

The Actions of Majarine on the Central Nervous System (II) —The Effects of Dopaminergic and Serotonergic Antagonists on Majarine-induced Hypothermia in the Mouse¹

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ABSTRACT

Majarine that was isolated from *Berberis Koreana* Palibin (Berberidaceae) is the isoquinoline alkaloid. The effects of dopaminergic and serotonergic antagonists on majarine induced changes in body temperature were studied in the mouse. Intraperitoneal administration of majarine produced dose-dependent hypothermia. At a dose of 0.1 mg/kg, majarine caused a slight increase in body temperature. Majarine-induced hyperthermia was attenuated by the 5-HT antagonist, cyproheptadine. However, it caused hyothermia in mice pretreated with the DA antagonist, haloperidol, and hyperthermia in mice pretreated with haloperidol and cyproheptadine in comparison with haloperidol pretreatment. At a dose of 2.0 mg/kg, majarine-induced hypothermia was attenuated by haloperidol and cyproheptadine, respectively. In reserpine pretreated mice, majarine produced dose-dependent hypothermia. At a dose of 0.1 mg/kg, majarine pretreated with haloperidol caused no significant effect in body temperature. At a dose of 2.0 mg/kg, majarine-induced hypothermia was attenuated by haloperidol pretreatment in mice treated with reserpine and α -methyl-*p*-tyrosine. These data suppose that both dopaminergic and serotonergic mechanisms in the brain mediate the effects of majarine on body temperature. We propose that majarine directly stimulate DA receptor, which secondarily activate 5-HT neurons to cause changes in body temperature.

Key Words: majarine, temperature regulation, haloperidol, cyproheptadine, reserpine.

Abbreviations: DA; dopamine, 5-HT; serotonin, α -MPT; α -methyl-*p*-tyrosine, LSD; lysergic acid diethylamide

INTRODUCTION

Dopaminergic systems in the brain have been the subject of speculation about their possible role in thermoregulation. Centrally mediated temperature effects of DA and either direct or indirect DA agonists have been demonstrated in various animal species. For instance, apomorphine, which is regarded as a direct DA agonist, induces hyperthermia in rabbits (Hill & Horita, 1972; Quock & Horita, 1974), whereas it displays a hypothermic action in mice (Fuxe & Sjoqvist, 1971) and in rats (Colboc & Costentin, 1980). In most species, DA agonists cause a fall in core temperature which is specifically antagonized by DA antagonists. Ample evidence has indicated a role by DA in regulation of body temperature in animals (for a review, see Cox, 1979).

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The central neural mechanisms in the rat involved in the thermal effect of apomorphine have been elucidated to some extent. Microinjection of apomorphine into the preoptic anterior hypothalamus has been shown to cause hypothermia, an effect blocked by pretreatment with the DA antagonist, pimozide (Cox & Lee, 1977). Similarly, Colboc and Costentin (1980) found that the central locus of DA-induced hypothermia is the medial preoptic area of the hypothalamus.

An involvement of 5-HT in DA receptor-mediated hypothermia has also been suggested. DA agonist-induced hypothermia has been reported to be prevented by either 5,6-hydroxytryptamine or electrolytic lesions of the dorsal raphe nuclei (Maj & Przewlocka, 1975; Przewlocka, 1977). Grabowska *et al.* (1973a, b) have shown that the hypothermia induced by apomorphine in rats and mice could be antagonized by LSD and butyrophenones. Cox and Lee (1979) also suggested a 5-HT link in DA-mediated hypothermia in the rat. Menon and Vivonia (1981) reported that apomorphine-induced hypothermia in the mice was attenuated by 5-HT agonist and potentiated by 5-HT antagonist pretreatments. Recently, Yamawaki *et al.* (1983) reported that apomorphine could simultaneously activate two opposing thermoregulatory DA-related systems: one causes hypothermia; the other, hyperthermia. The DA-hypothermic mechanism is blockable by the DA-receptor antagonist haloperidol, whereas the DA-hyperthermic mechanism is nonsensitive to haloperidol and is activated by apomorphine, but at a lower dose. The latter system is mediated by a secondary activation of a serotonergic mechanism. Thus, the effect of apomorphine on body temperature depends on the difference in response between these two mechanisms.

