## ICMJE DISCLOSURE FORM

Date: February 3, 2023
Your Name: Hui Yang

Manuscript Title: Schisandrin B inhibits tumor progression of hepatocellular carcinoma by targeting the RhoA/ROCK1

pathway

Manuscript number (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current 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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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	-
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	xNone	
		Time frame: past 36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).	xNone	
3	Royalties or licenses	_xNone	
4	Consulting fees	_xNone	
5	Payment or honoraria for	xNone	

	lectures, presentations, speakers bureaus, manuscript writing or educational events		
6	Payment for expert	xNone	
	testimony		
7	Cuppert for attending	y None	
/	Support for attending meetings and/or travel	_xNone	
8	Patents planned, issued or	_xNone	
	pending		
0	Double institute on a Data	w Naga	
9	Participation on a Data Safety Monitoring Board or	xNone	
	Advisory Board		
10	Leadership or fiduciary role	xNone	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	x None	
	·		
12	Receipt of equipment,	x_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non- financial interests	Yang hui is from OBiO Technology	
		(Shanghai) Corp., Ltd	

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

Yang hui is from OBiO Technology (Shanghai) Corp., Ltd.		

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 this form.

## ICMJE DISCLOSURE FORM

Date: <u>February 3, 2023</u> Your Name: <u>Tengfei Wu</u>

Manuscript Title: Schisandrin B inhibits tumor progression of hepatocellular carcinoma by targeting the

RhoA/ROCK1 pathway

Manuscript number (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current 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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items,

the time frame for disclosure is the past 36 months.

		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).	_x_None		
3	Royalties or licenses	_xNone		
4	Consulting fees	_xNone		
5	Payment or honoraria for lectures, presentations,	xNone		

	speakers bureaus, manuscript writing or educational events				
6	Payment for expert testimony	xNone			
	testimony				
7	Support for attending meetings and/or travel	_xNone			
8	Patents planned, issued or pending	_xNone			
9	Participation on a Data Safety Monitoring Board or Advisory Board	xNone			
10	Leadership or fiduciary role in other board, society, committee or advocacy	xNone			
11	group, paid or unpaid Stock or stock options	x None			
11	Stock of Stock options				
12	Receipt of equipment,	x_None			
	materials, drugs, medical writing, gifts or other services				
13	Other financial or	xNone			
	non-financial interests				
Ple	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 this form.