Dat	te: <u>May. 25<sup>th</sup>, 2021</u>		
	ır Name: <u>Chenli Zhang</u>		
	-		se patients with advanced gastrointestinal stromal
	nor: 37.5mg schedule outpe		n adherence and prognosis
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rela par to t rela	ated to the content of your ties whose interests may be cransparency and does not a ationship/activity/interest,	manuscript. "Related" me e affected by the content on necessarily indicate a bias it is preferable that you do	Il relationships/activities/interests listed below that are cans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment. If you are in doubt about whether to list a o so.  ips/activities/interests as they relate to the current
	nuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>
to t me In i	the epidemiology of hypertodication, even if that medic	ension, you should declare ation is not mentioned in pport for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.  ed in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this relationship or indicate none (add rows as	(e.g., if payments were made to you or to your institution)
		needed) Time frame: Since the initia	I planning of the work
		Time trame. Since the mitta	in planning of the work
	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: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	X None	
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Consulting fees

X\_\_None

г	Downant or here were fer	V None	
5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non- financial interests	XNone	
	financiai interests		
Ple	ease summarize the above co	onflict of interest in the fo	llowing box:
	None.		

Da	te: <u>May. 25<sup>th</sup>, 2021</u>		
Υo	ur Name: <u>Chen Zhang</u>		
Ma	nuscript Title: <u>Seco</u>	nd-line sunitinib for Chine	se patients with advanced gastrointestinal stromal
tuı	nor: 37.5mg schedule outpe	erformed 50mg schedule in	n adherence and prognosis
	nuscript number (if known)		
rel pa to	ated to the content of your rties whose interests may be	manuscript. "Related" me e affected by the content on necessarily indicate a bias.	Il relationships/activities/interests listed below that are cans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment . If you are in doubt about whether to list a o so.
	e following questions apply inuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>
to	•	ension, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.
	item #1 below, report all su e time frame for disclosure i	•	ed in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
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		Time frame: Since the initia	al planning of the work
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	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
			+
		Time former	t 26 months
		Time frame: pas	t 36 months
	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
	Royalties or licenses	XNone	

Consulting fees

X\_\_None

г	Downant or here were fer	V None	
5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non- financial interests	XNone	
	financiai interests		
Ple	ease summarize the above co	onflict of interest in the fo	llowing box:
	None.		

Da	te: <u>May. 25<sup>th</sup>, 2021</u>		
Υo	ur Name: <u>Tianyu Zhan</u> g	g	
Ma	nuscript Title: <u>Seco</u>	nd-line sunitinib for Chine	ese patients with advanced gastrointestinal stromal
tuı	nor: 37.5mg schedule outpe	erformed 50mg schedule in	n adherence and prognosis
	anuscript number (if known)		
rel pa to rel	ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest,	manuscript. "Related" me e affected by the content on necessarily indicate a bias it is preferable that you do	Il relationships/activities/interests listed below that are cans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment . If you are in doubt about whether to list a o so.  ips/activities/interests as they relate to the current
to me In	the epidemiology of hypertoedication, even if that medic	ension, you should declare ation is not mentioned in pport for the work reporte	e defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.  End in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initia	al planning of the work
	All support for the present	V None	
	manuscript (e.g., funding,	XNone	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: pas	t 36 months
	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
	Royalties or licenses	X None	
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Consulting fees

X\_\_None

г	Downant or here were fer	V None	
5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non- financial interests	XNone	
	financiai interests		
Ple	ease summarize the above co	onflict of interest in the fo	llowing box:
	None.		

Dat	e: May. 25 <sup>th</sup> , 2021		
	ır Name: Hua Liu		
Ма	nuscript Title: Seco	nd-line sunitinib for Chine	ese patients with advanced gastrointestinal stromal
			n adherence and prognosis
	nuscript number (if known)		
	•		<del>-</del>
In t	he interest of transparency	, we ask you to disclose a	Il relationships/activities/interests listed below that are
rela	ated to the content of your	manuscript. "Related" me	eans any relation with for-profit or not-for-profit third
par	ties whose interests may b	e affected by the content	of the manuscript. Disclosure represents a commitment
to t	ransparency and does not	necessarily indicate a bias	. If you are in doubt about whether to list a
rela	ationship/activity/interest,	it is preferable that you d	o so.
The to to me	nuscript only. e author's relationships/act the epidemiology of hypert dication, even if that medic	ivities/interests should be ension, you should declare cation is not mentioned in pport for the work reports the past 36 months.  Name all entities with	ed in this manuscript without time limit. For all other items,  Specifications/Comments
		whom you have this relationship or indicate	(e.g., if payments were made to you or to your institution)
		none (add rows as needed)	
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L	All support for the present	XNone	
	manuscript (e.g., funding, provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: pas	t 26 months
)	Grants or contracts from	X None	1.50 months
-	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	X None	

Consulting fees

X\_\_None

г	Downant or here were fer	V None	
5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non- financial interests	XNone	
	financiai interests		
Ple	ease summarize the above co	onflict of interest in the fo	llowing box:
	None.		

