

Henri Ejh Stoffers

List of Publications by Year in descending order

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Version: 2024-02-01

105
papers

5,846
citations

136950

32
h-index

74163

75
g-index

110
all docs

110
docs citations

110
times ranked

7161
citing authors

#	ARTICLE	IF	CITATIONS
1	Most valued author and reviewer in 2021. <i>European Journal of General Practice</i> , 2022, 28, 134-135.	2.0	0
2	Tools to help healthcare professionals recognize palliative care needs in patients with advanced heart failure: A systematic review. <i>Palliative Medicine</i> , 2021, 35, 45-58.	3.1	15
3	Reflective testing – A randomized controlled trial in primary care patients. <i>Annals of Clinical Biochemistry</i> , 2021, 58, 78-85.	1.6	9
4	The Effect of a Comprehensive, Interdisciplinary Medication Review on Quality of Life and Medication Use in Community Dwelling Older People with Polypharmacy. <i>Journal of Clinical Medicine</i> , 2021, 10, 600.	2.4	8
5	Editors’ choice: the most valued articles published in the <i>European Journal of General Practice</i> in 2020. <i>European Journal of General Practice</i> , 2021, 27, 140-141.	2.0	0
6	Editors’ choice: The four most valued articles published in the <i>European Journal of General Practice</i> in 2019. <i>European Journal of General Practice</i> , 2020, 26, 70-70.	2.0	0
7	Opportunistic screening versus usual care for detection of atrial fibrillation in primary care: cluster randomised controlled trial. <i>BMJ</i> , The, 2020, 370, m3208.	6.0	45
8	Professionals guidance about palliative medicine in chronic heart failure: a mixed-method study. <i>BMJ Supportive and Palliative Care</i> , 2020, , bmjspcare-2020-002580.	1.6	4
9	Interpretations of and management actions following ECGs in programmatic cardiovascular care in primary care: A retrospective dossier study. <i>Netherlands Heart Journal</i> , 2020, 28, 192-201.	0.8	5
10	Thanks to our reviewers of 2019 and call to review in 2020!. <i>European Journal of General Practice</i> , 2020, 26, (i)-(ii).	2.0	0
11	Family medicine in times of “COVID-19”: A generalists' voice. <i>European Journal of General Practice</i> , 2020, 26, 58-60.	2.0	66
12	Interpretations of and management actions following electrocardiograms in symptomatic patients in primary care: a retrospective dossier study. <i>Netherlands Heart Journal</i> , 2019, 27, 498-505.	0.8	4
13	Thanks to our reviewers of 2018 and call to review in 2019!. <i>European Journal of General Practice</i> , 2019, 25, 1-2.	2.0	1
14	European primary care research and a national general practice research agenda. <i>European Journal of General Practice</i> , 2019, 25, 3-4.	2.0	0
15	General practitioner use of D-dimer in suspected venous thromboembolism: historical cohort study in one geographical region in the Netherlands. <i>BMJ Open</i> , 2019, 9, e026846.	1.9	5
16	The promise of eHealth for primary care: opportunities for service delivery, patient–doctor communication, self-management, shared decision making and research. <i>European Journal of General Practice</i> , 2018, 24, 146-148.	2.0	10
17	DIFFERENCES IN LONG-TERM CHANGES IN CAROTID REMODELING BETWEEN NORMOTENSIVE AND HYPERTENSIVE PERSONS IN A PRIMARY CARE POPULATION. <i>Journal of Hypertension</i> , 2018, 36, e28.	0.5	0
18	Competence of general practitioners in requesting and interpreting ECGs - a case vignette study. <i>Netherlands Heart Journal</i> , 2018, 26, 377-384.	0.8	10

