Title: Interleukin-6, tumor necrosis factor-alpha and receptor activator of nuclear factor kappa ligand are elevated in hypertrophic gastric mucosa of pachydermoperiostosis Hui Huang^{1,2}, Yongjun Wang², Yong Cao³, Boda Wu^{1,2}, Yonggui Li^{1,2}, Liangliang Fan⁴, Zhiping Tan⁴, Yi Jiang⁵, Jianguang Tang⁶,

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Supplementary Legends

Fig S1. The symbolic manifestations of patients with pachydermoperiostosis.

PDP patients with thickening and furrowing facial features (a), periosteal thickness (white arrows) (b), severely swollen knee joints (c), typical digital clubbing (d), and acroosteolysis (black arrows) (e). a and b were from patient2. c was from patient4. d and e were from patient8.

Fig S2. Comparison of IOD in gastric mucosa of PDP patients and controls.

IOD, integrated optical density. SPSS13.0 software was employed. Data which were normally distributed were expressed as mean \pm standard error of the mean (S.E.M.). Statistical evaluation was performed using Mann – Whitney U-test to differentiate non-parametric means of different groups. IOD of IL-6, TNF α and RANKL expressions in gastric mucosa of PDP patients (n=8) were statistically higher than that in the controls (n=4) (* p<0.05, ** p<0.01).

Table S1. The primers of coding regions in SLCO2A1 andHPGD.

Table S2. Comparison of IOD in gastric mucosa of patient2 andpatient3 before/after treatment.

IOD, integrated optical density. Data were expressed as mean \pm standard error of the mean (S.E.M.). IOD in gastric mucosa of patients declined after them receiving the celecoxib treatment.

TableS3.Damagingeffectsofvariantsdetectedinpachydermoperiostosispatientspredictedbyonlinesoftware.

P, patient. N, the variant has been reported. Y, the variant is

reported by us for the first time. WT, wild type.

- 1. Zhang, Z, He, J.W, Fu, W.Z et al. *Mutations in the SLCO2A1 gene and primary hypertrophic osteoarthropathy: a clinical and biochemical characterization.* J Clin Endocrinol Metab, 2013. **98**(5): p. 923-33.
- Niizeki, H, Shiohama, A, Sasaki, T et al. The novel SLCO2A1 heterozygous missense mutation p.E427K and nonsense mutation p.R603* in a female patient with pachydermoperiostosis with an atypical phenotype. Br J Dermatol, 2014. 170(5): p. 1187-9.
- 3. Diggle CP, Parry DA, Logan CV et al. *Prostaglandin transporter mutations cause pachydermoperiostosis with myelofibrosis.* Hum Mutat, 2012. **33**(8): p. 1175-81.
- 4. Zhang, Z, He, J.W, Fu, W.Z et al. A novel mutation in the SLCO2A1 gene in a Chinese family with primary hypertrophic osteoarthropathy. Gene, 2013. **521**(1): p. 191-4.
- 5. Erken, E, Koroglu, C, Yildiz, F et al. *A novel recessive 15-hydroxyprostaglandin dehydrogenase mutation in a family with primary hypertrophic osteoarthropathy.* Mod Rheumatol, 2015. **25**(2): p. 315-21.

Figure S1





Target	Forward primer sequence(5'-3'	Reward primer sequence(3'-5')		
SLCO2A1 exon1	gaateteeteeggeeaet	ggctccggcagacagaag		
SLCO2A1 exon2	cactgggccacatatcacag	ctgttacccggcagaaagag		
SLCO2A1 exon3	ggagatggagacccagaagg	gcacactttcctgaacaaacc		
SLCO2A1 exon4	caggaaccatgtcccatttg	acacagctgggaggtaatgg		
SLCO2A1 exon5	acaggtgtgggcttatcagg	cagcagcttgttcctcacag		
SLCO2A1 exon6	cctctgggaagaccaatagc	tggaggtctcctgatccttg		
SLCO2A1 exon7	ggaaatgcaggtgctgtttg	tctgctcctactgtcccttac		
SLCO2A1 exon8	ccctgtggtgttgtgtgc	ctgactggaaggacaggag		
SLCO2A1 exon9	gcctggcaagcagtaaattg	tgettgaacetgggagaate		
SLCO2A1 exon10	aaatggagagatgccgtgac	cccagggtagggaggtagag		
SLCO2A1 exon11	ttgcccaaacagtgacagag	cctgcaatgaggagctcag		
SLCO2A1 exon12	tagagcattcagcccaggtg	cctcaagcaatctgggaaac		
SLCO2A1 exon13	gcccgtgtatctccactctg	tggcccttcatgttctcttc		
SLCO2A1 exon14	cctgcttccctacagctttg	gggtacacagtggcccttag		
HPGD exon1	gctggcttgacagtttcctc	agtctcggagtgtgtgggc		
HPGD exon2	gtgtgtttattgtttgtccgtc	acgttcccagttgacagattg		
HPGD exon3	cctctcatggcataggacatg	gtttccatgactccaagaacc		
HPGD exon4	gtattccttttctcacttatgc	tgaagatttgtttttgtggtcc		
HPGD exon5	gagtttcacaaagctatctgg	tgagatatgacggttgttgtag		
HPGD exon6	gaaactgctgaaacctacaac	ctgtataagcttatttcttccc		
HPGD exon7	cacatttccctataacatgttc	agctatggctaacacataagc		

