

Jacqueline Ramke

List of Publications by Year in descending order

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Version: 2024-02-01

130
papers

14,965
citations

279487

23
h-index

20307

116
g-index

134
all docs

134
docs citations

134
times ranked

25975
citing authors

#	ARTICLE	IF	CITATIONS
1	Eye health indicators for universal health coverage: results of a global expert prioritisation process. <i>British Journal of Ophthalmology</i> , 2022, 106, 893-901.	2.1	10
2	Defining eye health for everyone. <i>Ophthalmic and Physiological Optics</i> , 2022, 42, 1-3.	1.0	4
3	Grand Challenges in global eye health: a global prioritisation process using Delphi method. <i>The Lancet Healthy Longevity</i> , 2022, 3, e31-e41.	2.0	19
4	Identification and critical appraisal of evidence for interventions for refractive error to support the development of the WHO package of eye care interventions: a systematic review of clinical practice guidelines. <i>Ophthalmic and Physiological Optics</i> , 2022, 42, 526-533.	1.0	6
5	Advancing the Sustainable Development Goals through improving eye health: a scoping review. <i>Lancet Planetary Health</i> , The, 2022, 6, e270-e280.	5.1	19
6	The economics of vision impairment and its leading causes: A systematic review. <i>EClinicalMedicine</i> , 2022, 46, 101354.	3.2	24
7	Performance and resource requirements of in-person versus voice call versus automated telephone-based socioeconomic data collection modalities for community-based health programmes: a systematic review protocol. <i>BMJ Open</i> , 2022, 12, e057410.	0.8	3
8	Guidance relevant to the reporting of health equity in observational research: a scoping review protocol. <i>BMJ Open</i> , 2022, 12, e056875.	0.8	5
9	A Systematic Review of Clinical Practice Guidelines for Cataract: Evidence to Support the Development of the WHO Package of Eye Care Interventions. <i>Vision (Switzerland)</i> , 2022, 6, 36.	0.5	8
10	The Lancet Global Health Commission on Global Eye Health: vision beyond 2020. <i>The Lancet Global Health</i> , 2021, 9, e489-e551.	2.9	549
11	Effectiveness of task-shifting for the detection of diabetic retinopathy in low- and middle-income countries: a rapid review protocol. <i>Systematic Reviews</i> , 2021, 10, 4.	2.5	7
12	The Gambia National Eye Health Survey 2019: survey protocol. <i>Wellcome Open Research</i> , 2021, 6, 10.	0.9	4
13	Gender and ethnic diversity in global ophthalmology and optometry association leadership: a time for change. <i>Ophthalmic and Physiological Optics</i> , 2021, 41, 623-629.	1.0	9
14	Eye care delivery models to improve access to eye care for Indigenous peoples in high-income countries: a scoping review. <i>BMJ Global Health</i> , 2021, 6, e004484.	2.0	13
15	Heterogeneous contributions of change in population distribution of body mass index to change in obesity and underweight. <i>ELife</i> , 2021, 10, .	2.8	41
16	Association between vision impairment and mortality: a systematic review and meta-analysis. <i>The Lancet Global Health</i> , 2021, 9, e418-e430.	2.9	59
17	Seeing beyond 2020: what next for refractive error care?. <i>Ophthalmic and Physiological Optics</i> , 2021, 41, 457-460.	1.0	2
18	Cataract as a Cause of Blindness and Vision Impairment in Latin America: Progress Made and Challenges Beyond 2020. <i>American Journal of Ophthalmology</i> , 2021, 225, 1-10.	1.7	15

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19	Global economic productivity losses from vision impairment and blindness. <i>EClinicalMedicine</i> , 2021, 35, 100852.	3.2	71
20	A Global Assessment of Eye Health and Quality of Life. <i>JAMA Ophthalmology</i> , 2021, 139, 526.	1.4	78
21	Identifying priority review questions for Cochrane Eyes and Vision: protocol for a priority setting exercise. <i>BMJ Open</i> , 2021, 11, e046319.	0.8	3
22	Visual function rather than visual acuity – Authors' reply. <i>The Lancet Global Health</i> , 2021, 9, e914.	2.9	0
23	How can we improve the quality of cataract services for all? A global scoping review. <i>Clinical and Experimental Ophthalmology</i> , 2021, 49, 672-685.	1.3	15
24	Interventions to promote access to eyecare for non-dominant ethnic groups in high-income countries: a scoping review. <i>BMJ Global Health</i> , 2021, 6, e006188.	2.0	5
25	Vision impairment and differential access to eye health services in Aotearoa New Zealand: protocol for a scoping review. <i>BMJ Open</i> , 2021, 11, e048215.	0.8	1
26	Effectiveness of interventions to increase uptake and completion of treatment for diabetic retinopathy in low- and middle-income countries: a rapid review protocol. <i>Systematic Reviews</i> , 2021, 10, 27.	2.5	2
27	The Appointment System Influences Uptake of Cataract Surgical Services in Rwanda. <i>International Journal of Environmental Research and Public Health</i> , 2021, 18, 743.	1.2	2
28	Improving Health Care Accessibility for People With Vision Impairment – A Call to Account. <i>JAMA Ophthalmology</i> , 2021, , .	1.4	2
29	Financial protection is essential to increase effective refractive error coverage equitably. <i>Ophthalmic and Physiological Optics</i> , 2021, , .	1.0	0
30	Risk Factors for Progression to Referable Diabetic Eye Disease in People With Diabetes Mellitus in Auckland, New Zealand: A 12-Year Retrospective Cohort Analysis. <i>Asia-Pacific Journal of Ophthalmology</i> , 2021, 10, 579-589.	1.3	6
31	Peer-support to increase uptake of screening for diabetic retinopathy: process evaluation of the DURE cluster randomized trial. <i>Tropical Medicine and Health</i> , 2020, 48, 1.	1.0	78
32	Effective refractive error coverage: an eye health indicator to measure progress towards universal health coverage. <i>Ophthalmic and Physiological Optics</i> , 2020, 40, 1-5.	1.0	30
33	Feasibility of a cluster randomized controlled trial on the effectiveness of peer-led health education interventions to increase uptake of retinal examination for diabetic retinopathy in Kirinyaga, Kenya: a pilot trial. <i>Pilot and Feasibility Studies</i> , 2020, 6, 102.	0.5	7
34	Interventions to promote access to eye care for non-Indigenous, non-dominant ethnic groups in high-income countries: a scoping review protocol. <i>BMJ Open</i> , 2020, 10, e033775.	0.8	8
35	Are we advancing universal health coverage through cataract services? Protocol for a scoping review. <i>BMJ Open</i> , 2020, 10, e039458.	0.8	2
36	Global eye health and the sustainable development goals: protocol for a scoping review. <i>BMJ Open</i> , 2020, 10, e035789.	0.8	7

