Date: Sep.21,2022	
Your Name: Hirom	ni Nishiba

Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal

cancer: A retrospective analysis

Manuscript number (if known): APM-22-1130

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).	×None	
3	Royalties or licenses	×None	
4	Consulting fees	×None	

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5	Payment or honoraria for	×None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	×None	
	testimony		
7	Support for attending meetings and/or travel	×None	
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8	Patents planned, issued or	×None	
	pending		
9	Participation on a Data	×None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	×None	
	in other board, society,		
	committee or advocacy		
44	group, paid or unpaid		
11	Stock or stock options	×None	
42	5	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
12	Receipt of equipment,	×None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	× None	
13	financial interests	^_None	
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	one	enflict of interest in the fo	lowing box:
		following statement to in	dicate your agreement:

Date: Sep.21,2022			
Your Name: Hisao	lmai		
Manuscript Title:	Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal		

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Please place an "X" next to the following statement to indicate your agreement:	n	one		
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Please place an "X" next to the following statement to indicate your agreement:				
	Plea	se place an "X" next to the	following statement to ir	dicate your agreement:

Date: Sep.21	,2022		
Your Name:	Yukiyoshi Fujita		

Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal

cancer: A retrospective analysis

Manuscript number (if known): APM-22-1130

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3	Royalties or licenses	×None	
4	Consulting fees	×None	

5	Payment or honoraria for	×None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	×None	
	testimony		
7	Support for attending meetings and/or travel	×None	
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8	Patents planned, issued or	×None	
	pending		
9	Participation on a Data	×None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	×None	
	in other board, society,		
	committee or advocacy		
44	group, paid or unpaid		
11	Stock or stock options	×None	
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12	Receipt of equipment,	×None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	× None	
13	financial interests	^_None	
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	one	enflict of interest in the fo	lowing box:
		following statement to in	dicate your agreement:

Date: Sep.23,2022	
Your Name: Eriko Hiruta	

Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal

cancer: A retrospective analysis

Manuscript number (if known): APM-22-1130

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13	Other financial or non-	× None	
13	financial interests	^_None	
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	one	enflict of interest in the fo	lowing box:
		following statement to in	dicate your agreement:

Date: Sep.21,2022	
Your Name: Takashi Masuno	

Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal

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speakers bureaus, manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel 8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-financial interests Please summarize the above conflict of interest in the following box: None	5		×None	
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	Plea	se place an "X" next to the	following statement to ir	dicate your agreement:

Date: <u>Sep.21,2022</u>	
Your Name: Shigek	i Yamazaki
B. 6	

Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal

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committee or advocacy group, paid or unpaid 11 Stock or stock options	10		×None	
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	Plea	se place an "X" next to the	following statement to ir	dicate your agreement:

Date: Sep.24,2022	
Your Name: <u>Hajime Tanaka</u>	

Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal

cancer: A retrospective analysis

Manuscript number (if known): APM-22-1130

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.	X_None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	×None	
3	Royalties or licenses	×None	
4	Consulting fees	×None	

Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events				
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	Plea	se place an "X" next to the	following statement to ir	dicate your agreement:

Dat	e: <u>Sep.21,2022</u>		
You	our Name: Teruhiko Kamiya		
Ma	nuscript Title: Efficacy and	safety of naldemedine tre	eatment for opioid-induced constipation in gastrointestinal
can	cer: A retrospective analysis		
Ma	nuscript number (if known):	APM-22-1130	
rela par to t	ted to the content of your n ties whose interests may be	nanuscript. "Related" mea affected by the content of ecessarily indicate a bias.	relationships/activities/interests listed below that are ns any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.
	following questions apply t nuscript only.	o the author's relationship	os/activities/interests as they relate to the <u>current</u>
to t	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.		
	em #1 below, report all sup time frame for disclosure is	•	I in this manuscript without time limit. For all other items,
		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 initia	planning of the work
1	All support for the present	×None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article processing charges, etc.)		

Time frame: past 36 months

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None

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_None

No time limit for this item.

Grants or contracts from

in item #1 above).

Royalties or licenses

Consulting fees

any entity (if not indicated

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Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events				
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speakers bureaus, manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel 8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-financial interests Please summarize the above conflict of interest in the following box: None	5		×None	
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Please place an "X" next to the following statement to indicate your agreement:				
	Plea	se place an "X" next to the	following statement to ir	dicate your agreement:

Date: Sep.21,2022	
Your Name: Masako Ito	

Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal

cancer: A retrospective analysis

Manuscript number (if known): APM-22-1130

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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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).	×None	
3	Royalties or licenses	×_None	
4	Consulting fees	×None	

5	Payment or honoraria for	×None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	×None	
	testimony		
7	Support for attending meetings and/or travel	×None	
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8	Patents planned, issued or	×None	
	pending		
9	Participation on a Data	×None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	×None	
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11	Stock or stock options	×None	
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12	Receipt of equipment,	×None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	× None	
13	financial interests	^_None	
	illianciai iliterests		
	one	enflict of interest in the fo	lowing box:
		following statement to in	dicate your agreement:

Date: Sep.26,2022	
Your Name: Satoshi Takei	

Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal

cancer: A retrospective analysis

Manuscript number (if known): APM-22-1130

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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	Plea	se place an "X" next to the	following statement to ir	dicate your agreement:

Date: Sep.21,2022	
Your Name: Masa	to Matsuura
Manuscript Title:	Efficacy and safety of naldomeding treatment for opioid indused constinution in

Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal

cancer: A retrospective analysis

Manuscript number (if known): APM-22-1130

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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
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4	Consulting fees	×None	

5	Payment or honoraria for	×None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	×None	
	testimony		
7	Support for attending meetings and/or travel	×None	
	-		
8	Patents planned, issued or	×None	
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9	Participation on a Data	×None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	×None	
	in other board, society,		
	committee or advocacy		
44	group, paid or unpaid		
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42	5	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
12	Receipt of equipment,	×None	
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Date: Sep.21,2022	
Your Name: Junno	suke Mogi
Manuscript Title: cancer: A retrospe	Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal ctive analysis
Manuscript numb	er (if known): APM-22-1130
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	manuscript writing or educational events		
6	Payment for expert	×None	
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7	Support for attending meetings and/or travel	×None	
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	committee or advocacy		
44	group, paid or unpaid		
11	Stock or stock options	×None	
42	5	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
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Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastroin cancer: A retrospective analysis	testinal
Manuscript number (if known): APM-22-1130	
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6	Payment for expert	×None	
	testimony		
7	Support for attending meetings and/or travel	×None	
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8	Patents planned, issued or	×None	
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9	Participation on a Data	×None	
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11	group, paid or unpaid Stock or stock options	× None	
11	Stock of Stock options	×None	
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Date: <u>Sep.24,2022</u>	
Your Name: Koichi	Minato

Manuscript Title: Efficacy and safety of naldemedine treatment for opioid-induced constipation in gastrointestinal

cancer: A retrospective analysis

Manuscript number (if known): APM-22-1130

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	lectures, presentations,		
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	manuscript writing or educational events		
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	testimony		
7	Support for attending meetings and/or travel	×None	
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8	Patents planned, issued or	×None	
	pending		
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	Advisory Board		
10	Leadership or fiduciary role	×None	
	in other board, society,		
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11	Stock of Stock options	×None	
12	Receipt of equipment,	× None	
12	materials, drugs, medical	^_None	
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