

Brendan Mulhern

List of Publications by Year in descending order

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46
papers

2,369
citations

331670

21
h-index

214800

47
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48
all docs

48
docs citations

48
times ranked

4801
citing authors

#	ARTICLE	IF	CITATIONS
1	Valuing health-related quality of life: An EQ-5D-5L value set for England. Health Economics (United Kingdom), 2010, 30, 107-120.	1.7	863
2	The effectiveness of web-based interventions designed to decrease alcohol consumption – A systematic review. Preventive Medicine, 2008, 47, 17-26.	3.4	205
3	The feasibility and effectiveness of a web-based personalised feedback and social norms alcohol intervention in UK university students: A randomised control trial. Addictive Behaviors, 2008, 33, 1192-1198.	3.0	130
4	The Young Person's CORE: Development of a brief outcome measure for young people. Counselling and Psychotherapy Research, 2009, 9, 160-168.	3.2	95
5	Using generic preference-based measures in mental health: psychometric validity of the EQ-5D and SF-6D. British Journal of Psychiatry, 2014, 205, 236-243.	2.8	95
6	Comparing the UK EQ-5D-3L and English EQ-5D-5L Value Sets. Pharmacoeconomics, 2018, 36, 699-713.	3.3	74
7	Estimating Preference-Based Single Index Measures for Dementia Using DEMQOL and DEMQOL-Proxy. Value in Health, 2012, 15, 346-356.	0.3	72
8	Valuation of EuroQol Five-Dimensional Questionnaire, Youth Version (EQ-5D-Y) and EuroQol Five-Dimensional Questionnaire, Three-Level Version (EQ-5D-3L) Health States: The Impact of Wording and Perspective. Value in Health, 2018, 21, 1291-1298.	0.3	70
9	Binary Choice Health State Valuation and Mode of Administration: Head-to-Head Comparison of Online and CAPI. Value in Health, 2013, 16, 104-113.	0.3	61
10	New methods for modelling EQ-5D-5L value sets: An application to English data. Health Economics (United Kingdom), 2018, 27, 23-38.	1.7	61
11	The development of a QALY measure for epilepsy: NEWQOL-6D. Epilepsy and Behavior, 2012, 24, 36-43.	1.7	52
12	One Method, Many Methodological Choices: A Structured Review of Discrete-Choice Experiments for Health State Valuation. Pharmacoeconomics, 2019, 37, 29-43.	3.3	51
13	Improving the Measurement of QALYs in Dementia: Developing Patient- and Carer-Reported Health State Classification Systems Using Rasch Analysis. Value in Health, 2012, 15, 323-333.	0.3	37
14	Estimating a Dutch Value Set for the Pediatric Preference-Based CHU9D Using a Discrete Choice Experiment with Duration. Value in Health, 2018, 21, 1234-1242.	0.3	35
15	The Impact of Different DCE-Based Approaches When Anchoring Utility Scores. Pharmacoeconomics, 2016, 34, 805-814.	3.3	32
16	Comparing the measurement equivalence of EQ-5D-5L across different modes of administration. Health and Quality of Life Outcomes, 2015, 13, 191.	2.4	30
17	SF-6D population norms for the Hong Kong Chinese general population. Quality of Life Research, 2018, 27, 2349-2359.	3.1	29
18	Systematic Review of Conceptual, Age, Measurement and Valuation Considerations for Generic Multidimensional Childhood Patient-Reported Outcome Measures. Pharmacoeconomics, 2022, 40, 379-431.	3.3	28

