

# Pharmacological profile of three different $\gamma$ -butyrolactone derivatives in mice

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**Abstract:** The paper presents the pharmacological profile of the analgesic activity of 3 derivatives of  $\gamma$ -butyrolactone (GBL), marked with the symbols: LMOR, LHEL and L8. In view of the available data indicating potent antinociceptive activity of some GBL, analgesic activity of these compounds was investigated in a few screening models, namely the hot plate, writhing and capsaicin tests. Moreover, spontaneous locomotor activity, local anesthetic activity in modified tail immersion test and acute toxicity were also evaluated. The results of the experiments confirm antinociceptive activity in a vast range of rodent models of pain, especially pain induced by thermal (the hot plate and modified tail immersion tests) or chemical (phenylbenzoquinone but not capsaicin) stimuli.

**Key words:** hot plate, phenylbenzoquinone-induced writhing, capsaicin, tail immersion, toxicity, mice

## INTRODUCTION

The complex process of detection and sensation of pain, namely the nociception consists of 4 phases: transduction, transmission, modulation and perception [1-3]. Transduction is the process of detection of a painful stimulus, transmission of which enables the modulation (either enhancement or inhibition) of the stimulus within the central nervous system. Perception, in turn, involves the limbic system and the cortex.

Although medical intervention (i.e. the use of analgesic drugs) is possible at almost every stage of this process, treatment of pain that accompanies many diseases, especially neuropathic pain (which is a consequence of nerve injury) still remains an important medical problem. Currently available drugs that are able to diminish pain can be divided into 3 groups: nonsteroidal anti-inflammatory drugs (NSAIDs, cyclooxygenase inhibitors) which possess anti-inflammatory, antipyretic and antinociceptive properties; opioids which are ligands for opioid receptors ( $\mu$ ,  $\delta$ ,  $\kappa$ ) and a group of analgesic adjuvants. This last group is of special interest for the contemporary and future therapy of pain – not only because of its variety (antidepressants, antiepileptics, hormones,  $\alpha_2$ -adrenomimetic agents belong to it), but also in view of heterogeneous mechanisms which may, as a final result, heal the pain of different origins and diminish the patient's suffering [1-7].

There are some reports indicating that anticonvulsants are particularly effective in some kinds of pain [8, 9]. Moreover, some antiepileptic agents (e.g. gabapentin, pregabalin, lamotrigine, tiagabine, zonisamide) have been shown to be effective in animal models of pain [10, 11], and their mechanism of action (voltage-gated ion channel blockade) seems to be a potential and very promising target for upcoming drugs. Of note is the fact that several groups of antidepressants (e.g. tricyclic antidepressants), similarly to certain opioids

(tramadol), can modulate pain transmission influencing descending antinociceptive pathways deriving from the periaqueductal grey and rostroventral medulla.

Previously, several derivatives of  $\alpha$ -substituted *N*-benzylamides of  $\gamma$ -hydroxybutyric acid (GHB) were reported to display anticonvulsant activity [12-15]. On the other hand, some derivatives of  $\gamma$ -butyrolactone (GBL) – a cyclic precursor of GHB [16] – possess anticonvulsant and analgesic activity [17-19].

Currently, we have extended our investigation to a group of new 3-mono-substituted derivatives of GBL with potential analgesic activity. Structures containing pharmacophoric  $\gamma$ -butyrolactone moiety with heterocyclic (isochinolinyl, morpholinyl or arylpiperazine) group were designed. The latter is a very well-known fragment constituting a numerous group of serotonin (5HT)<sub>1A</sub> receptor ligands [20], and arylpiperazine derivatives have been reported to exert potent and efficacious analgesic activity [21].