TableS1. The primers of coding regions in SLCO2A1 and HPGD.

Table S2. Comparison of IOD in gastric mucosa of patient2 and patient3 before/after treatment. *.*

		IOD (Integrated Optical Density)							
		(Mean±S.E.M)							
		IL-6	ΤΝFα	RANKL					
		Before treatment After treatment	Before treatment After treatment	Before treatment After treatment					
Patients	patient2	$0.1642 {\pm} 0.0459 \hspace{0.1in} 0.0646 {\pm} 0.0104$	0.0989 ± 0.0166 0.0088±0.001	0.1565 ± 0.0008 0.0195±0.0017					
	patient3	$0.1279 {\pm} 0.0328 \hspace{0.1in} 0.0634 {\pm} 0.0136$	$0.0639 {\pm} 0.0158 \hspace{0.1in} 0.0227 {\pm} 0.0110$	$0.0929 {\pm} 0.0279 \hspace{0.1in} 0.0334 {\pm} 0.0119$					

Family	Gene	Patient	Genotype	Protein	Novel	Mutation taster	Polyphen2	SIFT	HSF
1	SLCO2A1	P1(Fig1 a II-2)	c.1106G>A	p.G369D	N[1]	Disease causing (Score > 0.9999)	Probably Damaging (Score:1.000)	Damaging (Score:0)	-
		P2(Fig1 a II-4)	c.1106G>A	p.G369D	Ν	Disease causing (Score > 0.9999)	Probably Damaging (Score:1.000)	Damaging (Score:0)	-
2 SLCC	SLCO2A1	P3(Fig1 b II-2)	c.1106G>A	p.G369D	N	Disease causing (Score > 0.9999)	Probably Damaging (Score:1.000)	Damaging (Score:0)	-
	02002/11		c.1807C>T	p.R603X	N[2]	Disease causing (Score:1)	-	-	-
3	SLCO2A1	P4(Fig1 c II-1)	c.941-1G>A	р.?	N[3]	Disease causing (Score:1)	-	-	Broken WT Acceptor Site
-		, ,	c.1771C>T	p.R591X	Y	Disease causing (Score:1)	-	-	-
4 SLCO2A	SI CO241	1 P5(Fig1 dll-1)	c.1406C>T	p.P469L	Y	Disease causing (Score > 0.9999)	Probably Damaging (Score:1.000)	Damaging (Score:0)	-
	SLCOZAT		c.1602C>A	p.N534K	N[4]	Disease causing (Score > 0.9999)	Probably Damaging (Score:0.984)	Damaging (Score:0.0 4)	-
5	SLCO2A1	P6(Fig1 e II-1)	c.611C>T	p.S204L	N[5]	Disease causing (Score > 0.9999)	Probably Damaging (Score:1.000)	Damaging (Score:0)	_
6 SL	SI CO2A1	P7(Fig1 f II-4)	c.96+4A>C	p.?	Y	-	-	-	Broken WT Donor Site
			c.1069T>C	p.Y357H	Y	Disease causing (Score > 0.9999)	Probably Damaging (Score:0.999)	Damaging (Score:0)	-
7	HPGD	P8(Fig1 g II-1)	c.310-311del CT	p.L104Afs*3	N[5]	Disease causing (Score:1)	-	_	-