## **Anand Kumar**

## List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/4805749/publications.pdf

Version: 2024-02-01

76 papers 21,408 citations

40 h-index 79541 73 g-index

80 all docs

80 docs citations

80 times ranked

18507 citing authors

#	Article	IF	CITATIONS
1	Duration of hypotension before initiation of effective antimicrobial therapy is the critical determinant of survival in human septic shock*. Critical Care Medicine, 2006, 34, 1589-1596.	0.4	7,176
2	Surviving Sepsis Campaign: International Guidelines for Management of Sepsis and Septic Shock: 2016. Intensive Care Medicine, 2017, 43, 304-377.	3.9	4,590
3	Surviving Sepsis Campaign: International Guidelines for Management of Sepsis and Septic Shock: 2016. Critical Care Medicine, 2017, 45, 486-552.	0.4	2,336
4	Initiation of Inappropriate Antimicrobial Therapy Results in a Fivefold Reduction of Survival in Human Septic Shock. Chest, 2009, 136, 1237-1248.	0.4	1,941
5	Critically III Patients With 2009 Influenza A(H1N1) Infection in Canada. JAMA - Journal of the American Medical Association, 2009, 302, 1872.	3.8	1,197
6	Early combination antibiotic therapy yields improved survival compared with monotherapy in septic shock: A propensity-matched analysis*. Critical Care Medicine, 2010, 38, 1773-1785.	0.4	422
7	Acute kidney injury in septic shock: clinical outcomes and impact of duration of hypotension prior to initiation of antimicrobial therapy. Intensive Care Medicine, 2009, 35, 871-881.	3.9	358
8	A survival benefit of combination antibiotic therapy for serious infections associated with sepsis and septic shock is contingent only on the risk of death: A meta-analytic/meta-regression study. Critical Care Medicine, 2010, 38, 1651-1664.	0.4	312
9	The Duration of Hypotension before the Initiation of Antibiotic Treatment Is a Critical Determinant of Survival in a Murine Model of Escherichia coli Septic Shock: Association with Serum Lactate and Inflammatory Cytokine Levels. Journal of Infectious Diseases, 2006, 193, 251-258.	1.9	197
10	Association between Source of Infection and Hospital Mortality in Patients Who Have Septic Shock. American Journal of Respiratory and Critical Care Medicine, 2014, 189, 1204-1213.	2.5	177
11	The efficacy and safety of plasma exchange in patients with sepsis and septic shock: a systematic review and meta-analysis. Critical Care, 2014, 18, 699.	2.5	143
12	Antimicrobials: a global alliance for optimizing their rational use in intra-abdominal infections (AGORA). World Journal of Emergency Surgery, 2016, 11, 33.	2.1	130
13	Changing Definitions of Sepsis. Turkish Journal of Anaesthesiology and Reanimation, 2017, 45, 129-138.	0.8	121
14	Permissive Underfeeding or Standard Enteral Feeding in High– and Low–Nutritional-Risk Critically Ill Adults. <i>Post Hoc</i> Analysis of the PermiT Trial. American Journal of Respiratory and Critical Care Medicine, 2017, 195, 652-662.	2.5	115
15	Neutrophils-related host factors associated with severe disease and fatality in patients with influenza infection. Nature Communications, 2019, 10, 3422.	5.8	114
16	Early intravenous unfractionated heparin and mortality in septic shock*. Critical Care Medicine, 2008, 36, 2973-2979.	0.4	109
17	A novel immune biomarker <i>IFI27</i> discriminates between influenza and bacteria in patients with suspected respiratory infection. European Respiratory Journal, 2017, 49, 1602098.	3.1	100
18	Vancomycin pharmacodynamics and survival in patients with methicillin-resistant Staphylococcus aureus-associated septic shock. International Journal of Antimicrobial Agents, 2013, 41, 255-260.	1.1	99

