mTORC1 IN THE ORBITOFRONTAL CORTEX PROMOTES HABITUAL

ALCOHOL SEEKING

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ABSTRACT

The mechanistic target of rapamycin complex 1 (mTORC1) plays an important role in dendritic translation and in learning and memory. We previously showed that heavy alcohol use activates mTORC1 in the orbitofrontal cortex (OFC) of rodents (1). Here, we set out to determine the consequences of alcohol-dependent mTORC1 activation in the OFC. We found that inhibition of mTORC1 activity attenuates alcohol seeking and restores sensitivity to outcome devaluation in rats that habitually seek alcohol. In contrast, habitual responding for sucrose was unaltered by mTORC1 inhibition, suggesting that mTORC1's role in habitual behavior is specific to alcohol. We further show that inhibition of GluN2B in the OFC attenuates alcohol-dependent mTORC1 activation, alcohol seeking and habitual responding for alcohol. Together, these data suggest that the GluN2B/mTORC1 axis in the OFC drives alcohol seeking and habit.

INTRODUCTION

mTORC1 is a multiprotein complex that contains the serine/threonine protein kinase mTOR, the regulatory associated protein of TOR (Raptor), and other enzymes and adaptor proteins (2). Upon activation, mTORC1 phosphorylates eIF4E-binding protein (4E-BP) and the ribosomal protein S6 kinase (S6K), which in turn phosphorylates its substrate, S6 (3). These phosphorylation events lead to the translation of a subset of mRNAs to proteins (2, 3). In the CNS, mTORC1 is responsible for the local dendritic translation of synaptic proteins (4, 5). As such, mTORC1 plays an important role in synaptic plasticity, and learning and memory (6).

Increasing lines of evidence in rodents suggest that mTORC1 is a key player in mechanisms underlying alcohol use disorder (AUD) (7). For instance, excessive alcohol intake and reinstatement of alcohol place preference activate mTORC1 in the rodent nucleus accumbens (NAc) (1, 8-10), resulting in the translation of synaptic proteins, which in turn produce synaptic and structural adaptations that drive and maintain heavy alcohol use and relapse (1, 8, 9, 11, 12). Repeated cycles of voluntary binge drinking of alcohol and withdrawal also produces a robust and sustained activation of mTORC1 in the OFC of rodents (1); however, the behavioral consequences of this activation are unknown.

The OFC integrates sensory and reward information (13) and is an essential player in decision making (13-15), in stimulus-outcome association (16-18), in updating the value of predicted outcomes (15, 19), in goal-directed behaviors (16, 20, 21), and in compulsive behavior (22, 23). Exposure to drugs of abuse impairs the performance of OFC-dependent behavioral tasks (24), and aberrant neuroadaptations induced by drugs of abuse in the OFC contribute to drug-seeking and compulsive drug taking (24-26). For example, withdrawal from alcohol vapor exposure produces morphological and cellular alterations in rodents

73 (27, 28). Inactivation of the OFC enhances alcohol consumption in alcohol-dependent mice

74 (29), and chronic alcohol use alters the protein landscape in the primate OFC (30). In

75 humans, degraded OFC white matter, and reduced neuronal density are associated with

76 alcohol-dependence (31, 32), and presentation of alcohol-associated cues to alcohol-

77 dependent subjects elicits OFC activation (33-35).

78   Here, using rats as a model system, we set out to examine whether mTORC1 in the

79 OFC contributes to the mechanisms underlying AUD.

METHODS

Reagents

Anti-phospho-S6 (S235/236, 1:500), anti-S6 (1:1000), anti-phospho-4E-BP (T37/46, 1:500), anti-4E-BP (1:1000), anti-phospho-CaMKII (T286, 1:1000), anti-phospho-S6K (T389, 1:500) and anti-S6K (1:500) antibodies were purchased from Cell Signaling Technology (Danvers, MA). Anti-CaMKII (1:500) antibodies were purchased from Santa Cruz Biotechnology (Santa Cruz, CA). Anti-Actin (1:10,000) antibodies, phosphatase Inhibitor Cocktails 2 and 3, Dimethyl sulfoxide (DMSO), D-sucrose and NMDA were from Sigma Aldrich (St. Louis, MO). Nitrocellulose membranes and anti-NeuN antibodies were purchased from EMD Millipore (Billerica, MA, USA). Enhanced Chemiluminescence (ECL) was purchased from GE Healthcare (Pittsburg, PA, USA). Donkey anti-rabbit horseradish peroxidase (HRP), and donkey anti-mouse horseradish peroxidase (HRP) were purchased from Jackson ImmunoResearch (West Grove, PA). EDTA-free complete mini Protease Inhibitor Cocktails were purchased from Roche (Indianapolis, IN). NuPAGE Bis-Tris precast gels and Phosphate buffered saline (PBS) were purchased from Life Technologies (Grand Island, NY). Pierce Bicinchoninic Acid (BCA) protein assay kit was obtained from Thermo Scientific (Rockford, IL), and ProSignal Blotting Film were purchased from Genesee Scientific (El Cajon, CA). Ethyl alcohol (190 proof) was purchased from VWR (Radnor, PA). Rapamycin was purchased from LC laboratories (Woburn, MA). Ro25-6981 was purchased from Tocris Bioscience (Bristol, UK).

Subjects

Male Long Evans rats (Harlan, Indianapolis, IN) were one (*ex vivo* experiment) or two months (*in vivo* experiments) old at their arrival. Animals were single-housed in a

temperature- and humidity-controlled colony room (22±2 °C, relative humidity: 50–60%)

under a normal 12h light/dark cycle (lights on at 7:00AM) with food and water available

ad libitum. Rats were given a week of habituation to the housing conditions before the

beginning of the experiments. All animal procedures were approved by the University of

California San Francisco Institutional Animal Care and Use Committee (IACUC) and were

conducted in agreement with the Association for Assessment and Accreditation of

Laboratory Animal Care (AAALAC).

Preparation of solutions

Alcohol was diluted to 20% (v/v) and sucrose to 1-8% (w/v) in tap water. Rapamycin

(50ng/μl) was dissolved in PBS. Ro25-6981 (10μg/μl) and NMDA (25μM) were dissolved

in 0.1% DMSO in PBS.

Intermittent access to 20% alcohol using two bottle choice and drug infusion

Rats underwent intermittent access to 20% alcohol in a 2-bottle choice (IA-20%2BC)

paradigm for 7 weeks as described in (36). Specifically, rats were given 24 hours of

concurrent access to one bottle of 20% alcohol (v/v) in tap water and one bottle of water.

Control rats had access to water only. Drinking sessions started at 12:00pm on Monday,

Wednesday and Friday, with 24- or 48 hours (weekend) of alcohol-deprivation periods in

which rats consumed only water. The placement (left or right) of the water or alcohol

solution was alternated between each session to control for side preference. Water and

alcohol bottles were weighed at the beginning and at the end of each alcohol drinking

session. Rats were weighed once a week. Rats drinking more than 3.5 g/kg/24h on the last

week of IA-20%2BC were selected for the study, approximately 70-80% of the cohort.

Stereotaxic Surgery

Following stable baseline of alcohol drinking, rats underwent stereotaxic surgery.

