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14. ABSTRACT Purpose: This research proposal was to investigate specific compounds, tetrahydropalmatine (THP) and L-Theanine (L-Th), on neurobehavioral effects and specific gene expression in a		

PTSD rodent model. The aims were to determine the effects of THP and L-Th on anxiety, locomotion, memory, hyperarousal, and gene expression in the brain in the rodent PTSD model. **Design:** A prospective experimental between groups design was used. **Methods:** Eighty rats were equally divided into two groups, non-stressed and PTSD-stressed. They were then subdivided into four groups: control, THP or L-Th, midazolam, or THP or L-Th and midazolam. The behavioral component was evaluated using the elevated plus-maze (EPM), acoustic startle reflex (ASR), or Morris water maze (MWM), in a restraint/shock stress model. **Sample:** Eighty rats were used for each herbal supplement (THP or L-Th) studied. **Analysis:** Data analysis was performed using two-tailed Multivariate Analysis of Variance (MANOVA) and LSD post-hoc tests. **Findings:** These studies establish a solid framework for future investigation of PTSD treatments. Data showed that there were significant differences in anxiety between groups in both the THP and L-Th studies ($p < 0.05$). Significant transcriptional fold changes were found in important genes involved in dopamine, serotonin, acetylcholine, and GABA neurotransmitter systems with both herbal compounds. These results provide quantifiable data demonstrating gene expression changes in PTSD-stressed and non-stressed rats receiving various treatments. Additionally, these findings contribute important data to the limited molecular details pertaining to the understanding of the genetic mechanisms involved in the neurobiology of PTSD. **Implications for Military Nursing:** This proposal assists military nurses and other health care personnel to expand their understanding of the neurobehavioral and basic physiologic and cellular mechanisms responsible for PTSD. It is imperative that treatment of PTSD be investigated and possible therapies employed to sustain Force Health Protection and a Fit and Ready Force

15. SUBJECT TERMS

PTSD, specific gene expression, neurobehavioral effects, Force Health Protection, Fit and Ready Force

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TriService Nursing Research Program Final Report Cover Page

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Abstract

Purpose: This research proposal was to investigate specific compounds, tetrahydropalmatine (THP) and L-Theanine (L-Th), on neurobehavioral effects and specific gene expression in a PTSD rodent model. The aims were to determine the effects of THP and L-Th on anxiety, locomotion, memory, hyperarousal, and gene expression in the brain in the rodent PTSD model.

Design: A prospective experimental between groups design was used.

Methods: Eighty rats were equally divided into two groups, non-stressed and PTSD-stressed. They were then subdivided into four groups: control, THP or L-Th, midazolam, or THP or L-Th and midazolam. The behavioral component was evaluated using the elevated plus-maze (EPM), acoustic startle reflex (ASR), or Morris water maze (MWM), in a restraint/shock stress model.

Sample: Eighty rats were used for each herbal supplement (THP or L-Th) studied.

Analysis: Data analysis was performed using two-tailed Multivariate Analysis of Variance (MANOVA) and LSD post-hoc tests.

Findings: These studies establish a solid framework for future investigation of PTSD treatments. Data showed that there were significant differences in anxiety between groups in both the THP and L-Th studies ($p < 0.05$). Significant transcriptional fold changes were found in important genes involved in dopamine, serotonin, acetylcholine, and GABA neurotransmitter systems with both herbal compounds. These results provide quantifiable data demonstrating gene expression changes in PTSD-stressed and non-stressed rats receiving various treatments. Additionally, these findings contribute important data to the limited molecular details pertaining to the understanding of the genetic mechanisms involved in the neurobiology of PTSD.

Implications for Military Nursing: This proposal assists military nurses and other health care personnel to expand their understanding of the neurobehavioral and basic physiologic and cellular mechanisms responsible for PTSD. It is imperative that treatment of PTSD be investigated and possible therapies employed to sustain Force Health Protection and a Fit and Ready Force

TSNRP Research Priorities that Study or Project Addresses

Primary Priority

Force Health Protection:	<input checked="" type="checkbox"/> Fit and ready force <input type="checkbox"/> Deploy with and care for the warrior <input checked="" type="checkbox"/> Care for all entrusted to our care
Nursing Competencies and Practice:	<input type="checkbox"/> Patient outcomes <input type="checkbox"/> Quality and safety <input type="checkbox"/> Translate research into practice/evidence-based practice <input type="checkbox"/> Clinical excellence <input type="checkbox"/> Knowledge management <input type="checkbox"/> Education and training
Leadership, Ethics, and Mentoring:	<input type="checkbox"/> Health policy <input type="checkbox"/> Recruitment and retention <input type="checkbox"/> Preparing tomorrow's leaders <input type="checkbox"/> Care of the caregiver
Other:	<input checked="" type="checkbox"/> Mentoring future military nursing research scientists

Progress Towards Achievement of Specific Aims of the Study or Project

SPECIFIC AIMS AND RESEARCH QUESTIONS FROM THE GRANT

The aims of this study were to determine the effects of tetrahydropalmatine (THP) and L-Theanine (L-Th) in a PTSD rodent model. Specifically, the aims were as follows:

1. Determine the effects of THP and L-Th on anxiety.
2. Determine the effects of THP and L-Th on locomotion
3. Determine the effects of THP and L-Th on memory.
4. Determine the effects of THP and L-Th on hyperarousal or startle.
5. Determine the possible interaction effects of THP and L-Th with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.
6. Determine the effects of THP and L-Th on gene expression in the brain.

Research Questions

This study consisted of eight groups of rats for each herbal supplement investigated (THP or L-Th), see table below. Rats were assigned to the nonstressed groups or the restraint shock PTSD rodent model groups. There were four groups within the nonstressed rats (control, herbal, midazolam, and herbal + midazolam) and four groups in the PTSD rats (control, herbal, midazolam, and herbal + midazolam) (Table 1).

Nonstressed	Control (saline)	Herbal	Midazolam	Herbal + Midazolam
PTSD	Control (saline)	Herbal	Midazolam	Herbal + Midazolam

Table 1 Research Groups

The aims of this research protocol were guided by the following questions:

1. Is there a significant difference in the anxiolytic effects between the groups?
2. Is there a significant difference in locomotion between the groups?
3. Is there a significant difference in memory between the groups?
4. Is there a significant difference in hyperarousal between the groups?
5. Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?
6. Are there significant differences in gene expression and regulation in the hippocampus between the groups?
7. Are there significant differences in gene expression and regulation in the amygdala between the groups?

Findings related to each specific aim, research or study questions, and/or hypothesis:

***This section will be addressed separately for each herbal supplement investigated (THP and L-Theanine)**

SPECIFIC AIMS AND RESEARCH QUESTIONS - THP

The aims of this study were to determine the effects of THP in a PTSD rodent model. Specifically, the aims and their corresponding research questions were as follows:

Aim #1: Determine the effects of tetrahydropalmatine (THP) on anxiety.

Question# 1: Is there a significant difference in the anxiolytic effects between the groups?

Aim# 5: Determine the possible interaction effects of THP with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.

Question#5: Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?

Anxiety was measured by the elevated plus maze (EPM), an instrument utilized to measure anxiety in the rodent model. This model has been validated in previous research studies. **Anxiety** is defined as the ratio of open arm time to total time on the elevated plus maze (EPM). A rat was considered to have entered an arm via the MotorMonitor

software. At the end of the test, the time spent on the open arms was expressed as a percentage of the time spent on both the open and the closed arms. An increase in the percentage of time spent in the open arms reflects decreased anxiety.

Data analyses were conducted using a 2-tailed multivariate analysis of variance and Least Significant Difference (LSD) post hoc test. Analysis of the ratio of open arm time versus total time spent in the elevated plus maze revealed statistically significant increases between the control midazolam and control vehicle group ($P=.027$); the control midazolam and control midazolam plus THP group ($P=.017$); the control midazolam and PTSD vehicle group ($P=.001$); the control midazolam and PTSD THP group ($P=.006$); and control midazolam and PTSD midazolam group ($P=.014$). However, there was no significance found between the control THP and PTSD vehicle group ($P=.71$) and the PTSD vehicle group compared to the PTSD THP group ($p=.530$) (see Table 3 and Figure 3).

Group	Sample Size	Mean Ratio Open Arm/Total Time \pm SEM	Basic Motor Movement \pm SEM	Fine Motor Movement \pm SEM
Control Vehicle	10	43.7 \pm 5.8*	1103.2 \pm 52.7	794.3 \pm 33.9
Control THP	9	53.6 \pm 15.3	222.4 \pm 53.5*	185.3 \pm 40.0*
Control Midazolam	9	77.8 \pm 7.6*	391 \pm 109.4*	276 \pm 73.6*
Control Midazolam + THP	9	39.9 \pm 11.3*	478.1 \pm 115.3*	366.3 \pm 84.6*
PTSD Vehicle	9	25.2 \pm 4.2*	1017.4 \pm 73.3	717.9 \pm 47.3
PTSD THP	10	34.7 \pm 11*	264.5 \pm 56.7*	208.4 \pm 41.8*
PTSD Midazolam	10	39.7 \pm 9.3*	731.5 \pm 135.1*	499.2 \pm 89*
PTSD Midazolam + THP	10	53.9 \pm 14.8	130 \pm 54.3*	102.8 \pm 43.6*

Table 3. * $P<0.05$. Table showing treatment groups, sample size, mean ratio of open arm time to total maze time (in seconds), the number of basic motor movements and number of fine motor movements on elevated plus maze. Data are presented as mean \pm standard error of the mean. SEM = Standard Error of the Mean, THP = tetrahydropalmitine, PTSD = Post Traumatic Stress Disorder.

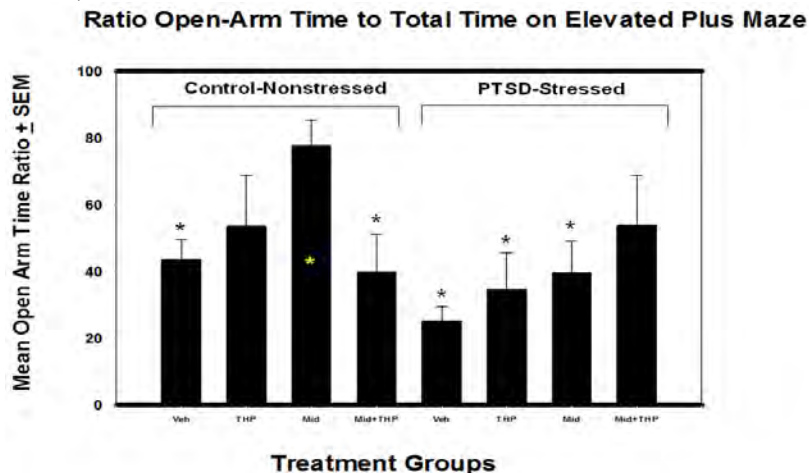


Figure 3. Bar graph representing the ratio of open-arm time to total time on Elevated Plus Maze. The X axis is the treatment groups and the Y axis shows the calculated ratio of the mean open-arm time to total time plus or minus the standard error of the mean in seconds. The asterisks show the groups that showed significance. Veh = Vehicle, THP = tetrahydropalmitine, Mid = Midazolam, Mid+THP = Midazolam and tetrahydropalmitine, SEM = Standard Error of the Mean

Aim# 2: Determine the effects of THP on locomotion.**Question#2: Is there a significant difference in locomotion between the groups?****Aim# 5: Determine the possible interaction effects of THP with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.****Question#5: Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?**

Locomotion was defined as motor movements on the EPM. The EPM was networked with MotorMonitor software (Hamilton-Kinder, Poway, California) with laser sensors integrally attached to the EPM to track the number of entries into each arm, time spent in each arm, and total basic and fine motor movements. Basic motor movements were the simple count of beam breaks in the elevated plus maze. Each time a photobeam was interrupted, the basic movement count was increased. These movements reveal a gross measure of locomotion, but did not distinguish what type of activity is being performed. Fine motor movements were a compilation of small animal movements such as grooming, head weaves or bobs. When rats have increased anxiety or fear, they display freezing behaviors, or decreased movements.

Basic Motor Movements

Total number of basic (gross) and fine motor movements tracked during time in the EPM were analyzed. Analysis showed a significant increase in basic motor movement of rats in the control vehicle group compared to the control THP group ($P<.000$); the control midazolam group ($P<.000$); the control THP plus midazolam group ($P<.000$); the PTSD THP group ($P<.000$); the PTSD THP group ($P<.000$); the PTSD midazolam group ($P=.003$); and the PTSD midazolam plus THP group ($P<.000$). Significant increase in basic movement of rats was also noted in the PTSD vehicle group compared to the control THP group ($P<.000$); the control midazolam group ($P<.000$); the control midazolam plus THP group ($P<.000$); the PTSD THP group ($P<.000$); the PTSD midazolam group ($P=.023$); and the PTSD midazolam plus THP group ($P<.000$). Significant increases in basic motor movements of rats were also noted in the control midazolam plus THP compared to the control THP group ($P=.046$); the control midazolam plus THP group compared to the PTSD midazolam plus THP group ($P=.006$); the PTSD midazolam group compared to the control THP ($P<.000$); the PTSD midazolam compared to the control midazolam ($P=.007$); the PTSD midazolam group compared to the control midazolam plus THP group ($P=.043$); the PTSD midazolam group compared to the PTSD THP group ($P<.000$); and the PTSD midazolam group compared to the PTSD midazolam plus THP ($P<.000$) (see Table 3 and Figure 4).

Fine Motor Movements

Similarly, a significant increase in fine motor movement of rats was found in the PTSD vehicle group compared to the control THP group ($P<.000$); the control midazolam group ($P<.000$); the control midazolam plus THP group ($P<.000$); the PTSD THP group ($P<.000$); the PTSD midazolam group ($P=.012$); and the PTSD midazolam plus THP ($P<.000$). Other significant increases in fine motor movements of rats were found in the control vehicle group compared to the control THP group ($P<.000$); the control midazolam group ($P<.000$); the control midazolam plus THP group ($P<.000$); the PTSD THP group ($P<.000$); the PTSD midazolam group ($P=.001$); and the PTSD midazolam plus THP ($P<.000$). Further significant increases in fine motor movement of rats were found in the PTSD midazolam group compared to the control THP group ($P<.000$); the control midazolam group ($P=.011$); the PTSD vehicle group ($P=.012$); the PTSD THP group ($P=.001$); and the PTSD midazolam plus THP ($P=.000$). Significant increases in fine motor movement of rats were also found in the control THP group compared to the control midazolam plus THP group ($P=.042$); the control midazolam plus THP group compared to the PTSD midazolam plus THP group ($P=.003$); and the control midazolam group compared to the PTSD midazolam plus THP group ($P=.045$) (see Table 3 and Figure 5).

Group	Sample Size	Mean Ratio Open Arm/Total Time \pm SEM	Basic Motor Movement \pm SEM	Fine Motor Movement \pm SEM
Control Vehicle	10	43.7 \pm 5.8*	1103.2 \pm 52.7	794.3 \pm 33.9
Control THP	9	53.6 \pm 15.3	222.4 \pm 53.5*	185.3 \pm 40.0*
Control Midazolam	9	77.8 \pm 7.6*	391 \pm 109.4*	276 \pm 73.6*

Control Midazolam + THP	9	39.9 ± 11.3*	478.1 ± 115.3*	366.3 ± 84.6*
PTSD Vehicle	9	25.2 ± 4.2*	1017.4 ± 73.3	717.9 ± 47.3
PTSD THP	10	34.7 ± 11*	264.5 ± 56.7*	208.4 ± 41.8*
PTSD Midazolam	10	39.7 ± 9.3*	731.5 ± 135.1*	499.2 ± 89*
PTSD Midazolam + THP	10	53.9 ± 14.8	130 ± 54.3*	102.8 ± 43.6*

Table 3. *P<0.05. Table showing treatment groups, sample size, mean ratio of open arm time to total maze time (in seconds), the number of basic motor movements and number of fine motor movements on elevated plus maze. Data are presented as mean ± standard error of the mean. SEM = Standard Error of the Mean, THP = tetrahydropalmitine, PTSD = Post Traumatic Stress Disorder.

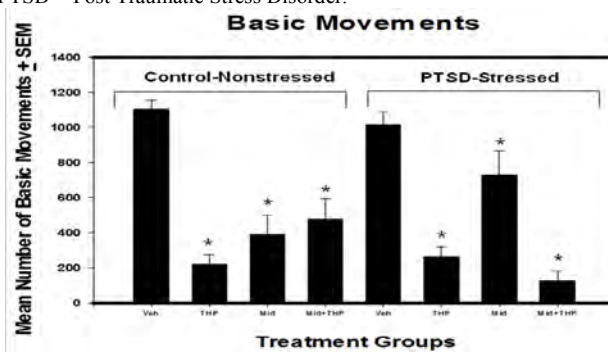


Figure 4. Bar graph representing the mean number of basic movements as recorded by the Motor monitor software on the Elevated Plus Maze. The X axis is the treatment groups and the Y axis shows the mean number of basic movements plus or minus the standard error of the mean. The asterisks show the groups that showed significance. Veh = Vehicle, THP = tetrahydropalmitine, Mid = Midazolam, Mid+THP = Midazolam and tetrahydropalmitine, SEM = Standard Error of the Mean

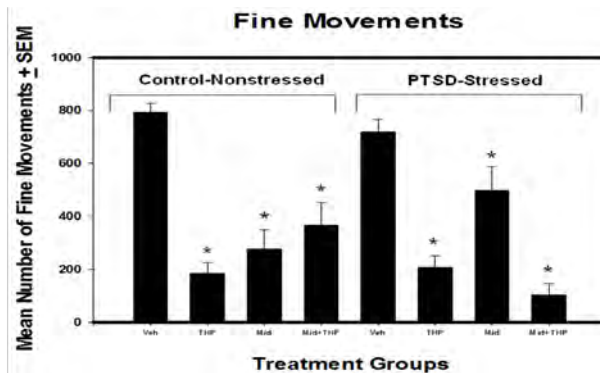


Figure 5. Bar graph representing the mean number of fine movements as recorded by the Motor monitor software on the Elevated Plus Maze. The X axis is the treatment groups and the Y axis shows the mean number of fine movements plus or minus the standard error of the mean. The asterisks show the groups that showed significance. Veh = Vehicle, THP = tetrahydropalmitine, Mid = Midazolam, Mid+THP = Midazolam and tetrahydropalmitine, SEM = Standard Error of the Mean

Aim# 3: Determine the effects of THP on memory.

