

Available online at www.sciencedirect.com

ScienceDirect

journal homepage: www.elsevier.com/locate/burns

A bibliometric analysis of the 100 most influential papers in burns

C.W. Joyce^{a,*}, J.C. Kelly^b, C. Sugrue^a

^a University Hospital Galway, Ireland

^b Cappagh National Orthopaedic Hospital, Dublin, Ireland

ARTICLE INFO

Article history:

Accepted 21 October 2013

Keywords:

Bibliometric analysis

Citation

Most cited

Top 100

ABSTRACT

The importance of a published paper to a particular area is reflected in the quantity of citations obtained from peers. In burns, it is unknown which papers have been the most influential on this specialty. The purpose of our study was to identify the 100 most cited papers in burns and to analyze their characteristics. Twenty-seven journals were chosen for analysis. These included high impact factor scientific journals and journals dedicated to burns and trauma. Only twelve of these journals contributed to the 100 most cited papers in burns and we analyzed each paper individually looking at its subject matter, authorship, article type, institution, country and year of publication. Our citation analysis revealed an interesting mix of clinical and scientific papers that documents the key landmarks in burn care over the past 66 years.

© 2013 Elsevier Ltd and ISBI. All rights reserved.

1. Introduction

The area of burns has produced a large volume of important clinical and scientific papers over the years that can be found in prestigious high impact factor journals. These papers are spread over many different journals making it difficult to establish which of them has been the most influential in burns. The importance of a published body of work to a particular area is echoed in the quantity of citations obtained from peers. A citation can be described as an abbreviated alphanumeric expression contained in the body of an intellectual work that represents an entry in the references section of this work for the purpose of recognizing the contributions of the works of others to the topic of discussion in which the citation appears. The principle purpose of a citation is to acknowledge other authors for important valuable work that they have previously published. The reputation of an author can be proportional to the number of citations his or her published work receives. For scientific journals, the number of citations is hugely important too. The

impact factor (IF) of a journal is based on the number of citations that its published articles obtain. The IF of an academic journal is a measure reflecting the average number of citations of recent articles published in the journal [1–3]. The impact factor is calculated annually and it is employed as a proxy for the relative importance of an academic journal within its field. The higher the impact factor the journal secures, the more important it is deemed. Despite several biases in utilizing the impact factor system, it is still viewed as the leading method for judging the merits of specific journals [4]. The impact factor is calculated for a given year, by finding the average number of citations received per article published in that journal during the two preceding years. Citation analysis is a bibliometric process that describes the means of analysing the citation history of published papers [5].

Several specialties have previously reported on the most cited papers relating to their specific area [6,7]. These include general surgery, plastic surgery, hand surgery, otolaryngology and orthopaedics [5,8–14]. These papers are useful in providing a better understanding of the important attributes that a piece of research requires for it to obtain enough citations for it

* Corresponding author. Tel.: +353 876815514.

to be perceived as a seminal paper. There has not been a bibliometric analysis of the most cited papers in burns published before. We have performed a citation analysis on the most influential papers to date in burns, based on the number of citations that they have received.

2. Materials and methods

Twenty-seven international journals were included in our bibliometric analysis (Table 1) but only 12 of these contributed to our top 100 list. The journals chosen were relatively high impact factor scientific journals that are well renowned internationally. We also included trauma and surgery journals for articles that dealt with burns. The two authors chose specialized burns journals and journals that dealt with emergency burn care as well as post-burn surgery. We felt that these would be the highest-yielding journals for burn articles and the ones most likely to produce the most cited papers in burns.

The database of the Science Citation Index (SCI) of the Institute for Scientific Information (ISI) was used to identify the most cited papers in burns from 1945 until 2013 in all of these publications [15]. The SCI is an index of citations produced by the ISI and is made available online through the Web of Science database, a part of the Web of Knowledge collection of databases.

By utilizing this electronic database, we were able to identify, by means of a customized filter, the most frequently cited papers in burns from 1945 until 2013 in all of our chosen publications. The specific terms in the customized filters included “burn”, “thermal”, “smoke inhalation”, “electrical”

and “chemical”. The filtered articles were analyzed and any papers not pertaining to burn care were excluded from our study.

The 100 most cited papers were selected for further examination. Using a method previously described by Paladugu et al. [8], we analyzed each paper individually looking at its subject matter, authorship, article type, institution, country, level of evidence and year of publication. The level of evidence of each paper was sourced from the Oxford Centre for Evidence-based Medicine [16].

3. Results

The 100 articles are listed in Table 2 and are in descending order, according to the number of citations that they have received. The number of total citations per article ranged from 746 to 104. The mean number of citations per paper was 178. The most cited paper, by Gallico et al., had a total of 746 citations whereas the 100th paper had 104 citations [17,18]. The most recent paper came from 2007 and it was cited 201 times [19]. The oldest paper included in the top 100 was from 1947 and has been cited 151 times to date [20]. The 1980s contributed the most papers of any decade to the top 100 burns papers (Table 3) followed by the 1990s.

Eighty-eight of the top 100 papers were clinical papers and 12 were experimental. The type of clinical study and level of evidence can be seen in Table 4. Level 2 prognostic studies contributed the most to our most cited list of papers in burns.

Of the 27 international journals included in our bibliometric search, only 12 provided papers to our top 100. These included high impact factor journals such as the New England Journal of Medicine and Lancet as well as specialty journals such as Burns and Plastic and Reconstructive Surgery. The Annals of Surgery contributed the most number of papers to our top 100 list with 37 (Table 1).

Nine countries were responsible for producing all of the 100 papers in our citation analysis (Table 5). The United States produced the vast majority of papers (78%) followed by the United Kingdom (10%). The University of Texas Galveston, Texas is the institution that produced the most number of papers to our top 100 list (Table 6). Massachusetts General Hospital in Boston and the Institute of Surgical Research, Fort Sam, Houston, Texas also contributed considerably. Of the 100 articles, 54 reported clinical experience, 37 reported basic science and 9 were clinical reviews. Twenty-three papers focused on infections post-burns. Seventeen papers were dedicated to nutrition and fluids after burn injury whilst 15 papers described the coverage of burn wounds with autologous epithelium or artificial skin. The use of silver on burn wounds was the subject of seven papers in the top 100.

