

# Domenico Tamburrino

## List of Publications by Year in descending order

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Version: 2024-02-01

77  
papers

1,640  
citations

279487

23  
h-index

315357

38  
g-index

85  
all docs

85  
docs citations

85  
times ranked

2346  
citing authors

#	ARTICLE	IF	CITATIONS
1	Observational Study of Natural History of Small Sporadic Nonfunctioning Pancreatic Neuroendocrine Tumors. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2013, 98, 4784-4789.	1.8	212
2	Total pancreatectomy: Indications, different timing, and perioperative and long-term outcomes. <i>Surgery</i> , 2011, 149, 79-86.	1.0	109
3	Incidental diagnosis as prognostic factor in different tumor stages of nonfunctioning pancreatic endocrine tumors. <i>Surgery</i> , 2014, 155, 145-153.	1.0	92
4	Long-Term Outcomes of Surgical Management of Pancreatic Neuroendocrine Tumors with Synchronous Liver Metastases. <i>Neuroendocrinology</i> , 2015, 102, 68-76.	1.2	71
5	Active Surveillance Beyond 5 Years Is Required for Presumed Branch-Duct Intraductal Papillary Mucinous Neoplasms Undergoing Non-Operative Management. <i>American Journal of Gastroenterology</i> , 2017, 112, 1153-1161.	0.2	66
6	Radiolabelled somatostatin analogue treatment in gastroenteropancreatic neuroendocrine tumours: factors associated with response and suggestions for therapeutic sequence. <i>European Journal of Nuclear Medicine and Molecular Imaging</i> , 2013, 40, 1197-1205.	3.3	50
7	Active Surveillance versus Surgery of Nonfunctioning Pancreatic Neuroendocrine Neoplasms $\leq$ 2 cm in MEN1 Patients. <i>Neuroendocrinology</i> , 2016, 103, 779-786.	1.2	49
8	Defining Benchmark Outcomes for Pancreatoduodenectomy With Portomesenteric Venous Resection. <i>Annals of Surgery</i> , 2020, 272, 731-737.	2.1	49
9	Pancreatic Tumors and Immature Immunosuppressive Myeloid Cells in Blood and Spleen: Role of Inhibitory Co-Stimulatory Molecules PDL1 and CTLA4. An In Vivo and In Vitro Study. <i>PLoS ONE</i> , 2013, 8, e54824.	1.1	44
10	Evaluation of a predictive model for pancreatic fistula based on amylase value in drains after pancreatic resection. <i>American Journal of Surgery</i> , 2014, 208, 634-639.	0.9	41
11	Cirrhotic Human Liver Extracellular Matrix 3D Scaffolds Promote Smad-Dependent TGF- $\beta$ 1 Epithelial Mesenchymal Transition. <i>Cells</i> , 2020, 9, 83.	1.8	41
12	Splenic Artery Invasion in Pancreatic Adenocarcinoma of the Body and Tail: A Novel Prognostic Parameter for Patient Selection. <i>Annals of Surgical Oncology</i> , 2011, 18, 3608-3614.	0.7	40
13	Management of small asymptomatic nonfunctioning pancreatic neuroendocrine tumors: Limitations to apply guidelines into real life. <i>Surgery</i> , 2019, 166, 157-163.	1.0	40
14	Diagnostic accuracy of different imaging modalities following computed tomography (CT) scanning for assessing the resectability with curative intent in pancreatic and periampullary cancer. <i>The Cochrane Library</i> , 2016, 9, CD011515.	1.5	38
15	Implications of increased serum amylase after pancreaticoduodenectomy: toward a better definition of clinically relevant postoperative acute pancreatitis. <i>Hpb</i> , 2020, 22, 1645-1653.	0.1	33
16	Systematic review and meta-analysis on laparoscopic pancreatic resections for neuroendocrine neoplasms (PNENs). <i>Expert Review of Gastroenterology and Hepatology</i> , 2017, 11, 65-73.	1.4	32
17	Selection criteria in resectable pancreatic cancer: A biological and morphological approach. <i>World Journal of Gastroenterology</i> , 2014, 20, 11210.	1.4	31
18	GEP-NEETS UPDATE: A review on surgery of gastro-entero-pancreatic neuroendocrine tumors. <i>European Journal of Endocrinology</i> , 2014, 171, R153-R162.	1.9	30

