Date:2023-03-27	
Your Name: Yu-Hon Wang Manuscript Title: Yiqi Yangjing recipe stimulates apoptosis while suppressing the energy metabolism	via unde
expression of PFKFB3 in A549 cells	
Manuscript number (if known):	
In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit th	t are ird

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

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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 initi	al 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.	<u>X</u> None	
		Time frame: pa	st 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).		
3	Royalties or licenses	None	
1	Consulting fees	None	

5	Payment or honoraria for	× None	
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	Payment for expert	X_None	
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	Support for attending meetings and/or travel	<u>X</u> _None	
3	Patents planned, issued or	× None	
	pending		
	Participation on a Data Safety Monitoring Board or Advisory Board	<u>X_None</u>	
10	Leadership or fiduciary role in other board, society, committee or advocacy	None	
11	group, paid or unpaid Stock or stock options	None	The second secon
"	Stock of Stock options		
2	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	
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🔀 I certify that I have answered every question and have not altered the wording of any of the questions on this

form.

Date:2023-03-	27		
Your Name:	Ding - Ting	Way	
Manuscript Title:	Yiqi Yangjin	g recipe stimula	ates apoptosis while suppressing the energy metabolism via under
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3	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	None	
	educational events		
6	Payment for expert testimony	x_None	
7	Support for attending meetings and/or travel	X_None	
8	Patents planned, issued or pending	X_None	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	<u>X</u> 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	
	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<u>X</u> None	
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	speakers bureaus,				
	manuscript writing or				
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7	Support for attending	X None			
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	committee or advocacy			45.54	
	group, paid or unpaid	X None	Car Carried Carlo		
11	Stock or stock options	None			
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X	pression of PFKFB3 in A549 c	cells	
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7	Support for attending meetings and/or travel	None	
3	Patents planned, issued or pending	None	
)	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	
P	lease summarize the above	conflict of interest in th	ne following box:
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Date:2023-03-27
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Your Name: Yi - Wen Yang any Manuscript Title: Yiqi Yangjing recipe stimulates apoptosis while suppressing the energy metabolism via under-
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3	Royalties or licenses		
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eadership or fiduciary role n other board, society, ommittee or advocacy	None	
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Receipt of equipment, naterials, drugs, medical vriting, gifts or other	<u>X_None</u>	
Other financial or non- inancial interests	X_None	
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🔀 I certify that I have answered every question and have not altered the wording of any of the questions on this

form.

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Date:2023-03-27
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 related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third related to the content of the manuscript. Disclosure represents a commitment 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
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.

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.

Specifications/Comments Name all entities with (e.g., if payments were made to you or to your whom you have this institution) relationship or indicate none (add rows as needed) Time frame: Since the initial planning of the work X_None 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: past 36 months <u>Y</u>None Grants or contracts from 2 any entity (if not indicated in item #1 above). Y_None Royalties or licenses None Consulting fees

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Date	e:2023-03-27		
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me In	edication, even if that medic	pport for the work report	sed in this manuscript without time limit. For all other items,
		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)
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	All support for the present	×None	
	manuscript (e.g., funding,		
	provision of study materials,		
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	processing charges, etc.)		
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	Grants or contracts from	×None	
	any entity (if not indicated		
	in item #1 above).	≻None	
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	Payment or honoraria for	None	
	lectures, presentations, speakers bureaus, manuscript writing or		
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6	Payment for expert	None	
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7	Support for attending meetings and/or travel	A None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
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11	Stock or stock options	None	
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ex	expression of PFKFB3 in A549 cells					
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	Grants or contracts from any entity (if not indicated in item #1 above).	None				
	Royalties or licenses	None				

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Consulting fees

1	Payment or honoraria for lectures, presentations,	None	
-	speakers bureaus, manuscript writing or educational events		
	Payment for expert testimony	None	
	Support for attending meetings and/or travel	None	
	Patents planned, issued or pending	None	
1	Participation on a Data Safety Monitoring Board or Advisory Board	None	
10 l	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None	
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13 (Other financial or non- financial interests	None	

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Consulting fees

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