

#### **Instructions**

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

### Identifying information.

### The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes"

### Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

### Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

### Relationships not covered above.

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

#### Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally [but not always] paid to your

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other:** Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued **Issued:** The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether

earning royalties or not

Royalties: Funds are coming in to you or your institution due to your

patent

Galbiati



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Donata	rst Name)	2. Surname (Last Name) Galbiati		3. Date 18-July-2019
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Author's Nar Paolo Bossi	ne
5. Manuscript Title Activity of platin		cutaneous squamous cell o	ancer not amenable to cura	ative treatment.
6. Manuscript Ider	ntifying Number (if you kr	now it)		
			_	
Section 2.	The Work Under C	onsideration for Publi	cation	
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  Are there any relevant conflicts of interest? Yes Vo				
Section 3.	Relevant financial	activities outside the	submitted work.	
of compensation clicking the "Ado	) with entities as descr	ibed in the instructions. U port relationships that we	se one line for each entity; a	ationships (regardless of amount dd as many lines as you need by nonths prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the work?	Yes 🗸 No

Galbiati 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Galbiati has ı	nothing to disclose.

### **Evaluation and Feedback**

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Galbiati 3



Section 1.	Identifying Inform	nation			
1. Given Name (Fii Stefano	rst Name)	2. Surnam Cavalieri	ne (Last Name)		3. Date 18-July-2019
4. Are you the cor	responding author?	Yes	<b>√</b> No	Corresponding Author's Na Paolo Bossi	me
5. Manuscript Title Activity of platin		utaneous s	quamous cell c	ancer not amenable to cur	ative treatment.
6. Manuscript Ider	ntifying Number (if you kn	now it)			
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Section 3.	Relevant financial	activities	outside the s	ubmitted work.	
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Section 4.	Intellectual Proper	ty Pate	nts & Copyrig	hts	
Do you have any	patents, whether plant	ned, pendii	ng or issued, br	oadly relevant to the work	? ☐ Yes ✓ No

Cavalieri 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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Section 6.	
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Cavalieri has	nothing to disclose.

### **Evaluation and Feedback**

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Cavalieri 3



Section 1. Identifying Inform	nation			
1. Given Name (First Name) Salvatore	2. Surname (Last Name) Alfieri	3. Date 18-July-2019		
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Paolo Bossi		
5. Manuscript Title Activity of platinum and cetuximab in c	cutaneous squamous cell c	ancer not amenable to curative treatment.		
6. Manuscript Identifying Number (if you kr	now it)			
Section 2. The Work Under Co	onsideration for Public	ation		
Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  Are there any relevant conflicts of interest? Yes V No				
Section 3. Relevant financial	activities outside the s	ubmitted work.		
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo				
Section 4. Intellectual Proper	rty Patents & Copyrig	hts		
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Alfieri 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Alfieri has no	thing to disclose.

### **Evaluation and Feedback**

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Alfieri 3



Section 1.	Identifying Inform	ation			
1. Given Name (Fii Carlo	rst Name)	2. Surnar Resteghi	ne (Last Name) ini		3. Date 18-July-2019
4. Are you the cor	responding author?	Yes	✓ No	Corresponding Author's Na Paolo Bossi	me
5. Manuscript Title Activity of platin		utaneous s	squamous cell c	ancer not amenable to cura	ative treatment.
6. Manuscript Ider	ntifying Number (if you kn	ow it)			
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Section 2.	The Work Under Co	onsiderat	tion for Public	ation	
any aspect of the s statistical analysis,	Did you or your institution <b>at any time</b> receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  Are there any relevant conflicts of interest?  Yes  No				
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Are there any rel	evant conflicts of intere	est?	∕es [ <b>√</b> ] No		
Section 4.	Intellectual Proper	ty Pate	ents & Copyrig	ıhts	
Do you have any	patents, whether plans	ned, pendi	ng or issued, br	oadly relevant to the work:	? ☐ Yes ✓ No

Resteghini 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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Section 6.	Disclosure Statement
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Resteghini 3



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Cristiana	2. Surname (Last Name) Bergamini	3. Date 18-July-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Paolo Bossi
5. Manuscript Title Activity of platinum and cetuximab in c	cutaneous squamous cell ca	ancer not amenable to curative treatment.
6. Manuscript Identifying Number (if you kr	now it)	
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Section 2. The Work Under Co	onsideration for Public	ation
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of compensation) with entities as descri	ibed in the instructions. Us port relationships that were	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by e <b>present during the 36 months prior to publication</b> .
Section 4. Intellectual Proper	rty Patents & Copyrig	hts
Do you have any patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? Yes V No

Bergamini 2



Section 5.	
Section 5.	Relationships not covered above
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Section 6.	Disclosure Statement
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Dr. Bergamini ha	as nothing to disclose.

