## Donald E Low

List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	International Consensus on Standardization of Data Collection for Complications Associated With Esophagectomy. Annals of Surgery, 2015, 262, 286-294.	4.2	784
2	Benchmarking Complications Associated with Esophagectomy. Annals of Surgery, 2019, 269, 291-298.	4.2	504
3	Guidelines for Perioperative Care in Esophagectomy: Enhanced Recovery After Surgery (ERAS <sup>®</sup> ) Society Recommendations. World Journal of Surgery, 2019, 43, 299-330.	1.6	395
4	Esophagectomy—lt's Not Just About Mortality Anymore: Standardized Perioperative Clinical Pathways Improve Outcomes in Patients with Esophageal Cancer. Journal of Gastrointestinal Surgery, 2007, 11, 1395-1402.	1.7	167
5	ls It Time to Centralize High-risk Cancer Care in the United States? Comparison of Outcomes of Esophagectomy Between England and the United States. Annals of Surgery, 2015, 262, 79-85.	4.2	90
6	The Society of Thoracic Surgeons Guidelines on the Diagnosis and Staging of Patients With Esophageal Cancer. Annals of Thoracic Surgery, 2013, 96, 346-356.	1.3	83
7	Treatment of Barrett's esophagus with early neoplasia: a comparison of endoscopic therapy and esophagectomy. Gastrointestinal Endoscopy, 2008, 67, 595-601.	1.0	75
8	Evolution of Standardized Clinical Pathways: Refining Multidisciplinary Care and Process to Improve Outcomes of the Surgical Treatment of Esophageal Cancer. Journal of Gastrointestinal Surgery, 2014, 18, 1238-1246.	1.7	64
9	Thoracic Multidisciplinary Tumor Board Routinely Impacts Therapeutic Plans in Patients With Lung and Esophageal Cancer: A Prospective Cohort Study. Annals of Thoracic Surgery, 2015, 99, 1719-1724.	1.3	60
10	Open Repair of Paraesophageal Hernia: Reassessment of Subjective and Objective Outcomes. Annals of Thoracic Surgery, 2005, 80, 287-294.	1.3	59
11	Clinical Ramifications of Giant Paraesophageal Hernias Are Underappreciated: Making the Case for Routine Surgical Repair. Annals of Thoracic Surgery, 2012, 94, 421-428.	1.3	59
12	Evaluation of International Contemporary Operative Outcomes and Management Trends Associated With Esophagectomy. Annals of Surgery, 2022, 275, 515-525.	4.2	59
13	Physiology, Not Chronology, Dictates Outcomes after Esophagectomy for Esophageal Cancer: Outcomes in Patients 80 Years and Older. Annals of Surgical Oncology, 2013, 20, 1020-1026.	1.5	53
14	Effect of paraesophageal hernia repair on pulmonary function. Annals of Thoracic Surgery, 2002, 74, 333-337.	1.3	50
15	Repair of giant paraesophageal hernias routinely produces improvement in respiratory function. Journal of Thoracic and Cardiovascular Surgery, 2012, 143, 398-404.	0.8	48
16	Diagnosis and Management of Anastomotic Leaks after Esophagectomy. Journal of Gastrointestinal Surgery, 2011, 15, 1319-1322.	1.7	47
17	Mortality After Esophagectomy: Analysis of Individual Complications and Their Association with Mortality. Journal of Gastrointestinal Surgery, 2020, 24, 1948-1954.	1.7	46
18	A Standardized Anesthetic and Surgical Clinical Pathway for Esophageal Resection. Regional Anesthesia and Pain Medicine, 2015, 40, 139-149.	2.3	41

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19	Risk Prediction Model of 90-Day Mortality After Esophagectomy for Cancer. JAMA Surgery, 2021, 156, 836.	4.3	41
20	Worldwide Techniques and Outcomes in Robot-assisted Minimally Invasive Esophagectomy (RAMIE). Annals of Surgery, 2022, 276, e386-e392.	4.2	38
21	Accelerated Recovery Within Standardized Recovery Pathways After Esophagectomy: AÂProspective Cohort Study Assessing the Effects ofÂEarly Discharge on Outcomes, Readmissions, Patient Satisfaction, and Costs. Annals of Thoracic Surgery, 2016, 102, 931-939.	1.3	37
22	Influence of body composition and muscle strength on outcomes after multimodal oesophageal cancer treatment. Journal of Cachexia, Sarcopenia and Muscle, 2020, 11, 756-767.	7.3	34
23	Evolution in Surgical Management of Esophageal Cancer. Digestive Diseases, 2013, 31, 21-29.	1.9	33
24	Iron-Deficiency Anemia Is a Common Presenting Issue with Giant Paraesophageal Hernia and Resolves Following Repair. Journal of Gastrointestinal Surgery, 2013, 17, 858-862.	1.7	33
