Review

Oxytocin system in neuropsychiatric disorders: Old concept, new insights

MISRANI Afzal¹, TABASSUM Sidra¹, LONG Cheng^{1,2,*}

¹School of Life Sciences; ²Institute of Brain Science, South China Normal University, Guangzhou 510631, China

Abstract: Oxytocin (OXT) is a neuropeptide that plays a pivotal role among species peripherally and centrally. It recently has attracted much attention for its involvement in anxiety-related behavior, stress regulation, social behavior and various neuropsychiatric disorders. OXT is one of the important mediators of emotional and social behaviors such as maternal behavior, fear extinction, social support, happiness, and trust. It is also involved in learning and memory process. The recent progresses in OXT system have put this neuropeptide as an important psychotherapeutic intervention for various psychiatric disorders such as stress, anxiety disorders, social phobia, postpartum depression, bipolar disorder, autism, and schizophrenia. In this review, we highlight OXT's contributions to various physiological functions and psychological disorders and discuss its potential use as a therapeutic agent.

Key words: oxytocin; stress; anxiety; fear; autism; schizophrenia; neuropsychiatric disorders

神经精神疾病中的催产素系统:老概念,新见解

MISRANI Afzal¹, TABASSUM Sidra¹, 龙程^{1,2,*}

华南师范大学1生命科学学院;2脑科学研究院,广州510631

摘 要: 催产素(oxytocin, OXT)是一种神经肽,在各物种的中枢和外周神经系统中都起着关键作用。由于它参与焦虑相关行为、压力调节、社会行为和各种神经精神障碍,近年引起大量关注。OXT是介导诸如母性行为、恐惧消退、社会支持、幸福与信任之类的情感和社会行为的重要物质之一,也参与学习和记忆过程。OXT系统的最新进展已将此神经肽用于心理治疗干预各种神经精神疾病,如压力、焦虑障碍、社交恐惧症、产后忧郁症、躁郁症、自闭症和精神分裂症等。本综述着重概括OXT对各种生理功能和心理问题的贡献,并讨论其作为治疗药物的潜力。

关键词: 催产素; 压力; 焦虑; 恐惧; 自闭; 神经精神疾病 **中图分类号**: R74; Q42

1 Introduction

Oxytocin (OXT), a neuropeptide found in all vertebrate mammals, plays a pivotal role peripherally and centrally ^[1]. Peripheral action of OXT is of great importance, as it is involved in the regulation of reproductive behavior ^[2], parturition and lactation in females ^[3]. The peripheral action of OXT is controlled by OXT mainly secreted from the pituitary gland, because peripheral OXT has the poor penetration of the blood-brain barrier (BBB) ^[4]. Clinically, OXT is used during the delivery and lactation ^[5] as it is involved in the smooth muscle contrac-

tion of uterus and breast. OXT receptors (OXTr) are found in the gut, gastrointestinal tract, heart, testes, uterus, corpus luteum, placenta, amnion, kidney, pancreas, thymus, adipocytes [6] and involved in the regulation of water balance, bone density, and appetite [7].

The central activity of neuropeptide OXT mainly depends on OXT produced from hypothalamus ^[4]. Preliminary studies revealed that OXTr are widely distributed in various brain regions including bed nucleus of the stria terminals (BNST) ^[8], limbic structures, central nucleus of the amygdala ^[9], prefrontal cortex (PFC) ^[10],

hippocampus, nucleus accumbens, septum and certain brain stem nuclei ^[11]. Recently, the neuropeptide has attracted much attention for its role in anxiety-related behavior, stress regulation, sleep/wake patterns, social behavior and mental health ^[12]. More importantly, the recent progresses in OXT system have put this neuropeptide as an important treatment target for various psychiatric disorders, like anxiety disorders, stress, postpartum depression, bipolar disorder, social phobia, autism and schizophrenia ^[13].

The advancement in research revolutionizes our knowledge as recent fMRI studies revealed the insights of central OXT physiology [14, 15]. As breastfeeding mothers show an extended release of OXT, there is accumulating evidence that neuropeptide release during lactation decreases the stress response and social anxiety [16]. The pharmacological activation of central OXT through intranasal administration has been shown to positively affect core symptoms of autism spectrum disorders (ASD), especially socio-communicational deficits [17].

Many studies in humans have found the link between central activity and peripheral release of OXT ^[18], but the mechanism of this correlation is still unknown. These days the research has focused on developing agonists and antagonists of OXTr that can easily pene-

trate through BBB, because OXT once secreted from the pituitary gland, cannot re-enter the BBB ^[19]. It has been suggested that intranasal OXT bypasses the BBB and passes from clefts in the nasal epithelium to reach the cerebrospinal fluid (CSF) ^[20,21].

Several studies in line confirm the association of peripheral and central OXT. Studies on humans showed that high plasma OXT levels are associated with enhanced social behavior in ASD [22]. Another study links high plasma OXT with a social challenge, such as a distressed pair-bond relationship [23]. Stressful stimuli, such as conditioned fear stimuli, restraint stress [24] and several other psychosocial stressors are found to increase peripheral OXT levels [25]. However, higher plasma and salivary OXT is positively linked with the parents' and child's social behavior and communication [26]. Here we focus on the involvement of neuropeptide OXT in various psychological conditions such as stress, anxiety disorders, social phobia, autism and schizophrenia (Fig. 1) and discuss its potential use as a therapeutic agent.

2 The role of OXT in emotional and social behavior

Researchers for decades studied happiness as an

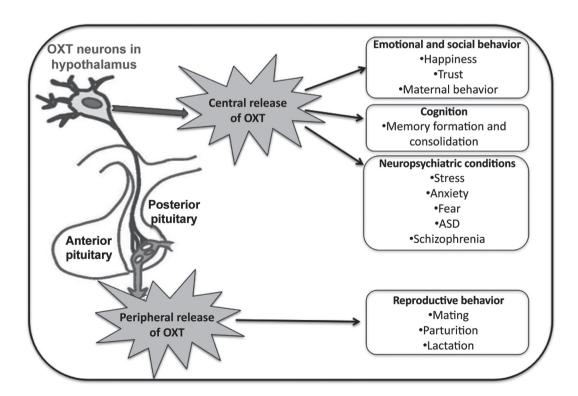


Fig. 1. Schematic diagram summarizing the central and peripheral roles of oxytocin (OXT). ASD: autism spectrum disorders.

emotion. Previously, there were two kinds of perceptions, one is that happiness occurs because of genetics and inherited factors while the second one is related to the environmental factor like high income, being active during life, education or having more friends. Recent studies have found that happiness is the outcome of multiple factors occurring due to the interaction between various endogenic and exogenic factors, and OXT is one of the important endogenic mediators [27]. The brain's emotion circuitry is a complex network that involves hippocampus, PFC, amygdala, anterior cingulate cortex and insular cortex; these structures are directly or indirectly connected to each other and involved in the emotion regulation. The presence of OXTr in these regions influences the notion that the OXT is one of the important mediators of emotional behavior such as maternal [3] and social behavior [28]. Furthermore, it has been shown that OXT enhances positive social interactions [29], social support and trust [30]. Collectively it assumes that OXT is involved in happiness regulation. Human studies revealed that the intranasal administration of OXT promotes trust across different tasks [31]. In addition, OXT is also involved in processing and regulation of emotional information [32].