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37	Eye health and quality of life: an umbrella review protocol. <i>BMJ Open</i> , 2020, 10, e037648.	0.8	20
38	Estimating the global cost of vision impairment and its major causes: protocol for a systematic review. <i>BMJ Open</i> , 2020, 10, e036689.	0.8	11
39	Interventions to improve the quality of cataract services: protocol for a global scoping review. <i>BMJ Open</i> , 2020, 10, e036413.	0.8	4
40	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</i> , 2020, 396, 1511-1524.	6.3	219
41	Action needed to improve equity and diversity in global eye health leadership. <i>Eye</i> , 2020, 34, 1051-1054.	1.1	6
42	Association between vision impairment and mortality: protocol for a systematic review and meta-analysis. <i>BMJ Open</i> , 2020, 10, e037556.	0.8	3
43	Equity was rarely considered in Cochrane Eyes and Vision systematic reviews and primary studies on cataract. <i>Journal of Clinical Epidemiology</i> , 2020, 125, 57-63.	2.4	10
44	Response to: Comment on: "The inverse-research law of global eye health"™. <i>Eye</i> , 2020, 34, 2350-2350.	1.1	0
45	Associations between vision impairment and driving and the effectiveness of vision-related interventions: protocol for a systematic review and meta-analysis. <i>BMJ Open</i> , 2020, 10, e040881.	0.8	0
46	Associations between vision impairment and driving and the effectiveness of vision-related interventions: protocol for a systematic review and meta-analysis. <i>BMJ Open</i> , 2020, 10, e040881.	0.8	3
47	The inverse-research law of eye health. <i>Eye</i> , 2019, 33, 1976-1977.	1.1	3
48	Cataract Services are Leaving Widows Behind: Examples from National Cross-Sectional Surveys in Nigeria and Sri Lanka. <i>International Journal of Environmental Research and Public Health</i> , 2019, 16, 3854.	1.2	19
49	Announcing The Lancet Global Health Commission on Global Eye Health. <i>The Lancet Global Health</i> , 2019, 7, e1612-e1613.	2.9	38
50	Rising rural body-mass index is the main driver of the global obesity epidemic in adults. <i>Nature</i> , 2019, 569, 260-264.	13.7	469
51	Diabetic eye disease and screening attendance by ethnicity in New Zealand: A systematic review. <i>Clinical and Experimental Ophthalmology</i> , 2019, 47, 937-947.	1.3	16
52	Eye care delivery models to improve access to eye care for Indigenous people in high-income countries: protocol for a scoping review. <i>BMJ Open</i> , 2019, 9, e029214.	0.8	7
53	Inequality in the distribution of ear, nose and throat specialists in 15 Latin American countries: an ecological study. <i>BMJ Open</i> , 2019, 9, e030220.	0.8	10
54	Willingness to pay for cataract surgery is much lower than actual costs in Zamfara state, northern Nigeria. <i>Ophthalmic Epidemiology</i> , 2018, 25, 227-233.	0.8	7

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55	Reporting of inequalities in blindness in low income and middle income countries: a review of cross sectional surveys. <i>Clinical and Experimental Ophthalmology</i> , 2018, 46, 99-100.	1.3	2
56	Avoidable Waste in Ophthalmic Epidemiology: A Review of Blindness Prevalence Surveys in Low and Middle Income Countries 2000â€“2014. <i>Ophthalmic Epidemiology</i> , 2018, 25, 13-20.	0.8	9
57	Evidence for national universal eye health plans. <i>Bulletin of the World Health Organization</i> , 2018, 96, 695-704.	1.5	30
58	Reducing inequity of cataract blindness and vision impairment is a global priority, but where is the evidence?. <i>British Journal of Ophthalmology</i> , 2018, 102, 1179-1181.	2.1	14
59	Disparities in Non-Fatal Health Outcomes in Pediatric General Trauma Studies. <i>International Journal of Environmental Research and Public Health</i> , 2018, 15, 43.	1.2	8
60	Strengthening eye health evidence for children in low-income and middle-income countries. <i>The Lancet Global Health</i> , 2018, 6, e826-e827.	2.9	0
61	Assessment of Response Bias Is Neglected in Cross-Sectional Blindness Prevalence Surveys: A Review of Recent Surveys in Low- and Middle-Income Countries. <i>Ophthalmic Epidemiology</i> , 2018, 25, 379-385.	0.8	9
62	Rapid assessment of avoidable blindness for health service planning. <i>Bulletin of the World Health Organization</i> , 2018, 96, 726-728.	1.5	16
63	Inequality in cataract blindness and services: moving beyond unidimensional analyses of social position. <i>British Journal of Ophthalmology</i> , 2017, 101, 395-400.	2.1	23
64	Worldwide trends in body-mass index, underweight, overweight, and obesity from 1975 to 2016: a pooled analysis of 2416 population-based measurement studies in 128Â·9 million children, adolescents, and adults. <i>Lancet, The</i> , 2017, 390, 2627-2642.	6.3	5,010
65	Universal eye health: are we getting closer?. <i>The Lancet Global Health</i> , 2017, 5, e843-e844.	2.9	14
66	Interventions to improve access to cataract surgical services and their impact on equity in low- and middle-income countries. <i>The Cochrane Library</i> , 2017, 2017, CD011307.	1.5	20
67	Effective cataract surgical coverage: An indicator for measuring quality-of-care in the context of Universal Health Coverage. <i>PLoS ONE</i> , 2017, 12, e0172342.	1.1	70
68	Using the STROBE statement to assess reporting in blindness prevalence surveys in low and middle income countries. <i>PLoS ONE</i> , 2017, 12, e0176178.	1.1	18
69	To realize universal eye health we must strengthen implementation research. <i>Middle East African Journal of Ophthalmology</i> , 2017, 24, 65.	0.5	4
70	Worldwide trends in diabetes since 1980: a pooled analysis of 751 population-based studies with 4Â·4 million participants. <i>Lancet, The</i> , 2016, 387, 1513-1530.	6.3	2,842
71	Trends in adult body-mass index in 200 countries from 1975 to 2014: a pooled analysis of 1698 population-based measurement studies with 19Â·2 million participants. <i>Lancet, The</i> , 2016, 387, 1377-1396.	6.3	3,941
72	Growing Up in New Zealand cohort alignment with all New Zealand births. <i>Australian and New Zealand Journal of Public Health</i> , 2015, 39, 82-87.	0.8	87

