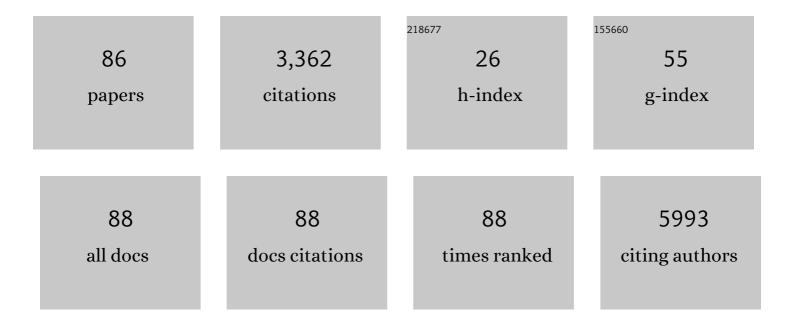
Leandro FÃ³rnias Machado de Rezende

List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	Lifestyle risk factors and all-cause and cause-specific mortality: assessing the influence of reverse causation in a prospective cohort of 457,021 US adults. European Journal of Epidemiology, 2022, 37, 11-23.	5.7	12
2	Association between 24-h movement guidelines and cardiometabolic health in Chilean adults. Scientific Reports, 2022, 12, 5805.	3.3	6
3	Socioeconomic inequalities in the consumption of minimally processed and ultra-processed foods in Brazilian adolescents. Ciencia E Saude Coletiva, 2022, 27, 1469-1476.	0.5	7
4	Has the Prevalence of Childhood Obesity in Spain Plateaued? A Systematic Review and Meta-Analysis. International Journal of Environmental Research and Public Health, 2022, 19, 5240.	2.6	12
5	The economic burden of overweight and obesity in Brazil: perspectives for the Brazilian Unified Health System. Public Health, 2022, 207, 82-87.	2.9	8
6	Patterns of alcohol consumption in Brazilian adults. Scientific Reports, 2022, 12, .	3.3	4
7	The future costs of cancer attributable to excess body weight in Brazil, 2030-2040. BMC Public Health, 2022, 22, .	2.9	4
8	Analysing the impact of modifiable risk factors on cardiovascular disease mortality in Brazil. PLoS ONE, 2022, 17, e0269549.	2.5	3
9	Economic burden of cancer attributable to overweight in the Brazilian Unified Health System. Journal of Cancer Policy, 2022, 33, 100345.	1.4	1
10	Association of the "Weekend Warrior―and Other Leisure-time Physical Activity Patterns With All-Cause and Cause-Specific Mortality. JAMA Internal Medicine, 2022, 182, 840.	5.1	25
11	Association between simultaneity of health-risk behaviours and self-rated health in Brazilian adolescents. PLoS ONE, 2022, 17, e0271503.	2.5	0
12	Physical activity for cancer patients during COVID-19 pandemic: a call to action. Cancer Causes and Control, 2021, 32, 1-3.	1.8	15
13	Association of Physical Activity Intensity With Mortality. JAMA Internal Medicine, 2021, 181, 203.	5.1	102
14	Associations of six adiposity-related markers with incidence and mortality from 24 cancers—findings from the UK Biobank prospective cohort study. BMC Medicine, 2021, 19, 7.	5.5	22
15	Possible Reverse Causation and Confounding in Study of the Association of Sedentary Behavior With Cancer Mortality. JAMA Oncology, 2021, 7, 138.	7.1	3
16	Physical activity and all-cause and cause-specific mortality: assessing the impact of reverse causation and measurement error in two large prospective cohorts. European Journal of Epidemiology, 2021, 36, 275-285.	5.7	31
17	Hospital Admissions Associated With Noncommunicable Diseases During the COVID-19 Outbreak in Brazil. JAMA Network Open, 2021, 4, e210799.	5.9	8
18	Muscle-strengthening activities and cancer incidence and mortality: a systematic review and meta-analysis of observational studies. International Journal of Behavioral Nutrition and Physical Activity, 2021, 18, 69.	4.6	24

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19	Economic burden of colorectal and breast cancers attributable to lack of physical activity in Brazil. BMC Public Health, 2021, 21, 1190.	2.9	6
20	Association between weight cycling and risk of kidney cancer: a prospective cohort study and meta-analysis of observational studies. Cancer Causes and Control, 2021, 32, 1029-1038.	1.8	4
