been investigated for association with depression, suicidal behavior, bipolar disorder (Zhang et al. 2006) and ADHD (Banaschewski et al. 2010; Brookes et al. 2006). Manor et al. (2008) tested for association of *TPH2* SNPs and acute therapeutic response in children diagnosed

with ADHD, and identified an 8-SNP haplotype (rs1386488, rs2220330, rs1386495, rs1386494, rs6582720, rs1386492, rs4760814, rs1386497; C–G–C–A–A–G–A–C) that was significantly associated with better acute therapeutic response following methylphenidate treatment.

FAAH

Fatty acid amide hydrolase (*FAAH*) has also been studied in relation to acute response to stimulants; *FAAH* degrades several endocannabinoids that bind to cannabinoid receptors (McKinney and Cravatt 2005). Recently, polymorphisms in *FAAH* have been associated with brain response to cannabis (Filbey et al. 2009) and other phenotypes such as obesity (Engeli 2008). Much of the work associating variants in *FAAH* with stimulant response has been done in animal models (e.g., Madsen et al. 2006), and has shown that response to stimulants may also be influenced by the cannabinoid system. We investigated the effect of *FAAH* polymorphisms on subjective responses to acute amphetamine, using the sample of healthy volunteers that has been previously described (Dlugos et al. 2009b). Two SNPs, rs3766246 (C/C genotype) and rs2295633 (C/C genotype), were associated with amphetamine-induced arousal and decreased fatigue at 10 mg but not 20 mg, supporting the hypothesis that the endocannabinoid system may influence the acute response to low doses of amphetamine.

7 Miscellaneous

BDNF

Brain-derived neurotrophic factor (*BDNF*) is a growth factor that is involved in developmental processes (Hyman et al. 1991) and has been implicated in depression (Kato and Serretti 2008), smoking behavior (Furberg et al. 2010), obesity (den Hoed et al. 2010), and body mass index (Shugart et al. 2009). *BDNF* contains a *val*→*met* substitution (*val*⁶⁶-*met*; rs6265; G/A); the *met* allele produces a protein that is improperly secreted from neurons and has been reported to affect memory and hippocampal function (Egan et al. 2003). We examined the effects of *BDNF val*⁶⁶-*met* genotype on subjective responses to acute amphetamine (Flanagan et al. 2006) and found that individuals homozygous for the *val* allele possessed increased feelings of arousal and energy when administered 10 mg amphetamine relative to the other genotype groups. Therefore, the *BDNF val*⁶⁶-*met* genotype may also contribute to subjective responses to stimulant drugs.

CSNK1E

Another enzyme showing association with acute stimulant drug responses is casein kinase 1 epsilon (*CSNK1E*). *CSNK1E* encodes an enzyme that phosphorylates dopamine and cAMP-regulated phosphoprotein (DAARP-32; PPP1R1B), a second messenger that integrates dopaminergic and glutamatergic signaling

(Greengard 2001). We have previously reported that a quantitative trait locus (QTL) for methamphetamine sensitivity co-maps with an expression QTL for *Csnk1e* in mice, suggesting that the latter might cause the former (Palmer et al. 2005). Furthermore, pharmacological inhibition of *Csnk1e* blocks the locomotor response to methamphetamine in mice (Bryant et al. 2009) and rats (unpublished data). Mice with a null allele for *Csnk1e* exhibit paradoxically higher response to methamphetamine (unpublished data). We have also investigated the effects of SNPs in *CSNK1E* on subjective amphetamine response in humans (Veenstra-VanderWeele et al. 2006). The C allele of rs135745, which is located in the 3'-UTR of the gene, was associated with the response to amphetamine at 10 mg (but not 20 mg) as measured by the DEQ Feel Drug and ARCI Euphoria scales. Interestingly, other SNPs in *CSNK1E* have been associated with both heroin addiction in a case-control study (Levrant et al. 2008) and ADHD in a family-based genome-wide association study (Mick et al. 2010), suggesting another possible link between ADHD, sensitivity to stimulants and drug abuse.

CYP2D6

Cytochrome P450 2D6 (*CYP2D6*) is a p450 enzyme that metabolizes methamphetamine (Lin et al. 1997). Otani et al. (2008) investigated the effect of *CYP2D6* polymorphisms in methamphetamine dependent patients in a case-control study, and found the lower activity *CYP2D6**10 and *CYP2D6**14 alleles were under-represented in patients, suggesting that these alleles are protective against development of methamphetamine dependence.

MANEA

An association between rs1133503, located in the 3'-UTR of glycoprotein endo-alpha-1,2-mannosidase (*MANEA*), and cocaine-induced paranoia was the strongest result in a genome-wide scan for variants associated with cocaine dependence and cocaine-induced paranoia (Yu et al. 2008). In a later study from the same group, 11 SNPs in *MANEA* were studied further using a family-based approach in two separate populations (African-American; AA and European-American; EA). Nine of these SNPs were at least nominally associated with cocaine-induced paranoia in the AA population, whereas six of them at least nominally associated in the EA population (Farrer et al. 2009). Additionally, the rs9400554-rs6937479-rs9387522 haplotype (T-T-A) was associated with cocaine-induced paranoia in the pooled AA/EA family-based sample, and the C-A-C haplotype was associated with decreased risk of cocaine-induced paranoia in the pooled sample. No significant associations were found for the cocaine dependence phenotype. Two separate case-control samples (EA and AA) were used for replication. The individual SNP associations from the family-based studies did not replicate in either population sample. However, two associated haplotypes in the replication study contained SNPs that were found in associated haplotypes in the family-based analysis (rs900554 and rs9387522; C-A; T-A); the C-A haplotype was associated with increased risk of cocaine-induced paranoia and cocaine dependence in EA,

and the T–A haplotype was associated with increased risk of cocaine dependence in the AA replication sample.

8 Exploratory Studies

A number of association studies have focused on genes that are not as well studied as those mentioned in the previous section; these more exploratory studies are summarized in Table 2. These studies mostly focus on methamphetamine abuse-related phenotypes. These genes include *CESI* (Nemoda et al. 2009); *DTNBP1* (Kishimoto et al. 2008a); *FZD3* (Kishimoto et al. 2008b); *G72* (Kotaka et al. 2009); *GABRG2* (Nishiyama et al. 2005); *GLYT1* (Morita et al. 2008); *GRM2* (Tsunoka et al. 2010); *GSTM1* (Nakatome et al. 2009); *GSTP1* (Hashimoto et al. 2004); *GSTT1* (Nakatome et al. 2009); *NQO2* (Ohgake et al. 2005); *PDYN* (Nomura et al. 2006); *PICK1* (Matsuzawa et al. 2007); *PROKR2* (Kishi et al. 2010); *SLC22A3* (Aoyama et al. 2006); *SNCA* (Kobayashi et al. 2004) and *SOD2* (Nakamura et al. 2006).

9 Genome-Wide Association Studies

Presently, only three GWAS has been conducted investigating responses to stimulant drugs. One study investigated the therapeutic response to methylphenidate (Mick et al. 2008). Children diagnosed with ADHD ($n = 187$), received varying doses of methylphenidate over a 5-week period, and were phenotyped with the ADHD-RS IV scale and then genotyped at about 300,000 SNPs. No associations reached genome-wide significance, and the strongest associations were not in genes examined in any previous candidate gene studies. Two studies have examined genetic variation underlying stimulant abuse. Uhl et al. (2008) used a case–control nested study to investigate genetic variants underlying methamphetamine dependence, with the goal of identifying genes with an unexpected accumulation of low p -values, and Yu et al. (2008) took a family-based association test (FBAT) approach and scanned evenly spaced markers for association with cocaine dependence and cocaine-induced paranoia. As previously mentioned, the association between *MANEA* SNP (rs1133503) and cocaine-induced paranoia was the most significant result in this study, but after correction for multiple testing this result was not statistically significant.

10 Closing Remarks

The main focus of this review was to investigate sources of genetic variation across a range of different phenotypes and prototypic stimulant drugs. Some of the data are specific to acute or chronic administration and therapeutic or

non-therapeutic responses. Some genes, such as *OPRM1*, were associated with both acute subjective amphetamine liking and methamphetamine dependence. Understanding how these polymorphisms influence various phenotypes has important implications for the study of drug abuse and for our understanding of the pathophysiology and treatment of disorders such as ADHD. Interestingly, several genes discussed here are implicated in both ADHD and ADHD treatment response.

Many of these studies test multiple hypotheses and in some cases underpowered to do so, therefore there is a need for replication of these results. For example, our investigation of healthy human subjects has been used to test many different genetic hypotheses, so that if corrections for multiple testing across all of these different genes were applied, several results would not be considered statistically significant. In an effort to examine the reliability of our results we now have collected almost 400 subjects and are in the process of performing replication analyses.

There is still much to be learned about the polymorphisms reviewed here. The *SLC6A3* 3'-UTR VNTR is particularly illustrative of this, since it has been associated with many phenotypes in quite a number of studies, yet the results appear inconsistent or even contradictory. Resolving these apparent inconsistencies across studies is an urgent goal to better understand the function of the 3'-UTR VNTR and its relation to drug response.

There is significant promise in future technologies that will become available shortly. Genome-wide association studies will remain important in providing unbiased answers. As whole-genome re-sequencing becomes more readily available, it will be possible to study rare variants in more sophisticated ways. Copy number variation is another relatively unexplored type of genetic variation that has been suggested to be important in pharmacogenomics (Johansson and Ingelman-Sundberg 2008). Finally, there are substantial opportunities and challenges in integrating the findings from genetic studies in humans and model organisms (Phillips et al. 2008).

Acknowledgements This work was supported by NIH grants DA02812, DA027545 and DA021336.

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The Cognitive Genetics of Neuropsychiatric Disorders

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Abstract Classification in psychiatry is heavily dependent on clinical symptoms and illness course. This ignores the critical role that cognitive problems play in neuropsychiatric disorders affecting different domains across the lifespan, from ADHD and autism to schizophrenia and Alzheimers disease. At this point, it is unclear whether cognitive mechanisms are specific to disorders, whether multiple processes can contribute to the same disorder, or whether aberrant neural processing can result in many different phenotypic outcomes. Understanding this would allow us to better grasp normal as well as pathological brain function. This could inform diagnostics based on understanding of neurophysiological processes and the consequent development of new therapeutics. Genetics, and the development of genomic research, offers real opportunities to understand the molecular mechanisms relevant to cognition. This chapter defines and describes the main cognitive phenotypes, which are investigated in psychiatric disorders. We review evidence for their heritability and early progress in the field using cytogenetic, linkage and candidate gene-based research methodologies. With high-throughput genomics it is now possible to explore novel common and rare risk variants for psychiatric disorders and

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their role in cognitive function at a genome-wide level. We review the results of early genomic studies and discuss the novel insights that they are starting to provide. Finally, we review the analysis of whole-genome DNA sequence data and the challenges that this will bring for cognitive genomics research.

Keywords Genetics • Phenotypes • Cognition • Genomics

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1 Introduction

Classification in psychiatry is heavily dependent on clinical symptoms and illness course. This ignores the critical role that cognitive problems play in neuropsychiatric disorders affecting different domains across the lifespan, from ADHD and autism to schizophrenia and Alzheimer's disease. At this point, it is unclear whether aberrant cognitive mechanisms are specific to disorders, whether multiple disturbances in cognitive processes can contribute to the same disorder, or whether aberrant neural processing can result in many different phenotypic outcomes. Understanding this would allow us to better grasp normal as well as pathological brain function. This could inform diagnostics based on understanding of neurophysiological processes and the consequent development of new therapeutics.

Genetics, and the development of genomic research, offers real opportunities to understand the molecular mechanisms relevant to cognition. This chapter defines and describes the main cognitive phenotypes, which are investigated in psychiatric disorders. We review evidence for their heritability and early progress in the field using cytogenetic, linkage and candidate gene-based research methodologies. With high-throughput genomics it is now possible to explore novel common and rare risk variants for psychiatric disorders and their role in cognitive function at a genome-wide level. We review the results of early genomic studies and discuss the

novel insights that they are starting to provide. Finally, we review the analysis of whole-genome DNA sequence data and the challenges that this will bring for cognitive genomics research.

2 Selection of Cognitive Deficits in Neuropsychiatric Genetics

Historically, no aspect of cognition (or any human trait for that matter) has received more attention in terms of its underlying genetics basis than general cognitive ability or intelligence. While this history has not been without controversy (cf. the eugenics movement), the genetic basis of intelligence has been studied widely in both the general population and across psychiatric disorders.

A key question in the selection of specific cognitive phenotypes is what extent performance on a given task is heritable. Differing degrees of relationships within families, associated with more or less sharing of genetic material (e.g. monozygotic twins share 100% of genes, dizygotic twins/siblings 50%, and half-siblings 25%) allow estimation of the proportion of individual differences in performance in a population at a given time that are due to genetic differences (termed heritability (h^2)). The availability of twin and population-based disease register data has confirmed the importance of heritability for many psychiatric disorders. Less information has been available to allow interpretation of the heritability of cognitive deficits within twin samples. Because of this practical sampling constraint, most epidemiological studies have used a family-based design to investigate cognitive deficit in healthy relatives of patients. The finding that this group has higher rates of a particular cognitive deficit is taken as suggestive evidence of heritability.

