Neuronal 5-HT Receptors and SERT

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Introduction

5-hydroxytryptamine (5-HT, serotonin) is an ancient biochemical manipulated through evolution to be utilized extensively throughout the animal and plant kingdoms. Mammals employ 5-HT as a neurotransmitter within the central and peripheral nervous systems, and also as a local hormone in numerous other tissues, including the gastrointestinal tract, the cardiovascular system and immune cells. This multiplicity of function implicates 5-HT in a vast array of physiological and pathological processes. This plethora of roles has consequently encouraged the development of many compounds of therapeutic value, including various antidepressant, antipsychotic and antiemetic drugs.

Part of the ability of 5-HT to mediate a wide range of actions arises from the imposing number of 5-HT receptors.[1] Numerous 5-HT receptor families and subtypes have evolved. Currently, 18 genes are recognized as being responsible for 14 distinct mammalian 5-HT receptor subtypes, which are divided into 7 families, all but one of which are members of the G-protein coupled receptor (GPCR) superfamily. The exception is the 5-HT$_3$ receptor, a Cys-loop ligand-gated ion channel (LGIC) that in evolutionary terms arose independent of the GPCR 5-HT receptors along with other members of this superfamily (e.g. the nicotinic acetylcholine receptor, GABA$_A$ receptor, glycine receptor and the Zn^{2+}-activated receptor). Further receptor heterogeneity is generated through alternative splicing (e.g. 5-HT$_3$, 5-HT$_4$ and 5-HT$_7$ receptors), RNA editing (the 5-HT$_{2C}$ receptor), and the putative formation of homo- and heterodimers (5-HT$_4$ and the β_2 adrenoceptor).[2]

The 5-HT$_1$ Receptor Family

This family consists of five separate gene products: 5-HT$_{1A}$, 5-HT$_{1B}$, 5-HT$_{1D}$, 5-ht$_{1e}$, and 5-HT$_{1F}$ receptors.

Previously, some of these were thought to be species specific homologs (e.g. 5-HT$_{1B}$ receptor in rats and 5-HT$_{1D}$ receptor in humans), but the genes for each of these receptors are now known to be present in every mammalian species examined so far. Each is encoded by a single, intron-less reading frame and they share considerable sequence homology. All of these receptors couple to G$_{i/o}$ to inhibit adenylyl cyclase and reduce cAMP levels, but additional signal transduction mechanisms have also been described. While their gene structure and molecular properties are similar, important cellular differences and distinct patterns of regional expression in the body underlie divergent physiological features. Several of these receptors are well known as autoreceptors that regulate the excitability of serotonin neurons and the release of serotonin,[3] but also they are expressed in nonserotonergic neurons, where they can have analogous effects on other neurotransmitters.
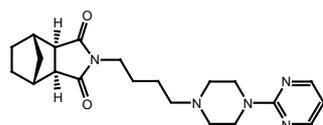
5-HT$_{1A}$ Receptors

5-HT$_{1A}$ receptors are distributed broadly in the CNS, found in the soma, dendrites and in some cases the axon hillock of neurons, and the cell body and processes of astrocytes. This receptor is expressed by all serotonin neurons (as autoreceptors) and by many nonserotonergic neurons (as heteroreceptors). The electrophysiological effect of 5-HT$_{1A}$ receptor activation on neurons is generally inhibitory and acts by reducing neuronal firing rate. A number of highly selective ligands have been developed, and they range from full agonists to partial agonists, antagonists, and inverse agonists. 5-HT$_{1A}$ receptors are thought to be therapeutic targets for several neuropsychiatric disorders including anxiety, depression, and schizophrenia. Clinically used ligands include some of the atypical antipsychotics, which have partial agonist or neutral antagonist activity and buspirone, a partial agonist that is used for generalized anxiety disorder. 5-HT$_{1A}$ receptor partial agonists are clinically useful anxiolytic drugs and may act on the autoreceptors to reduce serotonergic activity, whereas 5-HT$_{1A}$ receptors in the hippocampus have been implicated in the mechanism of antidepressant action (by facilitating neurogenesis) and in regulating the hypothalamic-pituitary-adrenal axis. Other physiological effects of CNS 5-HT$_{1A}$ receptor activation include hypothermia, hyperphagia, and serotonin syndrome.[1] 5-HT$_{1A}$ receptor knockout mice have heightened anxiety and may exhibit diminished depression-like features.[4,5] As with the other serotonin receptors this may involve receptor actions during early brain development as well as during processing of emotional experience in the adult. A number of highly selective ligands for 5-HT$_{1A}$ receptors have been developed, although it should also be noted that some of these share affinity for 5-HT$_7$ receptors (e.g. 8-OH-DPAT) and others for other 5-HT$_1$ or 5-HT$_2$ receptors. WAY 100635 has often been used as a highly selective 5-HT$_{1A}$ receptor neutral antagonist. Xaliproden and S-14506 are selective agonists.
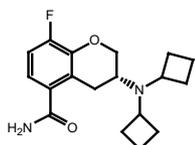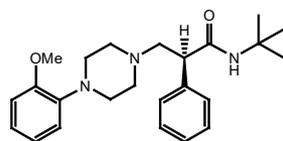
Figure 1A | 5-HT$_{1A}$ subtype-selective compounds
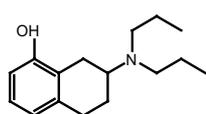
8-Hydroxy-DPAT
(Cat. No. 0529)
5-HT$_{1A}$ agonist

Tandospirone
(Cat. No. 2854)
5-HT$_{1A}$ partial agonist

NAD 299
(Cat. No. 3282)
5-HT$_{1A}$ antagonist

(S)-WAY 100135
(Cat. No. 1253)
5-HT$_{1A}$ antagonist

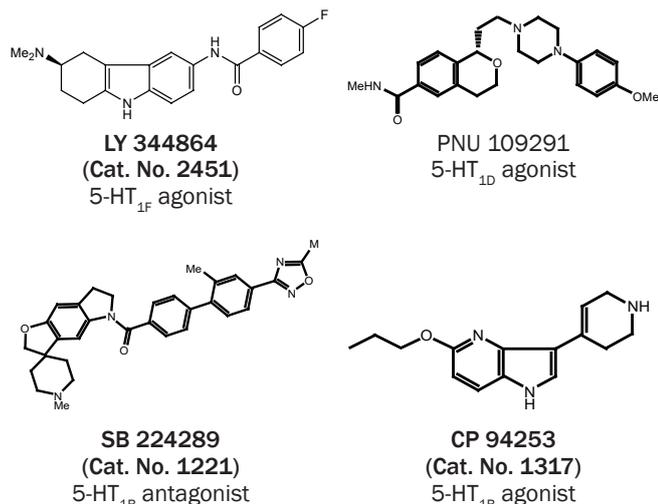(**Bold** text denotes compounds available from Tocris at time of publication)

5-HT$_{1B}$ Receptors

5-HT$_{1B}$ receptors are also distributed broadly in the CNS in serotonergic and nonserotonergic neurons; these receptors are predominantly translocated to axon terminals, so there is an anatomical mismatch between the localization of mRNA and mature 5-HT$_{1B}$ receptor protein. Historically the 5-HT$_{1B}$ receptor was thought to be the rat analog of 5-HT$_{1D}$ receptors, but it is now clear that both receptors are present in all mammalian species examined and their regional distributions differ.[6] β-adrenergic antagonists have high affinity for 5-HT$_{1B}$ receptors in some but not all species. 5-HT$_{1B}$ autoreceptors have been found to reduce 5-HT synthesis and release and enhance reuptake via the serotonin transporter. 5-HT$_{1B}$ heteroreceptors inhibit the release of a range of different neurotransmitters, depending on the neuron types that express them. Systemic administration of 5-HT$_{1B}$ receptor agonists have several behavioral effects including increased locomotion, changes in brain reward mechanisms, and decreased aggression, whereas selective antagonists may have some procognitive potential.[7,8] The expression of these receptors in diverse and potentially competing sets of neurons may impact their utility as a clinical target, although several 5-HT$_{1B/D}$ receptor agonists are effective as antimigraine treatments. 5-HT$_{1B}$ receptor knockout mice have been tested extensively and have a distinct phenotype characterized by increased aggression and, in most cases, predisposition for addiction-like behaviors. Their phenotype may however depend on compensatory changes in the dopamine system during development rather than being due to decreased 5-HT$_{1B}$ receptor signaling in adults. Several moderately selective agonists have been developed, including CP 93129 and the more brain-penetrant CP 94253, and antagonists such as SB 224289 are used commonly to identify 5-HT$_{1B}$ receptor-mediated responses.

