

**Brief Report: Inhibition of interleukin-6 function corrects Th17/Treg cell imbalance in patients with rheumatoid arthritis.**

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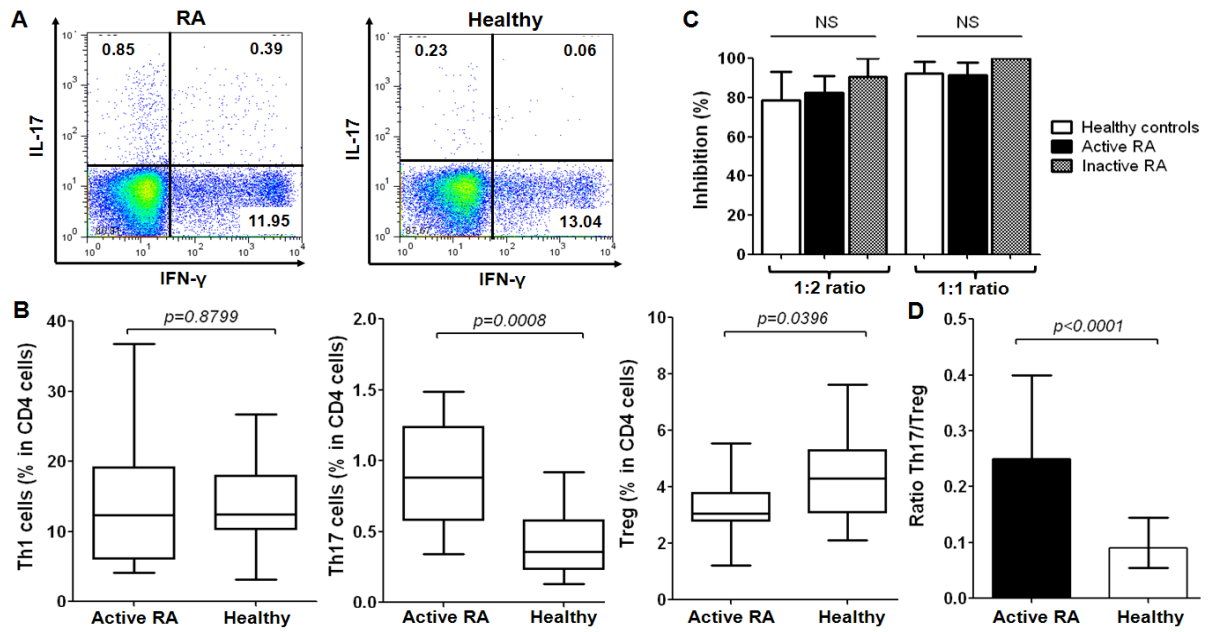
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**Figure 1: Circulating Th17 are increased in RA patients whereas Treg are decreased but functional.** **A, B:** Flow cytometry analysis of Th17 (CD4<sup>+</sup>IL-17<sup>+</sup>), Th1 (CD4<sup>+</sup>IL-17<sup>-</sup>IFN- $\gamma$ <sup>+</sup>) and Treg (CD4<sup>+</sup>CD25<sup>high</sup>Foxp3<sup>+</sup>) cells in RA patients (n=15) and healthy subjects (n=17). **C:** Functional analysis of Treg (CD4<sup>+</sup>CD25<sup>high</sup>). The proliferation index was measured with the ModFit LT<sup>TM</sup> 3.0 software. The percentage of inhibition was calculated using the proliferation index of stimulated T effectors without Treg as reference. Percentages of inhibition were compared ratio to ratio. Active RA patients (n=6), TCZ treated RA (n=3) and healthy controls (n=6). **D:** Th17/Treg ratio. RA patients (n=15), healthy subjects (n=17). The Mann Whitney U test (Kruskall-Wallis test for 1C) was used for statistical analysis. NS: not statistically significant. Whiskers are as follow: the median (horizontal bar), the IQ range (box) and the extreme values (error bars).