# **EDUCATION CORNER**

# The 50 most influential original articles in vascular surgery during the last 25 years

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*Objective:* We have compiled a list of the 50 most-cited original articles in the field of vascular surgery during the last 25 years to highlight the important changes in practice that have occurred during this interval and provide surgical trainees in vascular surgery ready access to such influential articles.

*Methods*: A Web of Knowledge Citation Index Search was performed in December 2013 for the most-cited journal articles in the discipline of vascular surgery. We searched the term "vascular" in the cited reference search area and then further narrowed our results to exclude all categories except "surgery," "general internal medicine," and "cardiac/cardiovascular systems." We included only documents labeled as "articles" and those published in English. Articles dealing with cardiac surgery, interventional cardiology, and cardiovascular biology were excluded. Our search period was from January 1, 1988, through December 3, 2013. The 50 most frequently cited works were chosen, and a citation density was calculated for each, reflecting the average number of citations each received per year since publication. The articles were then sorted into a defined category, based on the clinical subject to which they pertained.

*Results:* The Citation Index Search resulted 80,379 articles, of which the top 50 were indexed and organized according to their citation density and area within the scope of clinical vascular surgery. The number of citations ranged from 218 to 3593. The median citation density was 50.2 (range, 11.3-201.3).

*Conclusions:* This report is a representation of the most-cited original publications in the field of clinical vascular surgery during the last 25 years. This is an effort to highlight the seminal works that have shaped the discipline of vascular surgery as well as to provide a concise reference list for the surgical trainee in the process of his or her education. (J Vasc Surg 2014;60:786-91.)

In today's era of evidence-based medicine, the importance of published science can hardly be overstated. Published works within scientific journals remain the chief mechanism through which new information is disseminated to fellow scientists and practitioners at large. They also form the foundation for the ever-evolving curriculum that new surgical trainees must understand for their future surgical careers. Many authors have extrapolated that the publications most cited in other scholarly works are the most influential in directing future practice patterns, which is clearly of great import to the surgical trainee. Therefore, a compilation of those highly cited manuscripts should represent a solid foundation for clinical practice within a particular discipline. Reports using a similar principle have been published in other fields of medicine, but none specific to the discipline of vascular surgery.<sup>1-3</sup>

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The purpose of this report is to compile such a listing of those original articles most frequently referenced pertaining to the clinical practice of vascular surgery with the hope of highlighting influential papers for the student's electronic library.

#### **METHODS**

Our search was conducted in December 2013 using the Web of Knowledge Citation Index Search. This search engine represents data from >12,000 scientific journals referenced from 1900 to present. This index allows for the search of multiple databases across scientific, humanities, and social science disciplines based on key terms, common themes, and related documents.

Our search included all works between the dates of January 1, 1988, and December 3, 2013. We searched the term "vascular" in the cited reference search area of the index. We constricted the document results to only include articles and those published in the English language. Within the research areas, we excluded all except those in the categories of "surgery," "general internal medicine," and "cardiac/cardiovascular systems."

The resultant publications were arranged in descending order by the number of citations. A citation density was then calculated for each referenced work, reflecting the average number of times the piece was cited per year since

