Xavier Monnet

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/870871/publications.pdf

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210 papers 17,075 citations

65 h-index 125 g-index

216 all docs

216 docs citations

216 times ranked 11975 citing authors

#	Article	IF	CITATIONS
1	Respiratory symptoms and radiological findings in post-acute COVID-19 syndrome. ERJ Open Research, 2022, 8, 00479-2021.	1.1	16
2	Post-acute COVID-19 syndrome. European Respiratory Review, 2022, 31, 210185.	3.0	105
3	Early prone positioning in acute respiratory distress syndrome related to COVID-19: a propensity score analysis from the multicentric cohort COVID-ICU network—the ProneCOVID study. Critical Care, 2022, 26, 71.	2.5	14
4	Should We Wean Patients Off Vasopressors Before Weaning Them Off Ventilation?. American Journal of Respiratory and Critical Care Medicine, 2022, , .	2.5	0
5	Early echocardiography by treating physicians and outcome in the critically ill: An ancillary study from the prospective multicenter trial FROG-ICU. Journal of Critical Care, 2022, 69, 154013.	1.0	4
6	Current practice and evolving concepts in septic shock resuscitation. Intensive Care Medicine, 2022, 48, 148-163.	3.9	55
7	Venous return and mean systemic filling pressure: physiology and clinical applications. Critical Care, 2022, 26, .	2.5	28
8	Prediction of fluid responsiveness. What's new?. Annals of Intensive Care, 2022, 12, .	2.2	76
9	Fluid challenge in critically ill patients receiving haemodynamic monitoring: a systematic review and comparison of two decades. Critical Care, 2022, 26, .	2.5	30
10	Tidal volume challenge to predict preload responsiveness in patients with acute respiratory distress syndrome under prone position. Critical Care, 2022, 26, .	2.5	10
11	Extravascular lung water levels are associated with mortality: a systematic review and meta-analysis. Critical Care, 2022, 26, .	2.5	12
12	Metrology part 1: definition of quality criteria. Journal of Clinical Monitoring and Computing, 2021, 35, 17-25.	0.7	22
13	Metrology part 2: Procedures for the validation of major measurement quality criteria and measuring instrument properties. Journal of Clinical Monitoring and Computing, 2021, 35, 27-37.	0.7	11
14	Effect of Tocilizumab vs Usual Care in Adults Hospitalized With COVID-19 and Moderate or Severe Pneumonia. JAMA Internal Medicine, 2021, 181, 32.	2.6	654
15	Clinical characteristics and day-90 outcomes of 4244 critically ill adults with COVID-19: a prospective cohort study. Intensive Care Medicine, 2021, 47, 60-73.	3.9	597
16	Measurements of Fluid Requirements with Cardiovascular Challenges., 2021,, 405-417.		0
17	Fluid Responsiveness and Dynamic Tests: Physiological Background. , 2021, , 141-148.		0
18	Current use of inotropes in circulatory shock. Annals of Intensive Care, 2021, 11, 21.	2,2	35