A recent study demonstrates that intracerebroventricular (ICV) injections of OXT are associated with maternal behavior [33]. Similarly, impaired maternal behavior has been observed in OXTr knockout mice [34]. Further association between OXT and maternal behavior is also explored by using different agonists and antagonists of OXT [35]. Disruption in central OXT activity due to lesion and OXT antagonist also impairs maternal behavior [36]. Importantly, OXTr in nucleus accumbens is involved in the induction of maternal behavior in prairie voles [37]. As discussed earlier, OXT system is positively linked to parental behavior, in the same way, increased OXT levels in peripartum are associated with improved mother-infant relationship [38]. Moreover, early life insult seems to influence the OXT system later in life, i.e. adult women who experienced childhood abuse in their earlier life had decreased CSF OXT level [39].

Along with maternal care such as feeding, nest building and grooming of pups [40], OXT also facilitates prosocial behavior [41]. Clinical studies on healthy adults and neuropsychiatric patients demonstrate the effects of OXT on social cognition and emotional behavior. The results showed improved theory of mind and emotional empathy in healthy adults [42], and these results are also consistent with the autistic patients in addition to

improve affective speech comprehension [43, 44]. Taken together, both animals and humans studies have suggested that OXT enhances prosocial behavior.

Research has revealed that OXT is also involved in fear extinction. Amygdala is the main structure that regulates the fear responses, and OXT normalizes amygdala activity to reduce fear response by acting on central amygdala [45], which in turn inhibits excitatory flow from the amygdala to brainstem [9]. In addition, studies in rodents show that OXT inhibits the fear response by activating an inhibitory circuit within the amygdala [46]. These results are also consistent with human studies [47]. Moreover, the hyper-sociability behavior is associated with decreased amygdala activation [31], while increased amygdala activation is linked with social phobia and social avoidance [48]. In conclusion, OXT modulates functional network related to fear process by reducing amygdala activation (Fig. 2).

3 The role of OXT in cognition

Memory is one of the important consequences of brain function. For decades, scientists have focused on the phenomenon related to memory process. Several studies suggested the role of many neuropeptides in memory formation and OXT is thought to be one of the key neuropeptides that are involved in memory process [49]. The hippocampus is an important brain structure involved in memory formation and consolidation. As we discussed earlier, OXTr is largely expressed in the hippocampus, so it could be supposed that OXT may play a vital role in memory consolidation.

Correspondingly, a number of studies investigated the involvement of OXT in memory consolidation, and reported that OXT administration improves memory impairments [50]. Similarly, OXT treated hippocampal slices significantly sustain longer long-term potentiation (LTP) and have higher levels of phosphorylated CREB, and OXT also improves reference memory when centrally administered [51]. Thus, it is suggested that OXT acts directly on the hippocampus to enhance memory.

Besides this, there are some contradictory studies regarding OXT's role in memory. As OXT was injected into the structure involved in attention and memory i.e. nucleus basalis of Meynert (NBM), rats showed impaired spatial memory in Morris water maze (MWM) [52]. Moreover, injection of an OXT antagonist, atosiban, into NBM blocks the OXT-related impairments sug-

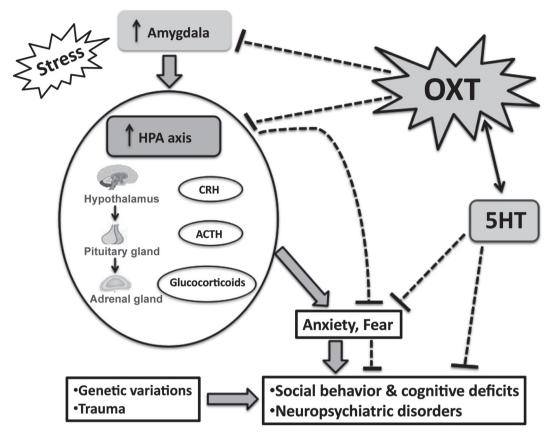


Fig. 2. Integrative model of the interactions of oxytocin (OXT) with stress, anxiety, fear and neuropsychiatric disorders. The activation of amygdala and hypothalamic-pituitary-adrenal (HPA) axis in response to stress induces anxiety, fear and social behavior deficits. The HPA axis and amygdala activation is prevalent in numerous neuropsychiatric disorders i.e. panic disorder, acute stress disorder, generalized anxiety disorder (GAD), social phobia, autism and schizophrenia. The altered OXT system and its variants have been observed in these neuropsychiatric disorders and these disorders are also linked with serotonin (5HT) dysfunction. OXT decreases amygdala activity and HPA axis over-activation by inhibiting the stress hormones, such as corticotropin releasing hormone (CRH), adrenocorticotropic hormone (ACTH), and glucocorticoid, thus improves social behavior deficits, anxiety behavior and various neurological conditions. OXT release or therapy positively affects the core symptoms of these disorders directly or by interacting with 5HT.

gesting that OXT exerts inhibitory spatial memory effects via NBM ^[52]. Furthermore, human studies in both males and females also show that OXT might be involved in spatial memory impairments. In this context, a recent study demonstrates that OXT induced memory impairments in individuals with higher levels of social anxiety ^[53], and another study on this issue reveals that when given to pregnant females to induce labor, OXT impairs the cognition and may be a risk factor for bipolar disorder in offspring ^[54].

In contrast, OXT gene knockout mice do not show any memory impairment in MWM, suggesting that OXT might not be involved in memory formation ^[55]. These contradictory studies about OXT's role in memory remain one of the important challenges for neuroscientists and further research is needed to explore the notion.

