Adrian P Mander

List of Publications by Year
in descending order

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85 papers	3,791 citations	185998 28 h-index	128067 60 g-index
85 all docs	85 docs citations	85 times ranked	6242 citing authors

#	Article	IF	Citations
1	Ferrous Sulfate Supplementation Causes Significant Gastrointestinal Side-Effects in Adults: A Systematic Review and Meta-Analysis. PLoS ONE, 2015, 10, e0117383.	1.1	476
2	Primary care referral to a commercial provider for weight loss treatment versus standard care: a randomised controlled trial. Lancet, The, 2011, 378, 1485-1492.	6.3	360
3	Incorporation of eicosapentaenoic and docosahexaenoic acids into lipid pools when given as supplements providing doses equivalent to typical intakes of oily fish. American Journal of Clinical Nutrition, 2012, 96, 748-758.	2.2	269
4	Energy-dense, low-fiber, high-fat dietary pattern is associated with increased fatness in childhood. American Journal of Clinical Nutrition, 2008, 87, 846-854.	2.2	248
5	Extended and standard duration weight-loss programme referrals for adults in primary care (WRAP): a randomised controlled trial. Lancet, The, 2017, 389, 2214-2225.	6.3	161
6	Is sugar-sweetened beverage consumption associated with increased fatness in children?. Nutrition, 2007, 23, 557-563.	1.1	160
7	HLA-DR 15 is associated with female sex and younger age at diagnosis in multiple sclerosis. Journal of Neurology, Neurosurgery and Psychiatry, 2002, 72, 184-187.	0.9	144
8	Accelerated longitudinal designs: An overview of modelling, power, costs and handling missing data. Statistical Methods in Medical Research, 2017, 26, 374-398.	0.7	122
9	Regulatory T Cell Responses in Participants with Type 1 Diabetes after a Single Dose of Interleukin-2: A Non-Randomised, Open Label, Adaptive Dose-Finding Trial. PLoS Medicine, 2016, 13, e1002139.	3.9	117
10	Correcting for multiple-testing in multi-arm trials: is it necessary and is it done?. Trials, 2014, 15, 364.	0.7	113
11	The Skillingsâ€“Mack Test (Friedman Test when There are Missing Data). The Stata Journal, 2009, 9, 299-305.	0.9	110
12	A prospective analysis of dietary energy density at age 5 and 7 years and fatness at 9 years among UK children. International Journal of Obesity, 2008, 32, 586-593.	1.6	93
13	How Much Human Milk Do Infants Consume? Data from 12 Countries Using a Standardized Stable Isotope Methodology ,. Journal of Nutrition, 2010, 140, 2227-2232.	1.3	91
14	A proposed method of bias adjustment for meta-analyses of published observational studies. International Journal of Epidemiology, 2011, 40, 765-777.	0.9	79
15	Age and sex differences in the incorporation of EPA and DHA into plasma fractions, cells and adipose tissue in humans. British Journal of Nutrition, 2014, 111, 679-689.	1.2	67
16	A product of independent beta probabilities dose escalation design for dualâ€agent phase I trials. Statistics in Medicine, 2015, 34, 1261-1276.	0.8	65
17	Use of stable-isotope techniques to validate infant feeding practices reported by Bangladeshi women receiving breastfeeding counseling. American Journal of Clinical Nutrition, 2007, 85, 1075-1082.	2.2	63
18	Two-stage designs optimal under the alternative hypothesis for phase II cancer clinical trials. Contemporary Clinical Trials, 2010, 31, 572-578.	0.8	61

