Massively parallel functional testing of *MSH2* missense variants conferring Lynch Syndrome risk

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Abstract

The lack of functional evidence for the majority of missense variants limits their clinical interpretability, and poses a key barrier to the broad utility of carrier screening. In Lynch Syndrome (LS), one of the most highly prevalent cancer syndromes, nearly 90% of clinically observed missense variants are deemed "variants of uncertain significance" (VUS). To systematically resolve their functional status, we performed a massively parallel screen in human cells to identify loss-of-function missense variants in the key DNA mismatch repair factor *MSH2*. The resulting functional effect map is substantially complete, covering 94% of the 17,746 possible variants, and is highly concordant (96%) with existing functional data and expert clinicians' interpretations. The large majority (89%) of missense variants were functionally neutral, perhaps unexpectedly in light of its evolutionary conservation. These data provide ready-to-use functional evidence to resolve the ~1,300 extant missense VUSs in *MSH2*, and may facilitate the prospective classification of newly discovered variants in the clinic.

Introduction

Lynch Syndrome (OMIM:120435), the first discovered familial cancer syndrome[1], confers

predisposition to colorectal and endometrial cancers due to loss of DNA mismatch repair (MMR) and the

resulting mutagenic burden[2–5]. Most affected individuals inherit a single loss-of-function variant in one of

four MMR factors (*MSH2, MLH1, MSH6, PMS2*), followed by a somatic 'second hit' inactivating the

remaining functional copy. Due to high prevalence in the general population (≥1:300)[6,7], clear genetic

etiology, and potential for prevention through intensified surveillance, pathogenic MMR gene variants are

considered clinically actionable[8]. Though screening for MMR gene variants is increasingly routine,

accurately interpreting them imposes a substantial clinical burden.

Missense changes together comprise 20-30% of Lynch Syndrome variants[9], and are particularly

challenging to interpret: their functional impacts may range from minimal to profound, and as most are

individually rare, prior evidence to guide their classification is frequently unavailable. Compounding this,

variants which inactivate MMR exhibit incomplete penetrance, conferring a lifetime cancer risk between

15% and 60% depending upon which gene is inactivated[10,11]. Consequently, MMR gene missense variants

are not readily ruled in or out as casual, even when observed in an individual with a relevant cancer

diagnosis. Indeed, the overwhelming majority of Lynch Syndrome gene missense variants listed in ClinVar

(4,762/5,473, 87.0%) are deemed "variants of uncertain significance", or VUS (Figure S1), and cannot be

used to guide diagnosis and management.

Functional studies can provide a key source of evidence to support variant classification[12,13].

Traditionally, these studies are conducted *post hoc* and cannot be completed within the timeframe needed

to support real-time interpretation. The heterogeneity of the functional data accumulated in the literature

for MMR gene variants poses a further barrier, as the model systems and assays in use vary widely. Some

assays interrogate specific mechanistic details (e.g., ATPase activity), while others report the end result

upon *de novo* mutation rate. Human MMR variants have been extensively modeled in budding yeast[14,15],

but not every human MMR factor complements its yeast ortholog[16], and many human variants occur

outside of well-conserved domains and so are not readily modeled on diverged orthologs. Reconstituting

MMR *in vitro* enables mechanistic studies, but may not reflect functional state under physiological

conditions. Thus, while individual functional reports on MMR gene variants abound, it remains a challenge

to bring this disparate body of evidence to bear on the task of classifying variant pathogenicity.

To address these challenges, we applied deep mutational scanning[17] to prospectively and

systematically measure the functional impact of missense variants in the major Lynch Syndrome gene

MSH2. We developed human cell line models in which *MSH2* deletion was complemented by libraries of

variants comprising nearly every possible *MSH2* missense allele. We leveraged an established chemical

selection for mismatch repair dysfunction[18–21], and used deep sequencing to identify the surviving *MSH2*

variants. The resulting missense loss-of-function (LOF) scores are highly concordant with existing

functional data and substantially outperform bioinformatic variant effect predictions. We observe that adult

populations are significantly depleted for deleterious missense *MSH2* mutations, akin to what is observed

for whole-gene deletions and truncating point variants in MMR genes[22,23]. These data provide a uniformly

generated set of functional evidence, calibrated against known standards of pathogenicity, and will assist

the interpretation of variants which would otherwise remain a source of uncertainty for clinicians, patients,

and their relatives.

Material and Methods

***MSH2* knockout cell lines**

Clonal knockout cell lines (Figure S2) were derived by transient transfection with plasmids expressing

SpCas9 and guide RNAs targeting *MSH2*. For HAP1, a single guide sequence (primers JBW0001/2)

targeting *MSH2* exon 6 was cloned into pSpCas9(BB)-2A-GFP (PX458, Addgene #48138) as described[24].

For HEK293, four guides (primers VC0019/20, VC0021/22, VC0023/24, VC0027/28), two flanking each

side of the *MSH2* locus, were each likewise cloned into pSpCas9(BB)-2A-PuroV2 (PX459, Addgene

#62988)[24] and used in combination. Wild-type HAP1 or HEK293 cells were transfected with the respective

plasmid(s) using Lipofectamine 3000 (Thermo). Clonal HAP1 *MSH2* knockout cells were isolated by sorting

single GFP positive cells using a FACS Aria II instrument (BD), and colonies were screened for *MSH2*

exon 6 frameshift mutations. Clonal HEK293 *MSH2* knockout cells were isolated by dilution, expanded,

and screened by PCR for the presence of a full-gene knockout deletion junction(s), and the absence of an

internal target in exon 12.

