

# Antidepressant mechanism and active compounds of saffron from network pharmacology study

Yu Jiang<sup>1</sup>, Zhuoyi Chen<sup>1</sup>, Yingpeng Tong<sup>2\*</sup> and Ping Wang<sup>1\*</sup>

<sup>1</sup>College of Pharmaceutical Sciences, Zhejiang University of Technology, Hangzhou, China

<sup>2</sup>School of Life Sciences, Taizhou University, Taizhou, China

**Abstract:** Saffron has been applied in depression treatment, but its antidepressant compounds and mechanisms are unclear. In this research, a network pharmacology-based method was proposed to screen the active compounds and the potential mechanisms of saffron for depression treatment. Firstly, the chemical compounds of saffron were collected from literature and filtered by drug-like prediction. Secondly, common targets, by comparing the targets of saffron predicted by Pharm Mapper server with targets associated with depression collected from Genecards, were regarded as the antidepressant targets of saffron. Thirdly, common targets were mapped to KEGG pathways, considered as the pathways related with the antidepressant effects of saffron. Finally, the network of compounds-targets-pathways was constructed and analyzed by cytoscape 3.4.0. Ten compounds including crocetin, picrocrocin, (1R, 5S, 6R)-5-(hydroxymethyl)-4,4,6-trimethyl-7-Oxabicyclo[4.1.0]heptan-2-one and its glycoside were screened as the main antidepressant compounds, some of which were reported for the first time. They might have effective treatment for depression by acting on targets, such as MAP2K1, MAPK1, HRAS, PIK3R1, ALB and AKT1 and pathways related with immune system, signal transduction and so on. This study provided a new insight into the antidepressant mechanism and active compounds of saffron, which also had a guiding effect on later experiments.

**Keywords:** Depression, saffron, network pharmacology.

## INTRODUCTION

Depression, a common mental disorder with a lifetime prevalence of 15-20% (Richards, 2001), has over 300 million patients in the world. It is also a leading cause of disability worldwide and a major contributor to the global burden of disease. However, antidepressant drugs, such as citalopram, duloxetine, fluoxetine, imipramine, sertraline, are limited to use because of their side-effects including suicide risk (Cipriani *et al.*, 2016). Complementary and alternative medicines (CAM) are also widely used in the prevention and treatment of depression. According to a 2016 survey study, CAM was used in nearly 40% of adults with moderate mental distress in past one year (Rhee *et al.*, 2017).

Saffron, the stigma of *Crocus sativus* L., is a commonly used spice of CAM for depression treatment in China (Yeun *et al.*, 2014) and Iran (Mollazadeh *et al.*, 2015), which was supported by increasing evidence from clinical researches (Hausenblas *et al.*, 2013; Lopresti AL and Drummond PD, 2014). The results of these clinical researches demonstrated that the antidepressant effect of saffron was significantly higher than placebo (Mazidi *et al.*, 2016) and was not significantly different with fluoxetine (Noorbala *et al.*, 2005; Shahmansouri *et al.*, 2014; Kashani *et al.*, 2017) or imipramine (Amir-Hossein *et al.*, 2004). Compounds from saffron, such as crocin (Talaie *et al.*, 2015; Amin *et al.*, 2015), crocetin (Amin *et al.*, 2015), safranal (Hossein-zadeh *et al.*, 2015) and kaempferol (Hossein-zadeh *et al.*, 2007), were also turned

out to have antidepressant activity from clinical trials or animal studies. In our previous review article (Ping *et al.*, 2014), we found that at least 53 compounds had been isolated from saffron. In addition to the above four compounds, which compounds also have antidepressant activity? It is not yet known. At present, there are few studies on the antidepressant mechanism of saffron. As far as we know, only two studies were carried out to demonstrate that saffron could be used for depression treatment by increasing the levels of brain-derived neurotrophic factor (BDNF), VGF (non-acronymic), cAMP response element binding protein (CREB) and phosphorylated CREB (P-CREB) in hippocampus (Hassani *et al.*, 2014; Ghasemi *et al.*, 2015). However, there has been no study to explore the reasons why saffron can increase the levels of BDNF, VGF, CREB and P-CREB in hippocampus. We think the exact antidepressant mechanisms of saffron remain to be investigated.

The conventional method of discovering the active ingredients from CAM and studying their mechanism of action is to extract and isolate different compounds in CAM, then to test the biological activity in cell or animal models, finally, to elucidate the mechanism of each compound according to the research experience or literatures. This method was time-consuming and costly in separation and screening research process because of the numerous chemical compounds in CAM. In addition, most of the active chemical compounds in CAM may only have weak or moderate activity on multiple cellular

\*Corresponding author: e-mail: wangping45@zjut.edu.cn; fish166@tzc.edu.cn

targets and its pharmacological effects may be mainly due to the synergistic effect of different chemical composition. It is likely to fail in screening the main active ingredients in CAM by isolating the compounds with synergistic effects.