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Bergamini 3



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Ester	2. Surname (Last Name) Orlandi	3. Date 18-July-2019	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Paolo Bossi	
5. Manuscript Title Activity of platinum and cetuximab in c	utaneous squamous cell ca	ancer not amenable to curative treatment.	
6. Manuscript Identifying Number (if you kr	now it)		
Section 2. The Work Under Co	onsideration for Public	zation	
	but not limited to grants, dat	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,	
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Section 4. Intellectual Proper	rty Patents & Copyrig	hts	
Do you have any patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? Yes V No	

Orlandi 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
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Section 6.	Disclosure Statement
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Dr. Orlandi has n	nothing to disclose.

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Orlandi 3



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Francesca	2. Surname (Last Name) Platini	3. Date 18-July-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Paolo Bossi
5. Manuscript Title Activity of platinum and cetuximab in c	ancer not amenable to curative treatment.	
6. Manuscript Identifying Number (if you kr	now it)	
Section 2. The Work Under Co	onsideration for Public	ation
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Section 4. Intellectual Proper	rty Patents & Copyrig	hts
Do you have any patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? Yes V No

Platini 2



Section 5.	
Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.
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Section 6.	Disclosure Statement
Based on the abo	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Platini has no	othing to disclose.

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Platini 3



Section 1.		
Identifying Inform	ation	
Given Name (First Name)     Laura	2. Surname (Last Name) Locati	3. Date 18-July-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Paolo Bossi
5. Manuscript Title Activity of platinum and cetuximab in c	utaneous squamous cell c	cancer not amenable to curative treatment.
6. Manuscript Identifying Number (if you kn	ow it)	
Section 2. The Work Under Co	onsideration for Public	cation
	but not limited to grants, da	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
*	ormation below. If you hav	ve more than one entity press the "ADD" button to add a row.
Name of Institution/Company	Grant	n-Financial Other? Comments
Merck		
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	bed in the instructions. Us port relationships that wer est?	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re <b>present during the 36 months prior to publication</b> .
Name of Entity	Grant? Personal Nor	on-Financial Other? Comments
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EISAI		
PSEN		

Locati 2



Name of Entity		grant	nal Non-Financial	Other?	Comments		
BMS		Fees	Support!				
MSD							
Biogen							
Eli Lilly							
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Do you have any p	oatents, whether plann	ed, pending or is	sued, broadly releva	ant to the w	ork? Yes	<b>✓</b> No	
Section 5.	Relationships not c	overed above					
	lationships or activities acing, what you wrote i		-	influenced,	or that give the a	appearance of	
Yes, the follow	ving relationships/cond	litions/circumsta	nces are present (ex	plain below	):		
	ionships/conditions/cir		-				
	nuscript acceptance, jo nals may ask authors to					disclosure staten	nents
Section 6.							
Section 6.	Disclosure Stateme	nt					
Based on the above below.	ve disclosures, this form	n will automatica	lly generate a disclo	sure statem	ent, which will aր	ppear in the box	(
personal fees from	personal fees from Me n IPSEN, personal fees f he submitted work; .						ו

Locati 3



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Locati 4



Section 1. Identifying Inform	ation							
1. Given Name (First Name) Luca	2. Surname (Last Name) Giacomelli	3. Date 18-July-2019						
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Paolo Bossi						
5. Manuscript Title Activity of platinum and cetuximab in cutaneous squamous cell cancer not amenable to curative treatment.								
6. Manuscript Identifying Number (if you kn	ow it)							
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Section 2. The Work Under Co	onsideration for Publi	cation						
	but not limited to grants, d	n a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,						
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of compensation) with entities as descri	bed in the instructions. Uport relationships that we est?	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by tree present during the 36 months prior to publication.						
Name of Entity	Grant? Personal No	n-Financial Other? Comments						
isai								
eoPharma								
irunenthal								
ierre-Fabre								
ndena								
bbvie								
SL Behring								

Giacomelli 2

**/** 

Santhera



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comme	nts	
Recordati					
Section 4. Intellectual Propert	ty Patents & Cop	oyrights			
Do you have any patents, whether plann	ned, pending or issue	ed, broadly releva	nt to the work?	Yes ✓ No	
Section 5. Relationships not o	covered above				
Are there other relationships or activities potentially influencing, what you wrote	· ·		influenced, or that o	give the appearance of	
Yes, the following relationships/conc	ditions/circumstance	s are present (ex	plain below):		
✓ No other relationships/conditions/ci	rcumstances that pre	esent a potential	conflict of interest		
At the time of manuscript acceptance, jo On occasion, journals may ask authors to					ments.
Section 6. Disclosure Stateme	ent				
Based on the above disclosures, this form below.	n will automatically <u>c</u>	generate a disclo	sure statement, whi	ch will appear in the bo	х
Dr. Giacomelli reports personal fees fron from Pierre-Fabre, personal fees from In from Santhera, personal fees from Recor	idena, personal fees f	rom Abbvie, per			ees

