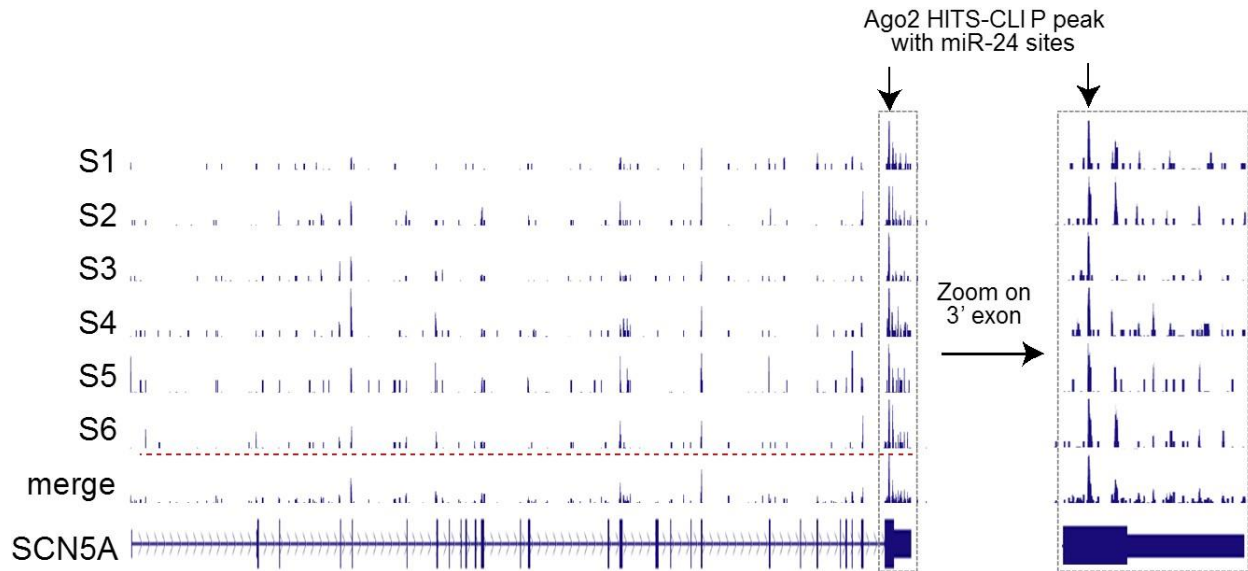


SUPPLEMENTAL MATERIAL**A common variant alters *SCN5A*:miR-24 interaction and associates with heart failure mortality**

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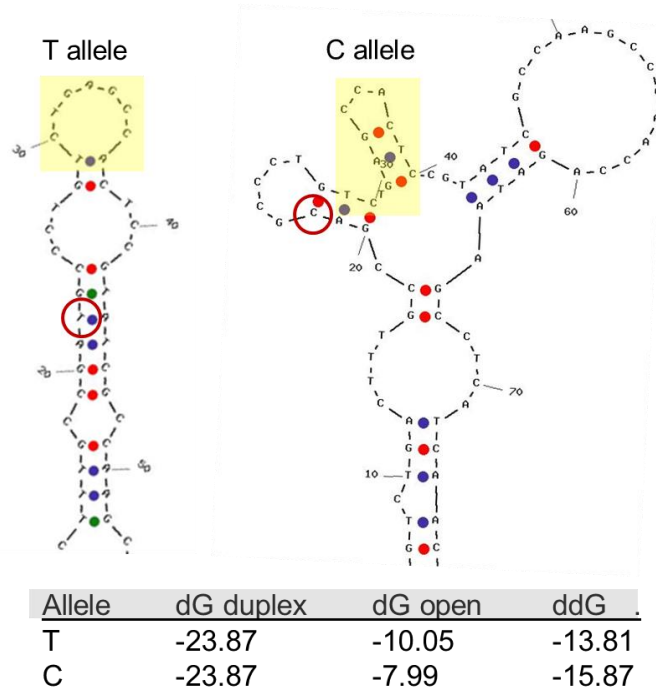
Supplemental materials include:

