

## ONLINE APPENDIX RESEARCH DESIGN AND METHODS

### Study cohorts

#### Cambridgeshire

A total of 552 patients aged 45–76 years with T2D were randomly selected from general practitioner diabetes registers in Cambridgeshire, UK (1). Presence of T2D was based on clinical criteria; onset of diabetes after the age of 30 years without treatment with insulin in the first year after diagnosis. The controls were recruited at random from the same population sampling frames, and were individually matched to cases for age, sex and GP practice. Diabetes was excluded in controls by medical record search and by a glycated haemoglobin measurement of less than 6%. The study received ethical approval from the Cambridge Local Research Ethics Committee, and participants provided informed consent.

#### EPIC-Norfolk

The EPIC-Norfolk case-control study is nested within the EPIC-Norfolk Study, a population based cohort study of European men and women aged 40-78 years. Both the case-control (2) and full cohort (3) study have been previously described in detail. Briefly, the case-control study consists of 417 incident type 2 diabetes cases and two sets of 417 controls, each matched in terms of age, sex, general practice, recruitment date, with one set additionally matched for BMI. A case was defined by a physician's diagnosis of type 2 diabetes, with no insulin prescribed within the first year following diagnosis, and/or HbA<sub>1c</sub> > 7% at the health check. Controls were randomly selected from the EPIC-Norfolk cohort from among those without diabetes, cancer, stroke, or myocardial infarction at baseline and who had not developed diabetes by the time of selection. Potential controls with measured HbA<sub>1c</sub> levels > 6% were excluded. The EPIC-Norfolk study was approved by the Norfolk Local Research Ethics Committee.

#### Exeter

The diabetic subjects from Exeter came from two sources (i) a consecutive-case series of patients with T2D diagnosed before 45 years from North and East Devon (4). The patients were unrelated and recruited through questionnaires distributed through general practitioners (97% agreed to send out questionnaires, >70% return rate and >90% recruitment of those identified through the questionnaires). Validation of the diagnosis of diabetes was based on either current prescribed treatment with sulphonylureas, biguanides and/or insulin, or, in the case of individuals treated with diet alone, historical or contemporary laboratory evidence of hyperglycaemia (as defined by present WHO guidelines). All patients were off insulin for at least 1 year after diagnosis, and patients were excluded if they had pancreatic autoantibodies (GAD), first degree history of type 1 diabetes or clinical features (or DNA test results) suggestive of monogenic diabetes (4). (ii) Proband from a collection of type 2 diabetes families that had either both parents available, or one parent and at least two siblings (5). Only subjects collected in Exeter were used in this study. The sex matched controls are taken from the parents in the Exeter Family Study, a cohort study of newly born babies and both their parents (6). This study recruits from central Exeter so the controls come from a similar geographical region as the cases. Diabetes and hyperglycaemia were excluded by measuring fasting glucose and HbA<sub>1c</sub>. In total 601 cases and 610 controls were included in this study. Informed consent was obtained from all participants.

#### ADDITION/Ely

Cases were participants from the UK Cambridge arm of the ADDITION trial, which aims to evaluate whether screening for prevalent undiagnosed Type 2 diabetes is feasible, and whether subsequent optimised intensive treatment of diabetes is feasible and beneficial (7). All cases were aged 40–69 and screen detected using OGTT and WHO diagnostic criteria. We used participants from the Medical Research Council (MRC) Ely study as controls—a population-based study of white European men and women aged 35 to 79 years and from a similar population sampling frame as the Cambridge arm of the ADDITION study (8). Ely Study participants were defined as cases or controls based on their OGTT (WHO diagnostic criteria). For this analysis, the ADDITION case-control study comprised 926 cases and 1497 controls. The Cambridge Research Ethics Committee approved both studies.

#### Ashkenazi

Of the cases, 303 are from the multiplex-affected sibships that were ascertained for the genome scan described by Permutt et al, 2001 (9). The cases are of Ashkenazi Jewish origin, defined as having all four grandparents born in Northern or Eastern Europe. Subjects with known or suspected Sephardic Jewish or non-Jewish ancestry were excluded. T2D was initially defined according to World Health Organization criteria (fasting glucose 140 mg/dl on two or more occasions, or random glucose 200 mg/dl on two or more occasions). Their average age at ascertainment was 60 years. Average age at diagnosis was 47 years and average duration of diabetes was 13 years (range 0–47). In this population, the incidence of type 1 diabetes is relatively low therefore anti-GAD or anti-islet cell antibody titers were not routinely measured. The additional 627 cases were ascertained as part of a study with the dual aim of looking for diabetes related genes and for genes related to the risk of developing diabetic complications. This group has an average age at ascertainment of 65.8 years, age of diagnosis of 46.8 years and duration of diabetes of 19.1 years. The Ashkenazi control samples consist of 149 elderly subjects (average age 76 years) with no personal or first-degree family history of T2D. The remaining 312 samples were obtained from The National Laboratory for the Genetics of Israeli Populations at Tel Aviv University, Israel. The institutional review boards of Washington University (St. Louis, MO) and Hadassah University Hospital (Jerusalem, Israel) approved the study.

#### Västerbotten

Twelve-hundred-ninety-six adults with type 2 diabetes were identified through registries covering the county of Västerbotten in northern Sweden, and 1,412 non-diabetic individuals, group matched on age, sex, examination date and geographic region of residence, were selected from the Västerbotten Intervention Programme (VIP) as controls. Virtually all of these individuals were European whites. Type 2 diabetes was determined using the 1999 diagnostic criteria of the World Health Organization. Participants with fasting capillary glucose concentrations <7.0mmol/l and no document history of diabetes underwent a 75g anhydrous oral glucose tolerance test. Accordingly, control subjects were those without a documented history of diabetes and with glucose concentrations below the thresholds for type 2 diabetes. Type 2 diabetes in the case group was defined by clinical diagnoses. All living participants provided written informed consent. Ethics permission was obtained from the Local Research Ethics Committee of Umeå University and approval for genetics investigations in this material was granted by the Swedish Data Inspection Board. Protocols for clinical measurements used in this study have been described previously (10).

### **Selection of conserved regions for sequencing**

MultiPIP-maker (<http://pipmaker.bx.psu.edu/pipmaker/>) and VISTA MLAGAN ([http://lagan.stanford.edu/lagan\\_web/index.shtml](http://lagan.stanford.edu/lagan_web/index.shtml)) were used to create alignments of human *WFS1* genomic sequence and 5kb flanking regions with chimp, macaque, dog, cow, mouse and rat, and the Dcode ECR browser (<http://ecrbrowser.dcode.org/>) was used to create alignments with mouse, dog, macaque, opossum, chicken, frog and fugu pufferfish. Conserved sequence >100bp with >80% sequence identity between human and at least one other species were selected for sequencing (two regions in intron 1: NCBI B36 coordinates 6325012-6325193 (181 bp) and 6325875-6326013 (138 bp), and two regions upstream of *WFS1*: 6321756-6321858 (102 bp) and 6322195-6322297 (102 bp)).

