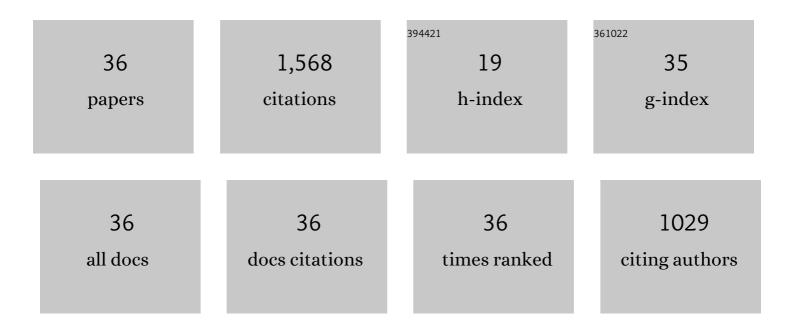
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List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	Epidemiologic and Economic Burden of Achalasia in the United States. Clinical Gastroenterology and Hepatology, 2022, 20, 342-352.e5.	4.4	23
2	Gender and Nationality Trends in Manuscripts Published in Prominent Gastroenterology Journals Between 1997 and 2017. Digestive Diseases and Sciences, 2022, 67, 367-376.	2.3	7
3	Determination of a treatment response threshold for the Eosinophilic Esophagitis Endoscopic Reference Score. Endoscopy, 2022, 54, 635-643.	1.8	13
4	Autoimmune and viral risk factors are associated with achalasia: A case ontrol study. Neurogastroenterology and Motility, 2022, 34, e14312.	3.0	14
5	Surveillance after Treatment of Barrett's Esophagus Benefits Those with High-Grade Dysplasia or Intramucosal Cancer Most. American Journal of Gastroenterology, 2022, Publish Ahead of Print, .	0.4	1
6	Posttreatment Gene Scores Support Histologic and Endoscopic Response Thresholds in Eosinophilic Esophagitis. American Journal of Gastroenterology, 2022, 117, 1519-1522.	0.4	2
7	A Model Using Clinical and Endoscopic Characteristics Identifies Patients at Risk for Eosinophilic Esophagitis According to Updated Diagnostic Guidelines. Clinical Gastroenterology and Hepatology, 2021, 19, 1824-1834.e2.	4.4	11
8	Lack of lodine Staining Lugol's Chromoendoscopy Predicts Squamous Neoplastic Progression in a High-risk Region of China: Implications for East and West. Clinical Gastroenterology and Hepatology, 2020, 18, 1439-1441.	4.4	0
9	Radiofrequency Ablation of Barrett's Esophagus: Have We Gone Too Far, or Not Far Enough?. Current Gastroenterology Reports, 2020, 22, 29.	2.5	1
10	Overutilization of Endoscopic Surveillance in Barrett's Esophagus: The Perils of Too Much of a Good Thing. American Journal of Gastroenterology, 2020, 115, 1019-1021.	0.4	3
11	Relationship Between Housing Components and Development of Eosinophilic Esophagitis. Digestive Diseases and Sciences, 2020, 65, 3624-3630.	2.3	13
12	Dilation Modifies Association Between Symptoms and Esophageal Eosinophilia in Adult Patients With Eosinophilic Esophagitis. American Journal of Gastroenterology, 2020, 115, 2098-2102.	0.4	16
13	Risk of Upper Gastrointestinal Bleeding and Gastroduodenal Ulcers in Persons With Schizophrenia: A Danish Cohort Study. Clinical and Translational Gastroenterology, 2019, 10, e00005.	2.5	5
14	Illuminating Elimination Diets: Controversies Regarding Dietary Treatment of Eosinophilic Esophagitis. Digestive Diseases and Sciences, 2019, 64, 1401-1408.	2.3	20
15	Development of Evidence-Based Surveillance Intervals After Radiofrequency Ablation of Barrett's Esophagus. Gastroenterology, 2018, 155, 316-326.e6.	1.3	60
16	Optimal Histologic Cutpoints for Treatment Response in Patients With Eosinophilic Esophagitis: Analysis of Data From a Prospective Cohort Study. Clinical Gastroenterology and Hepatology, 2018, 16, 226-233.e2.	4.4	88
17	Higher Rate of Barrett's Detection in the First Year After Successful Endoscopic Therapy: Meta-analysis. American Journal of Gastroenterology, 2018, 113, 959-971.	0.4	35
18	Late Recurrence of Barrett's Esophagus After Complete Eradication of Intestinal Metaplasia is Rare: Final Report From Ablation in Intestinal Metaplasia Containing Dysplasia Trial. Gastroenterology, 2017, 153, 681-688.e2.	1.3	99

