nature medicine

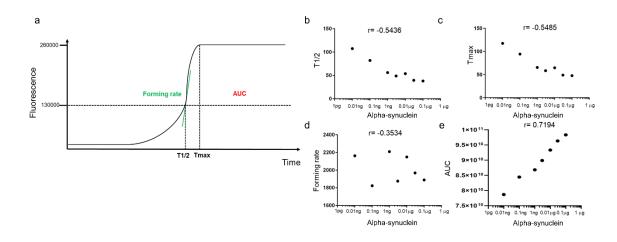
Article

https://doi.org/10.1038/s41591-023-02358-9

$\label{eq:starsest} Propagative α-synuclein seeds as serum biomarkers for synucleinopathies$

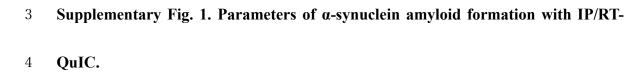
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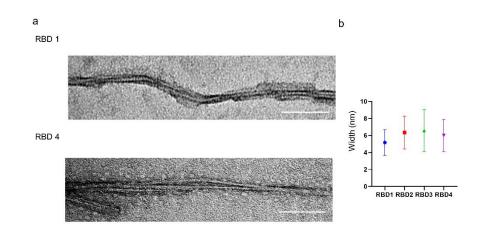
1 Supplementary Figures and Tables

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5	We analyzed 100 μ l of eight different concentrations of the recombinant α -synuclein
6	fibril: 10 ng/µL, 1 ng/µL, 0.1 ng/µL, 0.01 ng/µL, 0.001 ng/µL, and 0 ng/µL. We used 10
7	$ng/\mu L$ to 0.01 $ng/\mu L$ of recombinant α -synuclein fibrils as positive controls because these
8	concentrations ensure that the relative fluorescence unit value reaches 260,000. We used
9	0 ng/µl as the negative control because the relative fluorescence unit value is less than
10	260,000. A concentration of 0.001 ng/µl (1000 pg/ml) may or may not reach 260,000.
11	(a) Schematic view of the parameters of serum α -synuclein-IP/RT-QuIC. (b) The time to
12	reach 130k fluorescence ($T_{1/2}$) and (c) the time to reach maximum (260k) fluorescence
	1

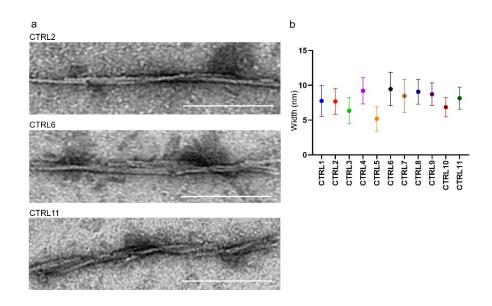
13	(T_{max}) are shortened in a dose-dependent manner. (d) The amyloid formation rate is not
14	dependent on α -synuclein fibrils. The forming rate is represented by the slope of the
15	tangent line at the inflection point in the sigmoid curve of IP/RT-QuIC and indicates the
16	rate of aggregate formation. (e) The area under the curve (AUC) is increased in a dose-
17	dependent manner in α -synuclein fibrils.
18	IP/RT-QuIC, immunoprecipitation/real-time quaking-induced conversion





22 **RBD cases with positive IP/RT-QuIC results.**

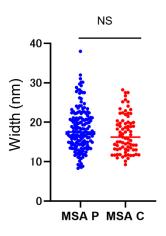
(a) Negative-stained transmission electron microscopy images of α -synuclein fibrils derived from RBD cases. (b) The widths of products derived from RBD cases with positive IP/RT-QuIC results are shown. The data represent mean \pm standard error of the mean. We measured the width at two sites per fibril (n=3). Scale bars are 100 nm. RBD, rapid eye movement sleep behavior disorder.

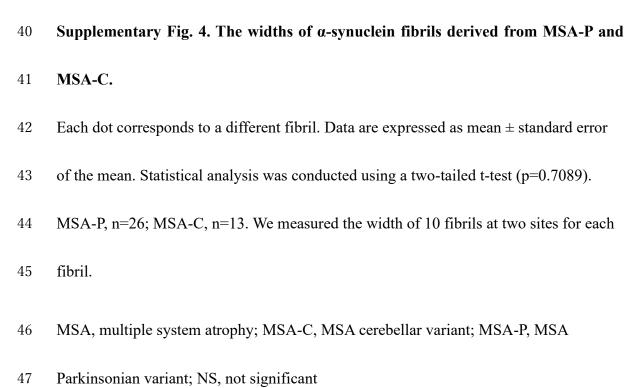


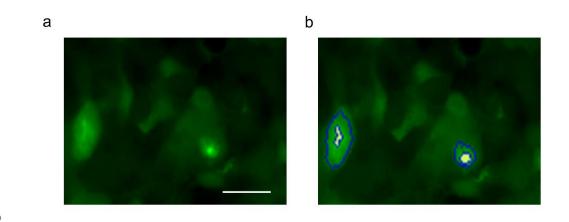


30 control cases with positive IP/RT-QuIC results.