4 Neuroendocrine role of OXT

4.1 Stress regulation

Research has suggested that OXT plays a pivotal role in stress regulation through modulating the function of hypothalamic-pituitary-adrenal (HPA) axis ^[56]. As we know that HPA axis is the main neuroendocrine stress system, however, both inhibitory and excitatory effects of OXT have been found on HPA axis during the stress condition ^[57]. Furthermore, exogenous OXT administration significantly inhibits the stress-induced activity of HPA axis ^[58], in the same way, endogenous stimulation of OXT during lactation also has an inhibitory influence on stress response, such as decrease in basal plasma levels of adrenocorticotropic hormone (ACTH) and cortisol ^[59].

In addition, human studies also support the idea that

OXT causes relaxation state and reduces biological response to stress ^[60]. The authors show that OXT in combination with social support resulted in low salivary cortisol concentration and decreased the anxiety. For instance, a recent study reported that OXT attenuates the death of pancreatic beta cells in islets exposed to cytotoxic stresses ^[61]. Similarly, high plasma OXT levels have been found to decrease norepinephrine levels, reduce vasoconstriction and sympathetic reactivity in a response to stress, suggesting a direct link between OXT and stress regulation ^[62].

Besides this, central OXT controls stress responses by inhibiting HPA axis in gender-independent manner ^[63]. Several other studies also link OXT to stress regulation in rodents. For example, different stressful stimuli, such as conditioned fear stimuli and restraint stress, induce central and peripheral OXT release ^[24, 64]. In short, brain OXT might be involved in the control of neuroendocrine stress responses (summarized in Fig. 2).

As we discussed earlier, OXT has stress regulation effects in both rodents and humans. The effects of OXT on stress regulation are due to its direct or indirect inhibitory influnces on the amygdala ^[9, 65]. Moreover, neuroimaging studies revealed that intranasal OXT administration not only reduces amygdala activity ^[66], but also decreases functional coupling between the amygdala and brainstem ^[9, 67]. The neuropeptide OXT is currently attracting considerable attention as a result of the discovery of the amazing behavioral functions it regulates, especially in the context of social interactions and stress regulation. The collection of studies presented above supports the notion that OXT exerts beneficial effects and plays an important role in the modulation of stress regulation.

4.2 Interaction of OXT and serotonin system

OXT interacts with the monoaminergic, specifically serotonergic pathway to exert its anxiolytic and antidepressant effects. Furthermore, a recent study also confirmed the link between OXT and serotonin (5HT) [68]. Serotonin originates specifically from the raphe nuclei of the brainstem and projects to the paraventricular nucleus of hypothalamus (PVN) [69]. It is also shown that a large number of OXTr is expressed within raphe nucleus [70]. The stimulation of serotonin release activates hypothalamic OXT neurons [71], hence serotonin modulates OXT release and exaggerates OXT related neuroendocrine responses. In addition, OXT also mediates the effects of selective serotonin reuptake

inhibitors (SSRI) ^[72]. Related to this phenomenon, it has been reported that some SSRI such as citalopram and fluvoxamine play their antidepressant role via OXT release ^[73]. Acute administration of citalopram ^[74] and fenfluramine (5HT agonist) ^[75] significantly increases plasma OXT level. Therefore, it is suggested that OXT release is an important aspect of the pharmacological actions of SSRIs.

As discussed earlier, OXT is involved in the pathophysiology of various psychiatric illness, such as panic disorder, post-traumatic stress disorder, depression, obsessive-compulsive disorder (OCD), schizophrenia, and autism ^[76], while these disorders are also linked with serotonin dysfunction ^[77]. In this regard, the OXTr could be a potential therapeutic target. Therefore, further research is needed to explore the link between serotonin and OXT system in neuropsychiatric disorders.

4.3 Anxiety behavior

Brain OXT is an important regulator of anxiety behavior. A recent study confirmed the role of OXT, particularly in central amygdala and hypothalamic PVN, regarding the modulation of anxiety behavior [78]. Nowadays, research has focused on the therapeutic use of OXT against various anxiety related disorders. In this context, a study conducted on rats shows that OXT exerts its anxiolytic effects via activation of extracellular signal-regulated kinase 1/2 (ERK1/2) pathway [79]. However, OXTr agonist treatment activates ERK1/2 cascade specially in the hypothalamus, which may provide therapeutically relevant mechanisms. The anxiolytic role of OXT is further confirmed in various studies using OXTr antagonist [80], OXT deficient mice [81], and OXT treated animals showed a reduced anxiety behavior in the elevated plus maze.

Human studies also reveal the association of OXT with anxiety behavior regulation. fMRI studies on normal humans with no history of psychiatric disorders suggest that fear stimuli activate the amygdala while OXT administration decreases its activity. This amygdala activation is associated with the increased anxiety behavior while the decrease in its activity by OXT is related to anxiolytic behavior ^[67]. Physiologically, breast suckling is involved in increasing plasma OXT levels, decreasing cortisol level, or attenuating anxiety behavior, and is also associated with positive mood state ^[82]. By contrast, women who experienced childhood abuse in their earlier life had increased anxiety level and decreased CSF OXT concentration ^[39]. Similar

larly, intranasal administration of OXT improves symptoms of social impairments in patients with social anxiety disorder [47, 83]. This anxiolytic effect of OXT may be because of the projections of a large number of PVN OXT neurons to the various limbic brain regions including medial preoptic area, olfactory bulb, anterior hypothalamus, substantia nigra and amygdala. In short, it is clear that OXT is responsible for reducing the anxiety-like behavior.

5 The role of OXT in neuropsychiatric disorders

5.1 ASD

ASD is a group of developmental disorders with the specific pattern of abnormalities in communication, impairments in social cognition and repetitive behaviors [84]. Until now, there has been no effective treatment of ASD because it is a multifactorial disorder and its symptoms vary among patients. However, new therapeutic targets are being established because of advancement in the field of genomics and neuropathology of ASD. With regard to this, OXT signaling pathway is extensively studied to improve the social deficits in ASD and thought to be a potential therapeutic target for drug discovery [85]. Various mouse lines have been developed to study the link between OXT and ASD. OXT knockout mice show the similar social deficits that are found in ASD animal models, while OXT therapy rescues the social behavior and repetitive behavior in both OXT knockout and CD38 knockout mouse models [55, 86]. In addition to this, intravenous OXT administration in ASD patients is able to improve the repetitive behavior [87] and increase the ability to remember spoken words [44]. Hence, OXT pharmacotherapy brings a promising treatment for repetitive and affiliative behaviors in ASD patients.

