Date:	: May 11 th , 2021		
Your N	Name: Xin Su		
Manu	uscript Title: Cardioprot	ective effect of Saffron Total-glycoside Tablet in patients with br	east cancer receiving
<u>anthra</u>	racycline-based chemot	herapy: study protocol for a multicenter, randomized, parallel, d	ouble-blind, placebo
contro	rolled clinical trial		
Manu	uscript number (if know	/n): APM-21-444	

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	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	XNone	
	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 lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
Ple	Please summarize the above conflict of interest in the following box:			

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

None.

Date:	May 1	11 th , 2021	
Your N	Name:	Xiang-Ying Li	
Manu	script Title	e: Cardioprotective effect of Saffron Total-glycoside Tablet in patients with breast cancer receive	ving
<u>anthra</u>	acycline-b	ased chemotherapy: study protocol for a multicenter, randomized, parallel, double-blind, place	<u>ebo</u>
contro	olled clinic	cal trial	
Manu	script nur	mber (if known): APM-21-444	

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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
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone		
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone		
11	Stock or stock options	XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None		
13	Other financial or non- financial interests	XNone		
Ple	Please summarize the above conflict of interest in the following box:			

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

None.

Date: <u>May 11th, 2021</u>	
Your Name: Yi-Jun Zhang	
Manuscript Title: Cardioprotective effect of Saffron Total-glycoside Tablet in patients with breast cancer recei	ving
anthracycline-based chemotherapy: study protocol for a multicenter, randomized, parallel, double-blind, plac	ebo-
controlled clinical trial	
Manuscript number (if known): <u>APM-21-444</u>	

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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).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
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5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
٦	pending	ANONE	
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9	Participation on a Data	X None	
,	Safety Monitoring Board or	NONE	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
ļ	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Pacaint of aguinment	Y None	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
_5	financial interests		
	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date:	May 11	1 th , 2021	_
Your I	Name:	Yong-Sheng Liu	_
Manu	script Title	: Cardioprotective effect of Saffron Total-glycoside Tablet in patients with breast cancer	receiving
<u>anthr</u>	acycline-ba	ased chemotherapy: study protocol for a multicenter, randomized, parallel, double-bling	l, placebo-
contr	olled clinica	al trial	
Manu	script num	ber (if known): APM-21-444	

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		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) 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).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
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5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
٦	pending	ANONE	
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9	Participation on a Data	X None	
,	Safety Monitoring Board or	NONE	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
ļ	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Pacaint of aguinment	Y None	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
_5	financial interests		
	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date: May 11 th , 2021	
Your Name: Chao Yuan	
Manuscript Title: Cardioprotective effect of Saffron Total-gly	coside Tablet in patients with breast cancer receiving
anthracycline-based chemotherapy: study protocol for a mult	ticenter, randomized, parallel, double-blind, placebo-
controlled clinical trial	
Manuscript number (if known): APM-21-444	

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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
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
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5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
٦	pending	ANONE	
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9	Participation on a Data	X None	
,	Safety Monitoring Board or	NONE	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
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	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Pacaint of aguinment	Y None	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
_5	financial interests		
	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date: <u>May 11th, 2021</u>	
Your Name: Fan Yang	•
Manuscript Title: Cardioprotective effect of Saffron Total-glycoside Tablet in patients with breast cancer	receiving
anthracycline-based chemotherapy: study protocol for a multicenter, randomized, parallel, double-blind	, placebo-
controlled clinical trial	
Manuscript number (if known): <u>APM-21-444</u>	

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		needed) 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).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
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5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
٦	pending	ANONE	
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9	Participation on a Data	X None	
,	Safety Monitoring Board or	NONE	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
ļ	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Pacaint of aguinment	Y None	
12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
_5	financial interests		
	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date:	May 1	L th , 2021			
Your N	lame:	Can Liu			
Manus	cript Title	<u>Cardioprotectiv</u>	effect of Saffron Total-glycoside Tablet in	n patients with breast	cancer receiving
<u>anthra</u>	cycline-ba	sed chemothera	y: study protocol for a multicenter, rando	mized, parallel, doub	le-blind, placebo-
contro	lled clinic	ıl trial			
Manus	cript num	ber (if known): _	NPM-21-444		

