

Theodore Pincus

List of Publications by Year in descending order

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Version: 2024-02-01

202
papers

20,385
citations

26630

56
h-index

10158

140
g-index

206
all docs

206
docs citations

206
times ranked

14517
citing authors

#	ARTICLE	IF	CITATIONS
1	2010 Rheumatoid arthritis classification criteria: An American College of Rheumatology/European League Against Rheumatism collaborative initiative. <i>Arthritis and Rheumatism</i> , 2010, 62, 2569-2581.	6.7	6,781
2	Assessment of patient satisfaction in activities of daily living using a modified stanford health assessment questionnaire. <i>Arthritis and Rheumatism</i> , 1983, 26, 1346-1353.	6.7	1,223
3	American College of Rheumatology/European League Against Rheumatism provisional definition of remission in rheumatoid arthritis for clinical trials. <i>Arthritis and Rheumatism</i> , 2011, 63, 573-586.	6.7	864
4	The american college of rheumatology 1991 revised criteria for the classification of global functional status in rheumatoid arthritis. <i>Arthritis and Rheumatism</i> , 1992, 35, 498-502.	6.7	762
5	Severe functional declines, work disability, and increased mortality in seventy-five rheumatoid arthritis patients studied over nine years. <i>Arthritis and Rheumatism</i> , 1984, 27, 864-872.	6.7	657
6	Measurement of Serum DNA-Binding Activity in Systemic Lupus Erythematosus. <i>New England Journal of Medicine</i> , 1969, 281, 701-705.	27.0	468
7	Toward a multidimensional health assessment questionnaire (MDHAQ): Assessment of advanced activities of daily living and psychological status in the patient-friendly health assessment questionnaire format. <i>Arthritis and Rheumatism</i> , 1999, 42, 2220-2230.	6.7	335
8	Increased expression of FcγRI/CD64 on circulating monocytes parallels ongoing inflammation and nephritis in lupus. <i>Arthritis Research and Therapy</i> , 2009, 11, R6.	3.5	297
9	Physical inactivity in patients with rheumatoid arthritis: Data from twenty-one countries in a cross-sectional, international study. <i>Arthritis and Rheumatism</i> , 2008, 59, 42-50.	6.7	277
10	RAPID3 (Routine Assessment of Patient Index Data 3), a Rheumatoid Arthritis Index Without Formal Joint Counts for Routine Care: Proposed Severity Categories Compared to Disease Activity Score and Clinical Disease Activity Index Categories. <i>Journal of Rheumatology</i> , 2008, 35, 2136-2147.	2.0	267
11	Prediction of Long-Term Mortality in Patients with Rheumatoid Arthritis according to Simple Questionnaire and Joint Count Measures. <i>Annals of Internal Medicine</i> , 1994, 120, 26.	3.9	262
12	A MAJOR GENETIC LOCUS AFFECTING RESISTANCE TO INFECTION WITH MURINE LEUKEMIA VIRUSES. <i>Journal of Experimental Medicine</i> , 1971, 133, 1234-1241.	8.5	244
13	Development and validation of the health assessment questionnaire II: A revised version of the health assessment questionnaire. <i>Arthritis and Rheumatism</i> , 2004, 50, 3296-3305.	6.7	231
14	Shouldn't standard rheumatology clinical care be evidence-based rather than eminence-based, eloquence-based, or elegance-based?. <i>Journal of Rheumatology</i> , 2007, 34, 1-4.	2.0	229
15	A simplified twenty-eight° joint quantitative articular index in rheumatoid arthritis. <i>Arthritis and Rheumatism</i> , 1989, 32, 531-537.	6.7	214
16	Social Conditions and Self-Management Are More Powerful Determinants of Health Than Access to Care. <i>Annals of Internal Medicine</i> , 1998, 129, 406.	3.9	202
17	Premature mortality in patients with rheumatoid arthritis: Evolving concepts. <i>Arthritis and Rheumatism</i> , 2001, 44, 1234-1236.	6.7	201
18	Self-Report Questionnaire Scores in Rheumatoid Arthritis Compared with Traditional Physical, Radiographic, and Laboratory Measures. <i>Annals of Internal Medicine</i> , 1989, 110, 259.	3.9	194

