

ORIGINAL ARTICLE

# Joubert syndrome: a model for untangling recessive disorders with extreme genetic heterogeneity

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► Additional material is published online only. To view please visit the journal online (http://dx.doi.org/10.1136/jmedgenet-2015-103087).

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Received 23 February 2015 Revised 21 May 2015 Accepted 1 June 2015 Published Online First 19 June 2015

#### **ABSTRACT**

**Background** Joubert syndrome (JS) is a recessive neurodevelopmental disorder characterised by hypotonia, ataxia, cognitive impairment, abnormal eye movements, respiratory control disturbances and a distinctive midhindbrain malformation. JS demonstrates substantial phenotypic variability and genetic heterogeneity. This study provides a comprehensive view of the current genetic basis, phenotypic range and gene—phenotype associations in JS.

**Methods** We sequenced 27 JS-associated genes in 440 affected individuals (375 families) from a cohort of 532 individuals (440 families) with JS, using molecular inversion probe-based targeted capture and nextgeneration sequencing. Variant pathogenicity was defined using the Combined Annotation Dependent Depletion algorithm with an optimised score cut-off. **Results** We identified presumed causal variants in 62% of pedigrees, including the first *B9D2* mutations associated with JS. 253 different mutations in 23 genes highlight the extreme genetic heterogeneity of JS. Phenotypic analysis revealed that only 34% of individuals have a 'pure JS' phenotype. Retinal disease is present in 30% of individuals, renal disease in 25%. coloboma in 17%, polydactyly in 15%, liver fibrosis in 14% and encephalocele in 8%. Loss of CEP290 function is associated with retinal dystrophy, while loss of TMEM67 function is associated with liver fibrosis and coloboma, but we observe no clear-cut distinction between JS subtypes.

**Conclusions** This work illustrates how combining advanced sequencing techniques with phenotypic data addresses extreme genetic heterogeneity to provide diagnostic and carrier testing, guide medical monitoring for progressive complications, facilitate interpretation of genome-wide sequencing results in individuals with a variety of phenotypes and enable gene-specific treatments in the future.



**To cite:** Bachmann-Gagescu R, Dempsey JC, Phelps IG, *et al. J Med Genet* 2015;**52**:514–522.

#### INTRODUCTION

Joubert syndrome (JS, OMIM 213300) is a recessive neurodevelopmental disorder characterised by abnormal eye movements, respiratory control disturbances, cognitive impairment, hypotonia and ataxia. Diagnosis of JS relies on a pathognomonic combination of imaging findings on axial

MRI: cerebellar vermis hypoplasia, thickened and horizontally oriented superior cerebellar peduncles and a deep interpeduncular fossa (the 'Molar Tooth Sign' (MTS)).5 In addition to these core central nervous system (CNS) features, subsets of individuals with IS have ocular (chorioretinal coloboma and progressive retinal dystrophy), kidney (nephronophthisis), liver (spectrum of ductal plate malformation and fibrosis) and/or skeletal (dystrophy and polydactyly) involvement. JS overlaps genetically and phenotypically with the more severe Meckel syndrome, often defined by co-occurrence of occipital encephalocele, cysticdysplastic kidney disease, liver fibrosis, and perinatal lethality.6 Care of individuals with JS is complex, requiring surveillance for progressive complications and input from multiple medical subspecialists.

IS can be caused by recessive mutations in more than 27 genes, all of which encode proteins localising to the primary cilium or basal body.<sup>3</sup> Primary cilia are microtubule-based organelles projecting from the surface of most differentiated cells where they serve as environmental sensors, transducing sensory, chemical or mechanical input, as well as signalling pathways (such as hedgehog) during development and homeostasis.8 Given the key role of this organelle in such a wide variety of processes, it is not surprising that its dysfunction leads to a number of human diseases collectively named 'ciliopathies'. These disorders are unified not only by the underlying pathophysiology and shared genetic causes, but also by a wide array of overlapping phenotypes including cognitive dysfunction, CNS malformations, fibrocystic kidney disease, retinal degeneration, skeletal and craniofacial abnormalities, polydactyly and defects in left-right asymmetry. 10

Ciliopathies, in general, and JS, in particular, display prominent genetic heterogeneity, that is, biallelic mutations in many different genes cause the same disorder, albeit with variable severity. Clinically, identifying the genetic causes and understanding gene–phenotype correlations are essential for providing diagnostic testing, prognostic information and treatment recommendations; however, until recently, it has not been possible to identify



the genetic cause in the majority of affected individuals. The advent of next-generation sequencing has revolutionised the study of Mendelian disorders by accelerating novel gene discovery. Using JS as a paradigm, we highlight how next-generation sequencing combined with extensive phenotypic data can inform prognosis leading to improved medical monitoring in rare disorders, generate insights into the differential tolerance of genes to mutation and aid in interpreting genome-wide sequencing results in individuals with diverse phenotypes. Understanding the genetic architecture of Mendelian disorders is also leading to gene-specific treatments and improved patient care.

#### **METHODS**

### Subject ascertainment and phenotypic data

Participants were referred to the University of Washington (UW) Joubert Syndrome Research Program by the Joubert Syndrome and Related Disorders Foundation and clinical collaborators internationally (see Acknowledgements). All participants have clinical findings of JS (intellectual impairment, hypotonia, ataxia and/or oculomotor apraxia) and diagnostic or supportive brain imaging findings (MTS or cerebellar vermis hypoplasia), or they have a sibling with JS. Clinical data were obtained by direct examination of participants, review of medical records and structured questionnaires. Neurologically Normal Caucasian Control Panels (Coriell panels NDPT020 and NDPT090—http://ccr.coriell.org) were sequenced as controls.

#### **Mutation identification**

Using Molecular Inversion Probes (MIPs), 12 all exons in genes associated with JS or the allelic disorder Meckel syndrome (AHI1, ARL13B, B9D1, B9D2, C2CD3, C5ORF42, CC2D2A, CEP290, CEP41, CSPP1, IFT172, INPP5E, KIF7, MKS1, NPHP1, OFD1, RPGRIP1L, TCTN1, TCTN2, TCTN3, TMEM138, TMEM216, TMEM231, TMEM237, TMEM67, TTC12B and ZNF423; 13-36 details in online supplementary table S1) were captured using 100 ng of genomic DNA isolated from blood or saliva. Captured DNA was PCR amplified and sequenced on either the Illumina HiSeq or MiSeq platform. Sequence reads were mapped using the Burrows-Wheeler Aligner (V.0.5.9). Variants were called using the Genome Analysis Toolkit (V.2.5-2) and annotated with SeattleSeq (http://snp.gs.washington.edu/SeattleSeqAnnotation138/). We also included data previously generated by Sanger sequencing of individual genes in subsets of samples. We used the Combined Annotation Dependent Depletion (CADD) algorithm to estimate the deleteriousness of variants (V.1.1),<sup>37</sup> and considered all nonsense, frameshift and canonical splice-site mutations to be deleterious, regardless of CADD score. We defined a cause as the presence of ≥2 rare deleterious variants (RDVs) or a homozygous RDV in one gene in an affected individual. RDVs that were of high quality (depth ≥25, quality by depth >5 and heterozygous allele balance <0.8) were not confirmed by Sanger sequencing based on the previously demonstrated high sensitivity and specificity of the MIPs method for well-covered variants<sup>12</sup>; however, in affected individuals with one high-quality RDV, we did perform Sanger sequencing to confirm second RDVs that did not meet the above-mentioned quality criteria.

#### Statistical analysis

We tested the significance of associations between clinical features, as well as between features and genetic causes, using the  $\chi^2$  or Fisher's exact tests (SAS, V.9.4; SAS Institute, Cary, North Carolina, USA). We present ORs and 95% CIs as measures of

these correlations. The Bonferroni method was used to correct for multiple hypothesis testing.

#### RESULTS

#### **UW JS cohort**

The study cohort comprised 532 affected participants from 440 families, 79 families having >1 affected individual. Participants were recruited from 29 countries, the majority (59%) residing in North America. Nineteen per cent of the families reported consanguinity. The mean age of the affected participants at the time of the analysis was 13.1 years (SD 9.1), with 34% of individuals <10 years of age and 30% 10–20 years of age. Fifty-six per cent were male (table 1). The large size of the cohort and worldwide ascertainment based on brain imaging and neurological findings provide a relatively unbiased spectrum of the disorder.

# Multiorgan involvement is common and the 'pure JS' phenotype occurs in a minority of individuals

In addition to the core diagnostic features for JS (MTS, hypotonia, ataxia, cognitive dysfunction, abnormal breathing pattern and oculomotor apraxia) that were part of the inclusion criteria, several extra-CNS features are commonly described in JS. Based on the presence of these features, various subtypes of JS have been proposed: 'pure' JS (core diagnostic features only), JS plus retinal dystrophy, JS plus cystic kidney disease, JS plus retinal-renal involvement, JS plus liver fibrosis and JS plus oral-facial-digital features. Therefore, we systematically assessed the relevant features (see online supplementary table S2) in the cohort. As a consequence of the worldwide recruitment required to collect a large cohort for a rare disorder, the ascertainment of clinical features was variable. To be conservative in calculating the prevalence of each feature, we restricted our analysis to individuals for whom definite positive or negative information was

**Table 1** Demographic characteristics of the University of Washington Joubert syndrome cohort

Characteristic	N	%*
Current age (years)		
0–9	178	33.5
10–19	157	29.5
20–29	65	12.2
30–39	24	4.5
≥40	6	1.1
Unknown age	42	7.9
Deceased		
Terminations of pregnancy	11	2.1
Other deaths†	49	9.2
Total	532	100
Continent of residence		
North America	316	59.4
Europe	51	9.6
Australia	23	4.3
South America	17	3.2
Asia (Middle East=88)	125	23.5
Families with known consanguinity*	84	19.1
Male	295	55.5
Families with ≥1 affected child*	79	17.9

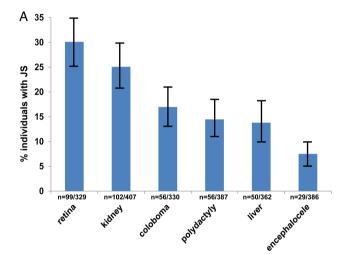
<sup>\*</sup>Percentages are calculated by individual for all variables except consanguinity and

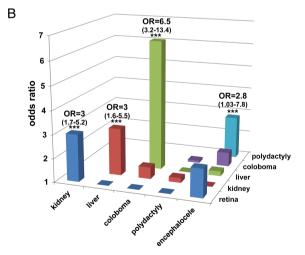
<sup>&</sup>gt;1 affected child.

<sup>\*†</sup>Includes one in utero demise.

available for a given feature; consequently, the denominator for calculating the frequency of individual features varies accordingly. Retinal dystrophy (n=99/329, 30%) and renal disease (n=102/407, 25%) were the most common associated features, followed by coloboma (n=56/330, 17%), polydactyly (n=56/387, 15%), liver fibrosis (n=50/362, 14%) and encephalocele (n=29/386, 8%) (figure 1A). When considering only the individuals for whom definite information was available for all six associated features (n=201), only 68 (33.8%) had the 'pure JS' phenotype (see online supplementary table S3).

We next evaluated whether any of the major features were associated with each other. Liver fibrosis and coloboma were strongly associated (OR 6.5; 95% CI 3.2–13.4), that is, the likelihood of having liver fibrosis in individuals with coloboma was 6.5 times the likelihood of having liver fibrosis in individuals without coloboma. Retinal dystrophy and kidney disease





**Figure 1** Phenotypic analysis of a large Joubert syndrome (JS) cohort. (A) Bar graph indicating the prevalence of major associated features. Absolute numbers are indicated below each bar and 95% CIs are presented. Information about each feature was not available in every subject, so the denominators are different for each variable. (B) ORs for the association between pairs of features. Hepatic disease and coloboma are highly associated with each other while encephalocele and polydactyly, retinal and renal disease, and hepatic and renal disease are less strongly associated with each other. Precise ORs with 95% CIs are indicated for the four statistically significant (\*\*\*) associations. Detailed ORs and CIs for all pairwise possible associations are presented in online supplementary table S4.

(OR 3.0; 95% CI 1.7 to 5.2), liver fibrosis and kidney disease (OR 3.0; 95% CI 1.6 to 5.5) and polydactyly and encephalocele (OR 2.8; 95% CI 1.03 to 7.8) were more weakly associated with each other (figure 1B and see online supplementary table S4). In addition, we observed multiple combinations of features in subsets of individuals, often precluding categorisation into one of the proposed subtypes (see online supplementary table S3). For example, individuals presenting with the combination of liver fibrosis and kidney disease could be categorised as either 'JS plus kidney disease' or 'JS plus liver disease'. While the most frequent associations of features are consistent with the proposed JS subtypes, the broad range of additional combinations observed indicates that no clear-cut distinction exists between subtypes.

#### Multiple additional clinical features

A variety of other clinically important features were documented in medical records and by families but were not systematically queried across the entire cohort (table 2). Additional brain abnormalities were identified in 91 individuals, most commonly

 Table 2
 Additional features observed in individuals with Joubert syndrome

N	Minimum prevalence (%)*
16†	3.0
15	2.8
7	1.3
53	10.0
55	10.3
13	2.4
7	1.3
17	3.2
9	1.7
167	31.4
104	19.5
16	3.0
43	8.1
28	5.3
7‡	1.3
5	0.9
4	0.8
10	1.9
11§	2.1
3¶	0.8
47**	8.8
	16† 15 7 53 55  13 7 17 9  167 104  16 43 28 7‡  5 4 10 11§ 3¶

<sup>\*</sup>Assumes that the feature is absent when the feature is not documented to be present. Denominator=532 individuals.

<sup>†</sup>Includes complete (13) and partial (3) agenesis of the corpus callosum. ‡Includes atrial septal defect (3), coarctation of aorta (2), bicuspid aortic valve and aortic stenosis (1) and narrowing of aortic arch (1).

Sincludes Hashimoto's disease (1), type I diabetes mellitus (2), unknown type diabetes (1), ovarian failure (1), polycystic ovarian syndrome (1), growth hormone deficiency (3), elevated parathyroid hormone (1) and absence of pituitary bright spot, premature puberty and borderline diabetes (1).

<sup>¶</sup>Includes dextrocardia (1) and situs inversus (2).

<sup>\*\*</sup>Includes anxiety (6), ADHD/ADD (8), autism spectrum disorder (16), depression/bipolar disorder (5), aggression (2), obsessive compulsive disorder (2), borderline personality disorder (1), anorexia nervosa (1) and non-specified behavioural problems (6).

ventriculomegaly, and more rarely heterotopia, agenesis of the corpus callosum and polymicrogyria. This is likely an underascertainment compared with prior studies<sup>38</sup> since a detailed review of the brain imaging studies was not part of this study. Additional eye findings were also commonly reported in our cohort, including strabismus and ptosis in 167 and 104 individuals, respectively. Seizures were described in 55 individuals. Other, less common, features included scoliosis (n=28), cleft palate (n=20), hearing loss (n=16), tongue tumours (n=17), oral frenulae (n=9), heart defects (n=7) and a variety of mental health problems such as anxiety, aggression, depression and autism (total n=47). Since these features were not systematically assessed across the cohort, only minimum prevalence estimates can be calculated.

# Comprehensive sequencing identifies the presumed genetic cause in 62% of JS families

We sequenced 27 IS-associated genes in 428 affected individuals from 363 families for whom DNA was available using MIP-targeted capture followed by next-generation sequencing. We previously demonstrated, using a subset of this cohort, that this method has 99.5% sensitivity and 98% positive predictive value for variant detection at covered basepairs compared with Sanger sequencing. 12 The MIP target included all coding positions and neighbouring intronic basepairs (see online supplementary table S1), and >89% of basepairs were adequately covered (≥8X) for all genes except INPP5E (75% covered) (see online supplementary figure S1). We also included previous Sanger sequencing data, as well as sequencing data from clinical testing when available (n=12), bringing the total number of affected individuals with sequencing data to 440 from 375 families. Based on the estimated prevalence of JS (~1/80 000 Northern Europeans<sup>3</sup>) and the genetic heterogeneity of the disease, we excluded variants with a minor allele frequency (MAF) >0.2% in the Exome Variant Server (http://evs.gs. washington.edu/EVS/). We considered all nonsense, frameshift and canonical splice-site mutations to be deleterious. We assessed the predicted deleteriousness of missense, synonymous and intronic variants using the CADD score algorithm, <sup>37</sup> which considers multiple available prediction techniques including conservation across species and protein function, and has the advantage of providing a score for all possible variants on a single scale. We selected the CADD score cut-off (11) for defining RDVs by maximising the number of affected individuals with genes harbouring two rare variants (or a homozygous rare

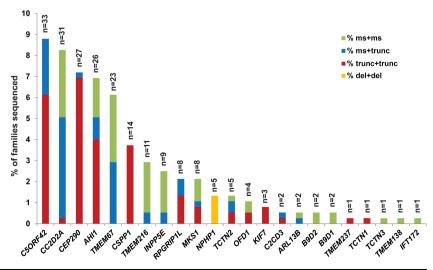
variant), while minimising the number of controls with genes harbouring similar variants, an approach akin to generating a receiver operating characteristic curve (see online supplementary figure S2). For missense variants, using the CADD score identified more presumed causes in the JS cohort compared with Polyphen2 without increasing the false positive rate in controls (data not shown).

We defined a cause as the presence of  $\geq 2$  RDVs (or a homozygous RDV) in one gene in an affected individual. Using this definition and all available sequencing data, we identified the presumed genetic cause in 279 individuals from 232/375 families (62%) overall (figure 2), 77% in consanguineous families and 76% in families with >1 affected individual. The higher rate in the consanguineous families is likely due to the higher probability of calling a single homozygous variant compared with the probability of calling two different heterozygous variants in the non-consanguineous families. Similarly, in 9% of families for whom we were able to sequence >1 affected individual, we initially identified two RDVs in only one of the affected individuals. This likely accounts for the higher solve rate in multiplex families compared with families with only one affected child. In contrast to the results in affected individuals, 5/182 unrelated control individuals carried ≥2 RDVs in one of the known genes (see online supplementary table S5). In 68/70 (97%) families for which parental DNA was available, we confirmed that the identified compound heterozygous RDVs are in trans, excluding two samples from further analysis. We did not sequence parents of children with homozygous or hemizygous RDVs (90 families). Parental samples were not available for controls.

Despite satisfying our criteria (MAF<0.2%, CADD>11), the variants in 12 families did not meet the American College of Medical Genetics and Genomics variant interpretation categories 1, 2 or 3.<sup>39</sup> In 8 of these 12 families, one of the RDVs is a splice variant beyond±2 basepairs from the intron–exon junction, for which the functional effect on splicing has not been assessed. In 4/12 families, one RDV is a synonymous variant whose functional effect has not been evaluated. Therefore, we list these families separately in online supplementary table S5 and excluded them from gene–phenotype analyses.

In addition, we identified five families with pairs of RDVs in each of two genes (see online supplementary table S6). In 3/5, the variants in one gene appeared much more likely to be causal than the variants in the second gene (eg, a homozygous frameshift mutation in *C5ORF42* vs two missense variants in *CSPP1*,

Figure 2 Genetic causes in a large Joubert syndrome cohort. Bar graph indicating the proportion of individuals with JS carrying two rare deleterious variants in each gene. Each bar is broken down to illustrate the relative frequency of the observed mutations in each gene: red indicates two truncating mutations (including nonsense, frameshift and canonical splice-site mutations), blue indicates one truncating and one missense mutation (including small in-frame indels), green indicates two missense mutations or small in-frame indels and orange represents larger deletions.



which harbours exclusively truncating mutations in our cohort). In these three families, the more likely cause was retained for the subsequent analyses. In the other two families, we could not determine the cause and excluded them from the subsequent genetic analyses. Of note, based on the clinical information available, the phenotypic severity in these five individuals was not substantially different from the rest of the cohort.

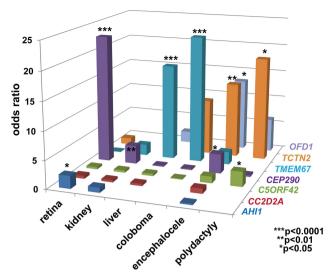
Including only the families with conservatively called genetic causes, five genes (C5ORF42, CC2D2A, AHI1, CEP290 and TMEM67) each account for IS in ~6-9% of IS, three genes (CSPP1, TMEM216 and INPP5E) for ~3% each and six genes for  $\sim 1-2\%$ , while the remaining nine genes each account for IS in only 1-2 families. We also identified B9D2 mutations as the genetic cause in two families, further extending the known genetic overlap between IS and the more severe Meckel syndrome. A detailed phenotypic description of the two individuals with B9D2 mutations is presented in online supplementary table S7. CEP41, TMEM138, TMEM231 and ZNF423 do not harbour ≥2 or homozygous RDVs in any affected individuals. A single affected individual carries one synonymous and one missense variant in TTC21B; however, this individual also carries a homozygous nonsense variant in C2CD3 that is predicted to truncate the protein near the N-terminus (see online supplementary table S6).

