

## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Instructions

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#### 1. Identifying information.

#### 2. The work under consideration for publication.

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#### 4. Intellectual Property.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)

Kai

2. Surname (Last Name)

Tao

3. Date

29-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Dayun Feng, Lei Liu

5. Manuscript Title

Astrocytic histone deacetylase 2 facilitates delayed depression and memory impairment after subarachnoid hemorrhage by negatively regulating glutamate transporter-1

6. Manuscript Identifying Number (if you know it)

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Dr. Tao has nothing to disclose.

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1. Given Name (First Name)  
Qing

2. Surname (Last Name)  
Cai

3. Date  
29-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Dayun Feng, Lei Liu

5. Manuscript Title

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Dr. Cai has nothing to disclose.

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1. Given Name (First Name)

Xudong

2. Surname (Last Name)

Zhang

3. Date

29-May-2020

4. Are you the corresponding author?

 Yes No

Corresponding Author's Name

Dayun Feng, Lei Liu

5. Manuscript Title

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Lin

2. Surname (Last Name)  
Zhu

3. Date  
29-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Dayun Feng, Lei Liu

5. Manuscript Title

Astrocytic histone deacetylase 2 facilitates delayed depression and memory impairment after subarachnoid hemorrhage by negatively regulating glutamate transporter-1

6. Manuscript Identifying Number (if you know it)

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Dr. Zhu has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)

Zhenru

2. Surname (Last Name)

Liu

3. Date

29-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name

Dayun Feng, Lei Liu

5. Manuscript Title

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Dr. Liu has nothing to disclose.

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Fei

2. Surname (Last Name)  
Li

3. Date  
29-May-2020

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name  
Dayun Feng, Lei Liu

5. Manuscript Title  
Astrocytic histone deacetylase 2 facilitates delayed depression and memory impairment after subarachnoid hemorrhage by negatively regulating glutamate transporter-1

6. Manuscript Identifying Number (if you know it)

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## ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. Given Name (First Name)  
Qiang

2. Surname (Last Name)  
Wang

3. Date  
29-May-2020

4. Are you the corresponding author?

Yes  No

Corresponding Author's Name  
Dayun Feng, Lei Liu

5. Manuscript Title

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1. Given Name (First Name)

Lei

2. Surname (Last Name)

Liu

3. Date

29-May-2020

4. Are you the corresponding author?

Yes  No

5. Manuscript Title

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1. Given Name (First Name)  
Dayun

2. Surname (Last Name)  
Feng

3. Date  
29-May-2020

4. Are you the corresponding author?  Yes  No

5. Manuscript Title

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