

Similar performance of liver stiffness measurement and liver surface nodularity for the detection of portal hypertension in patients with hepatocellular carcinoma

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Table of contents

Supplementary methods.....	2
Table S1.....	3
Table S2.....	4
Table S3.....	5
Table S4.....	6
Fig. S1.....	7

Supplementary methods

Calibration of the two-step algorithm

The two-step algorithm is not a linear model *per se*. Indeed, the algorithm provides three possible outputs:

- no CSPH
- inconclusive
- CSPH

Therefore, no calibration plot can be provided.

Nevertheless, adopting a different approach, we performed a multiple linear regression using HVPNG as continuous dependent variable, and LSN and LSPS as variables in the model.

The resulting equation for 'predicting HVPNG' is:

$$\text{Predicted HVPNG} = 3.83 * \text{LSN} + 0.97 * \text{LSPS} - 3.94.$$

This model is well calibrated (goodness of fit $p=0.52$), as shown by the following plots.

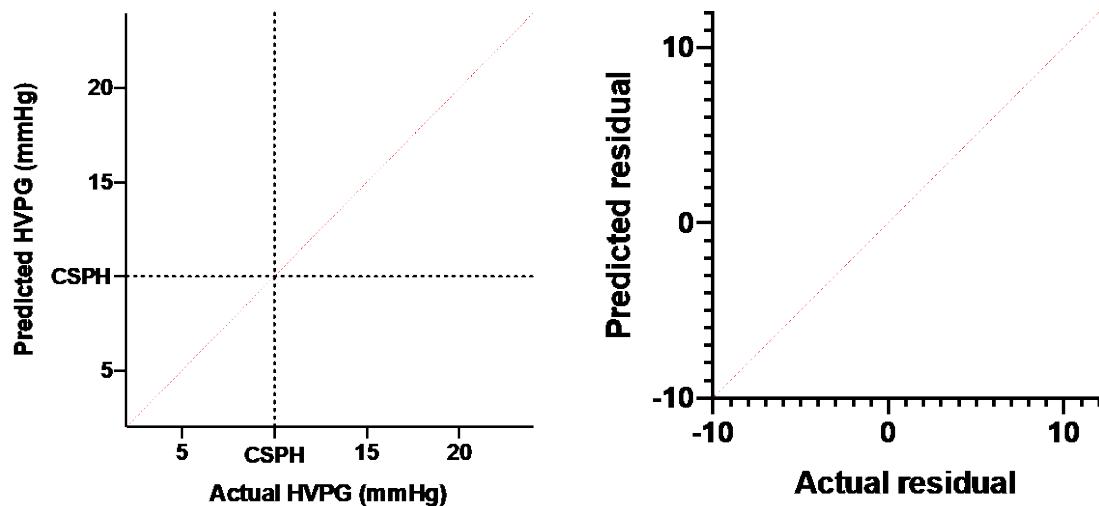


Table S1. Per-protocol study population (n=122)

