

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	Bed-sharing is a risk for sudden unexpected death in infancy. Archives of Disease in Childhood, 2023, 108, 79-80.	1.0	2
2	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. Statistical Methods in Medical Research, 2022, 31, 839-861.	0.7	6
3	Statistical methods for non-adherence in non-inferiority trials: useful and used? A systematic review. BMJ Open, 2022, 12, e052656.	0.8	4
4	Observational retrospective study calculating health service costs of patients receiving surgery for chronic rhinosinusitis in England, using linked patient-level primary and secondary care electronic data. BMJ Open, 2022, 12, e055603.	0.8	1
5	Training and capacity building in medical statistics in <scp>Sub-Saharan</scp> Africa: Impact of the London School of Hygiene & Tropical Medicine <scp>MSc</scp> in Medical Statistics, 1969 to 2021. Statistics in Medicine, 2022, 41, 838-844.	0.8	3
6	Smarter adaptive platform clinical trials in neurology: a showcase for UK innovation. Brain, 2022, 145, e64-e65.	3.7	4
7	Neighbourhood prevalence-to-notification ratios for adult bacteriologically-confirmed tuberculosis reveals hotspots of underdiagnosis in Blantyre, Malawi. PLoS ONE, 2022, 17, e0268749.	1.1	6
8	Withholding Primary Pneumocystis Pneumonia Prophylaxis in Virologically Suppressed Patients With Human Immunodeficiency Virus: An Emulation of a Pragmatic Trial in COHERE. Clinical Infectious Diseases, 2021, 73, 195-202.	2.9	8
9	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
10	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
11	Missing data: A statistical framework for practice. Biometrical Journal, 2021, 63, 915-947.	0.6	73
12	Accessing routinely collected health data to improve clinical trials: recent experience of access. Trials, 2021, 22, 340.	0.7	16
13	A framework for handling missing accelerometer outcome data in trials. Trials, 2021, 22, 379.	0.7	12
14	Information anchored reference-based sensitivity analysis for truncated normal data with application to survival analysis. Statistica Neerlandica, 2021, 75, 500.	0.9	3
15	Framework for the treatment and reporting of missing data in observational studies: The Treatment And Reporting of Missing data in Observational Studies framework. Journal of Clinical Epidemiology, 2021, 134, 79-88.	2.4	133
16	Effectiveness of spatially targeted interventions for control of HIV, tuberculosis, leprosy and malaria: a systematic review. BMJ Open, 2021, 11, e044715.	0.8	13
17	Current Practices in Missing Data Handling for Interrupted Time Series Studies Performed on Individual-Level Data: A Scoping Review in Health Research. Clinical Epidemiology, 2021, Volume 13, 603-613.	1.5	2
18	Variation in colon cancer survival for patients living and receiving care in London, 2006-2013: does where you live matter?. Journal of Epidemiology and Community Health, 2021, , jech-2021-217043.	2.0	2

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19	Medications for chronic obstructive pulmonary disease: a historical non-interventional cohort study with validation against RCT results. <i>Health Technology Assessment</i> , 2021, 25, 1-70.	1.3	0
20	Flexible Bayesian longitudinal models for cost-effectiveness analyses with informative missing data. <i>Health Economics (United Kingdom)</i> , 2021, 30, 3138-3158.	0.8	2
21	98Framework for the Treatment And Reporting of Missing data in Observational Studies: The TARMOS framework. <i>International Journal of Epidemiology</i> , 2021, 50, .	0.9	0
22	1376Modern concepts in the handling and reporting of missing data. <i>International Journal of Epidemiology</i> , 2021, 50, .	0.9	0
23	98Framework for the Treatment And Reporting of Missing data in Observational Studies: The TARMOS framework. <i>International Journal of Epidemiology</i> , 2021, 50, .	0.9	1
24	Common Methods for Handling Missing Data in Marginal Structural Models: What Works and Why. <i>American Journal of Epidemiology</i> , 2021, 190, 663-672.	1.6	12
25	Estimands in published protocols of randomised trials: urgent improvement needed. <i>Trials</i> , 2021, 22, 686.	0.7	23
26	Flexible Bayesian excess hazard models using low-rank thin plate splines. <i>Statistical Methods in Medical Research</i> , 2020, 29, 1700-1714.	0.7	3
27	The DURATIONS randomised trial design: Estimation targets, analysis methods and operating characteristics. <i>Clinical Trials</i> , 2020, 17, 644-653.	0.7	12
28	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. <i>Biometrics</i> , 2020, 76, 1260-1261.	0.8	0
29	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
30	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
31	<p>Handling Missing Values in Interrupted Time Series Analysis of Longitudinal Individual-Level Data</p>. <i>Clinical Epidemiology</i> , 2020, Volume 12, 1045-1057.	1.5	5
32	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
33	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
34	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
35	A framework for extending trial design to facilitate missing data sensitivity analyses. <i>BMC Medical Research Methodology</i> , 2020, 20, 66.	1.4	7
36	Reference-based multiple imputation for missing data sensitivity analyses in trial-based cost-effectiveness analysis. <i>Health Economics (United Kingdom)</i> , 2020, 29, 171-184.	0.8	11