Further examination of the sequence data revealed variation in the types of mutations across the different genes. Considering all nonsense, frameshift and canonical splice-site mutations as truncating, we observed that CEP290, CSPP1 and CSORF42 mostly harbour a combination of two truncating mutations, CC2D2A and TMEM67 tend to have  $\geq 1$  missense mutation, and TMEM216 and INPP5E have mainly two missense mutations. All individuals with JS caused by mutations in NPHP1 (n=5) harbour the previously described deletion<sup>24</sup> in a homozygous state, and no causal point mutations were identified in this gene. The differences in mutation types across the genes were statistically significant (see online supplementary figure S3).

While the majority of RDVs were unique, we identified a subset of RDVs present in ≥3 families not known to be related (see online supplementary table S8). *TMEM216* R73L is common in families of Ashkenazi Jewish descent,<sup>34</sup> and accounts for most of the families with *TMEM216* mutations. Two *C5ORF42* RDVs (p. Gly2663Alafs\*40 and W2593\*) were found homozygous in six families of Saudi Arabian descent. The p.Gly2663Alafs\*40 variant has been previously associated with both JS and Meckel syndrome in Saudi Arabian families.<sup>40 41</sup> One *CC2D2A* RDV (P1122S) was found homozygous in three families of Saudi Arabian descent. In three unrelated Brazilian families, the same combination of two *CSPP1* RDVs was identified, suggesting that they might in fact be related.<sup>20</sup> None of the other recurring RDVs appeared to be associated with specific ethnic groups, so they may represent mutation hotspots (such as *CEP290* G1890\* identified in 10 unrelated families from 3 continents).

#### Gene-phenotype correlations

We next examined associations between the non-CNS features of JS and each genetic cause (figure 3, see online supplementary table S9) and observed several significant gene–phenotype correlations: *CEP290* mutations with retinal dystrophy (OR 22.9, 95% CI 6.7 to 78.4; p<0.0001) and cystic kidney disease (OR 3.3, 95% CI 1.6 to 7.1; p=0.001); *TMEM67* with liver fibrosis (OR 17.3, 95% CI 7.2 to 42.0; p<0.0001) and coloboma (OR 22.9, 95% CI 8.6 to 61.1; p<0.0001); *C5ORF42* with polydactyly (OR 2.7, 95% CI 1.2 to 5.9; p=0.01); *OFD1* with encephalocele (OR 13.1, 95% CI 1.8 to 97.0; p=0.03); *TCTN2* 



**Figure 3** Gene—phenotype correlation in Joubert syndrome. Bar graph indicating for each of the more frequently involved genes, and for two genes with significant phenotypic associations, the OR for each of the six commonly associated features: retinal disease, renal disease, hepatic disease, coloboma, polydactyly and encephalocele. Statistically significant ORs (Fisher's exact test or  $\chi^2$  test) are marked with an asterisk (\*\*\*). CIs are omitted for clarity but are listed in online supplementary table S9.

with encephalocele (OR 13.6, 95% CI 2.6 to 70.8; p=0.007) and polydactyly (OR 18.7, 95% CI 1.9 to 182.9; p=0.01). Even after Bonferroni correction for multiple hypothesis testing, the associations between *TMEM67* and liver disease and coloboma, and that between *CEP290* and retinal dystrophy remained statistically significant (p<0.0001). In addition, a negative correlation was observed between *TMEM67* mutations and retinal disease (OR 0.1, 95% CI 0.01 to 0.8; p=0.006), indicating that individuals with *TMEM67* mutations are less likely to be diagnosed with retinal disease than those without mutations in this gene. When counselling families, the absolute prevalence of clinical features may be more useful than ORs, so this information is provided in online supplementary figure S4.

Although we cannot test the statistical significance of genetic associations with non-systematically assessed clinical features, several possible associations are notable. Both individuals with C2CD3 mutations had oral features including oral frenulae and/ or cleft palate, suggesting C2CD3 mutations may lead to an OFD-like phenotype.<sup>2</sup> However, among the individuals with oral features (n=46), the majority did not have mutations in C2CD3 (or OFD1). Likewise, two of three individuals with KIF7 mutations had agenesis of the corpus callosum (while the status of the corpus callosum in the third individual was unknown), consistent with a KIF7-related 'acro-callosal' subtype of IS. Again, however, the majority of individuals with agenesis of the corpus callosum (n=14) had mutations in other genes without a clear predominance of one genetic cause. None of the 55 individuals with seizures had causal CEP290 mutations, despite CEP290 loss of function being the third most common cause of JS, suggesting a negative association.

#### DISCUSSION

#### Presumed genetic cause of JS identified in 62% of families

Just over 10 years ago the first genetic causes of JS were identified.  $^{13}$   $^{24}$  Now, we can determine the presumed genetic cause in 62% of individuals with JS using the highly efficient MIP

capture technique, next-generation sequencing and an optimised CADD score cut-off to identify causal variants in 27 JS/Meckel genes. Five genes (C5ORF42, CC2D2A, CEP290, AHI1 and TMEM67) account for the majority of affected individuals, while nine genes are mutated in <15 families, and nine more genes are mutated in only 1–2 families. In two families with JS, we identified causal mutations in the Meckel-associated gene B9D2, further expanding the allelism between JS and Meckel syndrome. Not surprisingly, B9D2 is part of a transition zone subcomplex (with MKS1 and B9D1) that regulates protein trafficking in and out of the cilium.<sup>42</sup>

These findings illustrate the extreme genetic heterogeneity of JS. Therefore, given that no single gene predominates as a cause for JS, the most efficient method for clinical diagnostic testing is next-generation sequencing of all known JS genes through targeted gene panels or whole-exome sequencing. The advantage of the MIP capture technique lies in its low cost and flexibility, allowing easy addition of newly identified JS genes to the target. For laboratories without a specific interest in JS, whole-exome sequencing might be more practical since it does not require any specialised set-up.

The genetic cause remains unidentified in 38% of families in our cohort. This may be due to mutations in genes not yet associated with IS, or variants in the known genes that were missed by our current techniques, either because they are inadequately covered in our data, located in non-coding regions, not called using our analysis pipeline, or not recognised as deleterious. Given the high coverage obtained for all but one gene (INPP5E) and the efficiency of MIP capture for identifying variants in the target regions, 12 it is likely that a sizeable fraction of the missed variants lie in non-coding regions that affect gene expression level, splicing or translation. Identifying these variants and understanding their significance will require integrating data from variant rating algorithms like CADD, global assessments of chromatin structure and regulatory elements from projects such as ENCODE<sup>43</sup> and targeted functional assays in affected cell lines, animal models or in vitro systems.

# Clinical utility of gene—phenotype correlations and phenotypic associations

Gene-phenotype correlations in well-characterised, comprehensively sequenced cohorts translate directly into improved prognostic information and medical management for individuals with JS. For instance, results from this study indicate that individuals with JS harbouring causal mutations in TMEM67 have a higher risk of developing liver fibrosis, necessitating closer monitoring to allow early diagnosis and treatment of portal hypertension. Likewise, individuals with causal mutations in CEP290 require closer surveillance for retinal dystrophy. Our findings validate prior results from smaller cohorts focused on single genes<sup>44</sup> <sup>45</sup> <sup>46</sup> and also identify additional positive and negative correlations. For example, individuals with causal mutations in TMEM67 appear less likely to develop retinal disease and may require less frequent monitoring for this complication. Even when the genetic cause is unknown, phenotypic associations can also guide management and surveillance; for example, individuals with JS and retinal dystrophy should be monitored more closely for renal dysfunction, and those with coloboma should be monitored more closely for liver fibrosis.

While the strongest phenotypic associations observed in this cohort are consistent with previously described JS-subtypes such as COACH syndrome, <sup>45</sup> <sup>46</sup> and the retinal-renal form of JS, <sup>44</sup> we did not observe clear-cut distinctions between phenotypic subgroups corresponding to specific genetic causes. The MTS

provides a unifying feature for all affected individuals in our cohort, but the distribution of associated phenotypes highlights the phenotypic variability and overlap with other ciliopathies. This is particularly well illustrated by the individuals with mutations in the OFD-associated genes C2CD3 or OFD1 who have oral features, consistent with an OFD-like JS subtype; however, most individuals with oral features in our cohort harbour mutations in other genes. Therefore, phenotypic subtyping is of limited clinical value for guiding molecular genetic testing. Fortuitously, next-generation sequencing panels now preclude the need for prioritising single gene tests. Nonetheless, grouping individuals by genetic cause or clinical phenotype retains value for determining their risk of developing progressive features and guiding clinical management as described above.

## Gene-specific mutation patterns provide insights into gene function

The observed gene-phenotype correlations, along with the gene-specific mutation distributions, provide information about the function of the different genes. Genes associated preferentially with particular phenotypes suggest a specific or more important role for these genes in the affected organ systems. For instance, the association of *CEP290* mutations with retinal dystrophy in JS and Leber congenital amaurosis 44 47 confirms the importance of *CEP290* function in the human retina, as seen in animal models.

The distribution of mutation types harboured by each gene also reveals information about gene function. For instance, the near-absence of biallelic truncating mutations in some genes suggests that full loss of function for these genes is poorly tolerated in humans, leading to more severe phenotypes, such as Meckel syndrome or early fetal lethality. In support of this hypothesis, fetuses with Meckel syndrome tend to carry two truncating mutations in CC2D2A and TMEM67 compared with individuals with IS who usually carry at least one missense mutation as previously described. 48–50 Likewise, biallelic truncating mutations in TMEM216 and INPP5E have not been previously identified in individuals with JS and are not found in our cohort.<sup>22 33 34 51</sup> In contrast, virtually all individuals with JS due to mutations in CSPP1 or CEP290 harbour two truncating variants in these genes, indicating that severe loss of function is required to cause IS. This type of gene-specific information should be considered when interpreting the significance of newly identified sequence variants, in combination with allele frequency in controls, deleteriousness prediction algorithms and the phenotype of the affected individual. For example, missense mutations in CEP290 or CSPP1 detected by targeted or genome-wide clinical sequencing are less likely to be clinically significant than missense mutations in TMEM216 or INPP5E. A further consequence of the gene-specific distribution of mutation types lies in the development of potential specific therapies: genes harbouring a majority of nonsense mutations such as CEP290 may be amenable to read-through therapies,<sup>52</sup> while this therapeutic direction would be less valuable for genes harbouring mainly missense mutations.

#### Limitations

While larger than previously published studies, our analysis is still limited by the small number of individuals with two RDVs in several genes associated with JS, precluding statistically significant gene–phenotype correlations for these genetic causes. This is an inherent limitation to the study of rare disorders with prominent genetic heterogeneity. Similarly, the relative rarity of JS necessitates the worldwide enrolment of study participants;

consequently, phenotypic assessment is inhomogeneous and some features, especially neurodevelopmental outcome, are difficult to assess at a distance. This is currently a universal problem in the field of rare disorder genetics, where, for the first time, genetic data are more easily available than phenotypic data. In this study, we made every effort to use conservative assumptions for tests of statistical significance; however, until validated by other studies, these results should be translated into clinical practice with caution.

# Impact of next-generation sequencing on diagnosis and treatment of Mendelian disorders

In summary, this work illustrates how applying advanced DNA sequencing technologies and improved functional prediction algorithms to large, well-characterised cohorts is enhancing our understanding of the genetic architecture and gene-phenotype correlations in rare Mendelian disorders. Identifying the genetic cause empowers individuals with IS and their families to make family planning decisions, and gene-phenotype correlations provide more reliable prognostic information leading to individually tailored, organ-specific surveillance, thereby improving the health and longevity of affected individuals while conserving healthcare costs. In parallel, identifying the genetic causes of Mendelian disorders is required for developing and applying gene-specific treatments. Similar to recent breakthroughs in cancer treatment based on genomic information (reviewed in Sameek and Chinnaiyan),<sup>53</sup> understanding the genetic causes of Mendelian disorders will inform future gene-specific treatments and is a major step towards personalised medicine for affected individuals.

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**Acknowledgements** We greatly appreciate the participation of all of the individuals with JS and their families. We also thank the Joubert Syndrome and Related Disorders Foundation and the innumerable clinicians who have referred participants to us over many years, including Jumana Al-Aama, Beth Allen, Ala'a Arafat, Mutluay Arslan, Louis Bartoshesky, Erawati Bawle, Anastashia Boli, Carsten

Bönnemann, Sarah Bowdin, Steven Braddock, John Carey, Umran Cetincelik, Alicia Chan, David Chitayat, Juan Chemke, Krystyna Chrzanowska, Brian Chung, Robin Clark, Vida Culic, Duygu Cura, Cynthia Curry, Sumita Danda, Stephen Deputy, Charu Deshpande, William Dobyns, Emily Doherty, Lisa Ewans, Michael Gabbett, Özlem Giray, Himanshu Goel, Elaine Goh, Crystal Grimsley, Sachin Gupta, Jonathan Holt, Niels Illum, Olafur Indridason, A. Micheil Innes, Louise Izatt, Sujatha Jagadeesh, Usha Kini, Jarkko Kirjavainen, Edwin Kirk, Antonie Kline, Kristleifur Kristjannson, Mark Labinksy, Yves Lacassie, Amparo Lopez Lafuente, James Lemons, Richard Leventer, Jan Liebeit, Shawn Lipinski, Sally Lynch, Alan Ma, Richard Macias, Sahar Mansour, Bernard Maria, Isabelle Maystadt, Carole McKeown, Scott McLean, Nancy Mendelsohn, Markella Mikkelsen, Vinod Misra, Sheela Nampoothiri, Vinodh Narayanan, David Neubauer, Ann Olney, Wendy Osterling, Alex Paciorkowski, Shashidhar Pai, Ivan Pavkovic, Joan Pellegrino, Ruthann Pfau, Joseph Pinter, Kate Pope, Gerald Raymond, Miriam Regev, James Reggin, Janet Rennie, Anne Ronan, Alan Shanske, Lisa Sharf, Lori Skallerud, Diana Smith, Rhonda Spiro, Zornitza Stark, Lois Starr, Helen Stewart, Anne Summers, Krzysztof Szczaluba, David Tilstra, John Tolmie, Priya Verghese, Alain Verloes, Julie Vogt, Richard Webster, Kara Weisiger, Mark Wells, Kevin White, Sue White, Dorota Wicher, Robert Wildin, Denise Williams, Meredith Wilson, Barry Wolf, Lisa Worgan, Grace Yoon, Takehito Yokoi, Marc Yudkoff, Elaine Zackai. We thank Karen Barnett for help establishing the cohort, Elizabeth Blue for comments on the manuscript, and Stephan Neuhauss and Anita Rauch for their support for R.B.-G.

**Contributors** RB-G, JCD, IGP, PC, MAP, IG, JS, and DD participated in the design of the study. JCD, IGP, BJO, DMK, GEI, CRI, NG, JA, EAB, DO, AA, RRA, LL, CL, LM, AG-C, HO, GH, BT, MT, MAP, UWCMG and DD collected and/or generated the data. RB-G, JCD, IGP, BJO, TCR, EAB, NdL, UWCMG, and DD analysed and interpreted the data. RBG, JCD, IGP and DD drafted the manuscript. All coauthors read and approved the final manuscript.

**Funding** RB-G was supported by a Swiss NSF grant Ambizione-SCORE PZ00P3\_142404/1. The following authors received support from the National Institutes of Health: M.A.P. K23NS45832, I.A.G. K24HD046712, D.D R01NS064077. D.D. also received funding from a March of Dimes Basil O'Connor Starter Scholar Research Award, The Arc of Washington Trust Fund, and private donations from families of children with Joubert syndrome. The work was also supported by the University of Washington Intellectual and Developmental Disabilities Research Center Genetics Core (National Institutes of Health U54HD083091). Sequencing was provided by the University of Washington Center for Mendelian Genomics (UW CMG) and was funded by the National Human Genome Research Institute and the National Heart, Lung and Blood Institute grant 1U54HG006493 to Drs Debbie Nickerson, JS and Michael Bamshad.

Competing interests None declared.

Patient consent Obtained.

**Ethics approval** Institutional Review Boards at University of Washington and Seattle Children's Hospital.

Provenance and peer review Not commissioned; externally peer reviewed.

**Data sharing statement** All data are included in the manuscript and online supplementary data.

#### **REFERENCES**

- Joubert M. Familial agenesis of the cerebellar vermis. A syndrome of episodic hyperpnea, abnormal eye movements, ataxia, and retardation. *Neurology* 1969;19:813–25.
- 2 Brancati F, Dallapiccola B, Valente E. Joubert Syndrome and related disorders. Orphanet J Rare Dis 2010;5:20.
- 3 Parisi MA, Glass I. Joubert syndrome and related disorders 2003. http://www.ncbi. nlm.nih.gov/books/NBK1325/
- 4 Boltshauser E, Isler W. Joubert syndrome: episodic hyperpnea, abnormal eye movements, retardation and ataxia, associated with dysplasia of the cerebellar vermis. Neuropadiatrie 1977;8:57–66.
- 5 Poretti A, Boltshauser E, Valente EM. The molar tooth sign is pathognomonic for Joubert syndrome! *Pediatr Neurol* 2014;50:e15.
- 6 Barker AR, Thomas R, Dawe HR. Meckel-Gruber syndrome and the role of primary cilia in kidney, skeleton, and central nervous system development. *Organogenesis* 2014:10:96–107.
- 7 Romani M, Micalizzi A, Valente EM. Joubert syndrome: congenital cerebellar ataxia with the molar tooth. *Lancet Neurol* 2013;12:894–905.
- 8 Goetz SC, Anderson KV. The primary cilium: a signalling centre during vertebrate development. *Nat Rev Genet* 2010;11:331–44.
- 9 Hildebrandt F, Benzing T, Katsanis N. Ciliopathies. N Engl J Med 2011;364:1533–43.
- Badano JL, Mitsuma N, Beales PL, Katsanis N. The Ciliopathies: an emerging class of human genetic disorders. Annu Rev Genomics Hum Genet 2006;7:125–48.

