## Denis O'Mahony

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/8251892/publications.pdf

Version: 2024-02-01

100 papers

8,897 citations

34 h-index 90 g-index

104 all docs

104 docs citations

104 times ranked 10719 citing authors

#	Article	IF	CITATIONS
1	Performance of a trigger tool for detecting drug-related hospital admissions in older people: analysis from the OPERAM trial. Age and Ageing, 2022, 51, .	1.6	6
2	Medication-related quality of life (MRQoL) in ambulatory older adults with multi-morbidity and polypharmacy. European Geriatric Medicine, 2022, 13, 579-583.	2.8	3
3	Inappropriate prescribing: hazards and solutions. Age and Ageing, 2022, 51, .	1.6	7
4	Predictors of 1â€year drugâ€related admissions in older multimorbid hospitalized adults. Journal of the American Geriatrics Society, 2022, 70, 1510-1516.	2.6	4
5	HOSPITAL Score and LACE Index to Predict Mortality in Multimorbid Older Patients. Drugs and Aging, 2022, 39, 223-234.	2.7	5
6	Experience of hospital-initiated medication changes in older people with multimorbidity: a multicentre mixed-methods study embedded in the OPtimising thERapy to prevent Avoidable hospital admissions in Multimorbid older people (OPERAM) trial. BMJ Quality and Safety, 2022, 31, 888-898.	3.7	7
7	Frequency and Acceptance of Clinical Decision Support System-Generated STOPP/START Signals for Hospitalised Older Patients with Polypharmacy and Multimorbidity. Drugs and Aging, 2022, 39, 59-73.	2.7	15
8	Cost-effectiveness of a structured medication review approach for multimorbid older adults: Within-trial analysis of the OPERAM study. PLoS ONE, 2022, 17, e0265507.	2.5	6
9	Prescribing cascades: we see only what we look for, we look for only what we know. Age and Ageing, 2022, 51, .	1.6	8
10	Current evidence on the impact of medication optimization or pharmacological interventions on frailty or aspects of frailty: a systematic review of randomized controlled trials. European Journal of Clinical Pharmacology, 2021, 77, 1-12.	1.9	26
11	Thirst for change in a challenging environment: healthcare providers' perceptions of safety culture in a large Irish teaching hospital. Irish Journal of Medical Science, 2021, , 1.	1.5	1
12	Identifying key prescribing cascades in older people (iKASCADE): a transnational initiative on drug safety through a sex and gender lensâ€"rationale and design. European Geriatric Medicine, 2021, 12, 475-483.	2.8	7
13	Potentially inappropriate medication (PIM) use and severe drug interactions (SDIs) in older adults with cancer. Journal of Geriatric Oncology, 2021, 12, 872-880.	1.0	8
14	Optimizing Therapy to Prevent Avoidable Hospital Admissions in Multimorbid Older Adults (OPERAM): cluster randomised controlled trial. BMJ, The, 2021, 374, n1585.	6.0	84
15	Factors affecting physician implementation of hospital pharmacists' medication appropriateness recommendations in older adults. British Journal of Clinical Pharmacology, 2021, , .	2.4	O
16	An International Consensus List of Potentially Clinically Significant Drug-Drug Interactions in Older People. Journal of the American Medical Directors Association, 2021, 22, 2121-2133.e24.	2.5	22
17	STOPPFall (Screening Tool of Older Persons Prescriptions in older adults with high fall risk): a Delphi study by the EuGMS Task and Finish Group on Fall-Risk-Increasing Drugs. Age and Ageing, 2021, 50, 1189-1199.	1.6	88
18	Cross-sectional study on the prevalence of influenza and pneumococcal vaccination and its association with health conditions and risk factors among hospitalized multimorbid older patients. PLoS ONE, 2021, 16, e0260112.	2.5	0