Several other studies have argued that there might be a link between OXT system and ASD pathophysiology. Likewise, the association of decreased OXT level has been found with deficits in social behavior in ASD patients [88]. Recent studies demonstrate that OXT is involved in regulation of social behavior [41, 89], therefore social deficits in ASD patients may be because of the disruption in OXT system. Moreover, it is suggested that OXT system and variants of OXTr [90] are involved in the etiology of ASD. Similarly, single nucleotide polymorphisms (SNPs) in OXT [91] and OXTr genes are also found in patients with ASD. Currently, research

has focused on molecular mechanism underlying the association between OXT system and ASD.

However, clinical trial related to the association of OXT system and ASD reveals that synthetic OXT significantly improves social behaviors, specifically affective speech comprehension and repetitive behavior in ASD patients [92]. The authors show three possible mechanisms of OXT's action on ASD social symptoms; attenuate anxiety (inhibitory effects on the HPA axis and amygdala in the response to social stimuli), improve affiliative enthusiasm (interaction with the dopaminergic pathway and several regions of the social brain) and social stimuli salience. Moreover, another trial on autistic patients reports that OXT administration effectively reduces core symptoms of ASD especially social behavior deficits [93]. These clinical trials also prove the link between OXT system and ASD in humans. Hence, OXT might be a promising target for ASD drug discovery. Further research is needed to examine the optimal dosage, safety and efficacy of OXT therapy in ASD patients.

5.2 Schizophrenia

Schizophrenia is a chronic neuropsychiatric disorder characterized by a group of complex symptoms, i.e. negative symptoms (social behavior deficits), cognitive impairment (impaired working memory, attention, and disorganized thinking) and positive symptoms (hallucinations, delusions, and disorganized speech) [94]. As schizophrenia is a heterogeneous disorder, various neurotransmitter and neuropeptide systems are positively involved in its pathophysiology. OXT is found to be an important mediator that positively affects the symptoms associated with schizophrenia. Moreover, OXTr is widely expressed in the brain areas that are affected in schizophrenia, such as substantia nigra, basal ganglia, hippocampus, amygdala, septal nucleus and the nucleus of solitary tract [95]. Thus, expression of a large number of OXTr in these areas proves it to be an important therapeutic agent for the drug discovery in schizophrenia.

A recent study shows that OXT system is disrupted in schizophrenic patients ^[96]. Similarly, elevated plasma OXT levels are also found in patients with schizophrenia ^[97]. Recent studies suggest that SNPs of the OXT and OXTr genes are linked with symptom severity in patients with schizophrenia ^[98, 99]. OXT gene polymorphism (*rs2740204*) is involved in the negative symptoms of schizophrenia, and human studies find that this gene variant is significantly linked with clozapine

(serotonin agonist) treatment response ^[100]. These findings support the idea that OXT system works as an antidepressant and antipsychotic via attenuating the therapeutic response of serotonin. Furthermore, fMRI studies reveal that dysregulation of OXT system is associated with the social and cognitive deficits in schizophrenia ^[101] and exogenous OXT infusion significantly improves social cognition and social interaction in schizophrenia ^[102].

Several animal models exist to investigate the association of OXT system and neuropsychiatric disorders. For example, OXT and OXTr knockout mice have been extensively used to study the impact of disrupted OXT system in schizophrenia. Furthermore, OXT system is an important candidate against cognitive deficits that are reflective in schizophrenia. Besides cognitive deficits, impaired sensorimotor gating is also a common outcome of schizophrenia [103] and prepulse inhibition (PPI) of the startle reflex (defensive response to intense stimuli) is a tool to measure sensorimotor gating across species. Schizophrenic patients display reduced PPI of the startle reflex and OXT infusion rescues PPI in brown Norway rats that naturally have low PPI [104]. Clinical studies suggest that intranasal administration of OXT could be a beneficial candidate in schizophrenia as it is found to improve social behavior and cognitive dysfunctions in schizophrenic patients [105]. Similarly, a group of schizophrenic patients that received 3-week adjunctive treatment with intranasal OXT show improved verbal memory and positive and negative syndrome scale (PANSS) scores [106].

Briefly, these findings suggest that disrupted OXT system might be an underlying mechanism of negative, positive and cognitive symptoms of schizophrenia. In conclusion, it leads to the hope that OXT might be used as potential therapy to rescue the all three symptoms domains of schizophrenia.

6 Conclusion

In summary, molecular, cellular and behavioral studies determine a role of OXT neural pathways in learning and memory, social behavior, anxiety, stress and various neuropsychiatric disorders (Fig. 1). However, there is a contradiction between the effects of OXT on learning and memory, which needs further exploration. The pharmacodynamics of OXT administration is still unclear. In particular, further research is required to investigate the mechanism by which OXT penetrates

the brain following various routes of administration. These findings are fascinating and important but research in this field is in its adolescence. Therefore, further research is needed to elucidate the specific mechanisms through which OXT exerts these effects. We also need advanced approaches to translate laboratory studies into clinical outcomes. Human and animal models tremendously demonstrate the critical role of OXT system in neuropsychiatric disorders especially bipolar disorder, social phobia, autism, and schizophrenia. We now have the tools to test the above prediction that OXT can work as a therapeutic agent. In near future, it is hoped that we will gain a better understanding of the underlying neural mechanisms of OXT's antipsychotic role and provide new avenues for drug discovery in neuropsychiatric disorders.

* *

致谢: 本综述受国家自然科学基金项目(No. 31171355) 和广东省自然科学基金项目(No. S2011010003403, 2014A030313440)资助。

REFERENCES

- Macdonald K, Macdonald TM. The peptide that binds: a systematic review of oxytocin and its prosocial effects in humans. Harv Rev Psychiatry 2010; 18(1): 1–21.
- Zimmermann-Peruzatto JM, Lazzari VM, Agnes G, Becker RO, de Moura AC, Guedes RP, Lucion AB, Almeida S, Giovenardi M. The impact of oxytocin gene knockout on sexual behavior and gene expression related to neuroendocrine systems in the brain of female mice. Cell Mol Neurobiol 2016; DOI: 10.1007/s10571-016-0419-3.
- 3 Levy F. Neuroendocrine control of maternal behavior in non-human and human mammals. Ann Endocrinol (Paris) 2016; 77(2): 114–125.
- 4 Jesso S, Morlog D, Ross S, Pell MD, Pasternak SH, Mitchell DG, Kertesz A, Finger EC. The effects of oxytocin on social cognition and behaviour in frontotemporal dementia. Brain 2011; 134(Pt 9): 2493–2501.
- 5 Wisniewski K, Alagarsamy S, Galyean R, Tariga H, Thompson D, Ly B, Wisniewska H, Qi S, Croston G, Laporte R, Riviere PJ, Schteingart CD. New, potent, and selective peptidic oxytocin receptor agonists. J Med Chem 2014; 57(12): 5306–5317.
- 6 Kiss A, Mikkelsen JD. Oxytocin--anatomy and functional assignments: a minireview. Endocr Regul 2005; 39(3): 97– 105.
- 7 Carson DS, Guastella AJ, Taylor ER, McGregor IS. A brief