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19	Histone macroH2A1.2 promotes metabolic health and leanness by inhibiting adipogenesis. <i>Epigenetics and Chromatin</i> , 2016, 9, 45.	1.8	30
20	A Systematic review and meta-analysis on the role of palliative primary resection for pancreatic neuroendocrine neoplasm with liver metastases. <i>Hpb</i> , 2018, 20, 197-203.	0.1	29
21	Statin use improves survival in patients with pancreatic ductal adenocarcinoma: A meta-analysis. <i>Digestive and Liver Disease</i> , 2020, 52, 392-399.	0.4	28
22	Surgical management of neuroendocrine tumors. <i>Best Practice and Research in Clinical Endocrinology and Metabolism</i> , 2016, 30, 93-102.	2.2	27
23	Is the Real Prevalence of Pancreatic Neuroendocrine Tumors Underestimated? A Retrospective Study on a Large Series of Pancreatic Specimens. <i>Neuroendocrinology</i> , 2019, 109, 165-170.	1.2	26
24	Risk and Predictors of Postoperative Morbidity and Mortality After Pancreaticoduodenectomy for Pancreatic Neuroendocrine Neoplasms. <i>Pancreas</i> , 2019, 48, 504-509.	0.5	26
25	A systematic review and meta-analysis on the role of omental or falciform ligament wrapping during pancreaticoduodenectomy. <i>Hpb</i> , 2020, 22, 1227-1239.	0.1	26
26	Systematic review and meta-analysis of prognostic role of splenic vessels infiltration in resectable pancreatic cancer. <i>European Journal of Surgical Oncology</i> , 2018, 44, 24-30.	0.5	24
27	The Impact of Neoadjuvant Treatment on Survival in Patients Undergoing Pancreatoduodenectomy With Concomitant Portomesenteric Venous Resection: An International Multicenter Analysis. <i>Annals of Surgery</i> , 2021, 274, 721-728.	2.1	24
28	Decellularized Human Gut as a Natural 3D Platform for Research in Intestinal Fibrosis. <i>Inflammatory Bowel Diseases</i> , 2019, 25, 1740-1750.	0.9	21
29	Molecular pathology of intraductal papillary mucinous neoplasms of the pancreas. <i>World Journal of Gastroenterology</i> , 2014, 20, 10008.	1.4	21
30	Long-Term Survivors after Upfront Resection for Pancreatic Ductal Adenocarcinoma: An Actual 5-Year Analysis of Disease-Specific and Post-Recurrence Survival. <i>Annals of Surgical Oncology</i> , 2021, 28, 8249-8260.	0.7	20
31	Vascular resection during pancreatectomy for pancreatic head cancer: A technical issue or a prognostic sign?. <i>Surgery</i> , 2021, 169, 403-410.	1.0	18
32	R Status is a Relevant Prognostic Factor for Recurrence and Survival After Pancreatic Head Resection for Ductal Adenocarcinoma. <i>Annals of Surgical Oncology</i> , 2021, 28, 4602-4612.	0.7	18
33	Respect - A multicenter retrospective study on preoperative chemotherapy in locally advanced and borderline resectable pancreatic cancer. <i>Pancreatology</i> , 2020, 20, 1131-1138.	0.5	16
34	Prediction of Early Distant Recurrence in Upfront Resectable Pancreatic Adenocarcinoma: A Multidisciplinary, Machine Learning-Based Approach. <i>Cancers</i> , 2021, 13, 4938.	1.7	16
35	Sporadic non-functioning pancreatic neuroendocrine tumours: multicentre analysis. <i>British Journal of Surgery</i> , 2021, 108, 811-816.	0.1	15
36	Recurrence after surgical resection of pancreatic cancer: the importance of postoperative complications beyond tumor biology. <i>Hpb</i> , 2021, 23, 1666-1673.	0.1	15