### **PCR and sequencing**

PCR was performed on genomic DNA from Cambridgeshire case-control participants, or genomic DNA randomly preamplified in GenomiPhi reactions (GE Healthcare UK, Chalfont St. Giles, UK) from ADDITION and Ely study participants. PCR was performed using standard conditions and products purified using exonuclease I and shrimp alkaline phosphatase (USB Corporation, Cleveland, OH). Bi-directional sequencing was performed using Big Dye Terminator 3.1 kit (Applied Biosystems, Foster City, CA).

### **Tagging SNP selection**

Tagging SNPs were selected to cover variants detected by sequencing of a subset of cases (N=24) and controls (N=68) from the Cambridgeshire case-control study. The tagging SNPs also included four additional variants not covered by sequencing (rs4689391, rs752854, rs6446482, and rs3821943) that were genotyped as part of the original study (11) (62 variants in total). For reasons of power, variants with MAF<0.05 were excluded unless they altered the amino acid sequence, leaving 49 variants. Linkage disequilibrium (LD) was calculated using Haploview v4.0 (<http://www.broad.mit.edu/mpg/haploview>), and tagging SNPs were selected by Tagger using an  $r^2$  threshold of 0.8, force including non-synonymous variants. Thirty tagging SNPs (including the seven variants genotyped by the original study) were selected to cover the 49 *WFS1* variants (Online Appendix Figure 2). An additional tagging SNP, rs12642481, was required to cover variation in HapMap CEU trios.

### **Quality control**

Of 31 tagging SNPs genotyped in Cambridgeshire and EPIC (7 of which had already been genotyped in these populations (11)), three - rs7655482, rs1046316, and *WFS1\_K800E* - failed during manual confirmation of the genotype clusters. All remaining SNPs were checked for deviation from Hardy-Weinberg equilibrium ( $P<0.001$ ), low call rates ( $N<85\%$ ) and significant discrepancy in call rate between cases and controls ( $P<0.001$ ). All failed SNPs except *WFS1\_K800E* and *WFS1\_V871M* were imputed, and *WFS1\_V871M* was tested in Cambridgeshire and ADDITION/Ely samples as part of the low frequency variant analysis. For the low frequency variant analysis, variants and samples with call rate<85% were excluded from analysis (2 synonymous, 1 non-synonymous, and 2 non-coding variants, all with MAF<0.001, were eliminated). All common variants were also tested for deviation from Hardy-Weinberg equilibrium and for statistically significant differences in call rate between cases and controls using the  $\chi^2$  statistic (1df) in Stata SE9.

## **Imputation**

The best guess genotypes of ungenotyped SNPs were imputed in Cambridgeshire and EPIC separately using BIMBAM software (<http://stephenslab.uchicago.edu/software.html>). SNPs that failed QC were not used to impute untyped SNPs but were instead imputed themselves. Using LD patterns between variants in the 96 sequenced Cambridgeshire case-control samples, we attempted to impute 39 additional variants detected by sequencing. Of these we were able to impute genotypes of 25 additional variants in all Cambridgeshire and EPIC samples. The other fourteen variants were imputed to be monomorphic in Cambridgeshire and EPIC-Norfolk and were therefore excluded from further analysis. This is probably because these fourteen variants were rare ( $MAF < 0.05$ ) and were not correlated with any genotyped SNPs. We also used LD patterns in HapMap CEU trios to attempt to impute 89 HapMap SNPs in the interval between recombination hotspots flanking the association signal. Of these, 73 passed quality control (no deviation from HWE,  $P > 0.001$ ). Thirty-two successfully imputed HapMap SNPs overlapped with variants imputed from sequencing data or those directly genotyped, therefore a total of 66 additional variants were imputed in total. Genotyped and imputed data (89 variants in total) covered 96% of Cambridgeshire variants (all but two low frequency, non-synonymous changes) and 100% of HapMap SNPs.

## **ONLINE APPENDIX RESULTS**

### **Analysis of low frequency variants**

#### **Mutation load**

As a small number of individuals carried more than one rare non-synonymous allele, we used logistic regression to assess the trend in odds of disease with increasing mutation load (Online Appendix Table 4) but there was no significant association with risk of T2D ( $OR = 1.01 \pm 0.12$ ,  $P = 0.937$ ). There was also no statistically significant trend in T2D risk with increasing numbers of inferred mutations ( $OR = 0.98 (0.68-1.41)$ ,  $P = 0.913$ ), or synonymous mutations ( $OR = 1.32 \pm 0.22$ ,  $P = 0.089$ ).

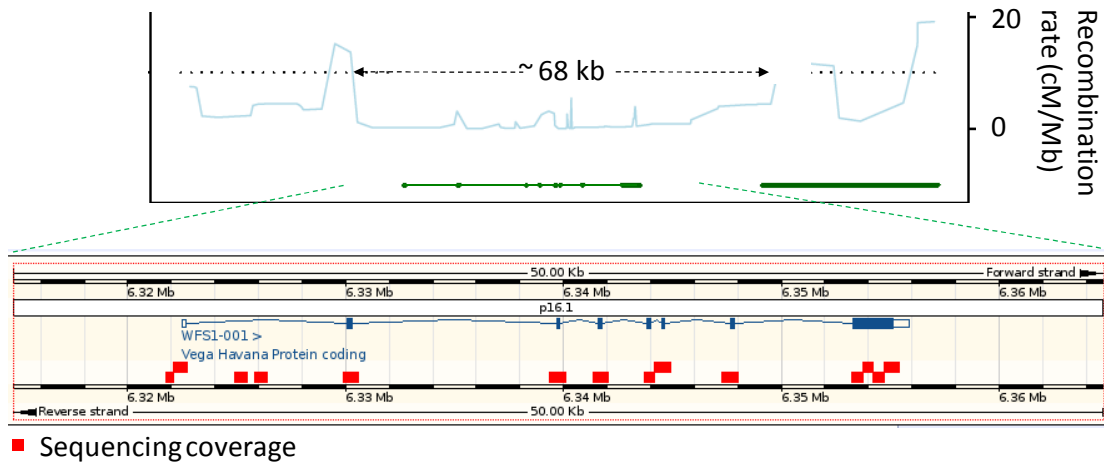
#### **PANTHER scores for rare variants**

In an exploratory analysis we assessed differences in the load of rare ( $MAF < 0.01$ ) nonsynonymous variants between Cambridgeshire, ADDITION/Ely cases and controls, with mutations weighted by how likely they are to have deleterious effects on protein function. Instead of assigning carriers of mutations a score of 1 (as before), we weighted their score based on the PANTHER pdeleterious score for the mutation(s) they were carrying. In other words, their score was now the sum total of the pdeleterious scores of all the rare ( $MAF < 0.01$ ) non-synonymous alleles they were carrying. However, there was no significant difference in mean score between cases and controls in a two sample T-test ( $P = 0.5926$ ).