- 31 (a) Negative-stained transmission electron microscopy images of α -synuclein fibrils
- 32 derived from controls. (b) The widths of products derived from controls with positive
- 33 IP/RT-QuIC results are shown. The data represent mean \pm standard error of the mean.
- 34 We measured the width at two sites per fibril (n=3). Scale bars are 100 nm.
- 35
- 50
- 36
- 37
- 38



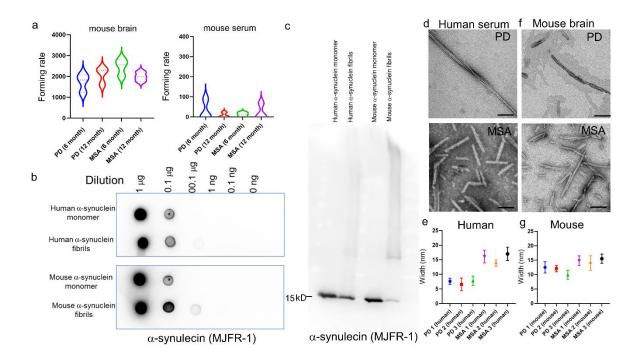






50 Supplementary Fig. 5. Fluorescence density measurement method

(a) Original image. We confirmed 100 cells per case using the Hybrid Cell Count software.
(b) The fluorescence density of intracellular α-synuclein inclusions generated by seeds
derived from patients with Lewy body diseases and MSA was calculated as the
fluorescent intensity of inclusion bodies (yellow) divided by the area of inclusions (blue).
Hybrid Cell Count software was used to measure the fluorescence intensity. Scale bar: 50
µm.

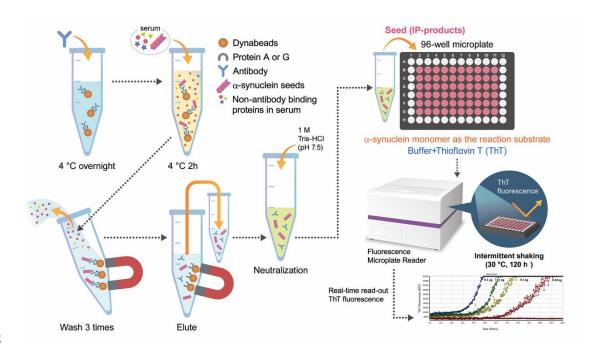




59 Supplementary Fig. 6. α-synuclein seed properties in the mouse model

60 (a) Comparison of the forming rates of each group. The violin plots matched those represented in the kinetic curves. Violin plots show the range and average distribution. 61 62 Dot blot (b) and western blot (repeated two times) (c) confirmed that MJFR-1, an anti-αsynuclein antibody, detected the mouse and human a-synuclein monomer and fibril. 63 64 Negative-stained transmission electron microscopy images of the original product 65 amplified by human serum IP/RT-QuIC from PD or MSA patients (d, e) and mouse brain RT-QuIC-derived a-synuclein fibrils (f, g) obtained from PD- or MSA-seed injected 66 67 mouse brain. The widths of α -synuclein fibrils derived from human serum (e) or mouse 68 brain (g) are shown. We measured the width at two sites per fibril (n=3). The data 69 represent mean ± standard error of the mean. Scale bars are 100 nm. MSA, multiple 7

70 system atrophy; NS, not significant; PD, Parkinson's disease.

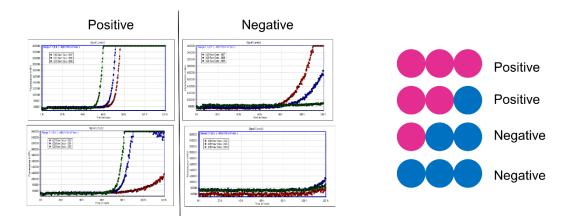




73 Supplementary Fig. 7. Protocol steps of the IP/RT-QuIC

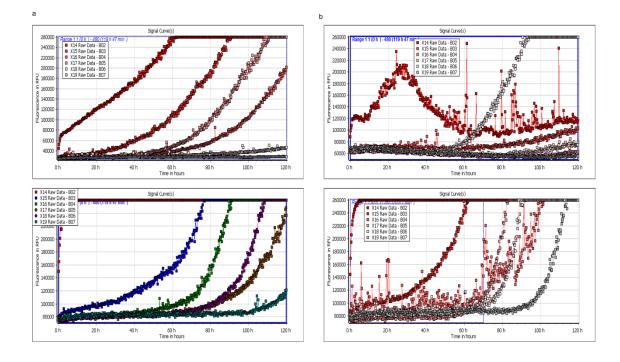
First, 100 µL of IP lysis buffer (1% BSA, 150 mM NaCl, 1% Triton X, 50 mM Tris HCl, 74 pH 7) containing 1.7 μg MJFR-1 (anti-α-synuclein antibody: Abcam, UK) and 30 μL of 75 76 protein A/G magnetic beads (Thermo Fisher Scientific, USA) were incubated overnight 77 at 4 °C. Then, 100 µL of serum (1 mg protein/mL) was added to the buffer and rotated at 4 °C for 2 h. The proteins were eluted using 20 µL of 50 mM glycine, and the samples 78 79 were adjusted to pH 7.5. The reaction buffer (RB) contained 100 mM phosphate buffer (pH 7.5-8.0), 10 μM thioflavin T (ThT), 0-170 mM NaCl, and 0.1 mg/mL recombinant α-80 81 synuclein. Each well of a black 96-well plate with a clear bottom (Thermo Fisher Scientific, USA) contained 95 μ L of RB and 37 ± 3 mg of 0.5-mm zirconium/silica beads 82 83 (Thermo Fisher Scientific, USA). Reactions were seeded with 5 µL of IP product solution 9

84	from the serum to a final reaction volume of 100 μ L. The plates were incubated in a
85	FLUOstar OPTIMA microplate reader (BMG Labtech, Germany) at 30 °C for 120 h with
86	intermittent shaking cycles: double-orbital with 1 min of shaking at 200 rpm followed by
87	14 min of rest. ThT fluorescence measurements (450 nm excitation and 480 nm emission)
88	were taken every 15 min.