Supp. Figure 1	Human cardiac Ago2 binding profile across the <i>SCN5A</i> locus
Supp. Figure 2	Computational modeling of the effect of rs1805126 genotype on <i>SCN5A</i> local mRNA structure and targeting by miR-24
Supp. Figure 3	Effect of rs1805126 genotype on miR-24 mediated <i>SCN5A</i> suppression in human HEK293 cells
Supp. Figure 4	Effects of miR-24 inhibition on <i>SCN5A</i> expression and function in neonatal rat cardiomyocytes
Supp. Figure 5	Comparison of predictive miR-24 targeting capacity on human versus rat <i>SCN5A</i> mRNAs
Supp. Figure 6	Association of rs1805126 genotype with all-cause death in heart failure patient sub-groups
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Supp. Figure 8	Association of rs1805126 genotype with <i>SCN5A</i> mRNA levels in human hearts
Supp. Figure 9	Cardiac Nav1.5 expression levels in <i>SCN5A</i> heterozygous knockout mice.
Supp. Table 1	Demographical and clinical data of GRADE subjects by rs1805126 genotype
Supp. Table 2	SNPs in Linkage Disequilibrium with rs1805126
Supp. Table 3	Human cardiac tissue samples used for <i>SCN5A</i> molecular analyses
Supp. Table 4	Sample information for Penn and Netherlands cohorts
Supp. Table 5	Sample information for allele-specific expression analysis

Supplemental Figure 1

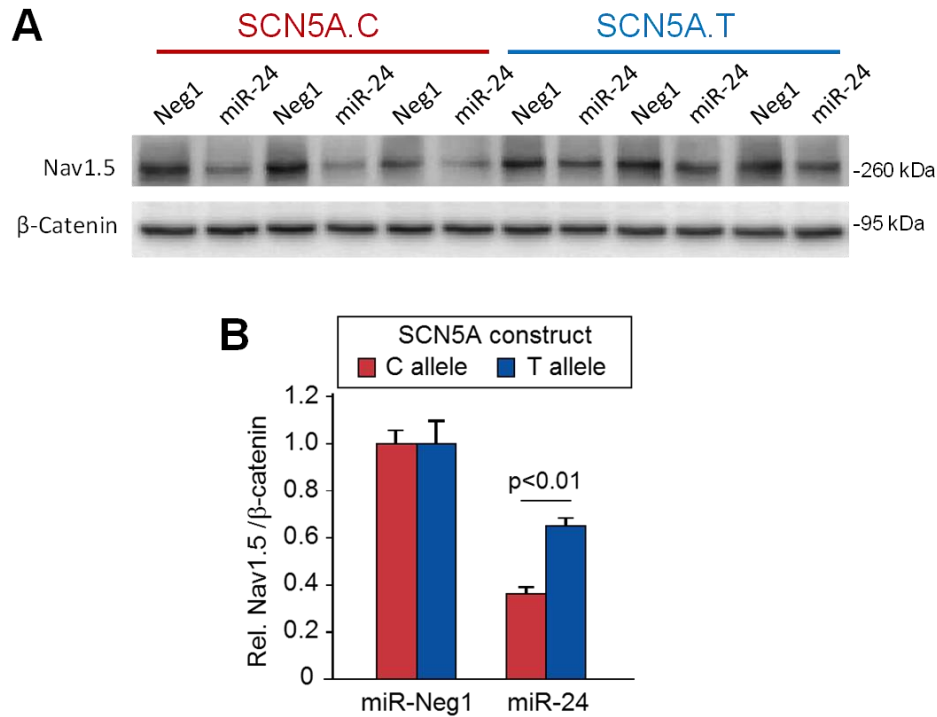
Supplemental Figure 1. Human cardiac Ago2 binding profile across the *SCN5A* locus. UCSC Genome Browser screen-capture images of human cardiac Ago2 HITS-CLIP data show the positional read coverage for each sample (S1-S6) and S1-S6 merged across the *SCN5A* locus; the annotated major transcript isoform is diagrammed below. The data illustrate that the Ago2 binding site of interest corresponding to miR-24 is the most robust and reproducible peak within the entire *SCN5A* transcript (red-dotted line in “merge” track). A zoomed image (right) shows the position of this peak within the terminal coding exon; dotted boxed region spans ~3.6kb.

