
REVIEW

An Overview of the Methamphetamine Effect on Male Sexual Behavior and Reproductive System

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Summary

Drug addiction and its effect on the behavior and development of children has become a serious problem in our society. Methamphetamine (MA) is one of the most abused psychostimulants in the Czech Republic, and its abuse is rising worldwide. Previous studies have demonstrated the adverse long-term effects of maternal drug abuse on rat offspring. However, the father's contribution as a parent and donor of half of the genetic information is unclear. Previous studies of other psychostimulant drugs indicate that long-term application of MA to adult male rats may induce changes in their reproductive system and lead to changes in rat pup functional and behavioral development. Therefore, the present review aimed to investigate the effect of MA administration on reproductive toxicity and sexual behavior of adult male rats, as well as the impact of paternal MA exposure on behavioral development and locomotor activity in rat offspring.

Key words

Drug addiction • Methamphetamine abuse • Paternal exposure • Behavioral tests • Testosterone • Spermatogenesis

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Introduction

Methamphetamine (MA) is a psychotropic stimulant that affects the body on a biological, behavioral, and psychological level. In many countries, it is one of the most widely used illicit drugs.

Psychostimulant drugs such as MA activate the dopaminergic and serotonergic pathways of the central nervous system (CNS), which are mainly associated with reward circuits, affective states, sexual behavior, and also in control of motor function and cognition [1]. In humans, MA induces feelings of happiness and pleasure, suppresses anxiety and depression, increases concentration, reduces appetite, and promotes weight loss [2].

Controlling MA abuse has been a significant change over the decades. It is known to be a powerfully addictive drug, and due to its low price and relatively simple production, it has become increasingly popular in our society. The stable crystallized form of the drug was first synthesized in Japan in 1919 by Ogata, which provides the basis for producing the drug on a larger scale [3]. In the 1950s, MA was legally administered to treat depression, and athletes used MA as a permitted stimulant. After its massive expansion in the 1970s and recognition of severe side effects, its production and use were declared illegal [4,5]. Worldwide, the largest group of abusers is concentrated in East and Southeast Asia, where most of the global MA production is located. However, the annual report of the EMCDDA in 2019 considered MA the 4th most abused illegal drug in the Czech Republic after cannabinoids, ecstasy, and hallucinogenic fungus (psilocybin).

Our laboratory has been studying the effect of MA on the mother and her offspring in an animal model since 2002 [6]. Psychostimulants affect the behavior of addicts, increase aggression and disrupt social and maternal behavior [7,8]. These facts highlight the very serious worldwide problem of women abusing MA during pregnancy [9]. While MA abuse has apparent advantages

for drug-addicted pregnant women compared to other drugs, such as helping to maintain lower body weight, reducing appetite, and increasing energy. Prenatal MA exposure causes many negative impacts, because it is a lipophilic molecule that rapidly penetrates membrane structures including placenta, and enter the breast milk of mothers [10]. This may seriously affect the prenatal development of the fetus or postnatal development of the newborn during lactation, respectively [11]. Maternal MA exposure has been shown to cause morphological changes in the brain and altered brain metabolism [12,13]. Previous studies showed that MA administration to pregnant rats impairs postnatal sensorimotor development of pups during the pre-weaning period [14,15,16], affects learning abilities [17], and leads to a higher susceptibility to drug sensitization in adulthood [18].

Previous animal studies demonstrated that prenatal exposure to MA impairs cognition [19,20,21], evokes anxiety-like behavior in offspring [22,23] and affects pain sensitivity later in life [24]. Furthermore, prenatal MA exposure is also associated with increased physiological stress, decreased arousal, and poor quality of movement during the first five days of life [25,26]. Maternal MA abuse has also been shown to affect stress responses in adult animals [27]. Alterations in behavioral patterns manifested in social behavior during adolescence [16] and in aggressive and sexual behavior during adulthood [28]. Previous studies also demonstrated that the administration of MA during pregnancy attenuates the maternal behavior of rat mothers [29,30].