#	Article	IF	Citations
19	Dynamic Tests. , 2021, , 161-170.		О
20	Effects of Prone Positioning on Venous Return in Patients With Acute Respiratory Distress Syndrome*. Critical Care Medicine, 2021, 49, 781-789.	0.4	20
21	Effect of anakinra versus usual care in adults in hospital with COVID-19 and mild-to-moderate pneumonia (CORIMUNO-ANA-1): a randomised controlled trial. Lancet Respiratory Medicine, the, 2021, 9, 295-304.	5.2	232
22	Do changes in pulse pressure variation and inferior vena cava distensibility during passive leg raising and tidal volume challenge detect preload responsiveness in case of low tidal volume ventilation?. Critical Care, 2021, 25, 110.	2.5	28
23	Four-Month Clinical Status of a Cohort of Patients After Hospitalization for COVID-19. JAMA - Journal of the American Medical Association, 2021, 325, 1525.	3.8	434
24	Multidisciplinary approach for post-acute COVID-19 syndrome: time to break down the walls. European Respiratory Journal, 2021, 58, 2101090.	3.1	18
25	COVID-19 ARDS is characterized by higher extravascular lung water than non-COVID-19 ARDS: the PiCCOVID study. Critical Care, 2021, 25, 186.	2.5	32
26	Bioreactance reliably detects preload responsiveness by the end-expiratory occlusion test when averaging and refresh times are shortened. Annals of Intensive Care, 2021, 11, 133.	2.2	3
27	Extracorporeal membrane oxygenation network organisation and clinical outcomes during the COVID-19 pandemic in Greater Paris, France: a multicentre cohort study. Lancet Respiratory Medicine,the, 2021, 9, 851-862.	5.2	163
28	Norepinephrine potentiates the efficacy of volume expansion on mean systemic pressure in septic shock. Critical Care, 2021, 25, 302.	2.5	23
29	The authors reply. Critical Care Medicine, 2021, 49, e1046-e1047.	0.4	O
30	Changes in pulse pressure variation to assess preload responsiveness in mechanically ventilated patients with spontaneous breathing activity: an observational study. British Journal of Anaesthesia, 2021, 127, 532-538.	1.5	16
31	CO2-Derived Indices to Guide Resuscitation in Critically III Patients. , 2021, , 419-427.		0
32	Bioimpedance and Bioreactance., 2021,, 101-105.		0
33	Changes in the Plethysmographic Perfusion Index During an End-Expiratory Occlusion Detect a Positive Passive Leg Raising Test*. Critical Care Medicine, 2021, 49, e151-e160.	0.4	15
34	The authors reply. Critical Care Medicine, 2021, 49, e1185-e1186.	0.4	0
35	New Method to Estimate Central Systolic Blood Pressure From Peripheral Pressure: A Proof of Concept and Validation Study. Frontiers in Cardiovascular Medicine, 2021, 8, 772613.	1.1	7
36	Interchangeability of cardiac output measurements between non-invasive photoplethysmography and bolus thermodilution: A systematic review and individual patient data meta-analysis. Anaesthesia, Critical Care & Dain Medicine, 2020, 39, 75-85.	0.6	14

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37	Extracorporeal cardiopulmonary resuscitation in out-of-hospital cardiac arrest: a registry study. European Heart Journal, 2020, 41, 1961-1971.	1.0	172
38	Bioactive Adrenomedullin, Organ Support Therapies, and Survival in the Critically Ill. Critical Care Medicine, 2020, 48, 49-55.	0.4	13
39	End-Expiratory Occlusion Test to Predict Fluid Responsiveness Is Not Suitable for Laparotomic Surgery. Anesthesia and Analgesia, 2020, 130, 151-158.	1.1	7
40	Prediction of fluid responsiveness in spontaneously breathing patients. Annals of Translational Medicine, 2020, 8, 790-790.	0.7	16
41	Vasopressors in septic shock: which, when, and how much?. Annals of Translational Medicine, 2020, 8, 794-794.	0.7	32
42	Passive leg raising test in patients with intra-abdominal hypertension: do not throw it. Annals of Translational Medicine, 2020, 8, 806-806.	0.7	1
43	Increase in Central Venous Pressure During Passive Leg Raising Cannot Detect Preload Unresponsiveness. Critical Care Medicine, 2020, 48, e684-e689.	0.4	9
44	Characteristics and outcomes of asthmatic patients with COVID-19 pneumonia who require hospitalisation. European Respiratory Journal, 2020, 56, 2001875.	3.1	90
45	Assessment of tissue oxygenation to personalize mean arterial pressure target in patients with septic shock. Microvascular Research, 2020, 132, 104068.	1.1	10
46	Volume Infusion Markedly Increases Femoral dP/dtmax in Fluid-Responsive Patients Only*. Critical Care Medicine, 2020, 48, 1487-1493.	0.4	5
47	Transpulmonary thermodilution detects rapid and reversible increases in lung water induced by positive end-expiratory pressure in acute respiratory distress syndrome. Annals of Intensive Care, 2020, 10, 28.	2.2	17
48	Incidence and Outcome of Subclinical Acute Kidney Injury Using penKid in Critically Ill Patients. American Journal of Respiratory and Critical Care Medicine, 2020, 202, 822-829.	2.5	31
49	Rapid onset honeycombing fibrosis in spontaneously breathing patient with COVID-19. European Respiratory Journal, 2020, 56, 2001808.	3.1	38
50	Parameters of fluid responsiveness. Current Opinion in Critical Care, 2020, 26, 319-326.	1.6	33
51	The end-expiratory occlusion test for detecting preload responsiveness: a systematic review and meta-analysis. Annals of Intensive Care, 2020, 10, 65.	2.2	34
52	Comparison of Proaqt/Pulsioflex® and oesophageal Doppler for intraoperative haemodynamic monitoring during intermediate-risk abdominal surgery. Anaesthesia, Critical Care & Discrete amp; Pain Medicine, 2019, 38, 153-159.	0.6	6
53	Arterial Pulse Pressure Variation with Mechanical Ventilation. American Journal of Respiratory and Critical Care Medicine, 2019, 199, 22-31.	2.5	102
54	The end-expiratory occlusion test: please, let me hold your breath!. Critical Care, 2019, 23, 274.	2.5	50

