Inhibition of Morphine-Induced cAMP Overshoot: A Cell-Based Assay Model in a High-Throughput Format

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Abstract Opiates are not only potent analgesics but also drugs of abuse mainly because they produce euphoria. Chronic use of opiates results in the development of tolerance and dependence. Dr Marshall Nirenberg's group at the National Institutes of Health (NIH) was the first to use a cellular model system of Neuroblastoma × Glioma hybrid cells (NG108-15) to study morphine addiction. They showed that opiates affect adenylyl cyclase (AC) by two opposing mechanisms mediated by the opiate receptor. Although the cellular mechanisms that cause addiction are not yet completely understood, the most observed correlative biochemical adaptation is the upregulation of AC. This model also provides the opportunity to look for compounds which could dissociate the acute effect of opiates from the delayed response, upregulation of AC, and thus lead to the discovery of non-addictive drugs. To identify small molecule compounds that can inhibit morphine-induced cAMP overshoot, we have validated and optimized a cell-based assay in a high throughput format that measures cellular cAMP production after morphine withdrawal. The assay performed well in the 1536-well plate format. The LOPAC library of 1,280 compounds was screened in this assay on a quantitative high-throughput screening (qHTS) platform. A group of compounds that

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novel inhibitors of morphine induced addiction from a larger scale screening. **Keywords** Adenylyl cyclase (AC) · Adenosine-3',5'-monophosphate (cAMP) · Quantitative high-throughput screening (qHTS) · μ Opioid receptor (morphine receptor) · Human embryonic kidney293- μ opioid receptor cell line

(HEK-MOR) · Homogeneous time-resolved fluorescence

can inhibit morphine-induced cAMP overshoot were

identified. The most potent compounds are eight naloxone-

related compounds, including levallorphan tartrate, naloxon-

azine dihydrochloride, naloxone hydrochloride, naltrexone

hydrochloride, and naltriben methanesulfonate. The gHTS

approach we used in this study will be useful in identifying

Introduction

(HTRF)

Opiates derived from opium poppy have been in use for centuries (Kritikos and Papadaki 1967; Way 1967) to treat severe pain. However, their use in patients is limited because of the side effects such as nausea, vomiting, constipation, and respiratory depression. In addition, continued use of opiates results in the development of tolerance and physical dependence (O'Brien 2005). A major aim in opiate research is to continue to develop drugs that may have analgesic effects but do not produce tolerance and dependence. Although a large number of studies have been done in vivo, it is difficult to interpret the data due to the various effects these drugs exert on a complex organ such as the brain.

In the late 1970s, Dr. Nirenberg's laboratory at the National Institutes of Health (NIH) studied the effect of opiates on cultured neuroblastoma cells. Among the several



cell lines screened (Klee and Nirenberg 1974), a Neuroblastoma × Glioma hybrid cell line (NG108-15) was found to have abundance of opiate receptors. Nirenberg and his colleagues (Sharma et al. 1975a, b) discovered that opiate receptors in NG108-15 cells were coupled to adenylyl cyclase (AC), and the acute effect of morphine addition resulted in a decrease in AC activity and reduced cAMP levels in the cells. Similar observations were made with brain homogenates but the heterogeneity of the cell types and the apparent lability of brain enzymes made it difficult to draw solid conclusions (Collier and Roy 1974). Sharma et al. further showed that chronic exposure of NG108-15 cells to morphine resulted in an increase in AC activity (Sharma et al. 1975a, b, 1977). Sharma et al. in 1975 first observed the compensatory increase of AC on morphine withdrawal either by adding the antagonist, naloxone, or washing the cells. This phenomenon is now known as hypertrophy of the cAMP system, cAMP overshoot, superactivation, supersensitization, or heterologous sensitization and is postulated to be responsible for the development of tolerance and dependence (Koob and Bloom 1988; Nestler and Aghajanian 1997; Watts 2002; Charles and Hales 2004). Pharmacological studies have defined three types of opioid receptors, μ , δ , and k (Loh and Smith 1990). Activation of all three types of receptors leads to inhibition of AC, and this effect is mediated through G proteins (Law and Loh 1999; Law et al. 2000).

There is substantial evidence showing that opiate dependence is a result of adaptive changes in signal transduction networks in several brain regions. Upregulation of AC is one of the most robust signaling adaptations to repeated morphine exposure in the locus coeruleus (Zachariou et al. 2008). Activation of the μ opioid receptors in the locus coeruleus by acute morphine addition decreases cAMP and AC activity, protein kinase A levels, and ultimately phosphorylation of cAMP response element-binding protein (Nestler and Aghajanian 1997). In the nucleus accumbens/ striatal neurons, morphine withdrawal induces cAMP superactivation, which requires upregulation of an activator of G protein signaling 3 (AGS3), and cAMP increases as a function of morphine withdrawal time (Fan et al. 2009). Opiate dependence has also been suggested to be linked to molecular chaperones such as heat shock proteins (Hsp90). Inhibition of Hsp90 attenuates AC sensitization after chronic morphine treatment (Koshimizu et al. 2010).

