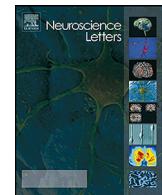




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### 1 Short communication

## 2 Surgical stress induced depressive and anxiety like behavior are 3 improved by dapsone via modulating NADPH oxidase level

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### 16 HIGHLIGHTS

- 17 • Surgical stress induces depressive and anxiety like behavior in aged mice.
- 18 • Elevation of brain oxidative stress was observed in mice following surgical stress.
- 19 • Dapsone suppressed surgical stress induced brain oxidative stress.
- 20 • Dapsone improved surgical stress induced depressive and anxiety like behavior.
- 21 • Effect of dapsone on surgical stress was mediated by inhibiting NADPH oxidase.

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### 26 ABSTRACT

Surgical stress induced depression and anxiety like behavior are common complications among aged individuals suffering from surgery. Recent studies proposed that accumulation of oxidative stress is involved in the etiology of stress induced depression and anxiety. Dapsone possesses antioxidant properties, however, whether dapsone is effective in modulating surgical stress induced brain oxidative damage remains uncertain. The present study aimed to investigate the effect of dapsone on surgical stress induced depressive and anxiety like behavior, and brain oxidative stress in a well-established surgical stress model. Depressive and anxiety like behavior accompanied by elevated brain oxidative stress were observed in aged mice underwent abdominal surgery. Pretreatment with 5 mg/kg dapsone significantly improved the behavioral disorder and ameliorated brain oxidative stress in this model. Further investigation, revealed that surgical stress increased brain NADPH oxidase level, while pretreatment with dapsone abrogated the elevation of NADPH oxidase triggered by surgical stress. These findings suggest that dapsone is effective in improving surgical stress induced brain oxidative damage via down-regulating NADPH oxidase level in aged mice.

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Abbreviations: NADPH, nicotinamide adenine dinucleotide phosphate; ROS, reactive oxygen species; NOX, nicotinamide adenine dinucleotide phosphate oxidase; DDS, dapsone; EPM, elevated plus maze; FST, forced swim test; DCFH-DA, 2'-7'-dichlorofluorescein-diacetate; MDA, malondialdehyde.

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## 41 1. Introduction

42 The surgical stress response, activated by afferent neuronal  
43 input to the brain from the site of injury, could lead to profound  
44 endocrine-metabolic changes [1,2]. Maladaptation of surgical  
45 stress is closely associated with adverse outcomes in patients fol-  
46 lowing surgery [2]. It has been recognized as one of the risk factors  
47 in the pathogenesis of post-surgical depression and anxiety; espe-  
48 cially in geriatric surgical population [3,4]. Although it is not totally  
49 understood why aged individuals are more susceptible to surgical  
50 stress than young individuals, evidences indicate that progressive  
51 loss of resilience to stress response during aging may be responsible  
52 for higher susceptibility of aged to surgical stress [5].

53 Depression and anxiety are common mood disorders among  
54 individuals; while the underlying mechanisms are not fully clar-  
55 ified. Recent studies demonstrated that accumulation of oxidative  
56 stress was involved in the pathogenesis of stress induced depres-  
57 sion and anxiety [6,7]. Mice underwent repeated restraint stress  
58 showed significantly increased brain oxidative stress characterized  
59 by excessive levels of reactive oxygen species (ROS) and accu-  
60 mulation of malondialdehyde (MDA), a lipid peroxidation product  
61 caused by the attack of ROS on lipid components of cell membranes  
62 [6,8]. ROS and MDA levels are recognized oxidative stress markers  
63 in stress related mood disorders [8]. NADPH oxidase (NOX) is the  
64 key enzyme that mediates the generation of oxidative stress [6].  
65 Researches revealed that stress response could up-regulate brain  
66 NOX expression and further increase brain oxidative stress level  
67 [6]. Eliminating oxidative stress by anti-oxidants or NOX inhibitor  
68 was reported to provide beneficial effects against depression and  
69 anxiety [6,7].

70 Dapsone (DDS), a traditionally used anti-leprosy agent [9], has  
71 been demonstrated to possess antioxidant activity recently. For  
72 example, DDS is able to suppress ROS production in neutrophils  
73 and diploid fibroblasts [10,11]; it can also inhibit lipid peroxida-  
74 tion in ischemia models [12,13]. The mechanism by which DDS  
75 decreases ROS generation was partially due to its inhibition on  
76 NOX expression based on previous researches [10,14]. However,  
77 whether DDS could mitigate stress induced brain oxidative dam-  
78 age in aged mice is to be elucidated, and the effect of DDS on stress  
79 induced depressive and anxiety like behavior is also unclear.

