Knut Lönnroth

List of Publications by Year in descending order

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138 11,644 48
papers citations h-inde

44069
48
104
h-index
g-index

139 139 all docs citations

139 times ranked 9530 citing authors

#	Article	IF	Citations
1	WHO's new End TB Strategy. Lancet, The, 2015, 385, 1799-1801.	13.7	834
2	Drivers of tuberculosis epidemics: The role of risk factors and social determinants. Social Science and Medicine, 2009, 68, 2240-2246.	3.8	775
3	Tuberculosis control and elimination 2010–50: cure, care, and social development. Lancet, The, 2010, 375, 1814-1829.	13.7	697
4	The impact of diabetes on tuberculosis treatment outcomes: A systematic review. BMC Medicine, 2011, 9, 81.	5 . 5	622
5	Towards tuberculosis elimination: an action framework for low-incidence countries. European Respiratory Journal, 2015, 45, 928-952.	6.7	608
6	Management of latent <i>Mycobacterium tuberculosis</i> infection: WHO guidelines for low tuberculosis burden countries. European Respiratory Journal, 2015, 46, 1563-1576.	6.7	475
7	Financial burden for tuberculosis patients in low- and middle-income countries: a systematic review. European Respiratory Journal, 2014, 43, 1763-1775.	6.7	423
8	Alcohol use as a risk factor for tuberculosis – a systematic review. BMC Public Health, 2008, 8, 289.	2.9	382
9	A consistent log-linear relationship between tuberculosis incidence and body mass index. International Journal of Epidemiology, 2010, 39, 149-155.	1.9	323
10	The association between alcohol use, alcohol use disorders and tuberculosis (TB). A systematic review. BMC Public Health, 2009, 9, 450.	2.9	319
11	Scaling up interventions to achieve global tuberculosis control: progress and new developments. Lancet, The, 2012, 379, 1902-1913.	13.7	300
12	Trends in tuberculosis incidence and their determinants in 134 countries. Bulletin of the World Health Organization, 2009, 87, 683-691.	3. 3	282
13	Tuberculosis comorbidity with communicable and non-communicable diseases: integrating health services and control efforts. Lancet Infectious Diseases, The, 2013, 13, 436-448.	9.1	246
14	Global Epidemiology of Tuberculosis: Prospects for Control. Seminars in Respiratory and Critical Care Medicine, 2008, 29, 481-491.	2.1	240
15	The benefits to communities and individuals of screening for active tuberculosis disease: a systematic review [State of the art series. Case finding/screening. Number 2 in the series]. International Journal of Tuberculosis and Lung Disease, 2013, 17, 432-446.	1.2	206
16	Global tuberculosis control: lessons learnt and future prospects. Nature Reviews Microbiology, 2012, 10, 407-416.	28.6	199
17	Improving tuberculosis prevention and care through addressing the global diabetes epidemic: from evidence to policy and practice. Lancet Diabetes and Endocrinology, the, 2014, 2, 730-739.	11.4	194
18	Defining Catastrophic Costs and Comparing Their Importance for Adverse Tuberculosis Outcome with Multi-Drug Resistance: A Prospective Cohort Study, Peru. PLoS Medicine, 2014, 11, e1001675.	8.4	187

