# Edwin H Kim

List of Publications by Year
in descending order



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|---|---|---|---|
| 64 papers | 2,616 citations | 331670 21 h-index | 189892 50 g-index |
| 64 all docs | 64 docs citations | 64 times ranked | 1375 citing authors |

| # | Article | IF | Citations |
|---|---|---|---|
| 1 | AR101 Oral Immunotherapy for Peanut Allergy. New England Journal of Medicine, 2018, 379, 1991-2001. | 27.0 | 518 |
| 2 | Sublingual immunotherapy for peanut allergy: Clinical and immunologic evidence of desensitization. Journal of Allergy and Clinical Immunology, 2011, 127, 640-646.e1. | 2.9 | 324 |
| 3 | Early oral immunotherapy in peanut-allergic preschool children is safe and highly effective. Journal of Allergy and Clinical Immunology, 2017, 139, 173-181.e8. | 2.9 | 299 |
| 4 | Effect of Epicutaneous Immunotherapy vs Placebo on Reaction to Peanut Protein Ingestion Among Children With Peanut Allergy. JAMA - Journal of the American Medical Association, 2019, 321, 946. | 7.4 | 206 |
| 5 | Efficacy and Safety of AR101 in Oral Immunotherapy for Peanut Allergy: Results of ARC001, a Randomized, Double-Blind, Placebo-Controlled Phase 2 Clinical Trial. Journal of Allergy and Clinical Immunology: in Practice, 2018, 6, 476-485.e3. | 3.8 | 153 |
| 6 | Efficacy and safety of oral immunotherapy in children aged 1â€“3 years with peanut allergy (the Immune) Tj ETQq0 0 0 rgBT /Overlock 10 359-371. | 13.7 | 139 |
| 7 | Long-term sublingual immunotherapy for peanut allergy in children: Clinical and immunologic evidence of desensitization. Journal of Allergy and Clinical Immunology, 2019, 144, 1320-1326.e1. | 2.9 | 90 |
| 8 | Increased peanut-specific IgA levels in saliva correlate with food challenge outcomes after peanut sublingual immunotherapy. Journal of Allergy and Clinical Immunology, 2012, 129, 1159-1162. | 2.9 | 89 |
| 9 | Long-term, open-label extension study of the efficacy and safety of epicutaneous immunotherapy for peanut allergy in children: PEOPLE 3-year results. Journal of Allergy and Clinical Immunology, 2020, 146, 863-874. | 2.9 | 63 |
| 10 | Clinical Characteristics of Peanut-Allergic Children: Recent Changes. Pediatrics, 2007, 120, 1304-1310. | 2.1 | 61 |
| 11 | Food allergy immunotherapy: Oral immunotherapy and epicutaneous immunotherapy. Allergy: European Journal of Allergy and Clinical Immunology, 2020, 75, 1337-1346. | 5.7 | 57 |
| 12 | Induction of sustained unresponsiveness after egg oral immunotherapy compared to baked egg therapy in children with egg allergy. Journal of Allergy and Clinical Immunology, 2020, 146, 851-862.e10. | 2.9 | 53 |
| 13 | Immunoglobulin variable-region diversity in the zebrafish. Immunogenetics, 2000, 52, 81-91. | 2.4 | 51 |
| 14 | Highâ€•and lowâ€•dose oral immunotherapy similarly suppress proâ€•allergic cytokines and basophil activation in young children. Clinical and Experimental Allergy, 2019, 49, 180-189. | 2.9 | 45 |
| 15 | Mechanisms of oral immunotherapy. Clinical and Experimental Allergy, 2021, 51, 527-535. | 2.9 | 38 |
| 16 | Development and acceptability of a shared decision-making tool for commercial peanut allergy therapies. Annals of Allergy, Asthma and Immunology, 2020, 125, 90-96. | 1.0 | 36 |
| 17 | Epicutaneous immunotherapy for treatment of peanut allergy: Follow-up from the Consortium for Food Allergy Research. Journal of Allergy and Clinical Immunology, 2021, 147, 992-1003.e5. | 2.9 | 34 |
| 18 | Safety of Epicutaneous Immunotherapy in Peanut-Allergic Children: REALISE Randomized Clinical Trial Results. Journal of Allergy and Clinical Immunology: in Practice, 2022, 10, 1864-1873.e10. | 3.8 | 31 |