#### **Combined Multivariate and Collapsing (CMC) method**

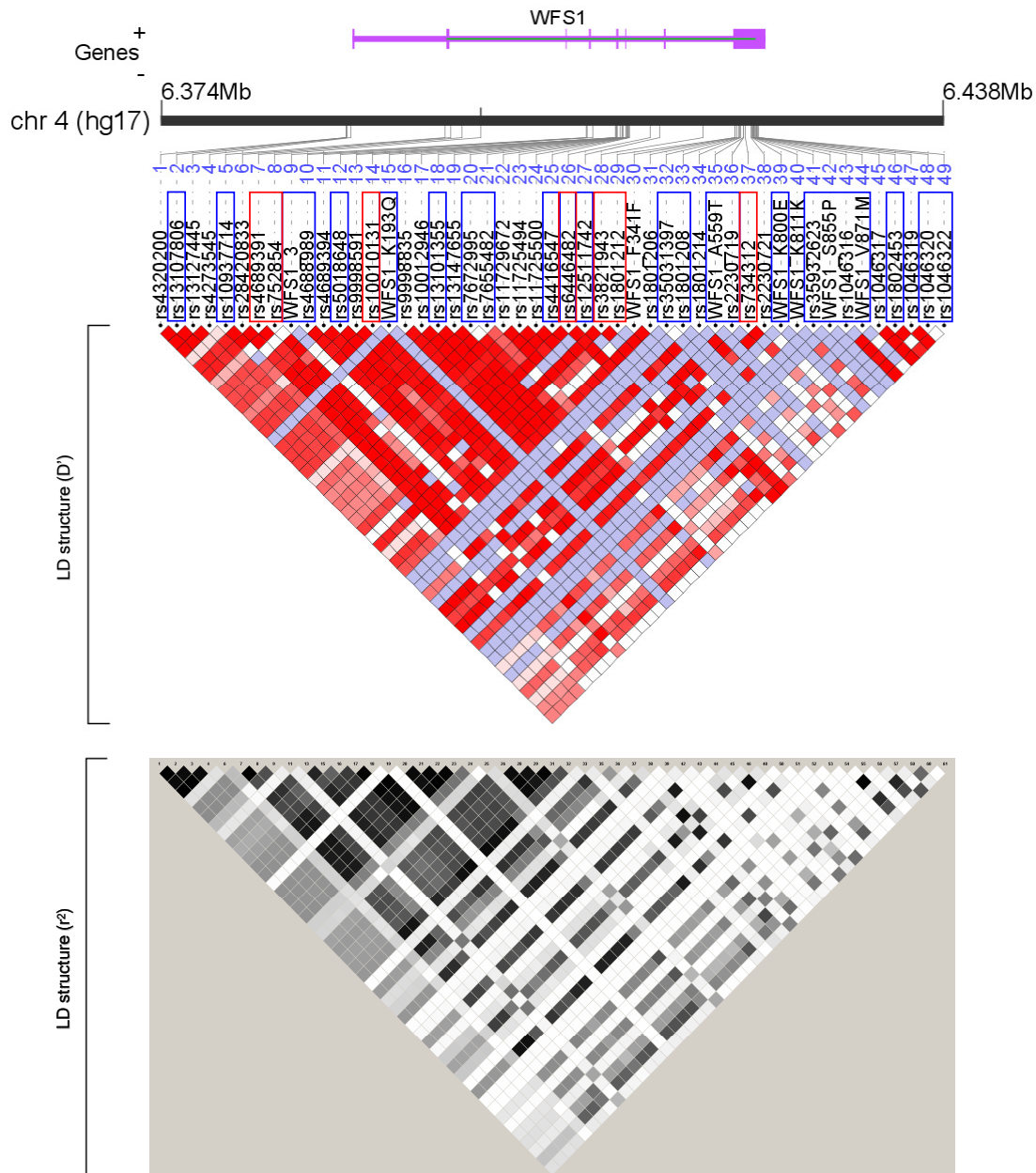
Finally, collapsed rare ( $MAF < 0.01$ ) and intermediate frequency putative functional variants were analysed using the CMC method (12). Hotelling's  $T^2$  test was used as the multivariate test. There was no statistical association between the three marker groups and T2D ( $P = 0.286$ ).

## ONLINE APPENDIX TABLES AND FIGURES



**Online Appendix Figure 1 Schematic of the region between recombination hotspots surrounding the WFS1 gene.** The blue line in the top graph represents the recombination rate. The distance between recombination hotspots is approximately 68 kb. The bottom panel (from Ensembl) is zoomed in on the WFS1 gene (in blue) with amplicons sequenced as part of this study shown in red. Sequencing covers 9.335 kb of the region.





**Online Appendix Figure 2 Feature map of the *WFS1* gene showing variants discovered during resequencing and tagging variants**

The positions of the 49 common and/or non-synonymous variants detected during sequencing of *WFS1* in 96 Cambridgeshire cases and controls (including 4 additional SNPs genotyped during the original association study) are shown relative to the locus (purple) and chromosome 4 (black bar) (see Online Appendix Methods for details). The seven SNPs typed in the original studies are highlighted in red. Newly selected tagging SNPs are highlighted in blue. The bottom of the figure depicts two LD plots for the *WFS1* locus with pairwise LD values presented for SNPs. The upper plot presents LD as  $D'$  - see figure key for details. The figure was generated using LocusView (T. Petryshen, A. Kirby, M. Ainscow, unpublished software, available from the

Broad Institute, Cambridge, MA (<http://www.broad.mit.edu/mpg/locusview/>). In the lower plot, LD among SNPs is given as  $r^2$ .  $r^2$  values of 1.0 are represented by black diamonds, intermediate  $r^2$  values are shown in grey and  $r^2$  values of 0 as white. This plot was generated using Haploview (13), available from the HapMap website (<http://www.broad.mit.edu/mpg/haploview/index.php>).

**Online Appendix Table 1 Correlations among *WFS1* SNPs associated with T2D in the Cambridgeshire and EPIC case-control studies**

	rs752854	rs4688989	rs5018648	<b>rs10010131</b>	rs13101355	rs7672995	rs6446482
rs752854							
rs4688989	0.71						
rs5018648	0.696	0.988					
<b>rs10010131</b>	0.717	0.963	0.967				
rs13101355	0.702	0.987	0.995	0.962			
rs7672995	0.59	0.7	0.699	0.686	0.7		
rs6446482	0.684	0.923	0.923	0.955	0.919	0.656	
<b>rs1046320</b>	0.655	0.932	0.939	0.92	0.939	0.666	0.883

LD values are  $r^2$ , where 1 denotes complete correlation and 0 denotes no correlation. Blue text highlights the SNPs from the original study described in Sandhu et al. Bold text reveals the most significant SNPs in the original and fine-mapping studies.

