Ionut Bebu

List of Publications by Year in descending order

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IONUT REBU

#	Article	IF	CITATIONS
1	Plasma advanced glycation end products and the subsequent risk of microvascular complications in type 1 diabetes in the DCCT/EDIC. BMJ Open Diabetes Research and Care, 2022, 10, e002667.	1.2	12
2	Early Trajectory of Estimated Glomerular Filtration Rate and Long-term Advanced Kidney and Cardiovascular Complications in Type 1 Diabetes. Diabetes Care, 2022, 45, 585-593.	4.3	1
3	Continuous Clucose Monitoring in Adults With Type 1 Diabetes With 35 Years Duration From the DCCT/EDIC Study. Diabetes Care, 2022, 45, 659-665.	4.3	14
4	Brain Structure Among Middle-aged and Older Adults With Long-standing Type 1 Diabetes in the DCCT/EDIC Study. Diabetes Care, 2022, 45, 1779-1787.	4.3	7
5	Refractive Error and Retinopathy Outcomes in Type 1 Diabetes. Ophthalmology, 2021, 128, 554-560.	2.5	4
6	Moderation of the effect of glycemia on the risk of cardiovascular disease in type 1 diabetes: The DCCT/EDIC study. Diabetes Research and Clinical Practice, 2021, 171, 108591.	1.1	9
7	Genetic Risk Factors for CVD in Type 1 Diabetes: The DCCT/EDIC Study. Diabetes Care, 2021, 44, 1309-1316.	4.3	4
8	Costâ€efficient clinical studies with continuous time survival outcomes. Statistics in Medicine, 2021, 40, 3682-3694.	0.8	0
9	Associations of Microvascular Complications With the Risk of Cardiovascular Disease in Type 1 Diabetes. Diabetes Care, 2021, 44, 1499-1505.	4.3	20
10	Cognitive performance declines in older adults with type 1 diabetes: results from 32 years of follow-up in the DCCT and EDIC Study. Lancet Diabetes and Endocrinology,the, 2021, 9, 436-445.	5.5	56
11	Study of emotional distress in a comparative effectiveness trial of diabetes treatments: Rationale and design. Contemporary Clinical Trials, 2021, 107, 106366.	0.8	7
12	The Beneficial Effects of Earlier Versus Later Implementation of Intensive Therapy in Type 1 Diabetes. Diabetes Care, 2021, 44, 2225-2230.	4.3	21
13	An Observational Study of the Equivalence of Age and Duration of Diabetes to Glycemic Control Relative to the Risk of Complications in the Combined Cohorts of the DCCT/EDIC Study. Diabetes Care, 2020, 43, 2478-2484.	4.3	19
14	Longitudinal Plasma Kallikrein Levels and Their Association With the Risk of Cardiovascular Disease Outcomes in Type 1 Diabetes in DCCT/EDIC. Diabetes, 2020, 69, 2440-2445.	0.3	2
15	The minimum intensity of a mixed exposure that increases the risk of an outcome. Statistics in Medicine, 2020, 39, 4016-4024.	0.8	0
16	Models to Assess the Association of a Semiquantitative Exposure With Outcomes. American Journal of Epidemiology, 2020, 189, 1573-1582.	1.6	2
17	Comment on Miller and Orchard: Understanding Metabolic Memory: A Tale of Two Studies. Diabetes 2020;69:291–299. Diabetes, 2020, 69, e7-e8	0.3	3
18	Prevalence of microvascular and macrovascular disease in the Glycemia Reduction Approaches in Diabetes - A Comparative Effectiveness (GRADE) Study cohort. Diabetes Research and Clinical Practice, 2020, 165, 108235.	1.1	20

