CPIC Guideline Update on PharmGKB

For: "Clinical Pharmacogenetics Implementation Consortium (CPIC)

Guidelines for Ivacaftor Therapy in the Context of CFTR Genotype"

Date: May 2016

URL: http://www.pharmgkb.org/guideline/PA166114461

Description:

The FDA-approved drug label for *ivacaftor* has been updated to include the *CFTR* variant

R117H (rs78655421). Consequently, the CPIC guideline annotation on PharmGKB, including

Table 1 and Figure 1, has been updated to include this variant. Additionally, the updated drug

label indicates ivacaftor use for patients 2 years and older; previously it was indicated only for

patients 6 years and older.

Please see the updated guideline at: http://www.pharmgkb.org/guideline/PA166114461

The variant listed above was not discussed in the 2014 guideline publication that follows.

Additionally, the 2014 CPIC guideline dosing recommendations were published prior to the age

change on the FDA-approved drug label, and are therefore written for patients age 6 years or

older.

1

CPIC Guideline Update on PharmGKB

For: "Clinical Pharmacogenetics Implementation Consortium (CPIC) Guidelines for Ivacaftor Therapy in the Context of *CFTR* Genotype"

Date: April 2014

URL: http://www.pharmgkb.org/guideline/PA166114461

Description:

After the submission and review of this CPIC guideline, the FDA-approved drug label for *ivacaftor* has been updated to include additional variants. Consequently, the CPIC guideline annotation on PharmGKB, including Table 1 and Figure 1, has been updated to include the following *CFTR* variants: G1244E (rs267606723), G1349D (rs193922525), G178R (rs80282562), G551S (rs121909013), S1251N (rs74503330), S1255P (rs121909041), S549N (rs121908755) and S549R (rs121908757 and rs121909005).

Please see the updated guideline at: http://www.pharmgkb.org/guideline/PA166114461

The specific variants listed above were not discussed in the 2014 guideline publication that follows.

Supplemental Material

Clinical Pharmacogenetics Implementation Consortium (CPIC) Guidelines for Ivacaftor Therapy in the context of *CFTR* Genotype

John P. Clancy^{1,2}, Samuel G. Johnson^{3,4}, Sook Wah Yee⁵, Ellen M. McDonagh⁶, Kelly E. Caudle⁷, Teri E. Klein⁶, Matthew D. Cannavo⁷, Kathleen M Giacomini⁵

¹Division of Pulmonary Medicine, Cincinnati Children's Hospital Medical Center, Cincinnati, Ohio

²Department of Pediatrics, University of Cincinnati, Cincinnati, Ohio

³Department of Clinical Pharmacy, Skaggs School of Pharmacy and Pharmaceutical Sciences, University of Colorado, Denver, Colorado

⁴Clinical Pharmacy Services, Kaiser Permanente Colorado, Denver, Colorado

⁵Department of Bioengineering and Therapeutic Sciences, University of California, San Diego, School of Pharmacy, San Francisco, California

⁶Department of Genetics, Stanford University Medical Center, Stanford, California, USA.

⁷Department of Pharmaceutical Sciences, St. Jude Children's Research Hospital, Memphis, Tennessee, USA

Table of Contents

Literature Review	5
Available Genetic Test Options	5
Genetic Test Interpretation	5
Diagnosis of Cystic Fibrosis	. 5
Genetic test panels	. 6
Levels of Evidence	7
Strength of Recommendations	7
Supplemental Table S1. Common CFTR Variants ^a and Class	8
Supplemental Table S2. Frequencies of alleles in Cystic Fibrosis patients by major race groups	
Supplemental Table S3. CFTR minor allele frequencies in cystic fibrosis patients	12
Supplemental Table S4. Evidence linking CFTR genotype with Ivacaftor efficacy	18
References	20

Literature Review

Available Genetic Test Options

Commercially available genetic testing options change over time. Below is some information that may assist in evaluating options. Some laboratories offering clinical testing may be listed at: http://pharmgkb.org/views/viewGeneticTests.action. Furthermore, the Genetic Testing Registry (GTR) provides a central location for voluntary submission of genetic test information by providers and is available at http://www.ncbi.nlm.nih.gov/gtr/.

Genetic Test Interpretation

Diagnosis of Cystic Fibrosis

Prenatal CF screening is offered during pregnancy as part of newborn screens in all fifty states in the US. Most newborn screening tests incorporate genetic testing of common *CFTR* variants with serum tests of CFTR function (serum trypsinogen levels, which reflect CFTR function in the pancreas). Positive newborn screens are typically followed up with sweat testing (measuring the concentration of chloride in sweat, which is elevated in CF) and frequently with confirmatory genetic testing (that typically includes many more CF-causing variants than are usually captured in various newborn screening panels). Commercially available genetic tests often offer tiered testing, initially screening for common *CFTR* variants followed by more extensive panels,

culminating in full *CFTR* gene sequencing. The diagnosis of CF is made by clinical evidence of CF disease (eg: failure to thrive, recurrent respiratory infections, chronic sinusitis) coupled with two CF causing variants in *CFTR* and/or evidence of CFTR dysfunction (ie: elevated sweat chloride). While genetic testing identifies >95% of disease-causing variants in *CFTR*, the diagnosis of CF does not require identifying two *CFTR* variants. Furthermore, a rising number of newborns have abnormal newborn screens, but fail to meet the full diagnostic criteria for CF. Examples include patients with only one well characterized variant and intermediate sweat chloride testing (i.e. above the normal range, but failing to cross the threshold established to diagnose CF), or patients with polymorphisms in the *CFTR* gene of unknown clinical significance (identified during full *CFTR* gene sequencing). These patients are categorized as having CFTR-Related Metabolic Syndrome, and are often followed in CF clinics to determine if they eventually meet full diagnostic criteria (ie: elevated sweat chloride levels above the CF diagnostic threshold, abnormal nasal potential difference measurements and CF-associated disease manifestations).

Genetic test panels

The Cystic Fibrosis Mutation Database and CFTR2 websites provide a comprehensive resource of known variants within the *CFTR* gene

(http://www.genet.sickkids.on.ca/GenomicDnaSequencePage.html and http://www.cftr2.org/). Numerous companies and clinics offer testing of specific *CFTR* variants or sequence analysis – see PharmGKB (http://www.pharmgkb.org/views/viewGeneticTests.action) and the Genetic Test Registry (GTR) for further information (http://www.ncbi.nlm.nih.gov/gtr). The American College of Medical Genetics (ACMG) recommends a panel of 23 variants for population screening of CF carrier status (Supplemental Table S1). This was originally established in 2001 as a standard panel of 25 known CF-causing variants with an allele frequency of equal to or more than 0.1% in the USA (1), and revised to 23 variants in 2004 as a consequence of new information on allele frequencies and experience in clinical practice (2, 3). The panel includes the F508del and G551D variants (2).

Levels of Evidence

The evidence summarized in Supplemental Table S5 is graded using a scaled modified slightly from Valdes et al. (4)

High: Evidence includes consistent results from well-designed, well-conducted studies. Moderate: Evidence is sufficient to determine effects, but the strength of the evidence is limited by the number, quality, or consistency of the individual studies; generalizability to routine practice; or indirect nature of the evidence.

Weak: Evidence is insufficient to assess the effects on health outcomes because of limited number or power of studies, important flaws in their design or conduct, gaps in the chain of evidence, or lack of information.

Strength of Recommendations

CPIC's dosing recommendations are based on weighting the evidence from a combination of preclinical functional and clinical data, as well as on some existing disease-specific consensus guidelines (5).

Overall, the dosing recommendations are simplified to allow rapid interpretation by clinicians. We chose to use a slight modification of a transparent and simple system for just three categories for recommendations adopted from the rating scale for evidence-based recommendations on the use of retroviral agents (http://aidsinfo.nih.gov/contentfiles/AdultandAdolescentGL.pdf): strong, where "the evidence is high quality and the desirable effects clearly outweigh the undesirable effects"; moderate, in which "there is a close or uncertain balance" as to whether the evidence is high quality and the desirable clearly outweigh the undesirable effects; and optional, in which the desirable effects are closely balanced with undesirable effects and there is room for differences in opinion as to the need for the recommended course of action.