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| Rank    | Publication information   | Total | Average/year |
|---------|---|-------|--------------|
| Carotid | /stroke prevention  |       |              |
| 1       | Stenting versus endarterectomy for treatment of carotid-artery stenosis<br>Authors: Brot TG, Hobson RW 2nd, Howard G, Roubin GS, Clark WM, Brooks W, et al<br>Source: <i>New England Journal of Medicine</i><br>Published: July 1, 2010   | 604   | 201.3        |
| 2       | Beneficial effect of carotid endarterectomy in symptomatic patients with high-grade carotid stenosis<br>Author: North American Symptomatic Carotid Endarterectomy Trial Collaborators<br>Source: <i>New England Journal of Medicine</i><br>Published: August 15, 1991   | 3593  | 163.3        |
| 3       | Protected carotid-artery stenting versus endarterectomy in high-risk patients<br>Authors: Yadav JS, Wholey MH, Kuntz RE, Fayad P, Katzen BT, Mishkel GJ, et al<br>Source: <i>New England Journal of Medicine</i><br>Published: October 7, 2004  | 1342  | 149.1        |
| 4       | Prevention of disabling and fatal strokes by successful carotid endarterectomy in patients without recent<br>neurological symptoms: randomised controlled trial<br>Authors: Halliday A, Mansfield A, Marro J, Peto C, Peto R, Potter J, et al<br>Source: <i>Lancet</i><br>Published: May 8, 2004  | 1042  | 115.8        |
| 5       | Benefit of carotid endarterectomy in patients with symptomatic moderate or severe stenosis<br>Authors: Barnett HJ, Taylor W, Eliasziw M, Fox AJ, Ferguson GG, Haynes RB, et al<br>Source: <i>New England Journal of Medicine</i><br>Published: November 12, 1998  | 1609  | 107.3        |
| 6       | Endarterectomy versus stenting in patients with symptomatic severe carotid stenosis<br>Authors: Mas JL, Chatellier G, Beyssen B, Branchereau A, Moulin T, Becquemin JP, et al<br>Source: <i>New England Journal of Medicine</i><br>Published: October 19, 2006  | 737   | 105.3        |
| 11      | Randomised trial of endarterectomy for recently symptomatic carotid stenosis: final results of the MRC<br>European Carotid Surgery Trial (ECST)<br>Authors: [No authors listed]<br>Source: <i>Lancet</i><br>Published: May 9, 1998  | 1280  | 85.3         |
| 13      | <ul> <li>30 day results from the SPACE trial of stent-protected angioplasty versus carotid endarterectomy in symptomatic patients: a randomised non-inferiority trial</li> <li>Authors: SPACE Collaborative Group, Ringleb PA, Allenberg J, Brückmann H, Eckstein HH, Fraedrich G, et al</li> <li>Source: <i>Lancet</i></li> </ul>  | 480   | 68.6         |
| 14      | <ul> <li>Published: October 7, 2006</li> <li>Endarterectomy for symptomatic carotid stenosis in relation to clinical subgroups and timing of surgery</li> <li>Authors: Rothwell PM, Eliasziw M, Gutnikov SA, Warlow CP, Barnett HJ; Carotid Endarterectomy</li> <li>Trialists Collaboration</li> <li>Source: Lancet</li> </ul>  | 584   | 64.9         |
| 17      | Published: March 20, 2004<br>Long-term results of carotid stenting versus endarterectomy in high-risk patients<br>Authors: Gurm HS, Yadav JS, Fayad P, Katzen BT, Mishkel GJ, Bajwa TK, et al<br>Source: <i>New England Journal of Medicine</i><br>Published: April 10, 2008  | 258   | 51.6         |
| 20      | <ul> <li>Efficacy of carotid endarterectomy for asymptomatic carotid stenosis. The Veterans Affairs Cooperative Study Group</li> <li>Authors: Hobson RW 2nd, Weiss DG, Fields WS, Goldstone J, Moore WS, Towne JB, et al Source: New England Journal of Medicine</li> <li>Published: January 28, 1993</li> </ul>  | 838   | 41.9         |
| 22      | Immediate and late clinical outcomes of carotid artery stenting in patients with symptomatic and asymptomatic carotid artery stenosis: a 5-year prospective analysis<br>Authors: Roubin GS, New G, Iyer SS, Vitek JJ, Al-Mubarak N, Liu MW, et al Source: <i>Circulation</i>  | 462   | 38.2         |
| 30      | Published: January 30, 2001<br>Carotid endarterectomy and prevention of cerebral-ischemia in symptomatic carotid stenosis. Veterans<br>Affairs Cooperative Studies Program 309 Trialist Group<br>Authors: Mayberg MR, Wilson SE, Yatsu F, Weiss DG, Messina L, Hershey LA, et al<br>Source: <i>JAMA-Journal of the American Medical Association</i><br>Published: December 18, 1991 | 591   | 26.8         |
| 31      | The North American Symptomatic Carotid Endarterectomy Trial: surgical results in 1415 patients<br>Authors: Ferguson GG, Eliasziw M, Barr HW, Clagett GP, Barnes RW, Wallace MC, et al<br>Source: <i>Stroke</i><br>Published: September 1999   | 359   | 25.6         |

