Stopping cocaine before it gets to the brain: new frontiers in treatment

CELAC Symposium "Progress and Challenges in Scientific Research on Treatments, Pharmacological Strategies and Vaccines against Drug

> Addiction" Marilyn E. Carroll¹

Collaborators:

ators: Stephen Brimijoin², Yang Gao², Robin Parks³, Natalie E. Zlebnik¹, Justin J. Anker¹

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NIDA Tested Medications for Treatment of Cocaine Dependence

- Amantadine
- Lys-dex amphetamine
- Aripriprazole*
- Atomoxetine
- Baclofen
- Buprenorphine
- Bup/naloxone
- Bupropion
- Buspirone
- Clonidine
- DHEA
- Desipramine
- d-Amphetamine
- Dextrometorphan

- Disulfiram
- Divalproex
- Dronabinol
 - Fluoxetine*
- Gabapentin
- GBR12909
- GCP44352
- Gammavinyl GABA
- Hydromorphone
- LAAM
- L-Dopa/Carbidopa
- L-tryptophan

- Lofexidine
- Lobeline
- LY544344
- Mecamylamine
- Memantine
- Methamphetamine
- Methylphenidate
 - Methadone
- Modafinil
- N-acetyl-aspartate
- Naltrexone x 2
- Olanzapine
- Pergolide
- Progesterone

- Propanolol
- Reboxetine
- Risperidone
 - RTI compounds
- Selegiline
- Sertraline
- **Tiagabine**
- **Topiramate**
- **Vigagatrin**
- Venlafaxine
- Yohimbine
 - ... and More

3 studies of cocaine hydrolase (CocH) treatment to acutely block:

- 1. Cocaine self-administration (progressive ratio)
- 2. Cocaine escalation
- 3. Cocaine reinstatement

3 studies of CocH viral vector (VEC) treatment to chronically block:

- **1. Cocaine reinstatement**
- 2. Cocaine-induced locomotor sensitization with cocaine vaccine (VAC)
- 3. Cocaine self-administration (VEC + VAC)

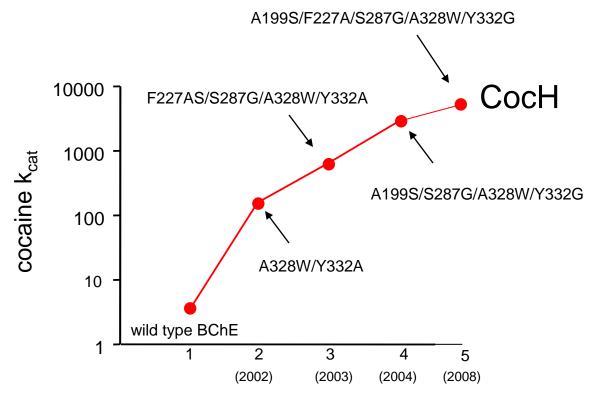
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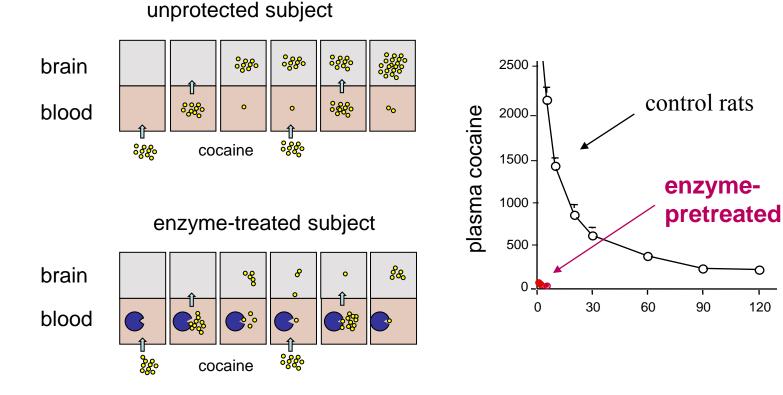
BChE - cocaine hydrolase (CocH) genetically engineered from human BChE



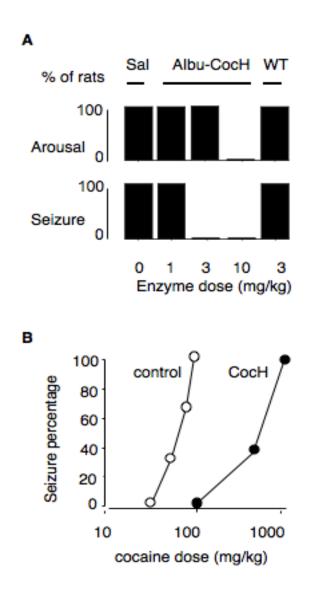
Successive Mutation Generations

Molecular interception by enzyme ("Pac-man model")