Fifteen authors were first-named authors on more than one paper in the most-cited papers (Table 7). Doctor Herndon wrote four papers [21–24] whilst Doctors Alexander [25–27], Burke [28–30] and Deitch [31–33] were the first name authors on three papers each. A further eight authors wrote two papers each.

The most cited paper [17] in the top 100 describes the coverage of burn wounds with an autologous cultured human epithelium. This paper from 1984 was cited 746 times. The

Table 1 – The journals and the number of papers each journal contributed to the top 100 papers.

| Journal | Number of papers in top 100 |
|---|-----------------------------|
| <i>Annals of Surgery</i> | 34 |
| <i>Journal of Trauma, Injury, Infection and Critical Care</i> | 15 |
| <i>Lancet</i> | 11 |
| <i>Burns</i> | 9 |
| <i>New England Journal of Medicine</i> | 8 |
| <i>Archives of Surgery</i> | 8 |
| <i>Surgery</i> | 5 |
| <i>Critical Care Medicine</i> | 4 |
| <i>Journal of Burn Care and Research</i> | 2 |
| <i>British Journal of Surgery</i> | 2 |
| <i>Plastic and Reconstructive Surgery</i> | 1 |
| <i>British Journal of Plastic Surgery</i> | 1 |

These journals were included in our citation search but did not contribute to the top 100: *Journal of Plastic, Reconstructive and Aesthetic Surgery*, *American Journal of Surgery*, *Annals of Plastic Surgery*, *Injury*; *International Journal of the Care of the Injured*, *Journal of Burn Care Research*, *American Journal of the Medical Sciences*, *American Journal of Medicine*, *American Journal of Emergency Medicine*, *Annals of Internal Medicine*, *American Journal of Respiratory and Critical Care Medicine*, *Annals of Emergency Medicine*, *Intensive Care Medicine*, *Scandinavian Journal of Plastic and Reconstructive Surgery and Hand Surgery*, *American Journal of the Medical Sciences*, *Clinics in Plastic Surgery*.

Table 2 – The 100 most cited papers in burns.

| Rank | Author | No. of citations | Rank | Author | No. of citations | Rank | Author | No. of citations |
|------|-----------------------|------------------|------|---------------------|------------------|------|---------------------|------------------|
| 1 | Gallico, GG [17] | 746 | 34 | Till, GO [65] | 174 | 67 | Madden, MR [93] | 130 |
| 2 | Burke, JF [28] | 568 | 35 | Hefton, JM [66] | 172 | 68 | Cannon, JG [94] | 129 |
| 3 | Sevitt, S [47] | 563 | 36 | Wilmore, DW [67] | 166 | 69 | Drost, AC [95] | 129 |
| 4 | O' Connor, NE [48] | 435 | 37 | Hinton, P [68] | 166 | 70 | Sakurai, Y [96] | 127 |
| 5 | Moyer, CA [34] | 317 | 38 | Mawjima, K [69] | 166 | 71 | Goodall, M [97] | 126 |
| 6 | Heimbach, D [49] | 311 | 39 | Wolfe, RR [70] | 161 | 72 | Rodriguez, JL [98] | 122 |
| 7 | Wainwright, DJ [36] | 295 | 40 | Gore, DC [71] | 160 | 73 | Loirat, P [99] | 122 |
| 8 | Mochizuki, H [35] | 283 | 41 | Alexander, JW [26] | 158 | 74 | Tompkins, RG [100] | 122 |
| 9 | Wolfe, RR [50] | 279 | 42 | Arons, MS [40] | 161 | 75 | Boyce, ST [101] | 122 |
| 10 | Alexander, JW [25] | 192 | 43 | Herndon, DN [23] | 156 | 76 | Bull, JP [102] | 121 |
| 11 | Fox, CL [51] | 272 | 44 | Wilmore, DW [72] | 156 | 77 | McHugh, GL [103] | 120 |
| 12 | Shirani, KZ [52] | 260 | 45 | Lanser, ME [73] | 151 | 78 | Yin, HQ [104] | 120 |
| 13 | Herndon, DN [21] | 255 | 46 | Cope, O [20] | 151 | 79 | Jones, WG [105] | 118 |
| 14 | Ryan, CM [53] | 252 | 47 | Burke, JF [30] | 151 | 80 | Becker, RA [106] | 118 |
| 15 | Parrybillings, M [54] | 249 | 48 | Wischmeyer, PE [74] | 151 | 81 | Winchurch, RA [107] | 116 |
| 16 | Burke, JF [29] | 240 | 49 | Hart, DW [75] | 149 | 82 | Moyer, CA [108] | 114 |
| 17 | Cuono, C [39] | 239 | 50 | Thompson, PB [76] | 148 | 83 | Smith, DL [41] | 112 |
| 18 | Klasen, HJ [55] | 230 | 51 | Goldhill, DR [77] | 147 | 84 | Curreri, PW [109] | 112 |
| 19 | Jackson, DM [37] | 229 | 52 | Wolf, SE [78] | 146 | 85 | Deitch, EA [33] | 111 |
| 20 | Ziegler, TR [56] | 222 | 53 | Demling, RH [79] | 142 | 86 | Herndon, DN [24] | 111 |
| 21 | Deitch, EA [31] | 221 | 54 | Poon, VKM [80] | 141 | 87 | Ferrando, AA [110] | 111 |
| 22 | Wood, JJ [57] | 215 | 55 | Saito, H [81] | 141 | 88 | Gilpin, DA [111] | 111 |
| 23 | Deitch, EA [32] | 209 | 56 | Moncrief, JA [82] | 140 | 89 | Nguyen, TT [112] | 110 |
| 24 | Allison, SP [58] | 208 | 57 | Jones, I [83] | 140 | 90 | Arturson, G [113] | 110 |
| 25 | Gore, DC [59] | 202 | 58 | Vaughan, GM [84] | 136 | 91 | Zawacki, BE [114] | 110 |
| 26 | Atiyeh, BS [19] | 201 | 59 | Ivy, ME [85] | 135 | 92 | Alexander, JW [27] | 109 |
| 27 | Cuono, CB [60] | 197 | 60 | Bull, JP [86] | 135 | 93 | Bruck, HM [115] | 109 |
| 28 | Herndon, DN [22] | 192 | 61 | Engrav, LH [87] | 134 | 94 | Boyce, ST [116] | 108 |
| 29 | Klasen, HJ [61] | 190 | 62 | Novick, M [88] | 134 | 95 | Pietsch, J [117] | 108 |
| 30 | Deluca, M [62] | 187 | 63 | Kien, CL [89] | 132 | 96 | Hart, DW [118] | 107 |
| 31 | Haleblian, PH [63] | 185 | 64 | Germain, L [90] | 131 | 97 | Drost, AC [119] | 107 |
| 32 | Evans, EI [38] | 175 | 65 | Schwacha, MG [91] | 130 | 98 | Ninnemann, JL [120] | 106 |
| 33 | Baud, FJ [64] | 175 | 66 | Aulick, JH [92] | 130 | 99 | Niazi, ZBM [121] | 105 |
| | | | | | | 100 | Nijsten, MWN [18] | 104 |

