

Leila Doshmangir

List of Publications by Year in descending order

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Version: 2024-02-01

65
papers

7,202
citations

304743

22
h-index

118850

62
g-index

84
all docs

84
docs citations

84
times ranked

7538
citing authors

#	ARTICLE	IF	CITATIONS
1	Global burden of 87 risk factors in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2020, 396, 1223-1249.	13.7	3,928
2	Global age-sex-specific fertility, mortality, healthy life expectancy (HALE), and population estimates in 204 countries and territories, 1950–2019: a comprehensive demographic analysis for the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2020, 396, 1160-1203.	13.7	890
3	Five insights from the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2020, 396, 1135-1159.	13.7	335
4	Measuring universal health coverage based on an index of effective coverage of health services in 204 countries and territories, 1990–2019: a systematic analysis for the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2020, 396, 1250-1284.	13.7	330
5	Global, regional, and national progress towards Sustainable Development Goal 3.2 for neonatal and child health: all-cause and cause-specific mortality findings from the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2021, 398, 870-905.	13.7	229
6	Mapping 123 million neonatal, infant and child deaths between 2000 and 2017. <i>Nature</i> , 2019, 574, 353-358.	27.8	161
7	Iran in transition. <i>Lancet, The</i> , 2019, 393, 1984-2005.	13.7	131
8	Health system performance in Iran: a systematic analysis for the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2022, 399, 1625-1645.	13.7	119
9	Measuring the availability of human resources for health and its relationship to universal health coverage for 204 countries and territories from 1990 to 2019: a systematic analysis for the Global Burden of Disease Study 2019. <i>Lancet, The</i> , 2022, 399, 2129-2154.	13.7	91
10	Health sector spending and spending on HIV/AIDS, tuberculosis, and malaria, and development assistance for health: progress towards Sustainable Development Goal 3. <i>Lancet, The</i> , 2020, 396, 693-724.	13.7	87
11	Implementing family physician programme in rural Iran: exploring the role of an existing primary health care network. <i>Family Practice</i> , 2013, 30, 551-559.	1.9	83
12	Tracking development assistance for health and for COVID-19: a review of development assistance, government, out-of-pocket, and other private spending on health for 204 countries and territories, 1990–2050. <i>Lancet, The</i> , 2021, 398, 1317-1343.	13.7	79
13	Anemia prevalence in women of reproductive age in low- and middle-income countries between 2000 and 2018. <i>Nature Medicine</i> , 2021, 27, 1761-1782.	30.7	60
14	Public-private partnerships in primary health care: a scoping review. <i>BMC Health Services Research</i> , 2021, 21, 4.	2.2	42
15	So Near, So Far: Four Decades of Health Policy Reforms in Iran, Achievements and Challenges. <i>Archives of Iranian Medicine</i> , 2019, 22, 592-605.	0.6	40
16	Iran health insurance system in transition: equity concerns and steps to achieve universal health coverage. <i>International Journal for Equity in Health</i> , 2021, 20, 37.	3.5	39
17	Policy Options to Reduce Fragmentation in the Pooling of Health Insurance Funds in Iran. <i>International Journal of Health Policy and Management</i> , 2016, 5, 253-258.	0.9	39
18	Factors Influencing Donations to Human Milk Bank: A Systematic Review of Facilitators and Barriers. <i>Breastfeeding Medicine</i> , 2019, 14, 298-306.	1.7	38

