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## Control of complex behavior by astrocytes and microglia

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## A B S T R A C T

Evidence that glial cells influence behavior has been gaining a steady foothold in scientific literature. Out of the five main subtypes of glial cells in the brain, astrocytes and microglia have received an outsized share of attention with regard to shaping a wide spectrum of behavioral phenomena and there is growing appreciation that the signals intrinsic to these cells as well as their interactions with surrounding neurons reflect behavioral history in a brain region-specific manner. Considerable regional diversity of glial cell phenotypes is beginning to be recognized and may contribute to behavioral outcomes arising from circuit-specific computations within and across discrete brain nuclei. Here, we summarize current knowledge on the impact of astrocyte and microglia activity on behavioral outcomes, with a specific focus on brain areas relevant to higher cognitive control, reward-seeking, and circadian regulation.

## 1. Glial cells: a brief context on cell diversity and behavioral relevance

The term ‘glia’ refers to a heterogeneous population of cell types. These include: oligodendrocytes, that form axon-insulating myelin sheaths, oligodendrocyte progenitors (also called NG2-cells or polydendrocytes), ventricle-lining ependymal glia, astrocytes, and microglial cells (Kandel, 2013). Glia is a contraction of the word ‘neuroglia’ (Nervenkitz) or ‘nerve-glue’, first coined by Rudolf Virchow in 1856, who referred to these cells collectively as the substance “which lies between the proper nervous parts...and gives the whole its form in a greater or less degree” (Virchow, 1856; Pappas and Verkhratsky, 2012). A few years after this statement, the close relationship between glial cells and blood vessels was acknowledged by anatomists, but it was not until 1891 that the term ‘astrocyte’ emerged as a distinct cell type mediating this relationship. It took another 30 years before ‘oligodendrocytes’ and ‘microglia’ were recognized as additional glial cell subtypes (Verkhratsky et al., 2011). Within the broad scientific opinion, the brain glial cells have remained relegated to inert, neuron-supporting roles until about the 1990’s when research into active contributions of glial cells to neuronal activity started to gain ground.

According to recent historical perspectives, oligodendrocytes constitute 45–75% of all glial cells in the human brain, followed by astrocytes (19–40%) and microglial cells (5–10%) (von Bartheld et al., 2016; Pelvig et al., 2008). The frequently cited neuron-to-glia ratios of 1:10 appears to be a mistaken notion that is curiously perpetuated by

many textbooks. In the 1960–1980’s, estimates of the number of neurons and glial cells in the human brain indicated that there are 70–85 billion neurons and 40–130 billion glial cells (Blinkov and Glezer, 1968; Haug, 1986), suggesting something close to a 1:1 ratio between neurons and glial cell numbers (von Bartheld et al., 2016). Some studies in the vestibular nuclei of the brainstem did find there were ten times more glial cells than neurons, but these estimates were not backed up by experimental evidence of brain-wide counts (von Bartheld et al., 2016; Brachet and Mirsky, 1959; Hyden and Pigon, 1960; Hyden, 1967; von Bartheld, 2018). Modern techniques, such as isotropic fractionation, flow fractionation and stereological optical fractionation, confirm the estimate of ~1:0.7 ratio between neurons and glial cells that is surprisingly close to the one obtained a long time ago using histological/stereological approaches (Haug, 1986; Azevedo et al., 2009; Herculano-Houzel and Lent, 2005; Miller et al., 2014). Overall, the emerging picture is that the glial cell density is relatively uniform across species and brain regions, and that the glia-to-neuron ratio is simply higher whenever the size of neurons and their processes, which do vary substantially, is higher and neuronal density is correspondingly lower (Hawkins and Olszewski, 1957; Herculano-Houzel, 2014; Keller et al., 2018).

In the evolutionary context, number of cells and, perhaps more importantly, number of cell types, have been proposed to vary linearly with organismal complexity. Indeed, astrocytes in the human brain are substantially more varied than rodent astrocytes (Oberheim et al., 2006; Oberheim et al., 2009) and some have used this evidence to bolster the

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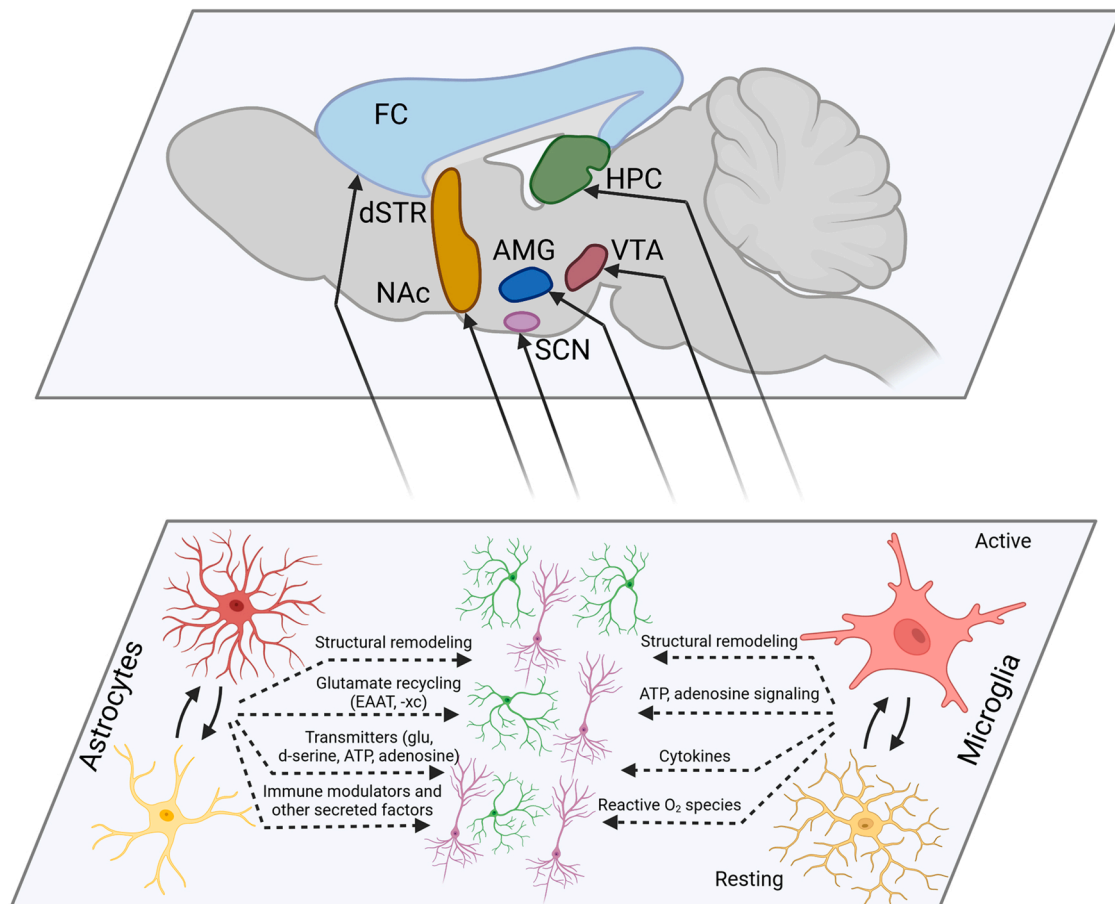
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argument for glial cell role in cognitive processes (Verkhatsky et al., 2011). The anatomical and functional heterogeneity of glia is now beyond doubt and mounting evidence suggests substantial transcriptome diversity (Chai et al., 2017; Morel et al., 2017; Boisvert et al., 2018). The multiple mechanisms by which glial cells may interact with neurons remain a subject of investigation, and it is not currently known whether unique mechanisms map onto specific computations performed by neuronal circuits mediating discrete behaviors. The impact of oligodendrocytes, oligodendrocyte progenitors, and ependymal glia on complex behavior has so far attracted a relatively small share of investigative attention. In the meantime, the role of astrocytes in behavior has been actively pursued and backed by substantial mechanistic insight (Lalo et al., 2021; Semyanov and Verkhatsky, 2021). Microglia contributions to behavior have also been widely recognized as part of a complex interface between neuronal activity and immune system status (Ferro et al., 2021). Given such skewed accumulation of evidence in support of behavioral impact, this review focuses on astrocytes and microglia only. Specifically, here we examine contributions of astrocytes and microglia signals to behaviors thought to arise from activity within three relatively well-established circuits: frontocortical circuits underlying executive function, mesocorticolimbic circuits mediating reward-seeking behaviors, and suprachiasmatic nucleus (SCN) circuits driving circadian homeostasis (Fig. 1).

## 2. Regulation of activity in frontocortical circuits underlying executive function

Many studies support glial cell contributions to neuropathology of cognitive decline, brain trauma, and neurodegeneration as well as regulation of cognitive function in the healthy brain. In this section, we review the literature that examines astrocytes and microglia in the context of their impact on executive control of behavior by the frontocortical circuits, including cortico-striatal, cortico-hippocampal, and cortico-amygdalar connections (Table 1). We begin with astrocytes and highlight converging evidence that regulation of frontocortical function by these cells involves glutamate recycling, release of transmitter molecules, secretion of inflammatory mediators and other signaling factors in addition to cytoskeletal adaptations that likely impose spatial constraints on neuroglial interactions. We recognize that these aspects of astrocyte activity do not represent an exhaustive list of mechanisms by which astrocytes modulate neuronal transmission and that other functions attributed to astrocytes (e.g., water balance,  $K^+$  buffering, glucose metabolism, etc.) are likely to impact frontocortical-dependent behaviors. Astrocytes represent a regionally heterogeneous population of cells (Chai et al., 2017; Morel et al., 2017; Boisvert et al., 2018; Xin et al., 2019) and it is not yet clear whether any combination of factors (e.g., gene expression, cell morphology, excitability profiles, etc.) can be used to define conserved astrocyte categories regardless of their regional



**Fig. 1.** An outline of the discussed mechanisms underlying glial interactions with neuronal circuitry. *Bottom panel*, astrocytes (left) and microglia (right) display cytoskeletal changes in response to their microenvironment. These changes are linked to molecular signals underlying structural remodeling and a variety of associated functional changes. Note that binary representation of astrocyte and microglia morphologies is overly simplistic and intermediate phenotypes may be possible as discussed in the text for resting and active microglia. Structural and functional adaptations (dashed arrows) influence glial interactions with neuronal networks and impact diverse neuron types (schematized in the middle). Central origin of the dashed arrows indicates that transition between morphologies is not a pre-requisite for functional changes. *Top panel*, discrete brain regions at the focus of this review, express distinct behaviorally relevant response patterns arising from unique combinations of underlying adaptations. FC, frontal cortex; HPC, hippocampus; dSTR, dorsal striatum (including dorsomedial and dorsolateral striatum), NAc, nucleus accumbens (ventral striatum); AMG, amygdala; VTA, ventral tegmental area; SCN, suprachiasmatic nucleus.