Strong recommendation for the statement

Moderate recommendation for the statement

Optional recommendation for the statement

Supplemental Table S1. Common CFTR Variants^a and Class

Legacy Name ^b	Amino Acid Position ^{b, c}	cDNA Position ^{b, d, g}	Reference Sequence ID ^b	Classe
ΔF508 (also known as	p.Phe508del	c.1521_1523delCTT	rs113993960 ^f (CTT deletion)	II, VI
F508del)		or		
		c.1520_1522delTCT	rs199826652 ^f (TCT deletion)	
G542X	p.Gly542Ter	c.1624G>T	rs113993959	I
G551D	p.Gly551Asp	c.1652G>A	rs75527207	III
N1303K	p.Asn1303Lys	c.3909C>G	rs80034486	II
W1282X	p.Trp1282Ter	c.3846G>A	rs77010898	I
R117H	p.Arg117His	c.350G>A	rs78655421	IV
R553X	p.Arg553Ter	c.1657C>T	rs74597325	I
1717-1G->A	N/A	c.1585-1G>A	rs76713772	I
621+1G->T	N/A	c.489+1G>T	rs78756941	I
2789+5G->A	N/A	c.2657+5G>A	rs80224560	V
3849+10kbC- >T	N/A	c.3717+12191C>T	rs75039782	V
R1162X	p.Arg1162Ter	c.3484C>T	rs74767530	I
G85E	p.Gly85Glu	c.254G>A	rs75961395	II
3120+1G->A	N/A	c.2988+1G>A	rs75096551	I
ΔΙ507	p.Ile507del	c.1519_1521delATC	rs121908745	II
1898+1G->A	N/A	c.1766+1G>A	rs121908748	I
3659delC	p.Thr1176Thrfs frameshift	c.3528delC	rs121908747	Ι
R347P	p.Arg347Pro	c.1040G>C	rs77932196	IV
R560T	p.Arg560Thr	c.1679G>C	rs80055610	III
R334W	p.Arg334Trp	c.1000C>T	rs121909011	IV
A455E	p.Ala455Glu	c.1364C>A	rs74551128	V
2184delA	p.Lys684Asnfs frameshift	c.2052delA	rs121908746	I
711+1G->T	N/A	c.579+1G>T	rs77188391	I
5T	N/A (intron 9)	c.1210-12T(5_9) (AJ574948.1:g152T(5_9) ^g , (poly-T tract variations; 5T, 7T or 9T).	rs200454589 ^h	V

^aThis list of *CFTR* genotypes includes the 23 *CFTR* variants recommended by the American College of Medical Genetics (ACMG) Cystic Fibrosis Carrier Screening Working Group that should be tested to determine carrier status as a part of population screening programs (2). The

5T variant is not included in this list; however, it has been added here to provide further information regarding this polymorphism.

^bInformation sourced from dbSNP http://www.ncbi.nlm.nih.gov/projects/SNP/ and/ or http://www.genet.sickkids.on.ca/Home.html or http://www.cftr2.org/acmg_mutations.php (accessed 3rd April 2013).

^cProtein reference sequence NP 000483.3.

^dcDNA reference sequence NM_000492.3. The positions given take into account that the initiation codon begins at position 133, therefore for example c.1521_1523 is position 1653_1655 on reference sequence NM_000492.3.

^eAs defined in (6).

The F508del *CFTR* variant can result from a CTT deletion at cDNA position NM_000492.3.c.1521_1523 (rs113993960) or a TCT deletion at cDNA position NM_000492.3.c.1520_1522 (rs199826652). Both result in the same sequence change: ATC ATC TTT GGT GTT > ATC ATT GGT GTT, corresponding to a deletion of Phe at amino acid position 508. Here we include both rsIDs from dbSNP which result in the same deletion of Phe at position 508; rs113993960 is deletion CTT, the cDNA reference position name that is referred to on the CFTR1 website (c.1521_1523delCTT) and is flagged on dbSNP as "with pathogenic allele" due to its association with cystic fibrosis. Rs199826652 is deletion TCT and is more likely to be called in sequencing data due to the left justification of indels; hence this has a minor allele frequency from 1000 genomes.

^gSee reference (7) for more details regarding exon numbering and correct nomenclature for nucleotide repeat sequences.

^hThis rsID describes the 7T and 9T repeats but not 5T.

Supplemental Table S2. Frequencies¹ of alleles in Cystic Fibrosis patients by major race/ethnic groups²

CFTR Variant	Caucasian	Mediter- ranean	South American	African	Middle Eastern	Mexican
ΔF508	0.65692	0.48487	0.38614	0.41734	0.20802	0.43580
G542X	0.02271	0.05282	0.03543	0.01656	0.01579	0.06462
G551D	0.02069	0.00205	0.00347	0.02489	0.001361	0.00434
N1303K	0.01173	0.03778	0.00914	0.00203	0.07527	0.01762
W1282X	0.00875	0.01069	0.01283	0.00060	0.07512	0.00176
R117H	0.01581	0.00538	-	0.03045	0.00963	0.00188
R553X	0.01220	0.00541	0.01137	0.01972	0.00108	0.00812
1717-1G->A	0.00754	0.00847	0.00671	0.01358	0	0.02117
621+1G->T	0.00633	0.01308	0.00691	0.00370	0.00278	0.00587
2789+5G->A	0.00212	0.01156	0.00408	-	0.01846	-
3849+10kbC->T	0.00292	0.00214	0.00652	0.00057	0	0.01440
R1162X	0.00456	0.02655	0.01657	0.00374	0.01390	0.00552
G85E	0.00226	0.00564	0.01595	-	0.00278	0.00458
3120+1G->A	0.00292	0.00237	0.01599	0.07632	0.04971	0.00787
ΔΙ507	0.00306	0.00322	0.00227	0.00636	0	0.00714
1898+1G->A	0.00141	0.00132	-	0.01030	-	-
3659delC	0.00443	0	-	-	-	0.00148
R347P	0.00352	0.00268	-	0.00020	-	0.00040
R560T	0.00333	0	-	0.00211	0	0
R334W	0.00150	0.01134	0.01520	0.00543	0.00933	0.02608
A455E	0.00262	0	-	0	-	0.00017

2184delA	0.00131	0.00123	-	0.00017	0.02842	-
711+1G->T	0.00190	0.00577	-	-	0.05810	-

¹Average frequencies are reported based on the average from the actual numbers of subjects with each allele reported in multiple studies. See Supplemental Table S3 for details and references.

²Race/ethnic group designations correspond to those indicated in Supplemental Table S3.