MSH2 cloning

Wild-type *MSH2* cDNA was PCR amplified from a lentiORF plasmid (Dharmacon OHS5897), and fused

in-frame by HiFi Assembly (NEB) to a blasticidin resistance marker amplified from pLentiCas9Blast

(AddGene #52962), separated by a P2A self-cleaving peptide linker (Figure S3). The p.Ala636Pro mutation

was introduced by site-directed mutagenesis. Each resulting construct was subcloned a doxycycline-

inducible lentiviral expression plasmid (pCW57.1, Addgene #41393) by digestion with SalI and NheI and

ligation with T4 DNA ligase (NEB).

Western blotting

Cells were seeded on 6-well plates, grown to confluence, and lysed by the addition of RIPA buffer and

protease inhibitor cocktail (Sigma-Aldrich). Protein extracts were run for 30 min at 200 V on denaturing

Bolt 4-12% Bis-Tris Plus Gels in 1× Bolt MOPS SDS buffer (Invitrogen), transferred to a nitrocellulose

membrane for 1.5 h at 10 V, and blocked at 4˚C overnight in 1X TBST (20 mM Tris base, 0.15 M NaCl,

0.1% Tween-20, 2% milk). Blots were probed with a 1:2000 dilution of anti-MSH2 (FE11, Thermo) and as

loading control, 1:5000 dilution of anti-beta actin (BA3R, Invitrogen), followed by a 1:1000 dilution of HRP-

conjugated goat anti-mouse IgG (H+L) secondary antibody (#62-6520, Invitrogen). Detection was

performed with SuperSignal West Pico Chemiluminescent substrate (Thermo) and ChemiDoc XRS system

(BioRad).

Cell culture

Human HAP1 cells (Horizon Discovery) were cultured in IMDM and HEK293 and 293T/17 cells (ATCC)

were cultured in DMEM, each supplemented with 10% fetal bovine serum, 100 U/ml penicillin and 100 g/ml

streptomycin. During routine passaging, cells were washed with PBS pH 7.4 and dissociated with TrypLE

Express. Cell lines were tested monthly for mycoplasma; all were negative.

Library mutagenesis

MSH2 cDNA was divided into 21 tiles (Table S1), and each was subjected to programmed allelic series

mutagenesis[25] modified as follows. Mutagenic PCR reactions used PrimeStar GXL polymerase (Takara),

and 45mer mutagenesis primers (Table S2) were individually synthesized. Each codon was randomized

in an individual PCR (program MUT_1, Table S3), with a common forward primer (JOK_0184) upstream

of *MSH2,* and a codon-specific degenerate (NNN) reverse primer. Resulting partial-length mutant cDNA

was subjected to 10 cycles of strand extension (program MUT_2) with limiting template (250 pg) of wild-

type cDNA plasmid. Finally, each full-length mutant cDNA was PCR amplified with flanking outer primers

(program MUT_3, primers JOK_0184 and JOK_0185). Per-codon products were pooled within each tile

and purified by SPRI bead cleanup[26]. PCR products were digested with DpnI, to deplete starting plasmid,

and NheI-HF and SalI-HF, for cloning into the lentiviral vector as described above. Ligation products were

transformed into Endura electrocompetent *E. coli* (Lucigen). A small aliquot of the transformant culture was

plated to monitor library complexity, while the remainder was expanded for 12-16 hours at 32ºC in Luria

Broth with 100 ug/ml ampicillin (LB+amp). We required total colony forming units $\geq 4\times10^4$, for mean ~10-

fold coverage per variant. Lentiviral tile plasmid libraries were isolated using ZymoPURE II Plasmid kit,

and converted to shotgun libraries for deep sequencing by Tn5 tagmentation[27], to assess mutational

specificity and coverage (Figure S4). Absent or under-represented codons were individually retrieved from

the earlier mutagenesis steps, pooled, cloned as above, and spiked into each tile library as needed to

equalize coverage. Finally, these mutant tile libraries, as well as control clones (WT and A636P), were

modified to add trackable barcodes. Each clone or library was linearized with SalI-HF (NEB) downstream

of the *MSH2*-2A-bl[R] ORF, and a degenerate 20-mer (primer jklab0172) was inserted by HiFi Assembly

(NEB). The resulting barcoded clone pools were transformed, expanded, and isolated as described above.

Lentiviral preparation and transduction

Barcoded *MSH2*-2A-bl[R] cDNA libraries were packaged into lentivirus by co-transfecting HEK293T/17 cells (ATCC) with the transfer plasmid pool plus envelope and packaging vectors (pMD2.G, Addgene #12259 and psPAX2, #12260). For each pool, 4.4×10^6 cells were plated in a 100 mm dish, then transfected with 17 ug total plasmid (2.0:1.0:1.3 transfer:envelope:packaging ratio), using Lipofectamine 3000 (Thermo). Media was replaced at 6 h post transfection, and viral supernatants were collected at 24 h, passed through an 0.45 micron filter (Millipore), and used immediately or stored at -80ºC until use. Viral titer was estimated by transduction with a dilution series followed by puromycin selection and CellTiterGlo (Promega) cell proliferation assay[28], and verified by counting unique barcodes in the transduced population (barc-seq, described below). For each tile, *MSH2* knockout HAP1 or HEK293 cells were transduced with mutant library at low multiplicity of infection (< 0.1), by applying 1.5 ml viral supernatant (with 8 µg mL^{-1} polybrene) to each of four 100mm dishes (Corning) containing $\sim 7.5 \times 10^6$ cells. After 48 h, transduced cells were selected by addition of 1 µg mL^{-1} puromycin, which was included in all subsequent steps.

