

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

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4. Intellectual Property.

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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)
Elina

2. Surname (Last Name)
Urpilainen

3. Date
02-April-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Peeter Karihtala

5. Manuscript Title
Metformin and ovarian cancer: the evidence

6. Manuscript Identifying Number (if you know it)
ATM-2020-OC-01(ATM-20-1060)

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
The Cancer Society of Finland	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 3. Relevant financial activities outside the submitted work.

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Dr. Urpilainen reports grants from The Cancer Society of Finland, during the conduct of the study; .

Evaluation and Feedback

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1. Given Name (First Name)
Ulla

2. Surname (Last Name)
Puistola

3. Date
02-April-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Peeter Karihtala

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Jane and Aatos Erkko Foundation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Puistola reports grants from Jane and Aatos Erkko Foundation, during the conduct of the study; .

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1. Given Name (First Name)
STERGIOS

2. Surname (Last Name)
BOUSSIOS

3. Date
02-April-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
PEETER KARIHTALA

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Dr. BOUSSIOS has nothing to disclose.

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Peeter

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Karihtala

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