

Ole Frithjof Norheim

List of Publications by Year in descending order

Source: <https://exaly.com/author-pdf/5147443/publications.pdf>

Version: 2024-02-01

231
papers

61,788
citations

36691

53
h-index

1680

220
g-index

247
all docs

247
docs citations

247
times ranked

93580
citing authors

#	ARTICLE	IF	CITATIONS
1	Public participation: healthcare rationing in the newspaper media. BMC Health Services Research, 2022, 22, 407.	0.9	6
2	Addressing the Impact of Noncommunicable Diseases and Injuries (NCDIs) in Ethiopia: Findings and Recommendations from the Ethiopia NCDI Commission.. Ethiopian Journal of Health Sciences, 2022, 32, 161-180.	0.2	4
3	Appraising Drugs Based on Cost-effectiveness and Severity of Disease in Norwegian Drug Coverage Decisions. JAMA Network Open, 2022, 5, e2219503.	2.8	3
4	Changes in life expectancy and disease burden in Norway, 1990â€“2019: an analysis of the Global Burden of Disease Study 2019. Lancet Public Health, The, 2022, 7, e593-e605.	4.7	13
5	Distributional Cost-Effectiveness Analysis Comes of Age. Value in Health, 2021, 24, 118-120.	0.1	44
6	Equity in public health spending in Ethiopia: a benefit incidence analysis. Health Policy and Planning, 2021, 36, i4-i13.	1.0	4
7	Is Universal Health Coverage Affordable? Estimated Costs and Fiscal Space Analysis for the Ethiopian Essential Health Services Package. Health Systems and Reform, 2021, 7, e1870061.	0.6	11
8	Generalised cost-effectiveness analysis of 159 health interventions for the Ethiopian essential health service package. Cost Effectiveness and Resource Allocation, 2021, 19, 2.	0.6	12
9	Cost-Effectiveness of Saxagliptin Compared With Glibenclamide as a Second-Line Therapy Added to Metformin for Type 2 Diabetes Mellitus in Ethiopia. MDM Policy and Practice, 2021, 6, 238146832110057.	0.5	2
10	Reducing regional health inequality: a sub-national distributional cost-effectiveness analysis of community-based treatment of childhood pneumonia in Ethiopia. International Journal for Equity in Health, 2021, 20, 9.	1.5	7
11	Covax must go beyond proportional allocation of covid vaccines to ensure fair and equitable access. BMJ, The, 2021, 372, m4853.	3.0	70
12	Toward universal health coverage in the post-COVID-19 era. Nature Medicine, 2021, 27, 380-387.	15.2	44
13	Maintaining neglected tropical disease programmes during pandemics. Bulletin of the World Health Organization, 2021, 99, 473-474.	1.5	2
14	Institutional and behaviour-change interventions to support COVID-19 public health measures: a review by the Lancet Commission Task Force on public health measures to suppress the pandemic. International Health, 2021, 13, 399-409.	0.8	41
15	Precision medicine and the principle of equal treatment: a conjoint analysis. BMC Medical Ethics, 2021, 22, 55.	1.0	7
16	Climate change and health in Ethiopia: To what extent have the health dimensions of climate change been integrated into the Climateâ€™Resilient Green Economy?. World Medical and Health Policy, 2021, 13, 293-312.	0.9	8
17	Mobility restrictions were associated with reductions in COVID-19 incidence early in the pandemic: evidence from a real-time evaluation in 34 countries. Scientific Reports, 2021, 11, 13717.	1.6	48
18	Providing universal access to modern contraceptive methods: An extended cost-effectiveness analysis of meeting the demand for modern contraception in Ethiopia. Social Science and Medicine, 2021, 281, 114076.	1.8	2

#	ARTICLE	IF	CITATIONS
19	What are the obligations of pharmaceutical companies in a global health emergency?. <i>Lancet, The</i> , 2021, 398, 1015-1020.	6.3	22
20	Contextualization of cost-effectiveness evidence from literature for 382 health interventions for the Ethiopian essential health services package revision. <i>Cost Effectiveness and Resource Allocation</i> , 2021, 19, 58.	0.6	1
21	Difficult trade-offs in response to COVID-19: the case for open and inclusive decision making. <i>Nature Medicine</i> , 2021, 27, 10-13.	15.2	56
22	Estimating and Comparing Health and Financial Risk Protection Outcomes in Economic Evaluations. <i>Value in Health</i> , 2021, 25, 238-246.	0.1	2
23	Cycle network expansion plan in Oslo: Modeling cost effectiveness analysis and health equity impact. <i>Health Economics (United Kingdom)</i> , 2021, 30, 3220-3235.	0.8	5
24	Priority setting and net zero healthcare: how much health can a tonne of carbon buy?. <i>BMJ, The</i> , 2021, 375, e067199.	3.0	23
25	On the Ethics of Vaccine Nationalism: The Case for the Fair Priority for Residents Framework. <i>Ethics and International Affairs</i> , 2021, 35, 543-562.	0.5	16
26	Obligations in a global health emergency – Authors' reply. <i>Lancet, The</i> , 2021, 398, 2072.	6.3	2
27	Health equity impact of community-initiated kangaroo mother care: a randomized controlled trial. <i>International Journal for Equity in Health</i> , 2021, 20, 263.	1.5	1
28	The burden of household out-of-pocket health expenditures in Ethiopia: estimates from a nationally representative survey (2015–16). <i>Health Policy and Planning</i> , 2020, 35, 1003-1010.	1.0	28
29	Estimating Health Adjusted Age at Death (HAAD). <i>PLoS ONE</i> , 2020, 15, e0235955.	1.1	5
30	The Devils in the DALY: Prevailing Evaluative Assumptions. <i>Public Health Ethics</i> , 2020, 13, 259-274.	0.4	14
31	Protecting essential health services in low-income and middle-income countries and humanitarian settings while responding to the COVID-19 pandemic. <i>BMJ Global Health</i> , 2020, 5, e003675.	2.0	47
32	An ethical framework for global vaccine allocation. <i>Science</i> , 2020, 369, 1309-1312.	6.0	235
33	Measuring universal health coverage based on an index of effective coverage of health services in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2020, 396, 1250-1284.	6.3	330
34	The Lancet NCDI Poverty Commission: bridging a gap in universal health coverage for the poorest billion. <i>Lancet, The</i> , 2020, 396, 991-1044.	6.3	165
35	Is cycle network expansion cost-effective? A health economic evaluation of cycling in Oslo. <i>BMC Public Health</i> , 2020, 20, 1869.	1.2	7
36	Revision of the Ethiopian Essential Health Service Package: An Explication of the Process and Methods Used. <i>Health Systems and Reform</i> , 2020, 6, e1829313.	0.6	26

