Study	logRR	SE(logRR)	Risk Ratio	RR	95%-CI	Weight (common)	Weight (random)
Nakai 2022	1.8450	0.5379		6.33	[2.21; 18.16]	0.0%	9.7%
Rinaldi 2019	1.1119	0.4710		3.04	[1.21; 7.65]	0.0%	10.6%
Wang 2016	1.8464	0.5699		6.34	[2.07; 19.36]	0.0%	9.3%
Liu 2023	1.1743	0.4829		3.24	[1.26; 8.34]	0.0%	10.5%
Kuo 2021	1.0396	0.4712		2.83	[1.12; 7.12]	0.0%	10.6%
Ogasawara 2020	2.2659	0.9431		9.64	[1.52; 61.22]	0.0%	5.4%
Morisco 2021	1.9741	0.6742		7.20	[1.92; 26.99]	0.0%	8.0%
Ampuero 2022	0.0198	0.0100		1.02	[1.00; 1.04]	99.7%	15.7%
Kim 2024	2.5111	0.6072		12.32	[3.75; 40.50]	0.0%	8.8%
Common effect model				1.02	[1.00; 1.05]	100.0%	-
Random effects model				3.88	[2.28; 6.59]	-	100.0%

Heterogeneity: I^2=88%, τ^2=0.4671, P<0.01

0.1 0.5 1 2 10

A

Study	logRR	SE(logRR)	Risk Ratio	RR	95%-CI	Weight (common)	Weight (random)
Nakai 2022	1.8934	0.4931		6.64	[2.53; 17.46]	14.5%	14.8%
Pons 2020	1.1086	0.5526		3.03	[1.03; 8.95]	11.5%	13.5%
Liu 2023	0.4292	0.4248		1.54	[0.67; 3.53]	19.5%	16.5%
Ogasawara 2020	2.6319	0.6400		13.90	[3.96; 48.73]	8.6%	11.7%
Kuo 2022	1.0396	0.4712		2.83	[1.12; 7.12]	15.8%	15.3%
Ogawa 2020	0.4637	0.6809		1.59	[0.42; 6.04]	7.6%	10.9%
Kim 2024	2.0275	0.3948		7.59	[3.50; 16.47]	22.5%	17.3%
Common effect model				3.9	[2.72; 5.67]	100.0%	-
Random effects model				3.93	[2.17; 7.11]	-	100.0%

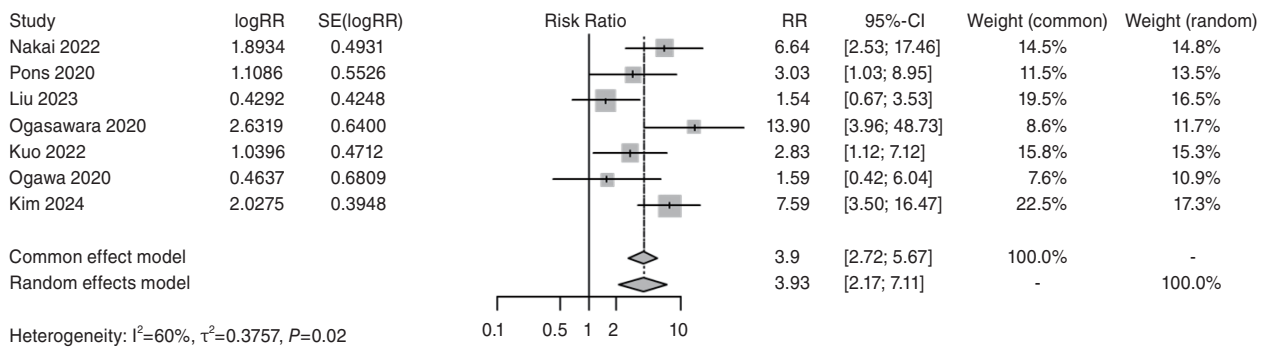Heterogeneity: I^2=60%, τ^2=0.3757, P=0.02

0.1 0.5 1 2 10

B

Supplementary Figure 3. Forest plots of studies included in the risk ratio analysis for the prediction of HCC using VCTE measured at (A) pre-treatment and (B) after SVR. HCC, hepatocellular carcinoma; VCTE, vibration-controlled transient elastography; SVR, sustained virological response.