Leanne J Robinson

List of Publications by Year in descending order

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Version: 2024-02-01

304743 276875 2,027 70 22 h-index citations g-index papers

77 77 77 2320 docs citations times ranked citing authors all docs

41

#	Article	IF	CITATIONS
1	Plasmodium vivax – How hidden reservoirs hinder global malaria elimination. Parasitology International, 2022, 87, 102526.	1.3	23
2	Vector composition, abundance, biting patterns and malaria transmission intensity in Madang, Papua New Guinea: assessment after 7Âyears of an LLIN-based malaria control programme. Malaria Journal, 2022, 21, 7.	2.3	7
3	Safety and efficacy of mass drug administration with a single-dose triple-drug regimen of albendazole + diethylcarbamazine + ivermectin for lymphatic filariasis in Papua New Guinea: An open-label, cluster-randomised trial. PLoS Neglected Tropical Diseases, 2022, 16, e0010096.	3.0	13
4	Community perceptions and acceptability of mass drug administration for the control of neglected tropical diseases in Asia-Pacific countries: A systematic scoping review of qualitative research. PLoS Neglected Tropical Diseases, 2022, 16, e0010215.	3.0	5
5	Mass drug administration of ivermectin, diethylcarbamazine, plus albendazole compared with diethylcarbamazine plus albendazole for reduction of lymphatic filariasis endemicity in Papua New Guinea: a cluster-randomised trial. Lancet Infectious Diseases, The, 2022, 22, 1200-1209.	9.1	8
6	Genomic Sequencing of Dengue Virus Strains Associated with Papua New Guinean Outbreaks in 2016 Reveals Endemic Circulation of DENV-1 and DENV-2. American Journal of Tropical Medicine and Hygiene, 2022, 107, 1234-1238.	1.4	2
7	Individual Efficacy and Community Impact of Ivermectin, Diethylcarbamazine, and Albendazole Mass Drug Administration for Lymphatic Filariasis Control in Fiji: A Cluster Randomized Trial. Clinical Infectious Diseases, 2021, 73, 994-1002.	5.8	5
8	A multicenter, community-based, mixed methods assessment of the acceptability of a triple drug regimen for elimination of lymphatic filariasis. PLoS Neglected Tropical Diseases, 2021, 15, e0009002.	3.0	14
9	Human Behavior, Livelihood, and Malaria Transmission in Two Sites of Papua New Guinea. Journal of Infectious Diseases, 2021, 223, S171-S186.	4.0	18
10	Investigating differences in village-level heterogeneity of malaria infection and household risk factors in Papua New Guinea. Scientific Reports, 2021, 11, 16540.	3.3	12
11	Identification of the asymptomatic Plasmodium falciparum and Plasmodium vivax gametocyte reservoir under different transmission intensities. PLoS Neglected Tropical Diseases, 2021, 15, e0009672.	3.0	12
12	Surveillance of molecular markers of Plasmodium falciparum artemisinin resistance (kelch13) Tj ETQq $0\ 0\ 0$ rgBT / and Drug Resistance, 2021, 16, 188-193.	/Overlock 1 3.4	10 Tf 50 307 ¹
13	Nonrandom Selection and Multiple Blood Feeding of Human Hosts by Anopheles Vectors: Implications for Malaria Transmission in Papua New Guinea. American Journal of Tropical Medicine and Hygiene, 2021, 105, 1747-1758.	1.4	8
14	Community control strategies for scabies: A cluster randomised noninferiority trial. PLoS Medicine, 2021, 18, e1003849.	8.4	7
15	Infectivity of Symptomatic Malaria Patients to Anopheles farauti Colony Mosquitoes in Papua New Guinea. Frontiers in Cellular and Infection Microbiology, 2021, 11, 771233.	3.9	10
16	qRT-PCR versus IFA-based Quantification of Male and Female Gametocytes in Low-Density Plasmodium falciparum Infections and Their Relevance for Transmission. Journal of Infectious Diseases, 2020, 221, 598-607.	4.0	14
17	Monitoring <i>Plasmodium falciparum</i> and <i>Plasmodium vivax</i> using microsatellite markers indicates limited changes in population structure after substantial transmission decline in Papua New Guinea. Molecular Ecology, 2020, 29, 4525-4541.	3.9	15
18	Decreased bioefficacy of long-lasting insecticidal nets and the resurgence of malaria in Papua New Guinea. Nature Communications, 2020, 11, 3646.	12.8	30

