

Barrow, Timothy, Byun, HM, Li, X, Smart, C, Wang, YX, Zhang, Y, Baccarelli, A and Guo, L (2018) The effect of morphine upon DNA methylation in ten regions of the rat brain. Epigenetics, 12 (12). pp. 1038-1047. ISSN 1559-2294

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The effect of morphine upon DNA methylation in ten regions of the rat brain

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Abstract

Morphine is one of the most effective analgesics in medicine. However, its use is associated with the development of tolerance and dependence. Recent studies demonstrating epigenetic changes in the brain after exposure to opiates have provided insight into mechanisms possibly underlying addiction. In this study, we sought to identify epigenetic changes in ten regions of the rat brain following acute and chronic morphine exposure. We analyzed DNA methylation of six nuclear-encoded genes implicated in brain function (Bdnf, Comt, Il1b, Il6, Nr3c1 and *Tnf*) and three mitochondrially-encoded genes (*Mtco1*, *Mtco2* and *Mtco3*), and measured global 5-methylcytosine (5-mc) and 5-hydroxymethylcytosine (5-hmc) levels. We observed differential methylation of Bdnf and Il6 in the pons, Nr3c1 in the cerebellum, and Il1b in the hippocampus in response to acute morphine exposure (all p<0.05). Chronic exposure was associated with differential methylation of Bdnf and Comt in the pons, Nr3c1 in the hippocampus and *Il1b* in the medulla oblongata (all p<0.05). Global 5-mc levels significantly decreased in the superior colliculus following both acute and chronic morphine exposure, and increased in the hypothalamus following chronic exposure. Chronic exposure was also associated with significantly increased global 5-hmc levels in the cerebral cortex, hippocampus and hypothalamus, but significantly decreased in the midbrain. Our results demonstrate, for the first time, highly localized epigenetic changes in the rat brain following acute and chronic morphine exposure. Further work is required to elucidate the potential role of these changes in the formation of tolerance and dependence.

Keywords: Morphine, addiction, DNA methylation, 5-methylcytosine, 5-hydroxymethylcytosine, mitochondrial epigenetics, BDNF, opiates

Introduction

Morphine is one of the most effective analgesic medications. It, along with other opioids, relieves acute and chronic pain by acting at mu opioid receptors found throughout the central nervous system. Alongside its therapeutic effects, morphine use is also associated with adverse effects such as tolerance and dependence.

Morphine tolerance may originate in part through neuronal processes via activation of mu opioid receptors and subsequent neuroexcitation¹. Preclinical gene expression profiling studies have demonstrated widespread changes in the transcriptome of the nucleus accumbens and striatum following chronic morphine exposure^{2,3}, including to genes associated with circadian rhythms, neurotransmitter release, and glucocorticoid receptor signalling. There is also increasing evidence for a role of microglia in tolerance. Microglia are macrophages present within the central nervous system that produce pro-inflammatory cytokines such as interleukin 1β (IL-1β), interleukin 6 (IL-6) and tumor necrosis factor alpha (TNF- α) following their activation by morphine⁴. IL-1 β , IL-6 and TNF- α have been shown to reduce morphine analgesia within five minutes of administration⁴, and blockade of IL-1β signalling prolongs morphine-induced analgesia⁵, thereby potentially implicating these three cytokines in morphine tolerance. Microglial activation is further implicated in the development of tolerance through increased expression of brain derived neurotrophic factor (BDNF) in the ventral tegmental area (VTA) that facilitates the switch to the dopaminedependent reward system present in addiction⁶. Notably, Bdnf-/- knockout mice do not develop tolerance to morphine⁷. Other genes implicated in morphine tolerance include the catechol-O-methyltransferase (COMT) gene through its role in dopamine elimination and whose activity therefore regulates morphine response in mice⁸, and the glucocorticoid receptor gene NR3C1 that is epigenetically silenced in the HPA axis following chronic, but not acute, morphine exposure⁹.

Exposure to opiates is also known to induce mitochondrial dysfunction in neuronal and glioma cells^{10,11}, and chronic exposure is associated with reduced mitochondrial DNA copy number in the rat hippocampus¹². Furthermore, morphine may induce oxidative stress in the brain¹³, and this is known to induce the expression of mitochondrial DNA methyltransferase 1 (mtDNMT1) that regulates the mitochondrial epigenome¹⁴.

Morphine exposure has been demonstrated to affect the epigenetic regulation of genes implicated in addiction and tolerance, both in human studies and in animal models. Differential methylation of the *BDNF*^{15,16} and opioid receptor Mu 1 (*OPRM1*)^{17,18} gene promoters have been reported in the blood of opiate-dependent individuals. Epigenetic changes in the brain may be highly localized, as studies utilizing whole brain tissue have often reported no significant change in global DNA methylation levels following morphine exposure^{19,20}. Targeted approaches have proven more insightful, identifying changes in regions of the brain associated with addiction such as the hippocampus, medial prefrontal cortex and VTA in a rat model of heroin self-administration and reward devaluation²¹ and post-mortem orbitofrontal cortex brain tissue from former heroin users²².

However, there remains a significant knowledge gap regarding the spatial and temporal epigenetic regulation of genes in the brain that are implicated in tolerance and dependence. In this study, we analyzed epigenetic changes in response to acute and chronic morphine induction in 10 regions of the rat brain reported to be implicated in response to opiates and the formation of addiction: the midbrain contains the VTA that has been consistently implicated in addiction^{23,24}; the pons contains the locus coeruleus that is key in the integration of opioid and stress signalling and which is served by innervation from the paraventricular nucleus of the hypothalamus²⁵; the inferior and superior colliculus regulate response to opiate withdrawal through reduced activation of mu-opioid receptor signalling^{26,27}; the cerebral cortex (containing the dorsomedial prefrontal cortex),

hippocampus and cerebellum are implicated in reinforcement of drug-seeking beheaviors^{28–30}; the medulla oblongata is crucial in pain modulation and opiate withdrawal behaviors³¹; and the thalamus whose function is disrupted in opiate dependence^{32,33}. We measured global 5-methylcytosine and 5-hydroxymethylcytosine levels, and analyzed the DNA methylation of genes previously identified as implicated in morphine tolerance (*Bdnf*, *Comt*, *Il1b*, *Il6*, *Nr3c1* and *Tnf*) and mitochondrially-encoded genes potentially implicated in mitochondrial dysfunction (*Mt-co1*, *Mt-co2*, and *Mt-co3*).

