eTable 5 GlyR-positive and seronegative patients, and other categories

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Case no.	Age at onset	Clinical	Autoimmunity/	Other	Lack of antagonist	mRS		Improved	Response	to	
	Sex	phenotype	Malignancy	autoantibodies	Inhibition on	Baseline	Final	symptom	immunotherapy		
			(PNS score)		EMG						
GlyR											
		I	I	I	I		I		I		
8	43	SLS	None	Not detected	Not examined	3	0	Decreased stiffness	Responsive		
	Female							Improved walking			
47	53	PERM	None	Not detected	+	5	1	Decreased stiffness,	Responsive		
	Male							double vision, and			
								psychiatric symptoms			
49	61	PERM	None	Not detected	+	5	0	Disappearance of	Responsive		
	Male							myoclonus and rigidity			
25	72	PERM	Lymphoma (6)	Not detected	+	5	2	Decreased stiffness,	Responsive		
	Male							Disappearance of			
								myoclonus			
seronegative											
4	41	SLS	Lymphoma	None	+	5	4	Improved walking	Responsive		
	Female		(6)								

19	15 Female	Classic	None	None	+	5	5	Decreased stiffness	Responsive	
36	81	Classic	Lung cancer	None	+	5	4	Improved walking	No Immunotherapy	
	Female		(6)							
46	65	PERM	Lymphoma	None	+	5	5	Decreased stiffness,	Responsive	
	Male		(6)					dysarthria, and dysphagia		
								Improved eye movement		
52	41	PERM	Tongue Cancer	None	+	4	2	Decreased stiffness	Responsive	
	Female		(6)					Improved walking		
Other categories										
48	61	PERM	None	GAD65	+	4	1	Decreased stiffness,	Responsive	
	Female			GlyR				dysarthria, and dysphagia		
				ТРО				Improved eye movement		
53	63	Classic	Sjögren	Ri antibodies	+	5	5	Decreased stiffness	Unresponsive	
	Female	OMS	syndrome	(serum)§						
			Breast cancer							
			(10)							

CSF, cerebrospinal fluid; GAD65, glutamic acid decarboxylase-65; GlyR, glycine receptor  $\alpha_l$  subunit

OMS, opsoclonus; SLS, stiff-limb syndrome; PERM, progressive encephalomyelitis with rigidity and myoclonus; PNS; paraneoplastic neurologic syndrome; TPO, thyroid peroxidase Cases 8, 25, and 48 were previously reported. 64, 65, 66

- \* Antibodies other than GAD65 antibodies were not assayed.
- § Ri antibodies were tested using the EUROIMMUN line blot assay, but confirmation by immunostaining of rodent brain tissue was not performed.