80 The present study aimed to investigate whether DDS is effective  
81 in improving surgical stress induced depressive and anxiety like  
82 behavior and the underlying mechanisms in a well-established sur-  
83 gical stress model. We hypothesized that DDS may mitigate surgical  
84 stress induced depressive and anxiety like behavior via modulating  
85 brain NOX and oxidative stress levels in aged mice.

## 86 2. Materials and methods

### 87 2.1. Animals and surgical stress procedure

88 Aged (20 months old) male C57BL/6 mice were kept in groups  
89 of 3–4 mice per cage at standardized housing conditions with free  
90 access to food and water under a 12/12 h light/dark cycle. All exper-  
91 imental procedures were approved by Peking University Biomedical  
92 Ethics Committee Experimental Animal Ethics Branch. Mice were  
93 divided into 4 groups ( $n=7$  for each group): sham control group  
94 (sham control), DDS group (DDS), surgical stress group (stress),  
95 surgical stress + DDS group (stress + DDS).

96 The surgical stress procedure was performed according to pre-  
97 vious report with a minor modification [15]. Mice were deeply  
98 anesthetized by intraperitoneal (i.p.) injection of 5% chloral hydrate  
99 prior to the surgery. The surgical site was sterilized and a 1.5 cm  
100 incision was made in the upper left quadrant of abdomen through  
101 the skin and muscle wall. The internal organs were gently manip-  
102 ulated for 1 min by inserting a sterile probe into the body cavity.

103 The muscle and skin were then closed and mice were placed  
104 back to their home cages. The duration of abdominal surgery was  
105 20–25 min. Animals in sham control group were anesthetized and  
106 treated in the same manner except for the surgery.

### 107 2.2. Drug administration

108 DDS was purchased from Sigma-Aldrich (St. Louis, MO, USA).  
109 DDS was dissolved in dimethyl sulfoxide (Sigma-Aldrich, St. Louis,  
110 MO, USA) and diluted with saline solution before administration.  
111 The final concentration of dimethyl sulfoxide in vehicle was lim-  
112 ited to 0.05% (v/v). The following treatment paradigm was applied:  
113 sham control group: i.p. injection of vehicle; stress group: i.p. injec-  
114 tion of vehicle 1 h prior to the surgery; DDS group: i.p. injection of  
115 5 mg/kg body weight DDS; stress + DDS group: i.p. injection of  
116 5 mg/kg body weight DDS 1 h prior to the surgery. The dosage of  
117 DDS was applied as reported previously [16].

### 118 2.3. Behavioral tests

119 Forced swim test (FST) and elevated plus maze (EPM) were per-  
120 formed 2 days after the surgery (1 day for recovery and 1 day for  
121 adaption to test environment). All tests were performed in light  
122 phase of activity cycle. For FST test, mice were individually placed  
123 into a polycarbonate cylinder (25 cm in height, 10 cm in diameter)  
124 containing 10 cm of water maintained at 24–26 °C. The movement  
125 in the cylinder was monitored by video for 6 min, and the total  
126 immobility time during the last 4 min was recorded. Immobility  
127 was defined as lack of active, escape-directed behaviors except the  
128 necessity to keep floating [17].