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19	Health Financing Consequences of Implementing Health Transformation Plan in Iran: Achievements and Challenges. <i>International Journal of Health Policy and Management</i> , 2019, 8, 384-386.	0.9	33
20	The experience of purchaserâ€“provider split in the implementation of family physician and rural health insurance in Iran: an institutional approach. <i>Health Policy and Planning</i> , 2015, 30, 1261-1271.	2.7	29
21	Policy analysis of the Iranian Health Transformation Plan in primary healthcare. <i>BMC Health Services Research</i> , 2019, 19, 670.	2.2	28
22	Determining factors in the retention of physicians in rural and underdeveloped areas: a systematic review. <i>BMC Family Practice</i> , 2020, 21, 216.	2.9	25
23	Opening the Black Box: The Experiences and Lessons From the Public Hospitals Autonomy Policy in Iran. <i>Archives of Iranian Medicine</i> , 2015, 18, 416-24.	0.6	25
24	The experience of implementing the board of trusteesâ€™ policy in teaching hospitals in Iran: an example of health system decentralization. <i>International Journal of Health Policy and Management</i> , 2015, 4, 207-216.	0.9	21
25	An application of the theory of planned behavior to self-care in patients with hypertension. <i>BMC Public Health</i> , 2020, 20, 1290.	2.9	20
26	Determinants of catastrophic health expenditures in Iran: a systematic review and meta-analysis. <i>Cost Effectiveness and Resource Allocation</i> , 2020, 18, 17.	1.5	19
27	Mapping Research Trends of Universal Health Coverage From 1990 to 2019: Bibliometric Analysis. <i>JMIR Public Health and Surveillance</i> , 2021, 7, e24569.	2.6	17
28	Seven Decades of Primary Healthcare during Various Development Plans in Iran: A Historical Review. <i>Archives of Iranian Medicine</i> , 2020, 23, 338-352.	0.6	17
29	The Incidence, Nature and Consequences of Adverse Events in Iranian Hospitals. <i>Archives of Iranian Medicine</i> , 2015, 18, 811-5.	0.6	17
30	Setting health care services tariffs in Iran: half a century quest for a window of opportunity. <i>International Journal for Equity in Health</i> , 2020, 19, 112.	3.5	16
31	Incidence of Catastrophic Health Expenditure and Its Determinants in Cancer Patients: A Systematic Review and Meta-analysis. <i>Applied Health Economics and Health Policy</i> , 2021, 19, 839-855.	2.1	16
32	Fail to prepare and you can prepare to fail: the experience of financing path changes in teaching hospitals in Iran. <i>BMC Health Services Research</i> , 2016, 16, 138.	2.2	14
33	Combining health insurance funds in a fragmented context: what kind of challenges should be considered?. <i>BMC Health Services Research</i> , 2020, 20, 26.	2.2	14
34	Engagement of non-governmental organisations in moving towards universal health coverage: a scoping review. <i>Globalization and Health</i> , 2021, 17, 129.	4.9	12
35	Stakeholders analysis of merging social health insurance funds in Iran: what kind of interests they may gain or lose?. <i>International Journal of Health Planning and Management</i> , 2019, 34, 157-176.	1.7	11
36	Monitoring Process Barriers and Enablers Towards Universal Health Coverage Within the Sustainable Development Goals: A Systematic Review and Content Analysis. <i>ClinicoEconomics and Outcomes Research</i> , 2020, Volume 12, 459-472.	1.9	11

