

# Corticotropin-Releasing Factor Type 1 Receptor Antagonism Is Ineffective for Women with Posttraumatic Stress Disorder

## *Supplemental Information*

### SUPPLEMENTARY TEXT

#### DNA extraction and genotyping

DNA isolation from whole EDTA blood was performed with a magnetic bead based technology using the PerkinElmer Chemagic 360 extraction robot. Quality and quantity of the extracted DNA was assessed using the Epoch Microplate Spectrophotometer (BioTek). We excluded relatives of individual subjects from the whole sample ( $n = 3$ ,  $\text{Pi\_Hat} \geq 0.0625$ ) based on mean identity by descent in PLINK (1). For the genome wide analyses referring the population stratification, we only included individuals with a sample-wise call rate  $\geq 0.98$  and SNPs with call rate  $\geq 0.98$ , Hardy Weinberg equilibrium test (HWE)  $p$ -value  $\geq 1 \times 10^{-5}$  and  $\text{MAF} \geq 0.05$ , allowing for a total of 575,455 markers in 86 individuals. To correct for population stratification in an ethnically mixed sample, principal components (PC) for genetic background were calculated from all genotypes for each of the individuals using Genome-wide Complex Trait Analysis (Figure S8).

## SUPPLEMENTARY TABLES

Table S1. CONSORT Checklist

Section/Topic	Item No	Checklist item	Reported on page No.
<b>Title and abstract</b>	1a	Identification as a randomised trial in the title	Prevented by character limit
	1b	Structured summary of trial design, methods, results, and conclusions (for specific guidance see CONSORT for abstracts)	2-3
<b>Introduction</b> Background and objectives	2a	Scientific background and explanation of rationale	4-6
	2b	Specific objectives or hypotheses	5-6
<b>Methods</b> Trial design	3a	Description of trial design (such as parallel, factorial) including allocation ratio	6
	3b	Important changes to methods after trial commencement (such as eligibility criteria), with reasons	n/a
Participants	4a	Eligibility criteria for participants	6-7
	4b	Settings and locations where the data were collected	6
Interventions	5	The interventions for each group with sufficient details to allow replication, including how and when they were actually administered	7
Outcomes	6a	Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed	8-9
	6b	Any changes to trial outcomes after the trial commenced, with reasons	n/a

Sample size	7a	How sample size was determined	Ref. 34
	7b	When applicable, explanation of any interim analyses and stopping guidelines	n/a
Randomisation:			
Sequence generation	8a	Method used to generate the random allocation sequence	7
	8b	Type of randomisation; details of any restriction (such as blocking and block size)	7
Allocation concealment mechanism	9	Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned	7
Implementation	10	Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions	7
Blinding	11a	If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how	7
	11b	If relevant, description of the similarity of interventions	n/a
Statistical methods	12a	Statistical methods used to compare groups for primary and secondary outcomes	8-9
	12b	Methods for additional analyses, such as subgroup analyses and adjusted analyses	9
<b>Results</b>			
Participant flow (a diagram is strongly recommended)	13a	For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome	10
	13b	For each group, losses and exclusions after randomisation, together with reasons	Fig S1
Recruitment	14a	Dates defining the periods of recruitment and follow-up	6
	14b	Why the trial ended or was stopped	n/a
Baseline data	15	A table showing baseline demographic and clinical characteristics for each group	27

Numbers analysed	16	For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups	10
Outcomes and estimation	17a	For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)	10-11
	17b	For binary outcomes, presentation of both absolute and relative effect sizes is recommended	10
Ancillary analyses	18	Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory	11-13
Harms	19	All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)	13, Tables S3,S4
<b>Discussion</b>			
Limitations	20	Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses	14-17
Generalisability	21	Generalisability (external validity, applicability) of the trial findings	14-17
Interpretation	22	Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence	14-17
<b>Other information</b>			
Registration	23	Registration number and name of trial registry	6
Protocol	24	Where the full trial protocol can be accessed, if available	6
Funding	25	Sources of funding and other support (such as supply of drugs), role of funders	17-18