The total variance in general intelligence that can be attributed to genetic influences range from 30 to 80%. Broad domains of cognitive ability, such as verbal and perceptual abilities show similar measures of genetic influence (Posthuma et al. 2001), although the genetic influence on subdomains such as memory tends to be smaller, due to measurement error and variance, but being highly correlated with general intelligence, genetic effects overlap. The heritability of general intelligence increases with age to 70–80% in adulthood. Variations in brain structures such as the density and the volume of grey and white matter, amygdala, and hippocampus, and overall brain volume are thought to be endophenotypes for intelligence. Therefore, genes involved in intelligence might be more closely associated with variations in brain structure and function than to measures of intelligence.

By comparison, selection of specific cognitive functions for analysis in genetic studies has been heavily influenced by the kinds of deficits observed within specific disorders. This selection has also been strongly influenced by the perceived potential of a cognitive function or process as ‘intermediate phenotypes’ or ‘endophenotypes’ for the disorder. The ‘endophenotype’ concept in psychiatry (described by Gottesman and Gould 2003) relates to the identification of heritable quantifiable characteristics, which may be useful targets for genetic studies as they represent some intermediate stage between genotype and clinical disorder. The authors suggested that the potential utility of an endophenotype can be judged against a set of criteria:

1. Association with illness in the population
2. Co-segregation of the endophenotype with illness in families
3. Evidence that this is genetically mediated (i.e. heritable)
4. Evidence that the endophenotype is state-independent (i.e. present whether illness is active or not)
5. That the endophenotype can be measured accurately and reliably
6. The endophenotype is also shared by nonaffected family members of the proband, this may be advantageous for genetic studies.

Across disorders, deficits in executive function, memory function and attentional control have each been a particular focus for research. Clinical awareness of these impairments has increased as it has been established that such deficits are predictive of psychiatric morbidity. In the case of schizophrenia for example, cognitive deficits are present from an early stage of the disorder and often predate the emergence of clinical symptoms (Erlenmeyer-Kimling et al. 2000). They are relatively stable over time and closely related to functional outcome (Green et al. 2004). This includes deficits in general cognitive ability (Donohoe et al. 2011b) and specific deficits in working and episodic memory (Donohoe et al. 2011a) and attentional control (Bellgrove and Mattingley 2008; Donohoe et al. 2011a). Genetic epidemiological research using family and twin studies indicates that some of these deficits may themselves have a substantial genetic component (Goldberg et al. 1990, 1995; Cannon et al. 2000). While cognitive deficits are somewhat correlated with clinical symptoms (for example, negative symptoms in schizophrenia) the amount of variance shared by these variables appears to be small, and cognitive function often emerges as a separate factor from clinical symptoms in factor analysis (Donohoe and Robertson 2003). Taken together these data indicate that cognitive phenotypes in schizophrenia are heritable, trait-like and generally independent of clinical symptomatology.

Mood disorder researchers, investigating bipolar disorder and recurrent depressive disorder have focused less on general cognitive ability and more on memory related phenotypes (Thomas and Elliott 2009; Frodl et al. 2009). In attention deficit hyperactivity disorder (ADHD), attention has inevitably been a particularly important focus, both in terms of orienting attention, sustaining attention, and inhibiting processing of task-irrelevant stimuli (Bellgrove and Mattingley 2008). In autism, impairments in overall cognitive ability are found in 50% of affected individuals. In higher functioning individuals deficits in executive functioning (specifically attention orienting, response inhibition, and set shifting) are reported. The most widely investigated area of cognition in autism relates to impairments in social cognition. Social cognition is the ability to process social information, thought to be fundamentally impaired in autism.

2.1 Social Cognition and Psychiatric Disorder

A significant development in cognitive genetic studies of psychiatric disorders has been the increased focus on the genetics of social cognition that began with research in autism. Social cognition is the sum of those processes that allow

individuals of the same species (conspecifics) to interact with one another (Frith and Frith 2007), specifically it refers to the set of skills that allow us to understand the thoughts and intentions of others and frequently involves the investigation of social information processing, especially its encoding, storage, retrieval, and application to social situations. Essentially it depends upon the exchange of signals, such as speech, facial expression, body posture, and eye gaze (Frith and Frith 2007). Signals such as these can be socially informative in that they tell us what someone may be feeling (Vuilleumier and Pourtois 2007), where they are focusing their attention, and what they are intending to do (Frith and Frith 2006). The ability to process, comprehend and act appropriately to these signals is tantamount to social success and relies on coordination of several cortical regions, e.g. dorsomedial and dorsolateral prefrontal cortices, the paracingulate cortex and the right and left temporoparietal junctions and amygdala (Mitchell 2009). In several psychiatric disorders this ability is impaired leading to social misperceptions, unexpected reactions to and from the person, and social withdrawal (Green et al. 2004), resulting in difficulties with maintaining friendships, employment, and general community functioning (Penn et al. 2008). Alongside these clinical and outcome goals, there is increasing interest in identifying the neural basis underlying social cognitive deficits in psychiatric illness. As such, further research in this domain is viewed as highly valuable (Green et al. 2004).

Currently, social cognition is investigated both in behavioural terms and in terms of neuroanatomy. Some of the tests that fall into the former category include theory of mind (TOM) tests (such as mind in the eyes, Faux pas and hinting task), the hotel task, multiple errands task, Iowa gambling task, the social cognitive skills test (SCST), Mayer-Salovey-Caruso emotional intelligence test (MSCEIT), the Penn emotional recognition task, facial affect recognition, attribution test, and tests of self-control (see Table 1 for task summaries). The latter category however is most often assessed using magnetic resonance imaging (MRI) and involves performing simple social cognitive tests such as facial aspect recognition, and imaging the brain to see what areas are activated during task performance.

To investigate the utility of these measures of social cognition as psychiatric ‘endophenotypes’ (based on the criteria outlined above) we undertook a review of the main tests found in the literature. Search included test name, heritability, twin, sibling, state, independent, co-segregation, brain region, and endophenotype. Secondary search terms used in the event of the primary terms yielding no results included family, trait, dependent, gene, psychiatric, schizophrenia, and autism. A list of the common measures of social cognition reviewed and evidence of their feasibility as endophenotypes is presented in Table 2. As with neuropsychological measures most of the evidence of heritability for each of the measures of social cognition reviewed is derived from evidence that family members of psychiatrically affected probands also show deficits at a level intermediate between cases and healthy controls. These deficits have been associated with a number of candidate risk genes for psychiatric disorders, including 5HT2A, oxytocin, and vasopressin.

Table 1 Definition and usage of various social cognitive tests

	Test	Definition/Usage
Emotion recognition	MSCEIT	Measures emotional intelligence, namely 4 areas: perceiving emotions, facilitating thought, understanding emotions, managing emotions
	Penn emotional recognition task	A computer-based test that includes 96 colour photographs of facial expression of evoked—or felt—emotions: happy, sad, angry, fearful, disgusted, and nonemotional or neutral
	Facial affect recognition	Facial emotion identification test (FEIT) and the facial emotion discrimination test (FEDT). Both use black and white photographs of facial emotions that are presented on DVD
Theory of mind	TOM	A “Theory of mind” (often abbreviated to TOM) is a specific cognitive ability to understand others as intentional agents, that is, to interpret their minds in terms of theoretical concepts of intentional states such as <i>beliefs</i> and <i>desires</i>
	Mind in the eyes	Measure of adult mentalising. The ability to deduce emotion from looking at photographs of people’s eyes
	Faux pas test	The faux pas test ascertained the participants’ ability to identify and understand a social faux pas, and to understand the mental states of the characters (the speaker and the recipient) in a conversation with a social faux pas
	Hinting task	Mental state reasoning, inferring. Measures ability of subject to ‘read between the lines’ in a social context
Attribution Social perception	Attribution test	How one assigns causality in a social context
	Social cognitive skills test (SCST)	Focuses on the assessment of social reasoning skills
Self regulation	Iowa gambling task	Decision making abilities. Looks at trust and the ability to analyse intentions
	Self control test (implicit association test (IAT))	Measure the strength of automatic association between mental representations of objects (concepts) in memory

Table 2 Suitability of social cognition measures as endophenotypes for schizophrenia

Test	First author	N	Associated with illness	Heritability/ Present in other family members	State independent	Co-segregates with illness
Penn emotional recog task	Greenwood et al. (2007)	183 nuclear families ascertained through probands with schizophrenia	Yes	Yes		
	Eack et al. (2010)	70 first-degree relatives of schizophrenia probands; 63 healthy controls	Yes	Yes		
	Calkins et al. (2010)	SZ/Szaff = 610, Relatives = 928, HC = 334	Yes	Yes		Yes
	Gur et al. (2002)	14 patients with schizophrenia and 14 matched comparison subjects	Yes	Yes		
Facial affect recognition	Bediou et al. (2007)	Drug-naïve patients with first-episode schizophrenia (<i>n</i> = 40) and their unaffected siblings (<i>n</i> = 30) compared with controls (<i>n</i> = 26)	Yes	Yes	Yes	
	Erol et al. (2010)	Patients with schizophrenia (<i>n</i> = 57), their unaffected biological siblings (<i>n</i> = 58) and healthy controls (<i>n</i> = 58)	Yes	Yes		
TOM task	McKinnon et al. (2010)	14 bipolar, 14 control	Yes			
	Sabbagh and Seamans (2008)	46 3-year-olds and their parents		Yes		
	Sprong et al. (2007) de Achával et al. (2010)	29 studies (combined <i>n</i> = 1518) 20 Schizophrenia patients, 20 healthy age- and gender-matched individuals, 20 unaffected first-degree relatives of the schizophrenia patients, and 20 healthy individuals matched for age and gender	Yes	Yes	Yes	
Hinting task	Janssen et al. (2003)	43 patients with schizophrenia or schizoaffective disorder, 41 first degree non-psychotic relatives and 43 controls from the general population	Yes	Yes	Yes	
Mind in the eyes	Losh and Piven (2007)	48 parents of individuals with autism (13 of whom were identified as 'aloof'), and 22 control parents	Yes	Yes		Yes

(continued)

Table 2 (continued)

Test	First author	N	Associated with illness	Heritability/ Present in other family members	State independent	Co-segregates with illness
Faux pas	Bora et al. (2005) de Achával et al. (2010)	Forty-three euthymic bipolar patients and 30 controls 20 Schizophrenia patients 20 healthy age- and gender-matched individuals, 20 unaffected first-degree relatives of the schizophrenia patients, and 20 healthy individuals	Yes	Yes	Yes	
Attribution test (IPS/AQ)	Shamy-Tsoory et al. (2009) Lau and Eley (2008)	19 patients, 20 controls Childhood(birth–12 years) (100), School Age (6–12 years) (180), Adolescence (13–17 years) (200), Adulthood(18 years plus) (300), Young Adult(18–29 years) (320)	Yes	Yes	Yes Yes	
Social cognitive skills test (SCST)	Janssen et al. (2006) Scourfield et al. (1999)	23 patients with psychosis, 36 first-degree relatives of patients with psychosis, 31 subjects with subclinical psychotic experiences and 46 normal controls Population-based sample of twins aged 5–17	Yes	Yes		
Iowa gambling task	Scourfield et al. (2004) Coleman et al. (2008) Viswanath et al. (2009)	A population-based sample of twins aged 5–17 8 children with ASD and 8 control children aged 5–13 years 25 unaffected siblings of OCD probands with familial OCD, and 25 individually matched healthy controls	Yes	Yes	Yes	

(continued)

Table 2 (continued)

Test	First author	N	Associated with illness	Heritability/ Present in other family members	State independent	Co-segregates with illness
	Cavedini et al. (2010)	35 pairs of OCD probands and unaffected first-degree relatives and 31 pairs of HC subjects without a known family history of OCD and their relatives	Yes	Yes		
Implicit association test	Egloff and Schmukle (2002)	41 introductory psychology students (33 women and 8 men)	Yes			
	Sasaki et al. (2010)	Individuals scoring High ($n = 26$) and Low ($n = 18$) on Social Anxiety	Yes			
	Glashouwer and de Jong (2010)	Patients ($n = 2,329$) and non-clinical controls ($n = 652$)	Yes		Yes	

While many tests show good evidence that poorer performance is both associated with illness and heritable (at least based on assessments in first-degree relatives) both classical twin studies and studies of co-segregation in families are currently lacking

3 Testing Cognitive Deficits in Neuropsychiatric Genetics

Cognitive neuroscience approaches to investigating both cognitive performance in the healthy population and cognitive disability associated with psychiatric disorders have included both behavioural and neuroimaging paradigms. Behavioural measures include traditional neuropsychological paper and pen tasks (e.g. the child and adult versions of the Wechsler intelligence scales, the Wechsler memory scales) and computer-based tasks (e.g. various versions of the continuous performance task (CPT); the Cambridge automated test battery). The main advantage of these neuropsychological tests is that they generally have well-established psychometric properties that can be easily administered to large groups of varying ability, a key requirement for cognitive genetics research. Imaging modalities have included both functional magnetic resonance imaging (fMRI) during tasks of memory, attention and—more recently— affective processing, with the high spatial resolution it offers, and electroencephalogram recordings (EEG), with the high temporal resolution it provides. While, previously, individual groups tended to specialise in one main approach, groups working in this area increasingly aim to integrate findings across modalities. In our own group for example, we have used high density EEG and structural MRI to follow up on specific associations between individual genetics variants and neuropsychological test performance, such as the contribution of abnormal sensory level processing to cognitive performance deficits (Donohoe et al. 2008).

