

Alessia Pepe

List of Publications by Year in descending order

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Version: 2024-02-01

93
papers

2,941
citations

186265

28
h-index

189892

50
g-index

95
all docs

95
docs citations

95
times ranked

2227
citing authors

#	ARTICLE	IF	CITATIONS
1	Deep Learning Staging of Liver Iron Content From Multiecho MR Images. Journal of Magnetic Resonance Imaging, 2023, 57, 472-484.	3.4	6
2	Pressure-volume relationship by pharmacological stress cardiovascular magnetic resonance. International Journal of Cardiovascular Imaging, 2022, 38, 853-861.	1.5	0
3	Diagnostic Accuracy of CT Texture Analysis in Adrenal Masses: A Systematic Review. International Journal of Molecular Sciences, 2022, 23, 637.	4.1	22
4	Myocardial T2 values at 1.5 T by a segmental approach with healthy aging and gender. European Radiology, 2022, 32, 2962-2975.	4.5	9
5	National networking in rare diseases and reduction of cardiac burden in thalassemia major. European Heart Journal, 2022, 43, 2482-2492.	2.2	25
6	The use of hydroxyurea in the real life of MIOT network: an observational study. Expert Opinion on Drug Safety, 2022, , 1-8.	2.4	2
7	Relationship between pancreatic iron overload, glucose metabolism and cardiac complications in sickle cell disease: An Italian multicentre study. European Journal of Haematology, 2022, 109, 289-297.	2.2	1
8	Frequency, pattern, and associations of renal iron accumulation in sickle cell-thalassemia patients. Annals of Hematology, 2022, 101, 1941-1950.	1.8	3
9	Cardiovascular magnetic resonance in autoimmune rheumatic diseases: a clinical consensus document by the European Association of Cardiovascular Imaging. European Heart Journal Cardiovascular Imaging, 2022, 23, e308-e322.	1.2	21
10	Absence of T1 Hyperintensity in the Brain of High-risk Patients After Multiple Administrations of High-dose Gadobutrol for Cardiac Magnetic Resonance. Clinical Neuroradiology, 2021, 31, 347-355.	1.9	3
11	Biventricular Reference Values by Body Surface Area, Age, and Gender in a Large Cohort of Well-treated Thalassemia Major Patients Without Heart Damage Using a Multiparametric CMR Approach. Journal of Magnetic Resonance Imaging, 2021, 53, 61-70.	3.4	22
12	A complication risk score to evaluate clinical severity of thalassaemia syndromes. British Journal of Haematology, 2021, 192, 626-633.	2.5	7
13	Prospective cardiac magnetic resonance imaging survey in myelodysplastic syndrome patients: insights from an Italian network. Annals of Hematology, 2021, 100, 1139-1147.	1.8	1
14	Myocardial T1 Values at 1.5T: Normal Values for General Electric Scanners and Sex-Related Differences. Journal of Magnetic Resonance Imaging, 2021, 54, 1486-1500.	3.4	18
15	The prognostic role of CMR using global planimetric criteria in patients with excessive left ventricular trabeculation. European Radiology, 2021, 31, 7553-7565.	4.5	7
16	Survival and causes of death in 2,033 patients with non-transfusion-dependent β^2 -thalassemia. Haematologica, 2021, 106, 2489-2492.	3.5	25
17	Cardiovascular magnetic resonance in women with cardiovascular disease: position statement from the Society for Cardiovascular Magnetic Resonance (SCMR). Journal of Cardiovascular Magnetic Resonance, 2021, 23, 52.	3.3	19
18	Myocardial iron overload by cardiovascular magnetic resonance native segmental T1 mapping: a sensitive approach that correlates with cardiac complications. Journal of Cardiovascular Magnetic Resonance, 2021, 23, 70.	3.3	22

