

James R Carpenter

List of Publications by Year in descending order

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Version: 2024-02-01

186
papers

31,284
citations

36691

53
h-index

6349

163
g-index

221
all docs

221
docs citations

221
times ranked

50477
citing authors

#	ARTICLE	IF	CITATIONS
1	ROBINS-I: a tool for assessing risk of bias in non-randomised studies of interventions. BMJ, The, 2016, 355, i4919.	3.0	8,654
2	Multiple imputation for missing data in epidemiological and clinical research: potential and pitfalls. BMJ: British Medical Journal, 2009, 338, b2393-b2393.	2.4	4,793
3	Recommendations for examining and interpreting funnel plot asymmetry in meta-analyses of randomised controlled trials. BMJ: British Medical Journal, 2011, 343, d4002-d4002.	2.4	4,743
4	Bootstrap confidence intervals: when, which, what? A practical guide for medical statisticians. , 2000, 19, 1141-1164.		1,257
5	Undue reliance on I ² in assessing heterogeneity may mislead. BMC Medical Research Methodology, 2008, 8, 79.	1.4	821
6	Strategy for intention to treat analysis in randomised trials with missing outcome data. BMJ: British Medical Journal, 2011, 342, d40-d40.	2.4	639
7	Meta-Analysis with R. Use R!, 2015, , .	0.3	616
8	Comparison of Random Forest and Parametric Imputation Models for Imputing Missing Data Using MICE: A CALIBER Study. American Journal of Epidemiology, 2014, 179, 764-774.	1.6	433
9	Arcsine test for publication bias in meta-analyses with binary outcomes. Statistics in Medicine, 2008, 27, 746-763.	0.8	361
10	Multiple imputation: current perspectives. Statistical Methods in Medical Research, 2007, 16, 199-218.	0.7	336
11	Multiple imputation of covariates by fully conditional specification: Accommodating the substantive model. Statistical Methods in Medical Research, 2015, 24, 462-487.	0.7	333
12	Strategies for Multiple Imputation in Longitudinal Studies. American Journal of Epidemiology, 2010, 172, 478-487.	1.6	298
13	Missing covariate data in clinical research: when and when not to use the missing-indicator method for analysis. Cmaj, 2012, 184, 1265-1269.	0.9	283
14	A new risk prediction model for critical care: The Intensive Care National Audit & Research Centre (ICNARC) model*. Critical Care Medicine, 2007, 35, 1091-1098.	0.4	243
15	Including all individuals is not enough: Lessons for intention-to-treat analysis. Clinical Trials, 2012, 9, 396-407.	0.7	233
16	Why add anything to nothing? The arcsine difference as a measure of treatment effect in meta-analysis with zero cells. Statistics in Medicine, 2009, 28, 721-738.	0.8	214
17	Effects of training on quality of peer review: randomised controlled trial. BMJ: British Medical Journal, 2004, 328, 673.	2.4	186
18	Bed sharing when parents do not smoke: is there a risk of SIDS? An individual level analysis of five major case-control studies. BMJ Open, 2013, 3, e002299.	0.8	183

