Edmond S Chan

List of Publications by Year in descending order

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166 papers 4,081 citations

30 h-index 57 g-index

170 all docs

170 docs citations

170 times ranked

2872 citing authors

#	Article	IF	Citations
1	Foodâ€ellergyâ€specific anxiety and distress in parents of children with food allergy: A systematic review. Pediatric Allergy and Immunology, 2022, 33, .	2.6	27
2	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
3	Elevated Cow's Milk–Specific IgE Levels Prior to Oral Immunotherapy Decrease the Likelihood of Reaching the Maintenance Dose. Journal of Allergy and Clinical Immunology: in Practice, 2022, 10, 215-221.e2.	3.8	10
4	Canadian parent perceptions of oral food challenges: A qualitative analysis. Pediatric Allergy and Immunology, 2022, 33, .	2.6	0
5	Application of the Eosinophilic Esophagitis Histology Scoring System Grade Scores in Patients at British Columbia Children's Hospital. Fetal and Pediatric Pathology, 2022, 41, 962-976.	0.7	7
6	Reducing parental anxiety during oral food challenges: a randomized controlled trial of deep breathing exercises. Annals of Allergy, Asthma and Immunology, 2022, , .	1.0	О
7	Seafood-induced anaphylaxis in children presenting to Canadian emergency departments. Annals of Allergy, Asthma and Immunology, 2022, 128, 583-588.	1.0	3
8	Development of IMPAACT (Impairment Measure for Parental Food Allergy-Associated Anxiety and) Tj ETQq0 0 0 Allergy, Asthma and Immunology, 2022, 129, 451-460.e3.	rgBT /Ove 1.0	rlock 10 Tf 50 8
9	Real-world peanut OIT in infants may be safer than non-infant preschool OIT and equally effective. Journal of Allergy and Clinical Immunology: in Practice, 2022, 10, 1113-1116.e1.	3.8	16
10	Decreased food allergy-specific anxiety and increased general anxiety in parents of children with food allergies during the coronavirus disease 2019 pandemic. Annals of Allergy, Asthma and Immunology, 2022, 129, 242-246.	1.0	7
11	Dietary exposures and allergy prevention in high-risk infants. Allergy, Asthma and Clinical Immunology, 2022, 18, 36.	2.0	9
12	Economic burden of food allergy in Canada. Annals of Allergy, Asthma and Immunology, 2022, 129, 220-230.e6.	1.0	5
13	The Case for Prompt Salvage Infant Peanut Oral Immunotherapy Following Failed Primary Prevention. Journal of Allergy and Clinical Immunology: in Practice, 2022, 10, 2561-2569.	3.8	13
14	Prevalence of Physician-Reported Food Allergy in Canadian Children. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 193-199.	3.8	22
15	A Consensus Approach to the Primary Prevention of Food Allergy Through Nutrition: Guidance from the American Academy of Allergy, Asthma, and Immunology; American College of Allergy, Asthma, and Immunology; and the Canadian Society for Allergy and Clinical Immunology. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 22-43,e4.	3.8	168
16	First Real-World Effectiveness Analysis of Preschool Peanut Oral Immunotherapy. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 1349-1356.e1.	3.8	41
17	Reply to "Cardiovascular symptoms/signs in infants and toddlers with anaphylaxis― Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 1046.	3.8	O
18	Management and diagnosis of exerciseâ€associated anaphylaxis cases in the paediatric population. Clinical and Experimental Allergy, 2021, 51, 148-150.	2.9	O

