## Magnus Nilsson

List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	Gastric cancer. Lancet, The, 2020, 396, 635-648.	13.7	2,084
2	Obesity and Estrogen as Risk Factors for Gastroesophageal Reflux Symptoms. JAMA - Journal of the American Medical Association, 2003, 290, 66.	7.4	392
3	A randomized clinical trial of neoadjuvant chemotherapy versus neoadjuvant chemoradiotherapy for cancer of the oesophagus or gastro-oesophageal junction. Annals of Oncology, 2016, 27, 660-667.	1.2	300
4	Learning Curve and Associated Morbidity of Minimally Invasive Esophagectomy. Annals of Surgery, 2019, 269, 88-94.	4.2	207
5	Innovation in peripheral regions: Do collaborations compensate for a lack of local knowledge spillovers?. Annals of Regional Science, 2015, 54, 299-321.	2.1	183
6	Long-term Survival in Esophageal Cancer After Minimally Invasive Compared to Open Esophagectomy. Annals of Surgery, 2019, 270, 1005-1017.	4.2	117
7	Morbidity and mortality after surgery for cancer of the oesophagus and gastro-oesophageal junction: A randomized clinical trial of neoadjuvant chemotherapy vs. neoadjuvant chemoradiation. European Journal of Surgical Oncology, 2015, 41, 920-926.	1.0	86
8	Direct Oral Feeding Following Minimally Invasive Esophagectomy (NUTRIENT II trial). Annals of Surgery, 2020, 271, 41-47.	4.2	83
9	Severity of Acute Cholecystitis and Risk of latrogenic Bile Duct Injury During Cholecystectomy, a Populationâ€Based Case–Control Study. World Journal of Surgery, 2016, 40, 1060-1067.	1.6	81
10	Open versus minimally invasive total gastrectomy after neoadjuvant chemotherapy: results of a European randomized trial. Gastric Cancer, 2021, 24, 258-271.	5.3	79
11	The spatiality of trust: Factors influencing the creation of trust and the role of face-to-face contacts. European Management Journal, 2015, 33, 230-244.	5.1	71
12	Selective intraoperative cholangiography and risk of bile duct injury during cholecystectomy. British Journal of Surgery, 2015, 102, 952-958.	0.3	70
13	Anastomotic Techniques and Associated Morbidity in Total Minimally Invasive Transthoracic Esophagectomy. Annals of Surgery, 2019, 270, 820-826.	4.2	68
14	Firm performance in the periphery: on the relation between firm-internal knowledge and local knowledge spillovers. Regional Studies, 2017, 51, 1219-1231.	4.4	62
15	VESTIGE: Adjuvant Immunotherapy in Patients With Resected Esophageal, Gastroesophageal Junction and Gastric Cancer Following Preoperative Chemotherapy With High Risk for Recurrence (N+ and/or) Tj ETQq1 1	. 0 <b>.28</b> 4314	l rg₽T /Over
16	Combined Innovation Policy: Linking Scientific and Practical Knowledge in Innovation Systems. European Planning Studies, 2013, 21, 1919-1936.	2.9	56
17	The Effect of Postoperative Complications After Minimally Invasive Esophagectomy on Long-term Survival. Annals of Surgery, 2021, 274, e1129-e1137.	4.2	54
18	Risk Prediction Model of 90-Day Mortality After Esophagectomy for Cancer. JAMA Surgery, 2021, 156, 836.	4.3	41

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19	Definition of oligometastatic esophagogastric cancer and impact of local oligometastasis-directed treatment: AÂsystematic review and meta-analysis. European Journal of Cancer, 2022, 166, 254-269.	2.8	40
20	Delayed emptying of the gastric conduit after esophagectomy. Journal of Thoracic Disease, 2019, 11, S835-S844.	1.4	38
21	Predictors for failure of stent treatment for benign esophageal perforations - a single center 10-year experience. World Journal of Gastroenterology, 2014, 20, 10613.	3.3	37
22	Lasting Symptoms After Esophageal Resection (LASER). Annals of Surgery, 2022, 275, e392-e400.	4.2	36
