

ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Ahmed Mehdi

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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 author's relationships/activities/interests should be defined broadly. 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.

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Date: 6/18/2022

Your Name: Amee Sonigra

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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Date: 6/18/2022

Your Name: Hendrik Nel

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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Date: 6/18/2022

Your Name: Helen Roberts

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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Date: 6/18/2022

Your Name: Hugh Reid

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

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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: 6/18/2022

Your Name: Ian Gourley

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Jamie Rossjohn

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Joanne Tesiram

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Karin van Schie

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Kim-Anh Le Cao

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Mark Rigby

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Maxwell Blanden

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Meghna Talekar

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Nishta Ramnoruth

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Pascale Wehr

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Phillip Vecchio

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Rene Toes

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Frederik Stuurman

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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Your Name: Stephane Becart

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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: 6/18/2022

Your Name: Swati Patel

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: H. Uli Scherer

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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ICMJE DISCLOSURE FORM

Date: 6/18/2022

Your Name: Kim Campbell

Manuscript Title: Randomized phase-1 trial of antigen-specific tolerizing immunotherapy with peptide/calcitriol liposomes in ACPA+ rheumatoid arthritis

Manuscript Number (if known): 160964-INS-CMED-1

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