Michael E Pichichero

List of Publications by Year
in descending order

Source: https://exaly.com/author-pdf/6355981/publications.pdf

Version: 2024-02-01

228	8,835	44444	62345
papers	citations	50 h-index	84 g-index

234	234	234	6777
all docs	docs citations	times ranked	citing authors

#	Article	IF	Citations
1	Dynamic changes in otopathogens colonizing the nasopharynx and causing acute otitis media in children after 13-valent (PCV13) pneumococcal conjugate vaccination during 2015â€“2019. European Journal of Clinical Microbiology and Infectious Diseases, 2022, 41, 37-44.	1.3	23
2	Interferon-Î³ promotes monocyte-mediated lung injury during influenza infection. Cell Reports, 2022, 38, 110456.	2.9	29
3	Lipidation of Haemophilus influenzae Antigens P6 and OMP26 Improves Immunogenicity and Protection against Nasopharyngeal Colonization and Ear Infection. Infection and Immunity, 2022, 90, e0067821.	1.0	6
4	Antibiotic Use and Vaccine Antibody Levels. Pediatrics, 2022, 149, .	1.0	12
5	Rising Pneumococcal Antibiotic Resistance in the Postâ€“13-Valent Pneumococcal Conjugate Vaccine Era in Pediatric Isolates From a Primary Care Setting. Clinical Infectious Diseases, 2021, 72, 797-805.	2.9	48
6	Comparison of specific in-vitro virulence gene expression and innate host response in locally invasive vs colonizer strains of Streptococcus pneumoniae. Medical Microbiology and Immunology, 2021, 210, 111-120.	2.6	1
7	Can Machine Learning and AI Replace Otoscopy for Diagnosis of Otitis Media?. Pediatrics, 2021, 147, .	1.0	8
8	Nasopharyngeal microbiome analyses in otitis-prone and otitis-free children. International Journal of Pediatric Otorhinolaryngology, 2021, 143, 110629.	0.4	9
9	Optimizing Production and Purification of Bacterial Outer Membrane Vesicles. FASEB Journal, 2021, 35, .	0.2	0
10	Serum antibody levels to pneumococcal polysaccharides 22F, 33F, 19A and 6A that correlate with protection from colonization and acute otitis media in children. Vaccine, 2021, 39, 3900-3906.	1.7	10
11	Haemophilus influenzae Prevalence, Proportion of Capsulated Strains and Antibiotic Susceptibility During Colonization and Acute Otitis Media in Children, 2019â€“2020. Pediatric Infectious Disease Journal, 2021, 40, 792-796.	1.1	11
12	Pneumonia, Sinusitis, Influenza and Other Respiratory Illnesses in Acute Otitis Mediaâ€“Prone Children. Pediatric Infectious Disease Journal, 2021, 40, 975-980.	1.1	8
13	Nasopharyngeal microbiome composition associated with Streptococcus pneumoniae colonization suggests a protective role of Corynebacterium in young children. PLoS ONE, 2021, 16, e0257207.	1.1	9
14	COVID-19 Pandemic Impact on Respiratory Infectious Diseases in Primary Care Practice in Children. Frontiers in Pediatrics, 2021, 9, 722483.	0.9	38
15	Transition of Serotype 35B Pneumococci From Commensal to Prevalent Virulent Strain in Children. Frontiers in Cellular and Infection Microbiology, 2021, 11, 744742.	1.8	3
16	Panel 3: Genomics, precision medicine and targeted therapies. International Journal of Pediatric Otorhinolaryngology, 2020, 130, 109835.	0.4	5
17	Ampicillin triggers the release of Pal in toxic vesicles from Escherichia coli. International Journal of Antimicrobial Agents, 2020, 56, 106163.	1.1	12
18	Comparison of anti-capsular antibody quantity and functionality in children after different primary dose and booster schedules of 13 valent-pneumococcal conjugate vaccine. Vaccine, 2020, 38, 4423-4431.	1.7	6

#	Article	IF	Citations
19	Comparison of pneumococcal conjugate vaccine (PCV-13) cellular immune responses after primary and booster doses of vaccine. Human Vaccines and Immunotherapeutics, 2020, 16, 3201-3207.	1.4	4
20	Synchrony in serum antibody response to conserved proteins of Moraxella catarrhalis in young children. Human Vaccines and Immunotherapeutics, 2020, 16, 3194-3200.	1.4	0
21	Immune Network Modeling Predicts Specific Nasopharyngeal and Peripheral Immune Dysregulation in Otitis-Prone Children. Frontiers in Immunology, 2020, 11, 1168.	2.2	2
22	Immunologic dysfunction contributes to the otitis prone condition. Journal of Infection, 2020, 80, 614-622.	1.7	24
23	Nasopharyngeal colonization with pathobionts is associated with susceptibility to respiratory illnesses in young children. PLoS ONE, 2020, 15, e0243942.	1.1	13
24	Computation of Robust Minimal Intervention Sets in Multi-Valued Biological Regulatory Networks. Frontiers in Physiology, 2019, 10, 241.	1.3	8
25	Statistical projection of post-vaccination antibody kinetics between dosing schedules. Vaccine, 2019, 37, 4561-4567.	1.7	0
26	Genetically detoxified pertussis toxin induces superior antigen specific CD4 T cell responses compared to chemically detoxified pertussis toxin. Human Vaccines and Immunotherapeutics, 2019, 15, 1167-1170.	1.4	5
27	Comparative Analysis of Microbiome in Nasopharynx and Middle Ear in Young Children With Acute Otitis Media. Frontiers in Genetics, 2019, 10, 1176.	1.1	16
28	Impaired Proinflammatory Response in Stringently Defined Otitis-prone Children During Viral Upper Respiratory Infections. Clinical Infectious Diseases, 2019, 68, 1566-1574.	2.9	12
29	Serum antibody response to Moraxella catarrhalis proteins in stringently defined otitis prone children. Vaccine, 2019, 37, 4637-4645.	1.7	11
30	TLR agonist combinations that stimulate Th type I polarizing responses from human neonates. Innate Immunity, 2018, 24, 240-251.	1.1	33
31	Haemophilus influenzae-protein D specific antibody correlate with protection against acute otitis media in young children. Vaccine, 2018, 36, 1133-1135.	1.7	3
32	Cross-reactivity in Î²-Lactam Allergy. Journal of Allergy and Clinical Immunology: in Practice, 2018, 6, 72-81.e1.	2.0	139
33	Effectiveness of 13-valent pneumococcal conjugate vaccination for protection against acute otitis media caused by Streptococcus pneumoniae in healthy young children: a prospective observational study. The Lancet Child and Adolescent Health, 2018, 2, 561-568.	2.7	59
34	Immunogenicity and protective efficacy of monovalent PCVs containing 22F and 33F polysaccharides in mouse models of colonization and co-infection. Vaccine, 2018, 36, 5701-5708.	1.7	2
35	Helping children with hearing loss from otitis media with effusion. Lancet, The, 2018, 392, 533-534.	6.3	14
36	Intranasal coinfection model allows for assessment of protein vaccines against nontypeable Haemophilus influenzae in mice. Journal of Medical Microbiology, 2018, 67, 1527-1532.	0.7	12

