

Martin Wolkewitz

List of Publications by Year in descending order

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Version: 2024-02-01

113
papers

2,930
citations

172457

29
h-index

189892

50
g-index

117
all docs

117
docs citations

117
times ranked

4498
citing authors

#	ARTICLE	IF	CITATIONS
1	Coronary revascularization in acute coronary syndrome: does the choice of the conduit matter?. Journal of Cardiovascular Surgery, 2022, 62, .	0.6	0
2	Robust and durable serological response following pediatric SARS-CoV-2 infection. Nature Communications, 2022, 13, 128.	12.8	54
3	Incidence and mortality of hospital-acquired bacteraemia: a population-based cohort study applying a multi-state model approach. Clinical Microbiology and Infection, 2022, 28, 879.e9-879.e15.	6.0	5
4	Response to "Overlooked Shortcomings of Observational Studies of Interventions in Coronavirus Disease 2019: An Illustrated Review for the Clinician" by Tleyjeh et al.. Open Forum Infectious Diseases, 2022, 9, ofab614.	0.9	0
5	Data-driven prediction of COVID-19 cases in Germany for decision making. BMC Medical Research Methodology, 2022, 22, 116.	3.1	7
6	Navigating hospitals safely through the COVID-19 epidemic tide: Predicting case load for adjusting bed capacity. Infection Control and Hospital Epidemiology, 2021, 42, 653-658.	1.8	12
7	Correction of Survival Bias in a Study About Increased Mortality of Heads of Government. American Statistician, 2021, 75, 85-91.	1.6	0
8	Mortality attributable to third-generation cephalosporin resistance in Gram-negative bloodstream infections in African hospitals: a multi-site retrospective study. JAC-Antimicrobial Resistance, 2021, 3, dlaa130.	2.1	4
9	Predicting Potential Prevention Effects on Hospital Burden of Nosocomial Infections: A Multistate Modeling Approach. Value in Health, 2021, 24, 830-838.	0.3	5
10	Effect of didecyl dimethyl ammonium chloride (DDAC)-impregnated washcloth wipe whole-body bathing on catheter-related bloodstream infections and central venous line-associated infections in adult intensive care units. Clinical Microbiology and Infection, 2021, , .	6.0	1
11	Methodological evaluation of bias in observational coronavirus disease 2019 studies on drug effectiveness. Clinical Microbiology and Infection, 2021, 27, 949-957.	6.0	14
12	Absolute mortality risk assessment of COVID-19 patients: the Khorshid COVID Cohort (KCC) study. BMC Medical Research Methodology, 2021, 21, 146.	3.1	4
13	"Methodological evaluation of bias in observational COVID-19 studies on drug effectiveness" Author's reply. Clinical Microbiology and Infection, 2021, 27, 1045.	6.0	1
14	Estimating incidence and attributable length of stay of healthcare-associated infections" Modeling the Swiss point-prevalence survey. Infection Control and Hospital Epidemiology, 2021, , 1-10.	1.8	3
15	Sampling designs for rare time-dependent exposures: a comparison of the nested exposure case-control design and exposure density sampling. Epidemiology and Infection, 2021, 149, e122.	2.1	1
16	Harmonizing Heterogeneous Endpoints in Coronavirus Disease 2019 Trials Without Loss of Information. Critical Care Medicine, 2021, 49, e11-e19.	0.9	18
17	Automatic Classification Between COVID-19 and Non-COVID-19 Pneumonia Using Symptoms, Comorbidities, and Laboratory Findings: The Khorshid COVID Cohort Study. Frontiers in Medicine, 2021, 8, 768467.	2.6	4
18	Accounting for length of hospital stay in regression models in clinical epidemiology. Statistica Neerlandica, 2020, 74, 24-37.	1.6	0

