Date:	October 11, 2021
Your Name:_	Jingwei Zhang
<b>Manuscript T</b>	itle:Influence of HNF4α and HNF4α-AS1gene variants on the risk of anti-tuberculosis drugs-induced
hepatotoxicit	t <u>y</u>
Manuscript n	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 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 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)
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	

in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:	$\neg$		1	
lectures, presentations, speakers bureaus, manuscript writing or educational events   X None		Payment or honoraria for	X None	
speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Other financial interests  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o			_ X None	
manuscript writing or educational events  Payment for expert				
educational events Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, giffs or other services  Other financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o	5		X None	
Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  None  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o		,		
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	7	Support for attending	X None	
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions or		· · ·		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of		<b>G</b> ,		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of			- N	
Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non- financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	3		_ XNone	
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		penaing		
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		D 11 1 11 D 1	V N	
Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place in the following statement of the questions	9	The state of the s	xNone	
Delase place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of minutes of advocacy group, paid or unpaid  Lot of the place an "X" next to the questions of the question				
in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of				
committee or advocacy group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	10		XNone	
group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of		<del>-</del>		
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	1.4		V None	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	11	Stock of Stock options	XNone	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of				
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	2	Descipt of aguinment	V None	
writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of	.2		XNone	
Services Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions on				
Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or				
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	13	0.01.11000	Y None	
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	.5		_ X None	
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		manetal interests		
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or	Plو	ase summarize the above o	onflict of interest in the fo	allowing hox:
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				5.10 th 1.16 to 1.1
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		None		
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions or	-			
XI certify that I have answered every question and have not altered the wording of any of the questions of		1 //5411	<b>.</b>	
	Ple	ase place an "X" next to the	e tollowing statement to i	ndicate your agreement:
form.	X	I certify that I have answ	vered every question and	have not altered the wording of any of the questions o
	for	m.		

Date:	October 11, 2021				
Your Name	z Xingren Liu				
Manuscript	Title: Influence of HNF4 $\alpha$ and HNF4 $\alpha$ -AS1gene variants on the risk of anti-tuberculosis drugs-induced				
hepatotoxic	<u>city</u>				
Manuscript	Vanuscript 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 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 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)
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	

in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:	$\neg$		1	
lectures, presentations, speakers bureaus, manuscript writing or educational events   X None		Payment or honoraria for	X None	
speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Other financial interests  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o			_ X None	
manuscript writing or educational events  Payment for expert				
educational events Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, giffs or other services  Other financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o	5		X None	
Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  None  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o		,		
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	7	Support for attending	X None	
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions or		· · ·		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of		<b>G</b> ,		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of			- N	
Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non- financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	3		_ XNone	
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		penaing		
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		D 11 1 11 D 1	V N	
Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place in the following statement of the questions	9	The state of the s	xNone	
Delase place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of minutes of advocacy group, paid or unpaid  Lot of the place an "X" next to the questions of the question				
in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of				
committee or advocacy group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	10		XNone	
group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of		<del>-</del>		
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	1.4		V None	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	11	Stock of Stock options	XNone	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of				
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	2	Descipt of aguinment	V None	
writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of	.2		XNone	
Services Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions on				
Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or				
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	13	0.01.11000	Y None	
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	.5		_ X None	
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		manetal interests		
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or	Plو	ase summarize the above o	onflict of interest in the fo	allowing hox:
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				5.10 th 1.16 to 1.1
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		None		
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions or	-			
XI certify that I have answered every question and have not altered the wording of any of the questions of		1 //5411	<b>.</b>	
	Ple	ase place an "X" next to the	e tollowing statement to i	ndicate your agreement:
form.	X	I certify that I have answ	vered every question and	have not altered the wording of any of the questions o
	for	m.		

Date:	October 11, 2021
Your Name:_	Hai He
Manuscript 1	Title: Influence of HNF4α and HNF4α-AS1 gene variants on the risk of anti-tuberculosis drugs-induced
hepatotoxici	<u>ity</u>
Manuscript r	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 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 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)
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.		Time frame: Since the initialXNone	planning of the work
		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	

