

Supplementary Table S1

Current genetic mutant mouse models of chronic otitis media (OM). PCD = primary ciliary dyskinesia

| mouse gene | reference | human syndrome or condition | adult mouse phenotypes additional to otitis media | craniofacial abnormality | Eustachian tube | bulla | bulla bacteria | inner ear | comment |
|----------------------|-----------------------|-----------------------------|---|--------------------------|-----------------|---|---|--|---------|
| Down Syndrome | | | | | | | | | |
| Ts65Dn Trisomy | (Han et al., 2009) | Down syndrome | behavioural and cognitive deficits, short narrow palate | short narrow palate | | increase in goblet cells, effusion, fibrous proliferation | <i>Staph.</i> coagulase-negative, <i>Bordetella avium</i> , <i>Burkholderia cepacia</i> | labyrinth serous effusion; hair cells, stria vascularis & spiral ganglion normal | |
| Dp(16)1Yey Trisomy | (Bhutta et al., 2013) | Down syndrome | | | | thickened mucoperiosteum, polyps | | | |

| Primary Ciliary Dyskinesia (PCD) | | | | | | | | | |
|----------------------------------|------------------------------|----------------------------------|--|------------|--|---------------------|--|--|--|
| <i>Mdnah5</i> -/- | (Ibanez-Tallon et al., 2002) | PCD | hydrocephaly, growth retardation, mortality 2-3 weeks, situs inversus | domed head | | | | | |
| <i>Dnahc11</i> iv/iv | (Lucas et al., 2012) | PCD | situs inversus, rhinitis, sinusitis | | | | | | immotile tracheal cilia |
| <i>Cby</i> -/- | (Voronina et al., 2009) | PCD | rhinitis, growth retardation, post natal mortality by d30, anaemia, reduced subcutaneous fat, no situs inversus. | | | | | | cilia deficiency and motility deficits, experimental challenge with <i>P. aeruginosa</i> |
| <i>Odf2</i> ΔEx6,7/ΔEx6,7 | (Kunimoto et al., 2012) | PCD | rhinitis, stertor, growth retardation, infertility, hydrocephaly variable | | | | | | |
| <i>Tll1</i> -/- | (Vogel et al., 2012) | PCD not known with this mutation | PCD rhinosinusitis, male infertility, normal lungs, | | | suppurative exudate | | | no hydrocephalus, no situs inversus |

| | | | | | | | | | |
|------------------|----------------------|-----|---|---------------|-----------------------------------|--|--|--|--|
| <i>Spag6</i> -/- | (Li et al., 2014) | PCD | hydrocephalus, sperm motility defects, morbidity and mortality after 6 months | | normal acute angle to nasopharynx | no increase in goblet cell or mucin expression, loss of bulla cilia & disordered arrays; by 6 months cholesterol crystals, tympanosclerosis, mucosal capillary hyperplasia | PCR for human otopathogens <i>H. infl</i> e, <i>S. pneumo</i> , negative <i>M. catar</i> positive by PCR & culture | | |
| <i>Ulk4</i> -/- | (Vogel et al., 2012) | PCD | PCD, rhinosinusitis, hydrocephalus, mortality < 4 months | hydrocephalus | | suppurative OM | | | |
| <i>Kif27</i> -/- | (Vogel et al., 2012) | PCD | PCD, rhinosinusitis, hydrocephalus, mortality < 8 weeks | hydrocephalus | | suppurative OM | | | |
| <i>Stk36</i> -/- | (Vogel et al., 2012) | PCD | PCD hydrocephalus, morbidity mortality < 6 weeks | hydrocephalus | | suppurative OM without rhinosinusitis | | inflammation extends into inner ear (and meninges) | |
| <i>Dpcd</i> -/- | (Vogel et al., 2012) | PCD | PCD, rhinosinusitis, hydrocephalus, male infertility | hydrocephalus | | suppurative OM | | | |