**Online Appendix Table 2 Log-likelihood ratio tests assessing the association among SNPs in the *WFS1* gene with risk of type 2 diabetes**

	rs752854	rs4688989	rs5018648	rs10010131	rs13101355	rs7672995	rs6446482	rs1046320
rs752854		0.69	0.41	0.51	0.31	0.29	0.58	0.41
rs4688989	0.45		0.86	0.81	0.50	0.65	0.89	0.58
rs5018648	0.61	0.68		0.83	0.82	0.62	0.82	0.35
rs10010131	0.64	0.82	0.75		0.36	0.73	0.94	0.49
rs13101355	0.86	0.35	0.96	0.68		0.46	0.96	0.26
rs7672995	0.59	0.41	0.35	0.23	0.46		0.30	0.23
rs6446482	0.52	0.63	0.62	0.71	0.52	0.62		0.25
rs1046320	0.48	0.93	0.78	0.91	0.60	0.78	0.81	

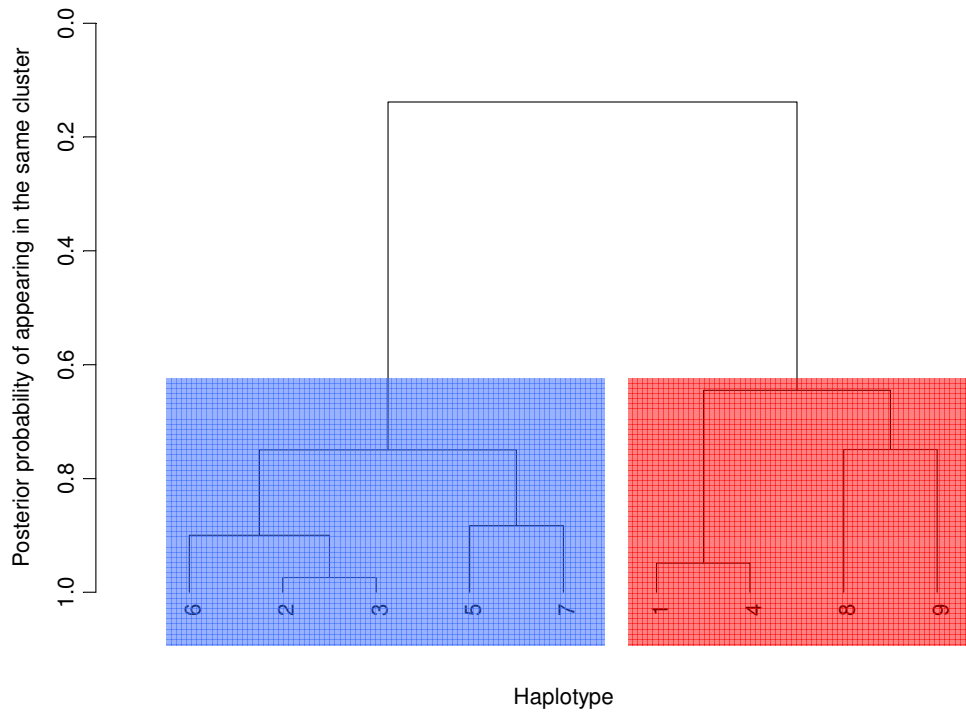
Each number is a P-value (log likelihood ratio test) for addition of the red SNP (log additive) to the model containing the black SNP (2 degrees-of-freedom).



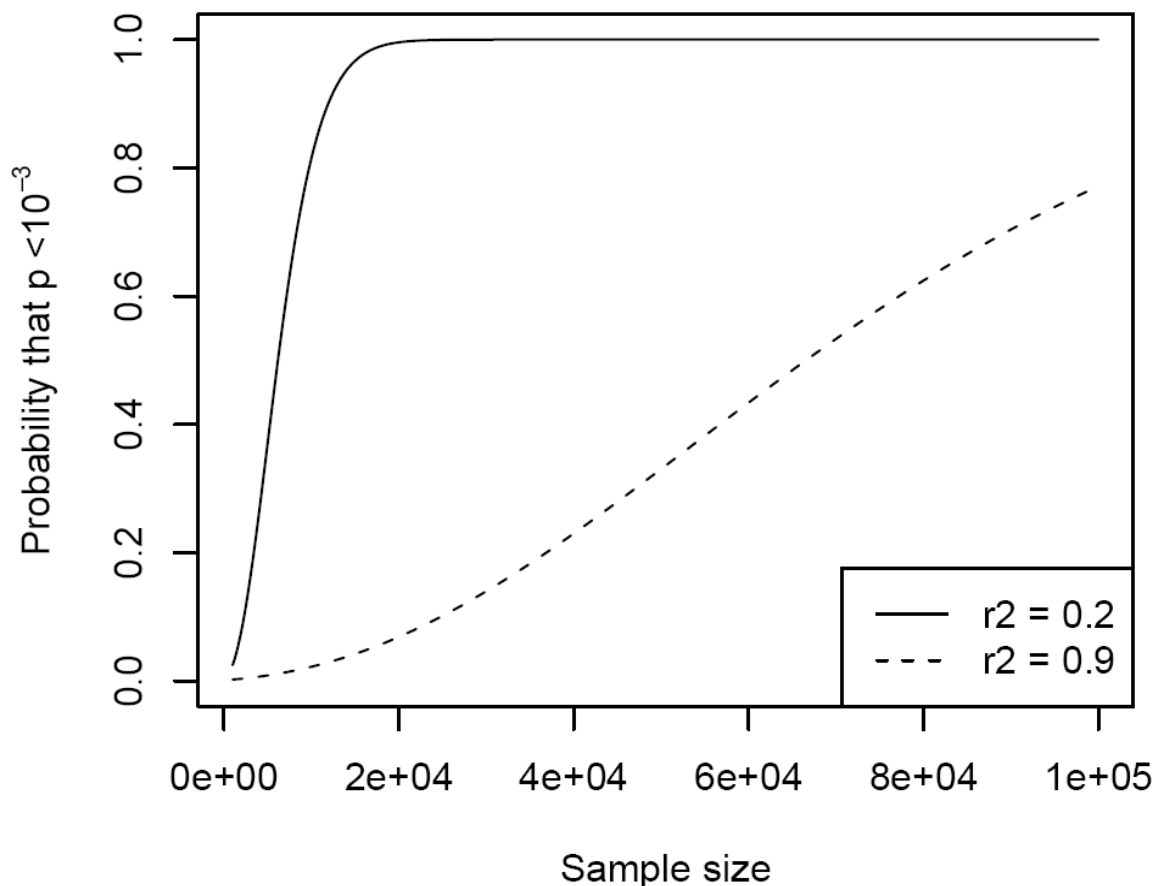
**Online Appendix Table 3 Effect of common *WFS1* haplotypes on risk of type 2 diabetes**

Rank	Haplotype	Frequency (%)	Posterior mean (SD) log-OR	Posterior probability in baseline cluster
1	11111111111111111111	43.5	Baseline	1.000
2	21221222222122112121	14.7	-0.112 (0.070)	0.026
3	22221222222122112121	11.6	-0.111 (0.070)	0.026
4	11111111111211111111	6.1	-0.006 (0.033)	0.949
5	21222222212121122222	4.6	-0.095 (0.080)	0.118
6	22211222222121112121	3.3	-0.110 (0.077)	0.048
7	22211222212121122222	2.3	-0.088 (0.085)	0.128
8	11111111111121212112	2.2	0.001 (0.059)	0.745
9	22211111111121212212	1.2	-0.011 (0.079)	0.576

Haplotypes are clustered by allelic make-up and risk of type 2 diabetes. Haplotypes in cells highlighted in red belong to the baseline cluster and those highlighted in blue belong to a second, lower risk cluster. SNPs in white font can entirely separate the two clusters.