#	ARTICLE	IF	CITATIONS
37	Protecting the population with immune individuals. <i>Nature Medicine</i> , 2020, 26, 823-824.	15.2	12
38	Health gains and financial risk protection afforded by public financing of selected malaria interventions in Ethiopia: an extended cost-effectiveness analysis. <i>Malaria Journal</i> , 2020, 19, 41.	0.8	12
39	What next after GDP-based cost-effectiveness thresholds?. <i>Gates Open Research</i> , 2020, 4, 176.	2.0	36
40	Estimating Health Adjusted Age at Death (HAAD). , 2020, 15, e0235955.		0
41	Estimating Health Adjusted Age at Death (HAAD). , 2020, 15, e0235955.		0
42	Estimating Health Adjusted Age at Death (HAAD). , 2020, 15, e0235955.		0
43	Estimating Health Adjusted Age at Death (HAAD). , 2020, 15, e0235955.		0
44	Estimating Health Adjusted Age at Death (HAAD). , 2020, 15, e0235955.		0
45	Estimating Health Adjusted Age at Death (HAAD). , 2020, 15, e0235955.		0
46	Estimating Health Adjusted Age at Death (HAAD). , 2020, 15, e0235955.		0
47	Estimating Health Adjusted Age at Death (HAAD). , 2020, 15, e0235955.		0
48	Towards theoretically robust evidence on health equity: a systematic approach to contextualising equity-relevant randomised controlled trials. <i>Journal of Medical Ethics</i> , 2019, 45, 54-59.	1.0	3
49	Bedside Rationing Under Resource Constraints—A National Survey of Ethiopian Physicians’ Use of Criteria for Priority Setting. <i>AJOB Empirical Bioethics</i> , 2019, 10, 125-135.	0.8	3
50	Health system modelling research: towards a whole-health-system perspective for identifying good value for money investments in health system strengthening. <i>BMJ Global Health</i> , 2019, 4, e001311.	2.0	18
51	A cost-effectiveness analysis of maternal and neonatal health interventions in Ethiopia. <i>Health Policy and Planning</i> , 2019, 34, 289-297.	1.0	20
52	Financial risk protection at the bedside: How Ethiopian physicians try to minimize out-of-pocket health expenditures. <i>PLoS ONE</i> , 2019, 14, e0212129.	1.1	21
53	Measuring progress towards universal health coverage: national and subnational analysis in Ethiopia. <i>BMJ Global Health</i> , 2019, 4, e001843.	2.0	42
54	Country contextualisation of cost-effectiveness studies: lessons from Ethiopia. <i>BMJ Global Health</i> , 2019, 4, e001320.	2.0	5

