Camiel Rosman

List of Publications by Year in descending order

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Version: 2024-02-01

192 papers 13,422 citations

41344 49 h-index 22832 112 g-index

196 all docs

 $\frac{196}{\text{docs citations}}$

196 times ranked 9065 citing authors

| # | Article | IF | CITATIONS |
|----|---|-----------------|--------------|
| 1 | Learning Curves of Ivor Lewis Totally Minimally Invasive Esophagectomy by Hospital and Surgeon Characteristics. Annals of Surgery, 2022, 275, 911-918. | 4.2 | 13 |
| 2 | European consensus on essential steps of Minimally Invasive Ivor Lewis and McKeown Esophagectomy through Delphi methodology. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 446-460. | 2.4 | 8 |
| 3 | Impact of nationwide centralization of oesophageal, gastric, and pancreatic surgery on travel distance and experienced burden in the Netherlands. European Journal of Surgical Oncology, 2022, 48, 348-355. | 1.0 | 8 |
| 4 | Performance with robotic surgery versus 3D- and 2DÂłaparoscopy during pancreatic and biliary anastomoses in a biotissue model: pooled analysis of two randomized trials. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 4518-4528. | 2.4 | 10 |
| 5 | Textbook outcome following oesophagectomy for cancer: international cohort study. British Journal of Surgery, 2022, 109, 439-449. | 0.3 | 12 |
| 6 | Age-specific incidence, treatment, and survival trends in esophageal cancer: a Dutch population-based cohort study. Acta Oncológica, 2022, 61, 545-552. | 1.8 | 7 |
| 7 | Treatment decisionâ€making during outpatient clinic visit of patients with esophagogastric cancer. The perspectives of clinicians and patients, a mixed method, multiple case study. Cancer Medicine, 2022, , . | 2.8 | 1 |
| 8 | Shrinkage versus fragmentation response in neoadjuvantly treated oesophageal adenocarcinoma: significant prognostic relevance. Histopathology, 2022, , . | 2.9 | 6 |
| 9 | Treatment of anastomotic leak after esophagectomy: insights of an international case vignette survey and expert discussions. Ecological Management and Restoration, 2022, , . | 0.4 | 5 |
| 10 | Clinical variation in the organization of clinical pathways in esophagogastric cancer, a mixed method multiple case study. BMC Health Services Research, 2022, 22, 527. | 2.2 | 1 |
| 11 | 124: DETERMINING SEVERITY OF ESOPHAGEAL ANASTOMOTIC LEAK IN PATIENTS AFTER ESOPHAGECTOMY: DEVELOPMENT OF THE SEAL SCORE. Ecological Management and Restoration, 2022, 35, . | 0.4 | 0 |
| 12 | 39: TREATMENT OF ANASTOMOTIC LEAKAGE AFTER ESOPHAGECTOMY (TENTACLE—ESOPHAGUS) STUDY: EFFICACY OF DIFFERENT INITIAL TREATMENT STRATEGIES FOR ANASTOMOTIC LEAKAGE. Ecological Management and Restoration, 2022, 35, . | 0.4 | 0 |
| 13 | Age and Charlson Comorbidity Index score are not independent risk factors for severe complications after curative esophagectomy for esophageal cancer: a Dutch population-based cohort study. Surgical Oncology, 2022, 43, 101789. | 1.6 | 2 |
| 14 | Severity of oEsophageal Anastomotic Leak in patients after oesophagectomy: the SEAL score. British Journal of Surgery, 2022, 109, 864-871. | 0.3 | 9 |
| 15 | Training benchmarks based on validated composite scores for the RobotiX robot-assisted surgery simulator on basic tasks. Journal of Robotic Surgery, 2021, 15, 69-79. | 1.8 | 1 |
| 16 | Early diagnosis is associated with improved clinical outcomes in benign esophageal perforation: an individual patient data meta-analysis. Surgical Endoscopy and Other Interventional Techniques, 2021, 35, 3492-3505. | 2.4 | 20 |
| 17 | Added value of 3D-vision during robotic pancreatoduodenectomy anastomoses in biotissue (LAEBOT) Tj ETQq1 1 Techniques, 2021, 35, 2928-2935. | 0.784314 2.4 | rgBT /Overlo |
| 18 | Treatment of anastomotic leakage after rectal cancer resection: The TENTACLE–Rectum study. Colorectal Disease, 2021, 23, 982-988. | 1.4 | 16 |

