

Gender effects of the COMT Val¹⁵⁸Met genotype on verbal fluency in healthy adults

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Abstract. Cognitive performance in healthy individuals is associated with gender differences in specific tests; a female advantage has been demonstrated in language tests, whereas a male advantage has been demonstrated in spatial relation examinations. The prefrontal cortex (PFC) mediates important cognitive domains and is influenced by dopamine (DA) activity. The single nucleotide polymorphism (SNP) rs4680 in the catechol-O-methyltransferase (COMT) gene results in an amino acid substitution from valine (Val) to methionine (Met). The Met allele has been demonstrated to decrease COMT enzyme activity and improve PFC cognitive function. COMT regulates DA activity in the PFC and exhibits gender effects. The aim of the present study was to investigate the gender-specific effects of the COMT genotype on cognition in healthy young adults. Seventy-six healthy subjects were genotyped for COMT rs4680 and submitted to an extensive range of neuropsychological tests assessing aspects of PFC function. The COMT Met allele influenced the performance of executive function. The results revealed gender effects of the COMT rs4680 Met allele on verbal fluency, with positive effects in males and negative effects in females. This suggested that DA activity affects cognitive function in different ways, according to gender.

Introduction

Gender differences in behavior and cognitive performance involve cultural and biological factors. Numerous parameters of brain function and structure differ between males and

females (1-3); however, the exact mechanisms involved and how they affect each cognitive domain remain unclear. The catechol-O-methyltransferase (COMT) enzyme has been implicated as a potential biological candidate involved in this gender dimorphism (4-6). To the best of our knowledge, there are a limited number of studies on this matter, the results of which are controversial.

Gender may impact cognitive function. Generally, females outperform males in their verbal abilities, while males outperform females in visuospatial tasks. Herlitz *et al* (7) investigated memory function and identified gender differences in the episodic memory that were in favor of females. Among individuals aged ≥ 85 years, females have demonstrated superior scores in cognitive speed and memory tasks, regardless of their often lower level of formal education (8). Halari *et al* (9) investigated whether sexually dimorphic cognitive performance in males and females was associated with sex hormones. Significant gender differences were observed, favoring males in the spatial and inhibition tasks, and favoring females in the verbal task (category fluency). However, no significant correlation was demonstrated between gender hormones and cognitive performance. van Hooren *et al* (10) analyzed the effects of age, education and gender on cognitive speed, verbal memory, executive function and verbal fluency in healthy older adults. A marked, age-related decrease in these tasks was identified. Education had a substantial effect on cognitive function; participants with a middle or high level of education demonstrated a superior performance in the cognitive tests (10). Additionally, females outperformed males in the verbal memory tasks (10).

The prefrontal cortex (PFC) is an important region of the brain for cognition, and is strongly influenced by dopamine (DA). COMT is regarded as an important regulator of PFC DA levels, whereas the DA transporter (DAT) is not as widely found in the PFC as it is in the striatum (11,12). COMT is a key enzyme that is specifically involved in the metabolic degradation of extraneuronal DA (13). With regard to gender differences, one study identified a 17% increase in COMT enzyme activity in healthy males compared with that in healthy females (11). However, certain studies have demonstrated similar COMT levels and expression in both genders (11,14,15), while others have revealed higher levels in

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1 females (16). Males and females also appear to differentially
2 regulate the abundance of novel mRNA (17) or protein (18)
3 isoforms of COMT, which may alter the enzyme activity
4 without affecting the total level of COMT transcripts or
5 proteins (4). These results are concordant with earlier findings
6 demonstrating a 30% increase in the activity of the enzyme in
7 males compared with that in females (19). A similar difference
8 was described in studies using human erythrocytes (20-22);
9 however, one study was not concordant (23).

10 Genetic studies have suggested that COMT enzyme
11 activity may also vary considerably according to COMT
12 single nucleotide polymorphisms (SNPs). The COMT gene
13 SNP, rs4680, also known as Val¹⁵⁸Met, reduces the activity
14 of the enzyme in Met carriers (Met⁺ individuals) (24). This,
15 in turn, lowers the enzyme activity and presumably increases
16 the PFC DA levels (24,25). COMT exerts a significant regula-
17 tory effect on cognitive function (26-29), which involves the
18 well-established effects of PFC DA levels on working memory
19 and executive function (11,30-32). It has been suggested that
20 the COMT rs4680 SNP may exert a direct effect on cogni-
21 tion in schizophrenic patients and healthy controls (26-29).
22 The COMT SNP rs4680 Met allele has been demonstrated
23 to be correlated with higher PFC DA levels (24,25), and
24 with superior performance in working memory, intelligence
25 and executive function in numerous studies (11,28,33-36).
26 However, a number of studies did not reveal similar cognitive
27 results (37-39). Furthermore, the COMT Met allele has been
28 demonstrated to modulate cognitive dysfunction across mood
29 episodes of bipolar disorder (40).

30 Results of previous COMT studies specifically concerned
31 with the effects of gender/genotype on cognition require
32 further clarification. Only a limited number of studies
33 have demonstrated a gender-by-genotype effect on cogni-
34 tion (4-6). Two studies addressing the association between
35 gender/genotype and cognition have focused on children
36 and elderly individuals (5,6). Barnett *et al* (5) performed a
37 range of cognitive tests in >5000 children (age, 8-10 years),
38 including tests for IQ, attention span and working memory.
39 Subjects were genotyped for the COMT Val¹⁵⁸Met SNP, and
40 the Met allele was found to be associated with improved
41 function in several domains selectively among males. O'Hara
42 *et al* (6) evaluated 163 older healthy adults and revealed that
43 only Val/Val males performed superiorly in a test of delayed
44 verbal recall, while a worse performance was observed in
45 younger individuals.