5-HT$_{1D}$ Receptors

5-HT$_{1D}$ receptors are expressed at more modest levels than 5-HT$_{1B}$ receptors in the brain, but the largest extent of expression seems to be in the raphe nuclei. Similarly, 5-HT$_{1D}$ receptor binding sites are present at a lower level than 5-HT$_{1B}$ receptor binding sites in most brain areas.[9] Most evidence, using 5-HT$_{1B}$ receptor knockout mice as controls, indicates that terminal serotonin autoreceptor activity in the forebrain is of the 5-HT$_{1B}$ receptor type,[10] but there may be somatodendritic 5-HT$_{1D}$ autoreceptors that regulate serotonin release within the raphe nuclei.[11] The dilemma for most putative selective 5-HT$_{1D}$ receptor ligands is that they have high affinity for more than one receptor, usually either the 5-HT$_{1B}$ or 5-HT$_{1A}$ receptors, but often not both, allowing combinations of drugs to achieve conditions that are reasonably selective for activation or inhibition of 5-HT$_{1D}$ receptors. Interestingly, ketanserin has ~100-fold higher affinity for human 5-HT$_{1D}$ than 5-HT$_{1B}$ receptors, but it has the highest affinity for 5-HT$_{2A}$ receptors.

Figure 1B | 5-HT$_1$ subtype-selective compounds

LY 344864
(Cat. No. 2451)
5-HT$_{1F}$ agonist

PNU 109291
5-HT$_{1D}$ agonist

SB 224289
(Cat. No. 1221)
5-HT$_{1B}$ antagonist

CP 94253
(Cat. No. 1317)
5-HT$_{1B}$ agonist

(**Bold** text denotes compounds available from Tocris at time of publication)

5-ht$_{1e}$ Receptors

The lower case letters denote that this receptor has not been confirmed to have meaningful physiological functions *in vivo*.

The existence of this receptor was originally postulated based on radioligand binding studies using brain homogenates, indicating that a 5-HT$_1$-like receptor with low affinity for 5-carboxamidotryptamine could be demonstrated. It is now clear that several binding sites might have contributed to this observation. The gene sequence for the 5-ht$_{1e}$ receptor has been cloned from a human placental library and guinea pig brain genomic DNA but was undetectable in rat and mouse.[12] There have been few pharmacological studies of this receptor in rodents or in human tissue, but it was detected by RT-PCR in various brain regions of guinea pig and in the human and monkey brain by *in situ* hybridization.[6] Furthermore, no highly selective ligands have been developed, although a number of typical 5-HT$_1$ receptor agonists and antagonists display modest affinity at these receptors in heterologous expression systems. A recent method for labeling 5-ht$_{1e}$ binding sites in guinea pig was recently described and may be a useful strategy for modeling human 5-ht$_{1e}$ receptors.[13] The physiological significance of this receptor therefore remains uncertain.

5-HT$_{1F}$ Receptors

The 5-HT$_{1F}$ receptor has been detected in multiple species and has been cloned from human, rat, guinea pig, and mouse genomes. Like other members of the 5-HT$_1$ receptor family, this receptor inhibits adenylyl cyclase via a G$_i$-dependent mechanism. It is expressed at modest levels in the CNS in both serotonergic and nonserotonergic cell bodies where it acts as both an autoreceptor and heteroreceptor, respectively. Like 5-HT$_{1B}$ receptors, 5-HT$_{1F}$ is expressed in trigeminal ganglion and vestibular nuclei neurons and has a high affinity for triptan drugs that are useful for the treatment of migraine headache. The relative contribution of each of these two receptors to pain relief in migraine has not
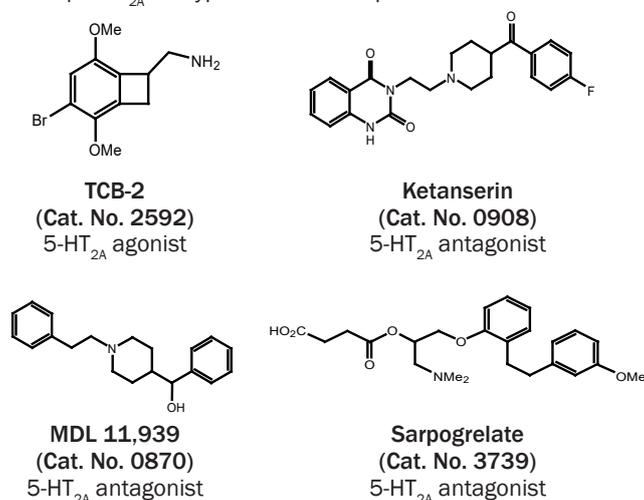
been resolved. It is possible that less selective agonists that can potentially activate multiple 5-HT$_1$ receptors (e.g. 5-HT$_{1B/D/F}$ subtypes, such as the 'triptans') may relieve migraine headaches via multiple mechanisms; therefore, more selective drugs may have distinct clinical efficacy and side effect profiles. For example, the relatively selective 5-HT$_{1F}$ receptor agonist LY 334370, which has ~100-fold higher affinity for 5-HT$_{1F}$ over 5-HT$_{1B}$ receptors, is active in animal models of anti-migraine activity but seems to act on the trigeminal nucleus rather than through a vascular mechanism.[14] To date, no selective 5-HT$_{1F}$ antagonists have been identified.

The 5-HT$_2$ Receptor Family

The 5-HT$_2$ family has three members, 5-HT$_{2A}$, 5-HT$_{2B}$ and 5-HT$_{2C}$ receptors. Their pharmacological significance is substantial due to both the clinical importance and complex pharmacological features of these receptors. 5-HT$_2$ receptors were originally posited based on an important study by Gaddum and Picarelli in 1957.[15] Using a guinea pig ileum contraction bioassay, they observed two classes of 'tryptamine' receptors (namely 'M' and 'D') that correspond to 5-HT$_3$ and 5-HT$_2$ receptors in current nomenclature. Constituents of the 5-HT$_2$ receptor family share similar sequence homology, structural motifs, and overlapping pharmacology, although considerable ligand development has occurred and highly selective ligands are available.[16] Some of the notable features of these receptors include the prominence of inverse agonists, multiple signal transduction pathways, agonist-directed signaling and important clinical roles in neuropsychiatric conditions. Like 5-HT$_1$ receptors, 5-HT$_2$ receptors have a seven-transmembrane domain motif but couple to phospholipases C and A2. The relative efficiency of coupling to these effectors varies depending on the cell type being examined.

5-HT$_{2A}$ Receptors

5-HT$_{2A}$ receptors are densely expressed in the forebrain, especially the cortex, and are expressed in both interneurons and pyramidal neurons. Various ligands display complex pharmacological patterns of activity at 5-HT$_{2A}$ receptors, ranging from full to partial

Figure 2A | 5-HT$_{2A}$ subtype-selective compounds

TCB-2
(Cat. No. 2592)
5-HT$_{2A}$ agonist

Ketanserin
(Cat. No. 0908)
5-HT$_{2A}$ antagonist

MDL 11,939
(Cat. No. 0870)
5-HT$_{2A}$ antagonist

Sarpogrelate
(Cat. No. 3739)
5-HT$_{2A}$ antagonist

(**Bold** text denotes compounds available from Tocris at time of publication)

agonism, and from neutral antagonism to inverse agonistic behavior. These different activities are thought to reflect ligand stabilization of multiple structural conformations which have been resolved by X-ray crystallography in some cases. Structure activity models have also been tested using site directed mutagenesis. A great deal of biophysical information has been generated using molecular strategies and heterologous expression of 5-HT_{2A} receptors. Furthermore, simultaneous analysis of multiple signal transduction mechanisms in cell culture systems has shown that the same ligand may have differing degrees of intrinsic activity for the activation of different second messenger systems by the same population of 5-HT_{2A} receptors.[17] This further supports the notion of complex and dynamic structure-activity relationships for 5-HT_{2A} and 5-HT_{2C} receptors. 5-HT has relatively low affinity for the 5-HT_{2A} receptor compared to other 5-HT receptors, with a K_d in the low micromolar range. It can be argued however that the high affinity, active conformational state has roughly ten-fold higher affinity for 5-HT_{2A}. Several agonists, such as DOI and LSD, have high affinity for 5-HT_{2A} receptors and others demonstrate selective potency for stimulating one signal transduction pathway over another (e.g. TCB-2). These, however are not particularly selective as they also bind to other 5-HT_2 receptors. Several well-characterized antagonists display high selectivity for 5-HT_{2A} receptors, including ketanserin and MDL 100907. A number of others have high affinity but their specificity is not fully described. Some 5-HT_{2A} receptor agonists produce psychotomimetic effects (most famously LSD), and therefore several antipsychotic medications are high affinity 5-HT_{2A} receptor antagonists.

