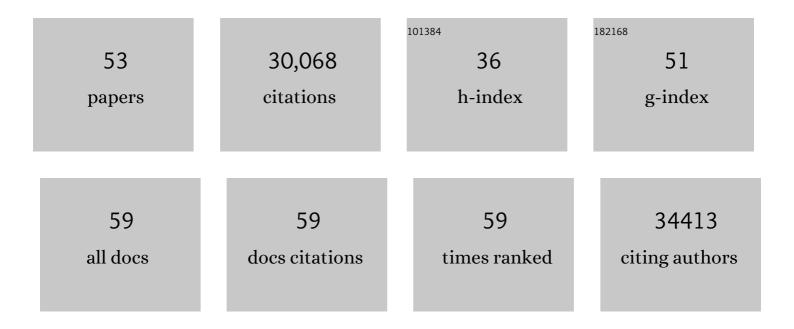
Paul Glasziou

List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	GRADE guidelines: 1. Introduction—GRADE evidence profiles and summary of findings tables. Journal of Clinical Epidemiology, 2011, 64, 383-394.	2.4	6,722
2	Intensive Blood Glucose Control and Vascular Outcomes in Patients with Type 2 Diabetes. New England Journal of Medicine, 2008, 358, 2560-2572.	13.9	6,447
3	GRADE guidelines: 7. Rating the quality of evidence—inconsistency. Journal of Clinical Epidemiology, 2011, 64, 1294-1302.	2.4	1,705
4	Avoidable waste in the production and reporting of research evidence. Lancet, The, 2009, 374, 86-89.	6.3	1,559
5	No surgical innovation without evaluation: the IDEAL recommendations. Lancet, The, 2009, 374, 1105-1112.	6.3	1,450
6	GRADE guidelines: 2. Framing the question and deciding on important outcomes. Journal of Clinical Epidemiology, 2011, 64, 395-400.	2.4	1,380
7	Reducing waste from incomplete or unusable reports of biomedical research. Lancet, The, 2014, 383, 267-276.	6.3	982
8	Seventy-Five Trials and Eleven Systematic Reviews a Day: How Will We Ever Keep Up?. PLoS Medicine, 2010, 7, e1000326.	3.9	812
9	Biomedical research: increasing value, reducing waste. Lancet, The, 2014, 383, 101-104.	6.3	750
10	GRADE guidelines: 12. Preparing Summary of Findings tables—binary outcomes. Journal of Clinical Epidemiology, 2013, 66, 158-172.	2.4	618
11	GRADE guidelines: 11. Making an overall rating of confidence in effect estimates for a single outcome and for all outcomes. Journal of Clinical Epidemiology, 2013, 66, 151-157.	2.4	577
12	Use of GRADE for assessment of evidence about prognosis: rating confidence in estimates of event rates in broad categories of patients. BMJ, The, 2015, 350, h870-h870.	3.0	532
13	Challenges in evaluating surgical innovation. Lancet, The, 2009, 374, 1097-1104.	6.3	523
14	Follow-up of Blood-Pressure Lowering and Glucose Control in Type 2 Diabetes. New England Journal of Medicine, 2014, 371, 1392-1406.	13.9	520
15	What is missing from descriptions of treatment in trials and reviews?. BMJ: British Medical Journal, 2008, 336, 1472-1474.	2.4	501
16	Evaluation and stages of surgical innovations. Lancet, The, 2009, 374, 1089-1096.	6.3	492
17	When are randomised trials unnecessary? Picking signal from noise. BMJ: British Medical Journal, 2007, 334, 349-351.	2,4	487
18	Living systematic review: 1. Introduction—the why, what, when, and how. Journal of Clinical Epidemiology, 2017, 91, 23-30.	2.4	406