46 Insufficient (hypodopaminergic) and excessive (hyper-
47 dopaminergic) DA receptor 1 (D1) stimulation has been
48 demonstrated to impair PFC function in animal studies,
49 resulting in cognitive dysfunction (41-43); however, the exten-
50 sion of these findings to healthy subjects remains speculative.
51 Therefore, PFC cognition is hypothesized to depend on a
52 specific level of DA in order to achieve optimal cognitive func-
53 tion (31,32). Given the limited data available on whether gender
54 effects are associated with the COMT genotype interaction
55 with cognition, the aim of the present study was to investigate
56 this potential association in a homogeneous sample of healthy
57 young adults. Based on studies demonstrating lower COMT
58 activity in female COMT Met carriers, we hypothesized that
59 females carrying the Met allele would have a lower cognitive
60 performance due to altered PFC DA regulation.

Materials and methods

Subjects. Seventy-six healthy individuals (37 females and
39 males), aged 18-35 years (mean age, 23.2±3.26 years) with
a mean schooling duration of 14.1±2.32 years and a mean IQ
of 115.49±12.25, were recruited at the University of São Paulo
(São Paulo, Brazil). Study participants were predominantly
medical students. None of the subjects had a past history of or
were currently suffering with a psychiatric disorder, according
to the evaluation conducted by psychiatrists using the Mini
International Neuropsychiatric Interview (MINI) (44). In addi-
tion, all subjects had no family history (amongst first-degree
relatives) of mood or psychotic disorders, and had not used
psychotropic substances or indulged in substance abuse within
the last three months. Only females with a regular menstrual
cycle, taking oral contraceptives, were included.

Neurocognitive assessments. A range of neurocognitive
assessments were designed to assess the following domains:
i) Attention, by the Wechsler Adult Intelligence Scale III
[WAIS-III, including the Digit Span (DS) subtest] and the Trail
Making Test, part A (TMT-A); ii) memory, using the imme-
diate and delayed Logical Memory subtests of the Wechsler
Memory Scale (WMS-LM1 and -LM2, respectively); iii) verbal
fluency, by the Controlled Oral Word Association Test (FAS);
and iv) executive function, assessed by the TMT-B (45-48).
Experienced clinical neuropsychologists performed the neuro-
cognitive assessments. Raw scores, corrected for demographic
factors, were used given the absence of standardized scores for
the Brazilian population.

Genotyping. DNA was extracted from the peripheral blood
according to the salting out procedure (49), and was then
genotyped for COMT rs4680 using quantitative (q)PCR allelic
discrimination. PCR amplification for rs4680 was performed in
5- μ l reactions with 5 ng template DNA, 1X TaqMan Universal
Master mix (Applied Biosystems, Inc., Foster City, CA, USA),
each primer and probe assay, and H₂O. Thermal cycling
consisted of initial denaturation for 10 min at 95°C, followed by
40 cycles of denaturation at 95°C for 15 sec, and annealing at
60°C for 1 min. The allele detection process and allelic discrim-
ination were performed for 1 min at 60°C on a 7500 Real-Time
PCR system (Applied Biosystems, Inc.). Quality control of
qPCR results was achieved by direct sequencing using an ABI
Prism 3100 Genetic Analyzer (Applied Biosystems, Inc.).

Statistical analyses. Cognitive tests were stratified as a function
of COMT rs4680 genotype (Met/Met, Val/Met and Val/Val) and
functional allele [Met⁺ (Met/Met or Met/Val) or Met⁻ (Val/Val)].
The cognitive test results had a normal distribution, and para-
metric tests were used to analyze the data. The multivariate
analysis of the covariance test was performed using the cogni-
tive test results as factors, and age, gender, education, genotype
and Met allele as covariates. COMT genotype and gender, as
well as COMT Met allele and gender, interactions were also
analyzed. P<0.05 was considered to indicate a statistically
significant difference. All statistical analyses were performed
using the PASW statistical software, version 18.0 (SPSS Inc.,
Chicago, IL, USA). Correction for multiple comparisons was
performed using the Bonferroni test.

Table I. Sociodemographic and clinical variables by COMT genotype.

Variable	Met ⁺ (n=57)	Met ⁻ (n=19)	P-value ^a
Age (years, mean ± SD)	23.37±3.40	23.53±3.20	0.85 ^b
Gender (male/female)	26/31	13/6	0.11 ^c
Years of education (mean ± SD)	14.19±2.31	13.82±2.43	0.99 ^b

^aDifference between the two groups (2-tailed P-value); ^bt-test; ^c χ^2 test. Significance level, P<0.05. COMT, catechol-O-methyltransferase; Met, methionine.

Table II. Multivariate analysis of cognitive tests, with age, education, gender, COMT allele Met and gender*COMT allele Met interaction as the cofactors.

