

ICMJE DISCLOSURE FORM

Date: 29/01/2025

Your Name: Enrique Sodor

Manuscript Title: Miocardopatía y enfermedad coronaria obstructiva: ¿causalidad o casualidad?

Manuscript Number (if known): <http://dx.doi.org/10.7775/rac.es.v93.i1.20856>

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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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									
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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	

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.



Dr. Sodor Enrique
Medico Cardiólogo
MN 137453

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