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29

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TNF receptor type 2 transmits caspase-dependent apoptotic signals in fibroblast-like synoviocytes derived from rheumatoid arthritis

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ABSTRACT Signals from tumor necrosis factor α (TNF α) are transduced through two types of receptors, tumor necrosis factor receptor type1 (TNFR1) and type2 (TNFR2), which commonly transduce activation signals for NF-κB, affecting cellular survival, growth, and inflammation. TNFR1 is ubiquitously expressed and mediates caspase-dependent apoptotic signals, whereas TNFR2 is selectively expressed on hematopoietic cells without transducing death signals. We detected TNFR2 transcription in fibroblast-like synoviocytes derived from rheumatoid arthritis (RA-FLS) at various levels, but usually much lower than those of TNFR1. To investigate the function of TNFR2 on RA-FLS in TNF α signaling, we established a stable transfectant overexpressing TNFR2 using the human RA-FLS cell line MH7A and stimulated it with 50 ng/ml TNF α , a concentration that usually induces apoptosis in parent MH7A cells. Since TNFR2 is known to transduce anti-apoptotic signals via NF-KB activation, we expected to observe a reduction in apoptotic cells. Contrary to our expectations, the ratio of apoptotic cells in TNFR2 transfectants was higher than that of mock stable transfectants used as a control. This enhanced sensitivity to apoptosis was not inhibited by the addition of either anti-TNFR2 monoclonal antibody (mAb) 80M2, which blocks ligand passing, or antagonistic anti-TNFR1 Ab, indicating that apoptosis was independent of TNFR1 signals. Furthermore, in the presence of antagonistic anti-TNFR1 Ab, the addition of agonistic anti-TNFR2 Ab induced apoptosis with a rapid decrease in TNF receptor-associated factor 2 (TRAF2) and cleavage of caspase-8 and -3. The observed apoptosis was sensitive to an inhibitor of pan-caspase, but not of receptor-interacting protein (RIP) 1. These data clearly indicate the presence of a caspasedependent, apoptotic signaling pathway downstream of TNFR2.

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INTRODUCTION

Rheumatoid arthritis (RA) is a chronic autoimmune disease that is characterized by hyperplasia of the synovium leading to joint destruction. Inflammatory mediators are produced by macrophages, fibroblasts, and endothelial cells, and induce bone destruction *via* the activation of osteoclasts^{1, 2)}. The inflammatory cytokine tumor necrosis factor α (TNF α) plays a pivotal role in the pathophysiology of RA, as evidenced by the effectiveness of anti-TNF α therapy in suppressing disease activity and bone destruction³⁻⁵⁾. However, approximately 30% of RA patients do not respond to anti-TNF α biological reagents⁶⁾, and the molecular mechanisms for this unresponsiveness are still unknown.

TNF α binds to two types of receptors, p55 type 1 receptor (TNFR1) and p75 type 2 receptor (TNFR2). TNFR1 expression is ubiquitous, but TNFR2 expression is limited to immune cells $^{7-9)}$. TNFR1 has a death domain in the cytoplasmic tail, but TNFR2 does not. Binding of TNF α to TNFR1 recruits TNFR-associated death domain (TRADD) to its death domain, and forms complexes that include TRADD, TNF receptor-associated factor 2 (TRAF2), cellular inhibitor of apoptosis protein-1 (cIAP1), and the serine/threonine kinase, receptorinteracting protein (RIP) 1 (Complex I). TRAF2/ cIAP1-mediated ubiquitination of RIP1 activates I κ B kinase (IKK). Active IKK phosphorylates I κ B, leading to its proteasomal degradation, and then released NF- κ B (p65 and p50) translocates to the nucleus and induces transcription of the target genes. RIP1 dissociated from Complex I associates with Fas-associated death domain protein (FADD) and caspase 8 to form Complex IIa, in which caspase 8 is activated to initiate apoptosis¹⁰⁻¹². A novel type of cell death, necroptosis, is also mediated by TNFR1. In the absence of caspase activity, RIP1 interacts with RIP3 to form Complex IIb, which induces necroptosis. TNFR2 lacks a death domain

and stimulation of TNFR2 leads to the activation of NF- κ B, but not to the induction of apoptosis.