In the general population, however, MA abuse is frequent in both female and male populations, primarily because of its stimulant effects and easy availability. Currently, most MA users are reproductive-age men between 18 and 34 years [31]. While the effect of MA on mothers and offspring has been the subject of detailed research over the past few decades, the effect of MA on fathers and offspring has received far less attention. Therefore, our review aimed to investigate the impact of paternal MA abuse on the behavior of addicted male rats and their offspring.

In our review, we focused mainly on methamphetamine drug addiction and its influence on sexual activity and reproductive toxicity in males. Literature research was based on main keywords: sexual activity, methamphetamine exposure, drug addiction, reproductive toxicity. Our literature sources are from online databases of science journals and biomedical articles. We have drawn from scientific papers published

since 1972 until recently published articles.

Effect of MA exposure on male rats

Effect of MA exposure on locomotor activity in male rats

Previous studies found that psychostimulants, such as MA, increase locomotor activity and exploration in unknown environment [33,34,35]. Moreover, our findings confirmed that acute MA (1 mg/kg) exposure significantly increased overall activity (increased locomotion, rearing, grooming, speed average, and distance traveled) and decreased immobility in adult male rats [36]. The increased locomotor activity seen in MA-exposed rats is mainly associated with increased levels of dopamine, especially in the nucleus accumbens [37]. Dopaminergic neurotransmission in the nucleus accumbens and the caudate nucleus mediates MA-induced hyperlocomotion and stereotypy, respectively [38,39,40]. Experimental animal models demonstrate that the effect of MA exposure on locomotor activity is dose-dependent [41]. Acute MA administration increases locomotor activity when administered at lower doses (1 mg/kg) and elicits stereotypic behavior when administered at higher doses (5 mg/kg) [42,43]. In addition, female rats have been shown to be more sensitive to the locomotor activating effect of i.p. MA administration (0.1-3.0 mg/kg) than male rats [44]. Interestingly, previous studies indicate that increased sensitivity to MA exposure is age-related. A study by Zakharova *et al.* demonstrated that daily administration of MA increased locomotor activity in both adolescent and adult rats, with a more significant effect seen in adults [45]. In addition, our previous study showed an interaction between chronic 30-day MA exposure, acute application and time the way that acute MA application increased locomotor activity more in animals treated 30-days with saline than in animals with MA chronic treatment within the 20th and 50th minute of measure [36]. This finding indicates that chronic MA administration decreased the baseline level of locomotor activity in male rats compared to control saline-treated group (SA). Previous study by Segal and Mandell demonstrated that the first amphetamine administration significantly increased locomotor activity in rats; however, this was gradually replaced by progressive increase in stereotypy and decrease in locomotion during 36 days of drug exposure [46]. Moreover, the same impact on locomotor activity has been reported after long-term MA administration [47].

According to these findings, we assume that long-term MA administration impairs locomotor activity in rodents.

Effect of drugs on the sexual behavior of rats

The mechanism of action for MA is based on the release of neurotransmitters, such as dopamine (DA), serotonin (5HT), and noradrenaline (NA) by the central nervous system (CNS) and by blockade of their reuptake from synapses and into synaptic vessels [48,49]. DA in the nigrostriatal tract influences motor activity, in the mesolimbic tract it activates behaviors including copulation, and in the medial preoptic area, DA controls genital reflexes, copulatory patterns, and sexual motivation. In addition, 5HT positively or negatively affects copulatory patterns such as erection and ejaculation by targeting a specific subtype of the 5HT receptors [50]. According to these studies, DA and 5HT strongly influence sexual behavior. Therefore, there is a possibility that MA could mediate sexual activities in drug-exposed males. Some MA users report experiencing enhanced sexual pleasure, sexual confidence, and sexual performance compared to when they were not using MA [51]. A previous study by Winland *et al.* showed that MA enhances sexual motivation in female rats, i.e. MA-treated female rats were less discriminating about how and with whom they mated and were more interested in sex than SA-treated female rats [52]. A study by Frohmader *et al.* demonstrated that MA administration in male rats activates neurons in the brain's mesolimbic system, which regulates sexual behavior [53]. As for amphetamines, experimental animal models have demonstrated that repeated exposure to amphetamine stimulates sexual behavior in naïve male rats regardless of the environment in which the experiment was conducted [54].

