Time to abolish the Forced Swim Test in Depression Research?

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Abstract

The forced swim test (FST) is a controversial rodent test that has been used for decades, mainly in depression studies. The severity of the procedure has always made it ethically questionable, but only recently has its validity been questioned. In this paper we contribute new data to this debate. We identified in PubMed and Scopus original research papers related to Major Depressive Disorder (MDD), using rats as models. We determined which studies used the FST and which did not, and compared the citations received by both groups, within subsequent human medical papers, using the cited reference search facility within Scopus and Web of Science. The results show that the number of citations received by both groups was very low, but in the papers describing the FST data the median citation number was zero. Citation analysis indicates that the FST is not contributing significantly to the understanding or cure of MDD. We briefly review other approaches that overcome the ethical limitations of FST and which might also surpass its efficacy.

Keywords: depression, forced swim test, rat, alternatives to animal use

Introduction

The forced swim test (FST) is a rodent behavioural test developed by Porsolt and colleagues in 1977 presented as a test to evaluate depression and screen for antidepressants [1]. The rationale behind this test is that when placing an animal in a vessel filled with water, it will first try to escape but eventually give up and exhibit immobility that may be a measure of behavioural despair [2].

The FST is widely used as a tool to conduct basic biomedical research, mostly into depression (e.g. [3]), but also for other disorders such as Attention Deficit Hyperactivity Disorder (ADHD) [4] or anxiety disorder [5].

Over the years, the main use for the FST has been to screen for antidepressant properties of compounds. The merits of this protocol are disputed: a relatively recent meta-analysis on 50 antidepressant studies showed that all drugs tested reduce immobility in the FST [6]. However another recent retrospective study on how many possible antidepressants tested via the FST successfully translated into human clinical trials showed that out of 47 compounds, not even one was considered safe and/or effective as a human antidepressant [7].

The FST attracted public attention recently, after *Nature* published a paper exposing the controversies surrounding the efficacy of this test [8]. Most authors agree that one cannot conclude that a passive rat in the FST is a depressed rat. Some emphasize that the FST can only be used as a measure of active versus passive behaviours [9]. Others suggest that other variables such as water temperature [10] or previous knowledge [11] may also influence results and should be controlled.

The claims about the necessity of continuing to use the FST for the study of depression, given the availability of alternate tests, are theoretical at best and lack empirical evidence. We hope to partly fill that gap with the present study, to enable more evidence-based discussions about the utility of the FST.

If FST studies are contributing meaningfully to current knowledge of depression in humans, then our working hypothesis is that when this protocol is used to study major depressive disorder (MDD - the most severe depression type), the resultant published papers should be well cited by human research papers focused on MDD. To investigate whether this is actually true, we conducted a citation analysis on papers using rats as models within MDD research. We compared the number of citations received by papers using the FST to those using other test protocols.

Of course, citation frequencies do not definitively indicate the benefits or lack thereof of scientific research. Uncited studies may also contribute to the advancement of biomedical knowledge, through direct transfer of results between scientists. And citation rates may also be affected by factors such as article length, number of authors, their country and university of affiliation [12]. Despite their limitations however, citation frequencies do normally provide reasonably objective approximation of the importance of research results within a field. Research that makes a significant contribution—such as by confirming or refuting important hypotheses—is likely to be cited by subsequent papers. Research that is inconclusive or lacking in significance is much less likely to be cited.

