

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

#### 1. Identifying information.

#### 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party – that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

#### 3. Relevant financial activities outside the submitted work.

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jasmeet S.	2. Surname (Last Name) Reyat	3. Date 27-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Professor Paulus Kirchhof
5. Manuscript Title Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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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### Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Reyat has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Winnie	2. Surname (Last Name) Chua	3. Date 27-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Professor Paulus Kirchhof
5. Manuscript Title Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

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Dr. Chua 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)  
Victor R.

2. Surname (Last Name)  
Cardoso

3. Date  
27-April-2020

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Professor Paulus Kirchhof

5. Manuscript Title  
Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
EU CATCH ME	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This work was funded by the Horizon 2020 Framework Programme of the European Union under grant agreement No. 633196, British Heart Foundation (FS/13/43/30324 to PK and LF; PG/17/30/32961 to PK, and AA/18/2/34218 to PK and LF), and a Foundation Leducq Transatlantic Networks of Excellence in Cardiovascular Research grant (14CVD01)
BHF FS/13/43/30324	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This work was funded by the Horizon 2020 Framework Programme of the European Union under grant agreement No. 633196, British Heart Foundation (FS/13/43/30324 to PK and LF; PG/17/30/32961 to PK, and AA/18/2/34218 to PK and LF), and a Foundation Leducq Transatlantic Networks of Excellence in Cardiovascular Research grant (14CVD01)



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BHF PG/17/30/32961	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This work was funded by the Horizon 2020 Framework Programme of the European Union under grant agreement No. 633196, British Heart Foundation (FS/13/43/30324 to PK and LF; PG/17/30/32961 to PK, and AA/18/2/34218 to PK and LF), and a Foundation Leducq Transatlantic Networks of Excellence in Cardiovascular Research grant (14CVD01)
Leducq Foundation 14CVD01	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This work was funded by the Horizon 2020 Framework Programme of the European Union under grant agreement No. 633196, British Heart Foundation (FS/13/43/30324 to PK and LF; PG/17/30/32961 to PK, and AA/18/2/34218 to PK and LF), and a Foundation Leducq Transatlantic Networks of Excellence in Cardiovascular Research grant (14CVD01)

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Mr. Cardoso reports grants from EU CATCH ME, grants from BHF FS/13/43/30324, grants from BHF PG/17/30/32961, grants from Leducq Foundation 14CVD01, during the conduct of the study; .

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### Section 1. Identifying Information

1. Given Name (First Name)

Anika

2. Surname (Last Name)

Witten

3. Date

27-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Professor Paulus Kirchhof

5. Manuscript Title

Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients

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Dr. Witten has nothing to disclose.

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1. Given Name (First Name)  
Peter

2. Surname (Last Name)  
Kastner

3. Date  
27-April-2020

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Professor Paulus Kirchhof

5. Manuscript Title  
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Roche Diagnostics GmbH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Employee

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Dr. Kastner reports other from Roche Diagnostics GmbH, during the conduct of the study; .

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Syeeda N.	2. Surname (Last Name) Kabir	3. Date 27-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Professor Paulus Kirchhof
5. Manuscript Title Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  Yes  No

### Section 3. Relevant financial activities outside the submitted work.

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Ms. Kabir has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Mortiz F.

2. Surname (Last Name)  
Sinner

3. Date  
27-April-2020

4. Are you the corresponding author?  Yes  No  
Corresponding Author's Name  
Professor Paulus Kirchhof

5. Manuscript Title  
Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
EU CATCH ME	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This work was partly funded by the Horizon 2020 Framework Programme of the European Union under grant agreement No. 633196 [CATCH ME] to Moritz Sinner (Coordinator: Paulus Kirchhof)

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Sinner reports grants from EU CATCH ME, during the conduct of the study; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Robin

2. Surname (Last Name)

Wesselink

3. Date

27-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Professor Paulus Kirchhof

5. Manuscript Title

Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients

6. Manuscript Identifying Number (if you know it)

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### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No



## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Wesselink has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Andrew	2. Surname (Last Name) Holmes	3. Date 27-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Professor Paulus Kirchhof
5. Manuscript Title Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Holmes has nothing to disclose.

### Evaluation and Feedback

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Davor

2. Surname (Last Name)

Pavlovic

3. Date

27-April-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Professor Paulus Kirchhof

5. Manuscript Title

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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

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Dr. Pavlovic has nothing to disclose.