Specifically, rats were continuously anesthetized using isoflurane (Baxter) and bilateral

guide cannulae (Plastic One) were implanted in the ventrolateral OFC (anterioposterior

+3.5mm, mediolateral ±2mm and dorsoventral +3.9mm; all coordinates are from bregma),

secured with screws (Plastic One) and dental cement (Ortho-Jet, Lang Dental).

Alcohol seeking and drug infusion

First, rats underwent IA-20%2BC paradigm for 7 weeks, as described above. Rats drinking

more than 3.5 g/kg/24h on the last week of IA-20%2BC were selected for alcohol self-

administration training in an operant self-administration (OSA) paradigm (37) with

modification adapted from (21, 38, 39). Training was conducted in operant chambers

(Med-Associates; Georgia, VT) using a fixed ratio 3 (FR3) (i.e. three active lever presses

result in the delivery of one alcohol reward) during daily 30 minutes-session (Mon-Fri) as

previously described (37). An inactive lever was also extended during the operant sessions

but had no programmed consequence. Following stable baseline of alcohol responding, rats

underwent stereotaxic surgery for cannula placement in the OFC, as described above. After

a one-week recovery period, operant self-administration procedure was resumed and

handling for drug microinfusions began. Rats received infusion of either vehicle or

rapamycin (50ng/µl/side) 3 hours or R025-6981 (10µg/µl/side) 15 minutes before a single

30 minutes-extinction session. Drugs were injected with bilateral infusion needles (Plastics

One) that projected 0.5 mm past the end of the guide cannula, at a rate of 0.5µl/minute.

Drug testing was performed using a "within-subject" design in which rats received both

treatments in counterbalanced order.

Upon establishing a baseline of IA-20%2BC, a separate cohort of animals received an

infusion of R025-6981 (10 μg/μl/side) or vehicle 15 minutes prior to the end of the last

withdrawal session. The OFC was harvested at the end of the 24-hrs withdrawal session

and were processed for western blot analysis.

Habitual and goal-directed alcohol seeking and drug infusion

After 7 weeks of IA-20%2BC, high-drinking rats (alcohol intake >3.5 g/kg/24h) were

trained to self-administer 20% alcohol in an operant self-administration (OSA) paradigm

(37) with modification adapted from (21, 38, 39). Self-administration training was initiated

under FR1 for 3 consecutive overnight sessions. Afterwards, the sessions lasted for an hour.

Only one lever was available during the operant sessions. Rats were pseudo-randomly

assigned to 2 groups and were subjected to a random interval (RI), or a random ratio (RR)

schedule of reinforcement which biases responding towards habitual or goal directed

actions, respectively (16). Only rats that self-administered alcohol more than 0.3g/kg/hour

were included in the study.

RI training: During RI training, each reward was delivered following one lever press

occurring after variable reward delivery time intervals (16). Three sessions were under RI-

5 (i.e. inter-reward time was 5 seconds on average, ranging from 1 to 10 seconds), followed

by three RI-15 sessions (i.e. inter-reward time was 15 seconds on average ranging from 10

to 30 seconds). Reinforcement was then shifted to RI-30 (i.e. inter-reward time was 30

seconds on average ranging from 10 to 50s) for at least 20 sessions (**Timeline, Fig. 2a**).

RR training: During RR training, reward was delivered following a variable number of

lever responses (16). Six sessions under RR-2 (1 reward delivery following on average 2

lever presses with number of presses ranging from 1 to 3) followed by RR-3 (1 reward

delivery following on average 3 lever presses with number of presses ranging from 1 to 5)

for at least 20 sessions (**Timeline, Fig. 2a**).

Following stable RI-30 or RR-3 responding, rats underwent alcohol devaluation testing as

described in (38) with modifications. Rats were given home-cage 2BC access to 1%

sucrose on non-devalued (ND) days or 20% alcohol on devalued (D) days for 30 minutes

(**Fig. 2b**). On each day, immediately after home-cage pre-feeding, rats underwent a 10-

minutes extinction test during which unrewarded lever presses were recorded. A "within-

subject" design was used in which ND or D sessions were in a counterbalanced order, with

2 standard retraining sessions between the tests. Rats that did not acquire the behavior and

were pressing less than 5 lever presses per session on ND day were excluded from analysis.

To minimize the effects of individual variance in total lever pressing we normalized ND

and D lever presses (15, 16, 21). Normalized lever pressing was calculated as ND or D

lever presses/total number of lever presses, respectively. Normalizing devaluation lever

presses produces a distribution of data, where 50% is equivalent to equal lever pressing

between ND and D (16). Devaluation index was calculated as the ratio of lever presses on

ND day–lever presses on D day/total number of lever presses. At the end of the training

period and upon acquiring the behavior (RR, goal directed behavior and RI, habitual

behavior), rats underwent stereotaxic surgery to bilaterally implant a guide cannula in the

ventrolateral OFC, as described above. One week later, RI-30 or RR-3 training was

resumed for 2 weeks after which rats received microinjections of either vehicle or

rapamycin (50ng/µl/side) 3 hours or RO25-6981 (5µg/µl/side) 15 minutes prior an alcohol

devaluation testing.

Habitual sucrose seeking

RI30 training was similar to the procedure described for alcohol except that 8% sucrose

was initially used and progressively reduced to 1% across training sessions. Only ten RI30

sessions (2 weeks) were conducted prior to the initial outcome devaluation test. Rats were

then implanted with a guide cannula in the OFC as described above. After one-week

recovery period, sucrose self-administration was resumed for two weeks, after which rats

received microinjections of vehicle or drug in a counter-balanced manner, prior to the

devaluation test. Sensitivity to changes in sucrose value was tested using a sucrose

devaluation procedure which was similar to alcohol devaluation except that rats had 2BC

access to 20% alcohol on ND day and 1% sucrose on D day (**Timeline, Fig. 3a-b**).

Histology

For verification of cannula placement, brains were post-fixed in 4% PFA for one week,

then rapidly frozen and sectioned into 50µm coronal slices using a Leica CM3050 cryostat

(Leica Biosystems). Slices were stained using cresyl violet and examined for cannula

placement using a bright-field microscope. All rats had correct guide cannula placement

and were included in the study.

Ex vivo **NMDA treatment**

Naïve rats were euthanized by isoflurane and decapitated. Brains were removed and

sectioned into 300 μm-thick slices at 4° C in a solution of aCSF containing (in mM) 200

sucrose, 1.9 KCl, 1.4 NaH_2PO^4, 0.5 $CaCl_2$, 6 $MgCl_2$, 10 glucose, 25 $NaHCO_3$, 4 ascorbic

acid; 310-330 mOsm. Immediately after sectioning, OFC-containing slices were recovered

in aCSF (in mM: 125 NaCl, 2.5 KCl, 1.4 NaH_2PO_4, 25 $NaHCO_3$, 2 $CaCl_2$, 1.3 $MgCl_2$, 25

glucose, 0.4 ascorbic acid) heated at 32° C for 30 minutes and then moved to an aCSF

solution containing 1 μM TTX at room temperature for 30 minutes (40). The OFC was

dissected and incubated for 30 minutes in aCSF containing 1 μM TTX at room temperature.

