

#### **Transparency Declaration**

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## Disclosure of Payments Made by Chugai Across Europe in 2023

Published June 2024

Chugai Pharma Europe Ltd.

C-GB-00001406: June 2024

#### Introduction and Background

Chugai Pharma Europe Ltd and Chugai Pharmaceutical Co. Ltd, Japan disclose all relevant transfers of value to Healthcare Professionals (HCPs) and Healthcare Organisations (HCOs) made in the European Union in accordance with the EFPIA Disclosure Code<sup>1</sup> and the relevant local Codes of Practice and/or local legal requirements, and also in accordance with Data Protection regulations (including but not limited to the General Data Protection Regulation (GDPR) (EU) 2016/679 and local legislation)<sup>2</sup>.

The move towards greater transparency is part of a Europe-wide initiative designed to bring clarity and transparency to the manner in which the research based pharmaceutical industry and the healthcare community collaborate, which ultimately have been shown to benefit patient care. The HCP offers invaluable expertise on disease management and plays an important part in informing the pharmaceutical industry's efforts to improve patient care and treatment – both critical to improving health outcomes. It's important that these interactions meet the highest standard of integrity that patients, governments, regulatory bodies, other stakeholders and the media expect. Our goal is to assure the public that such relationships do not influence clinical decisions and that they can trust their HCP to recommend treatment, or administer appropriate care based solely on clinical evidence and experience.

Chugai Pharma Europe Ltd and Chugai Pharmaceutical Co. Ltd, Japan support the initiative by The European Federation of Pharmaceutical Industries and Associations (EFPIA) (<a href="https://www.efpia.eu/">https://www.efpia.eu/</a>) and has taken the decision to disclose all transfers of value in keeping with the EFPIA Code on Disclosure on Transfers of Value to Pharmaceutical Companies to HCPs and HCOs (<a href="https://www.efpia.eu/relationshipscode/disclosure-of-payments/">https://www.efpia.eu/relationshipscode/disclosure-of-payments/</a>) for both direct and indirect payments made across the European Union from any part of the Chugai corporation. Furthermore, some payments will be disclosed by Chugai Pharma Europe to other European countries not within the European Union.

The local payments in those countries where there is a Chugai affiliate business then these are disclosed via central platforms in France, Germany and the UK respectively in accordance with local Code requirements:

- Chugai Pharma UK disclose in accordance with both The Association of British Pharmaceutical Industry (ABPI)<sup>3</sup> and the Irish Pharmaceutical Healthcare Association (IPHA)<sup>4</sup> as the company undertakes marketing activities in both Member States.
- Chugai Pharma France disclose in accordance with Loi Bertrand via the website Ordre National Des Medicins<sup>5</sup>.
- Chugai Pharma Germany disclose in accordance with the Code of Conduct of the members of Verein Arzneimittel und Kooperation im Gesundheitswesen e.V. ("AKG")<sup>6</sup>.

- Chugai Pharmaceutical Co. Ltd, Japan disclose in accordance with The Japan Pharmaceutical Manufacturers Association (JPMA) Code of Practice<sup>7</sup>.
- Payments made in the United States are disclose in accordance with The Physician Financial Transparency Report ('Sunshine Act') managed by Genentech<sup>8</sup>.

Chugai Pharma Europe Ltd and Chugai Pharmaceutical Co. Ltd, Japan have also taken the initiative to disclose all transfers of value relating to those HCPs and HCOs who are registered to practice in European countries where there is no Chugai office or marketing activities. Direct payments take place where a HCP has provided consultative support with regards to product development in order to give a better understanding of local treatment and regulatory needs. For these engagements there is a contract containing clearly defined consultative role in content, context and format and any payment would be strictly controlled through standard Fair Market Value limitations<sup>9</sup>. Such engagements would include attendance to advisory boards meetings or speaking at a company-sponsored event. Indirect payments take place during the research and development phase where responsibility for managing a clinical trial has been outsourced to a Clinical Research Organisation (CRO). The CRO are responsible for making these payments, and Chugai is responsible for ensuring such indirect payments are disclosed accurately. Payments relating to research and development are to be disclosed in an aggregated form in accordance with EFPIA requirements:

- Research and Development ToV. Research and Development ToVs in each Reporting Period must be disclosed by each Member Company on an aggregate basis.
- Costs related to Events that are clearly related to activities covered in this section can be included in the aggregate amount under the "Research and Development Transfers of Value" category.