**Online Appendix Figure 3 Clustering of WFS1 haplotypes by allelic make-up and effect on type 2 diabetes risk.** The nine common *WFS1* haplotypes in our samples fall into one of two clusters (red and blue). The red cluster contains the most common (baseline haplotype) and the blue cluster contains haplotypes most protective against type 2 diabetes.



**Online Appendix Figure 4 The relationship between sample size and power to distinguish statistically between the effects on disease risk of a causative SNP and a SNP in high or low linkage disequilibrium.**

This data has been simulated based on two scenarios: an  $r^2 = 0.2$  between a disease-causing SNP and a neutral SNP and an  $r^2 = 0.9$  between a disease-causing SNP and a neutral SNP. What the simulation demonstrates is that in both scenarios, power to statistically distinguish between the effects of these SNPs on disease risk increases as sample size increases. However, lower sample sizes are required to have >80% power to distinguish between less correlated SNPs (for SNPs in LD  $r^2 = 0.2$ , >80% power is reached at ~10,000 samples), whereas larger sample sizes are required to have >80% power to distinguish between highly correlated SNPs (for SNPs in LD  $r^2 = 0.9$ , >80% power is only achieved with sample sizes >100,000). The model assumes the causative SNP affects risk of disease at a magnitude of OR = 0.85 and the threshold for statistical significance is  $10^{-3}$ . This figure was produced by Jason Cooper at the Diabetes and Inflammation Laboratory, Cambridge.

**Online Appendix Table 4 WFS1 variants detected by sequencing 1235 type 2 diabetes cases and 1668 controls**

<b>Genic position</b>	<b>Genomic position</b>	<b>Nucleotide substitution (minor/major)</b>	<b>Protein consequence</b>	<b>MAF</b>	<b>SNP ID</b>
Upstream	6316152	C/T		0.0722	rs11726771
Upstream	6316308	T/C		0.0001	
Upstream	6316341	A/C		0.0001	
Upstream	6316361	T/G		0.0063	
Upstream	6316417	A/T		0.0003	
Upstream	6316465	A/G		0.0001	
Upstream	6316475	T/C		0.0006	
Upstream	6316476	A/G		0.0001	
Upstream	6316614	A/G		0.0001	
Upstream	6316637	C/G		0.001	
Upstream	6321827	T/C		0.0004	
Upstream	6321914	G/T		0.0001	
Upstream	6321944	A/T		0.1856	rs4320200
Upstream	6321972	T/C		0.1835	rs13107806
Upstream	6321981	T/C		0.0001	
Upstream	6322051	C/G		0.1856	rs13127445
Upstream	6322203	G/T		0.0003	
Upstream	6322207	A/C		0.0001	
Upstream	6322317	G/T		0.1781	rs4273545
Upstream	6322384	G/A		0.0001	
Upstream	6322420	T/G		0.0001	
Upstream	6322429	A/C		0.0001	
Upstream	6322436	C/A		0.0001	
5'UTR	6322518	T/C		0.002	
5'UTR	6322519	G/A		0.0004	
5'UTR	6322527	T/C		0.0001	
5'UTR	6322576	G/A		0.0001	
5'UTR	6322580	T/C		0.0001	
5'UTR	6322593	G/C		0.0004	
5'UTR	6322609	A/G		0.0001	
Intron 1	6322673	T/G		0.0001	
Intron 1	6322727	T/C		0.0331	rs6830765
Intron 1	6324924	G/A		0.003	WFS1_1
Intron 1	6324986	A/G		0.0001	
Intron 1	6324997	C/T		0.0001	
Intron 1	6325007	G/A		0.0001	
<i>Intron 1</i>	6325055	A/T		0.0003	
<i>Intron 1</i>	6325091	A/G		0.0003	
Intron 1	6325206	G/T		0.0003	
Intron 1	6325258	G/T		0.0003	
Intron 1	6325330	A/G		0.0001	
Intron 1	6325386	A/G		0.0003	rs7657752

<b>Genic position</b>	<b>Genomic position</b>	<b>Nucleotide substitution (minor/major)</b>	<b>Protein consequence</b>	<b>MAF</b>	<b>SNP ID</b>
Intron 1	6325387	CIT		0.0024	
Intron 1	6325978	TIG		0.0003	
Intron 1	6326039	CIT		0.0003	
Intron 1	6326040	AIG		0.0001	
Intron 1	6326063	TIG		0.0003	
Intron 1	6326161	CIG		0.0001	
Intron 1	6326178	GIA		0.0003	
Intron 1	6326225	AIG		0.0001	
Intron 1	6326253	AIG		0.0023	
Intron 1	6326269	AIG		0.0001	
Intron 1	6326276	TIC		0.0001	
Intron 1	6326376	AIC		0.0001	
Intron 1	6329948	GIA		0.0087	rs10937714
Intron 1	6330010	AIG		0.0003	
Exon 2	6330104	AIC	P7P	0.0003	
Exon 2	6330124	CIT	Q14R	0.0001	
Exon 2	6330139	AIG	P19L	0.0003	
Exon 2	6330151	AIG	A23V	0.0001	
Exon 2	6330160	TIC	R26Q	0.0001	
Exon 2	6330207	AIG	R42X	0.0001	
Exon 2	6330212	AIT	A43A	0.0001	
Exon 2	6330213	TIG	P44T	0.0003	
Exon 2	6330215	TIG	P44P	0.0003	
Exon 2	6330314	AIG	T77T	0.0001	
Exon 2	6330315	TIC	G78R	0.0001	
Intron 2	6330358	TIC		0.0003	
Intron 2	6330360	GIA		0.0001	
Intron 2	6330363	AIG		0.0001	
Intron 2	6330375	TIC		0.0001	
Intron 2	6330405	CIT		0.3429	rs28420833
Intron 2	6330455	AIG		0.0001	
Intron 2	6330456	TIC		0.0001	
Intron 2	6330540	TIG		0.0001	
Intron 2	6339429	TIC		0.0003	
Intron 2	6339464	TIC		0.0026	
Intron 2	6339486	CIG		0.0003	
Intron 2	6339501	TIC		0.0001	
Intron 2	6339641	AIG		0.0006	
Intron 2	6339648	AIG		0.0001	
Intron 2	6339692	TIG		0.0001	
Intron 3	6339815	TIC		0.0001	
Intron 3	6339847	TIC		0.0001	
Intron 3	6339866	AIG		0.0001	
Intron 3	6339907	TIC		0.0105	
Intron 3	6339923	TIC		0.0001	