### Table. Continued.

| Rank   | Publication information   | Total | Average/year |
|--------|---|-------|--------------|
| 43     | Prediction of benefit from carotid endarterectomy in individual patients: a risk-modelling study.<br>European Carotid Surgery Trialists' Collaborative Group<br>Authors: Rothwell PM, Warlow CP<br>Source: Lancet   | 239   | 17.1         |
| A      | Published: Jun 19, 1999<br>'aneurysmal disease  |       |              |
| 9<br>9 | Endovascular versus open repair of abdominal aortic aneurysm<br>Authors: United Kingdom EVAR Trial Investigators, Greenhalgh RM, Brown LC, Powell JT,<br>Thompson SG, Epstein D, et al<br>Source: New England Journal of Medicine   | 285   | 95           |
| 10     | Published: May, 20, 2010<br>A randomized trial comparing conventional and endovascular repair of abdominal aortic aneurysms<br>Authors: Prinssen M, Verhoeven EL, Buth J, Cuypers PW, van Sambeek MR, Balm R, et al<br>Source: <i>New England Journal of Medicine</i>   | 813   | 90.3         |
| 12     | Published: October 14, 2004<br>Endovascular aneurysm repair versus open repair in patients with abdominal aortic aneurysm (EVAR trial<br>1): randomised controlled trial<br>Authors: EVAR trial participants<br>Source: <i>Lancet</i>   | 560   | 70           |
| 15     | Published: June 25, 2005<br>Two-year outcomes after conventional or endovascular repair of abdominal aortic aneurysms<br>Authors: Blankensteijn JD, de Jong SE, Prinssen M, van der Ham AC, Buth J, van Sterkenburg SM, et al<br>Source: <i>New England Journal of Medicine</i><br>Published: June 9, 2005  | 485   | 60.6         |
| 16     | Endovascular vs. open repair of abdominal aortic aneurysms in the Medicare population<br>Authors: Schermerhorn ML, O'Malley AJ, Jhaveri A, Cotterill P, Pomposelli F, Landon BE<br>Source: <i>New England Journal of Medicine</i>   | 266   | 53.2         |
| 19     | Published: January 31, 2008<br>Immediate repair compared with surveillance of small abdominal aortic aneurysms<br>Authors: Lederle FA, Wilson SE, Johnson GR, Reinke DB, Littooy FN, Acher CW, et al<br>Source: <i>New England Journal of Medicine</i>  | 503   | 45.7         |
| 21     | Published: May 9, 2002<br>Endovascular treatment of thoracic aortic aneurysms: results of the phase II multicenter trial of the<br>GORE TAG thoracic endoprosthesis   | 327   | 40.8         |
|        | Authors: Makaroun MS, Dillavou ED, Kee ST, Sicard G, Chaikof E, Bavaria J, et al<br>Source: <i>Journal of Vascular Surgery</i><br>Published: January 2005   |       |              |
| 24     | Endovascular aneurysm repair and outcome in patients unfit for open repair of abdominal aortic<br>aneurysm (EVAR trial 2): randomised controlled trial<br>Authors: EVAR trial participants<br>Source: <i>Lancet</i>   | 289   | 36.1         |
| 26     | <ul> <li>Published: June 25, 2005</li> <li>Incidence and risk factors of late rupture, conversion, and death after endovascular repair of infrarenal aortic aneurysms: the EUROSTAR experience. European Collaborators on Stent/graft techniques for aortic aneurysm repair</li> <li>Authors: Harris PL, Vallabhaneni SR, Desgranges P, Becquemin JP, van Marrewijk C, Laheij RJ</li> </ul> | 392   | 30.2         |
| 29     | Source: Journal of Vascular Surgery<br>Published: October 2000<br>Abdominal aortic aneurysm expansion: risk factors and time intervals for surveillance<br>Authors: Brady AR, Thompson SG, Fowkes FG, Greenhalgh RM, Powell JT; UK Small Aneurysm Trial<br>Participants<br>Source: Circulation  | 242   | 26.9         |
|        | Published: July 6, 2004   |       |              |
| 32     | Prediction of rupture risk in abdominal aortic aneurysm during observation: wall stress versus diameter<br>Authors: Fillinger MF, Marra SP, Raghavan ML, Kennedy FE<br>Source: <i>Journal of Vascular Surgery</i>   | 254   | 25.4         |
| 36     | Published: April, 2003<br>A multicenter controlled clinical trial of open versus endovascular treatment of abdominal aortic<br>aneurysm<br>Authors: Matsumura JS, Brewster DC, Makaroun MS, Naftel DC   | 218   | 21.8         |
|        | Source: Journal of Vascular Surgery<br>Published: February 2003   |       |              |
| 38     | The "first generation" of endovascular stent-grafts for patients with aneurysms of the descending thoracic aorta  | 306   | 20.4         |
|        | Authors: Dake MD, Miller DC, Mitchell RS, Semba CP, Moore KA, Sakai T<br>Source: Journal of Thoracic and Cardiovascular Surgery<br>Published: November 1998   |       |              |

