Journal of Applied Pharmaceutical Science Vol. 7 (02), pp. 185-190, February, 2017 Available online at http://www.japsonline.com DOI: 10.7324/JAPS.2017.70226 ISSN 2231-3354 (CC) EY-NC-SR

Differential Effect of Diazepam in Unstressed and Stressed Mice

Anki Tyagi¹, Vaibhav Walia^{2*}

¹PDM College of Pharmacy, Bahadurgarh, India.

²Department of Pharmaceutical Sciences, Maharshi Dayanand University, Rohtak, India.

ARTICLE INFO	ABSTRACT
Article history: Received on: 17/11/2016 Accepted on: 20/12/2016 Available online: 27/02/2017	Aim: Investigation of antidepressants like effect of diazepam in unstressed and stressed mice. Materials and methods: Male Swiss albino mice were used in the present study. Mice were stressed by immobilization for 2h. Mice subjected to immobilization were considered as stressed mice and mice not subjected to immobilization were considered as unstressed mice. Depression like behavioral alterations in unstressed and stressed mice was measured by tail suspension test (TST) followed by forced swim test (FST). Results: The present study showed that the immobilization stress of 2h significantly enhanced the immobility period of mice in both TST and FST. Fluoxetine (FLX) (20 mg/kg, i.p.) significantly reduced the immobility period of both unstressed and stressed mice significantly as compared to their respective controls. Diazepam (DZP) (2 mg/kg, i.p.) significantly increased the immobility period of the unstressed mice whereas significantly reduced the immobility period of unstressed mice in both TST and FST and FST and FST as compared to their respective controls. Administration of DZP (2 mg/kg, i.p.) and FLX (20 mg/kg, i.p.) to the unstressed mice reduced the immobility period of unstressed mice in both TST and FST significantly as compared to the vehicle and DZP (2 mg/kg, i.p.) treated unstressed mice in TST. The co-administration of DZP (2 mg/kg, i.p.) and FLX (20 mg/kg, i.p.) after the immobilization of 2h significantly reduced the immobility period of stressed mice in both TST and FST. Conclusion: It is concluded that the administration of DZP (2 mg/kg, i.p.) to the stressed mice reduced the immobility period of stressed mice in both TST and FST.
<i>Key words:</i> Depression, diazepam, fluoxetine, mice, stress.	

INTRODUCTION

GABA is the major inhibitory neurotransmitter present in the brain; synthesized by the enzyme glutamic acid decarboxylase (GAD) (Chen et al., 2003). Psychological stress has been shown to modulate the **GABAergic** neurotransmission in the brain (Hasler et al., 2010). The reduced concentrations of GABA had been reported in the plasma, cerebrospinal fluid (CSF), and cortex of the depressed subjects (Sanacora et al., 2004; 2006). Thus GABAergic dysfunction in the brain has been found to be responsible for the pathogenesis of depression (Sanacora et al., 1999). GABA exerts its effect by the modulation of GABA receptors. GABAA receptor is the principal

Maharshi Dayanand University, Rohtak-124001, India.

E-mail: vaibhav.walia00 @ gmail.com

inhibitory neurotransmitter receptor in the mammalian brain (Kleingoor et al., 1993) and the altered expression or function of these receptors has been implicated in the etiology of anxiety and depressive disorders (Merali et al., 2004; Sanacora et al., 2004; Bhagwagar et al., 2008; Poulter et al., 2008; Sequeira et al., 2009; Craddock et al., 2010; Klempan et al., 2009; Levinson et al., 2010). Previous studies suggested that the dysregulation of the GABA_A receptor plays key role in the pathogenesis of mood disorders (Hasler et al., 2007). Stimulation of GABAA receptor enhances the release of noradrenaline in ventral NA pathway suggesting that the increasing GABAergic tone might exerts antidepressant effect (Lloyd et al., 1989). BZs act as GABAA receptor agonists (Petty et al., 1995) and potentiate the response to submaximal concentrations of GABA (Walters et al., 2000). Also the chronic administration of antidepressant drugs induces marked changes in GABAergic function (Sanacora and Saricicek, 2007).