| Mucopolysaccharidosis | | | | | | | | | |
|------------------------|--------------------------|---|---|------------|--|---|--|---|----------------------------------|
| <i>Ids KO</i> | (Hong et al., 2012) | mucopolysaccharidosis type II, Hunter syndrome X-linked | | | | TM thickened, microCT opacity, bulla exudate | | minimal loss of hair cells, reduced ganglia | enzyme replacement therapy study |
| <i>Naglu</i> -/- | (Heldermon et al., 2007) | mucopolysaccharidosis type III, Sanfilippo syndrome | behavioural and sensory deficits, reduced life span | | | lysosomal storage in mucosa, osteocytes, chondrocytes & inflammatory cells | | storage disease present in spiral ligament | |
| <i>Idua</i> -/- | (Schachern et al., 2007) | mucopolysaccharidosis type I | | | | mucosa thickened and granulation tissue formation | | storage disease present in spiral ligament | |
| <i>Gus mps2J/mps2J</i> | (Vogler et al., 2001) | mucopolysaccharidosis type VII | reduced survival, reduced lifespan, skeletal dysostosis, thickened tail | blunt nose | | storage disease in mucosal connective tissue, osteocytes chondrocytes, thickened TM | | | |

| 22q11.2 Deletion Syndrome (DiGeorge Syndrome or Velo-Cardio-Facial Syndrome) | | | | | | | | | |
|--|----------------------|---------------------------|---|---------------|----------------------------------|---|---|----------------------------|--|
| <i>Dfl/+</i> | (Fuchs et al., 2013) | 22q11.2 Deletion Syndrome | cardiovascular abnormalities, thymic or parathyroid defects | none reported | levator veli palatini hypoplasia | thickened mucosa, vascularization, reduced numbers of ciliated cells | <i>E. coli</i> , <i>Lactococcus lactis</i> , <i>Pantoea</i> sp. | no hair cell loss detected | |
| <i>Tbx/+</i> | Fuchs et al., 2015 | 22q11.2 Deletion Syndrome | cardiovascular abnormalities | | levator veli palatini hypoplasia | mucosa proliferation, vascularization, effusion, increase in goblet cells | | | |

| Hypohidrotic ectodermal dysplasia | | | | | | | | | |
|--|--------------------------------|--|--|------------|--------------------|--|---|--------|-----------------------------|
| <i>Eda Ta/Ta, Eda Ta/Y, Edar dlJ/dlJ</i> | (Azar et al., 2016) | Hypohidrotic Ectodermal dysplasia (HED) OMIM <i>EDA</i> 300451; <i>EDAR</i> 604095 | rhinitis, nasopharyngitis, otitis media, HED, loss of nasal and nasopharyngeal submucosal glands | | secondary dilation | mucosal thickening, polyps, foreign body granuloma | Gemella sp. Enterococcus sp. <i>E. coli</i> , <i>Staphylococcus</i> sp., <i>Staph. aureus</i> | | |
| <i>IKB αΔN</i> | (Schmidt-Ullrich et al., 2001) | | HED, immune defects lymph nodes absent, leukocytosis, impaired macrophage function, growth retardation | domed head | | mucosal thickening | <i>Staphylococcus aureus</i> | normal | <i>Leishmania</i> challenge |

| Other syndromes | | | | | | | | | |
|--------------------|-------------------------|--|---|--|---|--|--|--------------------------------------|---|
| <i>Porcn</i> +/del | (Biechele et al., 2013) | Focal Dermal Hypoplasia (Goltz Syndrome, OMIM#305600) | rhinitis, bronchopneumonia, mild hydrocephalus, dermal and skeletal defects | | | bulla exudate | | | cilia defect suspected |
| <i>Chd7</i> Ome/+ | (Tian et al., 2012) | CHARGE syndrome abnormalities of eye, heart, choana, genitalia, middle and inner ear | keratitis sicca, growth retardation, circling behaviour | skull height and nose length ratios higher | increased lateral angulation | increased goblet cells, reduced ciliated cells | Streptococci present in mutants and wild-type. PCR for human <i>H. influ</i> , <i>S. pneumo</i> , <i>M. catarrh</i> negative | normal hair cells and spiral ganglia | <i>Muc5AC</i> , <i>Muc5B</i> , <i>Tgfb1</i> |
| <i>Lmna</i> Dhe/+ | (Zhang et al., 2012) | <i>LMNA</i> laminopathies includes Hutchinson-Gilford progeria syndrome, pinna & external ear canal anomaly, conductive hearing loss | epidermal dysplasia, craniofacial defects and reduced pinna, hyperphosphataemia and increased calcium x phosphate product in female mutants | fused basicranium | increased lateral angulation, increased width of bony segment more horizontal | mucosal thickening increased goblet cells, haemorrhage, erythrophagocytosis, cholesterol granuloma, abscessation | | | bulla <i>Tnfa</i> , <i>NF-kB</i> , <i>Tgfa</i> expression increased, functional assay peritoneal macrophages normal |

