

Declaration of Interests for ENCePP SEAL Studies

INTRODUCTION

This document includes your personal details and your declaration of interests to be made public in line with the provisions of the ENCePP Code of Conduct. All parts must be duly completed. Your declaration will not be accepted if any fields are left empty. You are responsible for the accuracy and completeness of the submitted information.

The form is designed to be filled in electronically, printed and signed. A PDF scan of the signed copy should be uploaded to the <u>ENCePP E-Register of Studies</u>.

SECTION 1: PERSONAL DETAILS First Name: Pedro Last Name: Caetano Organisation / Research CEDOC - Centro de Estudos de Doenças Crónicas Centre: NOVA Medical School / Faculdade de Ciências Médicas Universidade Nova de Lisboa Rua Câmara Pestana n.º 6, room 2.21 | 1150-082 Lisboa Phone + 351 218 803 103 FAX + 351 218 803 010 Country: Portugal Contact e-mail Address: pedro.caetano@fcm.unl.pt Adherence to antihypertensive therapy: analysis of initiation, implementation and discontinuation in Portuguese primary care units ENCePP Study Reference Number: ENCEPP/SDPP/ 7 7 5 7 Are you the (Primary) Lead Investigator of the above study? **4**

Are you an investigator/researcher contributing to the above study

In this section you must declare any interests in the pharmac past 3 years. If you have interests to declare please tick 'Yes be answered.	ceutics ' to th	al ind ne rele	ustry evant	that you	ou currently ons. All ques	have or had tions in this	within the part must
2.1 Employment	No	Ø	Yes	0		****	
Employment in a pharmaceutical company during Pharmaceutical company includes supply or service companie and maintenance of a medicinal product. Employment relates pharmaceutical company.	es whi	ch co	ntribu	ate to re	esearch, dev	elopment, i	production by a
2.2 Financial Interest	No	\oslash	Yes	0			
Financial interests in the capital of a pharmaceutic Financial interests relate to current holding of shares of a pharmaceutic managed investment funds/pensions schemes that are not expensions.	armac	eutica	al con	npany v	vith the excl pharmaceut	usion of ind ical sector.	ependently
2.3 Patent	No	⊘	Yes	0			
Patent for a medicinal product? Relates to a patent for a medicinal product currently owned becentre, and you as individual are the beneficiary.	oy eith	ner yo	u as	individu	al or your o	rganisation,	' research
2.4 Consultancy	No	\oslash	Yes	0			
Consultancy for a pharmaceutical company during Consultancy refers to provision of advice or services to a pha including but not limited to reviewing activities, data monitor of contractual arrangements or any form of remuneration suc Note that conference/seminar attendance is not considered a honorarium.	irmace ing, s ch as	eutica tatisti consu	l com cal ai Iting	pany ex nalysis, fees or	xcluding the end point co honoraria.	concerned ommittees,	study and regardless
2.5 Strategic Advisory Role	No	\bigcirc	Yes	0			
Strategic Advisory role on activities of a pharmac study application? Participation with the right to vote on/influence the output in role of providing advice/expressing opinions on the future str pharmaceutical company either in terms of general or produc or any form of remuneration.	a (sci	ientifi , dire	c) addiction	visory b	ooard/steerir	ng committe ivities of a	e with the
2.6 Grant / Funding	No	\oslash	Yes	0			
Grant/funding from a pharmaceutical company of study contract? Refers to a grant or funding from a pharmaceutical company irrespective of whether you are employed or a volunteer, and	which	n is cu	ırrent	ly beind	received by		
SECTION 3: ANY OTHER INTERESTS	No	Ø	Yes	0			
In this section you should declare any other	inte	rest	s to	be ma	ade know	n to the	public.
Any other relationships/conditions/circumstances that present to members of your family?	nt a po	tenti	al con	flict of	interest, inc	uding matt	ers relating
Further to the interests declared above, I do hereby declare α facts that should be made public in relation to the conduct of	on my the s	hono tudy.	our th	at I do	not have an	y further in	terests or
Should there be any change of the above due to the fact that ENCePP Secretariat and complete a new Declaration of Interes	t I acc	quire a etailin	additi ig the	onal int	erests, I sha	il promptly	notify the
✓ I confirm the information declared on this form is accur information being stored electronically and published on the !	ate to ENCel	the t	oest c Regist	of my kr er of St	nowledge an tudies.	d I consent	to my
FULL NAME: Pedro Caetano D	Date:	14	1/11/2	014]		
SIGNATURE:							

SECTION 2: DECLARATION OF INTERESTS RELATED TO PHARMACEUTICAL INDUSTRY

Version-number