

Curtis Triplitt

List of Publications by Year in descending order

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Version: 2024-02-01

28
papers

1,424
citations

361413

20
h-index

501196

28
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28
all docs

28
docs citations

28
times ranked

2335
citing authors

#	ARTICLE	IF	CITATIONS
1	Abdominal fat distribution and peripheral and hepatic insulin resistance in type 2 diabetes mellitus. <i>American Journal of Physiology - Endocrinology and Metabolism</i> , 2002, 283, E1135-E1143.	3.5	207
2	Assessment of Pancreatic β -Cell Function: Review of Methods and Clinical Applications. <i>Current Diabetes Reviews</i> , 2014, 10, 2-42.	1.3	179
3	Mechanism of action of exenatide to reduce postprandial hyperglycemia in type 2 diabetes. <i>American Journal of Physiology - Endocrinology and Metabolism</i> , 2008, 294, E846-E852.	3.5	144
4	Effects of Exenatide Plus Rosiglitazone on β -Cell Function and Insulin Sensitivity in Subjects With Type 2 Diabetes on Metformin. <i>Diabetes Care</i> , 2010, 33, 951-957.	8.6	100
5	Exenatide improves both hepatic and adipose tissue insulin resistance: A dynamic positron emission tomography study. <i>Hepatology</i> , 2016, 64, 2028-2037.	7.3	78
6	Empagliflozin and Kinetics of Renal Glucose Transport in Healthy Individuals and Individuals With Type 2 Diabetes. <i>Diabetes</i> , 2017, 66, 1999-2006.	0.6	67
7	Empagliflozin Treatment Is Associated With Improved β -Cell Function in Type 2 Diabetes Mellitus. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2018, 103, 1402-1407.	3.6	63
8	Determinants of the increase in ketone concentration during SGLT2 inhibition in NGT, IFG and T2DM patients. <i>Diabetes, Obesity and Metabolism</i> , 2017, 19, 809-813.	4.4	61
9	Addition of Pioglitazone and Ramipril to Intensive Insulin Therapy in Type 2 Diabetic Patients Improves Vascular Dysfunction by Different Mechanisms. <i>Diabetes Care</i> , 2008, 31, 121-127.	8.6	53
10	Mechanisms of Glucose Lowering of Dipeptidyl Peptidase-4 Inhibitor Sitagliptin When Used Alone or With Metformin in Type 2 Diabetes. <i>Diabetes Care</i> , 2013, 36, 2756-2762.	8.6	52
11	Exenatide Regulates Cerebral Glucose Metabolism in Brain Areas Associated With Glucose Homeostasis and Reward System. <i>Diabetes</i> , 2015, 64, 3406-3412.	0.6	45
12	Endogenous Glucose Production and Hormonal Changes in Response to Canagliflozin and Liraglutide Combination Therapy. <i>Diabetes</i> , 2018, 67, 1182-1189.	0.6	44
13	Exenatide: From the Gila Monster to the Pharmacy. <i>Journal of the American Pharmacists Association: JAPhA</i> , 2006, 46, 44-55.	1.5	41
14	Therapeutic Manipulation of Myocardial Metabolism. <i>Journal of the American College of Cardiology</i> , 2021, 77, 2022-2039.	2.8	40
15	Incretin Mimetics and Dipeptidyl Peptidase-IV Inhibitors: Potential New Therapies for Type 2 Diabetes Mellitus. <i>Pharmacotherapy</i> , 2006, 26, 360-374.	2.6	33
16	Combination Therapy With Exenatide Plus Pioglitazone Versus Basal/Bolus Insulin in Patients With Poorly Controlled Type 2 Diabetes on Sulfonylurea Plus Metformin: The Qatar Study. <i>Diabetes Care</i> , 2017, 40, 325-331.	8.6	32
17	Combination Therapy With Canagliflozin Plus Liraglutide Exerts Additive Effect on Weight Loss, but Not on HbA1c, in Patients With Type 2 Diabetes. <i>Diabetes Care</i> , 2020, 43, 1234-1241.	8.6	30
18	Durability of Triple Combination Therapy Versus Stepwise Addition Therapy in Patients With New-Onset T2DM: 3-Year Follow-up of EDICT. <i>Diabetes Care</i> , 2021, 44, 433-439.	8.6	29

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19	Evidence Against an Important Role of Plasma Insulin and Glucagon Concentrations in the Increase in EGP Caused by SGLT2 Inhibitors. <i>Diabetes</i> , 2020, 69, 681-688.	0.6	23
20	Exenatide: first-in-class incretin mimetic for the treatment of Type 2 diabetes mellitus. <i>Expert Review of Endocrinology and Metabolism</i> , 2006, 1, 329-341.	2.4	21
21	Inhibition of Renal Sodium-Glucose Cotransport With Empagliflozin Lowers Fasting Plasma Glucose and Improves β -Cell Function in Subjects With Impaired Fasting Glucose. <i>Diabetes</i> , 2017, 66, 2495-2502.	0.6	21
22	Pioglitazone and alogliptin combination therapy in type 2 diabetes: a pathophysiologically sound treatment. <i>Vascular Health and Risk Management</i> , 2010, 6, 671.	2.3	17
23	Combination therapy with pioglitazone/exenatide/metformin reduces the prevalence of hepatic fibrosis and steatosis: The efficacy and durability of initial combination therapy for type 2 diabetes (<sc>EDICT</sc>). <i>Diabetes, Obesity and Metabolism</i> , 2022, 24, 899-907.	4.4	15
24	Acute insulin resistance stimulates and insulin sensitization attenuates vascular smooth muscle cell migration and proliferation. <i>Physiological Reports</i> , 2014, 2, e12123.	1.7	10
25	Improved Beta Cell Glucose Sensitivity Plays Predominant Role in the Decrease in HbA1c with Cana and Lira in T2DM. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2020, 105, 3226-3233.	3.6	10
26	Dapagliflozin Impairs the Suppression of Endogenous Glucose Production in Type 2 Diabetes Following Oral Glucose. <i>Diabetes Care</i> , 2022, 45, 1372-1380.	8.6	4
27	Clinical Parameters, Fuel Oxidation, and Glucose Kinetics in Patients With Type 2 Diabetes Treated With Dapagliflozin Plus Saxagliptin. <i>Diabetes Care</i> , 2020, 43, 2519-2527.	8.6	3
28	Insulin secretion is a strong predictor for need of insulin therapy in patients with new-onset diabetes and <sc>HbA1c of more than 10%: A</sc> post hoc analysis of the <sc>EDICT</sc> study. <i>Diabetes, Obesity and Metabolism</i> , 2021, 23, 1631-1639.	4.4	2