| | | | | | | | | | |
|-------------------------------------|---|--|---|------------------------------------|------------------------------------|---|----------------------------------|---------------|---|
| <i>Ets1</i> +/- and <i>Fli1</i> +/- | (Carpinelli et al., 2015) | Jacobsen syndrome | <i>Ets1</i> perinatal mortality, <i>Ets</i> and <i>Fli1</i> thrombocytopenia | short nasal bone, malformed septum | | inflamed mucosa, small bullae, deformed stapes | | none detected | |
| <i>Mcpf1 tm1a/tm1a</i> | (Chen et al., 2013) | Microcephaly and mental retardation | homozygotes infertile, ocular abnormalities, increased B cells & micronucleated normochromic erythrocytes | small skull | normal | thickened mucoperiosteum | <i>Streptococcus</i> sp. | | cilia defect suspected |
| <i>Eya4</i> -/- | (Depreux et al., 2008) | sensorineural hearing loss, cardiomyopathy | | none reported | reduced size, malposition | reduced bulla size, mucosal hyperplasia, reduced cilia, increased goblet cells | | | azithromycin treatment has no effect on phenotype |
| <i>Phex Hyp-Duk/Y</i> | (Han et al., 2012) | X-linked hypophosphatemic rickets | small body size and short tail | slightly abnormal skull shape | hyperplasia of ciliated epithelium | increased goblet cells, reduced ciliated cells, overlaid by patches mucin-like material | <i>Staph.</i> coagulase negative | | |

| <i>Anatomical defects</i> | | | | | | | | | |
|---------------------------------|---|-------------------|--|---|---|---|--|--|---------------------------------------|
| <i>Rpl38 Ts/+</i> | (Noben-Trauth and Latoche, 2011) | | skeletal abnormality, short misshapen tail, hyperphosphataemia | shortened nose | enlarged | polyps, cholesterol granuloma, mineralization, ectopic calcification, osteogenesis | <i>Staphylococcus</i> spp, <i>Enterococcus</i> sp. | no abnormality | rescued by Rpl38 cDNA |
| <i>Sh3pxd2b nee</i> homozygote | (Yang et al., 2011) | | glaucoma, growth retardation, adipose deficits, hearing impairment | domed head, rounded skull, short maxilla and nose | inflammatory cells in ET lumen, increased lateral with concurrent reduced horizontal angulation | thickened fibrous mucosa with increased goblet cells and decreased ciliated cells, TM thickened | | inner ear inflammation minor | increased <i>Tnf</i> and <i>Tlr2</i> |
| <i>TGF-β signalling pathway</i> | | | | | | | | | |
| <i>Fbxo11 Jf/+</i> | (Hardisty et al., 2003, Hardisty-Hughes et al., 2006) | | homozygote cleft palate, eyelids open at birth, heterozygotes growth retardation | short snout | New-born and d50 mice ET narrowed and misshapen | bulla reduced size, mucosa dilated capillaries & lymphatics, polyps, calcification in mice > 11months | | abnormal endocochlear potentials, possible impaired stria function | |
| <i>Tgif</i> -/- | (Tateossian et al., 2013) | holoprosencephaly | homozygote placental defect and minor hydrocephalus | minor skull shortening and reduced size | normal acute angle to nasopharynx | thickened mucoperiosteum, increased goblet cells | | none at 2 months | bulla fluids elevated MMP, VEGF, TNFa |