## MATERIALS AND METHODS

**Chemicals.** Three derivatives of  $\gamma$ -butyrolactone (LMOR, LHEL and L8) were synthesized for the experiments, suspended in a 0.5% methylcellulose solution (Loba Chemie, Germany) and administered by the intraperitoneal (*ip*) route 30 min before the experiments, excepting tail immersion and acute toxicity tests. Control animals were given an appropriate amount of vehicle (0.5% methylcellulose suspension). Phenylbenzoquinone (INC Pharmaceuticals, Inc. NY) was prepared as a 0.02% solution. Morphine (Morphinum hydrochloricum, Polfa Kutno), acetylsalicylic acid (ASA, Polpharma), lignocaine (Lignocainum hydrochloricum 1%, WZF Polfa Warsaw) and mepivacaine (Maverin 2%, Rhone-Poulenc Rorer) were used as reference drugs. Capsaicin was purchased from Sigma-Aldrich and administered intraplantarly (*ip*) to the mouse paw.

**Animals.** For the behavioural experiments, adult male Albino Swiss mice weighing 18-30 g were used. The animals were kept in groups of 15 mice in cages at a room temperature of  $22 \pm 2^\circ\text{C}$ , under a light/dark cycle and had free access to food

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and water before the experiments. Each experimental group consisted of 6-12 animals/dose and all the animals were used only once. For all the experiments the mice were habituated to the vivarium for a minimum of 72 h before experimentation. The experiments were performed between 08:00-15:00. The procedures were approved by the Local Ethics Committee in Cracow.

**The hot plate test.** In the hot plate test the mice were treated intraperitoneally either with the compound or the vehicle 30 min before being placed on a hot plate apparatus (Hot Plate 2A Type Omega) with the temperature controlled for 55-56°C. The time until the animal licked its back paws or jumps was recorded by means of a stop-watch [22]. Centrally-acting analgesics such as morphine prolonged the reaction time, whereas those acting peripherally (NSAIDs) showed no or minimal activity in this test [23].

**The writhing test.** Conversely, NSAIDs are highly antinociceptive in the writhing test in which mice are treated with 0.25 ml of 0.02% phenylbenzoquinone solution 30 min after *ip* administration of the investigated compound or vehicle. The mice were then placed individually into glass beakers and 5 min allowed to elapse. After that period of time, a 10-min observation was conducted on each animal – the number of characteristic writhes was counted. The analgesic effect of the tested substances consisted in diminishing the number of writhes observed [24].

**Spontaneous locomotor activity.** The locomotor activity was assessed by means of cages supplied with photocells, counting the number of laps made by the animal. In the present study, only one dose was tested: the ED<sub>50</sub> from the hot plate test. In the statistical analysis data obtained 60 min after *ip* administration of the investigated compound were presented.

**Capsaicin-induced pain.** After an adaptation period (20 min), 20  $\mu$ l of capsaicin solution prepared in saline (1.6  $\mu$ g capsaicin per mouse paw) was injected intraplantarly (*ip*) in the ventral surface of the right hind paw 30 min after the tested compound had been administered *ip*.

The animals were observed individually for 5 min following capsaicin injection. The amount of time spent licking the injected paw was recorded with a chronometer, and was considered as indicative of nociception [25].

**The tail immersion test (modification).** The heat method which is used for evaluating the systemic analgesic activity can also be used with a slight modification to determine whether a compound possesses local anaesthetic activity. The method was conducted by injecting subcutaneously (*sc*) the investigated substance in a constant volume of 0.2 ml about 1 cm from the root of the mouse tail. 15 min later the 3 cm distal part of the tail was immersed in water at a controlled temperature of 50  $\pm$  0.5°C. The reaction time (i.e. time at which the tail was pulled away) was measured by means of a chronometer. The whole observation time was limited to 20 s [26].

**Acute toxicity.** Acute toxicity was investigated in mice according to the method described by Litchfield and Wilcoxon [27]. In the experiment, each group of mice consisted of 6 animals. Behavioural observations were conducted and the

total mortality rate assessed during a 72 h period. Finally, the LD<sub>50</sub> value was established.