**Table 1**

The table focuses on those studies where cell-specific manipulations occurred prior to the observed behavioral effects. Studies in which cellular changes were measured after a behavioral manipulation are excluded with a few exceptions. For constitutive gene knock-out models, brain area specificity column indicates brain areas in which cellular changes were measured. Bi-directional effect column lists evidence, if any, that measured behaviors could be either suppressed or enhanced with opposite cellular manipulations.

	Experimental manipulation <sup>REF#</sup>	Brain area specificity	Behavioral impact	Cellular mechanism	Bi-directional effect
<b>Astrocytes</b>					
<b>Cognitive flexibility</b>	L-AAA injection (astrocyte toxicity) (Brockett et al., 2018; Lima et al., 2014)	mPFC	(Brockett et al., 2018) ↓ cognitive flexibility (set-shifting) Lima et al. (2014) ↓ texture discrimination ↓ reversal learning and working memory	(Brockett et al., 2018) ↓ gamma oscillations Lima et al. (2014) Not investigated	Not investigated
	hM3 DREADD activation (Brockett et al., 2018)	mPFC	↑ cognitive flexibility (set shifting)	↑ Gq signaling in astrocytes	Not investigated
	S100b infusion (Brockett et al., 2018)	mPFC	↑ cognitive flexibility (set shifting)	Not investigated	Not investigated
	GFAP & vimentin knockout mice (Wilhelmsson et al., 2019)	Whole brain	↑ memory extinction	Not investigated	Not investigated
	Nestin knockout mice (Wilhelmsson et al., 2020)	Whole brain	↑ memory extinction	Not investigated	Not investigated
	EAAT1 knockout mice (Karlsson et al., 2009)	Whole brain	↓ visual discrimination learning	↓ astrocyte glutamate reuptake	Not investigated
	Blockade of EAAT2 by dihydrokainate (John et al., 2012)	mPFC	↑ drinking latency & ↓ responding to PFC electrical self-stimulation	↓ astrocyte glutamate reuptake	Not investigated
	IP injections of sub-chronic ketamine (Featherstone et al., 2012)	Hippocampus	↓ extinction of sucrose self-administration	↓ EAAT2 expression	Not investigated
	dnSNARE knockout mice (Sardinha et al., 2017)	PFC, hippocampus	↓ working and spatial memory	↓ theta-cycle synchronization between hippocampus and PFC	Theta coherence and cognitive deficits rescued by D-serine supplementation Not investigated
	Deletion of astrocyte GABA <sub>B</sub> receptors in mice (Mederos et al., 2021)	PFC	Aberrant cortical synchronization and ↓ T-maze alternation performance	astrocytic GABA <sub>B</sub> signaling activates mGluRs and recruits PV interneurons	Reversal learning deficit rescued by up-regulation of hepatocyte growth factor in astrocytes Not investigated
	Urokinase plasminogen activator receptor knockout mice (Bissonette et al., 2010)	orbitofrontal cortex, dorsal striatum	↓ reversal learning	↓ PV interneurons in orbitofrontal cortex and dorsal striatum	Not investigated
	Human Chrd11 mutations (Webb et al., 2012)	Retina, PFC	↑ executive function	Corneal abnormalities and myelination deficits	Not investigated
	Overexpression of MHC1 in mouse mPFC astrocytes (Caudal et al., 2020)	mPFC	↓ reward-based visual discrimination	↓ dendritic spine density in dorsal striatum	Not investigated
	Chronic expression of IL-6 in transgenic mice (Heyser et al., 1997)	PFC, amygdala	↓ avoidance learning	Loss of synapses and calbindin-containing neurons due to chronic neuroinflammation	Not investigated
<b>Reward seeking</b>	Stimulation of hM3D receptors on astrocytes (Erickson et al., 2021)	PFC	↑ ethanol drinking	Activation of G <sub>q</sub> -coupled signaling on astrocytes	Not investigated
	Stimulation of hM3D receptors on astrocytes (Scofield et al., 2015; Bull et al., 2014)	NAc	↓ cocaine reinstatement and motivation to self-administer ethanol (Scofield et al., 2015; Bull et al., 2014)	Stimulation of presynaptic mGluRs before hM3D stimulation (Scofield et al., 2015)	Not investigated
	Optogenetic stimulation of VTA astrocytes (Gomez et al., 2019)	VTA	↑ avoidance behavior, overriding CPP for cocaine	Astrocytes stimulate VTA GABA interneurons, inhibiting dopamine neurons	Glutamate transporter (GLT-1) from VTA astrocytes blocks avoidance behavior and maintains CPP for cocaine Pharmacological stimulation of A1 receptors elicited similar effects
	Optogenetic activation of hippocampal astrocytes (Li et al., 2020)	Hippocampus	↓ consolidation of contextual fear memory	Release of ATP and adenosine	The effect was not observed in adenosine transporter (ENT1) knockout mice Inhibition of EAAT2/GLT-1 upregulation promoted goal-directed behavior
	hM3D activation of astrocytes (Kang et al., 2020)	Dorsal medial striatum	Shifted behavior from habitual to goal-oriented	hM3D activation reduced sEPSC frequency in D1 MSNs, but increased sEPSC amplitude in D2 MSNs	Not investigated
	Training-induced upregulation of EAAT2/GLT-1 (Boender et al., 2021)	Dorsal lateral striatum	↑ habit behavior in operant task for chocolate reward	Astrocytes reinforce relative contributions of the DMS and DLS guided behaviors	Not investigated
	Overexpression of the plasma membrane Ca <sup>2+</sup>	Dorsal lateral striatum	↑ excessive and compulsive-like self-grooming behavior	Removal of astrocyte Ca <sup>2+</sup> signaling	Not investigated

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Table 1 (continued)

	Experimental manipulation <sup>REF#</sup>	Brain area specificity	Behavioral impact	Cellular mechanism	Bi-directional effect
Circadian rhythms and sleep/wake cycle	pump in astrocytes (Yu et al., 2018)				
	Ca <sup>2+</sup> imaging of astrocytes in naïve animals (Tsunematsu et al., 2021; Bojarskaite et al., 2020; Ingiosi et al., 2020)	Frontal cortex (Tsunematsu et al., 2021; Ingiosi et al., 2020), hippocampus, hypothalamus, pons, cerebellum (Tsunematsu et al., 2021), barrel cortex (Bojarskaite et al., 2020)	Ca <sup>2+</sup> levels increase during wakefulness and decrease during REM sleep in several brain areas [(Tsunematsu et al., 2021; Bojarskaite et al., 2020; Ingiosi et al., 2020)]	Not investigated	Not investigated
	Genetic reprogramming of SCN astrocyte clock genes (Brancaccio et al., 2017)	SCN	Altered circadian patterns of locomotion	Astrocyte-derived glutamate and neuronal NMDA receptors in the SCN	Not investigated
	Genetic reprogramming of SCN neurons to have incompetent clock gene expression (Brancaccio et al., 2019)	SCN	Astrocytes reinstate circadian locomotor behavior.	Astrocytes reinstate neuronal clock gene expression via glutamatergic signaling in the SCN	Not investigated
	<b>Experimental manipulation<sup>REF#</sup></b>	<b>Brain area specificity</b>	<b>Behavioral impact</b>	<b>Cellular mechanism</b>	<b>Bi-directional effect</b>
Microglia Cognitive flexibility	Chronic unpredictable stressors in mice (Horchar and Wohleb, 2019; Wohleb et al., 2018)]	mPFC	↓ PFC-dependent temporal object recognition (Horchar and Wohleb, 2019)	↑ CSF1 receptor and complement component mRNA (Horchar and Wohleb, 2019; Wohleb et al., 2018)	Both mRNA and behavior rescued by treatment with RU486 (glucocorticoid antagonist). Horchar and Wohleb (2019)
	7-day restraint stress (Liu et al., 2021)	dmPFC	↓ reversal learning in 4-choice odor discrimination	↑ dmPFC dendritic spine elimination	Not investigated
	Blockade of adenosine <sub>2A</sub> receptor in prenatal dexamethasone model for anxiety (Duarte et al., 2019; Zhang et al., 2019)	Hippocampus, PFC	↑ cognitive performance in recognition memory task (Zhang et al., 2019)	Normalized frontocortical (Duarte et al., 2019) and hippocampal (Zhang et al., 2019) microglia morphology	Not investigated
	Adolescent social stress model in mice (Zhang et al., 2019)	PFC	↓ cognitive flexibility performance	Activated microglia release TNF $\alpha$	Cognitive flexibility deficits were rescued by increased TNF $\alpha$ release by ranylcypromine
Reward seeking	Radioligand TSPO distribution PET scan (Li et al., 2018; Rubin et al., 2018; Giridharan et al., 2020; Politis et al., 2011)	PFC	↓ attention (Li et al., 2018) ↓ memory and executive function (Rubin et al., 2018), cognitive decline (Giridharan et al., 2020; Politis et al., 2011)	microglia activation (Li et al., 2018; Rubin et al., 2018; Giridharan et al., 2020; Politis et al., 2011)	Not investigated
	Inhibiting microglia with minocycline in alcohol-dependent mice (Agrawal et al., 2011; Gajbhiye et al., 2018)	Not investigated (IP injection)	↓ withdrawal-induced anxiety (Agrawal et al., 2011; Gajbhiye et al., 2018)	Not investigated	Not investigated
	Depletion of microglia with PLX-5622 (Warden et al., 2021)	Whole brain	Does not change escalation of voluntary alcohol consumption	Not investigated	PLX-5622 does block escalation under conditions of repeated immune activation
	Depletion of microglia with PLX-5622 (Warden et al., 2020)	Whole brain	↓ anxiety during alcohol withdrawal ↓ escalation of alcohol intake	Normalized excitatory and inhibitory synaptic plasticity in central nucleus of the amygdala	Not investigated
	Depletion of microglia with PLX-5622 (Adeluyi et al., 2019)	Whole brain	Normalized performance on marble burying and open field tests after nicotine withdrawal	Elevation of NOX2 release from microglia	Not investigated
	Blockade of TLR4 signaling with LPS-RS or TLR4 knockout mice (Northcutt et al., 2015)	Whole brain	↓ CPP and self-administration of cocaine	Inhibiting TLR4, ↓ extracellular dopamine from cocaine in the NAC by preventing downstream release of IL-1 $\beta$	Not investigated
	Minocycline treatment (Fujita et al., 2012; Attarzadeh-Yazdi et al., 2014)	Whole brain	↓ both maintenance and reinstatement of methamphetamine-induced CPP	Minocycline ↓ extracellular dopamine from methamphetamine in the NAC	Not investigated
Circadian rhythms and sleep/wake cycle	Chronic sleep fragmentation model in wild-type mice (Xie et al., 2020)	PFC, hippocampus	↓ spatial learning and memory ↑ aggression and anxiety	↑ intracellular amyloid- $\beta$ , dysfunction of endosome-autophagosome-lysosome pathway	Not investigated
	Depleting microglia with Cx3cr1 transgenic mice (Sominsky et al., 2021)	SCN, hippocampus	Abnormal circadian body temperature and diurnal rhythms	Disrupted expression of clock genes Per1, Per2, and Bmal1	Not investigated
	Ablation of microglia following PLX-5622	Whole brain, Hippocampus	↑ sleep duration	↓ in light phase-dependent excitatory synaptic	Not investigated

