

ICMJE DISCLOSURE FORM

Date: 2021-01-11

Your Name: Lei Pang

Manuscript Title: Effect of the neuropathic pain receptor P2X3 on bladder function induced by intraperitoneal injection of cyclophosphamide(CYP)in interstitial cystitis rats

Manuscript number (if known): TAU-22-23

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			
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2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
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13	Other financial or non-financial interests	None	

Please summarize the above conflict of interest in the following box:

The author has no conflicts of interest to declare.

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Date: 2021-01-11

Your Name: Jinkai Shao

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Date: 2021-01-11

Your Name: Xiaodong Wen

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Date: 2021-01-11

Your Name: Dong Liu

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Your Name: Zhijia Zhang

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