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| 19 | The Fun Factor: Does Serious Gaming Affect the Volume of Voluntary Laparoscopic Skills Training?. World Journal of Surgery, 2021, 45, 66-71. | 1.6 | 6 |
| 20 | Impact of pathological tumor response after CROSS neoadjuvant chemoradiotherapy followed by surgery on long-term outcome of esophageal cancer: a population-based study. Acta Oncológica, 2021, 60, 497-504. | 1.8 | 23 |
| 21 | Technique of open and minimally invasive intrathoracic reconstruction following esophagectomyâ€"an expert consensus based on a modified Delphi process. Ecological Management and Restoration, 2021, 34, . | 0.4 | 8 |
| 22 | Management of complex ventral hernias: results of an international survey. BJS Open, 2021, 5, . | 1.7 | 6 |
| 23 | Outcomes of curative esophageal cancer surgery in elderly: A meta-analysis. World Journal of Gastrointestinal Oncology, 2021, 13, 131-146. | 2.0 | 10 |
| 24 | How can robot-assisted surgery provide value for money?. BMJ Surgery, Interventions, and Health Technologies, 2021, 3, e000042. | 0.9 | 6 |
| 25 | Supervised exercise after oesophageal cancer surgery: the PERFECT multicentre randomized clinical trial. British Journal of Surgery, 2021, 108, 786-796. | 0.3 | 12 |
| 26 | Changes in hospital variation in the probability of receiving treatment with curative intent for esophageal and gastric cancer. Cancer Epidemiology, 2021, 71, 101897. | 1.9 | 5 |
| 27 | Commentary: endoscopic vacuum therapy for anastomotic leakage after esophagectomy and total gastrectomy: obstacles to finding true evidence. Ecological Management and Restoration, 2021, 34, . | 0.4 | 0 |
| 28 | Postoperative Complications and Long-Term Quality of Life After Multimodality Treatment for Esophageal Cancer: An Analysis of the Prospective Observational Cohort Study of Esophageal-Gastric Cancer Patients (POCOP). Annals of Surgical Oncology, 2021, 28, 7259-7276. | 1.5 | 18 |
| 29 | Comparison of short-term outcomes from the International Oesophago-Gastric Anastomosis Audit (OGAA), the Esophagectomy Complications Consensus Group (ECCG), and the Dutch Upper Gastrointestinal Cancer Audit (DUCA). BJS Open, 2021, 5, . | 1.7 | 4 |
| 30 | Novel imaging techniques for intraoperative margin assessment in surgical oncology: A systematic review. International Journal of Cancer, 2021, 149, 635-645. | 5.1 | 27 |
| 31 | Updated protocol of the SANO trial: a stepped-wedge cluster randomised trial comparing surgery with active surveillance after neoadjuvant chemoradiotherapy for oesophageal cancer. Trials, 2021, 22, 345. | 1.6 | 54 |
| 32 | Mortality from esophagectomy for esophageal cancer across low, middle, and high-income countries: An international cohort study. European Journal of Surgical Oncology, 2021, 47, 1481-1488. | 1.0 | 18 |
| 33 | Prognostic value of patient-reported quality of life for survival in oesophagogastric cancer: analysis from the population-based POCOP study. Gastric Cancer, 2021, 24, 1203-1212. | 5.3 | 9 |
| 34 | Intrathoracic vs Cervical Anastomosis After Totally or Hybrid Minimally Invasive Esophagectomy for Esophageal Cancer. JAMA Surgery, 2021, 156, 601. | 4.3 | 65 |
| 35 | Response to the Comment on "Learning Curves of Ivor Lewis Totally Minimally Invasive Esophagectomy by Hospital and Surgeon Characteristics a Retrospective Multi-national Cohort Study― Annals of Surgery, 2021, 274, e930. | 4.2 | 3 |
| 36 | Postoperative intensive care unit stay after minimally invasive esophagectomy shows large hospital variation. Results from the Dutch Upper Gastrointestinal Cancer Audit. European Journal of Surgical Oncology, 2021, 47, 1961-1968. | 1.0 | 9 |

