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Long-term changes in social interaction and reward following repeated MDMA administration to adolescent rats without accompanying serotonergic neurotoxicity

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Abstract *Rationale:* MDMA is a popular drug of abuse in adolescents which causes serotonergic neurotoxicity in adult but not young rodents. However, few studies have examined the long-term behavioural consequence of MDMA and it is unclear whether such changes occur in the absence of neurotoxicity. *Objectives:* The present study examined whether treatment of young rats with MDMA produced long-term behavioural alterations without accompanying serotonergic neurotoxicity. *Method:* Male Lister hooded rats ($n=36$, postnatal day (PND) 39) received MDMA (7.5 mg/kg IP, twice daily for 3 days) or saline (1 ml/kg IP) and the acute effect on open field behaviour and body temperature was monitored. Following drug withdrawal, social interaction in pre-treatment- and weight-matched rat pairs, cortical [^3H]paroxetine binding and hippocampal and frontal cortical serotonin and dopamine levels (PND 53, $n=12$) and conditioned place preference (PND 70, $n=24$) to cocaine (5 mg/kg IP) were analysed. *Results:* MDMA elicited the expected immediate serotonin syndrome with significant hyperlocomotion, decreased rearing and hypothermia. Twelve to 29 days after the last MDMA injection social interaction was significantly attenuated (by 41%) and the sub-threshold conditioned place preference to cocaine was significantly enhanced compared with that in saline controls, although no significant side preference to cocaine occurred in the latter. MDMA pre-treatment did not alter 5-HT levels or cortical [^3H]paroxetine binding. *Conclusion:* MDMA administration to adolescent rats reduced social interaction and enhanced the sub-threshold rewarding effect of cocaine at adulthood, despite an absence of accompanying serotonergic and dopaminergic neurotoxicity.

Keywords MDMA · Social interaction · Conditioned place preference · Serotonin · Cocaine

Introduction

The popular recreational drug, 3,4-methylenedioxymethamphetamine (MDMA, “Ecstasy” or “E”) elicits a characteristic psychoactive syndrome comprising euphoria, enhanced well-being, derealisation and cognitive alterations in man (Peroutka et al. 1988). Although the precise underlying pharmacological mechanisms have not been established in humans, carrier-mediated release and/or inhibition of reuptake of 5-hydroxytryptamine (5-HT) and dopamine appear to account for the acute behavioural correlate seen with similar doses in rodents (Green et al. 1995; Iravani et al. 2000; Morgan 2000). In addition, MDMA reduces the activity of the biosynthetic enzyme tryptophan hydroxylase (Schmidt and Taylor 1987) and causes a longer-term depletion of the product, 5-HT, preferentially from fine-diameter neurones arising from the dorsal raphe nucleus (Mamounas et al. 1991). This is accompanied by depletion of serotonin transporter sites (Battaglia et al. 1998; O’Shea et al. 1998) and immunohistochemical evidence of 5-HT nerve terminal damage (Commins et al. 1987; O’Hearn et al. 1988; Fischer et al. 1995). Both effects are indicative of serotonergic neurotoxicity, which lasts for months in rats and years in non-human primates (Hatzidimitriou et al. 1999; Ricaurte et al. 1992). Increasing evidence suggests that MDMA also causes serotonergic neurotoxicity, reducing 5-HT transporter (5-HTT) levels, in the human cortex (McCann et al. 1998; Semple et al. 1999) associated with cognitive impairments (Morgan 1999) and heightened impulsivity (Parrott et al. 1998) in regular users. Furthermore, two groups (McCann et al. 1999; Gerra et al. 2000) have reported a blunted prolactin response to 5-HT agonist challenge following 3 weeks and 12 months of abstinence in regular MDMA users, consistent with a long-lasting loss of serotonergic neuronal function following drug with-

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drawal. Given the increasing use of MDMA by young adults, who generally perceive the drug to be safe (Green et al. 1995; Curran 2000), it is pertinent to examine the long-term behavioural impact of treating young rats with low doses of MDMA.