Across disorders, available family and twin studies generally support the concept that the cognitive deficits associated with these disorders are themselves inherited. In the case of schizophrenia, the heritability of a number of specific deficits have been confirmed by twin studies, including general cognitive ability, working memory, and episodic memory (Goldberg et al. 1990, 1995; Cannon et al. 2000; Kremen et al. 2006; Touloupoulou et al. 2007, 2010). The heritability of deficits in general cognitive ability and working memory in particular appear to overlap strongly with the heritability of illness risk in schizophrenia (Touloupoulou et al. 2007) although not to the point of suggesting an identity between the genetic architecture of schizophrenia and cognition. In autism research, deficits in general cognitive ability, executive functioning, and processing of socially relevant information (e.g. face recognition) have consistently been reported (Adolphs et al. 2001). The most consistent familial traits are language and communication skills, insistence on sameness and non-verbal IQ (Szatmari et al. 2007). In ADHD, cognitive studies find widespread abnormalities in children and adults with the disorder, particularly in the executive function domains of response inhibition/delay aversion and sustained attention (Willcutt et al. 2005) and in reaction time variability (Klein et al. 2006), one of the most discriminating between ADHD and controls. Attention, and in particular, sustained attention, deficits are prominent in ADHD, with unaffected siblings performing better than their affected siblings but worse than healthy controls (Slaats-Wilemse et al. 2005). Sustained attention has been examined in preschool twins using the Amsterdam neuropsychological tasks set with correlations higher for MZ compared to DZ twins

suggesting a heritability of 0.46–0.72 for this measure (Groot et al. 2004). Yet many proposed endophenotypes in ADHD have not been examined in classical population-based twin studies. It is not yet clear if these impairments are related or perhaps have separate aetiological pathways. Kuntsi et al. (2010) examined this in a large sample of ADHD probands and their siblings using a multivariate familial factor analysis approach. The results suggest that two familial phenotypes, mean reaction time/reaction time variability and omission/commission errors on the go/no-go task reflect 85–98 and 13% of the familial variance of ADHD, respectively. The findings for response time variability reflect recent population twin data (Wood et al. 2010).

4 Cytogenetics and Cognitive Phenotypes

Cytogenetic methods to investigate chromosomes microscopically, initially allowed gross examination of chromosomes, incorporating staining methods which identified cytogenetic bands on chromosomes; these evolved to molecular hybridization methods, known as fluorescent in situ hybridization (FISH). Cytogenetics methods contribute to localising susceptibility genes by identifying chromosomal abnormalities such as deletions or translocations, which segregate with a disorder in families or are found more commonly in cases than in control populations.

A number of these (described further below) have been identified for childhood disorders affecting cognitive ability and mental health, including sex chromosome aneuploidies such as 47XYY, Klinefelters and Turner's syndrome; fragile X, Williams' syndrome, and autism. In adult-onset disorders, two cytogenetic abnormalities have provided consistent evidence that the chromosomal regions involved contribute to disease risk. One is a balanced translocation $t(1;11)(q42.1;q14.3)$ that co-segregates with schizophrenia within a large Scottish pedigree. The other involves one of the commonly known chromosomal abnormalities, small interstitial deletions of chromosome 22q11. The latter cause velo-cardio facial syndrome (VCFS), which increases the risk of psychosis by at least 20-fold, and also presents with cranio-facial dysmorphism and congenital heart disease. In carriers of these cytogenetic abnormalities, both general and specific cognitive effects are associated, including language deficits (Williams syndrome, autism), specific learning deficits (e.g. mathematical ability in Turner's syndrome, Williams syndrome), and memory deficits (Schizophrenia); these are discussed next.

4.1 *Cytogenetics of Childhood-Onset Neuropsychiatric Disorders*

Sex chromosome aneuploidies (SCAs), where there is variation in the number of sex chromosomes, are the most common chromosomal abnormalities occurring in 1 per 400 births. The commonest syndromes include the 47XYY syndrome,

Klinefelter syndrome (47XXY), and Turner's syndrome (XO). Frequently deficits in speech and language, motor skills, and educational achievement are reported in relation to all SCAs although in general affected individuals usually live independently and the severity of cognitive deficits is not clear (Leggett et al. 2010). Males with 47XYY frequently present normally and the phenotype may go undetected. In general in SCAs, the presence of an additional X chromosome is frequently associated with lowered verbal IQ. Klinefelter syndrome is associated with executive function deficits (Samango-Sprouse 2010). The absence of an X chromosome in girls is also associated with cognitive deficits. Turner syndrome (XO), an SCA affecting girls is characteristically associated with visual-spatial and executive function deficits and social cognitive impairments (Hong et al. 2009). Mathematical learning difficulties are prevalent in Turner syndrome which may relate to deficits in executive function or spatial deficits although this is not clear (Mazzocco 2009). Non-verbal learning deficits are present in 80% of girls with Turner syndrome. The syndrome is also associated with social cognitive deficits such as facial emotion recognition and gaze perception that are also reflected by reported neuroanatomical abnormalities in the amygdala (Burnett et al. 2010).

William Beuren Syndrome (WBS) is a contiguous gene syndrome arising from a deletion of approximately 1.5–1.8 Mb affecting 28 genes on chromosome 7q. It is associated with a characteristic physical phenotype and a cheerful, sociable manner. Individuals with WBS frequently have intellectual disability but present with superficially good language ability. They present with poor visuo-spatial ability (Pober 2010). A microduplication syndrome of the same region has also been described with somewhat contrasting phenotypic characteristics; intellectual disability is also reported; speech and language deficits are more common while visuo-spatial functioning is spared (Merla et al. 2010). Both the duplication and deletion syndromes are reported to be associated with ADHD and autistic type deficits; social deficits and aggression are more characteristic of the duplication syndrome. A clear relationship between specific genes within the affected region and the cognitive phenotype has not been determined, however, several interesting candidate genes exist. Frizzled drosophila homologue of 9 (FZD9) is expressed in the hippocampus and null mouse mutants have defects in memory and learning although WBS-related phenotypic features are not universally reported (Ranheim et al. 2005). The Syntaxin 1A (STX1A) gene is a brain-expressed protein implicated in presynaptic vesicle docking. Expression levels of this gene are correlated with intelligence in WBS (Gao et al. 2010). LIM kinase 1 (LIMK1) is a serine protein kinase predominantly expressed in the nervous system and implicated in synapse formation (Scott and Olson 2007). LIMK1 knockout mice have abnormalities in the dendritic spine morphology and have impaired fear conditioning and spatial learning (Meng et al. 2002). CAP-Gly domain-containing linker protein 2 (CLIP2) is expressed widely in the nervous system, including the hippocampus. Knockout mice have growth deficits, motor coordination deficits and altered synaptic functioning in the hippocampus (Hoogenraad et al. 2002). Clinically, patients with deletions not including CLIP2 have reduced visuospatial impairments and less deficits in gross and fine motor skills (Ferrero et al. 2010).

Fragile X syndrome, is the commonest cause of inherited intellectual disability. Not specifically a cytogenetic abnormality, it is caused by a trinucleotide repeat expansion (CGG) in the FMR-1 protein on the X chromosome. The condition is associated with autistic type difficulties in social interaction, e.g. gaze avoidance, social anxiety, poor pro-social behaviour, and peer relationships. Decreased pre-frontal brain activation is reported and reduced frontal and temporal cortical volumes are reported compared with control subjects or individuals with idiosyncratic autism (Hoefl et al. 2011). Declines in IQ and adaptive function are also reported in longitudinal studies with greater declines in males (Fisch et al. 2010). Declines in central executive and verbal working memory are also reported in later life in males. Working memory deficits correlate with the length of the CGG expansion (Cornish et al. 2009). Attentional difficulties, anxiety, aggression, and mood symptoms are also reported (Boyle and Kaufmann 2010).

Prader-Willi syndrome (PWS) is a rare genetic syndrome associated with nonexpression of a set of genes on the paternal chromosome 15q11–q13. This may be due to deletion of the region on the paternal chromosome (70%) or uniparental disomy (UPD) (25%) involving the maternal chromosome. The region is imprinted and also associated with Angelman's syndrome caused by lack of expression of the *UBE3A* gene originating on the maternal chromosome. Individuals with PWS have a characteristic physical phenotype and usually intellectual disability (approximately 70% of cases), however, they often have strengths in visual perception, reading, and vocabulary. Strengths in verbal IQ are reported in UPD compared with carriers of the deletion (Copet et al. 2010). Deficits in auditory processing are reported as are weaknesses in mathematics, visual, and auditory memory and auditory attention. Larger deletions in the region tend to be associated with greater impairments in cognitive ability (Milner et al. 2005). In Angelman syndrome, deletions are associated with greater cognitive impairment than UPD and cognitive skills are stronger than motor or language skills with relative strengths in the area of receptive language (Gentile et al. 2010).

Down syndrome is caused by Trisomy for all or part of chromosome 21. Associated with learning disability and early onset dementia, the cognitive profile of individuals with Down syndrome can be heterogeneous, but relative strengths in receptive language compared with expressive language are reported.

4.2 Cytogenetics of Adult-Onset Neuropsychiatric Disorders

Cytogenetic studies have also implicated both a relatively common deletion of chromosome 22q11.2 and a complex, rare translocation as increasing risk for psychotic disorders. The gene disrupted-in-schizophrenia-1 (*DISC1*) was identified at a balanced translocation between chromosome one and eleven, which strongly co-segregates with mental illness in a Scottish family. Although the index case had a diagnosis of conduct disorder, within the family 18 of 29 (70%) translocation carriers had a major mental illness (schizophrenia, bipolar disorder or major

depressive disorder), whereas none of 38 non-translocation carriers had such a diagnosis (Blackwood et al. 2001). Outside this family, there is equivocal support for involvement of the gene as a risk factor for major mental disorders (Porteous et al. 2006) and there has been substantial investigation of its role in neurodevelopment. At a cognitive level, within the affected Scottish family there was no difference in mean IQ between 12 relatives with the translocation and eight with a normal karyotype. Despite this, unaffected, as well as affected, translocation carriers had abnormalities on event-related potential (ERP) P300-typical of schizophrenia and bipolar disorder-suggesting that specific cognitive processing deficits may be important.

Using methods (described in Sect. 5), Finnish researchers have identified linkage between a locus containing the DISC1 gene and impaired working memory dysfunction (Gasperoni et al. 2003) and visual working memory (Hennah et al. 2005). Two subsequent studies have reported association between markers at the DISC1 locus and impairments in verbal learning and memory (Cannon et al. 2005); working memory (Callicott et al. 2005); and reduced hippocampal volumes (Cannon et al. 2005; Callicott et al. 2005). In assessing the evidence implicating hippocampal dysfunction in DISC1 it is worth noting that different genetic variants have been investigated, with potentially different phenotypic effects (e.g. conflicting evidence for involvement of a DISC1 SNP and cognitive ageing) but none of these have been confirmed as functionally causal.

The 22q11.2 deletion syndrome (22q11.2DS; also known as velo-cardio-facial syndrome (VCFS)) is caused by the most common large micro deletion in the human genome and has an incidence of one in ~4000 live births. The phenotype is highly variable and can affect multiple organs and tissues, but carriers have a 30-fold increased risk of schizophrenia and an increased rate of other psychiatric phenotypes including ADHD and autistic spectrum disorders. Many, but not all, carriers fall into the lower than average IQ (FSIQ 70–75) range or have mild learning disability. Most studies, particularly in children, report higher scores on verbal than non-verbal tasks. Investigation of these non-verbal deficits across age groups indicate impairments in comparisons of magnitude and time duration, which implicate parietal and frontal circuitry underlying attentional and numerical cognition (reviewed, Karayiorgou et al. 2010). However, the ability to inhibit processing of extraneous information is also critical and impaired performance on inhibition tasks is also reported in affected children. Impairments in other aspects of inhibition including prepulse inhibition and reduced frontal lobe activation during the mismatch negativity paradigm have also been reported. These findings indicate that how information is selected or inhibited in attentional processing is important in the non-verbal deficits evident in this syndrome. Some brain regions are either structurally enlarged or reduced in children with 22q11.2DS compared to healthy controls. There appears to be cortical thinning and reduced cortical gyrus complexity in frontal and parietal cortices. The few reported functional and connectivity studies broadly confirm the findings of the neurocognitive tests with performance on arithmetic and spatial attention tasks correlating with frontal and parietal connectivity and functional measures.

