

Supplementary material

Clinical sequencing yield in epilepsy, autism spectrum disorder, and intellectual disability

A systematic review and meta-analysis

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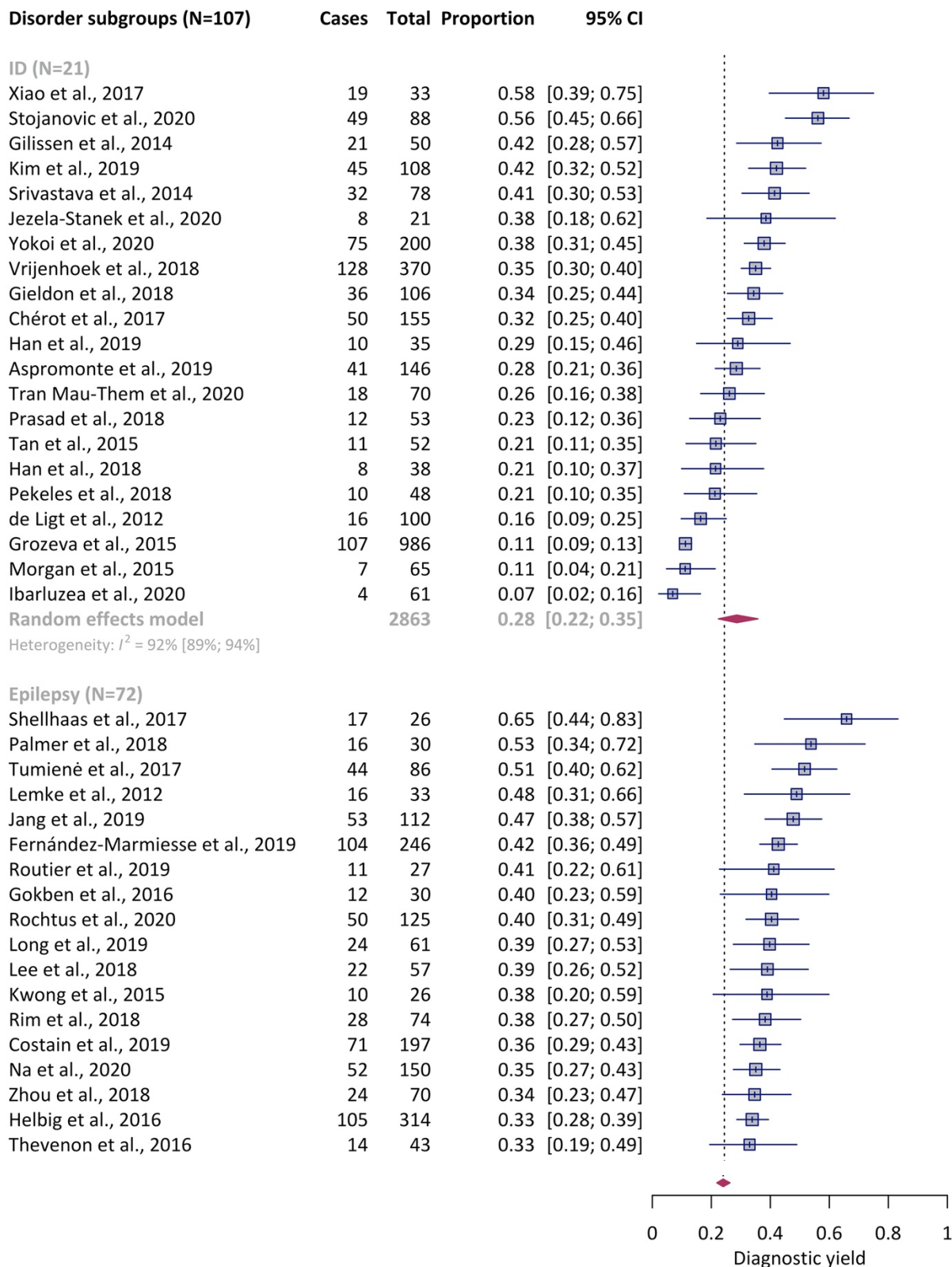
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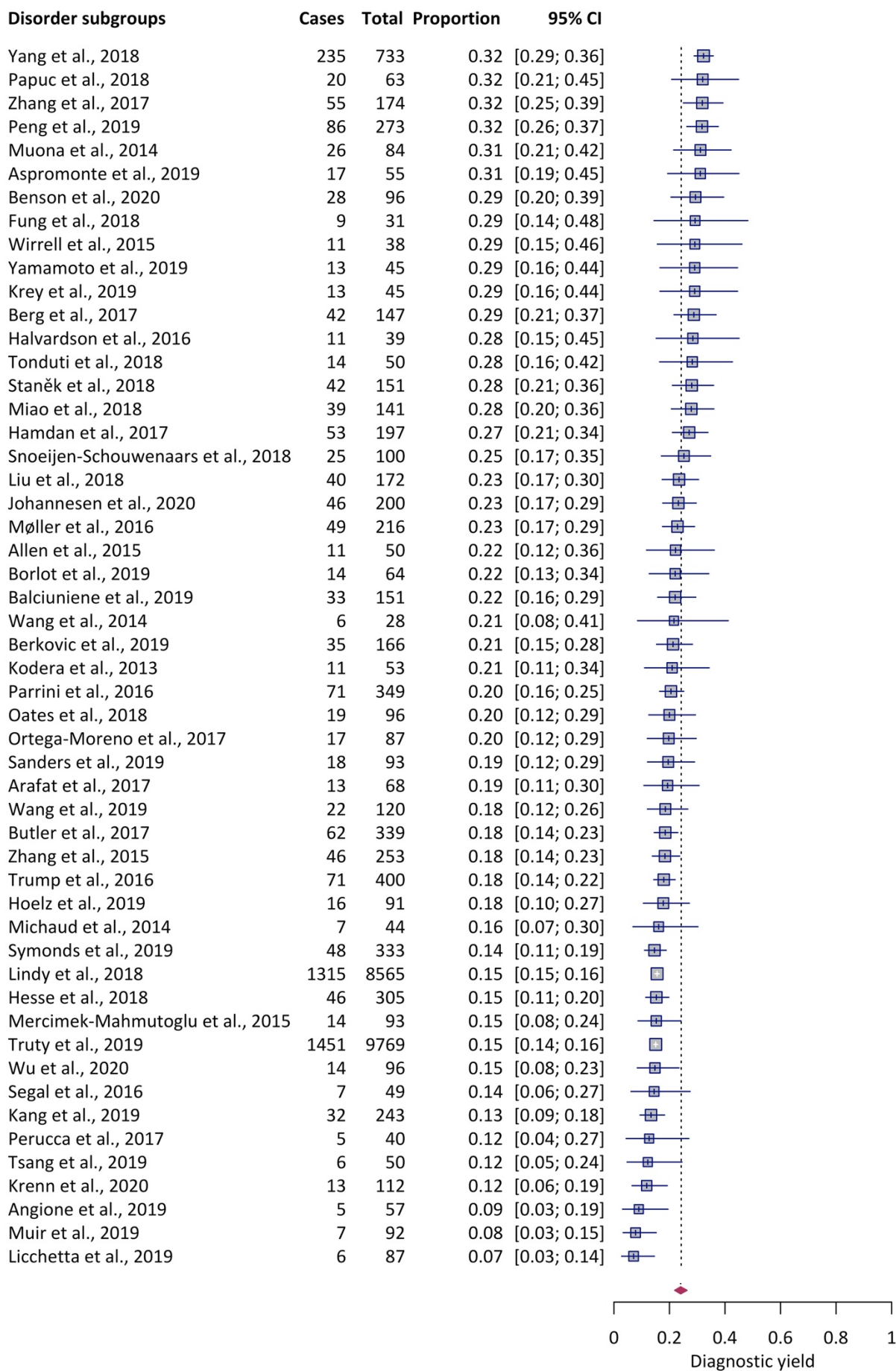
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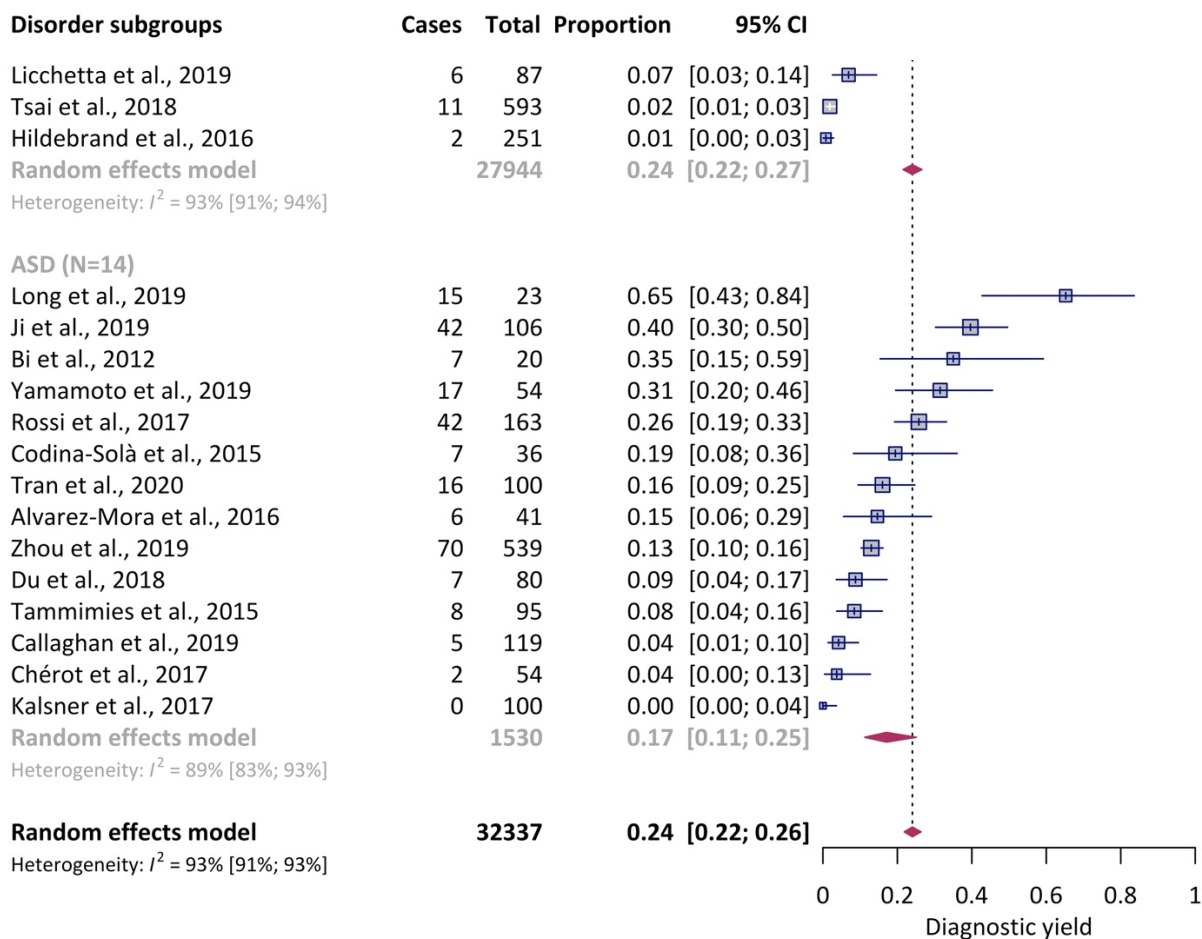
1. Cohorts stratified into subgroups