second most cited paper by Burke et al. received 568 citations and describes the successful use of an artificial skin for burn wound coverage [28]. The landmark 1965 paper from Moyer et al. describing the treatment of burns with 0.5% silver nitrate was cited 317 times and was the fifth most referenced paper [34]. This is Doctor Moyers first of two appearances in the top 100. An important paper detailing the prevention of the catabolic response to burns by early enteral feeding also featured in the top 10 [35]. The first article from the journal Burns to appear in the top 100 was written by Wainwright, and it detailed the use of Alloderm in the treatment of full thickness burns [36]. A landmark paper on ascertaining the

depth of a burn was described by Jackson in 1953 and this paper was 19th in the top 100 [37]. At 22, Deitch et al. analyzed the variables of hypertrophic scar formation post burns and at 32, a 1952 paper by Evans et al. looked at the fluid and electrolyte requirements in severe burns [31,38]. The only paper from Plastic and Reconstructive Surgery was at 27 and it outlined a composite autologous-allogeneic skin replacement for burn wounds [39]. The relationship between burn scars and malignant change was described by Arons et al. at number 42 and the importance of early excision and skin grafting was put forward by Burke et al. at 47 [30,40]. A large retrospective study looking at the effect of inhalational injury, burn size and age on mortality in burns featured at 78 in the top 100 [41]. The last paper on the most cited list by Nijsten et al. from 1991 focused on interleukin-6 and how it related to the humoral immune response and clinical parameters in burned patients [18].

Table 3 – The decades where the top 100 papers originated from.

| Decade | Number of papers |
|--------|------------------|
| 1940s | 2 |
| 1950s | 4 |
| 1960s | 7 |
| 1970s | 14 |
| 1980s | 34 |
| 1990s | 26 |
| 2000s | 13 |

4. Discussion

Over the last 60 years, the specialty of burn management has grown from simple burn excisions to a comprehensive multidisciplinary approach to target all sequelae of the injury, promptly and expectantly. This is reflected in the growing body of scientific literature relating to burns.

Table 4 – The type and level of evidence of the clinical studies (n = 88) in the top 100.

| Clinical study type | Number of studies |
|---------------------|-------------------|
| Diagnostic | 4 |
| Level 2 | 3 |
| Level 4 | 1 |
| Prognostic | 40 |
| Level 1 | 1 |
| Level 2 | 30 |
| Level 3 | 6 |
| Level 4 | 2 |
| Level 5 | 1 |
| Therapeutic | 44 |
| Level 1 | 6 |
| Level 2 | 5 |
| Level 3 | 12 |
| Level 4 | 11 |
| Level 5 | 10 |

By reading through the 100 most-cited papers, it is hard not to appreciate the seminal papers that are present on the list. These are representative of the many landmarks that have occurred in burn management and burns research over the past 66 years. However, many important papers relating to burns are not found on this top 100 list and this is a limitation of this type of study. The Journal of Burn Care Research has made significant contributions to burns yet no papers from this journal made it into the top 100. The phenomenon of “obliteration by incorporation” may account partly for this, as over time, many “classic papers” may have become such common knowledge that they are deemed not necessary to cite [3]. This indicates that the number of citations a paper has received may not reflect its overall importance to burn care historically. An example of an important paper that failed to qualify into the top 100 is the 2007 paper from Greenhalgh et al. in which the findings of American Burn Association conference to define sepsis and infection in burns were discussed [42]. This paper has been cited 96 times to date and narrowly missed out in being included in the top 100. Other seminal papers that did not make the most cited list were Saffle’s paper on fluid creep in burn resuscitation and the review of skin substitutes by Balasubrami et al. published in Burns in 2001 [43,44].

It has been proposed that the most important landmark papers burns may be located in the reference list of the most-cited papers [8,45]. In contrast, it has been reported that the

Table 5 – The countries of origin of the top 100 papers in burns.

| Nation | Number of papers |
|-----------------|------------------|
| USA | 78 |
| United Kingdom | 10 |
| The Netherlands | 3 |
| Canada | 3 |
| France | 2 |
| China | 1 |
| Sweden | 1 |
| Australia | 1 |
| Lebanon | 1 |

Table 6 – The institutions which contributed the most papers to the 100 most cited papers in burns.

| Rank | Institution | Number of papers |
|------|--|------------------|
| 1 | University of Texas/Shriners Hospital, Galveston, TX | 16 |
| 2 | Massachusetts General Hospital, Boston, MA | 9 |
| 3 | US Army, Institute of Surgical Research, Houston, TX | 8 |
| 4 | University of Cincinnati, OH | 7 |
| 5 | Birmingham Accident Hospital, UK | 6 |
| 6 | Cornell University, NY | 5 |

older articles are, the greater the likelihood they have attained more citations purely because their citable period was longer [9].

