Table 10: Clinical evidence profile: Monitoring technique 3. Lung physiological function test (FEV_1% predicted at baseline) for prognosis of pulmonary exacerbations and FEV_1 percent predicted at 10 years

Prognostic factors	No of studies	Design	Setting	No of patients	Result (adjRR, MD)	Quality	Notes	Importance
Pulmonary exacerbations (defined as hospitalizations treated with IV AB) (Follow-up: 10 years; Better indicated by lower values)								
FEV_1 % predicted, 5-point decrease	1 (Sanders 2015)	Cohort study	CF centres in Europe	60	adjRR: 1.19 (95% CI: 1.10 to 1.30)[1]	⊕⊕⊕⊖ MODERATE[1]	Multiple Poisson model adjusted for sex, genotype, FEV_1 and mucoid ***P aeruginosa*** status at time of chest CT. p-value ≤0.001	CRITICAL
Change/ decline in FEV_1 % predicted (Follow-up: 10 years; Better indicated by lower values)								
FEV_1 % predicted, 5-point decrease	1 (Sanders 2015)	Cohort study	CF centres in Europe	60	MD: -4.47 (95% CI: -6.48 to -2.76)	⊕⊕⊕⊖ MODERATE[1]	Multiple linear model adjusted for sex, genotype, FEV_1 and mucoid ***P aeruginosa*** status at time of chest CT. p-value ≤0.001	CRITICAL

Abbreviations: adjRR: adjusted rate ratio; CF: cystic fibrosis; CI: confidence interval; CT: computerised tomography; FEV_1: forced expiratory volume in 1 second; MD: mean difference

1 The quality of the evidence was downgraded by 1 due to no adjustments for the confounder of concurrent treatment with immunomodulatory and/or mucolytic agents.