***Table S1: Nuclear HEp-2 IIFA patterns (further details)***

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| **Code** | **AC Pattern – Clinical relevance** | **References** |
| AC-3 | *CENTROMERE*   * The AC-3 pattern is found in a subset of patients with SjS; these patients show mild SSc features, but a full-blown SjS clinical feature, more severe exocrine glandular dysfunction, and high risk of lymphoma * The AC-3 pattern is also apparent in a subset of patients with SLE; these patients often have some degree of overlap with SSc * Most sera with the AC-3 pattern react with CENP-A and CENP-B; antibodies to CENP-A can be detected by ELISA or disease specific immunoassays (*i.e.*, SSc profile) * In rare cases AC-3 positive, but CENP-B negative sera of SSc patients may be strongly positive for anti-CENP-A antibodies * Antibodies to CENP-C have been reported in patients with SSc and SjS   *Note: Availability of assays for CENP-A, i.e., ELISA or SSc profile, may be limited to specialty clinical laboratories; specific immunoassays for anti-CENP-C antibodies are currently not commercially available.* | (1-4)  (5)  (6, 7)  (8, 9)  (10-12) |
| AC-5 | *LARGE/COARSE SPECKLED*   * Occasionally, autoantibodies revealing the AC-5 pattern are reactive with RNP other than U1RNP, for instance U2RNP (associated with SSc-AIM overlap syndrome) or U11/U12RNP (associated with SSc); these autoantibodies can be detected by immunoprecipitation   *Note: Specific immunoassays for these autoantibodies are currently not commercially available.* | (13, 14) |
| AC-7 | *FEW NUCLEAR DOTS*   * Anti-p80-coilin antibodies may rarely occur in SLE, (localized linear) SSc, and SjS * Isolated (without anti-snRNPs) anti-SMN antibodies are reported in patients with AIM or SSc-AIM overlap syndrome * The specificity of antibodies to p80-coilin and the SMN complex can be confirmed by Western blot, solid phase immunoassays using recombinant proteins and immunoprecipitation   *Notes: Most reports describe autoantibodies directly binding to specific antigens (i.e. antigen-specific immunoassays) and do not actually show clear correlations with the AC-7 pattern as such; specific immunoassays for these autoantibodies are currently not commercially available.* | (15-17)  (18)  (15, 18, 19) |
| AC-8 | *HOMOGENEOUS NUCLEOLAR*   * The AC-8 pattern that is the result of the anti-Th/To reactivity is also seen in patients with SLE, UCTD (*i.e.*, patients with rheumatic symptoms without a SARD diagnosis), SSc sine scleroderma, idiopathic interstitial lung disease or pulmonary hypertension * Patients with autoantibodies revealing the AC-8 pattern due to anti-PM/Scl reactivity may have, in addition to the clinical features of AIM and SSc, various clinical manifestations of SLE and SjS | (20, 21)  (22) |
| AC-12 | *PUNCTATE NUCLEAR ENVELOPE*   * Anti-p62 nucleoporin antibodies have been described in PBC and SLE * Anti-LBR antibodies have been described in PBC * Anti-Tpr antibodies have been described in PBC, autoimmune liver disease, SLE, SSc and SjS   *Notes: Most reports describe autoantibodies directly binding to specific antigens (i.e., antigen-specific immunoassays) and do not actually show clear correlations with the AC-12 pattern as such; specific immunoassays for these autoantibodies are currently not commercially available.* | (23, 24)  (25)  (26) |
| AC-13 | *pcna-like*   * A major challenge in deriving an association of the AC-13 pattern with antibodies to the classical 35 kDa PCNA (elongation factor of DNA polymerase delta auxiliary protein) is that “PCNA” is known to be a macromolecular complex where targets other than the ‘classical’ 35 kDa PCNA are present. In addition, a number of other apparently unrelated targets can also produce an AC-13-like pattern by HEp-2 IIFA. | (27) |

**Abbreviations**

AIM, autoimmune myositis; CENP, centromere-associated protein; DNA, desoxyribonucleic acid; ELISA, enzyme-linked immunosorbent assay; IIFA, indirect immunofluorescence assay; LBR, lamin B receptor; PBC, primary biliary cholangitis; PCNA, proliferating cell nuclear antigen; PM/Scl, polymyositis-scleroderma; RNP, ribonucleoprotein; SARD, systemic autoimmune rheumatic disease; SjS, Sjögren’s syndrome; SLE, systemic lupus erythematosus; SMN, survival of motor neuron; SSc, systemic sclerosis; Tpr, translocated promotor region; UCTD, undifferentiated connective tissue disease

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