Results

Study overview

An overview of the study is provided in Figure 1. Male rats were assigned to control, acute challenge and chronic induction groups (all n=5). After 10 days, brain tissue was dissected and DNA extracted for epigenetic analysis.

Gene-specific DNA methylation variability by region of the rat brain

The nuclear-encoded genes *Bdnf*, *Comt*, *Il1b*, *Il6*, *Nr3c1* and *Tnf* displayed differential variability by region of the brain (Figure 2A-F). *Bdnf* and *Tnf* displayed highly conserved methylation levels between the regions, with mean *Bdnf* methylation levels ranging between 3.0 and 4.6% (Figure 2A), and *Tnf* methylation between 54.0 and 62.5% (Figure 2F). The greatest variability was observed in *Il6* methylation, which displayed low levels (<6.5%) in the cerebellum, cerebral cortex and hippocampus, but markedly higher methylation (>20%) in the hypothalamus, inferior colliculus, superior colliculus, and the thalamus (Figure 2D). Global DNA methylation levels, estimated using LINE-1 as a surrogate marker (*L1-5utr* and *L1-orf*), were highly consistent between brain regions (Figure 2G-H).

Morphine induction is associated with gene-specific and global DNA methylation changes in the rat brain

Acute morphine exposure (10 mg/kg, one hour post injection) was associated with significantly increased methylation of Il6 in the pons (11.6 vs 14.3%, p<0.05) and Nr3c1 in the cerebellum (1.0 vs 1.2%, p=0.03), and significantly decreased methylation of Bdnf in the pons (3.9 vs 3.3%, p=0.03) and Il1b in the hippocampus (76.5 vs 71.8%, p=0.02) (Table 2, Figure 3). Chronic morphine exposure (10 mg/kg/day bid for 10 days) was associated with significantly increased methylation of Il1b in the medulla oblongata (64.8 vs 68.4%, p=0.03) and Nr3c1 in the hippocampus (1.0 vs 1.6%, p=0.02), and significantly decreased methylation of Bdnf (3.9 vs 3.1, p=0.02) and Comt in the pons (77.3 vs 66.9%, p<0.0001).

Global DNA methylation levels, estimated through measurement of *Line1* methylation, were significantly lower in the superior colliculus following both acute (*L1-orf*, 82.5 vs 81.9%, p<0.05) and chronic morphine exposures (*L1-orf*, 82.5 vs 81.3%, p=0.003), and higher in the hypothalamus following chronic exposure (*L1-5utr*, 53.7 vs 54.9%, p=0.04) (Figure 4).

Nuclear 5-hydroxymethylcytosine levels are altered following morphine induction

We measured global 5-hydroxymethylcytosine (5-hmc) levels in each of the ten regions of the brain following acute and chronic morphine induction. In the control rats, 5-hmc levels varied by brain region (Table 2). The lowest levels of 5-hmc were observed in the hippocampus (0.34%) and thalamus (0.37%), with the highest in the midbrain (0.79%) and pons (0.69%). Significant changes in 5-hmc levels were identified following chronic morphine induction, but none following acute exposure. 5-hmc levels increased in the cerebral cortex (0.50% vs 0.78%, p=0.002), hippocampus (0.34% vs 0.43%, p=0.01) and

hypothalamus (0.40% vs 0.54%, p=0.008), while they decreased in the midbrain (0.79% vs 0.36%, p<0.0001) (Figure 5).

Morphine induction is not associated with alterations in DNA methylation of mitochondrially-encoded genes

We measured DNA methylation of three mitochondrially-encoded genes (*Mtco1*, *Mtco2* and *Mtco3*) following morphine exposure. Methylation levels of the three genes were uniformly low across the 10 brain regions, with mean levels ranging between 0.8 (*Mtco2*, cerebral cortex and pons) and 2.7% (*Mtco1*, cerebral cortex) (Table 3). No significant effect of acute or chronic morphine induction was observed on methylation of the three genes in any of the brain regions. The most substantial changes in methylation were observed for *Mtco1* in the cerebral cortex following acute (2.7 vs 1.8%, p=0.23) and chronic (2.7 vs 1.9%, p=0.29) morphine induction.

Discussion

In this study, we investigated the effect of acute and chronic morphine exposures upon nuclear and mitochondrial DNA methylation in ten regions of the rat brain known to be affected by opiates. Brain region-specific changes were identified in global 5-methylcytosine and 5-hydroxymethylcytosine content, and the *Bdnf*, *Comt*, *Il1b*, *Il6* and *Nr3c1* genes in response to morphine exposure. We did not observe differential methylation within the mitochondrial genome. To our knowledge, our study is the first to identify region-specific epigenetic changes in the brain in response to morphine exposure.

Morphine induces the dopaminergic mesolimbic pathway in the ventral tegmental area (VTA) within the midbrain. This region of the brain has a high concentration of dopaminergic neurons and is considered to be crucial in addiction. We observed significantly

decreased global DNA methylation in the superior colliculus, estimated through analysis of *Line1*, and a highly significant decrease in 5-hmc content in the midbrain. Together, these observations demonstrate substantial epigenetic changes in this important region of the brain with morphine exposure.

