Date: <u>Sep. 20</u>	, 2024	
Your Name:	Suzane Skura	
Manuscript Title:	Erectile Dysfunction in Men with HIV: Prevalence and Associated Factors	

_

Manuscript number (if known): TAU-24-234

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) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) planning 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.	(X) None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	(X) None	
3	Royalties or licenses	(X) None	
4	Consulting fees	(X) None	

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

None.	

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

		ICIVIJE DISCL	USURE FURIVI
Data	Sep. 20, 2024		
	ne: Anna Martha	Vaitses Fontanari	_
			h HIV: Prevalence and Associated Factors
_			
	ipt number (if known):		
			relationships/activities/interests listed below that are
			ins any relation with for-profit or not-for-profit third fthe manuscript. Disclosure represents a commitment
-	•	<u>-</u>	If you are in doubt about whether to list a
-	•	is preferable that you do	•
		o the author's relationship	os/activities/interests as they relate to the <u>current</u>
manuscr	ipt only.		
The auth	or's relationshins/activ	vities/interests should be a	defined broadly. For example, if your manuscript pertains
	•	-	all relationships with manufacturers of antihypertensive
-		tion is not mentioned in t	•
	•	-	d in this manuscript without time limit. For all other item
the time	frame for disclosure is	the past 36 months.	
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate none (add rows as	institution)
		needed)	
		Time frame: Since the initia	al planning of the work
1 All s	support for the present	(X) None	
	nuscript (e.g., funding,		
	vision of study materials,		
	dical writing, article cessing charges, etc.)		
	time limit for this item.		

No time limit for this it are		
NO time limit for this item.		
	Time frame: past	36 months
Grants or contracts from	(X) None	
any entity (if not indicated		
in item #1 above).		
Royalties or licenses	(X) None	
Consulting fees	(X) None	
	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	Time frame: past Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses (X) None (X) None

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	(X) None	
11	Stock or stock options	(X) None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	(X) None	
13	Other financial or non- financial interests	(X) None	

None.	

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

Date: Sep. 20	, 2024	
Your Name:	Lia Beatriz Henke de Azevedo	
Manuscript Title:	Erectile Dysfunction in Men with HIV: Prevalence and Associated Factors	
_		

Manuscript number (if known): TAU-24-234

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11	Stock or stock options	(X) None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	(X) None	
13	Other financial or non- financial interests	(X) None	

None.	

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

Date: Sep	. 20, 2024		
Your Name: _	Raqu	uel Maiéli Bagatini	
Manuscript Ti	itle:	Erectile Dysfunction in Men with HIV: Prevalence and Associated Factors	

_

Manuscript number (if known): TAU-24-234

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	(X) None	
11	Stock or stock options	(X) None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	(X) None	
13	Other financial or non- financial interests	(X) None	

None.	

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

Date: Sei	o. 20,	2024	i
Your Name:		Valdir Spada Júnior	
Manuscript 1	Title:	Erectile Dysfunction in Men with HIV: Prevalence and Associated Factors	

Manuscript number (if known): TAU-24-234

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	(X) None	
11	Stock or stock options	(X) None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	(X) None	
13	Other financial or non- financial interests	(X) None	

None.	

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

Date: Sep. 2	0, 2024	
Your Name:	Dalila Moter Benvegnú	
Manuscript Title	Erectile Dysfunction in Men with HIV: Prevalence and Associated Factors	

Manuscript number (if known): TAU-24-234

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6	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	(X) None	
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11	Stock or stock options	(X) None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	(X) None	
13	Other financial or non- financial interests	(X) None	

None.	

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

Date: Ser	o. 20,	2024	<u>-</u>
Your Name: _		Paulo Cezar Nunes Fortes	
Manuscript T	itle:	Erectile Dysfunction in Men with HIV: Prevalence and Associated Factors	

Manuscript number (if known): TAU-24-234

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	(X) None	
11	Stock or stock options	(X) None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	(X) None	
13	Other financial or non- financial interests	(X) None	

None.	

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

Date: Sep. 2	0, 2024	
Your Name:	Angelo Brandelli Costa	
Manuscript Title	: Erectile Dysfunction in Men with HIV: Prevalence and Associated Factors	

Manuscript number (if known): TAU-24-234

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7	Support for attending meetings and/or travel	(X) None	
8	Patents planned, issued or pending	(X) None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	(X) None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	(X) None	
11	Stock or stock options	(X) None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	(X) None	
13	Other financial or non- financial interests	(X) None	

None.	

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

Date:	Sep. 20,	2024	
Your Nam	ne:	Guilherme Welter Wendt	
Manuscri	pt Title:	Erectile Dysfunction in Men with HIV: Prevalence and Associated Factors	

Manuscript number (if known): TAU-24-234

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11	Stock or stock options	(X) None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	(X) None	
13	Other financial or non- financial interests	(X) None	

None.	

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

Date: Sep. 20,	2024	
Your Name:	Lirane Elize Defante Ferreto	
Manuscript Title:	Erectile Dysfunction in Men with HIV: Prevalence and Associated Factors	

Manuscript number (if known): TAU-24-234

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