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| 37 | Outcomes of Patients with Anastomotic Leakage After Transhiatal, McKeown or Ivor Lewis Esophagectomy: A Nationwide Cohort Study. World Journal of Surgery, 2021, 45, 3341-3349. | 1.6 | 14 |
| 38 | 551 INCREASED POSTOPERATIVE MORBIDITY AFTER TOTALLY MINIMALLY INVASIVE ESOPHAGECTOMY FOR CANCER IN ELDERLY PATIENTS. Ecological Management and Restoration, 2021, 34, . | 0.4 | 0 |
| 39 | 734 PL11.06 PROGNOSTIC FACTORS FOR MORTALITY IN PATIENTS WITH ANASTOMOTIC LEAKAGE AFTER ESOPHAGECTOMY FOR CANCER (TENTACLE—ESOPHAGUS STUDY). Ecological Management and Restoration, 2021, 34, . | 0.4 | 0 |
| 40 | 388 TREATMENT OF ANASTOMOTIC LEAKAGE AFTER ESOPHAGECTOMY (TENTACLEâ€"ESOPHAGUS) STUDY: FACTORS ASSOCIATED WITH ANASTOMOTIC LEAKAGE SEVERITY. Ecological Management and Restoration, 2021, 34, . | 0.4 | 0 |
| 41 | 382 INTRATHORACIC VERSUS CERVICAL ANASTOMOSIS AFTER MINIMALLY INVASIVE ESOPHAGECTOMY FOR OESOPHAGEAL CANCER: A RANDOMIZED CONTROLLED TRIAL (ICAN TRIAL). Ecological Management and Restoration, 2021, 34, . | 0.4 | O |
| 42 | 771 IMPACT OF NATIONWIDE CENTRALIZATION OF ESOPHAGEAL, GASTRIC, AND PANCREATIC SURGERY ON TRAVEL DISTANCE AND EXPERIENCED BURDEN IN THE NETHERLANDS. Ecological Management and Restoration, 2021, 34, . | 0.4 | 0 |
| 43 | 679 TREATMENT OF ANASTOMOTIC LEAKAGE AFTER ESOPHAGECTOMY (TENTACLE—ESOPHAGUS) STUDY: EFFICACY OF DIFFERENT INITIAL TREATMENT STRATEGIES FOR ANASTOMOTIC LEAKAGE. Ecological Management and Restoration, 2021, 34, . | 0.4 | O |
| 44 | 130 SEVERITY OF ANASTOMOTIC LEAKAGE AFTER DIFFERENT TYPES OF ESOPHAGECTOMY: A NATIONWIDE COHORT STUDY. Ecological Management and Restoration, 2021, 34, . | 0.4 | 0 |
| 45 | Selective Decontamination of the Digestive Tract to Prevent Postoperative Pneumonia and Anastomotic Leakage after Esophagectomy: A Retrospective Cohort Study. Antibiotics, 2021, 10, 43. | 3.7 | 4 |
| 46 | Generalizability of the Results and Concerns About Leakage Rates of the ICAN Trialâ€"Reply. JAMA Surgery, 2021, , . | 4.3 | 0 |
| 47 | Anastomotic leak following oesophagectomy: research priorities from an international Delphi consensus study. British Journal of Surgery, 2021, 108, 66-73. | 0.3 | 6 |
| 48 | O01 \hat{a} \in f PROPHYLACTIC MESH PLACEMENT DURING FORMATION OF AN END-COLOSTOMY LONG TERM RCT ON EFFECTIVENESS AND SAFETY. British Journal of Surgery, 2021, 108, . | 0.3 | 0 |
| 49 | Postoperative outcomes in oesophagectomy with trainee involvement. BJS Open, 2021, 5, . | 1.7 | 1 |
| 50 | Propensity Score–Matched Analysis Comparing Minimally Invasive Ivor Lewis Versus Minimally Invasive Mckeown Esophagectomy. Annals of Surgery, 2020, 271, 128-133. | 4.2 | 63 |
| 51 | Diagnostic criteria and symptom grading for delayed gastric conduit emptying after esophagectomy for cancer: international expert consensus based on a modified Delphi process. Ecological Management and Restoration, 2020, 33, . | 0.4 | 28 |
| 52 | Robot assisted versus laparoscopic suturing learning curve in a simulated setting. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 3679-3689. | 2.4 | 39 |
| 53 | Predicting lymph node metastases with endoscopic resection in cT2N0M0 oesophageal cancer: A systematic review and metaâ€analysis. United European Gastroenterology Journal, 2020, 8, 35-43. | 3.8 | 7 |
| 54 | Controlled mechanical ventilation to detect regional lymph node metastases in esophageal cancer using USPIO-enhanced MRI; comparison of image quality. Magnetic Resonance Imaging, 2020, 74, 258-265. | 1.8 | 9 |

