Richard M Nixon

List of Publications by Year
in descending order

33 papers	1,848 citations	318942 23 h-index	445137 33 g-index
34 all docs	34 docs citations	34 times ranked	3206 citing authors

#	Article	IF	Citations
1	Efficacy and safety of diclofenac in osteoarthritis: Results of a network meta-analysis of unpublished legacy studies. Scandinavian Journal of Pain, 2017, 16, 74-88.	0.5	10
2	Review and comparison of methodologies for indirect comparison of clinical trial results: an illustration with ranibizumab and aflibercept. Expert Review of Pharmacoeconomics and Outcomes Research, 2016, 16, 793-801.	0.7	3
3	High correlation of VAS pain scores after 2 and 6 weeks of treatment with VAS pain scores at 12 weeks in randomised controlled trials in rheumatoid arthritis and osteoarthritis: meta-analysis and implications. Arthritis Research and Therapy, 2016, 18, 73.	1.6	11
4	Multilevel models for cost-effectiveness analyses that use cluster randomised trial data: An approach to model choice. Statistical Methods in Medical Research, 2016, 25, 2036-2052.	0.7	24
5	A case study using the PrOACT URL and BRAT frameworks for structured benefit risk assessment. Biometrical Journal, 2016, 58, 8-27.	0.6	34
6	Relative benefit-risk comparing diclofenac to other traditional non-steroidal anti-inflammatory drugs and cyclooxygenase-2 inhibitors in patients with osteoarthritis or rheumatoid arthritis: a network meta-analysis. Arthritis Research and Therapy, 2015, 17, 66.	1.6	175
7	Network meta-analysis combining individual patient and aggregate data from a mixture of study designs with an application to pulmonary arterial hypertension. BMC Medical Research Methodology, 2015, 15, 34.	1.4	29
8	No Evidence of Disease Activity: Indirect Comparisons of Oral Therapies for the Treatment of Relapsing–Remitting Multiple Sclerosis. Advances in Therapy, 2014, 31, 1134-1154.	1.3	83
9	Statistical Methods for Cost-Effectiveness Analyses That Use Data from Cluster Randomized Trials. Medical Decision Making, 2012, 32, 209-220.	1.2	46
10	Developing Appropriate Methods for Cost-Effectiveness Analysis of Cluster Randomized Trials. Medical Decision Making, 2012, 32, 350-361.	1.2	119
11	METHODS FOR COVARIATE ADJUSTMENT IN COST EFFECTIVENESS ANALYSIS THAT USE CLUSTER RANDOMISED TRIALS. Health Economics (United Kingdom), 2012, 21, 1101-1118.	0.8	44
12	Non parametric methods for cost effectiveness analysis: the central limit theorem and the bootstrap compared. Health Economics (United Kingdom), 2010, 19, 316-333.	0.8	148
13	Bayesian Hierarchical Models for Cost-Effectiveness Analyses that Use Data from Cluster Randomized Trials. Medical Decision Making, 2010, 30, 163-175.	1.2	42
14	Using short term evidence to predict six month outcomes in clinical trials of signs and symptoms in rheumatoid arthritis. Pharmaceutical Statistics, 2009, 8, 150-162.	0.7	8
15	The Rheumatoid Arthritis Drug Development Model: a case study in Bayesian clinical trial simulation. Pharmaceutical Statistics, 2009, 8, 371-389.	0.7	16
16	Valsartan vs. other angiotensin II receptor blockers in the treatment of hypertension: a meta-analytical approach. International Journal of Clinical Practice, 2009, 63, 766-775.	0.8	61
17	Cost-Effectiveness of Disease-Modifying Therapies in the Management of Multiple Sclerosis for the Medicare Population. Value in Health, 2009, 12, 657-665.	0.1	47
18	Biologic drugs for rheumatoid arthritis in the medicare program: A cost effectiveness analysis. Arthritis and Rheumatism, 2008, 58, 939-946.	6.7	82

#	Article	IF	Citations
19	Multilevel models for estimating incremental net benefits in multinational studies. Health Economics (United Kingdom), 2007, 16, 815-826.	0.8	29
20	Using mixed treatment comparisons and meta-regression to perform indirect comparisons to estimate the efficacy of biologic treatments in rheumatoid arthritis. Statistics in Medicine, 2007, 26, 1237-1254.	0.8	125
21	The Effect of Disease, Functional Status, and Relapses on the Utility of People with Multiple Sclerosis in the UK. Value in Health, 2007, 10, 54-60.	0.1	138
22	The Distribution of the Cost of Multiple Sclerosis in the UK: How Do Costs Vary by Illness Severity?. Value in Health, 2007, 10, 386-389.	0.1	29
23	Addressing the issues that arise in analysing multicentre cost data, with application to a multinational study. Journal of Health Economics, 2006, 25, 1015-1028.	1.3	41
24	Methods for incorporating covariate adjustment, subgroup analysis and between-centre differences into cost-effectiveness evaluations. Health Economics (United Kingdom), 2005, 14, 1217-1229.	0.8	109
25	Using multilevel models for assessing the variability of multinational resource use and cost data. Health Economics (United Kingdom), 2005, 14, 185-196.	0.8	69
26	Parametric modelling of cost data: some simulation evidence. Health Economics (United Kingdom), 2005, 14, 421-428.	0.8	84
27	How Sensitive Are Cost-Effectiveness Analyses to Choice of Parametric Distributions?. Medical Decision Making, 2005, 25, 416-423.	1.2	65
28	Parametric modelling of cost data in medical studies. Statistics in Medicine, 2004, 23, 1311-1331.	0.8	83
29	Imputation of a true endpoint from a surrogate: application to a cluster randomized controlled trial with partial information on the true endpoint. BMC Medical Research Methodology, 2003, 3, 17.	1.4	3
30	Bayesian evaluation of breast cancer screening using data from two studies. Statistics in Medicine, 2003, 22, 1661-1674.	0.8	8
31	A comparison of clinical assessment with ultrasound in the management of secondary postpartum haemorrhage. European Journal of Obstetrics, Gynecology and Reproductive Biology, 2002, 104, 113-115.	0.5	17
32	Management of menorrhagia: an audit of practices in the Anglia menorrhagia education study. BMJ: British Medical Journal, 2001, 322, 523-524.	2.4	8
33	Randomised controlled trial of educational package on management of menorrhagia in primary care: the Anglia menorrhagia education study. BMJ: British Medical Journal, 1999, 318, 1246-1250.	2.4	47