| # | Article | IF | Citations |
|---|---|---|---|
| 19 | Allergen-specific T cells and clinical features of food allergy: Lessons from CoFAR immunotherapy cohorts. Journal of Allergy and Clinical Immunology, 2022, 149, 1373-1382.e12. | 2.9 | 30 |
| 20 | Updating the CoFAR Grading Scale for Systemic Allergic Reactions in Food Allergy. Journal of Allergy and Clinical Immunology, 2022, 149, 2166-2170.e1. | 2.9 | 30 |
| 21 | Estimated risk reduction to packaged food reactions by epicutaneous immunotherapy (EPIT) for peanut allergy. Annals of Allergy, Asthma and Immunology, 2019, 123, 488-493.e2. | 1.0 | 25 |
| 22 | Sublingual immunotherapy for food allergy and its future directions. Immunotherapy, 2020, 12, 921-931. | 2.0 | 21 |
| 23 | The importance of reducing risk in peanut allergy: Current and future therapies. Annals of Allergy, Asthma and Immunology, 2018, 120, 124-127. | 1.0 | 18 |
| 24 | Sublingual and Patch Immunotherapy for Food Allergy. Immunology and Allergy Clinics of North America, 2020, 40, 135-148. | 1.9 | 17 |
| 25 | Five-year follow-up of early intervention peanut oral immunotherapy. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 514-517. | 3.8 | 17 |
| 26 | Triggers of oral lichen planus flares and the potential role of trigger avoidance in disease management. Oral Surgery, Oral Medicine, Oral Pathology and Oral Radiology, 2017, 124, 248-252. | 0.4 | 15 |
| 27 | Update on peanut allergy: Prevention and immunotherapy. Allergy and Asthma Proceedings, 2019, 40, 14-20. | 2.2 | 14 |
| 28 | Managing food allergy in childhood. Current Opinion in Pediatrics, 2012, 24, 615-620. | 2.0 | 13 |
| 29 | Dosing, safety, and quality of life afterÂpeanut immunotherapy trials: A long-term follow-up study. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 2805-2807. | 3.8 | 13 |
| 30 | Immunotherapy approaches for peanut allergy. Expert Review of Clinical Immunology, 2020, 16, 167-174. | 3.0 | 13 |
| 31 | A 5-year summary of real-life dietary egg consumption after completion of a 4-year egg powder oral immunotherapy (eOIT) protocol. Journal of Allergy and Clinical Immunology, 2020, 145, 1292-1295.e1. | 2.9 | 12 |
| 32 | Current Insights into Immunotherapy Approaches for Food Allergy. ImmunoTargets and Therapy, 2021, Volume 10, 1-8. | 5.8 | 12 |
| 33 | Common food allergens and cross-reactivity. Journal of Food Allergy, 2020, 2, 17-21. | 0.2 | 9 |
| 34 | Immunological Basis of Food Allergy (IgE-Mediated, Non-IgE-Mediated, and Tolerance). Chemical Immunology and Allergy, 2015, 101, 8-17. | 1.7 | 8 |
| 35 | Improvements in eliciting dose across baseline sensitivities following 12Âmonths of epicutaneous immunotherapy (EPIT) in peanut-allergic children aged 4 to 11 years. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 3219-3221. | 3.8 | 8 |
| 36 | Evaluation of daily patch application duration for epicutaneous immunotherapy for peanut allergy. Allergy and Asthma Proceedings, 2020, 41, 278-284. | 2.2 | 7 |

