Comparative 10-Years Prognosis of Fibrotest (FT) and Liver Stiffness Measurement (LSM) by Transient Elastog-raphy (TE, Fibroscan) in 9364 Chronic Liver Diseases (CLD) Patients (Pts)

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FT and LSM were validated for fibrosis and cirrhosis staging: F4.1-no complications, F4.2-varices, F4.3-decompensated. (JHepatol2014) Aim.To assess comparatively FT and LSM 10-years survivals, overall (OS) and without liver-related deaths (SLD), according to the severity of fibrosis/cirrhosis in a prospective CLD cohort. Methods. Cut-offs for F4.1/F4.2/F4.3 were: for FT 0.74/0.85/0.95 and LSM(kPa) 12.5/20/50. Death(D) and liver transplantation(LT) rates were collected from the national and hospital registries. Statistics used the time to event Cox proportional-hazard. Results. N=9364pts with FT were included between 2003-2010: 60%males, age48.9yrs; F0F168%, F2F317% and F415%; etiologies: alcohol 6%, virus B 24%, C 45%, non-alcoholic fatty liver 10%, other15%; mean(max) follow-up 51 (121 )months. N=2724pts had applicable LSM. The OS %(95%CI)/%D as per FT decreased significantly with fibrosis stage increase (all p<0.05 vs adjacent): F093.3(92-94)/3.3; F1 86.1(83-89)/7.2; F2 84.1 (81-88)/9.8; F3 75(70-79)/13.3; F4.1 65.3(59-71)/19.7, F4.2 48(42-
OS as per LSM were similar for early stages (F0 94.7%; F1 95.8%; F2 96.2%, all p=NS), and decreased after F3 (F3 91.9%; F4.1 86.0%; F4.2 69.3%; F4.3 67.4%, all p<0.05). SLD, (%(95%CI)/%LD/%LT, as per FT decreased with fibrosis increase (all p<0.05 vs adjacent, excepted F1 vs F2): F0 96.7(95-98)/0.20/1.15; F1 95.7(93-98)/0.94/2.05; F2 96.0(94-98)/1.29/2.73; F3 91.6(88-94)/2.86/4.67; F4.1 66.6(47-87)/6.9/10.0; F4.2 65.7(59-73)/14.3/21.6 and F4.3 42.9(35-51)/30.9/40.1. SLD as per LSM (N=2724) differed only for F4.2 vs F4.3 (p<0.001) and was similar for others: F0 95.6(92-98)/0.16/1.32; F1 98.8(97-100)/0.0/0.88; F2 95.4(92-98)/0.22/2.88; F3 62.6(12-100)/0.49/4.39; F4.1 87.9(80-96)/1.36/7.48; F4.2 69.9(54-86)/5.99/13.7; F4.3 59.3(34-84)/16.3/27.9; all p=NS. Compared directly to LSM, FT had different prognosis between all F4 stages including F4.1 vs F4.2 (all p<0.001). Conclusion. FT and LSM had a significant 10-years prognosis for the OS in all F4 stages. Compared to LSM, FT demonstrated superiority in prognostication in earlier stages for OS and in cirrhosis for SLD.

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