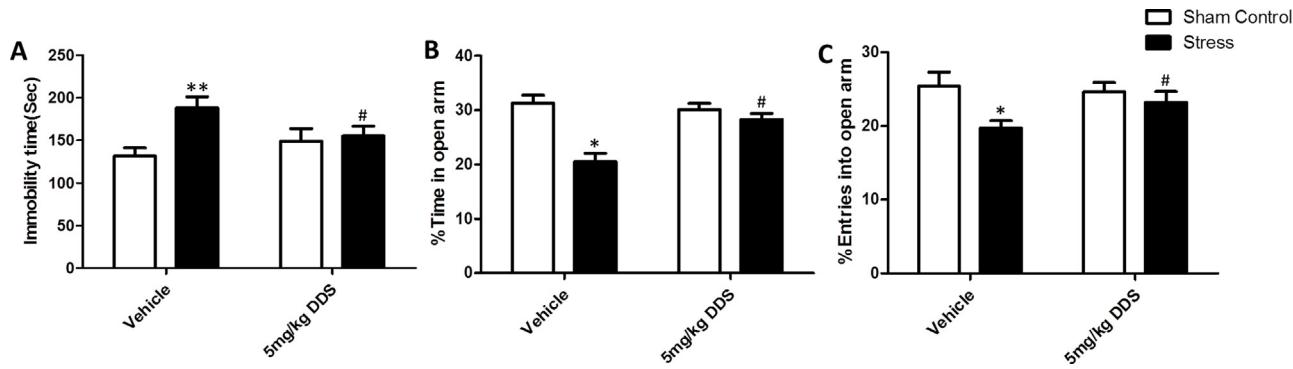
129 The EPM test was performed as described previously to mea-  
130 sure anxiety level [18]. Movement of mouse in EPM was tracked  
131 for 5 min via an overhead camera. The ratio of open arm time to  
132 total arm time and the open arm entries to total entries were cal-  
133 culated and analyzed. All behaviors were evaluated by experienced  
134 raters blind to the treatment.

### 135 2.4. Detection of oxidative stress

136 Brain tissues containing hippocampus and cerebral cortex were  
137 dissected immediately after mice finished the behavioral tests.  
138 To measure ROS level, we conducted 2'-7'-dichlorofluorescein-  
139 diacetate (DCFH-DA) assay as previously described [19]. Briefly,  
140 tissues containing hippocampus and cerebral cortex were homog-  
141 enized in phosphate buffer at pH 7.4 (10% wt/vol) and centrifuged  
142 at 11,000 g for 15 min at 4 °C. Supernatants were collected and  
143 DCFH-DA (Sigma-Aldrich, St. Louis, MO, USA) was added to a final  
144 concentration of 100 μM. The mixture was incubated in 37 °C in  
145 darkness for 30 min and then the reaction was stopped by cooling  
146 down on ice and fluorescence intensity ( $\lambda_{exc}485$  nm,  $\lambda_{em}525$  nm)  
147 was read in a flexstation 3 microplate reader (Molecular devices,  
148 Sunnyvale, CA, USA), the results were normalized to protein con-  
149 centration and expressed as % of the value of sham control [19].  
150 To measure lipid peroxidation products, we quantified the brain  
151 MDA level through a spectrophotometer method according to the  
152 description of the assay kit (Nanjing Jiancheng Bioengineering  
153 Institute, China). MDA contents were corrected for protein concen-  
154 tration [20].

### 155 2.5. Western blot analysis

156 Western blots were performed as described previously [21].  
157 Brain tissues (containing hippocampus and cerebral cortex) were  
158 lysed in RIPA buffer and protein concentration was quantified  
159 by BCA kit (Pierce). 60 μg proteins were separated by SDS-PAGE  
160 electrophoresis and were transferred to 0.45 μm polyvinylidene



**Fig. 1.** Effect of dapson administration on surgical stress induced depressive and anxiety like behavior in aged mice. (A) Total immobility time during the last 4 min in forced swim test were quantified, (B) percentage of total time spent in open arms during a 5 min session in elevated plus maze, (C) percentage of total entries into open arms during a 5 min session in elevated plus maze. Data were shown as mean  $\pm$  S.E.M. (error bars) and were analyzed by two way ANOVA followed with bonferroni post hoc test.  $n=7$  for each set of test. \* $p<0.05$ , vs. sham control; \*\* $p<0.01$ , vs. sham control; # $p<0.05$ , vs. stress.

difluoride (PVDF) membranes (Millipore, Bedford, MA). Primary antibodies against NOX2 (1:3000, Santa Cruz), NOX4 (1:4000, Abcam), and  $\beta$ -actin (1:5000, Sigma) were reacted with the membranes in 4°C overnight. The membranes were incubated with peroxidase-conjugated secondary antibodies, respectively, and protein bands were developed with ECL system (Millipore, Bedford, MA, USA).