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| 55 | Extent and consequences of lymphadenectomy in oesophageal cancer surgery: case vignette survey. BMJ Surgery, Interventions, and Health Technologies, 2020, 2, e000026. | 0.9 | 3 |
| 56 | Fit-for-Discharge Criteria after Esophagectomy: An International Expert Delphi Consensus. Ecological Management and Restoration, 2020, 34, . | 0.4 | 5 |
| 57 | Prospective validation of classification of intraoperative adverse events (ClassIntra): international, multicentre cohort study. BMJ, The, 2020, 370, m2917. | 6.0 | 62 |
| 58 | Assessment of validity evidence for the RobotiX robot assisted surgery simulator on advanced suturing tasks. BMC Surgery, 2020, 20, 183. | 1.3 | 10 |
| 59 | 442 HAS HOSPITAL VARIATION IN THE PROBABILITY OF RECEIVING TREATMENT WITH CURATIVE INTENT FOR ESOPHAGEAL AND GASTRIC CANCER DECREASED OVER TIME?. Ecological Management and Restoration, 2020, 33, . | 0.4 | 0 |
| 60 | 388 TREATMENT OF ANASTOMOTIC LEAKAGE AFTER ESOPHAGECTOMY (TENTACLEâ€"ESOPHAGUS) STUDY: FACTORS ASSOCIATED WITH ANASTOMOTIC LEAKAGE SEVERITY. Ecological Management and Restoration, 2020, 33, . | 0.4 | 0 |
| 61 | Totally minimally invasive esophagectomy versus hybrid minimally invasive esophagectomy: systematic review and meta-analysis. Ecological Management and Restoration, 2020, 33, . | 0.4 | 28 |
| 62 | Identifying Biomarkers in Lymph Node Metastases of Esophageal Adenocarcinoma for Tumor-Targeted Imaging. Molecular Diagnosis and Therapy, 2020, 24, 191-200. | 3.8 | 8 |
| 63 | Construct Validity of a Serious Game for Laparoscopic Skills Training: Validation Study. JMIR Serious Games, 2020, 8, e17222. | 3.1 | 16 |
| 64 | Metastatic pattern in esophageal and gastric cancer: Influenced by site and histology. World Journal of Gastroenterology, 2020, 26, 6037-6046. | 3.3 | 36 |
| 65 | Randomized clinical trial on the effect of a supervised exercise program on quality of life, fatigue, and fitness following esophageal cancer treatment (PERFECT study) Journal of Clinical Oncology, 2020, 38, 12055-12055. | 1.6 | 1 |
| 66 | Intrathoracic versus cervical anastomosis after minimally invasive esophagectomy for esophageal cancer: A randomized controlled trial Journal of Clinical Oncology, 2020, 38, 4509-4509. | 1.6 | 0 |
| 67 | Treatment of anastomotic leakage after esophagectomy (TENTACLE study). European Journal of Surgical Oncology, 2020, 46, e25-e26. | 1.0 | 0 |
| 68 | Transanal Endoscopic Microsurgery with or without Completion Total Mesorectal Excision for T2 and T3 Rectal Carcinoma. Digestive Surgery, 2019, 36, 76-82. | 1.2 | 10 |
| 69 | International Variation in Surgical Practices in Units Performing Oesophagectomy for Oesophageal Cancer: A Unit Survey from the Oesophagoâ€Gastric Anastomosis Audit (OGAA). World Journal of Surgery, 2019, 43, 2874-2884. | 1.6 | 27 |
| 70 | Detecting Pathological Complete Response in Esophageal Cancer after Neoadjuvant Therapy Based on Imaging Techniques: A Diagnostic Systematic Review and Meta-Analysis. Journal of Thoracic Oncology, 2019, 14, 1156-1171. | 1.1 | 85 |
| 71 | Distribution of lymph node metastases in esophageal carcinoma [TIGER study]: study protocol of a multinational observational study. BMC Cancer, 2019, 19, 662. | 2.6 | 62 |
| 72 | Sa1247 EARLY DIAGNOSIS IS ASSOCIATED WITH IMPROVED CLINICAL OUTCOME IN BENIGN ESOPHAGEAL PERFORATIONS: AN INDIVIDUAL PATIENT DATA META-ANALYSIS. Gastrointestinal Endoscopy, 2019, 89, AB186-AB187. | 1.0 | 1 |

