

## 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) Alice	2. Surname (Last Name) Liou	3. Date 19-September-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Filip Knop
5. Manuscript Title Metformin-induced GLP-1 secretion contributes to the actions of metformin in type 2 diabetes		
6. Manuscript Identifying Number (if you know it) 93936-INS-CMED-RV-3		

### 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	
Pfizer, Inc.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Employee of Pfizer during the time of this work	X
						ADD

### 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

ADD

### 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

### 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.

#### Generate Disclosure Statement

Dr. Liou reports being an employee of Pfizer Inc during the conduct of the study;.

### 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

### Section 1. Identifying Information

1. Given Name (First Name) Damien	2. Surname (Last Name) Keating	3. Date 21-September-2018
4. Are you the corresponding author? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5. Manuscript Title Metformin-induced GLP-1 secretion contributes to the actions of metformin in type 2 diabetes		
6. Manuscript Identifying Number (if you know it) 93936-INS-CMED-TR-2		

### 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	
Pfizer Inc	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Some of the results in this paper were the product of a collaborative relationship between the groups led by Dr Young and Dr Keating with Pfizer Inc. This involved a direct research grant from Pfizer to these groups to collaborate on studies on enteroendocrine cell function and was subsequently followed by a shared grant with all parties as co-investigators which was supported by the Australian Research Council (Grant application number: LP150100419). Pfizer had no influence on the content or outcomes of this publication but were involved on a collaborative basis.	X
						ADD



## ICMJE Form for Disclosure of Potential Conflicts of Interest

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

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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	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		X ADD

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

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

### 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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### Section 6. Disclosure Statement

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Generate Disclosure Statement

Dr. Keating reports grants from Pfizer Inc, during the conduct of the study; .



## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) David	2. Surname (Last Name) Sonne	3. Date 18-September-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Filip K. Knop
5. Manuscript Title Metformin-induced GLP-1 secretion contributes to the actions of metformin in type 2 diabetes		
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

ADD

### 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

ADD

### 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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#### Generate Disclosure Statement

Dr. Sonne has nothing to disclose.

### 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

### Section 1. Identifying Information

1. Given Name (First Name)

DAVID

2. Surname (Last Name)

WATTCROW

3. Date

26/9/18

4. Are you the corresponding author?

☐ Yes

☒ No

5. Manuscript Title

author's individual report - a research article to action of author in paper & relation to

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



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### Section 5. Relationships not covered above

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

D. C. Van der

10/9/19

### 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)	2. Surname (Last Name)	3. Date
Dayan	de Fontgalland	10-October-2018

4. Are you the corresponding author? ☐ Yes ☒ No

Corresponding Author's Name  
Damien Keating

5. Manuscript Title  
Metformin-induced glucagon-like peptide-1 secretion contributes to the actions of metformin in type 2 diabetes

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

ADD

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

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

ADD

### 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

### Section 5.

#### Relationships not covered above

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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.

#### Generate Disclosure Statement

Dr. de Fontgalland has nothing to disclose.

### 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

### Section 1. Identifying Information

1. Given Name (First Name) Emilie	2. Surname (Last Name) Bahne	3. Date 10-October-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Damien Keating
5. Manuscript Title Metformin-induced glucagon-like peptide-1 secretion contributes to the actions of metformin in type 2 diabetes		
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

ADD

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

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

ADD

### 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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### 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):
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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.

#### Generate Disclosure Statement

Dr. Bahne has nothing to disclose.

### 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

### Section 1. Identifying Information

1. Given Name (First Name)	2. Surname (Last Name)	3. Date
Emily	Sun	03-October-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Corresponding Author's Name		
Filip Knop, Damien Keating		
5. Manuscript Title		
Metformin-induced GLP-1 secretion contributes to the actions of metformin in type 2 diabetes		
6. Manuscript Identifying Number (if you know it)		
93936-INS-CMED-RV-3		

### 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

ADD

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

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

ADD

### 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

### 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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### Section 6. Disclosure Statement

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

#### Generate Disclosure Statement

Miss Sun has nothing to disclose.

### 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

### Section 1. Identifying Information

1. Given Name (First Name)  
Filip

2. Surname (Last Name)  
Knop

3. Date  
17-September-2018

4. Are you the corresponding author? ☒ Yes ☐ No

5. Manuscript Title  
Metformin-induced GLP-1 secretion contributes to the actions of metformin in type 2 diabetes

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

ADD

### 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	
Amgen	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory board	×
AstraZeneca	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Investigator-initiated studies, advisory boards and educational activities (lecturing, teaching)	×
Boehringer Ingelheim	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory board and educational activities (lecturing, teaching)	×
Carmot Therapeutics	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scientific advise, consulting	×
Eli Lilly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Advisory board and educational activities (lecturing, teaching), travelling to scientific meetings	×

## ICMJE Form for Disclosure of Potential Conflicts of Interest

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Gubra	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Investigator-initiated studies	×
MedImmune	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Advisory board and educational activities (lecturing, teaching)	×
MSD/Merck	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Advisory board and educational activities (lecturing, teaching), travelling to scientific meetings	×
Norgine	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Educational activities (lecturing, teaching)	×
Novo Nordisk	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Investigator-initiated studies, consulting, advisory boards and educational activities (lecturing, teaching), travelling to scientific meetings	×
Sanofi	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Investigator-initiated studies, consulting, advisory boards and educational activities (lecturing, teaching)	×
Zealand Pharma	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Investigator-initiated studies, consulting, advisory boards and educational activities (lecturing, teaching)	×
						ADD

### 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

### 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

Minority shareholder of Antag

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.