- Bamshad MJ, Ng SB, Bigham AW, Tabor HK; Emond MJ; Nickerson DA, Shendure J. Exome sequencing as a tool for Mendelian disease gene discovery. Nat Rev Genet 2011;12:745–55.
- O'Roak BJ, Vives L, Fu W, Egertson JD, Stanaway IB, Phelps IG, Carvill G, Kumar A, Lee C, Ankenman K, Munson J, Hiatt JB, Turner EH, Levy R, O'Day DR, Krumm N, Coe BP, Martin BK, Borenstein E, Nickerson DA, Mefford HC, Doherty D, Akey JM, Bernier R, Eichler EE, Shendure J. Multiplex Targeted Sequencing Identifies Recurrently Mutated Genes in Autism Spectrum Disorders. Science 2012;338:1619–22.
- Ferland RJ, Eyaid W, Collura RV, Tully LD, Hill RS, Al-Nouri D, Al-Rumayyan A, Topcu M, Gascon G, Bodell A, Shugart Y. Abnormal cerebellar development and axonal decussation due to mutations in AHI1 in Joubert syndrome. *Nat Genet* 2004:36:1008–13.
- 14 Cantagrel V, Silhavy JL, Bielas SL, Swistun D, Marsh SE, Bertrand JY, Audollent S, Attié-Bitach T, Holden KR, Dobyns WB, Traver D, Al-Gazali L, Ali BR, Lindner TH, Caspary T, Otto EA, Hildebrandt F, Glass IA, Logan CV, Johnson CA, Bennett C, Brancati F, Valente EM, Woods CG, Gleeson JG. Mutations in the Cilia Gene ARL13B Lead to the Classical Form of Joubert Syndrome. Am J Hum Genet 2008:83:170–9.
- Romani M, Micalizzi A, Kraoua I, Dotti M, Cavallin M, Sztriha L, Ruta R, Mancini F, Mazza T, Castellana S, Hanene B, Carluccio M, Darra F, Mate A, Zimmermann A, Gouider-Khouja N, Valente EM. Mutations in B9D1 and MKS1 cause mild Joubert syndrome: expanding the genetic overlap with the lethal ciliopathy Meckel syndrome. *Orphanet J Rare Dis* 2014;9:72.
- Srour M, Schwartzentruber J, Hamdan FF, Ospina LH, Patry L, Labuda D, Massicotte C, Dobrzeniecka S, Capo-Chichi J-M, Papillon-Cavanagh S, Samuels ME, Boycott KM, Shevell MI, Laframboise R, Désilets V, Maranda B, Rouleau GA, Majewski J, Michaud JL. Mutations in C5ORF42 cause Joubert syndrome in the French Canadian population. Am J Hum Genet 2012;90:693–700.
- 17 Gorden NT, Arts HH, Parisi MA, Coene KL, Letteboer SJF, van Beersum SEC, Mans DA, Hikida A, Eckert M, Knutzen D, Alswaid AF, Özyurek H, Dibooglu S, Otto EA, Liu Y, Davis EE, Hutter CM, Bammler TK, Farin FM, Dorschner M, Topçu M, Zackai EH, Rosenthal P, Owens KN, Katsanis N, Vincent JB, Hildebrandt F, Rubel EW, Raible DW, Knoers NVAM, Chance PF, Roepman R, Moens CB, Glass IA, Doherty D. CC2D2A is mutated in Joubert syndrome and interacts with the ciliopathy-associated basal body protein CEP290. Am J Hum Genet 2008;83:559–71.
- Sayer JA, Otto EA, O'Toole JF, Nurnberg G, Kennedy MA, Becker C, Hennies HC, Helou J, Attanasio M, Fausett BV, Utsch B, Khanna H, Liu Y, Drummond I, Kawakami I, Kusakabe T, Tsuda M, Ma L, Lee H, Larson RG, Allen SJ, Wilkinson CJ, Nigg EA, Shou C, Lillo C, Williams DS, Hoppe B, Kemper MJ, Neuhaus T, Parisi MA, Glass IA, Petry M, Kispert A, Gloy J, Ganner A, Walz G, Zhu X, Goldman D, Nurnberg P, Swaroop A, Leroux MR, Hildebrandt F. The centrosomal protein nephrocystin-6 is mutated in Joubert syndrome and activates transcription factor ATF4. Nat Genet 2006;38:674–81.
- Lee JE, Silhavy JL, Zaki MS, Schroth J, Bielas SL, Marsh SE, Olvera J, Brancati F, Iannicelli M, Ikegami K, Schlossman AM, Merriman B, Attie-Bitach T, Logan CV, Glass IA, Cluckey A, Louie CM, Lee JH, Raynes HR, Rapin I, Castroviejo IP, Setou M, Barbot C, Boltshauser E, Nelson SF, Hildebrandt F, Johnson CA, Doherty D, Valente EM, Gleeson JG. CEP41 is mutated in Joubert syndrome and is required for tubulin glutamylation at the cilium. *Nat Genet* 2012;44:193–9.
- Tuz K, Bachmann-Gagescu R, O'Day DR, Hua K, Isabella CR, Phelps IG, Stolarski AE, O'Roak BJ, Dempsey JC, Lourenco C, Alswaid A, Bönnemann CG, Medne L, Nampoothiri S, Stark Z, Leventer RJ, Topçu M, Cansu A, Jagadeesh S, Done S, Ishak GE, Glass IA, Shendure J, Neuhauss SCF, Haldeman-Englert CR, Doherty D, Ferland RJ. Mutations in CSPP1 cause primary cilia abnormalities and Joubert syndrome with or without Jeune asphyxiating thoracic dystrophy. Am J Hum Genet 2014;94:62–72.
- 21 Halbritter J, Bizet AA, Schmidts M, Porath JD, Braun DA, Gee HY, McInerney-Leo AM, Krug P, Filhol E, Davis EE, Airik R, Czarnecki PG, Lehman AM, Trnka P, Nitschké P, Bole-Feysot C, Schueler M, Knebelmann B, Burtey S, Szabó AJ, Tory K, Leo PJ, Gardiner B, McKenzie FA, Zankl A, Brown MA, Hartley JL, Maher ER, Li C, Leroux MR, Scambler PJ, Zhan SH, Jones SJ, Kayserili H, Tuysuz B, Moorani KN, Constantinescu A, Krantz ID, Kaplan BS, Shah JV, UK10K Consortium, Hurd TW, Doherty D, Katsanis N, Duncan EL, Otto EA, Beales PL, Mitchison HM, Saunier S, Hildebrandt F. Defects in the IFT-B component IFT172 cause Jeune and Mainzer-Saldino syndromes in humans. Am J Hum Genet 2013;93:915–25.
- Bielas SL, Silhavy JL, Brancati F, Kisseleva MV, Al-Gazali L, Sztriha L, Bayoumi RA, Zaki MS, Abdel-Aleem A, Rosti RO, Kayserili H, Swistun D, Scott LC, Bertini, E Boltshauser, E Fazzi, E Travaglini, L Field, SJ Gayral, S Jacoby, M Schurmans, S Dallapiccola, B Majerus, PW Valente, EM Gleeson JG. Mutations in INPP5E, encoding inositol polyphosphate-5-phosphatase E, link phosphatidyl inositol signaling to the ciliopathies. *Nat Genet* 2009;41:1032–6.
- Dafinger C, Liebau MC, Elsayed SM, Hellenbroich Y, Boltshauser E, Korenke GC, Fabretti F, Janecke AR, Ebermann I, Nürnberg G, Nürnberg P, Zentgraf H, Koerber F, Addicks K, Elsobky E, Benzing T, Schermer B, Bolz HJ. Mutations in KIF7 link Joubert syndrome with Sonic Hedgehog signaling and microtubule dynamics. J Clin Invest 2011;121:2662–7.

- Parisi MA, Bennett CL, Eckert ML, Dobyns WB, Gleeson JG, Shaw DWW, McDonald R, Eddy A, Chance PF, Glass IA. The NPHP1 gene deletion associated with Juvenile nephronophthisis is present in a subset of individuals with Joubert syndrome. Am J Hum Genet 2004;75:82–91.
- 25 Coene KLM, Roepman R, Doherty D, Afroze B, Kroes HY, Letteboer SJF, Ngu LH, Budny B, van Wijk E, Gorden NT, Azhimi M, Thauvin-Robinet C, Veltman JA, Boink M, Kleefstra T, Cremers FPM, van Bokhoven H, de Brouwer APM. OFD1 is mutated in X-linked Joubert syndrome and interacts with LCA5-encoded lebercilin. Am J Hum Genet 2009:85:465–81
- 26 Arts HH, Doherty D, van Beersum SEC, Parisi MA, Letteboer SJF, Gorden NT, Peters TA, Marker T, Voesenek K, Kartono A, Ozyurek H, Farin FM, Kroes HY, Wolfrum U, Brunner HG, Cremers FPM, Glass IA, Knoers NVAM, Roepman R. Mutations in the gene encoding the basal body protein RPGRIP1L, a nephrocystin-4 interactor, cause Joubert syndrome. *Nat Genet* 2007;39:882–8.
- 27 Garcia-Gonzalo FR, Corbit KC, Sirerol-Piquer MS, Ramaswami G, Otto EA, Noriega TR, Seol AD, Robinson JF, Bennett CL, Josifova DJ, Garcia-Verdugo JM, Katsanis N, Hildebrandt F, Reiter JF. A transition zone complex regulates mammalian ciliogenesis and ciliary membrane composition. *Nat Genet* 2011;43:776–84.
- 28 Thomas S, Legendre M, Saunier S, Bessières B, Alby C, Bonnière M, Toutain A, Loeuillet L, Szymanska K, Jossic F, Gaillard D, Yacoubi MT, Mougou-Zerelli S, David A, Barthez M, Ville Y, Bole-Feysot C, Nitschke P, Lyonnet S, Munnich A, Johnson CA, Encha-Razavi F, Cormier-Daire V, Thauvin-Robinet C, Vekemans M, Attié-Bitach T. TCTN3 mutations cause Mohr-Majewski syndrome. Am J Hum Genet 2012;91:372–8.
- 29 Sang L, Miller JJ, Corbit KC, Giles RH, Brauer MJ, Otto EA, Baye LM, Wen X, Scales SJ, Kwong M, Huntzicker EG, Sfakianos MK, Sandoval W, Bazan JF, Kulkarni P, Garcia-Gonzalo FR, Seol AD, O'Toole JF, Held S, Reutter HM, Lane WS, Rafiq MA, Noor A, Ansar M, Devi ARR, Sheffield VC, Slusarski DC, Vincent JB, Doherty DA, Hildebrandt F, Reiter JF, Jackson PK. Mapping the NPHP-JBTS-MKS protein network reveals ciliopathy disease genes and pathways. Cell 2011;145:513–28.
- 30 Srour M, Hamdan FF, Schwartzentruber JA, Patry L, Ospina LH, Shevell MI, Désilets V, Dobrzeniecka S, Mathonnet G, Lemyre E, Massicotte C, Labuda D, Amrom D, Andermann E, Sébire G, Maranda B, Consortium FC, Rouleau GA, Majewski J, Michaud JL. Mutations in TMEM231 cause Joubert syndrome in French Canadians. J Med Genet 2012;49:636–41.
- Huang L, Szymanska K, Jensen VL, Janecke AR, Innes AM, Davis EE, Frosk P, Li C, Willer JR, Chodirker BN, Greenberg CR, McLeod DR, Bernier FP, Chudley AE, Müller T, Shboul M, Logan CV, Loucks CM, Beaulieu CL, Bowie RV, Bell SM, Adkins J, Zuniga FI, Ross KD, Wang J, Ban MR, Becker C, Nürnberg P, Douglas S, Craft CM, Akimenko M, Hegele RA, Ober C, Utermann G, Bolz HJ, Bulman DE, Katsanis N, Blacque OE, Doherty D, Parboosingh JS, Leroux MR, Johnson CA, Boycott KM. TMEM237 is mutated in individuals with a Joubert syndrome related disorder and expands the role of the TMEM family at the ciliary transition zone. Am J Hum Genet 2011;89:713–30.
- 32 Lee JH, Silhavy JL, Lee JE, Al-Gazali L, Thomas S, Davis EE, Bielas SL, Hill KJ, lannicelli M, Brancati F, Gabriel SB, Russ C, Logan CV, Sharif SM, Bennett CP, Abe M, Hildebrandt F, Diplas BH, Attié-Bitach T, Katsanis N, Rajab A, Koul R, Sztriha L, Waters ER, Ferro-Novick S, Woods CG, Johnson CA, Valente EM, Zaki MS, Gleeson JG. Evolutionarily assembled cis-regulatory module at a human ciliopathy locus. Science 2012:335:966–9.
- Valente EM, Logan CV, Mougou-Zerelli S, Lee JH, Silhavy JL, Brancati F, Iannicelli M, Travaglini L, Romani S, Illi B, Adams M, Szymanska K, Mazzotta A, Lee JE, Tolentino JC, Swistun D, Salpietro CD, Fede C, Gabriel S, Russ C, Cibulskis K, Sougnez C, Hildebrandt F, Otto EA, Held S, Diplas BH, Davis EE, Mikula M, Strom CM, Ben-Zeev B, Lev D, Sagie TL, Michelson M, Yaron Y, Krause A, Boltshauser E, Elkhartoufi N, Roume J, Shalev S, Munnich A, Saunier S, Inglehearn C, Saad A, Alkindy A, Thomas S, Vekemans M, Dallapiccola B, Katsanis N, Johnson CA, Attie-Bitach T, Gleeson JG. Mutations in TMEM216 perturb ciliogenesis and cause Joubert, Meckel and related syndromes. Nat Genet 2010;42:619–25
- 34 Edvardson S, Shaag A, Zenvirt S, Erlich Y, Hannon GJ, Shanske AL, Gomori JM, Ekstein J, Elpeleg O. Joubert syndrome 2 (JBTS2) in Ashkenazi Jews is associated with a TMEM216 mutation. Am J Hum Genet 2009;86:93–7.
- Baala L, Romano S, Khaddour R, Saunier S, Smith UM, Audollent S, Ozilou C, Faivre L, Laurent N, Foliguet B, Munnich A, Lyonnet S, Salomon R, Encha-Razavi F, Gubler M, Boddaert N, de Lonlay P, Johnson CA, Vekemans M, Antignac C, Attié-Bitach T. The Meckel-Gruber syndrome gene, MKS3, is mutated in Joubert syndrome. Am J Hum Genet 2007;80:186–94.
- Davis EE, Zhang Q, Liu Q, Diplas BH, Davey LM, Hartley J, Stoetzel C, Szymanska K, Ramaswami G, Logan CV, Muzny DM, Young AC, Wheeler DA, Cruz P, Morgan M, Lewis LR, Cherukuri P, Maskeri B, Hansen NF, Mullikin JC, Blakesley RW, Bouffard GG, NISC Comparative Sequencing Program, Gyapay G, Reiger S, Tönshoff B, Kern I, Soliman NA, Neuhaus TJ, Swoboda KJ, Kayserili H, Gallagher TE, Lewis RA, Bergmann C, Otto EA, Saunier S, Scambler PJ, Beales PL, Gleeson JG, Maher ER, Attié-Bitach T, Dollfus H, Johnson CA, Green ED, Gibbs RA, Hildebrandt F, Pierce EA, Katsanis N. TTC21B contributes both causal and modifying alleles across the ciliopathy spectrum. *Nat Genet* 2011;43:189–96.

- 37 Kircher M, Witten DM, Jain P, O'Roak BJ, Cooper GM, Shendure J. A general framework for estimating the relative pathogenicity of human genetic variants. *Nat Genet* 2014;46:310–15.
- 38 Poretti A, Huisman TAGM, Scheer I, Boltshauser E. Joubert syndrome and related disorders: spectrum of neuroimaging findings in 75 patients. Am J Neuroradiol 2011;32:1459–63.
- 39 Richards CS, Bale S, Bellissimo DB, Das S, Grody WW, Hegde MR, Lyon E, Ward BE. ACMG recommendations for standards for interpretation and reporting of sequence variations: Revisions 2007. *Genet Med* 2008;10:294–300.
- 40 Shaheen R, Faqeih E, Alshammari MJ, Swaid A, Al-Gazali L, Mardawi E, Ansari S, Sogaty S, Seidahmed MZ, AlMotairi MI, Farra C, Kurdi W, Al-Rasheed S, Alkuraya FS. Genomic analysis of Meckel-Gruber syndrome in Arabs reveals marked genetic heterogeneity and novel candidate genes. *Eur J Hum Genet* 2013;21:762–8.
- 41 Alazami AM, Alshammari MJ, Salih MA, Alzahrani F, Hijazi H, Seidahmed MZ, Abu Safieh L, Aldosary M, Khan AO, Alkuraya FS. Molecular characterization of Joubert syndrome in Saudi Arabia. Hum Mutat 2012;33:1423–8.
- 42 Dowdle WE, Robinson JF, Kneist A, Sirerol-Piquer MS, Frints SGM, Corbit KC, Zaghloul NA, Zaghloul NA, van Lijnschoten G, Mulders L, Verver DE, Zerres K, Reed RR, Attié-Bitach T, Johnson CA, García-Verdugo JM, Katsanis N, Bergmann C, Reiter JF. Disruption of a ciliary B9 protein complex causes Meckel syndrome. Am J Hum Genet 2011;89:94–110.
- 43 The ENCODE Project Consortium. The ENCODE (ENCyclopedia Of DNA elements) project. Science 2004;306:636–40.
- 44 Brancati F, Barrano G, Silhavy JL, Marsh SE, Travaglini L, Bielas SL, Amorini M, Zablocka D, Kayserili H, Al-Gazali L, Bertini E, Boltshauser E, D'Hooghe M, Fazzi E, Fenerci EY, Hennekam RCM, Kiss A, Lees MM, Marco E, Phadke SR, Rigoli L, Romano S, Salpietro CD, Sherr EH, Signorini G, Stromme P, Stuart B, Sztriha L, Viskochil DH, Yuksel A, Dallapiccola B, The International JSRD Study Group, Valente EM, Gleeson JG. CEP290 mutations are frequently identified in the oculo-renal form of Joubert syndrome—related disorders. Am J Hum Genet 2007;81:104–13.
- Doherty D, Parisi MA, Finn LS, Gunay-Aygun M, Al-Mateen M, Bates D, Clericuzio C, Demir H, Dorschner M, van Essen AJ, Gahl WA, Gentile M, Gorden NT, Hikida A, Knutzen D, Özyurek H, Phelps I, Rosenthal P, Verloes A, Weigand H, Chance PF, Dobyns WB, Glass IA. Mutations in 3 genes (MKS3, CC2D2A and RPGRIP1L) cause COACH syndrome (Joubert syndrome with congenital hepatic fibrosis). J Med Genet 2010;47:8–21.
- Brancati F, Iannicelli M, Travaglini L, Mazzotta A, Bertini E, Boltshauser E, D'Arrigo S, Emma F, Fazzi E, Gallizzi R, Gentile M, Loncarevic D, Mejaski-Bosnjak V, Pantaleoni C, Rigoli L, Salpietro CD, Signorini S, Stringini GR, Verloes A, Zabloka D,

- Dallapiccola B, Gleeson JG, Valente EM. MKS3/TMEM67 mutations are a major cause of COACH syndrome, a Joubert syndrome related disorder with liver involvement. *Hum Mutat* 2009;30:E432.
- 47 den Hollander AI, Koenekoop RK, Yzer S, Lopez I, Arends ML, Voesenek KEJ, Zonneveld MN, Strom TM, Meitinger T, Brunner HG, Hoyng CB, van den Born LI, Rohrschneider K, Cremers FPM. Mutations in the CEP290 (NPHP6) gene are a frequent cause of leber congenital amaurosis. Am J Hum Genet 2006;79:556–61.
- 48 Bachmann-Gagescu R, Ishak GE, Dempsey JC, Adkins J, O'Day D, Phelps IG, Gunay-Aygun M, Kline AD, Szczaluba K, Martorell L, Alswaid A, Alrasheed S, Pai S, Izatt L, Ronan A, Parisi MA, Mefford H, Glass I, Doherty D. Genotype—phenotype correlation in CC2D2A-related Joubert syndrome reveals an association with ventriculomegaly and seizures. J Med Genet 2012;49:126–37.
- Mougou-Zerelli S, Thomas S, Szenker E, Audollent S, Elkhartoufi N, Babarit C, Romano S, Salomon R, Amiel J, Esculpavit C, Gonzales M, Escudier E, Leheup B, Loget P, Odent S, Roume J, Gérard M, Delezoide A, Khung S, Patrier S, Cordier M, Bouvier R, Martinovic J, Gubler M, Boddaert N, Munnich A, Encha-Razavi F, Valente EM, Saad A, Saunier S, Vekemans M, Attié-Bitach T. CC2D2A mutations in Meckel and Joubert syndromes indicate a genotype—phenotype correlation. Hum Mutat 2009;30:1574–82.
- 50 Iannicelli M, Brancati F, Mougou-Zerelli S, Mazzotta A, Thomas S, Elkhartoufi N, Travaglini L, Gomes C, Ardissino GL, Bertini E, Boltshauser E, Castorina P, D'Arrigo S, Fischetto R, Leroy B, Loget P, Bonnière M, Starck L, Tantau J, Gentilin B, Majore S, Swistun D, Flori E, Lalatta F, Pantaleoni C, Penzien J, Grammatico P, International JSRD Study Group, Dallapiccola B, Gleeson JG, Attie-Bitach T, Valente EM. Novel TMEM67 mutations and genotype-phenotype correlates in meckelin-related ciliopathies. Hum Mutat 2010;31:E1319—31.
- 51 Jacoby M, Cox JJ, Gayral S, Hampshire DJ, Ayub M, Blockmans M, Pernot E, Kisseleva MV, Compere P, Schiffmann SN, Gergely F, Riley JH, Perez-Morga D, Woods CG, Schurmans S. INPP5E mutations cause primary cilium signaling defects, ciliary instability and ciliopathies in human and mouse. *Nat Genet* 2009;41:1027–31.
- 52 Schwarz N, Carr A, Lane A, Moeller F, Chen LL, Aguilà M, Nommiste B, Muthiah MN, Kanuga N, Wolfrum U, Nagel-Wolfrum K, da Cruz L, Coffey PJ, Cheetham ME, Hardcastle AJ. Translational read-through of the RP2 Arg120stop mutation in patient iPSC-derived retinal pigment epithelium cells. *Hum Mol Genet* 2015;24:972–86.
- Sameek R, Chinnaiyan AM. Translating genomics for precision cancer medicine. Annu Rev Genomics Hum Genet 2014;15:395–415.

