

ICMJE DISCLOSURE FORM

Date: 01/08/2023
 Your Name: Yanxin Liu
 Manuscript Title: Utilizing network pharmacology and experimental validation to explore the potential molecular mechanisms of raw Pinellia ternate in treating esophageal cancer
 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 current manuscript only.

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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) |
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| 3 | Royalties or licenses | <u> X </u> None | |
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| 4 | Consulting fees | <u> X </u> None | |
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| 8 | Patents planned, issued or pending | <input checked="" type="checkbox"/> X <input type="checkbox"/> None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | <input checked="" type="checkbox"/> X <input type="checkbox"/> None | |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | <input checked="" type="checkbox"/> X <input type="checkbox"/> None | |
| 11 | Stock or stock options | <input checked="" type="checkbox"/> X <input type="checkbox"/> None | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | <input checked="" type="checkbox"/> X <input type="checkbox"/> None | |
| 13 | Other financial or non-financial interests | <input checked="" type="checkbox"/> X <input type="checkbox"/> None | |

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

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| None |
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Date: 01/08/2023
 Your Name: Yunfei Bai
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ICMJE DISCLOSURE FORM

Date: 01/08/2023
 Your Name: Jinbang Zhang
 Manuscript Title: Utilizing network pharmacology and experimental validation to explore the potential molecular mechanisms of raw Pinellia ternate in treating esophageal cancer
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Date: 01/08/2023

Your Name: Reginaldo de Carvalho Silva-Filho

Manuscript Title: Utilizing network pharmacology and experimental validation to explore the potential molecular mechanisms of raw Pinellia ternate in treating esophageal cancer

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ICMJE DISCLOSURE FORM

Date: 01/08/2023

Your Name: Qingchun Zhu

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Date: 01/08/2023
 Your Name: Zhen Lei
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