

## Supplemental material

### **Clinical Characteristics and Natural History of Dilated Cardiomyopathy due to BLC2-associated Athanogene 3 (*BAG3*) Mutations**

**Short Title:** DCM caused by *BAG3* mutations.

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## **Appendix 1.**

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## **Supplemental Methods**

### **Tissue processing protocol**

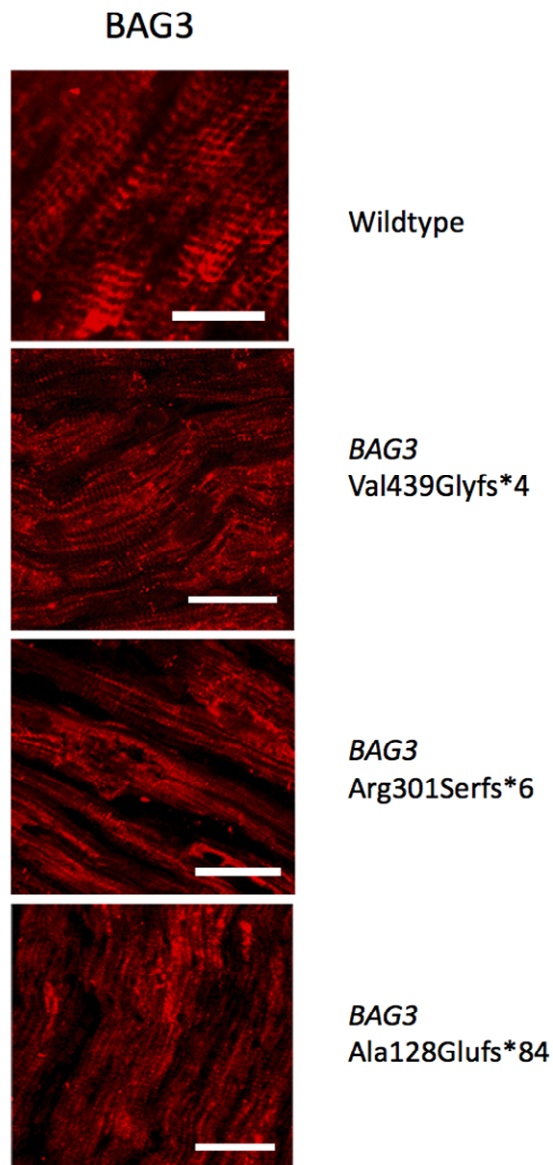
Explanted heart tissue samples were rinsed with phosphate buffered saline (PBS) immediately after extraction and fixed in 10% neutral buffered formalin. Samples were dehydrated and embedded in paraffin using an automatic tissue processor (Shandon Excelsior ES, ThermoFisher Scientific). Paraffin blocks were sectioned in 4- $\mu$ m slices.

Antigen retrieval and rehydration were performed on the Dako PT Link instrument with Envision™ FLEX Target Retrieval Solution, high pH (Dako, Glostrup, Denmark). Tissue sections were first incubated with a BAG3 antibody (Abcam ab 47124, Cambridge, UK) at 1/50, overnight at 4°C, washed with PBS and incubated with Alexa Fluor 546 anti-rabbit (Invitrogen Life Technologies, 1/500) for 45 minutes at room temperature. Sections were then blocked with 10% fetal calf serum and incubated with Actinin (Abcam ab 9465) 1/10, for 1 hour. After washing with PBS, sections were stained with Alexa fluor 488 anti-mouse (Invitrogen Life Technologies, 1/500). Nuclei were stained with Topro-3 (Invitrogen Life Technologies 1/1000) 15 minutes and the sections were mounted with PBS glycerol.

Images of the specimens were collected with a TCS SP5 confocal microscope (Leica Microsystems, Wetzlar, Germany) equipped with 40 $\times$  HCX PL APO (1.25 numerical aperture) oil-immersion optics. The three channels were acquired sequentially with the following excitation and emission parameters: (488 nm, 500–540 nm) for Alexa 488, (546 nm, 543–611nm) for Alexa 546 and (633 nm, 645–750 nm) for Topro-3. Gains were adjusted to avoid saturation in pixel intensity. Negative controls, in which primary antibodies were substituted with isotypic non-immune IgGs, did not result in any

detectable labeling. Z-series images were obtained through the collection of serial, confocal sections at 1- $\mu\text{m}$  intervals.

