Date: 2022.5.24 Your Name: <u>Huixiong Lin</u> Manuscript Title: <u>A meta-analysis of the efficacy and safety of apatinib in patients with recurrent or metastatic</u> <u>nasopharyngeal carcinoma</u> Manuscript number (if known):

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| 4 | | | |
| 1 | All support for the present | None | |
| | manuscript (e.g., funding, | | |
| | provision of study materials, | | |
| | medical writing, article | | |
| | processing charges, etc.) No time limit for this item. | | |
| | No time limit for this item. | | |
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| | | Time frame: past | 36 months |
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| | any entity (if not indicated | | |
| | in item #1 above). | | |
| 3 | Royalties or licenses | None | |
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| | | | |
| 4 | Consulting fees | None | |
| | | | |
| | | | |

| 5 | Payment or honoraria for | None | |
|----|-------------------------------------------------|------|--|
| - | lectures, presentations, | | |
| | speakers bureaus, | | |
| | manuscript writing or | | |
| | educational events | | |
| 6 | Payment for expert | None | |
| | testimony | | |
| | | | |
| 7 | Support for attending meetings and/or travel | 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 | |
| | in other board, society, | | |
| | committee or advocacy | | |
| 11 | group, paid or unpaid | Nere | |
| 11 | Stock or stock options | None | |
| | | | |
| 12 | Receipt of equipment, | None | |
| 12 | materials, drugs, medical | | |
| | writing, gifts or other | | |
| | services | | |
| 13 | Other financial or non- | None | |
| | financial interests | | |
| | | | |
| | | | |

The author has no conflicts of interest to declare.

Please place an "X" next to the following statement to indicate your agreement:

<u>Date: 2022.5.24</u> Your Name: <u>Xianggian Weng</u> Manuscript Title: <u>A meta-analysis of the efficacy and safety of apatinib in patients with recurrent or metastatic</u> <u>nasopharyngeal carcinoma</u> Manuscript number (if known):

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| 3 | Royalties or licenses | None | |
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| 4 | Consulting fees | None | |
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| 5 | Payment or honoraria for | None | |
|----|-------------------------------------------------|------|--|
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| 6 | Payment for expert | None | |
| | testimony | | |
| | | | |
| 7 | Support for attending meetings and/or travel | 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 | |
| | in other board, society, | | |
| | committee or advocacy | | |
| 11 | group, paid or unpaid | Nere | |
| 11 | Stock or stock options | None | |
| | | | |
| 12 | Receipt of equipment, | None | |
| 12 | materials, drugs, medical | | |
| | writing, gifts or other | | |
| | services | | |
| 13 | Other financial or non- | None | |
| | financial interests | | |
| | | | |
| | | | |

The author has no conflicts of interest to declare.

Please place an "X" next to the following statement to indicate your agreement:

Date: 2022.5.24 Your Name: Jixiang Wu Manuscript Title: <u>A meta-analysis of the efficacy and safety of apatinib in patients with recurrent or metastatic</u> <u>nasopharyngeal carcinoma</u> 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.

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| 6 | Payment for expert | None | |
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| | | | |
| 7 | Support for attending meetings and/or travel | None | |
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| | | | |
| 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 | |
| | in other board, society, | | |
| | committee or advocacy | | |
| 11 | group, paid or unpaid | Nere | |
| 11 | Stock or stock options | None | |
| | | | |
| 12 | Receipt of equipment, | None | |
| 12 | materials, drugs, medical | | |
| | writing, gifts or other | | |
| | services | | |
| 13 | Other financial or non- | None | |
| | financial interests | | |
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The author has no conflicts of interest to declare.

Please place an "X" next to the following statement to indicate your agreement:

Date: 2022.5.24 Your Name: Lizhong Wu Manuscript Title: A meta-analysis of the efficacy and safety of apatinib in patients with recurrent or metastatic nasopharyngeal carcinoma 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.

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| | | | |
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| | in item #1 above). | | |
| 3 | Royalties or licenses | None | |
| | | | |
| | | | |
| 4 | Consulting fees | None | |
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| 5 | Payment or honoraria for | None | |
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| | writing, gifts or other | | |
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| 13 | Other financial or non- | None | |
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