#### 2.6. Real-time PCR analysis

Real-time PCR was carried out as reported previously [21]. Total RNA was extracted from brain tissues (containing hippocampus and cerebral cortex) by TRIZOL (Invitrogen, CA, USA). The expression levels of NOX2, NOX4 were examined by RT-PCR by using Takara SYBR RT-PCR Kit (Takara, Dalian, China); GAPDH was used as an internal control. The following primers were used: NOX4: 5'-CCAGATGAGGATCCAGAA-3' (forward) and 5'-AAAACCTCGAGGCAA-AGAT-3' (reverse); NOX2: 5'-CAGGAGTTCAAGATGCCTG-3' (forward) and 5'-GATTGGCTGAGATTATCC-3' (reverse); GAPDH: 5'-GATAATGCCAAC- TTGTCGTCG-3' (forward) and 5'-ACATTGGAGCATGGGTGAG-3' (reverse). Data were analyzed with the  $2^{-\Delta\Delta CT}$  method.

#### 2.7. Statistic analysis

Data are expressed as mean  $\pm$  S.E.M. and are analyzed in GraphPad Prism 5.0 Version (GraphPad Software, San Diego, CA, USA). Two-sample comparisons were carried out using Student's *t* test. Multiple comparisons were conducted using two-way ANOVA followed by bonferroni post hoc test. *p* value  $<0.05$  was considered statistically significant.

### 3. Results

#### 3.1. Surgical stress induced depressive and anxiety like behavior in aged mice were improved by dapson administration

To investigate whether DDS pretreatment improved surgical stress induced depressive and anxiety like behavior in aged mice, we evaluated the performance of mice by FST and EPM tests. Student's *t* test revealed that chloral hydrate anesthesia did not induce depressive like behavior according to FST; the total immobility time of the sham control group ( $131.55 \pm 9.84$  s) and mice without anesthesia ( $128.40 \pm 7.43$  s) was similar between the groups ( $p>0.05$ ). No significant difference was observed between sham control mice and non-anesthetized mice in the EPM test: the percentage of

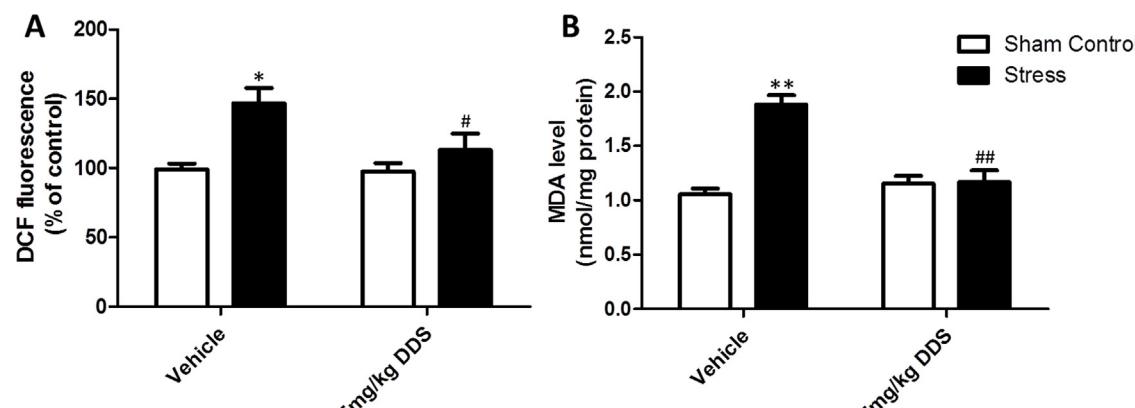
time spent in open arms and open arms entries in the sham control group were  $31.25 \pm 2.99\%$  and  $25.43 \pm 1.89\%$ , respectively, compared with  $32.58 \pm 5\%$  and  $24.2 \pm 2.71\%$ , respectively, in non-anesthetized mice ( $p>0.05$ ), implicating that chloral hydrate also did not induce anxiety. Mice in the stress group have a significantly longer immobility time in FST compared with the sham control mice (Fig. 1A, \*\* $p<0.01$ ), indicating that surgical stress induced depressive like behavior. Pretreatment with 5 mg/kg DDS reduced the immobility time of mice following surgery (Fig. 1A, # $p<0.05$ ). In EPM test, mice in the stress group spent less time on open arms compared with the sham control mice (Fig. 1B, \* $p<0.05$ ); the total entries to open arms also declined (Fig. 1C, \* $p<0.05$ ), suggesting that surgical stress led to anxiety like behavior. However, mice in the stress + DDS group showed increased time spent on open arms as well as open arms entries compared with the stress group (Fig. 1B and C, # $p<0.05$ ). There was no significant difference between the sham control group and the DDS group in behavioral tests. These results suggested that dapson administration improved surgical stress induced depressive and anxiety like behavior in aged mice.

