

## Effect of Morphine Self-Administration on Water and Food Intake in Rat

\*<sup>1,3</sup> Mahmoud Hosseini, <sup>2</sup> Hojjat Allah Alaei, <sup>1</sup> Mohammad Javad Eslamizade, <sup>1</sup> Fatemeh Saffarzade

### Abstract

#### Objective

Some lines of evidences demonstrate that opioids are involved in water and food intake. On the other hand the dopaminergic mesolimbic system that consists of ventral tegmental area (VTA), nucleus accumbens (NAc) and medial prefrontal cortex is considered to be crucial in the rewarding actions of opiates. There are also reports showing that this system has some roles in appetite and drinking behaviors. The aim of this study was to investigate the effects of morphine self- administration on food and water intake in rats.

#### Materials and Methods

Male Wistar rats were first trained to receive small pellets of food by pressing active lever in self-administration apparatus. Rats were anaesthetized with ketamine and their jugular vein was cannulated. After recovery the animals were placed in self-administration apparatus and allowed to self-administer morphine (0.5 mg in 0.1 ml per infusion, in morphine group) or 0.1 ml saline (in saline group) during 10 consecutive days for 2 h /sessions. The amount of 24 h water and food intake during the last 3 days compared between saline and morphine groups.

#### Results

The results showed that water and food intake in morphine group in days 8, 9 and 10 was lower than saline group.

#### Conclusion

This study indicates that morphine self - administration alters food intake and drinking water but the exact mechanism(s) need to be more investigated.

**Keywords:** Drinking, Food, Morphine, Rat, Self-administration

---

1- Department of Physiology, Mashhad University of Medical Sciences, Mashhad, Iran

2- Department of Physiology, Isfahan University of Medical Sciences, Isfahan, Iran

3- Pharmacological Research Center of Medicinal Plants, Mashhad University of Medical Sciences, Mashhad, Iran

\*Corresponding author : email: hosseinim@mums.ac.ir

### Introduction

The neural mechanisms underlying motivation to eat are still largely undetermined (1). Food intake is driven by several components, such as hunger, metabolic needs, orosensory reward, food palatability and incentive motivation (1). A large body of evidence has suggested a role of the endogenous opioids and their receptors in the regulation of appetite (2). On the other hand opioid receptors have a wide distribution in the nervous system and include a number of regions implicated in food intake such as the hypothalamic paraventricular nucleus and the central nucleus of amygdala (3). Morphine has been reported to stimulate feeding when administered into the ventral tegmental area and nucleus accumbence (4, 5). In other studies intracerebroventricular injections of morphine decreased food (6) and water intake (6 - 8). On the other hand some reports showed that morphine activation of the endogenous opioid system increased food intake in most species, including normal humans and rats, but decreased food intake in mice (9). Intraperitoneal administration of morphine in 24h food deprived rats, reduced levels of food and water intake (10, 11); in contrast a second experience showed that morphine increased levels of food and water intake in non-deprived animals (10, 11). Subcutaneous injections of morphine decreased food and water intake (10, 11). All of these findings are controversial regarding the effect of morphine on water and food intake. On the other hand the dopaminergic mesolimbic system that consists of ventral tegmental area (VTA), nucleus accumbens (NAc) and medial prefrontal cortex is considered to be crucial in the rewarding actions of opiates (12). There are also reports showing that this system has some roles in appetite and drinking behaviors (13 - 15). The aim of

this study was to investigate the effects of morphine self- administration on food and water intake in rats.

### Materials and Methods

#### *Animals*

Male Wistar rats weighing 200–250 g (Razi Institute, Tehran, Iran) were used. Animals were housed four to five per cage with access to food and water ad libitum, and they were maintained at  $22.0 \pm 2.0$  °C with a 12-light/12-dark cycle (light period 07:00 and 19:00 h). All animals were allowed to adapt to laboratory conditions for at least 1 week before the studies. Experimental plan was approved by the Isfahan University Committee on Animal Research.