OFC sections were then treated for 3 minutes with vehicle (0.1% DMSO) or NMDA

(25μM) in TTX-containing aCSF , and western blot analysis was conducted as described

below.

Western blot analysis

Tissue were homogenized in ice-cold radio immunoprecipitation assay (RIPA) buffer (in

mM: 50 Tris-Cl, 5 EDTA, 120 NaCl, 1% NP-40, 0.1% deoxycholate, 0.5% SDS, protease

and phosphatase inhibitors), using a sonic dismembrator. Protein content was determined

using BCA kit. Tissue homogenates (30 μg per sample) were resolved on NuPAGE 10%

Bis-Tris gels at 100 V for 2 hours and transferred onto nitrocellulose membranes at 30V

for 2 hours. Blots were blocked with 5% milk-phosphate-buffered saline with 0.1% tween-

20 at room temperature and then probed with primary antibodies overnight at 4°C.

Membranes were washed and probed with HRP-conjugated secondary antibodies for 2

hours at room temperature, and bands were visualized using ECL. Band intensities were

quantified by ImageJ (National Institutes of Health, MD, USA).

Data analysis

All data are expressed as the mean $\pm$ SEM. GraphPad Prism 7.0 (GraphPad Software,

Inc., La Jolla, CA, USA) was used to plot and analyze the data. D'Agostino–Pearson

normality test and F-test/Levene test were used to verify the normal distribution of

variables and the homogeneity of variance, respectively. The sample sizes were based on

previous publications (8, 41). Data between two groups were compared using two-tailed

paired or unpaired t-test. Data from multiple groups against one group were compared

using a two-way repeated-measures analysis of variance followed when appropriate by a

Tukey multiple comparisons test or a Sidak's multiple comparisons test. Statistical

significance was set at $p < 0.05$.

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RESULTS

mTORC1 in the OFC contributes to alcohol seeking

We first examined whether activation of mTORC1 in the OFC contributes to the

maintenance of heavy alcohol use. Rats that underwent 7 weeks of IA-20%2BC received

an intra-OFC bilateral infusion of vehicle or the mTORC1 inhibitor, rapamycin (50ng/µl),

3 hours prior to a drinking session (8) (**Fig. 1 - Supplement 1**). As shown in **Fig. 1 -**

Supplement 2, intra-OFC administration of rapamycin did not impact voluntary intake of

alcohol. Next, rats that underwent IA-20%2BC for 7 weeks were trained to self-administer

20% alcohol in an operant self-administration (OSA) paradigm (42). Upon establishing a

baseline of alcohol lever presses, rats received a bilateral infusion of vehicle or rapamycin

(50ng/µl) into the OFC 3 hours prior to an OSA session, and the number of lever presses

and alcohol consumption were measured (8). As shown in **Fig. 1a-c**, inhibition of

mTORC1 in the OFC failed to alter the number of lever presses (**Fig.1a-b**), and alcohol

consumed (**Fig. 1c**). Inactive lever pressing (**Fig. 1 - Supplement 3a**). The latency to the

first or last lever press were also unaltered (**Fig. 1 - Supplement 3b-c**). Next, we

determined whether mTORC1 plays a role in alcohol seeking by testing whether rapamycin

alters lever presses during an extinction session. Intra-OFC administration of rapamycin

suppressed both the number (**Fig. 1d-e**), and the rate (**Fig. 1f**) of rats' responding on the

lever that was previously associated with alcohol. The reduction in alcohol seeking was

not due to alterations in locomotion, as inter-response intervals were similar in vehicle and

rapamycin-treated rats (**Fig. 1 - Supplement 4**). Together, these data suggest that mTORC1

in the OFC does not contribute to alcohol drinking *per se*, but does promote alcohol

seeking.

mTORC1 in the OFC participates in habitual responding for alcohol

Reward seeking can be driven by goal-directed or habitual compulsive behaviors (43-45). We next examined whether mTORC1 in the OFC plays a role in goal-directed or habitual alcohol seeking using a satiety outcome devaluation procedure. Rats that first underwent 7 weeks of IA-20%2BC were then trained to lever press for 20% alcohol using either an random ratio (RR) or random interval (RI) schedule of reinforcement, which biases lever responding toward goal-directed (RR) or habitual (RI) actions (16, 21, 38) (**Timeline. Fig. 2a**). RR and RI trained rats showed a similar number of presses throughout the training (**Fig. 2 - Supplement 1a**), however alcohol consumption was slightly higher during RI training (**Fig. 2 - Supplement 1b**), presumably due to fewer lever presses being required to obtain the same volume of alcohol, compared with RR training. Rats trained to self-administer alcohol in a goal-directed manner are sensitive to outcome devaluation, while habitually-trained rats are not, e.g. animals who habitually press a lever to obtain a reward will continue to press that lever, even when the relative value of the reward is reduced due to satiety (16, 21, 38, 46). Thus, we conducted a devaluation procedure to differentiate between goal-directed and habitual responding, (**Fig. 2b**). On the devalued (D) day, rats had 30 minutes of home-cage access to 20% alcohol, the reward previously associated with lever responding, and on the non-devalued (ND) day, rats had 30 minutes of home-cage access to 1% sucrose, a reward not previously associated with lever responding (**Fig. 2b**). Rats then underwent a 10-minute extinction test, during which lever presses were recorded (**Fig. 2b**). In order to minimize the effects of individual variability in overall lever pressing, and to graphically represent the distribution of lever presses between ND and D, we normalized lever-pressing data such that 50% indicates identical lever pressing on both days as shown in (15, 16, 21). As shown in **Fig. 2c-d,** rats trained

on an RR schedule exhibit a decrease in responding following alcohol devaluation, while RI-trained rats remained insensitive to devaluation. These data show that RI training can produce habitual responding for alcohol in rats.

Next, to test whether mTORC1 in the OFC participates in goal-directed or habitual alcohol seeking, we infused rapamycin (50ng/μl) or vehicle bilaterally, 3 hours prior to a devaluation session, and examined lever presses in RR- and RI-trained groups (**Fig. 2a, Fig. 2 - Supplement 2**). Rapamycin administration did not alter home cage alcohol intake prior to the extinction session in either group (**Fig. 2 - Supplement 3**). Intra-OFC administration of rapamycin did not impact responding in RR-trained (goal-directed) cohorts, as lever presses were reduced in rats that were pre-fed with alcohol and treated with either vehicle or rapamycin (**Fig. 2e-f**). In contrast, inhibition of mTORC1 in the OFC reduced responding in the RI-trained (habitual) rats in the devalued condition (**Fig.2g-h**). Critically, the reduction in responding in the rapamycin-treated RI-trained rats paralleled the responding of RR-trained animals (**Fig.2e-f vs. g-h**). These data suggest that mTORC1 inhibition in the OFC restores goal-directed alcohol seeking in animals trained to habitually self-administer alcohol.

To determine whether mTORC1 in the OFC plays a role in habitual responding to a natural reward, animals were trained to self-administer sucrose under an RI schedule of reinforcement, and lever presses were measured in rats treated with rapamycin (50ng/μl) or vehicle (**Fig. 3 - Supplement 1**) during an extinction session in animals that were first offered sucrose (devalued) or alcohol (non-devalued) in their home cage (**Timeline, Fig. 3a-b**). Rapamycin administration did not alter home cage sucrose intake prior to the extinction session (**Fig. 3 - Supplement 2**) As shown in **Fig. 3c-d**, habitual responding for sucrose was similar in the vehicle- and rapamycin-treated animals. Together, these data

359   suggest that mTORC1's contribution to habitual behavior is not generalized to all

360   rewarding substances.

Alcohol-dependent mTORC1 activation in the OFC requires GluN2B

Next, we set out to elucidate the mechanism by which long-term heavy alcohol use

activates mTORC1 in the OFC. Glutamatergic inputs from cortical and subcortical

structures project to the OFC (47, 48). Extracellular glutamate content is elevated in

cortical regions of humans and rats during alcohol withdrawal (49). N-methyl D-Aspartate

receptors (NMDAR) are targets of alcohol (50). For example, GluN2B-containing

NMDARs are activated by alcohol in the hippocampus and dorsal striatum (50).

Stimulation of GluN2B activates the guanine nucleotide releasing factor 1 (GRF1), the

activator of H-Ras (51) (**Figure 4 – Supplement 1**). Since H-Ras is upstream of mTORC1

(52) (**Figure 4 – Supplement 1**), we hypothesized that alcohol-dependent stimulation of

GluN2B activates mTORC1 in the OFC. We first tested whether NMDAR stimulation

activates mTORC1. To do so, OFC slices were briefly treated with NMDA (25μM), and

the activation of CaMKII and mTORC1 were tested by measuring the phosphorylation of

mTORC1 downstream targets, S6K and S6 (**Figure 4 – Supplement 1**). We found that *ex*

vivo treatment of the OFC with NMDA led to increased phosphorylation, and thus

activation, of CaMKII, a marker of NMDAR activation (**Fig. 4a-b**), as well as of mTORC1

(**Fig. 4a-b**). These data suggest that NMDAR stimulation activates mTORC1 in the OFC.

We previously showed that mTORC1 is activated in the OFC in response to a binge

drinking session which persists for at least 24 hours into alcohol abstinence (1). Thus, we

next tested whether GluN2B is required for alcohol-dependent mTORC1 activation. To do

so, rats that underwent 7-weeks of IA-20%2BC paradigm or that drank water only for the

same duration of time, received a bilateral intra-OFC infusion of the selective GluN2B

antagonist Ro-25-6981 (53) (10μg/ul) or vehicle, 15 minutes prior to the end of the last

alcohol drinking session, and mTORC1 activation was examined at the end of the last 24

hour water only session by measuring the phosphorylation of mTORC1 downstream

targets, 4-EBP and S6 (**Fig. 4 - Supplement 1, Timeleine Figure 4 - Supplement 2**). In

vehicle-treated rats, alcohol produced a robust activation of CaMKII (**Fig. 4c,f**) and

mTORC1, as measured by S6 (**Fig. 4d,g**), and 4-EBP phosphorylation (**Fig. 4e,h**). In

contrast, R025-6981-treated rats exhibited a marked reduction in both CaMKII and

mTORC1 activation during alcohol withdrawal **Fig. 4c-h**. In contrast, GluN2B protein

levels in the OFC were unchanged by alcohol **(Fig. 4i-j).** Together our data suggest that

GluN2B mediates mTORC1 activation following alcohol consumption.

GluN2B in the OFC is required for alcohol seeking and habit

We reasoned that, if GluN2B is upstream of mTORC1, then GluN2B should also

participate in habitual alcohol seeking. First, we examined whether inhibition of GluN2B

alters alcohol seeking during extinction. We found that intra-OFC administration of Ro25-

6981 (10μg/μl) 15 minutes prior to an extinction session (**Fig. 5 - Supplement 1**)

suppressed alcohol seeking, as indicated by a reduction in cumulative (**Fig. 5a**), active lever

presses (**Fig. 5b**), as well as the rate of lever pressing (**Fig. 5c**). The reduction of alcohol

seeking by Ro25-6981 was not due to alteration of locomotion as inter-response intervals

were similar in vehicle-treated and Ro25-6981-treated animals (**Fig. 5 - Supplement 2**).

Finally, we tested whether GluN2B in the OFC contributes to habitual alcohol

seeking. The timeline of the experiment is depicted in **Fig. 5d**. Intra-OFC infusion of R025-

6981 (5μg/μl) did not impact home cage alcohol consumption in a 2BC test during

407   devalued days (**Fig. 5 - Supplement 3**). In contrast, administration of Ro25-6981 (5µg/µl)

408   into the OFC reverted habitual responding for alcohol to goal directed responding (**Fig. 5e-**

409   **f**). Together, these data indicate that the recruitment of GluN2B signaling by alcohol is

410   required for alcohol seeking and habit.

DISCUSSION

Using operant training protocols that bias alcohol seeking towards habitual or goal-directed behavior, we present data implicating mTORC1 in the OFC in mechanisms underlying the development and/or maintenance of habitual behavior associated with alcohol use. In addition, we show that GluN2B in the OFC is required for alcohol-dependent mTORC1 activation and function. Together, our data suggest that the GluN2B/mTORC1 axis acts as a molecular switch that converts the OFC from driving goal directed to habitual alcohol use.

We found that inhibition of mTORC1 in the OFC attenuates lever pressing during extinction, suggesting that mTORC1 regulates alcohol seeking. The OFC has been implicated in updating reward anticipation based on the value of an expected outcome (17, 54), and O'Doherty et al. showed that the lateral OFC (lOFC) is activated during reward anticipation in humans (55). Thus, it is plausible that one of the roles of mTORC1 in the OFC is the strengthening of alcohol reward anticipation, thus promoting alcohol seeking.

We further show that blockade of mTORC1 activity in the OFC converts habitual alcohol responding to a more goal directed behavior. Habitual behavior is thought to rely on the strengthening of the dorsolateral striatum (DLS) over dorsomedial striatum (DMS), a brain region which participates in goal-directed behaviors (38, 56, 57). Renteria and colleagues showed that alcohol vapor exposure generates habitual behavior via the disruption of OFC to DMS circuit (39). Thus, it is plausible that mTORC1 activation is strengthening OFC projections to the DLS, and/or is weakening OFC to DMS projections. One caveat to consider, however, is that we measured habitual vs. goal directed responding for alcohol, whereas Renteria et al. measured responding for food. It is plausible that Renteria et al. tested whether alcohol alters decision making in general, while the current

study is focused on habitual responding specifically for alcohol. It would be of interest to

determine the normal role of mTORC1 in the OFC, and whether mTORC1 suppresses other

decision-making tasks.

We previously showed that mTORC1 activation is detected in the lOFC (1), which

was targeted in the current study. However, the structure of the OFC is complex. The

medial OFC (mOFC) and lOFC are each part of anatomically and functionally distinct

corticostriatal circuits in humans (58) and rodents (59). The mOFC has been reported to

play a larger role in determining, updating, and storing the relative reward values of stimuli

and actions (60). The lOFC, on the other hand, is proposed to be more involved in encoding

the relationship between stimuli/actions and outcomes (60), reward anticipation and goal

directed behavior (16). As mTORC1's activation is localized to the lOFC, more research

is required to determine if mTORC1 contributes to other lOFC-related behaviors.