Payments relating to activities that do not fit the criteria of research and development are disclosed at an individual level. Payments made by Chugai Pharma Europe Ltd and Chugai Pharmaceutical Co. Japan will also be made in the non R&D setting where a therapy area specialist may be invited to provide advice at an advisory board or attend a company-sponsored event as a speaker.

In most EU Member States explicit consent is a fundamental requirement in order to disclose at a named individual level which captures payments relating to:

- the contribution of costs related to events (e.g. travel, accommodation) and includes sponsorship
- fees for service and consultancy.

Chugai upholds and works according to The General Data Protection Regulation 2016/679 (GDPR). Where explicit consent is not given then the transfer of value will be disclosed in an aggregated form.

Chugai encourages all transfers of value to be disclosed in a form that is transparent and will disclose according to the requirements of each Member State.

Payments made to Healthcare Organisations are all disclosed at a named institutional level.

The disclosed payments are in local currency where possible. The information given relates to payments made in the financial year Jan 1st, 2023 to Dec 31st, 2023 and relates to the dates of payments rather than event dates.

The EFPIA Code requires disclosure in the country where the Recipient has its principal practice. All Transfers of Value to a given recipient will be disclosed in the country where this principal practice is located.

The EFPIA Code states that each Member Company will decide how to organise its disclosures, either at a central or local level, unless the national code fixes the platform of disclosure. However, disclosure should conform to the national code requirements and relevant disclosures should be publicly accessible in the country where the Recipient has their practice. If a Member Company is not resident or does not have a subsidiary or an affiliate in the country where the Recipient has their principal practice, the Member Company should disclose the Transfer of Value in a manner consistent with the national code of the country where the Recipient has their practice. This information will be publicly available for 3 (three) years and stored for a minimum of 5 (five) years. Chugai does not support partial disclosure. Chugai supports these initiatives and will adhere to the relevant Codes of Practice.

This is a progressive initiative with the objective for Chugai to disclose all transfers of value in a format which is in accordance with local requirements (using the standard template).

Chugai is not a direct member of EFPIA and does not have a business office in every country so is not required to disclose in every country. Chugai is doing so in the spirit of transparency.

Please note that currency conversion rates may result in disclosed figures being slightly different. To discuss anything further please contact <a href="mailto:disclosure@chugai-pharm.co.uk">disclosure@chugai-pharm.co.uk</a>

Head of Compliance

Chugai Pharma Europe Ltd

#### References:

- 1. EFPIA Code on Disclosure on Transfers of Value to Pharmaceutical Companies to Healthcare Professionals and Healthcare Organisations (www.efpia.eu/relationships-code/disclosure-of-payments/)
- 2. <a href="https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32016R0679&qid=1719343340075">https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32016R0679&qid=1719343340075</a>
- 3. www.abpi.org.uk/reputation/disclosure-uk/
- 4. www.transferofvalue.ie/
- 5. <u>www.transparence.sante.gouv.fr/flow/main?execution=e2s1</u>
- 6. www.ak-gesundheitswesen.de/?cn-reloaded=1
- 7. www.jpma.or.jp/english/
- 8. www.gene.com
- 9. www.efpia.eu/relationships-code/national-codes/

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#### Payments Made in 2023

Payments were made to Healthcare Professionals and/or Healthcare Organisations in the below countries.

Click on the 'COUNTRY NAME' to access the disclosed payment details.

Click on 'Methodological notes' for full details of Chugai's disclosure methodology.

European Member States where Payments were made in 2023	Link to Chugai's methodological notes
Austria	
<u>Belgium</u>	
Czech Republic	Methodological notes
<u>Italy</u>	
Netherlands	
Norway	
<u>Portugal</u>	
Spain	
Sweden	
Switzerland	

