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A_1 and A_{2A} receptors modulate spontaneous adenosine but not mechanically-stimulated adenosine in the caudate

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Abstract

Adenosine is a neuromodulator and rapid increases in adenosine in the brain occur spontaneously or after mechanical stimulation. However, the regulation of rapid adenosine by adenosine receptors is unclear, and understanding it would allow better manipulation of neuromodulation. The two main adenosine receptors in the brain are A_1 receptors, which are inhibitory, and A_{2A} receptors, which are excitatory. Here, we investigated the regulation of spontaneous adenosine and mechanically-stimulated adenosine by adenosine receptors, using global A1 or A2A knockout mice. Results were compared in vivo and in brain slices models. A1 KO mice have increased frequency of spontaneous adenosine events, but no change in the average concentration of an event, while A2A KO mice had no change in frequency but increased average event concentration. Thus, both A_1 and A_{2A} self-regulate spontaneous adenosine release, but A_1 acts on the frequency of events, while A_{2A} receptors regulate concentration. The trends are similar both *in vivo* and slices, so brain slices are a good model system to study spontaneous adenosine release. For mechanically-stimulated adenosine, there was no effect of A_1 or A_{2A} KO in vivo, but in brain slices there was a significant increase in concentration evoked in A1KO mice. Mechanicallystimulated release was largely unregulated by A_1 and A_{2A} receptors, likely because of a different release mechanism than spontaneous adenosine. Thus, A_1 receptors affect the frequency of spontaneous adenosine transients and A2A receptors affect the concentration, so future studies could probe drug treatments targeting A1 and A2A receptors to increase rapid adenosine neuromodulation.

Keywords

Fast-scan cyclic voltammetry; adenosine receptors; spontaneous adenosine; mechanosensitive adenosine; caudate; neuromodulation

Introduction

Adenosine plays an important role in the brain as a neuromodulator and a neuroprotector. ^{1–10} There are four known adenosine receptors, A_1 , A_{2A} , A_{2B} and A_3 receptors, which are G protein-coupled receptors, but A_1 and A_{2A} receptors are the most prevalent receptors responsible for adenosine modulation in the brain.^{11–14} A_1 receptors are the most abundant in the brain and inhibit neurotransmission by blocking adenylyl cyclase activity, while A_{2A}

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receptors, the second most abundant receptor type, are excitatory, activating adenylyl cyclase activity.¹⁵ Adenosine receptors, particularly A_{2A} receptors, are located on blood vessels and modulate blood flow and oxygen consumption.^{16,17} Moreover, adenosine receptors are also expressed on many neurons and regulate other neurotransmitters in the brain. For example, A_1 and A_{2A} receptors modulate synaptic release of glutamate, acetylcholine, serotonin, and GABA.^{1,2,18–20} A_1 and dopamine D_1 receptors form heteromers as well as A_{2A} and D_2 receptors and they therefore modulate dopamine signaling.²¹ However, it is still not clear how adenosine A_1 and A_{2A} receptors self-regulate adenosine release.

Traditionally, concentration changes of extracellular adenosine have been investigated on the minute to hour time scale.²²⁻²⁴ However, electrophysiology experiments in Dunwiddie's group showed rapid signaling of adenosine, on the timescale of milliseconds to seconds.²⁵ Spontaneous, transient adenosine signaling was recently measured by fast scan cyclic voltammetry, lasting only few seconds.^{9,16,26,27} Transient adenosine is activity dependent, and dependent on CD73, an enzyme that converts AMP to adenosine, suggesting spontaneous adenosine is vesicularly released as ATP and broken down in the extracellular space.^{9,22,26,28–33} The frequency of spontaneous release is increased by DPCPX, an A₁ receptor inhibitor³⁴ and DPCPX also increases electrically-stimulated adenosine release.³⁵ The A_{2A} receptor antagonist, SCH 442416, eliminated the increase in adenosine and oxygen events during cerebral ischemia/reperfusion (I/R) in vivo.36 Another mode of rapid adenosine release is mechanically-stimulated release, whereby moving a pipette or an electrode in the brain causes rapid adenosine release.³⁷ Mechanosensitive adenosine release is not dependent on CD73 and thus it may have a different mechanism of formation than spontaneous adenosine.^{29,30,37} Mechanosensitive ATP release has been discovered in the brain due to swelling, mechanical perturbation, and shear stress.³⁸ Thus, while moving the electrode is an easy way to experimentally cause release, mechanically-stimulated adenosine is biologically relevant to physical damage the brain can suffer, such as from shear stress.³⁷ While adenosine can also be electrically stimulated, mechanically-stimulated adenosine is more reproducible.^{35,39} However, little is known about how adenosine receptors modulate mechanically-stimulated adenosine.

Previous studies used pharmacology to understand the regulation of adenosine by blocking different receptors, but drugs cannot block or excite all receptors, and drugs must cross the blood-brain barrier to be utilized *in vivo*. Thus, genetically-altered mice provide an alternative to understand the global effects of receptors on adenosine regulation. Studies using A₁ knockout (A₁KO) and A_{2A} knockout (A_{2A}KO) mice have revealed the importance of these receptors for adenosine regulation.^{40–42} For example, mice lacking adenosine A₁ receptors showed decreased hypoxic neuroprotection and an increased renal injury following ischemia and perfusion.^{40,42–44} A_{2A}KO mice have less exploratory activity, more anxiety, and are less sensitive to depressant challenges than wild-type mice; moreover, A_{2A} KO mice have an attenuated response to focal ischemia, suggesting that removing A_{2A} receptors is neuroprotective.^{45–47} Adenosine receptor knockout mice were also used to investigate adenosine-dopamine interactions, and A_{2A}-mediated neural functions are partially independent of D₂ receptors.^{21,48} However, spontaneous, transient adenosine or mechanically-evoked adenosine events have not been measured in A₁ or A_{2A} KO mice.

In this study, we investigated whether adenosine receptors regulate spontaneous transient adenosine and mechanically-stimulated adenosine release in vivo and in brain slices using global knockout mice. Brain slice experiments are a useful biological model that bypasses the blood-brain barrier, however, spontaneous and mechanically-evoked adenosine events have not been directly compared between brain slice experiment and *in vivo* measurements. Data was collected in the caudate-putamen region in wild-type (C57BL/6), A1KO, and A2AKO mice. Both in vivo and brain slice results show A1KO mice had an increased frequency of spontaneous adenosine events, without changing the mean concentration of each adenosine transient event. A_{2A} KO mice had no change in spontaneous adenosine event frequency but an increase in concentration. For mechanically-evoked adenosine, there was no significant difference in concentration in vivo, but in brain slices, A1KO mice had a significantly higher concentration compared to wild-type mice. Overall, A1 and A2A receptors self-regulate spontaneous adenosine but self-regulation is less evident for mechanically-evoked release. Differential regulation of different modes of adenosine release may be useful to develop strategies that specifically target spontaneous adenosine to harness its neuromodulatory effects.

Results and Discussion

In this study, spontaneous and mechanically-stimulated adenosine release were compared in wild type mice (C57BL/6), A_1 KO, and A_{2A} KO mice. All experiments were performed in the caudate-putamen, which has abundant A_1 and A_{2A} receptors,⁴⁹ and two model systems were compared: brain slices and anesthetized mice. The hypothesis is that the frequency or concentration of adenosine will change in the knockout mice if A_1 or A_{2A} receptors self-regulate adenosine.

