

# WFS1 G728D — Wolframin

Glycine → Aspartic acid at position 728. C-terminal ER-luminal (calcium binding. ClinVar Uncertain significance/Uncertain risk allele, AlphaMissense 0.865, DynaMut2  $\Delta\Delta G$  -1.65 kcal/mol (destabilising).

## IDENTITY

|                   |                                   |
|-------------------|-----------------------------------|
| Variant           | G728D (p.Glycine728Aspartic acid) |
| DNA change        | c.2183G>A                         |
| Gene · Protein    | WFS1 · Wolframin (890 aa)         |
| UniProt           | O76024 · WFS1_HUMAN               |
| ClinVar accession | VCV000591295                      |
| Amino acid change | Glycine (G) → Aspartic acid (D)   |

## STRUCTURAL CONTEXT

|                      |   |
|----------------------|---|
| AlphaFold model      | AF-O76024-F1, v6  |
| pLDDT at residue 728 | <b>86.00</b> HIGH CONFIDENCE  |
| Domain               | C-terminal ER-luminal (calcium binding, calmodulin, chaperone)      |
| Position context     | C-terminal luminal domain · position 728 projects into the ER lumen |
| IDR flag             | No — pLDDT well above 50 threshold                                  |

Position 728 sits in the C-terminal luminal domain (residues 653–869), wolframin's largest soluble region. This domain projects into the ER lumen and is implicated in calcium handling, ER stress sensing, and protein–protein interactions with ATF6 and Na<sup>+</sup>/K<sup>+</sup> ATPase  $\beta$ 1. The wild-type residue is small/flexible (glycine — backbone flexibility, no sidechain); the mutant is negatively charged (aspartate — carboxylate). The chemistry shift implies altered local packing, hydrogen-bonding, and/or electrostatics at this site.

## COMPUTATIONAL PREDICTIONS

ALPHAMISSENSE

**0.865**am\_class: **likely pathogenic** —  
threshold > 0.564DYNAMUT2  $\Delta\Delta G$ **-1.65** kcal/molDestabilising · Job  
178092110699

PLDDT (ALPHAFOLD)

**86.00**

high confidence

## CLINICAL EVIDENCE

|                        |  |
|------------------------|--|
| ClinVar classification | UNCERTAIN SIGNIFICANCE/UNCERTAIN RISK ALLELE   |
| Review status          | criteria provided, multiple submitters, no conflicts   |
| Last evaluated         | 2022/03/29 00:00   |
| Inheritance            | Autosomal dominant pattern indicated by associated DFNA6/14/38 (WFS1 hearing loss 6).  |
| WFS1 variant landscape | G728D is 1 of ~326 pathogenic-spectrum variants in WFS1 (out of 2,243 in ClinVar)  |
|                        | <ul style="list-style-type: none"><li>• Wolfram-like syndrome</li><li>• Cataract 41</li><li>• Autosomal dominant nonsyndromic hearing loss 6</li><li>• Type 2 diabetes mellitus</li><li>• Wolfram syndrome 1</li></ul> |

## RESEARCH PATH DECISION TREE

$\Delta\Delta G < 2$  + binding site affected → CATEGORY 3 – docking experiments  $\Delta\Delta G 2-4$  → CATEGORY 2 – pharmacological chaperones  $\Delta\Delta G > 4$  → CATEGORY 1 – gene therapy pLDDT < 50 → CATEGORY 5 – IDR, experimental only Stable fold + functional site hit → CATEGORY 4 – site-specific docking

### Category 3/4 — Most Druggable

$|\Delta\Delta G|=1.65 < 2$  kcal/mol (fold intact) + AlphaMissense 0.865 confirms functional impact. Specific local contacts disrupted — priority for docking and pharmacological chaperone screening.

Wolframin's fold survives this substitution ( $|\Delta\Delta G|=1.65$  kcal/mol). The pathogenic signal is real — AlphaMissense places it at 0.865. Protein still folds, but a specific local site is broken. Pharmacological chaperones and small-molecule binders are the rational therapeutic vector.