Table S2. Ethnicity and allele frequency of CRF1 SNP rs110402

Race	GG	AG/AA	Total
White	18	33	51
Black	14	14	28
Other	1	6	7
<b>Total</b>	<b>33</b>	<b>53</b>	<b>86</b>

**Table S3. Spontaneously reported adverse events**

<b>Adverse Event</b>	<b>GSK561679</b>	<b>Placebo</b>	<b>Total</b>
Headache	25	24	49
Nausea	19	11	30
Insomnia	6	11	17
Diarrhea	6	9	15
Upper Resp. Tract Infection	8	7	15
Sedation	5	8	13
Dizziness	7	4	11
Rash	2	8	10
Vomiting	4	6	10
Dyspepsia	4	5	9
Constipation	2	5	7
Dry Mouth	5	2	7
Irritability	3	4	7
Pruritis	4	3	7
Abdominal Pain	1	5	6
Arthralgia	5	1	6
Cough	2	4	6
Depression Worsening	2	3	5
Neck Pain	3	2	5
Rhinitis Allergic	2	3	5
Sinusitis	1	4	5
Vision Blurred	2	3	5
Contusion	0	4	4
Disturbance in Attention	1	3	4
Hypersensitivity	1	3	4
Migraine	3	1	4
Muscle spasm	1	3	4
Myalgia	1	3	4
Palpitations	2	2	4
Abdominal Distension	0	3	3
Flatulence	0	3	3
Hot Flush	0	3	3
Non-Cardiac Chest Pain	0	3	3
Oropharyngeal Pain	0	3	3
Tinnitus	3	0	3

All p &gt;.05

Table S4. Patient Rated Inventory of Side Effects (PRISE) symptom counts

Symptom	Placebo n (%)	GSK561679 n (%)	p-value
Anxiety	50 (77)	54 (86)	p < 0.29
Blurred Vision	21 (32)	15 (24)	p < 0.38
Chest Pain	13 (2)	9 (14)	p < 0.53
Constipation	16 (25)	17 (27)	p < 0.92
Decreased Energy	54 (83)	51 (81)	p < 0.93
Diarrhea	20 (31)	22 (35)	p < 0.62
Difficulty Sleeping	59 (91)	58 (92)	p < 0.99
Difficulty Urinating	1 (2)	0 (0)	p < 0.99
Dizziness	31 (47)	24 (38)	p < 0.27
Dizziness on Standing	23 (35)	19 (3)	p < 0.66
Dry Mouth	22 (34)	22 (35)	p > 0.99
Dry Skin	29 (45)	25 (4)	p < 0.70
Fatigue	55 (85)	47 (75)	p < 0.15
Frequent Urination	21 (32)	16 (25)	p < 0.50
General Malaise	25 (38)	22 (35)	p < 0.82
Headache	51 (78)	45 (71)	p < 0.47
Blurred Vision	21 (32)	15 (24)	p < 0.38
Chest Pain	13 (2)	9 (14)	p < 0.53
Constipation	16 (25)	17 (27)	p < 0.92
Decreased Energy	54 (83)	51 (81)	p < 0.93
Diarrhea	20 (31)	22 (35)	p < 0.62
Difficulty Sleeping	59 (91)	58 (92)	p < 0.99
Difficulty Urinating	1 (2)	0 (0)	p < 0.99
Increased Perspiration	19 (29)	13 (21)	p < 0.36
Itching	28 (43)	27 (43)	p > 0.99
Loss of Sexual Desire	28 (43)	32 (51)	p < 0.49
Menstrual Irregularity	11 (17)	9 (14)	p < 0.87
Nausea/Vomiting	26 (4)	28 (44)	p < 0.74
Painful Urination	6 (9)	1 (2)	p < 0.11
Palpitation	18 (28)	20 (32)	p < 0.76
Poor Concentration	53 (82)	53 (84)	p < 0.88
Poor Coordination	16 (25)	17 (27)	p < 0.76
Rash	9 (14)	8 (13)	p > 0.99
Restlessness	42 (65)	40 (63)	p > 0.99
Ringing in Ears	18 (28)	15 (24)	p < 0.76
Sleeping Too Much	19 (29)	11 (17)	p < 0.17
Tremors	11 (17)	2 (3)	<b>p &lt; 0.02</b>
Trouble Achieving Orgasm	11 (17)	7 (11)	p < 0.45

