

Peter Coyle

List of Publications by Year in Descending Order

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The third column is the impact factor (IF) of the journal, and the fourth column is the number of citations of the article.

59
papers

1,411
citations

20
h-index

36
g-index

67
ext. papers

3,337
ext. citations

17.5
avg, IF

4.71
L-index

#	Paper	IF	Citations
59	Relative infectiousness of SARS-CoV-2 vaccine breakthrough infections, reinfections, and primary infections.. <i>Nature Communications</i> , 2022 , 13, 532	17.4	13
58	Protection against the Omicron Variant from Previous SARS-CoV-2 Infection.. <i>New England Journal of Medicine</i> , 2022 ,	59.2	52
57	Characterizing the effective reproduction number during the COVID-19 pandemic: Insights from Qatar's experience.. <i>Journal of Global Health</i> , 2022 , 12, 05004	4.3	0
56	Effect of mRNA Vaccine Boosters against SARS-CoV-2 Omicron Infection in Qatar.. <i>New England Journal of Medicine</i> , 2022 ,	59.2	36
55	Duration of mRNA vaccine protection against SARS-CoV-2 Omicron BA.1 and BA.2 subvariants in Qatar. <i>Nature Communications</i> , 2022 , 13,	17.4	12
54	Assessment of the Risk of Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) Reinfection in an Intense Reexposure Setting. <i>Clinical Infectious Diseases</i> , 2021 , 73, e1830-e1840	11.6	99
53	Introduction and expansion of the SARS-CoV-2 B.1.1.7 variant and reinfections in Qatar: A nationally representative cohort study.. <i>PLoS Medicine</i> , 2021 , 18, e1003879	11.6	19
52	BNT162b2 and mRNA-1273 COVID-19 vaccine effectiveness against the SARS-CoV-2 Delta variant in Qatar. <i>Nature Medicine</i> , 2021 ,	50.5	104
51	Severity, criticality, and fatality of the SARS-CoV-2 Beta variant. <i>Clinical Infectious Diseases</i> , 2021 ,	11.6	8
50	Risk factors for breakthrough SARS-CoV-2 infection in vaccinated healthcare workers. <i>PLoS ONE</i> , 2021 , 16, e0258820	3.7	5
49	Waning of BNT162b2 Vaccine Protection against SARS-CoV-2 Infection in Qatar. <i>New England Journal of Medicine</i> , 2021 , 385, e83	59.2	226
48	Association of Prior SARS-CoV-2 Infection With Risk of Breakthrough Infection Following mRNA Vaccination in Qatar. <i>JAMA - Journal of the American Medical Association</i> , 2021 , 326, 1930-1939	27.4	45
47	Characterizing the Qatar advanced-phase SARS-CoV-2 epidemic. <i>Scientific Reports</i> , 2021 , 11, 6233	4.9	57
46	Epidemiological impact of prioritising SARS-CoV-2 vaccination by antibody status: mathematical modelling analyses. <i>BMJ Innovations</i> , 2021 , 7, 327-336	1.8	15
45	Case Report: Prolonged Viral Shedding in Six COVID-19 Patients. <i>American Journal of Tropical Medicine and Hygiene</i> , 2021 ,	3.2	3
44	SARS-CoV-2 infection in mortuary and cemetery workers. <i>International Journal of Infectious Diseases</i> , 2021 , 105, 621-625	10.5	4
43	SARS-CoV-2 Infection Is at Herd Immunity in the Majority Segment of the Population of Qatar. <i>Open Forum Infectious Diseases</i> , 2021 , 8, ofab221	1	23