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19	Genotypic groups as risk factors for cardiac magnetic resonance abnormalities and complications in thalassemia major: a large, multicentre study. <i>Blood Transfusion</i> , 2021, 19, 168-176.	0.4	3
20	Serum Organ-Specific Anti-Heart and Anti-Intercalated Disk Autoantibodies as New Autoimmune Markers of Cardiac Involvement in Systemic Sclerosis: Frequency, Clinical and Prognostic Correlates. <i>Diagnostics</i> , 2021, 11, 2165.	2.6	7
21	The Link of Pancreatic Iron with Glucose Metabolism and Cardiac Iron in Thalassemia Intermedia: A Large, Multicenter Observational Study. <i>Journal of Clinical Medicine</i> , 2021, 10, 5561.	2.4	10
22	Setting for "Normal" Serum Ferritin Levels in Patients with Transfusion-Dependent Thalassemia: Our Current Strategy. <i>Journal of Clinical Medicine</i> , 2021, 10, 5985.	2.4	5
23	Cardiac magnetic resonance predicts ventricular arrhythmias in scleroderma: the Scleroderma Arrhythmia Clinical Utility Study (SAnCtUS). <i>Rheumatology</i> , 2020, 59, 1938-1948.	1.9	42
24	The Close Link of Pancreatic Iron With Glucose Metabolism and With Cardiac Complications in Thalassemia Major: A Large, Multicenter Observational Study. <i>Diabetes Care</i> , 2020, 43, 2830-2839.	8.6	39
25	Red blood cell consumption in a large cohort of patients with thalassaemia: a retrospective analysis of main predictors. <i>Annals of Hematology</i> , 2020, 99, 1209-1215.	1.8	3
26	CMR for myocardial iron overload quantification: calibration curve from the MIOT Network. <i>European Radiology</i> , 2020, 30, 3217-3225.	4.5	12
27	The planimetric Grothoff's criteria by cardiac magnetic resonance can improve the specificity of left ventricular non-compaction diagnosis in thalassemia intermedia. <i>International Journal of Cardiovascular Imaging</i> , 2020, 36, 1105-1112.	1.5	4
28	Prospective CMR Survey in Children With Thalassemia Major. <i>JACC: Cardiovascular Imaging</i> , 2020, 13, 1284-1286.	5.3	5
29	Longitudinal follow-up of patients with thalassaemia intermedia who started transfusion therapy in adulthood: a cohort study. <i>British Journal of Haematology</i> , 2020, 191, 107-114.	2.5	10
30	Prevalence of extramedullary hematopoiesis, renal cysts, splenic and hepatic lesions, and vertebral hemangiomas among thalassaemic patients: a retrospective study from the Myocardial Iron Overload in Thalassemia (MIOT) network. <i>Annals of Hematology</i> , 2019, 98, 1333-1339.	1.8	5
31	Cardiac involvement by CMR in different genotypic groups of thalassemia major patients. <i>Blood Cells, Molecules, and Diseases</i> , 2019, 77, 1-7.	1.4	9
32	Multicenter validation of the magnetic resonance T2* technique for quantification of pancreatic iron. <i>European Radiology</i> , 2019, 29, 2246-2252.	4.5	32
33	Gender differences in the development of cardiac complications: a multicentre study in a large cohort of thalassaemia major patients to optimize the timing of cardiac follow-up. <i>British Journal of Haematology</i> , 2018, 180, 879-888.	2.5	20
34	The impact of liver steatosis on the ability of serum ferritin levels to be predictive of liver iron concentration in non-transfusion-dependent thalassaemia patients. <i>British Journal of Haematology</i> , 2018, 180, 721-726.	2.5	14
35	Is there a difference in phenotype between males and females with non-transfusion-dependent thalassemia? A cross-sectional evaluation. <i>Hematology</i> , 2018, 23, 522-525.	1.5	4
36	Relationship between uric acid levels and cardiometabolic findings in a large cohort of β^2 -thalassemia major patients. <i>Biomarkers in Medicine</i> , 2018, 12, 341-348.	1.4	3