Although the neurotoxic effect has received much attention, few studies have assessed the long-term behavioural consequence of MDMA in rats and it is unclear whether the neurotoxic and behavioural changes are interrelated or independent. However, in the rhesus monkey behavioural tolerance to MDMA has been reported without accompanying depletion of 5-HT in any brain region examined, although hippocampal 5-HT uptake was reduced (Frederick et al. 1995), suggesting dissociation of the two effects. The extent of MDMA-induced serotonergic neurotoxicity in rodents depends on the dosage regimen, strain, body temperature and age (Broening et al. 1995; Green et al. 1995; O'Shea et al. 1998). Of particular interest, rats up to postnatal day (PND) 35–40 are resistant to the neurotoxic effects of MDMA (following single injections, 10–40 mg/kg SC), which causes no significant decrease in paroxetine labelled 5-HTT density or 5-HT levels (Aguirre et al. 1998; Broening et al. 1994). However, only one very recent study has examined the long-term behavioural effect of a non-neurotoxic dosage regimen in young rats (Broening et al. 2001). In a preliminary study (Bellerby et al. 1999), we showed that MDMA (20 mg/kg IP, twice daily for 2 days) produced a long-term reduction in social interaction without accompanying 5-HT neurotoxicity when given to young rats (PND 28–29). The present study extends these observations, concomitantly examining the long-term effect on neurochemical markers of both serotonergic and dopaminergic neuronal function and social and reward-related behaviour.

Materials and methods

Animals

Male Lister hooded rats (Charles River, UK, $n=36$), weighing 165 ± 1 g at the start (PND 39), were housed in groups of four in a temperature controlled ($21 \pm 2^\circ\text{C}$) environment on a 12-h light/dark cycle (lights on 0700–1900 hours) in the Biomedical Sciences Unit (The University of Nottingham). Rats had access to food (Beekay-Standard rat and mouse diet) and water ad libitum and were weighed twice a week throughout the study.

On PND 39–41, each rat was injected with either MDMA (7.5 mg/kg IP, racemic; Sigma, UK) or, vehicle, saline (0.154 M NaCl, 1 ml/kg IP) twice daily (between 1000–1100 and 1630 and 1700 hours) for 3 consecutive days. On PND 39 rectal temperature was recorded before and 45 min after the first injection, using a Portec Instrumentation Ltd, P9005, thermocouple probe and open field behaviour measured as detailed below. In addition, following 12 and 26–29 days withdrawal, respectively, social interaction and conditioned place preference with cocaine were recorded and neurochemical evidence of serotonergic and dopaminergic neurotoxicity determined in post-mortem brain tissue, as described below.

The dose and duration of MDMA treatment was chosen following preliminary experiments that showed this to elicit a profound acute serotonin syndrome without subsequent animal loss. The treatment age was selected on the basis of previous studies

showing this to be the critical point at which susceptibility to serotonergic neurotoxicity begins (Aguirre et al. 1998; Broening et al. 1994).

All experiments were performed in accordance with the UK animals (Scientific Procedures Act 1986) using a blind drug treatment protocol. Between each behavioural test, all apparatus were cleaned with 20% (v/v) ethanol to remove odour cues.

Acute open field behaviour

Fifteen minutes after the first MDMA injection on PND 39, rats ($n=36$) were placed in separate activity monitor chambers (Medical Physics, University of Nottingham) to record locomotion and rears separately. Each chamber consisted of a clear acrylic open field box, $40 \times 20 \times 25$ cm high, with a wire mesh lid. Five parallel infrared beams, 7.5 cm apart, crossed the chamber at two different heights. The lower beams (3.5 cm above the floor) measured locomotion and the upper beams (7 cm above the floor) rears. To prevent false recording of locomotion by small movements such as grooming, a count was only generated from the lower detectors when two adjacent beams were broken simultaneously in a consecutive sequence. For each rat activity was recorded for 30 min (15–45 min post-injection) in 5-min epochs using "Activity Monitor" software on an Apple Macintosh IICx computer (Clemett et al. 1998).

In addition, components of the serotonin behavioural syndrome, (reciprocal forepaw treading, lateral head weaving and flat body posture), were scored separately by an individual who sat 1 m away and screened by a curtain from the chamber. Each behaviour was rated (0 if absent, 1 present <10 s, 2 if present >10 s and 3 if continuous) for 20 s on four occasions at one minute intervals from 20 to 24 min post-injection. Thus for each behaviour the maximum possible summated score was 12. As an index of sympathetic activity and anxiety, the number of faecal pellets produced in the chamber was also recorded.