25	Update on Clinical Impact, Documentation, and Management of Complications Associated with Esophagectomy. Thoracic Surgery Clinics, 2013, 23, 535-550.	1.0	32
26	The Importance of Age on Short-Term Outcomes Associated With Repair of Giant Paraesophageal Hernias. Annals of Thoracic Surgery, 2017, 103, 1700-1709.	1.3	27
27	Assessment of Health Related Quality of Life and Digestive Symptoms in Long-term, Disease Free Survivors After Esophagectomy. Annals of Surgery, 2022, 275, e140-e147.	4.2	26
28	Application of standardized hemodynamic protocols within enhanced recovery after surgery programs to improve outcomes associated with anastomotic leak and conduit necrosis in patients undergoing esophagectomy. Journal of Thoracic Disease, 2019, 11, S692-S701.	1.4	21
29	In an era of health reform: Defining cost differences in current esophageal cancer management strategies and assessing the cost of complications. Journal of Thoracic and Cardiovascular Surgery, 2011, 141, 16-21.	0.8	20
30	Early diagnosis is associated with improved clinical outcomes in benign esophageal perforation: an individual patient data meta-analysis. Surgical Endoscopy and Other Interventional Techniques, 2021, 35, 3492-3505.	2.4	20
31	Comparing Complications of Esophagectomy and Pancreaticoduodenectomy and Potential Impact on Hospital Systems Utilizing the Accordion Severity Grading System. Journal of Gastrointestinal Surgery, 2010, 14, 1646-1652.	1.7	18
32	Survival in Patients With Esophageal Adenocarcinoma Undergoing Trimodality Therapy Is Independent of Regional Lymph Node Location. Annals of Thoracic Surgery, 2016, 101, 1075-1081.	1.3	18
33	Comparison of costs and short-term clinical outcomes of per-oral endoscopic myotomy and laparoscopic Heller myotomy. American Journal of Surgery, 2019, 218, 706-711.	1.8	18
34	Update on Staging and Surgical Treatment Options for Esophageal Cancer. Journal of Gastrointestinal Surgery, 2011, 15, 719-729.	1.7	16
35	A Comparison of Frailty Measures at Listing to Predict Outcomes After Lung Transplantation. Annals of Thoracic Surgery, 2020, 109, 233-240.	1.3	16
36	Development of a Reliable Surgical Quality Assurance System for 2-stage Esophagectomy in Randomized Controlled Trials. Annals of Surgery, 2022, 275, 121-130.	4.2	16

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37	Is Local Endoscopic Resection a Viable Therapeutic Option for Early Clinical Stage T1a and T1b Esophageal Adenocarcinoma?. Annals of Surgery, 2020, Publish Ahead of Print, .	4.2	15
38	Acute Vs. Elective Paraesophageal Hernia Repair: Endoscopic Gastric Decompression Allows Semi-Elective Surgery in a Majority of Acute Patients. Journal of Gastrointestinal Surgery, 2018, 22, 194-202.	1.7	14
39	Outcomes of Surgical Resection of T1bN0 Esophageal Cancer and Assessment of Endoscopic Mucosal Resection for Identifying Low-Risk Cancers Appropriate for Endoscopic Therapy. Annals of Surgical Oncology, 2016, 23, 2673-2678.	1.5	13
40	Endoscopic therapy and surveillance versus esophagectomy for early esophageal adenocarcinoma: A review of early outcomes and cost analysis. American Journal of Surgery, 2019, 218, 164-169.	1.8	13
41	Impact of standardized clinical pathways on esophagectomy: a systematic review and meta-analysis. Ecological Management and Restoration, 2022, 35, .	0.4	13
42	Comparison of Esophagectomy outcomes between a National Center, a National Audit Collaborative, and an International database using the Esophageal Complications Consensus Group (ECCG) standardized definitions. Ecological Management and Restoration, 2021, 34, .	0.4	12
43	Long-term variation in skeletal muscle and adiposity in patients undergoing esophagectomy. Ecological Management and Restoration, 2021, 34, .	0.4	12
44	548 COMPARISON OF ESOPHAGECTOMY OUTCOMES BETWEEN A NATIONAL CENTER, A NATIONAL AUDIT COLLABORATIVE, AND AN INTERNATIONAL DATABASE USING ECCG STANDARDIZED DEFINITIONS. Ecological Management and Restoration, 2021, 34, .	0.4	11
45	Multidisciplinary treatment of T1a adenocarcinoma in Barrett's esophagus: contemporary comparison of endoscopic and surgical treatment in physiologically fit patients. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 3391-3401.	2.4	10