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19	Exome sequencing enables diagnosis of X-linked hypohidrotic ectodermal dysplasia in patient with eosinophilic esophagitis and severe atopy. Allergy, Asthma and Clinical Immunology, 2021, 17, 9.	2.0	2
20	Food-Induced Anaphylaxis in Infants: Can New Evidence Assist with Implementation of Food Allergy Prevention and Treatment?. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 57-69.	3.8	24
21	Fruit-Induced Anaphylaxis: Clinical Presentation and Management. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 2825-2830.e2.	3.8	19
22	COVID-19 vaccine testing & administration guidance for allergists/immunologists from the Canadian Society of Allergy and Clinical Immunology (CSACI). Allergy, Asthma and Clinical Immunology, 2021, 17, 29.	2.0	30
23	The Cost-Effectiveness of Preschool Peanut Oral Immunotherapy in the Real-World Setting. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 2876-2884.e4.	3.8	16
24	How to Incorporate Oral Immunotherapy into Your Clinical Practice. Current Allergy and Asthma Reports, 2021, 21, 30.	5.3	11
25	An Approach to the Office-Based Practice of Food Oral Immunotherapy. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 1826-1838.e8.	3.8	44
26	A High Proportion of Canadian Allergists Offer Oral Immunotherapy but Barriers Remain. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 1902-1908.	3.8	10
27	Caregiver views on virtual management of food allergy: A mixedâ€methods study. Pediatric Allergy and Immunology, 2021, 32, 1568-1572.	2.6	3
28	Community Use of Epinephrine for the Treatment of Anaphylaxis: A Review and Meta-Analysis. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 2321-2333.	3.8	37
29	The Risk of Allergic Reaction to SARS-CoV-2 Vaccines and Recommended Evaluation and Management: A Systematic Review, Meta-Analysis, GRADE Assessment, and International Consensus Approach. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 3546-3567.	3.8	152
30	Short dosing intervals during oral challenge increase the risk of severe adverse reactions in children with milk allergy. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 3829-3832.e1.	3.8	1
31	Allergic reactions to emerging food allergens in Canadian children. Allergy, Asthma and Clinical Immunology, 2021, 17, 71.	2.0	6
32	Canadian food ladders for dietary advancement in children with IgE-mediated allergy to milk and/or egg. Allergy, Asthma and Clinical Immunology, 2021, 17, 83.	2.0	18
33	Grass pollen allergy as an anaphylaxis cofactor during peanut oral immunotherapy. Annals of Allergy, Asthma and Immunology, 2021, 127, 263-264.	1.0	3
34	Web-based Infant Food Introduction (WIFI): Feasibility and satisfaction of virtual allergist-supervised food introduction. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 3521-3523.e1.	3.8	4
35	Oral peanut immunotherapy acutely unmasking eosinophilic esophagitis with an esophageal stricture. Annals of Allergy, Asthma and Immunology, 2021, 127, 691-692.	1.0	1
36	A Novel Germline Heterozygous BCL11B Variant Causing Severe Atopic Disease and Immune Dysregulation. Frontiers in Immunology, 2021, 12, 788278.	4.8	9

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37	Home-Based Peanut Oral Immunotherapy for Low-Risk Peanut-Allergic Preschoolers During the COVID-19 Pandemic and Beyond. Frontiers in Allergy, 2021, 2, 725165.	2.8	10
38	Evolving Interpretation of Screening and Diagnostic Tests in Allergy. Journal of Allergy and Clinical Immunology: in Practice, 2021, 9, 4183-4191.	3.8	10
39	Should we continue to counsel families to use hydrolyzed formulas as a means of allergy prevention in high-risk infants?. Paediatrics and Child Health, 2020, 25, 79-81.	0.6	2
40	Comparing quality of life in Canadian children with peanut, sesame, and seafood allergy. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 352-354.e1.	3.8	15
41	Conflicting verdicts on peanut oral immunotherapy from the Institute for Clinical and Economic Review and US Food and Drug Administration Advisory Committee: Where do we go from here?. Journal of Allergy and Clinical Immunology, 2020, 145, 1153-1156.	2.9	17
42	Oral Food Challenge Implementation: The First Mixed-Methods Study Exploring Barriers and Solutions. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 149-156.e1.	3.8	31
43	Poor Correlation of Oral Swabs with Esophageal Eosinophil Counts. Dysphagia, 2020, 35, 773-779.	1.8	1
44	Multiple shifting phenotypes with cow's milk: From eosinophilic esophagitis to immediate hypersensitivity and back again. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 1117-1118.	3.8	3
45	Novel Approaches to Food Allergy Management During COVID-19 Inspire Long-Term Change. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 2851-2857.	3.8	46
46	Managing Food Allergy in Schools During the COVID-19 Pandemic. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 2845-2850.	3.8	23
47	Aiming for a shorter time to diagnosis: pediatric eosinophilic esophagitis in British Columbia. Allergy, Asthma and Clinical Immunology, 2020, 16, 88.	2.0	1
48	One-year sustained impact of supervised epinephrine autoinjector administration during food challenge on parent confidence. Annals of Allergy, Asthma and Immunology, 2020, 125, 705-707.	1.0	3
49	Increasing Awareness of the Low Risk of Severe Reaction at Infant Peanut Introduction: Implications During COVID-19 and Beyond. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 3259-3260.	3.8	16
50	First pediatric electronic algorithm to stratify risk of penicillin allergy. Allergy, Asthma and Clinical Immunology, 2020, 16, 103.	2.0	14
51	AGA institute and the joint task force on allergy-immunology practice parameters clinical guidelines for the management of eosinophilic esophagitis. Annals of Allergy, Asthma and Immunology, 2020, 124, 416-423.	1.0	41
52	L'allergie aux bêta-lactamines dans la population pédiatrique. Paediatrics and Child Health, 2020, 25, 63-63.	0.6	0
53	Anaphylaxis as a presenting symptom of food allergy in children with no known food allergy. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 2811-2813.e2.	3.8	4
54	Parents of children with food allergy. Annals of Allergy, Asthma and Immunology, 2020, 125, 674-679.	1.0	14

