

ICMJE DISCLOSURE FORM

Date: 4/29/2022

Your Name: Annika Volmari]

Manuscript Title:] The hepatitis delta virus and chronic Hepatitis D

Manuscript Number (if known): JHEPAT-D-22-00599

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: 4/29/2022

Your Name: Maura Dandri

Manuscript Title:] The hepatitis delta virus and chronic Hepatitis D

Manuscript Number (if known): JHEPAT-D-22-00599

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Date: 4/29/2022

Your Name: [Marc Lütgehetmann]

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