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19	Bi-directional screening for tuberculosis and diabetes: a systematic review. Tropical Medicine and International Health, 2010, 15, 1300-1314.	2.3	172
20	Alcohol consumption as a risk factor for tuberculosis: meta-analyses and burden of disease. European Respiratory Journal, 2017, 50, 1700216.	6.7	170
21	MDR Tuberculosis â€" Critical Steps for Prevention and Control. New England Journal of Medicine, 2010, 363, 1050-1058.	27.0	168
22	Systematic screening for active tuberculosis: rationale, definitions and key considerations [State of the art series. Active case finding/screening. Number 1 in the series]. International Journal of Tuberculosis and Lung Disease, 2013, 17, 289-298.	1.2	138
23	The WHO's new End TB Strategy in the post-2015 era of the Sustainable Development Goals. Transactions of the Royal Society of Tropical Medicine and Hygiene, 2016, 110, 148-150.	1.8	132
24	Tuberculosis and noncommunicable diseases: neglected links and missed opportunities. European Respiratory Journal, 2011, 37, 1269-1282.	6.7	116
25	Improving tuberculosis control through public-private collaboration in India: literature review. BMJ: British Medical Journal, 2006, 332, 574-578.	2.3	115
26	Beyond UHC: Monitoring Health and Social Protection Coverage in the Context of Tuberculosis Care and Prevention. PLoS Medicine, 2014, 11, e1001693.	8.4	110
27	The impact of social protection and poverty elimination on global tuberculosis incidence: a statistical modelling analysis of Sustainable Development Goal 1. The Lancet Global Health, 2018, 6, e514-e522.	6.3	110
28	The effect of diabetes and undernutrition trends on reaching 2035 global tuberculosis targets. Lancet Diabetes and Endocrinology,the, 2014, 2, 754-764.	11.4	102
29	The looming epidemic of diabetes-associated tuberculosis: learning lessons from HIV-associated tuberculosis. International Journal of Tuberculosis and Lung Disease, 2011, 15, 1436-1445.	1.2	97
30	Free tuberculosis diagnosis and treatment are not enough: patient cost evidence from three continents. International Journal of Tuberculosis and Lung Disease, 2013, 17, 381-387.	1.2	95
31	What are the obstacles to generic substitution? An assessment of the behaviour of prescribers, patients and pharmacies during the first year of generic substitution in Sweden. Pharmacoepidemiology and Drug Safety, 2005, 14, 341-348.	1.9	89
32	Screening of patients with tuberculosis for diabetes mellitus in China. Tropical Medicine and International Health, 2012, 17, 1294-1301.	2.3	85
33	Association between spending on social protection and tuberculosis burden: a global analysis. Lancet Infectious Diseases, The, 2016, 16, 473-479.	9.1	84
34	Cost and cost-effectiveness of PPM-DOTS for tuberculosis control: evidence from India. Bulletin of the World Health Organization, 2006, 84, 437-445.	3.3	82
35	Social franchising of TB care through private GPs in Myanmar: an assessment of treatment results, access, equity and financial protection. Health Policy and Planning, 2007, 22, 156-166.	2.7	80
36	Screening of patients with tuberculosis for diabetes mellitus in <scp>I</scp> ndia. Tropical Medicine and International Health, 2013, 18, 636-645.	2.3	78

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37	Defining the research agenda to reduce the joint burden of disease from Diabetes mellitus and Tuberculosis. Tropical Medicine and International Health, 2010, 15, 659-663.	2.3	76
38	Screening patients with Diabetes Mellitus for Tuberculosis in China. Tropical Medicine and International Health, 2012, 17, 1302-1308.	2.3	75
39	Addressing diabetes mellitus as part of the strategy for ending TB. Transactions of the Royal Society of Tropical Medicine and Hygiene, 2016, 110, 173-179.	1.8	68
40	Can I afford free treatment?: Perceived consequences of health care provider choices among people with tuberculosis in Ho Chi Minh City, Vietnam. Social Science and Medicine, 2001, 52, 935-948.	3.8	65
41	Diabetes mellitus and tuberculosis: programmatic management issues. International Journal of Tuberculosis and Lung Disease, 2015, 19, 879-886.	1.2	62
42	Screening of patients with diabetes mellitus for tuberculosis in <scp>I</scp> ndia. Tropical Medicine and International Health, 2013, 18, 646-654.	2.3	60
43	Mental health disorders, social stressors, and health-related quality of life in patients with multidrug-resistant tuberculosis: A systematic review and meta-analysis. Journal of Infection, 2018, 77, 357-367.	3.3	60
44	Planning to improve global health: the next decade of tuberculosis control. Bulletin of the World Health Organization, 2007, 85, 341-347.	3.3	59
45	Multidrug-resistant tuberculosis and migration to Europe. Clinical Microbiology and Infection, 2017, 23, 141-146.	6.0	58
46	Hard gains through soft contracts: productive engagement of private providers in tuberculosis control. Bulletin of the World Health Organization, 2006, 84, 876-883.	3.3	58
47	Nutrition, Diabetes and Tuberculosis in the Epidemiological Transition. PLoS ONE, 2011, 6, e21161.	2.5	57
48	Turning liabilities into resources: informal village doctors and tuberculosis control in Bangladesh. Bulletin of the World Health Organization, 2006, 84, 479-484.	3.3	57
49	Do policy changes in the pharmaceutical reimbursement schedule affect drug expenditures?. Health Policy, 2006, 79, 231-243.	3.0	50
50	Translational Research for Tuberculosis Elimination: Priorities, Challenges, and Actions. PLoS Medicine, 2016, 13, e1001965.	8.4	50
51	Towards cash transfer interventions for tuberculosis prevention, care and control: key operational challenges and research priorities. BMC Infectious Diseases, 2016, 16, 307.	2.9	50
52	Choosing algorithms for TB screening: a modelling study to compare yield, predictive value and diagnostic burden. BMC Infectious Diseases, 2014, 14, 532.	2.9	49
53	Utilization of private and public health-care providers for tuberculosis symptoms in Ho Chi Minh City, Vietnam. Health Policy and Planning, 2001, 16, 47-54.	2.7	47
54	Independent evaluation of 12 artificial intelligence solutions for the detection of tuberculosis. Scientific Reports, 2021 , 11 , 23895 .	3.3	46

