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**MISSENSE MUTATIONS IN THE AFG3L2 PROTEOLYTIC
DOMAIN ACCOUNT FOR ~1.5% OF EUROPEAN AUTOSOMAL
DOMINANT CEREBELLAR ATAXIAS**

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Key Words:	Autosomal Dominant Cerebellar Ataxia, Spinocerebellar ataxia, SCA28, AFG3L2, mutation screening

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**MISSENSE MUTATIONS IN THE AFG3L2 PROTEOLYTIC DOMAIN
ACCOUNT FOR ~1.5% OF EUROPEAN AUTOSOMAL DOMINANT
CEREBELLAR ATAXIAS**

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ABSTRACT

Spinocerebellar ataxia type 28 is an autosomal dominant form of cerebellar ataxia (ADCA) caused by mutations in *AFG3L2*, a gene that encodes a subunit of the mitochondrial *m*-AAA protease. We screened 366 primarily Caucasian ADCA families, negative for the most common triplet-expansions, for point mutations in *AFG3L2* using DHPLC. Whole-gene deletions were excluded in 300 of the patients, and duplications were excluded in 129 patients. We found six missense mutations in nine unrelated index cases (9/366, 2.6%): c.1961C>T (p.Thr654Ile) in exon 15, c.1996A>G (p.Met666Val), c.1997T>G (p.Met666Arg), c.1997T>C (p.Met666Thr), c.2011G>A (p.Gly671Arg), and c.2012G>A (p.Gly671Glu) in exon 16. All mutated amino acids were located in the C-terminal proteolytic domain. In available cases, we demonstrated the mutations segregated with the disease. Mutated amino acids are highly conserved, and bioinformatic analysis indicates the substitutions are likely deleterious. This investigation demonstrates that SCA28 accounts for ~3% of ADCA Caucasian cases negative for triplet expansions and, *in extenso*, to ~1.5% of all ADCA. We further confirm both the involvement of *AFG3L2* gene in SCA28 and the presence of a mutational hotspot in exons 15-16. Screening for SCA28, is warranted in patients who test negative for more common SCAs and present with a slowly progressive cerebellar ataxia accompanied by oculomotor signs.

Key Words: Autosomal Dominant Cerebellar Ataxia; Spinocerebellar ataxia; SCA28; AFG3L2; mutation screening

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INTRODUCTION

Autosomal dominant cerebellar ataxias (ADCAs, or SCAs) are a group of clinically heterogeneous neurodegenerative disorders primarily characterized by imbalance, progressive gait and limb ataxia, and dysarthria (Harding, 1993). The clinical phenotype is often complicated by the presence of additional neurological signs, which are highly variable among and within families (Finsterer, 2009; Schols, et al., 2004). SCAs are among the most genetically heterogeneous neurodegenerative diseases, at present nearly thirty genetically distinct subtypes have been defined (<http://www.neuro.wustl.edu/neuromuscular/ataxia/domatax.html>). In most countries, an expansion of a coding CAG-triplet repeat, resulting in production of a protein with an abnormal polyglutamine (polyQ) stretch, accounts for 40-60% of ADCA. In some populations, as in Southern Brazil, founder effects have raised this ratio up to ~100% (Jardim, et al., 2001; Storey, et al., 2000). Less common SCAs are caused by other types of mutations: the expansion of a tri- or penta-nucleotide in untranslated regions (CAG in SCA12, ATTCT in SCA10, and TGGAA in SCA31), by point mutations (SCA5, SCA11, SCA13, SCA14, and SCA27), or by gene dosage anomalies (SCA15 and SCA20) (Fahey, et al., 2005; Holmes, et al., 1999; Houlden, et al., 2007; Ikeda, et al., 2006; Knight, et al., 2008; Matsuura and Ashizawa, 2002; Sato, et al., 2009; van de Leemput, et al., 2007; Waters, et al., 2006). Most recently, point mutations of *AFG3L2* (OMIM #610246) have been shown to cause SCA28 (Di Bella, et al., 2010; Edener, et al., 2010). *AFG3L2* was originally cloned as a paralogue of the *SPG7* gene (encoding for paraplegin, OMIM *602783) (Banfi, et al., 1999), whose loss-of-function causes an autosomal recessive form of hereditary spastic paraplegia (HSP) (Casari, et al., 1998). *AFG3L2* encodes for a subunit of the hetero-oligomeric *m*-AAA protease (ATPases associated with various cellular activities), a component of the mitochondrial ATP-dependent metalloprotease located on the inner mitochondrial membrane. The AAA metalloproteases take part in proteolytic quality control and chaperon-like activities in mitochondria by degrading misfolded proteins and promoting the assembly of respiratory chain complexes (Leonhard, et al., 1999).

Here we examine the prevalence of SCA28 among Caucasian ADCA families, further defining the

SCA28 Cagnoli C

scope and pathogenicity of *AFG3L2* mutations and the clinical features of this disease.

PATIENTS AND METHODS

Patients

We recruited 366 index cases with progressive cerebellar ataxia and a family history of a similar disorder (defined as the presence of at least two affected individuals in at least two consecutive generations). The mean age at onset was 41.1 ± 18.3 years (range: 1-79 years; onset defined as the year of the first symptoms, as reported by the patient or the family). When possible, additional family members were recruited if a mutation in *AFG3L2* was found in a proband. Most patients originated from France (n= 240), but the collection also included patients from other countries in Europe (n= 50), the United States (n =66, predominately of European origin), North-Africa/Middle-East (n= 6), French West-Indies (n= 3) and Madagascar (n= 1). We excluded individuals with pathogenic expansions in the SCA1-3, 6, 7, 17 and DRPLA loci, or recurrent mutations in the SCA5, SCA13, SCA14, or FGF14/SCA27 loci (Klebe, et al., 2005) (Stevanin et al., unpublished data). Clinical and genetic studies were performed after obtaining informed consent from all participants or the parents of participating minors and with the approval of the local ethics committees. Ninety-five French and 95 Italian healthy controls were examined to establish the frequency of variants in the normal population.

Mutation screening

The 17 coding exons of the *AFG3L2* gene (RefSeq NM_006796.1) were PCR amplified using primer and conditions reported in Supp. materials and methods and Supp. Table S1. Mutation analysis was performed on the amplicons using a DHPLC WAVE System (Transgenomics) with melting temperatures (T_m and $T_m+2^\circ\text{C}$) determined by DHPLC Melt software (Jones, et al., 1999) (Supp. Table S1). A normal control profile was always compared with that from a patient. PCR products showing a DHPLC peak shift were purified using the ExoSAP method (MBI-Fermentas,

