

ICMJE DISCLOSURE FORM

Date: 2022/3/2

Your Name: Sifan Liu

Manuscript Title: Sarcopenia is associated with poor clinical outcomes in patients with inflammatory bowel disease: a prospective study

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 current manuscript only.

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3	Royalties or licenses	<input checked="" type="checkbox"/> None	
4	Consulting fees	<input checked="" type="checkbox"/> None	

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11	Stock or stock options	<input checked="" type="checkbox"/> None	
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 summarize the above conflict of interest in the following box:

None

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: 2022/3/2

Your Name: Xueli Ding

Manuscript Title: Sarcopenia is associated with poor clinical outcomes in patients with inflammatory bowel disease: a prospective study

Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: FEBRUARY 27, 2022

Your Name: GIUSEPPE MAGGIORE

Manuscript Title: Sarcopenia is associated with poor clinical outcomes in patients with inflammatory bowel disease: a prospective study

Manuscript number (if known): _____

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4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety Monitoring Board or Advisory Board		Albireo PFIC and cholestatic liver disease Advisory board, January 2022
			Alexion Advisory Board Wilson - Webmeeting december 2021
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non-financial interests	None	

Please summarize the above conflict of interest in the following box:

Participation on Albireo PFIC and cholestatic liver disease Advisory board, January 2022; Alexion Advisory Board Wilson - Webmeeting december 2021

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: 2022/2/25
 Your Name: Andrea Pietrobattista
 Manuscript Title: Sarcopenia is associated with poor clinical outcomes in patients with inflammatory bowel disease: a prospective study
 Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/2/25
 Your Name: Sanjaya K. Satapathy
 Manuscript Title: Sarcopenia is associated with poor clinical outcomes in patients with inflammatory bowel disease: a prospective study
 Manuscript number (if known): _____

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ICMJE DISCLOSURE FORM

Date: 2022/3/2

Your Name: Zibin Tian

Manuscript Title: Sarcopenia is associated with poor clinical outcomes in patients with inflammatory bowel disease: a prospective study

Manuscript number (if known): _____

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Date: 2022/3/2

Your Name: Xue Jing

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