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19	Treatment-effect estimates adjusted for small-study effects via a limit meta-analysis. <i>Biostatistics</i> , 2011, 12, 122-142.	0.9	181
20	Sensitivity analysis after multiple imputation under missing at random: a weighting approach. <i>Statistical Methods in Medical Research</i> , 2007, 16, 259-275.	0.7	180
21	Analysis of Longitudinal Trials with Protocol Deviation: A Framework for Relevant, Accessible Assumptions, and Inference via Multiple Imputation. <i>Journal of Biopharmaceutical Statistics</i> , 2013, 23, 1352-1371.	0.4	178
22	Propensity scores: From naïve enthusiasm to intuitive understanding. <i>Statistical Methods in Medical Research</i> , 2012, 21, 273-293.	0.7	177
23	Can We Improve the Statistical Analysis of Stroke Trials?. <i>Stroke</i> , 2007, 38, 1911-1915.	1.0	168
24	A comparison of multiple imputation and doubly robust estimation for analyses with missing data. <i>Journal of the Royal Statistical Society Series A: Statistics in Society</i> , 2006, 169, 571-584.	0.6	166
25	Propensity score analysis with partially observed covariates: How should multiple imputation be used?. <i>Statistical Methods in Medical Research</i> , 2019, 28, 3-19.	0.7	159
26	Recalibration of risk prediction models in a large multicenter cohort of admissions to adult, general critical care units in the United Kingdom*. <i>Critical Care Medicine</i> , 2006, 34, 1378-1388.	0.4	150
27	Meta-analytical methods to identify who benefits most from treatments: daft, deluded, or deft approach?. <i>BMJ: British Medical Journal</i> , 2017, 356, j573.	2.4	143
28	Framework for the treatment and reporting of missing data in observational studies: The Treatment And Reporting of Missing data in Observational Studies framework. <i>Journal of Clinical Epidemiology</i> , 2021, 134, 79-88.	2.4	133
29	The relationship between quality of research and citation frequency. <i>BMC Medical Research Methodology</i> , 2006, 6, 42.	1.4	128
30	Multilevel models with multivariate mixed response types. <i>Statistical Modelling</i> , 2009, 9, 173-197.	0.5	128
31	Verteporfin Photodynamic Therapy Cohort Study: Report 1: Effectiveness and Factors Influencing Outcomes. <i>Ophthalmology</i> , 2009, 116, e1-e8.	2.5	127
32	Developing Appropriate Methods for Cost-Effectiveness Analysis of Cluster Randomized Trials. <i>Medical Decision Making</i> , 2012, 32, 350-361.	1.2	119
33	REALCOM-IMPUTE Software for Multilevel Multiple Imputation with Mixed Response Types. <i>Journal of Statistical Software</i> , 2011, 45, .	1.8	117
34	Asymptotically Unbiased Estimation of Exposure Odds Ratios in Complete Records Logistic Regression. <i>American Journal of Epidemiology</i> , 2015, 182, 730-736.	1.6	108
35	More multiarm randomised trials of superiority are needed. <i>Lancet, The</i> , 2014, 384, 283-284.	6.3	105
36	Non-inferiority trials: are they inferior? A systematic review of reporting in major medical journals. <i>BMJ Open</i> , 2016, 6, e012594.	0.8	105

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37	Issues in multiple imputation of missing data for large general practice clinical databases. <i>Pharmacoepidemiology and Drug Safety</i> , 2010, 19, 618-626.	0.9	99
38	STREngthening Analytical Thinking for Observational Studies: the STRATOS initiative. <i>Statistics in Medicine</i> , 2014, 33, 5413-5432.	0.8	94
39	Sensitivity analysis for clinical trials with missing continuous outcome data using controlled multiple imputation: A practical guide. <i>Statistics in Medicine</i> , 2020, 39, 2815-2842.	0.8	93
40	Modelling relative survival in the presence of incomplete data: a tutorial. <i>International Journal of Epidemiology</i> , 2010, 39, 118-128.	0.9	91
41	Detecting and adjusting for small study effects in meta-analysis. <i>Biometrical Journal</i> , 2011, 53, 351-368.	0.6	90
42	Empirical evaluation suggests Copas selection model preferable to trim-and-fill method for selection bias in meta-analysis. <i>Journal of Clinical Epidemiology</i> , 2010, 63, 282-288.	2.4	87
43	Multiple Imputation for Multilevel Data with Continuous and Binary Variables. <i>Statistical Science</i> , 2018, 33, .	1.6	84
44	Coping with missing data in clinical trials: A model-based approach applied to asthma trials. <i>Statistics in Medicine</i> , 2002, 21, 1043-1066.	0.8	83
45	Pleural mesothelioma and lung cancer risks in relation to occupational history and asbestos lung burden. <i>Occupational and Environmental Medicine</i> , 2016, 73, 290-299.	1.3	83
46	Comparison of imputation and modelling methods in the analysis of a physical activity trial with missing outcomes. <i>International Journal of Epidemiology</i> , 2004, 34, 89-99.	0.9	79
47	Eliciting and using expert opinions about dropout bias in randomized controlled trials. <i>Clinical Trials</i> , 2007, 4, 125-139.	0.7	76
48	Fitting Multilevel Multivariate Models with Missing Data in Responses and Covariates that May Include Interactions and Non-Linear Terms. <i>Journal of the Royal Statistical Society Series A: Statistics in Society</i> , 2014, 177, 553-564.	0.6	76
49	A novel bootstrap procedure for assessing the relationship between class size and achievement. <i>Journal of the Royal Statistical Society Series C: Applied Statistics</i> , 2003, 52, 431-443.	0.5	74
50	Missing data: A statistical framework for practice. <i>Biometrical Journal</i> , 2021, 63, 915-947.	0.6	73
51	Statistically significant papers in psychiatry were cited more often than others. <i>Journal of Clinical Epidemiology</i> , 2007, 60, 939-946.	2.4	70
52	Sensitivity Analysis for Not-at-Random Missing Data in Trial-Based Cost-Effectiveness Analysis: A Tutorial. <i>Pharmacoeconomics</i> , 2018, 36, 889-901.	1.7	69
53	jomo: A Flexible Package for Two-level Joint Modelling Multiple Imputation. <i>R Journal</i> , 2019, 11, 205.	0.7	69
54	Relaxing the independent censoring assumption in the Cox proportional hazards model using multiple imputation. <i>Statistics in Medicine</i> , 2014, 33, 4681-4694.	0.8	60

