

# The Role of Neurosteroids in Mood and Anxiety Disorders: Pharmacological Insights

## Kashia Perm\*

Department of Neurology and Neurosurgery, University Federal de São Paulo, Brazil

# Introduction

Mood and anxiety disorders are among the most prevalent and debilitating mental health conditions, significantly impacting the quality of life and global productivity. Despite advances in psychopharmacology, the treatment of these disorders remains a challenge, with many patients experiencing suboptimal responses or adverse effects from conventional therapies. Emerging evidence suggests that neurosteroids, a class of endogenous steroid molecules synthesized within the brain, play a crucial role in modulating neural activity and emotional regulation [1].

Neurosteroids, such as allopregnanolone and dehydroepiandrosterone (DHEA), act on various receptors, including gamma-aminobutyric acid type A (GABA-A), N-methyl-D-aspartate (NMDA), and sigma-1 receptors, to influence neuroplasticity, stress responses, and emotional behavior. Unlike traditional neurotransmitters, neurosteroids modulate neuronal activity by altering the excitatory and inhibitory balance in the brain, providing a unique mechanism for therapeutic intervention. Dysregulation of neurosteroid levels has been implicated in the pathophysiology of mood and anxiety disorders, highlighting their potential as biomarkers and targets for novel pharmacological treatments [2].

This article delves into the role of neurosteroids in the neurobiology of mood and anxiety disorders and explores their pharmacological applications. Recent advances in the development of synthetic neurosteroids, such as brexanolone and ganaxolone, underscore the therapeutic promise of these molecules. By examining their mechanisms of action, clinical efficacy, and challenges in therapeutic implementation, this discussion aims to provide a comprehensive understanding of neurosteroids as a frontier in the treatment of mood and anxiety disorders [3].

# Discussion

Neurosteroids, which are steroids synthesized in the brain from precursors like cholesterol, have gained increasing recognition for their role in modulating mood and anxiety disorders. These molecules exert their effects primarily through interactions with neuroreceptors, including GABA-A receptors, NMDA receptors, and sigma-1 receptors, which are crucial in regulating neural excitability and synaptic transmission. Dysregulation of neurosteroid levels in key brain regions such as the hippocampus, amygdala, and prefrontal cortex has been linked to various psychiatric conditions, making them a compelling target for therapeutic development [4].

## **Mechanisms of Action**

Neurosteroids influence mood and anxiety by modulating GABA-A receptors, which are integral to inhibitory neurotransmission in the brain. For example, allopregnanolone, one of the most studied neurosteroids, acts as a positive allosteric modulator of GABA-A receptors. This interaction enhances GABAergic activity, resulting in anxiolytic and sedative effects. By facilitating GABA-

induced chloride ion influx, allopregnanolone increases inhibitory neurotransmission, which is thought to contribute to its calming effects on the brain. Similarly, dehydroepiandrosterone (DHEA), another prominent neurosteroid, has been shown to modulate the GABA-A receptor as well as NMDA receptors, which are involved in excitatory neurotransmission. DHEA's role in balancing excitatory and inhibitory signals in the brain makes it a potential modulator of mood and anxiety. The action of neurosteroids on sigma-1 receptors also warrants attention, as these receptors play a role in regulating cellular stress responses and neuroplasticity. The interaction of neurosteroids with sigma-1 receptors has been shown to have neuroprotective effects, potentially influencing the brain's response to chronic stress, which is central to many mood and anxiety disorders [5].

## **Clinical Implications and Therapeutic Potential**

The therapeutic potential of neurosteroids for treating mood and anxiety disorders has been supported by both preclinical and clinical studies. Brexanolone, a synthetic form of allopregnanolone, has been FDA-approved for the treatment of postpartum depression, highlighting the efficacy of neurosteroids in treating mood disorders. This approval underscores the ability of neurosteroids to modulate neurochemical imbalances involved in depression and anxiety. Clinical studies have demonstrated that brexanolone rapidly alleviates depressive symptoms in postpartum women, providing insight into the potential of neurosteroids as fast-acting antidepressants compared to traditional antidepressant drugs, which often take weeks to show significant effects. Similarly, ganaxolone, a synthetic neurosteroid that targets GABA-A receptors, has shown promise in clinical trials for the treatment of generalized anxiety disorder (GAD) and other anxietyrelated conditions. Ganaxolone's ability to modulate GABA-A receptor activity provides a more targeted approach to managing anxiety symptoms, with fewer side effects compared to benzodiazepines, which are commonly prescribed but have the potential for dependence and sedation [6].

#### **Challenges and Limitations**

Despite the promising therapeutic effects of neurosteroids, several challenges remain in their clinical application. One of the key hurdles is the individual variability in neurosteroid synthesis and metabolism,

\*Corresponding author: Kashia Perm, Department of Neurology and Neurosurgery, University Federal de São Paulo, Brazil, E- mail: kashiaperm@ gmail.com

Received: 02-Sep-2024, Manuscript No: wjpt-25-159882, Editor Assigned: 05-Sep-2024, pre QC No: wjpt-25-159882 (PQ), Reviewed: 18-Sep-2024, QC No: wjpt-25-159882, Revised: 25-Sep-2024, Manuscript No: wjpt-25-159882 (R), Published: 30-Sep-2024, DOI: 10.4172/wjpt.1000274

**Citation:** Kashia P (2024) The Role of Neurosteroids in Mood and Anxiety Disorders: Pharmacological Insights. World J Pharmacol Toxicol 7: 274.

