Date:	2021-9-19
Your Name:	Jun Hu
Manuscript Title:	Meta-analysis of acupoint application combined with western medicine therapy in the
treatment of bronch	ial asthma
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.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>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	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	<u>X</u> None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	<u>X</u> None	
4	Consulting fees	XNone	

5	Payment or honoraria for	<u>X</u> None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
Ŭ	testimony		
	cestimony		
7	Support for attending	X None	
'			
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
5	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	Y Nana	
10		<u>X</u> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<u>X</u> None	
12	Receipt of equipment,	<u> X </u> None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	<u>X</u> None	
	financial interests		

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

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

Date:	2021-9-19
Your Name:	Cong Zhang
Manuscript Title:	Meta-analysis of acupoint application combined with western medicine therapy in the
treatment of bronchi	al asthma
Manuscript number	(if known):

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	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	<u>X</u> None	
4	Consulting fees	XNone	

5	Payment or honoraria for	<u>X</u> None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
Ŭ	testimony		
	cestimony		
7	Support for attending	X None	
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	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
5	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	Y Nana	
10		<u>X</u> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<u>X</u> None	
12	Receipt of equipment,	<u> X </u> None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	<u>X</u> None	
	financial interests		

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

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

Date:	2021-9-19
Your Name:	Shumei Zhao
Manuscript Title:	Meta-analysis of acupoint application combined with western medicine therapy in the
treatment of bronch	ial asthma
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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2	Grants or contracts from	<u>X</u> None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	<u>X</u> None	
4	Consulting fees	XNone	

5	Payment or honoraria for	<u>X</u> None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
Ŭ	testimony		
	cestimony		
7	Support for attending	X None	
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	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
5	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	Y Nana	
10		<u>X</u> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<u>X</u> None	
12	Receipt of equipment,	<u> X </u> None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	<u>X</u> None	
	financial interests		

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

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

Date:	2021-9-19
Your Name:	Kaiwen Ge
Manuscript Title:	Meta-analysis of acupoint application combined with western medicine therapy in the
treatment of bronchi	al asthma
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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	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	<u>X</u> None	
4	Consulting fees	XNone	

5	Payment or honoraria for	<u>X</u> None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
Ŭ	testimony		
	cestimony		
7	Support for attending	X None	
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	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
5	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	Y Nana	
10		<u>X</u> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<u>X</u> None	
12	Receipt of equipment,	<u> X </u> None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	<u>X</u> None	
	financial interests		

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

Date:	2021-9-19
Your Name:	Kuan Di
Manuscript Title:	Meta-analysis of acupoint application combined with western medicine therapy in the
treatment of bronch	ial asthma
Manuscript number	(if known):

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	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	<u>X</u> None	
4	Consulting fees	XNone	

5	Payment or honoraria for	<u>X</u> None	
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	speakers bureaus,		
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6	Payment for expert	X None	
Ŭ	testimony		
	cestimony		
7	Support for attending	X None	
/			
	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	Y Nana	
10		<u>X</u> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<u>X</u> None	
12	Receipt of equipment,	<u> X </u> None	
1	materials, drugs, medical		
	writing, gifts or other		
1	services		
13	Other financial or non-	<u>X</u> None	
	financial interests		

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

Date:	2021-9-19
Your Name:	Hesheng Wang
Manuscript Title:	Meta-analysis of acupoint application combined with western medicine therapy in the
treatment of bronchi	al asthma
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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_	in item #1 above).		
3	Royalties or licenses	<u>X</u> None	
4	Consulting fees	<u>X</u> None	

5	Payment or honoraria for	<u>X</u> None	
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7	Support for attending	X None	
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	meetings and/or travel		
8	Patents planned, issued or	X None	
	pending		
9	Participation on a Data	X None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	Y Nana	
10		<u>X</u> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<u>X</u> None	
12	Receipt of equipment,	<u> X </u> None	
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1	services		
13	Other financial or non-	<u>X</u> None	
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Please place an "X" next to the following statement to indicate your agreement:

Date:	2021-9-19		
Your Name:	Lanying Liu		
Manuscript Title: Meta-analysis of acupoint application combined with western medicine thera			
treatment of bronch	al asthma		
Manuscript number	(if known):		

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3	Royalties or licenses	<u>X</u> None	
4	Consulting fees	XNone	

5	Payment or honoraria for	<u>X</u> None	
	lectures, presentations,		
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7	Support for attending	X None	
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	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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10	Leadership or fiduciary role	Y Nana	
10		<u>X</u> None	
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