SCA28 Cagnoli C

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3 Vilnius, Lithuania), and directly sequenced using the Big-Dye terminator cycle sequencing kit ver.
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5 1.1 and an ABI Prism 3100 Avant automatic sequencer (Applied Biosystems, Foster City, CA). The
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7 17 coding exons of the *SPG7* gene (RefSeq NM_003119.2) were also amplified and directly
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9 sequenced following primers and conditions reported in Supp. materials and methods and Supp.
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11 Table S2.
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15 *AFG3L2* gene copy number was evaluated by quantitative duplex PCR (qPCR) using a Roche-UPL
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17 assay centered on exon 14 (Roche-Diagnostics, Mannheim, Germany). The gene dosage strategy
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19 was based on the relative amplification of the target sequence (*AFG3L2*) and the co-amplified
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21 internal standard *RNaseP* using the comparative delta Ct method described elsewhere (Livak and
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23 Schmittgen, 2001) (see Supp. materials and methods).
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27 Nucleotide numbering throughout the paper follows cDNA numbering: +1 refers to the first
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29 nucleotide of the ATG translation initiation codon of the corresponding RefSeq, according to
30
31 journal guidelines (www.hgvs.org/mutnomen). The initiation codon is codon 1.
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34 35 36 *Haplotype reconstruction*

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38 Five 6-FAM fluorescently-labelled microsatellites spanning ~10 Mb on chromosome 18, including
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40 two markers telomeric (*D18S1150* and *D18S53*) and three centromeric (*D18453*, *D18S1104*, and
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42 *D18S1107*) to *AFG3L2* were genotyped in all available subjects with a specific mutation whenever
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44 the mutation occurred in at least two unrelated families. We used standard PCR conditions and
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46 primers described at www.genome.ucsc.edu. Haplotypes were manually reconstructed.
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50 51 52 *Homology modeling of AFG3L2, in-silico*

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54 The three-dimensional model of human AFG3L2 protein was generated using “homology
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56 modelling”, a bioinformatics algorithm that builds a model of the "target" protein based on the
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58 homology of its amino acid sequence with that of proteins of known structure (Marti-Renom, et al.,
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60 2000). The AFG3L2 protein model was constructed with the NEST application (Petrey, et al.,

SCA28 Cagnoli C

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3 2003), using the *T. maritima* FtsH 2CE7 crystal structure as a template (see Supp. materials and
4 methods). Mutations p.Thr654Ile, p.Met666Val, p.Met666Thr, p.Met666Arg, p.Gly671Glu and
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6 p.Gly671Arg were introduced into the model with the Yasara software (<http://www.yasara.org>) and
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8 their consequences were evaluated using a series of bioinformatics tools (see also Supp. materials
9
10 and methods).

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13 Multiple species alignment of AFG3L2 protein was made with the ClustalW software
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15 (<http://www.ebi.ac.uk/Tools/clustalw2/index.html>) using orthologue sequences obtained through
16
17 the Ensembl genome browser (<http://www.ensembl.org>). *In silico* analysis of the possible
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19 pathogenicity of each amino acid substitution was performed with two different applications: (i)
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21 PolyPhen (“Polymorphism Phenotyping”, <http://genetics.bwh.harvard.edu/pph/index.html>),
22
23 selecting the Protein Data-Base (PDB) as a source for sequence alignment, and (ii) SIFT (“Sorting
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25 Intolerant From Tolerant”, <http://blocks.fhcrc.org/sift/>). Possible effects on splicing were checked
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27 using the applications Splice Site Prediction (http://www.fruitfly.org/seq_tools/splice.html) (Reese,
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29 et al., 1997), ESEfinder 2.0 (<http://rulai.cshl.edu/tools/ESE/>) (Cartegni, et al., 2003; Smith, et al.,
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31 2006), and PESXs (<http://cubweb.biology.columbia.edu/pesx/>) (Zhang, et al., 2005). One variant,
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33 predicted to alter splicing, was further investigated using a minigene assay (see Supp. materials and
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35 methods).

36 37 38 39 40 41 42 43 44 45 46 **RESULTS**

47 48 *SCA28 mutations in ADCA families.*

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50 Three-hundred sixty six unrelated patients with ADCA were screened for point mutations in the
51
52 *AFG3L2* gene using DHPLC, followed by direct sequencing of the amplimers with shifted peaks.
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54 We found six missense changes in nine unrelated index cases: eight were French and one was of
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56 Italian origin (9/366, 2.6%): c.1961C>T (p.Thr654Ile) in exon 15, c.1996A>G (p.Met666Val),
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58 c.1997T>G (p.Met666Arg), c.1997T>C (p.Met666Thr), c.2011G>A (p.Gly671Arg) and
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60 c.2012G>A (p.Gly671Glu) in exon 16 (Figure 1). These mutations were not reported as

SCA28 Cagnoli C

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3 polymorphisms in the dbSNP database build 130 (<http://www.ncbi.nlm.nih.gov/projects/SNP/>), and
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5 were not found among 380 French or Italian healthy control chromosomes. DNA from 27 additional
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7 family members in six families was available, which allowed us to verify that the mutation
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9 segregated with the disease and was absent in healthy relatives (Figure 2). The mutations were
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11 located in the peptidase-M41 domain of the AFG3L2 protein. Multiple species alignment showed
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13 that the three amino acids altered by mutations (Thr654, Met666 and Gly671) are conserved
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15 through *Saccharomyces cerevisiae* (Figure 1). The applications PolyPhen and SIFT predicted that
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17 all the amino acid mutations are deleterious. Three mutations (p.Thr654Ile, p.Met666Val and
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19 p.Gly671Arg) were found in two families each. Haplotype reconstruction showed that identical
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21 mutations shared a common haplotype, suggesting that the families have a common ancestor
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23 (Figure 2).
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29 In addition to the six missense mutations, we found 25 variants, 14 of which were neither reported
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31 as polymorphisms in the dbSNP database nor found in healthy controls (Supp. Table S3). Twelve
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33 were intronic nucleotide changes and two were synonymous substitutions. *In silico* analysis of the
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35 effect of each variant on splicing showed that c.293-13_293-14delTT changes the score of the exon
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37 4 acceptor splice site from 0.22 to 0.03. Neither relatives nor cDNA of this patient were available
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39 for further study. We tested the effect of this mutation using a minigene assay, which showed it has
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41 no effect on splicing.
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45 We also excluded whole-gene deletion/duplication of *AFG3L2* in 129/366 subjects (35%) by qPCR
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47 of exon 14, and deletions in 171 patients, who carried one or more heterozygous SNP at DHPLC
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49 and / or direct sequencing.
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55 *3D reconstruction of AFG3L2 and predicted effect of the mutations on intermolecular electrostatic*
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57 *parameters.*
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60 The three-dimensional reconstruction of the C-terminal region of AFG3L2, the homohexameric
complex, and the relative positions of mutated amino acids are depicted in Figure 3A-B. Based on