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19	Risk Factors for First and Subsequent CVD Events in Type 1 Diabetes: The DCCT/EDIC Study. Diabetes Care, 2020, 43, 867-874.	4.3	61
20	Closed testing using surrogate hypotheses with restricted alternatives. PLoS ONE, 2019, 14, e0219520.	1.1	1
21	Immune Complexes and the Risk of CVD in Type 1 Diabetes. Diabetes, 2019, 68, 1853-1860.	0.3	15
22	Rationale and Design for a GRADE Substudy of Continuous Glucose Monitoring. Diabetes Technology and Therapeutics, 2019, 21, 682-690.	2.4	4
23	Early Glomerular Hyperfiltration and Long-Term Kidney Outcomes in Type 1 Diabetes. Clinical Journal of the American Society of Nephrology: CJASN, 2019, 14, 854-861.	2.2	37
24	Serum apolipoproteins and apolipoprotein-defined lipoprotein subclasses: a hypothesis-generating prospective study of cardiovascular events in T1D. Journal of Lipid Research, 2019, 60, 1432-1439.	2.0	24
25	Mediation of the Effect of Glycemia on the Risk of CVD Outcomes in Type 1 Diabetes: The DCCT/EDIC Study. Diabetes Care, 2019, 42, 1284-1289.	4.3	42
26	Risk Factors for Kidney Disease in Type 1 Diabetes. Diabetes Care, 2019, 42, 883-890.	4.3	76
27	Risk Factors for Retinopathy in Type 1 Diabetes: The DCCT/EDIC Study. Diabetes Care, 2019, 42, 875-882.	4.3	114
28	Association of Insulin Dose, Cardiometabolic Risk Factors, and Cardiovascular Disease in Type 1 Diabetes During 30 Years of Follow-up in the DCCT/EDIC Study. Diabetes Care, 2019, 42, 657-664.	4.3	32
29	Response to Comment on Braffett et al. Association of Insulin Dose, Cardiometabolic Risk Factors, and Cardiovascular Disease in Type 1 Diabetes During 30 Years of Follow-up in the DCCT/EDIC Study. Diabetes Care 2019;42:657–664. Diabetes Care, 2019, 42, e137-e137.	4.3	0
30	Properties of composite time to first event versus joint marginal analyses of multiple outcomes. Statistics in Medicine, 2018, 37, 3918-3930.	0.8	3
31	Optimal screening schedules for disease progression with application to diabetic retinopathy. Biostatistics, 2018, 19, 1-13.	0.9	9
32	The relationship of blood glucose with cardiovascular disease is mediated over time by traditional risk factors in type 1 diabetes: the DCCT/EDIC study. Diabetologia, 2017, 60, 2084-2091.	2.9	62
33	Generalized Confidence Intervals and Fiducial Intervals for Some Epidemiological Measures. International Journal of Environmental Research and Public Health, 2016, 13, 605.	1.2	6
34	Probabilistic measures of costâ€effectiveness. Statistics in Medicine, 2016, 35, 3976-3986.	0.8	2
35	Environmental data analysis based on the gamma distribution: compliance assessment using tolerance limits and exceedance fractions. Environmetrics, 2016, 27, 370-376.	0.6	0
36	Albuminuria Changes and Cardiovascular and Renal Outcomes in Type 1 Diabetes: The DCCT/EDIC Study. Clinical Journal of the American Society of Nephrology: CJASN, 2016, 11, 1969-1977.	2.2	93

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37	Characterizing the Association Between Alcohol and HIV Virologic Failure in a Military Cohort on Antiretroviral Therapy. Alcoholism: Clinical and Experimental Research, 2016, 40, 529-535.	1.4	30
38	Large sample inference for a win ratio analysis of a composite outcome based on prioritized components. Biostatistics, 2016, 17, 178-187.	0.9	77
39	Parametric cost-effectiveness inference with skewed data. Computational Statistics and Data Analysis, 2016, 94, 210-220.	0.7	5
40	D-Dimer Levels before HIV Seroconversion Remain Elevated Even after Viral Suppression and Are Associated with an Increased Risk of Non-AIDS Events. PLoS ONE, 2016, 11, e0152588.	1.1	50
41	Application of the Wei–Lachin multivariate one-directional test to multiple event-time outcomes. Clinical Trials, 2015, 12, 627-633.	0.7	25
42	Inference for Surrogate Endpoint Validation in the Binary Case. Journal of Biopharmaceutical Statistics, 2015, 25, 1272-1284.	0.4	1