Source	Dependent variable	B	F	P-value	Partial η^2 (%)	Observed power (a) (%)
Age	WAIS-DS-FW	-0.19	5.638	0.020	7.66	64.84
	WAIS-DS-BK	-0.09	0.971	0.328	1.41	16.3
	WAIS-DS	-0.23	2.475	0.120	3.51	34.16
	WMS-LM1	-0.10	0.179	0.673	0.26	7.02
	WMS-LM2	-0.11	0.222	0.639	0.33	7.51
	RCFT-COPY	-0.02	0.198	0.658	0.29	7.24
	RCFT-RECALL	-0.26	1.899	0.173	2.72	27.42
	TMT-A	0.98	14.393	0.000	17.47	96.24
	TMT-B	2.50	5.565	0.021	7.57	64.27
	FAS TOTAL	-0.38	1.983	0.164	2.83	28.42
	FAS F	-0.10	0.567	0.454	0.83	11.51
	FAS A	-0.16	1.805	0.184	2.59	26.31
	FAS S	-0.17	2.583	0.113	3.66	35.38
	Education	WAIS-DS-FW	0.13	1.219	0.273	1.76
WAIS-DS-BK		0.14	1.214	0.274	1.75	19.24
WAIS-DS		0.26	1.605	0.209	2.31	23.93
WMS-LM1		-0.17	0.281	0.598	0.41	8.18
WMS-LM2		-0.23	0.498	0.483	0.73	10.70
RCFT-COPY		0.06	1.123	0.293	1.62	18.14
RCFT-RECALL		0.56	4.367	0.040	6.03	53.99
TMT-A		-0.28	0.590	0.445	0.86	11.79
TMT-B		2.03	1.862	0.177	2.67	26.99
FAS TOTAL		0.26	0.491	0.486	0.72	10.63
FAS F		0.10	0.323	0.572	0.47	8.67
FAS A		0.13	0.590	0.445	0.86	11.79
FAS S		-0.03	0.055	0.816	0.08	5.61
Gender		WAIS-DS-FW	0.10	0.122	0.727	0.18
	WAIS-DS-BK	0.78	1.415	0.238	2.04	21.64
	WAIS-DS	0.98	6.885	0.011	9.19	73.46
	WMS-LM1	-2.00	0.468	0.496	0.68	10.35
	WMS-LM2	-3.78	0.318	0.575	0.47	8.61
	RCFT-COPY	0.25	4.328	0.041	5.98	53.63
	RCFT-RECALL	-0.84	0.965	0.329	1.40	16.25
	TMT-A	1.42	1.336	0.252	1.93	20.70
	TMT-B	-0.34	3.315	0.073	4.65	43.45
	FAS TOTAL	2.77	0.729	0.396	1.06	13.43
	FAS F	0.19	0.639	0.427	0.93	12.36
	FAS A	0.99	0.166	0.685	0.24	6.86
	FAS S	1.11	1.092	0.300	1.58	17.76

Table II. Continued.

Source	Dependent variable	B	F	P-value	Partial η^2 (%)	Observed power(a) (%)
COMT allele Met	WAIS-DS-FW	-0.50	0.990	0.323	1.44	16.55
	WAIS-DS-BK	0.14	0.021	0.884	0.03	5.24
	WAIS-DS	3.62	2.076	0.154	2.96	29.51
	WMS-LM1	7.35	5.424	0.023	7.39	63.16
	WMS-LM2	5.74	2.799	0.099	3.95	37.82
	RCFT-COPY	0.46	0.018	0.893	0.03	5.20
	RCFT-RECALL	2.66	0.068	0.796	0.10	5.76
	TMT-A	-6.14	1.511	0.223	2.17	22.79
	TMT-B	-32.86	5.121	0.027	7.00	60.68
	FAS TOTAL	-4.78	0.014	0.907	0.02	5.15
	FAS F	-1.20	0.052	0.820	0.08	5.58
	FAS A	-0.95	0.200	0.656	0.29	7.25
	FAS S	-2.31	0.201	0.655	0.29	7.27
	Gender*COMT interaction	WAIS-DS-FW	-0.23	0.035	0.852	0.05
WAIS-DS-BK		-0.08	0.004	0.953	0.01	5.04
WAIS-DS		-4.00	3.129	0.081	4.40	41.45
WMS-LM1		-6.44	3.283	0.074	4.61	43.12
WMS-LM2		-5.56	2.448	0.122	3.48	33.84
RCFT-COPY		-0.84	1.722	0.194	2.47	25.32
RCFT-RECALL		-4.56	2.429	0.124	3.45	33.63
TMT-A		7.43	3.527	0.065	4.93	45.68
TMT-B		29.03	3.184	0.079	4.47	42.05
FAS TOTAL		9.07	4.862	0.031	6.67	58.46
FAS F		1.96	0.986	0.324	1.43	16.50
FAS A	2.74	2.167	0.146	3.09	30.58	
FAS S	3.90	5.932	0.017	8.02	67.04	

COMT, catechol-O-methyltransferase; Met, methionine; WAIS-DS-FW/BK, Wechsler Adult Intelligence Scale III Forwards/Backwards Digit Span subtest; WMS-LM1/2, Wechsler Memory Scale immediate (1)/delayed (2) Logical Memory subtests; RCFT, Rey-Osterrieth Complex Figure Test; TMT-A/B, trail making test, part A/B; FAS F/A/S/TOTAL, Controlled Oral Word Association Test of words beginning with F/A/S/F+A+S. Bold text indicates $P < 0.05$.

Ethics. The research ethics board of the Clinics Hospital of the University of São Paulo approved this study. Written informed consent was obtained from all subjects.

Results

No statistically significant differences in the sociodemographic data (age, gender and educational level) were observed among the COMT genotypes (Table I). Moreover, there were no differences in gender, age, education or IQ (Table I). The COMT genotype distributions in the experimental samples of males and females were identified to be in accordance with the Hardy-Weinberg equilibrium ($\chi^2=0.65$), thus indicating representative samples. The allelic frequency of rs4680 was 51.3% for the Met allele and 48.7% for the Val allele.

A multivariate general linear test model, using age, educational level, gender, COMT rs4680 genotype and the interaction between COMT genotype and gender as covariates, was implemented.