**Statistical analysis.** The data were expressed as mean  $\pm$  SEM (standard error). To compare the results between the 2 different groups of animals (investigated compound group *vs.* the control group) in the writhing, hot plate and tail immersion tests, the t-Student test was used. In the capsaicin induced nociception the statistical significance was assessed by means of one-way ANOVA, followed by the Newman-Keul's test. The difference of means was statistically significant if  $p < 0.05$ .

## RESULTS

**The hot plate test.** From all the investigated compounds, LMOR proved to possess the strongest, dose-dependent analgesic efficacy reducing the nociceptive response to the thermal stimulus applied to the mouse paw in the hot plate test. The ED<sub>50</sub> value for LMOR was 9.92 mg/kg, which was only 3 times higher than this value obtained for morphine (3.39 mg/kg) used as the drug of reference. LHEL and L8 in a dose dependent manner also diminished the animals' reaction. The results are shown in Table 1.

**Table 1** The antinociceptive activity of the compounds in the hot plate test.

Compound	Dose [mg/kg]	Latency [s] $\pm$ SEM	Effect (%)	ED <sub>50</sub> [mg/kg]
Control	0.5%MC	10.85 $\pm$ 0.78	-	-
LMOR	3.75	13.24 $\pm$ 1.09	22.03	9.92 (4.88-20.13)
	15	17.61 $\pm$ 2.36 <sup>c</sup>	62.30	
	30	19.69 $\pm$ 2.41 <sup>d</sup>	81.47	
L8	30	13.83 $\pm$ 2.16	27.47	32.48 (29.89-35.28)
	33.75	18.36 $\pm$ 1.51 <sup>d</sup>	69.22	
	37.5	19.09 $\pm$ 1.67 <sup>d</sup>	75.94	
	45	26.29 $\pm$ 3.66 <sup>d</sup>	142.30	
LHEL	30	12.87 $\pm$ 1.88	18.62	39.81 (33.50-47.31)
	45	17.63 $\pm$ 2.31 <sup>c</sup>	62.49	
	60	20.81 $\pm$ 2.99 <sup>d</sup>	91.80	
Control	0.5%MC	18.40 $\pm$ 1.00	-	-
MORPHINE	1	19.4 $\pm$ 2.1	5.4	3.39 (2.24-5.12)
	3	29.9 $\pm$ 6.0 <sup>a</sup>	60.9	
	6	30.6 $\pm$ 3.9 <sup>b</sup>	66.3	

Significant difference compared to the vehicle-treated group (methylcellulose):

<sup>a</sup> $p < 0.05$ , <sup>b</sup> $p < 0.02$ , <sup>c</sup> $p < 0.01$ , <sup>d</sup> $p < 0.001$ .

Each value represents the mean  $\pm$  SEM obtained from 8 animals.

Route: *ip*.

MC: methylcellulose.

**Writhing test.** All 3 tested GBL derivatives were potent analgesics in the writhing test, reducing the number of phenylbenzoquinone-induced body stretches. The calculated ED<sub>50</sub> values for LMOR, L8 and LHEL were: 5.39, 9.57 and 6.12 mg/kg, respectively. They were significantly lower than the ED<sub>50</sub> calculated for acetylsalicylic acid (39.15 mg/kg) (Table 2).

**Spontaneous locomotor activity.** In this test, 3 GBL derivatives administered at their calculated ED<sub>50</sub> values in the hot plate test were investigated. LHEL had no influence on the animals' locomotor activity, whereas LMOR and L8