Supplemental Table S3. CFTR minor allele frequencies in cystic fibrosis patients

Pooled Grouping	Ethnicity									CF	TR vari	ants mino	r allele	frequ	iency (%	%)									Total patients
		F508del	G542X	G551D	N1303K	W1282X	R117H	R553X	1717-1G->A	621+1G->T	2789+5G->A	3849+10kbC ->T	R1162X	G85E	3120+1G->A	IS07del	1898+1G->A	3659delC	R347P	R560T	R334W	A455E	2184delA	711+1G->T	
African	Afro- American (8)	31.0	0.9	0.9	0.5	0.0	0.0	1.4	0.9	0.0	0.0	0.0	0.5	0.0	8.8	0.0	0.0	0.0	0.0	0.5	0.5	0.0	0.0	0.9	108
African	Afro- American (9)	48.0	0.7	0.7	0.0	0.0	0.0	0.0	0.7	0.0	-	0.0	-	-	12.2	0.7	-	-	0.0	0.0	0.7	0.0	-	-	74
African	Afro- American (10)	60.6	-	6.1	-	-	12.1	3.0	-	-	-	-	-	-	0.0	-	3.0	-	-	-	-	-	0.0	-	33
African	Afro- American (11)	25.0	3.6	3.6	0.0	0.0	-	3.6	3.6	-	-	-	0.0	-	-	0.0	-	-	-	-	-	-	-	-	14
African	Afro- American	44.1	1.5	1.2	0.4	0.2	0.1	1.9	0.4	1.1	0.0	0.2	0.7	0.1	9.6	1.9	0.1	0.1	0.1	0.2	0.5	0.0	0.1	0.0	-
Average Afr	ican	41.73	1.66	2.49	0.20	0.06	3.05	1.97	1.39	0.37	0.00	0.06	0.37	0.06	7.63	0.64	1.03	0.03	0.02	0.21	0.54	0.00	0.02	0.46	-
Caucasian	American (12)	75.3	1.9	1.9	1.5	0.4	0.8	0.0	1.1	1.1	-	-	-	0.8	=	0.0	-	-	-	0.8	-	1.1	-	3.0	139
Caucasian	American (9)	66.2	2.3	2.0	1.3	2.7	0.5	1.0	0.4	0.8	-	0.6	-	-	0.0	0.1	-	-	0.3	0.2	0.1	0.1	-	-	4357
Caucasian	American (11)	60.5	6.2	3.8	1.9	0.5	-	0.5	1.9	-	-	-	0.0	-	-	0.0	-	-	-	-	-	-	0.0	-	105
Caucasian	American (11)	66.7	16.7	0.0	0.0	0.0	-	0.0	0.0	-	-	-	8.3	-	-	0.0	-	-	-	-	-	-	0.0	-	6
Caucasian	American (13)	75.9	2.4	2.4	1.2	1.6	0.6	0.8	0.4	1.2	0.5	0.4	0.4	0.2	0.1	1.5	0.2	0.4	0.4	0.5	0.2	0.1	0.2	0.1	1969
Caucasian	American (13)	68.9	2.2	2.1	1.3	1.4	0.8	1.0	0.5	1.9	0.5	0.7	0.1	0.4	0.1	0.3	0.1	0.3	0.5	0.3	0.1	0.5	0.1	0.8	-
Caucasian	American (14)	74.0	1.5	1.5	3.0	1.0	0.5	2.0	1.5	1.5	1.0	0.5	-	0.5	-	-	1.0	-	-	-	-	0.5	0.5	0.5	100
Caucasian	American (15)	70.1	6.0	5.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	139
Caucasian	American (2)	72.4	2.3	2.3	1.3	1.5	0.7	0.9	0.5	1.6	0.5	0.6	0.2	0.3	0.1	0.9	0.2	0.3	0.5	0.4	0.1	0.3	0.2	0.4	-
Caucasian	Australian (16)	70.9	2.3	4.6	1.5	-	13.8	0.4	0.4	1.9	0.4	0.4	0.4	-	0.4	0.8	-	0.8	0.4	-	-	-	0.4	-	261

Caucasian	Austrian (17)	63.7	2.1	1.1	0.6	0.2	0.2	0.4	0.2	0.4	0.0	0.0	1.9	0.0	0.0	0.0	0.0	0.2	0.4	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Austrian (18)	74.6	2.4	1.6	-	0.0	-	0.0	0.8	-	0.0	0.0	0.0	-	-	0.0	-	-	1.6	-	0.0	-	-	-	63
Caucasian	Belarusian (17)	38.5	0.0	0.0	0.0	15.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Belgian (17)	75.5	2.7	0.2	2.9	1.5	0.4	1.0	1.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.0	0.2	0.4	0.2	0.0	-
Caucasian	Belgian (19)	74.2	1.6	0.0	2.4	-	-	2.4	2.4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	62
Caucasian	British (17)	75.3	1.7	3.1	0.5	0.2	0.5	0.5	0.6	0.9	0.0	0.1	0.0	0.2	0.0	0.3	0.5	0.1	0.1	0.4	0.0	0.0	0.0	0.0	-
Caucasian	British (20)	75.3	1.7	3.1	0.5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Caucasian	Bulgarian (21)	65.6	3.1	0.0	5.3	0.8	-	-	0.4	-	0.4	1.1	-	0.8	-	-	-	-	1.1	-	-	-	0.4	-	131
Caucasian	Bulgarian (17)	64.2	4.7	0.0	5.1	0.8	0.0	0.0	0.8	0.4	0.8	0.8	0.0	2.0	0.0	0.0	0.0	0.0	2.4	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Canadian (22)	58.7	1.9	2.6	0.7	0.7	0.7	0.4	0.5	1.1	-	-	-	-	-	0.5	-	0.1	0.1	0.5	0.3	0.2	-	-	538
Caucasian	Canadian (23)	63.2	1.6	4.5	0.4	0.0	14.6	0.8	1.6	1.2	0.8	2.4	0.0	0.8	1.2	0.4	0.4	0.0	0.0	0.0	0.4	0.8	0.4	0.4	124
Caucasian	Czech (17)	69.7	2.1	3.4	2.6	0.5	0.2	0.2	0.3	0.2	0.3	0.3	0.3	0.2	0.0	0.0	1.9	0.2	0.9	0.0	0.2	0.0	0.0	0.0	-
Caucasian	Danish (17)	87.2	0.6	0.1	1.0	0.1	0.3	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.6	0.0	0.0	0.3	0.0	0.0	0.0	-
Caucasian	Dutch (17)	74.4	1.3	0.1	0.9	0.7	0.1	1.2	1.5	0.0	0.0	0.0	0.9	0.0	0.0	0.1	0.0	0.1	0.1	0.0	0.0	3.3	0.0	0.0	-
Caucasian	English (24)	42.3	-	7.7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13
Caucasian	Estonian (17)	64.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Estonian (25)	51.7	0.0	0.0	0.0	0.0	-	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-	0.0	0.0	1.7	0.0	0.0	0.0	0.0	0.0	0.0	30
Caucasian	Ex- Yugoslavia n (17)	70.0	3.0	0.0	1.0	0.5	0.0	0.0	0.0	0.5	0.0	0.0	3.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Finnish (17)	46.2	1.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Finnish (26)	36.3	1.0	0.0	0.0	0.0	2.0	0.0	0.0	0.0	0.0	0.0	1.0	0.0	0.0	0.0	0.0	5.9	0.0	0.0	0.0	0.0	0.0	0.0	51
Caucasian	French (27)	68.9	3.3	0.3	1.8	1.5	0.1	0.8	1.3	0.1	-	-	0.5	0.3	-	0.3	0.1	0.3	0.4	-	0.4	0.1	0.1	0.7	600
Caucasian	French (28)	63.9	5.8	0.4	0.7	0.4	-	0.4	1.5	0.4	-	-	0.7	0.4	-	1.1	0.0	0.4	0.4	-	1.1	-	1.1	-	137
Caucasian	French (29)	67.2	2.9	1.0	2.1	0.9	0.0	0.9	1.3	-	-	0.4	0.4	-	-	0.7	-	-	-	-	-	-	-	0.4	3710
Caucasian	French (17)	66.8	3.1	0.5	1.4	0.6	0.0	0.9	1.6	0.1	0.1	0.1	0.4	0.1	0.3	0.6	0.1	0.2	0.2	0.0	0.2	0.0	0.1	0.1	-