We inferred that the aberration of TNFR structure or function might contribute to the unresponsiveness of some RA patients to anti-TNF α therapy. We examined TNFR mutations among primary RA-FLSs because mutations in the trans-membrane region of TNFR1 cause continuous inflammation associated with TNF receptor-associated periodic syndrome (TRAPS)/ familial Hibernian fever¹³⁾. We did not detect any mutations, except for a single nucleotide polymorphism, A36G, which has been described previously¹⁴⁾ and is silent, in one case of RA-FLS. Next, we examined the expression levels of both receptors and noticed that the transcription levels of TNFR2 vary among primary RA-FLSs. This prompted us to study the role of TNFR2 in RA-FLS, particular its role in the pathophysiology of RA. However, the properties of TNFR2 are still controversial. For instance, forced expression of TNFR2 in a cervical cancer cell line facilitates apoptosis induced by TNF α stimulation¹⁵⁾. TNF α induces expression of TNFR2 and promotes cell proliferation in a colorectal cancer cell line¹⁶⁾. Cellular responses mediated by TNFR2 appear to be cell-type dependent.

In this study, we revealed that TNFR2 lacking the death domain can transduce caspase-dependent apoptotic signals in the RA-FLS cell line MH7A with forced expression of TNFR2.

MATERIALS AND METHODS

Cells and cell culture

MH7A, an RA-FLS line transformed with SV40TAg, was obtained from the Riken Cell Bank (Ibaragi, Japan). Cells were maintained in Dulbecco's Modified Eagle Medium (DMEM) supplemented with 10% heat-inactivated fetal calf serum with antibiotics in 10% CO₂ at 37°C with humidified air. Primary FLSs were described previously¹⁷⁾ and the study protocol was approved

by the Research Ethics Committee of Kawasaki Medical School (#291-2).

Antibodies

FITC-conjugated mouse anti-human TNFR1 monoclonal antibody (mAb) (clone H398, MBL, Nagoya, Japan) and PE-conjugated mouse anti-human TNFR2 mAb (clone 80M2, MBL) were used for the detection of TNFR1 and TNFR2 in FACS analysis. Unlabeled mouse anti-human TNFR2 mAb 80M2 was utilized to stabilize the binding between TNF α and TNFR2 (MBL). Antagonistic mouse anti-human TNFR1 mAb (MAB225, clone 16803, R&D Systems, Minneapolis, MN, USA) was used to neutralize TNFR1. Goat anti-TNFR2 Ab (AB226PB, R&D Systems) was used as agonistic antibody to stimulate TNFR2, as reported by Chan *et al.*¹⁸⁾.

Establishment of a stable transfectant overexpressing TNFR2

cDNA for Tnfr2 was obtained by RT-PCR with total RNA of MH7A and gene-specific primers for Tnfr2 (Forward, 5'-GGCCCTCGAGATGGCGCCC GTCGCCGTCTGG-3'; Reverse, 5'-CGGGGATC CTTAACTGGGCTTCATCCCAGC-3') using highfidelity DNA polymerase (KOD-Plus-Neo; Toyobo, Osaka, Japan). The PCR product was inserted into the pBluescript II cloning vector (STRATAGENE, La Jolla, CA, USA) and the lack of mutations was confirmed by sequencing with T7 or T3 primers. The vector was replaced with the pEBMulti vector (Wako, Osaka, Japan), and the expression vector was transfected into MH7A using the liposome method (Xtreme Gene; Roche, Basel, Switzerland). After several passages in medium containing hygromycin, the cells were stained with PE-anti-TNFR2 Ab, and cells overexpressing TNFR2 were enriched by cell sorting with FACSAria (BD Biosciences, San Jose, CA, USA). The sorted cells were cultured in the medium to establish stable transfectants.

Quantitative real-time PCR

The total RNA was extracted with TRIzol (Invitrogen, Carlsbad, CA, USA), according to the manufacturer's instructions. Random hexamerprimed cDNAs were prepared using the ReverTra Ace RT Kit (Toyobo). Specific primers for each gene were designed using Universal Primer Design Tools available on the Roche website. Real-time PCR with the SYBR Green 1 dye was carried out using the 7300 Real-Time PCR System (PE Applied Biosystems, Carlsbad, CA, USA). Threshold cycle (Ct) values of the target genes were normalized to those of β -actin.