21	Educational disparities in hypertension, diabetes, obesity and smoking in Brazil: a trend analysis of 578 977 adults from a national survey, 2007–2018. BMJ Open, 2021, 11, e046154.	1.9	9
22	Simple Sugar and Sugar-Sweetened Beverage Intake During Adolescence and Risk of Colorectal Cancer Precursors. Gastroenterology, 2021, 161, 128-142.e20.	1.3	58
23	Muscleâ€strengthening activities and risk of cardiovascular disease, type 2 diabetes, cancer and mortality: A review of prospective cohort studies. Journal of Internal Medicine, 2021, 290, 789-805.	6.0	26
24	Psychological Distress and All-Cause, Cardiovascular Disease, Cancer Mortality Among Adults with and without Diabetes. Clinical Epidemiology, 2021, Volume 13, 555-565.	3.0	8
25	Non-communicable diseases deaths attributable to high body mass index in Chile. Scientific Reports, 2021, 11, 15500.	3.3	10
26	Socioeconomic inequalities in physical activity in Brazil: a pooled cross-sectional analysis from 2013 to 2019. International Journal for Equity in Health, 2021, 20, 188.	3.5	9
27	School environment and physical activity in adolescents from São Paulo city. Scientific Reports, 2021, 11, 18118.	3.3	2
28	Dairy intake during adolescence and risk of colorectal adenoma later in life. British Journal of Cancer, 2021, 124, 1160-1168.	6.4	11
29	Prevalence and co-occurrence of lifestyle risk factors for non-communicable diseases according to sociodemographic characteristics among adults Chilean residents. Scientific Reports, 2021, 11, 21702.	3.3	11
30	Tea Consumption and Risk of Cancer: An Umbrella Review and Meta-Analysis of Observational Studies. Advances in Nutrition, 2020, 11, 1437-1452.	6.4	60
31	Confounding due to pre-existing diseases in epidemiologic studies on sedentary behavior and all-cause mortality: a meta-epidemiologic study. Annals of Epidemiology, 2020, 52, 7-14.	1.9	20
32	Cancer cases and deaths attributable to lifestyle risk factors in Chile. BMC Cancer, 2020, 20, 693.	2.6	24
33	Do vigorous-intensity and moderate-intensity physical activities reduce mortality to the same extent? A systematic review and meta-analysis. BMJ Open Sport and Exercise Medicine, 2020, 6, e000775.	2.9	17
34	Physical activity patterns in a representative sample of adolescents from the largest city in Latin America: a cross-sectional study in Sao Paulo. BMJ Open, 2020, 10, e037290.	1.9	9
35	Resistance training and total and site-specific cancer risk: a prospective cohort study of 33,787 US men. British Journal of Cancer, 2020, 123, 666-672.	6.4	10
36	Consumption of Fish and ω-3 Fatty Acids and Cancer Risk: An Umbrella Review of Meta-Analyses of Observational Studies. Advances in Nutrition, 2020, 11, 1134-1149.	6.4	44

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37	Adults at high-risk of severe coronavirus disease-2019 (Covid-19) in Brazil. Revista De Saude Publica, 2020, 54, 50.	1.7	57
38	Differences in the prevalence of risk factors for severe COVID-19 across regions of São Paulo City. Revista Brasileira De Epidemiologia, 2020, 23, e200087.	0.8	3
39	Brazil's researchers overturn government ruling. Nature, 2020, 579, 343-343.	27.8	1
40	Co-occurrence and clustering of the four major non-communicable disease risk factors in Brazilian adolescents: Analysis of a national school-based survey. PLoS ONE, 2019, 14, e0219370.	2.5	36
41	Hyperprogressive Disease during Anti-PD-1 (PDCD1) / PD-L1 (CD274) Therapy: A Systematic Review and Meta-Analysis. Cancers, 2019, 11, 1699.	3.7	81
42	Deaths Attributable to High Body Mass in Brazil. Preventing Chronic Disease, 2019, 16, E141.	3.4	6
