

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 four parts.

1. Identifying information.

Enter your full name. If you are NOT the corresponding author please check the box "no" and a space to enter the name of the corresponding author in the space that appears. Provide the requested manuscript information. Double-check the manuscript number and enter it.

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". The complete the appropriate boxes to indicate the type of support and whether the payment went to you, or to your institution, or both.

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. Other relationships.

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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Section 1. Identifying Information

1. Given Name (First Name)
Simon
2. Surname (Last Name)
TRAVIS
3. Effective Date (07-August-2008)
18-December-2015
4. Are you the corresponding author? Yes No
5. Manuscript Title
2015-2016 ECCO Annual Disclosure of potential conflicts of interest
6. Manuscript Identifying Number (if you know it)
N/A

Section 2. The Work Under Consideration for Publication

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

Complete each row by checking "No" or providing the requested information. **If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.**

The Work Under Consideration for Publication

Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
1. Grant	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			X ADD
2. Consulting fee or honorarium	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			X ADD
3. Support for travel to meetings for the study or other purposes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			X ADD
4. Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			X ADD
5. Payment for writing or reviewing the manuscript	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			X ADD
6. Provision of writing assistance, medicines, equipment, or administrative support	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			X

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The Work Under Consideration for Publication						
Type	No	Money Paid to You	Money to Your Institution*	Name of Entity	Comments**	
						ADD
7. Other	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			X
						ADD

* This means money that your institution received for your efforts on this study.

** Use this section to provide any needed explanation.

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 submission.

Complete each row by checking "No" or providing the requested information. **If you have more than one relationship click the "Add" button to add a row. Excess rows can be removed by clicking the "X" button.**

Relevant financial activities outside the submitted work						
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
1. Board membership	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ECCO	Governing Board	X
1. Board membership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IBD2020	Director of Charity	X
						ADD
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	AbbVie	None as ECCO President (Feb2012-14). Resumed 2014	X
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Centocor	None as ECCO President (Feb2012-14)	X
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Schering-Plough	None as ECCO President (Feb2012-14)	X
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Bristol Myers Squibb	None as ECCO President (Feb2012-14).Resumed 2014	X
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Chemocentryx Inc	None as ECCO President (Feb2012-14)	X
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cosmo technologies	Resumed 2014	X
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Elan Pharma Inc	None as ECCO President (Feb2012-14)	X

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Relevant financial activities outside the submitted work						
Type of Relationship (in alphabetical order)	No	Money Paid to You	Money to Your Institution*	Entity	Comments	
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Genentech	None as ECCO President (Feb2012-14). Resumed 2014	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Giuliani	None as ECCO President (Feb2012-14). Resumed 2014	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Merck and co.	None as ECCO President (Feb2012-14)	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Takeda	None as ECCO President (Feb2012-14). Resumed 2014	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Otsuka Pharmaceuticals	None as ECCO President (Feb2012-14)	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PDL Biopharma	None as ECCO President (Feb2012-14)	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pfizer Inc	None as ECCO President (Feb2012-14). Resumed 2014	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Shire Pharma	None as ECCO President (Feb2012-14)	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Glenmark Pharma	None as ECCO President (Feb2012-14)	×
2. Consultancy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Synthon Pharma	2013	×
2. Consultancy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NPS	2014-15	×
2. Consultancy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Lilly	2013	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warner Chilcott	not since 2011	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proximagen	2014	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	VHsquared	2015	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Topivert	2015-	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ferring Pharmaceuticals	2015-	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Celgene	2015	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Glaxo SmithKline	2014-	×
2. Consultancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Takeda	2014-	×
						ADD
3. Employment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Oxford University Hospital		×

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3. Employment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	University of Oxford		×
ADD						
4. Expert testimony	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Santarus Inc	None as ECCO President (Feb2012-14)	×
4. Expert testimony	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cosmo Technologies	EMA appeal for Budesonide MMX	×
4. Expert testimony	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Tillotts Pharma	None as ECCO President (Feb2012-14)	×
ADD						
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Ferring		×
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	AbbVie		×
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Schering-Plough		×
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Merck Sharpe & Dhome (MSD)		×
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Procter & Gamble		×
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Warner Chilcott		×
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	International Organisation of IBD		×
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Lilly		×
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	UCB		×
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vifor		×
5. Grants/grants pending	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Norman Collison Foundation		×
ADD						
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	AbbVie	Only after University or academic invitation	×
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Schering Plough	None since 2011	×
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Centocor	None since 2010	×
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Merck and co.	Only after University or academic invitation	×
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Given Imaging	None since 2010	×
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	UCB Pharma	None since 2009	×
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ferring Pharmaceuticals	Only after University or academic invitation	×
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Tillotts laboratories	None since 2011	×

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6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Shire	None since 2011	×
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sanofi Aventis	None since 2011	×
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vifor	None since 2011	×
6. Payment for lectures including service on speakers bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Takeda	2014-	×
ADD						
7. Payment for manuscript preparation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ferring	None since 2010	×
ADD						
8. Patents (planned, pending or issued)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			×
ADD						
9. Royalties	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiley Blackwell	Book	×
9. Royalties	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Elsevier	Book	×
9. Royalties	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Oxford University Press	Book	×
ADD						
10. Payment for development of educational presentations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Abbott Laboratories	Booklets and slides 2010	×
10. Payment for development of educational presentations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Procter & Gamble	Booklets and slides 2009	×
10. Payment for development of educational presentations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warner Chiclcott	Booklet 2011	×
ADD						
11. Stock/stock options	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			×
ADD						
12. Travel/accommodations/meeting expenses unrelated to activities listed**	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	AbbVie	Attendance at DDW	×
12. Travel/accommodations/meeting expenses unrelated to activities listed**	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	UEG	Attendance at UEGW	×
ADD						
13. Other (err on the side of full disclosure)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Schering Plough	Part salary for a nurse involved in therapeutic education	×
13. Other (err on the side of full disclosure)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Procter & Gamble	Part salary for a nurse involved in therapeutic education	×

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13. Other (err on the side of full disclosure)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	MSD	Part salary for a nurse involved in therapeutic education	×
13. Other (err on the side of full disclosure)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Vifor	Part salary for a nurse involved in therapeutic education	×
13. Other (err on the side of full disclosure)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Abbott Laboratories	Unrestricted educational grant for lymphatic resaearch	×
13. Other (err on the side of full disclosure)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Procter & Gamble	Unrestricted educational grant	×
13. Other (err on the side of full disclosure)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PDL BioPharma	Unrestricted educational grant for burden of disease research	×
13. Other (err on the side of full disclosure)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Takeda	Part salary for a nurse involved in therapeutic education	×
13. Other (err on the side of full disclosure)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ICHOM	Chair of global working group on IBD outcome measures	×
						ADD

* This means money that your institution received for your efforts.

** For example, if you report a consultancy above there is no need to report travel related to that consultancy on this line.

Section 4.

Other relationships

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?

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

Hide All Table Rows Checked 'No'

SAVE

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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.