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## Austria

1 2		PHAR	RMIG CODE	OF CONDU	CT - GUIDAN	ICE REGARI	DING ARTICLI	E 9 - STANDA	ARDIZED DISC	CLOSURE TE	MPLATE		
3 DISC	LOSURE TE	MPLATE - AF	RTICLE 9 Co	C (TRANSPA	RENCY)		Report	ting period (ca	ılendar year): 2	023 Date of p	oublication: 30	0/06/2024	
5	Full Name	Practic	ce or business a	ddress	Where available: physician number commercial register number, association register number	Donations and Grants to HCOs	(cf. Art	bution to costs of licle 9.4a 11(1), (ii) CoC cole 9.4b 21(1), (ii), (iii) C	andlor	consu (cf. Article 9.4)	ervices and Iltancy 21 CoC and/or 15 31 CoC)		
6	(cf. Anicle 9.4 CoCi	(cf. Anicle 3.4 CoCi	(ct. Anicle 9.4 CoCi	(cl. Anicle 9.4 CoCi	(cf. Anticle 3.4 CoCl	(ct. Anicle 9, 4b 1) CoCi	Support agreements with HCOs I third parties appointed by HCOs to manage an event	Registration fees	Travel & accomodation	Fees	Outlays		TOTAL Optional
7		MED DISCLOSU	RE FOR HEALTH	ICARE PROFESS	IONALS [one line		ers of value during a						
8	HCP1					N/A	N/A	0	0	0	0	0	0
9	HCP2					N/A	N/A	0	0	0	0	0	0
10 % 11 ±	etc.					N/A	N/A	0	0	0	0	이	0
11 🖁	AGGREGATE DI	SCLOSURE FOR	HEALTHCARE F	PROFESSIONALS	5								
12	Total amount					N/A	N/A	0	0	0	0		0
13	Total number of rec	cipients of transfers	of value by subtype	,		N/A	N/A	0	0	0	0	0	0
14			recipients by subtyp			N/A	N/A	0	0	0	0	0	0
15	INDIVIDUAL NAM	MED DISCLOSUF	RE FOR HEALTH	CARE ORGANIZA	ATIONS [one row p	er HCO, all transf	ers of value during a	reporting period for	an individual HCO w				
16 "	HCO1	MEDICAL UNIVERSITY OF VIENNA	Waehringer Guertel 18-20 A- 1090 Vienna, Austria			0	35000	0	0	0	0	o	35000
17 9	etc.					0	0	0	0	0	0	0	0
18	AGGREGATE DI	SCLOSURE FOR	HEALTHCARE (	ORGANIZATIONS									
19	Total amount					0	0	0	0	0	0	0	0
20	Total number of recipients of transfers of value by subtype					0	0	0	0	0	0	0	0
21			recipients by subtyp			0	0	0	0	0	0	이	0
22			R RESEARCH & D										
23 🗠 🗅	Transfers of value r	e Research & Deve	elopment, cf. Article	9.3a CoC									2850
	s roforrod tu aro thus althearo prufossiuna			(C=C)									
27 HCO - L	althears setablishms	atr, organizations or		Le meaning of Article	2.2 C=C								
	orearch and developm orting period is the ca												
20	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,												

# Belgium

Data Disclosure Form  Date of Publication: 30-06-20.												0.06.2024		
		Full Name	HCPs: City of Principal Practice HCOs: city where registered	Country of Principal Practice	Principal Practice Address	Unique Country Identifier OPTIONAL		Contributi	ion to costs of I	Events	Fee for serv	ice and consultancy		0002024
HCPc	5						Donations and Grants to HCOs	Sponsorship agreements with HCOs/third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accomodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accomdation relevant to the contract		Total Optional
		INDIVIDUAL NAMED DISCLOSURE - 0	one line per HCP (i	.e. all transfers of v	ralue during a year for an indiv	vidual HCP only, as ap	will be summe propriate)	ed up: itemization	should be a	vailable for th	e individual Re	cipient or public autho	orities' cons	ultation
									0	0	0	0		o
	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons													
		Aggregate amount attributable to trans	fers of value to su	ıch Recipients					0	0	787.50	0		787.50
		Number of Recipients in aggregate disc	closure						0	0	1	0		0
		% of the number of Recipients included	d in the aggregate	disclosure in the to	otal number of Recipients disc	closed			0	0	100%	0		0
		INDIVIDUAL NAMED DISCLOSURE - on	e line per HCO (i.e. a	ll transfers of value d	uring a year for an individual HCO	will be sumn	ned up: itemizati	on should be availa	ble for the ind	ividual Recipient	or public author	ities' consultation only, as	appropriate	)
HC	<u> </u>						0	0	0	О	0	0		0
OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons														
		Aggregate amount attributable to transfers of v	value to such Recipie	nts			0	0	0	0	0	0		0
		Number of Recipients in aggregate disclosure					0	0	0	0	0	0		0
		% of the number of Recipients included in the	aggregate disclosure	in the total number of	Recipients disclosed		0	0	0	0	0	0		0

