



# Dopamine Receptor Supersensitivity: Development, Mechanisms, Presentation, and Clinical Applicability

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**The process of receptor supersensitivity (RSS) has a long history and is an epiphenomenon of neuronal denervation. Dopamine (DA) RSS (DARSS) similarly occurs after DA-denervation, and this process is invoked in neuropsychiatric and neurodegenerative disorders. From studies largely over the past 25 years, much has been learned regarding DARSS. For example, overt D<sub>1</sub> DARSS occurs after perinatal destruction of nigrostriatal DA fibers. However, following perinatal destruction of DA innervation, the most prominent behavioral effects of a D<sub>1</sub> agonist are observed after a series of D<sub>1</sub> agonist treatments - a process known as *priming* of D<sub>1</sub> DA receptors. Moreover, perinatal lesioning of DA fibers produces prominent serotonin (5-HT) RSS, and in fact 5-HT RSS appears to modulate D<sub>1</sub> DA RSS. In rodents, receptor supersensitization by these means appears to be irreversible. In contrast to the observed D<sub>1</sub> DARSS, D<sub>2</sub> DARSS apparently does not occur after perinatal DA denervation. Also, while repeated D<sub>1</sub> agonist treatment of intact rats has no observable effect, repeated D<sub>2</sub> agonist treatments, during or after the ontogenetic phase, produces prominent life-long D<sub>2</sub> RSS. The process may have an association with substance abuse. Therefore, production of D<sub>1</sub>**

**and D<sub>2</sub> DARSS occurs by different means and under different circumstances, and in association with perhaps different neuronal phenotypes, and with greater incidence in either intact (D<sub>2</sub>) or DA-lesioned counterparts (D<sub>1</sub>). The physiological consequence of RSS are multiple.**

*Keywords:* Receptor supersensitivity; Dopamine; Serotonin; Priming; Denervation

## INTRODUCTION

The study of psychoactive drugs in non-human species is complicated by the fact that we are unable to know what animals think or whether they are emotionally affected by a drug treatment. Because the majority of initial drug assessments are performed in rodents, the problem is more compounded, because rodents generally fail to even display motor syndromes that might be produced in humans. A reductionist approach, then, has evolved, whereby rodents are observed for drug-induced stereotypies - and this has proved to be a reasonable means of assessing (at least) dopamine (DA) receptor involvement. With the mixed DA D<sub>1</sub>/D<sub>2</sub> agonist apomorphine one can initially observe salivation; and with

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a higher dose, salivation accompanied by occasional gnawing - which evolves to salivation and repeated gnawing; the latter effect, with running around the cage, occurs at a high dose of apomorphine (Costall *et al.*, 1975). Breese *et al.* (1985a,b; 1987) described a host of other stereotypic behaviors aroused by D<sub>1</sub> and D<sub>2</sub> agonist treatments, including digging, grooming, rearing, paw-treading, taffy-pulling, self-biting, self-mutilation, and other stereotypies.

Another widely accepted means of gauging receptor activation or extent of sensitivity is with the so-called 'Ungerstedt' rodent. For example, when either the nigrostriatal tract or medial forebrain bundle (through which the nigrostriatal tract projects) is lesioned, the consequent DA-denervation of striatum (basal ganglia) results in the development of DA receptor supersensitivity (RSS; DARSS). This process, taking several days and maximizing by ~2 weeks after a lesion, results in exaggerated behaviors by (graded) low doses of a DA agonist that would produce virtually no effect in sham operated controls. When the lesion is made only on one side, agonists acting on supersensitized receptors on the lesioned side result in circling behavior - because one side is more stimulated than the other (Ungerstedt, 1971b,c).

The development of RSS is the normal 'adaptive' response to denervation, and it has been recognized for more than a century, as evidenced by greatly enhanced responsiveness of denervated muscle to nicotine. Because the majority of psychoactive drugs affect DA receptors in both the nigrostriatal motor pathway and the mesolimbic mood-related pathway, DARSS represents a reasonable means of gauging central actions of such drugs.

In studies in our laboratory, we have been engaged primarily in denervation studies, generally utilizing neurotoxins for monoaminergic nerves (*i.e.*, DA, norepinephrine [NE], serotonin [*i.e.*, 5-hydroxytryptamine, 5-HT]). This review article is intended to systematically characterize some of the features inherent in RSS and relate them to clinical phenomena.

