

Formulas used to calculate the non-invasive markers

$$\text{FIB-4} = \text{age (yr)} \times \text{GOT [U/L]} / (\text{platelets [10}^9 \text{/L]} \times (\text{GPT}^{1/2} \text{ [U/L]}) \quad [1]$$

eLIFT (Easy Liver Fibrosis Test): Age (<40 0p, ≥40 3p),
 Gender (F 0p, M 1p),
 GOT (<35 0p, 35-69 2p, ≥70 4p),
 GGT (<35 0p, 35-89 1p, ≥90 2p),
 platelets (≥250000 0p, 170000-249000 1p, ≤170000 4p),
 PT (≥97 0p, 84-96 2p, ≤84 4p) [2]

$$\text{APRI: GOT to Platelet Ratio (APRI)} = \frac{\text{GOT level [IU/L]} / \text{GOT upper limit of normal [IU/L]}}{\text{platelet count (10}^9 \text{/L)}} \times 100 \quad [3]$$

$$\begin{aligned} \text{NAFLD Fibrosis Score (NFS)} = & (-1.675 + 0.037 \times \text{age (yr)} + 0.094 \times \text{BMI (kg/m}^2) + \\ & 1.13 \times \text{IFG/diabetes (yes = 1, no = 0)} + \\ & 0.99 \times \text{GOT/ GPT ratio} - \\ & 0.013 \times \text{platelet count (x10}^9 \text{/L)} - \\ & 0.66 \times \text{albumin [g/dl]} \end{aligned} \quad [4]$$

$$\text{BARD score (BMI} \geq 28 = 1\text{p; GOT/GPT ratio} \geq 0.8 = 2\text{p; diabetes mellitus} = 1\text{p)} \quad [4]$$

References

1. Wai C-T, Greenon JK, Fontana RJ, et al. A simple noninvasive index can predict both significant fibrosis and cirrhosis in patients with chronic hepatitis C. *Hepatology* 2003;38:518-526.
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3. Sterling RK, Lissen E, Clumeck N, et al., APRICOT Clinical Investigators. Development of a simple noninvasive index to predict significant fibrosis in patients with HIV/HCV coinfection. *Hepatology* 2006;43:1317-1325.
4. European Association for Study of Liver; Asociacion Latinoamericana para el Estudio del Hgado. EASL-ALEH Clinical Practice Guidelines: Non-invasive tests for evaluation of liver disease severity and prognosis. *J Hepatol* 2015;63:237-264.