MA abuse is commonly associated with sexually compulsive behavior [55] and increased sexual risk behavior in humans [53]. An animal study by Bolin and Akins demonstrates that chronic pre-exposure to MA impairs sexual motivation but not sexual performance [56]. However, MA is also associated with decreased sexual function, as chronic MA abuse results in an inability to reach full erection, delayed ejaculation, and orgasm [53]. A study by Kuiper *et al.* reports that MA administration leads to maladaptive sexual behavior in rats, which was associated with alterations in neural activation of the brain [57]. Studies by Frohmader *et al.* found that MA administration in male rats impairs sexual motivation and performance in a dose-dependent manner

[53]. Low doses of MA did not disrupt sexual functions, and acute MA administration failed to impair sexual interest and activity.

Moreover, they [58] found that MA pretreatment did not affect the expression of sexual behavior; however, the association between MA and mating was essential for the development of compulsive sexual behavior and changes in sex and drug reward systems. Despite the above-cited works, studies using chronic MA exposure to examine male rodent sexual behavior are still lacking. Our previous results also showed no effect of MA on sexual activity ($n[MA]=8$, $n[SA]=8$) and correlated with previous findings that MA exposure does not affect sexual motivation and performance in pre-treated male rats [36].

Effect of drug exposure on spermatogenesis

Rats are considered pubertal until 50 days of age, when spermatozoa are first found in the tail of the epididymis. Sperm production increases up to age 75 days, and testicular weight increases until 100 days of age. Sperm reserves in the tail of the epididymis are not maximal until 100 days of age. Therefore, Wistar rats should not be considered sexually mature until 100 days. Sexually mature rats have testes weighing 3-7 g, and the average sperm concentration ranged from $152.5-230.0 \times 10^7$ spermatozoa/ml [59].

Drugs such as cocaine, amphetamines, and cannabinoids may adversely affect the quality and quantity of sperm and result in infertility of drug users [60]. Previous animal studies have demonstrated the adverse effect of cocaine abuse on reproduction and spermatogenesis in males [61]. A study by George *et al.* also found that the significant toxic effect of cocaine on spermatogenesis is attributed to the ischemic effect of cocaine. Cocaine, which enhances noradrenaline and adrenaline release, induces intense vasoconstriction. Moreover, it has been demonstrated that chronic cocaine administration increases germ cell apoptosis [62]. Other studies have shown the negative impact of cocaine and its metabolites on Sertoli cell function in male rats [63]. Cocaine-induced apoptosis in sperm cells is significantly increased 15 days after the first administration of the drug [62], reaches a maximum 30 days after application, and persists until day 90. It has been known since the 1980s that ethanol and acetaldehyde (the first ethanol metabolite) are potent Leydig cell toxins [64]. Moreover, it has been experimentally determined that alcohol abuse reduces cytosine methyltransferase mRNA levels in

sperm cells of addicted males (fathers), leading to spermatogenesis malfunctions [65]. Opioids are also known to impair spermatogenesis. Rats chronically treated with tramadol (a commonly prescribed effective opiate painkiller) exhibited degenerative histological changes in the seminiferous tubules, the Sertoli cells, and the Leydig cells [66]. It was shown that human spermatozoa express μ -, δ -, and κ -opioid receptors located on the head, middle region, and tail of sperm [67].

Other addictive substances such as nicotine, cannabis, and amphetamines also alter spermatogenesis by inducing oxidative stress and subsequent apoptosis in testicular tissue. The study by Condorelli *et al.* showed that nicotine is responsible for all the negative impacts of cigarette smoke on sperm [68]. Chronic, intensive marijuana usage has been associated with oligospermia in 35 % of adult men who provided semen samples [69]. Human spermatozoa express cannabinoid 1 (CB1) receptors, and *in vitro* studies exposing human spermatozoa to marijuana extracts have demonstrated decreased sperm motility, viability, and function [70,71,72]. Daily administration of synthetic THC derivatives leads to a significant reduction in sperm count and daily sperm production and a reduction in the number of Sertoli cells in rats [73].

