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. S3. Expression of glucocorticoid receptor (GR) isoforms in skin and peripheral blood mononuclear cell (PBMC) samples from psoriatic patients and healthy controls. 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 combination. (a) Epidermal nuclear staining with the GRα antibody (arrowheads) was more prominent in psoriatic lesions than in non-lesional samples. (b) Staining with GRβ antibody showed no difference. Combination therapy decreased the nuclear staining of keratinocytes with GRα and GRβ antibodies (right-hand column, a, b, arrowheads). (c, d) Expression of GRα mRNA in skin and PBMC samples. (e, f) Expression of GRβ mRNA in skin and PBMC samples. mRNA levels were measured using quantitative real-time PCR. Control: healthy control; Non-lesional: skin biopsy from non-lesional skin of patient with psoriasis; Before treatment: skin biopsy from untreated lesional skin/PBMC sample before treatment; 1 week: skin biopsy/PBMC sample taken after one week of treatment with either betamethasone or calcipotriol/betamethasone; fold change: the normalized expression level compared with normal skin/PBMCs.