ICMJE DISCLOSURE FORM

Date:__April 12, 2021
Your Name: Abdikarim Abdullahi
Manuscript Title: Ageing Impairs Adipose Tissue Browning after a major Burn trauma in Humans and Mice
Manuscript number (if known): 143451-INS-CMED-1

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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Time frame: Since the initial planning of the work			
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Time frame: past 36 months			
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3	Royalties or licenses	____None	
4	Consulting fees	____None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	____None	
6	Payment for expert testimony	____None	
7	Support for attending meetings and/or travel	____None	
8	Patents planned, issued or pending	____None	
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	____None	
11	Stock or stock options	____None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	____None	
13	Other financial or non-financial interests	____None	

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Date:__April 12, 2021
Your Name: Carly Knuth
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Your Name: Alexandra Parousis
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