Marcelo B P Amato

List of Publications by Year in Descending Order

139 papers	13,733 citations	43 h-index	117 g-index
146 ext. papers	16,565 ext. citations	8.2 avg, IF	5.9 L-index

#	Paper	IF	Citations
139	Repeated endo-tracheal tube disconnection generates pulmonary edema in a model of volume overload: an experimental study.. *Critical Care*, **2022**, 26, 47	10.8	0
138	Electrical impedance tomography in pediatric patients with COVID-19, the first reports. *BMC Pulmonary Medicine*, **2021**, 21, 357	3.5	0
137	Electrical impedance tomography in pulmonary arterial hypertension. *PLoS ONE*, **2021**, 16, e0248214	3.7	2
136	Positive End-Expiratory Pressure, Pleural Pressure, and Regional Compliance during Pronation: An Experimental Study. *American Journal of Respiratory and Critical Care Medicine*, **2021**, 203, 1266-1274	10.2	14
135	Pleural Pressure Targeted Positive Airway Pressure Improves Cardiopulmonary Function in Spontaneously Breathing Patients With Obesity. *Chest*, **2021**, 159, 2373-2383	5.3	2
134	Response to Ventilator Adjustments for Predicting Acute Respiratory Distress Syndrome Mortality. Driving Pressure versus Oxygenation. *Annals of the American Thoracic Society*, **2021**, 18, 857-864	4.7	6
133	Role of Positive End-Expiratory Pressure and Regional Transpulmonary Pressure in Asymmetrical Lung Injury. *American Journal of Respiratory and Critical Care Medicine*, **2021**, 203, 969-976	10.2	3
132	Reply to Camporota : The 4DPRR Index and Mechanical Power: A Step Ahead or 4 Steps Backward?. *American Journal of Respiratory and Critical Care Medicine*, **2021**, 204, 492-493	10.2	
131	Ventilatory Variables and Mechanical Power in Patients with Acute Respiratory Distress Syndrome. *American Journal of Respiratory and Critical Care Medicine*, **2021**, 204, 303-311	10.2	30
130	Intraoperative open lung condition and postoperative pulmonary complications. A secondary analysis of iPROVE and iPROVE-O2 trials. *Acta Anaesthesiologica Scandinavica*, **2021**,	1.9	3
129	Lung Recruitment and Pendelluft Resolution after Less Invasive Surfactant Administration in a Preterm Infant. *American Journal of Respiratory and Critical Care Medicine*, **2020**, 202, 766-769	10.2	3
128	Driving Pressure-limited Strategy for Patients with Acute Respiratory Distress Syndrome. A Pilot Randomized Clinical Trial. *Annals of the American Thoracic Society*, **2020**, 17, 596-604	4.7	14
127	A lung rescue team improves survival in obesity with acute respiratory distress syndrome. *Critical Care*, **2020**, 24, 4	10.8	29
126	Neurally adjusted ventilatory assist vs. pressure support to deliver protective mechanical ventilation in patients with acute respiratory distress syndrome: a randomized crossover trial. *Annals of Intensive Care*, **2020**, 10, 18	8.9	3
125	High Pleural Pressure Prevents Alveolar Overdistension and Hemodynamic Collapse in ARDS with Class III Obesity. *American Journal of Respiratory and Critical Care Medicine*, **2020**,	10.2	11
124	Comment on: Effect of inspiratory rise time on sputum movement during ventilator hyperinflation in a test lung model. *Physiotherapy*, **2019**, 105, 293-294	3	0
123	Heterogeneous effects of alveolar recruitment in acute respiratory distress syndrome: a machine learning reanalysis of the Alveolar Recruitment for Acute Respiratory Distress Syndrome Trial. *British Journal of Anaesthesia*, **2019**, 123, 88-95	5.4	20

122	Pendelluft Detection Using Electrical Impedance Tomography in an Infant. Keep Those Images in Mind. *American Journal of Respiratory and Critical Care Medicine*, **2019**, 200, 1427-1429	10.2	7
121	Regional Ventilation Displayed by Electrical Impedance Tomography as an Incentive to Decrease Positive End-Expiratory Pressure. *American Journal of Respiratory and Critical Care Medicine*, **2019**, 200, 933-937	10.2	22
120	Lung Recruitment in Obese Patients with Acute Respiratory Distress Syndrome. *Anesthesiology*, **2019**, 130, 791-803	4.3	39
119	Impact of spontaneous breathing during mechanical ventilation in acute respiratory distress syndrome. *Current Opinion in Critical Care*, **2019**, 25, 192-198	3.5	31
