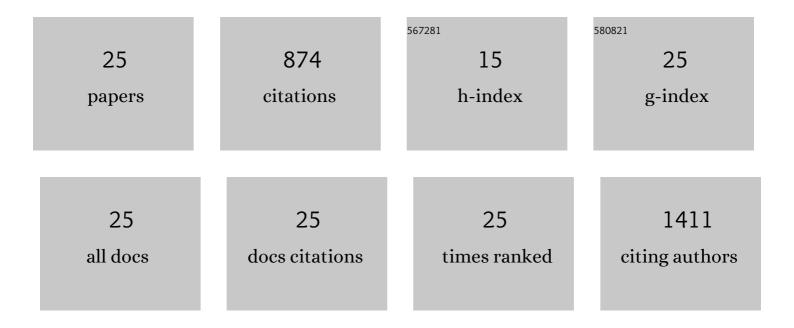
Shafika Abrahams-Gessel

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/9552894/publications.pdf Version: 2024-02-01



#	Article	lF	CITATIONS
1	Concordance between fasting plasma glucose and HbA _{1c} in the diagnosis of diabetes in black South African adults: a cross-sectional study. BMJ Open, 2021, 11, e046060.	1.9	8
2	Health Impact and Cost-Effectiveness of Achieving the National Salt and Sugar Reduction Initiative Voluntary Sugar Reduction Targets in the United States: A Microsimulation Study. Circulation, 2021, 144, 1362-1376.	1.6	17
3	Echocardiographic and Electrocardiographic Abnormalities Among Elderly Adults With Cardiovascular Disease in Rural South Africa. Circulation: Cardiovascular Quality and Outcomes, 2021, 14, e007847.	2.2	5
4	Health Impact and Cost-Effectiveness of Financing Fruit and Vegetable Subsidies with a Sugar-Sweetened Beverage Tax in the US: A Micro-Simulation Study. Current Developments in Nutrition, 2020, 4, nzaa064_011.	0.3	1
5	Health Impact and Cost-Effectiveness of Volume, Tiered, and Absolute Sugar Content Sugar-Sweetened Beverage Tax Policies in the United States. Circulation, 2020, 142, 523-534.	1.6	35
6	Health and Economic Impacts of the National Menu Calorie Labeling Law in the United States. Circulation: Cardiovascular Quality and Outcomes, 2020, 13, e006313.	2.2	19
7	Health Impact and Cost-effectiveness of Volume, Tiered, and Sugar Content Sugar-sweetened Beverage Tax Policies in the US: A Micro-simulation Study (OR28-04-19). Current Developments in Nutrition, 2019, 3, nzz042.OR28-04-19.	0.3	2
8	Cost-effectiveness of financial incentives for improving diet and health through Medicare and Medicaid: A microsimulation study. PLoS Medicine, 2019, 16, e1002761.	8.4	89
9	Using mHealth Tools to Improve Access and Coverage of People With Public Health Insurance and High Cardiovascular Disease Risk in Argentina: A Pragmatic Cluster Randomized Trial. Journal of the American Heart Association, 2019, 8, e011799.	3.7	14
10	Cardiometabolic disease costs associated with suboptimal diet in the United States: A cost analysis based on a microsimulation model. PLoS Medicine, 2019, 16, e1002981.	8.4	60
11	Cost-Effectiveness of a US National Sugar-Sweetened Beverage Tax With a Multistakeholder Approach: Who Pays and Who Benefits. American Journal of Public Health, 2019, 109, 276-284.	2.7	55
12	Using mHealth tools to improve access, coverage and treatment of uninsured people with high cardiovascular disease risk in Argentina: a study protocol for a pragmatic cluster randomised trial. BMJ Innovations, 2018, 4, 135-141.	1.7	3
13	Cost-effectiveness of financial incentives and disincentives for improving food purchases and health through the US Supplemental Nutrition Assistance Program (SNAP): A microsimulation study. PLoS Medicine, 2018, 15, e1002661.	8.4	101
14	Cardiovascular Disease Profile of the Oldest Adults in Rural South Africa: Data from the HAALSI Study (Health and Aging in Africa: Longitudinal Studies of INDEPTH Communities). Journal of the American Geriatrics Society, 2018, 66, 2151-2157.	2.6	6
15	Cardiometabolic risk in a population of older adults with multiple co-morbidities in rural south africa: the HAALSI (Health and Aging in Africa: longitudinal studies of INDEPTH communities) study. BMC Public Health, 2017, 17, 206.	2.9	71
16	Hypertension management in a population of older adults in rural South Africa. Journal of Hypertension, 2017, 35, 1283-1289.	0.5	33
17	Disparities in Management of Cardiovascular Disease in Rural South Africa. Circulation: Cardiovascular Quality and Outcomes, 2017, 10, .	2.2	9

Awareness, treatment, and control of dyslipidemia in rural South Africa: The HAALSI (Health and Aging) Tj ETQq0 0 0 rgBT /Overlock 10 T 2.5 34

e0187347.

#	Article	IF	CITATIONS
19	Training community health workers to screen for cardiovascular disease risk in the community: experiences from Cape Town, South Africa. Cardiovascular Journal of Africa, 2017, 28, 170-175.	0.4	9
20	Referral outcomes of individuals identified at high risk of cardiovascular disease by community health workers in Bangladesh, Guatemala, Mexico, and South Africa. Global Health Action, 2015, 8, 26318.	1.9	29
21	An assessment of community health workers' ability to screen for cardiovascular disease risk with a simple, non-invasive risk assessment instrument in Bangladesh, Guatemala, Mexico, and South Africa: an observational study. The Lancet Global Health, 2015, 3, e556-e563.	6.3	139
22	Healthcare Professional Shortage and Task-Shifting to Prevent Cardiovascular Disease: Implications for Low- and Middle-Income Countries. Current Cardiology Reports, 2015, 17, 115.	2.9	36
23	Cardiovascular Disease Screening By Community Health Workers Can Be Cost-Effective In Low-Resource Countries. Health Affairs, 2015, 34, 1538-1545.	5.2	42
24	The Training and Fieldwork Experiences of Community Health Workers Conducting Population-Based, Noninvasive Screening for CVD in LMIC. Global Heart, 2015, 10, 45.	2.3	31
25	Training and Supervision of Community Health Workers Conducting Population-Based, Noninvasive Screening for CVD in LMIC: Implications for Scaling Up. Global Heart, 2015, 10, 39.	2.3	26