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| 73 | The oncological and surgical safety of robot-assisted surgery in colorectal cancer: outcomes of a longitudinal prospective cohort study. Surgical Endoscopy and Other Interventional Techniques, 2019, 33, 3644-3655. | 2.4 | 39 |
| 74 | Synoptic reporting increases quality of upper gastrointestinal cancer pathology reports. Virchows Archiv Fur Pathologische Anatomie Und Physiologie Und Fur Klinische Medizin, 2019, 475, 255-259. | 2.8 | 20 |
| 75 | Cardiorespiratory Comorbidity and Postoperative Complications following Esophagectomy: a European Multicenter Cohort Study. Annals of Surgical Oncology, 2019, 26, 2864-2873. | 1.5 | 46 |
| 76 | Learning curve and postoperative outcomes of minimally invasive esophagectomy. Journal of Thoracic Disease, 2019, 11, S777-S785. | 1.4 | 54 |
| 77 | Resection of hepatic and pulmonary metastasis from metastatic esophageal and gastric cancer: a nationwide study. Ecological Management and Restoration, 2019, 32, . | 0.4 | 13 |
| 78 | Management of intrathoracic and cervical anastomotic leakage after esophagectomy for esophageal cancer: a systematic review. World Journal of Emergency Surgery, 2019, 14, 17. | 5.0 | 54 |
| 79 | Superiority of Step-up Approach vs Open Necrosectomy in Long-term Follow-up of Patients With Necrotizing Pancreatitis. Gastroenterology, 2019, 156, 1016-1026. | 1.3 | 145 |
| 80 | Author's response regarding manuscript †Evolution of the surgical technique of minimally invasive Ivor-Lewis esophagectomy: description according to the IDEAL framework'. Ecological Management and Restoration, 2019, 32, . | 0.4 | 0 |
| 81 | P42 EFFICACY OF ENDOSCOPIC TREATMENT FOR CONTAINED LEAKAGE AFTER IVOR LEWIS ESOPHAGECTOMY. Ecological Management and Restoration, 2019, 32, . | 0.4 | 0 |
| 82 | O102 FINDING FACTORS ASSOCIATED WITH SAFE IMPLEMENTATION OF IVOR LEWIS TOTALLY MINIMALLY INVASIVE ESOPHAGECTOMY. Ecological Management and Restoration, 2019, 32, . | 0.4 | 0 |
| 83 | P113 ESOPHAGECTOMY-SPECIFIC OBJECTIVE STRUCTURED ASSESSMENT OF TECHNICAL SKILL (E-OSATS): CONSENSUS ON ESSENTIAL IVOR-LEWIS AND MCKEOWN STEPS TROUGH DELPHI METHODOLOGY. Ecological Management and Restoration, 2019, 32, . | 0.4 | 0 |
| 84 | P63 REQUIREMENTS FOR A NEW DIAGNOSTIC TEST TO DETECT LYMPH NODE METASTASES IN ESOPHAGEAL CANCER: A HEALTH-ECONOMIC MODELLING STUDY. Ecological Management and Restoration, 2019, 32, . | 0.4 | 0 |
| 85 | P65 USPIO-MRI FOR PRE-OPERATIVE LYMPH NODE STAGING AFTER NEOADJUVANT CHEMORADIOTHERAPY: FEASIBILITY AND VALIDATION FRAMEWORK. Ecological Management and Restoration, 2019, 32, . | 0.4 | 0 |
| 86 | P121 ESOPHAGECTOMY-SPECIFIC OBJECTIVE STRUCTURED ASSESSMENT OF TECHNICAL SKILL (E-OSATS): VALIDATION PROTOCOL. Ecological Management and Restoration, 2019, 32, . | 0.4 | 0 |
| 87 | O19 OUTCOMES OF IVOR LEWIS VERSUS MCKEOWN OESOPHAGECTOMY FOR CANCER: A PROPENSITY SCORE MATCHED ANALYSIS OF THE NETHERLANDS CANCER REGISTRY. Ecological Management and Restoration, 2019, 32, . | 0.4 | 0 |
| 88 | P204 DETECTING PATHOLOGICAL COMPLETE RESPONSE IN ESOPHAGEAL CANCER AFTER NEOADJUVANT THERAPY BASED ON IMAGING TECHNIQUES: A DIAGNOSTIC SYSTEMATIC REVIEW AND META-ANALYSIS. Ecological Management and Restoration, 2019, 32, . | 0.4 | 0 |
| 89 | The Influence of Age on Complications and Overall Survival After Ivor Lewis Totally Minimally Invasive Esophagectomy. Journal of Gastrointestinal Surgery, 2019, 23, 1293-1300. | 1.7 | 18 |
| 90 | Clinical response after laparoscopic fenestration of symptomatic hepatic cysts: a systematic review and meta-analysis. Surgical Endoscopy and Other Interventional Techniques, 2019, 33, 691-704. | 2.4 | 33 |