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19	Non-pharmacological, non-surgical interventions for urinary incontinence in older persons: A systematic review of systematic reviews. The SENATOR project ONTOP series. Maturitas, 2020, 133, 42-48.	2.4	9
20	A systematic overview of systematic reviews evaluating medication adherence interventions. American Journal of Health-System Pharmacy, 2020, 77, 138-147.	1.0	63
21	STOPP/START criteria for potentially inappropriate medications/potential prescribing omissions in older people: origin and progress. Expert Review of Clinical Pharmacology, 2020, 13, 15-22.	3.1	121
22	Deprescribing in Older People Approaching End of Life: A Randomized Controlled Trial Using STOPPFrail Criteria. Journal of the American Geriatrics Society, 2020, 68, 762-769.	2.6	44
23	In-hospital adverse drug reactions in older adults; prevalence, presentation and associated drugs—a systematic review and meta-analysis. Age and Ageing, 2020, 49, 948-958.	1.6	38
24	Factors Affecting Prescriber Implementation of Computer-Generated Medication Recommendations in the SENATOR Trial: A Qualitative Study. Drugs and Aging, 2020, 37, 703-713.	2.7	13
25	Computer-generated STOPP/START recommendations for hospitalised older adults: evaluation of the relationship between clinical relevance and rate of implementation in the SENATOR trial. Age and Ageing, 2020, 49, 615-621.	1.6	22
26	Prevention of adverse drug reactions in hospitalized older patients with multi-morbidity and polypharmacy: the SENATOR* randomized controlled clinical trial. Age and Ageing, 2020, 49, 605-614.	1.6	68
27	Safety culture in a major accredited Irish university teaching hospital: a mixed methods study using the safety attitudes questionnaire. Irish Journal of Medical Science, 2020, 189, 1171-1178.	1.5	10
28	206 Deprescribing in Frail Older People Transitioning to Long-term Care: a Randomized Controlled Trial Using STOPPFrail Criteria. Age and Ageing, 2019, 48, iii17-iii65.	1.6	1
29	209 Deprescribing in Frail Older People Approaching End-of-Life: Development and Validation of STOPPFrail Version 2. Age and Ageing, 2019, 48, iii1-iii16.	1.6	0
30	A systematic overview of systematic reviews evaluating interventions addressing polypharmacy. American Journal of Health-System Pharmacy, 2019, 76, 1777-1787.	1.0	23
31	91 A Descriptive Analysis of Causative Drgs/Drg Classes of Incident Adverse Drg Reactions in Acutely Hospitalized Older-Adults: SENATOR (Phase I). Age and Ageing, 2019, 48, iii17-iii65.	1.6	0
32	Detection and prevention of adverse drug reactions in multi-morbid older patients. Age and Ageing, 2019, 48, 10-13.	1.6	11
33	150 Severe Drug Interactions (SDIs) and Potentially Inappropriate Prescriptions (PIPs) in Older Adults with Cancer. Age and Ageing, 2019, 48, iii1-iii16.	1.6	2
34	Diffuse large vessel giant cell arteritis found by 18Fluorodeoxyglucose PET/CT imaging. Lancet, The, 2019, 393, 349.	13.7	1
35	STOPPFrail (Screening Tool of Older Persons' Prescriptions in Frail adults with a limited life) Tj ETQq1 1 0.78 European Journal of Clinical Pharmacology, 2019, 75, 723-731.	34314 rgB1 1.9	Overlock 1 19
36	Prescriber Implementation of STOPP/START Recommendations for Hospitalised Older Adults: A Comparison of a Pharmacist Approach and a Physician Approach. Drugs and Aging, 2019, 36, 279-288.	2.7	12

