

## ICMJE DISCLOSURE FORM

**Date:** 2021-03-05

**Your Name:** Marie-Caroline Michalski

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-TR-2

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 following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

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)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	French Dairy Interbranch Organisation (CNIEL)	Dr. Michalski reports that institution received research funding for this project
<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	Groupe Lipides et Nutrition	Dr. Michalski reports that institution received research grant for this project
		Sodiaal-Candia R&D	Dr. Michalski reports that institution received research funding for another dairy-related project
		Danone-Nutricia Research	Dr. Michalski reports that institution received research funding for another dairy-related project
3	Royalties or licenses	None	

4	Consulting fees	____ None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	____ None	
6	Payment for expert testimony	____ None	
7	Support for attending meetings and/or travel	____ None	
8	Patents planned, issued or pending	____ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	ITERG, the Industrial Technical Centre for the oils and fats business sector	Dr Michalski is a member of the scientific advisory board
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	____ None	
11	Stock or stock options	____ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	____ None	
13	Other financial or non-financial interests	Food, fats and oils and dairy companies	Dr Michalski has consultancy activities

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

X 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:** 2021-03-22

**Annick BERNALIER DONADILLE**

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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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3	Royalties or licenses	___ None	
4	Consulting fees	___ None	
5		___ None	

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6	Payment for expert testimony	<u>    </u> None	
7	Support for attending meetings and/or travel	<u>    </u> None	
8	Patents planned, issued or pending	<u>    </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>    </u> None	
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11	Stock or stock options	<u>    </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>    </u> None	
13	Other financial or non-financial interests	<u>    </u> None	

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** GABORIT Patrice

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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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4	Consulting fees	___ None	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	Actalia Produits Laitiers	P Gaborit is an employee of ACTALIA, an Agri-Food Technical Institute, with a strong specialisation in dairy research and development, and food safety.

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

X 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:** 2021-03-22

**Your Name:** Annie Durand

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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2	Grants or contracts from any entity (if not indicated in item #1 above).	___ None	
3	Royalties or licenses	___ None	
4	Consulting fees	___ None	
5		___ None	

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8	Patents planned, issued or pending	<u>    </u> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>    </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>    </u> None	
11	Stock or stock options	<u>    </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>    </u> None	
13	Other financial or non-financial interests	<u>    </u> None	

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Breyton Anne-Esther

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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<b>Time frame: past 36 months</b>			
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3	Royalties or licenses	___ None	
4	Consulting fees	___ None	
5		___ None	

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

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Charlotte CUERQ

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input type="checkbox"/> None	X
3	Royalties or licenses	<input type="checkbox"/> None	X
4	Consulting fees	<input type="checkbox"/> None	X
5		<input type="checkbox"/> None	X

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

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 C. ERQ Charlotte

## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Chloé Robert

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Malpuech-Brugère Corinne

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-23

**Your Name:** Cécile Vors

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** DAVID CHEILLAN

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Combe Emmanuel

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>    </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>    </u> None	
11	Stock or stock options	<u>    </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>    </u> None	
13	Other financial or non-financial interests	<u>    </u> None	

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

  X   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:** 2021-03-22

**Your Name:** Eddy Cotte

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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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<b>Time frame: past 36 months</b>			
2	Grants or contracts from any entity (if not indicated in item #1 above).	___ None	
3	Royalties or licenses	___ None	
4	Consulting fees	___ None	
5		___ None	

	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	<u>    </u> None	
7	Support for attending meetings and/or travel	<u>    </u> None	
8	Patents planned, issued or pending	<u>    </u> None	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>    </u> None	
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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** MEUGNIER EMMANUELLE

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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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13	Other financial or non-financial interests	<u>    </u> None	

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Florent Joffre

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	ITERG	Employee of ITERG (Fats & Oils Institute) during the project

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

X  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:** 2021-03-22

**Your Name:** Hubert Vidal

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>      </u> None	
11	Stock or stock options	<u>      </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>      </u> None	
13	Other financial or non-financial interests	Pileje, Roquette	research collaborations with Pileje and Roquette without link with the present study.

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

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Jocelyne Draï

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>    </u> None	
13	Other financial or non-financial interests	<u>    </u> None	

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Laurie JOURMARD-CUBIZOLLES

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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<b>Time frame: past 36 months</b>			
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	
5	Payment or honoraria for	X None	

	lectures, presentations, speakers bureaus, manuscript writing or educational events		
6	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	

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X 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:** 2021-03-22

**Your Name:** Lemlih Ouchchane

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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7	Support for attending meetings and/or travel	<u>    </u> None	
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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Martine Laville

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Le Barz Mélanie

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Manon Lecomte

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Trauchessec Michel

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>      </u> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<u>      </u> None	
11	Stock or stock options	<u>      </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>      </u> None	
13	Other financial or non-financial interests	<u>      </u> None	

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

  X   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:** 2021-03-22

**Your Name:** Nadine Leconte

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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<b>Time frame: past 36 months</b>			
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3	Royalties or licenses	___ None	
4	Consulting fees	___ None	
5		___ None	

	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	<u>    </u> None	
7	Support for attending meetings and/or travel	<u>    </u> None	
8	Patents planned, issued or pending	<u>    </u> None	
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11	Stock or stock options	<u>    </u> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>    </u> None	
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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Stéphanie Lambert-Porcheron

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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## ICMJE DISCLOSURE FORM

**Date:** 2021-03-22

**Your Name:** Karène Bertrand

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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9	Participation on a Data Safety Monitoring Board or Advisory Board	___ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	___ None	
11	Stock or stock options	___ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	___ None	
13	Other financial or non-financial interests	ITERG	Employee of ITERG (Fats & Oils Institute)

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**ICMJE DISCLOSURE FORM**

Date: 2021-03-22

Your Name: *Loizon Emmanuelle*

**Manuscript Title:** Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

**Manuscript number (if known):** 146161-INS-CMED-RV-3

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*[Handwritten signature]*

**ICMJE DISCLOSURE FORM**

Date: 2021-03-22

Your Name: PESENTI Sandra

Manuscript Title: Milk polar lipids favorably alter circulating and intestinal ceramide and sphingomyelin species in postmenopausal women

Manuscript number (if known): 146161-INS-CMED-RV-3

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*T. E. E. E. E.*