

Sentinel Surveillance in Industrial Popu

List of Publications by Year in descending order

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168
papers

37,027
citations

53794

45
h-index

7348

152
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169
all docs

169
docs citations

169
times ranked

44000
citing authors

#	ARTICLE	IF	CITATIONS
1	Global, regional, and national incidence, prevalence, and years lived with disability for 354 diseases and injuries for 195 countries and territories, 1990â€“2017: a systematic analysis for the Global Burden of Disease Study 2017. <i>Lancet, The</i> , 2018, 392, 1789-1858.	13.7	8,569
2	Global burden of 369 diseases and injuries in 204 countries and territories, 1990â€“2019: a systematic analysis for the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2020, 396, 1204-1222.	13.7	7,664
3	Global, regional, and national age-sex-specific mortality for 282 causes of death in 195 countries and territories, 1980â€“2017: a systematic analysis for the Global Burden of Disease Study 2017. <i>Lancet, The</i> , 2018, 392, 1736-1788.	13.7	4,989
4	Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks for 195 countries and territories, 1990â€“2017: a systematic analysis for the Global Burden of Disease Study 2017. <i>Lancet, The</i> , 2018, 392, 1923-1994.	13.7	3,269
5	Global, regional, and national disability-adjusted life-years (DALYs) for 359 diseases and injuries and healthy life expectancy (HALE) for 195 countries and territories, 1990â€“2017: a systematic analysis for the Global Burden of Disease Study 2017. <i>Lancet, The</i> , 2018, 392, 1859-1922.	13.7	2,123
6	Worldwide trends in hypertension prevalence and progress in treatment and control from 1990 to 2019: a pooled analysis of 1201 population-representative studies with 104 million participants. <i>Lancet, The</i> , 2021, 398, 957-980.	13.7	1,289
7	Global age-sex-specific fertility, mortality, healthy life expectancy (HALE), and population estimates in 204 countries and territories, 1950â€“2019: a comprehensive demographic analysis for the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2020, 396, 1160-1203.	13.7	890
8	Global, regional, and national age-sex-specific mortality and life expectancy, 1950â€“2017: a systematic analysis for the Global Burden of Disease Study 2017. <i>Lancet, The</i> , 2018, 392, 1684-1735.	13.7	716
9	Nations within a nation: variations in epidemiological transition across the states of India, 1990â€“2016 in the Global Burden of Disease Study. <i>Lancet, The</i> , 2017, 390, 2437-2460.	13.7	647
10	Spatial, temporal, and demographic patterns in prevalence of smoking tobacco use and attributable disease burden in 204 countries and territories, 1990â€“2019: a systematic analysis from the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2021, 397, 2337-2360.	13.7	609
11	Measuring progress from 1990 to 2017 and projecting attainment to 2030 of the health-related Sustainable Development Goals for 195 countries and territories: a systematic analysis for the Global Burden of Disease Study 2017. <i>Lancet, The</i> , 2018, 392, 2091-2138.	13.7	335
12	Five insights from the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2020, 396, 1135-1159.	13.7	335
13	Population and fertility by age and sex for 195 countries and territories, 1950â€“2017: a systematic analysis for the Global Burden of Disease Study 2017. <i>Lancet, The</i> , 2018, 392, 1995-2051.	13.7	294
14	The changing patterns of cardiovascular diseases and their risk factors in the states of India: the Global Burden of Disease Study 1990â€“2016. <i>The Lancet Global Health</i> , 2018, 6, e1339-e1351.	6.3	283
15	Urban rural differences in prevalence of self-reported diabetes in Indiaâ€”The WHOâ€”ICMR Indian NCD risk factor surveillance. <i>Diabetes Research and Clinical Practice</i> , 2008, 80, 159-168.	2.8	232
16	Global, regional, and national progress towards Sustainable Development Goal 3.2 for neonatal and child health: all-cause and cause-specific mortality findings from the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2021, 398, 870-905.	13.7	229
17	The burden of chronic respiratory diseases and their heterogeneity across the states of India: the Global Burden of Disease Study 1990â€“2016. <i>The Lancet Global Health</i> , 2018, 6, e1363-e1374.	6.3	222
18	Height and body-mass index trajectories of school-aged children and adolescents from 1985 to 2019 in 200 countries and territories: a pooled analysis of 2181 population-based studies with 65 million participants. <i>Lancet, The</i> , 2020, 396, 1511-1524.	13.7	219

