

Supplemental information

Inherited GINS1 deficiency underlies

growth retardation along with neutropenia and NK cell deficiency

Julien Cottineau, Molly C. Kottemann, Francis P. Lach, Young-Hoon Kang,
Frédéric Vély, Elissa K. Deenick, Tomi Lazarov, Laure Gineau, Yi Wang,
Andrea Farina, Marie Chansel, Lazaro Lorenzo, Christelle Piperoglou, Cindy S. Ma,
Patrick Nitschke, Aziz Belkadi, Yuval Itan, Bertrand Boisson, Fabienne Jabot-Hanin,
Capucine Picard, Jacinta Bustamante, Céline Eidenschenk, Soraya Boucherit,
Nathalie Aladjidi, Didier Lacombe, Pascal Barat, Waseem Qasim, Jane A. Hurst,
Andrew J. Pollard, Holm H. Uhlig, Claire Fieschi, Jean Michon,
Vladimir P. Bermudez, Laurent Abel, Jean-Pierre de Villartay, Frédéric Geissmann,
Stuart G. Tangye, Jerard Hurwitz, Eric Vivier,
Jean-Laurent Casanova[@], Agata Smogorzewska, Emmanuelle Jouanguy

@ Corresponding author

Jean-Laurent Casanova
Laboratory of Human Genetics of Infectious Diseases
Rockefeller University
1230 York avenue,
New York, NY, 10065
Tel : +1-212-327-7332
Fax : +1-212-327-7330

Patient	P1 (died at 18 mo)	P2 (17y)	P3 (7y)	P4 (29y)	P5 (18y)
Intrauterine growth retardation (birth)	Weight – 3,5 SD Height – 4 SD	Weight – 3,5 SD Height – 3,5 SD	Weight – 6,5 SD Height – 6,5 SD	Weight – 2,5 SD Height – 2 SD	Weight – 3,5 SD Height – 3,5 SD
Extrauterine growth retardation	Weight – 3,5 SD Height – 4 SD	Weight – 2,5 SD Height – 2 SD	Weight – 6 SD Height – 6 SD	No	Weight – 3 SD Height – 4 SD
Facial dysmorphism	Yes	Yes	Yes (with some preaging features)	Yes, mild	Yes, mild
Chest infection	Yes (*)	Yes (*)	Adenovirus RSV	Yes (*)	<i>Aspergillus nidulans</i> <i>Streptococcus agalactiae</i>
Digestive infection	<i>Enterobacter cloacae</i> Other (*)	Rotavirus <i>Clostridium</i> spp.	Rotavirus	Yes (*)	<i>Enterococcus faecalis</i> <i>Escherichia coli</i> <i>Candida glabrata</i> <i>Candida albicans</i> <i>Acinetobacter lowfii</i> <i>Pseudomonas aeruginosa</i>
Other viral infections	CMV	No	CMV VZV	VZV HSV	VZV Flu
Other bacterial infections	<i>Enterobacter cloacae</i>	<i>Streptococcus</i> spp. <i>Clostridium</i> spp.	ND	<i>Staphylococcus</i> spp.	<i>Enterobacter cloacae</i> <i>Escherichia coli</i> <i>Pseudomonas</i> <i>Staphylococcus hominis</i>
Lympho-adenopathies	Yes	Yes	Yes	Yes	No
Others clinical manifestations	Eczema	Eczema GH treatment (4y – 12y) Osteosarcoma + Chemotherapy (12y)	Protein losing enteropathy Hypothyroidism	Dry skin - Ichthyosis Psoriatic scalp lesion (14 y)	Eczema GH treatment (3 - 4y) Glaucoma (5y-18y) G-CSF treatment (13y – 18y) AIHA (IgG+C3D) (9y, 10y, 14y, 17y)
Prophylactic treatment	No	Cotrimoxazole (3mo to 6y)	Cotrimoxazole (0 to 6mo) Azithromycin Immunoglobulins	Cotrimoxazole (15y to 17y, 18y to 24y)	Cotrimoxazole (3y – 18y) Immunoglobulins (7y – 18y)

Supplemental Table 1. Summary of the clinical phenotype of each patient in terms of developmental phenotype, infections, and treatments. (*) undetermined infectious etiology.

Patient Stimulation	P1	P2		P3	P4			P5			
Age	18m	1y	15y	16y	4y	9y	15y	17y	9y	11y	13y
PHA (normal range >50) cpm 10 ³	85	135	28	48	ND	87,7	106,6	46,5	26	68,5	21,5
OKT3 (50ng/ml) (normal range >30) cpm 10 ³	ND	ND	13	ND	ND	ND	ND	ND	50,5	ND	ND
Beads anti-CD3/CD28 + IL2	ND	ND	ND	ND	0	ND	ND	ND	ND	ND	ND
Candidin (normal range >10) cpm 10 ³	1	10	0,67	0,4	ND	6	4,7	0,2	5,3	7	13
Tuberculin (normal range >10) cpm 10 ³	ND	ND	ND	0,8	ND	2	ND	ND	6,8	ND	ND
Tetanus (normal range >10) cpm 10 ³	2	15	5	9	ND	53	16	7,1	6,3	1,4	2,45

Supplemental Table 2. T lymphocytes proliferation of each patient.