Caucasian	French (30)	67.9	2.5	0.7	2.0	0.6	-	0.8	1.2	-	0.6	-	0.4	-	-	0.5	-	-	-	-	-	-	0.3	-	-
Caucasian	French (31)	70.5	1.7	3.0	3.0	0.4	1.7	0.9	0.9	0.9	0.9	-	-	-	-	0.9	-	-	-	-	-	-	-	-	117
Caucasian	French (32)	74.8	0.6	3.7	1.4	0.4	0.5	0.4	1.0	0.6	0.8	0.0	0.1	0.3	0.1	0.4	0.0	0.0	0.1	0.0	0.0	-	0.1	-	389
Caucasian	German (33)	72.0	1.4	1.0	2.3	0.7	0.3	2.3	0.9	0.1	0.9	1.0	0.3	-	-	0.1	-	0.6	1.6	-	0.3	0.1	0.3	-	-
Caucasian	German (17)	72.7	1.1	0.7	1.3	0.2	0.1	1.9	0.5	0.1	0.1	0.2	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.2	0.1	0.4	0.0	-
Caucasian	German (34)	66.8	4.1	0.5	2.7	-	0.0	3.2	1.8	-	-	-	0.0	-	-	0.0	-	1	-	-	-	0.0	-	-	110
Caucasian	German (35)	71.5	1.2	0.9	1.3	-	-	1.9	0.4	-	-	0.4	-	-	-	-	-	1	0.6	-	-	-	0.4	-	641
Caucasian	Hungarian (17)	43.9	1.8	0.0	1.8	1.8	0.0	0.0	1.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Hungarian (36)	64.3	1.2	0.0	1.2	1.2	-	2.4	1.2	0.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	42
Caucasian	Irish (37)	72.5	1.0	6.9	0.4	-	2.0	0.0	0.6	0.8	-	-	-	-	-	0.4	-	0.4	-	0.8	-	-	-	-	253
Caucasian	Irish (38)	76.7	0.0	8.4	0.0	-	13.4	-	-	0.5	-	-	-	-	-	-	-	0.5	-	-	-	-	-	-	101
Caucasian	Irish (39)	75.8	0.5	8.1	0.0	-	2.9	0.2	2.3	0.1	-	-	-	0.1	-	0.5	0.2	-	-	0.5	-	-	-	-	-
Caucasian	Irish (17)	72.7	1.0	6.9	0.4	0.0	2.0	0.0	0.6	0.8	0.0	0.0	0.0	0.0	0.0	0.4	0.0	0.4	0.0	0.8	0.0	0.0	0.0	0.0	-
Caucasian	Irish (40)	58.0	1.7	4.0	0.4	-	2.1	0.2	-	1.7	-	-	-	-	-	0.8	-	0.2	-	2.5	-	-	-	-	124
Caucasian	Irish (41)	68.0	2.2	5.1	0.0	0.0	4.1	0.5	-	2.2	0.0	0.0	0.0	0.0	0.0	1.7	-	0.0	-	2.9	-	-	-	0.0	206
Caucasian	Irish (32)	77.4	0.5	7.1	0.3	0.0	2.7	0.1	0.6	1.4	0.0	0.2	0.1	0.2	0.0	0.7	0.1	0.1	0.0	2.1	0.1	-	0.1	-	770
Caucasian	Norwegian (17)	66.7	0.6	1.2	0.6	0.0	3.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Norwegian (42)	62.2	0.7	2.0	1.0	0.3	4.1	0.3	-	0.3	-	0.3	0.3	-	-	0.3	-	1.7	-	-	-	-	-	-	148
Caucasian	Polish (17)	66.2	2.3	0.7	2.0	0.2	0.0	1.4	1.6	0.0	0.0	0.5	0.0	0.0	0.0	0.5	0.0	0.0	0.5	0.9	0.0	0.0	0.0	0.0	-
Caucasian	Portuguese (17)	44.5	1.3	0.0	0.7	0.0	0.0	0.0	0.0	0.2	0.0	0.0	0.2	0.2	0.0	0.2	0.0	0.0	0.0	0.0	0.7	0.0	0.0	0.2	-
Caucasian	Reunion Island (43)	52.2	0.7	1.4	0.0	-	-	-	0.7	=	-	-	-	-	8.0	-	-	-	-	-	-	2.2	-	-	69
Caucasian	Romanian (17)	42.0	0.0	0.0	0.0	2.0	0.0	4.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Russian (17)	61.8	0.7	0.2	0.4	0.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.9	0.0	0.2	0.0	-
Caucasian	Scottish (44)	68.9	5.5	7.1	0.0	-	2.5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	183
Caucasian	Scottish (45)	82.1	1.7	6.8	0.0	-	0.0	0.9	0.9	0.9	-	-	-	-	-	0.9	-	-	-	0.0	-	-	-	-	-

Caucasian	Slovakian (17)	55.9	7.5	0.0	3.5	1.6	0.0	4.3	0.0	0.0	0.0	1.2	0.0	0.0	0.0	0.0	0.4	0.0	1.2	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Swedish (17)	73.3	0.6	0.0	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.0	0.0	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Swiss (17)	43.2	3.2	0.0	1.1	0.0	0.0	24.2	2.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Ukrainian (17)	80.4	0.0	1.8	0.0	0.0	0.0	3.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-
Caucasian	Ukrainian (46)	50.0	-	0.3	-	-	-	-	=	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	170
Caucasian	Welsh (47)	72.6	2.4	3.0	0.5	0.0	0.5	1.1	0.5	5.1	-	-	-	1.4	-	0.5	-	-	0.0	0.3	-	-	-	-	184
Caucasian	Yugoslavia n (48)	70.4	3.7	0.0	-	-	-	0.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	54
Average Cauc	asian	65.69	2.27	2.07	1.17	0.88	1.58	1.22	0.75	0.63	0.21	0.29	0.46	0.23	0.29	0.31	0.14	0.44	0.35	0.33	0.15	0.26	0.13	0.19	-
Mexican	American (49)	47.9	2.1	2.1	6.3	0.0	0.0	2.1	-	-	-	0.0	-	-	-	-	-	-	-	-	6.3	-	-	-	24
Mexican	American (11)	30.0	20.0	0.0	0.0	0.0	-	0.0	10.0	-	-	-	0.0	-	-	-	-	-	-	-	-	-	-	-	5
Mexican	American (8)	37.1	3.5	0.3	0.0	0.0	0.3	0.3	0.3	0.3	0.6	0.9	0.6	0.6	2.2	0.3	0.0	0.3	0.0	0.0	3.5	0.0	0.0	0.6	159
Mexican	Mexican (50)	40.7	6.2	0.5	2.1	0.0	0.5	0.5	-	-	-	0.5	0.0	0.5	0.0	2.6	-	-	-	-	-	-	-	-	97
Mexican	American (51)	45.7	5.4	0.0	-	0.8	0.0	0.8	0.0	0.0	-	2.3	1.6	-	-	0.0	-	0.0	0.0	0.0	1.6	-	-	-	-
Mexican	American (2)	54.4	5.1	0.6	1.7	0.6	0.1	2.8	0.3	0.3	0.2	1.6	0.6	0.2	0.2	0.7	0.1	0.1	0.2	0.0	1.8	0.1	0.2	0.2	-
Mexican	Mexican (52)	47.8	4.4	0.0	1.1	0.0	-	0.0	-	1.1	-	2.2	-	-	-	-	-	-	-	-	-	-	-	-	45
Mexican	Mexican (53)	45.0	5.0	0.0	1.3	0.0	-	0.0	0.0	1.3	-	2.5	-	-	-	0.0	-	-	0.0	0.0	0.0	0.0	-	-	40
Average Mexi	can	43.58	6.46	0.43	1.76	0.18	0.19	0.81	2.12	0.59	0.39	1.44	0.55	0.46	0.79	0.71	0.03	0.15	0.04	0.00	2.61	0.02	0.08	0.43	-
Mediterranea n	Greek (17)	52.3	3.9	0.4	3.3	0.4	1.2	0.2	0.0	4.5	1.8	0.2	0.0	1.0	0.6	0.4	0.4	0.0	0.2	0.0	1.2	0.0	0.0	0.0	
Mediterranea n	Greek (54)	52.7	4.3	0.5	3.8	0.0	1.1	0.3	-	4.6	-	-	-	-	-	-	-	-	-	-	1.1	-	-	-	184
Mediterranea n	Greek (55)	52.2	4.0	0.4	3.2	0.4	1.2	0.2	-	4.6	1.8	0.2	-	1.0	0.6	0.4	0.4	-	0.2	-	1.2	-	-	-	250
Mediterranea n	Italian (56)	47.6	2.7	0.4	4.0	0.9	-	1.3	2.2	0.9	1.3	0.4	9.8	1.3	-	-	-	-	0.4	-	-	-	-	-	133
Mediterranea n	Italian (57)	56.4	5.7	0.0	6.8	3.8	0.0	1.1	2.3	-		-	-	-	-	-	-	-	-	-		-	-	-	132
Mediterranea n	Italian (58)	51.5	5.9	0.0	7.3	2.2	-	1.5	1.8	0.0	0.7	0.9	0.0	0.3	-	0.0	-	0.0	0.5	-	0.1	-	-	0.7	371
Mediterranea n	Italian (17)	50.9	4.4	0.0	4.4	1.2	0.0	0.9	1.7	0.3	0.0	0.0	2.0	0.3	0.0	0.1	0.0	0.0	0.4	0.0	0.2	0.0	0.0	0.0	-
Mediterranea n	Italian (59)	51.1	4.8	0.1	4.8	1.2	-	1.2	2.1	0.4	-	0.1	2.4	0.4	-	0.1	-	-	0.6	-	0.3	-	-	-	1746