With the rapid development of bioinformatics, the concept of network pharmacology was put forward in 2007 (Hopkins, 2007) and was applied in drug discovery in 2008 (Hopkins, 2008) by Hopkins. From then on, it attracted great interest in CAM research because it can reveal the intricate relationships between multi-compounds, multi-targets and diseases (Qi *et al.*, 2016; Fang *et al.*, 2017; Zeng and Yang, 2017). It has been used in discovering active compounds in CAM and clarifying its mechanism. As far as we know, there was no report about saffron research on network pharmacology. To obtain a better understanding of which are the main active compounds in saffron for depression treatment and how they affect biological processes, network pharmacology technologies were proposed in our work.

## MATERIALS AND METHODS

### *Database construction of chemical compounds in saffron*

Chemical compounds in saffron were collected from literatures. After removing the repeated compounds, 53 compounds were obtained. Deglycosylation by enteric bacteria would appear in oral administrated drugs, thus compounds with glycosyl were further deglycosylated based on the rule of glycosidase hydrolysis reaction and other 6 compounds without overlap were obtained. The above 59 compounds were drawn using Chem Bio Draw Ultra 14.0 and saved as sdf format for further analysis.

### *Chemical space and drug-likeness prediction*

In this article, the following 8 physicochemical properties were calculated using discovery studio 2.5: Octanol-water partition coefficient (AlogP), molecular weight (MW), number of H acceptors (ON), number of H donors (OHNH), number of rotatable bonds (n rotb), number of rings, number of aromatic rings (n atoms) and molecular fractional polar surface area (TPSA). Four of these properties, including OHNH, ON, MW and AlogP, were used to filter the drug-like compounds in saffron according to Lipinski's 'rule of five' (Lipinski, 2004).

### *Target prediction of saffron compounds*

The saffron compounds met the Lipinski's 'rule of five' were submitted to the PharmMapper server (<http://59.78.96.61/pharmmapper>) for target prediction (Liu *et al.*, 2010; Wang *et al.*, 2016). Before the tools running, the targets were chosen as 'Human Protein Targets Only', the maximum generated conformations and the number of reserved matched targets was set as 100 and 300, respectively. After the results given by the PharmMapper server, we chose the targets which the fit

score was more than 3.0 as the main targets of the saffron compounds.

### *Collection of potential compounds in saffron and their targets for depression treatment*

The targets related with depression were collected from GeneCards (<http://www.genecards.org/>) (Rebhan *et al.*, 1997). From this database, relevance score was set more than 100 and 164 targets were collected. Then the targets of depression collected from Gene Cards were compared with the targets of saffron compounds predicted by PharmMapper server, and the common targets were regarded as targets of saffron compounds for anti-depression.

### *Pathway enrichment analysis*

Kyoto Encyclopedia of Genes and Genomes (KEGG) pathway enrichment analysis for predicted antidepressant targets of saffron compounds was carried out by Database for Annotation, Visualization and Integrated Discovery (DAVID) (Huang, 2009). Only KEGG pathways with P-values<0.01 were regarded as the main pathways interacted with antidepressant compounds of saffron.

### *Network construction and analysis*

The potential compounds-targets-pathways network was constructed by Cytoscape 3.4.0 (Shannon *et al.*, 2003; Smoot *et al.*, 2010). In this network, the active compounds, targets and pathways were represented as nodes, the active-targets and targets-pathways were connected by edges. If a target was mapped to a pathway, compounds linked to this target were also connected with this pathway by edges. The degree of each node was calculated to measure its importance in the network.

## RESULTS

### *Drug-likeness filtering*

According to the Lipinski's 'rule of five', 41 compounds out of 59 compounds in saffron were identified as absorbable components. The average of number of H donors (OHNH), number of H acceptors (ON), molecular weight (MW) and octanol-water partition coefficient (AlogP) of 41 absorbable components were 2.02, 3.93, 226.17 and 1.05, respectively.

### *The antidepressant targets of saffron compounds*

From the GeneCards database (<http://www.genecards.org/>), 164 targets of depression were collected. The 5-Hydroxytryptamine Receptor 2A (HTR2A), Dopamine Receptor D3 (DRD3), which were the main targets of FDA-approved antidepressants, were all included. But there were only 14 common targets by comparison of the targets of above 41 absorbable compounds predicted by Pharm Mapper server (<http://59.78.96.61/pharmmapper>). These 14 common targets were shown in table 1 and identified as the potential antidepressant targets of saffron compounds.

