

I. Background

1. NPS -- a potential novel therapy for anxiety disorders

(based on Reinscheid et al., 2005)

Effects on the HPA axis
Hyperlocomotion
Strong anxiolytic effects

ICV injection of NPS

(based on Xu et al., 2004 and Smith et al., 2006)

NPS has high potential as an alternative anxiolytic therapy for anxiety disorders

2. Fluorophore-coupled NPS allows intracellular tracking

Cy3-NPS
FLAG-NPSR

Cy3-NPS stimulation of HEK cells transiently transfected with FLAG-NPSR shows that NPS specifically targets NPSR and that receptor-ligand complexes are subsequently internalized

3. Intranasal application bypasses the blood-brain-barrier and targets the CNS

lamina cribrosa

— pathway along the olfactory nerves
— pathway along the myelin sheaths of the trigeminal nerves

(adapted from Thorne et al., 2004)

intranasal application represents a valid administration alternative to the intracerebral injection and can be readily implemented in patients

II. The hippocampus — a novel NPS target region

1. Intranasal Cy3-NPS application identifies the hippocampus as a novel NPS target region

DAPI Cy3-NPS

DAPI NF Cy3-NPS Merge

intranasally applied Cy3-NPS is internalized exclusively into cells expressing the neuronal marker neurofilament (NF)

(Ionescu et al., 2012)

2. Intranasally applied NPS exerts anxiolytic effects in C57BL/6N mice and regulates protein and gene expression in the hippocampus (HC)

Open field: Total distance traveled (% control)

Dark-light test: Latency to first entry in light chamber (% control)

EPM: % Time in open arms

HC: GluR1 ↑, Synapsin ↑, Glt-1 ↓

Glt-1: relative expression

Synapsin Ia-b/Ila: relative density

(Ionescu et al., 2012)

3. Local NPS injections into the ventral CA1 (vCA1) region lead to anxiolytic effects in C57BL/6N mice

bilateral intra-vCA1 injections of NPS

Open field: Total distance traveled

Dark-light test: % Time in light compartment

EPM: % Time in open arms

NPS distribution remains locally restricted upon local injection into vCA1

4. Intranasally applied NPS impacts on basal glutamatergic neurotransmission and plasticity at CA3-CA1 synapses and weakens neuronal activity flow from DG to CA1

A: EPSP slope (mV/ms) vs Fiber volley amplitude (µV)

B: Paired-pulse ratio vs Interstimulus interval (ms)

C: Normalized EPSP slope vs Time (min) for HFS (100 Hz, 1 s)

D: Heatmaps of neuronal activity flow from DG to CA1

E: FFR (area ratio) vs Time (min) for ACSF and ACSF + DHPG (10 µM)

F: FFR (area ratio) vs Time (min) for NPS and ACSF + DHPG + NPS

III. NPS in hippocampal pathology

1. Intranasally applied NPS affects glutamatergic neurotransmission and plasticity in high anxiety behavior (HAB) mice

A: EPSP slope (mV/ms) vs Fiber volley amplitude (µV)

B: Paired-pulse ratio vs Interstimulus interval (ms)

C: Normalized EPSP slope vs Time (min) for HFS (100 Hz, 1 s)

2. Intranasal NPS treatment counteracts pathological changes in hippocampal synapsin levels in a mouse model of PTSD

PTSD-like symptoms (Siegmund et al., 2007)
hippocampal shrinkage (Golub et al., 2011)
loss of hippocampal synapsin (Herrmann et al., 2012)

Synapsin I mRNA, Synapsin II mRNA, Synapsin Ia-b/Ila protein

Overview

in the hippocampus, NPS regulates expression of proteins involved in synaptic function at the presynaptic site (synapsin) and in glia cells (Glt-1)

NPS actions in the ventral hippocampus may contribute to the anxiolytic effects of NPS treatment via modulation of amygdala activity

Conflict of interest: I.A. Ionescu, Y.-C. Yen, R. Landgraf, F. Holsboer and U. Schmidt declare a conflict of interest due to a patent application on intranasal NPS application pending since October 2012.