Social interaction

Given the considerable evidence that MDMA affects social behaviour in both man and animals the impact of pre-treatment on social interaction was studied. Twelve days after the last injection, without further drug administration, social interaction between pairs of rats was examined in a circular (75 cm diameter 45 cm high) arena with a matt black floor divided by white lines into eight outer and eight inner radial zones, under dim light (50 Lux) familiar conditions. Each rat was familiarised to the arena for 15 min on 2 consecutive days in the week preceding the test. Each pair of rats had received the same pre-treatment (either saline or MDMA), were weight matched (to within 20 g) and were from a different litter. At the start of the test, two rats were placed at opposite sides of the arena facing each other and activity monitored for 10 min. Aggressive (biting or boxing each other), avoidance (going over or under the other rat), passive (lying motionless in contact with each other) or exploratory (sniffing the other rat or following with its head over the base of the other rat's tail) interaction were timed separately using a computerised video-tracking system (Ethovision ColourPro videotrack system; Noldus Information Technology, The Netherlands). Summation of all four forms of interaction for each rat was used to calculate the total social interaction. Locomotion was analysed from a video-recording by counting the number of lines crossed by both front paws. For analysis, the mean score of the two paired rats was calculated for each individual behaviour, the total interaction and the locomotion and the mean value used for statistical analysis, since the behaviour of each rat within the pair is not independent.

Conditioned place preference

To ascertain whether reward mechanisms were altered after MDMA, the impact on condition place preference to cocaine was

determined using a protocol similar to that utilised in previous studies (Cheer et al. 2000). Commencing on PND 68, (26 days after the last injection) conditioned place preference was carried out in a square open field arena (30×60×40 cm high, at 80 Lux) that could be divided into two equal size compartments by a removable guillotine door. In one compartment, the walls had 2.5 cm thick, vertical black and white stripes, while the other side had thin (1 cm) black and white stripes. The floor was the same colour (black) and texture (smooth) in both compartments. Each rat was handled 5 days a week throughout the whole study and acclimatised to the box prior to testing in a preconditioning phase, by being placed in the centre of the whole arena for 10 min, on 3 consecutive days (PND 62–64) prior to the test day. During these trials movement was tracked, and any rat spending >350 s on one side would have been excluded, thus ensuring that no natural side preference was expressed.

During the conditioning phases, on PND 68 and 69, rats were assigned at random to receive either cocaine (5 mg/kg, IP) or saline (0.154 M; 1 ml/kg IP) and immediately post-injection confined (for 15 min) in one compartment of the box. On the next day, in the test phase, each rat was placed facing the side wall at the intersection of the two compartments and allowed to explore (10 min) to assess preference for the drug-paired compartment using a computerised video-tracking system and Ethovision software.

Neurochemical analyses

Since drug treatment during the conditioned place preference test would affect subsequent neurochemical measures, six rats from each treatment group (MDMA or saline), selected at random were stunned and decapitated immediately after the social interaction test. The frontal cortex, hippocampus and brainstem were rapidly removed, frozen in liquid nitrogen and stored at –80°C for subsequent analysis by HPLC as detailed below. In addition, the left cortical hemisphere was placed in TRIS buffer for [³H]paroxetine binding (see below).

HPLC of 5-HT, dopamine and their metabolites

5-HT, 5-hydroxyindoleacetic acid (5-HIAA), dopamine, DOPAC and homovanillic acid (HVA) were separated from frontal cortex, hippocampus and brainstem extracts and measured by HPLC-ED using a Hypersil 3 µm C18 column (10 cm×4.6 mm ID; Phenomenex) and values compared with those of 2 pmol standards. Samples were extracted in perchloric acid (1 ml, 0.1 M containing 1.6 mM sodium metabisulphite) by sonication on ice (30 s, Soniprep 150, MSE) followed by centrifugation (13,000 g, for 10 min at 4°C; Beckman, USA, Microfuge 12). The resultant supernatant was filtered (0.45 µm syringe filters, Millipore) and quantified by electrochemical detection (Antec Leyden, The Netherlands) at a potential of +0.7 V with a mobile phase consisting of 0.15 M NaH₂PO₄, 0.1 mM EDTA, 0.5 mM 1-octanesulphonic acid and 13% (v/v) methanol (pH 3.8).