In order to identify potential inhibitors of morphine induced cAMP overshoot, we have validated our cellular model of opiate addiction. This cell-based assay was optimized and miniaturized first in 384- and later in 1536-well plate format. Using this optimized assay, we have screened the LOPAC (Library of Pharmacologically Active Compounds) collection of 1,280 compounds in a quantitative high-throughput screening (qHTS) format,

which provides concentration-dependent pharmacological information on all compounds directly from the screen (Xia et al. 2009a, b). The assay was highly robust in a 1536-well format. From the primary screen, we have identified 24 inhibitors with IC50s ranging from 0.12 to 18 μ M. Therefore, this cell-based assay model can be useful in identifying the inhibitors of morphine induced addiction.

Materials and Methods

Cell Line and Materials

HEK 293-MOR cell line (HEK-MOR), kindly provided by Dr. Horace Loh (Department of Pharmacology, Medical School at University of Minnesota), stably express mu opioid receptor-1. These cells were maintained in advanced DMEM (Invitrogen, Carlsbad, CA, USA) containing 5% fetal bovine serum (HyClone, Logan, UT, USA), 2 mM glutaMAX (Invitrogen), 100 units/ml penicillin/100 μg/ml streptomycin (Invitrogen), and 0.2 mg/ml G418 (Invitrogen)—complete culture medium. Ro20-1724, 3-isobutyl methyl xanthine (IBMX), naloxone hydrochloride dihydrate and morphine sulfate pentahydrate were from Sigma-Aldrich St. Louis, MO, USA. NKH 477 was from Tocris Bioscience (Ellisville, MO, USA).

Morphine Tolerance Cell Model and cAMP Assay

For a 384-well plate format, HEK–MOR cells were suspended in the complete culture medium and were dispensed in 10-μl aliquots in white/solid bottom 384-well plates (Greiner Bio-One North America, NC, USA). These were incubated for 18 h at 37°C in 5% CO₂ and 95% air atmosphere. cAMP levels were measured in the presence of NKH 477 and phosphodiesterase inhibitors. Final concentrations of Ro20-1724 and IBMX were 0.5 mM. Ro20-1724 and IBMX stock solutions were prepared in DMSO and diluted with complete culture media to a final concentration of 0.3% DMSO in the assay. NKH 477, morphine, and naloxone solutions were prepared in complete culture media.

The cAMP production from cells was measured using cAMP dynamic HTRF kits (Cisbio Bioassays, Bedford, MA, USA) according to manufacturer's instructions. Using the HTRF technology, the assay is based on competition between native cAMP produced by cells and cAMP labelled with the dye d2. The tracer binding is visualized by an anti-cAMP antibody labeled with cryptate. In brief, after the compound treatment, 12.5 µl each of d2 and cryptate were added into the assay plates. The plates were sealed and incubated at room temperature (RT) in the dark for 1 h. The fluorescence intensity of the assay plates was



measured at 314-nm excitation, and 668- and 620-nm emissions in a FlexStation 3 Microplate Reader (Molecular Devices, Sunnyvale, CA, USA). Data were expressed as the ratio of 668-/620-nm emissions, and then were converted into cAMP levels according to cAMP standard curve. The concentration–response curves were fitted using the nonlinear regression analysis program, GraphPad Prism (GraphPad Software, La Jolla, CA, USA).

For a 1536-well plate format, HEK-MOR cells were suspended in the complete culture medium and dispensed at 1,000 cells per 4 µl volume per well in 1536-well tissue culture-treated white/solid bottom plates (Aurora Biotechnologies, Carlsbad, CA) using a Flying Reagent Dispenser (FRD, Aurora Discovery, Carlsbad, CA). After the cells were incubated at 37°C with 5% CO₂ for 6 h, 1 µl of 1 µM morphine (final concentration) was added followed by addition of 23 nL of compound or DMSO into the assay plates using a pin tool (Kalypsys, San Diege, CA). The plates were incubated at 37°C with 5% CO₂ for overnight (18 h). On the next day 1 µl of stimulation mixture containing 0.5 mM Ro20-1724, 0.5 mM IBMX, 0.1 mM Naloxone, and 25 nM NKH 477 (final concentration) was added into the plates. After the assay plates were incubated at 37°C for 10 min, 2 µl of 5.2× d2 and cryptate were added. The plates were incubated at RT in the dark for 1 h. The fluorescence intensity of the assay plates was measured at 340-nm excitation and 665- and 620-nm emissions using an Envision plate reader (Perkin Elmer, Boston, MA). Data were expressed as the ratio of 665-/620-nm emissions in the primary screen.