Mediterranea n	Moroccan (60)	72.7	0.0	0.0	0.0	0.0	-	-	0.0	-	-	0.0	-	0.0	-	-	-	-	-	-	-	-	-	-	-
Mediterranea n	S European (61)	-	12.0	0.5	6.5	1.1	-	0.2	-	-	-	-	7.2	-	-	0.0	-	-	0.3	-	0.9	-	-	-	-
Mediterranea n	Spanish (62)	53.2	8.4	0.3	2.7	0.8	0.2	0.3	0.1	0.5	0.9	0.4	1.6	0.9	-	0.8	-	-	0.2	-	1.6	-	-	1.7	640
Mediterranea n	Spanish (63)	50.6	8.0	0.4	2.4	0.6	-	0.0	0.1	0.3	0.7	-	1.9	0.8	-	0.5	-	-	0.0	0.0	1.1	-	0.4	1.2	486
Mediterranea n	Spanish (17)	54.4	7.7	0.4	2.5	0.5	0.2	0.4	0.1	0.4	0.7	0.1	1.3	0.7	0.0	0.3	0.0	0.0	0.0	0.0	0.9	0.0	0.3	1.0	-
Mediterranea n	Spanish (64)	43.5	11.4	0.0	0.0	1.0	1.0	0.0	0.0	0.0	2.3	0.0	3.0	0.0	-	1.0	0.0	0.0	0.0	0.0	5.0	0.0	0.0	0.0	-
Mediterranea n	Turkish (17)	34.8	2.8	0.0	6.4	0.0	0.0	0.0	0.0	0.0	1.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	-
Mediterranea n	Turkish (65)	23.5	3.6	0.0	2.4	3.0	-	-	0.6	0.6	-	-	-	-	-	-	-	-	0.6	-	-	-	-	-	83
Mediterranea n	Turkish (66)	28.4	0.0	0.0	3.7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	67
Average Medi	terranean	48.49	5.28	0.20	3.78	1.07	0.54	0.54	0.85	1.31	1.16	0.21	2.66	0.56	0.24	0.32	0.13	0.00	0.27	0.00	1.13	0.00	0.12	0.58	-
Middle Eastern	Algerian (67)	16.7	1.4	0.0	8.3	4.2	-	0.0	0.0	1.4	-	-	-	-	-	-	-	-	-	-	-	-	4.2	8.3	36
Middle Eastern	Arab- American (68)	15.1	0.0	0.0	5.4	4.3	0.0	0.5	0.0	0.0	0.5	0.0	0.0	0.0	11.3	0.0	-	0.0	0.0	0.0	0.0	0.0	0.0	1.6	93
Middle Eastern	Iranian (69)	18.1	3.6	0.0	4.3	-	-	0.0	0.0	0.0	4.3	0.0	1.4	-	3.6	0.0	1.4	-	-	0.0	2.9	-	6.5	-	69
Middle Eastern	Iranian (70)	21.7	0.0	0.0	0.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	30
Middle Eastern	Iranian (71)	15.8	0.8	0.0	5.8	-	-		-	-	-	-	-	0.8	-	-	-	-	-	-	0.8	-	-	-	60
Middle Eastern	Iranian (72)	16.2	2.7	0.0	0.0	4.1	1.4	-	0.0	0.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	37
Middle Eastern	Israeli (Arab) (73)	23.5	1.2	0.0	21.2	10.6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Middle Eastern	Lebanese (74)	36.3	1.3	0.0	20.0	13.8	2.5	-	-	-	2.5	-	-	-	-	-	-	-	-	-	-	-	-	-	40
Middle Eastern	N African (17)	32.0	4.8	1.4	10.2	8.2	0.0	0.0	0.0	0.0	0.0	0.0	2.7	0.0	0.0	0.0	0.0	0.7	0.0	0.0	0.0	0.0	0.7	7.5	-
Middle Eastern	Pakistani (75)	12.7	0.0	0.0	0.0	-	-	0.0	-	_	-	-	-	-	-	-	-	-	-	-	-	-	_	-	150
Average Midd	lle Eastern	20.80	1.58	0.14	7.53	7.51	0.96	0.11	0.00	0.28	1.85	0.00	1.39	0.28	4.97	0.00	0.72	0.34	0.00	0.00	0.93	0.00	2.84	5.81	-
South American	Argentine (76)	57.5	3.9	0.0	1.8	3.1	-	0.4	0.9	-	-	-	0.4	-	-	0.0	-	-	-	-	-	-	-	-	114
South American	Argentine (77)	58.6	4.1	0.0	2.7	2.7	-	0.2	1.1	0.7	0.7	0.9	0.5	0.7	-	0.7	-	0.5	-	-	1.1	-	0.5	-	220
South American	Brazilian (78)	22.7	0.0	3.0	_	-	-	0.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	33

South American	Brazilian (79)	30.7	2.3	1.1	0.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	44
South American	Brazilian (80)	31.7	8.3	0.0	2.5	-	-	-	-	-	-	-	-	-	-	-	-	ı	-	1	ı	-	-	-	1
South American	Brazilian (81)	48.2	4.5	0.0	0.5	0.5	-	-	-	-	-	-	5.4	3.6	4.1	-	-	-	-	1	1	-	-	0.9	111
South American	Brazilian (82)	48.7	3.2	0.0	0.0	0.6	-	0.6	-	-	-	-	-	-	-	-	-	-	0.0	-	1.3	-	-	-	77
South American	Chilean (83)	30.6	2.4	0.0	0.0	0.2	0.2	1.2	0.0	0.0	0.0	1.7	0.9	0.5	0.2	0.0	0.0	0.0	0.0	0.0	3.1	0.2	0.0	0.2	289
South American	Chilean (84)	27.8	0.0	0.0	0.0	-	-	4.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	36
South American	Columbian (52)	35.4	6.3	0.0	2.1	2.1	-	-	-	2.1	-	0.0	-	-	-	-	-	ı	-	1	ı	-	-	-	24
South American	Columbian (85)	41.8	3.8	0.0	0.5	1.1	-	-	-	-	0.5	-	1.1	-	0.5	-	-	-	-	1	0.5	-	-	-	92
South American	Venezuelan (52)	29.6	3.7	0.0	0.0	0.0	-	-	-	0.0	-	0.0	-	-	-	-	-	-	-			-	-	-	27
Average Sout	h American	38.61	3.54	0.35	0.91	1.28	0.20	1.11	0.67	0.69	0.41	0.65	1.66	1.60	1.60	0.23	0.00	0.23	0.00	0.00	1.52	0.20	0.23	0.55	-

Supplemental Table S4. Evidence linking CFTR genotype with Ivacaftor efficacy

Type of experimental model (in vitro, in vivo preclinical, or clinical)	Major findings	References	Level of evidence ¹
In vitro	Ivacaftor stimulates CFTR gating activity in cells expressing <i>G551D-CFTR</i> compared to untreated cells.	Van Goor et al. (2009) (86) Yu et al. (2012) (87) Jih et al. (2013) (88) Vachel et al. (2013) (89) Van Goor et al. (2013) (90)	Moderate
Clinical	Ivacaftor is associated with improvements in CFTR and lung function in CF patients with at least one <i>G551D-CFTR</i> allele.	Accurso et al. (2010) (91) Ramsey et al. (2011) (92) Seliger et al. (2013) (93) Harrison et al. (2013)(94)	High
Clinical	Ivacaftor is associated with substantial improvements in the risk of pulmonary exacerbations, patient-reported respiratory symptoms, weight and concentration of sweat chloride in CF patients with at least one <i>G551D-CFTR</i> allele.	Ramsey et al. (2011) (92) Seliger et al. (2013) (93) Harrison et al. (2013) (94)	High
Clinical	Ivacaftor is associated with significant improvements in lung function in CF patients (6 – 11 years old) with at least on <i>G551D-CFTR</i> allele.	Davies et al. (2013) (95) Seliger <i>et al</i> . (2013) (93)	High
Clinical	On average, ivacaftor is associated with significant improvements in lung function (FEV ₁) and weight loss in patients with severe CF (FEV ₁ <40% predicted) or excerbations, and a <i>G551D-CFTR</i> variant; however, this response was variable.	Hebestreit <i>et al.</i> (2013) (96) Polenakovik and Sanville (2013) (97) Harrison <i>et al.</i> (2013) (94)	Strong

In vitro	Ivacaftor may be effective on other <i>CFTR</i> variants.	Yu <i>et al.</i> (2012)(87) Yarlagadda <i>et al.</i> (2012)(98)	Moderate
		Van Goor <i>et al.</i> (2013)(90)	
In vitro	Ivacaftor potentiates F508del-CFTR expressing cells, however this seems to be minimal without temperature treatment, a cell-free system, or a correcting mutation.	Van Goor et al. (2009)(86) Yu et al. (2011)(99) Eckford et al. (2012)(100) Namkung et al. (2013)(101) Yu et al. (2012)(87) Van Goor et al. (2013)(90)	Moderate
In vitro	In half the samples from F508del/F508del patients, ivacaftor significantly augments CFTR activity of human bronchial epithelial cells, and increases chloride transport of stable FRT cell lines expressing F508del-CFTR.	Van Goor et al. (2013)(90) Van Goor et al. (2013)(90) Van Goor et al. (2013)(90)	Moderate
Clinical	Clinical efficacy (improvement in CFTR and lung function) not observed in patients homozygous for <i>F508del-CFTR</i> variant treated with ivacaftor (study not powered to detect difference in efficacy).	Flume et al. (2012) (102)	Weak

¹High: Evidence includes consistent results from well-designed, well-conducted studies.