#### *Self - administration apparatus*

Briefly, to aid in acquisition of drug self-administration, rats were initially trained to press a lever using food as a reinforce before being surgically implanted with a chronic intravenous jugular catheter. Training and testing were done in standard operand conditioning cages (21cm×21cm×28cm) placed in a sound-attenuated room, ventilated with fans, as for the method of Alaei et al. (16), with minor modifications. The apparatus was equipped with active and passive levers, 2 cm above the floor, and a red light located 4 cm above the active lever. The intravenous cannula of the animal was connected to an infusion pump via a swivel, allowing the animal to move relatively freely. Pressing the active lever, marked by red light resulted in a 10-s infusion of 0.1 ml fluid via infusion pump. The fluid was saline in saline group and morphine (TEMAD Ltd., Teheran, Iran), with 5 mg/ml concentration in morphine group. Further pressing the active lever during this time would not infuse farther. Pressing the passive lever had no programmed consequences.

### ***Surgical procedure***

Animals were anaesthetized with ketamine (150 mg/kg) and rampon (0.1 mg/kg) and a cannula was inserted into the jugular vein. The cannula was guided subcutaneously up to the skull where it was fixed to a curved metal tube, which was secured on to the skull with small screws and fixed with dental acrylic cement.

After surgery, rats were given 300,000 units of procaine penicillin G (ip) and were allowed 7 days to recover from surgery.

### ***Procedure***

#### ***Self-administration***

***Training phase:*** One week before starting the experiments, the animals were transferred to a special room and the day-night cycle was reversed (lights on at 19.00 hs) before tests, and the animals were recorded during the dark phase of the cycle. Before surgery, the training program was started after 24 h food restriction. The animals were placed in the self-administration apparatus where a lever filled with food pellets was available. Pressing the lever resulted in the delivery of a 100 mg pellet on a fixed ratio (FR) schedule. Each rat allowed self-training and pressing for 40 pellets before being returned to *ad libitum* food. Following acquisition of lever pressing behavior, rats were returned to *ad libitum* food and allowed to gain their weight for 3 days and then the surgery was performed.

***Self-administration phase:*** Seven days after recovery the rats were placed in the operand chambers, the jugular cannula of rats was connected to an infusion pump and the animals were placed in the self-administration apparatus for 2 h each day on an FR-1 schedule for 10 days. The trained animals allowed pressing the active and passive levers freely. With pressing the active lever, rats received 0.1 ml of morphine or saline. Pressing the passive

lever did not deliver fluid or food. Catheters were flushed daily with 0.1 ml saline containing heparin sulfate (50 IU/ml) during the recovery period as well as before and after the self-administration sessions. All operand sessions were conducted during the animals' dark cycle. Catheter patency was tested by injection of 0.1 ml solution of sodium pentobarbital (10 mg/ml) into the catheter and observation of the animal behavior. Animals with patent catheters exhibit prominent signs of anesthesia (loss of muscle tone) few seconds after administration.

### ***Experimental design***

To evaluate the effects of morphine –self administration on water and food intake, 18 male rats were divided into two groups: (1) saline group, which received saline in the self-administration sessions; (2) morphine group, which received 0.1 ml of morphine in saline solution (concentration 5 mg/ml) during the self-administration sessions. The water intake volume (ml) and the food intake amount (g) was measured during 24 hs.

### ***Statistical analysis***

Data are presented as mean  $\pm$  SEM. The mean of active and passive lever pressing number in the last 3 days was compared in each group with using paired *t* test. The comparison of the number of active lever pressing between two groups accomplished with using un-paired *t* test. Water intake volume and food intake amount in 3 days were compared by using repeated measure ANOVA. The criterion for statistical significance was  $p < 0.05$ .

