Date:	Jan.	6 th , 2023	
Your N	Name:	Masato Uetani	
Manu	script Tit	tle: Successful treatment of ejaculation pain with silodosin in patient with Zinner syndrome - Cas	e report
Manu	script nu	umber (if known): TAU-22-746	-

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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		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, medical writing, article processing charges, etc.) No time limit for this item.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	
Г	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date:	Jan. 7 th	^h , 2023	
Your N	Name:	Fumito Yamabe	
Manu	script Title	: Successful treatment of ejaculation pain with silodosin in patient with Zinner syndrome	 Case report
Manu	script num	ber (if known): TAU-22-746	

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5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	
Г	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date: _	Jan. 7 ^{tl}	1, 2023	
Your N	lame:	Shunsuke Hori	
Manus	cript Title	: Successful treatment of ejaculation pain with silodosin in patient with Zinner syndrome	 Case report
Manus	cript num	ber (if known): TAU-22-746	-

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5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	
Г	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date:	Jan. 7	7 th , 2023	
Your I	Name:	Hiroshi Aoki	
Manu	script Titl	le: Successful treatment of ejaculation pain with silodosin in patient with Zinner syndrome –	· Case report
Manu	script nui	mber (if known): TAU-22-746	

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4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	
Г	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date: <u>Jan. 10^t</u>	^h , 2023
Your Name:	Kei Sakurabayashi
Manuscript Title:	Successful treatment of ejaculation pain with silodosin in patient with Zinner syndrome – Case report
Manuscript numb	per (if known):TAU-22-746

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	
Г	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date: <u>Jan. 10</u>	th , 2023	
Your Name:	Mizuho Okawa	
Manuscript Title	: Successful treatment of ejaculation pain with silodosin in patient with Zinner syndrome	– Case report
Manuscript num	ber (if known): <u>TAU-22-746</u>	

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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	XNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	
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Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date: <u>Jan. 10</u>	th, 2023
Your Name:	Hideyuki Kobayashi
Manuscript Title:	Successful treatment of ejaculation pain with silodosin in patient with Zinner syndrome – Case report
Manuscript num	ber (if known): TAU-22-746

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4	Consulting fees	XNone	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone	
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
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13	Other financial or non- financial interests	XNone	
	ase summarize the above co	onflict of interest in the fol	llowing box:
Ple	ase place an "X" next to the	following statement to in	dicate your agreement:

Date: <u>Jan. 11th, 2023</u>	
Your Name: Koichi Nakajima	
Manuscript Title: Successful treatment of ejaculation pain with silodosin in patient with Zinner syndrome – Cas	e report
Manuscript number (if known): <u>TAU-22-746</u>	_

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3	Royalties or licenses	XNone	
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5	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	XNone	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
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Date: <u>Jan. 11th, 2023</u>	=
Your Name: Koichi Nagao	_
Manuscript Title: <u>Successful treatment of ejaculation pain with silodosin in patient with Zinner syndrom</u>	e – Case report
Manuscript number (if known): <u>TAU-22-746</u>	

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Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date: Jai	n. 11 th , 2023	
Your Name:	Yozo Mitsui	
Manuscript Title: Successful treatment of ejaculation pain with silodosin in patient with Zinner syndrome - Case report		
Manuscript number (if known): TAU-22-746		

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