**Table 1:** The potential antidepressant targets of saffron compounds

Targets	Description	Relevance score
FGFR1	Fibroblast Growth Factor Receptor 1	213.43
NR3C1	Nuclear Receptor Subfamily 3 Group C Member 1	193.6
MAP2K1	Dual specificity mitogen-activated protein kinase kinase 1	153.02
AKT1	AKT Serine/Threonine Kinase 1	147.69
HRAS	HRas Proto-Oncogene, GTPase	130.25
PTPN11	Protein Tyrosine Phosphatase, Non-Receptor Type 11	130.25
ALB	Albumin	120.58
MAPK1	Mitogen-Activated Protein Kinase 1	120.58
DPP4	Dipeptidyl Peptidase 4	112.87
BMP2	Bone Morphogenetic Protein 2	110.08
PDE4D	Phosphodiesterase 4D	110.08
PIK3R1	Phosphoinositide-3-Kinase Regulatory Subunit 1	110.08
ESR1	Estrogen Receptor 1	106.72
MAOB	Monoamine Oxidase B	100.13

**Table 2:** Enriched KEGG pathways of saffron selected targets

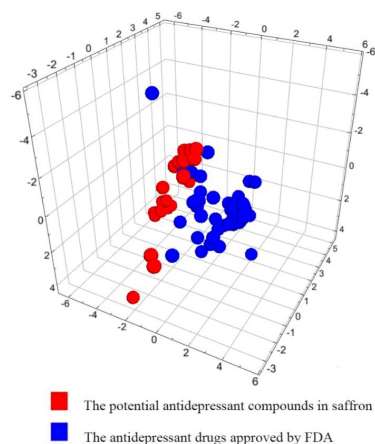
Pathway class	Term	Count	P Value
Cancers	map05205	Proteoglycans in cancer	1.02E-08
	map05230	Central carbon metabolism in cancer	4.09E-08
	map05211	Renal cell carcinoma	5.21E-08
	map05218	Melanoma	8.16E-08
	map05220	Chronic myeloid leukemia	8.77E-08
	map05215	Prostate cancer	2.29E-07
	map05213	Endometrial cancer	1.57E-06
	map05221	Acute myeloid leukemia	1.97E-06
	map05223	Non-small cell lung cancer	2.11E-06
	map05214	Glioma	3.59E-06
	map05231	Choline metabolism in cancer	1.93E-05
	map05200	Pathways in cancer	2.46E-05
	map05210	Colorectal cancer	1.44E-04
	map05212	Pancreatic cancer	1.66E-04
	map05216	Thyroid cancer	0.001215003
	map05219	Bladder cancer	0.002265706
Cell motility	map04810	Regulation of actin cytoskeleton	3.64E-04
Cellular Community - eukaryotes	map04550	Signaling pathways regulating pluripotency of stem cells	5.10E-08
	map04510	Focal adhesion	3.44E-04
Development	map04380	Osteoclast differentiation	0.001247367
Endocrine system	map04917	Prolactin signaling pathway	8.77E-08
	map04915	Estrogen signaling pathway	3.75E-07
	map04919	Thyroid hormone signaling pathway	8.49E-07
	map04910	Insulin signaling pathway	6.76E-05
	map04914	Progesterone-mediated oocyte maturation	3.99E-04
	map04921	Oxytocin signaling pathway	0.002214394
	map04912	GnRH signaling pathway	0.009022359
Immune system	map04664	Fc epsilon RI signaling pathway	3.38E-06
	map04662	B cell receptor signaling pathway	4.31E-06
	map04650	Natural killer cell mediated cytotoxicity	1.86E-05
	map04660	T cell receptor signaling pathway	2.26E-05
	map04062	Chemokine signaling pathway	1.58E-04
	map04666	Fc gamma R-mediated phagocytosis	3.72E-04
	map04620	Toll-like receptor signaling pathway	5.51E-04

Continue...

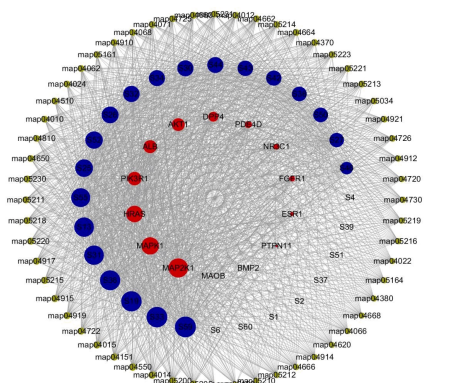
Infectious diseases	map05161	Hepatitis B	8.01E-05
	map05160	Hepatitis C	0.001276024
	map05164	Influenza A	0.002255549
Nervous system	map04722	Neurotrophin signaling pathway	1.10E-06
	map04725	Cholinergic synapse	3.15E-05
	map04726	Serotonergic synapse	8.43E-04
	map04730	Long-term depression	0.004800092
	map04720	Long-term potentiation	0.005613127
Signal transduction	map04014	Ras signaling pathway	8.10E-07
	map04370	VEGF signaling pathway	2.43E-06
	map04012	ErbB signaling pathway	1.16E-05
	map04015	Rap1 signaling pathway	1.68E-05
	map04071	Sphingolipid signaling pathway	4.28E-05
	map04068	FoxO signaling pathway	5.84E-05
	map04151	PI3K-Akt signaling pathway	1.75E-04
	map04024	cAMP signaling pathway	2.63E-04
	map04066	HIF-1 signaling pathway	6.59E-04
	map04668	TNF signaling pathway	6.78E-04
	map04010	MAPK signaling pathway	7.07E-04
	map04022	cGMP-PKG signaling pathway	0.002647682
	map04150	mTOR signaling pathway	0.004644653
Substance dependence	map05034	Alcoholism	0.002381886

