

# ICMJE DISCLOSURE FORM

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**Date:** 16122024

**Your name:** Imran Rashid

**Manuscript title:** Digitale stimulanter udgør en ny trussel mod folkesundheden

**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.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  <b>No time limit for this item.</b>	<input checked="" type="checkbox"/> <b>None</b>	

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## Time frame: past 36 months

2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> <b>None</b>	
3	Royalties or licenses	<input checked="" type="checkbox"/> <b>None</b>	

4	Consulting fees	<input checked="" type="checkbox"/> <b>None</b>	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> <b>None</b>	
		Have held various speaks, lectures and keynotes about the general topic, which I also has written several books about.	In the last 36 months I have probably held around 150 speaker engagements of all kinds in both private/public sectors and all kinds of institutions.
6	Payment for expert testimony	<input type="checkbox"/> <b>None</b>	
		I've participated in Television as an expert and received payment for that.	
7	Support for attending meetings and/or travel	<input type="checkbox"/> <b>None</b>	
		Yes	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> <b>None</b>	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> <b>None</b>	
		Yes, I am currently on a Ethics Board in a Neuromarketing company called Neurons.	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> <b>None</b>	
		Yes, I am a consultant for a healthtech company and board member in an eye clinic.	
11	Stock or stock options	<input type="checkbox"/> <b>None</b>	
		Yes, I have stocks in Novo Nordisk and a stock/warrant programme in the healthtech company Lenus.	
12	Receipt of equipment, materials, drugs, medical	<input checked="" type="checkbox"/> <b>None</b>	

	writing, gifts or other services		
13	Other financial or non-financial interests	<input type="checkbox"/> <b>None</b> I have co-created an online education focusing on digital health targeted health professionals. <a href="http://www.Digitalsundhed.nu">www.Digitalsundhed.nu</a>	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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