#### **Supplementary Information**

- Figure S1: Coverage efficiency of the MIPs target by gene
- Figure S2. ROC curve and additional ROC analyses
- Figure S3. Differential distribution of mutation types (missense vs truncating) across the 7 genes most commonly associated with JS.
- Figure S4. Frequency of variable clinical features in affected individuals with mutations in *CEP290, TMEM67, AHI1, CC2D2A*, or *C5ORF42* compared to the rest of the JS cohort.
- Table S1. MIPS target
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- Table S3: Detailed phenotypic associations
- Table S4. Correlations of common features of JS
- Table S5. List of all causal RDVs in JS families and false positive causal RDVs in control samples
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- **Table S8: Recurrent alleles**
- Table S9. Genotype-Phenotype Correlations in a large JS cohort

### **Target coverage**

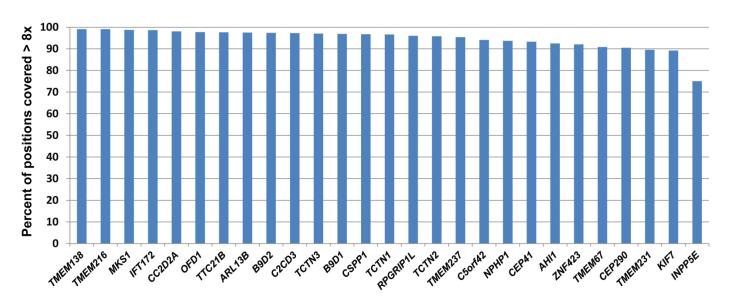


Figure S1: Coverage efficiency of the MIPs target by gene

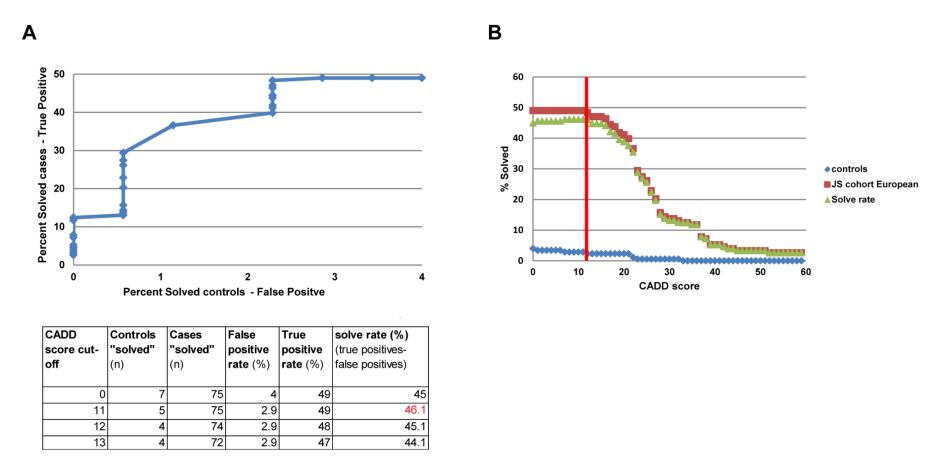
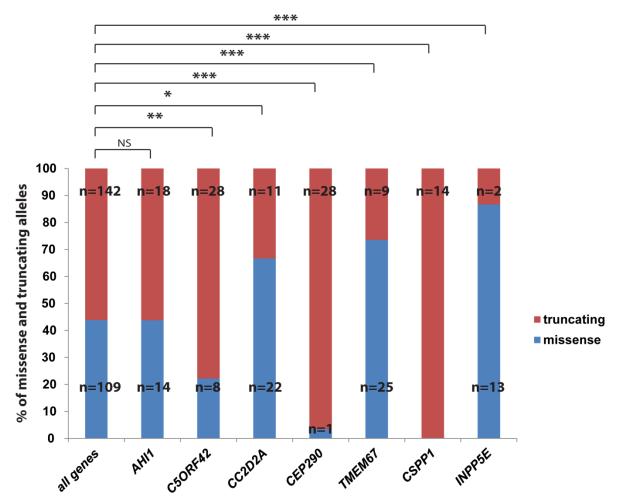


Figure S2. Receiver-Operating-Characteristic (ROC) curve method to determine CADD score cut off for causal mutations (A) ROC curve plotting the proportion of affected individuals with two RDVs against the proportion of control individuals with two RDVs. The table beneath the graph indicates the values for affected and control individuals at representative CADD score cutoffs, as well as the "solve rate" = proportion of affected individuals with two RDVs minus proportion of control individuals with two RDVs (presumed-false positives). Given that the control individuals are all European, the ROC curves were calculated using only the affected individuals of European descent. (B) Proportion of samples with two RDVs plotted against CADD score cutoff. The red curve represents affected individuals, the blue curve indicates the control individuals and the green curve indicates the solve rate. The vertical red bar indicates the CADD value of 11 that was used to define causal variants.



**Figure S3: Differential distribution of mutation types (missense vs truncating) across the 7 genes most commonly associated with JS.** The distribution of mutation types is not significantly different for *AHI1* compared with the entire cohort, but *C5ORF42*, *CEP290* and *CSPP1* have significantly fewer missense mutations than average while *CC2D2A*, *INPP5E* and *TMEM67* have significantly fewer truncating mutations (\*\*\*p<0.001, \*\*p<0.001, \*p<0.01; Fisher's exact test). Each mutation was only counted once, even if it occurred multiple times (homozygous or in >1 affected individual).

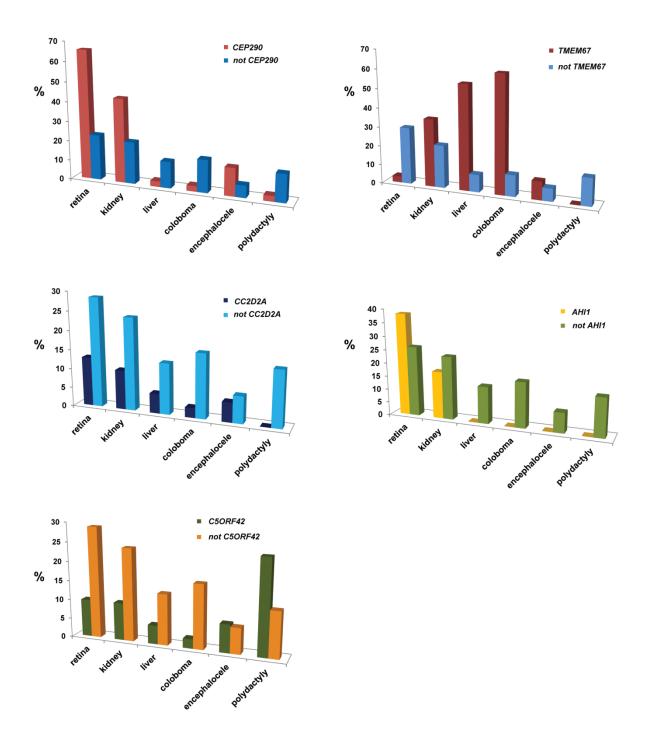


Figure S4. Frequency of variable clinical features in affected individuals with causal mutations in *CEP290*, *TMEM67*, *AHI1*, *CC2D2A*, or *C5ORF42* compared to the rest of the JS cohort.

Table S1. MIPS target

No	Gene	Gene name	Accession#	hg19 position	Exons	Additionally sequenced
1	AHI1	Abelson helper integration site 1	NM_001134831.1	chr6:135,285,296-135,497,776	29	chr6:135709110-135709181
2	ARL13B	ADP-ribosylation factor-like 13B	NM_182896.2	chr3: 93,980,155-94,054,069	11	
3	B9D1	B9 protein domain 1	NM_015681.3	chr17:19,343,170-19,362,713	7	
4	B9D2	B9 protein domain 2	NM_030578.3	chr19: 41,354,421-41,364,173	4	
5	C2CD3	C2 calcium-dependent domain containing 3	NM_001286577.1	chr11:74,012,714-74,171,019	33	chr11:73745633-73745663
6	C5ORF42	chromosome 5 open reading frame 42	NM_023073.3	chr5:37,106,228-37,249,428	52	chr5:37157405-37157532
7	CC2D2A	coiled-coil and C2 domain containing 2A	NM_001080522.2	chr4:15,469,930-15,601,557	38	
8	CEP290	centrosomal protein 290kDa	NM_025114.3	chr12:88,049,020-88,142,216	54	chr12:88509247-88509357
9	CEP41	centrosomal protein 41kDa	NM_018718.2	chr7:130,393,771-130,441,237	11	
10	CSPP1	centrosome and spindle pole associated protein 1	NM_024790.6	chr8:67,064,368-67,196,263	29	chr8:67999048-67999091; chr8:68004028-68004128
11	IFT172	intraflageller transport 172 homolog	NM_015662.2	chr2:27667240-27712678	48	
12	INPP5E	inositol polyphosphate-5- phosphatase, 72kDa	NM_019892.4	chr9:136,428,619-136,439,822	10	
13	KIF7	kinesin family member 7	NM_198525.2	chr15:89,627,977-89,655,451	19	
14	MKS1	Meckel syndrome, type 1	NM_017777.3	chr17:58,205,437-58,219,305	18	
15	NPHP1	nephrocystin-1 (juvenile)	NM_000272.3	chr2:110,122,311-110,205,042	20	
16	OFD1	oral-facial-digital syndrome 1	NM_003611.2	chrX:13,734,745-13,769,353	23	
17	RPGRIP1L	RPGRIP1-like / FTM	NM_015272.2	chr16:53,600,778-53,703,846	27	
18	TCTN1	tectonic family member 1	NM_001082538.2	chr12:110,614,164-110,649,128	15	chr12:111054109-111054167
19	TCTN2	tectonic family member 2	NM_024809.4	chr12:123,671,113-123,708,403	18	
20	TCTN3	tectonic family member 3	NM_015631.5	chr10:95,663,396-95,694,143	14	
21	TMEM138	transmembrane protein 138	NM_016464.4	chr11:61,362,001-61,369,509	5	
22	TMEM216	transmembrane protein 216	NM_001173990.2	chr11:11: 61,391,687-61,398,851	5	
23	TMEM231	transmembrane protein 231	NM_001077418.2	chr16:75,536,744-75,556,286	7	chr16:75,589,872-75,589,968
24	TMEM237	transmembrane protein 237	NM_001044385.2	chr2:201,620,184-201,643,517	13	chr2:202504975-202504998
25	TMEM67	transmembrane protein 67	NM_153704.5	chr8:93,754,857-93,818,057	28	chr8:94772079-94772231
26	TTC21B	tetratricopeptide repeat domain 21B	NM_024753.4	chr2:165,873,362-165,953,843	29	
27	ZNF423	zinc finger protein 423	NM_015069.3	chr16:49,490,605-49,822,738	8	

Table S2. Phenotypic assessment criteria

Major Feature	Positive criteria to determine the presence of this feature (one or more)
Retinal disease	Pigmentary abnormality on fundal examination, abnormal electroretinogram recording, retinal dystrophy, diagnosis of Leber congenital amaurosis or retinitis pigmentosa
Renal disease	Increased echogenicity or cystic kidneys on ultrasound, positive kidney biopsy (microcysts, fibrosis), diagnosis of nephronophthisis, chronic renal failure, dialysis, renal transplant
Liver disease	Persistently elevated transaminases or GGT, increased echogenicity on ultrasound, hepatomegaly, splenomegaly, upper gastrointestinal bleeding, positive liver biopsy (liver fibrosis, ductal plate malformation), portal hypertension, variceal bleeding, spleen removal, medication treatment of liver disease, liver transplant
Encephalocele	Based on clinical examination or head imaging
Coloboma	Based on clinical examination
Polydactyly	Single or multiple, pre-, meso-, or postaxial polydactyly

### **Supplementary Table S3: detailed phenotypic combinations**

			AHI1	ARL13B	B9D1	C9D2	C2CD3	C50RF42	CC2D2A	CEP290	CSPP1	IFT172	INPP5E	KIF7	MKS1	NPHP1	OFD1	RPGRIP1L	TCTN1	TCTN2	TCTN3	TMEM138	TMEM216	TMEM237	тмем67	unkown
Phenotypes present	n	%																	_					_	igsquare	
pure JS	68	33.83	8	1	0	0	0	9	9	0	6	0	2	0	1	1	0	0	0	0	0	0	1	0	0	30
retina only	26	12.93	4	0	0	0	0	1	0	3	1	0	1	0	2	0	0	0	0	0	0	0	0	0	0	14
retina+kidney	19	9.45	4	0	0	0	0	0	1	8	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	4
kidney only	12	5.97	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	1	1	0	7
polydactyly only	11	5.47	0	0	0	0	0	5	0	0	0	0	0	1	0	0	0	1	0	0	0	0	1	0	0	3
coloboma only	8	3.98	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	4
liver only	7	3.48	0	0	0	0	0	1	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4
coloboma+liver	6	2.98	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3
retina+liver+kidney	5	2.48	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	3
encephalocele only	5	2.48	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4
coloboma+liver+kidney	5	2.48	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	0
encephalocele+retina only	4	1.99	0	0	0	0	0	1	0	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
coloboma+retina	4	1.99	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4
coloboma+retina+kidney	3	1.49	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
kidney+liver only	2	0.99	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
polydactyly+kidney only	2	0.99	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
coloboma+retina+liver	2	0.99	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
coloboma+polydactyly	2	0.99	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
polydactyly+liver only	1	0.49	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
polydactyly+retina only	1	0.49	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
polydactyly+retina + kidney	1	0.49	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Polydactyly+retina+liver	1	0.49	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
polydactyly+encephalocele	1	0.49	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0
polydactyly+encephalocele+retina+kidney	1	0.49	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0
coloboma+kidney	1	0.49	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
coloboma+encephalocele+liver	1	0.49	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
coloboma+encephalocele+retina	1	0.49	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
coloboma+polydactyly+encephalocele+retina	1	0.49	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
total	201	100	16	1	0	0	0	21	11	16	10	1	5	1	4	3	1	4	0	2	1	0	4	1	12	87

Only individuals for whom definite positive or negative information for all 6 major associated features was available (retinal disease, renal disease, liver disease, coloboma, polydactyly, encephalocele) were considered for this analysis (n=201).

Table S4. Correlations between common features seen in individuals with JS

Positive associations			
	Odds ratio	95% CI	p-value
Liver disease and coloboma	6.5	3.2, 13.4*	<0.0001
Kidney disease and retinal dystrophy	3.0	1.7, 5.2*	<0.0001
Liver disease and kidney disease	3.0	1.6, 5.5*	0.0004
Polydactyly and encephalocele	2.8	1.03, 7.8*	0.03
Retinal dystrophy and encephalocele	2.2	0.8, 5.5	0.1
Coloboma and encephalocele	1.6	0.5, 5.0	0.18
Coloboma and kidney disease	1.5	0.8, 2.9	0.22
Liver disease and encephalocele	1.2	0.3, 4.3	0.24
Kidney disease and polydactyly	1.2	0.6, 2.3	0.62
Polydactyly and coloboma	1.1	0.4, 2.9	0.87
Negative associations			
	Odds ratio	95% CI	p-value
Kidney disease and encephalocele	0.9	0.4, 2.5	0.91
Retinal dystrophy and liver disease	0.7	0.3, 1.6	0.39
Retinal dystrophy and polydactyly	0.7	0.3, 1.6	0.39
Retinal dystrophy and coloboma	0.6	0.3, 1.3	0.2
Polydactyly and liver disease	0.4	0.1, 1.5	0.08

CI = Confidence Interval, \* statistically significant (p-value <0.05, Fisher's exact test if <5 observations are present in one category or Chi-Square test in all other situations)

Table S5. List of all presumed causal RDVs in JS families and false positive causal RDVs in control samples

