Table e-1. Diagnostic yield of different genetic tests.

Author and year	Test	Diagnostic yield (when the study included patients without epilepsy we only considered patients with epilepsy)	Additional details		
Chromosomal microarray					
Mefford et al, 2010 <sup>1</sup>	CMA	46/517 (0.089)	All 517 patients had idiopathic epilepsy, mostly without intellectual disability		
Mefford et al, 2011 <sup>2</sup>	CMA	13/315 (0.041)	All 315 patients had epileptic encephalopathies		
Bartnik et al, 2012	CMA	10/102 (0.098) -3/50 (0.06) in patients with isolated epilepsy -7/52 (0.135) in patients with epilepsy and other neurologic conditions	50 patients had isolated epilepsy 52 patients had epilepsy plus intellectual disability, dysmorphism, ASD, or other neurologic abnormalities		
Michaud et al, 2014 <sup>4</sup>	CMA	6/44 (0.136)	44 patients with infantile spasms (40 of them with developmental delay)		
Helbig et al, 2014	CMA	16/223 (0.072)	223 patients with childhood epilepsies and complex phenotypes including structural brain lesions		
Olson et al, 2014 <sup>6</sup>	CMA	40/805 (0.05)	805 patients with epilepsy at a reference center		
Hrabik et al, 2015	CMA	11/147 (0.075)	147 patients with epilepsy at a reference center		
Berg et al, 2017 <sup>8</sup>	CMA	32/188 (0.1702)	188 patients with epilepsy onset before the third birthday in a multicenter study		
Epilepsy gene panels					
Lemke et al, 2012	EP (265 genes)	16/33 (0.485)	33 patients with epilepsy in several reference centers		
Wang et al, 2014	EP (53 genes or 38 genes)	6/28 (0.214)	28 patients with epilepsy in a reference center		
Della Mina et al, 2015 11	EP (67 genes)	9/19 (0.474) -6/7 in patients with a clinical presentation suggestive of a specific syndrome -3/12 in patients with a phenotype not suggestive of any specific syndrome	19 patients with isolated or syndromic epilepsy		
Mercimek- Mahmutoglu et al, 2015 <sup>12</sup>	EP (20 patients with 38 genes, 1 patient with 40 genes, 3 patients with 50 genes, 7 patients with 51 genes, 6 patients with 53 genes, 2 patients with 63 genes, 39 patients	12/93 (0.129)	All 93 children with intractable epilepsy, global developmental delay, and cognitive dysfunction and no recognizable syndromic clinical features, MRI, or MRS patterns, metabolic evaluation, and negative CMA		

	with 70 genes,		
	and 15 patients		
	with 327 genes)		
Trump et al, 2016	EP (46 genes)	60/323 (0.1858)	323 patients with early-onset seizure disorders but without major structural brain malformations from tertiary centers
Segal et al, 2016	EP (87 genes or 455 genes)	7/49 (0.1429)	49 patients with refractory epilepsy and negative CMA results
Møller et al, 2016	EP (46 genes)	49/216 (0.2269)	216 patients with different types of epilepsy
Berg et al, 2017 <sup>8</sup>	EP (number of genes not specified)	31/114 (0.2719)	114 patients with epilepsy onset before the third birthday in a multicenter study
Butler et al, 2017	EP (110 genes)	62/339 (0.1829)	339 patients referred with epilepsy
		Whole exome sequencing	
Veeramah et al, 2013 <sup>17</sup>	WES	7/10 (0.7)	10 trios of unaffected parents and a child with refractory epilepsy, normal or unspecific neuroimaging, and a variable combination of autistic features, cognitive impairment, and motor deficits
Michaud et al, 2014 <sup>4</sup>	WES	13/18 (0.722) families with a diagnosis	18 trios with the child having infantile spasms previously evaluated with a CMA and targeted sequencing of up to 2 genes associated with infantile spasms
Dyment et al, 2015 <sup>18</sup>	WES	7/9 (0.778) families with a diagnosis 8/11 (0.727) affected individuals	11 patients from 9 families with a child with seizures as the predominant clinical feature. All patients came from a network of rare diseases and had underwent prior CMA
Retterer et al, 2015 <sup>19</sup>	WES	232/830 (0.28)	830 patients in a single clinical laboratory
Helbig et al, 2016	WES	112/293 (0.3823)	293 patients in a single clinical laboratory
Berg et al, 2017 <sup>8</sup>	WES	11/33 (0.3333)	33 patients with epilepsy onset before the third birthday in a multicenter study

