

ICMJE DISCLOSURE FORM

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Date: 20.juni 2024

Your name: Anne Hald Rittig

Manuscript title: Systemisk behandling af psoriasis

Manuscript number (if known): UFL-06-24-0412

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)
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Time frame: past 36 months			
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3	Royalties or licenses	<input checked="" type="checkbox"/> None	

4	Consulting fees	<input type="checkbox"/> None	
		Boehringer Ingelheim	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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Date: 20.juni 2024

Your name: Trine Bertelsen

Manuscript title: Systemisk behandling af psoriasis

Manuscript number (if known): UFL-06-24-0412

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			Aage bang fnd, Wehnerts fond
3	Royalties or licenses	<input checked="" type="checkbox"/> None	

4	Consulting fees	<input type="checkbox"/> None	
			UCB, Novartis
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
			Eli Lilly
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
			Abbvie, Novartis, UCB
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
			UCB, Novartis
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None	
			Unpaid board member of Danish dermatological society
11	Stock or stock options	<input checked="" type="checkbox"/> None	
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Date: 20.juni 2024

Your name: Mads Kirchheiner Rasmussen

Manuscript title: Systemisk behandling af psoriasis

Manuscript number (if known): UFL-06-24-0412

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Abbvie	Personal
		Bristol-Myers Squibb, Danmark	Personal
		UCB nordic	Personal
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
		Abbvie	Congress
		UCB nordic	Congress
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		UCB nordic	Personal
		Bristol-Myers Squibb, Danmark	Personal
		Novartis Healthcare A/S, Danmark	Personal
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Date: 20.juni 2024

Your name: Kirsten Rønholt

Manuscript title: Systemisk behandling af psoriasis

Manuscript number (if known): UFL-06-24-0412

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