There are a number of ways in which loss of genes at this locus could contribute to the expression of these cognitive phenotypes. First, under-expression of a single gene at this locus could exert a major effect on the phenotype. Second, the effect could be the result of under-expression of a number of proximally located genes. Finally, the microdeletion could unmask the effects of one or more recessive mutations. How these effects can be functionally investigated in an animal (e.g. mouse model) is beyond the scope of this chapter, but is reviewed in Karayiorgou et al (2010). The example of 22q11.2DS identified several key issues in cognitive genetics. Unlike the risk variants reported in the association studies of DISC1, 22q11.2DS is uncommon, so ascertainment of sufficient samples for neurocognitive studies is challenging. Compared to DISC1, we are more informed as to the potential molecular mechanisms involved making this locus more tractable for functional studies in model systems. Unlike the DISC1 example, which implicates one gene, the 22q11.2DS locus potentially involves more than 25 genes, which is more biologically challenging. In the next section, we consider how advances in genotyping technology have expanded the range of risk loci available for investigation in cognitive genetic studies of neuropsychiatric disorders.

5 Linkage and Candidate Gene-Based Approached to Cognitive Genetics

The identification of common polymorphic genetic markers shared in individuals within populations was a key step for molecular genetics. This made possible two new approaches to identify genes or genetic loci, which caused or contributed to phenotypes or traits. The first, genetic linkage analysis, capitalised on genetic maps of markers across the genome to investigate large single pedigrees or multiple families affected with a given disorder. Statistical evidence that specific markers co-segregated with illness, could be used to map loci linked to this disorder. Linkage analysis is most effective when there is a strong correlation between the phenotype being measured and the inferred genotype at the markers being tested for co-segregation. Further fine-mapping of linked loci, could then implicate specific risk genes. This approach was highly successful for Mendelian disorders, including many with cognitive phenotypes, but less successful for disorders with a more complex genetic aetiology and weaker correlation between phenotype and inferred genotype.

The second strategy, which could use either case-control or family-based designs, directly targeted genetic markers at specific genes which were implicated in a disorder through understanding of the disease process (functional candidate gene studies) or targeted likely candidates within a region implicated by linkage or cytogenetic studies (positional candidate genes studies). Association studies are based on populations instead of pedigrees, and compare frequencies of marker alleles in affected individuals versus unaffected individuals from the general population. Challenges in identifying such candidate genes include uncertainty

regarding the biological aetiology of the disorder, and limited study power to detect common alleles of small effects. This power issue becomes even more relevant for the genome-wide association studies (GWAS) described in the Genomics section.

5.1 Linkage and Candidate Genes Studies for Disorders of Childhood

5.1.1 ADHD

Genetic studies of the ADHD clinical phenotype have followed the traditional pathway of twin and adoption studies to establish heritability, followed by genetic linkage studies, association studies based on candidate genes and more recently genome wide association studies (GWAS) and analysis of rare structural variants (detailed below).

Results from the handful of published linkage studies using the ADHD diagnosis as a phenotype (Fisher et al. 2002; Arcos-Burgos et al. 2004; Asherson et al. 2008; Rommelse et al. 2008), show some degree of overlap for regions on chromosomes 5p, 9q, 16q, and 17p if nominally significant findings are considered; however, no regions have achieved genome-wide significance using strict criteria. Attempts have been made to include neurocognitive measures in the linkage analysis of ADHD to identify quantitative trait loci linked to these traits. This approach assumes that the neurocognitive impairments in ADHD index a latent trait, or traits, that overlap, at least in part, with the heritable pathophysiology of ADHD. Taking this approach, Rommelse et al. (2008) examined candidate endophenotypes in a genome-wide search for susceptibility loci for ADHD. This study found strong evidence for linkage to 2q21.1 and 13q12.11 for measures of motor timing and digit span measures, respectively, incorporating ADHD symptoms as covariates. Doyle et al. (2008) identified a region on 3q13 showing suggestive evidence for linkage to several neurocognitive traits and inattention symptoms in ADHD. None of these studies have produced convincing evidence for linkage, making the presence of one or a small number of gene variants with a large effect on a given trait measure unlikely.

Early candidate gene studies focused on a range of candidate genes with some a priori evidence for a potential role in ADHD pathophysiology. As with the linkage studies described above, putative ADHD risk variants at candidate genes have been tested for association against clinical and cognitive variables. Kebir et al. (2009) reviewed 29 studies examining 10 genes (DRD4, DAT1, COMT, DBH, MAOA, DRD5, ADRA2A, GRIN2A, BDNF and TPH2) in relation to neuropsychological traits relevant for ADHD. For DAT1, there are conflicting results in relation to omission and commission errors, but more consistent findings that increased reaction time variability (Bellgrove et al. 2005a) and abnormalities in spatial attention (Bellgrove et al. 2005b) are associated with the ADHD associated

10-repeat variant. Against what might have been expected, several studies (Manor et al. 2002; Bellgrove et al. 2005a, b, c), reported better performance on tests of attention in children with the 7-repeat DRD4 variant previously shown to be associated with ADHD. This is a similar finding to studies in psychoses where the GWAS identified *ZNF804A* risk variant (discussed below) may identify a patient subgroup with relatively spared cognitive performance, suggesting that the DRD4 risk variant indexes a pathophysiological pathway to ADHD not mediated by poor performance on cognitive measures. The effect of the 7-repeat variant was confined to children with ADHD and not seen in controls and in a more recent study (Johnson et al. 2008), spectral analysis of reaction time variability supported the hypothesis that the association of greater variability was with the absence of the 7-repeat allele and was also specific to ADHD. Other ADHD candidate genes examined in relation to cognitive function include the X-linked steroid sulfatase gene where case reports of deletions have been found in cases with neurodevelopmental disorders associated with abnormal cognitive function and ADHD (Doherty et al. 2003). Stergiakouli et al. (2011) showed that ADHD associated risk variants were associated with inattentive symptoms and poor performance on verbal IQ and comprehension subtests in ADHD subjects but not controls.

5.1.2 Autism Spectrum Disorders

A number of linkage regions, replicated in two or more studies have been identified in autism 2q21–33, 3q25–27, 3p25, 4q32, 6q14–21, 7q22, 7q31–36, 11p12–13, 17q11–21 (reviewed by Freitag et al. 2010). The chromosome 2q region had marginally stronger evidence for linkage in individuals with language delays (Buxbaum et al. 2001). A further study stratifying linkage analyses found nonsignificant evidence of linkage in individuals with IQ > 70 and those with delayed language (Liu et al. 2008). Multiple candidate gene studies have been conducted but none have been reliably replicated. Consequently, we have focused here on genetic studies in social cognition where a convergence of evidence appears to support the role of neuropeptides oxytocin and vasopressin.

Nonapeptides and Social Cognition

Oxytocin (OXT) and vasopressin (AVP) are highly conserved neuropeptides with marked diversity in the regulation of their receptors. Modulated significantly by sex steroids, they are likely to have sexually dimorphic effects and are therefore of interest for further investigation in disorders such as autism, which show marked gender bias (M:F ~ 4:1). Considerable evidence from animal literature has implicated nonapeptides oxytocin and vasopressin in social behaviour (Insel 2010) relating particularly to pair bonding, maternal care, social recognition, and response to threat (reviewed by (Donaldson and Young 2008). Administration of oxytocin to humans is associated with reduced anxiety, alteration in parenting behaviour, increases in prosocial behaviour (e.g. trust, generosity, altruism and

betrayal aversion), reduction in gaze aversion, improved mentalisation, and differential amygdala activity in fMRI in response to face perception and changes in social memory (Skuse and Gallagher 2011). Studies reporting association with OXT and autism are inconsistent and no evidence for association has emerged from GWAS studies. However, beneficial effects of exogenous oxytocin on core ASD symptoms have been reported offering the potential possibility of new therapeutics (Green and Hollander 2010). Vasopressin has been implicated in aggression, social recognition, and pair bonding. The AVP receptor 1A gene is highly conserved. It contains genetic variation reported to influence species-specific differences in pair bonding in animal studies (Wang and Aragona 2004). Genetic variation in AVPR1A has been investigated in ASD with variable reports of association (Kim et al. 2002; Wassink et al. 2004; Yirmiya et al. 2006). One of the variants in humans has demonstrably reduced expression (Tansey et al. 2011) possibly demonstrating a functional route for genetic association with the gene in autism. The wide-ranging effects of these neuropeptides on human social behaviour are perhaps not specific to autism and may potentially have utility in a wider range of psychiatric disorders with social cognitive deficits.

5.1.3 Intellectual Disability

Notwithstanding the high heritability of intelligence, little progress has been made in identifying loci reliably linked or associated with intelligence in normal population samples. There are exceptions, such as the association, predominantly in older people, between ApoE variants and general cognitive ability, episodic memory, and executive function, and the weak associations reported with COMT and BDNF variants accounting, if true for only a very small proportion of the variance in intelligence. In contrast, several hundred genes are known to be associated with intellectual disability (Chelly et al. 2006).

Genetic forms of ID are divided into syndromic ID, characterised by associated clinical, radiological, metabolic or biological features, and non-syndromic ID in which cognitive impairment represents the only manifestation of the condition. The distinction might be helpful for clinical purposes, but recent phenotype-genotype studies are blurring the distinction. Causes of ID are extremely heterogeneous and include environmental forms (e.g. premature birth, perinatal brain ischaemia or foetal alcohol syndrome), disorders due to chromosomal abnormalities (including sub-microscopic copy number variation discussed below) and conditions due to monogenic causes or dysregulation of imprinted genes. About 50% of cases with moderate or severe ID have a definable cause with a lower percentage in milder cases. Taken together, the emerging genetic findings in ID are suggesting a neurobiology around synaptogenesis, synaptic activity, and plasticity with aberrant length and density of dendritic spines a frequent histological finding. Genetic defects and biochemical abnormalities have been described in several pathways that feed into synaptic function including the RhoGTPase signal

transduction pathway; with loss of function at its components PAK3, OPHN1, TM4SF2, and FMRP leading to LD and the Ras/MAPK transcription signaling cascade; with the genes NF1, RKS2, CBP, and PAK3 involved in ID. Many of these genes when mutated in animal models affect learning and memory processes that require gene transcription and translation of proteins.

5.2 Linkage and Candidate Genes Studies for Disorders of Adult-Onset

5.2.1 Schizophrenia

A meta-analysis of more than 30 schizophrenia linkage studies by Ng et al. (2009), suggests the involvement of multiple chromosomal loci in schizophrenia susceptibility. Few investigations focussed on cognitive phenotypes in linkage analysis of such families have been reported. One example, reported by Almasy et al. 2008, investigated 43 families and identified significant linkage to the chromosome 5q region for the cognitive phenotypes of abstraction and mental flexibility. A more recent study of 557 sibling pairs of Han Chinese ethnicity identified association with the 12q24.32 locus and undegraded CPT hit rate (Lien et al. 2010). Rather than focussing on individual neurocognitive phenotypes, Hallmayer et al. (2005) identified families with co-segregation of more pervasive cognitive deficits and identified linkage in these families to chromosome 6p24, a region that had previously been implicated in schizophrenia risk across multiple studies (Straub et al. 1996). Individual markers at this locus have also been associated with deficits in CPT performance in the Han Chinese population detailed above (Lin et al. 2009). The lack of consistency in measured phenotypes makes replication, and final interpretation of these results difficult. Very few studies of this type have been reported for other psychiatric disorders. For example, in bipolar disorder, where many large-scale linkage analyses have also been reported the focus has been on dividing families according to clinical rather than cognitive covariates.

Candidate gene studies of cognitive phenotypes have received much wider attention. This was prompted by studies of functional variants at two candidate genes, the catechol-O-methyltransferase (COMT) and brain derived neurotrophic factor (BDNF) genes. From both animal and human studies it is known that reduced dopamine in prefrontal cortex is associated with impaired performance on cognitive testing. Deficits in working memory can be reversed with dopamine agonists, but both very low and very high levels of dopamine activity are associated with impaired prefrontal cortex function. The COMT gene appears to be key to dopamine catabolism in the prefrontal cortex (PFC) and is a logical candidate for investigation in disorders such as schizophrenia as well as for studies of cognition. Numerous association studies for neuropsychiatric phenotypes have been performed with equivocal results, with several large

meta-analyses failing to find association with schizophrenia (Munafò et al. 2005). In the first cognitive study, Egan et al. (2001) reported that the high-activity val allele was associated with poorer performance on the wisconsin card sort test (WCST) and reduced efficiency of physiological response of the dorso-lateral prefrontal cortex during a working memory task. This finding has received consistent replication and a meta-analysis of 12 studies supports the original WCST finding (Barnett et al. 2007). The WCST is a complex problem solving task with many cognitive components and several authors have tried to identify simpler tests for specific components of this task involving cognitive stability and flexibility. Because COMT influences the ratio of activation of D1/D2 receptors and D4 receptors are known to have an effect on PFC function, variants in these three genes have also been investigated in cognitive studies of adults with no clear findings emerging.