Methods

We performed our citation analysis between January and August of 2019. We searched PubMed and SCOPUS for publications using rat models to explore MDD's traits and pathogenesis. We searched PubMed using Medical Subject Heading (MeSH) search terms: "Depressive Disorder, Major" AND "rat" OR "rodent". MeSH terms are a comprehensive list of key terms made available by PubMed, which are designed to identify all relevant studies in an area [13]. Hence, searching for "Major Depressive Disorder" retrieves other nomenclatures for the same disorder, such as melancholia. Likewise, the search term "rat" retrieves papers using all rat species. Using PubMed filters we excluded review articles ("review", "systematic review", "meta-analysis", "bibliography") as well as opinion articles ("biography", "auto-biography", "comment", "editorial", "interview"). Since Scopus does not have the MeSH term tool we used the search terms "Major depressive disorder" AND ("rat" OR "rattus") in the search fields. We included journal papers, books, research reports and conference proceedings written in English or Portuguese, which are within our linguistic fluencies. We restricted our search to publications prior to December 31, 2013, to allow adequate time for citations to occur. We then excluded all papers reporting both animal and human data, so that we could more accurately compare the contribution of papers using the FST with the citations of other papers presenting animal data.

The retrieved papers were divided into papers that used the FST, and those using other protocols. We conducted a citation analysis on both groups, using the cited reference

search facility within Scopus and Web of Science. More specifically we determined the number of citations these papers received by human medical papers focused on MDD.

We modelled the number of citations received by papers as the response in a Poisson GLM with a single binary variable being method ("FST" or "other"). A significant coefficient (significance level 0.01) is interpreted as a significant difference in the number of citations across methods.

Results

We located 178 papers reporting original data obtained from rats used as models for human MDD. Of those, 43 used the the FST, and 135 did not.

In both cases, citations by human medical papers on MDD were low: almost half of the papers were never cited in subsequent human papers on MDD.

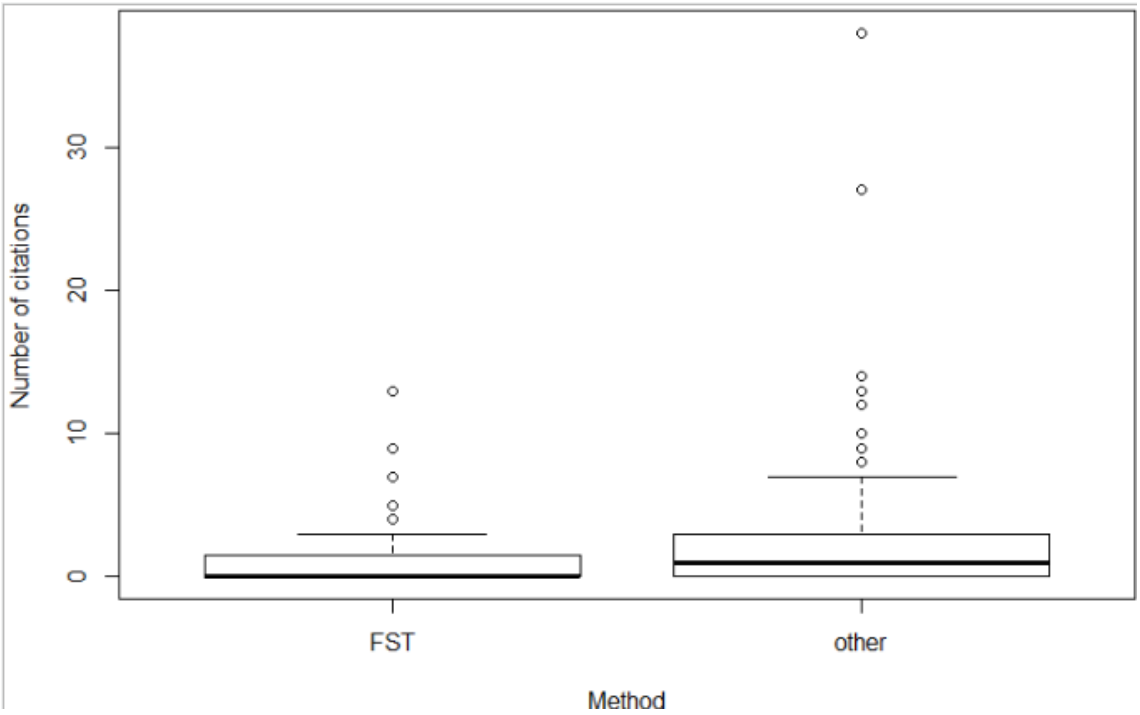

Figure 1 – citations received by papers using the FST, and other test methods, respectively

The mean number of citations by the human MDD literature for papers using the FST was 1.4, whilst for papers using other test methods, this was 2.4. Remarkably, the median number of citations was 0 for the former, while it reached 1 for the latter. This ironically means that if you produce a paper using FST the probability of it never being cited by the human MDD literature is higher than the probability of it being cited.

