

Eleonora Carlesso

List of Publications by Year in descending order

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Version: 2024-02-01

79
papers

7,914
citations

61984

43
h-index

102487

66
g-index

80
all docs

80
docs citations

80
times ranked

6422
citing authors

| # | ARTICLE | IF | CITATIONS |
|----|--|-----|-----------|
| 1 | Quantification of Recirculation During Veno-Venous Extracorporeal Membrane Oxygenation. ASAIO Journal, 2021, Publish Ahead of Print, . | 1.6 | 4 |
| 2 | Prone position in intubated, mechanically ventilated patients with COVID-19: a multi-centric study of more than 1000 patients. Critical Care, 2021, 25, 128. | 5.8 | 157 |
| 3 | Alkaline Liquid Ventilation of the Membrane Lung for Extracorporeal Carbon Dioxide Removal (ECCO2R): In Vitro Study. Membranes, 2021, 11, 464. | 3.0 | 2 |
| 4 | Pulmonary volume-feedback and ventilatory pattern after bilateral lung transplantation using neurally adjusted ventilatory assist ventilation. British Journal of Anaesthesia, 2021, 127, 143-152. | 3.4 | 7 |
| 5 | Sharing Mechanical Ventilator: In Vitro Evaluation of Circuit Cross-Flows and Patient Interactions. Membranes, 2021, 11, 547. | 3.0 | 2 |
| 6 | Low noncarbonic buffer power amplifies acute respiratory acid-base disorders in patients with sepsis: an in vitro study. Journal of Applied Physiology, 2021, 131, 464-473. | 2.5 | 15 |
| 7 | Ventilation During Veno-Venous Extracorporeal Membrane Oxygenation. , 2021, , 741-750. | | 0 |
| 8 | Time course of risk factors associated with mortality of 1260 critically ill patients with COVID-19 admitted to 24 Italian intensive care units. Intensive Care Medicine, 2021, 47, 995-1008. | 8.2 | 16 |
| 9 | Time-Course of Physiologic Variables During Extracorporeal Membrane Oxygenation and Outcome of Severe Acute Respiratory Distress Syndrome. ASAIO Journal, 2020, 66, 663-670. | 1.6 | 9 |
| 10 | Risk Factors Associated With Mortality Among Patients With COVID-19 in Intensive Care Units in Lombardy, Italy. JAMA Internal Medicine, 2020, 180, 1345. | 5.1 | 1,165 |
| 11 | Key Role of Respiratory Quotient to Reduce the Occurrence of Hypoxemia During Extracorporeal Gas Exchange: A Theoretical Analysis*. Critical Care Medicine, 2020, 48, e1327-e1331. | 0.9 | 10 |
| 12 | Increasing support by nasal high flow acutely modifies the ROX index in hypoxemic patients: A physiologic study. Journal of Critical Care, 2019, 53, 183-185. | 2.2 | 29 |
| 13 | Extracorporeal Membrane Oxygenation for Pulmonary Support. , 2019, , 1183-1190.e2. | | 3 |
| 14 | Nasal High Flow Delivered within the Helmet: A New Noninvasive Respiratory Support. American Journal of Respiratory and Critical Care Medicine, 2019, 199, 115-117. | 5.6 | 14 |
| 15 | Impact of flow and temperature on patient comfort during respiratory support by high-flow nasal cannula. Critical Care, 2018, 22, 120. | 5.8 | 88 |
| 16 | Opening pressures and atelectrauma in acute respiratory distress syndrome. Intensive Care Medicine, 2017, 43, 603-611. | 8.2 | 96 |
| 17 | Optimum support by high-flow nasal cannula in acute hypoxemic respiratory failure: effects of increasing flow rates. Intensive Care Medicine, 2017, 43, 1453-1463. | 8.2 | 180 |
| 18 | Airway driving pressure and lung stress in ARDS patients. Critical Care, 2016, 20, 276. | 5.8 | 129 |