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19	Early versus late oseltamivir treatment in severely ill patients with 2009 pandemic influenza A (H1N1): speed is life. Journal of Antimicrobial Chemotherapy, 2011, 66, 959-963.	1.3	85
20	The influence of corticosteroid treatment on the outcome of influenza A(H1N1pdm09)-related critical illness. Critical Care, 2016, 20, 75.	2.5	80
21	An alternate pathophysiologic paradigm of sepsis and septic shock. Virulence, 2014, 5, 80-97.	1.8	73
22	Early reversible acute kidney injury is associated with improved survival in septic shock. Journal of Critical Care, 2014, 29, 711-717.	1.0	73
23	Early Antimicrobial Therapy in Severe Sepsis and Septic Shock. Current Infectious Disease Reports, 2010, 12, 336-344.	1.3	70
24	Cardiovascular response to dobutamine stress predicts outcome in severe sepsis and septic shock. Critical Care, 2008, 12, R35.	2.5	63
25	Antibiotic management of suspected nosocomial ICU-acquired infection: Does prolonged empiric therapy improve outcome?. Intensive Care Medicine, 2007, 33, 1369-1378.	3.9	62
26	Optimizing Antimicrobial Therapy in Sepsis and Septic Shock. Critical Care Clinics, 2009, 25, 733-751.	1.0	59
27	Plasma metabolomics for the diagnosis and prognosis of H1N1 influenza pneumonia. Critical Care, 2017, 21, 97.	2.5	59
28	Culture-Negative Septic Shock Compared With Culture-Positive Septic Shock: A Retrospective Cohort Study. Critical Care Medicine, 2018, 46, 506-512.	0.4	56
29	Anti-Thrombotic Therapy to Ameliorate Complications of COVID-19 (ATTACC): Study design and methodology for an international, adaptive Bayesian randomized controlled trial. Clinical Trials, 2020, 17, 491-500.	0.7	56
30	Transforming growth factor- $\hat{l}^21$ blocks in vitro cardiac myocyte depression induced by tumor necrosis factor- $\hat{l}_+$ , interleukin- $1\hat{l}^2$ , and human septic shock serum. Critical Care Medicine, 2007, 35, 358-364.	0.4	55
31	Critical care capacity in Canada: results of a national cross-sectional study. Critical Care, 2015, 19, 133.	2.5	55
32	Right Dose, Right Now: Customized Drug Dosing in the Critically Ill. Critical Care Medicine, 2017, 45, 331-336.	0.4	55
33	Mycobacterium tuberculosis Septic Shock. Chest, 2013, 144, 474-482.	0.4	54
34	Decontamination of N95 masks for re-use employing 7 widely available sterilization methods. PLoS ONE, 2020, 15, e0243965.	1.1	54
35	Nitric oxide-dependent and -independent mechanisms are involved in TNF-α-induced depression of cardiac myocyte contractility. American Journal of Physiology - Regulatory Integrative and Comparative Physiology, 2007, 292, R1900-R1906.	0.9	51
36	Optimizing Antimicrobial Therapy of Sepsis and Septic Shock: Focus on Antibiotic Combination Therapy. Seminars in Respiratory and Critical Care Medicine, 2015, 36, 154-166.	0.8	49

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37	The Global Alliance for Infections in Surgery: defining a model for antimicrobial stewardship—results from an international cross-sectional survey. World Journal of Emergency Surgery, 2017, 12, 34.	2.1	47
38	Preload-independent mechanisms contribute to increased stroke volume following large volume saline infusion in normal volunteers: a prospective interventional study. Critical Care, 2004, 8, R128.	2.5	46
39	Empiric Antimicrobial Therapy in Severe Sepsis and Septic Shock: Optimizing Pathogen Clearance. Current Infectious Disease Reports, 2015, 17, 493.	1.3	46
40	Effect of large volume infusion on left ventricular volumes, performance and contractility parameters in normal volunteers. Intensive Care Medicine, 2004, 30, 1361-9.	3.9	43
41	The Effect of Inadequate Initial Empiric Antimicrobial Treatment on Mortality in Critically Ill Patients with Bloodstream Infections: A Multi-Centre Retrospective Cohort Study. PLoS ONE, 2016, 11, e0154944.	1.1	40
42	Experimental Human Endotoxemia Is Associated With Depression of Load-Independent Contractility Indices. Chest, 2004, 126, 860-867.	0.4	37
43	The Occurrence and Impact of Bacterial Organisms Complicating Critical Care Illness Associated With 2009 Influenza A(H1N1) Infection. Chest, 2013, 144, 39-47.	0.4	34
44	Low-Dose Corticosteroid Treatment in Septic Shock. Critical Care Medicine, 2014, 42, 2333-2341.	0.4	31
45	Systematic Bias in Meta-Analyses of Time to Antimicrobial in Sepsis Studies. Critical Care Medicine, 2016, 44, e234-e235.	0.4	28
46	7 versus 14Âdays of antibiotic treatment for critically ill patients with bloodstream infection: a pilot randomized clinical trial. Trials, 2018, 19, 111.	0.7	28
47	Bacteremia Antibiotic Length Actually Needed for Clinical Effectiveness (BALANCE): study protocol for a pilot randomized controlled trial. Trials, 2015, 16, 173.	0.7	24
48	Fungicidal versus fungistatic therapy of invasive <i>Candida</i> infection in non-neutropenic adults: a meta-analysis. Mycology, 2018, 9, 116-128.	2.0	24
49	$\hat{l}^2$ -lactam antibiotic versus combined $\hat{l}^2$ -lactam antibiotics and single daily dosing regimens of aminoglycosides for treating serious infections: A meta-analysis. International Journal of Antimicrobial Agents, 2020, 55, 105839.	1.1	21
50	Treatment in Disproportionately Minority Hospitals Is Associated With Increased Risk of Mortality in Sepsis: A National Analysis*. Critical Care Medicine, 2020, 48, 962-967.	0.4	21
51	Aerosol SARS-CoV-2 in hospitals and long-term care homes during the COVID-19 pandemic. PLoS ONE, 2021, 16, e0258151.	1.1	20
52	Optimizing Antimicrobial Therapy in Sepsis and Septic Shock. Critical Care Nursing Clinics of North America, 2011, 23, 79-97.	0.4	19
53	Non-pulmonary infections but not specific pathogens are associated with increased risk of AKI in septic shock. Intensive Care Medicine, 2014, 40, 1080-1088.	3.9	15
54	Septic shock in chronic dialysis patients: clinical characteristics, antimicrobial therapy and mortality. Intensive Care Medicine, 2016, 42, 222-232.	3.9	14

