

# WFS1 S411F — Wolframin

Serine → Phenylalanine at position 411. Transmembrane helix 4. ClinVar Uncertain significance, AlphaMissense 0.982, DynaMut2  $\Delta\Delta G$  -1.08 kcal/mol (destabilising).

## IDENTITY

|                   |                                  |
|-------------------|----------------------------------|
| Variant           | S411F (p.Serine411Phenylalanine) |
| DNA change        | c.1232C>T                        |
| Gene · Protein    | WFS1 · Wolframin (890 aa)        |
| UniProt           | O76024 · WFS1_HUMAN              |
| ClinVar accession | VCV001438079                     |
| Amino acid change | Serine (S) → Phenylalanine (F)   |

## STRUCTURAL CONTEXT

|                      |   |
|----------------------|---|
| AlphaFold model      | AF-O76024-F1, v6  |
| pLDDT at residue 411 | <b>94.12</b> HIGH CONFIDENCE                                    |
| Domain               | Transmembrane helix 4   |
| Position context     | Inside Transmembrane helix 4 · position 411 is bilayer-embedded |
| IDR flag             | No — pLDDT well above 50 threshold                              |

Position 411 sits in a transmembrane helix (Transmembrane helix 4). Wolframin has eleven such helices anchoring it in the ER membrane; substitutions inside the bilayer-embedded segments can disrupt helix packing, lipid contacts, and the overall ER topology of the protein. The wild-type residue is small polar (serine — hydroxyl); the mutant is large aromatic hydrophobic (phenylalanine). The chemistry shift implies altered local packing, hydrogen-bonding, and/or electrostatics at this site.

## COMPUTATIONAL PREDICTIONS

ALPHAMISSENSE

**0.982**

am\_class: **likely pathogenic** —  
threshold > 0.564

DYNAMUT2  $\Delta\Delta G$ **-1.08** kcal/mol

Destabilising · Job  
178092092352

PLDDT (ALPHAFOLD)

**94.12**

high confidence

## CLINICAL EVIDENCE

|                        |  |
|------------------------|--|
| ClinVar classification | UNCERTAIN SIGNIFICANCE   |
| Review status          | criteria provided, multiple submitters, no conflicts   |
| Last evaluated         | 2025/08/11 00:00   |
| Inheritance            | Autosomal dominant pattern indicated by associated DFNA6/14/38 (WFS1 hearing loss 6).  |
| WFS1 variant landscape | S411F 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

$|\Delta\Delta G|=1.08 < 2$  kcal/mol (fold intact) + AlphaMissense 0.982 confirms functional impact. Specific local contacts disrupted — priority for docking and pharmacological chaperone screening.

Wolframin's fold survives this substitution ( $|\Delta\Delta G|=1.08$  kcal/mol). The pathogenic signal is real — AlphaMissense places it at 0.982. Protein still folds, but a specific local site is broken. Pharmacological chaperones and small-molecule binders are the rational therapeutic vector.