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19	Thanks to our reviewers of 2016 and call to review in 2017 for us. European Journal of General Practice, 2017, 23, 3-3.	2.0	0
20	The European Journal of General Practice provides open access for all. "Where are we, where are we going?" European Journal of General Practice, 2017, 23, 1-2.	2.0	7
21	Current practice of Dutch cardiologists in detecting and diagnosing atrial fibrillation: results of an online case vignette study. Netherlands Heart Journal, 2017, 25, 567-573.	0.8	5
22	Arterial stiffness and decline of renal function in a primary care population. Hypertension Research, 2017, 40, 73-78.	2.7	28
23	Opposing inequity in medical publishing: Care for quality and cherish diversity. European Journal of General Practice, 2016, 22, 1-2.	2.0	4
24	A word of thanks to our reviewers in 2015 and a call for reviewers for 2016. European Journal of General Practice, 2016, 22, 66-66.	2.0	0
25	Ruling Out Pulmonary Embolism in Primary Care: Comparison of the Diagnostic Performance of "Gestalt" and the Wells Rule. Annals of Family Medicine, 2016, 14, 227-234.	1.9	30
26	Factors associated with appropriate knowledge of the indications for prescribed drugs among community-dwelling older patients with polypharmacy. Age and Ageing, 2016, 45, 402-408.	1.6	36
27	Detecting and Diagnosing Atrial Fibrillation (D2AF): study protocol for a cluster randomised controlled trial. Trials, 2015, 16, 478.	1.6	29
28	The European Journal of General Practice in 2015 and beyond. European Journal of General Practice, 2015, 21, 3-3.	2.0	6
29	Qualitative point-of-care D-dimer testing compared with quantitative D-dimer testing in excluding pulmonary embolism in primary care. Journal of Thrombosis and Haemostasis, 2015, 13, 1004-1009.	3.8	11
30	Open access? Yes! But how?. European Journal of General Practice, 2015, 21, 1-2.	2.0	1
31	Diagnostic prediction models for suspected pulmonary embolism: systematic review and independent external validation in primary care. BMJ, The, 2015, 351, h4438.	6.0	63
32	What professional curiosity can bring you. European Journal of General Practice, 2014, 20, 1-2.	2.0	0
33	Family history tools for primary care are not ready yet to be implemented. A systematic review. European Journal of General Practice, 2014, 20, 125-133.	2.0	37
34	Alternative diagnoses in patients in whom the GP considered the diagnosis of pulmonary embolism. Family Practice, 2014, 31, 670-677.	1.9	9
35	Development and validation of an ankle brachial index risk model for the prediction of cardiovascular events. European Journal of Preventive Cardiology, 2014, 21, 310-320.	1.8	64
36	Benefits of an open access echocardiography service: a Dutch prospective cohort study. Netherlands Heart Journal, 2013, 21, 399-405.	0.8	10