Bolded value is p<.05

SUPPLEMENTARY FIGURES

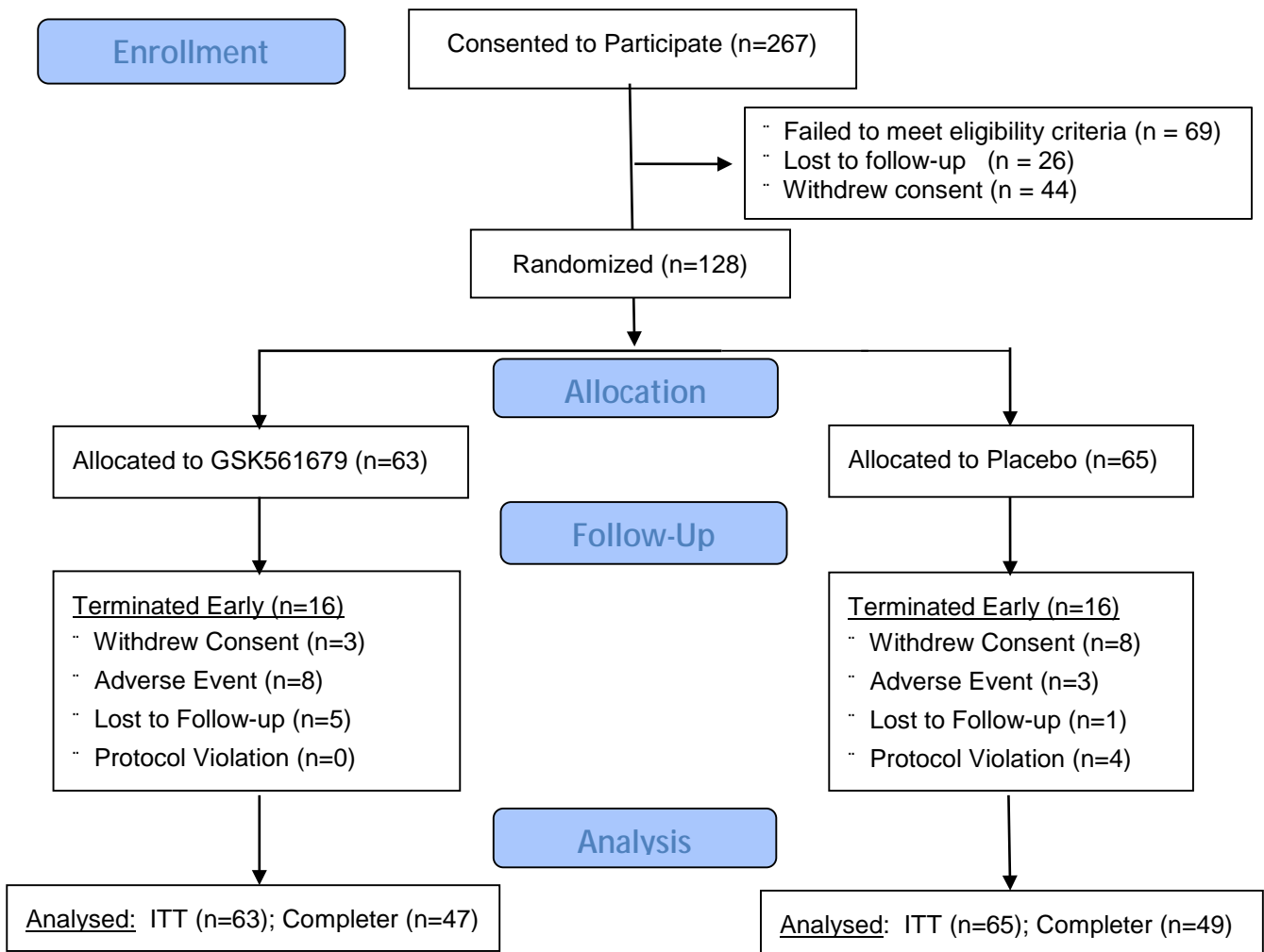