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55	TB sequel: incidence, pathogenesis and risk factors of long-term medical and social sequelae of pulmonary TB $\hat{a}\in$ " a study protocol. BMC Pulmonary Medicine, 2019, 19, 4.	2.0	45
56	Programmatic approaches to screening for active tuberculosis [State of the art series. Active case finding/screening. Number 6 in the series]. International Journal of Tuberculosis and Lung Disease, 2013, 17, 1248-1256.	1.2	42
57	Catastrophic costs potentially averted by tuberculosis control in India and South Africa: a modelling study. The Lancet Global Health, 2017, 5, e1123-e1132.	6.3	41
58	Computer-aided reading of tuberculosis chest radiography: moving the research agenda forward to inform policy. European Respiratory Journal, 2017, 50, 1700953.	6.7	40
59	What can dissaving tell us about catastrophic costs? Linear and logistic regression analysis of the relationship between patient costs and financial coping strategies adopted by tuberculosis patients in Bangladesh, Tanzania and Bangalore, India. BMC Health Services Research, 2015, 15, 476.	2.2	39
60	Food for thought: addressing undernutrition to end tuberculosis. Lancet Infectious Diseases, The, 2021, 21, e318-e325.	9.1	39
61	Spatial pattern of private health care provision in Ujjain, India: a provider survey processed and analysed with a Geographical Information System. Health Policy, 2004, 68, 211-222.	3.0	38
62	Using pooled budgets to integrate health and welfare services: a comparison of experiments in England and Sweden. Health and Social Care in the Community, 2005, 13, 531-541.	1.6	38
63	The role of active case finding in reducing patient incurred catastrophic costs for tuberculosis in Nepal. Infectious Diseases of Poverty, 2019, 8, 99.	3.7	38
64	Comparison of two cash transfer strategies to prevent catastrophic costs for poor tuberculosis-affected households in low- and middle-income countries: An economic modelling study. PLoS Medicine, 2017, 14, e1002418.	8.4	37
65	Economic Support to Patients in HIV and TB Grants in Rounds 7 and 10 from the Global Fund to Fight AIDS, Tuberculosis and Malaria. PLoS ONE, 2014, 9, e86225.	2.5	35
66	China Tuberculosis Policy at Crucial Crossroads: Comparing the Practice of Different Hospital and Tuberculosis Control Collaboration Models Using Survey Data. PLoS ONE, 2014, 9, e90596.	2.5	35
67	Diabetes and tuberculosis co-epidemic: the Bali Declaration. Lancet Diabetes and Endocrinology,the, 2016, 4, 8-10.	11.4	34
68	Income security during public health emergencies: the COVID-19 poverty trap in Vietnam. BMJ Global Health, 2020, 5, e002504.	4.7	34
69	Factors influencing active tuberculosis case-finding policy development and implementation: a scoping review. BMJ Open, 2019, 9, e031284.	1.9	33
70	Socio Economic Position in TB Prevalence and Access to Services: Results from a Population Prevalence Survey and a Facility-Based Survey in Bangladesh. PLoS ONE, 2012, 7, e44980.	2.5	32
71	Build back stronger universal health coverage systems after the COVID-19 pandemic: the need for better governance and linkage with universal social protection. BMJ Global Health, 2020, 5, e004020.	4.7	32
72	Risks and benefits of private health care: exploring physicians' views on private health care in Ho Chi Minh City, Vietnam. Health Policy, 1998, 45, 81-97.	3.0	28