#	Article	IF	Citations
37	Three Innate Cytokine Biomarkers Predict Presence of Acute Otitis Media and Relevant Otopathogens. Biomarkers and Applications, 2018, 2, .	0.0	1
38	Developing an Intranasal Colonization Model for NTHi in Mice. FASEB Journal, 2018, 32, 806.1.	0.2	0
39	Detecting Released Peptidoglycan Associated Lipoprotein (Pal) from Escherichia coli. FASEB Journal, 2018, 32, 526.4.	0.2	0
40	Nasopharyngeal polymicrobial colonization during health, viral upper respiratory infection and upper respiratory bacterial infection. Journal of Infection, 2017, 75, 26-34.	1.7	33
41	A PCR-based method for quantifying neutrophils in human nasal secretions. Journal of Immunological Methods, 2017, 447, 65-70.	0.6	7
42	Protection against Streptococcus pneumoniae Invasive Pathogenesis by a Protein-Based Vaccine Is Achieved by Suppression of Nasopharyngeal Bacterial Density during Influenza A Virus Coinfection. Infection and Immunity, 2017, 85, .	1.0	20
43	Panel 5: Immunology. Otolaryngology - Head and Neck Surgery, 2017, 156, S63-S75.	1.1	5
44	Reduced T-Helper 17 Responses to Streptococcus pneumoniae in Infection-Prone Children Can Be Rescued by Addition of Innate Cytokines. Journal of Infectious Diseases, 2017, 215, 1321-1330.	1.9	20
45	Trivalent pneumococcal protein vaccine protects against experimental acute otitis media caused by Streptococcus pneumoniae in an infant murine model. Vaccine, 2017, 35, 337-344.	1.7	13
46	Modeling specific antibody responses to natural immunization to predict a correlate of protection against infection before commencing a clinical vaccine trial. Human Vaccines and Immunotherapeutics, 2017, 13, 2316-2321.	1.4	6
47	Decreased TNF family receptor expression on B-cells is associated with reduced humoral responses to Streptococcus pneumoniae infections in young children. Cellular Immunology, 2017, 320, 11-19.	1.4	7
48	Epidemiology of Acute Otitis Media in the Postpneumococcal Conjugate Vaccine Era. Pediatrics, 2017, 140, .	1.0	197
49	Streptococcus pneumoniaeburden and nasopharyngeal inflammation during acute otitis media. Innate Immunity, 2017, 23, 667-677.	1.1	18
50	Pneumococcal whole-cell and protein-based vaccines: changing the paradigm. Expert Review of Vaccines, 2017, 16, 1181-1190.	2.0	60
51	Prospective study of the innate cellular immune response in low vaccine responder children. Innate Immunity, 2017, 23, 89-96.	1.1	10
52	Stringently Defined Otitis Prone Children Demonstrate Deficient Naturally Induced Mucosal Antibody Response to Moraxella catarrhalis Proteins. Frontiers in Immunology, 2017, 8, 953.	2.2	10
53	Comparison of direct-plating and broth-enrichment culture methods for detection of potential bacterial pathogens in respiratory secretions. Journal of Medical Microbiology, 2017, 66, 1539-1544.	0.7	3
54	Correlation of Antibody Levels to Pneumococcal Proteins with Protection from Acute Otitis Media but not Nasopharyngeal Colonization in Young Children. Open Forum Infectious Diseases, 2016, 3, .	0.4	1

#	Article	IF	Citations
55	Modeling Specific Antibody Responses to Natural Immunization to Predict a Correlate of Protection Against Infection Before Commencing a Clinical Vaccine Trial. Open Forum Infectious Diseases, 2016, 3, .	0.4	1
56	Emerging Streptococcus pneumoniae Strains Colonizing the Nasopharynx in Children After 13-valent Pneumococcal Conjugate Vaccination in Comparison to the 7-valent Era, 2006â€“2015. Pediatric Infectious Disease Journal, 2016, 35, 901-906.	1.1	106
57	Differences in Innate Immune Response Gene Regulation in the Middle Ear of Children who are Otitis Prone and in those not Otitis Prone. American Journal of Rhinology and Allergy, 2016, 30, e218-e223.	1.0	19
58	Three Serum Cytokine Biomarkers Predict Presence of Acute Otitis Media Infection and Recovery From Relevant Otopathogens. Open Forum Infectious Diseases, 2016, 3, .	0.4	1
59	Safety and immunogenicity of a booster dose of meningococcal (groups A, C, W, and Y) polysaccharide diphtheria toxoid conjugate vaccine. Vaccine, 2016, 34, 5273-5278.	1.7	16
60	Inflammation-associated cytokine analysis identifies presence of respiratory bacterial pathogens in the nasopharynx. Pathogens and Disease, 2016, 74, ftw064.	0.8	4
61	Ten-Year Study of the Stringently Defined Otitis-prone Child in Rochester, NY. Pediatric Infectious Disease Journal, 2016, 35, 1033-1039.	1.1	33
62	Ten-Year Study of Acute Otitis Media in Rochester, NY. Pediatric Infectious Disease Journal, 2016, 35, 1027-1032.	1.1	43
63	Adenoidal follicular <scp>T</scp> helper cells provide stronger <scp>B</scp>â€cell help than those from tonsils. Laryngoscope, 2016, 126, E80-5.	1.1	8
64	Next generation protein basedStreptococcus pneumoniaevaccines. Human Vaccines and Immunotherapeutics, 2016, 12, 194-205.	1.4	57
65	Peripheral blood antigen presenting cell responses in otitis-prone and non-otitis-prone infants. Innate Immunity, 2016, 22, 63-71.	1.1	9
66	Serum cytokine biomarkers accurately predict presence of acute otitis media infection and recovery caused by Haemophilus influenzae. International Journal of Pediatric Otorhinolaryngology, 2016, 83, 200-204.	0.4	4
67	Developing a vaccine to prevent otitis media caused by nontypeable Haemophilus influenzae. Expert Review of Vaccines, 2016, 15, 863-878.	2.0	19
68	Functional Immune Cell Differences Associated With Low Vaccine Responses in Infants. Journal of Infectious Diseases, 2016, 213, 2014-2019.	1.9	22
69	Vaccine targets againstMoraxella catarrhalis. Expert Opinion on Therapeutic Targets, 2016, 20, 19-33.	1.5	29
70	Infants with low vaccine antibody responses have altered innate cytokine response. Vaccine, 2016, 34, 5700-5703.	1.7	8
71	Otitis-prone Children Have Immunologic Deficiencies in Naturally Acquired Nasopharyngeal Mucosal Antibody Response after Streptococcus pneumoniae Colonization. Pediatric Infectious Disease Journal, 2016, 35, 54-60.	1.1	25
72	Effect of p<scp>H</scp> and oxygen on biofilm formation in acute otitis media associated <scp>NTH</scp>i clinical isolates. Laryngoscope, 2015, 125, 2204-2208.	1.1	15

#	Article	IF	Citations
73	Antibiotics for Children With Acute Otitis Mediaâ€"Reply. JAMA - Journal of the American Medical Association, 2015, 313, 1575.	3.8	0
74	Cytokine, chemokine, and tollâ€like receptor expression in middle ear fluids of children with acute otitis media. Laryngoscope, 2015, 125, E39-44.	1.1	30
75	Trivalent pneumococcal protein recombinant vaccine protects against lethal Streptococcus pneumoniae pneumonia and correlates with phagocytosis by neutrophils during early pathogenesis. Vaccine, 2015, 33, 993-1000.	1.7	17
76	Antibiotics for Acute Otitis Media. JAMA - Journal of the American Medical Association, 2015, 313, 294.	3.8	3
77	Dual orientation of the outer membrane lipoprotein Pal in Escherichia coli. Microbiology (United) Tj ETQq1 1 0.784314 rgBT /Overlock 1	0.7	20
78	Synchrony in serum antibody response to conserved proteins ofStreptococcus pneumoniaein young children. Human Vaccines and Immunotherapeutics, 2015, 11, 489-497.	1.4	14
79	Familial and microbiological contribution to the otitisâ€"prone condition. International Journal of Pediatric Otorhinolaryngology, 2015, 79, 2174-2177.	0.4	8
80	Serum antibody response to Moraxella catarrhalis proteins OMP CD, OppA, Msp22, Hag, and PilA2 after nasopharyngeal colonization and acute otitis media in children. Vaccine, 2015, 33, 5809-5814.	1.7	18
81	The Effect of P6 Dual Orientation on Antiâ€P6 Bactericidal Activity in Nontypable Haemophilus influenzae. FASEB Journal, 2015, 29, 571.12.	0.2	0
82	The Two Faces of Pal: Elucidating the Two Orientations of Pal Protein in Escherichia coli. FASEB Journal, 2015, 29, 886.12.	0.2	0
83	Biological Significance of Dual Oriented Nontypeable Haemophilus influenzae Vaccine Candidate P6. FASEB Journal, 2015, 29, 571.10.	0.2	0
84	Quantifying the Two P6 Populations in Various Strains of Nontypable Haemophilus influenzae. FASEB Journal, 2015, 29, 571.11.	0.2	0
85	Payment Analysis of Two Diagnosis and Management Approaches of Acute Otitis Media. Clinical Pediatrics, 2014, 53, 865-873.	0.4	15
86	Immune responses in neonates. Expert Review of Clinical Immunology, 2014, 10, 1171-1184.	1.3	378
87	Correlation of nasopharyngeal cultures prior to and at onset of acute otitis media with middle ear fluid cultures. BMC Infectious Diseases, 2014, 14, 640.	1.3	47
88	The host immune dynamics of pneumococcal colonization: Implications for novel vaccine development. Human Vaccines and Immunotherapeutics, 2014, 10, 3688-3699.	1.4	35
89	Nasopharyngeal Wash Versus Swab Specimens for Culture of NontypeableHaemophilus influenzaeand Other Respiratory Bacterial Pathogens. Journal of Infectious Diseases, 2014, 210, 1684-1685.	1.9	1
90	Challenges in vaccination of neonates, infants and young children. Vaccine, 2014, 32, 3886-3894.	1.7	39