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19	The Adaptive designs CONSORT Extension (ACE) statement: a checklist with explanation and elaboration guideline for reporting randomised trials that use an adaptive design. BMJ, The, 2020, 369, m115.	3.0	57
20	Adaptive designs for dual-agent phase I dose-escalation studies. Nature Reviews Clinical Oncology, 2013, 10, 277-288.	12.5	56
21	How to design a dose-finding study using the continual reassessment method. BMC Medical Research Methodology, 2019, 19, 18.	1.4	56
22	Objectively Measured Physical Activity and Fat Mass in Children: A Bias-Adjusted Meta-Analysis of Prospective Studies. PLoS ONE, 2011, 6, e17205.	1.1	53
23	Moderate Ingestion of Alcohol Is Associated With Acute Ethanol-Induced Suppression of Circulating CTX in a PTH-Independent Fashion. Journal of Bone and Mineral Research, 2009, 24, 1380-1388.	3.1	42
24	bcrm: Bayesian Continual Reassessment Method Designs for Phase I Dose-Finding Trials. Journal of Statistical Software, 2013, 54, .	1.8	38
25	A Review of Perspectives on the Use of Randomization in Phase II Oncology Trials. Journal of the National Cancer Institute, 2019, 111, 1255-1262.	3.0	35
26	Optimal multistage designs for randomised clinical trials with continuous outcomes. Statistics in Medicine, 2012, 31, 301-312.	0.8	31
27	Admissible twoâ€stage designs for phase II cancer clinical trials that incorporate the expected sample size under the alternative hypothesis. Pharmaceutical Statistics, 2012, 11, 91-96.	0.7	30
28	Compared with Daily, Weekly nâ€“3 PUFA Intake Affects the Incorporation of Eicosapentaenoic Acid and Docosahexaenoic Acid into Platelets and Mononuclear Cells in Humans. Journal of Nutrition, 2014, 144, 667-672.	1.3	30
29	The DILfrequency study is an adaptive trial to identify optimal IL-2 dosing in patients with type 1 diabetes. JCI Insight, 2018, 3, .	2.3	29
30	An evaluation of Bayesian designs for dose-escalation studies in healthy volunteers. Statistics in Medicine, 2006, 25, 433-445.	0.8	27
31	The Skillings-Mack test (Friedman test when there are missing data). The Stata Journal, 2009, 9, 299-305.	0.9	26
32	A phase 2 study of vatalanib in metastatic melanoma patients. European Journal of Cancer, 2010, 46, 2671-2673.	1.3	25
33	Variation in the urokinase-plasminogen activator gene does not explain the chromosome 10 linkage signal for late onset AD. American Journal of Medical Genetics Part A, 2004, 124B, 29-37.	2.4	24
34	Minimizing the Maximum Expected Sample Size in Two-Stage Phase II Clinical Trials with Continuous Outcomes. Journal of Biopharmaceutical Statistics, 2012, 22, 836-852.	0.4	22
35	Do singleâ€arm trials have a role in drug development plans incorporating randomised trials?. Pharmaceutical Statistics, 2016, 15, 143-151.	0.7	22
36	Risk of ischaemic cardiovascular events from selective cyclooxygenaseâ€2 inhibitors in osteoarthritis. Pharmacoepidemiology and Drug Safety, 2008, 17, 601-608.	0.9	21