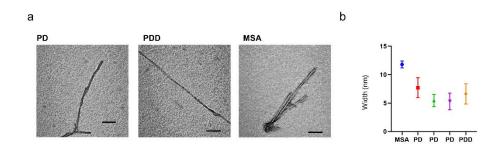
90 Supplementary Fig. 8. Definition of a positive and negative response in IP/RT-QuIC

A positive response was defined as a relative fluorescence unit value of >260,000 at 120
h. Positive signals in two or more of the triplicate wells were considered positive. It was
considered negative if the relative fluorescence unit value did not reach 260,000 within
120 h.

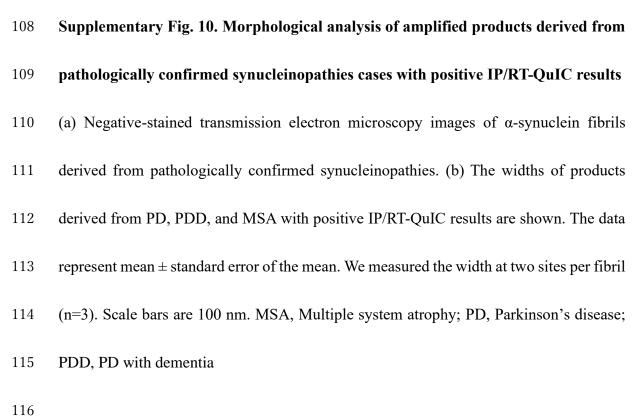


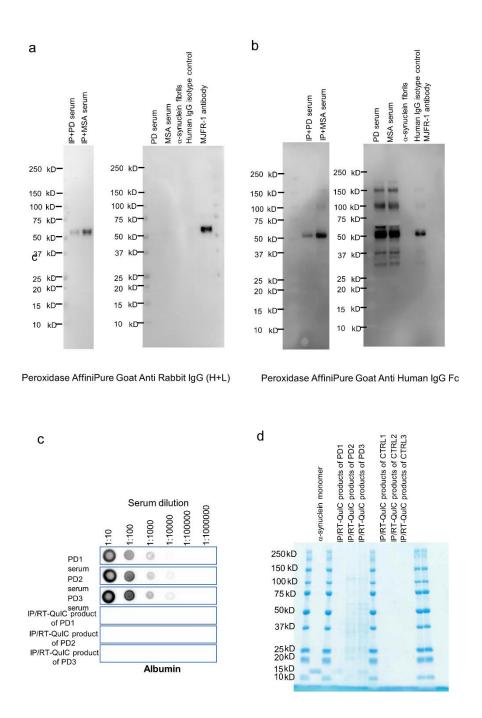
96 Supplementary Fig. 9. Standard curves of IP/RT-QuIC

We use six different concentrations as standards: 10 ng/µl (B02), 1 ng/µl (B03), 0.1 ng/µl 97 (B04), 0.01 ng/µ1 (B05), 0.001 ng/µ1 (B06), and 0 ng/µ1 (B07). An increase in the 98 99 fluorescence intensity in the concentration dependence from 10 ng/µl to 0.01 ng/µl 100 ensures that the relative fluorescence unit value reaches 260,000, 0 ng/µl relative 101 fluorescence unit value is less than 260,000, and 0.001 ng/µl may or may not reach 102 260,000. An increase in the fluorescence intensity indicates that (a) the result of IP/RT-103 QuIC is reliable. On the contrary, if no increase in the fluorescence intensity of the 104 concentration dependence is observed, (b) the reliability of the results of IP/RT-QuIC at 105 that time is considered low, and all IP/RT-QuIC at that time are re-performed from scratch. 106











120 aggregation

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121 IP products derived from serum contained human IgG (repeated two times) (a) and
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122 antibodies used for IP (repeated two times) (b). Dot blot of serum samples shows albumin

- 123 contamination, but IP/RT-QuIC products show that albumin was removed (c). Coomassie
- 124 brilliant blue assay (CBB) shows that there were not large amounts of contaminants in
- 125 the IP/RT-QuIC products (repeated two times) (d).