Question#2: Is there a significant difference in memory between the groups?

Aim# 5: Determine the possible interaction effects of THP with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.

Question#5: Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?

Memory was defined as spatial memory as tested using the Morris water maze (MWM). This task is based upon the premise that animals have evolved an optimal strategy to explore their environment and escape from the water with a minimum amount of effort - i.e., swimming the shortest distance possible. The time it takes a rat to find a hidden platform in a water pool after previous exposure to the setup, using only available external cues, was determined as a measure of spatial memory.

In the MWM test, there were no statistically significant differences found between groups when looking at latency, time, and entries to the platform area or Zone 3 (see Figure 2). The nonstressed midazolam group had the overall highest mean time spent in Zone 3 (M=14.51; SEM = 0.680) and the control vehicle group had the lowest mean time spent in zone 3 (M=10.35; SEM=1.429) (see Table 4 and Figure 6).

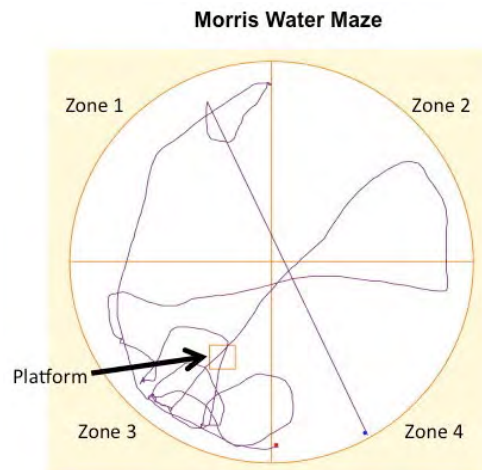


Figure 2. Map of the Morris water maze, as demonstrated from ANY-maze® software. Zone 3 is the area where platform was located, and the line illustrates the path of a rat searching for the platform.

Group	Sample Size	Mean Zone 3 Time	Standard Error of the Mean
Control Vehicle	10	10.35	1.429
Control THP	9	13.68	1.372
Control Midazolam	9	14.51	0.680
Control Midazolam + THP	9	13.41	0.869
PTSD Vehicle	9	13.29	1.546
PTSD THP	10	11.21	1.957
PTSD Midazolam	10	13.61	1.345
PTSD Midazolam + THP	10	13.89	0.922

Table 4. Table showing treatment groups, sample size, mean time spent in zone 3 and standard error of the mean. THP = tetrahydropalmitine, PTSD = Post Traumatic Stress Disorder.

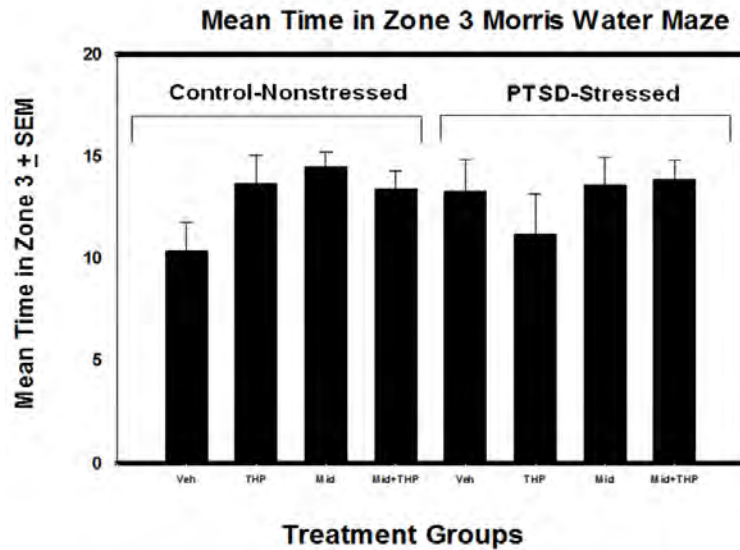


Figure 6. Bar graph representing the mean time spent in Zone 3 of Morris water maze plus or minus the standard error of the mean. The X axis is treatment groups and the Y axis is mean time spent in Zone 3 plus or minus the standard error of the mean. Veh = Vehicle, THP = tetrahydropalmitine, Mid = Midazolam, Mid+THP = Midazolam and tetrahydropalmitine, SEM = Standard Error of the Mean

Aim# 4: Determine the effects of THP on hyperarousal or startle.

Question#4: Is there a significant difference in hyperarousal between the groups?

Aim# 5: Determine the possible interaction effects of THP with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.

Question#5: Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?

Unable to evaluate because of the malfunction of the equipment.

Aim# 5: Determine the possible interaction effects of THP with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.

Question#5: Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?

See responses and data described under Aims 1-4

Aim# 6: Determine the effects of THP on gene expression in the brain.

Questions# 6: Are there significant differences in gene expression and regulation in the hippocampus between the groups?

Questions# 7: Are there significant differences in gene expression and regulation in the amygdala between the groups?

Gene Analysis

After completion of neurobehavioral tests, the rats were anesthetized using a bell jar filled with isoflurane. The calvarium was then opened exposing the whole brain, which was then removed intact and placed immediately on ice. Coronal slices (200- μ m thickness) in the vicinity of interaural and bregma coordinates 6.96 mm and -2.04

respectively were dissected using a brain block (see red shaded region in Figure 1A). Investigators took samples (circular punches 80-100 μm in diameter) from the left and right amygdala (see lower left red circle in area 6 of Figure 1B). Following dissection of the amygdala, the investigators grossly dissected the bilateral hippocampi (see upper medial red outlined area in area 6 of Figure 1B). Tissue was snap frozen in liquid nitrogen, placed in pre-labeled eppendorf tubes, and packed in dry ice for shipping to the QIAGEN Service Core for Genomics and Gene Expression in Frederick, MD.

Following the manufacturer's protocol, the RNA was isolated using the QIAGEN RNEasy Mini Kit (Cat # 74104). The quality of RNA was determined using the Agilent Bioanalyzer (Agilent) with RNA 6000 Nano Kits (Agilent, Cat #5067-1511). Total RNA yield, 260/280, and 260/230 ratios were measured using a NanoDrop spectrophotometer (Thermo). QIAGEN completed a reverse transcription reaction using 500 ng of total RNA using the QIAGEN RT² First Strand Kit (QIAGEN, Cat # 330401). In accordance with the manufacturer's instructions, cDNA samples were assayed using a modified QIAGEN RT² PCR Arrays (Cat # PARN-60). This array, containing 84 assays related to neurotransmitter receptors and regulators, was modified to include four additional genes. These genes are related to neurotransmission pathways that have been identified in previous PTSD studies: p11 (*S100a10*) (Cat # PPR06766); 5HT_{2A} receptor (*Htr2a*) (Cat # PPR06850); alpha-1 adrenergic receptor (*Adra1a*) (Cat # PPR43329); and *Egr1* (Zif/268) (Cat #PPR44272).

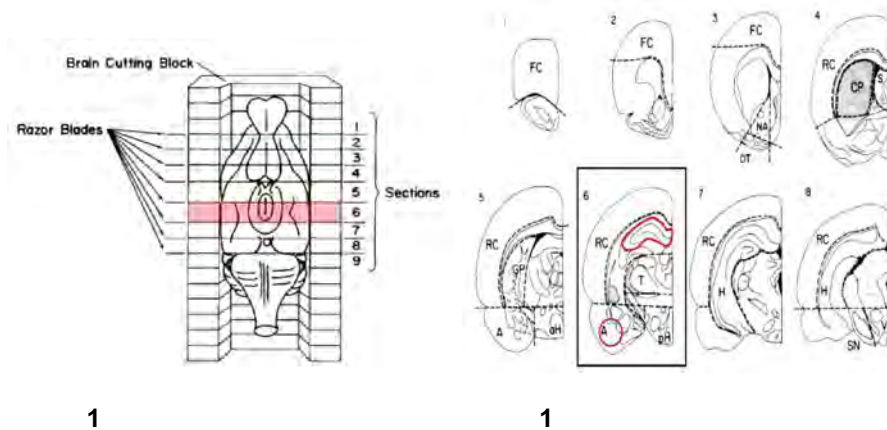


Figure 1 – (A) Orientation of brain within brain cutting block; (B) Coronal brain sections from dissected regions

(A) Illustration of rat brain in cutting block depicting specific areas where coronal slices were performed; (B) Numbers correspond to dissected sections from Figure 1B. FC, frontal cortex; NA, nucleus accumbens; OT, olfactory tubercle; S, septum; CP, caudate putamen; RC, remaining cortex; GP, globus pallidus; aH, anterior hypothalamus; pH, posterior hypothalamus; A, amygdala; T, thalamus; SN, substantia nigra; VT, ventral tegmentum; H, hippocampus.

Rat Neurotransmitter Receptors and Regulators PCR Array

The Rat Neurotransmitter Receptors and Regulators RT² Profiler™ PCR Array profiles the expression of 84 genes involved in modulating the biological processes of neurotransmitter biosynthesis, uptake, transport, and signaling. This array includes receptors for acetylcholine, dopamine, gamma-aminobutyric acid (GABA), glutamate, serotonin, somatostatin and neuropeptides. Genes involved in the regulation of neurotransmitter levels were included as well. Analysis of the expression of a focused panel of genes related to neuronal systems with this array was performed using real-time PCR.

Statistical Analyses

A one-way ANOVA was performed for this cross-sectional, randomized, prospective study in order to compare the eight groups. Investigators ensured all assumptions were examined (e.g., homogeneity of variance,

univariate normality, etc.) and in the event that the assumptions were not tenable, remedial (e.g., transformation) or alternative (e.g., nonparametric tests, such as Kruskal-Wallis) strategies were considered. The investigators also performed multiple comparison procedures (MCP) in the event that significance ($\alpha = .05$) was obtained, with the Tukey post hoc test. A variance explained statistic eta-squared (η^2) was used as the reported effect size of small (0.01), medium (0.59) or large (0.138) [23]. The data was then analyzed based on gene cycle thresholds normalized to five housekeeping genes per QIAGEN procedures.

Results

Eighty-eight genes were investigated in this study. Data analysis showed a number of significant differences in gene expression in both the hippocampus and amygdala. Volcano plots graphically display the relationship of $-\log_{10}$ p-value and the \log_2 fold change for the combined PTSD treatment groups and nonstressed treatment groups for all of the genes (Figure 2). For the 8-group one-way ANOVA, a large effect size ($\eta^2 > .138$) was chosen to signify between-group difference in gene expression. A Tukey's post hoc test was performed to further delineate significance between groups.

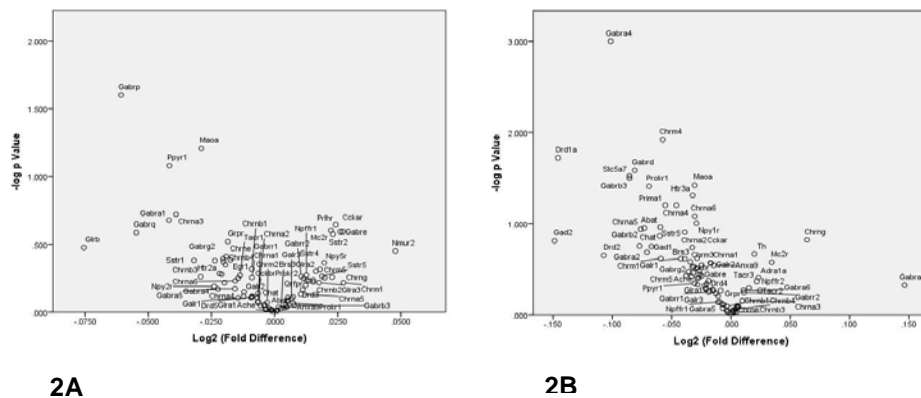


Figure 2 – (A) Differential expression of hippocampal and (B) amygdalar mRNA between groups
Volcano plot between \log_2 fold change on the x-axis (for neurotransmitter receptors and regulators in Tetrahydropalmitine/midazolam treated groups 40 PTSD-stressed vs. 40 nonstressed (control) groups) vs. $-\log$ of p-value on the y-axis. Eighty male Sprague-Dawley rats were injected subcutaneously 30 minutes prior to evaluation of their performance on neurobehavioral tests. The rats were then euthanized and cDNA prepared from the hippocampus (A) and amygdala (B) were subjected to RT² profiler PCR array for rat neurotransmitter receptor and regulator analysis, as described in Materials and Methods. PCR Array profiles were performed for the expression of 88 genes potentially involved in PTSD and/or rat neurotransmitter receptors and neurotransmitter regulation.

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Hippocampus

In the hippocampus, the genes with an effect size > 0.138 are displayed in Figure 3. In accordance with Figure 3, Table 1 summarizes between group changes in gene expression and fold changes in the hippocampus. The following genes in the hippocampus showed significant differences between groups: *Gabra2*, *Chrne*, *Chrna2*, and *Galr2*. The *Gabra2* gene was significant: $p = .006$, $\eta^2 = .238$. Post hoc tests revealed that the C-M+T group had a significantly lower mean ($M = 1.39$) than each of the following: (1) P-M ($M = 2.11$), (2) C-V ($M = 2.04$), and (3) P-V ($M = 2.04$). We found the *Chrne* gene to be significant: $p = .007$, $\eta^2 = .236$. Multiple comparison showed two significant tests: the P-M group had a higher mean ($M = 9.29$) than the (1) C-T ($M = 8.10$) and (2) C-M ($M = 8.28$) groups. The *Chrna2* gene was significant: $p = .031$, $\eta^2 = .189$. The post hoc test found two significant pairwise comparisons: The C-M+T group had a significantly lower mean ($M = 6.18$) than the (1) C-T ($M = 6.87$) and (2) P-V ($M = 6.96$) groups. The *Galr2* gene was found to be significant: $p = .042$, $\eta^2 = .18$. Though none of the multiple comparison tests were significant, the C-V group had the highest mean ($M = 11.04$) and the C-T group had the lowest ($M = 10.0$).

The following genes in the hippocampus did not show statistical significant differences between groups: *Chrna6*, *Galr1*, *Chrnd*, *Sstr1*, *Cckar*, *Slc5a7*, *Npffr1*, *Maoa*, *Gabra3*, *Orfpr*, and *Htr2a*. However, secondary to a

large effect size, these genes are presented in Table 1. For the *Chrna6* gene ($p = .213$, $\eta^2 = .545$), the C-V group had the highest mean ($M = 15.14$) and the C-M+T group had the lowest ($M = 6.91$). Concerning the *Galr1* gene ($p = .053$, $\eta^2 = .172$), the P-M group had the highest mean ($M = 11.94$) and the P-V group had the lowest ($M = 9.75$). Though not significant, for the *Chrnd* gene ($p = .131$, $\eta^2 = .159$) the P-M+T group had the highest mean ($M = 17.19$) and the C-M+T group had the lowest ($M = 14.68$). After evaluating the *Sstr1* gene ($p = .083$, $\eta^2 = .158$), the P-M group had the highest mean ($M = 7.29$) and the C-M group had the lowest ($M = 6.05$). While not significant, for the *Cckar* gene ($p = .113$, $\eta^2 = .155$) the P-V group had the highest mean ($M = 13.30$) and the C-T group had the lowest ($M = 11.27$). Examining the *Slc5a7* gene ($p = .102$, $\eta^2 = .152$), the P-M+T group had the highest mean ($M = 9.88$) and the C-T group had the lowest ($M = 8.79$). For the *Npffr1* gene ($p = .10$, $\eta^2 = .151$), the P-M group had the highest mean ($M = 11.56$) and the C-M+T group had the lowest ($M = 10.25$). The *Maoa* gene did not show significance ($p = .107$, $\eta^2 = .148$), however the C-V group had the highest mean ($M = 3.23$) and the C-M+T group had the lowest ($M = 2.83$). Analysis of the *Gabra3* gene ($p = .109$, $\eta^2 = .148$) revealed the P-M group had the highest mean ($M = 5.64$) and the C-T group had the lowest ($M = 4.38$). For the *Qrfpr* ($p = .136$, $\eta^2 = .14$), the P-M group had the highest mean ($M = 10.89$) and the C-T group had the lowest ($M = 9.35$). Lastly, the *Htr2a* gene was not significant ($p = .139$, $\eta^2 = .139$), however the P-M group had the highest mean ($M = 8.15$) and the C-M+T group had the lowest ($M = 6.91$).