Da	te: <u>May. 25<sup>th</sup>, 2021</u>		
Yo	ur Name: <u>Jie Zhong</u>		
Ma	nuscript Title: <u>Seco</u>	nd-line sunitinib for Chine	se patients with advanced gastrointestinal stromal
<u>tuı</u>	mor: 37.5mg schedule outpe	erformed 50mg schedule in	n adherence and prognosis
Ma	nuscript number (if known)	):	
rel pa to rel	ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply	manuscript. "Related" me e affected by the content on necessarily indicate a bias it is preferable that you do	Il relationships/activities/interests listed below that are cans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment . If you are in doubt about whether to list a o so.  ips/activities/interests as they relate to the current
Th to me	the epidemiology of hyperto edication, even if that medic	ension, you should declare cation is not mentioned in pport for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.  ed in this manuscript without time limit. For all other items
		Name all entities with	Specifications/Comments
		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)
		Time frame: Since the initia	al planning of the work
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L	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: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
}	Royalties or licenses	XNone	

Consulting fees

X\_\_None

г	Downant or here were fer	V None	
5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non- financial interests	XNone	
	financiai interests		
Ple	ease summarize the above co	onflict of interest in the fo	llowing box:
	None.		

	e: <u>May. 25<sup>th</sup>, 2021</u>			
	ır Name: <u>Zhengting W</u>			
			se patients with advanced gastrointestinal stromal	
	nor: 37.5mg schedule outpe		adherence and prognosis	
Ma	nuscript number (if known)	):		
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		Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)	
		needed) Time frame: Since the initial	planning of the work	
		rime 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	XNone		
	in item #1 above).			
3	Royalties or licenses	X None		
	, artico or mocnoco			
1	Consulting fees	XNone		

г	Downant or here were fer	V None	
5	Payment or honoraria for lectures, presentations,	XNone	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non- financial interests	XNone	
	financiai interests		
Ple	ease summarize the above co	onflict of interest in the fo	llowing box:
	None.		

Da	te: <u>May. 25<sup>th</sup>, 2021</u>		
Υo	ur Name: Liying Wang		
Ma	nuscript Title: Seco	nd-line sunitinib for Chine	se patients with advanced gastrointestinal stromal
tuı	nor: 37.5mg schedule outpe	erformed 50mg schedule in	n adherence and prognosis
	nuscript number (if known)		
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	e following questions apply inuscript only.	to the author's relationsh	ips/activities/interests as they relate to the <u>current</u>
to me	the epidemiology of hyperto edication, even if that medic	ension, you should declare ation is not mentioned in pport for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.  ed in this manuscript without time limit. For all other items
		Name all entities with	Specifications/Comments
		whom you have this relationship or indicate none (add rows as needed)	(e.g., if payments were made to you or to your institution)
		Time frame: Since the initia	I planning of the work
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	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: pas	t 36 months
	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
	Royalties or licenses	XNone	

Consulting fees

X\_\_None

г	Downant or here were fer	V None				
5	Payment or honoraria for lectures, presentations,	XNone				
	speakers bureaus,					
	manuscript writing or					
	educational events					
6	Payment for expert	XNone				
	testimony					
7	Support for attending	XNone				
	meetings and/or travel					
8	Patents planned, issued or	XNone				
	pending					
9	Participation on a Data	XNone				
	Safety Monitoring Board or					
	Advisory Board					
10	Leadership or fiduciary role	XNone				
	in other board, society,					
	committee or advocacy					
	group, paid or unpaid					
11	Stock or stock options	XNone				
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	X_None				
	services					
13	Other financial or non- financial interests	XNone				
	financiai interests					
Please summarize the above conflict of interest in the following box:						
	None.					
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Da	te: <u>May. 25<sup>th</sup>, 2021</u>		
Yo	ur Name: <u>Liwen Hong</u>		
Ma	nuscript Title: <u>Seco</u>	nd-line sunitinib for Chine	se patients with advanced gastrointestinal stromal
<u>tur</u>	nor: 37.5mg schedule outpe	erformed 50mg schedule in	n adherence and prognosis
Ma	nuscript number (if known)	:	
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to me	the epidemiology of hypertodication, even if that medic	ension, you should declare ation is not mentioned in pport for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.  ed in this manuscript without time limit. For all other items,
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		needed) Time frame: Since the initia	ol planning of the work
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	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: pas	t 36 months
-	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
}	Royalties or licenses	XNone	

Consulting fees

X\_\_None

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