5-hmc is approximately 10-fold more abundant in the brain than other tissues³⁴, increasing during neuronal development but also implicated in age-related neurodegeneration.³⁵ While 5-hmc is an intermediate in active DNA demethylation, 5-mc and 5-hmc levels are not inherently correlated³⁶ and therefore our observations of decreased 5-mc and 5-hmc are not contradictory. Furthermore, our results could also be the product of the direct role of 5-hmc in RNA splicing³⁷ and gene expression through inhibition of chromatin remodelling³⁸, which may offer an alternative explanation for our observations. TET1 has been demonstrated to be down-regulated in response to cocaine administration, leading to locus-specific decreases in 5-hmc.³⁹ Whilst other studies have reported no change in global 5hmc content in response to heroin and cocaine exposure 19,20,39, they have focussed upon a single region (nucleus accumbens) or utilized homogenized brain tissue and therefore could not exclude the possibility of localized changes in 5-hmc in specific regions of the brain. The limitations of such approaches were addressed in the current study. Indeed, a particular strength of this work is the analysis of ten different regions of the brain that has facilitated the identification of region-specific changes in DNA methylation. Our findings demonstrated significantly increased 5-hmc levels in the cerebral cortex, hippocampus and hypothalamus, in contrast to observations elsewhere of increased hippocampal 5-hmc levels following the cessation of cocaine. 40 Further work is required to elucidate the functional implications of these observations.

We identified differential methylation of three genes (*Bdnf*, *Comt* and *Il6*) in the pons following morphine exposure. This region, located inferior to the midbrain, regulates

respiration and sleep, which are commonly disturbed with morphine use. Animal studies have demonstrated a morphine-induced reduction in acetylcholine in the pons and medulla oblongata⁴¹, thereby further implicating this region in response to the drug. BDNF expression facilitates opiate-associated neural plasticity⁴² and the dopamine-dependent response to opiates. 6 Chronic exposure to opiates is associated with increased BDNF levels in the VTA²³, and it has been demonstrated that this increase begins rapidly after initial usage. 43 Other studies have reported increased expression of BDNF in the VTA following morphine withdrawal.²⁴ Our results provide further evidence for the role of BDNF in the acute response to morphine exposure and suggest that this may not be limited to the VTA. Catechol-Omethyltransferase (COMT) is implicated in dopamine elimination, and subsequently COMT activity reduces response to morphine⁸, while genetic variants in the COMT gene are associated with differential response to morphine as an analgesic.⁴⁴ Our observation of decreased *Comt* methylation with chronic exposure may be in response to increased dopamine signalling and a role in its catabolism. The changes seen in *Il6* in the pons may be in accordance with the modulating role that opioids have in inflammatory pathways⁴⁵. Our observation of increased *Il6* promoter methylation is in contrast to reports of increased secretion in acute response to morphine in the spinal cord⁴ and plasma^{46,47}. Notably, however, we also identified regional-specificity in *Il6* methylation levels, and therefore the difference in measured methylation levels may represent alterations in cell composition, such as increased microglial infiltration. As IL-1 β and TNF- α are also secreted by activated macrophages in response to morphine⁴⁸, but were not differentially methylated in the pons, it is unclear how IL-6 alone may be implicated in response to morphine.

Morphine administration can induce the generation of reactive oxygen species (ROS) by increasing the metabolism of substrates such as dopamine and xanthine oxidase.⁴⁹ Elevated ROS levels are known to induce site-specific alterations in DNA methylation by

mechanisms such as modulation of the expression of DNA methyltransferases (DNMTs).⁵⁰ While the observed gene-specific changes in DNA methylation are likely to be directly induced by morphine administration, global changes in 5-mc and 5-hmc content could in part be non-specific effects through increased ROS production.

The study of the mitochondrial epigenome is an emerging field of interest. Alterations in mitochondrial DNA methylation have been demonstrated in cardiovascular disease⁵¹ and in response to environmental exposures.^{52,53} It has been speculated that such epigenetic changes may give rise to the altered mitochondrial function observed in drug addiction.¹⁴ However, our study did not identify differential methylation of mitochondrial genes in response to morphine induction. We cannot exclude the possibility that other regions of the mitochondrial epigenome may be differentially methylated in response to exposure, and therefore more comprehensive analysis is required.

Our study contains certain limitations that restrict the inferences that can be made from our observations. In particular, the absence of rat behavioral studies and the lack of RNA and protein samples to analyze gene expression have precluded the study of the functional impact of the observed epigenetic changes. The number of cells obtained from some of the dissected tissue specimens was only sufficient to extract DNA from, and therefore no analysis of gene expression was possible. Gene-specific analysis of 5-hmc content could also have proven highly insightful, but is currently prohibitively expensive. Nonetheless, our study offers several important strengths. Firstly, the study of ten different regions of the brain has enabled us to identify region-specific epigenetic changes in response to drug exposure. Furthermore, we have performed a range of epigenetic analyses (nuclear and mitochondrial gene-specific DNA methylation, global 5-mc and 5-hmc content) that have facilitated a broader study of the epigenome in response to morphine exposure. Finally, our

study design has enabled the delineation of epigenetic changes associated with acute and chronic morphine exposure.

In conclusion, we have identified gene-specific and global changes in DNA methylation in response to acute and chronic morphine exposure, which were highly localized to specific regions of the brain. Of especial interest, we identified significant changes in 5-hmc content in four of the ten regions, suggestive of wider epigenetic remodelling in response to morphine exposure. It is hoped that our findings will help to inform further studies in the treatment of dependence, including elucidation of the functional consequences of the observed epigenetic changes and how they relate to long-term response to opiates. Additionally, our findings may help to facilitate the production of biomarkers of drug tolerance. Given the increases in deaths from opiate overdose within the past decade^{54,55}, there is an urgent clinical need for tolerance biomarkers that could help to reduce thousands of avoidable deaths.

Materials and Methods

Animals and Housing Conditions

Male Wistar rats (180-200 g) were purchased from Shanghai Laboratory Animal Center (Shanghai, China). Following shipment, rats were housed in a temperature- (22-24 °C) and humidity- (60%) controlled environment on a 12-hour light/dark cycle (lights on at 7:00 AM) for three days to allow for acclimatization prior to experimental studies. The animals were given free access to food and water *ad libitum*. All efforts were made to reduce the number of animals used and to minimize their suffering. Experimental study groups were assigned randomly. All procedures were approved by the Laboratory Animal Use Committee of Shanghai Jiao Tong University School of Pharmacy.