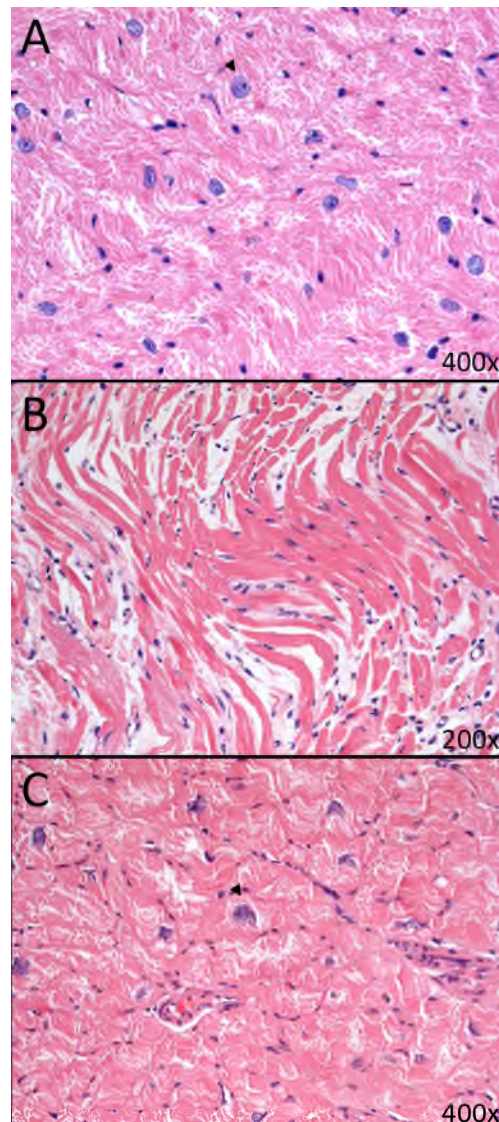
**Online figure 1. BAG3 localization in explanted hearts (zoom).**



Samples with fluorescent label BAG3 (red). Scale bar: 16  $\mu$ m.

The first image (top) is from a patient without mutations in *BAG3* gene. The remaining images are from samples belonging to patients with *BAG3* truncating mutations. In patients with *BAG3* mutations, disorganization of muscular fibers is evident and BAG3 protein is diminished in the Z-disks as compared with controls, and is arranged in a more disorganized and diffuse pattern. BAG3 aggregates are also shown in the Ala128Glyfs\*84 variant.

**Online Figure 2. Cardiac tissue of DCM patients with *BAG3* mutations: Hematoxylin and eosin staining.**



Cardiac tissue from the left ventricle of three patients with DCM caused by truncating *BAG3* mutations: A: p.Val439Glyfs\*; B: p.Arg301Serfs\*; and C: p.Ala128Glyfs\*84. The three images show a loss of the normal alignment of cardiomyocytes, with curved-shape foci surrounding connective tissue. Nuclear irregularity is also evident mainly in images A and C, with some examples of hypertrophied nuclei (black arrowheads).



