

## ICMJE DISCLOSURE FORM

Date: 2024-06-09

Your Name: Keyang Zhou

Manuscript Title: Association between glymphatic dysfunction and neurocognitive decline in patients with frontal lobe epilepsy

Manuscript number (if known): QIMS-24-375

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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## ICMJE DISCLOSURE FORM

Date: 2024-06-09

Your Name: Song Peng

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Date: 2024-06-09

Your Name: Guang Yao

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## ICMJE DISCLOSURE FORM

Date: 2024-06-09

Your Name: Yu Luo

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## ICMJE DISCLOSURE FORM

Date: 2024-06-09

Your Name: Quanji Li

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## ICMJE DISCLOSURE FORM

Date: 2024-06-09

Your Name: Yunchen Huang

Manuscript Title: Association between glymphatic dysfunction and neurocognitive decline in patients with frontal lobe epilepsy

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Date: 2024-06-09

Your Name: Qingxia Zhang

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Date: 2024-06-09

Your Name: Zhi Song

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Date: 2024-06-09

Your Name: Wei Wang

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Your Name: Ding Liu

Manuscript Title: Association between glymphatic dysfunction and neurocognitive decline in patients with frontal lobe epilepsy

Manuscript number (if known): QIMS-24-375

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Date: 2024-06-09

Your Name: Yin Liu

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