

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 4. Intellectual Property.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Mingwei	2. Surname (Last Name) He	3. Date 02-September-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yan Chen
5. Manuscript Title Changes in disease activity, disability and mortality of inflammatory arthritis in in the new millennium compared with the 10 years before		
6. Manuscript Identifying Number (if you know it) AOJ-18-156		

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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. He 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) Qingjun	2. Surname (Last Name) Wei	3. Date 02-September-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yan Chen
5. Manuscript Title Changes in disease activity, disability and mortality of inflammatory arthritis in in the new millennium compared with the 10 years before		
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Dr. Wei has nothing to disclose.

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1. Given Name (First Name) Shan	2. Surname (Last Name) Lao	3. Date 02-September-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yan Chen
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Dr. Lao has nothing to disclose.

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1. Given Name (First Name) William	2. Surname (Last Name) Lu	3. Date 02-September-2018
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Yan Chen
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Dr. Lu 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)  
Yan

2. Surname (Last Name)  
Chen

3. Date  
02-September-2018

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Changes in disease activity, disability and mortality of inflammatory arthritis in in the new millennium compared with the 10 years before

6. Manuscript Identifying Number (if you know it)  
AOJ-18-156

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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
National Natural Science Foundation of China (NSFC 81601930)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Natural Science Foundation of Guangxi Province (2017GXNSFAA198318)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Natural Science Foundation of Guangxi Province (2016GXNSFBA380007)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Dr. Chen reports grants from National Natural Science Foundation of China(NSFC 81601930), grants from Natural Science Foundation of Guangxi Province (2017GXNSFAA198318), grants from Natural Science Foundation of Guangxi Province (2016GXNSFBA380007), outside the submitted work; .Dr. Chen reports grants from National Natural Science Foundation of China(NSFC 81601930), grants from Natural Science Foundation of Guangxi Province (2017GXNSFAA198318), grants from Natural Science Foundation of Guangxi Province (2016GXNSFBA380007), outside the submitted work .

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