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55	How can CO2-derived indices guide resuscitation in critically ill patients?. Journal of Thoracic Disease, 2019, 11, S1528-S1537.	0.6	50
56	Influence of changes in ventricular systolic function and loading conditions on pulse contour analysis-derived femoral dP/dtmax. Annals of Intensive Care, 2019, 9, 61.	2.2	12
57	The effects of passive leg raising may be detected by the plethysmographic oxygen saturation signal in critically ill patients. Critical Care, 2019, 23, 19.	2.5	66
58	Current use of vasopressors in septic shock. Annals of Intensive Care, 2019, 9, 20.	2.2	109
59	Lung ultrasound allows the diagnosis of weaning-induced pulmonary oedema. Intensive Care Medicine, 2019, 45, 601-608.	3.9	59
60	What is the lowest change in cardiac output that transthoracic echocardiography can detect?. Critical Care, 2019, 23, 116.	2.5	74
61	How to detect a positive response to a fluid bolus when cardiac output is not measured?. Annals of Intensive Care, 2019, 9, 138.	2.2	24
62	Esophageal Doppler Can Predict Fluid Responsiveness Through End-Expiratory and End-Inspiratory Occlusion Tests. Critical Care Medicine, 2019, 47, e96-e102.	0.4	32
63	Intra-Abdominal Hypertension Is Responsible for False Negatives to the Passive Leg Raising Test. Critical Care Medicine, 2019, 47, e639-e647.	0.4	46
64	Validation and Critical Evaluation of the Effective Arterial Elastance in Critically Ill Patients. Critical Care Medicine, 2019, 47, e317-e324.	0.4	15
65	Transpulmonary thermodilution techniques in the haemodynamically unstable patient. Current Opinion in Critical Care, 2019, 25, 273-279.	1.6	14
66	One-Year Prognosis of Kidney Injury at Discharge From the ICU: A Multicenter Observational Study. Critical Care Medicine, 2019, 47, e953-e961.	0.4	21
67	Estimating the rapid haemodynamic effects of passive leg raising in critically ill patients using bioreactance. British Journal of Anaesthesia, 2018, 121, 567-573.	1.5	18
68	Assessment of fluid responsiveness: recent advances. Current Opinion in Critical Care, 2018, 24, 190-195.	1.6	58
69	Second consensus on the assessment of sublingual microcirculation in critically ill patients: results from a task force of the European Society of Intensive Care Medicine. Intensive Care Medicine, 2018, 44, 281-299.	3.9	305
70	Should We Perform an Immediate Coronary Angiogram in All Patients AfterÂCardiac Arrest?. JACC: Cardiovascular Interventions, 2018, 11, 249-256.	1.1	59
71	Norepinephrine exerts an inotropic effect during the early phase of human septic shock. British Journal of Anaesthesia, 2018, 120, 517-524.	1.5	66
72	Cardiac output monitoring: throw it out… or keep it?. Critical Care, 2018, 22, 35.	2.5	12