- history of oxytocin and its role in modulating psychostimulant effects. J Psychopharmacol 2013; 27(3): 231–247.
- 8 Dumais KM, Alonso AG, Immormino MA, Bredewold R, Veenema AH. Involvement of the oxytocin system in the bed nucleus of the stria terminalis in the sex-specific regulation of social recognition. Psychoneuroendocrinology 2016; 64: 79–88.
- 9 Huber D, Veinante P, Stoop R. Vasopressin and oxytocin excite distinct neuronal populations in the central amygdala. Science 2005; 308(5719): 245–248.
- 10 Smeltzer MD, Curtis JT, Aragona BJ, Wang Z. Dopamine, oxytocin, and vasopressin receptor binding in the medial prefrontal cortex of monogamous and promiscuous voles. Neurosci Lett 2006; 394(2): 146–151.
- 11 Schorscher-Petcu A, Dupre A, Tribollet E. Distribution of vasopressin and oxytocin binding sites in the brain and upper spinal cord of the common marmoset. Neurosci Lett 2009; 461(3): 217–222.
- 12 Dumais KM, Alonso AG, Bredewold R, Veenema AH. Role of the oxytocin system in amygdala subregions in the regulation of social interest in male and female rats. Neuroscience 2016; 330: 138–149.
- 13 Shamay-Tsoory S, Young LJ. Understanding the oxytocin system and its relevance to psychiatry. Biol Psychiatry 2016; 79(3): 150–152.
- 14 Wigton R, Radua J, Allen P, Averbeck B, Meyer-Lindenberg A, McGuire P, Shergill SS, Fusar-Poli P. Neurophysiological effects of acute oxytocin administration: systematic review and meta-analysis of placebo-controlled imaging studies. J Psychiatry Neurosci 2015; 40(1): E1–E22.
- 15 Ferris CF, Yee JR, Kenkel WM, Dumais KM, Moore K, Veenema AH, Kulkarni P, Perkybile AM, Carter CS. Distinct BOLD activation profiles following central and peripheral oxytocin administration in awake rats. Front Behav Neurosci 2015; 9: 245.
- 16 Murgatroyd CA, Taliefar M, Bradburn S, Carini LM, Babb JA, Nephew BC. Social stress during lactation, depressed maternal care, and neuropeptidergic gene expression. Behav Pharmacol 2015; 26(7 Spec No): 642–653.
- 17 Watanabe T, Abe O, Kuwabara H, Yahata N, Takano Y, Iwashiro N, Natsubori T, Aoki Y, Takao H, Kawakubo Y, Kamio Y, Kato N, Miyashita Y, Kasai K, Yamasue H. Mitigation of sociocommunicational deficits of autism through oxytocin-induced recovery of medial prefrontal activity: a randomized trial. JAMA Psychiatry 2014; 71(2): 166–175.
- Modi ME, Majchrzak MJ, Fonseca KR, Doran A, Osgood S, Vanase-Frawley M, Feyfant E, McInnes H, Darvari R, Buhl DL, Kablaoui NM. Peripheral administration of a longacting peptide OT receptor agonist inhibits fear induced freezing. J Pharmacol Exp Ther 2016; 358(2): 164–172.

- 19 Chini B, Manning M. Agonist selectivity in the oxytocin/ vasopressin receptor family: new insights and challenges. Biochem Soc Trans 2007; 35(Pt 4): 737–741.
- 20 Dal Monte O, Noble PL, Turchi J, Cummins A, Averbeck BB. CSF and blood oxytocin concentration changes following intranasal delivery in macaque. PLoS One 2014; 9(8): e103677.
- 21 Illum L. Transport of drugs from the nasal cavity to the central nervous system. Eur J Pharm Sci 2000; 11(1): 1–18.
- 22 Meyer-Lindenberg A, Domes G, Kirsch P, Heinrichs M. Oxytocin and vasopressin in the human brain: social neuropeptides for translational medicine. Nat Rev Neurosci 2011; 12(9): 524–538.
- 23 Taylor SE, Saphire-Bernstein S, Seeman TE. Are plasma oxytocin in women and plasma vasopressin in men biomarkers of distressed pair-bond relationships? Psychol Sci 2010; 21(1): 3–7.
- 24 Onaka T. Neural pathways controlling central and peripheral oxytocin release during stress. J Neuroendocrinol 2004; 16(4): 308–312.
- 25 Hoge EA, Pollack MH, Kaufman RE, Zak PJ, Simon NM. Oxytocin levels in social anxiety disorder. CNS Neurosci Ther 2008; 14(3): 165–170.
- 26 Feldman R, Weller A, Zagoory-Sharon O, Levine A. Evidence for a neuroendocrinological foundation of human affiliation: plasma oxytocin levels across pregnancy and the postpartum period predict mother-infant bonding. Psychol Sci 2007; 18(11): 965–970.
- 27 Krol KM, Kamboj SK, Curran HV, Grossmann T. Breast-feeding experience differentially impacts recognition of happiness and anger in mothers. Sci Rep 2014; 4: 7006.
- 28 Fujiwara T, Sanada M, Kofuji T, Akagawa K. Unusual social behavior in HPC-1/syntaxin1A knockout mice is caused by disruption of the oxytocinergic neural system. J Neurochem 2016; 138(1): 117–123.
- 29 Bartz JA, Zaki J, Bolger N, Ochsner KN. Social effects of oxytocin in humans: context and person matter. Trends Cogn Sci 2011; 15(7): 301–309.
- 30 Kosfeld M, Heinrichs M, Zak PJ, Fischbacher U, Fehr E. Oxytocin increases trust in humans. Nature 2005; 435(7042): 673–676.
- 31 Baumgartner T, Heinrichs M, Vonlanthen A, Fischbacher U, Fehr E. Oxytocin shapes the neural circuitry of trust and trust adaptation in humans. Neuron 2008; 58(4): 639–650.
- 32 Shamay-Tsoory SG. The neural bases for empathy. Neuroscientist 2011; 17(1): 18–24.
- 33 Gu V, Feeley N, Gold I, Hayton B, Robins S, Mackinnon A, Samuel S, Carter CS, Zelkowitz P. Intrapartum synthetic oxytocin and its effects on maternal well-being at 2 months postpartum. Birth 2016; 43(1): 28–35.