qHTS and Data Analysis

The Library of Pharmacologically Active Compounds (LOPAC, Sigma-Aldrich) which contains 1,280 compounds was screened in this study. Compound plates were prepared as inter-plate titrations of seven concentrations with the four left columns left in each plate reserved for controls. Pin tool transfer of compounds was employed to assay plates, which resulted in a 217-fold dilution. The final compound concentration in the 5-µl assay volume ranged from 3 nM to 46 µM. Analysis of the primary screening data was performed as previously described (Xia et al. 2009a). In brief, raw plate reads for each titration point were first normalized relative to the morphine control (1 µM, 100%) in the presence of 25 nM NKH 477 and DMSO without morphine in the presence of 25 nM NKH 477 wells (basal, 0%), and then corrected by applying a pattern correction algorithm using compound-free control plates (DMSO plates). Concentration-response titration points for each compound were fitted to the Hill equation yielding concentrations of half maximal inhibition (IC₅₀) and maximal response (efficacy) values.

Cell Viability Assay

In order to exclude the compounds which attenuate morphine tolerance because of the cytotoxic effect of the compound, the LOPAC library was also tested in a cellviability assay that measures intracellular ATP content using a luciferase-coupled ATP quantitation assay (CellTiter-Glo®, Promega, Madison, WI). HEK-MOR cells were dispensed at 1,000 cells per well in 1536-well white/solid bottom assay plates (Greiner Bio-One North America, Monroe, NC) using a FRD. The assay plates were incubated for 5 h and followed by addition of compounds via a pin tool. The assay plates were incubated for 18 h at 37°C. At the end of the incubation period, 5 μ l of CellTiter-Glo® reagent was added, plates were incubated at RT for 30 min, and luminescence intensity determined using a ViewLux plate reader (Perkin Elmer).

Results and Discussion

Assay Validation and Optimization in 384-Well Plates

Acute Effect of Morphine on cAMP Levels

HEK–MOR cells were used in the studies because of the homogeneous expression of mu opioid receptors and the high magnitude of overshoot in cAMP on withdrawal as shown in the previous studies (El Kouhen et al. 1999). NKH 477 stimulated cAMP production in concentration-dependent manner with an EC₅₀ of 0.13 μ M. In the presence of 1 μ M morphine, the concentration–response curve of NKH 477 was shifted to the right with an EC₅₀ of 0.83 μ M (Fig. 1). The acute inhibition of morphine on cAMP production confirmed the previous studies (Sharma et al. 1975a, b).

Cell Density Optimization

At the cellular level, morphine dependence is characterized by a significant elevation of cAMP levels after morphine withdrawal. To find optimal concentration of cells, three different cell numbers were treated with or without morphine (1 μM) for 18 h. Morphine withdrawal was mimicked by treating the cells with naloxone (1 mM) for 10 min (without washing away morphine in the plates) in the presence of NKH 477 (0.1 μM) and Ro20-1724 + IBMX (0.5 mM each). As shown in Fig. 2, the cAMP levels increased significantly after prolonged morphine exposure compared with the control at all three cell densities. Withdrawal of the opiate agonist resulting in cAMP overshoot was also reported in human neuroblastoma cell line, SHSY5Y, which expresses both the μ and δ



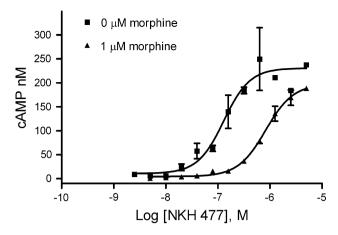


Fig. 1 Acute effect of morphine on cAMP levels. HEK–MOR cells (at 2,000 per well) suspended in 10-µl complete culture media were plated into each well in 384-well plates. After incubation for 18 h, 15 µl of NKH 477 at various concentrations with Ro20-1724 (0.5 mM) and IBMX (0.5 mM) in the absence or the presence of 1 µM morphine were added, and the plates were incubated for 10 min. cAMP levels in the cells were measured. Values are mean \pm SD of the results from 12 wells or more (in triplicate lanes) in a single experiment

receptors (Yu et al. 1990; Ammer and Schulz 1993; Wang and Gintzler 1994), and the μ opioid-transfected CHO cells (Avidor-Reiss et al. 1995). In the neuroblastoma N2A cells, short- and long-term regulations of AC by δ opioid receptors are mediated by G α i2 (Zhang et al. 2006).