5-HT_{2B} Receptors

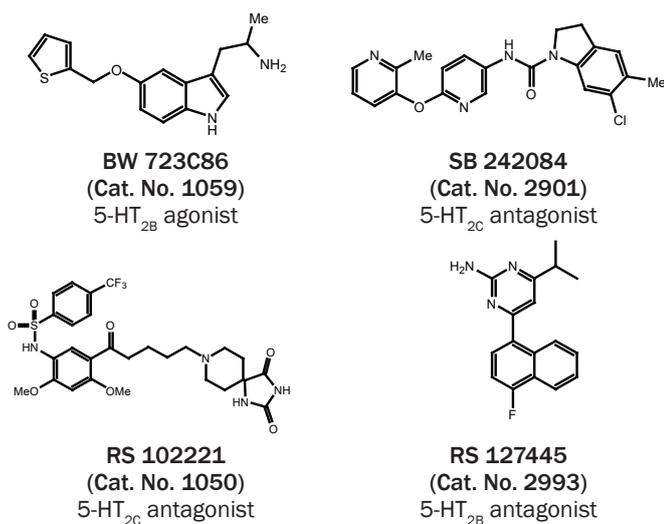5-HT_{2B} receptors are sparsely expressed in discrete subregions of CNS, but are heavily expressed in liver, kidney, heart and the fundus of the stomach. This pattern of expression differs from 5-HT_{2A} and 5-HT_{2C} receptors, which are expressed at relatively higher levels in the CNS. They share affinity for many of the same drugs, but a few highly selective 5-HT_{2B} receptor antagonists have been described, including RS 127445. The physiological role of 5-HT_{2B} receptors is still unclear, but they have been implicated in cardiac function, morphogenesis, and anxiety. 5-HT_{2B} receptors have similar signal transduction coupling to other 5-HT_2 receptors *in vitro*, but less evidence has accumulated for endogenous receptors.

5-HT_{2C} Receptors

5-HT_{2C} receptors are strongly expressed throughout the CNS but are expressed at lower levels outside the brain. They are unique among the 5-HT receptors because the mRNA transcript can be edited, leading to subtle changes in coding sequence that can have functionally relevant impacts on the mature receptor protein.[18] 5-HT_{2C} receptor knockout mice have been generated which interestingly develop mid-life obesity, glucose intolerance and seizures.[19] The pharmacology of 5-HT_{2C} receptors is similar to the other 5-HT_2 receptors; they display complex interactions with signal transducing mechanisms, agonist directed signaling and inverse agonism by some atypical antipsychotics. Evidence from animal models indicates that 5-HT_{2C} receptors may impact anxiety, appetite, addiction, and antipsychotic drug actions. SB 242084 is a fairly selective 5-HT_{2C} receptor antagonist with anxiolytic activity. There are no highly selective 5-HT_{2C} agonists developed to date as those described also have affinity for other 5-HT_2 receptors. Lorcaserin displays some selectivity for the 5-HT_{2C} receptor, although there are no readily available sources for this molecule outside of custom synthesis.[20]

Table 1 | Summary of the structure, pharmacology and function of mammalian 5-HT_1 receptors

Human Gene	5q11.2–q13	6q13	1p34.3–36.3	6q14–q15	3q11
Structure	GPCR	GPCR	GPCR	GPCR	GPCR
Transduction System	↓cAMP G-protein coupled-K+ current	↓cAMP	↓cAMP	↓cAMP	↓cAMP
Agonists	8-OH-DPAT (R)-UH301 U 92016A	Sumatriptan L 694247	Sumatriptan PNU 109291 L 694247	–	LY 344864 LY 334370
Antagonists	WAY 100 635 (S)-UH301 NAD 299 (Robalzotan)	GR 55562 SB 224289 SB 236057	BRL 15572 SB 714786	–	–
Effect on Neurotransmission	↑Acetylcholine ↑Noradrenaline ↑Dopamine	↓5-HT ↓Acetylcholine ↓Glutamate ↓Dopamine	↓Glutamate	–	–
Therapeutic Target	Depression Anxiety/stress Panic Aggression Cognition	Depression Anxiety Aggression Migraine Drug addiction	Migraine	–	Migraine

Figure 2B | 5-HT$_{2B}$ subtype-selective compounds

BW 723C86
(Cat. No. 1059)
5-HT$_{2B}$ agonist

SB 242084
(Cat. No. 2901)
5-HT$_{2C}$ antagonist

RS 102221
(Cat. No. 1050)
5-HT$_{2C}$ antagonist

RS 127445
(Cat. No. 2993)
5-HT$_{2B}$ antagonist

(**Bold** text denotes compounds available from Tocris at time of publication)

The 5-HT$_3$ Receptor

The 5-HT$_3$ receptor is the only 5-HT receptor that is a member of the Cys-loop ligand-gated ion channel family.[21] The receptor complex is thought to be pentameric which is consistent with other Cys-loop LGIC family members.[22] This complex may be formed by a combination of up to 5 different subunits, named 5-HT$_3$A-E, although at present only the 5-HT$_3$A and 5-HT$_3$B subunits have been studied in detail. The 5-HT$_3$ receptor complex is a non-selective cation channel (most permeable to Ca^{2+}, Na$^+$ and K$^+$ ions) that mediates fast synaptic depolarizing neuro-transmission in the brain and is prone to rapid desensitization. Recent attention has focused on the combination of subunits forming the functional channel in native tissue. Expression of the 5-HT$_3$A subunit alone in recombinant systems produces a functional receptor that displays many characteristics of native receptors. The caveat is that homomeric 5-HT$_3$A receptors do not generate a relatively high single channel conductance receptor, something that is evident in some populations of native neuronal receptors. Most significantly, coexpression of the 5-HT$_3$A and 5-HT$_3$B subunits results in a heteromeric receptor that mimics the high single channel conductance of some populations of native receptors more faithfully.[23,24] In addition to 5-HT, 5-HT$_3$ receptor action is modulated allosterically by volatile anesthetics and alcohols.[25,26,27] The actions of these compounds may, however, depend on the subunit composition of the receptor.[28]

Within the brain, the highest densities of 5-HT$_3$ receptors are associated with the brainstem nuclei encompassing the chemoreceptor trigger zone; namely the dorsal motor nucleus of the vagus nerve, area postrema and nucleus tractus solitarius.[29] The 5-HT$_3$ receptor is also expressed in human forebrain regions including the hippocampus, amygdala and caudate-putamen.[30] Of note, expression within the extrapyramidal system (caudate-putamen [striatum] and substantia nigra) is not readily detectable in other species (such as rodents and/or non-human primates).

The 5-HT binding site within the 5-HT$_3$ receptor complex is constructed by two adjacent N-termini from neighboring subunits in the pentameric complex. Structural analysis has identified that three peptide loops (designated A, B and C) contribute from the 'principal' subunit and a further three peptide loops from the 'complementary' subunit (D, E and F) participate in ligand binding. Hence, the initial report concerning the stoichiometry of the heteromeric 5-HT$_3$AB receptor (with a subunit composition B-A-B-B-A) generated much debate concerning the potential to identify pharmacological compounds that would discriminate homomeric 5-HT$_3$A receptors from heteromeric 5-HT$_3$AB receptors. The binding sites of the former would arise from A-A interfaces, whereas this structural interface was absent in heteromeric 5-HT$_3$AB receptors. Recently, however, the B-A-B-B-A stoichiometry has been questioned.[31] The majority of compounds investigated so far appear unable to discriminate between molecular isoforms of the 5-HT$_3$ receptor. A notable exception is picrotoxin, which displays weak (micromolar) affinity but good selectivity (approx. 100-fold for homomeric mouse 5-HT$_3$A versus heteromeric mouse 5-HT$_3$AB receptors).[32] This has been demonstrated in functional recordings and the molecular interaction is likely to be a channel blockade of the 5-HT$_3$ receptor rather than competition at the 5-HT binding site.

Whilst the search continues for the identification of compounds that discriminate readily between 5-HT$_3$ receptor molecular isoforms, a large number of ligands exist that display high selectivity for the 5-HT$_3$ receptor versus other neurotransmitter receptors.

In addition to antagonists, there are also high affinity and selective agonists for the 5-HT$_3$ receptor, although these tend to be partial agonists similar to the non-selective exogenous agonist, 2-methyl-5-HT. Some examples of partial agonists are pumosetrag (DDP733), PBG and mCPBG; SR 57227A is a good example of an exogenous near full agonist.

