

ACKNOWLEDGEMENTS

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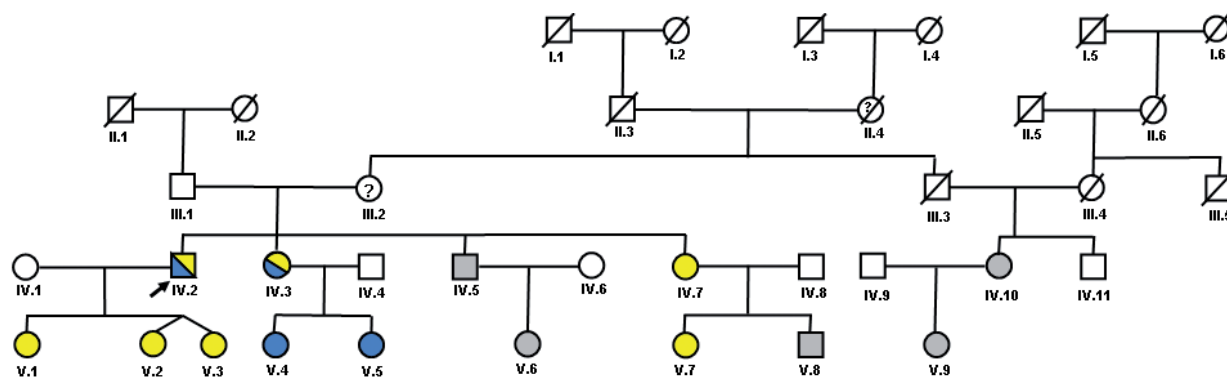
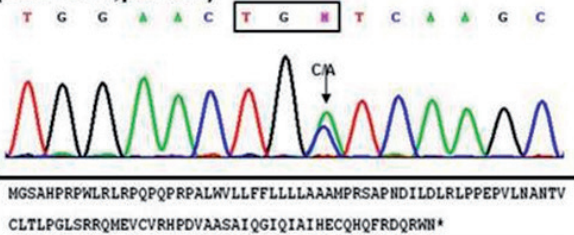


Fig. S1. Pedigree of the examined family members with Schöpf-Schulz-Passarge syndrome. Squares: males; circles: females. The arrow indicates the index patient (IV.2). Coloured symbols represent carriers of *WNT10A* mutations; blue: *WNT10A* p.Cys107*; yellow: *WNT10A* p.Arg248*. Examined family members carrying none of these mutations (wild type) are in grey. Question marks indicate individuals with unknown genetic status. The parents of the index patient, unfortunately, refused contact. His mother was reported to have symptoms on hands and feet. Her deceased mother, grandmother of patient 1, was reported to have had no dental anomalies, but had always suffered from sensitive hands and feet, and, despite wrapping her hands overnight and her husband being a shoemaker, hands including finger tips and feet had always fissured and skin could be peeled off in layers from her palms.

A. Wildtype WNT10A (417 aa)

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MGSAHPRFWLRLRPQPRPALWLLFFLLLLAAAMPSPNDIIDLRLPPEPVLNANTV
CLTLPLGLSRRQMEVCVRHPDVAASAIQGIQIAIHECQHQRDQRWNCSSLETRNKIPYES
PIFSRGFRESAFAYAIAAGVVHAVSHACALGKLKACGCDASRRGDEEAFRRKLHRLQLD
ALQRGKGLSHGVPEHPALPTASPLQDSWEGGCSPPDMGFGFRFSKDFLDSREPHRDIHA
RMRLHNNRVGRQAVMENMRKCKCHGTSGSCQLKTCWQVTEFRTVGALLRSRFRATLI
RPHNRNGGQLEPGPAGAPSPAPGAPGPRRRASPADLVYFEKSPDFCEREPRDLSAGTVGR
LCNKSSAGSDGCGSMCCGRGHNILRQTRSERCHCRFWCCFVVCCECRITWVSVCK*
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B. WNT10A exon 2 (c.321C>A;p.C107*)