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Table 1 (continued)

Experimental manipulation <sup>REF#</sup>	Brain area specificity	Behavioral impact	Cellular mechanism	Bi-directional effect
treatment in mice (Corsi et al., 2021) Sleep deprivation in rats (Wadhwa et al., 2017)	Whole brain, hippocampus	↑ memory impairments ↓ performance in Morris water maze	transmission in CA1 pyramidal neurons Sleep deprivation increases activated microglia activity and minocycline blocks activation of resting microglia	Memory and Morris water maze impairments were rescued by minocycline
Minocycline treatment in human (Nonaka et al., 1983) and rodents (Wisor and Clegern, 2011; Wisor et al., 2011)	Whole brain	Both ↑ (Nonaka et al., 1983) and ↓ (Wisor and Clegern, 2011; Wisor et al., 2011) in sleep quality and episodic memory	minocycline blocks activation of resting microglia (Wadhwa et al., 2017; Nonaka et al., 1983; Wisor and Clegern, 2011; Wisor et al., 2011)	Not investigated

placement in the brain. However, current evidence does indicate unique molecular phenotypes of astrocytes between brain regions and deeper understanding of the importance and role of such phenotypes is beginning to emerge (Khakh and Deneen, 2019; Yu et al., 2020).

### 2.1. Astrocyte lesions alter cognitive flexibility

Several studies have investigated the impact of lesioning astrocytes in the prefrontal cortex (PFC) on relevant behavioral outcomes. In recent work, bilateral administration of the astrocyte-specific toxin, L-AAA, into the medial PFC (mPFC) impaired cognitive flexibility in an attentional set-shifting task and reduced the power of gamma oscillations in the mPFC without any effects on neuron morphology (Brockett et al., 2018). In contrast, stimulation of astrocyte activity via G<sub>q</sub> receptor coupled DREADDs as well as via mPFC infusions of the astrocyte-secreted calcium-binding protein S100β, in the non-L-AAA lesioned groups, improved cognitive performance (Brockett et al., 2018). These observations are consistent with previous work that identified deficits in the ability to discriminate between texture-based, but not odor-based, stimuli, as well as impairments in odor-based reversal learning and working memory after infusions of L-AAA into the mPFC (Lima et al., 2014). The L-AAA lesions of the PFC have also been reported to impair sucrose preference and novelty-suppressed feeding whereas excitotoxic lesioning of neurons by ibotenate did not impact performance on these tasks (Banar and Duman, 2008; Lee et al., 2013). Consistent with the postulate of a close-knit relationship between local astrocyte function and neuron structure, substantial reductions in dendritic complexity of mPFC neurons have been observed after L-AAA administration (Brockett et al., 2018). In the pre-limbic cortex, L-AAA triggered swelling of neuronal cell bodies, but did not result in measurable neuronal cell death (Banar and Duman, 2008). The ability of astrocytes to facilitate behavioral dysfunction without an outright neuronal loss has particular relevance to pathophysiology of drug seeking behaviors and depression, conditions characterized more by synaptic reorganization and plasticity rather than extensive neuronal degeneration (Duman, 2009; Luscher and Malenka, 2011). However, results of L-AAA lesioning studies should be interpreted with caution given evidence that L-AAA inhibits glutamate uptake and glutamate metabolism leading to elevated extracellular glutamate levels (McBean, 1994). An additional interpretational caveat of L-AAA studies has to do with findings that L-AAA increases microglial infiltration into the lesioned area (Khurgel et al., 1996) which has clear implications for attribution of the behavioral effects of L-AAA exclusively to astrocytes.

### 2.2. The role of astrocyte cytoskeleton

Several provocative reports have been published to examine the impact of astrocyte cytoskeletal proteins on behavior. GFAP and vimentin are astrocyte intermediate filament proteins often used for immunohistochemical identification of astrocytes, but also for examination of gross changes in astrocyte morphology. These molecules have

been extensively used as markers of reactive gliosis, a phenomenon in which up-regulation of GFAP and vimentin is accompanied by morphological and a wide array of molecular changes (Zamanian et al., 2012). Nestin is another intermediate filament protein that is normally expressed in progenitor cells during development, but is also re-expressed in mature reactive astrocytes, following brain trauma (Lin et al., 1995; Krum and Rosenstein, 1999). With regard to frontocortical function, one investigation found that transgenic mice null for GFAP and vimentin displayed improved extinction of memories linked to location of a food container in a reversal task (Wilhelmsson et al., 2019). While acquisition of place memories relies heavily on the hippocampus, spatial reversal learning implies suppression of existing information and requires additional processing in prefrontal areas (Avigan et al., 2020). GFAP/vimentin null mice maintained surprisingly normal performance on initial acquisition of hippocampus-dependent place memories, highlighting the specific impact on frontocortical processing (Wilhelmsson et al., 2019). Interestingly, mice with constitutive deletion of nestin showed a similar pattern of results: normal memory acquisition, but better extinction of acquired place memories (Wilhelmsson et al., 2020). Although behavioral specificity of GFAP deletion to reversal learning is intriguing, its absence since embryonic stage may have also impacted adult neuron populations or neural circuit interactions since GFAP is expressed in neural progenitor cells. Indeed, there are suggestions that altered cognitive function may be associated with highly local, cell-layer specific regulation of astrocyte number and morphology as found in a post-mortem analysis of GFAP expression in brains of schizophrenia patients (Rajkowska et al., 2002). Pre-clinical studies also support the idea that astrocyte interactions with neurons may be targeted to specific neuronal populations (Martin et al., 2015). Overall, a vast number of reports outside the scope of this review has relied on intermediate filament expression, particularly GFAP, to evaluate astrocyte numbers and morphology throughout the brain. The most parsimonious conclusion from this literature is that astrocyte number is bidirectionally sensitive to and can be correlated with many behavioral antecedents, sequelae, or disease pathologies. However, since GFAP staining does not label fine astrocytic processes that are most likely to contact synapses, research using other markers to evaluate astrocyte plasticity is sorely needed (Lavialle et al., 2011) as neither astrocyte numbers on their own nor GFAP-based gross morphology reports are likely to provide mechanistic insight into behavioral relevance of these cells.