Browsing through the list of the top 100 papers gives an interesting insight into the history and development in burns over the last six decades. We have identified the key papers that have had the most momentous impact in the field of burns. The vast majority of papers originated from the United States which is not surprising as according to the Institute of Scientific Information, they also lead the rankings in all 20 scientific disciplines [5,15]. Nonetheless, it has been established that American reviewers have a bias towards American papers [46]. Interestingly, nine papers in the top 100 originated from countries where English is not the first language (The Netherlands, France, China, Sweden, Peru and Lebanon). The remaining 91 papers came from English speaking countries (United States, Canada, Australia and the United Kingdom).

It is important to recognize the limitations with this type of study. ‘Incomplete citing’ is a phenomenon that occurs when citations are made with the intention to persuade the reader rather than to give credit to those who most influenced their work. Other common biases that can occur include journal bias, self-citation, in-house bias, language bias towards the English language, and omission bias by purposely failing to cite competitors [6]. Notwithstanding these biases, the top 100 most cited papers in burns is a fine representation of many of the most significant works over the last 66 years and each individual paper should be looked at as having acquired ‘classic’ status based on the large number of citations it has obtained. The top 100 list is helpful for many reasons, as it identifies the seminal papers that have greatly enriched the specialty of burns and permits us to identify which institutions and authors have contributed to them and therefore led the way in burns research. Furthermore, for budding researchers and authors, it provides useful information as to what it entails to write a ‘classic paper’. In order to produce such a body of work, a novel idea, innovation or observation must be found that has an abiding effect on the way we treat burns. We have observed that for a piece of work to attain ‘classic’ status, it should originate from an English speaking country and be published in English in a high impact factor journal. We also found that it was more likely to be published if it originated from the United States.

It is recognized that the measurement of scientific quality is not based on citation analysis. Nevertheless, the more times a paper has been referenced reflects the importance and influence it has had on the scientific community as a whole.

Table 7 – The authors who contributed more than one article to the top 100 papers.

| Author | Number of citation classics | Position on author list |
|----------------|-----------------------------|---|
| Herndon DN | 16 | First author – 4, second – 2, third – 1, fourth – 1, fifth – 3, last 5 |
| Wolfe RR | 9 | First author – 2, second – 1, fourth – 1, eighth – 1, tenth – 1, last – 3 |
| Burke JF | 8 | First author – 3, second – 1, third – 2 fifth – 1, last – 1 |
| Pruitt BA Jr | 8 | Second author – 1, fifth – 2, eighth – 1, last – 4 |
| Chinkes DL | 6 | Second author – 2, third – 1 fourth – 3 |
| Wolf SE | 6 | First author – 1, second – 2, third – 2, fifth – 1 |
| Mason AD Jr | 6 | Third author – 1, fourth – 1, fifth – 1, last – 3 |
| Shires GT | 5 | Last author – 5 |
| Alexander JW | 5 | First author – 3, last – 2 |
| Barrow RE | 4 | Second author – 3, fifth – 1 |
| Deitch EA | 4 | First author – 3, second – 1 |
| Tompkins RG | 4 | First author – 1, fourth – 1, last – 2 |
| Wilmore DW | 4 | First author – 2, second – 1, last – 1 |
| Bondoc CC | 3 | Second author – 1, fourth – 2 |
| Desai MH | 3 | Third author – 1, fifth – 1, last – 1 |
| Finkelstein JL | 3 | Second author – 1, third – 1, fourth – 1 |
| Gore DC | 3 | First author – 2, fourth – 1 |
| Hart DW | 3 | First author – 2, second – 1 |
| Klasen HJ | 3 | First author – 2, fifth – 1 |
| Madden MR | 3 | First author – 1, second – 1, third – 1 |
| Rutan RL | 3 | Third author – 2, last – 1 |
| Quinby WC Jr | 3 | Third author – 1, fifth – 1, last – 1 |
| Abston S | 2 | Last author – 2 |
| Allison SP | 2 | First author – 1, second – 1 |
| Aulick LH | 2 | First author – 1, second – 1 |
| Becker RA | 2 | First author – 1, second – 1 |
| Berg RD | 2 | Last author – 2 |
| Boyce ST | 2 | First author – 2 |
| Broemeling L | 2 | Fourth author – 2 |
| Bull JP | 2 | First author – 2 |
| Burleson DG | 2 | Second author – 2 |
| Cioffi WG Jr | 2 | Third author – 2 |
| Cuono CB | 2 | First author – 2 |
| Demling RH | 2 | First author – 1, fourth – 1 |
| Drost AC | 2 | First author – 2 |
| Evans JH | 2 | Second author – 2 |
| Ferrando AA | 2 | First author – 1, seventh – 1 |
| Gilpin DA | 2 | First author – 1, second – 1 |
| Goodwin CW Jr | 2 | Fourth author – 2 |
| Green H | 2 | Last author – 2 |
| Hefton JM | 2 | First author – 1, last – 1 |
| Heimbach DM | 2 | First author – 1, second – 1 |
| Hinton P | 2 | First author – 1, second – 1 |
| Jahoor F | 2 | Third author – 2 |
| Kehinde O | 2 | Fourth author – 2 |
| Kunkel KR | 2 | Third author – 1, fifth – 1 |
| Langdon R | 2 | Second author – 2 |
| Luterman A | 2 | Second author – 2 |
| Lynch JB | 2 | Second author – 2 |
| Margraf HW | 2 | Second author – 1, fourth – 1 |
| McGuire J | 2 | Last author – 2 |
| McManus, WF | 2 | Seventh author – 1, eighth – 1 |
| Mlcak RP | 2 | Third author – 1, fifth – 1 |
| Monafa WW Jr | 2 | Last author – 2 |
| Moyer CA | 2 | First author – 2 |
| Nguyen TT | 2 | First author – 1, sixth – 1 |
| Obeng MK | 2 | Sixth author – 1, seventh – 1 |
| O'Connor NE | 2 | First author – 1, second – 1 |
| Ogle CK | 2 | Fourth author – 1, last – 1 |
| Schoenfeld DA | 2 | Second author – 1, third – 1 |
| Till GO | 2 | First author – 1, fourth – 1 |
| Trocki O | 2 | Second author – 1, third – 1 |
| Vaughan GM | 2 | First author – 1, second – 1 |
| Warden GD | 2 | Tenth author – 1, last – 1 |
| Wolfe MH | 2 | Last author – 2 |

The top 100 'classic' papers that we observed in this study are the ones that have had the greatest impact on the field of burn care and research and are more than likely the ones that will be remembered most.