1.1. By disorder

1.1.1. Figure S1. Meta-analysis of the diagnostic yield by disorder

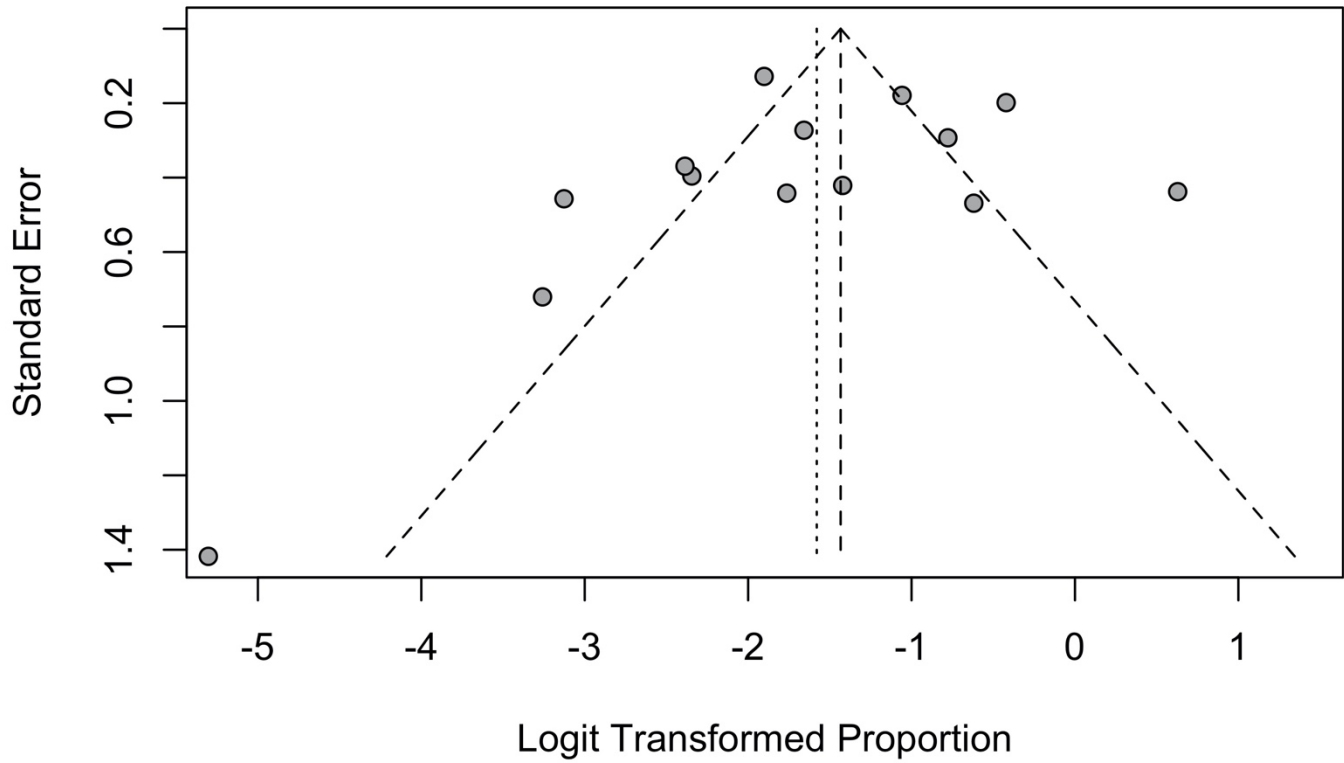






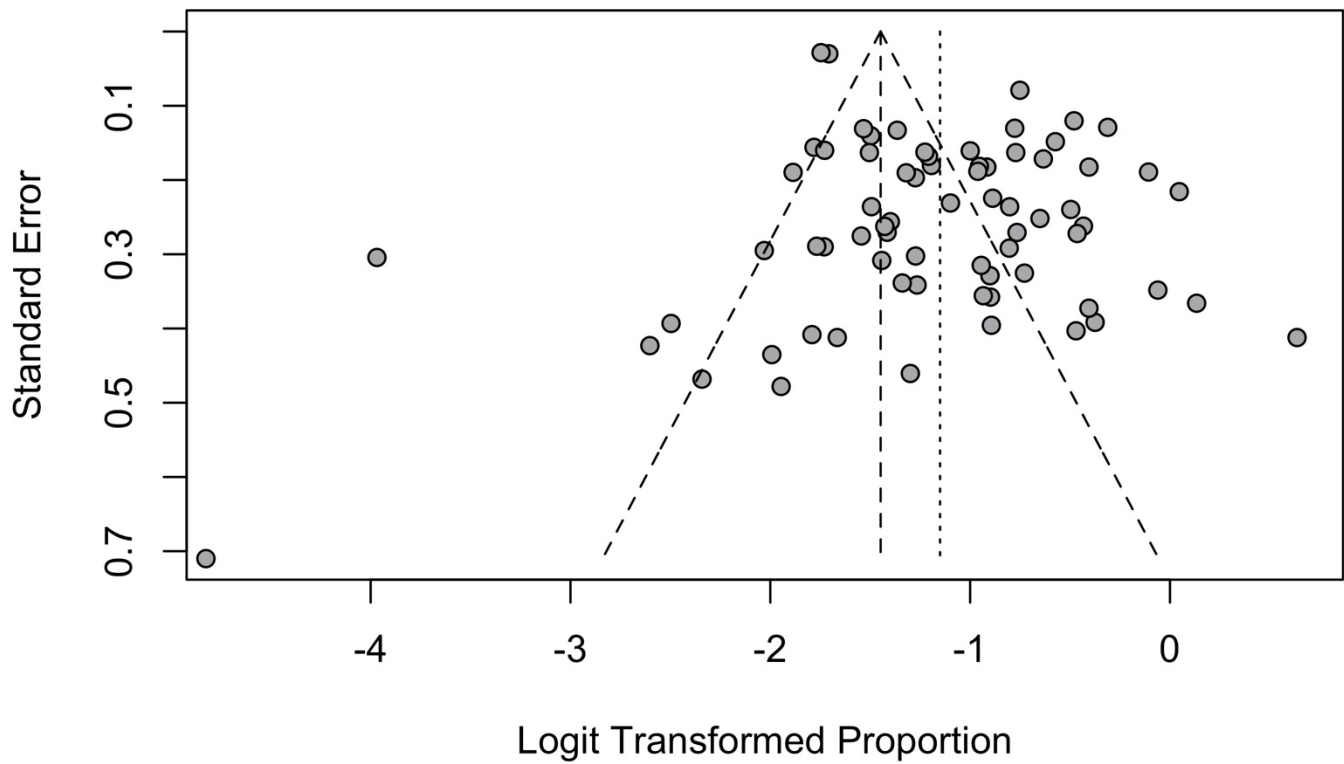
Abbreviations: *CI* = confidence interval, I^2 = estimated proportion of the variance in study estimates that is due to heterogeneity, *Proportion* = fraction of individuals with a positive genetic test, i.e. pathogenic or likely pathogenic variant.

1.1.2. Figure S2. Funnel plot of all ASD studies



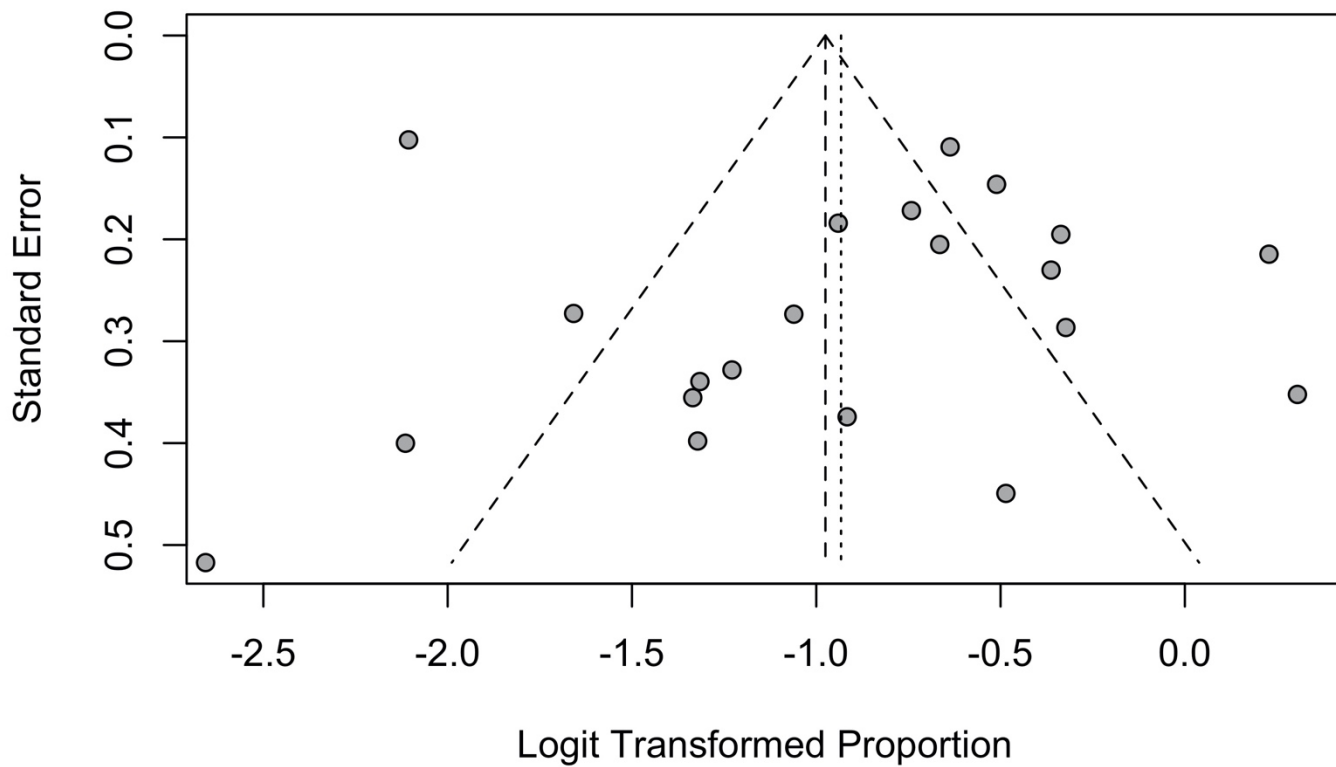
Grey dots = Original studies.

1.1.3. Figure S3. Funnel plot of all epilepsy studies



Grey dots = Original studies.

1.1.4. Figure S4. Funnel plot of all ID studies



Grey dots = Original studies.

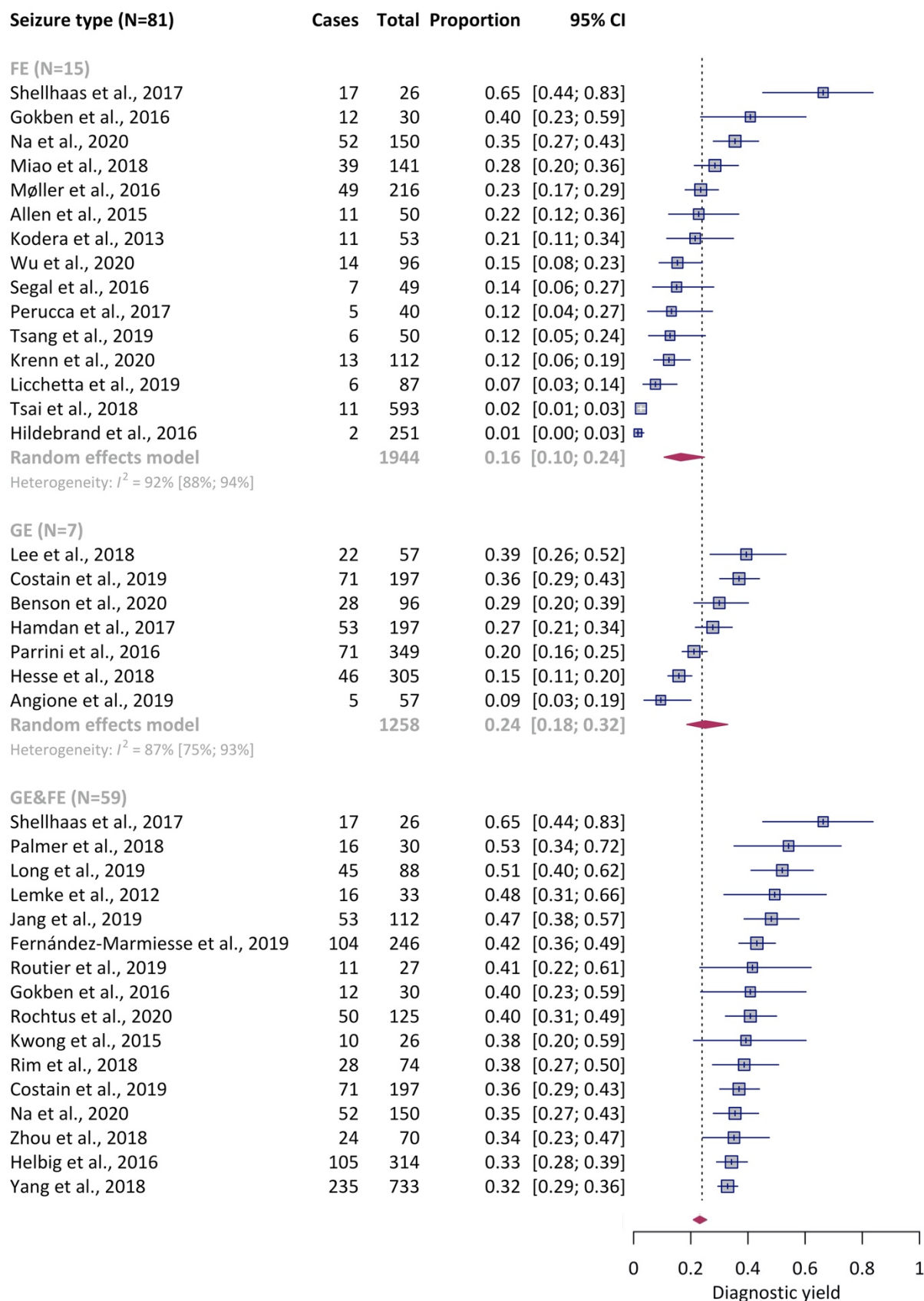
1.1.5. Figure S5. Error bar plot of the diagnostic yield by disorder