#### Generate Disclosure Statement

Dr. Knop reports personal fees from Amgen, grants, personal fees and non-financial support from AstraZeneca, personal fees from Boehringer Ingelheim, personal fees from Carmot Therapeutics, personal fees and non-financial support from Eli Lilly, grants from Gubra, personal fees from MedImmune, personal fees and non-financial support from MSD/Merck, personal fees from Norgine, grants, personal fees and non-financial support from Novo Nordisk, grants and personal fees from Sanofi, grants and personal fees from Zealand Pharma, outside the submitted work; and Minority shareholder of Antag.

### 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) Jakob	2. Surname (Last Name) Schjøler Hansen	3. Date 24-September-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Filip K. Knop
5. Manuscript Title Metformin-induced glucagon-like peptide-1 secretion contributes to the actions of metformin in type 2 diabetes		
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

ADD

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

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

ADD

### 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

### 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

I am currently employed by Novo Nordisk A/S.

By the time of the study conduct and analysis, I was not employed by Novo Nordisk A/S

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

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#### Generate Disclosure Statement

Dr. Schiøler Hansen reports that I am currently employed by Novo Nordisk A/S. By the time of the study conduct and analysis, I was not employed by Novo Nordisk A/S.

### 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)	2. Surname (Last Name)	3. Date
Jens	Holst	25-September-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
		Corresponding Author's Name
		Emilie Bahne
5. Manuscript Title		
Metformin-induced GLP-1 secretion contributes to the actions of metformin in type 2 diabetes		
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Are there any relevant conflicts of interest? ☐ Yes ☒ No

ADD

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

ADD

### 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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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name) Jens 2. Surname (Last Name) Rehfeld 3. Date Sept. 17, 2018
4. Are you the corresponding author? ☐ Yes ☒ No
5. Manuscript Title Metformin-induced GLP-1 secretion contributes to the actions of metformin in type 2 diabetes.
6. Manuscript Identifying Number (if you know it) 93936-INS-CMED-RV-3

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

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1. Given Name (First Name)

Luca

2. Surname (Last Name)

SPOSATO

3. Date

28.9.18

4. Are you the corresponding author?

☐ Yes☒ No

5. Manuscript Title

metformin - induced glucagon-like peptide - 1  
secretion contributes to the action  
of metformin in diabetes.

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?

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Are there any relevant conflicts of interest?

☐ Yes☒ No**Section 4. Intellectual Property -- Patents & Copyrights**

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☐ Yes☒ No





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1. Given Name (First Name)

V. MARGARET

2. Surname (Last Name)

JACKSON

3. Date

4. Are you the corresponding author?

☐ Yes☒ No

5. Manuscript Title

METFORM - INDUCED GUT SECRETION CONTRIBUTES TO THE ACTIONS  
OF METFORMIN IN TYPE 2 DIABETES

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



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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)	2. Surname (Last Name)	3. Date
Morten	Hansen	18-September-2018
4. Are you the corresponding author?		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name
		Filip Krag Knop
5. Manuscript Title		
Metformin-induced GLP-1 secretion contributes to the actions of metformin in type 2 diabetes		
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

ADD

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

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

ADD

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

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Dr. Hansen 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)	2. Surname (Last Name)	3. Date
Paul	Hollington	10-October-2018
4. Are you the corresponding author?		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name
		Damien Keating
5. Manuscript Title		
Metformin-induced glucagon-like peptide-1 secretion contributes to the actions of metformin in type 2 diabetes		
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

ADD

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

ADD

### 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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#### Generate Disclosure Statement

Dr. Hollington 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)	2. Surname (Last Name)	3. Date
Philippa	Rabbitt	10-October-2018
4. Are you the corresponding author?		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name
		Damien Keating
5. Manuscript Title		
Metformin-induced glucagon-like peptide-1 secretion contributes to the actions of metformin in type 2 diabetes		
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Are there any relevant conflicts of interest? ☐ Yes ☒ No

ADD

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Are there any relevant conflicts of interest? ☐ Yes ☒ No

ADD

### 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 6. Disclosure Statement

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#### Generate Disclosure Statement

Dr. Rabbitt 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) Richard	2. Surname (Last Name) Young	3. Date 19-September-2018
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Professor Filip Knop
5. Manuscript Title Metformin-induced GLP-1 secretion contributes to the actions of metformin in type 2 diabetes		
6. Manuscript Identifying Number (if you know it) 93936-INS-CMED-RV-3		

### 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	
Australian Research Council	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Direct research support	X
Pfizer International (Boston MA, USA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Direct research support	X
						ADD

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

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Dr. Young reports grants from Australian Research Council, grants from Pfizer International (Boston MA, USA), 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) Steven L.	2. Surname (Last Name) Due	3. Date 19 Sept, 2018
---	-------------------------------	--------------------------

4. Are you the corresponding author? ☐ Yes ☒ No

5. Manuscript Title  
Metformin-induced GLP-1 secretion contributes to the actions of metformin in type 2 diabetes

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### Section 1.