A previous study also demonstrated that MA administration significantly decreases cell proliferation and increases apoptosis in rat spermatogonia and primary spermatocytes [74]. A study by Saberi *et al.* demonstrated the adverse effects of MA exposure (after 7 and 14 days) on rat testes structure and spermatogenesis [75]. A study by Montagnini *et al.* demonstrated that repeated administration of methylphenidate (Ritalin) during childhood to early adulthood interfered with testicular functions in adult rats [76]. Moreover, a study by Gonzalez *et al.* showed the potential role of the local dopaminergic system in psychostimulant-induced testicular pathology [77]. The above studies show that drug exposure may induce reduced sperm cell production and leads to changes in sexual behavior. Several studies have reported that MA administration induces apoptosis of spermatogenic cells, lower sperm quality, as well as damage to Leydig cells and their functions [78,79,80]. Recent animal studies indicate that MA exposure leads to changes in GABAergic activity, which is involved in the proliferation of Leydig cells, testosterone production, and spermatogenesis [80]. A study by Saberi *et al.* demonstrated that MA abuse causes a significant decrease

in the number of seminiferous tubule cells and lower sperm production in the MA-treated group of rats compared to controls [75]. Additionally, MA abuse in a dose-dependent manner showed detrimental effects on male reproductive functions, including impaired sperm parameters and sperm chromatin/DNA integrity [81]. Our unpublished data examined the effect of the long-term abuse of MA on rat spermatogenesis. The total sperm amount per milliliter (ml) was evaluated by using a bright field microscope and counted in a Bürker hemocytometer (Fig. 1).

The analysis of spermatogenesis in adult male rats exposed to MA did not show any significant differences in sperm production compared to control group. However, our results indicate that both treated groups had lower sperm levels compared to physiological level of non-treated healthy male rats (Fig. 2). The average amount of spermatozoa/ml in MA-treated group was $125.5 \pm 11.32 \times 10^7/\text{ml}$ (Mean \pm SEM) and in SA-treated group was $132.7 \pm 5.432 \times 10^7/\text{ml}$ (Mean \pm SEM). If we found reduced sperm concentration only in the MA group, we could argue that this was a drug effect; however, since the same reduction was also seen in the control group exposed to SA injections, then the explanation may be due to the effect of stress induced by repeated injections.

In animals, social stress, high altitude, surgery or injections, and immobilization stress were shown to affect body weight, testosterone levels, and copulatory behavior with variable effects on testicular morphology [82]. In addition, a study by Drude *et al.* showed that mice that received a single intraperitoneal injection of harmless saline had an increased corticoid stress response to a second saline injection [83]. Thus, we suggest that the same effect occurred in our experiment too.

Effect of drug exposure on testosterone levels in males

Testosterone is the primary androgenic steroid hormone. The hypothalamic-pituitary-gonadal axis regulates sexual behavior in male rats. Gonadotropin-releasing hormone (GnRH) released from the hypothalamus initiates the release of luteinizing hormone (LH), which in turn stimulates the release of testosterone from the testes [84,85]. Male rats reflexively release testosterone when they smell or mate (ejaculatory release) with a novel receptive female. LH is elevated 10 min after exposure to a female and is followed by a release of