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55	Virtually supported home peanut introduction during COVID-19 for at-risk infants. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 2780-2783.	3.8	10
56	First Real-World Effectiveness Analysis of Preschool Peanut Oral Immunotherapy. Journal of Allergy and Clinical Immunology, 2020, 145, AB72.	2.9	1
57	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
58	Reply to "Subcutaneous terbutaline as an alternative to aerosolized albuterol― Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 2450-2452.	3.8	1
59	Unmet needs of children with peanut allergy. Annals of Allergy, Asthma and Immunology, 2020, 124, 479-486.	1.0	21
60	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
61	AGA Institute and the Joint Task Force on Allergy-Immunology Practice Parameters Clinical Guidelines for the Management of Eosinophilic Esophagitis. Gastroenterology, 2020, 158, 1776-1786.	1.3	188
62	Phenotype consensus is required to enable largeâ€scale genetic consortium studies of food allergy. Allergy: European Journal of Allergy and Clinical Immunology, 2020, 75, 2383-2387.	5.7	5
63	COVID-19: Pandemic Contingency Planning for the Allergy and Immunology Clinic. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 1477-1488.e5.	3.8	258
64	Spotlight: Treatment of Eosinophilic Esophagitis (EoE). Gastroenterology, 2020, 158, 1788.	1.3	8
65	Current tools measuring anxiety in parents of foodâ€allergic children are inadequate. Pediatric Allergy and Immunology, 2020, 31, 678-685.	2.6	12
66	Billing fees for various common allergy tests vary widely across Canada. Allergy, Asthma and Clinical Immunology, 2020, 16, 28.	2.0	7
67	Peanut Allergy: New Advances and Ongoing Controversies. Pediatrics, 2020, 145, .	2.1	29
68	A Phased Approach to Resuming Suspended Allergy/Immunology Clinical Services. Journal of Allergy and Clinical Immunology: in Practice, 2020, 8, 2125-2134.	3.8	30
69	First Real-World Safety Analysis of Preschool Peanut Oral Immunotherapy. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 2759-2767.e5.	3.8	85
70	Abrupt Changes In Symptoms And Treatment During The Transition From Pediatric To Adult Care For Eosinophilic Esophagitis. Journal of Allergy and Clinical Immunology, 2019, 143, AB141.	2.9	0
71	Outcomes of oral food challenges and observed first ingestions among infants under 12 months of age. Journal of Allergy and Clinical Immunology, 2019, 143, AB161.	2.9	0
72	Evaluation of Prehospital Management in a Canadian Emergency Department Anaphylaxis Cohort. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 2232-2238.e3.	3.8	76