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19	Follow-on rifaximin for the prevention of recurrence following standard treatment of infection with <i>Clostridium difficile</i> : a competing risks analysis provides a full picture of possible treatment effects. <i>Gut</i> , 2020, 69, 398-400.	12.1	1
20	The populationâ€™ attributable fraction for timeâ€™ dependent exposures using dynamic prediction and landmarking. <i>Biometrical Journal</i> , 2020, 62, 583-597.	1.0	2
21	The impact of hospital-acquired infections on the patient-level reimbursement-cost relationship in a DRG-based hospital payment system. <i>International Journal of Health Economics and Management</i> , 2020, 20, 1-11.	1.1	7
22	Optimizing design of research to evaluate antibiotic stewardship interventions: consensus recommendations of a multinational working group. <i>Clinical Microbiology and Infection</i> , 2020, 26, 41-50.	6.0	49
23	Protocol for a prospective cohort study: Prevention of Transmissions by Effective Colonisation Tracking in Neonates (PROTECT-Neo). <i>BMJ Open</i> , 2020, 10, e034068.	1.9	2
24	Joint analysis of duration of ventilation, length of intensive care, and mortality of COVID-19 patients: a multistate approach. <i>BMC Medical Research Methodology</i> , 2020, 20, 206.	3.1	83
25	<p>Statistical Analysis of Clinical COVID-19 Data: A Concise Overview of Lessons Learned, Common Errors and How to Avoid Them</p>. <i>Clinical Epidemiology</i> , 2020, Volume 12, 925-928.	3.0	34
26	Carotid geometry is an independent predictor of wall thickness â€™ a 3D cardiovascular magnetic resonance study in patients with high cardiovascular risk. <i>Journal of Cardiovascular Magnetic Resonance</i> , 2020, 22, 67.	3.3	18
27	Intra-day variations of blood reelin levels in healthy individuals. <i>Archives of Medical Science</i> , 2020, 16, 118-123.	0.9	3
28	Infectious disease consultation for candidaemia. <i>Lancet Infectious Diseases</i> , The, 2020, 20, 164-165.	9.1	2
29	Methodological challenges of analysing COVID-19 data during the pandemic. <i>BMC Medical Research Methodology</i> , 2020, 20, 81.	3.1	64
30	Mechanical ventilation and the daily cost of ICU care. <i>BMC Health Services Research</i> , 2020, 20, 267.	2.2	28
31	COVID-19 in-hospital mortality and mode of death in a dynamic and non-restricted tertiary care model in Germany. <i>PLoS ONE</i> , 2020, 15, e0242127.	2.5	47
32	Title is missing!. , 2020, 15, e0242127.		0
33	Title is missing!. , 2020, 15, e0242127.		0
34	Title is missing!. , 2020, 15, e0242127.		0
35	Title is missing!. , 2020, 15, e0242127.		0
36	Costs of hospital-acquired <i>Clostridium difficile</i> infections: an analysis on the effect of time-dependent exposures using routine and surveillance data. <i>Cost Effectiveness and Resource Allocation</i> , 2019, 17, 16.	1.5	8

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37	The populationâ€attributable fraction for timeâ€dependent exposures and competing risksâ€”A discussion on estimands. <i>Statistics in Medicine</i> , 2019, 38, 3880-3895.	1.6	9
38	Estimands to quantify prolonged hospital stay associated with nosocomial infections. <i>BMC Medical Research Methodology</i> , 2019, 19, 111.	3.1	18
39	RE: â€RISK-SET MATCHING TO ASSESS THE IMPACT OF HOSPITAL-ACQUIRED BLOODSTREAM INFECTIONSâ€: <i>American Journal of Epidemiology</i> , 2019, 188, 1192-1193.	3.4	1
40	Measuring the Financial Burden of Resistance: What Should Be Compared?. <i>Clinical Infectious Diseases</i> , 2019, 69, 1082-1082.	5.8	3
41	Analyzing the impact of duration of ventilation, hospitalization, and ventilation episodes on the risk of pneumonia. <i>Infection Control and Hospital Epidemiology</i> , 2019, 40, 301-306.	1.8	12
42	Measuring the in-hospital costs of <i>Pseudomonas aeruginosa</i> pneumonia: methodology and results from a German teaching hospital. <i>BMC Infectious Diseases</i> , 2019, 19, 1028.	2.9	19
43	Clinical outcomes of hospitalised patients with catheter-associated urinary tract infection in countries with a high rate of multidrug-resistance: the COMBACTE-MAGNET RESCUING study. <i>Antimicrobial Resistance and Infection Control</i> , 2019, 8, 198.	4.1	32
44	Impact of mechanical ventilation on the daily costs of ICU care: a systematic review and meta regression. <i>Epidemiology and Infection</i> , 2019, 147, e314.	2.1	29
45	Investigating the Impact of Early Valve Surgery on Survival in <i>Staphylococcus aureus</i> Infective Endocarditis Using a Marginal Structural Model Approach: Results of a Large, Prospectively Evaluated Cohort. <i>Clinical Infectious Diseases</i> , 2019, 69, 487-494.	5.8	6
46	Effectiveness of a hospital-wide infection control programme on the incidence of healthcare-associated infections and associated severe sepsis and septic shock: a prospective interventional study. <i>Clinical Microbiology and Infection</i> , 2019, 25, 462-468.	6.0	15
47	Use of prevalence data to study sepsis incidence and mortality in intensive care units. <i>Lancet Infectious Diseases</i> , The, 2018, 18, 252.	9.1	7
48	Estimating the attributable costs of hospital-acquired infections requires a distinct categorization of cases based on time of infection. <i>American Journal of Infection Control</i> , 2018, 46, 729.	2.3	4
49	Methodological challenges in using point-prevalence versus cohort data in risk factor analyses of nosocomial infections. <i>Annals of Epidemiology</i> , 2018, 28, 475-480.e1.	1.9	4
50	Determining the Attributable Costs of <i>Clostridium difficile</i> Infections When Exposure Time Is Lacking: Be Wary of â€Conditioning on the Futureâ€. <i>Infection Control and Hospital Epidemiology</i> , 2018, 39, 759-760.	1.8	3
51	Estimating the additional costs of surgical site infections: length bias, time-dependent bias, and conditioning on the future. <i>Journal of Hospital Infection</i> , 2018, 99, 103-104.	2.9	7
52	Relative risk and population-attributable fraction of ICU death caused by susceptible and resistant <i>Pseudomonas aeruginosa</i> ventilator-associated pneumonia: a competing risks approach to investigate the OUTCOMEREA database. <i>Intensive Care Medicine</i> , 2018, 44, 1177-1179.	8.2	11
53	Analyzing the impact of depth of response on survival in patients with metastatic non-small-cell lung cancer. <i>Annals of Oncology</i> , 2018, 29, 282-283.	1.2	4
54	Prevention of hospital infections by intervention and training (PROHIBIT): results of a pan-European cluster-randomized multicentre study to reduce central venous catheter-related bloodstream infections. <i>Intensive Care Medicine</i> , 2018, 44, 48-60.	8.2	48