Mismatch repair functional selection

Cells expressing loss-of-function *MSH2* variants were enriched by adding 6-thioguanine (6-TG) to the culture media. To find an optimal concentration, parental and *MSH2* KO cell lines were plated in quadruplicate wells of a 96-well plate and treated with a range of 6-TG concentrations. Cell growth after 4 days was measured using the CellTiterGlo 2 kit (Promega) and a GloMax luminometer (Promega), and survival was normalized to untreated wells (Figure S2).

For library selections, each mutant tile cell population was spiked with barcoded knock-in control cells (*MSH2* WT: to 10% of the population, A636P: to 0.5%), then split and expanded in triplicate 10 cm dishes (Figure S5-S6) in media supplemented with 1 µg mL^{-1} doxycycline to induce *MSH2* expression. From each baseline passage ("P0") culture, 10^7 cells were collected for gDNA extraction, and cells were split into 6-TG treated and mock-treated cultures, with media containing 1 µg mL^{-1} puromycin, 1 µg mL^{-1} doxycycline, 5 µg mL^{-1} blasticidin (to enforce *MSH2* expression), with and without 1 uM 6-TG, respectively. Cells were

grown to confluence for two rounds, at each round harvesting ≥10^7 cells for gDNA extraction and seeding

with $3x10^6$ cells to avoid population bottlenecks.

Amplification and sequencing of integrated *MSH2*

After selections, genomic DNA was isolated from 1-$3x10^7$ cells using the Quick-DNA Midiprep Plus kit, and

sequenced in tiles. To provide sufficiently redundant sampling of integrated *MSH2* libraries, for each

sample, 16 replicate PCR reactions were assembled, each with 0.5 µg of gDNA as template (template

copy number of $2.4x10^6$ genome equivalents per tile). Integrated inserts (~3.7 kbp), including *MSH2* cDNA

and associated barcode, were PCR amplified with PrimeSTAR GXL (program MSH2gDNA). Each set of

16 replicate amplicons was pooled and purified with SPRI beads. Next, tile-seq libraries were prepared

from each pool of amplified integrated *MSH2* constructs. Tile-specific primers (Table S2) were used to

further amplify the tile mutagenized in each sample in a PCR reaction (program TILESEQ) with 10 ng full-

length amplicon (≥ $2.6x10^9$ copies) as template. Dual-indexed illumina adapters (sequences available upon

request) were then added by a subsequent round of PCR. The resulting short amplicon libraries thus

provide overlapping read coverage for most of each tile. Tile-seq libraries were pooled for paired end 150bp

Illumina sequencing (≥ $1x10^6$ paired reads per sample, n=189 libraries). Pool complexity (the number of

distinct transduced clones) was assessed by tile-seq (Figure S7) and barc-seq (Figure S8). Barcodes were

amplified from the full-length *MSH2* amplicon and converted to illumina amplicon libraries, as for tile-seq,

but using primers jklab0077 and jklab0078 (program BCSEQ) . Each tile's starting population ("P0") had

≥20,000 barcodes, indicating at least that number of unique initial transduction events. Catalogs of

barcodes associated with each of the two *MSH2* control clones (WT, A636P), and for each tile library, were

established by barc-seq (as described above) from their respective gDNAs at P0 (after transduction).

Finally, tile-seq libraries were prepared from a fully wild-type *MSH2* clone plasmid DNA, to measure and

correct position-specific errors, primarily single base substitutions which varied considerably by position

and type (Figure S9)

Sequence data processing

Shotgun sequencing reads were aligned to a set of *MSH2* cDNA sequences with each codon sequentially

replaced with "NNN" using bbmap (https://jgi.doe.gov/data-and-tools/bbtools/) in semi-perfect mode, to

identify reads containing at most one mutated codon with between one and three edits. Custom python

scripts converted the resulting alignments to a per-sample table of counts for every possible codon

mutation. For tile-seq libraries, paired reads were overlapped and error-corrected with PEAR v0.9.6[29];

only perfectly matching pairs were used. For each tile, all possible single-codon mutation sequences were

enumerated, and the count of reads exactly matching each mutant sequence was tabulated. Reads with

additional mutations or sequencing errors were discarded. Barc-seq reads were clustered with starcode

v1.3[30] to define and count unique barcodes. To determine the number of distinct barcodes present, robust

to sequencing or amplification artifacts, we ranked clustered barcode groups by read count and determined

the minimum number of barcodes for which all equally or more abundant barcodes cumulatively accounted

for ≥90% of the total read counts.