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37	Non-compact myocardium assessment by cardiac magnetic resonance: dependence on image analysis method. <i>International Journal of Cardiovascular Imaging</i> , 2018, 34, 1227-1238.	1.5	8
38	Prediction of cardiac complications for thalassemia major in the widespread cardiac magnetic resonance era: a prospective multicentre study by a multi-parametric approach. <i>European Heart Journal Cardiovascular Imaging</i> , 2018, 19, 299-309.	1.2	74
39	Detection of myocardial iron overload by two-dimensional speckle tracking in patients with beta-thalassaemia major: a combined echocardiographic and T2* segmental CMR study. <i>International Journal of Cardiovascular Imaging</i> , 2018, 34, 263-271.	1.5	22
40	Expert Opinion on Managing Chronic HCV in Patients with Cardiovascular Disease. <i>Antiviral Therapy</i> , 2018, 23, 35-46.	1.0	8
41	Estimation of pancreatic R2* for iron overload assessment in the presence of fat: a comparison of different approaches. <i>Magnetic Resonance Materials in Physics, Biology, and Medicine</i> , 2018, 31, 757-769.	2.0	9
42	MRI multicentre prospective survey in thalassaemia major patients treated with deferasirox versus deferi- prone and desferrioxamine. <i>British Journal of Haematology</i> , 2018, 183, 783-795.	2.5	33
43	The effect of desferrioxamine chelation versus no therapy in patients with non transfusion-dependent thalassaemia: a multicenter prospective comparison from the MIOT network. <i>Annals of Hematology</i> , 2018, 97, 1925-1932.	1.8	5
44	Nontraditional Cardiovascular Biomarkers and Risk Factors: Rationale and Future Perspectives. <i>Biomolecules</i> , 2018, 8, 40.	4.0	16
45	Cost-Utility Analysis of Three Iron Chelators Used in Monotherapy for the Treatment of Chronic Iron Overload in β^2 -Thalassaemia Major Patients: An Italian Perspective. <i>Clinical Drug Investigation</i> , 2017, 37, 453-464.	2.2	17
46	Pattern of complications and burden of disease in patients affected by beta thalassemia major. <i>Current Medical Research and Opinion</i> , 2017, 33, 1525-1533.	1.9	40
47	Multimodality Imaging in Restrictive Cardiomyopathies: An EACVI expert consensus document In collaboration with the "Working Group on myocardial and pericardial diseases" of the European Society of Cardiology Endorsed by The Indian Academy of Echocardiography. <i>European Heart Journal Cardiovascular Imaging</i> , 2017, 18, 1090-1121.	1.2	91
48	Left ventricle remodeling in patients with β^2 -thalassemia major. An emerging differential diagnosis with left ventricle noncompaction disease. <i>Clinical Imaging</i> , 2017, 45, 58-64.	1.5	9
49	Clinical recommendations of cardiac magnetic resonance, Part II. <i>Journal of Cardiovascular Medicine</i> , 2017, 18, 209-222.	1.5	22
50	Soluble form of transferrin receptor-1 level is associated with the age at first diagnosis and the risk of therapeutic intervention and iron overloading in patients with non-transfusion-dependent thalassemia. <i>Annals of Hematology</i> , 2017, 96, 1541-1546.	1.8	11
51	Reference values of cardiac volumes, dimensions, and new functional parameters by MR: A multicenter, multivendor study. <i>Journal of Magnetic Resonance Imaging</i> , 2017, 45, 1055-1067.	3.4	82
52	LIVER PANCREAS HEART TRIANGLE AND HCV IN THALASSEMIA: EXPANDING THE HORIZON THROUGH BIOMARKER NETWORKS. <i>International Journal of Hematology & Therapy</i> , 2017, 3, 1-6.	0.1	3
53	Cardiovascular imaging in the diagnosis and monitoring of cardiotoxicity. <i>Journal of Cardiovascular Medicine</i> , 2016, 17, e45-e54.	1.5	17
54	The Italian multiregional thalassemia registry: Centers characteristics, services, and patients' population. <i>Hematology</i> , 2016, 21, 415-424.	1.5	12