Drugs

Morphine hydrochloride was purchased from Shenyang First Pharmaceutical Co., Ltd. (Shenyang, Liaoning, China) and Maybridge Chemicals (Cornwall, U.K.). CBIO was freshly dissolved in sterile normal saline solution (Sinopharm Group Chemical Reagent Co., Ltd.) with the pH adjusted to 7.3-7.5 with 1 M NaOH solution.

Morphine induction

Male rats were assigned into three groups (each n=5) receiving alternative treatment regimens: saline/saline (Group A, control); saline/morphine (Group B, acute challenge, 10 mg/kg); and morphine/morphine (Group C, chronic induction). For morphine chronic induction, the first treatment period consisted of subcutaneous injection of saline (Groups A and B, 10 ml/kg) or morphine (Group C, 10 mg/kg) twice daily at 12-hour intervals for nine consecutive days⁵⁶. On Day 10, the second treatment was performed by a single subcutaneous injection of saline (Group A) or morphine (Groups B and C, 10 mg/kg) (Figure 1). Previous work has demonstrated tolerance to morphine is developed within 7-10 days, with epigenetic changes observable in the rodent brain 5-7 days following first treatment^{57,58}.

Sample Preparation and DNA Extraction

The rats were decapitated on Day 10, one hour after the last administration. Brains were removed from the skull and ten brain regions (cerebellum, cerebral cortex, hippocampus, hypothalamus, inferior colliculus, midbrain, pons, medulla oblongata, superior colliculus and thalamus) were rapidly dissected, frozen on dry ice, and kept at -80°C until processed. DNA was extracted from the tissues using the Wizard Genomic DNA purification kit (Promega, Madison, WI) according to the manufacturer's instructions. Purified DNA was stored at -20°C until analysis.

DNA Methylation Analysis

Gene-specific and global 5-mc DNA methylation were analyzed by pyrosequencing. Global methylation levels were estimated using two assays to interrogate Line1 methylation (*L1-utr* and *L1-orf*) that have been widely utilized for this purpose since their first development⁵⁹ and which correlate well with measures of global 5-mc content by high-performance liquid chromatography⁶⁰. Gene-specific assays were designed to interrogate promoter regions for the *Bdnf*, *Comt*, *Il1b*, *Il6*, *Nr3c1* and *Tnf* genes. Specifically, the assays interrogated *Bdnf* promoter IV that influences response to levomethadone¹⁵, the *Comt* P1 promoter that regulates expression of the shorter tissue-specific S-COMT isoform that influences dopamine metabolism in the mouse brain⁶¹, and the *Nr3c1* GR1₁₀ promoter that we have previously demonstrated to be differentially methylated in the rat brain in response to environmental exposures⁶².

Bisulfite conversion was performed using 1 μg of genomic DNA and the EZ-96 DNA Methylation-Gold Kit (Zymo Research, Orange, CA, USA) according to the manufacturer's protocol. 30 μl M-Elution Buffer was used for the elution of bisulfite-converted DNA. Following amplification of target regions by polymerase chain reaction (PCR), DNA methylation was analyzed by pyrosequencing. Details of the primers and thermocycling conditions are shown in Table 1. In brief, a 30 μl-PCR was carried out using 15 μl GoTaq Hot Start Green Master Mix (Promega, Madison, WI), 10 pmol forward primer, 10 pmol reverse primer, 1 μl bisulfite-treated DNA, and water. Pyrosequencing was performed using the PyroMark Q96 MD Pyrosequencing System (QIAGEN, Germantown, MD). The percentage of methylated cytosines was quantified at three CpG sites for *Bdnf*, two for *Comt*, two for *Il1b*, one for *Il6*, six for *Nr3c1*, one for *Tnf*, two for *L1-utr* and one for *L1-orf*. For the mitochondrially-encoded genes, the percentage-methylation was measured at three CpG sites

for each of *Mtco1*, *Mtco2* and *Mtco3*. Pyrosequencing reactions were performed in duplicate and the mean of the replicates taken forward for analysis. The correlation coefficient between replicate pyrosequencing runs ranged from 0.77 (*L1-orf*) to 0.97 (*Comt*).

Analysis of global 5-hydroxymethylcytosine levels

5-hydroxymethylcytosine was measured in total DNA using the MethylFlash Global DNA Hydroxymethylation ELISA Easy Kit (Epigentek) according to the manufacturer's protocol. The correlation coefficient between replicates was 0.97.

Statistical Analysis

Analysis was performed using GraphPad Prism version 7.0b. Differences in DNA methylation were determined by t-test, with significance defined as p<0.05.

Disclosure of potential conflicts of interest

No potential conflicts of interest were disclosed.

Acknowledgments

We would like to thank the staff of the King's Lab, Shanghai Jiao Tong University School of Pharmacy, China for supplying the rats. Funding: This work was supported by the Science Foundation of Tianjin Medical University under Grant 2GW033; and the National Natural Science Foundation of China under Grants 81602827 and 41601548.

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Figure legends

Figure 1. Overview of experimental approach.

Rats were assigned to control (A), acute morphine challenge (10 mg/kg one hour post injection, B) and chronic morphine induction (10 mg/kg/day bid for 10 days, C) groups. Saline or morphine were administered twice daily until tissue collection at Day 10.

Figure 2: Variation in DNA methylation by region of the rat brain. A-F: DNA methylation of *Bdnf*, *Comt*, *Il1b*, *Il6*, *Nrc31* and *Tnf* in the cerebellum (Ce), cerebral cortex (CE), hippocampus (Hi), hypothalamus (Hy), inferior colliculus (IC), medulla oblongata (MO), midbrain (Mi), pons (Po), superior colliculus (SC), and thalamus (Th). G-H: global DNA methylation estimated by measurement of *L1-5utr* and *L1-orf* elements in the same 10 regions of the brain.

