

ICMJE DISCLOSURE FORM

Date: 3/14/2023

Your Name: Benjamin Terrier

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

Manuscript Number (if known): ACROR-23-008.R1

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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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%; border-collapse: collapse;"> <tr><td> </td><td> </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	
		AstraZeneca	
		Vifor	
		GSK	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		AstraZeneca	
		Vifor	
		GSK	
		Boehringer Ingelheim	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		Vifor	
		GSK	
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	<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)
	advocacy group, paid or unpaid		
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	

Please place an "X" next to the following statement to indicate your agreement:

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: 10/27/2022

Your Name: David RW Jayne

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

Manuscript Number (if known): ACROR-23-008.R1

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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	
		GSK	Paid to self
		Chinook	Paid to self
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None	
		European Vasculitis Society	President
11	Stock or stock options	<input type="checkbox"/> None	
		Aurinia	
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	

Please place an "X" next to the following statement to indicate your agreement:

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ICMJE DISCLOSURE FORM

Date: 10/27/2022

Your Name: Bernhard Hellmich

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

Manuscript Number (if known): ACROR-23-008.R1

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3	Royalties or licenses	<input checked="" type="checkbox"/> None	
4	Consulting fees	<input type="checkbox"/> None	
		GSK	personal
		InlaxRx	personal
		Novartis	personal
		Vifor	personal
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Amgen	personal
		Astra Zeneca	personal
		BMS	personal
		Boehringer	personal
		Chugai	personal
		GSK	personal
		Janssen	personal
		MSD	personal
		Pfizer	personal
		Phadia	personal
		Roche	personal
		Vifor	personal
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	

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
		InflRx	
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	
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Date: 10/27/2022

Your Name: Jane H Bentley

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

Manuscript Number (if known): ACROR-23-008.R1

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10	Leadership or fiduciary role in other board,	<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> </table>							

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		GSK	Employee and owns stocks/shares
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Date: 10/27/2022

Your Name: Jonathan Steinfeld

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

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		GSK	Former employee and owns stocks/shares
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	

Please place an "X" next to the following statement to indicate your agreement:

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: 10/27/2022

Your Name: Steven W Yancey

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

Manuscript Number (if known): ACROR-23-008.R1

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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ICMJE DISCLOSURE FORM

Date: 10/27/2022

Your Name: Namhee Kwon

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

Manuscript Number (if known): ACROR-23-008.R1

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: 10/27/2022

Your Name: Praveen Akuthota MD

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

Manuscript Number (if known): ACROR-23-008.R1

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		AstraZeneca	Paid instructor
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
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		AstraZeneca	Consultant
		GSK	Consultant
		Sanofi	Consultant

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ICMJE DISCLOSURE FORM

Date: 10/27/2022

Your Name: Paneez Khoury

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

Manuscript Number (if known): ACROR-23-008.R1

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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	

Please place an "X" next to the following statement to indicate your agreement:

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: 10/27/2022

Your Name: Lee Baylis

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

Manuscript Number (if known): ACROR-23-008.R1

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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11	Stock or stock options	<input type="checkbox"/> None	
		GSK	Employee and owns stocks/shares
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
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ICMJE DISCLOSURE FORM

Date: 10/27/2022

Your Name: Michael E Wechsler

Manuscript Title: Clinical benefit of mepolizumab in eosinophilic granulomatosis with polyangiitis for patients with and without a vasculitic phenotype

Manuscript Number (if known): ACROR-23-008.R1

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