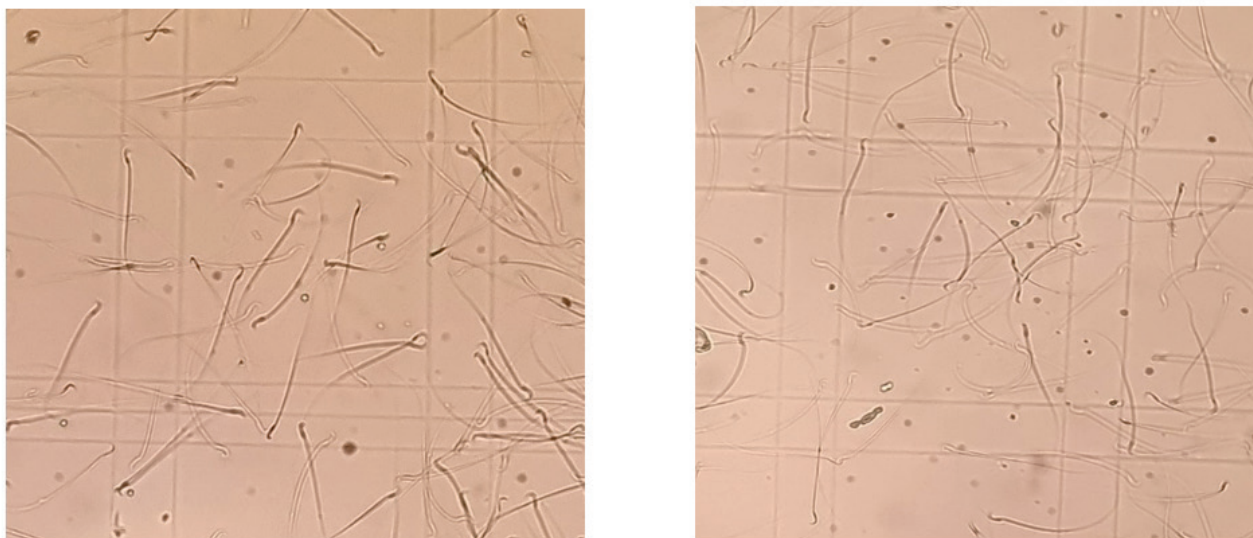
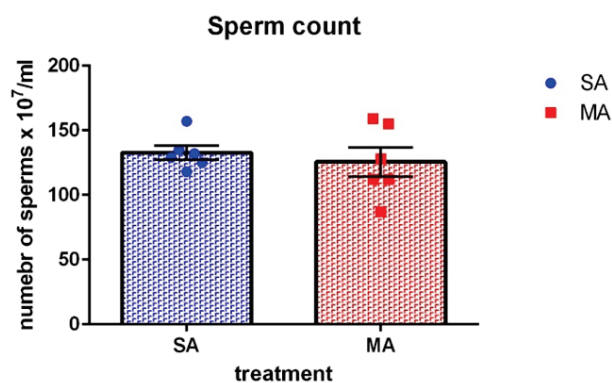


Fig. 1. Sperm count in light microscope MA-treated group (left) SA-treated group (right).



NUMBER OF COUNTED SPERMS [$\times 10^7/\text{ml}$]	
SA	MA
118	87
135	112
132	112
125	128
129	155
157	159

Fig. 2. Chronic MA administration did not influence the sperm production of MA-exposed males compared to saline controls. MA=methamphetamine, SA=saline. Values are mean \pm SEM (n[MA]=6, n[SA]=6).

testosterone about 30 min after exposure [84,85,86]. GnRH secretion in adulthood is pulsatile, with the highest testosterone peaks during the early morning hours [87]. Although, the circulating serum testosterone concentration decreases with age, mainly due to the attrition of Leydig cells and declined secretion of

hypothalamic GnRH [88,89].

Testosterone and its metabolites initiate male sexual behavior by acting on key brain regions. Aromatization of testosterone to estradiol in the medial preoptic area of the hypothalamus is essential for initiating copulation, while dihydrotestosterone, another testosterone metabolite, is crucial for controlling genital reflexes [84,90].

Plasma testosterone concentrations in adult male rats and female rats during estrus and proestrus were determined to be 5.71 ± 0.84 , 1.24 ± 0.29 , and 0.80 ± 0.36 ng/ml, respectively [91]. A study by Lee *et al.* found a rise in testosterone levels from PD 25 that persisted until sexual maturity [92]. Moreover, a stepwise rise occurred to reach levels in excess of 230 ng/100 ml between PD 70-80. Another study found that plasma levels varied significantly during the day, with the acrophase occurring between 9.00-13.00 h [93]. The plasma levels of testosterone are elevated during sexual intercourse. However, an animal study by Shulman and Spritzer concluded that when male rats have daily sexual interactions, sexual behavior tends to show cyclic changes, and testosterone levels are significantly elevated only on the first day of sexual interaction [84].