#### 3.2. Brain oxidative stress in aged mice exposed to surgical stress was suppressed by dapson administration

Since oxidative stress has been demonstrated to be closely involved in stress induced depressive and anxiety like behavior [6,7], we next investigated whether dapson could modulate brain oxidative stress by measuring brain ROS and MDA levels. ROS levels represented by DCFH-DA fluorescence intensity in anesthetized and non-anesthetized mice were  $99.10 \pm 4.19\%$  and  $97.58 \pm 5\%$ , respectively, ( $p>0.05$ ). The MDA contents in anesthetized and non-anesthetized mice were  $1.056 \pm 0.09$  nmol/mg protein and  $1.022 \pm 0.11$  nmol/mg protein, respectively, ( $p>0.05$ ). No difference in MDA and ROS levels were observed in the sham control group and the DDS group. As shown in Fig. 2, surgical stress elevated brain ROS and MDA levels significantly (Fig. 2A, \* $p<0.05$ ; Fig. 2B, \*\* $p<0.01$ ). However, pretreatment with 5 mg/kg DDS remarkably alleviated the increase of brain oxidative stress levels caused by surgical stress (Fig. 2A, # $p<0.05$ ; Fig. 2B, ## $p<0.01$ ). These results revealed that dapson is effective in inhibiting surgical stress induced brain oxidative damage.

#### 3.3. Surgical stress induced NADPH oxidase expression was inhibited by dapson administration

Previous studies suggested that NOX is closely associated with elevation of oxidative stress in depression and anxiety behavior caused by stress response [6,7]. To figure out the underlying mech-



**Fig. 2.** Surgical stress induced brain oxidative stress was suppressed by dapsone administration. (A) Reactive oxygen species (ROS) levels in brain tissues (containing hippocampus and cerebral cortex) were represented via measuring DCFH-DA fluorescence intensity; (B) malondialdehyde (MDA) levels in brain tissues (containing hippocampus and cerebral cortex) were measured by MDA assay kit. Data were expressed as mean  $\pm$  S.E.M. (error bars) and were analyzed by two way ANOVA followed with bonferroni post hoc test.  $n = 5$ . \* $p < 0.05$ , vs. sham control; \*\* $p < 0.01$ , vs. sham control; # $p < 0.05$ , vs. stress; ## $p < 0.01$ , vs. stress.

anisms by which dapsone down-regulated brain oxidative stress; we further examined brain NOX levels. The mRNA and protein levels of NOX were quantified, respectively, in brain tissues containing hippocampus and cerebral cortex in all four groups. DDS treatment alone has no effect on brain NOX levels as shown in Fig. 3. In accordance with our observations in oxidative stress, brain NOX2 and NOX4 mRNA levels were up-regulated by surgical stress (Fig. 3A; \*\* $p < 0.01$ ); the protein levels of NOX2 and NOX4 were also increased in stress group (Fig. 3B–b, \*\* $p < 0.01$ ; Fig. 3B–c, \* $p < 0.05$ ). However, pretreatment with 5 mg/kg DDS markedly down-regulated brain NOX2 and NOX4 levels in mice following surgery as revealed by real-time PCR and western blot analysis (Fig. 3A and B, # $p < 0.05$ ). These findings suggested that DDS may decrease brain oxidative stress via modulating NOX2 and NOX4 levels.

#### 4. Discussion

Maladaptation of stress response is regarded as a risk factor for various neuropsychiatric disorders, including depression and anxiety. The pathogenesis of stress related depression and anxiety is not well understood yet. Hippocampal neuronal dysfunction and dysregulated glucocorticoid release subsequent to stress response may contribute to depressive and anxiety like behavior [22,23]. Recent studies also demonstrated that elevated brain oxidative stress mediated by up-regulation of NOX is involved in stress induced depressive and anxiety like behavior [6,7]. Surgical stress response is closely correlated with post-surgical cognitive dysfunction and mood disorders, especially in aged population [24]. In the present study, we used a well-established mice model to study the effect of dapsone in surgical stress induced depressive and anxiety like behavior. Mice received abdominal surgery could develop brain inflammation and oxidative damage as well as disturbed hormone release [15,25–27]. For example, it is reported that circulating glucocorticoid levels were increased in rodent abdominal surgery models [26,27], and our unpublished data found that glucocorticoid (GC) levels and GC related pathways are up-regulated in this model. These pathological changes, consistent with other stress models and clinical studies [6,24], suggested that mice underwent abdominal surgery are suitable to investigate surgical stress related mood disorders. The FST test and EPM test were applied to evaluate depressive and anxiety like behavior, respectively. Our behavioral test results demonstrated that surgical stress led to both depressive and anxiety like behavior.

