

ICMJE DISCLOSURE FORM

Date: 4/16/2024

Your Name: Dominik Bettinger

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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.

The author's relationships/activities/interests should be defined broadly. 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.

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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

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

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: ANTY Rodolphe

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Aiwei Feng

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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Date: 4/16/2024

Your Name: Apichat Kaewdech

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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Date: April 2024

Your Name: Arndt Vogel

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Time 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.	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table> <p style="font-size: small; color: gray; text-align: right;">Click the tab key to add additional rows.</p>						
Time frame: past 36 months								
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						
3	Royalties or licenses	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						

		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)
4	Consulting fees	<input type="checkbox"/> None	
		AstraZeneca, Amgen, BeiGene, Böhringer Mannheim, BMS, BTG, Daichi-Sankyo, Eisai, Incyte, Ipsen, MSD, PierreFabre, Roche, Servier, Sirtex, Tahio, Terumo	Payment to myself
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		AstraZeneca, Amgen, BeiGene, Böhringer Mannheim, BMS, BTG, Daichi-Sankyo, Eisai, GSK, Imaging Equipment Ltd (AAA), Incyte, Ipsen, Jiangsu Hengrui Medicines; MSD, PierreFabre, Roche, Servier, Sirtex, Tahio, Terumo	Payment to myself
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		Roche, MSD, Astellas	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
		AstraZeneca, Amgen, BeiGene, Böhringer Mannheim, BMS, BTG, Daichi-Sankyo, Eisai, Incyte, Ipsen, MSD, PierreFabre, Roche, Servier, Sirtex, Tahio, Terumo	
10	Leadership or fiduciary role in other board, society, committee or	<input checked="" type="checkbox"/> None	

		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)
	advocacy group, paid or unpaid		
11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

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

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Bincheng Ren

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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.

The author's relationships/activities/interests should be defined broadly. 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.

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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Bohan Luo

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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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4	Consulting fees	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Chang Liu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/16/2024

Your Name: Jin Wook Chung

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> 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.

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Chunhui Nie

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Chunqing Zhang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Daiming Fan

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Dandan Han

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Dongdong Xia

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Enxin Wang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Feng Zhang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Gengfei Cao

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Guangchuan Wang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Guoliang Shao

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Guowen Yin

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Haibin Shi

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Hailiang Li

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Jing Li

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Hui Yu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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Date: 4/18/2024

Your Name: Hui Zeng

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Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Hui Zhang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Hui Zhao

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Jean-Pierre Bronowicki

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Jian Chen

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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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.

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Jian Xu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Jianbing Wu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Jiaping Li

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Jie Yuan

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

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

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Jie Zheng

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Jielai Xia

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Guohong Han

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Jinlong Song

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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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.

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Jun Sun

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Kaichun Wu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/19/2024

Your Name: Kim Seung up

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Lei Li

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Lin Zheng

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Linying Xia

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Long Feng

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Ming Huang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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

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

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Nan You

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Peng Zhang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: _____

Your Name: Pimsiri Sripongpun

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Qiuhe Wang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/16/2024

Your Name: Roman Kloeckner

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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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4	Consulting fees	<input type="checkbox"/> None	
		Boston Scientific	
		Bristol Myers Squibb	
		Guerbet	
		Roche	
		Sirtex	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		Astra Zeneca	
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		Eisai	
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		Sirtex	
MSD Sharp & Dohme			
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
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ICMJE DISCLOSURE FORM

Date: 4/16/2024

Your Name: Roman Kloeckner

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Rong Ding

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Shuai Zhang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Shuaiwei Liu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

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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.

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Shufa Yang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Tao Xu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Tao Yin

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Wei Bai

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Weidong Gong

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Weixin Ren

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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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Date: 4/18/2024

Your Name: Weizhong Zhou

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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Date: 4/18/2024

Your Name: Wen Zhang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Wenbo Shao

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Wengang Guo

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Wenhao Hu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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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.

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Wenjin Jiang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Wenzhe Fan

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Wukui Huang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/15/2024

Your Name: ADHOUTE XAVIER

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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2	Grants or contracts from any entity (if not indicated in item #1 above).	<input type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;">SERVIER</td><td></td></tr> <tr><td>IPSEN</td><td></td></tr> <tr><td></td><td></td></tr> </table>	SERVIER		IPSEN			
SERVIER								
IPSEN								
3	Royalties or licenses	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						

		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)
4	Consulting fees	<input type="checkbox"/> None	
		BAYER	Me
		IPSEN	Institution (Hôpital Saint-Joseph Marseille)
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input type="checkbox"/> None	
		GILEAD	Me
		Servier	Me
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		Roche	
		Gilead	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	

		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)						
11	Stock or stock options	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>							
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>							
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>							

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

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

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Xiangchun Ding

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Xiaoli Zhu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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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Time frame: past 36 months									
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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Xiaomei Li

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Xu Zhu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Xueda Li

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Yanbo Zheng

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Ying Fu

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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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Date: 4/18/2024

Your Name: Yong Lv

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Yong Zeng

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Yongjin Zhang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Zhanxin Yin

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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Date: 4/18/2024

Your Name: Zhengyu Lin

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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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.

ICMJE DISCLOSURE FORM

Date: 4/18/2024

Your Name: Zhengyu Wang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Zhexuan Wang

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Zixiang Li

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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: 4/18/2024

Your Name: Yan Zhao

Manuscript Title: Tumor burden incorporating AFP improves survival prediction for patients with HCC undergoing TACE: An international multicenter observational study

Manuscript Number (if known): JHEPR-D-23-01289

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
6	Payment for expert testimony	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									

		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)						
11	Stock or stock options	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> <tr><td style="height: 20px;"></td><td></td></tr> </table>							

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

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