## 6-HYDROXYDOPAMINE LESIONING OF DA NERVES

The neurotoxin 6-hydroxydopamine (6-OHDA) is highly selective for catecholamine nerves, by virtue

of its high affinity for the DA transporter (DAT) and NE transporter (NET), ultimately being accumulated by these nerves to a high level in the cytoplasm whereby high levels of reactive oxygen species are generated (see Kostrzewska and Jacobowitz, 1974). Subsequent impairment of mitochondrial oxidative phosphorylation results in energy depletion and initiation of neuronal apoptosis, coupled with necrosis. Destruction of DA or NE nerve endings, and possibly cell bodies (according to dose), results in DA-denervation and/or NE-denervation of brain sites and the development of DARSS and/or NE RSS.

When 6-OHDA is administered into the cerebral ventricles or cisterna of newborn rodents, a similar outcome prevails. For the NE system, destruction of NE fibers in the dorsal bundle is associated with marked NE fiber denervation of regions distal from the nucleus of origin (namely the locus coeruleus), so that the neocortex, hippocampus, and spinal cord are largely NE-denervated for the remainder of life. In contrast, there is reactive sprouting of short NE axons, resulting in NE hyperinnervation of regions close to the locus coeruleus, such as the midbrain, pons, medulla, and cerebellum. This NE hyperinnervation is also life-long (Jonsson *et al.*, 1974; Kostrzewska and Harper, 1974; Kostrzewska and Garey, 1976; 1977).

For the DA system, high dose 6-OHDA produces near-total destruction of the nigrostriatal tract in neonates, typically resulting in >95% loss of DA innervation to the striatum (Breese *et al.*, 1984; 1985a,b; 1987; Berger *et al.*, 1985; Snyder *et al.*, 1986). However, because ventral tegmental neurons have far fewer DATs, this system is not prominently compromised by neonatal 6-OHDA treatment (Okamura *et al.*, 1995). By gross observation such lesioned rats, with the striatum DA-denervated, are virtually indistinguishable from intact rats. In other words, they are mobile and they eat and drink to a similar extent as intact rats (Breese *et al.*, 1985a,b). Only by exacting behavioral assessments is one able to recognize striatal DA-denervation, behaviorally. In contrast, when 6-OHDA is administered to adult rats, there may be still 20% or more of DA innervation remaining in the striatum; yet, these rats become aphagic, adipsic, and akinetic - resembling Parkinsonian rats (Ungerstedt, 1971a; see Zigmond and Stricker, 1989). With nurturing

and special care for the next two weeks these rats can recover to some extent and still live, but precariously. By comparison, the unilaterally DA-lesioned rat (*i.e.*, Ungerstedt rat; Ungerstedt, 1971c) is able to eat, drink and remain mobile and thus survive without special care.

### 5,7-DIHYDROXYTRYPTAMINE LESIONING OF 5-HT NERVES

The neurotoxin 5,7-dihydroxytryptamine (5,7-DHT) owes its relatively selective action on 5-HT nerves to the fact that 5,7-DHT has high affinity for the 5-HT transporter (SERT, 'serotonin transporter') (Baumgarten *et al.*, 1973). When selectively accumulated by 5-HT nerves, 5,7-DHT promotes reactive oxygen species formation in the cytoplasm, resulting in impaired oxidative phosphorylation, energy depletion, and induction of both apoptotic and necrotic processes. Its cellular mechanism of action is much like that of 6-OHDA. When administered to adult rats, 5,7-DHT produces prominent 5-HT-denervation of brain; when administered to neonatal rats, 5,7-DHT produces ~90% destruction of 5-HT innervation of forebrain, neocortex, and hippocampus. Behaviorally, except by special testing, these rats are indistinguishable from controls (see Baumgarten and Lachenmayer, 2004).

