Supplementary Material

Circulating endothelial progenitor cells in pregnant women with premature rupture of membranes: potential association with placental disorders


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**Fig. S1.** The percentage analysis of cEPCs by flow cytometry and the ELISA serum levels of estrogen, VEGF and SDF-1 in term pregnant women (at 38 and 34 weeks) who did not receive dexamethasone and in PROM pregnant women without dexamethasone. Percentage of CD133+VEGFR-2+ cEPCs per total CD34+ cells (A). Serum concentrations of estrogen (B), VEGF (C), and SDF-1 (D) in non-dexamethasone treated pregnant women with or without PROM. Data are expressed as mean±s.d. (n=10 term pregnant women at 38 weeks, n=8 term pregnant women at 34 weeks, and n=43 pregnant women with PROM). **P < 0.01, ***P < 0.001, one-way ANOVA with Tukey post-hoc test.
Fig. S2. The percentage analysis of cEPCs by flow cytometry and the ELISA serum levels of estrogen, VEGF and SDF-1 in term pregnant women and in PROM pregnant women with dexamethasone administration. Percentage of CD133+VEGFR-2+ cEPCs per total CD34+ cells (A). Serum concentrations of estrogen (B), VEGF (C), and SDF-1 (D) in dexamethasone administered pregnant women with or without PROM. Data are expressed as mean±s.d. (*n=11 term pregnant women, and **n=6 pregnant women with PROM). *P<0.05, **P<0.01. Student’s t-test.