Moderate: Evidence is sufficient to determine effects, but the strength of the evidence is limited by the number, quality, or consistency of the individual studies; generalizability to routine practice; or indirect nature of the evidence.

Weak: Evidence is insufficient to assess the effects on health outcomes because of limited number or power of studies, important flaws in their design or conduct, gaps in the chain of evidence, or lack of information.

References

- (1) Grody, W.W., Cutting, G.R., Klinger, K.W., Richards, C.S., Watson, M.S. & Desnick, R.J. Laboratory standards and guidelines for population-based cystic fibrosis carrier screening. *Genetics in medicine : official journal of the American College of Medical Genetics* 3, 149-54 (2001).
- (2) Watson, M.S. *et al.* Cystic fibrosis population carrier screening: 2004 revision of American College of Medical Genetics mutation panel. *Genetics in medicine : official journal of the American College of Medical Genetics* **6**, 387-91 (2004).
- (3) ACOG Committee Opinion No. 486: Update on carrier screening for cystic fibrosis. *Obstetrics and gynecology* **117**, 1028-31 (2011).
- (4) Valdes, R., Payne, D.A. & Linder, M.W. Laboratory analysis and application of pharmacogenetics to clinical practice. *The National Academy of Clinical Biochemistry (NACB) Laboratory Medicine Practice Guidelines* 2010.
- (5) Relling, M.V. & Klein, T.E. CPIC: Clinical Pharmacogenetics Implementation Consortium of the Pharmacogenomics Research Network. *Clin Pharmacol Ther* **89**, 464-7 (2011).
- (6) Green, D.M. *et al.* Mutations that permit residual CFTR function delay acquisition of multiple respiratory pathogens in CF patients. *Respiratory research* **11**, 140 (2010).
- (7) Ogino, S., Gulley, M.L., den Dunnen, J.T. & Wilson, R.B. Standard mutation nomenclature in molecular diagnostics: practical and educational challenges. *The Journal of molecular diagnostics : JMD* **9**, 1-6 (2007).
- (8) Sugarman, E.A., Rohlfs, E.M., Silverman, L.M. & Allitto, B.A. CFTR mutation distribution among U.S. Hispanic and African American individuals: evaluation in cystic fibrosis patient and carrier screening populations. *Genetics in medicine : official journal of the American College of Medical Genetics* **6**, 392-9 (2004).
- (9) Macek, M., Jr. *et al.* Identification of common cystic fibrosis mutations in African-Americans with cystic fibrosis increases the detection rate to 75%. *American journal of human genetics* **60**, 1122-7 (1997).
- (10) Monaghan, K.G., Bluhm, D., Phillips, M. & Feldman, G.L. Preconception and prenatal cystic fibrosis carrier screening of African Americans reveals unanticipated frequencies for specific mutations. *Genetics in medicine : official journal of the American College of Medical Genetics* **6**, 141-4 (2004).
- (11) Ober, C. *et al.* Ethnic heterogeneity and cystic fibrosis transmembrane regulator (CFTR) mutation frequencies in Chicago-area CF families. *American journal of human genetics* **51**, 1344-8 (1992).
- (12) Bayleran, J.K., Yan, H., Hopper, C.A. & Simpson, E.M. Frequencies of cystic fibrosis mutations in the Maine population: high proportion of unknown alleles in individuals of French-Canadian ancestry. *Human genetics* **98**, 207-9 (1996).
- (13) Palomaki, G.E., Haddow, J.E., Bradley, L.A. & FitzSimmons, S.C. Updated assessment of cystic fibrosis mutation frequencies in non-Hispanic Caucasians. *Genetics in medicine* : official journal of the American College of Medical Genetics 4, 90-4 (2002).
- (14) Shrimpton, A.E., Borowitz, D. & Swender, P. Cystic fibrosis mutation frequencies in upstate New York. *Human mutation* **10**, 436-42 (1997).

- (15) Traystman, M.D. *et al.* Mutation analysis and haplotype correlation for 139 cystic fibrosis patients from the Nebraska Regional Cystic Fibrosis Center. *Human mutation* **2**, 7-15 (1993)
- (16) Field, P.D. & Martin, N.J. CFTR mutation screening in an assisted reproductive clinic. *The Australian & New Zealand journal of obstetrics & gynaecology* **51**, 536-9 (2011).
- (17) Estivill, X., Bancells, C. & Ramos, C. Geographic distribution and regional origin of 272 cystic fibrosis mutations in European populations. The Biomed CF Mutation Analysis Consortium. *Human mutation* **10**, 135-54 (1997).
- (18) Stuhrmann, M. *et al.* Detection of 100% of the CFTR mutations in 63 CF families from Tyrol. *Clinical genetics* **52**, 240-6 (1997).
- (19) Messiaen, L. *et al.* Analysis of 22 cystic fibrosis mutations in 62 patients from the Flanders, Belgium, reveals a high prevalence of Nordic mutation 394delTT. *Human mutation* **10**, 236-8 (1997).
- (20) Schwarz, M.J. *et al.* Cystic fibrosis mutation analysis: report from 22 U.K. regional genetics laboratories. *Human mutation* **6**, 326-33 (1995).
- (21) Angelicheva, D. *et al.* Cystic fibrosis mutations and associated haplotypes in Bulgaria a comparative population genetic study. *Human genetics* **99**, 513-20 (1997).
- (22) Kristidis, P. *et al.* Genetic determination of exocrine pancreatic function in cystic fibrosis. *American journal of human genetics* **50**, 1178-84 (1992).
- (23) Lilley, M. *et al.* Newborn screening for cystic fibrosis in Alberta: Two years of experience. *Paediatrics & child health* **15**, 590-4 (2010).
- (24) Curtis, A., Richardson, R.J., Boohene, J., Jackson, A., Nelson, R. & Bhattacharya, S.S. Absence of cystic fibrosis mutations in a large Asian population sample and occurrence of a homozygous S549N mutation in an inbred Pakistani family. *Journal of medical genetics* **30**, 164-6 (1993).
- (25) Teder, M., Klaassen, T., Oitmaa, E., Kaasik, K. & Metspalu, A. Distribution of CFTR gene mutations in cystic fibrosis patients from Estonia. *Journal of medical genetics* 37, E16 (2000).
- (26) Kinnunen, S. *et al.* Spectrum of mutations in CFTR in Finland: 18 years follow-up study and identification of two novel mutations. *Journal of cystic fibrosis : official journal of the European Cystic Fibrosis Society* **4**, 233-7 (2005).
- (27) Chevalier-Porst, F., Bonardot, A.M., Gilly, R., Chazalette, J.P., Mathieu, M. & Bozon, D. Mutation analysis in 600 French cystic fibrosis patients. *Journal of medical genetics* **31**, 541-4 (1994).
- (28) Claustres, M. *et al.* Analysis of the 27 exons and flanking regions of the cystic fibrosis gene: 40 different mutations account for 91.2% of the mutant alleles in southern France. *Human molecular genetics* **2**, 1209-13 (1993).
- (29) Claustres, M. *et al.* Spectrum of CFTR mutations in cystic fibrosis and in congenital absence of the vas deferens in France. *Human mutation* **16**, 143-56 (2000).
- (30) Guilloud-Bataille, M., De Crozes, D., Rault, G., Degioanni, A. & Feingold, J. Cystic fibrosis mutations: report from the French Registry. The Clinical Centers of the CF. *Human heredity* **50**, 142-5 (2000).
- (31) Scotet, V. *et al.* Neonatal screening for cystic fibrosis in Brittany, France: assessment of 10 years' experience and impact on prenatal diagnosis. *Lancet* **356**, 789-94 (2000).
- (32) Scotet, V. *et al.* Comparison of the CFTR mutation spectrum in three cohorts of patients of Celtic origin from Brittany (France) and Ireland. *Human mutation* **22**, 105 (2003).