CocH drastically accelerates cocaine metabolism in rats

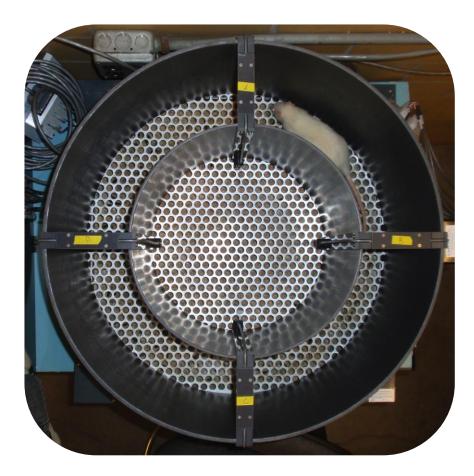


CocH <u>rescues</u> rats from cocaine-induced <u>seizures</u>

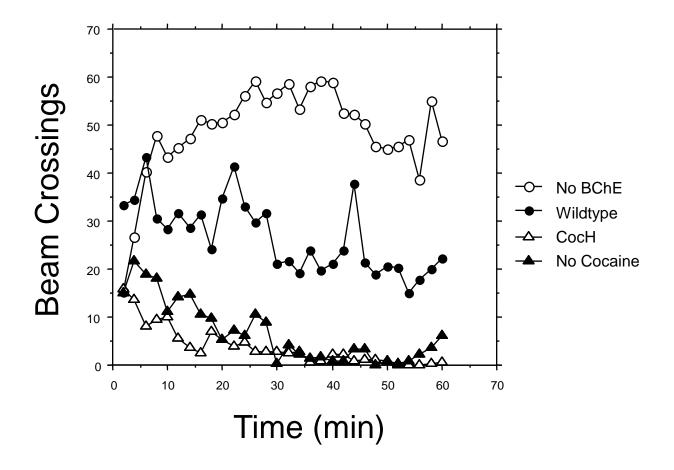


Brimijoin et al. Neuropsychopharmacol 33: 2715-2725, 2008

Locomotor activity apparatus

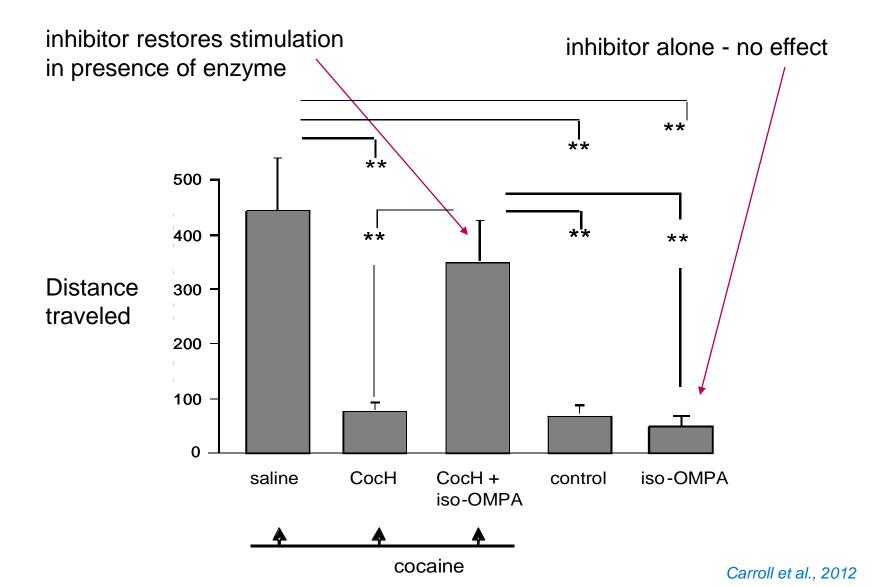


CocH prevents cocaine-induced locomotor activity in mice



Brimijoin et al. Neuropsychopharmacol 33: 2715-2725, 2008

Cocaine hydrolase treatment <u>requires enzyme activity</u> to suppress cocaine-stimulation in mice Cholinesterase <u>inhibitor</u>, iso-OMPA, <u>blocked enzyme</u> activity



IV drug self-administration apparatus



Phases of Drug Abuse Process

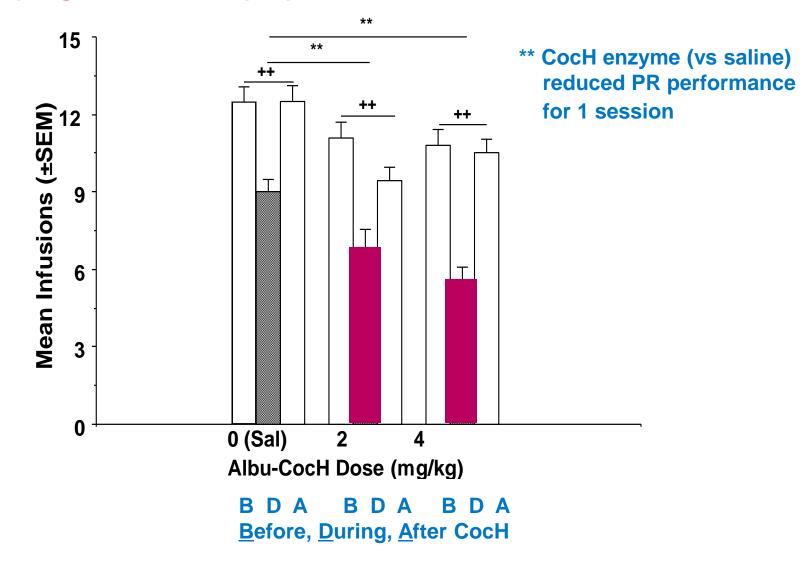
Acquisition Short vs. Long Access Extinction Reinstatement Drugs Short Access Sal Short Access

Time (~ 2 - 3 months)

Responding

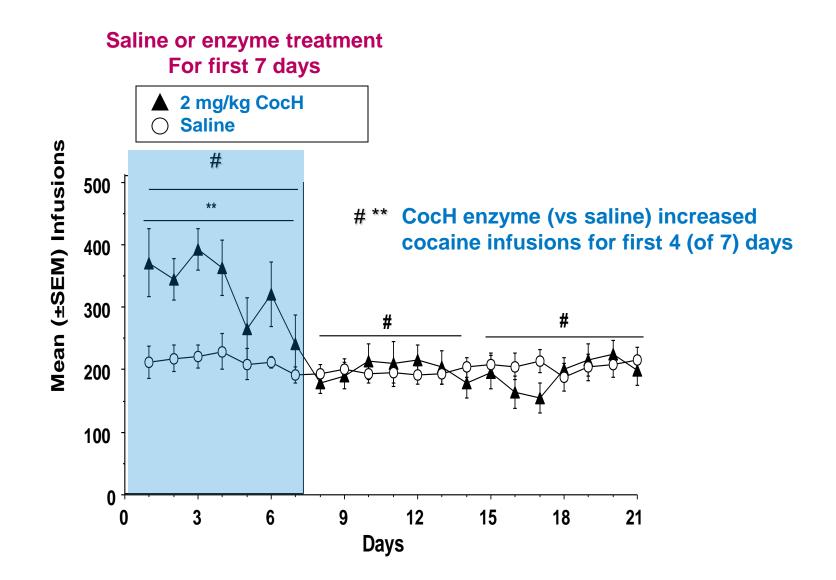
Modified from de Vries (1998) and Ahmed and Koob (1998)

Cocaine self-administration during <u>short access</u> (2 h) under a progressive-ratio (PR) schedule to assess motivation



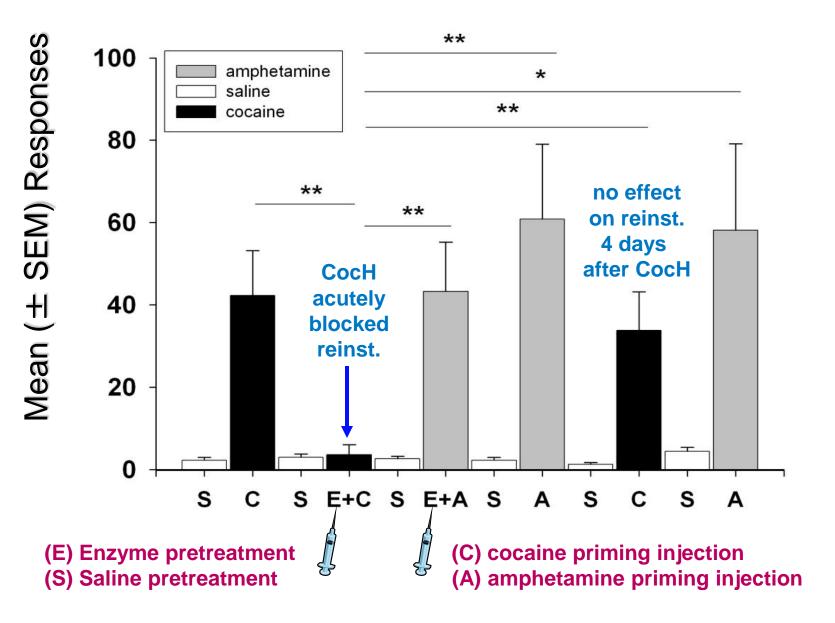
Carroll et al. Psychopharmacology, 2011

Escalation of cocaine self-administration during long access (6 h)