#	ARTICLE	IF	CITATIONS
55	Consistency is not overrated. <i>Journal of Medical Ethics</i> , 2019, 45, 830-831.	1.0	1
56	Action to protect the independence and integrity of global health research. <i>BMJ Global Health</i> , 2019, 4, e001746.	2.0	26
57	Priority Setting on the Path to UHC: Time for Stronger Institutions and Stronger Health Systems: Response to Recent Commentaries. <i>International Journal of Health Policy and Management</i> , 2019, 8, 511-513.	0.5	1
58	New approaches to ranking countries for the allocation of development assistance for health: choices, indicators and implications. <i>Health Policy and Planning</i> , 2018, 33, i31-i46.	1.0	11
59	Increased Risk of Peripartum Perinatal Mortality in Unplanned Births Outside an Institution: A Retrospective Population-Based Study. <i>Obstetrical and Gynecological Survey</i> , 2018, 73, 8-11.	0.2	1
60	Newborn health benefits or financial risk protection? An ethical analysis of a real-life dilemma in a setting without universal health coverage. <i>Journal of Medical Ethics</i> , 2018, 44, 524-530.	1.0	2
61	The disvalue of death in the global burden of disease. <i>Journal of Medical Ethics</i> , 2018, 44, 192-198.	1.0	15
62	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.	6.3	716
63	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.	6.3	3,269
64	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.	6.3	8,569
65	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.	6.3	335
66	How can MCDA tools improve priority setting? Four critical questions. <i>Cost Effectiveness and Resource Allocation</i> , 2018, 16, 44.	0.6	3
67	High-quality health systems in the Sustainable Development Goals era: time for a revolution. <i>The Lancet Global Health</i> , 2018, 6, e1196-e1252.	2.9	1,721
68	Allocating external financing for health: a discrete choice experiment of stakeholder preferences. <i>Health Policy and Planning</i> , 2018, 33, i24-i30.	1.0	9
69	Measuring performance on the Healthcare Access and Quality Index for 195 countries and territories and selected subnational locations: a systematic analysis from the Global Burden of Disease Study 2016. <i>Lancet, The</i> , 2018, 391, 2236-2271.	6.3	638
70	Risk of eclampsia or HELLP-syndrome by institution availability and place of delivery â€“ A population-based cohort study. <i>Pregnancy Hypertension</i> , 2018, 14, 1-8.	0.6	13
71	Geographic health inequalities in Norway: a Gini analysis of cross-county differences in mortality from 1980 to 2014. <i>International Journal for Equity in Health</i> , 2018, 17, 64.	1.5	17
72	eRegQualâ€”an electronic health registry with interactive checklists and clinical decision support for improving quality of antenatal care: study protocol for a cluster randomized trial. <i>Trials</i> , 2018, 19, 54.	0.7	16

#	ARTICLE	IF	CITATIONS
73	Clinical decision making in cancer care: a review of current and future roles of patient age. <i>BMC Cancer</i> , 2018, 18, 546.	1.1	22
74	Universal health coverage and intersectoral action for health: key messages from Disease Control Priorities, 3rd edition. <i>Lancet, The</i> , 2018, 391, 1108-1120.	6.3	153
75	Disease Control Priorities Third Edition Is Published: A Theory of Change Is Needed for Translating Evidence to Health Policy. <i>International Journal of Health Policy and Management</i> , 2018, 7, 771-777.	0.5	12
76	Revisiting Health Rights Litigation and Access to Medications in Costa Rica: Preliminary Evidence from the Cochrane Collaboration Reform. <i>Health and Human Rights</i> , 2018, 20, 79-91.	1.3	2
77	The elusive challenge of priority setting in health and health care. <i>Global Challenges</i> , 2017, 1, 28-29.	1.8	9
78	Using Cost-Effectiveness Analysis to Address Health Equity Concerns. <i>Value in Health</i> , 2017, 20, 206-212.	0.1	181
79	Increased risk of peripartum perinatal mortality in unplanned births outside an institution: a retrospective population-based study. <i>American Journal of Obstetrics and Gynecology</i> , 2017, 217, 210.e1-210.e12.	0.7	24
80	Economic losses and burden of disease by medical conditions in Norway. <i>Health Policy</i> , 2017, 121, 691-698.	1.4	36
81	Universal health coverage, priority setting, and the human right to health. <i>Lancet, The</i> , 2017, 390, 712-714.	6.3	56
82	Healthcare Access and Quality Index based on mortality from causes amenable to personal health care in 195 countries and territories, 1990â€“2015: a novel analysis from the Global Burden of Disease Study 2015. <i>Lancet, The</i> , 2017, 390, 231-266.	6.3	480
83	Household expenditures on pneumonia and diarrhoea treatment in Ethiopia: a facility-based study. <i>BMJ Global Health</i> , 2017, 2, e000166.	2.0	42
84	Global, regional, and national under-5 mortality, adult mortality, age-specific mortality, and life expectancy, 1970â€“2016: a systematic analysis for the Global Burden of Disease Study 2016. <i>Lancet, The</i> , 2017, 390, 1084-1150.	6.3	573
85	Global, regional, and national disability-adjusted life-years (DALYs) for 333 diseases and injuries and healthy life expectancy (HALE) for 195 countries and territories, 1990â€“2016: a systematic analysis for the Global Burden of Disease Study 2016. <i>Lancet, The</i> , 2017, 390, 1260-1344.	6.3	1,589
86	Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990â€“2016: a systematic analysis for the Global Burden of Disease Study 2016. <i>Lancet, The</i> , 2017, 390, 1345-1422.	6.3	1,879
87	Progressive realisation of universal health coverage: what are the required processes and evidence?. <i>BMJ Global Health</i> , 2017, 2, e000342.	2.0	24
88	Measuring progress and projecting attainment on the basis of past trends of the health-related Sustainable Development Goals in 188 countries: an analysis from the Global Burden of Disease Study 2016. <i>Lancet, The</i> , 2017, 390, 1423-1459.	6.3	284
89	Distribution-Weighted Cost-Effectiveness Analysis Using Lifetime Health Loss. <i>Pharmacoeconomics</i> , 2017, 35, 965-974.	1.7	6
90	Impact of community-initiated Kangaroo Mother Care on survival of low birth weight infants: study protocol for a randomized controlled trial. <i>Trials</i> , 2017, 18, 262.	0.7	22