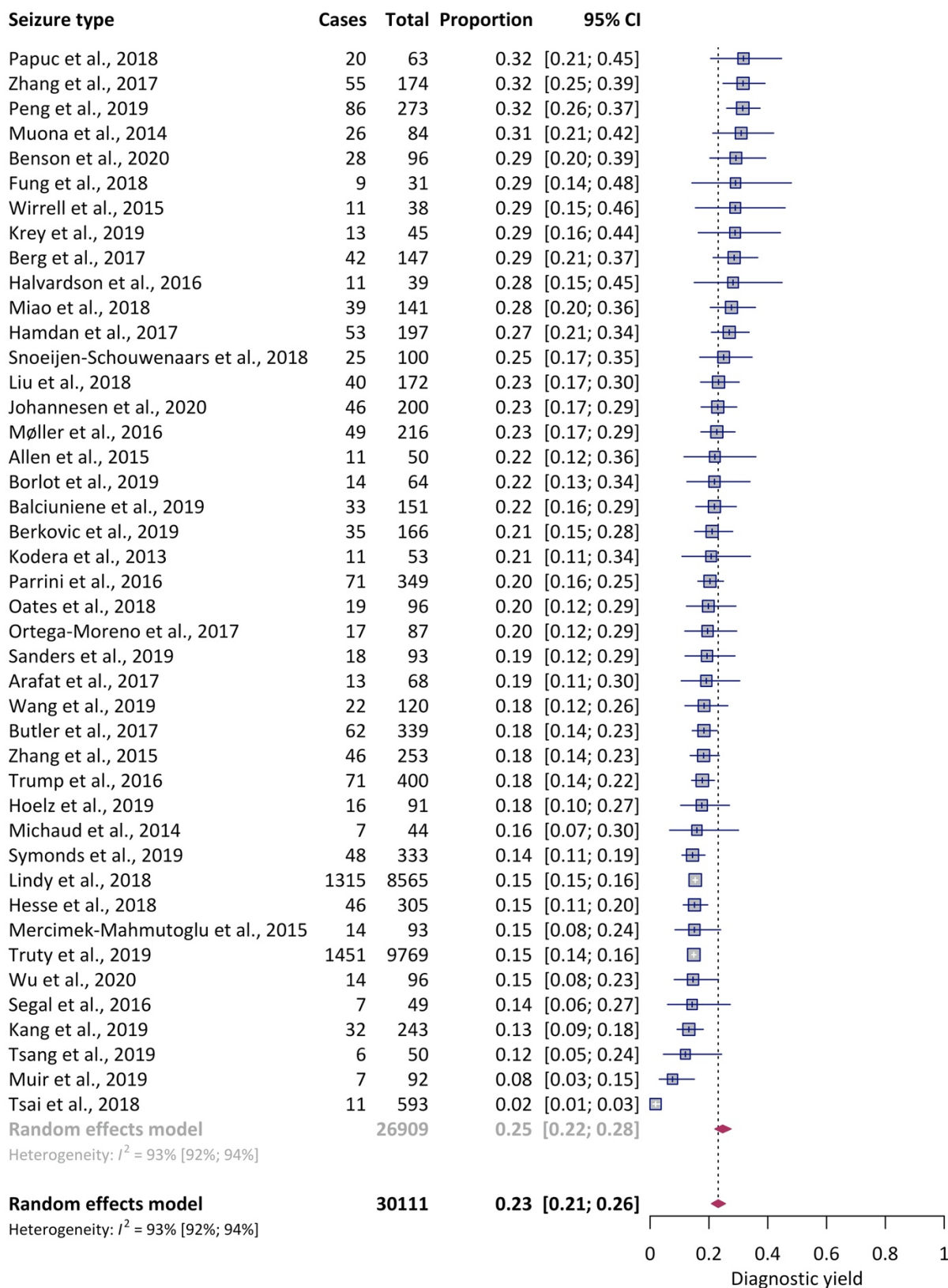


Abbreviations: ASD = autism spectrum disorder, ID = intellectual disability.

1.2. Meta analyses by disorder subtype

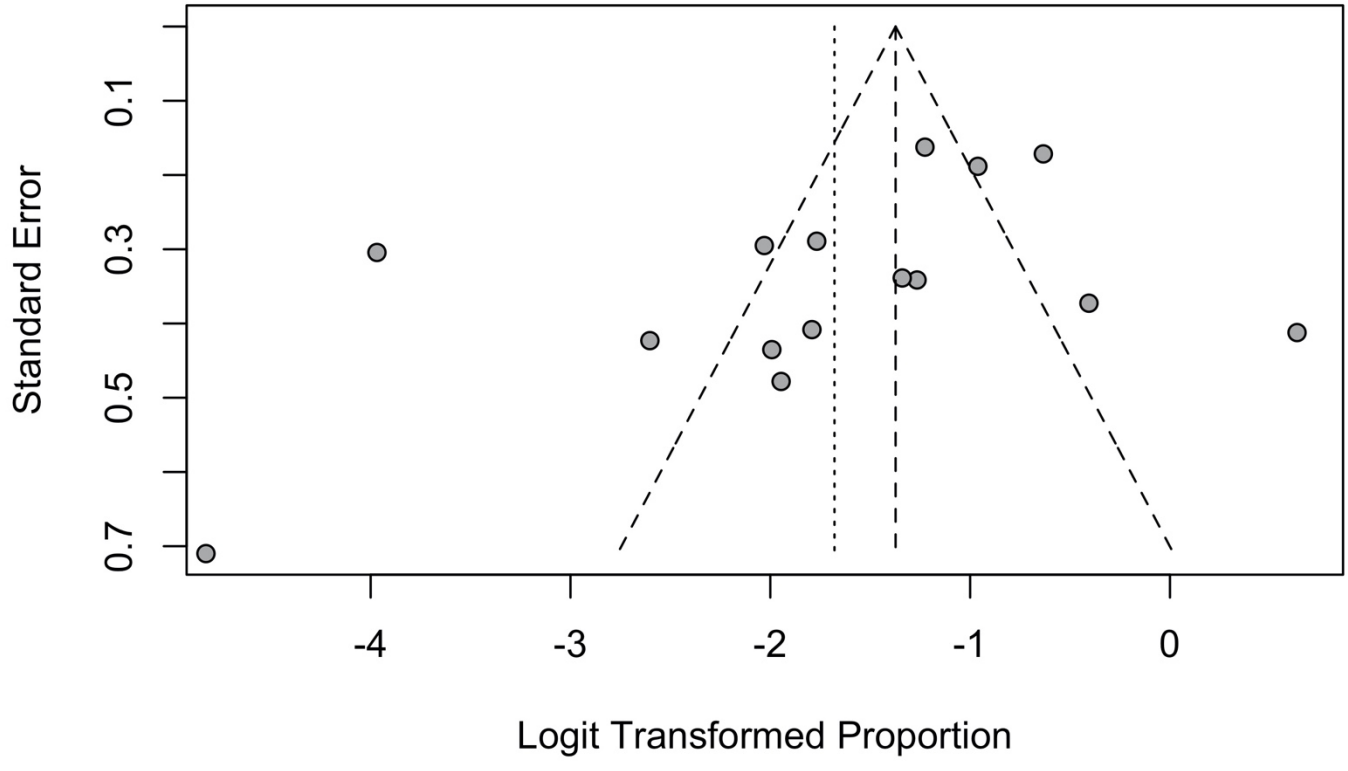
1.2.1. Figure S6. Meta-analysis of the diagnostic yield by seizure type





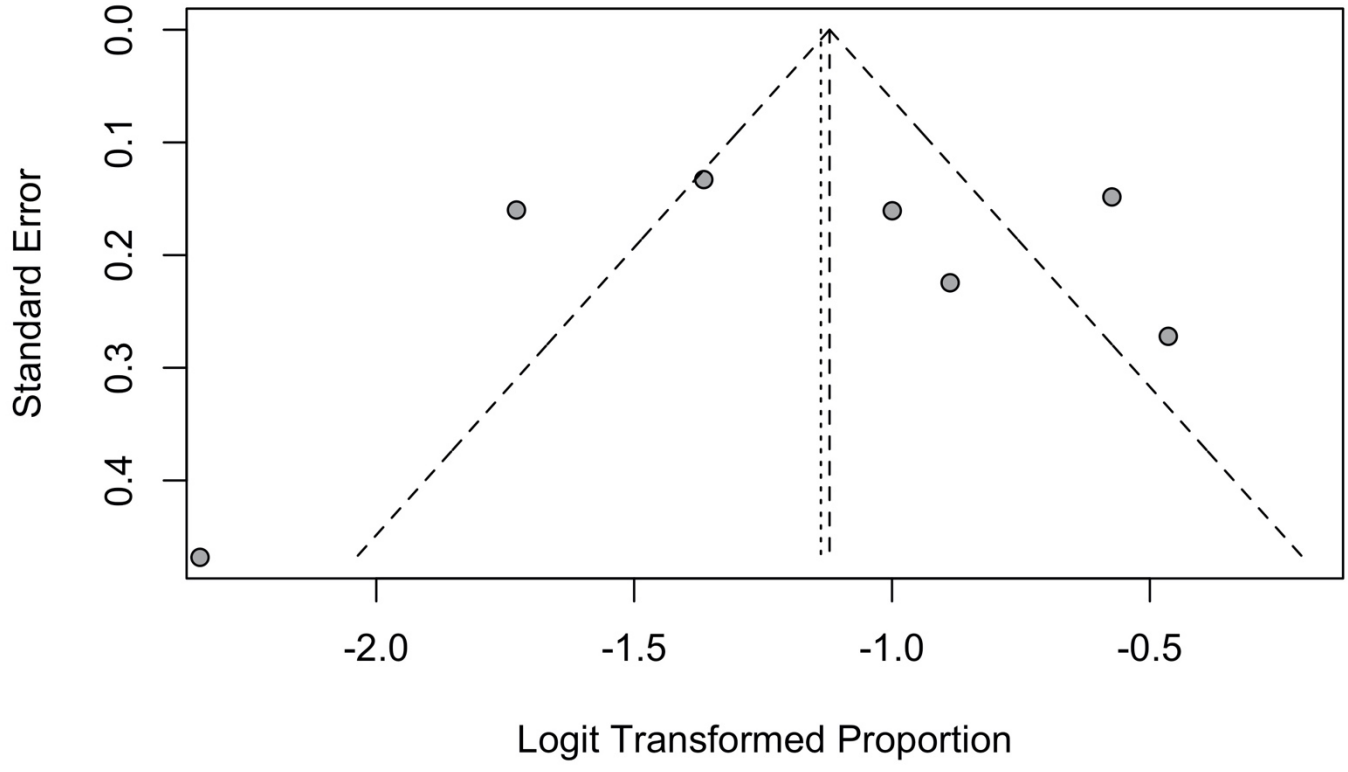
Abbreviations: CI = confidence interval, I^2 = estimated proportion of the variance in study estimates that is due to heterogeneity, Proportion = fraction of individuals with a positive genetic test, i.e. pathogenic or likely pathogenic variant.

1.2.2. Figure S7. Funnel plot of all FE studies



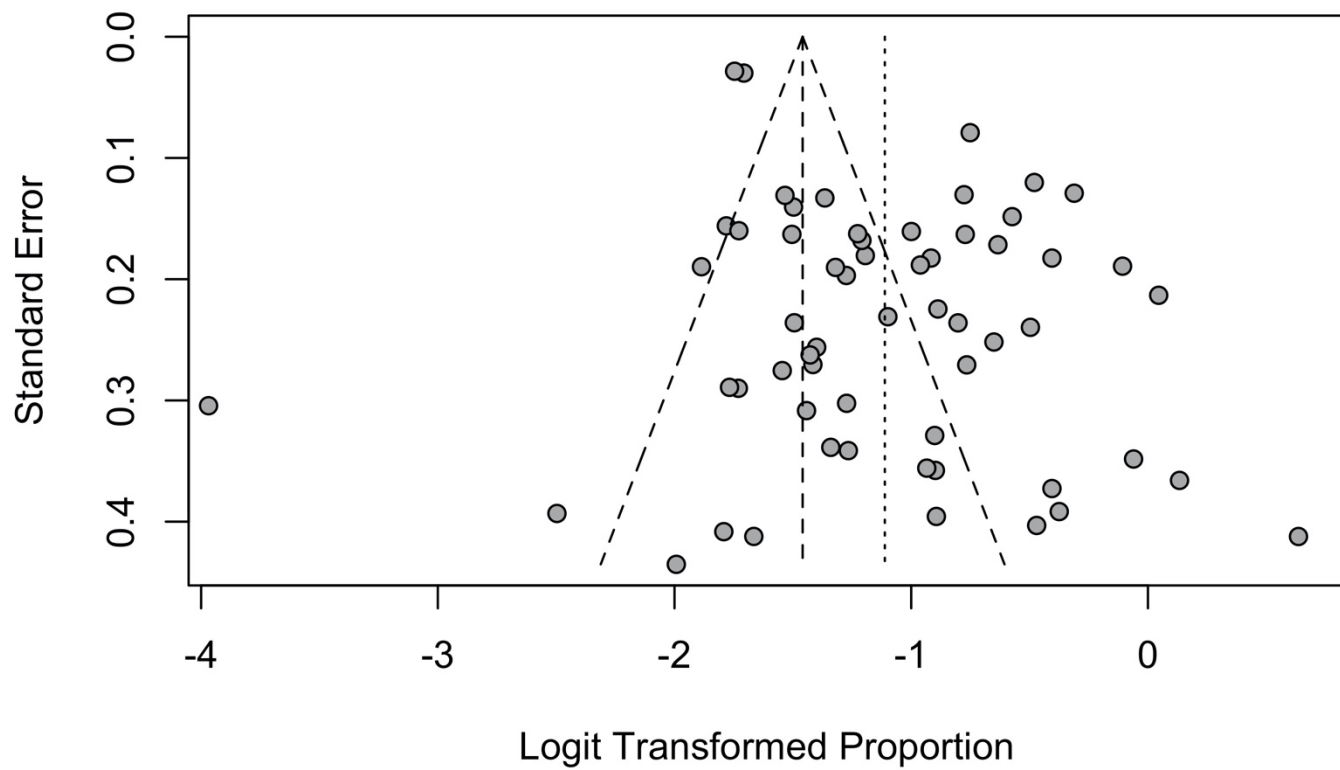
Grey dots = Original studies.