**Legend: ASD:** Autism spectrum disorder. **CMA:** Chromosomal microarray. **CNVs:** Copy number variations. **EP:** Epilepsy panel. **ID:** Intellectual disability. **MRI:** Magnetic resonance imaging. **MRS:** Magnetic resonance spectroscopy. **WES:** Whole-exome

## **REFERENCES**

- 1. Mefford HC, Muhle H, Ostertag P, et al. Genome-wide copy number variation in epilepsy: novel susceptibility loci in idiopathic generalized and focal epilepsies. PLoS genetics 2010;6:e1000962.
- 2. Mefford HC, Yendle SC, Hsu C, et al. Rare copy number variants are an important cause of epileptic encephalopathies. Annals of neurology 2011;70:974-985.
- 3. Bartnik M, Szczepanik E, Derwinska K, et al. Application of array comparative genomic hybridization in 102 patients with epilepsy and additional neurodevelopmental disorders. American journal of medical genetics Part B, Neuropsychiatric genetics: the official publication of the International Society of Psychiatric Genetics 2012;159B:760-771.
- 4. Michaud JL, Lachance M, Hamdan FF, et al. The genetic landscape of infantile spasms. Human molecular genetics 2014;23:4846-4858.
- 5. Helbig I, Swinkels ME, Aten E, et al. Structural genomic variation in childhood epilepsies with complex phenotypes. European journal of human genetics: EJHG 2014;22:896-901.
- 6. Olson H, Shen Y, Avallone J, et al. Copy number variation plays an important role in clinical epilepsy. Annals of neurology 2014;75:943-958.
- 7. Hrabik SA, Standridge SM, Greiner HM, et al. The Clinical Utility of a Single-Nucleotide Polymorphism Microarray in Patients With Epilepsy at a Tertiary Medical Center. Journal of child neurology 2015;30:1770-1777.
- 8. Berg AT, Coryell J, Saneto RP, et al. Early-Life Epilepsies and the Emerging Role of Genetic Testing. JAMA pediatrics 2017.
- 9. Lemke JR, Riesch E, Scheurenbrand T, et al. Targeted next generation sequencing as a diagnostic tool in epileptic disorders. Epilepsia 2012;53:1387-1398.
- 10. Wang J, Gotway G, Pascual JM, Park JY. Diagnostic yield of clinical next-generation sequencing panels for epilepsy. JAMA neurology 2014;71:650-651.
- 11. Della Mina E, Ciccone R, Brustia F, et al. Improving molecular diagnosis in epilepsy by a dedicated high-throughput sequencing platform. European journal of human genetics: EJHG 2015;23:354-362.
- 12. Mercimek-Mahmutoglu S, Patel J, Cordeiro D, et al. Diagnostic yield of genetic testing in epileptic encephalopathy in childhood. Epilepsia 2015;56:707-716.
- 13. Trump N, McTague A, Brittain H, et al. Improving diagnosis and broadening the phenotypes in early-onset seizure and severe developmental delay disorders through gene panel analysis. Journal of medical genetics 2016;53:310-317.
- 14. Segal E, Pedro H, Valdez-Gonzalez K, et al. Diagnostic Yield of Epilepsy Panels in Children With Medication-Refractory Epilepsy. Pediatric neurology 2016;64:66-71.
- 15. Møller RS, Larsen LH, Johannesen KM, et al. Gene Panel Testing in Epileptic Encephalopathies and Familial Epilepsies. Molecular syndromology 2016;7:210-219.
- 16. Butler KM, da Silva C, Alexander JJ, Hegde M, Escayg A. Diagnostic Yield From 339 Epilepsy Patients Screened on a Clinical Gene Panel. Pediatric neurology 2017.
- 17. Veeramah KR, Johnstone L, Karafet TM, et al. Exome sequencing reveals new causal mutations in children with epileptic encephalopathies. Epilepsia 2013;54:1270-1281.
- 18. Dyment DA, Tetreault M, Beaulieu CL, et al. Whole-exome sequencing broadens the phenotypic spectrum of rare pediatric epilepsy: a retrospective study. Clinical genetics 2015;88:34-40.
- 19. Retterer K, Juusola J, Cho MT, et al. Clinical application of whole-exome sequencing across clinical indications. Genetics in medicine: official journal of the American College of Medical Genetics 2015.

20. Helbig KL, Farwell Hagman KD, Shinde DN, et al. Diagnostic exome sequencing provides a molecular diagnosis for a significant proportion of patients with epilepsy. Genetics in medicine: official journal of the American College of Medical Genetics 2016;18:898-905.