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19	SNP barcodes provide higher resolution than microsatellite markers to measure Plasmodium vivax population genetics. Malaria Journal, 2020, 19, 375.	2.3	25
20	Utility of ultra-sensitive qPCR to detect Plasmodium falciparum and Plasmodium vivax infections under different transmission intensities. Malaria Journal, 2020, 19, 319.	2.3	15
21	The epidemiology of Plasmodium falciparum and Plasmodium vivax in East Sepik Province, Papua New Guinea, pre- and post-implementation of national malaria control efforts. Malaria Journal, 2020, 19, 198.	2.3	12
22	The safety of combined triple drug therapy with ivermectin, diethylcarbamazine and albendazole in the neglected tropical diseases co-endemic setting of Fiji: AÂcluster randomised trial. PLoS Neglected Tropical Diseases, 2020, 14, e0008106.	3.0	17
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33	Dosing pole recommendations for lymphatic filariasis elimination: A height-weight quantile regression modeling approach. PLoS Neglected Tropical Diseases, 2019, 13, e0007541.	3.0	12
34	Insecticide resistance status of Aedes aegypti and Aedes albopictus mosquitoes in Papua New Guinea. Parasites and Vectors, 2019, 12, 333.	2.5	54
35	A Randomized Open-Label Evaluation of the Antimalarial Prophylactic Efficacy of Azithromycin-Piperaquine versus Sulfadoxine-Pyrimethamine in Pregnant Papua New Guinean Women. Antimicrobial Agents and Chemotherapy, 2019, 63, .	3.2	11
36	Microscopic and submicroscopic Plasmodium falciparum infection, maternal anaemia and adverse pregnancy outcomes in Papua New Guinea: a cohort study. Malaria Journal, 2019, 18, 302.	2.3	16

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37	The safety of double- and triple-drug community mass drug administration for lymphatic filariasis: A multicenter, open-label, cluster-randomized study. PLoS Medicine, 2019, 16, e1002839.	8.4	66
38	Differential impact of malaria control interventions on P. falciparum and P. vivax infections in young Papua New Guinean children. BMC Medicine, 2019, 17, 220.	5.5	19
39	Repeated mosquito net distributions, improved treatment, and trends in malaria cases in sentinel health facilities in Papua New Guinea. Malaria Journal, 2019, 18, 364.	2.3	13
40	Point-of-care testing and treatment of sexually transmitted infections to improve birth outcomes in high-burden, low-income settings: Study protocol for a cluster randomized crossover trial (the) Tj ETQq0 0 0 rgBT	/ 0. serlock	11 0 3 Tf 50 6
41	Combining different diagnostic studies of lymphatic filariasis for risk mapping in Papua New Guinea: a predictive model from microfilaraemia and antigenaemia prevalence surveys. Tropical Medicine and Health, 2018, 46, 41.	2.8	3
42	A Trial of a Triple-Drug Treatment for Lymphatic Filariasis. New England Journal of Medicine, 2018, 379, 1801-1810.	27.0	132
43	Assessment of ultra-sensitive malaria diagnosis versus standard molecular diagnostics for malaria elimination: an in-depth molecular community cross-sectional study. Lancet Infectious Diseases, The, 2018, 18, 1108-1116.	9.1	81
44	Mathematical modelling of the impact of expanding levels of malaria control interventions on Plasmodium vivax. Nature Communications, 2018, 9, 3300.	12.8	59
45	Sustained Malaria Control Over an 8-Year Period in Papua New Guinea: The Challenge of Low-Density Asymptomatic Plasmodium Infections. Journal of Infectious Diseases, 2017, 216, 1434-1443.	4.0	41
46	Cost-effectiveness of artemisinin–naphthoquine versus artemether–lumefantrine for the treatment of uncomplicated malaria in Papua New Guinean children. Malaria Journal, 2017, 16, 438.	2.3	1
47	Naturally acquired antibody responses to more than 300 Plasmodium vivax proteins in three geographic regions. PLoS Neglected Tropical Diseases, 2017, 11, e0005888.	3.0	52
48	Insecticide-treated nets and malaria prevalence, Papua New Guinea, 2008–2014. Bulletin of the World Health Organization, 2017, 95, 695-705B.	3.3	33
49	The complex relationship of exposure to new Plasmodium infections and incidence of clinical malaria in Papua New Guinea. ELife, 2017, 6, .	6.0	32
50	Sensitive and accurate quantification of human malaria parasites using droplet digital PCR (ddPCR). Scientific Reports, 2016, 6, 39183.	3.3	90
51	Risk factors for Plasmodium falciparum and Plasmodium vivax gametocyte carriage in Papua New Guinean children with uncomplicated malaria. Acta Tropica, 2016, 160, 1-8.	2.0	10
52	Impact of Placental Malaria and Hypergammaglobulinemia on Transplacental Transfer of Respiratory Syncytial Virus Antibody in Papua New Guinea. Journal of Infectious Diseases, 2016, 213, 423-431.	4.0	40
53	A decline of Haemophilus influenzaetype b meningitis in Papua New Guinean children despite low vaccination coverage. Journal of Tropical Pediatrics, 2015, 61, 313-314.	1.5	O
54	Ultrasonographic assessment of splenic volume at presentation and after anti-malarial therapy in children with malarial anaemia. Malaria Journal, 2015, 14, 219.	2.3	12