1.2.3. Figure S8. Funnel plot of all GE studies



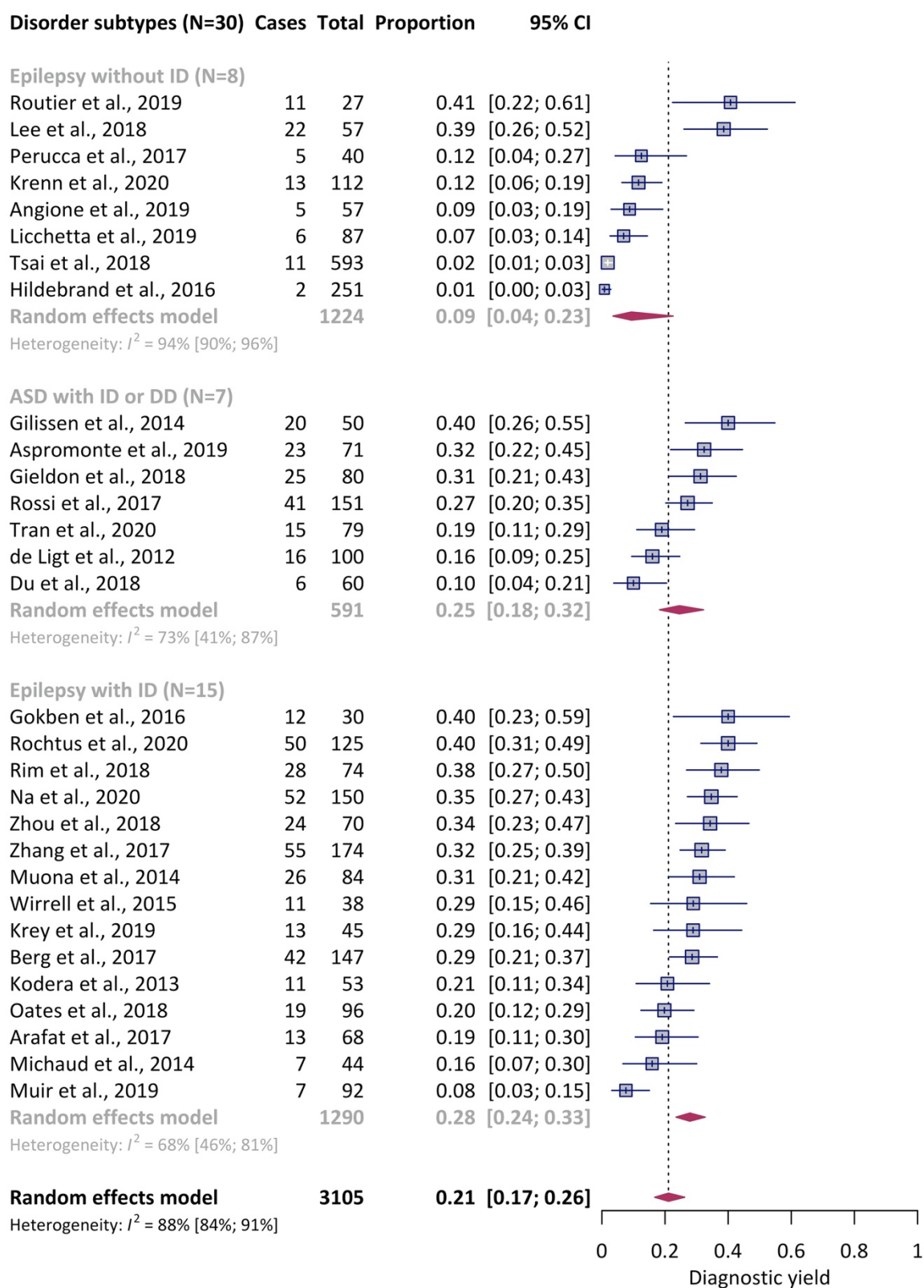
Grey dots = Original studies.

1.2.4. Figure S9. Funnel plot of all GE&FE studies



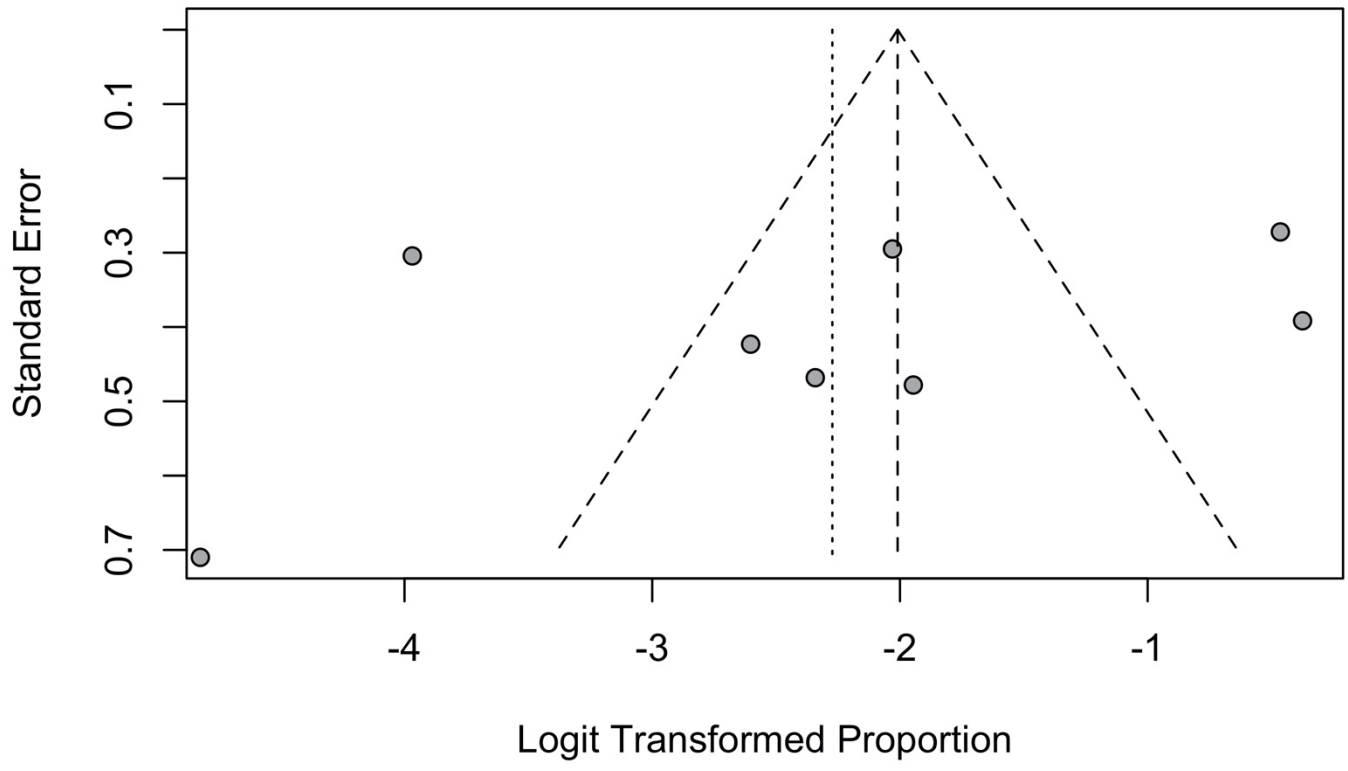
Grey dots = Original studies.

1.2.5. Figure S10. Meta-analysis of the diagnostic yield by disorder subtype



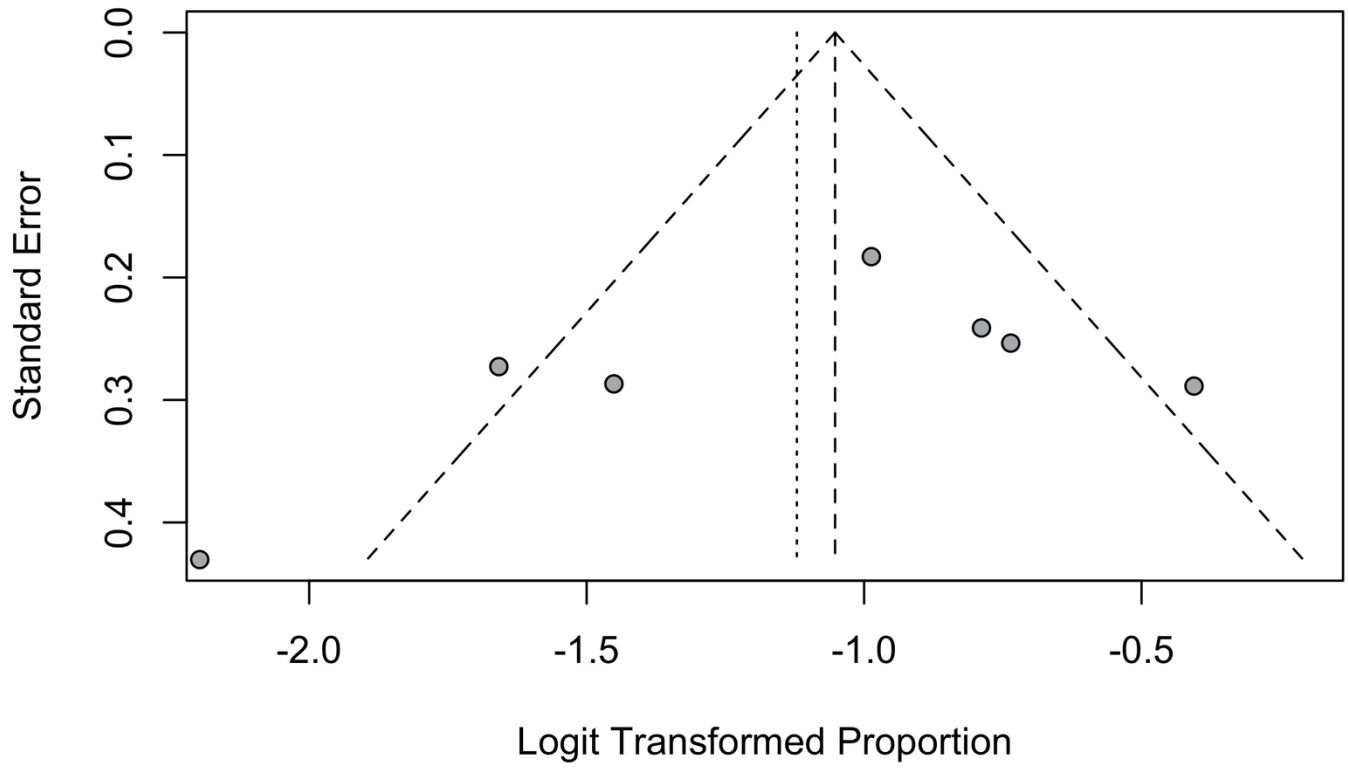
Abbreviations: ID = intellectual disability, CI = confidence interval, I^2 = estimated proportion of the variance in study estimates that is due to heterogeneity, Proportion = fraction of individuals with a positive genetic test, i.e. pathogenic or likely pathogenic variant.

1.2.6. Figure S11. Funnel plot of all epilepsy without ID studies



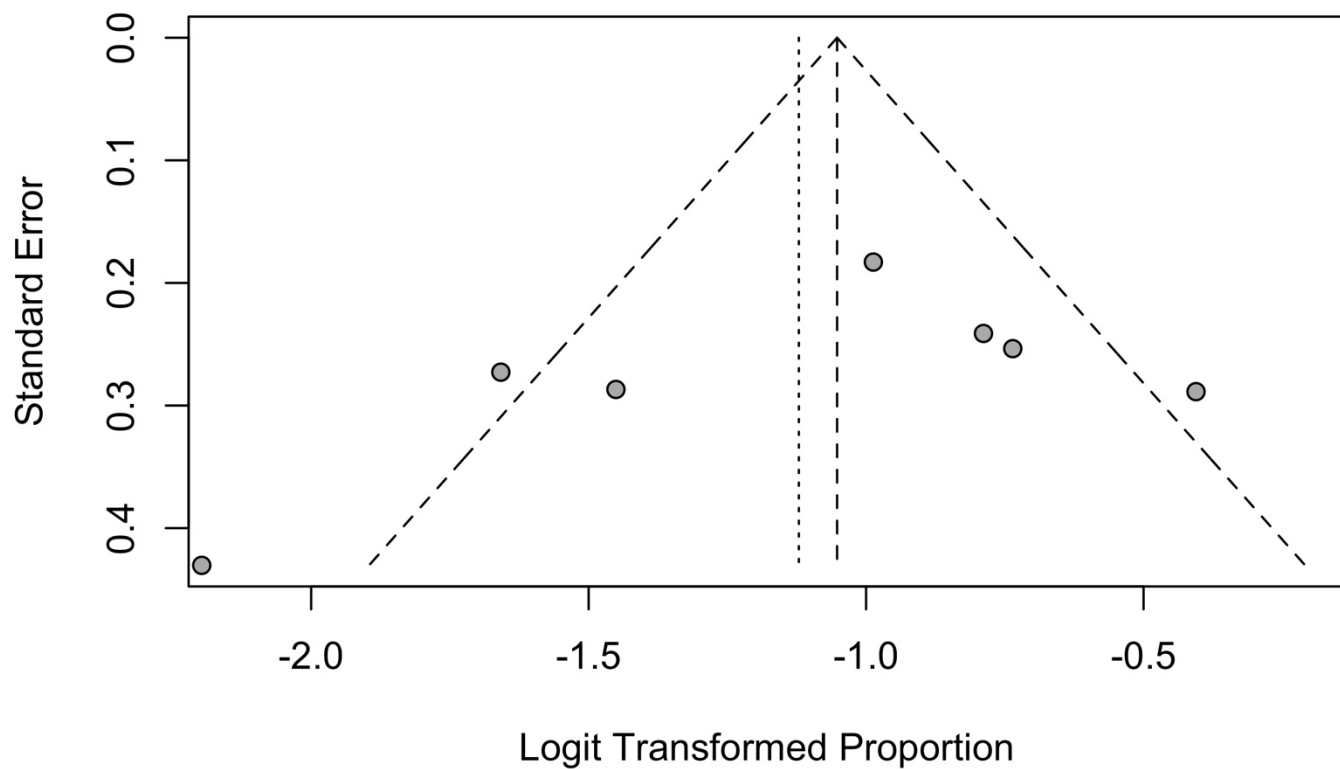
Grey dots = Original studies.