Gene	#Group Comparison	Fold Change	Effect Size	P-value	Description of Gene
Gabra2	C-M+T vs. P-M	.72	.238	.006	Gamma-Aminobutyric Acid (GABA) A Receptor, Alpha 2
	C-M+T vs. C-V	.68			
	C-M+T vs. P-V	.68			
Chrne	P-M vs. C-T	1.19	.236	.007	Cholinergic Receptor, Nicotinic, Epsilon (Muscle)
	P-M vs. C-M	.98			
Chrna2	C-M+T vs. C-T	.69	.189	.031	Cholinergic receptor, nicotinic, alpha 2
	C-M+T vs. P-V	.78			
Galr2	C-V vs. C-T	1.04	.180	.042	Galanin receptor 2
Chrna6	C-V vs. C-M+T	8.23	.545	.213	Cholinergic Receptor, Nicotinic, Alpha 6 (Neuronal)
Galr1	P-M vs. P-V	2.19	.172	.053	Galanin receptor 1
Chrnd	P-M+T vs. C-M+T	2.51	.151	.131	Cholinergic receptor, nicotinic, delta (muscle)
Sstr1	P-M vs. C-M	1.24	.158	0.083	Somatostatin receptor 1
Cckar	P-V vs. C-T	2.03	.155	.113	Cholecystokinin A receptor
Slc5a7	P-M+T vs. C-T	1.09	.152	.102	Solute carrier family 5 (choline transporter), member 7
Npffr1	P-M vs. C-M+T	1.31	.151	.100	Neuropeptide FF receptor 1
Maoa	C-V vs. C-M+T	.40	.148	.107	Monoamine oxidase A
Gabra3	P-M vs. C-T	1.26	.148	.109	Gamma-aminobutyric acid (GABA) A receptor, alpha 3
Qrfpr	P-M vs. C-T	1.54	.140	.136	Pyroglutamylated RFamide peptide receptor
Htr2a	P-M vs. C-M+T	1.24	.139	.139	5-hydroxytryptamine (serotonin) receptor 2A, G protein-coupled

Table 1 – Between group changes in gene expression within the hippocampus

#Group comparison column presents the highest and lowest mean; *Significant p-value < 0.05. PTSD Vehicle (P-V); PTSD Midazolam (P-M); PTSD tetrahydropalmitine (P-T); PTSD tetrahydropalmitine + midazolam (P-M+T); Control Vehicle (C-V); Control Midazolam (C-M); Control Tetrahydropalmitine (C-T); Control tetrahydropalmitine + midazolam (C-M+T); Large effect size > 0.138; Significant p-value < 0.05; All genes were confirmed via the National Center for Biotechnology Information (NCBI) database.

Hippocampal Genes

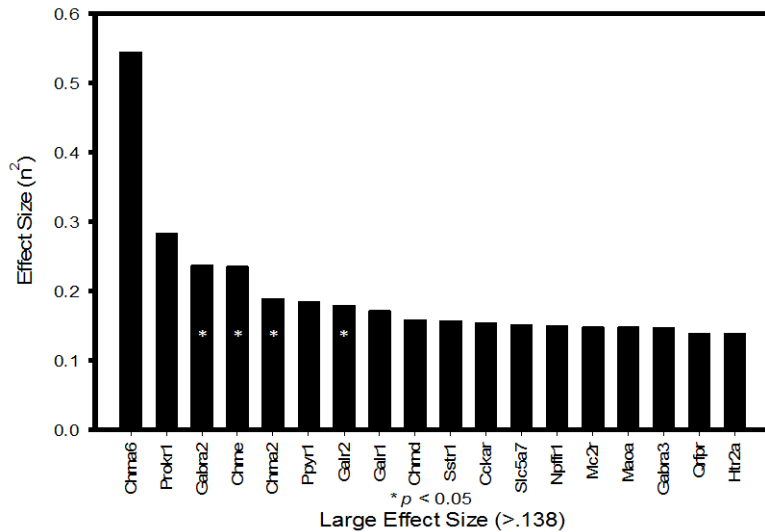


Figure 3 – Effect size of gene changes in the hippocampus

Genes demonstrating a large effect size ($\eta^2 > .138$) in the hippocampus as described in the Statistical Analysis;
*Significant p-value < 0.05 .

Amygdala

Genes in the amygdala with an effect size greater than 0.138 are displayed in Figure 4. In accordance with Figure 4, Table 2 summarizes between group differences in gene expression and fold changes within the amygdala. The *Gabra3* gene was found to be significant: $p = .043$, $\eta^2 = .191$. The P-V group had the highest mean ($M = 4.05$) and the P-M group had the lowest ($M = 2.66$), however as per the post hoc test, this pairwise comparison was not significant.

The following genes were not found to be statistically significant: *Th*, *Chrna4*, *Sstr1*, *Chrd*, *Tacr3*, *Prlhr*, *Adra1a*, *Chrb3*, *Cckbr*, *Gabrd*, *Chrb1*, and *Gabrg1*. However, based on the large effect size used in the study these genes are included in Table 2. For the *Th* gene ($p = .077$, $\eta^2 = .188$), we found the C-M group had the highest mean ($M = 11.34$) and the P-T group had the lowest ($M = 9.88$). Examining the *Chrna4* gene ($p = .057$, $\eta^2 = .182$), the P-V group had the highest mean ($M = 6.19$) and the P-T group had the lowest ($M = 4.71$). For the *Sstr1* gene ($p = .065$, $\eta^2 = .177$), the P-V group had the highest mean ($M = 5.77$) and the C-M+T group had the lowest ($M = 4.49$). Though not significant, for the *Chrd* gene ($p = .126$, $\eta^2 = .176$) the P-V group had the highest mean ($M = 16.97$) and the C-M group had the lowest ($M = 13.73$). Analysis of the *Tacr3* gene ($p = .115$, $\eta^2 = .16$) showed the C-M group had the highest mean ($M = 7.59$) and the P-T group had the lowest ($M = 6.17$). Evaluating the *Prlhr* gene ($p = .15$, $\eta^2 = .156$), the C-M group had the highest mean ($M = 11.33$) and the P-T group had the lowest ($M = 9.6$). For the *Adra1a* gene ($p = .131$, $\eta^2 = .155$), the P-M+T group had the highest mean ($M = 6.39$) and the P-M group had the lowest ($M = 5.61$). Concerning the *Chrb3* gene ($p = .294$, $\eta^2 = .149$), the P-M+T group had the highest mean ($M = 13.02$) and the C-M+T group had the lowest ($M = 10.55$). Evaluation of the *Cckbr* gene ($p = .145$, $\eta^2 = .149$) showed the P-V group had the highest mean ($M = 6.51$) and the P-T group had the lowest ($M = 5.16$). For the *Gabrd* gene ($p = .148$, $\eta^2 = .146$), the P-V group had the highest mean ($M = 5.03$) and the C-M+T group had the lowest ($M = 4.14$). Analysis of the *Chrb1* gene ($p = .426$, $\eta^2 = .100$) showed the C-T group had the highest mean ($M = 8.63$) and the P-V group had the lowest ($M = 7.82$). Lastly, for the *Gabrg1* gene ($p = .196$, $\eta^2 = .14$), we found the C-M group had the highest mean ($M = 3.01$) and the P-T group had the lowest ($M = 2.24$).

Gene	#Group Comparison	Fold Change	Effect Size	P-value	Description of Gene
Gabra3	P-V vs. P-M	1.39	.191	.043	Gamma-aminobutyric acid (GABA) A receptor, alpha 3
Th	C-M vs. P-T	1.46	.188	.077	Tyrosine hydroxylase
Chrna4	P-V vs. P-T	1.48	.182	.057	Cholinergic receptor, nicotinic, alpha 4 (neuronal)
Sstr1	P-V vs. C-M+T	1.28	.177	.065	Somatostatin receptor 1
Chrnd	P-V vs. C-M	3.24	.176	.126	Cholinergic receptor, nicotinic, delta (muscle)
Tacr3	C-M vs. P-T	1.42	.160	.115	Tachykinin receptor 3
Prlhr	C-M vs. P-T	1.73	.156	.150	Prolactin releasing hormone receptor
Adra1a	P-M+T vs. P-M	.78	.155	.131	Adrenoceptor alpha 1A
Chrn3	P-M+T vs. C-M+T	2.47	.149	.294	Cholinergic receptor, nicotinic, beta 3 (neuronal)
Cckbr	P-V vs. P-T	1.35	.149	.145	Cholecystokinin B receptor
Gabrd	P-V vs. C-M+T	.89	.146	.148	Gamma-aminobutyric acid (GABA) A receptor, delta
Chrn1	C-T vs. P-V	.81	.143	.182	Cholinergic receptor, nicotinic, beta 1 (muscle)
Gabrg1	C-M vs. P-T	.77	.140	.196	Gamma-aminobutyric acid (GABA) A receptor, gamma 1

Table 2 – Between group changes in gene expression within the amygdala

#Group comparison column presents the highest and lowest mean; *Significant p-value < 0.05. PTSD Vehicle (P-V); PTSD Midazolam (P-M); PTSD Tetrahydropalmitine (P-T); PTSD Midazolam+ Tetrahydropalmitine (P-M+T); Control Vehicle (C-V); Control Midazolam (C-M); Control Tetrahydropalmitine (C-T); Control Midazolam+ Tetrahydropalmitine (C-M+T); Large effect size > 0.138; Significant p-value < 0.05; All genes were confirmed via the National Center for Biotechnology Information (NCBI) database.

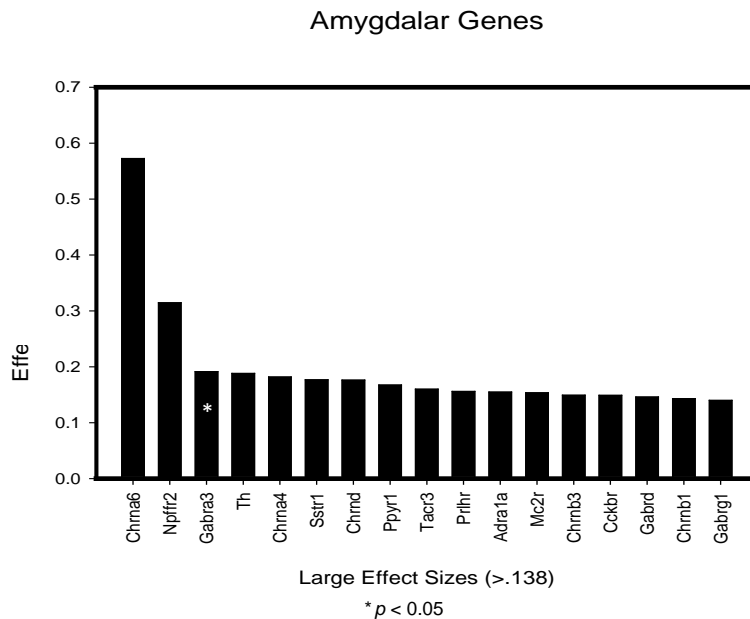


Figure 4 - Effect size of gene changes in the amygdala

Genes demonstrating a large effect size ($\eta^2 > .138$) in the amygdala as described in the Statistical Analysis;
*Significant p-value < 0.05.

SPECIFIC AIMS AND RESEARCH QUESTIONS – L-Th

The aims of this study were to determine the effects of L-Th in a PTSD rodent model. Specifically, the aims and their corresponding research questions were as follows:

Aim #1: Determine the effects of L-Theanine (L-Th) on anxiety.

Question# 1: Is there a significant difference in the anxiolytic effects between the groups?

Aim# 5: Determine the possible interaction effects of L-Th with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.

Question#5: Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?

Data regarding weight gain between the 40 control (non-stressed) and 40 PTSD (stressed) rats were significantly different ($p < .001$), where the control rats gained an average of 55.4 grams compared to 37.4 grams for the PTSD rats over the 10 post stress days. All neurobehavior data were analyzed using a two-tailed multivariate analysis of variance (MANOVA). A determination of statistical significance in neurobehavior using L-Theanine in a rodent model was made. If significance was found, a LSD post hoc was used.

Elevated Plus Maze:

Analysis of the ratio open arm time to total time on EPM revealed a statistically significant difference between the control midazolam and PTSD control group ($p = .004$). For the one-way ANOVA, significant between group differences were obtained: $F(7,72) = 2.62, p = .018, \eta^2 = .203$ (20.3% of the variability in the outcome was

attributable to between-group differences). The C-M group had the highest mean ($M = 36.04$) and the P-V group had the lowest ($M=10.52$). Given the homogeneity of variance assumption was not met ($p=.004$), the Games-Howell MCP was performed and no pairwise comparisons were significant. Given outliers and/or slight non-normality of the distribution, the investigators used the Kruskal-Wallis test and, as with the ANOVA, significance was obtained: $\chi^2(7) = 22.65, p = .002$. Moreover, a square root transformation did improve the distribution of this outcome, and significance was still obtained per the ANOVA: $F(7,72) = 3.32, p = .004, \eta^2 = .244$ and per the Tukey post hoc test, there is one pairwise significant comparison, that being CM (higher mean) vs. PV (See Figure 3, 4 and Table 4).

Group	Sample Size	Mean Open Arm Entries	Open Arm Entries SEM	Mean Ratio Open Arm /Total Time	Ratio Open Arm /Total Time SEM
Control Vehicle	10	8.00	1.23	12.83	2.39
Control L-Theanine	10	10.00	1.63	12.61	2.36
Control Midazolam	10	4.40	0.96	36.04	9.76
Control Midazolam + L-Theanine	10	7.60	1.90	15.42	6.85
PTSD Vehicle	10	6.70	1.25	10.52	1.64
PTSD L-Theanine	10	16.10	1.85	17.53	2.41
PTSD Midazolam	10	6.70	1.23	28.84	8.75
PTSD Midazolam + L-Theanine	10	10.60	2.12	27.84	5.66

Table 4. Open Arm Entries & Ratio of Open Arm Time in groups of rats in the Elevated Plus Maze, SEM=Standard Error of the Mean

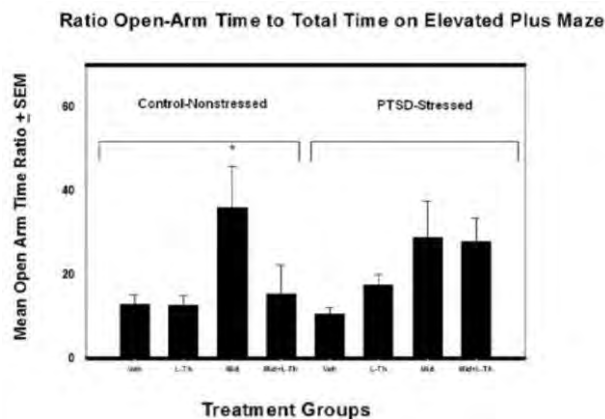


Figure 3. Ratio Open-Arm Time to Total Time on Elevated Plus Maze shows the calculated ratio of time that the rat spent on the open arm compared to the total time on the maze. X axis is treatment groups and Y axis is mean open arm time ratio in seconds. Veh=Vehicle, L-Th= L-Theanine, Mid=Midazolam, Mid+L- Th=Midazolam and L-Theanine, SEM=Standard Error of the Mean

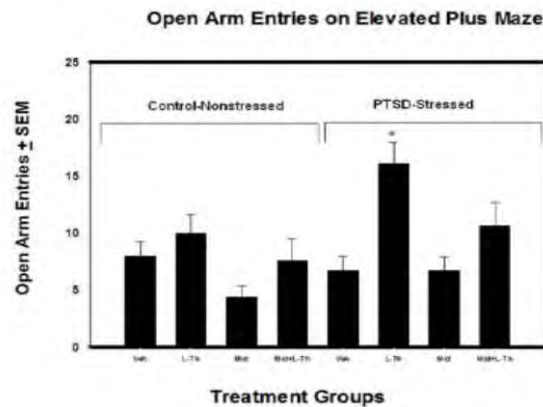


Figure 4. Open-Arm Entries on Elevated Plus Maze shows the number of times the rat ventured onto the open arm on the elevated plus maze. X axis is treatment groups and Y axis is mean open arm time in seconds. Veh=Vehicle, L-Th= L-Theanine, Mid=Midazolam, Mid+L-Th=Midazolam and L-Theanine, SEM=Standard Error of the Mean

Aim# 2: Determine the effects of L-Th on locomotion.

Question#2: Is there a significant difference in locomotion between the groups?

Aim# 5: Determine the possible interaction effects of L-Th with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.

Question#5: Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?

No data collected regarding locomotion.

Aim# 3: Determine the effects of L-Th on memory.

Question#2: Is there a significant difference in memory between the groups?

Aim# 5: Determine the possible interaction effects of L-Th with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.

Question#5: Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?

Morris Water Maze

In the MWM test, there were no statistically significant differences found between groups when looking at distance, mean speed, and entries to the platform area (Zone 3). For the one-way ANOVA, significance between group differences were obtained: $F(7,72)=5.12, p < .05, \eta^2 = .332$ (33.2% of the variability in the outcome was attributable to between-group differences). The P-M+L group had the highest mean ($M = 10.6$) and the C-M group had the lowest ($M=4.4$). Per the post hoc tests (i.e., Tukey HSD) the following pairwise comparisons were significant. P-L had a higher mean than C-M, C-V, C-M+L, P-V, and P-M (See Table 5 and Figure 5).