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55	Diabetes and Glucose Metabolism in Thalassemia Major: An Update. Expert Review of Hematology, 2016, 9, 401-408.	2.2	45
56	Soluble form of transferrin receptor as a biomarker of overall morbidity in patients with non-transfusion-dependent thalassaemia: a cross-sectional study. Blood Transfusion, 2016, 14, 538-540.	0.4	14
57	Pancreatic iron overload by T_2^* MRI in a large cohort of well treated thalassemia major patients: Can it tell us heart iron distribution and function?. American Journal of Hematology, 2015, 90, E189-90.	4.1	26
58	Extramedullary hematopoiesis is associated with lower cardiac iron loading in chronically transfused thalassemia patients. American Journal of Hematology, 2015, 90, 1008-1012.	4.1	22
59	Myocardial fibrosis by late gadolinium enhancement cardiac magnetic resonance and hepatitis C virus infection in thalassemia major patients. Journal of Cardiovascular Medicine, 2015, 16, 689.	1.5	23
60	Improvement of heart iron with preserved patterns of iron store by CMR-guided chelation therapy. European Heart Journal Cardiovascular Imaging, 2015, 16, 325-334.	1.2	31
61	Quantitative T_2^* magnetic resonance imaging for renal iron overload assessment: normal values by age and sex. Abdominal Imaging, 2015, 40, 1700-1704.	2.0	14
62	Accurate estimate of pancreatic T_2^* values: how to deal with fat infiltration. Abdominal Imaging, 2015, 40, 3129-3136.	2.0	26
63	Fast generation of T_2^* maps in the entire range of clinical interest: Application to thalassemia major patients. Computers in Biology and Medicine, 2015, 56, 200-210.	7.0	19
64	Multiparametric Cardiac Magnetic Resonance Survey in Children With Thalassemia Major. Circulation: Cardiovascular Imaging, 2015, 8, e003230.	2.6	62
65	Different patterns of myocardial iron distribution by whole-heart T_2^* magnetic resonance as risk markers for heart complications in thalassemia major. International Journal of Cardiology, 2014, 177, 1012-1019.	1.7	40
66	Cardiac R_2^* values are independent of the image analysis approach employed. Magnetic Resonance in Medicine, 2014, 72, 485-491.	3.0	8
67	Myocardial iron overload in thalassaemia major. How early to check?. British Journal of Haematology, 2014, 164, 579-585.	2.5	43
68	Extramedullary haematopoiesis correlates with genotype and absence of cardiac iron overload in polytransfused adults with thalassaemia. Blood Transfusion, 2014, 12 Suppl 1, s124-30.	0.4	12
69	Cardiac and hepatic iron and ejection fraction in thalassemia major: Multicentre prospective comparison of combined Deferiprone and Deferoxamine therapy against Deferiprone or Deferoxamine Monotherapy. Journal of Cardiovascular Magnetic Resonance, 2013, 15, 1.	3.3	167
70	The use of appropriate calibration curves corrects for systematic differences in liver R_2^* values measured using different software packages. British Journal of Haematology, 2013, 161, 888-891.	2.5	67
71	Comparison of biventricular dimensions and function between pediatric sickle cell disease and thalassemia major patients without cardiac iron. American Journal of Hematology, 2013, 88, 213-218.	4.1	20
72	Cardiac complications and diabetes in thalassaemia major: a large historical multicentre study. British Journal of Haematology, 2013, 163, 520-527.	2.5	48