Activation of the 5-HT$_3$ receptor modulates release of various neurotransmitters, including a facilitation of dopamine, GABA and 5-HT release, although the receptor is not thought to be expressed by 5-HT neurons.[34,35] Conversely, the 5-HT$_3$ receptor has an inhibitory effect on acetylcholine release in the cortex.[36,37] This is likely to be mediated via GABAergic interneurons.[37,38]

A number of 5-HT$_3$ receptor ligands – including ondansetron, granisetron, tropisetron and palonosetron – have now been exploited for therapeutic benefit from their ability to alleviate the nausea and vomiting resulting from anticancer chemo- and radiotherapy and also post-operative emesis particularly evident following procedures involving the abdomen.[39]

A further therapeutic utility of 5-HT$_3$ receptor ligands concerns the symptomatic relief from IBS. IBS is a recognized heterogeneous condition, which, although not life-threatening, presents a considerable health and economic burden. The potent and selective 5-HT$_3$ receptor antagonist, alosetron, displays clear efficacy in reducing the symptoms of IBS-d (IBS presenting with diarrhea). Marketing approval for this medication was withdrawn due to rare occurrences of potentially fatal ischemic colitis. This side-effect was also noted – again at a relatively low incidence – in the aborted trials of another 5-HT$_3$ receptor antagonist, cilansetron, suggesting this side-effect is not an 'off-target'

phenomenon. The relatively high number of patients that have received 5-HT$_3$ receptor antagonists to control emesis – without a single report of ischemic colitis - suggests this side effect results from the combination of 5-HT$_3$ receptor antagonism and the IBS condition.

Significantly, patient pressure assisted the reinstatement of alosetron, albeit with limited availability. In Japan, however, regulatory approval exists for the use of a very low dose of the selective 5-HT$_3$ receptor antagonist, ramosetron with a maximum daily dose of 10 μg. This very low dose presumably reduces the occurrence of ischemic colitis by limiting the degree of blockade of the 5-HT$_3$ receptor, although the levels of efficacy achieved by these low doses are open to question. An alternative pharmacological strategy targeting the 5-HT$_3$ receptor has also been evaluated for IBS-c (IBS presenting with constipation). Here the predicted prokinetic action of a 5-HT$_3$ receptor partial agonist, DDP733, was assessed; unfortunately the compound displayed relatively high levels of agonist activity (intrinsic activity) such that the compound caused emesis in some patients (predictable for 5-HT$_3$ receptor agonists with high intrinsic activity).

The potential efficacy of 5-HT$_3$ receptor antagonists to reduce behaviors likely to be mediated via the forebrain (for example anxiety, cognitive dysfunction, and alcohol-induced reward) is not fully understood. Indeed the initial potential of antagonists as therapies for these effects failed to translate in consistent clinical findings. A potential explanation for this is the considerable differences apparent in the cellular and regional expression of the 5-HT$_3$ receptor when comparing laboratory animals (rodents and New World primates) with humans. Interestingly, some effects of 5-HT$_3$ receptor antagonists have been identified in humans without prior identification in animal models including fibromyalgia and chronic fatigue syndrome.

Figure 3 | 5-HT$_3$ selective compounds

SR 57227
(Cat. No. 1205)
5-HT$_3$ agonist

Ondansetron
(Cat. No. 2891)
5-HT$_3$ antagonist

Granisetron
(Cat. No. 2903)
5-HT$_3$ antagonist

Tropisetron
(Cat. No. 2459)
5-HT$_3$ antagonist

(**Bold** text denotes compounds available from Tocris at time of publication)

The 5-HT$_4$ Receptor

Consistent with other GPCRs, a functional 5-HT$_4$ receptor protein arises from a single gene. Arising mRNA, however, can be alternatively spliced within the region corresponding to the extracellular link between the fourth and fifth transmembrane domain and the region corresponding to the C-terminus. This produces ten isoforms – 5-HT$_4$(a-g), 5-HT$_4$(hb), 5-HT$_4$(i) and 5-HT$_4$(n) – although it is possible that even more will become apparent. With the exception of the 5-HT$_4$(d) receptor isoform, 5-HT$_4$ receptor transcripts are expressed in the brain. With the role of the C-terminus to facilitate subcellular localization and to communicate receptor activation rather than impact pharmacology of the orthosteric site, it is not surprising that 5-HT$_4$ receptor isoforms do not tend to differ pharmacologically, although functional differences are apparent. Expression of the 5-HT$_4$ receptor is evident in the brain, gut and cardiovascular tissues. Within the brain, protein and mRNA tend to colocalize indicating a post-synaptic location. Maximal levels of expression are in the basal ganglia, including the substantia nigra, globus pallidus, caudate nucleus, putamen, nucleus accumbens, hippocampus (CA1 and subiculum) and cortex.[40] The 5-HT$_4$ receptor is positively coupled to adenylyl cyclase via G$_s$, with receptor activation resulting in neuronal excitability, although coupling to ion channels is also evident. Excitatory 5-HT$_4$ receptors enhance the release of a number of neurotransmitters including cortical acetylcholine, nigral-striatal dopamine and hippocampal 5-HT. The 5-HT$_4$ receptor is believed to have a role in learning and memory. Many studies have shown that 5-HT$_4$ receptor activation improves performance in various behavioral paradigms of cognitive function.[41] The beneficial effects of 5-HT$_4$ receptor activation may be mediated by facilitation of acetylcholine release in the cerebral cortex. An alternative relevant process attributed to the 5-HT$_4$ receptor relates to amyloid precursor protein (APP) metabolism. 5-HT$_4$ receptors promote secretion of sAPPα, a neuroprotective peptide that facilitates neuronal growth and enhances memory functions in behavioral paradigms and also ablates the cellular toxicity associated with excessive glutamatergic transmission that can result in cognitive impairment.[42] In addition, the 5-HT$_4$ receptor may also enhance cognitive performance through depolarization of pyramidal cells within the CA1 field of the hippocampus and hence promote the induction of hippocampal long-term potentiation (LTP), a cellular phenomenon regarded as a neurophysiological basis of memory.[43]

The 5-HT$_4$ receptor may also have a role in the generation of anxiety. 5-HT$_4$ receptor antagonists have been shown to exhibit anxiolytic properties, whilst the 5-HT$_4$ receptor knockout mouse exhibited abnormal responses to stress, whereby stress-induced hypophagia was attenuated in the knockout mouse compared with the wild-type strain.[44,45] Consistent with the dogma associating excessive 5-HT function with anxiety, 5-HT$_4$ receptor antagonists decrease hippocampal 5-HT release. A number of drug tools are available to either antagonize or activate 5-HT$_4$ receptors. Selective high affinity antagonists include GR 113808, SB 204070 and RS 100235, whereas non-tryptamine selective agonists include RS 67506, ML 10302 and BIMU8. The tryptamine derivative agonist, 5-methoxytryptamine
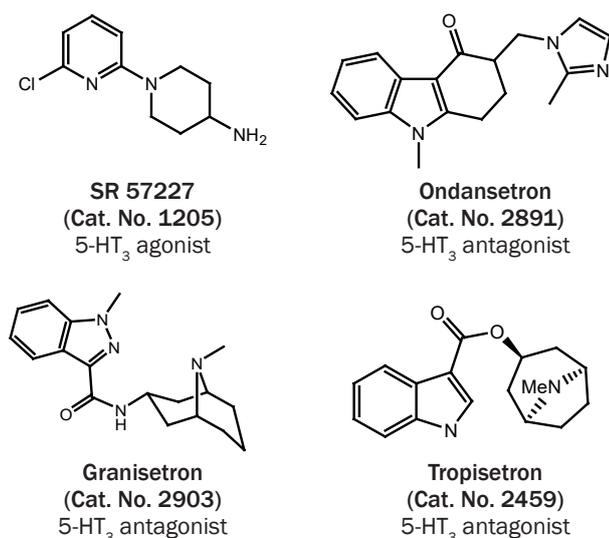
Table 2 | Summary of the structure, pharmacology and function of mammalian 5-HT$_{2-3}$ receptors

Human Gene	13q14– q21	2q36.3–2q37.1	Xq24	11q23.1-23.2 (A) 11q23.1 (B) 3q27 (C/D/E)
Structure	GPCR	GPCR	GPCR	LGIC
Transduction System	↑PLC	↑PLC	↑PLC	Ion conductance (K$^+$, Na$^+$, Ca^{2+})
Agonists	DOI	DOI BW 723C86 Ro 600175	DOI Ro 600175 Lorcaserin	2-methyl 5-HT SR 57227 m-chlorophenyl biguanide
Antagonists	Ketanserin MDL 100907	RS 127445 SB 200646 SB 204741	SB 242084 RS 102221	Granisetron Ondansetron Tropisetron
Effect on Neurotransmission	↑Glutamate ↑Dopamine		↓Dopamine	↑5-HT ↑Dopamine ↓Acetylcholine
Therapeutic Target	Depression Anxiety Schizophrenia Cognition Eating Disorders Sleep Disorder	Depression Anxiety Sleep Disorder Migraine	Anxiety Obesity Cognition	Emesis Anxiety Cognition Drug Addiction Analgesia Chronic Fatigue Syndrome

is also a potent, but non-selective agonist of the 5-HT$_4$ receptor. Some benzamide derivatives, such as cisapride, display agonist actions. Cisapride was marketed as a gastro-prokinetic before it was withdrawn due to cardiovascular side-effects, consistent with the expression of 5-HT$_4$ receptors in atria. A further 5-HT$_4$ receptor agonist, tegaserod, developed for IBS-c was withdrawn for similar reasons.

