Greg P Rubin

List of Publications by Year in descending order

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Version: 2024-02-01

79 papers

4,096 citations

32 h-index 62 g-index

79 all docs

79 docs citations

79 times ranked 4376 citing authors

#	Article	IF	CITATIONS
1	Public & Description of the properties of the properties of the presentation of narratives. International Journal of Social Research Methodology: Theory and Practice, 2022, 25, 483-493.	4.4	1
2	Morbidity and measures of the diagnostic process in primary care for patients subsequently diagnosed with cancer. Family Practice, 2022, 39, 623-632.	1.9	1
3	Recruitment to a large scale randomised controlled clinical trial in primary care: the Helicobacter Eradication Aspirin Trial (HEAT). Trials, 2022, 23, 140.	1.6	2
4	Factors determining development of researchers within a research network on cancer diagnosis in primary care (CanTest): an interview study. BMJ Open, 2022, 12, e046321.	1.9	0
5	Patient-reported experiences and views on the Cytosponge test: a mixed-methods analysis from the BEST3 trial. BMJ Open, 2022, 12, e054258.	1.9	6
6	Usefulness of prophylactic antibiotics in preventing infection after internal fixation of closed hand fractures. Hand Surgery and Rehabilitation, 2021, 40, 167-170.	0.4	2
7	Measuring patient experience of diagnostic care and acceptability of testing. Diagnosis, 2021, 8, 317-321.	1.9	5
8	Conceptual Framework to Guide Early Diagnosis Programs for Symptomatic Cancer as Part of Global Cancer Control. JCO Global Oncology, 2021, 7, 35-45.	1.8	20
9	Electronic clinical decision support tool for assessing stomach symptoms in primary care (ECASS): a feasibility study. BMJ Open, 2021, 11, e041795.	1.9	5
10	Diagnostic errors and harms in primary care: insights to action. BMJ Quality and Safety, 2021, 30, bmjqs-2020-012423.	3.7	3
11	Presenting symptoms of cancer and stage at diagnosis: evidence from a cross-sectional, population-based study. Lancet Oncology, The, 2020, 21, 73-79.	10.7	123
12	The frequency, nature and impact of GP-assessed avoidable delays in a population-based cohort of cancer patients. Cancer Epidemiology, 2020, 64, 101617.	1.9	19
13	First results from five multidisciplinary diagnostic centre (MDC) projects for non-specific but concerning symptoms, possibly indicative of cancer. British Journal of Cancer, 2020, 123, 722-729.	6.4	41
14	The prevalence of chronic conditions in patients diagnosed with one of 29 common and rarer cancers: A cross-sectional study using primary care data. Cancer Epidemiology, 2020, 69, 101845.	1.9	10
15	Cytosponge-trefoil factor 3 versus usual care to identify Barrett's oesophagus in a primary care setting: a multicentre, pragmatic, randomised controlled trial. Lancet, The, 2020, 396, 333-344.	13.7	143
16	Cancer has not gone away: A primary care perspective to support a balanced approach for timely cancer diagnosis during COVIDâ€19. European Journal of Cancer Care, 2020, 29, e13290.	1.5	54
17	Cross-sectional study using primary care and cancer registration data to investigate patients with cancer presenting with non-specific symptoms. BMJ Open, 2020, 10, e033008.	1.9	27
18	Molten metal high pressure injection injury of the hand. Hand Surgery and Rehabilitation, 2020, 39, 328-331.	0.4	2

