

- e1. Floeter, M. K., B. J. Traynor, J. Farren, L. E. Braun, M. Tierney, E. A. Wiggs, and T. Wu. Disease progression in C9orf72 mutation carriers. *Neurology*. 2017;89: 234-41; doi: 10.1212/WNL.0000000000004115
- e2. Chio, A., G. Borghero, G. Restagno, G. Mora, C. Drepper, B. J. Traynor, et al. Clinical characteristics of patients with familial amyotrophic lateral sclerosis carrying the pathogenic GGGGCC hexanucleotide repeat expansion of C9ORF72. *Brain*. 2012;135: 784-93; doi: 10.1093/brain/awr366
- e3. Byrne, S., M. Elamin, P. Bede, A. Shatunov, C. Walsh, B. Corr, et al. Cognitive and clinical characteristics of patients with amyotrophic lateral sclerosis carrying a C9orf72 repeat expansion: a population-based cohort study. *Lancet Neurol*. 2012;11: 232-40; doi: 10.1016/S1474-4422(12)70014-5
- e4. Umoh, M. E., C. Fournier, Y. Li, M. Polak, L. Shaw, J. E. Landers, et al: Comparative analysis of C9orf72 and sporadic disease in an ALS clinic population. *Neurology*. 2016;87: 1024-30; doi: 10.1212/WNL.0000000000003067
- e5. Williams, K. L., J. A. Fifita, S. Vucic, J. C. Durnall, M. C. Kiernan, I. P. Blair, et al. Pathophysiological insights into ALS with C9ORF72 expansions. *J Neurol Neurosurg Psychiatry*. 2013;84: 931-5; doi: 10.1136/jnnp-2012-304529
- e6. Strong, M. J., G. M. Grace, M. Freedman, C. Lomen-Hoerth, S. Woolley, L. H. Goldstein, et al. Consensus criteria for the diagnosis of frontotemporal cognitive and behavioural syndromes in amyotrophic lateral sclerosis. *Amyotroph Lateral Scler*. 2009;10: 131-46; doi: 10.1080/17482960802654364
- e7. Rascovsky, K., J. R. Hodges, D. Knopman, M. F. Mendez, J. H. Kramer, J. Neuhaus, et al. Sensitivity of revised diagnostic criteria for the behavioural variant of frontotemporal dementia. *Brain*. 2011;134: 2456-77; doi: 10.1093/brain/awr179
- e8. Strong, M. J., S. Abrahams, L. H. Goldstein, S. Woolley, P. McLaughlin, J. Snowden, et al. Amyotrophic lateral sclerosis - frontotemporal spectrum disorder (ALS-FTSD): Revised diagnostic criteria. *Amyotroph Lateral Scler Frontotemporal Degener*. 2017;18: 153-74; doi: 10.1080/21678421.2016.1267768
- e9. McHutchison, C. A., D. J. Leighton, A. McIntosh, E. Cleary, J. Warner, M. Porteous, et al. Relationship between neuropsychiatric disorders and cognitive and behavioural change in MND. *J Neurol Neurosurg Psychiatry*. 2020;91: 245-53; doi: 10.1136/jnnp-2019-321737
- e10. Woolley, S. C., M. K. York, D. H. Moore, A. M. Strutt, J. Murphy, P. E. Schulz, et al. Detecting frontotemporal dysfunction in ALS: utility of the ALS Cognitive Behavioral Screen (ALS-CBS). *Amyotroph Lateral Scler*. 2010;11: 303-11; doi: 10.3109/17482961003727954
- e11. Abrahams, S., J. Newton, E. Niven, J. Foley, and T. H. Bak. Screening for cognition and behaviour changes in ALS. *Amyotroph Lateral Scler Frontotemporal Degener*. 2014;15: 9-14; doi: 10.3109/21678421.2013.805784
- e12. Lomen-Hoerth, C., T. Anderson, and B. Miller: The overlap of amyotrophic lateral sclerosis and frontotemporal dementia. *Neurology*. 2002;59: 1077-9; doi: 10.1212/wnl.59.7.1077