46	Abnormal High-Resolution Manometry Findings and Outcomes after Paraesophageal Hernia Repair. Journal of the American College of Surgeons, 2018, 227, 181-188e2.	0.5	9
47	Open Versus Minimally Invasive Esophagectomy: What Is the Best Approach? Frame the Issue. Journal of Gastrointestinal Surgery, 2011, 15, 1497-1499.	1.7	7
48	Selective Epidurography for the Assessment of Epidural Catheter Placement After Esophagectomy. Annals of Thoracic Surgery, 2019, 108, 905-911.	1.3	7
49	The other explanation for dyspnea: giant paraesophageal hiatal hernia repair routinely improves pulmonary function. Ecological Management and Restoration, 2019, 32, .	0.4	7
50	Functional Conduit Disorder Complicating Esophagectomy. Thoracic Surgery Clinics, 2015, 25, 471-483.	1.0	5
51	Functional Recovery After Lung Resection: A Before and After Prospective Cohort Study of Activity. Annals of Thoracic Surgery, 2019, 107, 209-216.	1.3	5
52	ERAS guidelines-driven upper gastrointestinal contrast study after esophagectomy. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 4108-4114.	2.4	5
53	Severe Dumping Symptoms Are Uncommon Following Transthoracic Esophagectomy But Significantly Decrease Health-Related Quality of Life in Long-Term, Disease-Free Survivors. Journal of Gastrointestinal Surgery, 2021, 25, 1941-1947.	1.7	4
54	Consenso para definir y dar a conocer las complicaciones de la esofagectomÃa: un paso importante para la utilización de un lenguaje común. CirugÃa Española, 2015, 93, 549-551.	0.2	3

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55	Enhanced Recovery After Surgery: Recommendations for Esophagectomy. , 2020, , 385-394.		2
56	LAPAROSCOPIC ANTIREFLUX SURGERY: ARE OLD QUESTIONS ANSWERED? SHOULD IT BE USED CONJOINED WITH ENDOSCOPIC THERAPY FOR BARRETT'S ESOPHAGUS?. Arquivos Brasileiros De Cirurgia Digestiva: ABCD = Brazilian Archives of Digestive Surgery, 0, 35, .	0.5	2
57	Should Nasogastric Tubes Be Removed Early or Late?: That Is the Question. Archives of Surgery, 2012, 147, 752.	2.2	1
58	PS02.248: ASSESSMENT OF BODY COMPOSITION AND SARCOPENIA IN PATIENTS WITH ESOPHAGEAL CANCER: A SYSTEMATIC REVIEW AND META-ANALYSIS. Ecological Management and Restoration, 2018, 31, 193-194.	0.4	1
59	Esophageal Cancer Diagnosis and Staging. , 2019, , 368-381.		1
60	Effect of a multidisciplinary cancer conference for thoracic malignancies on patient care management Journal of Clinical Oncology, 2014, 32, 112-112.	1.6	1
61	Ivor Lewis Esophagectomy. , 2015, , 137-150.		1
62	Invited Commentary. Annals of Thoracic Surgery, 2008, 86, 1138.	1.3	0
63	Invited Commentary. Annals of Thoracic Surgery, 2009, 88, 1653-1654.	1.3	0
64	Accordion Severity Grading System: Assessment of relationship between costs and survival in patients with complications following esophagectomy for cancer. Journal of the American College of Surgeons, 2011, 213, S117-S118.	0.5	0
65	Invited Commentary. Annals of Thoracic Surgery, 2012, 94, 405.	1.3	0
66	PS02.249: VARIATION IN BODY COMPOSITION IN ESOPHAGEAL CANCER PATIENTS RECEIVING SUPPLEMENTARY JEJUNOSTOMY FEEDING DURING NEOADJUVANT CHEMORADIOTHERAPY. Ecological Management and Restoration, 2018, 31, 194-194.	0.4	0
67	Commentary: Per oral endoscopic myotomy (POEM): Should it now be considered the first-line therapeutic approach for patients with achalasia?. Journal of Thoracic and Cardiovascular Surgery, 2019, 158, 953-954.	0.8	0
68	Use of High Resolution Manometry. Journal of the American College of Surgeons, 2019, 228, 212.	0.5	0
69	Contrast-enhanced paravertebrogram to confirm paravertebral catheter position in elective thoracic surgery: a proof of concept study. Surgical Endoscopy and Other Interventional Techniques, 2020, 35, 6001-6005.	2.4	0
70	464 IS OPEN LEFT THORACO-ABDOMINAL ESOPHAGECTOMY A VIABLE OPTION IN THE ERA OF MINIMALLY INVASIVE ESOPHAGECTOMY?. Ecological Management and Restoration, 2021, 34, .	0.4	0
71	Esophageal Cancer: Evaluation. , 2014, , 189-205.		0
72	Impact of Early Jejunostomy Tube Feeding on Clinical Outcome and Parameters of Body Composition in Esophageal Cancer Patients Receiving Multimodal Therapy. Annals of Surgical Oncology, 0, , .	1.5	0