**Table 2** The antinociceptive activity of the compounds in the writhing test.

Compound	Dose [mg/kg]	Number of stretches $\pm$ SEM	Effect (%)	ED <sub>50</sub> [mg/kg]
Control	0.5%MC	31.70 $\pm$ 1.38	-	-
LMOR	1.8	21.83 $\pm$ 1.99 <sup>c</sup>	31.14	5.39 (1.83-15.89)
	7.5	14.00 $\pm$ 2.58 <sup>d</sup>	55.84	
	15	10.17 $\pm$ 1.10 <sup>d</sup>	67.92	
	30	6.40 $\pm$ 2.50 <sup>d</sup>	79.81	
L8	7.5	18.00 $\pm$ 2.77 <sup>d</sup>	43.22	9.57 (2.87-31.90)
	15	11.83 $\pm$ 2.30 <sup>d</sup>	62.68	
	30	10.00 $\pm$ 2.53 <sup>d</sup>	68.45	
LHEL	3.75	19.50 $\pm$ 1.84 <sup>d</sup>	38.49	6.12 (1.93-19.43)
	7.5	13.60 $\pm$ 2.38 <sup>d</sup>	57.10	
	30	7.17 $\pm$ 1.83 <sup>d</sup>	77.38	
Control	0.5%MC	19.20 $\pm$ 3.20	-	-
ASA	30	11.20 $\pm$ 2.10	41.70	39.15 (29.10-48.40)
	50	8.50 $\pm$ 1.30 <sup>b</sup>	55.70	
	100	3.20 $\pm$ 1.20 <sup>d</sup>	83.30	

Significant difference compared to the vehicle-treated group (methylcellulose):  
<sup>b</sup>p<0.02, <sup>c</sup>p<0.01, <sup>d</sup>p<0.001.  
 Each value represents the mean  $\pm$  SEM obtained from 8 animals.  
 Route: *ip*.  
 ASA: acetylsalicylic acid.  
 MC: methylcellulose.

diminished it, but the results were statistically insignificant (Table 3).

**Table 3** Influence of the compounds on spontaneous locomotor activity in mice.

Compound	ED <sub>50HP</sub> [mg/kg]	Number of impulses $\pm$ SEM	Effect (%)
Control	0.5%MC	411 $\pm$ 36	-
LMOR	9.9	326 $\pm$ 48	-20.68
L8	32.00	309 $\pm$ 44	-25.06
LHEL	40.00	397 $\pm$ 49	-3.41

Each value represents the mean  $\pm$  SEM obtained from 8 animals.  
 Route: *ip*.  
 ED<sub>50HP</sub>: ED<sub>50</sub> values calculated in the hot plate test (for explanation see Methods).

**Capsaicin model of nociception.** None of the tested compounds was antinociceptive in the neurogenic model of pain when administered intraperitoneally in a dose of

30 mg/kg. None of them was able to diminish the nociceptive reaction (licking or biting the injected paw) (Table 4).

**Table 4** Antinociceptive activity of the compounds in the capsaicin test.

Compound	Dose [mg/kg]	Time [s] $\pm$ SEM	Effect (%)
Control	0.5% MC	45.90 $\pm$ 1.12	-
LMOR	30	47.40 $\pm$ 5.07	+ 3.27
L8	30	44.54 $\pm$ 3.12	2.96
LHEL	30	40.94 $\pm$ 5.34	10.81

Each value represents the mean  $\pm$  SEM obtained from 8 animals.  
 Route: *ip*.  
 MC: methylcellulose.

**The tail immersion test (modified).** In this test only 2% solutions of the GBL derivatives exerted local anaesthetic activity. LHEL was the most potent compound in this respect (75% activity in comparison to the vehicle-treated mice). The drugs of reference (mepivacaine, lignocaine) were much more active as local anaesthetics, both as 1% and as 2% solutions (Table 5).

**Table 5** Local anesthetic activity of the compounds in the modified tail immersion test.

Compound	Concentration (%)	Latency [s] $\pm$ SEM	Effect (%)
Control	0.5 (MC)	7.26 $\pm$ 2.17	-
LMOR	1.0	7.30 $\pm$ 1.51	0.55
	2.0	11.88 $\pm$ 2.44	63.64
L8	1.0	7.05 $\pm$ 2.17	-2.89
	2.0	10.82 $\pm$ 2.38	49.04
LHEL	1.0	7.66 $\pm$ 1.56	5.51
	2.0	12.73 $\pm$ 2.20	75.34
MEPIVACAINE	1.0	14.13 $\pm$ 2.67	94.63
	2.0	15.73 $\pm$ 2.09 <sup>b</sup>	116.67
LIGNOCAINE	1.0	16.82 $\pm$ 2.11 <sup>c</sup>	131.68
	2.0	19.84 $\pm$ 0.16 <sup>d</sup>	173.28

Significant difference compared to vehicle-treated group (methylcellulose):  
<sup>b</sup>p<0.02, <sup>c</sup>p<0.01, <sup>d</sup>p<0.001.  
 Each value represents the mean  $\pm$  SEM obtained from 8 animals.  
 Route: *ip*.  
 MC: methylcellulose.

**Acute toxicity.** Table 6 presents the safety profile of the investigated compounds obtained in the acute toxicity test.

**Table 6** Acute toxicity of the compounds.

Compound	Dose [mg/kg]	Behavioral effect	Total mortality (X/Y)	Mortality (%)	LD <sub>50</sub> [mg/kg]	Therapeutic index (LD <sub>50</sub> /ED <sub>50</sub> ) <sup>*</sup>
LMOR	1,250	Sedative	2/6	33	1485.980 (1,156.97-1,908.55)	275.69
	1,500	Sedative	3/6	50		
	1,750	Sedative	4/6	67		
	2,000	Sedative	6/6	100		
L8	625	Seizures	1/6	17	747.82 (631.33- 885.80)	78.14
	750	Seizures	4/6	67		
	1,000	Seizures	5/6	83		
LHEL	875	Seizures	1/6	17	975.89 (896.13-1,062.76)	159.48
	1,000	Seizures	4/6	67		
	1,125	Seizures	5/6	83		

Mortality rate evaluated 72 h after intraperitoneal injection.  
 X: number of mice that died during 72-h observation.  
 Y: number of mice in each group.  
<sup>\*</sup>To calculate the therapeutic index, ED<sub>50</sub> from the writhing test was used.

LMOR was the only compound that acted as a sedative to mice in the range of doses tested (1,250-2,000 mg/kg). Its LD<sub>50</sub> value was 1486 mg/kg. Two other GBL derivatives lowered the convulsive threshold at doses tested, and seizures were observed almost immediately after intraperitoneal administration. The LD<sub>50</sub> values for L8 and LHEL were 747.82 and 975.89 mg/kg, respectively.

## DISCUSSION

Although modern medicine of pain comprises variable therapeutic methods for alleviating it (e.g. pharmacotherapy, physiotherapy, surgical methods and acupuncture), the treatment of pain still remains a serious challenge. Contemporarily available analgesic drugs have serious side effects: opioids have drug-addictive properties. Anti-inflammatory drugs in turn may be ulcerogenic, nephro-, hepato- or myelotoxic. Besides, drug abuse and tolerance may occur as side-effects after long-term therapy, therefore the proper treatment of pain is still a relevant medical and toxicological problem which makes researchers seek new active compounds.

During our long-term investigations concerning the pharmacological activity of GBL derivatives we managed to distinguish a group of compounds possessing potential antinociceptive and anticonvulsant properties [6]. Some of these structures proved to have strong analgesic and local anaesthetic activity in screening models in rodents.

Three investigated derivatives: LMOR, L8 and LHEL, acted as anti-nociceptive agents in the hot plate test. As this test is considered for distinguishing centrally-acting analgesics, the obtained ED<sub>50</sub> values may suggest that the analgesic activity of these compounds – LMOR in particular – is at least to some extent a consequence of their influence on the central nervous system at the supraspinal level [28]. It is of interest that all the compounds were also effective in the writhing test that detects peripherally acting analgesics [23]. However, comparing the ED<sub>50</sub> values from the hot plate and writhing tests, one fact emerges: as the calculated ED<sub>50</sub> from the writhing test for all 3 compounds is much lower than the same value from the hot plate model, it must be peripheral anti-nociceptive activity that is mainly responsible for their pharmacological effects. It seems to be a very important fact, as taking the chemical structure of the investigated compounds into account (i.e. their similarity to GABA) their central nervous system affinity is suggested. GABA itself is thought to be a crucial component of the 'pain gate' and its role in analgesia has been well established since 1965 when Melzack and Wall published their 'gate-control theory of pain' first [29]. Recent reports also emphasize the significance of different GABA-ergic drugs (e.g. tiagabine) in the treatment of intractable, especially neuropathic pain [5, 30, 31].

For this reason another experiment was carried out to evaluate whether the spontaneous locomotor activity is not disturbed by the compounds' administration. Since there was no significant effect obtained in this test, it may be concluded that the prolongation of nociceptive reaction latency in the hot plate test and reduced number of stretches in compound-treated mice in the writhing test are not a consequence of their sedative properties.

Analgesic activity observed in the 2 basic screening tests was not confirmed in the capsaicin model of neurogenic pain and

was weak in the modified tail immersion test. Therefore, the GBL derivatives' effect is thought not to include the peripheral nerves. It is known that capsaicin, a pungent ingredient of chili pepper, exerts its potent biological activity through binding to thermosensitive receptors, termed transient receptor potential vanilloid type 1 (TRPV1), present on the surface of the nerve fibres involved in the transmission of pain [32, 33, 34, 35]. If, as we assume, GBL's effect is of peripheral origin, rather it does not derive from direct influence on the nerves involved in the transmission of pain sensations (i.e. unmyelinated C and myelinated A $\delta$  fibres). This activity may be a consequence of their influence on the inflammatory state in peripheral tissues. At this stage of research the precise mechanism of antinociceptive action of LMOR, L8 and LHEL is not clear, although some data suggest their anti-inflammatory effect. Further tests are necessary to elucidate whether the investigated compounds, similarly to NSAIDs, inhibit cyclooxygenase and enzyme-linked immunosorbent assay is suggested as a first step. The fact should also be noted that antinociceptive activity of the GBL derivatives is accompanied by their high LD<sub>50</sub> values. Therefore, the investigated compounds possess a beneficial therapeutic index (between 78.14 for L8 and 275.69 for LMOR).

In conclusion, the derivatives of GBL proved to exert an anti-nociceptive effect in screening models in mice (hot plate test, writhing test). Central neurotropic and peripheral analgesic activities should be taken into account as far as their mechanism of action is concerned. The compounds' high pharmacological activity is accompanied by their low acute toxicity.

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## REFERENCES

1. Le Bars D, Gozariu M, Cadden SW: Animal models of nociception. *Pharmacol Rev* 2001, **53**, 597-652.
2. Omoigui S: The biochemical origin of pain: the origin of all pain is inflammation and the inflammatory response. Part 2 of 3 - inflammatory profile of pain syndromes. *Med Hypotheses* 2007, **69**, 1169-1178.
3. Przewłocki R, Przewłocka B: Opioids in chronic pain. *Eur J Pharmacol* 2001, **429**, 79-91.
4. Bohlega S, Alsaadi T, Amir A, Hosny H, Karawagh AM, Moulin D, Riachi N, Salti A, Shelbaya S: Guidelines for the pharmacological treatment of peripheral neuropathic pain: expert panel recommendations for the middle East region. *J Int Med Res* 2010, **38**, 295-317.
5. McCleane G: Antidepressants as analgesics. *CNS Drugs* 2008, **22**, 139-156.
6. Sałat K, Filipek B, Więckowski K, Malawska B: Analgesic activity of 3-mono-substituted derivatives of dihydrofuran-2-one in experimental rodent models of pain. *Pharmacol Rep* 2009, **61**, 807-818.
7. Vonvoigtlander PF, Lewis RA, Neff GL: Kappa opioid analgesia is dependent on serotonergic mechanisms. *J Pharmacol Exp Ther* 1984, **231**, 270-281.
8. Ettinger AB, Argoff CE: Use of antiepileptic drugs for nonepileptic conditions: psychiatric disorders and chronic pain. *Neurotherapeutics* 2007, **4**, 75-83.
9. Paluchowska M, Mokrosz MJ, Charakchieva-Minol S, Duszyńska B, Kozioł A, Wesołowska A, Stachowicz K, Chojnacka-Wójcik E: Novel 4-alkyl-1-arylpiperazines and 1,2,3,4-tetrahydroisoquinolines