^{*} Corresponding Author

Vaibhav Walia, Department of Pharmaceutical Sciences,

^{© 2017} Anki Tyagi and Vaibhav Walia. This is an open access article distributed under the terms of the Creative Commons Attribution License -NonCommercial-ShareAlikeUnported License (http://creativecommons.org/licenses/by-nc-sa/3.0/).

For e.g. oral administration of fluoxetine (5 mg/kg) for 21 days elevated the CSF levels of GABA (Goren *et al.*, 2007); also it has been reported that the chronic treatment with fluoxetine normalizes GABA release in mice (Begenisic *et al.*, 2014). Therefore the antidepressants with serotonergic effects known to enhance the function of GABA_A receptor (Matsubara *et al.*, 2000) e.g. fluoxetine increase the brain and CSF content of allopregnanolone (Allo), a potent positive allosteric modulator of GABA_A receptors (Pinna *et al.*, 2006). Therefore the present study was designed to investigate the effect of the diazepam in unstressed and stressed conditions.

MATERIALS AND METHODS

Animals

Male Swiss albino mice were used in the present study. All the mice were kept under controlled conditions of light and environmental and had free access to food and water. The testing was carried out between 9:00 and 16:00 h. The study protocols were approved by Institutional Animal Ethics Committee (IAEC) and care of the animals was carried out in compliance with the guidelines of the Committee for the Purpose of Control and Supervision of Experiments on Animals (CPCSEA) Ministry of Environment, Forests and Climate change, Government of India.

Drugs and selection of doses

Fluoxetine (FLX) (Cadila Pharmaceuticals, Ahmedabad, India) and Diazepam (DZP) (Neon Laboratories, Thane, India), were used in the present study. The doses were selected on the basis of the relevant previous studies. FLX (20 mg/kg; i.p.) was used as standard antidepressant drug (Walia, 2016a; Walia and Gilhotra, 2016) and DZP (2 mg/kg; i.p.), acts as a GABA_A agonist and DZP (2 mg/kg; i.p.) has been found to increase the levels of the GABA in the brain of mice (Gilhotra and Dhingra, 2011).

Immobilization stress

Stress was produced by immobilizing the mice for 2h by taping, all its four limbs and trunk against a wooden board (Walia, 2016a; Walia and Gilhotra, 2016).

Assessment of depression like behavior in mice

Tail suspension test (TST)

In TST, each mouse was individually suspended at a height of 30 cm from the floor, by adhesive tape placed approximately 1 cm from the tip of the tail. The immobility period was recorded for 6 min. Mouse was considered to be immobile when it did not show any body movement, hung passively and completely immobile (Steru *et al.*, 1985).

Forced swim test (FST)

In FST, each mouse was individually forced to swim in the open glass chamber containing fresh water to a height of 15 cm and maintained at $26\pm1^{\circ}$ C. Each mouse shows vigorous movements during the initial 2 min period of the test. The immobility period was recorded during the next 4 min of the total 6 min testing period (Porsolt *et al.*, 1977).

Experimental protocol

Male Swiss albino mice were used in the present study (Anki and Walia, 2016). Stress was produced by immobilizing the mice for 2h (Walia, 2016a; Walia and Gilhotra, 2016). Mice subjected to stress were considered as stressed mice and mice not subjected to stress were considered as unstressed mice. All the treatments were administered intraperitoneally (i.p.) in a fixed volume of 10 ml/kg. Unstressed mice were administered 30 min before the testing, whereas the stressed mice were administered, immediately after the mice were freed from the immobilization, and after the 30 min of administration, stressed mice were subjected to the behavioral testing procedure. In case where the combinations of drugs were used, the time elapsed between the two treatments was 10 min. Behavioral testing was performed in stepwise manner i.e. TST followed by FST with 5 min difference between the two testing procedures (Walia, 2016a; Walia and Gilhotra, 2016).

