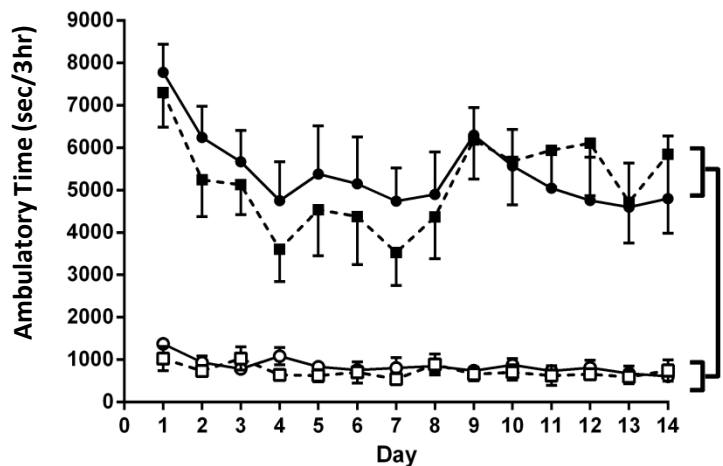
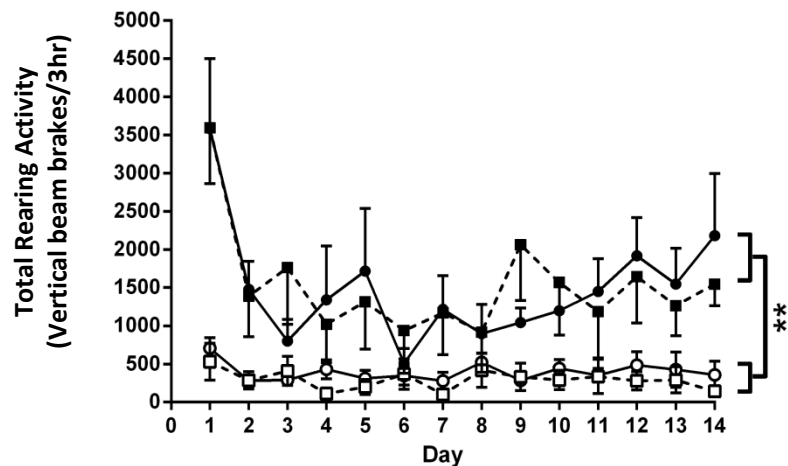


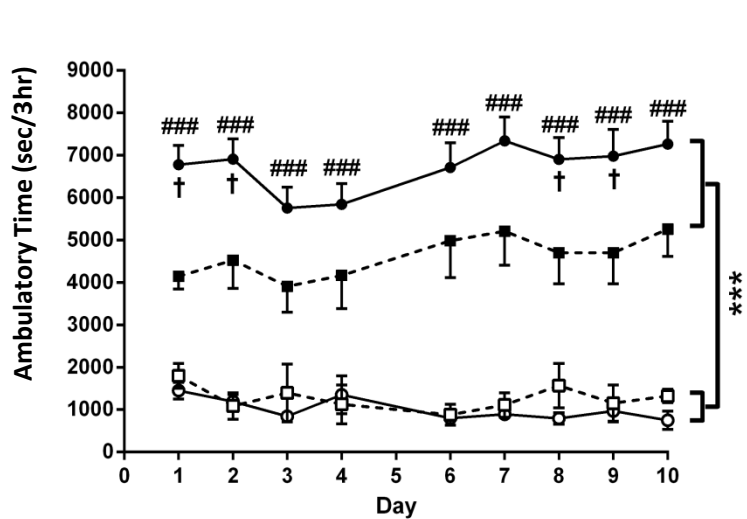
A Ambulatory Time



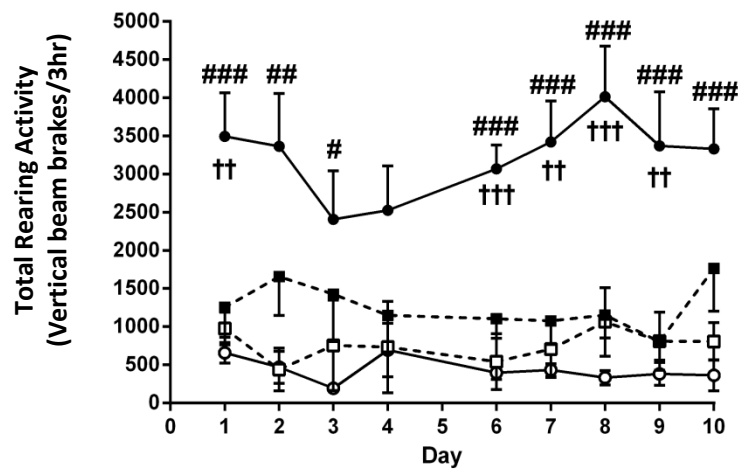
B Vertical Activity



C Ambulatory Time



D Vertical Activity



○ WT Saline ● WT Cocaine/MAP □ A_{2A}-R KO Saline ■ A_{2A}-R KO Cocaine/MAP