The 5-ht$_5$ Receptors

The 5-ht$_5$ receptor subfamily contains two gene products; the 5-ht$_{5a}$ and 5-ht$_{5b}$ receptors. Despite being discovered nearly 20 years ago, they remain the most poorly understood 5-HT receptor subtypes. There is no conclusive evidence as to how they elicit second messenger responses in native tissue, despite their structural classification as GPCRs. The lack of clear physiological roles for these receptor subtypes has necessitated lower-case appellation to emphasize their current status as merely gene products, contrasting with the upper-case notation of a receptor with known cellular functions in native cells or tissues.
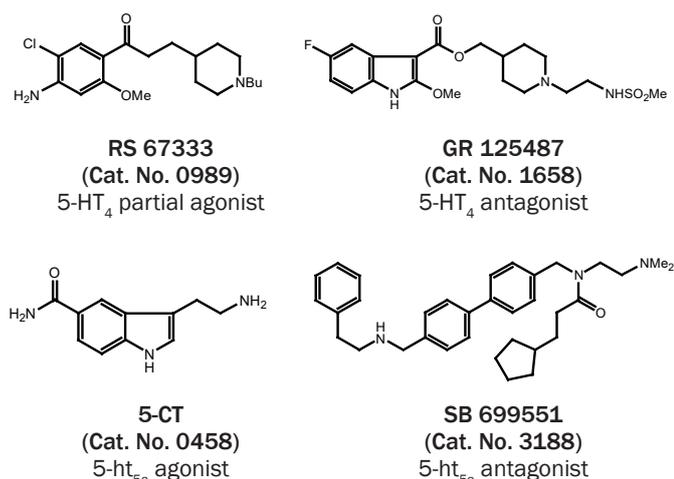
Of the two subtypes, the 5-ht$_{5a}$ receptor has received more attention, since the human 5-ht$_{5b}$ receptor gene sequence is likely to be a pseudogene as it contains stop codons within its open reading frame. If the resulting truncated protein were expressed it is likely that it would lack functionality.[46] The rodent 5-ht$_{5b}$ receptor, however, would appear capable of functional expression although little evidence has been generated. 5-ht$_{5b}$ receptor mRNA in the rat brain is evident in the hippocampus, habenula, entorhinal and piriform cortices, and the olfactory bulb.[47] Within heterologous expression systems, the 5-ht$_{5a}$ receptor may inhibit adenylyl cyclase activity, presumably via G$_i$,[48,49] although other reports have detected no such response.[50]

Alternative transduction processes impacted by this receptor may include an increase in intracellular Ca^{2+} mobilization[51] or coupling to an inwardly rectifying potassium channel.[50] The lack of suitable selective ligands has hampered autoradiographic study of the 5-ht$_{5a}$ receptor. 5-ht$_{5a}$ receptor protein expression in the rat brain is associated with neurons, and is evident in the hypothalamus, raphe nuclei, locus coeruleus, horizontal nucleus of the diagonal band and amygdala, with more moderate immunoreactivity in the cerebral cortex (particularly entorhinal cortex), hippocampus, lateral habenula, substantia nigra, ventral tegmental area, pons and cerebellum. *In situ* hybridization using human brain tissue has demonstrated 5-ht$_{5a}$ receptor transcripts in the cortex, hippocampus, amygdala and cerebellum.[52] Although no definitive role for native 5-ht$_{5a}$ receptors has been identified, a few studies have suggested putative functions.

For instance, 5-ht$_{5a}$ receptor knockout mice display enhanced exploratory behavior in response to a novel environment.[46]

The 5-ht$_{5a}$ receptor has also been implicated in the regulation of rodent circadian rhythm, although limited pharmacological tools to probe this receptor complicates interpretation.[53]

The most promising compound, SB 699551-A,54 displays a 30-fold selectivity for the human 5-ht$_{5a}$ receptor over other 5-HT receptor subtypes and other neuronal targets, aside from the serotonin transporter, which it impacts at only 10-fold higher concentrations.[54] Unfortunately, SB 699551-A displays inter-species variation in affinity for the 5-ht$_{5a}$ receptor and displays relatively low affinity for rodent 5-ht$_{5a}$ receptors (pK = 6.3), which further limits the utility of this compound to investigate 5-ht$_{5a}$ receptor function through the common rodent paradigms.

Figure 4 | 5-HT$_4$ and 5-HT$_5$ compounds

RS 67333
(Cat. No. 0989)
5-HT$_4$ partial agonist

GR 125487
(Cat. No. 1658)
5-HT$_4$ antagonist

5-CT
(Cat. No. 0458)
5-ht$_{5a}$ agonist

SB 699551
(Cat. No. 3188)
5-ht$_{5a}$ antagonist

(**Bold** text denotes compounds available from Tocris at time of publication)

5-HT$_6$ Receptors

The 5-HT$_6$ receptor is coupled to G$_s$ to activate adenylyl cyclase and shows moderate affinity for serotonin. It is strongly and selectively expressed in CNS but has species-specific patterns of expression with rat and human showing intense expression in striatum and hippocampus but about 1/10 of the expression level in mice and litter regional variation in different areas of the mouse brain.[55] A 5-HT$_6$ receptor knockout mouse has been developed but the phenotypic relevance is unclear given the low levels of 5-HT$_6$ receptor expression in wild-type mice as compared to rat or human.[56] The rat and human 5-HT$_6$ receptor are more similar pharmacologically to each other than to the mouse receptor. The 5-HT$_6$ receptor has been found in animal models to offer promise as a target for cognitive enhancement and possibly weight loss.[57] EMDT, EMD 386088, and WAY 181,187 are relatively selective 5-HT$_6$ receptor agonists, and a number of selective antagonists have also been developed including SB 399885, SB 258585 and Ro 4368554. The less selective ligands tend to also have high affinity for 5-HT$_{2A}$ and D$_2$ receptors. A number of clinically important antipsychotic and antidepressant drugs also share high affinity for this receptor along with their other targets possibly weight loss.[57] EMDT, EMD 386088, and WAY 181,187 are relatively selective 5-HT$_6$ receptor agonists, and a number of selective antagonists have also been developed including SB 399885, SB 258585 and Ro 4368554. The less selective ligands tend to also have high affinity for 5-HT$_{2A}$ and D$_2$ receptors. A number of clinically important antipsychotic and antidepressant drugs also share high affinity for this receptor along with their other targets.
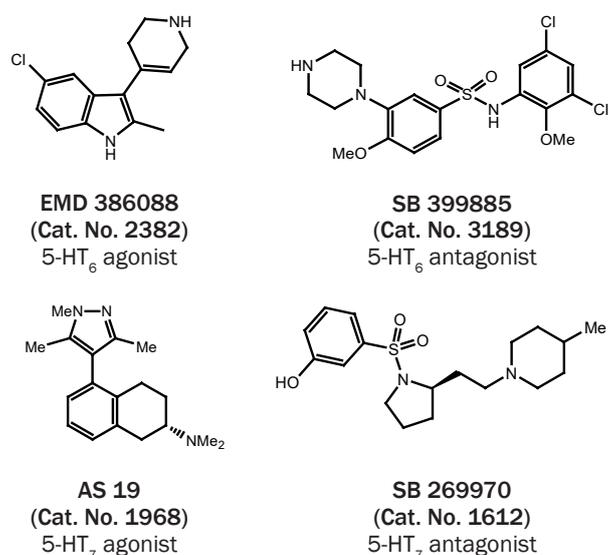
The 5-HT$_7$ Receptor

5-HT$_7$ receptors also couple to G$_s$ (activating adenylyl cyclase) and are widely distributed in the brain.[58] Several splice variants with different patterns of distribution within the CNS have been identified,[59] although they do not show meaningful pharmacological distinctions in human isoforms.[60] Several atypical antipsychotic and antidepressant drugs have sufficient affinity for this receptor and will occupy it at commonly used dosages. Some ligands traditionally associated with other 5-HT receptors also bind to 5-HT$_7$ receptors, especially those associated with 5-HT$_{1A}$, 5-HT$_{2A}$, and 5-HT$_6$ receptors. A particular compound to note is the agonist, 8-OH-DPAT, a full agonist that has only about ten-fold higher affinity for 5-HT$_{1A}$ than 5-HT$_7$ receptors. 5-HT$_7$ receptors have been implicated in a variety of behavioral and physiological processes, including affective behavior, circadian rhythmicity and vasodilation. 5-HT$_7$ receptor knockout mice have reduced immobility in the forced swim test consistent with the pharmacological data suggesting that blockade of this receptor can produce antidepressant effects. Several moderately selective agonists have been reported, including AS 19 and LP 12; SB 258719 and SB 269970 are very selective antagonists at 5-HT$_7$ receptors.