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#	Article	IF	CITATIONS
19	Six-Food Elimination Diet and Topical Steroids are Effective for Eosinophilic Esophagitis: A Meta-Regression. Digestive Diseases and Sciences, 2017, 62, 2408-2420.	2.3	70
20	Patients With Barrett's Esophagus and Confirmed Persistent Low-Grade Dysplasia Are at Increased Risk for Progression toÂNeoplasia. Gastroenterology, 2017, 152, 993-1001.e1.	1.3	91
21	Cost Utility Analysis of Topical Steroids Compared With Dietary Elimination for Treatment of Eosinophilic Esophagitis. Clinical Gastroenterology and Hepatology, 2017, 15, 841-849.e1.	4.4	36
22	Causes and Outcomes of Esophageal Perforation in Eosinophilic Esophagitis. Journal of Clinical Gastroenterology, 2017, 51, 805-813.	2.2	28
23	Clinical Outcomes Following Recurrence of Intestinal Metaplasia After Successful Treatment of Barrett's Esophagus With Radiofrequency Ablation. American Journal of Gastroenterology, 2017, 112, 87-94.	0.4	57
24	Association Between Body Mass Index and Clinical and Endoscopic Features of Eosinophilic Esophagitis. Digestive Diseases and Sciences, 2017, 62, 143-149.	2.3	20
25	The extremely narrow-caliber esophagus is a treatment-resistant subphenotype of eosinophilic esophagitis. Gastrointestinal Endoscopy, 2016, 83, 1142-1148.	1.0	72
26	Hormonal Contraception Use is Common Among Patients with Inflammatory Bowel Diseases and an Elevated Risk of Deep Vein Thrombosis. Inflammatory Bowel Diseases, 2016, 22, 1631-1638.	1.9	11
27	Outcomes of Esophageal Dilation in Eosinophilic Esophagitis: Safety, Efficacy, and Persistence of the Fibrostenotic Phenotype. American Journal of Gastroenterology, 2016, 111, 206-213.	0.4	96
28	Accuracy of the Eosinophilic Esophagitis Endoscopic Reference Score in Diagnosis and Determining Response to Treatment. Clinical Gastroenterology and Hepatology, 2016, 14, 31-39.	4.4	182
29	Recurrent intestinal metaplasia after radiofrequency ablation for Barrett's esophagus: endoscopic findings and anatomic location. Gastrointestinal Endoscopy, 2015, 81, 1362-1369.	1.0	53
30	Predictors of Response to Steroid Therapy for Eosinophilic Esophagitis and Treatment of Steroid-Refractory Patients. Clinical Gastroenterology and Hepatology, 2015, 13, 452-458.	4.4	80
31	The Role of Environmental Exposures in the Etiology of Eosinophilic Esophagitis. Mayo Clinic Proceedings, 2015, 90, 1400-1410.	3.0	19
32	Spatial Predisposition of Dysplasia in Barrett's Esophagus Segments: A Pooled Analysis of the SURF and AIM Dysplasia Trials. American Journal of Gastroenterology, 2015, 110, 1412-1419.	0.4	14
33	Evaluation of Histologic Cutpoints for Treatment Response in Eosinophilic Esophagitis. Journal of Gastroenterology and Hepatology Research, 2015, 4, 1780-1787.	0.2	61
34	Safety and Efficacy of Endoscopic Mucosal Therapy With Radiofrequency Ablation for Patients With Neoplastic Barrett's Esophagus. Clinical Gastroenterology and Hepatology, 2013, 11, 636-642.	4.4	109
35	Intestinal Metaplasia Recurs Infrequently in Patients Successfully Treated for Barrett's Esophagus With Radiofrequency Ablation. American Journal of Gastroenterology, 2013, 108, 187-195.	0.4	91
36	Focal endoscopic mucosal resection before radiofrequency ablation is equally effective and safe compared with radiofrequency ablation alone for the eradication of Barrett's esophagus with advanced neoplasia. Gastrointestinal Endoscopy, 2012, 76, 733-739.	1.0	67