	F0/1 (N=100)	F2 (N=15)	F3 (N=7)	F4 (N=8)	Р
APRI*	0.3 (0.2–0.4)	0.6 (0.4–1.1)	0.8 (0.5–0.9)	1.5 (1.1–2.7)	$< 0.001^{+}$
FIB-4*	1.3 (0.9–1.7)	2.1 (1.3–3.8)	2.3 (1.1–3.6)	4.0 (3.2–7.4)	$< 0.001^{\dagger}$
	F0/1 (N=117)	F2 (N=19)	F3 (N=7)	F4 (N=9)	Р
ELF	8.7 (8.1–9.2)	9.6 (9.0–9.9)	9.9 (9.2–10.8)	11.9 (10.5–12.6)	$< 0.001^{+}$
None/mild (< 7.7) (N, %)	2 (1.7)	0 (0.0)	0 (0.0)	0 (0.0)	$< 0.001^{\ddagger}$
Moderate (7.7–9.8) (N, %)	106 (90.6)	13 (68.4)	3 (42.9)	2 (22.2)	
Severe (\geq 9.8) (N, %)	9 (7.7)	6 (31.6)	4 (57.1)	7 (77.8)	
M2BPGi (COI)	0.4 (0.3–0.6)	0.8 (0.5–1.3)	0.6 (0.4–1.7)	1.5 (0.8–5.6)	$< 0.001^{+}$
- (<1.0) (N, %)	114 (97.4)	12 (63.2)	5 (71.4)	3 (33.3)	$< 0.001^{\ddagger}$
1+ (1.0–3.0) (N, %)	3 (2.6)	5 (26.3)	2 (28.6)	3 (33.3)	
2+ (≥3.0) (N, %)	0 (0.0)	2 (10.5)	0 (0.0)	3 (33.3)	

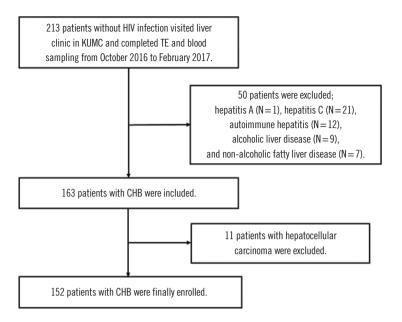
Supplemental Data Table 1. APRI, FIB-4, ELF, and M2BPGi according to the fibrosis grade based on TE

Data are presented as median (interquartile range).

*APRI and FIB-4 scores were obtained from 130 CHB patients at enrollment; [†]Kruskal–Wallis test; [‡]Chi-squared test.

Abbreviations: APRI, AST-to-platelet ratio index; FIB-4, fibrosis-4; ELF, enhanced liver fibrosis; M2BPGi, Mac-2 binding protein glycosylation isomer; TE, transient elastography; COI, cut-off index.

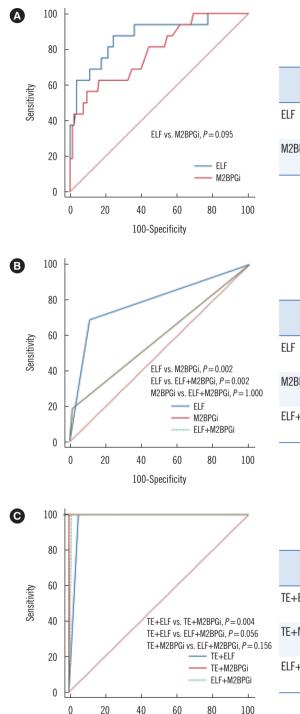




Supplemental Data Fig. 1. Flow chart of patient enrollment.

Abbreviations: HIV, human immunodeficiency virus; KUMC, Konkuk University Medical Center; TE, transient elastography; CHB, chronic hepatitis B.





	AUC (95% CI)	Optimal cut—off	Sensitivity (95% CI)	Specificity (95% CI)	PLR (95% CI)	NLR (95% CI)
LF	0.87 (0.81–0.92)	>9.36	87.5 (61.7–98.4)	75.7 (67.6–82.7)	3.6 (2.5–5.2)	0.2 (0.0–0.6)
2BPGi	0.79 (0.72–0.85)	>0.85 COI	56.3 (29.9–80.2)	90.4 (84.2–94.8)	5.9 (3.0–11.5)	0.5 (0.3–0.8)

	Cut-off	AUC (95% CI)	Sensitivity (95% CI)	Specificity (95% CI)	PLR (95% CI)	NLR (95% CI)
ELF	≥9.8	0.79 (0.71–0.85)	68.8 (41.3–88.9)	88.9 (82.4–93.7)	6.2 (3.5–11.1)	0.4 (0.2–0.7)
M2BPGi	≥3.0 COI	0.59 (0.50–0.67)	18.8 (4.0–45.6)	98.5 (94.8–99.8)	12.8 (2.3–70.7)	0.8 (0.6–1.0)
ELF+M2BPGi	\geq 9.8/ \geq 3.0 COI	0.59 (0.50–0.67)	18.8 (4.0–45.6)	98.5 (94.8–99.8)	12.8 (2.3–70.7)	0.8 (0.6–1.0)

		AUC (95% CI)	Sensitivity (95% CI)	Specificity (95% CI)	PLR (95% CI)	NLR (95% CI)
	TE+ELF	0.97 (0.93–0.99)	100.0 (29.2–100.0)	94.6 (89.7–97.7)	18.6 (9.4–36.5)	0.0 (N/A)
).156	TE+M2BPGi	1.00 (0.97–1.00)	100.0 (29.2–100.0)	100.0 (97.6–100.0)	N/A	0.0 (N/A)
	ELF+M2BPGi	0.99 (0.96–1.00)	100.0 (29.2–100.0)	98.7 (95.2–99.8)	74.5 (18.8–295.1)	0.0 (N/A)

Supplemental Data Fig. 2. ROC curve analysis of ELF, M2BPGi, and combined TE, ELF, and M2BPGi to predict advanced LF. (A) ROC curve analysis of ELF and M2BPGi to predict advanced LF ($F \ge 3$ by TE). (B) ROC curve analysis of ELF and M2BPGi above the respective cut-off values with high NLR to predict advanced LF ($F \ge 3$ by TE). (C) ROC curve analysis of by combined TE, ELF, and M2BPGi above the respective cut-off values with high NLR to predict advanced LF. Advanced LF based on TE+ELF+M2BPGi was defined as $F \ge 3$ by TE, ELF ≥ 9.8 , and M2BPGi ≥ 3.0 COI. The concordance rate of TE, ELF, and M2BPGi was 80.9% (N=123).

Abbreviations: ROC, receiver operating characteristic; ELF, enhanced liver fibrosis; M2BPGi, Mac-2 binding protein glycosylation isomer; TE, transient elastography; LF, liver fibrosis; NLR, negative likelihood ratio; COI, cut-off index; AUC, area under the curve; CI, confidence interval, PLR; positive likelihood ratio; N/A, not available.

100-Specificity