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| 91 | Surgeon Volume and Surgeon Age in Relation to Proficiency Gain Curves for Prognosis Following Surgery for Esophageal Cancer. Annals of Surgical Oncology, 2019, 26, 497-505. | 1.5 | 20 |
| 92 | Evolution of the surgical technique of minimally invasive Ivor-Lewis esophagectomy: description according to the IDEAL framework. Ecological Management and Restoration, 2019, 32, . | 0.4 | 10 |
| 93 | Learning Curve and Associated Morbidity of Minimally Invasive Esophagectomy. Annals of Surgery, 2019, 269, 88-94. | 4.2 | 207 |
| 94 | EARLY DIAGNOSIS IS ASSOCIATED WITH IMPROVED CLINICAL OUTCOME IN BENIGN ESOPHAGEAL PERFORATIONS: AN INDIVIDUAL PATIENT DATA META-ANALYSIS. , 2019, 51, . | | 2 |
| 95 | Colicky pain and related complications after cholecystectomy for mild gallstone pancreatitis. Hpb, 2018, 20, 745-751. | 0.3 | 2 |
| 96 | Multicentre randomized clinical trial of inspiratory muscle training <i>versus</i> usual care before surgery for oesophageal cancer. British Journal of Surgery, 2018, 105, 502-511. | 0.3 | 71 |
| 97 | Time interval between neoadjuvant chemoradiotherapy and surgery for oesophageal or junctional cancer: A nationwide study. European Journal of Cancer, 2018, 91, 76-85. | 2.8 | 39 |
| 98 | Factors contributing to variation in the use of multimodality treatment in patients with gastric cancer: A Dutch population based study. European Journal of Surgical Oncology, 2018, 44, 260-267. | 1.0 | 3 |
| 99 | Long-term survival improvement in oesophageal cancer in the Netherlands. European Journal of Cancer, 2018, 94, 138-147. | 2.8 | 56 |
| 100 | A Population-based Study on Lymph Node Retrieval in Patients with Esophageal Cancer: Results from the Dutch Upper Gastrointestinal Cancer Audit. Annals of Surgical Oncology, 2018, 25, 1211-1220. | 1.5 | 39 |
| 101 | Endoscopic or surgical step-up approach for infected necrotising pancreatitis: a multicentre randomised trial. Lancet, The, 2018, 391, 51-58. | 13.7 | 504 |
| 102 | The long-term effects of early oral feeding following minimal invasive esophagectomy. Ecological Management and Restoration, 2018, 31, 1-8. | 0.4 | 30 |
| 103 | PS01.173: MANAGEMENT OF INTRATHORACIC AND CERVICAL ANASTOMOTIC LEAKAGE AFTER ESOPHAGECTOMY FOR ESOPHAGEAL CANCER: A SYSTEMATIC REVIEW. Ecological Management and Restoration, 2018, 31, 99-99. | 0.4 | O |
| 104 | PS01.202: MANAGEMENT OF RESECTABLE ESOPHAGEAL AND GASTRIC (MIXED ADENO)NEUROENDOCRINE CARCINOMA: A NATIONWIDE COHORT STUDY. Ecological Management and Restoration, 2018, 31, 107-107. | 0.4 | 1 |
| 105 | Prospective observational cohort study of oesophagogastric cancer patients (POCOP): A Dutch nationwide cohort. Annals of Oncology, 2018, 29, viii234. | 1.2 | 0 |
| 106 | RA05.09: THE INFLUENCE OF AGE ON OVERALL SURVIVAL AND COMPLICATIONS AFTER IVOR LEWIS TOTALLY MINIMALLY INVASIVE ESOPHAGEAL SURGERY. Ecological Management and Restoration, 2018, 31, 29-29. | 0.4 | 0 |
| 107 | RA07.02: IDENTIFYING TUMOR MARKERS IN ESOPHAGEAL ADENOCARCINOMA AND LYMPH NODE METASTASES FOR TARGETED FLUORESCENCE IMAGING. Ecological Management and Restoration, 2018, 31, 34-34. | 0.4 | О |
| 108 | PS02.078: FEASIBILITY OF PREOPERATIVE STAGING WITH USPIO ENHANCED MRI IN PATIENTS WITH RESECTABLE ESOPHAGEAL CARCINOMA (PRECIES STUDY). Ecological Management and Restoration, 2018, 31, 142-142. | 0.4 | 0 |