Cell Proliferation assay

One hundred thousand stable transfectants in 1 ml of culture medium in a 12-well plate were pre-treated with either 2 μ g/ml anti-TNFR2 Ab 80M2 or the same concentration of mouse IgG1 for 30 min, then cultured for an additional 72 h in the presence of TNF α at various concentrations (indicated in the Figs. 2A and 3A). At the end of the culture, the cell number was counted using a hemocytometer.

Apoptosis assay

Early and late apoptotic cells were stained with FITC-conjugated Annexin V (BioVision, Inc., Milpitas, CA, USA) and 7AAD, respectively, and were detected simultaneously with the FACSCalibur (BD Biosciences). The early apoptotic cell population was defined as Annexin V⁺ 7AAD⁻ cells and the late apoptosis cell population was defined as Annexin V⁺ 7AAD⁺ cells in the FACS analysis.

Western blot analysis

Cell lysates were prepared in RIPA lysis buffer with equal cell numbers from each sample. The equivalent whole-cell crude lysates were resuspended in sodium dodecyl sulfate polyacrylamide gel electrophoresis (SDS-PAGE) sample buffer, boiled for 5 min, resolved using SDS-PAGE, transferred electrically to a PVFD (polyvinylidene fluoride) membrane (Immun-Blot, Bio-Rad, Hercules, CA, USA), and subjected to a western blot analysis with a signal-enhancing kit obtained from Santa Cruz Biotechnology, Inc. (Santa Cruz, CA, USA). The membrane was probed with rabbit polyclonal antibodies for TRAF2, and anti-Caspase3 or mouse anti-Caspase8 mAb (Cell Signaling Technology, Inc., Danvers, MA, USA). The bound antibodies were detected with HRP-labeled goat anti-rabbit or goat anti-mouse antibodies.

RESULTS

Establishment of the transfectant R2H stably expressing TNFR2

To analyze the properties of TNFR2 in RA-FLS, we established an MH7A- derived stable transfectant, designated R2H, expressing TNFR2 at a high level. RT-PCR analyses revealed that the difference in *tnfr1* expression levels between R2H and parental MH7A (Parent) or mock transfectants (Mock) was only 2-fold. However, the *tnfr2* expression level in R2H was 4,720 times higher than that of mock transfectants. (Fig. 1A). FACS analyses revealed that the mean fluorescence

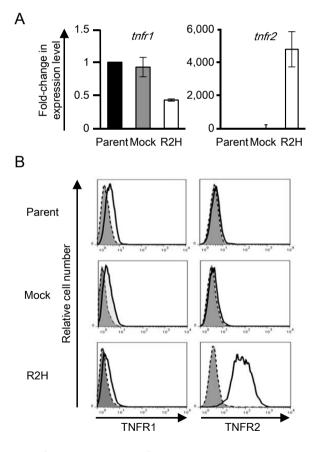


Fig. 1. The expression level of TNFR2 in stable transfectant R2H cells.

A. The transcription of TNFR2 in R2H cells was evaluated by real-time PCR. Parent MH7A cells (Parent) and stable transfectants introduced with the expression vector only (Mock) were used as controls. Fold-changes in the expression level of either *tnfr1* or *tnfr2* were calculated by the $\Delta\Delta$ CT method, setting the parent value as "1."

B. Surface expression of either TNFR1 or TNFR2 was analyzed on FACS with FITC-anti-TNFR1 and PE-anti-TNFR2 Abs, respectively.

33

intensity of R2H stained with anti-TNFR2 mAb increased, whereas that of mock transfectants showed no increase compared with the unstained control (Fig. 1B). The amount of surface expression of TNFR1 on R2H was similar to the levels on the mock transfectant and parental MH7A cells. We expected that the biological responses of RA-FLS to TNF α would be modified by the forced expression of TNFR2 in R2H.

