

Table 80: Tests 1 to 3. Index tests (APRI, Forn's score, Transient elastography) versus published definition of oesophageal varices †

Number of studies (Reference)	Study design	N	Risk of bias	Inconsistency	Indirectness	Imprecision	Sensitivity % (95% CI)	Specificity % (95% CI)	Positive likelihood ratio (95% CI)	Negative Likelihood ratio (95% CI)	AUROC	Quality
Test 1. APRI using a cut off of ≥ 0.49 in a population of adults												
1(Kitson 2013)	Case control study	23	no serious risk of bias	no serious inconsistency	no serious indirectness	no serious imprecision	100 (95% CI: 60.0-100)*	94.1(95% CI: 80.0-94.1)*	17.0 (95% CI: 3.0-17.0)*	0 (95% CI: 0-0.50)*	0.99 (95% CI: 0.96-1.00)	LOW
Test 1. Subgroup analysis: APRI using a cut off of ≥ 0.49 in a population of adults with CFLD												
1(Kitson 2013)	Case control study	13	no serious risk of bias	no serious inconsistency	no serious indirectness	serious imprecision ^a	100 (95% CI: 62.9-100)*	93.3(95% CI: 63.7-93.3)*	15.0 (95% CI: 1.73-15.0)*	0 (95% CI: 0-0.58)*	1.00 (95% CI: 1.00-1.00)	VERY LOW
Test 2. Forn's score using a cut off of ≥ 0.68 in a population of adults												
1(Kitson 2013)	Case control study	23	no serious risk of bias	no serious inconsistency	no serious indirectness	no serious imprecision	100 (95% CI: 58.9-100)*	88.2 (95% CI: 73.7-88.2)*	8.5 (95% CI: 2.2-8.5)*	0 (95% CI: 0-0.56)*	0.98 (95% CI: 0.93-1.00)	LOW
Test 2. Subgroup analysis: Forn's score using a cut off of ≥ 0.68 in a population of adults with CFLD												
1(Kitson 2013)	Case control study	13	no serious risk of bias	no serious inconsistency	no serious indirectness	very serious imprecision	100 (95% CI: 62.9-100)*	85.7 (95% CI: 73.7-85.7)*	7.0 (95% CI: 1.37-7.0)*	0 (95% CI: 0-0.69)*	0.98 (95% CI: 0.93-1.00)	VERY LOW

Number of studies (Reference)	Study design	N	Risk of bias	Inconsistency	Indirectness	Imprecision	Sensitivity % (95% CI)	Specificity % (95% CI)	Positive likelihood ratio (95% CI)	Negative Likelihood ratio (95% CI)	AUROC	Quality
			risk of bias		indirectness	imprecision ^a		53.9-85.7)*			0.91-1.00)	
Test 3. Transient elastography using a cut off of ≥ 8.9 kPa in a population of adults												
1 (Kitson 2013)	Case control study	23	no serious risk of bias	no serious inconsistency	no serious indirectness	no serious imprecision ^a	100 (95% CI: 57.8-100)*	76.5 (95% CI: 61.6-76.5)*	4.25 (95% CI: 1.51-4.25)*	0 (95% CI: 0-0.69)*	0.91 (95% CI: 0.78-1.00)	LOW

Abbreviations: APRI Aspartate aminotransferase to Platelets-Ratio-Index; AUROC: area under the ROC curve; CFLD: cystic fibrosis liver disease; CI: confidence interval; kPa: kilopascal

†Diagnosis of CFLD (Sokol 1999, Colombo 2002) if at least 2 of the following conditions present on at least 2 consecutive examinations spanning a 1-year period: (1) Ultrasound confirmed hepatomegaly; (2) elevated serum liver enzyme levels of ALT, AST, AP, or GGT; (3) ultrasound abnormalities other than hepatomegaly (i.e., increased, heterogeneous echogenicity, nodularity, irregular margins, splenomegaly). Liver cirrhosis: distinct ultrasonographic signs (i.e. coarse nodularity, presence of portal hypertension and rarefaction of peripheral portal veins) and clinical signs (e.g. oesophageal varices, splenomegaly). Portal hypertension: platelet count <140x10⁹/L, splenomegaly, presence of porto-systemic collateral veins, portal diameter >13mm, or ascites. Patients with evidence of portal hypertension underwent upper gastrointestinal endoscopy for variceal screening.

- a. 95% confidence interval for sensitivity was wide (width 20-30 percentage points)
- b. 95% confidence interval for sensitivity was very wide (width ≥30 percentage points)