Diagnosis	N	IP/RT-QuIC Results +/-	Numbe	Number of positive		mples, n)
	11		Positive		Negative	
Synucleinopathies						
PD	221	210/11	3 (80)	2 (130)	1 (8)	0 (3)
			36%	59%	3.60%	1.40%
MSA	39	25/14	3 (13)	2 (12)	1 (2)	0 (12)
			30.8%	33.3%	5.10%	30.8%
DLB	10	9/1	3 (4)	2 (5)	1 (1)	0 (0)
			40%	50%	10%	0%
Non-synucleinopathies						
PSP	30	1/29	3 (1)	2 (0)	1 (9)	0 (20)
			3%	0%	30%	67%
AD	25	4/21	3 (3)	2 (1)	1 (8)	0 (13)
			12%	4%	32%	52%
Controls	128	11/117	3 (6)	2(5)	1 (44)	0 (73)
			4.7%	3.9%	34.4%	57%
Patients with <i>PRKN</i> mutations	17	0/17	3 (0)	2 (0)	1 (4)	0 (13)
			0%	0%	23.5%	76.50%

127 Supplementary Table S1. Percentage distribution of replicates of IP/RT-QuIC

128 AD, Alzheimer's disease; DLB, dementia with Lewy bodies; MSA, multiple system

129 atrophy; PD, Parkinson's disease; PSP, progressive supranuclear palsy

130

Supplementary Table S2. The performance of IP/RT-QuIC in some cases from the
first cohort repeated two times and the reproducibility (intra-batch reproducibility:
-1)

134 a

		First result						
Diagnosis		0/3 (n=3)	1/3 (n=5)	2/3 (n=5)	3/3 (n=5)			
		Second result	Second result	Second result	Second resu			
		(%)	(%)	(%)	(%)			
	0/3	3 (100)	5 (100)	1 (20)	0 (0)			
רות	1/3	0 (0)	0 (0)	0 (0)	0 (0)			
PD	2/3	0 (0)	0 (0)	0 (0)	0 (0)			
	3/3	0 (0)	0 (0)	4 (80)	5 (100)			
		First result						
Diagnosis		0/3 (n=5)	1/3 (n=2)	2/3 (n=5)	3/3 (n=5)			
		Second result	Second result	Second result	Second rest			
		(%)	(%)	(%)	(%)			
	0/3	4 (80)	1 (50)	0 (0)	0			
	1/3	1 (20)	1 (50)	0 (0)	0			
MSA	2/3	0 (0)	0 (0)	3 (60)	1 (20)			
	3/3	0 (0)	0 (0)	2 (40)	4 (80)			
			First	result				
Diagnosis		0/3 (n=10)	1/3 (n=25)	2/3 (n=5)	3/3 (n=6)			
		Second result	Second result	Second result	Second resu			
		(%)	(%)	(%)	(%)			

	0/3	7 (70)	13 (52)	1 (20)	0 (0)
CTDI	1/3	2 (20)	11(44)	0 (0)	0 (0)
CTRL	2/3	0 (0)	0 (0)	3 (60)	2 (33.3)
	3/3	1 (10)	1 (4)	1 (20)	4 (66.7)

136 b

Simple kappa coefficient

Pair	Estimate	SE	95% CI
First-second			
PD (n=18)	0.8900	0.107	0.68-1
MSA (n=17)	1.0000	0	1-1
CTRL (n=46)	0.8300	0.097	0.64-1

137 CTRL, control; MSA, multiple system atrophy; PD, Parkinson's disease; SE, standard

138 error; CI, confidence interval

140 Supplementary Table S3. IP/RT-QuIC positive/negative reproducibility was

141 analyzed using samples collected at different dates and times from the same cases

142	(intra-batch	reproducibility:	-2)
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Diagnosis	Day 1		Day 2	
	Positive wells	Judgment	Positive wells	Judgment
PD	3/3	Positive	3/3	Positive
PD	3/3	Positive	2/3	Positive
PD	3/3	Positive	3/3	Positive
MSA	3/3	Positive	3/3	Positive
MSA	3/3	Positive	3/3	Positive
MSA	3/3	Positive	3/3	Positive
DLB	2/3	Positive	3/3	Positive
DLB	3/3	Positive	3/3	Positive
DLB	3/3	Positive	3/3	Positive
CTRL	0/3	Negative	1/3	Negative
CTRL	0/3	Negative	0/3	Negative
CTRL	0/3	Negative	0/3	Negative

143

144

Judgment

Simple kappa

coefficient

Pair	Estimate	SE	95% CI
Total, n=12			
Day 1-day 2	1.000		1.000 -1.000

Well-positive				
Simple kappa				
coefficient				
Pair	Estimate	SE	95% CI	
			<i>yere</i> er	
Total, n=12				

147 Parkinson's disease; SE, standard error; CI, confidence interval

149 Supplementary Table S4. Reproducibility for result determination by three

Diagnosis	Evaluator A		Evalu	uator B	Evalı	Evaluator C	
	Positive wells	Judgement	Positive wells	Judgement	Positive wells	Judgement	
PD	1/3	Negative	1/3	Negative	1/3	Negative	
PD	1/3	Negative	1/3	Negative	1/3	Negative	
PD	3/3	Positive	3/3	Positive	3/3	Positive	
PD	2/3	Positive	2/3	Positive	2/3	Positive	
PD	2/3	Positive	2/3	Positive	2/3	Positive	
PD	2/3	Positive	2/3	Positive	2/3	Positive	
PD	3/3	Positive	3/3	Positive	3/3	Positive	
PD	3/3	Positive	3/3	Positive	3/3	Positive	
PD	2/3	Positive	2/3	Positive	2/3	Positive	
PD	3/3	Positive	1/3	Negative	2/3	Positive	
PD	3/3	Positive	3/3	Positive	3/3	Positive	
PD	2/3	Positive	2/3	Positive	2/3	Positive	
PD	3/3	Positive	3/3	Positive	3/3	Positive	
PD	3/3	Positive	3/3	Positive	3/3	Positive	
PD	3/3	Positive	3/3	Positive	3/3	Positive	
PD	2/3	Positive	1/3	Negative	1/3	Negative	
PD	1/3	Negative	1/3	Negative	1/3	Negative	
PD	2/3	Positive	1/3	Negative	1/3	Negative	
PD	0/3	Negative	0/3	Negative	0/3	Negative	
PD	3/3	Positive	3/3	Positive	3/3	Positive	
PD	3/3	Positive	3/3	Positive	3/3	Positive	
PD	1/3	Negative	1/3	Negative	1/3	Negative	
PD	0/3	Negative	0/3	Negative	0/3	Negative	
PD	0/3	Negative	0/3	Negative	0/3	Negative	
PD	2/3	Positive	1/3	Negative	1/3	Negative	
MSA	3/3	Positive	3/3	Positive	3/3	Positive	
MSA	3/3	Positive	3/3	Positive	3/3	Positive	
MSA	1/3	Negative	1/3	Negative	1/3	Negative	
MSA	2/3	Positive	2/3	Positive	2/3	Positive	
MSA	3/3	Positive	3/3	Positive	3/3	Positive	