In our previous studies, we had clarified many pharmacological actions of majarine: the bacteriostatic effect *in vitro* (Cho *et al.*, 1963); the potentiation of hypnotic action of alcohol and the reduction of rectal temperature in mice (Cho *et al.*, 1974); the hypotensive effect in rats (Cho *et al.*, 1984); the depressor response on blood pressure after intracerebroventricular injection of several drugs and locomotor activity in rats (Park *et al.*, 1984). In this paper, we report the results of a series of experiments to investigate the role played by the DA antagonist, haloperidol, the 5-HT antagonist, cyproheptadine, the catecholamine depletor, reserpine and the catecholamine synthesis inhibitor, α -MPT, further to clarify the central action of majarine on body temperature in the mouse.

MATERIALS AND METHODS

Animals

Mice (ICI strain) of either sex, weighing 20-30 g were used. The animals were provided with a standard diet and water. One h before testing, animals were placed individually into acrylic cages (12 × 23 × 14 cm) in diffusely illuminated room maintained at a temperature of 21 ± 1°C and at constant humidity.

Drugs and solutions

The following drugs were used: haloperidol (Peridol, Whan-II Pharma. Co.), cyproheptadine hydrochloride (Shin-Kwang Pharma. Co.), reserpine hydrochloride and α -methyl-*p*-tyrosine (Sigma Co.). Majarine (5,6-Dihydro-9,10-dimethoxybenzo [g]-1,3-benzodioxolo [5,6-a] quinolizinium) used in this study was obtained from *Berberis koreana* Palibin. All drugs were delivered as 0.9% saline solutions in a dose volume of 10 ml/kg.

Treatments of various dosages of majarine on body temperature

Animals were injected intraperitoneally (i.p.) with 0.1, 1.0 or 2.0 mg/kg of majarine. Controls were injected with saline solution. Rectal temperature was measured with the animals unrestrained immediately before and at 15, 30, 45, 60, 90 and 120 min after majarine injection with a digital thermometer.

Drug pretreatments on the thermal effects of majarine

The effects of 0.1 mg/kg or 2.0 mg/kg of majarine on body temperature were studied in mice at 1) 60 min after pretreatment with the DA antagonist, haloperidol (0.5 mg/kg i.p.); 2) 15 min after pretreatment with the 5-HT antagonist, cyproheptadine (0.2 mg/kg i.p.)

Drug pretreatments on the thermal effects of majarine in reserpinized mice

The effects of 0.1 mg/kg or 2.0 mg/kg of majarine on body temperature were studied in mice at 1) 2.5 h after pretreatment with α -methyl-*p*-tyrosine (200 mg/kg i.p.), 2) 60 min after pretreatment with haloperidol (0.5 mg/kg i.p.) in reserpinized mice. Animals were treated with reserpine (5 mg/kg i.p.) on the day prior to the experiment.

Rectal temperature measurements

Rectal temperatures were measured electronically with a small thermocouple probe (San-Ei Instrument Co.) inserted to a depth 2.5 cm. Temperatures were read thirty seconds after probe insertion. Temperatures were recorded as changes in temperature (mean \pm SEM) immediately before drug injection.

Statistics

The results were analyzed statistically using the two-tailed Mann-Whitney U-test. Difference with $p < 0.05$ was considered statistically significant.

RESULTS

Dose-response effect of majarine on body temperature

The thermal effect of majarine investigated is drawn in Fig. 1. Majarine at 1.0 and 2.0 mg/kg significantly lowered the rectal temperature ($p < 0.05$ and $p < 0.001$, respectively, compared with responses of controls). Responses to 2.0 mg/kg of majarine were significantly different from those of 1.0 mg/kg ($p < 0.05$). At 0.1 mg/kg, it produced a slight hyperthermia ($p < 0.05$). This response was greatest approximately 90 min after injection of majarine and gradually returned to base-line level after 12 h.

In our experiments, we showed that i.p. injection of 0.1 mg/kg of majarine, which normally caused hyperthermia in mice, produced hypothermia in haloperidol-pretreated animals. However, Majarine-induced hyperthermia was attenuated by the 5-HT antagonist, cyproheptadine. Majarine at 1.0 and 2.0 mg/kg significantly lowered the rectal temperature. At 2.0 mg/kg, majarine-induced hypothermia in animals was attenuated by haloperidol or cyproheptadine, respectively. However, pretreatment haloperidol and cyproheptadine showed no significant effect in comparison with responses to haloperidol pretreatment. Thus, it is apparent from these results that both dopaminergic and serotonergic mechanisms mediate the effect majarine on the body temperature. Our data may be suggested that majarine exerts a biphasic action on the body temperature in the mouse. As suggested by Yamawaki *et al.* (1983), a low dose of apomorphine can simultaneously activate a DA-related mechanism, which tends to decrease body temperature (either by increasing heat loss or decreasing heat production), and a 5-HT-related mechanism, which tends to increase body temperature. High doses of apomorphine (1.0 and 2.0 mg/kg) caused hypothermia (it may be that the DA—hypothermia mechanism overrides the effect of the DA/5-HT hyperthermia mechanism at these doses). The present study shows that a low dose of majarine, which can activate a DA/5-HT-related mechanism, tends to increase body temperature and decrease body temperature in cyproheptadine-pretreated animals. However, majarine caused hypothermia