BDNF is known to have an important role in learning and regulates activity-dependent synaptic plasticity necessary for short- and long-term memory storage (Alonso et al. 2002). Studies of BDNF have focused on a valine (val) to methionine (met) substitution in the 5' region of the gene, which decreases BDNF activity-dependent secretion. Association between the variant and neuropsychiatric clinical phenotypes has been reported, although replication of these findings has been inconsistent. A meta-analysis of studies across multiple phenotypes reported that the met allele was associated with risk for eating disorders and schizophrenia and a protective effect for substance-related disorders (Gratacos et al. 2007). This may have represented a publication bias. On the basis of BDNF's known role in hippocampal function, it has been suggested that met allele carriers may have impaired performance on memory tasks. Supporting this hypothesis Egan et al. (2003) identified poorer episodic memory performance, a disruption in normal hippocampal fMRI findings during a working memory task and reduced hippocampal levels of a marker for neuronal function in schizophrenia patients and healthy controls. The same year, Hariri et al. (2003) showed that met-carriers had reduced hippocampal engagement during encoding and retrieval of a spatial task and also made more recognition errors on the task. Subsequently, it was reported that val/met heterozygotes have lower hippocampal volumes than carriers of the val/val genotype (Pezawas et al. 2004). Within schizophrenia patients, met-carriers are also reported to have poorer medial temporal lobe-related performance and correspondingly smaller temporal and occipital lobar grey matter volume (Ho et al. 2006). Although negative studies have been reported, most of the available data supports a modest association between the met allele and reduced cognitive performance.

With the emergence of putative candidate genes from the schizophrenia literature these were also systematically investigated for cognitive phenotypes. The list of investigated genes includes Neuregulin-1, Dysbindin, and DAO. Unlike the case of COMT and BDNF, no clear functional variants have been identified at these genes and multiple studies have reported different risk variants, alleles, or haplotypes. This makes direct comparison of studies, which have often also examined different phenotypes, difficult (reviewed in Gill et al. 2010).

5.2.2 Cognitive Ageing and Psychiatric Disorders

Association between an increased risk for Alzheimers disease and the $\epsilon 4$ allele of the apolipoprotein E (ApoE) gene is one of the most robust findings in complex disorder genetics. Carriers of one copy of this allele are 3–4 times more likely to develop late-onset Alzheimers disease (LOAD), but carriers of two copies have a more than 10-fold increase in risk (Farrer et al. 1997). Multiple studies have shown that APOE $\epsilon 4$ is associated with cognitive decline in patients with AD. More recently it has been demonstrated that this allele has an effect on cognitive performance in non-patient groups as well. Carriers of the risk allele perform significantly poorer on tests of episodic memory, global cognitive ability, executive functioning, and perceptual speed although the effect sizes are small. There was no difference between carriers and non-carriers for tests of attention, primary memory, verbal ability, and visuo-spatial skill. For the domains where differences were detected these differences became more significant with increased age (Wisdom et al. 2011). These data lead researchers to explore the effects that other candidate genes may have on cognitive ageing. A study investigating 10 candidate genes (including BDNF, COMT and DISC1) for cognitive function failed to identify association with performance and cognitive ageing in the Lothian birth cohort of over a 1,000 Scottish 70-year old individuals (Houlihan et al. 2009).

6 Application of Genomics Methods

Genome-wide association studies (GWAS), by combining advances in high-throughput genotyping platforms and understanding of common genetic variation in populations, allow most common variation in the genome to be tested in a single, usually case–control experiment. Testing all genes is a powerful hypothesis-free approach and GWAS have proven remarkably successful at identifying common risk variants for complex human disease. However, this comes with a significant multiple testing burden and requires large sample sizes—in the thousands or tens of thousands—to identify what are typically modest gene effects (Corvin et al. 2009).

In psychiatry as with other medical specialties, this requirement has driven collaboration, for example, the formation of the psychiatric GWAS consortium, which is currently performing meta-analysis of GWAS data for schizophrenia, bipolar disorder, autism, recurrent major depression, and ADHD (Psychiatric GWAS Consortium Coordinating Committee 2009). For many of these disorders novel susceptibility loci have been identified (detailed below). GWAS can also inform on the genetic architecture of psychiatric disorders: identified loci appear in many cases to increase risk across traditional diagnostic boundaries; a substantial proportion of schizophrenia and bipolar disorder risk may involve thousands of overlapping gene variants of small effect (International Schizophrenia Consortium 2009a, b) whereas smaller numbers of variants of large effect appear involved in autism susceptibility.

GWAS platforms were designed to assay common genetic variation and SNPs with a population frequency of at least 5%, however, rare or even unique genetic variants are much more frequent in the human genome. Until now our ability to test for involvement of this type of variation in human disease ‘the rare variant common disease hypothesis’ has been very limited. GWAS platforms and custom-designed microarrays using comparative genomic hybridization (CGH) have allowed investigation of one class of rare genetic variation, namely, copy number variation (CNV). This provides some insight into likely challenges for cognitive research in analysing rare variants: an issue that will become more relevant with the increasing availability of whole-genome sequence data.

6.1 Genome-Wide Association Studies

6.1.1 GWAS for Adult-Onset Psychiatric Disorders

Schizophrenia

Nine schizophrenia loci have been identified: the zinc finger protein 804A (*ZNF804A*) gene on chromosome 2q32; at the major histocompatibility complex (MHC) region on chromosome 6p21–22; upstream of the neurogranin (*NRGN*) gene on chromosome 11q24; at the transcription factor 4 (*TCF4*) gene on chromosome 18q21; downstream from microRNA miRNA137 on chromosome 1p21.3; a 0.5 Mb gene-rich region on chromosome 10q24.32; an intronic SNP in the CUB and sushi multiple domains 1 (*CSMD1*) gene; and common variants in gene deserts on chromosomes 2q32.3 and 8p21.3. Additionally, there is substantial evidence for overlap in particular between schizophrenia and mood disorders, as the schizophrenia risk variant at *ZNF804A* has also been implicated in bipolar disorder (Williams et al. 2011) and the *CACNA1C* variant, identified in bipolar disorder has also been implicated in schizophrenia and recurrent major depression (Green et al. 2010). A logical next step is for cognitive studies to test whether specific neural mechanisms underlie this susceptibility and its clinical expression.

The psychosis risk variant at gene *ZNF804A* has received the most attention to date. Esslinger et al. 2009 investigated the influence of the risk variant (rs1344706) on cortical activity within, and connectivity between, regions during working memory (N-back task) and emotional recognition task performance in a sample of 115 healthy controls. Differences in functional connectivity, but not regional activation, were observed. They reported reduced connectivity in the dorso-lateral prefrontal cortex (DLPFC) between and within hemispheres, but also increased connectivity between the hippocampal formation (HF) and the DLPFC, and between the amygdala and the HF, orbitofrontal cortex and prefrontal cortex. They have subsequently reported evidence for involvement of the variant in aberrant brain activation during social information processing using a theory of mind (TOM) task (Walter et al. 2011) and in state-independent inter-hemispheric

processing (Esslinger et al. 2009). Their interpretation that the risk allele has a deleterious effect on cognitive performance has been questioned by several more recent studies. First et al. (2010) found and replicated evidence for better cognitive performance on working memory and episodic memory tasks—which involve the DLPFC and HF—in patient carriers of the risk allele. This effect was not present in controls. In a subsequent study, of a different patient group, the authors found relatively larger hippocampal volumes in risk allele carriers (Donohoe et al. 2011a, b). These data suggest that the *ZNF804A* risk variant may identify a patient subgroup with relatively spared cognitive performance, but possibly more social deficits. Although we note that several smaller equivocal studies have also been reported (Lencz et al. 2010; Balog et al. 2010). Further studies particularly in the domain of social cognition would be useful.

Of the other identified schizophrenia loci, some are large and implicate many genes (e.g. the MHC region) and some map to gene deserts which are not obvious candidates for involvement in cognitive functioning. Of the identified genes, neurogranin (*NRGN*) is the most compelling target as it plays an important role in calcium–calmodulin signaling, is abundantly expressed in hippocampus, and *NRGN* knockout mice have severe deficits in hippocampus-dependent tasks. However, a recent study by Donohoe et al. (2011b) failed to identify a strong relationship between the risk allele and neuropsychological performance in either patient or control populations on general cognitive ability, verbal episodic and working memory, spatial episodic or working memory or attentional control.

Bipolar Disorder

In bipolar disorder the best supported loci are the calcium channel, voltage-dependent, L type, alpha 1C subunit (*CACNA1C*), and the ankyrin 3, node of Ranvier (*ANK3*) genes (Ferreira et al. 2008). Perceived wisdom is that cognitive deficits are less prominent in bipolar disorder, although a range of abnormalities have been reported including altered identification of emotional stimuli (e.g. facial expression), processing speed, working memory, and impairments in sustained attention (Arts et al. 2010). Cognitive phenotypes in bipolar disorder may vary with mood state and have received less attention in family studies (to estimate heritability) than equivalent studies in schizophrenia. Of the common risk variants identified in GWAS studies, the *CACNA1C* gene has received the most attention as non-synonymous mutations of *CACNA1C* cause Timothy syndrome, a multi-organ disorder, which includes cognitive impairments (Splawski et al. 2005). *Cacna1c* heterozygous female mice also demonstrate mood-related phenotypes including reduced risk-taking behaviour and increased anxiety (Dao et al. 2010).

Association studies have been reported in case and control populations between the risk allele at rs1006737 across different neuropsychological testing paradigms and imaging studies. The first reported study (Krug et al. 2010) found reduced semantic verbal fluency with increased activation of the left inferior frontal gyrus and left precuneus in healthy male subjects who carried the risk variant. The authors acknowledged that the data to suggest reduced verbal fluency in euthymic

bipolar disorder is limited and their results require independent replication. To date five imaging studies have been published, with somewhat mixed results. An initial report of reduced grey matter volume in healthy UK carriers of this risk variant (Kempton et al. 2009) did not replicate in a much larger German control sample (Franke et al. 2010). The latter reported association between genetic variation at the gene and reduced brainstem volume, but this was with different SNPs at the gene and requires independent replication. Studies using blood-oxygenation level-dependent (BOLD) functional magnetic resonance imaging (fMRI) have targeted circuits potentially implicated in bipolar disorder. A study of patients and controls, by Bigos et al. (2010) implicated circuits putatively involved in bipolar disorder and schizophrenia. They identified a trend for increased hippocampal activity during emotional processing and also greater prefrontal cortical activity during a working memory paradigm, a pattern previously associated with putative schizophrenia risk variants. A smaller study of healthy controls targeted increased limbic activity as a bipolar disorder phenotype and identified association with increased amygdala activity in response to reward. Erk S. Meyer-Lindenberg et al. (2010) in studying brain activation during a declarative memory task identified reduced bilateral hippocampal activation during episodic memory recall and reduced coupling between left and right hippocampal regions in 110 healthy subjects.

Alzheimers Disease

Until recently, APOE was the only gene known to increase risk of the common form of Alzheimer's disease with late-onset. A number of new susceptibility variants have been identified by GWAS including novel loci for late-onset Alzheimers disease (AD) implicating the genes clusterin (CLU), the phosphatidylinositol-binding clathrin assembly protein gene (PICALM), the complement receptor gene (CR1), the bridging integrator 1 gene (BIN1), the ATP-binding cassette (ABC) transporter gene (ABCA7), MS4A gene, CD2AP, CD33 and EPHA1 (Hollingworth et al. 2011). These genes appear to be involved in different processes, with five being linked to immune function; four to cell membrane endocytosis; and three being involved in lipid processing. As of yet none have been tested for involvement in specific aspects of cognitive functioning or their role in cognitive ageing.

6.1.2 GWAS for Childhood-Onset Psychiatric Disorders

Data from GWAS studies to date have not generally supported the linkage regions previously identified for childhood-onset disorders. A region on chromosome 5p.14 harbouring cadherin genes CDH9 and CDH10 showed evidence for association in one study (Wang et al. 2009). A SNP at 5p.15 was located close to a taste receptor gene (TASR1) and a member of the semaphorin family (SEMA5A), the latter family of genes are implicated in axonal guidance (Weiss et al. 2009). Genome-wide evidence for association at the MACROD2 gene, a gene of uncertain function,

was detected in a further study (Anney et al. 2010). Stratification in the latter analysis based on IQ and verbal status did not reveal statistically significant genome-wide evidence of association.

Results of the PGC consortium ADHD meta-analysis have yet to be reported and smaller GWAS studies have yet to provide genome-wide significant evidence of association.

6.2 Studies of Structural Genomic Variation in Neuropsychiatric Disorders

As recently as 2004, it was discovered that submicroscopic deletions or duplications involving the gain or loss of entire DNA segments (e.g. from a thousand to several million bases) are common (Sebat et al. 2004) and may encompass more than 10% of the average human genome. This technology also made it possible to test for the involvement of inherited or de novo CNVs in disease. It rapidly became evident that CNVs play an important role in susceptibility to neurodevelopmental disorders including autism (Sebat et al. 2009), learning disability, schizophrenia (Walsh et al. 2008), and ADHD (Williams et al. 2010). For autism, CNVs have been identified in at least 10% of cases, implicating a large number of novel genomic loci and risk genes (reviewed Betancur 2011). In schizophrenia, the seven most established CNVs collectively account for ~2–4% of susceptibility (reviewed Sebat et al. 2009). An excess of CNVs have also been identified in ADHD including a duplication of chromosome 16p13.11. Data for other neuropsychiatric disorders is more equivocal, with the exception of bipolar disorder where a large study of 1,697 cases and 2,806 controls found no evidence of either an increased total burden or association with individual CNVs (Grozeva et al. 2010).

