

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Bent 2. Surname (Last Name) Deleuran 3. Date 09-April-2017

4. Are you the corresponding author? Yes No

5. Manuscript Title
JAK/STAT inhibition ved kronisk leddegigt – en ny terapeutisk mulighed

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory Board
Eli Lilly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory Board

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

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- Yes, the following relationships/conditions/circumstances are present (explain below):
- No other relationships/conditions/circumstances that present a potential conflict of interest

Jeg har deltaget i advisory board for Pfizer og Eli Lilly omk reumatologiske spørgsmål

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Jeg har ikke yderligere at tilføje

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Mette	2. Surname (Last Name) Stern	3. Date 11-April-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Bent Deleuran
5. Manuscript Title JAK/STAT inhibition ved kronisk leddegigt – en ny terapeutisk mulighed		
6. Manuscript Identifying Number (if you know it)		

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Stud. med. Mette Stern has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Peter Preben

2. Surname (Last Name)
Eggertsen

3. Date
09-April-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Bent Deleuran

5. Manuscript Title
JAK/STAT inhibition ved kronisk leddegigt – en ny terapeutisk mulighed

6. Manuscript Identifying Number (if you know it)

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Eggertsen has nothing to disclose.

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ICMJJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Anne	2. Surname (Last Name) van de Looij	3. Date 10-April-2017
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Bent Deleuran
5. Manuscript Title JAK/STAT inhibition ved kronisk leddegigt – en ny terapeutisk mulighed		
6. Manuscript Identifying Number (if you know it)		

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Ms. van de Looij has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)

Clara Bøgild

2. Surname (Last Name)

Mikkelsen

3. Date

10-April-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Bent Deleuran

5. Manuscript Title

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Frøken Mikkelsen has nothing to disclose.

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Issued: The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

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Section 1. Identifying Information

1. Given Name (First Name)
Malte

2. Surname (Last Name)
Iversen

3. Date
09-April-2017

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Bent Deleuran

5. Manuscript Title
JAK/STAT inhibition ved kronisk leddegigt – en ny terapeutisk mulighed

6. Manuscript Identifying Number (if you know it)

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Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

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Malte Iversen has nothing to disclose.

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