B cells and B cell directed therapies in rheumatoid arthritis: towards personalized medicine
Thurlings, R.M.

Citation for published version (APA):
Different patterns of lymphocyte infiltration in representative synovial tissue specimens from patients with rheumatoid arthritis. In some patients, mixed infiltration of aggregates of T and B cells was present (A and C), together with a high number of infiltrating macrophages (C). In other patients, there was diffuse or scarce infiltration of CD3+ T cells (B), and few or no B cells (D), while macrophages were the dominant infiltrating cell population (F). (Original magnification x 20.)
Chapter 4 Figure. Change in the number of CD22+ B cells in representative serial synovial tissue samples obtained from 2 different rheumatoid arthritis patients before (A and C) and 4 weeks after (B and D) initiation of rituximab treatment. Different patterns of depletion were identified. In some patients, there was complete B cell depletion (compare A and B), while in other patients, few B cells were depleted (compare C and D). (Original magnification x 20.)

Chapter 2 Figure. Follicular dendritic cells (FDCs) expressing the CD21 long isoform (A), detected in CD22+ B cell–containing lymphocyte aggregates (B). Synovial tissue samples from 8% of the rheumatoid arthritis patients contained lymphocyte aggregates with CD22+ B cells surrounding FDCs. (Original magnification x 20; x 40 in inset.)
CHAPTER 5. Change in the number of CD138+ plasma cells in representative serial synovial tissue samples obtained at 4 (A and C) and 16 (B and D) weeks after initiation of rituximab treatment. Different patterns of response were identified. In patients who responded to treatment we observed a reduction in plasma cells between 4 and 16 weeks after treatment (compare A and B), while in patients who did not fulfill the response criteria, plasma cells persisted (compare C and D) (Original magnification x20). Linear regression analysis revealed a significant relationship between the decrease in plasma cell numbers and the decrease in 28-joint Disease Activity Score (DAS28) at week 24.