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73	Ancestry of the Timorese: age-related macular degeneration associated genotype and allele sharing among human populations from throughout the world. <i>Frontiers in Genetics</i> , 2015, 6, 238.	1.1	9
74	Equity and Blindness: Closing Evidence Gaps to Support Universal Eye Health. <i>Ophthalmic Epidemiology</i> , 2015, 22, 297-307.	0.8	50
75	Healthy Eyes in Schools: An evaluation of a school and community-based intervention to promote eye health in rural Timor-Leste. <i>Health Education Journal</i> , 2015, 74, 392-402.	0.6	12
76	Rare and common variants in extracellular matrix gene Fibrillin 2 (FBN2) are associated with macular degeneration. <i>Human Molecular Genetics</i> , 2014, 23, 5827-5837.	1.4	52
77	Interventions to improve access to cataract surgical services and their impact on equity in low- and middle-income countries. <i>The Cochrane Library</i> , 2014, , .	1.5	5
78	Changing Barriers to Use of Eye Care Services in Timor-Leste: 2005 to 2010. <i>Ophthalmic Epidemiology</i> , 2013, 20, 45-51.	0.8	15
79	Refractive Error and Presbyopia in Timor-Leste: The Impact of 5 Years of a National Spectacle Program. , 2012, 53, 434.		17
80	Spectacle Dispensing in Timor-Leste: Tiered-pricing, Cross-subsidization and Financial Viability. <i>Ophthalmic Epidemiology</i> , 2012, 19, 231-235.	0.8	5
81	Prevalence and Causes of Blindness and Low Vision Revisited after 5 years of Eye Care in Timor-Leste. <i>Ophthalmic Epidemiology</i> , 2012, 19, 52-57.	0.8	18
82	Eye Care in Fiji: A Population-based Study of Use and Barriers. <i>Ophthalmic Epidemiology</i> , 2012, 19, 43-51.	0.8	8
83	Primary eye care in Timor-Leste. <i>British Journal of Ophthalmology</i> , 2012, 96, 143-145.	2.1	2
84	BMI among Timorese aged ≥40 years. <i>Public Health Nutrition</i> , 2012, 15, 2118-2123.	1.1	2
85	Prevalence of diabetes among adults aged ≥40 years in Timor-Leste. <i>Journal of Diabetes</i> , 2012, 4, 392-394.	0.8	4
86	Prevalence and causes of blindness and low vision among adults in Fiji. <i>Clinical and Experimental Ophthalmology</i> , 2012, 40, 490-496.	1.3	15
87	Diabetes and its ocular complications: awareness among adults aged 40-years and older in Timor-Leste. <i>Australasian journal of optometry</i> , The, 2012, 95, 377-381.	0.6	7
88	Vision screening of children attending primary school in rural Timor-Leste. <i>Clinical and Experimental Ophthalmology</i> , 2011, 39, 377-378.	1.3	6
89	Population-based study of self-reported ocular trauma in Fiji. <i>Clinical and Experimental Ophthalmology</i> , 2011, 39, 441-448.	1.3	8
90	Cataract and its surgery in Fiji. <i>Clinical and Experimental Ophthalmology</i> , 2011, 39, 449-455.	1.3	4