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55	Improving nested case-control studies to conduct a full competing-risks analysis for nosocomial infections. <i>Infection Control and Hospital Epidemiology</i> , 2018, 39, 1196-1201.	1.8	3
56	Estimation of adjusted expected excess length of stay associated with ventilation-acquired pneumonia in intensive care: A multistate approach accounting for time-dependent mechanical ventilation. <i>Biometrical Journal</i> , 2018, 60, 1135-1150.	1.0	5
57	Optimizing the Design and Analysis of Clinical Trials for Antibacterials Against Multidrug-resistant Organisms: A White Paper From COMBACTE's STAT-Net. <i>Clinical Infectious Diseases</i> , 2018, 67, 1922-1931.	5.8	23
58	Simulation shows undesirable results for competing risks analysis with time-dependent covariates for clinical outcomes. <i>BMC Medical Research Methodology</i> , 2018, 18, 79.	3.1	32
59	Abdominal aortic aneurysm neck remodeling after Anaconda stent graft implantation. <i>Journal of Vascular Surgery</i> , 2018, 68, 1354-1359.e2.	1.1	17
60	Risk prediction for <i>Staphylococcus aureus</i> surgical site infection following cardiothoracic surgery; A secondary analysis of the V710-P003 trial. <i>PLoS ONE</i> , 2018, 13, e0193445.	2.5	17
61	Time series models of environmental exposures: Good predictions or good understanding. <i>Environmental Research</i> , 2017, 154, 222-225.	7.5	10
62	Competing risks need to be considered in survival analysis models for cardiovascular outcomes. <i>Journal of Thoracic and Cardiovascular Surgery</i> , 2017, 153, 1427-1431.	0.8	26
63	Survival biases lead to flawed conclusions in observational treatment studies of influenza patients. <i>Journal of Clinical Epidemiology</i> , 2017, 84, 121-129.	5.0	27
64	Landmark prediction of nosocomial infection risk to disentangle short- and long-stay patients. <i>Journal of Hospital Infection</i> , 2017, 96, 81-84.	2.9	17
65	Appropriate endpoints for evaluation of new antibiotic therapies for severe infections: a perspective from COMBACTE's STAT-Net. <i>Intensive Care Medicine</i> , 2017, 43, 1002-1012.	8.2	44
66	The time-dependent cure-death model investigating two equally important endpoints simultaneously in trials treating high-risk patients with resistant pathogens. <i>Pharmaceutical Statistics</i> , 2017, 16, 267-279.	1.3	4
67	Pre- and post-diagnostic beta-blocker use and prognosis after colorectal cancer: Results from a population-based study. <i>International Journal of Cancer</i> , 2017, 141, 62-71.	5.1	24
68	Pre- and post-diagnostic β -blocker use and lung cancer survival: A population-based cohort study. <i>Scientific Reports</i> , 2017, 7, 2911.	3.3	30
69	Multistate Modeling to Analyze Nosocomial Infection Data: An Introduction and Demonstration. <i>Infection Control and Hospital Epidemiology</i> , 2017, 38, 953-959.	1.8	34
70	<i>P. aeruginosa</i> colonization at ICU admission as a risk factor for developing <i>P. aeruginosa</i> ICU pneumonia. <i>Antimicrobial Resistance and Infection Control</i> , 2017, 6, 38.	4.1	16
71	Estimating the burden of nosocomial infections: Time dependency and cost clustering should be taken into account. <i>American Journal of Infection Control</i> , 2017, 45, 94-95.	2.3	13
72	<i>Staphylococcus aureus</i> colonization at ICU admission as a risk factor for developing <i>S. aureus</i> ICU pneumonia. <i>Clinical Microbiology and Infection</i> , 2017, 23, 49.e9-49.e14.	6.0	47

