Supplementary data table S1: Summary of pre- and post-DBS changes

Supplementary data table S1: Summary of pre- and post-DBS changes	Pre-DBS	Lates	st post-	-DBS assessment (24-55 months)		
	Mean (SD)	Mean (SD)				Responders*
		Min	Max	Mean (SD)	p-value	1 '
YGTSS; n=5 (Total/100)	85.6 (13.8)	-34	-81	-57.8 (20.1)	0.003	100%
GTS-QOL; n=5 (/108)	60.4 (13.5)	-6	-64	-39.8(21.9)	0.015	100%
GTS-QOL VAS (/100)	37 (19.9)	5	70	39.6 (25.9)	0.027	
Y-BOCS; n=3 (/40)	19.7 (4.5)	-5	-20	-14.7 (8.4)	0.094	66.6%
BDI-II; n=3 (/63)	17.7 (7)	-11	20	-2 (19.2)	0.873	66.6%
BAI; n=3 (/63)	17.3 (18.3)	-11	20	-2.3 (19.5)	0.855	66,6%
Chronic medication [#] ; n=5	4.2 (1.3)	0	-5	-2.2 (1.9)	0.063	N/A

Supplementary data table S2: List of medication for TS and co-morbid disorders at the time of DBS surgery and at last follow up. The total daily dose of each drug is entered in brackets.

Pt	Medication before DBS	Medication at latest follow-up post-DBS	
1	Risperidone (3mg), Ziprasidone (80mg),	None	
	Guanfacine, Lamotrigine (400mg),		
	Fluoxetine (40mg)		
2	Amisulpiride (100mg), Ziprasidone (80mg),	Amisulpiride (100mg), Trazodone (100mg),	
	Quetiapine (600mg), Clomipramine (50mg),	Orphenadrine (100mg), Escitalopram (20mg),	
	Zopiclone	Zopiclone	
3	Aripiprazole (15mg), Tetrabenazine,	Aripiprazole (10mg)	
	Propranolol (80mg)		
4	Aripiprazole (10mg), Clonazepam,	None	
	Escitalopram (20mg)		
5	Risperidone (3mg), Quetiapine (300mg),	Risperidone (1mg), Quetiapine (100mg),	
	Lorazepam (1mg), Fluoxetine (40mg)	Lorazepam (1mg), Fluoxetine (20mg)	

Supplementary date table S3: Stimulation parameters of patients

Pt	Initial stimulation parameters	Stimulation-related S/E encountered	Stimulation parameters at last follow up
1	Monopolar stimulation with deepest contact	None recorded	Dual monopolar stimulation with deepest
	on both sides: bilateral 3.5V; 60us; 130Hz		two contacts: bilateral 3.9V; 110us; 130Hz
2	Monopolar stimulation with deepest contact	None recorded	Monopolar stimulation with deepest contact
	on both sides: bilateral 3.5V; 60us; 130Hz		on both sides: bilateral 3.7V; 60us; 160Hz
3	Monopolar stimulation with deepest contact	Stimulation of the 3 rd deepest contact (2-	Dual monopolar stimulation with deepest
	on both sides: bilateral 3.5V; 60us; 130Hz	and 10-) worsened tics and caused	two contacts: bilateral 4.0; 110us; 130Hz
		depressive mood	
4	Monopolar stimulation with deepest contact	Dual monopolar stimulation with middle two	Dual monopolar stimulation with deepest
	on both sides: bilateral 3.5V; 60us; 130Hz	contacts (1-,2-,C+ and 8-,9-,C+) caused	two contacts: left at 1.8V; 60us; 130Hz and
		mania with suicidal ideation	right at 2.0V; 60us; 130Hz
5	Monopolar stimulation with second deepest	Akathisia with increased stimulation	Dual monopolar stimulation with middle two
	contact on both sides: bilateral 3.0V; 60us;	frequency above 140Hz	contacts (1-,2-,C+ and 9-,10-,C+): bilateral
	130Hz		4.0; 90us; 130Hz
	130HZ		4.0; 90us; 130Hz

Pt = patient number; contact configuration ventral to dorsal left 0,1,2,3 and right 8,9,10,11; C = case S/E = side-effects; V = volt (constant voltage stimulation); us = pulse width in micro-seconds; Hz = Frequency in Hertz.

Supplementary date table S4: Summary of adverse events and outcomes

		Resolved
Device-related		
Removal of pulse stimulator or electrode	-	
Torsion of the extensions	-	
Other	Patient 5 (see note 1)	Yes
Surgery-related		
Infection	-	
Secondary sepsis	-	
Haemorrhage	-	
Skin lesions from accidental/self-induced injury	-	
Stimulation-related		
Bradykinesia	-	
Dyskinesia	-	
Dystonia	-	
Tic exacerbation	Patient 3 (see note 2)	Yes*
Gait disorder	-	
Dysarthria	-	
Depression	Patient 3 (see note 2)	Yes*
	Patient 4 (see note 3)	Yes*
Obsessions or compulsions	-	
Nausea or vertigo	-	
Paraesthesia	-	
Lethargy	-	
Weight gain (>4,5 kg)	Patient 1 (see note 4)	Yes
Other	Patient 3 (see note 2)	Yes*

*=resolved with stimulation parameter re-adjustment. **Note 1:** Inadequate pulse stimulator and charger contact, repositioned 4 months after initial surgery. **Note 2:** 37 months post-surgery (2 weeks after stimulation adjustment). **Note 3:** 10 months post-surgery (1 week after adjustment); acute mood change with suicidality, improved within 1 week of re-adjustment. **Note 4:** 6 kg by 6 months post-DBS, spontaneous improvement from month 8 post-DBS to return to baseline. **Note 5:** 24 months post-surgery; akathisia (after stimulation adjustment).