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37	Non-pharmacological interventions for the improvement of post-stroke quality of life amongst older stroke survivors: a systematic review of systematic reviews (The SENATOR ONTOP series). European Geriatric Medicine, 2019, 10, 359-386.	2.8	1
38	Nonpharmacologic Management of Orthostatic Hypotension in Older People: A Systematic Review. The SENATOR ONTOP Series. Journal of the American Medical Directors Association, 2019, 20, 1065-1073.e3.	2.5	9
39	Predicting 1â€Year Mortality in Older Hospitalized Patients: External Validation of the HOMR Model. Journal of the American Geriatrics Society, 2019, 67, 1478-1483.	2.6	7
40	Explicit criteria as clinical tools to minimize inappropriate medication use and its consequences. Therapeutic Advances in Drug Safety, 2019, 10, 204209861982943.	2.4	77
41	Adverse Drug Reactions in an Oncological Population: Prevalence, Predictability, and Preventability. Oncologist, 2019, 24, e968-e977.	3.7	27
42	Association of polypharmacy and hyperpolypharmacy with frailty states: a systematic review and meta-analysis. European Geriatric Medicine, 2019, 10, 9-36.	2.8	79
43	Deprescribing in multi-morbid older people with polypharmacy: agreement between STOPPFrail explicit criteria and gold standard deprescribing using 100 standardized clinical cases. European Journal of Clinical Pharmacology, 2019, 75, 427-432.	1.9	23
44	Qualitative analysis of community pharmacists' opinions on their involvement in reducing potentially inappropriate prescribing. European Journal of Clinical Pharmacology, 2019, 75, 265-274.	1.9	11
45	Rationale and design of OPtimising thERapy to prevent Avoidable hospital admissions in Multimorbid older people (OPERAM): a cluster randomised controlled trial. BMJ Open, 2019, 9, e026769.	1.9	36
46	The adverse drug reaction risk in older persons (ADRROP) prediction scale: derivation and prospective validation of an ADR risk assessment tool in older multi-morbid patients. European Geriatric Medicine, 2018, 9, 191-199.	2.8	23
47	Inter-rater reliability of STOPPFrail [Screening Tool of Older Persons Prescriptions in Frail adults with limited life expectancy] criteria amongst 12 physicians. European Journal of Clinical Pharmacology, 2018, 74, 331-338.	1.9	22
48	Longitudinal patterns of potentially inappropriate prescribing in early old-aged people. European Journal of Clinical Pharmacology, 2018, 74, 307-313.	1.9	23
49	254An Age Based Assessment of Time to Stroke Ward Admission in Acute Stroke Patients in Cork University Hospital. Age and Ageing, 2018, 47, v13-v60.	1.6	0
50	40Experiences of Direct Oral Anticoagulants [DOAC] Prescribing on an Acute Geriatric Service and Rehabilitation Ward. Age and Ageing, 2018, 47, v13-v60.	1.6	0
51	Non-pharmacological interventions for the improvement of post-stroke activities of daily living and disability amongst older stroke survivors: A systematic review. PLoS ONE, 2018, 13, e0204774.	2.5	18
52	24In-Hospital Adverse Drug Reactions in Hospitalised Older Adults - A Systematic Review. Age and Ageing, 2018, 47, v13-v60.	1.6	3
53	Cost-Effectiveness Analysis of a Physician-Implemented Medication Screening Tool in Older Hospitalised Patients in Ireland. Drugs and Aging, 2018, 35, 751-762.	2.7	11
54	Development of a standardized chart review method to identify drugâ€related hospital admissions in older people. British Journal of Clinical Pharmacology, 2018, 84, 2600-2614.	2.4	38

