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List of Publications by Year in descending order

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51562 36271 78,007 86 51 86 citations h-index g-index papers 88 88 88 105172 docs citations times ranked citing authors all docs

#	Article	IF	CITATIONS
1	Global, regional, and national incidence, prevalence, and years lived with disability for 354 diseases and injuries for 195 countries and territories, 1990–2017: a systematic analysis for the Global Burden of Disease Study 2017. Lancet, The, 2018, 392, 1789-1858.	6.3	8,569
2	Global, regional, and national incidence, prevalence, and years lived with disability for 328 diseases and injuries for 195 countries, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016. Lancet, The, 2017, 390, 1211-1259.	6.3	5,578
3	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. Lancet, The, 2016, 388, 1545-1602.	6.3	5,298
4	Health Effects of Overweight and Obesity in 195 Countries over 25 Years. New England Journal of Medicine, 2017, 377, 13-27.	13.9	5,014
5	Worldwide trends in body-mass index, underweight, overweight, and obesity from 1975 to 2016: a pooled analysis of 2416 population-based measurement studies in 128·9 million children, adolescents, and adults. Lancet, The, 2017, 390, 2627-2642.	6.3	5,010
6	Global, regional, and national age-sex-specific mortality for 282 causes of death in 195 countries and territories, 1980â€"2017: a systematic analysis for the Global Burden of Disease Study 2017. Lancet, The, 2018, 392, 1736-1788.	6.3	4,989
7	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. Lancet, The, 2016, 388, 1459-1544.	6.3	4,934
8	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. Lancet, The, 2016, 388, 1659-1724.	6.3	4,203
9	Trends in adult body-mass index in 200 countries from 1975 to 2014: a pooled analysis of 1698 population-based measurement studies with 19·2 million participants. Lancet, The, 2016, 387, 1377-1396.	6.3	3,941
10	Global, regional, and national age-sex specific mortality for 264 causes of death, 1980–2016: a systematic analysis for the Global Burden of Disease Study 2016. Lancet, The, 2017, 390, 1151-1210.	6.3	3,565
11	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, 1990–2017: a systematic analysis for the Global Burden of Disease Study 2017. Lancet, The, 2018, 392, 1923-1994.	6.3	3,269
12	Worldwide trends in diabetes since 1980: a pooled analysis of 751 population-based studies with $4\hat{A}\cdot 4$ million participants. Lancet, The, 2016, 387, 1513-1530.	6.3	2,842
13	Global, regional, and national disability-adjusted life-years (DALYs) for 359 diseases and injuries and healthy life expectancy (HALE) for 195 countries and territories, 1990–2017: a systematic analysis for the Global Burden of Disease Study 2017. Lancet, The, 2018, 392, 1859-1922.	6.3	2,123
14	Alcohol use and burden for 195 countries and territories, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016. Lancet, The, 2018, 392, 1015-1035.	6.3	2,005
15	Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016. Lancet, The, 2017, 390, 1345-1422.	6.3	1,879
16	Worldwide trends in blood pressure from 1975 to 2015: a pooled analysis of 1479 population-based measurement studies with $19\text{\^{A}}\cdot1$ million participants. Lancet, The, 2017, 389, 37-55.	6.3	1,667
17	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. Lancet, The, 2016, 388, 1603-1658.	6.3	1,612
18	Global, regional, and national disability-adjusted life-years (DALYs) for 333 diseases and injuries and healthy life expectancy (HALE) for 195 countries and territories, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016. Lancet, The, 2017, 390, 1260-1344.	6.3	1,589

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19	Worldwide trends in hypertension prevalence and progress in treatment and control from 1990 to 2019: a pooled analysis of 1201 population-representative studies with 104 million participants. Lancet, The, 2021, 398, 957-980.	6.3	1,289