Conflicts of interest

All named authors hereby declare that they have no conflicts of interest to disclose.

REFERENCES

- [1] Garfield E. The impact factor and its rightful use. *Anaesthesist* 1998;47:439-40 [in German].
- [2] Garfield E. Journal impact factor: a brief review. *Can Med Assoc J* 1999;161:979-80.
- [3] Garfield E. 100 citation classics from the *Journal of the American Medical Association*. *J Am Med Assoc* 1987;2(257):52-9.
- [4] Seglen PO. Why the impact factor of journals should not be used for evaluating research. *Br Med J* 1997;314(498):1997.
- [5] Kelly JC, Glynn RW, O' Briain DE, Felle P, McCabe JP. The 100 classic papers of orthopaedic surgery: a bibliometric analysis. *J Bone Joint Surg Br* 2010;92:1338-43.
- [6] Baltussen A, Kindler CH. Citation classics in anesthetic journals. *Anesth Analg* 2004;98:443-51.
- [7] Dubin D, Häfner AW, Arndt KA. Citation classics in clinical dermatologic journals: citation analysis, biomedical journals, and landmark articles, 1945-1990. *Arch Dermatol* 1993;129:1121-9.
- [8] Paladugu R, Schein M, Gardezi S, Wise L. One hundred citation classics in general surgical journals. *World J Surg* 2002;26(9):1099-105.
- [9] Loonen MP, Hage JJ, Kon M. Plastic surgery classics: characteristics of 50 top-cited articles in four plastic surgery journals since 1946. *Plast Reconstr Surg* 2008;121:320-7.
- [10] Loonen MP, Hage JJ, Kon M. Value of citation numbers and impact factors for analysis of plastic surgery research. *Plast Reconstr Surg* 2007;120:2082.
- [11] Eberlin KR, Labow BI, Upton III J, Taghinia AH. High-impact articles in hand surgery. *Hand* 2012;7:157-62.
- [12] Bosker BH, Verheyen CC. The international rank order of publications in major clinical orthopaedic journals from 2000 to 2004. *J Bone Joint Surg* 2006;88-B:156-8.
- [13] Mehlman CT, Wenger DR. The top 25 at 25: citation classics in the *Journal of Pediatric Orthopaedics*. *J Pediatr Orthop* 2006;26:691-4.
- [14] Fenton JE, Roy D, Hughes JP, Jones AS. A century of citation classics in otolaryngology-head and neck surgery journals. *J Laryngol Otol* 2002;116:494-8.
- [15] Institute for Scientific Information. Science citation index expanded 1946-2006 [accessed September 2013].
- [16] Oxford Centre for Evidence-based Medicine - levels of evidence table at <http://www.cebm.net/?o=1025>.
- [17] Gallico III GG, O'Connor NE, Compton CC, Kehinde O, Green H. Permanent coverage of large burn wounds with autologous cultured human epithelium. *N Engl J Med* 1984;311:448-51.
- [18] Nijsten MW, Hack CHelle M, ten Duis HJ, Klasen HJ, Aarden LA. Interleukin-6 and its relation to the humoral immune response and clinical parameters in burned patients. *Surgery* 1991;109:761-7.
- [19] Atiyeh BS, Costagliola M, Hayek SN, Dibo SA. Effect of silver on burn wound infection control and healing: review of the literature. *Burns* 2007;33:139-48 [review].
- [20] Cope O, Moore FD. The redistribution of body water and the fluid therapy of the burned patient. *Ann Surg* 1947;126:1010-45.
- [21] Herndon DN, Barrow RE, Kunkel KR, Broemeling L, Rutan RL. Effects of recombinant human growth hormone on donor-site healing in severely burned children. *Ann Surg* 1990;212:424-9.
- [22] Herndon DN, Hart DW, Wolf SE, Chinkes DL, Wolfe RR. Reversal of catabolism by beta-blockade after severe burns. *N Engl J Med* 2001 Oct;345:1223-9.
- [23] Herndon DN, Barrow RE, Rutan RL, Rutan TC, Desai MH, Abston S. A comparison of conservative versus early excision. Therapies in severely burned patients. *Ann Surg* 1989;209:547-52.
- [24] Herndon DN, Tompkins RG. Support of the metabolic response to burn injury. *Lancet* 2004;363:1895-902.
- [25] Alexander JW, MacMillan BG, Stinnett JD, Ogle CK, Bozian RC, Fischer JE, et al. Beneficial effects of aggressive protein feeding in severely burned children. *Ann Surg* 1980;192:505-17.
- [26] Alexander JW, Saito H, Trocki O, Ogle CK. The importance of lipid type in the diet after burn injury. *Ann Surg* 1986;204:1-8.
- [27] Alexander JW, Gianotti L, Pyles T, Carey MA, Babcock GF. Distribution and survival of *Escherichia coli* translocating from the intestine after thermal injury. *Ann Surg* 1991;213:558-66. discussion 566-7.
- [28] Burke JF, Yannas IV, Quinby Jr WC, Bondoc CC, Jung WK. Successful use of a physiologically acceptable artificial skin in the treatment of extensive burn injury. *Ann Surg* 1981;194:413-28.
- [29] Burke JF, Wolfe RR, Mullany CJ, Mathews DE, Bier DM. Glucose requirements following burn injury. Parameters of optimal glucose infusion and possible hepatic and respiratory abnormalities following excessive glucose intake. *Ann Surg* 1979;190:274-85.
- [30] Burke JF, Bondoc CC, Quinby WC. Primary burn excision and immediate grafting: a method shortening illness. *J Trauma* 1974;14:389-95.
- [31] Deitch EA. Intestinal permeability is increased in burn patients shortly after injury. *Surgery* 1990;107:411-6.
- [32] Deitch EA, Wheelahan TM, Rose MP, Clothier J, Cotter J. Hypertrophic burn scars: analysis of variables. *J Trauma* 1983;23:895-8.
- [33] Deitch EA, Berg RD. Endotoxin but not malnutrition promotes bacterial translocation of the gut flora in burned mice. *J Trauma* 1987;27:161-6.
- [34] Moyer CA, Brentano L, Gravens DL, Margraf HW, Monafó Jr WW. Treatment of large human burns with 0.5 percent silver nitrate solution. *Arch Surg* 1965;90:812-67.
- [35] Mochizuki H, Trocki O, Dominioni L, Brackett KA, Joffe SN, Alexander JW. Mechanism of prevention of postburn hypermetabolism and catabolism by early enteral feeding. *Ann Surg* 1984;200:297-310.
- [36] Wainwright DJ. Use of an acellular allograft dermal matrix (AlloDerm) in the management of full-thickness burns. *Burns* 1995;21:243-8.
- [37] Jackson DM. The diagnosis of the depth of burning. *Br J Surg* 1953;40:588-96.
- [38] Evans EI, Purnell OJ, Robinett PW, Batchelor A, Martin M. Fluid and electrolyte requirements in severe burns. *Ann Surg* 1952;135:804-17.
- [39] Cuono CB, Langdon R, Birchall N, Barttelbort S, McGuire J. Composite autologous-allogeneic skin replacement: development and clinical application. *Plast Reconstr Surg* 1987;80:626-37.