R2H is highly sensitive to $TNF\alpha$ induced apoptosis

TNFR2-mediated NF- κ B activity was expected to have an anti-apoptotic effect; accordingly, we attempted to confirm this activity using R2H with TNF α treatment. Unexpectedly, the R2H cell number was dramatically reduced during a 24-h culture with a high dose of $TNF\alpha$ in comparison with mock cells (Fig. 2A). We examined whether this reduction in living cells was due to the induction of apoptosis by staining with Annexin V. The fraction of early apoptosis R2H cells was markedly increased after stimulation with $TNF\alpha$ $(61.2\% \pm 13.6)$ in comparison with that in the Mock cells (16.5% \pm 1.3) (Fig. 2B and 2C). Of note, even in the absence of TNF α , R2H showed an increased frequency of Annexin V-positive cells $(13.8\% \pm 0.9)$ compared with the Mock cells $(7.5\% \pm 1.9)$.

Enhanced apoptosis of R2H by $TNF\alpha$ stimulation was not due to "ligand passing" from TNFR2 to TNFR1

In the ligand passing theory proposed by Goeddel¹⁸⁾, i) TNF α binds to TNFR2 first owing to its higher affinity to TNF α than TNFR1, ii) captured TNF α immediately dissociates from TNFR2 due to its high dissociation constant, and iii) released TNF α binds to proximal TNFR1. Thus, increased expression of TNFR2 may result in an increased amount of TNF α passing from TNFR2 to TNFR1, leading to an enhancement of the TNFR1-mediated apoptotic signal.

The sensitivity of R2H to TNF α was examined in the presence of anti-TNFR2 Ab (80M2), which stabilizes the binding between TNF α and TNFR2, to inhibit the passing of TNF α to TNFR1. However, the addition of 80M2 did not influence the number of living cells (Fig. 3A) or cells in apoptosis (Fig. 3B and 3C) after treatment with TNF α , suggesting that ligand passing is not involved in augmented TNF α -induced apoptosis of R2H and the apoptotic signal was transmitted *via* TNFR2.

Stimulating anti-TNFR2 Ab can induce apoptosis of R2H

To further confirm the possibility that TNFR2 conducts apoptotic signals, the combination of blocking Ab for TNFR1 (MAB225) and stimulating Ab for TNFR2 (AB226PB) was adopted. The inhibitory effect of MAB225 on NF- κ B activation was evidenced by the reduction in the phosphorylation status of p65, an indicator of the signal transduction of TNF α via TNFR1 (Fig. 4A).

MAB225 alone failed to reduce the TNF α -induced apoptosis of R2H, indicating that TNFR1 signaling was not involved in this apoptotic pathway (Fig. 4B and 4C). The adaptor protein TRAF2 plays a crucial role for TNFR signaling¹⁹⁾. Of note, the ubiquitin-dependent degradation of TRAF2 by cIAP1 occurs via the binding of TNF α to TNFR2²⁰⁾. This rapid degradation of TRAF2 was observed when R2H was treated with the combination of MAB225 and AB226PB, indicating this treatment actually stimulates TNFR2 (Fig. 4D). Finally, this combination of Abs more strongly induced Annexin V^+ apoptotic cells for R2H (44.4% ± 20.6) than mock cells (11.3% \pm 3.8), revealing the existence of novel TNFR2-mediated apoptotic signals (Fig. 4E and 4F).

TNFR2-mediated apoptotic pathway is caspasedependent

Apoptotic signals are initiated by the binding of

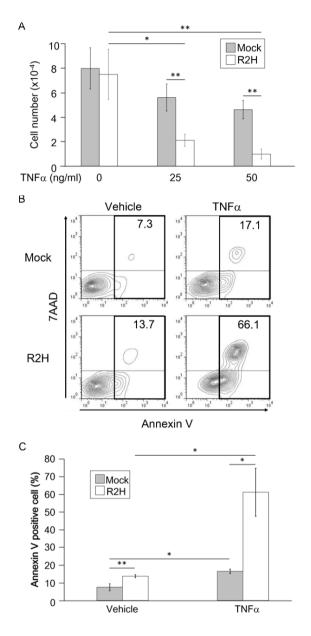


Fig. 2. Growth retardation and enhanced cell death of R2H.

A. Mock and R2H cells were plated at a density 1×10^5 /well in a 12-well plate. The cells were cultured for 24 h in the presence or absence of TNF α at various concentrations indicated in the figure. Then, the cells were harvested and counted using a hemocytometer. Gray bars and white bars indicate Mock and R2H cells, respectively. A representative result is shown from three independent experiments. Results are presented as means ± S.D. from the triplicate experiments. Differences between mock and R2H cells treated with TNF α marked with * and ** were statistically significant (*p < 0.05, **p < 0.01).