| | | | | | | | | |
|--|--|--|--------------------|--|--|--|--|--|
| | | | s, growth retarded | | | | | |
|--|--|--|--------------------|--|--|--|--|--|

| Innate immunity | | | | | | | | |
|------------------------------|--|--|---|---|--|--|--|---|
| <i>Mecom (Evi1) Jbo/+</i> | (Azar et al., 2016, Bhutta et al., 2014, Cheeseman et al., 2011, Hood et al., 2016, Parkinson et al., 2006, Xu et al., 2012) | | extra digit, derepression of NF- κ B signalling | | mucosa thickened polyps, vascularization | <i>Staph</i> sp., <i>Staph aureus</i> , <i>Proteus mirabilis</i> , <i>E. coli</i> , <i>Moraxella</i> sp. | | bulla fluids elevated cytokines and VEGF. experimental NTHi infection |
| <i>Tlr4 Lps-d/Lps-d</i> | MacArthur et al., 2006 | | | lumen filled by exudate | mucosal fibrosis, granulation tissue, vascularization and bulla bone remodelling | | round window and organ of Corti inflammation | |
| <i>BpifA1 (Splunc-1) -/-</i> | (Bartlett et al., 2015) | | | normal | mucosal thickening and polyps, TM thickened, mucopurulent OM | special stains for bacteria and fungi negative | | |
| <i>Dbh -/-</i> | (Maison et al., 2010) | | absence of measurable epinephrine / norepinephrine, altered metabolism, | loss adrenergic modulation auditory tube function | exudate or fibrous tissue in the vicinity of the round window, thickening | | physiological changes | susceptibility to infection via compromised local and systemic |

| | | | | | | | | | |
|-------------------|-----------------------|--|--|--|--|--|--------------------|----------------|----------------------|
| | | | thermoregulation, cardiovascular tone, maternal behaviour. Deficits in motor function, learning & memory | | | round window | | | immune cell function |
| <i>Isl1Drsh/+</i> | (Hilton et al., 2011) | | | | | mucosa thickened by granulation tissue, mucosa and tympanic membrane vascularised, fusion of malleus and incus | <i>Proteus</i> sp. | no abnormality | |

| Miscellaneous | | | | | | | | | |
|----------------------|---------------------------|-------------------|---|--|--|--|--|--|--|
| <i>Nf2</i> KO | (Giovannini et al., 2000) | neurofibromatosis | osteosarcoma, molar eruption delayed or absent, growth retardation, reduced survival | | | otitis media present but not described in detail | | | |

| | | | | | | | | |
|------------------|--------------------------|--|--|--|--|--|--|--|
| <i>Oxgr1</i> -/- | (Kerschner et al., 2013) | | | | mucosal fibrosis, haemosiderin laden macrophages, mineralization of ossicles | Gram stains for bacteria & PCR for human otopathogens <i>H. influe</i> , <i>S.pneumo</i> , <i>M. catarr</i> are negative | | upregulation of <i>Muc5B</i> , <i>Muc 19</i> |
|------------------|--------------------------|--|--|--|--|--|--|--|