Patient		P2				P3		P4				P5
Experiment		1	2	3	4	1	2	1	2	3	4	1
Lymphocytes	Cells per μ l	1253	1297	1558	1077	1053	688	1105	1018	1070	879	360
Total NK cells	% among lymphocytes	0.1	0.2	0.2	0.2	0.7	0.3	0.1	0.2	0.1	0.1	0.1
	Cells per μ l	1	3	3	2	7	2	1	2	1	1	0.4
CD56^{bright} NK cells	% among NK cells	0	3	10	NA	29	13	27	25	30	NA	20
CD56^{dim} NK cells	% among NK cells	100	97	90	NA	71	87	73	75	70	NA	80

Supplemental Table 3. Count and percentage of total NK, CD56^{bright}, CD56^{dim} cells of each patient.

	P1	P2	P3	P4	P5
Single/Paired-end	Paired-end	Paired-end	Paired-end	Paired-end	Paired-end
Bait-set	50Mb	50Mb	71Mb	71Mb	71Mb
Total reads	30893815	34310743	101158606	67204180	76147288
% Mapped	0,9169	0,9343	0,9884	0,9898	0,9912
Mean coverage	21,3426	21,4846	89,21	63,08	69,3
Target bases covered by > 2X	91,732	94,146	99,9	99,7	99,8
Target bases covered by > 5X	79,52	82,502	99,4	99	99,2
Target bases covered by > 10X	65,036	68,16	98	96,8	97,2
Target bases covered by > 20X	42,032	43,594	92,8	88,6	89,8
Target bases covered by > 30X	25,56	25,702	85,2	77,5	79,7

Supplemental Table 4. Exome sequencing data. Whole Exome sequencing quality for each independent patient (P1, P2, P3, P4, P5).

Whole Exome Sequencing		# of variants
Nonsense (stop-gained)	Total	0
	Homozygous	0
	Heterozygous	0
Readthrough (stop-lost)	Total	0
	Homozygous	0
	Heterozygous	0
Missense	Total	6
	Homozygous	1
	Heterozygous	6
Silent	Total	1
	Homozygous	0
	Heterozygous	1
Frameshift	Total	23
	Homozygous	7
	Heterozygous	16
UTR	Total	112
	Homozygous	3
	Heterozygous	109
Splice	Total	3
	Homozygous	0
	Heterozygous	3

Supplemental Table 5. Summary of reported GINS1 variants found in our in-house database of 3,000 exomes from patients without GINS1 deficiency.

P1 & P2	P3	P4	P5
PINX1 CLDN9	AK2 , SPATA6 PSRC1, XPR1 AGT , SIX2 CCNT2, TTN CTDSPL, DAG1 RAD54L2 EXOC1 F13A1 CAPN11 HS3ST5 CCR6 CREB5 CUX1 NAPEPLD TMEM168 SHH ST3GAL1 FRMD4A LDB3 ANKRD1 ART5 CDC42BPG CIT CDH24 AHNAK2 CHTF18 CACNA1H AMFR DHX38 DPEP1 SHPK MYO15A RHOT1 ZNF207 TAC4 RYR1 BCR XIAP TMEM185A BGN CR1 KLHL23	SCNN1D SLC27A3 IGSF9 POU2F1 REN MDM4 OBSCN MTR EHD3 HOXD1 TTN ANKAR SGPP2 SNED1 SLC6A11 CDC20B SPINK14 FAM26E GLI3 ZAN ERMP1 FAM208B SFMBT2 ITPRIP CNTN5 POU6F1 NUPL1 ELMSAN1 CHP1 ALPK3 IGF1R MFSD6L KRTAP4-8 ALDH3A1 SLC38A10 USHBP1 ZNF772 PCK1 SLC19A1 TNRC6B PNPLA3 PHEX	THAP3 CROCC RUNX3 PAFAH2 PSRC1 SMG7 GTDC1 TTN PECR MROH2A FANCD2 SCN5A WDR6 HTRA3 OCIAD2 KIAA1211 CNOT6L DCHS2 EXOC3 SNX18 ARRDC3 CDYL GSTA5 HEBP2 TULP4 TNRC18 ZC3HAV1 CHRNA2 ADAMTS13 PLXDC2 MICALCL USH1C TNKS1BP1 HOXC8 STK24 KCNK10 YY1 TMCO5A ZACN EPG5 SIPA1L3 ZNF805 DZANK1 SPO11 APOBEC3F TSPAN7 TM4SF2 GPR112 SMG7 EIF2AK2 CRAMP1L IGF1R

Supplemental Table 6. List of genes with rare, homozygous or compound heterozygous variants (MAF<1%), predicted to be damaging (CADD>MSC). The genes with at least one variant in the coding region are in bold.