Spontaneous Adenosine Release

Brain slice measurements—Brain slice experiments are easier than *in vivo* studies, especially for pharmacology studies, where there is no blood-brain barrier.^{22,26} Figure 1 shows example color plots for spontaneous adenosine release in brain slices of control, A_1KO and $A_{2A}KO$ mice. The color plots display the results in 3 dimensions, with potential on the y-axis, time on the x-axis, and current in false color. The green/purple circles in the center represent the primary adenosine oxidation peak (at 1.4 V), and the green/purple circles slightly below (at 1.0 V) is the secondary oxidation peak of adenosine. The concentration vs time graphs on top plot show the change of primary adenosine peak, which is converted to concentration using a calibration factor. Starred peaks were identified as spontaneous adenosine release via our automated algorithm.⁵⁰ Wild type (Fig. 1A) has fewer events than either A_1KO (Fig. 1B) or $A_{2A}KO$ (Fig. 1C), and A_1KO has the highest number of spontaneous adenosine events.

Figure 2 compares average data for spontaneous adenosine events in brain slices among different genotype mice. Figure 2A shows the number of spontaneous events for one-hour measurement and there is a significant main effect of genotype (One-way ANOVA, p= 0.023, n=8–9 brain slices); A₁KO mice have significantly more spontaneous events than wild type mice (Tukey's multiple comparisons, p<0.05). However, the number of

spontaneous adenosine events is not significantly different between wild type and $A_{2A}KO$ mice (Tukey's multiple comparisons, p>0.9999). Inter-event time is the time between two consecutive transients and is a measure of the frequency of adenosine events. Figure 2B shows the distribution of inter-event times in a histogram, with relative frequency of each bin on the y-axis and inter-event time on the x-axis (times were binned in 50 s bins). There is a main effect of genotype (Kruskal-Wallis test, p<0.0001, n=8–9 brain slices), with a higher frequency of events in A1KO mice than wild type mice or A2AKO mice (Dunn's multiple comparisons test, A1KO vs WT: p=0.0019, A1KO vs A2AKO: p<0.0001). There is no significant difference in inter-event time distribution between WT and A_{2A}KO mice (p>0.99). Figure 2C shows the mean concentration of the first 10 spontaneous adenosine events from every slice (the first 10 are used in order to avoid the overrepresentation of some animals which have more transients). There is a significant main effect of genotype (Oneway ANOVA, p=0.0004, n=80 transients/genotype) with A2AKO mice having a significantly higher concentration than wild type or A1KO mice (Tukey's multiple comparisons, WT vs A2AKO: p=0.0016, A2AKO vs A1KO: p=0.0019) but there is no significant difference between wild type and A₁KO mice (p=0.99). Fig. 2D shows duration, which is defined as peak width at half height, and there is a main effect of genotype (One-way ANOVA, p=0.026, n=8-9 brain slices). A_{2A}KO mice have a shorter average duration compared to the other two genotypes (Tukey's multiple comparison, A2AKO vs WT p=0.0463, A2AKO vs A_1 KO p=0.043) and there is no significant difference between WT and A_1 KO (p=0.99). The concentration and duration distributions also proved that A2AKO mice have a higher concentration and shorter duration (Figure S1).

In vivo measurements—In order to confirm that the brain slice model is reliable for spontaneous adenosine measurements, we also measured spontaneous adenosine release *in vivo* in anesthetized mice. Since experiments can last longer *in vivo*, spontaneous adenosine was measured for four hours in each mouse.

Figure 3 shows examples of spontaneous adenosine measurements *in vivo*. In the example data, the number of transients is higher in A_1KO mice than WT or $A_{2A}KO$ mice, and the concentration of adenosine transients in $A_{2A}KO$ mice is higher than the other two genotype mice. The trend for number of transients in WT mice is the same for *in vivo* measurements as in brain slice measurements, with fewer transients in WT mice and more transients in A_1KO . However, *in vivo* data has higher concentration adenosine events than the brain slice experiment. Moreover, the number of spontaneous adenosine is more stable *in vivo* during the entire duration of the experiment, but most spontaneous adenosine in brain slice experiment happens during the first 30–45 minutes because of the difficulty of synthesis in brain slices.²² In slices, adenosine synthesis is not as well maintained without the addition of adenine and ribose, but adenine can't be added in FSCV experiments because it is electroactive, so experiments are kept to one hour.⁵¹

Figure 4 shows averaged results of spontaneous adenosine measurements. For the average number of spontaneous adenosine events (Fig. 4A), there is a significant main effect of genotype on the number of transients (One-way ANOVA, main effect p=0.0026, n=8 animals). A₁KO mice have a significantly higher number of events compared to wild type mice (Tukey's multiple comparisons test, p=0.0019) but were not statistically different than

 $A_{2A}KO$ (p=0.074). The average number of spontaneous adenosine events in $A_{2A}KO$ mice is not significantly different than wild type mice (p=0.24). Figure 4B shows the distribution of inter-event times, with data binned in 50 s intervals and there is a main effect of genotype on inter-event time (Kruskal-Wallis test, p<0.0001, n=8 animals). A1KO mice have a significantly different distribution compared to WT and A2AKO mice and A2AKO are also different than WT (Dunn's multiple comparisons test, p<0.0001, n=8 animals). The interevent time in A_1 KO is much shorter than the other two types of mice, indicating the frequency of events is higher. Figure 4C shows the mean concentration of the first 60 spontaneous adenosine events from each animal (to use the same number from each to avoid overrepresentation), and there is a significant main effect of genotype (One-way ANOVA, p<0.0001, n=8 animals). A_{2A}KO mice have a significantly higher concentration than wild type or A1KO mice (Tukey's multiple comparisons test, both p<0.0001), but there is no difference between wild type and A1KO mice (p>0.99). Thus, A2A receptors influence the concentration of individual transient adenosine events. Furthermore, there was a main effect of genotype on duration (Fig. 4D, One-way ANOVA, p=0.017, n=8 animals), and the average duration of each event in A2AKO mice is shorter (Tukey's multiple comparisons test, p=0.015). There was no significant difference between wild type and A1KO mice (p=0.10) or A_1KO and $A_{2A}KO$ mice (p=0.62). Differences in duration are slight because the temporal resolution of FSCV is only 0.1 s. Figure S2 presents the concentration and duration histograms of spontaneous adenosine in all genotypes, and the distributions also proves that A_{2A}KO have a higher concentration and shorter duration.

Mechanically-Stimulated Adenosine Release

Brain slice measurements.—Mechanically-stimulated adenosine was measured in brain slices by lowering the electrode 50 μ m three times per slice. Because slices are only 400 μ m thick and measurements are generally performed in the middle to avoid dead layers on the edges, moving the electrode ~150 um is about the maximum possible. Separate slices were used, not the same slices where spontaneous events were measured, because slices have a limited time for viability.

Figure 5A shows example results of mechanically-stimulated adenosine. The CV shape and the current do not change for three mechanical stimulations in a one-hour period. Figure 5B is the current vs time trace for the stimulations in Figure 5A. Both the rise time and the duration of these 3 stimulated adenosine traces were similar and relatively stable. Figure 5C compares the average concentration by genotype and there is a main effect of genotype (One-way ANOVA, Tukey's multiple comparisons, p<0.0001, n=8 slices). The concentration in A₁KO mice is significantly higher than the other two genotypes (p<0.0001), but wild type mice and A_{2A}KO mice are not significantly different in concentration (p=0.85). Figure 5D compares duration using $t_{1/2}$ of the primary oxidation peak and there is a significant effect of genotype on duration (One-way ANOVA, p=0.025, n=8 slices). Wild-type mice have a significantly longer duration compared to A₁KO (Tukey's multiple comparisons, p=0.019). A₁KO mice had the fastest clearance among these three types of mice, but duration was not significantly different from A_{2A}KO mice (p=0.64).