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37	Assessment of medical equipment maintenance management: proposed checklist using Iranian experience. <i>BioMedical Engineering OnLine</i> , 2021, 20, 49.	2.7	11
38	Impact of rural Family Physician programme on maternal and child health indicators in Iran: an interrupted time series analysis. <i>BMJ Open</i> , 2019, 9, e021761.	1.9	10
39	Informal payments for inpatient health care in post-health transformation plan period: evidence from Iran. <i>BMC Public Health</i> , 2020, 20, 539.	2.9	10
40	Effects of Targeted Subsidies Policy on Health Behavior in Iranian Households: A Qualitative Study. <i>Iranian Journal of Public Health</i> , 2015, 44, 570-9.	0.5	10
41	Stewardship as a Fundamental Challenge in Strategic Purchasing of Health Services: A Case Study of Iran. <i>Value in Health Regional Issues</i> , 2019, 18, 54-58.	1.2	9
42	Preventing and controlling water pipe smoking: a systematic review of management interventions. <i>BMC Public Health</i> , 2021, 21, 344.	2.9	8
43	A roadmap for strengthening evidence-informed health policy-making in Iran: protocol for a research programme. <i>Health Research Policy and Systems</i> , 2019, 17, 50.	2.8	7
44	Incidence rate and financial burden of medical errors and policy interventions to address them: a multi-method study protocol. <i>Health Services and Outcomes Research Methodology</i> , 2022, 22, 244-252.	1.8	6
45	Infrastructures Required for the Expansion of Family Physician Program to Urban Settings in Iran. <i>Archives of Iranian Medicine</i> , 2017, 20, 589-597.	0.6	6
46	Prohibiting physicians' dual practice in Iran: Policy options for implementation. <i>International Journal of Health Planning and Management</i> , 2018, 33, e711.	1.7	5
47	<p>Future Development Through the Past: Pathology of the Financing Dimension of Iranâ€™s Health Transformation Plan<p>. <i>ClinicoEconomics and Outcomes Research</i> , 2020, Volume 12, 345-354.	1.9	5
48	Capacity Building to Improve Hospital Managersâ€™ Performance in West Asia. <i>International Journal of Health Policy and Management</i> , 2019, 8, 319-320.	0.9	5
49	Payment system of urban family physician programme in the Islamic Republic of Iran: is it appropriate?. <i>Eastern Mediterranean Health Journal</i> , 2018, 24, 611-617.	0.8	5
50	Policy options for strengthening evidence-informed health policy-making in Iran: overall SASHA project findings. <i>Health Research Policy and Systems</i> , 2022, 20, 10.	2.8	5
51	Strategies for utilisation management of hospital services: a systematic review of interventions. <i>Globalization and Health</i> , 2022, 18, .	4.9	4
52	A scoping review of public hospitals autonomy in Iran: from budgetary hospitals to corporate hospitals. <i>BMC Health Services Research</i> , 2021, 21, 662.	2.2	3
53	The Analysis of the Causes of Hospitalized Patientsâ€™ Medical Records Deductions. <i>Taâ€™1ËvÄkr-i SalÄmat</i> , 2020, 11, 172-189.	0.1	3
54	Rethinking health services operations to embrace patient experience of healthcare journey. <i>International Journal of Health Planning and Management</i> , 2021, 36, 2020-2029.	1.7	2

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55	Individual and institutional capacity-building for evidence-informed health policy-making in Iran: a mix of local and global evidence. <i>Health Research Policy and Systems</i> , 2022, 20, 18.	2.8	2
56	Interventions for adapting health care providers to new situations in the workplace during the COVID-19 pandemic: A scoping review for developing a policy brief. <i>World Medical and Health Policy</i> , 2022, 14, 34-46.	1.6	2
57	Developing Framework and Strategies for Capacity Building to Apply Evidence-Informed Health Policy-Making in Iran: Mixed Methods Study of SAHSHA Project. <i>International Journal of Health Policy and Management</i> , 2021, , .	0.9	1
58	Challenges and Strategies of Implementation Rural Family Physician in Iran: A Qualitative Study. <i>Taa'at-i Salamat</i> , 2020, 11, 62-73.	0.1	1
59	Lessons Learned from Conducting a National Health Survey (Iran's Multiple Indicators Demographic) Tj ETQq1 1 0.784314 rgBT /Over 0.5	0.5	1
60	What is going on in the future for evidence-informed health policymaking in Iran?. <i>Journal of Evidence-Based Medicine</i> , 2021, 14, 285-290.	1.8	1
61	PROTOCOL: Systematic review of methods to reduce risk of bias in knowledge translation interventional studies in health-related issues. <i>Campbell Systematic Reviews</i> , 2022, 18, .	3.0	1
62	Experience of Primary Health Care Workers'™ Involvement in Response to Arasbaran Twin Earthquakes in 2012. <i>Health in Emergencies & Disasters Quarterly</i> , 2020, 5, 79-90.	0.1	0
63	Developing a prioritisation framework for patients in need of coronary artery angiography. <i>BMC Public Health</i> , 2021, 21, 1997.	2.9	0
64	The Status of Health Promoting Lifestyle among Students of Tabriz, Northwestern Iran. <i>Iranian Journal of Public Health</i> , 2018, 47, 1971-1972.	0.5	0
65	Incidence of symptomatic COVID-19 in close contacts of patients after discharge from hospital. <i>BMC Infectious Diseases</i> , 2022, 22, 293.	2.9	0