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55	Smoker, ex-smoker or non-smoker? The validity of routinely recorded smoking status in UK primary care: a cross-sectional study. <i>BMJ Open</i> , 2014, 4, e004958.	0.8	59
56	Analysis of Incomplete Data Using Inverse Probability Weighting and Doubly Robust Estimators. <i>Methodology</i> , 2010, 6, 37-48.	0.5	57
57	Joint modelling rationale for chained equations. <i>BMC Medical Research Methodology</i> , 2014, 14, 28.	1.4	56
58	Small-Study Effects in Meta-Analysis. <i>Use R!</i> , 2015, , 107-141.	0.3	56
59	Appropriate inclusion of interactions was needed to avoid bias in multiple imputation. <i>Journal of Clinical Epidemiology</i> , 2016, 80, 107-115.	2.4	55
60	Practical considerations for sensitivity analysis after multiple imputation applied to epidemiological studies with incomplete data. <i>BMC Medical Research Methodology</i> , 2012, 12, 73.	1.4	50
61	Improving upon the efficiency of complete case analysis when covariates are MNAR. <i>Biostatistics</i> , 2014, 15, 719-730.	0.9	49
62	Estimation in generalised linear mixed models with binary outcomes by simulated maximum likelihood. <i>Statistical Modelling</i> , 2006, 6, 23-42.	0.5	48
63	Empirical evaluation showed that the Copas selection model provided a useful summary in 80% of meta-analyses. <i>Journal of Clinical Epidemiology</i> , 2009, 62, 624-631.e4.	2.4	47
64	Evaluation of two-fold fully conditional specification multiple imputation for longitudinal electronic health record data. <i>Statistics in Medicine</i> , 2014, 33, 3725-3737.	0.8	46
65	METHODS FOR COVARIATE ADJUSTMENT IN COST-EFFECTIVENESS ANALYSIS THAT USE CLUSTER RANDOMISED TRIALS. <i>Health Economics (United Kingdom)</i> , 2012, 21, 1101-1118.	0.8	44
66	<p>Health indicator recording in UK primary care electronic health records: key implications for handling missing data</p>. <i>Clinical Epidemiology</i> , 2019, Volume 11, 157-167.	1.5	38
67	A brief measure of perceived understanding of informed consent in a clinical trial was validated. <i>Journal of Clinical Epidemiology</i> , 2006, 59, 608-614.	2.4	36
68	Consumer involvement in consent document development: a multicenter cluster randomized trial to assess study participants' understanding. <i>Clinical Trials</i> , 2006, 3, 19-30.	0.7	36
69	The influence of formulation and medicine delivery system on medication administration errors in care homes for older people. <i>BMJ Quality and Safety</i> , 2011, 20, 397-401.	1.8	36
70	Combining fractional polynomial model building with multiple imputation. <i>Statistics in Medicine</i> , 2015, 34, 3298-3317.	0.8	36
71	Missing data in trial-based cost-effectiveness analysis: An incomplete journey. <i>Health Economics (United Kingdom)</i> , 2018, 27, 1024-1040.	0.8	36
72	Weekly COVID-19 testing with household quarantine and contact tracing is feasible and would probably end the epidemic. <i>Royal Society Open Science</i> , 2020, 7, 200915.	1.1	35

