

Supplementary Information for

Homozygous *NLRP1* gain-of-function mutation in siblings with a syndromic form of recurrent respiratory papillomatosis

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Supplementary Case Reports
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SUPPLEMENTARY CASE REPORTS

P1, 9 years old at time of manuscript preparation, was born at term after an uneventful pregnancy. Until the age of 5, his weight and length growth were below 25th percentile; however after age of 5, growth has been closer to 75th percentile. He has mild delayed psychomotor development. Hoarseness and recurrent laryngitis developed at age 2 years, and direct laryngoscopy revealed papillomas on the glottis and supraglottis. He required 10 surgical procedures over the next year. From age 5-9, he had had 30 laser ablations for recurrent laryngeal papillomatosis. P1 developed mild dermatologic abnormalities shortly after birth including keratosis pilaris on the legs and arms since birth, atrophoderma vermiculata on the cheeks, and warts on hands and feet. Additionally he has Legg-Calvé Perthes of the right hip, and cow milk allergy. At the age of 4 years old, he presented acute osteomyelitis of the left talus that required intravenous antibiotics. HIV testing was negative.

Immunologic workup:

- Normal WBC differentiation, normal B and T cell subsets; increased memory CD4 and CD8 T cells
 - CD3+/CD4+: CD45RO+ (memory): 48% CD45RA+ (naïve): 46%
 - CD3+/CD8+: CD45RO+ (memory): 44% , CD45RA+ (naïve): 58%
- Normal lymphoproliferation against PHA, mild against Candida and tetanus.
- Normal total IgG, IgG subclasses, normal IgM, IgA, IgE (200- 300 kU/IL).
- NK cell cytotoxicity: mildly decreased CD107a and IFN γ expression after stimulation, normal NK cell killing

P2, 5 years old at time of manuscript preparation, was born at term after an uneventful pregnancy. He had ongoing weight and length growth stagnation (below 3rd percentile until the age of 2 years), and currently weight and length are at the 3rd percentile. Psychomotor development was also delayed. P2 developed hoarseness shortly after birth. Laryngoscopy revealed papillomas on the larynx, less severe than P1. He required 2-3 laser ablations of these papillomas each year until last year. Shortly after birth he developed skin abnormalities similar to P1 including Keratosis Pilaris on the legs and arms and atrophoderma vermiculata on the cheeks, and multiple hyperpigmented lesions on the buttocks. Additionally he has been noted to have a high palate, and has bilateral knee flexion contractures without evidence of any joint inflammation. HIV testing was negative.

Immunologic workup:

- Normal WBC differentiation, normal B and T cell subset and maturation
- Lymphoproliferation: normal against PHA, mild against Candida, absent against tetanus.
- Normal total IgG, IgG subclasses, normal IgM en IgA, IgE (229 kU/IL),
- Normal Polysaccharide antibody response (after Pneumo23® vaccine), normal immunity against HSV, Tetanus
- NK cell cytotoxicity: mildly decreased CD107a and IFN γ expression after stimulation, normal NK cell killing