Figure S1: CONSORT flow diagram



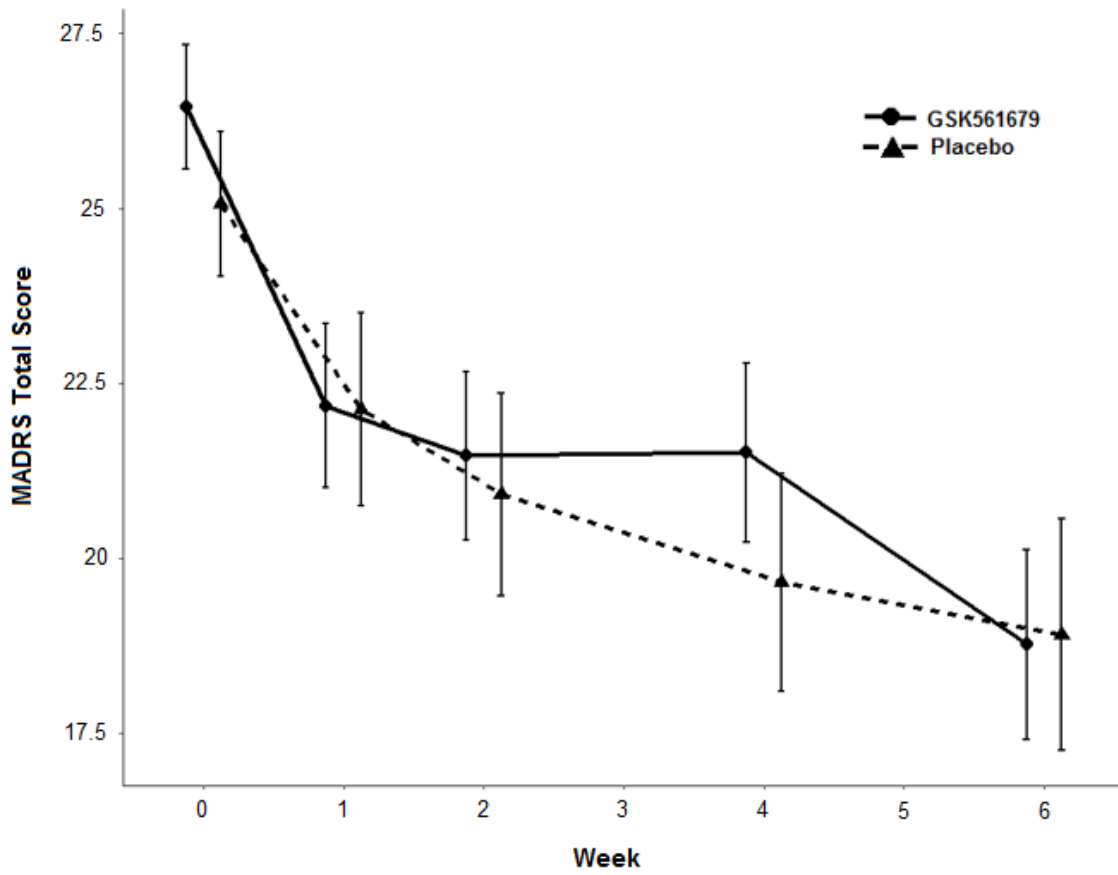