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37	Estimating treatment effects under untestable assumptions with nonignorable missing data. <i>Statistics in Medicine</i> , 2020, 39, 1658-1674.	0.8	7
38	Propensity scores using missingness pattern information: a practical guide. <i>Statistics in Medicine</i> , 2020, 39, 1641-1657.	0.8	24
39	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
40	Estimating treatment effects with partially observed covariates using outcome regression with missing indicators. <i>Biometrical Journal</i> , 2020, 62, 428-443.	0.6	18
41	Professor Harvey Goldstein at 80. <i>Significance</i> , 2020, 17, 41-41.	0.3	1
42	Developing excellence in biostatistics leadership, training and science in Africa: How the Sub-Saharan Africa Consortium for Advanced Biostatistics (SSACAB) trainingÅunites expertise to deliver excellence. <i>AAS Open Research</i> , 2020, 3, 51.	1.5	9
43	Reference-based sensitivity analysis for time-to-event data. <i>Pharmaceutical Statistics</i> , 2019, 18, 645-658.	0.7	19
44	Local average treatment effects estimation via substantive model compatible multiple imputation. <i>Biometrical Journal</i> , 2019, 61, 1526-1540.	0.6	1
45	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
46	Secondary re-analysis of the FEAST trial. <i>Lancet Respiratory Medicine</i> , the, 2019, 7, e30.	5.2	0
47	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
48	Expert panel process to optimise the design of a randomised controlled trial in chronic rhinosinusitis (the MACRO programme). <i>Trials</i> , 2019, 20, 230.	0.7	4
49	Clarithromycin and endoscopic sinus surgery for adults with chronic rhinosinusitis with and without nasal polyps: study protocol for the MACRO randomised controlled trial. <i>Trials</i> , 2019, 20, 246.	0.7	11
50	Multiple imputation for discrete data: Evaluation of the joint latent normal model. <i>Biometrical Journal</i> , 2019, 61, 1003-1019.	0.6	27
51	<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
52	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
53	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
54	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