**Copyright:** © 2024 Kashia P. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

which can affect both the efficacy and side-effect profile of neurosteroidbased therapies [7]. Factors such as genetic predisposition, hormonal fluctuations, and environmental stressors can lead to significant variability in the response to treatment. Another limitation is the short half-life of many neurosteroids, which necessitates the development of sustained-release formulations to achieve prolonged therapeutic effects. Additionally, while neurosteroids like brexanolone and ganaxolone have shown efficacy in clinical trials, more research is needed to establish their long-term safety profiles, particularly with regard to potential effects on brain function, cognition, and emotional regulation.

Furthermore, the lack of a standardized biomarker to measure neurosteroid levels in the brain poses challenges for diagnosing and monitoring treatment in mood and anxiety disorders. Advancing neuroimaging techniques and the development of biomarkers to assess neurosteroid function could help refine treatment strategies and improve patient outcomes [8].

#### **Future Directions**

As research into neurosteroids continues to evolve, several exciting directions are emerging. First, there is a growing interest in developing novel synthetic neurosteroids with greater specificity for particular GABA-A receptor subtypes or other neurosteroid-sensitive targets. These compounds could offer more precise treatments for mood and anxiety disorders, minimizing side effects while maximizing therapeutic benefits [9]. Additionally, the use of combination therapies that pair neurosteroids with traditional antidepressants or anxiolytics could help enhance the overall effectiveness of treatment while reducing the risk of side effects. The development of personalized medicine approaches, incorporating genetic and biomarker analysis, holds promise for optimizing the use of neurosteroids in the treatment of mood and anxiety disorders. Identifying which patients are most likely to benefit from neurosteroid therapies based on their individual genetic profiles or neurosteroid levels could significantly improve treatment outcomes and reduce the trial-and-error process currently associated with psychiatric drug therapy [10].

#### Conclusion

Neurosteroids represent a promising class of molecules for the treatment of mood and anxiety disorders, offering unique mechanisms

of action that target the brain's balance between inhibitory and excitatory neurotransmission. With growing clinical evidence supporting their efficacy, particularly in fast-acting treatments for depression and anxiety, neurosteroids are poised to become an important component of psychiatric therapeutics. However, challenges such as variability in response, side-effect profiles, and the need for further research into long-term safety remain. Continued advancements in pharmacological development and personalized medicine strategies will be crucial for realizing the full therapeutic potential of neurosteroids in mood and anxiety disorders.

#### References

- Anderson D, Self T, Mellor IR, Goh G, Hill SJ, et al. (2007) Transgenic enrichment of cardiomyocytes from human embryonic stem cells. Mol Ther 15: 2027-2036.
- Bellin M, Casini S, Davis RP, D'Aniello C, Haas J, et al. (2013) Isogenic human pluripotent stem cell pairs reveal the role of a KCNH2 mutation in long-QT syndrome. EMBO J 32: 3161-3175.
- Burridge PW, Keller G, Gold JD, Wu JC (2012) Production of de novo cardiomyocytes: Human pluripotent stem cell differentiation and direct reprogramming. Cell Stem Cell 10: 16-28.
- Cao N, Liu Z, Chen Z, Wang J, Chen T, et al. (2012) Ascorbic acid enhances the cardiac differentiation of induced pluripotent stem cells through promoting the proliferation of cardiac progenitor cells. Cell Res 22: 219-236.
- Vergara XC, Sevilla A, D'Souza SL, Ang YS, Schaniel C, et al. (2010) Patientspecific induced pluripotent stem-cell-derived models of LEOPARD syndrome. Nature 465: 808-812.
- Casimiro MC, Knollmann BC, Ebert SN, Vary JC, Greene AE, et al. (2001) Targeted disruption of the Kcnq1 gene produces a mouse model of Jervell and Lange-Nielsen syndrome. Proc Natl Acad Sci USA 98: 2526-2531.
- Caspi O, Huber I, Gepstein A, Arbel G, Maizels L, et al. (2013) Modeling of arrhythmogenic right ventricular cardiomyopathy with human induced pluripotent stem cells. Circ Cardiovasc Genet 6: 557-568.
- Dubois NC, Craft AM, Sharma P, Elliott DA, Stanley EG, et al. (2011) SIRPA is a specific cell-surface marker for isolating cardiomyocytes derived from human pluripotent stem cells. Nat Biotechnol 29: 1011-1018.
- Egashira T, Yuasa S, Suzuki T, Aizawa Y, Yamakawa H, et al. (2012) Disease characterization using LQTS-specific induced pluripotent stem cells. Cardiovasc Res 95: 419-429.
- Engler AJ, Carag-Krieger C, Johnson CP, Raab M, Tang HY, et al. (2008) Embryonic cardiomyocytes beat best on a matrix with heart-like elasticity: Scarlike rigidity inhibits beating. J Cell Sci 121: 3794-3802.

#### Page 2 of 2