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| 109 | PS01.246: ESOPHAGECTOMY-SPECIFIC OBJECTIVE STRUCTURED ASSESSMENT OF TECHNICAL SKILL (E-OSATS): CONSENSUS ON ESSENTIAL STEPS THROUGH DELPHI METHODOLOGY. Ecological Management and Restoration, 2018, 31, 119-119. | 0.4 | 0 |
| 110 | FA04.06: RESECTION OF HEPATIC AND PULMONARY METASTASIS FROM ESOPHAGEAL AND GASTRIC CANCER: A NATIONWIDE STUDY. Ecological Management and Restoration, 2018, 31, 9-9. | 0.4 | 1 |
| 111 | Detection of residual disease after neoadjuvant chemoradiotherapy for oesophageal cancer (preSANO): a prospective multicentre, diagnostic cohort study. Lancet Oncology, The, 2018, 19, 965-974. | 10.7 | 211 |
| 112 | Clinical response after laparoscopic fenestration of large simple hepatic cysts: a systematic review. Journal of Hepatology, 2018, 68, S629. | 3.7 | 0 |
| 113 | Neoadjuvant chemoradiotherapy plus surgery versus active surveillance for oesophageal cancer: a stepped-wedge cluster randomised trial. BMC Cancer, 2018, 18, 142. | 2.6 | 166 |
| 114 | Management of resectable esophageal and gastric (mixed adeno)neuroendocrine carcinoma: A nationwide cohort study. European Journal of Surgical Oncology, 2018, 44, 1955-1962. | 1.0 | 29 |
| 115 | Learning curves in minimally invasive esophagectomy. World Journal of Gastroenterology, 2018, 24, 4974-4978. | 3.3 | 28 |
| 116 | Techniques and short-term outcomes for total minimally invasive Ivor Lewis esophageal resection in distal esophageal and gastroesophageal junction cancers: pooled data from six European centers. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 119-126. | 2.4 | 55 |
| 117 | Multicenter, Prospective, Longitudinal Study of the Recurrence, Surgical Site Infection, and Quality of Life After Contaminated Ventral Hernia Repair Using Biosynthetic Absorbable Mesh. Annals of Surgery, 2017, 265, 205-211. | 4.2 | 213 |
| 118 | Textbook outcome as a composite measure in oesophagogastric cancer surgery. British Journal of Surgery, 2017, 104, 742-750. | 0.3 | 174 |
| 119 | Randomized clinical trial of biodegradeable intraluminal sheath to prevent anastomotic leak after stapled colorectal anastomosis. British Journal of Surgery, 2017, 104, 1010-1019. | 0.3 | 33 |
| 120 | Minimally Invasive Versus Open Esophageal Resection. Annals of Surgery, 2017, 266, 232-236. | 4.2 | 415 |
| 121 | Prophylactic Mesh Placement During Formation of an End-colostomy Reduces the Rate of Parastomal Hernia. Annals of Surgery, 2017, 265, 663-669. | 4.2 | 72 |
| 122 | Failure-to-rescue in patients undergoing surgery for esophageal or gastric cancer. European Journal of Surgical Oncology, 2017, 43, 1962-1969. | 1.0 | 53 |
| 123 | Improved Functional Results After Minimally Invasive Esophagectomy: Intrathoracic Versus Cervical Anastomosis. Annals of Thoracic Surgery, 2017, 103, 267-273. | 1.3 | 82 |
| 124 | Physical ExeRcise Following Esophageal Cancer Treatment (PERFECT) study: design of a randomized controlled trial. BMC Cancer, 2017, 17, 552. | 2.6 | 18 |
| 125 | The feeding route after esophagectomy: a review of literature. Journal of Thoracic Disease, 2017, 9, S785-S791. | 1.4 | 37 |
| 126 | McKeown or Ivor Lewis totally minimally invasive esophagectomy for cancer of the esophagus and gastroesophageal junction: systematic review and meta-analysis. Journal of Thoracic Disease, 2017, 9, S826-S833. | 1.4 | 71 |