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37	Thanks to our reviewers of 2012!. European Journal of General Practice, 2013, 19, 72.	2.0	0
38	The strength of primary care in Europe. European Journal of General Practice, 2013, 19, 1-2.	2.0	2
39	Safe exclusion of pulmonary embolism using the Wells rule and qualitative D-dimer testing in primary care: prospective cohort study. BMJ, The, 2012, 345, e6564-e6564.	6.0	121
40	Rimonabant improves obesity but not the overall cardiovascular risk and quality of life; results from CARDIO-REDUSE (CArdiometabolic Risk reDUCTION by Rimonabant: the Effectiveness in Daily practice) Tj ETQq0 0 UqBT /Overlock 10 T		
41	Measurement and Interpretation of the Ankle-Brachial Index. Circulation, 2012, 126, 2890-2909.	1.6	1,232
42	Evidence, the basis for practice â€¦ and politics!. European Journal of General Practice, 2012, 18, 1-2.	2.0	0
43	Impact factor in 2012!. European Journal of General Practice, 2011, 17, 196-196.	2.0	0
44	Research priorities in family medicine. European Journal of General Practice, 2011, 17, 1-2.	2.0	4
45	Optimisation of the diagnostic strategy for suspected deep-vein thrombosis in primary care. Thrombosis and Haemostasis, 2011, 105, 154-160.	3.4	4
46	Deep venous thrombosis. British Journal of General Practice, 2011, 61, 141.1-141.	1.4	0
47	Effects of a brief cardiovascular prevention program by a health advisor in primary care; the â€˜Hartslag Limburgâ€™ project, a cluster randomized trial. Preventive Medicine, 2011, 53, 395-401.	3.4	6
48	<i>The European Journal of General Practice</i> is looking for an Associate Editor. European Journal of General Practice, 2011, 17, 202-202.	2.0	0
49	Series: The research agenda for general practice/family medicine and primary health care in Europe. Part 6: Reaction on commentaries â€˜ how to continue with the Research Agenda?. European Journal of General Practice, 2011, 17, 58-61.	2.0	7
50	Comparing the Diagnostic Performance of 2 Clinical Decision Rules to Rule Out Deep Vein Thrombosis in Primary Care Patients. Annals of Family Medicine, 2011, 9, 31-36.	1.9	39
51	The European Journal of General Practice is looking for two editors. European Journal of General Practice, 2011, 17, 67-68.	2.0	0
52	Age is an independent risk factor for left atrial dysfunction: results from an observational study. Netherlands Heart Journal, 2010, 18, 243-247.	0.8	7
53	Heart failure patients with a lower educational level and better cognitive status benefit most from a self-management group programme. Patient Education and Counseling, 2010, 81, 214-221.	2.2	45
54	Evaluation of an open access echocardiography service in the Netherlands: a mixed methods study of indications, outcomes, patient management and trends. BMC Health Services Research, 2010, 10, 37.	2.2	15

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55	Nurse-led self-management group programme for patients with congestive heart failure: randomized controlled trial. <i>Journal of Advanced Nursing</i> , 2010, 66, 1487-1499.	3.3	95
56	Diagnostic classification in patients with suspected deep venous thrombosis: physicians' judgement or a decision rule?. <i>British Journal of General Practice</i> , 2010, 60, 742-748.	1.4	27
57	The doctor, his patients, their diseases. <i>European Journal of General Practice</i> , 2010, 16, 65-66.	2.0	0
58	The research agenda for general practice/family medicine and primary health care in Europe. Part 3. Results: Person centred care, comprehensive and holistic approach. <i>European Journal of General Practice</i> , 2010, 16, 113-119.	2.0	44
59	Series: The research agenda for general practice/family medicine and primary health care in Europe. Part 5: Needs and implications for future research and policy. <i>European Journal of General Practice</i> , 2010, 16, 244-248.	2.0	25
60	Series: The research agenda for general practice/family medicine and primary health care in Europe. Part 4. Results: Specific problem solving skills. <i>European Journal of General Practice</i> , 2010, 16, 174-181.	2.0	22
61	A pilot quality improvement intervention in patients with diabetes and hypertension in primary care settings of Cyprus. <i>Family Practice</i> , 2010, 27, 263-270.	1.9	18
62	“What's up, doc?”. <i>European Journal of General Practice</i> , 2010, 16, 1-1.	2.0	1
63	Series: The research agenda for general practice/family medicine and primary health care in Europe. Part 2. Results: Primary care management and community orientation1. <i>European Journal of General Practice</i> , 2010, 16, 42-50.	2.0	15
64	The contribution of six polymorphisms to cardiovascular risk in a Dutch high-risk primary care population: the HIPPOCRATES project. <i>Journal of Human Hypertension</i> , 2009, 23, 659-667.	2.2	13
65	Cost-effectiveness of ruling out deep venous thrombosis in primary care versus care as usual. <i>Journal of Thrombosis and Haemostasis</i> , 2009, 7, 2042-2049.	3.8	57
66	Feasibility of a group-based self-management program among congestive heart failure patients. <i>Heart and Lung: Journal of Acute and Critical Care</i> , 2009, 38, 499-512.	1.6	22
67	“An end has a start”. <i>European Journal of General Practice</i> , 2009, 15, 205-206.	2.0	0
68	The Research Agenda for General Practice/Family Medicine and Primary Health Care in Europe. Part 1. Background and methodology. <i>European Journal of General Practice</i> , 2009, 15, 243-250.	2.0	51
69	Obtaining the family history for common, multifactorial diseases by family physicians. A descriptive systematic review. <i>European Journal of General Practice</i> , 2009, 15, 231-242.	2.0	20
70	The influence of six cardiovascular polymorphisms on a first event of ischemic heart disease is modified by sex and age. <i>Coronary Artery Disease</i> , 2009, 20, 499-505.	0.7	2
71	Sex-specific effect of the Î±-adducin (G460W) and AGTR1 (A1166C) polymorphism on carotid intima-media thickness. <i>Journal of Hypertension</i> , 2009, 27, 2165-2173.	0.5	4
72	Safely Ruling Out Deep Venous Thrombosis in Primary Care. <i>Annals of Internal Medicine</i> , 2009, 150, 229.	3.9	97