	Total (n=122)	No CSPH (n=86)	CSPH (n=36)	P Value
Gender (%)				
<i>Male</i>	91 (75%)	61 (71%)	30 (83%)	.15
<i>Female</i>	31 (25%)	25 (29%)	6 (17%)	.15
Mean Age ± SD				
<i>Overall</i>	63 ± 10	63 ± 10	62 ± 9	.56
<i>Male</i>	61 ± 10	62 ± 10	61 ± 10	.84
<i>Female</i>	67 ± 7	67 ± 8	67 ± 4	.94
BMI (kg/m²)	27.3 ± 5.0	27.3 ± 5.3	27.3 ± 4.0	1.0
Child-Pugh score (%)				
<i>A</i>	117 (96)	84 (98)	34 (95)	0.58
<i>B</i>	5 (4)	2 (2)	2 (5)	
Duration between HPVG-LSM and CT (days)	15 ± 11	15 ± 12	14 ± 10	.66
HVPG (mm Hg)	8 ± 4	6 ± 2	14 ± 3	<.001
Hepatocellular carcinoma				
<i>Mean size ± SD (mm)</i>	50 ± 27	56 ± 28	37 ± 19	<0.001
<i>Right Liver</i>	92 (75)	65 (76)	27 (75)	0.52
<i>Left Liver</i>	20 (25)	31 (24)	9 (25)	
Laboratory				
<i>INR</i>	1.1 ± 0.1	1.1 ± 0.1	1.2 ± 0.1	<.001
<i>Serum creatinin (μmol/L)</i>	80 ± 18	81 ± 21	78 ± 13	.46
<i>Serum bilirubin (μmol/L)</i>	14 ± 6	14 ± 7	15 ± 5	.57
<i>Platelet count (G/L)</i>	193 ± 59	213 ± 60	146 ± 36	<.001
<i>Serum albumin (g/L)</i>	38 ± 6	39 ± 6	35 ± 7	<.001
<i>Serum AST (x ULN)</i>	1.9 ± 1.3	1.6 ± 0.8	1.7 ± 2.5	.74
<i>Serum ALT (x ULN)</i>	1.4 ± 0.9	1.3 ± 0.8	1.5 ± 0.9	.24
<i>γ-glutamyl transferase (x ULN)</i>	3.2 ± 2.6	3.0 ± 2.4	3.7 ± 2.0	.20
<i>Alkaline phosphate (x ULN)</i>	1.2 ± 0.7	1.1 ± 0.6	1.5 ± 1.0	.01
Non-invasive tests				
<i>Liver surface nodularity</i>	2.69 ± 0.4	2.5 ± 0.3	3.15 ± 0.4	<.001
<i>Largest spleen size (cm)</i>	11.5 ± 1.6	11.1 ± 1.4	12.6 ± 1.4	<.001
<i>Platelets/spleen size</i>	17.6 ± 6.6	19.9 ± 6.5	12.2 ± 4.0	<.001
<i>LSM kPa median (range)</i>	14.1 (3.2-75.0)	10.6 (3.2-75.0)	29.5 (8.8-75.0)	<.001
<i>LSPS</i>	1.80 ± 1.50	1.07 ± 0.78	3.52 ± 2.06	<.001

AST/ALT aspartate aminotransferase/alanin aminotransferase; CSPH: Clinically significant portal hypertension; BMI: Body mass index; HVPG: hepatic venous pressure gradient; LSM: Liver stiffness measurement; CT: computed tomography; INR: international normalized ratio : LSPS: Liver stiffness*spleen size/platelet count. Values are expressed as mean and standard deviation unless specified.

Table S2. Comparison of included (n=140) and excluded (n=147) patients. Excluded patients did not undergo transient elastography for Liver stiffness Measurement or CT examination within 30 days before or after the Hepatic Venous Pressure Gradient measurement.

	Included (n=140)	Excluded (n=147)	P Value
Gender (%)			
<i>Male</i>	109 (78)	109 (74)	.43
<i>Female</i>	31 (22)	38 (26)	
Mean Age ± SD			
<i>Overall</i>	63 ± 9	59 ± 11	.001
BMI (kg/m²)	28.9 ± 6.9	27.1 ± 7.2	.03
Child-Pugh score (%)			
<i>A</i>	133 (95)	141 (96)	.68
<i>B</i>	7 (5)	6 (4)	
Barcelona Clinic Liver Cancer stage			
<i>Stage 0</i>	26 (19)	35 (24)	.31
<i>Stage A</i>	114 (81)	112 (76)	
Cause of cirrhosis*			
<i>Hepatitis C virus infection</i>	50 (36)	68 (46)	.009
<i>Hepatitis B virus infection</i>	30 (21)	24 (16)	.28
<i>Alcohol</i>	47 (34)	56 (38)	.48
<i>Nonalcoholic fatty liver disease</i>	25 (18)	15 (10)	.05
HVPG (mmHg)	8 ± 4	9 ± 5	.06
Laboratory			
<i>Platelet count (G/L)</i>	193 ± 58	179 ± 68	.06
<i>Serum albumin (g/L)</i>	35 ± 7	34 ± 8	.26
<i>Serum AST (x ULN)</i>	1.8 ± 1.1	1.7 ± 1.5	.52
<i>Serum ALT (x ULN)</i>	1.6 ± 1.2	1.8 ± 1.6	.23
<i>γ-glutamyl transferase (x ULN)</i>	3.5 ± 2.9	3.4 ± 2.7	.76
<i>Alkaline phosphate (x ULN)</i>	1.2 ± 0.7	1.2 ± 0.4	1.0

AST/ALT aspartate aminotransferase/alanin aminotransferase; BMI: Body mass index; HVPG: hepatic venous pressure gradient; CT: computed tomography; ULN: upper limit of normal values. Values are expressed as mean and standard deviation unless specified.