Discussion

Our results show that papers that submitted rats to the FST are generally not cited by human papers on MDD: the median number of citations was 0, while for papers using other test methods, the median number of citations was 1.

Even though citation analysis does not conclusively indicate the value of research for the reasons described previously, our results strongly indicate that current reliance on the FST not only consumes valuable scientific resources, with a low likelihood of benefit for the understanding and ultimately the cure of human MDD, but it also submits animals to stressful procedures with low prospects of any benefit. This contravenes most applicable ethical review guidelines, including current European directive 2010/63/EU on the protection of animals used in scientific procedures.

Animal-free, human biology-based approaches look more promising when studying MDD and other neuropsychiatric disorders. These include the use of patient-specific, induced pluripotent stem cells (iPSC)-based tissue cultures [14]; [15]; [16] [17], neuroimaging to identify relevant biomarkers (neuromarkers) and employ them in clinical assessments [18] and *in silico* modeling of psychiatric disorders, Computational Psychiatry, which describes in computational terms the relationship between the neurobiology of the brain, its environment and mental symptoms [19]. A major obstacle of brain disorders is that brain tissue of living patients cannot be biopsied, and limited access to the diseased tissues makes it difficult to research disease etiology and to find effective treatments. In the past decade however, the iPSC technology, first developed by [20] has been used to further research into a number of neuropsychiatric illnesses such as schizophrenia (e.g., [21], [22]bipolar disorder [23] and depression [15] [17]. Disrupted serotonergic neurotransmission is expected to be involved in MDD. Human serotonergic neurons can be differentiated from fibroblasts [15] or directly from fibroblasts [17]. Selective serotonin reuptake inhibitors (SSRIs) are the first treatment option for MDD but not all patients respond to this treatment. Thus, [24] used this new patient-specific *in vitro* model system to investigate the SSRI resistance of some patients. Their results indicate that altered serotonergic wiring may give rise to maladaptive circuitry which contributes to selective serotonin reuptake inhibitors resistance in MDD patients [24]. Non-invasive neuroimaging has been used to identify relevant neuromarkers, that represent risk factors or indicators of disease progression or of treatment-associated changes for the various psychiatric illnesses. This approach demands the use of machine

learning analysis and the adoption of regression-type approaches [18]. Computational models of cognition are promising new tools to make conclusions on the state of the environment and to gage future actions [19]. Computational Psychiatry has been described as a bridge from neuroscience to clinical applications ([25]. With the availability of high-capacity computing platforms and information generated by basic neuroscience research, including the promising use of patient-derived cell models, this human biologically based computational framework is a powerful research tool [26]. Neuromarkers can be identified and validated more easily using *in silico* modeling, and novel treatment targets relevant to prevent, treat, and recover from psychiatric disorders can be determined. These human biology-based models demonstrate a clear advantage to the traditional animal models as they recapitulate key aspects of the human disease, help understand the underlying disease mechanisms and thus, can assist in finding new, efficient treatments.

We would also like to stress the critical contribution of non-invasive studies with humans. Randomized controlled trials (RCTs), observational longitudinal studies with human patients, studies comparing effectiveness of different courses of treatment (for a review on different kinds of human studies see, for, example [27] are crucial to advance our understanding of the aetiology, pathogenesis and treatment of these disorders.

Based on these results, we suggest a ban on the use of the FST. If it is of such limited use for its main purpose – studies on depression – we cannot assume it provides significant benefit for the study and treatment of other human disorders. It would be interesting to conduct a wider citation analysis of published papers utilising the FST, to determine whether similar results would occur for other human disorders.

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