Date: 2021/5/21
Your Name: Xin zhao
Manuscript Title: Oridonin induces autophagy-mediated cell death in pancreatic cancer by activating the c-Jun N-

terminal kinase pathway and inhibiting phosphoinositide 3-kinase signaling

Manuscript 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.	_ X None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X _None	
3	Royalties or licenses	_X _None	
4	Consulting fees	X _None	

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

The author has no conflicts of interest to declare.	

Please place an "X" next to the following statement to indicate your agreement:

Date:	2021/	5/	21
Your I	Name:	Qi	Zhang

Manuscript Title: Oridonin induces autophagy-mediated cell death in pancreatic cancer by activating the c-Jun N-

terminal kinase pathway and inhibiting phosphoinositide 3-kinase signaling

Manuscript 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.	_ X None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X _None	
3	Royalties or licenses	_X _None	
4	Consulting fees	X _None	

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

The author has no conflicts of interest to declare.			

Please place an "X" next to the following statement to indicate your agreement:

Your Name: Yuanyuan Wang

Manuscript Title: Oridonin induces autophagy-mediated cell death in pancreatic cancer by activating the c-Jun N-

terminal kinase pathway and inhibiting phosphoinositide 3-kinase signaling

Manuscript 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.	_ X None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X _None	
3	Royalties or licenses	_X _None	
4	Consulting fees	X _None	

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

The author has no conflicts of interest to declare.			

Please place an "X" next to the following statement to indicate your agreement:

Date:	2021/5/21	
our N	lame: Shipeng	Li

Manuscript Title: Oridonin induces autophagy-mediated cell death in pancreatic cancer by activating the c-Jun N-

terminal kinase pathway and inhibiting phosphoinositide 3-kinase signaling

Manuscript 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.	_ X None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X _None	
3	Royalties or licenses	_X _None	
4	Consulting fees	X _None	

	Payment or honoraria for	_ X _None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	_X _None	
	testimony	_X_None	
7	Support for attending meetings and/or travel	_ X _None	
	G ,		
8	Patents planned, issued or	_XNone	
	pending		
9	Participation on a Data	_ X _None	
	afety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	_ X _None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	_ X _None	
12	Receipt of equipment,	_ X _None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non- financial interests	X _None	

The au	The author has no conflicts of interest to declare.			

Please place an "X" next to the following statement to indicate your agreement:

Date:	2021/5/21
-------	-----------

Your Name: Xiangyang Yu

Manuscript Title: Oridonin induces autophagy-mediated cell death in pancreatic cancer by activating the c-Jun N-

terminal kinase pathway and inhibiting phosphoinositide 3-kinase signaling

Manuscript 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.	_ X None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X _None	
3	Royalties or licenses	_X _None	
4	Consulting fees	_ X _None	

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

The author has no conflicts of interest to declare.		

Please place an "X" next to the following statement to indicate your agreement:

Your Name: Botao Wang

Manuscript Title: Oridonin induces autophagy-mediated cell death in pancreatic cancer by activating the c-Jun N-

terminal kinase pathway and inhibiting phosphoinositide 3-kinase signaling

Manuscript 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.	_ X None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X _None	
3	Royalties or licenses	_X _None	
4	Consulting fees	_ X _None	

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

The author has no conflicts of interest to declare.			

Please place an "X" next to the following statement to indicate your agreement:

Date: 2021/5/21
Your Name: Ximo Wang
Manuscript Title: Oridonin induces autophagy-mediated cell deat

Manuscript Title: Oridonin induces autophagy-mediated cell death in pancreatic cancer by activating the c-Jun N-

terminal kinase pathway and inhibiting phosphoinositide 3-kinase signaling

Manuscript 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.	_ X None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_X _None	
3	Royalties or licenses	_X _None	
4	Consulting fees	X _None	

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

The author has no conflicts of interest to declare.	

Please place an "X" next to the following statement to indicate your agreement: