

# Charalabos-Markos Dintsios

## List of Publications by Year in descending order

Source: <https://exaly.com/author-pdf/8841548/publications.pdf>

Version: 2024-02-01

30  
papers

600  
citations

687363

13  
h-index

610901

24  
g-index

33  
all docs

33  
docs citations

33  
times ranked

537  
citing authors

#	ARTICLE	IF	CITATIONS
1	How Far is Germany From Value-Based Pricing 10 Years After the Introduction of AMNOG?. Applied Health Economics and Health Policy, 2022, 20, 287-290.	2.1	3
2	A decade of early benefit assessment of ophthalmic drugs in Germany: success story or not?. Expert Review of Pharmacoeconomics and Outcomes Research, 2021, , 1-15.	1.4	0
3	Failure due to formal reasons within German benefit assessment of medicinal products: the dilemma between marketing authorization and HTA. Expert Review of Pharmacoeconomics and Outcomes Research, 2021, 21, 145-157.	1.4	1
4	Health Care Use and Costs in Individuals With Diabetes With and Without Comorbid Depression in Germany: Results of the Cross-sectional DiaDec Study. Diabetes Care, 2021, 44, 407-415.	8.6	12
5	Determinants of Orphan Drug Prices in Germany. Pharmacoeconomics, 2020, 38, 397-411.	3.3	7
6	Predictors of negotiated prices for new drugs in Germany. European Journal of Health Economics, 2020, 21, 1049-1057.	2.8	15
7	Health Technology Assessment und seine Relevanz für Market Access. , 2020, , 177-199.		0
8	Different interpretation of additional evidence for HTA by the commissioned HTA body and the commissioning decision maker in Germany: whenever IQWiG and Federal Joint Committee disagree. Health Economics Review, 2019, 9, 35.	2.0	6
9	Methodological problems in the method used by IQWiG within early benefit assessment of new pharmaceuticals in Germany. European Journal of Health Economics, 2019, 20, 45-57.	2.8	7
10	Confirmatory versus explorative endpoint analysis: Decision-making on the basis of evidence available from market authorization and early benefit assessment for oncology drugs. Health Policy, 2018, 122, 599-606.	3.0	11
11	Budgetary Impact and Cost Drivers of Drugs for Rare and Ultrarare Diseases. Value in Health, 2018, 21, 525-531.	0.3	32
12	Effect of Crossover in Oncology Clinical Trials on Evidence Levels in Early Benefit Assessment in Germany. Value in Health, 2018, 21, 698-706.	0.3	9
13	Quantified patient preferences for lifestyle intervention programs for diabetes prevention—a protocol for a systematic review. Systematic Reviews, 2018, 7, 214.	5.3	6
14	Market withdrawals of medicines in Germany after AMNOG: a comparison of HTA ratings and clinical guideline recommendations. Health Economics Review, 2018, 8, 23.	2.0	15
15	INDUSTRY'S EXPERIENCES WITH THE SCIENTIFIC ADVICE OFFERED BY THE FEDERAL JOINT COMMITTEE WITHIN THE EARLY BENEFIT ASSESSMENT OF PHARMACEUTICALS IN GERMANY. International Journal of Technology Assessment in Health Care, 2018, 34, 196-204.	0.5	7
16	Letter to the editor of the Journal of Affective Disorders: Supporting the guideline's quest for real direct costs of depression care. Journal of Affective Disorders, 2017, 208, 101-102.	4.1	2
17	Re. European Journal of Gastroenterology and Hepatology, 2016, 28, 362.	1.6	1
18	Arbitration Board Setting Reimbursement Amounts for Pharmaceutical Innovations in Germany When Price Negotiations between Payers and Manufacturers Fail: An Empirical Analysis of 5 Years' Experience. Value in Health, 2016, 19, 1016-1025.	0.3	16

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19	Comparison of post-authorisation measures from regulatory authorities with additional evidence requirements from the HTA body in Germany – are additional data requirements by the Federal Joint Committee justified?. <i>Health Economics Review</i> , 2016, 6, 46.	2.0	7
20	Effect of person-centred care on antipsychotic drug use in nursing homes (EPCentCare): study protocol for a cluster-randomised controlled trial. <i>Implementation Science</i> , 2015, 10, 82.	6.9	23
21	Implementation of a multicomponent intervention to prevent physical restraints in nursing home residents (IMPRINT): study protocol for a cluster-randomised controlled trial. <i>BMC Geriatrics</i> , 2015, 15, 86.	2.7	18
22	Re: –Early benefit assessment of new drugs in Germany – Results from 2011 to 2012–[Health Policy 116 (2–3) (2014) 147–153]. <i>Health Policy</i> , 2014, 118, 271.	3.0	2
23	Early benefit assessment (EBA) in Germany: analysing decisions 18 months after introducing the new AMNOG legislation. <i>European Journal of Health Economics</i> , 2014, 15, 577-589.	2.8	76
24	Analysis of endpoints used in marketing authorisations versus value assessments of oncology medicines in Germany. <i>Health Policy</i> , 2014, 118, 242-254.	3.0	26
25	Questioning Patient Subgroups for Benefit Assessment: Challenging the German Gemeinsamer Bundesausschuss Approach. <i>Value in Health</i> , 2014, 17, 307-309.	0.3	13
26	Patient relevant endpoints in oncology: current issues in the context of early benefit assessment in Germany. <i>Health Economics Review</i> , 2014, 4, 2.	2.0	17
27	Using the Analytic Hierarchy Process to Elicit Patient Preferences. <i>Patient</i> , 2012, 5, 225-237.	2.7	52
28	Using the Analytic Hierarchy Process to Elicit Patient Preferences. <i>Patient</i> , 2012, 5, 225-237.	2.7	25
29	Reflections on the Changing Face of German Pharmaceutical Policy. <i>Pharmacoeconomics</i> , 2011, 29, 549-553.	3.3	39
30	Integrating patients' views into health technology assessment: Analytic hierarchy process (AHP) as a method to elicit patient preferences. <i>International Journal of Technology Assessment in Health Care</i> , 2011, 27, 369-375.	0.5	142