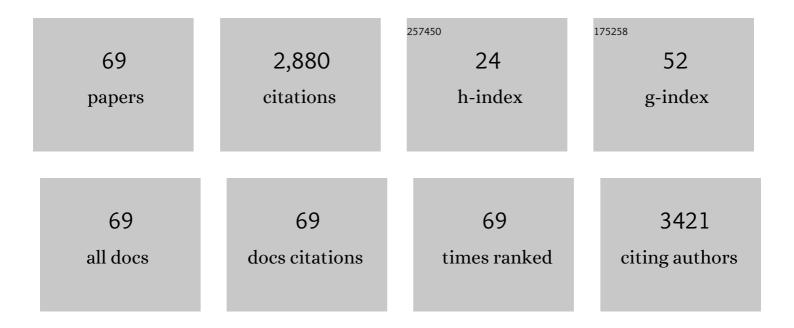
Liliana Bulfone

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/672874/publications.pdf Version: 2024-02-01



#	Article	IF	CITATIONS
1	A Randomized, Controlled Trial of Early versus Late Initiation of Dialysis. New England Journal of Medicine, 2010, 363, 609-619.	27.0	767
2	The potential of social enterprise to enhance health and well-being: A model and systematic review. Social Science and Medicine, 2014, 123, 182-193.	3.8	147
3	Cost-Effectiveness of Surgically Induced Weight Loss for the Management of Type 2 Diabetes: Modeled Lifetime Analysis. Diabetes Care, 2009, 32, 567-574.	8.6	125
4	Cost-Effectiveness of Initiating Dialysis Early: A Randomized Controlled Trial. American Journal of Kidney Diseases, 2011, 57, 707-715.	1.9	113
5	Attributes and weights in health care priority setting: A systematic review of what counts and to what extent. Social Science and Medicine, 2015, 146, 41-52.	3.8	112
6	Public views on principles for health care priority setting: Findings of a European cross-country study using Q methodology. Social Science and Medicine, 2015, 126, 128-137.	3.8	108
7	Housing as a social determinant of health and wellbeing: developing an empirically-informed realist theoretical framework. BMC Public Health, 2020, 20, 1138.	2.9	101
8	Modelling the monetary value of a QALY: a new approach based on UK data. Health Economics (United) Tj ETQqC	0.0 rgBT	/Oygrlock 10
9	Deriving distributional weights for QALYs through discrete choice experiments. Journal of Health Economics, 2011, 30, 466-478.	2.7	91
10	The social value of a QALY: raising the bar or barring the raise?. BMC Health Services Research, 2011, 11, 8.	2.2	68

11	Should QALYs be programme-specific?. Journal of Health Economics, 1988, 7, 239-257.	2.7	67
12	Comparing WTP Values of Different Types of QALY Gain Elicited from the General Public. Health Economics (United Kingdom), 2015, 24, 280-293.	1.7	64
13	Collaborator or competitor: assessing the evidence supporting the role of social enterprise in health and social care. Public Management Review, 2018, 20, 1790-1814.	4.9	63
14	Population effectiveness of opportunistic chlamydia testing in primary care in Australia: a cluster-randomised controlled trial. Lancet, The, 2018, 392, 1413-1422.	13.7	63
15	"The Most Supportive Environment in the World� Tracing the Development of an Institutional â€~Ecosystem' for Social Enterprise. Voluntas, 2015, 26, 777-800.	1.7	61
16	Optimisation of complex health interventions prior to a randomised controlled trial: a scoping review of strategies used. Pilot and Feasibility Studies, 2016, 2, 17.	1.2	59
17	A Synthesis of Drug Reimbursement Decision-Making Processes in Organisation for Economic Co-operation and Development Countries. Value in Health, 2014, 17, 98-108.	0.3	57
18	LSE–Lancet Commission on the future of the NHS: re-laying the foundations for an equitable and efficient health and care service after COVID-19. Lancet, The, 2021, 397, 1915-1978.	13.7	49