118	Global and Regional Respiratory Mechanics During Robotic-Assisted Laparoscopic Surgery: A Randomized Study. *Anesthesia and Analgesia*, **2019**, 129, 1564-1573	3.9	12
117	Individualizing Intraoperative Ventilation: Reply. *Anesthesiology*, **2019**, 131, 448-449	4.3	
116	Lung Recruitment and Positive End-Expiratory Pressure Titration in Patients With Acute Respiratory Distress Syndrome-Reply. *JAMA - Journal of the American Medical Association*, **2018**, 319, 934-935	27.4	1
115	High Positive End-Expiratory Pressure Renders Spontaneous Effort Noninjurious. *American Journal of Respiratory and Critical Care Medicine*, **2018**, 197, 1285-1296	10.2	90
114	Esophageal Manometry and Regional Transpulmonary Pressure in Lung Injury. *American Journal of Respiratory and Critical Care Medicine*, **2018**, 197, 1018-1026	10.2	97
113	Continuous Negative Abdominal Pressure Reduces Ventilator-induced Lung Injury in a Porcine Model. *Anesthesiology*, **2018**, 129, 163-172	4.3	13
112	High Positive End-Expiratory Pressure Allows Extubation of an Obese Patient. *American Journal of Respiratory and Critical Care Medicine*, **2018**, 198, 524-525	10.2	7
111	Understanding spontaneous vs. ventilator breaths: impact and monitoring. *Intensive Care Medicine*, **2018**, 44, 2235-2238	14.5	18
110	Does Regional Lung Strain Correlate With Regional Inflammation in Acute Respiratory Distress Syndrome During Nonprotective Ventilation? An Experimental Porcine Study. *Critical Care Medicine*, **2018**, 46, e591-e599	1.4	26
109	Continuous Negative Abdominal Pressure Recruits Lungs at Lower Distending Pressures. *American Journal of Respiratory and Critical Care Medicine*, **2018**, 197, 534-537	10.2	5
108	Estimation of Stroke Volume and Stroke Volume Changes by Electrical Impedance Tomography. *Anesthesia and Analgesia*, **2018**, 126, 102-110	3.9	12
107	Reverse Triggering Causes an Injurious Inflation Pattern during Mechanical Ventilation. *American Journal of Respiratory and Critical Care Medicine*, **2018**, 198, 1096-1099	10.2	23
106	Airway Clearance With an Optimized Mechanical Insufflation-Exsufflation Maneuver. *Respiratory Care*, **2018**, 63, 1214-1222	2.1	8
105	Continuous negative abdominal pressure: mechanism of action and comparison with prone position. *Journal of Applied Physiology*, **2018**, 125, 107-116	3.7	5

104	Reply to Morales-Quinteros et al.: Precision Medicine for Extracorporeal CO Removal for Acute Respiratory Distress Syndrome: CO Physiological Considerations. *American Journal of Respiratory and Critical Care Medicine*, **2018**, 197, 1091-1092	10.2	
103	Should the ART trial change our practice?. *Journal of Thoracic Disease*, **2018**, 10, E224-E226	2.6	
102	Individual Positive End-expiratory Pressure Settings Optimize Intraoperative Mechanical Ventilation and Reduce Postoperative Atelectasis. *Anesthesiology*, **2018**, 129, 1070-1081	4.3	103
101	Quantitative Dual-Energy Computed Tomography Predicts Regional Perfusion Heterogeneity in a Model of Acute Lung Injury. *Journal of Computer Assisted Tomography*, **2018**, 42, 866-872	2.2	7
100	Volume-controlled Ventilation Does Not Prevent Injurious Inflation during Spontaneous Effort. *American Journal of Respiratory and Critical Care Medicine*, **2017**, 196, 590-601	10.2	80
99	Chest electrical impedance tomography examination, data analysis, terminology, clinical use and recommendations: consensus statement of the TRanslational EIT developmeNt stuDy group. *Thorax*, **2017**, 72, 83-93	7.3	348
98	Transpulmonary Pressure Describes Lung Morphology During Decremental Positive End-Expiratory Pressure Trials in Obesity. *Critical Care Medicine*, **2017**, 45, 1374-1381	1.4	57
97	Monitoring of Pneumothorax Appearance with Electrical Impedance Tomography during Recruitment Maneuvers. *American Journal of Respiratory and Critical Care Medicine*, **2017**, 195, 1070-1073	10.2	12
