Dorte Gyrd-Hansen

List of Publications by Year in descending order

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77 papers

1,411 citations

394421 19 h-index 34 g-index

78 all docs 78 docs citations

78 times ranked 1680 citing authors

#	Article	IF	CITATIONS
1	Willingness to pay for a QALY. Health Economics (United Kingdom), 2003, 12, 1049-1060.	1.7	120
2	Willingness to Pay for a QALY. Pharmacoeconomics, 2005, 23, 423-432.	3. 3	86
3	Cost-effectiveness estimate of prehospital thrombolysis. Neurology, 2015, 84, 1090-1097.	1.1	82
4	Number needed to treat: easily understood and intuitively meaningful?. Journal of Clinical Epidemiology, 2002, 55, 888-892.	5.0	71
5	Estimating a WTP-based value of a QALY: The †chained' approach. Social Science and Medicine, 2013, 92, 92-104.	3.8	71
6	Analysing public preferences for cancer screening programmes. Health Economics (United Kingdom), 2001, 10, 617-634.	1.7	69
7	Choke Price Bias in Choice Experiments. Environmental and Resource Economics, 2010, 45, 537-551.	3.2	61
8	Colorectal cancer screening: efficiency and effectiveness., 1998, 7, 9-20.		51
9	Disentangling WTP per QALY data: different analytical approaches, different answers. Health Economics (United Kingdom), 2012, 21, 222-237.	1.7	42
10	Investigating the social value of health changes. Journal of Health Economics, 2004, 23, 1101-1116.	2.7	41
11	Laypersons' understanding of relative risk reductions: Randomised cross-sectional study. BMC Medical Informatics and Decision Making, 2008, 8, 31.	3.0	40
12	Joint and Separate Evaluation of Risk Reduction. Medical Decision Making, 2011, 31, E1-E10.	2.4	34
13	A cost-effectiveness analysis of cervical cancer screening: health policy implications. Health Policy, 1995, 34, 35-51.	3.0	32
14	Prenatal screening for cystic fibrosis: an economic analysis. Health Economics (United Kingdom), 2002, 11, 285-299.	1.7	28
15	Determinants of preferences for lifestyle changes versus medication and beliefs in ability to maintain lifestyle changes. A population-based survey. Preventive Medicine Reports, 2017, 6, 66-73.	1.8	28
16	Can postponement of an adverse outcome be used to present risk reductions to a lay audience? A population survey. BMC Medical Informatics and Decision Making, 2007, 7, 8.	3.0	27
17	Discounting life-years: whither time preference?. , 1998, 7, 121-127.		26
18	Communicating risk using absolute risk reduction or prolongation of life formats: cluster-randomised trial in general practice. British Journal of General Practice, 2014, 64, e199-e207.	1.4	26