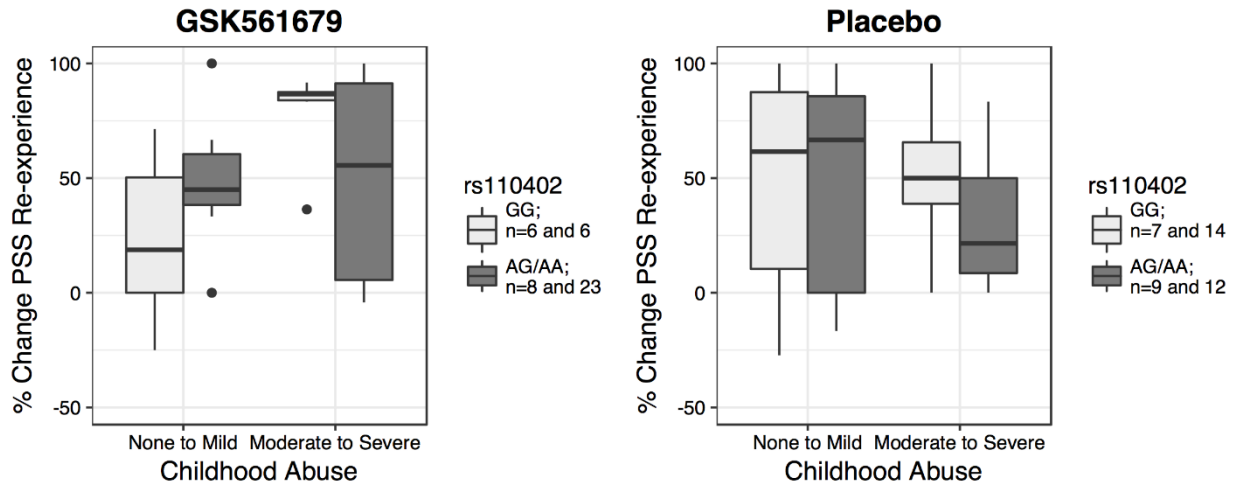
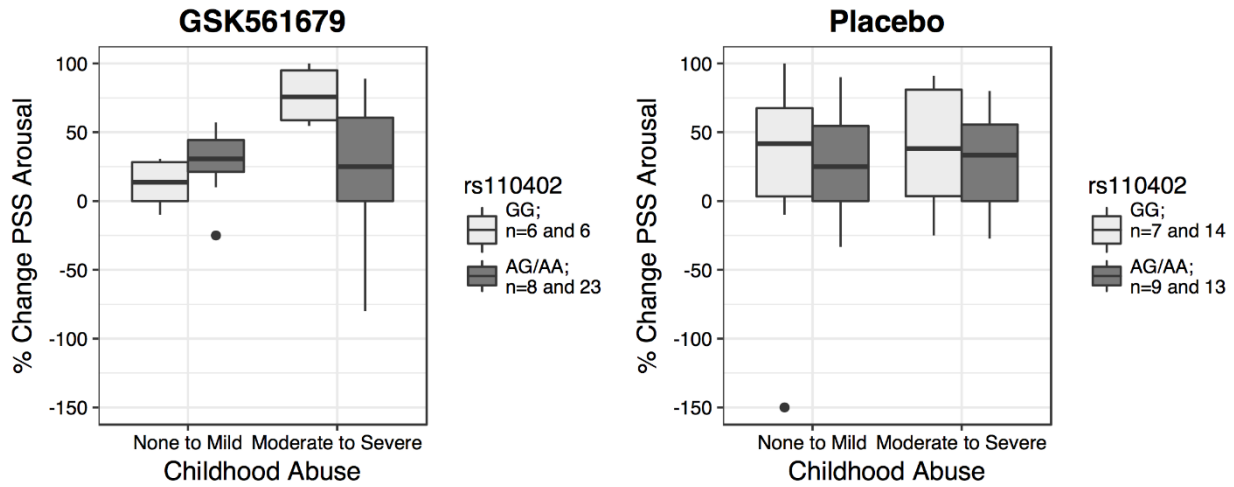