#	ARTICLE	IF	CITATIONS
19	Comparison of General Population, Patient, and Carer Utility Values for Dementia Health States. Medical Decision Making, 2015, 35, 68-80.	2.4	27
20	Using Discrete Choice Experiments with Duration to Model EQ-5D-5L Health State Preferences. Medical Decision Making, 2017, 37, 285-297.	2.4	27
21	A new method for valuing health: directly eliciting personal utility functions. European Journal of Health Economics, 2019, 20, 257-270.	2.8	26
22	Comparing Generic and Condition-Specific Preference-Based Measures in Epilepsy: EQ-5D-3L and NEWQOL-6D. Value in Health, 2017, 20, 687-693.	0.3	23
23	Valuing Health Using Time Trade-Off and Discrete Choice Experiment Methods: Does Dimension Order Impact on Health State Values?. Value in Health, 2016, 19, 210-217.	0.3	21
24	Measurement invariance of the Functional Assessment of Cancer Therapyâ€”Colorectal quality-of-life instrument among modes of administration. Quality of Life Research, 2013, 22, 1415-1426.	3.1	19
25	Using a Discrete-Choice Experiment Involving Cost to Value a Classification System Measuring the Quality-of-Life Impact of Self-Management for Diabetes. Value in Health, 2018, 21, 69-77.	0.3	17
26	Responsiveness was similar between direct and mapped SF-6D inÂcolorectal cancer patients who declined. Journal of Clinical Epidemiology, 2014, 67, 219-227.	5.0	16
27	Estimating a Preference-Based Single Index Measuring the Quality-of-Life Impact of Self-Management for Diabetes. Medical Decision Making, 2018, 38, 699-707.	2.4	16
28	An Empirical Study of Two Alternative Comparators for Use in Time Trade-Off Studies. Value in Health, 2016, 19, 53-59.	0.3	14
29	Developing a dementia-specific preference-Âbased quality of life measure (AD-5D) in Australia: a valuation study protocol. BMJ Open, 2018, 8, e018996.	1.9	14
30	Valuations of epilepsy-specific health states: a comparison of patients with epilepsy and the general population. Epilepsy and Behavior, 2014, 36, 12-17.	1.7	13
31	Is Dimension Order Important when Valuing Health States Using Discrete Choice Experiments Including Duration?. Pharmacoeconomics, 2017, 35, 439-451.	3.3	11
32	A systematic review of utility values in children with cerebral palsy. Quality of Life Research, 2019, 28, 1-12.	3.1	11
33	Manipulating the 5 Dimensions of the EuroQol Instrument: The Effects on Self-Reporting Actual Health and Valuing Hypothetical Health States. Medical Decision Making, 2019, 39, 380-392.	2.4	11
34	Developing preference-Âbased measures for diabetes: <sc>DHP</sc>â€3D and <sc>DHP</sc>â€5D. Diabetic Medicine, 2017, 34, 1264-1275.	2.3	10
35	The psychometric performance of generic preference-based measures for patients with pressure ulcers. Health and Quality of Life Outcomes, 2015, 13, 117.	2.4	9
36	How Should Discrete Choice Experiments with Duration Choice Sets Be Presented for the Valuation of Health States?. Medical Decision Making, 2018, 38, 306-318.	2.4	9

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37	Health-related quality of life and upper-limb impairment in children with cerebral palsy: developing a mapping algorithm. <i>Developmental Medicine and Child Neurology</i> , 2020, 62, 854-860.	2.1	9
38	Valuing EQ-5D-5L health states "in context" using a discrete choice experiment. <i>European Journal of Health Economics</i> , 2018, 19, 595-605.	2.8	8
39	Measuring the Burden of Schizophrenia Using Clinician and Patient-Reported Measures: An Exploratory Analysis of Construct Validity. <i>Patient</i> , 2019, 12, 405-417.	2.7	6
40	Development of a classification (descriptive) system for a preference-based quality of life measure for dental caries (dental caries utility index) among adolescents. <i>Journal of Public Health Dentistry</i> , 2022, 82, 253-261.	1.2	5
41	Preference Elicitation Techniques Used in Valuing Children's Health-Related Quality-of-Life: A Systematic Review. <i>Pharmacoeconomics</i> , 2022, 40, 663-698.	3.3	5
42	Implausible States: Prevalence of EQ-5D-5L States in the General Population and Its Effect on Health State Valuation. <i>Medical Decision Making</i> , 2020, 40, 735-745.	2.4	4
43	The SF-6Dv2: How Does the New Classification System Impact the Distribution of Responses Compared with the Original SF-6D?. <i>Pharmacoeconomics</i> , 2020, 38, 1283-1288.	3.3	3
44	Valuing SF-6Dv2 in Australia Using an International Protocol. <i>Pharmacoeconomics</i> , 2021, 39, 1151-1162.	3.3	3
45	We Respect Their Autonomy and Dignity, But How Do We Value Patient-Reported Experiences?. <i>MDM Policy and Practice</i> , 2018, 3, 238146831880745.	0.9	2
46	Response to Comments on Mulhern et al., "Improving the Measurement of QALYs in Dementia: Developing Patient- and Carer-Reported Health State Classification Systems Using Rasch Analysis". <i>Value in Health</i> , 2012, 15, 787-788.	0.3	0