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19	Country actions to meet UN commitments on non-communicable diseases: a stepwise approach. <i>Lancet, The</i> , 2013, 381, 575-584.	13.7	174
20	Methods for establishing a surveillance system for cardiovascular diseases in Indian industrial populations. <i>Bulletin of the World Health Organization</i> , 2006, 84, 461-469.	3.3	173
21	Educational status and cardiovascular risk profile in Indians. <i>Proceedings of the National Academy of Sciences of the United States of America</i> , 2007, 104, 16263-16268.	7.1	163
22	Mapping 123 million neonatal, infant and child deaths between 2000 and 2017. <i>Nature</i> , 2019, 574, 353-358.	27.8	161
23	A Cross-Sectional Study of the Microeconomic Impact of Cardiovascular Disease Hospitalization in Four Low- and Middle-Income Countries. <i>PLoS ONE</i> , 2011, 6, e20821.	2.5	149
24	Repositioning of the global epicentre of non-optimal cholesterol. <i>Nature</i> , 2020, 582, 73-77.	27.8	138
25	A peer-support lifestyle intervention for preventing type 2 diabetes in India: A cluster-randomized controlled trial of the Kerala Diabetes Prevention Program. <i>PLoS Medicine</i> , 2018, 15, e1002575.	8.4	116
26	Risk factor profile for chronic non-communicable diseases: results of a community-based study in Kerala, India. <i>Indian Journal of Medical Research</i> , 2010, 131, 53-63.	1.0	112
27	Subnational mapping of under-5 and neonatal mortality trends in India: the Global Burden of Disease Study 2000â€“17. <i>Lancet, The</i> , 2020, 395, 1640-1658.	13.7	96
28	Global, regional, and national mortality among young people aged 10â€“24 years, 1950â€“2019: a systematic analysis for the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2021, 398, 1593-1618.	13.7	92
29	Mapping geographical inequalities in access to drinking water and sanitation facilities in low-income and middle-income countries, 2000â€“17. <i>The Lancet Global Health</i> , 2020, 8, e1162-e1185.	6.3	91
30	Pattern, correlates and implications of non-communicable disease multimorbidity among older adults in selected Indian states: a cross-sectional study. <i>BMJ Open</i> , 2017, 7, e013529.	1.9	84
31	Prevalence of coronary artery disease and its risk factors in Kerala, South India: a community-based cross-sectional study. <i>BMC Cardiovascular Disorders</i> , 2016, 16, 12.	1.7	81
32	Prevalence of risk factors of non-communicable diseases in Kerala, India: results of a cross-sectional study. <i>BMJ Open</i> , 2019, 9, e027880.	1.9	75
33	Mapping geographical inequalities in childhood diarrhoeal morbidity and mortality in low-income and middle-income countries, 2000â€“17: analysis for the Global Burden of Disease Study 2017. <i>Lancet, The</i> , 2020, 395, 1779-1801.	13.7	72
34	Risk factors for acute ischaemic stroke in young adults in South India. <i>Journal of Neurology, Neurosurgery and Psychiatry</i> , 2007, 78, 959-963.	1.9	71
35	Mapping routine measles vaccination in low- and middle-income countries. <i>Nature</i> , 2021, 589, 415-419.	27.8	71
36	Impact of a Worksite Intervention Program on Cardiovascular Risk Factors. <i>Journal of the American College of Cardiology</i> , 2009, 53, 1718-1728.	2.8	69

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37	Benefit of lifestyle-based T2DM prevention is influenced by prediabetes phenotype. <i>Nature Reviews Endocrinology</i> , 2020, 16, 395-400.	9.6	64
38	Mapping disparities in education across low- and middle-income countries. <i>Nature</i> , 2020, 577, 235-238.	27.8	58
39	Prevalence and determinants of diabetes mellitus in the Indian industrial population. <i>Diabetic Medicine</i> , 2008, 25, 1187-1194.	2.3	57
40	Prevalence of normal weight obesity and its associated cardio-metabolic risk factors – Results from the baseline data of the Kerala Diabetes Prevention Program (KDPP). <i>PLoS ONE</i> , 2020, 15, e0237974.	2.5	56
41	Incidence of hypertension and its risk factors in rural Kerala, India: A community-based cohort study. <i>Public Health</i> , 2012, 126, 25-32.	2.9	55
42	Prevalence of metabolic syndrome and its risk factors in Kerala, South India: Analysis of a community based cross-sectional study. <i>PLoS ONE</i> , 2018, 13, e0192372.	2.5	55
43	The Adherence to Medications in Diabetic Patients in Rural Kerala, India. <i>Asia-Pacific Journal of Public Health</i> , 2015, 27, NP513-NP523.	1.0	52
44	Lifestyle change in Kerala, India: needs assessment and planning for a community-based diabetes prevention trial. <i>BMC Public Health</i> , 2013, 13, 95.	2.9	51
45	Smoking cessation among diabetes patients: results of a pilot randomized controlled trial in Kerala, India. <i>BMC Public Health</i> , 2013, 13, 47.	2.9	51
46	Cluster randomised controlled trial of a peer-led lifestyle intervention program: study protocol for the Kerala diabetes prevention program. <i>BMC Public Health</i> , 2013, 13, 1035.	2.9	50
47	India. <i>Lancet, The</i> , 1998, 351, 1265-1275.	13.7	48
48	National noncommunicable disease monitoring survey (NNMS) in India: Estimating risk factor prevalence in adult population. <i>PLoS ONE</i> , 2021, 16, e0246712.	2.5	48
49	Access to pocket money and low educational performance predict tobacco use among adolescent boys in Kerala, India. <i>Preventive Medicine</i> , 2005, 41, 685-692.	3.4	45
50	Perceptions of barriers and facilitators in physical activity participation among women in Thiruvananthapuram City, India. <i>Global Health Promotion</i> , 2016, 23, 27-36.	1.3	44
51	Cultural adaptation of a peer-led lifestyle intervention program for diabetes prevention in India: the Kerala diabetes prevention program (K-DPP). <i>BMC Public Health</i> , 2017, 17, 974.	2.9	44
52	Effectiveness of a scalable group-based education and monitoring program, delivered by health workers, to improve control of hypertension in rural India: A cluster randomised controlled trial. <i>PLoS Medicine</i> , 2020, 17, e1002997.	8.4	41
53	Heterogeneous contributions of change in population distribution of body mass index to change in obesity and underweight. <i>ELife</i> , 2021, 10, .	6.0	41
54	Task-shifting for cardiovascular risk factor management: lessons from the Global Alliance for Chronic Diseases. <i>BMJ Global Health</i> , 2018, 3, e001092.	4.7	39

