Paul Glasziou

List of Publications by Year in descending order

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Version: 2024-02-01

53 papers 30,068 citations

36 h-index 51 g-index

59 all docs 59 docs citations

59 times ranked 34413 citing authors

#	Article	IF	Citations
1	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
2	Protecting the public from the adverse effects of confused research ethics. Journal of the Royal Society of Medicine, 2021, 114, 014107682110517.	1.1	2
3	Improving research ethics review and governance can improve human health. Journal of the Royal Society of Medicine, 2021, 114, 556-562.	1.1	7
4	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
5	Training in critical appraisal skills: Authors' reply. Lancet, The, 2020, 395, e60.	6.3	o
6	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
7	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
8	Promoting critical appraisal skills. Lancet, The, 2019, 393, 2589-2590.	6.3	9
9	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
10	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
11	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
12	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
13	A brief history of clinical evidence updates and bibliographic databases. Journal of the Royal Society of Medicine, 2018, 111, 292-301.	1.1	3
14	Focus on sharing individual patient data distracts from other ways of improving trial transparency. BMJ, The, 2017, 357, j2782.	3.0	15
15	Living systematic review: 1. Introduction—the why, what, when, and how. Journal of Clinical Epidemiology, 2017, 91, 23-30.	2.4	406
16	Living systematic reviews: 2. Combining human and machine effort. Journal of Clinical Epidemiology, 2017, 91, 31-37.	2.4	246
17	Development of a Search Strategy for an Evidence Based Retrieval Service. PLoS ONE, 2016, 11, e0167170.	1.1	34
18	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

#	Article	IF	CITATIONS
19	Increasing value and reducing waste in biomedical research: who's listening?. Lancet, The, 2016, 387, 1573-1586.	6.3	346
20	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
21	Searching for randomized controlled trials and systematic reviews on exercise. A descriptive study. Sao Paulo Medical Journal, 2015, 133, 109-114.	0.4	2
22	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
23	The Role of Open Access in Reducing Waste in Medical Research. PLoS Medicine, 2014, 11, e1001651.	3.9	31
24	Reducing waste from incomplete or unusable reports of biomedical research. Lancet, The, 2014, 383, 267-276.	6.3	982
25	Systematic review automation technologies. Systematic Reviews, 2014, 3, 74.	2.5	282
26	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
27	Biomedical research: increasing value, reducing waste. Lancet, The, 2014, 383, 101-104.	6.3	750
28	Trial unpredictability yields predictable therapy gains. Nature, 2013, 500, 395-396.	13.7	54
29			
	Assessing and presenting summaries of evidence in Cochrane Reviews. Systematic Reviews, 2013, 2, 81.	2.5	207
30	Assessing and presenting summaries of evidence in Cochrane Reviews. Systematic Reviews, 2013, 2, 81. GRADE guidelines: 12. Preparing Summary of Findings tables—binary outcomes. Journal of Clinical Epidemiology, 2013, 66, 158-172.	2.5	618
30	GRADE guidelines: 12. Preparing Summary of Findings tablesâ€"binary outcomes. Journal of Clinical		
	GRADE guidelines: 12. Preparing Summary of Findings tablesâ€"binary outcomes. Journal of Clinical Epidemiology, 2013, 66, 158-172. GRADE guidelines: 11. Making an overall rating of confidence in effect estimates for a single outcome	2.4	618
31	GRADE guidelines: 12. Preparing Summary of Findings tablesâ€"binary outcomes. Journal of Clinical Epidemiology, 2013, 66, 158-172. 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. Effects of Visit-to-Visit Variability in Systolic Blood Pressure on Macrovascular and Microvascular	2.4	618 577
31	GRADE guidelines: 12. Preparing Summary of Findings tables—binary outcomes. Journal of Clinical Epidemiology, 2013, 66, 158-172. 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. 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.	2.4 2.4 1.6	618 577 189
31 32 33	GRADE guidelines: 12. Preparing Summary of Findings tables—binary outcomes. Journal of Clinical Epidemiology, 2013, 66, 158-172. 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. 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. Health Technology Assessment. Medical Decision Making, 2012, 32, E20-E24. The scatter of research: cross sectional comparison of randomised trials and systematic reviews	2.4 2.4 1.6	618 577 189

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37	GRADE guidelines: 2. Framing the question and deciding on important outcomes. Journal of Clinical Epidemiology, 2011, 64, 395-400.	2.4	1,380
38	GRADE guidelines: 7. Rating the quality of evidenceâ€"inconsistency. Journal of Clinical Epidemiology, 2011, 64, 1294-1302.	2.4	1,705
39	Can evidence-based medicine and clinical quality improvement learn from each other?. BMJ Quality and Safety, 2011, 20, i13-i17.	1.8	91
40	Comparability of Patient-reported Health Status. Medical Care, 2011, 49, 962-970.	1.1	14
41	Seventy-Five Trials and Eleven Systematic Reviews a Day: How Will We Ever Keep Up?. PLoS Medicine, 2010, 7, e1000326.	3.9	812
42	Event Rates, Hospital Utilization, and Costs Associated with Major Complications of Diabetes: A Multicountry Comparative Analysis. PLoS Medicine, 2010, 7, e1000236.	3.9	122
43	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
44	Blood Pressure Variables and Cardiovascular Risk. Hypertension, 2009, 54, 399-404.	1.3	72
45	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
46	Avoidable waste in the production and reporting of research evidence. Lancet, The, 2009, 374, 86-89.	6.3	1,559
47	Evaluation and stages of surgical innovations. Lancet, The, 2009, 374, 1089-1096.	6.3	492
48	Challenges in evaluating surgical innovation. Lancet, The, 2009, 374, 1097-1104.	6.3	523
49	No surgical innovation without evaluation: the IDEAL recommendations. Lancet, The, 2009, 374, 1105-1112.	6.3	1,450
50	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
51	What is missing from descriptions of treatment in trials and reviews?. BMJ: British Medical Journal, 2008, 336, 1472-1474.	2.4	501
52	When are randomised trials unnecessary? Picking signal from noise. BMJ: British Medical Journal, 2007, 334, 349-351.	2.4	487
53	Research waste is still a scandal—an essay by Paul Glasziou and Iain Chalmers. BMJ: British Medical Journal, 0, , k4645.	2.4	145