20	Global, regional, and national levels of maternal mortality, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015. Lancet, The, 2016, 388, 1775-1812.	6.3	740
21	Global, regional, and national age-sex-specific mortality and life expectancy, 1950–2017: a systematic analysis for the Global Burden of Disease Study 2017. Lancet, The, 2018, 392, 1684-1735.	6.3	716
22	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. Lancet, The, 2018, 391, 2236-2271.	6.3	638
23	Global, regional, and national under-5 mortality, adult mortality, age-specific mortality, and life expectancy, 1970–2016: a systematic analysis for the Global Burden of Disease Study 2016. Lancet, The, 2017, 390, 1084-1150.	6.3	573
24	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. Lancet, The, 2016, 388, 1725-1774.	6.3	571
25	Healthcare Access and Quality Index based on mortality from causes amenable to personal health care in 195 countries and territories, 1990–2015: a novel analysis from the Global Burden of Disease Study 2015. Lancet, The, 2017, 390, 231-266.	6.3	480
26	Estimates of global, regional, and national incidence, prevalence, and mortality of HIV, 1980–2015: the Global Burden of Disease Study 2015. Lancet HIV,the, 2016, 3, e361-e387.	2.1	461
27	Measuring the health-related Sustainable Development Goals in 188 countries: a baseline analysis from the Global Burden of Disease Study 2015. Lancet, The, 2016, 388, 1813-1850.	6.3	413
28	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. Lancet, The, 2018, 392, 2091-2138.	6.3	335
29	Population and fertility by age and sex for 195 countries and territories, 1950–2017: a systematic analysis for the Global Burden of Disease Study 2017. Lancet, The, 2018, 392, 1995-2051.	6.3	294
30	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. Lancet, The, 2017, 390, 1423-1459.	6.3	284
31	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. Lancet, The, 2020, 396, 1511-1524.	6.3	219
32	Evolution and patterns of global health financing 1995–2014: development assistance for health, and government, prepaid private, and out-of-pocket health spending in 184 countries. Lancet, The, 2017, 389, 1981-2004.	6.3	204
33	Effects of moderate beer consumption on health and disease: A consensus document. Nutrition, Metabolism and Cardiovascular Diseases, 2016, 26, 443-467.	1.1	196
34	Trends in future health financing and coverage: future health spending and universal health coverage in 188 countries, 2016–40. Lancet, The, 2018, 391, 1783-1798.	6.3	172
35	Future and potential spending on health 2015–40: development assistance for health, and government, prepaid private, and out-of-pocket health spending in 184 countries. Lancet, The, 2017, 389, 2005-2030.	6.3	163
36	Alcohol consumption and the prevalence of metabolic syndrome: A meta-analysis of observational studies. Atherosclerosis, 2009, 204, 624-635.	0.4	156

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37	Effects of diabetes definition on global surveillance of diabetes prevalence and diagnosis: a pooled analysis of 96 population-based studies with 331â€^288 participants. Lancet Diabetes and Endocrinology,the, 2015, 3, 624-637.	5 . 5	139
38	Spending on health and HIV/AIDS: domestic health spending and development assistance in 188 countries, 1995–2015. Lancet, The, 2018, 391, 1799-1829.	6.3	127
39	Diet quality concept. Nutrition, 2014, 30, 613-618.	1.1	121
40	Demographic and socioeconomic disparity in nutrition: application of a novel Correlated Component Regression approach. BMJ Open, 2015, 5, e006814-e006814.	0.8	98
41	Contribution of violaxanthin, neoxanthin, phytoene and phytofluene to total carotenoid intake: Assessment in Luxembourg. Journal of Food Composition and Analysis, 2012, 25, 56-65.	1.9	85
42	No significant independent relationships with cardiometabolic biomarkers were detected in the Observation of Cardiovascular Risk Factors in Luxembourg study population. Nutrition Research, 2014, 34, 1058-1065.	1.3	83