The OFC has been associated with compulsive behavior (22), and recently Pascoli

et al. reported that OFC neurons projecting to the dorsal striatum are associated with

compulsive lever pressing in response to optogenetic activation of dopaminergic ventral

tegmental area neurons (23). Compulsive drug use is associated with maladaptive habitual

responding (57, 61), and we and others, provided animal data to support the notion that

alcohol consumption can become compulsive (44, 62, 63). Thus, it is possible that

mTORC1 signaling in the OFC is driving both habitual and compulsive alcohol seeking.

Interestingly, mTORC1 inhibition in the OFC does not alter habitual responding

for sucrose, indicating that mTORC1 plays a specific role in the formation of habits in

response to alcohol exposure and not natural rewards. The difference between the

consequences of mTORC1 inhibition on habitual alcohol vs. sucrose seeking is striking,

but it is important to note that, unlike alcohol, voluntary sucrose intake does not activate

mTORC1 in the OFC (1).

Corbit et al. showed that RR-trained rats exhibit habitual alcohol self-

administration after 8 weeks of training on an RR3 schedule of reinforcement (38). In the

current study, rats undergoing RR training demonstrated persistent goal-directed alcohol

seeking behaviors. The difference between the two studies is most likely to be due to the

length of RR training (long in Corbit et al. (38) vs. short herein). It is possible that further

training would drive our RR-trained goal-directed rats to exhibit more habitual phenotypes.

Further research would be required to compare the models more accurately.

We previously reported that repeated cycles of binge alcohol drinking and

withdrawal activates mTORC1 in the OFC (1), and we demonstrate herein that mTORC1

activation in the OFC depends, at least in part, on GluN2B suggesting that GluN2B is

activated in response to alcohol use. The NMDAR is a target of alcohol (50), and alcohol

enhances GluN2B phosphorylation in brain regions such as the cerebellum, the DMS and

the hippocampus (50). GluN2B phosphorylation enhances the activity of the channel (69).

Thus, it is plausible that alcohol-dependent GluN2B phosphorylation in the OFC enhances

GluN2B function thereby enabling mTORC1 activation. Alternatively, the hyperactivity

of GluN2B could be a compensatory homeostatic plasticity resulting from the inhibition of

NMDAR by alcohol (50). In contrast to our findings that alcohol does not alter the

expression of GluN2B in the OFC, Nimitvilai and colleagues showed that chronic exposure

to alcohol vapor decreases in the expression of GluN2B (28). One important difference

between our study and Nimitvilai et al. as well as additional reports on the interaction

between the OFC and alcohol discussed herein, relates to the use of contingent vs. non-

contingent alcohol administration. Specifically, prior to the OSA, rats were subjected to 7

weeks of IA-20%2BC. The IA-20%2BC paradigm models "problem drinkers" e.g. human

subjects that suffer from AUD phenotypes such as binge drinking, compulsive drinking

and craving (64). In our case, rats achieve blood alcohol concentrations (BAC) of 80 mg/dl

(65) a BAC equivalent to binge drinking humans (66). In contrast, the majority of other

reports described herein involved passive exposure of alcohol vapor, which achieves BAC

of 150-250 mg/dl, and leads to physical dependence on alcohol (67). Humans who are

dependent on alcohol show profoundly degraded white matter and reduced neuronal

density in the OFC (31, 32), possibly an indication of alcohol-induced damage to this

structure. Thus, it is likely that cycles of binge drinking do not damage the OFC which may

be the case in animal models of alcohol dependence. As only a small percentage of alcohol

users exhibit physical dependence (68), we believe that our findings have important

implications for the understanding of the mechanisms underlying problem drinking and

AUD.

What could be the mechanism by which mTORC1 contributes to alcohol seeking

and habit? Activation of mTORC1 triggers the translation of a subset of mRNAs to protein

in the cell body and in dendrites (3, 70). We previously showed that long-term excessive

alcohol intake and reinstatement of alcohol place preference initiate the translation of

several synaptic proteins in the NAc (11, 12, 36). We also found that reconsolidation of

alcohol reward memories increases the immunoreactivity of mTORC1 targets in the OFC

(41). Thus, it is possible that the consequences of mTORC1 activation in the OFC is the

translation of synaptic proteins.

We show here that GluN2B activation in the OFC is sufficient to influence the

formation and/or maintenance of alcohol seeking and habit. In line with the possibility that

GluN2B activation contributes to the development of habit, DePoy et al. showed that

habitual behavior, developed upon subchronic cocaine treatment during adolescence (71),

is inhibited by the treatment of animals with the GluN2B inhibitor ifenprodil (71). DePoy

et al. further showed that cocaine exposure during adolescence produces structural changes

in the OFC which were attenuated by ifenprodil (71). While our data suggest that GluN2B

in the OFC participates in behavioral inflexibility, Brigman et al. reported that GluN2B in

the OFC plays a role in choice learning (72), It is plausible that alcohol-dependent

neuroadaptations tilt the function of GluN2B from choice learning, e.g. a goal directed

behavior, to habitual responding.

Gremel et al. showed that the endocannabinoid/CB1 receptor system in in OFC to

DLS circuit promotes habit formation by weakening the OFC to DMS circuitry required

for goal directed behavior (21). Interestingly, cannabinoid signaling has been shown to

activate mTORC1 in hippocampal neurons (73). Furthermore, THC-dependent impairment

of novel object recognition was reversed by the mTORC1 inhibitor, rapamycin (73). Thus,

it is possible that endocannabinoids and mTORC1 are part of the same signaling cascade

that gates goal-directed behaviors, thereby promoting habit. Finally, Gourley and

colleagues reported that the brain-derived neurotrophic factor (BDNF) in the OFC

participates in goal-directed behaviors (18, 74, 75). BDNF and mTORC1 play opposing

roles in AUD (76). For example, BDNF keeps alcohol intake in moderation, and mTORC1

is associated with excessive alcohol use (76). As breakdown of the BDNF signaling

cascade results in compulsive alcohol use (62). It is tempting to speculate that the balance

between BDNF and mTORC1 signaling in the OFC determines whether alcohol use is kept

in moderation or becomes habitual.

ACKNOWLEDGEMENTS AND DISCLOSURES

This research was supported by the National Institute of Alcohol Abuse and Alcoholism,

P50 AA017072 (D.R.) and R01 AA027474 (D.R.).

The authors do not have a financial or non-financial competing interests.

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 FIGURE LEGENDS

 Figure 1. Inhibition of mTORC1 in the OFC reduces alcohol seeking

 (a-c) Intra-OFC infusion of rapamycin does not alter self-administration of alcohol.