### ***Results***

In the saline group, which received saline, there was no significant difference between the number of active and passive lever pressing. In the morphine group, where animals received morphine during 10 days,

## Morphine Effect on Water and Food Intake

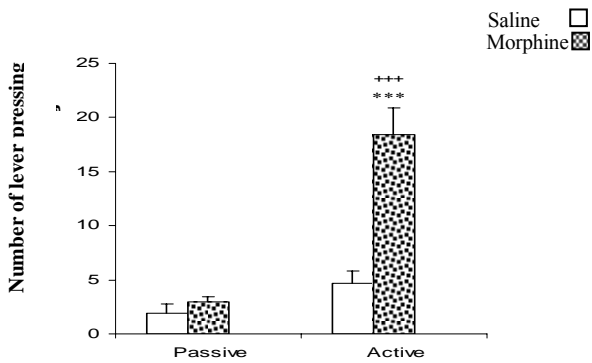


Figure 1. Comparison of active and passive lever pressing in each group and between saline and morphine groups. Data are mean  $\pm$  SEM. \*\*\* $p$ <0.001 compared to active lever pressing number of saline group, +++ $p$ <0.001 compared to passive lever pressing of morphine group.

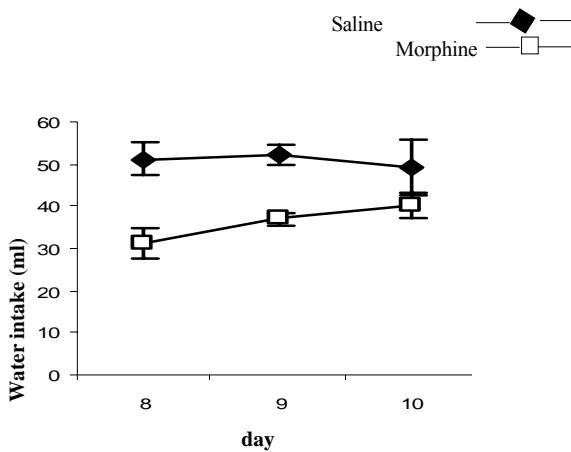


Figure 2A

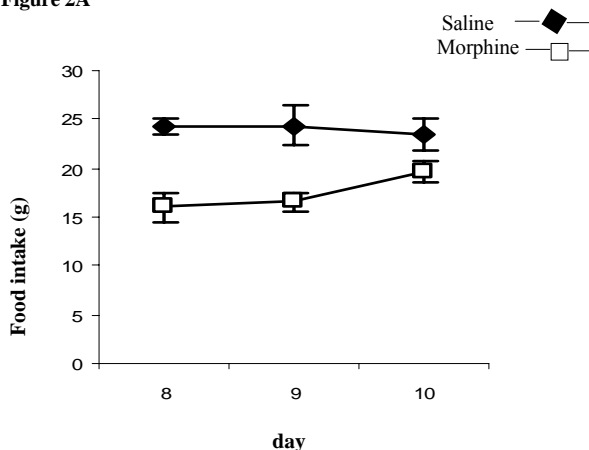


Figure 2B

Figure 2. Comparison of water (2A) and food intake between saline and morphine groups. Data are mean  $\pm$  SEM. Data were compared using repeated measure ANOVA. Food and water intake in morphine group was significantly lower than saline group ( $p$ <0.01).

the number of active lever pressing was significantly higher than that of passive lever pressing ( $p$ <0.001; Figure 1). The number of active lever pressing in morphine group in the last three days of experiments was higher than saline group ( $p$ <0.001; Figure 1).

The results also showed that water intake in morphine group on days 8, 9 and 10 was  $31 \pm 3.7$ ,  $37 \pm 1.3$  and  $40.3 \pm 2.9$  ml, respectively and was lower than saline group ( $51.2 \pm 3.8$ ,  $52.4 \pm 2.5$  and  $49.2 \pm 6.3$  ml) (Figure 2A). The food intake in morphine group, during days 8, 9 and 10 ( $16 \pm 1.5$ ,  $16.6 \pm 0.1$  and  $19.6 \pm 1.1$  g respectively) also reduced, compared to saline group ( $24.2 \pm 0.8$ ,  $24.4 \pm 1.9$  and  $23.5 \pm 1.7$  g) (Figure 2B).

