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Attention, la **Figure 3** originale contient 2 panels (A et B), mais nous vous demandons de commenter seulement le panel A représenté ici.

Circulating angiopoietin-2 is a marker and potential mediator of endothelial cell detachment in ANCA-associated vasculitis with renal involvement

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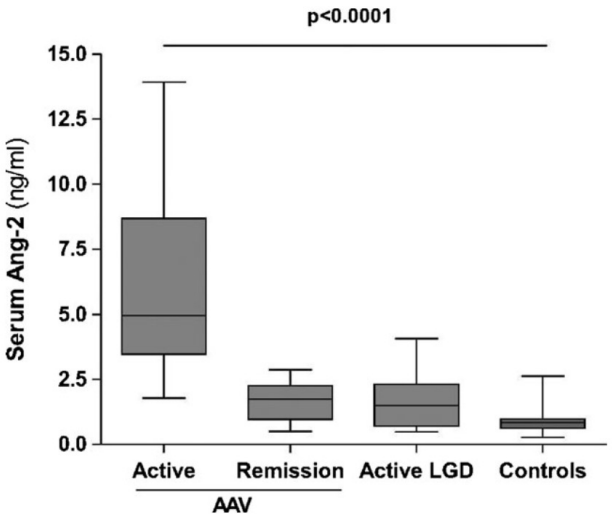

Fig. 1. Serum levels of angiopoietin-2 are increased in active AAV with renal involvement. Box and whisker plots show Ang-2 levels of patients with active systemic ANCA-associated vasculitis (AAV) with renal involvement ($n = 15$), AAV patients with renal involvement in remission ($n = 20$), patients with active limited 'granulomatous' disease (LGD) restricted to the respiratory tract ($n = 10$) and healthy controls ($n = 20$). Horizontal bars indicate median values and whiskers indicate min and max values.

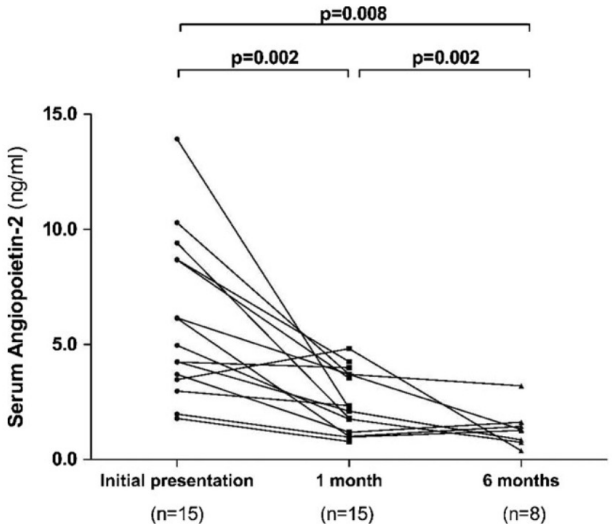

Fig. 2. Circulating angiopoietin-2 concentrations decline during therapy. Ang-2 concentration declined significantly during the follow-up (Friedman's test $P < 0.0001$) in 15 patients with AAV with renal involvement. Lines represent individual courses (1 month ($n = 15$) and 6 months ($n = 8$)).

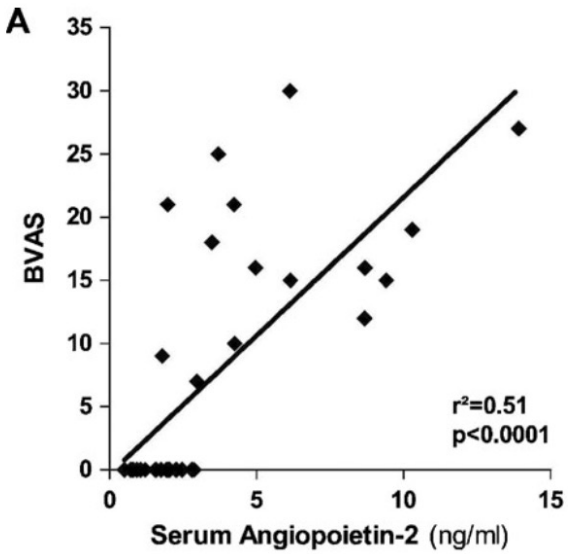

Fig. 3. Angiopoietin-2 correlates with disease activity and the extent of endothelial cell detachment. Scatter plots of (**A**) Birmingham Disease Activity Score (BVAS)
in 35 AAV patients (active AAV $n = 15$; AAV in remission $n = 20$).