Variant enrichment scoring

The raw frequency of each per codon mutation *i* in each sample *s* was calculated, with a pseudocount of

0.9: $f'_{i,s} = \frac{(c_{i,s}+0.9)}{\sum_k (c_{k,s}+0.9)}$. Position specific error rates from wild-type *MSH2* plasmid tile-seq were subtracted

and normalized to yield corrected frequencies: $f_{i,s} = \frac{max\,(f'_{i,s}-f'_{i,WT},0)}{\sum_k \;max\,(f'_{k,s}-f'_{k,WT},0)}$. Variants with frequency

≤1/200,000 in the initial transduced cell population (P0) were removed from further analysis. Next, variants

substantially enriched or depleted after mock treatment (absolute $\log_2$ ratio > 2, after two passages

blasticidin vs P0) were likewise removed; these variants may be *in cis* with a frameshift or premature

truncating mutation beyond the sequenced tile. A loss-of-function (LOF) score was taken as the $\log_2$ratio

of the frequency after 6-TG treatment over that after mock treatment. For amino acid substitutions

represented by more than one equivalent codon substitution, the median was taken across those codons'

LOF scores to yield an amino acid-level LOF score. Within each replicate, variants were removed when

represented by exactly two LOF scores with opposite signs. Finally, the median score was taken for each

amino acid LOF score across the three replicates; when only two replicate scores remained and had

discordant signs, they were removed. False discovery rate was estimated by random sampling of

synonymous variants' read counts, with replacement and keeping triplicates together. To mimic the

number of codons corresponding to a given mutant amino acid, synonymous variants were sampled in

groups of size one to six. Counts were processed to LOF scores and filtered as described above,

combining first within each simulated missense amino acid and then across replicates; final LOF scores

greater than zero were taken as false discoveries. Overall FDR was estimated as the mean FDR for amino

acids with each number of different variant codons (1, 2, 3, 4, or 6 codons), weighted by the fraction of

variant amino acids with that number of codons.

Clinical and population variants

MSH2 missense variants and classifications were obtained from ClinVar

(https://www.ncbi.nlm.nih.gov/clinvar/) on 2020 April 14. Redundant variants were removed, and likely

splice-disruptive variants with a SpliceAI[31] score of ≥0.2 were filtered out, along with those where the

ClinVar record indicated a known splice-disruptive mechanism (Table S4). Only variants with expert panel

reviews were included in comparisons to LOF scores. *MSH2* missense variants and classifications were

accessed from InSiGHT (https://www.insight-group.org/variants/databases/). *MSH2* missense population

variation was obtained from the gnomAD database[23], combining whole-genome and exome calls from

versions 2.1.1 and 3.0. The expected number of LOF missense mutations was modeled with a binomial

distribution parameterized by *n*=744 (the number of scored missense variants in gnomAD) and *p* taken as

the sum of LOF missense point variants' relative likelihoods of occurring *de novo*[32], equivalent to drawing

sets of size 744 from the universe of possible missense SNVs with probabilities scaled by their individual

relative likelihoods.

Bioinformatic classification

All *MSH2* missense variants were scored by the following bioinformatic tools:CADD[33], PolyPhen-2[34],

REVEL[35], PON-MMR[36], MAPP-MMR[37], and FoldX (scores obtained from [38]). For CADD and REVEL,

scores were available only for missense variants reachable by single-base variants (SNVs); for amino-acid

substitutions that could arise from more than one SNV, the mean of those SNVs' scores was taken.

MSH2 structure and conservation

The MSH2 crystal structure[39] was obtained from the Protein Databank (accession 2O8E) and rendered

with PyMOL. Amino acid secondary structure assignment was extracted from pre-calculated DSSP files[40].

Surface accessibility was calculated using ASA (http://cib.cf.ocha.ac.jp/bitool/ASA/). MSH2 ortholog

protein sequences were downloaded from Ensembl (https://useast.ensembl.org/) and aligned with

MUSCLE[41].

Results

A Human Cell Platform to Test *MSH2* Variant Function

We established a human cell system to model *MSH2* variant function using the mismatch repair

proficient[42] cell line HAP1 (Figure 1A, C). First, to disrupt MMR, we derived clonal *MSH2* knockout cells

bearing a 19-bp frameshift deletion in *MSH2* exon 6, and verified that it lacked detectable MSH2 protein

expression (Figure S2). To restore MMR, we stably reintroduced into cells either wild-type *MSH2* cDNA

(KO+WT) or a pathogenic founder allele (KO+A636P) on inducible lentiviral constructs. After inducing

expression with doxycycline, wild-type MSH2 protein reached near-endogenous levels, while A636P was

only barely detectable, consistent with the known destabilizing effect of this variant[43] (Figure S3).

As a readout for *MSH2* function, we leveraged selection with the purine analog 6-thioguanine (6-

TG)[19,44]. Incorporation of 6-TG is selectively toxic to MMR-proficient cells, as it creates lesions that the

MMR machinery recognizes but cannot repair, culminating in replication arrest[20,21]. As expected, KO cells

showed increased 6-TG resistance compared to parental HAP1 cells, while 6-TG sensitivity was restored

by reintroduction of wild-type *MSH2* but not the pathogenic A636P mutant (Figures 1B and S5). To mimic

simultaneously testing thousands of mutations, we prepared a mixed culture of KO+WT cells and

KO+A636P cells, with the respective *MSH2* expression constructs bearing distinct, identifying barcode

libraries *in cis* (Figure S5). We quantified barcode abundances by deep sequencing (**Material and**

Methods), and found barcodes linked to the pathogenic variant A636P were strongly enriched relative to

WT barcodes (median fold change: 179, *P*<2.2x10^{-16}, Kolmogorov-Smirnov test). This result confirms the

feasibility of highly multiplexed MMR functional tests in isogenic human cell mixtures.

