Table 75: Tests 12 & 18. Index tests (Transient Elastography or MRI) versus liver function tests or ultrasound abnormalities† to detect CFLD

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Number of studies (Reference)	Study desig n	N	Risk of bias	Inconsiste ncy	Indirectn ess	Imprecisi on	Sensitivit y % (95% CI)	Specificit y % (95% CI)	Positive likelihoo d ratio (95% CI)	Negative Likeliho od ratio (95% CI)	AUROC	Quality
Test 12. Transient elastography to detect F2-F4 ^a in a population of adults												
1 (Lemaitre 2016)	Cohort	2 3	serious risk of bias ^b	no serious inconsisten cy	no serious indirectne ss	very serious imprecisio n ^c	75 (95% CI: 24.2- 98.6)*	84.2 (95% CI: 73.5- 89.2)*	4.75 (95% CI: 0.91- 9.12)*	0.30 (95% CI: 0.02- 1.03)*	Not reported	VERY LOW
Test 18. MRI to detect at least 1 abnormal sign ^d in a population of adults												
1 (Lemaitre 2016)	Cohort study	2 3	serious risk of bias ^b	no serious inconsisten cy	no serious indirectne ss	very serious imprecisio n ^c	36.4 (95% CI: 14.7- 51.1)*	83.3 (95% CI: 63.5- 96.8)*	2.18 (95% CI: 0.40- 16.06)*	0.76 (95% CI: 0.50- 1.34)*	Not reported	MODER ATE

Abbreviations: AUROC: area under the ROC curve; CFLD: cystic fibrosis liver disease; CI: confidence interval; MRI: magnetic resonance † Details not reported

^{*} Calculated by the NGA technical team from data available in the study report

a. Results were expressed in kilopascal (kPa) using the Metavir scoring system based on previous study of transient elastography in chronic biliary disease (Corpechot 2006): Metavir F0-F1 score corresponded to LSM of ≥7.2 kPa, and F2, F3, and F4 corresponded to ≥7.3 kPa, 9.8 kPa, and 17.3 kPa, respectively

b. It is unclear how the reference standard was conducted and interpreted; it is also unclear whether index and reference tests were conducted at the same time

c. 95% confidence interval for sensitivity was very wide (width ≥30 percentage points)

d. The following items were studied for each patient using a standardized scale: atrophy of either right or left hepatic lobe and/or hypertrophy of the caudate lobe, marked lobulations of liver surface, first-segment hypertrophy, splenomegaly (long axis superior to 12 cm), portal vein dilatation (diameter superior to 12 mm), splenic vein dilatation, intrahepatic or extrahepatic biliary duct irregularity (segmental strictures and dilatations), ascites, and steatosis.