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73	Novel Strategies for the Detection of Systolic and Diastolic Heart Failure. <i>Current Cardiology Reviews</i> , 2009, 5, 112-118.	1.5	2
74	The association between arterial stiffness and the angiotensin II type 1 receptor (A1166C) polymorphism is influenced by the use of cardiovascular medication. <i>Journal of Hypertension</i> , 2009, 27, 69-75.	0.5	9
75	Patients'™ responsiveness to a decision support tool for primary prevention of cardiovascular diseases in primary care. <i>Patient Education and Counseling</i> , 2008, 72, 63-70.	2.2	14
76	Implementing the European guidelines for cardiovascular disease prevention in the primary care setting in Cyprus: Lessons learned from a health care services study. <i>BMC Health Services Research</i> , 2008, 8, 148.	2.2	12
77	Designing a multifaceted quality improvement intervention in primary care in a country where general practice is seeking recognition: the case of Cyprus. <i>BMC Health Services Research</i> , 2008, 8, 181.	2.2	10
78	Improving patient adherence to lifestyle advice (IMPALA): a cluster-randomised controlled trial on the implementation of a nurse-led intervention for cardiovascular risk management in primary care (protocol). <i>BMC Health Services Research</i> , 2008, 8, 9.	2.2	40
79	Ankle Brachial Index Combined With Framingham Risk Score to Predict Cardiovascular Events and Mortality. <i>JAMA - Journal of the American Medical Association</i> , 2008, 300, 197.	7.4	1,553
80	Coronary heart disease and cardiovascular risk factors among people aged 25-65 years, as seen in Romanian primary healthcare. <i>European Journal of General Practice</i> , 2008, 14, 56-64.	2.0	11
81	Primary Prevention of Cardiovascular Diseases in General Practice: Mismatch between Cardiovascular Risk and Patients' Risk Perceptions. <i>Medical Decision Making</i> , 2007, 27, 754-761.	2.4	73
82	Improving cardiovascular risk management: a randomized, controlled trial on the effect of a decision support tool for patients and physicians. <i>European Journal of Cardiovascular Prevention and Rehabilitation</i> , 2007, 14, 44-50.	2.8	52
83	Electronic Monitoring of Adherence as a Tool to Improve Blood Pressure Control: A Randomized Controlled Trial. <i>American Journal of Hypertension</i> , 2007, 20, 119-125.	2.0	53
84	Cost Effectiveness of an Adherence-Improving Programme in Hypertensive Patients. <i>Pharmacoeconomics</i> , 2007, 25, 239-251.	3.3	27
85	The Dutch experience of open access echocardiography. <i>Netherlands Heart Journal</i> , 2007, 15, 342-347.	0.8	8
86	Cardiovascular outcome stratification using the ankle-brachial pressure index. <i>European Journal of General Practice</i> , 2005, 11, 107-112.	2.0	6
87	Walking exercise in patients with intermittent claudication not well implemented in Dutch primary care. <i>European Journal of General Practice</i> , 2005, 11, 27-28.	2.0	2
88	Genetic Risk of Atherosclerotic Renal Artery Disease. <i>Hypertension</i> , 2004, 44, 448-453.	2.7	10
89	Patients'™ ideas, fears and expectations of their coronary risk: barriers for primary prevention. <i>Patient Education and Counseling</i> , 2004, 55, 301-307.	2.2	91
90	Barriers to implementing cardiovascular risk tables in routine general practice. <i>Scandinavian Journal of Primary Health Care</i> , 2004, 22, 32-37.	1.5	74

