

## DPI

### Public Declaration of Interest WONCA Europe 2026 Conference

I, **Julie Dupouy**, the undersigned, hereby disclose all interests, whether direct or indirect, professional or personal, that are related to the healthcare field and that could potentially influence the content of my presentation or my involvement in the WONCA Europe 2026 Conference.

#### 1. Professional activity over the past 3 years

**Activity:** General Practitioner

Place of practice: Pins Justaret

Start year: 2013

End year: on going

**Activity:** Professor of Family medicine

Place of practice: University of Toulouse

Start year: Assistant professor 2017-2022, Professor since 2022

End year: on going

#### 2. Other paid or compensated activities

*Activities related to health (study, production, consulting, auditing, article/report writing, working group participation, training sessions, speaking engagements, work or leisure meetings, etc.), paid or compensated directly or indirectly, regardless of the funder (institution, industry, other), in the past 3 years:*

**Activity:** Research consultant / Vice President of CNGE

Funder: Collège National des Généralistes Enseignants (CNGE)

Compensation: Salaried

Date or period: 2022 – 2024 / since 2024

**Activity:** Member of CSS6 Inserm commission of Public Health Funder: Inserm

Compensation: Indemnities

Date or period: since 2022

#### 3. Involvement in organizations

*Membership or involvement in health-related organizations, regardless of funding source, over the past 3 years*

**Organization:** Collège National des Généralistes Enseignants

Start year: 2020 as member of the desk

**Organization:** Collège de la Médecine Générale Start year: 2024 as administrator End year:

#### 4. Ownership of financial interests

*Ownership of financial interests (copyrights, patents, shares, bonds, financial assets, etc.) related to health over the past 3 years*

**None**

**5. Activities, involvements, and financial interests of relatives**

*Professional or non-professional activities, involvements, or financial interests of a relative (parent, spouse, sibling, or child) related to health within the past 3 years:*

**None**

**6. Other Elements**

*Any other elements you wish to declare*

**None**

I hereby certify that the information provided is accurate and complete.

Done in Toulouse, on 2025, 21st of May

Signature

**Pr Julie Dupouy**  
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