

# Tim P Morris

## List of Publications by Year in descending order

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Version: 2024-02-01

73  
papers

3,879  
citations

172207

29  
h-index

133063

59  
g-index

78  
all docs

78  
docs citations

78  
times ranked

6936  
citing authors

#	ARTICLE	IF	CITATIONS
1	Causal analyses of existing databases: the importance of understanding what can be achieved with your data before analysis (commentary on Hernan). Journal of Clinical Epidemiology, 2022, 142, 261-263.	2.4	2
2	Planning a method for covariate adjustment in individually randomised trials: a practical guide. Trials, 2022, 23, 328.	0.7	21
3	Sensitivity analysis in clinical trials: three criteria for a valid sensitivity analysis. Eye, 2022, 36, 2073-2074.	1.1	6
4	Visualising harms in publications of randomised controlled trials: consensus and recommendations. BMJ, The, 2022, 377, e068983.	3.0	4
5	Measuring the unknown: An estimator and simulation study for assessing case reporting during epidemics. PLoS Computational Biology, 2022, 18, e1008800.	1.5	2
6	A scoping methodological review of simulation studies comparing statistical and machine learning approaches to risk prediction for time-to-event data. Diagnostic and Prognostic Research, 2022, 6, .	0.8	8
7	Redressing the balance. BJOG: an International Journal of Obstetrics and Gynaecology, 2021, 128, 1573-1573.	1.1	0
8	Current Practices in Missing Data Handling for Interrupted Time Series Studies Performed on Individual-Level Data: A Scoping Review in Health Research. Clinical Epidemiology, 2021, Volume 13, 603-613.	1.5	2
9	Why restricted mean survival time methods are especially useful for non-inferiority trials. Clinical Trials, 2021, 18, 174077452110451.	0.7	6
10	A comparison of methods for analyzing a binary composite endpoint with partially observed components in randomized controlled trials. Statistics in Medicine, 2021, 40, 6634-6650.	0.8	2
11	Estimands in published protocols of randomised trials: urgent improvement needed. Trials, 2021, 22, 686.	0.7	23
12	INTEREST: Interactive Tool for Exploring REsults from Simulation sStudies. , 2021, 1, .		1
13	Effects of long-term antipsychotics treatment on body weight: A population-based cohort study. Journal of Psychopharmacology, 2020, 34, 79-85.	2.0	17
14	Treatment estimands in clinical trials of patients hospitalised for COVID-19: ensuring trials ask the right questions. BMC Medicine, 2020, 18, 286.	2.3	17
15	Analysis of multicenter clinical trials with very low event rates. Trials, 2020, 21, 917.	0.7	5
16	A four-step strategy for handling missing outcome data in randomised trials affected by a pandemic. BMC Medical Research Methodology, 2020, 20, 208.	1.4	29
17	<p>Handling Missing Values in Interrupted Time Series Analysis of Longitudinal Individual-Level Data</p>. Clinical Epidemiology, 2020, Volume 12, 1045-1057.	1.5	5
18	Introduction to statistical simulations in health research. BMJ Open, 2020, 10, e039921.	0.8	24