Alcohol, opioids, and anabolic steroids can reduce testosterone production in males, thus interfering with testicular and/or hypothalamic-pituitary function [94]. Van Thiel *et al.* showed that alcohol-abusing rats had testosterone levels reduced by 50 % compared to the control group [64]. Moreover, *in vitro* studies demonstrated that rat testes perfused with ethanol and acetaldehyde showed reduced production and secretion of

testosterone. Decreased testosterone level in heavy drinkers is linked to reduced Leydig cell production and increased androgen metabolism. Alcohol also induces the aromatase enzyme that catalyzes the conversion of testosterone in estradiol [95]. Opioid-induced androgen deficiency (OPIAD) is a well-known syndrome characterized by decreased testosterone levels, reduced libido and muscle mass, fatigue, and osteopenia [96]. However, the inhibitory effects of opioid drugs on the hypothalamic–pituitary–testicular axis and, thus, on testosterone production, have been described for over 40 years [97,94]. Anabolic-androgenic steroids are drugs frequently used by athletes, amateur athletes, and bodybuilders to improve sports performance [94]. Anabolic-androgenic steroids suppress gonadotropin release from the pituitary gland by a negative feedback mechanism that results in down-regulation of gonadotropins and decreased secretion of testosterone [98].

It has also been demonstrated that nicotine and its metabolites inhibit multiple steps in testosterone biosynthesis [94]. Chronic administration of nicotine in male rats leads to a reduction in testosterone levels [99]. The decreased testosterone levels seem to return to physiological levels after nicotine cessation, indicating the potentially reversible effects of nicotine on Leydig cell function [100]. Chronic, intensive marijuana usage in humans has been associated with decreased serum testosterone levels in a dose-dependent manner [69].

However, a recent population study on 1500 men indicates no differences in serum testosterone levels among marijuana users compared to non-users [101]. Surprisingly, the chronic administration of cocaine to rats (15 mg/kg for 100 days) did not induce changes in testosterone levels [61]. However, in another study, male Wistar rats receiving low doses, i.p. injections of cocaine, showed an increase in testosterone concentration, but the same effect was not demonstrated with high doses of cocaine [102].

In vivo and *in vitro* studies have demonstrated that amphetamine exposure decreases testosterone concentrations [103]. As a matter of MA, the results are very inconsistent. Animal study by Lin *et al.* showed that chronic administration of MA for 15, 30, 60, and 90 days significantly decreased total testosterone secretion compared to the control treatment [79]. Also, other researchers reported that illicit use of MA decreased plasma testosterone concentrations [78]. However, there are also studies showing the opposite. A study by Heidari-Rarani *et al.* showed that 14 days of

MA increased serum testosterone levels in adult male rats [104]. Furthermore, a study by Yamamoto *et al.* demonstrated that serum testosterone concentrations showed a biphasic change after MA exposure in mice [105]. An initial significant decrease was followed by an increase, which 48 h after drug injection showed testosterone levels higher than the control group. In contrast with previous studies, our unpublished data demonstrated that chronic MA exposure did not influence testosterone concentrations compared to the saline controls. Furthermore, it is of interest that our raw testosterone data showed differences in measured values of testosterone concentration among the same treatment group. We suggest that dominance-subordinate relationships between male rats could influence these differences. During the MA application period (30 days), male rats were housed 2 per cage. It has been demonstrated that adult male rats living together form dominance relationships, with one dominant and the others adopting subordinate roles [106]. Animal studies on rats demonstrate that testosterone plays a primary role in intermale social aggression and dominant behavior and that castration, thus the loss of testosterone, is typically accompanied by a loss of social dominance. Therefore, we suggest that the variety of measured testosterone levels shown in Figure 3 could have been influenced by animal hierarchy [107].

The above-mentioned studies present very controversial findings about the effect of drugs administered to male rats and the effect on their reproductive system and sexual behavior. We suggest that more detailed studies are needed to thoroughly investigate dose-dependent responses and other factors that may play a role in the possible effect of MA on male reproductive performance. An overview of the studies investigating the effect of drugs on male rats is summarized in Table 1.