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19	QUEST-RA: quantitative clinical assessment of patients with rheumatoid arthritis seen in standard rheumatology care in 15 countries. <i>Annals of the Rheumatic Diseases</i> , 2007, 66, 1491-1496.	0.9	172
20	Patients seen for standard rheumatoid arthritis care have significantly better articular, radiographic, laboratory, and functional status in 2000 than in 1985. <i>Arthritis and Rheumatism</i> , 2005, 52, 1009-1019.	6.7	170
21	Formal education level as a significant marker of clinical status in rheumatoid arthritis. <i>Arthritis and Rheumatism</i> , 1988, 31, 1346-1357.	6.7	164
22	WHAT IS THE NATURAL HISTORY OF RHEUMATOID ARTHRITIS?. <i>Rheumatic Disease Clinics of North America</i> , 1993, 19, 123-151.	1.9	163
23	Eligibility of patients in routine care for major clinical trials of anti-tumor necrosis factor ? agents in rheumatoid arthritis. <i>Arthritis and Rheumatism</i> , 2003, 48, 313-318.	6.7	156
24	Remission and rheumatoid arthritis: Data on patients receiving usual care in twenty-four countries. <i>Arthritis and Rheumatism</i> , 2008, 58, 2642-2651.	6.7	156
25	Elevated MMPI scores for hypochondriasis, depression, and hysteria in patients with rheumatoid arthritis reflect disease rather than psychological status. <i>Arthritis and Rheumatism</i> , 1986, 29, 1456-1466.	6.7	143
26	Identification of work disability in rheumatoid arthritis: Physical, radiographic and laboratory variables do not add explanatory power to demographic and functional variables. <i>Journal of Clinical Epidemiology</i> , 1992, 45, 127-138.	5.0	140
27	Treatment of the anemia of rheumatoid arthritis with recombinant human erythropoietin: Clinical and in vitro studies. <i>Arthritis and Rheumatism</i> , 1989, 32, 638-642.	6.7	131
28	Listening to the patient: A practical guide to self-report questionnaires in clinical care. <i>Arthritis and Rheumatism</i> , 1999, 42, 1797-1808.	6.7	125
29	Measures of activity and damage in rheumatoid arthritis: Depiction of changes and prediction of mortality over five years. <i>Arthritis and Rheumatism</i> , 1997, 10, 381-394.	6.7	116
30	RAPID3, an Index to Assess and Monitor Patients with Rheumatoid Arthritis, Without Formal Joint Counts: Similar Results to DAS28 and CDAl in Clinical Trials and Clinical Care. <i>Rheumatic Disease Clinics of North America</i> , 2009, 35, 773-778.	1.9	116
31	Self-report questionnaires in five rheumatic diseases comparisons of health status constructs and associations with formal education level. <i>Arthritis and Rheumatism</i> , 1989, 2, 122-131.	6.7	111
32	The importance of age, education, and comorbidity in the substantial earnings losses of individuals with symmetric polyarthritis. <i>Arthritis and Rheumatism</i> , 1988, 31, 348-357.	6.7	110
33	Immunologic studies of rheumatoid arthritis patients treated with methotrexate. <i>Arthritis and Rheumatism</i> , 1987, 30, 481-488.	6.7	108
34	Hla-dr alleles with naturally occurring amino acid substitutions and risk for development of rheumatoid arthritis. <i>Arthritis and Rheumatism</i> , 1990, 33, 939-946.	6.7	108
35	Quantitative pain assessment for routine care of rheumatoid arthritis patients, using a pain scale based on activities of daily living and a visual analog pain scale. <i>Arthritis and Rheumatism</i> , 1987, 30, 630-636.	6.7	105
36	Further development of a physical function scale on a MDHAQ [corrected] for standard care of patients with rheumatic diseases. <i>Journal of Rheumatology</i> , 2005, 32, 1432-9.	2.0	105