42	Herd Immunity against Severe Acute Respiratory Syndrome Coronavirus 2 Infection in 10 Communities, Qatar. <i>Emerging Infectious Diseases</i> , 2021 , 27, 1343-1352	10.2	38
41	Pfizer-BioNTech mRNA BNT162b2 Covid-19 vaccine protection against variants of concern after one versus two doses. <i>Journal of Travel Medicine</i> , 2021 , 28,	12.9	33
40	SARS-CoV-2 antibody-positivity protects against reinfection for at least seven months with 95% efficacy. <i>EClinicalMedicine</i> , 2021 , 35, 100861	11.3	77
39	Analytic comparison between three high-throughput commercial SARS-CoV-2 antibody assays reveals minor discrepancies in a high-incidence population. <i>Scientific Reports</i> , 2021 , 11, 11837	4.9	7
38	mRNA-1273 COVID-19 vaccine effectiveness against the B.1.1.7 and B.1.351 variants and severe COVID-19 disease in Qatar. <i>Nature Medicine</i> , 2021 , 27, 1614-1621	50.5	144
37	Mathematical modeling of the SARS-CoV-2 epidemic in Qatar and its impact on the national response to COVID-19. <i>Journal of Global Health</i> , 2021 , 11, 05005	4.3	40
36	Resuming professional football (soccer) during the COVID-19 pandemic in a country with high infection rates: a prospective cohort study. <i>British Journal of Sports Medicine</i> , 2021 , 55, 1092-1098	10.3	36
35	Two prolonged viremic SARS-CoV-2 infections with conserved viral genome for two months. <i>Infection, Genetics and Evolution</i> , 2021 , 88, 104684	4.5	10
34	SARS-CoV-2 infection hospitalization, severity, criticality, and fatality rates in Qatar. <i>Scientific Reports</i> , 2021 , 11, 18182	4.9	22
33	Cardiac arrest secondary to Covid19 pneumonia post full vaccination. <i>American Journal of Emergency Medicine</i> , 2021 , 49, 257-258	2.9	1
32	Protection afforded by prior infection against SARS-CoV-2 reinfection with the Omicron variant		8
31	Effectiveness of BNT162b2 and mRNA-1273 COVID-19 boosters against SARS-CoV-2 Omicron (B.1.1.529) infection in Qatar		3
30	Duration of protection of BNT162b2 and mRNA-1273 COVID-19 vaccines against symptomatic SARS-CoV-2 Omicron infection in Qatar		6
29	Waning of mRNA-1273 vaccine effectiveness against SARS-CoV-2 infection in Qatar		2
28	Protection offered by mRNA-1273 versus BNT162b2 vaccines against SARS-CoV-2 infection and severe COVID-19 in Qatar		2
27	Estimating protection afforded by prior infection in preventing reinfection: Applying the test-negative study design		4
26	Characterizing the effective reproduction number during the COVID-19 epidemic: Insights from Qatar's experience		1
25	Characterization of the SARS-CoV-2 outbreak in the State of Qatar, February 28-April 18, 2020		3

24	Characterizing the Qatar advanced-phase SARS-CoV-2 epidemic	21
23	Assessment of the risk of SARS-CoV-2 reinfection in an intense re-exposure setting	36
22	Evidence for and level of herd immunity against SARS-CoV-2 infection: the ten-community study	10
21	Mathematical modeling of the SARS-CoV-2 epidemic in Qatar and its impact on the national response to COVID-19	8
20	Resuming professional football (soccer) during the COVID-19 pandemic in a country with high infection rates: A prospective cohort study	3
19	Seroprevalence of SARS-CoV-2 infection in the craft and manual worker population of Qatar	12
18	SARS-CoV-2 infection hospitalization, severity, criticality, and fatality rates	12
17	Are commercial antibody assays substantially underestimating SARS-CoV-2 ever infection? An analysis on a population-based sample in a high exposure setting	5
16	COVID-19 risk score as a public health tool to guide targeted testing: A demonstration study in Qatar	3
15	Effect of vaccination and of prior infection on infectiousness of vaccine breakthrough infections and reinfections	5
14	Epidemiological impact of prioritizing SARS-CoV-2 vaccination by antibody status: Mathematical modeling analyses	4
13	Assessing the performance of a serological point-of-care test in measuring detectable antibodies against SARS-CoV-2	1
12	Inclusion of cycle threshold (CT) values when reporting SARS-CoV-2 RT-PCR results improves clinical Interpretation in suspected and confirmed COVID-19	1
11	Protection afforded by the BNT162b2 and mRNA-1273 COVID-19 vaccines in fully vaccinated cohorts with and without prior infection	9
10	Waning of BNT162b2 vaccine protection against SARS-CoV-2 infection in Qatar	22
9	BNT162b2 and mRNA-1273 COVID-19 vaccine effectiveness against the Delta (B.1.617.2) variant in Qatar	32
8	Severity, criticality, and fatality of the SARS-CoV-2 Beta variant	2
7	SARS-CoV-2 vaccine effectiveness in immunosuppressed kidney transplant recipients	2

6	SARS-CoV-2 reinfection in a cohort of 43,000 antibody-positive individuals followed for up to 35 weeks	20
5	Protection of Omicron sub-lineage infection against reinfection with another Omicron sub-lineage	6
4	Effects of BA.1/BA.2 subvariant, vaccination, and prior infection on infectiousness of SARS-CoV-2 Omicron infections	3
3	Protection of prior natural infection compared to mRNA vaccination against SARS-CoV-2 infection and severe COVID-19 in Qatar	2
2	Duration of mRNA vaccine protection against SARS-CoV-2 Omicron BA.1 and BA.2 subvariants in Qatar	5
1	Effects of Previous Infection and Vaccination on Symptomatic Omicron Infections. <i>New England Journal of Medicine</i> ,	59.2 24