A Functional Effect Map Covering >17,000 *MSH2* Missense Variants

To model known and novel *MSH2* variants, we applied single amino-acid saturation mutagenesis[25] to

generate libraries comprising every possible missense, synonymous and nonsense variant (**Material and**

Methods). *MSH2* cDNA (2,802 bp) was divided into 21 tiles to enable tracking by amplicon sequencing[45],

and to mitigate the impact of recombination during lentiviral replication[46]. The mutant cDNA library for each

tile was cloned into the inducible lentiviral vector mentioned above, followed by a C-terminal 2A linker and

a blasticidin resistance gene, to permit selection for complete in-frame cDNA expression (Figure S3). HAP1

MSH2 KO cells were transduced at low multiplicity (<0.1) to yield a population in which each cell expressed

a single mutant *MSH2* variant. Sequencing of integrated libraries from genomic DNA confirmed that nearly

all single-codon mutations were present (97.3%) with highly uniform representation (Figure S7).

Sequencing errors were modeled empirically by deeply sequencing a wild-type *MSH2* plasmid, and used

to correct error-prone positions (Figure S9).

Each *MSH2* mutant cell pool was then selected *en masse* for MMR deficiency. To allow comparison

across pools, each was spiked with barcoded control cells (KO+WT: 10% of cells; KO+A636P: 0.5%).

Pools were then grown under selective (6-TG+blasticidin) or mock (blasticidin only) conditions for two

passages (Figure S6). Barc-seq of the integrated *MSH2* cDNAs confirmed that, as expected, the spiked-

in *MSH2* A636P cells were consistently enriched over WT by 6-TG selection (median fold-change relative

to mock treatment: 105; Figure S5).

To track the functional status of each *MSH2* variant, we performed amplicon sequencing of each tile

throughout the course of selection. Loss-of-function (LOF) scores for each variant were calculated as the

$\log_2$-ratio of that variant's frequency after 6-TG treatment divided by its frequency after mock treatment,

such that deleterious variants should score positively and neutral variants negatively (Figure 1C). LOF

scores strongly correlated across replicate 6-TG selections (mean pairwise Pearson's r=0.77, Figure S10).

As expected, mock treatment had little effect upon most variants' frequencies, except for truncating

variants which terminate translation before the downstream blasticidin resistance marker and were

therefore depleted (Figure S11).

The resulting functional effect map was substantially complete, covering 94.4% of possible *MSH2*

single-codon substitutions (Figure 2). Missense variant scores were bimodal, with the large majority

(89.4%) scoring negatively, suggesting a high degree of tolerance to single amino acid substitution (Figure

2G). Indeed, for over half of MSH2 residues (510/934), substitution to any other amino acid was tolerated.

As expected, synonymous variants predominantly scored negatively (820/841, 97.5%), with exceptions

likely caused by loss of function from an additional, non-programmed mutation outside the sequenced tile.

Most of the scored missense variants were represented by multiple equivalent codons (on average, 3.0),

and summarizing these internal replicates into a single, amino-acid level LOF score resulted in an overall

false discovery rate of 0.95%. To verify these results were generalizable across cell types, we repeated

the screen for two tiles (tile 14 and 15) in another MMR-proficient human cell line, HEK293, with largely

concordant results (Figure S12).

Pooled Measurements Recapitulate Existing Variant Interpretations

We sought to validate these pooled measurements by comparison to traditional, low-throughput

functional studies. We collated a set of 184 *MSH2* missense variants previously characterized as

functionally deleterious or neutral by individual cell-based[15,19,44,47–51] and/or biochemical assays[52,53],

discarding four variants where multiple studies disagreed and eight predicted to impact splicing, an effect

not measured by this approach (SpliceAI[31] score>0.2; Tables S4-5). Our LOF scores agreed with these

earlier reports for the great majority of variants covered (158/165, 95.8%; Figure 3A). We examined the

variants at which our results and previous reports disagreed, and noted that for four of those seven, our

LOF scores were internally consistent across multiple codons encoding the same amino acid substitution

(Figure S13). These may reflect false negatives or positives on the part of the previous screens, or

differences between this human cell model and previous yeast or *in vitro* assays.

To assess the suitability of these scores for classifying variant pathogenicity, we intersected them with

clinical variant databases. We retrieved all *MSH2* missense variants with consensus annotations from

InSight[9] or expert review in ClinVar, totaling 75 variants. After excluding nine variants predicted by SpliceAI

or annotated in ClinVar as splice-disruptive, our LOF scores agreed with clinical annotations for 63 of the

66 remaining variants (95.5%, Figure 3B). These data provide evidence to facilitate interpretation of the

1,374 variants without classification (i.e., VUS) or with conflicting reports. Our scores predicted that 112 of

these (8.2%) unresolved variants are functionally deleterious, similar to the overall rate of LOF among all

missense variants reachable by a single nucleotide change (7.7%; P=0.51, two-sided binomial test). This

result highlights the pervasiveness of benign missense variation in clinical databases and identifies a

subset of variants likely to be causal for Lynch Syndrome.

We next examined how these function scores varied in apparently healthy populations (Figure 3C-D).

The gnomAD database[23] lists 744 of the scored *MSH2* missense variants, nearly all rare (742/744 with

minor allele frequency < 0.5%). Among these, only 18 scored as deleterious in our assay (all singletons or

doubletons except the founder allele A636P), a significant depletion (P=6.9x10^{-7}, two-sided binomial test)

relative to randomly drawn, size-matched sets of single-base missense variants. All 14 *MSH2* missense

variants observed in the homozygous state in gnomAD scored as functionally neutral, as expected given

that biallelic MMR loss causes pediatric-onset cancer syndromes. These results reflect survivorship bias

which depletes adult cohorts of deleterious variants in genes underlying disorders such as Lynch

Syndrome, as previously noted for *MSH2* deletions[22].