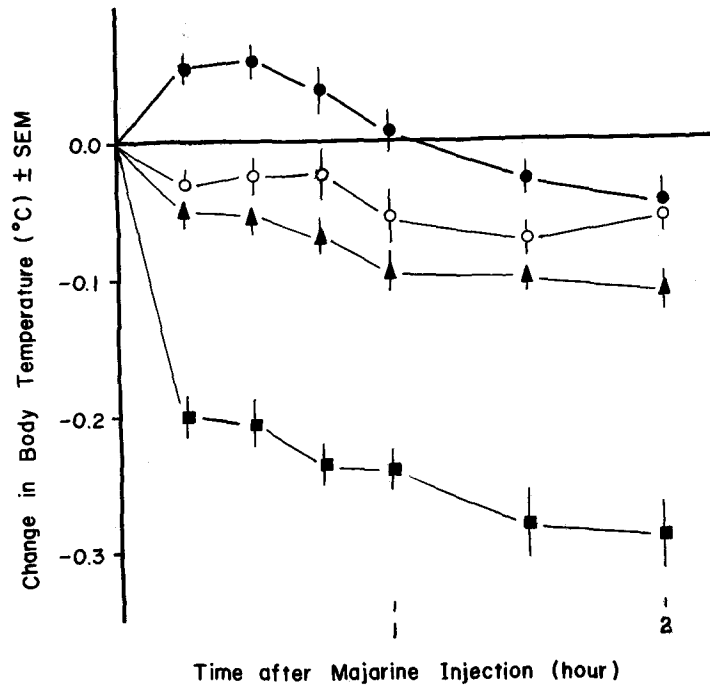


Fig. 1. Body temperature response curves to different dose of majarine in mice. o, control (injected with saline) (n = 10); ●, majarine, 0.1 mg/kg i.p. (n = 12); ▲, majarine, 1.0 mg/kg i.p. (n = 12); ■, majarine, 2.0 mg/kg i.p. (n = 13). Responses to 0.1, 1.0 and 2.0 mg/kg of majarine are significantly different from those of control at $p < 0.05$, $p < 0.05$ and $p < 0.001$, respectively.

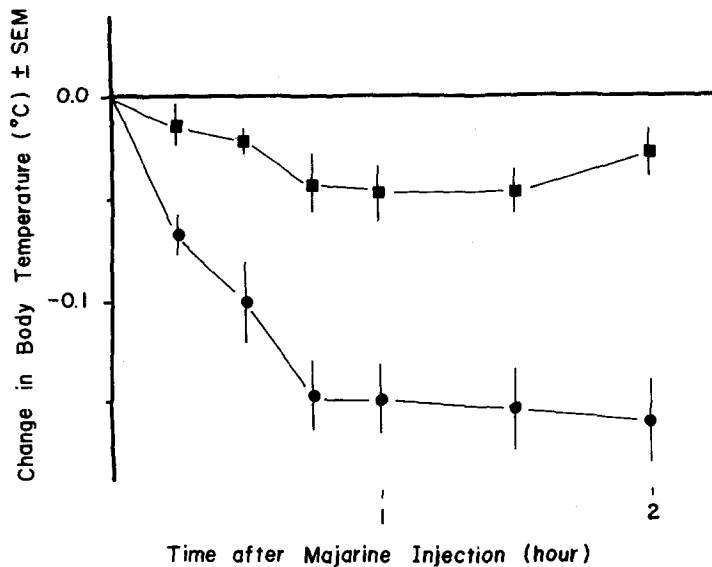


Fig. 2. Effects of the haloperidol (0.5 mg/kg i.p.) pretreatment on majarine-induced change in body temperature. ●, haloperidol + majarine, 0.1 mg/kg i.p. (n = 16); ■, haloperidol + majarine, 2.0 mg/kg (n = 15). Levels of significance: haloperidol + majarine (0.1 mg/kg) vs. majarine (0.1 mg/kg) (from data Fig. 1), $p < 0.001$; haloperidol + majarine (2.0 mg/kg) vs. majarine (2.0 mg/kg) (from data Fig. 1), $p < 0.001$.