SCA28 Cagnoli C

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3 this model, the amino acids Met666 and Gly671 are always on the surface of the complex,
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5 regardless of the conformation analyzed, suggesting that these two residues may be involved in
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7 interactions with other molecules. p.Gly671Glu significantly increases the electrostatic potential
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9 difference between the inner-mitochondrial-membrane side and the matrix side of the hexamer,
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11 whereas p.Met666Arg and p.Gly671Arg decreased it (Figure 3C and Supp. Table S4). The other
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13 three mutations do not significantly affect the potential difference (Supp. Table S4). Given that the
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15 central pore of the *m*-AAA complex (Figure 3D) is used to convey substrates to the proteolytic
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17 chamber (Kress and Weber-Ban, 2009), we investigated the effect of the mutations of the amino
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19 acids close to the central pore. As shown in Figure 3E, 3F and Supp. Table S4, p.Gly671Glu
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21 increases the central pore dipole energy, and p.Met666Arg and p.Gly671Arg decreased it. In
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23 addition, we found that all the mutations analyzed decreases the mean interaction energy of the
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25 hexamer, destabilizing the *m*-AAA complex (Supp. Table S5). Taken together, the bioinformatics
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27 data point to a generalized destabilizing effect of the six mutations detected in our patient
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29 population, with p.Met666Arg, p.Gly671Glu, and p.Gly671Arg also affecting the charge of the
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31 hexamer and, in particular, the charge of the translocation channel.
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41 *SPG7 mutation analysis*

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43 Since AFG3L2 and paraplegin can interact to form the multimeric *m*-AAA protease complex, we
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45 speculated that *SPG7* variants could modify the SCA28 phenotype. We screened for *SPG7* variants
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47 by direct sequencing the coding exons of nine SCA28 patients with the earliest onset (AAD-080_9,
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49 AAR-197_1, SAL-872_6, SAL-872_9, SAL-331_11, AAD-444_3, AAD-444_9, AAD-455_19,
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51 AAD-701_21). Two unreported intronic variants were detected: c.1678+13 C>T in subject 701_21;
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53 c.2196+18 C>G in subject 331_11. Neither variant is predicted to alter splicing.
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Clinical features

Table 1 reports the clinical and neuroradiological features of twenty-five SCA28 patients from ten

SCA28 Cagnoli C

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3 families, 14 males and 11 females, clinically examined at a mean age of 45.4 ± 17.7 years (range
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5 10-77 yrs). The mean age at onset was 30.7 ± 16.2 yrs (range: 6-60 yrs). Cerebellar gait ataxia was
6
7 the initial clinical abnormality in all but one patient (AAR-197_8). At examination, cerebellar
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9 ataxia was associated with dysarthria (17/25, 68%), ophthalmoplegia (12/25, 48%) and/or gazed-
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11 evoked nystagmus (13/24, 54%). In addition, saccadic pursuit was noted in 6/16 (37%) and slow
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13 saccades were present in 3/12 (25%). Ptosis was often present (8/19, 42%) and it was not correlated
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15 with disease duration ($p= 0.937$). Summing up gazed-evoked nystagmus, ophthalmoplegia and
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17 ptosis, 19 out of 25 patients had one or more oculomotor anomalies (76%). Six patients had a full
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19 pyramidal syndrome (i.e., increased reflexes and Babinski sign) and gait spasticity was evident in
20
21 one patient (AAR-197_10), two features already described in SCA28 (Mariotti, et al., 2008).
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23 Interestingly, extrapyramidal signs, either dystonia (n=3) or parkinsonism (n=3), were also present
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25 although relatively infrequent (24%). In patient SAL-872_6, the etiology of parkinsonism may have
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27 been related to concomitant treatment with a neuroleptic. Vibration sense at the ankles was
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29 decreased in 9/20 patients (45%), but nerve conduction studies, available for seven patients (five of
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31 whom had vibration sense alterations) were normal, with neurogenic changes on electromyography
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33 observed only in SAL-331_4 and SAL-331_11. Two patients from the same family (SAL-331) had
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35 low verbal IQ (78 and 89, respectively). Cerebral MRI (n=10) or CT scan (n=2) revealed cerebellar
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37 atrophy affecting predominantly the vermis. The brainstem was normal. A muscle biopsy performed
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39 in one patient was unremarkable.
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48 Overall, the disease was slowly progressive and rarely severe. Only patient SAL-444_3 needed help
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50 for walking, 29 years after the onset of symptoms, and five clinically affected patients of two
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52 families were not functionally incapacitated (SAL-701_29, SAL-701_021, AAD-080_56, AAD-
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54 080_57 and AAD-080_58).
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DISCUSSION

The *m*-AAA protease is an ATP-dependent proteolytic complex located in the matrix side of the

SCA28 Cagnoli C

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3 inner mitochondrial membrane and involved, in yeast, in protein quality control and protein
4 processing (Arlt, et al., 1996; Esser, et al., 2002; Leonhard, et al., 2000). Human *m*-AAA protease
5 consists of two isoenzymes: (i) a hetero-oligomeric complex formed by paraplegin (SPG7) and
6 AFG3L2, and (ii) a homo-oligomeric AFG3L2 complex. Loss-of-function mutations in the *SPG7*
7 gene cause an autosomal recessive hereditary spastic paraparesis (HSP), whereas *AFG3L2*
8 mutations cause SCA28 (Di Bella, et al., 2010; Edener, et al., 2010). In 366 unrelated ADCA
9 patients of predominately European ancestry, we found nine affected subjects harboring six
10 different *AFG3L2* mutations, clustered in exons 15 (p.Thr654Ile) and 16 (p.Met666Arg,
11 p.Met666Thr, p.Met666Val, p.Gly671Arg and p.Gly671Gln). The pathogenicity of these missense
12 substitutions is supported by multiple lines of evidence: (i) in families where more than one affected
13 subject was available, we demonstrated that the mutation segregated with the disease and was not
14 present in healthy subjects of the family. In one of these families (AAD-080), a positive multipoint
15 LOD score of 2.54 at D18S853 highly suggested its linkage to the SCA28 locus (data not shown).
16 Moreover, STR-analysis revealed that patients from different families harboring the same mutation
17 shared a common haplotype, suggesting the presence of common ancestors. (ii) Mutations were not
18 found in 380 control chromosomes. (iii) The mutated amino acids are evolutionary conserved up to
19 the *S. cerevisiae* orthologous protein Yta10, and all are located in the M41-proteolytic domain of
20 the protein. (iv) Bioinformatic analysis of the protein showed that the mutations alter the interaction
21 of each monomer with the other five, symptomatic of an altered stability of the complex. Yeast
22 complementation studies, beyond the scope of this investigation, would further establish the
23 functional significance of these mutations.

