Date: 05/05/21

Your Name: ALIER Julio

Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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 <u>current</u> <u>manuscript only</u>.

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		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)
		Time frame: Since the initia	al planning of the work
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>	None	
		Time frame: pas	t 36 months
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	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	a built the of the second s
	meetings and/or travel	oritin Athen contribution and an	in "nemical" painteurose que la fuerreza este estes
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	a tot or relification	Marke Mouth in the unit	ente a seculari gintestari sua stali une garatzare.
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
10			
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

X

3

### Date: 23/04/2021

## Your Name: **APTER Gisèle**

Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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		Time frame: past	36 months
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	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
10	services		
13	Other financial or non-	None	
	financial interests		

Date:	_10/05/2021_		
Your Nam	e:_DANION-O	GRILLIAT ANNE	

Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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		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	

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



Date:\_\_\_\_11/05/2021\_

Your Name: DELONG HELENE

Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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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)
_			
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert	None	
	testimony		
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	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	None	

Date:\_26/04/2021\_\_

Your Name:\_EUTROPE JULIEN\_

**Manuscript Title:** Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study

Manuscript number (if known): ID BJOG-20-2591

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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)
	Tin	ne frame: Since the initia	l planning of the work
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		Time frame: past	36 months
2	Grants or contracts	None	
	from any entity (if not		
	indicated in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria	None	
	for lectures, presentations, speakers		
	bureaus, manuscript		
	writing or educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued	None	
	or pending		
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory		
	Board		
10	Leadership or fiduciary	None	
	role in other board, society, committee or		
	advocacy group, paid or		
	unpaid		
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	None	

 ${\bf X}$  I certify that I have answered every question and have not altered the wording of any of the questions on this

form.

C 0

Date: Your Name:

Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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		Time frame: pas	t 36 months
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	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus, manuscript writing or educational events		
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	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	None	

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Date: 12	04	2					A
Your Name: /	. (	V	E	FOL	2/	ul	he

Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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122SSC	T	Time frame: Since the initia	al planning of the work
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5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events		
6	Payment for expert testimony	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		· · · · · · · · · · · · · · · · · · ·
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
12	materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

**X** I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Dr Julie LE FOLL Praticien Hospitalier N° RPPS : 10100300895 Service de psychiatrie de l'enfant et de l'adolescent CHU Bichat-Claude Bernard Policlinique Ney-Jenny Aubry 124 boulevard Ney - 75018 Paris FINESS : 750100232 Tél. : 01 40 25 89 67 Email : julie.le-foll@aphp.fr

 Date: 22th of April 2021\_\_\_\_\_

 Your Name: Anne-Catherine Rolland \_\_\_\_\_\_

 Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study

Manuscript number (if known): ID BJOG-20-2591

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	No time mint for this item.	Time frame: past	36 months
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	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment	None	
12	Receipt of equipment, materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Reims the 22th of April 2021

Pr AC Rolland

Date: 27/04/2021 Your Name: Dh. Stephamic, SRAD, SAINT-GILLES Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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2		Time frame: pas	t 36 months
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	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events 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	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	None	

5

Date:\_\_\_\_22/04/21\_\_\_\_

Your Name: Sutter-Dallay

Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
З	Royalties or licenses	None	
4	Consulting fees	None	

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

Date:	5 mai 207	и	
Your Name:	TEISHIER	Emmanuel	L
Manuscript Title: P			context as a trigger? A prospective case-control study

Manuscript number (if known): ID BJOG-20-2591

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		Time frame: pas	t 36 months
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	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
-	educational events		
6	Payment for expert testimony	None	
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7	Support for attending meetings and/or travel	None	
	meetings and/or traver		
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8	Patents planned, issued or	None	
ľ	pending		
	P		
9	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
12	materials, drugs, medical	NONE	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

ess

## Date: 26/04/2021 Your Name: Aurore THIERRY

Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	Time frame: pastX_NoneX_None	36 months
4	Consulting fees	XNone	

5	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	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	X_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone	
13	Other financial or non- financial interests	XNone	

Date: \_\_\_\_\_26/04/2021\_\_\_\_\_ Your Name: \_\_\_\_\_Sylvie VIAUX SAVELON\_\_\_\_\_ Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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)
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>	None	
		Time frame: past	36 months
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	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events 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	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	None	



Date:\_\_\_\_22.04.21\_

Your Name: Lauriane Vulliez-Coady

Manuscript Title: Pregnancy denial: a complex symptom with life context as a trigger? A prospective case-control study Manuscript number (if known): ID BJOG-20-2591

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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1	All support for the present		
T	All support for the present manuscript (e.g., funding,	None	
	provision of study materials,		
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	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

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

Lauriane Vulliez-Coady I certify that I have answered every question and have not altered the wording of any of the questions on this

form.

A