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55	Identification of behaviour change techniques in deprescribing interventions: a systematic review and metaâ€analysis. British Journal of Clinical Pharmacology, 2018, 84, 2716-2728.	2.4	47
56	Computerised interventions designed to reduce potentially inappropriate prescribing in hospitalised older adults: a systematic review and meta-analysis. Age and Ageing, 2018, 47, 670-678.	1.6	65
57	The SENATOR project: developing and trialling a novel software engine to optimize medications and nonpharmacological therapy in older people with multimorbidity and polypharmacy. Therapeutic Advances in Drug Safety, 2017, 8, 81-85.	2.4	23
58	Use of an e-Learning Educational Module to Better Equip Doctors to Prescribe for Older Patients: A Randomised Controlled Trial. Drugs and Aging, 2017, 34, 367-374.	2.7	18
59	Challenges of deprescribing in the multimorbid patient. European Journal of Hospital Pharmacy, 2017, 24, 43-46.	1.1	34
60	Systematic review of systematic reviews of non-pharmacological interventions to treat behavioural disturbances in older patients with dementia. The SENATOR-OnTop series. BMJ Open, 2017, 7, e012759.	1,9	356
61	Response to Dr Caballero-Mora's comments. Age and Ageing, 2017, 46, 875-875.	1.6	18
62	257Computerised Medication Analysis Designed to Minimise Inappropriate Prescribing in Older Hospitalised Patients: A Systematic Review. Age and Ageing, 2017, 46, iii13-iii59.	1.6	0
63	086Economic Analysis of a Physician-implemented, Medication Screening Tool in Older Irish Hospitalised Patients. Age and Ageing, 2017, 46, iii1-iii12.	1.6	0
64	Development of a core outcome set for medication review in older patients with multimorbidity and polypharmacy: a study protocol. Clinical Interventions in Aging, 2017, Volume 12, 1379-1389.	2.9	12
65	Nonpharmacological interventions to treat physical frailty and sarcopenia in older patients: a systematic overview & amp; ndash; the SENATOR Project ONTOP Series. Clinical Interventions in Aging, 2017, Volume 12, 721-740.	2.9	102
66	Optimizing pharmacotherapy for older patients. , 2017, , 183-188.		2
67	Methods to reduce prescribing errors in elderly patients with multimorbidity. Clinical Interventions in Aging, 2016, 11, 857.	2.9	121
68	Potentially inappropriate prescribing in older patients admitted to psychiatric hospital. International Journal of Geriatric Psychiatry, 2016, 31, 137-145.	2.7	33
69	Prevention of Hospitalâ€Acquired Adverse Drug Reactions in Older People Using Screening Tool of Older Persons' Prescriptions and Screening Tool to Alert to Right Treatment Criteria: A Cluster Randomized Controlled Trial. Journal of the American Geriatrics Society, 2016, 64, 1558-1566.	2.6	107
70	Prevention of Adverse Drug Reactions in Hospitalised Older Patients Using a Software-Supported Structured Pharmacist Intervention: A Cluster Randomised Controlled Trial. Drugs and Aging, 2016, 33, 63-73.	2.7	69
71	Pharmacists and prevention of inappropriate prescribing in hospital. Age and Ageing, 2016, 45, 181-183.	1.6	9
72	Structured Pharmacist Review of Medication in Older Hospitalised Patients: A Cost-Effectiveness Analysis. Drugs and Aging, 2016, 33, 285-294.	2.7	35

