ICMJE DISCLOSURE FORM
Date:_2021-11-9
Your Name: <u>Zhao Chen</u>
Manuscript Title: Andrographolide inhibits non-small cell lung cancer cell proliferation through the activation of the
mitochondrial apoptosis pathway and by reprogramming host glucose metabolism
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> manuscript only.
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 autitios with	Charifications/Commonts	

		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)
		Time frame: Since the initia	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	
		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	<b>X</b> None	
4	Consulting fees	<b>X</b> None	

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

There's no conflicts of interest to declare.
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Please place an "X" next to the following statement to indicate your agreement:

	e:_2021-11-9 ır Name: Weijian Tang		<del></del>	
		pholide inhibits non-small	cell lung cancer cell proliferation through the activation	of the
	ochondrial apoptosis pathw			
	nuscript number (if known):			
			relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third	
par	ties whose interests may be	affected by the content of	of the manuscript. Disclosure represents a commitment	
to t	ransparency and does not n	ecessarily indicate a bias.	If you are in doubt about whether to list a	
rela	tionship/activity/interest, it	t is preferable that you do	SO.	
	following questions apply t nuscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>	
med In it	dication, even if that medica	tion is not mentioned in t	all relationships with manufacturers of antihypertensive the manuscript.  d in this manuscript without time limit. For all other ite	
		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 initial	al planning of the work	
1	All support for the present		al planning of the work	
1	manuscript (e.g., funding, provision of study materials,	XNone		
	mandinal veriting article			
	medical writing, article			
	processing charges, etc.)			
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	processing charges, etc.)			

Time frame: past 36 months

**X**\_\_None

**X**\_\_None

X \_\_None

Grants or contracts from

in item #1 above).

Royalties or licenses

Consulting fees

4

any entity (if not indicated

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

There's no conflicts of interest to declare.
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Please place an "X" next to the following statement to indicate your agreement:

Date	e:_2021-11-9			
	r Name: Yuhan Zhou			
Maı	nuscript Title:Andrograp	holide inhibits non-small	cell lung cancer cell proliferation through the activation	of the
	ochondrial apoptosis pathwa		host glucose metabolism	
Mai	nuscript number (if known):			
rela part to t	ted to the content of your nies whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the second of	
	following questions apply to	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>	
to t		nsion, you should declare	defined broadly. For example, if your manuscript pertai all relationships with manufacturers of antihypertensiv the manuscript.	
	em #1 below, report all sup time frame for disclosure is	-	d in this manuscript without time limit. For all other ite	ms,
		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 initi	al planning of the work	
1	All support for the present	<b>X</b> None		
	manuscript (e.g., funding,			
	provision of study materials,			
	medical writing, article			
	processing charges, etc.)  No time limit for this item.			
	No time inine for time item.			
		Time frame: pas	st 36 months	
2	Grants or contracts from	<b>X</b> None		
	any entity (if not indicated			
	in item #1 above).			
3	Royalties or licenses	<b>X</b> None		

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Consulting fees

X \_\_None

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

There's no conflicts of interest to declare.
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Please place an "X" next to the following statement to indicate your agreement:

		ICMJE DISCI	OSURE FORM	
Dat	e:_2021-11-9			
	r Name: Zhoumiao Chen			
Ma	nuscript Title:Andrograp	holide inhibits non-small	cell lung cancer cell proliferation through the activation	of the
mit	ochondrial apoptosis pathw	ay and by reprogramming	host glucose metabolism	
Ma	nuscript number (if known):			
rela par to t	ted to the content of your n ties whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third if the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.	
	following questions apply touscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>	
to t med In it	he epidemiology of hyperted dication, even if that medica	nsion, you should declare tion is not mentioned in t port for the work reporte	defined broadly. For example, if your manuscript pertai all relationships with manufacturers of antihypertensiv the manuscript. d in this manuscript without time limit. For all other ite	e
		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	XNone		
	processing charges, etc.)			

Time frame: past 36 months

X \_\_None

**X**\_\_None

X \_\_None

No time limit for this item.

Grants or contracts from

in item #1 above).

Royalties or licenses

Consulting fees

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any entity (if not indicated

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5	Payment or honoraria for	<b>X</b> None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony	X	
	•		
7	Support for attending	<b>X</b> None	
,	meetings and/or travel	<b>X</b> None	
8	Patents planned, issued or	<b>X</b> None	
	pending		
9	Participation on a Data	<b>X</b> 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	<b>X</b> None	
12	Receipt of equipment, materials, drugs, medical	<b>X</b> None	
	writing, gifts or other		
	services		
13	Other financial or non-	<b>X</b> None	
	financial interests		

There's no conflicts of interest to declare.
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Please place an "X" next to the following statement to indicate your agreement:

Date	e:_2021-11-9			
You	r Name: Kai Liu			
Mar	nuscript Title:Andrograp	holide inhibits non-small	cell lung cancer cell proliferation through the activation	of the
mito	ochondrial apoptosis pathwa	ay and by reprogramming	host glucose metabolism	
Mar	nuscript number (if known):			
rela part to ti	ted to the content of your m ies whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third if the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.	
	following questions apply to uscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>	
to tl		nsion, you should declare	defined broadly. For example, if your manuscript pertain all relationships with manufacturers of antihypertensive the manuscript.	
	em #1 below, report all supp time frame for disclosure is		d in this manuscript without time limit. For all other iten	15,
		Name all entities with	Specifications/Comments	
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		relationship or indicate	institution)	
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		needed) Time frame: Since the initiation	al planning of the work	
1	All support for the present		ar planning of the work	
1	All support for the present manuscript (e.g., funding,	<b>X</b> None		
	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	<b>X</b> None		
	any entity (if not indicated			
2	in item #1 above).	V Nove		
3	Royalties or licenses	<b>X</b> None		

Consulting fees

X \_\_None

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5	Payment or honoraria for	<b>X</b> None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony	X	
	•		
7	Support for attending	<b>X</b> None	
,	meetings and/or travel	<b>X</b> None	
8	Patents planned, issued or	<b>X</b> None	
	pending		
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	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X None	
	in other board, society,		
	committee or advocacy		
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11	Stock or stock options	<b>X</b> None	
12	Receipt of equipment, materials, drugs, medical	<b>X</b> None	
	writing, gifts or other		
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13	Other financial or non-	<b>X</b> None	
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