1.2.7. Figure S12. Funnel plot of all ASD with ID or DD studies



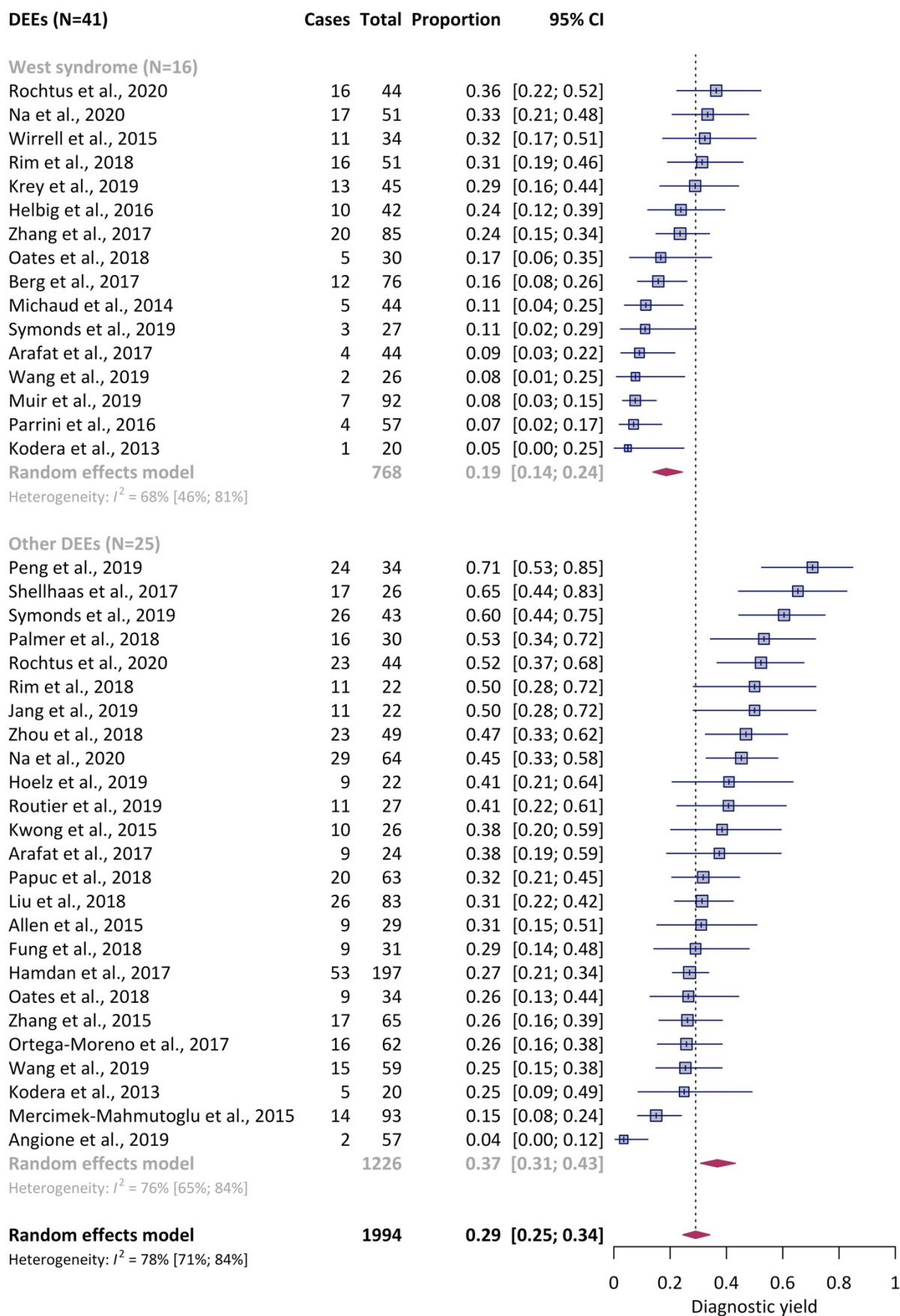
Grey dots = Original studies.

1.2.8. Figure S13. Funnel plot of all epilepsy with ID studies



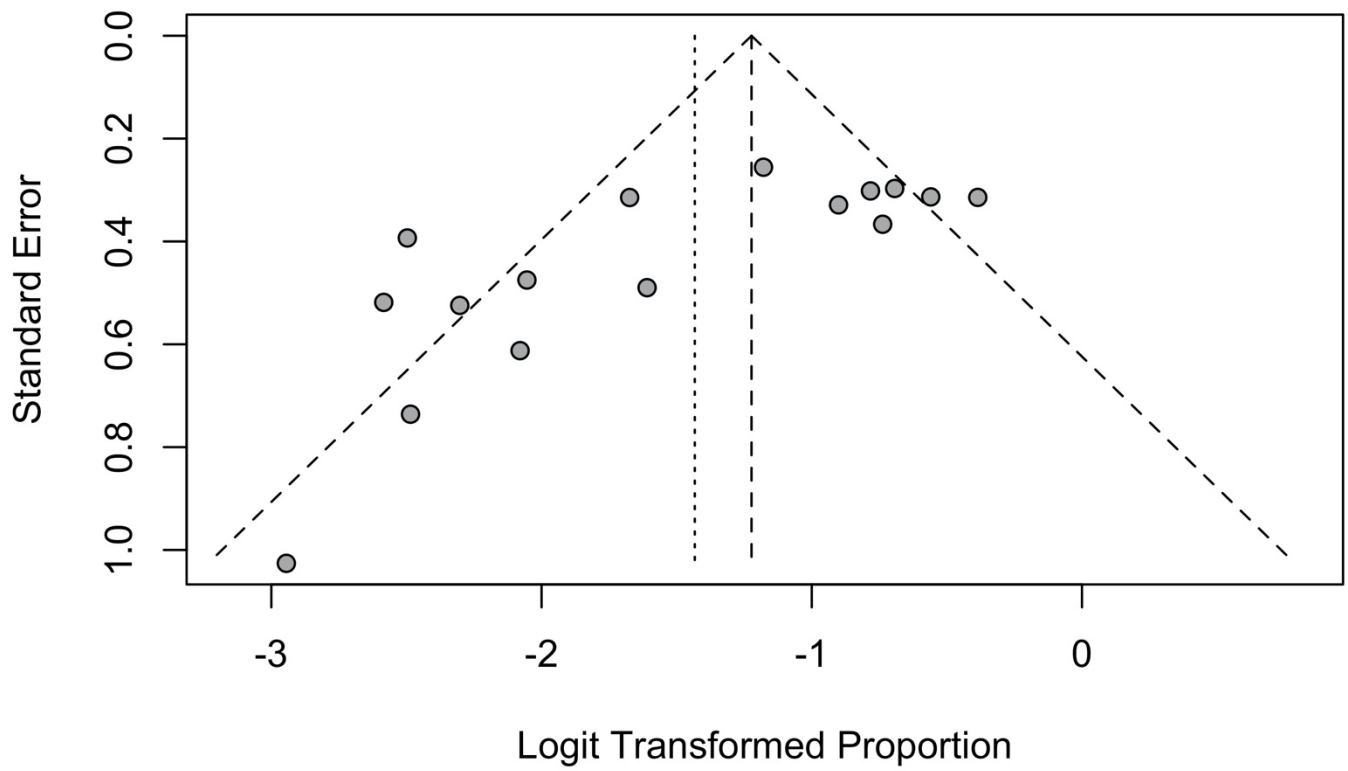
Grey dots = Original studies.

1.2.9. S14. Meta-analysis of the diagnostic yield by DEE



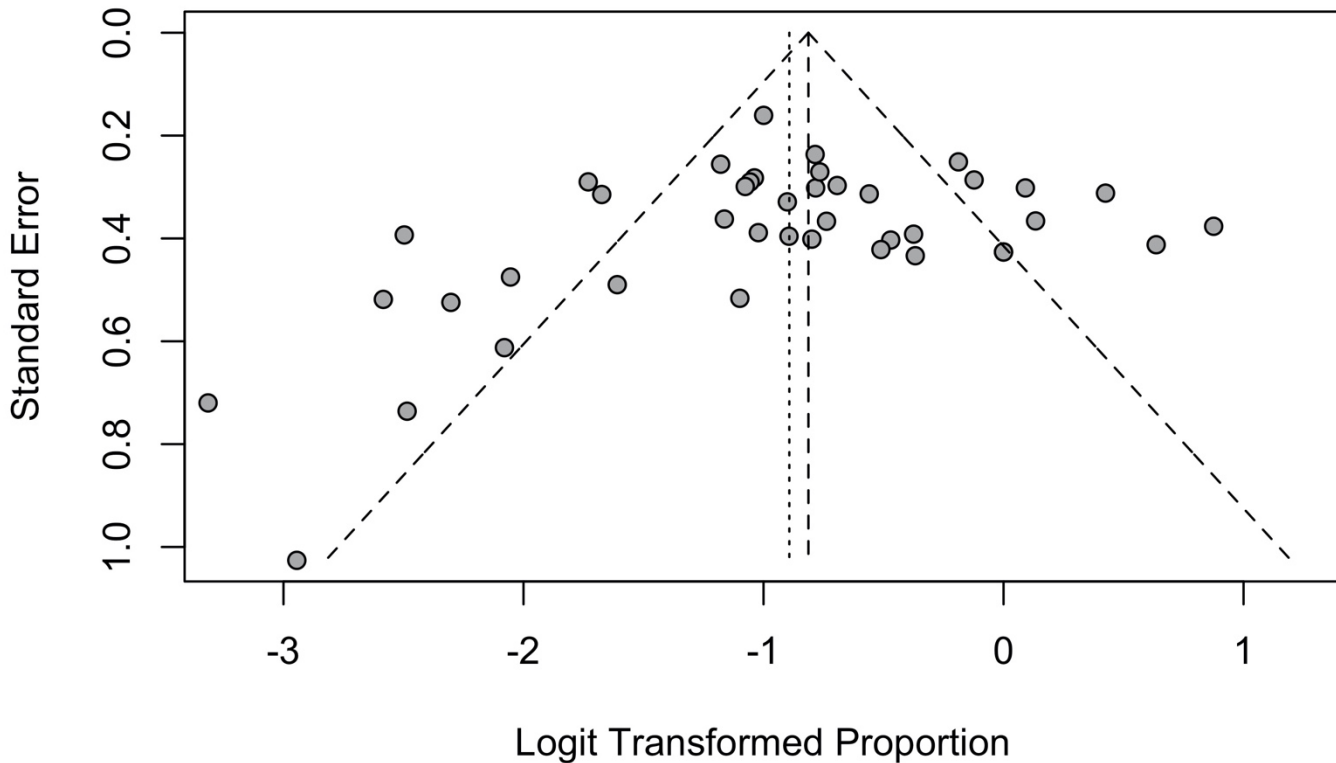
Abbreviations: DEEs = developmental epileptic encephalopathies, CI = confidence interval, I^2 = estimated proportion of the variance in study estimates that is due to heterogeneity, Proportion = fraction of individuals with a positive genetic test, i.e. pathogenic or likely pathogenic variant.

1.2.10. Figure S15. Funnel plot of all WS studies



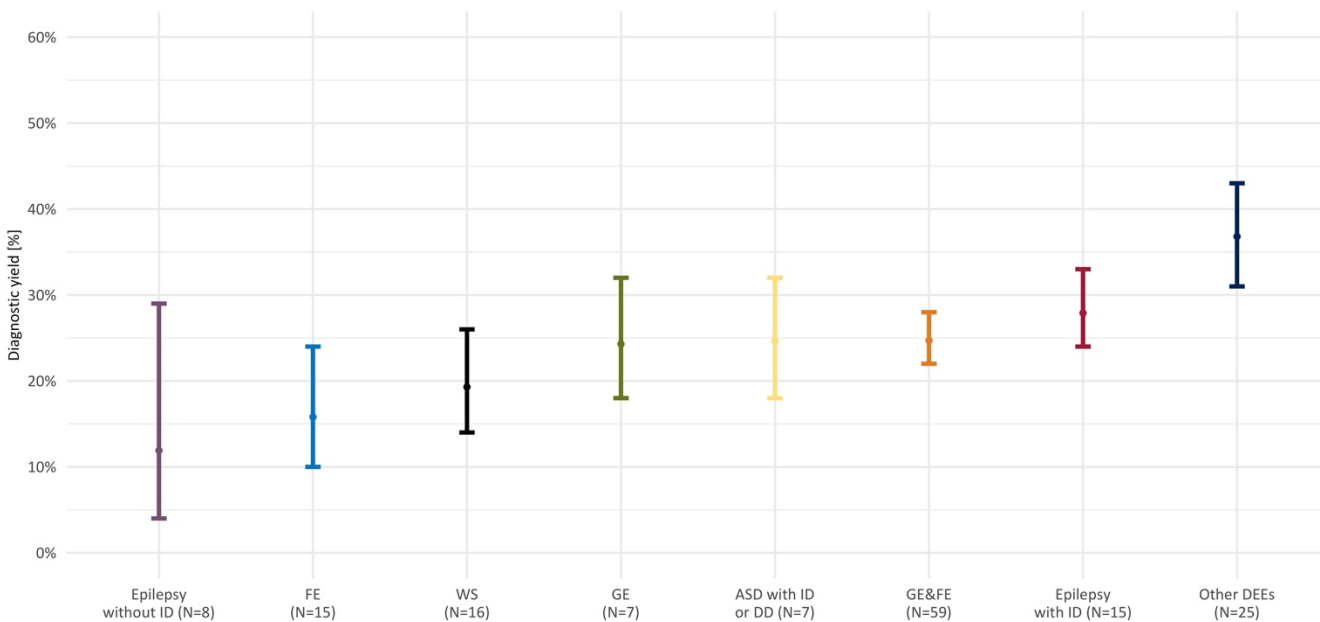
Grey dots = Original studies.

1.2.11. Figure S16. Funnel plot of all other DEE studies



Grey dots = Original studies.

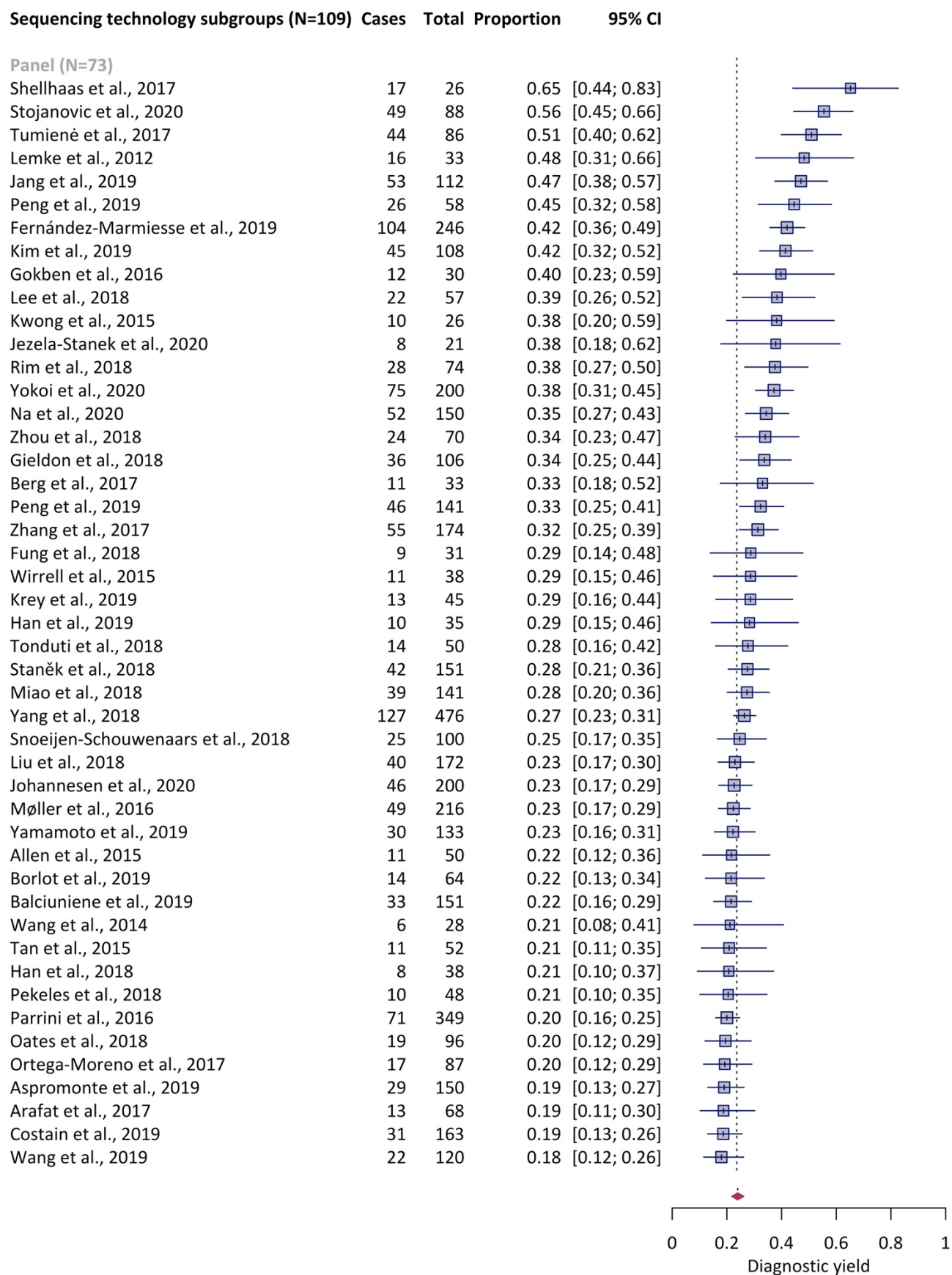
1.2.12. Figure S17. Error bar plot by subtype

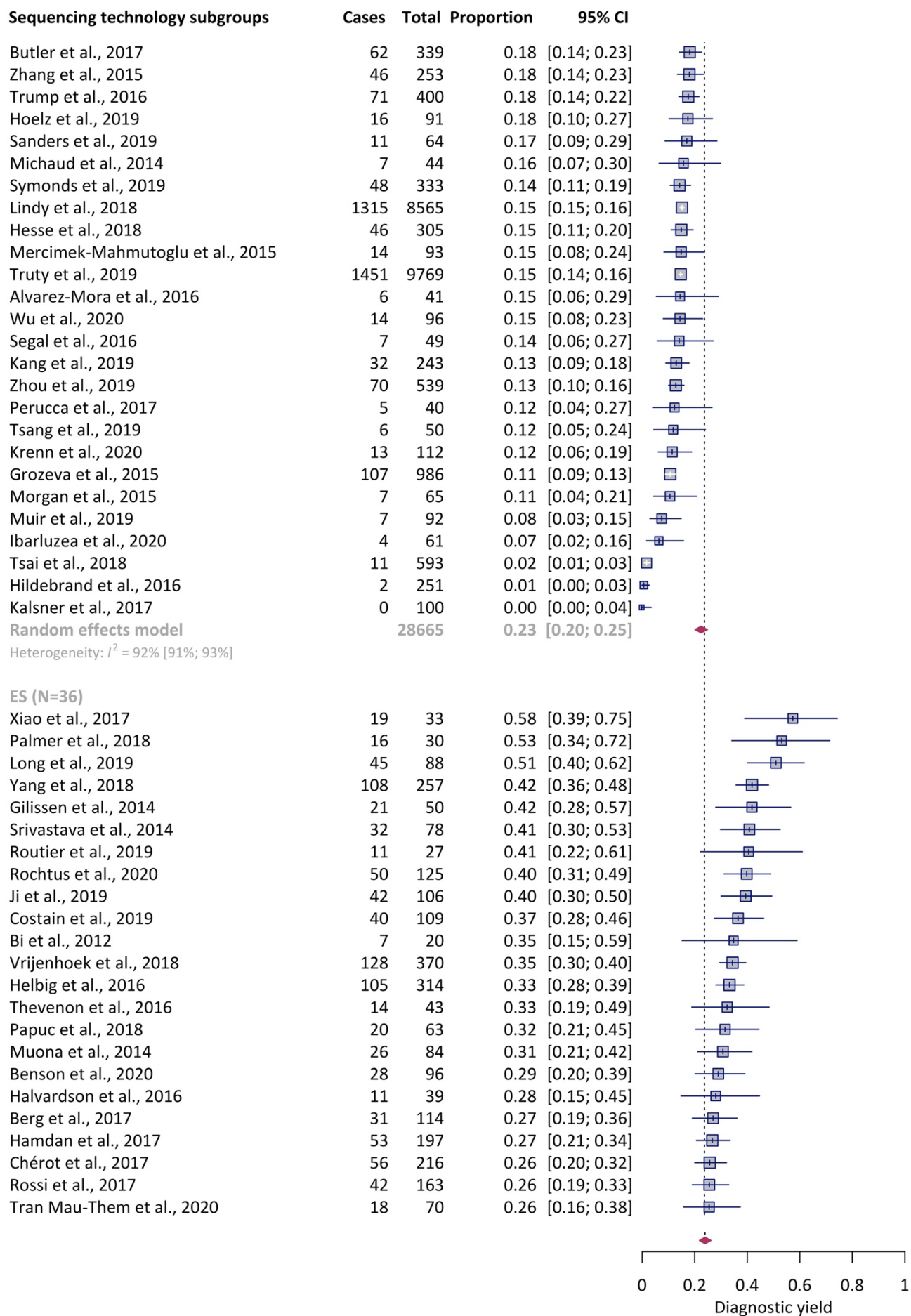


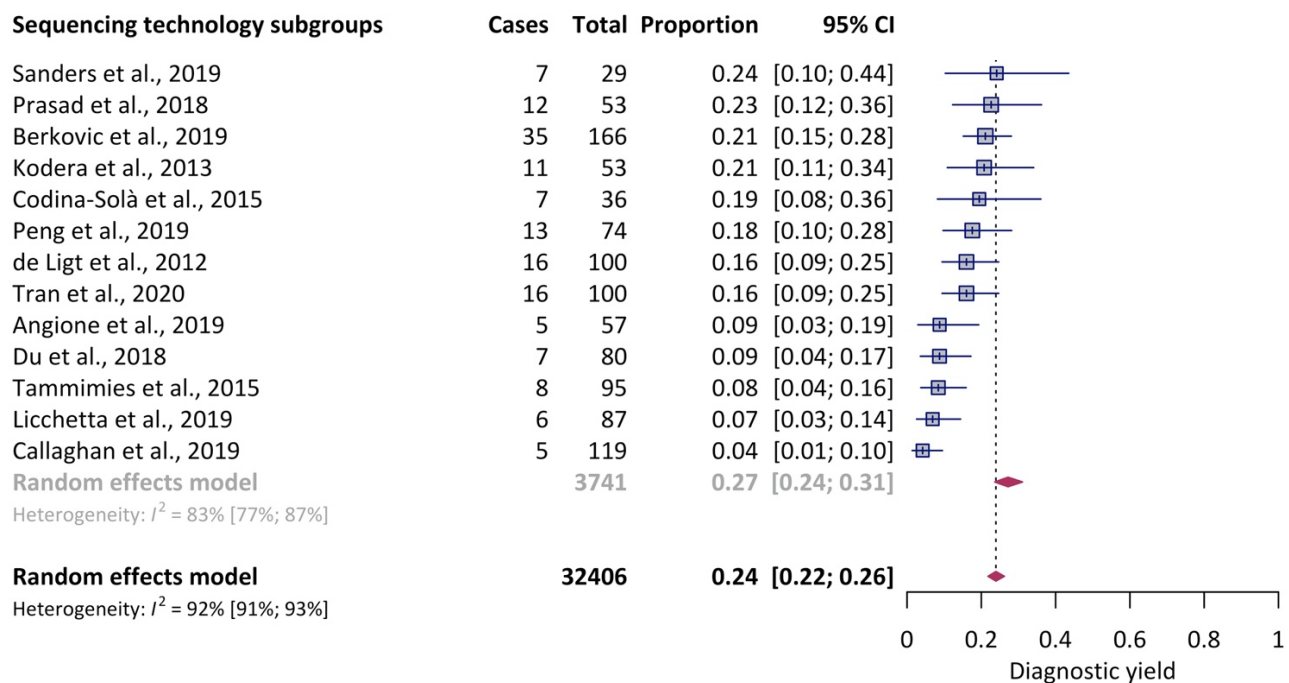
Abbreviations: GE&FE = combined generalized and focal epilepsy, FE = focal epilepsy, GE = generalized epilepsy, WS = West syndrome, ASD with ID or DD = autism spectrum disorder with intellectual disability or developmental delay, DEEs = developmental epileptic encephalopathies.