Loss of Function Scores Outperform Bioinformatic Predictors

Bioinformatic tools are frequently used to interpret clinical variants when other forms of evidence, such

as co-segregation with disease, functional studies, or population variant allele frequency, are unavailable

or uninformative[54]. We compared the classification performance of our LOF scores with that of six

computational predictors, including three specific to MMR genes: MAPP-MMR[55], FoldX[56] thermostability

predictions from Nielsen et al[38] and PON-MMR[57], and three general-purpose tools REVEL[35], CADD[58], and

PolyPhen2[34]. As a truth set, we used the missense variants with previously reported functional evidence

(Figure 3A). LOF scores outperformed all bioinformatic classifiers in recapitulating these functional

classifications, reaching an area under the precision recall curve (auPR, Figure 4A) of 0.990, which

exceeded the six algorithms' (auPR range: 0.682-0.921). MMR-specific classifiers performed markedly

better (auPR mean: 0.867) than general-purpose, pathway agnostic methods (auPR mean: 0.741), which

displayed poor specificity, possibly reflecting the challenge of distinguishing functional effects between

variants in highly conserved genes such as *MSH2.*

We also tested performance of the experimental and bioinformatic scores using a fixed cutoff selected

for each, as would be required in practice. For LOF scores, a score cutoff of 0 was selected *a priori*, taking

as deleterious any variants enriched by 6-TG. For each bioinformatic algorithm, we selected a cutoff

(Figure S14A-B) which maximized the Matthews Correlation Coefficient (MCC), a balanced measure of

specificity and sensitivity[59], across the full validation set. These were broadly similar to cutoffs used

previously; for instance, by an earlier estimate[60], the CADD score cutoff of 24.17 used here corresponds

to a 96.0% probability of being an Insight Class 5 (pathogenic) variant. Using these cutoffs, LOF scores

reached an MCC of 0.92, higher than all six tools' (range: 0.50-0.74; Figure S14A). Notably, because

optimizing a cutoff score for each tool using the full validation set amounts to training and testing on the

same data, this comparison may overestimate their performance relative to a test on newly seen alleles,

whereas the LOF scores should have no such bias.

Although the bioinformatic predictions were modestly correlated with our experimental measurements

for variants in the functional validation set, they were markedly less concordant for other variants at those

same residues, or throughout *MSH2* at large (Figure 4B). Similarly weak overall agreement has also been

observed when benchmarking bioinformatic classifiers with deep mutational scans of other genes[61–63]. As

variant effect predictors are often trained on the limited number of known variants with available

classifications, their divergence with our experimental measurements may reflect overfitting, further

suggesting that the comparison to a small set of functionally characterized alleles overestimates

bioinformatic predictors' performance.

Functional Constraint Highlights Structural Features

Deep mutational scans can inform protein structure-function relationships[64,65]. On aggregate,

chemically conservative substitutions across MSH2 were rarely deleterious (5.63%), compared to

substitutions replacing hydrophobic residues with charged ones (28.0%; Figure S15). Mapping function

scores onto the crystal structure[39] (Figure 5A), we noted several regions of mutational intolerance

corresponding to structural features. The phosphate-binding Walker A motif (residues 674-676) is required

for the essential ATPase activity of MSH2[66] and was almost completely intolerant to mutation (50/55

mutations LOF, Figure 5B,C). We also noticed strong constraint at glycine 126, possibly reflecting the

requirement for flexibility to accommodate conformational shifts between the mismatch binding and

connector domains (Figure 5C)[39]. The connector domain's hydrophobic core, comprising three beta sheets

and inward-facing residues of the surrounding helices, was also largely functionally intolerant to

substitutions. Conversely, despite its name, the N-terminal mismatch binding domain (residues 1-124) was

largely devoid of missense LOF variants, consistent with its dispensability in yeast[67], and observations that

MSH2 start codon loss is not strongly pathogenic in humans[68,69]. By contrast, prokaryotic mutS

homodimerizes, with both N termini making extensive DNA contacts essential for mismatch recognition[70].

Several positively charged clamp domain residues (K512, R524, K546), which interact with the DNA

backbone by hydrogen bonding[39], were strongly intolerant to substitution, especially to negatively charged

residues. Although computational predictions of protein stability[38] showed modest overall correlation with

LOF scores (Pearson's r=0.39, Figure S14), we noted a few exceptions including the ATPase Walker

motifs, which showed strong constraint in our data but were not predicted to be destabilizing (Figure S15),

suggesting mechanisms other than protein instability.

We also examined the scores of variants accepted by evolution. Given the strong pressure to maintain

genome integrity, *MSH2* variants rising to fixation in extant lineages are expected to be functionally neutral,

except for potential epistatic effects of other mutations *in cis* or *trans*[71]. We aligned the human MSH2

protein sequence with seven orthologs distributed across eukaryota, identifying 1,707 amino acid

substitutions relative to the human sequence. Of those scored, nearly all (1,627/1,639, 99.3%) had

negative LOF scores (Figure S16), indicating these substitutions are functionally neutral in the context of

the human MSH2 sequence, and supporting these scores' specificity.