Statistical analysis

Data were analyzed by one-way analysis of variance (ANOVA) followed by Tukey's test. Values were expressed as Mean \pm S.E.M. and p < 0.05 was considered as statistically significant.

RESULTS

Effect of different treatment on the immobility period of mice in TST and FST

The effect of different treatments on the immobility period of mice in both TST and FST was shown in the fig. 1 and fig. 2. The present study showed that the immobilization stress of 2h enhanced the immobility period of mice significantly as compared to the vehicle treated unstressed mice in both TST and FST. Thus immobilization stress significantly induced depression or enhances the depression related behavior in the mice subjected to the immobilization of 2h. FLX (20 mg/kg, i.p.) significantly reduced the immobility period in both unstressed and stressed mice significantly as compared to their respective controls. Administration of DZP (2 mg/kg, i.p.) to the unstressed mice increased the immobility period significantly as compared to the vehicle treated unstressed mice in both TST and FST. Administration of DZP (2 mg/kg, i.p.) to the stressed mice significantly reduced the immobility period significantly as compared to vehicle treated stressed mice in both TST and FST. The combine treatment of DZP (2 mg/kg, i.p.) and FLX (20 mg/kg, i.p.) to the unstressed mice significantly reduced the immobility period as compared to the vehicle treated and DZP (2 mg/kg, i.p.) unstressed mice in both TST and FST. Administration of DZP (2 mg/kg, i.p.) and FLX (20 mg/kg, i.p.) to the stressed mice reduced the immobility period of stressed mice significantly as compared to the vehicle treated stressed mice in both TST and FST.

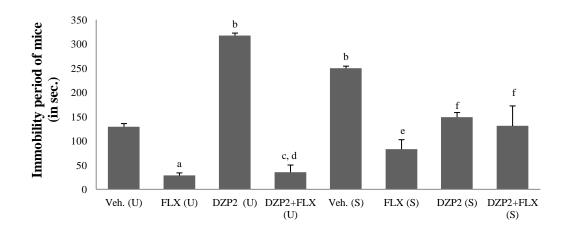


Fig. 1: Effect of different treatments on immobility period of mice (in sec.) in TST (n = 5 in each group). Values expressed as the mean ± SEM. Data were analyzed by ANOVA followed by Tukey's *post-hoc* test, F (7, 32) = 31.654. a=p<0.01 significant difference from the vehicle treated unstressed mice; b=p<0.001 significant difference from the vehicle treated unstressed mice; c=p<0.05 significant difference from the vehicle treated unstressed mice; e=p<0.001 significant difference from the vehicle treated unstressed mice; e=p<0.001 significant difference from the vehicle treated unstressed mice; e=p<0.001 significant difference from the vehicle treated unstressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p<0.001 significant difference from the vehicle treated stressed mice; t=p

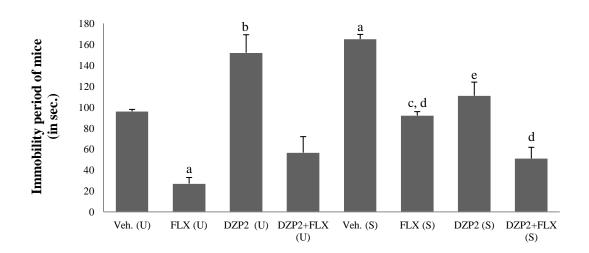


Fig.2: Effect of different treatments on immobility period of mice (in sec.) in FST (n = 5 in each group). Values expressed as the mean \pm SEM. Data were analyzed by ANOVA followed by Tukey's *post-hoc* test, F (7, 32) = 21.420. a=p<0.01 significant difference from the vehicle treated unstressed mice; b=p<0.05 significant difference from the vehicle treated unstressed mice; c=p<0.01 significant difference from the vehicle treated unstressed mice; c=p<0.01 significant difference from the vehicle treated stressed mice; d=p<0.001 significant difference from the vehicle treated stressed mice; d=p<0.05 significant difference from the vehicle treated stressed mice; d=p<0.05 significant difference from the vehicle treated stressed mice; terated unstressed mice; e=p<0.05 significant difference from the vehicle treated stressed mice; terated unstressed mice; terat