Age negatively influenced cognitive performance on the WAIS-DS-FW ($P=0.02$, partial η^2 , 7.66%), TMT-A ($P < 0.001$, partial η^2 , 17.4%) and TMT-B ($P=0.02$, partial η^2 , 7.57%) (Table II). Gender influenced WAIS-DS ($P=0.01$, partial η^2 , 9.1%) (Table II). Females performed better than males in both tests. The COMT genotype had no influence on cognitive performance after Bonferroni correction. Gender and COMT genotype interaction influenced the FAS total score ($P=0.03$, partial η^2 , 6.67%) and FAS letter S ($P=0.01$, partial η^2 , 8.0%) (Table III). Among males, Met homozygotes had the highest scores, Met heterozygotes had intermediate performance while Val homozygotes had the lowest scores. Among females, Val homozygotes had the highest scores, while Met homozygotes had the lowest scores (Fig 1).

Discussion

To the best of our knowledge, this is the first study to investigate the effect of the interaction between gender and the COMT rs4680 Met allele on verbal fluency, with opposite results identi-

Table III. Multivariate analysis of cognitive tests, with age, education, gender, COMT rs4680 genotype and gender*COMT rs4680 genotype interaction as the cofactors.

Source	Dependent variable	F	P-value	Partial η^2 (%)	Observed power (a) (%)
COMT rs4680 genotype	WAIS-DS-FW	1.043	0.358	3.06	22.50
	WAIS-DS-BK	0.251	0.779	0.75	8.79
	WAIS-DS	0.965	0.386	2.84	21.07
	WMS-LM1	2.776	0.070	7.76	52.91
	WMS-LM2	1.322	0.273	3.85	27.62
	RCFT-COPY	0.952	0.391	2.80	20.85
	RCFT-RECALL	1.882	0.160	5.39	37.80
	TMT-A	0.699	0.501	2.07	16.31
	TMT-B	2.579	0.083	7.25	49.76
	FAS TOTAL	0.272	0.763	0.82	9.13
	FAS F	2.008	0.142	5.73	40.04
	FAS A	0.225	0.799	0.68	8.39
	FAS S	0.123	0.885	0.37	6.81
	Gender*COMT rs4680 genotype	WAIS-DS-FW	0.310	0.735	0.93
WAIS-DS-BK		0.614	0.544	1.83	14.84
WAIS-DS		2.105	0.130	6.00	41.76
WMS-LM1		1.554	0.219	4.50	31.86
WMS-LM2		1.436	0.245	4.17	29.70
RCFT-COPY		2.200	0.119	6.25	43.39
RCFT-RECALL		2.482	0.091	7.00	48.17
TMT-A		2.569	0.084	7.22	49.59
TMT-B		2.784	0.069	7.78	53.03
FAS TOTAL		3.021	0.056	8.39	56.65
FAS F		1.552	0.219	4.49	31.83
FAS A		1.141	0.326	3.34	24.29
FAS S		3.442	0.038	9.44	62.63

COMT, catechol-O-methyltransferase; WAIS-DS-FW/BK, Wechsler Adult Intelligence Scale III Forwards/Backwards Digit Span subtest; WMS-LM1/2, Wechsler Memory Scale immediate (1)/delayed (2) Logical Memory subtests; RCFT, Rey-Osterrieth Complex Figure Test; TMT-A/B, trail making test, part A/B; FAS F/A/S/TOTAL, Controlled Oral Word Association Test of words beginning with F/A/S/F+A+S. Bold text indicates $P < 0.05$.

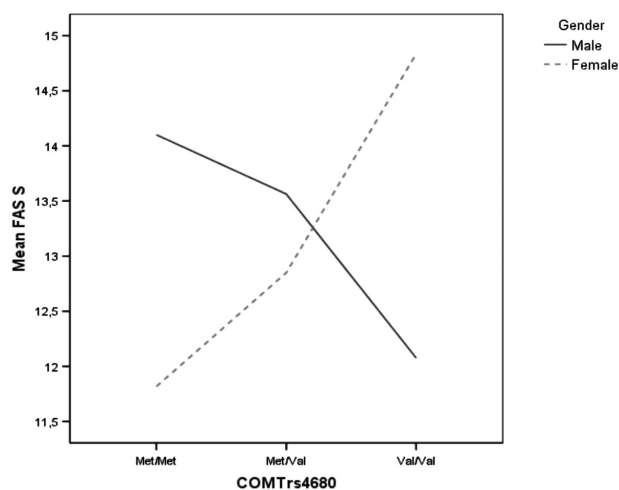


Figure 1. Graph demonstrating the effect of the COMT rs4680 genotype on Controlled Oral Word Association (of words beginning with S; FAS S) performance in males and females. COMT, catechol-O-methyltransferase.

fied for each gender. Female carriers of the Met allele had a lower performance than males in a verbal fluency test. In addition, subjects that were heterozygous (Val/Met) for COMT rs4680 had an intermediate performance in the verbal fluency test.

The results suggested a specific gender-dependent effect of Met⁺ on verbal fluency, reinforcing the hypothesis that there is a distinct optimal DA activity/level for different components of cognition (28,50). Furthermore, the COMT Met allele negatively influenced cognitive performance (verbal fluency) in females compared with that in males (Fig. 1). Given that females have a lower COMT activity than males, *per se* (11,19), one possible explanation of our findings is that females carrying the low activity Met allele are likely to exceed the optimal PFC DA levels, thus receiving no benefit from its excessively high levels.