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73	Estimating Excess Hazard Ratios and Net Survival When Covariate Data Are Missing. <i>Epidemiology</i> , 2015, 26, 421-428.	1.2	34
74	Development of paediatric quality of inpatient care indicators for low-income countries - A Delphi study. <i>BMC Pediatrics</i> , 2010, 10, 90.	0.7	33
75	Reference-based Sensitivity Analysis via Multiple Imputation for Longitudinal Trials with Protocol Deviation. <i>The Stata Journal</i> , 2016, 16, 443-463.	0.9	33
76	Development of a practical approach to expert elicitation for randomised controlled trials with missing health outcomes: Application to the IMPROVE trial. <i>Clinical Trials</i> , 2017, 14, 357-367.	0.7	33
77	Two-Stage Nonparametric Bootstrap Sampling with Shrinkage Correction for Clustered Data. <i>The Stata Journal</i> , 2013, 13, 141-164.	0.9	30
78	Meta-analysis of Gaussian individual patient data: Two-stage or not two-stage?. <i>Statistics in Medicine</i> , 2018, 37, 1419-1438.	0.8	30
79	Assessing the Sensitivity of Meta-analysis to Selection Bias: A Multiple Imputation Approach. <i>Biometrics</i> , 2011, 67, 1066-1072.	0.8	29
80	Bayesian one-step IPD network meta-analysis of time-to-event data using Royston-Parmar models. <i>Research Synthesis Methods</i> , 2017, 8, 451-464.	4.2	29
81	Identifying inconsistency in network meta-analysis: Is the net heat plot a reliable method?. <i>Statistics in Medicine</i> , 2019, 38, 5547-5564.	0.8	29
82	Information-Anchored Sensitivity Analysis: Theory and Application. <i>Journal of the Royal Statistical Society Series A: Statistics in Society</i> , 2019, 182, 623-645.	0.6	29
83	A four-step strategy for handling missing outcome data in randomised trials affected by a pandemic. <i>BMC Medical Research Methodology</i> , 2020, 20, 208.	1.4	29
84	Last observation carry-forward and last observation analysis. <i>Statistics in Medicine</i> , 2004, 23, 3241-3242.	0.8	28
85	Is there an anti-inflammatory effect of statins in rheumatoid arthritis? Analysis of a large routinely collected claims database. <i>British Journal of Clinical Pharmacology</i> , 2010, 69, 85-94.	1.1	27
86	Multiple imputation for discrete data: Evaluation of the joint latent normal model. <i>Biometrical Journal</i> , 2019, 61, 1003-1019.	0.6	27
87	Effect of a multi-faceted quality improvement intervention on inappropriate antibiotic use in children with non-bloody diarrhoea admitted to district hospitals in Kenya. <i>BMC Pediatrics</i> , 2011, 11, 109.	0.7	24
88	Multilevel models for cost-effectiveness analyses that use cluster randomised trial data: An approach to model choice. <i>Statistical Methods in Medical Research</i> , 2016, 25, 2036-2052.	0.7	24
89	Propensity scores using missingness pattern information: a practical guide. <i>Statistics in Medicine</i> , 2020, 39, 1641-1657.	0.8	24
90	Winter excess mortality in intensive care in the UK: an analysis of outcome adjusted for patient case mix and unit workload. <i>Intensive Care Medicine</i> , 2004, 30, 1900-1907.	3.9	23