Figure 3: Differential gene-specific DNA methylation in response to morphine exposure. Gene-specific changes in DNA methylation by morphine exposure (control, acute and chronic) are illustrated, with significant differences indicated (* = p<0.05, ** = p<0.01, *** = p<0.001; **** = p<0.0001).

Figure 4: Global DNA methylation levels following acute and chronic morphine exposure. Global DNA methylation levels were estimated through measurement of L1-5utr and L1-orf elements in 10 regions of the rat brain. Regions displaying significant changes are illustrated (* = p<0.05, ** = p<0.01, *** = p<0.001; **** = p<0.001).

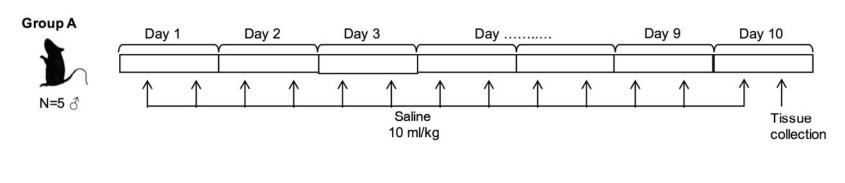
Figure 5: Global 5-hydroxymethylcytosine levels following acute and chronic morphine exposure. Global 5-hmc levels were measured by ELISA in 10 regions of the rat brain, with significant changes illustrated (* = p<0.05, ** = p<0.01, *** = p<0.001; **** = p<0.0001).

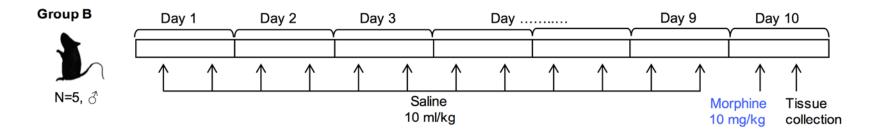
Table 1: PCR and pyrosequencing primer sequences.

Table 2: Nuclear DNA methylation in the rat brain following morphine induction. Mean DNA methylation levels of six genes (*Bdnf*, *Comt*, *Il1b*, *Il6*, *Nr3c1* and *Tnf*), global DNA methylcytosine (*L1-5utr* and *L1-orf*) and global 5-hydroxymethylcytosine (*5-hmc*) are provided for the 10 regions of the rat brain that were analyzed, with standard error of the mean in brackets.

Table 3: DNA methylation of mitochondrial-encoded genes in the rat brain following morphine induction. Mean DNA methylation levels of three genes (*Mtco1*, *Mtco2* and *Mtco3*) are provided, with standard error the mean in brackets.

Figure 1. Overview of experimental approach





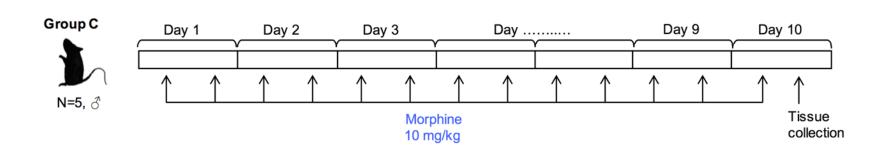


Figure 2: Variation in DNA methylation by region of the rat brain

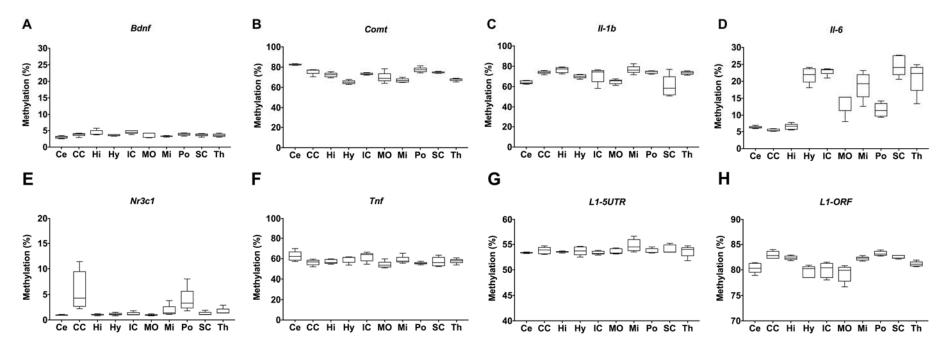


Figure 3: Differential gene-specific DNA methylation in response to morphine exposure

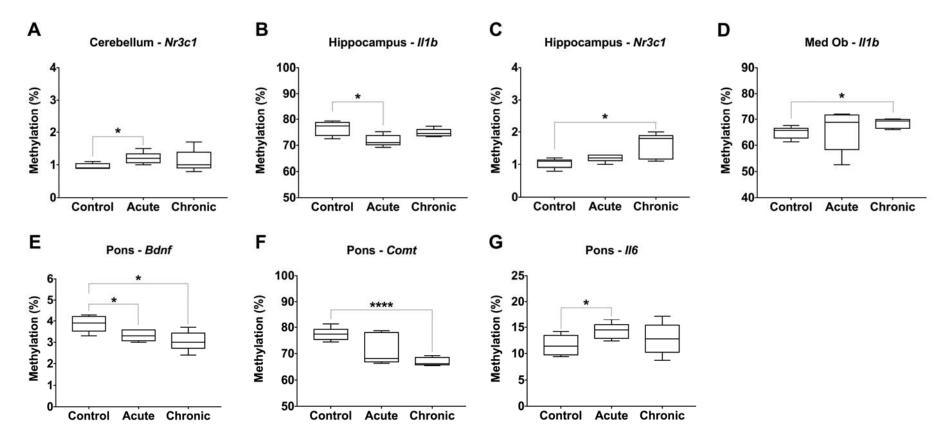


Figure 4: Global DNA methylation levels following acute and chronic morphine exposure