96	An Official American Thoracic Society/European Society of Intensive Care Medicine/Society of Critical Care Medicine Clinical Practice Guideline: Mechanical Ventilation in Adult Patients with Acute Respiratory Distress Syndrome. *American Journal of Respiratory and Critical Care Medicine*, **2017**, 195, 1253-1263	10.2	674
95	The Increasing Call for Protective Ventilation During Anesthesia. *JAMA Surgery*, **2017**, 152, 893-894	5.4	7
94	Mapping Regional Differences of Local Pressure-Volume Curves With Electrical Impedance Tomography. *Critical Care Medicine*, **2017**, 45, 679-686	1.4	16
93	Fifty Years of Research in ARDS. Respiratory Mechanics in Acute Respiratory Distress Syndrome. *American Journal of Respiratory and Critical Care Medicine*, **2017**, 196, 822-833	10.2	82
92	Effect of Intensive vs Moderate Alveolar Recruitment Strategies Added to Lung-Protective Ventilation on Postoperative Pulmonary Complications: A Randomized Clinical Trial. *JAMA - Journal of the American Medical Association*, **2017**, 317, 1422-1432	27.4	52
91	Effect of Lung Recruitment and Titrated Positive End-Expiratory Pressure (PEEP) vs Low PEEP on Mortality in Patients With Acute Respiratory Distress Syndrome: A Randomized Clinical Trial. *JAMA - Journal of the American Medical Association*, **2017**, 318, 1335-1345	27.4	427
90	Neurally Adjusted Ventilatory Assist (NAVA) or Pressure Support Ventilation (PSV) during spontaneous breathing trials in critically ill patients: a crossover trial. *BMC Pulmonary Medicine*, **2017**, 17, 139	3.5	31
89	Alveolar Recruitment Strategies After Cardiac Surgery-Reply. *JAMA - Journal of the American Medical Association*, **2017**, 318, 668-669	27.4	
88	Applying Precision Medicine to Trial Design Using Physiology. Extracorporeal CO Removal for Acute Respiratory Distress Syndrome. *American Journal of Respiratory and Critical Care Medicine*, **2017**, 196, 558-568	10.2	35
87	Fifty Years of Research in ARDS. Spontaneous Breathing during Mechanical Ventilation. Risks, Mechanisms, and Management. *American Journal of Respiratory and Critical Care Medicine*, **2017**, 195, 985-992	10.2	166

86	Physiologic effects of alveolar recruitment and inspiratory pauses during moderately-high-frequency ventilation delivered by a conventional ventilator in a severe lung injury model. *PLoS ONE*, **2017**, 12, e0185769	3.7	1
85	Understanding recruitment maneuvers. *Intensive Care Medicine*, **2016**, 42, 908-911	14.5	22
84	The Recruitability Paradox. *American Journal of Respiratory and Critical Care Medicine*, **2016**, 193, 1192-5	10.2	12
83	Association between driving pressure and development of postoperative pulmonary complications in patients undergoing mechanical ventilation for general anaesthesia: a meta-analysis of individual patient data. *Lancet Respiratory Medicine,the*, **2016**, 4, 272-80	35.1	264
82	Experimental blunt chest trauma--cardiorespiratory effects of different mechanical ventilation strategies with high positive end-expiratory pressure: a randomized controlled study. *BMC Anesthesiology*, **2016**, 16, 3	2.4	4
81	Open Lung Approach for the Acute Respiratory Distress Syndrome: A Pilot, Randomized Controlled Trial. *Critical Care Medicine*, **2016**, 44, 32-42	1.4	159
80	There is no cephalocaudal gradient of computed tomography densities or lung behavior in supine patients with acute respiratory distress syndrome. *Acta Anaesthesiologica Scandinavica*, **2016**, 60, 767-79	1.9	5
79	Imaging in acute respiratory distress syndrome. *Intensive Care Medicine*, **2016**, 42, 686-698	14.5	79
78	Spontaneous Effort During Mechanical Ventilation: Maximal Injury With Less Positive End-Expiratory Pressure. *Critical Care Medicine*, **2016**, 44, e678-88	1.4	102
77	Interval Simulated Annealing applied to Electrical Impedance Tomography image reconstruction with fast objective function evaluation. *Computers and Mathematics With Applications*, **2016**, 72, 1230-1243	2.7	20
76	First-time imaging of effects of inspired oxygen concentration on regional lung volumes and breathing pattern during hypergravity. *European Journal of Applied Physiology*, **2015**, 115, 353-63	3.4	7
