



## Declaration of Interests for ENCePP SEAL Studies

### INTRODUCTION

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The form is designed to be filled in electronically and to be transmitted to the ENCePP Secretariat by email; in parallel, a copy of the form should be uploaded to the [EU PAS Register](#).

### SECTION 1: PERSONAL DETAILS

First Name:

Antje

Last Name:

Timmer

Organisation / Research Centre :

University of Oldenburg, Division of Epidemiology and Biometry

Country:

Germany

Contact e-mail Address:

*antje.timmer@uni-oldenburg.de*

IV IRON PASS

Study Reference Number: EUPAS 

|   |   |   |   |   |
|---|---|---|---|---|
| 2 | 0 | 7 | 2 | 0 |
|---|---|---|---|---|

Are you the (Primary) Lead Investigator of the above study? No  Yes

Are you an investigator/researcher contributing to the above study No  Yes

## SECTION 2: DECLARATION OF INTERESTS RELATED TO PHARMACEUTICAL INDUSTRY

In this section you must declare any interests in the pharmaceutical industry that you currently have or had within the past 3 years. If you have interests to declare please tick 'Yes' to the relevant questions. All questions in this part must be answered.

### 2.1 Employment

No  Yes

#### Employment in a pharmaceutical company during past 3 years of study application?

Pharmaceutical company includes supply or service companies which contribute to research, development, production and maintenance of a medicinal product. Employment relates to salaries currently being directly paid to you by a pharmaceutical company.

### 2.2 Financial Interest

No  Yes

#### Financial interests in the capital of a pharmaceutical company?

Financial interests relate to current holding of shares of a pharmaceutical company with the exclusion of independently managed investment funds/pensions schemes that are not exclusively based on the pharmaceutical sector.

### 2.3 Patent

No  Yes

#### Patent for a medicinal product?

Relates to a patent for a medicinal product currently owned by either you as individual or your organisation/ research centre, and you as individual are the beneficiary.

### 2.4 Consultancy

No  Yes

#### Consultancy for a pharmaceutical company during the past 3 years of study application?

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### 2.5 Strategic Advisory Role

No  Yes

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Participation with the right to vote on/influence the output in a (scientific) advisory board/steering committee with the role of providing advice/expressing opinions on the future strategy, direction or development activities of a pharmaceutical company either in terms of general or product-related strategy, regardless of contractual arrangements or any form of remuneration.

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Please specify the pharmaceutical company:

| Name of Pharmaceutical Company | Comments                    |
|--------------------------------|-----------------------------|
| Servier                        | via RTI - Agomelatine Study |

## SECTION 3: ANY OTHER INTERESTS

No  Yes

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Any other relationships/conditions/circumstances that present a potential conflict of interest, including matters relating to members of your family?

Further to the interests declared above, I do hereby declare on my honour that I do not have any further interests or facts that should be made public in relation to the conduct of the study.

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I confirm the information declared on this form is accurate to the best of my knowledge and I consent to my information being stored electronically and published on the [EU PAS Register](#).

FULL NAME:

Antje Timmer

Date:

16/04/2018

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### SECTION 1: PERSONAL DETAILS

First Name:

Rainer

Last Name:

Röhrig

Organisation / Research Centre :

Carl von Ossietzky Universität Oldenburg  
Department of Health Services Research  
Medical Informatics

Country:

Germany

Contact e-mail Address:

*rainer.roehrig@uol.de*

IV IRON PASS

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Please specify type of shares and financial interest (excluding investment funds) of:

| Share Value (please select)        | Type of shares or financial interest                               |
|------------------------------------|--|
| Less than 10,000 EUR or equivalent | Mixed equity fund without influence on the composition of the fund |

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#### Patent for a medicinal product?

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FULL NAME:

Rainer Röhrig

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### SECTION 1: PERSONAL DETAILS

First Name:

Dominik

Last Name:

de Sordi

Organisation / Research Centre :

University of Oldenburg, Division of Epidemiology and Biometry

Country:

Germany

Contact e-mail Address:

*dominik.de.sordi@uni-oldenburg.de*

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FULL NAME:

Dominik de Sordi

Date:

05/09/2017

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### SECTION 1: PERSONAL DETAILS

First Name:

Christoph

Last Name:

Normann

Organisation / Research Centre :

University of Oldenburg, Division Medical Informatics

Country:

Germany

Contact e-mail Address:

*christoph.normann@uni-oldenburg.de*

IV Iron PASS

Study Reference Number: EUPAS 

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FULL NAME:

Christoph Normann

Date:

06/09/2017

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### SECTION 1: PERSONAL DETAILS

First Name:

Sanny

Last Name:

Kappen

Organisation / Research Centre :

Carl von Ossietzky University Oldenburg, Department of Health Services Research, Division of Epidemiology and Biometry

Country:

Germany

Contact e-mail Address:

sanny.kappen@uni-oldenburg.de

Intravenous Iron Postauthorisation Safety Study (PASS): Evaluation of the Risk of Severe Hypersensitivity Reactions

Study Reference Number: EUPAS 

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FULL NAME:

Sanny Kappen

Date:

01/08/2017

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