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73	My patient has received fluid. How to assess its efficacy and side effects?. Annals of Intensive Care, 2018, 8, 54.	2.2	51
74	Alternatives to the Swan–Ganz catheter. Intensive Care Medicine, 2018, 44, 730-741.	3.9	71
75	Pressure Waveform Analysis. Anesthesia and Analgesia, 2018, 126, 1930-1933.	1.1	55
76	Impact of oversedation prevention in ventilated critically ill patients: a randomized trialâ€"the AWARE study. Annals of Intensive Care, 2018, 8, 93.	2.2	18
77	Carotid and femoral Doppler do not allow the assessment of passive leg raising effects. Annals of Intensive Care, 2018, 8, 67.	2.2	23
78	Prediction of fluid responsiveness in ventilated patients. Annals of Translational Medicine, 2018, 6, 352-352.	0.7	48
79	Principles of fluid management and stewardship in septic shock: it is time to consider the four D's and the four phases of fluid therapy. Annals of Intensive Care, 2018, 8, 66.	2.2	353
80	Impact of angiotensin-converting enzyme inhibitors or receptor blockers on post-ICU discharge outcome in patients with acute kidney injury. Intensive Care Medicine, 2018, 44, 598-605.	3.9	62
81	Fluid resuscitation during early sepsis: a need for individualization. Minerva Anestesiologica, 2018, 84, 987-992.	0.6	29
82	Diagnosis and Treatment of Acute Respiratory Distress Syndrome. JAMA - Journal of the American Medical Association, 2018, 320, 305.	3.8	4
83	Determinants of long-term outcome in ICU survivors: results from the FROG-ICU study. Critical Care, 2018, 22, 8.	2.5	123
84	Could resuscitation be based on microcirculation data? We are not sure. Intensive Care Medicine, 2018, 44, 950-953.	3.9	13
85	Diagnostic accuracy of inferior vena caval respiratory variation in detecting fluid unresponsiveness. European Journal of Anaesthesiology, 2018, 35, 831-839.	0.7	21
86	Central Venous-to-Arterial Carbon Dioxide Partial Pressure Difference., 2018,, 121-130.		1
87	Less or more hemodynamic monitoring in critically ill patients. Current Opinion in Critical Care, 2018, 24, 309-315.	1.6	25
88	The dynamic arterial elastance: a call for a cautious interpretation. Intensive Care Medicine, 2017, 43, 1438-1439.	3.9	6
89	Transpulmonary thermodilution: advantages and limits. Critical Care, 2017, 21, 147.	2.5	177
90	Use of  tidal volume challenge' to improve the reliability of pulse pressure variation. Critical Care, 2017, 21, 60.	2.5	39