43	Physical activity during adolescence and risk of colorectal adenoma later in life: results from the Nurses' Health Study II. British Journal of Cancer, 2019, 121, 86-94.	6.4	19
44	Progress and setbacks in socioeconomic inequalities in adolescent health-related behaviours in Brazil: results from three cross-sectional surveys 2009–2015. BMJ Open, 2019, 9, e025338.	1.9	13
45	Mortalidade no primeiro dia de vida: tendências, causas de óbito e evitabilidade em oito Unidades da Federação brasileira, entre 2010 e 2015*. Epidemiologia E Servicos De Saude: Revista Do Sistema Unico De Saude Do Brasil, 2019, 28, e2018132.	1.0	14
46	Proportion of cancer cases and deaths attributable to lifestyle risk factors in Brazil. Cancer Epidemiology, 2019, 59, 148-157.	1.9	31
47	Ultra-processed foods and excessive free sugar intake in the UK: a nationally representative cross-sectional study. BMJ Open, 2019, 9, e027546.	1.9	71
48	Association of type and intensity of physical activity with plasma biomarkers of inflammation and insulin response. International Journal of Cancer, 2019, 145, 360-369.	5.1	21
49	Physical activity and preventable premature deaths from non-communicable diseases in Brazil. Journal of Public Health, 2019, 41, e253-e260.	1.8	14
50	Resting heart rate and risk of type 2 diabetes: A prospective cohort study and metaâ€analysis. Diabetes/Metabolism Research and Reviews, 2019, 35, e3095.	4.0	33
51	Associations of ultraâ€processed food and drink products with asthma and wheezing among Brazilian adolescents. Pediatric Allergy and Immunology, 2018, 29, 504-511.	2.6	59
52	Bicycle-sharing system socio-spatial inequalities in Brazil. Journal of Transport and Health, 2018, 8, 262-270.	2.2	31
53	The increasing burden of cancer attributable to high body mass index in Brazil. Cancer Epidemiology, 2018, 54, 63-70.	1.9	41
54	Physical activity and cancer: an umbrella review of the literature including 22 major anatomical sites and 770 000 cancer cases. British Journal of Sports Medicine, 2018, 52, 826-833.	6.7	193

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55	PW 1801â€Being young-black-male increases the odds of suffering police non-lethal violence in brazil, according to the national health survey 2013. , 2018, , .		0
56	Why precision medicine is not the best route to a healthier world. Revista De Saude Publica, 2018, 52, 12.	1.7	8
57	Preventable fractions of colon and breast cancers by increasing physical activity in Brazil: perspectives from plausible counterfactual scenarios. Cancer Epidemiology, 2018, 56, 38-45.	1.9	3
58	Personal, relational and school factors associated with involvement in fights with weapons among school-age youth in Brazil: a multilevel ecological approach. International Journal of Public Health, 2018, 63, 957-965.	2.3	6
59	Reporting bias in the literature on the associations of health-related behaviors and statins with cardiovascular disease and all-cause mortality. PLoS Biology, 2018, 16, e2005761.	5.6	7
60	The Obesity Phenotypes in Adolescents: Some Lessons From the HELENA Study. Journal of Adolescent Health, 2017, 61, 266.	2.5	2
61	Exercise Type in Dieting Obese Older Adults. New England Journal of Medicine, 2017, 377, 598-600.	27.0	8
62	Physical activity as part of daily living: Moving beyond quantitative recommendations. Preventive Medicine, 2017, 96, 160-162.	3.4	28