The 5-HT transporter (SERT)

The 5-HT transporter (SERT or 5-HTT) is a Na$^+$/Cl$^-$ dependent biogenic amine transporter whose family includes the dopamine (DAT) and noradrenaline (NET) transporters.[61] SERT is critical to the functioning of the 5-HT system, limiting 5-HT neurotransmission by removing synaptic neurotransmitter through transport across the presynaptic membrane.[62] Following the original sequencing of rat SERT,[63] subsequent studies have indicated that the functional complex may exist as an oligomer.[64,65]

Within the brain SERT is located throughout 5-HT neurons, and hence displays a distribution at the protein level that closely matches the regions receiving 5-HT neuron innervation. Indeed, the protein offers a phenotypic marker for 5-HT neurons.[66] Consistently, *in situ* hybridization studies demonstrate that SERT transcript expression is associated with the cell bodies of 5-HT neurons.[67] In the developing mouse brain however, expression of the transporter occurs transiently in glutamatergic thalamocortical afferents that lack the ability to synthesize 5-HT.[68,69] These neurons may therefore sequester 5-HT, enabling

Figure 5 | 5-HT$_6$ and $_7$ selective compounds

EMD 386088
(Cat. No. 2382)
5-HT$_6$ agonist

SB 399885
(Cat. No. 3189)
5-HT$_6$ antagonist

AS 19
(Cat. No. 1968)
5-HT$_7$ agonist

SB 269970
(Cat. No. 1612)
5-HT$_7$ antagonist

(**Bold** text denotes compounds available from Tocris at time of publication)

Table 3 | Summary of the structure, pharmacology and function of mammalian 5-HT$_{4-7}$ receptors

Human Gene	5q31–q33	7q36	2q11–13 (Non-functional)	1p35–36	10q21–q24
Structure	GPCR	GPCR	GPCR	GPCR	GPCR
Transduction System	↑cAMP	?↓cAMP ?Ca^{2+} mobilization ?K$^+$ current	Not Known	↑cAMP	↑cAMP
Agonists	BIMU 8 RS 67506 ML 10302	5-CT	5-CT	–	8-OH-DPAT
Antagonists	GR 113808 SB 204070 RS 100235	SB 699551-A	–	Ro 630563 SB 271046 SB 357134	SB 258719 SB 269970 SB 656104
Effect on Neurotransmission	↑Acetylcholine ↑Dopamine ↑5-HT	Not Known	Not Known	↓Acetylcholine ↓Dopamine ↓Glutamate	?↑↓5-HT
Therapeutic Target	Cognition Anxiety	Not Known	Not Known	Cognition Schizophrenia Depression Anxiety/Stress Epilepsy Obesity	Depression Schizophrenia Sleep Disorder Epilepsy Cognition

the afferents to mediate serotonergic transmission during brain development. More than one form of SERT protein appears to be present *in vivo*. Shigematsu and colleagues conducted immunohistochemical studies on the mouse brain with two selective antibodies, raised against different epitopes within the C- and N-terminus.[70] They observed that immunoreactivity with the N-terminal antibody was absent in the CA3 field of the hippocampus, whereas the C-terminal antibody indicated SERT expression. This implies that SERT may contain variable N-terminal domains, potentially though alternative splicing of exon 1. Further molecular diversity appears to be apparent in human immune cells, where SERT may function to deliver 5-HT to other immune cells across the immunological synapse.[71]

The efficacy of a range of antidepressant drugs, in particular the selective serotonin reuptake inhibitors (SSRIs), has encouraged elucidation of the physiological roles of SERT in the brain. It is indisputable that the transporter has an effect upon depression, though its precise function is still debated. Further evidence comes from the genetic variation that occurs upstream of the SERT coding sequence, the so-called 5-HTT gene-linked polymorphic region (5-HTTLPR). A series of repeated units incorporated within this sequence forms a promoter region regulating SERT expression.[72,73] One common polymorphism within this region is a 44 base pair deletion, denoted as a short form (S) for the gene, along with two variations of a long form (LG and LA). The short form allele reduces SERT expression and function relative to the long forms.[72,74] It has been reported however, that LG may result in SERT expression comparable with the short form variant[75] and the short allele may not be associated with reduced SERT levels in the adult brain,[76] complicating the research area. Individuals carrying at least one short form allele appear predisposed to

depressive episodes. In further support from *in vivo* imaging, SERT expression is reduced within the brainstem,[77] amygdala and midbrain[78] in patients presenting with depression.

A number of reports correlate SERT expression with the brains of suicide victims although this area remains controversial.[79] SERT knockout mice do however display behavioral abnormalities related to depression and anxiety.[80,81]

In contrast to SERT being a molecular therapeutic target, it is also a target for various drugs of abuse, including MDMA ('ecstasy') and cocaine. MDMA, for example, blocks 5-HT reuptake and enhances 5-HT release.[82,83] Whilst cocaine is predominantly considered to act upon DAT, SERT interaction appears to contribute to the rewarding actions of cocaine.[84]

Conclusion

From the initial discovery of serotonin in the mid-twentieth century, the 5-HT receptor research field continues to expand both scientifically and commercially. Over the last sixty years, considerable physiological and pharmacological processes involving 5-HT receptors and the 5-HT transporter have been identified. The consecutive discovery of the 6 classes of G-protein coupled 5-HT receptors (5-HT$_{1,2,4-7}$) and their subclasses along with the ligand-gated ion channel 5-HT$_3$ has provided an exciting research platform that holds promise for future drug discovery. Both 5-ht$_5$ and 5-ht$_{1e}$ receptors are relatively uncharacterized and the generation of selective ligands for these receptors may well aid our understanding of their functions *in vivo*. One of the most significant problems in this field has been the absence of sufficiently selective ligands to identify the relative contribution of multiple serotonin receptors to complex

behavioral and physiological phenomena mediated by serotonin. As new molecular and pharmacological tools become available, targeting specific 5-HT receptors should lead to the development of many compounds of therapeutic value that will reduce the potential for undesired side effects. The future holds the promise for a new generation of serotonergic drugs that may be useful as antidepressant, antipsychotic, procognitive, and antiemetic treatments. It can be anticipated that 5-HT receptor research will continue to progress and yield exciting results in the years to come.

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5-HT Receptor Compounds Available from Tocris