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91	The Changes in Pulse Pressure Variation or Stroke Volume Variation After a "Tidal Volume Challenge― Reliably Predict Fluid Responsiveness During Low Tidal Volume Ventilation*. Critical Care Medicine, 2017, 45, 415-421.	0.4	143
92	Predicting Fluid Responsiveness in Critically III Patients by Using Combined End-Expiratory and End-Inspiratory Occlusions With Echocardiography. Critical Care Medicine, 2017, 45, e1131-e1138.	0.4	66
93	Executive summary on the use of ultrasound in the critically ill: consensus report from the 3rd Course on Acute Care Ultrasound (CACU). Anaesthesiology Intensive Therapy, 2017, 49, 393-411.	0.4	19
94	Cardiovascular Function in Intensive Care Medicine orHomo Mensura Est. BioMed Research International, 2016, 2016, 1-3.	0.9	0
95	Implementing sepsis bundles. Annals of Translational Medicine, 2016, 4, 332-332.	0.7	14
96	Optimizing the circulation in the prone patient. Current Opinion in Critical Care, 2016, 22, 239-245.	1.6	9
97	The passive leg raising test to guide fluid removal in critically ill patients. Annals of Intensive Care, 2016, 6, 46.	2.2	65
98	Less invasive hemodynamic monitoring in critically ill patients. Intensive Care Medicine, 2016, 42, 1350-1359.	3.9	212
99	Prediction of fluid responsiveness: an update. Annals of Intensive Care, 2016, 6, 111.	2.2	391
100	Cardiac dysfunction induced by weaning from mechanical ventilation: incidence, risk factors, and effects of fluid removal. Critical Care, 2016, 20, 369.	2.5	65
101	Changes in cardiac arrest patients' temperature management after the 2013 "TTM―trial: results from an international survey. Annals of Intensive Care, 2016, 6, 4.	2.2	71
102	Passive leg raising for predicting fluid responsiveness: a systematic review and meta-analysis. Intensive Care Medicine, 2016, 42, 1935-1947.	3.9	311
103	Lactate-guided resuscitation saves lives: no. Intensive Care Medicine, 2016, 42, 470-471.	3.9	12
104	Effects of passive leg raising and volume expansion on mean systemic pressure and venous return in shock in humans. Critical Care, 2015, 19, 411.	2.5	50
105	Extravascular lung water in critical care: recent advances and clinical applications. Annals of Intensive Care, 2015, 5, 38.	2.2	138
106	Monitoring. Current Opinion in Critical Care, 2015, 21, 395-401.	1.6	24
107	Fluid Therapy: Double-Edged Sword during Critical Care?. BioMed Research International, 2015, 2015, 1-14.	0.9	36
108	Evolving concepts of hemodynamic monitoring for critically ill patients. Indian Journal of Critical Care Medicine, 2015, 19, 220-226.	0.3	15

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109	Passive leg raising performed before a spontaneous breathing trial predicts weaning-induced cardiac dysfunction. Intensive Care Medicine, 2015, 41, 487-494.	3.9	35
110	Predicting the determinants of volume responsiveness. Intensive Care Medicine, 2015, 41, 354-356.	3.9	10
111	Passive leg raising: five rules, not a drop of fluid!. Critical Care, 2015, 19, 18.	2.5	272
112	Comparison of pulse contour analysis by Pulsioflex and Vigileo to measure and track changes of cardiac output in critically ill patients. British Journal of Anaesthesia, 2015, 114, 235-243.	1.5	49
113	What's new with hypertensive crises?. Intensive Care Medicine, 2015, 41, 127-130.	3.9	4
114	Minimally Invasive Monitoring. Critical Care Clinics, 2015, 31, 25-42.	1.0	28
115	Measurement of Cardiac Index by Transpulmonary Thermodilution Using an Implanted Central Venous Access Port: A Prospective Study in Patients Scheduled for Oncologic High-Risk Surgery. PLoS ONE, 2014, 9, e104369.	1.1	2
116	Transpulmonary Thermodilution Enables to Detect Small Short-Term Changes in Extravascular Lung Water Induced by a Bronchoalveolar Lavage. Critical Care Medicine, 2014, 42, 1869-1873.	0.4	19
117	Prediction of Fluid Responsiveness in Patients With Shock. Clinical Pulmonary Medicine, 2014, 21, 282-287.	0.3	1
118	Weaning the cardiac patient from mechanical ventilation. Current Opinion in Critical Care, 2014, 20, 493-498.	1.6	50
119	Extravascular Lung Water, B-Type Natriuretic Peptide, and Blood Volume Contraction Enable Diagnosis of Weaning-Induced Pulmonary Edema*. Critical Care Medicine, 2014, 42, 1882-1889.	0.4	48
120	Prospective assessment of a score for assessing basic critical-care transthoracic echocardiography skills in ventilated critically ill patients. Annals of Intensive Care, 2014, 4, 12.	2.2	13
121	Reply: Prone Positioning Actually Exerts Benefits on Hemodynamics!. American Journal of Respiratory and Critical Care Medicine, 2014, 189, 1567-1568.	2.5	1
122	Transpulmonary Thermodilution. , 2014, , 73-78.		0
123	End-tidal carbon dioxide and arterial pressure for predicting volume responsiveness by the passive leg raising test: reply to Piagnerelli and Biston. Intensive Care Medicine, 2013, 39, 1165-1165.	3.9	4
124	Beneficial Hemodynamic Effects of Prone Positioning in Patients with Acute Respiratory Distress Syndrome. American Journal of Respiratory and Critical Care Medicine, 2013, 188, 1428-1433.	2.5	172
125	Assessment of volume responsiveness during mechanical ventilation: recent advances. Critical Care, 2013, 17, 217.	2.5	115
126	End-tidal carbon dioxide is better than arterial pressure for predicting volume responsiveness by the passive leg raising test. Intensive Care Medicine, 2013, 39, 93-100.	3.9	124

