# The Role of Astrocytes in the Long-Term Action of Antidepressant Drugs

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## **\*INTRODUCTION**

- According to the tripartite synapse model, the astrocyte is part of the functional unit of the synapse and is able to modify or disrupt it.
- When synapse disruption occurs in prefrontal cortex (PFC) and limbic regions that control emotions it causes the major depressive disorder (MDD).
- Perisynaptic astrocytes are therapeutic targets of antidepressant drugs (AD) participating in the therapeutic effect.
- The aim of this project to collect the last advances in the MDD research field, taking the astrocyte as a key element of the synapse and as a target of AD.

#### ❖ METHODS

Extended reading of references related to MDD obtained from PubMed, SciElo and Scopus. The used references collect data from 2001 year up to now.

## \* PHYSIOPATHOLOGY OF MDD

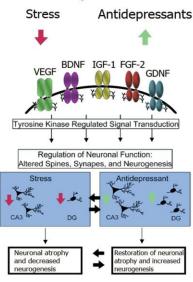
## Neurotrophic hypothesis of MDD

Stress decreases the levels of the neurotrophic/growth factors leading to neuronal and glial atrophy in PFC and limbic structures that control emotions, thus causing the MDD (Fig. 1).



**Figure 1.** A. Confocal micrographs of prefrontal cortex neurons showing the atrophy caused by stress. Duman, R. S. *et al. Science* 68 (2012). B. Model of neuronal atrophy caused by stress.

Antidepressants (AD) re-establish the levels of neurotrophic/growth factors VEFG, BDNF, IGF-1, FGF-2 and GDNF decreased by stress. The neurotrophic/growth factors activates RTKs which coupled to similar signal transduction pathways restore the neuronal atrophy, improve synaptic function and increase neurogenesis.



**Figure 2.** Involvement of neurotrophic/growth factors in the physiopathology and treatment of depression.

## **\***ANTIDEPRESSANTS ACT ON ASTROCYTES

Different classes of AD increase GDNF **release** in C6 cells (a model of astrocytes) in a dose dependent manner, but not non-AD which act in the CNS. This corroborates that release is a selective effect of AD (Fig. 3).

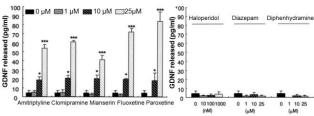


Figure 3. Different classes of AD induced the release of GDNF after treatment at different concentrations, but not non-AD (right). Hisaoka, K. et al. J Neurochem, 79, 25 (2001).

The different classes of AD not only increase the release of neurotrohpic/growth factors but also increase its **transcription**. After a treatment with a tryciclic AD (TCA) it is reported a significant raise in the astrocyte mRNA levels of FGF-2, BDNF, VEGF and GDNF (Fig. 4).

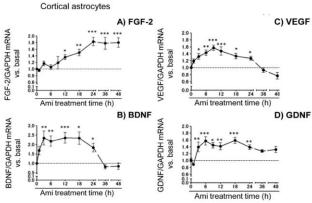
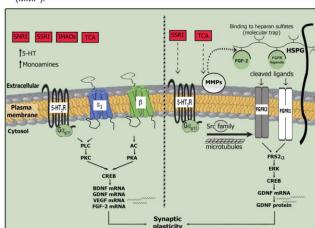


Figure 4. The effects of amitriptyline AD in the mRNA expression of neurotrophic/growth factors in astrocytes. Kajitani, N. et al. PloS one, 7 (12).

# **SIGNALING PATHWAYS IN ASTROCYTES**

The current available classes of AD SNRI, SSRI, IMAOs and TCA increase the availability of monoamines noradrenalin (NA) and serotonin.

- NA: activates PKC and PKA through α1 and β adrenergic-R.
- Serotonin: activates PKC through 5-HT2R. New pathway elucidated is based on transactivation of FGFR2 through Src tyrosine-kinase and stabilized microtubules.
- TCA activate both FGFR1 and FGFR2 through an extracellular pathway consisting on the mobilization of FGFR ligands from a membrane store of heparan sulfate proteoglycans (HSPG) by matrix metalloproteinase (MMP).



**Figure 5.** Implicated signaling pathways in the long term action of AD in C6 cells. Left side: the two main described pathways. Right side: new elucidated pathways.

# SYNAPTIC PLASTICITY

In the **hippocampus** is expressed eprin-A3 and its receptor EphA4 (Fig. 6 A).

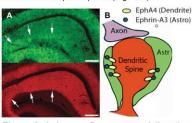
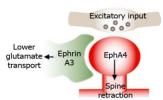


Figure 6. A. Immunofluorescence delineating the complementary expression of ephring-A3 (green) with EphA4 (red) in the adult mouse hippocampus. Murai, K. et al. Nature neuroscience, 6(2), 153. B. Proposed ephrin-A3/EphA4 mechanism.

	Localization	Control
EphA4	Dendritic spines	The morphology of postsynaptic spines (Fig. 6B, 8)
Ephrin- A3	Astrocytes	The glial glutamate transporters expression (Fig. 7)

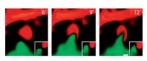


**Figure 7.** Interaction of dendritic EphA4 with glial ephrin-A3 activates astrocyte signaling resulting in lower glutamate transport.

Neuron-astrocyte interactions regulate spine morphology and glutamatergic transmission

Long lasting synaptic changes

Clinical outcome



**Figure 8.** Dual time-lapse imaging showing neuron (red) – astrocyte (green) interactions regulating spine morphology

## **❖FUTURE CHALLENGES OF AD**

- Rapid therapeutic action
- Rapid induce of the long lasting changes based on plasticity (not a chronic treatment)
- Reduce the risk of MDD recurrency
- Low rate of non-responding patients

## CONCLUSIONS

- AD act on astrocytes leading to an increase in the neurotrophic/growth factors transcription and release.
- AD re-establish the neuronal atrophy and neurogenesis induced by stress.
- AD induce the transcription of target genes in astrocytes resulting in synaptic plasticity.
- Astrocytes control the dendritic spines dynamics and glutamatergic transmission, thus stimulating long lasting synaptic changes leading to the clinical outcome.