**Table 1S. BAG3 mutations and frequency**

Genomic position	Coding DNA reference (NM_004281.3)	Protein reference (NP_004272.2)	Variant type	MAF ExAC	rs	ACMG criteria	ClinVar	HGMD	n
g.121411259_121411260insC	c.72_73insC	<b>p.Gly25Argfs*33</b>	Frame-shift (truncating)	0.00002	rs772351208	Pathogenic	NP	NP	3
g.121411276_121411278 delTCGinsACC	c.89_91delTCGinsACC	<b>p.Ile30_Asp31delinsAsnHis</b>	Indel (non-truncating)	NP	-	Likely pathogenic	NP	NP	1
g.121411295G>A	c.108G>A	<b>p.Trp36*</b>	Nonsense (truncating)	NP	-	Likely pathogenic	NP	NP	1
g.121411356_121411358delGAGinsAA	g.121411356_121411358delGAGinsAA	<b>p.Glu57Lysfs*154</b>	Frame-shift (truncating)	NP	-	Pathogenic	NP	NP	2
g.121411360delG	c.173delG	<b>p.Gly58Alafs*153<sup>1</sup></b>	Frame-shift (truncating)	NP	-	Likely pathogenic	NP	NP	1
g.121429543C>T	c.361C>T	<b>p.Arg121*</b>	Nonsense (truncating)	NP	-	Pathogenic	NP	NP	2
g.121429549C>T	c.367C>T	<b>p.Arg123*</b>	Nonsense (truncating)	0.000016	rs387906875	Pathogenic	Pathogenic:4 Likely path:1	CM111934 Pathogenic	2
g.121429564_121429565insAG	c.382_383insAG	<b>p.Ala128Glufs*84</b>	Frame-shift (truncating)	NP	-	Pathogenic	NP	NP	13
g.121429590_121429596delACCTCTG	c.408_414delACCTCTG	<b>p.Pro137Glyfs*72</b>	Frame-shift (truncating)	NP	-	Pathogenic	NP	NP	2

g.121429639C>T	c.457C>T	<b>p.Gln153*</b>	Nonsense (truncating)	NP	-	Pathogenic	NP	NP	6
g.121431790dupT	c.531dup	<b>p.Asp178*</b>	Nonsense (truncating)	NP		Likely pathogenic	NP	NP	1
g.121431911C>T	c.652C>T	<b>p.Arg218Trp</b>	Missense (non- truncating)	0.000066	rs397514506	Pathogenic	Pathogenic:1 Likely path:1	CM1110061 Pathogenic	1
g.121431986delC	c.727delC	<b>p.His243Thrfr*64</b>	Frame-shift (truncating)	NP	-	Pathogenic	NP	NP	29
g.121432080C>A	c.821C>A	<b>p.Ser274*</b>	Nonsense (truncating)	NP	-	Pathogenic	NP	NP	3
g.121432162delG	c.903delG	<b>p.Arg301Serfs*6</b>	Frame-shift (truncating)	NP	-	Pathogenic	NP	NP	4
g.121435991C>T	c.925C>T	<b>p.Arg309*</b>	Nonsense (truncating)	NP	rs869248137	Pathogenic	Pathogenic	CM1111349 Pathogenic	3
g.121436093delC	c.1027delC	<b>p.Arg343Alafs</b>	Frame-shift (truncating)	NP	-	Likely pathogenic	NP	NP	1
g.121436121delG	c.1055delG	<b>p.Gln353Argfs*10</b>	Frame-shift (truncating)	NP	-	Pathogenic	NP	NP	4
g.121436153G>T	c.1087G>T	<b>p.Glu363*2</b>	Nonsense (truncating)	NP	-	Likely pathogenic	NP	NP	1
g.121436200delG	c.1135delG	<b>p.Gly379Alafs*45</b>	Frame-shift (truncating)	NP	-	Pathogenic	NP	NP	4

g.121436218_12143625del	c.1153_1160 del	<b>p.Ser385Glnfs*56</b>	Frame-shift (truncating)	NP	-	Pathogenic	NP	NP	6
g.12143271delC	c.1205delC	<b>p.Pro402Leufs*22</b>	Frame-shift (truncating)	NP	-	Pathogenic	NP	NP	2
g.121436367_121436378 dupGGGCTGGAGC	c.1300_1309dup GGG CTGGAGC	<b>p.Gln437Argfs*10</b>	Frame-shift (truncating)	NP	-	Likely pathogenic	NP	NP	1
g.121436382_121436383delTA	c.1316_1317delT A	<b>p.Val439Glyfs*4</b>	Frame-shift (truncating)	NP	-	Pathogenic	NP	NP	2
g.121436419C>A	c.1353C>A	<b>p.Tyr451*</b>	Nonsense (truncating)	NP	-	Pathogenic	NP	NP	4
g.121436429G>A	c.1363G>A	<b>p.Glu455Lys</b>	Missense (non-truncating)	NP	rs397516881	Likely pathogenic	Pathogenic:1 Likely path:1 VUS:1	CM111351 Pathogenic	13
g.121436477G>A	c.1411G>A	<b>p.Glu471Lys</b>	Missense (non-truncating)	0.000016		Likely pathogenic	NP	NP	3
g.121431768_121436795del	c.508_1728del	<b>Deletion of exons 3 and 4 (17990 bp)</b>	CNVs (deletion of two exons)	NP		Pathogenic	NP	NP	11
g.121431765A>G	c.508-2 A>G	<b>N/A</b>	Splicing mutation (truncating)	NP	-	Pathogenic	NP	NP	3