## Table. Continued.

| Rank         | Publication information  | Total | Average/year |
|--------------|--|-------|--------------|
| 39           | Significance of endoleaks after endovascular repair of abdominal aortic aneurysms: the EUROSTAR  | 223   | 20.3         |
|              | experience<br>Authors: van Marrewijk C, Buth J, Harris PL, Norgren L, Nevelsteen A, Wyatt MG<br>Source: Journal of Vascular Surgery  |       |              |
| 40           | Published: March 2002<br>Mycotic aneurysms of the thoracic and abdominal aorta and iliac arteries: experience with anatomic and<br>extra-anatomic repair in 33 cases   | 224   | 18.7         |
|              | Authors: Müller BT, Wegener OR, Grabitz K, Pillny M, Thomas L, Sandmann W<br>Source: <i>Journal of Vascular Surgery</i><br>Published: January 2001   |       |              |
| 41           | Transfemoral endovascular repair of abdominal aortic aneurysm: results of the North American EVT<br>phase 1 trial. EVT Investigators<br>Authors: Moore WS, Rutherford RB<br>Source: <i>Journal of Vascular Surgery</i>   | 313   | 18.4         |
| 48           | Published: April 1996<br>Multicenter prospective study of nonruptured abdominal aortic-aneurysm. Part II. Variables predicting<br>morbidity and mortality<br>Author: Johnston KW<br>Source: Journal of Vaccular Surgers  | 292   | 12.2         |
|              | Source: Journal of Vascular Surgery<br>Published: March 1989   |       |              |
| Vascula<br>7 | r medicine<br>Aspirin and clopidogrel compared with clopidogrel alone after recent ischaemic stroke or transient   | 904   | 100.4        |
| /            | ischaemic attack in high-risk patients (MATCH): randomised, double-blind, placebo-controlled trial<br>Authors: Diener HC, Bogousslavsky J, Brass LM, Cimminiello C, Csiba L, Kaste M, et al<br>Source: <i>Lancet</i>   | 904   | 100.4        |
| 8            | Published: July 24, 2004<br>Effects of extended-release metoprolol succinate inpatients undergoing non-cardiac surgery (POISE  | 487   | 97.4         |
| 0            | trial): a randomised controlled trial<br>Authors: POISE Study Group, Devereaux PJ, Yang H, Yusuf S, Guyatt G, Leslie K, et al<br>Source: <i>Lancet</i>   | 407   | 77.1         |
|              | Published: May-June 2008   |       |              |
| 18           | Coronary-artery revascularization before elective major vascular surgery<br>Authors: McFalls EO, Ward HB, Moritz TE, Goldman S, Krupski WC, Littooy F, et al<br>Source: New England Journal of Medicine  | 445   | 49.4         |
| 27           | Published: December 30, 2004<br>Statins are associated with a reduced incidence of perioperative mortality in patients undergoing major  | 283   | 28.3         |
| _,           | noncardiac vascular surgery<br>Authors: Poldermans D, Bax JJ, Kertai MD, Krenning B, Westerhout CM, Schinkel AF, et al<br>Source: <i>Circulation</i>   | 200   | 2010         |
| 28           | Published: April 15, 2003<br>Reduction in cardiovascular events after vascular surgery with atorvastatin: a randomized trial<br>Authors: Durazzo AE, Machado FS, Ikeoka DT, De Bernoche C, Monachini MC, Puech-Leão P, et al<br>Source: <i>Journal of Vascular Surgery</i> | 255   | 28.3         |
| 34           | Published: May 2004<br>Predictors of cardiac events after major vascular surgery: role of clinical characteristics, dobutamine<br>echocardiography, and beta-blocker therapy   | 302   | 25.2         |
|              | Authors: Boersma E, Poldermans D, Bax JJ, Steyerberg EW, Thomson IR, Banga JD, et al<br>Source: <i>JAMA-Journal of the American Medical Association</i><br>Published: April 11, 2001   |       |              |
| 37           | Combining clinical and thallium data optimizes preoperative assessment of cardiac risk before major<br>vascular surgery<br>Authors: Eagle KA, Coley CM, Newell JB, Brewster DC, Darling RC, Strauss HW, et al  | 515   | 21.5         |
|              | Source: Annals of Internal Medicine<br>Published: June 1, 1989   |       |              |
| 42           | Calcification of the aortic arch: risk factors and association with coronary heart disease, stroke, and<br>peripheral vascular disease<br>Authors: Iribarren C, Sidney S, Sternfeld B, Browner WS<br>Source: JAMA-Journal of the American Medical Association              | 224   | 17.2         |
| 44           | Published: June 7, 2000<br>Treatment of thromboangiitis obliterans (Buerger's disease) by intramuscular gene transfer of vascular  | 236   | 15.7         |
|              | endothelial growth factor: preliminary clinical results<br>Authors: Isner JM, Baumgartner I, Rauh G, Schainfeld R, Blair R, Manor O, et al<br>Source: <i>Journal of Vascular Surgery</i><br>Published: December 1998   |       |              |