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127	Monitoring volume and fluid responsiveness: From static to dynamic indicators. Bailliere's Best Practice and Research in Clinical Anaesthesiology, 2013, 27, 177-185.	1.7	81
128	Pulsus paradoxus. European Respiratory Journal, 2013, 42, 1696-1705.	3.1	57
129	Hemolysis and schistocytosis in the emergency department: consider pseudothrombotic microangiopathy related to vitamin B12 deficiency. QJM - Monthly Journal of the Association of Physicians, 2013, 106, 1017-1022.	0.2	70
130	Lactate and Venoarterial Carbon Dioxide Difference/Arterial-Venous Oxygen Difference Ratio, but Not Central Venous Oxygen Saturation, Predict Increase in Oxygen Consumption in Fluid Responders*. Critical Care Medicine, 2013, 41, 1412-1420.	0.4	203
131	End-Expiratory Occlusion Test Predicts Preload Responsiveness Independently of Positive End-Expiratory Pressure During Acute Respiratory Distress Syndrome. Critical Care Medicine, 2013, 41, 1692-1701.	0.4	59
132	Pleth variability index is a weak predictor of fluid responsiveness in patients receiving norepinephrine. British Journal of Anaesthesia, 2013, 110, 207-213.	1.5	77
133	Bioreactance is not reliable for estimating cardiac output and the effects of passive leg raising in critically ill patients. British Journal of Anaesthesia, 2013, 111, 961-966.	1.5	95
134	The authors reply. Critical Care Medicine, 2013, 41, e490.	0.4	0
135	Extravascular lung water is an independent prognostic factor in patients with acute respiratory distress syndrome*. Critical Care Medicine, 2013, 41, 472-480.	0.4	219
136	Epiglottitis., 2012,, 881-885.		0
137	Third-generation FloTrac/Vigileo does not reliably track changes in cardiac output induced by norepinephrine in critically ill patients. British Journal of Anaesthesia, 2012, 108, 615-622.	1.5	101
138	Passive leg-raising and end-expiratory occlusion tests perform better than pulse pressure variation in patients with low respiratory system compliance*. Critical Care Medicine, 2012, 40, 152-157.	0.4	196
139	Pulse pressure variation. Critical Care Medicine, 2012, 40, 1691-1692.	0.4	6
140	Results of questionable management protocols are inherently questionable. Critical Care Medicine, 2012, 40, 2536.	0.4	9
141	Effects of norepinephrine on mean systemic pressure and venous return in human septic shock*. Critical Care Medicine, 2012, 40, 3146-3153.	0.4	173
142	Enhanced Recovery After Surgery Intervention. , 2012, , 867-871.		0
143	The estimation of cardiac output by the Nexfin device is of poor reliability for tracking the effects of a fluid challenge. Critical Care, 2012, 16, R212.	2.5	80
144	Prediction of fluid responsiveness by a continuous non-invasive assessment of arterial pressure in critically ill patients: comparison with four other dynamic indices. British Journal of Anaesthesia, 2012, 109, 330-338.	1.5	109