Effects of haloperidol and cyproheptadine on the effects of majarine on body temperature

The effect of pretreatment with haloperidol on majarine-induced hypothermia is shown in Fig. 2. Haloperidol by itself did not significantly change the baseline body temperature. Pretreatment with haloperidol (0.5 mg/kg i.p.) completely blocked the hypothermia normally induced by 2.0 mg/kg of majarine ($p < 0.001$, compared with responses to 2.0 mg/kg of majarine with no haloperidol pretreatment). At 0.1 mg/kg of majarine, pretreatment with haloperidol caused a pronounced hypothermia ($p < 0.001$, compared with responses to 0.1 mg/kg of majarine with no haloperidol pretreatment). The effect of pretreatment with cyproheptadine on majarine-induced hypothermia is shown in Fig. 3. Cyproheptadine by itself did not significantly change the base-line body temperature. Pretreatment with cyproheptadine (0.2 mg/kg i.p.) completely blocked the hypothermia normally induced by 2.0 mg/kg of majarine ($p < 0.001$, compared with responses to 2.0 mg/kg of majarine with no cyproheptadine pretreatment). At 0.1 mg/kg of majarine, pretreatment with cyproheptadine caused a hypothermia ($p < 0.05$, compared with responses to 0.1 mg/kg of majarine with no cyproheptadine pretreatment). The effect of pretreatment with haloperidol and cyproheptadine on majarine-induced hypothermia is shown in Fig. 4. Pretreatment with haloperidol and cyproheptadine did not significantly change the baseline body temperature. Pretreatment with haloperidol (0.5 mg/kg) and cyproheptadine (0.2 mg/kg) completely blocked the hypothermia normally induced by 2.0 mg/kg of majarine ($p < 0.001$, compared with responses to 2.0 mg/kg of majarine with no pretreatment of haloperidol and cyproheptadine). At 0.1 mg/kg, pretreatment with haloperidol and cyproheptadine did not significantly change the body temperature (no significant difference, compared with responses of majarine alone). On the other hand, pretreatment with cyproheptadine significantly blocked the hypothermia in mice pretreated with haloperidol (see Fig. 2). At 2.0 mg/kg of majarine, pretreatment with haloperidol and cyproheptadine showed no significant effect in comparison with responses to haloperidol pretreatment (see Fig. 2). Thus, haloperidol and cyproheptadine, respectively, could cancel the biphasic effects of majarine on body temperature.

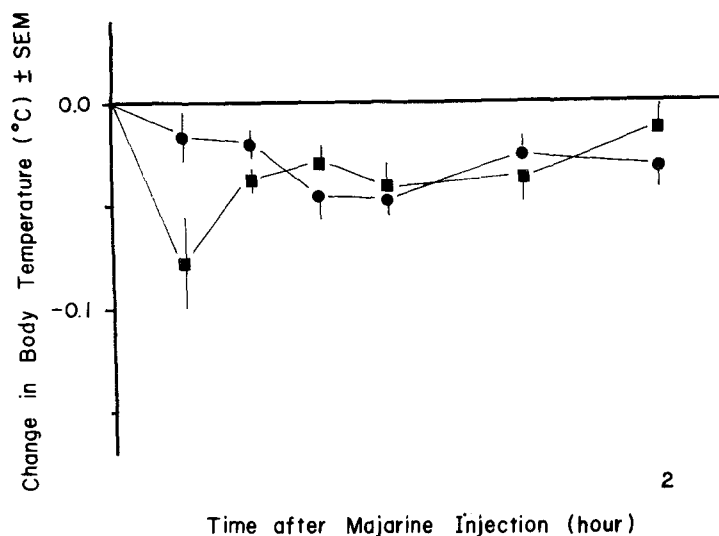


Fig. 3. Effects of cyproheptadine (0.2 mg/kg i.p.) pretreatment on majarine-induced change in body temperature. ●, cyproheptadine + majarine-induced change in body temperature. ●, cyproheptadine + majarine, 0.1 mg/kg i.p. (n = 14); ■, cyproheptadine + majarine, 2.0 mg/kg i.p. (n = 14). Levels of significance: cyproheptadine + majarine (0.1 mg/kg) vs. majarine (0.1 mg/kg) (From data Fig. 1), $p < 0.05$; cyproheptadine + majarine (2.0 mg/kg) vs. majarine (2.0 mg/kg) (from data Fig. 1), $p < 0.001$.

