| Date:2021/8/25 | | | | |
|--|--|--|--|--|
| Your Name: Saihua Chen | | | | |
| Manuscript Title: Competing endogenous RNA network for esophageal cancer progression | | | | |
| 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</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) | 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, provision of study materials, | X None | |
| | 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). | | |
| 3 | Royalties or licenses | _ X None | |
| | | | |
| 4 | Consulting fees | V. Nana | |
| 4 | consulting lees | _ X None | |
| | | | |

| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | XNone | |
|----|---|---------------|--|
| 7 | Support for attending meetings and/or travel | X None | |
| 8 | Patents planned, issued or pending | X None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None | |
| 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, materials, drugs, medical writing, gifts or other services | XNone | |
| 13 | Other financial or non- financial interests | XNone | |

None.

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

| Date: | 2021/8/25 | | | |
|---|----------------------|--|--|--|
| Your Name | : Guanjun Ju | | | |
| Manuscript Title: <u>Competing endogenous RNA network for esophageal cancer progression</u> | | | | |
| 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</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.

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| | - | Time frame: Since the initial | planning of the work |
| 1 | All support for the present manuscript (e.g., funding, | X None | |
| | provision of study materials, | | |
| | medical writing, article | | |
| | processing charges, etc.) No time limit for this item. | | |
| | No time mint for this item. | | |
| | | | |
| | | . | |
| | | Time frame: past | 36 months |
| 2 | Grants or contracts from | _ X None | |
| | any entity (if not indicated | | |
| | in item #1 above). | | |
| 3 | Royalties or licenses | _ X None | |
| | | | |
| | | | |
| 4 | Consulting fees | _ X None | |
| | | | |
| | | | |

| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | XNone | |
|----|---|---------------|--|
| 7 | Support for attending meetings and/or travel | X None | |
| 8 | Patents planned, issued or pending | X None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None | |
| 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, materials, drugs, medical writing, gifts or other services | XNone | |
| 13 | Other financial or non- financial interests | XNone | |

None.

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

| Date:2021/8/25 | | | | |
|---|--|--|--|--|
| Your Name: Jianmei Gu | | | | |
| Manuscript Title: Competing endogenous RNA network for esophageal cancer progression_ | | | | |
| 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.

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| | - | Time frame: Since the initial | planning of the work |
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| | No time mint for this item. | | |
| | | | |
| | | . | |
| | | Time frame: past | 36 months |
| 2 | Grants or contracts from | _ X None | |
| | any entity (if not indicated | | |
| | in item #1 above). | | |
| 3 | Royalties or licenses | _ X None | |
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| 4 | Consulting fees | _ X None | |
| | | | |
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| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | XNone | |
|----|---|---------------|--|
| 7 | Support for attending meetings and/or travel | X None | |
| 8 | Patents planned, issued or pending | X None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None | |
| 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, materials, drugs, medical writing, gifts or other services | XNone | |
| 13 | Other financial or non- financial interests | XNone | |

None.

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

| Date:2021/8/25 | _ | | | |
|--|---|--|--|--|
| Your Name: Minxin Shi | | | | |
| Manuscript Title: Competing endogenous RNA network for esophageal cancer progression | | | | |
| 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.

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| | medical writing, article | | |
| | processing charges, etc.) No time limit for this item. | | |
| | No time mint for this item. | | |
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| | | Time frame: past | 36 months |
| 2 | Grants or contracts from | _ X None | |
| | any entity (if not indicated | | |
| | in item #1 above). | | |
| 3 | Royalties or licenses | _ X None | |
| | | | |
| | | | |
| 4 | Consulting fees | _ X None | |
| | | | |
| | | | |

| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | XNone | |
|----|---|---------------|--|
| 7 | Support for attending meetings and/or travel | X None | |
| 8 | Patents planned, issued or pending | X None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None | |
| 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, materials, drugs, medical writing, gifts or other services | XNone | |
| 13 | Other financial or non- financial interests | XNone | |

None.

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

| Date: | _2021/8/25 | | | |
|--|---------------|--|--|--|
| Your Name | : Yilang Wang | | | |
| Manuscript Title: Competing endogenous RNA network for esophageal cancer progression | | | | |
| 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.

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| | - | Time frame: Since the initial | planning of the work |
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| | provision of study materials, | | |
| | medical writing, article | | |
| | processing charges, etc.) No time limit for this item. | | |
| | No time mint for this item. | | |
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| | | . | |
| | - | Time frame: past | 36 months |
| 2 | Grants or contracts from | _ X None | |
| | any entity (if not indicated | | |
| | in item #1 above). | | |
| 3 | Royalties or licenses | _ X None | |
| | | | |
| | | | |
| 4 | Consulting fees | _ X None | |
| | | | |
| | | | |

| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | XNone | |
|----|---|---------------|--|
| 7 | Support for attending meetings and/or travel | X None | |
| 8 | Patents planned, issued or pending | X None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None | |
| 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, materials, drugs, medical writing, gifts or other services | XNone | |
| 13 | Other financial or non- financial interests | XNone | |

None.

