

ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Alessandra Bettiol

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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.

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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)
Time frame: Since the initial planning of the work			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	X None	
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, speakers bureaus, manuscript writing or educational events	X None	
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	

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: 22nd April 2021

Your Name: Maria Letizia Urban

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Lorenzo Dagna

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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3	Royalties or licenses	X None	
4	Consulting fees	GSK	

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6	Payment for expert testimony	X None	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Vincent Cottin

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Franco Franceschini

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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3	Royalties or licenses	X None	
4	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None	
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	
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13	Other financial or non-financial interests	X None	

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Stefano Del Giacco

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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4	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None	
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 AstraZeneca	Advisory board
		X GSK	Advisory board
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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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Franco Schiavon

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Thomas Neumann

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None	
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7	Support for attending meetings and/or travel	X None	
8	Patents planned, issued or pending	X None	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Giuseppe Lopalco

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Pavel Novikov

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Chiara Baldini

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Carlo Lombardi

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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Date: 22nd April 2021

Your Name: Alvise Berti

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

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Time frame: Since the initial planning of the work			
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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, speakers bureaus, manuscript writing or educational events	X None	
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	

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: 22nd April 2021

Your Name: Federico Alberici

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Marco Folci

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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8	Patents planned, issued or pending	X None	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Renato Alberto Sinico

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Luca Quartuccio

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Claudio Lunardi

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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4	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None	
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	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Paola Parronchi

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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Time frame: past 36 months			
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3	Royalties or licenses	X None	
4	Consulting fees	X GSK	consultation honoraria
		X Novartis	consultation honoraria

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None	
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	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Frank Moosig

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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4	Consulting fees	X None	

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7	Support for attending meetings and/or travel	X None	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Georgina Espígol-Frigolé

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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Time frame: past 36 months			
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Jan Schroeder

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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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 AstraZeneca X GSK	Advisory board Advisory board
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	X None	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Anna Luise Kernder

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Sara Monti

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Ettore Silvagni

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	X None	
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, speakers bureaus, manuscript writing or educational events	X None	
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	

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: 22nd April 2021

Your Name: Claudia Crimi

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Francesco Cinetto

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Paolo Fraticelli

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Dario Roccatello

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Angelo Vacca

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Aladdin J Mohammad

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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8	Patents planned, issued or pending	X None	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Bernhard Hellmich

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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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 GSK	honoraria for participation in advisory boards and for lectures

		X Roche	honoraria for participation in advisory boards and for lectures
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None	
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	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Maxime Samson

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Elena Bargagli

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Jan Willem Cohen Tervaert

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Camillo Ribi

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Davide Fiori

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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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	

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: 22nd April 2021

Your Name: Federica Bello

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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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Time frame: past 36 months			
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3	Royalties or licenses	X None	
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None	
6	Payment for expert testimony	X None	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Filippo Fagni

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Luca Moroni

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Giuseppe Alvisè Ramirez

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Mouhamad Nasser

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Chiara Marvisi

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Paola Toniati

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Davide Firinu

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Roberto Padoan

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Allyson Egan

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Benjamin Seeliger

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Florenzo Iannone

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Carlo Salvarani

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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Time frame: past 36 months			
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3	Royalties or licenses	X None	
4	Consulting fees	X None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	X None	
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	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: David Jayne

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

Manuscript number (if known): _____

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3	Royalties or licenses	X None	
4	Consulting fees	X Astra-Zeneca, Aurinia, BMS,	honoraria

		Boehringer-Ingelheim, Chemocentryx, Chugai, CSL, GSK, Infla-RX, Janssen, Novartis, Roche/Genentech, Takeda and Vifor	
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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Domenico Prisco

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Augusto Vaglio

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

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4	Consulting fees	X GSK	honoraria outside the current work

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ICMJE DISCLOSURE FORM

Date: 22nd April 2021

Your Name: Giacomo Emmi

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

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Date: 22nd April 2021

Your Name: Simone Negrini

Manuscript Title: Mepolizumab for Eosinophilic Granulomatosis with Polyangiitis (EGPA): a European multicenter observational study

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