AGGREGATE DISCLOSURE	
Transfers of Value re Research & Development as defined	0

## Czech Republic

3							Přílo	ha 2 - ŠABLO	NA					
5		Celé jméno	odborníci: místo výkonu hlavní praxe (obec), Zdravotnické zařízení: místo	Stát výkonu hlavní praxe	Adresa hlavní praxe	Unikátní lokální identifikátor státu VOLITELNĚ	Dary a granty zdrav.	Příspěvky na n	áklady akcí (Čl. 3.01	1.1.b & 3.01.2.a)		y a konzultace (Čl. & 3.01.2.c)		CELKEM
6		(Odst. 1.01)	(Čl. 3)	(Příloha 1)	(Čl. 3)	(Čl. 3)	zařízením (Čl. 3.01.1.a)	Smlouvy o sponzorování se zdrav. zařízeními / třetími stranami pověřenými zdrav. zařízeními pořádáním akce	Registrační poplatky	Doprava a ubytování	Platby/odměny	Platby nebo jina plnění související s odměnou nebo sjednané v poradenské smlouvě včetně dopravy a ubytování příslušné k dané		VOLITELNĚ
7		UVEDENÍ JE	EDNOTLIVÝCH JMEN	- každý zdrav. odbo	rník na jeden řádek	(tj. všechny platby n		ůběhu roku na jedno emců nebo veřejnýc		rníka budou sečteny: p	odle potřeby se před	kládá položkový roz <sub>l</sub>	ois pouze pro potřel	ou jednotlivých
8	níci	MUDr. A					-	-	0	0	0	0		0
9	dpo	MUDr. B					-	-	0	0	0	0		0
10	;tí o	atd.					-	-	0	0	0	0		0
11	Zdravotničtí odborníci	OSTATNÍ, NEUVEDENO VÝŠE - pokud informace nelze vzhledem k právním předpisům zveřejnit individuálně												
12	drav			itby nebo jiná plnění	těmto příjemcům -	ČI. 3.02	-	-	0	198878.5	80000	0		278878.5
13	Z		(případně jmenný s	•			-	-	0	1	1	0		1
14		% z celkových	plateb nebo jiných p	olnění na jednotlivé z	drav. odborníky - Č	. 3.02	-	-	0	100%	100%	0		100%
15					UVEDENÍ JEDN	OTLIVÝCH NÁZVŮ	- každé zdrav. zaříz	ení na jeden řádek (t	j. všechny platby ne	ebo jiná plnění v průbě	hu roku na jednotliv			
16	jų,	zarav. zarizeni					0	0	0	0	0	0		0
17	aříze	Zurav. zanzeni 2					0	0	0	0	0	0		0
18	Ká Z	atd.					0	0	0	0	0	0		0
19	avotnická zařízení					STATNÍ, NEUVEDE	NO VÝŠE - <mark>pokud</mark> ir	nformace nelze vzhle	edem k právním před	dpisům zveřejnit indivi	duálně			
20		Souhrnná část	ka připadající na pla	itby nebo jiná plnění	těmto příjemcům -	ČI. 3.02	0	0	0	0	0	0		0
21	Zdı	Počet příjemců	(případně jmenný s	seznam) - Čl. 3.02			0	0	0	0	0	0		0
22		% z celkových	plateb nebo jiných p	olnění na jednotlivé z	drav. zařízení - Čl. :	3.02	0	0	0	0	0	0		0
23														
24	voj							SOUHRNNÉ ZVEŘE	JNĚNÍ					
25	Výzkum a vývoj				Platby a jiná	plnění spojená s	výzkumem a výv	ojem - Odstavec	3.04 and Příloha	1			0	0