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73	Nonpharmacologic Interventions to Prevent Pressure Ulcers inÂOlderÂPatients: An Overview of Systematic Reviews (TheÂSoftware ENgine for the Assessment and optimization of drug and non-drug) Tj ETQq1 1	l 0.78431 2.5	4.rgBT /O√€
74	Application of the structured history taking of medication use tool to optimise prescribing for older patients and reduce adverse events. International Journal of Clinical Pharmacy, 2016, 38, 374-379.	2.1	7
75	Use of a frailty index to identify potentially inappropriate prescribing and adverse drug reaction risks in older patients. Age and Ageing, 2016, 45, 115-120.	1.6	79
76	Effectiveness of Non-Pharmacological Interventions to Prevent Falls in Older People: A Systematic Overview. The SENATOR Project ONTOP Series. PLoS ONE, 2016, 11, e0161579.	2.5	48
77	Metaâ€analysis of Multifactorial Interventions to Prevent Falls of Older Adults in Care Facilities. Journal of the American Geriatrics Society, 2015, 63, 1972-1973.	2.6	6
78	Impact of tooth replacement on the nutritional status of partially dentate elders. Clinical Oral Investigations, 2015, 19, 1991-1998.	3.0	24
79	Nonpharmacologic Interventions to Heal Pressure Ulcers in Older Patients: An Overview of Systematic Reviews (The SENATOR-ONTOP Series). Journal of the American Medical Directors Association, 2015, 16, 448-469.	2.5	35
80	Evidence of and recommendations for non-pharmacological interventions for common geriatric conditions: the SENATOR-ONTOP systematic review protocol. BMJ Open, 2015, 5, e007488-e007488.	1.9	45
81	Subjective impact of minimally invasive dentistry in the oral health of older patients. Clinical Oral Investigations, 2015, 19, 681-687.	3.0	14
82	Efficacy of Non-Pharmacological Interventions to Prevent and Treat Delirium in Older Patients: A Systematic Overview. The SENATOR project ONTOP Series. PLoS ONE, 2015, 10, e0123090.	2.5	180
83	STOPP/START Criteria and Their Role as a Clinical Tool in Routine Practice. European Journal of Case Reports in Internal Medicine, 2015, 2, .	0.4	0
84	STOPP/START criteria for potentially inappropriate prescribing in older people: version 2. Age and Ageing, 2014, 44, 213-218.	1.6	1,775
85	The Impact of a Structured Pharmacist Intervention on the Appropriateness of Prescribing in Older Hospitalized Patients. Drugs and Aging, 2014, 31, 471-481.	2.7	73
86	A Meta-Synthesis of Potentially Inappropriate Prescribing in Older Patients. Drugs and Aging, 2014, 31, 631-638.	2.7	67
87	A preliminary report of the costâ€effectiveness of tooth replacement strategies for partially dentate elders. Gerodontology, 2013, 30, 207-213.	2.0	14
88	A comparison of the application of STOPP/START to patients' drug lists with and without clinical information. International Journal of Clinical Pharmacy, 2013, 35, 230-235.	2.1	41
89	A Prevalence Study of Potentially Inappropriate Prescribing in Irish Long-Term Care Residents. Drugs and Aging, 2013, 30, 39-49.	2.7	69
90	Adverse drug reactions in older patients during hospitalisation: are they predictable?. Age and Ageing, 2012, 41, 771-776.	1.6	75

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91	Optimizing Pharmacotherapy in Older Patients. Drugs and Aging, 2012, 29, 423-425.	2.7	7
92	Inappropriate Prescribing. Drugs and Aging, 2012, 29, 437-452.	2.7	245
93	Gut microbiota composition correlates with diet and health in the elderly. Nature, 2012, 488, 178-184.	27.8	2,618
94	Impact of tooth replacement strategies on the nutritional status of partially-dentate elders. Gerodontology, 2012, 29, e883-e890.	2.0	30
95	Prevalence of potentially inappropriate prescribing in an acutely ill population of older patients admitted to six European hospitals. European Journal of Clinical Pharmacology, 2011, 67, 1175-1188.	1.9	284
96	Potentially Inappropriate Medications Defined by STOPP Criteria and the Risk of Adverse Drug Events in Older Hospitalized Patients. Archives of Internal Medicine, 2011, 171, 1013-9.	3.8	453
97	Pharmacotherapy at the end-of-life. Age and Ageing, 2011, 40, 419-422.	1.6	83
98	Management of Chronic Constipation in the Elderly. Drugs and Aging, 2008, 25, 807-821.	2.7	41
99	Inappropriate prescribing in the older population: need for new criteria. Age and Ageing, 2008, 37, 138-141.	1.6	232
100	Aging and Intestinal Motility. Drugs and Aging, 2002, 19, 515-527.	2.7	114