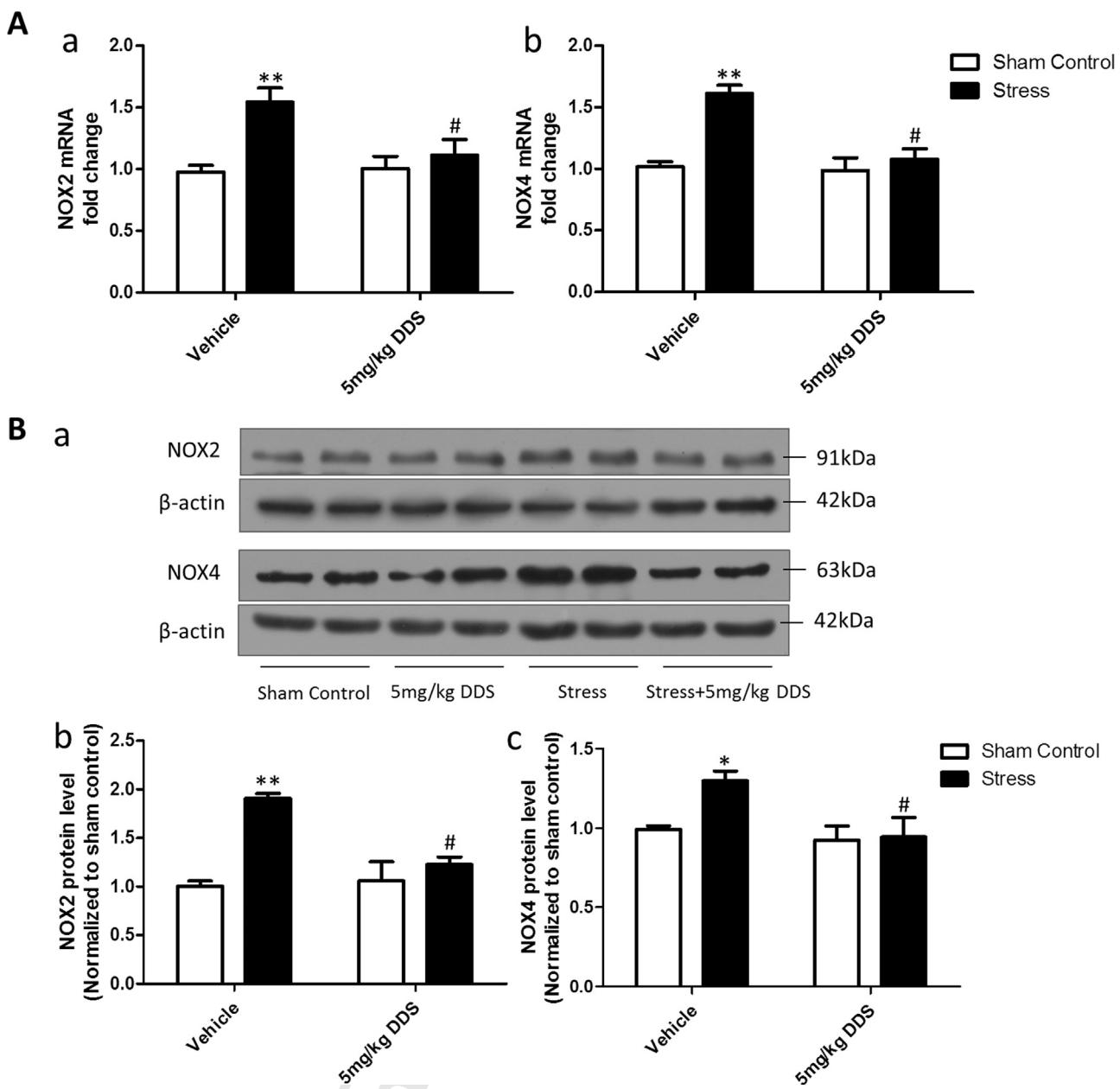
There are evidences that mice following abdominal surgery may develop mild and transient pain which could not be evaluated clearly according to several researches [28,29]. While the locomo-

tion and other spontaneous activities in mice following surgery were not suppressed at 24 h after surgery [14,28]. The mild pain response may be caused by surgical incision or inflammation. It is unclear whether DDS can reduce pain directly but perhaps it can help to limit pain via anti-inflammatory activity indirectly.