23	Nasogastric decompression following esophagectomy: a systematic literature review and meta-analysis. Ecological Management and Restoration, 2016, 30, 1-8.	0.4	33
24	Treatment of esophageal anastomotic leakage with self-expanding metal stents: analysis of risk factors for treatment failure. Endoscopy International Open, 2016, 04, E420-E426.	1.8	32
25	Fully covered stents are similar to semi-covered stents with regard to migration in palliative treatment of malignant strictures of the esophagus and gastric cardia: results of a randomized controlled trial. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 4025-4033.	2.4	31
26	Proximity and the trust formation process. European Planning Studies, 2019, 27, 841-861.	2.9	31
27	Thoracoscopic side-to-side esophagogastrostomy by use of linear stapler—a simplified technique facilitating a minimally invasive Ivor-Lewis operation. Langenbeck's Archives of Surgery, 2016, 401, 315-322.	1.9	30
28	No Association between Gastroesophageal Reflux and Cancers of the Larynx and Pharynx. Cancer Epidemiology Biomarkers and Prevention, 2005, 14, 1194-1197.	2.5	29
29	Transplantation of tissueâ€engineered cell sheets for stricture prevention after endoscopic submucosal dissection of the oesophagus. United European Gastroenterology Journal, 2016, 4, 741-753.	3.8	29
30	Outcomes after totally minimally invasive <i>versus</i> hybrid and open Ivor Lewis oesophagectomy: results from the International Esodata Study Group. British Journal of Surgery, 2022, 109, 283-290.	0.3	29
31	Effects on heart function of neoadjuvant chemotherapy and chemoradiotherapy in patients with cancer in the esophagus or gastroesophageal junction – a prospective cohort pilot study within a randomized clinical trial. Radiation Oncology, 2015, 10, 16.	2.7	28
32	Waiting time for cancer treatment and mental health among patients with newly diagnosed esophageal or gastric cancer: a nationwide cohort study. BMC Cancer, 2017, 17, 2.	2.6	27
33	Current trends in multimodality treatment of esophageal and gastroesophageal junction cancer – Review article. Surgical Oncology, 2017, 26, 290-295.	1.6	27
34	Definitions and treatment of oligometastatic oesophagogastric cancer according to multidisciplinary tumour boards in Europe. European Journal of Cancer, 2022, 164, 18-29.	2.8	27
35	Nutritional route in oesophageal resection trial II (NUTRIENT II): study protocol for a multicentre open-label randomised controlled trial. BMJ Open, 2016, 6, e011979.	1.9	25
36	Surgical Morbidity and Mortality From the Multicenter Randomized Controlled NeoRes II Trial. Annals of Surgery, 2020, 272, 684-689.	4.2	24

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37	The relation between body mass and gastro-oesophageal reflux. Bailliere's Best Practice and Research in Clinical Gastroenterology, 2004, 18, 1117-1123.	2.4	23
38	A systematic review and meta-analysis comparing partial stomach partitioning gastrojejunostomy versus conventional gastrojejunostomy for malignant gastroduodenal obstruction. Langenbeck's Archives of Surgery, 2016, 401, 777-785.	1.9	21
39	The HLA-DQβ1 insertion is a strong achalasia risk factor and displays a geospatial north–south gradient among Europeans. European Journal of Human Genetics, 2016, 24, 1228-1231.	2.8	21
40	Implementation of minimally invasive esophagectomy in a tertiary referral center for esophageal cancer. Journal of Thoracic Disease, 2017, 9, S817-S825.	1.4	21
41	Regional innovation policy and coordination: Illustrations from Southern Sweden. Science and Public Policy, 2015, 42, 147-161.	2.4	20
