Date	e:2022/8/1		
You	r Name: Can Ti	ian	
Mar	nuscript Title: Clinical a	nd genetic risk factors for	capecitabine maintenance treatment in metastatic breast
can	cer: a retrospective observa	tional study	
	nuscript number (if known):		
rela part to t	ted to the content of your n ies whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ins any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.
	following questions apply t nuscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>
to t		nsion, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive he manuscript.
	em #1 below, report all sup time frame for disclosure is	•	d in this manuscript without time limit. For all other items
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initia	al planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: pas	t 36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	

Consulting fees

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
	se summarize the above co	nflict of interest in the follo	owing box:
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Date	e:2022/8/1		
You	r Name: Jianbo	o Yang	
Maı	nuscript Title: Clinical a	nd genetic risk factors f	or capecitabine maintenance treatment in metastatic breast
	cer: a retrospective observa		
Maı	nuscript number (if known):		
rela part to t	ted to the content of your n ies whose interests may be	nanuscript. "Related" m affected by the content ecessarily indicate a bia	all relationships/activities/interests listed below that are leans any relation with for-profit or not-for-profit third tof the manuscript. Disclosure represents a commitment s. If you are in doubt about whether to list a do so.
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	em #1 below, report all sup time frame for disclosure is	· · · · · · · · · · · · · · · · · · ·	ted in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
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		relationship or indicate	institution)
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		needed)	
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1	All support for the present manuscript (e.g., funding, provision of study materials,	XNone	
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time from a r	and 26 months
2	Grants or contracts from	X None	past 36 months
_	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	

Consulting fees

5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending	XNone		
	meetings and/or travel			
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8	Patents planned, issued or	XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
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11	Stock or stock options	XNone		
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Date	e:2022/8/1		
	r Name: Ning >		
Mar	nuscript Title: Clinical a	nd genetic risk factors for	capecitabine maintenance treatment in metastatic breast
cano	er: a retrospective observa	tional study	
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related to the man to the med	ted to the content of your name ies whose interests may be cansparency and does not not interest, it following questions apply the content only. author's relationships/actions epidemiology of hypertelication, even if that medical	nanuscript. "Related" mea affected by the content of ecessarily indicate a bias. is preferable that you do to the author's relationshit vities/interests should be nsion, you should declare tion is not mentioned in the	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertains all relationships with manufacturers of antihypertensive
		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 initi	al 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.	XNone	
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2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
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	any entity (if not indicated in item #1 above).		

Consulting fees

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5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
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7	Support for attending	XNone		
	meetings and/or travel			
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8	Patents planned, issued or	XNone		
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9	Participation on a Data	XNone		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
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	committee or advocacy			
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11	Stock or stock options	XNone		
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Date	e:2022/8/1		
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	em #1 below, report all sup time frame for disclosure is		l in this manuscript without time limit. For all other items,
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		relationship or indicate	institution)
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1	All support for the present	XNone	
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	processing charges, etc.) No time limit for this item.		
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		Time frame: past	26 months
2	Grants or contracts from	X None	- So months
_	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	X None	
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Consulting fees

5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending	XNone		
	meetings and/or travel			
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8	Patents planned, issued or	XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society,			
	committee or advocacy			
	group, paid or unpaid			_
11	Stock or stock options	XNone		
12	Receipt of equipment,	XNone		
	materials, drugs, medical			
	writing, gifts or other services			
13	Other financial or non-	X None		
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Date	e:2022/8/1		
	r Name:Haoyu		
Mar	nuscript Title: Clinical a	nd genetic risk factors for	capecitabine maintenance treatment in metastatic breast
cand	cer: a retrospective observa	tional study	
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	em #1 below, report all sup time frame for disclosure is		d in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initia	l planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	t 36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	

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Consulting fees

5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending	XNone		
	meetings and/or travel			
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8	Patents planned, issued or	XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society,			
	committee or advocacy			
	group, paid or unpaid			_
11	Stock or stock options	XNone		
12	Receipt of equipment,	XNone		
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	writing, gifts or other services			
13	Other financial or non-	X None		
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Date	e:2022/8/1		
	r Name:Zhe-Υι		
Man	uscript Title: Clinical a	nd genetic risk factors for	capecitabine maintenance treatment in metastatic breast
	er: a retrospective observa		
Man	uscript number (if known):		
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	following questions apply to uscript only.	o the author's relationship	s/activities/interests as they relate to the current
to th		nsion, you should declare	lefined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive me manuscript.
	em #1 below, report all sup time frame for disclosure is	· · · · · · · · · · · · · · · · · · ·	in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initia	l planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated in item #1 above).		

Royalties or licenses

Consulting fees

4

_None

5	Payment or honoraria for	XNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	XNone		
	testimony			
7	Support for attending	XNone		
	meetings and/or travel			
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8	Patents planned, issued or	XNone		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society,			
	committee or advocacy			
	group, paid or unpaid			_
11	Stock or stock options	XNone		
12	Receipt of equipment,	XNone		
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	writing, gifts or other services			
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13	financial interests	XNone		_
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Date:	2022/8/1	
Your Name:	Quchang Ouyang	_
Manuscript Title:_	Clinical and genetic risk factors for capecitabine maintenance treatment in metastat	ic breast
cancer: a retrospe	tive observational study	
Manuscript numb	r (if known):	
related to the con	ansparency, we ask you to disclose all relationships/activities/interests listed below tha ent of your manuscript. "Related" means any relation with for-profit or not-for-profit th	ird
	rests may be affected by the content of the manuscript. Disclosure represents a commit	ment
• •	d does not necessarily indicate a bias. If you are in doubt about whether to list a	
relationshin/activi	v/interest it is preferable that you do so	

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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,	XNone			
	provision of study materials, medical writing, article processing charges, etc.)				
	No time limit for this item.				
		Time frame: past	36 months		
2	Grants or contracts from	X None	30 months		
	any entity (if not indicated				
	in item #1 above).				
3	Royalties or licenses	XNone			
4	Consulting fees	XNone			

5	Payment or honoraria for	XNone						
	lectures, presentations,							
	speakers bureaus,							
	manuscript writing or							
	educational events							
6 Payment for expert		XNone						
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7	Support for attending	XNone						
	meetings and/or travel							
8	Patents planned, issued or	X None						
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9	Participation on a Data	XNone						
	Safety Monitoring Board or							
	Advisory Board							
10	Leadership or fiduciary role	XNone						
	in other board, society,							
	committee or advocacy							
	group, paid or unpaid							
11	Stock or stock options	XNone						
12	Receipt of equipment,	XNone						
	materials, drugs, medical							
	writing, gifts or other							
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13	financial interests	XNone						
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None.								
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