

David Beran

List of Publications by Year in descending order

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Version: 2024-02-01

118
papers

3,273
citations

185998

28
h-index

182168

51
g-index

126
all docs

126
docs citations

126
times ranked

3940
citing authors

#	ARTICLE	IF	CITATIONS
1	Technologies for Diabetes Self-Monitoring: A Scoping Review and Assessment Using the REASSURED Criteria. <i>Journal of Diabetes Science and Technology</i> , 2022, 16, 962-970.	1.3	3
2	Diabetes and the WHO Model List of Essential Medicines. <i>Lancet Diabetes and Endocrinology</i> , the, 2022, 10, 17-18.	5.5	1
3	Health system responses for type 1 diabetes: A scoping review. <i>Diabetic Medicine</i> , 2022, 39, e14805.	1.2	6
4	Diabetes mortality and trends before 25 years of age: an analysis of the Global Burden of Disease Study 2019. <i>Lancet Diabetes and Endocrinology</i> , the, 2022, 10, 177-192.	5.5	66
5	The insulin market reaches 100. <i>Diabetologia</i> , 2022, , 1.	2.9	3
6	Burden of non-communicable diseases among adolescents aged 10â€“24 years in the EU, 1990â€“2019: a systematic analysis of the Global Burden of Diseases Study 2019. <i>The Lancet Child and Adolescent Health</i> , 2022, 6, 367-383.	2.7	48
7	Caring for people with diabetes and non-communicable diseases in Ukraine: a humanitarian emergency. <i>Lancet Diabetes and Endocrinology</i> , the, 2022, 10, 308.	5.5	2
8	The role of non-governmental organizations in strengthening healthcare systems in low- and middle-income countries: Lessons from SantÃ© DiabÃ©te in Mali. <i>Global Health Action</i> , 2022, 15, 2061239.	0.7	4
9	Management of type 1 diabetes in lowâ€•and middleâ€•income countries: Comparative health system assessments in Kyrgyzstan, Mali, Peru and Tanzania. <i>Diabetic Medicine</i> , 2022, 39, .	1.2	6
10	Beyond the virus: Ensuring continuity of care for people with diabetes during COVID-19. <i>Primary Care Diabetes</i> , 2021, 15, 16-17.	0.9	66
11	Nationwide survey of the availability and affordability of asthma and COPD medicines in Nigeria. <i>Tropical Medicine and International Health</i> , 2021, 26, 54-65.	1.0	22
12	Why Are Individuals With Diabetes Less Active? The Mediating Role of Physical, Emotional, and Cognitive Factors. <i>Annals of Behavioral Medicine</i> , 2021, 55, 904-917.	1.7	14
13	Reforms in medical education: lessons learnt from Kyrgyzstan. <i>Global Health Action</i> , 2021, 14, 1944480.	0.7	3
14	A global perspective on the issue of access to insulin. <i>Diabetologia</i> , 2021, 64, 954-962.	2.9	63
15	Forty years after Alma-Ata: primary health-care preparedness for chronic diseases in Mozambique, Nepal and Peru. <i>Global Health Action</i> , 2021, 14, 1975920.	0.7	4
16	Heat-stability study of various insulin types in tropical temperature conditions: New insights towards improving diabetes care. <i>PLoS ONE</i> , 2021, 16, e0245372.	1.1	32
17	Operational considerations for the management of non-communicable diseases in humanitarian emergencies. <i>Conflict and Health</i> , 2021, 15, 9.	1.0	16
18	To tackle diabetes, science and health systems must take into account social context. <i>Nature Medicine</i> , 2021, 27, 193-195.	15.2	9