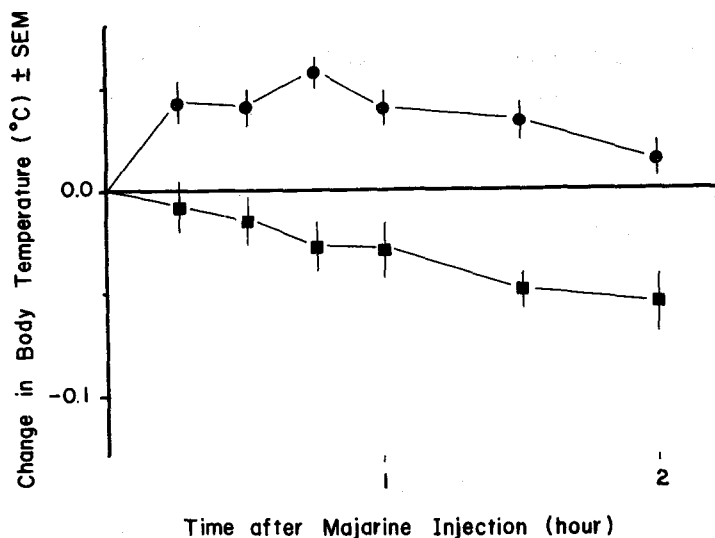


Fig. 4. Effects of haloperidol and cyproheptadine pretreatment on majorine-induced change in body temperature. ●, haloperidol + cyproheptadine + majorine, 0.1 mg/kg i.p. (n = 14); ■, haloperidol + cyproheptadine + majorine, 2.0 mg/kg i.p. (n = 14). Levels of significance: haloperidol + cyproheptadine + majorine (0.1 mg/kg) vs. majorine (0.1 mg/kg) (from data Fig. 1), no significant difference; haloperidol + cyproheptadine + majorine (2.0 mg/kg) vs. majorine (2.0 mg/kg) (from data Fig. 1), $p < 0.001$; haloperidol + cyproheptadine + majorine (0.1 mg/kg) vs. haloperidol + majorine (0.1 mg/kg) (from data Fig. 2), $p < 0.001$; haloperidol + cyproheptadine + majorine (2.0 mg/kg) vs. haloperidol + majorine (2.0 mg/kg) (from data Fig. 2), no significant difference.

Effect of α -methyl-*p*-tyrosine and haloperidol on the effect of majorine on body temperature in reserpinized mice

Treatments with reserpine caused the body temperature of mice to drop from a pretreatment value of $37.6 \pm 0.4^\circ\text{C}$ (n = 81) to $25.2 \pm 0.3^\circ\text{C}$ (n = 81) degrees one day after injection. Temperature of reserpinized mice gradually increased during the subsequent experimental period. This gradual increase was less apparent in reserpinized mice treated with majorine (see Fig. 5). Majorine at 0.1 and 2.0 mg/kg significantly lowered the rectal temperature in reserpinized mice ($p < 0.001$ and $p < 0.001$, respectively, compared with responses of controls). The effect of additional pretreatment with the catecholamine synthesis inhibitor, α -methyl-*p*-tyrosine (α -MPT), was investigated in further experiment, in which reserpinized mice were treated with 0.1 and 2.0 mg/kg of majorine (see Fig. 6). α -methyl-*p*-tyrosine by itself did not significantly change the base-line body temperature in reserpinized mice. At 0.1 mg/kg of majorine, pretreatment with α -MPT caused a pronounced hypothermia ($p < 0.001$, compared with responses to 0.1 mg/kg of majorine in reserpinized mice). At 2.0 mg/kg of majorine, it produced a slight hypothermia ($p < 0.05$, compared with responses to 2.0 mg/kg of majorine in reserpinized mice). The effect of pretreatment with α -MPT and haloperidol on majorine-induced hypothermia is shown in Fig. 7. Haloperidol by itself did not significantly change the base-line body temperature in reserpinized mice. At 0.1 mg/kg of majorine, pretreatment with haloperidol showed no significant effect in comparison with responses to α -MPT pretreatment in reserpinized mice. Pretreatment with haloperidol completely blocked the hypothermia induced by 2.0 mg/kg of majorine in mice treated with reserpine and α -MPT ($p < 0.001$) (see Fig. 6).