150 **independent examiners (inter-batch reproducibility: -1)**

MSA	3/3	Positive	3/3	Positive	3/3	Positive
MSA	0/3	Negative	1/3	Negative	0/3	Negative
MSA	2/3	Positive	1/3	Negative	1/3	Negative
MSA	1/3	Negative	1/3	Negative	1/3	Negative
MSA	3/3	Positive	3/3	Positive	3/3	Positive
MSA	2/3	Positive	1/3	Negative	1/3	Negative
MSA	2/3	Positive	1/3	Negative	1/3	Negative
MSA	0/3	Negative	0/3	Negative	0/3	Negative
MSA	2/3	Positive	2/3	Positive	2/3	Positive
MSA	2/3	Positive	2/3	Positive	2/3	Positive
MSA	0/3	Negative	0/3	Negative	0/3	Negative
DLB	3/3	Positive	3/3	Positive	3/3	Positive
DLB	3/3	Positive	3/3	Positive	3/3	Positive
DLB	1/3	Negative	1/3	Negative	1/3	Negative
DLB	2/3	Positive	2/3	Positive	2/3	Positive
DLB	2/3	Positive	2/3	Positive	2/3	Positive
CTRL	1/3	Negative	1/3	Negative	1/3	Negative
CTRL	1/3	Negative	1/3	Negative	1/3	Negative
CTRL	0/2	Negative	0/2	Negative	0/2	Negative
CTRL	0/2	Negative	0/2	Negative	0/2	Negative
CTRL	0/2	Negative	0/2	Negative	0/2	Negative
CTRL	0/2	Negative	0/2	Negative	0/2	Negative
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CTRL	0/2	Negative	0/2	Negative	0/2	Negative
CTRL	0/2	Negative	0/2	Negative	0/2	Negative
CTRL	0/3	Negative	0/3	Negative	0/3	Negative
CTRL	3/3	Positive	3/3	Positive	3/3	Positive
CTRL	0/3	Negative	0/3	Negative	0/3	Negative

CTRL	1/3	Negative	1/3	Negative	1/3	Negative
CTRL	1/3	Negative	1/3	Negative	1/3	Negative
CTRL	1/3	Negative	1/3	Negative	1/3	Negative
CTRL	0/3	Negative	0/3	Negative	0/3	Negative

152

153

Judgement

Simple kappa coefficient						
Pair	Estimate	SE	95% CI			
Total, n=70						
A-B	0.7987	0.0707	0.6601-0.9373			
A-C	0.8276	0.0663	0.6976-0.9575			
B-C	0.9701	0.0297	0.9118-1.0000			
Well-positive						
Judge						
Simple kappa	coefficient					

Simple Kappa	coefficient			
Pair	Estimate	SE	95% CI	
Total, n=70				
A-B	0.8462	0.0498	0.7487-0.9438	
A-C	0.8649	0.0473	0.7722-0.9575	
B-C	0.961	0.0272	0.9078-1.0000	

154 CTRL, control; DLB, dementia with Lewy bodies; MSA, multiple system atrophy; PD,

155 Parkinson's disease; SE, standard error; CI, confidence interval

157 Supplementary Table S5. Reproducibility of the IP/RT-QuIC technique assessed by

Diagnosis	Exan	niner A	Exan	Examiner B	
	Positive	Indecessi	Positive	Tradaros	
	Wells	Judgement	Wells	Judgement	
PD	2/3	Positive	3/3	Positive	
PD	2/3	Positive	3/3	Positive	
PD	2/3	Positive	3/3	Positive	
PD	2/3	Positive	3/3	Positive	
PD	3/3	Positive	2/3	Positive	
PD	3/3	Positive	3/3	Positive	
PD	3/3	Positive	2/3	Positive	
PD	2/3	Positive	2/3	Positive	
PD	2/3	Positive	3/3	Positive	
PD	3/3	Positive	3/3	Positive	
MSA	2/3	Positive	3/3	Positive	
MSA	1/3	Negative	3/3	Positive	
MSA	3/3	Positive	3/3	Positive	
MSA	1/3	Negative	2/3	Positive	
MSA	1/3	Negative	2/3	Positive	
MSA	2/3	Positive	3/3	Positive	
MSA	1/3	Negative	1/3	Negative	
MSA	3/3	Positive	3/3	Positive	
MSA	3/3	Positive	3/3	Positive	
MSA	3/3	Positive	3/3	Positive	
DLB	2/3	Positive	3/3	Positive	
DLB	3/3	Positive	0/3	Negative	
DLB	3/3	Positive	2/3	Positive	
DLB	3/3	Positive	2/3	Positive	
DLB	3/3	Positive	3/3	Positive	
DLB	3/3	Positive	3/3	Positive	
DLB	2/3	Positive	0/3	Negative	
DLB	3/3	Positive	3/3	Positive	
DLB	2/3	Positive	1/3	Negative	
DLB	3/3	Positive	3/3	Positive	

