

ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Robin Schmidt

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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.

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Date: 6/6/2025

Your Name: Bernhard Gebauer

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

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Date: 6/6/2025

Your Name: Nilufar Akbari

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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Your Name: Christoph Roderburg

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Your Name: Giovanni Federico Torsello

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None <table border="1" data-bbox="383 474 1515 579"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None <table border="1" data-bbox="383 688 1515 793"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							

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.

ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Uli Fehrenbach

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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.

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ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Timo Alexander Auer

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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.

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4	Consulting fees	<input checked="" type="checkbox"/> None <table border="1" data-bbox="383 254 1515 390"> <tr><td>Boston Scientific</td><td></td></tr> <tr><td>Bayer AG</td><td></td></tr> <tr><td>BD</td><td></td></tr> <tr><td></td><td></td></tr> </table>		Boston Scientific		Bayer AG		BD			
Boston Scientific											
Bayer AG											
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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None <table border="1" data-bbox="383 474 1515 575"> <tr><td>Boston Scientific</td><td>MERIT</td></tr> <tr><td>Bayer AG</td><td>SIRETX</td></tr> <tr><td>BD</td><td></td></tr> </table>		Boston Scientific	MERIT	Bayer AG	SIRETX	BD			
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Bayer AG	SIRETX										
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7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None <table border="1" data-bbox="383 1037 1515 1138"> <tr><td>Boston Scientific</td><td>Balt</td></tr> <tr><td>Bayer AG</td><td>IGEA</td></tr> <tr><td>Guerbet</td><td></td></tr> </table>		Boston Scientific	Balt	Bayer AG	IGEA	Guerbet			
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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1" data-bbox="383 1470 1515 1570"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>									
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11	Stock or stock options	<input checked="" type="checkbox"/> None	
		EDAP TMS	
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.

ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Raphael Mohr

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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.

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ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Gracia Lana Ardila Pardo

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Winna Lim

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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

ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Fabio Pivetta

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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.

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ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Elif Can

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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.

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ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Charlie Alexander Hamm

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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.

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ICMJE DISCLOSURE FORM

Date: 6/4/2025

Your Name: Frank Tacke

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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.

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ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Bernd Hamm

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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

ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Linda Hammerich

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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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ICMJE DISCLOSURE FORM

Date: 6/6/2025

Your Name: Lynn Jeanette Savic

Manuscript Title: Immunologic effects of minimally invasive tumor therapies for hepatocellular carcinoma: the ImmuMITT trial

Manuscript Number (if known): JHEPR-D-24-01323R2

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.

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