* some patients had several causes of cirrhosis

Table S3. Analysis of the 92 patients who were not included in the previous study by Sartoris et al. [1]

LSN	< 2.5 (N=26)	≥ 2.5 and < 3.10 (N=48)	≥ 3.10 (N=20)
No CSPH (N=66)	26	34	7
CSPH (N=26)	0	12	13
Correctly classified	26 (100%)		13 (65%)

LSN: Liver surface nodularity; CSPH: Clinically significant portal hypertension.

Table S4. LSN, LSM, and LSPS values according to the size and location of hepatocellular carcinoma and to the presence of CSPH in the 122 patients with available LSN, LSM and LSPS

HCC location	LSN			LSM (kPa)			LSPS		
	Left Liver (N=30)	Right Liver (N=92)	P value	Left liver (N=30)	Right Liver (N=92)	P value	Left Liver (N=30)	Right Liver (N=92)	P value
Overall	2.68 ± 0.55	2.69 ± 0.52	0.91	10.6 (7.2-20.1)	14.4 (8.8-32.0)	0.06	1.38 ± 1.87	1.89 ± 2.10	0.24
<i>HCC < 10 cm</i>	2.68 ± 0.55 (n=30)	2.73 ± 0.55 (n=79)	0.58	10.6 (7.2-20.1) (n=30)	10.5 (6.8-15.9) (N=79)	0.36	1.38 ± 1.87 (n=30)	1.72 ± 2.12 (N=79)	0.46
		2.44 ± 0.21 (n=13)			72.0 (38.3-75.0) (N=13)			2.88 ± 1.77 (N=13)	
<i>HCC ≥ 10 cm</i>	-	-		-	-		-	-	-
<i>p-value < vs. ≥ 10cm</i>	-	0.061		-	<0.001	-	-	0.07	
CSPH (N=36)	3.26 ± 0.49 (N=9)	3.11 ± 0.51 (N=27)	0.45	27.0 (12.0-39.4) (N=9)	34.4 (19.1-52.3) (N=27)	0.32	3.04 ± 2.77 (N=9)	3.68 ± 2.66 (N=27)	0.53
		3.16 ± 0.52 (N=24)		27.0 (12.0-39.4) (N=9)	31.6 (18.3-47.0) (N=24)		3.04 ± 2.77 (N=9)	3.39 ± 2.48 (N=24)	
<i>HCC < 10 cm</i>	3.26 ± 0.49 (N=9)	3.16 ± 0.52 (N=24)	0.48	27.0 (12.0-39.4) (N=9)	31.6 (18.3-47.0) (N=24)	0.37	3.04 ± 2.77 (N=9)	3.39 ± 2.48 (N=24)	0.42
		2.69 ± 0.10 (N=3)			72.0 (20.5-75.0) (n=3)		-	-	
<i>HCC ≥ 10 cm</i>	-	-		-	-		-	(N=3)	-
<i>p-value < vs. ≥ 10cm</i>	-	0.10		-	0.24		-	0.85	
No CSPH (N=86)	2.43 ± 0.35 (N=21)	2.52 ± 0.42 (N=65)	0.38	8.0 (6.9-15.6) (N=21)	11.2 (6.9-19.9) (N=65)	0.07	0.68 ± 0.49 (N=21)	1.20 ± 1.28 (N=65)	0.07
		2.43 ± 0.35 (N=21)		8.0 (6.9-15.6) (N=21)	10.5 (6.8-15.9) (N=55)		0.68 ± 0.49 (N=21)	0.84 ± 0.82 (N=55)	
<i>HCC < 10 cm</i>	2.43 ± 0.35 (N=21)	2.55 ± 0.45 (N=55)	0.31	8.0 (6.9-15.6) (N=21)	10.5 (6.8-15.9) (N=55)	0.52	0.68 ± 0.49 (N=21)	0.84 ± 0.82 (N=55)	0.24
		2.36 ± 0.18 (N=10)			72.80 (46.0-75.0) (N=10)		-	2.72 ± 1.65 (N=10)	
<i>p-value < vs. ≥ 10cm</i>	-	0.22		-	<0.001	-	-	<0.001	

HCC: Hepatocellular carcinoma; LSM: Liver Stiffness Measurement; LSN: Liver surface nodularity; LSPS: Liver stiffness*spleen size/platelet count.
CSPH: Clinically significant portal hypertension.