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37	Weight loss referrals for adults in primary care (WRAP): protocol for a multi-centre randomised controlled trial comparing the clinical and cost-effectiveness of primary care referral to a commercial weight loss provider for 12Âweeks, referral for 52Âweeks, and a brief self-help intervention [ISRCTN82857232]. BMC Public Health, 2014, 14, 620.	1.2	21
38	Reducing sample sizes in two-stage phase II cancer trials by using continuous tumour shrinkage end-points. European Journal of Cancer, 2011, 47, 983-989.	1.3	20
39	Toxicityâ€dependent feasibility bounds for the escalation with overdose control approach in phase I cancer trials. Statistics in Medicine, 2017, 36, 2499-2513.	0.8	20
40	Multiple sclerosis recurrence risk for siblings in an isolated population of Central Sardinia, Italy. Genetic Epidemiology, 2002, 22, 265-271.	0.6	19
41	Training nurses in a competency framework to support adults with epilepsy and intellectual disability: the EpAID cluster RCT. Health Technology Assessment, 2018, 22, 1-104.	1.3	18
42	Dietary energy density and adiposity: Employing bias adjustments in a meta-analysis of prospective studies. BMC Public Health, 2011, 11, 48.	1.2	16
43	An adaptive design for updating the threshold value of a continuous biomarker. Statistics in Medicine, 2016, 35, 4909-4923.	0.8	16
44	An optimal stratified Simon twoâ€stage design. Pharmaceutical Statistics, 2016, 15, 333-340.	0.7	15
45	Escalation strategies for combination therapy Phase I trials. Pharmaceutical Statistics, 2012, 11, 258-266.	0.7	13
46	A novel equivalence probability weighted power prior for using historical control data in an adaptive clinical trial design: A comparison to standard methods. Pharmaceutical Statistics, 2021, 20, 462-484.	0.7	12
47	AplusB: A Web Application for Investigating A + B Designs for Phase I Cancer Clinical Trials. PLoS ONE, 2016, 11, e0159026.	1.1	12
48	INNODIA Master Protocol for the evaluation of investigational medicinal products in children, adolescents and adults with newly diagnosed type 1 diabetes. Trials, 2022, 23, 414.	0.7	12
49	The effect of altering eligibility criteria for entry onto a kidney transplant waiting list. Nephrology Dialysis Transplantation, 2001, 16, 816-823.	0.4	11
50	Genetic predisposition to an adverse lipid profile limits the improvement in total cholesterol in response to weight loss. Obesity, 2013, 21, 2589-2595.	1.5	11
51	A randomized controlled crossover trial evaluating differential responses to antihypertensive drugs (used as mono- or dual therapy) on the basis of ethnicity: The comparIsoN oF Optimal Hypertension RegiMens; part of the Ancestry Informative Markers in HYpertension programâ€"AIM-HY INFORM trial. American Heart Journal, 2018, 204, 102-108.	1.2	11
52	Blinded and unblinded sample size reestimation procedures for steppedâ€wedge cluster randomized trials. Biometrical Journal, 2018, 60, 903-916.	0.6	10
53	The adaptive designs CONSORT extension (ACE) statement: a checklist with explanation and elaboration guideline for reporting randomised trials that use an adaptive design. Trials, 2020, 21, 528.	0.7	10
54	Diet and glycosylated haemoglobin in the 1946 British birth cohort. European Journal of Clinical Nutrition, 2009, 63, 1084-1090.	1.3	8