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| 127 | Predictive factors for post-operative respiratory infections after esophagectomy for esophageal cancer: outcome of randomized trial. Journal of Thoracic Disease, 2017, 9, S861-S867. | 1.4 | 22 |
| 128 | Immediate Postoperative Oral Nutrition Following Esophagectomy: A Multicenter Clinical Trial. Annals of Thoracic Surgery, 2016, 102, 1141-1148. | 1.3 | 81 |
| 129 | Early outcomes from the Dutch Upper Gastrointestinal Cancer Audit. British Journal of Surgery, 2016, 103, 1855-1863. | 0.3 | 121 |
| 130 | Intrathoracic versus Cervical ANastomosis after minimally invasive esophagectomy for esophageal cancer: study protocol of the ICAN randomized controlled trial. Trials, 2016, 17, 505. | 1.6 | 37 |
| 131 | Electromagnetic-Guided Bedside Placement of Nasoenteral Feeding Tubes by Nurses Is Non-Inferior to Endoscopic Placement by Gastroenterologists: A Multicenter Randomized Controlled Trial. American Journal of Gastroenterology, 2016, 111, 1123-1132. | 0.4 | 16 |
| 132 | Prophylactic mesh placement to prevent parastomal hernia, early results of a prospective multicentre randomized trial. Hernia: the Journal of Hernias and Abdominal Wall Surgery, 2016, 20, 535-541. | 2.0 | 56 |
| 133 | Antibiotic Duration After Laparoscopic Appendectomy for Acute Complicated Appendicitis. JAMA Surgery, 2016, 151, 323. | 4.3 | 69 |
| 134 | Prospective nationwide outcome audit of surgery for suspected acute appendicitis. British Journal of Surgery, 2015, 103, 144-151. | 0.3 | 80 |
| 135 | Incisional Hernia: Difficult Cases 2. Hernia: the Journal of Hernias and Abdominal Wall Surgery, 2015, 19, S105-S111. | 2.0 | 0 |
| 136 | Improved quality of care for patients undergoing an abdominoperineal excision for rectal cancer. European Journal of Surgical Oncology, 2015, 41, 201-207. | 1.0 | 15 |
| 137 | Long-term outcome after randomizing prolene hernia system, mesh plug repair and lichtenstein for inguinal hernia repair. Hernia: the Journal of Hernias and Abdominal Wall Surgery, 2015, 19, 77-81. | 2.0 | 34 |
| 138 | Costs of complications after colorectal cancer surgery in the Netherlands: Building the business case for hospitals. European Journal of Surgical Oncology, 2015, 41, 1059-1067. | 1.0 | 63 |
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