Neil Gupta

List of Publications by Year in descending order

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Version: 2024-02-01

516681 526264 47 872 16 27 citations h-index g-index papers 51 51 51 1282 docs citations times ranked citing authors all docs

| # | Article | IF | Citations |
|----|--|------|-----------|
| 1 | Safety and efficacy of sofosbuvir–velpatasvir–voxilaprevir for re-treatment of chronic hepatitis C virus infection in patients with previous direct-acting antiviral treatment failure in Rwanda (SHARED-3): a single-arm trial. The Lancet Gastroenterology and Hepatology, 2022, 7, 542-551. | 8.1 | 13 |
| 2 | Safety and efficacy of sofosbuvir-velpatasvir to treat chronic hepatitis C virus infection in treatment-naive patients in Rwanda (SHARED-3): a single-arm trial. The Lancet Gastroenterology and Hepatology, 2022, 7, 533-541. | 8.1 | 7 |
| 3 | Addressing the Impact of Noncommunicable Diseases and Injuries (NCDIs) in Ethiopia: Findings and Recommendations from the Ethiopia NCDI Commission Ethiopian Journal of Health Sciences, 2022, 32, 161-180. | 0.4 | 4 |
| 4 | Improved quality of life following directâ€acting antiviral treatment for chronic hepatitis C infection in Rwanda: Results from a clinical trial in subâ€Saharan Africa (the SHARED study). Journal of Viral Hepatitis, 2021, 28, 112-120. | 2.0 | 3 |
| 5 | Risk factors for difficultâ€toâ€treat hepatitis C virus genotype 4r in Rwanda and implications for elimination in subâ€Saharan Africa. Journal of Viral Hepatitis, 2021, 28, 682-686. | 2.0 | 2 |
| 6 | Burden of disease among the world's poorest billion people: An expert-informed secondary analysis of Global Burden of Disease estimates. PLoS ONE, 2021, 16, e0253073. | 2.5 | 37 |
| 7 | Prioritizing Health-Sector Interventions for Noncommunicable Diseases and Injuries in Low- and Lower-Middle Income Countries: National NCDI Poverty Commissions. Global Health, Science and Practice, 2021, 9, 626-639. | 1.7 | 10 |
| 8 | Reframing Non-Communicable Diseases and Injuries for Equity in the Era of Universal Health Coverage: Findings and Recommendations from the Kenya NCDI Poverty Commission. Annals of Global Health, 2021, 87, 3. | 2.0 | 4 |
| 9 | From a Lancet Commission to the NCDI Poverty Network: reaching the poorest billion through integration science. Lancet, The, 2021, 398, 2217-2220. | 13.7 | 4 |
| 10 | Is resistance to direct-acting antivirals in sub-Saharan Africa a threat to HCV elimination? Recommendations for action. Journal of Hepatology, 2020, 72, 583-584. | 3.7 | 6 |
| 11 | Burden of non-communicable diseases from infectious causes in 2017: a modelling study. The Lancet Global Health, 2020, 8, e1489-e1498. | 6.3 | 61 |
| 12 | Role of unsafe medical practices and sexual behaviours in the hepatitis B and C syndemic and HIV co-infection in Rwanda: a cross-sectional study. BMJ Open, 2020, 10, e036711. | 1.9 | 5 |
| 13 | Assessment of Noninvasive Markers of Liver Fibrosis in Patients With Chronic Hepatitis C in Ethiopia. Clinical Liver Disease, 2020, 16, 168-172. | 2.1 | 5 |
| 14 | Care seeking and treatment for hepatitis C infection in Rwanda: A qualitative study of patient experiences. Global Public Health, 2020, 15, 1778-1788. | 2.0 | 1 |
| 15 | The Lancet NCDI Poverty Commission: bridging a gap in universal health coverage for the poorest billion. Lancet, The, 2020, 396, 991-1044. | 13.7 | 165 |
| 16 | Availability of equipment and medications for non-communicable diseases and injuries at public first-referral level hospitals: a cross-sectional analysis of service provision assessments in eight low-income countries. BMJ Open, 2020, 10, e038842. | 1.9 | 15 |
| 17 | Converging pandemics: implications of COVID-19 for the viral hepatitis response in sub-Saharan Africa. The Lancet Gastroenterology and Hepatology, 2020, 5, 634-636. | 8.1 | 15 |
| 18 | Safety and Efficacy of Limited Laboratory Monitoring for Hepatitis C Treatment: A Blinded Clinical Trial in Rwanda. Hepatology Communications, 2020, 4, 569-576. | 4.3 | 0 |