Time Course of Morphine Withdrawal

After the cells were treated with or without morphine for 18 h, morphine withdrawal was tested at 10, 30, and

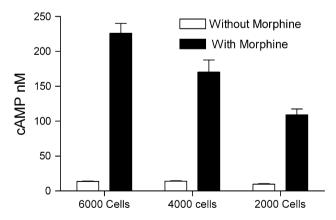


Fig. 2 Cell density optimization. HEK–MOR cells at different densities were dispensed into 384-well plates. The assay plates were treated with or without morphine (1 μM) for 18 h. Withdrawal was mimicked by addition of mix with NKH 477 (0.1 μM), naloxone (1 mM), and phosphodiesterase inhibitors. The plates were incubated for 10 min, and cAMP levels in the cells were measured. Values are mean \pm SD of the results from 12 wells or more (in triplicate lanes) in a single experiment

60 min after naloxone (1 mM) treatment, cAMP overshoot was observed in the morphine-treated group as compared with the control group at all three time points (Fig. 3). In separate experiments, cAMP levels (at zero time) were similar (2-4 nM) in both control (without morphine) and morphine-treated groups (data not shown in the figure). The assay window as defined by the cAMP level difference between the untreated control and the morphine-treated cells is much larger in the 10-min treatment group than in the 30- and 60-min treatment groups (Fig. 3). The decrease of cAMP in 30-min treatment group might be due to the degradation of phosphodiesterase inhibitors in the buffer. Therefore, 10 min was the optimal time point for morphine withdrawal in this cell model. It is pertinent to mention that in the homogeneous assay where cells are neither washed nor morphine is removed, the withdrawal at time points longer than 10 min is not meaningful.

Optimization of Naloxone Concentration During Withdrawal

Naloxone concentrations were further optimized. While an increase in cAMP is observed at all three concentrations of naloxone, at the 5-mM concentration, cAMP levels are significantly lower in both cells treated with or without morphine (Fig. 4). This could be due to non-specific effects of naloxone which may not be related to opioid receptors. In the absence of naloxone, there was no difference of cAMP levels (20–22 nM) in both untreated control and morphine-treated cells (data not shown in the figure). Therefore, 0.1 mM of naloxone along with 10-min-incubation time to induce cAMP overshoot was chosen to further optimize the assay in the 1536-well plate format.

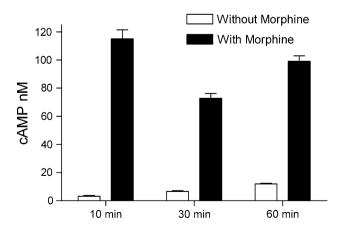


Fig. 3 Time course of cAMP overshoot. Conditions were the same as in Fig. 2 except that 2,000 cells were plated per well, and withdrawal was done at different time intervals. Values are mean \pm SD of the results from 12 wells or more (in triplicate lanes) in a single experiment



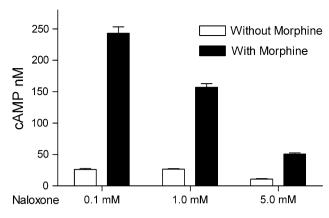


Fig. 4 Effect of different concentrations of naloxone on cAMP. Conditions were the same as in Fig. 2 except that 2,000 cells were plated per well and withdrawal was mimicked in the presence of different concentrations of naloxone. Values are mean \pm SD of the results from 12 wells (in triplicate lanes) in a single experiment

Assay Optimization and Miniaturization in the 1536-Well Plate Format

The assay was miniaturized into the 1536-well plate format with a final assay volume of 5 μl. To find the optimal assay window in a 1536-well plate, several concentrations of NKH 477 were tested either in the absence or the presence of morphine. During data analysis, the ratio of 665 nm/620 nm was used instead of converting the ratio to cAMP concentrations. As shown in Table 1, the highest signal-to-background ratio of 2.5-fold and the best Z factor of 0.65 were observed in the 25 nM NKH 477-treatment group. These results indicate that this assay in a 1536-well plate format was robust and ready for high-throughput screening. During the screen, 25 nM NKH 477 was employed to stimulate cAMP production either with or without morphine treatment.

Identification of Compounds that can Attenuate Morphine-Induced cAMP Overshoot from the LOPAC Library Screen

The LOPAC library, containing 1,280 compounds with known pharmacological activities, was screened in the cAMP assay in the presence of 25 nM of NKH 477. The average signal-to-background ratio from nine plates was 2.0 ± 0.1 , and the average CV (%) from the DMSO controls and low concentration (up to 9.2 μ M) plates was 6.9 ± 0.5 . The average Z factor was 0.58 ± 0.03 from the primary screen.