- 34 Takayanagi Y, Yoshida M, Bielsky IF, Ross HE, Kawamata M, Onaka T, Yanagisawa T, Kimura T, Matzuk MM, Young LJ, Nishimori K. Pervasive social deficits, but normal parturition, in oxytocin receptor-deficient mice. Proc Natl Acad Sci U S A 2005; 102(44): 16096–16101.
- 35 Bosch OJ, Neumann ID. Both oxytocin and vasopressin are mediators of maternal care and aggression in rodents: from central release to sites of action. Horm Behav 2012; 61(3): 293–303.
- 36 Champagne F, Diorio J, Sharma S, Meaney MJ. Naturally occurring variations in maternal behavior in the rat are associated with differences in estrogen-inducible central oxytocin receptors. Proc Natl Acad Sci U S A 2001; 98(22): 12736–12741.
- 37 Olazabal DE, Young LJ. Oxytocin receptors in the nucleus accumbens facilitate "spontaneous" maternal behavior in adult female prairie voles. Neuroscience 2006; 141(2): 559–568.
- 38 Feldman R, Gordon I, Zagoory-Sharon O. Maternal and paternal plasma, salivary, and urinary oxytocin and parentinfant synchrony: considering stress and affiliation components of human bonding. Dev Sci 2011; 14(4): 752–761.
- 39 Heim C, Young LJ, Newport DJ, Mletzko T, Miller AH, Nemeroff CB. Lower CSF oxytocin concentrations in women with a history of childhood abuse. Mol Psychiatry 2009; 14(10): 954–958.
- 40 Munetomo A, Ishii H, Miyamoto T, Sakuma Y, Kondo Y. Puerperal and parental experiences alter rat preferences for pup odors via changes in the oxytocin system. J Reprod Dev 2016; 62(1): 17–27.
- 41 Evans SL, Dal Monte O, Noble P, Averbeck BB. Intranasal oxytocin effects on social cognition: a critique. Brain Res 2014; 1580: 69–77.
- 42 Hurlemann R, Patin A, Onur OA, Cohen MX, Baumgartner T, Metzler S, Dziobek I, Gallinat J, Wagner M, Maier W, Kendrick KM. Oxytocin enhances amygdala-dependent, socially reinforced learning and emotional empathy in humans. J Neurosci 2010; 30(14): 4999–5007.
- 43 Guastella AJ, Einfeld SL, Gray KM, Rinehart NJ, Tonge BJ, Lambert TJ, Hickie IB. Intranasal oxytocin improves emotion recognition for youth with autism spectrum disorders. Biol Psychiatry 2010; 67(7): 692–694.
- 44 Hollander E, Bartz J, Chaplin W, Phillips A, Sumner J, Soorya L, Anagnostou E, Wasserman S. Oxytocin increases retention of social cognition in autism. Biol Psychiatry 2007; 61(4): 498–503.
- 45 Kanat M, Heinrichs M, Mader I, van Elst LT, Domes G. Oxytocin modulates amygdala reactivity to masked fearful eyes. Neuropsychopharmacology 2015; 40(11): 2632–2638.
- 46 Adolphs R, Gosselin F, Buchanan TW, Tranel D, Schyns P,

- Damasio AR. A mechanism for impaired fear recognition after amygdala damage. Nature 2005; 433(7021): 68–72.
- 47 Labuschagne I, Phan KL, Wood A, Angstadt M, Chua P, Heinrichs M, Stout JC, Nathan PJ. Oxytocin attenuates amygdala reactivity to fear in generalized social anxiety disorder. Neuropsychopharmacology 2010; 35(12): 2403– 2413.
- 48 Stein MB, Goldin PR, Sareen J, Zorrilla LT, Brown GG. Increased amygdala activation to angry and contemptuous faces in generalized social phobia. Arch Gen Psychiatry 2002; 59(11): 1027–1034.
- 49 Lee SY, Park SH, Chung C, Kim JJ, Choi SY, Han JS. Oxytocin protects hippocampal memory and plasticity from uncontrollable stress. Sci Rep 2015; 5: 18540.
- 50 Kirsch P. Oxytocin in the socioemotional brain: implications for psychiatric disorders. Dialogues Clin Neurosci 2015; 17(4): 463–476.
- 51 Tomizawa K, Iga N, Lu YF, Moriwaki A, Matsushita M, Li ST, Miyamoto O, Itano T, Matsui H. Oxytocin improves long-lasting spatial memory during motherhood through MAP kinase cascade. Nat Neurosci 2003; 6(4): 384–390.
- 52 Wu W, Yu LC. Roles of oxytocin in spatial learning and memory in the nucleus basalis of Meynert in rats. Regul Pept 2004; 120(1–3): 119–125.
- 53 Tabak BA, Meyer ML, Dutcher JM, Castle E, Irwin MR, Lieberman MD, Eisenberger NI. Oxytocin, but not vasopressin, impairs social cognitive ability among individuals with higher levels of social anxiety: a randomized controlled trial. Psychoneuroendocrinology 2015; 51: 253–261.
- 54 Freedman D, Brown AS, Shen L, Schaefer CA. Perinatal oxytocin increases the risk of offspring bipolar disorder and childhood cognitive impairment. J Affect Disord 2015; 173: 65–72.
- 55 Ferguson JN, Young LJ, Hearn EF, Matzuk MM, Insel TR, Winslow JT. Social amnesia in mice lacking the oxytocin gene. Nat Genet 2000; 25(3): 284–288.
- 56 Sivukhina EV, Jirikowski GF. Magnocellular hypothalamic system and its interaction with the hypothalamo-pituitary-adrenal axis. Steroids 2016; 111: 21–28.
- 57 Cavanaugh J, Carp SB, Rock CM, French JA. Oxytocin modulates behavioral and physiological responses to a stressor in marmoset monkeys. Psychoneuroendocrinology 2015; 66: 22–30.
- 58 Cardoso C, Kingdon D, Ellenbogen MA. A meta-analytic review of the impact of intranasal oxytocin administration on cortisol concentrations during laboratory tasks: moderation by method and mental health. Psychoneuroendocrinology 2014; 49: 161–170.
- 59 Cox EQ, Stuebe A, Pearson B, Grewen K, Rubinow D, Meltzer-Brody S. Oxytocin and HPA stress axis reactivity in