C. WNT10A exon 3 (c.742C>T;p.R248*)

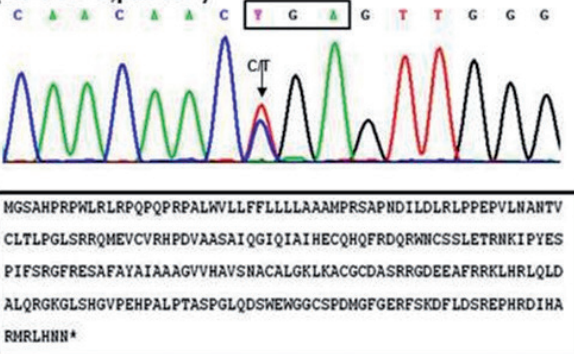


Fig. S2. Graphical illustrations of the WNT10A mutations detected. The WNT10A gene comprises four exons and is located on the long (q) arm of chromosome 2 (2q35). It encodes a protein of 417 amino acids belongs to a large family of secreted signalling proteins. (A) Wild-type protein sequence of *WNT10A* (417 aa). (B) Sequence map of exon 2 showing the c.321C>A; p.Cys107* mutation in the human *WNT10A* gene. (C) Sequence map of exon 3 showing the c.742C>T; p.Arg248* mutation in the human *WNT10A* gene. Both nonsense mutations introduce premature stop codons TGA (indicated by a box).



Fig. S3. Clinical and radiological findings in patients 1–5. (A–D) patient 1 (IV.2); (A) Overview and (B) detail of histology of lid lesions revealed apocrine hidrocystoma (haematoxylin (H&E) stain). (C) The skin of the palms and soles showed diffuse erythrokeratoderma with scaling particularly in pressure-bearing areas. All nails were fragile, some hypoplastic with longitudinal furrows and ridging. (D) Panoramic X-ray displaying 6 permanent teeth (16, 11, 21, 36, 35, and 47 according to the Fédération Dentaire Internationale tooth numbering system), 2 persistent deciduous teeth (73 and 83), but no periodontal or other pathology. All teeth were capped to support the upper and lower removable dentures. His beard hair appeared fine, his scalp showed androgenic pattern baldness, he had sparse and short eyelashes, almost missing eyebrows and scanty body and axillary hair (not shown). (E, F) Patient 2 (IV.3). (E) The skin of her nose and her palms and soles were erythematous with fine scaling. (F) Panoramic X-ray showing only 8 permanent teeth (17, 11, 21, 27, 37, 34, 44, and 47) all being capped to support upper and lower removable dentures. There was no history of periodontitis. (G, H) patient 4 (V.3); (G) Her palms and soles were mildly erythematous. The skin of her hands was very dry and would fissure easily without the daily use of skin lotion. In addition, the skin of her elbow crease was lichenified. Her finger nails and also her toe nails were very soft and could easily be pulled off. She therefore uses nail polish routinely to stabilize her nails. (H) Panoramic X-ray: 5 permanent teeth (15, 14, 12, 22, and 25) did not develop. Gaps had been closed orthodontically and by the insertion of dental implants. (I) Patient 3 (IV.7) with callused skin of the soles. Agenesis of 3 permanent teeth (14, 37, and 47) and no signs of periodontitis (not shown). (J) Patient 5 (V.7); panoramic X-ray showing agenesis of 5 permanent teeth (15, 37, 35, 45 and 47).

Since this is a very extensive table, the format and content has not been edited by ActaDV.

Table SI. Characteristics of 38 reported cases of Schöpf-Schulz-Passarge Syndrome