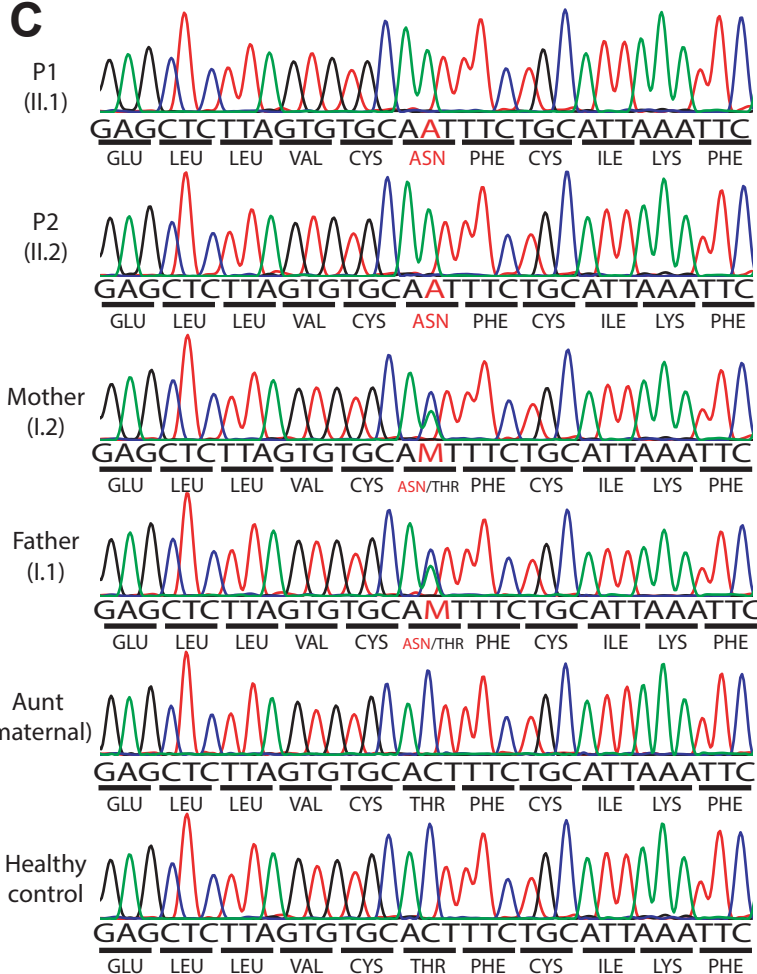
A

| | Number of annotated variants | |
|---|------------------------------|---------|
| | P1 | P2 |
| Total | 163,409 | 164,543 |
| Homozygous | 68,962 | 69,959 |
| Non-synonymous, essential splicing, or indel | 4,721 | 4,624 |
| MAF < 0.01 (1%) in ExAC, 1000KG, ESP | 79 | 70 |
| Shared by P1 and P2 and heterozygous in parents | 11 | |
| Remove pipeline artifacts (inhouse MAF >0.01) | 5 | |

B

| Chr | pos | Ref Nt | Alt Nt | Gene | AA change | ExAC MAF (het/hom) | Sift | Polyphen (2HVAR) | CADD (Phred_V1.3) | Gene function or known clinical associations |
|-----|-----------|--------|--------|--------|--------------|--------------------|------|------------------|-------------------|---|
| 7 | 150644044 | G | A | KCNH2 | p.Pro1084Leu | 0.00001711 (2/0) | D | P | 23.1 | Long QT syndrome 2, Short QT syndrome 1 (OMIM: 613688, 609620) |
| 16 | 57931428 | C | T | CNGB1 | p.Gly1039Arg | 0.003250 (390/1) | D | D | 34 | Retinitis pigmentosa 45 (OMIM: 613767) |
| 17 | 5461752 | G | T | NLRP1 | p.Thr755Asn | private | D | D | 23.1 | Autoinflammation with arthritis and dyskeratosis, Multiple self-healing palmoplantar carcinoma (OMIM: 617388, 615225) |
| 19 | 57867517 | T | C | ZNF304 | p.Cys94Arg | 0.005495 (667/6) | D | B | 13.83 | C2H2-type zinc-finger, transcriptional regulator of B1 integrin |
| 19 | 58420013 | C | T | ZNF417 | p.Glu545Lys | private | D | B | 24.5 | unknown |

C



D

| | Number of annotated variants | |
|--|------------------------------|---------|
| | P1 | P2 |
| Total | 163,409 | 164,543 |
| X chromosome (hemizygous) | 1,905 | 1,937 |
| Non-synonymous, essential splicing, or indel | 156 | 150 |
| MAF < 0.0001 (0.01%) in ExAC, 1000KG, ESP | 1 | 8 |
| Shared by P1 and P2 and heterozygous in mother | 0 | |
| Remove pipeline artifacts (inhouse MAF >0.01) | 0 | |

Figure S1. Filtering of annotated variants after whole exome sequencing. A. Number of variants after each filtering step used for a homozygous recessive genetic model. **B.** Selected details of the 5 variants after filtering as in A. **C.** Sanger sequencing of genomic DNA from selected individuals and control. **D.** Filtering of variants under an X-linked genetic model.