Cortical [³H]paroxetine binding

[³H]Paroxetine binding to cortical homogenates (800 µl) was performed in triplicate using 50 mM TRIS (pH 7.4 containing 120 mM NaCl and 5 mM KCl), 10 nM paroxetine and 1 mM 5-HT to define specific binding according to the method of Hewitt and Green (1994). In brief, hemi-cortex was homogenised in 25 vol ice cold TRIS, centrifuged (30,000 g, for 10 min at 4°C, Sigma) and the pellet washed and re-centrifuged twice prior to suspension in TRIS buffer at 10 mg tissue/ml. Assay tubes were incubated for 60 min at room temperature and terminated by rapid filtration through filters pre-soaked in 0.05% v/v polyethylenimine using a Brandel cell harvester (model M-24, Maryland, USA).

Statistics

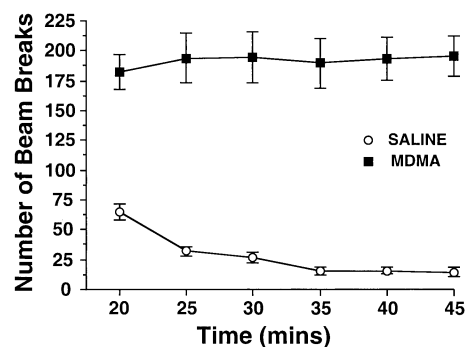
Behaviours recorded objectively or timed and neurochemical data were analysed using Student's unpaired *t*-test, while components of the serotonin behavioural syndrome that were rated were analysed with the Mann-Whitney *U*-test. Two- and one-way ANOVA followed by Duncan's New Multiple Range post-hoc test was used to assess conditioned place preference and time course affects. *P*<0.05 was considered significant.

Results

Effect of acute MDMA administration on rectal temperature and behaviour

Immediately following the first injection saline treated rats showed a low level of locomotion in the open field that declined, as they became familiar with the activity box (Fig. 1A). In contrast, MDMA (7.5 mg/kg IP) significantly increased locomotion which was sustained throughout the 30 min observation period, such that there was a significant main effect of treatment [ANOVA, *F*(1,204)=419.0, *P*=0.0001; Fig. 1A] and a marked increase in total locomotion (Student's *t*-test, *P*<0.0001). By comparison, the total number of rears (Fig. 1B) was significantly less in MDMA than in saline controls (*P*<0.0001) and there was a significant treat-

A LOCOMOTOR ACTIVITY



B REARS

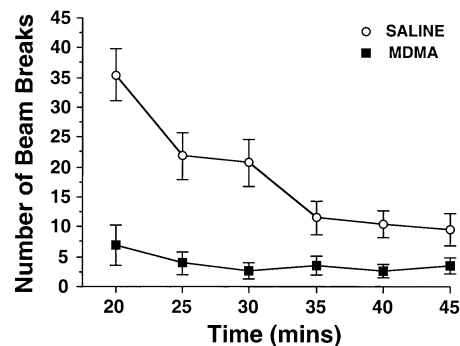


Fig. 1 Comparison of the effect of the first injection of MDMA (7.5 mg/kg IP, *n*=18) or saline (1 ml/kg, *n*=18) on; **A** locomotor activity and **B** rearing (mean±SEM counts over 5 min, plotted against time from the injection at the end of the recording epoch)

Table 1 Comparison of the effect of the first injection of MDMA (7.5 mg/kg IP) or saline (1 ml/kg) on stereotype behaviours [median (interquartile (range))] and the number of faecal pellets and body temperature (mean±SEM)

Measurement	Saline	MDMA
Reciprocal forepaw treading	0 (0)	6 (5) ***
Lateral head weaving	0 (0)	3.5 (3) ***
Flat body posture	0 (0)	8.5 (4) ***
Faecal boluses	3±1	3±0
Pre-injection temperature °C	38.2±0.1	38.3±0.1
Post-injection temperature °C	38.3±0.3	37.4±0.1††

For all the stereotype behaviours, comparison was by Mann-Whitney *U*-test from saline injected controls (*** $P<0.001$) while for body temperature the comparison was from the temperature prior to MDMA in the same rat according to Student's *t*-test (†† $P<0.001$)

ment×time interaction [$F(5,204)=4.87$, $P=0.001$] and a main effect of both time [$F(5,204)=8.17$, $P=0.0001$] and treatment [$F(5,204)=80.62$, $P=0.0001$].

