Subject	Sex,		Age at first	First seizure	Learning	EEG	MRI	Seizure	Additional information
number	Age	SCN1A mutation	seizure	while febrile	difficulties			types	
		c.4384T>C; reported in association	7 months	Yes	Severe	Multifocal spike and wave	Normal study	GTCS, TS	Prolonged lateralised seizures at 8 months.
		with Dravet Syndrome, and described				discharges with frequent			Detailed description of phenotype in Catarino et
D1	F, 34	in detail in Catarino et al.* (case 11)				seizures			al.* (Case 11)
		c.664C>T	6 months	Yes	Severe	Multifocal spikes (interictal	Not available	GTCS	Prolonged lateralised seizures, myoclonic jerks
D2	M, 20	de novo				record only)			
			8 months	Yes	Severe	Global dysfunction without	No gross	GTCS, TS	Prolonged hemiclonic febrile seizure at onset,
						epileptiform activity	abnormality		recurrent febrile and afebrile seizures, delayed
									development after seizure onset. Gait and
D3	F, 41	c.2522C>G							behavioural difficulties.
			5 months	Yes	Severe	Multifocal sharp waves and	Left hippocampal	GTCS, TS	30 minute lateralised seizure at onset,
		c.3706-2A>G; leading to aberrant				multiple seizures recorded	sclerosis		development normal at 6 months but then
D4	M, 28	splicing							delayed. Described in Catarino et al.* (Case 21).
			4 months	Yes	Moderate	Independent left and right	No gross	GTCS, MJ	Worse seizure control with sodium blockers.
		c.429delGT; frameshift, generating				sided spike and wave,	abnormality		Typical crouched gait.
		premature stop codon leading to				epileptiform abnormalities			
D5	F, 21	premature protein truncation				in sleep			
			4 months	Yes	Moderate	Multiple seizures captured	No gross	GTCS	Seizure onset at 4 months with 90 minute
		c.787delC;				with possible right	abnormality		generalised seizure
D6	F, 19	de novo				centroparietal onset			

Supplementary table e-1: Phenotypic information for people with Dravet Syndrome. Abbreviations: GTCS = generalised tonic clonic seizure, TS = tonic seizure, MJ = myoclonic jerk.

*Catarino et al. 'Dravet syndrome as epileptic encephalopathy: evidence from long-term course and neuropathology', Brain 2011 Oct;134(Pt 10):2982-3010

Subject number	Seizure types and frequency					
D1	Two generalised tonic-clonic seizures per week, five motor seizures per week with loss of awareness					
D2	One to two generalised tonic-clonic seizures per month					
D3	D3 One generalised tonic-clonic seizure per month, daily motor seizures with loss of awareness					
D4	Two generalised tonic-clonic seizure per week, three motor seizures per week with loss of awareness					
D5	Two generalised tonic-clonic seizures per week, frequent myoclonus					
D6	Four generalised tonic-clonic seizures per week					
Subject number						
E1	Five to ten focal motor seizures daily					
E2	One focal aware seizure per week, one focal unaware seizure per month					
E3	Five focal unaware seizures per month, one generalised tonic-clonic seizure per month					
E4	One generalised tonic-clonic seizure per month					
E5	One generalised tonic-clonic seizure per week					
E6	One generalised tonic-clonic seizure per month, two focal unaware seizures per day					
E7	Five generalised tonic-clonic seizures per year, three focal unaware seizures per week					
E8	Two focal unaware seizures per day					
E9	One focal unaware seizure per year					
E10	One generalised tonic-clonic seizure per month, one absence seizure per week					

Supplementary table e-2: Seizure types and frequency for each subject with epilepsy