## Discussion

The results of present study showed that morphine self-administration reduced daily water and food intake in non deprived rats. These results agree with the other studies which showed that systemic morphine administration decreased water intake in water restricted male rats and male NMRI mice deprived of water (10, 17). Other researchers showed that intracerebroventricular injections of morphine suppressed and decreased water drinking of rabbits and water deprived rats respectively (6, 7). In those studies the animals were deprived of water but the results of this study are from non deprived rats. In another study subcutaneous treatment with morphine failed to significantly affect water intake, while food intake was significantly reduced only by the higher dose of morphine (11). In contrast, Bondar et al. (2003) showed that icv injection of morphine increased food intake in both male and female rats (18). Other studies showed that intracranial injection of  $\mu$ ,  $\delta$ , or  $K$  receptor-specific opioid agonists also increased food intake in lean rats, and central injection of general

or  $\mu$ ,  $\delta$ , or  $K$  receptor-specific opioid antagonists decreased feeding in lean and obese rats (19 - 21). In another investigation subcutaneously and intraperitoneally administration of a kappa opiate receptor agonist, Tifluadom, increased food intake in rats without altering water intake (14). These results were against the results of this study but in the present study water and food intake decreased after morphine – self administration while in other studies the animals were injected opioids and they weren't volunteer to receive morphine. Other researchers showed that morphine activation of the endogenous opioid system increases food intake in most species, including normal humans and rats, but decreases food intake in mice (8, 9, 21). Some of investigators believe that applying an opioid antagonism, naltrexone, influenced preferred and non-preferred food consumption, depending on the site of administration (3). In other studies it has been shown that injection of opioid agonists to the nucleus accumbens, VMH, MPOA, paraventricular nucleus of the hypothalamus, ventral tegmentum, or hindbrain elicits food intake (19). These areas overlap with the distribution of  $\beta$ -endorphin, dynorphin, and enkephalin fibers, terminals, and the three opioid receptor subtypes (23 – 25). Bilateral micro infusion of morphine in nucleus accumbens shell also increased feeding (5). Administration of morphine into ventral tegmental area also stimulated feeding (4). The prefrontal cortex receives projections from cells in the ventral tegmental area that express opiate receptors (27) and opiate

function is persistently altered in the ventral tegmentum after chronic opiate experience in isolation (28). Mu opioid agonists (MOA) acting in the NAc robustly enhance consumption of palatable foods. In contrast, kappa opioid agonists (KOA) have variable effects on feeding and KOA agonists have MOA opposing behavioral actions when microinjected at several brain sites. NAcc MOA and KOA receptors have robust and opposing role in palatability based food choice and consumption and raise the possibility that an endogenous KOA agonist acting in the NAc contributes to the phenomenon of sensory specific satiety (29). The effect of morphine self - administration on water and food intake in the present study may be due to endogenous opioids. Studies showed that effects of morphine on ingestive behaviors are related to deprivation or restriction to food and water intake and doses of morphine (30). In the present study the animals self-administered 0.5 mg of morphine by pressing the active lever and they were nondeprived of food and water.

The previous studies showed that opioids increase the dopaminergic turnover in nucleus striatum and NAc of mice, causing change in food and water intake (31). The results of another study showed that food restriction decreased dopamine level in NAc and systemic morphine administration or meal could restore dopamine level (32). The results of present study may be related to activation of dopaminergic mesolimbic system after morphine self-administration. This system has important role in food and water intake (13 - 15) and also rewarding properties of morphine (33 - 35). The exact mechanism (s) needs to be more investigated.

## References

1. Levine AS, Billington CJ. Why do we eat? A neural systems approach. *Annu Rev Nutr* 1997; 17:597–619.
2. Morley JE, Levine AS, Yim GK, Lowy MT. Opioid modulation of appetite. *Neurosci Biobehav Rev* 1983; 7: 281-305.
3. Glass MJ, Billington CJ, Levine AS. Naltrexone administered to central nucleus of amygdala or PVN: neural dissociation of diet and energy. *Am J Physiol Regul Integr Comp Physiol* 2000; 279: 86-92.

