Date	e:2023/1/1	1	
You	r Name:Cong	Tian	
spor		meta-analysis of a "rand	ΓNF-α inhibitors, and JAK inhibitors in patients with ankyloside lomized, double-blind, placebo-controlled" trials
relat part to tr	ted to the content of your n ies whose interests may be	nanuscript. "Related" me affected by the content o ecessarily indicate a bias.	I relationships/activities/interests listed below that are ans 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.
	following questions apply touscript only.	o the author's relationsh	ips/activities/interests as they relate to the current
to th	ne epidemiology of hypertentication, even if that medica	nsion, you should declare tion is not mentioned in	•
	em #1 below, report all sup time frame for disclosure is	•	d in this manuscript without time limit. For all other items,
		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	ial 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: pa	st 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

4

Consulting fees

X__None

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	X None	
	testimony		
	•		
7	Support for attending	X None	
	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,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		

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:

<u>X</u> I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	2023/1/11	
Your Name:	Jianlong Shu _	
Manuscript Title:	_ Efficacy and safety	of IL inhibitors, TNF- α inhibitors, and JAK inhibitors in patients with ankylosing
spondylitis: a Bayes	ian network meta-ar	alysis of a "randomized, double-blind, placebo-controlled" trials
Manuscript number	r (if known):	

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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)
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.	Time frame: Since the initial XNone	planning of the work
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5 Payment or honoraria fo	rXNone			
lectures, presentations,				
speakers bureaus, manuscript writing or				
educational events				
6 Payment for expert	X None			
testimony				
7 Support for attending meetings and/or travel	XNone			
8 Patents planned, issued	or X_None			
pending				
9 Participation on a Data	X None			
Safety Monitoring Board				
Advisory Board				
10 Leadership or fiduciary re	oleXNone			
in other board, society,				
committee or advocacy group, paid or unpaid				
11 Stock or stock options	XNone			
10 0 11 6				
12 Receipt of equipment,	XNone			
materials, drugs, medica writing, gifts or other	·			
services				
13 Other financial or non-	XNone			
financial interests				
Please summarize the above conflict of interest in the following box:				

None	

X I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	2023/1/11	
Your Name:	Wenhui Shao _	
Manuscript Title:	_ Efficacy and safety o	f IL inhibitors, TNF- $lpha$ inhibitors, and JAK inhibitors in patients with ankylosing
spondylitis: a Bayes	ian network meta-ana	llysis of a "randomized, double-blind, placebo-controlled" trials
Manuscript number	(if known):	

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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 the work
1	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.		
	The time limit for this term.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

			1	
5	Payment or honoraria for	XNone		
	lectures, presentations,			
	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,	XNone		
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	XNone		
	financial interests			
Plea	Please summarize the above conflict of interest in the following box:			

None

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Date:	2023/1/11	
Your Name:	Zhengxin Zhou	
Manuscript Title:	_ Efficacy and safety of	IL inhibitors, TNF- α inhibitors, and JAK inhibitors in patients with ankylosing
• •		ysis of a "randomized, double-blind, placebo-controlled" trials
	,	

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	_	Time frame: Since the initial	planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
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	medical writing, article processing charges, etc.)		
	No time limit for this item.		
	The time limit for this term.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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

None			

 \underline{X} I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date:	2023/1/11		
Your Name:	Huayang Gud	0	
Manuscript Title:	_ Efficacy and safet	y of IL inhibitors, TNF- $lpha$ inhibitors, and JAK inhibitors in patients w	ith ankylosing
spondylitis: a Bayes	ian network meta-	analysis of a "randomized, double-blind, placebo-controlled" trials	
Manuscript number	· (if known):		

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			plaining of the work
1	All support for the present	XNone	
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	provision of study materials,		
	medical writing, article		
	processing charges, etc.) No time limit for this item.		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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

None

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Date:	2023/1/11
Your Name:	Jingang Wang
Manuscript Title:	
spondylitis: a Bayesi	an network meta-analysis of a "randomized, double-blind, placebo-controlled" trials
Manuscript number	(if known):

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	manuscript (e.g., funding,		
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3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
	-		
7	Support for attending meetings and/or travel	XNone	
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,		
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11	Stock or stock options	XNone	
	_		
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
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13	financial interests	XNone	
	iniancial interests		

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