#	ARTICLE	IF	CITATIONS
19	Sensitivity analysis for clinical trials with missing continuous outcome data using controlled multiple imputation: A practical guide. <i>Statistics in Medicine</i> , 2020, 39, 2815-2842.	0.8	93
20	One-stage individual participant data meta-analysis models for continuous and binary outcomes: Comparison of treatment coding options and estimation methods. <i>Statistics in Medicine</i> , 2020, 39, 2536-2555.	0.8	18
21	How are missing data in covariates handled in observational time-to-event studies in oncology? A systematic review. <i>BMC Medical Research Methodology</i> , 2020, 20, 134.	1.4	26
22	The Hazards of Period Specific and Weighted Hazard Ratios. <i>Statistics in Biopharmaceutical Research</i> , 2020, 12, 518-519.	0.6	19
23	Prediction meets causal inference: the role of treatment in clinical prediction models. <i>European Journal of Epidemiology</i> , 2020, 35, 619-630.	2.5	49
24	Stata tip 131: Custom legends for graphs that use translucency. <i>The Stata Journal</i> , 2019, 19, 738-740.	0.9	0
25	Health indicator recording in UK primary care electronic health records: key implications for handling missing data. <i>Clinical Epidemiology</i> , 2019, Volume 11, 157-167.	1.5	38
26	Proposals on Kaplan-Meier plots in medical research and a survey of stakeholder views: KMunicate. <i>BMJ Open</i> , 2019, 9, e030215.	0.8	33
27	Ethnic Differences in the Prevalence of Type 2 Diabetes Diagnoses in the UK: Cross-Sectional Analysis of the Health Improvement Network Primary Care Database. <i>Clinical Epidemiology</i> , 2019, Volume 11, 1081-1088.	1.5	71
28	Using simulation studies to evaluate statistical methods. <i>Statistics in Medicine</i> , 2019, 38, 2074-2102.	0.8	597
29	Population-calibrated multiple imputation for a binary/categorical covariate in categorical regression models. <i>Statistics in Medicine</i> , 2019, 38, 792-808.	0.8	21
30	Re-randomization increased recruitment and provided similar treatment estimates as parallel designs in trials of febrile neutropenia. <i>Journal of Clinical Epidemiology</i> , 2018, 97, 14-19.	2.4	4
31	Meta-analysis of Gaussian individual patient data: Two-stage or not two-stage?. <i>Statistics in Medicine</i> , 2018, 37, 1419-1438.	0.8	30
32	Multiple imputation in Cox regression when there are time-varying effects of covariates. <i>Statistics in Medicine</i> , 2018, 37, 3661-3678.	0.8	19
33	Individual participant data meta-analysis of continuous outcomes: A comparison of approaches for specifying and estimating one-stage models. <i>Statistics in Medicine</i> , 2018, 37, 4404-4420.	0.8	23
34	Knowledge of pelvic floor problems: a study of third trimester, primiparous women. <i>International Urogynecology Journal</i> , 2017, 28, 125-129.	0.7	28
35	Meta-analytical methods to identify who benefits most from treatments: daft, deluded, or deft approach?. <i>BMJ: British Medical Journal</i> , 2017, 356, j573.	2.4	143
36	Internet-accessed sexually transmitted infection (e-STI) testing and results service: A randomised, single-blind, controlled trial. <i>PLoS Medicine</i> , 2017, 14, e1002479.	3.9	88

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37	Reference-based Sensitivity Analysis via Multiple Imputation for Longitudinal Trials with Protocol Deviation. <i>The Stata Journal</i> , 2016, 16, 443-463.	0.9	33
38	Quantifying the Uptake of user-written Commands over Time. <i>The Stata Journal</i> , 2016, 16, 88-95.	0.9	2
39	Non-inferiority trials: are they inferior? A systematic review of reporting in major medical journals. <i>BMJ Open</i> , 2016, 6, e012594.	0.8	105
40	How do you design randomised trials for smaller populations? A framework. <i>BMC Medicine</i> , 2016, 14, 183.	2.3	28
41	Multiple imputation of multiple multi-item scales when a full imputation model is infeasible. <i>BMC Research Notes</i> , 2016, 9, 45.	0.6	47
42	A comparison of methods to adjust for continuous covariates in the analysis of randomised trials. <i>BMC Medical Research Methodology</i> , 2016, 16, 42.	1.4	45
43	Can Internet-Based Sexual Health Services Increase Diagnoses of Sexually Transmitted Infections (STI)? Protocol for a Randomized Evaluation of an Internet-Based STI Testing and Results Service. <i>JMIR Research Protocols</i> , 2016, 5, e9.	0.5	11
44	Reference-based sensitivity analysis via multiple imputation for longitudinal trials with protocol deviation. <i>The Stata Journal</i> , 2016, 16, 443-463.	0.9	13
45	Quantifying the uptake of user-written commands over time. <i>The Stata Journal</i> , 2016, 16, 88-95.	0.9	2
46	Combining fractional polynomial model building with multiple imputation. <i>Statistics in Medicine</i> , 2015, 34, 3298-3317.	0.8	36
47	A re-randomisation design for clinical trials. <i>BMC Medical Research Methodology</i> , 2015, 15, 96.	1.4	21
48	Multiple Imputation of Covariates by Substantive-model Compatible Fully Conditional Specification. <i>The Stata Journal</i> , 2015, 15, 437-456.	0.9	39
49	Multiple imputation for an incomplete covariate that is a ratio. <i>Statistics in Medicine</i> , 2014, 33, 88-104.	0.8	25
50	Prospective International Cohort Study Demonstrates Inability of Interim PET to Predict Treatment Failure in Diffuse Large B-Cell Lymphoma. <i>Journal of Nuclear Medicine</i> , 2014, 55, 1936-1944.	2.8	63
51	The Consequences of Randomizing Schools Rather Than Children. <i>Journal of School Health</i> , 2014, 84, 349-349.	0.8	2
52	A note regarding "random effects" - authors' response. <i>Statistics in Medicine</i> , 2014, 33, 2878-2879.	0.8	2
53	Choosing sensitivity analyses for randomised trials: principles. <i>BMC Medical Research Methodology</i> , 2014, 14, 11.	1.4	47
54	Combined PET and Biopsy Evidence of Marrow Involvement Improves Prognostic Prediction in Diffuse Large B-Cell Lymphoma. <i>Journal of Nuclear Medicine</i> , 2014, 55, 1591-1597.	2.8	62