75	Lung inflammation persists after 27 hours of protective Acute Respiratory Distress Syndrome Network Strategy and is concentrated in the nondependent lung. *Critical Care Medicine*, **2015**, 43, e123-32	7.4	25
74	Real-time ventilation and perfusion distributions by electrical impedance tomography during one-lung ventilation with capnothorax. *Acta Anaesthesiologica Scandinavica*, **2015**, 59, 354-68	1.9	36
73	Parameter estimation of an artificial respiratory system under mechanical ventilation following a noisy regime. *Research on Biomedical Engineering*, **2015**, 31, 343-351	1.2	4
72	Driving pressure as a key ventilation variable. *New England Journal of Medicine*, **2015**, 372, 2072	59.2	6
71	Driving pressure and survival in the acute respiratory distress syndrome. *New England Journal of Medicine*, **2015**, 372, 747-55	59.2	1227
70	Correlation of lung collapse and gas exchange - a computer tomographic study in sheep and pigs with atelectasis in otherwise normal lungs. *PLoS ONE*, **2015**, 10, e0135272	3.7	8
69	Effects of alveolar recruitment maneuvers on clinical outcomes in patients with acute respiratory distress syndrome: a systematic review and meta-analysis. *Intensive Care Medicine*, **2014**, 40, 1227-40	14.5	78

68	Cycling-off modes during pressure support ventilation: effects on breathing pattern, patient effort, and comfort. *Journal of Critical Care*, **2014**, 29, 380-5	4	7
67	Moderately high frequency ventilation with a conventional ventilator allows reduction of tidal volume without increasing mean airway pressure. *Intensive Care Medicine Experimental*, **2014**, 2, 13	3.7	2
66	Lung reaeration and reventilation after aspiration of pleural effusions. A study using electrical impedance tomography. *Annals of the American Thoracic Society*, **2014**, 11, 186-91	4.7	16
65	Ultra-protective tidal volume: how low should we go?. *Critical Care*, **2013**, 17, 127	10.8	9
64	Expression of acute-phase cytokines, surfactant proteins, and epithelial apoptosis in small airways of human acute respiratory distress syndrome. *Journal of Critical Care*, **2013**, 28, 111.e9-111.e15	4	31
63	Spontaneous effort causes occult pendelluft during mechanical ventilation. *American Journal of Respiratory and Critical Care Medicine*, **2013**, 188, 1420-7	10.2	272
62	The new definition for acute lung injury and acute respiratory distress syndrome: is there room for improvement?. *Current Opinion in Critical Care*, **2013**, 19, 16-23	3.5	46
61	Electrical Impedance Tomography in Critically Ill Patients. *Clinical Pulmonary Medicine*, **2013**, 20, 178-186	0.3	3
60	Regional lung derecruitment and inflammation during 16 hours of mechanical ventilation in supine healthy sheep. *Anesthesiology*, **2013**, 119, 156-65	4.3	14
59	Bedside estimation of nonaerated lung tissue using blood gas analysis. *Critical Care Medicine*, **2013**, 41, 732-43	1.4	27
58	Experimental study on the efficiency and safety of the manual hyperinflation maneuver as a secretion clearance technique. *Jornal Brasileiro De Pneumologia*, **2013**, 39, 205-13	1.1	9
57	Evaluation of manual resuscitators used in ICUs in Brazil. *Jornal Brasileiro De Pneumologia*, **2013**, 39, 595-603	1.1	1
56	Assessment of regional lung ventilation by electrical impedance tomography in a patient with unilateral bronchial stenosis and a history of tuberculosis. *Jornal Brasileiro De Pneumologia*, **2013**, 39, 742-6	1.1	2
55	Image reconstruction using interval simulated annealing in electrical impedance tomography. *IEEE Transactions on Biomedical Engineering*, **2012**, 59, 1861-70	5	30
54	How large is the lung recruitability in early acute respiratory distress syndrome: a prospective case series of patients monitored by computed tomography. *Critical Care*, **2012**, 16, R4	10.8	63
53	Effects of arterial oxygen tension and cardiac output on venous saturation: a mathematical modeling approach. *Clinics*, **2012**, 67, 897-900	2.3	9
52	Goal-oriented respiratory management for critically ill patients with acute respiratory distress syndrome. *Critical Care Research and Practice*, **2012**, 2012, 952168	1.5	13
