| Published by | Faber et al | Smith et al | Smith et al | Almeida et al | Kamate et al |
|---------------------------------------|--|--|--|--|--|
| Mutation | c.768_769dup | c.813_816del | | c.900_901dup | c.912G4A |
| Sex | female | female | male | female | female |
| Age at last follow- up examination | 27y (07/2018) | 33y (05/2019) | 36y (05/2019) | 40y (03/2020) | 15y (01/2020) |
| Parents | healthy (mother 47y, father 48y) | healthy (father 64y, mother 60y) | idem | heterozygous mother (died at 60y) FTLD + features of CBS, heterozygous father (61y) FTLDvb, severe state. | heterozygous, healthy (father 45y, mother 40y) |
| Other relatives | none reported ill | FTLD in maternal grandfather, paternal grandmother and great uncle | idem | maternal grandmother dementia (70y), 2 maternal siblings dementia plus parkinsonian signs (50y), 2 maternal siblings CBS (50y) | sister died at 16y, seizures (8y) and dementia, MRI cerebellar atrophy, no genetic testing |
| Neurological examination | | | | | |
| Motor signs | ataxia worsened, wheel- chair bound, spasticity lower extremities, increased reflexes | ataxia worsened, needs consistent help for walking | ataxia worsened, needs consistent help for walking | Early ataxia (28Y), unable to walk at 37 and at 40 y bedridden; mild pyramidal signs, dystonia | wide gait, independent in all ADL, slight gait ataxia (new) |
| Vision impairment | Declined, still functional | rapid vision loss (22y), almost blind (35y), retinal dystrophy | deterioration of vision (25y), almost blind, retinal dystrophy | rapid progressive visual deficit with onset at 25y; severe amaurosis at 28years, retinal dystrophy | vision still normal, fundoscop normal |
| Memory dysfunction | frontotemporal symptoms, severe decline, entirely dependent for ADL | no memory decline | executive functions borderline | Mild memory dysfunction (started at 36y) | borderline IQ, poor short time memory, poor analytic functions, attends school (15y), grades are falling |
| Psychiatric comborbidities | mood lability and delusions (onset at 23y), deteriorated to severe apathy, poor verbal contact | visual hallucinations (enhanced by AED) | mild depression | very repetitive behaviour, anxiety, emotional lability since 37y of age | none |
| Epilepsy features | | | | | |
| Seizures controlled? | no | yes | yes | yes | partially |
| Type(s) of seizure | Focal (photosensitive) and generalized seizures persisted. | non motor onset (visual) impaired awareness bilateral tonic clonic seizures, visual symptoms "new" | non motor onset (eye deviation) impaired awareness bilateral tonic clonic seizures | jerks elicited by sudden sounds since the beginning, but not classified as epileptic | tonic clonic seizures (1 short generalised seizure per year), photosensitivity |
| EEG pattern (at follow up) | slow wave background activity + epileptiform discharges in posterior regions during photostimulation | Background activity 7 Hz + brief sequences of slow waves + few spikes occipital regions | Background activity 7 Hz + brief sequences of slow waves + few spikes occipital regions | normal at beginning; follow-up EEGs refused | generalised epileptiform discharges, background activity normal (March 2019) |
| AEDs trialled | LTG, LEV, CLB | barbiturates, <u>LEV</u> , | PB, <u>VPA, LEV, ZNS,</u> | n.a. | CBZ, CLB, <u>LEV</u> |
| (<u>current AED)</u> cMRI | global and severe cerebellar atrophy | ZNS, VPA, PER n.a. | <u>PER</u> n.a. | severe global atrophy with marked cerebellar atrophy | cerebellar atrophy |
| Serum progranulin | n.a. | <0.6ng/ml (serum) | <0.6ng/ml (serum) | <6 ng/ml (serum) | n.a. |

Table 1: Clinical follow-up data of all previously published bi-allelic GRN mutations, FTLD: fronto-temporal lobe dementia, CBS: cortico-basal syndrome, ADL: activities of daily life, AED: anti-epileptic drug, LTG: lamotrigine, LEV: levetiracetam, CLB: clobazam, ZNS: zonisamide, VPA: valproic acid, PER: perampanel, CBZ: carbamazepine