42	Pulmonary function and cardiac stress test after multimodality treatment of esophageal cancer. Practical Radiation Oncology, 2016, 6, e53-e59.	2.1	20
43	Health-related quality of life in a randomized trial of neoadjuvant chemotherapy or chemoradiotherapy plus surgery in patients with oesophageal cancer (NeoRes trial). British Journal of Surgery, 2019, 106, 1452-1463.	0.3	19
44	Relief of dysphagia during neoadjuvant treatment for cancer of the esophagus or gastroesophageal junction. Ecological Management and Restoration, 2016, 29, 442-447.	0.4	18
45	Postgastrectomy follow-up in the West: evidence base, guidelines, and daily practice. Gastric Cancer, 2017, 20, 135-140.	5.3	17
46	Neoadjuvant chemoradiotherapy may increase the risk of severe anastomotic complications after esophagectomy with cervical anastomosis. Langenbeck's Archives of Surgery, 2016, 401, 323-331.	1.9	15
47	Knowledge externalities and firm heterogeneity: Effects on high and low growth firms. Papers in Regional Science, 2019, 98, 93-115.	1.9	14
48	Regional variations in cholecystectomy rates in Sweden: impact on complications of gallstone disease. Scandinavian Journal of Gastroenterology, 2016, 51, 465-471.	1.5	11
49	Effects of neoadjuvant chemoradiotherapy vs chemotherapy alone on the relief of dysphagia in esophageal cancer patients: secondary endpoint analysis in a randomized trial. Ecological Management and Restoration, 2019, 32, .	0.4	11
50	Palliation of dysphagia in metastatic oesogastric cancers: An international multidisciplinary position. European Journal of Cancer, 2020, 135, 103-112.	2.8	11
51	Endoscopic vacuum therapy for anastomotic leak after esophagectomy: a single-center's early experience. Ecological Management and Restoration, 2021, 34, .	0.4	11
52	Hybrid SPECT/CT imaging of sentinel nodes in esophageal cancer: first results. Acta Radiologica, 2013, 54, 369-373.	1.1	9
53	Early postoperative decrease of albumin is an independent predictor of major complications after oncological esophagectomy: A multicenter study. Journal of Surgical Oncology, 2021, 123, 462-469.	1.7	9
54	Health-related quality of life one year after the diagnosis of oesophageal cancer: a population-based study from the Swedish National Registry for Oesophageal and Gastric Cancer. BMC Cancer, 2021, 21, 1277.	2.6	9

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55	Surgical outcomes of oesophagectomy or gastrectomy due to cancer for patients ≥75 years of age: a singleâ€centre cohort study. ANZ Journal of Surgery, 2019, 89, 228-233.	0.7	8
56	Technique of open and minimally invasive intrathoracic reconstruction following esophagectomy—an expert consensus based on a modified Delphi process. Ecological Management and Restoration, 2021, 34, .	0.4	8
57	18F FDG-PET/CT evaluation of histological response after neoadjuvant treatment in patients with cancer of the esophagus or gastroesophageal junction. Acta Radiologica, 2019, 60, 578-585.	1.1	7
58	EORTC 1707 VESTIGE: Adjuvant immunotherapy in patients with resected gastric cancer following preoperative chemotherapy with high risk for recurrence (ypN+ and/or R1): An open-label randomized controlled phase II study Journal of Clinical Oncology, 2020, 38, TPS467-TPS467.	1.6	7
59	Psychiatric morbidity and its impact on surgical outcomes for esophageal and gastric cancer patients: A nationwide cohort study. Oncotarget, 2017, 8, 81305-81314.	1.8	7
60	Nationwide study of the impact of D2 lymphadenectomy on survival after gastric cancer surgery. BJS Open, 2020, 4, 424-431.	1.7	6
61	Surgical management of esophageal sarcoma: a multicenter European experience. Ecological Management and Restoration, 2018, 31, .	0.4	5
