## Kristoffer Strĥlin

List of Publications by Year in descending order

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Version: 2024-02-01

63 papers 3,302 citations

304743 22 h-index 52 g-index

71 all docs

71 docs citations

71 times ranked

8256 citing authors

#	Article	IF	CITATIONS
1	Peripheral Oxygen Saturation Facilitates Assessment of Respiratory Dysfunction in the Sequential Organ Failure Assessment Score With Implications for the Sepsis-3 Criteria. Critical Care Medicine, 2022, 50, e272-e283.	0.9	9
2	Impact of the Alpha VOC on disease severity in SARS-CoV-2-positive adults in Sweden. Journal of Infection, 2022, 84, e3-e5.	3.3	11
3	Mortality in hospitalized COVID-19 patients was associated with the COVID-19 admission rate during the first year of the pandemic in Sweden. Infectious Diseases, 2022, 54, 145-151.	2.8	20
4	COVIDâ€19â€specific metabolic imprint yields insights into multiorgan system perturbations. European Journal of Immunology, 2022, 52, 503-510.	2.9	7
5	Ventilator-Associated Lower Respiratory Tract Bacterial Infections in COVID-19 Compared With Non-COVID-19 Patients*. Critical Care Medicine, 2022, 50, 825-836.	0.9	14
6	Correlation of clinical sepsis definitions with microbiological characteristics in patients admitted through a sepsis alert system; a prospective cohort study. Annals of Clinical Microbiology and Antimicrobials, 2022, 21, 7.	3.8	4
7	Sustained elevation of soluble B- and T- lymphocyte attenuator predicts long-term mortality in patients with bacteremia and sepsis. PLoS ONE, 2022, 17, e0265818.	2.5	1
8	Characterization of the Upper Respiratory Bacterial Microbiome in Critically III COVID-19 Patients. Biomedicines, 2022, 10, 982.	3.2	8
9	The Karolinska <scp>KI</scp> /K <scp>COVID</scp> â€19 immune atlas: An open resource for immunological research and educational purposes. Scandinavian Journal of Immunology, 2022, 96, .	2.7	4
10	Characteristics and outcomes of patients with COVIDâ€19 admitted to ICU in a tertiary hospital in Stockholm, Sweden. Acta Anaesthesiologica Scandinavica, 2021, 65, 76-81.	1.6	45
11	SARSâ€CoVâ€2â€specific humoral and cellular immunity persists through 9 months irrespective of COVIDâ€19 severity at hospitalisation. Clinical and Translational Immunology, 2021, 10, e1306.	3.8	36
12	Mortality trends among hospitalised COVID-19 patients in Sweden: A nationwide observational cohort study. Lancet Regional Health - Europe, The, 2021, 4, 100054.	5.6	37
13	Discriminatory plasma biomarkers predict specific clinical phenotypes of necrotizing soft-tissue infections. Journal of Clinical Investigation, 2021, 131, .	8.2	7
14	High-dimensional profiling reveals phenotypic heterogeneity and disease-specific alterations of granulocytes in COVID-19. Proceedings of the National Academy of Sciences of the United States of America, 2021, 118, .	7.1	52
15	Major alterations in the mononuclear phagocyte landscape associated with COVID-19 severity. Proceedings of the National Academy of Sciences of the United States of America, 2021, 118, .	7.1	104
16	Single-Sampling Strategy vs. Multi-Sampling Strategy for Blood Cultures in Sepsis: A Prospective Non-inferiority Study. Frontiers in Microbiology, 2020, 11, 1639.	3 <b>.</b> 5	11
17	Robust T Cell Immunity in Convalescent Individuals with Asymptomatic or Mild COVID-19. Cell, 2020, 183, 158-168.e14.	28.9	1,561
18	Natural killer cell immunotypes related to COVID-19 disease severity. Science Immunology, 2020, 5, .	11.9	344