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19	The citizen's preferences for financing public health care: a Danish survey. International Journal of Health Care Finance and Economics, 2002, 2, 25-36.	1.2	25
20	How Do Individuals Apply Risk Information When Choosing Among Health Care Interventions?. Risk Analysis, 2003, 23, 697-704.	2.7	23
21	Can present biasedness explain early onset of diabetes and subsequent disease progression? Exploring causal inference by linking survey and register data. Social Science and Medicine, 2017, 186, 34-42.	3.8	23
22	Designing Unforced Choice Experiments to Inform Health Care Decision Making: Implications of Using Opt-Out, Neither, or Status Quo Alternatives in Discrete Choice Experiments. Medical Decision Making, 2019, 39, 681-692.	2.4	20
23	The relative value of different QALY types. Journal of Health Economics, 2020, 70, 102303.	2.7	20
24	Testing the myth of feeâ€forâ€service and overprovision in health care. Health Economics (United) Tj ETQq0 0 () rgBT /Ov	erlock 10 Tf 50
25	Comparing the results of applying different methods of eliciting time preferences for health. European Journal of Health Economics, 2002, 3, 10-16.	2.8	18
26	The influence of information and private versus public provision on preferences for screening for prostate cancer: A willingness-to-pay study. Health Policy, 2011, 101, 277-289.	3.0	17
27	Fecal Occult Blood Tests: <i>A Cost-effectiveness Analysis</i> . International Journal of Technology Assessment in Health Care, 1998, 14, 290-301.	0.5	16
28	Increasing marginal utility of small increases in life-expectancy?. Journal of Health Economics, 2010, 29, 541-548.	2.7	16
29	Effects of Baseline Risk Information on Social and Individual Choices. Medical Decision Making, 2002, 22, 71-75.	2.4	15
30	Personal health records in the Netherlands: potential user preferences quantified by a discrete choice experiment. Journal of the American Medical Informatics Association: JAMIA, 2017, 24, 529-536.	4.4	14
31	Different domains – Different time preferences?. Social Science and Medicine, 2018, 207, 97-105.	3.8	14
32	The relative economic of screening for colorectal cancer, breast cancer and cervical cancer. Critical Reviews in Oncology/Hematology, 1999, 32, 133-144.	4.4	13
33	Willingness-to-pay for a statistical life in the times of a pandemic. Health Economics (United Kingdom), 2008, 17, 55-66.	1.7	13
34	Insensitivity to Scope in Contingent Valuation Studies. Applied Health Economics and Health Policy, 2012, 10, 397-405.	2.1	13
35	Impact of Socio-demographic Factors on Willingness to Pay for the Reduction of a Future Health Risk. Journal of Environmental Planning and Management, 2003, 46, 39-47.	4.5	12
36	GPs' shifting agencies in choice of treatment. Applied Economics, 2014, 46, 750-761.	2.2	11

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37	Allocation of health care under pay for performance: Winners and losers. Social Science and Medicine, 2021, 278, 113939.	3.8	11
38	The role of the payment vehicle in non-market valuations of a health care service: willingness-to-pay for an ambulance helicopter service. Health Economics, Policy and Law, 2016, 11, 1-16.	1.8	10
39	A Stated Preference Approach to Assess whether Health Status Impacts on Marginal Utility of Consumption. Health Economics (United Kingdom), 2017, 26, 1224-1233.	1.7	10
40	Evaluation of a screening algorithm using the Strengths and Difficulties Questionnaire to identify children with mental health problems: A five-year register-based follow-up on school performance and healthcare use. PLoS ONE, 2019, 14, e0223314.	2.5	10
41	Preferences for â€`lifeâ€saving' programmes: Small for all or gambling for the prize?. Health Economics (United Kingdom), 2008, 17, 709-720.	1.7	9
42	GPs' implicit prioritization through clinical choices $\hat{a}\in$ " evidence from three national health services. Journal of Health Economics, 2016, 49, 169-183.	2.7	9
43	Effects of numerical information on intention to participate in cervical screening among women offered HPV vaccination: a randomised study. Scandinavian Journal of Primary Health Care, 2016, 34, 401-419.	1.5	9
44	The value of mortality risk reductions. Pure altruism – a confounder?. Journal of Health Economics, 2016, 49, 184-192.	2.7	8
45	Is there additional value attached to health gains at the end of life? A revisit. Health Economics (United Kingdom), 2018, 27, e71-e75.	1.7	8
46	Long term resource consequences of a nationwide introduction of robotic surgery for women with early stage endometrial cancer. Gynecologic Oncology, 2019, 154, 411-419.	1.4	8
47	Taking care of high-need patients in capitation-based payment schemes – an experimental investigation into the importance of market conditions. Applied Economics, 2019, 51, 5174-5184.	2.2	7
48	Communicating treatment effectiveness in the context of chronic disease processes. Expert Review of Pharmacoeconomics and Outcomes Research, 2006, 6, 673-679.	1.4	6
49	GPs as citizens' agents: prescription behavior and altruism. European Journal of Health Economics, 2009, 10, 399-407.	2.8	6
50	Government interventions to aid choice: Help to self-help or paternalism?. Health Policy, 2015, 119, 874-881.	3.0	6
51	Socio-economic position and time trends in invasive management and case fatality after acute myocardial infarction in Denmark. European Journal of Public Health, 2016, 26, 146-152.	0.3	6
52	Women's Preferences for Birthing Hospital in Denmark: A Discrete Choice Experiment. Patient, 2018, 11, 613-624.	2.7	6
53	Physical exercise versus shorter life expectancy? An investigation into preferences for physical activity using a stated preference approach. Health Policy, 2019, 123, 790-796.	3.0	6
54	Systematic identification and stratification of help-seeking school-aged youth with mental health problems: a novel approach to stage-based stepped-care. European Child and Adolescent Psychiatry, 2022, 31, 781-793.	4.7	5

