## **Supplementary Tables**

Table SI. Criteria used to assess MSA pattern compatibility.

Antibody	Accepted AC-pattern(s)1 as defined in this study
Anti-Mi2	Nuclear fine speckled (AC-4)
Anti-Jo1	Cytoplasmic dense fine speckled/cytoplasmic fine speckled (AC-19/20)
Anti-EJ	Cytoplasmic dense fine speckled/cytoplasmic fine speckled (AC-19/20)
Anti-PL7	Cytoplasmic dense fine speckled/cytoplasmic fine speckled (AC-19/20)
Anti-NXP2	Nuclear fine speckled (AC-4)/multiple nuclear dots (AC-6)
Anti-TIF1γ	Nuclear fine speckled (AC-4)
Anti-SAE	Nuclear fine speckled (AC-4)
Anti-MDA5	Cytoplasmic dense fine speckled/cytoplasmic fine speckled (AC-19/20) or negative (AC-0)
Anti-SRP	Cytoplasmic dense fine speckled/cytoplasmic fine speckled (AC-19/20)
Anti-HMGCR	Musset et al. JIM 2014

<sup>&</sup>lt;sup>1</sup> AC patterns defined according to ICAP nomenclature (www.ANApatterns.org).

**Table S2.** Details on MSA positivity in other samples (controls, consecutive patients with IIM excluded and IMID patients with myositis overlap not excluded).

	MSA	MSA blot signal intensity (AU) [and method] <sup>a</sup> AC ANF ICAP pattern	Cohort- clinical diagnosis by the treating clinician	Age (years) and gender	Remark
1	TIF1γ	16 [EI] AC-4	consecutive cohort-IIM excluded	36 (female)	Mechanic hands without other features of IIM
2	TIF1γ	12 [EI] AC-2/AC-1? (low positive)	RA cohort	68 (male)	seronegative rheumatoid arthritis
3	TIF1γ	14 [EI] AC-4 + AC-19	consecutive cohort- IMID with myositis not excluded	58 (male)	Differential diagnosis: granulomatosis with polyangitis, polyarteritis nodosa
4	TIF1γ	17 [DT] AC-1 + AC-3	SSc cohort	62 (male)	Limited cutaneous SSc with no arguments for myositis overlap
5	TIF1γ	12 [DT] AC-3	SSc cohort	70 (female)	Limited cutaneous SSc with no arguments for myositis overlap
6	TIF1γ	77 [DT] AC-3	SSc cohort	66 (female)	Limited cutaneous SSc with no arguments for myositis overlap
7	TIF1γ	12 [DT] AC-4 + undefined cytoplasmic staining	SLE cohort	84 (female)	No arguments for myositis overlap
8	SRP	21 [DT] 1x AC-4 + AC-19	consecutive cohort- IMID with myositis not excluded	41 (male)	Steroid responsive Polyarthritis
9	SRP	25 [DT] AC-5 + AC-19	RA cohort	53 (female)	No arguments for myositis overlap
10	SRP	13 [EI] AC-4 + AC-16	RA cohort-myositis not excluded	69 (male)	Myositis overlap not excluded as ILD+ and presence of PM/Scl antibodies  No muscle weakness nor CK-elevation
11	Mi2	11 [EI] AC-4	SLE cohort	23 (female)	No arguments for myositis overlap
12	Mi2	14 [EI] AC-4 (+ weak AC-19)	consecutive cohort- IMID with myositis not excluded	64 (male)	Generalised osteoarthritis with differential diagnosis of polymyalgia rheumatica/ seronegative rheumatoid arthritis
13	SAE	16 [DT] AC-4	consecutive cohort-IIM excluded	45 (male)	Aspecific myalgia without other features of IIM
14	SAE	14 [DT] AC-4	SSc cohort	54 (female)	Diffuse cutaneous SSc with no arguments for myositis overlap
15	SAE	80 [DT] AC-5 + AC-19	RA cohort	69 (male)	No arguments for myositis overlap
16	PL7	56 [DT] AC-19	consecutive cohort- myopathic features without IIM	71 (female)	drug-induced rhabdomyolysis
17	Jo1	23 [EI] AC-20 +AC-4	consecutive cohort- IMID with myositis not excluded	74 (female)	Cutaneous lesions compatible with polyarteritis nodosa, sclerodactyly and scleroderma pattern on videocapillaroscopy
18	Jo1	20 [EI] AC-0 (negative)	consecutive cohort-IIM excluded	20 (female)	Fibromyalgia, shoulder trauma

