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	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
2	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
3	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
4	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
5	Statoviruses, A novel taxon of RNA viruses present in the gastrointestinal tracts of diverse mammals. Virology, 2017, 504, 36-44.	2.4	16
6	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
7	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
8	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
9	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
10	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
11	Highâ€Oleic Readyâ€toâ€Use Therapeutic Food Maintains Docosahexaenoic Acid Status in Severe Malnutrition. Journal of Pediatric Gastroenterology and Nutrition, 2015, 61, 138-143.	1.8	33
12	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
13	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
14	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
15	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
16	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
17	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
18	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

#	Article	IF	CITATIONS
19	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
20	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
21	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
22	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
23	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
24	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
25	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
26	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
27	Malawian mothers' attitudes towards the use of two supplementary foods for moderately malnourished children. Appetite, 2009, 53, 195-202.	3.7	28
28	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
29	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