<b>Genic position</b>	<b>Genomic position</b>	<b>Nucleotide substitution (minor/major)</b>	<b>Protein consequence</b>	<b>MAF</b>	<b>SNP ID</b>
Intron 3	6339931	CIG		0.0001	
Intron 3	6339979	AIC		0.0001	
Intron 3	6340039	AIT		0.002	WFS1_2
Intron 3	6341451	CIT		0.0007	
Intron 3	6341495	AIG		0.3016	rs4688989
Intron 3	6341578	AIG		0.0054	rs4688990
Intron 3	6341579	TIC		0.0006	
Exon 4	6341699	TIC	A134T	0.0004	
Exon 4	6341701	TIC	A134A	0.0003	
Intron 4	6341787	AIG		0.0001	rs7688426
Intron 4	6341904	GIC		0.2982	rs4689394
Intron 4	6343810	GIA		0.2139	rs9998519
Intron 4	6343816	TIC		0.1497	rs10010131
Exon 5	6343835	AIG		0.0001	
Exon 5	6343846	TIC	R161Q	0.0001	
Exon 5	6343905	AIG	L181L	0.0001	
Exon 5	6343928	TIG	N188K	0.0001	
Exon 5	6343941	GIT	K193Q	0.0039	
Intron 5	6344085	CIG		0.0001	
Intron 5	6344132	CIT		0.0004	
Intron 5	6344138	GIC		0.3889	rs9998835
Intron 5	6344150	TIC		0.0001	
Intron 5	6344159	GIC		0.0001	
Intron 5	6344161	AIT		0.0001	
Intron 5	6344210	TIC		0.0001	
Intron 5	6344250	AIT		0.001	
Intron 5	6344251	AIG		0.2425	rs10012946
Intron 5	6344302	CIT		0.0001	
Intron 5	6344339	CIG		0.0011	
Intron 5	6344347	AIG		0.1577	rs13101355
Intron 5	6344375	TIC		0.3827	rs13147655
Intron 5	6344439	AIG		0.0001	
Intron 5	6344454	AIG		0.0001	
Intron 5	6344456	CIG		0.0001	
Intron 5	6344495	AIG		0.0001	
Exon 6	6344567	AIG	P218P	0.0001	
Exon 6	6344596	TIC	R228H	0.0009	
Exon 6	6344597	GIC	R228R	0.3081	rs7672995
Exon 6	6344608	TIC	R232H	0.0001	
Intron 6	6344641	TIC		0.0017	
Intron 6	6344703	GIA		0.112	rs7655482
Intron 6	6344717	AIG		0.0001	
Intron 6	6344730	TIC		0.0024	
Intron 6	6344739	TIC		0.0328	rs11729672
Intron 6	6344756	GIA		0.0641	rs11725494



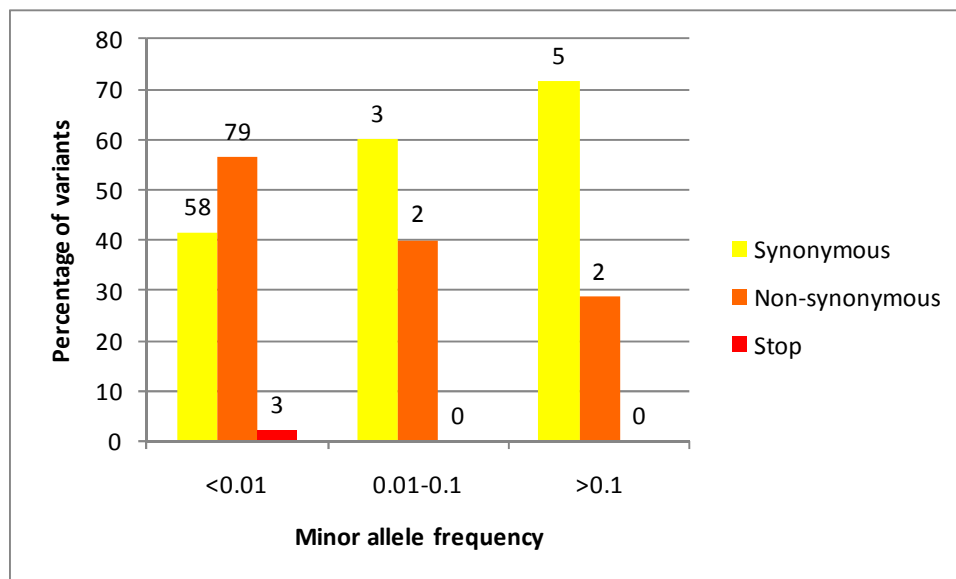
<b>Genic position</b>	<b>Genomic position</b>	<b>Nucleotide substitution (minor/major)</b>	<b>Protein consequence</b>	<b>MAF</b>	<b>SNP ID</b>
Intron 6	6344806	AIG		0.0001	
Intron 6	6344820	GIC		0.0232	rs11725500
Intron 6	6344868	CIT		0.0082	rs4416547
Intron 6	6347348	AIC		0.0115	rs12511742
Intron 6	6347438	TIC		0.0066	WFS1_7
Intron 6	6347519	TIC		0.0001	
Intron 6	6347522	TIC		0.0004	
Intron 6	6347524	CIG		0.0001	
Intron 6	6347582	TIC		0.007	
Intron 6	6347602	TIC		0.0001	
Intron 6	6347603	AIG		0.0001	
Exon 7	6347682	AIG	I242I	0.0001	
Exon 7	6347684	AIG	A243V	0.0003	
Exon 7	6347685	TIC	A243A	0.0001	
Exon 7	6347755	TIC	D267N	0.0007	
Exon 7	6347810	TIC	R285H	0.0004	
Exon 7	6347813	GIA	L286P	0.0001	
Intron 7	6347845	TIC		0.0003	
Intron 7	6347856	AIG		0.0003	
Exon 8	6353353	GIA	A310A	0.0001	
Exon 8	6353386	CIG	T321T	0.0001	
Exon 8	6353398	TIC	N325N	0.0003	
Exon 8	6353400	TIC	A326V	0.0004	
Exon 8	6353402	TIC	L327F	0.0001	
Exon 8	6353408	AIT	F329I	0.0003	
Exon 8	6353420	GIA	V333I	0.2613	rs1801212
Exon 8	6353431	GIC	L336L	0.0001	
Exon 8	6353446	TIC	F341F	0.0718	
Exon 8	6353447	AIG	A342T	0.0003	
Exon 8	6353487	GIT	I355S	0.0001	
Exon 8	6353502	AIG	C360Y	0.0004	
Exon 8	6353548	TIC	R375R	0.0001	
Exon 8	6353557	AIC	T378T	0.0004	
Exon 8	6353571	AIG	R383H	0.0001	
Exon 8	6353576	AIG	E385K	0.0004	
Exon 8	6353608	CIT	V395V	0.3809	rs1801206
Exon 8	6353614	TIC	F397F	0.0003	
Exon 8	6353669	GIA	I416V	0.0001	
Exon 8	6353688	TIC	A422V	0.0004	
Exon 8	6353698	TIC	D425D	0.0001	
Exon 8	6353700	AIG	C426Y	0.0007	rs35218685
Exon 8	6353717	GIC	L432V	0.005	rs35031397
Exon 8	6353720	AIG	A433T	0.0001	
Exon 8	6353725	AIC	V434V	0.0001	
Exon 8	6353731	TIC	T436T	0.0083	