**Table 3:** The degree of each node in the C-T-P network

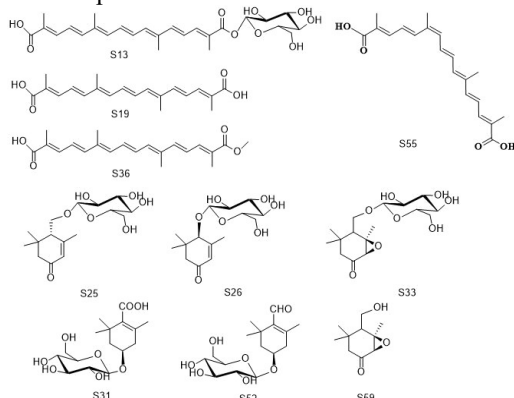
Node	Degree	Node	Degree	Node	Degree	Node	Degree
MAP2K1	72	S30	60	map04917	26	map05221	25
MAPK1	65	S34	60	map04919	26	map05223	25
HRAS	62	S44	60	map05211	26	map05231	25
PIK3R1	51	S43	58	map05215	26	map04726	24
ALB	49	S42	57	map05218	26	map04921	24
AKT1	48	S38	55	map05220	26	map05034	24
DPP4	37	S50	55	map05230	26	map04720	23
PDE4D	26	S27	54	map04010	25	map04730	23
NR3C1	22	S46	47	map04012	25	map04912	23
FGFR1	21	S4	3	map04024	25	map05216	23
ESR1	15	S39	2	map04062	25	map05219	23
PTPN11	9	S51	2	map04068	25	map04022	22
BMP2	4	S1	1	map04071	25	map04066	22
MAOB	3	S2	1	map04370	25	map04380	22
S59	78	S37	1	map04510	25	map04620	22
S33	77	S6	1	map04650	25	map04666	22
S19	76	S60	1	map04660	25	map04668	22
S36	75	map05205	28	map04662	25	map04914	22
S13	73	map04014	27	map04664	25	map05164	22
S31	73	map04550	27	map04725	25	map05210	22
S55	71	map05200	27	map04810	25	map05212	22
S25	66	map04015	26	map04910	25	map05160	19
S52	65	map04151	26	map05161	25	map04150	14
S26	63	map04722	26	map05213	25		
S32	61	map04915	26	map05214	25		



**Fig. 1:** The comparison in physicochemical properties of potential antidepressant compounds of saffron and FDA-approved antidepressants



**Fig. 2:** The compounds-targets-pathways network of saffron for depression treatment



**Fig. 3:** Main active compounds of saffron for depression treatment

#### *The differences in physicochemical properties of potential antidepressant compounds of saffron and FDA-approved antidepressants*

Of the above 41 absorbable compounds, 28 compounds, which may interact with one or more of the targets in table 1, were considered to be the potential antidepressant compounds of saffron. In order to compare the physicochemical properties of these 28 compounds and

FDA-approved antidepressants, 49 antidepressants were collected from drugbank database (<https://www.drugbank.ca/>). In these antidepressants, there were 47 drugs and 2 nutraceuticals (Oxitriptan and St. John's Wort). Because the St John's Wort was a plant extract with a variety of compounds and Olanzapine/fluoxetine was a mixture of two drugs, both of these two antidepressants were excluded from physicochemical properties analysis.

In addition to number of H donors (OHNH), number of H acceptors (ON), molecular weight (MW) and octanol-water partition coefficient (AlogP), other five physicochemical properties of compounds including number of rota table bonds (n rotb), number of rings, number of aromatic rings (n atoms) and molecular fractional polar surface area (TPSA) were also analyzed. Based on the data of above 8 physicochemical properties, the 28 potential antidepressant compounds of saffron and 47 FDA-approved antidepressants were compared by PCA method. As showed in fig. 1, the physicochemical properties of two groups were quite different.

#### *Pathway enrichment analysis of 14 targets*

In order to elucidate the biological pathways that antidepressant compounds of saffron might impact, the above 14 targets were mapped to KEGG pathways and showed in table 2. These pathways could be divided into 10 classes, including Cancers, Cell motility, Cellular community-eukaryotes, Development, Endocrine system, Immune system, Infectious diseases, Nervous system, Signal transduction and Substance dependence.

#### *Compounds-targets-pathways(C-T-P) network analysis*

Network Analyzer, a cytoscape plugin, was used to analyze the C-T-P network. As shown in fig. 2, the C-T-P network was consisted of 98 nodes (including 28 compounds, 14 targets and 56 pathways) and 1570 edges. The degree of each node in C-T-P network was listed in table 3.