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55	Significant geographical differences in prevalence of mutations associated with Plasmodium falciparum and Plasmodium vivax drug resistance in two regions from Papua New Guinea. Malaria Journal, 2015, 14, 399.	2.3	18
56	Strategies for Understanding and Reducing the Plasmodium vivax and Plasmodium ovale Hypnozoite Reservoir in Papua New Guinean Children: A Randomised Placebo-Controlled Trial and Mathematical Model. PLoS Medicine, 2015, 12, e1001891.	8.4	217
57	Population Pharmacokinetics, Tolerability, and Safety of Dihydroartemisinin-Piperaquine and Sulfadoxine-Pyrimethamine-Piperaquine in Pregnant and Nonpregnant Papua New Guinean Women. Antimicrobial Agents and Chemotherapy, 2015, 59, 4260-4271.	3.2	30
58	High numbers of circulating pigmented polymorphonuclear neutrophils as a prognostic marker for decreased birth weight during malaria in pregnancy. International Journal for Parasitology, 2015, 45, 107-111.	3.1	12
59	Proinflammatory Responses and Higher IL-10 Production by T Cells Correlate with Protection against Malaria during Pregnancy and Delivery Outcomes. Journal of Immunology, 2015, 194, 3275-3285.	0.8	19
60	Temporal changes in Plasmodium falciparum anti-malarial drug sensitivity in vitro and resistance-associated genetic mutations in isolates from Papua New Guinea. Malaria Journal, 2015, 14, 37.	2.3	17
61	Ultra-Sensitive Detection of Plasmodium falciparum by Amplification of Multi-Copy Subtelomeric Targets. PLoS Medicine, 2015, 12, e1001788.	8.4	276
62	Sulphadoxine-pyrimethamine plus azithromycin for the prevention of low birthweight in Papua New Guinea: a randomised controlled trial. BMC Medicine, 2015, 13, 9.	5.5	73
63	Artemether-lumefantrine versus artemisinin-naphthoquine in Papua New Guinean children with uncomplicated malaria: a six months post-treatment follow-up study. Malaria Journal, 2015, 14, 121.	2.3	8
64	Blood-Stage Parasitaemia and Age Determine Plasmodium falciparum and P. vivax Gametocytaemia in Papua New Guinea. PLoS ONE, 2015, 10, e0126747.	2.5	94
65	Artemisinin-Naphthoquine versus Artemether-Lumefantrine for Uncomplicated Malaria in Papua New Guinean Children: An Open-Label Randomized Trial. PLoS Medicine, 2014, 11, e1001773.	8.4	31
66	Pregnancy and Malaria Exposure Are Associated with Changes in the B Cell Pool and in Plasma Eotaxin Levels. Journal of Immunology, 2014, 193, 2971-2983.	0.8	34
67	Comparison of an assumed versus measured leucocyte count in parasite density calculations in Papua New Guinean children with uncomplicated malaria. Malaria Journal, 2014, 13, 145.	2.3	26
68	Reduced Risk of Plasmodium vivax Malaria in Papua New Guinean Children with Southeast Asian Ovalocytosis in Two Cohorts and a Case-Control Study. PLoS Medicine, 2012, 9, e1001305.	8.4	53
69	Rapid Diagnostic Test–Based Management of Malaria: An Effectiveness Study in Papua New Guinean Infants With Plasmodium falciparum and Plasmodium vivax Malaria. Clinical Infectious Diseases, 2012, 54, 644-651.	5.8	31
70	Piperaquine Pharmacokinetic and Pharmacodynamic Profiles in Healthy Volunteers of Papua New Guinea after Administration of Three-Monthly Doses of Dihydroartemisinin–Piperaquine. Antimicrobial Agents and Chemotherapy, 0, , .	3.2	0