- postpartum women. Psychoneuroendocrinology 2015; 55: 164–172.
- 60 Heinrichs M, Baumgartner T, Kirschbaum C, Ehlert U. Social support and oxytocin interact to suppress cortisol and subjective responses to psychosocial stress. Biol Psychiatry 2003; 54(12): 1389–1398.
- 61 Watanabe S, Wei FY, Matsunaga T, Matsunaga N, Kaitsuka T, Tomizawa K. Oxytocin protects against stress-induced cell death in murine pancreatic beta-cells. Sci Rep 2016; 6: 25185
- 62 Grewen KM, Light KC. Plasma oxytocin is related to lower cardiovascular and sympathetic reactivity to stress. Biol Psychol 2011; 87(3): 340–349.
- 63 Neumann ID, Wigger A, Torner L, Holsboer F, Landgraf R. Brain oxytocin inhibits basal and stress-induced activity of the hypothalamo-pituitary-adrenal axis in male and female rats: partial action within the paraventricular nucleus. J Neuroendocrinol 2000; 12(3): 235–243.
- 64 Yoshida M, Takayanagi Y, Onaka T. The medial amygdalamedullary PrRP-synthesizing neuron pathway mediates neuroendocrine responses to contextual conditioned fear in male rodents. Endocrinology 2014; 155(8): 2996–3004.
- 65 Koch SB, van Zuiden M, Nawijn L, Frijling JL, Veltman DJ, Olff M. Intranasal oxytocin administration dampens amygdala reactivity towards emotional faces in male and female ptsd patients. Neuropsychopharmacology 2016; 41(6): 1495–1504.
- 66 Koch SB, van Zuiden M, Nawijn L, Frijling JL, Veltman DJ, Olff M. Intranasal oxytocin normalizes amygdala functional connectivity in post-traumatic stress disorder. Neuropsychopharmacology 2016; 41(8): 2041–2051.
- 67 Kirsch P, Esslinger C, Chen Q, Mier D, Lis S, Siddhanti S, Gruppe H, Mattay VS, Gallhofer B, Meyer-Lindenberg A. Oxytocin modulates neural circuitry for social cognition and fear in humans. J Neurosci 2005; 25(49): 11489–11493.
- 68 Mottolese R, Redoute J, Costes N, Le Bars D, Sirigu A. Switching brain serotonin with oxytocin. Proc Natl Acad Sci U S A 2014; 111(23): 8637–8642.
- 69 Spaethling JM, Piel D, Dueck H, Buckley PT, Morris JF, Fisher SA, Lee J, Sul JY, Kim J, Bartfai T, Beck SG, Eberwine JH. Serotonergic neuron regulation informed by *in vivo* single-cell transcriptomics. FASEB J 2014; 28(2): 771–780.
- 70 Yoshida M, Takayanagi Y, Inoue K, Kimura T, Young LJ, Onaka T, Nishimori K. Evidence that oxytocin exerts anxiolytic effects via oxytocin receptor expressed in serotonergic neurons in mice. J Neurosci 2009; 29(7): 2259–2271.
- 71 Marazziti D, Baroni S, Giannaccini G, Betti L, Massimetti G, Carmassi C, Catena-Dell'Osso M. A link between oxytocin and serotonin in humans: supporting evidence from periph-

- eral markers. Eur Neuropsychopharmacol 2012; 22(8): 578–583.
- 72 Emiliano AB, Cruz T, Pannoni V, Fudge JL. The interface of oxytocin-labeled cells and serotonin transporter-containing fibers in the primate hypothalamus: a substrate for SSRIs therapeutic effects? Neuropsychopharmacology 2007; 32(5): 977–988.
- 73 de Jong TR, Veening JG, Olivier B, Waldinger MD. Oxytocin involvement in SSRI-induced delayed ejaculation: a review of animal studies. J Sex Med 2007; 4(1): 14–28.
- 74 Uvnas-Moberg K, Bjokstrand E, Hillegaart V, Ahlenius S. Oxytocin as a possible mediator of SSRI-induced antidepressant effects. Psychopharmacology (Berl) 1999; 142(1): 95–101.
- 75 Lee R, Garcia F, van de Kar LD, Hauger RD, Coccaro EF. Plasma oxytocin in response to pharmaco-challenge to D-fenfluramine and placebo in healthy men. Psychiatry Res 2003; 118(2): 129–136.
- 76 Romano A, Tempesta B, Micioni Di Bonaventura MV, Gaetani S. From autism to eating disorders and more: the role of oxytocin in neuropsychiatric disorders. Front Neurosci 2015; 9: 497.
- 77 Terry AV, Jr., Buccafusco JJ, Wilson C. Cognitive dysfunction in neuropsychiatric disorders: selected serotonin receptor subtypes as therapeutic targets. Behav Brain Res 2008; 195(1): 30–38.
- 78 Chen X, Hackett PD, DeMarco AC, Feng C, Stair S, Haroon E, Ditzen B, Pagnoni G, Rilling JK. Effects of oxytocin and vasopressin on the neural response to unreciprocated cooperation within brain regions involved in stress and anxiety in men and women. Brain Imaging Behav 2016; 10(2): 581–593.
- 79 Blume A, Bosch OJ, Miklos S, Torner L, Wales L, Waldherr M, Neumann ID. Oxytocin reduces anxiety via ERK1/2 activation: local effect within the rat hypothalamic paraventricular nucleus. Eur J Neurosci 2008; 27(8): 1947–1956.
- 80 Neumann ID, Torner L, Wigger A. Brain oxytocin: differential inhibition of neuroendocrine stress responses and anxietyrelated behaviour in virgin, pregnant and lactating rats. Neuroscience 2000; 95(2): 567–575.
- 81 Amico JA, Mantella RC, Vollmer RR, Li X. Anxiety and stress responses in female oxytocin deficient mice. J Neuro-endocrinol 2004; 16(4): 319–324.
- 82 Handlin L, Jonas W, Petersson M, Ejdeback M, Ransjo-Arvidson AB, Nissen E, Uvnas-Moberg K. Effects of sucking and skin-to-skin contact on maternal ACTH and cortisol levels during the second day postpartum-influence of epidural analgesia and oxytocin in the perinatal period. Breastfeed Med 2009; 4(4): 207–220.
- 83 Guastella AJ, Howard AL, Dadds MR, Mitchell P, Carson