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55	jomo: A Flexible Package for Two-level Joint Modelling Multiple Imputation. R Journal, 2019, 11, 205.	0.7	69
56	Sensitivity Analysis for Not-at-Random Missing Data in Trial-Based Cost-Effectiveness Analysis: A Tutorial. Pharmacoeconomics, 2018, 36, 889-901.	1.7	69
57	Missing data in trial-based cost-effectiveness analysis: An incomplete journey. Health Economics (United Kingdom), 2018, 27, 1024-1040.	0.8	36
58	Meta-analysis of Gaussian individual patient data: Two-stage or not two-stage?. Statistics in Medicine, 2018, 37, 1419-1438.	0.8	30
59	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
60	Multiple Imputation for Multilevel Data with Continuous and Binary Variables. Statistical Science, 2018, 33, .	1.6	84
61	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. BMJ Open, 2018, 8, e019475.	0.8	6
62	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. Eur Urol. In press. https://doi.org/10.1016/j.eururo.2017.10.002 . European Urology, 2018, 73, e49-e50.	0.9	2
63	A Bayesian framework for health economic evaluation in studies with missing data. Health Economics (United Kingdom), 2018, 27, 1670-1683.	0.8	14
64	Comment on: Sensitivity Analysis for Not-at-Random Missing Data in Trial-Based Cost-Effectiveness Analysis: A Tutorial. Pharmacoeconomics, 2018, 36, 1297-1297.	1.7	1
65	Rethinking non-inferiority: a practical trial design for optimising treatment duration. Clinical Trials, 2018, 15, 477-488.	0.7	20
66	A mean score method for sensitivity analysis to departures from the missing at random assumption in randomised trials. Statistica Sinica, 2018, 28, 1985-2003.	0.2	8
67	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
68	Bayesian one-step IPD network meta-analysis of time-to-event data using Royston-Parmar models. Research Synthesis Methods, 2017, 8, 451-464.	4.2	29
69	Development of a practical approach to expert elicitation for randomised controlled trials with missing health outcomes: Application to the IMPROVE trial. Clinical Trials, 2017, 14, 357-367.	0.7	33
70	Meta-analytical methods to identify who benefits most from treatments: daft, deluded, or deft approach?. BMJ: British Medical Journal, 2017, 356, j573.	2.4	143
71	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
72	Rejoinder. Clinical Trials, 2017, 14, 370-371.	0.7	0

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73	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
74	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
75	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
76	The Authors Reply. <i>American Journal of Epidemiology</i> , 2016, 184, 161-161.	1.6	1
77	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
78	ROBINS-I: a tool for assessing risk of bias in non-randomised studies of interventions. <i>BMJ</i> , The, 2016, 355, i4919.	3.0	8,654
79	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
80	Fractional Brownian motion and multivariate α -stable 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
81	Reference-based sensitivity analysis via multiple imputation for longitudinal trials with protocol deviation. <i>The Stata Journal</i> , 2016, 16, 443-463.	0.9	13
82	Combining fractional polynomial model building with multiple imputation. <i>Statistics in Medicine</i> , 2015, 34, 3298-3317.	0.8	36
83	Estimating Excess Hazard Ratios and Net Survival When Covariate Data Are Missing. <i>Epidemiology</i> , 2015, 26, 421-428.	1.2	34
84	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
85	Multiple imputation of covariates by fully conditional specification: Accommodating the substantive model. <i>Statistical Methods in Medical Research</i> , 2015, 24, 462-487.	0.7	333
86	Meta-Analysis with R. <i>Use R!</i> , 2015, , .	0.3	616
87	Fixed Effect and Random Effects Meta-Analysis. <i>Use R!</i> , 2015, , 21-53.	0.3	17
88	Meta-Analysis with Binary Outcomes. <i>Use R!</i> , 2015, , 55-83.	0.3	7
89	Heterogeneity and Meta-Regression. <i>Use R!</i> , 2015, , 85-104.	0.3	7
90	Small-Study Effects in Meta-Analysis. <i>Use R!</i> , 2015, , 107-141.	0.3	56