B. Mock or R2H cells were cultured for 24 h in the absence or presence of TNF α at a concentration of 50 ng/ml, and were stained with FITC-conjugated Annexin V and 7AAD. Apoptotic cells were defined as Annexin V⁺ cells in the FACS analysis. The numbers in the representative FACS profile indicate the sum of the frequencies of Annexin V⁺ 7AAD⁻ and Annexin V⁺ 7AAD⁺ populations.

C. The percentage of Annexin V positive cells was shown as bar graphs. Gray bars and white bars indicate Mock and R2H cells, respectively. Results are presented as means \pm S.D. from three independent experiments including one indicated in B. Differences between mock and R2H cells treated with TNF α marked with * and ** were statistically significant (*p < 0.05, **p < 0.01).

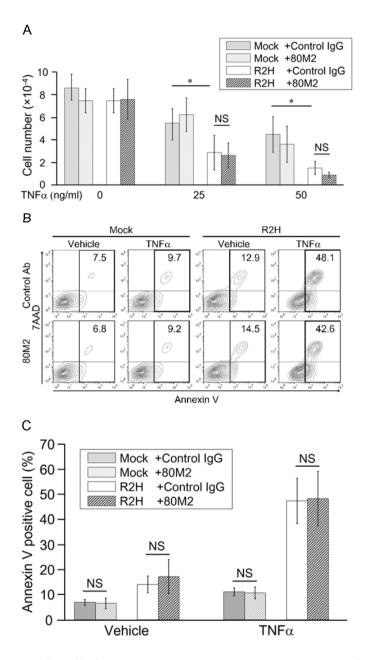


Fig. 3. No effect of anti-TNFR2 Ab (80M2), which stabilizes the binding between TNF α and TNFR2, on TNF α -induced apoptosis of R2H.

A. Transfectant cells were plated at 1×10^5 /well and pretreated with 2 μ g/ml 80M2 for 30 min. The cells were cultured for an additional 24 h in the presence or absence of TNF α at various concentrations indicated in the figure. Then the cells were harvested and counted using a hemocytometer. Asterisks (*) indicate statistically significant differences (*p < 0.05), and NS means not significant.

B. Mock and R2H cells were cultured for 24 h in the absence or presence of TNF α at a concentration of 50 ng/ml, and were stained with FITC-conjugated Annexin V and 7AAD. Apoptotic cells were defined as Annexin V⁺ cells in the FACS analysis. The numbers in the representative FACS profile indicate the sum of Annexin V⁺ 7AAD⁻ and Annexin V⁺ 7AAD⁺ populations.

C. The percentage of Annexin V positive cells was shown as bar graphs. Results are presented as means \pm S.D. of four independent experiments. NS means not significant.

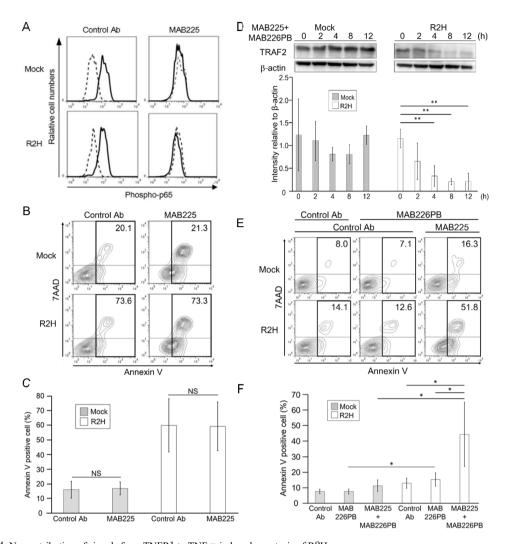


Fig. 4. No contribution of signals from TNFR1 to TNF α -induced apoptosis of R2H.

A. The activation status of NF- κ B was measured by the intensity of PE-conjugated anti-phosphorylated p65 (RelA) on FACS. Dashed line: unstimulated, solid line: stimulated with TNF α at a concentration of 50 ng/ml for 5 min.