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55	Spatial, temporal, and demographic patterns in prevalence of chewing tobacco use in 204 countries and territories, 1990â€“2019: a systematic analysis from the Global Burden of Disease Study 2019. <i>Lancet Public Health</i> , The, 2021, 6, e482-e499.	10.0	38
56	Tobacco use among medical professionals in Kerala, India: The need for enhanced tobacco cessation and control efforts. <i>Addictive Behaviors</i> , 2006, 31, 2313-2318.	3.0	37
57	A group-based lifestyle intervention for diabetes prevention in low- and middle-income country: implementation evaluation of the Kerala Diabetes Prevention Program. <i>Implementation Science</i> , 2018, 13, 97.	6.9	35
58	Community-based group intervention for tobacco cessation in rural Tamil Nadu, India: A cluster randomized trial. <i>Journal of Substance Abuse Treatment</i> , 2012, 43, 53-60.	2.8	34
59	Impact of alcohol on coronary heart disease in Indian men. <i>Atherosclerosis</i> , 2010, 210, 531-535.	0.8	33
60	Developing a smoke free homes initiative in Kerala, India. <i>BMC Public Health</i> , 2015, 15, 480.	2.9	32
61	Prevalence-correlates-awareness-treatment and control of hypertension in kumarakom, kerala: baseline results of a community-based intervention program. <i>Indian Heart Journal</i> , 2006, 58, 28-33.	0.5	31
62	Preparedness of primary and secondary health facilities in India to address major noncommunicable diseases: results of a National Noncommunicable Disease Monitoring Survey (NNMS). <i>BMC Health Services Research</i> , 2021, 21, 757.	2.2	28
63	Distribution of 10-year and lifetime predicted risk for cardiovascular disease in the Indian Sentinel Surveillance Study population (cross-sectional survey results). <i>BMJ Open</i> , 2011, 1, e000068-e000068.	1.9	27
64	Balancing expectations amidst limitations: the dynamics of food decision-making in rural Kerala. <i>BMC Public Health</i> , 2015, 15, 644.	2.9	27
65	Adherence to Antihypertensive Treatment and Its Determinants Among Urban Slum Dwellers in Kolkata, India. <i>Asia-Pacific Journal of Public Health</i> , 2015, 27, NP74-NP84.	1.0	27
66	Smoking cessation and diabetes control in Kerala, India: an urgent need for health education. <i>Health Education Research</i> , 2009, 24, 839-845.	1.9	26
67	Seven-year longitudinal change in risk factors for non-communicable diseases in rural Kerala, India: The WHO STEPS approach. <i>PLoS ONE</i> , 2017, 12, e0178949.	2.5	26
68	Changing roles of grass-root level health workers in Kerala, India. <i>Health Policy and Planning</i> , 2001, 16, 171-179.	2.7	24
69	Baseline characteristics of participants in the Kerala Diabetes Prevention Program: a cluster randomized controlled trial of lifestyle intervention in Asian Indians. <i>Diabetic Medicine</i> , 2017, 34, 647-653.	2.3	24
70	A scoping review of non-communicable disease research capacity strengthening initiatives in low and middle-income countries. <i>Global Health Research and Policy</i> , 2019, 4, 31.	3.6	24
71	Mapping geographical inequalities in oral rehydration therapy coverage in low-income and middle-income countries, 2000â€“17. <i>The Lancet Global Health</i> , 2020, 8, e1038-e1060.	6.3	23
72	Obesity indicators that best predict type 2 diabetes in an Indian population: insights from the Kerala Diabetes Prevention Program. <i>Journal of Nutritional Science</i> , 2020, 9, e15.	1.9	23

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73	Are the PHQ-9 and GAD-7 Suitable for Use in India? A Psychometric Analysis. <i>Frontiers in Psychology</i> , 2021, 12, 676398.	2.1	23
74	Measurement of cholesterol and triglycerides from a dried blood spot in an Indian Council of Medical Researchâ€“World Health Organization multicentric survey on risk factors for noncommunicable diseases in India. <i>Journal of Clinical Lipidology</i> , 2012, 6, 33-41.	1.5	22
75	Sickness Absenteeism, Morbidity and Workplace Injuries among Iron and Steel workers â€“ A Cross Sectional Study from Karnataka, Southern India. <i>Australasian Medical Journal</i> , 2011, 4, 144-147.	0.1	20
76	Assessing Potential Risk Factors for Child Malnutrition in Rural Kerala, India. <i>Journal of Tropical Pediatrics</i> , 2001, 47, 350-355.	1.5	18
77	Impact of a community based intervention program on awareness, treatment and control of hypertension in a rural Panchayat, Kerala, India. <i>Indian Heart Journal</i> , 2013, 65, 504-509.	0.5	18
78	Prevalence and Correlates of Prehypertension Among Adults in Urban South India. <i>Asia-Pacific Journal of Public Health</i> , 2016, 28, 93S-101S.	1.0	18
79	Pattern of Tobacco Use and its Correlates among Older Adults in India. <i>Asian Pacific Journal of Cancer Prevention</i> , 2014, 15, 6195-6198.	1.2	18
80	How Socioeconomic Status Affects Birth and Death Rates in Rural Kerala, India: Results of a Health Study. <i>International Journal of Health Services</i> , 1993, 23, 373-386.	2.5	17
81	Association of high sensitive C-reactive protein (hsCRP) with established cardiovascular risk factors in the Indian population. <i>Nutrition and Metabolism</i> , 2011, 8, 19.	3.0	17
82	Successful Up-Scaled Population Interventions to Reduce Risk Factors for Non-Communicable Disease in Adults: Results from the International Community Interventions for Health (CIH) Project in China, India and Mexico. <i>PLoS ONE</i> , 2015, 10, e0120941.	2.5	17
83	Cluster randomised feasibility trial to improve the Control of Hypertension In Rural India (CHIRI): a study protocol. <i>BMJ Open</i> , 2016, 6, e012404.	1.9	17
84	A Risk Score to Predict Hypertension in Primary Care Settings in Rural India. <i>Asia-Pacific Journal of Public Health</i> , 2016, 28, 26S-31S.	1.0	17
85	Effect of a Peer-led Lifestyle Intervention on Individuals With Normal Weight Obesity: Insights From the Kerala Diabetes Prevention Program. <i>Clinical Therapeutics</i> , 2020, 42, 1618-1624.	2.5	17
86	Doctorsâ€™ self-reported physical activity, their counselling practices and their correlates in urban Trivandrum, South India: should a full-service doctor be a physically active doctor?. <i>British Journal of Sports Medicine</i> , 2015, 49, 413-416.	6.7	15
87	Hypertension in Rural India: The Contribution of Socioeconomic Position. <i>Journal of the American Heart Association</i> , 2020, 9, e014486.	3.7	15
88	Prevalence, Awareness, Treatment, and Control of Hypertension in Young Adults (20â€“39 Years) in Kerala, South India. <i>Frontiers in Cardiovascular Medicine</i> , 2022, 9, 765442.	2.4	15
89	Awareness, attitude and perceived barriers regarding implementation of the cigarettes and other tobacco products act in Assam, India. <i>Indian Journal of Cancer</i> , 2010, 47, 63.	0.2	14
90	Cost-effectiveness of a lifestyle intervention in high-risk individuals for diabetes in a low- and middle-income setting: Trial-based analysis of the Kerala Diabetes Prevention Program. <i>BMC Medicine</i> , 2020, 18, 251.	5.5	14