MDMA also concomitantly elicited extensive reciprocal forepaw treading ($P<0.0001$), lateral head weaving ($P<0.0001$) and flat body posture ($P<0.0001$) that was not exhibited in saline-treated rats (Table 1). There were a similar number of faecal pellets in the activity boxes after open field behaviour, irrespective of the pre-treatment given (Table 1). MDMA also decreased body temperature by 0.9°C ($P<0.001$) when measured immediately following activity assessment, 45 min post-injection (Table 1).

Effect of previous repeated MDMA on social interaction

The total social interaction was significantly reduced by 41% in rats pre-treated with MDMA compared with that in saline controls ($P<0.01$; Fig. 2). Of the component behaviours, only exploratory behaviour (sniffing and following the partner), was significantly reduced by MDMA pre-treatment ($P<0.05$; Fig. 2). However, both aggressive (10±4 and 2±1 s in saline and MDMA, respectively) and passive behaviour (Fig. 2) also tended to be reduced in the MDMA pre-treated group, but these effects just failed to reach significance. During the test, MDMA and saline pre-treated rats entered an almost identical number of zones (84±5 with saline and 82±4 with MDMA), showing that the reduction in social interaction was not accompanied by a change in total locomotion.

Effect of previous repeated MDMA on conditioned place preference

Conditioning with cocaine just failed to produce a significant place preference in saline pre-treated controls (Fig. 3), main effect of cocaine [$F(1,20)=3.505$, $P=0.0759$]. However, ANOVA showed a significant main effect of MDMA pre-treatment [$F(1,20)=6.302$, $P=0.0208$], such that MDMA pre-treated rats spent sig-

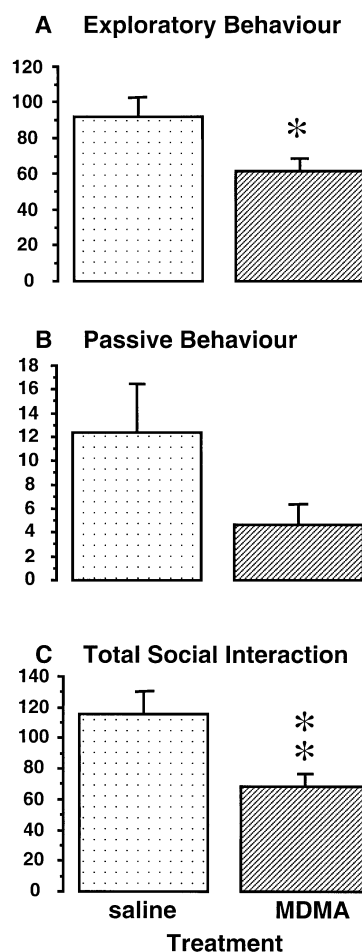


Fig. 2 Change in **A** exploratory, **B** passive and **C** total social interaction (mean±SEM) 12 days after the last injection of MDMA (7.5 mg/kg IP ×2 for 3 days) or saline (1 ml/kg IP) in pre-treatment and weight-matched pairs of rats ($n=18$ per treatment group). * $P<0.05$ and ** $P<0.01$ from saline pre-treated control rats calculated by Student's *t*-test

nificantly longer in the drug-paired compartment following cocaine treatment than rats receiving the saline+saline combination ($P<0.05$). In addition, the saline place aversion seen in saline pre-treated rats was converted to a preference for the injection side following MDMA ($P<0.05$, Fig. 3).

[³H] paroxetine binding and 5-HT and dopamine levels

The level of 5-HT and its major metabolite, 5-HIAA, and of dopamine was unaltered in the brain stem, frontal cortex and hippocampus, irrespective of whether rats had been pre-treated with saline or MDMA (Table 2). MDMA pre-treatment also failed to alter the 5HIAA: 5-HT or (DOPAC+HVA):dopamine ratios in any brain region (data not shown).

In addition, the B_{max} value for [³H]paroxetine binding to cortical homogenates was unaltered by previous MDMA administration (Table 2).