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73	Co-financing as a means to improve collaboration between primary health care, social insurance and social service in Sweden. A qualitative study of collaboration experiences among rehabilitation partners. Health Policy, 2003, 64, 143-152.	3.0	27
74	The Financial Burden of Tuberculosis for Patients in the Western-Pacific Region. Tropical Medicine and Infectious Disease, 2019, 4, 94.	2.3	27
75	Interventions to improve adherence to treatment for paediatric tuberculosis in low- and middle-income countries: a systematic review and meta-analysis. Bulletin of the World Health Organization, 2015, 93, 700-711B.	3.3	27
76	Interdisciplinary collaboration between primary care, social insurance and social services in the rehabilitation of people with musculoskeletal disorder: Effects on self-rated health and physical performance. Journal of Interprofessional Care, 2005, 19, 115-124.	1.7	25
77	Association of Tuberculosis With Household Catastrophic Expenditure in South India. JAMA Network Open, 2020, 3, e1920973.	5.9	25
78	A comparative impact evaluation of two human resource models for community-based active tuberculosis case finding in Ho Chi Minh City, Viet Nam. BMC Public Health, 2020, 20, 934.	2.9	24
79	Income security during periods of ill health: a scoping review of policies, practice and coverage in low-income and middle-income countries. BMJ Global Health, 2020, 5, e002425.	4.7	23
80	Global Fund financing of public–private mix approaches for delivery of tuberculosis care. Tropical Medicine and International Health, 2011, 16, 685-692.	2.3	21
81	Cameroon's multidrug-resistant tuberculosis treatment programme jeopardised by cross-border migration. European Respiratory Journal, 2016, 47, 686-688.	6.7	17
82	Uptake of governmental social protection and financial hardship during drug-resistant tuberculosis treatment in Rio de Janeiro, Brazil. European Respiratory Journal, 2018, 51, 1800274.	6.7	17
83	Barriers and facilitators to accessing tuberculosis care in Nepal: a qualitative study to inform the design of a socioeconomic support intervention. BMJ Open, 2021, 11, e049900.	1.9	17
84	Tuberculosis and poverty: what is being done [Counterpoint]. International Journal of Tuberculosis and Lung Disease, 2011, 15, 431-432.	1.2	16
85	The international study on alcohol and infectious diseases: three priorities for research. Addiction, 2013, 108, 1-2.	3.3	16
86	Towards tackling tuberculosis in vulnerable groups in the European Union: the E-DETECT TB consortium. European Respiratory Journal, 2018, 51, 1702604.	6.7	15
87	Pre-entry, post-entry, or no tuberculosis screening?. Lancet Infectious Diseases, The, 2014, 14, 1171-1172.	9.1	14
88	The long and winding road of chest radiography for tuberculosis detection. European Respiratory Journal, 2017, 49, 1700364.	6.7	13
89	†Power plays plus push': experts' insights into the development and implementation of active tuberculosis case-finding policies globally, a qualitative study. BMJ Open, 2020, 10, e036285.	1.9	13
90	Enhanced Private Sector Engagement for Tuberculosis Diagnosis and Reporting through an Intermediary Agency in Ho Chi Minh City, Viet Nam. Tropical Medicine and Infectious Disease, 2020, 5, 143.	2.3	13

