

# Patrick B Ryan

## List of Publications by Year in descending order

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Version: 2024-02-01

47  
papers

3,719  
citations

361045

20  
h-index

223531

46  
g-index

51  
all docs

51  
docs citations

51  
times ranked

4598  
citing authors

#	ARTICLE	IF	CITATIONS
1	Unraveling COVID-19: A Large-Scale Characterization of 4.5 Million COVID-19 Cases Using CHARYBDIS. <i>Clinical Epidemiology</i> , 2022, Volume 14, 369-384.	1.5	11
2	Current Approaches to Vaccine Safety Using Observational Data: A Rationale for the EUMAEUS (Evaluating Use of Methods for Adverse Events Under Surveillance-for Vaccines) Study Design. <i>Frontiers in Pharmacology</i> , 2022, 13, 837632.	1.6	8
3	Characterizing Anchoring Bias in Vaccine Comparator Selection Due to Health Care Utilization With COVID-19 and Influenza: Observational Cohort Study. <i>JMIR Public Health and Surveillance</i> , 2022, 8, e33099.	1.2	2
4	Large-scale evidence generation and evaluation across a network of databases for type 2 diabetes mellitus (LEGEND-T2DM): a protocol for a series of multinational, real-world comparative cardiovascular effectiveness and safety studies. <i>BMJ Open</i> , 2022, 12, e057977.	0.8	8
5	Quantifying bias in epidemiologic studies evaluating the association between acetaminophen use and cancer. <i>Regulatory Toxicology and Pharmacology</i> , 2021, 120, 104866.	1.3	3
6	Implementation of the COVID-19 Vulnerability Index Across an International Network of Health Care Data Sets: Collaborative External Validation Study. <i>JMIR Medical Informatics</i> , 2021, 9, e21547.	1.3	11
7	Use of repurposed and adjuvant drugs in hospital patients with covid-19: multinational network cohort study. <i>BMJ, The</i> , 2021, 373, n1038.	3.0	50
8	Medications for attentionâ€deficit/hyperactivity disorder in Japan: A retrospective cohort study of label compliance. <i>Neuropsychopharmacology Reports</i> , 2021, 41, 385-392.	1.1	2
9	Risk of depression, suicide and psychosis with hydroxychloroquine treatment for rheumatoid arthritis: a multinational network cohort study. <i>Rheumatology</i> , 2021, 60, 3222-3234.	0.9	20
10	Cardiovascular outcomes and mortality after initiation of canagliflozin: Analyses from the EASEL Study. <i>Endocrinology, Diabetes and Metabolism</i> , 2020, 3, e00096.	1.0	14
11	Large-scale evidence generation and evaluation across a network of databases (LEGEND): assessing validity using hypertension as a case study. <i>Journal of the American Medical Informatics Association: JAMIA</i> , 2020, 27, 1268-1277.	2.2	19
12	Principles of Large-scale Evidence Generation and Evaluation across a Network of Databases (LEGEND). <i>Journal of the American Medical Informatics Association: JAMIA</i> , 2020, 27, 1331-1337.	2.2	31
13	Channeling Bias in the Analysis of Risk of Myocardial Infarction, Stroke, Gastrointestinal Bleeding, and Acute Renal Failure with the Use of Paracetamol Compared with Ibuprofen. <i>Drug Safety</i> , 2020, 43, 927-942.	1.4	7
14	Comparative safety and effectiveness of alendronate versus raloxifene in women with osteoporosis. <i>Scientific Reports</i> , 2020, 10, 11115.	1.6	23
15	How Confident Are We About Observational Findings in Health Care: A Benchmark Study. , 2020, 2, .		32
16	Comparison of First-Line Dual Combination Treatments in Hypertension: Real-World Evidence from Multinational Heterogeneous Cohorts. <i>Korean Circulation Journal</i> , 2020, 50, 52.	0.7	19
17	Comment on "Comparative effectiveness of canagliflozin, SGLT2 inhibitors and non-SGLT2 inhibitors on the risk of hospitalization for heart failure and amputation in patients with type 2 diabetes mellitus: A real-world meta-analysis of 4 observational databases (OBSERVE4D)". <i>Diabetes, Obesity and Metabolism</i> , 2019, 21, 444-445.	2.2	2
18	Feasibility of Using Real-World Data to Replicate Clinical Trial Evidence. <i>JAMA Network Open</i> , 2019, 2, e1912869.	2.8	167

