## Emily J Lancsar

List of Publications by Year in descending order

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114418 186209 5,005 64 28 63 citations h-index g-index papers 67 67 67 4953 docs citations times ranked citing authors all docs

#	Article	IF	CITATIONS
1	Social acceptability of standard and behavioral economic inspired policies designed to reduce and prevent obesity. Health Economics (United Kingdom), 2022, 31, 197-214.	0.8	4
2	Systematic Review of Conceptual, Age, Measurement and Valuation Considerations for Generic Multidimensional Childhood Patient-Reported Outcome Measures. Pharmacoeconomics, 2022, 40, 379-431.	1.7	28
3	The path towards herd immunity: Predicting COVID-19 vaccination uptake through results from a stated choice study across six continents. Social Science and Medicine, 2022, 298, 114800.	1.8	17
4	Preference Elicitation Techniques Used in Valuing Children's Health-Related Quality-of-Life: A Systematic Review. Pharmacoeconomics, 2022, 40, 663-698.	1.7	5
5	Antipsychotic choice: understanding shared decision-making among doctors and patients. Journal of Mental Health, 2021, 30, 66-73.	1.0	6
6	Cost of whole genome sequencing for non-typhoidal Salmonella enterica. PLoS ONE, 2021, 16, e0248561.	1.1	10
7	Healthcare Funding Decisions and Real-World Benefits: Reducing Bias by Matching Untreated Patients. Pharmacoeconomics, 2021, 39, 741-756.	1.7	0
8	Hypothetical bias in stated choice experiments: Part I. Macro-scale analysis of literature and integrative synthesis of empirical evidence from applied economics, experimental psychology and neuroimaging. Journal of Choice Modelling, 2021, 41, 100309.	1.2	38
9	Hypothetical bias in stated choice experiments: Part II. Conceptualisation of external validity, sources and explanations of bias and effectiveness of mitigation methods. Journal of Choice Modelling, 2021, 41, 100322.	1.2	37
10	Estimating decision rule differences between †best' and †worst' choices in a sequential best worst discrete choice experiment. Journal of Choice Modelling, 2021, 41, 100307.	1.2	2
11	An integrated modelling approach examining the influence of goals, habit and learning on choice using visual attention data. Journal of Business Research, 2020, 117, 44-57.	5.8	4
12	The relative value of different QALY types. Journal of Health Economics, 2020, 70, 102303.	1.3	20
13	Empirical Investigation of Ranking vs Best–Worst Scaling Generated Preferences for Attributes of Quality of Life: One and the Same or Differentiable?. Patient, 2020, 13, 307-315.	1.1	1
14	Investigating business outcomes of healthy food retail strategies: A systematic scoping review. Obesity Reviews, 2019, 20, 1384-1399.	3.1	30
15	Mind the (inter-rater) gap. An investigation of self-reported versus proxy-reported assessments in the derivation of childhood utility values for economic evaluation: A systematic review. Social Science and Medicine, 2019, 240, 112543.	1.8	38
16	Cost of Salmonella Infections in Australia, 2015. Journal of Food Protection, 2019, 82, 1607-1614.	0.8	13
17	Accounts from developers of generic health state utility instruments explain why they produce different QALYs: A qualitative study. Social Science and Medicine, 2019, 240, 112560.	1.8	10
18	Sugar-sweetened beverage price elasticities in a hypothetical convenience store. Social Science and Medicine, 2019, 225, 98-107.	1.8	9