The effects of DA on neurocognition have been previously described. Several studies have demonstrated that lower doses of D1 agonists enhance working memory and

attention span (31,51), while higher levels of DA impair PFC function (52). Low doses of psychostimulants in hyperkinetic children have been demonstrated to be associated with significant improvements in short-term memory, whereas higher doses worsen cognitive performance (53). Similar dose-dependent effects were also observed in healthy volunteers using dextroamphetamine, a drug that potentiates dopaminergic activity (52). Studies on COMT functional SNPs and the differential effects of D1 and D2 receptor binding have also demonstrated cognitive decline to be associated with COMT activity. Healthy subjects carrying the Met⁺ allele (rs4680) exhibited lower phasic and higher subcortical tonic DA transmission, which was proposed to be associated with an increase in central DA levels (28,54).

COMT enzyme activity appears to have a gender-specific effect; molecular postmortem studies have revealed that COMT enzyme activity in the PFC was 17% higher in males compared with that in females (11). These results are concordant with earlier findings demonstrating a 30% higher enzyme activity in males compared with females (19). A similar difference was described in studies using human erythrocytes (20-22); however, one study did not find differences between genders (23). Notably, 17- β -estradiol (E2) administration decreased COMT activity in the rat liver (55,56). Similarly, Xie *et al* (1999) demonstrated that there are two estrogen response elements in the COMT promoter, and that, at physiological concentrations, E2 inhibited COMT mRNA expression in cells expressing estrogen receptors, but not in cells that did not express these receptors. An estrogen-mediated decrease in COMT mRNA was also accompanied by a proportional decrease in COMT immunoreactivity and activity (55,56). In another study, the PFC DA levels were affected in male, but not female, COMT knockout mice (13). One possible explanation for this gender-distinct function is the bidirectional association between COMT and estrogen-related compounds, whereby COMT activity varies inversely according to estrogen levels (29). Moreover, estrogen levels affect the striatal dopaminergic system (57,58), and affect cognition (41-43,59,60). Overall, these findings may aid in the clarification of the role of gender-specific effects on COMT-modulated cognition.

Studies investigating the cognitive effects of DA in the PFC have mainly focused on the D1 receptor, the predominant type of receptor in the PFC. Hypodopaminergic and hyperdopaminergic D1 receptor stimulation have been demonstrated to impair PFC function (31,32,41-43), resulting in cognitive dysfunction. Therefore, PFC cognition may depend on an optimal level of DA to achieve normal function (31,32,51,52). These kinetics have been described by an inverted-U response function model in pharmacological studies (31,51,52). In this model, the effect of amphetamine and other drugs on cognition is described as an inverted-U shape, in which the peak is the threshold for maximum cognitive performance, with subsequent decline thereafter. We propose that the inverted-U shape model, which states that an optimal level of DA is required to benefit cognitive function, represents a plausible explanation as to why female Met allele carriers exhibit a worse performance in verbal fluency tests. The basis for this explanation is that females have lower COMT activity *per se*, which may be due to the effect of estrogen on this enzyme (29). Consequently,

at least theoretically, male and female Met⁺ subjects have different baseline DA levels.

The FAS is also considered to be a test of executive functions, including cognitive organization, initiation, maintenance of effort and the ability to conduct a non-routine search for words based on a specific first letter, rather than the lexical definition (61-63). This interpretation is consistent with studies demonstrating a worse performance in individuals with frontal lobe lesions (63,64), and sensitivity to cognitive dysfunction in disorders that affect executive functions (65). Effects of demographic variables are important to consider when interpreting FAS results. Age effects have not been identified in numerous studies (64,66,67); however, a number of studies have demonstrated modest age effects, with higher age predicting a worse performance (68). A higher level of education has been associated with improved FAS performance in several studies (64,67,69). In the present study, neither age nor education influenced FAS. However, with regard to gender, a superior FAS performance was observed in females. Previous studies have demonstrated controversial results; a number of studies identified superior FAS performance in females compared with males (66,70), while other studies did not observe a difference between the two genders (69,71).

Limitations of this study included the absence of information with regard to the menstrual cycle of participants. Furthermore, the use of oral contraceptives may have affected COMT activity.

To the best of our knowledge, this is the first study to identify a gender-specific effect of COMT SNP rs4680 on verbal fluency in young healthy subjects, with opposite effects on performance in each gender. The presence of the Met allele in female subjects was associated with worse verbal fluency; while in males, it was correlated with an improvement in this particular cognitive function. Our results suggested that DA activity affects cognitive function in different ways, according to gender, most likely due to COMT gender differences.

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References

- Murphy DG, DeCarli C, McIntosh AR, Daly E, Mentis MJ, Pietrini P, *et al*: Sex differences in human brain morphometry and metabolism: an in vivo quantitative magnetic resonance imaging and positron emission tomography study on the effect of aging. *Arch Gen Psychiatry* 53: 585-594, 1996.
- Goldstein JM, Seidman LJ, Horton NJ, Makris N, Kennedy DN, Caviness VS Jr, *et al*: Normal sexual dimorphism of the adult human brain assessed by in vivo magnetic resonance imaging. *Cereb Cortex* 11: 490-497, 2001.
- De Vries GJ: Minireview: Sex differences in adult and developing brains: compensation, compensation, compensation. *Endocrinology* 145: 1063-1068, 2004.