6.2.1 Cognitive Studies of Structural Genomic Variants and Rare Mutations Implicated in Psychiatric Disorders

The results thus far challenge many preconceptions about the clinical entities being investigated. The same CNVs are being implicated in different disorders. For example, in autism although 70% of affected individuals have learning disability, almost all of the implicated CNVs have also been associated with learning disability. Many of the CNVs identified in schizophrenia have also been implicated in autism: the duplication reported in ADHD has been reported across all three disorders, being most common in ADHD patients with co-morbid learning disability. This diverse phenotypic expression extends beyond psychiatric phenotypes. The 1q21.1 deletion reported in schizophrenia (International Schizophrenia Consortium 2009a, b) is now known to be associated with a broad array of paediatric developmental abnormalities

including autism, but also heart defects and cataracts (Mefford et al. 2008). These findings suggest that at least a subset of patients with clinical disorders have underlying rare genomic disorders.

Candidate gene studies of cognitive phenotypes have received much wider attention. This was prompted by studies of functional variants at two candidate genes, the catechol-O-methyltransferase (COMT) and brain derived neurotrophic factor (BDNF) genes. From both animal and human studies it is known that reduced dopamine in prefrontal cortex is associated with impaired performance on cognitive testing. Deficits in working memory can be reversed with dopamine agonists, but both very low and very high levels of dopamine activity are associated with impaired prefrontal cortex function. The COMT gene appears to be key to dopamine catabolism in the prefrontal cortex (PFC) and is a logical candidate for investigation in disorders such as schizophrenia as well as for studies of cognition. Numerous association studies for neuropsychiatric phenotypes have been performed with equivocal results, with several large meta-analyses failing to find association with schizophrenia (Munafo et al. 2005). In the first cognitive study, Egan et al. (2001) reported that the high-activity val allele was associated with poorer performance on the wisconsin card sort test (WCST) and reduced efficiency of physiological response of the dorso-lateral prefrontal cortex during a working memory task. This finding has received consistent replication and a meta-analysis of 12 studies supports the original WCST finding (Barnett et al. 2007). The WCST is a complex problem solving task with many cognitive components and several authors have tried to identify simpler tests for specific components of this task involving cognitive stability and flexibility. Because COMT influences the ratio of activation of D1/D2 receptors and D4 receptors are known to have an effect on PFC function, variants in these three genes have also been investigated in cognitive studies of adults with no clear findings emerging.

Extrapolating from examples of rare genomic disorders that have already been classified we could suspect that some will share core phenotypic features (e.g. Williams syndrome and Prader-Willi/Angelman syndrome) but others (e.g. chromosomal deletions involving 1q21.1 and 22q11.21) may have such a wide range of phenotypic expression as to encompass several clinical syndromes (Lee and Scherer 2010). Not all CNVs are causative: some are likely to have more modest effects on risk and probably interact with other genetic or environmental risk factors.

What does this mean for cognitive studies? We know that some of the implicated loci can have a profound effect on cognitive functioning leading to significant general learning disability. Would a general screen of IQ in clinical populations identify these CNV carriers? Or do some CNVs cause more subtle cognitive deficits? Plausibly, specific CNVs may impact on, and be extremely informative about, discrete aspects of cognitive functioning. Performing such studies is problematic because of the numbers involved.

Lessons can be learned from investigation of chr22q11.21, but many of the validated CNVs have a frequency of less than one in 500 in case samples, having large-scale collaboration and common assessment methods will be essential. Some consensus on batteries of tests is also essential to allow comparison

across CNVs, which may be important in identifying where the phenotypic effects may be a consequence of involvement of the same molecular mechanism or pathway. Obvious targets for investigation are loci where a single, or small number of genes are disrupted as these are currently most tractable for other functional studies. CNVs are often complex and both gain or loss of function at a locus may need to be considered. For example, mutation of the gene encoding methyl-CpG-binding protein-2 (MECP2) causes Rett syndrome a neurodevelopmental disorder almost exclusively found in females, however, duplications or triplications of the gene are associated with developmental delay or learning disability in males.

7 Future Directions: New Phenotypes and New Approaches

A major development in cognitive genetics disorders has, as with psychiatric genetics studies, been the move from single gene studies to genome-wide studies of the genetic architecture of cognition. Examples of these studies are already published (e.g. Need et al. 2009; Davis et al. 2010) with several more in progress. These studies are likely to replicate difficulties found in genome-wide association studies (GWAS) of psychiatric disorder, in particular the low power to detect small effects in samples. Current estimates (Visscher and Montgomery 2009) suggest the need for more than 10,000 samples to detect small effects in psychiatric disorders; power to detect variants with an odds ratio of 1.1–1.2 (the effect size associated with already identified common variants) are likely to require even larger samples. If the effect size of ‘cognition’ genes is similar this requires us to plan experiments on a scale that is far beyond what was traditionally thought of as large. One example of an attempt to achieve the required scale is the COGENT consortium, which has to date amassed data on ~7,000 neuropsychological phenotyped healthy participants for the purposes of a genome-wide association study of general cognitive ability or ‘g’. In advance of the results of these experiments, the evidence that cognitive phenotypes are unlikely to be much less complex in its genetic architecture than seen in psychiatric disorders should cause us to expect meaningful but small advances in our understanding of cognitive genetics.

At the same time, the increased ability to investigate rare genetic effects is identifying many interesting candidate genes for further cognitive studies. These may be particularly important as they may each be associated with significant risk. For studies of CNV carriers, the logistics of performing studies of sufficient statistical power is challenging, although not insurmountable as we know from the 22q11.2DS studies. One major question will be whether specific CNVs have distinct cognitive or clinical effects. This will be addressed by ongoing large studies in Europe where carriers of these variants are being targeted for neurocognitive and neuroimaging studies (Meyer-Lindenberg 2010).

This type of analysis will be even more challenging when there are large data resources available with full genome sequencing information. We already know that in the human population, many disease genes can show dozens or even

hundreds of independent mutations. Mutations that have more severe functional consequences (i.e. to the production of the gene product) may be lethal or associated with severe phenotypes, such as microcephaly. Research from single gene cognitive disorders suggests that, depending on the functional consequence of the mutation, there may be a range of phenotypic outcomes, which include much more subtle phenotypes (Walsh and Engle 2010). Many of the genes known to be building blocks for important neurodevelopmental processes are likely to harbour mutations with these types of genetic effects. This offers a potential framework for understanding and potentially grouping molecular mechanisms at the level of the gene, or in pathways based on understanding of molecular neurodevelopment. The potential to perform cellular and animal studies as well as the ability to return to families, which carry mutations should offer fascinating insights into the genomic underpinnings of cognitive function. In performing such studies we must not lose sight of the fact that the molecular programmes that govern and modify neurodevelopment are affected by stochastic variation and actively influenced by the world that surrounds us. To maximise what we can learn about cognitive genomics we will need to understand the impact of environment.

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Behavioral Genetics of Neurodegenerative Disorders

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Abstract Alzheimer's disease (AD) is the most common cause of dementia in the elderly, and is typically characterized by memory loss. In addition, during the disease progression, most patients develop behavioural and psychiatric symptoms of dementia (BPSD). Frontotemporal Lobar Degeneration (FTLD) is the most frequent neurodegenerative disorder with a presenile onset. It is characterized mainly by behavioural disturbances, whereas memory is conserved. The two major neuropathologic hallmarks of AD are extracellular Amyloid beta ($A\beta$) plaques and intracellular neurofibrillary tangles (NFTs). Conversely, in FTLD the deposition of tau has been observed in a number of cases, but in several brains there is no deposition of tau but instead a positivity for ubiquitin. In some families these diseases are inherited in an autosomal dominant fashion. Genes responsible for familial AD include the Amyloid Precursor Protein (β -APP), Presenilin 1 (PS1) and Presenilin 2 (PS2). The majority of mutations in these genes are often associated with a very early onset (40–50 years of age). Regarding FTLD, the first mutations described are located in the Microtubule Associated Protein Tau gene (MAPT). Tau is a component of microtubules, which represent the internal support structures for the transport of nutrients, vesicles, mitochondria and chromosomes within the cell. Mutations in MAPT are associated with an early onset of the disease (40–50 years), and the clinical phenotype is consistent with Frontotemporal Dementia (FTD). Recently, mutations in a second gene, named progranulin (GRN), have been identified in some families with FTLD. The pathology associated with these mutations is most frequently characterized by the immunostaining of TAR DNA Binding Protein 43 (TDP-43), which is a transcription factor.

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The clinical phenotype associated with *GRN* mutations is highly heterogeneous, including FTD, Progressive Aphasia, Corticobasal Syndrome, and AD. Age at disease onset is variable, ranging from 45 to 85 years of age. The majority of cases of AD and FTLN are however sporadic, and likely several genetic and environmental factors contribute to their development. Concerning AD, it is known that the presence of the $\epsilon 4$ allele of the Apolipoprotein E gene is a susceptibility factor, increasing the risk of about 4 fold. A number of additional genetic factors, including cytokines, chemokines, Nitric Oxide Synthases, contribute to the susceptibility for the disease. Some of them also influence the risk to develop FTLN. Variability in serotonin transporter gene could influence the development of BPSD. In this chapter, current knowledge on molecular mechanisms at the basis of AD and FTLN, as well as the role of genetics, will be presented and discussed.

Keywords Dementia · Frontotemporal lobar degeneration (FTLN) · Behavioural disturbances · Alzheimer’s disease (AD) · Behavioural and psychological symptoms of dementia (BPSD)

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1 Alzheimer’s Disease and Frontotemporal Lobar Degeneration

Alzheimer’s disease (AD) is the most common cause of dementia in the elderly, with a prevalence of 5% after 65 years of age. The disease was originally described by Alois Alzheimer and Gaetano Perusini in 1906, and it is clinically characterized by a progressive cognitive impairment, including impaired judgment, decision-making and orientation, often accompanied, in later stages, by behavioural and psychiatric symptoms of dementia (BPSD), including agitation, hallucinations and delusions, as well as language impairment. Loss of noradrenergic and serotonergic neurons contributes to the emergence of BPSD. Conversely, loss of cholinergic neurons is the major contributor to the cognitive impairment of AD (Palmer 1996).

The two major neuropathologic hallmarks of AD are extracellular beta-amyloid ($A\beta$) plaques and intracellular neurofibrillary tangles (NFTs). The production of

$A\beta$, which represents a crucial step in AD pathogenesis, is the result of the cleavage of a bigger precursor, named Amyloid precursor protein (APP), which is over-expressed in AD (Griffin 2006). $A\beta$ forms highly insoluble and proteolysis resistant fibrils known as “senile plaques”.

Neurofibrillary tangles are composed of the tau protein. In healthy controls, tau is a component of microtubules, which are the internal support structures for the transport of nutrients, vesicles, mitochondria and chromosomes within the cell. Microtubules also stabilize the growing axons, which are necessary for the development and growth of neurites (Griffin 2006). In AD, tau protein is abnormally hyperphosphorylated and forms insoluble fibrils, which originate deposits within the cell.

Frontotemporal lobar degeneration (FTLD) occurs most often in the presenile period, and age at onset is typically 45–65 years, with a mean in the 50 s. Distinctive features in FTLD concern behaviour, including disinhibition, loss of social awareness, overeating and impulsiveness. Despite profound behavioural changes, memory is relatively spared (Hou et al. 2004). Conversely to AD, which is more frequent in women, FTLD has an equal distribution among men and women. The current consensus criteria (Neary et al. 1998) identify three clinical syndromes: Frontotemporal Dementia (FTD), Progressive nonfluent Aphasia (PA) and Semantic Dementia (SD), which reflect the clinical heterogeneity of FTLD. Frontotemporal dementia is characterized by behavioural abnormalities, whereas PA is associated with progressive loss of speech, with hesitant, nonfluent speech output (Scarpini et al. 2006), and SD is associated with loss of knowledge about words and objects (Neary et al. 1998). This variability is determined by the relative involvement of the frontal and temporal lobes, as well as by the involvement of right and left hemispheres (Rosen et al. 2002).

Despite the majority of AD and FTLD are sporadic and likely caused by the interaction between genetic and environmental factors, so far it was observed that clinically typical AD and FTLD can cluster in families and be inherited in an autosomal dominant fashion, suggesting a genetic cause.

2 Familial AD

Autosomal dominant AD forms are characterized by mutations in three genes: Amyloid Precursor Protein (β -APP; Goate et al. 1991), Presenilin 1 (PS1; Sherrington et al. 1995) and Presenilin 2 (PS2; Levy-Lahad et al. 1995).

