## Chrissie Thakwalakwa

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/6006056/publications.pdf Version: 2024-02-01



#	Article	IF	CITATIONS
1	Complementary Feeding With Fortified Spread and Incidence of Severe Stunting in 6- to 18-Month-Old Rural Malawians. JAMA Pediatrics, 2008, 162, 619.	3.0	127
2	Abnormal Gut Integrity Is Associated With Reduced Linear Growth in Rural Malawian Children. Journal of Pediatric Gastroenterology and Nutrition, 2012, 55, 747-750.	1.8	93
3	Children Successfully Treated for Moderate Acute Malnutrition Remain at Risk for Malnutrition and Death in the Subsequent Year after Recovery. Journal of Nutrition, 2013, 143, 215-220.	2.9	88
4	A novel fortified blended flour, corn-soy blend â€~plus-plus,' is not inferior to lipid-based ready-to-use supplementary foods for the treatment of moderate acute malnutrition in Malawian children. American Journal of Clinical Nutrition, 2012, 95, 212-219.	4.7	83
5	Effect of complementary feeding with lipidâ€based nutrient supplements and corn–soy blend on the incidence of stunting and linear growth among 6†to 18â€monthâ€old infants and children in rural <scp>M</scp> alawi. Maternal and Child Nutrition, 2015, 11, 132-143.	3.0	79
6	Postintervention growth of Malawian children who received 12-mo dietary complementation with a lipid-based nutrient supplement or maize-soy flour. American Journal of Clinical Nutrition, 2009, 89, 382-390.	4.7	72
7	Including whey protein and whey permeate in ready-to-use supplementary food improves recovery rates in children with moderate acute malnutrition: a randomized, double-blind clinical trial. American Journal of Clinical Nutrition, 2016, 103, 926-933.	4.7	54
8	Breast Milk Intake Is Not Reduced More by the Introduction of Energy Dense Complementary Food than by Typical Infant Porridge. Journal of Nutrition, 2007, 137, 1828-1833.	2.9	52
9	Consumption of Animal-Source Protein is Associated with Improved Height-for-Age z Scores in Rural Malawian Children Aged 12–36 Months. Nutrients, 2019, 11, 480.	4.1	42
10	A Lipid-Based Nutrient Supplement but Not Corn-Soy Blend Modestly Increases Weight Gain among 6- to 18-Month-Old Moderately Underweight Children in Rural Malawi. Journal of Nutrition, 2010, 140, 2008-2013.	2.9	41
11	Multiple Micronutrient Supplementation Transiently Ameliorates Environmental Enteropathy in Malawian Children Aged 12–35 Months in a Randomized Controlled Clinical Trial. Journal of Nutrition, 2014, 144, 2059-2065.	2.9	41
12	Developmental outcomes among 18â€monthâ€old Malawians after a year of complementary feeding with lipidâ€based nutrient supplements or cornâ€soy flour. Maternal and Child Nutrition, 2012, 8, 239-248.	3.0	39
13	Zinc or Albendazole Attenuates the Progression of Environmental Enteropathy: A Randomized Controlled Trial. Clinical Gastroenterology and Hepatology, 2014, 12, 1507-1513.e1.	4.4	35
14	A Combined Intervention of Zinc, Multiple Micronutrients, and Albendazole Does Not Ameliorate Environmental Enteric Dysfunction or Stunting in Rural Malawian Children in a Double-Blind Randomized Controlled Trial. Journal of Nutrition, 2017, 147, 97-103.	2.9	34
15	Supplementary feeding with fortified spread among moderately underweight 6–18â€monthâ€old rural Malawian children. Maternal and Child Nutrition, 2009, 5, 159-170.	3.0	33
16	Highâ€Oleic Readyâ€ŧoâ€Use Therapeutic Food Maintains Docosahexaenoic Acid Status in Severe Malnutrition. Journal of Pediatric Gastroenterology and Nutrition, 2015, 61, 138-143.	1.8	33
17	Complementary feeding with cowpea reduces growth faltering in rural Malawian infants: a blind, randomized controlled clinical trial. American Journal of Clinical Nutrition, 2017, 106, 1500-1507.	4.7	33
18	Malawian mothers' attitudes towards the use of two supplementary foods for moderately malnourished children. Appetite, 2009, 53, 195-202.	3.7	28

#	Article	IF	CITATIONS
19	Effect of a package of health and nutrition services on sustained recovery in children after moderate acute malnutrition and factors related to sustaining recovery: a cluster-randomized trial. American Journal of Clinical Nutrition, 2017, 106, 657-666.	4.7	25
20	Additional Common Bean in the Diet of Malawian Children Does Not Affect Linear Growth, but Reduces Intestinal Permeability. Journal of Nutrition, 2018, 148, 267-274.	2.9	25
21	Extending Supplementary Feeding for Children Younger Than 5 Years With Moderate Acute Malnutrition Leads to Lower Relapse Rates. Journal of Pediatric Gastroenterology and Nutrition, 2015, 60, 544-549.	1.8	22
22	Statoviruses, A novel taxon of RNA viruses present in the gastrointestinal tracts of diverse mammals. Virology, 2017, 504, 36-44.	2.4	16
23	Effect of cowpea flour processing on the chemical properties and acceptability of a novel cowpea blended maize porridge. PLoS ONE, 2018, 13, e0200418.	2.5	16
24	Lipid-Based Nutrient Supplements Do Not Affect the Risk of Malaria or Respiratory Morbidity in 6- to 18-Month-Old Malawian Children in a Randomized Controlled Trial. Journal of Nutrition, 2014, 144, 1835-1842.	2.9	14
25	Plasma endotoxin core antibody concentration and linear growth are unrelated in rural Malawian children aged 2–5Âyears. BMC Research Notes, 2015, 8, 258.	1.4	14
26	Growth and HIV-Free Survival of HIV-Exposed Infants in Malawi. Journal of Acquired Immune Deficiency Syndromes (1999), 2014, 66, 181-187.	2.1	10
27	Household-level factors associated with relapse following discharge from treatment for moderate acute malnutrition. British Journal of Nutrition, 2018, 119, 1039-1046.	2.3	10
28	Lactoferrin and lysozyme to reduce environmental enteric dysfunction and stunting in Malawian children: study protocol for a randomized controlled trial. Trials, 2017, 18, 523.	1.6	9
29	Resistant starch does not affect zinc homeostasis in rural Malawian children. Journal of Trace Elements in Medicine and Biology, 2015, 30, 43-48.	3.0	7