 Rats underwent 7 weeks of IA-20%2BC, and were then trained to self-administer 20%

 alcohol using a FR3 schedule. Vehicle (white) or rapamycin (50ng/µl, red) was infused

 bilaterally in the OFC 3 hours before a 30 min self-administration session. **(a)** RM ANOVA

 of cumulative lever presses did not identify a significant main treatment effect ($F_{1,12}=0.26$,

 $p>0.05$). Two-tailed paired t-test revealed that the number of active lever presses **(b)**

 ($t_6=1.40$, $p>0.05$), and amount of alcohol consumed **(c)** ($t_6=1.51$, $p>0.05$) did not differ

 between treatment groups. **(d-f) Intra-OFC infusion of rapamycin inhibits lever presses**

 during extinction. Vehicle (white) or rapamycin (50ng/µl, red) was infused in the OFC 3

 hours before a 30 min extinction session, and responses on the previously active lever were

 recorded. (**d**). RM ANOVA revealed a significant main treatment effect ($F_{1,16}=4.40$,

 $p=0.05$) of cumulative lever presses. Two-tailed paired t-test revealed that the number (per

 5 min) (**e**) $t_8=3.31$, $p<0.05$, and rate of lever presses (**f**) ($t_8=3.30$, $p<0.05$) were reduced in

 the rapamycin-treated animals. Data are presented as individual values and mean±SEM.

 *$p<0.05$. **(a-c)** n=7, **(d-e)** n=9.

 Figure 1 – Supplement 1

 Schematic drawing of cannulae placement. Schematic illustration of coronal sections of

 the rat brain showing approximate bilateral placements of cannulae in the OFC according

 to Paxinos and Watson 2007.

Figure 1 – Supplement 2

Inhibition of mTORC1 in the OFC does not alter alcohol consumption in a 2-bottle

choice paradigm. Rats with a history of IA-20%2BC were infused with vehicle (white) or

rapamycin (50ng/μl, red) into the OFC 3 hours before the beginning of the final 2BC

session, and alcohol consumption was recorded at the 30 minutes and 24-hour time points.

Significance between treatment groups was determined using RM ANOVA. No

differences were observed in alcohol consumption at the 30 minutes (t_{11}=1.25, p>0.05), or

at the 24-hour time point (t_{11}=0.87, p>0.05). n=12.

Figure 1 – Supplement 3

Inhibition of mTORC1 in the OFC does not impact inactive lever press or the latency

to the first and last active lever press. Rats were trained to self-administer 20% alcohol

using an FR3 schedule. Vehicle (white) or rapamycin (50ng/μl, red) was infused into the

OFC 3 hours before an operant self-administration session and active and inactive lever

presses were recorded. Significance between treatment groups was determined using two-

tailed paired t-tests. **(a)** number of inactive lever presses (t_8=0.37, p>0.05), latency to first

lever press **(b)** (t_8=0.27, p>0.05), and latency to the last active lever press **(c)** (t_8=0.89,

p>0.05) did not differ between groups. n=9.

Figure 1 – Supplement 4

Intra-OFC infusion of rapamycin does not alter locomotion. Rats were trained to self-

administer 20% alcohol using a FR3 schedule. Vehicle (white) or rapamycin (50ng/μl, red)

was infused into the OFC 3 hours before a 30 minutes extinction session, and inter-response

intervals (IRIs) were measured. Relative number of IRIs expressed as % of total IRIs with

all intervals equal or smaller of 20 seconds presented in 1 second bins. Interval greater than

20 seconds are also shown. Two-way ANOVA of IRIs across the session did not identify

a significant main treatment effect ($F_{1,12}$=0.1412, p=0.7137). n=9.

Figure 2. Inhibition of mTORC1 in the OFC attenuates habitual responding for

alcohol

(a) Timeline of experiment. Rats underwent 7 weeks of IA20%-2BC. Rats were the

trained to operant self-administer 20% alcohol during 3 overnight FR1 sessions and were

pseudo-randomly assigned to 2 groups. One group was subjected to a progressive RI

reinforcement schedule, while the other was assigned a RR schedule. Following a stable

RI-30 or RR-3 responding, rats underwent alcohol devaluation testing depicted in **b**. Upon

establishing the behavior, rats underwent stereotaxic surgery to bilaterally implant a guide

cannula. One week later, RI-30 or RR-3 training was resumed for 2 weeks, after which rats

received microinjections of vehicle or drug in a counter-balanced manner, prior to the

devaluation test. **(b) Alcohol devaluation test.** On test day, rats were pre-fed with 20%

alcohol for 30 minutes in their home cage during devalued day (D) or with 1% sucrose in

the non-devalued day (ND), and normalized lever pressing (percent of total presses on D

or ND, see methods) was used to evaluate goal-directed or habitual responding during a

10-minuted extinction session. **(c-d) RR trained animals are goal directed whereas RI**

trained animals show habitual behavior. RR trained rats (green) press less during

devalued day as compared to RI trained animals (red). Two-way ANOVA with Sidak post

hoc analysis indicates a significant decrease in normalized lever pressing on D vs ND in

RR-trained rats (p=0.0018), but not in RI-trained rats (p=0.8014) (Main effect of

devaluation: F (1, 20) = 9.391, p=0.0061; reinforcement schedule X devaluation: F (1, 20)

= 4.736, p=0.0417). **(c)** Devaluation index was calculated as the ratio of ND-D/ND+D. RR

trained rats show a higher devaluation index as compared to the RI trained rats. Two-tailed

unpaired t-test shows a significant difference in devaluation index (t_{16}=3.266, p=0.0049).

(e-f) Intra-OFC infusion of rapamycin does not alter goal-directed alcohol seeking.

Rats that were trained using an RR schedule of reinforcement received an intra-OFC

infusion of vehicle (hatched green) or rapamycin (50ng/μl) (green) 3 hours before the

alcohol devaluation procedure as in **(b)**, and the number of lever presses were measured

during extinction. **(e)** Total lever press-based normalization indicates significant decreases

in lever pressing between ND and D days in both vehicle-treated (p=0.0085) and

rapamycin-treated (p=0.0117) RR-trained rats (Main effect of devaluation: $F_{(1,40)}$=17.65,

p=0.0001) **(f)** Devaluation index. No significant difference was detected (two-tailed paired

t-test, t_{13}=1.135, p=0.2768)**. (g-h) Intra-OFC infusion of rapamycin reduces habitual**

lever presses. Rats that were trained using an RI schedule of reinforcement (red) received

an intra-OFC infusion of vehicle (hatched red) or rapamycin (50ng/μl) (red) 3 hours before

the alcohol devaluation procedure as in **(b)**, and the number of lever presses were measured

during extinction. **(g)** Total lever press-based normalization indicates significant decreases

upon intra-OFC infusion of rapamycin- (p=0.0005), but not vehicle (p=0.6381) in RI

trained rats on D compared to ND days (Main effect of devaluation: $F_{(1,32)}$=12.38,

p=0.0013; treatment X devaluation: $F_{(1,32)}$=5.327, p=0.0276) **(h)** Devaluation index.

Two-tailed paired t-test shows a significant difference in devaluation index (t_{16}=3.557,

p=0.0026). Data are presented as mean±SEM. *p<0.05, **p<.01 ***p<0.001. **(c-d)** n=8-

10, **(e-f)** n=8-11, **(g-h)** n=8-9.

888 **Figure 2 – Supplement 1**

889 **Number of lever presses and alcohol consumed in RI and RR-trained animals.** Rats

890 were trained to respond for alcohol in an operant self-administration paradigm under RI

891 (red) or RR, (green) schedule of reinforcement. Significance between treatment groups was

892 determined using RM ANOVA. **(a)** Training groups did not differ in the number of lever

893 presses during training ($F_{1,20}$=2.01, p>0.05), **(b)** RI-trained rats exhibited a small but

894 significant increase of alcohol intake over the course of training ($F_{1,20}$=6.65, p<0.05).

