

# Pia R Kamstrup

## List of Publications by Year in descending order

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Version: 2024-02-01

46  
papers

8,153  
citations

136950

32  
h-index

197818

49  
g-index

49  
all docs

49  
docs citations

49  
times ranked

10880  
citing authors

#	ARTICLE	IF	CITATIONS
1	Lipoprotein(a) Levels at Birth and in Early Childhood: The COMPARE Study. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2022, 107, 324-335.	3.6	20
2	Elevated lipoprotein(a) in mitral and aortic valve calcification and disease: The Copenhagen General Population Study. <i>Atherosclerosis</i> , 2022, 349, 166-174.	0.8	21
3	Lipoprotein(a) and Body Mass Compound the Risk of Calcific Aortic Valve Disease. <i>Journal of the American College of Cardiology</i> , 2022, 79, 545-558.	2.8	12
4	Lipoprotein(a) and Cardiovascular Disease. <i>Clinical Chemistry</i> , 2021, 67, 154-166.	3.2	107
5	Low lipoprotein(a) levels and risk of disease in a large, contemporary, general population study. <i>European Heart Journal</i> , 2021, 42, 1147-1156.	2.2	36
6	Comparison of 16 Serological SARS-CoV-2 Immunoassays in 16 Clinical Laboratories. <i>Journal of Clinical Microbiology</i> , 2021, 59, .	3.9	97
7	Coagulation parameters in the newborn and infant—the Copenhagen Baby Heart and COMPARE studies. <i>Clinical Chemistry and Laboratory Medicine</i> , 2021, .	2.3	1
8	Lipoprotein(a)-Lowering by 50 mg/dL (105 nmol/L) May Be Needed to Reduce Cardiovascular Disease 20% in Secondary Prevention. <i>Arteriosclerosis, Thrombosis, and Vascular Biology</i> , 2020, 40, 255-266.	2.4	150
9	Quantifying atherogenic lipoproteins for lipid-lowering strategies: consensus-based recommendations from EAS and EFLM. <i>Clinical Chemistry and Laboratory Medicine</i> , 2020, 58, 496-517.	2.3	119
10	Quantifying atherogenic lipoproteins for lipid-lowering strategies: Consensus-based recommendations from EAS and EFLM. <i>Atherosclerosis</i> , 2020, 294, 46-61.	0.8	137
11	Elevated Lipoprotein(a) and Risk of Ischemic Stroke. <i>Journal of the American College of Cardiology</i> , 2019, 74, 54-66.	2.8	131
12	Response to “Lipoprotein(a): it is not the cholesterol content: it is the apolipoprotein(a)!”™. <i>European Heart Journal</i> , 2019, 40, 3577-3577.	2.2	2
13	High lipoprotein(a) and high risk of mortality. <i>European Heart Journal</i> , 2019, 40, 2760-2770.	2.2	149
14	Copenhagen Baby Heart Study: a population study of newborns with prenatal inclusion. <i>European Journal of Epidemiology</i> , 2019, 34, 79-90.	5.7	32
15	Quantifying Atherogenic Lipoproteins: Current and Future Challenges in the Era of Personalized Medicine and Very Low Concentrations of LDL Cholesterol. A Consensus Statement from EAS and EFLM. <i>Clinical Chemistry</i> , 2018, 64, 1006-1033.	3.2	189
16	Association of LPA Variants With Risk of Coronary Disease and the Implications for Lipoprotein(a)-Lowering Therapies. <i>JAMA Cardiology</i> , 2018, 3, 619.	6.1	428
17	Protein-altering variants associated with body mass index implicate pathways that control energy intake and expenditure in obesity. <i>Nature Genetics</i> , 2018, 50, 26-41.	21.4	286
18	Rare and low-frequency coding variants alter human adult height. <i>Nature</i> , 2017, 542, 186-190.	27.8	544