B. Mock and R2H cells, pretreated with 3 μ g/ml neutralizing anti-TNFR1 Ab (MAB225) or isotype-matched control Ab for 30 min, cultured for an additional 24 h in the presence of TNF α at a concentration of 50 ng/ml, and stained with FITC-conjugated Annexin V and 7AAD. Apoptotic cells were defined as Annexin V⁺ cells in the FACS analysis. The numbers in the representative FACS profile indicate the sum of the frequencies of Annexin V⁺ 7AAD⁻ and Annexin V⁺ 7AAD⁺ populations.

C. The percentage of Annexin V positive cells was shown as bar graphs. Gray bars and white bars indicate Mock and R2H cells, respectively. Results are presented as means ± S.D. from five independent experiments. NS means not significant.

D. The kinetics of the amount of TRAF2 after selective stimulation through TNFR2. Mock and R2H cells were treated with 3 $\mu g/ml$ agonistic anti-TNFR2 Ab (AB226PB) for 30 min in the presence of neutralizing anti-TNFR1 Ab (MAB225) and evaluated at the indicated time points by a western blotting analysis (upper panel). The graph shows the relative amounts of TRAF2 protein quantified on a densitometer normalized with those of β -actin as an internal control (lower panel). Gray bars and white bars indicate Mock and R2H cells, respectively. Asterisks (**) indicates statistically significant difference (**p < 0.01).

E. Apoptosis assay was performed using 3 μ g/ml agonistic anti-TNFR2 Ab (AB226PB) or isotype-matched control Ab instead of TNF α in B. The number in the representative FACS profile indicates the sum of the frequencies of Annexin V⁺ 7AAD⁻ and Annexin V⁺ 7AAD⁺ populations.

F. The percentage of Annexin V positive cells was shown as bar graphs. Gray bars and white bars indicate Mock and R2H cells, respectively. Results are presented as means \pm S.D. from six independent experiments. Asterisks (*) indicate statistically significant differences (*p < 0.05).

TRADD-FADD complex to the death domain within the cytoplasmic portion of TNFR1. Subsequently the complex activates caspase-3 and -8, the direct effecter molecules for apoptosis. Since TNFR2 lacks the death domain, it seemed unlikely that the TNFR2-mediated pathway utilizes caspases. Contrary to the expectation, cleaved-product of caspase 3 (17/19 kDa) was clearly detected in R2H at 2 h after stimulation with the combination of MAB225 and AB226PB, as shown in Fig. 5A. Cleaved-product of Caspase8 (43 kDa) was also detected under the same conditions (Fig. 5A). These data indicate that caspase-3 and -8 are involved in the TNFR2-mediatied apoptosis.

Recent studies have demonstrated that not only caspase-dependent apoptosis pathways, but also RIP1/RIP3-dependent necroptosis pathways are mediated by TNFR1²¹⁾. The pan-caspase inhibitor zVAD-FMK (zVAD) significantly reduced the Annexin V⁺ cells of R2H induced by the combination of MAB225 and AB226PB (from 43.3% ± 16.3 to 16.0% ± 5.3). However, the RIP1 inhibitor necrostatin-1 (Nec-1)^{21, 22)} had no apparent effect on Annexin V⁺/7AAD⁺ dead cells of R2H (from 43.3% ± 16.3 to 40.4% ± 14.5), indicating caspase activation is required for the TNFR2-mediated apoptosis pathway (Fig. 5B and 5C).

DISCUSSION

TNF*α* is thought to play a pivotal role in inducing hyperplasia of the RA synovium through NF-*κ*B activation²³⁾. The importance of NF-*κ*B in inhibiting TNFR1-mediated apoptosis in human primary FLS is also evidenced by the dual knock-down of p65 and p50 subunits of NF-*κ*B²⁴⁾. TNFR2 lacks a death domain and stimulation of TNFR2 leads to activation of the RIP/IKK complex and NF-*κ*B without involvement of the pro-apoptotic pathway. Thus, it is reasonable to think that TNFR2 signals have a cytoprotective effect^{25, 26)}. However, the cellular responses mediated by TNFR2 appear to be cell-type dependent. For instance, forced expression of TNFR2 in the cervical cancer cell line HeLa results in enhanced apoptosis by TNF α stimulation, although the molecular mechanism for this effect has not been elucidated. In the present study, we showed that TNFR2 signals have a cytocidal effect in the RA-FLS cell line. Furthermore, we clearly demonstrated that this cytocidal signal from TNFR2 is caspase-dependent.