The degrees of top 10 compounds, including S59, S33, S19, S36, S13, S31, S55, S25 and S52, were all larger than 65. These compounds shown in fig. 3 were regarded as the main antidepressant compounds of saffron. Dual specificity mitogen-activated protein kinase kinase 1 (MAP2K1), Mitogen-Activated Protein Kinase 1 (MAPK1), HRas Proto-Oncogene, GTPase (HRAS), Phosphoinositide-3-Kinase Regulatory Subunit 1 (PIK3R1), Albumin (ALB) and AKT Serine/Threonine Kinase 1 (AKT1) were the main targets of antidepressant compounds of saffron. The degree of above 6 targets was 72, 65, 62, 51, 49 and 48, respectively. The potential 14 antidepressant targets of saffron were mapped to 56 pathways. Except for map 05160 and map04150, the degrees of all other pathways were ranged from 22 to 28. The results might indicate that the active compounds of saffron may exert antidepressant activity by affecting multiple signalling pathways.

## DISCUSSION

In our study, the ten compounds in Figure 3 were considered to be the main antidepressant ingredients of saffron. Among them, S19 (degree=76), named *trans*-crocetin, was reported to have antidepressant activity (Amin *et al.*, 2015). The structures of S13, S36 and S55 were similar to S19. Others in these ten compounds were found to have antidepressant effects for the first time, including picrocrocin (S52, degree=65), which was the most important bitter compound in saffron. But unlike the reported results, the degree of safranal (S34), which can reduce immobility time, increase swimming time and climbing time by using forced swimming test in mice and was considered to be another important antidepressant compound in saffron (Hosseinzadeh *et al.*, 2015), was only 60 and ranked 11<sup>th</sup>. Therefore, we think safranal might be an active compound in saffron for depression but it was less important in the antidepressant network of saffron compounds than the 10 compounds in fig. 3. Through the comparison of antidepressant components of saffron with FDA-approved antidepressants, the chemical structure of the two groups was quite different. Therefore, the antidepressant mechanism of saffron might be different from that of FDA-approved antidepressants, which is further confirmed by the results of C-T-P network analysis. From the results of C-T-P network analysis, we found that the main antidepressant targets for the active ingredient of saffron were MAP2K1, MAPK1, HRAS, PIK3R1, ALB and AKT1, rather than targets for FDA-approved antidepressant drugs such as HTR2A, DRD3 and so on. MAP2K1, also named MEK1 and PRKMK1, was an essential component of the MAP kinase signal transduction pathway. In 2014, Wu *et al* found that the MAP2K1 mRNA levels were significantly reduced in depression patients when compared with healthy controls (Hong *et al.*, 2014). A recent study of Hu *et al* including 425 depression patients showed that three SNPs (rs1549854, rs1432441 and rs7182853) in the MAP2K1 gene had significantly different distributions in the depression patients than in the healthy volunteers. These results demonstrate that the MAP2K1 gene may be a risk factor for depression (Hu *et al.*, 2017). Hu *et al* also found MAP2K1 was associated with the BDNF/MARK pathway in depressive disorder (Hu *et al.*, 2017). And as we mentioned in this article, saffron and its main compound can significantly increase the levels of BDNF in hippocampus of rats in the forced swimming test (FST) (Hassani *et al.*, 2014; Ghasemi *et al.*, 2015), we believe MAP2K1 may be involved in mechanisms of increasing the levels of BDNF in hippocampus by saffron. In addition to MAP2K1, previous researches had demonstrated that the targets of MAPK1 (Calati *et al.*, 2013; Garbett *et al.*, 2015), HRAS (Garbett *et al.*, 2015), PIK3R1 (Garbett *et al.*, 2015), ALB (Maes *et al.*, 1995) and AKT1 (Yang *et al.*, 2012) were associated with depression.

The degree of pathways involved in saffron for depression was almost the same. In fact, some of these pathways had been shown to be closely related to the pathogenesis of depression. For example, recent data had elucidated that inflammation in brain could drive the development of depression and targeting the immune system was a potential way to depression treatment (Miller and Raison, 2016). Therefore, the pathways related with immune system, including Fc epsilon RI signaling pathway (map04664), B cell receptor signaling pathway (map04662), Natural killer cell mediated cytotoxicity (map04650), T cell receptor signalling pathway (map04660), Chemokine signalling pathway (map04062), Fc gamma R-mediated phagocytosis (map04666) and Toll-like receptor signaling pathway (map04620), might be the important pathways for the antidepressant effect of the active compounds from saffron. Some pathways related signal transduction might also be involved in depression treatment. Such as MAPK signalling pathway (map04010) (Malki *et al.*, 2015), it might also be activated by ROS to exert a significant effect on inflammatory pathways of depression (Bakunina *et al.*, 2015). Except for MAPK signalling pathway, other pathway related with signal transduction, including Ras signalling pathway (map04014) (Pace *et al.*, 2007), ErbB signalling pathway (map04012) (Roy *et al.*, 2007), VEGF signalling pathway (map04370) (Warner-Schmidtl and Duman, 2008), had also been shown to be associated with depression. In addition, 16 types of cancers associated pathways had been observed from table 2, which may be caused by the close relationship between depression and many types of cancer (Raison and Miller, 2003; Bortolato *et al.*, 2017).