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|----|---|-----|-----------|
| 19 | Crohn's disease in low and lower-middle income countries: A scoping review. World Journal of Gastroenterology, 2020, 26, 6891-6908. | 3.3 | 17 |
| 20 | Integration of Chronic Oncology Services in Noncommunicable Disease Clinic in Rural Rwanda. Annals of Global Health, 2020, 86, 33. | 2.0 | 1 |
| 21 | Risk factors for viral hepatitis C infection in Rwanda: results from a nationwide screening program. BMC Infectious Diseases, 2019, 19, 688. | 2.9 | 16 |
| 22 | Screening a nation for hepatitis C virus elimination: a cross-sectional study on prevalence of hepatitis C and associated risk factors in the Rwandan general population. BMJ Open, 2019, 9, e029743. | 1.9 | 13 |
| 23 | Rwanda launches a 5-year national hepatitis C elimination plan: A landmark in sub-Saharan Africa. Journal of Hepatology, 2019, 70, 1043-1045. | 3.7 | 32 |
| 24 | Four delays of child mortality in Rwanda: a mixed methods analysis of verbal social autopsies. BMJ Open, 2019, 9, e027435. | 1.9 | 16 |
| 25 | Treatment of chronic hepatitis C virus infection in Rwanda with ledipasvir–sofosbuvir (SHARED): a single-arm trial. The Lancet Gastroenterology and Hepatology, 2019, 4, 119-126. | 8.1 | 64 |
| 26 | Is hepatitis C elimination possible in sub-Saharan Africa? The case of Rwanda. The Lancet Gastroenterology and Hepatology, 2018, 3, 302-303. | 8.1 | 7 |
| 27 | Community-Based Accompaniment and the Impact of Distance for HIV Patients Newly Initiated on Antiretroviral Therapy: Early Outcomes and Clinic Visit Adherence in Rural Rwanda. AIDS and Behavior, 2018, 22, 77-85. | 2.7 | 19 |
| 28 | The Impact of a Community-Based Intervention Including a Monthly Food Ration on Food Insecurity Among HIV-Positive Adults During the First Year of Antiretroviral Therapy. AIDS and Behavior, 2018, 22, 154-163. | 2.7 | 3 |
| 29 | Exploring Drivers of Infant Deaths in Rural Rwanda Through Verbal Social Autopsy. Annals of Global Health, 2018, 83, 756. | 2.0 | 3 |
| 30 | Causes of death and predictors of childhood mortality in Rwanda: a matched case-control study using verbal social autopsy. BMC Public Health, 2018, 18, 1378. | 2.9 | 20 |
| 31 | Controlling hepatitis C in Rwanda: a framework for a national response. Bulletin of the World Health Organization, 2018, 96, 51-58. | 3.3 | 23 |
| 32 | Ten-year trends of syphilis in sero-surveillance of pregnant women in Rwanda and correlates of syphilis-HIV co-infection. International Journal of STD and AIDS, 2017, 28, 45-53. | 1.1 | 12 |
| 33 | "Waiting for DAAs― A retrospective chart review of patients with untreated hepatitis C in Rwanda. PLoS ONE, 2017, 12, e0174148. | 2.5 | 9 |
| 34 | A Novel Combined Mother-Infant Clinic to Optimize Post-Partum Maternal Retention, Service Utilization, and Linkage to Services in HIV Care in Rural Rwanda. International Journal of MCH and AIDS, 2017, 6, 36-45. | 0.8 | 9 |
| 35 | Referral patterns and predictors of referral delays for patients with traumatic injuries in rural Rwanda. Surgery, 2016, 160, 1636-1644. | 1.9 | 37 |
| 36 | Five-year Outcomes Among Children Receiving Antiretroviral Therapy in a Community-based Accompaniment Program in Rural Rwanda. Pediatric Infectious Disease Journal, 2016, 35, 1222-1224. | 2.0 | 2 |

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|----|--|------|-----------|
| 37 | Community-Based Accompaniment Mitigates Predictors of Negative Outcomes for Adults on Antiretroviral Therapy in Rural Rwanda. AIDS and Behavior, 2016, 20, 1009-1016. | 2.7 | 14 |
| 38 | Endemic diabetes in the world's poorest people. Lancet Diabetes and Endocrinology, the, 2015, 3, 402-403. | 11.4 | 25 |
| 39 | Estimation of the size of the female sex worker population in Rwanda using three different methods. International Journal of STD and AIDS, 2015, 26, 810-814. | 1.1 | 28 |
| 40 | Leveraging the lessons learned from HIV/AIDS for coordinated chronic care delivery in resource-poor settings. Healthcare, 2015, 3, 215-220. | 1.3 | 28 |
| 41 | Integrated care as a means to improve primary care delivery for adults and adolescents in the developing world: a critical analysis of Integrated Management of Adolescent and Adult Illness (IMAI). BMC Medicine, 2014, 12, 6. | 5.5 | 24 |
| 42 | Strengthening of primary-care delivery in the developing world: IMAI and the need for integrated models of care. The Lancet Global Health, 2013 , 1 , $e321$ - $e323$. | 6.3 | 7 |
| 43 | Baseline assessment of adult and adolescent primary care delivery in Rwanda: an opportunity for quality improvement. BMC Health Services Research, 2013, 13, 518. | 2.2 | 40 |
| 44 | Clinical Outcomes Among HIV-Positive Adolescents Attending an Integrated and Comprehensive Adolescent-Focused HIV Care Program in Rural Rwanda. Journal of HIV/AIDS and Social Services, 2013, 12, 437-450. | 0.7 | 7 |
| 45 | Clinical Outcomes of a Comprehensive Integrated Program for HIV-Exposed Infants. Journal of Acquired Immune Deficiency Syndromes (1999), 2013, 62, e109-e114. | 2.1 | 6 |
| 46 | Early introduction of water and complementary feeding and nutritional status of children in northern Senegal. Public Health Nutrition, 2007, 10, 1299-1304. | 2.2 | 20 |
| 47 | The role of integrated home-based care in patient adherence to antiretroviral therapy. Revista Da Sociedade Brasileira De Medicina Tropical, 2005, 38, 241-245. | 0.9 | 13 |