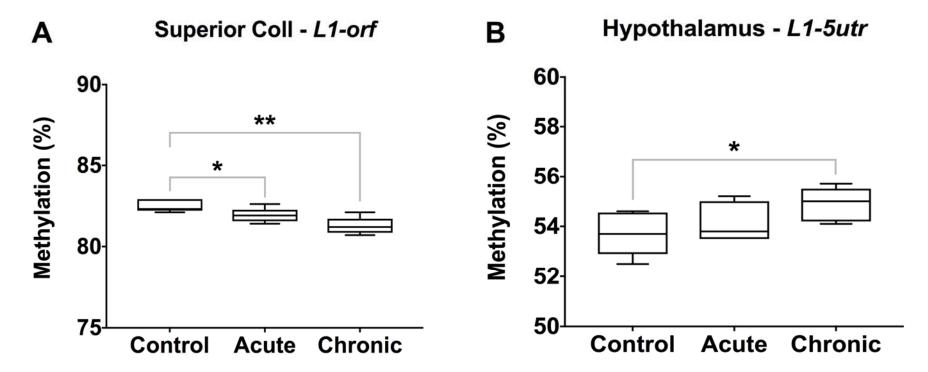


Figure 5: Global 5-hydroxymethylcytosine levels following acute and chronic morphine exposure

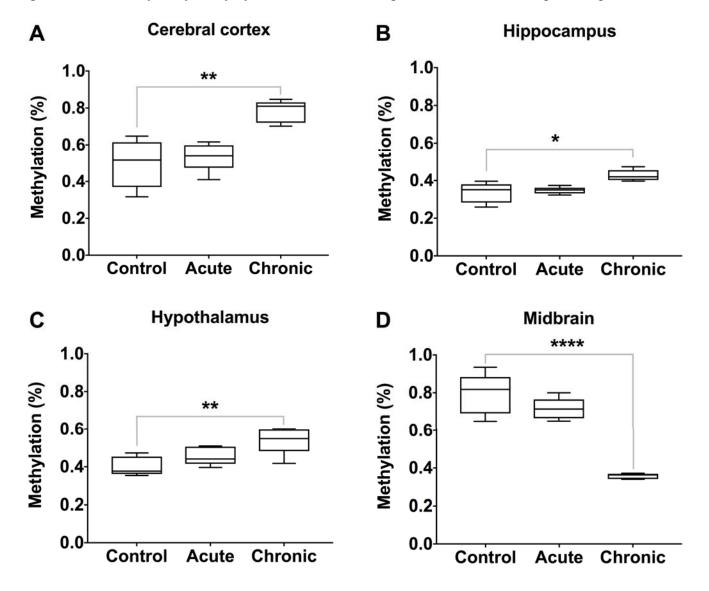


Table 1: PCR and pyrosequencing primer sequences

Gene name	Primer	Sequence
	Forward primer (5' to 3')	TTTTTAGTTTTGTTTAGATTAAATGGAGT
Bdnf	Reverse biotin primer (5' to 3')	CAACAAAAAATTAAATTATTAATAATAAA
	Sequencing primer (5' to 3')	GTTTTTATTGAAGG
	Sequence analyzed	C/TGTGC/TGAGTATTATTTTC/TGTTATG
	Forward primer (5' to 3')	GTTTGTTGTAGTTTGGAGTTAGGT
Comt	Reverse biotin primer (5' to 3')	CTCATCCTCCCCATTACCT
Comt	Sequencing primer (5' to 3')	TATGGTTTAGTGTGG
	Sequence analyzed	C/TGGTTGTGGGGTGTAGGGGGGC/TGGGGGGGT
	Forward primer (5' to 3')	GGTTGGTAAAAGTTTGTTAAGTT
Nr3c1	Reverse biotin primer (5' to 3')	CTAAAAACTCTCCCCTCCCC
Nr3c1	Sequencing primer (5' to 3')	GTTTATTTTAGTATT
	Sequence analyzed	C/TGC/TGC/TGTTC/TGTTC/TGC
	Forward primer (5' to 3')	TGTATAAGGAAGTTTGATTGGAGAG
Il1b	Reverse biotin primer (5' to 3')	ATAAAATCAATTAACCCAAAAAAA
1110	Sequencing primer (5' to 3')	ATGTTTTGAATTATT
	Sequence analyzed	C/TGGGGTTTGCTGTCCACTAGTTTTCTCTCCCTC/TGTTTTA
	Forward primer (5' to 3')	TTGTGATTTTTGGATGTTAAATGA
Il6-1	Reverse biotin primer (5' to 3')	CAAACATCCCCAATCTCATATTTAT
110-1	Sequencing primer (5' to 3')	TTGTGATTTTTGGATGTTAAATGA
	Sequence analyzed	C/TGTTATAT
	Forward primer (5' to 3')	TTGTGATTTTTGGATGTTAAATGA
116.0	Reverse biotin primer (5' to 3')	CAAACATCCCCAATCTCATATTTAT
Il6-2	Sequencing primer (5' to 3')	TTAAAAGTAGAGAGT
	Sequence analyzed	C/TGATTTTA
	Forward primer (5' to 3')	GGATTGTTATAGAATTTTGGTGAGG
Tnf	Reverse biotin primer (5' to 3')	ACTTCCTTAATAAAAAAAACCATAATCTC
	Sequencing primer (5' to 3')	TTAAATTTTTGTTTT