895 *p<0.05. RR n=12. RI n=10.

897 **Figure 2 – Supplement 2**

898 **Schematic drawing of cannulae placement.** Schematic illustration of coronal sections of

899 the rat brain showing approximate bilateral placements of cannulae in the OFC according

900 to Paxinos and Watson 2007.

902 **Figure 2 – Supplement 3**

903 **Inhibition of mTORC1 in the OFC does not alter voluntary alcohol intake prior to**

904 **devaluation.** Rats were trained to respond for alcohol in an operant self-administration

905 paradigm under a random interval (RI, red) or random ration (RR, green) schedule of

906 reinforcement. Vehicle (white) or rapamycin (50ng/µl, red) was infused into the OFC 3

907 hours prior to home cage access to alcohol, and alcohol intake was recorded at the end of

908 the 30 minutes session. Significance between treatment groups was determined using RM

909 ANOVA. The amount of alcohol consumed did not differ by treatment ($F_{1,30}$=0.21, p>0.05)

910 or training history ($F_{1,30}$=1.48, p>0.05). *p<0.05. RR n=12. RI n=10.

Figure 3. Habitual sucrose responding is not affected by mTORC1 inhibition in the

OFC

(a) Timeline of experiment. Rats underwent 7 weeks of IA20%-2BC, and were then

trained to operant self-administer 8% sucrose. Sucrose concentration was progressively

reduced to 1% during 3 overnight FR1 sessions. Rats were then subjected to an RI

reinforcement schedule. Following a stable RI-30 responding, rats underwent alcohol

devaluation testing depicted in **b**. Upon establishing the behavior, rats underwent

stereotaxic surgery to bilaterally implant a guide cannula. One week later, RI-30 training

was resumed for 2 weeks, after which rats received microinjections of vehicle or rapamycin

(50ng/μl) in a counter-balanced manner, prior to the devaluation test. **(b) Sucrose**

devaluation test. Habitual behavior was probed in an identical way to the alcohol-trained

cohorts with the exception that sucrose pre-feeding was considered the devaluing context

and alcohol was the non-devalued substance. **(c)** Two-way RM ANOVA failed to show a

significant effect of repeated testing (Main effect of devaluation: $F_{(1,12)}=0.006464$,

$p>0.9999$; treatment X devaluation: $F_{(1,12)}=0.7257$, $p=0.4110$) on lever presses between

devalued and non-devalued days when habitually responding animals were pretreated with

either vehicle or rapamycin. n=7 **(d)** Devaluation index. Two-tailed paired t-test detected

no significant difference between the treatment groups ($t=0.7024$, $p=0.5087$). n=7.

Figure 3 - Supplement 1

Schematic drawing of cannulae placement. Schematic illustration of coronal sections of

the rat brain showing approximate bilateral placements of cannulae in the OFC according

to Paxinos and Watson 2007.

 Figure 3 - Supplement 2

 Inhibition of mTORC1 in the OFC does not alter voluntary sucrose intake prior to

 devaluation. Rats were trained to respond for sucrose in an operant self-administration

 paradigm under RI schedule of reinforcement. Vehicle (white) or rapamycin (50ng/µl, red)

 was infused into the OFC 3 hours prior to home cage access to sucrose, and sucrose intake

 was recorded at the end of the 30 minutes session. Significance between treatment groups

 was determined using RM ANOVA. The amount of sucrose consumed did not differ by

 treatment ($F_{1,30}$=0.06, p>0.05). n=8.

 Figure 4. GluN2B is required for mTORC1 activation by alcohol

 (a-b) Stimulation of NMDA receptors activates mTORC1 in the OFC. Vehicle (0.1%

 DMSO) or NMDA (25µM) was applied to OFC slices of naïve rats for 3 minutes.

 Phosphorylation of CaMKII, S6K and S6 were determined by western blot analysis. Total

 levels of the proteins were measured as well, and actin was used as a loading control. **(a)**

 Representative blots of CaMKII (left), S6K (middle), and S6 (right) phosphorylation in

 OFC slices treated with vehicle or NMDA. **(b)** ImageJ was used for optical density

 quantification. Data are expressed as the average ratio +/-S.E.M of phospho-CaMKII to

 CaMKII, phospho-S6K to S6K and phospho-S6 to S6, and are expressed as percentage of

 vehicle. Significance was determined using two-tailed unpaired *t*-test. (CaMKII: t_{12}=5.61,

 p<0.001; S6K: t_{12}=4.77, p<0.001; S6: t_{12}=4.51, p<0.001). **(c-h) Alcohol-dependent**

 mTORC1 activation is attenuated by the GluN2B inhibitor, Ro25-6981. Rats

 underwent 7 weeks of IA-20%2BC resulting in an average of alcohol intake of 4.37 g/kg/24

 hours. Rats received an intra-OFC bilateral infusion of vehicle (saline) or Ro25-6981

 (Ro25, 10µg/µl), 15 minutes prior to the beginning of the water only session and the OFC

was dissected 24 hours later. Water only consuming rats were used as controls. (**c**-**e**) Representative images of CaMKII (**c**), S6 (**d**) and 4E-BP (**e**) phosphorylation in water vs. alcohol-exposed animals that were pre-treated with vehicle or Ro25-6981. (**f**-**h**) ImageJ was used for optical density quantification. Data are expressed as the average ratio +/- S.E.M of phospho-CaMKII to CaMKII (**f**), phospho-S6 to S6 (**g**), and phospho-4E-BP to 4E-BP (**h**), and are expressed as percentage of water + vehicle group. Two-way RM ANOVA showed a significant effect of alcohol on pCaMKII ($F_{1,20}$=24.66, $p<0.0001$), pS6 ($F_{1,20}$=21.92, $p=0.0001$), and p4E-BP ($F_{1,20}$=48.23, $p<0.0001$). In addition, two-way RM ANOVAs indicated a main effect of drug treatment for pCaMKII ($F_{1,20}$=48.51, $p<0.0001$), pS6 ($F_{1,20}$=4.58, $p<0.05$), and p4E-BP ($F_{1,20}$=8.49, $p<0.01$), as well as treatment x alcohol interaction for pCaMKII ($F_{1,20}$=18.57, $p<0.01$), pS6 ($F_{1,20}$=7.559, $p<0.05$), and p4E-BP ($F_{1,20}$=13.22, $p<0.01$). Tukey's multiple comparison post hoc analysis revealed that alcohol increased pCaMKII ($p<0.001$), pS6 ($p<0.001$), and p4E-BP ($p<0.001$) in vehicle-treated animals and that pretreatment with R025-6981 reduced the phosphorylation of pCaMKII ($p<0.0001$), S6 ($p<0.05$), and 4E-BP ($p<0.001$). **(i-j) Chronic alcohol intake does not alter the level of GluN2B in the OFC.** At the conclusion of the 7 weeks of IA-20%2BC, the OFC was collected from rats at the end of the last 24 hours water session. GluN2B levels were determined by western blot analysis, and actin was used as a loading control. (**i**) Representative blots of GluN2B protein levels in the OFC of alcohol consuming vs. water only consuming rats. (**j**) ImageJ was used for optical density quantification. Data are expressed as the average ratio +/-S.E.M of GluN2B levels, expressed as percentage of water. Significance was determined using two-tailed unpaired t-test. Alcohol had no effect on GluN2B levels (t_{10}=0.85, $p>0.05$). *$p<0.05$, ***$p<0.001$. (**a-b**) n = 7 per group, (**c-j**) n = 6 per group.

