

ICMJE DISCLOSURE FORM

Date: 2/4/2022

Your Name: Bstiaan Bloem

Manuscript Title: Duizelig bij opstaan: denk ook aan autonome dysfunctie

Manuscript Number (if known): D6576

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 author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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.

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Time frame: Since the initial planning of the work																														
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2	Grants or contracts from any entity (if not indicated in item #1 above).	<input type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Netherlands Organization for Scientific Research</td><td style="width: 20%;"></td></tr> <tr><td style="padding: 2px;">Michael J Fox Foundation</td><td></td></tr> <tr><td style="padding: 2px;">Nothing Impossible</td><td></td></tr> <tr><td style="padding: 2px;">Parkinson Vereniging</td><td></td></tr> <tr><td style="padding: 2px;">Parkinson foundation</td><td></td></tr> <tr><td style="padding: 2px;">Hersenstichting Nederland</td><td></td></tr> <tr><td style="padding: 2px;">Davis Phinney Foundation</td><td></td></tr> <tr><td style="padding: 2px;">Parkinson NL</td><td></td></tr> <tr><td style="padding: 2px;">Stichting Woelse Waard</td><td></td></tr> <tr><td style="padding: 2px;">Stichting Alkemade-Keuls</td><td></td></tr> <tr><td style="padding: 2px;">Maag Lever Darm Stichting</td><td></td></tr> <tr><td style="padding: 2px;">Verily Life Sciences</td><td></td></tr> <tr><td style="padding: 2px;">Horizon 2020</td><td></td></tr> <tr><td style="padding: 2px;">Topsector Life Sciences and Health</td><td></td></tr> </table>	Netherlands Organization for Scientific Research		Michael J Fox Foundation		Nothing Impossible		Parkinson Vereniging		Parkinson foundation		Hersenstichting Nederland		Davis Phinney Foundation		Parkinson NL		Stichting Woelse Waard		Stichting Alkemade-Keuls		Maag Lever Darm Stichting		Verily Life Sciences		Horizon 2020		Topsector Life Sciences and Health	
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3	Royalties or licenses	<input checked="" type="checkbox"/> None	
4	Consulting fees	<input type="checkbox"/> None	
		Critical Path Institute	
		Kyowa Kirin	
		UCB	
		Zambon	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Abbvie	
		Bial	
		Biogen	
		GE Healthcare	
		Oruen	
		Roche	
		UCB	
		Zambon	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety	<input checked="" type="checkbox"/> None	

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	Monitoring Board or Advisory Board	UCB	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

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