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19	Developing a new quality of life instrument with older people for economic evaluation in aged care: study protocol. BMJ Open, 2019, 9, e028647.	0.8	20
20	The effect of sugar-sweetened beverage price increases and educational messages on beverage purchasing behavior among adults. Appetite, 2018, 126, 156-162.	1.8	17
21	The impact of vaccination and patient characteristics on influenza vaccination uptake of elderly people: A discrete choice experiment. Vaccine, 2018, 36, 1467-1476.	1.7	53
22	Factors that influence clinicians' decisions to offer intravenous alteplase in acute ischemic stroke patients with uncertain treatment indication: Results of a discrete choice experiment. International Journal of Stroke, 2018, 13, 74-82.	2.9	11
23	Retailer-Led Sugar-Sweetened Beverage Price Increase Reduces Purchases in a Hospital Convenience Store in Melbourne, Australia: A Mixed Methods Evaluation. Journal of the Academy of Nutrition and Dietetics, 2018, 118, 1027-1036.e8.	0.4	28
24	Revealed and Stated Preferences of Decision Makers for Priority Setting in Health Technology Assessment: A Systematic Review. Pharmacoeconomics, 2018, 36, 323-340.	1.7	21
25	A novel design process for selection of attributes for inclusion in discrete choice experiments: case study exploring variation in clinical decision-making about thrombolysis in the treatment of acute ischaemic stroke. BMC Health Services Research, 2018, 18, 483.	0.9	23
26	Discrete Choice Experiments: A Guide to Model Specification, Estimation and Software. Pharmacoeconomics, 2017, 35, 697-716.	1.7	177
27	Understanding what matters: An exploratory study to investigate the views of the general public for priority setting criteria in health care. Health Policy, 2017, 121, 653-662.	1.4	10
28	Health Preference Research: An Overview. Patient, 2017, 10, 507-510.	1.1	37
29	Does one size fit all? Assessing the preferences of older and younger people for attributes of quality of life. Quality of Life Research, 2017, 26, 299-309.	1.5	31
30	Is Dimension Order Important when Valuing Health States Using Discrete Choice Experiments Including Duration?. Pharmacoeconomics, 2017, 35, 439-451.	1.7	11
31	Factors that influence variation in clinical decision-making about thrombolysis in the treatment of acute ischaemic stroke: results of a discrete choice experiment. Health Services and Delivery Research, 2017, 5, 1-116.	1.4	7
32	Women's Preferences for Treatment of Perinatal Depression and Anxiety: A Discrete Choice Experiment. PLoS ONE, 2016, 11, e0156629.	1.1	30
33	From representing views to representativeness of views: Illustrating a new (Q2S) approach in the context of health care priority setting in nine European countries. Social Science and Medicine, 2016, 166, 205-213.	1.8	19
34	An empirical comparison of the OPQoL-Brief, EQ-5D-3ÂL and ASCOT in a community dwelling population of older people. Health and Quality of Life Outcomes, 2015, 13, 164.	1.0	28
35	Investigating consumers' and informal carers' views and preferences for consumer directed care: A discrete choice experiment. Social Science and Medicine, 2015, 140, 81-94.	1.8	49
36	Public preferences for engagement in Health Technology Assessment decision-making: protocol of a mixed methods study. BMC Medical Informatics and Decision Making, 2015, 15, 52.	1.5	11