### 2.3. Astrocytic control of glutamate recycling and GABA synthesis

Astrocytes recycle over 90% of extracellular glutamate (Zhou et al., 2014), with an impact not only on neuronal supply of glutamate, but also on availability of glutamate for GABA synthesis (Ortinski et al., 2010). Among the four major subtypes of glutamate reuptake transporters, two – EAAT1 (GLAST in rodent) and EAAT2 (GLT-1 in rodent) – are abundantly expressed in astrocytes of the CNS. Expression of both EAAT1 and EAAT2 is strongly decreased in schizophrenia and substance



use (Spangaro et al., 2012; Roberts-Wolfe and Kalivas, 2015), disorders known to prominently involve frontocortical activity. A decrease in astrocyte number and EAAT2 expression is also observed in Alzheimer's disease (AD), in humans and in mouse models, where this deficit has been associated with slower clearance of extracellular glutamate (Meeker et al., 2015; Scimemi et al., 2013). Interestingly, overexpression of astrocytic glutamate transport may be beneficial for cognitive function, as suggested, for example, by a post-mortem analysis of entorhinal cortex of AD patients, where overexpression of EAAT2 was found to correlate with the absence of dementia or mild cognitive impairment (Kobayashi et al., 2018). A deficit in visual discrimination learning was reported in mice with constitutive deletion of EAAT1 (Karlsson et al., 2009), suggesting impairment of executive function, although the learning deficit prevented a more direct evaluation of frontocortical control in a reversal task (Karlsson et al., 2009). Reminiscent of the effects of astrocyte lesioning in L-AAA studies, blockade of EAAT2-dependent glutamate uptake by dihydrokainate increased drinking latency in a sucrose preference task and led to near-complete cessation of responding for electrical stimulation of the PFC in an intracranial self-stimulation paradigm (John et al., 2012). In another study, reduced expression of EAAT2 in the mouse hippocampus was observed after treatment with sub-chronic ketamine which was associated with impaired extinction of an operant sucrose self-administration task (Featherstone et al., 2012). These findings were speculated to reflect cognitive deficits characteristic of substance use and resemble data from the PFC of schizophrenic patients (Spangaro et al., 2012). However, extinction of self-administration is not a widely used behavioral indicator of cognitive impairment, and future studies will be needed to more closely examine the impact of astrocytic EAAT2 on frontocortical control of behavior. In the meantime, a repeated observation has been that disrupted glutamate uptake strongly impacts activity of NMDA receptors throughout the brain (Scimemi et al., 2004; Nie and Weng, 2009; Ortinski et al., 2013), with implications for astrocyte control of neuronal output as discussed in the next section.

#### 2.4. Transmitter release by astrocytes

A series of seminal studies used a mouse model of astrocyte-specific deletion of the SNARE protein (dnSNARE mice) that was argued to limit transmitter release (Pascual et al., 2005). Although the specificity of GFAP-driven dnSNARE transgene to astrocytes has been challenged (Fujita et al., 2014), this work formed the foundation for the view that astrocytes may promote synchronous neuronal activity and are instrumental for forms of long-term neuronal plasticity (Durkee et al., 2021). Later studies provided support for this hypothesis by demonstrating that astrocytes regulate sleep patterns and cortical oscillations with implications for cognitive performance (Halassa et al., 2009; Poskanzer and Yuste, 2016). The dnSNARE mice have also been recently used to demonstrate impaired theta-cycle synchronization between the hippocampus and the PFC accompanied by deficits in working and spatial memory, but intact neuronal morphology in both the PFC and the hippocampus (Sardinha et al., 2017). Both the theta coherence and the cognitive deficits could be rescued by supplementation with D-serine (Sardinha et al., 2017). D-serine acts as a co-agonist of NMDA receptors at the glycine site and D-serine release from astrocytes has been argued to impact synaptic long-term potentiation in the hippocampus (Henneberger et al., 2010). Additionally, astrocyte-released ATP and its metabolic product, adenosine, may also influence NMDA receptor expression and signaling via activation of purinergic receptors (Deng et al., 2011). The interaction between ATP/adenosine receptors and neuronal signals in the PFC is supported by experiments in slices indicating that astrocytic P2Y4 receptors are linked to vesicular release of glutamate and activation of neuronal metabotropic glutamate receptors (mGluRs) and NMDA receptors (Wirkner et al., 2007). Altogether, there is substantial support for the view that NMDA receptors represent a critical component of astrocyte interaction with neurons. Particular attention must be

paid to a potentially unique contribution of NMDA receptors located at extrasynaptic sites which are posited as primary mediators of neuronal response to astrocyte-released glutamate (Fellin et al., 2004; Henneberger et al., 2020; Ortinski, 2014; O'Donovan et al., 2021).

In addition to glutamate-mediated signaling, astrocytes also release GABA with an impact on inhibitory neurotransmission (Yoon and Lee, 2014). The specific effects of astrocyte-released GABA on behaviorally relevant frontocortical activity remain to be determined. However, a recent publication demonstrated that selective deletion of GABA<sub>B</sub> receptors in astrocytes of the mouse PFC resulted in aberrant cortical synchronization and deficits in a T-maze alternation task (Mederos et al., 2021). The study proposed that astrocytic GABA<sub>B</sub> signaling facilitates activation of group 1 mGluRs and recruitment of parvalbumin-expressing interneurons, suggesting a link between GABA<sub>B</sub> receptor activation and glutamate release from astrocytes. An interaction between astrocytes and parvalbumin positive interneurons has also been reported in the visual cortex, with an effect on orientation to visual stimuli (Perea et al., 2014).

We would like to conclude this section by acknowledging an ongoing debate over astrocytic ability to release transmitter molecules through vesicular (i.e. SNARE-mediated) or non-vesicular release mechanisms all grouped under the general definition of "gliotransmission". The two most prominent aspects of this argument are an unresolved question over the role of astrocyte Ca<sup>2+</sup> as the mediator of gliotransmitter release and the degree to which *ex vivo* experimental conditions demonstrating astrocyte-mediated release reflect *in vivo* physiology of these cells (Fiacco and McCarthy, 2018). The contentious nature of the debate is supported by the fact that mechanisms of transmitter release from astrocytes are potentially more diverse and certainly much less understood than in neurons (Fiacco and McCarthy, 2018; Savtchouk and Volterra, 2018). Evaluations of astrocyte Ca<sup>2+</sup> may, therefore, require methods distinct from those applied to neuronal Ca<sup>2+</sup> transients (Khakh and McCarthy, 2015; Semyanov et al., 2020; Neugornet et al., 2021). As a consequence, trying to 'squeeze' gliotransmission into the framework of extensively characterized neuronal release mechanisms may not provide an accurate depiction of transmitter release from astrocytes. Similarly, any answers as to whether astrocyte contributions to neuronal activity align with intact physiology must await further experimentation, given that the overwhelming majority of current knowledge has been generated using astrocyte cultures or *ex vivo* slice preparations.

#### 2.5. Other astrocyte-secreted factors

Astrocytes release a range of neuromodulators that interact with the surrounding neurons and impact behavioral measures of cognition. For example, *Plaur* transgenic mice, that lack urokinase plasminogen activator (uPA) receptors and show a specific loss of parvalbumin positive interneurons in the orbitofrontal cortex and dorsal striatum, display a pronounced deficit in performance on a reversal learning task (Bissonette et al., 2010). This deficit, which does not generalize to a broad learning impairment, can be rescued by up-regulation of the hepatocyte growth factor in GFAP-positive astrocytes (Bissonette et al., 2010). Loss of astrocyte reactivity could play a role in these behavioral outcomes since up-regulation of astrocyte uPA receptors in response to uPA secretion from neurons has been reported to mediate astrocyte activation, as measured by increased GFAP expression, after ischemic injury (Diaz et al., 2017). Another interesting secreted protein is chordin-like 1 (Chrdl1). Chrdl1 acts an antagonist of bone morphogenetic protein, which is critical in CNS development. A human study linked mutations in the *Chrdl1* gene to development of corneal abnormalities and myelination deficits, but strikingly, superior performance on tests of executive function (Webb et al., 2012). In mice, secretion of Chrdl1 from astrocytes is essential for increased developmental expression of Ca<sup>2+</sup>-impermeable, GluA2 subunit-containing AMPA receptors that impede synaptic plasticity (Blanco-Suarez et al., 2018). Regulated

expression of Ca<sup>2+</sup>-permeable versus Ca<sup>2+</sup>-impermeable AMPA receptors has been proposed as one of key characteristics of neuroplasticity within the mesolimbic dopamine reward system associated with cocaine use (Wolf and Tseng, 2012). Related to this, up-regulation of Chrd11 RNA was demonstrated in cultured astrocytes treated with dopamine (Galloway et al., 2018).

A vast literature supports the notion that astrocytic release of pro- and anti-inflammatory molecules as well as astrocytic response to these molecules has consequences for frontocortical signaling (Sofroniew, 2014). For example, astrocytic overexpression in the mPFC of major histocompatibility complex 1 (MHC1), which is involved in adaptive immune responses, led to decreased neuronal spine density in the dorsal striatum and deficient performance in a reward-based visual discrimination task, despite normal performance in a reversal learning task (Caudal et al., 2020). In another study, mice that constitutively expressed IL-6 in astrocytes showed deficits in avoidance learning that are thought to rely on PFC interactions with the amygdala (Heyser et al., 1997). The inflammatory role of astrocytes has been a prominent area of research on neurodegenerative disease with pathologies that span the gamut of behavioral impairments from memory deficits to dysregulation of executive function to depression, anxiety, etc. Numerous astrocyte-specific targets have been identified across neurodegenerative conditions including Parkinson's disease (Booth et al., 2017), Huntington's disease (Khakh et al., 2017), AD (Carter et al., 2019), multiple sclerosis (Brambilla, 2019), stroke (Pekny et al., 2019), traumatic brain injury (TBI) (Burda et al., 2016) as well as normal aging (Rodríguez-Arellano et al., 2016; Cohen and Torres, 2019). Since it appears unlikely that any one of the behavioral measures in these conditions can be attributed to a single astrocyte-specific factor, a deeper understanding of how combinations of secreted factors impact astrocyte interactions with local neurons and long-range signals between brain regions would be extremely valuable.

## 2.6. Microglial contributions to executive function

Microglia-mediated inflammation has been observed to contribute to frontal cortex dependent behaviors across a range of pathologies, including AD, schizophrenia, TBI, aging, PTSD, depression, neurodegeneration as well as diet-induced inflammation (Veniaminova et al., 2020; Val-Laillet et al., 2020; Bocarsly et al., 2015). Similar to astrocytes, microglial morphology is highly sensitive to a wide range of physiological and pathological stimuli and many studies rely on morphology-based classification of activated microglia as evidence of altered microglial signaling. Indeed, physical appearance of the microglia can be indicative of the neuro-environment (De Biase et al., 2017). For example, resting microglia have long, thin, highly branched processes with a small cell body, and they are primarily in charge of querying the neuronal environment for perturbations to ensure effective communication between neurons. In line with their 'surveillance' role, these cells are regularly tiled throughout the brain to ensure local oversight by at least one microglial cell. However, when microglia detect a potential neuro-insult, these cells are galvanized into an active state, characterized by retraction of their processes and acquisition of a more amoeboid phenotype. Because these cells share a common lineage to macrophages in the peripheral immune system, microglial activation has been similarly described as falling under M1 (pro-inflammatory and expressing markers such as CD86, iNOS, CD16/32, and MHCII) or M2 (anti-inflammatory and expressing markers such as CD206, FIZZ1, and Arginase I) phenotypes. More recently, however, application of M1 and M2 descriptors to microglia has been called into question based on growing support for existence of multiple intermediate and combinative phenotypes (Butovsky and Weiner, 2018).