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91	Multivariate Meta-Analysis. Use R!, 2015, , 165-185.	0.3	2
92	STRENGTHENING Analytical Thinking for Observational Studies: the STRATOS initiative. Statistics in Medicine, 2014, 33, 5413-5432.	0.8	94
93	Improving upon the efficiency of complete case analysis when covariates are MNAR. Biostatistics, 2014, 15, 719-730.	0.9	49
94	Smoker, ex-smoker or non-smoker? The validity of routinely recorded smoking status in UK primary care: a cross-sectional study. BMJ Open, 2014, 4, e004958.	0.8	59
95	Evaluation of two-fold fully conditional specification multiple imputation for longitudinal electronic health record data. Statistics in Medicine, 2014, 33, 3725-3737.	0.8	46
96	Optimal CD4 Count for Initiating HIV Treatment. Epidemiology, 2014, 25, 194-202.	1.2	5
97	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
98	Fitting Multilevel Multivariate Models with Missing Data in Responses and Covariates that May Include Interactions and Non-Linear Terms. Journal of the Royal Statistical Society Series A: Statistics in Society, 2014, 177, 553-564.	0.6	76
99	Joint modelling rationale for chained equations. BMC Medical Research Methodology, 2014, 14, 28.	1.4	56
100	More multiarm randomised trials of superiority are needed. Lancet, The, 2014, 384, 283-284.	6.3	105
101	Relaxing the independent censoring assumption in the Cox proportional hazards model using multiple imputation. Statistics in Medicine, 2014, 33, 4681-4694.	0.8	60
102	Ursodeoxycholic Acid Improves Bilirubin but Not Albumin in Primary Biliary Cirrhosis: Further Evidence for Nonefficacy. BioMed Research International, 2013, 2013, 1-6.	0.9	7
103	The Complementary Exponentiated Exponential Geometric Lifetime Distribution. Journal of Probability and Statistics, 2013, 2013, 1-12.	0.3	22
104	Analysis of Longitudinal Trials with Protocol Deviation: A Framework for Relevant, Accessible Assumptions, and Inference via Multiple Imputation. Journal of Biopharmaceutical Statistics, 2013, 23, 1352-1371.	0.4	178
105	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
106	Two-Stage Nonparametric Bootstrap Sampling with Shrinkage Correction for Clustered Data. The Stata Journal, 2013, 13, 141-164.	0.9	30
107	Including all individuals is not enough: Lessons for intention-to-treat analysis. Clinical Trials, 2012, 9, 396-407.	0.7	233
108	Special issue marking 40 years of the MSc Medical Statistics at the London School of Hygiene & Tropical Medicine. Statistical Methods in Medical Research, 2012, 21, 221-221.	0.7	0

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109	Missing covariate data in clinical research: when and when not to use the missing-indicator method for analysis. <i>Cmaj</i> , 2012, 184, 1265-1269.	0.9	283
110	Propensity scores: From naïve enthusiasm to intuitive understanding. <i>Statistical Methods in Medical Research</i> , 2012, 21, 273-293.	0.7	177
111	Developing Appropriate Methods for Cost-Effectiveness Analysis of Cluster Randomized Trials. <i>Medical Decision Making</i> , 2012, 32, 350-361.	1.2	119
112	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
113	Identifying influential observations in Bayesian models by using Markov chain Monte Carlo. <i>Statistics in Medicine</i> , 2012, 31, 1238-1248.	0.8	9
114	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
115	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
116	Statistical Modelling of Partially Observed Data Using Multiple Imputation: Principles and Practice. , 2012, , 15-31.		2
117	Recommendations for examining and interpreting funnel plot asymmetry in meta-analyses of randomised controlled trials. <i>BMJ: British Medical Journal</i> , 2011, 343, d4002-d4002.	2.4	4,743
118	Assessing the Sensitivity of Meta-analysis to Selection Bias: A Multiple Imputation Approach. <i>Biometrics</i> , 2011, 67, 1066-1072.	0.8	29
119	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
120	Design of cohort studies in chronic diseases using routinely collected databases when a prescription is used as surrogate outcome. <i>BMC Medical Research Methodology</i> , 2011, 11, 36.	1.4	5
121	Detecting and adjusting for small-study effects in meta-analysis. <i>Biometrical Journal</i> , 2011, 53, 351-368.	0.6	90
122	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
123	Multiple imputation models should incorporate the outcome in the model of interest. <i>Brain</i> , 2011, 134, e189-e189.	3.7	17
124	Treatment-effect estimates adjusted for small-study effects via a limit meta-analysis. <i>Biostatistics</i> , 2011, 12, 122-142.	0.9	181
125	Strategy for intention to treat analysis in randomised trials with missing outcome data. <i>BMJ: British Medical Journal</i> , 2011, 342, d40-d40.	2.4	639
126	REALCOM-IMPUTE Software for Multilevel Multiple Imputation with Mixed Response Types. <i>Journal of Statistical Software</i> , 2011, 45, .	1.8	117