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37	Attributes and weights in health care priority setting: A systematic review of what counts and to what extent. Social Science and Medicine, 2015, 146, 41-52.	1.8	112
38	Understanding clinicians' decisions to offer intravenous thrombolytic treatment to patients with acute ischaemic stroke: a protocol for a discrete choice experiment. BMJ Open, 2014, 4, e005612-e005612.	0.8	7
39	A health economic model for the development and evaluation of innovations in aged care: an application to consumer-directed care-study protocol. BMJ Open, 2014, 4, e005788-e005788.	0.8	7
40	Preferences for Oral Anticoagulants in Atrial Fibrillation: a Best–Best Discrete Choice Experiment. Pharmacoeconomics, 2014, 32, 1115-1127.	1.7	63
41	Cognitive Overload? An Exploration of the Potential Impact of Cognitive Functioning in Discrete Choice Experiments with Older People in Health Care. Value in Health, 2014, 17, 655-659.	0.1	31
42	How Important Is Health Status in Defining Quality of Life for Older People? An Exploratory Study of the Views of Older South Australians. Applied Health Economics and Health Policy, 2014, 12, 73-84.	1.0	57
43	A Systematic Review of Stated Preference Studies Reporting Public Preferences for Healthcare Priority Setting. Patient, 2014, 7, 365-386.	1.1	78
44	Reconceptualising the External Validity of Discrete Choice Experiments. Pharmacoeconomics, 2014, 32, 951-965.	1.7	95
45	Choice modelling research in health economics. , 2014, , .		1
46	Constructing Experimental Designs for Discrete-Choice Experiments: Report of the ISPOR Conjoint Analysis Experimental Design Good Research Practices Task Force. Value in Health, 2013, 16, 3-13.	0.1	1,169
47	Best worst discrete choice experiments in health: Methods and an application. Social Science and Medicine, 2013, 76, 74-82.	1.8	103
47	Best worst discrete choice experiments in health: Methods and an application. Social Science and Medicine, 2013, 76, 74-82.  Deriving distributional weights for QALYs through discrete choice experiments. Journal of Health Economics, 2011, 30, 466-478.	1.8	103
	Medicine, 2013, 76, 74-82.  Deriving distributional weights for QALYs through discrete choice experiments. Journal of Health		
48	Medicine, 2013, 76, 74-82.  Deriving distributional weights for QALYs through discrete choice experiments. Journal of Health Economics, 2011, 30, 466-478.  The social value of a QALY: raising the bar or barring the raise?. BMC Health Services Research, 2011, 11,	1.3	91
48	Medicine, 2013, 76, 74-82.  Deriving distributional weights for QALYs through discrete choice experiments. Journal of Health Economics, 2011, 30, 466-478.  The social value of a QALY: raising the bar or barring the raise?. BMC Health Services Research, 2011, 11, 8.  Searchers vs surveyors in estimating the monetary value of a QALY: resolving a nasty dilemma for	0.9	91 68
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48 49 50 51	Medicine, 2013, 76, 74-82.  Deriving distributional weights for QALYs through discrete choice experiments. Journal of Health Economics, 2011, 30, 466-478.  The social value of a QALY: raising the bar or barring the raise?. BMC Health Services Research, 2011, 11, 8.  Searchers vs surveyors in estimating the monetary value of a QALY: resolving a nasty dilemma for NICE. Health Economics, Policy and Law, 2011, 6, 435-447.  Sources of Variation in the Costs of Health Care for Asthma Patients in Australia. Journal of Health Services Research and Policy, 2009, 14, 133-140.  Choice experiments in health: the good, the bad, the ugly and toward a brighter future. Health	1.3 0.9 1.1 0.8	91 68 30 4

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55	Using discrete choice experiments to investigate subject preferences for preventive asthma medication. Respirology, 2007, 12, 127-136.	1.3	58
56	Several methods to investigate relative attribute impact in stated preference experiments. Social Science and Medicine, 2007, 64, 1738-1753.	1.8	180
57	Deleting â€~irrational' responses from discrete choice experiments: a case of investigating or imposing preferences?. Health Economics (United Kingdom), 2006, 15, 797-811.	0.8	281
58	The individual and health sector costs of asthma: the first year of a longitudinal study in New South Wales. Australian and New Zealand Journal of Public Health, 2005, 29, 429-435.	0.8	8
59	Discrete choice experiments in health economics. European Journal of Health Economics, 2005, 6, 314-316.	1.4	13
60	Cost-Effectiveness Analysis of the New South Wales Adult Drug Court Program. Evaluation Review, 2004, 28, 3-27.	0.4	30
61	Deriving welfare measures from discrete choice experiments: inconsistency between current methods and random utility and welfare theory. Health Economics (United Kingdom), 2004, 13, 901-907.	0.8	123
62	Deriving welfare measures from discrete choice experiments: a response to Ryan and Santos Silva. Health Economics (United Kingdom), 2004, 13, 919-924.	0.8	15
63	Discrete choice experiments to measure consumer preferences for health and healthcare. Expert Review of Pharmacoeconomics and Outcomes Research, 2002, 2, 319-326.	0.7	175
64	Diagnosis and prognosis of Australia&s health information for evidence-based policy. Journal of Health Services Research and Policy, 2002, 7, 40-45.	0.8	2