Carroll et al. Psychopharmacology, 2011

Reinstatement (relapse) responses with CocH enzyme



Brimijoin et al. Neuropsychopharmacology 2008

3 studies of cocaine hydrolase (CocH) treatment to acutely block:

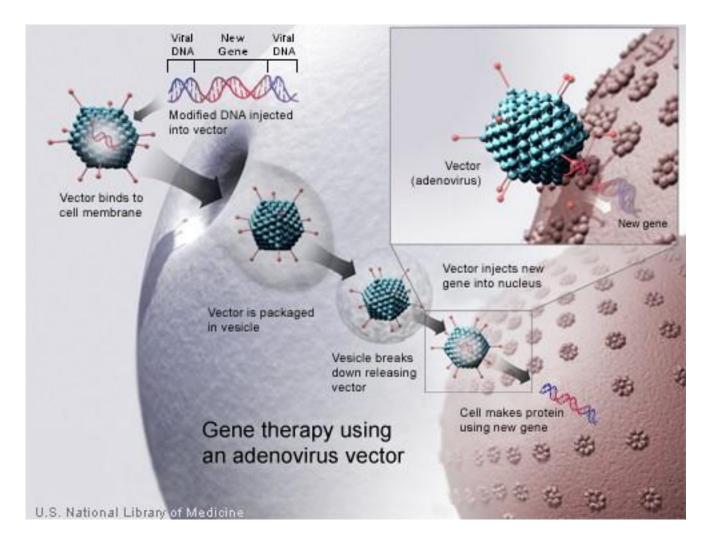
- 1. Cocaine self-administration (progressive ratio)
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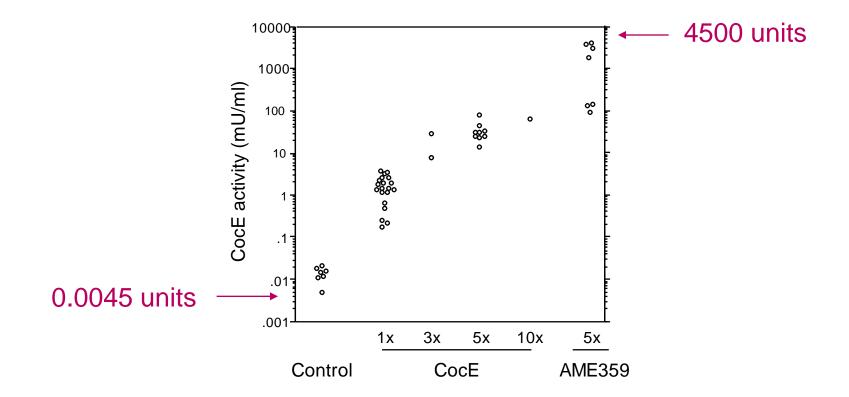
- 2. Cocaine-induced locomotor sensitization with cocaine vaccine (VAC)
- 3. Cocaine self-administration (VEC + VAC)

Adenoviral gene delivery for long-term actions

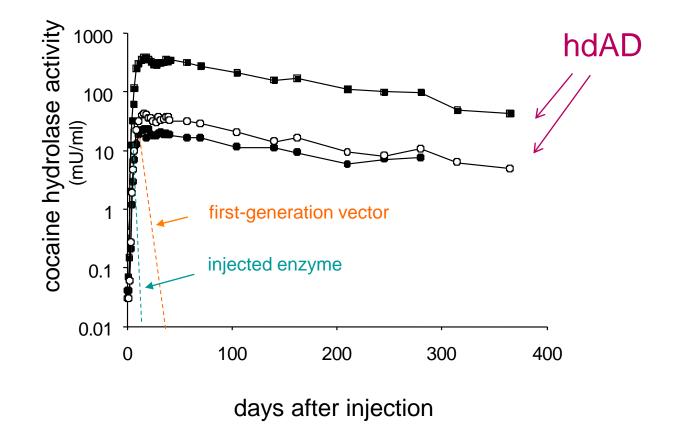




Hydrolase transduction raises cocaine-hydrolase activity in plasma up to 1,000,000-fold



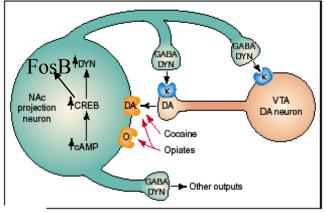
Year-long generation of CocH with helper-dependent adenoviral vector (hdAD) by gene transfer



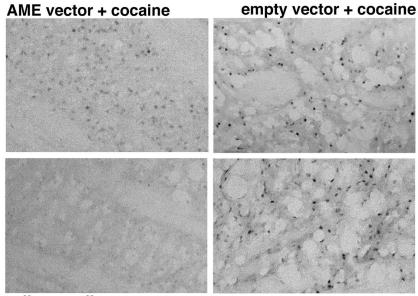
Ottawa, Mayo

Gao and Brimijoin J Pharmacol Exp Ther 330:449-457, 2009

Gene transfer of hydrolase <u>blocks fosB induction</u> in neostriatum in rats given repeated cocaine treatment

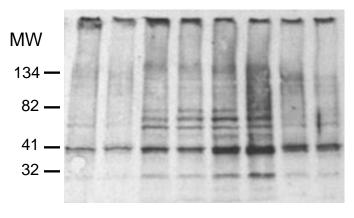




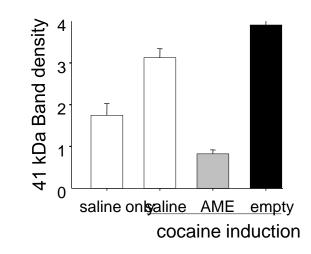


saline + saline

saline + cocaine

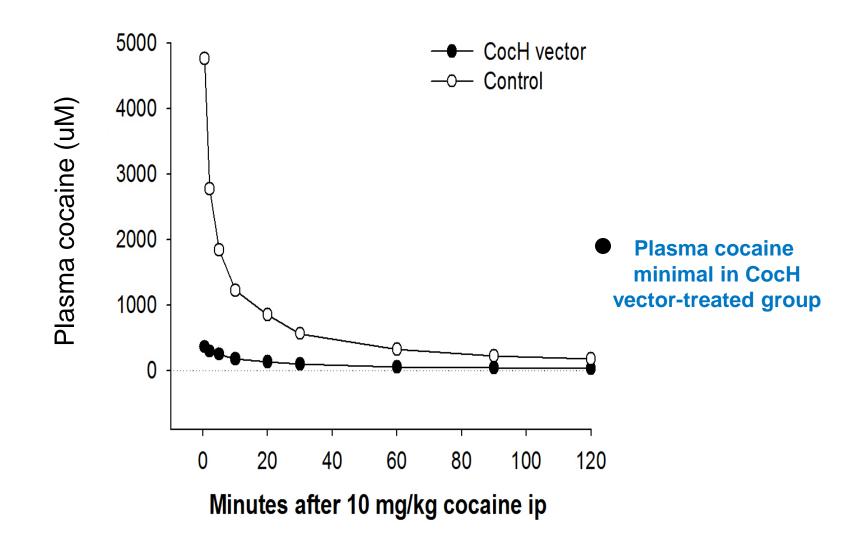


AME + C S + S E + C S + C



Gao and Brimijoin J Pharmacol Exp Ther 330:449-457, 2009

Cocaine clearance in blood plasma in rats treated 2 weeks earlier with CocH vector or saline controls

