

Anand Kumar

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The third column is the impact factor (IF) of the journal, and the fourth column is the number of citations of the article.

73
papers

16,655
citations

35
h-index

80
g-index

80
ext. papers

19,576
ext. citations

5.9
avg, IF

5.85
L-index

#	Paper	IF	Citations
73	Duration of hypotension before initiation of effective antimicrobial therapy is the critical determinant of survival in human septic shock. <i>Critical Care Medicine</i> , 2006 , 34, 1589-96	1.4	6027
72	Surviving Sepsis Campaign: International Guidelines for Management of Sepsis and Septic Shock: 2016. <i>Intensive Care Medicine</i> , 2017 , 43, 304-377	14.5	3178
71	Initiation of inappropriate antimicrobial therapy results in a fivefold reduction of survival in human septic shock. <i>Chest</i> , 2009 , 136, 1237-1248	5.3	1735
70	Surviving Sepsis Campaign: International Guidelines for Management of Sepsis and Septic Shock: 2016. <i>Critical Care Medicine</i> , 2017 , 45, 486-552	1.4	1683
69	Critically ill patients with 2009 influenza A(H1N1) infection in Canada. <i>JAMA - Journal of the American Medical Association</i> , 2009 , 302, 1872-9	27.4	945
68	Early combination antibiotic therapy yields improved survival compared with monotherapy in septic shock: a propensity-matched analysis. <i>Critical Care Medicine</i> , 2010 , 38, 1773-85	1.4	335
67	Acute kidney injury in septic shock: clinical outcomes and impact of duration of hypotension prior to initiation of antimicrobial therapy. <i>Intensive Care Medicine</i> , 2009 , 35, 871-81	14.5	275
66	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. <i>Critical Care Medicine</i> , 2010 , 38, 1651-64	1.4	250
65	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. <i>Journal of Infectious Diseases</i> , 2006 , 193, 251-8	7	154
64	Association between source of infection and hospital mortality in patients who have septic shock. <i>American Journal of Respiratory and Critical Care Medicine</i> , 2014 , 189, 1204-13	10.2	130
63	Antimicrobials: a global alliance for optimizing their rational use in intra-abdominal infections (AGORA). <i>World Journal of Emergency Surgery</i> , 2016 , 11, 33	9.2	95
62	The efficacy and safety of plasma exchange in patients with sepsis and septic shock: a systematic review and meta-analysis. <i>Critical Care</i> , 2014 , 18, 699	10.8	95
61	Early intravenous unfractionated heparin and mortality in septic shock. <i>Critical Care Medicine</i> , 2008 , 36, 2973-9	1.4	91
60	Vancomycin pharmacodynamics and survival in patients with methicillin-resistant Staphylococcus aureus-associated septic shock. <i>International Journal of Antimicrobial Agents</i> , 2013 , 41, 255-60	14.3	87
59	Permissive Underfeeding or Standard Enteral Feeding in High- and Low-Nutritional-Risk Critically Ill Adults. Post Hoc Analysis of the PermiT Trial. <i>American Journal of Respiratory and Critical Care Medicine</i> , 2017 , 195, 652-662	10.2	86
58	Early versus late oseltamivir treatment in severely ill patients with 2009 pandemic influenza A (H1N1): speed is life. <i>Journal of Antimicrobial Chemotherapy</i> , 2011 , 66, 959-63	5.1	73
57	Neutrophils-related host factors associated with severe disease and fatality in patients with influenza infection. <i>Nature Communications</i> , 2019 , 10, 3422	17.4	66