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53 The *m*-AAA mechanism of action is still under study, although recent investigations of its bacterial
54 homologue FtsH indicate that the protease ring is stationary and that coordinated ATP-driven
55 movements of each monomer accomplish substrate unfolding and translocation to the proteolytic
56 chamber (Augustin, et al., 2009; Bieniossek, et al., 2009). The electrostatic potential difference of
57 the complex and the dipole of the central pore are altered in three of the six mutations that we
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SCA28 Cagnoli C

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3 detected. Furthermore, all six mutations diminish the interaction energy among monomers. These
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5 effects of the mutations suggest that each may have a negative effect on the *m*-AAA complex
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7 activity. For instance, the capacity of the complex to move substrates towards the proteolytic
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9 chamber through ATPase activity may be impaired by weaker interaction among monomers or by
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11 abnormal electrostatic potentials through the central pore (Striebel, et al., 2009).
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15 Five of the six *AFG3L2* missense mutations previously reported, cluster in the proteolytic domain at
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17 amino acids Ser674, Glu691, Ala694, Glu700, and Arg702 (exon 16) (Di Bella, et al., 2010;
18
19 Edener, et al., 2010). We found different mutations affecting the same amino acids (p.Gly671Arg
20
21 and p.Gly671Glu; p.Met666Arg, p.Met666Thr, and p.Met666Val) indicating that exons 15 and 16
22
23 are mutational hotspots for SCA28, and consistent with the hypothesis that disruption of the
24
25 peptidase domain is critical to the pathogenesis of SCA28.
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29 Recent evidences from animal models also support the pathogenicity of *AFG3L2* mutations: *Afg3l2*
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31 knock-out mice presents with a severe neuromuscular phenotype, caused by a defect in motor axon
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33 and cerebellar development (Maltecca, et al., 2008), whereas the *Afg3l2*^{Emv66} mouse, carrying a
34
35 heterozygous loss-of-function mutation, develops a phenotype with similarities to SCA28
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37 (Maltecca, et al., 2009). Whole gene deletions were excluded in 300/366 patients and duplications
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39 in 129/366, suggesting that *AFG3L2* deletions/duplications are not common in ADCAs. Moreover,
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41 two related patients with an 18p deletion encompassing *AFG3L2* reportedly have not developed
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43 ataxia (Nasir, et al., 2006). Copy number variants encompassing part or whole of *AFG3L2* gene
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45 exist in normal individuals (Kim, et al., 2009; Redon, et al., 2006). Therefore, in addition to the
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47 results of our screening designed to detect only large deletions and duplications, the absence of a
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49 phenotype in humans with duplications and deletions affecting *AFG3L2*, and the different
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51 phenotype observed in *Afg3l2* null mice compared to *Afg3l2*^{Emv66} mice, suggest that heterozygous
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53 deletions or duplications of the *AFG3L2* gene may not cause SCA28. Looking at rearrangements in
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55 SCA28 should therefore not be prescribed in clinical practice.
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Our survey shows that SCA28 is rare among European ADCA patients, accounting for ~3% of the

SCA28 Cagnoli C

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3 analyzed cases and ~1.5% of all ADCAs. As a comparison, polyglutamine expansions account for
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5 about 50%. The clinical and neuroradiological phenotype of the newly ascertained families is
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7 similar to that of the SCA28 patients reported so far (Cagnoli, et al., 2006; Edener, et al., 2010;
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9 Mariotti, et al., 2008): disease onset is in adulthood and the disease progresses slowly with
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11 preserved functional capacity, decades after the diagnosis. The mean age at onset and age at onset
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13 variability is similar in our series and in the reported families: in five patients the onset was above
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15 50 yrs, whereas two subjects were symptomatic at 6 and 8 yrs. Even in the young onset cases, the
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17 disease progressed relatively slowly, a much different pattern than has been observed in the
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19 polyglutamine diseases and evidence that SCA28 is not caused by cryptic polyglutamine expansion.
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21 Interestingly, extrapyramidal features were not rare in our series of patients in contrast to previous
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23 reports, of potential value in speculating on the clinical diagnosis prior to genetic testing. As in
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25 many genetic diseases, particularly in those affecting the nervous system, the extent to which
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27 environmental factors affect disease phenotype, including onset age, selective neuronal
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29 involvement, and disease progression, remains to be determined.
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36 Given the signs and symptoms of the disease, we suggest that the diagnosis of SCA28 should be
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38 considered in the presence of slowly progressive ataxia associated with oculomotor abnormalities.
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40 So far, *AFG3L2* mutations seem to cluster in exons 10, 15, and 16, which should facilitate genetic
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42 diagnosis in clinical practice and a better understanding of the function and malfunction of
43
44 *AFG3L2*.
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50 **Acknowledgments.**

51
52 We are grateful to the family members for their participation, to the DNA and Cell bank of the
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54 Centre de Recherche de l'Institut du Cerveau et de la Moelle épinière for technical assistance and to
55
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57
58 and Y Boukhrich as well as Prof A Harding for referring some of the patients and for clinical
59
60 examinations.

SCA28 Cagnoli C

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For Peer Review

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SCA28 Cagnoli C

FIGURE LEGENDS

Figure 1.

Localization of the six *AFG3L2* missense mutations. In the upper panel the amino acid alignment of the *AFG3L2* protein corresponding to a region including a portion of exons 15 and 16 is shown for 13 orthologous proteins from *H. sapiens* to *S. cerevisiae*. The mutated amino acids Thr654, Met666 and Gly671 are highlighted. Below, a scheme of the *AFG3L2* genomic region and the protein are shown. Domain names are: MTS: mitochondrial targeting signal; TM: transmembrane domain; FtsH: Filamentation temperature sensitive H proteolytic domain; AAA: ATPase Associated with different cellular activities.

Figure 2.

Pedigrees of the nine families segregating a *AFG3L2* mutation. Square and circles shadings: white = healthy; black = SCA28; gray = presumed SCA28; hash = asymptomatic subject carrying a disease haplotype. Five STR markers (on the left) were used to reconstruct the SCA28-surrounding haplotype that suggest a common ancestor for p.Thr541Ile, p.Met666Val and p.Gly671Arg mutations, in two families each. All subjects whose DNA was available (hyphen above the symbol) were tested for the *AFG3L2* mutation segregating in the family.

Figure 3.

Bioinformatics analysis of *AFG3L2* missense changes. Panel A, monomeric structure of the *AFG3L2* protein, with the localization of ATP (yellow), the Zn^{++} ion (pink) and the three mutated amino acids, Thr541 (light blue), Met666 (dark blue) and Gly671 (green). Panel B, matrix-side view of *AFG3L2* hexamer (see panel A for color-code of Zn^{++} and mutated amino acids); a dotted line shows the cross-section level of panel C. Panel C, electrostatic potential at the surface of the *AFG3L2* hexamer viewed from the matrix side (upper row) and from the IMM side (lower row) is