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55	Tuning multiple imputation by predictive mean matching and local residual draws. BMC Medical Research Methodology, 2014, 14, 75.	1.4	328
56	The risks and rewards of covariate adjustment in randomized trials: an assessment of 12 outcomes from 8 studies. Trials, 2014, 15, 139.	0.7	291
57	Is our healthcare system working for spinal surgery patients? Towards individualised care pathways and person-centered supports. European Journal for Person Centered Healthcare, 2014, 1, 411.	0.3	2
58	Assessing potential sources of clustering in individually randomised trials. BMC Medical Research Methodology, 2013, 13, 58.	1.4	79
59	Adjusting for multiple prognostic factors in the analysis of randomised trials. BMC Medical Research Methodology, 2013, 13, 99.	1.4	26
60	An exploration of patients'™ expectation of and satisfaction with surgical outcome. European Spine Journal, 2013, 22, 2836-2844.	1.0	61
61	Analysis of multicentre trials with continuous outcomes: when and how should we account for centre effects?. Statistics in Medicine, 2013, 32, 1136-1149.	0.8	67
62	Reporting and analysis of trials using stratified randomisation in leading medical journals: review and reanalysis. BMJ, The, 2012, 345, e5840-e5840.	3.0	215
63	An Evaluation of a Postoperative Rehabilitation Program After Spinal Surgery and Its Impact on Outcome. Spine, 2012, 37, E417-E422.	1.0	10
64	Growth charts of fetal biometry: a longitudinal study. Journal of Maternal-Fetal and Neonatal Medicine, 2012, 25, 692-698.	0.7	8
65	Rank minimization with a two-step analysis should not replace randomization in clinical trials. Journal of Clinical Epidemiology, 2012, 65, 810-811.	2.4	3
66	Improper analysis of trials randomised using stratified blocks or minimisation. Statistics in Medicine, 2012, 31, 328-340.	0.8	235
67	Long-term outcomes of augmentation ileocystoplasty in patients with spinal cord injury: a minimum of 10 years of follow-up. BJU International, 2012, 109, 1236-1242.	1.3	58
68	Skin-Derived Tenocyte-like Cells for the Treatment of Patellar Tendinopathy. American Journal of Sports Medicine, 2011, 39, 614-623.	1.9	132
69	ISSLS Prize Winner. Spine, 2011, 36, 1711-1720.	1.0	55
70	Function After Spinal Treatment, Exercise, and Rehabilitation. Spine, 2011, 36, 1807-1814.	1.0	22
71	Autologous Chondrocyte Implantation in the Adolescent Knee. American Journal of Sports Medicine, 2011, 39, 1723-1731.	1.9	63
72	Prospective, Observational Study of Outcomes in Neonates With Severe Thrombocytopenia. Pediatrics, 2009, 124, e826-e834.	1.0	150

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73	Estimands for factorial trials. <i>Statistics in Medicine</i> , 0, , .	0.8	3