### NEONATAL 6-OHDA AND DA D<sub>1</sub> RSS

#### Latent D<sub>1</sub> DARSS and the Priming Phenomenon

As indicated, when 6-OHDA (100-200 µg) is administered in high dose (Kostrzewa *et al.*, 1993a) to rats within one week of birth (Gong *et al.*, 1993b), >95% reduction in striatal DA-innervation occurs, resulting in latent DARSS. These rats display spontaneous

hyperlocomotor activity from 2-3 weeks after birth (Shaywitz *et al.*, 1976a,b), and sometimes into adulthood, particularly if serotonergic nerves in brain are lesioned in adulthood with 5,7-DHT (Kostrzewa *et al.*, 1994). Lesioned rats, even as adults, are nearly indistinguishable from control even after the first or second dose of the DA D<sub>1</sub> agonist SKF 38393 (Breese *et al.*, 1985a,b). However, the 3rd and all subsequent doses of SKF 38393 produce intense behavioral stereotypies (of many forms) accompanied by an abnormally high level of locomotor activity (Breese *et al.*, 1985a,b; Gong *et al.*, 1993a; 1994). This 'unmasking' of D<sub>1</sub> DARSS by repeated doses of a D<sub>1</sub> agonist at spaced intervals is known as *priming* - a term coined by Breese. In addition to this homologous *priming* (*i.e.*, D<sub>1</sub> agonist induction of D<sub>1</sub> RSS), it is possible to supersensitize the D<sub>1</sub> receptor by repeated D<sub>2</sub> agonist treatments, a process termed heterologous *priming* (Criswell *et al.*, 1989). For example, when the D<sub>2</sub> agonist quinpirole is administered twice, with a one-week interval, a later treatment with first-time SKF 38393 produces an abnormally high number of stereotypies and hyperlocomotor activity, analogous to that observed after 3 separate doses of SKF 38393. DARSS in such rats is life-long (Criswell *et al.*, 1989). The effects of this and other treatments are summarized in Table I.

When neonatally 6-OHDA-lesioned rats are repeatedly treated in adulthood with the D<sub>2</sub> agonist quinpirole, the third and subsequent doses of quinpirole do not produce the markedly exaggerated stereotyped and locomotor effects - unlike that observed with repeated D<sub>1</sub> agonist treatments in such rats (Brus *et al.*, 2003). Thus, *priming*, as per the D<sub>1</sub> receptor, is not observed for the D<sub>2</sub> receptor in neonatally 6-OHDA-lesioned rats.

Table I Potential of a dopamine D<sub>1</sub> agonist, D<sub>2</sub> agonist and 5-HT<sub>2</sub> agonist to produce DARSS on the first dose or after repeated dosing (*i.e.*, *priming*) in intact rats, neonatally 6-OHDA-lesioned rats (n6-OHDA) or in adulthood 6-OHDA-lesioned rats (a6-OHDA).

| Animal Group | D <sub>1</sub> Agonist Dosing |          | D <sub>2</sub> Agonist Dosing |          | 5-HT <sub>2</sub> Agonist Dosing |          |
|--------------|-------------------------------|----------|-------------------------------|----------|----------------------------------|----------|
|              | Single                        | Repeated | Single                        | Repeated | Single                           | Repeated |
| Intact Rats  | —                             | —        | —                             | +++      | —                                | —        |
| n6-OHDA Rats | —                             | ++++     | ±                             | —        | +++                              | +++      |
| a6-OHDA Rats | ++                            | ++       | ++                            | ++       | ?                                | ?        |

—, no effect; ±, minor effect or no effect; ?, unknown effect or not well-studied  
 ++, moderate effect; +++, large effect; +++++, major effect

### Overt D<sub>1</sub> DARSS in Neonatally 6-OHDA-lesioned Rats

According to the particular behavior under study, it is possible to observe overt D<sub>2</sub> DARSS in neonatally 6-OHDA-lesioned rats (*i.e.*, after the first SKF 38393 dose). Rosengarten *et al.* (1982) observed that a high dose of the D<sub>1</sub> agonist SKF 38393 produced vacuous chewing movements (VCMs) in intact rats. However, when the first dose of SKF 38393 was administered in adulthood to rats that were lesioned neonatally with 6-OHDA, VCMs were observed with a dose of SKF 38393 that was 100- to 1000-fold lower than the effective dose in intact rats (Kostrzewa and Gong, 1991; Gong *et al.*, 1993a). Accordingly, this effect demonstrates that there is overt D<sub>1</sub> DARSS in neonatally 6-OHDA-lesioned rats (*i.e.*, enhanced behavior, vs intact rats, after the first D<sub>1</sub> agonist dose) (see Table I).