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19	Increasing value and reducing waste in biomedical research: who's listening?. Lancet, The, 2016, 387, 1573-1586.	6.3	346
20	Systematic review automation technologies. Systematic Reviews, 2014, 3, 74.	2.5	282
21	Living systematic reviews: 2. Combining human and machine effort. Journal of Clinical Epidemiology, 2017, 91, 31-37.	2.4	246
22	Lowering Blood Pressure Reduces Renal Events in Type 2 Diabetes. Journal of the American Society of Nephrology: JASN, 2009, 20, 883-892.	3.0	245
23	Combined Effects of Routine Blood Pressure Lowering and Intensive Glucose Control on Macrovascular and Microvascular Outcomes in Patients With Type 2 Diabetes. Diabetes Care, 2009, 32, 2068-2074.	4.3	230
24	Assessing and presenting summaries of evidence in Cochrane Reviews. Systematic Reviews, 2013, 2, 81.	2.5	207
25	Effects of Visit-to-Visit Variability in Systolic Blood Pressure on Macrovascular and Microvascular Complications in Patients With Type 2 Diabetes Mellitus. Circulation, 2013, 128, 1325-1334.	1.6	189
26	GRADE guidelines: 21 part 1. Study design, risk of bias, and indirectness in rating the certainty across a body of evidence for test accuracy. Journal of Clinical Epidemiology, 2020, 122, 129-141.	2.4	168
27	GRADE guidelines: 21 part 2. Test accuracy: inconsistency, imprecision, publication bias, and other domains for rating the certainty of evidence and presenting it in evidence profiles and summary of findings tables. Journal of Clinical Epidemiology, 2020, 122, 142-152.	2.4	167
28	Research waste is still a scandal—an essay by Paul Glasziou and Iain Chalmers. BMJ: British Medical Journal, 0, , k4645.	2.4	145
29	Event Rates, Hospital Utilization, and Costs Associated with Major Complications of Diabetes: A Multicountry Comparative Analysis. PLoS Medicine, 2010, 7, e1000236.	3.9	122
30	Making progress with the automation of systematic reviews: principles of the International Collaboration for the Automation of Systematic Reviews (ICASR). Systematic Reviews, 2018, 7, 77.	2.5	97
31	Can evidence-based medicine and clinical quality improvement learn from each other?. BMJ Quality and Safety, 2011, 20, i13-i17.	1.8	91
32	Blood Pressure Variables and Cardiovascular Risk. Hypertension, 2009, 54, 399-404.	1.3	72
33	Trial unpredictability yields predictable therapy gains. Nature, 2013, 500, 395-396.	13.7	54
34	The methodological quality of 176,620 randomized controlled trials published between 1966 and 2018 reveals a positive trend but also an urgent need for improvement. PLoS Biology, 2021, 19, e3001162.	2.6	52
35	What's in a name? The challenge of describing interventions in systematic reviews: analysis of a random sample of reviews of non-pharmacological stroke interventions. BMJ Open, 2015, 5, e009051-e009051.	0.8	44
36	The scatter of research: cross sectional comparison of randomised trials and systematic reviews across specialties. BMJ, The, 2012, 344, e3223-e3223.	3.0	42

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37	Acute Increases in Serum Creatinine After Starting Angiotensin-Converting Enzyme Inhibitor-Based Therapy and Effects of its Continuation on Major Clinical Outcomes in Type 2 Diabetes Mellitus. Hypertension, 2019, 73, 84-91.	1.3	40
38	A comparison of the performance of seven key bibliographic databases in identifying all relevant systematic reviews of interventions for hypertension. Systematic Reviews, 2016, 5, 27.	2.5	35
39	Development of a Search Strategy for an Evidence Based Retrieval Service. PLoS ONE, 2016, 11, e0167170.	1.1	34
40	Exempting low-risk health and medical research from ethics reviews: comparing Australia, the United Kingdom, the United States and the Netherlands. Health Research Policy and Systems, 2020, 18, 11.	1.1	34
41	The risk of cancer in people with diabetes and chronic kidney disease. Nephrology Dialysis Transplantation, 2012, 27, 3337-3344.	0.4	31
42	The Role of Open Access in Reducing Waste in Medical Research. PLoS Medicine, 2014, 11, e1001651.	3.9	31
43	Focus on sharing individual patient data distracts from other ways of improving trial transparency. BMJ, The, 2017, 357, j2782.	3.0	15
44	Comparability of Patient-reported Health Status. Medical Care, 2011, 49, 962-970.	1.1	14
45	Promoting critical appraisal skills. Lancet, The, 2019, 393, 2589-2590.	6.3	9
46	Improving research ethics review and governance can improve human health. Journal of the Royal Society of Medicine, 2021, 114, 556-562.	1.1	7
47	Role of professional networks on social media in addressing clinical questions at general practice: a cross-sectional study of general practitioners in Australia and New Zealand. BMC Family Practice, 2019, 20, 43.	2.9	6
48	The James Lind Initiative: books, websites and databases to promote critical thinking about treatment claims, 2003 to 2018. Research Involvement and Engagement, 2019, 5, 6.	1.1	6
49	Health Technology Assessment. Medical Decision Making, 2012, 32, E20-E24.	1.2	4
50	A brief history of clinical evidence updates and bibliographic databases. Journal of the Royal Society of Medicine, 2018, 111, 292-301.	1.1	3
51	Searching for randomized controlled trials and systematic reviews on exercise. A descriptive study. Sao Paulo Medical Journal, 2015, 133, 109-114.	0.4	2
52	Protecting the public from the adverse effects of confused research ethics. Journal of the Royal Society of Medicine, 2021, 114, 014107682110517.	1.1	2
53	Training in critical appraisal skills: Authors' reply. Lancet, The, 2020, 395, e60.	6.3	Ο