

Ana RuigÃ³mez

List of Publications by Year in descending order

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Version: 2024-02-01

35
papers

1,838
citations

471371

17
h-index

377752

34
g-index

36
all docs

36
docs citations

36
times ranked

2125
citing authors

#	ARTICLE	IF	CITATIONS
1	Validation of venous thromboembolism diagnoses in patients receiving rivaroxaban or warfarin in The Health Improvement Network. <i>Pharmacoepidemiology and Drug Safety</i> , 2021, 30, 229-236.	0.9	6
2	Use of non-Vitamin K antagonist oral anticoagulants in Colombia: A descriptive study using a national administrative healthcare database. <i>Pharmacoepidemiology and Drug Safety</i> , 2021, 30, 426-434.	0.9	4
3	Identification and Validation of Major Cardiovascular Events in the United Kingdom Data Sources Included in a Multi-database Post-authorization Safety Study of Prucalopride. <i>Drug Safety</i> , 2021, 44, 541-551.	1.4	0
4	Rationale and design of a European epidemiological post-authorization safety study (PASS) program: rivaroxaban use in routine clinical practice. <i>Expert Opinion on Drug Safety</i> , 2020, 19, 1513-1520.	1.0	5
5	Ascertainment and validation of major bleeding events in a primary care database. <i>Pharmacoepidemiology and Drug Safety</i> , 2019, 28, 148-155.	0.9	12
6	Facility ownership and mortality among older adults residing in care homes. <i>PLoS ONE</i> , 2019, 14, e0197789.	1.1	11
7	Discontinuation of non-Vitamin K antagonist oral anticoagulants in patients with non-valvular atrial fibrillation: a population-based cohort study using primary care data from The Health Improvement Network in the UK. <i>BMJ Open</i> , 2019, 9, e031342.	0.8	21
8	Characteristics of children and adolescents first prescribed proton pump inhibitors or histamine-2-receptor antagonists: an observational cohort study. <i>Current Medical Research and Opinion</i> , 2017, 33, 2251-2259.	0.9	2
9	Prevalence of antibiotic use: a comparison across various European health care data sources. <i>Pharmacoepidemiology and Drug Safety</i> , 2016, 25, 11-20.	0.9	46
10	The risk of acute liver injury among users of antibiotic medications: a comparison of case-only studies. <i>Pharmacoepidemiology and Drug Safety</i> , 2016, 25, 39-46.	0.9	7
11	Risk of acute liver injury associated with use of antibiotics. Comparative cohort and nested case-control studies using two primary care databases in Europe. <i>Pharmacoepidemiology and Drug Safety</i> , 2016, 25, 29-38.	0.9	16
12	Risk of uncomplicated peptic ulcer disease in a cohort of new users of low-dose acetylsalicylic acid for secondary prevention of cardiovascular events. <i>BMC Gastroenterology</i> , 2014, 14, 205.	0.8	11
13	Gastroesophageal reflux disease in primary care: Using changes in proton pump inhibitor therapy as an indicator of partial response. <i>Scandinavian Journal of Gastroenterology</i> , 2012, 47, 751-761.	0.6	17
14	Treatment patterns in paediatric patients with a new diagnosis of gastroesophageal reflux disease. <i>European Journal of Gastroenterology and Hepatology</i> , 2011, 23, 232-237.	0.8	5
15	Hospitalised ischaemic cerebrovascular accident and risk factors in a primary care database. <i>Pharmacoepidemiology and Drug Safety</i> , 2011, 20, 1050-1056.	0.9	3
16	Case validation in research using large databases. <i>British Journal of General Practice</i> , 2010, 60, 160-161.	0.7	16
17	Validation of ischemic cerebrovascular diagnoses in the health improvement network (THIN). <i>Pharmacoepidemiology and Drug Safety</i> , 2010, 19, 579-585.	0.9	79
18	Gastroesophageal reflux disease in children and adolescents in primary care. <i>Scandinavian Journal of Gastroenterology</i> , 2010, 45, 139-146.	0.6	73

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19	Follow-up of a cohort of children and adolescents with gastro-esophageal reflux disease who were free of reflux esophagitis at initial diagnosis. <i>Scandinavian Journal of Gastroenterology</i> , 2010, 45, 814-821.	0.6	8
20	Irritable Bowel Syndrome and Gastroesophageal Reflux Disease in Primary Care: Is There a Link?. <i>Digestive Diseases and Sciences</i> , 2009, 54, 1079-1086.	1.1	18
21	Risk of cardiovascular and cerebrovascular events after atrial fibrillation diagnosis. <i>International Journal of Cardiology</i> , 2009, 136, 186-192.	0.8	28
22	Chest pain without established ischaemic heart disease in primary care patients: associated comorbidities and mortality. <i>British Journal of General Practice</i> , 2009, 59, e78-e86.	0.7	31
23	Relationship Between Gastroesophageal Reflux Disease and COPD in UK Primary Care. <i>Chest</i> , 2008, 134, 1223-1230.	0.4	61
24	Dyspepsia in general practice: incidence, risk factors, comorbidity and mortality. <i>Family Practice</i> , 2007, 24, 403-411.	0.8	46
25	Risk of Cerebrovascular Accident After a First Diagnosis of Atrial Fibrillation. <i>Clinical Cardiology</i> , 2007, 30, 624-628.	0.7	9
26	Chest pain in general practice: incidence, comorbidity and mortality. <i>Family Practice</i> , 2006, 23, 167-174.	0.8	131
27	Comparison of gastro-oesophageal reflux disease and heartburn diagnoses in UK primary care. <i>Current Medical Research and Opinion</i> , 2006, 22, 1661-1668.	0.9	7
28	Gastroesophageal Reflux Disease and Asthma. <i>Chest</i> , 2005, 128, 85-93.	0.4	75
29	Predictors and prognosis of paroxysmal atrial fibrillation in general practice in the UK. <i>BMC Cardiovascular Disorders</i> , 2005, 5, 20.	0.7	97
30	Natural history of gastro-oesophageal reflux disease diagnosed in general practice. <i>Alimentary Pharmacology and Therapeutics</i> , 2004, 20, 751-760.	1.9	179
31	Validity of the General Practice Research Database. <i>Pharmacotherapy</i> , 2003, 23, 686-689.	1.2	523
32	Is hormone replacement therapy associated with an increased risk of irritable bowel syndrome?. <i>Maturitas</i> , 2003, 44, 133-140.	1.0	51
33	Incidence of chronic atrial fibrillation in general practice and its treatment pattern. <i>Journal of Clinical Epidemiology</i> , 2002, 55, 358-363.	2.4	186
34	Risk of mortality in a cohort of patients newly diagnosed with chronic atrial fibrillation. <i>BMC Cardiovascular Disorders</i> , 2002, 2, 5.	0.7	39
35	Presence of diabetes related complication at the time of NIDDM diagnosis: an important prognostic factor. <i>European Journal of Epidemiology</i> , 1998, 14, 439-445.	2.5	15