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91	Eye health promotion in Western Pacific island countries. <i>Clinical and Experimental Ophthalmology</i> , 2011, 39, 584-585.	1.3	4
92	Diabetic eye disease among adults in Fiji with previously undiagnosed diabetes. <i>Clinical and Experimental Ophthalmology</i> , 2011, 39, 682-690.	1.3	9
93	Diabetes and its ocular complications in Timor-Leste. <i>Clinical and Experimental Ophthalmology</i> , 2011, 39, 843-844.	1.3	2
94	The association of diabetes and BMI among Melanesian and Indian Fijians aged ≥40 years. <i>British Journal of Nutrition</i> , 2011, 105, 1539-1545.	1.2	1
95	Body Mass Index Among Melanesian and Indian Fijians Aged ≥ 40 Years Living in Fiji. <i>Asia-Pacific Journal of Public Health</i> , 2011, 23, 34-43.	0.4	8
96	Refractive Error and Presbyopia Among Adults in Fiji. <i>Ophthalmic Epidemiology</i> , 2011, 18, 75-82.	0.8	14
97	Monitoring and evaluation of refractive error and presbyopia for Vision 2020. <i>Clinical and Experimental Ophthalmology</i> , 2010, 38, 249-254.	1.3	3
98	Training and using mid-level eye care workers: early lessons from Timor-Leste. <i>Clinical and Experimental Ophthalmology</i> , 2010, 38, 805-811.	1.3	8
99	Diabetic retinopathy in a hospital eye clinic population in Honiara, Solomon Islands. <i>Clinical and Experimental Ophthalmology</i> , 2010, 38, 862-866.	1.3	3
100	Diabetic eye disease among adults in Fiji with self-reported diabetes. <i>Clinical and Experimental Ophthalmology</i> , 2010, 38, 867-874.	1.3	18
101	The Impact of Reduced Distance and Near Vision on the Quality of Life of Adults in Timor-Leste. <i>Ophthalmology</i> , 2010, 117, 2308-2314.	2.5	27
102	The prevalence of diabetes among adults aged 40 years and over in Fiji. <i>New Zealand Medical Journal</i> , 2010, 123, 68-75.	0.5	33
103	Stated and Actual Willingness to Pay for Spectacles in Timor-Leste. <i>Ophthalmic Epidemiology</i> , 2009, 16, 224-230.	0.8	14
104	Are readymade spectacles sufficient in developing countries?. <i>Clinical and Experimental Ophthalmology</i> , 2009, 37, 900-902.	1.3	4
105	Applying Standards to Readymade Spectacles Used in Low-Resource Countries. <i>Optometry and Vision Science</i> , 2009, 86, 1104-1111.	0.6	14
106	Stated and actual willingness to pay for spectacles in Timor-Leste. <i>Ophthalmic Epidemiology</i> , 2009, 16, 224-30.	0.8	11
107	Spectacles in Fiji: need, acquisition, use and willingness to pay. <i>Australasian journal of optometry</i> , The, 2008, 91, 538-544.	0.6	14
108	Eye care in Timor-Leste: a population-based study of utilization and barriers. <i>Clinical and Experimental Ophthalmology</i> , 2008, 36, 47-53.	1.3	47