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37	Erythrocyte Sedimentation Rate, C-Reactive Protein, or Rheumatoid Factor Are Normal at Presentation in 35%–45% of Patients with Rheumatoid Arthritis Seen Between 1980 and 2004: Analyses from Finland and the United States. <i>Journal of Rheumatology</i> , 2009, 36, 1387-1390.	2.0	104
38	Reduced joint counts in controlled clinical trials in rheumatoid arthritis. <i>Arthritis and Rheumatism</i> , 1994, 37, 470-475.	6.7	101
39	Making an impact on mortality in rheumatoid arthritis: Targeting cardiovascular comorbidity. <i>Arthritis and Rheumatism</i> , 2004, 50, 1734-1739.	6.7	95
40	Formal education and five-year mortality in rheumatoid arthritis: Mediation by helplessness scale scores. <i>Arthritis and Rheumatism</i> , 1996, 9, 463-472.	6.7	94
41	RAPID3 (Routine Assessment of Patient Index Data) on an MDHAQ (Multidimensional Health Assessment) Tj ETQq1 1 0.784314 rgBT Research. 2010. 62. 181-189.	3.4	93
42	Most patients receiving routine care for rheumatoid arthritis in 2001 did not meet inclusion criteria for most recent clinical trials or american college of rheumatology criteria for remission. <i>Journal of Rheumatology</i> , 2003, 30, 1138-46.	2.0	89
43	A composite disease activity scale for clinical practice, observational studies, and clinical trials: the patient activity scale (PAS/PAS-II). <i>Journal of Rheumatology</i> , 2005, 32, 2410-5.	2.0	88
44	Radiographic and joint count findings of the hand in rheumatoid arthritis. related and unrelated findings. <i>Arthritis and Rheumatism</i> , 1988, 31, 44-51.	6.7	85
45	Approaches for identifying and defining environmentally associated rheumatic disorders. <i>Arthritis and Rheumatism</i> , 2000, 43, 243.	6.7	82
46	Learned helplessness in systemic lupus erythematosus: analysis using the rheumatology attitudes index. <i>Arthritis and Rheumatism</i> , 1990, 33, 281-286.	6.7	81
47	Urgent care and tight control of rheumatoid arthritis as in diabetes and hypertension: Better treatments but a shortage of rheumatologists. <i>Arthritis and Rheumatism</i> , 2002, 46, 851-854.	6.7	80
48	The beck depression inventory, center for epidemiological studies depression scale (CES-D), and general well-being schedule depression subscale in rheumatoid arthritis criterion contamination of responses. <i>Arthritis and Rheumatism</i> , 1991, 4, 3-11.	6.7	74
49	The sense of coherence scale in patients with rheumatoid arthritis. <i>Arthritis and Rheumatism</i> , 1995, 8, 28-35.	6.7	73
50	Mortality in the rheumatic diseases. <i>Arthritis and Rheumatism</i> , 1995, 8, 229-241.	6.7	71
51	Quantitative measures for assessing rheumatoid arthritis in clinical trials and clinical care. <i>Best Practice and Research in Clinical Rheumatology</i> , 2003, 17, 753-781.	3.3	69
52	RAPID3 (Routine Assessment of Patient Index Data 3) severity categories and response criteria: Similar results to DAS28 (Disease Activity Score) and CDAI (Clinical Disease Activity Index) in the RAPID 1 (Rheumatoid Arthritis Prevention of Structural Damage) clinical trial of certolizumab pegol. <i>Arthritis Care and Research</i> , 2011, 63, 1142-1149.	3.4	67
53	Assessing dyspnea and its impact on patients with connective tissue disease-related interstitial lung disease. <i>Respiratory Medicine</i> , 2010, 104, 1350-1355.	2.9	60
54	The Disease Activity Score is not suitable as the sole criterion for initiation and evaluation of anti-tumor necrosis factor therapy in the clinic: Discordance between assessment measures and limitations in questionnaire use for regulatory purposes. <i>Arthritis and Rheumatism</i> , 2005, 52, 3873-3879.	6.7	58