158 **two independent examiners (inter-batch reproducibility: -2)**

CTRL	0/3	Negative	1/3	Negative
CTRL	0/3	Negative	0/3	Negative
CTRL	0/3	Negative	0/3	Negative
CTRL	1/3	Negative	0/3	Negative
CTRL	0/3	Negative	0/3	Negative
CTRL	0/3	Negative	3/3	Positive

160

Simple kappa coefficient						
Pair	Estimate	SE	95% CI			
Total, n=36						
	0.680	0.150	0.390-0.970			

161 CTRL, control; DLB, dementia with Lewy bodies; MSA, multiple system atrophy; PD,

162 Parkinson's disease; SE, standard error; CI, confidence interval

164 Supplementary Table S6. Serum α-synuclein IP/RT-QuIC results of MSA-P and

165 **MSA-C cases.**

Diagnosis	Ν	IP/RT-QuIC Results +/-	Positive results
MSA	39	25/14	64%
MSA-P	26	17/9	65%
MSA-C	13	8/5	62%

166 Data are presented as numbers. IP/RT-QuIC, immunoprecipitation/real-time quaking-

167 induced conversion; MSA, multiple system atrophy; MSA-C, MSA cerebellar variant;

168 MSA-P, MSA Parkinsonian variant; N, number of participants who received IP/RT-

169 QuIC

Age	N (%)
(years)	14 (70)
20–30	0/2 (0)
31–40	0/5 (0)
41–50	1/28 (3.6)
51-60	0/17 (0)
61–70	1/21 (4.7)
71–80	5/38 (10)
81–90	4/17 (23)

171 Supplementary Table S7. The average age of the control cases with positive IP/RT-

173 Data are presented as numbers (%). N, number of participants who received IP/RT-

174 QuIC

176 Supplementary Table S8. The correlation between IP/RT-QuIC parameters and

177 the MIBG H/M ratio of (a) PD and (B) MSA cases.

178

179

а

PD	MIBG H/M ratio	MIBG H/M ratio	p-value
	reduced	normal	
IP/RT-QuIC-positive	127	19	
IP/RT-QuIC-negative	0	2	0.0193
Total	127	21	
b			
MSA	MIBG H/M ratio	MIBG H/M ratio	p-value
	reduced	normal	
IP/RT-QuIC-positive	2	9	
IP/RT-QuIC-negative	1	7	NS
Total	3	16	_

180 Data are presented as numbers. P-values were obtained using (a) Pearson's chi-squared

181 test and (b) Fisher's exact test. IP/RT-QuIC, immunoprecipitation/real-time quaking-

182 induced conversion; MIBG, ¹²³I-metaiodobenzylguanidine scintigraphy; MSA, multiple

183 system atrophy; PD, Parkinson's disease

184 Supplementary Table S9. The correlation between IP/RT-QuIC results and

	IP/RT-QuIC-	IP/RT-QuIC-	p-value
	positive	negative	
PD	210	11	
MSA	25	14	< 0.0001
Total	235	25	

185 synucleinopathies (PD and MSA).

186 Data are presented as numbers. P-values were obtained using Pearson's chi-square test

187 (p<0.0001).

188 IP/RT-QuIC, immunoprecipitation/real-time quaking-induced conversion; MSA,

189 multiple system atrophy; PD, Parkinson's disease

190 Supplementary Table S10. Characteristics of the study participants from whom both

	Controls	Parkinson's	Multiple system atrophy
	(n=35)	disease (n=6)	(n=3)
Age [years], mean (SD)	52 (18)	63 (9.2)	61 (16)
Men, n (%)	22 (63)	2 (33)	1 (33)
Hoehn–Yahr stages, mean (SD)	NA	2.8 (0.9)	3.0 (0.8)
UPDRS-III, mean (SD)	NA	29 (9.2)	36 (14)
Disease duration [years], mean (SD)	NA	9.5 (3.0)	4.6 (1.2)

191 serum and CSF samples were obtained

192 Both serum and CSF data are available from 9 patients (6 PD and 3 MSA) and 35 controls.

193 CSF, cerebrospinal fluid; MSA, multiple system atrophy; NA, Not Applicable; SD,

194 standard deviation; UPDRS-III, Unified Parkinson's Disease Rating Scale Part III

196 Supplementary Table S11. Reproducibility for cell assay determination by two

Diagnosis	Judgement
PD	Correct
MSA	Failure
MSA	Failure
MSA	Correct
MSA	Correct
0.1	

197	independent examiners	(intra-batch/inter-batch	reproducibility)
		(

MSA	Failure
MSA	Failure
MSA	Failure
MSA	Failure
MSA	Correct
DLB	Correct
DLB	Failure
DLB	Correct
DLB	Failure
DLB	Correct
Ac	ccuracy rate
PD	100%
MSA	70%
DLB	60%