#	Article	IF	Citations
91	Ultrasound Imaging and Characterization of Biofilms Based onÂWavelet De-noised Radiofrequency Data. Ultrasound in Medicine and Biology, 2014, 40, 583-595.	0.7	7
92	Differential Impact of Respiratory Syncytial Virus and Parainfluenza Virus on the Frequency of Acute Otitis Media Is Explained by Lower Adaptive and Innate Immune Responses in Otitis-Prone Children. Clinical Infectious Diseases, 2014, 59, 376-383.	2.9	28
93	Co-colonization by Haemophilus influenzae with Streptococcus pneumoniae enhances pneumococcal-specific antibody response in young children. Vaccine, 2014, 32, 706-711.	1.7	14
94	Human Antibodies to PhtD, PcpA, and Ply Reduce Adherence to Human Lung Epithelial Cells and Murine Nasopharyngeal Colonization by Streptococcus pneumoniae. Infection and Immunity, 2014, 82, 5069-5075.	1.0	44
95	Contributions to Protection from Streptococcus pneumoniae Infection Using the Monovalent Recombinant Protein Vaccine Candidates PcpA, PhtD, and PlyD1 in an Infant Murine Model during Challenge. Vaccine Journal, 2014, 21, 1037-1045.	3.2	14
96	Penicillin and Cephalosporin allergy. Annals of Allergy, Asthma and Immunology, 2014, 112, 404-412.	0.5	100
97	Vaccination with a Streptococcus pneumoniae trivalent recombinant PcpA, PhtD and PlyD1 protein vaccine candidate protects against lethal pneumonia in an infant murine model. Vaccine, 2014, 32, 3205-3210.	1.7	32
98	Identification of the most immunogenic regions in vaccine candidate P6 (948.7). FASEB Journal, 2014, 28, .	0.2	0
99	Quantifying the two populations of dual oriented P6 in nontypable Haemophilus influenzae and Pal in Escherichia coli (948.6). FASEB Journal, 2014, 28, 948.6.	0.2	0
100	Assessing the dual orientations of vaccine candidate P6 in nontypable Haemophilus influenzae (948.5). FASEB Journal, 2014, 28, .	0.2	0
101	Assessing the orientations of lipoprotein Pal in the outer membrane of Escherichia coli (948.4). FASEB Journal, 2014, 28, 948.4.	0.2	0
102	Lower nasopharyngeal epithelial cell repair and diminished innate inflammation responses contribute to the onset of acute otitis media in otitis-prone children. Medical Microbiology and Immunology, 2013, 202, 295-302.	2.6	21
103	Deficiencies in the CD4+T-Helper Cell Arm of the Immune System of Neonates and Young Children. Pediatric, Allergy, Immunology, and Pulmonology, 2013, 26, 4-10.	0.3	2
104	CD4+ T-cell responses among adults and young children in response to Streptococcus pneumoniae and Haemophilus influenzae vaccine candidate protein antigens. Vaccine, 2013, 31, 3090-3097.	1.7	22
105	Otitis Media. Pediatric Clinics of North America, 2013, 60, 391-407.	0.9	75
106	Cellular Immune Response in Young Children Accounts for Recurrent Acute Otitis Media. Current Allergy and Asthma Reports, 2013, 13, 495-500.	2.4	32
107	Transcriptome signature in young children with acute otitis media due to non-typeable Haemophilus influenzae. International Immunology, 2013, 25, 353-361.	1.8	21
108	Relationship With Original Pathogen in Recurrence of Acute Otitis Media After Completion of Amoxicillin/Clavulanate. Pediatric Infectious Disease Journal, 2013, 32, 1159-1162.	1.1	23