IIWID	Gene	mutation4	cDNA1	genomic1	CADD	olynbana	GEDD	maximum MAF	mutation?	cDNA2	genomic?	CADD	Polynhona	GEDD	maximum MAF
UW ID UW003-3	AHI1	mutation1 splice	CDNA1 NM 001134831.1:c.2036+1G>T	chr6:q.135759512C>A	24.9	Polyphen2 NA	5.79	0	mutation2 splice	CDNA2 NM 001134831.1:c.2036+1G>T	genomic2 chr6:q.135759512C>A	24.9	Polyphen2 NA	5.79	0
UW003-3	AHI1	splice	NM 001134831.1:c.2036+1G>T	chr6:q.135759512C>A	24.9	NA	5.79	0	splice	NM 001134831.1:c.2036+1G>T	chr6:g.135759512C>A	24.9	NA	5.79	0
UW009-3	AHI1	p.Gln423*	NM_001134831.1:c.1267C>T	chr6:g.135776949G>A	40	NA NA	5.79	0	p.Gln423*	NM_001134631.1:c.1267C>T	chr6:g.135776949G>A	40	NA NA	5.79	0
UW012-3	AHI1	p.Giii423 p.Leu832*	NM 001134831.1:c.2495T>G	chr6:g.135749895A>C	47	NA NA	5.55	0	p.Lys246*	NM_001134831.1:c.736A>T	chr6:g.135786965T>A	27.4	NA	-1.35	0
UW018-3	AHI1	p.Arg738*	NM 001134831.1:c.2212C>T	chr6:q.135754219G>A	37	NA	4.87	0.0122	p.Gln423*	NM 001134831.1:c.1267C>T	chr6:g.135776949G>A	40	NA	5.7	0
UW028-3	AHI1	p.Tyr634Aspfs*15	NM_001134831.1:c.1897_1898dupGG	chr6:g.135763734_135763735dupCC	36	NA	5.96	0.0122	p.Ser221*	NM_001134831.1:c.662C>G	chr6:g.135787039G>C	36	NA	4.1	0
UW101-1	AHI1	splice	NM_001134831.1:c.1152-2a>g	chr6:g.135777066T>C	20.6	NA	5.7	unknown	p.Trp420*	NM_001134831.1:c.1260G>A	chr6:g.135776956C>T	43	NA	5.7	0
UW115-3	AHI1	p.Arg738*	NM 001134831.1:c.2212C>T	chr6:q.135754219G>A	37	NA	4.87	0.0122	p.Asp659Val	NM 001134831.1:c.1976A>T	chr6:g.135759573T>A	32	1	5.79	0
UW133-3	AHI1	p.Thr671lle	NM_001134831.1:c.2012C>T	chr6:g.135759537G>A	29.8	0.986	5.79	0.0122	p.Thr671lle	NM_001134831.1:c.2012C>T	chr6:g.135759537G>A	29.8	0.986	5.79	0
UW187-3	AHI1	p.Asp372Gly	NM 001134831.1:c.1115A>G	chr6:g.135778668T>C	29.4	0.998	5.48	0	p.Trp725Arg	NM 001134831.1:c.2173T>C	chr6:g.135754258A>G	26.4	0.975	4.55	0
UW188-3	AHI1	p.Gln423*	NM 001134831.1:c.1267C>T	chr6:q.135776949G>A	40	NA	5.7	0	p.Gln423*	NM 001134831.1:c.1267C>T	chr6:g.135776949G>A	40	NA	5.7	0
UW200-3	AHI1	p.Asp719Gly	NM 001134831.1:c.2156A>G	chr6:g.135754275T>C	27	0.286	3.37	0	p.Asp719Glv	NM 001134831.1:c.2156A>G	chr6:g.135754275T>C	27	0.286	3.37	0
UW200-4	AHI1	p.Asp719Gly	NM 001134831.1:c.2156A>G	chr6:q.135754275T>C	27	0.286	3.37	0	p.Asp719Glv	NM 001134831.1:c.2156A>G	chr6:g.135754275T>C	27	0.286	3.37	0
UW205-3	AHI1	p.Arg723Gln	NM_001134831.1:c.2168G>A	chr6:g.135754263C>T	36	0.971	5.74	0	p.Arg723Gln	NM_001134831.1:c.2168G>A	chr6:g.135754263C>T	36	0.971	5.74	0
UW207-3	AHI1	p.Tyr639*	NM 001134831.1:c.1917T>A	chr6:g.135759632A>T	38	NA	-0.941	0	p.Tyr639*	NM 001134831.1:c.1917T>A	chr6:g.135759632A>T	38	NA	-0.941	0
UW209-3	AHI1	p.His896Arg	NM_001134831.1:c.2687A>G	chr6:g.135748382T>C	18.63	0.999	4.94	0	p.His896Arg	NM_001134831.1:c.2687A>G	chr6:g.135748382T>C	18.63	0.999	4.94	0
UW209-4	AHI1	p.His896Arg	NM 001134831.1:c.2687A>G	chr6:q.135748382T>C	18.63	0.999	4.94	0	p.His896Arg	NM 001134831.1:c.2687A>G	chr6:q.135748382T>C	18.63	0.999	4.94	0
UW213-3	AHI1	p.Tyr701Phefs*10	NM_001134831.1:c.2098_2099dupTG	chr6:g.135754332_135754333dupAC	35	NA	5.39	0	p.Trp725*	NM_001134831.1:c.2174G>A	chr6:g.135754257C>T	44	NA	5.74	0
UW218-3	AHI1	p.Arg506*	NM_001134831.1:c.1516C>T	chr6:g.135769538G>A	36	NA	2.74	0.0265	p.Asp675Asn	NM_001134831.1:c.2023G>A	chr6:g.135759526C>T	34	1	5.79	0
UW221-3	AHI1	splice	NM 001134831.1:c.1626+1G>A	chr6:g.135769427C>T	24.9	NA	5.86	0	p.Trp787Cys	NM 001134831.1:c.2361G>T	chr6:q.135752358C>A	29.2	0.996	5.1	0
UW226-3	AHI1	p.Thr304Asnfs*6	NM_001134831.1:c.910dupA	chr6:g.135784284dupT	17.91	NA	1.75	0	p.Thr304Asnfs*6	NM_001134831.1:c.910dupA	chr6:g.135784284dupT	17.91	NA	1.75	0
UW226-4	AHI1	p.Thr304Asnfs*6	NM_001134831.1:c.910dupA	chr6:g.135784284dupT	17.91	NA	1.75	0	p.Thr304Asnfs*6	NM_001134831.1:c.910dupA	chr6:g.135784284dupT	17.91	NA	1.75	0
UW226-5	AHI1	p.Thr304Asnfs*6	NM_001134831.1:c.910dupA	chr6:g.135784284dupT	17.91	NA	1.75	0	p.Thr304Asnfs*6	NM_001134831.1:c.910dupA	chr6:g.135784284dupT	17.91	NA	1.75	0
UW237-3	AHI1	p.Trp725Glyfs*5	NM_001134831.1:c.2172delA	chr6:g.135754259delT	33	NA	2.97	0	p.Trp725Glyfs*5	NM_001134831.1:c.2172delA	chr6:g.135754259delT	33	NA	2.97	0
UW248-3	AHI1	p.Arg351Leu	NM 001134831.1:c.1052G>T	chr6:q.135778731C>A	34	0.999	5.5	0	p.Arg351Leu	NM 001134831.1:c.1052G>T	chr6:q.135778731C>A	34	0.999	5.5	0
UW253-3	AHI1	p.Ser221*	NM_001134831.1:c.662C>G	chr6:g.135787039G>C	36	NA	4.1	0	exon 19 deletion	=					
UW253-4	AHI1	p.Ser221*	NM_001134831.1:c.662C>G	chr6:g.135787039G>C	36	NA	4.1	0	exon 19 deletion						
UW261-3	AHI1	p.Trp725Glyfs*5	NM_001134831.1:c.2172delA	chr6:g.135754259delT	33	NA	2.97	0	p.Trp725Glyfs*5	NM_001134831.1:c.2172delA	chr6:a.135754259delT	33	NA	2.97	0
UW261-4	AHI1	p.Trp725Glyfs*5	NM 001134831.1:c.2172delA	chr6:g.135754259delT	33	NA	2.97	0	p.Trp725Glyfs*5	NM 001134831.1:c.2172delA	chr6:g.135754259delT	33	NA	2.97	0
UW272-3	AHI1	p.Gly766Glu	NM 001134831.1:c.2297G>A	chr6:q.135752422C>T	33	1	5.1	0	p.Asp666Val	NM 001134831.1:c.1997A>T	chr6:g.135759552T>A	29.8	0.977	5.79	0
UW291-3	AHI1	p.Met729llefs*36	NM 001134831.1 hom c.2187 2196delGAGA	•		NA	4.86	0	p.Met729llefs*36	NM 001134831.1 hom c.2187 2196d	•	34	NA	4.86	0
UW292-3	AHI1	p.Val539Phefs*5	NM 001134831.1:c.1614delA	chr6:g.135769440delT	35	NA	5.86	0	p.Val902Asp	NM_001134831.1:c.2705T>A	chr6:g.135748364A>T	18.18	0.994	4.84	0
UW292-4	AHI1	p.Val539Phefs*5	NM_001134831.1:c.1614delA	chr6:g.135769440delT	35	NA	5.86	0	p.Val902Asp	NM_001134831.1:c.2705T>A	chr6:g.135748364A>T	18.18	0.994	4.84	0
UW306-3	AHI1	p.Thr304Asnfs*6	NM 001134831.1:c.910dupA	chr6:g.135784284dupT	17.91	NA	1.75	0	p.Thr304Asnfs*6	NM 001134831.1:c.910dupA	chr6:g.135784284dupT	17.91	NA	1.75	0
UW203-3	ARL13B	p.Val22Gly	NM_182896.2:c.65T>G	chr3:g.93714723T>G	27.9	0.93	5.64	0	p.Asn154Ser	NM_182896.2:c.461A>G	chr3:g.93754255A>G	25.7	0.997	5.78	0
UW277-3	ARL13B	p. Trp82*	NM 182896.2:c.246G>A	chr3:q.93722618G>A	38	NA	5.93	0	p.Arg200Cys	NM 182896.2:c.598C>T	chr3:g.93755507C>T	35	0.999	4.78	0
UW202-3	B9D1	p.Phe95Leu	NM 015681.3:c.285C>A	chr17:g.19251153G>T	22.5	0.156	-3.87	0	p.Phe95Leu	NM 015681.3:c.285C>A	chr17:g.19251153G>T	22.5	0.156	-3.87	0
UW232-3	B9D1	p.Arg156Trp	NM 015681.3:c.466C>T	chr17:g.19247109G>A	22.6	1	3.69	0.0116	p.Tyr32Cys	NM 015681.3:c.95A>G	chr17:g.19263670T>C	26.9	0.987	5.46	0
UW284-3	B9D2	p.Gly155Ser	NM 030578.3:c.463G>A	chr19:g.41860670C>T	20.3	0.451	2.98	0	p.Pro74Ser	NM 030578.3:c.220C>T	chr19:g.41860913G>A	21.7	1	4.04	0
UW309-3	B9D2	p.Leu36Pro	NM 030578.3:c.107T>C	chr19:g.41863909A>G	13.21	0.991	4 48	0	p.Leu36Pro	NM 030578.3:c.107T>C	chr19:g.41863909A>G	13.21	0.991	4.48	0
UW157-3	C2CD3	splice	NM_001286577.1:c.4951+1G>T	chr11:g.73785297C>A	25	NA	5.68	0	p.Gly1756Glu	NM_001286577.1:c.5267G>A	chr11:g.73760476C>T	32	1	5.58	0.0116
UW293-3	C2CD3	p.Arg62*	NM_001286577.1:c.184C>T	chr11:g.73879530G>A	33	NA	5.57	0	p.Arg62*	NM_001286577.1:c.184C>T	chr11:g.73879530G>A	33	NA	5.57	0
UW007-3	C5orf42	p.Ala2909Glnfs*4	NM 023073.3:c.8725delG	chr5:q.37125417delC	36	NA	4.29	0	p.lle165Tyrfs*17	NM 023073.3:c.493delA	chr5:q.37244554delT	17.06	NA	0.513	0
UW033-3	C5orf42	p.Gln2723*	NM_023073.3:c.8167C>T	chr5:g.37153886G>A	38	NA	1.05	0	p.Leu595*	NM_023073.3:c.1784T>G	chr5:g.37226913A>C	36	NA	4.07	0
UW034-3	C5orf42	p.lle165Tyrfs*17	NM_023073.3:c.493delA	chr5:g.37244554delT	17.06	NA	0.513	0	p.Arg1336Trp	NM_023073.3:c.4006C>T	chr5:g.37187590G>A	16.87	0.999	4.55	0.0116
UW039-3	C5orf42	p.Glu2906*	NM_023073.3:c.8716G>T	chr5:g.37125426C>A	51	NA	6.07	0	p.Glu1003*	NM_023073.3:c.3007G>T	chr5:g.37206441C>A	22.7	NA	5.24	0
UW119-3	C5orf42	splice	NM_023073.3:c.8855+1G>A	chr5:g.37122531C>T	25.1	NA	5.9	0	p.Trp1000Leu	NM_023073.3:c.2999G>T	chr5:g.37206449C>A	21.5	0.999	5.24	0
UW184-3	C5orf42	p.Arg2493*	NM 023073.3:c.7477C>T	chr5:q.37165697G>A	38	NA	4.43	0.0116	p.Arg1336Trp	NM 023073.3:c.4006C>T	chr5:q.37187590G>A	16.87	0.999	4.55	0.0227
UW184-4	C5orf42	p.Arg2493*	NM_023073.3:c.7477C>T	chr5:g.37165697G>A	38	NA	4.43	0.0116	p.Arg1336Trp	NM_023073.3:c.4006C>T	chr5:g.37187590G>A	16.87	0.999	4.55	0.0227
UW185-3	C5orf42	p.Thr2755Serfs*8	NM_023073.3:c.8263_8264insG	chr5:g.37148318_37148319insC	27	NA	-2.22	0	p.Leu595*	NM_023073.3:c.1784T>G	chr5:g.37226913A>C	36	NA	4.07	0
UW186-3	C5orf42	p.Thr2755Serfs*8	NM_023073.3:c.8263_8264insG	chr5:g.37148318_37148319insC	27	NA	-2.22	0	p.Leu595*	NM_023073.3:c.1784T>G	chr5:g.37226913A>C	36	NA	4.07	0
UW186-4	C5orf42	p.Thr2755Serfs*8	NM_023073.3:c.8263_8264insG	chr5:g.37148318_37148319insC	27	NA	-2.22	0	p.Leu595*	NM_023073.3:c.1784T>G	chr5:g.37226913A>C	36	NA	4.07	0
UW190-4	C5orf42	p.Arg2660*	NM 023073.3:c.7978C>T	chr5:g.37154075G>A	37	NA	5.21	0.0116	p.Gln793*	NM 023073.3:c.2377C>T	chr5:g.37224757G>A	25.7	NA	2.5	0
UW190-5	C5orf42	p.Arg2660*	NM_023073.3:c.7978C>T	chr5:g.37154075G>A	37	NA	5.21	0.0116	p.Gln793*	NM_023073.3:c.2377C>T	chr5:g.37224757G>A	25.7	NA	2.5	0
UW191-3	C5orf42	p.Glu2870*	NM_023073.3:c.8608G>T	chr5:g.37138844C>A	39	NA	3.77	0	p.Arg785*	NM_023073.3:c.2353C>T	chr5:g.37224781G>A	31	NA	3.56	0
UW194-3	C5orf42	p.Pro2397Glnfs*37	NM_023073.3:c.7190delC	chr5:g.37168936delG	29	NA	4.02	0	p.Arg2904*	NM_023073.3:c.8710C>T	chr5:g.37125432G>A	37	NA	1.65	0.0116
UW194-4	C5orf42	p.Pro2397Glnfs*37	NM_023073.3:c.7190delC	chr5:g.37168936delG	29	NA	4.02	0	p.Arg2904*	NM_023073.3:c.8710C>T	chr5:g.37125432G>A	37	NA	1.65	0.0116
UW195-3	C5orf42	p.Arg3020*	NM_023073.3:c.9058C>T	chr5:g.37120408G>A	36	NA	0.934	0.0681	p.Trp903*	NM_023073.3:c.2709G>A	chr5:g.37221463C>T	38	NA	3.83	0
UW196-3	C5orf42	p.Thr2755Asnfs*8	NM_023073.3:c.8263dupA	chr5:g.37148319dupT	27	NA	-2.22	0	p.Arg2493*	NM_023073.3:c.7477C>T	chr5:g.37165697G>A	38	NA	4.43	0.0116
UW197-3	C5orf42	p.Arg2904*	NM_023073.3:c.8710C>T	chr5:g.37125432G>A	37	NA	1.65	0.0116	p.Arg944His	NM_023073.3:c.2831G>A	chr5:g.37213750C>T	23.1	0.999	5.44	0
UW199-3	C5orf42	p.Arg2904*	NM_023073.3:c.8710C>T	chr5:g.37125432G>A	37	NA	1.65	0.0116	p.Gln975*	NM_023073.3:c.2923C>T	chr5:g.37206525G>A	11.25	NA	5.4	0
UW210-3	C5orf42	p.Leu1213Alafs*30	NM_023073.3:c.3636_3637delAT	chr5:g.37198839_37198840delAT	28.5	NA	1.28	0	splice	NM_023073.3:c.8855+1G>T	chr5:g.37122531C>A	25.1	NA	5.9	0
UW216-3	C5orf42	p.lle165Tyrfs*17	NM_023073.3:c.493delA	chr5:g.37244554delT	17.06	NA	0.513	0	p.Thr323Met	NM_023073.3:c.968C>T	chr5:g.37231122G>A	26.8	0.668	4.48	0.0314
UW222-3	C5orf42	p.Gly2663Alafs*40	NM_023073.3:c.7988_7989delGA	chr5:g.37154064_37154065delTC	24.1	NA	-0.221	0	p.Gly2663Alafs*40	NM_023073.3:c.7988_7989delGA	chr5:g.37154064_37154065delT	24.1	NA	-0.221	0
UW231-3	C5orf42	p.Gln759*	NM_023073.3:c.2275C>T	chr5:g.37226422G>A	36	NA	5.22	0	p.Arg871Cys	NM_023073.3:c.2611C>T	chr5:g.37221561G>A	34	1	5.63	0
UW243-3	C5orf42	p.Trp2593*	NM_023073.3:c.7778G>A	chr5:g.37158360C>T	35	NA	2.39	0	p.Trp2593*	NM_023073.3:c.7778G>A	chr5:g.37158360C>T	35	NA	2.39	0
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UW245-3 UW252-3	C5orf42 C5orf42	p.Trp2593* p.Arg2493*	NM_023073.3:c.7778G>A NM_023073.3:c.7477C>T	chr5:g.37158360C>T chr5:g.37165697G>A	35 38	NA NA	2.39 4.43	0 0.0116	p.Trp2593* p.Arg2493*	NM_023073.3:c.7778G>A NM_023073.3:c.7477C>T	chr5:g.37158360C>T chr5:g.37165697G>A	35 38	NA NA	2.39 4.43	0 0.0116
UW255-3	C50rf42	p.Aig2493 p.Leu2606*	NM 023073.3:c.7477C>1	chr5:g.37157912A>T	42	NA	4.43	0.0116	p.Tyr607Thrfs*6	NM 023073.3:c.1819delT	chr5:g.37226878delA	25.8	NA	5.26	0.0116
UW268-3	C5orf42	p.Gly2663Alafs*40	NM_023073.3:c.7988_7989delGA	chr5:g.37154064_37154065delTC	24.1	NA	-0.221	0	p.Gly2663Alafs*40	NM_023073.3:c.7988_7989delGA	chr5:g.37154064_37154065delT	24.1	NA	-0.221	0
UW273-3	C5orf42	p.Leu171Serfs*8	NM_023073.3:c.510dupT	chr5:g.37244537dupA	23.5	NA	2.16	0	p.Arg2904*	NM_023073.3:c.8710C>T	chr5:g.37125432G>A	37	NA	1.65	0.0116
UW276-3	C5orf42	p.Gly2663Alafs*40	NM_023073.3:c.7988_7989delGA	chr5:g.37154064_37154065delTC	24.1	NA	-0.221	0	p.Gly2663Alafs*40	NM_023073.3:c.7988_7989delGA	chr5:g.37154064_37154065delT	24.1	NA	-0.221	0
UW278-3	C5orf42	p.Gly2663Alafs*40	NM_023073.3:c.7988_7989delGA	chr5:g.37154064_37154065delTC	24.1	NA	-0.221	0	p.Gly2663Alafs*40	NM_023073.3:c.7988_7989delGA	chr5:q.37154064 37154065delT	24.1	NA	-0.221	0
UW283-3	C5orf42	p.Trp2593*	NM_023073.3:c.7778G>A	chr5:g.37158360C>T	35	NA	2.39	0	p.Trp2593*	NM_023073.3:c.7778G>A	chr5:g.37158360C>T	35	NA	2.39	0
UW295-3	C5orf42	p.Arg1044GInfs*2	NM_023073.3:c.3130_3131insA	chr5:g.37206317_37206318insT	25.3	NA	2.79	0	p.Ala1200Val	NM_023073.3:c.3599C>T	chr5:g.37198877G>A	29.6	0.997	5.28	0.0116
UW297-3	C5orf42	p.Leu1213Alafs*30	NM_023073.3:c.3636_3637delAT	chr5:g.37198839_37198840delAT	28.5	NA	1.28	0	p.Glu142Lys	NM_023073.3:c.424G>A	chr5:g.37244623C>T	22.9	0.998	5.69	0
UW300-3	C5orf42	p.Leu171Serfs*11	NM_023073.3:c.510delT	chr5:g.37244537delA	23	NA	-1.66	0	p.Asn273His	NM_023073.3:c.817A>C	chr5:g.37239832T>G	27.1	0.999	5.46	0
UW304-4	C5orf42	p.Arg2904*	NM_023073.3:c.8710C>T	chr5:g.37125432G>A	37	NA	1.65	0.116	p.Gln759*	NM_023073.3:c.2275C>T	chr5:g.37226422G>A	36	NA	5.22	0
UW305-3	C5orf42	p.Val2090Alafs*15	NM_023073.3:c.6269_6270delTG	chr5:g.37170335_37170336delCA	29.5	NA	2.15	0	p.Glu142Lys	NM_023073.3:c.424G>A	chr5:g.37244623C>T	34	0.998	5.69	0
UW036-3	CC2D2A	p.Pro1122Ser	NM_001080522.2:c.3364C>T	chr4:g.15569375C>T	23.3	1	6.08	0	p.Pro1122Ser	NM_001080522.2:c.3364C>T	chr4:g.15569375C>T	23.3	1	6.08	0
UW041-3	CC2D2A	p.Arg950*	NM_001080522.2:c.2848C>T	chr4:g.15560806C>T	22.6	NA	5.37	0.0278	p.Arg950*	NM_001080522.2:c.2848C>T	chr4:g.15560806C>T	22.6	NA	5.37	0.0278
UW046-1	CC2D2A	p.Val1430Ala	NM_001080522.2:c.4289T>C	chr4:g.15591277T>C	27.5	0.977	5.42	0	Val1097Phefs*2	NM_001080522.2:c.3289delG	chr4:g.15569300delG	22.7	NA	6.08	0
UW046-2	CC2D2A	p.Val1430Ala	NM_001080522.2:c.4289T>C	chr4:g.15591277T>C	27.5	0.977	5.42	0	Val1097Phefs*2	NM_001080522.2:c.3289delG	chr4:g.15569300delG	22.7	NA	6.08	0
UW047-3	CC2D2A	p.Gln1096His	NM_001080522.2:c.3288G>C	chr4:g.15569105G>C	21.9	0.465	5.4	0	p.Arg1019*	NM_001080522.2:c.3055C>T	chr4:g.15565018C>T	22.9	NA	4.36	0.026
UW048-3	CC2D2A	p.Pro1122Ser	NM_001080522.2:c.3364C>T	chr4:g.15569375C>T	23.3	1	6.08	0	p.Pro1122Ser	NM_001080522.2:c.3364C>T	chr4:g.15569375C>T	23.3	1	6.08	0
UW049-3	CC2D2A	Val1097Phefs*2	NM_001080522.2:c.3289delG	chr4:g.15569300delG	22.7	NA 0.995	6.08 5.75	0	p.Arg1528Cys	NM_001080522.2:c.4582C>T	chr4:g.15601237C>T	20.3 20.3	0.995 0.995	5.75 5.75	0
UW050-3 UW050-6	CC2D2A CC2D2A	p.Arg1528Cys p.Arg1528Cys	NM_001080522.2:c.4582C>T NM_001080522.2:c.4582C>T	chr4:g.15601237C>T chr4:g.15601237C>T	20.3 20.3	0.995	5.75	0	p.Arg1528Cys p.Arg1528Cys	NM_001080522.2:c.4582C>T NM_001080522.2:c.4582C>T	chr4:g.15601237C>T chr4:g.15601237C>T	20.3	0.995	5.75	0
UW075-3	CC2D2A	p.Val1298Phefs*17	NM_001080522.2:c.3891_3892delTG	chr4:g.15801237C>1 chr4:g.15581710_15581711delTG	36	0.995 NA	5.35	0	p.Leu559Pro	NM_001080522.2:c.14362C>1	chr4:g.15538611T>C	24.3	0.998	5.58	0
UW076-3	CC2D2A	p.Arg1284Cys	NM_001080522.2:c.3850C>T	chr4:g.15581669C>T	35	1	5.16	0	p.Val1045Ala	NM_001080522.2:c.3134T>C	chr4:g.15565097T>C	21.1	0.848	5.41	0
UW079-3	CC2D2A	p.Val1151Ala	NM_001080522.2:c.3452T>C	chr4:g.15570969T>C	25.7	0.883	6.03	0	ř	e <sup>1</sup> NM_001080522.2:c.1263_1264insGG	=		NA	5.78	0
UW079-4	CC2D2A	p.Val1151Ala	NM_001080522.2:c.3452T>C	chr4:g.15570969T>C	25.7	0.883	6.03	0	·	e <sup>1</sup> NM_001080522.2:c.1263_1264insGG	=		NA	5.78	0
UW080-3	CC2D2A	Val1097Phefs*2	NM_001080522.2:c.3289delG	chr4:g.15569300delG	22.7	NA	6.08	0	p.Thr1116Met	NM_001080522.2:c.3347C>T	chr4:g.15569358C>T	19.14	0.997	5.24	0.0244
UW081-3	CC2D2A	splice	NM_001080522.2:c.4179+1delG	chr4:g.15589553delG	15.53	NA	5.73	0	p.Asp1556Val	NM 001080522.2:c.4667A>T	chr4:q.15601322A>T	22.1	0.982	5.75	0.0266
UW088-3	CC2D2A	p.P1250Gfs*11	NM_001080522.2:c.3743_3746dupTGGT	chr4:g.15575921_15575924dupTGGT	36	NA	4.92	0	p.Arg1330Gln	NM_001080522.2:c.3989G>A	chr4:g.15587793G>A	29.1	0.973	3.38	0
UW088-4	CC2D2A	p.P1250Gfs*11	NM_001080522.2:c.3743_3746dupTGGT	chr4:g.15575921_15575924dupTGGT	36	NA	4.92	0	p.Arg1330Gln	NM_001080522.2:c.3989G>A	chr4:g.15587793G>A	29.1	0.973	3.38	0
UW102-3	CC2D2A	splice	NM_001080522.2:c.3772-1G>T	chr4:g.15581590G>T	24.6	NA	5.38	0	p.Arg1528Cys	NM_001080522.2:c.4582C>T	chr4:g.15601237C>T	20.3	0.995	5.75	0
UW104-3	CC2D2A	p.Val1045Ala	NM_001080522.2:c.3134T>C	chr4:g.15565097T>C	21.1	0.886	5.41	0	splice	NM_001080522.2:c.1017+1G>A	chr4:g.15517628G>A	22.3	NA	6.17	0
UW204-3	CC2D2A	p.Arg1019*	NM_001080522.2:c.3055C>T	chr4:g.15565018C>T	22.9	NA	4.36	0.026	p.Asp1556Val	NM_001080522.2:c.4667A>T	chr4:g.15601322A>T	22.1	0.982	5.75	0.0266
UW260-3	CC2D2A	Val1097Phefs*2	NM_001080522.2:c.3289delG	chr4:g.15569300delG	22.7	NA	6.08	0	p.Arg1330Gln	NM_001080522.2:c.3989G>A	chr4:g.15587793G>A	29.1	0.973	3.38	0