DISCUSSION

Depression is a psychiatric disorder characterized by the feeling of hopelessness, helplessness, altered thoughts, suicidality, sleep disturbances etc. It has been suggested that depression may occur due to the alteration in the various pathways linked with the synthesis and the metabolism of the neurotransmitters implicated in the pathogenesis of depression (Walia, 2016b). Depression related behavior can be measured by the most commonly used behavioral test TST and FST (Steru *et al.*, 1985; Porsolt *et al.*, 1977). Stress induces depression like behavioral alteration in the laboratory animals subjected to the stress (Hyase, 2011). Present study showed that the immobilization stress of 2h enhanced the immobility period of the mice in both TST and FST significantly as compared to the vehicle treated unstressed mice. Also we previously proved that the immobilization stress of 2h enhanced the depression related behavior of the mice (Walia, 2016; Walia and Gilhotra, 2016). Previous studies suggested that the GABAergic transmission is highly sensitive to stressful situations (Orchinik et al., 2001; Caldji et al., 2004; Maggio and Segal, 2009; Surget et al., 2008) and the reduction in the levels of GABA had been found to be associated with depression (Gold et al, 1980; Price et al., 2009; Lener et al., 2016). Therefore the dysfunctioning of the GABAergic system contributes to depression (Sanacora et al., 1999). Therefore the immobilization stress of 2h might results in the alterations in the neurotransmission of GABA that might be responsible for the enhancement of depression related behavior in the stressed mice.

Fluoxetine is widely used in the treatment of the mood disorders (Caiati and Cherubini, 2013). It has been reported that the administration of fluoxetine (5 mg/kg) for 21 days elevated the CSF GABA levels by approximately 2-fold (Goren et al., 2007). Fluoxetine also acts as a positive allosteric modulator of GABA_Areceptor (Robinson et al., 2003). Administration of fluoxetine (20 mg/kg; i.p.) reduced the immobility period of unstressed and stressed mice in both TST and FST significantly as compared to their respective controls. Also the immobility period of fluoxetine (20 mg/kg; i.p.) treated stressed mice was greater than the fluoxetine (20 mg/kg; i.p.) treated unstressed mice in both TST and FST. Thus the immobilization stress of 2h compromised the antidepressant effect of the fluoxetine (20 mg/kg; i.p.) in the stressed mice. Thus the results of the present study were in the agreement with our previous findings (Walia, 2016; Walia and Gilhotra, 2016).

GABAergic dysfunction contributes to depression therefore the agents that modulates the GABAergic pathways positively might exerts antidepressants like effect. Therefore we administered the unstressed and stressed mice with the DZP (2 mg/kg; i.p.). Administration of DZP (2 mg/kg; i.p.) to the unstressed mice increased the immobility of the mice significantly as compared to the vehicle treated unstressed mice in both TST and FST. However administration of DZP (2 mg/kg; i.p.) in stressed mice reduced the immobility period of stressed mice in both TST and FST significantly as compared to the vehicle treated stressed mice as shown in fig.1 and 2. Thus the results of the present study suggested that the DZP (2 mg/kg; i.p.) exerted antidepressants like effect in the stressed mice in both TST and FST.