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73	Impact of Allergist-Facilitated Education on Public Healthcare Provider Confidence in Counseling about Early Peanut Introduction. Journal of Allergy and Clinical Immunology, 2019, 143, AB71.	2.9	1
74	Comparison of practice patterns among Canadian allergists before and after NIAID guideline recommendations. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 2901-2903.e3.	3.8	17
75	ICER report for peanut OIT comes up short. Annals of Allergy, Asthma and Immunology, 2019, 123, 430-432.	1.0	15
76	Genetic and environmental susceptibility to food allergy in a registry of twins. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 2916-2918.	3.8	8
77	Emergency Management of Anaphylaxis Due to an Unknown Trigger: An 8-Year Follow-Up Study in Canada. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 1166-1173.e1.	3.8	11
78	Managing Cross-Reactivity in Those with Peanut Allergy. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 381-386.	3.8	30
79	Extended analysis of parent and child confidence in recognizing anaphylaxis and using the epinephrine autoinjector during oral food challenges. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 693-695.	3.8	7
80	Distinguishing Parental Anxiety And Quality Of Life In Parents Of Food-allergic Children: Evidence From Factor Analyses. Journal of Allergy and Clinical Immunology, 2019, 143, AB56.	2.9	0
81	Factors Associated with Increased Food Allergy-associated Anxiety in Parents of Food-allergic Children. Journal of Allergy and Clinical Immunology, 2019, 143, AB85.	2.9	0
82	Should oral immunotherapy be contraindicated in patients with eosinophilic esophagitis if IgE-mediated food allergy develops after dietary elimination to treat EoE?. Journal of Allergy and Clinical Immunology, 2019, 143, AB143.	2.9	0
83	First ever real-world safety analysis of preschool peanut oral immunotherapy. Journal of Allergy and Clinical Immunology, 2019, 143, AB261.	2.9	3
84	Emergency Management of Adult and Pediatric Idiopathic Anaphylaxis: A 7-year follow-up study in Canada. Journal of Allergy and Clinical Immunology, 2019, 143, AB147.	2.9	0
85	Liberalized Versus Strict Cow's Milk Elimination for the Treatment of Children with Eosinophilic Esophagitis. Journal of the Canadian Association of Gastroenterology, 2019, 2, 81-85.	0.3	18
86	Anaphylaxis: comparison of clinical characteristics and management between children less than 2 years of age and older children. Journal of Allergy and Clinical Immunology, 2019, 143, AB145.	2.9	1
87	Infant Peanut Introduction Simplified. Pediatrics in Review, 2019, 40, 211-218.	0.4	0
88	Timing of introduction of allergenic solids for infants at high risk. Paediatrics and Child Health, 2019, 24, 56-56.	0.6	47
89	Adverse Events in Oral Immunotherapy for the Desensitization of Cow's Milk Allergy in Children: A Randomized Controlled Trial. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 1912-1919.	3.8	41
90	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