### NEONATAL 6-OHDA AND 5-HT RSS

It is not so unusual, that D<sub>1</sub> DARSS would develop subsequent to DA-denervation, although the contrast between overt DARSS versus the *priming* phenomenon relating to DARSS is interesting. However, quite surprising, is the fact that there is an enhanced behavioral response (VCMs) to the first dose of a 5-HT agonist in adult rats that had been lesioned neonatally with 6-OHDA (Gong and Kostrzewa, 1992; Gong *et al.*, 1992; 1993b). In fact, the predominately 5-HT<sub>2</sub> agonist, m-chlorophenylpiperazine (mCPP), produced a higher maximum number of VCMs than a D<sub>1</sub> agonist (Gong and Kostrzewa, 1992). Thus, 5-HT<sub>2</sub> receptors are overtly supersensitized after neonatal DA-denervation of striatum. This is notable, since a later study demonstrated that the mCPP induction of VCMs occurs after direct injection of mCPP into the striatum (Plech *et al.*, 1995) (see Table I).

It is of particular note that 5-HT fiber hyperinnervation of striatum and forebrain ensues consequent to a neonatal 6-OHDA lesioning of DA innervation (Kostrzewa *et al.*, 1998). 5-HT fiber hyperinnervation is fully developed by 4-6 weeks and it persists life-long in the neonatally 6-OHDA-lesioned rats (Berger *et al.*, 1985; Snyder *et al.*, 1986; Luthman *et al.*, 1987; Towle *et al.*, 1989; Descarries *et al.*, 1992; Molina-Holgado *et al.*, 1994; Soucy *et al.*, 1994; Mrini *et al.*, 1995). Although one might expect RSS to arise following

denervation, in the described scenario, 5-HT RSS arises when there is presynaptic 5-HT receptor proliferation (Radja *et al.*, 1993b) and 5-HT fiber hyperinnervation (El Mansari *et al.*, 1994).

Other neuronal phenotypic systems are also influenced by perinatal dopaminolytic effects. Cholinergic muscarinic receptors are sensitized (Kostrzewa and Neely, 1993), as are histaminic H<sub>3</sub> receptors (Nowak *et al.*, 2006). Moreover, the noradrenergic system additionally impacts on DA RSS, as D<sub>2</sub> RSS occurs when both the noradrenergic and serotonergic systems are damaged perinatally (Nowak *et al.*, unpublished).

In related studies on this theme, Huang *et al.* (1997) followed the protocol of Waddington to study tardive dyskinesia mechanisms, by administering haloperidol in drinking water of rats, for one year. While the time-course of tardive dyskinesia in intact rats, evidenced as an increase in spontaneous VCMs, mirrored that in the Waddington study, there was an accelerated time-course of the increase in VCM number in haloperidol-treated 6-OHDA-lesioned rats. Moreover, there was a doubling of the number of spontaneous VCMs in the haloperidol-treated lesioned rats vs haloperidol-treated DA-intact rats (Huang *et al.*, 1997). The effect persisted for the 1-year duration of haloperidol treatment, and it was accompanied by an increase in the B<sub>max</sub> for striatal D<sub>2</sub> receptors. Notably, after haloperidol was withdrawn as a treatment, the high number of VCMs persisted in these rats for 8 months (Huang and Kostrzewa, 1994), at which time the study terminated. At the end of this 8-month haloperidol-free period, the B<sub>max</sub> for D<sub>2</sub> receptors was at the level found in intact untreated rats, indicating that VCM number was thus unrelated to D<sub>2</sub> receptor number (Huang *et al.*, 1997). This finding supports earlier observations that the phenomenon of DA RSS appears to be unrelated to numbers of D<sub>1</sub> or D<sub>2</sub> receptors (Breese *et al.*, 1985a,b; Kostrzewa and Brus, 1991; Gong *et al.*, 1994; Kostrzewa, 1995), although there is not full agreement on this point (Radja *et al.*, 1993a; Dewar *et al.*, 1990).

