

### 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.

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Section 1. Identifying Inform	mation			
1. Given Name (First Name) Annieke	2. Surname (Last Name) van Baar	3. Date 26-September-2019		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Jacques J. Bergman		
5. Manuscript Title Endoscopic duodenal mucosal resurfacing improves glycaemic and hepatic indices in type 2 diabetes: 6-month multi-centre results				
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Dr. van Baar has nothing to disclose.

#### **Evaluation and Feedback**

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<ol> <li>Manuscript Title Endoscopic duodenal mucosal resurfa results</li> </ol>	acing improves glycaemic a	nd hepatic indices in type 2 diabetes: 6-month multi-centre
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Section 1. Identifying Inform	mation	
1. Given Name (First Name) Alia	2. Surname (Last Name) Hadefi	3. Date 26-September-2019
4. Are you the corresponding author?	Yes √ No	Corresponding Author's Name Jacques J. Bergman
5. Manuscript Title Endoscopic duodenal mucosal resurfa results	cing improves glycaemic a	nd hepatic indices in type 2 diabetes: 6-month multi-centre
6. Manuscript Identifying Number (if you k JHEPR-D-19-00122	(now it)	
Section 2. The Work Under (	Consideration for Publi	cation
any aspect of the submitted work (includin statistical analysis, etc.)? Are there any relevant conflicts of inte	ng but not limited to grants, da rest? Yes No formation below. If you have	a a third party (government, commercial, private foundation, etc.) for at a monitoring board, study design, manuscript preparation, we more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Grant' _	n-Financial Other? Comments
ractyl Laboratories		has received research support from Fractyl Laboratories, Inc for an IRB approved study
Section 3. Relevant financia	l activities outside the	submitted work.
of compensation) with entities as desc	ribed in the instructions. U eport relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
The state only relevant connects of fitte	[ ] [V] [V]	
Section 4- Intellectual Prope	erty Patents & Copyri	ghts
Do you have any patents, whether pla	nned, pending or issued, b	roadly relevant to the work? Yes Vo



Section 5. Relationships not covered above
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✓ No other relationships/conditions/circumstances that present a potential conflict of interest
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Section 6. Disclosure Statement
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Dr. Hadefi reports other from Fractyl Laboratories, during the conduct of the study;

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Given Name (First Name)  Jacques	2. Surname (Last Name) Devière	3. Date 26-September-2019
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Jacques J. Bergman
<ol> <li>Manuscript Title</li> <li>Endoscopic duodenal mucosal resurfaceresults</li> </ol>	ing improves glycaemic	and hepatic indices in type 2 diabetes: 6-month multi-centre
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· ·	ormation below. If you ha	ave more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Giant.	on-Financial Other? Comments
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Given Name (First Name)     Soumitra	2. Surname (Last Name) Ghosh		3. Date 25-September-2019
4. Are you the corresponding author?	☐ Yes 🗸 No	Corresponding Author	
5. Manuscript Title Endoscopic duodenal mucosal resurfa results	acing improves glycaemic a	and hepatic indices in t	ype 2 diabetes: 6-month multi-centr
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Given Name (First Name)  Juan C arlos	Surname (Last Name)     Lopez-Talavera	3. Date 25-September-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Prof. Jacques Bergman
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Lopez-Talavera 2



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4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Jacques J. Bergman
<ol><li>Manuscript Title Endoscopic duodenal mucosal resurfa results</li></ol>	acing improves glycaemic a	nd hepatic indices in type 2 diabetes: 6-month multi-centre
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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"

### 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.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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.

# Relationships not covered above.

Use this section to report 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.

### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**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



Section 1. Identifying Info	rmation	
Given Name (First Name)     Manoel	2. Surname (Last Galvao Neto	Name) 3. Date 26-September-2019
4. Are you the corresponding author?	☐ Yes ✓ N	o Corresponding Author's Name Jacques Bergman
S. Manuscript Title Endoscopic duodenal mucosal resurt results	acing improves glyc	aemic and hepatic indices in type 2 diabetes: 6-month multi-centre
6. Manuscript Identifying Number (if you JHEPR-D-19-00122	know it)	
Section 2. The Work Under	Consideration fo	r Publication
Did you or your institution at any time re	eceive payment or serving but not limited to	ices from a third party (government, commercial, private foundation, etc.) for grants, data monitoring board, study design, manuscript preparation,
	nformation below. If	you have more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Perso	Other Comments
Fracty! Labs		consulting / proctoring
Section 3. Relevant financi	al activities outsi	de the submitted work.
Place a check in the appropriate boxe of compensation) with entities as de	es in the table to ind scribed in the instructions report relationships erest?	icate whether you have financial relationships (regardless of amount tions. Use one line for each entity; add as many lines as you need by that were <b>present during the 36 months prior to publication</b> .
Name of Entity	Grant? Perso	Other • Comments
GI Dynamics		consulting / proctoring
GI Windows		consulting / proctoring
Apollo EndoSurgery		consulting / proctoring



edtronics lympus ractyl labs  Section 4 Intellectual Propert		✓ ✓ ✓			Faculty / Advisory Board Faculty / Advisory Board Faculty / Advisory Board
Section 4. Intellectual Propert		<b>V</b>			
Section 4. Intellectual Propert					Faculty / Advisory Board
Section 4. Intellectual Propert		<b>√</b>			
intenectual Propert					consulting / proctoring
Are there other relationships or activities potentially influencing, what you wrote in Yes, the following relationships/conditions/circulture.	that reac n the sub litions/cir	above ders could pointed work cumstance ces that pre	perceive to have rk? s are present (ex esent a potential	influence plain belo conflict c	ed, or that give the appearance of ow):  ow):  of interest
At the time of manuscript acceptance, jo On occasion, journals may ask authors to					
Section 6. Disclosure Stateme	nt				
Based on the above disclosures, this form below.  Dr. Galvao Neto reports personal fees from personal fees from GI Windows, personal	om Fracty Il fees froi	l Labs, dur	ing the conduct	of the stu	ıdy; personal fees from GI Dynamics,



Evaluation and Feedback

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

Galvao Neto

#### 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 four parts.

### 1. Identifying information.

Please enter your first and last name, and double-check the manuscript number and title.