#	ARTICLE	IF	CITATIONS
91	When is a randomised controlled trial health equity relevant? Development and validation of a conceptual framework. <i>BMJ Open</i> , 2017, 7, e015815.	0.8	32
92	Is the sustainable development goal target for financial risk protection in health realistic?. <i>BMJ Global Health</i> , 2017, 2, e000216.	2.0	10
93	CONSORT-Equity 2017 extension and elaboration for better reporting of health equity in randomised trials. <i>BMJ: British Medical Journal</i> , 2017, 359, j5085.	2.4	92
94	Out-of-pocket expenditures for prevention and treatment of cardiovascular disease in general and specialised cardiac hospitals in Addis Ababa, Ethiopia: a cross-sectional cohort study. <i>BMJ Global Health</i> , 2017, 2, e000280.	2.0	46
95	Cost-effectiveness analysis of population-based tobacco control strategies in the prevention of cardiovascular diseases in Tanzania. <i>PLoS ONE</i> , 2017, 12, e0182113.	1.1	12
96	Costs and expected gain in lifetime health from intensive care versus general ward care of 30,712 individual patients: a distribution-weighted cost-effectiveness analysis. <i>Critical Care</i> , 2017, 21, 220.	2.5	27
97	Making Fair Choices on the Path to Universal Health Coverage: Applying Principles to Difficult Cases. <i>Health Systems and Reform</i> , 2017, 3, 301-312.	0.6	10
98	Universal Health Coverage and Essential Packages of Care. , 2017, , 43-65.		35
99	Annual Rates of Decline in Child, Maternal, Tuberculosis, and Noncommunicable Disease Mortality across 109 Low- and Middle-Income Countries from 1990 to 2015. , 2017, , 105-120.		0
100	Cost-effectiveness of medical primary prevention strategies to reduce absolute risk of cardiovascular disease in Tanzania: a Markov modelling study. <i>BMC Health Services Research</i> , 2016, 16, 185.	0.9	10
101	Impact of a peer-counseling intervention on breastfeeding practices in different socioeconomic strata: results from the equity analysis of the PROMISE-EBF trial in Uganda. <i>Global Health Action</i> , 2016, 9, 30578.	0.7	11
102	Assessing the burden of medical impoverishment by cause: a systematic breakdown by disease in Ethiopia. <i>BMC Medicine</i> , 2016, 14, 164.	2.3	30
103	Prevention and treatment of cardiovascular disease in Ethiopia: a cost-effectiveness analysis. <i>Cost Effectiveness and Resource Allocation</i> , 2016, 14, 10.	0.6	26
104	A new proposal for priority setting in Norway: Open and fair. <i>Health Policy</i> , 2016, 120, 246-251.	1.4	67
105	Making fair choices on the path to universal health coverage: a prÃ©cis. <i>Health Economics, Policy and Law</i> , 2016, 11, 71-77.	1.1	16
106	Response to our critics. <i>Health Economics, Policy and Law</i> , 2016, 11, 103-111.	1.1	3
107	Global, regional, and national levels of maternal mortality, 1990â€”2015: a systematic analysis for the Global Burden of Disease Study 2015. <i>Lancet, The</i> , 2016, 388, 1775-1812.	6.3	740
108	Equity impact analysis of medical approaches to cardiovascular diseases prevention in Tanzania. <i>Social Science and Medicine</i> , 2016, 170, 208-217.	1.8	6

#	ARTICLE	IF	CITATIONS
109	Global, regional, and national disability-adjusted life-years (DALYs) for 315 diseases and injuries and healthy life expectancy (HALE), 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015. <i>Lancet, The</i> , 2016, 388, 1603-1658.	6.3	1,612
110	Global, regional, and national life expectancy, all-cause mortality, and cause-specific mortality for 249 causes of death, 1980–2015: a systematic analysis for the Global Burden of Disease Study 2015. <i>Lancet, The</i> , 2016, 388, 1459-1544.	6.3	4,934
111	Global, regional, and national incidence, prevalence, and years lived with disability for 310 diseases and injuries, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015. <i>Lancet, The</i> , 2016, 388, 1545-1602.	6.3	5,298
112	Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015. <i>Lancet, The</i> , 2016, 388, 1659-1724.	6.3	4,203
113	Global, regional, national, and selected subnational levels of stillbirths, neonatal, infant, and under-5 mortality, 1980–2015: a systematic analysis for the Global Burden of Disease Study 2015. <i>Lancet, The</i> , 2016, 388, 1725-1774.	6.3	571
114	Measuring the health-related Sustainable Development Goals in 188 countries: a baseline analysis from the Global Burden of Disease Study 2015. <i>Lancet, The</i> , 2016, 388, 1813-1850.	6.3	413
115	Estimates of global, regional, and national incidence, prevalence, and mortality of HIV, 1980–2015: the Global Burden of Disease Study 2015. <i>Lancet HIV, the</i> , 2016, 3, e361-e387.	2.1	461
116	Budget Impact Analysis of Using Dihydroartemisinin–Piperazine to Treat Uncomplicated Malaria in Children in Tanzania. <i>Pharmacoeconomics</i> , 2016, 34, 303-314.	1.7	5
117	Ethical priority setting for universal health coverage: challenges in deciding upon fair distribution of health services. <i>BMC Medicine</i> , 2016, 14, 75.	2.3	59
118	Inequalities in utilization of maternal and child health services in Ethiopia: the role of primary health care. <i>BMC Health Services Research</i> , 2016, 16, 51.	0.9	48
119	Accounting for Technical, Ethical, and Political Factors in Priority Setting. <i>Health Systems and Reform</i> , 2016, 2, 51-60.	0.6	23
120	Norwegian Priority Setting in Practice – an Analysis of Waiting Time Patterns Across Medical Disciplines. <i>International Journal of Health Policy and Management</i> , 2016, 5, 373-378.	0.5	9
121	Three Case Studies in Making Fair Choices on the Path to Universal Health Coverage. <i>Health and Human Rights</i> , 2016, 18, 11-22.	1.3	7
122	A survey of Ethiopian physicians' experiences of bedside rationing: extensive resource scarcity, tough decisions and adverse consequences. <i>BMC Health Services Research</i> , 2015, 15, 467.	0.9	29
123	Towards universal health coverage for reproductive health services in Ethiopia: two policy recommendations. <i>International Journal for Equity in Health</i> , 2015, 14, 86.	1.5	16
124	Global, regional, and national incidence, prevalence, and years lived with disability for 301 acute and chronic diseases and injuries in 188 countries, 1990–2013: a systematic analysis for the Global Burden of Disease Study 2013. <i>Lancet, The</i> , 2015, 386, 743-800.	6.3	4,951
125	Cost-effectiveness of live oral attenuated human rotavirus vaccine in Tanzania. <i>Cost Effectiveness and Resource Allocation</i> , 2015, 13, 7.	0.6	18
126	Economic cost of primary prevention of cardiovascular diseases in Tanzania. <i>Health Policy and Planning</i> , 2015, 30, 875-884.	1.0	16