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55	Morning stiffness in patients with early rheumatoid arthritis is associated more strongly with functional disability than with joint swelling and erythrocyte sedimentation rate. <i>Journal of Rheumatology</i> , 2004, 31, 1723-6.	2.0	57
56	Visual analog scales in formats other than a 10 centimeter horizontal line to assess pain and other clinical data. <i>Journal of Rheumatology</i> , 2008, 35, 1550-8.	2.0	57
57	A clue from a self-report questionnaire to distinguish rheumatoid arthritis from noninflammatory diffuse musculoskeletal pain. <i>Arthritis and Rheumatism</i> , 1990, 33, 1317-1322.	6.7	56
58	A proposed continuous quality improvement approach to assessment and management of patients with rheumatoid arthritis without formal joint counts, based on quantitative routine assessment of patient index data (RAPID) scores on a multidimensional health assessment questionnaire (MDHAQ). <i>Best Practice and Research in Clinical Rheumatology</i> , 2007, 21, 789-804.	3.3	56
59	Discordance of Global Assessments by Patient and Physician Is Higher in Female than in Male Patients Regardless of the Physician's Sex: Data on Patients with Rheumatoid Arthritis, Axial Spondyloarthritis, and Psoriatic Arthritis from the DANBIO Registry. <i>Journal of Rheumatology</i> , 2015, 42, 1781-1785.	2.0	56
60	The Underestimated Long Term Medical and Economic Consequences of Rheumatoid Arthritis. <i>Drugs</i> , 1995, 50, 1-14.	10.9	55
61	Laboratory Tests to Assess Patients with Rheumatoid Arthritis: Advantages and Limitations. <i>Rheumatic Disease Clinics of North America</i> , 2009, 35, 731-734.	1.9	55
62	The assessment of rheumatoid arthritis and the acceptability of self-report questionnaires in clinical practice. <i>Arthritis and Rheumatism</i> , 2003, 49, 59-63.	6.7	49
63	Patient questionnaires and formal education level as prospective predictors of mortality over 10 years in 97% of 1416 patients with rheumatoid arthritis from 15 United States private practices. <i>Journal of Rheumatology</i> , 2004, 31, 229-34.	2.0	49
64	Time to score quantitative rheumatoid arthritis measures: 28-Joint Count, Disease Activity Score, Health Assessment Questionnaire (HAQ), Multidimensional HAQ (MDHAQ), and Routine Assessment of Patient Index Data (RAPID) scores. <i>Journal of Rheumatology</i> , 2008, 35, 603-9.	2.0	48
65	MDHAQ/RAPID3 to Recognize Improvement Over 2 Months in Usual Care of Patients With Osteoarthritis, Systemic Lupus Erythematosus, Spondyloarthropathy, and Gout, as Well as Rheumatoid Arthritis. <i>Journal of Clinical Rheumatology</i> , 2013, 19, 169-174.	0.9	45
66	Depression scales in rheumatoid arthritis: criterion contamination in interpretation of patient responses. <i>Patient Education and Counseling</i> , 1993, 20, 133-143.	2.2	43
67	Treatment of rheumatoid arthritis: a global perspective on the use of antirheumatic drugs. <i>Modern Rheumatology</i> , 2008, 18, 228-239.	1.8	43
68	ACR 20: Clinical or statistical significance?. <i>Arthritis and Rheumatism</i> , 1999, 42, 1572-1576.	6.7	42
69	Diagnosis of Fibromyalgia: Disagreement Between Fibromyalgia Criteria and Clinician-Based Fibromyalgia Diagnosis in a University Clinic. <i>Arthritis Care and Research</i> , 2019, 71, 343-351.	3.4	41
70	A Multi-Dimensional Health Assessment Questionnaire (MDHAQ) and Routine Assessment of Patient Index Data (RAPID3) Scores are Informative in Patients with All Rheumatic Diseases. <i>Rheumatic Disease Clinics of North America</i> , 2009, 35, 819-827.	1.9	40
71	Continuous indices of core data set measures in rheumatoid arthritis clinical trials: Lower responses to placebo than seen with categorical responses with the American College of Rheumatology 20% criteria. <i>Arthritis and Rheumatism</i> , 2005, 52, 1031-1036.	6.7	39
72	Observer Variation in Quantitative Assessment of Rheumatoid Arthritis Part II. A Simplified Scoring System. <i>Investigative Radiology</i> , 1987, 22, 41-46.	6.2	38