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19	Rethinking research processes to strengthen co-production in low and middle income countries. <i>BMJ, The</i> , 2021, 372, m4785.	3.0	21
20	How to bring research evidence into policy? Synthesizing strategies of five research projects in low-and middle-income countries. <i>Health Research Policy and Systems</i> , 2021, 19, 29.	1.1	18
21	Diagnostics and monitoring tools for noncommunicable diseases: a missing component in the global response. <i>Globalization and Health</i> , 2021, 17, 26.	2.4	10
22	Failing to address access to insulin in its centenary year would be a catastrophic moral failure. <i>Lancet Diabetes and Endocrinology</i> , 2021, 9, 194-196.	5.5	4
23	Use of the socio-ecological model to explore factors that influence the implementation of a diabetes structured education programme (EXTEND project) in Lilongwe, Malawi and Maputo, Mozambique: a qualitative study. <i>BMC Public Health</i> , 2021, 21, 1355.	1.2	10
24	Access to insulin: a comparison between low- and middle-income countries and the United Kingdom. <i>Practical Diabetes</i> , 2021, 38, 13-16.	0.1	1
25	Process evaluation of complex interventions in chronic and neglected tropical diseases in low- and middle-income countries: a scoping review protocol. <i>Systematic Reviews</i> , 2021, 10, 244.	2.5	3
26	EXTending availability of self-management structured Education programmes for people with type 2 Diabetes in low-to-middle income countries (EXTEND) a feasibility study in Mozambique and Malawi. <i>BMJ Open</i> , 2021, 11, e047425.	0.8	3
27	Reframing Non-Communicable Diseases and Injuries for Equity in the Era of Universal Health Coverage: Findings and Recommendations from the Kenya NCDI Poverty Commission. <i>Annals of Global Health</i> , 2021, 87, 3.	0.8	4
28	Development of a target product profile for a point-of-care cardiometabolic device. <i>BMC Cardiovascular Disorders</i> , 2021, 21, 486.	0.7	2
29	Access to antivenoms in the developing world: A multidisciplinary analysis. <i>Toxicon: X</i> , 2021, 12, 100086.	1.2	28
30	Type 1 diabetes in 2017: global estimates of incident and prevalent cases in children and adults. <i>Diabetologia</i> , 2021, 64, 2741-2750.	2.9	85
31	Social marketing interventions for the prevention and control of neglected tropical diseases: A systematic review. <i>PLoS Neglected Tropical Diseases</i> , 2020, 14, e0008360.	1.3	15
32	Report of the WHO independent high-level commission on NCDs: where is the focus on addressing inequalities?. <i>BMJ Global Health</i> , 2020, 5, e002820.	2.0	4
33	The process of building the priority of neglected tropical diseases: A global policy analysis. <i>PLoS Neglected Tropical Diseases</i> , 2020, 14, e0008498.	1.3	12
34	Lessons learned about co-creation: developing a complex intervention in rural Peru. <i>Global Health Action</i> , 2020, 13, 1754016.	0.7	30
35	Recommendations for the use of mathematical modelling to support decision-making on integration of non-communicable diseases into HIV care. <i>Journal of the International AIDS Society</i> , 2020, 23, e25505.	1.2	8
36	Spotlight on experiences of medicine unavailability: access to medicines challenges for NCDs and NTDs - the contrasting cases of insulin and praziquantel. <i>Expert Review of Clinical Pharmacology</i> , 2020, 13, 341-353.	1.3	4

