

ICMJE DISCLOSURE FORM

Date: 2021-9-10
 Your Name: Bingbing Zhang
 Manuscript Title: Association between IL-18, IFN- γ and TB susceptibility: a systematic review and meta-analysis
 Manuscript number (if known): _____

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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Time frame: past 36 months			
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3	Royalties or licenses	<u> X </u>	
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u> X </u>	
13	Other financial or non-financial interests	<u> X </u>	

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

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ICMJE DISCLOSURE FORM

Date: 2021-9-10
 Your Name: Liubin Xiao
 Manuscript Title: Association between IL-18, IFN- γ and TB susceptibility: a systematic review and meta-analysis
 Manuscript number (if known): _____

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Date: 2021-9-10
 Your Name: Qunfang Qiu
 Manuscript Title: Association between IL-18, IFN- γ and TB susceptibility: a systematic review and meta-analysis
 Manuscript number (if known): _____

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Date: 2021-9-10

Your Name: Lei Miao

Manuscript Title: Association between IL-18, IFN- γ and TB susceptibility: a systematic review and meta-analysis

Manuscript number (if known): _____

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Date: 2021-9-10

Your Name: Shan Yan

Manuscript Title: Association between IL-18, IFN- γ and TB susceptibility: a systematic review and meta-analysis

Manuscript number (if known): _____

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Date: 2021-9-10
 Your Name: Shiquan Zhou
 Manuscript Title: Association between IL-18, IFN- γ and TB susceptibility: a systematic review and meta-analysis
 Manuscript number (if known): _____

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