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Date: 2	5. februar 2025		
Your nam	Your name: Christian S. Meyhoff		
Manuscript title: Respiratorisk behandling af obesity hypoventilation syndrome			
Manuscript number (if known): UFL-10-24-0719			

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)
Tim	e frame: Since the initial plar	nning 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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Tim	Time frame: past 36 months			
2	2 Grants or contracts from any entity (if not indicated in item #1 above).	☑ None		
3	Royalties or licenses	⊠ None		

4	Consulting fees		
5	Payment or honoraria for	⊠ None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
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6	Payment for expert testimony	⊠ None	
	l		
7	Support for attending	☐ None	
	meetings and/or travel	Congress participation	WARD247 ApS
8	Patents planned, issued or	□ None	
	pending	Patent	One patent has been filed: "Wireless Assessment of
	F	ratent	Respiratory and circulatory Distress (WARD), EP
			21184712.4 and EP 21205557.8".
0	Double in the Double		
9	Participation on a Data Safety Monitoring Board	None	
	or Advisory Board		
10	Leadership or fiduciary	☐ None	
	role in other board,	Board Member	Founder of a start-up company, WARD24/7 ApS,
	society, committee or advocacy group, paid or		with the aim of pursuing the regulatory and
	unpaid		commercial activities of the WARD-project (Wireless Assessment of Respiratory and circulatory Distress, a
	unpala		project developing a clinical support system for
			continuous wireless monitoring of vital signs).
			WARD24/7 ApS has obtained license agreement for
			any WARD-project software and patents.
11	Stock or stock options	□ None	
		Shareholder	Founder of a start-up company, WARD24/7 ApS,
			with the aim of pursuing the regulatory and
			commercial activities of the WARD-project (Wireless
			Assessment of Respiratory and circulatory Distress, a
			project developing a clinical support system for
			continuous wireless monitoring of vital signs). WARD24/7 ApS has obtained license agreement for
			any WARD-project software and patents.
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12	Receipt of equipment,	⊠ None	
	materials, drugs, medical writing, gifts or other		
	services		
<u> </u>			
13		□ None	

Other financial or non-	Other	Founder of a start-up company, WARD24/7 ApS,
financial interests		with the aim of pursuing the regulatory and
		commercial activities of the WARD-project (Wireless
		Assessment of Respiratory and circulatory Distress, a
		project developing a clinical support system for
		continuous wireless monitoring of vital signs).
		WARD24/7 ApS has obtained license agreement for
		any WARD-project software and patents.

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Your name: Anne Kathrine Stæhr RYe				
Manuscript title: Respiratorisk behandling af obesity hypoventilation syndrome				
Manuscript number (if known): UFL-10-24-0719			
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The following questions apply t manuscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>		
pertains to the epidemiology of	The author's relationships/activities/interests should be <u>defined broadly</u> . 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)		
Time frame: Since the initial plan	1			
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.				
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Time frame: past 36 months				

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Date: 27. februar 2025

4	Consulting fees	⊠ None
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None
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 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	e : 25. februar 2025			
You	r name: Marianne Skalbo	org Jepsen		
Mar	Manuscript title: Respiratorisk behandling af obesity hypoventilation syndrome			
Mar	nuscript number (if known): UFL-10-24-0719		
are re third comm	elated to the content of yo parties whose interests ma	ur manuscript. "Related" ay be affected by the cont nd does not necessarily in	relationships/activities/interests listed below that means any relation with for-profit or not-for-profit tent of the manuscript. Disclosure represents a dicate a bias. If you are in doubt about whether to bu do so.	
	ollowing questions apply to uscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>	
perta	ins to the epidemiology of	hypertension, you should	defined broadly. For example, if your manuscript declare all relationships with manufacturers of ot mentioned in the manuscript.	
	m #1 below, report all sup ritems, the time frame for	disclosure is the past 36 r	d in this manuscript without time limit. For all 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)	
	e frame: Since the initial plar	nning of the work		
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges,	None Non		
	etc.)			
	No time limit for this item.			
			Click TAB in last row to add extra rows	
Time	e frame: past 36 months			
2	Grants or contracts from	None Non		

any entity (if not indicated

None
 Non

in item #1 above).

Royalties or licenses

4	Consulting fees	None Non	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	□ None AstraZeneca Boehringer-Ingelheim	Payments to me Payments to med
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None Non	
8	Patents planned, issued or pending	None Non	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None Non	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	⊠ None	
11	Stock or stock options	None Non	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None Non	
13	Other financial or non- financial interests	None Non	

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Date: 25. februar 2025				
Your name: Eline Kirstine Gantzhorn				
Manuscript title: Respiratorisk behandling af obesity hypoventilation syndrome				
Manuscript number (if known): UFL-10-24-0719				
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				

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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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	⊠ None	
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Tim	Time frame: past 36 months			
2	Grants or contracts from	None Non		
	any entity (if not indicated			
	in item #1 above).			
3	Royalties or licenses	None Non		

4	Consulting fees	⊠ None		
5	Payment or honoraria for	□ None		
	lectures, presentations, speakers bureaus, manuscript writing or educational events	Somnomed AS	Payment to me	
		Resmed	Payment to me	
		Phillips Respironics	Payment to me	
		Astra Zeneca	Payment to me	
		Chiesi	Payment to me	
		Jazz Pharmaceuticals	Payment to me	
		Tempur	Payment to me	
		Boehringer	Payment to me	
		Novartis	Payment to me	
6	Payment for expert testimony	⊠ None		
7	Support for attending	⊠ None		
	meetings and/or travel	Resmed	Congress participation	
		Jazz Pharmaceuticals	Congress participation	
8	Patents planned, issued or	⊠ None		
	pending	Z None		
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9	Participation on a Data	■ None		
	Safety Monitoring Board			
	or Advisory Board			
10	Leadership or fiduciary role in other board, society, committee or	⊠ None		
	advocacy group, paid or			
	unpaid			
11	Stock or stock options	⊠ None		
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	■ None		
	351 VICE3			
13	Other financial or non- financial interests	⊠ None		

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