- [40] Arons MS, Lynch JB, Lewis Sr, Blocker Jr TG. Scar tissue carcinoma I. A clinical study with special reference to burn scar carcinoma. *Ann Surg* 1965;161:170-88.
- [41] Smith DL, Cairns BA, Ramadan F, Dalston JS, Fakhry SM, Rutledge R, et al. Effect of inhalation injury, burn size, and age on mortality: a study of 1447 consecutive burn patients. *J Trauma* 1994;37:655-9.
- [42] Greenhalgh DG, Saffle JR, Holmes IV JH, Gamelli RL, Palmieri TL, Horton JW, et al. American Burn Association Consensus Conference on Burn Sepsis and Infection Group. American Burn Association consensus conference to define sepsis and infection in burns. *J Burn Care Res* 2007;28:776-90.
- [43] Saffle JL. The phenomenon of "fluid creep" in acute burn resuscitation. *J Burn Care Res* 2007;28:382-95.
- [44] Balasubramani M, Kumar TR, Babu M. Skin substitutes: a review. *Burns* 2001;27:534-44.
- [45] Picknett T, Davis K. The 100 most-cited articles from *JMB*. *J Mol Biol* 1999;293:171-6.
- [46] Campbell FM. National bias: a comparison of citation practices by health professionals. *Bull Med Libr Assoc* 1990;78:376-82.
- [47] Seviitt S, Gallagher N. Venous thrombosis and pulmonary embolism. A clinico-pathological study in injured and burned patients. *Br J Surg* 1961;48:475-89.
- [48] O'Connor NE, Mulliken JB, Banks-Schlegel S, Kehinds O, Green H. Grafting of burns with cultured epithelium prepared from autologous epidermal cells. *Lancet* 1981;10(1):75-8.
- [49] Heimbach D, Lutermaier A, Burke J, Cram A, Herndon D, Hunt J, et al. Artificial dermis for major burns. A multi-center randomized clinical trial. *Ann Surg* 1988;208:313-20.
- [50] Wolfe RR, Herndon DN, Jahoor F, Miyoshi H, Wolfe M. Effect of severe burn injury on substrate cycling by glucose and fatty acids. *N Engl J Med* 1987;317:403-8.
- [51] Fox Jr CL. Silver sulfadiazine - a new topical therapy for *Pseudomonas* in burns. *Therapy of Pseudomonas infection in burns*. *Arch Surg* 1968;96:184-8.
- [52] Shirani KZ, Pruitt Jr BA, Mason Jr AD. The influence of inhalation injury and pneumonia on burn mortality. *Ann Surg* 1987;205:82-7.
- [53] Ryan CM, Schoenfeld DA, Thorpe WP, Sheridan RL, Cassem EH, Tompkins RG. Objective estimates of the probability of death from burn injuries. *N Engl J Med* 1998;338:362-6.
- [54] Parry-Billings M, Evans J, Calder PC, Newsholme EA. Does glutamine contribute to immunosuppression after major burns? *Lancet* 1990;336:523-5.
- [55] Klasen HJ. A historical review of the use of silver in the treatment of burns. II. Renewed interest for silver. *Burns* 2000;26:131-8.
- [56] Ziegler TR, Smith RJ, O'Dwyer ST, Demling RH, Wilmore DW. Increased intestinal permeability associated with infection in burn patients. *Arch Surg* 1988;123:1313-9.
- [57] Wood JJ, Rodrick ML, O'Mahony JB, Palder SB, Saporoschetz I, D'Eon P, et al. Inadequate interleukin 2 production. A fundamental immunological deficiency in patients with major burns. *Ann Surg* 1984;200:311-20.
- [58] Allison SP, Hinton P, Chamberlain MJ. Intravenous glucose-tolerance, insulin, and free-fatty-acid levels in burned patients. *Lancet* 1968;2:1113-6.
- [59] Gore DC, Chinkes D, Hegggers J, Herndon DN, Wolf SE, Desai M. Association of hyperglycemia with increased mortality after severe burn injury. *J Trauma* 2001;51:540-4.
- [60] Cuono C, Langdon R, McGuire J. Use of cultured epidermal autografts and dermal allografts as skin replacement after burn injury. *Lancet* 1986;1:1123-4.
- [61] Klasen HJ. Historical review of the use of silver in the treatment of burns. I. Early uses. *Burns* 2000;26:117-30.