- 1 4. Harrison PJ and Tunbridge EM: Catechol-O-methyltransferase
2 (COMT): a gene contributing to sex differences in brain
3 function, and to sexual dimorphism in the predisposition
4 to psychiatric disorders. *Neuropsychopharmacology* 33:
5 3037-3045, 2008.
- 5 5. Barnett JH, Heron J, Ring SM, Golding J, Goldman D, Xu K
6 and Jones PB: Gender-specific effects of the catechol-O-methyl-
7 transferase Val108/158Met polymorphism on cognitive function
8 in children. *Am J Psychiatry* 164: 142-149, 2007.
- 9 6. O'Hara R, Miller E, Liao CP, Way N, Lin X and Hallmayer J:
10 COMT genotype, gender and cognition in community-dwelling,
11 older adults. *Neurosci Lett* 409: 205-209, 2006.
- 12 7. Herlitz A, Nilsson LG and Bäckman L: Gender differences in
13 episodic memory. *Mem Cognit* 25: 801-811, 1997.
- 14 8. van Exel E, Gussekloo J, de Craen AJ, Bootsma-van der Wiel A,
15 Houx P, Knook DL and Westendorp RG: Cognitive function in
16 the oldest old: women perform better than men. *J Neurol*
17 *Neurosurg Psychiatry* 71: 29-32, 2001.
- 18 9. Halari R, Hines M, Kumari V, Mehrotra R, Wheeler M, Ng V
19 and Sharma T: Sex differences and individual differences in
20 cognitive performance and their relationship to endogenous
21 gonadal hormones and gonadotropins. *Behav Neurosci* 119:
22 104-117, 2005.
- 23 10. van Hooren SA, Valentijn AM, Bosma H, Ponds RW,
24 van Bostel MP and Jolles J: Cognitive functioning in healthy
25 older adults aged 64-81: a cohort study into the effects of age, sex,
26 and education. *Neuropsychol Dev Cogn B Aging Neuropsychol*
27 *Cogn* 14: 40-54, 2007.
- 28 11. Chen J, Lipska BK, Halim N, Ma QD, Matsumoto M,
29 Melhem S, *et al*: Functional analysis of genetic variation in
30 catechol-O-methyltransferase (COMT): effects on mRNA,
31 protein, and enzyme activity in postmortem human brain. *Am J*
32 *Hum Genet* 75: 807-821, 2004.
- 33 12. Wayment HK, Schenk JO and Sorg BA: Characterization of
34 extracellular dopamine clearance in the medial prefrontal cortex:
35 role of monoamine uptake and monoamine oxidase inhibition.
36 *J Neurosci* 21: 35-44, 2001.
- 37 13. Gogos JA, Morgan M, Luine V, Santha M, Ogawa S, Pfaff D
38 and Karayioeou M: Catechol-O-methyltransferase-deficient
39 mice exhibit sexually dimorphic changes in catecholamine
40 levels and behavior. *Proc Natl Acad Sci USA* 95: 9991-9996,
41 1998.
- 42 14. Bray NJ, Buckland PR, Williams NM, Williams HJ, Norton N,
43 Owen MJ and O'Donovan MC: A haplotype implicated in
44 schizophrenia susceptibility is associated with reduced
45 COMT expression in human brain. *Am J Hum Genet* 73:
46 152-161, 2003.
- 47 15. Tunbridge E, Burnet PW, Sodhi MS and Harrison PJ:
48 Catechol-o-methyltransferase (COMT) and proline dehydro-
49 genase (PRODH) mRNAs in the dorsolateral prefrontal cortex
50 in schizophrenia, bipolar disorder, and major depression.
51 *Synapse* 51: 112-118, 2004.
- 52 16. Dempster EL, Mill J, Craig IW and Collier DA: The quanti-
53 fication of COMT mRNA in post mortem cerebellum tissue:
54 diagnosis, genotype, methylation and expression. *BMC Med*
55 *Genet* 7: 10, 2006.
- 56 17. Tunbridge EM, Lane TA and Harrison PJ: Expression of multiple
57 catechol-o-methyltransferase (COMT) mRNA variants in human
58 brain. *Am J Med Genet B Neuropsychiatr Genet* 144B: 834-839,
59 2007.
- 60 18. Tunbridge EM, Harrison PJ and Weinberger DR:
Catechol-o-methyltransferase, cognition, and psychosis:
Val158Met and beyond. *Biol Psychiatry* 60: 141-151, 2006.
19. Boudíková B, Szumlanski C, Maidak B and Weinshilboum R:
Human liver catechol-O-methyltransferase pharmacogenetics.
Clin Pharmacol Ther 48: 381-389, 1990.
20. Fähndrich E, Coper H, Christ W, Helmchen H,
Müller-Oerlinghausen B and Pietzcker A: Erythrocyte
COMT-activity in patients with affective disorders. *Acta*
Psychiatr Scand 61: 427-437, 1980.
21. Floderus Y and Wetterberg L: The inheritance of human eryth-
rocyte catechol-O-methyltransferase activity. *Clin Genet* 19:
392-395, 1981.
22. Philippu G, Hoo JJ, Milech U, Argarwall DP, Schrappe O and
Goedde HW: Catechol-O-methyltransferase of erythrocytes in
patients with endogenous psychoses. *Psychiatry Res* 4: 139-146,
1981.
23. Fitzgerald GA, Hamilton CA, Jones DH and Reid JL: Erythrocytes
catechol-O-methyltransferase activity and indices of sympathetic
activity in man. *Clin Sci (Lond)* 58: 423-425, 1980.