DT: D-tek MYOS12DIV-24 Blue Diver dot blot; EI: EUROLine Autoimmune inflammatory myopathies 16 Ag; SSc: systemic sclerosis; SLE: systemic lupus erythematosus; RA: rheumatoid arthritis; IIM: idiopathic inflammatory myopathy; IMID: immune mediated inflammatory disease; ILD: interstitial lung disease; CK: creatine kinase.

<sup>&</sup>lt;sup>a</sup> cut-off values as proposed by the manufacturers (positive if >10AU) are applied.

## Pitfalls in MSA detection by lineblot / Y. Piette et al.

Table S3. Comparison of the MSA results obtained on 2 lineblots.

	Total MSA (positivity on minimal 1 lineblot) <sup>a</sup>	Kappa agreement in all samples (n=214)°	% (n/total) concordant positive findings in all samples (n=214) °	% (n/total) concordant positive findings in patients with no clinical IIM diagnosis or myositis overlap syndrome (n=152)			
Mi2	6	0.660	50% (3/6)	0% (0/1)			
Jo1	5	0.760	60% (3/5)	0% (0/1)			
EJ	1	1.000	100% (1/1)	NP			
OJ	0	NA	NA	NA			
PL7	1	NP	0% (0/1)	NP			
PL12	0	NP	NP	NP			
NXP2	1	1.000	100% (1/1)	NP			
TIF1γ	9	-0.021	0% (0/9)	0% (0/6)			
SAE .	5 <sup>b</sup>	0.395	25% (1/4)	0%(0/3)			
MDA5	1	NP	0% (0/1)	NP			
SRP	3	-0.006	0% (0/3)	0% (0/1)			
HMGCR	4	NA	NA	NA			

<sup>&</sup>lt;sup>a</sup> Details on the 2 lineblots used: D-tek MYOS12DIV-24 Blue Diver dot blot and EUROLine Autoimmune inflammatory myopathies 16 Ag, with application of manufacturers' cut-off values for positivity; <sup>b</sup>1 SAE positive sample with missing clinical information; NA: not applicable, as the antigen is only present in 1 system; NP: not performed; <sup>c</sup>only samples with available clinical information taken into account.

Table S4. Detailed overview of the MSA results, clinical features and EULAR score of the IIM patients.

