ICMJE Form for Disclosure of Potential Conflicts of Interest

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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Section 1. Identifying Information

1. Given Name (First Name)  Lunan
2. Surname (Last Name)  Li
3. Date  21-January-2021
4. Are you the corresponding author?  Yes  No  ✔  

Corresponding Author's Name  Wensheng Pan

5. Manuscript Title
Risk of esophageal adenocarcinoma in patients with Barrett's esophagus using proton pump inhibitors: A systematic review with meta-analysis and Trial Sequential Analysis

6. Manuscript Identifying Number (if you know it)
TCR-20-3362

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Dr. Li has nothing to disclose.

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### Section 1. Identifying Information

1. Given Name (First Name)  
   Zhongsheng

2. Surname (Last Name)  
   Cao

3. Date  
   21-January-2021

4. Are you the corresponding author?  
   □ Yes  ✔ No

   Corresponding Author's Name  
   Wensheng Pan

5. Manuscript Title  
   Risk of esophageal adenocarcinoma in patients with Barrett's esophagus using proton pump inhibitors: A systematic review with meta-analysis and Trial Sequential Analysis

6. Manuscript Identifying Number (if you know it)  
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### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
   □ Yes  ✔ No

### Section 3. Relevant financial activities outside the submitted work.

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Dr. Cao has nothing to disclose.

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Zhang
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1. Given Name (First Name) Chenjing
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4. Are you the corresponding author? ☑ No
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