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73	Direct Cost Analysis About The Three Chelators For The Treatment Of Thalassemia Patients With Chronic Iron Overload: An Italian Perspective From The MIOT Network. <i>Blood</i> , 2013, 122, 5605-5605.	1.4	1
74	A T2* MRI prospective survey on heart iron in thalassemia major patients treated with deferasirox versus deferiprone and desferrioxamine in monotherapy. <i>Journal of Cardiovascular Magnetic Resonance</i> , 2011, 13, .	3.3	2
75	Left Ventricular Volumes, Mass and Function normalized to the body surface area, age and gender from CMR in a large cohort of well-treated Thalassemia Major patients without myocardial iron overload. <i>Journal of Cardiovascular Magnetic Resonance</i> , 2011, 13, .	3.3	10
76	Single region of interest versus multislice T2* MRI approach for the quantification of hepatic iron overload. <i>Journal of Magnetic Resonance Imaging</i> , 2011, 33, 348-355.	3.4	71
77	Regional and global pancreatic T_2^* MRI for iron overload assessment in a large cohort of healthy subjects: Normal values and correlation with age and gender. <i>Magnetic Resonance in Medicine</i> , 2011, 65, 764-769.	3.0	38
78	Deferasirox, deferiprone and desferrioxamine treatment in thalassemia major patients: cardiac iron and function comparison determined by quantitative magnetic resonance imaging. <i>Haematologica</i> , 2011, 96, 41-47.	3.5	129
79	Cardiac iron and cardiac disease in males and females with transfusion-dependent thalassemia major: a T2* magnetic resonance imaging study. <i>Haematologica</i> , 2011, 96, 515-520.	3.5	107
80	Evaluation of myocardial iron overload using cardiovascular magnetic resonance imaging. <i>Hellenic Journal of Cardiology</i> , 2011, 52, 385-90.	1.0	7
81	Preferential patterns of myocardial iron overload by multislice multiecho T_2^* CMR in thalassemia major patients. <i>Magnetic Resonance in Medicine</i> , 2010, 64, 211-219.	3.0	64
82	Increased survival and reversion of iron-induced cardiac disease in patients with thalassemia major receiving intensive combined chelation therapy as compared to desferoxamine alone. <i>Blood Cells, Molecules, and Diseases</i> , 2010, 45, 136-139.	1.4	45
83	Influence of myocardial fibrosis and blood oxygenation on heart T2* values in thalassemia patients. <i>Journal of Magnetic Resonance Imaging</i> , 2009, 29, 832-837.	3.4	28
84	Multicenter validation of the magnetic resonance t_2^* technique for segmental and global quantification of myocardial iron. <i>Journal of Magnetic Resonance Imaging</i> , 2009, 30, 62-68.	3.4	115
85	Multislice multiecho T2* cardiac magnetic resonance for the detection of heterogeneous myocardial iron distribution in thalassaemia patients. <i>NMR in Biomedicine</i> , 2009, 22, 707-715.	2.8	42
86	Improved T2* assessment in liver iron overload by magnetic resonance imaging. <i>Magnetic Resonance Imaging</i> , 2009, 27, 188-197.	1.8	119
87	Safety of cardiovascular magnetic resonance gadolinium chelates contrast agents in patients with hemoglobinopathies. <i>Haematologica</i> , 2009, 94, 1625-1627.	3.5	29
88	Standardized T2* Map of a Normal Human Heart to Correct T2* Segmental Artefacts; Myocardial Iron Overload and Fibrosis in Thalassemia Intermedia Versus Thalassemia Major Patients and Electrocardiogram Changes in Thalassemia Major Patients. <i>Hemoglobin</i> , 2008, 32, 97-107.	0.8	20
89	Guideline recommendations for heart complications in thalassemia major. <i>Journal of Cardiovascular Medicine</i> , 2008, 9, 515-525.	1.5	84
90	A critical review of non invasive procedures for the evaluation of body iron burden in thalassemia major patients. <i>Pediatric Endocrinology Reviews</i> , 2008, 6 Suppl 1, 193-203.	1.2	9

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91	Standardized T2* map of normal human heart in vivo to correct T2* segmental artefacts. NMR in Biomedicine, 2007, 20, 578-590.	2.8	119
92	Evaluation of the efficacy of oral deferiprone in beta-thalassemia major by multislice multiecho T2*. European Journal of Haematology, 2006, 76, 183-192.	2.2	115
93	Multislice multiecho T2* cardiovascular magnetic resonance for detection of the heterogeneous distribution of myocardial iron overload. Journal of Magnetic Resonance Imaging, 2006, 23, 662-668.	3.4	173