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19	Reconceptualising Rural Cancer Inequalities: Time for a New Research Agenda. International Journal of Environmental Research and Public Health, 2020, 17, 1455.	2.6	9
20	Patient symptom experience prior to a diagnosis of oesophageal or gastric cancer: a multi-methods study. BJGP Open, 2020, 4, bjgpopen20X101001.	1.8	15
21	Comorbid chronic diseases and cancer diagnosis: disease-specific effects and underlying mechanisms. Nature Reviews Clinical Oncology, 2019, 16, 746-761.	27.6	90
22	High-pressure injection injuries of the fingers: Long-term follow-up in patients after extensive debridement. Hand Surgery and Rehabilitation, 2019, 38, 312-316.	0.4	3
23	Evaluating diagnostic strategies for early detection of cancer: the CanTest framework. BMC Cancer, 2019, 19, 586.	2.6	34
24	Incidentally diagnosed cancer and commonly preceding clinical scenarios: a cross-sectional descriptive analysis of English audit data. BMJ Open, 2019, 9, e028362.	1.9	18
25	Associations between general practice characteristics with use of urgent referrals for suspected cancer and endoscopies: a cross-sectional ecological study. Family Practice, 2019, 36, 573-580.	1.9	12
26	The influence of health literacy on the timely diagnosis of symptomatic cancer: A systematic review. European Journal of Cancer Care, 2019, 28, e12920.	1.5	26
27	The role of social context in symptom appraisal and help-seeking among people with lung or colorectal symptoms: A qualitative interview study. European Journal of Cancer Care, 2018, 27, e12815.	1.5	17
28	Reimagining the diagnostic pathway for gastrointestinal cancer. Nature Reviews Gastroenterology and Hepatology, 2018, 15, 181-188.	17.8	16
29	Symptom Signatures and Diagnostic Timeliness in Cancer Patients: A Review of Current Evidence. Neoplasia, 2018, 20, 165-174.	5.3	105
30	Associations between diagnostic activity and measures of patient experience in primary care: a cross-sectional ecological study of English general practices. British Journal of General Practice, 2018, 68, e9-e17.	1.4	10
31	The nature and frequency of abdominal symptoms in cancer patients and their associations with time to help-seeking: evidence from a national audit of cancer diagnosis. Journal of Public Health, 2018, 40, e388-e395.	1.8	26
32	Barrett's oESophagus trial 3 (BEST3): study protocol for a randomised controlled trial comparing the Cytosponge-TFF3 test with usual care to facilitate the diagnosis of oesophageal pre-cancer in primary care patients with chronic acid reflux. BMC Cancer, 2018, 18, 784.	2.6	37
33	The Aarhus statement on cancer diagnostic research: turning recommendations into new survey instruments. BMC Health Services Research, 2018, 18, 677.	2.2	26
34	Diagnosing cancer in primary care: results from the National Cancer Diagnosis Audit. British Journal of General Practice, 2018, 68, e63-e72.	1.4	110
35	Development of an intervention to expedite cancer diagnosis through primary care: a protocol. BJGP Open, 2018, 2, bjgpopen18X101595.	1.8	4
36	Socio-economic inequalities in stage at diagnosis, and in time intervals on the lung cancer pathway from first symptom to treatment: systematic review and meta-analysis. Thorax, 2017, 72, 430-436.	5.6	59

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37	Clinical features of bowel disease in patients aged <50 years in primary care: a large case-control study. British Journal of General Practice, 2017, 67, e336-e344.	1.4	32
38	Understanding symptom appraisal and help-seeking in people with symptoms suggestive of pancreatic cancer: a qualitative study. BMJ Open, 2017, 7, e015682.	1.9	25
39	Evidence of advanced stage colorectal cancer with longer diagnostic intervals: a pooled analysis of seven primary care cohorts comprising 11 720 patients in five countries. British Journal of Cancer, 2017, 117, 888-897.	6.4	77
40	Typical and atypical presenting symptoms of breast cancer and their associations with diagnostic intervals: Evidence from a national audit of cancer diagnosis. Cancer Epidemiology, 2017, 48, 140-146.	1.9	92
41	The researchers' role in knowledge translation: a realist evaluation of the development and implementation of diagnostic pathways for cancer in two United Kingdom localities. Health Research Policy and Systems, 2017, 15, 103.	2.8	3
42	Concerns, perceived need and competing priorities: a qualitative exploration of decision-making and non-participation in a population-based flexible sigmoidoscopy screening programme to prevent colorectal cancer. BMJ Open, 2016, 6, e012304.	1.9	22
43	Symptoms and patient factors associated with diagnostic intervals for pancreatic cancer (SYMPTOM) Tj ETQq1 1 298-306.	0.784314 8.1	ł rgBT /Overl 114
44	Symptoms and patient factors associated with longer time to diagnosis for colorectal cancer: results from a prospective cohort study. British Journal of Cancer, 2016, 115, 533-541.	6.4	69
45	Improving early diagnosis of symptomatic cancer. Nature Reviews Clinical Oncology, 2016, 13, 740-749.	27.6	102
46	Evaluating a computer aid for assessing stomach symptoms (ECASS): study protocol for a randomised controlled trial. Trials, 2016, 17, 184.	1.6	8
47	Attitudes and beliefs of nonâ€participants in a populationâ€based screening programme for colorectal cancer. Health Expectations, 2015, 18, 1645-1657.	2.6	66
48	For which cancers might patients benefit most from expedited symptomatic diagnosis? Construction of a ranking order by a modified Delphi technique. BMC Cancer, 2015, 15, 820.	2.6	16
49	Authors' reply to Taylor. BMJ, The, 2015, 350, h433-h433.	6.0	O
50	The role of primary care in cancer diagnosis via emergency presentation: qualitative synthesis of significant event reports. British Journal of Cancer, 2015, 112, S50-S56.	6.4	38
51	Exploring GPs' experiences of using diagnostic tools for cancer: a qualitative study in primary care. Family Practice, 2015, 32, 101-105.	1.9	28
52	Irritable bowel syndrome: an integrated explanatory model for clinical practice. Neurogastroenterology and Motility, 2015, 27, 750-763.	3.0	22
53	Symptoms and other factors associated with time to diagnosis and stage of lung cancer: a prospective cohort study. British Journal of Cancer, 2015, 112, S6-S13.	6.4	162
54	Implementing a national flexible sigmoidoscopy screening program: results of the English early pilot. Endoscopy, 2015, 47, 225-231.	1.8	17

