Donald E Low

List of Publications by Year in descending order

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72 papers 3,344 citations

236833 25 h-index 56 g-index

75 all docs

75 docs citations

75 times ranked 2668 citing authors

#	Article	IF	CITATIONS
1	Impact of standardized clinical pathways on esophagectomy: a systematic review and meta-analysis. Ecological Management and Restoration, 2022, 35, .	0.2	13
2	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.	2.1	26
3	Development of a Reliable Surgical Quality Assurance System for 2-stage Esophagectomy in Randomized Controlled Trials. Annals of Surgery, 2022, 275, 121-130.	2.1	16
4	Evaluation of International Contemporary Operative Outcomes and Management Trends Associated With Esophagectomy. Annals of Surgery, 2022, 275, 515-525.	2.1	59
5	Worldwide Techniques and Outcomes in Robot-assisted Minimally Invasive Esophagectomy (RAMIE). Annals of Surgery, 2022, 276, e386-e392.	2.1	38
6	ERAS guidelines-driven upper gastrointestinal contrast study after esophagectomy. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 4108-4114.	1.3	5
7	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.	0.9	4
8	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, .	0.2	12
9	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.	1.3	20
10	Long-term variation in skeletal muscle and adiposity in patients undergoing esophagectomy. Ecological Management and Restoration, 2021, 34, .	0.2	12
11	Risk Prediction Model of 90-Day Mortality After Esophagectomy for Cancer. JAMA Surgery, 2021, 156, 836.	2.2	41
12	464 IS OPEN LEFT THORACO-ABDOMINAL ESOPHAGECTOMY A VIABLE OPTION IN THE ERA OF MINIMALLY INVASIVE ESOPHAGECTOMY?. Ecological Management and Restoration, 2021, 34, .	0.2	0
13	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, .	0.2	11
14	A Comparison of Frailty Measures at Listing to Predict Outcomes After Lung Transplantation. Annals of Thoracic Surgery, 2020, 109, 233-240.	0.7	16
15	Mortality After Esophagectomy: Analysis of Individual Complications and Their Association with Mortality. Journal of Gastrointestinal Surgery, 2020, 24, 1948-1954.	0.9	46
16	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.	1.3	0
17	Influence of body composition and muscle strength on outcomes after multimodal oesophageal cancer treatment. Journal of Cachexia, Sarcopenia and Muscle, 2020, 11, 756-767.	2.9	34
18	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, .	2.1	15

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19	Enhanced Recovery After Surgery: Recommendations for Esophagectomy. , 2020, , 385-394.		2
20	Esophageal Cancer Diagnosis and Staging. , 2019, , 368-381.		1
21	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.	0.9	18
22	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.	0.4	O
23	Selective Epidurography for the Assessment of Epidural Catheter Placement After Esophagectomy. Annals of Thoracic Surgery, 2019, 108, 905-911.	0.7	7
24	Functional Recovery After Lung Resection: A Before and After Prospective Cohort Study of Activity. Annals of Thoracic Surgery, 2019, 107, 209-216.	0.7	5
25	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.	0.9	13
26	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.	0.6	21
27	The other explanation for dyspnea: giant paraesophageal hiatal hernia repair routinely improves pulmonary function. Ecological Management and Restoration, 2019, 32, .	0.2	7
28	Use of High Resolution Manometry. Journal of the American College of Surgeons, 2019, 228, 212.	0.2	0
29	Guidelines for Perioperative Care in Esophagectomy: Enhanced Recovery After Surgery (ERAS [®]) Society Recommendations. World Journal of Surgery, 2019, 43, 299-330.	0.8	395
30	Benchmarking Complications Associated with Esophagectomy. Annals of Surgery, 2019, 269, 291-298.	2.1	504
31	Abnormal High-Resolution Manometry Findings and Outcomes after Paraesophageal Hernia Repair. Journal of the American College of Surgeons, 2018, 227, 181-188e2.	0.2	9
32	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.	0.9	14
33	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.	0.2	1
34	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.	0.2	0
35	The Importance of Age on Short-Term Outcomes Associated With Repair of Giant Paraesophageal Hernias. Annals of Thoracic Surgery, 2017, 103, 1700-1709.	0.7	27
36	Outcomes of Surgical Resection of T1bNO 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.	0.7	13