## Effect of Morphine on Water and Food Intake

4. Nencini P, Stewart J. Chronic systemic administration of amphetamine increases food intake to morphine, but not to U50-488H, microinjected into the ventral tegmental area in rats, *Brain Res* 1990; 527: 254-8.
5. Soderpalm AH, Berridge KC. Food intake after diazepam, morphine or muscimol: microinjections in the nucleus accumbens shell. *Pharmacol Biochem Behav* 2000; 66 : 429-34
6. Konecka AM, Sadowski B, Jaszczak J, Panocka I, Sroczynska I. Suppression of food and water intake after intracerebroventricular infusion of morphine and naloxone in rabbits. *Arch Int Physiol Biochim* 1984; 92: 219-26.
7. Spencer RL, Deupree D, Hsiao S, Mosberg HI, Hruby V, Burks TF, Porreca F. Centrally-administered opioid selective agonists inhibit drinking in the rat. *Pharmacol Biochem Behav* 1986; 25(1):77-82.
8. Eidi M, Oryan S, Eidi A, Sepehrara L. Effect of morphine, naloxone and histamine system on water intake in adult male rats. *Eur J Pharmacol* 2003; 478: 105-110.
9. Marrazzi MA, McQuarters A, Barnes C, Lawhorn JD, Amico-Rasmussen Q. Male/female comparison of morphine effect on food intake-relation to anorexia nervosa. *Pharmacol Biochem Behav* 1996; 53(2): 433-5.
10. Hodge CW, Niehus JS, Samson HH. Morphine induced changes in ethanol-and water-intake are attenuated by the 5-HT<sub>3/4</sub> antagonist tropisetron. *Psychopharmacol* 1995; 119: 186-92.
11. Vacca G, Serra S, Brubetti G, Carai MAM, Gessa GL, Colombo G. Boosting effect of morphine on alcohol drinking is suppressed not only by the cannabinoid CB1 receptor antagonist, SR 141716. *Eur J Pharmacol* 2002; 445: 55-59.
12. Alaei H, Hosseini M. Angiotensin converting enzyme inhibitor captopril modifies conditioned place preference induced by morphine and morphine withdrawal signs in rats. *Pathophysiol* 2007; 14: 55-60.
13. Cooper SJ, Jackson A, Kirkham TC, Turkish S. Endorphins, opiates and food intake. In: Rodgers RJ, Cooper SJ. (eds). *Endorphins, Opiates and Behavioral Processes*. New York :Wiley;1988.143-186.
14. Morley JE, Levine AS, Grace M, Kneip J, Zeugner H. The effect of the opioid-benzodiazepine, tipluadom, on ingestive behaviors. *Eur J Pharmacol* 1983; 93(3-4): 265-9.
15. Yu WZ, Bodnar RJ. Interactions between angiotensin II and delta opioid receptor subtype agonists upon water intake in rats. *Peptides* 1997; 18(2): 241-5.
16. Alaei H, Esmaeili M, Nasimi A, Pourshanzari A. Ascorbic acid decreases morphine self-administration and withdrawal symptoms in rats. *Pathophysiol* 2005; 12: 103-107.
17. Zetier G, Raberg A. Ceruletide inhibits water intake in deprived mice: comparison with morphine and enkephalin analogue, FK 33-824. *Eur J pharmacol* 1985; 114(3): 248-51.
18. Bodnar RJ, Hadjimarkou MM, Krzanowska EK, Silva RM, Stein JA. Differential dose-dependent effects of central morphine treatment upon food intake in male and female rats receiving neonatal hormone manipulations. *Nutr Neurosci* 2003; 6(1): 53-7.
19. Cole JL, Berman N, Bodnar RJ. Evaluation of chronic opioid receptor antagonist effects upon weight and intake measures in lean and obese Zucker rats. *Peptides* 1997; 18: 1201-1207.
20. Gosnell BA, Levine AS. Stimulation of ingestive behavior by preferential and selective opioid agonists. In: Cooper SJ, Clifton PG. (eds). *Drug receptor subtypes and ingestive behavior*. London: Academic Press Ltd; 1996. 147-166.
21. Marin CL, Olster DH. Opioid receptor blockade promotes weight loss and improves the display of sexual behaviors in obese Zucker female rats. *Pharmacol Biochem Behav* 1999; 63(3): 515-520.
22. Jarosz PA. The effect of kappa opioid receptor antagonism on energy expenditure in the obese Zucker rat. *Biol Res Nurs* 2007; 8(4): 294-9.
23. Finley JCW, Maderdrut JL, Petrusz P. The immunocytochemical localization of enkephalin in the central nervous system of the rat. *J Comp Neural* 1981; 198: 541-565.
24. Khachaturian H, Lewis ME, Tsou K, Watson SJ. Beta endorphine, alpha MSN, ACTH and related peptides. In: Bjorklund A, Hokfelt T. (eds). *Handbook of chemical neuroanatomy, Vol 4: GABA and neuropeptides in the CNS, part 1*. Amsterdam: Elsevier; 1985. 216-272.
25. Mansour A, Khachaturian H, Lewis ME, Akil H, Watson SJ. Autoradiographic differentiation of mu, delta, and kappa opioid receptors in the rat forebrain and midbrain. *J Neurosci* 1987; 7: 2445-2464.
26. Molineaux CJ, Feuerstein G, Faden AL, Cox BM. Distribution of immunoreactive dynorphin in discrete brain nuclei; comparison with vasopressin. *Neurosci Lett* 1982; 33: 179-184.
27. Svingos AL, Garzon M, Colago EE, Pickel VM. Mu-opioid receptors in the ventral tegmental area are targeted to presynaptically and directly modulate mesocortical projection neurons. *Synapse* 2001; 41: 221-229.