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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.	X_None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
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5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
٦	pending	ANONE	
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9	Participation on a Data	X None	
,	Safety Monitoring Board or	NONE	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
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	group, paid or unpaid		
11	Stock or stock options	XNone	
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12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
_5	financial interests		
	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date:	May 1	11 th , 2021	
Your N	lame:	Heng-Wen Chen	
Manus	script Title	e: Cardioprotective effect of Saffron Total-glycoside Tablet in patients with brea	ast cancer receiving
<u>anthra</u>	acycline-b	pased chemotherapy: study protocol for a multicenter, randomized, parallel, do	uble-blind, placebo-
contro	olled clinic	cal trial	_
Manus	script nun	mber (if known): <u>APM-21-444</u>	

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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)
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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
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
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5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
٦	pending	ANONE	
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9	Participation on a Data	X None	
,	Safety Monitoring Board or	NONE	
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10	Leadership or fiduciary role	XNone	
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	group, paid or unpaid		
11	Stock or stock options	XNone	
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12	Receipt of equipment, materials, drugs, medical	X_None	
	writing, gifts or other		
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13	Other financial or non-	XNone	
_5	financial interests		
	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	ase place an "X" next to the	following statement to in	dicate vour agreement:

Date:	May 1	.1 th , 2021
Your I	Name:	Xing-Jiang Xiong
Manu	script Title	e: Cardioprotective effect of Saffron Total-glycoside Tablet in patients with breast cancer receiving
<u>anthra</u>	acycline-b	ased chemotherapy: study protocol for a multicenter, randomized, parallel, double-blind, placebo-
contro	olled clinic	al trial
Manu	script nun	nber (if known): <u>APM-21-444</u>

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		needed) Time frame: Since the initial	planning of the work
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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
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5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
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9	Participation on a Data	X None	
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	Advisory Board		
10	Leadership or fiduciary role	XNone	
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	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	Y None	
12	materials, drugs, medical writing, gifts or other	X_None	
	services		
13	Other financial or non-	XNone	
_5	financial interests		
	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	Please place an "X" next to the following statement to indicate your agreement:		

Date:	May 11	1 th , 2021	
Your Nam	ne:	Yong-Hong Gao	
Manuscri	pt Title:	: Cardioprotective effect of Saffron Total-glycoside Tablet in patients with breast cancer re	eceiving
anthracyc	cline-ba	sed chemotherapy: study protocol for a multicenter, randomized, parallel, double-blind, p	lacebo-
controlled	d clinica	al trial	
Manuscri	pt num	ber (if known): <u>APM-21-444</u>	

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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 initia	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).	XNone	
3	Royalties or licenses	XNone	

4	Consulting fees	XNone	
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5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
٦	pending	ANONE	
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9	Participation on a Data	X None	
,	Safety Monitoring Board or	NONE	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
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	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	Y None	
12	materials, drugs, medical writing, gifts or other	X_None	
	services		
13	Other financial or non-	XNone	
_5	financial interests		
	ase summarize the above co	onflict of interest in the fol	lowing box:
Ple	Please place an "X" next to the following statement to indicate your agreement:		

Date: May 11 th , 2021	
Your Name: Yan-Wei Xing	
Manuscript Title: Cardioprotective effect of Saffron Total-glycoside Tablet in patients w	ith breast cancer receiving
anthracycline-based chemotherapy: study protocol for a multicenter, randomized, para	llel, double-blind, placebo-
controlled clinical trial	
Manuscript number (if known): <u>APM-21-444</u>	

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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).	XNone		
3	Royalties or licenses	XNone		

4	Consulting fees	XNone	
_	D	V N	
5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
٦	pending	ANONE	
	. U		
9	Participation on a Data	X None	
,	Safety Monitoring Board or	NONE	
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
ļ	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	Y None	
12	materials, drugs, medical writing, gifts or other	X_None	
	services		
13	Other financial or non-	XNone	
_5	financial interests		
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