SCA28 Cagnoli C

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3 reported for the mutations changing the potential difference. The mutation analyzed is reported
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5 between the images of the two surfaces; blue = positive charges, red = negative charges; the black
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7 box identifies the central pore magnified in panels E (membrane side) and F (matrix side). In panels
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9 E and F only the charges of the amino acids closer than 10 Å from the geometric center of the
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11 dipole are shown. Panel D, side-view of the hexamer with the localization of the central
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13 translocation channel colored (blue = positive charges, red = negative charges); wt = wild-type;
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15 IMM = inner mitochondrial membrane.
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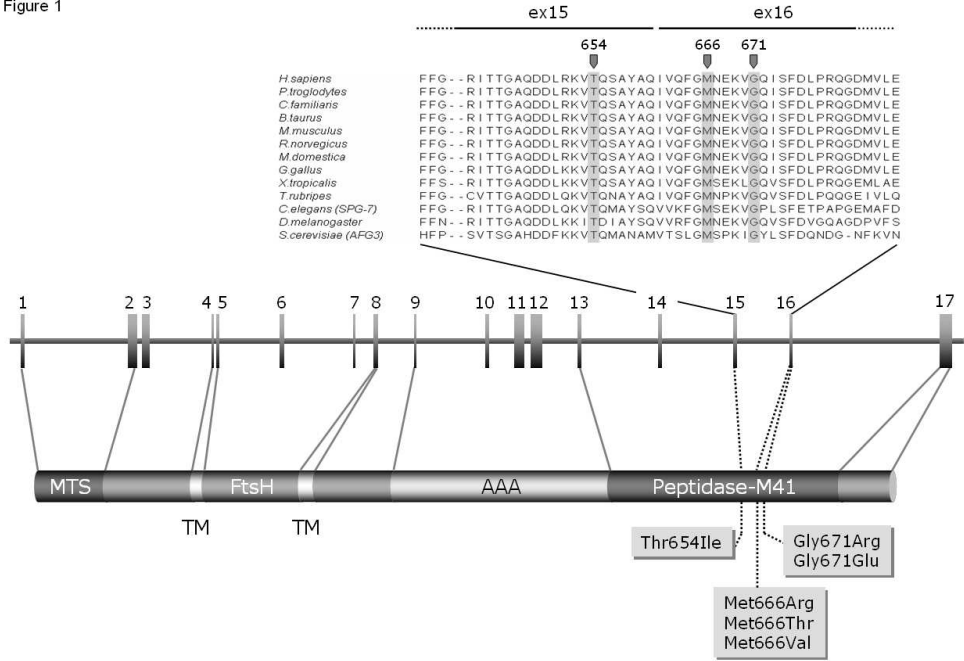
Table 1. Clinical features of SCA28 patients.

Subject	Mut	Sex	Yrs at Onset	Yrs at Exam	Disease duration (yr)	Functional handicap	Cerebellar Signs					Ophthalmoplegia	LL Reflexes	Ptosis	Bilateral extensor plantar response	Other signs
							Gait ataxia	Limb ataxia	Dysarthria	Horizontal gaze-evoked nystagmus						
SAL-331_4	T654I	F	20	66	46	Moderate	Mild	Mild	none	no	no	+	NA	no	IQ89	
SAL-331_11	T654I	M	10	43	33	Moderate	Moderate	Moderate	Severe	Yes	no	+	NA	no	Dystonic head tremor, IQ78	
AAD-274_5	T654I	M	60	73	13	Moderate	Mild	Mild	Mild	NA	no	+	NA	unilateral	Parkinsonism	
SAL-872_9	M666T	M	20	25	5	Moderate	Moderate	Mild	Moderate	Yes	no	N	no	no	Head tremor, cognitive difficulties	
SAL-872_6	M666T	F	NA	53	NA	Moderate	Moderate	Moderate	Severe	Yes	Vertical	N	NA	no	Severe depression, UL rigidity	
AAD-455_19	M666V	M	28	39	11	Mild	Mild	Mild	Mild	no	Vertical horizontal	N	no	no	-	
AAD-455_3	M666V	F	50	77	27	Moderate	Severe	Mild	Moderate	Yes	Vertical, horizontal	+	Yes	Yes	-	
AAD-701_11	M666V	F	50	61	11	Mild	Mild	Mild	Mild	no	no	N	no	no	UL dystonia	
AAD-701_15	M666V	M	25	58	33	Mild	Moderate	Moderate	Moderate	Yes	Vertical	+	Yes	no	-	
AAD-701_29	M666V	M	20	30	10	none	Mild	Moderate	Moderate	no	no	+	no	unilateral	-	
AAD-701_21	M666V	M	14	38	24	none	Mild	Mild	none	Yes	no	+	no	unilateral	-	
AAD-444_3	M666R	M	8	37	29	Severe	Moderate	Severe	Moderate	Yes	Horizontal	+	no	Yes	Memory difficulties	
AAD-444_9	M666R	M	6	10	4	Mild	Mild	Mild	none	no	no	N	no	no	Behaviour problems	
AAD-080_15	G671R	F	28	50	22	Moderate	Moderate	Moderate	Moderate	no	Vertical, horizontal	+	Yes	no	-	
AAD-080_56	G671R	F	NA	29	NA	none	Mild	Mild	none	Yes	no	+	no	no	-	
AAD-080_57	G671R	F	NA	29	NA	none	Mild	Mild	none	Yes	no	+	no	no	-	
AAD-080_58	G671R	F	NA	25	NA	none	Mild	Mild	none	Yes	no	+	no	no	-	
AAD-080_18	G671R	M	44	49	5	Mild	Mild	Moderate	none	no	Vertical, horizontal	N	Yes	no	-	
AAD-080_31	G671R	F	34	39	5	Moderate	Moderate	Moderate	Moderate	no	no	+	Yes	no	-	
AAD-080_9	G671R	M	23	29	6	Moderate	Moderate	Moderate	Moderate	Yes	Vertical, horizontal	+	NA	no	-	
AAR-197_1	G671R	F	32	36	4	Moderate	Moderate	Moderate	Mild	no	no	+	no	no	-	
AAR-197_10	G671R	M	25	51	26	Moderate	Moderate	Moderate	Moderate	no	Vertical, horizontal	+	Yes	no	Cognitive difficulties, spasticity	
AAR-197_21	G671R	M	39	43	4	Moderate	Moderate	Moderate	Mild	Yes	Vertical, horizontal	NA	Yes	no	-	
AAR-197_8	G671R	F	53	73	20	Moderate	none	none	none	no	Vertical, horizontal	N	Yes	no	Neck dystonia, Parkinsonism	
5336_1	G671E	M	55	71	16	Severe	Severe	Severe	Severe	Yes	no	+	no	Yes	-	

Notes: LL, lower limbs; UL, upper limbs; N, normal; +, augmented; NA, not available;

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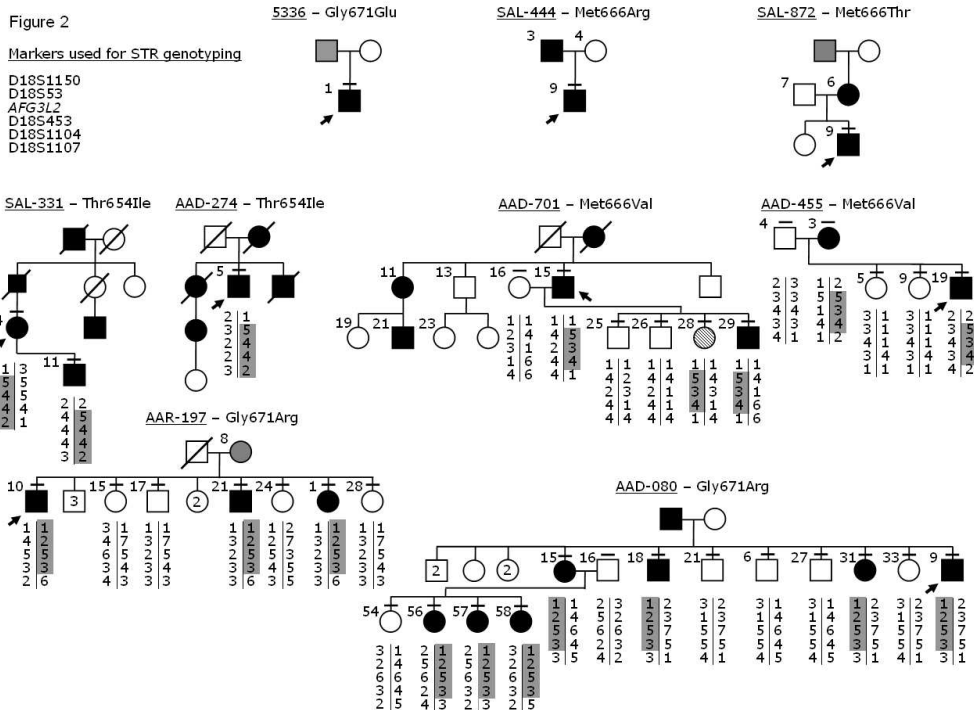
Figure 1



