



EUROPEAN UNION OF MEDICAL SPECIALISTS
The European Accreditation Council for
Continuing Medical Education – EACCME®
Institution of the UEMS_{aisbl}

AVENUE DE LA COURONNE, 20
BE- 1050 BRUSSELS
www.eaccme.eu

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F +32 2 640 37 30
accreditation@uems.net

Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME : Mohamed Shamji.

AFFILIATION: Imperial College London

In accordance with criterion 24 of document UEMS 2012/30 “Accreditation of Live Educational Events by the EACCME”, all declarations of potential or actual conflicts of interest, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. Declarations also must be made readily available, either in printed form, with the programme of the LEE, or on the website of the organiser of the LEE. Declarations must include whether any fee, honorarium or arrangement for reimbursement 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

Receipt of grants/research supports:

Name of commercial company

- Via Research grants via Imperial College London from MRC (UK), NIHR, NIAID, Food Standards Agency (UK), Immune Tolerance Network (USA), Novartis, LETI, Stallergenes, ALK, Regeneron Pharmaceuticals and ASIT Biotech sa.

Receipt of honoraria or consultation fees:

ALK/ ASIT Biotech/ UCB/ Allergopharma

**UNION EUROPÉENNE DES MÉDECINS SPÉCIALISTES
EUROPEAN UNION OF MEDICAL SPECIALISTS**

Association internationale sans but lucratif – International non-profit organisation

Participation in a company sponsored speaker's bureau: NA
Stock shareholder: NA
Spouse/partner: NA
Other support (please specify): NA

Signature: *M. Shamji*

Date: 23.09.2018



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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME :

..... 

AFFILIATION:Hon Consultant Allergist & Rhinologist, RNTNE Hospital,
London.....

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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:
ALK/Abello, Mylan

Participation in a company sponsored speaker’s bureau:
ALK/ Abello, Stallergenes, Mylan

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Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:



Date:5.6.18



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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME: Ludger Klimek.....

AFFILIATION: ... Center for Rhinology and Allergology, Wiesbaden, Germany.....

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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

Receipt of grants/research supports:

Name of commercial company

ALK-Abello, Danmark, Allergopharma, Germany, Artu-Biologicals, Netherlands, Bencard, Great Britain, Bionorica, Germany, Biomay, Austria, Boehringer Ingelheim, Germany, Cytos, Switzerland, HAL, Netherlands, GSK, Great Britain, Leti, Spain, Lofarma, Italy, Novartis, Switzerland, MYLAN, USA, Roxall, Germany; European Union, DFG; BMBF, EU-Kommission

Receipt of honoraria or consultation fees:

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Participation in a company sponsored speaker's bureau:	ALK-Abello, Danmark, Allergopharma, Germany, Bencard, Great Britain, Bionorica, Germany, Boehringer Ingelheim, Germany, HAL, Netherlands, GSK, Great Britain, Leti, Spain, Lofarma, Italy, Novartis, Switzerland, MYLAN, USA
Stock shareholder:	None
Spouse/partner:	None
Other support (please specify):	None

Signature:

Date: 28.05.2018





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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME: Ralph Mösges

AFFILIATION: Institute of Medical Statistics, and Computational Biology, Medical Faculty, University of Cologne, Germany and CRI-Clinical Research International Ltd., Hamburg, Germany

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Type of affiliation / financial interest

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Name of commercial company

ASIT biotech, Bencard, Leti, Lofarma, Stallergenes, Optima, Bitop AG, Hulka, Ursapharm

ALK, allergopharma, Allergy Therapeutics, Bencard, Lofarma, Stallergenes, Friulchem, Hexal, Servier, Klosterfrau, Bayer, FAES, GSK, MSD, Johnson&Johnson, Meda, Novartis, Stada, UCB, Nuvo

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Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Non-financial support from: Lofarma,
Roxall, Atmos, Bionorica, Novartis,
Otonomy, Ferrero

Signature:



Date:

25-05-2018



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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME: OSCAR PALOMARES GRACIA

AFFILIATION: COMPLUTENSE UNVIERSITY OF MADRID

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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:

Inmunotek S.L, Novartis and MINECO

Receipt of honoraria or consultation fees:

Novartis, Sanofi Genzyme.

Participation in a company sponsored speaker’s bureau:

Allergic Therapeutics, Amgen, AstraZeneca, Inmunotek S.L, Sanofi Genzyme, Stallergenes and Novartis.

Stock shareholder:

None

Spouse/partner:

None

Other support (please specify):

None

Signature: Oscar Palomares Gracia

Date: 25-05-2018



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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME : Philippe Gevaert

AFFILIATION: Ghent University

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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:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 24 may 2018



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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME : ...Lars Jacobsen.....

AFFILIATION:ALC Allergy Learning.....

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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:

Date: 24/5 2018



Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME : Peter Hellings

AFFILIATION: Dept of Otorhinolaryngology, Univ Hospitals Leuven, Belgium, and
Academic Medical Center, Univ of Amsterdam, The Netherlands

In accordance with criterion 14 of document UEMS 2016/20 "EACCME® criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of potential or actual conflicts of interest, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. Declarations also must be made readily available, either in printed form, with the programme of the LEE, or on the website of the organiser of the LEE. Declarations must include whether any fee, honorarium or arrangement for reimbursement of expenses in relation to the LEE has been provided.

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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:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature: 

Date: 27-02-2018



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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME: Schmidt-Weber

AFFILIATION: ZAUM, TUM

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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:	Bencard, LETi, ALLERGOPHARMA
Receipt of honoraria or consultation fees:	Bencard, Leti, Allergopharma
Participation in a company sponsored speaker's bureau:	/
Stock shareholder:	/
Spouse/partner:	/
Other support (please specify):	/

Signature:

Date:

14. May 2018



EUROPEAN UNION OF MEDICAL SPECIALISTS (UEMS)

EUROPEAN ACCREDITATION COUNCIL ON CME (EACCME®)

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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME : IOANA OCTAVIA AGACHE

AFFILIATION: FACULTY OF MEDICINE, TRANSILVANIA UNIVERSITY, BRAHOV, ROMANIA

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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: NATIONAL RESEARCH GRANT Ph II - Pn-TE -

Receipt of honoraria or consultation fees: CHEER, ASTRA ZELIECA 2014-4-23e

Participation in a company sponsored speaker's bureau: CHEER, ASTRA ZELIECA, NOVARTIS

Stock shareholder: —

Spouse/partner: —

Other support (please specify): —

Signature:

Date:

18 NOV 2017