UW262-3	CC2D2A	p.Thr1581Ala	NM_001080522.2:c.4741A>G	chr4:g.15602926A>G	18.68	0.999	5.69	0	p.Thr1116Met	NM_001080522.2:c.3347C>T	chr4:g.15569358C>T	19.14	0.997	5.24	0.0244
UW265-3	CC2D2A	p.Glu1000Val	NM_001080522.2:c.2999A>T	chr4:g.15562230A>T	17.08	0.23	5.5	0	p.Glu1000Val	NM_001080522.2:c.2999A>T	chr4:g.15562230A>T	17.08	0.23	5.5	0
UW265-4	CC2D2A	p.Glu1000Val	NM_001080522.2:c.2999A>T	chr4:g.15562230A>T	17.08	0.23	5.5	0	p.Glu1000Val	NM_001080522.2:c.2999A>T	chr4:g.15562230A>T	17.08	0.23	5.5	0
UW267-3	CC2D2A	p.Pro1122Ser	NM_001080522.2:c.3364C>T	chr4:g.15569375C>T	23.3	1	6.08	0	p.Pro1122Ser	NM_001080522.2:c.3364C>T	chr4:g.15569375C>T	23.3	1	6.08	0
UW267-4	CC2D2A	p.Pro1122Ser	NM_001080522.2:c.3364C>T	chr4:g.15569375C>T	23.3	1	6.08	0	p.Pro1122Ser	NM_001080522.2:c.3364C>T	chr4:g.15569375C>T	23.3	1	6.08	0
UW271-3	CC2D2A	p.Ser875*	NM_001080522.2:c.2624C>A	chr4:g.15556832C>A	39	NA	1.89	0	p.Lys501_Asp502delinsAsn	NM_001080522.2:c.1503_1505delAG	-	12.78	NA 0.000	5.18	0 0.0266
UW275-3 UW287-3	CC2D2A CC2D2A	splice splice	NM_001080522.2:c.4179+1delG NM_001080522.2:c.1017+1G>A	chr4:g.15589553delG chr4:g.15517628G>A	15.53 22.3	NA NA	5.73 6.17	0 0.0255	p.Asp1556Val p.Leu1534Val	NM_001080522.2:c.4667A>T NM_001080522.2:c.4600T>G	chr4:g.15601322A>T chr4:g.15601255T>G	22.1 14.55	0.982 0.999	5.75 -3.36	0.0266
UW288-3	CC2D2A	Val1097Phefs*2	NM_001080522.2:c.3289delG	chr4:g.15569300delG	22.7	NA	6.08	0.0233	p.Asp1556Val	NM_001080522.2:c.4667A>T	chr4:g.15601322A>T	22.1	0.982	5.75	0.0266
UW296-3	CC2D2A	p.Thr1116Met	NM_001080522.2:c.3347C>T	chr4:g.15569358C>T	19.14	0.997	5.24	0.0244	p.Thr1116Met	NM_001080522.2:c.3347C>T	chr4:g.15569358C>T	19.14	0.997	5.24	0.0244
UW296-4	CC2D2A	p.Thr1116Met	NM_001080522.2:c.3347C>T	chr4:g.15569358C>T	19.14	0.997	5.24	0.0244	p.Thr1116Met	NM_001080522.2:c.3347C>T	chr4:g.15569358C>T	19.14	0.997	5.24	0.0244
UW301-3	CC2D2A	p.Ser1615Leufs*16	NM_001080522.2:c.4843_4846delTCTC	chr4:g.15603028_15603031delTCTC	22.4	NA	5.69	0.02	p.Glu891Lys	NM_001080522.2:c.2671G>A	chr4:g.15558972G>A	32	0.978	4.79	0
UW302-3	CC2D2A	p.Asp1556Val	NM_001080522.2:c.4667A>T	chr4:g.15601322A>T	22.1	0.982	5.75	0	p.Thr1114Met	NM_001080522.2:c.3341C>T	chr4:g.15569352C>T	21.3	1	5.24	0
UW302-4	CC2D2A	p.Asp1556Val	NM_001080522.2:c.4667A>T	chr4:g.15601322A>T	22.1	0.982	5.75	0	p.Thr1114Met	NM_001080522.2:c.3341C>T	chr4:g.15569352C>T	21.3	1	5.24	0
UW307-3	CC2D2A	p.lle1199Thr	NM_001080522.2:c.3596T>C	chr4:g.15575774T>C	28.7	0.989	5.18	0	p.Gln1497His	NM_001080522.2:c.4491A>C	chr4:g.15599083A>C	20.8	0.997	1.9	0
UW308-3	CC2D2A	p.lle1409Thr	NM_001080522.2:c.4226T>C	chr4:g.15591214T>C	29.6	0.973	5.74	0	p.lle1409Thr	NM_001080522.2:c.4226T>C	chr4:g.15591214T>C	29.6	0.973	5.74	0
UW312-3	CC2D2A	p.Glu1259*	NM_001080522.2:c.3774dupT	chr4:g.15581593dupT	38	NA	5.38	0	p.Arg1528Cys	NM_001080522.2:c.4582C>T	chr4:g.15601237C>T	20.6	0.995	5.75	0
UW315-3	CC2D2A	p.Glu1259*	NM_001080522.2:c.3774dupT	chr4:g.15581593dupT	38	NA	5.38	0	p.Asp1556Val	NM_001080522.2:c.4667A>T	chr4:g.15601322A>T	25.5	0.982	5.75	0.0266
UW002-3	CEP290	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0	p.Gln662*	NM_025114.3:c.1984C>T	chr12:g.88508265G>A	38	NA	5.87	0
UW008-3	CEP290	p.Val2093Serfs*4	NM_025114.3:c.6277delG	chr12:g.88456549delC	22.7	NA	5.93	0	p.Gln662*	NM_025114.3:c.1984C>T	chr12:g.88508265G>A	38	NA	5.87	0
UW013-3	CEP290	p.lle556Phefs*17	NM_025114.3:c.1666delA	chr12:g.88512305delT	28.1	NA	4.38	0	p.Gln1302*	NM_025114.3:c.3904C>T	chr12:g.88482934G>A	37	NA	3.69	0
UW013-4	CEP290	p.lle556Phefs*17	NM_025114.3:c.1666delA	chr12:g.88512305delT	28.1	NA	4.38	0	p.Gln1302*	NM_025114.3:c.3904C>T	chr12:g.88482934G>A	37	NA	3.69	0
UW016-1	CEP290	p.Gln1871Valfs*2	NM_025114.3:c.5611_5614delCAAA	chr12:g.88471094_88471097delTTTG	36	NA	4.59	0	p.Gln1628*	NM_025114.3:c.4882C>T	chr12:g.88476938G>A	47	NA	5.67	0.0244
UW020-3	CEP290	p.lle556Asnfs*20	NM_025114.3:c.1666dupA	chr12:g.88512305dupT	32	NA	5.53	0	p.Arg1782*	NM_025114.3:c.5344C>T	chr12:g.88472889G>A	41	NA	3.06	0
UW029-3	CEP290	p.Lys1575*	NM_025114.3:c.4723A>T	chr12:g.88477713T>A	51	NA	5.43	0	p.Tyr218*	NM_025114.3:c.654T>G	chr12:g.88524060A>C	38	NA	3.94	0
UW032-3 UW040-3	CEP290 CEP290	p.Thr55Serfs*3 p.Glu1462Argfs*5	NM_025114.3:c.164_167delCTCA NM_025114.3:c.4384delG	chr12:g.88534746_88534749delTGAG chr12:g.88479869delC	22.9 36	NA NA	5.86 5.78	0	p.Arg1978* p.Glu1462Argfs*5	NM_025114.3:c.5932C>T NM_025114.3:c.4384delG	chr12:g.88465150G>A chr12:g.88479869delC	52 36	NA NA	5.23 5.78	0.0123
UW045-3	CEP290 CEP290	p.Giu1462Argis 5 p.Arg1465*	NM_025114.3:c.4393C>T	chr12:g.88479860G>A	41	NA NA	4.89	0	p.Giu1462Aigis 5 p.Arg1465*	NM_025114.3:c.4393C>T	chr12:g.88479860G>A	41	NA NA	4.89	0
UW211-3	CEP290	p.Val705Leufs*11	NM_025114.3:c.4393631 NM_025114.3:c.2112delA	chr12:g.88505576delT	29	NA	4.61	0	p.Lys1575*	NM_025114.3:c.4723A>T	chr12:g.88477713T>A	51	NA	5.43	0
UW219-3	CEP290	p.Lys1484Asnfs*4	NM_025114.3:c.4452_4455delAGAA	chr12:g.88478612_88478615delTTCT	38	NA	5.24	0	p.Leu1062Argfs*3	NM_025114.3:c.3185delT	chr12:g.88487671delA	34	NA	5.66	0
UW220-3	CEP290	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0
UW240-3	CEP290	p.lle556Phefs*17	NM_025114.3:c.1666delA	chr12:g.88512305delT	28.1	NA	4.38	0	p.lle556Phefs*17	NM 025114.3:c.1666delA	chr12:g.88512305delT	28.1	NA	4.38	0
UW241-3	CEP290	p.lle1059Lysfs*6	NM_025114.3:c.3176delT	chr12:g.88487680delA	35	NA	5.66	0	p.lle1059Lysfs*6	NM_025114.3:c.3176delT	chr12:g.88487680delA	35	5.66	0	0
UW241-6	CEP290	p.lle1059Lysfs*6	NM_025114.3:c.3176delT	chr12:g.88487680delA	35	NA	5.66	0	p.lle1059Lysfs*6	NM_025114.3:c.3176delT	chr12:g.88487680delA	35	5.66	0	0
UW241-7	CEP290	p.lle1059Lysfs*6	NM_025114.3:c.3176delT	chr12:g.88487680delA	35	NA	5.66	0	p.lle1059Lysfs*6	NM_025114.3:c.3176delT	chr12:g.88487680delA	35	5.66	0	0
UW244-3	CEP290	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0
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UW244-4	CEP290	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	45	NA	2.73	0	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	45	NA	2.73	0
UW246-3	CEP290	p.Tyr218*	NM_025114.3:c.654T>G	chr12:g.88524060A>C	38	NA	3.94	0	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	45	NA	2.73	0
UW250-3	CEP290	splice	NM_025114.3:c.1623+1G>A	chr12:g.88512419C>T	24.9	NA	5.53	0	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0
UW254-3	CEP290	p.Glu1656Asnfs*3	NM_025114.3:c.4966_4967delGA	chr12:g.88476853_88476854delTC	36	NA	5.55	0	p.Trp7Cys	NM_025114.3:c.21G>T	chr12:g.88535064C>A	23	0.999	5.03	0
UW259-3	CEP290	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0
UW263-3	CEP290	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0
				=		NA		0				50	NA		0
UW269-3	CEP290	p.Glu1902*	NM_025114.3:c.5704G>T	chr12:g.88471004C>A	50		5.27	-	p.Glu1902*	NM_025114.3:c.5704G>T	chr12:g.88471004C>A			5.27	-
UW280-3	CEP290	p.Lys1575*	NM_025114.3:c.4723A>T	chr12:g.88477713T>A	51	NA	5.43	0	p.Arg1508*	NM_025114.3:c.4522C>T	chr12:g.88478545G>A	42	NA	4.64	0
UW281-3	CEP290	p.Tyr2313*	NM_025114.3:c.6939C>A	chr12:g.88449374G>T	10.19	NA	3.33	0	p.Met407Glufs*14	NM_025114.3:c.1219_1220delAT	chr12:g.88514913_88514914del	27.7	NA	5.84	0
UW282-3	CEP290	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0
UW282-4	CEP290	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	36	NA	2.73	0
UW286-3	CEP290	splice		=	23.2	NA	5.86	0		NM_025114.3:c.5668G>T	-	36	NA	2.73	0
			NM_025114.3:c.103-1G>T	chr12:g.88534811C>A					p.Gly1890*		chr12:g.88471040C>A				
UW303-3	CEP290	p.lle556Phefs*17	NM_025114.3:c.1666delA	chr12:g.88512305delT	28.1	NA	5.53	0	p.lle556Phefs*17	NM_025114.3:c.1666delA	chr12:g.88512305delT	28.1	NA	5.53	0
UW316-3	CEP290	p.lle1059Asnfs*11	NM_025114.3:c.3175dupA	chr12:g.88487681dupT	34	NA	5.47	0	p.Gly1890*	NM_025114.3:c.5668G>T	chr12:g.88471040C>A	45	NA	2.73	0
UW035-3	CSPP1	p.N903Mfs*2	NM_024790.6:c.2708delA	chr8:g.68076638delA	35	NA	4.19	0	p.N903Mfs*2	NM_024790.6:c.2708delA	chr8:g.68076638delA	35	NA	4.19	0
UW097-3	CSPP1	p.Glu750Glyfs*30	NM_024790.6:c.2244_2245delAA	chr8:g.68070699_68070700delAA	35	NA	5.28	0	p.Glu761Lysfs*35	NM_024790.6:c.2280delA	chr8:g.68070735delA	23.3	NA	-2.38	0.0122
UW097-6	CSPP1	p.Glu750Glyfs*30	NM 024790.6:c.2244 2245delAA	chr8:g.68070699_68070700delAA	35	NA	5.28	0	p.Glu761Lysfs*35		-	23.3	NA	-2.38	0.0122
				· · · · · · · · · · · · · · · · · · ·					· ·	NM_024790.6:c.2280delA	chr8:g.68070735delA				
UW123-3	CSPP1	p.Tyr1071*	NM_024790.6:c.3212dupA	chr8:g.68102891dupA	36	NA	4.31	0	splice	NM_024790.6:c.2953+1G>A	chr8:g.68084791G>A	22.8	NA	5.62	0
UW124-3	CSPP1	p.Tyr1071*	NM_024790.6:c.3212dupA	chr8:g.68102891dupA	36	NA	4.31	0	splice	NM_024790.6:c.2953+1G>A	chr8:g.68084791G>A	22.8	NA	5.62	0
UW127-3	CSPP1	p.Glu819Argfs*7	NM_024790.6:c.2448_2454dupAGAAGAA	chr8:g.68071297_68071303dupAGAAGAA	25.7	NA	5.06	0	p.Glu819Argfs*7	NM_024790.6:c.2448_2454dupAGAAG	chr8:g.68071297 68071303dup/	25.7	NA	5.06	0
UW128-3	CSPP1	p.Arg153Glyfs*35	NM_024790.6:c.457delA	chr8:g.68005823deIA	27.5	NA	5.14	0	p.Arg754*	NM_024790.6:c.2260C>T	chr8:g.68070715C>T	42	NA	5.28	0
UW129-3	CSPP1					NA	5.07	0.0253				24.5	NA	2.8	0
		p.Arg220*	NM_024790.6:c.658C>T	chr8:g.68007675C>T	22.1				p.Met843Glufs*25	NM_024790.6:c.2527_2528delAT	• -				-
UW129-4	CSPP1	p.Arg220*	NM_024790.6:c.658C>T	chr8:g.68007675C>T	22.1	NA	5.07	0.0253	p.Met843Glufs*25	NM_024790.6:c.2527_2528delAT	-	24.5	NA	2.8	0
UW130-3	CSPP1	p.Met843Glufs*25	NM_024790.6:c.2527_2528delAT	chr8:g.68074049_68074050delAT	24.5	NA	2.8	0	p.Met843Glufs*25	NM_024790.6:c.2527_2528delAT	chr8:g.68074049_68074050delA	24.5	NA	2.8	0
UW137-3	CSPP1	splice	NM_024790.6:c.3205+1G>A	chr8:g.68092162G>A	21.5	NA	5.56	0	splice	NM_024790.6:c.950+1G>C	chr8:g.68007968G>C	22	NA	6.06	0
UW143-3	CSPP1	p.Arg378*	NM_024790.6:c.1132C>T	chr8:g.68024218C>T	36	NA	1.2	0.027	p.Lys814Argfs*21	NM_024790.6:c.2433_2436delAGAA	chr8:g.68071282_68071285delA	35	NA	5.06	0
UW143-4	CSPP1	p.Arg378*	NM_024790.6:c.1132C>T	chr8:g.68024218C>T	36	NA	1.2	0.027	p.Lys814Argfs*21	NM_024790.6:c.2433_2436delAGAA	chr8:g.68071282_68071285delA	35	NA	5.06	0
											-				
UW147-3	CSPP1	p.Met843Glufs*25	NM_024790.6:c.2527_2528delAT	chr8:g.68074049_68074050delAT	24.5	NA	2.8	0	p.Met843Glufs*25	NM_024790.6:c.2527_2528delAT	• -		NA	2.8	0
UW148-3	CSPP1	p.Tyr1071*	NM_024790.6:c.3212dupA	chr8:g.68102891dupA	36	NA	4.31	0	splice	NM_024790.6:c.2953+1G>A	chr8:g.68084791G>A	22.8	NA	5.62	0
UW151-3	CSPP1	p.Glu817Lysfs*17	NM_024790.6:c.2448_2454delAGAAGAA	chr8:g.68071297_68071303delAGAAGAA	33	NA	5.06	0	p.Glu817Lysfs*17	NM_024790.6:c.2448_2454delAGAAGA	chr8:g.68071297_68071303delA	33	NA	5.06	0
UW290-3	CSPP1	splice	NM_024790.6:c.1682+1G>T	chr8:g.68031057G>T	23.6	NA	5.19	0	p.His121Glnfs*22	NM 024790.6:c.362 363delAT	chr8:g.67998296_67998297delA	26.8	NA	4.45	0
UW112-3	IFT172	p.Arg1544Cys	NM_015662.1:c.4630C>T	chr2:g.27670411G>A	16.29	0.991	5.42	0	p.Arg1544Cys	NM_015662.1:c.4630C>T	chr2:g.27670411G>A	16.29	0.991	5.42	0
								-			-				-
UW112-4	IFT172	p.Arg1544Cys	NM_015662.1:c.4630C>T	chr2:g.27670411G>A	16.29	0.991	5.42	0	p.Arg1544Cys	NM_015662.1:c.4630C>T	chr2:g.27670411G>A	16.29	0.991	5.42	0
UW011-3	INPP5E	p.Val303Met	NM_019892.4:c.907G>A	chr9:g.139329221C>T	29.7	0.382	3.55	0	p.Gly341Ser	NM_019892.4:c.1021G>A	chr9:g.139328502C>T	25.4	0.715	4.13	0
UW107-3	INPP5E	p.Ser562Gly	NM_019892.4:c.1684A>G	chr9:g.139324847T>C	25.2	0.393	5.15	0	p.Gly341Ser	NM_019892.4:c.1021G>A	chr9:g.139328502C>T	25.4	0.715	4.13	0
UW107-4	INPP5E	p.Ser562Gly	NM 019892.4:c.1684A>G	chr9:g.139324847T>C	25.2	0.393	5.15	0	p.Gly341Ser	NM_019892.4:c.1021G>A	chr9:g.139328502C>T	25.4	0.715	4.13	0
UW208-3	INPP5E	p.Thr355Met	NM_019892.4:c.1064C>T	chr9:g.139327702G>A	25.9	0.994	4.87	0	p.Pro315Leu	NM_019892.4:c.944C>T	chr9:g.139328579G>A	26.8	0.807	4.13	0
UW214-3	INPP5E	p.Val587Glyfs*7	NM_019892.4:c.1760delT	chr9:g.139324771delA	36	NA	5.55	0	p.Val388Leu	NM_019892.4:c.1162G>T	chr9:g.139327525C>A	23.1	0.043	4.82	0
UW214-4	INPP5E	p.Val587Glyfs*7	NM_019892.4:c.1760delT	chr9:g.139324771delA	36	NA	5.55	0	p.Val388Leu	NM_019892.4:c.1162G>T	chr9:g.139327525C>A	23.1	0.043	4.82	0
UW217-3	INPP5E	p.Arg585His	NM_019892.4:c.1754G>A	chr9:g.139324777C>T	36	0.999	5.55	0	p.Ser417Pro	NM_019892.4:c.1249T>C	chr9:g.139327438A>G	28.6	0.999	4.88	0
UW235-3	INPP5E	p.Gln633Glufs*64	NM_019892.4:c.1897_1898delCA	chr9:g.139324164_139324165delTG	26	NA	4.14	0	p.Arg435Gln	NM 019892.4:c.1304G>A	chr9:g.139327014C>T	36	1	5.28	0
UW238-3	INPP5E	p.Cys385Tyr	NM_019892.4:c.1154G>A	chr9:g.139327612C>T	32	0.989	5.13	0	p.Cys385Tyr	NM_019892.4:c.1154G>A	chr9:g.139327612C>T	32	0.989	5.13	0
UW289-3	INPP5E			· · · · · · · · · · · · · · · · · · ·	32		4.87	0			-	32	0.994	4.87	0
		p.Thr355Met	NM_019892.4:c.1064C>T	chr9:g.139327702G>A		0.994			p.Thr355Met	NM_019892.4:c.1064C>T	chr9:g.139327702G>A				-
UW294-3	INPP5E	p.Pro526Leu	NM_019892.4:c.1577C>T	chr9:g.139325542G>A	27.2	0.601	5.04	0	p.Asp490Tyr	NM_019892.4:c.1468G>T	chr9:g.139326357C>A	25.7	0.58	5.11	0
UW206-3	KIF7	p.Arg1111*	NM_198525.2:c.3331C>T	chr15:g.90172792G>A	21.2	NA	4.14	0	p.Arg1111*	NM_198525.2:c.3331C>T	chr15:g.90172792G>A	21.2	NA	4.14	0
UW230-3	KIF7	p.Arg973*	NM_198525.2:c.2917C>T	chr15:g.90174920G>A	21.5	NA	5.18	0.0684	p.Arg973*	NM_198525.2:c.2917C>T	chr15:g.90174920G>A	21.5	NA	5.18	0.0684
UW258-3	KIF7	p.Glu982*	NM_198525.2:c.2944G>T	chr15:g.90174893C>A	22.2	NA	5.18	0	p.Gln994Arg	NM_198525.2:c.2981A>G	chr15:g.90174856T>C	21.2	0.497	5.18	0
	MKS1			=	22.7	0.999	5.58	0	p.Phe88_Glu139del	NM_017777.3:c.417G>A	chr17:g.56293449C>T	23.3	NA	6.06	0.0242
UW010-3		p.Ser403Leu	NM_017777.3:c.1208C>T	chr17:g.56285320G>A					I'		-				
UW031-3	MKS1	p.Arg510Profs*81	NM_017777.3:c.1528dupC	chr17:g.56283704dupG	32	NA	1.74	0.0247	p.Arg510Profs*81	NM_017777.3:c.1528dupC	chr17:g.56283704dupG	32	NA	1.74	0.0247
UW090-3	MKS1	p.Phe88_Glu139del	NM_017777.3:c.262-179_262-37del	chr17:g.56293641_56293783del	9.778	NA	NA	unknown	p.Phe88_Glu139del	NM_017777.3:c.262-179_262-37del	chr17:g.56293641_56293783del	9.778	NA	NA	unknown
UW091-3	MKS1	p.Asp19Tyr	NM_017777.3:c.55G>T	chr17:g.56296537C>A	22.8	0.996	4.88	0	p.Asp19Tyr	NM_017777.3:c.55G>T	chr17:g.56296537C>A	22.8	0.996	4.88	0
UW092-3	MKS1	p.Ser372del	NM 017777.3:c.1115 1117delCCT	chr17:g.56285514_56285516delAGG	22.9	NA	5.58	0	p.Tyr128Thrfs*17	NM_017777.3:c.381delC	chr17:g.56293485delG	21.3	NA	0.171	0
UW092-4	MKS1	p.Ser372del	NM_017777.3:c.1115_1117delCCT	chr17:g.56285514_56285516delAGG	22.9	NA	5.58	0	p.Tyr128Thrfs*17		chr17:g.56293485delG	21.3	NA	0.171	0
				-				-		NM_017777.3:c.381delC	-				-
UW093-3	MKS1	p.Ser372del	NM_017777.3:c.1115_1117delCCT	chr17:g.56285514_56285516delAGG	22.9	NA	5.58	0	p.Ser372del	NM_017777.3:c.1115_1117delCCT		22.9	NA	5.58	0
UW150-3	MKS1	splice	NM_017777.3:c.1589-2A>T	chr17:g.56283533T>A	22.6	NA	5.21	0	splice	NM_017777.3:c.1589-2A>T	chr17:g.56283533T>A	22.6	NA	5.21	0
UW153-3	MKS1	p.Gly317Glu	NM_017777.3:c.950G>A	chr17:g.56288349C>T	20.8	0.998	5.5	0	p.Ser372del	NM_017777.3:c.1115_1117delCCT	chr17:g.56285514_56285516del	22.9	NA	5.58	0
UW019-3	NPHP1	deletion							deletion						
UW023-1	NPHP1	deletion							deletion						
UW229-3	NPHP1	deletion							deletion						
UW247-3	NPHP1	deletion							deletion						
UW264-3	NPHP1	deletion							deletion						
UW087-3	OFD1	p.Glu923Lysfs*4	NM 003611.2:c.2767delG	chrX:g.13786182delG	32	NA	5.45	0	p.Glu923Lysfs*4	NM_003611.2:c.2767delG	chrX:g.13786182delG	32	NA	5.45	0
UW172-3	OFD1	p.Val93Phe	NM_003611.2:c.277G>T	chr23:g.13754762G>T	23.8	0.999	5.55	0	p.Val93Phe	NM_003611.2:c.277G>T	chr23:g.13754762G>T	23.8	0.999	5.55	0
	OFD1			=				0	i'	NM 003611.2:c.277G>T					0
UW172-4		p.Val93Phe	NM_003611.2:c.277G>T	chr23:g.13754762G>T	23.8	0.999	5.55		p.Val93Phe	<del>-</del>	chr23:g.13754762G>T	23.8	0.999	5.55	
UW239-3	OFD1	p.Arg890*	NM_003611.2:c.2668C>T	chrX:g.13785314C>T	18.37	NA	3.92	0	p.Arg890*	NM_003611.2:c.2668C>T	chrX:g.13785314C>T	18.37	NA	3.92	0
	OFD1	p.His50Arg	NM_003611.2:c.149A>G	chrX:g.13754634A>G	20.2	0.931	4.37	0	p.His50Arg	NM_003611.2:c.149A>G	chrX:g.13754634A>G	20.2	0.931	4.37	0
UW274-3	0000004	p.Arg805*	NM_015272.2:c.2413C>T	chr16:g.53679807G>A	39	NA	3.28	0.0116	p.Ser659Pro	NM_015272.2:c.1975T>C	chr16:g.53686624A>G	26.9	0.999	5.45	0
	RPGRIP1L				39	NA	3.28	0.0116	p.Ser659Pro	NM_015272.2:c.1975T>C	chr16:g.53686624A>G	26.9	0.999	5.45	0
UW004-3		n Arg805*	NM 015272 2:c 2413CST	chr16:d 536/980/G>A											0
UW004-3 UW004-4	RPGRIP1L		NM_015272.2:c.2413C>T	chr16:g.53679807G>A											0
UW004-3		p.Gln684*	NM_015272.2:c.2413C>1 NM_015272.2:c.2050C>T NM_015272.2:c.2305-1G>A	chr16:g.53679807G>A chr16:g.53686549G>A chr16:g.53679916C>T	37 23.4	NA NA	4.75 4.2	0	p.Thr615Pro splice	NM_015272.2:c.1843A>C NM_015272.2:c.2305-1G>A	chr16:g.53686756T>G chr16:g.53679916C>T	16.67 23.4	0.15 NA	3.15 4.2	0