56	Changing Definitions of Sepsis. <i>Turkish Journal of Anaesthesiology and Reanimation</i> , 2017 , 45, 129-138	0.7	64
55	The influence of corticosteroid treatment on the outcome of influenza A(H1N1pdm09)-related critical illness. <i>Critical Care</i> , 2016 , 20, 75	10.8	60
54	An alternate pathophysiologic paradigm of sepsis and septic shock: implications for optimizing antimicrobial therapy. <i>Virulence</i> , 2014 , 5, 80-97	4.7	59
53	A novel immune biomarker discriminates between influenza and bacteria in patients with suspected respiratory infection. <i>European Respiratory Journal</i> , 2017 , 49,	13.6	55
52	Optimizing antimicrobial therapy in sepsis and septic shock. <i>Critical Care Clinics</i> , 2009 , 25, 733-51, viii	4.5	54
51	Antibiotic management of suspected nosocomial ICU-acquired infection: does prolonged empiric therapy improve outcome?. <i>Intensive Care Medicine</i> , 2007 , 33, 1369-78	14.5	52
50	Early reversible acute kidney injury is associated with improved survival in septic shock. <i>Journal of Critical Care</i> , 2014 , 29, 711-7	4	49
49	Transforming growth factor-beta1 blocks in vitro cardiac myocyte depression induced by tumor necrosis factor-alpha, interleukin-1beta, and human septic shock serum. <i>Critical Care Medicine</i> , 2007 , 35, 358-64	1.4	49
48	Early antimicrobial therapy in severe sepsis and septic shock. <i>Current Infectious Disease Reports</i> , 2010 , 12, 336-44	3.9	48
47	Cardiovascular response to dobutamine stress predicts outcome in severe sepsis and septic shock. <i>Critical Care</i> , 2008 , 12, R35	10.8	48
46	Right Dose, Right Now: Customized Drug Dosing in the Critically Ill. <i>Critical Care Medicine</i> , 2017 , 45, 331-336	3.6	45
45	Nitric oxide-dependent and -independent mechanisms are involved in TNF-alpha -induced depression of cardiac myocyte contractility. <i>American Journal of Physiology - Regulatory Integrative and Comparative Physiology</i> , 2007 , 292, R1900-6	3.2	44
44	Optimizing antimicrobial therapy of sepsis and septic shock: focus on antibiotic combination therapy. <i>Seminars in Respiratory and Critical Care Medicine</i> , 2015 , 36, 154-66	3.9	43
43	Plasma metabolomics for the diagnosis and prognosis of H1N1 influenza pneumonia. <i>Critical Care</i> , 2017 , 21, 97	10.8	42
42	Critical care capacity in Canada: results of a national cross-sectional study. <i>Critical Care</i> , 2015 , 19, 133	10.8	42
41	Mycobacterium tuberculosis septic shock. <i>Chest</i> , 2013 , 144, 474-482	5.3	38
40	Empiric antimicrobial therapy in severe sepsis and septic shock: optimizing pathogen clearance. <i>Current Infectious Disease Reports</i> , 2015 , 17, 493	3.9	37
39	Preload-independent mechanisms contribute to increased stroke volume following large volume saline infusion in normal volunteers: a prospective interventional study. <i>Critical Care</i> , 2004 , 8, R128-36	10.8	37

38	The defining a model for antimicrobial stewardship-results from an international cross-sectional survey. <i>World Journal of Emergency Surgery</i> , 2017 , 12, 34	9.2	35
37	Effect of large volume infusion on left ventricular volumes, performance and contractility parameters in normal volunteers. <i>Intensive Care Medicine</i> , 2004 , 30, 1361-9	14.5	35
36	Culture-Negative Septic Shock Compared With Culture-Positive Septic Shock: A Retrospective Cohort Study. <i>Critical Care Medicine</i> , 2018 , 46, 506-512	1.4	34
35	Experimental human endotoxemia is associated with depression of load-independent contractility indices: prevention by the lipid analogue E5531. <i>Chest</i> , 2004 , 126, 860-7	5.3	33
34	Anti-Thrombotic Therapy to Ameliorate Complications of COVID-19 (ATTACC): Study design and methodology for an international, adaptive Bayesian randomized controlled trial. <i>Clinical Trials</i> , 2020 , 17, 491-500	2.2	33
33	The occurrence and impact of bacterial organisms complicating critical care illness associated with 2009 influenza A(H1N1) infection. <i>Chest</i> , 2013 , 144, 39-47	5.3	28
32	Low-dose corticosteroid treatment in septic shock: a propensity-matching study. <i>Critical Care Medicine</i> , 2014 , 42, 2333-41	1.4	27
31	Decontamination of N95 masks for re-use employing 7 widely available sterilization methods. <i>PLoS ONE</i> , 2020 , 15, e0243965	3.7	27
30	The Effect of Inadequate Initial Empiric Antimicrobial Treatment on Mortality in Critically Ill Patients with Bloodstream Infections: A Multi-Centre Retrospective Cohort Study. <i>PLoS ONE</i> , 2016 , 11, e0154944	3.7	26
29	Systematic Bias in Meta-Analyses of Time to Antimicrobial in Sepsis Studies. <i>Critical Care Medicine</i> , 2016 , 44, e234-5	1.4	22
28	7 versus 14 days of antibiotic treatment for critically ill patients with bloodstream infection: a pilot randomized clinical trial. <i>Trials</i> , 2018 , 19, 111	2.8	21
27	Bacteremia Antibiotic Length Actually Needed for Clinical Effectiveness (BALANCE): study protocol for a pilot randomized controlled trial. <i>Trials</i> , 2015 , 16, 173	2.8	19
26	Fungicidal versus fungistatic therapy of invasive infection in non-neutropenic adults: a meta-analysis. <i>Mycology</i> , 2018 , 9, 116-128	3.7	16
25	Optimizing antimicrobial therapy in sepsis and septic shock. <i>Critical Care Nursing Clinics of North America</i> , 2011 , 23, 79-97	1.5	16
24	β-lactam antibiotic versus combined β-lactam antibiotics and single daily dosing regimens of aminoglycosides for treating serious infections: A meta-analysis. <i>International Journal of Antimicrobial Agents</i> , 2020 , 55, 105839	14.3	14
23	Non-pulmonary infections but not specific pathogens are associated with increased risk of AKI in septic shock. <i>Intensive Care Medicine</i> , 2014 , 40, 1080-8	14.5	11
22	The impact of obesity in cirrhotic patients with septic shock: A retrospective cohort study. <i>Liver International</i> , 2018 , 38, 1230-1241	7.9	10
21	Septic shock in chronic dialysis patients: clinical characteristics, antimicrobial therapy and mortality. <i>Intensive Care Medicine</i> , 2016 , 42, 222-32	14.5	9