- (33) Dork, T. *et al.* Detection of more than 50 different CFTR mutations in a large group of German cystic fibrosis patients. *Human genetics* **94**, 533-42 (1994).
- (34) Lindner, M. *et al.* The spectrum of CFTR mutations in south-west German cystic fibrosis patients. *Human genetics* **90**, 267-9 (1992).
- (35) Tummler, B. *et al.* Geographic distribution and origin of CFTR mutations in Germany. *Human genetics* **97**, 727-31 (1996).
- (36) Nemeti, M., Johnson, J.P., Papp, Z. & Louie, E. The occurrence of various non-delta F508 CFTR gene mutations among Hungarian cystic fibrosis patients. *Human genetics* **89**, 245-6 (1992).
- (37) Cashman, S.M., Patino, A., Delgado, M.G., Byrne, L., Denham, B. & De Arce, M. The Irish cystic fibrosis database. *Journal of medical genetics* **32**, 972-5 (1995).
- (38) Comer, D.M. *et al.* Clinical phenotype of cystic fibrosis patients with the G551D mutation. *QJM*: *monthly journal of the Association of Physicians* **102**, 793-8 (2009).
- (39) Devaney, J. *et al.* Cystic fibrosis mutation frequencies in an Irish population. *Clinical genetics* **63**, 121-5 (2003).
- (40) Hughes, D., Hill, A., Redmond, A., Nevin, N. & Graham, C. Fluorescent multiplex microsatellites used to identify haplotype associations with 15 CFTR mutations in 124 Northern Irish CF families. *Human genetics* **95**, 462-4 (1995).
- (41) Hughes, D.J., Hill, A.J., Macek, M., Jr., Redmond, A.O., Nevin, N.C. & Graham, C.A. Mutation characterization of CFTR gene in 206 Northern Irish CF families: thirty mutations, including two novel, account for approximately 94% of CF chromosomes. *Human mutation* **8**, 340-7 (1996).
- (42) Munthe-Kaas, M.C. *et al.* CFTR gene mutations and asthma in the Norwegian Environment and Childhood Asthma study. *Respiratory medicine* **100**, 2121-8 (2006).
- (43) Cartault, F. *et al.* Detection of more than 91% cystic fibrosis mutations in a sample of the population from Reunion Island and identification of two novel mutations (A309G, S1255L) and one novel polymorphism (L49L). *Clinical genetics* **54**, 437-9 (1998).
- (44) Brock, D.J., Gilfillan, A. & Holloway, S. The incidence of cystic fibrosis in Scotland calculated from heterozygote frequencies. *Clinical genetics* **53**, 47-9 (1998).
- (45) Miedzybrodzka, Z.H., Dean, J.C., Russell, G., Friend, J.A., Kelly, K.F. & Haites, N.E. Prevalence of cystic fibrosis mutations in the Grampian region of Scotland. *Journal of medical genetics* 30, 316-7 (1993).
- (46) Livshits, L.A. & Kravchenko, S.A. Cystic Fibrosis in Ukraine: age, origin and tracing of the delta F508 mutation. *Gene geography: a computerized bulletin on human gene frequencies* **10**, 219-27 (1996).
- (47) Cheadle, J., Myring, J., al-Jader, L. & Meredith, L. Mutation analysis of 184 cystic fibrosis families in Wales. *Journal of medical genetics* **29**, 642-6 (1992).
- (48) Dabovic, B.B., Radojkovic, D., Minic, P., Savic, J. & Savic, A. Frequency of the delta F508 deletion and G551D, R553X and G542X mutations in Yugoslav CF patients. *Human genetics* **88**, 699-700 (1992).
- (49) Arzimanoglou, II *et al.* Cystic fibrosis carrier screening in Hispanics. *American journal of human genetics* **56**, 544-7 (1995).
- (50) Orozco, L. *et al.* Spectrum of CFTR mutations in Mexican cystic fibrosis patients: identification of five novel mutations (W1098C, 846delT, P750L, 4160insGGGG and 297-1G-->A). *Human genetics* **106**, 360-5 (2000).

- (51) Grebe, T.A. *et al.* Genetic analysis of Hispanic individuals with cystic fibrosis. *American journal of human genetics* **54**, 443-6 (1994).
- (52) Restrepo, C.M. *et al.* CFTR mutations in three Latin American countries. *American journal of medical genetics* **91**, 277-9 (2000).
- (53) Villalobos-Torres, C. *et al.* Analysis of 16 cystic fibrosis mutations in Mexican patients. *American journal of medical genetics* **69**, 380-2 (1997).
- (54) Kanavakis, E. *et al.* Mutation analysis of ten exons of the CFTR gene in Greek cystic fibrosis patients: characterization of 74.5% of CF alleles including one novel mutation. *Human genetics* **96**, 364-6 (1995).
- (55) Tzetis, M., Kanavakis, E., Antoniadi, T., Doudounakis, S., Adam, G. & Kattamis, C. Characterization of more than 85% of cystic fibrosis alleles in the Greek population, including five novel mutations. *Human genetics* **99**, 121-5 (1997).
- (56) Bonizzato, A. *et al.* Analysis of the complete coding region of the CFTR gene in a cohort of CF patients from north-eastern Italy: identification of 90% of the mutations. *Human genetics* **95**, 397-402 (1995).
- (57) Castaldo, G. *et al.* Molecular epidemiology of cystic fibrosis mutations and haplotypes in southern Italy evaluated with an improved semiautomated robotic procedure. *Journal of medical genetics* **33**, 475-9 (1996).
- (58) Castaldo, G. *et al.* Comprehensive cystic fibrosis mutation epidemiology and haplotype characterization in a southern Italian population. *Annals of human genetics* **69**, 15-24 (2005).
- (59) Rendine, S. *et al.* Genetic history of cystic fibrosis mutations in Italy. I. Regional distribution. *Annals of human genetics* **61**, 411-24 (1997).
- (60) Kerem, E. *et al.* Highly variable incidence of cystic fibrosis and different mutation distribution among different Jewish ethnic groups in Israel. *Human genetics* **96**, 193-7 (1995).
- (61) Nunes, V. *et al.* Analysis of 14 cystic fibrosis mutations in five south European populations. *Human genetics* **87**, 737-8 (1991).
- (62) Casals, T., Ramos, M.D., Gimenez, J., Larriba, S., Nunes, V. & Estivill, X. High heterogeneity for cystic fibrosis in Spanish families: 75 mutations account for 90% of chromosomes. *Human genetics* **101**, 365-70 (1997).
- (63) Chillon, M. *et al.* Analysis of the CFTR gene confirms the high genetic heterogeneity of the Spanish population: 43 mutations account for only 78% of CF chromosomes. *Human genetics* **93**, 447-51 (1994).
- (64) Gomez-Llorente, M.A. *et al.* Analysis of 31 CFTR mutations in 55 families from the South of Spain. *Early human development* **65 Suppl**, S161-4 (2001).
- (65) Kilinc, M.O. *et al.* Highest heterogeneity for cystic fibrosis: 36 mutations account for 75% of all CF chromosomes in Turkish patients. *American journal of medical genetics* **113**, 250-7 (2002).
- (66) Yilmaz, E. *et al.* Study of 12 mutations in Turkish cystic fibrosis patients. *Human heredity* **45**, 175-7 (1995).
- (67) Loumi, O. et al. CFTR mutations in the Algerian population. *Journal of cystic fibrosis : official journal of the European Cystic Fibrosis Society* 7, 54-9 (2008).
- (68) Wei, S., Feldman, G.L. & Monaghan, K.G. Cystic Fibrosis testing among Arab-Americans. *Genetics in medicine : official journal of the American College of Medical Genetics* **8**, 255-8 (2006).