Group	Sample Size	Mean Time in Zone 3	SEM
Control Vehicle	10	16.370	1.08
Control L-Theanine	10	18.830	1.23
Control Midazolam	10	17.230	1.89
Control Midazolam + L-Theanine	10	16.320	1.89
PTSD Vehicle	10	16.290	1.99
PTSD L-Theanine	10	16.680	1.26
PTSD Midazolam	10	17.970	2.39
PTSD Midazolam + L-Theanine	10	15.670	1.09

Table 5. Morris Water Maze time spent by each group of rats in Zone 3 (platform location), SEM=Standard Error of the Mean

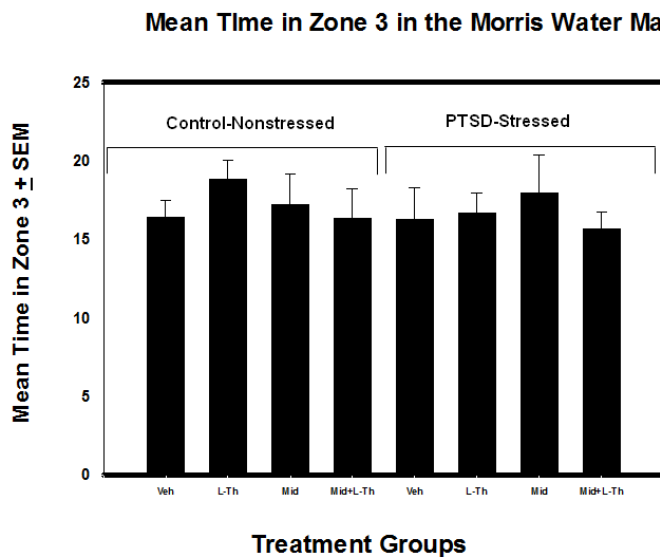


Figure 5. Mean time in Zone 3 in the Morris Water Maze. X axis is treatment groups and Y axis is mean open arm time in seconds. Veh=Vehicle, L-Th= L-Theanine, Mid=Midazolam, Mid+L-Th=Midazolam and L-Theanine, SEM=Standard Error of the Mean

Aim# 4: Determine the effects of L-Th on hyperarousal or startle.

Question#4: Is there a significant difference in hyperarousal between the groups?

Aim# 5: Determine the possible interaction effects of L-Th with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.

Question#5: Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?

Unable to evaluate because of the malfunction of the equipment.

Aim# 5: Determine the possible interaction effects of L-Th with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.

Question#5: Are there significant differences or interaction effects between groups regarding the above neurobehavioral effects (anxiety, locomotion, memory, hyperarousal)?

See data described under Aims 1-4

Aim# 6: Determine the effects of L-Th on gene expression in the brain.

Questions# 6: Are there significant differences in gene expression and regulation in the hippocampus between the groups?

Questions# 7: Are there significant differences in gene expression and regulation in the amygdala between the groups?

Results

Eighty-eight genes were investigated in this study. Data analysis showed a number of significant differences in gene expression in both the hippocampus and amygdala. Volcano plots graphically display the relationship of $-\log_{10}$ p-value and the \log_2 fold change for the combined PTSD-stressed groups and nonstressed treatment groups for all of the genes (Figure 2). For the 8-group one-way ANOVA, a large effect size ($\eta^2 > .138$) was chosen to signify between-group difference in gene expression. A Tukey's post hoc test was performed to further delineate significance between groups.

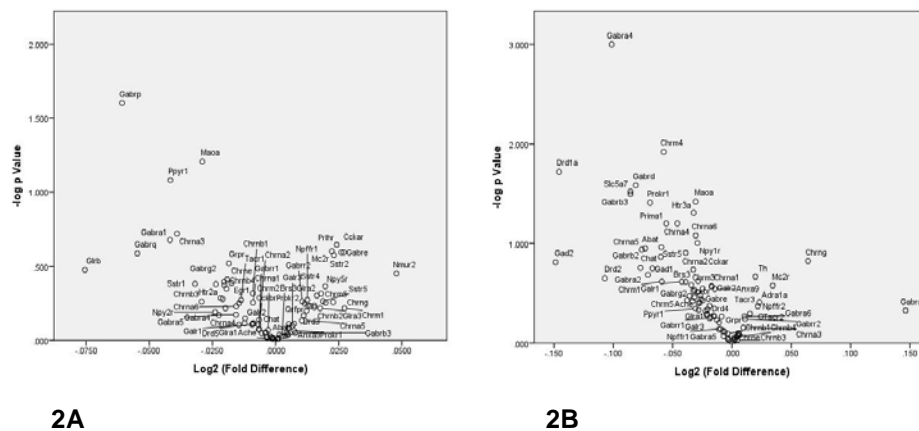


Figure 2 – (A) Differential expression of hippocampal and (B) amygdalar mRNA between groups Volcano plot between \log_2 fold change on the x-axis (for neurotransmitter receptors and regulators in Tetrahydropalmatine/midazolam treated groups 40 PTSD-stressed vs. 40 nonstressed (control) groups) vs. $-\log$ of p-value on the y-axis. Eighty male Sprague-Dawley rats were injected subcutaneously 30 minutes prior to evaluation of their performance on neurobehavioral tests. The rats were then euthanized and cDNA prepared from the hippocampus (A) and amygdala (B) were subjected to RT² profiler PCR array for rat neurotransmitter receptor and

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regulator analysis, as described in Materials and Methods. PCR Array profiles were performed for the expression of 88 genes potentially involved in PTSD and/or rat neurotransmitter receptors and neurotransmitter regulation.

Hippocampus

In the hippocampus, the genes with an effect size > 0.138 are displayed in Figure 3. In accordance with Figure 3, Table 1 summarizes between group changes in gene expression and fold changes in the hippocampus. The following genes in the hippocampus showed significant differences between groups: *Gabra2*, *Chrne*, *Chrna2*, and *Galr2*. The *Gabra2* gene was significant: $p = .006$, $\eta^2 = .238$. Post hoc tests revealed that the C-M+T group had a significantly lower mean ($M = 1.39$) than each of the following: (1) P-M ($M = 2.11$), (2) C-V ($M = 2.04$), and (3) P-V ($M = 2.04$). We found the *Chrne* gene to be significant: $p = .007$, $\eta^2 = .236$. Multiple comparisons showed two significant tests: the P-M group had a higher mean ($M = 9.29$) than the (1) C-T ($M = 8.10$) and (2) C-M ($M = 8.28$) groups. The *Chrna2* gene was significant: $p = .031$, $\eta^2 = .189$. The post hoc test found two significant pairwise comparisons: The C-M+T group had a significantly lower mean ($M = 6.18$) than the (1) C-T ($M = 6.87$) and (2) P-V ($M = 6.96$) groups. The *Galr2* gene was found to be significant: $p = .042$, $\eta^2 = .18$. Though none of the multiple comparison tests were significant, the C-V group had the highest mean ($M = 11.04$) and the C-T group had the lowest ($M = 10.0$).

The following genes in the hippocampus did not show statistical significant differences between groups: *Chrna6*, *Galr1*, *Chrnd*, *Sstr1*, *Cckar*, *Slc5a7*, *Npffr1*, *Maoa*, *Gabra3*, *Orfpr*, and *Htr2a*. However, secondary to a large effect size, these genes are presented in Table 1. For the *Chrna6* gene ($p = .213$, $\eta^2 = .545$), the C-V group had the highest mean ($M = 15.14$) and the C-M+T group had the lowest ($M = 6.91$). Concerning the *Galr1* gene ($p = .053$, $\eta^2 = .172$), the P-M group had the highest mean ($M = 11.94$) and the P-V group had the lowest ($M = 9.75$). Though not significant, for the *Chrnd* gene ($p = .131$, $\eta^2 = .159$) the P-M+T group had the highest mean ($M = 17.19$) and the C-M+T group had the lowest ($M = 14.68$). After evaluating the *Sstr1* gene ($p = .083$, $\eta^2 = .158$), the P-M group had the highest mean ($M = 7.29$) and the C-M group had the lowest ($M = 6.05$). While not significant, for the *Cckar* gene ($p = .113$, $\eta^2 = .155$) the P-V group had the highest mean ($M = 13.30$) and the C-T group had the lowest ($M = 11.27$). Examining the *Slc5a7* gene ($p = .102$, $\eta^2 = .152$), the P-M+T group had the highest mean ($M = 9.88$) and the C-T group had the lowest ($M = 8.79$). For the *Npffr1* gene ($p = .10$, $\eta^2 = .151$), the P-M group had the highest mean ($M = 11.56$) and the C-M+T group had the lowest ($M = 10.25$). The *Maoa* gene did not show significance ($p = .107$, $\eta^2 = .148$), however the C-V group had the highest mean ($M = 3.23$) and the C-M+T group had the lowest ($M = 2.83$). Analysis of the *Gabra3* gene ($p = .109$, $\eta^2 = .148$) revealed the P-M group had the highest mean ($M = 5.64$) and the C-T group had the lowest ($M = 4.38$). For the *Orfpr* gene ($p = .136$, $\eta^2 = .14$), the P-M group had the highest mean ($M = 10.89$) and the C-T group had the lowest ($M = 9.35$). Lastly, the *Htr2a* gene was not significant ($p = .139$, $\eta^2 = .139$), however the P-M group had the highest mean ($M = 8.15$) and the C-M+T group had the lowest ($M = 6.91$).

Gene	#Group Comparison	Fold Change	Effect Size	P-value	Description of Gene
Gabra2	C-M+T vs. P-M	.72	.238	.006	Gamma-Aminobutyric Acid (GABA) A Receptor, Alpha 2
	C-M+T vs. C-V	.68			
	C-M+T vs. P-V	.68			
Chrne	P-M vs. C-T	1.19	.236	.007	Cholinergic Receptor, Nicotinic, Epsilon (Muscle)
	P-M vs. C-M	.98			
Chrna2	C-M+T vs. C-T	.69	.189	.031	Cholinergic receptor, nicotinic, alpha 2
	C-M+T vs. P-V	.78			
Galr2	C-V vs. C-T	1.04	.180	.042	Galanin receptor 2
Chrna6	C-V vs. C-M+T	8.23	.545	.213	Cholinergic Receptor, Nicotinic, Alpha 6 (Neuronal)
Galr1	P-M vs. P-V	2.19	.172	.053	Galanin receptor 1
Chrnd	P-M+T vs. C-M+T	2.51	.151	.131	Cholinergic receptor, nicotinic, delta (muscle)
Sstr1	P-M vs. C-M	1.24	.158	0.083	Somatostatin receptor 1
Cckar	P-V vs. C-T	2.03	.155	.113	Cholecystokinin A receptor

Slc5a7	P-M+T vs. C-T	1.09	.152	.102	Solute carrier family 5 (choline transporter), member 7
Npffr1	P-M vs. C-M+T	1.31	.151	.100	Neuropeptide FF receptor 1
Maoa	C-V vs. C-M+T	.40	.148	.107	Monoamine oxidase A
Gabra3	P-M vs. C-T	1.26	.148	.109	Gamma-aminobutyric acid (GABA) A receptor, alpha 3
Qrfpr	P-M vs. C-T	1.54	.140	.136	Pyroglutamylated RFamide peptide receptor
Htr2a	P-M vs. C-M+T	1.24	.139	.139	5-hydroxytryptamine (serotonin) receptor 2A, G protein-coupled

Table 1 – Between group changes in gene expression within the hippocampus

#Group comparison column presents the highest and lowest mean; *Significant p-value < 0.05. PTSD Vehicle (P-V); PTSD Midazolam (P-M); PTSD tetrahydropalmatine (P-T); PTSD tetrahydropalmatine + midazolam (P-M+T); Control Vehicle (C-V); Control Midazolam (C-M); Control Tetrahydropalmatine (C-T); Control Tetrahydropalmatine + midazolam (C-M+T); Large effect size > 0.138; Significant p-value < 0.05; All genes were confirmed via the National Center for Biotechnology Information (NCBI) database.

Hippocampal Genes

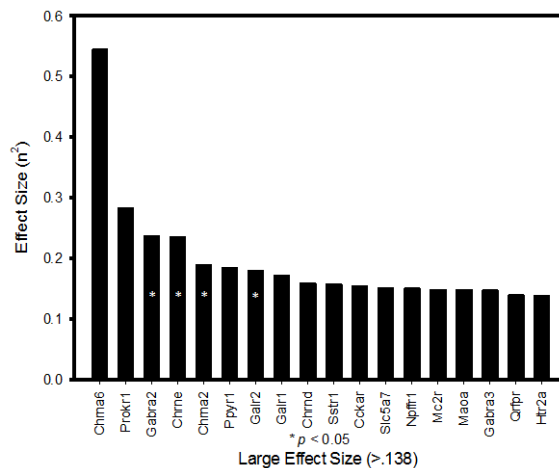


Figure 3 – Effect size of gene changes in the hippocampus

Genes demonstrating a large effect size ($\eta^2 > .138$) in the hippocampus as described in the Statistical Analysis; *Significant p-value < 0.05.

Amygdala

Genes in the amygdala with an effect size greater than 0.138 are displayed in Figure 4. In accordance with Figure 4, Table 2 summarizes between group differences in gene expression and fold changes within the amygdala. The *Gabra3* gene was found to be significant: $p = .043$, $\eta^2 = .191$. The P-V group had the highest mean ($M = 4.05$) and the P-M group had the lowest ($M = 2.66$), however as per the post hoc test, this pairwise comparison was not significant.

The following genes were not found to be statistically significant: *Th*, *Chrna4*, *Sstr1*, *Chrd*, *Tacr3*, *Prlhr*, *Adra1a*, *Chrb3*, *Cckbr*, *Gabrd*, *Chrb1*, and *Gabrg1*. However, based on the large effect size used in the study these genes are included in Table 2. For the *Th* gene ($p = .077$, $\eta^2 = .188$), we found the C-M group had the highest mean ($M = 11.34$) and the P-T group had the lowest ($M = 9.88$). Examining the *Chrna4* gene ($p = .057$, $\eta^2 = .182$), the P-V group had the highest mean ($M = 6.19$) and the P-T group had the lowest ($M = 4.71$). For the *Sstr1* gene ($p = .065$, $\eta^2 = .177$), the P-V group had the highest mean ($M = 5.77$) and the C-M+T group had the lowest ($M = 4.49$). Though not significant, for the *Chrd* gene ($p = .126$, $\eta^2 = .176$) the P-V group had the highest mean ($M = 16.97$)

and the C-M group had the lowest ($M = 13.73$). Analysis of the *Tacr3* gene ($p = .115$, $\eta^2 = .16$) showed the C-M group had the highest mean ($M = 7.59$) and the P-T group had the lowest ($M = 6.17$). Evaluating the *Prlhr* gene ($p = .15$, $\eta^2 = .156$), the C-M group had the highest mean ($M = 11.33$) and the P-T group had the lowest ($M = 9.6$). For the *Adra1a* gene ($p = .131$, $\eta^2 = .155$), the P-M+T group had the highest mean ($M = 6.39$) and the P-M group had the lowest ($M = 5.61$). Concerning the *Chrn3* gene ($p = .294$, $\eta^2 = .149$), the P-M+T group had the highest mean ($M = 13.02$) and the C-M+T group had the lowest ($M = 10.55$). Evaluation of the *Cckbr* gene ($p = .145$, $\eta^2 = .149$) showed the P-V group had the highest mean ($M = 6.51$) and the P-T group had the lowest ($M = 5.16$). For the *Gabrd* gene ($p = .148$, $\eta^2 = .146$), the P-V group had the highest mean ($M = 5.03$) and the C-M+T group had the lowest ($M = 4.14$). Analysis of the *Chrn1* gene ($p = .426$, $\eta^2 = .100$) showed the C-T group had the highest mean ($M = 8.63$) and the P-V group had the lowest ($M = 7.82$). Lastly, for the *Gabrg1* gene ($p = .196$, $\eta^2 = .14$), we found the C-M group had the highest mean ($M = 3.01$) and the P-T group had the lowest ($M = 2.24$).

Gene	#Group Comparison	Fold Change	Effect Size	P-value	Description of Gene
Gabra3	P-V vs. P-M	1.39	.191	.043	Gamma-aminobutyric acid (GABA) A receptor, alpha 3
Th	C-M vs. P-T	1.46	.188	.077	Tyrosine hydroxylase
Chrna4	P-V vs. P-T	1.48	.182	.057	Cholinergic receptor, nicotinic, alpha 4 (neuronal)
Sstr1	P-V vs. C-M+T	1.28	.177	.065	Somatostatin receptor 1
Chrnd	P-V vs. C-M	3.24	.176	.126	Cholinergic receptor, nicotinic, delta (muscle)
Tacr3	C-M vs. P-T	1.42	.160	.115	Tachykinin receptor 3
Prlhr	C-M vs. P-T	1.73	.156	.150	Prolactin releasing hormone receptor
Adra1a	P-M+T vs. P-M	.78	.155	.131	Adrenoceptor alpha 1A
Chrn3	P-M+T vs. C-M+T	2.47	.149	.294	Cholinergic receptor, nicotinic, beta 3 (neuronal)
Cckbr	P-V vs. P-T	1.35	.149	.145	Cholecystokinin B receptor
Gabrd	P-V vs. C-M+T	.89	.146	.148	Gamma-aminobutyric acid (GABA) A receptor, delta
Chrn1	C-T vs. P-V	.81	.143	.182	Cholinergic receptor, nicotinic, beta 1 (muscle)
Gabrg1	C-M vs. P-T	.77	.140	.196	Gamma-aminobutyric acid (GABA) A receptor, gamma 1

Table 2 – Between group changes in gene expression within the amygdala

#Group comparison column presents the highest and lowest mean; *Significant p-value < 0.05. PTSD Vehicle (P-V); PTSD Midazolam (P-M); PTSD Tetrahydropalmitine (P-T); PTSD Midazolam+ Tetrahydropalmitine (P-M+T); Control Vehicle (C-V); Control Midazolam (C-M); Control Tetrahydropalmitine (C-T); Control Midazolam+ Tetrahydropalmitine (C-M+T); Large effect size > 0.138; Significant p-value < 0.05; All genes were confirmed via the National Center for Biotechnology Information (NCBI) database.