in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:	$\neg$		1	
lectures, presentations, speakers bureaus, manuscript writing or educational events   X None		Payment or honoraria for	X None	
speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Other financial interests  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o			_ X None	
manuscript writing or educational events  Payment for expert				
educational events Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, giffs or other services  Other financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o	5		X None	
Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  None  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o		,		
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	7	Support for attending	X None	
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions or		· · ·		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of		<b>G</b> ,		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of			- N	
Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non- financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	3		_ XNone	
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		penaing		
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		D 11 1 11 D 1	V N	
Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place in the following statement of the questions	9	The state of the s	xNone	
Delase place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of minutes of advocacy group, paid or unpaid  Lot of the place an "X" next to the questions of the question				
in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of				
committee or advocacy group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	10		XNone	
group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of		<del>-</del>		
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	1.4		V None	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	11	Stock of Stock options	XNone	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of				
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	2	Descipt of aguinment	V None	
writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of	.2		XNone	
Services Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions on				
Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or				
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	13	0.01.11000	Y None	
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	.5		_ X None	
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		manetal interests		
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or	Plو	ase summarize the above o	onflict of interest in the fo	allowing hox:
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				5.10 th 1.16 to 1.1
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		None		
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions or	-			
XI certify that I have answered every question and have not altered the wording of any of the questions of		1 //5411	<b>.</b>	
	Ple	ase place an "X" next to the	e tollowing statement to i	ndicate your agreement:
form.	X	I certify that I have answ	vered every question and	have not altered the wording of any of the questions o
	for	m.		

Date:	<u>Octob</u>	er 11, 2021		<del></del>
Your Name	e:	_ Wei Zhou		_
Manuscrip	t Title:	Influence of HNI	F4α and HNF4α-AS1gene var	iants on the risk of anti-tuberculosis drugs-induced
hepatotox	icity_			
Manuscrip	t numbe	r (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 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 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	

in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:	$\neg$		1	
lectures, presentations, speakers bureaus, manuscript writing or educational events   X None		Payment or honoraria for	X None	
speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Other financial interests  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o			_ X None	
manuscript writing or educational events  Payment for expert				
educational events Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, giffs or other services  Other financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o	5		X None	
Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  None  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o		,		
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	7	Support for attending	X None	
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions or		· · ·		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of		<b>G</b> ,		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of			- N	
Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non- financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	3		_ XNone	
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		penaing		
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		D 11 1 11 D 1	V N	
Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place in the following statement of the questions	9	The state of the s	xNone	
Delase place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of minutes of advocacy group, paid or unpaid  Lot of the place an "X" next to the questions of the question				
in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of				
committee or advocacy group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	10		XNone	
group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of		<del>-</del>		
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	1.4		V None	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	11	Stock of Stock options	XNone	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of				
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	2	Descipt of aguinment	V None	
writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of	.2		XNone	
Services Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions on				
Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or				
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	13	0.01.11000	Y None	
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	.5		_ X None	
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		manetal interests		
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or	Plو	ase summarize the above o	onflict of interest in the fo	allowing hox:
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				5.10 th 1.16 to 1.1
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		None		
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions or	-			
XI certify that I have answered every question and have not altered the wording of any of the questions of		1 //5411	<b>.</b>	
	Ple	ase place an "X" next to the	e tollowing statement to i	ndicate your agreement:
form.	X	I certify that I have answ	vered every question and	have not altered the wording of any of the questions o
	for	m.		

Date:	October 11, 2021
Your Name:_	Yao Liu
Manuscript 1	tle: <u>Influence of HNF4α and HNF4α-AS1 gene variants on the risk of anti-tuberculosis drugs-induced</u>
hepatotoxici	<u>/_</u>
Manuscript r	umber (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 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 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)
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.	Time frame: Since the initialXNone	planning of the work
		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	

in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:	$\neg$		1	
lectures, presentations, speakers bureaus, manuscript writing or educational events   X None		Payment or honoraria for	X None	
speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Other financial interests  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o			_ X None	
manuscript writing or educational events  Payment for expert				
educational events Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, giffs or other services  Other financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o	5		X None	
Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  None  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o		,		
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	7	Support for attending	X None	
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions or pending the property of the property of the property of the questions or		· · ·		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of		<b>G</b> ,		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of			- N	
Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non- financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	3		_ XNone	
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		penaing		
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		D 11 1 11 D 1	V N	
Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place in the following statement of the questions	9	The state of the s	xNone	
Dease place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or monther sources.    X _ None				
in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of				
committee or advocacy group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	10		XNone	
group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of		<del>-</del>		
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	1.4		V None	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	11	Stock of Stock options	XNone	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of				
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	2	Descipt of aguinment	V None	
writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of	.2		XNone	
Services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions on				
Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or				
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	13	0.01.11000	Y None	
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	.5		_ X None	
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		manetal interests		
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or	Plو	ase summarize the above o	onflict of interest in the fo	allowing hox:
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				5.10 th 1.16 to 1.1
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		None		
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions or	-			
XI certify that I have answered every question and have not altered the wording of any of the questions of		1 //5411	<b>.</b>	
	Ple	ase place an "X" next to the	e tollowing statement to i	ndicate your agreement:
form.	X	I certify that I have answ	vered every question and	have not altered the wording of any of the questions o
	for	m.		

Date:	<u> Octob</u>	<u>er 11, 2021</u>			_		
Your Name	:	_ Peidu Jiang					
Manuscript	t Title:	Influence of HNF4	α and HNF4α-AS1g	gene variants on th	ne risk of anti-tu	uberculosis drugs-i	nduced
hepatotoxic	city_						
Manuscript	t numbei	r (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 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 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)
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.	Time frame: Since the initialXNone	planning of the work
		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	

in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:	$\neg$		1	
lectures, presentations, speakers bureaus, manuscript writing or educational events   X None		Payment or honoraria for	X None	
speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Other financial interests  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o			_ X None	
manuscript writing or educational events  Payment for expert				
educational events Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, giffs or other services  Other financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o	5		X None	
Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  None  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o		,		
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	7	Support for attending	X None	
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions or pending the property of the property of the property of the questions or		· · ·		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of		<b>G</b> ,		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of			- N	
Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non- financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	3		_ XNone	
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		penaing		
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		D 11 1 11 D 1	V N	
Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place in the following statement of the questions	9	The state of the s	xNone	
Dease place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or monther sources.    X _ None				
in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of				
committee or advocacy group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	10		XNone	
group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of		<del>-</del>		
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	1.4		V None	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	11	Stock of Stock options	XNone	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of				
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	2	Descipt of aguinment	V None	
writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of	.2		XNone	
Services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions on				
Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or				
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	13	0.01.11000	Y None	
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	.5		_ X None	
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		manetal interests		
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or	Plو	ase summarize the above o	onflict of interest in the fo	allowing hox:
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				5.10 th 1.16 to 1.1
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		None		
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions or	-			
XI certify that I have answered every question and have not altered the wording of any of the questions of		1 //5411	<b>.</b>	
	Ple	ase place an "X" next to the	e tollowing statement to i	ndicate your agreement:
form.	X	I certify that I have answ	vered every question and	have not altered the wording of any of the questions o
	for	m.		

Date:_		<u>October 1</u>	.1, 2021				_			
Your N	Name:	Jii	ng Feng							
Manus	script Ti	tle: Infl	luence of HNF	4α and HNF4	α-AS1gene	variants on the	e risk of an	ti-tuberculo	sis drugs-ind	uced
hepat	otoxicity	<u> </u>								
Manus	script nu	umber (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 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 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)
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	planning of the work
		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	

in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:			1	
lectures, presentations, speakers bureaus, manuscript writing or educational events   X None		Payment or honoraria for	X None	
speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Other financial interests  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o			_ X None	
manuscript writing or educational events  Payment for expert				
educational events Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, giffs or other services  Other financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o	5		X None	
Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  None  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o		,		
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	7	Support for attending	X None	
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions or pending the property of the property of the property of the questions or		· · ·		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of		<b>G</b> ,		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of			- N	
Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non- financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	3		_ XNone	
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		penaing		
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		D 11 1 11 D 1	V N	
Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place in the following statement of the questions	9	The state of the s	xNone	
Dease place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or monther sources.    X _ None				
in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of				
committee or advocacy group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	10		XNone	
group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of		<del>-</del>		
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	1.4		V None	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	11	Stock of Stock options	XNone	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of				
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	2	Descipt of aguinment	V None	
writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of	.2		XNone	
Services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions on				
Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or				
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	13	0.01.11000	Y None	
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	.5		_ X None	
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		manetal interests		
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or	Plو	ase summarize the above o	onflict of interest in the fo	allowing hox:
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				5.10 th 1.16 to 1.1
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		None		
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions or	-			
XI certify that I have answered every question and have not altered the wording of any of the questions of		1 //5411	<b>.</b>	
	Ple	ase place an "X" next to the	e tollowing statement to i	ndicate your agreement:
form.	X	I certify that I have answ	vered every question and	have not altered the wording of any of the questions o
	for	m.		

Date:	October	11, 2021					
Your Name:_		Yi Zhou					
<b>Manuscript T</b>	Γitle: <u>Ir</u>	nfluence of HNF4	and HNF4α-A	S1gene variants	s on the risk	c of anti-tuberculo	sis drugs-induced
hepatotoxicit	ty_						
Manuscript n	number (i	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 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 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	

in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:			1	
lectures, presentations, speakers bureaus, manuscript writing or educational events   X None		Payment or honoraria for	X None	
speakers bureaus, manuscript writing or educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Other financial interests  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o			_ X None	
manuscript writing or educational events  Payment for expert				
educational events Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, giffs or other services  Other financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o	5		X None	
Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o				
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  None  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions o		,		
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	7	Support for attending	X None	
Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions or pending the property of the property of the property of the questions or		· · ·		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of		<b>G</b> ,		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of			- N	
Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non- financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	3		_ XNone	
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		penaing		
Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place of the pl		D 11 1 11 D 1	V N	
Advisory Board  Deadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of the place in the following statement of the questions	9	The state of the s	xNone	
Dease place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or monther sources.    X _ None				
in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of				
committee or advocacy group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of	10		XNone	
group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X_I certify that I have answered every question and have not altered the wording of any of the questions of				
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of		<del>-</del>		
Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	1.4		V None	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	11	Stock of Stock options	XNone	
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of				
materials, drugs, medical writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions of	2	Descipt of aguinment	V None	
writing, gifts or other services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions of	.2		XNone	
Services  Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions on				
Other financial or non-financial interests  Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or				
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	13	0.01.11000	Y None	
Please summarize the above conflict of interest in the following box:  None  Please place an "X" next to the following statement to indicate your agreement:  X _ I certify that I have answered every question and have not altered the wording of any of the questions or	.5		_ X None	
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		manetal interests		
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				
None  Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or	Plو	ase summarize the above o	onflict of interest in the fo	allowing hox:
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or				5.10 th 1.16 to 1.1
Please place an "X" next to the following statement to indicate your agreement:  XI certify that I have answered every question and have not altered the wording of any of the questions or		None		
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions or				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions of				
XI certify that I have answered every question and have not altered the wording of any of the questions or	-			
XI certify that I have answered every question and have not altered the wording of any of the questions of		1 //5411	<b>.</b>	
	Ple	ase place an "X" next to the	e tollowing statement to i	ndicate your agreement:
form.	X	I certify that I have answ	vered every question and	have not altered the wording of any of the questions o
	for	m.		

Date:	October 11, 2021	
Your Name:_	Xianglong Men	Ig
Manuscript 1	itle: Influence of HNF	4α and HNF4α-AS1 gene variants on the risk of anti-tuberculosis drugs-induced
hepatotoxici	<u>ty</u>	
Manuscript r	umber (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 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 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	

	Payment or honoraria for	X None	
lectures, presentations,		_ XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
;	Payment for expert	X None	
	testimony		
	,		
,	Support for attending	XNone	
	meetings and/or travel		
	<b>G</b> ,		
		V N	
3	Patents planned, issued or	XNone	
	pending		
	<b>D</b>	<u> </u>	
)	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
LO	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
_	group, paid or unpaid		
L1	Stock or stock options	XNone	
2	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
2	Other financial or non-	V None	
13	financial interests	XNone	
	imanciai interests		
	aco cummariza the above o	andlist of interest in the	following how
	ase summarize the above o	onflict of interest in the	following box:
Ple		onflict of interest in the	following box:
Ple	ase summarize the above o	onflict of interest in the	following box:
Ple		onflict of interest in the	following box:
Ple		onflict of interest in the	following box:
Ple		onflict of interest in the	following box:
Ple		conflict of interest in the	following box:
Ple		onflict of interest in the	following box:
Ple		conflict of interest in the	following box:
Ple			
Ple	None		
Ple	None ase place an "X" next to the	e following statement to	o indicate your agreement:
Ple N	None ase place an "X" next to the	e following statement to	

Date:	October 11, 2021
Your Name:_	Fei Deng
Manuscript T	itle: <u>Influence of HNF4α and HNF4α-AS1 gene variants on the risk of anti-tuberculosis drugs-induced</u>
hepatotoxicit	<u>ty</u>
Manuscript n	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 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 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)
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	planning of the work
		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	

	Payment or honoraria for	X None	
lectures, presentations,		_ XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
;	Payment for expert	X None	
	testimony		
	,		
,	Support for attending	XNone	
	meetings and/or travel		
	<b>G</b> ,		
		V N	
3	Patents planned, issued or	XNone	
	pending		
	<b>D</b>	<u> </u>	
)	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
LO	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
_	group, paid or unpaid		
L1	Stock or stock options	XNone	
2	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
2	Other financial or non-	V None	
13	financial interests	XNone	
	imanciai interests		
	aco cummariza the above o	andlist of interest in the	following how
	ase summarize the above o	onflict of interest in the	following box:
Ple		onflict of interest in the	following box:
Ple	ase summarize the above o	onflict of interest in the	following box:
Ple		onflict of interest in the	following box:
Ple		onflict of interest in the	following box:
Ple		onflict of interest in the	following box:
Ple		conflict of interest in the	following box:
Ple		onflict of interest in the	following box:
Ple		conflict of interest in the	following box:
Ple			
Ple	None		
Ple	None ase place an "X" next to the	e following statement to	o indicate your agreement:
Ple N	None ase place an "X" next to the	e following statement to	