#	Article	IF	Citations
109	Nonprotective Responses to Pediatric Vaccines Occur in Children Who Are Otitis Prone. Pediatric Infectious Disease Journal, 2013, 32, 1163-1168.	1.1	39
110	Dual Orientation of the Outer Membrane Lipoprotein P6 of Nontypeable Haemophilus influenzae. Journal of Bacteriology, 2013, 195, 3252-3259.	1.0	22
111	Higher Serum Levels of Interleukin 10 Occur at Onset of Acute Otitis Media Caused by Streptococcus Pneumoniae Compared to Haemophilus Influenzae and Moraxella Catarrhalis. Laryngoscope, 2013, 123, 1500-1505.	1.1	27
112	Protein carriers of conjugate vaccines: Characteristics, development and clinical trials. Human Vaccines and Immunotherapeutics, 2013, 9, 2505-2523.	1.4	185
113	Impact of Respiratory Viral Infections on Î±-Hemolytic Streptococci and Otopathogens in the Nasopharynx of Young Children. Pediatric Infectious Disease Journal, 2013, 32, 27-31.	1.1	17
114	Reducing the Frequency of Acute Otitis Media by Individualized Care. Pediatric Infectious Disease Journal, 2013, 32, 473-478.	1.1	39
115	Acute Otitis Media Otopathogens During 2008 to 2010 in Rochester, New York. Pediatric Infectious Disease Journal, 2013, 32, 805-809.	1.1	109
116	Quantifying the two populations of dual oriented P6 in nontypable Haemophilus influenzae. FASEB Journal, 2013, 27, 790.7.	0.2	0
117	Describing the dual orientation of vaccine candidate P6. FASEB Journal, 2013, 27, 790.3.	0.2	0
118	Using siteâ€directed mutagenesis to identify the most immunogenic regions of vaccine candidate P6. FASEB Journal, 2013, 27, 790.5.	0.2	0
119	Using biotinylation to determine the orientations of Pal in Escherichia coli. FASEB Journal, 2013, 27, .	0.2	0
120	Reduced Serum IgG Responses to Pneumococcal Antigens in Otitis-Prone Children May Be Due to Poor Memory B-Cell Generation. Journal of Infectious Diseases, 2012, 205, 1225-1229.	1.9	46
121	Antibody response toStreptococcus pneumoniaeproteins PhtD, LytB, PcpA, PhtE and Ply after nasopharyngeal colonization and acute otitis media in children. Human Vaccines and Immunotherapeutics, 2012, 8, 799-805.	1.4	50
122	Antibody in Middle Ear Fluid of Children Originates Predominantly from Sera and Nasopharyngeal Secretions. Vaccine Journal, 2012, 19, 1593-1596.	3.2	22
123	When Co-colonizing the Nasopharynx Haemophilus influenzae Predominates Over Streptococcus pneumoniae Except Serotype 19A Strains to Cause Acute Otitis Media. Pediatric Infectious Disease Journal, 2012, 31, 638-640.	1.1	27
124	Clinical Significance of Serum S100A12 in Acute Otitis Media in Young Children. Pediatric Infectious Disease Journal, 2012, 31, e56-e58.	1.1	19
125	Vaccine candidates PhtD and PhtE of Streptococcus pneumoniae are adhesins that elicit functional antibodies in humans. Vaccine, 2012, 30, 2900-2907.	1.7	76
126	Transcriptome signature in young children with acute otitis media due to Streptococcus pneumoniae. Microbes and Infection, 2012, 14, 600-609.	1.0	24

#	Article	IF	Citations
127	Comparison of Amoxicillin/Clavulanic Acid High Dose with Cefdinir in the Treatment of Acute Otitis Media. Drugs, 2012, 72, 1991-1997.	4.9	18
128	PcpA of Streptococcus pneumoniae mediates adherence to nasopharyngeal and lung epithelial cells and elicits functional antibodies in humans. Microbes and Infection, 2012, 14, 1102-1110.	1.0	47
129	Nasopharyngeal Bacterial Interactions in Children. Emerging Infectious Diseases, 2012, 18, 1738-1745.	2.0	67
130	Bactericidal antibody response against P6, protein D, and OMP26 of nontypeableHaemophilus influenzaeafter acute otitis media in otitis-prone children. FEMS Immunology and Medical Microbiology, 2012, 65, 439-447.	2.7	26
131	Protease digestion of P6: Demonstrating a novel dual orientation of P6 in Nontypable Haemophilus influenzae. FASEB Journal, 2012, 26, 581.3.	0.2	0
132	Using flow cytometry to identify the orientations of P6 protein in Nontypable Haemophilus influenzae and Escherichia coli. FASEB Journal, 2012, 26, 581.2.	0.2	0
133	Bacterial Conjunctivitis in Children: Antibacterial Treatment Options in an Era of Increasing Drug Resistance. Clinical Pediatrics, 2011, 50, 7-13.	0.4	18
134	Nontypeable Streptococcus pneumoniae as an otopathogen. Diagnostic Microbiology and Infectious Disease, 2011, 69, 200-204.	0.8	23
135	Identification of Streptococcus pneumoniae and Haemophilus influenzae in culture-negative middle ear fluids from children with acute otitis media by combination of multiplex PCR and multi-locus sequencing typing. International Journal of Pediatric Otorhinolaryngology, 2011, 75, 239-244.	0.4	33
136	Serum antibody response to three non-typeable Haemophilus influenzae outer membrane proteins during acute otitis media and nasopharyngeal colonization in otitis prone and non-otitis prone children. Vaccine, 2011, 29, 1023-1028.	1.7	60
137	Vaccine candidate P6 of nontypable Haemophilus influenzae is not a transmembrane protein based on protein structural analysis. Vaccine, 2011, 29, 1624-1627.	1.7	10
138	Response to Letter to the Editor: Detection of naturally occurring antibodies against Protein D of Haemophilus influenza by Mustafa Akkoyunlu. Vaccine, 2011, 29, 2835.	1.7	0
139	Serum Antibody Response to Five Streptococcus pneumoniae Proteins During Acute Otitis Media in Otitis-prone and Nonâ€“otitis-prone Children. Pediatric Infectious Disease Journal, 2011, 30, 645-650.	1.1	67
140	Reduced Memory CD4+ T-Cell Generation in the Circulation of Young Children May Contribute to the Otitis-Prone Condition. Journal of Infectious Diseases, 2011, 204, 645-653.	1.9	60
141	Haemophilus influenzaevaccine candidate outer membrane protein P6 is not conserved in all strains. Hum Vaccin, 2011, 7, 102-105.	2.4	28
142	High frequency ultrasound imaging and characterization of biofilms. , 2011, , .		1
143	Phylogenetic relatedness and diversity of non-typable Haemophilus influenzae in the nasopharynx and middle ear fluid of children with acute otitis media. Journal of Medical Microbiology, 2011, 60, 1841-1848.	0.7	34
144	A Simple Scoring System to Improve Clinical Assessment of Acute Otitis Media. Clinical Pediatrics, 2011, 50, 623-629.	0.4	14

