

Table S2. Summary of clinical features in females with the most common NAA10 variant (*p.Arg83Cys*).

ID	Inheritance,X-inact.	Age	Facial Dysmorphism	microcephaly	Short stature	Neurodevelopment	hypo/hypertonia	Brain imaging anomalies	Feeding difficulties	Cardiac anomalies	Eye abnormalities	Skeletal system abnormalities	Others
1	De novo, random	4y 2mo	NA	-3.5 SD	yes	Severe DD, absent speech	hypo	no	yes	no	no	no	no
2	de novo, 92%	4y 3mo	NA	-3.59 SD	yes	DD (not walking at 3y 6mo, severe language delay), aggressivity	hypo	hippocampic dysgenesis	no	no	no	no	no
3	de novo, NA	2y 2mo	prominent forehead, up-lifted ear lobes, narrow palate	-3.86 SD	yes	severe DD (not walking yet and absent speech)	hypo	periventricular white matter loss	yes	mild PAS, PFO vs. ASD	myopia, astigmatism	large fontanelles, super-numerary vertebra, dysmorphic L1	no
4	de novo, NA	3y 10mo	NA	-4.85 SD	yes	severe DD (not walking yet and absent speech)	hypo/ hyper	IVH occipital horn, PVL, HIE	yes	no	alternating esotropia, cortical visual impairment	large fontanelles, small hands and feet, thoracic anomalies	VP shunt
Saunier et al. 2016	de novo, NA	10y6mo	bitemporal narrowing, arched eyebrows, synophrys, upturned nose, uplifted earlobes, hirsutism	-2.8 SD	yes	DD (walking at 3y), moderate ID, very active, problem in new sitting	hypo	no	mild	long QT	astigmatism, hyperopia	large fontanelles, mild pectus excavatum	cutis marmorata
6	de novo, 100%	4y	arched eyebrows, upturned nose	no	no	severe DD (walking at 2y, absent speech), hyperactivity, poor eye contact, aggressivity	no	NA	yes	incomplete right bundle branch block	hyperopia	clinodactily V, pectus excavatum	sleeping problem
7	MGM, NA	6y 6mo	prominent forehead, bitemporal narrowing, arched eyebrows, upturned nose	-4.85 SD	yes	Severe ID (not walking yet and absent speech), attention deficit, restlessness	periph hyper	NA	NA	no	myopia, megalopapillae	small hands and feet, tapering fingers, pectus excavatum	cutis marmorata
Sidhu et al. 2017	de novo, NA	13y	frontal bossing, bitemporal narrowing, low set ears, coarse	NA	NA	DD (walking with assistance at 25mo), severe ID, autism spectrum disorder	hypo	white matter volume loss, thin CC, ventriculomegaly	no	no	no	broad big toes	seizures, hyper-somnolence

												pulmonary stenosis, di- lated right atrial and ventricle		
17	de novo, NA	6y	yes	no	yes	global DD, behav- ioral issues	no	NA	yes	long QT	NA	extra rib, extra vertebrae	seizures	
18	de novo, NA	2y 6mo	yes	no	yes	global DD	mild hypo	NA	yes, GE re- flux	NA	astigmatism	no	no	
19	de novo, NA	7y	yes	yes	yes	global DD, severe ID, autism spectrum dis- order	mild hypo, cerebral palsy	central white mat- ter loss, thin CC	yes	NA	astigmatism, myopia	no	no	
Our Case	20	de novo, NA	18y	mild coarse face, bitemporal narrowing, arched thick eyebrows, long eyelashes, syn- ophrys, broad tip, anteverted nares, smooth long philtrum, thin upper lip, mild low-set ears, hirsutism	-2 SD	yes	severe DD (walking at 30 mo, absent speech), severe ID, autistic traits	hypo	cerebellar and frontal lobe atro- phy, thin CC, large frontal horn ven- tricles	no	VSD, mild to moderate hyper- trophic car- dio-myopa- thy	myopia, astig- matism, slightly pale and broad optic disc, cen- tral colobo- matous defect	large fontanelles, wormian bones, hip dys- plasia, delayed bone age, scoli- osis, Kyphosis	Lennox-Gas- taut epilepsy, sensorial neuropathy, conductive hearing loss
Total	20	19/20 (de novo)	14/20	9/20	12/20	20/20	9/20 (hypo)	9/20	15/20	9/20	13/20	10/20		

ASD, atrial septal defect; CC, *corpus callosum*; CSF, cerebrospinal fluid; DD, developmental delay; ID intellectual disability; HIE, hypoxic-ischemic encephalopathy; IVH, intraventricular hemorrhage ; MGM, maternal germline; NA, not available; PAS, pulmonary artery stenosis; PEG, percutaneous endoscopic gastrostomy; PFO, patent foramen ovale; PVL periventricular leukomalacia; VP ventriculo-peritoneal; VSD, ventricular septal defect.