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91	An update on the controversy around offering oral immunotherapy to peanut-allergic children outside of research. Annals of Allergy, Asthma and Immunology, 2019, 122, 559-562.	1.0	14
92	Pre-emptive screening for peanut allergy before peanut ingestion in infants is not standard of care. Cmaj, 2019, 191, E1169-E1170.	2.0	5
93	It's Not Mom's Fault. Immunology and Allergy Clinics of North America, 2019, 39, 447-457.	1.9	6
94	Prevention of Non-peanut Food Allergies. Current Allergy and Asthma Reports, 2019, 19, 60.	5.3	5
95	Knowledge gaps and barriers to early peanut introduction among allergists, pediatricians, and family physicians. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 681-684.	3.8	23
96	Teenagers and those with severe reactions are more likely to use their epinephrine autoinjector in cases of anaphylaxis in Canada. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 1073-1075.e3.	3.8	8
97	Low resolution rates of seafood allergy. Journal of Allergy and Clinical Immunology: in Practice, 2019, 7, 690-692.	3.8	20
98	Pediatric Eosinophilic Esophagitis Is Associated With Increased Lamina Propria Immunoglobulin G4â€Positive Plasma Cells. Journal of Pediatric Gastroenterology and Nutrition, 2018, 67, 204-209.	1.8	19
99	Cross-Canada Anaphylaxis Registry (C-CARE): comparing rates, triggers, and management of anaphylaxis in a single centre emergency department (ED) over 4 years. Journal of Allergy and Clinical Immunology, 2018, 141, AB155.	2.9	2
100	Should Younger Siblings of Peanut Allergic Children Be Screened for Peanut Allergy?. Journal of Allergy and Clinical Immunology: in Practice, 2018, 6, 414-418.	3.8	10
101	Potential Pitfalls in Applying Screening Criteria in Infants at Risk of Peanut Allergy. Journal of Pediatrics, 2018, 195, 269-274.	1.8	8
102	Caregiver and Expecting Caregiver Support for Early Peanut Introduction Recommendations. Journal of Allergy and Clinical Immunology, 2018, 141, AB249.	2.9	0
103	Barriers preventing Canadian parents of children with food allergy from participating in Oral Food Challenges and possible solutions. Journal of Allergy and Clinical Immunology, 2018, 141, AB261.	2.9	0
104	Caregiver and expecting caregiver support for early peanut introduction guidelines. Annals of Allergy, Asthma and Immunology, 2018, 120, 620-625.	1.0	47
105	Disparities in rate, triggers, and management in pediatric and adult cases of suspected drugâ€induced anaphylaxis in Canada. Immunity, Inflammation and Disease, 2018, 6, 3-12.	2.7	25
106	Reduced risk of peanut sensitization following exposure through breast-feeding and early peanut introduction. Journal of Allergy and Clinical Immunology, 2018, 141, 620-625.e1.	2.9	45
107	BARRIERS TO IMPLEMENTATION OF EARLY PEANUT INTRODUCTION AMONG PEDIATRICIANS, FAMILY PHYSICIANS, AND ALLERGISTS. Paediatrics and Child Health, 2018, 23, e3-e3.	0.6	1
108	Barriers to Implementation of the NIAID Guideline Among Primary Care Physicians and Allergists. Journal of Allergy and Clinical Immunology, 2018, 141, AB250.	2.9	0

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109	First-reported pediatric cases of American ginseng anaphylaxis and allergy. Allergy, Asthma and Clinical Immunology, 2018, 14, 79.	2.0	7
110	First reported case in Canada of anaphylaxis to lupine in a child with peanut allergy. Allergy, Asthma and Clinical Immunology, 2018, 14, 64.	2.0	7
111	Early introduction of foods to prevent food allergy. Allergy, Asthma and Clinical Immunology, 2018, 14, 57.	2.0	31
112	Eosinophilic esophagitis. Allergy, Asthma and Clinical Immunology, 2018, 14, 58.	2.0	25
113	Supervised epinephrine autoinjector administration in a cohort of children with anaphylaxis during oral food challenges (OFCs). Journal of Allergy and Clinical Immunology, 2018, 141, AB252.	2.9	1
114	Emergency Management of Pediatric Anaphylaxis due to an Unknown Cause: A 5-year follow-up study in Canada. Journal of Allergy and Clinical Immunology, 2018, 141, AB157.	2.9	0
115	Antibiotics and Acid-Suppressing Medications in Early Life and Allergic Disorders. JAMA Pediatrics, 2018, 172, 987.	6.2	0
116	Low Resolution Rates of Seafood Allergy. Journal of Allergy and Clinical Immunology, 2018, 141, AB155.	2.9	1
117	Delayed Unblinding of Double-Blind Placebo-Controlled Food Challenges in Anxious Patients Allows Exclusion of Both Immediate and Delayed Adverse Reactions to Food. Journal of Allergy and Clinical Immunology: in Practice, 2018, 6, 1432-1433.	3.8	0
118	Wheeze trajectories are modifiable through earlyâ€lifeÂintervention and predict asthma in adolescence. Pediatric Allergy and Immunology, 2018, 29, 612-621.	2.6	31
119	Anaphylaxis across two Canadian pediatric centers: evaluating management disparities. Journal of Asthma and Allergy, 2017, Volume10, 1-7.	3.4	25
120	Initial and accidental reactions are managed inadequately in children with sesame allergy. Journal of Allergy and Clinical Immunology: in Practice, 2017, 5, 482-485.	3.8	19
121	Addendum guidelines for the prevention of peanut allergy in the United States: Report of the National Institute of Allergy and Infectious Diseases–sponsored expert panel. Journal of Allergy and Clinical Immunology, 2017, 139, 29-44.	2.9	374
122	Addendum Guidelines for the Prevention of Peanut Allergy in the United States: Report of the National Institute of Allergy and Infectious Diseases–Sponsored Expert Panel. Journal of Pediatric Nursing, 2017, 32, 91-98.	1.5	14
123	Addendum Guidelines for the Prevention of Peanut Allergy in the United States: Report of the National Institute of Allergy and Infectious Diseases–Sponsored Expert Panel. Pediatric Dermatology, 2017, 34, e1-e21.	0.9	20
124	Addendum guidelines for the prevention of peanut allergy in the United States. Pediatric Dermatology, 2017, 34, 5-12.	0.9	17
125	Early Solid Food Introduction: Role in Food Allergy Prevention and Implications for Breastfeeding. Journal of Pediatrics, 2017, 184, 13-18.	1.8	23
126	Addendum Guidelines for the Prevention of Peanut Allergy in the United States: Summary of the National Institute of Allergy and Infectious Diseases–Sponsored Expert Panel. Journal of the Academy of Nutrition and Dietetics, 2017, 117, 788-793.	0.8	20