<b>Genic position</b>	<b>Genomic position</b>	<b>Nucleotide substitution (minor/major)</b>	<b>Protein consequence</b>	<b>MAF</b>	<b>SNP ID</b>
Exon 8	6353739	G/T	F439C	0.0003	
Exon 8	6353782	T/C	P453P	0.0001	
Exon 8	6353788	A/G	T455T	0.0001	
Exon 8	6353790	A/G	R456H	0.0417	rs1801208
Exon 8	6353794	T/G	R457S	0.0004	
Exon 8	6353795	C/G	A458P	0.0004	
Exon 8	6353815	T/C	T464T	0.0001	
Exon 8	6353822	T/C	L467L	0.0004	
Exon 8	6353893	T/C	T490T	0.0001	
Exon 8	6353903	A/G	G494S	0.0001	
Exon 8	6353918	T/C	L499F	0.0007	
Exon 8	6353923	C/T	N500N	0.3161	rs1801214
Exon 8	6353929	T/C	S502S	0.0001	
Exon 8	6353975	G/A	M518V	0.0001	
Exon 8	6354003	T/C	T527I	0.0001	
Exon 8	6354020	T/C	P533S	0.0014	
Exon 8	6354031	A/G	V536V	0.0001	
Exon 8	6354055	T/C	S544S	0.0001	
Exon 8	6354056	A/G	V545M	0.0001	
Exon 8	6354067	A/G	L548L	0.0001	
Exon 8	6354068	A/C	L549L	0.0001	rs1801211
Exon 8	6354080	A/G	G553S	0.0003	
Exon 8	6354096	A/G	R558H	0.0001	
Exon 8	6354098	A/G	A559T	0.0037	
Exon 8	6354105	G/T	I561S	0.0004	
Exon 8	6354106	T/C	I561I	0.0006	
Exon 8	6354107	A/G	G562S	0.0001	
Exon 8	6354148	T/C	A575A	0.0562	rs2230719
Exon 8	6354149	A/G	G576S	0.0006	rs1805069
Exon 8	6354151	A/C	G576G	0.0001	
Exon 8	6354166	T/C	G581G	0.0001	
Exon 8	6354183	A/G	R587Q	0.0001	
Exon 8	6354199	T/G	L592L	0.0001	
Exon 8	6354220	A/C	V599V	0.0004	
Exon 8	6354223	T/C	T600T	0.0001	
Exon 8	6354228	T/C	A602V	0.0004	rs2230720
Exon 8	6354229	A/G	A602A	0.0003	
Exon 8	6354255	G/A	R611H	0.2863	rs734312
Exon 8	6354262	A/G	W613X	0.0001	
Exon 8	6354306	T/C	T628M	0.0001	
Exon 8	6354308	T/C	R629W	0.0001	
Exon 8	6354346	A/G	T641T	0.0001	
Exon 8	6354435	T/C	A671V	0.0006	
Exon 8	6354436	A/G	A671A	0.0001	
Exon 8	6354442	T/C	C673C	0.0006	

<b>Genic position</b>	<b>Genomic position</b>	<b>Nucleotide substitution (minor/major)</b>	<b>Protein consequence</b>	<b>MAF</b>	<b>SNP ID</b>
Exon 8	6354443	AIG	G674R	0.0001	
Exon 8	6354449	TIC	R676C	0.0006	
Exon 8	6354450	AIG	R676H	0.0003	
Exon 8	6354451	TIC	R676R	0.0001	
Exon 8	6354475	AIG	A684A	0.0026	
Exon 8	6354476	TIC	R685C	0.0001	
Exon 8	6354477	AIG	R685H	0.0003	
Exon 8	6354522	AIG	W700X	0.0001	
Exon 8	6354530	TIC	R703C	0.0003	
Exon 8	6354545	TIC	R708C	0.0003	
Exon 8	6354547	TIC	R708R	0.0011	
Exon 8	6354560	AIG	D713N	0.0001	
Exon 8	6354571	TIC	A716A	0.0001	
Exon 8	6354572	AIG	E717K	0.0001	
Exon 8	6354580	TIC	A719A	0.0004	
Exon 8	6354581	GIA	I720V	0.0006	rs1805070
Exon 8	6354607	TIC	G728G	0.0006	
Exon 8	6354628	TIC	Y735Y	0.0001	
Exon 8	6354631	TIC	G736G	0.0003	
Exon 8	6354636	AIC	A738D	0.0001	
Exon 8	6354661	AIC	N746K	0.0003	
Exon 8	6354709	AIG	K762K	0.0001	
Exon 8	6354720	CIA	H766P	0.0001	
Exon 8	6354733	TIC	F770F	0.0001	rs34384569
Exon 8	6354737	TIC	R772C	0.0004	
Exon 8	6354745	AIG	K774K	0.0669	rs2230721
Exon 8	6354750	TIA	E776V	0.0046	
Exon 8	6354758	AIG	V779M	0.0006	
Exon 8	6354782	AIG	A787T	0.0001	
Exon 8	6354792	GIC	S790W	0.0001	
Exon 8	6354793	AIG	S790S	0.0003	
Exon 8	6354808	CIG	E795D	0.0001	
Exon 8	6354815	AIG	V798I	0.0001	
Exon 8	6354847	TIC	S808S	0.0003	
Exon 8	6354856	GIA	K811K	0.3936	rs1046314
Exon 8	6354875	TIC	R818C	0.0046	rs35932623
Exon 8	6354889	TIC	L822L	0.0001	
Exon 8	6354892	TIC	I823I	0.0006	rs1801215
Exon 8	6354917	TIC	R832C	0.0003	
Exon 8	6354923	AIG	G834S	0.0003	
Exon 8	6354986	CIT	S855P	0.0001	
Exon 8	6354987	TIC	S855L	0.0003	
Exon 8	6354988	AIG	S855S	0.2484	rs1046316
Exon 8	6355004	AIG	V861M	0.0001	
Exon 8	6355012	TIC	I863I	0.0011	

