Maria Fleseriu

List of Publications by Year
in descending order

250 papers	8,045 citations	66343 42 h-index	64796 79 g-index
316 all docs	316 docs citations	316 times ranked	4266 citing authors

#	Article	IF	Citations
1	Hormonal Replacement in Hypopituitarism in Adults: An Endocrine Society Clinical Practice Guideline. Journal of Clinical Endocrinology and Metabolism, 2016, 101, 3888-3921.	3.6	601
2	Mifepristone, a Glucocorticoid Receptor Antagonist, Produces Clinical and Metabolic Benefits in Patients with Cushing's Syndrome. Journal of Clinical Endocrinology and Metabolism, 2012, 97, 2039-2049.	3.6	409
3	Pasireotide Versus Octreotide in Acromegaly: A Head-to-Head Superiority Study. Journal of Clinical Endocrinology and Metabolism, 2014, 99, 791-799.	3.6	321
4	Consensus on diagnosis and management of Cushing's disease: a guideline update. Lancet Diabetes and Endocrinology,the, 2021, 9, 847-875.	11.4	315
5	Pasireotide versus continued treatment with octreotide or lanreotide in patients with inadequately controlled acromegaly (PAOLA): a randomised, phase 3 trial. Lancet Diabetes and Endocrinology,the, 2014, 2, 875-884.	11.4	309
6	Anti-CTLA-4 antibody therapy associated autoimmune hypophysitis: serious immune related adverse events across a spectrum of cancer subtypes. Pituitary, 2010, 13, 29-38.	2.9	266
7	Systemic Complications of Acromegaly and the Impact of the Current Treatment Landscape: An Update. Endocrine Reviews, 2019, 40, 268-332.	20.1	226
8	A Consensus on the Diagnosis and Treatment of Acromegaly Comorbidities: An Update. Journal of Clinical Endocrinology and Metabolism, 2020, 105, e937-e946.	3.6	207
9	Multidisciplinary management of acromegaly: A consensus. Reviews in Endocrine and Metabolic Disorders, 2020, 21, 667-678.	5.7	183
10	LCI699, a Potent 11Î²-hydroxylase Inhibitor, Normalizes Urinary Cortisol in Patients With Cushing's Disease: Results From a Multicenter, Proof-of-Concept Study. Journal of Clinical Endocrinology and Metabolism, 2014, 99, 1375-1383.	3.6	160
11	A Pituitary Society update to acromegaly management guidelines. Pituitary, 2021, 24, 1-13.	2.9	158
12	Landscape of Familial Isolated and Young-Onset Pituitary Adenomas: Prospective Diagnosis inAIPMutation Carriers. Journal of Clinical Endocrinology and Metabolism, 2015, 100, E1242-E1254.	3.6	144
13	Somatostatin receptor ligands and resistance to treatment in pituitary adenomas. Journal of Molecular Endocrinology, 2014, 52, R223-R240.	2.5	131
14	Growth hormone granulation pattern and somatostatin receptor subtype 2A correlate with postoperative somatostatin receptor ligand response in acromegaly: a large single center experience. Pituitary, 2013, 16, 490-498.	2.9	121
15	Osilodrostat, a potent oral 11Î²-hydroxylase inhibitor: 22-week, prospective, Phase II study in Cushingâ€™s disease. Pituitary, 2016, 19, 138-148.	2.9	116
16	Efficacy and safety of once-monthly pasireotide in Cushing's disease: a 12 month clinical trial. Lancet Diabetes and Endocrinology,the, 2018, 6, 17-26.	11.4	116
17	Efficacy and safety of osilodrostat in patients with Cushing's disease (LINC 3): a multicentre phase III study with a double-blind, randomised withdrawal phase. Lancet Diabetes and Endocrinology,the, 2020, 8, 748-761.	11.4	114
18	Medical management of Cushingâ€™s disease: what is the future?. Pituitary, 2012, 15, 330-341.	2.9	82