In vivo measurements.—Mechanical stimulation was also performed *in vivo* by lowering the electrode 4 times, every 15 minutes. These experiments were performed in the same animals as spontaneous adenosine, after the 4 hours of spontaneous data collection. Fig. S3 shows the data by stimulation number and the concentration and duration of every mechanical stimulation is stable *in vivo* for multiple stimulations (Figure S3A–3F). Figure 6A shows an example of mechanically-evoked adenosine release in A₁KO mice *in vivo*, with a large adenosine event that begins with the mechanical stimulation at 30 s. The top cyclic voltammogram proves adenosine is detected and the concentration vs time curve shows the response is rapid and cleared within 60 s. *In vivo*, mechanically-evoked adenosine release is larger and longer in duration than spontaneous adenosine release. Figure 6B shows that the average concentration of mechanically-stimulated release is not significantly different by genotype (One-way ANOVA, p=0.31, n=8 animals per genotype). For duration, there are no significant differences among the three genotypes of mice (Fig 6C, One-way ANOVA, p=0.74, n=8 animals per genotype). Overall, knocking out A₁ or A_{2A} receptors does not change the concentration or duration of mechanically-stimulated adenosine *in vivo*.

Discussion

In this study, we investigated the role of A_1 and A_{2A} receptors to regulate spontaneous and mechanically-stimulated adenosine release both *in vivo* and in brain slices. Deletion of A_1 receptors increased the frequency of spontaneous adenosine events but did not change the concentration of the events. Knockout of A_{2A} receptors did not influence the frequency of spontaneous adenosine events but increased the concentration of each event. Brain slice and *in vivo* data had the same trends for spontaneous adenosine release, showing that brain slices are a good model system. For mechanically-stimulated adenosine, the concentration of adenosine was higher in A_1 KO mice in the brain slice model, but not *in vivo*. There was no effect of A_{2A} receptors on mechanically-stimulated adenosine. Thus, A_1 and A_{2A} receptors have greater effects on spontaneous adenosine release, and serve to differentially regulate frequency and concentration. This knowledge of adenosine receptor regulation of adenosine signaling is important for future development of drug treatments targeting A_1 and A_{2A} receptors to regulate rapid adenosine release and harness its rapid mode of neuromodulation.

A₁ receptors regulate spontaneous adenosine frequency—A₁ receptors are the most abundant adenosine receptors in the brain and inhibit adenylyl cyclase activity.⁴⁹ A₁ receptors are located presynaptically^{1,21,52} and can inhibit vesicular release, including that of glutamate and ATP.¹⁰ The mechanism of spontaneous adenosine formation is through the rapid breakdown of extracellular ATP,⁵³ and thus regulation of ATP release will also regulate adenosine formation. In addition, previous studies demonstrated DPCPX, an A₁ receptor antagonist, regulated the frequency of spontaneous adenosine events, but not the concentration of adenosine release.^{32,34,54}

Here, we studied global deletion knockout mice, where the receptor is fully deleted, to better understand the effects of A_1 receptors on spontaneous adenosine. A_1 receptor KO mice have previously been used to determine the effects of A_1 receptors in regulating sleep⁵⁵ and seizures after traumatic brain injury.⁵⁶ The hypothesis is that deleting inhibitory A_1 receptors would remove presynaptic inhibition of adenosine release and increase the

frequency of adenosine transients. Indeed, in both brain slices and *in vivo*, there was a significantly higher number of spontaneous adenosine events in A₁KO mice compared to wild type. Deletion of A₁ receptors only increased the frequency of spontaneous adenosine, but did not affect the average concentration or the duration. A₁ receptors regulate the frequency of exocytotic events, and global deletion therefore allows more exocytosis, causing more adenosine events. However, the loading of the vesicles remains the same so the average concentration is not affected. Previous studies have shown that spontaneous adenosine is regulated by the frequency of release, particularly when pharmacological agents are given to block A₁, GABA_B, or NMDA receptors.^{32,34} Mice with global deletions of CD39 or CD73, the enzymes that breakdown extracellular ATP, also had lower frequency of release, but little to no effect on concentration.^{34,53,54} Therefore, A₁ receptors, acting presynaptically, regulate the frequency of spontaneous adenosine release, and this mechanism could be explored in the future as a method of harnessing the rapid neuromodulatory properties of adenosine.

$A_{2\mathsf{A}}$ receptors regulate the concentration but not the frequency of

spontaneous adenosine— A_{2A} receptors are the second most abundant adenosine receptors in the brain, and are expressed at high levels in the caudate-putamen region. 1,49,57,58 A_{2A} receptors are excitatory receptors that stimulate adenylyl cyclase activity to increase cAMP. A_{2A} KO mice have been widely used for behavioral or pharmacology research; for example, A_{2A} KO attenuates brain injury in mice, A_{2A} KO mice are less sensitive in depression tests, and deletion of A_{2A} receptors influences anxiety in mice. 44,47,59,60 A_{2A} receptors are most densely located post-synaptically in the striatum.⁶¹ However, A_{2A} receptors are also located presynaptically, where they control the release of glutamate^{62,63} by tightly interacting with A_1 and other receptors.⁶⁴ Moreover, A_{2A} receptors are engaged in neuromodulation in the caudate.^{65–69} Here, A_{2A} KO mice had no change in frequency of spontaneous events, suggesting that presynaptic A_{2A} receptors do not control the frequency of spontaneous adenosine events. A_{2A} receptors do not regulate baseline neurotransmitter release but do regulate faster events related to long-term potentiation (LTP)⁶⁵ however the lack of A_{2A} receptors does not change adenosine frequency and so spontaneous adenosine release to a prear linked to LTP processes.

The main effect observed in A_{2A} KO mice is that the average concentration of each adenosine event was larger. There are a few possible explanations for this increase in concentration. A_{2A} KO may enhance the breakdown of ATP to extracellular adenosine by enzymes such as CD73, because CD73 is colocalized with A_{2A} receptors in the caudate putamen and activation of A_{2A} receptors requires CD73.⁷⁰ Therefore, knocking out A_{2A} receptors may change the expression of CD73, which could result in a higher extracellular adenosine concentration. Another possible mechanism is compensation by adenosine A_{2B} receptors, which are also excitatory. A_{2B} receptor expression is 4.5 fold higher in A_{2A} KO mice than wild type mice.⁷¹ The regulation of spontaneous adenosine concentration by A_{2B} receptors is not known, but could be investigated as a compensatory mechanism.

The duration of spontaneous adenosine in $A_{2A}KO$ mice is also significantly shorter than wild type mice both *in vivo* and in brain slice (Fig. 2D, 4D). A_{2A} receptors may regulate adenosine deaminase or adenosine kinase, the main metabolic enzymes which are

responsible for fast extracellular breakdown of adenosine.²⁶ For example, A_{2A} receptors are affected by adenosine deaminase binding and A_{2A} KO could increase adenosine deaminase activity, which speeds up spontaneous adenosine clearance. Spontaneous adenosine is also cleared by equilibrative nucleoside transporters (ENTs),^{26,72} and these ENTs are modulated by A_{2A} receptors to control the extracellular adenosine level in rat hippocampus.^{26,73} Future studies could study adenosine clearance in A_{2A} KO mice with pharmacology to determine the mechanism of clearance.