62	Evaluation of resection of the gastroesophageal junction and jejunal interposition (Merendino) Tj ETQq0 0 0 rgB experience. BMC Surgery, 2018, 18, 70.	[ /Overlock 1.3	10 Tf 50 46 5
63	Fit-for-Discharge Criteria after Esophagectomy: An International Expert Delphi Consensus. Ecological Management and Restoration, 2020, 34, .	0.4	5
64	Health related quality of life following open versus minimally invasive total gastrectomy for cancer: Results from a randomized clinical trial. European Journal of Surgical Oncology, 2022, 48, 553-560.	1.0	5
65	Cancer-Related Fatigue After Esophageal Cancer Surgery: Impact of Postoperative Complications. Annals of Surgical Oncology, 2022, 29, 2842-2851.	1.5	5
66	Treatment of anastomotic leak after esophagectomy: insights of an international case vignette survey and expert discussions. Ecological Management and Restoration, 2022, , .	0.4	5
67	<p>Medical Student And Faculty Perceptions Of Undergraduate Surgical Training In The South African And Swedish Tertiary Institutions: A Cross-Sectional Survey</p> . Advances in Medical Education and Practice, 2019, Volume 10, 855-866.	1.5	4
68	Patient-reported outcomes after oesophagectomy in the multicentre LASER study. British Journal of Surgery, 2021, 108, 1090-1096.	0.3	4
69	Impact of co-morbidity on reoperation or death within 90Âdays of surgery for oesophageal cancer. BJS Open, 2021, 5, .	1.7	4
70	Extent of lymphadenectomy has no impact on postoperative complications after gastric cancer surgery in Sweden. Chinese Journal of Cancer Research: Official Journal of China Anti-Cancer Association, Beijing Institute for Cancer Research, 2017, 29, 313-322.	2.2	4
71	Endoscopic sphincterotomy and risk of cholangiocarcinoma: a population-based cohort study in Finland and Sweden. Endoscopy International Open, 2016, 04, E1096-E1100.	1.8	3
72	Pulse oximetric assessment of anatomical vascular contribution to tissue perfusion in the gastric conduit. ANZ Journal of Surgery, 2018, 88, 727-732.	0.7	3

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73	Implementation of minimally invasive gastrectomy for gastric cancer in a western tertiary referral center. BMC Surgery, 2020, 20, 157.	1.3	3
74	Assessment of energy intake and total energy expenditure in a series of patients who have undergone oesophagectomy following neoadjuvant treatment. Clinical Nutrition ESPEN, 2020, 37, 121-128.	1.2	3
75	Partial stomach-partitioning gastrojejunostomy for gastric outlet obstruction: A cohort study based on consecutive case series from a single center. Asian Journal of Surgery, 2022, 45, 326-331.	0.4	3
76	Impact of surgical resection rate on survival in gastric cancer: nationwide study. BJS Open, 2021, 5, .	1.7	3
77	The role of initial and gradual trust in growing and unlocking regional industrial specialisations. Industry and Innovation, 2022, 29, 825-846.	3.1	3
78	Esophagectomy for eosinophilic esophagitis. European Surgery - Acta Chirurgica Austriaca, 2016, 48, 241-245.	0.7	2
79	Correspondence. British Journal of Surgery, 2018, 106, 152-153.	0.3	2
80	"Sentinel lymph node imaging with sequential SPECT/CT lymphoscintigraphy before and after neoadjuvant chemoradiotherapy in patients with cancer of the oesophagus or gastro-oesophageal junction – a pilot study― Cancer Imaging, 2018, 18, 53.	2.8	2
81	The Combination of Respiratory Comorbidity and Neoadjuvant Chemoradiotherapy May Double the Risk of Anastomotic Leaks After Esophagectomy: Do We Know Enough to Tailor Neoadjuvant Therapies, or Take Other Preemptive Measures in High-Risk Patients?. Annals of Surgical Oncology, 2019, 26, 2660-2661	1.5	2