Figure S2: Change in MADRS scores over time  
S.E. bars represent  $\pm 1$  S.E.



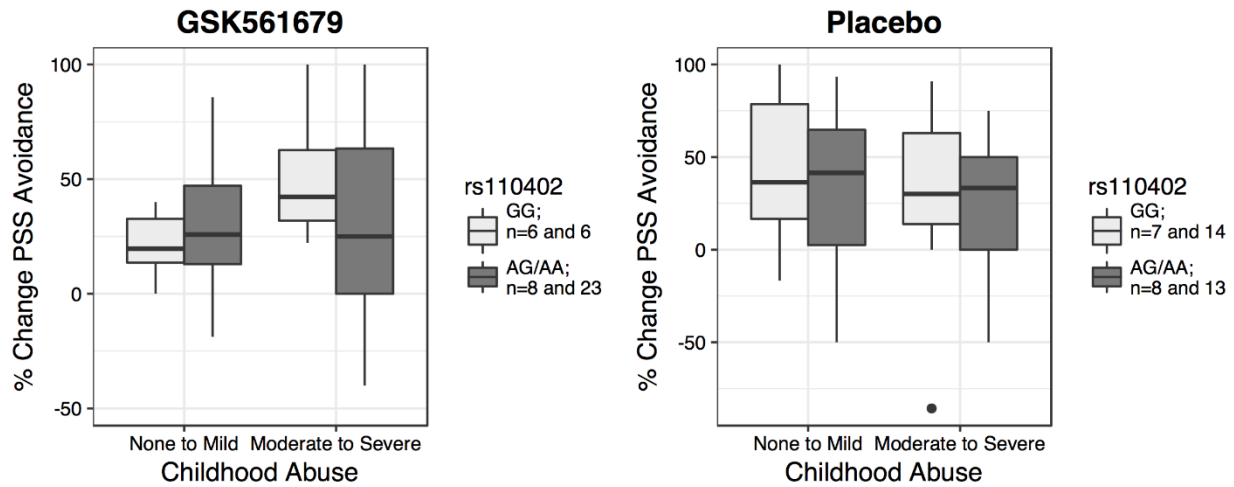
**Figure S3: Significant interaction effect of rs110402 and childhood abuse on percent change in PSS re-experiencing score**

The boxplots describe the mean % change of PSS re-experiencing score in abused and non-abused patients treated with GSK561679 or placebo. GG carriers are shown in light grey and AA/AG in dark grey. Black dots indicate outliers. rs110402 A carrier status by childhood abuse exposure showed a significant interaction effect on PSS re-experiencing score % change over treatment in subjects treated with GSK561679 ( $-\beta = -2.472$ ;  $p = 0.006$ ) but not in subjects treated with placebo ( $\beta = -0.075$ ;  $p = 0.92$ ). rs110402 GG carriers exposed to child abuse displayed the highest % change of PSS symptoms following GSK561679 treatment.



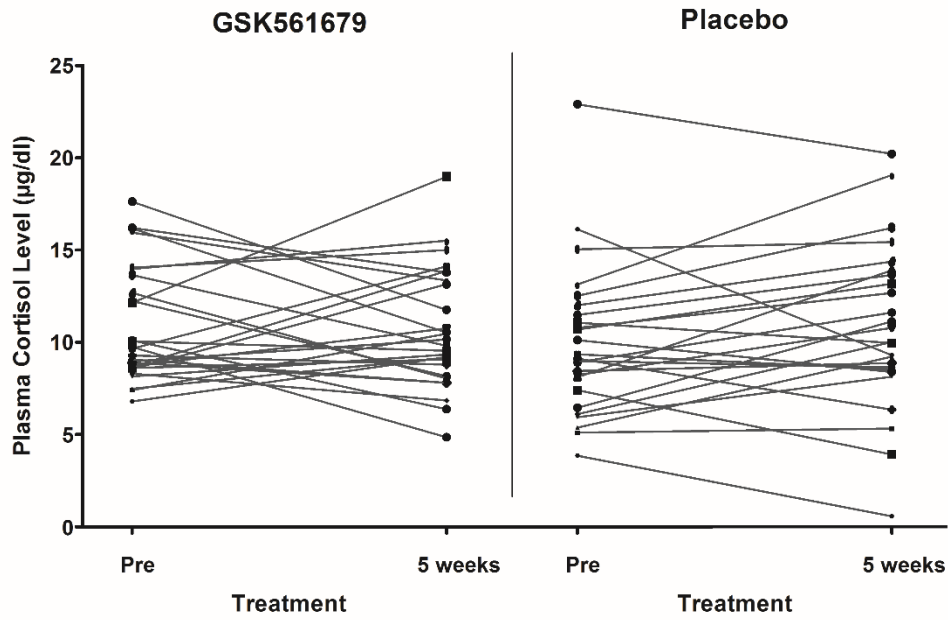
**Figure S4: Significant interaction effect of rs110402 and childhood abuse on percent change in PSS arousal score**

The boxplots describe the mean % change of PSS arousal score in abused and non-abused patients treated with GSK561679 or placebo. GG carriers are shown in light grey and AA/AG in dark grey. Black dots indicate outliers. rs110402 A carrier status by childhood abuse exposure showed a significant interaction effect on PSS arousal score % change over treatment in subjects treated with the GSK561679 ( $\beta=-2.034$ ;  $p=0.019$ ) but not in subjects treated with placebo ( $\beta=0.054$ ;  $p=0.94$ ). rs110402 GG carriers exposed to child abuse displayed the highest % change of PSS symptoms following GSK561679 treatment.