Diazepam belongs to the category of BZs (Eghbali *et al.*, 1997) and acts as a positive allosteric modulator of $GABA_A$ receptor; upon binding $GABA_A$ complex undergoes a conformational change, resulting in increased affinity of the receptor for the endogenous GABA ligand and this results in the increase in the neuronal chloride-ion influx resulting in the hyperpolarization of the postsynaptic membranes (Nutt and Malizia, 2001). Diazepam enhances the binding of GABA to its

receptors (Skerritt and Macdonald, 1984) and increased the frequency of GABA receptor currents with minimal effect on the duration of bursts (Twyman *et al.*, 1989). Stress evokes the release of glutamate in the brain that results in the activation of NMDA receptors responsible for excitotoxicity (Maj *et al.*, 1992) and the diazepam through its GABA facilitatory action may exerts the antidepressant effect. This might be the possible reason why diazepam reduced the immobility period of stressed mice.

It has been reported that the co-administration of BZs with SSRIs led to greater treatment response, as well as faster onset of efficacy (Fava *et al.*, 2006; Fava *et al.*, 2011). In the present study, administration of DZP (2 mg/kg; i.p.) followed by the administration of fluoxetine (20 mg/kg; i.p.) to the unstressed mice reduced the immobility period of unstressed mice significantly as compared to the vehicle treated unstressed mice in both TST and FST.

However the administration of DZP (2 mg/kg; i.p.) followed by the administration of fluoxetine (20 mg/kg; i.p.) in stressed mice reduced the immobility period of mice significantly as compared to vehicle treated stressed mice in both TST and FST. However the combine administration of DZP (2 mg/kg; i.p.) and fluoxetine (20 mg/kg; i.p.) in the unstressed and stressed mice did not significantly modulates the antidepressant effect of fluoxetine (20 mg/kg; i.p.). However the clinical study reported that the adult outpatients treated with fluoxetine 20 mg + clonazepam 0.5-1.0 mg showed the accelerated the response of treatment, decreasing anxiety, sleep disturbances and suppressed the SSRIs side-effects (Londborg *et al.*, 2000).

SSRIs are reported to increase the risk of the suicidal ideations and attempts in the patients prescribed with SSRIs (Walia, 2016c) and the main reason behind this is the development of the akathisia; that occurs frequently with the SSRIs treatment (Healy *et al.*, 2006). Therefore to minimize the incidence of akathisisa, agitation and anxiety, benzodiazepines had been coprescribed with SSRIs (Healy, 1999).

CONCLUSION

Stress induces depression related behavior in the organisms exposed to the stress. It has been reported that the immobilization stress of 2h compromised the antidepressant effect of the fluoxetine in the stressed mice. Further the SSRIs have been found to increase the emergence of suicidal behaviors in the prescribed subjects. BZs are effective in the treatment of the stress induced psychiatric disorders. Both SSRIs and BZs increase the levels of GABA in the brain and are generally used in the combinations. However in the present study the co-administration of the diazepam and fluoxetine did not significantly modulate the antidepressant effect of the fluoxetine in the unstressed and the stressed mice.

Financial support and sponsorship: Nil.

Conflict of Interests: There are no conflicts of interest.

REFERENCES

Anki, Walia V. Influence of Gender Difference in the Antidepressant effect of Fluoxetine in Mice in Tail Suspension Test. Asian J Pharm Clin Res. 2016 (Article in Press).

Begenisic T, Baroncelli L, Sansevero G, Milanese M, Bonifacino T, Bonanno G, Cioni G, Maffei L, Sale A. Fluoxetine in adulthood normalizes GABA release and rescues hippocampal synaptic plasticity and spatial memory in a mouse model of Down syndrome. Neurobiol Dis. 2014; 63: 12-9.

Bhagwagar Z, Wylezinska M, Jezzard P, Evans J, Boorman E, Matthews PM, *et al.* Low GABA concentrations in occipital cortex and anterior cingulate cortex in medication-free, recovered depressed patients. Int J Neuropsychopharmacol. 2008; 11: 255-260.

Caiati MD, Cherubini E. Fluoxetine impairs GABAergic signaling in hippocampal slices from neonatal rats. Front Cell Neurosci. 2013; 7: 63.