24. Lachman HM, Papolos DF, Saito T, Yu YM, Szumlanski CL
and Weinshilboum RM: Human catechol-O-methyltransferase
pharmacogenetics: description of a functional polymorphism
and its potential application to neuropsychiatric disorders.
Pharmacogenetics 6: 243-250, 1996.
25. Weinshilboum RM, Otterness DM and Szumlanski CL:
Methylation pharmacogenetics: catechol O-methyltransferase,
thiopurine methyltransferase, and histamine N-methyltransferase.
Annu Rev Pharmacol Toxicol 39: 19-52, 1999.
26. Egan MF, Goldberg TE, Kolachana BS, Callicott JH,
Mazzanti CM, Straub RE, *et al*: Effect of COMT Val108/158 Met
genotype on frontal lobe function and risk for schizophrenia.
Proc Natl Acad Sci USA 98: 6917-6922, 2001.
27. Joobar R, Gauthier J, Lal S, Bloom D, Lalonde P, Rouleau G, *et al*:
Catechol-O-methyltransferase Val-108/158-Met gene variants
associated with performance on the Wisconsin Card Sorting
Test. *Arch Gen Psychiatry* 59: 662-663, 2002.
28. Bilder RM, Volavka J, Lachman HM and Grace AA: The
catechol-O-methyltransferase polymorphism: relations to the
tonic-phasic dopamine hypothesis and neuropsychiatric
phenotypes. *Neuropsychopharmacology* 29: 1943-1961, 2004.
29. Diamond A, Briand L, Fossella J and Gehlbach L: Genetic and
neurochemical modulation of prefrontal cognitive functions in
children. *Am J Psychiatry* 161: 125-132, 2004.
30. Meyer-Lindenberg A, Nichols T, Callicott JH, Ding J,
Kolachana B, Buckholtz J, *et al*: Impact of complex genetic
variation in COMT on human brain function. *Mol Psychiatry* 11:
867-877, 2006.
31. Mehta MA, Owen AM, Sahakian BJ, Mavaddat N, Pickard JD
and Robbins TW: Methylphenidate enhances working memory
by modulating discrete frontal and parietal lobe regions in the
human brain. *J Neurosci* 20: RC65, 2000.
32. Goldman-Rakic PS, Castner SA, Svensson TH, Siever LJ and
Williams GV: Targeting the dopamine D1 receptor in schizo-
phrenia: insights for cognitive dysfunction. *Psychopharmacology*
(Berl) 174: 3-16, 2004.
33. Caldú X, Vendrell P, Bartrés-Faz D, Clemente I, Bargalló N,
Jurado MA, *et al*: Impact of the COMT Val108/158 Met and
DAT genotypes on prefrontal function in healthy subjects.
Neuroimage 37: 1437-1444, 2007.
34. Bruder GE, Keilp JG, Xu H, Shikhman M, Schori E, Gorman JM
and Gilliam TC: Catechol-O-methyltransferase (COMT)
genotypes and working memory: associations with differing
cognitive operations. *Biol Psychiatry* 58: 901-907, 2005.
35. de Frias CM, Annerbrink K, Westberg L, Eriksson E, Adolfsson R
and Nilsson LG: COMT gene polymorphism is associated with
declarative memory in adulthood and old age. *Behav Genet* 34:
533-539, 2004.
36. de Frias CM, Annerbrink K, Westberg L, Eriksson E, Adolfsson R
and Nilsson LG: Catechol O-methyltransferase Val158Met
polymorphism is associated with cognitive performance in
nondemented adults. *J Cogn Neurosci* 17: 1018-1025, 2005.
37. Barnett JH, Scoriels L and Munafò MR: Meta-analysis of the
cognitive effects of the catechol-O-methyltransferase gene
Val158/108Met polymorphism. *Biol Psychiatry* 64: 137-144,
2008.
38. Dennis NA, Need AC, LaBar KS, Waters-Metenier S, Cirulli ET,
Kragel J, *et al*: COMT val108/158 met genotype affects neural
but not cognitive processing in healthy individuals. *Cereb*
Cortex 20: 672-683, 2010.
39. Solís-Ortiz S, Pérez-Luque E, Morado-Crespo L and
Gutiérrez-Muñoz M: Executive functions and selective attention
are favored in middle-aged healthy women carriers of the Val/Val
genotype of the catechol-o-methyltransferase gene: a behavioral
genetic study. *Behav Brain Funct* 6: 67, 2010.
40. Soeiro de Souza MG, Machado-Vieira R, Soares Bio D,
Do Prado CM and Moreno RA: COMT polymorphisms as
predictors of cognitive dysfunction during manic and mixed
episodes in bipolar I disorder. *Bipolar Disord* 14: 554-564, 2012.
41. Zahrt J, Taylor JR, Mathew RG and Arnsten AF: Supranormal
stimulation of D1 dopamine receptors in the rodent prefrontal
cortex impairs spatial working memory performance. *J*
Neurosci 17: 8528-8535, 1997.
42. Granon S, Passetti F, Thomas KL, Dalley JW, Everitt BJ and
Robbins TW: Enhanced and impaired attentional performance
after infusion of D1 dopaminergic receptor agents into rat
prefrontal cortex. *J Neurosci* 20: 1208-1215, 2000.
43. Arnsten AFT and Li BM: Neurobiology of executive functions:
catecholamine influences on prefrontal cortical functions. *Biol*
Psychiatry 57: 1377-1384, 2005.

