

1 **Additional data**

2 **Supplementary Data 1**

3 Whole exome sequencing (WES) analysis was performed on genomic DNA extracted from peripheral blood
4 leukocytes of the affected subject and his parents. Exome capture was carried out using Nextera Rapid
5 Capture Exome Kit V1.2 (Illumina), and the following data analysis was performed using an in-house
6 implemented pipeline which mainly take advantage of the BWA reads aligner (V.0.7.12, Li and Durbin, 2009)
7 and Genome Analysis Toolkit (GATK V.3.7) (McKenna et al., 2010). GATK tools were used for realignment of
8 sequences encompassing INDELS and for base quality recalibration. SNVs and small INDELS were identified
9 by means of the GATK's HaplotypeCaller used in gVCF mode, followed by family-level joint genotyping and
10 phasing. Finally, they were filtered by quality using a hard-filters strategy according to GATK's latest best
11 practices. High-quality variants were then filtered against public databases (dbSNP150 and gnomAD 2.0) to
12 retain private and clinically associated variants, and annotated variants with unknown frequency or having
13 MAF <0.1%, and occurring with a frequency <1% in an *in-house* database including frequency data from
14 approximately 1600 population-matched WES. SnpEff toolbox (V.4.3) was used to predict the functional
15 impact of variants, which were filtered to retain only those located in exons with any effect on the coding
16 sequence, and splice site regions (variants located from -3 to +8 with respect to an exon-intron junction).
17 Functional annotation of variants was performed using SnpEff V.4.3 and dbNSFP V.2.9 (Cingolani et al., 2012;
18 Liu et al., 2013; Kircher et al., 2014; Dong et al., 2015). WES statistics are reported in Supplementary Table 1.
19 Functional impact of variants was analyzed by Combined Annotation Dependent Depletion (CADD) V.1.3, M-
20 CAP V.1.0, InterVar V.0.1.7 and MetaDome algorithms (Kircher et al., 2014; Jagadeesh et al., 2016; Li and
21 Wang, 2017; Wiel et al., 2019), to obtain clinical interpretation according to ACMG/AMP 2015 guidelines (Li
22 and Wang, 2017). Data annotation predicted 19,871 high-quality variants having functional impact (*i.e.*, non-
23 synonymous, indels and splice site changes) in the proband. Among them, 589 private and rare changes were
24 retained for further analyses. Variants were prioritized on the basis of the functional relevance of genes,
25 taking into account both dominant and recessive inheritance models.

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28 **References Supplementary Data 1**

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55 **Supplementary Table S1. Whole exome sequencing metrics, statistics and output**

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	OPBG_13-16
Target regions coverage, 2x ¹	96.9%
Target regions coverage, 10x ¹	95.2%
Target regions coverage, 20x ¹	92.2%
Average sequencing depth on target ¹	95x
Number of variants with predicted functional effect	19,871
Novel, clinically associated, and unknown/low frequency variants ²	589
Putative disease genes (autosomal recessive/X-linked inheritance) ³	6 ⁴
Putative disease genes (<i>de novo</i> variants) ³	0

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58 ¹Referred to Nextera Rapid Capture Exome Kit V1.2 (Illumina).

59 ²MAF <0.1% in gnomAD V. 2.0 databases, and frequency <1% in our *in-house* database.

60 ³Filtering retained genes with high-quality and functionally relevant variants by excluding those predicted as
61 benign by CADD (scaled score <15) and M-CAP algorithms or benign/likely benign by interVar.

62 ⁴*APEX2* (c.622T>C, p.Trp208Arg), *MAGEA4* (c.799C>T, p.Pro267Ser), ***KIF7* (c.2675G>A, p.Arg892His)**, *BFAR*

63 (c.188C>A, p.Ala63Glu), ***KIAA0556* (c.3756dupC, p.Arg1253fs*5)**, *OBSCN* (c.5332C>T, p.Gln1778*; c.11362C>A,
64 p.Pro3788Thr).

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