Date: 18<sup>th</sup> April 2021 Your Name: Clovis Nkoke

Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between

patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry

Manuscript number (if known): CDT-21-112.

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 they relate to the <u>current manuscript only</u>.

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		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		

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	XNone	
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	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	
Г	ase summarize the above co	onflict of interest in the fol	lowing box:

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.

Date: 15/04/2021

Your Name: Albertino Damasceno

Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between

patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry

Manuscript number (if known): CDT-21-112

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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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
1	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert		
	testimony	None	
	10000000		
7	Support for attending	None	
	meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
10	Advisory Board		
10	Leadership or fiduciary role in other board, society, committee or advocacy	None	
	group, paid or unpaid		
11	Stock or stock options	None	
	a stock options	None	
2	Receipt of equipment,	None	
	materials, drugs, medical	Hone	
	writing, gifts or other		
	services		
.3	Other financial or non-	None	
	financial interests		

one		

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

Date: 4/16/2021

**Your Name: Christopher Edwards** 

Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between

patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry

Manuscript number (if known): CDT-21-112

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)  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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	Abbott Laboratories Amgen Inc. Celyad Cirius Therapeutics Inc. Sanofi Roche Diagnostics Inc. Trevena Inc.	

		Ventrix	
		WindtreeTherapeutics Inc.	
3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	Nicos	
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
/	meetings and/or travel	Notie	
	ineetings and/or traver		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

Christopher Edwards reports grants from Abbott Laboratories, Amgen Inc., Celyad, Cirius Therapeutics Inc., Sanofi, Roche Diagnostics Inc., Trevena Inc., Ventrix, and WindtreeTherapeutics Inc.

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.

Date: 4/16/2021

Your Name: Beth Davison

Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between

patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry

Manuscript number (if known): CDT-21-112

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	Abbott Laboratories Amgen Inc. Celyad Cirius Therapeutics Inc. Sanofi Roche Diagnostics Inc. Trevena Inc.	

		Ventrix	
		WindtreeTherapeutics Inc.	
3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	Nicos	
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
/	meetings and/or travel	Notie	
	ineetings and/or traver		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

Beth Davison reports grants from Abbott Laboratories, Amgen Inc., Celyad, Cirius Therapeutics Inc., Sanofi, Roche Diagnostics Inc., Trevena Inc., Ventrix, and WindtreeTherapeutics Inc.

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.

Date: 4/16/2021

**Your Name: Gad Cotter** 

Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between

patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry

Manuscript number (if known): CDT-21-112

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.

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
			P
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article processing charges, etc.)		
	No time limit for this item.		
	No time mint for this item.		
		Time frame: past	36 months
2	Grants or contracts from	Abbott Laboratories	
	any entity (if not indicated	Amgen Inc.	
	in item #1 above).	Celyad	
		Cirius Therapeutics Inc.	
		Sanofi	
		Roche Diagnostics Inc.	
		Trevena Inc.	

		Ventrix	
		WindtreeTherapeutics Inc.	
3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	Nicos	
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
/	meetings and/or travel	Notie	
	ineetings and/or traver		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		

Gad Cotter reports grants from Abbott Laboratories, Amgen Inc., Celyad, Cirius Therapeutics Inc., Sanofi, Roche Diagnostics Inc., Trevena Inc., Ventrix, and WindtreeTherapeutics Inc.

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.

Date:16/04/2021_			
Your Name:_Mahmoud L	J. Sani		
Manuscript Title:	Differences in socio-demog	graphic and risk factor profile, clinical presentation and outcom	es
between patients with a	nd without RHD heart failure in	n Sub-Saharan Africa: results from the THESUS-HF registry_	
Manuscript nui	nber (if known):	CDT-21-112.	
related to the content of	your manuscript. "Related" me	all relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment	

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses		

4	Consulting fees	None	
-	Comparing rees		
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
	G ,		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Plea	se summarize the above co	nflict of interest in the f	ollowing box:

No conflict of interest in all the items		

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.

Date: 19<sup>th</sup> April 2021 Your Name: Lauren Gaeta

Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between

patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry

Manuscript number (if known): CDT-21-112.

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		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)
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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		

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	X None	
	testimony	XNone	
	,		
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		
12	Other financial or non-	V. Nama	
13	financial interests	XNone	
	Tillalicial lifterests		
Plea	se summarize the above co	nflict of interest in the fol	lowing box:
N	lo conflicts of interest.		

