ICMJE DISCLOSURE FORM

Date:	1/12/2024
Your Name:	Prof Matt Costa
Manuscript Title:	What is a Fragility Index? Fragility and Reverse Fragility Index for Assessing the Significance of Results from Published RCTs
Manuscript Number (if known):	BJJ-2023-1043.R1

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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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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		Time frame: Since the initial planning	of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	None None □	Click the tab key to add additional rows.
		Time frame: past 36 month	ns .
2	Grants or contracts from any entity (if not indicated in item #1 above).	□ None My employer, University of Oxford receives research grant funding from NIHR and Wellcome for research into Musculoskeletal Trauma	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
3	Royalties or licenses	None ■	
4	Consulting fees	None None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None None	
8	Patents planned, issued or pending	None ■	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board,	None ■	

			e all entities with whom you have this onship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	society, committee or			
	advocacy group, paid or unpaid			
11	Stock or stock options		None	
12	equipment, materials, drugs, medical writing, gifts or other		None	
	services			
13	Other financial or non-financial		None	
	interests			
Plea	Please place an "X" next to the following statement to indicate your agreement:			
\boxtimes	I certify that I have	answe	ered every question and have not altered the wo	ording of any of the questions on this form

ICMJE DISCLOSURE FORM

Date:	1/15/2024
Your Name:	Professor Nick Parsons
Manuscript Title:	What is a Fragility Index? Fragility and Reverse Fragility Index for Assessing the Significance of Results from Published RCTs
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		Time frame: Since the initial planning	of the work
1	All support for the present	□ None	
	manuscript (e.g., funding, provision	National Institute of Health Research	Payments made to Warwick Medical School, where I am employed.
	of study materials, medical writing, article processing		Click the tab key to add additional rows.
	charges, etc.) No time limit for		
	this item.	Time frame: past 36 month	s
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
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4	Consulting fees	None None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	None None	
8	Patents planned, issued or pending	None ■	
9	Participation on a Data Safety Monitoring Board or Advisory Board	None None	
10	Leadership or fiduciary role in other board,	None ■	

			e all entities with whom you have this onship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	society, committee or			
	advocacy group, paid or unpaid			
11	Stock or stock options		None	
12	equipment, materials, drugs, medical writing, gifts or other		None	
	services			
13	Other financial or non-financial		None	
	interests			
Plea	Please place an "X" next to the following statement to indicate your agreement:			
\boxtimes	I certify that I have	answe	ered every question and have not altered the wo	ording of any of the questions on this form

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Date:	1/12/2024
Your Name:	Michael Whitehouse
Manuscript Title:	What is a Fragility Index? Fragility and Reverse Fragility Index for Assessing the Significance of Results from Published RCTs
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		Time frame: Since the initial planning	g of the work
1	All support for the present	□ None	
	manuscript (e.g., funding, provision of study materials, medical writing,	NIHR Bristol Biomedical Research Centre	My institution receives funding for part of my time from the NIHR via the Bristol Biomedical Research Centre
	article processing		Click the tab key to add additional rows.
	charges, etc.) No time limit for this item.		
		Time frame: past 36 mont	hs
2	Grants or contracts from	☐ None	
	any entity (if not indicated in item #1 above).	HQIP FTS 010307-2022: Statistical Analysis, Support and Associated Services National Joint Registry	I am PI, coPI or co-applicant on these grants for which my institution receives funding for my time.
		NIHR204327 Named contact care plan for patients undergoing total knee replacement: intervention development	

Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
NIHR202289 Joint PREP: A randomised controlled feasibility trial of a prehabilitation intervention in frail older people undergoing total hip or knee replacement.	
NIHR135217 Periprosthetic femoral fracture: data, management and outcomes	
NIHR203671 HIPPY: Hip Implant Prosthesis Programme for the Younger total hip replacement patient	
NIHR134398 REPPORT: REcurrent Patellar dislocation: Personalised therapy or OpeRative Treatment?	
NIHR202943 PDG Infection and Orthopaedic Management: Mobilising evidence into practice	
NIHR127849 HTA SISMIC: A Randomised Controlled Trial of Scaffold InSertion and MIcrofracture Compared to Microfracture Alone for the Treatment of Chondral or Osteochondral Defects of the Knee: The SISMIC Study	
NIHR i4i II-LB-0417-20005: Development and clinical evaluation of FibroFix Cartilage: a load bearing, tissue regenerative knee cartilage resurfacing implant	
NIHR131850 HTA PART: The clinical and cost- effectiveness of elective primary total knee replacement with PAtellar Resurfacing compared to selective patellar resurfacing. A pragmatic multicentre randomised controlled Trial with blinding (PART).	
NIHR203115 RfPB DUALITY: Dual mobility (DM) versus standard articulation total hip replacement (THR) in the treatment of older adults with a hip fracture.	
Ceramtec: The Clinical and Cost Utility Outcomes of Ceramic Bearings in Total Hip Replacement.	
NIHR127273 HTA FAME: In younger adults with unstable ankle fractures treated with close contact casting, is ankle function not worse than those treated with surgical intervention?	
NIHR PB-PG-0817-20026 RfPB KNIPS: The choice between implants in total knee replacement: evidence synthesis and economic decision model	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
		to determine the effectiveness and cost- effectiveness of knee implants for NHS patients.	
3	Royalties or licenses	□ None Taylor and Francis	I am editor of two Orthopaedic general textbook for which I receive royalty payments
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	□ None Heraeus	I conduct teaching on Orthopaedic basis sciences at courses organised by Heraeus. My institution is paid market rates for my time.
6	Payment for expert testimony	None Non	
7	Support for attending meetings and/or travel	None ■	
8	Patents planned, issued or pending	None	
9	Participation on a Data Safety	□ None	

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
	Monitoring Board or Advisory Board	NIHR	I sit on or chair a number of Trial Steering Committees or Data Monitoring Committees for trials funded by NIHR
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	□ None British Hip Society	I am a member of the BHS Research Committee,
		British Orthopaedic Association	no payment received I am a member of the BOA Research Committee,
		NIHR CRN	no payment received I was previously Trauma and Emergencies CRN Specialty Lead for the West of England, support
44	Charle an abanda	No.	paid to institution
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None None	
13	Other financial or non-financial interests	None ■	
Please place an "X" next to the following statement to indicate your agreement:			
\boxtimes	☑ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		