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91	Asymptomatic peripheral arterial occlusive disease predicted cardiovascular morbidity and mortality in a 7-year follow-up study. <i>Journal of Clinical Epidemiology</i> , 2004, 57, 294-300.	5.0	187
92	Effects of ACE I/D and AT1R-A1166C polymorphisms on blood pressure in a healthy normotensive primary care population. <i>Journal of Hypertension</i> , 2003, 21, 81-86.	0.5	46
93	Peripheral Arterial Occlusive Disease: Prognostic Value of Signs, Symptoms, and the Ankle-Brachial Pressure Index. <i>Medical Decision Making</i> , 2002, 22, 99-107.	2.4	53
94	Peripheral Arterial Occlusive Disease: Prognostic Value of Signs, Symptoms, and the Ankle-Brachial Pressure Index. <i>Medical Decision Making</i> , 2002, 22, 99-107.	2.4	3
95	A primary care walking exercise program for patients with intermittent claudication. <i>Medicine and Science in Sports and Exercise</i> , 2001, 33, 1629-1634.	0.4	22
96	Incidence of and Risk Factors for Asymptomatic Peripheral Arterial Occlusive Disease: A Longitudinal Study. <i>American Journal of Epidemiology</i> , 2001, 153, 666-672.	3.4	185
97	The Influence of Experience on the Reproducibility of the Ankle-Brachial Systolic Pressure Ratio in Peripheral Arterial Occlusive Disease. <i>European Journal of Vascular and Endovascular Surgery</i> , 1999, 18, 25-29.	1.5	68
98	How to write short cases for assessing problem-solving skills. <i>Medical Teacher</i> , 1999, 21, 144-150.	1.8	30
99	Risk factors and cardiovascular diseases associated with asymptomatic peripheral arterial occlusive disease: The Limburg PAOD Study. <i>Scandinavian Journal of Primary Health Care</i> , 1998, 16, 177-182.	1.5	107
100	Economic evaluation of cholesterol-related interventions in general practice. An appraisal of the evidence. <i>Journal of Epidemiology and Community Health</i> , 1998, 52, 586-594.	3.7	16
101	Diagnostic Value of Signs and Symptoms Associated with Peripheral Arterial Occlusive Disease Seen in General Practice. <i>Medical Decision Making</i> , 1997, 17, 61-70.	2.4	71
102	The diagnostic value of the measurement of the ankle-brachial systolic pressure index in primary health care. <i>Journal of Clinical Epidemiology</i> , 1996, 49, 1401-1405.	5.0	115
103	Computerized long-menu questions as an alternative to open-ended questions in computerized assessment. <i>Medical Education</i> , 1996, 30, 50-55.	2.1	31
104	The Prevalence of Asymptomatic and Unrecognized Peripheral Arterial Occlusive Disease. <i>International Journal of Epidemiology</i> , 1996, 25, 282-290.	1.9	246
105	Peripheral Arterial Occlusive Disease in General Practice: The Reproducibility of the Ankle-Arm Systolic Pressure Ratio. <i>Scandinavian Journal of Primary Health Care</i> , 1991, 9, 109-114.	1.5	44