

# Declaration of Interest

## A. General Information

Full Name: Peter Jüni

Date (MM/DD/YYYY): 2/25/2022

What is the nature of your role at the Science Table: Scientific Director

## B. Declaration of Interest

Please fill out the following table by indicating whether you or your institution have received compensation, regardless of the amount, in the form of payment or services, from entities in the health care, public health, or other related arenas that could be perceived to influence your participation at the Science Table, or related aspects. Please report all compensation that has been received in the last 3 years prior to your participation at the Science Table.

If you have selected 'Yes' for any of the categories below, please indicate whether the compensation is related to COVID-19 or not, the name of the entity providing the compensation, and an explanation. If you have more than one relationship for each Category, please ensure to include all of them by selecting the '+' sign at the end of each row.

Category	No	Yes, paid to you	Yes, paid to your institution	Related to COVID-19?		Entity	Explanation
				No	Yes		
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canadian Institutes of Health Research (CIHR)	Tier 1 Canada Research Chair in Clinical Epidemiology of Chronic Diseases
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Appili Therapeutics	Control of COVID-19 outbreaks in long term care with Favipiravir (CONTROL-COVID-Favipiravir). Co-PI.
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Astra Zeneca	Cardiovascular research
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Biotronic	Cardiovascular research
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Biosensors International	Cardiovascular research
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Eli Lilly	Cardiovascular research
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Medicines Company	Cardiovascular research
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canadian Institutes of Health Research	TRICS IV - Restrictive versus Liberal Transfusion in Younger Patients Undergoing Cardiac Surgery
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Various: Task 54, Defense Research Development Canada, Department of National Defense, Ottawa, Canada; St Michael's Hospital Foundation,	Coagulopathy of COVID-19: a Pragmatic Randomized Controlled Trial of Therapeutic Anticoagulation versus Standard Care. Co-PI.

						Toronto, Canada; St Joseph's Health Centre Foundation, Toronto, Canada; International Network of Venous Thromboembolism Clinical Research Networks (INVENT) Kickstarter Award	
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	University of Toronto	Prone positioning for patients on general medical wards with COVID19: A multicenter pragmatic randomized trial. Co-Applicant.
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CIHR Grant + U of T	Careful Ventilation in COVID 19 –induced ARDS - The CAVIARDS 19 Trial. Co-Applicant.
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	University of Toronto	Control of COVID-19 outbreaks in long term care. Co-PI.
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Canadian Institutes of Health Research (CIHR), Operating Grant: COVID-19 Rapid Research Funding Opportunity - Therapeutics	Semaglutide to reduce Myocardial injury in patients with COVID-19 (SEMPATICO): An exploratory randomized controlled clinical trial. Co-Applicant.
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Canada: CIHR-SPOR	REMAP-CAP: a platform trial for severely ill patients with COVID-19 / REMAP-CAP: Randomized, Embedded, Multifactorial Adaptive Platform trial for Community-Acquired Pneumonia. Co-Applicant.
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canada Foundation for Innovation (CFI), John R. Evans Leaders Fund	The CardioLink Research Platform: Innovations in Cardiovascular Surgery & Cardiometabolic Care
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canadian Institutes of Health Research	The Functional Improvement Trajectories After Surgery (FIT After Surgery) Study: A Multicentre Prospective Cohort Study to Evaluate the Incidence, Trajectories, Risk Factors, Impact and Healthcare Costs

Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canada Foundation for Innovation, Operating Grant: SPOR Innovative Clinical Trial Multi-Year Grant	Evaluating Innovative Health Care Solutions to Improve Outcomes for Persons with Type 1 Diabetes using a Novel Electronic Data Repository Reducing Diabetic Foot Complications through a Multidisciplinary Chiropodist Based Intervention
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Arthritis Society. Young Investigator Operating Grant	Personalization of osteoarthritis care using large-scale randomized evidence: network meta-analysis and methodological development
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Canadian Institutes of Health Research.	Operating Grant: COVID-19 Rapid Research Funding Opportunity Title: COVID-19 Ring-based Prevention trial with Lopinavir-ritonavir (CORIPREV-LR).
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CanCOVID	Co-principal investigator
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canadian Institutes of Health Research	Nutrition Recommendation Intervention trials in children's Healthcare
Grant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Canadian Institutes of Health Research	PRECEDE: Preconception risk factors and Cardiometabolic health in Early childhood
Consulting	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Amgen	Honoraria to the institution for participation in advisory board
Consulting	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ava	Honoraria to the institution for participation in advisory board
Consulting	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fresenius	Honoraria to the institution for participation in advisory board
Board membership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Employment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.

Payment for lectures including service on speaker bureaus	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Interaction 2019	Interaction 2019 speaker honorarium Sept 21, 2019 ('clinical research' talk)
Payment for manuscript preparation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Patents	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Royalties	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Payment for development of educational presentations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Fees for participation in review activities such as data monitoring boards, statistical analysis, end point committees, and the like	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Payment for writing or reviewing any reports or publications	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Provision of writing assistance, equipment, software, or administrative support	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Expert testimony	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Hicks Morley Hamilton Stewart Storie LLP City of Toronto	Paid expert witness on vaccine mandates for a university, a hospital, a municipality, and another public employer)
Stock/stock options	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.	Click or tap here to enter text.
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Amgen	Travel expenses for participation in advisory board meetings
Support for travel/accommodations/meeting expenses	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fresenius	Travel expenses for participation in advisory board meetings

## C. Other Relationships

Are there any other relationships or activities that could be perceived to influence your participation at the Science Table (COVID-19 related or not)? Please select one of the following:

- No, there are no other relationships/conditions/circumstances that present, or may be perceived to present, a potential conflict of interest.
- Yes, there are relationships/conditions/circumstances that present, or may be perceived to present, a potential conflict of interest.

If you have selected 'Yes', use the following table to indicate whether the relationship is related to COVID-19 or not, provide the name of the entity (if applicable), and an explanation describing the nature of the relationship. If you have more than one relationship, please ensure to include all of them by selecting the '+' sign at the end of each row.

Category	Related to COVID-19?		Entity	Explanation
	No	Yes		
Relationship	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Abbott Vascular	Unpaid member of steering group or executive committee of trials
Relationship	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Astra Zeneca	Unpaid member of steering group or executive committee of trials
Relationship	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Biotronik	Unpaid member of steering group or executive committee of trials
Relationship	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Biosensors	Unpaid member of steering group or executive committee of trials
Relationship	<input checked="" type="checkbox"/>	<input type="checkbox"/>	St. Jude Medical	Unpaid member of steering group or executive committee of trials
Relationship	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Terumo	Unpaid member of steering group or executive committee of trials
Relationship	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Medical Company	Unpaid member of steering group or executive committee of trials

## D. Acknowledgement

I certify that the above information contained in this Declaration of Interest is true and correct to the best of my knowledge. If any matter that gives rise to, or may be perceived to give rise to, a conflict of interest during my participation at the Science Table, I will promptly notify the Secretariat of the Science Table, and provide an updated Declaration of Interest.

Full Name: Peter Jüni

Date (MM/DD/YYYY): 2/25/2021