ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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1. Identifying information.

2. The work under consideration for publication.

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   This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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.Other: Anything not covered under the previous three boxes

.Pending: The patent has been filed but not issued

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.Licensed: The patent has been licensed to an entity, whether earning royalties or not

.Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Per
2. Surname (Last Name) Aspenberg
3. Date 14-October-2015
4. Are you the corresponding author? ☑ Yes ☐ No

Corresponding Author’s Name
Fernando Marin

5. Manuscript Title
Effects of teriparatide versus risedronate on pertrochanteric hip fracture recovery: 26-week results of a randomized active-controlled, double-blind clinical trial

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☑ Yes ☐ No

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest? ☑ Yes ☐ No

If yes, please fill out the appropriate information below.

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☑ Yes ☐ No
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Section 6. Disclosure Statement

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Dr. Aspenberg reports grants from Eli Lilly, outside the submitted work.

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<tbody>
<tr>
<td>Lars</td>
<td>Borris</td>
<td>20-October-2015</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author?  
   ☑ Yes  
   ☐ No  

Corresponding Author’s Name: Marin Fernando

5. Manuscript Title  
   Effects of teriparatide versus risedronate on pertrochanteric hip fracture recovery: 26-week results of a randomized active-controlled, double-blind clinical trial

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Are there any relevant conflicts of interest?  
   ☑ Yes  
   ☐ No

## Section 3. Relevant financial activities outside the submitted work.

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## Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Borris has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  JOSE RAMON
2. Surname (Last Name)  CAEIRO
3. Date  17-October-2015

4. Are you the corresponding author?  Yes  No
   Corresponding Author’s Name  FERNANDO MARIN

5. Manuscript Title
   Effects of teriparatide versus risedronate on pertrochanteric hip fracture recovery: 26-week results of a randomized active-controlled, double-blind clinical trial

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<td>Lilly</td>
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<td>Consultor and speaker</td>
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<td>Amgem</td>
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Dr. CAIRO reports other from Lilly, other from Amgem, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name) Pradnya
2. Surname (Last Name) Kulkarni
3. Date 26-October-2015
4. Are you the corresponding author? ☐ Yes ☑ No

Corresponding Author's Name Fernando Marin

5. Manuscript Title
Effects of teriparatide versus risedronate on pertrochanteric hip fracture recovery: 26-week results of a randomized active-controlled, double-blind clinical trial

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Are there any relevant conflicts of interest? ☑ Yes ☐ No

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<tr>
<td>Eli Lilly</td>
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<td>Trilogy Writing &amp; Consulting contracted by Eli Lilly for medical writing support</td>
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Dr. Kulkarni reports other from Eli Lilly, during the conduct of the study.

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### Section 1.
#### Identifying Information

1. Given Name (First Name)  
   COSTANTINO

2. Surname (Last Name)  
   CORRADINI

3. Date  
   15-October-2015

4. Are you the corresponding author?  
   ✔ No

5. Manuscript Title  
   Effects of teriparatide versus risedronate on pertrochanteric hip fracture recovery: 26-week results of a randomized active-controlled, double-blind clinical trial

6. Manuscript Identifying Number (if you know it)  
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#### Corresponding Author's Name
   FERNANDO MARIN

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Dr. CORRADINI has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Frede

2. Surname (Last Name)  
   Frihagen

3. Date  
   07-October-2015

4. Are you the corresponding author?  
   ☑ Yes  
   No

   Corresponding Author’s Name  
   Fernando Marin

5. Manuscript Title  
   Effects of teriparatide versus risedronate on pertrochanteric hip fracture recovery: 26-week results of a randomized active-controlled, double-blind clinical trial

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Are there any relevant conflicts of interest?  
   ☑ Yes  
   No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the "X" button.

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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest?  
   ☑ Yes  
   No

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**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
☐ Yes  ✔ No

**Section 5. Relationships not covered above**

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Dr. Frihagen reports grants from Eli Lilly, during the conduct of the study; personal fees from Eli Lilly, grants from Takeda, grants from Amgen, outside the submitted work.

