SUPPLEMENTARY METHODS

Control samples cohorts:

UK10K_NEURO_ABERDEEN (n=387) UK10K_NEURO_ASD_GALLAGHER (n=75) UK10K_NEURO_EDINBURGH (n=233) UK10K_NEURO_GURLING (n=48) UK10K_NEURO_IOP_COLLIER (n=172) UK10K_NEURO_MUIR (n=166) UK10K_OBESITY_GS (n=421) UK10K_OBESITY_TWINSUK (n=67) UK10K_RARE_CILIOPATHIES (n=121) UK10K_RARE_NEUROMUSCULAR (n=114) UK10K_RARE_THYROID (n=122)

For more details see<http://www.uk10k.org/studies/> .

Whole exome sequencing

Genomic DNA (1–3 μg), extracted from blood (*[1](#page-20-0)*), was sheared to 100–400 bp using a Covaris E210 or LE220 (Covaris, Woburn, Massachusetts, USA). Sheared DNA was subjected to Illumina paired-end DNA library preparation and enriched for target sequences (Agilent Technologies, Santa Clara, CA, USA; Human All Exon 50 Mb - ELID S02972011) according to the manufacturer's recommendations (Agilent Technologies, Santa Clara, CA, USA; SureSelectXT Automated Target Enrichment for Illumina Paired-End Multiplexed Sequencing). Enriched libraries were sequenced (eight samples over two lines) using the HiSeq 2000 platform (Illumina) as paired-end 75 base reads according to the manufacturer's protocol.

Variant calling

Calls were made using samtools/bcftools version 0.1.19-3-g4b70907 from all UK10K per-sample exome BAMs split by chromosome. A BCF file was created with samtools mpileup, calculating genotype likelihoods for every site in the bait (+/-100bp) regions file then variants (SNPs and Indels) were called by bcftools.

SUPPLEMENTARY RESULTS

Gene coverage

The overall mean coverage of *LDLR*, *APOB*, *PCSK9* and *LDLRAP1* ranged from 42x (*LDLR*), to 18x (*PCSK9*), with the first and the last exons of a gene having the lowest coverage. The read depth was highly dependent on the GC content of an exon (regression p =4.9x10-14) (Figure S2). Exons of the *APOB* had the highest average read depth among Tier 1 genes (58x).

LDL-C SNPs score

The distribution of LDL-C SNPs scores in FH mutation negative patients and in the healthy WHII population was as shown in Figure S3.

The *APOE* ε2ε2 genotype was not observed among the genotyped patients. There were two individuals with the ε2ε3 genotype, both having an *LDLR* mutation. Five patients had the ε4ε4 isoform.

Figure S1.

Copy Number Variants (CNVs) in *LDLR* gene. A: Heterozygous duplication of exons 3 to 8. B: Heterozygous deletion of exons 11 and 12. C: Heterozygous duplication of exons 13 to 15. All identified by ExomeDepth in the exome sequencing data. The crosses show the ratio of observed/expected number of reads for the test sample. The grey shaded region shows the estimated 99% confidence interval for this observed ratio in the absence of CNV call. The presence of contiguous exons with read count ratio located outside of the confidence interval is indicative of a heterozygous deletion or duplication in a sample. Exons 1 and 18 were excluded from the analysis (not shown on the graph) as they did not reach the threshold of 100 for the total number of reads. All CNVs were confirmed by MLPA experiment. The deletion of exons 11-12 and duplication of exons 13-15 both lead to a frame shift. The duplication of exons 3-8 leads to elongated peptide and it has been previously found in FH patients (*[2](#page-20-1)*).

Figure S2.

The negative correlation of the median read depth and the GC content for each targeted exon of the four FH genes (*LDLR*, *APOB*, *PCSK9* and *LDLRAP1*).

Figure S3.

Distribution of the LDL-C SNPs score in mutation negative DFH patients (in purple) and in the healthy WHII cohort (in grey). Red line indicates the LDL-C score top decile cutoff for WHII (=1.16).

LDL-C Gene Score

Figure S4.

Sanger sequencing confirmation of novel *CH25H* variants. Primers used for the amplification of the region are highlighted in blue and in purple

CH25H sequencing (order #410822401)

*Primers: CH25H _01F / CH25H_02R

p.V190I (c.568G>A) (UK10K_HYP5231677)

CH25H sequencing (order #4108796)

*Primers: CH25H _03F / CH25H_04R

p.A80A (c.243G>T) and p.Q81* (c.244C>T) (UK10K_HYP5159267)

Figure S5.

Sanger sequencing confirmation of novel INSIG2 variants. Primers used for the amplification of the region are highlighted in yellow.

INSIG2 sequencing (order #4103758)

*Primers: INSIG2_01F / INSIG2_02R

Table S1.

Summary of methods used for the initial FH mutation screening.

Table S2.

Tier 2 candidate genes – LDL-C (lead trait) associated loci from Teslovich et al. GWAS meta-analysis (either a plausible biological candidate gene in the locus or the nearest annotated gene to the lead SNP) (*[12](#page-20-8)*). Where associated SNP was located in a gene cluster, other genes in the region were included.

Table S3.

The top LDL-rising SNPs and their effects (as reported by the GLGC) used for the LDL-C gene score genotyping and calculation.

Table S4.

Summary of the identified *LDLR* mutations and their *in silico* predicted effect, including calculated LDL-C gene scores for the mutations carriers (presented in bold are the gene scores that are above the top decile cutoff for the control population).

N/A - not available

NA - not applicable

1 – carrier of this variant also has a deletion in exon 17 of *LDLR* **c.2393_2401del9 (p.L799_V801del))**

Table S5.

All *novel functional APOB* variants identified in the FH cases, including *in silico* predictions of their effect and LDL-C gene scores for the corresponding variant carriers. Using *in silico* mutation prediction tools (PolyPhen2, SIFT, Mutation Taster) the variant located in exon 3 of *APOB* (c.148C>T (p.R50W) has been predicted to be pathogenic by all three algorithms. The mutant Tryptophan is bigger than the wild type Arginine and it is predicted to cause a loss of hydrogen bonds in the core of the protein, which may result in an incorrect folding. The variant has been recently shown to co-segregate with the disease (Thomas et al., *Molecular Genetics & Genomic Medicine2013; 1(3) 155–161*). Other variants include c.598G>A (p.A200T), c.1199G>A (p.R400H), and c.G2700G>T (p.Q900H) in both cases the mutant differs in size and hydrophobicity from the wild type residue, which may affect the folding of the protein as well as the hydrophobic interactions within the protein's core. The novel c.10277C>T (p.A3426V) variant is located near to the LDL-receptor-binding site (*[13](#page-20-9)*), and although it has been predicted as benign/tolerated/polymorphism by the *in silico* tools, it may affect the LDL-R/ApoB interaction. The known FH-causing mutation (p.R3527Q), which was found in two patients, is also listed.

NA- not applicable.

Table S6.

Top *p* values of the *novel functional* variant association between cases and controls in the Tier 2 candidate genes.

Table S7.

Table S8.

All top genes showing a significant excess of *novel functional* variants in cases vs. controls before adjusting for false positive calls. The list includes genes located on chromosome X.

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