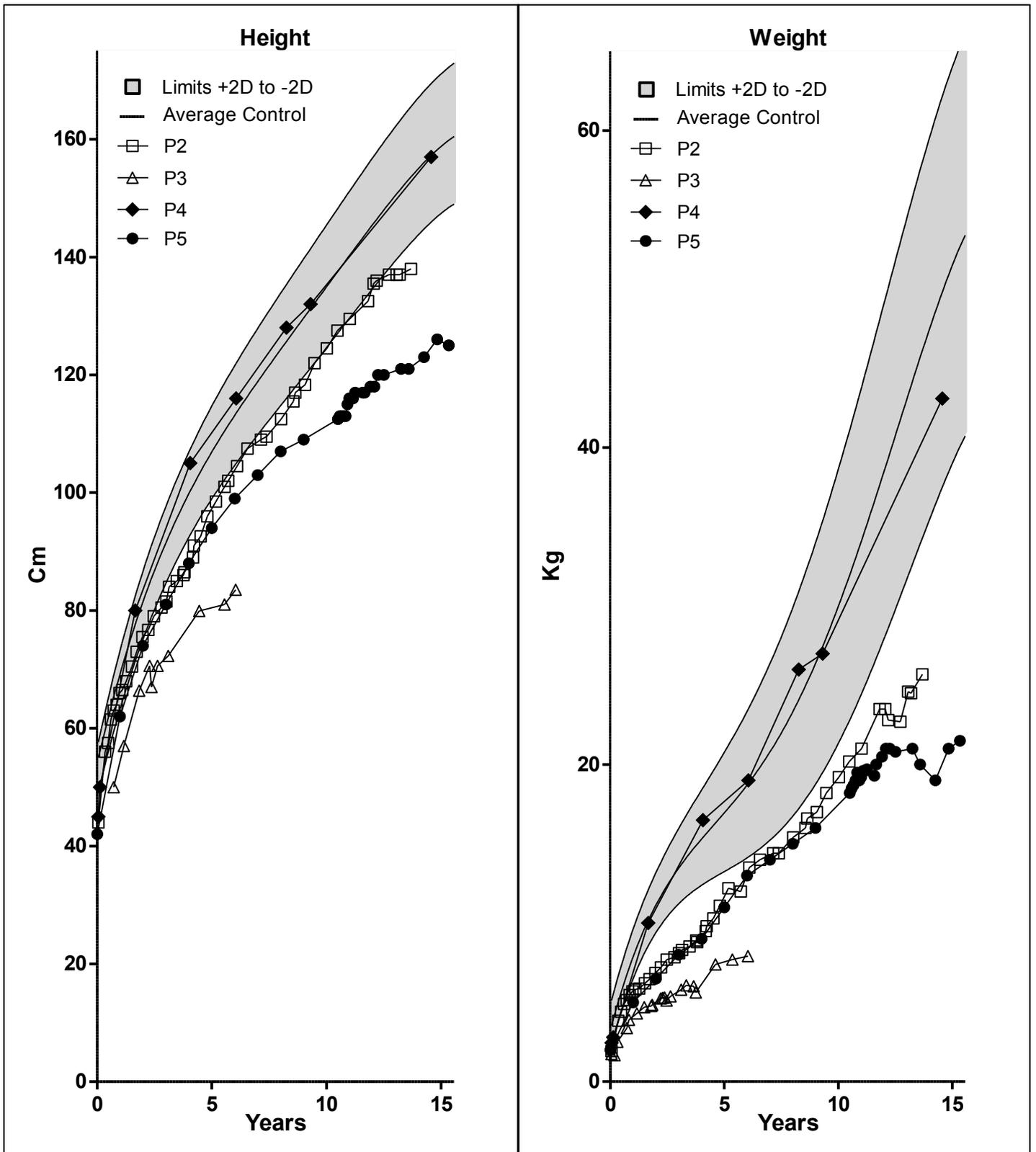
Protein	CTL	P2	P3	P4	P5
GINS1	100%	43%	36%	53%	29%
GINS2	100%	129%	116%	127%	106%
GINS3	100%	19%	10%	27%	13%
GINS4	100%	69%	44%	88%	59%
MCM4	100%	128%	59%	124%	120%

Supplemental Table 7. Quantification of GINS complex components expression. Signals' intensities obtained on western blot analysis (Figure 3, C and D) were assessed by ImageJ software and normalized to GAPDH expression and to control expression (one experiment).

	NT					0.5 mM HU					2 mM HU				
Protein	CTL	P2	P3	P4	P5	CTL	P2	P3	P4	P5	CTL	P2	P3	P4	P5
P-CHK1 (%)	100	122	195	100	66	100	35	16	31	62	100	37	29	45	70
P-RPA (%)	100	20	73	37	39	100	28	35	38	91	100	64	71	88	80