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|---|---|---|---|
| 37 | Recurrent anaphylaxis during cardiac catheterization due to ethylene oxide. Journal of Allergy and Clinical Immunology: in Practice, 2018, 6, 2148-2150. | 3.8 | 6 |
| 38 | The Efficacy of AR101, a Peanut-Derived Pharmaceutical for Oral Immunotherapy (OIT), Is Maintained and Tolerability Is Increased with Low-Dose Maintenance Therapy. Journal of Allergy and Clinical Immunology, 2016, 137, AB408. | 2.9 | 5 |
| 39 | An extended proportional hazards model for interval-censored data subject to instantaneous failures. Lifetime Data Analysis, 2020, 26, 158-182. | 0.9 | 5 |
| 40 | Low-risk infants may still benefit from allergenic food consumption. Journal of Allergy and Clinical Immunology, 2020, 145, 1305. | 2.9 | 5 |
| 41 | Effective methods of clinical education. Annals of Allergy, Asthma and Immunology, 2022, 128, 240-247. | 1.0 | 5 |
| 42 | Peanut Allergy: New Developments and Clinical Implications. Current Allergy and Asthma Reports, 2016, 16, 35. | 5.3 | 4 |
| 43 | Interventional Therapies for the Treatment of Food Allergy. Immunology and Allergy Clinics of North America, 2018, 38, 77-88. | 1.9 | 4 |
| 44 | Increasing diversity in peanut oral immunotherapy research and accessibility. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 2132-2133. | 3.8 | 3 |
| 45 | High Rate of Sustained Unresponsiveness with Early-Intervention Peanut Oral Immunotherapy. Journal of Allergy and Clinical Immunology, 2015, 135, AB155. | 2.9 | 2 |
| 46 | Study design with staggered sampling times for evaluating sustained unresponsiveness to peanut sublingual immunotherapy. Statistics in Medicine, 2018, 37, 3944-3958. | 1.6 | 2 |
| 47 | Oral and Sublingual Immunotherapy. Current Treatment Options in Allergy, 2014, 1, 48-57. | 2.2 | 1 |
| 48 | Estimating the Probability of Tolerating Each Challenge Dose of Peanut Protein at Exit Double-Blind, Placebo-Controlled Food Challenge: Results from a Phase 3, Randomized, Double-Blind, Placebo-Controlled Trial (PALISADE) of AR101. Journal of Allergy and Clinical Immunology, 2019, 143, AB262. | 2.9 | 1 |
| 49 | Epicutaneous Immunotherapy (EPIT) for Peanut Allergy in Young Children. Journal of Allergy and Clinical Immunology, 2019, 143, AB247. | 2.9 | 1 |
| 50 | Irradiated Tree Nut Flours for Use in Oral Immunotherapy. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 321-327. | 3.8 | 1 |
| 51 | Shorter â€œtime to peanut introductionâ€•can prevent peanut allergy and avert false Ara h 2 screening results in infants. Journal of Allergy and Clinical Immunology, 2021, 148, 274-275. | 2.9 | 1 |
| 52 | Heterogeneity in Parent Preferences for Peanut Desensitization Therapy. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 3459-3465. | 3.8 | 1 |
| 53 | Early Introduction of Allergenic Foods is Safe and May Be Beneficial. Journal of Allergy and Clinical Immunology: in Practice, 2017, 5, 531-532. | 3.8 | 0 |
| 54 | Assessing the validity of an IRB approved REDCap web based clinical trials recruitment registry. Journal of Allergy and Clinical Immunology, 2018, 141, AB257. | 2.9 | 0 |

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|---|---|---|---|
| 55 | Characteristics of Preschool-Aged Children Currently Enrolled in a Phase II Double Blind Placebo Controlled Study of Peanut Sublingual Immunotherapy. Journal of Allergy and Clinical Immunology, 2018, 141, AB263. | 2.9 | 0 |
| 56 | Impact of Irradiation on the Protein Content and Microbial Levels of Sesame Seed Flour for use in Oral Immunotherapy. Journal of Allergy and Clinical Immunology, 2018, 141, AB241. | 2.9 | 0 |
| 57 | Back to Life, Back to Reality â€“ What Happens after Peanut Immunotherapy? A Long-Term Follow up Study on Perceptions of Safety and Lifestyle. Journal of Allergy and Clinical Immunology, 2019, 143, AB246. | 2.9 | 0 |
| 58 | Long-Term Safety Behaviors and Receipt of Specialized Allergy Care Following Oral or Sublingual Immunotherapy. Journal of Allergy and Clinical Immunology, 2020, 145, AB84. | 2.9 | 0 |
| 59 | Biomarkers for Desensitization in Patients Undergoing Sublingual Immunotherapy for Peanut Allergy. Journal of Allergy and Clinical Immunology, 2021, 147, AB110. | 2.9 | 0 |
| 60 | Effect on age on clinical and immunologic efficacy of peanut sublingual immunotherapy. Journal of Allergy and Clinical Immunology, 2021, 147, AB164. | 2.9 | 0 |
| 61 | Peanut Immunotherapy: Practical Applications. Current Treatment Options in Allergy, 2021, 8, 242-260. | 2.2 | 0 |
| 62 | Caregiver Perceptions and Lifestyle Behaviors After Completion of Peanut Immunotherapy: A Long-Term Follow-Up Study. Journal of Allergy and Clinical Immunology, 2022, 149, AB36. | 2.9 | 0 |
| 63 | Moving Away from Routine Emergency Department Evaluation After Treatment of Anaphylaxis â€“ A Retrospective Review of Epinephrine Usage Among High-Risk Peanut-Allergic Children. Journal of Allergy and Clinical Immunology, 2022, 149, AB107. | 2.9 | 0 |
| 64 | Intestinal Barrier Dysfunction Accompanies Peanut Allergy In A Genetically-Susceptible Mouse Model And Identifies Angiopoietin-like 4 As A Biomarker. Journal of Allergy and Clinical Immunology, 2022, 149, AB163. | 2.9 | 0 |