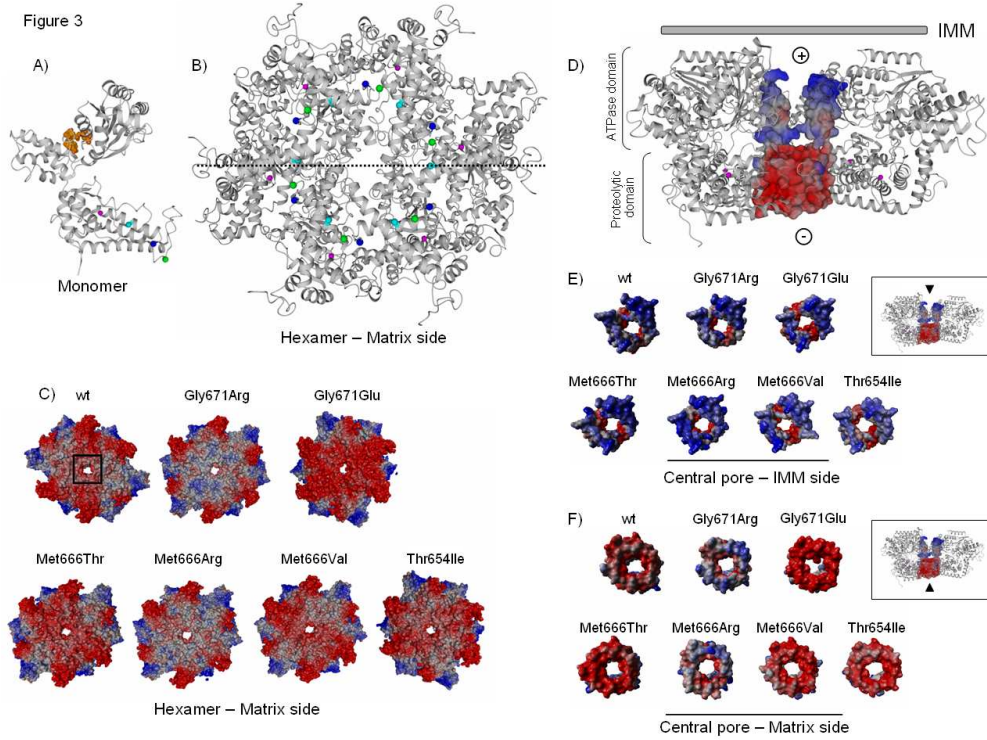
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SUPPLEMENTARY MATERIALS AND METHODS.*Mutation screening.*

The 17 coding exons of the *AFG3L2* gene were PCR amplified in a total volume of 50 μ l using 30 ng of genomic DNA, 144 μ M dNTPs, 2 mM MgCl₂, 1 U of Taq Gold (Applied Biosystems, Foster City, CA, USA) and 200 nM of forward and reverse primers reported in supplementary table S1.

The amplification of exon 1 required a final concentration of 1 M betaine (B0300, Sigma-Aldrich, St.Louis, MO, USA). Thermal cycling conditions were: 7 min at 95°C, followed by 14 cycles of 30 sec at 95°C, 30 sec at annealing temperature (Ta)+7°C-0.5°C/cycle (see supplementary table 1 and 1 min at 72°C; then 30 cycles consisting of X mn at 95°C, 30 sec at Ta (see supplementary table S1), and 1 min at 72°C. A final step of 40 cycles consisting of 1 min at 98°C-1°C/cycle was added in case of DHPLC analysis to increment heteroduplex formation.

The 17 coding exons of the *SPG7* gene were amplified and directly sequenced. PCR was performed in a total volume of 25 μ l, using 30 ng of genomic DNA, 144 μ M dNTPs, 2.5 mM MgCl₂, 0.5 U of Taq Gold (Applied Biosystems) and 200 nM of forward and reverse primers reported in supplementary table S2. The amplification of exon 1 required a final concentration of 1 M betaine. Thermal cycling conditions for exons 1-13 were: 7 min at 95°C, followed by 14 cycles of 30 sec at 95°C, 30 sec at Ta+7°C-0.5°C/cycle (see supplementary table 2 and 1 min at 72°C; then 30 cycles consisting in X mn at 95°C, 30 sec at Ta, and 1 min at 72°C; with a final extension for 10 min at 72°C. Thermal cycling conditions for exons 14-17 were: 7 min at 95°C, 30 cycles at 95°C, 30 sec at Ta, and 1 min at 72°C; final extension for 10 min at 72°C. Fragments were purified using the ExoSAP method (MBI-Fermentas), and directly sequenced using the Big-Dye cycle sequencing kit and an ABI Prism 3100 Avant automatic sequencer (Applied Biosystems).

Minigene assay.

A minigene assay was set up to test the effect of *AFG3L2* c.293-13_293-14delTT sequence variant on splicing. We amplified a 327 bp fragment from a subject carrying the variant. The forward

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3 primer (5'-ATGCGAATTCTTGTATTCTTTCTCATAGTGCTTCA) introduced a *EcoRI*
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5 restriction site, and the reverse primer (5'-TACGTCTAGAAATGCCTCCCAACCTTCTCT)
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7 introduced a *XbaI* restriction site. The fragment was sequenced to exclude the presence of PCR-
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9 introduced mutations. The PCR product was cloned into a pTZ57R/T vector using the InsTA
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11 Cloning kit (Invitrogen), and transformed in DH5 α bacterial cells following manufacturer's
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13 recommendations (RBC Bioscience, Chung Ho City, Taiwan). Plasmids were extracted using
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15 standard methods, checked by sequencing, and digested with *EcoRI* and *XbaI* restriction
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17 endonucleases. The insert was gel-purified and sub-cloned into a pAltermax modified vector
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19 (kindly provided by dr. Gareth Eldvige, Wellcome Trust Centre, Oxford, UK, and dr. Ivana
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21 Kurelac, University of Bologna). Plasmids containing the wild-type or the variant sequence were
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23 used to transform HEK293 cells using the TurboFect kit (Fermentas). After 48h, RNA was
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25 extracted with the RNeasy Kit (Qiagen), retrotranscribed with the GoScript kit (Promega). The
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27 cDNA was amplified and sequenced with vector primers.
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Supp. Table S1. Primers, PCR and DHPLC conditions for *AFG3L2* mutation screening