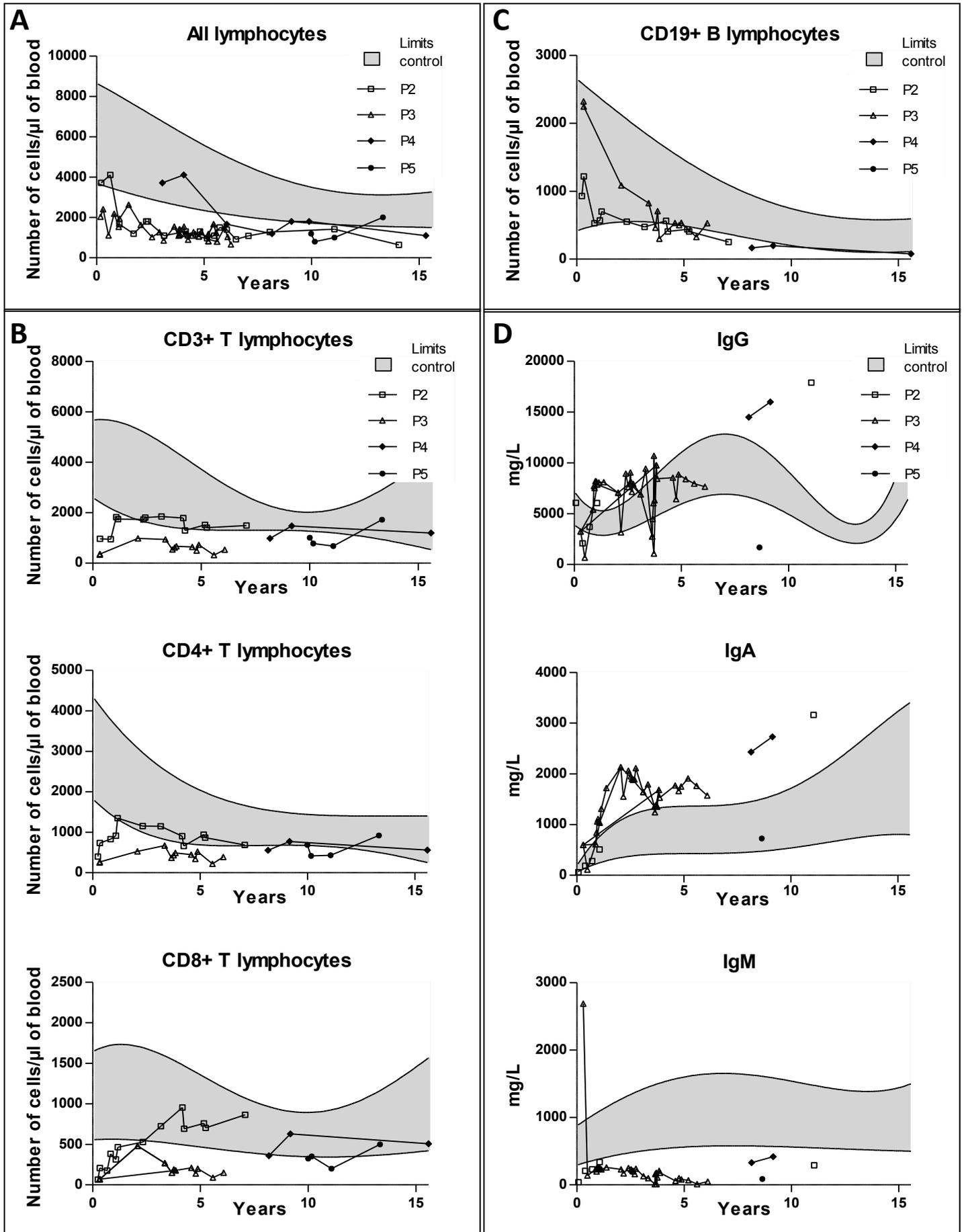
Supplemental Table 8. Quantification of CHK1 and RPA phosphorylation. Signals' intensities obtained on western blot analysis (Figure 5C) were assessed by ImageJ software and normalized to GAPDH and expression control (one experiment).