There is substantial evidence that administration of minocycline, a tetracycline antibiotic that disrupts protein synthesis and prevents microglial activation elicits mild-to-substantial cognitive *improvement* across multiple domains including cognitive symptoms of bipolar

disorder (Rosenblat and McIntyre, 2015), HIV (Lin et al., 2021), addiction (Kohno et al., 2019), depression (Bortolato et al., 2016) and psychotic disorders (Jeppesen et al., 2020; Solmi et al., 2017). Pro-cognitive effects of microglia depletion have also been observed after cranial irradiation, often used as a cancer therapy (Acharya et al., 2016). Reducing microglial population in mice by treatment with the colony stimulating factor (CSF)-1 receptor inhibitor, PLX-5622, has been reported to rescue irradiation-induced behavioral deficits on an 'object in place' and contextual fear-conditioning tasks both of which involve frontocortical signaling (Acharya et al., 2016). Interestingly, a recent study reported no effect of minocycline on cognitive decline associated with mild AD in human subjects (Howard et al., 2020), although cognitive benefits have been reported in animal models (Choi et al., 2007). To reconcile such disparate outcomes, some researchers advocate for use of minocycline in combination with other drugs as a strategy to combat cognitive impairment in AD patients (Daulatzai, 2016; Fessel, 2019). It must be noted, however, that similarly to astrocyte depletion with L-AAA, microglia depletion with PLX-5622 or other CSF-1 inhibitors may have off-target effects that involve other cell types (Green et al., 2020).

Consistent with the body of knowledge that stress is both associated with cognitive deficits and promotes systemic inflammation, stress-activated microglia have also been found to facilitate cognitive impairment. Dysregulated stress responsivity within the PFC is thought to be one of core factors leading to emergence of depression and associated cognitive deficits (McEwen and Morrison, 2013; Fogaca and Duman, 2019). For example, a regime of chronic unpredictable stressors led to elevation of CSF1 receptor and complement components C1q and C3 mRNA in the PFC and behavioral deficits in a PFC-dependent temporal object recognition task (Horchar and Wohleb, 2019). In this study, both the mRNA and the behavioral changes could be rescued by treatment with the glucocorticoid receptor antagonist, RU486. Glucocorticoid receptors are known to be expressed by a variety of cell types in the brain including neurons and RU486 treatment was noted to reduce stress-associated morphological remodeling of the PFC microglia as well as to prevent reduction of dendritic spine density in PFC layer V pyramidal cells (Horchar and Wohleb, 2019). These results complement other findings that stress-induced cognitive deficits trigger ramification of microglial processes and increase microglia-neuron contacts in the PFC leading to dendritic spine elimination (Hinwood et al., 2013; Liu et al., 2021; Wohleb et al., 2018). One molecular mechanism that links stress-induced PFC dysfunction with microglial activation has been proposed to involve ATP-gated P2×7 receptor signaling and the downstream release of PGE2 and IL-1β (Furuyashiki, 2012). Extracellular ATP is generally subject to quick hydrolysis to adenosine, predicting a role for adenosine receptors in microglial response to stress. Indeed, blockade of adenosine A<sub>2A</sub> receptors has been shown to normalize frontocortical microglia morphology in the prenatal dexamethasone model of anxiety in male, but not female rats (Caetano et al., 2017). Using the same model, normalization of microglial morphology by A<sub>2A</sub> antagonism was observed in the hippocampus of female rats which was further linked to increased synchronization of hippocampal-PFC network and improved cognitive performance (Duarte et al., 2019).

Some evidence suggests that release of TNFα from activated microglia improves cognitive flexibility in an adolescent social stress model and that administration of the monoamine oxidase inhibitor, antidepressant, ranylcypromine, increases the number of microglia and TNFα release in the PFC (Zhang et al., 2019), a finding that suggests microglial activation may rescue, rather than promote, PFC-dependent cognitive impairment in some models and behavioral assays. Notwithstanding such evidence, human studies support deleterious effects of activated microglia on cognitive performance. This work has been greatly facilitated by the availability of radioligands to translocator protein (TSPO), a marker of activated microglia utilized in MRI and PET studies. For example, elevated TSPO distribution in the frontal cortex has been associated with lower attention scores in non-medicated patients with a

major depressive disorder (Li et al., 2018). Similarly, in HIV patients, increased TSPO radioligand binding in the frontal cortex was linked to lower performance on tests of memory and executive function (Rubin et al., 2018). Increased microglial activation reported by TSPO binding has also been reported to predict cognitive decline in a model of experimentally-induced meningitis in rats (Giridharan et al., 2020) and in a population of pre-manifest Huntington's disease patients (Politis et al., 2011). Although a specific role of PFC microglia was not investigated in these studies, they suggest that microglial activation can serve as a useful predictor of clinically manifesting symptoms of cognitive decline.

### 3. Modulation of reward-seeking behaviors

#### 3.1. Regional heterogeneity of astrocyte responses to drugs of abuse

The role of astrocytes may vary within distinct nodes of the reward circuit, including the PFC, caudate/putamen, nucleus accumbens (NAc), hippocampus, amygdala, and ventral tegmental area (VTA) as most prominent components. Indeed, while our understanding of astrocytes is still in its infancy, accumulating evidence indicates variability exists across brain regions with respect to the basal functional properties and engagement in pathology of these cells (Khakh and Deneen, 2019; Polyzos et al., 2019). While a direct comparison has not been made between cortical and striatal astrocytes, several lines of evidence indicate differential features and expression profiles between striatal and hippocampal astrocytes, supporting other evidence for regional variability of both structure and function (Chai et al., 2017; Khakh and Deneen, 2019; Khakh, 2019; Xin and Bonci, 2018; Batiuk et al., 2020; Clarke et al., 2021). Accordingly, it is not unreasonable to speculate that effects of drug exposure may have dissociable effects within the reward circuitry, and that astrocytes within these regions may differentially influence behavioral responses to drugs.

Early reports reflecting effects of drug self-administration on astrocytes indicated that astrocyte-enriched mediators of glutamate homeostasis, in particular system xC- and EAAT2/GLT-1, are chronically downregulated in the NAc (Baker et al., 2003; Knackstedt et al., 2010; Scofield et al., 2016; Spencer and Kalivas, 2017). It was subsequently revealed that self-administration and extinction of cocaine-seeking led to downregulation of GFAP expression, as well as astrocyte surface area, volume, and colocalization of astrocyte membrane with synapses in the NAc (Scofield et al., 2016; Testen et al., 2018). This decrease in synaptic colocalization has since also been observed following self-administration and extinction from methamphetamine and heroin (Kruyer et al., 2019; Siemsen et al., 2019). The effect of cocaine on astrocytes in the NAc was, in contrast, not observed to extend to the prelimbic PFC or the basolateral nucleus of the amygdala, suggesting regional susceptibility of astrocytes in this model (Testen et al., 2018). However, decreased expression of EAAT1/GLAST and S100 $\beta$ -positive astrocytes has been observed in the SN/VTA following chronic non-contingent delivery of cocaine or methamphetamine (Sharpe et al., 2019). Ethanol consumption in rats exhibits a time-dependent morphological effect on astrocytes in the mPFC, characterized by initial upregulation of GFAP followed by a decrease at 3 weeks of abstinence (Bull et al., 2015; Kim et al., 2018). Likewise, adolescent intermittent ethanol administration results in decreased synaptic colocalization of dorsal hippocampal astrocytes in adulthood (Healey et al., 2020). While many reports have found overall increases in GFAP expression and structural features of astrocytes following ethanol exposure, the general theme of reduced gene expression and structural features following post-administration abstinence has been observed across operant drug paradigms (Kim et al., 2018).

How then do astrocytes affect drug-related behaviors? One prominent line of evidence comes from studies utilizing astrocyte-specific expression of G $_q$ -coupled DREADD (hM3D) constructs. Stimulation of hM3D receptors within the murine PFC promotes ethanol drinking in

ethanol-naïve mice in an intermittent access paradigm with free availability of ethanol every other day (Erickson et al., 2021). However, different results are observed in other brain regions. When expressed in the NAc astrocytes, hM3D stimulation opposes cocaine reinstatement and motivation to self-administer ethanol, respectively (Scofield et al., 2015; Bull et al., 2014). In the case of cocaine reinstatement, stimulation of presynaptic inhibitory mGluRs subsequent to hM3D stimulation was shown to be responsible for the observed behavioral effect (Scofield et al., 2015). It is unclear whether these divergent results of DREADDs in the mPFC and NAc reflect heterogeneity of astrocyte signaling or are a function of the stimulation in naïve versus withdrawn, abstinent animals. The parallel between distinct effects on astrocyte morphology and behavioral drug-related output, however, is noteworthy. Moreover, results from the VTA indicate that astrocyte regulation of avoidance behavior is dependent on local circuitry and stimulation of GABAergic neurons (Gomez et al., 2019). Specifically, optogenetic stimulation of VTA astrocytes promotes avoidance behavior which overrides conditioned place preference for cocaine (Gomez et al., 2019). Ventral midbrain astrocytes exhibit distinct gene expression and physiological properties which may contribute to the microcircuit-level outcomes (Xin et al., 2019).