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127	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
128	Missing data: Discussion points from the PSI missing data expert group. <i>Pharmaceutical Statistics</i> , 2010, 9, 288-297.	0.7	21
129	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;2509â€“2530. <i>Statistics in Medicine</i> , 2010, 29, 1455-1456.	0.8	17
130	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
131	Comments on â€“Empirical vs natural weighting in random effects metaâ€“analysisâ€™ by JJ Shuster, <i>Statistics in Medicine</i> 2009; 26, Published online, DOI: 10.1002/sim.3607. <i>Statistics in Medicine</i> , 2010, 29, 2963-2965.	0.8	6
132	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
133	Is there an antiâ€“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
134	Modelling relative survival in the presence of incomplete data: a tutorial. <i>International Journal of Epidemiology</i> , 2010, 39, 118-128.	0.9	91
135	Strategies for Multiple Imputation in Longitudinal Studies. <i>American Journal of Epidemiology</i> , 2010, 172, 478-487.	1.6	298
136	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
137	Analysis of Incomplete Data Using Inverse Probability Weighting and Doubly Robust Estimators. <i>Methodology</i> , 2010, 6, 37-48.	0.5	57
138	Comments on: Missing data methods in longitudinal studies: a review. <i>Test</i> , 2009, 18, 65-67.	0.7	2
139	Why add anything to nothing? The arcsine difference as a measure of treatment effect in metaâ€“analysis with zero cells. <i>Statistics in Medicine</i> , 2009, 28, 721-738.	0.8	214
140	Verteporfin Photodynamic Therapy Cohort Study: Report 1: Effectiveness and Factors Influencing Outcomes. <i>Ophthalmology</i> , 2009, 116, e1-e8.	2.5	127
141	Verteporfin Photodynamic Therapy Cohort Study. <i>Ophthalmology</i> , 2009, 116, 2471-2477.e2.	2.5	12
142	Verteporfin Photodynamic Therapy Cohort Study. <i>Ophthalmology</i> , 2009, 116, 2463-2470.	2.5	12
143	Complete-cases analysis is appropriate for randomised trials with pre-testâ€“post-test designs. <i>Psychiatry Research</i> , 2009, 168, 268.	1.7	3
144	Are large trials less reliable than small trials?. <i>Journal of Clinical Epidemiology</i> , 2009, 62, 886-887.	2.4	7

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145	Multilevel models with multivariate mixed response types. <i>Statistical Modelling</i> , 2009, 9, 173-197.	0.5	128
146	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
147	Multiple imputation for missing data in epidemiological and clinical research: potential and pitfalls. <i>BMJ: British Medical Journal</i> , 2009, 338, b2393-b2393.	2.4	4,793
148	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
149	Bespoke cohort studies needed. <i>BMJ: British Medical Journal</i> , 2009, 339, b3512-b3512.	2.4	3
150	Arcsine test for publication bias in meta-analyses with binary outcomes. <i>Statistics in Medicine</i> , 2008, 27, 746-763.	0.8	361
151	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
152	Undue reliance on I ² in assessing heterogeneity may mislead. <i>BMC Medical Research Methodology</i> , 2008, 8, 79.	1.4	821
153	Eliciting and using expert opinions about dropout bias in randomized controlled trials. <i>Clinical Trials</i> , 2007, 4, 125-139.	0.7	76
154	Can We Improve the Statistical Analysis of Stroke Trials?. <i>Stroke</i> , 2007, 38, 1911-1915.	1.0	168
155	A new risk prediction model for critical care: The Intensive Care National Audit & Research Centre (ICNARC) model*. <i>Critical Care Medicine</i> , 2007, 35, 1091-1098.	0.4	243
156	An experimental study of the influence of individual participant characteristics on formal consensus development. <i>International Journal of Technology Assessment in Health Care</i> , 2007, 23, 108-115.	0.2	4
157	Statistically significant papers in psychiatry were cited more often than others. <i>Journal of Clinical Epidemiology</i> , 2007, 60, 939-946.	2.4	70
158	Multiple imputation: current perspectives. <i>Statistical Methods in Medical Research</i> , 2007, 16, 199-218.	0.7	336
159	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
160	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
161	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
162	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

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163	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
164	The relationship between quality of research and citation frequency. <i>BMC Medical Research Methodology</i> , 2006, 6, 42.	1.4	128
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