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19	Fifteen new risk loci for coronary artery disease highlight arterial-wall-specific mechanisms. <i>Nature Genetics</i> , 2017, 49, 1113-1119.	21.4	260
20	Oxidized Phospholipids and Risk of Calcific Aortic Valve Disease. <i>Arteriosclerosis, Thrombosis, and Vascular Biology</i> , 2017, 37, 1570-1578.	2.4	60
21	Exome-wide association study of plasma lipids in >300,000 individuals. <i>Nature Genetics</i> , 2017, 49, 1758-1766.	21.4	470
22	Kringle IV Type 2, Not Low Lipoprotein(a), as a Cause of Diabetes: A Novel Genetic Approach Using SNPs Associated Selectively with Lipoprotein(a) Concentrations or with Kringle IV Type 2 Repeats. <i>Clinical Chemistry</i> , 2017, 63, 1866-1876.	3.2	28
23	Lipoprotein(a): the common, likely causal, yet elusive risk factor for cardiovascular disease. <i>Journal of Lipid Research</i> , 2017, 58, 1731-1732.	4.2	9
24	Effect of APOE $\epsilon$ Genotype on Lipoprotein(a) and the Associated Risk of Myocardial Infarction and Aortic Valve Stenosis. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2017, 102, 3390-3399.	3.6	20
25	Identification of new susceptibility loci for type 2 diabetes and shared etiological pathways with coronary heart disease. <i>Nature Genetics</i> , 2017, 49, 1450-1457.	21.4	218
26	Apolipoprotein(a) Kringle-IV Type 2 Copy Number Variation Is Associated with Venous Thromboembolism. <i>PLoS ONE</i> , 2016, 11, e0149427.	2.5	24
27	Fasting Is Not Routinely Required for Determination of a Lipid Profile: Clinical and Laboratory Implications Including Flagging at Desirable Concentration Cutpoints—A Joint Consensus Statement from the European Atherosclerosis Society and European Federation of Clinical Chemistry and Laboratory Medicine. <i>Clinical Chemistry</i> , 2016, 62, 930-946.	3.2	145
28	PCSK9 R46L Loss-of-Function Mutation Reduces Lipoprotein(a), LDL Cholesterol, and Risk of Aortic Valve Stenosis. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2016, 101, 3281-3287.	3.6	89
29	Lipoprotein(a) and familial hypercholesterolaemia — Authors' reply. <i>Lancet Diabetes and Endocrinology</i> , 2016, 4, 730-731.	11.4	2
30	Estimating the Population Impact of Lp(a) Lowering on the Incidence of Myocardial Infarction and Aortic Stenosis—Brief Report. <i>Arteriosclerosis, Thrombosis, and Vascular Biology</i> , 2016, 36, 2421-2423.	2.4	38
31	Fasting is not routinely required for determination of a lipid profile: clinical and laboratory implications including flagging at desirable concentration cut-points—a joint consensus statement from the European Atherosclerosis Society and European Federation of Clinical Chemistry and Laboratory Medicine. <i>European Heart Journal</i> , 2016, 37, 1944-1958.	2.2	542
32	High lipoprotein(a) as a possible cause of clinical familial hypercholesterolaemia: a prospective cohort study. <i>Lancet Diabetes and Endocrinology</i> , 2016, 4, 577-587.	11.4	218
33	Elevated Lipoprotein(a) Levels, LPA Risk Genotypes, and Increased Risk of Heart Failure in the General Population. <i>JACC: Heart Failure</i> , 2016, 4, 78-87.	4.1	106
34	Increased Remnant Cholesterol Explains Part of Residual Risk of All-Cause Mortality in 5414 Patients with Ischemic Heart Disease. <i>Clinical Chemistry</i> , 2016, 62, 593-604.	3.2	138
35	Elevated Lipoprotein(a) Does Not Cause Low-Grade Inflammation Despite Causal Association With Aortic Valve Stenosis and Myocardial Infarction: A Study of 100 578 Individuals from the General Population. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2015, 100, 2690-2699.	3.6	43
36	Lipoprotein(a): Fasting and nonfasting levels, inflammation, and cardiovascular risk. <i>Atherosclerosis</i> , 2014, 234, 95-101.	0.8	83

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37	Elevated Lipoprotein(a) and Risk of Aortic Valve Stenosis in the General Population. Journal of the American College of Cardiology, 2014, 63, 470-477.	2.8	421
38	Extreme Lipoprotein(a) Levels and Improved Cardiovascular Risk Prediction. Journal of the American College of Cardiology, 2013, 61, 1146-1156.	2.8	210
39	Lipoprotein(a) concentrations, isoform size, and risk of type 2 diabetes: a Mendelian randomisation study. Lancet Diabetes and Endocrinology, 2013, 1, 220-227.	11.4	108
40	Genetic Associations with Valvular Calcification and Aortic Stenosis. New England Journal of Medicine, 2013, 368, 503-512.	27.0	767
41	Genetic Evidence That Lipoprotein(a) Associates With Atherosclerotic Stenosis Rather Than Venous Thrombosis. Arteriosclerosis, Thrombosis, and Vascular Biology, 2012, 32, 1732-1741.	2.4	146
42	Lipoprotein(a) and risk of myocardial infarction – genetic epidemiologic evidence of causality. Scandinavian Journal of Clinical and Laboratory Investigation, 2011, 71, 87-93.	1.2	33
43	Lipoprotein(a) and ischemic heart disease – A causal association? A review. Atherosclerosis, 2010, 211, 15-23.	0.8	92
44	Genetically Elevated Lipoprotein(a) and Increased Risk of Myocardial Infarction. JAMA - Journal of the American Medical Association, 2009, 301, 2331.	7.4	977
45	Extreme Lipoprotein(a) Levels and Risk of Myocardial Infarction in the General Population. Circulation, 2008, 117, 176-184.	1.6	408
46	Pentanucleotide Repeat Polymorphism, Lipoprotein(a) Levels, and Risk of Ischemic Heart Disease. Journal of Clinical Endocrinology and Metabolism, 2008, 93, 3769-3776.	3.6	21