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37	Disruption, changes, and adaptation: Experiences with chronic conditions in Mozambique, Nepal and Peru. <i>Global Public Health</i> , 2020, 15, 372-383.	1.0	8
38	Social economic and demographic determinants of non-communicable diseases in Kenya: a secondary analysis of the Kenya stepwise survey. <i>Pan African Medical Journal</i> , 2020, 37, 351.	0.3	7
39	Global Inequality in Type 1 Diabetes: a Comparison of Switzerland and Low-and Middle-Income Countries. <i>Pediatric Endocrinology Reviews</i> , 2020, 17, 210-219.	1.2	1
40	What is innovation in the area of medicines? The example of insulin and diabetes. <i>Diabetic Medicine</i> , 2019, 36, 1526-1527.	1.2	6
41	Insulin prices, availability and affordability in 13 low-income and middle-income countries. <i>BMJ Global Health</i> , 2019, 4, e001410.	2.0	75
42	Noncommunicable diseases, access to essential medicines and universal health coverage. <i>Global Health Action</i> , 2019, 12, 1670014.	0.7	27
43	The process of prioritization of non-communicable diseases in the global health policy arena. <i>Health Policy and Planning</i> , 2019, 34, 370-383.	1.0	51
44	Forty years since Alma-Ata: do we need a new model for noncommunicable diseases?. <i>Journal of Global Health</i> , 2019, 9, 010316.	1.2	11
45	A perspective on global access to insulin: a descriptive study of the market, trade flows and prices. <i>Diabetic Medicine</i> , 2019, 36, 726-733.	1.2	20
46	Analogue insulin as an essential medicine: the need for more evidence and lower prices. <i>Lancet Diabetes and Endocrinology</i> , 2019, 7, 338.	5.5	4
47	“If you will counsel properly with love, they will listen” A qualitative analysis of leprosy affected patients’ educational needs and caregiver perceptions in Nepal. <i>PLoS ONE</i> , 2019, 14, e0210955.	1.1	16
48	Challenges associated with providing diabetes care in humanitarian settings. <i>Lancet Diabetes and Endocrinology</i> , 2019, 7, 648-656.	5.5	30
49	High-quality health systems: time for a revolution in research and research funding. <i>The Lancet Global Health</i> , 2019, 7, e303-e304.	2.9	15
50	Insulin price components: case studies in six low/middle-income countries. <i>BMJ Global Health</i> , 2019, 4, e001705.	2.0	9
51	Ability of verbal autopsy data to detect deaths due to uncontrolled hyperglycaemia: testing existing methods and development and validation of a novel weighted score. <i>BMJ Open</i> , 2019, 9, e026331.	0.8	2
52	Interventions targeting hypertension and diabetes mellitus at community and primary healthcare level in low- and middle-income countries: a scoping review. <i>BMC Public Health</i> , 2019, 19, 1542.	1.2	51
53	Estimation of global insulin use for type 2 diabetes, 2018–30: a microsimulation analysis. <i>Lancet Diabetes and Endocrinology</i> , 2019, 7, 25-33.	5.5	138
54	Evidence-Based Clinical Criteria for Computed Tomography Imaging in Odontogenic Infections. <i>Journal of Oral and Maxillofacial Surgery</i> , 2019, 77, 299-306.	0.5	9

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55	Access to insulin: applying the concept of security of supply to medicines. Bulletin of the World Health Organization, 2019, 97, 358-364.	1.5	14
56	Access to diabetes care and treatment in Africa: challenges and opportunities. Medecine Et Sante Tropicales, 2018, 28, 351-354.	0.3	1
57	The experience of the Sant'Antonio Diabete NGO in the fight against diabetes in Africa. Medecine Et Sante Tropicales, 2018, 28, 363-367.	0.3	1
58	Moving from formative research to co-creation of interventions: insights from a community health system project in Mozambique, Nepal and Peru. BMJ Global Health, 2018, 3, e001183.	2.0	31
59	Self-management of diabetes in Sub-Saharan Africa: a systematic review. BMC Public Health, 2018, 18, 1148.	1.2	88
60	The impact of chronic disease management on primary care doctors in Switzerland: a qualitative study. BMC Family Practice, 2018, 19, 159.	2.9	11
61	Why Are We Failing to Address the Issue of Access to Insulin? A National and Global Perspective. Diabetes Care, 2018, 41, 1125-1131.	4.3	46
62	Availability and Affordability of Essential Medicines: Implications for Global Diabetes Treatment. Current Diabetes Reports, 2018, 18, 48.	1.7	30
63	Initial versus ongoing education: Perspectives of people with type 1 diabetes in 13 countries. Patient Education and Counseling, 2017, 100, 1012-1018.	1.0	5
64	Research capacity building obligations for global health partners. The Lancet Global Health, 2017, 5, e567-e568.	2.9	96
65	Modifying the Interagency Emergency Health Kit to include treatment for non-communicable diseases in natural disasters and complex emergencies: the missing clinical, operational and humanitarian perspectives. BMJ Global Health, 2017, 2, e000287.	2.0	3
66	The role of biosimilar manufacturers in improving access to insulin globally. Lancet Diabetes and Endocrinology, 2017, 5, 578.	5.5	15
67	Bringing all together for research capacity building in LMICs – Authors' reply. The Lancet Global Health, 2017, 5, e870.	2.9	0
68	Diabetes in sub-Saharan Africa: from clinical care to health policy. Lancet Diabetes and Endocrinology, 2017, 5, 622-667.	5.5	328
69	Addressing the double-burden of diabetes and tuberculosis: lessons from Kyrgyzstan. Globalization and Health, 2017, 13, 16.	2.4	12
70	“My heart burns” – A qualitative study of perceptions and experiences of type 1 diabetes among children and youths in Tajikistan. Chronic Illness, 2017, 13, 128-139.	0.6	12
71	Non-communicable diseases in humanitarian settings: ten essential questions. Conflict and Health, 2017, 11, 17.	1.0	69
72	Pharmaceutical industry, non-communicable diseases and partnerships: More questions than answers. Journal of Global Health, 2017, 7, 020301.	1.2	5