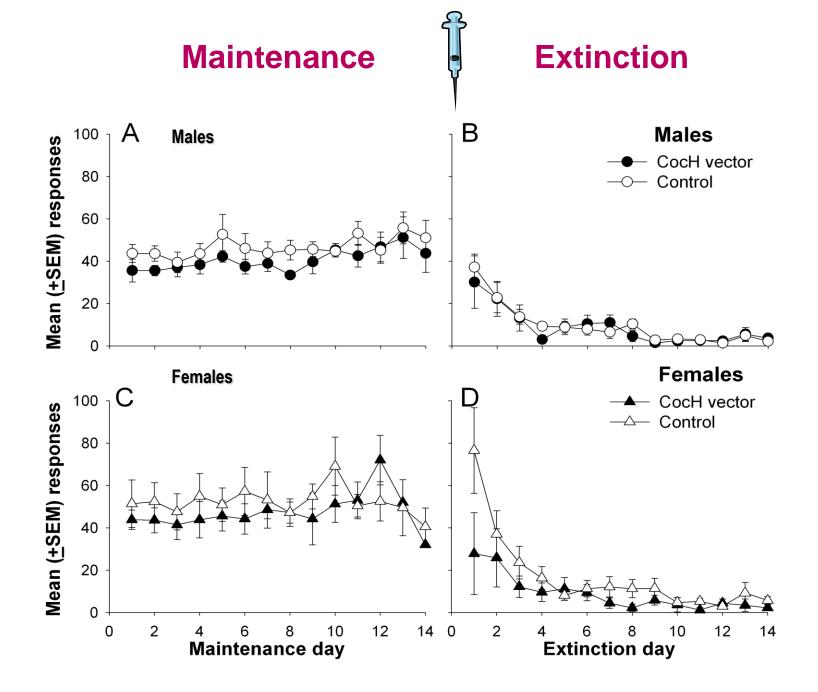


CocH vector reinstatement procedure

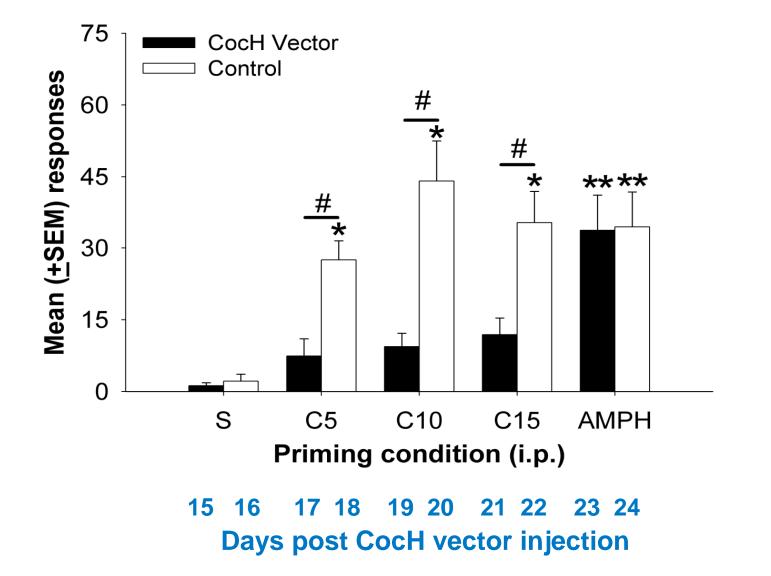
<u>1 injection</u> of CocH vector or saline 1 day before extinction

P hase	ACQ	MAINT	EXT	Reinstatement (8)	Protracted Reinstatement							
(days)	(~10)	(~10)	(14)	SCSCSCSA	SC	SC	SC	SC	SC	SC	SC	SCSA
Dose (mg/kg, i.p.)	C 0.4 mg/kg, i.v.			C (5, 10, 15); A (2)	C (10)				C (10); A (2)			
Weeks post vector	N/A	N/A		3	5	6	7	8	12	16	20	24

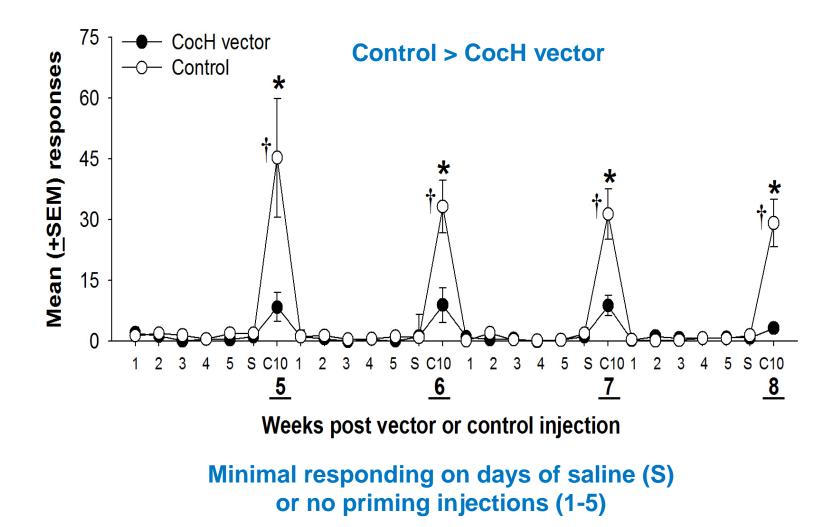
Blood draws for CocH levels weekly then monthly



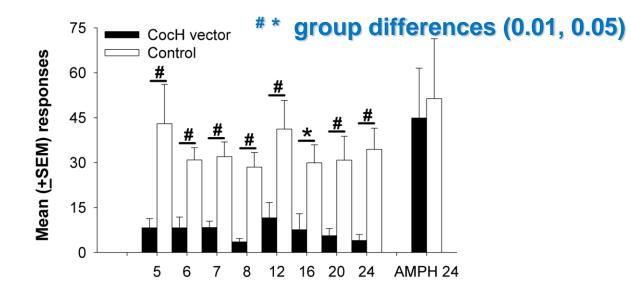
Reinstatement after CocH vector (week 3) by cocaine priming dose