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37	The role of acinar content at pancreatic resection margin in the development of postoperative pancreatic fistula and acute pancreatitis after pancreaticoduodenectomy. <i>Surgery</i> , 2021, 170, 1215-1222.	1.0	15
38	The role of 18fluoro-deoxyglucose positron emission tomography/computed tomography in resectable pancreatic cancer. <i>Digestive and Liver Disease</i> , 2014, 46, 744-749.	0.4	14
39	Postoperative Outcomes and Functional Recovery After Preoperative Combination Chemotherapy for Pancreatic Cancer: A Propensity Score-Matched Study. <i>Frontiers in Oncology</i> , 2019, 9, 1299.	1.3	12
40	Portal vein resection during pancreaticoduodenectomy for pancreatic neuroendocrine tumors. An international multicenter comparative study. <i>Surgery</i> , 2021, 169, 1093-1101.	1.0	12
41	Main Duct Thresholds for Malignancy Are Different in Intraductal Papillary Mucinous Neoplasms of the Pancreatic Head and Body-Tail. <i>Clinical Gastroenterology and Hepatology</i> , 2020, , .	2.4	11
42	Identification of patients with branch-duct intraductal papillary mucinous neoplasm and very low risk of cancer: multicentre study. <i>British Journal of Surgery</i> , 2022, 109, 617-622.	0.1	11
43	The natural history of a branch-duct intraductal papillary mucinous neoplasm of the pancreas. <i>Surgery</i> , 2014, 155, 578-579.	1.0	9
44	Major postoperative complications after pancreatic resection for P-NETS are not associated to earlier recurrence. <i>European Journal of Surgical Oncology</i> , 2017, 43, 2119-2128.	0.5	9
45	Time to CA19-9 nadir: a clue for defining optimal treatment duration in patients with resectable pancreatic ductal adenocarcinoma. <i>Cancer Chemotherapy and Pharmacology</i> , 2020, 85, 641-650.	1.1	8
46	Before sentinel bleeding: early prediction of postpancreatectomy hemorrhage (PPH) with a CT-based scoring system. <i>European Radiology</i> , 2021, 31, 6879-6888.	2.3	7
47	Surgical management of pancreatic neuroendocrine neoplasms. <i>Annals of Saudi Medicine</i> , 2014, 34, 1-5.	0.5	7
48	Neoadjuvant therapy in elderly patients receiving FOLFIRINOX or gemcitabine/nab-paclitaxel for borderline resectable or locally advanced pancreatic cancer is feasible and lead to a similar oncological outcome compared to non-aged patients – Results of the RESPECT-Study. <i>Surgical Oncology</i> , 2020, 35, 285-297.	0.8	6
49	Chemopreventive Agents After Pancreatic Resection for Ductal Adenocarcinoma: Legend or Scientific Evidence?. <i>Annals of Surgical Oncology</i> , 2021, 28, 2312-2322.	0.7	5
50	Endoscopic ultrasound-guided gastrojejunostomy does not prevent pancreaticoduodenectomy after long-term symptom-free neoadjuvant treatment. <i>Endoscopy</i> , 2021, , .	1.0	5
51	Management of hepatic metastases of well/moderately differentiated neuroendocrine tumors of the digestive tract. <i>Journal of Cancer Metastasis and Treatment</i> , 2016, 2, 294.	0.5	5
52	ASO Visual Abstract: Long-Term Survivors After Upfront Resection of Pancreatic Ductal Adenocarcinoma: An Actual 5-Year Analysis of Disease-Specific and Post-Recurrence Survival. <i>Annals of Surgical Oncology</i> , 2021, 28, 655-656.	0.7	4
53	Survival after active surveillance versus upfront surgery for incidental small pancreatic neuroendocrine tumours. <i>British Journal of Surgery</i> , 2022, 109, 733-738.	0.1	4
54	Pancreatic resections for benign intraductal papillary mucinous neoplasms: Collateral damages from friendly fire. <i>Surgery</i> , 2022, 172, 1202-1209.	1.0	4