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73	An index of patient reported outcomes (PRO-Index) discriminates effectively between active and control treatment in 4 clinical trials of adalimumab in rheumatoid arthritis. <i>Journal of Rheumatology</i> , 2006, 33, 2146-52.	2.0	38
74	A practical guide to scoring a Multi-Dimensional Health Assessment Questionnaire (MDHAQ) and Routine Assessment of Patient Index Data (RAPID) scores in 10–20 seconds for use in standard clinical care, without rulers, calculators, websites or computers. <i>Best Practice and Research in Clinical Rheumatology</i> , 2007, 21, 755-787.	3.3	37
75	Education, self-care, and outcomes of rheumatic diseases: Further challenges to the “biomedical model” paradigm. <i>Arthritis and Rheumatism</i> , 1997, 10, 283-288.	6.7	36
76	A Biopsychosocial Model to Complement a Biomedical Model: Patient Questionnaire Data and Socioeconomic Status Usually Are More Significant than Laboratory Tests and Imaging Studies in Prognosis of Rheumatoid Arthritis. <i>Rheumatic Disease Clinics of North America</i> , 2009, 35, 699-712.	1.9	36
77	Rheumatoid Arthritis. <i>Annals of Internal Medicine</i> , 2010, 153, ITC1-1.	3.9	36
78	Implementation of multiple outpatient formularies: Undesirable effects*. <i>Clinical Pharmacology and Therapeutics</i> , 1997, 61, 1-7.	4.7	35
79	Quantitative measures of rheumatic diseases for clinical research versus standard clinical care: differences, advantages and limitations. <i>Best Practice and Research in Clinical Rheumatology</i> , 2007, 21, 601-628.	3.3	35
80	Decline of Mean Initial Prednisone Dosage From 10.3 to 3.6 mg/day to Treat Rheumatoid Arthritis Between 1980 and 2004 in One Clinical Setting, With Long-Term Effectiveness of Dosages Less Than 5 mg/day. <i>Arthritis Care and Research</i> , 2013, 65, 729-736.	3.4	34
81	Observer Variation in Quantitative Assessment of Rheumatoid Arthritis Part I. Scoring Erosions and Joint Space Narrowing. <i>Investigative Radiology</i> , 1986, 21, 922-927.	6.2	33
82	Clinical evidence for osteoarthritis as an inflammatory disease. <i>Current Rheumatology Reports</i> , 2001, 3, 524-534.	4.7	33
83	Quantitative Data for Care of Patients with Systemic Lupus Erythematosus in Usual Clinical Settings: A Patient Multidimensional Health Assessment Questionnaire and Physician Estimate of Noninflammatory Symptoms. <i>Journal of Rheumatology</i> , 2011, 38, 1309-1316.	2.0	32
84	Proposed Severity and Response Criteria for Routine Assessment of Patient Index Data (RAPID3): Results for Categories of Disease Activity and Response Criteria in Abatacept Clinical Trials. <i>Journal of Rheumatology</i> , 2011, 38, 2565-2571.	2.0	31
85	Comparison of the dapson recovery ratio and the erythromycin breath test as in vivo probes of CYP3A activity in patients with rheumatoid arthritis receiving cyclosporine*. <i>Clinical Pharmacology and Therapeutics</i> , 1996, 59, 47-51.	4.7	30
86	Screening for Low Literacy in a Rheumatology Setting. <i>Journal of Clinical Rheumatology</i> , 2010, 16, 359-364.	0.9	30
87	The importance of the patient history and physical examination in rheumatoid arthritis in contrast to other chronic diseases: Results of a physician survey. <i>Arthritis Care and Research</i> , 2012, 64, n/a-n/a.	3.4	30
88	Relative efficiencies of physician/assessor global estimates and patient questionnaire measures are similar to or greater than joint counts to distinguish adalimumab from control treatments in rheumatoid arthritis clinical trials. <i>Journal of Rheumatology</i> , 2008, 35, 201-5.	2.0	30
89	Are Long-Term Very Low Doses of Prednisone for Patients with Rheumatoid Arthritis as Helpful as High Doses Are Harmful?. <i>Annals of Internal Medicine</i> , 2002, 136, 76.	3.9	29
90	Value of the Routine Assessment of Patient Index Data 3 in Patients With Psoriatic Arthritis: Results From a Tight-Control Clinical Trial and an Observational Cohort. <i>Arthritis Care and Research</i> , 2018, 70, 1198-1205.	3.4	29