### 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". Complete the appropriate boxes to indicate the type of support and whether the payment went to you, or to your institution, or both.

#### 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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### 4. Other relationships.

Use this section to report 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.

### Section 1: Identifying information

First Name Arun

Last Name Sanyal

Manuscript No.:

Manuscript Title:

Date Submitted:

### Section 2: The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party for any aspect of the submitted work (Including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc...)? Complete each row by checking "No" or providing the requested information.

The Work Under Consideration for Publication					
Туре	No	Money Paid to You	Your	Name of Entity	Comments**
1. Grant					NIH funded
2. Consulting fee or honorarium	×				
3. Support for travel to meetings for the study or other purposes	x				
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	x				
5. Payment for writing or reviewing the manuscript	х				
6. Provision of writing assistance, medicines, equipment, or administrative support	x				
7. Other	х				

<sup>\*</sup>This means money that your institution received for your efforts on this study.

### 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. You should report relationships that were present during the 36 months prior to submission. Complete each row by checking "No" or providing the requested information.

Relevant financial acti	vitie	s outside	the submitte	d work	
Type of Relationship (in alphabetical order)	N	Money Paid to You	Money to Your Institution*	Entity	Comme

<sup>\*\*</sup> Use this section to provide any needed explanation.

1. Board membership			Sanyal Bio, Genfit Tiziana	
2. Consultancy			Intercep t, galectin, BMS, Nitto Denko, Nimbus, Aredlyx, Vivelyx, Teva, Novartis , Canfite. Gilead, Boehrin ger Ingelhei m , Pfizer Salix	No remunerati on from any of these except Gilead, Novartis, Boehringer Ingelheim in last 12 months
3. Employment	х			
4. Expert testimony	х			
5. Grants/grants pending		Gilead, Intercept, Novartis,Me rck, BMS, Tobira Echosense		
6. Payment for lectures including service on speakers bureaus	x			

7. Payment for manuscript preparation	x			
8. Patents (planned, pending or issued)	x			
9. Royalties		uptodate		
10. Payment for development of educational presentations	x			-
11. Stock/stock options		Genfit, akarna, tiziana, natural shield, durect, exhalenz Hemoshe ar,		
12. Travel/accommodations/ meeting expenses unrelated to activities listed**	×			
13. Other (err on the side of full disclosure)	x			

<sup>\*</sup> This means money that your institution received for your efforts.

### **Section 4: Other Relationships**

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?

No other relationships/conditions/circumstances that present a potential conflict of interest Yes, the following relationships/conditions/circumstances are present (explain below):

At the time of manuscript acceptance, Mayo Clinic Proceedings: Innovations, Quality & Outcomes may ask authors to confirm and, if necessary, update their disclosure statements. On occasion, Mayo Clinic Proceedings: Innovations, Quality & Outcomes may ask authors to disclose further information about reported relationships.

<sup>\*\*</sup> For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.

By typing your name above and initials below, you agree all of the information is complete and accurate.

req Initials ajs

req Date: 12/01/17

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earning royalties or not

Royalties: Funds are coming in to you or your institution due to your

patent



Section 1. Identifying Inform	ation	
1. Given Name (First Name) Jacques	2. Surname (Last Name) Bergman	3. Date 26-September-2019
4. Are you the corresponding author?	✓ Yes No	
5. Manuscript Title Endoscopic duodenal mucosal resurfaci results	ing improves glycaemic and hepatic indices in	n type 2 diabetes: 6-month multi-centre
6. Manuscript Identifying Number (if you kn JHEPR-D-19-00122	ow it)	
Section 2. The Work Under Co	onsideration for Publication	
Did you or your institution at any time recei	ve payment or services from a third party (govern but not limited to grants, data monitoring board,	
	ormation below. If you have more than one er	ntity press the "ADD" button to add a row.
Name of Institution/Company	Grant? Personal Non-Financial Other	? Comments
ractyl Laboratories Inc.		Grant for IRB approved study
ractyl Laboratories Inc.		consultancy fee for a single advisory board meeting of Fractyl in September 2019
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descri	n the table to indicate whether you have fina bed in the instructions. Use one line for each port relationships that were <b>present during t</b>	entity; add as many lines as you need by
Are there any relevant conflicts of intere	est?	
Section 4 Intellectual Proper	ty Patents & Copyrights	
Do you have any patents, whether plant	ned, pending or issued, broadly relevant to th	ne work? Yes V No



Section 5.	Relationships not covered above
	relationships or activities that readers could perceive to have influenced, or that give the appearance of uencing, what you wrote in the submitted work?
Yes, the foll	owing relationships/conditions/circumstances are present (explain below):
✓ No other re	lationships/conditions/circumstances that present a potential conflict of interest
	nanuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. ournals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abbelow.	bove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Bergman re of the study; .	eports grants from Fractyl Laboratories Inc., personal fees from Fractyl Laboratories Inc., during the conduct

#### **Evaluation and Feedback**

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