\_\_X\_I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Please place an "X" next to the following statement to indicate your agreement:

Da	ite:27 <sup>th</sup> April, 2021						
Yo	ur Name: Okechukwu S Oga	ıh					
	outcomes between par the THESUS-HF regi	tients with and without RHI stry	ohic and risk factor profile, clinical presentation and D heart failure in Sub-Saharan Africa: results from				
	Manuscript number (if known): In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are						
re	lated to the content of your	manuscript. "Related" me	eans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment				
•	•	•	. If you are in doubt about whether to list a				
	lationship/activity/interest,		•				
	e following questions apply anuscript only.	to the author's relationsh	ips/activities/interests as they relate to the current				
Th	e author's relationships/act	ivities/interests should be	defined broadly. For example, if your manuscript pertains				
			e all relationships with manufacturers of antihypertensive				
m	edication, even if that medic	cation is not mentioned in	the manuscript.				
	State HA balance and all a						
	-		ed in this manuscript without time limit. For all other item				
the time frame for disclosure is the past 36 months.  Name all entities with Specifications/Comments							
		whom you have this relationship or indicate none (add rows as	(e.g., if payments were made to you or to your institution)				
		needed) Time frame: Since the initia	al planning of the work				
		1	in planning of the work				
1	All support for the present	None					
	manuscript (e.g., funding, provision of study materials,						
	medical writing, article						
	processing charges, etc.)						
	No time limit for this item.						
		Time frame: pas	t 36 months				
2	Grants or contracts from	None					
	any entity (if not indicated						
2	in item #1 above).						
3	Royalties or licenses	None					
4	Consulting fees	None					

5

Payment or honoraria for

lectures, presentations, speakers bureaus,

None

	manuscript writing or educational events	
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	NO
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	NO
11	Stock or stock options	NO
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	No
13	Other financial or non- financial interests	None

I, Dr Okechukwu S Ogah does not have any conflicts of interest

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.

Dr Okechukwu S Ogah

Date:	Apri	l 22,	2021

Your Name:\_MONDO CHARLES KIIZA\_\_\_

Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry.

Manuscript number (if known): CDT-21-112

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

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

None		

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.

Date: 28/04/21 Your Name: Dike Ojji

Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry

Manuscript number	(if Incorporate
ivianuscript number (	IT KNOWN):

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
_	0 16 11		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

None		

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.

Date:_April 27 <sup>th</sup> , 2021
Your Name:Ahmed Suliman_
Manuscript Title:_ Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between
patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry
Manuscript number (if known):_ CDT-21-112

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

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

None		

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.

**Date:** 29/4/2021

Your Name: Gerald Yonga

Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between

patients with and without RHD heart failure Manuscript number (if known): CDT-21-112

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.

		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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
_	educational events	None	
6	Payment for expert	None	
	testimony		
7	Support for attending	None	
,	meetings and/or travel	Notic	
8	Patents planned, issued or	None	
	pending		
9	Safety Monitoring Board or	None	
	Advisory Board		
10	in other board, society,	None	
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

No conflicts 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.

Date: 29/04/2021

Your Name: Serigne Abdou BA

Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between

patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry

Manuscript number (if known): CDT-21-112\_\_\_\_\_\_

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>.

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	NONE	
3	Royalties or licenses	NONE	
4	Consulting fees	NONE	

5	Payment or honoraria for	NONE	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	NONE	
	testimony		
7	Support for attending meetings and/or travel	NONE	
8	Patents planned, issued or pending	NONE	
9	Participation on a Data	NONE	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	NONE	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	NONE	
12	Receipt of equipment, materials, drugs, medical	NONE	
	writing, gifts or other services		
10		1.0015	
13	Other financial or non-	NONE	
	financial interests		

I have 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.

Date:_15/04/2021
Your Name:Anastase Dzudie
Manuscript Title: Differences in socio-demographic and risk factor profile, clinical presentation and outcomes
between patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-HF registry
Manuscript number (if known):_ CDT-21-112_

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.

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		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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
-	Comment for attending	News	
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	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	None	
	financial interests		

NONE			

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.

Date:_15/04/2021
Your Name: Karen Sliwa
Manuscript Title:
Manuscript number (if known):_ Differences in socio-demographic and risk factor profile, clinical presentation and outcomes between patients with and without RHD heart failure in Sub-Saharan Africa: results from the THESUS-H registry_
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</u> <u>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.

		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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

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	None			
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:				
'\	ONE				

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.