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|----|---|-----|-----------|
| 19 | Ventilator-related causes of lung injury: the mechanical power. Intensive Care Medicine, 2016, 42, 1567-1575. | 8.2 | 586 |
| 20 | A mathematical model of oxygenation during venovenous extracorporeal membrane oxygenation support. Journal of Critical Care, 2016, 36, 178-186. | 2.2 | 28 |
| 21 | Reply: Different Definitions of Lung Recruitment by Computed Tomography Scan. American Journal of Respiratory and Critical Care Medicine, 2016, 193, 1315-1316. | 5.6 | 1 |
| 22 | Effect of body mass index in acute respiratory distress syndrome. British Journal of Anaesthesia, 2016, 116, 113-121. | 3.4 | 34 |
| 23 | Lung Recruitment Assessed by Respiratory Mechanics and Computed Tomography in Patients with Acute Respiratory Distress Syndrome. What Is the Relationship?. American Journal of Respiratory and Critical Care Medicine, 2016, 193, 1254-1263. | 5.6 | 111 |
| 24 | Lung inhomogeneities, inflation and [¹⁸ F]2-fluoro-2-deoxy-D-glucose uptake rate in acute respiratory distress syndrome. European Respiratory Journal, 2016, 47, 233-242. | 6.7 | 48 |
| 25 | Is airway driving pressure a good predictor of lung stress during mechanical ventilation for ARDS?. , 2016, , . | | 0 |
| 26 | Physiology versus evidence-based guidance for critical care practice. Critical Care, 2015, 19, S7. | 5.8 | 5 |
| 27 | Lung Inhomogeneities and Time Course of Ventilator-induced Mechanical Injuries. Anesthesiology, 2015, 123, 618-627. | 2.5 | 86 |
| 28 | Lung anatomy, energy load, and ventilator-induced lung injury. Intensive Care Medicine Experimental, 2015, 3, 34. | 1.9 | 84 |
| 29 | Lung Recruitability Is Better Estimated According to the Berlin Definition of Acute Respiratory Distress Syndrome at Standard 5 cm H ₂ O Rather Than Higher Positive End-Expiratory Pressure. Critical Care Medicine, 2015, 43, 781-790. | 0.9 | 59 |
| 30 | Selecting the "right" positive end-expiratory pressure level. Current Opinion in Critical Care, 2015, 21, 50-57. | 3.2 | 55 |
| 31 | Electrolyte shifts across the artificial lung in patients on extracorporeal membrane oxygenation: Interdependence between partial pressure of carbon dioxide and strong ion difference. Journal of Critical Care, 2015, 30, 2-6. | 2.2 | 33 |
| 32 | Extracorporeal membrane oxygenation. , 2015, , 131-138. | | 0 |
| 33 | Acute respiratory failure and acute respiratory distress syndrome. , 2015, , . | | 0 |
| 34 | Lung Inhomogeneity in Patients with Acute Respiratory Distress Syndrome. American Journal of Respiratory and Critical Care Medicine, 2014, 189, 149-158. | 5.6 | 277 |
| 35 | Bedside Selection of Positive End-Expiratory Pressure in Mild, Moderate, and Severe Acute Respiratory Distress Syndrome*. Critical Care Medicine, 2014, 42, 252-264. | 0.9 | 138 |
| 36 | Compressive Forces and Computed Tomography-derived Positive End-expiratory Pressure in Acute Respiratory Distress Syndrome. Anesthesiology, 2014, 121, 572-581. | 2.5 | 58 |

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|----|--|-----|-----------|
| 37 | Time to reach a new steady state after changes of positive end expiratory pressure. Intensive Care Medicine, 2013, 39, 1377-1385. | 8.2 | 53 |
| 38 | Prone Position in Acute Respiratory Distress Syndrome. Rationale, Indications, and Limits. American Journal of Respiratory and Critical Care Medicine, 2013, 188, 1286-1293. | 5.6 | 349 |
| 39 | Supporting hemodynamics: what should we target? What treatments should we use?. Critical Care, 2013, 17, S4. | 5.8 | 23 |
| 40 | Body position changes redistribute lung computed-tomographic density in patients with acute respiratory failure: impact and clinical fallout through the following 20 years. Intensive Care Medicine, 2013, 39, 1909-1915. | 8.2 | 80 |
| 41 | Limits of normality of quantitative thoracic CT analysis. Critical Care, 2013, 17, R93. | 5.8 | 61 |
| 42 | Towards ultraprotective mechanical ventilation. Current Opinion in Anaesthesiology, 2012, 25, 141-147. | 2.0 | 49 |
| 43 | Stress and strain within the lung. Current Opinion in Critical Care, 2012, 18, 42-47. | 3.2 | 111 |
| 44 | The Hamburger Effect: Beyond Chloride Shift. , 2012, , . | | 1 |
| 45 | In vivo conditioning of acid-base equilibrium by crystalloid solutions: an experimental study on pigs. Intensive Care Medicine, 2012, 38, 686-693. | 8.2 | 41 |
| 46 | Clinical review: Extracorporeal membrane oxygenation. Critical Care, 2011, 15, 243. | 5.8 | 160 |
| 47 | Assessing gas exchange in acute lung injury/acute respiratory distress syndrome: diagnostic techniques and prognostic relevance. Current Opinion in Critical Care, 2011, 17, 18-23. | 3.2 | 17 |
| 48 | Recruitability, recruitment, and tidal volume interactions: Is biologically variable ventilation a possible answer?*. Critical Care Medicine, 2011, 39, 1839-1840. | 0.9 | 0 |
| 49 | The rule regulating pH changes during crystalloid infusion. Intensive Care Medicine, 2011, 37, 461-468. | 8.2 | 576 |
| 50 | Time to generate ventilator-induced lung injury among mammals with healthy lungs: a unifying hypothesis. Intensive Care Medicine, 2011, 37, 1913-1920. | 8.2 | 54 |
| 51 | Chapter 62 Acute respiratory failure and acute respiratory distress syndrome. , 2011, , . | | 0 |
| 52 | Ventilator-induced lung injury: The anatomical and physiological framework. Critical Care Medicine, 2010, 38, S539-S548. | 0.9 | 201 |
| 53 | Positive end-expiratory pressure. Current Opinion in Critical Care, 2010, 16, 39-44. | 3.2 | 84 |
| 54 | Reply to Agrafiotis. Intensive Care Medicine, 2010, 36, 901-902. | 8.2 | 0 |

