Supplementary material to article by M. E. Kubin et al. "Clinical Efficiency of Topical Calcipotriol/Betamethasone Treatment in Psoriasis Relies on Suppression of the Inflammatory TNFα – IL-23 – IL-17 Axis"

Fig. S1. Immunohistochemical staining of skin biopsies from a psoriatic patient; non-lesional healthy skin (left-hand column), pretreatment lesional sample (middle column) and lesional sample (right-hand column) after one week of therapy with calcipotriol/betamethasone ointment. (a) Staining with anti-IL-17A showed no positive cells in the epidermis in these skin samples. In the dermis, there were more positive cells in lesional than non-lesional skin samples. After the treatment period with calcipotriol/betamethasone, the number of IL-17A positive cells in the dermis increased. Staining with (b) anti-CD3, (c) anti-CD4 and (d) anti-CD8 showed greater numbers of positive cells in psoriatic lesional samples compared with non-lesional samples in both epidermis and dermis. Calcipotriol/betamethasone reduced the numbers of CD3⁺, CD4⁺ and CD8⁺ cells in the epidermis and dermis. (e) Staining with anti-FoxP3 was negative in epidermis in the non-lesional sample, few cells were positive in the dermis. Positive cells were found in both epidermis and dermis in lesional samples, calcipotriol/betamethasone reduced the numbers of positive cells.