82	Long-term weight development after esophagectomy for cancer—comparison between open Ivor–Lewis and minimally invasive surgical approaches. Ecological Management and Restoration, 2019, 32, .	0.4	2
83	Laparoscopic Versus Open Gastrectomy for Cancer: A Western Center Cohort Study. Journal of Surgical Research, 2020, 247, 372-379.	1.6	2
84	Exploring the concept of centralization of surgery for benign esophageal diseases: a Delphi based consensus from the European Society for Diseases of the Esophagus. Ecological Management and Restoration, 2021, 34, .	0.4	2
85	The role of neoadjuvant chemoradiotherapy in multimodality treatment of esophageal or gastroesophageal junction cancer. Journal of Thoracic Disease, 2018, 10, E87-E89.	1.4	1
86	Preoperative detection of sentinel lymph nodes with hybrid SPECT/computed tomography imaging may improve the accuracy of sentinel lymph node biopsies in patients with early stages of cancer of the oesophagus or gastro-oesophageal junction. Nuclear Medicine Communications, 2020, 41, 1153-1160.	1.1	1
87	ASO Visual Abstract: Cancer-Related Fatigue after Esophageal Cancer Surgery—Impact of Postoperative Complications. Annals of Surgical Oncology, 2022, , 1.	1.5	1
88	Gastric and gastroesophageal junction cancer: Risk factors and prophylactic treatments for prevention of peritoneal recurrence after curative intent surgery. Annals of Gastroenterological Surgery, 0, , .	2.4	1
89	Body Mass Index-Adjusted Weight Loss Grading System and Cancer-Related Fatigue in Survivors 1ÂYear After Esophageal Cancer Surgery. Annals of Surgical Oncology, 2022, 29, 4502-4510.	1.5	1
90	PS02.015: EXPERIENCES OF COMPLETE LAPARO-THORACOSCOPIC MINIMALLY INVASIVE ESOPHAGECTOMY WITH SIDE-TO-SIDE ESOPHAGOGASTROSTOMY. Ecological Management and Restoration, 2018, 31, 124-124.	0.4	0

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91	P116 A PILOT STUDY ON ENERGY INTAKE AND TOTAL ENERGY EXPENDITURE, USING A MULTI SENSOR DEVICE, IN OESOPHAGEAL CANCER PATIENTS DURING THE ENTIRE COURSE OF MODERN MULTIMODALITY TREATMENT. Ecological Management and Restoration, 2019, 32, .	0.4	0
92	O187 ANASTOMOTIC TECHNIQUES AND ASSOCIATED MORBIDITY IN TOTAL MINIMALLY-INVASIVE TRANSTHORACIC ESOPHAGECTOMY $\hat{a} \in$ RESULTS FROM THE ESOBENCHMARK DATABASE. Ecological Management and Restoration, 2019, 32, .	0.4	0
93	Increased risk for uterine cancer among first-degree relatives to Swedish gastric cancer patients. Hereditary Cancer in Clinical Practice, 2020, 18, 12.	1.5	0
94	Definitive chemoradiotherapy plus cetuximab for cancer in the oesophagus or gastro-oesophageal junction. Cancer Treatment and Research Communications, 2020, 24, 100187.	1.7	0
95	546 INTENSIVE SURVEILLANCE AFTER CURATIVE INTENT SURGERY FOR ESOPHAGEAL CANCER: INITIAL RESULTS OF THE ENSURE STUDY. Ecological Management and Restoration, 2021, 34, .	0.4	0
96	658 BETTER SURVIVAL IN FEMALES THAN MALES AFTER RESECTION OF OESOPHAGEAL OR GASTROESOPHAGEAL JUNCTION CANCER: A COHORT STUDY IN SWEDEN. Ecological Management and Restoration, 2021, 34, .	0.4	0
97	792 OUTCOMES AFTER TOTALLY MINIMALLY INVASIVE VERSUS HYBRID OR OPEN IVOR LEWIS ESOPHAGECTOMY: RESULTS FROM THE INTERNATIONAL ESODATA STUDY GROUP Ecological Management and Restoration, 2021, 34, .	0.4	0
98	Mentorship during undergraduate surgical training: comparing perceptions of medical students and faculty at two institutions in South Africa and Sweden. South African Journal of Surgery, 2021, 59, 183-190.	0.2	0
99	ASO Visual Abstract: Body Mass Index-Adjusted Weight-Loss Grading System and Cancer-Related Fatigue in Survivors 1 Year After EsophagealCancer Surgery. Annals of Surgical Oncology, 2022, , 1.	1.5	0