Mechanically stimulated adenosine is not dependent on A1 or A2A receptors-

Moving an electrode in a brain slice causes mechanically-stimulated adenosine without causing significant tissue damage.³⁷ Mechanical stimulation is therefore a way of causing shear stress in the brain, without killing the cells. The mechanism of formation of mechanically-stimulated release is different than spontaneous adenosine release, as it is not dependent on the adenosine breakdown enzymes CD39 or CD73, implying that it is not due to extracellular breakdown of ATP.³⁰ Thus, we hypothesized that regulation of mechanically-stimulated release by A1 and A2A receptors would be different than regulation of spontaneous adenosine release. In A1 and A2AKO mice, there were no changes in mechanically-stimulated concentration or duration in vivo. However, in brain slices, the concentration was significantly higher in A₁KO mice and the duration was significantly lower (Fig. 5C, 5D). These data are the only data from brain slices and *in vivo* which do not agree, as all other data showed the same trends. The reason might be that smaller concentrations are elicited in brain slices in WT, and thus larger concentrations in A1KO are easier to observe. Larger concentrations are expected if you remove inhibition. However, the in vivo data do not show that trend, and stimulations are large for all genotypes, likely due to robust pools of adenosine maintained by synthesis. The source of mechanically-stimulated release is less understood. There is some evidence for exocytosis, as tetrodotoxin or EDTA decrease the concentration of mechanically-stimulated adenosine, suggesting it is activity dependent.^{25,37,39} However, other studies suggest it could be regulated by hemichannels such as pannexins or connexins, which are mechanosensitive.⁷⁴ Thus, regulation may not be through presynaptic mechanisms and the overall results here suggest mechanicallystimulated release is not as strongly regulated by A1 and A2A receptors. The data also support that A1 and A2A drugs would preferentially regulate spontaneous and not mechanically-stimulated adenosine release, allowing a way to tap into the rapid neuromodulatory properties of spontaneous release.

Conclusions

In this paper, we investigated the role of adenosine receptors to regulate spontaneous adenosine and mechanically-stimulated adenosine by using knockout mice. A₁KO mice have an increased frequency of spontaneous adenosine, but no change in concentration, both *in vivo* and in brain slices. A₁ receptors act as presynaptic inhibitors, inhibiting exocytotic events that cause spontaneous adenosine. Deletion of A_{2A} receptors resulted in higher concentrations of spontaneous adenosine, which may be related to interplay of A_{2A} receptors with adenosine breakdown enzymes or compensation by A_{2B} receptors. *In vivo*, mechanically-stimulated adenosine concentration is not dependent on A₁ or A_{2A} receptors, suggesting it is regulated differently than spontaneous release. This differential regulation of

release is important because it could lead to specific pharmacological treatments of A_1 or A_{2A} receptors that target manipulation of spontaneous adenosine release but not mechanically-stimulated release.

Methods

Chemicals

Artificial cerebral spinal fluid (aCSF) consisted of 126mM NaCl, 2.5 mM KCl, 1.2 mM NaH₂PO₄, 2.4 mM CaCl₂ dihydrate, 1.2 mM MgCl₂ hexahydrate, 25 mM NaHCO₃, 11 mM glucose, and 15 mM tris(hydroxymethyl) aminomethane and was adjusted to pH 7.4 before the experiment. Adenosine was purchased from Acros organics (Morris Plains, NJ, USA) and dissolved in 0.1 M HClO₄ for 10 mM stock solution. Stock solutions was diluted to 1 μ M in aCSF for the electrode post calibration after brain slice or *in vivo* experiments.

Electrochemistry

Cylinder carbon-fiber microelectrodes were fabricated as described previously.⁷⁵ Briefly, electrodes were made by vacuum-aspirating a T-650 carbon fiber (7 μ m diameter, Cytec Engineering Materials, West Patterson, NJ) into a glass capillary and pulling into two electrodes by an electrode puller (model PE-21, Narishige, Tokyo, Japan). The pulled electrode tip was cut to 50–100 μ m long for brain slice experiment and 150–200 μ m long for *in vivo* experiment. Cyclic voltammograms were collected using a ChemClamp (Dagan, Minneapolis, MN, USA) with HDCV (UNC Chemistry, Chapel Hill, NC, USA). The electrode was scanned by a triangular waveform from –0.4 V to 1.45 V with a frequency of 10 Hz at 400 V/s. Electrodes were calibrated after the experiment by testing their response to 1 μ M adenosine in a flow cell and a calibration value obtained (in nA/ μ M) that was used to convert currents to concentrations.

Brain Slice experiments

All animal experiments were approved by the Animal Care and Use Committee of the University of Virginia. C57BL/6 mice (6-8 weeks old, Jackson Lab), A₁ receptor knockout mice and A2A receptor knockout mice (6-8 weeks old, obtained from Dr. S. Jamal Mustafa, West Virginia University) were housed in a vivarium and given food and water ad libitum. Mice were anesthetized with isoflurane and beheaded immediately. The mouse brain was removed within 2 min and placed in 0-5°C artificial cerebral spinal fluid (aCSF) for 2 min for recovery. Four hundred-micrometer coronal slices of the caudate-putamen were prepared using a vibratome (LeicaVT1000S, Bannockburn, IL, USA), and transferred to oxygenated aCSF (95% oxygen, 5% CO₂), to recover for an hour before the experiment. aCSF (maintained at 35–37°C) flowed over the brain slices using a perfusion pump (Watson-Marlo 205U, Wilmington, MA, USA) at a rate of 2 mL/min for all experiments. Spontaneous adenosine transients were measured by inserting the electrode about 75 µm into the tissue and collected 1 h data after 10 min equilibrium. Mechanical stimulation experiments were performed by lowering the electrode 50 µm every 30 minutes. The electrode was placed in the caudate-putamen (AP +1.1 mm, ML + 1.5 mm, and DV -3.0 mm, scheme is shown in Figure S4). Only one slice was used per animal, so all n values are different animals.

In vivo experiment

All experiments were approved by Animal Care and Use Committee of the University of Virginia. C57BL/6 mice (6-8 weeks old, Jackson Lab), A1 receptor knockout mice, and A2A receptor knockout mice (6-8 weeks old, both KO obtained from Dr. S. Jamal Mustafa, West Virginia University)^{71,76} were housed in a vivarium and given food and water *ad libitum*. Both of the KO mice are on the C57B background and that is the standard control mouse used for studies of their function.^{71,76} Mice were anesthetized by flowing 4% isoflurane in 100% oxygen for induction and maintained with 1.5–3% in 100% oxygen via a facemask (Stoelting, Wood Dale, IL, USA), tail pinch to ensure that anesthesia is complete and sustained. Isoflurane levels were adjusted to until loss of righting reflex was observed. The mouse was laid on a heating pad maintaining the temperature around 37 °C. The surgical site was shaved, the skull was exposed, and a hole drilled that allowed the placement of the electrode in the caudate-putamen (AP +1.1 mm, ML + 1.5 mm, and DV -3.0 mm, scheme is shown in Figure S4). Bupivacaine (0.10 mL, APP Pharmaceuticals, Schaumburg, IL, USA) was applied under the skin for local anesthesia before drilling the skull. Spontaneous adenosine transient events were measured for 4 h total and mechanically-stimulated adenosine events were measured by lowering the electrode 100 µm every 15 minutes.