- 1 44. Sheehan DV, Lecrubier Y, Sheehan KH, Amorim P, Janavs J, Weiller E, *et al*: The Mini-International Neuropsychiatric Interview (M.I.N.I.): the development and validation of a structured diagnostic psychiatric interview for DSM-IV and ICD-10. *J Clin Psychiatry* 59 (Suppl 20): 22-33; quiz 34-57, 1998.
 - 2
 - 3
 - 4 45. Strauss E, Sherman EMS and Spreen O: *A Compendium of Neuropsychological Tests: Administration, Norms and Commentary*. 3rd edition, Oxford University Press, Inc., New York, NY, 2006.
 - 5
 - 6 46. Wechsler D: *Wechsler Abbreviated Scale of Intelligence*. The Psychological Corporation: Harcourt Brace and Company, New York, NY, 1999.
 - 7
 - 8 47. Wechsler D: *Wechsler Adult Intelligence Scale-Revised*. The Psychological Corporation, San Antonio, TX, 1981.
 - 9
 - 10 48. Lezak MD: *Neuropsychological Assessment*. Oxford University Press, Inc., New York, NY, 2004.
 - 11
 - 12 49. Laitinen J, Samarut J and Hölttä E: A nontoxic and versatile protein salting-out method for isolation of DNA. *Biotechniques* 17: 316, 318, 320-322, 1994.
 - 13
 - 14 50. Clark L, Cools R and Robbins TW: The neuropsychology of ventral prefrontal cortex: decision-making and reversal learning. *Brain Cogn* 55: 41-53, 2004.
 - 15
 - 16 51. Kimberg DY, D'Esposito M and Farah MJ: Effects of bromocriptine on human subjects depend on working memory capacity. *Neuroreport* 8: 3581-3585, 1997.
 - 17
 - 18 52. Mattay VS, Goldberg TE, Fera F, Hariri AR, Tessitore A, Egan F, *et al*: Catechol-O-methyltransferase val158-met genotype and individual variation in the brain response to amphetamine. *Proc Natl Acad Sci USA* 100: 6186-6191, 2003.
 - 19
 - 20 53. Sprague RL and Sleator EK: Methylphenidate in hyperkinetic children: differences in dose effects on learning and social behavior. *Science* 198: 1274-1276, 1977.
 - 21
 - 22 54. Cousins DA, Butts K and Young AH: The role of dopamine in bipolar disorder. *Bipolar Disord* 11: 787-806, 2009.
 - 23
 - 24 55. Jiang H, Xie T, Ramsden DB and Ho SL: Human catechol-O-methyltransferase down-regulation by estradiol. *Neuropharmacology* 45: 1011-1018, 2003.
 - 25
 - 26 56. Cohn CK and Axelrod J: The effect of estradiol on catechol-O-methyltransferase activity in rat liver. *Life Sci* 10: 1351-1354, 1971.
 - 27
 - 28 57. Lindamer LA, Lohr JB, Harris MJ and Jeste DV: Gender, estrogen, and schizophrenia. *Psychopharmacol Bull* 33: 221-228, 1997.
 - 29
 - 30
 - 31
 - 32
 - 33
 - 34
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 - 36
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 - 47
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 - 54
 - 55
 - 56
 - 57
 - 58
 - 59
 - 60
58. Halbreich U: Role of estrogen in postmenopausal depression. *Neurology* 48 (Suppl 7): S16-S19, 1997.
 59. Colzato LS, Hertsig G, van den Wildenberg WP and Hommel B: Estrogen modulates inhibitory control in healthy human females: evidence from the stop-signal paradigm. *Neuroscience* 167: 709-715, 2010.
 60. Gasbarri A, Pompili A, d'Onofrio A, Cifariello A, Tavares MC and Tomaz C: Working memory for emotional facial expressions: role of the estrogen in young women. *Psychoneuroendocrinology* 33: 964-972, 2008.
 61. Andrewes D: *Neuropsychology. From Theory to Practice*. Psychology Press, New York, NY, 2001.
 62. Devinsky O and D'Esposito M: *Neurology of Cognitive and Behavioral Disorders*. Oxford University Press, New York, NY, 2004.
 63. Darby D and Walsh KW: *Walsh's Neuropsychology: A Clinical Approach*. 5th edition Elsevier Churchill Livingstone, Edinburgh, 2005.
 64. Ruff RM, Light RH, Parker SB and Levin HS: Benton Controlled Oral Word Association Test: reliability and updated norms. *Arch Clin Neuropsychol* 11: 329-338, 1996.
 65. Henry JD and Beatty WW: Verbal fluency deficits in multiple sclerosis. *Neuropsychologia* 44: 1166-1174, 2006.
 66. Bolla KI, Lindgren KN, Bonaccorsy C and Bleecker ML: Predictors of verbal fluency (FAS) in the healthy elderly. *J Clin Psychol* 46: 623-628, 1990.
 67. Selnes OA, Jacobson L, Machado AM, Becker JT, Wesch J, Miller EN, *et al*: Normative data for a brief neuropsychological screening battery. Multicenter AIDS Cohort Study. *Percept Mot Skills* 73: 539-550, 1991.
 68. Libon D, David J, Glosser G, Malamut BL, Kaplan E, Goldberg E, *et al*: Age, executive functions, and visuospatial functioning in healthy older adults. *Neuropsychology* 8: 38-43, 1994.
 69. Tombaugh TN, Kozak J and Rees L: Normative data stratified by age and education for two measures of verbal fluency: FAS and animal naming. *Arch Clin Neuropsychol* 14: 167-177, 1999.
 70. Ruff RM, Allen CC, Farrow CE, Niemann H and Wylie T: Figural fluency: differential impairment in patients with left versus right frontal lobe lesions. *Arch Clin Neuropsychol* 9: 41-55, 1994.
 71. Miller BL and Cummings JL (eds): *The Human Frontal Lobes: Functions and Disorders*. 2nd edition. The Guilford Press, New York, NY, 2007.