

ICMJE DISCLOSURE FORM

Date: 12/29/2022

Your Name: Blanc Etienne

Manuscript Title: The exposome and liver diseases

Manuscript Number (if known): [Click or tap here to enter text.](#)

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.

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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: 1/6/2023

Your Name: Jessica Zucman-Rossi

Manuscript Title: The exposome and liver diseases

Manuscript Number (if known): [Click or tap here to enter text.](#)

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ICMJE DISCLOSURE FORM

Date: 12/29/2023

Your Name: Robert Barouki

Manuscript Title: The exposome and liver diseases

Manuscript Number (if known): [Click or tap here to enter text.](#)

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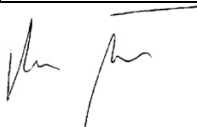
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		Galapagos	me
		Target HCC	me
		Gilead	me
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
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6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		Gile	
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		Exelixis	
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ICMJE DISCLOSURE FORM

Date: 12/29/2022

Your Name: Konstantinos N. Lazaridis, M.D.

Manuscript Title: The exposome and liver diseases

Manuscript Number (if known): [Click or tap here to enter text.](#)

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11	Stock or stock options	<input checked="" type="checkbox"/> None	
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: 12/29/2022

Your Name: SAMSON Michel

Manuscript Title: The exposome and liver diseases

Manuscript Number (if known): JHEPAT-D-22-01790

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.

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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: December the 30th 2022

Your Name: COUMOUL Xavier

Manuscript Title: The exposome and liver diseases

Manuscript Number (if known): JHEPAT-D-22-01790

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: 12/29/2022

Your Name: Gary W Miller

Manuscript Title: **The exposome and liver diseases**

Manuscript Number (if known): [Click or tap here to enter text.]

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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		Mayo Clinic 2022, Kansas University Medical Center, 2022,	
		Stipend for serving as Editor of Exposome-journal published by Oxford University Press	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		Pacific Northwest Society of Toxicology	
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Gary Miller 12/29/2022