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19	Innate lymphoid cell composition associates with COVIDâ€19 disease severity. Clinical and Translational Immunology, 2020, 9, e1224.	3.8	56
20	A Nonfunctional Opsonic Antibody Response Frequently Occurs after Pneumococcal Pneumonia and Is Associated with Invasive Disease. MSphere, 2020, 5, .	2.9	1
21	Performance of PCR/Electrospray Ionization-Mass Spectrometry on Whole Blood for Detection of Bloodstream Microorganisms in Patients with Suspected Sepsis. Journal of Clinical Microbiology, 2020, 58, .	3.9	9
22	MAIT cell activation and dynamics associated with COVID-19 disease severity. Science Immunology, 2020, 5, .	11.9	147
23	Low prevalence of bloodstream infection and high blood culture contamination rates in patients with COVID-19. PLoS ONE, 2020, 15, e0242533.	2.5	42
24	Corrected and Republished from: A Nonfunctional Opsonic Antibody Response Frequently Occurs after Pneumococcal Pneumonia and Is Associated with Invasive Disease. MSphere, 2020, 5, .	2.9	2
25	Title is missing!. , 2020, 15, e0242533.		0
26	Title is missing!. , 2020, 15, e0242533.		0
27	Title is missing!. , 2020, 15, e0242533.		0
28	Title is missing!. , 2020, 15, e0242533.		0
29	Title is missing!. , 2020, 15, e0242533.		0
30	Title is missing!. , 2020, 15, e0242533.		0
31	Title is missing!. , 2020, 15, e0242533.		0
32	Title is missing!. , 2020, 15, e0242533.		0
33	Reply to Spyridou et al. Clinical Infectious Diseases, 2019, 68, 351-351.	5.8	1
34	Caspaseâ€1 inflammasome activity in patients with Staphylococcus aureus bacteremia. Microbiology and Immunology, 2019, 63, 487-499.	1.4	13
35	16S rDNA droplet digital PCR for monitoring bacterial DNAemia in bloodstream infections. PLoS ONE, 2019, 14, e0224656.	2.5	18
36	High <i>nuc</i> DNA load in whole blood is associated with sepsis, mortality and immune dysregulation in <i>Staphylococcus aureus</i> bacteraemia. Infectious Diseases, 2019, 51, 216-226.	2.8	21

