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Prognostic and clinicopathological role of pretreatment fibrinogen-to-albumin ratio (FAR) in patients with gastric cancer: a meta-analysis

Wang, JY; Zhang, ZX; Fei, P.

Corresponding author:
Ping Fei

fei12345622@163.com

Author Affiliation:
Huzhou Central Hospital.

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 15 May 2025 and was last updated on 15 May 2025.

INTRODUCTION

Review question / Objective Previous studies have explored the prognostic significance of fibrinogen-to-albumin ratio (FAR) in gastric cancer (GC), however, the results remained conflicting. This study aimed to clarify the accurate prognostic role of FAR in GC through meta-analysis.

Condition being studied The electronic databases of PubMed, Web of Science, Embase, Cochrane Library, and CNKI were thoroughly searched from inception to January 4, 2025. Combined hazard ratios (HRs) and 95% confidence intervals (CIs) were calculated to estimate the prognostic value of FAR for overall survival (OS) and disease-free survival (DFS) in GC.

METHODS

Participant or population Patients with gastric cancer.

Intervention Studies reported the association between FAR and survival outcomes of GC.

Comparator Patients with gastric cancer with low FAR.

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

Eligibility criteria The inclusion criteria were as follows: (1) the diagnosis of GC was pathologically confirmed; (2) studies reported the association between FAR and survival outcomes of GC; (3) hazard ratios (HRs) and 95% confidence intervals (CIs) were reported; (4) a cut-off value of FAR was identified; and (5) studies published in any language.

Information sources The electronic databases of PubMed, Web of Science, Embase, Cochrane Library, and CNKI were thoroughly searched.

Main outcome(s) OS and DFS.

Quality assessment / Risk of bias analysis The range of NOS scores is from 0 to 9, and studies with scores of 6 or above are considered high-quality.

Strategy of data synthesis Combined HRs and 95%CIs were calculated to estimate the prognostic value of FAR for OS and DFS in GC.

Subgroup analysis Subgroup analysis was conducted to further investigate the prognostic role of FAR in diverse patients' populations.

Sensitivity analysis Sensitivity analysis was conducted.

Country(ies) involved China.

Keywords fibrinogen-to-albumin ratio; meta-analysis; gastric cancer; survival; evidence-based medicine.

Contributions of each author

Author 1 - Jiaying Wang.
Email: wjy415447612@163.com
Author 2 - Zongxin Zhang.
Email: zhongxin1006@126.com
Author 3 - Ping Fei.
Email: fei12345622@163.com