Erik Hessen

List of Publications by Year
in descending order

53	1,414	304743	345221
papers	citations	22 h-index	36 g-index

56	56	56	2347
all docs	docs citations	times ranked	citing authors

#	Article	IF	Citations
1	Regression-based norms for the FAS phonemic fluency test for ages 40â€“84 based on a Norwegian sample. Applied Neuropsychology Adult, 2023, 30, 159-168.	1.2	6
2	Core Competencies in Clinical Neuropsychology as a Training Model in Europe. Frontiers in Psychology, 2022, 13, 849151.	2.1	1
3	Addressing neuropsychological diagnostics in adults with epilepsy: Introducing the International Classification of Cognitive Disorders in Epilepsy: The IC CODE Initiative. Epilepsia Open, 2021, 6, 266-275.	2.4	31
4	European Clinical Neuropsychology: Role in Healthcare and Access to Neuropsychological Services. Healthcare (Switzerland), 2021, 9, 734.	2.0	8
5	Cerebrospinal fluid markers for synaptic function and Alzheimer type changes in late life depression. Scientific Reports, 2021, 11, 20375.	3.3	9
6	Clinical Neuropsychology as a Specialist Profession in European Health Care: Developing a Benchmark for Training Standards and Competencies Using the Europsy Model?. Frontiers in Psychology, 2020, 11, 559134.	2.1	9
7	Demographically adjusted trail making test norms in a Scandinavian sample from 41 to 84 years. Clinical Neuropsychologist, 2020, 34, 110-126.	2.3	15
8	Regressionâ€based normative data for the Rey Auditory Verbal Learning Test in Norwegian and Swedish adults ages 40 to 80. Alzheimer's and Dementia, 2020, 16, e044431.	0.8	0
9	Amyloid Plaques and Symptoms of Depression Links to Medical Help-Seeking due to Subjective Cognitive Decline. Journal of Alzheimer's Disease, 2020, 75, 879-890.	2.6	7
10	Predictive and diagnostic utility of brief neuropsychological assessment in detecting Alzheimerâ€™s pathology and progression to dementia.. Neuropsychology, 2020, 34, 851-861.	1.3	5
11	Demographically adjusted CERAD wordlist test norms in a Norwegian sample from 40 to 80 years. Clinical Neuropsychologist, 2019, 33, 27-39.	2.3	20
12	In Brief Neuropsychological Assessment, Amnestic Mild Cognitive Impairment (MCI) Is associated with Cerebrospinal Fluid Biomarkers for Cognitive Decline in Contrast to the Prevailing NIA-AA MCI Criterion. Journal of Alzheimer's Disease, 2019, 67, 715-723.	2.6	5
13	Training models and status of clinical neuropsychologists in Europe: Results of a survey on 30 countries. Clinical Neuropsychologist, 2019, 33, 32-56.	2.3	22
14	Core competencies in clinical neuropsychology training across the world. Clinical Neuropsychologist, 2018, 32, 642-656.	2.3	31
15	F4â€08â€03: INCREASED CSF NEUROGRANIN/BACE1 RATIO IN AMYLOID POSITIVE SUBJECTS WITH SUBJECTIVE COGNITIVE DECLINE. Alzheimer's and Dementia, 2018, 14, P1395.	0.8	0
16	P3â€477: MEMORY INTRUSIONS AND CSF BIOMARKERS IN SUBJECTIVE AND MILD COGNITIVE IMPAIRMENT. Alzheimer's and Dementia, 2018, 14, P1303.	0.8	0
17	Cerebrospinal fluid neurogranin/Î²â€site APPâ€cleaving enzyme 1 predicts cognitive decline in preclinical Alzheimer's disease. Alzheimer's and Dementia: Translational Research and Clinical Interventions, 2018, 4, 617-627.	3.7	24
18	Tested and reported executive problems in children and youth epilepsy. Brain and Behavior, 2018, 8, e00971.	2.2	12