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19	Is there a preference for PET or SPECT brain imaging in diagnosing dementia? The views of people with dementia, carers, and healthy controls. International Psychogeriatrics, 2016, 28, 123-131.	1.0	42
20	A Systematic Review of Cost-Sharing Strategies Used within Publicly-Funded Drug Plans in Member Countries of the Organisation for Economic Co-Operation and Development. PLoS ONE, 2014, 9, e90434.	2.5	35
21	Differentiating the effect of social enterprise activities on health. Social Science and Medicine, 2018, 200, 211-217.	3.8	35
22	Effect of Timing of Dialysis Commencement on Clinical Outcomes of Patients with Planned Initiation of Peritoneal Dialysis in the Ideal Trial. Peritoneal Dialysis International, 2012, 32, 595-604.	2.3	32
23	Extending life for people with a terminal illness: a moral right and an expensive death? Exploring societal perspectives. BMC Medical Ethics, 2015, 16, 14.	2.4	31
24	Exploring the contribution of social enterprise to health and social care: A realist evaluation. Social Science and Medicine, 2019, 222, 154-161.	3.8	31
25	Factors affecting patient valuations of caries prevention: Using and validating the willingness to pay method. Journal of Dentistry, 2015, 43, 981-988.	4.1	23
26	High performance in healthcare priority setting and resource allocation: A literature- and case study-based framework in the Canadian context. Social Science and Medicine, 2016, 162, 185-192.	3.8	23
27	Outcomes of Patients with Planned Initiation of Hemodialysis in the IDEAL Trial. Contributions To Nephrology, 2011, 171, 1-9.	1.1	20
28	Conceptualizing the health and well-being impacts of social enterprise: a UK-based study. Health Promotion International, 2017, 33, 748-759.	1.8	20
29	The relative value of different QALY types. Journal of Health Economics, 2020, 70, 102303.	2.7	20
30	High prices for generics in Australia — more competition might help. Australian Health Review, 2009, 33, 200.	1.1	19
31	From representing views to representativeness of views: Illustrating a new (Q2S) approach in the context of health care priority setting in nine European countries. Social Science and Medicine, 2016, 166, 205-213.	3.8	19
32	Handling Protest Responses in Contingent Valuation Surveys. Medical Decision Making, 2017, 37, 623-634.	2.4	18
33	Training nurses in a competency framework to support adults with epilepsy and intellectual disability: the EpAID cluster RCT. Health Technology Assessment, 2018, 22, 1-104.	2.8	18
34	Healthcare Utilization and Costs in Severely Obese Subjects Before Bariatric Surgery. Obesity, 2012, 20, 2412-2419.	3.0	17
35	Public values and plurality in health priority setting: What to do when people disagree and why we should care about reasons as well as choices. Social Science and Medicine, 2021, 277, 113892.	3.8	17
36	Are life-extending treatments for terminal illnesses a special case? Exploring choices and societal viewpoints. Social Science and Medicine, 2018, 198, 61-69.	3.8	16