Supplemental Figure 1



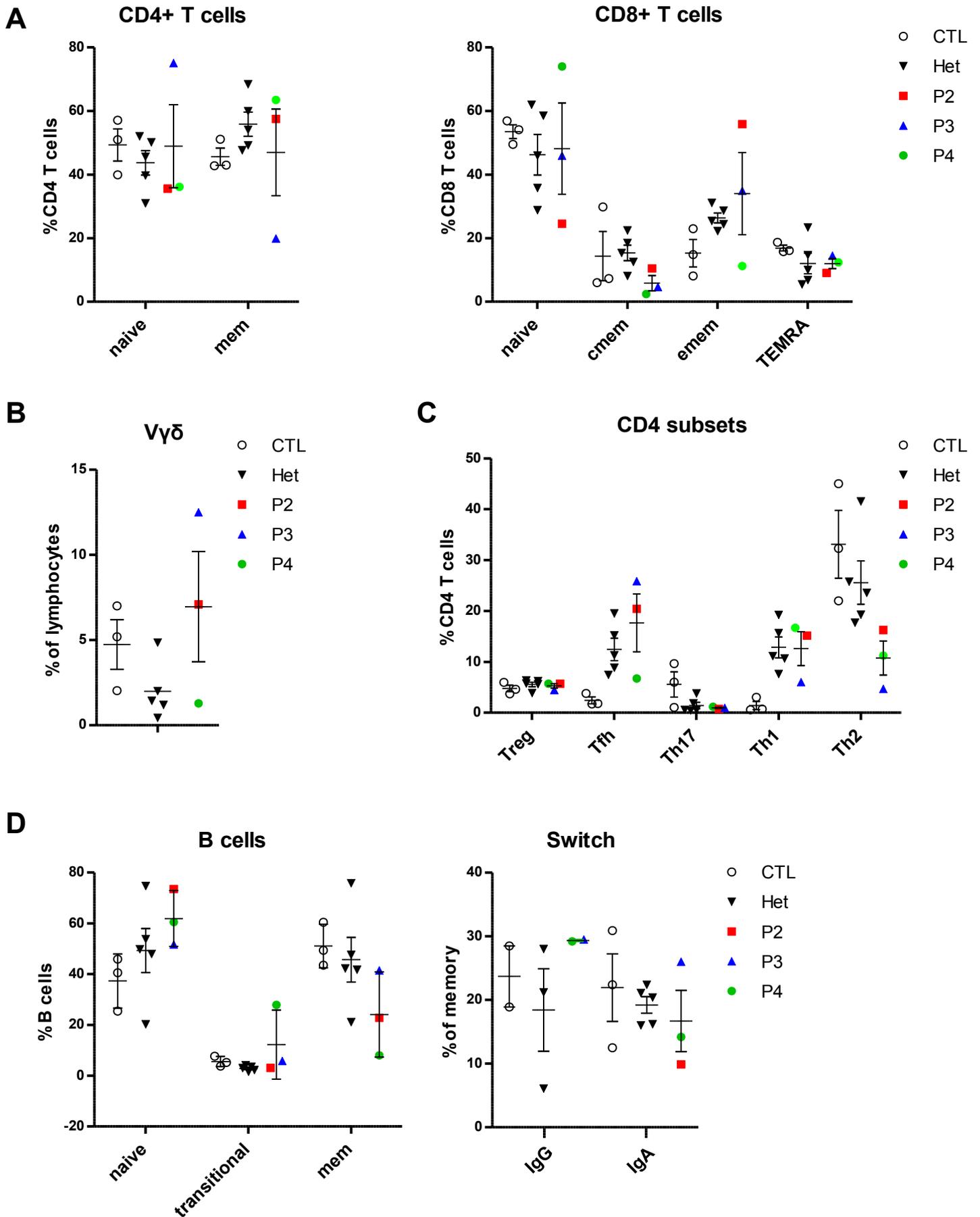
Supplemental Figure 1. Developmental growth. Height and weight curves of all GINS1-deficient patients. The black line mean growth and the gray area indicates two standard deviations on either side of the mean.

Supplemental Figure 2



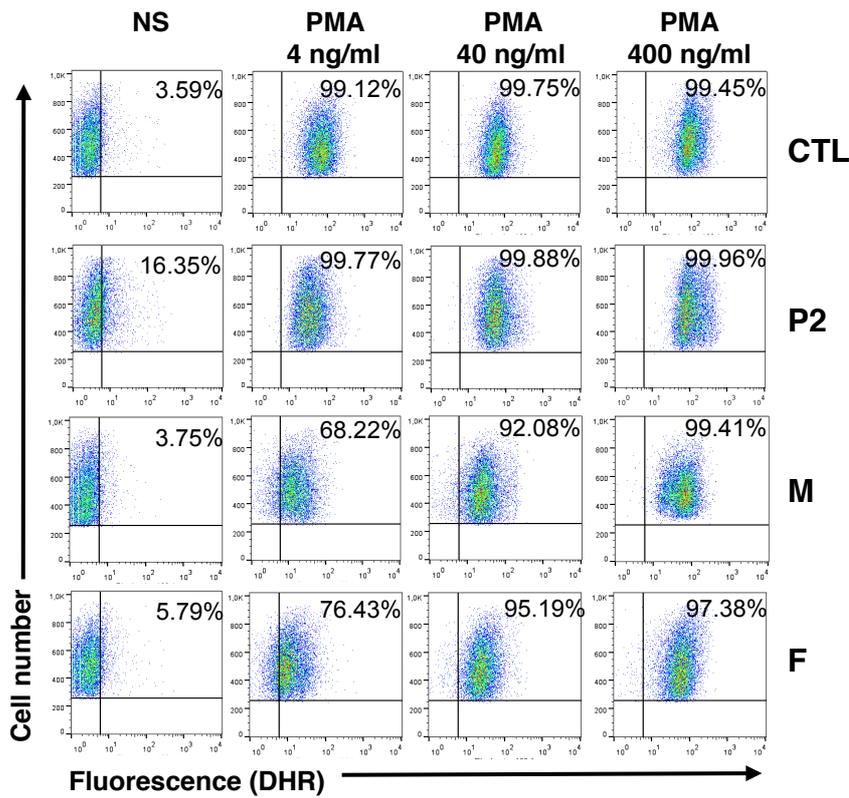
Supplemental Figure 2. Classical immunophenotype of patients. (A) Total lymphocytes. (B) CD3⁺, CD4⁺, CD8⁺ T lymphocytes. (C) CD19⁺ B lymphocytes. (D). Immunoglobulins. The gray area corresponds to the range observed in controls.