- e13. Murphy, J., P. Factor-Litvak, R. Goetz, C. Lomen-Hoerth, P. L. Nagy, J. Hupf, et al. Cognitive-behavioral screening reveals prevalent impairment in a large multicenter ALS cohort. *Neurology*. 2016;86: 813-20; doi: 10.1212/WNL.0000000000002305
- e14. Silverman, H. E., J. S. Goldman, and E. D. Huey. Links Between the C9orf72 Repeat Expansion and Psychiatric Symptoms. *Curr Neurol Neurosci Rep*. 2019;19: 93; doi: 10.1007/s11910-019-1017-9
- e15. Turner, M. R., R. Goldacre, K. Talbot, and M. J. Goldacre. Psychiatric disorders prior to amyotrophic lateral sclerosis. *Ann Neurol*. 2016;80: 935-38; doi: 10.1002/ana.24801
- e16. O'Brien, M., T. Burke, M. Heverin, A. Vajda, R. McLaughlin, J. Gibbons, et al. Clustering of Neuropsychiatric Disease in First-Degree and Second-Degree Relatives of Patients With Amyotrophic Lateral Sclerosis. *JAMA Neurol*. 2017;74: 1425-30; doi: 10.1001/jamaneurol.2017.2699
- e17. Marogianni, C., D. Rikos, A. Provatas, K. Dadouli, P. Ntellias, P. Tsitsi, et al. The role of C9orf72 in neurodegenerative disorders: a systematic review, an updated meta-analysis, and the creation of an online database. *Neurobiol Aging*. 2019;84: 238 e25-38 e34; doi: 10.1016/j.neurobiolaging.2019.04.012
- e18. Snowden, J. S., J. Harris, A. Richardson, S. Rollinson, J. C. Thompson, D. Neary, et al. Frontotemporal dementia with amyotrophic lateral sclerosis: a clinical comparison of patients with and without repeat expansions in C9orf72. *Amyotroph Lateral Scler Frontotemporal Degener*. 2013;14: 172-6; doi: 10.3109/21678421.2013.765485

- e19. Devenney, E. M., R. M. Ahmed, G. Halliday, O. Piguet, M. C. Kiernan, and J. R. Hodges. Psychiatric disorders in C9orf72 kindreds: Study of 1,414 family members. *Neurology*. 2018;91: e1498-e507; doi: 10.1212/WNL.0000000000006344
- e20. Boeve, B. F., K. B. Boylan, N. R. Graff-Radford, M. DeJesus-Hernandez, D. S. Knopman, O. Pedraza, et al. Characterization of frontotemporal dementia and/or amyotrophic lateral sclerosis associated with the GGGGCC repeat expansion in C9ORF72. *Brain*. 2012;135: 765-83; doi: 10.1093/brain/aws004
- e21. Floris, G., G. Borghero, A. Cannas, F. Di Stefano, E. Costantino, M. R. Murru, et al. Frontotemporal dementia with psychosis, parkinsonism, visuo-spatial dysfunction, upper motor neuron involvement associated to expansion of C9ORF72: a peculiar phenotype?. *J Neurol*. 2012;259: 1749-51; doi: 10.1007/s00415-012-6444-3
- e22. O'Dowd, S., D. Curtin, A. J. Waite, K. Roberts, N. Pender, V. Reid, et al. C9ORF72 expansion in amyotrophic lateral sclerosis/frontotemporal dementia also causes parkinsonism. *Mov Disord*. 2012;27: 1072-4; doi: 10.1002/mds.25022
- e23. Estevez-Fraga, C., F. Magrinelli, D. Hensman Moss, E. Mulroy, G. Di Lazzaro, A. Latorre, et al. Expanding the Spectrum of Movement Disorders Associated With C9orf72 Hexanucleotide Expansions. *Neurol Genet*. 2021;7: e575; doi: 10.1212/NXG.0000000000000575