#	ARTICLE	IF	CITATIONS
127	A premature mortality target for the SDG for health is ageist – Authors' reply. <i>Lancet, The</i> , 2015, 385, 2148-2149.	6.3	3
128	Update on the Global Burden of Ischemic and Hemorrhagic Stroke in 1990-2013: The GBD 2013 Study. <i>Neuroepidemiology</i> , 2015, 45, 161-176.	1.1	1,002
129	Standard of care versus second-best: Ethical dilemmas in surgery for high risk papillary thyroid cancer in low and middle-income countries. <i>Journal of Cancer Policy</i> , 2015, 6, 8-10.	0.6	2
130	Unexplained health inequality – is it unfair?. <i>International Journal for Equity in Health</i> , 2015, 14, 11.	1.5	15
131	Work Participation Among the Morbidly Obese Seeking Bariatric Surgery: An Exploratory Study from Norway. <i>Obesity Surgery</i> , 2015, 25, 271-278.	1.1	5
132	Global, regional, and national disability-adjusted life years (DALYs) for 306 diseases and injuries and healthy life expectancy (HALE) for 188 countries, 1990–2013: quantifying the epidemiological transition. <i>Lancet, The</i> , 2015, 386, 2145-2191.	6.3	1,544
133	Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks in 188 countries, 1990–2013: a systematic analysis for the Global Burden of Disease Study 2013. <i>Lancet, The</i> , 2015, 386, 2287-2323.	6.3	2,184
134	Clinical Practice Guidelines as Instruments for Sound Health Care Priority Setting. <i>American Journal of Cardiology</i> , 2015, 116, 1481-1482.	0.7	1
135	Global, regional, and national age–sex specific all-cause and cause-specific mortality for 240 causes of death, 1990–2013: a systematic analysis for the Global Burden of Disease Study 2013. <i>Lancet, The</i> , 2015, 385, 117-171.	6.3	5,847
136	Avoiding 40% of the premature deaths in each country, 2010–30: review of national mortality trends to help quantify the UN Sustainable Development Goal for health. <i>Lancet, The</i> , 2015, 385, 239-252.	6.3	212
137	Ethical Perspective: Five Unacceptable Trade-offs on the Path to Universal Health Coverage. <i>International Journal of Health Policy and Management</i> , 2015, 4, 711-714.	0.5	43
138	The Role of Evidence in the Decision-Making Process of Selecting Essential Medicines in Developing Countries: The Case of Tanzania. <i>PLoS ONE</i> , 2014, 9, e84824.	1.1	27
139	A three-stage approach to measuring health inequalities and inequities. <i>International Journal for Equity in Health</i> , 2014, 13, 98.	1.5	29
140	Making fair choices on the path to universal health coverage. <i>Bulletin of the World Health Organization</i> , 2014, 92, 389-389.	1.5	184
141	Halving premature death. <i>Science</i> , 2014, 345, 1272-1272.	6.0	19
142	Annual rates of decline in child, maternal, HIV, and tuberculosis mortality across 109 countries of low and middle income from 1990 to 2013: an assessment of the feasibility of post-2015 goals. <i>The Lancet Global Health</i> , 2014, 2, e698-e709.	2.9	34
143	Cost-effectiveness of dihydroartemisinin-piperazine compared with artemether-lumefantrine for treating uncomplicated malaria in children at a district hospital in Tanzania. <i>Malaria Journal</i> , 2014, 13, 363.	0.8	9
144	Guidance on priority setting in health care (GPS-Health): the inclusion of equity criteria not captured by cost-effectiveness analysis. <i>Cost Effectiveness and Resource Allocation</i> , 2014, 12, 18.	0.6	125