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73	Towards sustainable partnerships in global health: the case of the CRONICAS Centre of Excellence in Chronic Diseases in Peru. <i>Globalization and Health</i> , 2016, 12, 29.	2.4	10
74	Insulin in 2016: Challenge and constraints to access. <i>Diabetes Research and Clinical Practice</i> , 2016, 117, 119-121.	1.1	3
75	Access to essential medicines to treat chronic respiratory disease in low-income countries. <i>International Journal of Tuberculosis and Lung Disease</i> , 2016, 20, 717-728.	0.6	23
76	Insulin patents and market exclusivities: unresolved issues. <i>Lancet Diabetes and Endocrinology</i> , the, 2016, 4, 98.	5.5	3
77	The need to focus on primary health care for chronic diseases. <i>Lancet Diabetes and Endocrinology</i> , the, 2016, 4, 731-732.	5.5	8
78	Delivery of Type 2 diabetes care in low- and middle-income countries: lessons from Lima, Peru. <i>Diabetic Medicine</i> , 2016, 33, 752-760.	1.2	32
79	Professional medical associations in low-income and middle-income countries. <i>The Lancet Global Health</i> , 2016, 4, e606-e607.	2.9	4
80	Partnerships in global health and collaborative governance: lessons learnt from the Division of Tropical and Humanitarian Medicine at the Geneva University Hospitals. <i>Globalization and Health</i> , 2016, 12, 14.	2.4	20
81	Coping with the economic burden of Diabetes, TB and co-prevalence: evidence from Bishkek, Kyrgyzstan. <i>BMC Health Services Research</i> , 2016, 16, 118.	0.9	21
82	Constraints and challenges in access to insulin: a global perspective. <i>Lancet Diabetes and Endocrinology</i> , the, 2016, 4, 275-285.	5.5	134
83	Needs and Needs Assessments. <i>SAGE Open</i> , 2015, 5, 215824401558037.	0.8	33
84	Health systems research for policy change: lessons from the implementation of rapid assessment protocols for diabetes in low- and middle-income settings. <i>Health Research Policy and Systems</i> , 2015, 13, 41.	1.1	11
85	Medicines availability for non-communicable diseases: the case for standardized monitoring. <i>Globalization and Health</i> , 2015, 11, 18.	2.4	34
86	Diabetes in an emergency context: the Malian case study. <i>Conflict and Health</i> , 2015, 9, 15.	1.0	30
87	Endemic diabetes in the world's poorest people. <i>Lancet Diabetes and Endocrinology</i> , the, 2015, 3, 402-403.	5.5	25
88	Burden of asthma and chronic obstructive pulmonary disease and access to essential medicines in low-income and middle-income countries. <i>Lancet Respiratory Medicine</i> , the, 2015, 3, 159-170.	5.2	116
89	The Impact of Health Systems on Diabetes Care in Low and Lower Middle Income Countries. <i>Current Diabetes Reports</i> , 2015, 15, 20.	1.7	34
90	In defence of NICE draft type 2 diabetes guidelines. <i>Lancet Diabetes and Endocrinology</i> , the, 2015, 3, 406.	5.5	0