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37	Survival in Patients With Esophageal Adenocarcinoma Undergoing Trimodality Therapy Is Independent of Regional Lymph Node Location. Annals of Thoracic Surgery, 2016, 101, 1075-1081.	0.7	18
38	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.	0.7	37
39	Multidisciplinary treatment of T1a adenocarcinoma in Barrettâ \in TM s esophagus: contemporary comparison of endoscopic and surgical treatment in physiologically fit patients. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 3391-3401.	1.3	10
40	International Consensus on Standardization of Data Collection for Complications Associated With Esophagectomy. Annals of Surgery, 2015, 262, 286-294.	2.1	784
41	Is 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.	2.1	90
42	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.	0.7	60
43	A Standardized Anesthetic and Surgical Clinical Pathway for Esophageal Resection. Regional Anesthesia and Pain Medicine, 2015, 40, 139-149.	1.1	41
44	Functional Conduit Disorder Complicating Esophagectomy. Thoracic Surgery Clinics, 2015, 25, 471-483.	0.4	5
45	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.	0.1	3
46	Ivor Lewis Esophagectomy. , 2015, , 137-150.		1
46	Ivor Lewis Esophagectomy., 2015, , 137-150. 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.	0.9	1 64
	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,	0.9	
47	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. Effect of a multidisciplinary cancer conference for thoracic malignancies on patient care		64
47	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. Effect of a multidisciplinary cancer conference for thoracic malignancies on patient care management Journal of Clinical Oncology, 2014, 32, 112-112.		1
47 48 49	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. Effect of a multidisciplinary cancer conference for thoracic malignancies on patient care management Journal of Clinical Oncology, 2014, 32, 112-112. Esophageal Cancer: Evaluation., 2014, , 189-205. Update on Clinical Impact, Documentation, and Management of Complications Associated with	0.8	64 1 0
47 48 49 50	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. Effect of a multidisciplinary cancer conference for thoracic malignancies on patient care management Journal of Clinical Oncology, 2014, 32, 112-112. Esophageal Cancer: Evaluation., 2014, , 189-205. Update on Clinical Impact, Documentation, and Management of Complications Associated with Esophagectomy. Thoracic Surgery Clinics, 2013, 23, 535-550.	0.8	64 1 0
47 48 49 50	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. Effect of a multidisciplinary cancer conference for thoracic malignancies on patient care management Journal of Clinical Oncology, 2014, 32, 112-112. Esophageal Cancer: Evaluation., 2014, , 189-205. Update on Clinical Impact, Documentation, and Management of Complications Associated with Esophagectomy. Thoracic Surgery Clinics, 2013, 23, 535-550. Evolution in Surgical Management of Esophageal Cancer. Digestive Diseases, 2013, 31, 21-29. The Society of Thoracic Surgeons Guidelines on the Diagnosis and Staging of Patients With	0.8	64 1 0 32 33

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55	Should Nasogastric Tubes Be Removed Early or Late?: That Is the Question. Archives of Surgery, 2012, 147, 752.	2.3	1
56	Invited Commentary. Annals of Thoracic Surgery, 2012, 94, 405.	0.7	0
57	Clinical Ramifications of Giant Paraesophageal Hernias Are Underappreciated: Making the Case for Routine Surgical Repair. Annals of Thoracic Surgery, 2012, 94, 421-428.	0.7	59
58	Repair of giant paraesophageal hernias routinely produces improvement in respiratory function. Journal of Thoracic and Cardiovascular Surgery, 2012, 143, 398-404.	0.4	48
59	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.	0.4	20
60	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.	0.2	0
61	Diagnosis and Management of Anastomotic Leaks after Esophagectomy. Journal of Gastrointestinal Surgery, 2011, 15, 1319-1322.	0.9	47
62	Update on Staging and Surgical Treatment Options for Esophageal Cancer. Journal of Gastrointestinal Surgery, 2011, 15, 719-729.	0.9	16
63	Open Versus Minimally Invasive Esophagectomy: What Is the Best Approach? Frame the Issue. Journal of Gastrointestinal Surgery, 2011, 15, 1497-1499.	0.9	7
64	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.	0.9	18
65	Invited Commentary. Annals of Thoracic Surgery, 2009, 88, 1653-1654.	0.7	0
66	Treatment of Barrett's esophagus with early neoplasia: a comparison of endoscopic therapy and esophagectomy. Gastrointestinal Endoscopy, 2008, 67, 595-601.	0.5	75
67	Invited Commentary. Annals of Thoracic Surgery, 2008, 86, 1138.	0.7	0
68	Esophagectomyâ€"It'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.	0.9	167
69	Open Repair of Paraesophageal Hernia: Reassessment of Subjective and Objective Outcomes. Annals of Thoracic Surgery, 2005, 80, 287-294.	0.7	59
70	Effect of paraesophageal hernia repair on pulmonary function. Annals of Thoracic Surgery, 2002, 74, 333-337.	0.7	50
71	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, , .	0.7	0
72	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