- (69) Alibakhshi, R., Kianishirazi, R., Cassiman, J.J., Zamani, M. & Cuppens, H. Analysis of the CFTR gene in Iranian cystic fibrosis patients: identification of eight novel mutations. *Journal of cystic fibrosis : official journal of the European Cystic Fibrosis Society* 7, 102-9 (2008).
- (70) Dooki, M.R., Akhavan-Niaki, H. & Juibary, A.G. Detecting Common CFTR Mutations by Reverse Dot Blot Hybridization Method in Cystic Fibrosis First Report from Northern Iran. *Iranian journal of pediatrics* **21**, 51-7 (2011).
- (71) Elahi, E. *et al.* A haplotype framework for cystic fibrosis mutations in Iran. *The Journal of molecular diagnostics : JMD* **8**, 119-27 (2006).
- (72) Jalalirad, M., Houshmand, M., Mirfakhraie, R., Goharbari, M.H. & Mirzajani, F. First study of CF mutations in the CFTR gene of Iranian patients: detection of DeltaF508, G542X, W1282X, A120T, R117H, and R347H mutations. *Journal of tropical pediatrics* **50**, 359-61 (2004).
- (73) Laufer-Cahana, A. *et al.* Cystic fibrosis mutations in Israeli Arab patients. *Human mutation* **14**, 543 (1999).
- (74) Farra, C. et al. Mutational spectrum of cystic fibrosis in the Lebanese population. Journal of cystic fibrosis: official journal of the European Cystic Fibrosis Society 9, 406-10 (2010).
- (75) Shah, U., Frossard, P. & Moatter, T. Cystic fibrosis: defining a disease under-diagnosed in Pakistan. *Tropical medicine & international health: TM & IH* 14, 542-5 (2009).
- (76) Chertkoff, L. *et al.* Spectrum of CFTR mutations in Argentine cystic fibrosis patients. *Clinical genetics* **51**, 43-7 (1997).
- (77) Visich, A. *et al.* Complete screening of the CFTR gene in Argentine cystic fibrosis patients. *Clinical genetics* **61**, 207-13 (2002).
- (78) Araujo, F.G. *et al.* Prevalence of deltaF508, G551D, G542X, and R553X mutations among cystic fibrosis patients in the North of Brazil. *Brazilian journal of medical and biological research* = *Revista brasileira de pesquisas medicas e biologicas / Sociedade Brasileira de Biofisica [et al]* **38**, 11-5 (2005).
- (79) Cabello, G.M. *et al.* Cystic fibrosis: low frequency of DF508 mutation in 2 population samples from Rio de Janeiro, Brazil. *Human biology* **71**, 189-96 (1999).
- (80) Parizotto, E.A. & Bertuzzo, C.S. Molecular characterisation of cystic fibrosis patients in the state of Sao Paulo (Brazil). *Journal of medical genetics* **34**, 877 (1997).
- (81) Perone, C., Medeiros, G.S., del Castillo, D.M., de Aguiar, M.J. & Januario, J.N. Frequency of 8 CFTR gene mutations in cystic fibrosis patients in Minas Gerais, Brazil, diagnosed by neonatal screening. *Brazilian journal of medical and biological research = Revista brasileira de pesquisas medicas e biologicas / Sociedade Brasileira de Biofisica [et al]* 43, 134-8 (2010).
- (82) Streit, C., Burlamaque-Neto, A.C., de Abreu e Silva, F., Giugliani, R. & Saraiva Pereira, M.L. CFTR gene: molecular analysis in patients from South Brazil. *Molecular genetics and metabolism* **78**, 259-64 (2003).
- (83) Lay-Son, G., Puga, A., Astudillo, P., Repetto, G.M. & Collaborative Group of the Chilean National Cystic Fibrosis, P. Cystic fibrosis in Chilean patients: Analysis of 36 common CFTR gene mutations. *Journal of cystic fibrosis : official journal of the European Cystic Fibrosis Society* **10**, 66-70 (2011).
- (84) Rios, J., Orellana, O., Aspillaga, M., Avendano, I., Largo, I. & Riveros, N. CFTR mutations in Chilean cystic fibrosis patients. *Human genetics* **94**, 291-4 (1994).

- (85) Keyeux, G. *et al.* CFTR mutations in patients from Colombia: implications for local and regional molecular diagnosis programs. *Human mutation* **22**, 259 (2003).
- (86) Van Goor, F. et al. Rescue of CF airway epithelial cell function in vitro by a CFTR potentiator, VX-770. Proceedings of the National Academy of Sciences of the United States of America 106, 18825-30 (2009).
- (87) Yu, H. *et al.* Ivacaftor potentiation of multiple CFTR channels with gating mutations. *Journal of cystic fibrosis : official journal of the European Cystic Fibrosis Society* **11**, 237-45 (2012).
- (88) Jih, K.Y. & Hwang, T.C. Vx-770 potentiates CFTR function by promoting decoupling between the gating cycle and ATP hydrolysis cycle. *Proceedings of the National Academy of Sciences of the United States of America* **110**, 4404-9 (2013).
- (89) Vachel, L., Norez, C., Becq, F. & Vandebrouck, C. Effect of VX-770 (Ivacaftor) and OAG on Ca influx and CFTR activity in G551D and F508del-CFTR expressing cells. *Journal of cystic fibrosis : official journal of the European Cystic Fibrosis Society*, (2013).
- (90) Van Goor, F., Yu, H., Burton, B. & Hoffman, B.J. Effect of ivacaftor on CFTR forms with missense mutations associated with defects in protein processing or function. *Journal of cystic fibrosis : official journal of the European Cystic Fibrosis Society*, (2013).
- (91) Accurso, F.J. *et al.* Effect of VX-770 in persons with cystic fibrosis and the G551D-CFTR mutation. *The New England journal of medicine* **363**, 1991-2003 (2010).
- (92) Ramsey, B.W. *et al.* A CFTR potentiator in patients with cystic fibrosis and the G551D mutation. *The New England journal of medicine* **365**, 1663-72 (2011).
- (93) Seliger, V.I., Rodman, D., Van Goor, F., Schmelz, A. & Mueller, P. The predictive potential of the sweat chloride test in cystic fibrosis patients with the G551D mutation. *Journal of cystic fibrosis : official journal of the European Cystic Fibrosis Society*, (2013).
- (94) Harrison, M.J., Murphy, D.M. & Plant, B.J. Ivacaftor in a G551D homozygote with cystic fibrosis. *The New England journal of medicine* **369**, 1280-2 (2013).
- (95) Davies, J.C. *et al.* Efficacy and Safety of Ivacaftor in Patients Aged 6 to 11 Years with Cystic Fibrosis with a G551D Mutation. *American journal of respiratory and critical care medicine*, (2013).
- (96) Hebestreit, H., Sauer-Heilborn, A., Fischer, R., Kading, M. & Mainz, J.G. Effects of ivacaftor on severely ill patients with cystic fibrosis carrying a G551D mutation. *Journal of cystic fibrosis : official journal of the European Cystic Fibrosis Society*, (2013).
- (97) Polenakovik, H.M. & Sanville, B. The use of ivacaftor in an adult with severe lung disease due to cystic fibrosis (DeltaF508/G551D). *Journal of cystic fibrosis : official journal of the European Cystic Fibrosis Society*, (2013).
- (98) Yarlagadda, S. *et al.* A young Hispanic with c.1646G>A mutation exhibits severe cystic fibrosis lung disease: is ivacaftor an option for therapy? *American journal of respiratory and critical care medicine* **186**, 694-6 (2012).
- (99) Yu, W., Kim Chiaw, P. & Bear, C.E. Probing conformational rescue induced by a chemical corrector of F508del-cystic fibrosis transmembrane conductance regulator (CFTR) mutant. *The Journal of biological chemistry* **286**, 24714-25 (2011).
- (100) Eckford, P.D., Li, C., Ramjeesingh, M. & Bear, C.E. Cystic fibrosis transmembrane conductance regulator (CFTR) potentiator VX-770 (ivacaftor) opens the defective

- channel gate of mutant CFTR in a phosphorylation-dependent but ATP-independent manner. *The Journal of biological chemistry* **287**, 36639-49 (2012).
- (101) Namkung, W., Park, J., Seo, Y. & Verkman, A.S. Novel Amino-Carbonitrile-Pyrazole Identified in a Small Molecule Screen Activates Wild-Type and {triangleup}F508 Cystic Fibrosis Transmembrane Conductance Regulator in the Absence of a cAMP Agonist. *Molecular pharmacology* **84**, 384-92 (2013).
- (102) Flume, P.A. *et al.* Ivacaftor in subjects with cystic fibrosis who are homozygous for the F508del-CFTR mutation. *Chest* **142**, 718-24 (2012).