199 Intra-batch

Diagnosis	Judge1	Judgement	Judge 2	Judgement
PD	PD	Correct	PD	Correct
PD	PD	Correct	PD	Correct
PD	PD	Correct	PD	Correct
MSA	MSA	Correct	MSA	Correct
MSA	DLB	Failure	MSA	Correct
MSA	MSA	Correct	MSA	Correct
DLB	DLB	Correct	DLB	Correct
DLB	DLB	Correct	MSA	Failure
DLB	DLB	Correct	DLB	Correct
CTRL	CTRL	Correct	CTRL	Correct
CTRL	CTRL	Correct	CTRL	Correct

Simple kappa coefficient				
Pair	Estimate	SE	95% CI	

Total, n=11

0.84 0.103 0.64-1	
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201

202 Inter-batch

Diagnosis	Evaluator A	Evaluator B
PD	PD	PD
PD	PD	PD
MSA	MSA	DLB
MSA	MSA	MSA
DLB	DLB	DLB
DLB	DLB	MSA
CTRL	CTRL	CTRL

203

Simple kappa coefficient

Pair	Estimate	SE	95% CI

Total, n=7

0.75 0.177 0.404-1	
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204

Diagnosis	Evaluator B	Evaluator C
PD	PD	PD
MSA	DLB	DLB
33		

MSA	MSA	MSA
MSA	MSA	MSA
MSA	DLB	DLB
DLB	DLB	DLB

207

Simple kappa coefficient

Pair	Estimate	SE	95% CI	

Total, n=23

1.00	0	1-1

Evaluator A

Diagnosis	Predicted	FL type	DC type	PC type	Not	Highest%
Diagnosis	pathology	TL type	DC type	r C type	determined	Tingnest 70
PD	PD	90.3%	3.2%	0.0%	6.5%	90.3%
PD	PD	91.7%	8.3%	0.0%	0.0%	91.7%
PD	PD	100.0%	0.0%	0.0%	0.0%	100.0%
PD	PD	94.1%	2.9%	0.0%	2.9%	94.1%
PD	PD	92.9%	7.1%	0.0%	0.0%	92.9%
PD	PD	91.7%	8.3%	0.0%	0.0%	91.7%
MSA	MSA	0.0%	80.0%	20.0%	0.0%	80.0%
MSA	DLB/PDD	0.0%	18.2%	81.8%	0.0%	81.8%
MSA	DLB/PDD	7.1%	14.3%	78.6%	0.0%	78.6%
MSA	MSA	0.0%	81.3%	18.8%	0.0%	81.3%
MSA	MSA	0.0%	78.6%	21.4%	0.0%	78.6%
DLB/PDD	DLB/PDD	0.0%	0.0%	100.0%	0.0%	100.0%
DLB/PDD	DLB/PDD	0.0%	0.0%	85.7%	14.3%	85.7%

DLB/PDD	DLB/PDD	0.0%	14.3%	57.1%	28.6%	57.1%
DLB/PDD	DLB/PDD	0.0%	37.5%	50.0%	12.5%	50.0%
DLB/PDD	DLB/PDD	0.0%	0.0%	100.0%	0.0%	100.0%

Evaluator B

Diagnosis	Predicted	EI turno	DC type	DC type	Not	Highost0/
Diagnosis	pathology	FL type	DC type	PC type	determined	Highest%
PD	PD	90.6%	0.0%	3.1%	6.3%	90.6%
PD	PD	86.4%	0.0%	4.5%	9.1%	86.4%
PD	PD	76.5%	5.9%	5.9%	11.8%	76.5%
PD	PD	91.9%	0.0%	5.4%	2.7%	91.9%
PD	PD	72.7%	9.1%	0.0%	18.2%	72.7%
PD	PD	85.7%	0.0%	0.0%	14.3%	85.7%
MSA	MSA	0.0%	82.4%	11.8%	5.9%	82.4%
MSA	DLB/PDD	12.5%	33.3%	50.0%	4.2%	50.0%
MSA	DLB/PDD	5.0%	40.0%	50.0%	5.0%	50.0%
MSA	MSA	16.7%	55.6%	22.2%	5.6%	55.6%
MSA	MSA	5.6%	66.7%	22.2%	5.6%	66.7%
DLB/PDD	DLB/PDD	0.0%	0.0%	84.6%	15.4%	84.6%
DLB/PDD	DLB/PDD	9.1%	9.1%	81.8%	0.0%	81.8%
DLB/PDD	DLB/PDD	6.7%	26.7%	53.3%	13.3%	53.3%
DLB/PDD	DLB/PDD	18.2%	27.3%	45.5%	9.1%	45.5%
DLB/PDD	DLB/PDD	0.0%	18.2%	72.7%	9.1%	72.7%

Evaluator C

Diagnosis	Predicted pathology	FL type	DC type	PC type	Not determined	Highest%
PD	PD	85.7%	2.9%	8.6%	2.9%	85.7%
PD	PD	84.0%	0.0%	12.0%	4.0%	84.0%
PD	PD	85.7%	0.0%	9.5%	4.8%	85.7%
PD	PD	94.6%	0.0%	0.0%	5.4%	94.6%
PD	PD	87.5%	4.2%	4.2%	4.2%	88.0%
PD	PD	80.0%	5.0%	15.0%	0.0%	80.0%
MSA	MSA	30.0%	40.0%	25.0%	5.0%	40.0%
MSA	MSA	10.0%	45.0%	40.0%	5.0%	45.0%
MSA	MSA	17.4%	47.8%	34.8%	0.0%	47.8%