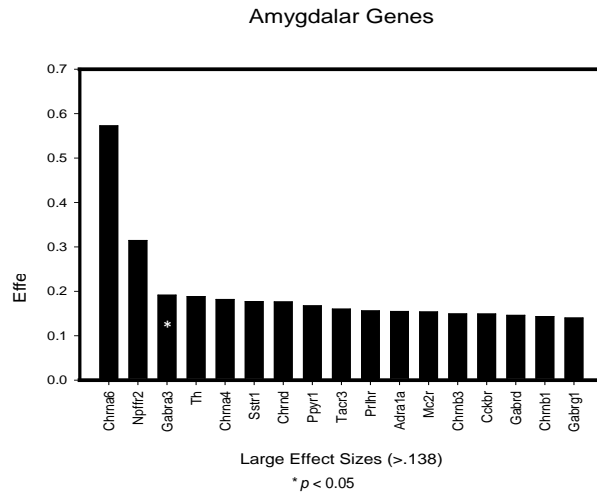


Figure 4 - Effect size of gene changes in the amygdala

Genes demonstrating a large effect size ($\eta^2 > .138$) in the amygdala as described in the Statistical Analysis;

*Significant p-value < 0.05.

Relationship of current findings to previous findings:

All of the data and findings described above in the “**Progress Towards Achievement of Specific Aims of the Study or Project**” are new as these studies were the first of their kind. However, in our previous work, significant findings showed that THP and L-Th have been found to decrease anxiety and motor movements in the laboratory rat. There are no current published data directly related to altered gene expression with the use of THP or L-Th in PTSD.

Effect of problems or obstacles on the results:

1. The restrainers were too big to restrain the rats at the beginning, so we modified the restrainers and the shocking apparatus to adjust for the size of the rats.
2. The Acoustic Startle Reflex equipment was not operational during the experiments and the data obtained was not accurate. Therefore, we did not analyze these data or include them in our findings.

Limitations:

1. This was an animal study in the basic sciences and not generalizable to the human population, but these data can be used as part of the foundation of our sciences and building blocks of our practice.
2. The sample population for this study was male rats due to time and financial constraints. The use of male rats also eliminated the potential confounding variables arising from estrus cycles. A study that compares male and female rats would more than double the financial requirements and work load of the proposal, including the hiring of additional personnel.
3. A one-time dose for these herbal supplements was chosen for these experiments. The timing of administration, such as multidose or prophylaxis, may yield different results in preventing or aborting PTSD symptomology. It is known that some treatments of PTSD (i.e. antidepressants) may require an extended period of time to affect

neurobehavior. Future studies of THP and or L-Th may utilize our current validated model with an extended dosing period to obtain steady state for the period of time needed to alter neurobiology.

Conclusion:**SPECIFIC AIMS**

1. Determine the effects of tetrahydropalmatine and l-theanine on anxiety.
2. Determine the effects of tetrahydropalmatine and l-theanine on locomotion
3. Determine the effects of tetrahydropalmatine and l-theanine on memory.
4. Determine the effects of tetrahydropalmatine and l-theanine on hyperarousal or startle.
5. Determine the possible interaction effects of tetrahydropalmatine and l-theanine with midazolam on anxiety, locomotion, memory, and hyperarousal or startle.
6. Determine the effects of tetrahydropalmatine and l-theanine on gene expression in the brain.

The purpose of this study was to investigate THP and L-Th and their effects on PTSD induced neurobehavior in the rodent model. This was the first study evaluating THP in a PTSD model. The ability of THP administered to a rodent with induced PTSD to alleviate the symptoms of anxiety, locomotion, and memory was studied. Rats were separated into PTSD and non-stressed groups and administered various pharmacological agents. Through use of the Restraint Tail-Shock device, PTSD was induced in male Sprague-Dawley rats. After adequate time to develop symptomatology, depending upon group assignment, rats were given a pharmacological intervention including THP or L-Th. The rats were then subjected to a series of neurobehavioral testing in order to evaluate anxiety (EPM), spatial memory (MWM), and Acoustic Startle Reflex (ASR). Our theoretic framework and PTSD Disease Induction Model were validated based on this research. This model will be useful in future research applications. The PTSD induction model in which rats were exposed to a two-hour immobilization and tail-shock session over three days was validated in our study.

RT-PCR analysis revealed significant changes between groups in several genes implicated in a variety of disorders ranging from PTSD, anxiety, mood disorders, and substance dependence. These data further elucidate the transcriptomic footprint of PTSD in the rodent amygdala and hippocampus as well as transcriptome changes effected by THP, L-Th, and midazolam interventions. This understanding of the effect of PTSD at the level of mRNA transcription contributes to a more complete understanding of the overall metabonomics of PTSD and may allow for more targeted pharmacologic intervention in the future.

The next step to consider in clarifying the molecular mechanism of PTSD may be to characterize PTSD-induced changes to the rat proteome. Changes in mRNA expression are often linked to changes in protein expression, but not in a predictable manner. Small changes in mRNA expression can lead to variable changes in corresponding protein expression. We propose repeating the current experiment using protein assay methods to correlate changes in mRNA expression with changes in protein expression induced by PTSD and the effects of THP, L-Th, and midazolam on these changes. Multiple methods and computational approaches to protein assays are available.

We anticipate further investigation into the network of gene relationships between control and PTSD-induced rats using bioinformatic methods such as gene enrichment analysis and network enrichment analysis. Characterization of a comprehensive proteomic network in both control and PTSD-induced rats will allow for comparative proteomic analysis that may lead to the identification of biomarkers for PTSD susceptibility as well as potential targets for pharmacologic interventions. Additionally, we anticipate investigation into the chemical components of other herbals or pharmaceuticals that may have similar effects on gene expression at the level of mRNA transcription, with a particular emphasis on those with demonstrated efficacy in treating PTSD.

These descriptive gene expression findings provide insight into the possible genetic basis for PTSD in the rodent amygdala and hippocampus as well as gene changes resulting from THP, L-Th, and midazolam interventions. The results contribute to the body of knowledge in understanding the molecular pathology of PTSD, allowing for more specific focused investigations in the future.

Overall, evaluation of the data collected in this study did not support our hypothesis that THP or L-Th may ameliorate the symptoms of PTSD. However, our experimental model was validated through our implemented controls.

The next step to consider in clarifying the molecular mechanism of PTSD may be to characterize PTSD-induced changes to the rat proteome. Changes in mRNA expression are often linked to changes in protein expression, but not in a predictable manner. Small changes in mRNA expression can lead to variable changes in corresponding protein expression. We propose repeating the current experiment using protein assay methods to

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correlate changes in mRNA expression with changes in protein expression induced by PTSD and the effects of THP, L-Th, and midazolam on these changes.

While a one-time dose was insufficient in providing a significant decrease in anxiety, a multi-dose regimen may yield more effective results. Future experiments should evaluate a multi-dose or prophylactic regimen. The timing of administration, such as multidose or prophylaxis, may yield different results. It is known that some treatments of PTSD (i.e. antidepressants) may require an extended period of time to affect neurobehavior. Future studies of THP and L-Th may utilize our current validated model with an extended dosing period, to obtain steady state for the period of time needed to alter neurobehavior.

Significance of Study or Project Results to Military Nursing

PTSD is a devastating, debilitating, and costly neuropathologic outcome of war. It is critical that nurses and other health care professionals investigate treatments to ameliorate the neurobehavioral sequelae from PTSD. While the results in this study showed no significant difference between rats, it validated the theoretic framework and PTSD Disease Induction Model. This model will be useful in future research applications. The neurobehavioral data gleaned from this study and future studies is critically important for the translation of bench research to clinical research in moving towards optimizing the treatment of patients with PTSD.

This proposal assists military nurses and other health care personnel in expanding their understanding of the neurobehavioral and basic physiologic and cellular mechanisms responsible for PTSD. Understanding new developments in behavioral and molecular neuroscience is not only fundamental, but relevant to the development of new and innovative treatments or therapies of PTSD in troops, veterans, and family members under the care of the Military Nurse Corps. PTSD and its treatment are unique to the military and critical to the health of military personnel.

Although this was an animal study in the basic sciences and not generalizable to the human population, these data can be used as part of the foundation of our sciences and building blocks of our practice. The next step to consider in clarifying the molecular mechanism of PTSD may be to characterize PTSD-induced changes to the rat proteome. Changes in mRNA expression are often linked to changes in protein expression, but not in a predictable manner. Small changes in mRNA expression can lead to variable changes in corresponding protein expression. We propose repeating the current experiment using protein assay methods to correlate changes in mRNA expression with changes in protein expression induced by PTSD and the effects of THP, L-Th, and midazolam on these changes.

Future studies of THP and L-Th may utilize our current validated model with an extended dosing period to obtain steady state for the period of time needed to alter neurobiology. The meticulous study of the neurobiological effects of THP and L-Th may further define the mechanism of action of these supplements, enabling future research to be more focused.

Principal Investigator: Ceremuga, Thomas COL (Ret)

USU Project Number: N10-P12

Changes in Clinical Practice, Leadership, Management, Education, Policy, and/or Military Doctrine that Resulted from Study or Project

None

References Cited

Total References Used in the Four Manuscripts Submitted Below:

1. Ceremuga, T., Bentley, M., Shellabarger, P., Persson, T., Fanning, M., Robinson, D., Bertsch, S., Kunz, B., Ceremuga, G. Effects of Tetrahydropalmatine (THP) on PTSD-induced Changes in Rat Brain Gene Expression, *International Journal of Neuroscience*, submitted - in review September 2013.
2. Ceremuga, T., Bentley, M., Anderson, R., Frye, P., Duvall, C., Maan, J., Manjarres, C., Petsche, J., Ceremuga, G. Effects of Tetrahydropalmatine (THP) on PTSD-induced Changes in Rat Neurobehavior, *Holistic Nursing Practice*, submitted - in review August 2013.
3. Ceremuga, T., Bentley, M., Wolfe, J., Baldwin, S., Onstott, T., Aytes, K., Ferrara, B., Alleyn, M., Fortner, C., Ceremuga, G., Padron, G. Effects of L-Theanine on PTSD-induced Changes in Rat Neurobehavior, *Scientifica*, submitted - in review August 2013.
4. Ceremuga, T., Bentley, M., Martinson, S., Washington, J., Revels, R., Wojcicki, J., Crawford D., Edwards, R., Kemper, J., Townsend, W., Ceremuga, G., Padron, G. Effects of L-theanine on Post Traumatic Stress Disorder Induced Changes in Rat Brain Gene Expression, *BMC Complementary and Alternative Medicine*, submitted - in review June 2013.
5. Kessler RC, Chiu WT, Demler O, Merikangas KR, Walters EE. Prevalence, severity, and comorbidity of 12-month DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of general psychiatry*. 2005;62(6):617-27. Epub 2005/06/09. doi: 10.1001/archpsyc.62.6.617. PubMed PMID: 15939839; PubMed Central PMCID: PMCPMC2847357.
6. Analysis of VA Health Care Utilization among Operation
7. Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and Operation New Dawn (OND) Veterans. Department of Veterans Affairs, March 2012. Report No.: 1st Qtr FY 2013.
8. Del Gaizo AL, Elhai JD, Weaver TL. Posttraumatic stress disorder, poor physical health and substance use behaviors in a national trauma-exposed sample. *Psychiatry research*. 2011;188(3):390-5. Epub 2011/04/13. doi: 10.1016/j.psychres.2011.03.016. PubMed PMID: 21481478.
9. Logrip ML, Zorrilla EP, Koob GF. Stress modulation of drug self-administration: implications for addiction comorbidity with post-traumatic stress disorder. *Neuropharmacology*. 2012;62(2):552-64. doi: 10.1016/j.neuropharm.2011.07.007. PubMed PMID: 21782834.
10. Pitman RK, Shin LM, Rauch SL. Investigating the pathogenesis of posttraumatic stress disorder with neuroimaging. *The Journal of clinical psychiatry*. 2001;62 Suppl 17:47-54. Epub 2001/08/10. PubMed PMID: 11495097.
11. Fuchs E, Flugge G, Czeh B. Remodeling of neuronal networks by stress. *Frontiers in bioscience : a journal and virtual library*. 2006;11:2746-58. Epub 2006/05/25. PubMed PMID: 16720347.
12. Ursano RJ, Zhang L, Li H, Johnson L, Carlton J, Fullerton CS, et al. PTSD and traumatic stress from gene to community and bench to bedside. *Brain research*. 2009;1293:2-12. Epub 2009/03/31. doi: 10.1016/j.brainres.2009.03.030. PubMed PMID: 19328776.
13. Tanielian T. Invisible wounds of war : psychological and cognitive injuries, their consequences, and services to assist recovery. 1776 Main Street, P.O. Box 2138, Santa Monica, CA 90407-2138: RAND Corporation; 2008.
14. Bent S. Herbal medicine in the United States: review of efficacy, safety, and regulation: grand rounds at University of California, San Francisco Medical Center. *Journal of general internal medicine*. 2008;23(6):854-9. Epub 2008/04/17. doi: 10.1007/s11606-008-0632-y. PubMed PMID: 18415652; PubMed Central PMCID: PMCPMC2517879.
15. Liu X, Yang Z, Li R, Xie J, Yin Q, Bloom AS, et al. Responses of dopaminergic, serotonergic and noradrenergic networks to acute levo-tetrahydropalmatine administration in naive rats detected at 9.4 T. *Magnetic Resonance Imaging*. 2012;30(2):261-70. doi: 10.1016/j.mri.2011.09.006. PubMed PMID: 22079072; PubMed Central PMCID: PMCPMC3402210.
16. Han Y, Zhang W, Tang Y, Bai W, Yang F, Xie L, et al. l-Tetrahydropalmatine, an active component of *Corydalis yanhusuo* W.T. Wang, protects against myocardial ischaemia-reperfusion injury in rats. *PloS one*. 2012;7(6):e38627. Epub 2012/06/21. doi: 10.1371/journal.pone.0038627. PubMed PMID: 22715398; PubMed Central PMCID: PMCPMC3371051.
17. Henkes H, Franz M, Kendall O, Monroe J, Legaspi A, LeDoux J, et al. Evaluation of the anxiolytic properties of tetrahydropalmatine, a *Corydalis yanhusuo* compound, in the male Sprague-Dawley rat. *AANA journal*. 2011;79(4 Suppl):S75-80. Epub 2012/03/13. PubMed PMID: 22403971.