**M. Hosseini**

28. Van den Berg CL, Kitchen I, Gerrits MAFM, Spruijt BM, Van Ree JM. Morphine treatment during juvenile isolation increases social activity and opioid peptides release in the adult rat. *Brain Res* 1999; 830: 16–23.
29. Wooley JD, Lee BS, Kim B, Fields HL. Opposing effects of intra-nucleus accumbens mu and kappa opioid agonists on sensory specific satiety. *Neurosci* 2007; 146(4):1445-52.
30. Sanger DJ, McCarthy PS. Differential effects of food and water intake in food deprived and freely-feeding rats. *Psychopharmacol* 1980; 72(1): 103-6.
31. Calignano A, Persico P, Mancuso F, Sorrentino L. Endogenous nitric oxide modulates morphine-induced changes in locomotion and food intake in mice. *Eur J Pharmacol* 1993; 231(3): 415-9.
32. Pothos EN, Creese I, Hoebel BG. Restricted eating with weight loss selectively decreases extracellular dopamine in the nucleus accumbens and alters dopamine response to amphetamine, morphine, and food intake. *J Neurosci* 1995; 15(10): 6640-50.
33. Wise RA, Leone P, Rivest R, Leeb K. Elevations of nucleus accumbens dopamine and DOPAC levels during intravenous heroin self-administration. *Synapse* 1995; 21(2): 140-8.
34. Kiyatkin EA, Wise RA, Gratton A. Drug- and behavior-associated changes in dopamine-related electrochemical signals during intravenous heroin self-administration in rats. *Synapse* 1993; 14(1): 60-72.
35. Hemby SE, Martin TJ, Co C, Dworkin SI, Smith JE. The effects of intravenous heroin administration on extracellular nucleus accumbens dopamine concentrations as determined by in vivo microdialysis. *J Pharmacol Exp Ther* 1995; 273(2): 591-8.