- e24. Nuytemans, K., G. Bademci, M. M. Kohli, G. W. Beecham, L. Wang, J. I. Young, et al. C9ORF72 intermediate repeat copies are a significant risk factor for Parkinson disease. *Ann Hum Genet*. 77: 351-63; doi: 10.1111/ahg.12033
- e25. Theuns, J., A. Verstraeten, K. Sleegers, E. Wauters, I. Gijselinck, S. Smolders, et al. Global investigation and meta-analysis of the C9orf72 (G4C2)n repeat in Parkinson disease. *Neurology*. 2014;83: 1906-13; doi: 10.1212/WNL.0000000000001012
- e26. Nuytemans, K., V. Inchausti, G. W. Beecham, L. Wang, D. W. Dickson, J. Q. Trojanowski, et al. Absence of C9ORF72 expanded or intermediate repeats in autopsy-confirmed Parkinson's disease. *Mov Disord*. 2014;29: 827-30; doi: 10.1002/mds.25838
- e27. Carneiro, F., D. Saracino, V. Huin, F. Clot, C. Delorme, A. Meneret, et al. Isolated parkinsonism is an atypical presentation of GRN and C9orf72 gene mutations. *Parkinsonism Relat Disord*. 2020;80: 73-81. doi: 10.1016/j.parkreldis.2020.09.019
- e28. Wilke, C., J. K. Pomper, S. Biskup, C. Puskas, D. Berg, and M. Synofzik. Atypical parkinsonism in C9orf72 expansions: a case report and systematic review of 45 cases from the literature. *J Neurol*. 2016;263: 558-74; doi: 10.1007/s00415-016-8021-7
- e29. Cooper-Knock, J., A. Frolov, J. R. Highley, G. Charlesworth, J. Kirby, A. Milano, et al. C9ORF72 expansions, parkinsonism, and Parkinson disease: a clinicopathologic study. *Neurology*. 81: 808-11. doi: 10.1212/WNL.0b013e3182a2cc38
- e30. Shinagawa, S., G. Naasan, A. M. Karydas, G. Coppola, M. Pribadi, W. W. Seeley, et al. Clinicopathological Study of Patients With C9ORF72-Associated Frontotemporal Dementia Presenting With Delusions. *J Geriatr Psychiatry Neurol*. 2015;28: 99-107; doi: 10.1177/0891988714554710
- e31. Lesage, S., I. Le Ber, C. Condroyer, E. Broussolle, A. Gabelle, S. Thobois, et al. C9orf72 repeat expansions are a rare genetic cause of parkinsonism. *Brain*. 2013;136: 385-91; doi: 10.1093/brain/aws357
- e32. Hensman Moss, D. J., M. Poulter, J. Beck, J. Hehir, J. M. Polke, T. Campbell, et al. C9orf72 expansions are the most common genetic cause of Huntington disease phenocopies. *Neurology*. 2014;82: 292-9; doi: 10.1212/WNL.0000000000000061
- e33. Martins, J., J. Damasio, A. Mendes, N. Vila-Cha, J. E. Alves, C. Ramos, et al. Clinical spectrum of C9orf72 expansion in a cohort of Huntington's disease phenocopies. *Neurol Sci*. 2018;39: 741-44; doi: 10.1007/s10072-018-3268-7
- e34. Kostic, V. S., V. Dobricic, I. Stankovic, V. Ralic, and E. Stefanova: C9orf72 expansion as a possible genetic cause of Huntington disease phenocopy syndrome. *J Neurol*. 2014;261: 1917-21; doi: 10.1007/s00415-014-7430-8
- e35. van Blitterswijk, M., B. Mullen, M. G. Heckman, M. C. Baker, M. DeJesus-Hernandez, P. H. Brown, et al. Ataxin-2 as potential disease modifier in C9ORF72 expansion carriers. *Neurobiol Aging*. 2014;35: 2421 e13-7; doi: 10.1016/j.neurobiolaging.2014.04.016
- e36. Figueroa, K. P., S. R. Gan, S. Perlman, G. Wilmot, C. M. Gomez, J. Schmahmann, et al. C9orf72 repeat expansions as genetic modifiers for depression in spinocerebellar ataxias. *Mov Disord*. 2018;33: 497-98; doi: 10.1002/mds.27258

