

Mohamed Shamji

in relation to the LEE has been provided.

# **EUROPEAN UNION OF MEDICAL SPECIALISTS (UEMS)** EUROPEAN ACCREDITATION COUNCIL FOR CME (EACCME®)

RUE DE L'INDUSTRIE 24, BE- 1040 BRUSSELS T+32 2 649 51 64

eaccme.uems.eu - accreditation@uems.eu

Name of commercial company Research grants from Allergy Therapeutics and LETI Pharma through Imperial College

Rovolo bio therapeutics, Allergy

### **Conflict of Interest Disclosure Form**

(to be completed by Scientific/Organizing Committee Members)

AFFILIATION:
In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of
Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3
years, whether due to a financial or other relationship, must be provided to the EACCME® upon
submission of the application. COI declarations signed more than 6 months before the date of the event
will not be accepted. Declarations must be made available online on the event website of the LEE.

### **DISCLOSURE**

Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses

 $lue{}$  I have no potential conflict of interest to report

☐ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

DocuSigned by:

Date: 08.05.2025

London

therapeutics

Signature:

EU Transparency Register ID 219038730914-92



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## **Conflict of Interest Disclosure Form**

(to be completed by Scientific/Organizing Committee Members)

NAME: Jolanto Wolusial-Shompe AFFILIATION: Noter Merituk of Occupational Mexicine

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

## **DISCLOSURE**

I have no potential conflict of interest to report

☐ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's

bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

bleute bellu meh- slivye Date:

187 April 202T

UEMS<sub>aisbl</sub> – Union Européenne des Médecins Spécialistes VAT n° BE 0469.067.848 RPM Bruxelles-Brussels EU Transparency Register ID 219038730914-92



Signature:

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# **Conflict of Interest Disclosure Form**

(to be completed by Scientific/Organizing Committee Members)

NAME:Andrea Matucci			
AFFILIATION: Careggi University Hospital - Florence - Italy			
In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.			
DISCLOSURE			
☐ I have no potential conflict of interest to report			
☐ I have the following potential conflict(s) of interest to re	eport		
Type of affiliation / financial interest	Name of commercial company		
Receipt of grants/research supports:			
Receipt of honoraria or consultation fees: GSK, Sanofi, Astra Z	Zeneca, Chiesi, Novartis, Takeda		
Participation in a company sponsored speaker's bureau: GSK, Sanofi, Astra Zeneca			
Stock shareholder:			
Spouse/partner:			
Other cupport (places enecify):			

Date:

01 April, 2025



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#### **Conflict of Interest Disclosure Form**

(to be completed by Scientific/Organizing Committee Members)

NAME: Oscar Palomares Gracia

AFFILIATION: Complutense University of Madrid

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#### **DISCLOSURE**

☐ I have no potential conflict of interest to report

X I have the following potential conflict(s) of interest to report

#### Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports: MICINN, MINECO, CAM, AstraZeneca, Inmunotek, Novartis.

Receipt of honoraria or consultation fees: AstraZeneca, Novartis, Sanofi-Genzyme and Regeneron

Participation in a company sponsored speaker'sbureau: AstraZeneca, GlaxoSmithKline, Inmunotek S.L, Novartis, Sanofi-Genzyme and Regeneron

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: Date: 6-4-2025



Signature:

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### **Conflict of Interest Disclosure Form**

(to be completed by Scientific/Organizing Committee Members)

NAME: Leticia de las Vecillas Sánchez
AFFILIATION: La Paz University Hospital

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### **DISCLOSURE**

lacksquare I have no potential conflict of interest to report
∡ I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Astra Zeneca, GSK

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify): Travel/events grant

Astra Zeneca, GSK

01/04/2025

Date:



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### **Conflict of Interest Disclosure Form**

(to be completed by Scientific/Organizing Committee Members)

NAME:	Thomas Eiwegger
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AFFILIATION: Dept. Pediatrics and Adolescent Medicine, Univ. Hospital St. Poelten, Austria

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

#### **DISCLOSURE**

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☑ I have the following potential conflict(s) of interest to report

#### Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

IFD, CIHR, FAAP, RESTRACOMP, FWF,

Receipt of honoraria or consultation fees: ALK, Aimune, ThermoFisher, Nutricia, VAMED, Bencard, Sanofi, Novartis

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Associate editor for Allergy.

He/his lab received unconditional/ in kind contributions from Macro Array

Diagnostics and ALK.

CO-investigator investigator initiated clinical trial with in kind support by Novarits.

Site PI of company sponsored trials by Greer Stallergen and Novartis

Signature:



Date: April 12th, 2025



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#### **Conflict of Interest Disclosure Form**

(to be completed by Scientific/Organizing Committee Members)

NAME:	Alessandra Vultaggio
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Departmet of Experimental and Clinical Medicine, University of Florence,

AFFILIATION: Careggi University hospital, Florence, Italy

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#### **DISCLOSURE**

☐ I have no potential conflict of interest to report

☑ I have the following potential conflict(s) of interest to report

#### Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports: GSK

Receipt of honoraria or consultation fees:

GSK, AstraZeneca, Sanofi, Byocrist, CSL

Behring, Firma,

Participation in a company sponsored speaker's

bureau: NO

Stock shareholder: NO

Spouse/partner: NO

Other support (please specify):

Signature: Date: 31 March 2025



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### **Conflict of Interest Disclosure Form**

(to be completed by Scientific/Organizing Committee Members)

NAME: Maria J Torres

AFFILIATION: University of Malaga and Malaga Regional University Hospital

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

#### **DISCLOSURE**

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Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

☐ I have no potential conflict of interest to report

Stock shareholder:

Spouse/partner:

Other support (please specify):

Name of commercial company

European Commission, SEAIC, ISCIII

Leti Laboratories, Aimmune Therapeutics, Diater Laboratories

Signature: Date: 19th May 2025