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55	Pathway mapping of leukocyte transcriptome in influenza patients reveals distinct pathogenic mechanisms associated with progression to severe infection. BMC Medical Genomics, 2020, 13, 28.	0.7	14
56	The impact of obesity in cirrhotic patients with septic shock: A retrospective cohort study. Liver International, 2018, 38, 1230-1241.	1.9	11
57	Outcomes With Severe Blastomycosis and Respiratory Failure in the United States. Clinical Infectious Diseases, 2021, 72, 1603-1607.	2.9	11
58	Impact of intensive care unit supportive care on the physiology of Ebola virus disease in a universally lethal non-human primate model. Intensive Care Medicine Experimental, 2019, 7, 54.	0.9	11
59	Delivering Prolonged Intensive Care to a Non-human Primate: A High Fidelity Animal Model of Critical Illness. Scientific Reports, 2017, 7, 1204.	1.6	10
60	Antimicrobial Delay and Outcome in Severe Sepsis. Critical Care Medicine, 2014, 42, e802.	0.4	9
61	Predicting in-hospital mortality in pneumonia-associated septic shock patients using a classification and regression tree: a nested cohort study. Journal of Intensive Care, 2018, 6, 66.	1.3	9
62	Catheter-Related and Infusion-Related Sepsis. Critical Care Clinics, 2013, 29, 989-1015.	1.0	8
63	Sepsis: Diagnostic and Therapeutic Challenges. BioMed Research International, 2016, 2016, 1-2.	0.9	8
64	Persistence of live virus in critically ill patients infected with SARS-COV-2: a prospective observational study. Critical Care, 2022, 26, 10.	2.5	7
65	Les immunoglobulines intraveineuses pour le choc septique : une enquête nationale canadienne auprès des médecins intensivistes et spécialistes des maladies infectieuses. Canadian Journal of Anaesthesia, 2021, 68, 782-790.	0.7	6
66	The impact of delayed source control and antimicrobial therapy in 196 patients with cholecystitis-associated septic shock: a cohort analysis. Canadian Journal of Surgery, 2019, 62, 189-198.	0.5	6
67	Caloric intake and the fat-to-carbohydrate ratio in hypercapnic acute respiratory failure: Post-hoc analysis of the PermiT trial. Clinical Nutrition ESPEN, 2019, 29, 175-182.	0.5	3
68	Extra-cardiac endovascular infections in the critically ill. Intensive Care Medicine, 2020, 46, 173-181.	3.9	3
69	Pandemic H1N1 influenza. Journal of Thoracic Disease, 2011, 3, 262-70.	0.6	3
70	A GEOGRAPHICALLY AND TEMPORALLY COMPREHENSIVE ANALYSIS OF SEPTIC SHOCK: IMPACT OF AGE, SEX AND SOCIOECONOMIC STATUS Critical Care Medicine, 2005, 33, A79.	0.4	2
71	Characterization of Ebola Virus Risk to Bedside Providers in an Intensive Care Environment. Microorganisms, 2021, 9, 498.	1.6	1
72	Épidémiologie de l'utilisation de l'immunoglobuline intraveineuse dans les cas de choc septiqueÂ: un analyse de cohorte rétrospective de la base de données Premier Healthcare. Canadian Journal of Anaesthesia, 2021, 68, 1641-1650.	ne 0.7	1

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73	Standard hospital blanket warming cabinets can be utilized for complete moist heat SARS-CoV2 inactivation of contaminated N95 masks for re-use. Scientific Reports, 2021, 11, 18316.	1.6	1
74	Preface. Critical Care Clinics, 2009, 25, xiii-xiv.	1.0	0
75	The author replies. Critical Care Medicine, 2018, 46, e964-e965.	0.4	O
76	A First-Line Antiretroviral Therapy-Resistant HIV Patient with Rhinoentomophthoromycosis. Indian Journal of Medical Microbiology, 2018, 36, 136-139.	0.3	0