## CONCLUSION

In summary, there were ten main active compounds of saffron screened by network pharmacology study, including crocetin, picrocrocin, (1R, 5S, 6R)-5-(hydroxymethyl)-4, 4, 6-trimethyl-7-Oxabicyclo [4.1.0]heptan-2-one and its glycoside. Meanwhile, the antidepressant mechanism of saffron might be different from that of FDA-approved antidepressants according to the C-T-P network analysis, resulting from the major targets for the active ingredient were MAP2K1, MAPK1, HRAS, PIK3R1, ALB and AKT1, other than targets for FDA-approved antidepressant drugs. Given the results of this study, more studies are needed in the future to further validate the results of this study.

## ACKNOWLEDGEMENTS

This work was supported by Natural Science Foundation of China (81703688), Zhejiang Province International Science and Technology Cooperation Belt and Road Special Project (2017C04009) and Key Special Projects of Intergovernmental International Science and Technology Innovation Cooperation (2017YFE0130100).

## REFERENCES

- Amin B, Nakhsaz A and Hosseinzadeh H (2015). Evaluation of the antidepressant-like effects of acute and sub-acute administration of crocin and crocetin in mice. *Avicenna J. Phytomed.*, **5**(5): 458-468.
- Amir-Hosseini J, Khosro A, Hasan FP, Shahin A and Farahnaz KC (2004). Comparison of *Crocus sativus* L. and imipramine in the treatment of mild to moderate depression: A pilot double-blind randomized trial [ISRCTN45683816]. *BMC Complement Altern. Med.*, **4**: 1-5.
- Bakunina N, Pariante CM and Zunszain PA (2015). Immune mechanisms linked to depression via oxidative stress and neuroprogression. *Immunology*, **144**(3): 365-373.
- Bortolato B, Hyphantis TN, Valpione S, Perini G, Maes M, Morris G, Marta Kubera, Cristiano A Kohler, Brisa S Fernandes, Brendon Stubbs, Nicholas Pavlidis and Andre F Carvalho (2017). Depression in cancer: The many biobehavioral pathways driving tumor progression. *Cancer Treat. Rev.*, **52**: 58-70.
- Calati R, Crisafulli C, Balestri M, Serretti A, Spina E, Calabro M, Antonina Sidoti, Diego Albani, Isabelle Massat, Peter Höfer, Daniela Amital, Alzbeta Juven-Wetzler, Siegfried Kasper, Joseph Zohar, Daniel Souery, Stuart Montgomery and Julien Mendlewicz (2013). Evaluation of the role of MAPK1 and CREB1 polymorphisms on treatment resistance, response and remission in mood disorder patients. *Prog. Neuro. Psycho. Pharmacol. Biol. Psychiatry*, **44**: 271-278.
- Cipriani A, Zhou X, Del Giovane C, Hetrick SE, Qin B, Whittington C, David Coghill, Yuqing Zhang, Philip Hazell, Stefan Leucht, Pim Cuijpers, Juncai Pu, David Cohen, Arun V Ravindran, Yiyun Liu, Kurt D Michael, Lining Yang, Lanxiang Liu and Peng Xie (2016). Comparative efficacy and tolerability of antidepressants for major depressive disorder in children and adolescents: A network meta-analysis. *Lancet*, **388**(10047): 881-890.
- Fang J, Wang L, Wu T, Yang C, Gao L, Cai H, Junhui Liu, Shuhuan Fang, Yunbo Chen, Wen Tan and Qi Wang (2017). Network pharmacology-based study on the mechanism of action for herbal medicines in Alzheimer treatment. *J. Ethnopharmacol.*, **196**: 281-292.
