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10 **1. Supplementary findings: Genetic Profile of the patients**

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12 From the genetic testing, 19 patients were found to have new mutation. Three 3 new deletions in  
13 SPG4: c.1620\_1623delGACT/InsC (3 related patients), exon 16 deletion (MLPA) (1 patient), exon  
14 17 deletion (MLPA) (4 patients) and one deletion in SPG11 c.408\_428del21 p.E136\_I142del (1  
15 patients). Other 10 mutations were found in 10 SPG4 patients (S1 Table).

16 **2. ROIs delineation for DTI sampling**

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18 All delineations of the Regions of Interest (ROIs) were performed by three operators (26, 16 and 3  
19 years of experience, respectively for DM, HH and MV). The ROIs were applied to the DTI maps in  
20 2 different stages: an instruction stage, during which in two weeks of daily work, the accuracy of  
21 MRI anatomical location of the ROIs were discussed among the three operators and then  
22 reconstructed for all the 22 normal subjects and repeated for the patient group. When the  
23 accordance of anatomical positioning and the corresponding FA and MD values were close to both  
24 the operator, in the last stage two operators (HH and MV) independently created individual data set,  
25 extracting single FA and MD values for each volunteer and patient; inter-observer agreement was  
26 also calculated (HH vs MV). ROIs positioned by the second operator (MV) were repeated twice in  
27 order to study intra-observer agreement.

28 **3. H-MR spectroscopy results**

29 By H-MRS samplings no significant differences between HPS patients and controls were identified.  
30 The recent reports on MRS technique concerning some minimal variations in HSP patients [S25-  
31 S27] are not confirmed in this study: we found no differences in <sup>1</sup>H-MRS metabolic profile  
32 between HSP patients and controls and no correlation with clinical/paraclinical variables. Possible  
33 explanations could be the limited strength of the magnet (1.5T), the limited dimension of the  
34 sampling volume and the nature of the possible metabolic variation itself, which may be too subtle  
35 to be detected in a limited number of patients.

36 **4. S1 Supplementary References**

37 **S1 Supplementary References**

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