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91	How to reduce household costs for people with tuberculosis: a longitudinal costing survey in Nepal. Health Policy and Planning, 2021, 36, 594-605.	2.7	13
92	Chest radiography for tuberculosis screening is back on the agenda [Editorial]. International Journal of Tuberculosis and Lung Disease, 2012, 16, 1421-1422.	1.2	12
93	Determinants of household catastrophic costs for drug sensitive tuberculosis patients in Kenya. Infectious Diseases of Poverty, 2021, 10, 95.	3.7	12
94	Socio-protective effects of active case finding on catastrophic costs from tuberculosis in Ho Chi Minh City, Viet Nam: a longitudinal patient cost survey. BMC Health Services Research, 2021, 21, 1051.	2.2	12
95	Editorial: MDR and XDR – the price of delaying engagement with all care providers for control of TB and TB/HIV. Tropical Medicine and International Health, 2007, 12, 473-474.	2.3	11
96	Quality of life of patients on treatment for latent tuberculosis infection: a mixed-method study in Stockholm, Sweden. Health and Quality of Life Outcomes, 2019, 17, 158.	2.4	11
97	Evaluating the yield of systematic screening for tuberculosis among three priority groups in Ho Chi Minh City, Viet Nam. Infectious Diseases of Poverty, 2020, 9, 166.	3.7	10
98	Cost-effectiveness of the latent tuberculosis screening program for migrants in Stockholm Region. European Journal of Health Economics, 2021, 22, 445-454.	2.8	10
99	Toward Tuberculosis Elimination in Low-Incidence Countries: Reflections From a Global Consultation. Annals of Internal Medicine, 2014, 161, 670.	3.9	9
100	Numbers needed to treat to prevent tuberculosis. European Respiratory Journal, 2015, 46, 1838-1839.	6.7	9
101	Building a European database to gather multi-country evidence on active and latent TB screening for migrants. International Journal of Infectious Diseases, 2019, 80, S45-S49.	3.3	9
102	Income security in times of ill health: the next frontier for the SDGs. BMJ Global Health, 2020, 5, e002493.	4.7	9
103	Active case-finding policy development, implementation and scale-up in high-burden countries: A mixed-methods survey with National Tuberculosis Programme managers and document review. PLoS ONE, 2020, 15, e0240696.	2.5	9
104	Sequelae of multidrug-resistant tuberculosis: protocol for a systematic review and meta-analysis. BMJ Open, 2018, 8, e019593.	1.9	8
105	Capitalizing on facilitators and addressing barriers when implementing active tuberculosis case-finding in six districts of Ho Chi Minh City, Vietnam: a qualitative study with key stakeholders. Implementation Science, 2021, 16, 54.	6.9	8
106	State-of-the-art series on tuberculosis and migration. International Journal of Tuberculosis and Lung Disease, 2016, 20, 1280-1281.	1.2	7
107	What value for whom? $\hat{a}\in$ provider perspectives on health examinations for asylum seekers in Stockholm, Sweden. BMC Health Services Research, 2018, 18, 601.	2.2	7
108	Development and validation of a prediction model for active tuberculosis case finding among HIV-negative/unknown populations. Scientific Reports, 2019, 9, 6143.	3.3	7

