ICMJE DISCLOSURE FORM

Date: _____ Aug. 18th, 2022 _____
Your Name: ___ Ein Oh ___
Manuscript Title: _____ The role of big data analysis in identifying a relationship between glaucoma and diabetes mellitus _____
Manuscript number (if known): ________________ ATM-22-4134____________________________

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 following questions apply to the author’s relationships/activities/interests as they relate to the current manuscript only.

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. | _X__None |

| **Time frame: past 36 months** | | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | _X__None |
| 3 | Royalties or licenses | _X__None |
| 4 | Consulting fees | _X__ None |
|   | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | __X__ None |
|---|--------------------------------------------------------------------------------------------------------|------------|
| 6 | Payment for expert testimony                                                                             | __X__ None |
| 7 | Support for attending meetings and/or travel                                                              | __X__ None |
| 8 | Patents planned, issued or pending                                                                         | __X__ None |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board                                        | __X__ None |
| 10| Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid         | __X__ None |
| 11| Stock or stock options                                                                                   | __X__ None |
| 12| Receipt of equipment, materials, drugs, medical writing, gifts or other services                           | __X__ None |
| 13| Other financial or non-financial interests                                                                | __X__ None |

Please summarize the above conflict of interest in the following box:

None.

Please place an “X” next to the following statement to indicate your agreement:

__X__ 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: ______ Aug. 18th, 2022 ______
Your Name: ___ Yong Hyun Kim ___
Manuscript Title: _____ The role of big data analysis in identifying a relationship between glaucoma and diabetes mellitus _____
Manuscript number (if known): ____________________________ ATM-22-4134 ____________________________

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|   | **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.** | _X_ None                                                                         |
|   | **Time frame: past 36 months**                                                                  |                                                                                  |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above).                       | _X_ None                                                                         |
| 3 | Royalties or licenses                                                                           | _X_ None                                                                         |
| 4 | Consulting fees                                                                                 | _X_ None                                                                         |
|   | Description                                                                                                                                                                                                 | Accepted | Open to Discussion |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-------------------|
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events                                                                                           | __X__None |                   |
| 6 | Payment for expert testimony                                                                                                                                                                              | __X__None |                   |
| 7 | Support for attending meetings and/or travel                                                                                                                                                               | __X__None |                   |
| 8 | Patents planned, issued or pending                                                                                                                                                                         | __X__None |                   |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board                                                                                                                                        | __X__None |                   |
| 10| Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid                                                                                                       | __X__None |                   |
| 11| Stock or stock options                                                                                                                                                                                    | __X__None |                   |
| 12| Receipt of equipment, materials, drugs, medical writing, gifts or other services                                                                                                                             | __X__None |                   |
| 13| Other financial or non-financial interests                                                                                                                                                                | B&VIIT Eye Center | Yong Hyun Kim is an employee of B&VIIT Eye Center. He received a salary as part of the standard compensation package. |

Please summarize the above conflict of interest in the following box:

Yong Hyun Kim is an employee of B&VIIT Eye Center. He received a salary as part of the standard compensation package.

Please place an “X” next to the following statement to indicate your agreement:

__X__ 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:** _____ Aug. 18\textsuperscript{th}, 2022 _____  
**Your Name:** ___ Ik Hee Ryu ___  
**Manuscript Title:** _____ The role of big data analysis in identifying a relationship between glaucoma and diabetes mellitus _____  
**Manuscript number (if known):** __________________________ ATM-22-4134________________________

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 following questions apply to the author’s relationships/activities/interests as they relate to the **current manuscript only**.

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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.

| 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.** |
| | 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) |
| | _X_ None |

| Time frame: past 36 months |
| --- |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). |
| | _X_ None |
| 3 | Royalties or licenses |
| | _X_ None |
| 4 | Consulting fees |
| | Carl Zeiss Meditec AG |
| | Ik Hee Ryu serves on the Advisory Board for Carl Zeiss Meditec AG. |
| No. | Conflict of Interest | Description | Agreement | Notes |
|-----|---------------------|-------------|-----------|-------|
| 5   | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | None | | Ik Hee Ryu serves on the Advisory Board for Avellino Lab USA/MAB for Avellino Lab Korea. |
| 6   | Payment for expert testimony | None | | |
| 7   | Support for attending meetings and/or travel | None | | |
| 8   | Patents planned, issued or pending | None | | |
| 9   | Participation on a Data Safety Monitoring Board or Advisory Board | None | | |
| 10  | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | None | | |
| 11  | Stock or stock options | VISUWORKS | Ik Hee Ryu is an director of VISUWORKS, and own company stock. He received a salary as part of the standard compensation package. | |
| 12  | Receipt of equipment, materials, drugs, medical writing, gifts or other services | None | | |
| 13  | Other financial or non-financial interests | B&VIIT Eye Center | Ik Hee Ryu is an employee of B&VIIT Eye Center. He received a salary as part of the standard compensation package. | |

Please summarize the above conflict of interest in the following box:

Ik Hee Ryu is an director of VISUWORKS, and own company stock. He received a salary as part of the standard compensation package. Ik Hee Ryu is an employee of B&VIIT Eye Center. He received a salary as part of the standard compensation package. He serves on the Advisory Board for Carl Zeiss Meditec AG and Avellino Lab USA/MAB for Avellino Lab Korea.

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: **Aug. 18th, 2022**

Your Name: **Tae Keun Yoo**

Manuscript Title: **The role of big data analysis in identifying a relationship between glaucoma and diabetes mellitus**

Manuscript number (if known): ATM-22-4134

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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|---|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|
| 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. | __X__ None | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above) | __X__ None | |
| 3 | Royalties or licenses | __X__ None | |

Time frame: Since the initial planning of the work

Time frame: past 36 months
|   |   |   |
|---|---|---|
| **4** | Consulting fees | __X__ None |
| **5** | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | VUNO | Tae Keun Yoo served as a speaker for an academic lecture in VUNO. 2021-03-12 |
|   |   | Hangil Eye Hospital | Tae Keun Yoo served as a speaker for an academic lecture in Hangil Eye Hospital. 2022-08-19 |
|   |   | Korea association of intelligence wellcare industries (KIWI) | Tae Keun Yoo served as a lecturer for a commercial conference held by KIWI. 2022-04-29 |
| **6** | Payment for expert testimony | __X__ None |
| **7** | Support for attending meetings and/or travel | __X__ None |
| **8** | Patents planned, issued or pending | __X__ None |
| **9** | Participation on a Data Safety Monitoring Board or Advisory Board | __X__ None |
| **10** | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | __X__ None |
| **11** | Stock or stock options | VISUWORKS | Tae Keun Yoo is an employee of VISUWORKS. He received a salary as part of the standard compensation package. |
| **12** | Receipt of equipment, materials, drugs, medical writing, gifts or other services | __X__ None |
| **13** | Other financial or non-financial interests | B&VIIT Eye Center | Tae Keun Yoo is an employee of B&VIIT Eye Center. He received a salary as part of the standard compensation package. |

**Please summarize the above conflict of interest in the following box:**

Tae Keun Yoo served as a speaker for an academic lecture in VUNO and Hangil Eye Hospital. He served as a lecturer for a commercial conference held by the Korea association of intelligence wellcare industries. He is an employee of VISUWORKS and B&VIIT Eye Center. He received salary as part of the standard compensation package.
Please place an “X” next to the following statement to indicate your agreement:

___X___ I certify that I have answered every question and have not altered the wording of any of the questions on this form.