Genic position	Genomic position	Nucleotide substitution (minor/major)	Protein consequence	MAF	SNP ID
Exon 8	6355019	A/G	D866N	0.0001	rs3821945
Exon 8	6355034	A/G	V871M	0.0129	
Exon 8	6355045	T/C	A874A	0.0001	
Exon 8	6355046	A/G	V875M	0.0003	
Exon 8	6355054	T/C	F877F	0.0001	
Exon 8	6355061	A/G	D880N	0.0001	
Exon 8	6355077	T/C	P885L	0.0001	
Exon 8	6355089	T/C	A889V	0.0001	
3'UTR	6355100	G/T		0.0001	
<i>3'UTR</i>	<i>6355126</i>	<i>T/C</i>		<i>0.0001</i>	
3'UTR	6355143	T/C		0.3131	rs1046317
3'UTR	6355150	G/A		0.0003	
3'UTR	6355165	T/C		0.0001	
3'UTR	6355178	G/C		0.0004	
3'UTR	6355186	A/G		0.0688	rs1802453
3'UTR	6355187	C/T		0.2659	rs1046319
<i>3'UTR</i>	<i>6355218</i>	<i>A/G</i>		<i>0.0001</i>	
3'UTR	6355227	T/C		0.0199	WFS1_8
3'UTR	6355245	G/A		0.303	rs1046320
<i>3'UTR</i>	<i>6355321</i>	<i>G/A</i>		<i>0.0003</i>	
<i>3'UTR</i>	<i>6355337</i>	<i>C/T</i>		<i>0.0006</i>	
3'UTR	6355349	A/G		0.051	rs1046322
3'UTR	6355370	G/A		0.0526	rs1046325

Genomic coordinates are NCBI build 36 (B36). Intron 1 SNPs in blue italics are conserved and within highly conserved regions. 3'UTR SNPs in red italics are rare variants within predicted miRNA seed sequences



**Online Appendix Figure 5** Distribution of types of *WFS1* coding variation discovered during resequencing of cases and controls at different minor allele frequency ranges  
Numbers above the bars are the actual numbers found.

**Online Appendix Table 5 Known or inferred functional *WFS1* mutations**

<b>Chr:base</b>	<b>Variant</b>	<b>rs ID</b>	<b>Biochemical/genetic evidence</b>	<b>Pdel*</b>	<b>SIFT</b>	<b>PolyPhen</b>	<b>MAF in cases</b>	<b>MAF in controls</b>	<b>Reference</b>
4:6330207	R42X		Novel				0	0.0002998	
4:6353402	L327F		Novel	0.55726	affects protein	possibly damaging	0.0004049	0	
4:6353502	C360Y		Novel	0.77597	affects protein	probably damaging	0.0008097	0	
4:6353739	F439C		Novel	0.59591	affects protein	probably damaging	0.0004049	0.0002998	
4:6353903	G494S		Novel	0.40523	affects protein	possibly damaging	0	0.0002998	
4:6354096	R558H		WS	0.61604	affects protein	possibly damaging	0.0004049	0	(14)
4:6354098	A559T		WS and psychiatric disorders	0.34899	tolerated	benign	0.0048583	0.0029976	(15)
4:6354105	I561S		Novel	0.44338	affects protein	possibly damaging	0	0.0005995	
4:6354306	T628M		Novel	0.74256	affects protein	possibly damaging	0.0004049	0	
4:6354308	R629W		WS & reduces half-life of wolframin	0.87775	affects protein	probably damaging	0.0004049	0	(16; 17)
4:6354435	A671V		WS and psychiatric disorders	0.21811	tolerated	benign	0.0012146	0	(15)
4:6354443	G674R		Polymorphism	0.60981	affects protein	probably damaging	0.0004049	0	
4:6354449	R676C		Novel	0.75663	affects protein	probably damaging	0.0004049	0.0002998	
4:6354476	R685C		Polymorphism	0.84434	affects protein	probably damaging	0.0004049	0	
<b>Chr:base</b>	<b>Variant</b>	<b>rs ID</b>	<b>Biochemical/genetic evidence</b>	<b>Pdel*</b>	<b>SIFT</b>	<b>PolyPhen</b>	<b>MAF in cases</b>	<b>MAF in controls</b>	<b>Reference</b>
4:6354545	R708C		WS	0.77798	affects protein	probably damaging	0	0.0005995	(18)
4:6354572	E717K		WS and psychiatric disorders	0.32653	tolerated	benign	0	0.0002998	(19)
4:6354737	R772C		Psychiatric disorders	0.91098	affects protein	probably damaging	0	0.0008993	(19)
4:6354750	E776V		WS	0.49302	affects	probably	0.0040486	0.006295	(15)

					protein	damaging			
4:6354792	S790W		Novel	0.71718	affects protein	possibly damaging	0	0.0002998	
4:6354875	R818C	rs35932623	WS and psychiatric disorders	0.68043	affects protein	possibly damaging	0.0048583	0.0053957	(20)
4:6354917	R832C		Novel	0.75614	affects protein	probably damaging	0.0004049	0.0002998	
4:6355061	D880N		Novel	0.49211	affects protein	possibly damaging	0	0.0002998	
4:6355077	P885L		WS & reduces half-life of wolframin	0.54691	affects protein	probably damaging	0	0.0002998	(16; 21)

\* Pdel score from PANTHER indicates the probability that an amino acid substitution will cause a deleterious effect on protein function based on alignment of evolutionarily related sequences (PANTHER classifies Pdel>0.38 as possibly deleterious). WS = Wolfram Syndrome

**Online Appendix Table 6 Number of cases and controls carrying none, one, two, or three non-synonymous, synonymous, or inferred functional mutations with MAF<0.01**

	Number of mutations	Case	Control	Total	P-value
<b>Non-synonymous (MAF&lt;0.01)</b>	<b>0</b>	1128	1529	2657	0.94
	<b>1</b>	103	130	233	
	<b>2</b>	4	7	11	
	<b>3</b>	0	2	2	
	<b>Total</b>	1235	1668	2903	
<b>Synonymous (MAF&lt;0.01)</b>	<b>0</b>	1173	1596	2769	0.09
	<b>1</b>	55	72	127	
	<b>2</b>	6	0	6	
	<b>3</b>	1	0	1	
	<b>Total</b>	1235	1668	2903	
<b>Inferred mutations (MAF&lt;0.01)</b>	<b>0</b>	1189	1605	2794	0.91
	<b>1</b>	44	62	106	
	<b>2</b>	2	0	2	
	<b>3</b>	0	1	1	
	<b>Total</b>	1235	1668	2903	



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