

Supplementary Appendix 1

Genetic variants were evaluated for pathogenicity and novelty by comparing them to the National Center for Biotechnology Information ClinVar database (<http://ncbi.nlm.nih.gov/clinvar>) and the Albinism Database (<http://albinismdb.med.umn.edu>). Variants were considered to be albinism-causing if the consensus of reports in ClinVar was either “pathogenic” or “likely pathogenic”. Novel variants that were not reported in ClinVar, as well as those that had no clear consensus in ClinVar, were evaluated for pathogenicity using the American College of Medical Genetics and Genomics (ACMG) guidelines for interpretation of variants.¹ These variants were considered albinism-causing if the ACMG classification standards indicated they were either “pathogenic” or “likely pathogenic.” Computational evidence for pathogenicity was assessed using SIFT (<http://sift.bii.a-star.edu.sg>),² PROVEAN (<http://provean.jcvi.org>),³ and PolyPhen-2 (<http://genetics.bwh.harvard.edu/pph2>).⁴ Participants were considered to have a confirmed genetic diagnosis if they had two albinism-causing variants in an OCA or HPS gene (autosomal recessive inheritance), a hemizygous albinism-causing variant in *GPR143* (X-linked recessive inheritance), or a single albinism-causing variant in *TYR* that was known to be in trans with the hypomorphic *TYR* alleles S192Y and R402Q.^{5,6}

Supplementary Appendix 1 Bibliography

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