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#	Article	IF	CITATIONS
37	Who knows best? A Q methodology study to explore perspectives of professional stakeholders and community participants on health in low-income communities. BMC Health Services Research, 2019, 19, 35.	2.2	16
38	Increasing boys' and girls' intentions to avoid teenage pregnancy: a cluster randomised controlled feasibility trial of an interactive video drama-based intervention in post-primary schools in Northern Ireland. Public Health Research, 2017, 5, 1-344.	1.3	16
39	What is the right level of spending needed for health and care in the UK?. Lancet, The, 2021, 397, 2012-2022.	13.7	15
40	Health economics and emergence from COVID-19 lockdown: the great big marginal analysis. Health Economics, Policy and Law, 2022, 17, 227-231.	1.8	13
41	Is "end of life―a special case? Connecting Q with survey methods to measure societal support for views on the value of lifeâ€extending treatments. Health Economics (United Kingdom), 2018, 27, 819-831.	1.7	12
42	Clinical and Cost Effectiveness of Enhanced Oral Healthcare in Stroke Care Settings (SOCLE II): A Pilot, Stepped Wedge, Cluster Randomized, Controlled Trial Protocol. International Journal of Stroke, 2015, 10, 979-984.	5.9	11
43	Cost-effectiveness of routine transoesophageal echocardiography during cardiac surgery: a discrete-event simulation study. British Journal of Anaesthesia, 2020, 124, 136-145.	3.4	11
44	Health Technology Assessment: Reflections from the Antipodes. Value in Health, 2009, 12, S28-S38.	0.3	10
45	Accounts from developers of generic health state utility instruments explain why they produce different QALYs: A qualitative study. Social Science and Medicine, 2019, 240, 112560.	3.8	10
46	The relative value of carer and patient quality of life: A person trade-off (PTO) study. Social Science and Medicine, 2022, 292, 114556.	3.8	10
47	Learning from contract change in primary care dentistry: A qualitative study of stakeholders in the north of England. Health Policy, 2015, 119, 1218-1225.	3.0	9
48	Intervening in the cycle of poverty, poor housing and poor health: the role of housing providers in enhancing tenants' mental wellbeing. Journal of Housing and the Built Environment, 2022, 37, 1-21.	1.8	9
49	Two false positives do not make a right: Setting the bar of social enterprise research even higher through avoiding the straw man fallacy. Social Science and Medicine, 2018, 217, 42-44.	3.8	8
50	Exploring the relative value of end of life QALYs: Are the comparators important?. Social Science and Medicine, 2020, 245, 112660.	3.8	7
51	Microcredit as a public health initiative? Exploring mechanisms and pathways to health and wellbeing. Social Science and Medicine, 2021, 270, 113633.	3.8	7
52	Coronavirus: Where Has All the Health Economics Gone?. International Journal of Health Policy and Management, 2020, 9, 466-468.	0.9	7
53	The impact of removing financial incentives and/or audit and feedback on chlamydia testing in general practice: A cluster randomised controlled trial (ACCEPt-able). PLoS Medicine, 2022, 19, e1003858.	8.4	7
54	Improving outcomes in adults with epilepsy and intellectual disability (EpAID) using a nurse-led intervention: study protocol for a cluster randomised controlled trial. Trials, 2016, 17, 297.	1.6	6

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#	Article	IF	CITATIONS
55	Resource allocation in NHS dentistry: recognition of societal preferences (RAINDROP): study protocol. BMC Health Services Research, 2018, 18, 487.	2.2	6
56	Fire, Aim… Ready? Alberta's Big Bang Approach to Healthcare Disintegration. Healthcare Policy, 2010, 6, 22-31.	0.6	6
57	Estimating an exchangeâ€rate between <i>careâ€related</i> and <i>healthâ€related</i> quality of life outcomes for economic evaluation: An application of the wellbeing valuation method. Health Economics (United Kingdom), 2021, 30, 2847-2857.	1.7	5
58	Programme-specific qalys. Journal of Health Economics, 1990, 8, 489-491.	2.7	4
59	Health Care Prioritization: A Clinician's Duty. Canadian Journal of Kidney Health and Disease, 2014, 1, 27.	1.1	4
60	Can preventive care activities in general practice be sustained when financial incentives and external audit plus feedback are removed? ACCEPt-able: a cluster randomised controlled trial protocol. Implementation Science, 2015, 11, 122.	6.9	4
61	Incremental willingness to pay: a theoretical and empirical exposition. Theory and Decision, 2016, 80, 101-123.	1.0	4
62	How does priority setting for resource allocation happen in commissioning dental services in a nationally led, regionally delivered system: a qualitative study using semistructured interviews with NHS England dental commissioners. BMJ Open, 2019, 9, e024995.	1.9	4
63	Hybridity in the housing sector: examining impacts on social and private rented sector tenants in Scotland. Housing Studies, 2020, 35, 1050-1072.	2.4	4
64	Taking Triple Aim at the Triple Aim. HealthcarePapers, 2016, 15, 25-30.	0.3	2
65	Compulsion: The Key to Us Health Care Reform. Journal of Health Services Research and Policy, 2012, 17, 106-109.	1.7	1
66	Inclusiveness and health economics: Reflections on the work of Gavin Mooney (1943–2012). Social Science and Medicine, 2014, 108, 246-247.	3.8	1
67	Health and Brexit. Health Economics (United Kingdom), 2017, 26, 959-961.	1.7	1
68	An Examination of Consistency in the Incremental Approach to Willingness to Pay: Evidence Using Societal Values for NHS Dental Services. Medical Decision Making, 2021, 41, 465-474.	2.4	1
69	Covid-19: an economic perspective on vaccinating the world. BMJ, The, 2021, 373, n1498.	6.0	Ο