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91	Disease Burden in Osteoarthritis Is Similar to That of Rheumatoid Arthritis at Initial Rheumatology Visit and Significantly Greater Six Months Later. <i>Arthritis and Rheumatology</i> , 2019, 71, 1276-1284.	5.6	29
92	Bony Ankylosis in Rheumatoid Arthritis. <i>Investigative Radiology</i> , 1987, 22, 303-309.	6.2	28
93	HLA-DPB1*0301 is a Major Risk Factor for Rheumatoid Factor-Negative Adult Rheumatoid Arthritis. <i>Arthritis and Rheumatism</i> , 1991, 34, 1310-1312.	6.7	28
94	Discordance of Global Estimates by Patients and Their Physicians in Usual Care of Many Rheumatic Diseases: Association With 5 Scores on a Multidimensional Health Assessment Questionnaire (MDHAQ) That Are Not Found on the Health Assessment Questionnaire (HAQ). <i>Arthritis Care and Research</i> , 2014, 66, 934-942.	3.4	28
95	RAPID3-an index of physical function, pain, and global status as "vital signs" to improve care for people with chronic rheumatic diseases. <i>Bulletin of the NYU Hospital for Joint Diseases</i> , 2009, 67, 211-25.	0.7	28
96	Can a Multi-Dimensional Health Assessment Questionnaire (MDHAQ) and Routine Assessment of Patient Index Data (RAPID) scores be informative in patients with all rheumatic diseases?. <i>Best Practice and Research in Clinical Rheumatology</i> , 2007, 21, 733-753.	3.3	27
97	Patient self-report RADAI (Rheumatoid Arthritis Disease Activity Index) joint counts on an MDHAQ (Multidimensional Health Assessment Questionnaire) in usual care of consecutive patients with rheumatic diseases other than rheumatoid arthritis. <i>Arthritis Care and Research</i> , 2013, 65, 288-293.	3.4	27
98	A PRAGMATIC APPROACH TO COST-EFFECTIVE USE OF LABORATORY TESTS AND IMAGING PROCEDURES IN PATIENTS WITH MUSCULOSKELETAL SYMPTOMS. <i>Primary Care - Clinics in Office Practice</i> , 1993, 20, 795-814.	1.6	27
99	A multidimensional health assessment questionnaire (MDHAQ) for all patients with rheumatic diseases to complete at all visits in standard clinical care. <i>Bulletin of the NYU Hospital for Joint Diseases</i> , 2007, 65, 150-60.	0.7	27
100	Limitations of a quantitative swollen and tender joint count to assess and monitor patients with rheumatoid arthritis. <i>Bulletin of the NYU Hospital for Joint Diseases</i> , 2008, 66, 216-23.	0.7	27
101	The case for early intervention in rheumatoidarthritis. <i>Journal of Autoimmunity</i> , 1992, 5, 209-226.	6.5	26
102	Documenting quality management in rheumatic disease: Are patient questionnaires the best (and only) method?. <i>Arthritis and Rheumatism</i> , 1996, 9, 339-348.	6.7	26
103	Prediction of Remission in a French Early Arthritis Cohort by RAPID3 and other Core Data Set Measures, but Not by the Absence of Rheumatoid Factor, Anticitrullinated Protein Antibodies, or Radiographic Erosions. <i>Journal of Rheumatology</i> , 2016, 43, 1285-1291.	2.0	26
104	Patient questionnaires for clinical research and improved standard patient care: is it better to have 80% of the information in 100% of patients or 100% of the information in 5% of patients?. <i>Journal of Rheumatology</i> , 2005, 32, 575-7.	2.0	26
105	Joint Counts to Assess Rheumatoid Arthritis for Clinical Research and Usual Clinical Care: Advantages and Limitations. <i>Rheumatic Disease Clinics of North America</i> , 2009, 35, 713-722.	1.9	25
106	Can Remission in Rheumatoid Arthritis Be Assessed Without Laboratory Tests or a Formal Joint Count? Possible Remission Criteria Based on a Self-report RAPID3 Score and Careful Joint Examination in the ESPOIR Cohort. <i>Journal of Rheumatology</i> , 2013, 40, 386-393.	2.0	25
107	Clinical Trials Documenting the Efficacy of Low-Dose Glucocorticoids in Rheumatoid Arthritis. <i>NeuroImmunoModulation</i> , 2015, 22, 46-50.	1.8	25
108	Further evidence for the lack of association between acetylator phenotype and systemic lupus erythematosus. <i>Arthritis and Rheumatism</i> , 1986, 29, 508-514.	6.7	24

