

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.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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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)
Luca

2. Surname (Last Name)
Cantini

3. Date
03-May-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Joachim GJV Aerts

5. Manuscript Title
Nivolumab in pre-treated Malignant Pleural Mesothelioma: real-world data from the Dutch Expanded Access Program

6. Manuscript Identifying Number (if you know it)
TLCR-19-686

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Are there any relevant conflicts of interest? Yes No

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Dr. Cantini 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)
Robert A

2. Surname (Last Name)
Belderbos

3. Date
16-May-2020

4. Are you the corresponding author? Yes No

Corresponding Author's Name
Joachim GJV Aerts

5. Manuscript Title
Nivolumab in pre-treated Malignant Pleural Mesothelioma: real-world data from the Dutch Expanded Access Program

6. Manuscript Identifying Number (if you know it)
TLCR-19-686

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Dr. Belderbos has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Cornedine

2. Surname (Last Name)
de Gooijer

3. Date
04-May-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name
Joachim GJV Aerts

5. Manuscript Title

Nivolumab in pre-treated Malignant Pleural Mesothelioma: real-world data from the Dutch Expanded Access Program

6. Manuscript Identifying Number (if you know it)

TLCR-19-686

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Dr. de Gooijer has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)
Daphne

2. Surname (Last Name)
Dumoulin

3. Date
04-May-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Joachim GJV Aerts

5. Manuscript Title
Nivolumab in pre-treated Malignant Pleural Mesothelioma: real-world data from the Dutch Expanded Access Program

6. Manuscript Identifying Number (if you know it)
TLCR-19-686

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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
Roche	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MSD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Astra Zeneca	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Novartis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Dumoulin reports personal fees from Roche, personal fees from BMS, personal fees from MSD, personal fees from Pfizer, personal fees from Astra Zeneca, personal fees from Novartis, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name) Robin	2. Surname (Last Name) Cornelissen	3. Date 04-May-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Joachim GJV Aerts
5. Manuscript Title Nivolumab in pre-treated Malignant Pleural Mesothelioma: real-world data from the Dutch Expanded Access Program		
6. Manuscript Identifying Number (if you know it) TLCR-19-686		

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speakers fee Roche	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
speakers fee Pfizer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
speakers fee BMS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Advisory board MSD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Advisory board Roche	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



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Dr. Cornelissen reports personal fees from speakers fee Roche, personal fees from speakers fee Pfizer, personal fees from speakers fee BMS, personal fees from Advisory board MSD, personal fees from Advisory board Roche, outside the submitted work; .

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Definitions.

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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)

Sara

2. Surname (Last Name)

Baart

3. Date

11-May-2020

4. Are you the corresponding author?

Yes No

Corresponding Author's Name

Joachim GJV Aerts

5. Manuscript Title

Nivolumab in pre-treated Malignant Pleural Mesothelioma: real-world data from the Dutch Expanded Access Program

6. Manuscript Identifying Number (if you know it)

TLCR-19-686

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.

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

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.

Dr. Baart 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

Instructions

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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)
Jacobus

2. Surname (Last Name)
Burgers

3. Date
03-May-2020

4. Are you the corresponding author? Yes No
Corresponding Author's Name
Joachim GJV Aerts

5. Manuscript Title
Nivolumab in pre-treated Malignant Pleural Mesothelioma: real-world data from the Dutch Expanded Access Program

6. Manuscript Identifying Number (if you know it)
TLCR-19-686

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
Bristol-Meyers Squibb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Advisory Board member for which the Netherlands Cancer Institute received a reimbursement.
MSD B.V.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Financial support of an investigator Initiated clinical trial
F. Hoffmann- La Roche Ltd.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IDMC member for which the Netherlands Cancer Institute received a reimbursement.

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



ICMJE Form for Disclosure of Potential Conflicts of Interest

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?

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Section 6. Disclosure Statement

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Dr. Burgers reports other from Bristol-Meyers Squibb, other from MSD B.V., other from F. Hoffmann- La Roche Ltd., during the conduct of the study; .

Evaluation and Feedback

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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) Paul	2. Surname (Last Name) Baas	3. Date 28-April-2020
4. Are you the corresponding author? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Corresponding Author's Name Joachim GJV Aerts
5. Manuscript Title Nivolumab in pre-treated Malignant Pleural Mesothelioma: real-world data from the Dutch Expanded Access Program		
6. Manuscript Identifying Number (if you know it) TLCR-19-686		

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

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Bristol-Myers Squibb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Advisory Board member for which the Netherlands Cancer Institute received a reimbursement, and Financial support of an investigator Initiated clinical trial
MSD B.V.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Financial support of an investigator Initiated clinical trial
AstraZeneca	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Advisory Board member for which the Netherlands Cancer Institute received a reimbursement
Takeda	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Advisor

ICMJE Form for Disclosure of Potential Conflicts of Interest

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

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Section 6. Disclosure Statement

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Dr. Baas reports other from Bristol-Myers Squibb, other from MSD B.V., other from AstraZeneca, other from Takeda, outside the submitted work; .

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Other: Anything not covered under the previous three boxes

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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) Joachim	2. Surname (Last Name) Aerts	3. Date 03-May-2020
4. Are you the corresponding author? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
5. Manuscript Title Nivolumab in pre-treated Malignant Pleural Mesothelioma: real-world data from the Dutch Expanded Access Program		
6. Manuscript Identifying Number (if you know it) TLCR-19-686		

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.

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
MSD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
bms	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
boehringer ingelheim	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
amphera	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
eli-lilly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
takeda	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
bayer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
roche	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ICMJE Form for Disclosure of Potential Conflicts of Interest

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
astra zeneca	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? 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.

Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments
allogenic tumor cell lysate	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	amphera	
combination immunotherapy in cancer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
biomarker for immunotherapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Section 5. Relationships not covered above

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Dr. Aerts reports personal fees and non-financial support from MSD, personal fees from bms, personal fees from boehringer ingelheim, personal fees from amphera, personal fees from eli-lilly, personal fees from takeda, personal fees from bayer, personal fees from roche, personal fees from astra zeneca, outside the submitted work; In addition, Dr. Aerts has a patent allogenic tumor cell lysate licensed to amphera, a patent combination immunotherapy in cancer pending, and a patent biomarker for immunotherapy pending. Dr. Aerts reports personal fees and non-financial support from MSD, personal fees from bms, personal fees from boehringer ingelheim, personal fees from amphera, personal fees from eli-lilly, personal fees from takeda, personal fees from bayer, personal fees from roche, personal fees from astra zeneca, outside the submitted work; In addition, Dr. Aerts has a patent allogenic tumor cell lysate licensed to amphera, a patent combination immunotherapy in cancer pending, and a patent biomarker for immunotherapy pending.

Evaluation and Feedback

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