20	Catheter-related and infusion-related sepsis. <i>Critical Care Clinics</i> , 2013 , 29, 989-1015	4.5	8
19	Antimicrobial delay and outcome in severe sepsis. <i>Critical Care Medicine</i> , 2014 , 42, e802	1.4	7
18	Pathway mapping of leukocyte transcriptome in influenza patients reveals distinct pathogenic mechanisms associated with progression to severe infection. <i>BMC Medical Genomics</i> , 2020 , 13, 28	3.7	6
17	Delivering Prolonged Intensive Care to a Non-human Primate: A High Fidelity Animal Model of Critical Illness. <i>Scientific Reports</i> , 2017 , 7, 1204	4.9	5
16	Treatment in Disproportionately Minority Hospitals Is Associated With Increased Risk of Mortality in Sepsis: A National Analysis. <i>Critical Care Medicine</i> , 2020 , 48, 962-967	1.4	5
15	The impact of delayed source control and antimicrobial therapy in 196 patients with cholecystitis-associated septic shock: a cohort analysis. <i>Canadian Journal of Surgery</i> , 2019 , 62, 189-198	2	4
14	Aerosol SARS-CoV-2 in hospitals and long-term care homes during the COVID-19 pandemic. <i>PLoS ONE</i> , 2021 , 16, e0258151	3.7	4
13	Persistence of live virus in critically ill patients infected with SARS-COV-2: a prospective observational study.. <i>Critical Care</i> , 2022 , 26, 10	10.8	3
12	Impact of intensive care unit supportive care on the physiology of Ebola virus disease in a universally lethal non-human primate model. <i>Intensive Care Medicine Experimental</i> , 2019 , 7, 54	3.7	3
11	Pandemic H1N1 influenza. <i>Journal of Thoracic Disease</i> , 2011 , 3, 262-70	2.6	3
10	Outcomes With Severe Blastomycosis and Respiratory Failure in the United States. <i>Clinical Infectious Diseases</i> , 2021 , 72, 1603-1607	11.6	3
9	Predicting in-hospital mortality in pneumonia-associated septic shock patients using a classification and regression tree: a nested cohort study. <i>Journal of Intensive Care</i> , 2018 , 6, 66	7	3
8	A GEOGRAPHICALLY AND TEMPORALLY COMPREHENSIVE ANALYSIS OF SEPTIC SHOCK: IMPACT OF AGE, SEX AND SOCIOECONOMIC STATUS.. <i>Critical Care Medicine</i> , 2005 , 33, A79	1.4	2
7	Extra-cardiac endovascular infections in the critically ill. <i>Intensive Care Medicine</i> , 2020 , 46, 173-181	14.5	1
6	Intravenous immune globulin in septic shock: a Canadian national survey of critical care medicine and infectious disease specialist physicians. <i>Canadian Journal of Anaesthesia</i> , 2021 , 68, 782-790	3	1
5	Caloric intake and the fat-to-carbohydrate ratio in hypercapnic acute respiratory failure: Post-hoc analysis of the PermiT trial. <i>Clinical Nutrition ESPEN</i> , 2019 , 29, 175-182	1.3	1
4	Epidemiology of intravenous immune globulin in septic shock: a retrospective cohort analysis of the Premier Healthcare Database. <i>Canadian Journal of Anaesthesia</i> , 2021 , 68, 1641-1650	3	1
3	Standard hospital blanket warming cabinets can be utilized for complete moist heat SARS-CoV2 inactivation of contaminated N95 masks for re-use. <i>Scientific Reports</i> , 2021 , 11, 18316	4.9	1

- 2 A first-line antiretroviral therapy-resistant HIV patient with rhinoentomophthoromycosis. *Indian Journal of Medical Microbiology*, **2018**, 36, 136-139 1.3
- 1 The author replies. *Critical Care Medicine*, **2018**, 46, e964-e965 1.4