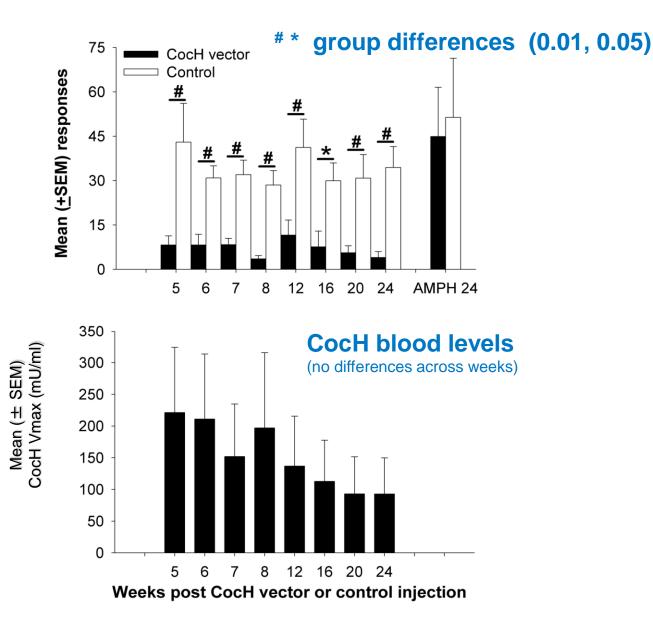
Reinstatement responding after CocH vector (weeks 5 - 8)



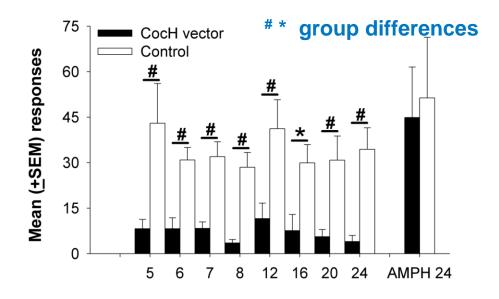
Active lever reinstatement responding



Active lever reinstatement responding

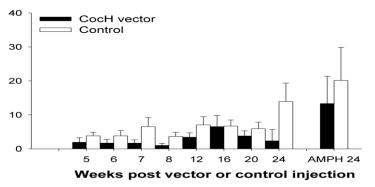


Active lever reinstatement responding



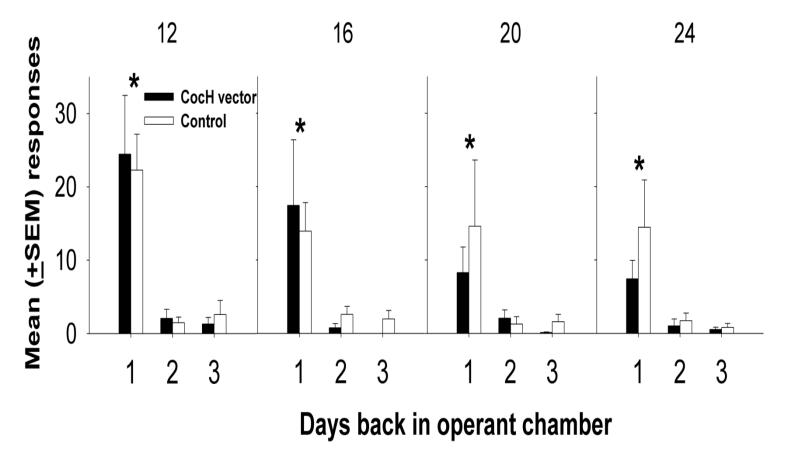
Inactive lever responding control for general behavioral suppression

no group differences



Active lever responding first 3 days after return to operant chamber for monthly reinstatement testing

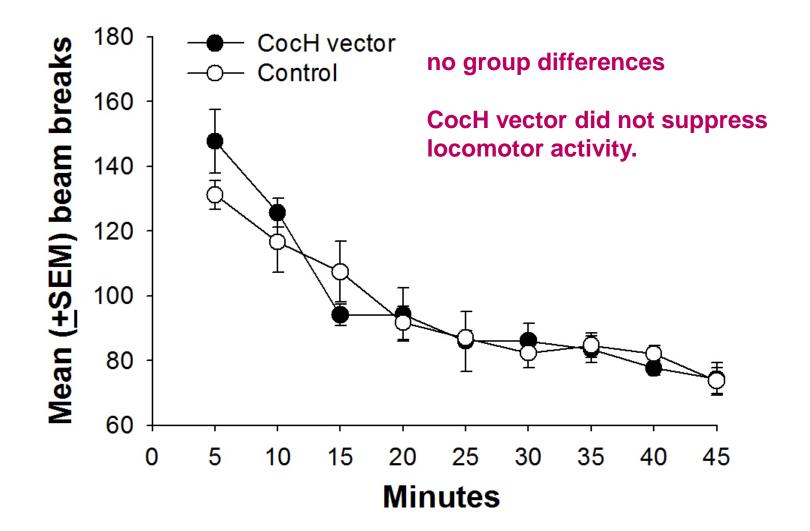
Weeks post vector or control injection



* Day 1 > Days 2 and 3

no group differences

<u>Spontaneous locomotor behavior</u> during 3 45 min sessions - - CocH vector vs control (no cocaine administered)



3 studies of cocaine hydrolase (CocH) treatment to acutely block:

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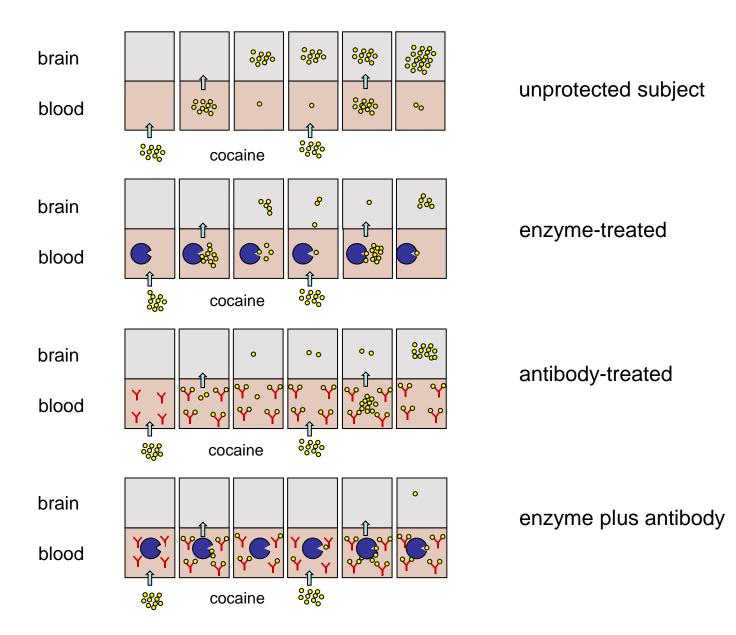
3 studies of CocH viral vector (VEC) treatment to chronically block:

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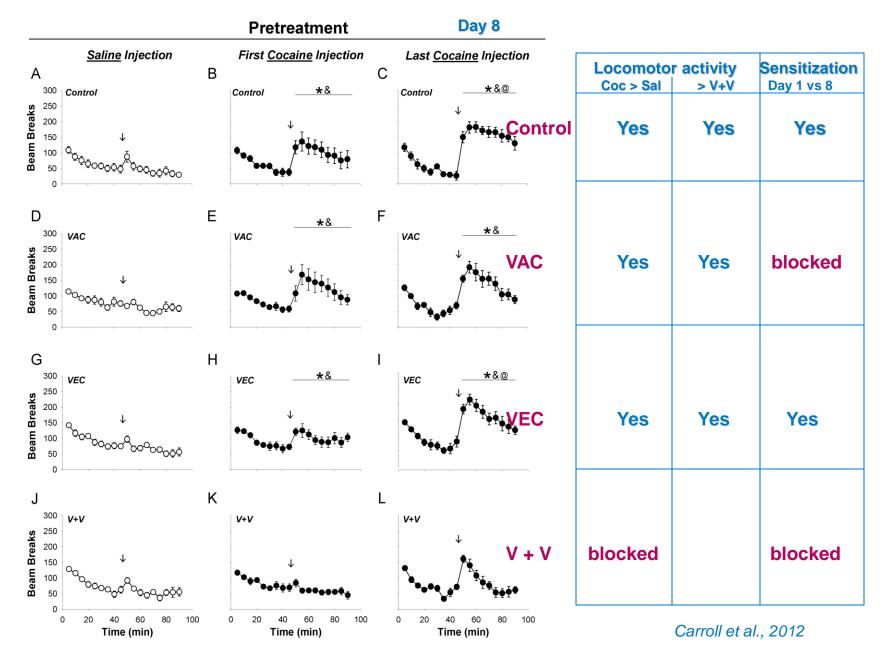
Enhanced interception with Enzyme & Vaccine



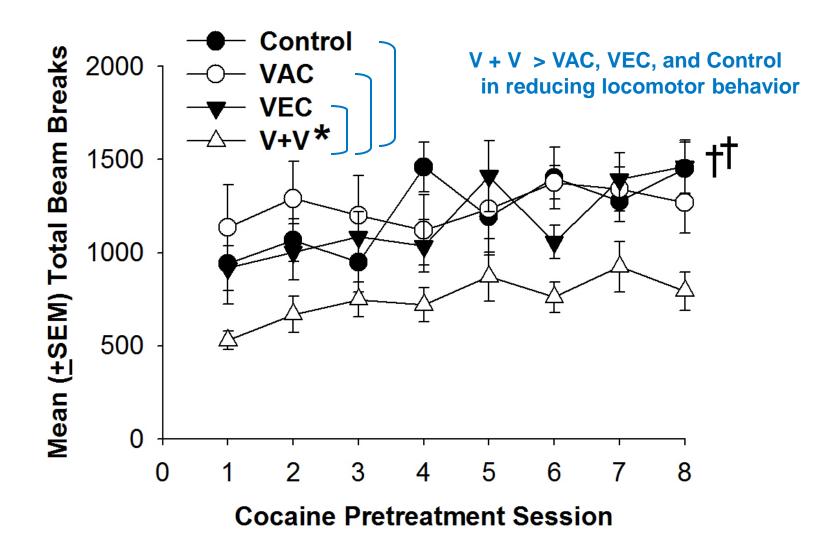
Locomotor activity apparatus



Each session = Saline - locomotor chamber (45 min) then cocaine (10 mg/kg) - locomotor chamber (45 min)

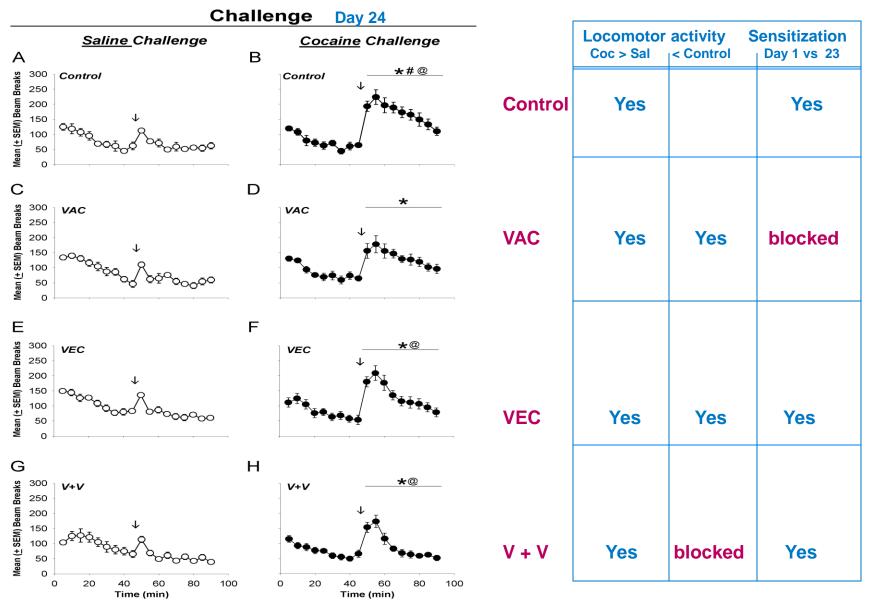


Mean beam breaks over 45 min following cocaine injections across the 8 days of cocaine treatment



