Results: The percentages of circulating Tfh cells are significantly higher in DM patients than HCs (p<0.0001). Compared to HCs, the absolute numbers of circulating Tfh cells also increased markedly in DM patients (p<0.01). The mRNA expression levels of BlImp-1, a typical transcription factor of Tfh cells, increase apparently in PBMC from DM patients (p<0.05). Serum levels of IL-21, a Tfh-specific cytokine, are obviously higher in DM patients (p<0.01). The percentages of total B cells (p<0.01) and Naive B cells (p<0.01) upregulate significantly in DM patients when memory B cells decreased obviously (p<0.01). Serum levels of IgG(p<0.01), IgE(p<0.0001), and IgA(p<0.05) are obviously higher in DM patients(p<0.05). The frequencies of Tfh cells are positively correlated with total B cells (r=0.633, p<0.001) and Naive B cells (r=0.643, p<0.01).

Conclusions: Tfh cells might contribute to abnormal B cell profiles and antibodies production in DM and participate in the pathogenesis of DM. Tfh cell-targeted therapy might be a potential strategy for DM.

REFERENCES:

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