Caldji C, Diorio J, Anisman H, Meaney MJ. Maternal behavior regulates benzodiazepine/GABA_A receptor subunit expression in brain regions associated with fear in BALB/c and C57BL/6 mice. Neuropsychopharmacol. 2004; 29: 1344-52.

Chen C-H, Battahlioli G, Martin DL, Hobart SA, Colon W. Distinctive interactions in the holoenzyme formation for two isoforms of glutamate decarboxylase. Biochim Biophys Acta. 2003; 1645: 63-71

Craddock N, Jones L, Jones IR, Kirov G, Green EK, Grozeva D, Moskvina V, Nikolov I, Hamshere ML, Vukcevic D, Caesar S, Gordon-Smith K, Fraser C, Russell E, Norton N, Breen G, St Clair D, Collier DA, Young AH, Ferrier IN, Farmer A, McGuffin P, Holmans PA; Wellcome Trust Case Control Consortium (WTCCC), Donnelly P, Owen MJ, O'Donovan MC. Strong genetic evidence for a selective influence of GABA(A) receptors on a component of the bipolar disorder phenotype. Mol Psychiatry. 2010; 15: 146-53.

Eghbali M, Curmi JP, Birnir B, Gage PW. Hippocampal GABA(A) channel conductance increased by diazepam. Nature. 1997; 388(6637): 71-5.

Fava M, McCall WV, Krystal A, Wessel T, Rubens R, Caron J, Amato D, Roth T. Eszopiclone co-administered with fluoxetine in patients with insomnia coexisting with major depressive disorder. Biol Psychiatry. 2006; 59(11): 1052-60.

Fava M, Schaefer K, Huang H, Wilson A, Iosifescu DV, Mischoulon D, Wessel TC. A post hoc analysis of the effect of nightly administration of eszopiclone and a selective serotonin reuptake inhibitor in patients with insomnia and anxious depression. J Clin Psychiatry. 2011; 72(4): 473-9.

Gilhotra N, Dhingra D. Thymoquinone produced antianxietylike effects in mice through modulation of GABA and NO levels. Pharmacol Rep. 2011; 63(3): 660-9.

Gold BI, Bowers MB, Jr, Roth RH, Sweeney DW. GABA levels in CSF of patients with psychiatric disorders. Am J Psychiatry. 1980; 137(3): 362-64.

Gören MZ, Küçükibrahimoglu E, Berkman K, Terzioglu B. Fluoxetine partly exerts its actions through GABA: a neurochemical evidence. Neurochem Res. 2007; 32(9): 1559-65.

Hasler G, van der Veen JW, Grillon C. Effect of acute psychological stress on prefrontal gamma-aminobutyric acid concentration determined by proton magnetic resonance spectroscopy. Am J Psychiatry. 2010; 167(10): 1226-31.

Healy D, Herxheimer A, Menkes DB. Antidepressants and Violence, Problems at the Interface of Medicine and Law. PLoS Med. 2006; 3(9), e372.

Healy D, Langmaak, C, Savage M. Suicide in the course of the treatment of depression. J. Psychopharmacol. 1999; 13: 94-9.

Hyase T. Depression- related anhedonic behaviors caused by the immobilization stress: a comparison with nicotine -induced depression like behavioral alterations and effects of nicotine and / or "antidepressant" drugs. J Toxicol Sci. 2011; 36(1): 31-41.

Kleingoor C, Wieland HA, Korpi ER, Seeburg PH, Kettenmann H. Current potentiation by diazepam but not GABA sensitivity is determined by a single histidine residue. Neuroreport. 1993; 4(2): 187-90.

Klempan TA, Sequeira A, Canetti L, Lalovic A, Ernst C, ffrench-Mullen J, Turecki G. Altered expression of genes involved in ATP biosynthesis and GABAergic neurotransmission in the ventral prefrontal cortex of suicides with and without major depression. Mol Psychiatry. 2009; 14: 175-89.