	Sequence analyzed	C/TGTATTGGAGAAAATTGA
	Forward primer (5' to 3')	AGTTGGAGTTGGAATAGGATGAATA
MT-col	Reverse biotin primer (5' to 3')	TAACTCCTAAAATAAAAAACACCCC
W11-C01	Sequencing primer (5' to 3')	ATATTTTTTTAGT
	Sequence analyzed	C/TGGAAATTTAGTTTATGTTGGGG/ATATTC/TGTAGATTTAA
	Forward primer (5' to 3')	TAATGATTTAAAATTAGGTGAATTT
MT-co2	Reverse biotin primer (5' to 3')	TAACCCTAATAAAAAAATAACTCATAAATA
W11-CO2	Sequencing primer (5' to 3')	ATAGAATTTTAATT
	Sequence analyzed	C/TGTATATTAATTTATTC/TGAAGAC/TGTTTTG
	Forward primer (5' to 3')	GTTATTATTTTATTGTATAAAAAGGTT
MT-co3	Reverse biotin primer (5' to 3')	AAATAATAAAATACTCAAAAAAATCC
W11-CO3	Sequencing primer (5' to 3')	GTATAAAAAGGTTTT
	Sequence analyzed	C/TGATAC/TGGAATAATTTTGTTTATTGTTTTC/TGAAGT
	Forward primer (5' to 3')	GGTGTATAGGTTTTTTGGTTGTTG
L1 UTR	Reverse biotin primer (5' to 3')	AAATTCACCAAACAACTTTCTTACAA
LIOIK	Sequencing primer (5' to 3')	TTTTTTGGTTGT
	Sequence analyzed	C/TGTTGTAGAGAGTTC/TGTGGTAGTATTTTA
	Forward primer (5' to 3')	AGAAAGAATATTAAAAATAGTAAGGGAAAA
L1 ORF	Reverse biotin primer (5' to 3')	ATCAATCCAAAATCTTCTAACCTTC
LIOKF	Sequencing primer (5' to 3')	TTATATTAGATTTTT
	Sequence analyzed	C/TGTTAGAAATTAT

Table 2: Nuclear DNA methylation in the rat brain following morphine induction

Region	Treatment	Bdnf	Comt	Il1b	Il6-1	Nr3c1	Tnf	L1-5utr	L1-orf	5-hmc
Cerebellum	Control	3.0 (0.2)	82.5 (0.3)	64.2 (0.7)	6.3 (0.2)	1.0 (0.0)	62.5 (2.2)	53.3 (0.1)	80.4 (0.5)	0.48 (0.07)
	Acute	3.0 (0.2)	83.6 (0.5)	66.2 (1.3)	5.9 (0.3)	1.2 (0.1)	63.2 (2.8)	53.8 (0.3)	82.9 (0.3)	0.51 (0.06)
	Chronic	3.5 (0.4)	82.4 (0.3)	64.8 (0.4)	6.0 (0.2)	1.1 (0.2)	65.3 (0.9)	53.5 (0.1)	82.4 (0.2)	0.63 (0.03)
	Control	3.8 (0.2)	75.8 (1.3)	74.1 (0.7)	5.5 (0.2)	5.7 (1.7)	56.4 (1.3)	53.7 (0.4)	79.7 (0.5)	0.50 (0.06)
Cerebral cortex	Acute	4.1 (0.4)	74.8 (0.9)	76.1 (1.0)	8.2 (1.8)	3.1 (1.4)	55.3 (1.4)	53.3 (0.2)	80.0 (0.7)	0.54 (0.03)
	Chronic	3.8 (0.4)	77.5 (0.5)	74.6 (2.2)	5.5 (0.5)	4.7 (0.9)	52.8 (1.2)	53.6 (0.2)	79.3 (0.7)	0.78 (0.03)
	Control	4.3 (0.4)	72.4 (1.0)	76.5 (1.3)	6.5 (0.4)	1.0 (0.1)	57.1 (1.0)	54.8 (0.6)	82.2 (0.2)	0.34 (0.02)
Hippocampus	Acute	3.5 (0.2)	70.0 (1.1)	71.8 (1.0)	5.7 (0.5)	1.2 (0.1)	57.5 (1.8)	53.7 (0.2)	83.2 (0.2)	0.35 (0.01)
	Chronic	3.4 (0.2)	71.9 (0.2)	74.8 (0.7)	6.4 (0.3)	1.6 (0.2)	58.9 (1.0)	54.0 (0.4)	82.5 (0.2)	0.43 (0.01)
	Control	3.6 (0.1)	65.1 (0.8)	70.1 (0.9)	21.8 (1.1)	1.1 (0.1)	59.4 (1.5)	53.6 (0.5)	81.1 (0.2)	0.40 (0.02)
Hypothalamus	Acute	3.8 (0.2)	65.2 (1.5)	68.9 (2.1)	16.4 (2.7)	1.3 (0.2)	55.9 (1.4)	54.0 (0.6)	81.5 (0.4)	0.46 (0.02)
	Chronic	3.7 (0.3)	65.0 (0.8)	68.0 (1.2)	20.4 (0.9)	1.1 (0.1)	58.9 (1.1)	54.3 (0.7)	83.4 (0.3)	0.54 (0.03)
	Control	4.6 (0.3)	73.4 (0.5)	71.1 (3.4)	23.0 (0.5)	1.2 (0.2)	62.0 (2.1)	54.5 (0.5)	82.6 (0.1)	0.57 (0.1)
Inferior colliculus	Acute	3.9 (0.4)	72.6 (0.9)	72.4 (3.8)	22.5 (1.2)	1.3 (0.1)	62.5 (1.7)	54.2 (0.4)	80.0 (0.5)	0.62 (0.07)
	Chronic	4.0 (0.4)	72.7 (0.5)	76.1 (0.7)	24.0 (0.5)	1.3 (0.1)	63.7 (1.3)	53.6 (0.6)	77.5 (2.2)	0.79 (0.04)
	Control	3.7 (0.4)	69.8 (2.3)	64.8 (1.1)	13.7 (1.4)	1.0 (0.1)	54.0 (1.5)	53.4 (0.3)	80.1 (0.5)	0.51 (0.05)
Medulla oblongata	Acute	3.4 (0.3)	69.1 (1.1)	65.7 (3.6)	13.2 (0.9)	1.1 (0.1)	53.0 (1.5)	54.5 (0.6)	81.8 (0.2)	0.56 (0.07)
_	Chronic	3.8 (0.2)	67.3 (0.8)	68.4 (0.9)	14.6 (0.3)	0.9 (0.1)	56.5 (0.4)	53.9 (0.4)	82.7 (0.1)	0.66 (0.08)
	Control	3.3 (0.1)	66.8 (0.9)	76.6 (1.7)	18.8 (1.8)	1.8 (0.5)	58.8 (1.7)	55.4 (0.6)	81.9 (0.2)	0.79 (0.05)
Midbrain	Acute	3.7 (0.4)	68.1 (1.1)	72.0 (1.8)	19.3 (0.9)	1.9 (0.4)	57.2 (1.8)	53.3 (0.4)	81.8 (0.4)	0.72 (0.03)
	Chronic	3.2 (0.3)	68.2 (1.0)	73.6 (2.0)	21.3 (1.2)	1.6 (0.3)	60.6 (2.1)	54.6 (0.7)	80.7 (0.1)	0.36 (0.01)
	Control	3.9 (0.2)	77.3 (1.1)	74.3 (0.7)	11.6 (0.9)	3.9 (1.1)	55.5 (0.6)	53.6 (0.4)	83.1 (0.3)	0.69 (0.09)
Pons	Acute	3.3 (0.1)	71.6 (2.7)	75.0 (1.4)	14.3 (0.7)	3.6 (0.8)	54.3 (1.1)	53.8 (0.3)	82.3 (0.1)	0.58 (0.05)
	Chronic	3.1 (0.2)	66.9 (0.8)	72.5 (1.6)	12.8 (1.4)	3.7 (1.1)	56.6 (2.5)	54.9 (0.3)	78.5 (0.2)	0.57 (0.06)
	Control	3.7 (0.2)	74.8 (0.4)	60.3 (4.7)	24.6 (1.4)	1.2 (0.2)	57.0 (2.1)	53.9 (0.4)	79.7 (0.3)	0.54 (0.04)
Superior colliculus	Acute	3.3 (0.3)	73.4 (1.8)	59.4 (3.6)	21.4 (1.8)	1.8 (0.5)	57.9 (1.6)	53.9 (0.3)	79.0 (0.2)	0.53 (0.03)
	Chronic	3.2 (0.3)	74.1 (0.7)	58.4 (2.2)	25.1 (0.6)	1.2 (0.1)	60.8 (1.1)	53.6 (0.0)	81.9 (0.2)	0.51 (0.03)