#	Article	IF	Citations
145	Structural studies on P6 protein suggest it may not be a good vaccine candidate against Nontypable Haemophilus Influenzae. FASEB Journal, 2011, 25, 928.10.	0.2	0
146	Simultaneous Assay for Four Bacterial Species Including Alloiococcus otitidis Using Multiplex-PCR in Children With Culture Negative Acute Otitis Media. Pediatric Infectious Disease Journal, 2010, 29, 741-745.	1.1	65
147	Serum Intercellular Adhesion Molecule 1 Variations in Young Children with Acute Otitis Media. Vaccine Journal, 2010, 17, 1909-1916.	3.2	14
148	Haemophilus influenzae Outer Membrane Protein P6 Molecular Characterization May Not Differentiate All Strains of H. Influenzae from H. haemolyticus. Journal of Clinical Microbiology, 2010, 48, 3756-3757.	1.8	13
149	Antibody response to Haemophilus influenzae outer membrane protein D, P6, and OMP26 after nasopharyngeal colonization and acute otitis media in children. Vaccine, 2010, 28, 7184-7192.	1.7	53
150	Efficacy and Safety of Besifloxacin Ophthalmic Suspension 0.6% in Children and Adolescents with Bacterial Conjunctivitis. Paediatric Drugs, 2010, 12, 105-112.	1.3	22
151	New Patterns in the Otopathogens Causing Acute Otitis Media Six to Eight Years After Introduction of Pneumococcal Conjugate Vaccine. Pediatric Infectious Disease Journal, 2010, 29, 304-309.	1.1	305
152	Breast-Feeding Is Associated With a Reduced Frequency of Acute Otitis Media and High Serum Antibody Levels Against NTHi and Outer Membrane Protein Vaccine Antigen Candidate P6. Pediatric Research, 2009, 66, 565-570.	1.1	65
153	Booster Vaccinations: Can Immunologic Memory Outpace Disease Pathogenesis?. Pediatrics, 2009, 124, 1633-1641.	1.0	94
154	Widening Differences in Acute Otitis Media Study Populations. Clinical Infectious Diseases, 2009, 49, 1648-1649.	2.9	5
155	Mercury Levels in Premature and Low Birth Weight Newborn Infants after Receipt of Thimerosal-Containing Vaccines. Journal of Pediatrics, 2009, 155, 495-499.e2.	0.9	38
156	Variations in Amoxicillin Pharmacokinetic/Pharmacodynamic Parameters May Explain Treatment Failures in Acute Otitis Media. Paediatric Drugs, 2009, 11, 243-249.	1.3	30
157	The PANDAS Syndrome. Advances in Experimental Medicine and Biology, 2009, 634, 205-216.	0.8	11
158	Comparison of study designs for acute otitis media trials. International Journal of Pediatric Otorhinolaryngology, 2008, 72, 737-750.	0.4	16
159	Probability of Achieving Requisite Pharmacodynamic Exposure for Oral Î²-Lactam Regimens against Haemophilus influenzae in Children. Paediatric Drugs, 2008, 10, 391-397.	1.3	13
160	Pathogens Causing Recurrent and Difficult-to-Treat Acute Otitis Media, 2003-2006. Clinical Pediatrics, 2008, 47, 901-906.	0.4	78
161	Improving vaccine delivery using novel adjuvant systems. Hum Vaccin, 2008, 4, 262-270.	2.4	55
162	Mercury Levels in Newborns and Infants After Receipt of Thimerosal-Containing Vaccines. Pediatrics, 2008, 121, e208-e214.	1.0	94

#	Article	IF	Citations
163	Mercury Levels in Newborns and Infants After Receipt of Thimerosal-Containing Vaccines: In Reply. Pediatrics, 2008, 122, 902-903.	1.0	0
164	Cephalosporin use in treatment of patients with penicillin allergies. Journal of the American Pharmacists Association: JAPhA, 2008, 48, 530-540.	0.7	92
165	Diagnostic Inaccuracy and Subject Exclusions Render Placebo and Observational Studies of Acute Otitis Media Inconclusive. Pediatric Infectious Disease Journal, 2008, 27, 958-962.	1.1	27
166	Emergence of a Multiresistant Serotype 19A Pneumococcal Strain Not Included in the 7-Valent Conjugate Vaccine as an Otopathogen in Children. JAMA - Journal of the American Medical Association, 2007, 298, 1772.	3.8	321
167	Evolving Microbiology and Molecular Epidemiology of Acute Otitis Media in the Pneumococcal Conjugate Vaccine Era. Pediatric Infectious Disease Journal, 2007, 26, S12-S16.	1.1	52
168	Systematic review of factors contributing to penicillin treatment failure inStreptococcus pyogenespharyngitis. Otolaryngology - Head and Neck Surgery, 2007, 137, 851-857.	1.1	72
169	Safe use of selected cephalosporins in penicillin-allergic patients: A meta-analysis. Otolaryngology - Head and Neck Surgery, 2007, 136, 340-347.	1.1	149
170	Use of selected cephalosporins in penicillin-allergic patients: a paradigm shift. Diagnostic Microbiology and Infectious Disease, 2007, 57, S13-S18.	0.8	108
171	Immunogenicity and Safety of a Combination Diphtheria, Tetanus Toxoid, Acellular Pertussis, Hepatitis B, and Inactivated Poliovirus Vaccine Coadministered with a 7-Valent Pneumococcal Conjugate Vaccine and a Haemophilus Influenzae Type b Conjugate Vaccine. Journal of Pediatrics, 2007, 151, 43-49.e2.	0.9	40
172	Who should get the HPV vaccine?. Journal of Family Practice, 2007, 56, 197-202.	0.2	3
173	Rotavirus Vaccine (RotaTeq??). Paediatric Drugs, 2006, 8, 203-204.	1.3	1
174	The new meningococcal conjugate vaccine. Postgraduate Medicine, 2006, 119, 47-64.	0.9	4
175	A Multicenter, Open Label, Double Tympanocentesis Study of High Dose Cefdinir in Children With Acute Otitis Media at High Risk of Persistent or Recurrent Infection. Pediatric Infectious Disease Journal, 2006, 25, 211-218.	1.1	43
176	An Open-Label, Double Tympanocentesis Study of Levofloxacin Therapy in Children With, or at High Risk for, Recurrent or Persistent Acute Otitis Media. Pediatric Infectious Disease Journal, 2006, 25, 1102-1109.	1.1	37
177	The use of tympanocentesis in the diagnosis and management of acute otitis media. Current Infectious Disease Reports, 2006, 8, 189-195.	1.3	16
178	Acellular Pertussis Vaccine Booster Combined With Diphtheria and Tetanus Toxoids for Adolescents. Pediatrics, 2006, 117, 1084-1093.	1.0	305
179	Prevention of Cervical Cancer Through Vaccination of Adolescents. Clinical Pediatrics, 2006, 45, 393-398.	0.4	2
180	Acellular Pertussis Vaccine Boosters Combined With Diphtheria and Tetanus Toxoid Boosters for Adolescents: Safety and Immunogenicity Assessment When Preceded by Different 5-Dose DTaP/DTwP Schedules. Clinical Pediatrics, 2006, 45, 613-620.	0.4	18

