

ICMJE DISCLOSURE FORM

Date: 2021-4.1

Your Name: Lu Gu

Manuscript Title: The effect of sedentary time on the results of exercise therapy in patients with peripheral arterial disease complicated with type 2 diabetes

Manuscript number (if known): APM-21-773

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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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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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u> </u> None	
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Please summarize the above conflict of interest in the following box:

<p>The authors have no conflicts of interest to declare.</p>
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