#### 3.2. Regional heterogeneity of astrocyte modulation of drug-related behaviors

What is the mechanism by which striatal astrocytes could oppose drug-related, motivated behaviors? As addressed above, one possibility is stimulation of presynaptic, G $_{\alpha}$  and G $_{i/o}$ -coupled metabotropic glutamate receptors (Scofield et al., 2015). In addition, considerable evidence indicates that astrocytes can oppose glutamatergic synaptic transmission via release of ATP/adenosine, acting also on presynaptic inhibitory adenosine A1 receptors (Kofuji and Araque, 2021). For example, optogenetic activation of astrocytes in the hippocampus inhibited consolidation of contextual fear memory via release of ATP and adenosine and pharmacological stimulation of A1 receptors elicited similar effects (Li et al., 2020). In a similar fashion, glutamatergic synapses in the central nucleus of the amygdala can be inhibited by astrocytes via adenosine A1 receptor stimulation, while inhibitory synapses are activated via stimulation of adenosine A2A receptors (Martin-Fernandez et al., 2017). Perhaps most germane, Corkrum et al. (2020) recently showed that Ca $^{2+}$  responses are generated in NAc astrocytes subsequent to dopamine release and amphetamine exposure, resulting in ATP/adenosine release and reduced AMPA receptor-mediated synaptic activity. This effect may be facilitated by increased glutamate-mediated neuroglial coupling in the NAc observed after cocaine self-administration (O'Donovan et al., 2021), although multiple other regulators of AMPA signaling (e.g. Ortinski et al., 2015; Briand et al., 2014; White et al., 2016) could certainly be involved. Independent of drug exposure, Down Syndrome patient-derived induced pluripotent stem cells exhibit increased frequency of spontaneous calcium fluctuations, which inhibit co-cultured neurons via an adenosine-dependent mechanism (Mizuno et al., 2018). This is in keeping with a rich literature on varied effects of astrocytes on potentiation of inhibition of synaptic transmission dependent on subtype of adenosine or glutamate receptors (Pascual et al., 2005; Papouin et al., 2017; Newman, 2003; Koizumi et al., 2003). Thus, while significant evidence indicates that astrocytes can promote and support synaptic transmission (Papouin et al., 2017; Allen and Eroglu, 2017) there is also considerable support for the hypothesis that astrocytes may oppose excitatory drive within the reward circuitry, and relatedly oppose behavioral output associated with drug craving and seeking (Corkrum and Araque, 2021).

#### 3.3. Striatal astrocytes in habit and compulsive behaviors

Striatal astrocytes influence behaviors engaged by drugs beyond seeking. For example, both habit-directed and compulsive behaviors are



associated with protracted drug seeking (Lipton et al., 2019). The transition from recreational drug use to more regulated use and relapse is associated with a shift in cellular activity from the ventral to dorsal striatum (Fouyssac and Belin, 2019). Relatedly, addiction is also associated with a shift from goal-directed, to more habit-based behaviors that are proposed to rely on recruitment of dorsomedial (DMS) and dorsolateral striatum (DLS), respectively (Vandaele and Ahmed, 2021; Everitt and Robbins, 2016).

Recent studies have indicated supportive roles for astrocytes in these processes. For example, chemogenetic hM3D activation of astrocytes in the DMS reduced the frequency of spontaneous neuronal excitatory postsynaptic currents (EPSCs) in D1-receptor expressing medium spiny neurons (MSNs), but increased EPSC amplitude in D2-receptor positive MSNs and shifted behavior from habitual to goal-directed (Kang et al., 2020). The effect of astrocyte  $G_q$  stimulation on promoting goal-directed behaviors was dependent on adenosine signaling, as the effect was not observed in adenosine transporter (ENT1) deficient mice. Considerable research has indicated both structural and functional interactions between A1-D1 and A2A-D2 receptors (Fuxe et al., 2010; Ferre et al., 1997; Ferre et al., 1992), underscoring the critical nature of adenosine in the regulation of synaptic and neuronal activity by astrocytes, and providing a mechanism whereby astrocytes may differentially affect different neuronal subtypes within the striatum. Precedent for specific interactions between astrocytes and neuronal subpopulations in the striatum has previously been reported (Martin et al., 2015). In contrast to these findings subsequent to astrocyte hM3D stimulation in the DMS, training-induced upregulation of EAAT2/GLT-1 in the DLS resulted in strengthened habit behavior in an operant task for chocolate reinforcers, and inhibition of EAAT2/GLT-1 upregulation promoted goal-directed behavior (Boender et al., 2021). Collectively, these studies in the dorsal striatum suggest that astrocytes may reinforce the relative contributions of the DMS and DLS to habit and goal-directed behaviors, respectively.

Substance use disorders are characterized by three stages: 1) binge and intoxication, 2) withdrawal and negative affect, and 3) preoccupation and anticipation (Volkow et al., 2016). The third stage is associated with impaired PFC-dependent regulation of behavior and compulsive drug seeking. Accordingly, it is of merit to understand how astrocytes may contribute to compulsive-like behaviors. Removal of astrocyte  $Ca^{2+}$  signaling in the DLS via expression of the plasma membrane  $Ca^{2+}$  pump resulted in excessive and compulsive-like self-grooming behavior associated with increased GABA transporter, GAT-3, expression in astrocytes and impaired tonic inhibition of medium spiny neurons (Yu et al., 2018). These findings suggest that astrocytes may suppress dopamine release from axon terminals since compulsions manifesting as motor stereotypies are often observed in conditions characterized by excessive dopamine. Importantly, these results also highlight the ability of striatal astrocytes to modulate inhibitory as well as excitatory neuronal signaling echoing the findings in the frontal cortex.

### 3.4. Microglia and reward-seeking

Microglia interact extensively with the dopamine system (Thomas Broome et al., 2020) and show sensitivity to drugs across a spectrum of substance use disorder models. In alcohol use disorder, ethanol has been found to increase the number of microglia in the hippocampus and the PFC in the absence of astrocyte activation (West et al., 2021). However, another study has found that although ethanol does induce microglial activation, microglial numbers in the hippocampus decrease after a “binge” pattern of exposure, finding that was supported by evidence of microglial dystrophy (Marshall et al., 2020). Microglial activation has also been shown after exposure to psychostimulant drugs, including amphetamine (Marchese et al., 2020), methamphetamine (Thomas et al., 2004) and cocaine (Cotto et al., 2018; Wang et al., 2017; Jarvis et al., 2019; Burkovetskaya et al., 2020; Lewitus et al., 2016). Interestingly, methamphetamine-induced activation of microglia could be

prevented by maintaining animals at reduced temperature (10–12 °C), whereas elevated ambient temperature alone (38–40 °C) did not result in microglial activation (Thomas et al., 2004). Additionally, a PET study of human cocaine users using TSPO radioligands found no evidence of activated microglia (Narendran et al., 2014). These somewhat discrepant findings could be reconciled by acknowledging that there is not a binary distinction between activated and resting microglia. For example, while there is converging support for the idea of microglial activation by ethanol using morphological analyses (Melbourne et al., 2019), binge ethanol exposure may result in increase of some, but not other markers of immunoreactive microglia (Marshall et al., 2013). Such observations of partial microglial activation call for a more nuanced classification scheme. Indeed, the need for discriminating between multiple microglia phenotypes has been increasingly recognized and particularly aided by the emergence of rapid and cost-effective gene sequencing techniques (Boche and Gordon, 2021).

In addition to morphological changes and expression of inflammatory markers following drug use, disrupting microglia has also been shown to have an effect on subsequent behavioral read-outs of drug exposure. Alcohol consumption and withdrawal-induced anxiety are both attenuated by inhibiting microglial activation with minocycline (Agrawal et al., 2011; Gajbhiye et al., 2018). Depletion of microglia with PLX-5622 does not change escalation of voluntary alcohol consumption, but does block escalation of intake under conditions of repeated immune activation (Warden et al., 2021). Another study has found that PLX-5622 normalized both excitatory and inhibitory synapse plasticity as well as prevented anxiety during alcohol withdrawal and reduced escalation of alcohol intake (Warden et al., 2020). Consistent with this, microglial depletion normalized behavioral performance on marble burying and open field tests (measures of anxiety) after withdrawal from nicotine, an effect associated with elevation of NOX2, a source of reactive oxygen species expressed predominantly in the microglia (Adeluyi et al., 2019). Inhibition of microglia has also been generally reported to attenuate behavioral effects of psychostimulants. Thus, preventing microglia activation by blockade of toll like receptor 4 (TLR4) signaling and the downstream release of IL-1 $\beta$  attenuated conditioned place preference and self-administration of cocaine (Northcutt et al., 2015). Minocycline treatment has also been reported to attenuate both maintenance and reinstatement of methamphetamine-induced conditioned place preference (Fujita et al., 2012; Attarzadeh-Yazdi et al., 2014) as well as subjective rewarding effects of dextroamphetamine in human subjects (Sofuoglu et al., 2011). Clinical studies generally support the idea that microglial inhibition suppresses behavioral effects of commonly abused drugs (Bachtell et al., 2017), although some results argue against this (Arout et al., 2019). In preclinical work, locomotor sensitization to cocaine appears to break the pattern with findings that sensitization is suppressed by activated rather than inhibited microglia via release of TNF $\alpha$  (Lewitus et al., 2016) and findings that microglial depletion has no effect on cocaine sensitization (Wu and Lai, 2021). It is possible that microglial control of substance-use related behaviors is proportional to the level of stress response that accompanies experimental manipulations. This has been suggested in a recent review (McGrath and Briand, 2019) and is supported by findings that immune activation is required for microglial control of drug-related behavior (Warden et al., 2021).