References for table S1

- Azar, A., Piccinelli, C., Brown, H., Headon, D. & Cheeseman, M. (2016). Ectodysplasin signalling deficiency in mouse models of hypohidrotic ectodermal dysplasia leads to middle ear and nasal pathology. *Hum Mol Genet*.
- Bartlett, J. A., Meyerholz, D. K., Wohlford-Lenane, C. L., Naumann, P. W., Salzman, N. H. & Mccray, P. B., Jr. (2015). Increased susceptibility to otitis media in a Splunc1-deficient mouse model. *Dis Model Mech*, 8, 501-8.
- Bhutta, M. F., Cheeseman, M. T. & Brown, S. D. (2014). Myringotomy in the Junbo mouse model of chronic otitis media alleviates inflammation and cellular hypoxia. *Laryngoscope*, 124, E377–E383.
- Bhutta, M. F., Cheeseman, M. T., Herault, Y., Yu, Y. E. & Brown, S. D. (2013). Surveying the Down syndrome mouse model resource identifies critical regions responsible for chronic otitis media. *Mamm Genome*, 24, 439-45.
- Biechele, S., Adissu, H. A., Cox, B. J. & Rossant, J. (2013). Zygotic Porcn paternal allele deletion in mice to model human focal dermal hypoplasia. *PLoS One*, 8, e79139.
- Carpinelli, M. R., Kruse, E. A., Arhatari, B. D., Debrincat, M. A., Ogier, J. M., Bories, J. C., Kile, B. T. & Burt, R. A. (2015). Mice Haploinsufficient for Ets1 and Fli1 Display Middle Ear Abnormalities and Model Aspects of Jacobsen Syndrome. *Am J Pathol*, 185, 1867-76.
- Cheeseman, M. T., Tyrer, H. E., Williams, D., Hough, T. A., Pathak, P., Romero, M. R., Hilton, H., Bali, S., Parker, A., Vizor, L., et al. (2011). HIF-VEGF Pathways Are Critical for Chronic Otitis Media in Junbo and Jeff Mouse Mutants. *PLoS Genet*, 7, e1002336.
- Chen, J., Ingham, N., Clare, S., Raisen, C., Vancollie, V. E., Ismail, O., Mcintyre, R. E., Tsang, S. H., Mahajan, V. B., Dougan, G., et al. (2013). Mcph1-deficient mice reveal a role for MCPH1 in otitis media. *PLoS One*, 8, e58156.

- Depreux, F. F., Darrow, K., Conner, D. A., Eavey, R. D., Liberman, M. C., Seidman, C. E. & Seidman, J. G. (2008). Eya4-deficient mice are a model for heritable otitis media. *J Clin Invest*, 118, 651-8.
- Fuchs, J. C., Zinnamon, F. A., Taylor, R. R., Ivins, S., Scambler, P. J., Forge, A., Tucker, A. S. & Linden, J. F. (2013). Hearing loss in a mouse model of 22q11.2 Deletion Syndrome. *PLoS One*, 8, e80104.
- Giovannini, M., Robanus-Maandag, E., Van Der Valk, M., Niwa-Kawakita, M., Abramowski, V., Goutebroze, L., Woodruff, J. M., Berns, A. & Thomas, G. (2000). Conditional biallelic Nf2 mutation in the mouse promotes manifestations of human neurofibromatosis type 2. *Genes Dev*, 14, 1617-30.
- Han, F., Yu, H., Li, P., Zhang, J., Tian, C., Li, H. & Zheng, Q. Y. (2012). Mutation in Phex gene predisposes BALB/c-Phex(Hyp-Duk)/Y mice to otitis media. *PLoS One*, 7, e43010.
- Han, F., Yu, H., Zhang, J., Tian, C., Schmidt, C., Nava, C., Davisson, M. T. & Zheng, Q. Y. (2009). Otitis media in a mouse model for Down syndrome. *Int J Exp Pathol*, 90, 480-8.
- Hardisty, R. E., Erven, A., Logan, K., Morse, S., Guionaud, S., Sancho-Oliver, S., Hunter, A. J., Brown, S. D. & Steel, K. P. (2003). The deaf mouse mutant Jeff (Jf) is a single gene model of otitis media. *J Assoc Res Otolaryngol*, 4, 130-8.
- Hardisty-Hughes, R. E., Tateossian, H., Morse, S. A., Romero, M. R., Middleton, A., Tymowska-Lalanne, Z., Hunter, A. J., Cheeseman, M. & Brown, S. D. (2006). A mutation in the F-box gene, Fbxo11, causes otitis media in the Jeff mouse. *Hum Mol Genet*, 15, 3273-9.
- Heldermon, C. D., Hennig, A. K., Ohlemiller, K. K., Ogilvie, J. M., Herzog, E. D., Breidenbach, A., Vogler, C., Wozniak, D. F. & Sands, M. S. (2007). Development of sensory, motor and behavioral deficits in the murine model of Sanfilippo syndrome type B. *PLoS ONE*, 2, e772.
- Hilton, J. M., Lewis, M. A., Grati, M., Ingham, N., Pearson, S., Laskowski, R. A., Adams, D. J. & Steel, K. P. (2011). Exome sequencing identifies a missense mutation in Isl1 associated with low penetrance otitis media in dearisch mice. *Genome Biol*, 12, R90.
- Hong, S. H., Chu, H., Kim, K. R., Ko, M. H., Kwon, S. Y., Moon, I. J., Chung, W. H., Cho, Y. S., Kim, C. H., Suh, M. W., et al. (2012). Auditory characteristics and therapeutic effects of enzyme replacement in mouse model of the mucopolysaccharidosis (MPS) II. *Am J Med Genet A*, 158A, 2131-8.
- Hood, D., Moxon, R., Purnell, T., Richter, C., Williams, D., Azar, A., Crompton, M., Wells, S., Fray, M., Brown, S. D., et al. (2016). A new model for non-typeable *Haemophilus influenzae* middle ear infection in the Junbo mutant mouse. *Dis Model Mech*, 9, 69-79.
- Ibanez-Tallon, I., Gorokhova, S. & Heintz, N. (2002). Loss of function of axonemal dynein Mdnah5 causes primary ciliary dyskinesia and hydrocephalus. *Hum Mol Genet*, 11, 715-21.
- Kerschner, J. E., Hong, W., Taylor, S. R., Kerschner, J. A., Khampang, P., Wrege, K. C. & North, P. E. (2013). A novel model of spontaneous otitis media with effusion (OME) in the Oxgr1 knock-out mouse. *Int J Pediatr Otorhinolaryngol*, 77, 79-84.