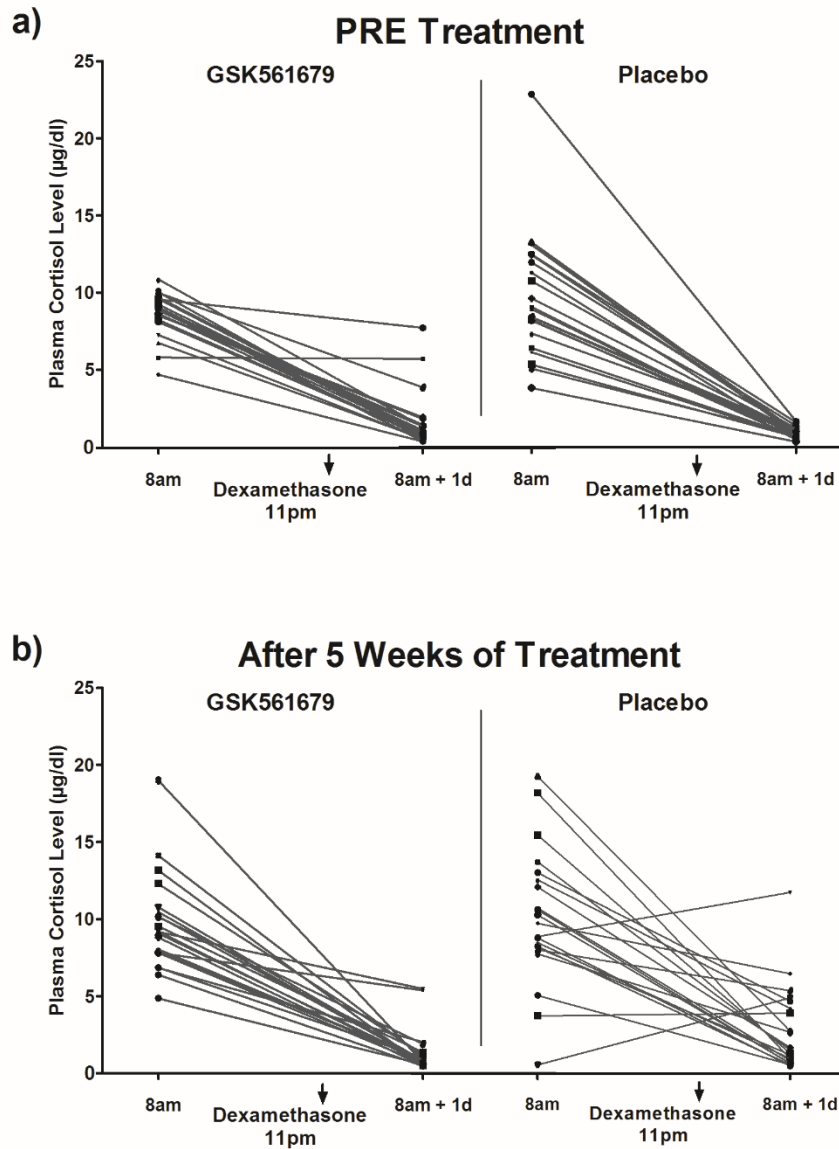
**Figure S5: Lack of interaction effect of rs110402 and childhood abuse on percent change in PSS avoidance score**

The boxplots describe the mean % change of PSS avoidance score in abused and non-abused patients treated with GSK561679 or placebo. GG carriers are shown in light grey and AA/AG in dark grey. Black dots indicate outliers. rs110402 A carrier status by childhood abuse exposure showed no significant interaction effect on PSS avoidance score % change over treatment in subjects treated with either GSK561679 ( $\beta=-0.945$ ;  $p=0.36$ ) or placebo ( $\beta=0.565$ ;  $p=0.44$ ).