#	Article	IF	Citations
181	Pathogen Shifts and Changing Cure Rates for Otitis Media and Tonsillopharyngitis. Clinical Pediatrics, 2006, 45, 493-502.	0.4	26
182	An adolescent and adult formulation combined tetanus, diphtheria and five-component pertussis vaccine. Expert Review of Vaccines, 2006, 5, 175-187.	2.0	11
183	Cephalosporins can be prescribed safely for penicillin-allergic patients. Journal of Family Practice, 2006, 55, 106-12.	0.2	45
184	Rethinking the total cost of care in AOM and ABS: The impact of improved diagnostic accuracy and antibiotic treatment where high efficacy and adherence are achievable. American Journal of Managed Care, 2006, 12, S283-91.	0.8	0
185	A review of recommended antibiotic therapies with impact on outcomes in acute otitis media and acute bacterial sinusitis. American Journal of Managed Care, 2006, 12, S292-302.	0.8	6
186	Preferred Antibiotics for Treatment of Acute Otitis Media: Comparison of Practicing Pediatricians, General Practitioners, and Otolaryngologists. Clinical Pediatrics, 2005, 44, 575-578.	0.4	5
187	Comparative Trial of the Safety and Immunogenicity of Quadrivalent (A, C, Y, W-135) Meningococcal Polysaccharide-Diphtheria Conjugate Vaccine Versus Quadrivalent Polysaccharide Vaccine in Two- to Ten-Year-Old Children. Pediatric Infectious Disease Journal, 2005, 24, 57-62.	1.1	117
188	Safety and Efficacy of Gatifloxacin Therapy for Children with Recurrent Acute Otitis Media (AOM) and/or AOM Treatment Failure. Clinical Infectious Diseases, 2005, 41, 470-478.	2.9	70
189	A Review of Evidence Supporting the American Academy of Pediatrics Recommendation for Prescribing Cephalosporin Antibiotics for Penicillin-Allergic Patients. Pediatrics, 2005, 115, 1048-1057.	1.0	203
190	Evidence Supporting the Use of Cephalosporin Antibiotics in Penicillin-Allergic Patients. Pediatric Asthma, Allergy and Immunology, 2005, 18, 230-246.	0.2	3
191	Combined Tetanus, Diphtheria, and 5-Component Pertussis Vaccine for Use in Adolescents and Adults. JAMA - Journal of the American Medical Association, 2005, 293, 3003.	3.8	120
192	Meningococcal Conjugate Vaccine in Adolescents and Children. Clinical Pediatrics, 2005, 44, 479-489.	0.4	12
193	Meningococcal conjugate vaccines. Expert Opinion on Biological Therapy, 2005, 5, 1475-1489.	1.4	19
194	Comparison of performance by otolaryngologists, pediatricians, and general practioners on an otoendoscopic diagnostic video examination. International Journal of Pediatric Otorhinolaryngology, 2005, 69, 361-366.	0.4	83
195	Acellular Pertussis Vaccine Safety and Efficacy in Children, Adolescents and Adults. Drugs, 2005, 65, 1367-1389.	4.9	39
196	Acute otitis media: making sense of recent guidelines on antimicrobial treatment. Journal of Family Practice, 2005, 54, 313-22.	0.2	8
197	Evolving shifts in otitis media pathogens: relevance to a managed care organization. American Journal of Managed Care, 2005, 11, S192-201.	0.8	15
198	Changes in Frequency and Pathogens Causing Acute Otitis Media in 1995â€“2003. Pediatric Infectious Disease Journal, 2004, 23, 824-828.	1.1	377