51	Extracorporeal membrane oxygenation in severe hypoxemia: time for reappraisal?. *Jornal Brasileiro De Pneumologia*, **2012**, 38, 7-12	1.1	9

50	First-year experience of a Brazilian tertiary medical center in supporting severely ill patients using extracorporeal membrane oxygenation. *Clinics*, **2012**, 67, 1157-63	2.3	20
49	Bedside estimation of recruitable alveolar collapse and hyperdistension by electrical impedance tomography **2012**, 165-170		1
48	Computed tomographic assessment of lung weights in trauma patients with early posttraumatic lung dysfunction. *Critical Care*, **2011**, 15, R71	10.8	12
47	Extrapolation in the analysis of lung aeration by computed tomography: a validation study. *Critical Care*, **2011**, 15, R279	10.8	15
46	Follow-up after acute respiratory distress syndrome caused by influenza a (H1N1) virus infection. *Clinics*, **2011**, 66, 933-7	2.3	30
45	Small airway remodeling in acute respiratory distress syndrome: a study in autopsy lung tissue. *Critical Care*, **2011**, 15, R4	10.8	45
44	Yoga respiratory training improves respiratory function and cardiac sympathovagal balance in elderly subjects: a randomised controlled trial. *BMJ Open*, **2011**, 1, e000085	3	71
43	Can heterogeneity in ventilation be good?. *Critical Care*, **2010**, 14, 134	10.8	6
42	Extrapolation from ten sections can make CT-based quantification of lung aeration more practicable. *Intensive Care Medicine*, **2010**, 36, 1836-44	14.5	43
41	Dynamic imaging in electrical impedance tomography of the human chest with online transition matrix identification. *IEEE Transactions on Biomedical Engineering*, **2010**, 57, 422-31	5	30
40	Prolonged recruitment manoeuvre improves lung function with less ultrastructural damage in experimental mild acute lung injury. *Respiratory Physiology and Neurobiology*, **2009**, 169, 271-81	2.8	28
39	A comparison of methods to identify open-lung PEEP. *Intensive Care Medicine*, **2009**, 35, 740-7	14.5	40
38	Bedside estimation of recruitable alveolar collapse and hyperdistension by electrical impedance tomography. *Intensive Care Medicine*, **2009**, 35, 1132-7	14.5	246
37	Pulmonary lesion induced by low and high positive end-expiratory pressure levels during protective ventilation in experimental acute lung injury. *Critical Care Medicine*, **2009**, 37, 1011-7	1.4	33
36	Electrical impedance tomography. *Current Opinion in Critical Care*, **2009**, 15, 18-24	3.5	101
35	Fuzzy modeling of electrical impedance tomography images of the lungs. *Clinics*, **2008**, 63, 363-70	2.3	9
34	Three-dimensional electrical impedance tomography: a topology optimization approach. *IEEE Transactions on Biomedical Engineering*, **2008**, 55, 531-40	5	21
33	Real-time detection of pneumothorax using electrical impedance tomography. *Critical Care Medicine*, **2008**, 36, 1230-8	1.4	129

32	Image reconstruction affects computer tomographic assessment of lung hyperinflation. *Intensive Care Medicine*, **2008**, 34, 2044-53	14.5	34
31	Ventilation patterns influence airway secretion movement. *Respiratory Care*, **2008**, 53, 1287-94	2.1	30
30	Ventilação mecânica na lesão pulmonar aguda / síndrome do desconforto respiratório agudo. *Revista Brasileira De Terapia Intensiva*, **2007**, 19, 374-383	1.2	
29	Is Maximal Lung Recruitment Worth It?. *American Journal of Respiratory and Critical Care Medicine*, **2006**, 174, 1159a-1159a	10.2	
28	Lung recruitment in patients with ARDS. *New England Journal of Medicine*, **2006**, 355, 319-20; author reply 321-2	59.2	27
27	Reversibility of lung collapse and hypoxemia in early acute respiratory distress syndrome. *American Journal of Respiratory and Critical Care Medicine*, **2006**, 174, 268-78	10.2	1445
26	Severe acute respiratory distress syndrome, leptospirosis, and lung protective strategies. *Critical Care Medicine*, **2006**, 34, 2703-4; author reply 2704	1.4	3
25	Pulmonary capillary pressure in pulmonary hypertension. *Critical Care*, **2005**, 9, R132-8	10.8	12