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19	Clinical Biology of the Pituitary Adenoma. Endocrine Reviews, 2022, 43, 1003-1037.	20.1	81
20	Remission rate after transsphenoidal surgery in patients with pathologically confirmed Cushingâ€™s disease, the role of cortisol, ACTH assessment and immediate reoperation: a large single center experience. Pituitary, 2013, 16, 452-458.	2.9	80
21	Changes in Plasma ACTH Levels and Corticotroph Tumor Size in Patients With Cushing's Disease During Long-term Treatment With the Glucocorticoid Receptor Antagonist Mifepristone. Journal of Clinical Endocrinology and Metabolism, 2014, 99, 3718-3727.	3.6	78
22	Clinical efficacy and safety results for dose escalation of somatostatin receptor ligands in patients with acromegaly: a literature review. Pituitary, 2011, 14, 184-193.	2.9	74
23	Updates on the role of adrenal steroidogenesis inhibitors in Cushingâ€™s syndrome: a focus on novel therapies. Pituitary, 2016, 19, 643-653.	2.9	70
24	Switching patients with acromegaly from octreotide to pasireotide improves biochemical control: crossover extension to a randomized, double-blind, Phase III study. BMC Endocrine Disorders, 2016, 16, 16.	2.2	63
25	Hypercoagulability and Risk of Venous Thromboembolic Events in Endogenous Cushing's Syndrome: A Systematic Meta-Analysis. Frontiers in Endocrinology, 2018, 9, 805.	3.5	62
26	Significant headache improvement after transsphenoidal surgery in patients with small sellar lesions. Journal of Neurosurgery, 2009, 110, 354-358.	1.6	60
27	A tale of pituitary adenomas: to NET or not to NET. Pituitary, 2019, 22, 569-573.	2.9	60
28	Efficacy and safety of levoketoconazole in the treatment of endogenous Cushing's syndrome (SONICS): a phase 3, multicentre, open-label, single-arm trial. Lancet Diabetes and Endocrinology,the, 2019, 7, 855-865.	11.4	60
29	Effect of pasireotide on glucose- and growth hormone-related biomarkers in patients with inadequately controlled acromegaly. Endocrine, 2016, 53, 210-219.	2.3	59
30	Psychological effects of dopamine agonist treatment in patients with hyperprolactinemia and prolactin-secreting adenomas. European Journal of Endocrinology, 2019, 180, 31-40.	3.7	58
31	Temozolomide for corticotroph pituitary adenomas refractory to standard therapy. Pituitary, 2011, 14, 80-91.	2.9	57
32	Updates in Diagnosis and Treatment of Acromegaly. European Endocrinology, 2018, 14, 57.	1.5	56
33	Challenges and pitfalls in the diagnosis of hyperprolactinemia. Arquivos Brasileiros De Endocrinologia E Metabologia, 2014, 58, 9-22.	1.3	55
34	Maintenance of Acromegaly Control in Patients Switching From Injectable Somatostatin Receptor Ligands to Oral Octreotide. Journal of Clinical Endocrinology and Metabolism, 2020, 105, e3785-e3797.	3.6	54
35	A New Therapeutic Approach in the Medical Treatment of Cushingâ€™S SYNDROME: GLUCOCORTICOID RECEPTOR BLOCKADE WITH MIFEPRISTONE. Endocrine Practice, 2013, 19, 313-326.	2.1	53
36	Predictors of silent corticotroph adenoma recurrence; a large retrospective single center study and systematic literature review. Pituitary, 2018, 21, 32-40.	2.9	53

