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Masoumeh Ghaemi-Jandabi ¹, Hakime Abdollahi ¹, Hossein Azizi ¹, Majid Sadeghizadeh ^{2*} and Saeed Semnanian ^{1*}

¹Department of Physiology, Faculty of Medical Sciences, Tarbiat Modares University, Tehran, Iran

²Department of Genetics, School of Biological Sciences, Tarbiat Modares University, Tehran, Iran

Keywords:Dendrosomal curcumin; Morphine withdrawal; Rat

Introduction

Chronic use of opioid drugs leads to the development of dependence and tolerance which in turn limits their therapeutic application and brings about serious social and health issues [1]. In many models of drug dependence, positive and negative reinforcement are two major components. Positive reinforcement of euphoric effects results in a compulsive and relentless desire for drug taking while negative reinforcement of withdrawal signs occurs following cessation of opioid receiving [2]. Opiate withdrawal syndrome is a multifaceted phenomenon involving various regions of the brain and is characterized by physiological and behavioral symptoms [3–7]. Curcumin is a hydrophobic compound derived from the rhizome of Curcuma longa, which is commonly used as a spice in most Asian countries [8]. Curcumin has been reported to have anti-inflammatory, antioxidant, antitumor, antinociceptive and neuroprotective activities [9,10]. Findings have been shown that daily administration of curcumin could prevent morphine analgesic tolerance [11]. However, low water solubility, poor uptake and tissue distribution remain major impediments, limiting the application of curcumin as treatment agent [12]. Recently, scientists have exposed several strategies, such as loading synthetic analogs from turmeric, designing metabolic inhibitors and liposomal formulations, and nanoparticles of curcumin, to overcome these problems [13-15]. Dendrosome was presented as a novel neutral, amphipathic, and biodegradable nanocarrier for a gene delivery system [16,17]. The high potential of dendrosome as a gene porter has led to the hypothesis that it can be applied as a vehicle for curcumin delivery. In this study, we aimed to investigate the effect of intraperitoneal (i.p.) administration of Dendrosomal curcumin (DNC) on the behavioral signs of morphine withdrawal syndrome.

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