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

| Date:2 | 021/8/25 | | | |
|--|--------------------|--|--|--|
| Your Name:_ | Xiaodan Wu | | | |
| Manuscript Title: Competing endogenous RNA network for esophageal cancer progression | | | | |
| Manuscript r | 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.

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|---|-------------------------------|--|---|
| | | Time frame: Since the initial | |
| 1 | All support for the present | X None | |
| | 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 | _ X None | |
| | any entity (if not indicated | | |
| | in item #1 above). | | |
| 3 | Royalties or licenses | _ XNone | |
| | | | |
| | | | |
| 4 | Consulting fees | _ X None | |
| | | | |
| | | | |

| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | XNone | |
|----|---|---------------|--|
| 7 | Support for attending meetings and/or travel | X None | |
| 8 | Patents planned, issued or pending | X None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None | |
| 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, materials, drugs, medical writing, gifts or other services | XNone | |
| 13 | Other financial or non- financial interests | XNone | |

None.

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

| Date:2021/8/25 | | | | |
|--|--|--|--|--|
| Your Name: Qing Wang | | | | |
| Manuscript Title: Competing endogenous RNA network for esophageal cancer progression | | | | |
| 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.

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| | | Time frame: Since the initial | |
| 1 | All support for the present | X None | |
| | manuscript (e.g., funding, | | |
| | provision of study materials, | | |
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| | | | |
| | | | |
| | | Time frame: past | 36 months |
| 2 | Grants or contracts from | _ X None | |
| | any entity (if not indicated | | |
| | in item #1 above). | | |
| 3 | Royalties or licenses | _ XNone | |
| | | | |
| | | | |
| 4 | Consulting fees | _ X None | |
| | | | |
| | | | |

| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | XNone | |
|----|---|---------------|--|
| 7 | Support for attending meetings and/or travel | X None | |
| 8 | Patents planned, issued or pending | X None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None | |
| 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, materials, drugs, medical writing, gifts or other services | XNone | |
| 13 | Other financial or non- financial interests | XNone | |

None.

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

| Date: | 2021/8/25 | | |
|--|---------------|--|--|
| Your Name | : Liyun Zheng | | |
| Manuscript Title: Competing endogenous RNA network for esophageal cancer progression | | | |
| 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.

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|---|---|--|---|
| | - | Time frame: Since the initial | planning of the work |
| 1 | All support for the present manuscript (e.g., funding, | X None | |
| | provision of study materials, | | |
| | medical writing, article | | |
| | processing charges, etc.) No time limit for this item. | | |
| | No time mint for this item. | | |
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| | | . | |
| | - | Time frame: past | 36 months |
| 2 | Grants or contracts from | _ X None | |
| | any entity (if not indicated | | |
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| 3 | Royalties or licenses | _ X None | |
| | | | |
| | | | |
| 4 | Consulting fees | _ X None | |
| | | | |
| | | | |

| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | XNone | |
|----|---|---------------|--|
| 7 | Support for attending meetings and/or travel | X None | |
| 8 | Patents planned, issued or pending | X None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None | |
| 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, materials, drugs, medical writing, gifts or other services | XNone | |
| 13 | Other financial or non- financial interests | XNone | |

None.

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

| Date:2021/8/25 | | |
|--|--|--|
| Your Name: Ting Xiao | | |
| Manuscript Title: Competing endogenous RNA network for esophageal cancer progression | | |
| 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.

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| | 1 | Time frame: Since the initial | |
| 1 | All support for the present | X None | |
| | 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 | _ X None | |
| | any entity (if not indicated | | |
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| 3 | Royalties or licenses | _ XNone | |
| | | | |
| | | | |
| 4 | Consulting fees | _ X None | |
| | | | |
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| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | XNone | |
|----|---|---------------|--|
| 7 | Support for attending meetings and/or travel | X None | |
| 8 | Patents planned, issued or pending | X None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None | |
| 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, materials, drugs, medical writing, gifts or other services | X None | |
| 13 | Other financial or non- financial interests | XNone | |

None.

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

| Date:2021/ | /8/25 | |
|-------------------------------|---|--|
| Your Name: | Yihui Fan | |
| Manuscript Title: | Competing endogenous RNA network for esophageal cancer progression_ | |
| 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.

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| | | | |
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| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | XNone | |
|----|---|---------------|--|
| 7 | Support for attending meetings and/or travel | X None | |
| 8 | Patents planned, issued or pending | X None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | X None | |
| 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, materials, drugs, medical writing, gifts or other services | XNone | |
| 13 | Other financial or non- financial interests | XNone | |

None.

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