Supplemental Figure 3

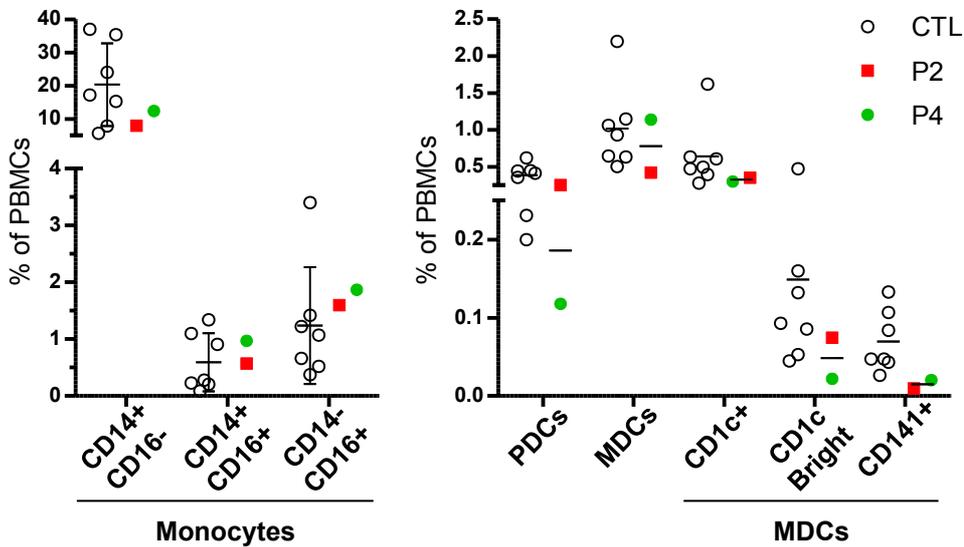
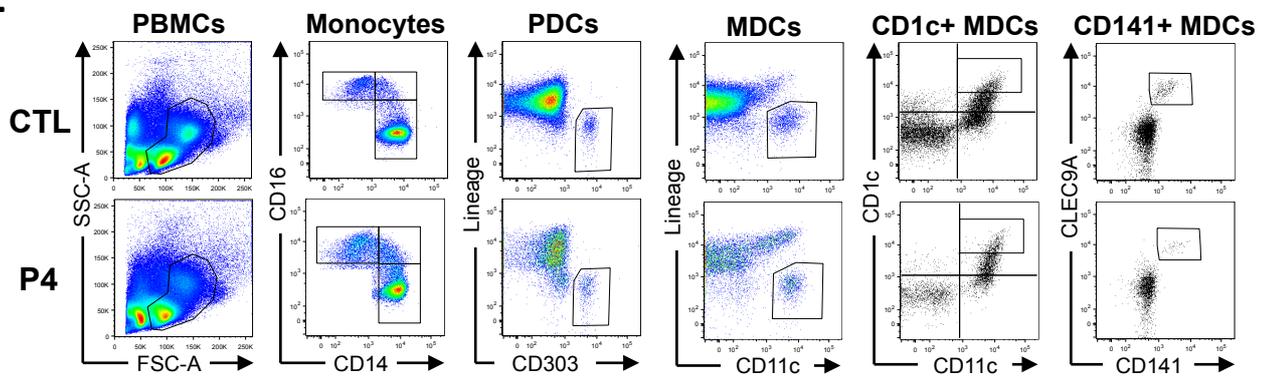