#	Article	IF	Citations
19	Longitudinal evaluation of criteria for subjective cognitive decline and preclinical Alzheimer's disease in a memory clinic sample. Alzheimer's and Dementia: Diagnosis, Assessment and Disease Monitoring, 2017, 8, 96-107.	2.4	29
20	Biomarkers in subtypes of mild cognitive impairment and subjective cognitive decline. Brain and Behavior, 2017, 7, e00776.	2.2	34
21	Impaired synaptic function is linked to cognition in Parkinson's disease. Annals of Clinical and Translational Neurology, 2017, 4, 700-713.	3.7	23
22	[P3â€“452]: SCREENING FOR ALZHEIMER's DISEASE: COGNITIVE IMPAIRMENT IN SELFâ€REFERRED AND MEMORY CLINICâ€REFERRED PATIENTS. Alzheimer's and Dementia, 2017, 13, P1145.	0.8	0
23	[P4â€“154]: DETECTING ATâ€RISK CASES FOR ALZHEIMER's DISEASE. Alzheimer's and Dementia, 2017, 13, P1317	0.8	0
24	Subjective Cognitive Impairment Is a Predominantly Benign Condition in Memory Clinic Patients Followed for 6 Years: The Gothenburg-Oslo MCI Study. Dementia and Geriatric Cognitive Disorders Extra, 2017, 7, 1-14.	1.3	51
25	Screening for Alzheimerâ€™s Disease: Cognitive Impairment in Self-Referred and Memory Clinic-Referred Patients. Journal of Alzheimer's Disease, 2017, 60, 1621-1631.	2.6	8
26	Detecting At-Risk Alzheimerâ€™s Disease Cases. Journal of Alzheimer's Disease, 2017, 60, 97-105.	2.6	42
27	Neuropsychological Profiles in Mild Cognitive Impairment due to Alzheimerâ€™s and Parkinsonâ€™s Diseases. Journal of Parkinson's Disease, 2016, 6, 413-421.	2.8	10
28	Hippocampal subfield atrophy in relation to cerebrospinal fluid biomarkers and cognition in early Parkinsonâ€™s disease: a cross-sectional study. Npj Parkinson's Disease, 2016, 2, 15030.	5.3	24
29	Psychiatric comorbidity in children and youth with epilepsy: An association with executive dysfunction?. Epilepsy and Behavior, 2016, 56, 88-94.	1.7	37
30	T-Tau is Associated with Objective Memory Decline Over Two Years in Persons Seeking Help for Subjective Cognitive Decline: A Report from the Gothenburg-Oslo MCI Study. Journal of Alzheimer's Disease, 2015, 47, 619-628.	2.6	19
31	Hippocampal Subfield Atrophy in Multi-Domain but Not Amnestic Mild Cognitive Impairment. Dementia and Geriatric Cognitive Disorders, 2015, 40, 44-53.	1.5	7
32	Amyloid-Î² and Î±-synuclein cerebrospinal fluid biomarkers andÂcognition in early Parkinson's disease. Parkinsonism and Related Disorders, 2015, 21, 758-764.	2.2	59
33	Hippocampal Complex Atrophy in Poststroke and Mild Cognitive Impairment. Journal of Cerebral Blood Flow and Metabolism, 2015, 35, 1729-1737.	4.3	17
34	White matter integrity and cognition in Parkinson's disease: a cross-sectional study. BMJ Open, 2014, 4, e003976.	1.9	41
35	The Combination of Dysexecutive and Amnestic Deficits Strongly Predicts Conversion to Dementia in Young Mild Cognitive Impairment Patients: A Report from the Gothenburg-Oslo MCI Study. Dementia and Geriatric Cognitive Disorders Extra, 2014, 4, 76-85.	1.3	14
36	Correlates of Subjective and Mild Cognitive Impairment: Depressive Symptoms and CSF Biomarkers. Dementia and Geriatric Cognitive Disorders Extra, 2013, 3, 291-300.	1.3	38

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37	Diffusion Tensor Imaging Surpasses Cerebrospinal Fluid as Predictor of Cognitive Decline and Medial Temporal Lobe Atrophy in Subjective Cognitive Impairment and Mild Cognitive Impairment. Journal of Alzheimer's Disease, 2013, 33, 723-736.	2.6	95
38	Executive Dysfunction in Mild Cognitive Impairment is Associated with Changes in Frontal and Cingulate White Matter Tracts. Journal of Alzheimer's Disease, 2011, 27, 453-462.	2.6	58
39	Rehearsal Significantly Improves Immediate and Delayed Recall on the Rey Auditory Verbal Learning Test. Applied Neuropsychology, 2011, 18, 263-268.	1.5	3
40	Very long-term neuropsychological and behavioral consequences of mild and complicated mild TBI: increased impact of pediatric versus adult TBI. , 2010, , 118-144.		2
41	Indicators of complicated mild TBI predict MMPI-2 scores after 23 years. Brain Injury, 2009, 23, 234-242.	1.2	27
42	Health concerns predicts poor quality of life in well-controlled epilepsy. Seizure: the Journal of the British Epilepsy Association, 2009, 18, 487-491.	2.0	10
43	Consequences of antiepileptic drug withdrawal: A randomized, doubleâ€blind study (Akershus Study). Epilepsia, 2008, 49, 455-463.	5.1	166
44	Behavioural adjustment in seizure-free epilepsy patients on monotherapy. Seizure: the Journal of the British Epilepsy Association, 2008, 17, 422-430.	2.0	8
45	MMPI-2 profiles 23 years after paediatric mild traumatic brain injury. Brain Injury, 2008, 22, 39-50.	1.2	29
46	Improvement in Speeded Cognitive Processing After Anti-epileptic Drug Withdrawal â€“ A Controlled Study in Mono-therapy Patients. Progress in Neurotherapeutics and Neuropsychopharmacology, 2008, 3, .	0.0	1
47	Influence of major antiepileptic drugs on neuropsychological function: Results from a randomized, double-blind, placebo-controlled withdrawal study of seizure-free epilepsy patients on monotherapy. Journal of the International Neuropsychological Society, 2007, 13, 393-400.	1.8	25
48	Slight improvement in mood and irritability after antiepileptic drug withdrawal: A controlled study in patients on monotherapy. Epilepsy and Behavior, 2007, 10, 449-455.	1.7	28
49	Neuropsychological function 23 years after mild traumatic brain injury: A comparison of outcome after paediatric and adult head injuries. Brain Injury, 2007, 21, 963-979.	1.2	140
50	Neuropsychological function in a group of patients 25 years after sustaining minor head injuries as children and adolescents. Scandinavian Journal of Psychology, 2006, 47, 245-251.	1.5	41
51	Influence of Major Antiepileptic Drugs on Attention, Reaction Time, and Speed of Information Processing: Results from a Randomized, Double-blind, Placebo-controlled Withdrawal Study of Seizure-free Epilepsy Patients Receiving Monotherapy. Epilepsia, 2006, 47, 2038-2045.	5.1	97
52	Predictors of Neuropsychological Impairment in Seizure-free Epilepsy Patients. Epilepsia, 2006, 47, 1870-1878.	5.1	22
53	Improvement in Speeded Cognitive Processing After Anti-epileptic Drug Withdrawalâ€“A Controlled Study in Mono-therapy Patients. , 0, , 199-210.		4