Exon	Primers (Forward/Reverse)	PCR Ta (°C)	DHPLC Tm (°C) ¹
1	5'-GTTGAGAGCTTGGGCTCCTCCGTGA 5'-CCAGTGACCTTGACGTCCGCTCTCC	69	68/69/69.8
2	5'-TTATGACCAGGAAATGAAGC 5'-GGTTGGGTCTTTTGTCTCCTT	59	52.3/ 57.3
3	5'-GATGCATCAGCTGCTTTGAA 5'-GGTAGTTTCCACTGAACAAAG	55	53.8
4	5'-GCTGAGAGAGCTAAAACCTTGC 5'-AGAGAAGGTTGGGAGGCATT	55	58.5/60.0/62.0
5	5'-AGAGAAGGTTGGGAGGCATT 5'-ACCAAAGAAGTGACAGTCAGC	55	56.0/58.0/60.0
6	5'-TGAGCTTAAAAGAGTATCTCAAGTATTTT 5'-TGAGGCAGGTTTTCTTTCA	56	52.4/53.4/57.0/58.8
7	5'-TTGAACCGTTTAGTGAATTGAACC 5'-GAACCACAGGCAGCACAGTC	56	53.3/55.7/58.1
8	5'-GAAAGCTGGAGGTGAGCAG 5'-GAGGATCGTTTTGGGTCA	55	55.5/57.5/61.8
9	5'-TGTGGATACACAATTTACTTTTCTGGA 5'-GTGCCTCCATCTGTGGTGAA	56	52.2/69.4/62.0
10	5'-CCGATTTATTTCAATTTCTTATTCAGAG 5'-GCCTGGACGACAGAGTCA	56	56.4/58.0/60.8
11	5'-GCTATGAATTTGCAGTGCTC 5'-AGGTCCAGTGCTCATGAGTG	57	n.a. ²
12	5'-AGGTCCAGTGCTCATGAGTG 5'-TTCTTTACTGTGGGCTTCTT	57	55.6/57.6
13	5'-GATCAGTTTGGGCGTATTTTCG 5'-AATCCCTGGCCTCAAATTCA	56	55.5/57.5/58.4
14	5'-TTGTGATAGGCAGCTCAGTC 5'-CAAGCTACACTCCTGCAAAG	57	56.8/61.5/63.0
15	5'-GTCTTCATCTGTAGTAGGATCTTCAA 5'-CGTGCAAATATGAATACATGAGG	56	55.8/56.8
16	5'-GATTTTGTCTGGTTAAAGAACAATCA 5'-CCAACAAAACAGTCTATCTATCACTTC	56	53.0/56.1/57.8
17	5'-GACTTTGCTGAGTAACTGTATTTAATG 5'-ATGCACCAGCTGAAACCACA	56	53.6/57.2/60.5

Notes: n.a.: not applicable; ¹ as determined by DHPLC Melt software; ² *AFG3L2* exon 11 was directly sequenced in all subjects. Ta=annealing temperature; *AFG3L2* RefSeq NM_006796.1

Supp. Table S2. Primers and PCR conditions for SPG7 mutation screening.
Ta=annealing temperature

Exon	Primers (Forward/Reverse)	Ta (°C)
1	5'-CGCAGGCGCCACGTCAGA 5'-GCCGGGCTGGGCCTTACAGA	63
2	5'-TGTTACCTAAAGCTTTGACCTATTGC 5'-GCTCTGATCACACCATTGTACTGC	58
3	5'-ACACTGTTGTCCTGTATGCCTCC 5'-TCCAGACTGGTTTCACCTTGCTA	58
4	5'-GATGTCGCCCCGTGTCTGTTG 5'-CCACAGCCTCACTCTCACAGG	58
5	5'-GGCTCTCTGTTGACTGTAGGGTTG 5'-TCTGTTTCTCAGATTACAAAGCCAA	58
6	5'-CGTAGGGATTCCCTCGTCTCATCT 5'-TTCAGGCTACTCTCTGCAACAGG	58
7	5'-GCATCGTGCTGCTGATTTC 5'-GAGCCCTTCTGGGAGAGGAG	58
8	5'-CGTGACCCAGAGAGACCTTACCT 5'-ACACCAGAGGAAGGATGTGTGAA	58
9	5'-GGGTACAGGAAGAGGCTTTGTTT 5'-CAACCTGTTCTGAAAGACATCGG	58
10	5'-CTCTCTCCCTCCTGTGTCCTG 5'-GGCTTCACACCAAGAAGTGTCTTA	58
11	5'-CGCACCTGTGGCAGTAACTA 5'-AGGCCTCGATGCTGTTTG	56
12	5'-TCCTCCTCTTAAGCCCTGATAGC 5'-TCAATACCTGCCTGGGTATTTCT	58
13	5'-CTGGTCTCGAACTCCTGTCCTCAG 5'-AGGCTTTCCTCTCACATGACCTACA	63
14	5'-GCATCCTGCCTACTGACCTG 5'-GAAAAGCGCTCTGAAACCTC	59
15	5'-TGCTGAGGATGCCTCTGTCT 5'-GCGACCCTTGTGTGGTAGA	59
16	5'-GTGTTCCCAGTCTGCCATTTT 5'-TGTGTGGACACTGTGTGACG	59
17	5'-CCTGGGGACTCACACTG 5'-CCTCACTTCCCGGACCAC	59

SPG7 RefSeq NM_003119.2

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2
3 *Bioinformatics analysis.*
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5 To build a three dimensional model of the C-terminal region of AFG3L2, the sequence
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7 corresponding to residues 306-762 was submitted to PDB-blast
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9 (<http://protein.cribi.unipd.it/pdbblast/>) that recognized the cell division bacterial protein FtsH with
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11 an R-score of 1E-117. Its crystal structure was present in the protein database (PDB) as 2CE7,
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13 which contains the AAA domain and a protease domain. Crystallization experiments of 2CE7 gave
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15 rise to a tetragonal crystal form containing six monomers per asymmetric unit. These belong to two
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17 virtually identical half-hexamers; the complete hexameric molecules are generated by a
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19 crystallographic two-fold axis.
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23 The AAA ring does not form a regular hexagon and the contacts of one AAA domain with the two
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25 other interacting domains in the ring are much more asymmetric than those observed in the protease
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27 domain.
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31 As a result, three different monomer conformations are present in 2CE7 structure.
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34 In order to build the AFG3L2 hexamer model, we constructed, three different models based on the
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36 conformations of the three monomers present in 2CE7 structure, using the program NEST
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38 (<http://trantor.bioc.columbia.edu/programs/jackal/index.html>). Subsequently to obtain the hexamer
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40 model we superimposed them to the corresponding 2CE7 monomers in its hexamer using the
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42 program SHEBA (Jung and Lee, 2000). Upon superimposition, the ADP molecule and the Mg²⁺
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44 and Zn²⁺ ions were added to the model.
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48 Using the program Yasara (www.yasara.org), we introduced the Thr654Ile, Met666Thr,
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50 Met666Arg, Met666Val, Gly671Glu and Gly671Arg mutations. Next we refined the model using
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52 the program Yasara with the protocol described below.
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55 Each model was refined performing a 150 ps simulation of the homology models using the protocol
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57 described in (Krieger, et al., 2004). It saves one PDB file every 25 picoseconds, and allows the user
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59 to identify the best snapshot giving as output a table with force field energies, PhiPsi, Backbone and
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Packing3 WHATIF checks (Vriend, 1990).