#### Table. Continued.

| Rank        | Publication information  | Total | Average/year |
|-------------|--|-------|--------------|
| 47          | Dipyridamole-thallium scintigraphy and gated radionuclide angiography to assess cardiac risk before<br>abdominal aortic surgery<br>Authors: Baron JF, Mundler O, Bertrand M, Vicaut E, Barré E, Godet G, et al           | 236   | 12.4         |
|             | Source: New England Journal of Medicine<br>Published: March 10, 1994   |       |              |
| 50          | Dobutamine stress echocardiography for assessment of perioperative cardiac risk in patients undergoing major vascular surgery<br>Authors: Poldermans D, Fioretti PM, Forster T, Thomson IR, Boersma E, el-Said EM, et al | 226   | 11.3         |
|             | Source: Circulation  |       |              |
| р · 1       | Published: May 1993  |       |              |
| 23          | eral vascular disease  | 382   | 38.2         |
| 23          | Predictive value of noninvasively determined endothelial dysfunction for long-term cardiovascular events<br>in patients with peripheral vascular disease   | 362   | 30.2         |
|             | Authors: Gokce N, Keaney JF Jr, Hunter LM, Watkins MT, Nedeljkovic ZS, Menzoian JO, et al Source: Journal of the American College of Cardiology  |       |              |
|             | Published: May 21, 2003  |       |              |
| 35          | Endothelial dysfunction and cardiovascular risk prediction in peripheral arterial disease: additive value of flow-mediated dilation to ankle-brachial pressure index   | 219   | 21.9         |
|             | Authors: Brevetti G, Silvestro A, Schiano V, Chiariello M  |       |              |
|             | Source: Circulation  |       |              |
|             | Published: October 28, 2003  |       |              |
| 46          | Correlation between preoperative ischemia and major cardiac events after peripheral vascular surgery   | 299   | 12.5         |
|             | Authors: Raby KE, Goldman L, Creager MA, Cook EF, Weisberg MC, Whittemore AD, et al  |       |              |
|             | Source: New England Journal of Medicine  |       |              |
| <b>X</b> 7  | Published: November 9, 1989<br>s disease   |       |              |
| venou<br>25 | Chronic venous disease   | 219   | 31.3         |
| 23          | Authors: Bergan JJ, Schmid-Schönbein GW, Smith PD, Nicolaides AN, Boisseau MR, Eklof B   | 219   | 51.5         |
|             | Source: New England Journal of Medicine  |       |              |
|             | Published: August 3, 2006  |       |              |
| Vascula     | ar radiology   |       |              |
| 33          | Echolucent plaques are associated with high risk of ischemic cerebrovascular events in carotid stenosis: the tromsø study  | 303   | 25.3         |
|             | Authors: Mathiesen EB, Bønaa KH, Joakimsen O   |       |              |
|             | Source: <i>Circulation</i><br>Published: May 1, 2001   |       |              |
| 45          | Correlation of North American Symptomatic Carotid Endarterectomy Trial (NASCET) angiographic   | 293   | 14.7         |
| 10          | definition of 70% to 99% internal carotid artery stenosis with duplex scanning   | 270   | 11./         |
|             | Authors: Moneta GL, Edwards JM, Chitwood RW, Taylor LM Jr, Lee RW, Cummings CA, et al  |       |              |
|             | Source: Journal of Vascular Surgery  |       |              |
|             | Published: January 1993  |       |              |
|             | ar access  |       |              |
| 49          | Percutaneous transvenous angioplasty in the treatment of vascular access stenosis  | 238   | 11.3         |
|             | Author: Beathard GA  |       |              |
|             | Source: Kidney International<br>Published: December 1992   |       |              |
|             | rubished, Detelliber 1772  |       |              |

