

Supplemental Table S2. Diagnostic Performance of DFS and Conventional Fibrosis Scores to Identify \geq F3 Fibrosis in Participants with CAP \geq 288 dB/m^a

Score	AUROC (95% CI)	Cut-off	Sensitivity, %	Specificity, %	PPV, %	NPV, %
Training set ($n=354$, \geq F3 fibrosis=95 [26.8%])						
DFS	0.83 (0.78–0.88)	0.1	90.5	51.0	28.4	96.2
		0.2	78.9	73.7	39.2	94.2
		0.3	56.8	94.2	67.8	91.0
APRI	0.74 (0.69–0.80)	1	5.3	99.6	74.0	83.0
FIB-4	0.64 (0.57–0.71)	1.30	42.1	73.7	25.6	85.5
		3.25	4.2	100	100	82.9
NFS	0.64 (0.58–0.70)	-1.455	73.7	43.2	21.8	88.4
		0.676	12.6	94.2	31.8	83.4
Testing set ($n=154$, \geq F3 fibrosis=40 [26.0%])						
DFS	0.79 (0.71–0.86)	0.1	90.0	50.0	27.9	95.9
		0.2	67.5	70.2	32.8	90.9
		0.3	52.5	93.3	62.8	90.1
APRI	0.72 (0.63–0.81)	1	5.0	99.1	54.4	82.9
FIB-4	0.60 (0.59–0.70)	1.30	42.5	78.1	29.4	86.3
		3.25	2.5	99.1	37.4	82.5
NFS	0.63 (0.57–0.68)	-1.455	60.0	37.7	17.2	81.4
		0.676	7.5	93.9	20.9	82.5

DFS, diabetes fibrosis score; CAP, controlled attenuation parameter; AUROC, area under the receiver operating characteristic curve; CI, confidence interval; PPV, positive predictive value; NPV, negative predictive value; APRI, aspartate aminotransferase-to-platelet ratio index; FIB-4, fibrosis-4; NFS, non-alcoholic fatty liver disease (NAFLD) fibrosis score.

^a \geq F3 fibrosis was defined as liver stiffness \geq 9.6 and \geq 9.3 kPa with M and XL probe, respectively.