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3 In order to choose the best conformer saved during the refinement procedure we derived a quality
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5 parameter defined as follows:
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$$7 \quad Q = (\text{Energy}/10000) - (\text{PhiPsi} + \text{Backbone} + \text{Packing3}) = \text{quality}$$

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10 The conformer having the lowest value of Q was selected for subsequent analyses.

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12 Data on the electric dipole moment calculated using the Yasara software. The difference of
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14 electrostatic potential (mV) was calculated from the measure of the electric dipole moment using

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16 the formula: $\Delta V = \frac{d}{(4\pi \cdot r^2 \cdot \epsilon_0)}$. D = electric dipole moment; r = distance between examer surfaces;
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21 ϵ_0 = electric constant in vacuum.
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24 The pH of the AFG3L2 hexamer catalytic site was calculated using pH Calculator software
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26 (<http://www.webqc.org/phsolver.php>). pKa values were obtained from the PROPKA software ver
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28 2.0 (Guerois, et al., 2002). We calculated the pH of normal hexamer and hexamers containing
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30 identified mutations for all aminoacids distant <0.5 nm from the Zn atom within the catalytic site
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32 (constant arbitrary concentration set at 0.01M).
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35 The energetic stability of AFG3L2 protein and the interaction energy of each monomer were
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37 calculated using the FoldX software ver 3.0 (Guerois, et al., 2002). We calculated both the
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39 interaction energy between one monomer and the two flanking monomers, and between one
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41 monomer and the remaining hexamer.
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45 To verify the possible three-dimensional structure of AFG3L2 homopolymer or heteropolymer, a
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47 3D model of the C-terminal tract of SPG7, a known interactor of AFG3L2 (Atorino, et al., 2003)
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49 was also created following the same protocol as above.
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52 Homo- and Heteropolymers were reconstructed with the software NEST and SHEBA (Jung and
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54 Lee, 2000; Petrey, et al., 2003).
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57 Finally, the software PoPMuSic estimated the stabilizing/destabilizing effect of each aminoacidic
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59 substitution, through the measurement of the free energy difference ($\Delta\Delta G$) of the molecule (Gilis
60
and Rooman, 2000).

Supp. Table S3. *AFG3L2* variants found in 366 ADCA patients.

Variants	Exon / Intron	Patients	Controls	Notes
rs12327346:C>G	EX1	20/366	7/95	
c.-92T>C		1/366	0/95	
c.-71C>T		4/366	1/95	
c.-48G>A		2/366	0/95	
c.-32C>T		1/366	0/95	
c.293-33G>A	IVS3	1/366	0/95	The variant does not alter splicing
c.293-13_293-14delTT		2/366	0/95	The variant does not alter splicing ¹
c.400-14C>G	IVS4	4/366 ²	0/95	The variant does not alter splicing
c.718C>A (p.=)	EX7	1/366	n.a.	The variant does not alter splicing
rs8097342:G>A	IVS7	120/366	n.a.	
rs8091858:C>T	IVS8	27/366	0/95	
c.1027-12T>C		2/366	0/95 ³	The variant does not alter splicing
rs9966470:A>T	IVS9	85/366	21/95	
c.1165-24G>A		5/366	1/95	
c.1319-59G>T	IVS10	3/366	0/95	The variants does not alter splicing
c.1319-40C>T		1/366	0/95	The variants does not alter splicing
rs11080572:G>A	EX11	349/366 ⁴	85/95 ⁵	
c.1426+21_1426+22insCAGGTC	IVS11	1/366	0/95	The variant does not alter splicing
c.1479G>A (p.=)	EX12	1/366	0/95	The variant does not alter splicing
rs11553521:A>G	EX13	125/366	26/95	
c.1664-39G>A	IVS13	8/366	2/95	
c.1664-9T>C		1/366	0/95	The variant does not alter splicing
c.2175+18G>A	IVS16	9/366	4/190 ⁶	
rs1129115:G>C	EX17	117/366	26/95	
c.2325C>T (p.=)		1/293	0/95	Not found in an affected niece

In bold, variants not found among controls and/or in the dbSNP(129). Controls were all of French origin, except for note 3 - 95 Italian controls, and note 6 - 95 Italian and 95 French controls; 1-The effect on splicing was tested using a minigene assay (see Supp. Materials and Methods); 2-The c.400-14C>G variant was tested in one family and did not segregate from the affected father to the affected son; 4-Two hundred-24 cases were homozygous (A/A) and 125 heterozygous (G/A); n.a. = not available; 5-Fifty-seven controls were homozygous (A/A) and 28 heterozygous (G/A).

Supp. Table S4. Mutation effect on the electric dipole of the translocation channel and on the potential difference between the inner mitochondrial membrane side and the matrix side of the hexamer.

	<i>Potential difference - PD (mV)</i>	<i>PD compared to wild type (mV)</i>	<i>PD compared to wild type (%)</i>	<i>Electric dipole (C m)</i>
wt	22,274			$1,79 \times 10^{-26}$
T654I	22,60	0,33	1,48%	$1,82 \times 10^{-26}$
M666V	22,305	0,031	0,14%	$1,79 \times 10^{-26}$
M666T	22,945	0,671	3,01%	$1,85 \times 10^{-26}$
M666R	19,548	-2,726	-12,24%	$1,57 \times 10^{-26}$
G671E	25,736	3,462	15,54%	$2,07 \times 10^{-26}$
G671R	18,887	-3,387	-15,21%	$1,52 \times 10^{-26}$

Yellow = wild-type (wt) values; Green = lower dipole and potential difference; Blue = dipole and potential difference not significantly different from the wild-type; Red = higher dipole and potential difference. mV = millivolts; C m = Coulomb meter.

Supp. Table S5. Mean interaction energy [§] (Kcal/Mol) between each monomer of the AAA-protease (A to F) and the other five monomers

	Monomer						Mean ¹
	A	B	C	D	E	F	
wt	-49.89	-79.31	-57.50	-59.64	-82.24	-54.58	-63.86
T654I	-43.23	-76.66	-66.77	-55.32	-76.86	-57.56	-62.73
M666V	-56.73	-83.46	-51.03	-37.19	-60.82	-56.99	-57.70
M666T	-50.50	-64.60	-46.42	-48.36	-76.81	-58.26	-57.49
M666R	-35.73	-71.15	-49.36	-37.83	-58.24	-42.46	-49.13
G671E	-49.41	-79.02	-54.77	-61.61	-77.72	-50.24	-62.13
G671R	-51.46	-70.63	-59.66	-38.88	-64.79	-50.73	-56.03

¹Yellow = wild-type (wt) interaction; Green = lower interaction; Blue = slightly lower interaction

[§] Interaction energy was calculated using the application FoldX ver3.0 (Guerois R et al., 2002)