Elevation of brain oxidative stress is an important pathological change in various stress models [6,7,25]. Similar to the observations in repeated restraint stress models and chronic unpredictable stress models [6,30], we observed an increase of brain oxidative stress in aged mice following surgery as indicated by quantification of ROS and MDA levels. It has been reported that DDS was capable of inhibiting the generation of ROS and lipid peroxidation products both in vivo and in vitro [13,14,16]. Treatment with DDS in aged mice following surgery not only improved mood disorders, but also attenuated brain oxidative damages. These findings were consistent with previous studies that DDS administration protects animals from spinal cord injury [31] or focal ischemia [12,13] through preventing oxidative damages.

Previous studies demonstrated that NOX plays a pivotal role in stress induced depression and anxiety via elevating brain oxidative stress levels [6,7]. NOX2 and NOX4 are predominant enzymes of NOX family in mediating brain oxidative stress [32]. In the present study, up-regulation of brain NOX levels in aged mice following surgery was in line with the results reported in restraint stress model [6]. DDS has been found to inhibit NOX4 expression in mice exposed to paraquat and further decreasing superoxide generation [10,14]. While in this study, we observed that DDS pre-treatment concomitantly suppressed NOX2 and NOX4 levels in brain. This may partially explain how DDS treatment decreased brain oxidative stress in aged mice following surgery. Evidence in restraint stress model proved that up-regulation of NOX level is closely linked with high levels of glucocorticoids [6]. Our previous study on green tea polyphenols proved that the conventional antioxidant exerted antidepressant-like effects through normalizing HPA axis function [17]. Whether DDS could modulate organismal glucocorticoid levels in surgical stress model needs in-depth study.

In addition to brain oxidative damages, neuroinflammation has also been characterized in stress related psychiatric disorders [33]. As for surgical stress, activation of inflammation-associated signaling pathway and elevation of proinflammatory cytokines (for example: IL-1 $\beta$ , TNF- $\alpha$ ) are closely linked to depression and cognitive impairment [34]. DDS has long been used as anti-inflammatory agent [12]. Given that DDS possesses anti-inflammatory effect, it is likely that DDS improves surgical stress induced behavioral



**Fig. 3.** Surgical stress induced NADPH oxidase (NOX) expression was inhibited by dapsone administration. (A) Real-time PCR analysis of NOX2 (a) and NOX4 (b) levels in brain tissues (containing hippocampus and cerebral cortex) of sham control, stress, DDS and stress + 5 mg/kg DDS group; (B) representative NOX2 and NOX4 western blot images; (a) quantitative results of NOX2 (b) and NOX4 (c) in brain tissues (containing hippocampus and cerebral cortex) of sham control, stress, DDS and stress + 5 mg/kg DDS group. Data were expressed as mean ± S.E.M. (error bars) and were analyzed by two way ANOVA followed with bonferroni post hoc test.  $n=5$ . \* $p<0.05$ , vs. sham control; \*\* $p<0.01$ , vs. sham control; # $p<0.05$ .

changes and oxidative damage through inhibiting neuroinflammation.

It should be noted that early clinical case reports pointed out that very few individuals taken modest dose of DDS could develop transient depression symptoms which disappeared after withdrawal of DDS [35,36]. In the present study, we did not observe depression symptoms in mice treated with 5 mg/kg DDS alone (DDS group) in behavioral tests, implicating that the applied dose was safe.

## 5. Conclusion

Collectively, the present study demonstrated that DDS is potent in improving surgical stress induced depressive and anxiety like behavior in aged mice via suppressing brain oxidative stress,

and this effect is partially mediated by modulating NOX level. Our research indicates that DDS could be a potent intervention for surgical stress related mood disorders through anti-oxidative effect.

## Conflict of interest

The authors declare no competing financial interests.

## Acknowledgements

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