## ICMJE DISCLOSURE FORM

Date: December 27<sup>th</sup> 2022

Your Name: Feroz Jadhakhan

Manuscript Title: Outcomes of surgical intervention for degenerative lumbar spondylolisthesis: a comparative analysis of different surgical fixation techniques. Manuscript number (if known): JSS-22-24

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.

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.) <b>No time limit for this item.</b>	Amplitude Clinical	Partial funding support for this study was provided for Research Fellow time (FK) to analyse and present the data by Amplitude Clinical — the company that provides the platform hosting the British Spine Registry.
		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	XNone	
5	Payment or honoraria for	X None	
0	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	X None	
0	testimony		
7	Support for attending	X_None	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
0	Deuticiantica en e Dete	V Neve	
9	Participation on a Data Safety Monitoring Board or	_XNone	
	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		

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

Partial funding support for this study was provided for Research Fellow time (FK) to analyse and present the data by Amplitude Clinical — the company that provides the platform hosting the British Spine Registry.

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.

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### Date: December 27<sup>th</sup> 2022

### Your Name: David Bell

Manuscript Title: Outcomes of surgical intervention for degenerative lumbar spondylolisthesis: a comparative analysis of different surgical fixation techniques Manuscript number (if known): JSS-22-24

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

### Date: December 27<sup>th</sup> 2022

#### Your Name: Alison Rushton

Manuscript Title: Outcomes of surgical intervention for degenerative lumbar spondylolisthesis: a comparative analysis of different surgical fixation techniques Manuscript number (if known): JSS-22-24

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3	Royalties or licenses	X_None	

4	Consulting fees	X_None	
5	Payment or honoraria for	X None	
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	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Course at few attack dive	V Neve	
7	Support for attending meetings and/or travel	XNone	
	incettings and/or traver		
8	Patents planned, issued or	XNone	
	pending		
•			
9	Participation on a Data Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
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