

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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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)

Lisette

2. Surname (Last Name)

Blumenthal

3. Date

14-March-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Graeme Meintjes

5. Manuscript Title

Prednisone for Prevention of Paradoxical Tuberculosis- Associated IRIS

6. Manuscript Identifying Number (if you know it)

18-00762

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? Yes No

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Dr. Blumenthal has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Jozefien	2. Surname (Last Name) Buyze	3. Date 28-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graeme Meintjes
5. Manuscript Title Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS		
6. Manuscript Identifying Number (if you know it) 18-00762		

Section 2. The Work Under Consideration for Publication

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Dr. Buyze 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)
Robert

2. Surname (Last Name)
Colebunders

3. Date
26-March-2018

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Graeme Meintjes

5. Manuscript Title
Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS

6. Manuscript Identifying Number (if you know it)
18-00762

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Dr. Colebunders has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Amanda	2. Surname (Last Name) Jackson	3. Date 07-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graeme Meintjies
5. Manuscript Title Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS		
6. Manuscript Identifying Number (if you know it) 18-00762		

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Ms. Jackson has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name) Lutgarde	2. Surname (Last Name) Lynen	3. Date 26-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graeme Meintjes
5. Manuscript Title Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS		
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Dr. Lynen has nothing to disclose.

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1. Given Name (First Name) Gary	2. Surname (Last Name) Maartens	3. Date 16-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graeme Meintjes
5. Manuscript Title Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS		
6. Manuscript Identifying Number (if you know it) 18-00762		

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

Section 4. Intellectual Property -- Patents & Copyrights

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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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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. Maartens has nothing to disclose.

Evaluation and Feedback

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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) Graeme

2. Surname (Last Name) Meintjes

3. Date 26-March-2018

4. Are you the corresponding author? Yes No

5. Manuscript Title
Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS

6. Manuscript Identifying Number (if you know it)
18-00762

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.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
South African government (Medical Research Council, National Research Foundation and Department of Science and Technology)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wellcome Trust	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
European and Developing Countries Clinical Trials Partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Are there any relevant conflicts of interest? Yes No

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Dr. Meintjes reports grants from South African government (Medical Research Council, National Research Foundation and Department of Science and Technology), Wellcome Trust, and European and Developing Countries Clinical Trials Partnership during the conduct of the study.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Amatheni (Amy)	2. Surname (Last Name) Nair	3. Date 28-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graeme Meintjes
5. Manuscript Title Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS		
6. Manuscript Identifying Number (if you know it) 18-00762		

Section 2. The Work Under Consideration for Publication

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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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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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Nair 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) Raffaella	2. Surname (Last Name) Ravinetto	3. Date 27-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graeme Meintjes
5. Manuscript Title Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS		
6. Manuscript Identifying Number (if you know it) 18-00762		

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Ravinetto 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) Charlotte	2. Surname (Last Name) Schutz	3. Date 27-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graeme Meintjes
5. Manuscript Title Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS		
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Cari	2. Surname (Last Name) Stek	3. Date 27-February-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graeme Meintjes
5. Manuscript Title Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS		
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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) Friedrich	2. Surname (Last Name) Thienemann	3. Date 14-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graeme Meintjes
5. Manuscript Title Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS		
6. Manuscript Identifying Number (if you know it) 18-00762		

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

Section 4. Intellectual Property -- Patents & Copyrights

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

ICMJE Form for Disclosure of Potential Conflicts of Interest

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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. Thienemann has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Harry	2. Surname (Last Name) van Loen	3. Date 15-March-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Graeme Meintjes
5. Manuscript Title Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS		
6. Manuscript Identifying Number (if you know it) 18-00762		

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

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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Mr. van Loen 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)
Robert

2. Surname (Last Name)
Wilkinson

3. Date
20-August-2018

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Graeme Meintjes

5. Manuscript Title
Prednisone for Prevention of Paradoxical Tuberculosis-Associated IRIS

6. Manuscript Identifying Number (if you know it)
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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.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Wellcome	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
European and Developing Countries Clinical Trials Partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Research Councils UK (RCUK)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cancer Research UK (CRUK)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Francis Crick Institute	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Wilkinson reports grants from Wellcome, European and Developing Countries Clinical Trials Partnership, Research Councils UK (RCUK), Cancer Research UK (CRUK), and Francis Crick Institute during the conduct of the study.

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