Statistics

Spontaneous adenosine transients were identified and characterized by an automated algorithm and adenosine transients were confirmed by an analyst to exclude any signals that were not adenosine, the duration results were determined at half-height of the primary peak. ⁵⁰ All statistics were performed by using GraphPad 8 (GraphPad Software Inc., San Diego, CA, USA). All data are shown as mean \pm SEM. Statistical significance was designated at p < 0.05.

Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

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References

- (1). Cunha RA Neuroprotection by Adenosine in the Brain: From A1 Receptor Activation to A2A Receptor Blockade. Purinergic Signal. 2005, 1 (2), 111–134. 10.1007/s11302-005-0649-1. [PubMed: 18404497]
- (2). Cunha RA Adenosine as a Neuromodulator and as a Homeostatic Regulator in the Nervous System: Different Roles, Different Sources and Different Receptors. Neurochem. Int 2001, 38
 (2), 107–125. 10.1016/S0197-0186(00)00034-6. [PubMed: 11137880]
- (3). Shibata S; Watanabe S A Neuroprotective Effect of Histamine H1 Receptor Antagonist on Ischemia-Induced Decrease in 2-Deoxyglucose Uptake in Rat Hippocampal Slices. Neurosci. Lett 1993, 151 (2), 138–141. 10.1016/0304-3940(93)90005-6. [PubMed: 8099434]
- (4). Wang Y; Venton BJ Correlation of Transient Adenosine Release and Oxygen Changes in the Caudate-Putamen. J. Neurochem 2017, 140 (1), 13–23. 10.1111/jnc.13705. [PubMed: 27314215]

- (5). Porkka-Heiskanen T; Strecker RE; Thakkar M; Bjørkum AA; Greene RW; McCarley RW Adenosine: A Mediator of the Sleep-Inducing Effects of Prolonged Wakefulness. Science. 1997, 276 (5316), 1265–1267. 10.1126/science.276.5316.1265. [PubMed: 9157887]
- (6). Koos BJ; Kruger L; Murray TF Source of Extracellular Brain Adenosine during Hypoxia in Fetal Sheep. Brain Res. 1997, 778 (2), 439–442. 10.1016/S0006-8993(97)01207-9. [PubMed: 9459565]
- (7). Kalinchuk AV; Urrila AS; Alanko L; Heiskanen S; Wigren HK; Suomela M; Stenberg D; Porkka-Heiskanen T Local Energy Depletion in the Basal Forebrain Increases Sleep. Eur. J. Neurosci 2003, 17 (4), 863–869. 10.1046/j.1460-9568.2003.02532.x. [PubMed: 12603276]
- (8). Dale N; Frenguelli BG Release of Adenosine and ATP during Ischemia and Epilepsy. Curr.Neuropharmacol 2009, 7 (3), 160–179. 10.2174/157015909789152146 [doi]. [PubMed: 20190959]
- (9). Ganesana M; Venton BJ Early Changes in Transient Adenosine during Cerebral Ischemia and Reperfusion Injury. PLoS One 2018, 13 (5), e0196932 10.1371/journal.pone.0196932. [PubMed: 29799858]
- (10). Cunha RA How Does Adenosine Control Neuronal Dysfunction and Neurodegeneration? J. Neurochem 2016, 139 (6), 1019–1055. 10.1111/jnc.13724. [PubMed: 27365148]
- (11). Fredholm BB; Chen JF; Cunha RA; Svenningsson P; Vaugeois JM Adenosine and Brain Function. Int. Rev. Neurobiol 2005, 63, 191–270. 10.1016/S0074-7742(05)63007-3. [PubMed: 15797469]
- (12). Bunney PE; Zink AN; Holm AA; Billington CJ; Kotz CM Orexin Activation Counteracts Decreases in Nonexercise Activity Thermogenesis (NEAT) Caused by High-Fat Diet. Physiol. Behav 2017, 176 (2), 139–148. 10.1016/j.physbeh.2017.03.040. [PubMed: 28363838]
- (13). Borea PA; Gessi S; Merighi S; Varani K Adenosine as a Multi-Signalling Guardian Angel in Human Diseases: When, Where and How Does It Exert Its Protective Effects? Trends Pharmacol. Sci 2016, 37 (6), 419–434. 10.1016/j.tips.2016.02.006. [PubMed: 26944097]
- (14). Eltzschig HK Adenosine: An Old Drug Newly Discovered. Anesthesiology 2009, 111 (4), 904– 915. 10.1097/ALN.0b013e3181b060f2. [PubMed: 19741501]
- (15). Borea PA; Gessi S; Merighi S; Vincenzi F; Varani K Pathological Overproduction: The Bad Side of Adenosine. Br. J. Pharmacol 2017, 174 (13), 1945–1960. 10.1111/bph.13763. [PubMed: 28252203]
- (16). Ganesana M; Lee ST; Wang Y; Venton BJ Analytical Techniques in Neuroscience: Recent Advances in Imaging, Separation, and Electrochemical Methods. Anal. Chem 2017, 89 (1), 314– 341. 10.1021/acs.analchem.6b04278. [PubMed: 28105819]
- (17). Melani A; Pugliese AM; Pedata F Chapter Thirteen Adenosine Receptors in Cerebral Ischemia In Adenosine Receptors in Neurology and Psychiatry; of Neurobiology, A. M. B. T-IR, Ed.; Academic Press, 2014; Vol. Volume 119, pp 309–348. 10.1016/B978-0-12-801022-8.00013-1.
- (18). Cunha RA; Almeida T; Ribeiro JA Modification by Arachidonic Acid of Extracellular Adenosine Metabolism and Neuromodulatory Action in the Rat Hippocampus. J. Biol. Chem 2000, 275 (48), 37572–37581. 10.1074/jbc.M003011200. [PubMed: 10978314]
- (19). Lopes LV; Cunha RA; Kull B; Fredholm BB; Ribeiro JA Adenosine A2A Receptor Facilitation of Hippocampal Synaptic Transmission Is Dependent on Tonic A1 Receptor Inhibition. Neuroscience 2002, 112 (2), 319–329. 10.1016/S0306-4522(02)00080-5. [PubMed: 12044450]
- (20). Rebola N; Oliveira CR; Cunha RA Transducing System Operated by Adenosine A2A Receptors to Facilitate Acetylcholine Release in the Rat Hippocampus. Eur. J. Pharmacol 2002, 454 (1), 31–38. 10.1016/S0014-2999(02)02475-5. [PubMed: 12409002]
- (21). Fuxe K; Ferre S; Canals M; Torvinen M; Terasmaa A; Marcellino D; Goldberg SR; Staines W; Jacobsen KX; Lluis C; Woods AS; Agnati LF; Franco R Adenosine-Dopamine Interactions Revealed in Knockout Mice. J. Mol. Neurosci 2005, 26 (2), 209–220. 10.1385/JMN/26. [PubMed: 16012194]
- (22). Lee ST; Venton BJ Regional Variations of Spontaneous, Transient Adenosine Release in Brain Slices. ACS Chem. Neurosci 2018, 9 (3), 505–513. 10.1021/acschemneuro.7b00280. [PubMed: 29135225]