	MSA	MSA titer (AU) [and method] <sup>a</sup>	Clinical Diagnosis	Age (years) and gender	Minimal EULAR/ ACR score	Muscle biopsy suggestive for IIM	Prox. Muscle weakness	ILD	RP	Arthritis	Calcinosis	Malignancy	CK	Skin lesions
1	Mi2	100 [DT], 31 [EI]	cDIIM	55 (female)	100%	NP	Yes	No	Yes	No	No	No	Yes	Yes
2	Mi2	61 [DT], 28 [EI]	cDIIM	69 (female)	99%	NP	Yes	No	No	No	No	No	Yes	Yes
3	Mi2	63 [DT]	cDIIM	44 (male)	99%	NP	Yes	No	No	No	No	No	Yes	Yes
4	Mi2	69 [DT], 35 [EI]	cDIIM	56 (female)	68%	NP	Yes	No	No	No	No	No	Yes	Yes
5	EJ	36 [DT], 37 [EI]	cPIIM	48 (female)	6%	Yes	No	No	No	No	No	No	No	No
6	MDA5	12 [DT]	cDIIM	57 (female)	100%	No	Yes	Yes	Yes	Yes	No	No	No	Yes
7	NXP2	56 [DT], 78 [EI]	cDIIM	11 (female)	100%	NP	Yes	No	No	No	Yes	No	Yes	Yes
8	Jo1	74 [DT], 136 [EI]	cDIIM	70 (female)	99%	Yes	Yes	No	No	No	No	No	Yes	No
9	Jo1	73 [DT], 98 [EI]	cPIIM	68 (female)	66%	NP	No	Yes	Yes	No	No	UKN	No	No
10	Jo1	86 [DT], 22 [EI]	cDIIM	58 (female)	97%	Yes	Yes	Yes	Yes	No	No	No	Yes	No
11	HMGCR	91 [DT]	cDIIM	66 (female)	60%	Yes	Yes	No	UKN	No	UKN	Yes	Yes	No
12	HMGCR	55 [DT]	cDIIM	48 (male)	56%	No	Yes	No	No	No	No	No	Yes	Yes
13	HMGCR	33 [DT]	cDIIM	86 (female)	60%	Yes	Yes	No	No	No	No	No	Yes	No
14	HMGCR	70 [DT]	cPIIM	51 (female)	60%	Yes	Yes	No	No	No	No	No	Yes	No
15	SAE	95 [DT], 24 [EI]	cDIIM	73 (female)	99%	NP	No	No	No	No	No	No	No	Yes
16	TIF1γ	15 [EI]	cDIIM	34 (female)	97%	NP	Yes	No	No	No	UKN	No	No	Yes
17	TIF1γ	86 [EI]	cDIIM	17 (male)	100%	NP	Yes	No	Yes	Yes	Yes	No	No	Yes
18	None	No MSA	cDIIM	48 (male)	28%	Yes	Yes	No	No	No	No	No	Yes	Yes
19	None	No MSA	cPIIM	42 (male)	22%	No	Yes	No	No	No	No	No	Yes	No
20	None	No MSA	cDIIM	14 (male)	45%	NP	No	No	No	No	No	No	No	Yes
21	None	No MSA	cPIIM	51 (male)	9%	No	Yes	Yes	Yes	No	No	No	No	No
22	None	No MSA	cDIIM	30 (female)	99%	No	Yes	No	No	No	No	No	Yes	Yes
23	None	No MSA	cDIIM	47 (male)	15%	Yes	Yes	No	Yes	No	No	No	Yes	No
24	None	No MSA	cDIIM	51 (female)	23%	Yes	Yes	No	Yes	Yes	No	No	Low+	No
25	None	No MSA	cDIIM	62 (female)	31%	Yes	Yes	No	No	No	No	No	Yes	No
26	None	No MSA	cPIIM	58 (female)	22%	Yes	Yes	No	No	No	No	No	Yes	No
27	None	No MSA	cDIIM	58 (male)	85%	NP	Yes	No	No	No	No	No	Yes	Yes
28	None	No MSA	cPIIM	73 (female)	96%	Yes	Yes	No	No	No	No	No	Yes	No
29	None	No MSA	cPIIM	77 (male)	15%	No	Yes	No	No	No	No	No	Yes	No
30	None	No MSA	cPIIM	66 (female)	23%	NP	No	Yes	Yes	Yes	No	No	Low+	No
31	None	No MSA	cPIIM	75 (male)	24%	NP	No	No	No	No	No	Yes	No	Yes

DT: D-tek MYOS12DIV-24 Blue Diver dot blot; EI: EUROLine Autoimmune inflammatory myopathies 16 Ag; cDIIM: clinical definite IIM; cPIIM: clinical probable IIM; NP: not performed; UKN: unknown; Calc.: calcinosis; Malign.: malignancy; ILD: interstitial lung disease; RP: Raynaud's phenomenon; CK: creatine kinase; Low+: less than 2x upper limit of normal; a cut-off values as proposed by the manufacturers (positive if >10 AU) are applied.