43	Cardiovascular Health and Cognitive Function: The Maine-Syracuse Longitudinal Study. PLoS ONE, 2014, 9, e89317.	1.1	82
44	Smoking status is inversely associated with overall diet quality: Findings from the ORISCAV-LUX study. Clinical Nutrition, 2017, 36, 1275-1282.	2.3	81
45	Cross-comparison of diet quality indices for predicting chronic disease risk: findings from the Observation of Cardiovascular Risk Factors in Luxembourg (ORISCAV-LUX) study. British Journal of Nutrition, 2015, 113, 259-269.	1.2	74
46	Use of food frequency questionnaire to assess relationships between dietary habits and cardiovascular risk factors in NESCAV study: validation with biomarkers. Nutrition Journal, 2013, 12, 143.	1.5	68
47	Chocolate intake is associated with better cognitive function: The Maine-Syracuse Longitudinal Study. Appetite, 2016, 100, 126-132.	1.8	65
48	Contributions of mean and shape of blood pressure distribution to worldwide trends and variations in raised blood pressure: a pooled analysis of 1018 population-based measurement studies with 88.6 million participants. International Journal of Epidemiology, 2018, 47, 872-883i.	0.9	65
49	First nationwide survey on cardiovascular risk factors in Grand-Duchy of Luxembourg (ORISCAV-LUX). BMC Public Health, 2010, 10, 468.	1.2	64
50	Physical activity, sedentary behavior time and lipid levels in the Observation of Cardiovascular Risk Factors in Luxembourg study. Lipids in Health and Disease, 2015, 14, 87.	1.2	57
51	Comparison of participants and non-participants to the ORISCAV-LUX population-based study on cardiovascular risk factors in Luxembourg. BMC Medical Research Methodology, 2010, 10, 80.	1.4	55
52	Prevalence of the metabolic syndrome in Luxembourg according to the Joint Interim Statement definition estimated from the ORISCAV-LUX study. BMC Public Health, 2011, 11, 4.	1,2	54
53	Consumption of ready-made meals and increased risk of obesity: findings from the Observation of Cardiovascular Risk Factors in Luxembourg (ORISCAV-LUX) study. British Journal of Nutrition, 2015, 113, 270-277.	1.2	50
54	Association between Nutritional Awareness and Diet Quality: Evidence from the Observation of Cardiovascular Risk Factors in Luxembourg (ORISCAV-LUX) Study. Nutrients, 2015, 7, 2823-2838.	1.7	43

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55	Heterogeneous contributions of change in population distribution of body mass index to change in obesity and underweight. ELife, 2021, 10, .	2.8	41
56	Whole-fat dairy food intake is inversely associated with obesity prevalence: findings from the Observation of Cardiovascular Risk Factors in Luxembourg study. Nutrition Research, 2014, 34, 936-943.	1.3	40
57	Dietary, behavioural and socio-economic determinants of the metabolic syndrome among adults in Luxembourg: findings from the ORISCAV-LUX study. Public Health Nutrition, 2012, 15, 849-859.	1.1	31
58	Adherence to Physical Activity Recommendations and Its Associated Factors: An Interregional Population-Based Study. Journal of Public Health Research, 2015, 4, jphr.2015.406.	0.5	31
59	Association of Empirically Derived Dietary Patterns with Cardiovascular Risk Factors: A Comparison of PCA and RRR Methods. PLoS ONE, 2016, 11, e0161298.	1.1	30
60	Population-based biomonitoring of exposure to persistent and non-persistent organic pollutants in the Grand Duchy of Luxembourg: Results from hair analysis. Environment International, 2021, 153, 106526.	4.8	29
61	Level of Unawareness and Management of Diabetes, Hypertension, and Dyslipidemia among Adults in Luxembourg: Findings from ORISCAV-LUX Study. PLoS ONE, 2013, 8, e57920.	1.1	28
62	Population compliance with national dietary recommendations and its determinants: findings from the ORISCAV-LUX study. British Journal of Nutrition, 2012, 108, 2083-2092.	1.2	27
63	The potential impact of animal protein intake on global and abdominal obesity: evidence from the Observation of Cardiovascular Risk Factors in Luxembourg (ORISCAV-LUX) study. Public Health Nutrition, 2015, 18, 1831-1838.	1.1	26