- (23). Pazzagli M; Pedata F; Pepeu G Effect of K+ Depolarization, Tetrodotoxin, and NMDA Receptor Inhibition on Extracellular Adenosine Levels in Rat Striatum. Eur. J. Pharmacol 1993, 234 (1), 61–65. [PubMed: 8472761]
- (24). Lloyd HGE; Fredholm BB Involvement of Adenosine Deaminase and Adenosine Kinase in Regulating Extracellular Adenosine Concentration in Rat Hippocampal Slices. Neurochem. Int 1995, 26 (4), 387–395. 10.1016/0197-0186(94)00144-J. [PubMed: 7633332]
- (25). Mitchell JB; Lupica CR; Dunwiddie TV Activity-Dependent Release of Endogenous Adenosine Modulates Synaptic Responses in the Rat Hippocampus. J. Neurosci 1993, 13 (8), 3439–3447. [PubMed: 8393482]
- (26). Nguyen MD; Ross AE; Ryals M; Lee ST; Venton BJ Clearance of Rapid Adenosine Release Is Regulated by Nucleoside Transporters and Metabolism. Pharmacol. Res. Perspect 2015, 3 (6), 1– 12. 10.1002/prp2.189.
- (27). Nguyen MD; Venton BJ Fast-Scan Cyclic Voltammetry for the Characterization of Rapid Adenosine Release. Comput. Struct. Biotechnol. J 2015, 13, 47–54. 10.1016/j.csbj.2014.12.006. [PubMed: 26900429]
- (28). Yang C; Wang Y; Jacobs CB; Ivanov IN; Venton BJ O2 Plasma Etching and Antistatic Gun Surface Modifications for CNT Yarn Microelectrode Improve Sensitivity and Antifouling Properties. Anal. Chem 2017, 89 (10), 5605–5611. 10.1021/acs.analchem.7b00785. [PubMed: 28423892]
- (29). Wang Y; Venton BJ Comparison of Spontaneous and Mechanically-Stimulated Adenosine Release in Mice. Neurochem. Int 2019, 124, 46–50. 10.1016/j.neuint.2018.12.007. [PubMed: 30579856]
- (30). Wang Y; Copeland J; Shin M; Chang Y; Venton BJ CD73 or CD39 Deletion Reveals Different Mechanisms of Formation for Spontaneous and Mechanically Stimulated Adenosine and Sex Specific Compensations in ATP Degradation. ACS Chem. Neurosci 2020, 11 (6), 919–928. 10.1021/acschemneuro.9b00620. [PubMed: 32083837]
- (31). Borgus JR; Puthongkham P; Venton BJ Complex Sex and Estrous Cycle Differences in Spontaneous Transient Adenosine. J. Neurochem 2020, 153 (2), 216–229. 10.1111/jnc.14981.
 [PubMed: 32040198]
- (32). Nguyen MD; Wang Y; Ganesana M; Venton BJ Transient Adenosine Release Is Modulated by NMDA and GABAB Receptors. ACS Chem. Neurosci 2017, 8 (2), 376–385. 10.1021/ acschemneuro.6b00318. [PubMed: 28071892]
- (33). Ross AE; Venton BJ Adenosine Transiently Modulates Stimulated Dopamine Release in the Caudate-Putamen via A1 Receptors. J. Neurochem 2015, 132 (1), 51–60. 10.1111/jnc.12946. [PubMed: 25219576]
- (34). Nguyen MD; Lee ST; Ross AE; Ryals M; Choudhry VI; Venton BJ Characterization of Spontaneous, Transient Adenosine Release in the Caudate-Putamen and Prefrontal Cortex. PLoS One 2014, 9 (1), e87165 10.1371/journal.pone.0087165. [PubMed: 24494035]
- (35). Pajski MLML; Venton BJJ The Mechanism of Electrically Stimulated Adenosine Release Varies by Brain Region. Purinergic Signal. 2013, 9 (2), 167–174. 10.1007/s11302-012-9343-2. [PubMed: 23192278]
- (36). Wang Y; Venton BJ Caffeine Modulates Spontaneous Adenosine and Oxygen Changes during Ischemia and Reperfusion. ACS Chem. Neurosci 2019, 10 (4), 1941–1949. 10.1021/ acschemneuro.8b00251. [PubMed: 30252436]
- (37). Ross AE; Nguyen MD; Privman E; Venton BJ Mechanical Stimulation Evokes Rapid Increases in Extracellular Adenosine Concentration in the Prefrontal Cortex. J. Neurochem 2014, 130 (1), 50– 60. 10.1111/jnc.12711. [PubMed: 24606335]
- (38). Wan J; Ristenpart WD; Stone HA Dynamics of Shear-Induced ATP Release from Red Blood Cells. Proc. Natl. Acad. Sci 2008, 105 (43), 16432–16437. [PubMed: 18922780]
- (39). Pajski ML; Venton BJ Adenosine Release Evoked by Short Electrical Stimulations in Striatal Brain Slices Is Primarily Activity Dependent. ACS Chem. Neurosci 2010, 1 (12), 775–787. 10.1021/cn100037d. [PubMed: 21218131]