24	Paradoxical responses to positive end-expiratory pressure in patients with airway obstruction during controlled ventilation. *Critical Care Medicine*, **2005**, 33, 1519-28	1.4	110
23	Mechanical ventilation in acute respiratory failure: recruitment and high positive end-expiratory pressure are necessary. *Current Opinion in Critical Care*, **2005**, 11, 18-28	3.5	73
22	Positive end-expiratory pressure prevents lung mechanical stress caused by recruitment/derecruitment. *Journal of Applied Physiology*, **2005**, 98, 53-61	3.7	72
21	Acute vasodilator test in pulmonary arterial hypertension: evaluation of two response criteria. *Vascular Pharmacology*, **2005**, 43, 143-7	5.9	29
20	Ação da adenosina na circulação pulmonar de pacientes com hipertensão pulmonar primária. *Jornal Brasileiro De Pneumologia*, **2005**, 31, 20-24	1.1	1
19	N-terminal-pro-brain natriuretic peptide as a haemodynamic marker in idiopathic pulmonary arterial hypertension. *European Respiratory Journal*, **2005**, 25, 509-13	13.6	48
18	Imbalances in regional lung ventilation: a validation study on electrical impedance tomography. *American Journal of Respiratory and Critical Care Medicine*, **2004**, 169, 791-800	10.2	433
17	Electrical impedance tomography using the extended Kalman filter. *IEEE Transactions on Biomedical Engineering*, **2004**, 51, 72-81	5	63
16	Randomized, prospective trial of oxygen, continuous positive airway pressure, and bilevel positive airway pressure by face mask in acute cardiogenic pulmonary edema. *Critical Care Medicine*, **2004**, 32, 2407-15	1.4	216
15	Lung recruitment maneuvers in acute respiratory distress syndrome. *Respiratory Care Clinics of North America*, **2003**, 9, 401-18, vii		26

14	Effects of tracheotomy on respiratory mechanics in spontaneously breathing patients. *European Respiratory Journal*, **2002**, 20, 112-7	13.6	32
13	Set positive end-expiratory pressure during protective ventilation affects lung injury. *Anesthesiology*, **2002**, 97, 682-92	4.3	598
12	Mask mechanics and leak dynamics during noninvasive pressure support ventilation: a bench study. *Intensive Care Medicine*, **2001**, 27, 1887-91	14.5	79
11	Different low constant flows can equally determine the lower inflection point in acute respiratory distress syndrome patients. *Artificial Organs*, **2001**, 25, 882-9	2.6	3
10	Repetitive high-pressure recruitment maneuvers required to maximally recruit lung in a sheep model of acute respiratory distress syndrome. *Critical Care Medicine*, **2001**, 29, 1579-86	1.4	89
9	Regional pressure volume curves by electrical impedance tomography in a model of acute lung injury. *Critical Care Medicine*, **2000**, 28, 178-83	1.4	87
8	Use of recruitment maneuvers and high-positive end-expiratory pressure in a patient with acute respiratory distress syndrome. *Critical Care Medicine*, **2000**, 28, 1210-6	1.4	95
7	Effect of a protective-ventilation strategy on mortality in the acute respiratory distress syndrome. *New England Journal of Medicine*, **1998**, 338, 347-54	59.2	3183
6	Temporal hemodynamic effects of permissive hypercapnia associated with ideal PEEP in ARDS. *American Journal of Respiratory and Critical Care Medicine*, **1997**, 156, 1458-66	10.2	113
5	Beneficial effects of the "open lung approach" with low distending pressures in acute respiratory distress syndrome. A prospective randomized study on mechanical ventilation. *American Journal of Respiratory and Critical Care Medicine*, **1995**, 152, 1835-46	10.2	499
4	Volume-assured pressure support ventilation (VAPSV). A new approach for reducing muscle workload during acute respiratory failure. *Chest*, **1992**, 102, 1225-34	5.3	91
3	Respiratory failure caused by adiaspiromycosis. *Chest*, **1990**, 97, 1171-5	5.3	19
2	Obstructive respiratory failure in cicatricial pemphigoid. *Thorax*, **1989**, 44, 601-2	7.3	13
1	Concurrent Churg-Strauss syndrome and temporal arteritis in a young patient with pulmonary nodules. *The American Review of Respiratory Disease*, **1989**, 139, 1539-42		34