### 5-HT AND D<sub>1</sub> DARSS IN NEONATALLY 6-OHDA-LESIONED RATS

Interaction between 5-HT and DA systems, over time, has been the subject of only occasional study. However, in neonatally 6-OHDA-lesioned rats,



studied as adults, there is a prominent influence of the 5-HT system on the DA system. For example, in rats co-lesioned as neonates with both 6-OHDA and 5,7-DHT in order to largely destroy DA and 5-HT innervation of brain, overt D<sub>1</sub> RSS does not develop (Brus *et al.*, 1994). Moreover, when neonatally 6-OHDA-lesioned rats are lesioned as adults with 5,7-DHT, the overt D<sub>1</sub> RSS, as reflected by enhanced SKF 38393-induced VCMs, is attenuated (unpublished). Therefore, it appears that 5-HT fibers have a regulatory/modulatory effect on the maintenance of D<sub>1</sub> DA RSS. Moreover, in the neonatally 6-OHDA-lesioned rats that are lesioned in adulthood with 5,7-DHT, there is development of D<sub>2</sub> DARSS (Brus *et al.*, 1995). This indicates further, that 5-HT innervation has a 'suppressor' effect on the sensitivity level of D<sub>2</sub> receptors in rats that were largely DA-denervated as neonates. This phenomenon is noteworthy particularly in regards to treatment of Lesch-Nyhan children (Breese *et al.*, 1990; 2005).

When neonatally 6-OHDA-lesioned rats are pre-treated with the 5-HT receptor antagonist mianserin, there is demonstrable suppression of D<sub>1</sub> agonist-induced VCMs (Gong *et al.*, 1992). The effect appears to be related to 5-HT<sub>2</sub> receptors, since 5-HT<sub>1</sub> and 5-HT<sub>3</sub> antagonists do not suppress D<sub>1</sub> agonist-induced effects. Moreover, since ketanserin does not abate the D<sub>1</sub> agonist effect, it appears that the 5-HT<sub>2C</sub> receptor subtype is most prominently involved in 5-HT modulation of D<sub>1</sub> DARSS (Gong *et al.*, 1992).

It is particularly noteworthy that 5-HT hyperinnervation arises when DA denervation occurs neonatally; and that 5-HT RSS occurs simultaneously. Also, the 5-HT system, seemingly via 5-HT<sub>2C</sub> receptors, governs the sensitivity level of DA receptors. This phenomenon may relate to a preservation of behavior by an alternate neuronal phenotypic system in brain. Clinically, this may translate to the possibility of there being a redundant system that can be aroused under proper circumstances, perhaps as a new modality in treating psychiatric and neurodegenerative disorders in humans.

#### **OCCURRENCE OF DA D<sub>2</sub> RSS IN THE ABSENCE OF A LESION**

In an attempt to better understand mechanisms attending RSS, we took the approach of simply

treating intact rats once a day with a DA agonist, starting from birth. In rats treated with the D<sub>1</sub> agonist SKF 38393, once a day for the first 28 days after birth, there was no apparent alteration in D<sub>1</sub> RSS in adulthood. In other words, repeated D<sub>1</sub> agonists did not *prime* D<sub>1</sub> receptors if DA innervation developed without interruption (Gong *et al.*, 1993b; 1994).

When the D<sub>2</sub> agonist quinpirole was administered to intact rats, once a day for the first 28 days after birth, we observed a darting-like behavior in rats starting at 19 days after birth (Kostrzewa *et al.*, 1993c). If rats were in the home cage with a lid, the only other behavior of note was intense eating immediately after quinpirole treatment (Kostrzewa *et al.*, 1990). However, if these same rats were placed in a cage that did not have a lid in place, the quinpirole-treated rats stood upright on hindlimbs for much of the next hour (or hours, when a high dose of quinpirole was administered) and they began jumping like basketball players (*i.e.*, standing upright and jumping) in conjunction with prominent paw-treading. This behavior was dependent on the acute dose for quinpirole, and the jumping behavior persisted for only ~21 to ~28 days after birth (Kostrzewa *et al.*, 1993c). In order words, the behavioral effect was age-specific.

