

ICMJE DISCLOSURE FORM

Date: 11/29/2022

Your Name: Benjamin Maasoumy

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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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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								
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4	Consulting fees	<input type="checkbox"/> None	
		AbbVie	
		Luvos	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		AbbVie	lecture
		Norgine	lecture
		Gilead	Lecture
		Roche	Lecture
		MSD	Lecture
Falk	Lecture		
Fujirebio	Lecture		
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		Gilead	
		AbbVie	
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 checked="" type="checkbox"/> None	

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11	Stock or stock options	<input type="checkbox"/> None	
		BionTech	<5000€
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:

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Date: 11/22/2022

Your Name: Patrick INGILIZ

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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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.

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Date: 11/23/2022

Your Name: Dr. Spinner, Christoph D.

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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Date: 11/23/2022

Your Name: Christiane Cordes

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

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Carlin

23. M. 2022

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Date: 11/23/2022

Your Name: Hans-Jürgen Stellbrink

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

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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: 11/28/2022

Your Name: Julian Schulze zur Wiesch

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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: 11/26/2022

Your Name: Stephan M. Schneeweiss

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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ICMJE DISCLOSURE FORM

Date: 11/30/2022

Your Name: Katja Deterding

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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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: 11/22/2022

Your Name: Tobias Müller

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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: 11/22/2022

Your Name: Julia Kahlhöfer

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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: 11/26/2022

Your Name: Petra Dörge

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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ICMJE DISCLOSURE FORM

Date: 11/23/2022

Your Name: Maria von Karpowitz

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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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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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							

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: 11/30/2022

Your Name: Michael Manns

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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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Time frame: Since the initial planning of the work									
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4	Consulting fees	<input type="checkbox"/> None	
		Assembly Bio, Bristol Myers Squibb, Falk Pharma, Gilead, Merck (MSD)	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Abbvie, Bristol Myers Squibb, Falk Pharma, Gilead, Merck (MSD)	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		Abbvie, Bristol Myers Squibb, Falk Pharma, Gilead, Merck (MSD)	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
		Falk Pharma, Gilead, Merck (MSD)	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	

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

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Hannover, 30 Nov 2022


 Prof. Dr. Michael P. Manns

ICMJE DISCLOSURE FORM

Date: 11/23/2022

Your Name: Heiner Wedemeyer

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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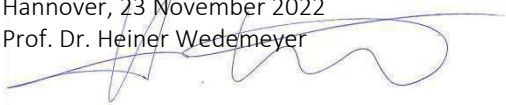
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		Abbvie, Aligos, Altimmune, Biotest, BMS, BTG, Dicerna, Enanta, Gilead, Janssen, Merck/MSD, MYR GmbH, Roche, Vir Biotechnology	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Abbvie, Biotest, Gilead, Merck/MSD	
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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 type="checkbox"/> None	
		Abbvie, Altimune, BMS, Gilead, Janssen, Merck/MSD, MYR GmbH, Novartis, Vir Biotechnology	Clinical Trial Principal Investigator

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.

Hannover, 23 November 2022
 Prof. Dr. Heiner Wedemeyer



ICMJE DISCLOSURE FORM

Date: 11/28/2022

Your Name: Markus Cornberg

Manuscript Title: Sofosbuvir plus velpatasvir for 8 weeks in patients with acute hepatitis C: The HepNet acute HCV V study

Manuscript Number (if known): JHEPR-D-22-00684

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		Gilead Sciences	Payments were made to me
		Abbvie, MSD Sharp&Dohme,	
		AiCuris, GSK, Roche	
		Novartis, SOBI	
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		Gilead Sciences, Abbvie, MSD Sharp&Dohme	Payments were made to me
		Falk	
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		Abbvie	
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