In 1987, a region of linkage with AD was reported on the long arm of chromosome 21, which encompassed a region harboring the β -APP gene, a compelling candidate for AD (Tanzi et al. 1987). The gene is located at chromosome 21q21.22 and encodes for a transmembrane protein that is normally processed into amyloid fragments. In 1991, the first missense mutation in β -APP was reported (Goate et al. 1991). Since then, 32 different mutations have been described in the β -APP gene in 89 families (<http://molgen-www.uia.ac.be>). All these mutations

cause amino acid changes in putative sites for the cleavage of the protein, thus altering the APP processing, such that more pathological A β 42 is produced (Hardy and Selkoe 2002). Interestingly, the chromosome 21, in which β -APP resides, is triplicated in Down syndrome and most of the cases manifest also AD by the age of 50. Post-mortem analyses of Down's patients who die young show diffuse intra-neuronal deposits of A β , suggesting that its deposition is an early event in cognitive decline. The recent discovery of an extra copy of the β -APP gene in familial AD (Rovelet-Lecrux et al. 2006) provides further support that increased A β production can cause the disease.

The other two genes causing familial AD are *PS1* (14q24.3) and *PS2* (1q31-q42). Presenilins represent a central component of γ -secretase, the enzyme responsible for originating A β from the C-terminal fragment of the APP protein. Mutations in presenilins also alter APP cleavage, leading to an increased production of A β 42. So far, 179 mutations in *PS1* have been identified and 14 additional mutations have been found in the homologous gene *PS2* (<http://molgen-www.uia.ac.be>).

Most variants in *PS1* are missense mutations resulting in single amino-acid substitutions. Some are more complex, for example, small deletions or splice mutations. The most severe mutation in *PS1* is a donor-acceptor splice mutation that causes a two-aminoacid substitution and an in-frame deletion of exon 9. However, the biochemical consequences of these mutations for γ -secretase assembly seem to be limited (Bentahir et al. 2006; Steiner et al. 1999). All these clinical mutations are likely to cause a specific gain of toxic function for *PS1*, determined by an increase of the ratio between A β 42 and A β 40 amyloid peptides, thus indicating that presenilins might modify the way in which γ -secretase cuts APP.

Mutations in presenilins occur in the catalytic subunit of the protease responsible for determining the length of A β peptides therefore generating toxic A β fragments. However, presenilins have also non-proteolytic functions (Baki et al. 2004; Huppert et al. 2005), the disruption of which might also contribute to familial AD pathogenesis.

Despite several carriers develop the disease early (40–50 years of age) with a typical AD phenotype, in some cases patients carrying the same mutation develop signs and symptoms resembling FTD instead of AD (Bruni et al. 2010). In addition, other mutations are associated with myoclonus, seizures, bilateral spasticity, parkinsonian features or ataxia (Larner and Doran 2009).

3 Sporadic AD

3.1 Genes Influencing the Risk to Develop AD

Risk genes are likely to be numerous, displaying intricate patterns of interaction with each other as well as with non-genetic variables, and-unlike classical Mendelian (“simplex”) disorders-exhibit no simple mode of inheritance. Mainly due to

this reason, the genetics of sporadic AD has been labeled “complex” (Bertram and Tanzi 2005).

The gene mainly related to the sporadic forms of AD is the Apolipoprotein E (*APOE*) (Corder et al. 1993), which is located at chromosome 19q13.32 and was initially identified by linkage analysis (Pericack-Vance et al. 1991). The relationship between *APOE* and AD has been confirmed in more than 100 studies conducted in different populations. The gene has three different alleles, *APOE*2*, *APOE*3* and *APOE*4*. The *APOE*4* allele is the variant associated with AD. Longitudinal studies in Caucasian populations have shown that carriers for one *APOE*4* allele have a two-fold increase in the risk for AD (Raber et al. 2004). The risk increases in homozygous for the *APOE*4* allele, and this allelic variant is also associated with an earlier onset of the disease.

Several linkage studies have been performed, giving rise to additional candidate susceptibility loci at chromosomes 1, 4, 6, 9, 10, 12 and 19. In particular, promising loci have been found at chromosome 9 and 10 (Grube et al. 2006; Li et al. 2006). Recently, a wide genome analysis identified variants at *CLU* (which encodes clusterin or ApoJ) on chromosome 8 and *PICALM* in chromosome 11 associated with AD (Harold et al. 2009). Data on *CLU* were replicated in an independent study, which, in addition, demonstrated that *CRI*, encoding the complement component (3b/4b) receptor 1 and locate on chromosome 1, is associated with AD (Lambert et al. 2009).

Also, a large number of candidate genes studies have been performed in order to search a robust risk factor for the sporadic form of the disease. Several studies were mainly focused in genes clearly involved in the pathogenesis of AD such as genes encoding for inflammatory molecules or involved in the oxidative stress cascade, both considered major factors in AD pathology. One of the strongest evidence of the role played by genetic variants in inflammatory molecules to increase the risk of AD involves the Interleukin-1 (IL1) complex, which map at chromosome 2q14-21 and includes *IL1- α* , *IL1- β* , and IL1R antagonist protein (*IL-1Ra*), all of which have a number of polymorphisms found to be associated with AD in several case-controls studies carried out in different populations (Du et al. 2000; Grimaldi et al. 2000; Papassotiropoulos et al. 1999). Several polymorphisms in *IL-6*, which is a potent inflammatory cytokine but has also regulatory functions, have been investigated so far. The *IL6* gene is located at chromosome 7p21 and polymorphisms exist in the -174 promoter region and in the region of a variable number of tandem repeats (VNTR), which is located in the 3' untranslated region. Both of them have been found associated with AD in case-controls studies (Licastro et al. 2003; Nicoll et al. 2000). Investigation of Tumor Necrosis Factor- α (*TNF α*) polymorphisms was initiated because genome screening suggested a putative association of AD with a region on chromosome 6p21.3, which lies within 20 centimorgans of the *TNF α* gene. Furthermore, other polymorphisms located in the promoter region of *TNF α* have been associated with autoimmune and inflammatory diseases (Collins et al. 2000).

As with *TNF α* , investigations of the role of α -2macroglobulin (*A2M*) were initiated as a result of screening studies of the genome. In this case, linkage was

found in the region of chromosome 1p, where *A2 M* and its low-density lipoprotein receptor are found. Blacker et al. (1998) tested for association of polymorphisms with AD showing a strong involvement of this gene in its pathogenesis.

Moreover, polymorphisms in chemokines have been investigated with regard of susceptibility of AD. Monocyte Chemoattractant Protein-1 (*MCP-1*) and *RANTES* genes have been widely screened in different neurodegenerative diseases (Huerta et al. 2004). The distribution of the *A-2518G* variant was determined in different AD populations with concordant results (Fenoglio et al. 2004; Combarros et al. 2004a) showing no evidence for association of this variant in AD compared with controls. Moreover, Fenoglio et al. (2004) found a significant increase of *MCP-1* serum levels in AD carrying at least one *G* polymorphic allele. Therefore, the *A-2518G* polymorphism does not seem to be a risk factor for the development of AD, but its presence correlates with higher levels of serum *MCP-1*.

RANTES promoter polymorphism $-403 A/G$, found to be associated with several autoimmune diseases, was examined in AD population, failing to find significant differences between patients and controls (Huerta et al. 2004).

CCR2 and *CCR5* genes, encoding for the receptors of *MCP-1* and *RANTES* respectively, have been screened for association with AD. The most promising variants involve a conservative change of a valine with an isoleucine at codon 64 of *CCR2* (*CCR2-64I*) and a 32-bp deletion in the coding region of *CCR5* (*CCR5Δ32*), which leads to the expression of a non-functional receptor. A decreased frequency and an absence of homozygous for the polymorphism *CCR2-64I* were found in AD, thus suggesting a protective effect of the polymorphic allele on the occurrence of the disease (Galimberti et al. 2004); conversely, no different distribution of the *CCR5Δ32* deletion in patients compared with controls were shown (Galimberti et al. 2004; Combarros et al. 2004b).

A mutation scanning of the Interferon- γ -induced protein 10 (*IP-10*) gene coding region has been performed in AD patients searching for new variants. The analysis demonstrated the presence of two previously reported polymorphisms in exon 4 (*G/C* and *T/C*), which are in complete linkage disequilibrium, as well as a novel rare one in exon 2 (*C/T*). Subsequently these SNPs have been tested in a wide case-control study but no differences in haplotype distribution were found (Venturelli et al. 2006).

Other genes under investigation are related to oxidative stress, a process closely involved in AD pathogenesis. In this regard, genes coding for the nitric oxide synthase (*NOS*) complex have been screened. The common polymorphism consisting in a *T/C* transition (*T-786C*) in *NOS3*, previously reported to be associated with vascular pathologies, has been tested in AD, but no significant differences with controls were found. Nevertheless, expression of *NOS3* in PBMC either from patients or controls seems to be influenced by the presence of the *C* polymorphic allele, and is likely to be dose dependent, being mostly evident in homozygous for the polymorphic variant. The influence of the polymorphism on *NOS3* expression rate supports the hypothesis of a beneficial effect exerted in AD by contributing to lower oxidative damage (Venturelli et al. 2005).

An additional variant in *NOS3* gene has been extensively investigated in AD patients, although the results are still controversial. It is a common polymorphism

consisting in a single base change (*G894T*), which results in an aminoacid substitution at position 298 of *NOS3* (Glu298Asp). Dahiyat et al. (1999) determined the frequency of the Glu298Asp variant in a two-stage case–control study, showing that homozygous for the wild-type allele were more frequent in late onset AD. However, studies in other populations failed to replicate these results (Crawford et al. 2000; Monastero et al. 2003; Sánchez-Guerra et al. 2001; Tedde et al. 2002).

More recently Guidi et al. (2005) correlated this variant with total plasma homocysteine (tHcy) levels in AD patients and controls, demonstrating that the Glu/Glu genotype is correlated with higher levels of tHcy, which represent a known risk factor for AD (Seshadri et al. 2002), and its frequency was increased in AD patients (Guidi et al. 2005). Thus, the mechanism by which this genotype contributes to increase the risk in developing AD could be mediated by an increase of tHcy.

However, *NOS-1* is the isoform most abundantly expressed in the brain. Recent genetic analyses demonstrated that the double mutant genotype of the synonymous *C276T* polymorphism in exon 29 of the *NOS1* gene represents a risk factor for the development of early onset AD (Galimberti et al. 2005), whereas the dinucleotide polymorphism in the 3'UTR of *NOS1* is not associated with AD (Liou et al. 2002). To date, the promoter region of *NOS1*, located approximately 200 kb upstream of these polymorphism, has not been investigated for susceptibility to AD. Due to this reason and to further explore a possible association of *NOS1* polymorphisms with AD, the distribution of a functional polymorphisms and a VNTR was analyzed in a case-control study (Galimberti et al. 2008). The functional variant considered is located in exon 1c, which is one of the nine alternative first exons (named 1a–1i), resulting in *NOS1* transcripts with different 5'-untranslated regions (Wang et al. 1999). Three SNPs have been identified in exon 1c, but only the *G-84A* variant displays a functional effect, as the *A* allele decreases the transcription levels by 30% in in vitro models (Saur et al. 2004). Regarding exon 1f, a VNTR polymorphism has been recently reported in its putative promoter region, termed *NOS1* Ex1f-VNTR. This VNTR is highly polymorphic and consists of different numbers of dinucleotides (B-Q), which, according to their bimodal distribution, have been dichotomized in short (B-J) and long (K-Q) alleles for association studies. Both Ex1c *G-84A* and Ex1f-VNTR are associated with psychosis and prefrontal functioning in a population of patients with schizophrenia (Reif et al. 2006). Notably, both Ex1c and Ex1f transcripts are found in the hippocampus and the frontal cerebral cortex, i.e. brain regions implicated in the pathogenesis of schizophrenia as well as AD. The presence of the short (*S*) allele of *NOS1* Ex1f-VNTR represents a risk factor for the development of AD. The effect is cumulative, as in *S/S* carriers the risk is doubled. Most interestingly, the effect of this allele is likely to be gender specific, as it was found in females only. In addition, the *S* allele was shown to interact with the *APOE*4* allele both in males and females, increasing the risk to develop AD by more than 10 fold (Galimberti et al. 2008). Thus, *NOS1* seems to be a risk factor for AD, but only in female population. This could be explained by a possible interaction with other genes or with additional environmental factors present in females but not males.

3.2 *Genes Influencing the Risk to Develop BPSD in AD Patients*

Serotonin (5-hydroxytryptamine, 5-HT) is involved in a range of behaviors and psychiatric processes, including mood, aggression, impulsivity and anxiety. Several studies have implicated 5-HT dysfunctions in the pathogenesis of psychiatric diseases, such as depression, obsessive-compulsive disorder and schizophrenia. Nevertheless, 5-HT play a role also in the development of BPSD in patients with AD (Cross 1990). Postmortem studies of brain from patients with AD showed decreased levels of 5-HT, 5-HT receptors and 5-HT transporter (5-HTT) (Reinikainen et al. 1990). The 5-HTT plays a central role in the fine-tuning of 5-HT neurotransmission by determining the duration and amount of 5-HT present in the synaptic cleft. Its encoding gene, named *SLC6A4*, contains several polymorphisms influencing its expression, including a functional polymorphism, named serotonin-transporter linked-polymorphic region (*5-HTTLPR*), which is located upstream of the gene promoter and displays length variations of 14 (short type) or 16 (long type) repeats of a 20- to 23-base pair (bp) element and a 5-HTT VNTR (*5-HTTVNTR*) in the second intron, that contains 9, 10 or 12 copies of a 17-bp element (Lesch et al. 1994). These polymorphisms can influence transcriptional activity of the *SLC6A4* and ultimately the level of 5-HTT transporters available.