Effect of paternal drug exposure on offspring

There are only few studies examining the impact of paternal drug exposure on rat pup development and behavior in adulthood. A study by Abel *et al.* showed that paternal cocaine administration leads to increased hyperactivity and behavioral changes in rat pups [108]. Other studies report that paternal cocaine exposure affects the birth weight of offspring, with birth weights being decreased, increased, or unchanged [108,109,61,110]. Relative to neurocognitive outcomes, a study by Le *et al.* showed that the offspring of addicted male rats had

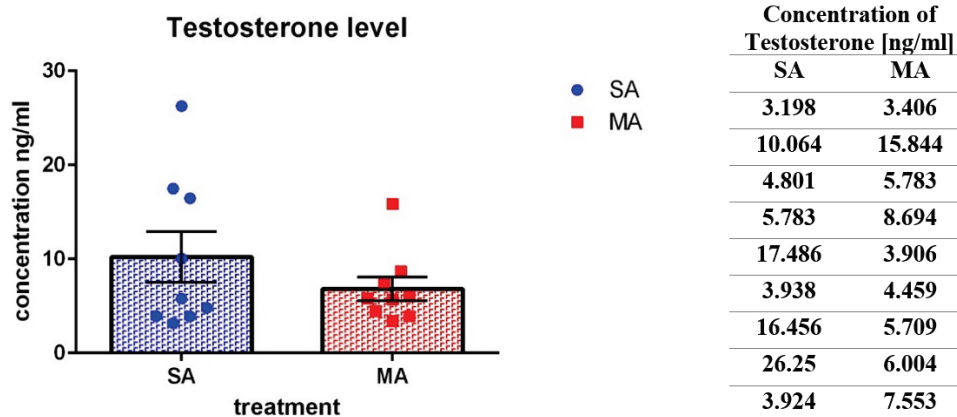


Fig. 3. Chronic MA exposure did not result into significant changes of testosterone levels in adult male rats. MA=methamphetamine, SA=saline. Values are mean \pm SEM (n[MA]=9, n[SA]=9).

Table 1. Effect of drugs on male rats.

Effect of drugs on male rats	Treatment	Number of individuals	Effect of drug	Publication
Locomotor activity	Methamphetamine	[MA]=8, [SA]=8	Acute MA \uparrow Chronic MA \downarrow	Mihalčíková <i>et al.</i>
	Amphetamine	[AMP]=8, [SA]=8	Acute AMP \uparrow Chronic AMP \downarrow	Segal and Mandell
Sexual behavior	Methamphetamine	[MA]=8, [SA]=8	No effect	Mihalčíková <i>et al.</i>
	Methamphetamine	[MA]=8, [SA]=8	No effect	Frohman <i>et al.</i>
Spermatogenesis	Methamphetamine	[MA]=27, [SA]=26	\downarrow	Kuiper <i>et al.</i>
	Cocaine	[COC]=33, [SA]=16	\downarrow	George <i>et al.</i>
	Alcohol	n=13	\downarrow	Bielawski <i>et al.</i>
	Opioids	n=15	\downarrow	Abdellatif <i>et al.</i>
	Nicotine	n=10	\downarrow	Condorelli <i>et al.</i>
	THC	n=6	\downarrow	Lewis <i>et al.</i>
	Methamphetamine	[MA]=6, [SA]=6	No effect	Mihalčíková <i>et al.</i>
Testosterone	Methamphetamine	[MA]=7, [SA]=7	\downarrow	Alavi <i>et al.</i>
	Methamphetamine	[MA]=20, [SA]=20	\downarrow	Saberi <i>et al.</i>
	Alcohol	n=40	\downarrow	Van Thiel <i>et al.</i>
	Amphetamine	n=7	\downarrow	Tsai <i>et al.</i>
	Marijuana	n=20	\downarrow	Kolodny <i>et al.</i>
	Methamphetamine	[MA]=32, [SA]=32	\downarrow	Lin <i>et al.</i>
	Methamphetamine	[MA]=9, [SA]=9	No effect	Mihalčíková <i>et al.</i>

increased cocaine self-administration [111]. Studies by Bielawski *et al.* found that paternal alcohol abuse results in offspring malformations and reduced fetal weight [65]. Another study by Dalterio *et al.* showed that paternal THC (delta-9-tetrahydrocannabinol) exposure significantly impairs the development of rat pups [112]. On the other hand, a study by Levin *et al.* demonstrated that paternal THC exposure does not significantly impact the clinical

health of rat offspring, including litter size, sex ratio, pup birth weight, survival, and growth. However, it results in neurocognitive alterations with increased habituations of locomotor activity and decreased attentional function of offspring in adulthood [113].