- containing diphenylmethylamino or diphenylmethoxy fragment with differentiated 5-HT<sub>1A</sub>/5-HT<sub>2A</sub>/D<sub>2</sub> receptor activity. *Pol J Pharmacol* 2003, **55**, 543-552.
10. Hunter JC, Gogas KR, Hedley LR, Jacobson LO, Kassotakis L, Thompson J, Fontana DJ: The effect of novel anti-epileptic drugs in rat experimental models of acute and chronic pain. *Eur J Pharmacol* 1997, **324**, 153-160.
  11. Laughlin TM, Tram KV, Wilcox GL, Birnbaum AK: Comparison of antiepileptic drugs tiagabine, lamotrigine, and gabapentin in mouse models of acute, prolonged and chronic nociception. *J Pharmacol Exp Ther* 2002, **302**, 1168-1175.
  12. Malawska B, Gobaille S: Synthesis, physicochemical and pharmacological properties of new *N*-substituted amides of  $\alpha$ -piperazine- $\gamma$ -hydroxybutyric acid. *Pharmazie* 1995, **50**, 390-393.
  13. Malawska B, Kulig K, Gajda J, Szczepkowski D, Musiał A, Więckowski K, Stables JP: Design, synthesis and pharmacological evaluation of  $\alpha$ -substituted *N*-benzylamides of  $\gamma$ -hydroxybutyric acid with potential GABA-ergic activity. Part 6. Search for new anticonvulsant compounds. *Acta Polon Pharm -Drug Research* 2007, **64**, 127-137.
  14. Malawska B, Kulig K, Śpiewak A, Stables JP: Investigation into new anticonvulsant derivatives of  $\alpha$ -substituted *N*-benzylamides of  $\gamma$ -hydroxy- and  $\gamma$ -acetoxybutyric acid. Part 5. Search for new anticonvulsant compounds. *Bioorg Med Chem* 2004, **12**, 625-632.
  15. Sahebgharani M, Hossein-Abad A, Zarrindast MR: On the mechanism of carbamazepin-induced antinociception in the formalin test. *Intern J Neurosci* 2006, **116**, 1097-1113.
  16. Waszkielewicz A, Bojarski J:  $\gamma$ -Hydroxybutyric acid (GHB) and its chemical modifications: a review of the GHBergic system. *Pol J Pharmacol* 2004, **56**, 43-49.
  17. Canney DJ, Lu HF, McKeon AC, Yoon KW, Xu K, Holland KD, Rothman SM, Ferrendelli JA, Covey DF: Structure-activity studies of fluoroalkyl-substituted  $\gamma$ -butyrolactone and  $\gamma$ -thiobutyrolactone modulators of GABA<sub>A</sub> receptor function. *Bioorg Med Chem* 1998, **6**, 43-55.
  18. Hadri AE, Abouabdellah A, Thomet U, Bauer R, Furtmüller R, Sigel E, Sieghart W, Dodd RH: *N*-Substituted 4-amino-3,3-diphenyl-2(3*H*)-furanones: New positive allosteric modulators of the GABA<sub>A</sub> receptor sharing electrophysiological properties with the anticonvulsant loreclezole. *J Med Chem* 2002, **45**, 2824-2831.
  19. Williams KL, Tucker JB, White G, Weiss DS, Ferrendelli JA, Covey DF, Krause JE, Rothman SM: Lactone modulation of the  $\gamma$ -aminobutyric acid A receptor: Evidence for a positive modulatory site. *Mol Pharmacol* 1997, **52**, 114-119.
  20. Obniska J, Kamiński K, Tatarczyńska E: Impact of aromatic substitution on the anticonvulsant activity of new *N*-(4-arylpiperazin-1-yl)-alkyl-2-azaspiro[4.5]decane-1,3-dione derivatives. *Pharmacol Rep* 2006, **58**, 207-214.