Several studies have found a relationship between *5-HTTLPR* and *VNTR* in various psychiatric conditions, including personality traits (Lotrick et al. 2001). Regarding BPSD in patients with AD, the long variant of *5-HTTLPR* has displayed association with aggressive behaviour and psychosis in 2 out of 5 studies (Assal et al. 2004; Ha et al. 2005; Rocchi et al. 2003; Sukonick et al. 2001; Sweet et al. 2001). No association with *5-HTTVNTR* has been shown in patients with AD and BPSD (Assal et al. 2004; Ueki et al. 2007). Nevertheless, a significant association was found between the presence of the *5-HTTVNTR* allele 10 and BPSD or aggressiveness (Ueki et al. 2007). Conversely, no influence of *5-HTTLPR* polymorphism on BPSD in AD was shown (Albani et al. 2009).

Recently, in a 3-year follow-up study, Angelucci et al. evaluated the association of 5-HT receptor 5-HT_{2a} 102T/C SNP with psychotic symptom severity and response to treatment with atypical antipsychotics (risperidone, olanzapine and quetiapine) in 80 patients with mild AD, showing a significant difference in the frequency and severity of delusions, measured through the Neuropsychiatric Inventory (NPI), with patients carrying the *TT* genotype most delusional during the follow-up period. Moreover, patients carrying the *T* allele were resistant to treatment with antipsychotics (Angelucci et al. 2009).

Lastly, dopamine D₃ receptor (*DRD3*) has been investigated in AD patients, as it is present in the limbic system, which is thought to regulate affect and cognition. No effect of genetic variability in *DRD3* on the risk to develop AD was shown. However, a significant association was found between the presence of the *DRD3* glycine allele and paranoid and delusional ideation (Sato et al. 2009).

4 Familial FTL D

Frontotemporal Lobar Degeneration is a heterogeneous disease characterized by a strong genetic component in its aetiology as up to 40% of patients report a family history of the disease in at least one extra family member (Snowden et al. 2002). In 1994 an autosomal dominantly inherited form of FTD with parkinsonism was linked to chromosome 17q21.2 (Wilhelmsen et al. 1994). Subsequently, other familial forms of FTD were found to be linked to the same region, resulting in the denomination “frontotemporal dementia and parkinsonism linked to chromosome 17” (FTDP-17) for this class of diseases.

In 1998, *MAPT* gene on chromosome 17q21, which encodes the microtubule associated protein tau was described as the cause of the disease in these families (Hutton et al. 1998; Poorkaj et al. 1998; Spillantini et al. 1998). So far, 44 different mutations in the *MAPT* gene have been described in 132 families (<http://molgen-www.uia.ac.be>). *MAPT* mutations are either non-synonymous or deletions, or silent mutations in the coding region, or intronic mutations located close to the splice-donor site of the intron after the alternatively spliced exon 10 (Rademakers et al. 2004). Mutations are mainly clustered in exons 9–13, except for two identified mutations in exon 1 (Rademakers et al. 2002). As regards possible effects on *MAPT* mutations, different mechanisms are involved, depending on the type and location of the mutation. Many of them disturb the normal splicing balance, producing altered ratios of the different isoforms. A number of mutations promote the aggregation of tau protein, whereas others enhance tau phosphorylation (Goedert and Jakes 2005).

However, after the discovery for *MAPT* as causal gene for FTDP-17, there were still numerous families with autosomal dominant FTL D genetically linked to the same region of chr17q21 that contains *MAPT* but in which no pathogenic mutations had been identified, despite extensive analysis of this gene (Lendon et al. 1998; Rosso et al. 2001; van der Zee et al. 2006). The neuropathology phenotype in these families was similar to the microvacuolar-type observed in a large proportion of idiopathic FTD cases with ubiquitin immunoreactive neuronal inclusions. Moreover, clinically, the disease in these families was consistent with diagnostic criteria for FTL D (Neary et al. 1998). Sequence analysis of the whole *MAPT* region failed to find a mutation and tau protein appeared normal in these families. Moreover the minimal region containing the disease gene for this group of families was approximately 6.2 Mb in physical distance. This region defined by markers D17S1787 and D17S806 is particularly gene rich, containing around 180 genes. Collectively, these data strongly argued against *MAPT* and pointed to another gene. Systematic candidate gene sequencing of all remaining genes within the minimal candidate region was performed and after sequencing 80 genes, including those prioritized on known function, the first mutation in progranulin gene (*GRN*) was identified. It consists in a 4-bp insertion of *CTGC* between coding nucleotides 90 and 91, causing a frameshift and premature termination in progranulin (C31LfsX34) (Baker et al. 2006). These results have been contemporarily

replicated by Cruts et al. (2006), who analyzed other families with a FTL-D-U disease without *MAPT* pathology, finding a mutation five base pairs into the intron following the first non coding exon of the *GRN* gene (IVS0 + 5G-C). This is predicted to prevent splicing out of the intron 0, leading the mRNA to be retained within the nucleus and subjected to nuclear degradation (Cruts et al. 2006). At present there is no obvious mechanistic link between the mutations in *MAPT* and *GRN*, currently assuming that their proximity on chromosome 17 is simply a coincidence. Progranulin is known by several different names including granulin, acrogranin, epithelin precursor, proepithelin and prostate cancer (PC) cell derived growth factor (He and Bateman 2003). The protein is encoded by a single gene on chromosome 17q21, which produces a 593 amino acid, cysteine rich protein with a predicted molecular weight of 68.5 kDa. The full-length protein is subjected to proteolysis by elastase and this process is regulated by a secretory leukocyte protease inhibitor (SLPI) (Zhu et al. 2002). Progranulin and the various granulin peptides are implicated in a range of biological functions including development, wound repair and inflammation by activating signaling cascades that control cell cycle progression and cell motility (He and Bateman 2003). Excess progranulin appears to promote tumor formation and hence can act as a cell survival signal. Despite the increasing literature on the function of progranulin, its role in neuronal function and survival remains unclear. In the human brain, *GRN* is expressed in neurons but significantly is also highly expressed in activated microglia (Baker et al. 2006), with the result that *GRN* expression is increased in many neurodegenerative diseases.

Since the original identification of null-mutations in FTL-D in 2006, 68 different mutations spanning most exons have been reported so far (<http://www.molgen.ua.ac.be/>). Interestingly, the majority of mutations identified create functional null alleles, causing premature termination of the *GRN* coding sequence. This leads to the degradation of the mutant RNA by nonsense mediated decay, creating a null allele (Baker et al. 2006; Cruts et al. 2006). The presence of a null mutation causes a partial loss of functional progranulin protein, which in turn leads eventually to neurodegeneration (haploinsufficiency mechanism), although how loss of *GRN* causes neuronal cell death remains unclear. Estimates of the frequency of *GRN* mutations in typical FTD patient populations suggests that they account for about 5–10% of all FTD cases, although numbers vary markedly depending on the nature of the populations considered (Cruts et al. 2006; Gass et al. 2006; Snowden et al. 2006).

Neuropathology analysis revealed that ubiquitin immunoreactive neuronal cytoplasmic and intranuclear inclusions were present in all cases with FTDP-17, where pathological findings were available (Mackenzie et al. 2006). Furthermore, soon after the identification of mutations in *GRN*, biochemical analyses demonstrated that truncated and hyperphosphorylated isoforms of the TAR-DNA binding protein (TDP-43) are major components of the ubiquitin-positive inclusions in families with *GRN* mutations as well as in idiopathic FTD and a proportion of

Amyotrophic Lateral sclerosis (ALS) cases (Neumann et al. 2006). TDP43 is a ubiquitously expressed and highly conserved nuclear protein that can act as a transcription repressor, an activator of exon skipping or a scaffold for nuclear bodies through interactions with survival motor neuron protein. Under pathological conditions, TDP-43 has been shown to relocate from the neuronal nucleus to the cytoplasm, a consequence of which may be the loss of TDP-43 nuclear functions (Neumann et al. 2006). The mechanism by which loss of progranulin leads to TDP-43 accumulation and whether this is necessary for neurodegeneration in this group of diseases is still to be clarified.

In conclusion, the function of progranulin in the brain is currently unclear and why loss of this protein leads to a neurodegenerative diseases in mid-life remains to be established, and its possible role as regulator of a repair activity in the central nervous system, as it is well known to happen in periphery, remains a challenge for science. The gene encoding for TDP-43, named *TARDBP*, has been extensively studied and a number of mutations found in its C-terminal glycine rich region. Unexpectedly, the clinical phenotype of carries was ALS, and aggregates made of TDP-43 have been described in brain and spinal cord of such patients (see Pesiridis et al. 2009 for review).

A recently published collaborative study (Yu et al. 2010) analyzed *GRN* in a population of 434 patients with FTLD, including FTD, PA, SD, FTD/ALS, FTD/Motor Neuron Disease (MND), Corticobasal Degeneration (CBD), Progressive Supranuclear Palsy (PSP). Fifty-eight variants were identified, including 24 pathogenic variants. The frequency of *GRN* mutations was 6.9% of all FTLD-spectrum cases, 21.4% of cases with a pathological diagnosis of FTLD-U, 16% of FILD-spectrum cases with a family history of a similar neurodegenerative disease, and 56.2 of cases of FTLD-U with a family history. Clinical information were available for 31 *GRN* mutation-positive patients from 28 different families. The most common clinical diagnosis was FTD (n = 24); 3 patients were diagnosed with PA, 3 with AD and 1 with CBD. The majority of *GRN* mutations introduced a premature termination codon, suggesting that their corresponding mRNA will be degraded through nonsense mediated decay, supporting the hypothesis that most *GRN* mutations create functional null allele (Yu et al. 2010).

An additional gene shown to cause familial FTLD is named *CHMP2B* (charged multivesicular body protein 2B), and is part of the endosomal ESCRTIII-complex (Skibinski et al. 2005). Four different mutations in this gene have been so far described in 4 families (<http://www.molgen.ua.ac.be/>), making *CHMP2B* a rare genetic cause of FTLD.

Lastly, the first evidence of linkage with chromosome 9q21-22 comes from a study carried out in families with FTD/MND (Hosler et al. 2000). Despite the evidence of linkage to chr9q21-22 in several additional FTD-MND families (Le Ber et al. 2009; Morita et al. 2006; Vance et al. 2006), the gene responsible for the disease in this locus has yet to be identified.

5 Sporadic FTLD

The best well-known risk factor for late onset SAD, Apo E4, has also been considered as a risk factor for sporadic FTLD. A number of studies suggested an association between FTLD and APOE*4 allele (Bernardi et al. 2006; Fabre et al. 2001; Farrer et al. 1995; Gustafson et al. 1997; Helisalmi et al. 1996; Stevens et al. 1997). Other Authors however, did not replicate these data (Geschwind et al. 1998; Riemenschneider et al. 2002; Short et al. 2002). Recent findings demonstrated an association between the APOE*4 allele and FTLD in males, but not females (Srinivasan et al. 2006), possibly explaining the discrepancies previously reported. An increased frequency of the APOE*4 allele was described in patients with SD compared to those with FTD and PA (Short et al. 2002).

Concerning the APOE*2 allele in the development of FTLD, heterogeneous data have been obtained in different populations. Bernardi et al. (2006) showed a protective effect of this allele towards FTLD, whereas other Authors failed to do so (Engelborghs et al. 2003; Riemenschneider et al. 2002; Short et al. 2002; Srinivasan et al. 2006). Despite these results, a recent meta-analysis comprising a total of 364 FTD patients and 2671 controls demonstrated an increased susceptibility to FTD in APOE*2 carriers (Verpillat et al. 2002).

Besides pathogenic mutations, several polymorphisms have been reported to date, both in *MAPT* and *GRN*. An association between Progressive Supranuclear Palsy (PSP) and a dinucleotide repeat polymorphism in the intron between *MAPT* exons 9 and 10 was described in 1997 (Conrad et al. 1997). The alleles at this locus carry 11–15 repeats. Subsequently, two common *MAPT* haplotypes, named H1 and H2, were identified (Baker et al. 1999). They differ in nucleotide sequence and intron size, but are identical at the amino acid level. Homozygosity of the more common allele H1 predisposes to PSP and Corticobasal Degeneration (CBD), but not to AD or Pick Disease (Baker et al. 1999; Di Maria et al. 2000).

Regarding *GRN*, an association of a SNP located in the promoter and an increased risk to develop FTLD in patients who did not carry causal mutations has recent been demonstrated (Galimberti et al. 2010).

In addition, a known polymorphism in *MCP-1* (A-2518G) has been shown to exert a protective effects towards the development of FTLD (Galimberti et al. 2009), whereas NOS3 G894T (Glu298Asp) and NOS1 C276T SNPs likely Increases the risk to develop FTLD (Venturelli et al. 2008, 2009).

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