Supplemental Figure 2



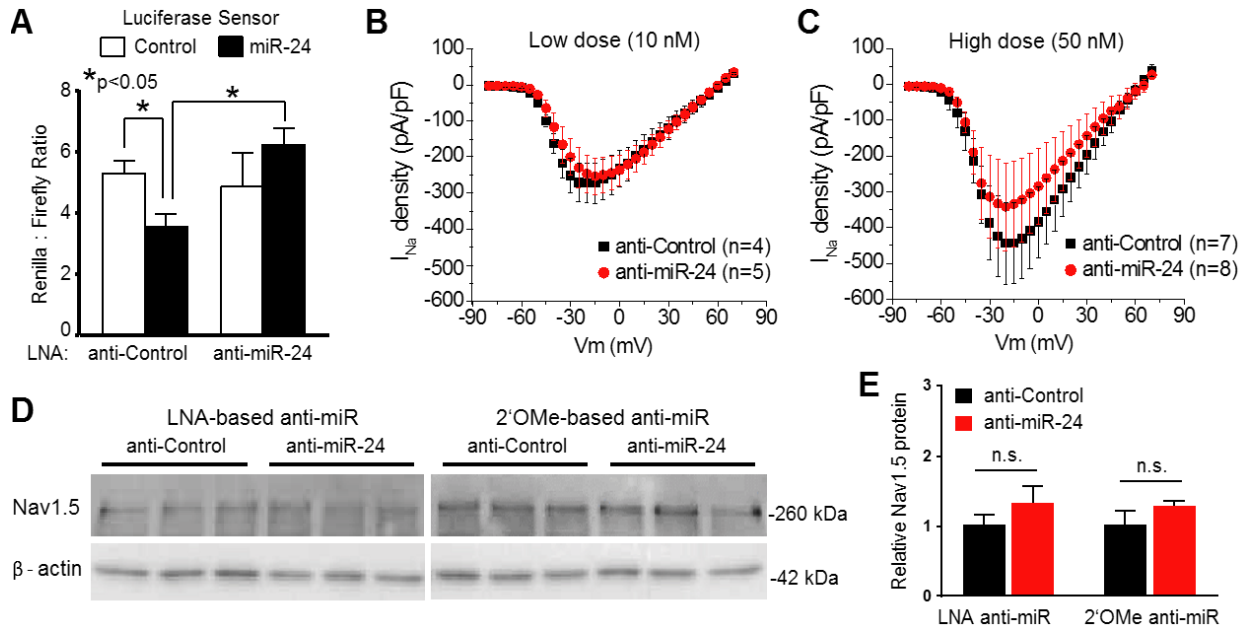
Supplemental Figure 2. Computational modeling of the effect of rs1805126 genotype on *SCN5A* local mRNA structure and targeting by miR-24. Predictive RNA structure analysis using UNAFold was performed on ~250-nts of *SCN5A* mRNA sequence centered on rs1805126 (red open-circle), revealing a genotype-specific structure that alter the miR-24 binding region (seed highlighted in yellow; refer to **Figure 1A**). The table summarizes PITA microRNA targeting prediction results which indicate that miR-24 binding to the C allele is more energetically favorable (i.e. lower ddG). Note dG and ddG are delta-G and delta-delta-G thermodynamic energies of miR-target binding (duplex), target site accessibility (open), and the difference (ddG).

Supplemental Figure 3



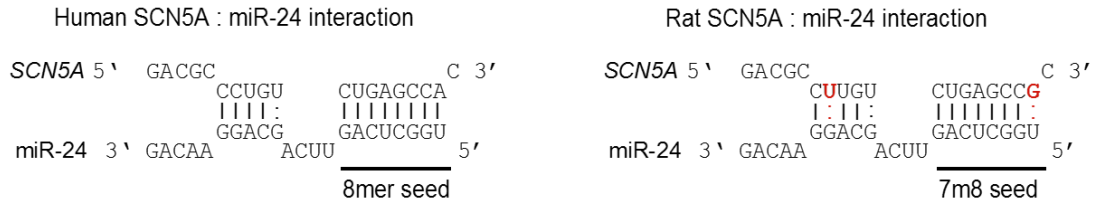
Supplemental Figure 3. Effect of rs1805126 genotype on miR-24 mediated SCN5A suppression in human HEK293 cells. The effect of miR-24 on *SCN5A* expression, and the potential impact of rs1805126 on this interaction, was tested in cell culture experiments. Human HEK293 cells were co-transfected in triplicate with synthetic pre-miRs (4 nM) and human full-length *SCN5A* expression plasmids harboring either the C or T allele for rs1805126. At 48 h post-transfection, western blot (**A**) and densitometry analysis (**B**) were performed to measure plasmid-derived Nav1.5 protein expression; as observed in mouse N2a cell studies (**Figure 1B,C**), the C allele was suppressed to a greater degree relative to the T allele. Data are represented as mean \pm SEM (n=3), and p-values were obtained using two-tailed unpaired t-test comparing the indicated groups.