Author	Year	N	Sex	Age	Cysts	Since age	Hypo-dontia	1° denti-tion	2° denti-tion	Comment	Hypo-trichosis	Since age	Palmo-plantar hyper-keratosis	Since age	Sweating	Since age	Onycho-dystrophy	Since age	Consan-guinity	Pedigree presented	Malignant tumors	At age
Schöpf et al.	1971	2	F	68	X	60	X	Lost early	X	Only 3 permanent teeth (12, 11, 48)	X	25	X	12			X	12	Yes	X		
			F	66	X	Late in life	X		X		X		X				X		Yes	X		
Burket et al.	1984	1	M	35	X	30	X	N.a.	X	Only 4 (rudimentary) permanent molars, persistent deciduous teeth until his late 20s, no hx of periodontitis			X	12			X	12	No			
Font et al.	1986	1	M	67	X	20	X						X	20			X		No		BCC nose	66
Nordin et al.	1988	3	F	80	X	65	X	X	X	4 lower deciduous teeth missing, lost at age 8-9, only 4 cone-shaped upper incisors (12, 11, 21, 22) developed	X		X	15	X	Always	X	Childhood	No	X		
			M	75	X	60	X						X	15	X	Youth	X	Childhood				
Perret et al.	1989	1	M	75	X		X		X	Denture at age 18 because of hypoplastic teeth	X	20	X				X				BCC? (clinical diagnosis) SSC	71
			M	75	X						X		X									67, 75
Monk et al.	1992	3	F	62	X		X	X	X	Primary dentition reported "abnormal", no permanent teeth, edentulous at exam; "bird-like facies"	X		X	47			X		Yes		Hypernephroma, BCC	
			M	58	X		X	X	X		X								Yes			
			M	51	X		X		X		X		X				X		Yes			
Küster & hammerstein	1992	1	F	43	X	43	X	N.a.	X	Most permanent teeth missing, first dentures at age 14, 5 permanent teeth present at exam	X	Childhood	X	20			X		No	X		
Craigen et al.	1997	1	M	56	X	54	X		X		X		X	Life-long			X	Life-long	No	X		
Starink	1997	4	F	78	X	77				Small conical widely spaced teeth	X			23			X		No		Malignant ESFA	
			F	59	X						X		X	20					No			
			F	73	X						X		X	Childhood			X		No		BCC of nose, adenocarcinoma of breast	
			F	71	X		X		X		X		X	25			X		No			
Verplancke et al.	1998	1	M	53	X		X	N.a.	X	No permanent teeth developed	X	18	X	14			X		No			
			M	71	X	55	X	X	X		X		X	20			X	45	No		BCC, M. Bowen	45 and 70
Gkolfinopoulos et al.	2001	2	F	49	X		X	N.a.	X	Permanent teeth did not erupt, "bird-like facies", full dentures	X		X	25			X		No		No	
			M	56	X		X		X		X		X	18	X	Child-hood	X		Yes		No	

The format and content has not been edited by ActaDV in this Table.

Table SII. Reported WNT10A mutations and genotypes in patients diagnosed with Schöpf-Schulz-Passarge syndrome. The most commonly identified mutation is c.321C>A;p.Cys107*. So far, three heterozygous and eight homozygous WNT10A genotypes resulting from 11 different mutations have been described.

Autors	Year of publication	Number of patients	Homo-zygous	Compound hetero-zygous	Mis-sense	Non-sense	Exon	First allele		Second allele	
								Nucleotide substitution	Amino-acid substitution	Nucleotide substitution	Amino-acid substitution
Bohring et al.	2009	1	X			X	2	c.321C>A	p.Cys107*	c.321C>A	p.Cys107*
Nagy et al.	2010	1	X			X	2	c.321C>A	p.Cys107*	c.321C>A	p.Cys107*
Castori et al.	2011	1	X		X		4	c.796G>T	p.Gly266Cys	c.796G>T	p.Gly266Cys
		3	X		X		3	c.391G>A	p.Ala131Thr	c.391G>A	p.Ala131Thr
Petrof et al.	2011	1	X			X	2	c.321C>A	p.Cys107*	c.321C>A	p.Cys107*
Wedgeworth et al.	2011	1	X			X	2	c.321C>A	p.Cys107*	c.321C>A	p.Cys107*
Tziotzios et al.	2014	1	X			X	4	c.1168G>T	p.Glu390*	c.1168G>T	p.Glu390*
		1	X		X		4	c.1084T>C	p.Cys362Arg	c.1084T>C	p.Cys362Arg
		1		X	X	X	2,4	c.321C>A	p.Cys107*	c.810C>A	p.Ser270Arg
		1		X	X	X	2,3	c.321C>A	p.Cys107*	c.391G>A	p.Ala131Thr
		3	X			X	2	c.321C>A	p.Cys107*	c.321C>A	p.Cys107*
Vilas-Sueiro et al.	2015	1	X		X		3	c.682T>A	p.Phe228Ile	c.682T>A	p.Phe228Ile
					X		4	c.831G>T	p.Trp277Cys	c.831G>T	p.Trp277Cys
Painsi et al.	2017	1	X		X		4	c.1135C>T	p.Arg379Cys	c.1135C>T	p.Arg379Cys
Pauly et al.	2018	1		X	X		2,4	c.318C>G	p.Asn106Lys	c.1036T>C	p.Cys246Arg
present study	2018	2		X		X	2,3	c.321C>A	p.Cys107*	c.742C>T	p.Arg248*
		1				X	3			c.742C>T	p.Arg248*