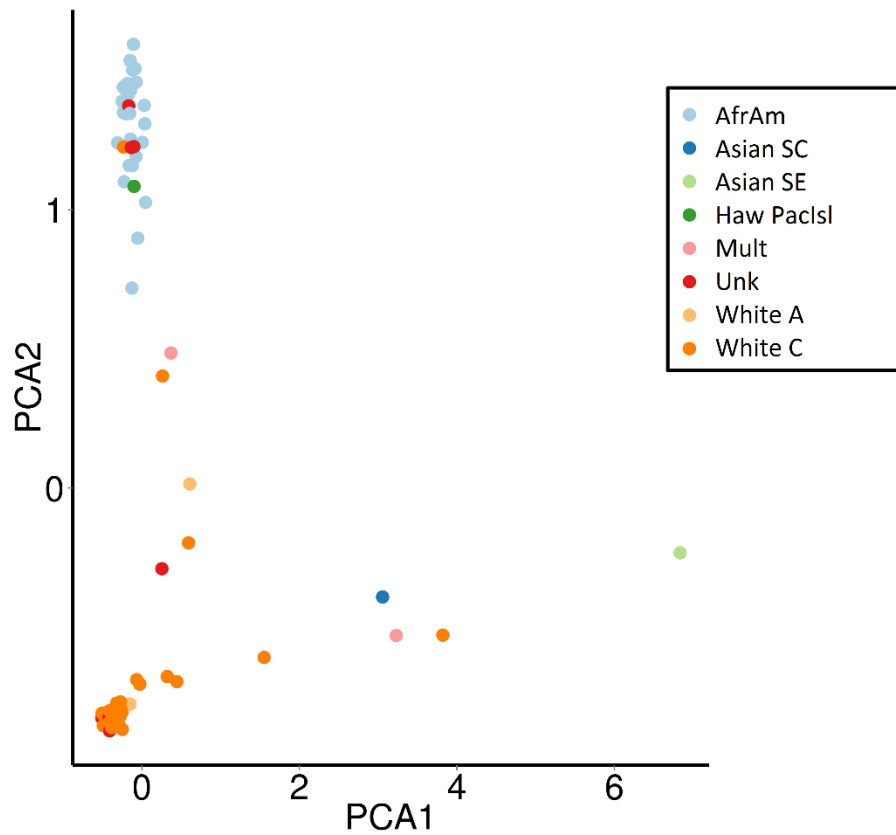
**Figure S6. Lack of effect of GSK561679 and placebo on morning cortisol**

Non-significant change in morning cortisol from baseline to week 5 between patients treated with GSK561679 or placebo ( $p < .05$ ).



**Figure S7: Lack of effect of GSK561679 on change in morning plasma cortisol levels after dexamethasone suppression**

Change of 8:00am plasma cortisol levels before and after administration of 0.5mg dexamethasone in subjects treated with the GSK561679 or placebo. a) Pre-treatment; b) after 5 weeks of treatment. At both time points no significant difference was observed between the two treatments groups ( $p > 0.05$  for all; Pre-treatment:  $n = 36$  GSK561679, 33 placebo; 5 weeks after treatment:  $n = 29$  GSK561679, 26 placebo).



**Figure S8: PCA Plot**

PCA plot of samples shows good concordance between self-reported ethnicity (legend) and estimated ethnicity by principal component analysis. African-American (AfrAm), Asian South Central (Asian SC), Asian South East (Asian SE), Hawaiian Pacific Islands (Haw Paclsl) Multiple (Mult), Unknown (Unk), White Arabic (White A), White Caucasian (White C).

### SUPPLEMENTARY REFERENCE

1. Purcell S, Neale B, Todd-Brown K, Thomas L, Ferreira MA, Bender D, et al. (2007): PLINK: a tool set for whole-genome association and population-based linkage analyses. *Am J Hum Genet* 81: 559-575.