18. Chen Y, Cao Y, Xie Y, Zhang X, Yang Q, Li X, et al. Traditional Chinese medicine for the treatment of primary dysmenorrhea: How do Yuanhu painkillers effectively treat dysmenorrhea? *Phytomedicine : international journal of phytotherapy and phytopharmacology*. 2013;20(12):1095-104. Epub 2013/06/29. doi: 10.1016/j.phymed.2013.05.003. PubMed PMID: 23806889.
19. Cao FL, Shang GW, Wang Y, Yang F, Li CL, Chen J. Antinociceptive effects of intragastric DL-tetrahydropalmatine on visceral and somatic persistent nociception and pain hypersensitivity in rats. *Pharmacology, biochemistry, and behavior*. 2011;100(1):199-204. Epub 2011/09/06. doi: 10.1016/j.pbb.2011.08.016. PubMed PMID: 21889526.
20. Lin MT, Wang JJ, Young MS. The protective effect of dl-tetrahydropalmatine against the development of amygdala kindling seizures in rats. *Neuroscience letters*. 2002;320(3):113-6. Epub 2002/02/20. PubMed PMID: 11852175.
21. Servatius RJ, Ottenweller JE, Natelson BH. Delayed startle sensitization distinguishes rats exposed to one or three stress sessions: further evidence toward an animal model of PTSD. *Biological psychiatry*. 1995;38(8):539-46. Epub 1995/10/15. doi: 10.1016/0006-3223(94)00369-e. PubMed PMID: 8562666.
22. Heffner TG, Hartman JA, Seiden LS. A rapid method for the regional dissection of the rat brain. *Pharmacology, biochemistry, and behavior*. 1980;13(3):453-6. Epub 1980/09/01. PubMed PMID: 7422701.
23. Rat Neurotransmitter Receptors PCR Array: SABiosciences; [9/15/2013]. Available from: http://www.sabiosciences.com/rt_pcr_product/HTML/PARN-060Z.html.
24. Zhang L, Li H, Su TP, Barker JL, Maric D, Fullerton CS, et al. p11 is up-regulated in the forebrain of stressed rats by glucocorticoid acting via two specific glucocorticoid response elements in the p11 promoter. *Neuroscience*. 2008;153(4):1126-34. Epub 2008/04/29. doi: 10.1016/j.neuroscience.2008.03.022. PubMed PMID: 18440154.
25. Jiang X, Xing G, Yang C, Verma A, Zhang L, Li H. Stress impairs 5-HT2A receptor-mediated serotonergic facilitation of GABA release in juvenile rat basolateral amygdala. *Neuropsychopharmacology : official publication of the American College of Neuropsychopharmacology*. 2009;34(2):410-23. Epub 2008/06/10. doi: 10.1038/npp.2008.71. PubMed PMID: 18536707.
26. Miller LJ. Prazosin for the treatment of posttraumatic stress disorder sleep disturbances. *Pharmacotherapy*. 2008;28(5):656-66. Epub 2008/05/02. doi: 10.1592/phco.28.5.656. PubMed PMID: 18447662.
27. Kozlovsky N, Matar MA, Kaplan Z, Zohar J, Cohen H. A distinct pattern of intracellular glucocorticoid-related responses is associated with extreme behavioral response to stress in an animal model of post-traumatic stress disorder. *European neuropsychopharmacology: the journal of the European College of Neuropsychopharmacology*. 2009;19(11):759-71. Epub 2009/05/26. doi: 10.1016/j.euroneuro.2009.04.009. PubMed PMID: 19464153.
28. Cohen J. *Statistical Power Analysis for the Behavior Sciences*. 2nd ed: Lawrence Erlbaum Associates; 1988.
29. Zintzaras E. Gamma-aminobutyric acid A receptor, alpha-2 (GABRA2) variants as individual markers for alcoholism: a meta-analysis. *Psychiatric genetics*. 2012;22(4):189-96. Epub 2012/05/05. doi: 10.1097/YPG.0b013e328353ae53. PubMed PMID: 22555154.
30. Bauer LO, Yang BZ, Houston RJ, Kranzler HR, Gelernter J. GABRA2 genotype, impulsivity, and body mass. *The American journal on addictions / American Academy of Psychiatrists in Alcoholism and Addictions*. 2012;21(5):404-10. Epub 2012/08/14. doi: 10.1111/j.1521-0391.2012.00252.x. PubMed PMID: 22882390.
31. Nelson EC, Agrawal A, Pergadia ML, Lynskey MT, Todorov AA, Wang JC, et al. Association of childhood trauma exposure and GABRA2 polymorphisms with risk of posttraumatic stress disorder in adults. *Molecular psychiatry*. 2009;14(3):234-5. doi: 10.1038/mp.2008.81. PubMed PMID: 19229201.
32. Maselli RA, Arredondo J, Cagney O, Mozaffar T, Skinner S, Yousif S, et al. Congenital myasthenic syndrome associated with epidermolysis bullosa caused by homozygous mutations in PLEC1 and CHRNE. *Clinical genetics*. 2011;80(5):444-51. Epub 2010/12/24. doi: 10.1111/j.1399-0004.2010.01602.x. PubMed PMID: 21175599.
33. Hoda JC, Wanischek M, Bertrand D, Steinlein OK. Pleiotropic functional effects of the first epilepsy-associated mutation in the human CHRNA2 gene. *FEBS letters*. 2009;583(10):1599-604. Epub 2009/04/23. doi: 10.1016/j.febslet.2009.04.024. PubMed PMID: 19383498.
34. Heitjan DF, Guo M, Ray R, Wileyto EP, Epstein LH, Lerman C. Identification of pharmacogenetic markers in smoking cessation therapy. *American journal of medical genetics Part B, Neuropsychiatric genetics : the official publication of the International Society of Psychiatric Genetics*. 2008;147B(6):712-9. Epub 2008/01/01. doi: 10.1002/ajmg.b.30669. PubMed PMID: 18165968; PubMed Central PMCID: PMC2655206.

35. Kim J. Association of CHRNA2 polymorphisms with overweight/obesity and clinical characteristics in a Korean population. *Clinical chemistry and laboratory medicine : CCLM / FESCC*. 2008;46(8):1085-9. Epub 2008/07/01. doi: 10.1515/cclm.2008.230. PubMed PMID: 18588430.
36. Le Maitre TW, Xia S, Le Maitre E, Dun XP, Lu J, Theodorsson E, et al. Galanin receptor 2 overexpressing mice display an antidepressive-like phenotype: possible involvement of the subiculum. *Neuroscience*. 2011;190:270-88. Epub 2011/06/16. doi: 10.1016/j.neuroscience.2011.05.015. PubMed PMID: 21672612.
37. Hoft NR, Corley RP, McQueen MB, Huizinga D, Menard S, Ehringer MA. SNPs in CHRNA6 and CHRN3 are associated with alcohol consumption in a nationally representative sample. *Genes, brain, and behavior*. 2009;8(6):631-7. Epub 2009/06/09. doi: 10.1111/j.1601-183X.2009.00495.x. PubMed PMID: 19500157; PubMed Central PMCID: PMC2880622.
38. Calabresi P, Di Filippo M. ACh/dopamine crosstalk in motor control and reward: a crucial role for alpha 6-containing nicotinic receptors? *Neuron*. 2008;60(1):4-7. Epub 2008/10/23. doi: 10.1016/j.neuron.2008.09.031. PubMed PMID: 18940582.
39. Zhao X, Seese RR, Yun K, Peng T, Wang Z. The role of galanin system in modulating depression, anxiety, and addiction-like behaviors after chronic restraint stress. *Neuroscience*. 2013;246:82-93. Epub 2013/05/04. doi: 10.1016/j.neuroscience.2013.04.046. PubMed PMID: 23639882.
40. McGhee LL, Maani CV, Garza TH, DeSocio PA, Gaylord KM, Black IH. The relationship of intravenous midazolam and posttraumatic stress disorder development in burned soldiers. *The Journal of trauma*. 2009;66(4 Suppl):S186-90. Epub 2009/06/12. doi: 10.1097/TA.0b013e31819ce2f0. PubMed PMID: 19359964.
41. Saccone NL, Saccone SF, Hinrichs AL, Stitzel JA, Duan W, Pergadia ML, et al. Multiple distinct risk loci for nicotine dependence identified by dense coverage of the complete family of nicotinic receptor subunit (CHRN) genes. *American journal of medical genetics Part B, Neuropsychiatric genetics : the official publication of the International Society of Psychiatric Genetics*. 2009;150B(4):453-66. Epub 2009/03/05. doi: 10.1002/ajmg.b.30828. PubMed PMID: 19259974; PubMed Central PMCID: PMC2693307.
42. Bremner JD, Licinio J, Darnell A, Krystal JH, Owens MJ, Southwick SM, et al. Elevated CSF corticotropin-releasing factor concentrations in posttraumatic stress disorder. *The American journal of psychiatry*. 1997;154(5):624-9. Epub 1997/05/01. PubMed PMID: 9137116; PubMed Central PMCID: PMC2323756.
43. Kellner M, Wiedemann K, Yassouridis A, Levengood R, Guo LS, Holsboer F, et al. Behavioral and endocrine response to cholecystokinin tetrapeptide in patients with posttraumatic stress disorder. *Biological psychiatry*. 2000;47(2):107-11. Epub 2000/02/09. PubMed PMID: 10664826.
44. English BA, Hahn MK, Gizer IR, Mazei-Robison M, Steele A, Kurnik DM, et al. Choline transporter gene variation is associated with attention-deficit hyperactivity disorder. *Journal of neurodevelopmental disorders*. 2009;1(4):252-63. Epub 2009/12/01. doi: 10.1007/s11689-009-9033-8. PubMed PMID: 21547719; PubMed Central PMCID: PMC23164006.
45. Yang HY, Tao T, Iadarola MJ. Modulatory role of neuropeptide FF system in nociception and opiate analgesia. *Neuropeptides*. 2008;42(1):1-18. Epub 2007/09/15. doi: 10.1016/j.npep.2007.06.004. PubMed PMID: 17854890.
46. Caspi A, McClay J, Moffitt TE, Mill J, Martin J, Craig IW, et al. Role of genotype in the cycle of violence in maltreated children. *Science (New York, NY)*. 2002;297(5582):851-4. Epub 2002/08/06. doi: 10.1126/science.1072290. PubMed PMID: 12161658.
47. Miller BH, Schultz LE, Long BC, Pletcher MT. Quantitative trait locus analysis identifies Gabra3 as a regulator of behavioral despair in mice. *Mammalian genome : official journal of the International Mammalian Genome Society*. 2010;21(5-6):247-57. Epub 2010/06/01. doi: 10.1007/s00335-010-9266-6. PubMed PMID: 20512339; PubMed Central PMCID: PMC2890984.
48. Massat I, Souery D, Del-Favero J, Oruc L, Noethen MM, Blackwood D, et al. Excess of allele1 for alpha3 subunit GABA receptor gene (GABRA3) in bipolar patients: a multicentric association study. *Molecular psychiatry*. 2002;7(2):201-7. Epub 2002/02/13. doi: 10.1038/sj.mp.4000953. PubMed PMID: 11840313.
49. Fukusumi S, Yoshida H, Fujii R, Maruyama M, Komatsu H, Habata Y, et al. A new peptidic ligand and its receptor regulating adrenal function in rats. *The Journal of biological chemistry*. 2003;278(47):46387-95. Epub 2003/09/10. doi: 10.1074/jbc.M305270200. PubMed PMID: 12960173.
50. Anguelova M, Benkelfat C, Turecki G. A systematic review of association studies investigating genes coding for serotonin receptors and the serotonin transporter: II. Suicidal behavior. *Molecular psychiatry*. 2003;8(7):646-53. Epub 2003/07/23. doi: 10.1038/sj.mp.4001336. PubMed PMID: 12874600.

51. Jakubczyk A, Klimkiewicz A, Kopera M, Krasowska A, Wrzosek M, Matsumoto H, et al. The CC genotype in the T102C HTR2A polymorphism predicts relapse in individuals after alcohol treatment. *Journal of psychiatric research*. 2013;47(4):527-33. Epub 2013/01/17. doi: 10.1016/j.jpsychires.2012.12.004. PubMed PMID: 23321485; PubMed Central PMCID: PMC3581721.
52. Choi MJ, Lee HJ, Lee HJ, Ham BJ, Cha JH, Ryu SH, et al. Association between major depressive disorder and the -1438A/G polymorphism of the serotonin 2A receptor gene. *Neuropsychobiology*. 2004;49(1):38-41. Epub 2004/01/20. doi: 10.1159/000075337. PubMed PMID: 14730199.
53. Hu X, Li Y, Hu Z, Rudd JA, Ling S, Jiang F, et al. The alteration of 5-HT(2A) and 5-HT(2C) receptors is involved in neuronal apoptosis of goldfish cerebellum following traumatic experience. *Neurochemistry international*. 2012;61(2):207-18. Epub 2012/05/09. doi: 10.1016/j.neuint.2012.04.022. PubMed PMID: 22561958.
54. George SA, Knox D, Curtis AL, Aldridge JW, Valentino RJ, Liberzon I. Altered locus coeruleus-norepinephrine function following single prolonged stress. *The European journal of neuroscience*. 2013;37(6):901-9. Epub 2013/01/03. doi: 10.1111/ejn.12095. PubMed PMID: 23279008.
55. Markett S, Montag C, Reuter M. The nicotinic acetylcholine receptor gene CHRNA4 is associated with negative emotionality. *Emotion (Washington, DC)*. 2011;11(2):450-5. Epub 2011/04/20. doi: 10.1037/a0021784. PubMed PMID: 21500914.
56. Massi M, Panocka I, de Caro G. The psychopharmacology of tachykinin NK-3 receptors in laboratory animals. *Peptides*. 2000;21(11):1597-609. Epub 2000/11/25. PubMed PMID: 11090913.
57. Laurent P, Becker JA, Valverde O, Ledent C, de Kerchove d'Exaerde A, Schiffmann SN, et al. The prolactin-releasing peptide antagonizes the opioid system through its receptor GPR10. *Nature neuroscience*. 2005;8(12):1735-41. Epub 2005/11/22. doi: 10.1038/nn1585. PubMed PMID: 16299503.
58. Doze VA, Papay RS, Goldenstein BL, Gupta MK, Collette KM, Nelson BW, et al. Long-term alpha1A-adrenergic receptor stimulation improves synaptic plasticity, cognitive function, mood, and longevity. *Molecular pharmacology*. 2011;80(4):747-58. Epub 2011/07/28. doi: 10.1124/mol.111.073734. PubMed PMID: 21791575; PubMed Central PMCID: PMC3187532.
59. Booker TK, Butt CM, Wehner JM, Heinemann SF, Collins AC. Decreased anxiety-like behavior in beta3 nicotinic receptor subunit knockout mice. *Pharmacology, biochemistry, and behavior*. 2007;87(1):146-57. Epub 2007/05/19. doi: 10.1016/j.pbb.2007.04.011. PubMed PMID: 17509676.
60. Joseph A, Tang M, Mamiya T, Chen Q, Yang LL, Jiao J, et al. Temporal association of elevated cholecystokinergic tone and adolescent trauma is critical for posttraumatic stress disorder-like behavior in adult mice. *Proceedings of the National Academy of Sciences of the United States of America*. 2013;110(16):6589-94. Epub 2013/04/12. doi: 10.1073/pnas.1219601110. PubMed PMID: 23576730; PubMed Central PMCID: PMC3631685.
61. Feng Y, Kapornai K, Kiss E, Tamas Z, Mayer L, Baji I, et al. Association of the GABRD gene and childhood-onset mood disorders. *Genes, brain, and behavior*. 2010;9(6):668-72. Epub 2010/06/22. doi: 10.1111/j.1601-183X.2010.00598.x. PubMed PMID: 20561060; PubMed Central PMCID: PMC2935687.
62. Ray LA, Hutchison KE. Associations among GABRG1, level of response to alcohol, and drinking behaviors. *Alcoholism, clinical and experimental research*. 2009;33(8):1382-90. Epub 2009/05/12. doi: 10.1111/j.1530-0277.2009.00968.x. PubMed PMID: 19426171; PubMed Central PMCID: PMC2965732.
63. Wiechelt SA, Miller BA, Smyth NJ, Maguin E. Associations Between Post-Traumatic Stress Disorder Symptoms and Alcohol and Other Drugs Problems: Implications for Social Work Practice. *Practice (Birmingham, England)*. 2011;23(4):183-99. doi: 10.1080/09503153.2011.597200. PubMed PMID: 22116740.
64. NCBI. Gene Database 2013. Available from: <http://www.ncbi.nlm.nih.gov/gene/>.
65. Friedman M: PTSD History and Overview. In., January 31, 2007 edn. The National Center for PTSD: Department of Veterans Affairs; 2007.
66. Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery [http://www.cgi.rand.org/pubs/research_briefs/2008/RAND_RB9336.pdf]
67. Fischer H: U.S. Military Casualty Statistics: Operation New Dawn, Operation Iraqi Freedom, and Operation Enduring Freedom. In. Edited by Service CR; 2013.
68. VA: Analysis of VA health care utilization among Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF), and Operation New Dawn (OND) veterans - revised. In. Edited by Affairs DoV; 2012.
69. Zhang L, Zhou R, Xing G, Hough CJ, Li X, Li H: Identification of gene markers based on well validated and subcategorized stressed animals for potential clinical applications in PTSD. *Med Hypotheses* 2006, 66(2):309-314.

