

WFS1 T527I — Wolframin

Threonine → Isoleucine at position 527 in connecting loop. ClinVar Conflicting including WFS1-related + DFNA6. AlphaMissense 0.12 (below threshold) — AM under-call. DynaMut2 $\Delta\Delta G$ -0.53.

IDENTITY

Variant	T527I (p.Threonine527Isoleucine)
DNA change	c.1580C>T
Gene · Protein	WFS1 · Wolframin (890 aa)
UniProt	O76024 · WFS1_HUMAN
ClinVar accession	VCV000907533
Amino acid change	Threonine (T) → Isoleucine (I) — polar hydroxyl replaced by branched aliphatic. Loss of H-bonding.

STRUCTURAL CONTEXT

AlphaFold model	AF-O76024-F1, v6
pLDDT at residue 527	78.50 HIGH CONFIDENCE
Domain	Connecting loop
Position context	Connecting loop · position 527 (pLDDT 78).
IDR flag	No — pLDDT well above 50 threshold

Position 527 in connecting loop near TM7 start (TM7 = 529-549). Neighbors: TYR528 (2.5 Å), GLY526 (2.5 Å), LEU531 (3.9 Å — same L531 in L543P TM7 region). T527I T→I substitution at the loop-TM7 boundary. AM 0.12 under-call; multi-phenotype confirms.

COMPUTATIONAL PREDICTIONS

ALPHAMISSENSE

0.119am_class: **LBen** —
threshold > 0.564DYNAMUT2 $\Delta\Delta G$ **-0.53** kcal/

mol

Destabilising · Job
177992508091

PLDDT (ALPHAFOLD)

78.50

high confidence

CLINICAL EVIDENCE

ClinVar classification

CONFLICTING CLASSIFICATIONS OF PATHOGENICITY

Review status

criteria provided, conflicting classifications

Last evaluated

2025/09/27 00:00

Inheritance

Multi-phenotype AD.

WFS1 variant landscape

T527I is 1 of ~326 pathogenic-spectrum variants in WFS1 (out of 2,243 in ClinVar)

- WFS1-related disorder
- Autosomal dominant nonsyndromic hearing loss 6 (DFNA6)

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 (AM under-call). $|\Delta\Delta G|$ 0.53. AlphaMissense 0.12 below threshold but multi-phenotype confirms.

Mechanism: T→I lost H-bonding at TM7 boundary. Therapeutic: loop-TM7 boundary microregion.

T527I continues T→I class (with T337I, T361I, T361S, T461I).