- Garbett KA, Vereczkei A, Kalman S, Brown JA, Taylor WD, Faludi G, Zeljka Korade, Richard C Shelton and Karoly Mirnics (2015). Coordinated messenger RNA/microRNA changes in fibroblasts of patients with major depression. *Biol. Psychiatry*, **77**(3): 256-265.
- Ghasemi T, Abnous K, Vahdati F, Mehri S, Razavi B and Hosseinzadeh H (2015). Antidepressant effect of *Crocus sativus* aqueous extract and its effect on CREB, BDNF, and VGF transcript and protein levels in Rat hippocampus. *Drug Res.*, **65**(7): 337-343.
- Hassani FV, Naseri V, Razavi BM, Mehri S, Abnous K and Hosseinzadeh H (2014). Antidepressant effects of crocin and its effects on transcript and protein levels of CREB, BDNF and VGF in rat hippocampus. *DARU J. Pharm. Sci.*, **22**(1): 16-24.
- Hausenblas HA, Saha D, Dubyak PJ and Anton SD (2013). Saffron (*Crocus sativus* L.) and major depressive disorder: A meta-analysis of randomized clinical trials. *J. Integr. Med.*, **11**(6): 377-383.
- Hong W, Fan J, Yuan C, Zhang C, Hu Y, Peng D, Yong Wang, Jia Huang, Zezhi Li, Shunying Yu, Xiaohua Liu, Zhiguo Wu, Jun Chen, Zhenghui Yi, Lin Xu and Yiru Fang (2014). Significantly decreased mRNA levels of BDNF and MEK1 genes in treatment-resistant depression. *Neuroreport*, **25**(10): 753-755.
- Hopkins AL (2007). Network pharmacology. *Nat. Biotechnol.*, **25**(10): 1110-1111.
- Hopkins AL (2008). Network pharmacology: The next paradigm in drug discovery. *Nat. Chem. Biol.*, **4**(11): 682-690.
- Hosseinzadeh H, Karimi G and Niapoor M (2015). Antidepressant effects of *Crocus sativus* stigma extracts and its constituents, crocin and safranal, in mice. *J. Med. Plant*, **3**: 48-58.
- Hosseinzadeh H, Motamedshariaty V and Hadizadeh F (2007). Antidepressant effect of kampferol, a constituent of saffron (*Crocus sativus*) petal, in mice and rats. *Pharmacology online*, **2**: 367-370.
- Hu Y, Hong W, Smith A, Yu S, Li Z, Wang D, Chengmei Yuan, Lan Cao, Zhiguo Wu, Jia Huang, Drew Fralick, Michael Robert Phillips and Yiru Fang (2017). Association analysis between mitogen-activated protein/extracellular signal-regulated kinase (MEK) gene polymorphisms and depressive disorder in the Han Chinese population. *J. Affect Disord.*, **222**: 120-125.
- Huang DW, Sherman BT and Lempicki RA (2009). Systematic and integrative analysis of large gene lists using DAVID bioinformatics resources. *Nat. Protoc.*, **4**(1): 44-57.
- Kashani L, Eslatmanesh S, Saedi N, Niroomand N, Ebrahimi M, Hosseini M, T Foroughifar, S Salimi and S Akhondzadeh (2017). Comparison of saffron versus fluoxetine in treatment of mild to moderate postpartum depression: A double-blind, randomized clinical trial. *Pharmacopsychiatry*, **50**(2): 64-68.
- Lipinski CA (2004). Lead-and drug-like compounds: The rule-of-five revolution. *Drug Discov. Today Technol.*, **1**: 337-341.
- Liu X, Ouyang S, Yu B, Liu Y, Huang K, Gong J, Siyuan Zheng, Zhihua Li, Honglin Li and Hualiang Jiang (2010). PharmMapper server: A web server for potential drug target identification using pharmacophore mapping approach. *Nucleic Acids Res.*, **38**: W609-614.
- Lopresti AL and Drummond PD (2014). Saffron (*Crocus sativus*) for depression: A systematic review of clinical