- e37.Snowden, J. S., S. Rollinson, J. C. Thompson, J. M. Harris, C. L. Stopford, A. M. Richardson, et al. Distinct clinical and pathological characteristics of frontotemporal dementia associated with C9ORF72 mutations. *Brain*. 2012;135: 693-708; doi: 10.1093/brain/awr355
- e38.O'Rourke, J. G., L. Bogdanik, Akmg Muhammad, T. F. Gendron, K. J. Kim, A. Austin, et al. C9orf72 BAC Transgenic Mice Display Typical Pathologic Features of ALS/FTD. *Neuron*. 2015;88: 892-901. doi: 10.1016/j.neuron.2015.10.027
- e39.Peters, O. M., G. T. Cabrera, H. Tran, T. F. Gendron, J. E. McKeon, J. Metterville, et al. Human C9ORF72 Hexanucleotide Expansion Reproduces RNA Foci and Dipeptide Repeat Proteins but Not Neurodegeneration in BAC Transgenic Mice. *Neuron*. 2015;88: 902-09; doi: 10.1016/j.neuron.2015.11.018
- e40.Liu, Y., A. Pattamatta, T. Zu, T. Reid, O. Bardhi, D. R. Borchelt, et al. C9orf72 BAC Mouse Model with Motor Deficits and Neurodegenerative Features of ALS/FTD. *Neuron*. 2016;90: 521-34; doi: 10.1016/j.neuron.2016.04.005
- e41.Mordes, D. A., B. M. Morrison, X. H. Ament, C. Cantrell, J. Mok, P. Eggan, et al. Absence of Survival and Motor Deficits in 500 Repeat C9ORF72 BAC Mice. *Neuron*. 2020;108: 775-83 e4; doi: 10.1016/j.neuron.2020.08.009
- e42.Nguyen, L., L. A. Laboissonniere, S. Guo, F. Pilotto, O. Scheidegger, A. Oestmann, et al. Survival and Motor Phenotypes in FVB C9-500 ALS/FTD BAC Transgenic Mice Reproduced by Multiple Labs. *Neuron*. 2020;108: 784-96 e3; doi: 10.1016/j.neuron.2020.09.009
- e43.Nguyen, L., F. Montrasio, A. Pattamatta, S. K. Tusi, O. Bardhi, K. D. Meyer, et al. Antibody Therapy Targeting RAN Proteins Rescues C9 ALS/FTD Phenotypes in C9orf72 Mouse Model. *Neuron*. 2020;105: 645-62 e11; doi: 10.1016/j.neuron.2019.11.007
- e44.Pattamatta, A., L. Nguyen, H. R. Olafson, M. M. Scotti, L. A. Laboissonniere, J. Richardson, et al. Repeat length increases disease penetrance and severity in C9orf72 ALS/FTD transgenic mice. *Hum Mol Genet*. 2021;29: 3900-18; doi: 10.1093/hmg/ddaa279
- e45.Ciura, S., S. Lattante, I. Le Ber, M. Latouche, H. Tostivint, A. Brice, and E. Kabashi. Loss of function of C9orf72 causes motor deficits in a zebrafish model of amyotrophic lateral sclerosis. *Ann Neurol*. 2013;74: 180-7; doi: 10.1002/ana.23946
- e46.Therrien, M., G. A. Rouleau, P. A. Dion, and J. A. Parker. Deletion of C9ORF72 results in motor neuron degeneration and stress sensitivity in *C. elegans*. *PLoS One*. 2013;8: e83450; doi: 10.1371/journal.pone.0083450
- e47.Koppers, M., Blokhuis, A. M., Westeneng, H. J., Terpstra, M. L., Zundel, C. A., Vieira de Sá, R., et al. C9orf72 ablation in mice does not cause motor neuron degeneration or motor deficits. *Annals of neurology*. 2015;78(3), 426–438; doi: 10.1002/ana.24453
- e48.Zhu, Q., J. Jiang, T. F. Gendron, M. McAlonis-Downes, L. Jiang, A. Taylor, et al. Reduced C9ORF72 function exacerbates gain of toxicity from ALS/FTD-causing repeat expansion in C9orf72. *Nat Neurosci*. 2020;23: 615-24; doi: 10.1038/s41593-020-0619-5