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109	Evaluation of the first 5 years of a national eye health programme in Vanuatu. <i>Clinical and Experimental Ophthalmology</i> , 2008, 36, 162-167.	1.3	6
110	Public sector refraction and spectacle dispensing in low resource countries of the Western Pacific. <i>Clinical and Experimental Ophthalmology</i> , 2008, 36, 339-347.	1.3	16
111	Eye Health in East Timor. <i>Ophthalmology</i> , 2008, 115, 1263-1264.	2.5	1
112	Using assessment of willingness to pay to improve a Cambodian spectacle service. <i>British Journal of Ophthalmology</i> , 2008, 92, 170-174.	2.1	21
113	Development and Validation of a Vision-Specific Quality-of-Life Questionnaire for Timor-Leste. , 2008, 49, 4284.		15
114	Prevalence and causes of blindness and low vision in Timor-Leste. <i>British Journal of Ophthalmology</i> , 2007, 91, 1117-1121.	2.1	51
115	Tolerance to Prism Induced by Readymade Spectacles: Setting and Using a Standard. <i>Optometry and Vision Science</i> , 2007, 84, 1053-1059.	0.6	29
116	Correction of refractive error and presbyopia in Timor-Leste. <i>British Journal of Ophthalmology</i> , 2007, 91, 860-866.	2.1	126
117	Recycled donated spectacles: experiences of eye care personnel in the Pacific ? response. <i>Clinical and Experimental Ophthalmology</i> , 2007, 35, 392-392.	1.3	0
118	An eye health strategy for Timor-Leste: the result of INGDO?government partnership and a consultative process. <i>Clinical and Experimental Ophthalmology</i> , 2007, 35, 394-394.	1.3	11
119	An assessment of recycled spectacles donated to a developing country ? response. <i>Clinical and Experimental Ophthalmology</i> , 2007, 35, 393-393.	1.3	0
120	Eye disease and care at hospital clinics in Cook Islands, Fiji, Samoa and Tonga. <i>Clinical and Experimental Ophthalmology</i> , 2007, 35, 627-634.	1.3	19
121	Quantification of Refractive Error: Comparison of Autorefractor and Focometer. <i>Optometry and Vision Science</i> , 2006, 83, 582-588.	0.6	8
122	Towards standards of outcome quality: a protocol for the surgical treatment of cataract in developing countries. <i>Clinical and Experimental Ophthalmology</i> , 2006, 34, 383-387.	1.3	9
123	An assessment of recycled spectacles donated to a developing country. <i>Clinical and Experimental Ophthalmology</i> , 2006, 34, 671-676.	1.3	26
124	Affordable ready-made spectacles for use in blindness prevention programmes: setting standards of quality. <i>Clinical and Experimental Ophthalmology</i> , 2006, 34, 722-724.	1.3	17
125	Cataract and its surgery in Timor-Leste. <i>Clinical and Experimental Ophthalmology</i> , 2006, 34, 870-879.	1.3	15
126	Awareness and Use of Eye Care Services in Fiji. <i>Ophthalmic Epidemiology</i> , 2006, 13, 309-320.	0.8	23

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127	The Gambia National Eye Health Survey 2019: survey protocol. Wellcome Open Research, 0, 6, 10.	0.9	7
128	Realizing the potential of routinely collected data for monitoring eye health services to help achieve universal health coverage. , 0, 1, 5-8.		1
129	Reporting of health equity considerations in equity-relevant observational studies: Protocol for a systematic assessment. F1000Research, 0, 11, 615.	0.8	6
130	Publishing opportunities and gender equity: Embedding monitoring in eye health education. Clinical and Experimental Ophthalmology, 0, , .	1.3	0