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Giacomelli 3



Section 1. Identifying Inform	ation					
1. Given Name (First Name) Lisa	2. Surname (Last Name) Licitra		3. Date 18-July-2019			
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Paolo Bossi	Name			
5. Manuscript Title Activity of platinum and cetuximab in cutaneous squamous cell cancer not amenable to curative treatment.						
6. Manuscript Identifying Number (if you kn	ow it)					
		_				
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Did you or your institution <b>at any time</b> recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		•			
If yes, please fill out the appropriate info		e more than one entity ہ	oress the "ADD" button to add a row.			
Excess rows can be removed by pressing	g the "X" button.					
Name of Institution/Company	Grant	n-Financial other?	Comments			
Merck	<b>✓</b>	<b>✓</b>				
Section 3. Relevant financial	activities outside the	submitted work.				
Place a check in the appropriate boxes in of compensation) with entities as descri clicking the "Add +" box. You should rep	bed in the instructions. Us port relationships that we	se one line for each entit	y; add as many lines as you need by			
Are there any relevant conflicts of intere						
If yes, please fill out the appropriate info	rmation below.					
Name of Entity	Grant? Personal Nor	n-Financial other?	Comments			
Astrazeneca	✓					
Bayer		<b>✓</b>				
BMS	<b>✓</b>	<b>✓</b>				



Name of Entity	Grant?	Personal	Non-Financial	Other?	Comments
Eisai		Fees?	Support?		
MSD		<b>▼</b>	<b>□</b>		
AccMed		<b>▼</b>	<u>v</u>		
Medical Science Fundation		<b>▼</b>			
G. Lorenzini					
		<b>✓</b>			
Associazione Sinapsi		<b>✓</b>			
Think 2 IT		<b>✓</b>			
Aiom Servizi		<b>✓</b>			
Prime Oncology		<b>✓</b>			
WMA Congress Education		<b>✓</b>			
Fasi		✓			
DueCi promotion Srl		<b>✓</b>			
MI&T		<b>✓</b>			
Net Congress & Education		<b>✓</b>			
PRMA Consulting		<b>✓</b>			
Kura Oncology		<b>✓</b>			
Health & Life srl		$\checkmark$			
lpsen Innovation		<b>✓</b>			
lmmuno-Oncology Hub		<b>✓</b>			
Boehringer Ingelheim	<b>V</b>				
Celgene International	<b>✓</b>				
Eisai	<b>✓</b>				
Exelixis inc	✓				
Hoffmann-La roche ltd	<b>✓</b>				
IRX Therapeutics inc	<b>✓</b>				
Medpace inc	<ul><li>✓</li></ul>				
Novartis	<ul><li>✓</li></ul>	✓			
Roche		<b>▼</b>	<b>✓</b>		
Debiopharm		<b>▼</b>	<b>✓</b>		
Sobi					
JUNI		<b>✓</b>	<b>✓</b>		



Incyte Biosciences Italy srl		<b>✓</b>						
Doxa Pharma srl		<b>√</b>						
Amgen		<b>✓</b>						
Nanobiotics Sa		<b>✓</b>						
GSK		<b>✓</b>						
Pfizer	<b>✓</b>							
Stilema			<b>✓</b>					
AccMed			<b>✓</b>					
Aiocc			<b>✓</b>					
Aiom			<b>✓</b>					
Do you have any patents, whether plan				ant to the	work?	]Yes [✔	/ No	
Section 5. Relationships not	covered a	above						
Are there other relationships or activiti potentially influencing, what you wrot				influence	d, or that g	ive the ap	pearance c	of
Yes, the following relationships/co			•					
The other relationships, conditions,	circumstant	ies that pre	serie a poteritia	Commet	interest			
At the time of manuscript acceptance,	•						sclosure sta	ıtement:



Section 6.

**Disclosure Statement** 

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Licitra reports grants, personal fees and non-financial support from Merck, during the conduct of the study; grants and personal fees from Astrazeneca, personal fees and non-financial support from Bayer, grants, personal fees and non-financial support from BMS, personal fees from Eisai, personal fees and non-financial support from MSD, personal fees from AccMed, personal fees from Medical Science Fundation, personal fees from G. Lorenzini, personal fees from Associazione Sinapsi, personal fees from Think 2 IT, personal fees from Aiom Servizi, personal fees from Prime Oncology, personal fees from WMA Congress Education, personal fees from Fasi, personal fees from DueCi promotion Srl, personal fees from Ml&T, personal fees from Net Congress & Education, personal fees from PRMA Consulting, personal fees from Kura Oncology, personal fees from Health & Life srl, personal fees from Ipsen Innovation, personal fees from Immuno-Oncology Hub, grants from Boehringer Ingelheim, grants from Celgene International, grants from Eisai, grants from Exelixis inc, grants from Hoffmann-La roche Itd, grants from IRX Therapeutics inc, grants from Medpace inc, grants and personal fees from Novartis, grants, personal fees and non-financial support from Roche, personal fees and non-financial support from Debiopharm, personal fees and non-financial support from Sobi, personal fees from Incyte Biosciences Italy srl, personal fees from Doxa Pharma srl, personal fees from Amgen, personal fees from Nanobiotics Sa, personal fees from GSK, grants from Pfizer, non-financial support from Stilema, non-financial support from AccMed, non-financial support from Aiocc, non-financial support from Aiom, outside the submitted work;

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