#### Identifying Information

1. Given Name (First Name)

Tina

2. Surname (Last Name)

Viltsbøll

3. Date

10-October-2018

4. Are you the corresponding author?

☐ Yes

☒ No

Corresponding Author's Name

Damien Keating

5. Manuscript Title

Metformin-induced glucagon-like peptide-1 secretion contributes to the actions of metformin in type 2 diabetes

6. Manuscript Identifying Number (if you know it)

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☒ No

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☒ No



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Dr. Vilsbøll has nothing to disclose.

### Evaluation and Feedback

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MEDICAL JOURNAL EDITORS**ICMJE Form for Disclosure of Potential Conflicts of Interest****Section 1. Identifying Information**

1. Given Name (First Name) **ULRICH** 2. Surname (Last Name) **ROHDE** 3. Date **04.10.2018**
4. Are you the corresponding author? ☐ Yes ☒ No
5. Manuscript Title **METFORMIN-INDUCED GLUCAGON-LIKE PEPTIDE-1 SECRETION CONTRIBUTES TO THE ACTIONS OF**
6. Manuscript Identifying Number (if you know it) **METFORMIN IN TYPE 2 DIABETES**

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

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## CONSORT 2010 checklist of information to include when reporting a randomised trial\*

Section/Topic	Item No	Checklist item	Reported on page No
<b>Title and abstract</b>			
	1a	Identification as a randomised trial in the title	-
	1b	Structured summary of trial design, methods, results, and conclusions (for specific guidance see CONSORT for abstracts)	2
<b>Introduction</b>			
Background and objectives	2a	Scientific background and explanation of rationale	3-5
	2b	Specific objectives or hypotheses	5
<b>Methods</b>			
Trial design	3a	Description of trial design (such as parallel, factorial) including allocation ratio	19
	3b	Important changes to methods after trial commencement (such as eligibility criteria), with reasons	none
Participants	4a	Eligibility criteria for participants	18-19
	4b	Settings and locations where the data were collected	24
Interventions	5	The interventions for each group with sufficient details to allow replication, including how and when they were actually administered	19
Outcomes	6a	Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed	19 and 22
	6b	Any changes to trial outcomes after the trial commenced, with reasons	none
Sample size	7a	How sample size was determined	18
	7b	When applicable, explanation of any interim analyses and stopping guidelines	none
<b>Randomisation:</b>			
Sequence generation	8a	Method used to generate the random allocation sequence	18
	8b	Type of randomisation; details of any restriction (such as blocking and block size)	18
Allocation concealment mechanism	9	Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned	18
Implementation	10	Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions	18
Blinding	11a	If done, who was blinded after assignment to interventions (for example, participants, care providers, those	18

		assessing outcomes) and how	
Statistical methods	11b	If relevant, description of the similarity of interventions	Not relevant
	12a	Statistical methods used to compare groups for primary and secondary outcomes	23
	12b	Methods for additional analyses, such as subgroup analyses and adjusted analyses	Not relevant
<b>Results</b>			
Participant flow (a diagram is strongly recommended)	13a	For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome	6
	13b	For each group, losses and exclusions after randomisation, together with reasons	6
Recruitment	14a	Dates defining the periods of recruitment and follow-up	None
	14b	Why the trial ended or was stopped	Not relevant
Baseline data	15	A table showing baseline demographic and clinical characteristics for each group	6 and 41
Numbers analysed	16	For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups	6 and 41
Outcomes and estimation	17a	For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)	9-10 and 40-41
	17b	For binary outcomes, presentation of both absolute and relative effect sizes is recommended	-
Ancillary analyses	18	Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory	-
Harms	19	All important harms or unintended effects in each group (for specific guidance see CONSORT for harms)	None
<b>Discussion</b>			
Limitations	20	Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses	16-17
Generalisability	21	Generalisability (external validity, applicability) of the trial findings	17
Interpretation	22	Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence	11-17
<b>Other information</b>			
Registration	23	Registration number and name of trial registry	1
Protocol	24	Where the full trial protocol can be accessed, if available	-
Funding	25	Sources of funding and other support (such as supply of drugs), role of funders	25-26

\*We strongly recommend reading this statement in conjunction with the CONSORT 2010 Explanation and Elaboration for important clarifications on all the items. If relevant, we also recommend reading CONSORT extensions for cluster randomised trials, non-inferiority and equivalence trials, non-pharmacological treatments, herbal interventions, and pragmatic trials. Additional extensions are forthcoming: for those and for up to date references relevant to this checklist, see [www.consort-statement.org](http://www.consort-statement.org).