When such rats were studied later in adulthood, D<sub>2</sub> *primed* rats displayed enhanced D<sub>2</sub> agonist induced antinociception (Kostrzewa *et al.*, 1991). Also, acute quinpirole treatment induced yawning - which occurred to a higher maximum than in controls and with a lower quinpirole dose than in controls (Kostrzewa and Brus, 1991). This effect, or D<sub>2</sub> RSS, was life-long (see Table I). Moreover, it was produced even if rats were treated for 11 consecutive days, either from 1) the day of birth to the 11th day after birth, 2) the 12th to 22nd day after birth, or 3) the 23rd to 33rd days after birth (Kostrzewa *et al.*, 1993b). Notably, the predominate D<sub>3</sub> agonist 7-hydroxy-*N,N*-dipropyl-2-aminotetralin (7-OH-DPAT) did not *prime* for the yawning response (Oswiecimska *et al.*, 2000).

It is of interest that repeated D<sub>2</sub> agonist treatments produce life-long D<sub>2</sub> RSS when DA innervation is intact in brain, but repeated D<sub>2</sub> agonist treatments purportedly do not induce D<sub>2</sub> DARSS when DA innervation is largely destroyed in brain from birth. Because many abused drugs act on or via DA sys-

tems (e.g., amphetamines, cocaine), the induction of D<sub>2</sub> RSS by repeated D<sub>2</sub> agonist treatments (in fully DA-innervated brain) may have relevance to substance abuse (Palomo *et al.*, 2002).

### MECHANISMS INVOLVED IN DARSS

Despite the search for underlying mechanisms of DARSS, there has been no obvious second messenger system that can account for the phenomenon. Numbers and affinity of high-affinity D<sub>1</sub> receptors remain unaltered when D<sub>1</sub> RSS is present (Gong *et al.*, 1994). Also, c-fos and other second messenger systems remain unchanged or little altered vs control, by acute agonist treatments that are associated with exaggerated D<sub>1</sub> agonist-induced behavior (Johnson *et al.*, 1992; Gong *et al.*, 1994). Thusfar, the major association is a 5-fold enhancement of amphetamine-induced release of striatal DA in rats that had been repeatedly quinpirole-treated during postnatal development. Consequently, one must consider the possibility that DA receptor "supersensitivity" could very well represent DA autoreceptor "subsensitivity" (Nowak *et al.*, 2001). In other words if the indirect acting DA agonist, amphetamine, releases a greater amount of DA in quinpirole-sensitized rats, subsensitivity of autoreceptors on DA nerves could account for the effect, *i.e.*, less DA suppression of further DA release following acute amphetamine treatment. Additional study is needed to resolve the problem.

### SUMMARY OF DARSS

DARSS arises under a variety of circumstances. It seems intuitive that D<sub>1</sub> DARSS occurs following DA-denervation. Yet, for D<sub>1</sub> agonist-induced locomotor effects and for most of the stereotypies observed, this D<sub>1</sub> RSS occurs only after *priming* (*i.e.*, repeated D<sub>1</sub> RSS). Even repeated D<sub>2</sub> agonist treatments promote *priming* of D<sub>1</sub> RSS. In contrast to D<sub>1</sub> RSS, DA-denervation does not evoke obvious or prominent D<sub>2</sub> RSS. Thus, not all types of DA receptors are supersensitized by DA denervation.

The expression of D<sub>1</sub> RSS, moreover, is dependent on the modulatory actions of 5-HT nerves. When 5-HT nerves are destroyed, D<sub>1</sub> RSS is either eliminated or suppressed. In the systems studied thusfar, the 5-HT<sub>2C</sub> receptor subtype appears to have the greatest impact on 5-HT modulation of DA RSS.

While the sensitivity level of D<sub>2</sub> receptors is

apparently not prominently altered by DA denervation, the D<sub>2</sub> receptor is readily and greatly sensitized by regular treatments with a D<sub>2</sub> agonist; and the effect is seemingly life-long. Studies by Szechtman and Woody (2006) implicate this particular phenomenon is the obsessive compulsive behavior occurring in humans. This phenomenon also has overlay with substance abuse.

The process of DARSS has been implicated in psychiatric and neurodegenerative disorders. To better approach like-long treatments of CNS disorders, it is important to have a good understanding of DARSS and factors or elements that may give rise to its occurrence, as well as a means of suppressing DARSS. This paper is intended to present an overview of DARSS, and highlight directions for future research.

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