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#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

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**Pending:** The patent has been filed but not issued

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**Royalties:** Funds are coming in to you or your institution due to your patent



## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Monika      2. Surname (Last Name) Stoll      3. Date 27-April-2020

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Professor Paulus Kirchhof

5. Manuscript Title  
Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients

6. Manuscript Identifying Number (if you know it)

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?     Yes     No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Peer Reviewed Institutional Grants on Atrial Fibrillation and Arrhythmias by EU Horizon 2020 and Dutch Heart Foundation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

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Dr. Stoll reports grants from Peer Reviewed Institutional Grants on Atrial Fibrillation and Arrhythmias by EU Horizon 2020 and Dutch Heart Foundation, during the conduct of the study; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Stefan	2. Surname (Last Name) Kaab	3. Date 27-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Professor Paulus Kirchhof
5. Manuscript Title Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients		
6. Manuscript Identifying Number (if you know it)		

### Section 2. The Work Under Consideration for Publication

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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

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Sinner reports grants from EU CATCH ME, during the conduct of the study; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Georgious	2. Surname (Last Name) Gkoutos	3. Date 27-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Professor Paulus Kirchhof
5. Manuscript Title Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients		
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## ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Gkoutos 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) Joris	2. Surname (Last Name) de Groot	3. Date 27-April-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Professor Paulus Kirchhof
5. Manuscript Title Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients		
6. Manuscript Identifying Number (if you know it)		

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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
Articure Inc	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Abbott	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Medtronic	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Boston Scientific	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Articure	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Daiichi Sankyo	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Bayer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Johnson&Johnson	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Medtronic	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Novartis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Servier	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### 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. de Groot reports grants from Articure Inc, grants from Abbott, grants from Medtronic, grants from Boston Scientific, personal fees from Articure, personal fees from Daiichi Sankyo, personal fees from Bayer, personal fees from Johnson&Johnson, grants from Medtronic, grants from Novartis, grants from Servier, outside the submitted work; .

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Paulus

2. Surname (Last Name)  
Kirchhof

3. Date  
27-April-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title  
Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients

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EU CATCH ME	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This work was funded by the Horizon 2020 Framework Programme of the European Union under grant agreement No. 633196, British Heart Foundation (FS/13/43/30324 to PK and LF; PG/17/30/32961 to PK, and AA/18/2/34218 to PK and LF), and a Foundation Leducq Transatlantic Networks of Excellence in Cardiovascular Research grant (14CVD01
BHF FS/13/43/30324	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This work was funded by the Horizon 2020 Framework Programme of the European Union under grant agreement No. 633196, British Heart Foundation (FS/13/43/30324 to PK and LF; PG/17/30/32961 to PK, and AA/18/2/34218 to PK and LF), and a Foundation Leducq Transatlantic Networks of Excellence in Cardiovascular Research grant (14CVD01

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Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
BHF PG/17/30/32961	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This work was funded by the Horizon 2020 Framework Programme of the European Union under grant agreement No. 633196, British Heart Foundation (FS/13/43/30324 to PK and LF; PG/17/30/32961 to PK, and AA/18/2/34218 to PK and LF), and a Foundation Leducq Transatlantic Networks of Excellence in Cardiovascular Research grant (14CVD01)
Leducq Foundation 14CVD01	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	This work was funded by the Horizon 2020 Framework Programme of the European Union under grant agreement No. 633196, British Heart Foundation (FS/13/43/30324 to PK and LF; PG/17/30/32961 to PK, and AA/18/2/34218 to PK and LF), and a Foundation Leducq Transatlantic Networks of Excellence in Cardiovascular Research grant (14CVD01)

### Section 3.

#### Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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
PK has received research support from European Union, British Heart Foundation, Leducq Foundation, Medical Research Council (UK), and German Centre for Heart Research, from several drug and device companies active in atrial fibrillation, and has received honoraria from several such companies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
PK is listed as inventor on two patents held by University of Birmingham (Atrial Fibrillation Therapy WO 2015140571, Markers for Atrial Fibrillation WO 2016012783).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

### Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

- Yes, the following relationships/conditions/circumstances are present (explain below):
- No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

### Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Kirchhof reports grants from EU CATCH ME, grants from BHF FS/13/43/30324, grants from BHF PG/17/30/32961, grants from Leducq Foundation 14CVD01, during the conduct of the study; grants and non-financial support from PK has received research support from European Union, British Heart Foundation, Leducq Foundation, Medical Research Council (UK), and German Centre for Heart Research, from several drug and device companies active in atrial fibrillation, and has received honoraria from several such companies., outside the submitted work; In addition, Dr. Kirchhof has a patent PK is listed as inventor on two patents held by University of Birmingham (Atrial Fibrillation Therapy WO 2015140571, Markers for Atrial Fibrillation WO 2016012783). pending.



## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Evaluation and Feedback

Please visit <http://www.icmje.org/cgi-bin/feedback> to provide feedback on your experience with completing this form.

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

#### 1. Identifying information.

#### 2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party – that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

#### 3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

#### 4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

#### 5. Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

#### Definitions.

**Entity:** government agency, foundation, commercial sponsor, academic institution, etc.

**Grant:** A grant from an entity, generally [but not always] paid to your organization

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

**Non-Financial Support:** Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued

**Issued:** The patent has been issued by the agency

**Licensed:** The patent has been licensed to an entity, whether earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your patent

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Larissa      2. Surname (Last Name) Fabritz      3. Date 27-April-2020

4. Are you the corresponding author?     Yes     No      Corresponding Author's Name  
Professor Paulus Kirchhof

5. Manuscript Title  
Reduced left atrial cardiomyocyte PITX2 mRNA concentrations and elevated venous BMP10 concentrations predict recurrent atrial fibrillation after ablation in patients

6. Manuscript Identifying Number (if you know it)  
 \_\_\_\_\_

### Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?     Yes     No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Name of Institution/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Institutional research grants from governmental funding agencies like DFG, MRC and charities like BHF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication**.

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
Institutional research grants from governmental funding agencies like DFG, MRC and charities like BHF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
WO 2015140571	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Atrial Fibrillation Therapy
WO 2016012783	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Markers for AF

### Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

Yes, the following relationships/conditions/circumstances are present (explain below):

No other relationships/conditions/circumstances that present a potential conflict of interest

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Dr. Fabritz reports grants from Institutional research grants from governmental funding agencies like DFG, MRC and charities like BHF, during the conduct of the study; grants from Institutional research grants from governmental funding agencies like DFG, MRC and charities like BHF, outside the submitted work; In addition, Dr. Fabritz has a patent WO 2015140571 pending, and a patent WO 2016012783 pending.

## ICMJE Form for Disclosure of Potential Conflicts of Interest

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### Evaluation and Feedback

Please visit <http://www.icmje.org/cgi-bin/feedback> to provide feedback on your experience with completing this form.

## TREND Statement Checklist

Paper Section / Topic	Item no	Descriptor	Reported	
			Yes/No	Pg
<b>Title and Abstract</b>				
Title and Abstract	1	Information on how unit were allocated to interventions	Yes	4
		Structured abstract recommended	Yes	4
		Information on target population or study sample	Yes	4
<b>Introduction</b>				
Background	2	Scientific background and explanation of rationale	Yes	5
		Theories used in designing behavioural interventions	NA	
<b>Methods</b>				
Participants	3	Eligibility criteria for participants, including criteria at different levels in recruitment/sampling plan (e.g., cities, clinics, subjects)	Yes	12
		Method of recruitment (e.g., referral, self-selection), including the sampling method if a systematic sampling plan was implemented	Yes	12
		Recruitment setting	Yes	12
		Settings and locations where the data were collected	Yes	12
Interventions	4	Details of the interventions intended for each study condition and how and when they were actually administered, specifically including:		
		o Content: what was given?	Yes	12
		o Delivery method: how was the content given?	Yes	12
		o Unit of delivery: how were the subjects grouped during delivery?	NA	
		o Deliverer: who delivered the intervention?	Yes	12
		o Setting: where was the intervention delivered?	Yes	12
		o Exposure quantity and duration: how many sessions or episodes or events were intended to be delivered? How long were they intended to last?	Yes	12
		o Time span: how long was it intended to take to deliver the intervention to each unit?	NA	
o Activities to increase compliance or adherence (e.g., incentives)	NA			
Objectives	5	Specific objectives and hypotheses	Yes	5
Outcomes	6	Clearly defined primary and secondary outcome measures	Yes	12
		Methods used to collect data and any methods used to enhance the quality of measurements	Yes	12-14
		Information on validated instruments such as psychometric and biometric properties	NA	
Sample size	7	How sample size was determined and, when applicable, explanation of any interim analyses and stopping rules	Yes	Fig 1
Assignment Method	8	Unit of assignment (the unit being assigned to study condition, e.g., individual, group, community)	NA	
		Method used to assign units to study conditions, including details of any restriction (e.g., blocking, stratification, minimization)	NA	
		Inclusion of aspects employed to help minimize potential bias induced due to non-randomization (e.g., matching)	NA	
Blinding (masking)	9	Whether or not participants, those administering the interventions, and those assessing the outcomes were blinded to study condition assignment; if so, statement regarding how the blinding was accomplished and how it was assessed.	Yes	13 + Supp Mat Pg 3
Unit of Analysis	10	Description of the smallest unit that is being analyzed to assess intervention effects (e.g., individual, group, or community)	NA	
		If the unit of analysis differs from the unit of assignment, the analytical method used to account for this (e.g., adjusting the standard error estimates by the design effect or using multilevel analysis)	NA	
Statistical Methods	11	Statistical methods used to compare study groups for primary methods outcome(s), including complex methods of correlated data	Yes	13-14 Supp