Significant p values are bold

LSM is provided as median and IQR, LSN and LSPS are provided as means and standard deviations

Fig. S1. LSN, LSM and LSPS values according to the size and location of HCC, and to the presence of CSPH.

Each graph plots LSN (A), LSM (B) and LSPS (C) values (y-axis) according to the size of HCC (x-axis). HCC location is represented by different forms. Presence of CSPH is shown by large forms, and absence of CSPH by small ones. Graph A shows that LSN values are not affected by the size or location of HCC, whatever the CSPH status. Graph B and C show that among patients with HCC ≥ 10 cm located in the right liver ($n=13$), a subset have high LSM (> 55 kPa) and LSPS values (> 1.50) ($n=10$, circle). In this subgroup, 8/10 (80%) patients without CSPH are misclassified as having CSPH.

HCC: Hepatocellular carcinoma; LSM: Liver Stiffness Measurement; LSN: Liver surface nodularity; LSPS: Liver stiffness*spleen size/platelet count. CSPH: Clinically significant portal hypertension. Optimal cut-off values are shown by the horizontal dashed lines. Only the largest tumor per patient is considered here.

Fig. S1A

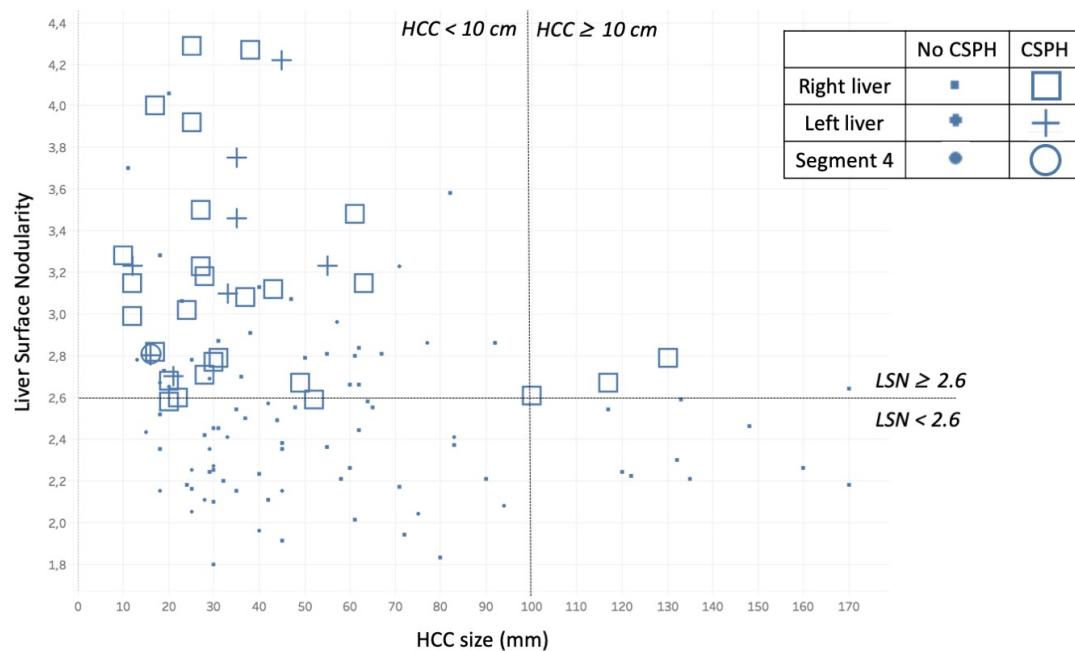


Fig. S1B

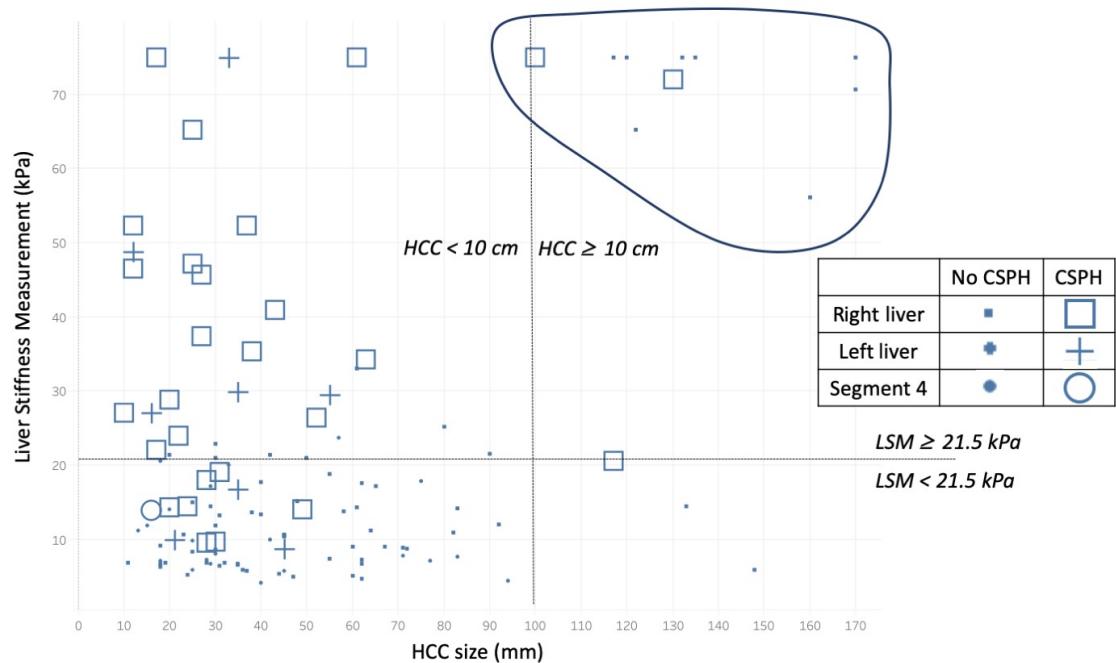
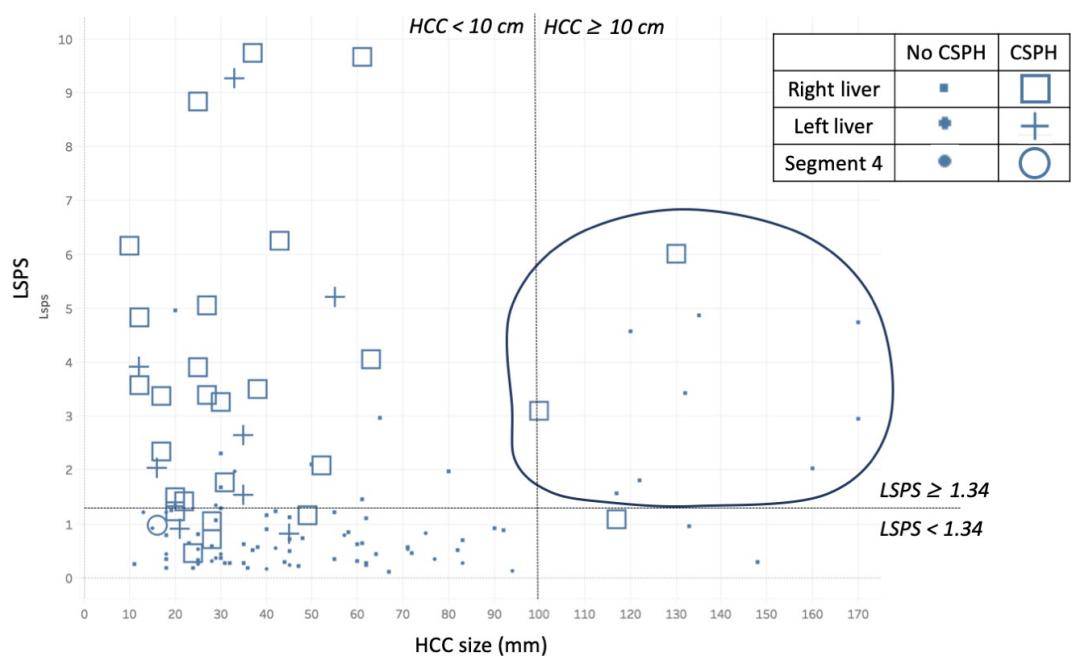


Fig. S1C



REFERENCE

1. Sartoris R, Rautou PE, Elkrief L, Pollorsi G, Durand F, Valla D, et al. Quantification of Liver Surface Nodularity at CT: Utility for Detection of Portal Hypertension. *Radiology* 2018;289:698–707. doi:10.1148/radiol.2018181131.