

ICMJE DISCLOSURE FORM

Date: 11/23/2021

Your Name: Philip Mease

Manuscript Title: Treatment Responses in Patients With Psoriatic Arthritis Axial Disease According to HLA-B27 Status: An Analysis From the CorEvitas Psoriatic Arthritis/Spondyloarthritis Registry

Manuscript Number (if known): ACROR-21-163

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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3	Royalties or licenses <input checked="" type="checkbox"/> None <table border="1" data-bbox="383 281 1516 380"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							
4	Consulting fees <input type="checkbox"/> None <table border="1" data-bbox="383 527 1516 657"> <tr> <td data-bbox="383 527 954 657">AbbVie, Amgen, Boehringer Ingelheim, Bristol Myers Squibb, Eli Lilly, Galapagos, Gilead, GlaxoSmithKline, Janssen, Novartis, Pfizer, Sun, UCB</td> <td data-bbox="954 527 1516 657"></td> </tr> </table>	AbbVie, Amgen, Boehringer Ingelheim, Bristol Myers Squibb, Eli Lilly, Galapagos, Gilead, GlaxoSmithKline, Janssen, Novartis, Pfizer, Sun, UCB						
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9	Participation on a Data Safety Monitoring Board or Advisory Board <input checked="" type="checkbox"/> None <table border="1" data-bbox="383 1738 1516 1837"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							
10	Leadership or fiduciary role in other board, <input checked="" type="checkbox"/> None <table border="1" data-bbox="383 1919 1516 1953"> <tr><td></td><td></td></tr> </table>							

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	society, committee or 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: 11/23/2021

Your Name: Soumya D. Chakravarty, MD, PhD

Manuscript Title: Treatment Responses in Patients With Psoriatic Arthritis Axial Disease According to HLA-B27 Status: An Analysis From the CorEvitas Psoriatic Arthritis/Spondyloarthritis Registry

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Date: 11/23/2021

Your Name: Robert R. McLean, DSc, MPH

Manuscript Title: Treatment Responses in Patients With Psoriatic Arthritis Axial Disease According to HLA-B27 Status: An Analysis From the CorEvitas Psoriatic Arthritis/Spondyloarthritis Registry

Manuscript Number (if known): ACROR-21-163

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Date: 11/23/2021

Your Name: Taylor S Blachley

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Your Name: Toana Kawashima

Manuscript Title: Treatment Responses in Patients With Psoriatic Arthritis Axial Disease According to HLA-B27 Status: An Analysis From the CorEvitas Psoriatic Arthritis/Spondyloarthritis Registry

Manuscript Number (if known): ACROR-21-163

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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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
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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: 11/23/2021

Your Name: Iris Lin

Manuscript Title: Treatment Responses in Patients With Psoriatic Arthritis Axial Disease According to HLA-B27 Status: An Analysis From the CorEvitas Psoriatic Arthritis/Spondyloarthritis Registry

Manuscript Number (if known): ACROR-21-163

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11	Stock or stock options	<input type="checkbox"/> None	
		Own stock in Johnson & Johnson	
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	

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ICMJE DISCLOSURE FORM

Date: 11/24/2021

Your Name: Arthur Kavanaugh

Manuscript Title: Treatment Responses in Patients With Psoriatic Arthritis Axial Disease According to HLA-B27 Status: An Analysis From the CorEvitas Psoriatic Arthritis/Spondyloarthritis Registry

Manuscript Number (if known): ACROR-21-163

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4	Consulting fees	<input type="checkbox"/> None	
		Amgen, AbbVie, Pfizer, Novartis, Eli Lilly, Janssen, UCB	payments to me
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
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	
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Date: 12/1/2021

Your Name: Alexis Ogdie

Manuscript Title: Treatment Responses in Patients With Psoriatic Arthritis Axial Disease According to HLA-B27 Status: An Analysis From the CorEvitas Psoriatic Arthritis/Spondyloarthritis Registry

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		Amgen, AbbVie, Bristol Myers Squibb, Celgene, CorEvitas, Gilead, Happify Health, Janssen, Lilly, Novartis, Pfizer, and UCB	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Medical education companies including Medscape, Prime, and WebMD.	
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	
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 advocacy group, paid or unpaid	<input type="checkbox"/> None	
		Editorial board of Journal of Rheumatology	

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