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91	Estimands in published protocols of randomised trials: urgent improvement needed. <i>Trials</i> , 2021, 22, 686.	0.7	23
92	Two-stage method to remove population- and individual-level outliers from longitudinal data in a primary care database. <i>Pharmacoepidemiology and Drug Safety</i> , 2012, 21, 725-732.	0.9	22
93	The Complementary Exponentiated Exponential Geometric Lifetime Distribution. <i>Journal of Probability and Statistics</i> , 2013, 2013, 1-12.	0.3	22
94	Access to routinely collected health data for clinical trials – review of successful data requests to UK registries. <i>Trials</i> , 2020, 21, 398.	0.7	22
95	Missing data: Discussion points from the PSI missing data expert group. <i>Pharmaceutical Statistics</i> , 2010, 9, 288-297.	0.7	21
96	Population-calibrated multiple imputation for a binary/categorical covariate in categorical regression models. <i>Statistics in Medicine</i> , 2019, 38, 792-808.	0.8	21
97	Rethinking non-inferiority: a practical trial design for optimising treatment duration. <i>Clinical Trials</i> , 2018, 15, 477-488.	0.7	20
98	Reference-based sensitivity analysis for time-to-event data. <i>Pharmaceutical Statistics</i> , 2019, 18, 645-658.	0.7	19
99	Estimating treatment effects with partially observed covariates using outcome regression with missing indicators. <i>Biometrical Journal</i> , 2020, 62, 428-443.	0.6	18
100	Using SAS to conduct nonparametric residual bootstrap multilevel modeling with a small number of groups. <i>Computer Methods and Programs in Biomedicine</i> , 2006, 82, 130-143.	2.6	17
101	Should baseline be a covariate or dependent variable in analyses of change from baseline in clinical trials? by G. F. Liu, K. Lu, R. Mogg, M. Mallick and D. V. Mehrotra, <i>Statistics in Medicine</i> 2009; 28(25):2509-2530. <i>Statistics in Medicine</i> , 2010, 29, 1455-1456.	0.8	17
102	Multiple imputation models should incorporate the outcome in the model of interest. <i>Brain</i> , 2011, 134, e189-e189.	3.7	17
103	Unintended Consequences of mHealth Interactive Voice Messages Promoting Contraceptive Use After Menstrual Regulation in Bangladesh: Intimate Partner Violence Results From a Randomized Controlled Trial. <i>Global Health, Science and Practice</i> , 2019, 7, 386-403.	0.6	17
104	Treatment estimands in clinical trials of patients hospitalised for COVID-19: ensuring trials ask the right questions. <i>BMC Medicine</i> , 2020, 18, 286.	2.3	17
105	Fixed Effect and Random Effects Meta-Analysis. <i>Use R!</i> , 2015, , 21-53.	0.3	17
106	Survival following the development of ascites and/or peripheral oedema in primary biliary cirrhosis: A staged prognostic model. <i>Scandinavian Journal of Gastroenterology</i> , 2005, 40, 1081-1089.	0.6	16
107	Fractional Brownian motion and multivariate models for longitudinal biomedical data, with application to CD4 counts in HIV-positive patients. <i>Statistics in Medicine</i> , 2016, 35, 1514-1532.	0.8	16
108	Accessing routinely collected health data to improve clinical trials: recent experience of access. <i>Trials</i> , 2021, 22, 340.	0.7	16

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109	Bootstrap confidence intervals: when, which, what? A practical guide for medical statisticians. , 2000, 19, 1141.		16
110	A Bayesian framework for health economic evaluation in studies with missing data. Health Economics (United Kingdom), 2018, 27, 1670-1683.	0.8	14
111	Effectiveness of spatially targeted interventions for control of HIV, tuberculosis, leprosy and malaria: a systematic review. BMJ Open, 2021, 11, e044715.	0.8	13
112	Reference-based sensitivity analysis via multiple imputation for longitudinal trials with protocol deviation. The Stata Journal, 2016, 16, 443-463.	0.9	13
113	Verteporfin Photodynamic Therapy Cohort Study. Ophthalmology, 2009, 116, 2471-2477.e2.	2.5	12
114	Verteporfin Photodynamic Therapy Cohort Study. Ophthalmology, 2009, 116, 2463-2470.	2.5	12
115	Correcting bias due to missing stage data in the non-parametric estimation of stage-specific net survival for colorectal cancer using multiple imputation. Cancer Epidemiology, 2017, 48, 16-21.	0.8	12
116	Using automated voice messages linked to telephone counselling to increase post-menstrual regulation contraceptive uptake and continuation in Bangladesh: study protocol for a randomised controlled trial. BMC Public Health, 2017, 17, 769.	1.2	12
117	The DURATIONS randomised trial design: Estimation targets, analysis methods and operating characteristics. Clinical Trials, 2020, 17, 644-653.	0.7	12
118	A framework for handling missing accelerometer outcome data in trials. Trials, 2021, 22, 379.	0.7	12
119	Common Methods for Handling Missing Data in Marginal Structural Models: What Works and Why. American Journal of Epidemiology, 2021, 190, 663-672.	1.6	12
120	A Monte Carlo EM algorithm for random-coefficient-based dropout models. Journal of Applied Statistics, 2002, 29, 1011-1021.	0.6	11
121	Clarithromycin and endoscopic sinus surgery for adults with chronic rhinosinusitis with and without nasal polyps: study protocol for the MACRO randomised controlled trial. Trials, 2019, 20, 246.	0.7	11
122	Reference-based multiple imputation for missing data sensitivity analyses in trial-based cost-effectiveness analysis. Health Economics (United Kingdom), 2020, 29, 171-184.	0.8	11
123	Real world effects of COPD medications: a cohort study with validation against results from randomised controlled trials. European Respiratory Journal, 2021, 57, 2001586.	3.1	11
124	Adjusting treatment comparisons to account for non-randomized interventions: an example from an angina trial. Statistics in Medicine, 2003, 22, 781-793.	0.8	10
125	Analysing Longitudinal Studies with Non-response: Issues and Statistical Methods. , 0, , 498-523.		10
126	Identifying influential observations in Bayesian models by using Markov chain Monte Carlo. Statistics in Medicine, 2012, 31, 1238-1248.	0.8	9

