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Prognostic and clinicopathological value of fibrinogen-to-albumin ratio (FAR) in non-small cell lung cancer: a meta-analysis

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ADMINISTRATIVE INFORMATION

Support - None.

Review Stage at time of this submission - Completed but not published.

Conflicts of interest - None declared.

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Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 4 April 2025 and was last updated on 4 April 2025.

INTRODUCTION

Review question / Objective Fibrinogen-toalbumin ratio (FAR) is previously explored for its significance in forecasting non-small cell lung cancer (NSCLC) prognosis, but findings remain conflicting. Therefore, the present work focused on identifying FAR's precise effect on predicting NSCLC prognosis via meta-analysis.

Condition being studied This work thoroughly retrieved PubMed, Web of Science, Embase, Cochrane Library, and CNKI until April 2, 2025, and determined combined hazard ratios (HRs) and 95% confidence intervals (Cls) for the evaluation of FAR's effect on forecasting NSCLC prognosis.

METHODS

Participant or population NSCLC patients.

Intervention Studies investigated the relation of FAR with NSCLC prognosis.

Comparator NSCLC patients with normal level of FAR.

Study designs to be included Cohort studies, including prospective and retrospective cohorts.

Eligibility criteria Following articles were recruited: (1) NSCLC was diagnosed on the basis of pathology; (2) studies investigated the relation of FAR with NSCLC prognosis; (3) those having derivable hazard ratios (HRs) with 95% confidence intervals (CIs); (4) an available threshold to stratify low/high FAR; and (5) no restriction was applied in study language.

Information sources This work thoroughly retrieved PubMed, Web of Science, Embase, Cochrane Library, and CNKI until April 2, 2025.

Main outcome(s) OS and PFS.

Quality assessment / Risk of bias analysis This work utilized Newcastle–Ottawa Scale (NOS).

Strategy of data synthesis We computed HRs and 95%CIs for evaluating FAR's value in forecasting NSCLC prognosis.

Subgroup analysis Subgroup analyses were carried out for investigating FAR's effect on forecasting prognosis of diverse NSCLC populations.

Sensitivity analysis We also conducted sensitivity analysis for identifying the heterogeneity sources and evaluating result robustness.

Language restriction No language restrictions were applied.

Country(ies) involved China.

Keywords fibrinogen-to-albumin ratio; metaanalysis; non-small cell lung cancer.

Contributions of each author

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