

ICMJE DISCLOSURE FORM

Date: 3/28/2023

Your Name: Antonella Putignano

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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 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.

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Date: 3/28/2023

Your Name: Antonia Lepida

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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Date: 3/28/2023

Your Name: Astrid Marot

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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Date: 3/28/2023

Your Name: Carolina Gomes da Silveira

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Date: 3/28/2023

Your Name: Christophe Moreno

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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 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)						
Time frame: Since the initial planning of the work								
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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"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 10px;"> <tr><td style="width: 60%;"></td><td style="width: 40%;"></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						
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4	Consulting fees	<input type="checkbox"/> None	
		Abbvie	Julius Clinical
		Novartis	
		Surrozen	
		Gilead	
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	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
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	

		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)						
11	Stock or stock options	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							

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ICMJE DISCLOSURE FORM

Date: 3/27/2023

Your Name: Clara-Yongxiang Zhan

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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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ICMJE DISCLOSURE FORM

Date: 3/28/2023

Your Name: Delphine Degré

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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ICMJE DISCLOSURE FORM

Date: 3/28/2023

Your Name: Eric Trépo

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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ICMJE DISCLOSURE FORM

Date: 3/26/2023

Your Name: Gael Englebert

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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ICMJE DISCLOSURE FORM

Date: 3/27/2023

Your Name: Hassane Njimi

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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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ICMJE DISCLOSURE FORM

Date: 3/28/2023

Your Name: Jacques Devière

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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ICMJE DISCLOSURE FORM

Date: 3/27/2023

Your Name: Laurent Crenier

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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ICMJE DISCLOSURE FORM

Date: 3/27/2023

Your Name: Laurent Crenier

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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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ICMJE DISCLOSURE FORM

Date: 4/28/2023

Your Name: Lukas Otero Sanchez

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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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ICMJE DISCLOSURE FORM

Date: 3/28/2023

Your Name: Miriam Cnop

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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ICMJE DISCLOSURE FORM

Date: 3/28/2023

Your Name: Nathalie Boon

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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

ICMJE DISCLOSURE FORM

Date: 3/28/2023

Your Name: Pierre Deltenre

Manuscript Title: **A machine learning-based classification of adult-onset diabetes identifies patients at risk for liver-related complications**

Manuscript Number (if known): JHEPR-D-22-00571

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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Date: 3/28/2023

Your Name: Thierry Gustot

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Manuscript Number (if known): JHEPR-D-22-00571

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		Martin Pharmaceuticals	
		Goliver Therapeutics	
		Abbvie	
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