### 4. Astrocyte control of circadian rhythmicity

In mammals, a specific nucleus of the hypothalamus, the SCN, acts as the master circadian pacemaker. Its function is required to drive daily rhythms in behavior, and lesions of the SCN abolish rhythms in mammals. Accordingly, in hamsters, transplanting an explant of the SCN into an SCN-lesioned animal restores circadian rhythms (Ralph et al., 1990). Of note, these rhythms have the same period as in the donor, indicating that they arise from cell-autonomous mechanisms present within the SCN (Ralph et al., 1990). This form of cell-autonomous rhythmicity is generated by two interlocking transcription/translation feedback loops

driven by four clock proteins: the activators CLOCK and BMAL1 and the repressors PER and CRY. CLOCK and BMAL1 activate the transcription of the *Per* and *Cry* genes. The proteins PER and CRY inhibit the transcriptional activation of CLOCK and BMAL1. As the proteins PER and CRY are degraded through ubiquitination, the repression of CLOCK and BMAL1 is relieved and the cycle begins again (Buhr and Takahashi, 2013; Partch et al., 2014). The period and phase with which these reactions take place can be modified and reset or entrained by cycles of light and darkness in the environment. Light contributes to reset circadian clocks through the activation of retino-hypothalamic (RHT) glutamatergic inputs to the SCN that, according to studies of changes in the expression of the immediate early gene *c-Fos*, can activate both neurons and astrocytes (Rea, 1989; Bennett and Schwartz, 1994).

The components of the molecular machinery regulating clock gene expression in mammals were first characterized in hamster neurons. Multiple groups hypothesized that astrocytes may also contribute and perhaps drive circadian rhythmicity in the SCN and experimental evidence showing that astrocytes express clock genes and function as competent circadian oscillators arrived with the use of reporter gene constructs (Prolo et al., 2005; Yagita et al., 2010). The identification of clock genes in astrocytes puts these cells under the spotlight and suggests that these cells are not mere modulators or targets of neuronal pacemakers, but they can act in conjunction with neurons to establish circadian rhythms (Prolo et al., 2005). One should note, however, that the level of expression of clock genes in astrocytes is substantially lower or more diffuse than in neurons, making it perhaps more difficult to detect (Prolo et al., 2005). This might have delayed the due recognition of astrocytes in the circadian pacemaker process, despite the early work demonstrating an essential role of astrocytes for the proper function of the circadian clock (Serviere and Lavielle, 1996; van den Pol et al., 1992; Shinohara et al., 2000; Prosser et al., 1994). There is now a growing awareness that just like the number of a given cell type does not speak to the relevance of its function, the lower expression of clock genes in astrocytes is not a measure of their physiological relevance in the generation and maintenance of circadian rhythms.

How do astrocytes contribute to the pacemaker activity of the SCN? In 1993, Lavielle and Serviere first reported that, in hamsters, there are light-independent (circadian) changes in the spatial distribution of the astrocyte protein GFAP and in astrocyte morphology, suggesting that these cells undergo circadian structural remodeling (Lavielle and Serviere, 1993). Since astrocyte remodeling is associated with changes in glucose consumption (Lavielle and Serviere, 1993; Schwartz and Gainer, 1977), and astrocytes are main sources of glycogen, these findings have been thought to reflect the participation of astrocytes in the regulation of energy metabolism (Lavielle and Serviere, 1993; Brown and Ransom, 2007). However, due to their abundant expression of glutamate transporters (Lehre and Danbolt, 1998), a retraction of astrocyte processes could also imply a longer time for glutamate clearance from the extracellular space (Sweeney et al., 2017). This, in turn, could alter the time course of glutamatergic transmission at RHT synapses onto the SCN without the need for altering glutamate transporter expression in these cells (Beaule et al., 2009). The structural remodeling of astrocytes has been shown to account for circadian changes in the glial coverage of the soma and dendrites of VIP and AVP neurons in the SCN implicated with clock entrainment and pacemaker resetting, respectively (Becquet et al., 2008; Herzog et al., 2017). Despite these findings, there are still uncertainties about the implications that the remodeling of astrocytes in the SCN has for glutamate clearance, synaptic plasticity, and metabolic exchange (Serviere and Lavielle, 1996). What has emerged in recent years, however, is that SCN astrocytes are not mere followers but rather partners in crime with the neuronal circadian pacemaker machinery (Brancaccio et al., 2017). Neurons are metabolically active during circadian daytime. Astrocytes, instead, are active during circadian nighttime and suppress neuronal activity by regulating extracellular glutamate concentration and activation of GluN2C-containing NMDA receptors. More importantly, astrocytes in the SCN can instruct neurons

without a competent molecular clock to initiate and sustain circadian patterns of activity (Brancaccio et al., 2019).

#### 4.1. Astrocytes and circadian clocks outside the SCN

The first demonstration that astrocytes are competent circadian oscillators came from luciferase assay studies in rat cultures (Prolo et al., 2005). This work was important for several reasons that we would like to reiterate. *First*, it showed that the circadian period of astrocytes is genetically determined and differs between mice and rats, in parallel with period differences in the locomotor behavior of these species, potentially reconciling experimental differences detected when working with experimental preparations from different rodent species. *Second*, it showed that the expression of clock genes like *Per1* is substantially lower or more diffuse in astrocytes than in neurons, potentially explaining initial difficulties in detectability of clock genes in astrocytes. *Third*, it showed that, *in vitro*, the circadian rhythms of astrocytes are not detected before the first week of culture. This is in stark contrast with the *in vitro* developmental timeline of cultured neurons, which display circadian rhythmicity earlier. This finding may provide insights into the different developmental profiles of circadian clocks in neurons and astrocytes *in vivo* (Welsh et al., 1995). *Last*, and arguably most importantly, the cultured astrocytes used in this work did not derive from the SCN but from the cortex, suggesting that regions of the brain outside the SCN can act as auxiliary, ancillary or accessory circadian oscillators.

Accordingly, the core circadian molecular machinery of astrocytes has been characterized in several regions of the nervous system (e.g., retina, olfactory bulb and hippocampus) and even outside the brain (e.g., cultured fibroblasts, hepatocytes, leukocytes, adipocytes, and muscle cells) (Tosini and Menaker, 1996; Ruby et al., 1999; Herzog and Huckfeldt, 2003; Izumo et al., 2003; Granados-Fuentes et al., 2004; Granados-Fuentes et al., 2004; Lavery et al., 1999; Arjona and Sarkar, 2005; Du et al., 2005; Durgan et al., 2005; Chalmers et al., 2008). Although cells in these tissues can display intrinsic circadian rhythms, each of them would run at its own pace, desynchronize, and dampen population rhythms without SCN activity. This contrasts with what happens in the SCN, where neurons and astrocytes synchronize to each other (Pando et al., 2002; Balsalobre et al., 2000; Yamazaki et al., 2000; Silver et al., 1996; Aton and Herzog, 2005; Nagoshi et al., 2004; Welsh et al., 2004; Carr and Whitmore, 2005). Several studies have attempted to reveal the identity of paracrine signals capable of synchronizing neuronal and astrocytes rhythms in auxiliary circadian oscillators (i.e., regions that express clock genes, but follow the timekeeping system set by the SCN). One of the first ones to be identified was the peptide hormone VIP, which coordinates circadian rhythms among astrocytes where VIP is released and where its receptor VPAC2R is expressed, like the olfactory bulb, retina, and the neocortex (Marpegen et al., 2009; Gall et al., 1986; Sims et al., 1980; Okamoto et al., 1992). Although the VIP/VPAC2R signaling pathway dominates circadian rhythmicity, other signaling pathways like the AVP/V1<sub>a/b</sub> and the GRP/BB2 can also sustain daily cycling (Maywood et al., 2011).

#### 4.2. Astrocytes and circadian clocks in the hippocampus

Clock genes are expressed in the hippocampus, a brain region involved in encoding spatial and episodic memories (Chun et al., 2015). Recent work has shown that not only clock genes, but also a larger set of hippocampal genes (10%) and proteins (11%) are expressed with circadian rhythmicity (cf. 19% in the SCN) (Debski et al., 2020). These oscillations in the molecular landscape of the hippocampus are altered in experimental temporal lobe epilepsy (Debski et al., 2020), which is of particular interest given that seizure onsets within individuals display strong circadian rhythmicity (Quigg et al., 1998).

*In vivo* behavioral studies indicate that lesioning the SCN eliminates circadian rhythmicity in a passive avoidance task (Stephan and Kovacevic, 1978), and desynchronization of the circadian system impairs

recall of a spatial task (Devan et al., 2001). More specific tests on hippocampal-dependent learning and memory show that these vary between the circadian daytime and nighttime (Gerstner et al., 2009; Ruby et al., 2008; Shimizu et al., 2016; Smarr et al., 2014; Snider et al., 2016; Rawashdeh et al., 2018). The work of Chaudhury et al. is particularly important in this context as it shows that there is a circadian regulation of memory acquisition, recall and extinction in mice tested using a fear conditioning protocol (Chaudhury and Colwell, 2002).

These periodical variations in hippocampal function can also be detected using *in vivo* electrophysiology recordings, although there are some differences in the results reported in the literature. Early studies in the dentate gyrus showed that the field EPSP and population spike amplitude are larger during the active phase (nighttime for rodents) (Barnes et al., 1977). Potentiation of the field EPSP amplitude, but not of the population spike amplitude, was confirmed in a later study (Cauller et al., 1985). Others also showed that the dentate gyrus is more excitable during the inactive phase (daytime for rodents) (West and Deadwyler, 1980). When reviewing these findings, it is important to keep in mind that the results are sometimes described by comparing two clock times which can be misleading, since circadian rhythmicity is a phenomenon with a sinusoidal profile. The use of two points forces linearization which makes the comparison across datasets collected from different laboratories difficult, if not inaccurate, especially when the two time points are not twelve hours apart from each other (i.e., half the period of a circadian cycle) or when different labs use different reference times. This is important because it can lead to opposite conclusions about whether the described phenomenon increases or decreases during daytime/nighttime.

Perhaps surprisingly, there are circadian changes in hippocampal function that are retained in reduced slice preparations. These show that the incidence and magnitude of long-term potentiation (LTP) varies with opposite phase in the dentate gyrus versus hippocampal area CA1, and may therefore shape in different ways the activity of synapses in different domains of the same brain region (Harris and Teyler, 1983). Until recently, the synaptic mechanisms accounting for this effect remained unknown. What has now emerged is that these circadian changes in synaptic plasticity are differentially regulated by neurons and astrocytes (McCauley et al., 2020). During the nighttime, when LTP is reduced in hippocampal area CA1, pyramidal cells reduce their surface pool of functional NMDA receptors (McCauley et al., 2020). At the same time, glutamate clearance from astrocytes becomes slower, due to a retraction of astrocytic processes enriched with glutamate transporters from synapses, similar to what has also been observed in the SCN (Lavalie and Serviere, 1993). Glutamate inactivates AMPA receptors, and the longer glutamate remains in the extracellular space, the longer it takes for these receptors to recover from inactivation (McCauley et al., 2020). This has implications for synaptic integration of EPSPs, which is impaired during nighttime in CA1 pyramidal cells. The diffusible agent mediating these effects is not D-serine, because there are no detectable circadian changes in the occupancy of the NMDA receptor glycine binding site (McCauley et al., 2020; Papouin et al., 2017). It is likely corticosterone, whose peak production time is during the active phase (i.e., nighttime for mice) (McCauley et al., 2020; Diotel et al., 2018). Accordingly, one can rescue the loss of NMDA receptors and synaptic integration in slices prepared during the nighttime by treating them with antagonists of NR3C1/2 mineralocorticoid and glucocorticoid receptors (McCauley et al., 2020). What is also notable from this work is the fact that the magnitude of the circadian changes in synaptic integration are frequency dependent and are most pronounced for stimulation frequencies that can be detected *in vivo* during exploratory behaviors (Colgin et al., 2009; Zheng et al., 2016). In other words, circadian rhythms do not alter hippocampal activity as a whole: rather, they modulate hippocampal-dependent learning while preserving memory recall.

Together, these findings suggest that in a subordinate oscillator like the hippocampus, the circadian changes in gene and protein expression

may change the rules of synaptic plasticity, but the direction and extent of these changes vary not only across but also within brain regions, in cell-specific ways. On the other hand, different sets of cells can be active to mediate the same behavior at different times (Lamothe-Molina et al., 2020). The ultimate effect of circadian clocks on more complex phenomena and behaviors may be activity-dependent, adding additional levels of complexity. Perhaps, our attempts to draw general rules on the functional properties of the brain, has led us to underestimate how dynamic this organ is and how profoundly our circadian clock can shape what we think we can always do well.

#### 4.3. Astrocytes and sleep/wake cycles

The earliest evidence that astrocyte activity impacts sleep homeostasis came from a 2009 publication showing that mice with astrocytic dnSNARE expression show decreased extracellular accumulation of adenosine, a molecule that in wild type mice promotes sleep and increases sleep pressure, also observed with sleep deprivation (Halassa et al., 2009). These findings implicated astrocyte-derived adenosine and A1 adenosine receptor activation as the factors underlying these behavioral effects, because pharmacological, *in vivo* blockade of A1 receptors attenuated sleep pressure accumulation in these mice (Halassa et al., 2009). The majority of extracellular adenosine is derived from metabolism of ATP and astrocytes have been recognized as a major source of extracellular ATP (Boison et al., 2010). In addition to these findings, Papouin et al. (2017) showed that D-serine levels oscillate in the hippocampus as a function of wakefulness, not of circadian rhythms (Papouin et al., 2017). This causes saturation of the NMDA receptor glycine binding site during wakefulness, that wanes during sleep. Activation of Ca<sup>2+</sup>-permeable  $\alpha$ 7-nicotinic acetylcholine receptors via septal cholinergic afferents to the hippocampus is thought to be the trigger for D-serine release from astrocytes during wakefulness (Papouin et al., 2017). Consistent with these findings, recent Ca<sup>2+</sup> fiber photometry data show that Ca<sup>2+</sup> levels in astrocytes increase during wakefulness and decrease during REM sleep in different brain regions including the cortex, hippocampus, hypothalamus, pons and cerebellum (Tsunematsu et al., 2021; Bojarskaite et al., 2020; Ingiosi et al., 2020). However, the magnitude of these oscillations and the detailed Ca<sup>2+</sup> dynamics change between astrocytes in the: (i) cortex and hippocampus; (ii) hypothalamus and pons; (iii) cerebellum (Tsunematsu et al., 2021). These findings suggest that astrocytes may contribute differently to the regulation of sleep and wakefulness, depending on the brain region (Tsunematsu et al., 2021). The emerging evidence in support of brain region-specific patterns of astrocyte gene expression (Chai et al., 2017; Batiuk et al., 2020; Zeisel et al., 2018; Bayraktar et al., 2020) may help in identification of molecular drivers underlying such divergent functional and behavioral outcomes.

#### 4.4. Microglia involvement in circadian rhythms

Isolated microglia display intrinsic daily fluctuations of circadian clock genes, *Bmal1*, *Rev-erb*, *Per1*, and *Per2* (Fonken et al., 2016) with inflammatory factors, TNF $\alpha$ , IL-1 $\beta$ , and IL6 oscillating in phase with *Per1* and *Per2* and in anti-phase with *Rev-erb* (Fonken et al., 2015). Dysregulated *Per1* and *Per2* expression in aged animals has been associated with elevated TNF $\alpha$  and IL-1 $\beta$  mRNA expression (Fonken et al., 2016) linking circadian rhythms with evidence of microglial contribution to age-related neurodegeneration (Graykowski and Cudaback, 2021). Moreover, daily microglial cytokine fluctuations may underlie increased sensitivity of neuroinflammatory response to stimulation by lipopolysaccharide during the resting (sleep) phase (Fonken et al., 2015) with the implication that therapeutic efficacy of inflammation-focused treatments may be improved by alignment to daily sleep/wake cycles. The link between microglial immunoreactivity and circadian rhythms is further borne out in studies that reduce or eliminate clock gene expression, although the direction of gene regulation differs between



reports. For example, elevated levels of IL-1 $\beta$  and TNF $\alpha$  have been reported in striatal microglia of *Bmal1* knock-out mice with further elevation after challenge with LPS or treatment with MPTH, a model of Parkinsonian neurodegeneration (Liu et al., 2020). Elevated levels of IL-1 $\beta$ , IL-6 and TNF $\alpha$  have also been reported in the *Rev-erba* knock-out model (Griffin et al., 2019). However, in homogenized brain tissue, *Bmal1* deletion was seen to decrease expression of IL-1 $\beta$  and inflammation-related gene, *Nox2* (Wang et al., 2020), highlighting potential influence of region-specific differences in microglial response to *Bmal1* deletion.

#### 4.5. Microglia involvement in sleep/wake cycles

It is well-documented and, indeed, accepted as common knowledge that disrupted sleep leads to a range of adverse psychological and physiological consequences. Evidence of microglial activation caused by sleep fragmentation (Xie et al., 2020) is consistent with this line of reasoning although it is possible that fragmented sleep may arise secondary to other conditions (e.g., depression, drug use) associated with microglial pathologies. Supporting the former contention, depleting microglia by activating the diphtheria toxin receptor under the *Cx3cr1* promoter in a transgenic rat model, resulted in disrupted expression of clock genes *Per1*, *Per2*, and *Bmal1* in the SCN and the hippocampus, abnormal circadian body temperature, and diurnal rhythm disruptions (Sominsky et al., 2021). Systemic ablation of microglia following PLX-5622 treatment was reported to increase sleep duration and eliminate light phase-dependent difference in synaptic transmission in mouse hippocampal CA1 pyramidal neurons (Corsi et al., 2021). In the healthy brain, microglial morphology fluctuates in rhythm with circadian cycles with longer processes and branching points during wakefulness, phenomena dependent on microglial expression of lysosomal cysteine protease cathepsin S and the adenosine diphosphate, P2Y12 receptors (Nakanishi et al., 2021; Hayashi et al., 2013). Microglial morphology may also be generally sensitive to arousal states with increased arborization of processes and increased process motility observed following anesthesia relative to wakeful conditions (Stowell et al., 2019). Partial activation of microglia during sleep may contribute to synapse elimination, suggesting an intriguing mechanism for the role of sleep in memory consolidation (Choudhury et al., 2020). Indeed, sleep deprivation-induced memory impairments on a Morris water maze could be rescued in rats treated with minocycline (Wadhwa et al., 2017). Minocycline treatment has also been reported to increase slow-wave activity during sleep and improve episodic memory in human subjects (Besedovsky et al., 2017), although others have found sleep disruption by minocycline in both human (Nonaka et al., 1983) and rodent (Wisor and Clegern, 2011; Wisor et al., 2011) studies. Notably, minocycline effects on sleep are unlikely due to its antibiotic activity as ampicillin treatment was not seen to impact sleep homeostasis (Nonaka et al., 1983).

#### 5. Concluding remarks

The emerging picture of structural and functional diversity of glial cells across distinct brain regions suggests co-existence of multiple mechanisms by which glial cells regulate neuronal activity. The diversity of mechanisms likely reflects unique physiological and computational demands placed upon circuits underlying specific behavioral outputs (Table 1). Within brain regions, dynamic glial cell responses to external perturbations, circadian rhythms or other internal changes are echoed by the flexible, adaptive nature of many behaviors. Understanding the functional roles of a molecularly diverse populations of glial cells will advance not only our knowledge of the mechanisms by which these cells control executive function, reward seeking, and circadian function, but will also shed light on phenomenology of a variety of neurodegenerative, substance use, and other disorders. The unique molecular signatures of glial cells make them attractive

candidates for development of new therapeutics. Future studies utilizing single cell transcriptomics may shed light on region- and cell-type selective targets for use in both psychiatric and neurological disorders.

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