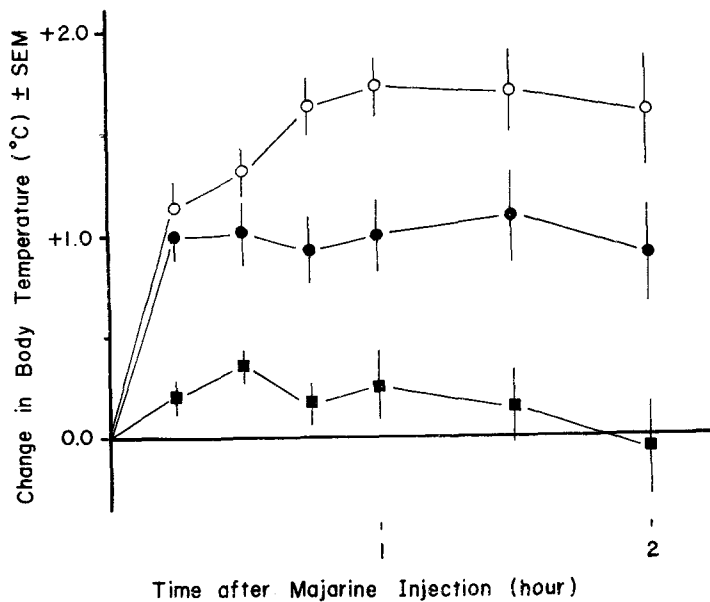


Fig. 5. Effects of reserpine (5 mg/kg i.p.) pretreatment on majorine-induced change in body temperature. o, control (reserpine + saline) (n=9); ●, reserpine + majorine, 0.1 mg/kg i.p. (n=9); ■, reserpine + majorine, 2.0 mg/kg i.p. (n=11). Responses to 0.1 and 2.0 mg/kg of majorine are significantly different from those of controls at $p < 0.001$, respectively.

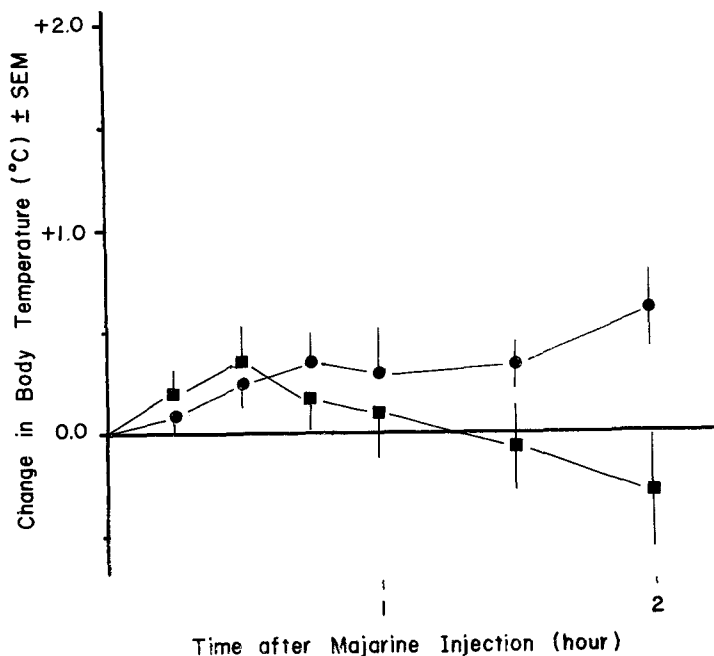


Fig. 6. Effects of reserpine (5 mg/kg i.p.) and α -methyl-*p*-tyrosine (200 mg/kg i.p.) pretreatment of majorine-induced change in body temperature. ●, reserpine + α -MPT + majorine, 0.1 mg/kg i.p. (n=10); ■, reserpine + α -MPT + majorine, 2.0 mg/kg i.p. (n=10). Levels of significance: reserpine + α -MPT + majorine (0.1 mg/kg) vs. reserpine + majorine (0.1 mg/kg) (from data Fig. 5), $p < 0.001$; reserpine + α -MPT + majorine (2.0 mg/kg) vs. reserpine + majorine (2.0 mg/kg) (from data Fig. 5), $p < 0.05$.