1.3. Meta analyses by sequencing technology

1.3.1. Figure S18. Meta-analysis of the diagnostic yield of sequencing technologies

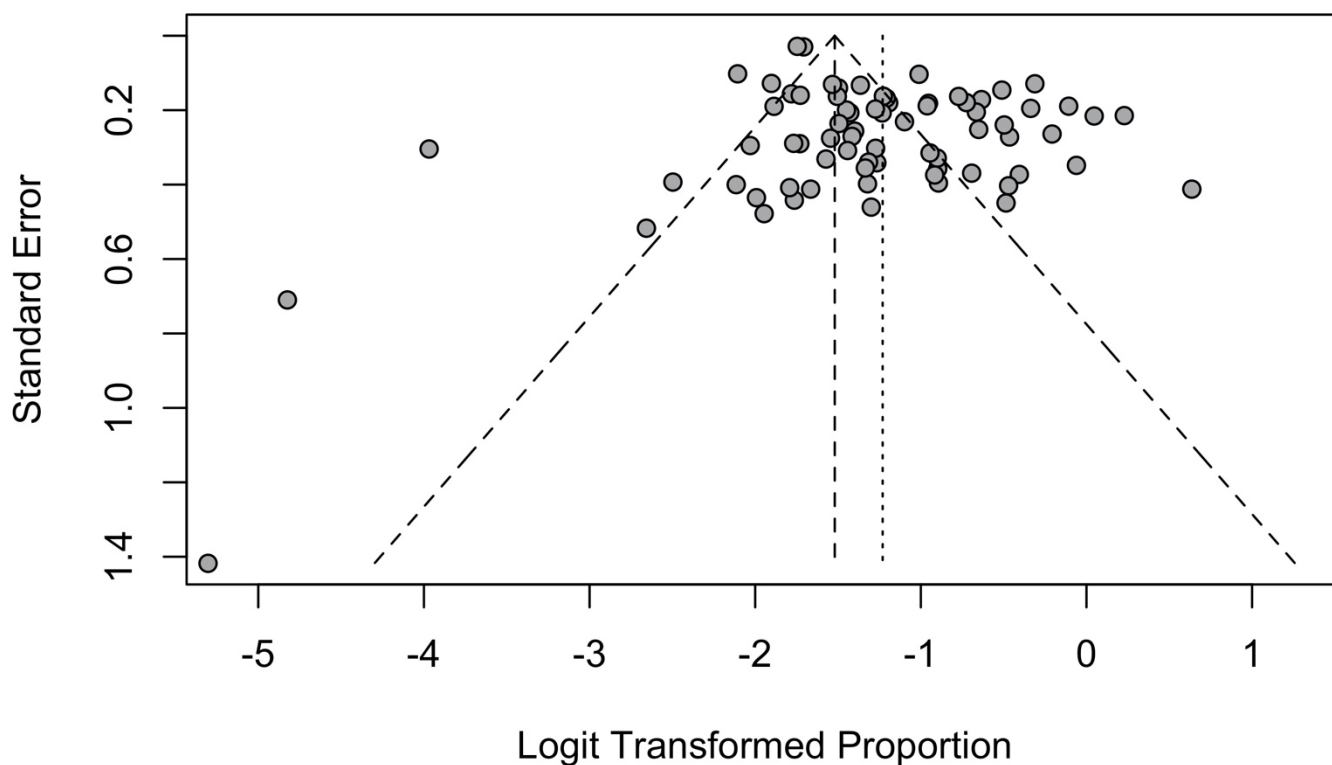






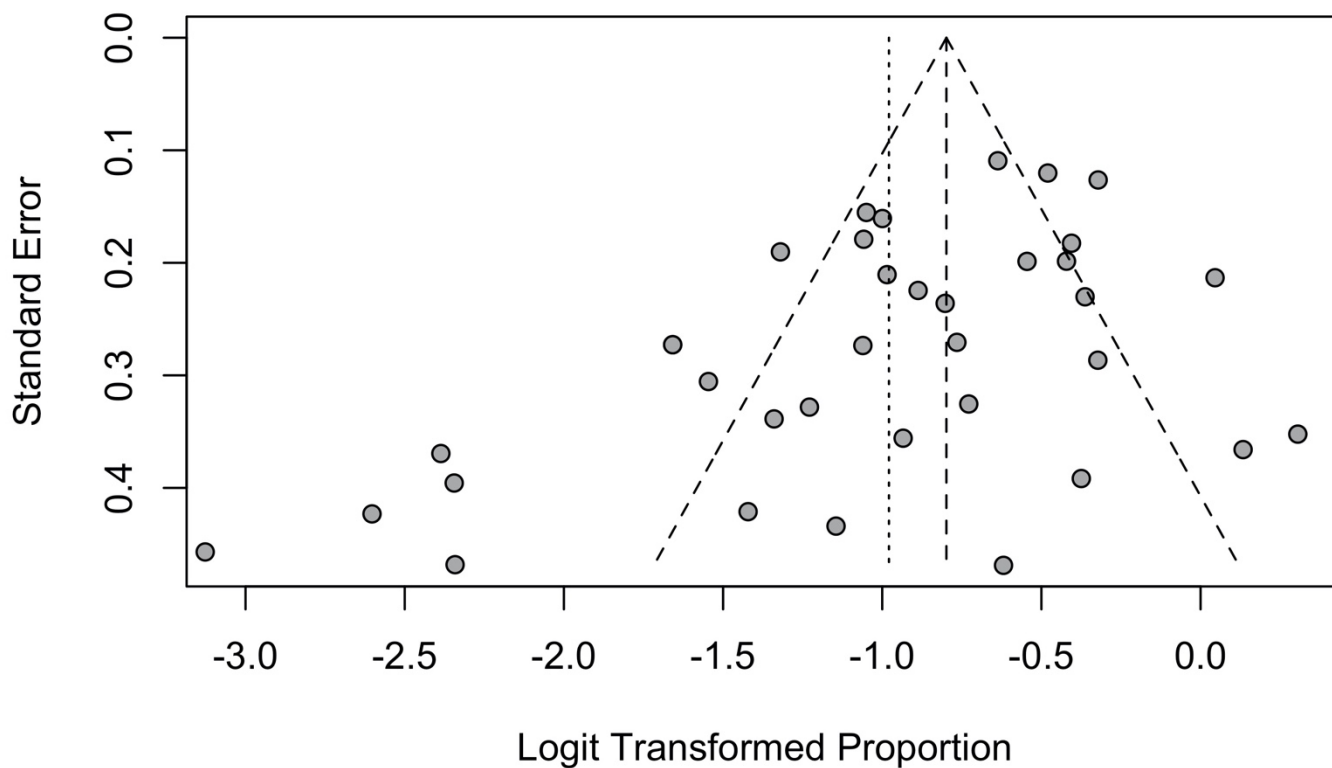
Abbreviations: *CI* = confidence interval, I^2 = estimated proportion of the variance in study estimates that is due to heterogeneity, *Proportion* = fraction of individuals with a positive genetic test, i.e. pathogenic or likely pathogenic variant.

1.3.2. Figure S19. Funnel plot of all Panel studies



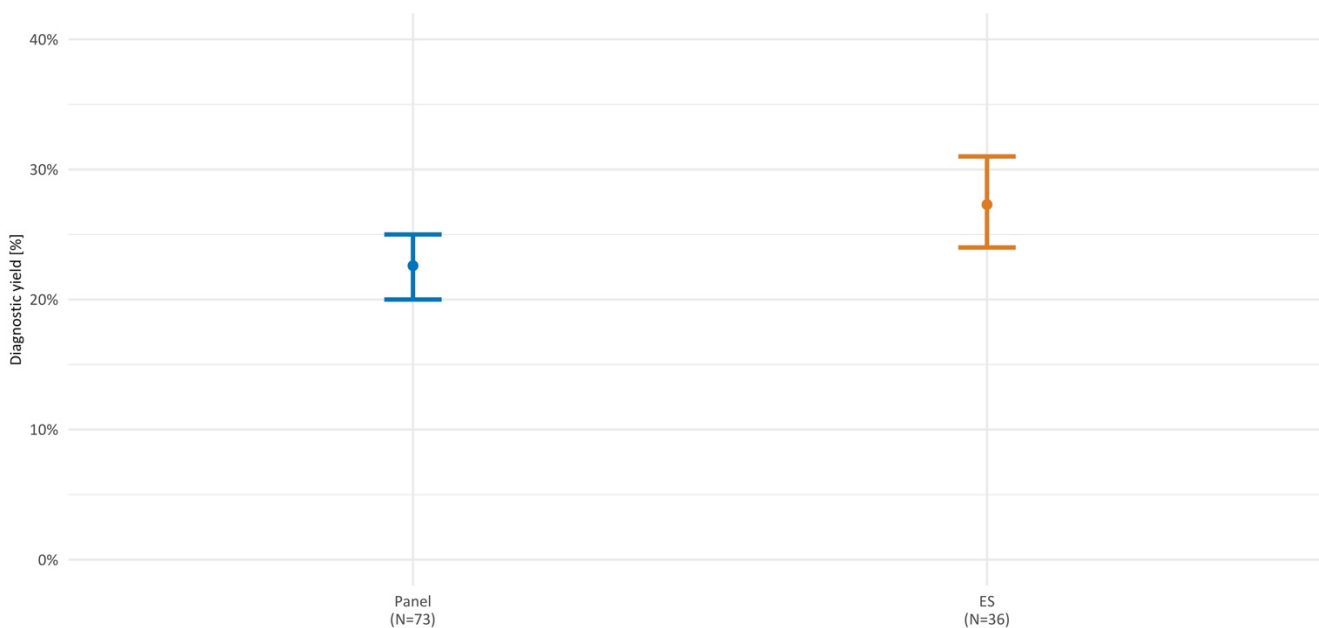
Grey dots = Original studies.

1.3.3. Figure S20. Funnel plot of all ES studies



Grey dots = Original studies.

1.3.4. Figure S21. Error bar plot of the diagnostic yield by sequencing technology

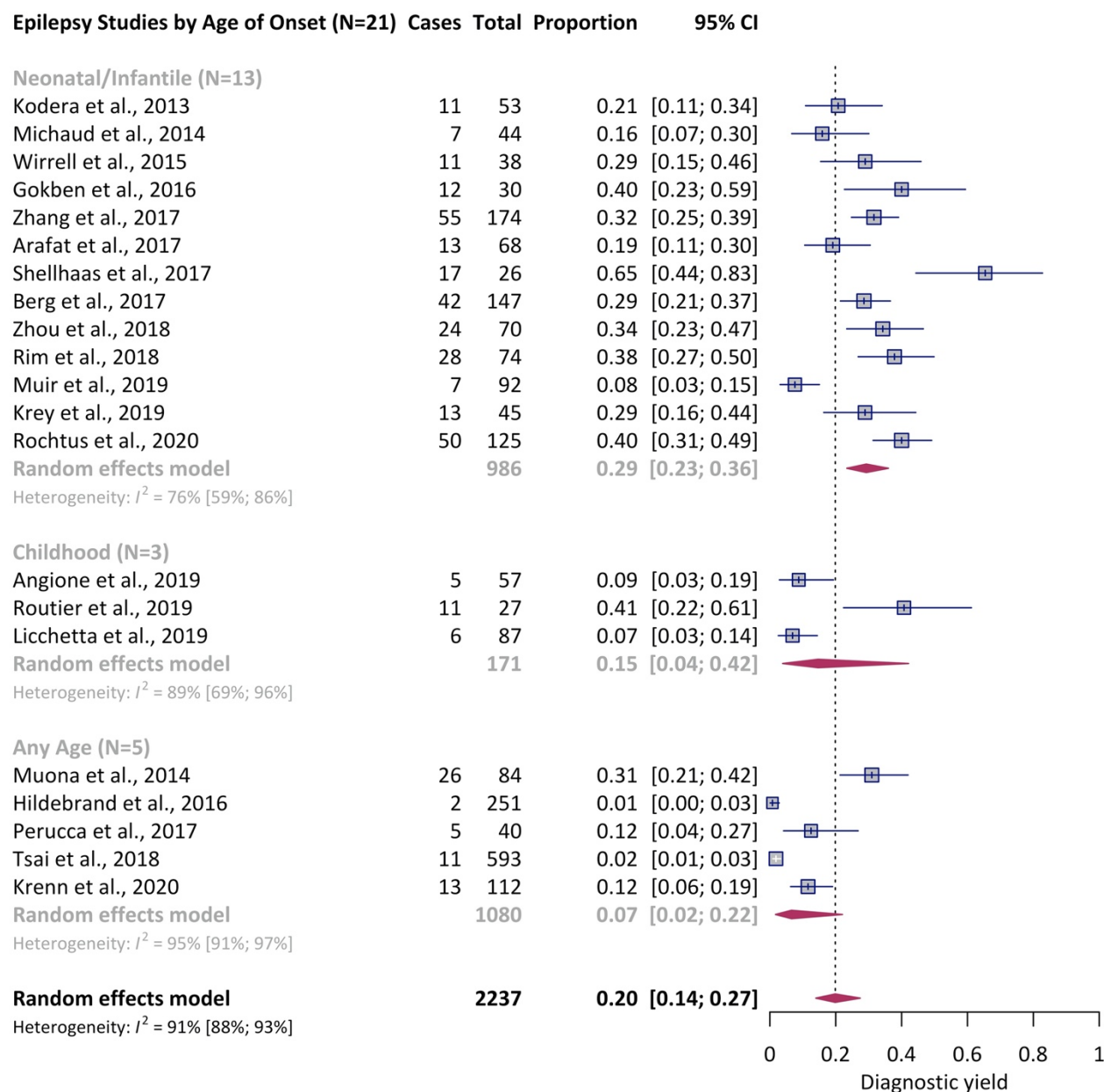


The diagnostic yield across Panel and ES.

Abbreviations: Panel = targeted gene panel sequencing, ES = exome sequencing.