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91	Use and Out-of-Pocket Costs of Insulin for Type 2 Diabetes Mellitus From 2000 Through 2010. JAMA - Journal of the American Medical Association, 2014, 311, 2331.	3.8	75
92	Developing a hierarchy of needs for Type 1 diabetes. Diabetic Medicine, 2014, 31, 61-67.	1.2	23
93	Improving global access to medicines for non-communicable diseases. The Lancet Global Health, 2014, 2, e561-e562.	2.9	13
94	Accès à l'insuline dans les pays en voie de développement : une problématique complexe. Medecine Des Maladies Metaboliques, 2014, 8, 153-157.	0.1	1
95	Difficulties Facing the Provision of Care for Multimorbidity in Low-Income Countries. Key Issues in Mental Health, 2014, , 33-41.	0.6	4
96	Diabetes in Kyrgyzstan: changes between 2002 and 2009. International Journal of Health Planning and Management, 2013, 28, e121-37.	0.7	23
97	Progressive Visual Loss in an Otherwise Healthy Male. Journal of Emergency Medicine, 2013, 45, e23-e24.	0.3	0
98	Delivering Diabetes Care in the Philippines and Vietnam. Asia-Pacific Journal of Public Health, 2013, 25, 92-101.	0.4	27
99	Global Reality of Type 1 Diabetes Care in 2013. Diabetes Care, 2013, 36, e144-e144.	4.3	3
100	Chronic conditions: lessons from the frontlines. Chronic Illness, 2013, 9, 83-86.	0.6	1
101	The double scandal of insulin. Journal of the Royal College of Physicians of Edinburgh, The, 2013, 43, 194-196.	0.2	3
102	Health systems and the management of chronic diseases: lessons from Type 1 diabetes. Diabetes Management, 2012, 2, 323-335.	0.5	9
103	The International Diabetes Federation: losing its credibility by partnering with Nestlé?. Lancet, The, 2012, 380, 805.	6.3	7
104	On the road to the insulin centenary. Lancet, The, 2012, 380, 1648.	6.3	11
105	Non-communicable diseases in Mozambique: risk factors, burden, response and outcomes to date. Globalization and Health, 2012, 8, 37.	2.4	29
106	Apply criteria to improve health systems in developing countries. BMJ: British Medical Journal, 2012, 344, e546-e546.	2.4	0
107	The insulin dilemma in resource-limited countries. A way forward?. Diabetologia, 2011, 54, 19-24.	2.9	50
108	Improving access to insulin: what can be done?. Diabetes Management, 2011, 1, 67-76.	0.5	14

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109	The Diabetes UK Mozambique Twinning Programme. Results of improvements in diabetes care in Mozambique: a reassessment 6 years later using the Rapid Assessment Protocol for Insulin Access. <i>Diabetic Medicine</i> , 2010, 27, 855-861.	1.2	28
110	Looking beyond the issue of access to insulin: What is needed for proper diabetes care in resource poor settings. <i>Diabetes Research and Clinical Practice</i> , 2010, 88, 217-221.	1.1	72
111	Twining for better diabetes care: a model for improving healthcare for non-communicable diseases in resource-poor countries. <i>Postgraduate Medical Journal</i> , 2009, 85, 1-2.	0.9	14
112	Access to medicines versus access to treatment: the case of type 1 diabetes. <i>Bulletin of the World Health Organization</i> , 2008, 86, 648-649.	1.5	22
113	Diabetes care in sub-Saharan Africa. <i>Lancet, The</i> , 2006, 368, 1689-1695.	6.3	213
114	Assessing health systems for type 1 diabetes in sub-Saharan Africa: developing a 'Rapid Assessment Protocol for Insulin Access'. <i>BMC Health Services Research</i> , 2006, 6, 17.	0.9	37
115	Access to Care for Patients With Insulin-Requiring Diabetes in Developing Countries: Case studies of Mozambique and Zambia. <i>Diabetes Care</i> , 2005, 28, 2136-2140.	4.3	151
116	A theme issue by, for, and about Africa. <i>BMJ: British Medical Journal</i> , 2005, 331, 779.3-780.	2.4	1
117	Prognosis of diabetes in the developing world. <i>Lancet, The</i> , 2003, 362, 1420-1421.	6.3	3
118	COVID-19's impact on type 1 diabetes management: A mixed-methods study exploring the Peruvian experience. <i>International Journal of Health Planning and Management</i> , 0, , .	0.7	3