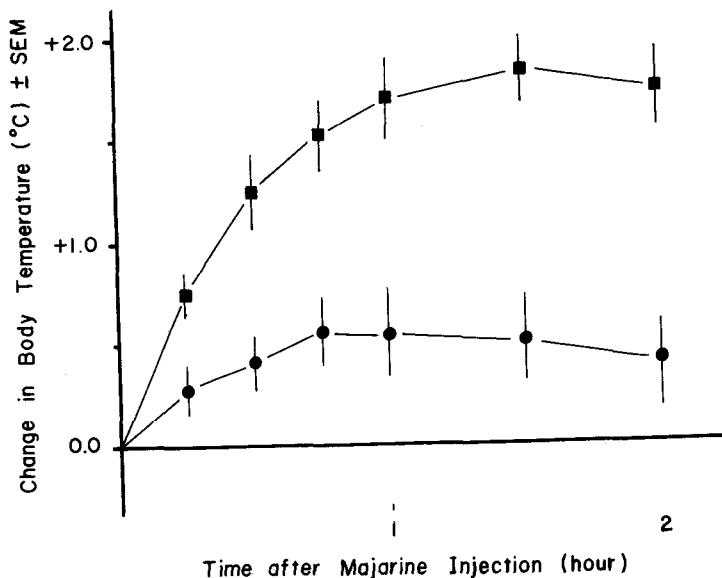


Fig. 7. Effect of reserpine, α -methyl-*p*-tyrosine and haloperidol pretreatment on majarine-induced change in body temperature. ●, reserpine + α -MPT + haloperidol + majarine, 0.1 mg/kg i.p. (n = 10); ■, reserpine + α -MPT + haloperidol + majarine, 2.0 mg/kg i.p. (n = 10). Levels of significance: reserpine + α -MPT + haloperidol + majarine (0.1 mg/kg) vs. reserpine + α -MPT + majarine (0.1 mg/kg) (from data Fig. 6), no significant difference; reserpine + α -MPT + haloperidol + majarine (2.0 mg/kg) vs. reserpine + α -MPT + majarine (2.0 mg/kg) (from data Fig. 6), $p < 0.001$.

DISCUSSION

We have previously shown that majarine exerted the potentiation of hypnotic action of alcohol, the reduction of rectal temperature in mice (Cho *et al.*, 1974). Park *et al.* (1984) reported that majarine (5-20 mg/kg) produced dose-dependent decrease in the locomotor activity and the effect of apomorphine (0.1 mg/kg) was not affected by intraperitoneal pretreatment of majarine (20 mg/kg) in comparison with apomorphine alone, but apomorphine (0.5 mg/kg) showed a slightly attenuated effect on the locomotor activity by intraperitoneal pretreatment of majarine (20 mg/kg) in comparison with apomorphine alone in rats. Majarine is isoquinoline alkaloid like apomorphine. Apomorphine, a direct agonist at DA receptor, exerts a biphasic action on the mouse locomotor activity. In low dose levels, apomorphine inhibits locomotor activity, whereas it produces hyperactivity and stereotypy when given in high dose. the excitatory action of apomorphine is thought to be due to the activation of postsynaptic DA receptors (Kelly *et al.*, 1975), whereas the inhibitory effects are thought to be mediated via a DA autoreceptor (Carlsson, 1975; DiChiara *et al.*, 1976; Strömbom, 1975). Indeed, DA autoreceptor in the substantia nigra have been shown to have a lower threshold for inhibition of neuronal fires after intravenously administered apomorphine than do postsynaptic DA receptors (Skirboll *et al.*, 1979). Apomorphine affects body temperature in variety of species. Directed administration of apomorphine into the various areas in the brain in rats has shown that this DA agonist acts on the preoptic anterior hypothalamus to elicit its hypothermic response (Cox & Lee, 1977). The lowering of body temperature caused by centrally injected apomorphine is blocked by centrally or peripherally administered DA antagonist (for review, see Cox, 1979). Hence, it may be inferred that the interaction of peripherally administered drugs, haloperidol and cyproheptadine, with majarine occurs at the central site. Reserpine hypothermia is regarded as a central effect involving catecholamine neurons (Cox & Tha, 1975).