- DS. A randomized controlled trial of intranasal oxytocin as an adjunct to exposure therapy for social anxiety disorder. Psychoneuroendocrinology 2009; 34(6): 917–923.
- 84 Nazeer A, Ghaziuddin M. Autism spectrum disorders: clinical features and diagnosis. Pediatr Clin North Am 2012; 59(1): 19–25, ix.
- 85 Young LJ, Barrett CE. Neuroscience. Can oxytocin treat autism? Science 2015; 347(6224): 825–826.
- 86 Higashida H, Yokoyama S, Huang JJ, Liu L, Ma WJ, Akther S, Higashida C, Kikuchi M, Minabe Y, Munesue T. Social memory, amnesia, and autism: brain oxytocin secretion is regulated by NAD+ metabolites and single nucleotide polymorphisms of CD38. Neurochem Int 2012; 61(6): 828–838.
- 87 Hollander E, Novotny S, Hanratty M, Yaffe R, DeCaria CM, Aronowitz BR, Mosovich S. Oxytocin infusion reduces repetitive behaviors in adults with autistic and Asperger's disorders. Neuropsychopharmacology 2003; 28(1): 193–198
- 88 Husarova VM, Lakatosova S, Pivovarciova A, Babinska K, Bakos J, Durdiakova J, Kubranska A, Ondrejka I, Ostatnikova D. Plasma oxytocin in children with autism and its correlations with behavioral parameters in children and parents. Psychiatry Investig 2016; 13(2): 174–183.
- 89 Caldwell HK, Albers HE. Oxytocin, vasopressin, and the motivational forces that drive social behaviors. Curr Top Behav Neurosci 2016; 27: 51–103.
- 90 Parker KJ, Garner JP, Libove RA, Hyde SA, Hornbeak KB, Carson DS, Liao CP, Phillips JM, Hallmayer JF, Hardan AY. Plasma oxytocin concentrations and OXTR polymorphisms predict social impairments in children with and without autism spectrum disorder. Proc Natl Acad Sci U S A 2014; 111(33): 12258–12263.
- 91 Yrigollen CM, Han SS, Kochetkova A, Babitz T, Chang JT, Volkmar FR, Leckman JF, Grigorenko EL. Genes controlling affiliative behavior as candidate genes for autism. Biol Psychiatry 2008; 63(10): 911–916.
- 92 Gauthier C, Doyen C, Amado I, Loo H, Gaillard R. Therapeutic effects of oxytocin in autism: Current status of the research. Encephale 2016; 42(1): 24–31 (in French with English acstract).
- 93 Watanabe T, Kuroda M, Kuwabara H, Aoki Y, Iwashiro N, Tatsunobu N, Takao H, Nippashi Y, Kawakubo Y, Kunimatsu A, Kasai K, Yamasue H. Clinical and neural effects of six-week administration of oxytocin on core symptoms of autism. Brain 2015; 138(Pt 11): 3400–3412.
- 94 Green MF, Penn DL, Bentall R, Carpenter WT, Gaebel W, Gur RC, Kring AM, Park S, Silverstein SM, Heinssen R. Social cognition in schizophrenia: an NIMH workshop on definitions, assessment, and research opportunities. Schizo-

- phr Bull 2008; 34(6): 1211-1220.
- 95 Dumais KM, Veenema AH. Vasopressin and oxytocin receptor systems in the brain: Sex differences and sex-specific regulation of social behavior. Front Neuroendocrinol 2016; 40: 1–23.
- 96 Strauss GP, Keller WR, Koenig JI, Gold JM, Frost KH, Buchanan RW. Plasma oxytocin levels predict social cue recognition in individuals with schizophrenia. Schizophr Res 2015; 162(1–3): 47–51.
- 97 Strauss GP, Keller WR, Koenig JI, Gold JM, Ossenfort KL, Buchanan RW. Plasma oxytocin levels predict olfactory identification and negative symptoms in individuals with schizophrenia. Schizophr Res 2015; 162(1–3): 57–61.
- 98 Watanabe Y, Kaneko N, Nunokawa A, Shibuya M, Egawa J, Someya T. Oxytocin receptor (OXTR) gene and risk of schizophrenia: case-control and family-based analyses and meta-analysis in a Japanese population. Psychiatry Clin Neurosci 2012; 66(7): 622.
- 99 Montag C, Brockmann EM, Bayerl M, Rujescu D, Muller DJ, Gallinat J. Oxytocin and oxytocin receptor gene polymorphisms and risk for schizophrenia: a case-control study. World J Biol Psychiatry 2013; 14(7): 500–508.
- 100 Souza RP, de Luca V, Meltzer HY, Lieberman JA, Kennedy JL. Schizophrenia severity and clozapine treatment outcome association with oxytocinergic genes. Int J Neuropsychopharmacol 2010; 13(6): 793–798.
- 101 Rosenfeld AJ, Lieberman JA, Jarskog LF. Oxytocin, dopamine, and the amygdala: a neurofunctional model of social cognitive deficits in schizophrenia. Schizophr Bull 2011; 37(5): 1077–1087.
- 102 Rubin LH, Carter CS, Drogos L, Pournajafi-Nazarloo H, Sweeney JA, Maki PM. Peripheral oxytocin is associated with reduced symptom severity in schizophrenia. Schizophr Res 2010; 124(1–3): 13–21.
- 103 Perry W, Feifel D, Minassian A, Bhattacharjie I, Braff DL. Information processing deficits in acutely psychotic schizophrenia patients medicated and unmedicated at the time of admission. Am J Psychiatry 2002; 159(8): 1375–1381.
- 104 Feifel D, Shilling PD, Belcher AM. The effects of oxytocin and its analog, carbetocin, on genetic deficits in sensorimotor gating. Eur Neuropsychopharmacol 2012; 22(5): 374–378.
- 105 Pedersen CA, Gibson CM, Rau SW, Salimi K, Smedley KL, Casey RL, Leserman J, Jarskog LF, Penn DL. Intranasal oxytocin reduces psychotic symptoms and improves Theory of Mind and social perception in schizophrenia. Schizophr Res 2011; 132(1): 50–53.
- 106 Feifel D, Macdonald K, Cobb P, Minassian A. Adjunctive intranasal oxytocin improves verbal memory in people with schizophrenia. Schizophr Res 2012; 139(1–3): 207–210.