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109	Comparative Yield of Tuberculosis during Active Case Finding Using GeneXpert or Smear Microscopy for Diagnostic Testing in Nepal: A Cross-Sectional Study. Tropical Medicine and Infectious Disease, 2021, 6, 50.	2.3	7
110	Research protocol for a mixed-methods study to characterise and address the socioeconomic impact of accessing TB diagnosis and care in Nepal. Wellcome Open Research, 2020, 5, 19.	1.8	7
111	Tuberculosis control. Lancet, The, 2016, 387, 1159-1160.	13.7	6
112	Medical expenditures: not the only source of financial hardship. The Lancet Global Health, 2020, 8, e336.	6.3	6
113	Adaptation of WHO's generic tuberculosis patient cost instrument for a longitudinal study in Africa. Global Health Action, 2021, 14, 1865625.	1.9	6
114	A double-edged sword': Perceived benefits and harms of active case-finding for people with presumptive tuberculosis and communities—A qualitative study based on expert interviews. PLoS ONE, 2021, 16, e0247568.	2.5	5
115	Building on facilitators and overcoming barriers to implement active tuberculosis case-finding in Nepal, experiences of community health workers and people with tuberculosis. BMC Health Services Research, 2021, 21, 295.	2.2	5
116	Mass prophylaxis of tuberculosis through social protection. Lancet Infectious Diseases, The, 2014, 14, 1032-1034.	9.1	4
117	†Valuable but incomplete!' A qualitative study about migrants' perspective on health examinations in Stockholm. International Health, 2018, 10, 191-196.	2.0	4
118	Diagnostic pathways and delay among tuberculosis patients in Stockholm, Sweden: a retrospective observational study. BMC Public Health, 2019, 19, 151.	2.9	4
119	Colliding epidemics requires collaborating programmes. Lancet Diabetes and Endocrinology,the, 2015, 3, 306-307.	11.4	3
120	Evaluation of the latent tuberculosis screening and treatment strategy for asylum seekers in Stockholm, Sweden 2015–2018: a record linkage study of the care cascade. European Respiratory Journal, 2021, 57, 2002255.	6.7	3
121	Barriers and enablers to implementing tuberculosis control strategies in EU and European Economic Area countries: a systematic review. Lancet Infectious Diseases, The, 2021, 21, e272-e280.	9.1	3
122	A descriptive study of TB cases finding practices in the three largest public general hospitals in Vietnam. BMC Public Health, 2012, 12, 808.	2.9	2
123	Cured and starved: food for thought [Editorial]. Public Health Action, 2013, 3, 95-95.	1.2	1
124	Experiences of conditional and unconditional cash transfers intended for improving health outcomes and health service use: a qualitative evidence synthesis. The Cochrane Library, 0, , .	2.8	1
125	PHP17 EFFECTS OF GENERIC SUBSTITUTION ON THE DEVELOPMENT OF PHARMACEUTICAL EXPENDITURES DURING THE PERIOD JANUARY I 998 TO MAY 2005. Value in Health, 2005, 8, A186.	0.3	0
126	PHP22 EFFECTS OF DECENTRALIZED RESPONSIBILITY FOR COSTS OF OUTPATIENT PRESCRIPTION DRUGS ON THE PHARMACEUTICAL COST DEVELOPMENT IN SWEDEN. Value in Health, 2005, 8, A187.	0.3	0

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127	Response to letter from Sarah Bailey and Peter Godfrey-Faussett. Tropical Medicine and International Health, 2010, 15, 1402-1402.	2.3	0
128	Here is diabetes in The Lancet's tuberculosis Series!. Lancet, The, 2010, 376, 1987-1988.	13.7	0
129	Costs of diagnostic algorithms: whose perspective counts?. International Journal of Tuberculosis and Lung Disease, 2015, 19, 878-878.	1.2	0
130	In TB patients from Peruvian shantytowns, catastrophic costs explain as many adverse TB outcomes as MDR TB. Journal of Infection, 2015, 71, 684.	3.3	0
131	Response to Letter to the Editor by M. van der Werf, V. Hollo and C. Ködmön concerning 'ultidrug-resistant tuberculosis and migration to Europe'. Clinical Microbiology and Infection, 2017, 23, 580.	6.0	0
132	Reflections on the State of the Art series on TB and migration, and the way forward. International Journal of Tuberculosis and Lung Disease, 2018, 22, 829-829.	1.2	0
133	Title is missing!. , 2020, 15, e0240696.		0
134	Title is missing!. , 2020, 15, e0240696.		0
135	Title is missing!. , 2020, 15, e0240696.		0
136	Title is missing!. , 2020, 15, e0240696.		0
137	Title is missing!. , 2020, 15, e0240696.		0
138	Title is missing!. , 2020, 15, e0240696.		0