Supplemental Figure 4



Supplemental Figure 4. Effects of miR-24 inhibition on *SCN5A* expression and function in neonatal rat cardiomyocytes. (A) NRCMs were co-transfected with LNA-based anti-miR oligonucleotides along with either a control dual luciferase plasmid or a miR-24 dual luciferase sensor plasmid that harbors three miR-24 sites in the Renilla luciferase 3'UTR. (B,C) NRCMs were co-transfected with anti-miRs (low and high doses) along with a GFP expression plasmid. Na⁺ current in GFP-positive cells was measured 2-4 days later using patch-clamp; current-voltage relationship plots for Na⁺ currents are shown. (D,E) NRCMs were transfected with anti-miRs (LNA- or 2'OMe-based, at 50 nM), and 72 hours later, endogenous *SCN5A* protein levels were measured by western blot (D) coupled with densitometry analysis (E, n=3 total biological replicates per treatment; mean +/- SEM) is plotted. Pre-miR-29 and -Neg1 serve as negative controls, and beta-actin or GAPDH levels were used for normalization. P-values were determined using unpaired two-tailed t-tests; n.s. denotes not significant (i.e. p>0.05).

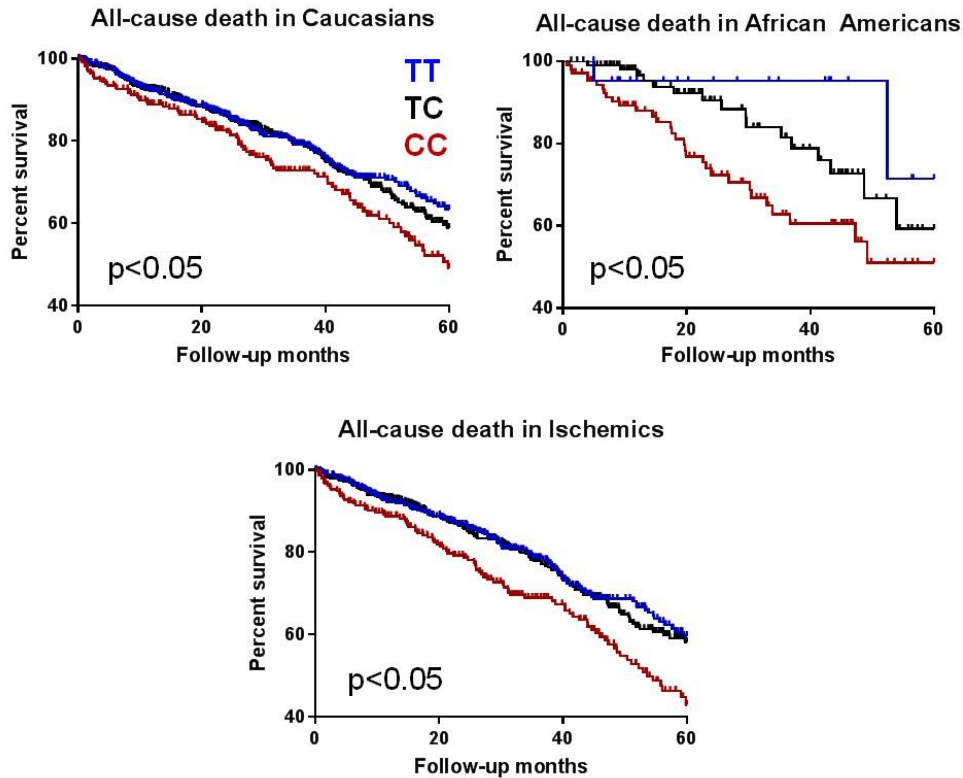
Supplemental Figure 5



PITA parameter	Human	Rat	Effect interpretation
dG hybridization energy	-23.9	-22.5	Rat mRNA is not bound as strongly by miR-24
dG to open mRNA	-10.0	-10.5	miR-24 site in rat SCN5A is not as easily accessed
ddG (open and bind)	-13.8	-12.0	In sum, rat is a worse substrate for miR-24 binding