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109	Evidence-based practice and practice-based evidence. <i>Nature Clinical Practice Rheumatology</i> , 2006, 2, 114-115.	3.2	24
110	Information technology in rheumatology. <i>Clinical and Experimental Rheumatology</i> , 2016, 34, 1.	0.8	24
111	The HAQ Compared with the MDHAQ: "Keep It Simple, Stupid" (KISS), with Feasibility and Clinical Value as Primary Criteria for Patient Questionnaires in Usual Clinical Care. <i>Rheumatic Disease Clinics of North America</i> , 2009, 35, 787-798.	1.9	23
112	Premature Mortality: A Neglected Outcome in Rheumatic Diseases?. <i>Arthritis Care and Research</i> , 2015, 67, 1043-1046.	3.4	23
113	WHY SHOULD RHEUMATOLOGISTS COLLECT PATIENT SELF-REPORT QUESTIONNAIRES IN ROUTINE RHEUMATOLOGIC CARE?. <i>Rheumatic Disease Clinics of North America</i> , 1995, 21, 271-319.	1.9	23
114	The DAS is the most specific measure, but a patient questionnaire is the most informative measure to assess rheumatoid arthritis. <i>Journal of Rheumatology</i> , 2006, 33, 834-7.	2.0	23
115	Treat-to-target: not as simple as it appears. <i>Clinical and Experimental Rheumatology</i> , 2012, 30, S10-20.	0.8	23
116	Limitations of clinical trials in chronic diseases: is the efficacy of methotrexate (MTX) underestimated in polyarticular psoriatic arthritis on the basis of limitations of clinical trials more than on limitations of MTX, as was seen in rheumatoid arthritis?. <i>Clinical and Experimental Rheumatology</i> , 2015, 33, S82-93.	0.8	23
117	How useful are combinations of blood tests in "Rheumatic panels" in diagnosis of rheumatic diseases?. <i>Journal of General Internal Medicine</i> , 1988, 3, 435-442.	2.6	22
118	Patient Questionnaires in Rheumatoid Arthritis: Advantages and Limitations as "Quantitative, Standardized Scientific Medical History". <i>Rheumatic Disease Clinics of North America</i> , 2009, 35, 735-743.	1.9	22
119	Criterion Contamination of Depression Scales in Patients with Rheumatoid Arthritis: The Need for Interpretation of Patient Questionnaires (as All Clinical Measures) in the Context of All Information About the Patient. <i>Rheumatic Disease Clinics of North America</i> , 2009, 35, 861-864.	1.9	22
120	Associations between clinical status questionnaire scores and formal education level in persons with systemic lupus erythematosus. <i>Arthritis and Rheumatism</i> , 1990, 33, 407-411.	6.7	21
121	Clinical trials in rheumatic diseases: designs and limitations. <i>Rheumatic Disease Clinics of North America</i> , 2004, 30, 701-724.	1.9	20
122	Declines in Erythrocyte Sedimentation Rates in Patients with Rheumatoid Arthritis Over the Second Half of the 20th Century. <i>Journal of Rheumatology</i> , 2009, 36, 1596-1599.	2.0	20
123	Poor physical function, pain and limited exercise: risk factors for premature mortality in the range of smoking or hypertension, identified on a simple patient self-report questionnaire for usual care. <i>BMJ Open</i> , 2011, 1, e000070-e000070.	1.9	20
124	Minimal Clinically Important Improvement of Routine Assessment of Patient Index Data 3 in Rheumatoid Arthritis. <i>Journal of Rheumatology</i> , 2019, 46, 27-30.	2.0	20
125	In vitro rheumatoid factor synthesis in patients taking second-line drugs for rheumatoid arthritis. <i>Arthritis and Rheumatism</i> , 1988, 31, 1090-1096.	6.7	19
126	Routine Assessment of Patient Index Data (RAPID3) and Bath Ankylosing Spondylitis Disease Activity Index (BASDAI) Scores Yield Similar Information in 85 Korean Patients With Ankylosing Spondylitis Seen in Usual Clinical Care. <i>Journal of Clinical Rheumatology</i> , 2015, 21, 300-304.	0.9	19