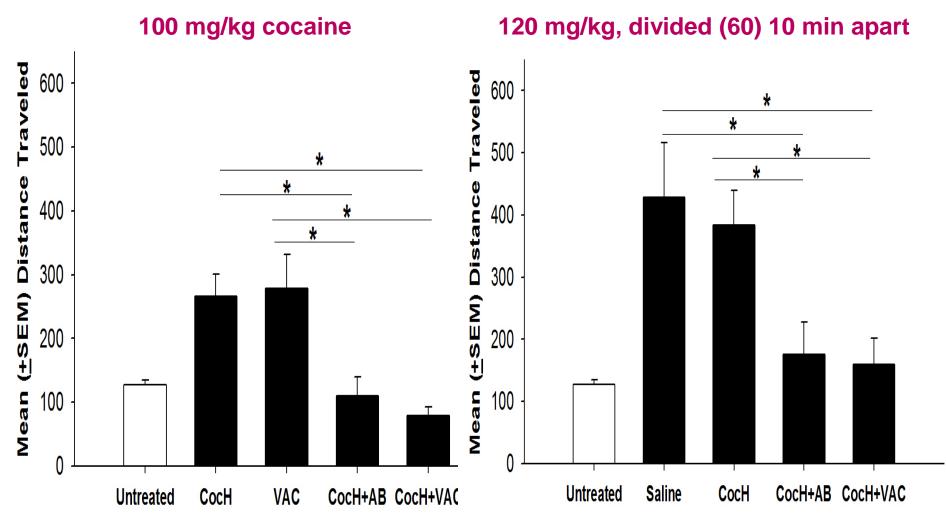
Carroll et al., 2012

Challenge = saline or cocaine injected 15 days <u>after</u> the 8 treatment days



Carroll et al., 2012

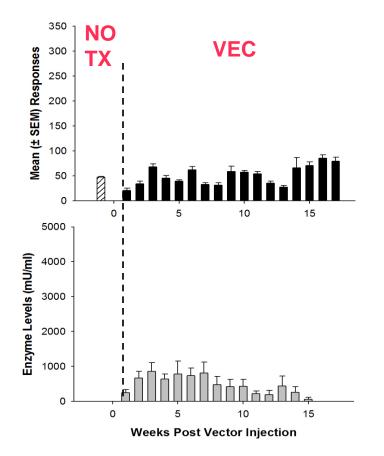
High dose cocaine in mice and VEC + VAC combinations Effect on <u>locomotor behavior</u>



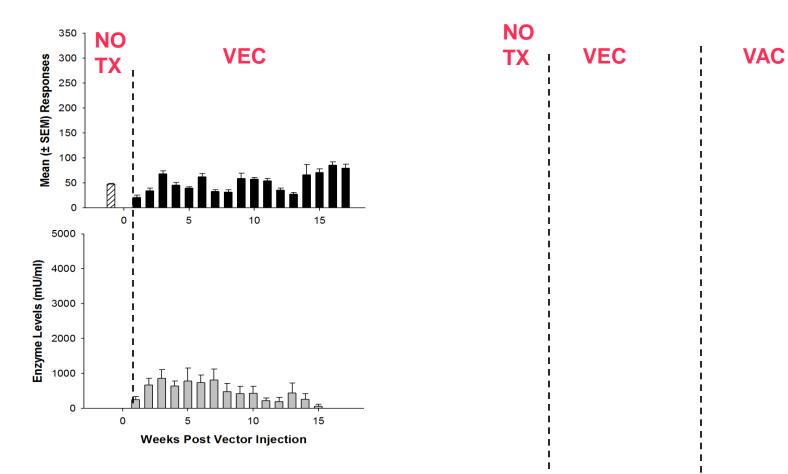
CocH + VAC (AB) > VAC, CocH, SAL and Control in reducing locomotor behavior

Carroll et al., 2012

VEC + VAC effects on cocaine (0.4 mg/kg) self-administration during 2-hr sessions



VEC + VAC effects on cocaine (0.4 mg/kg) self-administration during 2-hr sessions



Summary

Cocaine	abuse	treatment	model

2-hr self-administration FR 1

Treatment effect

Acute (repeated pre-session CocH)				
2-hr self-administration PR schedule				
6-hr escalation FR 1				
reinstatement				

reduction increase reduction

Chronic (CocH vector - 1 injection)		
reinstatement	6-month reduction	
2-hr self-administration FR 1	increase	
VAC + CocH vector (V + V)	Reduction up to 1 month	
locomotor activity	V + V > VAC = VEC > Cont	
locomotor sensitization	V + V > VAC = VEC > Cont	

V + V > VAC = VEC > Control V + V > VAC = VEC > Control VAC improved VEC treatment

Advantages - Disadvantages of CocH-based Treatments

CocH enzyme

<u>Advantages</u>: Rescue for OD in ER Reduces motivation to take cocaine Blocks relapse



Disadvantages:

Increases long-access self-administration 2-fold Blocks relapse to cocaine but <u>not other drugs</u>

Vector-delivered CocH enzyme

Advantages: Blocks relapse 6 months or more Reduces cocaine sensitization which may be related to cocaine self-administration Adds to effects of VAC on sensitization and self-administration during short access FR 1

Disadvantage:

Increases short-access self-administration

Acknowledgements

Faculty collaborators:

Thomas R. Kosten

Baylor College of Medicine

Postdoctoral associates:

Liyi GengMayo ClinicJustin AnkerUniversity of Minnesota

Undergraduate students:

Alex Claxton	University of Minnesota
Seth Johnson	66
Amy Saykao	66

Enzyme development and biochemistry

Liyi Geng, Molecular Pharmacology, Mayo Clinic, Rochester MN

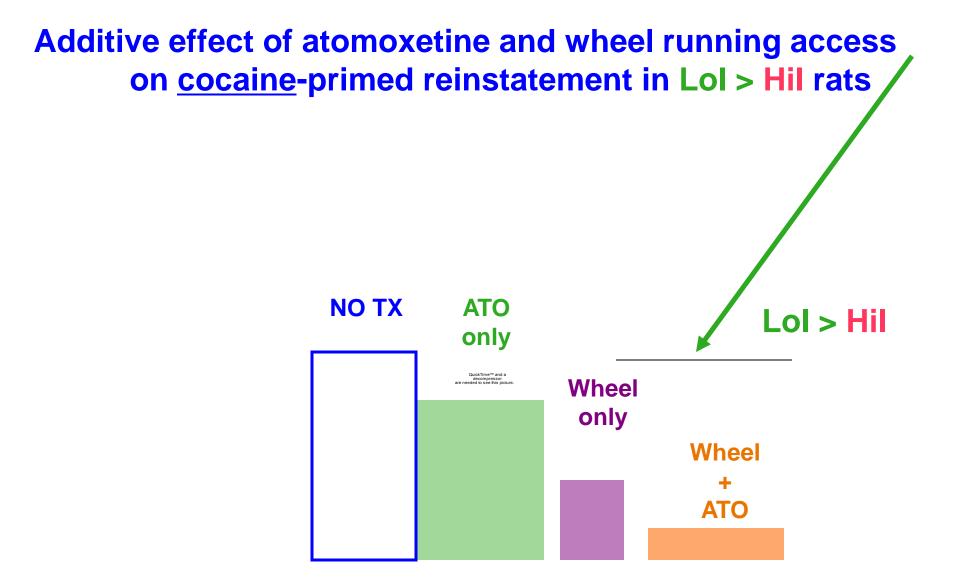
hdAD-Vector development

Robin Parks, Ottawa Hospital Research Inst., Ottawa CN

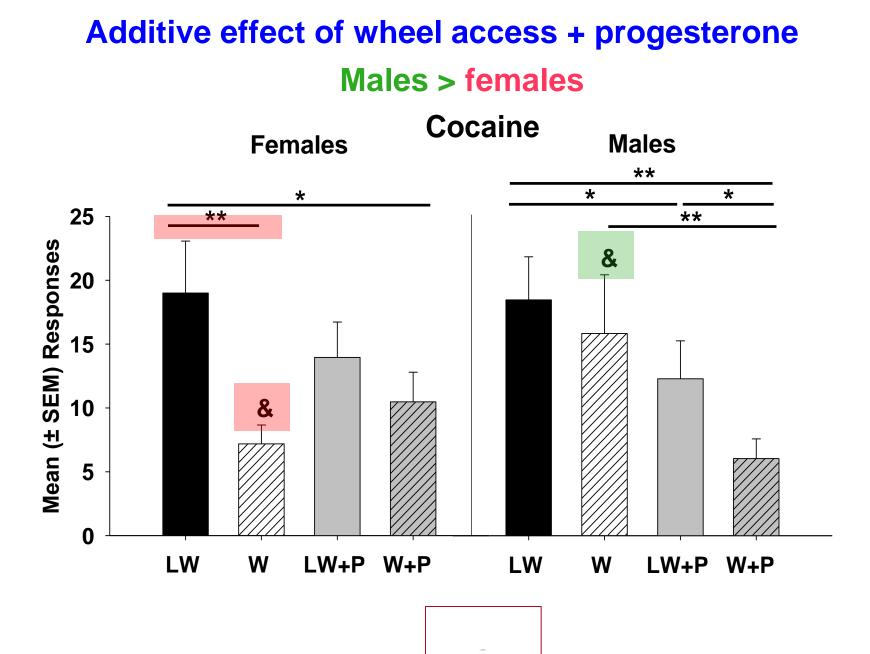
Cocaine vaccine and antibody

Frank Orson, VA Med Center, Houston TX Tom Kosten, Baylor College of Medicine, Houston TX Berma Kinsey, Baylor College of Medicine, Houston TX

This research was supported by NIDA Avant-Garde Award DP1 DA031340, Minnesota Partnership for Biotechnology and Medical Genomics, R01 DA023979, R01 DA023979S1 (SB; MEC-subcontractor) and K05 DA015267 (MEC).



(Zlebnik and Carroll, in progress)



(Zlebnik and Carroll, in progress)

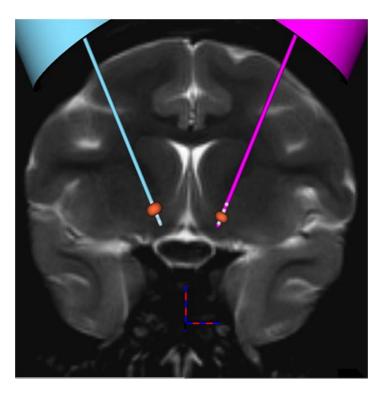
Next Frontier.....

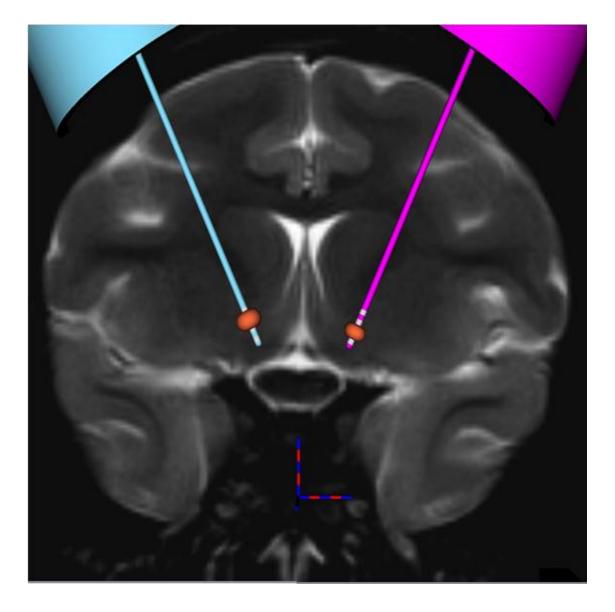
Deep Brain Stimulation (DBS) for Cocaine Addiction

Kenneth B. Baker¹, Marilyn E. Carroll²

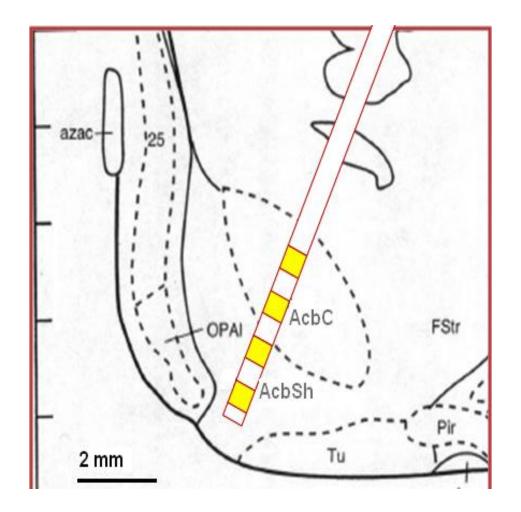
Wallin Foundation Grant, 2011 - 2012

¹Department of Neurology, University of Minnesota, Minneapolis, MN ²Department of Psychiatry, University of Minnesota, Minneapolis, MN





Left and right DBS leads implanted in the region of the NA superimposed on MRI. VTAs are shown in orange



A schematic of the scaled DBS lead with 4 contacts

Results of DBS with drug-rewarded behavior in rats

TargetDrug reinforcer - Task		k Effect	Authors
NAcc shell vs dorsal striatum	Cocaine Reinstatement	Shell: reinstatement	Vassoler et al. 2008
NAcc shell vs core	Cocaine Reinstatement	Shell: reinstatement Core: no effect	Vassoler et al. 2008
NAcc shell vs core	Alcohol consumption	Shell and core: Consumption	Knapp et al. 2009
NAcc core- unilateral	Morphine (CPP)	75% reduction in morphine preference	Liu et al. 2008
Lateral habenula	Cocaine reinstatement	Reinstatement	Friedman et al. 2010
Med forebrain bundle Prefrontal cortex	Cocaine, sucrose Progressive ratio	Reinstatement	Levy et al. 2007
Subthalamic nucleii	Cocaine progressive ratio	Break point for cocaine (motivation for reward) Break point food	Rouaud et al. 2010 (Baunez)

Results of DBS with drug-rewarded behavior in humans (case studies)

Target	Addictive Behavior	Effect	Authors
Subthalamic Nucleii	Abuse of dopamine replacement therapy	ţ	Witjas et al. 2005
Subthalamic Nucleii	Abuse of DA drug Gambling Hypersexuality	ļ	Ardouin et al. 2006
STN for movement disorder	Smoking	Cessation	Kuhn et al. 2009
STN for movement disorder	Smoking	Cessation Weight loss	Mantione et al. 2010
NAcc	Heroin	drug use, craving	Valencia Alfonso et al. 2012
NAcc	Heroin	drug use	Zhou et al. 2011
NAcc	Alcohol	Abstinence Quality of life Craving	Muller et al. 2009 *
		Cue related Craving	Heinze et al. 2009