70. Bent S: Herbal medicine in the United States: review of efficacy, safety, and regulation: grand rounds at University of California, San Francisco Medical Center. *J Gen Intern Med* 2008, 23(6):854-859.
71. Juneja LR, Chu D-C, Okubo T, Nagato Y, Yokogoshi H: L-theanine--a unique amino acid of green tea and its relaxation effect in humans. *Trends in Food Science & Technology* 1999, 10:199-204.
72. Eschenauer G, Sweet BV: Pharmacology and therapeutic uses of theanine. *Am J Health Syst Pharm* 2006, 63(1):26, 28-30.
73. Lu K, Gray MA, Oliver C, Liley DT, Harrison BJ, Bartholomeusz CF, Phan KL, Nathan PJ: The acute effects of L-theanine in comparison with alprazolam on anticipatory anxiety in humans. *Hum Psychopharmacol* 2004, 19(7):457-465.
74. Heese T, Jenkinson J, Love C, Milam R, Perkins L, Adams C, McCall S, Ceremuga TE: Anxiolytic effects of L-theanine--a component of green tea--when combined with midazolam, in the male Sprague-Dawley rat. *Aana J* 2009, 77(6):445-449.
75. Liberzon I, Martis B: Neuroimaging studies of emotional responses in PTSD. *Ann N Y Acad Sci* 2006, 1071:87-109.
76. Pitman RK, Shin LM, Rauch SL: Investigating the pathogenesis of posttraumatic stress disorder with neuroimaging. *J Clin Psychiatry* 2001, 62 Suppl 17:47-54.
77. Ursano RJ, Zhang L, Li H, Johnson L, Carlton J, Fullerton CS, Benedek DM: PTSD and traumatic stress from gene to community and bench to bedside. *Brain Res* 2009, 1293:2-12.
78. Sugiyama T, Sadzuka Y: Combination of theanine with doxorubicin inhibits hepatic metastasis of M5076 ovarian sarcoma. *Clin Cancer Res* 1999, 5(2):413-416.
79. Servatius RJ, Ottenweller JE, Natelson BH: Delayed startle sensitization distinguishes rats exposed to one or three stress sessions: further evidence toward an animal model of PTSD. *Biol Psychiatry* 1995, 38(8):539-546.
80. Heffner TG, Hartman JA, Seiden LS: A rapid method for the regional dissection of the rat brain. *Pharmacol Biochem Behav* 1980, 13(3):453-456.
81. Kozlovsky N, Matar MA, Kaplan Z, Zohar J, Cohen H: A distinct pattern of intracellular glucocorticoid-related responses is associated with extreme behavioral response to stress in an animal model of post-traumatic stress disorder. *Eur Neuropsychopharmacol* 2009, 19(11):759-771.
82. Rat Neurotransmitter Receptors and Regulators PCR Array [http://www.sabiosciences.com/rt_pcr_product/HTML/PARN-060A.html]
83. Zhang L, Li H, Su TP, Barker JL, Maric D, Fullerton CS, Webster MJ, Hough CJ, Li XX, Ursano R: p11 is up-regulated in the forebrain of stressed rats by glucocorticoid acting via two specific glucocorticoid response elements in the p11 promoter. *Neuroscience* 2008, 153(4):1126-1134.
84. Jiang X, Xing G, Yang C, Verma A, Zhang L, Li H: Stress impairs 5-HT_{2A} receptor-mediated serotonergic facilitation of GABA release in juvenile rat basolateral amygdala. *Neuropsychopharmacology* 2009, 34(2):410-423.
85. Manion ST, Gamble EH, Li H: Prazosin administered prior to inescapable stressor blocks subsequent exaggeration of acoustic startle response in rats. *Pharmacol Biochem Behav* 2007, 86(3):559-565.
86. Miller LJ: Prazosin for the treatment of posttraumatic stress disorder sleep disturbances. *Pharmacotherapy* 2008, 28(5):656-666.
87. Raskind MA, Peskind ER, Hoff DJ, Hart KL, Holmes HA, Warren D, Shofer J, O'Connell J, Taylor F, Gross C et al: A parallel group placebo controlled study of prazosin for trauma nightmares and sleep disturbance in combat veterans with post-traumatic stress disorder. *Biol Psychiatry* 2007, 61(8):928-934.
88. Cohen J: Statistical power analysis for the behavioral sciences, 2nd edn. Hillsdale, N.J.: L. Erlbaum Associates; 1988.
89. Davis S, Bozon, B., & Laroche, S. : How Necessary Is The Activation Of The Immediate Early Gene Zif268 In Synaptic Plasticity And Learning? *Behavioural Brain Research*, 2003, 147(1-2):17-30.
90. Knapska E, Kaczmarek L: A gene for neuronal plasticity in the mammalian brain: Zif268/Egr-1/NGFI-A/Krox-24/TIS8/ZENK? *Prog Neurobiol* 2004, 74(4):183-211.
91. Penke Z, Chagneau C, Laroche S: Contribution of Egr1/zif268 to Activity-Dependent Arc/Arg3.1 Transcription in the Dentate Gyrus and Area CA1 of the Hippocampus. *Front Behav Neurosci* 2011, 5:48.
92. Bortolato M, Chen K, Godar SC, Chen G, Wu W, Rebrin I, Farrell MR, Scott AL, Wellman CL, Shih JC: Social deficits and perseverative behaviors, but not overt aggression, in MAO-A hypomorphic mice. *Neuropsychopharmacology* 2011, 36(13):2674-2688.
93. Meyer-Lindenberg A, Buckholz JW, Kolachana B, A RH, Pezawas L, Blasi G, Wabnitz A, Honea R, Verchinski B, Callicott JH et al: Neural mechanisms of genetic risk for impulsivity and violence in humans. *Proceedings of the National Academy of Sciences of the United States of America* 2006, 103(16):6269-6274.

94. Svenningsson P, Chergui K, Rachleff I, Flajolet M, Zhang X, El Yacoubi M, Vaugeois JM, Nomikos GG, Greengard P: Alterations in 5-HT_{1B} receptor function by p11 in depression-like states. *Science* 2006, 311(5757):77-80.
95. Su TP, Zhang L, Chung MY, Chen YS, Bi YM, Chou YH, Barker JL, Barrett JE, Maric D, Li XX et al: Levels of the potential biomarker p11 in peripheral blood cells distinguish patients with PTSD from those with other major psychiatric disorders. *J Psychiatr Res* 2009, 43(13):1078-1085.
96. Zhang L, Su TP, Choi K, Maree W, Li CT, Chung MY, Chen YS, Bai YM, Chou YH, Barker JL et al: P11 (S100A10) as a potential biomarker of psychiatric patients at risk of suicide. *J Psychiatr Res* 2011, 45(4):435-441.
97. Zhao J, Bao AM, Qi XR, Kamphuis W, Luchetti S, Lou JS, Swaab DF: Gene expression of GABA and glutamate pathway markers in the prefrontal cortex of non-suicidal elderly depressed patients. *J Affect Disord* 2012, 138(3):494-502.
98. Hu Z, Neve, R., Guan, Y., & Gray, J. : Identification of new therapeutic targets of breast cancer using siRNA. AACR Meeting Abstracts Online 2007, 4956.
99. Blaveri E, Kelly F, Mallei A, Harris K, Taylor A, Reid J, Razzoli M, Carboni L, Piubelli C, Musazzi L et al: Expression profiling of a genetic animal model of depression reveals novel molecular pathways underlying depressive-like behaviours. *PLoS One* 2010, 5(9):e12596.
100. Ponomarev I, Rau V, Eger EI, Harris RA, Fanselow MS: Amygdala transcriptome and cellular mechanisms underlying stress-enhanced fear learning in a rat model of posttraumatic stress disorder. *Neuropsychopharmacology* 2010, 35(6):1402-1411.
101. Zhu X, Peng S, Zhang S, Zhang X: Stress-induced depressive behaviors are correlated with Par-4 and DRD2 expression in rat striatum. *Behav Brain Res* 2011, 223(2):329-335.
102. Lisowski P, Wieczorek M, Goscik J, Juszcak GR, Stankiewicz AM, Zwierzchowski L, Swiergiel AH: Effects of chronic stress on prefrontal cortex transcriptome in mice displaying different genetic backgrounds. *J Mol Neurosci* 2013, 50(1):33-57.
103. English BA, Hahn MK, Gizer IR, Mazei-Robison M, Steele A, Kurnik DM, Stein MA, Waldman ID, Blakely RD: Choline transporter gene variation is associated with attention-deficit hyperactivity disorder. *J Neurodev Disord* 2009, 1(4):252-263.
104. Sabunciyani S, Aryee MJ, Irizarry RA, Rongione M, Webster MJ, Kaufman WE, Murakami P, Lessard A, Yolken RH, Feinberg AP et al: Genome-wide DNA methylation scan in major depressive disorder. *PLoS One* 2012, 7(4):e34451.
105. Picciotto MR, Kenny PJ: Molecular mechanisms underlying behaviors related to nicotine addiction. *Cold Spring Harb Perspect Med* 2013, 3(1):a012112.
106. Iidaka T, Ozaki N, Matsumoto A, Nogawa J, Kinoshita Y, Suzuki T, Iwata N, Yamamoto Y, Okada T, Sadato N: A variant C178T in the regulatory region of the serotonin receptor gene HTR3A modulates neural activation in the human amygdala. *J Neurosci* 2005, 25(27):6460-6466.
107. Popova NK, Naumenko VS: 5-HT_{1A} receptor as a key player in the brain 5-HT system. *Rev Neurosci* 2013, 24(2):191-204.
108. Feng Y, Kapornai K, Kiss E, Tamas Z, Mayer L, Baji I, Daroczi G, Benak I, Kothencne VO, Dombovari E et al: Association of the GABRD gene and childhood-onset mood disorders. *Genes Brain Behav* 2010, 9(6):668-672.
109. Macdonald RL, Kang JQ, Gallagher MJ: Mutations in GABAA receptor subunits associated with genetic epilepsies. *J Physiol* 2010, 588(Pt 11):1861-1869.
110. Nakayama J: Progress in searching for the febrile seizure susceptibility genes. *Brain Dev* 2009, 31(5):359-365.
111. Chakrabarty K, Von Oerthel L, Hellemons A, Clotman F, Espana A, Groot Koerkamp M, Holstege FC, Pasterkamp RJ, Smidt MP: Genome wide expression profiling of the mesodiencephalic region identifies novel factors involved in early and late dopaminergic development. *Biol Open* 2012, 1(8):693-704.
112. Vaudel M, Sickmann A, Martens L: Current methods for global proteome identification. *Expert Rev Proteomics* 2012, 9(5):519-532.
113. Abatangelo L, Maglietta R, Distaso A, D'Addabbo A, Creanza TM, Mukherjee S, Ancona N: Comparative study of gene set enrichment methods. *BMC Bioinformatics* 2009, 10:275.
114. Shojaie A, Michailidis G: Network enrichment analysis in complex experiments. *Stat Appl Genet Mol Biol* 2010, 9:Article22.
115. Alexeyenko A, Lee W, Pernemalm M, Guegan J, Dessen P, Lazar V, Lehtio J, Pawitan Y: Network enrichment analysis: extension of gene-set enrichment analysis to gene networks. *BMC Bioinformatics* 2012, 13:226.

116. Gene Database [<http://www.ncbi.nlm.nih.gov/gene/>]
117. Katche C, Goldin A, Gonzalez C, Bekinschtein P, Medina JH: Maintenance of long-term memory storage is dependent on late posttraining Egr-1 expression. *Neurobiol Learn Mem* 2012, 98(3):220-227.
118. Chen ZY, Hotamisligil GS, Huang JK, Wen L, Ezzeddine D, Aydin-Muderrisoglu N, Powell JF, Huang RH, Breakefield XO, Craig I et al: Structure of the human gene for monoamine oxidase type A. *Nucleic Acids Res* 1991, 19(16):4537-4541.
119. Chlystun M MA: Structural and functional characteristics. *Biochemica et Biophysica Acta* 2004:141-149.
120. Hedhli N, Falcone DJ, Huang B, Cesarman-Maus G, Kraemer R, Zhai H, Tsirka SE, Santambrogio L, Hajjar KA: The annexin A2/S100A10 system in health and disease: emerging paradigms. *J Biomed Biotechnol* 2012, 2012:406273.
121. Mulligan MK, Wang X, Adler AL, Mozhui K, Lu L, Williams RW: Complex control of GABA(A) receptor subunit mRNA expression: variation, covariation, and genetic regulation. *PLoS One* 2012, 7(4):e34586.
122. Latendresse SJ, Bates JE, Goodnight JA, Lansford JE, Budde JP, Goate A, Dodge KA, Pettit GS, Dick DM: Differential susceptibility to adolescent externalizing trajectories: examining the interplay between CHRM2 and peer group antisocial behavior. *Child Dev* 2011, 82(6):1797-1814.
123. McLean PJ, Farb DH, Russek SJ: Mapping of the alpha 4 subunit gene (GABRA4) to human chromosome 4 defines an alpha 2-alpha 4-beta 1-gamma 1 gene cluster: further evidence that modern GABAA receptor gene clusters are derived from an ancestral cluster. *Genomics* 1995, 26(3):580-586.
124. Apparsundaram S, Ferguson SM, George AL, Jr., Blakely RD: Molecular cloning of a human, hemicholinium-3-sensitive choline transporter. *Biochem Biophys Res Commun* 2000, 276(3):862-867.
125. Duan J, Wainwright MS, Comeran JM, Saitou N, Sanders AR, Gelernter J, Gejman PV: Synonymous mutations in the human dopamine receptor D2 (DRD2) affect mRNA stability and synthesis of the receptor. *Hum Mol Genet* 2003, 12(3):205-216.
126. Xing B, Guo J, Meng X, Wei SG, Li SB: The dopamine D1 but not D3 receptor plays a fundamental role in spatial working memory and BDNF expression in prefrontal cortex of mice. *Behav Brain Res* 2012, 235(1):36-41.
127. Feng J, Craddock N, Jones IR, Cook EH, Jr., Goldman D, Heston LL, Peltonen L, DeLisi LE, Sommer SS: Systematic screening for mutations in the glycine receptor alpha2 subunit gene (GLRA2) in patients with schizophrenia and other psychiatric diseases. *Psychiatr Genet* 2001, 11(1):45-48.
128. Meyer EL, Yoshikami D, McIntosh JM: The neuronal nicotinic acetylcholine receptors alpha 4* and alpha 6* differentially modulate dopamine release in mouse striatal slices. *J Neurochem* 2008, 105(5):1761-1769.
129. Weiss B, Mertz A, Schrock E, Koenen M, Rappold G: Assignment of a human homolog of the mouse Htr3 receptor gene to chromosome 11q23.1-q23.2. *Genomics* 1995, 29(1):304-305.
130. Gallego X, Cox RJ, Laughlin JR, Stitzel JA, Ehringer MA: Alternative CHRNb4 3'-UTRs Mediate the Allelic Effects of SNP rs1948 on Gene Expression. *PLoS One* 2013, 8(5):e63699.
131. Sommer B, Poustka A, Spurr NK, Seeburg PH: The murine GABAA receptor delta-subunit gene: structure and assignment to human chromosome 1. *DNA Cell Biol* 1990, 9(8):561-568.
132. Perrier AL, Massoulie J, Krejci E: PRiMA: the membrane anchor of acetylcholinesterase in the brain. *Neuron* 2002, 33(2):275-285.
133. Eng CM, Kozak CA, Beaudet AL, Zoghbi HY: Mapping of multiple subunits of the neuronal nicotinic acetylcholine receptor to chromosome 15 in man and chromosome 9 in mouse. *Genomics* 1991, 9(2):278-282.
134. Shiner B, Drake, R. E., Watts, B. V., Desai, R. A., & Schnurr, P. P. Access to VA services for returning veterans with PTSD. *Mil Med.* 2012;177(7):814-822.
135. Ang-Lee MK, Moss J, Yuan CS. Herbal medicines and perioperative care. *Jama.* Jul 11 2001;286(2):208-216.
136. Jankowski K. PTSD and Physical Health. National Center for PTSD. 2010; <http://www.ptsd.va.gov/professional/pages/ptsd-physical-health.asp>.
137. American Psychiatric Association., American Psychiatric Association. Task Force on DSM-IV. Diagnostic and statistical manual of mental disorders : DSM-IV-TR. 4th , text revision. ed. Washington, DC: American Psychiatric Association; 2000.
138. Ursano RJ, Zhang L, Li H, et al. PTSD and traumatic stress from gene to community and bench to bedside. *Brain Res.* Oct 13 2009;1293:2-12.
139. Ursano RJ, Bell C, Eth S, et al. Practice guideline for the treatment of patients with acute stress disorder and posttraumatic stress disorder. *Am J Psychiatry.* Nov 2004;161(11 Suppl):3-31.
140. Benedek DF, M. Zatzick, D. Ursano, R. Guideline Watch (March 2009): Practice Guideline for the Treatment of Patients With Acute Stress Disorder and Posttraumatic Stress Disorder. 2009; <http://www.psychiatryonline.com/content.aspx?aID=156514>.

141. Nutt DJ, Malizia AL. New insights into the role of the GABA(A)-benzodiazepine receptor in psychiatric disorder. *Br J Psychiatry*. Nov 2001;179:390-396.
142. Shader RI, Greenblatt DJ. Use of benzodiazepines in anxiety disorders. *N Engl J Med*. May 13 1993;328(19):1398-1405.
143. Smith TC, Ryan MA, Smith B, et al. Complementary and alternative medicine use among US Navy and Marine Corps personnel. *BMC Complement Altern Med*. 2007;7:16.
144. McPherson F, Schwenka MA. Use of complementary and alternative therapies among active duty soldiers, military retirees, and family members at a military hospital. *Mil Med*. May 2004;169(5):354-357.
145. Eisenberg DM, Davis RB, Ettner SL, et al. Trends in alternative medicine use in the United States, 1990-1997: results of a follow-up national survey. *Jama*. Nov 11 1998;280(18):1569-1575.
146. Sabar R, Kaye AD, Frost EA. Perioperative considerations for the patient on herbal medicines. *Middle East J Anesthesiol*. Oct 2001;16(3):287-314.
147. Barnes P BB, Nahin R. National Health Statistics Reports. Complementary and Alternative Medicine Use among Adults and Children: United States, 2007. 2008; Number 12. December 10, 2008. http://nccam.nih.gov/news/camstats/2007/camsurvey_fs1.htm.
148. Lambert. The new ancient trend in medicine. *Harvard Magazine*. March-April 2002. 2008; <http://www.harvard-magazine.com/on-line/030221.html>.
149. Jointcommission. 2010; <http://www.jointcommission.org>, 2009.
150. Dorman T. Herbal medicine and anesthesia. *Curr Opin Anaesthesiol*. Dec 2001;14(6):667-669.
151. Kaye AD, Kucera I, Sabar R. Perioperative anesthesia clinical considerations of alternative medicines. *Anesthesiol Clin North America*. Mar 2004;22(1):125-139.
152. Lee A, Chui PT, Aun CS, Lau AS, Gin T. Incidence and risk of adverse perioperative events among surgical patients taking traditional Chinese herbal medicines. *Anesthesiology*. Sep 2006;105(3):454-461.
153. Hu J, Xie J, Zhang Y, Wang J, Chen R. [Effect of some drugs on electroacupuncture analgesia and cytosolic free Ca²⁺ concentration of mice brain]. *Zhen Ci Yan Jiu*. 1994;19(1):55-58.
154. Chang CK, Lin MT. DL-Tetrahydropalmatine may act through inhibition of amygdaloid release of dopamine to inhibit an epileptic attack in rats. *Neurosci Lett*. Jul 20 2001;307(3):163-166.
155. Lin MT, Wang JJ, Young MS. The protective effect of dl-tetrahydropalmatine against the development of amygdala kindling seizures in rats. *Neurosci Lett*. Mar 8 2002;320(3):113-116.
156. Chan P, Chiu WT, Chen YJ, Wu PJ, Cheng JT. Calcium influx inhibition: possible mechanism of the negative effect of tetrahydropalmatine on left ventricular pressure in isolated rat heart. *Planta Med*. May 1999;65(4):340-342.
157. Lin MT, Chueh FY, Hsieh MT, Chen CF. Antihypertensive effects of DL-tetrahydropalmatine: an active principle isolated from *Corydalis*. *Clin Exp Pharmacol Physiol*. Aug 1996;23(8):738-742.
158. Zhu XZ. Development of natural products as drugs acting on central nervous system. *Mem Inst Oswaldo Cruz*. 1991;86 Suppl 2:173-175.
159. Hong Z, Fan G, Le J, Chai Y, Yin X, Wu Y. Brain pharmacokinetics and tissue distribution of tetrahydropalmatine enantiomers in rats after oral administration of the racemate. *Biopharm Drug Dispos*. Apr 2006;27(3):111-117.
160. Chueh FY, Hsieh MT, Chen CF, Lin MT. DL-tetrahydropalmatine-produced hypotension and bradycardia in rats through the inhibition of central nervous dopaminergic mechanisms. *Pharmacology*. Oct 1995;51(4):237-244.
161. Henkes HF, M. Kendall, O. Monroe, J. Legaspi, A. LeDoux, J. Haese, W. Williams, D. McCall, S., Ceremuga TEJ, A. Evaluation of the Anxiolytic Properties of Tetrahydropalmatine (THP), a *Corydalis Yanhusuo* Compound, in the Male Sprague-Dawley Rat. submitted.
162. Zhang L, Zhou R, Xing G, Hough CJ, Li X, Li H. Identification of gene markers based on well validated and subcategorized stressed animals for potential clinical applications in PTSD. *Medical Hypotheses*. 2006;66(2):309-314.
163. Garrick T, Morrow N, Shalev AY, Eth S. Stress-induced enhancement of auditory startle: an animal model of posttraumatic stress disorder. *Psychiatry*. Winter 2001;64(4):346-354.
164. Servatius RJ, Ottenweller JE, Natelson BH. Delayed startle sensitization distinguishes rats exposed to one or three stress sessions: further evidence toward an animal model of PTSD. *Biol Psychiatry*. Oct 15 1995;38(8):539-546.
165. Servatius RJ, Beck KD, Moldow RL, Salameh G, Tumminello TP, Short KR. A stress-induced anxious state in male rats: corticotropin-releasing hormone induces persistent changes in associative learning and startle reactivity. *Biol Psychiatry*. Apr 15 2005;57(8):865-872.