Lener MS, Niciu MJ, Ballard ED, Park M, Park LT, Nugent AC, Zarate CA Jr. Glutamate and Gamma-Aminobutyric Acid Systems in the Pathophysiology of Major Depression and Antidepressant Response to Ketamine. Biol Psychiatry. 2016 May 12. pii: S0006-3223(16)32377-0.

Levinson AJ, Fitzgerald PB, Favalli G, Blumberger DM, Daigle M, Daskalakis ZJ. Evidence of cortical inhibitory deficits in major depressive disorder. Biol Psychiatry. 2010; 67: 458-64.

Lloyd KG, Zivkovic B, Scatton B, Morselli PL, Bartholini G. The gabaergic hypothesis of depression. Prog Neuropsychopharmacol Biol Psychiatry. 1989; 13(3-4): 341-51.

Londborg PD, Smith WT, Glaudin V, Painter JR. Short-term cotherapy with clonazepam and fluoxetine: anxiety, sleep disturbance and core symptoms of depression. J Affect Disord. 2000; 61(1-2): 73-9.

Maggio N, Segal M. Differential corticosteroid modulation of inhibitory synaptic currents in the dorsal and ventral hippocampus. J Neurosci. 2009; 29: 2857-66.

Maj J, Rogoz Z, Skuza G, Sowińska H. The effect of CGP37849 and CGP 39551, competitive NMDA receptor antagonists, in the forced swimming test. Pol J Pharmacol. 1992; 44: 337-46.

Matsubara M, Suzuki S, Miura K, Terashima M, Sugita S, Kimura H, Hatsuda S, Mori T, Murakami H, Hayashi T, Ohta T, Ohara M. Electrophysiologic analysis of antidepressant drug effects on the GABA(A) receptor complex based upon antagonist-induced encephalographic power spectrum changes. Neuropsychobiol. 2000; 42(3): 149-57.

McEwen BS. Early life influences on life-long patterns of behavior and health. Ment Retard Dev Disabil Res Rev. 2003; 9: 149-54.

Merali Z, Du L, Hrdina P, Palkovits M, Faludi G, Poulter MO, Anisman H. Dysregulation in the suicide brain: mRNA expression of corticotropin-releasing hormone receptors and GABA(A) receptor subunits in frontal cortical brain region. J Neurosci. 2004; 24: 1478-85.

Nutt DJ, Malizia AL. New insights into the role of the GABA(A)-benzodiazepine receptor in psychiatric disorder. Br. J. Psychiatry 2001; 179(5), 390-6.

Orchinik M, Carroll SS, Li YH, McEwen BS, Weiland NG. Heterogeneity of hippocampal GABA(A) receptors: regulation by corticosterone. J Neurosci. 2001; 21: 330-9.

Petty F, Trivedi MH, Fulton M, Rush AJ. Benzodiazepines as antidepressants: does GABA play a role in depression? Biol Psychiatry. 1995; 38(9): 578-91.

Pinna G, Costa E, Guidotti A. Fluoxetine and norfluoxetine stereospecifically and selectively increase brain neurosteroid content at doses that are inactive on 5-HT reuptake. Psychopharmacol (Berl). 2006; 186(3): 362-72.

Porsolt RD, Bertin A, Jalfre M. Behavioural despair in mice: a primary screening test for antidepressants. Arch Int Pharmacodyn Ther. 1977; 229: 327-36.

Poulter MO, Du L, Weaver IC, Palkovits M, Faludi G, Merali Z, Szyf M, Anisman H. GABAA receptor promoter hypermethylation in suicide brain: implications for the involvement of epigenetic processes. Biol Psychiatry. 2008; 64: 645-52.

Price RB, Shungu DC, Mao X, Nestadt P, Kelly C, Collins KA, Murrough JW, Charney DS, Mathew SJ. Amino acid neurotransmitters assessed by proton magnetic resonance spectroscopy: relationship to treatment resistance in major depressive disorder. Biol Psychiatry. 2009; 65(9): 792-800.