63	Prevalence of active transportation among adults in Latin America and the Caribbean: a systematic review of population-based studies. Revista Panamericana De Salud Publica/Pan American Journal of Public Health, 2017, 41, 1.	1.1	8
64	Population attributable fraction: planning of diseases prevention actions in Brazil. Revista De Saude Publica, 2016, 50, .	1.7	26
65	Modos de vida entre pessoas que tiveram câncer no Brasil em 2013. Ciencia E Saude Coletiva, 2016, 21, 379-388.	0.5	7
66	All-Cause Mortality Attributable to Sitting Time. American Journal of Preventive Medicine, 2016, 51, 253-263.	3.0	143
67	Coronary heart disease mortality, cardiovascular disease mortality and all-cause mortality attributable to dietary intake over 20years in Brazil. International Journal of Cardiology, 2016, 217, 64-68.	1.7	22
68	Food environments in schools and in the immediate vicinity are associated with unhealthy food consumption among Brazilian adolescents. Preventive Medicine, 2016, 88, 73-79.	3.4	85
69	The Fraction of Cancer Attributable to Ways of Life, Infections, Occupation, and Environmental Agents in Brazil in 2020. PLoS ONE, 2016, 11, e0148761.	2.5	77
70	Changes in travel to school patterns among children and adolescents in the São Paulo Metropolitan Area, Brazil, 1997–2007. Journal of Transport and Health, 2015, 2, 143-150.	2.2	19
71	Effect of Physical Inactivity on Major Noncommunicable Diseases and Life Expectancy in Brazil. Journal of Physical Activity and Health, 2015, 12, 299-306.	2.0	30
72	Environmental Interventions Are Needed to Provide Sustained Physical Activity Changes. Exercise and Sport Sciences Reviews, 2015, 43, 238.	3.0	2

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73	The Role of School Environment in Physical Activity among Brazilian Adolescents. PLoS ONE, 2015, 10, e0131342.	2.5	24
74	Força de preensão manual como preditor de aptidão fÃsica em crianças e adolescentes. Revista Brasileira De Cineantropometria E Desempenho Humano, 2015, 17, 1.	0.5	23
75	Dietary intake of Brazilian adolescents. Public Health Nutrition, 2015, 18, 1215-1224.	2.2	74
76	Is the Metabolically Healthy Obesity Phenotype an Irrelevant Artifact for Public Health?. American Journal of Epidemiology, 2015, 182, 737-741.	3.4	33
77	Rey-López et al. Respond to "The Metabolically Healthy Obesity Phenotype― American Journal of Epidemiology, 2015, 182, 745-746.	3.4	1
78	Sedentary Behavior and Health Outcomes: An Overview of Systematic Reviews. PLoS ONE, 2014, 9, e105620.	2.5	649
79	The prevalence of metabolically healthy obesity: a systematic review and critical evaluation of the definitions used. Obesity Reviews, 2014, 15, 781-790.	6.5	221
80	Sedentary behavior and health outcomes among older adults: a systematic review. BMC Public Health, 2014, 14, 333.	2.9	453
81	Sociodemographic and behavioral factors associated with physical activity in Brazilian adolescents. BMC Public Health, 2014, 14, 485.	2.9	45
82	Associação da Aptidão FÃsica e Desempenho Acadêmico de Escolares. Revista Brasileira De Ciência E Movimento, 2014, 22, 37-46.	0.0	1
83	A prática do futebol acentua os graus de Geno Varo?. Revista Brasileira De Medicina Do Esporte, 2011, 17, 329-333.	0.2	6
84	Does Soccer Lead To Genu Varum?. Medicine and Science in Sports and Exercise, 2010, 42, 711.	0.4	0
85	Changes in Obesity Prevalence Attributable to Ultra-Processed Food Consumption in Brazil Between 2002 and 2009. International Journal of Public Health, 0, 67, .	2.3	1
86	Adherence to healthy lifestyle recommendations in Brazilian cancer survivors. Journal of Cancer Survivorship, 0, , .	2.9	1