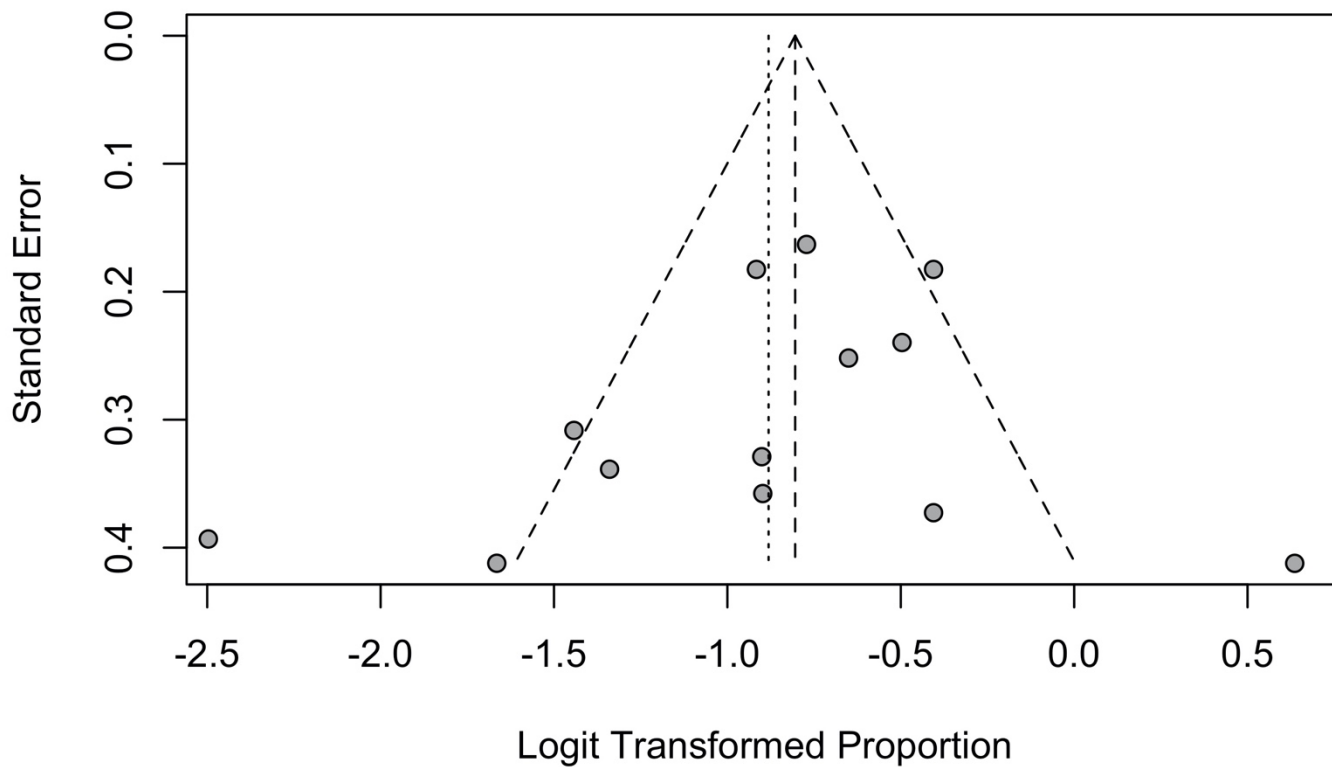
1.4. Meta analyses by age of onset

1.4.1. Figure S22. Meta-analysis of the diagnostic yield of all epilepsy studies by age of onset



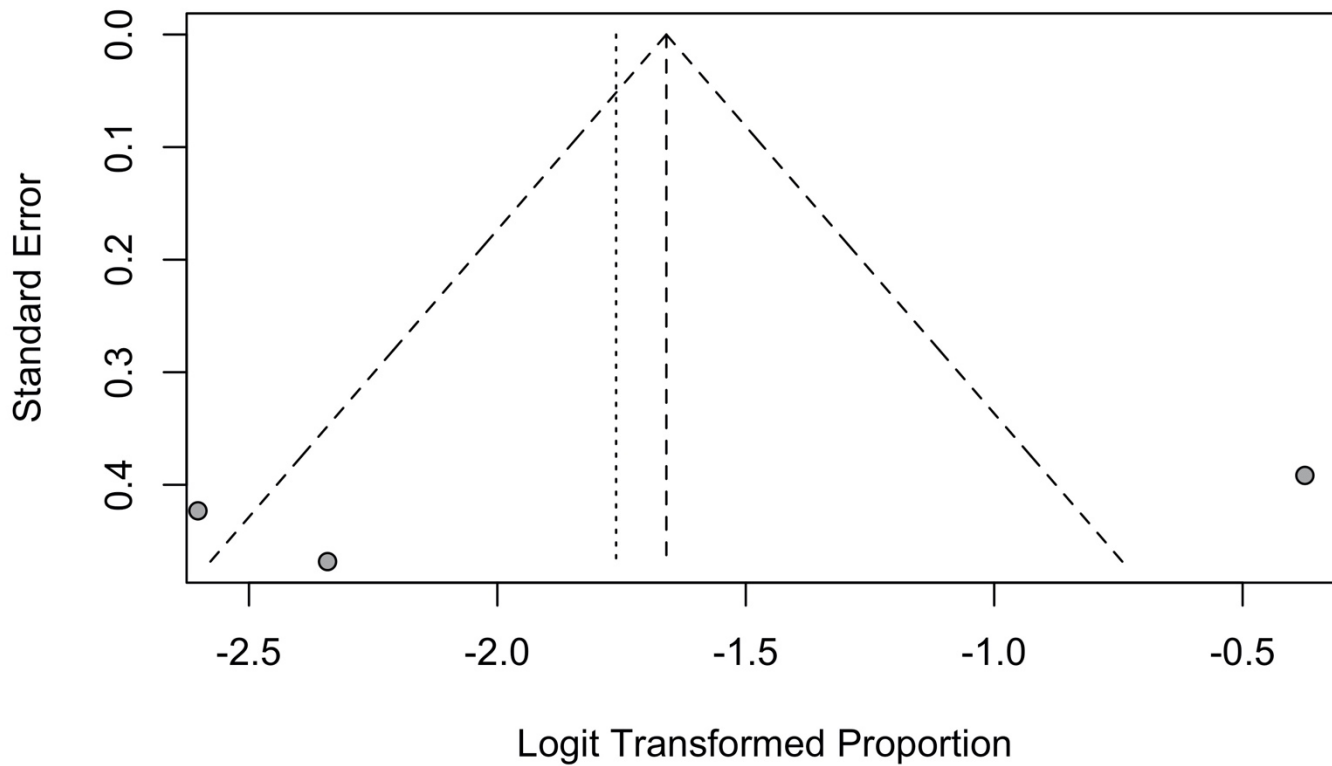
Abbreviations: CI = confidence interval, I^2 = estimated proportion of the variance in study estimates that is due to heterogeneity, Proportion = fraction of individuals with a positive genetic test, i.e. pathogenic or likely pathogenic variant.

1.4.2. Figure S23. Funnel plot of all Neonatal/Infantile studies



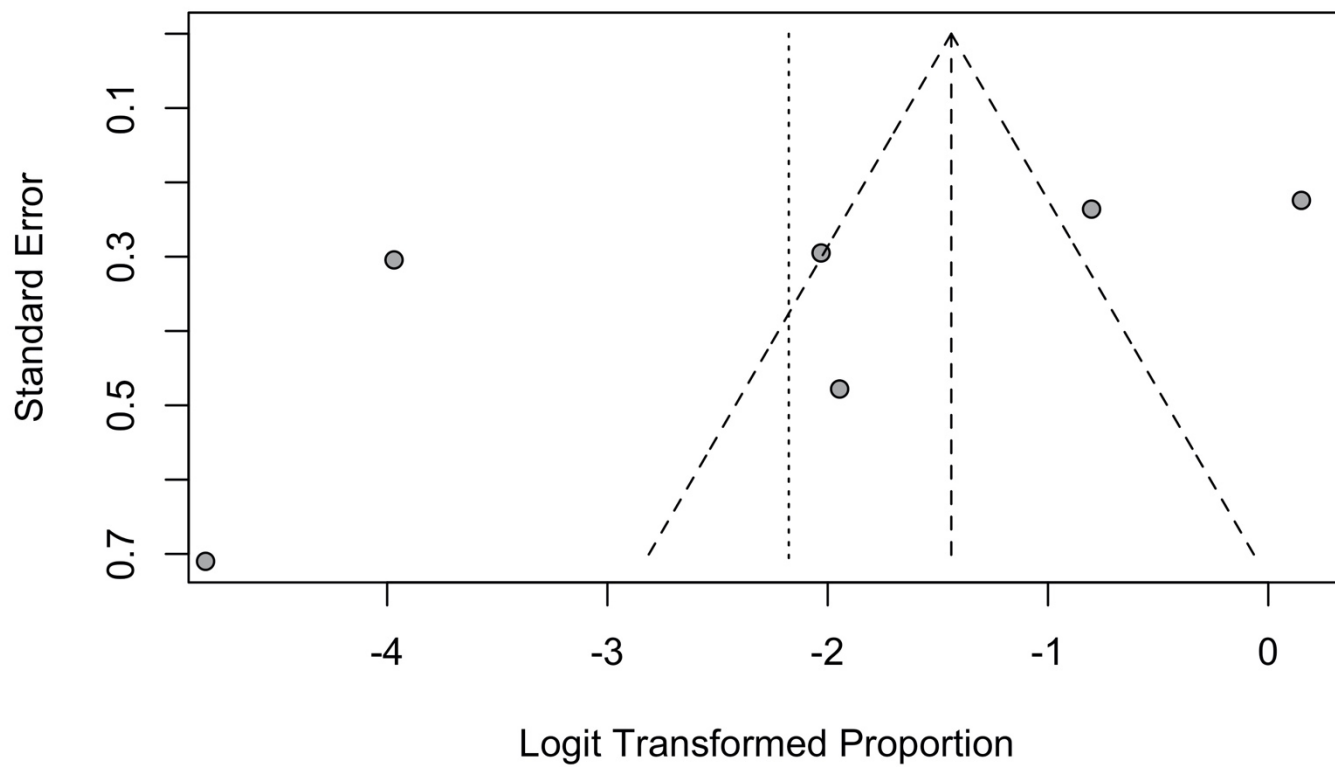
Grey dots = Original studies.

1.4.3. Figure S24. Funnel plot of all Childhood studies



Grey dots = Original studies.

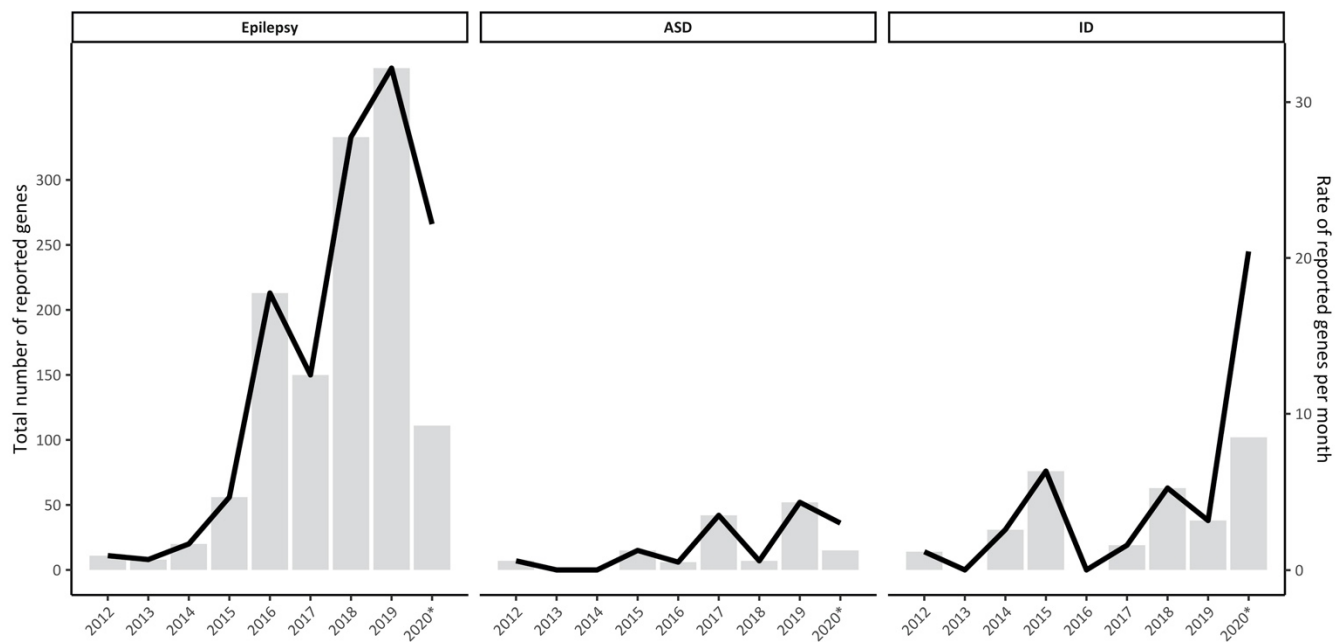
1.4.4. Figure S25. Funnel plot of all Any Age studies



Grey dots = Original studies.

2. Reported genes

2.1. Figure S26. Number and rate of genes with pathogenic variant

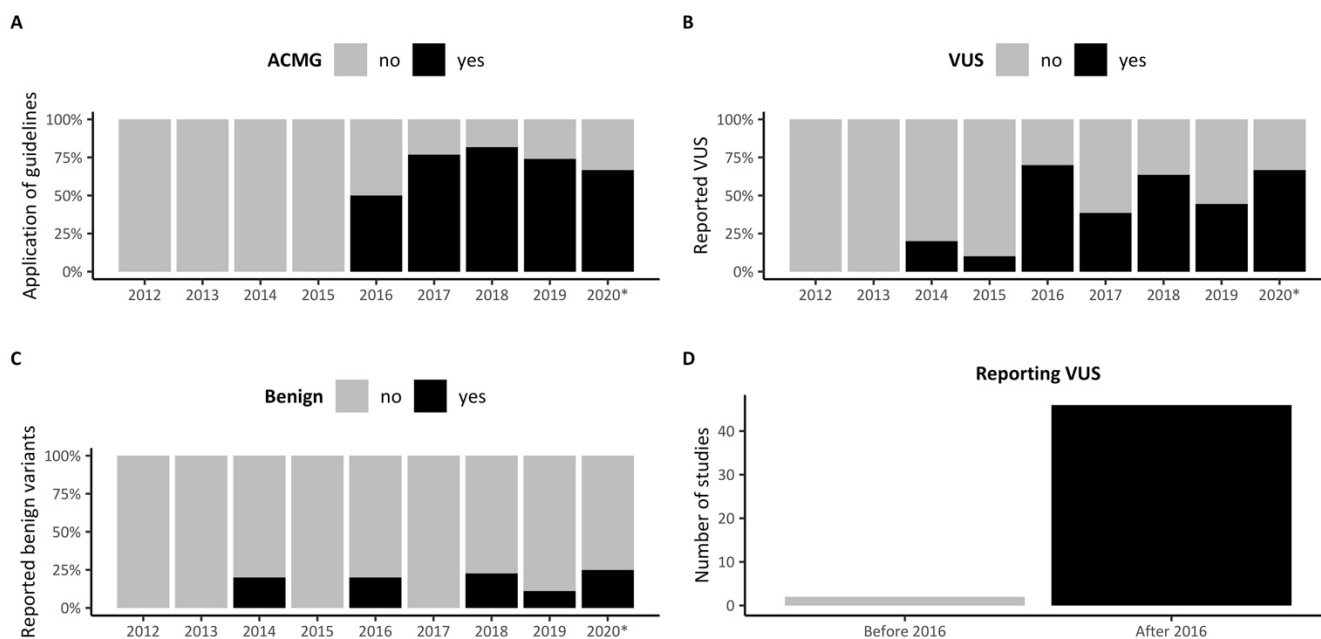


The bars represent the number of genes with pathogenic variants. The line represents the rate of genes per month and year. The number of identified genes increased rapidly in recent years for epilepsy. For ASD and ID the number of reported genes with pathogenic variants is low.

Abbreviations: ASD = autism spectrum disorder, ID = intellectual disability, * = Data were collected until May 20, 2020.

3. Variant interpretation, VUS, and benign variants

3.1. Figure S27. Level of variant interpretation and reporting as well as the proportion of the studies which reported VUS and benign variants



Data analyzed from 103 studies. **A** Since the introduction of the ACMG guidelines in 2015, there is a clear trend in adopting these in clinical sequencing studies beginning in 2016. **B** Reporting VUS becomes more common practice over time. **C** Benign variants are still being reported rather infrequently to date; their potential clinical use is considered low. **D** The number of studies reporting VUS has increased significantly after the introduction of the ACMG guidelines (OR = 38.6, $P = 5.2 \times 10^{-14}$).

Abbreviation: * = Data were collected until May 20, 2020.

4. References of all studies included in meta-analysis

4.1. Table S1. List of all 103 studies

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