

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Jeffrey

2. Surname (Last Name)
Stonebraker

3. Date

4. Are you the corresponding author?

Yes No

5. Manuscript Title

Establishing the prevalence and prevalence at birth of hemophilia: a meta-analytical approach using established national clinical registries

6. Manuscript Identifying Number (if you know it)

M19-1208

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Dr. Stonebraker has nothing to disclose.

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)

Alfonso

2. Surname (Last Name)

lorio

3. Date

27-June-2019

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Jeffrey Stonebraker

5. Manuscript Title

Establishing the prevalence and prevalence at birth of hemophilia: a meta-analytical approach using established national clinical registries.

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that his Institution, McMaster University, has received in the last three years project based funding via research or service agreements with Bayer, CSL, Grifols, NovoNordisk, Octapharma, Pfizer, Roche, Sobi and Takeda/Shire (formerly Baxter and Baxalta). Alfonso Iorio is or has been local principal investigator for clinical research studies in the hemophilia patients sponsored by Octapharma, Pfizer, and Roche. Alfonso Iorio did not receive any personal honorarium or compensation for any of the above mentioned activities

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Dr. Iorio reports that his Institution, McMaster University, has received in the last three years project based funding via research or service agreements with Bayer, CSL, Grifols, NovoNordisk, Octapharma, Pfizer, Roche, Sobi and Takeda/Shire (formerly Baxter and Baxalta). Dr. Iorio is or has been local principal investigator for clinical research studies in the hemophilia patients sponsored by Octapharma, Pfizer, and Roche. Alfonso Iorio did not receive any personal honorarium or compensation for any of the above mentioned activities.

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Section 1. Identifying Information

1. Given Name (First Name)
Federico

2. Surname (Last Name)
Germini

3. Date
28-June-2019

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Jeffrey S. Stonebraker

5. Manuscript Title
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1. Given Name (First Name)

Donna

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Coffin

3. Date

27-June-2019

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Corresponding Author's Name

Jeffrey S. Stonebraker

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1. Given Name (First Name)
Christine

2. Surname (Last Name)
Herr

3. Date
27-June-2019

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Corresponding Author's Name
Jeffrey S. Stonebraker

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For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

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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Definitions.

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Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Michael

2. Surname (Last Name) Makris

3. Date 31-July-2019

4. Are you the corresponding author? Yes No Corresponding Author's Name Jeffrey Stonebraker

5. Manuscript Title Establishing the prevalence and prevalence at birth of hemophilia: setting the stage for assessing the global burden of disease of a rare congenital disease

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

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
NovoNordisk	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plus support for EUHASS
Shire	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plus support for EUHASS
Freeline	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Bioverativ	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Catalyst	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Spark	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Bayer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support for EUHASS
Biotest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support for EUHASS

ICMJE Form for Disclosure of Potential Conflicts of Interest

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
BPL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support for EUHASS
CSL Behring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support for EUHASS
Grifols	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support for EUHASS
Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plus support for EUHASS
Roche	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support for EUHASS
Sobi	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support for EUHASS
Kedrion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support for EUHASS
Octapharma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support for EUHASS

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Makris reports personal fees from NovoNordisk, Pfizer, Shire, Freeline, Bioverativ, Catalyst, and Spark. He is project lead for the European Haemophilia Safety Surveillance Scheme (EUHASS) which receives funding from Bayer, Biotest, BPL, CSL Behring, Grifols, NovoNordisk, Pfizer, Roche, Sobi, Shire (Takeda) Kedrion, Octapharma, this is outside the submitted work .

Evaluation and Feedback

Please visit <http://www.icmje.org/cgi-bin/feedback> to provide feedback on your experience with completing this form.

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
HERVE

2. Surname (Last Name)
CHAMBOST

3. Date
13-August-2019

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Jeffrey S. Stonebraker

5. Manuscript Title
Establishing the prevalence and prevalence at birth of hemophilia: a meta-analytical approach using established national clinical registries

6. Manuscript Identifying Number (if you know it)
M19-1208

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

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

ICMJE Form for Disclosure of Potential Conflicts of Interest

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