- (40). Lee HT; Xu H; Nasr SH; Schnermann J; Emala CW A1 Adenosine Receptor Knockout Mice Exhibit Increased Renal Injury Following Ischemia and Reperfusion. Am. J. Physiol. - Ren. Physiol 2004, 286 (2 55–2), 298–306. 10.1152/ajprenal.00185.2003.
- (41). Schweda F; Wagner C; Krämer BK; Schnermann J; Kurtz A Preserved Macula Densa-Dependent Renin Secretion in A1 Adenosine Receptor Knockout Mice. Am. J. Physiol. - Ren. Physiol 2003, 284 (4 53–4), 770–777. 10.1152/ajprenal.00280.2002.
- (42). Lee HT; Jan M; Soo CB; Jin DJ; Goubaeva FR; Yang J; Kim M A1 Adenosine Receptor Knockout Mice Are Protected against Acute Radiocontrast Nephropathy in Vivo. Am. J. Physiol.
 - Ren. Physiol 2006, 290 (6), 1367–1375. 10.1152/ajprenal.00347.2005.
- (43). Ledent C; Vaugeois J-M; Schiffmann SN; Pedrazzini T; Yacoubi M. El; Vanderhaeghen J-J; Costentin J; Heath JK; Vassart G; Parmentier M Aggressiveness, Hypoalgesia and High Blood Pressure in Mice Lacking the Adenosine A2a Receptor. Nature 1997, 388 (6643), 674–678. 10.1038/41771. [PubMed: 9262401]
- (44). Johansson B; Halldner L; Dunwiddie TV; Masino SA; Poelchen W; Giménez-Llort L; Escorihuela RM; Fernández-Teruel A; Wiesenfeld-Hallin Z; Xu X-J; Hårdemark A; Betsholtz C; Herlenius E; Fredholm BB Hyperalgesia, Anxiety, and Decreased Hypoxic Neuroprotection in Mice Lacking the Adenosine A1 Receptor. Proc. Natl. Acad. Sci 2001, 98 (16), 9407–9412. 10.1073/pnas.161292398. [PubMed: 11470917]
- (45). Yacoubi M. El; Ledent C; Parmentier M; Bertorelli R; Ongini E; Costentin J; Vaugeois J-M Adenosine A2A Receptor Antagonists Are Potential Antidepressants: Evidence Based on Pharmacology and A2A Receptor Knockout Mice. Br. J. Pharmacol 2001, 134 (1), 68–77. 10.1038/sj.bjp.0704240. [PubMed: 11522598]
- (46). Montesinos MC; Desai A; Chen JF; Yee H; Schwarzschild MA; Fink JS; Cronstein BN Adenosine Promotes Wound Healing and Mediates Angiogenesis in Response to Tissue Injury via Occupancy of A2A Receptors. Am. J. Pathol 2002, 160 (6), 2009–2018. 10.1016/ S0002-9440(10)61151-0. [PubMed: 12057906]
- (47). Chen JF; Huang Z; Ma J; Zhu JM; Moratalla R; Standaert D; Moskowitz MA; Fink JS; Schwarzschild MAA(2A) Adenosine Receptor Deficiency Attenuates Brain Injury Induced by Transient Focal Ischemia in Mice. J. Neurosci 1999, 19 (21), 9192–9200. 10.1523/ JNEUROSCI.19-21-09192.1999. [PubMed: 10531422]
- (48). Chen J; Moratalla R; Impagnatiello F; Grandy DK; Cuellar B; Rubinstein M; Beilstein MA; Hackett E; Fink JS; Low MJ; Ongini E; Schwarzschild MA The Role of the D2 Dopamine Receptor (D2R) in A2A Adenosine Receptor (A2AR)-Mediated Behavioral and Cellular Responses as Revealed by A2A and D2 Receptor Knockout Mice. Pnas 2001, 98 (4).
- (49). Andrea P; Katia B; Gessi S; Merighi S The Adenosine Receptors; 2018 10.1007/978-3-319-90808-3.
- (50). Borman RP; Wang Y; Nguyen MD; Ganesana M; Lee ST; Venton BJ Automated Algorithm for Detection of Transient Adenosine Release. ACS Chem. Neurosci 2017, 8 (2), 386–393. 10.1021/ acschemneuro.6b00262. [PubMed: 28196418]
- (51). zur Nedden S; Doney AS; Frenguelli BG Modulation of Intracellular ATP Determines Adenosine Release and Functional Outcome in Response to Metabolic Stress in Rat Hippocampal Slices and Cerebellar Granule Cells. J. Neurochem 2014, 128 (1), 111–124. 10.1111/jnc.12397. [PubMed: 23937448]
- (52). Rebola N; Pinheiro PC; Oliveira CR; Malva JO; Cunha RA Subcellular Localization of Adenosine A1 Receptors in Nerve Terminals and Synapses of the Rat Hippocampus. Brain Res. 2003, 987 (1), 49–58. 10.1016/S0006-8993(03)03247-5. [PubMed: 14499945]
- (53). Wang Y; Copeland J; Shin M; Chang Y; Venton BJ CD73 or CD39 Deletion Reveals Different Mechanisms of Formation for Spontaneous and Mechanically-Stimulated Adenosine Release and Sex Specific Compensations in ATP Degradation. ACS Chem. Neurosci 2020, 11 (6), 919–928. 10.1021/acschemneuro.9b00620. [PubMed: 32083837]
- (54). Cechova S; Elsobky AM; Venton BJ A1 Receptors Self-Regulate Adenosine Release in the Striatum: Evidence of Autoreceptor Characteristics. Neuroscience 2010, 171 (4), 1006–1015. 10.1016/j.neuroscience.2010.09.063. [PubMed: 20933584]

- (55). Stenberg D; Litonius E; Halldner L; Johansson B; Fredholm BB; Porkka-Heiskanen T Sleep and Its Homeostatic Regulation in Mice Lacking the Adenosine A1 Receptor. J. Sleep Res 2003, 12 (4), 283–290. 10.1046/j.0962-1105.2003.00367.x. [PubMed: 14633239]
- (56). Kochanek PM; Vagni VA; Janesko KL; Washington CB; Crumrine PK; Garman RH; Jenkins LW; Clark RSB; Homanics GE; Dixon CE; Schnermann J; Jackson EK Adenosine A1 Receptor Knockout Mice Develop Lethal Status Epilepticus after Experimental Traumatic Brain Injury. J. Cereb. Blood Flow Metab 2005, 26 (4), 565–575. 10.1038/sj.jcbfm.9600218.
- (57). Rosin DL; Robeva A; Woodard RL; Guyenet PG; Linden J Immunohistochemical Localization of Adenosine A(2A) Receptors in the Rat Central Nervous System. J. Comp. Neurol 1998, 401 (2), 163–186. 10.1002/(SICI)1096-9861(19981116)401:2<163::AID-CNE2>3.0.CO;2-D. [PubMed: 9822147]
- (58). Hettinger BD; Lee A; Linden J; Rosin DL Ultrastructural Localization of Adenosine A2A Receptors Suggests Multiple Cellular Sites for Modulation of GABAergic Neurons in Rat Striatum. J. Comp. Neurol 2001, 431 (3), 331–346. 10.1002/1096-9861(20010312)431:3<331::AID-CNE1074>3.0.CO;2-W. [PubMed: 11170009]
- (59). El Yacoubi M; Ledent C; Parmentier M; Costentin J; Vaugeois JM Adenosine A2A Receptor Knockout Mice Are Partially Protected against Drug-Induced Catalepsy. Neuroreport 2001, 12 (5), 983–986. 10.1097/00001756-200104170-00024. [PubMed: 11303773]
- (60). López-Cruz L; Carbó-Gas M; Pardo M; Bayarri P; Valverde O; Ledent C; Salamone JD; Correa M Adenosine A2A Receptor Deletion Affects Social Behaviors and Anxiety in Mice: Involvement of Anterior Cingulate Cortex and Amygdala. Behav. Brain Res 2017, 321, 8–17. 10.1016/j.bbr.2016.12.020. [PubMed: 28007538]
- (61). Svenningsson P; Le Moine C; Fisone G; Fredholm BB Distribution, Biochemistry and Function of Striatal Adenosine A(2A) Receptors. Prog. Neurobiol 1999, 59 (4), 355–396. 10.1016/ S0301-0082(99)00011-8. [PubMed: 10501634]
- (62). Rodrigues RJ; Alfaro TM; Rebola N; Oliveira CR; Cunha RA Co-Localization and Functional Interaction between Adenosine A2A and Metabotropic Group 5 Receptors in Glutamatergic Nerve Terminals of the Rat Striatum. J. Neurochem 2005, 92 (3), 433–441. 10.1111/ j.1471-4159.2004.02887.x. [PubMed: 15659214]
- (63). Köfalvi A; Moreno E; Cordomí A; Cai N-S; Fernández-Dueñas V; Ferreira SG; Guixà-González R; Sánchez-Soto M; Yano H; Casadó-Anguera V; Cunha RA; Sebastião AM; Ciruela F; Pardo L; Casadó V; Ferré S Control of Glutamate Release by Complexes of Adenosine and Cannabinoid Receptors. BMC Biol. 2020, 18 (1), 9 10.1186/s12915-020-0739-0. [PubMed: 31973708]
- (64). Ciruela F; Casadó V; Rodrigues RJ; Luján R; Burgueño J; Canals M; Borycz J; Rebola N; Goldberg SR; Mallol J; Cortés A; Canela EI; López-Giménez JF; Milligan G; Lluis C; Cunha RA; Ferré S; Franco R Presynaptic Control of Striatal Glutamatergic Neurotransmission by Adenosine A1–A2A Receptor Heteromers. J. Neurosci 2006, 26 (7), 2080–2087. 10.1523/ JNEUROSCI.3574-05.2006. [PubMed: 16481441]
- (65). D'Alcantara P; Ledent C; Swillens S; Schiffmann SN Inactivation of Adenosine A2A Receptor Impairs Long Term Potentiation in the Accumbens Nucleus without Altering Basal Synaptic Transmission. Neuroscience 2001, 107 (3), 455–464. 10.1016/S0306-4522(01)00372-4. [PubMed: 11719000]
- (66). Rebola N; Canas PM; Oliveira CR; Cunha RA Different Synaptic and Subsynaptic Localization of Adenosine A2A Receptors in the Hippocampus and Striatum of the Rat. Neuroscience 2005, 132 (4), 893–903. 10.1016/j.neuroscience.2005.01.014. [PubMed: 15857695]
- (67). Quiroz C; Gomes C; Pak AC; Ribeiro JA; Goldberg SR; Hope BT; Ferré S Blockade of Adenosine A2A Receptors Prevents Protein Phosphorylation in the Striatum Induced by Cortical Stimulation. J. Neurosci 2006, 26 (42), 10808–10812. 10.1523/JNEUROSCI.1661-06.2006. [PubMed: 17050719]
- (68). Schiffmann SN; Fisone G; Moresco R; Cunha RA; Ferré S Adenosine A2A Receptors and Basal Ganglia Physiology. Prog. Neurobiol 2007, 83 (5), 277–292. 10.1016/j.pneurobio.2007.05.001.
 [PubMed: 17646043]
- (69). Morato X; Cunha RA; Ciruela F G Protein-Coupled Receptor 37 (GPR37) Emerges as an Important Modulator of Adenosinergic Transmission in the Striatum. Neural Regen. Res 2019, 14 (11), 1912–1914. 10.4103/1673-5374.259610. [PubMed: 31290447]