From the LOPAC library screening, 24 of the 1,280 LOPAC compounds were identified with <20 μ M potency and >40% efficacy. The IC₅₀ values of these 24 compounds are listed in Table 2. Among these 24 compounds, eight were structural analogs of naloxone, including levallorphan tartrate, naloxonazine dihydrochloride, naloxone

Table 1 Assay performance in a 1536-well plate format

NKH 477 (nM)	Control	Morphine	S/B, fold	Z factor
10	3.34 ± 0.17	1.63 ± 0.13	2.05	0.45
25	2.74 ± 0.13	1.08 ± 0.05	2.52	0.65
50	2.06 ± 0.12	0.88 ± 0.04	2.33	0.56
100	1.16 ± 0.07	0.75 ± 0.03	1.55	0.21

Each value from control (without morphine treatment) and morphine treatment is the mean of ratio (665 nm/620 nm) \pm SD from 288 wells in 1536-well plates

Table 2 Summary of compounds with potency and efficacy identified from LOPAC library screen

Compound name	Potency (µM)	Efficacy (%)
Cantharidic acid	14.58	86
Cantharidin	12.99	63
ET-18-OCH3	18.35	144
Ifenprodil tartrate	8.20	87
I-OMe-tyrphostin AG 538	16.35	67
L-687,384 hydrochloride	14.58	138
Levallorphan tartrate	0.33	70
ML-7	16.35	61
Naloxonazine dihydrochloride	0.46	95
Naloxone benzoylhydrazone	0.41	48
Naloxone hydrochloride	0.21	91
Naltrexone hydrochloride	0.12	102
Naltriben methanesulfonate	2.31	128
Naltrindole hydrochloride	0.82	72
Nor-Binaltorphimine dihydrochloride	4.61	119
N-p-tosyl-L-phenylalanine chloromethyl ketone	18.35	49
Parthenolide	16.35	191
Propionylpromazine hydrochloride	16.35	41
R(-)- N -allylnorapomorphine hydrobromide	16.35	65
Rac-2-ethoxy-3-octadecanamido-1- propylphosphocholine	18.35	101
Retinoic acid p-hydroxyanilide	18.35	46
Ropinirole hydrochloride	18.35	92
SCH-202676 hydrobromide	16.35	85
TBB	14.58	54

Efficacy is defined as % to the morphine control (1 $\mu M)$ in the presence of 25 nM NKH 477

benzoylhydrazone, naloxone hydrochloride, naltrexone hydrochloride, naltriben methanesulfonate, and naltrindole hydrochloride. The most potent compound identified from the screening was naltrexone hydrochloride with an IC₅₀ of 0.11 μ M, followed by naloxone hydrochloride (IC₅₀ = 0.20 μ M), levallorphan tartrate (IC₅₀ = 0.32 μ M), naloxone benzoylhydrazone (IC₅₀ = 0.41 μ M), naloxonazine dihydrochloride (IC₅₀ = 0.46 μ M), and naltrindole hydrochloride (IC₅₀ = 0.81 μ M). Naloxone and its analogs, such



as naltrexone (Advokat 1981) and naltrindole (Hepburn et al. 1997), have been shown effective in treating morphine tolerance in rats. All other compounds identified as active from the screening showed potencies (IC $_{50} > 5~\mu\text{M}$) markedly lower than the naloxone analogs and are of less interest. The data from the present study suggest that this assay can be employed to screen large compound collections to identify small molecule compounds that can attenuate morphine tolerance.

Conclusions

We have developed and validated a cell-based assay model of inhibition of morphine-induced cAMP overshoot in a high-throughput format. This cell-based assay has been optimized into a 384-well plate format and further miniaturized into a 1536-well plate format. To validate this assay, we have screened the LOPAC library. From the primary screen, we have identified 24 inhibitors. Among these compounds, the most potent compounds are naloxone derivatives/analogs with IC₅₀s ranging from 0.12 to 4.61 μM. These data suggest that this assay can be used for large-scale library screening, and a larger compound screen may identify more potent compounds that inhibit morphineinduced cAMP overshoot. The identification of compounds that inhibit the overshoot of cAMP without affecting the acute effect of morphine on cAMP levels will open a plethora of research activities to understand the mechanism of their action at behavioral, cellular, and molecular levels. Such future studies may help us better understand the precise role played by different pathways that contribute to opiate tolerance and dependence and ultimately to addiction.

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