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55	No difference in the 24-hour interstitial fluid glucose profile with modulations to the glycemic index of the diet. Nutrition, 2010, 26, 290-295.	1.1	8
56	Blinded and unblinded sample size reestimation in crossover trials balanced for period. Biometrical Journal, 2018, 60, 917-933.	0.6	7
57	Designs for adding a treatment arm to an ongoing clinical trial. Trials, 2020, 21, 251.	0.7	7
58	Bayesian Hierarchical Methods to Interpret the 13C-Octanoic Acid Breath Test for Gastric Emptying. Digestion, 2011, 83, 96-107.	1.2	6
59	How to use published complete case results from weight loss studies in a missing data sensitivity analysis. Obesity, 2014, 22, 996-1001.	1.5	6
60	The choice of test in phase II cancer trials assessing continuous tumour shrinkage when complete responses are expected. Statistical Methods in Medical Research, 2015, 24, 909-919.	0.7	6
61	Improving outcomes in adults with epilepsy and intellectual disability (EpAID) using a nurse-led intervention: study protocol for a cluster randomised controlled trial. Trials, 2016, 17, 297.	0.7	6
62	Modelling semiâ€attributable toxicity in dualâ€agent phase I trials with nonâ€concurrent drug administration. Statistics in Medicine, 2017, 36, 225-241.	0.8	6
63	An optimised multi-arm multi-stage clinical trial design for unknown variance. Contemporary Clinical Trials, 2018, 67, 116-120.	0.8	6
64	A Bayesian modelâ€free approach to combination therapy phase I trials using censored timeâ€toâ€toxicity data. Journal of the Royal Statistical Society Series C: Applied Statistics, 2019, 68, 309-329.	0.5	6
65	Admissible multiarm steppedâ€wedge cluster randomized trial designs. Statistics in Medicine, 2019, 38, 1103-1119.	0.8	6
66	Designing and evaluating dose-escalation studies made easy: The MoDEsT web app. Clinical Trials, 2020, 17, 147-156.	0.7	6
67	Evaluation of a personalised adherence intervention to improve photoprotection in adults with Xeroderma Pigmentosum (XP): protocol for the trial of XPAND. BMJ Open, 2019, 9, e028577.	0.8	5
68	Two-Stage Single-Arm Trials Are Rarely Analyzed Effectively or Reported Adequately. JCO Precision Oncology, 2021, 5, 1813-1820.	1.5	5
69	Genetic predisposition to type 2 diabetes is associated with impaired insulin secretion but does not modify insulin resistance or secretion in response to an intervention to lower dietary saturated fat. Genes and Nutrition, 2012, 7, 529-536.	1.2	4
70	Study protocol: Minimum effective low dose: anti-human thymocyte globulin (MELD-ATG): phase II, dose ranging, efficacy study of antithymocyte globulin (ATG) within 6 weeks of diagnosis of type 1 diabetes. BMJ Open, 2021, 11, e053669.	0.8	4
71	Weight loss in a commercial setting Authors' reply. Lancet, The, 2012, 379, 1003.	6.3	2
72	Application of Bayesian analysis to the doubly labelled water method for total energy expenditure in humans. Rapid Communications in Mass Spectrometry, 2018, 32, 23-32.	0.7	2

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73	Group sequential crossover trial designs with strong control of the familywise error rate. Sequential Analysis, 2018, 37, 174-203.	0.2	2
74	Two-Stage Adaptive Designs for Three-Treatment Bioequivalence Studies. Statistics in Biopharmaceutical Research, 2019, 11, 360-374.	0.6	2
75	A stochastically curtailed twoâ€arm randomised phase II trial design for binary outcomes. Pharmaceutical Statistics, 2021, 20, 212-228.	0.7	2
76	Accounting for variation in the required sample size in the design of group-sequential trials. Contemporary Clinical Trials, 2021, 107, 106459.	0.8	2
77	A stochastically curtailed singleâ€arm phase II trial design for binary outcomes. Journal of Biopharmaceutical Statistics, 2022, 32, 671-691.	0.4	2
78	Acute effects of hyperglycaemia on asymmetric dimethylarginine (ADMA), adiponectin and inflammatory markers (IL-6, hs-CRP) in overweight and obese women with metabolic syndrome. British Journal of Biomedical Science, 2010, 67, 216-218.	1.2	1
79	Sample size re-estimation in crossover trials: application to the AIM HY-INFORM study. Trials, 2019, 20, 665.	0.7	1
80	Exact group sequential designs for two-arm experiments with Poisson distributed outcome variables. Communications in Statistics - Theory and Methods, 2021, 50, 18-34.	0.6	1
81	Optimised point estimators for multi-stage single-arm phase II oncology trials. Journal of Biopharmaceutical Statistics, 2022, 32, 817-831.	0.4	1
82	Subgroup analyses in randomised controlled trials frequently categorised continuous subgroup information. Journal of Clinical Epidemiology, 2022, , .	2.4	1
83	Group Sequential Clinical Trial Designs for Normally Distributed Outcome Variables. The Stata Journal, 2018, 18, 416-431.	0.9	0
84	Bayesian Adaptive Designs for Phase I Trials. , 2021, , 1-27.		0
85	Bayesian Adaptive Designs for Phase I Trials. , 2021, , 1-27.		0