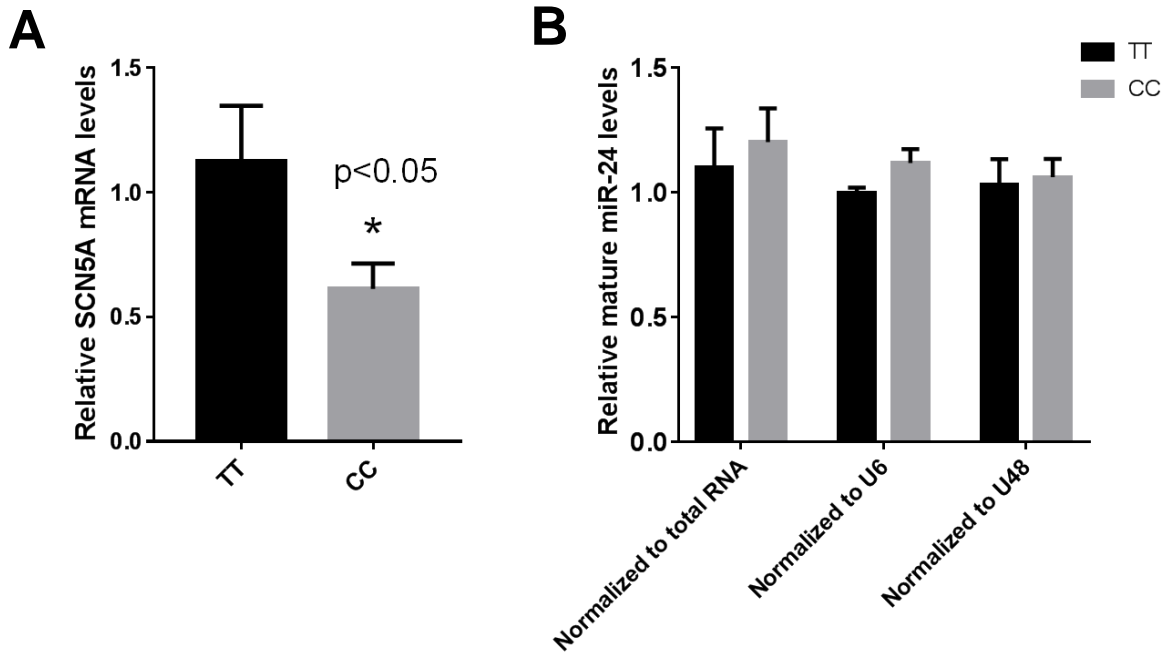
Supplemental Figure 5. Comparison of predictive miR-24 targeting capacity on human versus rat *SCN5A* mRNAs. Top, schematics showing miR-24 hybridization to the target site of interest in both human and rat *SCN5A* mRNAs. Red-highlighted nucleotide differences in rat (versus human) *SCN5A* mRNA sequence cause destabilizing G:U wobble base pairing, which downgrades the seed-type to a 7m8 (compared to stronger 8mer in human), and further weakens compensatory binding outside of the seed region. Bottom, table summarizing PITA output data derived from analyzing local human and rat *SCN5A* mRNA sequences (~400 nucleotides centered on the seed).

Supplemental Figure 6



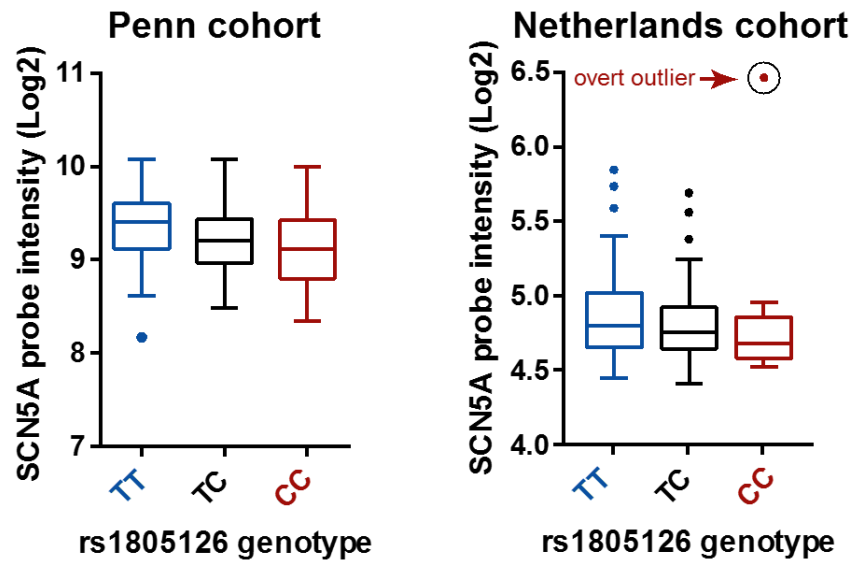
Supplemental Figure 6. Association of rs1805126 genotype with all-cause death in heart failure patient sub-groups. Sub-group analyses were performed to assess if whole-cohort analyses might be confounded by other variables that may influence heart failure outcomes (e.g. racial disparities or etiology; subjects with ischemic, versus idiopathic, cardiomyopathy generally have higher mortality risk). Kaplan-Meier curves for overall survival rates from all-cause death show that, in each of the indicated sub-groups, homozygous CC individuals had significantly poorer survival outcomes relative to the other genotypes (i.e. T allele carriers). P-values were obtained using log-rank test. Cohort sizes (TT, TC and CC, respectively) are as follows: Caucasians (495, 502, 230), African Americans (26, 110, 115), and ischemics (381, 447, 235).