166. Flood PD. The stressed-out rat: a model for anesthetic prevention of post-traumatic stress disorder. *Anesthesiology*. Mar 2009;110(3):447-448.
167. Wenk GL. Assessment of spatial memory using the radial arm maze and Morris water maze. *Current protocols in neuroscience / editorial board, Jacqueline N. Crawley ... [et al.]*. May 2004;Chapter 8:Unit 8 5A.
168. Falter U, Gower AJ, Gobert J. Resistance of baseline activity in the elevated plus-maze to exogenous influences. *Behav Pharmacol*. Apr 1992;3(2):123-128.
169. Lister RG. The use of a plus-maze to measure anxiety in the mouse. *Psychopharmacology (Berl)*. 1987;92(2):180-185.
170. Rosa VP, Vandresen N, Calixto AV, Kovaleski DF, Faria MS. Temporal analysis of the rat's behavior in the plus-maze: effect of midazolam. *Pharmacol Biochem Behav*. Sep 2000;67(1):177-182.
171. Treit D, Menard J, Royan C. Anxiogenic stimuli in the elevated plus-maze. *Pharmacol Biochem Behav*. Feb 1993;44(2):463-469.
172. Pellow S, Chopin P, File SE, Briley M. Validation of open:closed arm entries in an elevated plus-maze as a measure of anxiety in the rat. *J Neurosci Methods*. Aug 1985;14(3):149-167.
173. Frick KM, Stillner ET, Berger-Sweeney J. Mice are not little rats: species differences in a one-day water maze task. *Neuroreport*. Nov 9 2000;11(16):3461-3465.
174. Glaser D. Proposed Statistical Analysis for Grant Proposal: Effects of Herbal Supplement administration on PTSD-induced changes in Rodent Behavior and Brain Gene Expression. San Antonio February 24, 20102010.
175. Shepherd JK, Grewal SS, Fletcher A, Bill DJ, Dourish CT. Behavioural and pharmacological characterisation of the elevated "zero-maze" as an animal model of anxiety. *Psychopharmacology (Berl)*. Sep 1994;116(1):56-64.
176. Dremencov E, Nahshoni E, Levy D, et al. Dimensional complexity of the neuronal activity in a rat model of depression. *Neuroreport*. Aug 26 2004;15(12):1983-1986.
177. Gelenberg AJ, Chesen CL. How fast are antidepressants? *The Journal of clinical psychiatry*. Oct 2000;61(10):712-721.
178. Ang-Lee, M. K., Moss, J., & Yuan, C. S. (2001). Herbal medicines and perioperative care. *Jama*, 286(2), 208-216.
179. Brewin, C., Kleiner, J. S., Vasterling, J. J., & Field, A. P. (2007). Memory for emotionally neutral information in posttraumatic stress disorder: A meta-analytic investigation. *Journal of Abnormal Psychology*, 116(3), 448.
180. Castagne, V., Moser, P., Roux, S., & Porsolt, R. D. (2011). Rodent models of depression: forced swim and tail suspension behavioral despair tests in rats and mice. *Curr Protoc Neurosci*, Chapter 8, Unit 8 10A. doi: 10.1002/0471142301.ns0810as55
181. Charney, D., Micic, S., & Harris, R. Hypnotics and sedatives. In J. Hardman & L. Limbird (Eds.), *Goodman and Gillman's The Pharmacological Basis of Therapeutics* (pp. 399-427).
182. Dremencov, E., Gispán-Herman, I., Rosenstein, M., Mendelman, A., Overstreet, D. H., Zohar, J., et al. (2004). The serotonin-dopamine interaction is critical for fast-onset action of antidepressant treatment: in vivo studies in an animal model of depression. *Progress in Neuro-Psychopharmacology and Biological Psychiatry*, 28(1), 141-147.
183. Eschenauer, G., & Sweet, B. V. (2006). Pharmacology and therapeutic uses of theanine. *Am J Health Syst Pharm*, 63(1), 26, 28-30. doi: 10.2146/ajhp050148
184. Falter, U., Gower, A. J., & Gobert, J. (1992). Resistance of baseline activity in the elevated plus-maze to exogenous influences. *Behav Pharmacol*, 3(2), 123-128.
185. Frick, K. M., Stillner, E. T., & Berger-Sweeney, J. (2000). Mice are not little rats: species differences in a one-day water maze task. [Comparative Study
186. Research Support, U.S. Gov't, Non-P.H.S.
187. Research Support, U.S. Gov't, P.H.S.]. *Neuroreport*, 11(16), 3461-3465.
188. Garrick, T., Morrow, N., Shalev, A. Y., & Eth, S. (2001). Stress-induced enhancement of auditory startle: an animal model of posttraumatic stress disorder. [Research Support, U.S. Gov't, Non-P.H.S.]. *Psychiatry*, 64(4), 346-354.
189. Gelenberg, A. J., & Chesen, C. L. (2000). How fast are antidepressants? [Research Support, Non-U.S. Gov't
190. Review]. *J Clin Psychiatry*, 61(10), 712-721.
191. Gootzeit, J., & Markon, K. (2011). Factors of PTSD: differential specificity and external correlates. [Meta-Analysis]. *Clin Psychol Rev*, 31(6), 993-1003. doi: 10.1016/j.cpr.2011.06.005
192. Heese, T., Jenkinson, J., Love, C., Milam, R., Perkins, L., Adams, C., et al. (2009). Anxiolytic effects of L-theanine--a component of green tea--when combined with midazolam, in the male Sprague-Dawley rat. *Aana J*, 77(6), 445-449.

193. Hung, S. K., & Ernst, E. (2010). Herbal medicine: an overview of the literature from three decades. [Research Support, Non-U.S. Gov't]. *J Diet Suppl*, 7(3), 217-226. doi: 10.3109/19390211.2010.487818
194. Jankowski, K. (2010). PTSD and Physical Health. National Center for PTSD., from <http://www.ptsd.va.gov/professional/pages/ptsd-physical-health.asp>
195. Juneja, L. R., Chu, D.-C., Okubo, T., Nagato, Y., & Yokogoshi, H. (1999). L-Theanine- a unique amino acid of green tea and its relaxation effect in humans. *Trends in Food Science & Technology*, 10(6), 199-204.
196. Lister, R. G. (1987). The use of a plus-maze to measure anxiety in the mouse. *Psychopharmacology (Berl)*, 92(2), 180-185.
197. Lu, K., Gray, M. A., Oliver, C., Liley, D. T., Harrison, B. J., Bartholomeusz, C. F., et al. (2004). The acute effects of L-theanine in comparison with alprazolam on anticipatory anxiety in humans. *Hum Psychopharmacol*, 19(7), 457-465.
198. Montgomery, K. C. (1955). The relation between fear induced by novel stimulation and exploratory behavior. *J Comp Physiol Psychol*, 48(4), 254-260.
199. Pellow, S., Chopin, P., File, S. E., & Briley, M. (1985). Validation of open:closed arm entries in an elevated plus-maze as a measure of anxiety in the rat. *J Neurosci Methods*, 14(3), 149-167.
200. Porsolt, R. D., Bertin, A., & Jalfre, M. (1978). "Behavioural despair" in rats and mice: strain differences and the effects of imipramine. *Eur J Pharmacol*, 51(3), 291-294.
201. Porsolt, R. D., Le Pichon, M., & Jalfre, M. (1977). Depression: a new animal model sensitive to antidepressant treatments. *Nature*, 266(5604), 730-732.
202. Roan, S. (2009). L-Theanine comes into focus, Los Angeles Times. Retrieved from <http://articles.latimes.com/2009/may/04/health/he-theanine4>
203. Rosa, V. P., Vandresen, N., Calixto, A. V., Kovaleski, D. F., & Faria, M. S. (2000). Temporal analysis of the rat's behavior in the plus-maze: effect of midazolam. *Pharmacol Biochem Behav*, 67(1), 177-182.
204. Servatius, R. J., Ottenweller, J. E., & Natelson, B. H. (1995). Delayed startle sensitization distinguishes rats exposed to one or three stress sessions: further evidence toward an animal model of PTSD. *Biol Psychiatry*, 38(8), 539-546.
205. Shepherd, J. K., Grewal, S. S., Fletcher, A., Bill, D. J., & Dourish, C. T. (1994). Behavioural and pharmacological characterisation of the elevated "zero-maze" as an animal model of anxiety. *Psychopharmacology (Berl)*, 116(1), 56-64.
206. Shiner, B., Drake, R. E., Watts, B. V., Desai, R. A., & Schnurr, P. P. (2012). Access to VA services for returning veterans with PTSD. [Research Support, Non-U.S. Gov't
207. Review]. *Mil Med*, 177(7), 814-822.
208. Sugiyama, T., & Sadzuka, Y. (1999). Combination of theanine with doxorubicin inhibits hepatic metastasis of M5076 ovarian sarcoma. *Clin Cancer Res*, 5(2), 413-416.
209. Taylor, M. J., Freemantle, N., Geddes, J. R., & Bhagwagar, Z. (2006). Early onset of selective serotonin reuptake inhibitor antidepressant action: systematic review and meta-analysis. [Meta-Analysis
210. Research Support, Non-U.S. Gov't
211. Review]. *Arch Gen Psychiatry*, 63(11), 1217-1223.
212. Treit, D., Menard, J., & Royan, C. (1993). Anxiogenic stimuli in the elevated plus-maze. *Pharmacol Biochem Behav*, 44(2), 463-469.
213. Ursano, R. J., Zhang, L., Li, H., Johnson, L., Carlton, J., Fullerton, C. S., et al. (2009). PTSD and traumatic stress from gene to community and bench to bedside. *Brain Res*, 1293, 2-12.
214. Wenk, G. L. (2004). Assessment of spatial memory using the radial arm maze and Morris water maze. *Curr Protoc Neurosci*, Chapter 8, Unit 8 5A. doi: 10.1002/0471142301.ns0805as26
215. Yokogoshi, H., Mochizuki, M., & Saitoh, K. (1998). Theanine-induced reduction of brain serotonin concentration in rats. *Biosci Biotechnol Biochem*, 62(4), 816-817.
216. Yokogoshi, H., & Terashima, T. (2000). Effect of theanine, r-glutamylethylamide, on brain monoamines, striatal dopamine release and some kinds of behavior in rats. [Editorial]. *Nutrition*, 16(9), 776-777.

Summary of Dissemination

Type of Dissemination	Citation	Date and Source of Approval for Public Release
Published	Ceremuga T., Shellabarger P., Persson T., Fanning M., Galey P., Robinson D., Bertsch S., Ceremuga G., Bentley M. Effects of tetrahydropalmatine on post-traumatic stress disorder-induced changes in rat brain gene expression, <i>Journal of Integrative Neuroscience</i> , Vol. 12, No. 4 (December 2013) 1–16.	October 1, 2013 PAO approval
Published	Ceremuga, T., Bentley, M., Anderson, R., Frye, P., Duvall, C., Maan, J., Manjarres, C., Petsche, J., Ceremuga, G. Effects of Tetrahydropalmatine (THP) on PTSD-induced Changes in Rat Neurobehavior, <i>Plant Science Today</i> , accepted for publication – February 2014..	October 1, 2013 PAO approval
In Review	Ceremuga, T., Bentley, M., Wolfe, J., Baldwin, S., Onstott, T., Aytes, K., Ferrara, B., Alleyn, M., Fortner, C., Ceremuga, G., Padron, G. Effects of L-Theanine on PTSD-induced Changes in Rat Neurobehavior, <i>AMEDD Journal</i> , submitted - in review March 2014.	October 1, 2013 PAO approval
In Press	Ceremuga, T., Bentley, M., Martinson, S., Washington, J., Revels, R., Wojcicki, J., Crawford D., Edwards, R., Kemper, J., Townsend, W., Ceremuga, G., Padron, G. Effects of L-theanine on Post Traumatic Stress Disorder Induced Changes in Rat Brain Gene Expression, <i>The Scientific World Journal - Neuroscience</i> , - In Press May 2014.	October 1, 2013 PAO approval
Published Abstracts	Ceremuga, T., Bentley, M., Shellabarger, P., Persson, T., Fanning, M., Robinson, D., Bertsch, S., Kunz, B., Ceremuga, G. Effects of Tetrahydropalmatine (THP) on PTSD-induced Changes in Rat Brain Gene Expression, <i>AANA J</i> , August 2013.	October 1, 2013 PAO approval
	Ceremuga, T., Bentley, M., Anderson, R., Frye, P., Duvall, C., Maan, J., Manjarres, C., Petsche, J., Ceremuga, G. Effects of Tetrahydropalmatine (THP) on PTSD-induced Changes in Rat Neurobehavior, <i>AANA J</i> , August 2013.	October 1, 2013 PAO approval
Podium Presentations	Ceremuga, T., Bentley, M., Shellabarger, P., Persson, T., Fanning, M., Robinson, D., Bertsch, S., Kunz, B., Ceremuga, G. Effects of Tetrahydropalmatine (THP) on PTSD-induced Changes in Rat Brain Gene Expression, American Association of Nurse Anesthetists (AANA) Conference, Las Vegas, August 2013.	June 3, 2013 PAO approval

Principal Investigator: Ceremuga, Thomas COL (Ret)

USU Project Number: N10-P12

	Ceremuga, T., Bentley, M., Anderson, R., Frye, P., Duvall, C., Maan, J., Manjarres, C., Petsche, J., Ceremuga, G. Effects of Tetrahydropalmatine (THP) on PTSD-induced Changes in Rat Neurobehavior, American Association of Nurse Anesthetists (AANA) Conference, Las Vegas, August 2013.	June 3, 2013 PAO approval
Poster Presentations	Ceremuga, T., Bentley, M., Shellabarger, P., Persson, T., Fanning, M., Robinson, D., Bertsch, S., Kunz, B., Ceremuga, G. Effects of Tetrahydropalmatine (THP) on PTSD-induced Changes in Rat Brain Gene Expression, American Association of Nurse Anesthetists (AANA) Conference, Las Vegas, August 2013.	June 3, 2013 PAO approval
	Ceremuga, T., Bentley, M., Anderson, R., Frye, P., Duvall, C., Maan, J., Manjarres, C., Petsche, J., Ceremuga, G. Effects of Tetrahydropalmatine (THP) on PTSD-induced Changes in Rat Neurobehavior, American Association of Nurse Anesthetists (AANA) Conference, Las Vegas, August 2013.	June 3, 2013 PAO approval

Principal Investigator: Ceremuga, Thomas COL (Ret)

USU Project Number: N10-P12

Reportable Outcomes

Reportable Outcome	Detailed Description
Applied for Patent	None
Issued a Patent	None
Developed a cell line	None
Developed a tissue or serum repository	None
Developed a data registry	None

Principal Investigator: Ceremuga, Thomas COL (Ret)

USU Project Number: N10-P12

Recruitment and Retention Table

Recruitment and Retention Aspect	Number	
Animals Projected in Grant Application	170	
Animals Purchased	170	
Model Development Animals	10	
Animals Intervention Group / Control or Sham Group	80	80
Intervention Group / Control or Sham Group Animals With Complete Data	80	80
Intervention Group / Control or Sham Group Animals With Incomplete Data	0	0