

Table 1. Serum Markers of Hepatic Fibrosis.

Serum Marker	Comment	Ref.
Forn's Score	A model with a complicated, nonproprietary formula using age, GGT, platelet count, and cholesterol to select patients at very low risk of significant fibrosis (F0, F1). A score below 4.2 had a negative predictive value of 96% in excluding patients with insignificant fibrosis (F0F1). Approximately 50% of patients could be classified without biopsy using this model. The model did not perform as well in selecting patients with significant fibrosis (F2, F3, F4).	14
HCV - FibroSURE™	This is a proprietary test that combines O ₂ macroglobulin, haptoglobin, total bilirubin, apolipoprotein A1, GGT, and ALT with a patient's age and gender in a patented algorithm to predict fibrosis and necroinflammatory activity. A score of < 0.2 was able to exclude patients with insignificant fibrosis (F0, F1) with a negative predictive value of 90% and a score of > 0.8 had a 90% positive predictive value of significant fibrosis (F2, F3, F4).	15
FIBROSpect II®	This proprietary test uses hyaluronic acid, TIMP-1, and O ₂ macroglobulin in a patented algorithm to calculate a score that predicts fibrosis. Using a cut off value of 42, the test is 71.8 % and 55.1% sensitive at detecting F2, F3, F4 fibrosis and F0, F1 fibrosis respectively.	16
HepaScore®	This proprietary test uses O ₂ macroglobulin, hyaluronic acid, GGT, and total bilirubin along with age and sex in a patented formula. In an internal validation by Quest Diagnostics a score > 55 is 88% sensitive and 69% specific for the presence of hepatic fibrosis (F2, F3, F4).	17
APRI	In the original paper, an APRI score of < 0.5 had an 86% negative predictive value of excluding significant fibrosis. In a refinement and prospective validation of the APRI at another center it was shown that in 60% of patients studied, an APRI value < 0.42 had a 93% negative predictive value in excluding F2, F3, F4 fibrosis and an APRI of > 1.2 had a 93% positive predictive value of including this diagnosis. Patients who fall in the indeterminate zone between 0.42 and 1.2 cannot be accurately classified and require a live biopsy to stage fibrosis.	18, 19
Fib-4	A relatively simple, nonproprietary calculation: (age [year] x AST [U/L]) / (platelets [109/L] x ALT [U/L]) that has been proposed as an accurate marker of fibrosis in HIV HCV co-infected patients.	20