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91	Adapting and Validating the Global Physical Activity Questionnaire (GPAQ) for Trivandrum, India, 2013. Preventing Chronic Disease, 2016, 13, E53.	3.4	13
92	Baseline risk factor prevalence among adolescents aged 15–17 years old: findings from National Non-communicable Disease Monitoring Survey (NNMS) of India. BMJ Open, 2021, 11, e044066.	1.9	13
93	Gender differences and barriers women face in relation to accessing type 2 diabetes care: A systematic review. Indian Journal of Public Health, 2019, 63, 65.	0.6	13
94	Some health implications of globalization in Kerala, India. Bulletin of the World Health Organization, 2001, 79, 892-3.	3.3	13
95	Design and methodology of a community-based cluster-randomized controlled trial for dietary behaviour change in rural Kerala. Global Health Action, 2013, 6, 20993.	1.9	12
96	Conceptual model for dietary behaviour change at household level: a “best-fit” qualitative study using primary data. BMC Public Health, 2014, 14, 574.	2.9	12
97	Tobacco use during pregnancy in rural Jharkhand, India. International Journal of Gynecology and Obstetrics, 2015, 131, 170-173.	2.3	12
98	Reducing Health Risk Factors in Workplaces of Low and Middle-Income Countries. Public Health Nursing, 2015, 32, 478-487.	1.5	12
99	Targeted screening for prediabetes and undiagnosed diabetes in a community setting in India. Diabetes and Metabolic Syndrome: Clinical Research and Reviews, 2019, 13, 1785-1790.	3.6	12
100	Effects of a lifestyle intervention on cardiovascular risk among high-risk individuals for diabetes in a low- and middle-income setting: Secondary analysis of the Kerala Diabetes Prevention Program. Preventive Medicine, 2020, 139, 106068.	3.4	12
101	Impact of comprehensive cardiovascular risk reduction programme on risk factor clustering associated with elevated blood pressure in an Indian industrial population. Indian Journal of Medical Research, 2012, 135, 485-93.	1.0	12
102	Smoking Cessation Among Diabetic Patients in Kerala, India: 1-Year Follow-up Results From a Pilot Randomized Controlled Trial. Diabetes Care, 2014, 37, e256-e257.	8.6	11
103	Changing household dietary behaviours through community-based networks: A pragmatic cluster randomized controlled trial in rural Kerala, India. PLoS ONE, 2018, 13, e0201877.	2.5	11
104	Overweight, the major determinant of metabolic syndrome among industrial workers in Kerala, India: Results of a cross-sectional study. Diabetes and Metabolic Syndrome: Clinical Research and Reviews, 2019, 13, 3025-3030.	3.6	11
105	Participant recruitment into a community-based diabetes prevention trial in India: Learnings from the Kerala Diabetes Prevention Program. Contemporary Clinical Trials Communications, 2019, 15, 100382.	1.1	11
106	Screening Performance of Diabetes Risk Scores Among Asians and Whites in Rural Kerala, India. Preventing Chronic Disease, 2013, 10, E37.	3.4	11
107	Association of Monocyte Chemoattractant Protein-1 -2518 Polymorphism With Metabolic Syndrome in a South Indian Cohort. Metabolic Syndrome and Related Disorders, 2009, 7, 193-198.	1.3	10
108	Scale-up of the Kerala Diabetes Prevention Program (K-DPP) in Kerala, India: implementation evaluation findings. Translational Behavioral Medicine, 2020, 10, 5-12.	2.4	10