#	ARTICLE	IF	CITATIONS
145	Implementation of transcatheter aortic valve insertion (TAVI) in clinical practice: An ethical analysis. <i>Clinical Ethics</i> , 2014, 9, 96-103.	0.5	2
146	Lifetime QALY prioritarianism in priority setting: quantification of the inherent trade-off. <i>Cost Effectiveness and Resource Allocation</i> , 2014, 12, 2.	0.6	25
147	Taking Equality Seriously: Applying Human Rights Frameworks to Priority Setting in Health. <i>Human Rights Quarterly</i> , 2014, 36, 296-324.	0.1	22
148	Availability and access in modern obstetric care: a retrospective population-based study. <i>BJOG: an International Journal of Obstetrics and Gynaecology</i> , 2014, 121, 290-299.	1.1	19
149	Valuing vaccines using value of statistical life measures. <i>Vaccine</i> , 2014, 32, 5065-5070.	1.7	24
150	Making use of equity sensitive QALYs: a case study on identifying the worse off across diseases. <i>Cost Effectiveness and Resource Allocation</i> , 2014, 12, 16.	0.6	15
151	Global, regional, and national incidence and mortality for HIV, tuberculosis, and malaria during 1990-2013: a systematic analysis for the Global Burden of Disease Study 2013. <i>Lancet</i> , The, 2014, 384, 1005-1070.	6.3	786
152	Disease Control Priorities for Neglected Tropical Diseases: Lessons from Priority Ranking Based on the Quality of Evidence, Cost Effectiveness, Severity of Disease, Catastrophic Health Expenditures, and Loss of Productivity. <i>Developing World Bioethics</i> , 2014, 14, 132-141.	0.6	4
153	Global, regional, and national levels and causes of maternal mortality during 1990-2013: a systematic analysis for the Global Burden of Disease Study 2013. <i>Lancet</i> , The, 2014, 384, 980-1004.	6.3	1,230
154	Maternal and Neonatal Mortality in South-West Ethiopia: Estimates and Socio-Economic Inequality. <i>PLoS ONE</i> , 2014, 9, e96294.	1.1	52
155	Understanding Inequalities in Child Health in Ethiopia: Health Achievements Are Improving in the Period 2000-2011. <i>PLoS ONE</i> , 2014, 9, e106460.	1.1	22
156	A grand convergence in mortality is possible: comment on Global Health 2035. <i>International Journal of Health Policy and Management</i> , 2014, 2, 1-3.	0.5	7
157	Health rights litigation and access to medicines: priority classification of successful cases from Costa Rica's constitutional chamber of the Supreme Court. <i>Health and Human Rights</i> , 2014, 16, E47-61.	1.3	13
158	Health inequalities in Ethiopia: modeling inequalities in length of life within and between population groups. <i>International Journal for Equity in Health</i> , 2013, 12, 52.	1.5	14
159	Balancing efficiency, equity and feasibility of HIV treatment in South Africa - development of programmatic guidance. <i>Cost Effectiveness and Resource Allocation</i> , 2013, 11, 26.	0.6	30
160	Atkinson's Index Applied to Health. , 2013, , 214-231.		1
161	Skal rusmiddelavhengige pasienter tilbys hjerteklaffkirurgi for andre gang?. <i>Tidsskrift for Den Norske Laegeforening</i> , 2013, 133, 977-980.	0.2	19
162	When you can't have the cake and eat it too. <i>Social Science and Medicine</i> , 2012, 75, 1964-1973.	1.8	12

#	ARTICLE	IF	CITATIONS
163	Choice of generic antihypertensive drugs for the primary prevention of cardiovascular disease - A cost-effectiveness analysis. BMC Cardiovascular Disorders, 2012, 12, 26.	0.7	14
164	Addressing inequity to achieve the maternal and child health millennium development goals: looking beyond averages. BMC Public Health, 2012, 12, 1119.	1.2	20
165	Challenges to fair decision-making processes in the context of health care services: a qualitative assessment from Tanzania. International Journal for Equity in Health, 2012, 11, 30.	1.5	31
166	Comparative effectiveness of antihypertensive medication for primary prevention of cardiovascular disease: systematic review and multiple treatments meta-analysis. BMC Medicine, 2012, 10, 33.	2.3	73
167	A universal preference for equality in health? Reasons to reconsider properties of applied social welfare functions. Social Science and Medicine, 2012, 75, 1836-1843.	1.8	7
168	Priority setting: the importance of incorporating opportunity costs. Israel Journal of Health Policy Research, 2012, 1, 45.	1.4	0
169	Prioritizing Child Health Interventions in Ethiopia: Modeling Impact on Child Mortality, Life Expectancy and Inequality in Age at Death. PLoS ONE, 2012, 7, e41521.	1.1	10
170	CAN COST-EFFECTIVENESS ANALYSIS INTEGRATE CONCERNS FOR EQUITY? SYSTEMATIC REVIEW. International Journal of Technology Assessment in Health Care, 2012, 28, 125-132.	0.2	80
171	Norway's new principles for primary prevention of cardiovascular disease: age differentiated risk thresholds. BMJ: British Medical Journal, 2011, 343, d3626-d3626.	2.4	11
172	MAPPING OUT STRUCTURAL FEATURES IN CLINICAL CARE CALLING FOR ETHICAL SENSITIVITY: A THEORETICAL APPROACH TO PROMOTE ETHICAL COMPETENCE IN HEALTHCARE PERSONNEL AND CLINICAL ETHICAL SUPPORT SERVICES (CESS). Bioethics, 2011, 25, 394-402.	0.7	12
173	Fairness in service choice: an important yet underdeveloped path to universal coverage. Tropical Medicine and International Health, 2011, 16, 838-839.	1.0	5
174	Incorporating concerns for equal lifetime health in evaluations of public health programs. Social Science and Medicine, 2011, 72, 1711-1716.	1.8	5
175	Equity implications of coverage and use of insecticide treated nets distributed for free or with co-payment in two districts in Tanzania: A cross-sectional comparative household survey. International Journal for Equity in Health, 2011, 10, 29.	1.5	17
176	HIV priorities and health distributions in a rural region in Tanzania: a qualitative study. Journal of Medical Ethics, 2011, 37, 221-226.	1.0	9
177	Problems With Prioritization: Exploring Ethical Solutions to Inequalities in HIV Care. American Journal of Bioethics, 2011, 11, 32-40.	0.5	14
178	Helse som menneskerettighet. Tidsskrift for Den Norske Laegeforening, 2011, 131, 2029-2031.	0.2	3
179	Prioritering i global helse. Tidsskrift for Den Norske Laegeforening, 2011, 131, 1667-1669.	0.2	0
180	Further benefits by early start of HIV treatment in low income countries: Survival estimates of early versus deferred antiretroviral therapy. AIDS Research and Therapy, 2010, 7, 3.	0.7	40