UW043-3	RPGRIP1I	p.Tyr574Leufs*27	NM 015272.2:c.1721delA	chr16:q.53686878delT	32	NA	5.45	0	p.Tvr574Leufs*27	NM 015272.2:c.1721delA	chr16:q.53686878delT	32	NA	5 45	0
UW227-3		p.Trp378Glyfs*3	NM_015272.2:c.1132delT	chr16:g.53698893delA	29.5	NA	5.36	0	p.Asp571Glyfs*12	NM 015272.2:c.1709dupA	chr16:g.53686890dupT	33	NA	5.45	0
UW242-3	RPGRIP1L		NM 015272.2:c.1132de11	chr16:g.53679916C>T	23.4	NA	4.2	0	splice	NM_015272.2:c.1769ddpA NM_015272.2:c.2305-1G>A	chr16:g.53679916C>T	23.4	NA NA	4.2	0
			_					-	·		-				-
UW299-3	RPGRIP1L		NM_015272.2:c.1243+1G>A	chr16:g.53698781C>T	16.56	NA	5.36	0	splice	NM_015272.2:c.3701+1G>T	chr16:g.53644878C>A	23.4	NA	5.26	0
UW314-3		p.Arg1177*	NM_015272.2:c.3529C>T	chr16:g.53653024G>A	36	NA	2.65		p.Thr615Pro	NM_015272.2:c.1843A>C	chr16:g.53686756T>G	13.46	0.15	3.15	0
UW270-3	TCTN1	splice	NM_001082538.2:c.342-2A>G	chr12:g.111064165A>G	21.8	NA	5.17	0	splice	NM_001082538.2:c.342-2A>G	chr12:g.111064165A>G	21.8	NA	5.17	0
UW144-3	TCTN2	p.Gly373Arg	NM_024809.4:c.1117G>A	chr12:g.124179406G>A	12.35	0.67	3.3	0	p.Asp26Thrfs*27	NM_024809.4:c.71delG	chr12:g.124155858delG	24.6	NA		0
UW212-3	TCTN2	p.Asp543llefs*11	NM_024809.4:c.1626delT	chr12:g.124189092delT	24.9	NA	-1.64	0	p.Gly205Cys	NM_024809.4:c.613G>T	chr12:g.124171431G>T	27	0.998	5.65	0.116
UW225-3	TCTN2	p.lle584Lys	NM_024809.4:c.1751T>A	chr12:g.124189217T>A	18.59	0.996	5.58	0	p.lle584Lys	NM_024809.4:c.1751T>A	chr12:g.124189217T>A	18.59	0.996	5.58	0
UW225-4	TCTN2	p.lle584Lys	NM_024809.4:c.1751T>A	chr12:g.124189217T>A	18.59	0.996	5.58	0	p.lle584Lys	NM_024809.4:c.1751T>A	chr12:g.124189217T>A	18.59	0.996	5.58	0
UW225-8		p.lle584Lys	NM 024809.4:c.1751T>A	chr12:g.124189217T>A	18.59	0.996	5.58	0	p.lle584Lys	NM 024809.4:c.1751T>A	chr12:q.124189217T>A	18.59	0.996	5.58	0
UW228-3		p.Glu431*	NM 024809.4:c.1291G>T	chr12:g.124179823G>T	24.7	NA	-7.62	0	p.Glu431*	NM_024809.4:c.1291G>T	chr12:g.124179823G>T	24.7	NA	-7.62	0
UW266-3		p.Asp26Glyfs*52	NM_024809.4:c.76dupG	chr12:g.124179023G21	24.6	NA	5.05	0	p.Asp26Glyfs*52	NM_024809.4:c.76dupG	chr12:g.124175023G27	24.6	NA	5.05	0
			•	- · · · · · · · · · · · · · · · · · · ·				-			-				0
UW215-3		p.Met1Ile	NM_015631.5:c.3G>A	chr10:g.97453654C>T	12.58	0.98	5.25	0	p.Met1lle	NM_015631.5:c.3G>A	chr10:g.97453654C>T	12.58	0.98	5.25	-
UW256-3		p.Ala127Val	NM_016464.4:c.380C>T	chr11:g.61136072C>T	28.4	0.913	5.45	0	p.Ala127Val	NM_016464.4:c.380C>T	chr11:g.61136072C>T	28.4	0.913	5.45	0
UW040-5		p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW066-3	TMEM216	p.Leu133*	NM_001173990.2:c.398T>G	chr11:g.61165414T>G	17.56	NA	4.93	0	p.Arg73Cys	NM_001173990.2:c.217C>T	chr11:g.61161436C>T	35	0.98	4.99	0
UW189-3	TMEM216	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW192-3	TMEM216	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW193-3	TMEM216	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW198-3	TMEM216		NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW223-3		p.Arg73Leu	NM 001173990.2:c.218G>T	chr11:q.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM 001173990.2:c.218G>T	chr11:q.61161437G>T	27.1	0.823	3.12	0
UW224-3		p.Arg73Leu	NM 001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM 001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW233-3	TMEM216		NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
									l' -		-				0
UW233-4	TMEM216		NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	-
UW234-11	TMEM216		NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW234-17	TMEM216		NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW234-3		p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW234-4	TMEM216	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW234-5	TMEM216	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW251-3	TMEM216	p.Arg85*	NM_001173990.2:c.253C>T	chr11:g.61165269C>T	12.99	NA	2.71	0.0243	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	27.1	0.823	3.12	0
UW098-3		p.Gln26*	NM_001044385.2:c.76C>T	chr2:g.202504987G>A	18.43	NA	4	0	splice	NM_001044385.2:c.943+1G>T	chr2:g.202492798C>A	23	NA	4.53	0
UW005-3		splice	NM 153704.5:c.1674+3A>G	chr8:q.94805527A>G	12.86	NA	4.07	0	p.Gln376Glu	NM 153704.5:c.1126C>G	chr8:q.94794683C>G	24.4	0.23	5.01	0
UW030-3		p.Phe637Leu	NM 153704.5:c.1911C>A	chr8:g.94809412C>A	26.9	1	2.44	0	p.Pro358Leu	NM 153704.5:c.1073C>T	chr8:q.94794630C>T	31	0.993	5.17	0
UW051-3		p.Leu349Ser	NM 153704.5:c.1046T>C	chr8:g.94793953T>C	29.8	0.9	5.73	0	p.lle833Thr	NM_153704.5:c.2498T>C	chr8:g.94821126T>C	28	0.871	5.71	0.0116
UW053-3		splice	NM 153704.5:c.1961-2A>C	chr8:g.94809557A>C	22.8	NA	4.41	0	p.Phe590Ser	NM_153704.5:c.1769T>C	chr8:g.94807731T>C	16.45	0.996	5.56	0.0110
		•	_	=				0	l <sup>*</sup>		-				0
UW053-4		splice	NM_153704.5:c.1961-2A>C	chr8:g.94809557A>C	22.8	NA 0.700	4.41	-	p.Phe590Ser	NM_153704.5:c.1769T>C	chr8:g.94807731T>C	16.45	0.996	5.56	-
UW054-3		p.Pro130Arg	NM_153704.5:c.389C>G	chr8:g.94770787C>G	24.4	0.732	5.82	0	p.Trp225*	NM_153704.5:c.675G>A	chr8:g.94784840G>A	39	NA	5.67	0
UW055-3		p.lle833Thr	NM_153704.5:c.2498T>C	chr8:g.94821126T>C	28	0.871	5.71	0.116	splice	NM_153704.5:c.2556+1G>T	chr8:g.94821185G>T	24.6	NA	5.71	0
UW055-4		p.lle833Thr	NM_153704.5:c.2498T>C	chr8:g.94821126T>C	28	0.871	5.71	0.116	splice	NM_153704.5:c.2556+1G>T	chr8:g.94821185G>T	24.6	NA	5.71	0
UW056-3	TMEM67	p.Met257Val	NM_153704.5:c.769A>G	chr8:g.94792875A>G	23.3	0.093	5.86	0	p.Arg172Gln	NM_153704.5:c.515G>A	chr8:g.94777642G>A	23.2	0.997	4.02	0
UW057-3	TMEM67	splice	NM_153704.5:c.978+3A>G	chr8:g.94793213A>G	10.19	NA	5.84	0	p.Phe942Cys	NM_153704.5:c.2825T>G	chr8:g.94827593T>G	26.8	0.956	3.26	0
UW060-3	TMEM67	p.Cys615Arg	NM_153704.5:c.1843T>C	chr8:g.94808198T>C	32	0.782	5.28	0	p.Leu349Ser	NM_153704.5:c.1046T>C	chr8:g.94793953T>C	29.8	0.9	5.73	0
UW061-3		p.Arg208*	NM_153704.5:c.622A>T	chr8:g.94777845A>T	26.3	NA	-3.99	0.0077	p.Gln841Pro	NM_153704.5:c.2522A>C	chr8:g.94821150A>C	23.3	0.331	5.71	0
UW063-3		p.lle833Thr	NM_153704.5:c.2498T>C	chr8:g.94821126T>C	28	0.871	5.71	0.0116	p.Arg451*	NM_153704.5:c.1351C>T	chr8:g.94798513C>T	38	NA	2.77	0
UW064-3		p.Cys100*	NM 153704.5:c.300C>A	chr8:q.94768082C>A	36	NA	3.13	0	p.lle833Thr	NM 153704.5:c.2498T>C	chr8:g.94821126T>C	28	0.871	5.71	0.0116
UW065-3		p.Pro485Ser	NM_153704.5:c.1453C>T	chr8:g.94800112C>T	27.6	0.736	4.69	0	p.Arg441Cys	NM_153704.5:c.1321C>T	chr8:g.94798483C>T	36	1	5.7	0.0110
				=				-	- · ·		=				-
UW072-3		p.Cys615Arg	NM_153704.5:c.1843T>C	chr8:g.94808198T>C	32	0.782	5.28	0	p.Met252Thr	NM_153704.5:c.755T>C	chr8:g.94792861T>C	23.6	0.384	5.86	0
UW073-3		p.Cys615Arg	NM_153704.5:c.1843T>C	chr8:g.94808198T>C	32	0.782	5.28	0	p.Tyr513Cys	NM_153704.5:c.1538A>G	chr8:g.94803510A>G	13.7	0.999	5.43	0
UW083-3		p.Tyr513Cys	NM_153704.5:c.1538A>G	chr8:g.94803510A>G	24.9	0.999	5.43	0	p.lle833Thr	NM_153704.5:c.2498T>C	chr8:g.94821126T>C	28	0.871	5.71	0.0116
UW083-4		p.Tyr513Cys	NM_153704.5:c.1538A>G	chr8:g.94803510A>G	13.7	0.999	5.43	0	p.lle833Thr	NM_153704.5:c.2498T>C	chr8:g.94821126T>C	28	0.871	5.71	0.0116
UW084-3		p.Asn242Ser	NM_153704.5:c.725A>G	chr8:g.94792831A>G	25.9	0.952	5.84	0	p.Asn242Ser	NM_153704.5:c.725A>G	chr8:g.94792831A>G	25.9	0.952	5.84	0
UW085-1		p.Pro82Arg	NM_153704.5:c.245C>G	chr8:g.94768027C>G	20.9	0.028	5.02	0	p.Met252Thr	NM_153704.5:c.755T>C	chr8:g.94792861T>C	23.6	0.384	5.86	0
UW085-2		p.Pro82Arg	NM_153704.5:c.245C>G	chr8:g.94768027C>G	18.42	0.028	5.02	0	p.Met252Thr	NM_153704.5:c.755T>C	chr8:g.94792861T>C	23.6	0.384	5.86	0
UW085-3		p.Pro82Arg	NM_153704.5:c.245C>G	chr8:g.94768027C>G	18.42	0.028	5.02	0	p.Met252Thr	NM_153704.5:c.755T>C	chr8:g.94792861T>C	19.81	0.384	5.86	0
UW086-3		p.Pro82Ser	NM_153704.5:c.244C>T	chr8:g.94768026C>T	22.1	0.034	5.91	0	p.Gly195llefs*13	NM_153704.5:c.579_580delAG	chr8:g.94777802_94777803delA	30	NA	5.53	0
UW285-3		p.Thr244Ala	NM_153704.5:c.730A>G	chr8:g.94792836A>G	27.1	0.955	5.84	0	p.Thr244Ala	NM_153704.5:c.730A>G	chr8:g.94792836A>G	27.1	0.955	5.84	0
UW298-3		p.Arg764*	NM_153704.5:c.2290C>T	chr8:g.94815880C>T	17.83	NA 0.007	4.99	0	p.Thr372Lys	NM_153704.5:c.1115C>A	chr8:g.94794672C>A	33	0.997	5.17	0
UW310-3		p.His790Asn	NM_153704.5:c.2368C>A	chr8:g.94817035C>A	28.4	0.997	5.86	0	p.Gly934Glu	NM_153704.5:c.2801G>A	chr8:g.94827569G>A	27	1	5.76	0
UW313-3	TMEM67	p.Arg208*	NM_153704.5:c.622A>T	chr8:g.94777845A>T		NA	-3.99	0.0077	p.Tyr513Cys	NM_153704.5:c.1538A>G	chr8:g.94803510A>G	13.7	0.999	5.43	0