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127	Development of anaphylactic cow's milk allergy following cow's milk elimination for eosinophilic esophagitis in a teenager. Journal of Allergy and Clinical Immunology: in Practice, 2017, 5, 1413-1414.	3.8	15
128	Addendum guidelines for the prevention of peanut allergy in the United States: Report of the National Institute of Allergy and Infectious Diseases–sponsored expert panel. Annals of Allergy, Asthma and Immunology, 2017, 118, 166-173.e7.	1.0	59
129	Addendum guidelines for the prevention of peanut allergy in the United States. JAAPA: Official Journal of the American Academy of Physician Assistants, 2017, 30, 1-5.	0.3	3
130	Addendum guidelines for the prevention of peanut allergy in the United States: report of the National Institute of Allergy and Infectious Diseases-sponsored expert panel. Allergy, Asthma and Clinical Immunology, 2017, 13, .	2.0	11
131	Canadian Society of Allergy and Clinical Immunology annual scientific meeting 2016. Allergy, Asthma and Clinical Immunology, 2017, 13, .	2.0	5
132	Addendum guidelines for the prevention of peanut allergy in the United States: Report of the National Institute of Allergy and Infectious Diseases–sponsored expert panel. World Allergy Organization Journal, 2017, 10, 1.	3.5	48
133	Adrenal insufficiency exists for both swallowed budesonide and fluticasone propionate in the treatment of eosinophilic esophagitis. Journal of Pediatrics, 2016, 174, 281.	1.8	5
134	Impact of supervised epinephrine autoinjector administration during food challenges on parent confidence. Annals of Allergy, Asthma and Immunology, 2016, 116, 467-469.	1.0	6
135	A humanized microbiota mouse model of ovalbumin-induced lung inflammation. Gut Microbes, 2016, 7, 342-352.	9.8	35
136	Consensus Communication on Early Peanut Introduction and Prevention of Peanut Allergy in Highâ€Risk Infants. Pediatric Dermatology, 2016, 33, 103-106.	0.9	36
137	Wheezing Patterns in Early Childhood and the Risk of Respiratory and Allergic Disease in Adolescence. JAMA Pediatrics, 2016, 170, 393.	6.2	12
138	The Complexities of Early Peanut Introduction for the Practicing Allergist. Journal of Allergy and Clinical Immunology: in Practice, 2016, 4, 221-225.	3.8	19
139	Consensus communication on early peanut introduction and the prevention of peanut allergy in high-risk infants. Allergy, Asthma and Clinical Immunology, 2015, 11, 23.	2.0	12
140	Consensus communication on early peanut introduction and the prevention of peanut allergy in high-risk infants. World Allergy Organization Journal, 2015, 8, 27.	3.5	26
141	Consensus communication on early peanut introduction and the prevention of peanut allergy in high-risk infants. Journal of Allergy and Clinical Immunology, 2015, 136, 258-261.	2.9	162
142	Consensus communication on early peanut introduction and the prevention of peanut allergy in high-risk infants. Annals of Allergy, Asthma and Immunology, 2015, 115, 87-90.	1.0	26
143	CSACI position statement: systemic effect of inhaled corticosteroids on adrenal suppression in the management of pediatric asthma. Allergy, Asthma and Clinical Immunology, 2015, 11, 9.	2.0	23
144	Accidental exposures to peanut in a large cohort of Canadian children with peanut allergy. Clinical and Translational Allergy, 2015, 5, 16.	3.2	91