Supplemental Figure 3

E

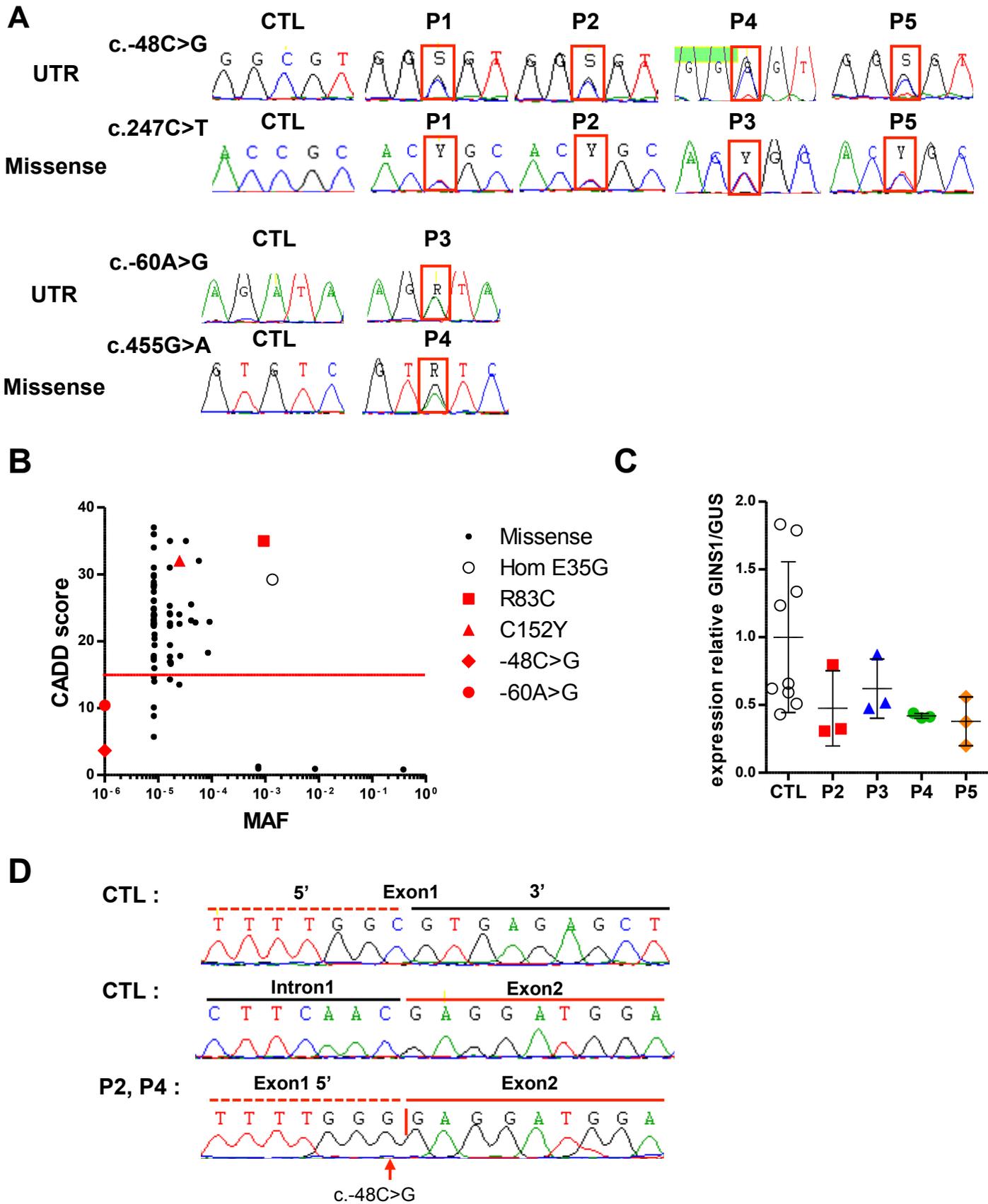


F



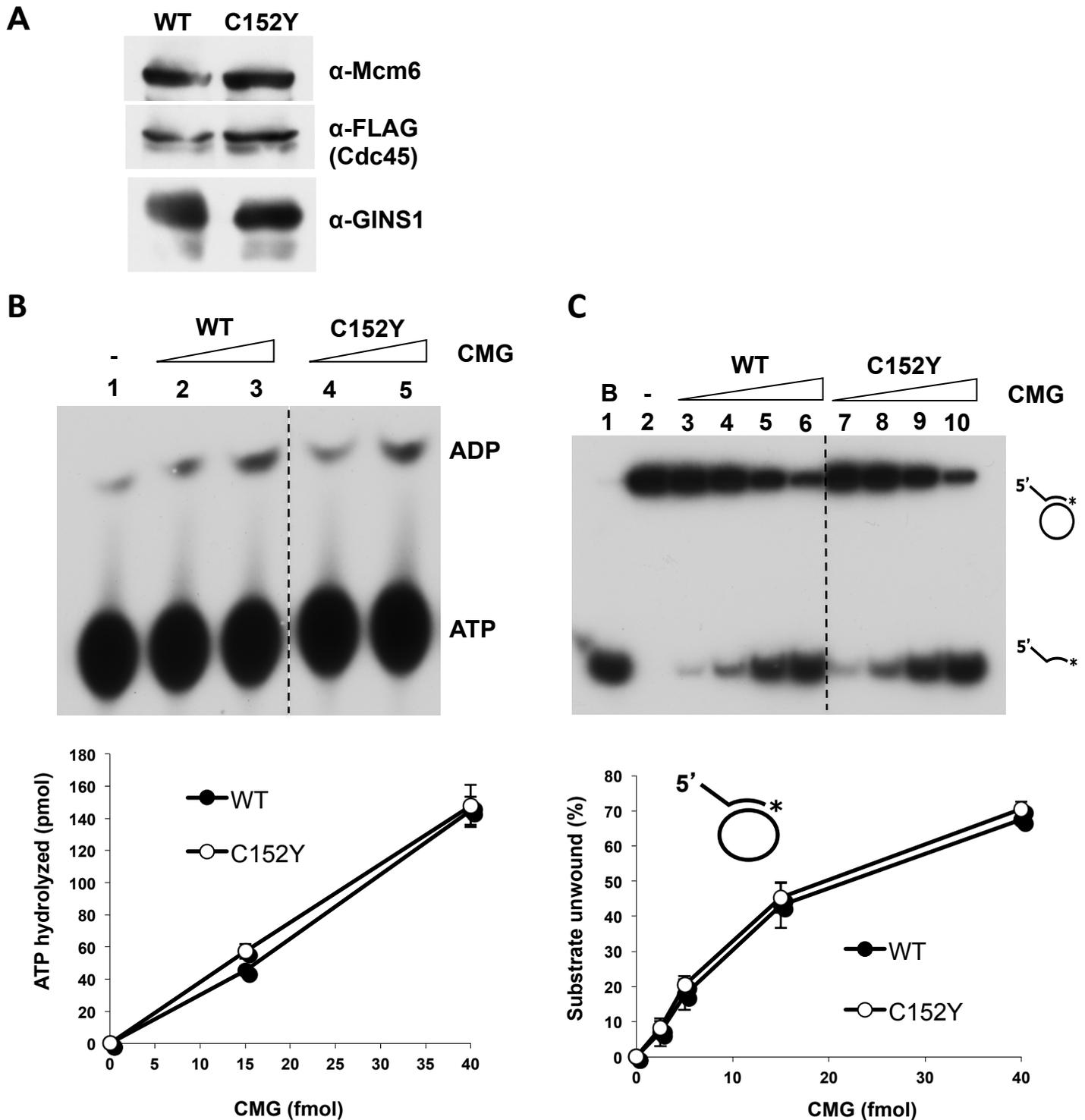
Supplemental Figure 3. Lymphoid and myeloid cells subsets phenotype. Frozen PBMCs from healthy control subjects or patients. **(A)** Proportion of naïve (CD45RA⁺CCR7⁺) and memory (CD45RA⁺CCR7[±]) cells among CD4⁺ lymphocytes (left panel) and of naïve (CD45RA⁺CCR7⁺), central memory (cmem) (CD45RA⁻CCR7⁺), effector memory (emem) (CD45RA⁻CCR7⁻) and TEMRA (CD45RA⁺CCR7⁻) cells among CD8⁺ lymphocytes (right panel). **(B)** Percentage of V γ δ cells in total lymphocytes. **(C)** Quantification of CD4⁺ T-cell subsets, Treg cells (CD25⁺CD127^{lo}), T follicular helper (Tfh) cells (CD45RA⁻CXCR5⁺), Th1 cells (CD45RA⁻CXCR3⁺CCR6⁻), Th17 cells (CD45RA⁻CCR6⁺CXCR3⁻), Th2/Th9 cells (CD45RA⁻CXCR3⁻CCR6⁻). **(D)** Percentage of transitional (CD10⁺), naïve (CD27⁻), memory (CD27⁺) B cells. **(E)** Flow cytometry analysis of intracellular H₂O₂ production, using the fluorescent DHR123 probe in neutrophils from healthy controls (CTL), P2 and P2's parents (F: father, M: mother) stimulated by incubation with different concentrations of PMA for 10 minutes. The results shown are representative of two independent experiments. **(F)** Percentage of different myeloid cells, Left : CD14⁺ CD16⁻ cells, CD14⁺ CD16⁺ cells, CD14⁻ CD16⁺ cells, Right: PDCs (Lin⁻, CD303⁺), MDCs (Lin⁻, CD11c⁺), CD1c⁺ MDCs (CD1c⁺, CD11c⁺), CD141⁺ MDCs (CLEC9A⁺, CD141⁺) in controls (n=7) and patients (n=2).

