

CITATION REPORT

List of articles citing

The borderline resectable and locally advanced pancreatic ductal adenocarcinoma: Definition

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Endoscopic Ultrasound, 2017, 6, S76-S78.

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#	Paper	IF	Citations
12	Consensus in determining the resectability of locally progressed pancreatic ductal adenocarcinoma - results of the Conko-007 multicenter trial. <i>BMC Cancer</i> , 2019 , 19, 979	4.8	9
11	Locally Advanced Pancreatic Ductal Adenocarcinoma: Challenges and Progress. <i>OncoTargets and Therapy</i> , 2020 , 13, 12705-12720	4.4	3
10	Recurrence Patterns for Pancreatic Ductal Adenocarcinoma after Upfront Resection Versus Resection Following Neoadjuvant Therapy: A Comprehensive Meta-Analysis. <i>Journal of Clinical Medicine</i> , 2020 , 9,	5.1	6
9	Keratin 17 testing in pancreatic cancer needle aspiration biopsies predicts survival. <i>Cancer Cytopathology</i> , 2021 , 129, 865-873	3.9	2
8	Combining sonodynamic therapy with chemoradiation for the treatment of pancreatic cancer. <i>Journal of Controlled Release</i> , 2021 , 337, 371-377	11.7	5
7	Serum Metabolomic and Lipoprotein Profiling of Pancreatic Ductal Adenocarcinoma Patients of African Ancestry. <i>Metabolites</i> , 2021 , 11,	5.6	0
6	Updates on adjuvant and neoadjuvant treatment strategies for surgically resectable and borderline resectable pancreatic ductal adenocarcinoma. <i>Therapeutic Advances in Medical Oncology</i> , 2021 , 13, 1758835921104586	5.4	2
5	A Review on the Efficacy and Safety of Nab-Paclitaxel with Gemcitabine in Combination with Other Therapeutic Agents as New Treatment Strategies in Pancreatic Cancer.. <i>Life</i> , 2022 , 12,	3	0
4	Borderline Resectable Pancreatic Cancer: Challenges for Clinical Management. Volume 14, 3589-3598		0
3	Intraoperative Ultrasound During Surgical Exploration in Patients with Pancreatic Cancer and Vascular Involvement (ULTRAPAN): A Prospective Multicenter Study.		0
2	Imaging Recommendations for Diagnosis, Staging, and Management of Pancreatic Cancer. 2023 , 44, 077-083		0
1	Utilization of a novel 3D radiologic scoring method to define therapeutic response and surgical candidacy. 2,		0