ICMJE DISCLOSURE FORM

Date:	_21 07 2022
Your Name:_	Roel J Odink
Manuscript T	itle: Ruim veertig jaar diabetes follow up: "Over de dingen die voorbijgaan"
manuscript n	umber (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

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In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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6	Payment for expert testimony	None X
7	Support for attending meetings and/or travel	None X
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None X
11	Stock or stock options	None X
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None X
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Please place an "X" next to the following statement to indicate your agreement:

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.