Supplemental Figure 4



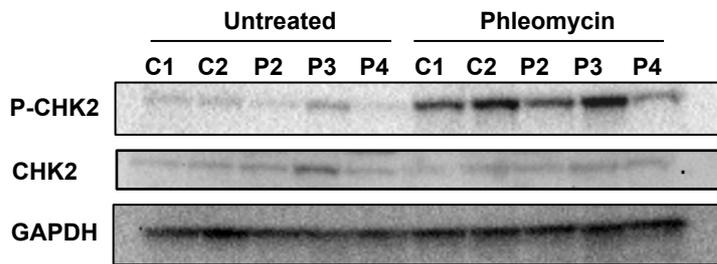
Supplemental Figure 4. gDNA sequence and mRNA levels. (A) Sanger sequence of the gDNA, for all patients. The heterozygous profile of each mutation is shown for P1 to P5. (B) Representation of the frequency of missense variants in the ExAC database as a function of their impact, as predicted by CADD score. (C) GINS1 mRNA levels in E6/E7-fibroblasts from GINS1-deficient patients, as compared with control cells by q-PCR. (D) Sanger sequence of a *GINS1* cDNA with a deletion of part of the exon1 from P2 and P4, aligned with control sequences.

Supplemental Figure 5



Supplemental Figure 5. Biochemical activities of WT and mutant CMG. (A) Soluble extracts (2 μ l) prepared from Sf9 cells infected with CMG-expressing baculoviruses (including either WT or C152Y GINS1) were separated on 10% polyacrylamide gel electrophoresis. Expression of Mcm6, Cdc45, and GINS1 were detected by western blotting. (B) ATP hydrolysis activities were measured with increasing levels (15 and 40 fmol) of WT (lanes 2 and 3) and mutant (lanes 4 and 5) CMG complexes as described in materials and methods (top). The amount of hydrolyzed ATP was calculated and plotted against the level of CMG added (bottom). (C) DNA unwinding activities were measured with increasing levels (2.5, 5, 15, and 40 fmol) of WT (lanes 3-6) and mutant (lanes 7-10) CMG complexes as described in materials and methods (top). The structure of the DNA substrate and the unwound oligomer are illustrated on the right side of the gel. The amount of unwound substrate was calculated and plotted against the level of CMG added (bottom). B: boiled substrate.

Supplemental Figure 6



Supplemental Figure 6. Phosphorylation of CHK2, assessed by western blot of total protein extracts from untreated or treated (incubation for 2 h with 80 $\mu\text{g/ml}$ of phleomycin) E6/E7-fibroblasts from controls and patients, with antibodies against P-CHK2 and CHK2. GAPDH was used as a loading control. ($n=3$)