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73	A case-cohort approach for multi-state models in hospital epidemiology. <i>Statistics in Medicine</i> , 2017, 36, 481-495.	1.6	4
74	Rationale and design of ASPIRE-ICU: a prospective cohort study on the incidence and predictors of <i>Staphylococcus aureus</i> and <i>Pseudomonas aeruginosa</i> pneumonia in the ICU. <i>BMC Infectious Diseases</i> , 2017, 17, 643.	2.9	13
75	Basic parametric analysis for a multi-state model in hospital epidemiology. <i>BMC Medical Research Methodology</i> , 2017, 17, 111.	3.1	22
76	Accounting for Competing Events in Multivariate Analyses of Hospital-Acquired Infection Risk Factors. <i>Infection Control and Hospital Epidemiology</i> , 2016, 37, 1122-1124.	1.8	4
77	Neuraminidase Inhibitors and Hospital Mortality in British Patients with H1N1 Influenza A: A Re-Analysis of Observational Data. <i>PLoS ONE</i> , 2016, 11, e0160430.	2.5	14
78	Necessity of a Competing Risk Approach in Risk Factor Analysis of Central Line-Associated Bloodstream Infection. <i>Infection Control and Hospital Epidemiology</i> , 2016, 37, 1255-1257.	1.8	5
79	Multiple time scales in modeling the incidence of infections acquired in intensive care units. <i>BMC Medical Research Methodology</i> , 2016, 16, 116.	3.1	10
80	RE: "COMPARISON OF STATISTICAL APPROACHES FOR DEALING WITH IMMORTAL TIME BIAS IN DRUG EFFECTIVENESS STUDIES". <i>American Journal of Epidemiology</i> , 2016, 184, 856-858.	3.4	3
81	Key priorities in the prevention and control of healthcare-associated infection: a survey of European and other international infection prevention experts. <i>Infection</i> , 2016, 44, 719-724.	4.7	5
82	A full competing risk analysis of hospital-acquired infections can easily be performed by a case-cohort approach. <i>Journal of Clinical Epidemiology</i> , 2016, 74, 187-193.	5.0	14
83	Analysis of Clinical Cohort Data Using Nested Case-control and Case-cohort Sampling Designs. <i>Methods of Information in Medicine</i> , 2015, 54, 505-514.	1.2	14
84	Estimating the Risk of Ventilator-associated Pneumonia as a Function of Time. <i>American Journal of Respiratory and Critical Care Medicine</i> , 2015, 192, 640-641.	5.6	2
85	Evaluation of Guided Bone Regeneration around Oral Implants over Different Healing Times Using Two Different Bovine Bone Materials: A Randomized, Controlled Clinical and Histological Investigation. <i>Clinical Implant Dentistry and Related Research</i> , 2015, 17, 957-971.	3.7	9
86	Nested Case-Control Studies in Cohorts with Competing Events. <i>Epidemiology</i> , 2014, 25, 122-125.	2.7	9
87	Interventions to control nosocomial infections: study designs and statistical issues. <i>Journal of Hospital Infection</i> , 2014, 86, 77-82.	2.9	13
88	A retrospective evaluation of teeth restored with zirconia ceramic posts: 10-year results. <i>Clinical Oral Investigations</i> , 2014, 18, 1181-1187.	3.0	31
89	Avoidable statistical pitfalls in analyzing length of stay in intensive care units or hospitals. <i>Critical Care</i> , 2014, 18, 408.	5.8	3
90	Statistical and methodological concerns about the beneficial effect of neuraminidase inhibitors on mortality. <i>Lancet Respiratory Medicine</i> , 2014, 2, e8-e9.	10.7	8