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|----|---|-----|-----------|
| 55 | Stress Index: Is The Airway Pressure A Good Surrogate Of The Transpulmonary Pressure?. , 2010, , . | | 0 |
| 56 | Lung Opening and Closing during Ventilation of Acute Respiratory Distress Syndrome. American Journal of Respiratory and Critical Care Medicine, 2010, 181, 578-586. | 5.6 | 287 |
| 57 | Acute Respiratory Failure. , 2010, , 231-240. | | 1 |
| 58 | Relationship between gas exchange response to prone position and lung recruitability during acute respiratory failure. Intensive Care Medicine, 2009, 35, 1011-1017. | 8.2 | 61 |
| 59 | Dilutional acidosis: where do the protons come from?. Intensive Care Medicine, 2009, 35, 2033-2043. | 8.2 | 27 |
| 60 | The Evolution of Imaging in Respiratory Dysfunction Failure. , 2009, , 195-206. | | 0 |
| 61 | Lung Stress and Strain during Mechanical Ventilation for Acute Respiratory Distress Syndrome. American Journal of Respiratory and Critical Care Medicine, 2008, 178, 346-355. | 5.6 | 633 |
| 62 | Anatomical and functional intrapulmonary shunt in acute respiratory distress syndrome*. Critical Care Medicine, 2008, 36, 669-675. | 0.9 | 102 |
| 63 | Mechanical Ventilation in Acute Respiratory Distress Syndrome. , 2008, , 191-203. | | 0 |
| 64 | The Role of CT-scan Studies for the Diagnosis and Therapy of Acute Respiratory Distress Syndrome. Clinics in Chest Medicine, 2006, 27, 559-570. | 2.1 | 90 |
| 65 | Chest wall mechanics during pressure support ventilation. Critical Care, 2006, 10, R54. | 5.8 | 38 |
| 66 | Strong ion difference in urine: new perspectives in acid-base assessment. Critical Care, 2006, 10, 137. | 5.8 | 39 |
| 67 | Effects of thoraco-pelvic supports during prone position in patients with acute lung injury/acute respiratory distress syndrome: a physiological study. Critical Care, 2006, 10, R87. | 5.8 | 60 |
| 68 | Radiological Imaging in Acute Lung Injury and Acute Respiratory Distress Syndrome. Seminars in Respiratory and Critical Care Medicine, 2006, 27, 404-415. | 2.1 | 47 |
| 69 | Prone position delays the progression of ventilator-induced lung injury in rats: Does lung strain distribution play a role?*. Critical Care Medicine, 2005, 33, 361-367. | 0.9 | 159 |
| 70 | How to ventilate patients with acute lung injury and acute respiratory distress syndrome. Current Opinion in Critical Care, 2005, 11, 69-76. | 3.2 | 54 |
| 71 | CT Ventilation Imaging. Lung Biology in Health and Disease, 2005, , 33-61. | 0.1 | 4 |
| 72 | An Increase of Abdominal Pressure Increases Pulmonary Edema in Oleic Acid-induced Lung Injury. American Journal of Respiratory and Critical Care Medicine, 2004, 169, 534-541. | 5.6 | 185 |

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|----|---|-----|-----------|
| 73 | Bench-to-bedside review: chest wall elastance in acute lung injury/acute respiratory distress syndrome patients. <i>Critical Care</i> , 2004, 8, 350. | 5.8 | 181 |
| 74 | Acute respiratory distress syndrome, the critical care paradigm: what we learned and what we forgot. <i>Current Opinion in Critical Care</i> , 2004, 10, 272-278. | 3.2 | 27 |
| 75 | Noninvasive positive pressure ventilation delivered by helmet vs. standard face mask. <i>Intensive Care Medicine</i> , 2003, 29, 1671-1679. | 8.2 | 118 |
| 76 | Intra-abdominal pressure may be decreased non-invasively by continuous negative extra-abdominal pressure (NEXAP). <i>Intensive Care Medicine</i> , 2003, 29, 2063-2067. | 8.2 | 46 |
| 77 | Physiologic rationale for ventilator setting in acute lung injury/acute respiratory distress syndrome patients. <i>Critical Care Medicine</i> , 2003, 31, S300-S304. | 0.9 | 74 |
| 78 | Decrease in Paco ₂ with prone position is predictive of improved outcome in acute respiratory distress syndrome*. <i>Critical Care Medicine</i> , 2003, 31, 2727-2733. | 0.9 | 247 |
| 79 | Estimation of end-expiratory lung volume variations by optoelectronic plethysmography. <i>Critical Care Medicine</i> , 2001, 29, 1807-1811. | 0.9 | 45 |