				Mat Pg 3-4
		Statistical methods used for additional analyses, such as a subgroup analyses and adjusted analysis	Yes	13-14 Supp Mat Pg 3-4
		Methods for imputing missing data, if used	NA	
		Statistical software or programs used	Yes	14 Supp Mat Pg 3
<b>Results</b>				
Participant flow	12	Flow of participants through each stage of the study: enrolment, assignment, allocation, and intervention exposure, follow-up, analysis (a diagram is strongly recommended)		
		o Enrollment: the numbers of participants screened for eligibility, found to be eligible or not eligible, declined to be enrolled, and enrolled in the study	Yes	Fig 1
		o Assignment: the numbers of participants assigned to a study condition	Yes	Fig 1
		o Allocation and intervention exposure: the number of participants assigned to each study condition and the number of participants who received each intervention	NA	
		o Follow-up: the number of participants who completed the followup or did not complete the follow-up (i.e., lost to follow-up), by study condition	Yes	Fig 1
		o Analysis: the number of participants included in or excluded from the main analysis, by study condition	Yes	Fig 1
		Description of protocol deviations from study as planned, along with reasons	NA	
Recruitment	13	Dates defining the periods of recruitment and follow-up	Yes	12
Baseline Data	14	Baseline demographic and clinical characteristics of participants in each study condition	Yes	Tab 1
		Baseline characteristics for each study condition relevant to specific disease prevention research	Yes	Tab 1
		Baseline comparisons of those lost to follow-up and those retained, overall and by study condition	NA	
		Comparison between study population at baseline and target population of interest	NA	
Baseline equivalence	15	Data on study group equivalence at baseline and statistical methods used to control for baseline differences	NA	
Numbers analysed	16	Number of participants (denominator) included in each analysis for each study condition, particularly when the denominators change for different outcomes; statement of the results in absolute numbers when feasible	Yes	Fig 1 Tab 1
		Indication of whether the analysis strategy was "intention to treat" or, if not, description of how non-compliers were treated in the analyses	NA	
Outcomes and estimation	17	For each primary and secondary outcome, a summary of results for each estimation study condition, and the estimated effect size and a confidence interval to indicate the precision	Yes	7-8, Fig 5 Fig S1
		Inclusion of null and negative findings	Yes	6-7
		Inclusion of results from testing pre-specified causal pathways through which the intervention was intended to operate, if any	NA	
Ancillary analyses	18	Summary of other analyses performed, including subgroup or restricted analyses, indicating which are pre-specified or exploratory	NA	

Adverse events	19	Summary of all important adverse events or unintended effects in each study condition (including summary measures, effect size estimates, and confidence intervals)	NA	
<b>Discussion</b>				
Interpretation	20	Interpretation of the results, taking into account study hypotheses, sources of potential bias, imprecision of measures, multiplicative analyses, and other limitations or weaknesses of the study	Yes	9-11
		Discussion of results taking into account the mechanism by which the intervention was intended to work (causal pathways) or alternative mechanisms or explanations	Yes	9-10
		Discussion of the success of and barriers to implementing the intervention, fidelity of implementation	NA	
		Discussion of research, programmatic, or policy implications	NA	
Generalizability	21	Generalizability (external validity) of the trial findings, taking into account the study population, the characteristics of the intervention, length of follow-up, incentives, compliance rates, specific sites/settings involved in the study, and other contextual issues	NA	
Overall Evidence	22	General interpretation of the results in the context of current evidence and current theory	Yes	9-11