

Attenuation of neuroinflammation by ciproxifan, a histamine H₃ antagonist in transgenic mouse models of Alzheimer's disease

In Alzheimer's disease (AD), neuroinflammation mainly occurs at the site of A β deposition. Apart from the direct toxic effect of A β to the neuronal cells, A β itself promotes neuroinflammation by activating microglia and astrocytes. Ciproxifan, A histamine H₃ receptor antagonist has been reported to enhance the release of neurotransmitters which play an important role in cognition (1). However, the role of ciproxifan on A β associated neuroinflammation has not been well documented.

Nine-month aged male B6.129-Tg (APP^{Sw})40B^{tla}/J mice (2) were administered repeatedly at 2 doses 1 (Tg-Cip 1 mg/kg, i.p.) and 3 mg/kg (Tg-Cip 1 mg/kg, i.p.) of ciproxifan for fifteen consecutive days. The same strain of the control group received intraperitoneal injection of normal saline (Tg-Con). A group of age matched male C57BL/6J was used as the wild type control (WT-Con). At the end of the treatment, brain tissues were collected to measure cyclooxygenase (COX) and pro-inflammatory cytokines, while plasma were collected to measure TGF-1 β (anti-inflammatory cytokine) using ELISA kits. The data was analysed using two-way ANOVA followed by Tukey-Kramer multiple comparison test.

The significant elevation ($P < 0.001$) of COX-1, COX-2, IL-1 α , IL-1 β and IL-6 levels and reduction ($P < 0.001$) of TGF-1 β level in the transgenic control group as compared to the wild type control confirm the occurrence of neuroinflammation in the transgenic model. The treatment of ciproxifan reduced both COX-1 and COX-2 activities, decreased the level of pro-inflammatory cytokines IL-1 α , IL-1 β and IL-6 and increased the level of anti-inflammatory cytokine TGF-1 β as compared to transgenic control (Table 1).

Table 1 Effect of ciproxifan on neuroinflammation in transgenic mouse model of AD.

	WT-Con	Tg-Co	Tg-Cip 1 mg/kg	Tg-Cip 3 mg/kg
COX-1 activity (nmol/min/ml)	2.32 \pm 0.08	4.28 \pm 0.16 [#]	4.08 \pm 0.12	2.09 \pm 0.23 ^{***}
COX-2 Activity (nmol/min/ml)	2.97 \pm 0.14	4.46 \pm 0.15 [#]	4.30 \pm 0.07	2.50 \pm 0.33 ^{***}
IL-1 α (pg/ml)	4.12 \pm 0.25	8.16 \pm 0.47 [#]	7.77 \pm 0.23	6.06 \pm 0.35 ^{**}
IL-1 β (pg/ml)	11.92 \pm 0.85	39.10 \pm 0.51 [#]	30.64 \pm 1.29 ^{***}	27.79 \pm 1.74 ^{***}
IL-6 (pg/ml)	2.67 \pm 0.12	5.15 \pm 0.26 [#]	3.91 \pm 0.21 ^{**}	2.90 \pm 0.24 ^{***}
TNF- β 1 (pg/ml)	194.21 \pm 11.72	75.65 \pm 7.97 [#]	154.75 \pm 3.06 ^{***}	164.33 \pm 7.47 ^{***}

The results were expressed as mean \pm SEM (n=6)

[#] $P < 0.001$ vs WT-Con group ; ^{**} $P < 0.01$, ^{***} $P < 0.001$ vs Tg-Con group

The significant reduction of both cyclooxygenase and pro-inflammatory cytokines (IL-1 α , IL-1 β and IL-6 levels) as well as elevation of an anti-inflammatory cytokine TNF- β 1 level mediated by ciproxifan may signify the potential mechanism it exerts the beneficial effects against neurodegenerative diseases such as AD.

(1). Vohora and Bhowmik (2012). *Front Syst Neurosci* **6**: 72.

(2). Ryman *et al.* (2008). *Neurobiol Aging* **29**: 1190-1198.