## Italy

				Data Di	sclos	ure Forr	n				,	oto of Dublica	tion: 30-06-2024
	Full Name	HCPs: City of Principal Practice HCOs: city where registered	Country of Principal Practice	Principal Practice Address	Unique Country Identifier OPTIONAL		Contributi	on to costs of	Events	Fee for ser	vice and consultancy	ate of Publica	NOT. 30-06-2024
HCPs						Donations and Grants to HCOs		Registration Fees	Travel & Accomodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accomdation relevant to the contract		Total Optional
	INDIVIDUAL NAMED DISCLOSURE -	one line per HCP	(i.e. all transfers of	value during a year for an ind		P will be sumr appropriate)	ned up: itemizati	on should be	available for	the individual	Recipient or public a	uthorities'	consultation
	Luca Richeldi	Roma	Italy	Largo Agostino Gemelli 8, 00168 Roma				0	0	930.00	0		930.00
	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons												
	Aggregate amount attributable to trans	sfers of value to s	such Recipients					0	0	0	0		0
	Number of Recipients in aggregate di	sclosure						0	0	0	0		0
	% of the number of Recipients include	ed in the aggregat	e disclosure in the	total number of Recipients dis	sclosed			0	0	0	0		0
	INDIVIDUAL NAMED DISCLOSURE - o	ne line per HCO (i.e.	all transfers of value	during a year for an individual HCC	will be sun	nmed up: itemiza	ation should be ava	lable for the in	dividual Recipi	ent or public au	thorities' consultation on	ly, as approp	oriate)
HCOs	ADQI Consensus Conference	Vicenza	· ·	Viale Astichello, 6, 36100, Vicenza		o	20,000.00	0	0	0	0		20,000.00
			OTHER, NO	INCLUDED ABOVE - where in									
	Aggregate amount attributable to transfers or	f value to such Recipi	ents			0	0	0	0	0	0		0
	Number of Recipients in aggregate disclosur	е				0	0	0	0	0	0		0
	% of the number of Recipients included in the	e aggregate disclosur	e in the total number o	f Recipients disclosed		0	0	0	0	0	0		0

AGGREGATE DISCLOSURE	
Transfers of Value re Research & Development as defined	1000.00

## Netherlands

+									EFPIA Discl	osure Report	– 2023 Data -	- Netherlands
						Data disclosure for	m (Currency EUR)					HCP/HCO Disclosure
							Contr	ribution to costs of I	Events	Fee for consult	service and	lication: 30/06/2024
	Full name	HCPs: City of Principal Practice HCOs: City where registered  WMED DISCLOSURE - one line per HCP (i.e.	Principal Practice Address	Unique country identifier (OPTIONAL)	Donations and Grants to HCOs	Sponsorship agreements with HCOs / third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accommodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accommodation relevant to the contract	TOTAL (OPTIONAL)	
	INDIVIDUAL NAN	MED DISCLOSURE - or	ne line per HCP (i.e.	all transfers of value	during a year for a	n individual HCP wil			available for the indi ation only, as appro			
							The option of passing		and only, as approp	prince		
,	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons											
101	Aggregate amour	Aggregate amount attributable to transfers of value to such Recipients						0.00	0.00	801.00	0.00	801.00
	Number of Recip	ients in aggregate	disclosure					0	0	1	0	N/A
	% of the number of Recipients disc	of Recipients inclu	uded in the aggreg	ate disclosure in ti	he total number			0%	0%	100%	0%	N/A
	INDIVIDUAL NAM	IED DISCLOSURE - on	ne line per HCO (i.e.	all transfers of value	during a year for a	n individual HCO wi	l be summed up: ite Recipient or public		available for the ind ation only, as appro			
g				OTHER, NOT IN	CLUDED ABOVE - wi	here information ca	nnot be disclosed on	an individual basis	for legal reasons			
	Aggregate amour	nt attributable to t	ransfers of value t	o such Recipients		0.00	0.00	0.00	0.00	0.00	0.00	Optional
	Number of Recipients in aggregate disclosure					0	0	0	0	0	0	N/A
	% of the number of Recipients disc	of Recipients incl closed	uded in the aggreg	gate disclosure in t	he total number	0%	0%	0%	0%	0%	0%	N/A
8						AGGREGATE	DISCLOSURE					
•				Transfer	s of Value re	Research & D	evelopment a	s defined				0.00
		Transfers of Value re Research & Development as defined 0.										

