ICMJE DISCLOSURE FORM

Date: 2023-03-05
Your Name: Daniel Neureiter, A.o.Universitätsprofessor, PD, Dr. med. M.A
Manuscript Title: The future is here – targeted therapies are coming of age in biliary tract cancers
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 <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

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.	_XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_XNone	
3	Royalties or licenses	_XNone	
4	Consulting fees	None	D.N. received honoraria for advisory function of Boehringer Ingelheim and Lilly.

5	5 Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
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Daniel Neureiter received honoraria for advisory function of Boehringer Ingelheim and Lilly

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: 2023-03-05
Your Name: Matthias Ocker, Universitätsprofessor, PD, Dr. med
Manuscript Title: The future is here – targeted therapies are coming of age in biliary tract cancers
Manuscript number (if known):

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		Time frame: past	36 months
2	Grants or contracts from	_XNone	
	any entity (if not indicated		
3	in item #1 above).	V News	
3	Royalties or licenses	_XNone	
4	Consulting fees	_XNone	

6	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert	XNoneXNone
	testimony	
7	Support for attending meetings and/or travel	XNone
8	Patents planned, issued or pending	XNone
9	Participation on a Data	XNone
	Safety Monitoring Board or Advisory Board	
10	Leadership or fiduciary role in other board, society, committee or advocacy	XNone
11	group, paid or unpaid Stock or stock options	XNone
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone
13	Other financial or non- financial interests	XNone
	ase summarize the above co	nflict of interest in the following box: no conflict of interest.

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.