Catalog No.	Product Name	Primary Function
5-HT$_{1A}$ Receptors		
Agonists		
5584	Aripiprazole	5-HT$_{1A}$ partial agonist; also 5-HT$_{2A}$ antagonist and high affinity D$_2$ partial agonist
3346	ATC 0175	5-HT$_{1A}$ partial agonist; also 5-HT$_{2B}$ antagonist and MCH$_1$ antagonist
1006	BMY 7378	5-HT$_{1A}$ partial agonist
0556	BP 554	Selective 5-HT$_{1A}$ agonist
0962	Buspirone	5-HT$_{1A}$ partial agonist
0529	8-Hydroxy-DPAT	Selective 5-HT$_{1A}$ agonist; also has moderate affinity for 5-HT$_7$
1080	(R)-(+)-8-Hydroxy DPAT	Selective 5-HT$_{1A}$ agonist; enantiomer of 8-Hydroxy-DPAT (Cat. No. 0529)
1869	Ipsapirone	Selective 5-HT$_{1A}$ agonist
1746	Nemonapride	5-HT$_{1A}$ agonist; also highly potent D$_2$-like dopamine antagonist
0912	RU 24969	5-HT$_{1A}$ and 5-HT$_{1B}$ agonist
2854	Tandospirone	Selective 5-HT$_{1A}$ partial agonist
6202	Vilazodone	Potent 5-HT$_{1A}$ partial agonist and SSRI; antidepressant
2491	Xaliproden	High affinity 5-HT$_{1A}$ agonist; orally active
Antagonists		
2806	Alprenolol	5-HT$_{1A}$ antagonist; also β-adrenoceptor antagonist
0993	Cyanopindolol	5-HT$_{1A}$ and 5-HT$_{1B}$ antagonist; also β-adrenergic antagonist
3282	NAD 299	Selective, high affinity 5-HT$_{1A}$ antagonist
0553	NAN-190	5-HT$_{1A}$ antagonist
1060	(S)-(−)-Pindolol	5-HT$_{1A}$ and 5-HT$_{1B}$ antagonist; also β-adrenergic antagonist; active enantiomer of pindolol (Cat. No. 0994)
1516	SDZ 21009	5-HT$_{1A}$ and 5-HT$_{1B}$ antagonist; also β-adrenoceptor antagonist
0631	Spiroxatrine	5-HT$_{1A}$ antagonist; also potent α_{2c}-adrenoceptor antagonist
1253	(S)-WAY 100135	Potent and selective 5-HT$_{1A}$ antagonist
4380	WAY 100635	Potent 5-HT$_{1A}$ antagonist; also D$_4$ agonist
Ligands		
0412	MDL 72832	Potent 5-HT$_{1A}$ ligand
5-HT$_{1B}$ Receptors		
Agonists		
0703	Anpirtoline	Highly potent 5-HT$_{1B}$ agonist; also 5-HT$_3$ antagonist
1032	CP 93129	5-HT$_{1B}$ agonist
1317	CP 94253	Potent and selective 5-HT$_{1B}$ agonist
3862	Eletriptan	5-HT$_{1B}$ and 5-HT$_{1D}$ agonist; orally active
5136	Rizatriptan	Potent 5-HT$_{1B}$ and 5-HT$_{1D}$ agonist
0912	RU 24969	5-HT$_{1A}$ and 5-HT$_{1B}$ agonist
Antagonists		
0993	Cyanopindolol	5-HT$_{1A}$ and 5-HT$_{1B}$ antagonist; also β-adrenergic antagonist
1477	GR 127935	Potent and selective 5-HT$_{1B}$ and 5-HT$_{1D}$ antagonist
1054	GR 55562	5-HT$_{1B}$ antagonist
0992	Isamoltane	5-HT$_{1B}$ antagonist
3350	LY 393558	Dual 5-HT$_{1B}$ and 5-HT$_{1D}$ antagonist; also 5-HT re-uptake inhibitor
1413	NAS-181	Selective r5-HT$_{1B}$ antagonist; active *in vivo*
1060	(S)-(−)-Pindolol	5-HT$_{1A}$ and 5-HT$_{1B}$ antagonist; also β-adrenergic antagonist; more active enantiomer of pindolol (Cat. No. 0994)
1242	SB 216641	Selective h5-HT$_{1B}$ antagonist
1221	SB 224289	Selective 5-HT$_{1B}$ antagonist
5-HT$_{1D}$ Receptors		
Agonists		
3862	Eletriptan	5-HT$_{1B}$ and 5-HT$_{1D}$ agonist; orally active
0864	GR 46611	5-HT$_{1D}$ agonist

Catalog No.	Product Name	Primary Function
0781	L-694,247	5-HT$_{1D}$ agonist
2640	L-703,664	Selective 5-HT$_{1D}$ agonist
1985	PNU 142633	Highly selective 5-HT$_{1D}$ agonist
Antagonists		
1207	BRL 15572	Selective h5-HT$_{1D}$ antagonist
1477	GR 127935	Potent and selective 5-HT$_{1B}$ and 5-HT$_{1D}$ antagonist
0908	Ketanserin	5-HT$_{1D}$ antagonist; also 5-HT$_{2A}$ antagonist
3078	LY 310762	Selective 5-HT$_{1D}$ antagonist
3350	LY 393558	Dual 5-HT$_{1B}$ and 5-HT$_{1D}$ antagonist; also 5-HT re-uptake inhibitor
5-ht$_{1E}$ Receptors		
Agonists		
1129	BRL 54443	Potent 5-ht$_{1E}$ and 5-HT$_{1F}$ agonist
5-HT$_{1F}$ Receptors		
Agonists		
1129	BRL 54443	Potent 5-ht$_{1E}$ and 5-HT$_{1F}$ agonist
3079	LY 334370	Selective 5-HT$_{1F}$ agonist
2451	LY 344864	Potent and selective 5-HT$_{1F}$ agonist
Non-selective 5-HT$_1$		
Agonists		
0458	5-Carboxamidotryptamine	5-HT$_1$ agonist; also has high affinity for 5-ht$_{5a}$ and 5-HT$_7$
3586	Sumatriptan	5-HT$_{1A}$, 5-HT$_{1B}$ and 5-HT$_{1D}$ agonist
4657	Zolmitriptan	Potent 5-HT$_{1B/1D/1F}$ agonist
Antagonists		
1064	Methysergide	5-HT$_1$ and 5-HT$_2$ antagonist
5-HT$_{2A}$ Receptors		
Agonists		
2643	DOI	5-HT$_{2A}$ and 5-HT$_{2C}$ agonist
5171	NBOH-2C-CN	High affinity and selective 5-HT$_{2A}$ agonist
2592	TCB-2	Potent and high affinity 5-HT$_{2A}$ agonist
Antagonists		
1809	Altanserin	5-HT$_{2A}$ antagonist
5584	Aripiprazole	5-HT$_{2A}$ antagonist; also D$_2$ and 5-HT$_{1A}$ receptor partial agonist
0444	Clozapine	5-HT$_{2A}$ and 5-HT$_{2C}$ antagonist; also dopamine antagonist
4470	EMD 281014	Selective 5-HT$_{2A}$ antagonist
4958	Eplivanserin	Potent and selective 5-HT$_{2A}$ antagonist
0523	4F 4PP	Selective 5-HT$_{2A}$ antagonist
0908	Ketanserin	Selective 5-HT$_{2A}$ antagonist; also antagonist at 5-HT$_{1D}$
4173	MDL 100907	Potent and selective 5-HT$_{2A}$ antagonist
0870	MDL 11,939	5-HT$_{2A}$ antagonist
1644	Mesulergine	5-HT$_{2A}$ and 5-HT$_{2C}$ antagonist; also dopamine receptor partial agonist
2777	Nefazodone	5-HT$_{2A}$ antagonist and 5-HT uptake inhibitor; antidepressant
4349	Olanzapine	5-HT$_{2A}$/D$_2$ antagonist; atypical antipsychotic
2735	PNU 06415E	5-HT$_{2A}$ and D$_4$ antagonist; antipsychotic
4735	Quetiapine	5-HT$_{2A}$/D$_2$ antagonist; atypical antipsychotic
1742	R-96544	Potent and selective 5-HT$_{2A}$ antagonist
2865	Risperidone	5-HT$_{2A}$ antagonist; also D$_2$ antagonist
3739	Sarpogrelate	Selective 5-HT$_{2A}$ antagonist
0995	Spiperone	5-HT$_{2A}$ antagonist; also D$_2$-like antagonist
6336	Trazodone	5-HT$_{2A}$ and α$_1$ adrenoceptor antagonist; also enhances neural differentiation; antidepressant and neuroprotectant