Robinson RT, Drafts BC, Fisher JL. Fluoxetine increases GABA(A) receptor activity through a novel modulatory site. J Pharmacol Exp Ther. 2003; 304(3): 978-84.

Rothschild AJ, Locke CA. Reexposure to fluoxetine after serious suicide attempts by three patients, the role of akathisia. J Clin Psychiatry. 1991; 52, 491-3.

Sanacora G, Fenton LR, Fasula MK, Rothman DL, Levin Y, Krystal JH, Mason GF. Cortical gamma-aminobutyric acid concentrations in depressed patients receiving cognitive behavioral therapy. Biol Psychiatry. 2006; 59(3): 284-6.

Sanacora G, Gueorguieva R, Epperson CN, Wu YT, Appel M, Rothman DL, Krystal JH, Mason GF. Subtype-specific alterations of gamma-aminobutyric acid and glutamate in patients with major depression. Arch Gen Psychiatry. 2004; 61: 705-13.

Sanacora G, Mason GF, Rothman DL, Behar KL, Hyder F, Petroff OA, Berman RM, Charney DS, Krystal JH. Reduced cortical gamma-aminobutyric acid levels in depressed patients determined by proton magnetic resonance spectroscopy. Arch Gen Psychiatry. 1999; 56(11): 1043-7.

Sanacora G, Saricicek A. GABAergic contributions to the pathophysiology of depression and the mechanism of antidepressant action. CNS Neurol Disord Drug Targets. 2007; 6(2): 127-40.

Sequeira A, Mamdani F, Ernst C, Vawter MP, Bunney WE, Lebel V, Rehal S, Klempan T, Gratton A, Benkelfat C, Rouleau GA, Mechawar N, Turecki G. Global brain gene expression analysis links glutamatergic and GABAergic alterations to suicide and major depression. PLoS One. 2009; 4: e6585.

Sieghart W. Structure and Pharmacology of Gamma-Aminobutyric Acid(a) Receptor Subtypes. Pharmacol. Rev. 1995; 47(2): 181-234.

Skerritt JH, Macdonald RL. Diazepam enhances the action but not the binding of the GABA analog, THIP. Brain Res. 1984; 297(1): 181-6.

Steru L, Chermat R, Thierry B, Simon P. The tail suspension test: a new method for screening antidepressants in mice. Psychopharmacol (Berl). 1985; 85: 367.

Surget A, Wang Y, Leman S, Ibarguen-Vargas Y, Edgar N, Griebel G, Belzung C, Sibille E. Corticolimbic transcriptome changes are state-dependent and region-specific in a rodent model of depression and of antidepressant reversal. Neuropsychopharmacol. 2008; 34: 1363-80.

Twyman RE, Rogers CJ, Macdonald RL. Differential regulation of gamma-aminobutyric acid receptor channels by diazepam and phenobarbital. Ann Neurol. 1989; 25(3): 213-20.

Walia V, Gilhotra N. Nitriergic Influence in the Compromised Antidepressant Effect of Fluoxetine in Stressed Mice. J Appl Pharm Sci 2016; 6(10): 092-097.

Walia V. Influence of stress and fluoxetine on immobility period of mice in tail suspension test and forced swim test. Asian J Pharm Clin Res. 2016a; 9(2): 1-4.

Walia V. Possible Role of Serotonin and Selective Serotonin Reuptake Inhibitors in Suicidal Ideations and Attempts. J Pharm Sci Pharmacol 2016c (Article in Press).

Walia V. Role of enzymes in the pathogenesis of depression. J Crit Rev. 2016b; 3(2): 1-6.

Walters RJ, Hadley SH, Morris KD, Amin J. Benzodiazepines act on GABAA receptors via two distinct and separable mechanisms. Nat Neurosci. 2000; 3(12): 1274-81.

How to cite this article:

Tyagi A, Walia V. Differential Effect of Diazepam in Unstressed and Stressed Mice. J App Pharm Sci, 2017; 7 (02): 185-190.