Thus, TRAF2 seems to inhibit caspase-8 activation by recruiting cIAP1 to the TNFR1 complex following TNF α stimulation²⁰⁾. One mechanism that may account for TNFR2-mediated apoptosis signals is the rapid downregulation of TRAF2 found in R2H treated with stimulating Ab to TNFR2. In TNFR1mediated apoptosis signaling, $TNF\alpha$ binding to TNFR1 recruits FADD to the TNFR1 signaling complex, which promotes the recruitment of procasapase-8 to FADD via the death domain. The oligomerized pro-casapase-8 on FADD is activated by auto-cleavage, and mature caspase-8 successively cleaves both pro-casapase-3 and pro-Bid, leading to their activation as pro-apoptotic molecules. Therefore, FADD is thought to be an indispensable platform for casapase-8 activation. Thus, in TNFR2mediated apoptosis, future studies are necessary to determine how caspase-8 is activated independent on FADD. If the molecules connecting TNFR2 to caspase-8 are identified, they are potential targets for manipulations to artificially induce apoptosis of proliferative RA-FLS.

Ban *et al.* revealed that agonistic stimulation of TNFR2 induces the apoptosis of auto-reactive T cells from diabetes patients²⁷⁾. Future developments of the methods to activate cell surface proteins on specific target cells will facilitate the use of this strategy to treat auto-immune diseases, and might have applications for the elimination of pro-inflammatory FLS in RA, as shown in this study.

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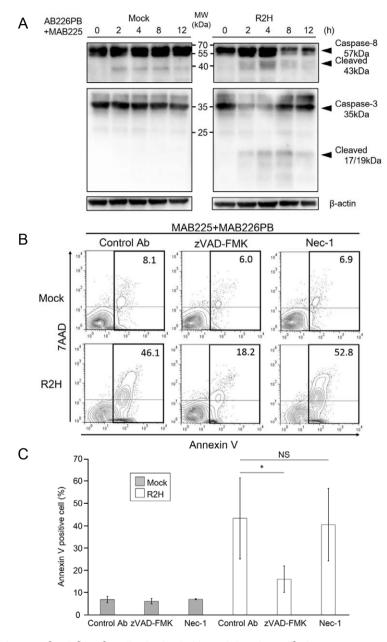


Fig. 5. Activation of Caspase-8 and -3 in R2H cells stimulated with agonistic anti-TNFR2 Ab.

A. Cleavages of Caspase-8 and -3 after treatment of Mock and R2H cells with 3 μ g/ml of agonistic TNFR2 Ab (AB226PB) for 30 min in the presence of neutralizing TNFR1 Ab (MAB225) were evaluated at the indicated time points by a western blotting analysis. Representative data from three independent experiments are shown.

B. Mock and R2H cells, pretreated with 50 μ M zVAD or 100 μ M Nec-1 for 60 min, were subsequently treated with 3 μ g/ml neutralizing anti-TNFR1 Ab (MAB225) for 30 min. Those cells were cultured for an additional 24 h in the presence of 3 μ g/ml agonistic anti-TNFR2 Ab (AB225PB), and stained with FITC-conjugated Annexin V and 7AAD. Apoptotic cells were defined as Annexin V⁺ cells in the FACS analysis. The numbers in the representative FACS profile indicate the sum of the frequencies of Annexin V⁺ 7AAD⁻ and Annexin V⁺ 7AAD⁺ populations.

C. The percentage of Annexin V positive cells was shown as bar graphs. Gray bars and white bars indicate Mock and R2H cells, respectively. Results are presented as means \pm S.D. from five independent experiments. Asterisks (*) indicate statistically significant differences (*p < 0.05), and NS means not significant.

CONFRICT OF INTEREST

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[Erratum]

Fig. 4B in the manuscript (doi: 10.11482/KMJ-E41(2)29; Kawasaki Medical Journal 41(2) 29-40, TNF receptor type 2 transmits caspase-dependent apoptotic signals in fibroblast-like synoviocytes derived from rheumatoid arthritis. Hirano H, et al) had been changed.