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127	Safetxt: a safer sex intervention delivered by mobile phone messaging on sexually transmitted infections (STI) among young people in the UK - protocol for a randomised controlled trial. <i>BMJ Open</i> , 2020, 10, e031635.	0.8	9
128	Developing excellence in biostatistics leadership, training and science in Africa: How the Sub-Saharan Africa Consortium for Advanced Biostatistics (SSACAB) training harnesses expertise to deliver excellence. <i>AAS Open Research</i> , 2020, 3, 51.	1.5	9
129	The use of regression models for medians when observed outcomes may be modified by interventions. <i>Statistics in Medicine</i> , 2003, 22, 1083-1096.	0.8	8
130	Variceal bleeding in primary biliary cirrhosis patients: a subgroup with improved prognosis and a model to predict survival after first bleeding. <i>European Journal of Gastroenterology and Hepatology</i> , 2009, 21, 701-707.	0.8	8
131	Withholding Primary Pneumocystis Pneumonia Prophylaxis in Virologically Suppressed Patients With Human Immunodeficiency Virus: An Emulation of a Pragmatic Trial in COHERE. <i>Clinical Infectious Diseases</i> , 2021, 73, 195-202.	2.9	8
132	A mean score method for sensitivity analysis to departures from the missing at random assumption in randomised trials. <i>Statistica Sinica</i> , 2018, 28, 1985-2003.	0.2	8
133	Comments on "Fixed vs random effects meta-analysis in rare event studies: the rosiglitazone link with myocardial infarction and cardiac death" by J. J. Shuster, L. S. Jones and D. A. Salmon, <i>Statistics in Medicine</i> 2007; 26:4375-4385. <i>Statistics in Medicine</i> , 2008, 27, 3910-3912.	0.8	7
134	Are large trials less reliable than small trials?. <i>Journal of Clinical Epidemiology</i> , 2009, 62, 886-887.	2.4	7
135	Ursodeoxycholic Acid Improves Bilirubin but Not Albumin in Primary Biliary Cirrhosis: Further Evidence for Nonefficacy. <i>BioMed Research International</i> , 2013, 2013, 1-6.	0.9	7
136	A framework for extending trial design to facilitate missing data sensitivity analyses. <i>BMC Medical Research Methodology</i> , 2020, 20, 66.	1.4	7
137	Estimating treatment effects under untestable assumptions with nonignorable missing data. <i>Statistics in Medicine</i> , 2020, 39, 1658-1674.	0.8	7
138	Meta-Analysis with Binary Outcomes. <i>Use R!</i> , 2015, , 55-83.	0.3	7
139	Heterogeneity and Meta-Regression. <i>Use R!</i> , 2015, , 85-104.	0.3	7
140	The performance of multiple imputation for missing covariates relative to complete case analysis. <i>Statistics in Medicine</i> , 2010, 29, 1357-1357.	0.8	6
141	Comments on "Empirical vs natural weighting in random effects meta-analysis" by JJ Shuster, <i>Statistics in Medicine</i> 2009; 28:2963-2965. Published online, DOI: 10.1002/sim.3607. <i>Statistics in Medicine</i> , 2010, 29, 2963-2965.	0.8	6
142	Real-world effects of medications for chronic obstructive pulmonary disease: protocol for a UK population-based non-interventional cohort study with validation against randomised trial results. <i>BMJ Open</i> , 2018, 8, e019475.	0.8	6
143	Challenges of modelling approaches for network meta-analysis of time-to-event outcomes in the presence of non-proportional hazards to aid decision making: Application to a melanoma network. <i>Statistical Methods in Medical Research</i> , 2022, 31, 839-861.	0.7	6
144	Neighbourhood prevalence-to-notification ratios for adult bacteriologically-confirmed tuberculosis reveals hotspots of underdiagnosis in Blantyre, Malawi. <i>PLoS ONE</i> , 2022, 17, e0268749.	1.1	6