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109	High knowledge of Framework Convention on Tobacco Control provisions among local government representatives does not translate into effective implementation: Findings from Kerala, India. <i>Public Health</i> , 2013, 127, 178-181.	2.9	9
110	Developing a fully integrated tobacco curriculum in medical colleges in India. <i>BMC Medical Education</i> , 2015, 15, 90.	2.4	9
111	Smokeless tobacco use among patients with tuberculosis in Karnataka: the need for cessation services. <i>The National Medical Journal of India</i> , 2012, 25, 142-5.	0.3	9
112	Incidence of Tobacco Use Among Adults (15-64 Years) in Rural Kerala. <i>Asia-Pacific Journal of Public Health</i> , 2015, 27, NP626-NP629.	1.0	8
113	Enhancing an International Perspective in Public Health Teaching through Formalized University Partnerships. <i>Frontiers in Public Health</i> , 2017, 5, 36.	2.7	7
114	Combating corona virus disease 2019 and comorbidities: The Kerala experience for the first 100 days. <i>International Journal of Noncommunicable Diseases</i> , 2020, 5, 36.	0.2	7
115	Associations between Dietary Patterns and Cardiometabolic Risk Factors—A Longitudinal Analysis among High-Risk Individuals for Diabetes in Kerala, India. <i>Nutrients</i> , 2022, 14, 662.	4.1	7
116	Switching to smokeless tobacco, the most common smoking cessation method: results from the Global Adult Tobacco Survey, India. <i>Public Health</i> , 2016, 136, 172-174.	2.9	6
117	Additive association of knowledge and awareness on control of hypertension: a cross-sectional survey in rural India. <i>Journal of Hypertension</i> , 2021, 39, 107-116.	0.5	6
118	ASHA-Led Community-Based Groups to Support Control of Hypertension in Rural India Are Feasible and Potentially Scalable. <i>Frontiers in Medicine</i> , 2021, 8, 771822.	2.6	6
119	Changing The Debate About Health Research For Development. <i>Journal of Public Health Policy</i> , 2004, 25, 259-287.	2.0	5
120	Achutha Menon Centre Diabetes Risk Score. <i>Asia-Pacific Journal of Public Health</i> , 2015, 27, 147-154.	1.0	5
121	Confirmation of self-reported non-smoking status by salivary cotinine among diabetes patients in Kerala, India. <i>Clinical Epidemiology and Global Health</i> , 2015, 3, 44-46.	1.9	5
122	Cluster randomised controlled trial of behavioural intervention program: a study protocol for control of hypertension among teachers in schools in Kerala (CHATS-K), India. <i>BMC Public Health</i> , 2019, 19, 1718.	2.9	5
123	Control of hypertension among teachers in schools in Kerala (CHATS-K), India. <i>Indian Heart Journal</i> , 2020, 72, 416-420.	0.5	5
124	Prevalence, awareness, treatment and control of hypertension among adults aged 30 years and above in Barmer district, Rajasthan, India. <i>Indian Heart Journal</i> , 2021, 73, 236-238.	0.5	5
125	Self-reported physical activity and its correlates among adult women in the expanded part of Thiruvananthapuram City, India. <i>Indian Journal of Public Health</i> , 2015, 59, 136.	0.6	5
126	An open letter to the Executive Board of WHO. <i>Lancet</i> , The, 2002, 360, 1797.	13.7	4

