

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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4. Intellectual Property.

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

5. Relationships not covered above.

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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)
Ralf

2. Surname (Last Name)
Kuja-Halkola

3. Date
16-April-2020

4. Are you the corresponding author?

☐ Yes☒ No

Corresponding Author's Name
Anders Brüggemann

5. Manuscript Title

Body mass index differentially moderates heritability of clinically defined hip and knee osteoarthritis in women and men: A cohort study of 24,012 Swedish twin pairs

6. Manuscript Identifying Number (if you know it)

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

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

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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Dr. Kuja-Halkola has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Nils	2. Surname (Last Name) Hailer	3. Date 16-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Anders Brüggemann
5. Manuscript Title Body mass index differentially moderates heritability of clinically defined hip and knee osteoarthritis in women and men: A cohort study of 24,012 Swedish twin pairs		
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.

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

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Waldemar Link GmbH, Hamburg, Germany	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Zimmer Biomet, Warsaw, Indiana, USA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Heraeus GmbH, Wehrheim, Germany	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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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Dr. Hailer reports grants and personal fees from Waldemar Link GmbH, Hamburg, Germany, personal fees from Zimmer Biomet, Warsaw, Indiana, USA, personal fees from Heraeus GmbH, Wehrheim, Germany, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Anders

2. Surname (Last Name)
Brüggemann

3. Date
04-May-2020

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

5. Manuscript Title
Body mass index differentially moderates heritability of clinically defined hip and knee osteoarthritis in women and men: A cohort study of 24,012 Swedish twin pairs

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

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

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Zimmer Biomet	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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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Dr. Brüggemann reports grants from Zimmer Biomet, outside the submitted work; .

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)

Karl

2. Surname (Last Name)

Michaëlsson

3. Date

18-April-2020

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Anders Brüggemann

5. Manuscript Title

Body mass index differentially moderates heritability of clinically defined hip and knee osteoarthritis in women and men: A cohort study of 24,012 Swedish twin pairs

6. Manuscript Identifying Number (if you know it)

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Dr. Michaëlsson has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Nancy L.	2. Surname (Last Name) Pedersen	3. Date 20-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Anders Brüggeman
5. Manuscript Title Body mass index differentially moderates heritability of clinically defined hip and knee osteoarthritis in women and men: A cohort study of 24,012 Swedish twin pairs		
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Dr. Pedersen has nothing to disclose.

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