- (70). Augusto E; Matos M; Sévigny J; El-Tayeb A; Bynoe MS; Müller CE; Cunha R. a; Chen J-F Ecto-5'-Nucleotidase (CD73)-Mediated Formation of Adenosine Is Critical for the Striatal Adenosine A2A Receptor Functions. J. Neurosci 2013, 33 (28), 11390–11399. 10.1523/ JNEUROSCI.5817-12.2013. [PubMed: 23843511]
- (71). Teng B; Ledent C; Mustafa SJ Up-Regulation of A2B Adenosine Receptor in A2A Adenosine Receptor Knockout Mouse Coronary Artery. J. Mol. Cell. Cardiol 2008, 44 (5), 905–914. 10.1016/j.yjmcc.2008.03.003. [PubMed: 18423660]
- (72). Thorn JA; Jarvis SM Adenosine Transporters. Gen. Pharmacol 1996, 27 (4), 613–620. 10.1016/0306-3623(95)02053-5. [PubMed: 8853292]
- (73). Pinto-Duarte A; Coelho JE; Cunha RA; Ribeiro JA; Sebastião AM Adenosine A2A Receptors Control the Extracellular Levels of Adenosine through Modulation of Nucleoside Transporters Activity in the Rat Hippocampus. J. Neurochem 2005, 93 (3), 595–604. 10.1111/ j.1471-4159.2005.03071.x. [PubMed: 15836618]
- (74). Xia J; Lim JC; Lu W; Beckel JM; Macarak EJ; Laties AM; Mitchell CH Neurons Respond Directly to Mechanical Deformation with Pannexin-Mediated ATP Release and Autostimulation of P2X 7 Receptors. J. Physiol 2012, 590 (10), 2285–2304. 10.1113/jphysiol.2012.227983. [PubMed: 22411013]
- (75). Huffman ML; Venton BJ Electrochemical Properties of Different Carbon-Fiber Microelectrodes Using Fast-Scan Cyclic Voltammetry. Electroanalysis 2008, 20 (22), 2422–2428. 10.1002/ elan.200804343.
- (76). El-Awady MS; Rajamani U; Teng B; Tilley SL; Mustafa SJ Evidence for the Involvement of NADPH Oxidase in Adenosine Receptors-Mediated Control of Coronary Flow Using A(1) and A(3) Knockout Mice. Physiol. Rep 2013, 1 (3), e00070 10.1002/phy2.70. [PubMed: 24159377]



Figure 1.

Examples of spontaneous adenosine release in brain slices. Top: concentration vs time trace, with stars indicating the peak was identified as spontaneous adenosine release by our automated algorithm. Bottom: 3-D color plot of spontaneous adenosine release in three different types of mice. A. Wild type, B: A_1KO , and C: $A_{2A}KO$.

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Figure 2.

Spontaneous adenosine measurement in brain slices. A. Number of spontaneous adenosine events varies by genotype (One-way ANOVA, overall p=0.023, n=8–9 brain slices, 1 slice per animal). B. Inter-event time histogram (50 s bins) of all adenosine transients (Kruskal-Wallis test, overall p<0.0001). C. Mean concentration of first 10 spontaneous adenosine release in every slice. (One-way ANOVA, Tukey's multiple comparisons, overall p=0.0004, 80 transients in each genotype, **p<0.01, n=8 brain slices, 1 slice per animal) D. Average duration of spontaneous adenosine release (One-way ANOVA, Tukey's multiple comparisons, overall p=0.026) *p<0.05, **p<0.01, ***p<0.001, ****p<0.0001, error bars are SEM. WT=wild type C57BL/6 mice.



Figure 3.

Examples of spontaneous adenosine release *in vivo*. Top concentration vs time traces, with stars indicating the peak was identified as spontaneous adenosine release by our automated algorithm. Bottom: 3-D color plots of spontaneous adenosine release. A. Wild type, B: A_1KO , and C: $A_{2A}KO$.

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Figure 4.

Spontaneous adenosine release *in vivo*. A. Number of spontaneous adenosine events per hour (One-way ANOVA, overall p=0.0026, n=8 animals). B. Inter-event time histogram (50 s bins) of all adenosine transients (Kruskal-Wallis test, overall p<0.0001, n=8 animals) C. Mean concentration of first 60 spontaneous adenosine release (One-way ANOVA, overall p<0.0001, n=8 animals). D. Average duration of spontaneous adenosine release (One-way ANOVA, overall p<0.0001, n=8 animals). D. Average duration of spontaneous adenosine release (One-way ANOVA, Tukey's multiple comparisons, overall p=0.017, n=8 animals), *p<0.05, **p<0.01, ****p<0.0001, error bars are SEM. WT=wild type C57BL/6 mice



Figure 5.

Mechanically-stimulated adenosine in brain slices. A. Example CV of stimulated adenosine release in A₁KO mice brain slice, where the electrode was lowered 50 µm every 15 minutes three times. MS=mechanical stimulation. The black arrows mean the direction of the CV scanning. B. Current vs Time of the primary oxidation peak for same stimulations in A₁KO mice as 5A. C. Average concentration of each stimulation (One-way ANOVA, Tukey's multiple comparisons, overall p<0.0001, n=8 slices, 1 slice per animal). D. Average duration ($t_{1/2}$) varies by genotype. (One-way ANOVA, Tukey's multiple comparisons, overall p=0.025, n=8 slices, 1 slice per animal.) *p<0.05, ****p<0.0001, error bars are SEM.

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Figure 6.

Mechanically-stimulated adenosine measurement *in vivo*. A. Example data of mechanical stimulation in A_1 KO mice. Bottom figure is the color plot of the measurement by FSCV (x-axes is time, y-axes is potential and the color differences represent current). Top left is concentration vs time curve of the primary peak, top right is the cyclic voltammogram of adenosine at 30 s. B. Comparison of mechanically-stimulated adenosine concentration shows no difference by genotype (One-way ANOVA, Tukey's multiple comparisons, overall p=0.31, n=8 animals). C. Comparison of $t_{1/2}$ shows no differences genotypes (One-way ANOVA, Tukey's multiple comparisons, overall p=0.74, n=8 animals).