## Norway

				Data Di	sclos	ure Fori	m						
	I	HCPs: City of			Unique	I	I			I	l.	ate of Publica	tion: 30-06-2024
	Full Name	Principal Practice HCOs: city where registered	Country of Principal Practice	Principal Practice Address	Country Identifier OPTIONAL		Contributi	ion to costs of	Events	Fee for se	rvice and consultancy		
HCPs						Donations and Grants to HCOs		Registration Fees	Travel & Accomodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accomdation relevant to the contract		Total Optional
	INDIVIDUAL NAMED DISCLOSURE -	one line per HCP	(i.e. all transfers of	value during a year for an inc		P will be sum	med up: itemizati	ion should b	e available for	the individua	al Recipient or public a	uthorities'	consultation
					omy, do t	рргорпасо			0	n	0		n
								0					
	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons												
	Aggregate amount attributable to trans	sfers of value to s	uch Recipients					0	0	0	0		0
	Number of Recipients in aggregate dis	sclosure						0	0	0	0		0
	% of the number of Recipients include	d in the aggregat	e disclosure in the	total number of Recipients di	sclosed			0	0	0	0		0
s	INDIVIDUAL NAMED DISCLOSURE - or	ne line per HCO (i.e.	all transfers of value (	during a year for an individual HCC	D will be sun	nmed up: itemiz	ation should be ava	ilable for the i	individual Recipi	ent or public a	uthorities' consultation o	ıly, as approp	oriate)
HCOs						o	0	o	0	0	О		0
			OTHER, NOT	INCLUDED ABOVE - where in	nformation o	cannot be discl	osed on an individ	ual basis for I	egal reasons				
	Aggregate amount attributable to transfers of	value to such Recipi	ents			0	0	0	0	0	0		0
	Number of Recipients in aggregate disclosure	•				0	0	0	0	0	0		0
	% of the number of Recipients included in the	aggregate disclosur	e in the total number o	f Recipients disclosed		0	0	0	0	0	0		0

108,704.58

## Portugal

				Data	Disc	losure F	orm					Date of Public	ation: 30-06-2024
	Full Name	HCPs: City of Principal Practice HCOs: city where registered	Country of Principal Practice					ribution to cost	s of Events	Fee for ser	vice and consultancy		
HCPs						Donations and Grants to HCOs	Sponsorship agreements with HCOs/third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accomodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accomdation relevant to the contract		Total Optional
	INDIVIDUAL NAMED DISCLOSURE - one line per HCP (i.e. all transfers of value during a year for an individual HCP will be summed up: itemization should be available for the individual Recipient or public authoronly, as appropriate)												consultation
								o	0	0	0		0
	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons												
	Aggregate amount attributable to tra		o such Recipients					0	482.10	0	0		482.10
	Number of Recipients in aggregate of							0	5	0	0		5
	% of the number of Recipients includisclosed	ded in the aggre	gate disclosure in t	the total number of Recipier	its			0	100%	0	0		100%
	INDIVIDUAL NAMED DISCLOSURE -	one line per HCO (	i.e. all transfers of val	ue during a year for an individu	al HCO will	be summed up:	itemization should	be available f	or the individual Recipie	nt or public aut	thorities' consultation or	nly, as appro	priate)
HCO						0	0	0	0	o	0		0
			OTHER, I	NOT INCLUDED ABOVE - wh	ere inform	ation cannot be	disclosed on an i	individual bas	sis for legal reasons				
	Aggregate amount attributable to transfers	of value to such Re	cipients			0	0	0	0	0	0		0
	Number of Recipients in aggregate disclose	ure				0	0	0	0	0	0		0
	% of the number of Recipients included in t	the aggregate disclo	sure in the total numb	er of Recipients disclosed		0	0	0	0	0	0		0

AGGREGATE DISCLOSURE	
Transfers of Value re Research & Development as defined	0

Spain

Research and Development

	Full Name (Mandatory) (Art. 18.3)	Healthcare Professionals (HCPs): city of principal practice Healthcare Organisations (HCOs): city where registered (Art. 18.3)		(Art. 18.3)	DNI/CIF XX12345XX (Mandatory) (Art. 18.3)		scientific m	neetings (Ar 18.3.2.a) 18.3.1.b & 1 Registration Fees	8.3.2.a)	(Art. 18.3 (Art. 18.3 (Art. 18.3 Fees	service 3.3.1.c & 3.3.1.c & 3.3.1.c & 3.2.b) Related expenses agreed in the fee for service or consultan cy contract	TOTAL
Healthcare Professionals (HCPs)	PUBLICACIÓN NOMINATIVA INDIVIDUAL: one line per HCP (i.e. all transfers of valus S Enriqueta Felip	ue during a year for an individ	ual HCP will Spain	be summed up: itemization should	l be available f	or the individ		or public aut	horities' consult	4,000.00		4,000.00
	Eva Maria Ciruelos Gil	Madrid	Spain	University Hospital Madrid				0	0	1,500.00	0	1,500.00
	Javier Cortes Castan	Madrid	Spain	University Hospital Madrid				0	0	2,400.00	0	2,400.00
	OTHER, NOT INCLUDED ABOVE — where information cannot be disci		or legal reas	sons			N/A	N/A				
	Number of Recipients in aggregate disclosure - Article 18.4						N/A	N/A				
	Number of Recipients disclosed in aggregate as a % of all Recipients (indiv	vidual & aggregate disclosures)	- Article 18.4	4			N/A	N/A				
Healthcare Organisations (HCOs)	INDIVIDUAL NAMED DISCLOSURE - one line per HCO (i.e. all transfers appropriate)	of value during a year for a	n individual	HCO will be summed up: itemization	on should be a	vailable for t	he individual F	Recipient or	public authoriti	es' consul	tation only	as

