Date: <u>2022/5/12</u>	_
Your Name: Hualu Han	_
Manuscript Title: <u>Associations Between Cerebral Blood Flow and Progression of White Matter</u>	Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): QIMS-22-141	

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	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	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X_None		
	lectures, presentations,			
	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	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		
10		37		
12	Receipt of equipment,	X_None		
	materials, drugs, medical writing, gifts or other			
	services			
13	Other financial or non-	X _None		
13	financial interests	NNOTIC		
	ariolar irrect ests			
Plea	Please summarize the above conflict of interest in the following box:			

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of interest to declare.

Date:2022/5/12	_
Your Name: Zihan Ning	
Manuscript Title: <u>Associations Between Cerebral Blood Flow and Progression of White Matter</u>	Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): QIMS-22-141	

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)	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	<u>X</u> 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	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X_None		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	X_None		
	testimony			
7	Support for attending meetings and/or travel	XNone		
	3 ,			
8	Patents planned, issued or	X_None		
	pending			
9	Participation on a Data	XNone		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society,			
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	XNone		
12	Receipt of equipment,	X_None		
	materials, drugs, medical			
	writing, gifts or other			
12	services Other financial or non-	V None		
13	financial interests	XNone		
	illialiciai liiterests			
Dles	Please summarize the above conflict of interest in the following box:			
FIEd	ise sullillarize life above lo	01 111151531 111 1116 10	HUWHIG DUA.	

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of in	terest to declare.

Date: <u>2022/5/12</u>	_
Your Name: Dandan Yang	
Manuscript Title: <u>Associations Between Cerebral Blood Flow and Progression of White Matter</u>	Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): QIMS-22-141	

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	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	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X_None		
	lectures, presentations,			
	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	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		
10		37		
12	Receipt of equipment,	X_None		
	materials, drugs, medical writing, gifts or other			
	services			
13	Other financial or non-	X _None		
13	financial interests	NNOTIC		
	ariolar irrect ests			
Plea	Please summarize the above conflict of interest in the following box:			

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of in	terest to declare.

Date:2022/5/12	
Your Name: Miaoxin Yu	
Manuscript Title: Associations Between Cerebral Blood Flow and Progression of White Matte	er Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): QIMS-22-141	

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	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	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	X_None	
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	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid	**	
11	Stock or stock options	X_None	
12	Descipt of a minus ant	V	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	<u>X</u> None	
	financial interests		
Plea	Please summarize the above conflict of interest in the following box:		
		31	

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of in	terest to declare.

Date: <u>2022/5/12</u>	_
Your Name:Huiyu Qiao	_
Manuscript Title: <u>Associations Between Cerebral Blood Flow and Progression of White Matter</u>	Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): QIMS-22-141	

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)	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.	Time frame: Since the initial X_None	planning of the work
		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		
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	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	
10		37	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	X _None	
13	financial interests	NNOTIC	
	ariolar irrect ests		
Plea	se summarize the above co	nflict of interest in the fo	llowing box:

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of in	terest to declare.

Date: <u>2022/5/12</u>	_
Your Name: Shuo Chen	_
Manuscript Title: Associations Between Cerebral Blood Flow and Progression of White Matter	Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): QIMS-22-141	

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)	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	<u>X</u> 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	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	X_None	
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	X_None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid	Y	
11	Stock or stock options	X_None	
12	Descire of a minus and	V AI	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	X_None	
	financial interests		
Plea	se summarize the above co	nflict of interest in the fo	llowing box:
		31	

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of interest to declare.

Date: <u>2022/5/12</u>	,
Your Name: Zhensen Chen	
Manuscript Title: Associations Between Cerebral Blood Flow and Progression of White Matter	Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): QIMS-22-141	

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	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	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X_None		
	lectures, presentations,			
	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	X_None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society,			
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	X_None		
10		37		
12	Receipt of equipment,	X_None		
	materials, drugs, medical writing, gifts or other			
	services			
13	Other financial or non-	X _None		
13	financial interests	NNOTIC		
	ariolar irrect ests			
Plea	Please summarize the above conflict of interest in the following box:			

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of in	terest to declare.

Date: 2022/5/12	_
Your Name: Dongye Li	_
Manuscript Title:_ Associations Between Cerebral Blood Flow and Progression of White Matter	Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): QIMS-22-141	

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)	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).	X_None	
3	Royalties or licenses	X_None	
4	Consulting fees	XNone	

5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending meetings and/or travel	X_None	
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	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid	**	
11	Stock or stock options	X_None	
12	Descipt of a minus ant	V	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	<u>X</u> None	
	financial interests		
Please summarize the above conflict of interest in the following box:			
		31	

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of in	terest to declare.

Date: <u>2022/5/12</u>	_
Your Name: Runhua Zhang	
Manuscript Title: <u>Associations Between Cerebral Blood Flow and Progression of White Matter</u>	Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): QIMS-22-141	

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	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	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X_None		
	lectures, presentations,			
	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	X_None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	XNone		
	in other board, society,			
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	X_None		
10		37		
12	Receipt of equipment,	X_None		
	materials, drugs, medical writing, gifts or other			
	services			
13	Other financial or non-	X _None		
13	financial interests	NNOTIC		
	ariolar irrect ests			
Plea	Please summarize the above conflict of interest in the following box:			

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of in	terest to declare.

Date:2022/5/12	
Your Name: Gaifen Liu	
Manuscript Title: Associations Between Cerebral Blood Flow and Progression of White Matte	er Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): OIMS-22-141	

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	None	
	manuscript (e.g., funding,	Beijing Municipal	Funding (2016-1-2041)
	provision of study materials,	Commission of Health and	
	medical writing, article	Family Planning	
	processing charges, etc.)	Beijing Municipal Science	Funding (D17110003017002)
	No time limit for this item.	and Technology	
		Commission	
		Ministry of Science and	Funding (2017YFC1307702, 2016YFC0901001)
		Technology of China	
		Time frame: past	36 months
2	Grants or contracts from	<u>X</u> None	
	any entity (if not indicated		
	in item #1 above).		

3	Royalties or licenses	X_None	
4	Consulting fees	X_None	
-		V AI	
5	Payment or honoraria for	X_None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
7	Support for attending meetings and/or travel	<u>X</u> None	
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	XNone	
	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	
	1		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

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

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of interest to declare.

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

Date: <u>2022/5/12</u>	_
Your Name: Xihai Zhao	
Manuscript Title: <u>Associations Between Cerebral Blood Flow and Progression of White Matter</u>	Hyperintensity in
Community-dwelling Adults: A Longitudinal Study	
Manuscript number (if known): OIMS-22-141	

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) Time frame: Since the initia	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.	None National Natural Science Foundation of China Beijing Municipal Science and Technology Commission Ministry of Science and Technology of China	Funding (81771825) Funding (D17110003017003) Funding (2017YFC1307904)
2	Grants or contracts from	Time frame: past	36 months
	any entity (if not indicated in item #1 above).	X_None	
3	Royalties or licenses	XNone	

4	Consulting fees	X None	
	. 0		
5	Payment or honoraria for	X_None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	V None	
,	meetings and/or travel	X_None	
8	Patents planned, issued or	X_None	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or	NONE	
	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	Descint of any invest	V Naga	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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

All authors have completed the ICMJE uniform disclosure form. The authors have no conflicts of interest to declare.

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