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Date: 10. marts 2025

Your name: Pernille Hermann

Manuscript title: Sekvensbehandling af postmenopausal osteoporose.

Manuscript number (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)	**Specifications/Comments (e.g., if payments were made to you or to your institution)**
Time frame: Since the initial planning of the work			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) **No time limit for this item.**	☒ **None**	

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Time frame: past 36 months

2	Grants or contracts from any entity (if not indicated in item #1 above).	☐ **None**	
		UCB	Advisory board and speaker
		Amgen	speaker
		Gideon Richter	Speaker

3	Royalties or licenses	☒ **None**	

4	Consulting fees	☒ **None**	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☐ **None**	
		UCB	speaker
		Amgen	speaker
		Gideon Richter	Speaker

6	Payment for expert testimony	☒ **None**	

7	Support for attending meetings and/or travel	☒ **None**	
		UCB	ECTS and IOF conference

8	Patents planned, issued or pending	☒ **None**	

9	Participation on a Data Safety Monitoring Board or Advisory Board	☒ **None**	
		UCB	Advisory board

10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☒ **None**	

11	Stock or stock options	☒ **None**	

12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	

13	Other financial or non-financial interests	☒ **None**	

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Date: 7. marts 2025

Your name: Pia Agnete Eiken

Manuscript title: Sekvensbehandling af postmenopausal osteoporose

Manuscript number (if known): UFL-11-24-0769

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3	Royalties or licenses	☒ **None**	

4	Consulting fees	☒ **None**	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☐ **None**	
		UCB	Private payment
		Novo Nordic	Private payment
		Boehringer Ingelheim Danmark A/S	Private payment

6	Payment for expert testimony	☒ **None**	

7	Support for attending meetings and/or travel	☐ **None**	
		UCB	Attending international meeting

8	Patents planned, issued or pending	☒ **None**	

9	Participation on a Data Safety Monitoring Board or Advisory Board	☐ **None**	
		UCB	Private payment

10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☒ **None**	

11	Stock or stock options	☐ **None**	
		Nova Nordic	

12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	

13	Other financial or non-financial interests	☒ **None**	

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Date: 7. marts 2025

Your name: Bente Lomholt Langdahl

Manuscript title: Sekvensbehandling af postmenopausal osteoporose

Manuscript number (if known):

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Time frame: past 36 months

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3	Royalties or licenses	☒ **None**	

4	Consulting fees	☐ **None**	
		Angitia	No payment
		Samsung-Bioepis	No payment
		Entera-Bio	No payment

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☐ **None**	
		UCB	Payment to my institution and myself
		Amgen	Payment to my institution and myself
		Mereo	Payment to my institution and myself
		Gedeon-Richter	Payment to my institution and myself

6	Payment for expert testimony	☒ **None**	

7	Support for attending meetings and/or travel	☒ **None**	

8	Patents planned, issued or pending	☒ **None**	

9	Participation on a Data Safety Monitoring Board or Advisory Board	☐ **None**	
		UCB advisory board	Payment to my institution and myself
		Gedeon-Richter advisory board	Payment to my institution and myself
		Mereo	Payment to my institution and myself

10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☐ **None**	
		International Federation of Musculoskeletal Research Societies (co-chair)	No payment

11	Stock or stock options	☒ **None**	

12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	

13	Other financial or non-financial interests	☒ **None**	

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Date: Klik eller tryk for at angive en dato.

Your name: Jens-Erik Beck Jensen

Manuscript title: Sekvensbehandling af postmenopausal osteoporose

Manuscript number (if known): UFL-11-24-0769

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2	Grants or contracts from any entity (if not indicated in item #1 above).	☐ **None**	
		Amgen	Institutional grant
		Novo Nordic	Institutional grant

3	Royalties or licenses	☒ **None**	

4	Consulting fees	☒ **None**	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	☐ **None**	
		Novo Nordic	Privat payment
		UCB	Privat payment
		GSK	Privat payment
		Amgen	Privat payment

6	Payment for expert testimony	☒ **None**	

7	Support for attending meetings and/or travel	☐ **None**	
		UCB	Sumit meeting

8	Patents planned, issued or pending	☒ **None**	

9	Participation on a Data Safety Monitoring Board or Advisory Board	☐ **None**	
		Amgen	Privat payment
		UCB	Privat payment

10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☒ **None**	

11	Stock or stock options	☒ **None**	

12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	

13	Other financial or non-financial interests	☒ **None**	

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Date: 24. februar 2025

Your name: Jane Dahl Andersen

Manuscript title: Sekvensbehandling af postmenopausal osteoporose

Manuscript number (if known): UFL-11-24-0769

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6	Payment for expert testimony	☒ **None**	
7	Support for attending meetings and/or travel	☒ **None**	
8	Patents planned, issued or pending	☒ **None**	
9	Participation on a Data Safety Monitoring Board or Advisory Board	☒ **None**	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	☒ **None**	
11	Stock or stock options	☒ **None**	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	☒ **None**	
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