  21. Rohet F, Rubat C, Coudert P, Couquelet J: Synthesis and analgesic effects of 3-substituted 4,6-diarylpyridazine derivatives of the arylpiperazine class. *Bioorg Med Chem* 1997, **5**, 655-659.
  22. Eddy N, Leimbach D: Synthetic analgesics. II. Dithienylbutenyl- and dithienylbutylamines. *J Pharmacol Exp Ther* 1953, **107**, 385-393.
  23. Vogel HG, Vogel WH: *Drug discovery and evaluation. Pharmacological assays*. Springer-Verlag Inc., New York, 1997.
  24. Hendershot LC, Forsaith J: Antagonism of the frequency of phenylbenzoquinone induced writhing in the mouse by weak analgesics and non-analgesics. *J Pharmacol Exp Ther* 1959, **125**, 237-240.
  25. Santos ARS, Gadotti VM, Oliveira GL, Tibola D, Paszcuk AF, Neto A, Spindola HM, Souza MM, Rodrigues ALS, Calixto JB: Mechanism involved in the antinociception caused by agmatine in mice. *Neuropharmacology* 2005, **48**, 1021-1034.
  26. Erenmemisoglu A, Suer C, Temocin M: Has nicotine a local anaesthetic action? *J Bas Clin Physiol Pharmacol* 1994, **5**, 125-131.
  27. Litchfield JT, Wilcoxon E: A simplified method of evaluating dose-effect experiments. *J Pharmacol Exp Ther* 1949, **96**, 99-113.
  28. Hough LB, Nalwalk JW, Stadel R, Timmerman H, Leurs R, Paria BC, Wang X, Dey SK: Inhibition of improprian antinociception by the cannabinoid CB1 antagonist *N*-(piperidin-1-yl)-5-(4-chlorophenyl)-1-(2,4-dichlorophenyl)-4-methyl-1*H*-pyrazole-3-carboxamide (SR141716A): Lack of obligatory role for endocannabinoids acting at CB1 receptors. *J Pharmacol Exp Ther* 2002, **303**, 314-322.
  29. Bishop B: Pain: its physiology and rationale for management. Part III. Consequences of current concepts of pain mechanisms related to pain management. *Phys Ther* 1980, **60**, 24-37.
  30. Jasmin L, Wu MV, Ohara PT: GABA puts a stop to pain. *Curr Drugs Targets CNS Neurol Disord* 2004, **3**, 487-505.
  31. Mohler H, Crestani F, Rudolph U: GABA<sub>A</sub>-receptor subtypes: a new pharmacology. *Curr Opin Pharmacol* 2001, **1**, 22-25.
  32. Adcock JJ: TRPV1 receptors in sensitization of cough and pain reflexes. *Pulm Pharmacol Ther* 2009, **22**, 65-70.
  33. Calixto JB, Kassuya CAL, Andre E, Ferreira J: Contribution of natural products to the discovery of the transient receptor potential (TRP) channels family and their functions. *Pharmacol Ther* 2005, **106**, 179-208.
  34. Cui M, Honore P, Zhong C, Gauvin D, Mikusa J, Hernandez G, Chandran P, Gomtsyan A, Brown B, Bayburt EK, Marsh K, Bianchi B, McDonald H, Niforatos W, Neelands TR, Moreland RB, Decker MW, Lee CH, Sullivan JP, Faltynek CR: TRPV1 receptors in the CNS play a key role in broad-spectrum analgesia of TRPV1 antagonist. *J Neurosci* 2006, **26**, 9385-9393.
  35. Planells-Cases R, Garcia-Sanz N, Morenilla-Palao C, Ferrer-Montiel A: Functional aspects and the mechanisms of TRPV1 involvement in neurogenic inflammation that leads to thermal hyperalgesia. *Eur J Physiol* 2005, **451**, 151-159.