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127	Low-level smoking among diabetes patients in India: a smoking cessation challenge. <i>Clinical Epidemiology and Global Health</i> , 2018, 6, 176-180.	1.9	4
128	Strengthening Noncommunicable Disease Research Capacity and Chronic Disease Outcomes in Low- and Middle-Income Countries in South Asia: Implementation and Evaluation of the ASCEND Program. <i>Asia-Pacific Journal of Public Health</i> , 2019, 31, 536-547.	1.0	4
129	Prevalence and underlying factors of depressive disorders among PhD students: a mixed-method study in the Indian context. <i>Journal of Applied Research in Higher Education</i> , 2022, 14, 1704-1717.	1.9	4
130	Does Increased Knowledge of Risk and Complication of Smoking on Diabetes Affect Quit Rate? Findings from a Randomized Controlled Trial in Kerala, India. <i>Tobacco Use Insights</i> , 2014, 7, TUI.S15583.	1.6	3
131	Prevalence, Awareness, Treatment, Control and Correlates of Hypertension Among Industrial Workers in Kerala, India. <i>Journal of Hypertension</i> , 2015, 33, e9.	0.5	3
132	Development of a Tool to Stage Households' Readiness to Change Dietary Behaviours in Kerala, India. <i>PLoS ONE</i> , 2016, 11, e0165599.	2.5	3
133	Awareness of Stroke Warning Symptoms, Risk Factors, and Response to Acute Stroke in Biswanath District, Assam, India. <i>Journal of Stroke Medicine</i> , 2020, 3, 88-91.	0.3	3
134	Bullying victimization and its associated factors among adolescents in Kozhikode district, Kerala, India: a mixed-methods study. <i>Wellcome Open Research</i> , 0, 6, 223.	1.8	3
135	Risk of progression to hypertension from prehypertension and normal blood pressure: Results from a prospective cohort study among industrial workers in Kerala, India. <i>Heart and Mind (Mumbai, India)</i> , 2018, 2, 106.	0.6	3
136	Determinants of Health Service Utilization Among Adults at High Risk of Developing Type 2 Diabetes in Kerala, India. <i>Asia-Pacific Journal of Public Health</i> , 2022, 34, 377-383.	1.0	3
137	Effectiveness of a School-Based Educational Intervention to Improve Hypertension Control Among Schoolteachers: A Cluster-Randomized Controlled Trial. <i>Journal of the American Heart Association</i> , 2022, 11, e023145.	3.7	3
138	Trends and correlates of hardcore smoking in India: findings from the Global Adult Tobacco Surveys 1 & 2. <i>Wellcome Open Research</i> , 0, 6, 353.	1.8	3
139	A community-based study on electrocardiographic abnormalities of adult population from South India - Findings from a cross sectional survey. <i>Indian Heart Journal</i> , 2022, 74, 187-193.	0.5	3
140	P2-128 Distribution of 10-year and lifetime predicted risk for cardiovascular disease in the Indian sentinel surveillance study population. <i>Journal of Epidemiology and Community Health</i> , 2011, 65, A255-A256.	3.7	2
141	PP034 FEASIBILITY OF DISEASE CENTERED SMOKING CESSATION AMONG DIABETES PATIENTS. <i>Respiratory Medicine</i> , 2013, 107, S16.	2.9	2
142	Community Interventions for Health can support clinicians in advising patients to reduce tobacco use, improve dietary intake and increase physical activity. <i>Journal of Clinical Nursing</i> , 2016, 25, 3167-3175.	3.0	2
143	Strategic, Successful, and Sustained Synergy: The Global Alliance for Chronic Diseases Hypertension Program. <i>Global Heart</i> , 2020, 14, 391.	2.3	2
144	Multi-morbidity and blood pressure control: Results of a cross-sectional study among school teachers in Kerala, India. <i>Indian Journal of Public Health</i> , 2021, 65, 190.	0.6	2

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145	Effectiveness of a physical activity intervention program using peer support among sedentary women in Thiruvananthapuram City, India: results of a non-randomized quasi experimental study. Wellcome Open Research, 2021, 6, 87.	1.8	2
146	Healthcare utilisation: a mixed-method study among tea garden workers in Indian context. Journal of Health Research, 2022, 36, 1007-1017.	0.8	2
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