inhaloperidol-pretreated animals. DA agonists caused a fall in core temperature in the rat which is mediated through vasodilation in the tail (Cox *et al.*, 1978; 1980). Apomorphine affected body temperature by increasing heat loss and changing metabolic rate (Lin *et al.*, 1979). Radiation heat loss from the tail can be prevented by a cover of insulating material and aluminum foil. Cox *et al.* (1981) have shown that insulating the tail in rats can attenuate apomorphine-induced hypothermia. Apomorphine at 2.0 mg/kg produced hyperthermia in haloperidol-pretreated tail-covered rats (Yamawaki *et al.*, 1983). In high dose, malarine-induced hypothermia was attenuated by the DA antagonist or the 5-HT antagonist, respectively. The 5-HT antagonist, cyproheptadine, was not sufficient to block completely the hypothermic effect of 2.0 mg/kg of malarine in comparison with haloperidol pretreatment. Indeed, Cools (1978) has proposed the existence of two types of DA receptors in the brain, mediating opposing functions: haloperidol-sensitive DA receptors and haloperidol-nonsensitive DA receptors. Interestingly, in the goat, De Roij *et al.* (1978, 1979) have also suggested the existence in addition to a haloperidol-sensitive heat loss DA mechanism, of a haloperidol-nonsensitive DA mechanism that mediates the vasodilation effect of DA. Anatomical locations of two malarine-related thermoregulatory systems are not known. The drugs used in our experiments have both central and peripheral effects. Thus, both central and peripheral neural mechanism may be involved. In order to provide further evidence of the central action of malarine, we would like to observe in animal given microinjection of malarine into the preoptic anterior hypothalamus in brain. Malarine at 0.1 and 2.0 mg/kg significantly lowered the rectal temperature in reserpinized mice. Pretreatment with α -MPT caused a pronounced hypothermia in reserpinized mice. Our data clearly demonstrate that such as malarine lowered the body temperatures of normals through a process subject to attenuation by haloperidol, a dose of 2.0 mg/kg malarine decreased the body temperatures of reserpinized animals through a process which was attenuated by haloperidol. Danielson *et al.* (1985) reported that pretreatment with reserpine appears to alter the balance which normally exists between apomorphine-sensitive hypo- and hyper-thermic mechanism in a direction which favors hyperthermia. The inverted responses to apomorphine and the lack of attenuation by haloperidol suggest that this paradoxical hyperthermia may be due to stimulation of the normally recessive DA-related hyperthermic mechanism previously described by Yamawaki *et al.* (1983). Our data indicate that haloperidol activity at malarine-sensitive sites on still-active hypothermia-mediating neurons served to potentiate the balance further in favor of hyperthermia. Similar potentiating effects have been described previously with the neuroleptic sulphiride (Horowski, 1978). The major neurochemical effect of reserpine is to deplete central and peripheral stores of catecholamines and serotonin (Danielson *et al.*, 1985). Malarine is thought to rely upon these neurotransmitters in order to produce its thermic responses.

Our results demonstrate that pretreatments with reserpine and α -MPT reduce the animal's ability to respond through apomorphine-sensitive hypo- and hyper-thermic mechanisms to malarine. Assuming that drug-induced thermic responses are mediated through activation of neuronal pathways which are associated with thermoregulation, it is clear that this autonomic function must also be crucially depend upon reserpine-sensitive neurotransmitter stores. These data suppose that both dopaminergic and serotonergic mechanisms in the brain mediate the effects of malarine on body temperature. We propose that malarine directly stimulated DA receptors which secondarily activated 5-HT neurons to cause changes in body temperature. Our data also show that a transmitter may involve in neuronal pathways which serve opposite functions in thermoregulation. The transmitter mechanism may be a part of the multisynaptic pathway or it may modulate the activity of the pathway by synapsing on neurons of the pathway. Thus, the effect of systemic injection of a transmitter agonist or antagonist on body temperature will depend on the sum of the actions on the different synapses (Bligh, 1979). Furthermore, receptors in synapses of different thermoregulatory neuronal pathway may have different sensitivities to drugs.

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= 국문초록 =

Majarine의 중추신경계에 대한 작용(II)

—마우스에 있어서 Majarine의 체온감소에 미치는 dopamine, serotonin 길항제의 작용에 관한 연구—

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한국특산 매자나무(*Berberis Koreana* Palibin)의 뿌리에서 분리한 majarine은 iso-quinoline 알카로이드로서 본 교실에서는 중추신경계에 대한 약리작용을 검토하고 있다.

Majarine을 마우스 복강내로 투여하여 직장온도 변화와 haloperidol, cyproheptadine과 reserpine 등에 대한 약물 상호작용을 관찰하여 다음과 같은 성적을 얻었다.

Majarine은 마우스에 있어서 용량의존적으로 현저한 체온감소를 나타내었으나, 0.1 mg/kg 투여시 체온증가의 유의성을 보였다. 체온감소는 haloperidol과 cyproheptadine으로 억제되었다. Reserpine 처리 마우스에 있어서 α -methyl-*p*-tyrosine으로 전처리한 다음 majarine 2.0mg/kg 투여시 체온감소를 나타내었다.

이러한 결과로 보아 majarine의 체온변화는 dopamine과 serotonin 수용체에 관련성이 있다고 사려되고, 체온감소는 dopamine 수용체에 직접적으로 작용한다고 생각되는 바이다.