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55	Explaining variation in cancer survival between 11 jurisdictions in the International Cancer Benchmarking Partnership: a primary care vignette survey. BMJ Open, 2015, 5, e007212-e007212.	1.9	93
56	Patient-derived measures of GI endoscopy: a meta-narrative review of the literature. Gastrointestinal Endoscopy, 2015, 81, 1130-1140.e9.	1.0	38
57	The role of receipt and timeliness of treatment in socioeconomic inequalities in lung cancer survival: population-based, data-linkage study. Thorax, 2015, 70, 138-145.	5.6	66
58	Assessing the impact of an English national initiative for early cancer diagnosis in primary care. British Journal of Cancer, 2015, 112, S57-S64.	6.4	12
59	The expanding role of primary care in cancer control. Lancet Oncology, The, 2015, 16, 1231-1272.	10.7	399
60	Use of the English urgent referral pathway for suspected cancer and mortality in patients with cancer: cohort study. BMJ, The, 2015, 351, h5102.	6.0	81
61	Age and Gender Variations in Cancer Diagnostic Intervals in 15 Cancers: Analysis of Data from the UK Clinical Practice Research Datalink. PLoS ONE, 2015, 10, e0127717.	2.5	98
62	Risk of Ischaemic Heart Disease in Patients with Inflammatory Bowel Disease: Cohort Study Using the General Practice Research Database. PLoS ONE, 2015, 10, e0139745.	2.5	13
63	Non-neoplastic findings at colonoscopy after positive faecal occult blood testing: Data from the English Bowel Cancer Screening Programme. Journal of Medical Screening, 2014, 21, 89-94.	2.3	13
64	Comparison of cancer diagnostic intervals before and after implementation of NICE guidelines: analysis of data from the UK General Practice Research Database. British Journal of Cancer, 2014, 110, 584-592.	6.4	166
65	Factors associated with timeliness of post-primary care referral, diagnosis and treatment for lung cancer: population-based, data-linkage study. British Journal of Cancer, 2014, 111, 1843-1851.	6.4	50
66	A model of roles and responsibilities in oral health promotion based on perspectives of a community-based initiative for pre-school children in the UK. British Dental Journal, 2014, 216, E11-E11.	0.6	5
67	How might healthcare systems influence speed of cancer diagnosis: A narrative review. Social Science and Medicine, 2014, 116, 56-63.	3.8	85
68	The role of patient, tumour and system factors in socioeconomic inequalities in lung cancer treatment: population-based study. British Journal of Cancer, 2014, 111, 608-618.	6.4	15
69	Research into practice: prompt diagnosis of cancer in primary care. British Journal of General Practice, 2014, 64, 428-430.	1.4	9
70	Rethinking diagnostic delay in cancer: how difficult is the diagnosis?. BMJ, The, 2014, 349, g7400-g7400.	6.0	129
71	Understanding diagnosis of lung cancer in primary care: qualitative synthesis of significant event audit reports. British Journal of General Practice, 2013, 63, e37-e46.	1.4	56
72	Evaluation of risk assessment tools for suspected cancer in general practice: a cohort study. British Journal of General Practice, 2013, 63, e30-e36.	1.4	86

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73	OC-070â€Perceived Delay among Patients with Colorectal, Stomach and Oesophageal Cancer: Analysis of Data from a National GP Audit. Gut, 2013, 62, A30.2-A30.	12.1	2
74	The Aarhus statement: improving design and reporting of studies on early cancer diagnosis. British Journal of Cancer, 2012, 106, 1262-1267.	6.4	573
75	PWE-077â€Pilot of flexible sigmoidoscopy screening to prevent colorectal cancer. Gut, 2012, 61, A328.2-A329.	12.1	1
76	Variation in use of the 2-week referral pathway for suspected cancer: A cross-sectional analysis. British Journal of General Practice, 2012, 62, e590-e597.	1.4	69
77	Unscheduled care following attendance at Minor Illness and Injury Units (MIU): cross-sectional survey. Journal of Evaluation in Clinical Practice, 2012, 18, 100-103.	1.8	1
78	Process evaluation of infertility management in primary care: has open access HSG been normalized?. Primary Health Care Research and Development, 2009, 10, 290.	1,2	9
79	Rethinking patient satisfaction: patient experiences of an open access flexible sigmoidoscopy service. Social Science and Medicine, 2000, 50, 53-62.	3.8	53