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55	Effects of parental health shocks on children's school achievements: A register-based population study. Journal of Health Economics, 2022, 81, 102573.	2.7	5
56	How does HPV vaccination status relate to risk perceptions and intention to participate in cervical screening? a survey study. BMC Public Health, 2016, 16, 708.	2.9	4
57	Sample restrictions and the elicitation of a constant willingness to pay per quality adjusted life year. Health Economics (United Kingdom), 2021, 30, 923-931.	1.7	4
58	Physicians under Pressure: Evidence from Antibiotics Prescribing in England. Medical Decision Making, 2022, 42, 303-312.	2.4	4
59	Valuation of food safety in meat – a review of stated preference studies. Acta Agriculturae Scandinavica Section C: Food Economics, 2008, 5, 63-74.	0.1	3
60	Valuation of morbidity and mortality risk reductions. Does context matter?. Accident Analysis and Prevention, 2012, 48, 246-253.	5.7	3
61	Effects of Baseline Risk Information on Social and Individual Choices. Medical Decision Making, 2002, 22, 71-75.	2.4	3
62	Handling Value Added Tax (VAT) in Economic Evaluations. Applied Health Economics and Health Policy, 2006, 5, 209-213.	2.1	2
63	How does information on the harms and benefits of cervical cancer screening alter the intention to be screened?: a randomized survey of Norwegian women. European Journal of Cancer Prevention, 2019, 28, 87-95.	1.3	2
64	The effects of pantoprazole vs. placebo on 1-year outcomes, resource use and employment status in ICU patients at risk for gastrointestinal bleeding: a secondary analysis of the SUP-ICU trial. Intensive Care Medicine, 2022, 48, 426.	8.2	2
65	GP decisions to participate in emergencies: a randomised vignette study. BJGP Open, 2021, 5, bjgpopen20X101153.	1.8	1
66	Age, morbidity, or something else? A residual approach using microdata to measure the impact of technological progress on health care expenditure. Health Economics (United Kingdom), 2022, 31, 1184-1201.	1.7	1
67	Breast cancer screening after age 69 is more cost-effective if restricted to women with higher bone mineral density. Evidence-Based Obstetrics and Gynecology, 2001, 3, 101-102.	0.0	0
68	Could a Pigouvian Subsidy Mitigate Poker Machine Externalities, in Australia?. Economic Papers, 2014, 33, 327-338.	0.9	0
69	Does future resource input reflect need in firstâ€episode psychosis: Examining the association between individual characteristics and 5â€year costs. Microbial Biotechnology, 2019, 13, 1056-1061.	1.7	0
70	Home sweet home: GPs' response to an increase in the fee size for home visits. European Journal of Health Economics, 2021, 22, 977-989.	2.8	0
71	Time to retire? A register-based study of GPs' practice style prior to retirement. Social Science and Medicine, 2021, 281, 114099.	3.8	0
72	Post robotic investment: Cost consequences and impact on length of stay for obese women with endometrial cancer. Acta Obstetricia Et Gynecologica Scandinavica, 2021, 100, 1830-1839.	2.8	0

#	Article	IF	CITATIONS
73	Pure altruism and misjudgement: A bad combination?. Journal of Health Economics, 2021, 80, 102550.	2.7	O
74	Title is missing!. , 2019, 14, e0223314.		0
75	Title is missing!. , 2019, 14, e0223314.		O
76	Title is missing!. , 2019, 14, e0223314.		0
77	Title is missing!. , 2019, 14, e0223314.		O