Table 2 Comparison of the effect of pre-treatment with either MDMA (7.5 mg/kg×6, IP) or saline (1 ml/kg) on cortical [³H]paroxetine binding (fmol/mg wet weight), the 5-HT, 5-HIAA (pmol/mg wet weight) and dopamine levels (fmol/mg wet weight),

mean±SEM, *n*=6 except dopamine in cortex and hippocampus *n*=3–5) in the hippocampus, frontal cortex and raphe nuclei region of the brainstem. ND=not determined

Region Treatment	Cortex		Hippocampus		Brain stem	
	Saline	MDMA	Saline	MDMA	Saline	MDMA
5-HT	1.68±0.21	1.83±0.71	1.92±0.42	1.37±0.28	4.45±0.61	3.81±0.24
5-HIAA	1.95±0.15	1.75±0.25	2.12±0.28	1.86±0.33	4.18±0.27	3.85±0.21
Dopamine	222±1	254±38	1.79±0.19	2.57±0.77	843±45	867±24
[³ H]Paroxetine	8.10±0.63	8.20±0.73	ND	ND	ND	ND

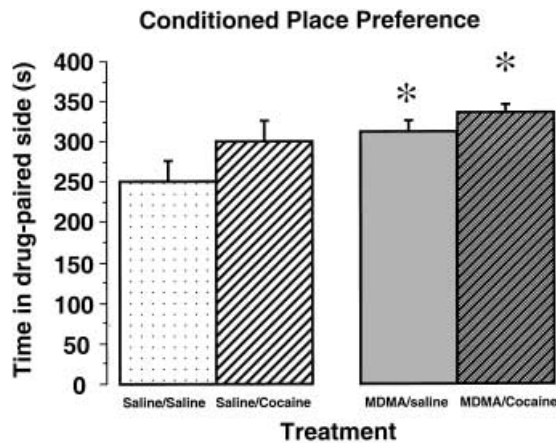


Fig. 3 Rats received saline (1 ml/kg IP) or MDMA (7.5 mg/kg IP) twice a day for 3 days. Following habituation to the conditioned place preference box, rats were conditioned by pairing either saline (1 ml/kg IP) or cocaine (5 mg/kg IP) injection, as indicated, with confinement to one of the two distinctive compartments. The effect of MDMA on the time spent (s, mean±SEM, *n*=6 each) in the drug-paired compartment on the test day (29 days after the last MDMA or saline injection) in the conditioned place preference test is shown. **P*<0.05 from saline-pre-treated saline conditioned control rats according to Duncan's New Multiple Range test following a significant ANOVA

Discussion

In the current study, the first injection of MDMA produced the expected hyperlocomotion and components of the serotonin syndrome including flat body posture (Slikker et al. 1989; Spanos and Yamamoto 1989; Marston et al. 1999), consistent with an acute increase in synaptic levels of serotonin and dopamine (Shankaran and Gudelsky 1998; Iravani et al. 2000). This was followed, at 45 min post-injection, by a significant, approximately 1°C, drop in core body temperature. The body temperature change elicited by MDMA critically depends on ambient room temperature. The hypothermia observed was anticipated at a room temperature of 22°C (Malberg and Seiden 1998), as these rats were housed singly and unable to aggregate, which contributes to the hyperthermia often caused by amphetamine-like compounds (Green et al. 1995).

In humans the acute effects of MDMA include euphoria and enhanced feelings of closeness (Peroutka et al.

1988; Green et al. 1995), while in contrast, one of the more common adverse psychiatric symptoms seen in regular users is pathological anxiety and panic attacks (McCann and Ricaurte 1991; Morgan 2000). MDMA injection elicits anxiogenic-like behaviour on social encounters (Maldonado and Navarro 2001) and in the light dark box in mice (Maldonado and Navarro 2000), and in the elevated plus maze in both rats (Bhattacharya et al. 1998; Morley and McGregor 2000) and, at low doses, in mice (Lin et al. 1999). Several groups have suggested a greater impact of MDMA on tests involving social behaviour than on other aversive behavioural paradigms. Yet there are conflicting reports of the acute effect of MDMA in the rat social interaction test, the same dose being reported to produce anxiolysis (Morley and McGregor 2000) or an anxiogenic response (Bhattacharya et al. 1998). In contrast, few animal studies have examined the longer-term behavioural impact of exposure of adolescent rats to MDMA and only one recent study assessed whether such changes occur independent of serotonergic degeneration (Broening et al. 2001), which was an aim of the current study. Marston et al. (1999) showed a delay-dependent deficit in performance in the delayed non-match to place test 16 days post-MDMA treatment in rats, consistent with impairment of short-term memory. As this was accompanied by a 40–60% reduction in cortical and hippocampal 5-HT and 5-HTT sites, cognitive impairment may have been due to serotonergic degeneration. Similarly, MDMA injection in PND 11–20 rats dose-dependently impaired subsequent sequential and spatial learning and memory with only small (<15%) but significant reductions in both hippocampal and frontal cortex 5-HT, which was therefore not thought to account for the cognitive change (Broening et al. 2001).