#	ARTICLE	IF	CITATIONS
181	Gini Impact Analysis: Measuring Pure Health Inequity before and after Interventions. <i>Public Health Ethics</i> , 2010, 3, 282-292.	0.4	13
182	Disability compensation and responsibility. <i>Politics, Philosophy & Economics</i> , 2010, 9, 411-427.	0.6	2
183	End-of-life decisions as bedside rationing. An ethical analysis of life support restrictions in an Indian neonatal unit. <i>Journal of Medical Ethics</i> , 2010, 36, 473-478.	1.0	18
184	Priority To The Young Or To Those With Least Lifetime Health?. <i>American Journal of Bioethics</i> , 2010, 10, 60-61.	0.5	12
185	A note on Brock: prioritarianism, egalitarianism and the distribution of life years. <i>Journal of Medical Ethics</i> , 2009, 35, 565-569.	1.0	14
186	Impact of Ethics and Economics on End-of-Life Decisions in an Indian Neonatal Unit. <i>Pediatrics</i> , 2009, 124, e322-e328.	1.0	55
187	Fairness and accountability for reasonableness. Do the views of priority setting decision makers differ across health systems and levels of decision making?. <i>Social Science and Medicine</i> , 2009, 68, 766-773.	1.8	62
188	The ideal of equal health revisited: definitions and measures of inequity in health should be better integrated with theories of distributive justice. <i>International Journal for Equity in Health</i> , 2009, 8, 40.	1.5	96
189	Is the selection of patients for anti-retroviral treatment in Uganda fair?. <i>Health Policy</i> , 2009, 91, 33-42.	1.4	7
190	Eliciting people's preferences for the distribution of health: A procedure for a more precise estimation of distributional weights. <i>Journal of Health Economics</i> , 2009, 28, 570-577.	1.3	8
191	EE6 INCORPORATING EQUITY IN COST-EFFECTIVENESS ANALYSIS: A SYSTEMATIC REVIEW. <i>Value in Health</i> , 2009, 12, A230.	0.1	1
192	Implementing the Marmot Commission's Recommendations: Social Justice Requires a Solution to the Equity-Efficiency Trade-Off. <i>Public Health Ethics</i> , 2009, 2, 53-58.	0.4	5
193	"What lies beneath it all?" – an interview study of GPs' attitudes to the use of guidelines. <i>BMC Health Services Research</i> , 2008, 8, 218.	0.9	67
194	Distribution matters: Equity considerations among health planners in Tanzania. <i>Health Policy</i> , 2008, 85, 218-227.	1.4	19
195	Genomics and equal opportunity ethics. <i>Journal of Medical Ethics</i> , 2008, 34, 361-364.	1.0	11
196	Variation in Practice: A Questionnaire Survey of How Congruence in Attitudes Between Doctors and Patients Influences Referral Decisions. <i>Medical Decision Making</i> , 2008, 28, 262-268.	1.2	14
197	National HIV treatment guidelines in Tanzania and Ethiopia: are they legitimate rationing tools?. <i>Journal of Medical Ethics</i> , 2008, 34, 478-483.	1.0	14
198	Clinical priority setting. <i>BMJ: British Medical Journal</i> , 2008, 337, a1846-a1846.	2.4	27

