Disclosure of Conflict of Interest　Columns marked with * are required.

1. If your study for this presentation is supported by research funds, please indicated if the fund is a public fund （e.g. government funded）, contract with, donation, others from a company and/or a profit-making organization related to medicine, or others, and specify the funder's name （if your study is sponsored by a study group receiving funds, please specify the name of the funder）.
2. Have you or a person related to you, such as your family members who share a livelihood with you, been an employee of a company and/or a profit-making organization related to medicine these three years, or have you or a person related to you, such as your family members who share a livelihood with you, been an employee of a company and/or a profit-making organization related to your presentation these past five years? If yes, please specify the name of the company and/or organization and your status （Except affiliated organization reported in the abstract）. If not, please answer "No".
3. Have you or a person related to you, such as your family members who share a livelihood with you, earned more than 1 million yen per year such as advisory fees from a company and/or a profit-making organization related to medicine these past three years （January 1, 2021 to December 31, 2023）?* If yes, please specify the name of the company and/or organization, status （Except affiliated organization reported in the abstract）. If not, please answer "No".
4. Do you and/or a person related to you, such as your family members who share a livelihood with you, hold 5% or more of the stock of a company and/or a profit-making organization related to medicine, or have received its profits （e.g. stock dividend） over 1 million yen per year these past three years （January 1, 2021 to December 31, 2023）? If yes, please specify the name of the company and/or organization for each person （Except affiliated organization reported in the abstract）. Not necessary to specify the name of the stockholder, amount of stock or amount of profit. If not, please answer "No".
5. Have you and/or a person related to you, such as your family members who share a livelihood with you, earned more than 1 million yen per year as a patent fee from a company and/or a profit-making organization related to medicine these past three years （January 1, 2021 to December 31, 2023）? If yes, please specify the name of the company and/or profit-making organization for each person（Except affiliated organization reported in the abstract）. If not, please answer "No".
6. Have you earned more than 500,000 yen per year as a lecture fee from a company and/or a profit-making organization related to medicine these past three years （January 1, 2021 to December 31, 2023）? If yes, please specify the name of the company and/or profit-making organization （Except affiliated organization reported in the abstract）. If not, please answer "No".
7. Have you earned more than 500,000 yen per year as a manuscript fee from a company and/or a profit-making organization related to medicine these past three

years （January 1, 2021 to December 31, 2023）? If yes, please specify the name of the company and/or profit-making organization （Except affiliated organization reported in the abstract）. If not, please answer “No”.

8. Have you received more than 1 million yen per year as research expenses from a company and/or a profit-making organization related to medicine these past three years （January 1, 2021 to December 31, 2023）? If yes, please specify the name of the company and/or an organization （Except affiliated organization reported in the abstract. It does not matter whether the research expenses are for this presentation or not. Expenses for basic research are also subject to disclosure.）If not, please answer “No”.
9. Have you received more than 1 million yen per year as a certain contribution from a company and/or a profit-making organization related to medicine these past three years （January 1, 2021 to December 31, 2023）? If yes, please specify the name of the company and/or an organization （Except your reported affiliated organization）. If not, please answer “No”.
10. Have you been involved in a certain endowed chair funded by a company and/or a profit-making organization related to medicine these past three years （January 1, 2021 to December 31, 2023）? If the total amount from a company and/or a profit-making organization related to medicine exceeds 1 million yen per year, please specify the name of the company and/or an organization （Except your reported affiliated organization）. If not, please answer “No”.
11. Have you earned more than 1 million yen per year as a fee for expert comment, judgment or testimony in legal proceedings, etc. from a company and/or a profit-making organization related to medicine these past three years （January 1, 2021 to December 31, 2023）? * If yes, please specify the name of the company and/or an organization （Except your reported affiliated organization）. If not, please answer “No”.
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13. Are you a representative of an organization for clinical study which receives research expenses（donation, contract, others, and expenses for basic research are also subject to disclosure） from a company and/or a profit-making organization related to medicine? If yes, please specify the name of the company and/or organization. If not, please answer “No”.