Date:	April 26, 2021
YourN	ame: Ting Zhang
Manus	script Title: Butyrate ameliorates alcoholic fatty liver disease via reducing endotoxemia and inhibiting liver
gasdeı	min D-mediated pyroptosis.
Manus	script number (if known):

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.

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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
5	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
	-		
,	Datasta plannad issued as	Nana	
8	Patents planned, issued or	None	
	pending		
0	Doutisingtion or - Data	None	
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10		News	
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	None	
11	Stock or stock options	None	
12	Descint of aguinment	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	iniancial interests		
DIA	ase summarize the above c	anflict of interest in the fo	allowing how
rie	ase summanze the above to	billict of interest in the fo	mowning box.
Г			
Ple	ase place an "X" next to the	following statement to in	ndicate your agreement:
	X I certify that I have answ	ered every question and l	have not altered the wording of any of the questions or
	form.	, , , , , , , , , , , , , , , , , , ,	
	10.1111		

Date: April 20	5, 2021
YourName: Jur	Li
Manuscript Title:	Butyrate ameliorates alcoholic fatty liver disease via reducing endotoxemia and inhibiting liver
gasdermin D-med	iated pyroptosis.
Manuscript numb	er (if known):
related to the cor	transparency, we ask you to disclose all relationships/activities/interests listed below that are stent of your manuscript. "Related" means any relation with for-profit or not-for-profit third erests may be affected by the content of the manuscript. Disclosure represents a commitment

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

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.

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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) 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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	None	
0	testimony	None	
	testimony		
7	Support for attending meetings and/or travel	None	
	G . 200, G . 2		
8	Patents planned, issued or pending	None	
^	Dantisia ation and D	Neg	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
12	materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the	following box:
Ple	ease place an "X" next to the	e following statement to	indicate your agreement:
		rered every question and	d have not altered the wording of any of the questions or
	form.		

Date:	April 25, 2021
YourNa	ame: Cui-Ping Liu
Manus	cript Title: Butyrate ameliorates alcoholic fatty liver disease via reducing endotoxemia and inhibiting live
gasderi	min D-mediated pyroptosis.
Manus	cript number (if known):

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.

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

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	None	
2	Grants or contracts from any entity (if not indicated in item #1 above).	Time frame: pastNone	36 months
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	None	
0	testimony	None	
	testimony		
7	Support for attending meetings and/or travel	None	
	G . 200, G . 2		
8	Patents planned, issued or pending	None	
^	Dantisia ation and D	Neg	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
12	materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the	following box:
Ple	ease place an "X" next to the	e following statement to	indicate your agreement:
		rered every question and	d have not altered the wording of any of the questions or
	form.		

Date:	April 26, 2021	
YourN	me: Man Guo	
Manus	ript Title: Butyrate ameliorates alcoholic fatty liver disease via reducing endotoxemia and inh	nibiting liver
gasder	nin D-mediated pyroptosis.	
Manus	ript number (if known):	

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.

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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) 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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	None	
0	testimony	None	
	testimony		
7	Support for attending meetings and/or travel	None	
	G . 200, G . 2		
8	Patents planned, issued or pending	None	
^	Dantisia ation and D	Neg	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
12	materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the	following box:
Ple	ease place an "X" next to the	e following statement to	indicate your agreement:
		rered every question and	d have not altered the wording of any of the questions or
	form.		

Date:	April 25, 2021
YourNan	ne: Chen-Lin Gao
Manusci	ript Title: Butyrate ameliorates alcoholic fatty liver disease via reducing endotoxemia and inhibiting live
gasderm	nin D-mediated pyroptosis.
Manusci	ript number (if known):

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.

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

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	None	
2	Grants or contracts from any entity (if not indicated in item #1 above).	Time frame: pastNone	36 months
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	None	
0	testimony	None	
	testimony		
7	Support for attending meetings and/or travel	None	
	G . 200, G . 2		
8	Patents planned, issued or pending	None	
^	Dantisia ation and D	Neg	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
12	materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
Ple	ease summarize the above c	onflict of interest in the	following box:
Ple	ease place an "X" next to the	e following statement to	indicate your agreement:
		rered every question and	d have not altered the wording of any of the questions or
	form.		

Date:	April 26, 2021
YourN	ame: <u>Lu-Ping Zhou</u>
Manus	script Title: Butyrate ameliorates alcoholic fatty liver disease via reducing endotoxemia and inhibiting liver
gasdeı	min D-mediated pyroptosis.
Manus	script number (if known):

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.

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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
5	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
	-		
,	Datasta plannad issued as	Nana	
8	Patents planned, issued or	None	
	pending		
0	Doutisingtion or - Data	None	
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10		News	
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	None	
11	Stock or stock options	None	
12	Descint of aguinment	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	iniancial interests		
DIA	ase summarize the above c	anflict of interest in the fo	allowing how
rie	ase summanze the above to	billict of interest in the fo	mowning box.
Г			
Ple	ase place an "X" next to the	following statement to in	ndicate your agreement:
	X I certify that I have answ	ered every question and l	have not altered the wording of any of the questions or
	form.	, , , , , , , , , , , , , , , , , , ,	
	10.1111		

Date:	April 26, 2021		
YourN	ame: Yang Long		
Manus	cript Title: <u>Butyrat</u>	te ameliorates alcoholic fatty liver disease via reducing endotoxemia	and inhibiting liver
gasder	min D-mediated p	yroptosis.	
Manus	script number (if kr	10wn):	

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.

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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
5	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
	-		
,	Datasta plannad issued as	Nana	
8	Patents planned, issued or	None	
	pending		
0	Doutisingtion or - Data	None	
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10		News	
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	None	
11	Stock or stock options	None	
12	Descint of aguinment	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	iniancial interests		
DIA	ase summarize the above c	anflict of interest in the fo	allowing how
rie	ase summanze the above to	billict of interest in the fo	mowning box.
Г			
Ple	ase place an "X" next to the	following statement to in	ndicate your agreement:
	X I certify that I have answ	ered every question and l	have not altered the wording of any of the questions or
	form.	, , , , , , , , , , , , , , , , , , ,	
	10.1111		

Date:	April 26, 2021	
YourN	ame: Yong Xu	
Manu	script Title: Butyrat	e ameliorates alcoholic fatty liver disease via reducing endotoxemia and inhibiting liver
gasde	rmin D-mediated p	<u>yroptosis.</u>
Manu	script number (if kr	nown):

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.

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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
5	Payment for expert	None	
	testimony		
7	Support for attending	None	
	meetings and/or travel		
	-		
,	Datasta plannad issued as	Nana	
8	Patents planned, issued or	None	
	pending		
0	Doutisingtion or - Data	None	
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10		News	
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	None	
11	Stock or stock options	None	
12	Descint of aguinment	None	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	None	
	financial interests		
	iniancial interests		
DIA	ase summarize the above c	anflict of interest in the fo	allowing how
rie	ase summanze the above c	billict of interest in the fo	mowning box.
Г			
Ple	ase place an "X" next to the	following statement to in	ndicate your agreement:
	X I certify that I have answ	ered every question and l	have not altered the wording of any of the questions or
	form.	, , , , , , , , , , , , , , , , , , ,	
	10.1111		