<sup>&</sup>quot;maximum MAF" is based on the Exome Variant Server data (http://evs.gs.washington.edu/EVS/) and indicates the highest minor allele frequency in European or African American samples

LIKELY CA	USAL RDV	s requiring function	nal validation												
							r	naximum							maximum
UW ID	Gene	mutation1	cDNA1	genomic1	CADD Po	olyphen2	GERP	MAF	mutation2	cDNA2	genomic2	CADD I	olyphen2	GERP	MAF
UW201-3	AHI1	splice	NM_001134831.1:c.1626+4_1626+5insTTAC	chr6:g.135769423_135769424insGTAA	19.22	NA	5.86	0	splice	NM_001134831.1:c.1626+4_	1626+5ins chr6:g.135769423_135769424ins	19.22	NA	5.86	0
UW317-3	C5orf42	p.Arg2660*	NM_023073.3:c.7978C>T	chr5:g.37154075G>A	37	NA	5.21	0.0116	p.Leu1276Leu (coding-synonymo	NM_023073.3:c.3828T>C	chr5:g.37187928A>G	12.48	NA	-3.72	0.1279
UW082-3	CC2D2A	p.Ser1615Leufs*16	NM_001080522.2:c.4843_4846delTCTC	chr4:g.15603028_15603031delTCTC	22.4	NA	5.69	0.0176	intron	NM_001080522.2:c.3976-3C	>A chr4:g.15587777C>A	16.6	NA	2.97	0
UW249-3	CC2D2A	intron	NM_001080522.2:c.3975+4_3975+7delAGTA	chr4:g.15581798_15581801delAGTA	26.5	NA	5.35	0	p.Asp1556Val	NM_001080522.2:c.4667A>T	chr4:g.15601322A>T	22.1	0.982	5.75	0.0266

UW320-3	CC2D2A	p.Arg520*	NM_001080522.2:c.1558C>T	chr4:g.15534907C>T	39	NA	4.53	0	intron	NM_001080522.2:c.3594+5G>A	chr4:g.15572124G>A	12.88	NA	5.39	0	l
UW136-3	CEP290	p.Tyr2024*	NM_025114.3:c.6072C>A	chr12:g.88462362G>T	39	NA	-0.582	0	p.Asn781Asn (coding-synonymo	NM_025114.3:c.2343T>C	chr12:g.88505003A>G	16.11	NA	5.86	0	
UW136-4a	CEP290	p.Tyr2024*	NM_025114.3:c.6072C>A	chr12:g.88462362G>T	39	NA	-0.582	0	p.Asn781Asn (coding-synonymo	NM_025114.3:c.2343T>C	chr12:g.88505003A>G	16.11	NA	5.86	0	
UW318-3	MKS1	p.Arg165Cys	NM_017777.3:c.493C>T	chr17:g.56292124G>A	23.1	0.975	5.74	0	p.Arg463Arg (coding-synonymou	NM_017777.3:c.1389G>T	chr17:g.56284464C>A	21.8	NA	2.89	0	
UW058-3	TMEM67	intron	NM_153704.5:c.2322+2dup	chr8:g.94815914dupT	15.41	NA	5.91	0.0227	p.Lys99Asn	NM_153704.5:c.297G>T	chr8:g.94768079G>T	24.2	0.602	4.91	0	
UW059-3	TMEM67	p.Glu361*	NM_153704.5:c.1081G>T	chr8:g.94794638G>T	37	NA	4.29	0	intron	NM_153704.5:c.2661+5G>A	chr8:g.94821394G>A	17.41	NA	5.71	0	
UW062-3	TMEM67	intron	NM_153704.5:c.2322+2dup	chr8:g.94815914dupT	15.41	NA	5.91	0.0227	p.Thr372Lys	NM_153704.5:c.1115C>A	chr8:g.94794672C>A	33	0.997	5.17	0	
UW069-3	TMEM67	p.Leu696Phe	NM_153704.5:c.2086C>T	chr8:g.94809684C>T	28.3	0.907	3.79	0	intron	NM_153704.5:c.2322+5delG	chr8:g.94815917delG	17.32	NA	5.91	0	
UW319-3	TMEM216	p.lle72lle (coding-syr	ncNM 001173990.2:c.216T>C	chr11:q.61161435T>C	11.68	NA	-2.27	0	p.lle72lle (coding-synonymous)	NM 001173990.2:c.216T>C	chr11:g.61161435T>C	11.68	NA	-2.27	0	1

Control samples with two RDVs (or homozygous or hemizygous RDVs)

								maximum							maximum
CONTROLS	Gene	mutation 1	cDNA 1	genomic 1	CADD I	Polyphen	2 GERP	MAF	mutation 2	cDNA 2	genomic	CADD	P2	GERP	MAF
ND11622	TMEM67	p.Cys615Arg	NM_153704.5:c.1843T>C	chr8:q.94808198T>C	22.4	0.782	5.28	0	p.Glv791Ser	NM_153704.5:c.2371G>A	chr8:a.94817038G>A	25	0.998	5.86	0
ND11622 ND13333	TCTN1	p.Cys615Aig p.Phe266Cys	NM 001082538.2:c.797T>G	chr12:g.111072559T>G	15.21	0.782	0.416		Val347lle	NM 001082538.2:c.1039G>A	chr12:g.111078889G>A	20.4	0.998	3.98	0
ND10891	OFD1	splice	NM_003611.2:c.936-2A>G	chrX:g.13769366為>G	22.2	NA	5.76	0.0149	splice	NM_003611.2:c.936-2A>G	chrX:g.13769366A>G	22.2	NA	5.76	0.0149
ND05706	KIF7	p.Arg859Trp	NM_198525.2:c.2575C>T	chr15:g.90176934G>A	17.55	0.994	2.98	0.0077	p.Arg859Trp	NM_198525.2:c.2575C>T	chr15:g.90176934G>A	17.55	0.994	2.98	0.0077
ND09659	KIF7	p.Gln994Arg	NM_198525.2:c.2981A>G	chr15:g.90174856T>C	17.06	0.497	5.18	0.1164	p.Leu956Pro	NM_198525.2:c.2867T>C	chr15:g.90176079A>G	17.44	0.994	5.22	0

Table S6. Individuals with two possible causes of JS. Variants in bold are more likely to be the cause.

								maximum							maximum
UW ID	Gene	mutation1	cDNA1	genomic1	CADD	Polyphen2	GERP	MAF	mutation2	cDNA2	genomic2	CADD	Polyphen2	GERP	MAF
UW040-5	<i>TMEM</i> 216	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	18.61	0.823	3.12	0	p.Arg73Leu	NM_001173990.2:c.218G>T	chr11:g.61161437G>T	18.61	0.823	3.12	0
	CSPP1	p.Glu980Lys	NM_024790.6:c.2938G>A	chr8:g.68084775G>A	15.55	0.689	3.59	0	p.Pro1160Ser	NM_024790.6:c.3478C>T	chr8:g.68107640C>T	15.34	0.26	4.62	0.118
UW236-3	C50RF42	p.Ala1200Val	NM_023073.3:c.3599C>T	chr5:g.37198877G>A	29.6	0.997	5.28	0.0116	p.Ala1200Val	NM_023073.3:c.3599C>T	chr5:g.37198877G>A	29.6	0.997	5.28	0.0116
	CC2D2A	p.Pro721Ser	NM_001080522.2:c.2161C>T	chr4:g.15542617C>T	29.7	1	4.94	0.0505	p.Pro721Ser	NM_001080522.2:c.2161C>T	chr4:g.15542617C>T	29.7	1	4.94	0.0505
UW278-3	C5ORF42	p.Gly2663Alafs*40	NM_023073.3:c.7988_7989delGA	chr5:g.37154064_37154065delTC	24.1	NA	-0.221	0	p.Gly2663Alafs*40	NM_023073.3:c.7988_7989delGA	chr5:g.37154064_37154065deITC	24.1	NA	-0.221	0
	CSPP1	p.Arg658Gly	NM_024790.6:c.1972A>G	chr8:g.68062029A>G	23.6	0.262	5.96	0.027	p.Arg658Gly	NM_024790.6:c.1972A>G	chr8:g.68062029A>G	23.6	0.262	5.96	0.027
	CSPP1	p.Ser1087Leu	NM_024790.6:c.3260C>T	chr8:g.68102939C>T	14.42	0.082	4.32	0	p.Ser1087Leu	NM_024790.6:c.3260C>T	chr8:g.68102939C>T	14.42	0.082	4.32	0
UW279-3	C50RF42	p.Tyr607Thrfs*6	NM_023073.3:c.1819delT	chr5:g.37226878delA	25.8	NA	5.26	0	p.Glu142Lys	NM_023073.3:c.424G>A	chr5:g.37244623C>T	22.9	0.998	5.69	0
	OFD1	p.Lys432Glu	NM_003611.2:c.1294A>G	chrX:g.13774769A>G	18.94	0.052	3.74	0.0892	p.Lys432Glu	NM_003611.2:c.1294A>G	chrX:g.13774769A>G	18.94	0.052	3.74	0.0892
UW293-3	C2CD3	p.Arg62*	NM_001286577.1:c.184C>T	chr11:g.73879530G>A	22.1	NA	5.57	0	p.Arg62*	NM_001286577.1:c.184C>T	chr11:g.73879530G>A	22.1	NA	5.57	0
	CEP290	p.lle364Met	NM_025114.3:c.1092T>G	chr12:g.88519120A>C	25.4	0.997	4.62	0.118	p.Asp321Glu	NM_025114.3:c.1092T>G	chr12:g.88519120A>C	26.9	0.999	5.26	0
	TTC21B	p.Asp806His	NM_024753.4:c.2416G>C	chr2:g.166767882C>G	17.99	0.894	5.69	0	p.Leu433Leu (coding-synonymous)	NM_024753.4:c.1299G>A	chr2:g.166785732C>T	18.48	NA	1.12	0

### Supplementary Table S7: Detailed phenotypic description for individuals with B9D2 mutations

ID	Mutations	MTS	retina	kidney	liver	Coloboma	Encephalocele	PD	Other
UW284-3	p.Gly155Ser (mat) p.Pro74Ser (pat)	+	NA	-	NA	-	+ (foramen magnum encephalocele)	+	Oral features: Cleft palate, tongue tumors,  Skeletal features: tibial and fibular mesomelic dysplasia,  Neurological features: shunted hydrocephalus, seizures, interpeduncular heterotopia  Dysmorphic features: small palpebral fissures  Visual features: poor pupillary response to light, optic disks normal  Other: micropenis, hearing loss, patent ductus arteriosus
UW309-3	p.Leu36Pro hmz	+	NA	-	-	-	-	+	Neurological features: seizures and abnormal EEG  Dysmorphic features: frontal bossing, epicanthus, dysplastic ears, down turned corners of mouth, retrognathia, ptosis, right eye exotropia  Other: Hypospadias

MTS Molar Tooth Sign, PD polydactyly, NA not available, EEG Electro-encephalogram, mat maternal, pat paternal, hmz homozygous

### **Supplementary Table S8: Recurrent alleles**

Gene allele		n unrelated* families	Reported country of origin or ethnicity ( <i>n families</i> )
AHI1	Q423X	3	Armenian (1), Australian (1), Native American/mixed European (EU) (1)
C5ORF42	p.Gly2663Alafs*40	4	Saudi Arabian (4)
C5ORF42	L595X	3	mixed EU (3)
C5ORF42	p.Thr2755Asnfs*8	3	mixed EU (2), mixed EU /Native American (1)
C5ORF42	R2493X	3	Native American/ mixed EU (1), French Canadian (1), Native American/ mixed EU (1)
C5ORF42	R2904X	4	mixed EU/Canadian (1), mixed EU (2), African American/Korean/mixed EU (1)
C5ORF42	W2593X	3	Saudi Arabian (2), India (1)
CC2D2A	D1556V	7	Mixed EU (5), Australian (1), Native American/ mixed EU /Filipino (1)
CC2D2A	P1122S	3	Saudi Arabian (3)
CC2D2A	R1528C	4	Turkish (1), mixed EU (2), Trinidadian/ mixed EU (1)
CC2D2A	T1116M	3	Brazilian (1), mixed EU (2)
CC2D2A	Val1097Phefs*2	4	mixed EU (4)
CEP290	G1890X	10	India (3), mixed EU (3), Saudi Arabian (1), Iraqi (1), Canadian/ mixed EU (1), mixed EU /Indian (1)
CEP290	K1575X	3	mixed EU /Thai (1), mixed EU (2)
CSPP1	NM_024790.6:c.2953+1G>A	3	Brazilian (3)
CSPP1	p.Tyr1071*	3	Brazilian (3)
NPHP1	deletion	5	Turkish (1), Native American/ mixed EU /French Canadian (1), Peruvian/ mixed EU (1), mixed EU (2)
TMEM216	R73L	10	Ashkenazi (10)
TMEM67	1833T	5	mixed EU (4), Japanese/mixed EU (1)

<sup>\*</sup> not reported to be related; alleles previously described in specific ethnic groups are highlighted. The number in parenthesis indicates the number of families for each country of origin or ethnicity.

Supplementary Table S9. Gene-Phenotype Correlations in a large JS cohort

	Retina	Kidney	Liver	Polydactyly	Coloboma	Encephalocele
AHI1	<b>2.3</b> (1.1-5.2)	<b>0.9</b> (0.4-2.4)	p=0.15	p=0.06	p=0.02	p=0.24
	p=0.03	p=0.90	·		·	
C5ORF42	<b>0.4</b> (0.1-1.1)	<b>0.4</b> (0.12-1.1)	<b>0.4</b> (0.1-1.7)	<b>2.7</b> (1.2-5.9)	<b>0.15</b> (0.02-1.1)	<b>1.2</b> (0.3-4.2)
	p=0.08	p=0.06	p=0.28	p=0.01	p=0.04	p=0.73
CC2D2A	<b>0.5</b> (0.3-2.0)	<b>0.4</b> (0.1-1.2)	<b>0.4</b> (0.1-1.9)	p=0.01	<b>0.2</b> (0.02-1.4)	<b>0.9</b> (0.2-3.9)
	p=0.52	p=0.13	p=0.40	-	p=0.1	p=1.0
CEP290	<b>22.9</b> (6.7-78.4)	<b>3.3</b> (1.6-7.1)	0.2 (0.03-1.9)	0.3 (0.04-2.0)	0.2 (0.02-1.5)	<b>3.5</b> (1.2-10.2)
	p<0.0001	P=0.001	p=0.23	p=0.22	p=0.1	p=0.01
CSPP1	<b>0.6</b> (0.1-2.7)	p=0.03	<b>1.0</b> (0.2-4.8)	p=0.23	p=0.22	<b>1.1</b> (0.1-9.0)
	p=0.73		p=1.0	-		p=1.0
INPP5E	<b>1.6</b> (0.4-5.7)	<b>1.1</b> (0.3-4.3)	<b>0.8</b> (0.1-6.3)	p=0.6	p=0.61	p=1.0
	p=0.50	p=1.0	p=1.0			
MKS1	<b>3.6</b> (0.6-21.7)	<b>0.5</b> (0.06-4.2)	<b>2.6</b> (0.5-13.6)	<b>1.5</b> (0.2-13.5)	p=0.59	p=1.0
	p=0.16	p=0.7	p=0.25	p=0.54		
NPHP1	p=0.56	3.0 (0.4-21.)	p=1.0	p=1.0	p=1.0	p=1.0
		p=0.26				
OFD1	p=1.0	<b>1.5</b> (0.1-16.7)	<b>2.1</b> (0.2-20.6)	<b>6.1</b> (0.8-44.2)	p=1.0	<b>13.1</b> (1.8-97.0)
		p=1.0	p=0.45	p=0.10		p=0.03
RPGRIP1L	<b>0.7</b> (0.1-3.2)	<b>4.7</b> (1.3-17.0)	<b>1.3</b> (0.1-11.0)	<b>4.2</b> (1.1-15.3)	p=1.0	<b>1.4</b> (0.2-11.3)
	p=0.38	p=0.02	p=0.59	p=0.04		p=0.55
TCTN2	<b>1.2</b> (0.1-13.0)	p=0.58	p=1.0	<b>18.7</b> (1.9-182.9)	<b>10.1</b> (0.9-113.5)	<b>13.6</b> (2.6-70.8)
	p=1.0			p=0.01	p=0.08	p=0.007
TMEM216	p=0.06	<b>2.2</b> (0.7-7.1)	<b>0.6</b> (0.1-4.4)	3.1 (0.9-10.7)	p=1.0	p=0.61
		p=0.18	p=1.0	p=0.08		
TMEM67	<b>0.1</b> (0.01-0.8)	<b>2.0</b> (0.9-4.5)	<b>17.3</b> (7.2-42.0)	P=0.05	<b>22.9</b> (8.6-61.1)	<b>2.3</b> (0.6-8.4)
	p=0.006	p=0.07	p<0.0001		p<0.0001	p=0.18

Odds ratios are indicated in **bold** followed by the 95% Confidence Interval in brackets. Statistical significance (Fisher's exact test if <5 observations are present in one category or Chi-Square test in all other situations) is indicated below with the respective p-value. Cells with significant positive correlations are shaded in yellow, and those remaining significant after Bonferroni correction are shaded in green. Cells shaded in orange indicate negative correlations. In cells without odds ratios, no individuals with the relevant clinical feature were observed to have that genetic cause. In those cells, the p-value indicates the likelihood that there is a correlation even in the absence of an individual with the feature and the genetic cause.