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55	Exploring chemotherapy holiday and drugs re-challenge in advanced pancreatic cancer patients. <i>Cancer Chemotherapy and Pharmacology</i> , 2021, 87, 95-101.	1.1	3
56	Indications to total pancreatectomy for positive neck margin after partial pancreatectomy: a review of a slippery ground. <i>Updates in Surgery</i> , 2021, 73, 1219-1229.	0.9	3
57	Clinical and economic validation of grade B postoperative pancreatic fistula subclassification. <i>Surgery</i> , 2022, 171, 846-853.	1.0	3
58	Feasibility of therapeutic endoscopic ultrasound in the bridge-to-surgery scenario: The example of pancreatic adenocarcinoma. <i>World Journal of Gastroenterology</i> , 2022, 28, 976-984.	1.4	3
59	PS-209-Whole Human liver decellularisation-recellularisation for future liver transplantation and extracorporeal device application. <i>Journal of Hepatology</i> , 2019, 70, e139.	1.8	2
60	Evaluation of factors predicting loss of benefit provided by laparoscopic distal pancreatectomy compared to open approach. <i>Updates in Surgery</i> , 2021, , 1.	0.9	2
61	Which is the best pancreatic anastomosis?. <i>Minerva Chirurgica</i> , 2019, 74, 241-252.	0.8	2
62	How to Select Patients Affected by Neuroendocrine Neoplasms for Surgery. <i>Current Oncology Reports</i> , 2022, 24, 227-239.	1.8	2
63	The Impact of CT-Assessed Liver Steatosis on Postoperative Complications After Pancreaticoduodenectomy for Cancer. <i>Annals of Surgical Oncology</i> , 2022, 29, 7063-7073.	0.7	2
64	Long-Term Outcomes of Surgical Management of Pancreatic Neuroendocrine Tumors with Synchronous Liver Metastases. <i>Hpb</i> , 2016, 18, e743.	0.1	1
65	ASO Author Reflections: Chemopreventive Agents After Pancreatic Resection for Ductal Adenocarcinoma. <i>Annals of Surgical Oncology</i> , 2021, 28, 2323-2324.	0.7	1
66	Tu1784 The Presence of Abdominal Complications is an Independent Predictor of Poor Survival After Resection for Pancreatic Cancer. <i>Gastroenterology</i> , 2012, 142, S-1098.	0.6	0
67	Perioperative outcomes after pancreaticoduodenectomy for neuroendocrine neoplasms: A comparison with pancreatic ductal adenocarcinoma. <i>Pancreatology</i> , 2016, 16, S72.	0.5	0
68	Guideline for the Management of Pancreatic Neuroendocrine Tumor. , 2017, , 161-172.		0
69	A new in vitro hepatocellular carcinoma model based on human normal and fibrotic 3D extracellular matrix scaffold bio-engineering. <i>Journal of Hepatology</i> , 2017, 66, S230-S231.	1.8	0
70	Active surveillance beyond 5 years is required for presumed branch-duct intraductal papillary mucinous neoplasms undergoing non operative management. <i>Pancreatology</i> , 2017, 17, S63-S64.	0.5	0
71	A randomized phase 2 trial of nab -paclitaxel plus gemcitabine, ± capecitabine, cisplatin (PAXG regimen) in unresectable or borderline resectable pancreatic adenocarcinoma: the ghost regimen strikes back. <i>Pancreatology</i> , 2017, 17, S90-S91.	0.5	0
72	Sa1371 “Eus and Ct Scan Diagnostic Yield in Establishing the T Stage in Surgically Resected Pancreatic Cancer Based on the Tnm 8Th Edition. <i>Gastroenterology</i> , 2019, 156, S-330.	0.6	0

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73	Does chronic consumption of angiotensin-converting enzyme inhibitors affect survival after surgical resection of pancreatic ductal adenocarcinoma?. Digestive and Liver Disease, 2021, 53, 1065-1067.	0.4	0
74	Diameter of surgical versus endoscopic ultrasound-guided gastrojejunostomy: that much wider after all is said and done?. Endoscopy, 2021, , .	1.0	0
75	Pancreatic Neuroendocrine Tumours. , 2018, , 333-343.		0
76	EUS AND CT SCAN ACCURACY IN ESTABLISHING THE T STAGE IN SURGICALLY RESECTED PANCREATIC CANCER BASED ON THE UPCOMING TNM 8TH EDITION. Endoscopy, 2018, 50, .	1.0	0
77	AB065. P037. Prognostic role of the parenchymal frozen transection margin during pancreaticoduodenectomy (PD) for ductal pancreatic adenocarcinoma. Annals of Pancreatic Cancer, 2018, 1, AB065-AB065.	1.2	0