

## ICMJE DISCLOSURE FORM

Date: 9/4/2021  
 Your Name: Xiaoyan Cai  
 Manuscript Title: Narrative review: Recent advances in doll therapy for Alzheimer's disease  
 Manuscript number (if known): APM-21-853

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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3	Royalties or licenses	None	
4	Consulting fees	None	

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6	Payment for expert testimony	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 authors have no conflicts of interest to declare.

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

**I certify that I have answered every question and have not altered the wording of any of the questions on this form.**

## ICMJE DISCLOSURE FORM

Date: 9/4/2021  
 Your Name: Lu Zhou  
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Date: 9/4/2021  
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Date: 9/4/2021  
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Date: 9/4/2021  
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## ICMJE DISCLOSURE FORM

Date: 9/4/2021  
 Your Name: Fang Fang  
 Manuscript Title: Narrative review: Recent advances in doll therapy for Alzheimer's disease  
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Date: 9/4/2021  
 Your Name: Zhi Zhang  
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