Supplemental Figure 7

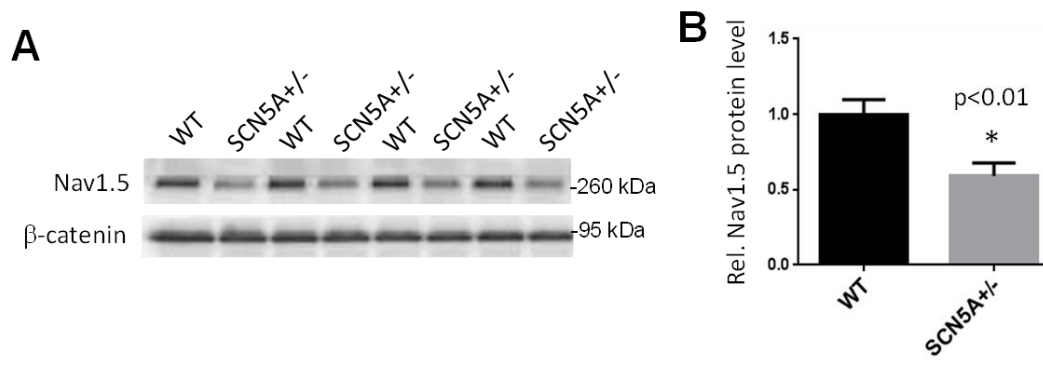


Supplemental Figure 7. QPCR evaluation of *SCN5A* mRNA and miR-24 levels in non-failing human cardiac tissues used for Figure 4A,B. Non-failing human cardiac tissues samples (information in Supplemental Table 2) were evaluated by QPCR to compare *SCN5A* (A) and miR-24 (B) expression levels in TT (n=7) and CC (n=9) sub-groups based on rs1805126 genotype. *SCN5A* expression was normalized to GAPDH mRNA, and miR-24 was normalized by various means, indicated in the plot. The CC group showed significantly less *SCN5A* expression (p<0.05; unpaired two-tailed t-test), and no significant differences were observed for miR-24 levels.

Supplemental Figure 8



Supplemental Figure 8. Association of rs1805126 genotype with *SCN5A* mRNA levels in human hearts. Re-analysis of available genome-wide human cardiac eQTL data from non-failing hearts reveals that CC samples express less *SCN5A* mRNA, compared to TT samples; cohorts from UPenn (left) and Netherlands (right). Normalized microarray probe intensity (Log2) is plotted. These data are an extension of **Figure 4C** to include to the TC group, which shows intermediate expression relative to homozygotes. For Penn, samples numbers are as follows: TT=54, TC=60, CC=22, and for Netherlands: TT=59, TC=55, CC=11. Tukey whiskers are plotted. All data points were included in statistical analyses except for the only overt outlier (circled) flagged by ROUT (definitive stringency, $Q=0.1\%$).

Supplemental Figure 9

Supplemental Figure 9. Cardiac Nav1.5 expression levels in SCN5A heterozygous knockout mice. (A) Western blot was performed on cardiac tissue lysates harvested from 7-8 month-old SCN5A heterozygous knockout (SCN5A^{+/-}) and wild-type littermate mice (n=4 each), and densitometry analysis was used to quantify Nav1.5 expression, normalized to beta-catenin loading control (B). P-value was determined by unpaired two-tailed t-test.