

Nicotine-Conditioned Place Preference Requires Cannabinoid CB₂ Receptor

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The endocannabinoid system has long been known to play a role in the underlying mechanisms of drug reward and dependence. In particular, CB₁ receptor blockade reduces the rewarding effects of many drugs of abuse, including marijuana, morphine, ethanol, and nicotine. Recent work has also implicated the involvement of cannabinoid CB₂ receptors, in which CB₂ receptor agonists reduced cocaine self-administration, cocaine-induced hypermotility, and cocaine-enhanced extracellular levels of dopamine in the nucleus accumbens. Here, we evaluated whether CB₂ receptors also play a role in the nicotine dependence-related behaviors in mice.

Accordingly, we assessed the effects of CB₂ receptor agonists and antagonists as well as CB₂ null mice in the nicotine conditioned place preference (CPP) paradigm. For comparison, we tested the involvement of the CB₂ receptor on cocaine CPP to determine whether this receptor plays a similar role for both drugs. In this paradigm we determined preference score that was calculated for each animal as the difference between time spent in the drug-paired chamber on the post-conditioning day and time spent in the same chamber before conditioning (baseline). A positive number indicated a preference for the drug-paired side, whereas a negative number implied an aversion to the drug-paired side. A number of zero or near zero indicated no preference for either side. Results are shown as mean preference score \pm SEM. Additionally, we used CB₂ (+/+) and (-/-) mice given seven days of exposure to nicotine via alzet mini pumps (24 mg/kg/day) to determine whether the CB₂ receptor is necessary for mecamylamine (2 mg/kg, s.c.)-precipitated withdrawal. Finally, we tested whether deletion of CB₂ receptors affects nicotine-induced hypothermia and antinociception (Merritt et al., 2008). The sample size in each group was $n \geq 6$. Data were analyzed with two-way ANOVA followed by Bonferroni post hoc comparison.

Nicotine (0.5 mg/kg, s.c.)-induced CPP (169 \pm 21 s) was dose-dependently blocked by the selective CB₂ receptor antagonist, SR144528 (3 mg/kg, i.p.) (-4 \pm 10 s) in wild type mice [$p < 0.01$], and was absent in CB₂ (-/-) mice (28 \pm 16 s) [interaction of nicotine and genotype: $p < 0.01$]. Conversely, the combination of the CB₂ receptor agonist O-1966, with a subthreshold dose of nicotine (0.1 mg/kg, i.p.), elicited increased preference scores following increasing doses of O-1966 (nicotine alone: 5 \pm 12 s, and nicotine plus respective doses of O-1966 (1, 3, 5, 10, 20 mg/kg): 15 \pm 28 s, 84 \pm 16 s, 101 \pm 21 s, 107 \pm 23 s, 78 \pm 26 s) [interaction of O-1966 and nicotine: $p < 0.05$]. In marked contrast, O-1966 (20 mg/kg, i.p.) blocked cocaine (10 mg/kg, i.p.)-induced CPP in wild type mice (vehicle + cocaine: 179 \pm 18 s; O-1966 + cocaine: 39 \pm 16 s) [interaction of O-1966 and cocaine: $p < 0.001$], while CB₂ (-/-) mice showed unaltered cocaine CPP (151 \pm 16 s) [interaction of cocaine and genotype: $p = 0.7$]. CB₂ (+/+) and (-/-) nicotine-dependent mice showed almost identical precipitated withdrawal somatic and affective signs. Finally, deletion of the CB₂ receptor did not alter somatic, antinociceptive and hypothermic effects of acute nicotine administration (0.5, 2.5 mg/kg, s.c.).

Collectively, these results indicate that CB₂ receptors are required for nicotine reward as measured in the CPP test in the mouse, while it is not involved in nicotine withdrawal or the acute antinociceptive or hypothermic effects of nicotine. Moreover, these results suggest that CB₂ receptors play opposing roles in nicotine- and cocaine-induced CPP.

References:

Merritt LL et al, J Pharmacol Exp Ther 326(2):483-492, 2008.