MSA	MSA	5.3%	47.4%	36.8%	10.5%	47.0%
MSA	MSA	10.5%	52.6%	31.6%	5.3%	52.6%
DLB/PDD	DLB/PDD	0.0%	0.0%	92.9%	7.1%	92.9%
DLB/PDD	DLB/PDD	0.0%	30.0%	70.0%	0.0%	70.0%
DLB/PDD	DLB/PDD	8.3%	25.0%	58.3%	8.3%	58.3%
DLB/PDD	DLB/PDD	10.0%	10.0%	80.0%	0.0%	80.0%
DLB/PDD	DLB/PDD	0.0%	16.7%	66.7%	16.7%	67.0%

208 CTRL, control; DLB, dementia with Lewy bodies; MSA, multiple system atrophy; PD,

210

²⁰⁹ Parkinson's disease; PDD, PD with dementia; SE, standard error

212 Supplementary Table S12. Results of the IP/RT-QuIC of the mouse brain (a) and

serum (b) after the injection of PD- or MSA-seeds into the mouse brain

214

а

		Positive wells	PD-seed- injected brain (6 months) n=3	PD-seed- injected brain (1 year) n=3	MSA-seed-injected brain (6 months) n=3	MSA-seed-injected brain (1 year) n=3
	Negative	0/3 (%) 1/3 (%)	0 (0) 0 (0)	0 (0) 0 (0)	0 (0) 0 (0)	0 (0) 0 (0)
RT-QuIC	Positive	2/3 (%) 3/3 (%)	0 (0) 3 (100)	0 (0) 3 (100)	0 (0) 3 (100)	0 (0) 3 (100)

215 b

		Positive wells	PD-seed- injected mouse serum (6 months) n=3	PD-seed- injected mouse serum (1 year) n=3	MSA-seed-injected mouse serum (6 months) n=3	MSA-seed- injected mouse serum (1 year) n=3
	Negative	0/3 (%)	3 (100)	2 (67)	3 (100)	3 (100)
	Negative	1/3 (%)	0 (0)	1 (33)	0 (0)	0 (0)
IP/RT-QuIC	Desitive	2/3 (%)	0 (0)	0 (0)	0 (0)	0 (0)
	Positive	3/3 (%)	0 (0)	0 (0)	0 (0)	0 (0)

216 IP, Immunoprecipitation; MSA, multiple system atrophy; PD, Parkinson's disease; RT-

217 QuIC, real-time quaking-induced conversion

218

220 Supplementary Table S13. The correlation between IP/RT-QuIC parameters and

221 characteristics and clinical parameters of rapid eye movement sleep behavior

disorder.

	Forming Rate		Т	T 1/2		T _{max}		C
	R	Р	r	р	r	р	r	р
Age	0.4136	0.1814	0.2781	0.3814	0.2888	0.3627	0.2992	0.3448
UPDRS-III	-0.04914	0.8794	-0.114	0.7242	-0.1123	0.7282	-0.08874	0.7839
Disease	<u>0.7315</u>	<u>0.0069</u>	0.5158	0.0861	0.5267	0.0785	0.7685	0.0035
Duration								
SBR	<u>-0.8331</u>	<u>0.0053</u>	<u>-0.803</u>	<u>0.0092</u>	<u>-0.8042</u>	<u>0.009</u>	<u>-0.7396</u>	<u>0.0227</u>

223 Correlations between variables were assessed using two-tailed pearson correlation

225 Underlined values indicate p<0.05. AUC, area under the curve; SBR, specific binding

ratio; T_{1/2}, time to reach 130k fluorescence; T_{max}, time to reach maximum (260k)

227 fluorescence; UPDRS-III, Unified Parkinson's Disease Rating Scale Part III

analyses.

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229 Supplementary Table S14. Mutations in *Parkin*-linked Parkinson's disease cases.

Exon 3 deletion (heterozygous)/c.535-3A>G (p.G179RfsX10) (heterozygous)

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Exon 2-4 del/exon 4 del (compound heterozygous)

Exon 3 deletion (heterozygous)/exon 4 deletion (heterozygous)

Exon 4 deletion (homozygous)

.....

Exon 2-4 deletion (heterozygous)/c.535-3A>G (p.G179RfsX10) (heterozygous)

.....

.....

Exon 6-7 deletion (homozygous)

Exon 2-4 deletion (homozygous)

Exon 2-3 deletion (heterozygous)/c.1358G>A (p.W453X) (heterozygous)

Exon 5 deletion (homozygous)

Exon 3-5 deletion (heterozygous)/exon 3-7 duplication (heterozygous)

Exon 6 duplication (homozygous)

.....

Exon 2-4 deletion (heterozygous)/exon 5-6 deletion (heterozygous)

Exon 2-4 deletion (homozygous)

c.818G>A (p.N273S) (heterozygous)

c.535delG (p.G179VfsX9) (heterozygous)

c.1358G>A (p.W453X) (heterozygous)

.....

Exon 3 deletion (homozygous)