In the current study adolescent MDMA treatment did not change 5-HT levels or [³H]paroxetine binding in cortical homogenates, implying that there was no overt serotonergic neurotoxicity. The absence of acute hyperthermia during MDMA treatment in this study would tend to protect against long-term serotonergic neurotoxicity (Broening et al. 1995; Malberg and Seiden 1998; Colado et al. 1999). However, adult rats given MDMA show extensive 5-HT depletion, even when injected at an ambient temperature of 10°C, which is accompanied by acute hypothermia. Thus although rats aged PND 35–40

show an attenuated thermoregulatory response and appear to be protected against the neurotoxic effect of MDMA (Broening et al. 1994, 1995), it is unlikely that the lack of toxicity is entirely due to the absence of hyperthermia (Aguirre et al. 1998). Interestingly, the increase in free radical formation, thought to contribute to neurotoxicity in the adult rat, does not appear to occur in neonatal rat brain (Colado et al. 1997). Furthermore, as both serotonergic and dopaminergic neurones continue to develop during the early postnatal period this alteration and/or a deficiency in an enzyme involved in conversion of MDMA to the neurotoxic metabolite/s (Miller et al. 1997) could also contribute to the aged-dependent neurotoxic susceptibility to MDMA.

Despite the absence of serotonergic neurotoxicity, MDMA pre-treatment markedly reduced social interaction following 12 days of drug withdrawal. The reason for this reduction is unclear. It could result from a change in post-synaptic serotonin receptor function. In particular, enhanced 5-HT_{1A} receptor function in the dorsal hippocampus, basolateral amygdala (Gonzalez et al. 1996) or lateral septum (Cheeta et al. 2000) could produce such a change. Although enhancement in the latter region would also be expected to reduce open arm entries in the elevated plus maze, which was not found in our previous study (Bellerby et al. 1999). However, in two studies at 12 and 30 days after MDMA, 8-OHDPAT-induced reciprocal forepaw treading (but not other behaviours) was attenuated (Granoff and Ashby 2001), yet ACTH release was enhanced and prolactin release decreased (Poland 1990), suggesting that MDMA may cause brain region dependent effects on 5-HT_{1A} receptor function. Alternatively, it could involve a reorganisation of developing serotonergic innervation, in particular of the dorsal raphe neurones, which are known to be critical for social interaction behaviour (File et al. 1979). In mice most reports indicate that MDMA is neurotoxic to dopaminergic neurones (O'Callaghan and Miller 1994) especially those in the striatum, but this is thought to be a species specific effect not produced in rats (Stone et al. 1987; Shankaran and Gudelsky 1998) and there was no change in dopamine levels in this study. Further studies are thus required to delineate the neurochemical basis of the change in social interaction.

MDMA is rewarding when given to rats, as shown by the induction of a conditioned place preference (Bilsky et al. 1991; Schechter 1991) associated with increased dopamine release in the nucleus accumbens (Marona Lewicka et al. 1996) and lower intracranial self-stimulation thresholds (Hubner et al. 1988; Lin et al. 1997). The acute positive reinforcing effect of MDMA has also been established in a drug self-administration paradigm in the monkey (Lamb and Griffiths 1987) and is retained following a neurotoxic dosage regimen in the rat (Schechter 1991). The cocaine treatment protocol used herein failed to induce a robust conditioned place preference, making interpretation difficult. Nonetheless, MDMA pre-treatment significantly enhanced the time that cocaine-treated rats spent in the drug paired compartment post-conditioning.

This is consistent with a recent demonstration that MDMA enhanced the rewarding effect of cocaine in a similar conditioned place preference test (Horan et al. 2000), but it is unlikely to be due to serotonergic depletion, as suggested by these workers.

Overall, the current study shows that following withdrawal from repeated MDMA administration in adolescent rats there was a marked reduction in social interaction and enhancement of the sub-threshold reward associated with cocaine administration, in the absence of serotonergic neurotoxicity. Clearly only tentative extrapolations can be made from animal studies to potential human implications. Nonetheless, evidence should be sought to determine whether chronic exposure of adolescents to MDMA causes long-term changes in social anxiety and/or increases the vulnerability to cocaine abuse.

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