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145	Hemodynamic management of cardiovascular failure by using PCO2 venous-arterial difference. Journal of Clinical Monitoring and Computing, 2012, 26, 367-374.	0.7	37
146	Exotoxic Shock. , 2012, , 908-908.		0
147	Ventricular End Diastolic Pressure (EDP). , 2012, , 2446-2446.		0
148	Transpulmonary thermodilution measurements are not affected by continuous veno-venous hemofiltration at high blood pump flow. Intensive Care Medicine, 2012, 38, 1162-1168.	3.9	24
149	Passive leg raising. , 2012, , 55-59.		1
150	Precision of the transpulmonary thermodilution measurements. Critical Care, 2011, 15, R204.	2.5	151
151	SvO2 to monitor resuscitation of septic patients: let's just understand the basic physiology. Critical Care, 2011, 15, 1005.	2.5	24
152	Norepinephrine, venomotor tone, and preload dependency. Critical Care Medicine, 2011, 39, 2381-2382.	0.4	0
153	Norepinephrine increases cardiac preload and reduces preload dependency assessed by passive leg raising in septic shock patients*. Critical Care Medicine, 2011, 39, 689-694.	0.4	151
154	Just fastening the belt! Is it the future measure for assessing fluid responsiveness?*. Critical Care Medicine, 2011, 39, 2200-2201.	0.4	2
155	Arterial pressure allows monitoring the changes in cardiac output induced by volume expansion but not by norepinephrine*. Critical Care Medicine, 2011, 39, 1394-1399.	0.4	100
156	Pulmonary artery catheter monitoring in 2011. Current Opinion in Critical Care, 2011, 17, 296-302.	1.6	52
157	Can the "FloTrac―really track flow in septic patients?. Intensive Care Medicine, 2011, 37, 183-185.	3.9	7
158	Changes in pulse pressure following fluid loading: a comparison between aortic root (non-invasive) Tj ETQq0 0 0	rgBT/Ovei	rlosk 10 Tf 50
159	Hemodynamic parameters to guide fluid therapy. Annals of Intensive Care, 2011, 1, 1.	2.2	514
160	Management of Myocardial Dysfunction in Severe Sepsis. Seminars in Respiratory and Critical Care Medicine, 2011, 32, 206-214.	0.8	42
161	Cardiac function index by transpulmonary thermodilution and left ventricular systolic function. Critical Care Medicine, 2010, 38, 1226.	0.4	0
162	Hemodynamic impact of a positive end-expiratory pressure setting in acute respiratory distress syndrome: Importance of the volume status*. Critical Care Medicine, 2010, 38, 802-807.	0.4	157