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37	Plasma concentrations of secretory leukocyte protease inhibitor (SLPI) differ depending on etiology and severity in community-onset bloodstream infection. European Journal of Clinical Microbiology and Infectious Diseases, 2019, 38, 1425-1434.	2.9	2
38	Clinical implementation of molecular methods in detection of microorganisms from blood with a special focus on PCR electrospray ionization mass spectrometry. Expert Review of Molecular Diagnostics, 2019, 19, 389-395.	3.1	7
39	PCR with electrospray ionization-mass spectrometry on bronchoalveolar lavage for detection of invasive mold infections in hematological patients. PLoS ONE, 2019, 14, e0212812.	2.5	3
40	Demise of Polymerase Chain Reaction/Electrospray Ionization-Mass Spectrometry as an Infectious Diseases Diagnostic Tool. Clinical Infectious Diseases, 2018, 66, 452-455.	5.8	44
41	Management of community-acquired pneumonia in immunocompetent adults: updated Swedish guidelines 2017. Infectious Diseases, 2018, 50, 247-272.	2.8	36
42	PCR/Electrospray Ionization-Mass Spectrometry as an Infectious Disease Diagnostic Tool. , 2018, , 481-490.		0
43	High HMGB1 levels in sputum are related to pneumococcal bacteraemia but not to disease severity in community-acquired pneumonia. Scientific Reports, 2018, 8, 13428.	3.3	13
44	Dynamics of monocytic HLA-DR expression differs between bacterial etiologies during the course of bloodstream infection. PLoS ONE, 2018, 13, e0192883.	2.5	20
45	Expression of <i>HLAâ€DRA</i> and <i>CD74</i> mRNA in whole blood during the course of complicated and uncomplicated <i>Staphylococcus aureus</i> bacteremia. Microbiology and Immunology, 2017, 61, 442-451.	1.4	3
46	Broad-Range Detection of Microorganisms Directly from Bronchoalveolar Lavage Specimens by PCR/Electrospray Ionization-Mass Spectrometry. PLoS ONE, 2017, 12, e0170033.	2.5	18
47	Metabolites in Blood for Prediction of Bacteremic Sepsis in the Emergency Room. PLoS ONE, 2016, 11, e0147670.	2.5	48
48	Routine atypical antibiotic coverage is not necessary in hospitalised patients with non-severe community-acquired pneumonia. International Journal of Antimicrobial Agents, 2016, 48, 224-225.	2.5	1
49	Quantitative Real-Time Polymerase Chain Reaction Measurement of HLA-DRA Gene Expression in Whole Blood Is Highly Reproducible and Shows Changes That Reflect Dynamic Shifts in Monocyte Surface HLA-DR Expression during the Course of Sepsis. PLoS ONE, 2016, 11, e0154690.	2.5	26
50	The IRIDICA PCR/Electrospray Ionization–Mass Spectrometry Assay on Bronchoalveolar Lavage for Bacterial Etiology in Mechanically Ventilated Patients with Suspected Pneumonia. PLoS ONE, 2016, 11, e0159694.	2.5	17
51	Evaluation of a Commercial Multiplex PCR Assay for Detection of Pathogen DNA in Blood from Patients with Suspected Sepsis. PLoS ONE, 2016, 11, e0167883.	2.5	29
52	Clinical and Microbiological Factors Associated with High Nasopharyngeal Pneumococcal Density in Patients with Pneumococcal Pneumonia. PLoS ONE, 2015, 10, e0140112.	2.5	18
53	Association between Serotype-Specific Antibody Response and Serotype Characteristics in Patients with Pneumococcal Pneumonia, with Special Reference to Degree of Encapsulation and Invasive Potential. Vaccine Journal, 2014, 21, 1541-1549.	3.1	15
54	Comparison of Sputum and Nasopharyngeal Aspirate Samples and of the PCR Gene Targets <i>lytA</i> and Spn9802 for Quantitative PCR for Rapid Detection of Pneumococcal Pneumonia. Journal of Clinical Microbiology, 2014, 52, 83-89.	3.9	55

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55	Identification of Microorganisms by FilmArray and Matrix-Assisted Laser Desorption Ionization–Time of Flight Mass Spectrometry Prior to Positivity in the Blood Culture System. Journal of Clinical Microbiology, 2014, 52, 3230-3236.	3.9	19
56	Quantitative dataÂfrom the SeptiFast real-time PCR is associated with disease severity in patients with sepsis. BMC Infectious Diseases, 2014, 14, 155.	2.9	25
57	Preliminary results in quantitation of HLA-DRA by real-time PCR: a promising approach to identify immunosuppression in sepsis. Critical Care, 2013, 17, R223.	5.8	52
58	Definite, probable, and possible bacterial aetiologies of community-acquired pneumonia at different CRB-65 scores. Scandinavian Journal of Infectious Diseases, 2010, 42, 426-434.	1.5	29
59	Gas within the liver and polymicrobial bacteraemia due to colovenous fistula: Two cases in one month. Scandinavian Journal of Infectious Diseases, 2006, 38, 66-68.	1.5	2
60	Etiologic Diagnosis of Adult Bacterial Pneumonia by Culture and PCR Applied to Respiratory Tract Samples. Journal of Clinical Microbiology, 2006, 44, 643-645.	3.9	73
61	Design of a multiplex PCR for Streptococcus pneumoniae, Haemophilus influenzae, Mycoplasma pneumoniae and Chlamydophila pneumoniae to be used on sputum samples. Apmis, 2005, 113, 99-111.	2.0	65
62	Comparison of Two Urinary Antigen Tests for Establishment of Pneumococcal Etiology of Adult Community-Acquired Pneumonia. Journal of Clinical Microbiology, 2004, 42, 3620-3625.	3.9	61
63	Antibody response to the patient's own Haemophilus influenzae isolate can support the aetiology in lower respiratory tract infections. Brief report. Apmis, 2004, 112, 299-303.	2.0	5