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127	MDHAQ/RAPID3 scores in patients with osteoarthritis are similar to or higher than in patients with rheumatoid arthritis: a cross-sectional study from current routine rheumatology care at four sites. <i>RMD Open</i> , 2017, 3, e000391.	3.8	18
128	Use of self-report activities of daily living questionnaires in osteoarthritis. <i>Arthritis and Rheumatism</i> , 1988, 1, 23-32.	6.7	17
129	Complexities in Assessment of Rheumatoid Arthritis: Absence of a Single Gold Standard Measure. <i>Rheumatic Disease Clinics of North America</i> , 2009, 35, 687-697.	1.9	17
130	How to Collect an MDHAQ to Provide Rheumatology Vital Signs (Function, Pain, Global Status, and) Tj ETQq0 0 0 rgBT /Overlock 10 Tf 5 Regarding the MDHAQ. <i>Rheumatic Disease Clinics of North America</i> , 2009, 35, 799-812.	1.9	17
131	Circadian Use of Glucocorticoids in Rheumatoid Arthritis. <i>NeuroImmunoModulation</i> , 2015, 22, 33-39.	1.8	17
132	Fibromyalgia Assessment Screening Tools (FAST) Based on Only Multidimensional Health Assessment Questionnaire (MDHAQ) Scores as Clues to Fibromyalgia. <i>ACR Open Rheumatology</i> , 2019, 1, 516-525.	2.1	16
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