The above few studies present very conflicting findings about the effect of different drugs administered to male rats and the effect on their offspring. However, what

is the effect of MA is not yet known. Our recent study was the first examining the effect of paternal MA exposure on development and behavior of rat offspring [114].

Behavioral experiments during development

Our recent data did not show any significant effects of paternal MA exposure on sensorimotor development of pups [114] indicating that paternal MA administration does not result in such a severe impairment of offspring development compared to paternal cocaine and cannabinoid exposure as shown in studies of Abel *et al.*, George *et al.*, Dalterio *et al.* [108,61,112]. Moreover, these data showing no paternal MA effect are in contrast to the effects induced by maternal MA administration, which showed that after maternal MA exposure, the surface righting reflex (on PD 1-5) was slowed [115,116], the Negative geotaxis on PD 9 was unchanged [116], and performance on the Rotarod, but not Bar holding, was impaired on PD 23. Thus, it seems paternal MA exposure does not influence the sensorimotor development of rat pups, as does maternal MA exposure. The explanation may be that while maternal exposure can directly affect the development of pups (since MA crosses the placenta and enters breast milk during lactation) [10,32], paternal exposure would need to change the genetics of the pup, which does not appear to occur.

Effect of paternal drug exposure on the locomotor activity of offspring

Regarding the effect of paternal drug exposure on

locomotor activity of their offspring, previous animal studies are inconsistent in their outcomes. A study by Killinger *et al.* showed that spontaneous locomotor activity after paternal cocaine exposure was unaffected [110]. A study by Fisher *et al.* reported increased locomotor activity after paternal cocaine exposure [109], and a study by Levin *et al.* showed that paternal THC treatment does not affect the spontaneous locomotion of offspring [113]. However, it increases habituation during locomotor activity. In addition, another study with paternal alcohol exposure showed that the locomotor activity of rat offspring increased by 30 % compared to controls [117]. The inconsistent outcomes of previous studies could be the result of different experimental conditions as well as related to varying drug doses, methods of administration, and duration of the exposure period. Our previous results indicate that paternal MA exposure does not affect the locomotor activity and exploratory behavior of offspring in adulthood. Our findings agree with previous studies [21] showing that maternal MA exposure during gestation did not affect the baseline level of locomotor activity in adult offspring, while acute MA treatment increased it [33,34]. The increased overall activity in the Laboras test (locomotor activity test), induced by an acute MA application of 1 mg/kg, was mainly associated with increased levels of dopamine, especially in the nucleus accumbens [37]. An overall result of studies investigating the effect of paternal drug exposure on offspring is summarized in Table 2.

Table 2. Effect of paternal drug exposure on offspring.

Effect of paternal drug exposure on offspring	Treatment	Number of individuals	Effect of drug	Publication
Sensorimotor development	Methamphetamine	n[SA]=109, n[MA]=124	No effect	Mihalčíková <i>et al.</i>
Locomotor activity	Cocaine	n[COC]=134, n[SA]=23	No effect	Killinger <i>et al.</i>
	Cocaine	n[COC]=8, n[SA]=9	↑	Fisher <i>et al.</i>
	THC	n[THC]=8, n[SA]=9	No effect	Levin <i>et al.</i>
	Alcohol	n=10	↑	Ledig <i>et al.</i>
	Methamphetamine	[MA]=8, [SA]=8	No effect	Mihalčíková <i>et al.</i>

Conclusions

Much has been published about the adverse long-term effects of maternal drug abuse and its impact on their offspring. However, the father's role as parent

and donor of half of the genetic information is unclear. While some studies testing the effect of alcohol and nicotine, but also the effect of some drugs such as cocaine or THC show an effect on male sexual behavior and the effect of paternal exposure on offspring, our results

testing the effects of MA did not show such a substantial effect. Although we found no significant effects of paternal exposure to MA and its effect on offspring, our study was significant in that it was one of the first to investigate whether paternal exposure to MA has similar adverse effects on offspring development as maternal exposure to MA.

Conflict of Interest

There is no conflict of interest.

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