#	ARTICLE	IF	CITATIONS
199	Priority setting at the micro-, meso- and macro-levels in Canada, Norway and Uganda. <i>Health Policy</i> , 2007, 82, 78-94.	1.4	107
200	Cost-effectiveness of medical interventions to prevent cardiovascular disease in a sub-Saharan African country--the case of Tanzania. <i>Cost Effectiveness and Resource Allocation</i> , 2007, 5, 3.	0.6	24
201	Combining evidence and values in priority setting: testing the balance sheet method in a low-income country. <i>BMC Health Services Research</i> , 2007, 7, 152.	0.9	26
202	Physicians' use of guidelines and attitudes to withholding and withdrawing treatment for extremely premature neonates in Norway. <i>Acta Paediatrica, International Journal of Paediatrics</i> , 2007, 96, 825-829.	0.7	26
203	Responsibility, fairness and rationing in health care. <i>Health Policy</i> , 2006, 76, 312-319.	1.4	69
204	MY JOB IS TO KEEP HIM ALIVE, BUT WHAT ABOUT HIS BROTHER AND SISTER? HOW INDIAN DOCTORS EXPERIENCE ETHICAL DILEMMAS IN NEONATAL MEDICINE. <i>Developing World Bioethics</i> , 2006, 6, 23-32.	0.6	30
205	Soft paternalism and the ethics of shared electronic patient records. <i>BMJ: British Medical Journal</i> , 2006, 333, 2-3.	2.4	12
206	Rights to Specialized Health Care in Norway: A Normative Perspective. <i>Journal of Law, Medicine and Ethics</i> , 2005, 33, 641-649.	0.4	12
207	"Saying no is no easy matter" A qualitative study of competing concerns in rationing decisions in general practice. <i>BMC Health Services Research</i> , 2005, 5, 70.	0.9	90
208	Responsibility in health care: a liberal egalitarian approach. <i>Journal of Medical Ethics</i> , 2005, 31, 476-480.	1.0	168
209	Availability, distribution and use of emergency obstetric care in northern Tanzania. <i>Health Policy and Planning</i> , 2005, 20, 167-175.	1.0	45
210	Human resources for emergency obstetric care in northern Tanzania: distribution of quantity or quality?. <i>Human Resources for Health</i> , 2005, 3, 5.	1.1	45
211	The Role of Formal Outcome Evaluations in Health Policy Making: A Normative Perspective. , 2005, , 139-149.		0
212	Is cost-effectiveness analysis preferred to severity of disease as the main guiding principle in priority setting in resource poor settings? The case of Uganda. <i>Cost Effectiveness and Resource Allocation</i> , 2004, 2, 1.	0.6	49
213	Complicated deliveries, critical care and quality in Emergency Obstetric Care in Northern Tanzania. <i>International Journal of Gynecology and Obstetrics</i> , 2004, 87, 98-108.	1.0	31
214	Criteria for priority-setting in health care in Uganda: exploration of stakeholders' values. <i>Bulletin of the World Health Organization</i> , 2004, 82, 172-9.	1.5	76
215	Using burden of disease information for health planning in developing countries: the experience from Uganda. <i>Social Science and Medicine</i> , 2003, 56, 2433-2441.	1.8	67
216	The relationship between prevention of mother to child transmission of HIV and stakeholder decision making in Uganda: implications for health policy. <i>Health Policy</i> , 2003, 66, 199-211.	1.4	8

#	ARTICLE	IF	CITATIONS
217	Quantifying quality of life for economic analysis: time out for time trade off. Medical Humanities, 2003, 29, 81-86.	0.6	42
218	Public participation in health planning and priority setting at the district level in Uganda. Health Policy and Planning, 2003, 18, 205-213.	1.0	80
219	Introduction of the patient-list system in general practice Changes in Norwegian physicians' perception of their gatekeeper role. Scandinavian Journal of Primary Health Care, 2003, 21, 209-213.	0.6	43
220	Whose priorities count? Comparison of community-identified health problems and Burden-of-Disease-assessed health priorities in a district in Uganda. Health Expectations, 2002, 5, 55-62.	1.1	23
221	The role of evidence in health policy making: a normative perspective. Health Care Analysis, 2002, 10, 309-317.	1.4	16
222	Adoption of new health care services in Norway (1993-1997): specialists' self-assessment according to national criteria for priority setting. Health Policy, 2001, 56, 65-79.	1.4	10
223	Limiting access to allogeneic bone marrow transplantation in five European countries: what can we learn about implicit rationing?. Health Policy, 2000, 52, 149-156.	1.4	5
224	Alendronate and Fracture Prevention. JAMA - Journal of the American Medical Association, 1999, 282, 231.	3.8	1
225	Access to health care in the Scandinavian countries: ethical aspects. Health Care Analysis, 1999, 7, 321-330.	1.4	31
226	Healthcare rationing--are additional criteria needed for assessing evidence based clinical practice guidelines?. BMJ: British Medical Journal, 1999, 319, 1426-1429.	2.4	72
227	The Norwegian Welfare State in Transition: Rationing and Plurality of Values as Ethical Challenges for the Health Care System. Journal of Medicine and Philosophy, 1995, 20, 639-655.	0.4	73
228	Equality, Explicitness, Severity, and Rigidity: The Oregon Plan Evaluated from a Scandinavian Perspective. Journal of Medicine and Philosophy, 1994, 19, 343-366.	0.4	13
229	Global Health Inequality: Comparing Inequality-Adjusted Life Expectancy over Time. Public Health Ethics, 0, , phw033.	0.4	2
230	Global Health and the Changing Contours of Human Life. , 0, , 713-752.		0
231	The Contribution of the Social Sciences to Policy and Institutional Change. , 0, , 847-887.		0