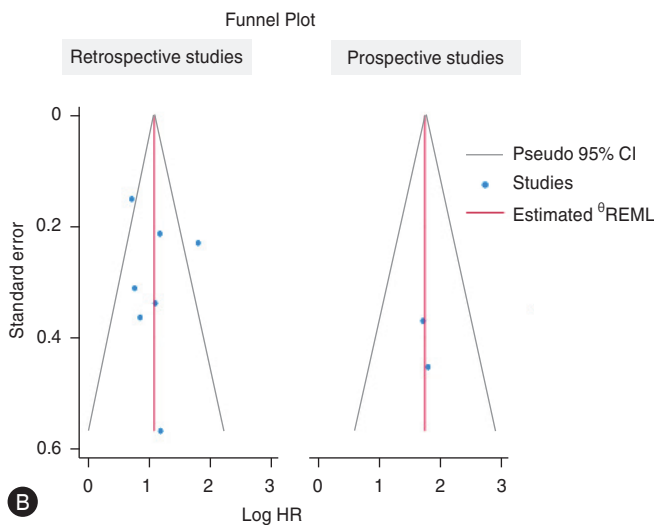


Random-effects REML model

A



B

Supplementary Figure 2. Meta-analysis of the risk of HCC development according to the study design. A meta-analysis was performed on seven retrospective cohort studies and two prospective cohort studies that had data on the occurrence of HCC, respectively (A). HRs for HCC development in CHB patients with a VCTE-determined LSM of ≥ 11 kPa were 2.98 (95% CI, 2.15–4.15) and 5.70 (95% CI, 3.25–10.01), respectively (A). Publication bias does not appear to exist in the Funnel plot (B). HCC, hepatocellular carcinoma; CHB, chronic hepatitis B; LSM, liver stiffness measurement; HR, hazard ratio; CI, confidence interval; kPa, kilopascal; VCTE, vibration-controlled transient elastography; REML, restricted maximum likelihood.