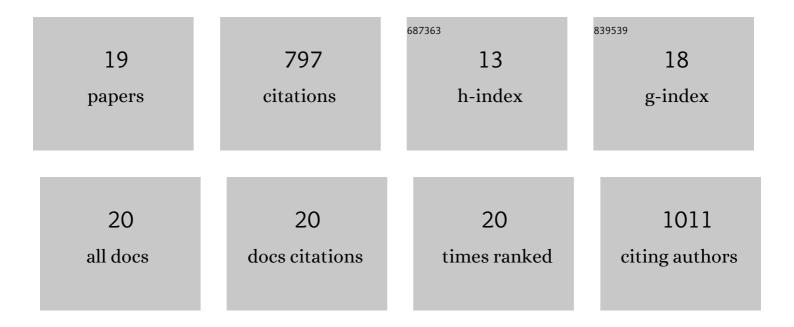
Pierre Kalfon

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/2440236/publications.pdf Version: 2024-02-01



#	Article	IF	CITATIONS
1	Tight computerized versus conventional glucose control in the ICU: a randomized controlled trial. Intensive Care Medicine, 2014, 40, 171-181.	8.2	120
2	Meta-analysis of subclavian insertion and nontunneled central venous catheter-associated infection risk reduction in critically ill adults*. Critical Care Medicine, 2012, 40, 1627-1634.	0.9	96
3	Continuous glucose monitoring in the ICU: clinical considerations and consensus. Critical Care, 2017, 21, 197.	5.8	96
4	Comparison of silver-impregnated with standard multi-lumen central venous catheters in critically ill patients*. Critical Care Medicine, 2007, 35, 1032-1039.	0.9	80
5	Glucose Control in the ICU. Journal of Diabetes Science and Technology, 2016, 10, 1372-1381.	2.2	64
6	Glycemic Control in the Intensive Care Unit and during the Postoperative Period. Anesthesiology, 2011, 114, 438-444.	2.5	63
7	Development and validation of a questionnaire for quantitative assessment of perceived discomforts in critically ill patients. Intensive Care Medicine, 2010, 36, 1751-1758.	8.2	59
8	Improving glycemic control in critically ill patients: personalized care to mimic the endocrine pancreas. Critical Care, 2018, 22, 182.	5.8	42
9	Severe and multiple hypoglycemic episodes are associated with increased risk of death in ICU patients. Critical Care, 2015, 19, 153.	5.8	37
10	Effects of tight computerized glucose control on neurological outcome in severely brain injured patients: a multicenter sub-group analysis of the randomized-controlled open-label CGAO-REA study. Critical Care, 2014, 18, 498.	5.8	29
11	Tailored multicomponent program for discomfort reduction in critically ill patients may decrease post-traumatic stress disorder in general ICU survivors at 1Âyear. Intensive Care Medicine, 2019, 45, 223-235.	8.2	22
12	A tailored multicomponent program to reduce discomfort in critically ill patients: a cluster-randomized controlled trial. Intensive Care Medicine, 2017, 43, 1829-1840.	8.2	20
13	Adjuvant therapies in critical care: music therapy. Intensive Care Medicine, 2018, 44, 1929-1931.	8.2	16
14	Reduction of self-perceived discomforts in critically ill patients in French intensive care units: study protocol for a cluster-randomized controlled trial. Trials, 2016, 17, 87.	1.6	15
15	Tight glucose control: should we move from intensive insulin therapy alone to modulation of insulin and nutritional inputs?. Critical Care, 2008, 12, 156.	5.8	13
16	Assessment of patients' self-perceived intensive care unit discomforts: Validation of the 18-item version of the IPREA. Health and Quality of Life Outcomes, 2019, 17, 29.	2.4	10
17	Risk factors and events in the adult intensive care unit associated with pain as self-reported at the end of the intensive care unit stay. Critical Care, 2020, 24, 685.	5.8	9
18	Subglottic secretion drainage in prevention of ventilator-associated pneumonia: mind the gap between studies and reality. Critical Care, 2013, 17, R286.	5.8	5

#	Article	IF	CITATIONS
19	Impact of a Postintensive Care Unit Multidisciplinary Follow-up on the Quality of Life (SUIVI-REA): Protocol for a Multicenter Randomized Controlled Trial. JMIR Research Protocols, 2022, 11, e30496.	1.0	1