AGGREGATE DISCLOSURE

Transfers of Value re: Research & Development as defined - Article 18.5

2,400.00

## Sweden

				Data Di	sclosi	ure Forn	n				De	ate of Publication	on: 30-06-2024
	Full Name	HCPs: City of Principal Practice Country of Principal HCOs: city where registered Practice		Principal Practice Address C	Unique Country Identifier OPTIONAL		Contribut	ion to costs of	Events	Fee for sei	rvice and consultancy		0.00002024
HCPs						Donations and Grants to HCOs	Sponsorship agreements with HCOs/third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accomodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accomdation relevant to the contract		Total Optional
	INDIVIDUAL NAMED DISCLOSURE - one line per HCP (i.e. all transfers of value during a year for an individual HCP will be summed up: itemization should be available for the individual Recipient or public authors. only, as appropriate)										thorities' co	onsultation	
								o	0	0	0		0
	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons												
	Aggregate amount attributable to transfers of value to such Recipients							0	0	0	0		0
	Number of Recipients in aggregate disclosure							0	0	0	0		0
	% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed							0	0	0	0		0
S	INDIVIDUAL NAMED DISCLOSURE - or	ne line per HCO (i.e. a	all transfers of value d	uring a year for an individual HCO	will be sum	med up: itemiza	tion should be avail	able for the in	dividual Recipie	nt or public aut	horities' consultation onl	y, as appropri	iate)
25						0	0	0	0	0	0		0
	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons												
	Aggregate amount attributable to transfers of value to such Recipients						0	0	0	0	0		0
	Number of Recipients in aggregate disclosure						0	0	0	0	0		0
	% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed						0	0	0	0	0		0

AGGREGATE DISCLOSURE	
Transfers of Value re Research & Development as defined	42,000.00

#### Switzerland

				Data	a Disc	losure	Form				De	te of Publicat	tion: 30-06-2024	
	Full Name	HCPs: City of Principal Practice HCOs: city where registered	Country of Principal Practice	Principal Practice Address	Unique Country Identifier OPTIONAL		Contribu	ution to costs o	f Events	Fee for service				
HCPs		-				Donations and Grants to HCOs	Sponsorship agreements with HCOs/third parties appointed by HCOs to manage an Event	Registration Fees	Travel & Accomodation	Fees	Related expenses agreed in the fee for service or consultancy contract, including travel & accomdation relevant to the contract		Total Optional	
	INDIVIDUAL NAMED DISCLOSURE	- one line per H	ICP (i.e. all transfer	rs of value during a year for a		ıal HCP will b y, as appropr		emization sh	ould be available	for the individual R	ecipient or public au	thorities' c	onsultation	
								0	0	0	0		0	
	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons													
	Aggregate amount attributable to tra				0	144.71	2258.14	0		0				
	Number of Recipients in aggregate of			0	1	1	0		0					
	% of the number of Recipients includisclosed			0	100%	100%	0		0					
S	INDIVIDUAL NAMED DISCLOSURE -	one line per HCO	(i.e. all transfers of va	lue during a year for an individu	al HCO will l	be summed up:	itemization should	be available f	or the individual Re	cipient or public autho	rities' consultation only,	as appropri	iate)	
HÇÖ	Congrex Switzerland Ltd	Basel		Reinacherstrasse 131, 4053, Basel, Switzerland	,	О	15,000.00	0	0	0	0		15,000.00	
	OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons													
	Aggregate amount attributable to transfers of value to such Recipients						0	0	0	0	0		0	
	Number of Recipients in aggregate disclosu	0	0	0	0	0	0		0					
	% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed						0	0	0	0	0		0	

AGGREGATE DISCLOSURE	
Transfers of Value re Research & Development as defined	0
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