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163	Passive leg raising: keep it easy!. Intensive Care Medicine, 2010, 36, 1445-1445.	3.9	12
164	Early Fluid Resuscitation. Current Infectious Disease Reports, 2010, 12, 354-360.	1.3	5
165	Weaning failure of cardiac origin: recent advances. Critical Care, 2010, 14, 211.	2.5	56
166	Arterial pressure-based cardiac output in septic patients: different accuracy of pulse contour and uncalibrated pressure waveform devices. Critical Care, 2010, 14, R109.	2.5	120
167	Early administration of norepinephrine increases cardiac preload and cardiac output in septic patients with life-threatening hypotension. Critical Care, 2010, 14, R142.	2.5	165
168	Les médicaments de l'insuffisance cardiaqueÂ: quoi de neufÂ?. Praticien En Anesthesie Reanimation, 2010, 14, 297-302.	0.0	0
169	Nosocomial spread of ESBL-positive Enterobacter cloacae co-expressing plasmid-mediated quinolone resistance Qnr determinants in one hospital in France. Journal of Antimicrobial Chemotherapy, 2009, 64, 653-654.	1.3	19
170	Life threatening steroidâ€resistant autoimmune anemia successfully treated with rituximab: A case report. American Journal of Hematology, 2009, 84, 193-193.	2.0	13
171	Passive leg raising for predicting fluid responsiveness: importance of the postural change. Intensive Care Medicine, 2009, 35, 85-90.	3.9	207
172	Incidence and prognostic value of right ventricular failure in acute respiratory distress syndrome. Intensive Care Medicine, 2009, 35, 69-76.	3.9	138
173	SUBENDOCARDIAL VIABILITY INDEX IS RELATED TO THE DIASTOLIC/SYSTOLIC TIME RATIO AND LEFT VENTRICULAR FILLING PRESSURE, NOT TO AORTIC PRESSURE: AN INVASIVE STUDY IN RESTING HUMANS. Clinical and Experimental Pharmacology and Physiology, 2009, 36, 413-418.	0.9	28
174	Correction: Critical care management and outcome of severe Pneumocystis pneumonia in patients with and without HIV infection. Critical Care, 2009, 13, 407.	2.5	0
175	Detecting volume responsiveness and unresponsiveness in intensive care unit patients: two different problems, only one solution. Critical Care, 2009, 13, 175.	2.5	36
176	Cardiac function index provided by transpulmonary thermodilution behaves as an indicator of left ventricular systolic function. Critical Care Medicine, 2009, 37, 2913-2918.	0.4	64
177	Predicting volume responsiveness by using the end-expiratory occlusion in mechanically ventilated intensive care unit patients. Critical Care Medicine, 2009, 37, 951-956.	0.4	261
178	Passive leg raising. Intensive Care Medicine, 2008, 34, 659-663.	3.9	282
179	Increase in plasma protein concentration for diagnosing weaning-induced pulmonary oedema. Intensive Care Medicine, 2008, 34, 1231-8.	3.9	38
180	Regional and temporal heterogeneity of postsystolic wall thickening is associated with left ventricular asynchrony in normal and experimental stunned myocardium. Basic Research in Cardiology, 2008, 103, 385-396.	2.5	9

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181	SUBENDOCARDIAL VIABILITY RATIO ESTIMATED BY ARTERIAL TONOMETRY: A CRITICAL EVALUATION IN ELDERLY HYPERTENSIVE PATIENTS WITH INCREASED AORTIC STIFFNESS. Clinical and Experimental Pharmacology and Physiology, 2008, 35, 909-915.	0.9	40
182	Critical care management and outcome of severe Pneumocystis pneumonia in patients with and without HIV infection. Critical Care, 2008, 12, R28.	2.5	147
183	Prediction of volume responsiveness in critically ill patients with spontaneous breathing activity. Current Opinion in Critical Care, 2008, 14, 334-339.	1.6	109
184	Effects of changes in vascular tone on the agreement between pulse contour and transpulmonary thermodilution cardiac output measurements within an up to 6-hour calibration-free period*. Critical Care Medicine, 2008, 36, 434-440.	0.4	157
185	Pulmonary Artery Catheter in the Intensive Care Unit. , 2008, , 411-423.		0
186	The inotropic adaptation during late preconditioning against myocardial stunning is associated with an increase in FKBP12.6. Cardiovascular Research, 2007, 73, 560-567.	1.8	6
187	Conversion of post-systolic wall thickening into ejectional thickening by selective heart rate reduction during myocardial stunning. European Heart Journal, 2007, 28, 872-879.	1.0	21
188	Volume responsiveness. Current Opinion in Critical Care, 2007, 13, 549-553.	1.6	94
189	Measuring aortic diameter improves accuracy of esophageal Doppler in assessing fluid responsiveness. Critical Care Medicine, 2007, 35, 477-482.	0.4	81
190	Cardiac filling pressures are not appropriate to predict hemodynamic response to volume challenge*. Critical Care Medicine, 2007, 35, 64-68.	0.4	661
191	Cardiopulmonary interactions in patients with heart failure. Current Opinion in Critical Care, 2007, 13, 6-11.	1.6	31
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