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19	Comprehensive comparative effectiveness and safety of first-line antihypertensive drug classes: a systematic, multinational, large-scale analysis. <i>Lancet</i> , The, 2019, 394, 1816-1826.	6.3	228
20	Empirical confidence interval calibration for population-level effect estimation studies in observational healthcare data. <i>Proceedings of the National Academy of Sciences of the United States of America</i> , 2018, 115, 2571-2577.	3.3	91
21	The representativeness of eligible patients in type 2 diabetes trials: a case study using GIST 2.0. <i>Journal of the American Medical Informatics Association: JAMIA</i> , 2018, 25, 239-247.	2.2	13
22	Risk of lower extremity amputations in people with type 2 diabetes mellitus treated with sodium-glucose co-transporter-2 inhibitors in the USA: A retrospective cohort study. <i>Diabetes, Obesity and Metabolism</i> , 2018, 20, 582-589.	2.2	108
23	Finding factors that predict treatment-resistant depression: Results of a cohort study. <i>Depression and Anxiety</i> , 2018, 35, 668-673.	2.0	54
24	Comparative effectiveness of canagliflozin, SGLT2 inhibitors and non-SGLT2 inhibitors on the risk of hospitalization for heart failure and amputation in patients with type 2 diabetes mellitus: A real-world meta-analysis of 4 observational databases (OBSERVE-4D). <i>Diabetes, Obesity and Metabolism</i> , 2018, 20, 2585-2597.	2.2	164
25	Database Studies of Treatment-Resistant Depression Should Take Account of Adequate Dosing. primary care companion for CNS disorders, <i>The</i> , 2018, 20, .	0.2	5
26	Atypical Antipsychotics and the Risks of Acute Kidney Injury and Related Outcomes Among Older Adults: A Replication Analysis and an Evaluation of Adapted Confounding Control Strategies. <i>Drugs and Aging</i> , 2017, 34, 211-219.	1.3	9
27	Risk Prediction for Ischemic Stroke and Transient Ischemic Attack in Patients Without Atrial Fibrillation: A Retrospective Cohort Study. <i>Journal of Stroke and Cerebrovascular Diseases</i> , 2017, 26, 1721-1731.	0.7	8
28	Transforming the Premier Perspective® hospital database to the OMOP Common Data Model. <i>EGEMS (Washington, DC)</i> , 2017, 2, 15.	2.0	89
29	GIST 2.0: A scalable multi-trait metric for quantifying population representativeness of individual clinical studies. <i>Journal of Biomedical Informatics</i> , 2016, 63, 325-336.	2.5	20
30	Hierarchical models for multiple, rare outcomes using massive observational healthcare databases. <i>Statistical Analysis and Data Mining</i> , 2016, 9, 260-268.	1.4	11
31	Characterizing treatment pathways at scale using the OHDSI network. <i>Proceedings of the National Academy of Sciences of the United States of America</i> , 2016, 113, 7329-7336.	3.3	256
32	Multivariate analysis of the population representativeness of related clinical studies. <i>Journal of Biomedical Informatics</i> , 2016, 60, 66-76.	2.5	21
33	Feasibility and utility of applications of the common data model to multiple, disparate observational health databases. <i>Journal of the American Medical Informatics Association: JAMIA</i> , 2015, 22, 553-564.	2.2	198
34	The impact of standardizing the definition of visits on the consistency of multi-database observational health research. <i>BMC Medical Research Methodology</i> , 2015, 15, 13.	1.4	22
35	Simulation-based Evaluation of the Generalizability Index for Study Traits. <i>AMIA ... Annual Symposium proceedings</i> , 2015, 2015, 594-603.	0.2	9
36	Observational Health Data Sciences and Informatics (OHDSI): Opportunities for Observational Researchers. <i>Studies in Health Technology and Informatics</i> , 2015, 216, 574-8.	0.2	533

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37	Interpreting observational studies: why empirical calibration is needed to correct $p$ -values. <i>Statistics in Medicine</i> , 2014, 33, 209-218.	0.8	163
38	Variation in Choice of Study Design: Findings from the Epidemiology Design Decision Inventory and Evaluation (EDDIE) Survey. <i>Drug Safety</i> , 2013, 36, 15-25.	1.4	12
39	Defining a Reference Set to Support Methodological Research in Drug Safety. <i>Drug Safety</i> , 2013, 36, 33-47.	1.4	109
40	Performance of a semi-automated approach for risk estimation using a common data model for longitudinal healthcare databases. <i>Statistical Methods in Medical Research</i> , 2013, 22, 97-112.	0.7	5
41	Statistical challenges in systematic evidence generation through analysis of observational healthcare data networks. <i>Statistical Methods in Medical Research</i> , 2013, 22, 3-6.	0.7	8
42	Massive Parallelization of Serial Inference Algorithms for a Complex Generalized Linear Model. <i>ACM Transactions on Modeling and Computer Simulation</i> , 2013, 23, 1-17.	0.6	113
43	Disproportionality methods for pharmacovigilance in longitudinal observational databases. <i>Statistical Methods in Medical Research</i> , 2013, 22, 39-56.	0.7	96
44	Evaluating the Impact of Database Heterogeneity on Observational Study Results. <i>American Journal of Epidemiology</i> , 2013, 178, 645-651.	1.6	149
45	Validation of a common data model for active safety surveillance research. <i>Journal of the American Medical Informatics Association: JAMIA</i> , 2012, 19, 54-60.	2.2	397
46	Evaluation of alternative standardized terminologies for medical conditions within a network of observational healthcare databases. <i>Journal of Biomedical Informatics</i> , 2012, 45, 689-696.	2.5	70
47	Advancing the Science for Active Surveillance: Rationale and Design for the Observational Medical Outcomes Partnership. <i>Annals of Internal Medicine</i> , 2010, 153, 600.	2.0	319