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145	Utility of Ara h 2 slgE levels to predict peanut allergy in Canadian children. Journal of Allergy and Clinical Immunology: in Practice, 2015, 3, 968-969.	3.8	13
146	Characterization of ethnicity among children with eosinophilic esophagitis in British Columbia, Canada. Journal of Allergy and Clinical Immunology: in Practice, 2015, 3, 803-804.	3.8	6
147	Diagnosis and management of eosinophilic esophagitis in children. Canadian Family Physician, 2015, 61, 687-90.	0.4	1
148	IgE-Mediated allergy to wheat in a child with celiac disease – a case report. Allergy, Asthma and Clinical Immunology, 2014, 10, 56.	2.0	7
149	Dietary exposures and allergy prevention in high-risk infants: a joint position statement of the Canadian Society of Allergy and Clinical Immunology and the Canadian Paediatric Society. Allergy, Asthma and Clinical Immunology, 2014, 10, 45.	2.0	22
150	Anaphylaxis in the acute care setting. Cmaj, 2014, 186, 694-694.	2.0	2
151	IgE Mediated allergy to wheat in a child with celiac disease. Allergy, Asthma and Clinical Immunology, 2014, 10, .	2.0	0
152	Clinical Characteristics Of Seafood Allergy In Canadian Children. Journal of Allergy and Clinical Immunology, 2014, 133, AB203.	2.9	0
153	Epinephrine auto injector administration by parents or patients for anaphylaxis during supervised oral food challenges and assessment of confidence. Allergy, Asthma and Clinical Immunology, 2014, 10, .	2.0	0
154	Early exposure to food and food allergy in children. Canadian Family Physician, 2014, 60, 338-9.	0.4	11
155	Delayed Introduction of Food and Effect On Incidence of Food Allergy in a Population At High Risk for Atopy: The Canadian Asthma Primary Prevention Study (CAPPS). Journal of Allergy and Clinical Immunology, 2013, 131, AB96.	2.9	0
156	Early nutrition in the prevention of allergic disease: A survey of general paediatricians and dietitians in Atlantic Canada. Paediatrics and Child Health, 2013, 18, e20-e25.	0.6	0
157	Dietary exposures and allergy prevention in high-risk infants. Paediatrics and Child Health, 2013, 18, 545-549.	0.6	53
158	CSACI Position statement on the testing of food-specific IgG. Allergy, Asthma and Clinical Immunology, 2012, 8, 12.	2.0	43
159	What are the beliefs of pediatricians and dietitians regarding complementary food introduction to prevent allergy?. Allergy, Asthma and Clinical Immunology, 2012, 8, 3.	2.0	9
160	Allergic symptoms after pandemic influenza vaccination rarely mediated by vaccine-specific IgE. Journal of Allergy and Clinical Immunology, 2012, 130, 1423-1426.	2.9	17
161	Egg-allergic patients can be safely vaccinated against influenza. Journal of Allergy and Clinical Immunology, 2012, 130, 1213-1216.e1.	2.9	75
162	Outcome of diagnostic intervention predicts health-related quality of life scores among children with food allergy. Allergy, Asthma and Clinical Immunology, 2012, 8, .	2.0	0

#	Article	IF	CITATIONS
163	What are the beliefs of pediatricians and dietitians regarding complementary food introduction to prevent allergy?. Allergy, Asthma and Clinical Immunology, 2011, 7, .	2.0	O
164	Serum sickness-like reaction associated with meropenem in a 3-year old child. Allergy, Asthma and Clinical Immunology, $2010, 6, .$	2.0	1
165	Safety of H1N1 and seasonal influenza vaccines in egg allergic patients in British Columbia. Allergy, Asthma and Clinical Immunology, 2010, 6, .	2.0	3
166	Epinephrine for the out-of-hospital (first-aid) treatment of anaphylaxis in infants: Is the ampule/syringe/needle method practical?. Journal of Allergy and Clinical Immunology, 2001, 108, 1040-1044.	2.9	123