- [62] De Luca M, Albanese E, Bondanza S, Megna M, Ugozzoli L, Molina F, et al. Multicentre experience in the treatment of burns with autologous and allogenic cultured epithelium, fresh or preserved in a frozen state. *Burns* 1989;15:303-9.
- [63] Halebian PH, Corder VJ, Madden MR, Finklestein JL, Shires GT. Improved burn center survival of patients with toxic epidermal necrolysis managed without corticosteroids. *Ann Surg* 1986;204:503-12.
- [64] Baud FJ, Barriot P, Toffis V, Riou B, Vicaut E, Lecarpentier Y, et al. Elevated blood cyanide concentrations in victims of smoke inhalation. *N Engl J Med* 1991;325:1761-6.
- [65] Till GO, Beauchamp C, Menapace D, Tourtellotte Jr W, Kunkel R, Johnson KJ, et al. Oxygen radical dependent lung damage following thermal injury of rat skin. *J Trauma* 1983;23:269-77.
- [66] Hefton JM, Madden MR, Finkelstein JL, Shires GT. Grafting of burn patients with allografts of cultured epidermal cells. *Lancet* 1983;2:428-30.
- [67] Wilmore DW, Lindsey CA, Moyland JA, Faloona GR, Pruitt BA, Unger RH. Hyperglucagonaemia after burns. *Lancet* 1974;1:73-5.
- [68] Hinton P, Allison SP, Littlejohn S, Lloyd J. Insulin and glucose to reduce catabolic response to injury in burned patients. *Lancet* 1971;1:767-9.
- [69] Maejima K, Deitch E, Berg R. Promotion by burn stress of the translocation of bacteria from the gastrointestinal tracts of mice. *Arch Surg* 1984;119:166-72.
- [70] Wolfe RR, Goodenough RD, Burke JF, Wolfe MH. Response of protein and urea kinetics in burn patients to different levels of protein intake. *Ann Surg* 1983;197:163-71.
- [71] Gore DC, Honeycutt D, Jahoor F, Wolfe RR, Herndon DN. Effect of exogenous growth hormone on whole-body and isolated-limb protein kinetics in burned patients. *Arch Surg* 1991;126:38-43.
- [72] Wilmore DW, Aulick LH, Mason AD, Pruitt Jr BA. Influence of the burn wound on local and systemic responses to injury. *Ann Surg* 1977;186:444-58.
- [73] Lanser ME, Saba TM, Scovill WA. Opsonic glycoprotein (plasma fibronectin) levels after burn injury. Relationship to extent of burn and development of sepsis. *Ann Surg* 1980;192:776-82.
- [74] Wischmeyer PE, Lynch J, Liedel J, Wolfson R, Riehm J, Gottlieb L, et al. Glutamine administration reduces Gram-negative bacteremia in severely burned patients: a prospective, randomized, double-blind trial versus isonitrogenous control. *Crit Care Med* 2001;29:2075-80.
- [75] Hart DW, Wolf SE, Mlcak R, Chinkes DL, Ramzy PI, Obeng MK, et al. Persistence of muscle catabolism after severe burn. *Surgery* 2000;128:312-9.
- [76] Thompson PB, Herndon DN, Traber DL, Abston S. Effect on mortality of inhalation injury. *J Trauma* 1986;26:163-5.
- [77] Goldhill DR, Sumner A. Outcome of intensive care patients in a group of British intensive care units. *Crit Care Med* 1998;26:1337-45.
- [78] Wolf SE, Rose JK, Desai MH, Mileski JP, Barrow RE, Herndon DN. Mortality determinants in massive pediatric burns. An analysis of 103 children with $\geq 80\%$ TBSA burns ($>$ or $=70\%$ full-thickness). *Ann Surg* 1997;225:554-65. discussion 565-9.
- [79] Demling RH. Burns. *N Engl J Med* 1985;313:1389-98 [review].
- [80] Poon VK, Burd A. In vitro cytotoxicity of silver: implication for clinical wound care. *Burns* 2004;30:140-7.
- [81] Saito H, Trocki O, Wang SL, Goncse SJ, Joffe SN, Alexander JW. Metabolic and immune effects of dietary arginine supplementation after burn. *Arch Surg* 1987;122:784-9.
- [82] Moncrief JA. Burns. *N Engl J Med* 1973;288:444-54 [review].