- studies and examination of underlying antidepressant mechanisms of action. *Hum. Psychopharmacol. Clin. Exp.*, **29**(6): 517-527.
- Maes M, Wauters A, Neels H, Scharpe S, Van Gastel A, D'Hondt P, Peeters D, Cosyns P and R (1995). Total serum protein and serum protein fractions in depression: Relationships to depressive symptoms and glucocorticoid activity. *J. Affect Disord.*, **34**(1): 61-69.
- Malki K, Pain O, Tosto M, Du Rietz E, Carboni L and Schalkwyk LC (2015). Identification of genes and gene pathways associated with major depressive disorder by integrative brain analysis of rat and human prefrontal cortex transcriptomes. *Transl. Psychiatry*, **5**(3): e519.
- Mazidi M, Shemshian M, Mousavi SH, Norouzy A, Kermani T, Moghiman T, Akram Sadeghi, Naghme Mokhber, Majid Ghayour-Mobarhan and Gordon AA Ferns (2016). A double-blind, randomized and placebo-controlled trial of Saffron (*Crocus sativus* L.) in the treatment of anxiety and depression. *J. Complement Integr. Med.*, **13**(2): 195-199.
- Miller AH and Raison CL (2016). The role of inflammation in depression: From evolutionary imperative to modern treatment target. *Nat. Rev. Immunol.*, **16**(1): 22-34.
- Mollazadeh H, Emami SA and Hosseinzadeh H (2015). Razi's Al-Hawi and saffron (*Crocus sativus*): A review. *Iran J. Basic Med. Sci.*, **18**(12): 1153-1166.
- Noorbala A, Akhondzadeh S, Tahmacebi-Pour N and Jamshidi A (2005). Hydro-alcoholic extract of *Crocus sativus* L. versus fluoxetine in the treatment of mild to moderate depression: A double-blind, randomized pilot trial. *J. Ethnopharmacol.*, **97**(2): 281-284.
- Pace TW, Hu F and Miller AH (2007). Cytokine-effects on glucocorticoid receptor function: Relevance to glucocorticoid resistance and the pathophysiology and treatment of major depression. *Brain Behav. Immun.*, **21**(1): 9-19.
- Ping W, Ying-peng T, Lu-xia T, Yun-dong S and Xiaoping L (2014). Research progress on chemical constituents of *Crocus sativus* and their pharmacological activities. *Chin. Tradit. Herb. Drugs*, **45**: 3015-3028.
- Qi Q, Li R, Li HY, Cao YB, Bai M, Fan XJ, Shu-Yan Wang, Bo Zhang and Shao Li (2016). Identification of the anti-tumor activity and mechanisms of nuciferine through a network pharmacology approach. *Acta. Pharmacol. Sin.*, **37**(7): 963-972.
- Raison CL and Miller AH (2003). Depression in cancer: New developments regarding diagnosis and treatment. *Biol. Psychiatry*, **54**: 283-294.
- Rebhan M, Chalifa-Caspi V, Prilusky J and Lancet D (1997). GeneCards: Integrating information about genes, proteins and diseases. *Trends Genet.*, **13**(4): 163.
- Rhee TG, Evans RL, McAlpine DD and Johnson PJ (2017). Racial/Ethnic Differences in the Use of Complementary and Alternative Medicine in US Adults With Moderate Mental Distress: Results From the 2012 National Health Interview Survey. *J. Prim. Care Community Health*, **8**(2): 43-54.
- Richards D (2011). Prevalence and clinical course of depression: A review. *Clin. Psychol. Rev.*, **31**(7): 1117-1125.
- Roy K, Murtie JC, El-Khodori BF, Edgar N, Sardi SP, Hooks BM, Marianne Benoit-Marand, Chinfai Chen, Holly Moore, Patricio O'Donnell, Daniela Brunner and Gabriel Corfas (2007). Loss of erbB signaling in oligodendrocytes alters myelin and dopaminergic function, a potential mechanism for neuropsychiatric disorders. *PNAS*, **104**(19): 8131-8136.
- Shahmansouri N, Farokhnia M, Abbasi S-H, Kassaian SE, Tafti A-AN, Gougol A, Habibeh Yekhtaz, Saeedeh Forghani, Mehran Mahmoodian, Sepideh Saroukhani, Akram Arjmandi-Beglar and Shahin Akhondzadeh (2014). A randomized, double-blind, clinical trial comparing the efficacy and safety of *Crocus sativus* L. with fluoxetine for improving mild to moderate depression in post percutaneous coronary intervention patients. *J. Affect Disord.*, **155**: 216-222.
- Shannon P, Markiel A, Ozier O, Baliga NS, Wang JT, Ramage D, Nada Amin, Benno Schwikowski and Trey Ideker (2003). Cytoscape: A software environment for integrated models of biomolecular interaction networks. *Genome Res.*, **13**(11): 2498-2504.
- Smoot ME, Ono K, Ruscheinski J, Wang P-L and Ideker T (2010). Cytoscape 2.8: New features for data integration and network visualization. *Bioinformatics*, **27**(3): 431-432.
- Talaei A, Moghadam MH, Tabassi SAS and Mohajeri SA (2015). Crocin, the main active saffron constituent, as an adjunctive treatment in major depressive disorder: A randomized, double-blind, placebo-controlled, pilot clinical trial. *J. Affect Disord.*, **174**: 51-56.
- Wang X, Pan C, Gong J, Liu X and Li H (2016). Enhancing the enrichment of pharmacophore-based target prediction for the polypharmacological profiles of drugs. *J. Chem. Inf. Model.*, **56**(6): 1175-1183.
- Warner-Schmidt JL and Duman RS (2008). VEGF as a potential target for therapeutic intervention in depression. *Curr. Opin. Pharmacol.*, **8**(1): 14-19.
- Yang C, Sun N, Ren Y, Sun Y, Xu Y, Li A, Kewen Wu and Kerang Zhang (2012). Association between AKT1 gene polymorphisms and depressive symptoms in the Chinese Han population with major depressive disorder. *Neural. Regener. Res.*, **7**(3): 235-239.
- Yeung WF, Chung KF, Ng KY, Yu YM, Ziea ETC and Ng BFL (2014). A systematic review on the efficacy, safety and types of Chinese herbal medicine for depression. *J. Psychiatr. Res.*, **57**: 165-175.
- Zeng L and Yang K (2017). Exploring the pharmacological mechanism of Yanghe Decoction on HER2-positive breast cancer by a network pharmacology approach. *J. Ethnopharmacol.*, **199**: 68-85.