Figure 4 - Supplement 1

GluN2B-dependent activation of mTORC1 signaling

Model depicts the signaling cascade associated with Figure 4. GluN2B activation results

in calcium release which in turn activates CaMKII and GRF1. CamKII activation is

measured by phosphorylation (P) was used as a positive control. Calium binding to GRF1

activates H-Ras which activates AKT that in turn activates mTORC1. mTORC1 activation

is measured by the phosphorylation of 4E-BP, S6K and S6. Red arrows depicts the specific

proteins whose phosphorylation levels were tested.

Figure 4 - Supplement 2

Time line of experiments depicted in Figure 4c-h

Rats underwent 7-weeks of IA-20%2BC paradigm or drank water only for the same

duration of time. Ro-25-6981 (53) (10μg/ul) or vehicle was infused into the OFC infusion

15 minutes before the end of the last 24 hours alcohol drinking session, and mTORC1

activation was measured 24 hours later.

Figure 5. GluN2B in the OFC promotes alcohol seeking and habitual alcohol

responding

(a-c) Intra-OFC administration of Ro25-6981 decreases alcohol seeking. Rats

underwent 7 weeks of IA-20%2BC, and were then trained to self-administer 20% alcohol.

Vehicle (white) or Ro25-6981 (Ro25, 10μg/μl, blue) was infused bilaterally in the OFC 15

minutes prior to a 30 minutes extinction session. **(a)** Cumulative lever presses. Two-way

RM ANOVA revealed a significant main treatment effect ($F_{1,12}$=10.89, p<0.05). Two-tailed

paired t-test revealed that the number **(b)** and rate (per 5 minutes) **(c)** of lever press were

significantly different in the vs. vs. Ro25-6981 groups ng (both t_6=2.62, p<0.05). **(d)**

Timeline of experiment. Rats underwent 7 weeks of IA20%-2BC, and were then trained

to operant self-administer 20% alcohol using a progressive RI reinforcement schedule.

Following a stable RI-30 lever presses, rats underwent stereotaxic surgery to bilaterally

implant guide cannulae in the OFC. One week later, RI-30 training was resumed for 2

weeks, after which rats received microinjections of vehicle (white) or Ro25-6981 (5 μg/μl,

blue) in a counter-balanced manner, 15 minutes prior to a 30 minutes home cage 20%2BC

alcohol drinking session, and the number of lever presses were measured during extinction.

(e-f) Intra-OFC administration of Ro25-6981 attenuates habitual alcohol seeking. (**e**)

Two way RM ANOVA showed a main effect of devaluation ($F_{1,33}$=13.72, p<0.001) as well

as a treatment x devaluation interaction ($F_{1,33}$=6.31, p<0.05). Sidak's multiple comparison

test detected a significant difference for Ro25-6981 (p<0.001) on D compared to ND days.

(f) Devaluation index. Two-tailed paired t-test indicated a significant difference (t_{15}=3.72,

p<0.01). Individual results and mean±SEM are shown, (**a-c**) n=7, (**e-f**) n=12. *p<0.05, **

p<0.01.

1023

1024 **Figure 5 - Supplement 1**

1025 **Schematic drawing of cannulae placement.** Schematic illustration of coronal sections of

1026 the rat brain showing approximate bilateral placements of cannulae in the OFC according

1027 to Paxinos and Watson 2007.

1028

Figure 5 - Supplement 2

Inhibition of GluN2B in the OFC does not alter locomotion. Vehicle (white) or Ro25-

6981 (10μg/μl, blue) was infused in the OFC 15 minutes before a single 30 minutes

extinction session and inter-response intervals (IRIs) were measured. Mean +/- SEM of the

relative number of IRIs expressed as % of total IRIs with all intervals equal or smaller of

20 seconds presented in 1 second bins. Intervals greater than 20 seconds are also shown.

Two way RM ANOVA of IRIs across the session did not identify a significant main

treatment effect ($F_{1,12}$=0.81, p=0.3858). n=7.

1037

Figure 5 - Supplement 3

Inhibition of GluN2B in the OFC does not alter voluntary alcohol intake prior to

devaluation. Rats were trained to respond for alcohol in an operant self-administration

paradigm under a random interval (RI) schedule of reinforcement. Vehicle (white) or

Ro25-6981 (5µg/µl, blue) was infused into the OFC 15 minutes prior to home cage access

to alcohol, and alcohol intake was recorded at the end of the 30 minutes session.

Significance between treatment groups was determined using RM ANOVA. The amount

of alcohol consumed did not differ by treatment (t_5=2.80, p>0.05). n=12.

1046

Inhibition of mTORC1 in the OFC reduces alcohol seeking

Figure 1 – Supplement 1

Schematic drawing of cannulae placement

Figure 1 – Supplement 2

Inhibition of mTORC1 in the OFC does not affect alcohol consumption in a 2-bottle choice paradigm

Figure 1 – Supplement 3

Inhibition of mTORC1 in the OFC does not affect inactive lever presses, latency to the first and last lever press

Figure 1 – Supplement 4

Inhibition of mTORC1 in the OFC does not alter locomotion

Figure 2

Inhibition of mTORC1 in the OFC attenuates habitual responding for alcohol

Figure 2 – Supplement 1

Number of lever presses and alcohol consumed in RI and RR-trained animals

Figure 2 – Supplement 2

Schematic drawing of cannulae placement

Figure 2 – Supplement 3

Inhibition of mTORC1 in the OFC does not alter voluntary alcohol prior to devaluation

Habitual sucrose responding is not affected by mTORC1-OFC inhibition

Figure 3 – Supplement 1

Schematic drawing of cannulae placement

Figure 3 – Supplement 2

Inhibition of mTORC1 in the OFC does not alter voluntary intake of sucrose prior to devaluation

GluN2B is required for mTORC1 activation by alcohol

Figure 4 – Supplement 1

GluN2B-dependent activation of mTORC1 signaling

Figure 4 – Supplement 2

Timeline of experiments depicted in Figure 4c-h

Figure 5

GluN2B in the OFC promotes alcohol seeking and habitual alcohol responding

Seeking

a

vehicle
Ro25

b

c

d

IA-2BC 20% alcohol → FR1 → RI-5 → RI-15 → RI-30 → Devaluation (Habitual Responding) → Cannula implant → 1 week → RI-30 → Ro25 or Vehicle / Counter-balanced manner → Devaluation x4

7 weeks · 3 O/N sessions · 6 sessions · 20 sessions · 2 weeks

Habitual Responding

e

f

Figure 5 – Supplement 1

Schematic drawing of cannulae placement

Figure 5 – Supplement 2

Inhibition of GluN2B in the OFC does not alter locomotion

Figure 5 – Supplement 3

Inhibition of GluN2B in the OFC does not alter voluntary alcohol consumption prior to devaluation