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91	Interpreting and comparing risks in the presence of competing events. <i>BMJ, The</i> , 2014, 349, g5060-g5060.	6.0	149
92	Multilevel competing risk models to evaluate the risk of nosocomial infection. <i>Critical Care</i> , 2014, 18, R64.	5.8	27
93	Responding to manuscript CLOI-D-10-00562: Reliability of shade selection using an intraoral spectrophotometer. <i>Clinical Oral Investigations</i> , 2013, 17, 1027-1028.	3.0	0
94	Aggressive versus conservative initiation of antibiotics. <i>Lancet Infectious Diseases, The</i> , 2013, 13, 387-388.	9.1	2
95	Hospital-acquired infections—appropriate statistical treatment is urgently needed!. <i>International Journal of Epidemiology</i> , 2013, 42, 1502-1508.	1.9	85
96	Paediatric hospital-acquired bacteraemia in developing countries. <i>Lancet, The</i> , 2012, 379, 1484.	13.7	4
97	Time-dependent study entries and exposures in cohort studies can easily be sources of different and avoidable types of bias. <i>Journal of Clinical Epidemiology</i> , 2012, 65, 1171-1180.	5.0	72
98	Reliability of shade selection using an intraoral spectrophotometer. <i>Clinical Oral Investigations</i> , 2012, 16, 945-949.	3.0	27
99	The Time-Dependent Bias and its Effect on Extra Length of Stay due to Nosocomial Infection. <i>Value in Health</i> , 2011, 14, 381-386.	0.3	89
100	Clinical outcomes of health-care-associated infections and antimicrobial resistance in patients admitted to European intensive-care units: a cohort study. <i>Lancet Infectious Diseases, The</i> , 2011, 11, 30-38.	9.1	344
101	Multistate modelling to estimate the excess length of stay associated with meticillin-resistant <i>Staphylococcus aureus</i> colonisation and infection in surgical patients. <i>Journal of Hospital Infection</i> , 2011, 78, 86-91.	2.9	48
102	Application of multistate models in hospital epidemiology: Advances and challenges. <i>Biometrical Journal</i> , 2011, 53, 332-350.	1.0	47
103	Mortality associated with in-hospital bacteraemia caused by <i>Staphylococcus aureus</i> : a multistate analysis with follow-up beyond hospital discharge. <i>Journal of Antimicrobial Chemotherapy</i> , 2011, 66, 381-386.	3.0	58
104	Burden of antimicrobial resistance in European hospitals: excess mortality and length of hospital stay associated with bloodstream infections due to <i>Escherichia coli</i> resistant to third-generation cephalosporins. <i>Journal of Antimicrobial Chemotherapy</i> , 2011, 66, 398-407.	3.0	198
105	Two Pitfalls in Survival Analyses of Time-Dependent Exposure: A Case Study in a Cohort of Oscar Nominees. <i>American Statistician</i> , 2010, 64, 205-211.	1.6	36
106	Efficient Risk Set Sampling when a Time-dependent Exposure Is Present. <i>Methods of Information in Medicine</i> , 2009, 48, 438-443.	1.2	35
107	Modeling the effect of time-dependent exposure on intensive care unit mortality. <i>Intensive Care Medicine</i> , 2009, 35, 826-832.	8.2	47
108	Statistical epidemic modeling with hospital outbreak data. <i>Statistics in Medicine</i> , 2008, 27, 6522-6531.	1.6	17

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109	The impact of time-dependent bias in proportional hazards modelling. <i>Statistics in Medicine</i> , 2008, 27, 6439-6454.	1.6	76
110	An easy mathematical proof showed that time-dependent bias inevitably leads to biased effect estimation. <i>Journal of Clinical Epidemiology</i> , 2008, 61, 1216-1221.	5.0	145
111	Risk factors for the development of nosocomial pneumonia and mortality on intensive care units: application of competing risks models. <i>Critical Care</i> , 2008, 12, R44.	5.8	114
112	Environmental Contamination as an Important Route for the Transmission of the Hospital Pathogen VRE: Modeling and Prediction of Classical Interventions. <i>Infectious Diseases: Research and Treatment</i> , 2008, 1, IDRT.S809.	1.7	7
113	Accurate Variance Estimation for Prevalence Ratios. <i>Methods of Information in Medicine</i> , 2007, 46, 567-571.	1.2	9