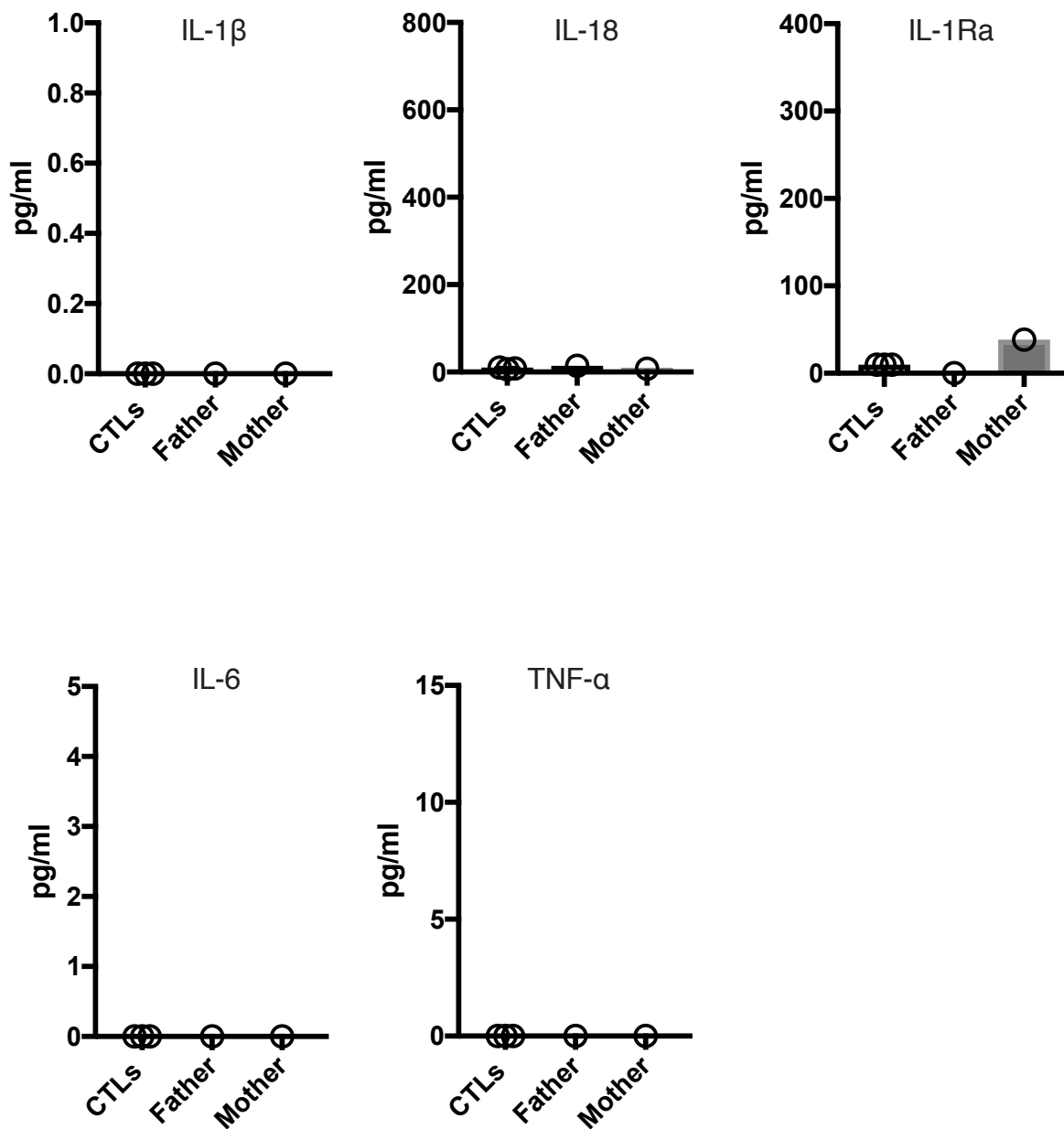


Figure S2. Serum cytokine measurements in heterozygous parents and healthy controls. LUMINEX measurements of serum levels of IL-1 β , IL-18, IL-1Ra, IL-6 and TNF- α from Father (I.1), Mother (I.2) and 3 healthy controls. Results are representative of 2 independent experiments.

Cloning

| | |
|---------|--------------------------------------|
| NLRP1.F | atggctggcggagcctggggccg |
| NLRP1.R | tcagctgctgagtggcaggagtcaccttttgctgcc |

Subcloning

| | |
|-------------------------|---|
| NLRP1.3'.XhoI.pcDNA3.1 | GTTTAAACGGGCCCCTCTAGActcgagtcagctgctgagtggcagg |
| NLRP1.5'.EcoRI.pcDNA3.1 | TCCACTAGTCCAGTGTGGTGGAAATTCGCCACCatggctggcggagcctgg |
| NLRP1.T755N join F | tcttagtgtgcaAttctgcattaa |
| NLRP1.T755N join R | ttaatgcagaaaTgacacactaaga |
| NLRP1.WT755 join F | tcttagtgtgactttctgcattaa |
| NLRP1.WT755. join R | ttaatgcagaaagtgcacactaaga |

Sanger sequencing

| | |
|--------------|-------------------------|
| NLRP1.370.F | ccaccgagtgtaatgc |
| NLRP1.370.R | caaaacccttctctgagc |
| NLRP1.740.F | cacaggcgacacc |
| NLRP1.740.R | ggccatgtggaacagag |
| NLRP1.1110.F | gaccgctccagcatg |
| NLRP1.1110.R | ctcagcgagactcaccac |
| NLRP1.1480.F | ctctgagtccagcaggaag |
| NLRP1.1480.R | gaccaacctaaaggctctaattg |
| NLRP1.1850.F | ccttctgaagatgggtattcttc |
| NLRP1.1850.R | gcaaagaactcttgaaacag |
| NLRP1.2220.F | ggaacaaaacgttctgacac |
| NLRP1.2220.R | cactaagagctccatgtctg |
| NLRP1.2590.F | gctgaggactgcaaggac |
| NLRP1.2590.R | gcacattgaagctcaggtc |
| NLRP1.2960.F | ggagcaggagaaacctcag |
| NLRP1.2960.R | gtatccaggccctcagtag |
| NLRP1.3330.F | gctactgaggtagttgacaaag |
| NLRP1.3330.R | gtggggccagcgtag |
| NLRP1.3700.F | gatccataatgccctgcg |
| NLRP1.3700.R | gtgacttctcaggatggac |
| NLRP1.4070.F | gtgggaggccttggtg |
| NLRP1.4070.R | gctatgcgggctggag |

Table S1: List of PCR primers used in this study