Discussion

The mismatch repair factors underlying Lynch Syndrome are among the most intensively screened genes in clinical practice, and there is an acute need for functional evidence to assist in their variants' interpretation as the scope of genetic testing broadens[72,73]. Massively parallel assays provide a tractable means to generate such evidence[74,75]. Here, we combined deep mutational scanning[17] with an established MMR assay to generate a nearly complete functional effect map of missense variants in the key Lynch Syndrome gene *MSH2*.

The resulting LOF scores have high predictive accuracy, agreeing with traditional, small-scale functional reports for 158 of 165 previously tested missense variants (95.8%), which meets or exceeds the level of concordance among the previous functional screens of *MSH2* missense variants. To the best of our knowledge, MSH2 is the largest protein (934 aa) subjected to full-length deep mutational scanning to date, demonstrating that such pooled functional screens can scale to address the large space of clinically relevant human genetic variation. Additionally, this approach can be readily extended for comprehensive functional annotation of variants in other key Lynch Syndrome genes, *MLH1*, *PMS2*, and *MSH6.*

Our strategy exploited the direct link from molecular dysfunction - the inability to correct replicative errors - to pathogenesis in Lynch Syndrome. Accordingly, these functional measurements were highly consistent with expert-reviewed variant classification records from the ClinVar database and InSiGHT Group[9]. For two of the three conflicting variants, the standing classifications appear to be in error (Figure S13). The first, p.Glu198Gly (InSiGHT class 1: benign), was highly deleterious in our assay (LOF score: 3.47), a result corroborated by mutator assays in yeast[15,51] and MNNG resistance following transient overexpression in human cells[49]. Additionally, all other substitutions at Glu198 appeared deleterious in our screen, except for the chemically similar p.Glu198Asp. The second example is p.Pro652His (InSiGHT class 4: likely pathogenic), which along with 14 of the other 15 measured substitutions at that codon, appeared neutral in our data, in agreement with its activity *in vitro*[53]. Thus, in addition to assisting the resolution of VUS's, functional effect maps may allow identification and correction of rare misclassifications among clinical variation databases.

Overall, *MSH2* appeared quite tolerant to missense variation, with only 10.7% of assayed missense variants exhibiting loss-of-function. On face, this is surprising given the high level of sequence conservation among *MSH2* orthologs (e.g., ~41% protein sequence identity between human and budding yeast), and given its conserved, essential role in mismatch repair. We consider it unlikely that large swaths of LOF variants have gone undetected given the strong concordance with expert-reviewed clinical interpretation and prior functional studies. This degree of tolerance is remarkable in the context of available deep mutational scanning data from other human genes. In terms of overall constraint, the dataset closest to *MSH2* is from the transcription factor *PPARG*, in which 21.5% of missense variants scored as having substantial probability of being casual for lipodystrophy[76]. Most other human genes subjected to full-length mutational scans thus far have shown substantially higher overall constraint: for instance, 40.5% of missense variants in the pharmacogene *NUDT15* scored as damaging[62], as were 39% of variants in the homocysteine metabolic factor *CBS*[77]. A recent activity-agnostic protein stability screen showed the fraction of missense variants with substantially destabilizing effects to range from 25.1-43.1% across three different genes[62,78]; these could be taken as a lower bound given that an unknown fraction of true LOF variants may remain stable.

The bimodal distribution of LOF scores mirrors previous functional studies in which most *MSH2* missense variants have appeared either substantially functionally intact or null-like, with relatively few in between. An important question arising from these functional studies is whether variants with borderline scores reflect experimental noise or instead have intermediate functional activity[79]. For instance, several *MSH2* alleles modeled in yeast[15] exhibited minor increases in reporter gene mutation rates (2-19X relative to *MSH2* WT, compared to >200X for *MSH2* null alleles), suggesting a mild MMR defect, but all of those scored as functionally neutral in our data. Of the three (p.L390F, p.M688I, and p.E886G) tested in other studies, all appeared functionally neutral, corroborating our results and suggesting either a greater sensitivity to functional defects in the yeast model or potentially some functional divergence between the orthologs[16]. Other variants have conflicting evidence which will require additional studies to resolve, for

instance p.L93F, which showed intermediate activity (~51%) in a cell-free MMR assay[53], was undetected

in a mouse ES cell based clonogenic screen for pathogenic alleles[19] and was marginally neutral in our data

(LOF score: -0.26).

For any such alleles that do behave as hypomorphs in functional assays, it remains unclear whether

these meaningfully contribute to Lynch Syndrome risk[51,80]. Complicating this question is the challenge of

establishing a truth set of moderate-risk *MSH2* variants in family or case-control studies, as with further

reduced penetrance and later age of cancer onset, these may resemble common sporadic cancers.

However, anecdotes suggest that even severely hypomorphic alleles of MMR factors may retain enough

activity to set them apart from complete LOF alleles. For instance, a splice-disruptive mutation which

reduces PMS2 expression by >10-fold retains enough activity that when homozygous, it results in a form

of constitutional MMR deficiency which is highly attenuated, with later onset and less profound

microsatellite instability compared to truly null biallelic mutations[81]. As increasingly large variation datasets

coupled to electronic health records become available[82–84], it may become possible to examine whether

variants with intermediate functional scores, on aggregate, confer increased Lynch Syndrome risk, and

whether individuals carrying one of these alleles opposite a *bona fide* pathogenic allele present with

biallelic MMR deficiency.

One limitation of these cDNA-based measurements is that they cannot model effects upon splicing,

although among known Lynch Syndrome variants and in saturation screens of other hereditary cancer

syndrome genes[85], splice disruption accounts for only a small fraction of pathogenic variants. In the future,

splicing effects could be accounted for by incorporating improved bioinformatic predictions[31] or multiplexed

assays[86–88]. Another potential limitation is that our *MSH2* LOF scores are not a direct measure of mutation

rates associated with each variant, to the extent that these could differ across *MSH2* variants. We instead

used a close proxy for MMR dysfunction, treatment with the purine analog 6-TG, which selectively enrichies

for MMR-defective cells which lack the ability to remove the resulting lesions. As with other deep mutational

scans, these results may be further refined with orthogonal functional selections[62,89] or complemented by

specialized assays for protein stability[78], localization[90], or partner (MSH6) binding.

We demonstrate that massively parallel functional assays can accurately measure the impacts of

variants in the key Lynch Syndrome gene *MSH2*. This functional effect map, if rationally combined[54,91] with

other lines of clinical evidence[9], will enable more accurate classification of Lynch Syndrome variants.

Adding confidence and accuracy to Lynch Syndrome variant interpretation will afford carriers of pathogenic

variants the benefits of potentially life-saving early detection and medical interventions[92].

Supplemental Data

509 Supplemental Data include sixteen figures and five tables

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Declaration of Interests

516 The authors declare no competing interests.

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Figures

Figure 1. Overview of *MSH2* functional screen. (A) Generating and testing *MSH2* variant function in

isogenic human cells. Cells with pathogenic loss-of-function variants (top) are resistant to 6-thioguanine

(6-TG), while complementation by a benign functional variant (middle) restores 6-TG sensitivity. In a pooled

screen (bottom), a mixed library of *MSH2* missense variants is transduced, and 6-TG treatment selects for

loss-of-function variants. (B) 6-TG resistance reflects MMR function in human cells. HAP1 *MSH2* KO cells

were transduced with either functional (wild-type) *MSH2* cDNA (upper row) or loss-of-function missense

variant A636P (bottom row), and grown for 4 days without (left) or with 6-TG (1 uM, right). (C) Readout

using deep sequencing to quantify abundances of each *MSH2* allele before and after 6-TG selection. The

resulting loss-of-function (LOF) score is positive for deleterious variants and negative for functionally

neutral ones.

a   **b**   **c**   Loss of function (LOF) score

−1.6   −0.8   0.0   0.8   1.6   **d**   **e**   **f**

Neutral   Deleterious

Codon number

mismatch binding
connector
lever a
clamp
lever b
ABC ATPase

P D E K R H N Q S T C G W Y F M I L V A

Mutant amino acid

g

Count of variants

Synonymous, n=841
Missense, n=16,749

Loss of function (LOF) score

Figure 2. **Functional effect map of *MSH2* missense variants.** (A) MSH2 secondary structure (cyan:

alpha helices, pink: beta sheets), and (B) protein domains. (C) Heatmap of loss-of-function (LOF) scores

after mutating each of 934 residues in MSH2 (rows) to each of 19 other possible amino acids (columns).

Negative scores (shaded blue) indicate functionally neutral variants, while positive scores (red) indicate

deleterious ones; Yellow denotes wild-type amino acid, gray: no data. (D) Fractions of substitutions which

are disruptive (LOF score>0) by position. (E) Number of scored missense variants by position (max.

possible: 19). (F) Evolutionary conservation (PSIC score) by position. (G) Distributions of LOF scores,

shaded by variant class.

539
540

Figure 3. Concordance with existing functional and clinical classifications. (A) Measured LOF scores

(y-axis) for published *MSH2* missense variants (n=295 reports covering 184 distinct variants), separated

by previous characterization (x-axis) in individual cellular or biochemical assays. (B) LOF scores for patient

missense variants from ClinVar and InSight databases, by variant classification. (C) Distributions of LOF

scores of *MSH2* missense variants in the gnomAD database[23], for variants which do not appear in the

homozygous state (gray) or those which do in ≥1 individual (orange). (D) LOF score versus gnomAD allele

frequency for *MSH2* missense variants; size of circle denotes number of heterozygous variants; orange

squares mark missense variants observed in homozygous state in ≥1 individual. Gray region denotes

singletons/doubletons (gnomAD allele count ≤2).

Figure 4. Comparison with bioinformatic predictions of pathogenicity (A) Precision-recall curves show LOF scores outperform all tested bioinformatic callers in predicting the functional status of the validation set of variants with known effect; area under the curve indicated for each. (B) Concordance of each bioinformatic predictor (Jaccard Index) with experimental LOF scores is plotted versus algorithm-specific score threshold for deleteriousness. Algorithms were most concordant with LOF scores among mutations with published functional data (red), followed by other mutations at the same residues as those mutations (orange) and mutations all other residues (gray). Dotted line and score indicate optimal threshold for each predictor on known the validation set.

Figure 5. **Structural insights from deep mutational scanning data.** (A) MutSα crystal structure (PDB:2O8E), with MSH6 surface in light gray, and MSH2 shaded by the number of deleterious missense

567   variants at each (length of bar in legend proportional to count of residues with denoted range of LOF

568   mutations). (B) Extreme intolerance to substitution in MSH2 ATPase domain (upper), and connector

569   domains (lower); selected residues or beta sheets shown with spheres or arrows, respectively. (C) LOF

570   score heatmap (as in Figure 2C) showing mutational intolerance at Walker A motif of the ATPase domain

571   (upper) and selected connector domain residues (lower) corresponding to (B).