ACMG: American college of medical genetics.

HGMD: Human Gene Mutation Database

MAF: Mutation annotation format

1: This patient also presented the p.Glu57Lys missense variant in *BAG3*

2: The patient also presented the p.Pro368Ser missense variant in *BAG3*

**Table 2S. Clinical predictors of heart transplant, LVAD and heart failure death in DCM patients with *BAG3* mutations**

	DCM patients without HF-related events (n=58)	DCM patients with HF-related events (n=20)	p
Male sex (%)	53.4	95.0	<b>0.001</b>
Truncating mutation (%)	79.3	80.0	0.95
Non-truncating mutation (%)	20.7	20.0	0.95
Age at DCM onset	38.4 ± 12.6	31.6 ± 13.7	0.055
QRS width (ms) on 1 <sup>st</sup> ECG	98.3 ± 21.0	98.9 ± 21.6	0.84
Negative T waves on 1 <sup>st</sup> ECG (%)	18.4	30.8	0.33
LVEDD (mm) on 1 <sup>st</sup> echo	61.5 ± 8.7	68.2 ± 8.7	<b>0.01</b>
LVEF (%) on 1 <sup>st</sup> echo	40.9 ± 14.6	24.7 ± 10.7	<b>&lt;0.001</b>
NSVT on Holter monitor (%)	33.3	57.1	0.26
CK (UI/L)	113.2 ± 67.6	99.6 ± 62.0	0.44

LVEF: Left ventricular ejection fraction, LVEDD: Left ventricular end-diastolic diameter, NYHA: New York Heart Association, SD: Standard deviation, TAPSE: tricuspid annular plane systolic excursion

**Table 3S. Clinical predictors of serious arrhythmic events in DCM patients with BAG3 mutations**

	DCM patients without arrhythmic events (n=71)	DCM patients with arrhythmic events (n=7)	p
Male sex (%)	64.8	57.1	0.69
Truncating mutation (%)	78.9	85.7	0.67
Non-truncating mutation (%)	21.1	14.3	0.67
Age at DCM onset	35.4 ± 13.1	44.0 ± 12.1	0.10
QRS width (ms) on 1 <sup>st</sup> ECG	98.6 ± 21.4	92.0 ± 7.5	0.51
Negative T waves on 1 <sup>st</sup> ECG (%)	19.3	40.0	0.28
LVEDD (mm) on 1 <sup>st</sup> echo	62.4 ± 9.1	68.0 ± 6.9	0.18
LVEF (%) on 1 <sup>st</sup> echo	38.5 ± 15.3	23.4 ± 7.0	<b>0.01</b>
TAPSE (mm) on 1 <sup>st</sup> echo	20.5 ± 5.3	15.5 ± 2.1	0.20
NSVT on Holter monitor (%) <sup>+</sup>	34.5	100	0.07
CK (UI/L)	112.7 ± 66.7	55.3 ± 19.9	0.15

Arrhythmic events: sustained ventricular tachycardia, ventricular fibrillation, appropriate ICD shock or sudden cardiac death.

CK: Creatine kinase, LVEDD: Left ventricular end diastolic diameter, LVEF: Left ventricular ejection fraction.

<sup>+</sup>: 29 patients without arrhythmic events and 2 with arrhythmic events have 24-Holter ECG data.