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<td>4. Are you the corresponding author?</td>
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<td>Corresponding Author’s Name</td>
<td>FERNANDO MARIN</td>
</tr>
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Are there any relevant conflicts of interest?  ☑ No

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Dr. GARCIA-HERNANDEZ has nothing to disclose.

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   JORGE

2. Surname (Last Name)  
   MALOUF-SIERRA

3. Date  
   07-October-2015

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Section 1. Identifying Information

1. Given Name (First Name)  Søren
2. Surname (Last Name)  Overgaard
3. Date  13-October-2015
4. Are you the corresponding author?  Yes  No

Corresponding Author’s Name  Fernando Marin

5. Manuscript Title
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Dr. Overgaard reports grants from Biomet, DePuy, Protesekompagniet, grants from Eli Lilly, outside the submitted work.

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Section 1. Identifying Information

1. Given Name (First Name)  Kyriakos
2. Surname (Last Name)  Papavasiliou
3. Date  15-October-2015
4. Are you the corresponding author?  Yes  No  ✔
5. Manuscript Title
   Effects of teriparatide versus risedronate on pertrochanteric hip fracture recovery: 26-week results of a randomized active-controlled, double-blind clinical trial
6. Manuscript Identifying Number (if you know it)
   Corresponding Author’s Name  Fernando Marin

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Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No  ✔
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Dr. Papavasiliou has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
ERIC

2. Surname (Last Name)  
LESPESSAILLES

3. Date  
14-October-2015

4. Are you the corresponding author?  
Yes [ ]

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. Given Name (First Name)  
   **FERNANDO**

2. Surname (Last Name)  
   **MARIN**

3. Date  
   **18-October-2015**

4. Are you the corresponding author?  
   ✔ Yes  
   No

5. Manuscript Title  
   Effects of teriparatide versus risedronate on pertrochanteric hip fracture recovery: 26-week results of a randomized active-controlled, double-blind clinical trial

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Are there any relevant conflicts of interest?  
✔ Yes  
No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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<tr>
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<td>✔</td>
<td>Sponsor of this clinical Trial</td>
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<tr>
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## Section 1. Identifying Information

1. **Given Name (First Name)**
   Helmut

2. **Surname (Last Name)**
   Petto

3. **Date**
   08-October-2015

4. **Are you the corresponding author?**
   - Yes
   - No
   ✔ No

5. **Manuscript Title**
   Effects of teriparatide versus risedronate on pertrochanteric hip fracture recovery: 26-week results of a randomized active-controlled, double-blind clinical trial

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   Corresponding Author’s Name
   FERNANDO MARIN

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- Yes  ✔ Yes  
- No  

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**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Jan

2. Surname (Last Name)  
   Stepan

3. Date  
   14-October-2015

4. Are you the corresponding author?  
   ✔ Yes  
   ☐ No

Corresponding Author's Name  
Fernando Marin

5. Manuscript Title  
Effects of teriparatide versus risedronate on pertrochanteric hip fracture recovery: 26-week results of a randomized active-controlled, double-blind clinical trial

6. Manuscript Identifying Number (if you know it)

---

**Section 2. The Work Under Consideration for Publication**

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
✔ Yes  
☐ No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

<table>
<thead>
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<td>Institute of Rheumatology, Prague</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>✔</td>
<td>Payment for treating patients included into the study</td>
</tr>
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**Section 3. Relevant financial activities outside the submitted work.**

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest?  
✔ Yes  
☐ No

If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
<th>Grant?</th>
<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
<th>Other?</th>
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<td>Eli Lilly</td>
<td>☐</td>
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<td>Invited speaker</td>
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</table>
Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  

☐ Yes  ✔ No

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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✔ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Stepan reports other from Institute of Rheumatology, Prague, during the conduct of the study; personal fees from Eli Lilly, outside the submitted work.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.