- Kunimoto, K., Yamazaki, Y., Nishida, T., Shinohara, K., Ishikawa, H., Hasegawa, T., Okanoue, T., Hamada, H., Noda, T., Tamura, A., et al. (2012). Coordinated ciliary beating requires Odf2-mediated polarization of basal bodies via basal feet. *Cell*, 148, 189-200.
- Li, X., Xu, L., Li, J., Li, B., Bai, X., Strauss, J. F., 3rd, Zhang, Z. & Wang, H. (2014). Otitis media in sperm-associated antigen 6 (Spag6)-deficient mice. *PLoS One*, 9, e112879.
- Liao, J., Kochilas, L., Nowotschin, S., Arnold, J. S., Aggarwal, V. S., Epstein, J. A., Brown, M. C., Adams, J. & Morrow, B. E. (2004). Full spectrum of malformations in velo-cardio-facial syndrome/DiGeorge syndrome mouse models by altering Tbx1 dosage. *Hum Mol Genet*, 13, 1577-85.
- Lucas, J. S., Adam, E. C., Goggin, P. M., Jackson, C. L., Powles-Glover, N., Patel, S. H., Humphreys, J., Fray, M. D., Falconnet, E., Blouin, J. L., et al. (2012). Static respiratory cilia associated with mutations in Dnahc11/DNAH11: a mouse model of PCD. *Hum Mutat*, 33, 495-503.
- Macarthur, C. J., Hefeneider, S. H., Kempton, J. B. & Trune, D. R. (2006). C3H/HeJ mouse model for spontaneous chronic otitis media. *Laryngoscope*, 116, 1071-9.
- Maison, S. F., Le, M., Larsen, E., Lee, S. K., Rosowski, J. J., Thomas, S. A. & Liberman, M. C. (2010). Mice lacking adrenergic signaling have normal cochlear responses and normal resistance to acoustic injury but enhanced susceptibility to middle-ear infection. *J Assoc Res Otolaryngol*, 11, 449-61.
- Noben-Trauth, K. & Latoche, J. R. (2011). Ectopic mineralization in the middle ear and chronic otitis media with effusion caused by RPL38 deficiency in the Tail-short (Ts) mouse. *J Biol Chem*, 286, 3079-93.
- Parkinson, N., Hardisty-Hughes, R. E., Tateossian, H., Tsai, H. T., Brooker, D., Morse, S., Lalane, Z., Mackenzie, F., Fray, M., Glenister, P., et al. (2006). Mutation at the Evi1 locus in Junbo mice causes susceptibility to otitis media. *PLoS Genet*, 2, e149.
- Schachern, P. A., Cureoglu, S., Tsuprun, V., Paparella, M. M. & Whitley, C. B. (2007). Age-related functional and histopathological changes of the ear in the MPS I mouse. *Int J Pediatr Otorhinolaryngol*, 71, 197-203.
- Schmidt-Ullrich, R., Aebsicher, T., Hulskens, J., Birchmeier, W., Klemm, U. & Scheidereit, C. (2001). Requirement of NF-kappaB/Rel for the development of hair follicles and other epidermal appendices. *Development*, 128, 3843-53.
- Tateossian, H., Morse, S., Parker, A., Mburu, P., Warr, N., Acevedo-Arozena, A., Cheeseman, M., Wells, S. & Brown, S. D. (2013). Otitis media in the Tgif knockout mouse implicates TGFbeta signalling in chronic middle ear inflammatory disease. *Hum Mol Genet*, 22, 2553-65.
- Tian, C., Yu, H., Yang, B., Han, F., Zheng, Y., Bartels, C. F., Schelling, D., Arnold, J. E., Scacheri, P. C. & Zheng, Q. Y. (2012). Otitis Media in a New Mouse Model for CHARGE Syndrome with a Deletion in the Chd7 Gene. *PLoS ONE*, 7, e34944.

- Vogel, P., Read, R. W., Hansen, G. M., Payne, B. J., Small, D., Sands, A. T. & Zambrowicz, B. P. (2012). Congenital hydrocephalus in genetically engineered mice. *Vet Pathol.*, 49, 166-81.
- Vogler, C., Levy, B., Galvin, N., Sands, M. S., Birkenmeier, E. H., Sly, W. S. & Barker, J. (2001). A novel model of murine mucopolysaccharidosis type VII due to an intracisternal a particle element transposition into the beta-glucuronidase gene: clinical and pathologic findings. *Pediatr Res.*, 49, 342-8.
- Voronina, V. A., Takemaru, K., Treuting, P., Love, D., Grubb, B. R., Hajjar, A. M., Adams, A., Li, F. Q. & Moon, R. T. (2009). Inactivation of Chibby affects function of motile airway cilia. *J Cell Biol.*, 185, 225-33.
- Warren, M., Wang, W., Spiden, S., Chen-Murchie, D., Tannahill, D., Steel, K. P. & Bradley, A. (2007). A Sall4 mutant mouse model useful for studying the role of Sall4 in early embryonic development and organogenesis. *Genesis*, 45, 51-8.
- Xu, X., Woo, C. H., Steere, R. R., Lee, B. C., Huang, Y., Wu, J., Pang, J., Lim, J. H., Xu, H., Zhang, W., et al. (2012). EVI1 Acts as an Inducible Negative-Feedback Regulator of NF-kappaB by Inhibiting p65 Acetylation. *J Immunol.*, 188, 6371-80.
- Yang, A., Walker, N., Bronson, R., Kaghad, M., Oosterwegel, M., Bonnin, J., Vagner, C., Bonnet, H., Dikkes, P., Sharpe, A., et al. (2000). p73-deficient mice have neurological, pheromonal and inflammatory defects but lack spontaneous tumours. *Nature*, 404, 99-103.
- Yang, B., Tian, C., Zhang, Z. G., Han, F. C., Azem, R., Yu, H., Zheng, Y., Jin, G., Arnold, J. E. & Zheng, Q. Y. (2011). Sh3pxd2b mice are a model for craniofacial dysmorphology and otitis media. *PLoS ONE*, 6, e22622.
- Zhang, Y., Yu, H., Xu, M., Han, F., Tian, C., Kim, S., Fredman, E., Zhang, J., Benedict-Alderfer, C. & Zheng, Q. Y. (2012). Pathological Features in the Lmna(Dhe^{+/}) Mutant Mouse Provide a Novel Model of Human Otitis Media and Laminopathies. *Am J Pathol.*