- [83] Jones I, Currie L, Martin R. A guide to biological skin substitutes. *Br J Plast Surg* 2002;55:185-93 [review].
- [84] Vaughan GM, Becker RA, Allen JP, Goodwin Jr CW, Pruitt Jr BA, Mason Jr AD. Cortisol and corticotrophin in burned patients. *J Trauma* 1982;22:263-73.
- [85] Ivy ME, Atweh NA, Palmer J, Possenti PP, Pineau M, D'Aiuto M. Intra-abdominal hypertension and abdominal compartment syndrome in burn patients. *J Trauma* 2000;49:387-91.
- [86] Bull JP, Fisher AJ. A study of mortality in a burns unit: a revised estimate. *Ann Surg* 1954;139:269-74.
- [87] Engrav LH, Heimbach DM, Reus JL, Harnar TJ, Marvin JA. Early excision and grafting vs. nonoperative treatment of burns of indeterminant depth: a randomized prospective study. *J Trauma* 1983;23:1001-4.
- [88] Novick M, Gard DA, Hardy SB, Spira M. Burn scar carcinoma: a review and analysis of 46 cases. *J Trauma* 1977;17:809-17.
- [89] Kien CL, Young VR, Rohrbaugh DK, Burke JF. Increased rates of whole body protein synthesis and breakdown in children recovering from burns. *Ann Surg* 1978;187:383-91.
- [90] Germain L, Rouabhia M, Guignard R, Carrier L, Bouvard V, Auger FA. Improvement of human keratinocyte isolation and culture using thermolysin. *Burns* 1993;19:99-104.
- [91] Schwacha MG. Macrophages and post-burn immune dysfunction. *Burns* 2003;29:1-14 [review].
- [92] Aulick LH, Wilmore DW. Increased peripheral amino acid release following burn injury. *Surgery* 1979;85:560-5.
- [93] Madden MR, Finkelstein JL, Staiano-Coico L, Goodwin CW, Shires GT, Nolan EE, et al. Grafting of cultured allogeneic epidermis on second- and third-degree burn wounds on 26 patients. *J Trauma* 1986;26:955-62.
- [94] Cannon JG, Friedberg JS, Gelfand JA, Tompkins RG, Burke JF, Dinarello CA. Circulating interleukin-1-beta and tumor necrosis factor-beta concentrations after burn injury in humans. *Crit Care Med* 1992;20:1414-9.
- [95] Drost AC, Burleson DG, Cioffi Jr WG, Jordan BS, Mason Jr AD, Pruitt Jr BA. Plasma cytokines following thermal injury and their relationship with patient mortality, burn size, and time postburn. *J Trauma* 1993;35:335-9.
- [96] Sakurai Y, Aarsland A, Herndon DN, Chinkes DL, Pierre E, Nguyen TT, et al. Stimulation of muscle protein synthesis by long-term insulin infusion in severely burned patients. *Ann Surg* 1995;222:283-94. 294-7.
- [97] Goodall M, Stone C, Haynes Jr BW. Urinary output of adrenaline and noradrenaline in severe thermal burns. *Ann Surg* 1957;145:479-87.
- [98] Rodriguez JL, Miller CG, Garner WL, Till GO, Guerrero P, Moore NP, et al. Correlation of the local and systemic cytokine response with clinical outcome following thermal injury. *J Trauma* 1993;34:684-94.
- [99] Loirat P, Rohan J, Baillet A, Beaufils F, David R, Chapman A. Increased glomerular filtration rate in patients with major burns and its effect on the pharmacokinetics of tobramycin. *N Engl J Med* 1978;299:915-9.
- [100] Tompkins RG, Burke JF, Schoenfeld DA, Bondoc CC, Quinby Jr WC, Behringer GC, et al. Prompt eschar excision: a treatment system contributing to reduced burn mortality. A statistical evaluation of burn care at the Massachusetts General Hospital (1974-1984). *Ann Surg* 1986;204:272-81.
- [101] Boyce ST, Goretsky MJ, Greenhalgh DG, Kagan RJ, Rieman MT, Warden GD. Comparative assessment of cultured skin substitutes and native skin autograft for treatment of full-thickness burns. *Ann Surg* 1995;222:743-52.
- [102] Bull JP, Squire JR. A study of mortality in a burns unit: standards for the evaluation of alternative methods of treatment. *Ann Surg* 1949;130:160-73.
- [103] McHugh GL, Moellering RC, Hopkins CC, Swartz MN. Salmonella typhimurium resistant to silver nitrate, chloramphenicol, and ampicillin. *Lancet* 1975;1:235-40.
- [104] Yin HQ, Langford R, Burrell RE. Comparative evaluation of the antimicrobial activity of ACTICOAT antimicrobial barrier dressing. *J Burn Care Rehabil* 1999;20:195-200.
- [105] Jones II WG, Minei JP, Barber AE, Rayburn JL, Fahey III TJ, Shires III GT, et al. Bacterial translocation and intestinal atrophy after thermal injury and burn wound sepsis. *Ann Surg* 1990;211:399-405.
- [106] Becker RA, Vaughan GM, Ziegler MG, Seraile LG, Goldfarb IW, Mansour EH, et al. Hypermetabolic low triiodothyronine syndrome of burn injury. *Crit Care Med* 1982;10:870-5.
- [107] Winchurch RA, Thupari JN, Munster AM. Endotoxemia in burn patients: levels of circulating endotoxins are related to burn size. *Surgery* 1987;102:808-12.
- [108] Moyer CA, Margraf HW, Monafio Jr WW. Burn shock and extravascular sodium deficiency-treatment with Ringer's solution with lactate. *Arch Surg* 1965;90:799-811.
- [109] Curreri PW, Luteran A, Braun Jr DW, Shires GT. Burn injury. Analysis of survival and hospitalization time for 937 patients. *Ann Surg* 1980;192:472-8.
- [110] Ferrando AA, Chinkes DL, Wolf SE, Matin S, Herndon DN, Wolfe RR. A submaximal dose of insulin promotes net skeletal muscle protein synthesis in patients with severe burns. *Ann Surg* 1999;229:11-8.
- [111] Gilpin DA, Barrow RE, Rutan RL, Broemeling L, Herndon DN. Recombinant human growth hormone accelerates wound healing in children with large cutaneous burns. *Ann Surg* 1994;220:19-24.
- [112] Nguyen TT, Gilpin DA, Meyer NA, Herndon DN. Current treatment of severely burned patients. *Ann Surg* 1996;223:14-25 [review].
- [113] Arturson G, Högman CF, Johansson SG, Killander J. Changes in immunoglobulin levels in severely burned patients. *Lancet* 1969;1:546-8.
- [114] Zawacki BE. Reversal of capillary stasis and prevention of necrosis in burns. *Ann Surg* 1974;180:98-102.
- [115] Bruck HM, Nash G, Foley D, Pruitt Jr BA. Opportunistic fungal infection of the burn wound with phycomycetes and *Aspergillus*. A clinical-pathologic review. *Arch Surg* 1971;102:476-82.
- [116] Boyce ST, Kagan RJ, Meyer NA, Yakuboff KP, Warden GD. The 1999 clinical research award, cultured skin substitutes combined with integra artificial skin to replace native skin autograft and allograft for the closure of excised full-thickness burns. *J Burn Care Rehabil* 1999;20:453-61.
- [117] Pietsch J, Meakins JL. Complications of povidone-iodine absorption in topically treated burn patients. *Lancet* 1976;1:280-2.
- [118] Hart DW, Wolf SE, Chinkes DL, Gore DC, Mlcak RP, Beauford RB, et al. Determinants of skeletal muscle catabolism after severe burn. *Ann Surg* 2000;232:455-65.
- [119] Drost AC, Burleson DG, Cioffi Jr WG, Mason Jr AD, Pruitt Jr BA. Plasma cytokines after thermal injury and their relationship to infection. *Ann Surg* 1993;218:74-8.
- [120] Ninnemann JL, Stockland AE. Participation of prostaglandin E in immunosuppression following thermal injury. *J Trauma* 1984;24:201-7.
- [121] Niazi ZB, Essex TJ, Papini R, Scott D, McLean NR, Black MJ. New laser Doppler scanner, a valuable adjunct in burn depth assessment. *Burns* 1993;19:485-9.