#	Article	IF	Citations
199	Clinical Evaluation of Pediarix: A New Pediatric Combination Vaccine. Clinical Pediatrics, 2003, 42, 393-400.	0.4	4
200	Azithromycin for the treatment of pertussis. Pediatric Infectious Disease Journal, 2003, 22, 847-849.	1.1	51
201	Impact of a birth dose of hepatitis B vaccine on the reactogenicity and immunogenicity of diphtheria-tetanus-acellular pertussis-hepatitis B-inactivated poliovirus-Haemophilus influenzae type b combination vaccination. Pediatric Infectious Disease Journal, 2002, 21, 854-859.	1.1	51
202	Otitis media. Expert Opinion on Pharmacotherapy, 2002, 3, 1073-1090.	0.9	17
203	Mercury concentrations and metabolism in infants receiving vaccines containing thiomersal: a descriptive study. Lancet, The, 2002, 360, 1737-1741.	6.3	216
204	Detection and characterization of pediatric serum antibody to the OMP P5-homologous adhesin of nontypeable Haemophilus influenzae during acute otitis media. Vaccine, 2002, 20, 3590-3597.	1.7	19
205	Diagnostic Accuracy, Tympanocentesis Training Performance, and Antibiotic Selection by Pediatric Residents in Management of Otitis Media. Pediatrics, 2002, 110, 1064-1070.	1.0	53
206	A Prospective Observational Study of 5-, 7-, and 10-day Antibiotic Treatment for Acute Otitis Media. Otolaryngology - Head and Neck Surgery, 2001, 124, 381-387.	1.1	45
207	Assessing Diagnostic Accuracy and Tympanocentesis Skills in the Management of Otitis Media. JAMA Pediatrics, 2001, 155, 1137.	3.6	154
208	Safety and Immunogenicity of Six Acellular Pertussis Vaccines and One Whole-Cell Pertussis Vaccine Given as a Fifth Dose in Four- to Six-Year-Old Children. Pediatrics, 2000, 105, e11-e11.	1.0	91
209	Recurrent and persistent otitis media. Pediatric Infectious Disease Journal, 2000, 19, 911-916.	1.1	106
210	Short course antibiotic therapy for respiratory infections: a review of the evidence. Pediatric Infectious Disease Journal, 2000, 19, 929-937.	1.1	55
211	Diminution of the anti-polyribosylribitol phosphate response to a combined diphtheria-tetanus-acellular pertussis/Haemophilus influenzae type b vaccine by concurrent inactivated poliovirus vaccination. Pediatric Infectious Disease Journal, 2000, 19, 417-423.	1.1	43
212	Outcomes After Judicious Antibiotic Use for Respiratory Tract Infections Seen in a Private Pediatric Practice. Pediatrics, 2000, 105, 753-759.	1.0	42
213	Epitope Mapping of the Outer Membrane Protein P5-Homologous Fimbrin Adhesin of Nontypeable Haemophilus influenzae. Infection and Immunity, 2000, 68, 2119-2128.	1.0	48
214	NEW COMBINATION VACCINES. Pediatric Clinics of North America, 2000, 47, 407-426.	0.9	22
215	KINETICS OF BOOSTER RESPONSES TO HAEMOPHILUS INFLUENZAE TYPE B CONJUGATE AFTER COMBINED DIPHTHERIA-TETANUS-ACELLULAR PERTUSSIS-HAEMOPHILUS INFLUENZAE TYPE b VACCINATION IN INFANTS. Pediatric Infectious Disease Journal, 1999, 18, 1106-1108.	1.1	26
216	Diagnosis of penicillin, amoxicillin, and cephalosporin allergy: Reliability of examination assessed by skin testing and oral challenge. Journal of Pediatrics, 1998, 132, 137-143.	0.9	190

#	Article	IF	Citations
217	Three-year Follow-up of Vaccine Response in Extremely Preterm Infants. Pediatrics, 1998, 101, 597-603.	1.0	49
218	Spectral gradient acoustic reflectometry for the detection of middle ear effusion by pediatricians and parents. Pediatric Infectious Disease Journal, 1998, 17, 560-564.	1.1	54
219	Administration of Combined Diphtheria and Tetanus Toxoids and Pertussis Vaccine, Hepatitis B Vaccine, andHaemophilus influenzaeType b (Hib) Vaccine to Infants and Response to a Booster Dose of Hib Conjugate Vaccine. Clinical Infectious Diseases, 1997, 25, 1378-1384.	2.9	61
220	Sore throat after sore throat after sore throat. Postgraduate Medicine, 1997, 101, 205-225.	0.9	14
221	Acellular Pertussis Vaccines. Drug Safety, 1996, 15, 311-324.	1.4	31
222	Antibody Response and Reactions to Completion of a Four-dose Series with a Two - or Three-component Acellular Pertussis Vaccine Compared to Whole Cell Pertussis Vaccine. Scandinavian Journal of Infectious Diseases, 1996, 28, 159-163.	1.5	20
223	Persistent acute otitis media. Pediatric Infectious Disease Journal, 1995, 14, 178-182.	1.1	116
224	Empiric antibiotic treatment of acute bacterial infections of the lower respiratory tract in children in an era of changing etiology. Pediatric Pulmonology, 1995, 19, 12-13.	1.0	1
225	New Developments in Pertussis Vaccines. BioDrugs, 1995, 3, 287-296.	0.7	5
226	Immunologic Response of Extremely Premature Infants to Tetanus, Haemophilus influenzae, and Polio Immunizations. Pediatrics, 1995, 96, 18-22.	1.0	84
227	Maternal Immunization to Prevent Infectious Diseases in the Neonate or Infant. International Journal of Technology Assessment in Health Care, 1994, 10, 143-153.	0.2	26
228	Anatomic and audiologic sequelae after tympanostomy tube insertion or prolonged antibiotic therapy for otitis media. Pediatric Infectious Disease Journal, 1989, 8, 780-786.	1.1	27