64	Diet Soft Drink Consumption is Associated with the Metabolic Syndrome: A Two Sample Comparison. Nutrients, 2015, 7, 3569-3586.	1.7	25
65	Stability-based validation of dietary patterns obtained by cluster analysis. Nutrition Journal, 2017, 16, 4.	1.5	25
66	Dairy food intake is positively associated with cardiovascular health: findings from Observation of Cardiovascular Risk Factors in Luxembourg study. Nutrition Research, 2014, 34, 1036-1044.	1.3	24
67	Daily chocolate consumption is inversely associated with insulin resistance and liver enzymes in the Observation of Cardiovascular Risk Factors in Luxembourg study. British Journal of Nutrition, 2016, 115, 1661-1668.	1.2	24
68	Simultaneous determination of nicotine and PAH metabolites in human hair specimen: A potential methodology to assess tobacco smoke contribution in PAH exposure. Toxicology Letters, 2012, 210, 211-219.	0.4	22
69	Cardiovascular health: a cross-national comparison between the Maine Syracuse Study (Central New) Tj ETQq1 1	l 0.78431 1.2	4 rgBT /Overl
70	Prevalence and Correlates of Vitamin D Deficiency and Insufficiency in Luxembourg Adults: Evidence from the Observation of Cardiovascular Risk Factors (ORISCAV-LUX) Study. Nutrients, 2015, 7, 6780-6796.	1.7	20
71	Challenges and benefits of integrating diverse sampling strategies in the observation of cardiovascular risk factors (ORISCAV-LUX 2) study. BMC Medical Research Methodology, 2019, 19, 27.	1.4	20
72	Nutrition, environment and cardiovascular health (NESCAV): protocol of an inter-regional cross-sectional study. BMC Public Health, 2010, 10, 698.	1.2	19

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73	Prevalence and related risk factors of chronic kidney disease among adults in Luxembourg: evidence from the observation of cardiovascular risk factors (ORISCAV-LUX) study. BMC Nephrology, 2017, 18, 358.	0.8	17
74	Acculturation, immigration status and cardiovascular risk factors among Portuguese immigrants to Luxembourg: findings from ORISCAV-LUX study. BMC Public Health, 2012, 12, 864.	1.2	15
75	Association of Sedentary Behavior Time with Ideal Cardiovascular Health: The ORISCAV-LUX Study. PLoS ONE, 2014, 9, e99829.	1.1	14
76	Tea, but not coffee consumption, is associated with components of arterial pressure. The Observation of Cardiovascular Risk Factors study in Luxembourg. Nutrition Research, 2015, 35, 557-565.	1.3	13
77	Hypothalamic-pituitary-adrenal-axis dysregulation and double product increases potentiate ischemic heart disease risk in a Black male cohort: the SABPA study. Hypertension Research, 2017, 40, 590-597.	1.5	12
78	Relation of Habitual Chocolate Consumption to Arterial Stiffness in a Community-Based Sample: Preliminary Findings. Pulse, 2016, 4, 28-37.	0.9	10
79	Geographic Variations in Cardiometabolic Risk Factors in Luxembourg. International Journal of Environmental Research and Public Health, 2017, 14, 648.	1.2	10
80	Mapping the burden of diabetes in five small countries in Europe and setting the agenda for health policy and strategic action. Health Research Policy and Systems, 2021, 19, 43.	1.1	8
81	Intake of Lutein-Rich Vegetables Is Associated with Higher Levels of Physical Activity. Nutrients, 2015, 7, 8058-8071.	1.7	7
82	Objective and subjective sleep measures are associated with HbA1c and insulin sensitivity in the general population: Findings from the ORISCAV-LUX-2 study. Diabetes and Metabolism, 2021, 48, 101263.	1.4	7
83	Acute cardiometabolic responses facilitating a state of chronic hyperglycemia and renal impairment. Cardiovascular Endocrinology, 2014, 3, 98-106.	0.8	2
84	Reply-Letter to the Editor – Smoking status is inversely associated with overall diet quality: Findings from the ORISCAV-LUX study. Clinical Nutrition, 2018, 37, 761-762.	2.3	2
85	Dietary patterns and type 2 diabetesâ€"relationship to metabolic syndrome and inflammation. , 2022, , 261-366.		2
86	Cardiometabolic Syndrome., 0,,.		1