ICMJE DISCLOSURE FORM

Date: October 28, 2022 Your Name: Tao Huang

Manuscript Title: The roles and mechanisms of the IncRNA-miRNA axis in the progression of esophageal cancer: a

narrative review

Manuscript number (if known): JTD-22-1449

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.	_X_None	
		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	X_None	
4	Consulting fees	X_None	

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

ICMJE DISCLOSURE FORM

Date: October 28, 2022 Your Name: Zhihao Wu

Manuscript Title: The roles and mechanisms of the IncRNA-miRNA axis in the progression of esophageal cancer: a

narrative review

Manuscript number (if known): JTD-22-1449

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		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.	National Natural Science Foundation of China	No. 81872371
		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	_X_None	
4	Consulting fees	X_None	

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le	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X_None	
	testimony		
7	Support for attending meetings and/or travel	X_None	
	0 ,		
8	Patents planned, issued or pending	XNone	
9	Participation on a Data	X_None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society, committee or advocacy		
11	group, paid or unpaid	V. N	
11	Stock or stock options	X_None	
12	Descint of any investor	V. Nana	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	X_None	
	financial interests		

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

The author receives funding from National Natural Science Foundation of China (grant No. 81872371).

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: October 28, 2022 Your Name: Shaojin Zhu

Manuscript Title: The roles and mechanisms of the IncRNA-miRNA axis in the progression of esophageal cancer: a

narrative review

Manuscript number (if known): JTD-22-1449

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		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 th	e work
1	All support for the present manuscript (e.g., funding,	Nature and Science Fund of Key Cultivate Program from Wannan Medical College	No. WK2018ZF06
	provision of study materials, medical writing, article processing charges, etc.)	the Talent Scientific Research Start-Up Foundation of Yijishan Hospital, Wannan Medical College	No. YR201806
	No time limit for this item.	Science Fund for Key Program of Three Creative Research of Yijishan Hospital of Wannan Medical College	No. Z1810
		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	X_None	
4	Consulting fees	X_None	
5	Payment or honoraria for	X_None	

6	lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	
7	Support for attending meetings and/or travel	X_None
8	Patents planned, issued or pending	X_None
9	Participation on a Data Safety Monitoring Board or Advisory Board	_X_None
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	_X_None
11	Stock or stock options	X_None
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None
13	Other financial or non- financial interests	X_None

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

Shaojin Zhu reports funding support from the Nature and Science Fund of Key Cultivate Program from Wannan Medical College, China (grant No. WK2018ZF06), the Talent Scientific Research Start-Up Foundation of Yijishan Hospital, Wannan Medical College (grant No. YR201806), the Science Fund for Key Program of Three Creative Research of Yijishan Hospital of Wannan Medical College (grant No. Z1810).

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