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145	Assessing parameter uncertainty via bootstrap likelihood ratio confidence regions. Journal of Applied Statistics, 1998, 25, 639-649.	0.6	5
146	Bootstrap confidence intervals for relative risk parameters in affected-sib-pair data. , 2000, 18, 157-172.		5
147	Design of cohort studies in chronic diseases using routinely collected databases when a prescription is used as surrogate outcome. BMC Medical Research Methodology, 2011, 11, 36.	1.4	5
148	Optimal CD4 Count for Initiating HIV Treatment. Epidemiology, 2014, 25, 194-202.	1.2	5
149	<p>Handling Missing Values in Interrupted Time Series Analysis of Longitudinal Individual-Level Data</p>. Clinical Epidemiology, 2020, Volume 12, 1045-1057.	1.5	5
150	Assessing uncertainty about parameter estimates with incomplete repeated ordinal data. Statistical Modelling, 2002, 2, 203-215.	0.5	4
151	An experimental study of the influence of individual participant characteristics on formal consensus development. International Journal of Technology Assessment in Health Care, 2007, 23, 108-115.	0.2	4
152	Expert panel process to optimise the design of a randomised controlled trial in chronic rhinosinusitis (the MACRO programme). Trials, 2019, 20, 230.	0.7	4
153	Statistical methods for non-adherence in non-inferiority trials: useful and used? A systematic review. BMJ Open, 2022, 12, e052656.	0.8	4
154	Smarter adaptive platform clinical trials in neurology: a showcase for UK innovation. Brain, 2022, 145, e64-e65.	3.7	4
155	Complete-cases analysis is appropriate for randomised trials with pre-testâ€“post-test designs. Psychiatry Research, 2009, 168, 268.	1.7	3
156	Bayesian Models for Weighted Data with Missing Values: A Bootstrap Approach. Journal of the Royal Statistical Society Series C: Applied Statistics, 2018, 67, 1071-1081.	0.5	3
157	Flexible Bayesian excess hazard models using low-rank thin plate splines. Statistical Methods in Medical Research, 2020, 29, 1700-1714.	0.7	3
158	Clinical, health systems and neighbourhood determinants of tuberculosis case fatality in urban Blantyre, Malawi: a multilevel epidemiological analysis of enhanced surveillance data. Epidemiology and Infection, 2021, 149, .	1.0	3
159	Information anchored referenceâ€“based sensitivity analysis for truncated normal data with application to survival analysis. Statistica Neerlandica, 2021, 75, 500.	0.9	3
160	Bespoke cohort studies needed. BMJ: British Medical Journal, 2009, 339, b3512-b3512.	2.4	3
161	Training and capacity building in medical statistics in <sc>Subâ€“Saharan</sc> Africa: Impact of the London School of Hygiene & Tropical Medicine <sc>MSc</sc> in Medical Statistics, 1969 to 2021. Statistics in Medicine, 2022, 41, 838-844.	0.8	3
162	Estimands for factorial trials. Statistics in Medicine, 0, , .	0.8	3

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163	Comments on: Missing data methods in longitudinal studies: a review. <i>Test</i> , 2009, 18, 65-67.	0.7	2
164	Re: Christopher J.D. Wallis, Zachary Klaassen, Bimal Bhindi, et al. Comparison of Abiraterone Acetate and Docetaxel with Androgen Deprivation Therapy in High-risk and Metastatic Hormone-naïve Prostate Cancer: A Systematic Review and Network Meta-analysis. <i>Eur Urol</i> . In press. https://doi.org/10.1016/j.eururo.2017.10.002 . <i>European Urology</i> , 2018, 73, e49-e50.	0.9	2
165	Current Practices in Missing Data Handling for Interrupted Time Series Studies Performed on Individual-Level Data: A Scoping Review in Health Research. <i>Clinical Epidemiology</i> , 2021, Volume 13, 603-613.	1.5	2
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182	Discussion on "Testing small study effects in multivariate meta-analysis" by Chuan Hong, Georgia Salanti, Sally Morton, Richard Riley, Haitao Chu, Stephen E Kimmel and Yong Chen. Biometrics, 2020, 76, 1260-1261.	0.8	0
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