Catalog No.	Product Name	Primary Function
5-HT$_{2B}$ Receptors		
Agonists		
1059	BW 723C86	5-HT$_{2B}$ agonist
0875	m-CPP	5-HT$_{2B}$ and 5-HT$_{2C}$ agonist
0557	α-Methyl-5-hydroxytryptamine	5-HT$_{2B}$ agonist
Antagonists		
3346	ATC 0175	5-HT$_{2B}$ antagonist; also 5-HT$_{1A}$ partial agonist and MCH$_1$ antagonist
4081	LY 266097	Selective 5-HT$_{2B}$ antagonist
3077	LY 272015	High affinity 5-HT$_{2B}$ antagonist, orally active
2993	RS 127445	High affinity and selective 5-HT$_{2B}$ antagonist
1372	SB 204741	Potent and selective 5-HT$_{2B}$ antagonist
1661	SB 206553	Potent and selective 5-HT$_{2B}$ and 5-HT$_{2C}$ antagonist; orally active
1374	SB 215505	5-HT$_{2B}$ and 5-HT$_{2C}$ antagonist
5-HT$_{2C}$ Receptors		
Agonists		
3041	CP 809101	Potent and selective 5-HT$_{2C}$ agonist
0875	m-CPP	5-HT$_{2B}$ and 5-HT$_{2C}$ agonist
2643	DOI	5-HT$_{2A}$ and 5-HT$_{2C}$ agonist
0941	MK 212	5-HT$_{2C}$ agonist
3585	Org 12962	Selective 5-HT$_{2C}$ agonist
1854	Ro 60-0175	Potent and selective 5-HT$_{2C}$ agonist
0925	SCH 23390	5-HT$_{2C}$ agonist; also potent dopamine D$_1$-like antagonist and K$_{ir}$3 channel blocker
1801	WAY 161503	Potent and selective 5-HT$_{2C}$ agonist
Inverse Agonists		
4508	S 32212	5-HT$_{2C}$ inverse agonist; α$_2$-adrenoceptor antagonist
Antagonists		
0444	Clozapine	5-HT$_{2A}$ and 5-HT$_{2C}$ antagonist; also dopamine antagonist
1007	N-Desmethylclozapine	5-HT$_{2C}$ antagonist
1644	Mesulergine	5-HT$_{2A}$ and 5-HT$_{2C}$ antagonist; also dopamine receptor partial agonist
1050	RS 102221	Selective 5-HT$_{2C}$ antagonist
1661	SB 206553	Potent and selective 5-HT$_{2B}$ and 5-HT$_{2C}$ antagonist; orally active
2901	SB 242084	Selective 5-HT$_{2C}$ antagonist; brain penetrant
1255	SDZ SER 082	Selective 5-HT$_{2B/2C}$ antagonist
Non-selective 5-HT$_2$		
Agonists		
4797	Org 37684	5-HT$_2$ agonist
2201	PNU 22394	5-HT$_{2C}$ agonist and 5-HT$_{2A/2B}$ partial agonist
Antagonists		
0460	Cinanserin	Selective 5-HT$_2$ antagonist
0996	Cyproheptadine	5-HT$_2$ antagonist
1523	LY 215840	5-HT$_2$/5-HT$_7$ antagonist
1064	Methysergide	5-HT$_1$/5-HT$_2$ antagonist
0997	Mianserin	5-HT$_2$ antagonist; also has moderate affinity for 5-HT$_6$
2018	Mirtazapine	Potent 5-HT$_2$ antagonist; also 5-HT$_3$, H$_1$ and α$_2$ antagonist; antidepressant
1955	Ritanserin	Potent 5-HT$_2$ antagonist
1375	SB 228357	5-HT$_{2C/2B}$ antagonist/inverse agonist
Other		
0878	Oleamide	Potentiator at 5-HT$_{2A}$ and 5-HT$_{2C}$ receptors; also CB$_1$ agonist

Catalog No.	Product Name	Primary Function
5-HT$_3$ Receptors		
Agonists		
0440	m-Chlorophenylbiguanide	Potent and selective 5-HT$_3$ agonist
0558	2-Methyl-5-hydroxytryptamine	5-HT$_3$ agonist; also potent 5-HT$_6$ ligand
0629	Quipazine	5-HT$_3$ agonist
0988	RS 56812	5-HT$_3$ partial agonist
1205	SR 57227	Potent and selective 5-HT$_3$ agonist
Antagonists		
5629	Dolasetron	Potent and selective 5-HT$_3$ antagonist
2903	Granisetron	5-HT$_3$ antagonist
0640	MDL 72222	5-HT$_3$ antagonist
2018	Mirtazepine	Potent 5-HT$_2$ antagonist; also 5-HT$_3$, H$_1$ and α_2-antagonist; antidepressant
2844	Mosapride	5-HT$_3$ antagonist and 5-HT$_4$ agonist
2891	Ondansetron	Selective 5-HT$_3$ antagonist
2037	SDZ 205-557	5-HT$_3$ and 5-HT$_4$ antagonist
2459	Tropisetron	Potent 5-HT$_3$ antagonist; also α7 nAChR partial agonist
4532	VU 10166	High affinity 5-HT$_3$ antagonist
0380	Y-25130	Potent and selective 5-HT$_3$ antagonist
1795	Zacopride	Highly potent 5-HT$_3$ antagonist; also 5-HT$_4$ agonist
Modulators		
4700	PU 02	Negative allosteric modulator of 5-HT$_3$ receptors
5-HT$_4$ Receptors		
Agonists		
4374	BIMU 8	Potent 5-HT$_4$ agonist
1695	Cisapride	5-HT$_4$ agonist; stimulates intestinal ACh release
2844	Mosapride	5-HT$_4$ agonist and 5-HT$_3$ antagonist
0989	RS 67333	5-HT$_4$ partial agonist
4613	Tegaserod	5-HT$_4$ partial agonist
1795	Zacopride	5-HT$_4$ agonist; also highly potent 5-HT$_3$ antagonist
Antagonists		
1322	GR 113808	Potent and selective 5-HT$_4$ antagonist
1658	GR 125487	Potent and selective 5-HT$_4$ antagonist; active *in vivo*
0991	RS 39604	5-HT$_4$ antagonist
1373	SB 204070	Potent and selective 5-HT$_4$ antagonist
2037	SDZ 205-557	5-HT$_3$ and 5-HT$_4$ antagonist
5-ht$_5$ Receptors		
Antagonists		
3188	SB 699551	Selective 5-ht$_{5A}$ antagonist
5-HT$_6$ Receptors		
Agonists		
2382	EMD 386088	Potent 5-HT$_6$ agonist
4209	EMDT	Selective 5-HT$_6$ agonist
4337	ST 1936	Selective, high affinity 5-HT$_6$ agonist
5589	WAY 181187	High affinity and selective 5-HT$_6$ agonist
3904	WAY 208466	Selective 5-HT$_6$ agonist
Antagonists		
3326	BGC 20-761	High affinity 5-HT$_6$ antagonist
4208	MS 245	High affinity 5-HT$_6$ antagonist
4964	R 1485	Selective and high affinity 5-HT$_6$ antagonist
2911	Ro 04-6790	Potent and selective 5-HT$_6$ antagonist
1961	SB 258585	Potent and selective 5-HT$_6$ antagonist

Catalog No.	Product Name	Primary Function
3368	SB 271046	Selective 5-HT$_6$ antagonist; orally active
3189	SB 399885	Potent and selective 5-HT$_6$ antagonist
5-HT$_7$ Receptors		
Agonists		
1968	AS-19	Potent 5-HT$_7$ agonist
Antagonists		
0937	Pimozide	High affinity 5-HT$_7$ antagonist; also D$_2$ antagonist
2726	SB 258719	Selective 5-HT$_7$ antagonist
1612	SB 269970	Potent and selective 5-HT$_7$ antagonist; brain penetrant
General 5-HT		
Agonists		
3991	NPEC-caged-serotonin	Caged serotonin
3856	RuBi-5-HT	RuBi-caged serotonin
3547	Serotonin	Endogenous 5-HT agonist
Antagonists		
3737	Asenapine	Non-selective 5-HT, dopamine, adrenalin and histamine receptor antagonist; antipsychotic agent
0582	Methiothepin	5-HT$_1$ and 5-HT$_2$ antagonist; also has moderate affinity for 5-ht$_5$ and high affinity for 5-HT$_6$ and 5-HT$_7$
Inhibitors		
0938	*p*-Chlorophenylalamine	Tryptophan hydroxylase inhibitor
Others		
2813	D-Amphetamine	Induces dopamine, 5-HT and noradrenalin release; also α7 nAChR antagonist
0610	Parthenolide	5-HT release inhibitor
Monoamine Oxidase		
Inhibitors		
0767	Bifemelane	Non-selective MAO inhibitor
1095	(*R*)-(-)-Deprenyl	MAO-B inhibitor
6067	M 30	Potent and non-selective MAO inhibitor; also an iron chelator and antioxidant
4395	Moclobemide	Reversible MAO-A inhibitor
0724	Pirlindole	MAO-A inhibitor
4308	Rasagiline	Selective and irreversible MAO-B inhibitor
5-HT Transporters		
Inhibitors		
2341	A 80426	5-HT uptake inhibitor and α$_2$ antagonist
1427	Citalopram	Highly potent and selective 5-HT uptake inhibitor
0457	Clomipramine	5-HT re-uptake inhibitor
2833	Cocaine	Inhibitor of monoamine transporters
2695	Dexfenfluramine	5-HT re-uptake inhibitor; also stimulates 5-HT release
0927	Fluoxetine	5-HT re-uptake inhibitor
1033	Fluvoxamine	5-HT re-uptake inhibitor; also high affinity σ1 ligand
1588	Indatraline	Potent 5-HT uptake inhibitor; also inhibits dopamine and noradrenalin uptake
2777	Nefazodone	5-HT uptake inhibitor; also 5-HT$_{2A}$ antagonist; antidepressant
2141	Paroxetine	Highly potent and selective 5-HT uptake inhibitor
2395	Sertraline	5-HT re-uptake inhibitor
2917	Venlafaxine	5-HT and NA reuptake inhibitor (SNRI)
1767	Zimelidene	Selective 5-HT uptake inhibitor
Vesicular Monoamine Transporters		
Inhibitors		
2742	Reserpine	Inhibitor of vesicular monoamine transport
2175	Tetrabenazine	Potent inhibitor of vesicular monoamine transport; depletes dopamine stores

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