	Control	3.6 (0.2)	67.7 (0.6)	73.5 (0.8)	21.0 (2.0)	1.7 (0.3)	57.7 (1.1)	54.4 (0.3)	82.8 (0.1)	0.37 (0.01)
Thalamus	Acute	3.4 (0.1)	67.1 (1.0)	72.9 (2.4)	20.1 (2.2)	1.8 (0.4)	57.9 (2.4)	54.7 (0.1)	81.3 (0.2)	0.36 (<0.01)
	Chronic	3.6 (0.3)	67.9 (0.8)	72.2 (1.0)	22.2 (0.8)	2.0 (0.4)	60.1 (1.3)	53.5 (0.2)	81.7 (0.4)	0.37 (<0.01)

Table 3: DNA methylation of mitochondrial-encoded genes in the rat brain following morphine induction

Region	Treatment	Mtco1	Mtco2	Mtco3
	Control	2.1 (0.1)	0.9 (0.1)	1.1 (0.1)
Cerebellum	Acute	2.0 (0.2)	1.0 (0.1)	1.2 (0.1)
	Chronic	2.1 (0.1)	0.9(0.1)	1.1 (0.1)
	Control	2.7 (0.6)	0.8 (0.1)	1.1 (0.1)
Cerebral cortex	Acute	1.8 (0.3)	0.9 (0.2)	1.1 (<0.01)
	Chronic	1.9 (0.4)	0.8 (0.1)	1 (0.1)
	Control	1.9 (0.1)	1.0 (0.1)	1.2 (0.1)
Hippocampus	Acute	1.9 (0.2)	0.8 (0.1)	1.3 (0.1)
	Chronic	1.8 (0.1)	0.8 (0.1)	1.1 (0.1)
	Control	2.0 (0.1)	0.9 (0.1)	1.1 (0.1)
Hypothalamus	Acute	2.1 (0.2)	0.9(0.1)	1.1 (0.1)
	Chronic	1.9 (0.2)	0.7 (0.1)	1.0 (0.1)
	Control	2.2 (0.1)	1.0 (0.1)	1.3 (0.2)
Inferior colliculus	Acute	2.2 (0.1)	0.9(0.1)	1.2 (0.1)
	Chronic	2.0 (0.1)	0.8 (0.1)	1.1 (0.1)
	Control	2.4 (0.3)	1.0 (0.1)	1.1 (0.1)
Medulla oblongata	Acute	2.0 (0.2)	0.8 (0.1)	1.1 (0.1)
	Chronic	2.0 (0.2)	0.8 (0.1)	1.1 (0.1)
	Control	1.9 (0.2)	0.9 (0.1)	1.2 (0.2)
Midbrain	Acute	2.2 (0.4)	0.9(0.1)	1.1 (0.1)
	Chronic	2.0 (0.2)	1.0 (0.1)	1.1 (0.1)
	Control	1.9 (0.3)	0.8 (0.1)	1.0 (0.2)
Pons	Acute	2.3 (0.4)	0.8 (0.1)	1.6 (0.5)
	Chronic	2.6 (1.0)	0.8 (0.1)	1.1 (0.1)
	Control	2.1 (0.1)	1.0 (0.1)	1.3 (0.1)
Superior colliculus	Acute	2.4 (0.2)	0.8 (0.1)	1.3 (<0.01)
	Chronic	2.1 (0.2)	0.9 (0.1)	1.3 (0.1)
	Control	2.1 (0.1)	1.0 (0.1)	1.3 (0.2)
Thalamus	Acute	1.9 (0.1)	0.9 (0.1)	1.1 (<0.01)
	Chronic	1.8 (0.2)	1.0 (0.3)	0.9 (0.1)