its publication. We excluded review articles, consensus statements, meta-analyses, recommended practice patterns, and all other works not representing primary research. Because this report was focused toward the clinical practice of vascular surgery, articles dealing with cardiac surgery, interventional cardiology, and cardiovascular biology were excluded. Finally, the works were ranked in order of decreasing citation density and grouped into specific categories according to the clinical subject to which each pertained (Table).

#### RESULTS

The search returned 80,379 publications, which was further pared by the methods described above. Each was then formatted to reflect the title of the document and the journal in which it was published. The total number of citations for the chosen articles ranged from 218 to 3593. The median citation density was 50.2 citations per year (range, 11.3-201.3). Most of the articles (33 of 50 [66%]) were published after the year 2000, and the remaining 34% were published before 2000. *The New England Journal of Medicine* was responsible for 32% (16 of 50) of the publications, followed by the *Journal of Vascular Surgery* with 22% and *The Lancet* with 18%. An examination of the clinical categories showed aortic and aneurysmal disease accounted for the greatest percentage of articles, at 34% (17 of 50), trailed closely by carotid stenosis/stroke prevention, at 32% (16 of 50).

#### DISCUSSION

The field of vascular surgery, like many others in modern medicine, is constantly evolving. New pharmacotherapies, treatment modalities, and technologic advancements have emerged and significantly changed its clinical practice. Many of these advances have occurred in the last two decades, and the data reviewed during this period highlight many of those developments.

There has been a considerable shift from open procedures to a less invasive endovascular approach in addressing the same clinical problem. Not surprisingly, this trend was reflected within the literature reviewed here. Of the 17 articles published before 2000, only two (12%) examined results of endovascular data. This is in stark contrast to 16 of the 33 publications since 2000 that involve consideration of data from endovascular approaches, equating to nearly 49%. Of these articles, 70% focusing on aortic and aneurysmal disease centered on endovascular therapies or complications thereof, or both. All articles, save two, concerning carotid disease and stroke prevention published after 2000 involve data from minimally invasive stenting. That endovascular technologies have revolutionized the field of vascular surgery in the past 25 years can thus be concluded based on the growing number of publications that focus on its widespread utility in clinical therapies.

This type of article certainly has strengths and weaknesses. Its strength as a concise source of highly influential articles within the field of clinical vascular surgery is clear. It is also unique in its categorization of works into groups according to clinical disease categories, facilitating the search for the inquisitive trainee. The ability to electronically access each of these 50 articles by the hyperlinks contained within the Table makes each instantly available for review from any computer.

This article does have weaknesses, one of which is presupposed into our argument. Our assumption was that those articles most referenced in other scholarly works would be the most influential in alteration of clinical practice. This seems a relatively safe assumption, but it should not be deemed infallible.

Another potential problem is the limitation of our initial search. Although a large list of journals is contained

within the Web of Knowledge Citation Search Index, we did limit our search only to works found there. We ranked the selected works by their citation density in an attempt to ameliorate bias toward older publications; however, those published within the last few years could potentially be under-represented. Although each may have significant importance to the field of vascular surgery, the extent of their influence on others' work may not have had sufficient time to appear in citations.

#### CONCLUSIONS

Vascular surgery is a diverse and rapidly evolving discipline, and new developments in technology and understanding disease processes have changed practice patterns significantly during the last 25 years. This report's intent is to highlight some of the most formative publications within that period to serve as a guide for current and future practice patterns within the field as well as to provide a concise list made readily accessible to today's surgical trainee.

#### AUTHOR CONTRIBUTIONS

Conception and design: MC Analysis and interpretation: FS Data collection: FS Writing the article: FS Critical revision of the article: MC Final approval of the article: JD Statistical analysis: Not applicable Obtained funding: Not applicable Overall responsibility: FS

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