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37	The Evaluation of Incidentally Discovered Adrenal Masses. Endocrine Practice, 2019, 25, 178-192.	2.1	53
38	Giant invasive pituitary prolactinoma with falsely low serum prolactin: the significance of â€˜hook effectâ€™. Journal of Neuro-Oncology, 2006, 79, 41-43.	2.9	52
39	Factors Associated with Biochemical Remission after Microscopic Transsphenoidal Surgery for Acromegaly. Journal of Neurological Surgery, Part B: Skull Base, 2014, 75, 047-052.	0.8	50
40	American Association of Clinical Endocrinologists and American College of Endocrinology Disease State Clinical Review: Diagnosis of Recurrence in Cushing Disease. Endocrine Practice, 2016, 22, 1436-1448.	2.1	50
41	Pituitary society guidance: pituitary disease management and patient care recommendations during the COVID-19 pandemicâ€”an international perspective. Pituitary, 2020, 23, 327-337.	2.9	49
42	Treatment of Cushing's disease: a mechanistic update. Journal of Endocrinology, 2014, 223, R19-R39.	2.6	48
43	Hypophysitis, the Growing Spectrum of a Rare Pituitary Disease. Journal of Clinical Endocrinology and Metabolism, 2022, 107, 10-28.	3.6	48
44	Fracture risk in adult patients treated with growth hormone replacement therapy for growth hormone deficiency: a prospective observational cohort study. Lancet Diabetes and Endocrinology,the, 2015, 3, 331-338.	11.4	45
45	American Association of Clinical Endocrinologists and American College of Endocrinology Disease State Clinical Review: Management of Acromegaly Patients: What is the Role of Pre-Operative Medical Therapy?. Endocrine Practice, 2015, 21, 668-673.	2.1	44
46	Self-perception of cognitive function among patients with active acromegaly, controlled acromegaly, and non-functional pituitary adenoma: a pilot study. Endocrine, 2014, 46, 585-593.	2.3	43
47	Extended treatment of Cushingâ€™s disease with pasireotide: results from a 2-year, Phase II study. Pituitary, 2014, 17, 320-326.	2.9	42
48	Functioning Pituitary Adenomas â€“ Current Treatment Options and Emerging Medical Therapies. European Endocrinology, 2019, 15, 30.	1.5	42
49	Congress of Neurological Surgeons Systematic Review and Evidence-Based Guideline for Pretreatment Endocrine Evaluation of Patients With Nonfunctioning Pituitary Adenomas. Neurosurgery, 2016, 79, E527-E529.	1.1	40
50	Medical Management of Cushingâ€™s Syndrome: Current and Emerging Treatments. Drugs, 2019, 79, 935-956.	10.9	39
51	Congress of Neurological Surgeons Systematic Review and Evidence-Based Guidelines on the Management of Patients With Nonfunctioning Pituitary Adenomas. Neurosurgery, 2016, 79, 521-523.	1.1	38
52	Giant GH-secreting pituitary adenomas: management of rare and aggressive pituitary tumors. European Journal of Endocrinology, 2015, 172, 707-713.	3.7	37
53	Safety and tolerability of pasireotide long-acting release in acromegalyâ€”results from the acromegaly, open-label, multicenter, safety monitoring program for treating patients who have a need to receive medical therapy (ACCESS) study. Endocrine, 2017, 55, 247-255.	2.3	37
54	EGFR/ErbB2-Targeting Lapatinib Therapy for Aggressive Prolactinomas. Journal of Clinical Endocrinology and Metabolism, 2021, 106, e917-e925.	3.6	37

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55	Discordant growth hormone and IGF-1 levels post pituitary surgery in patients with acromegaly naÃ¯ve to medical therapy and radiation: what to follow, GH or IGF-1 values?. Pituitary, 2012, 15, 562-570.	2.9	36
56	Hypercoagulability in Cushing Syndrome, Prevalence of Thrombotic Events: A Large, Single-Center, Retrospective Study. Journal of the Endocrine Society, 2020, 4, bvz033.	0.2	36
57	Pasireotide for acromegaly: long-term outcomes from an extension to the Phase III PAOLA study. European Journal of Endocrinology, 2020, 182, 583.	3.7	36
58	Congress of Neurological Surgeons Systematic Review and Evidence-Based Guideline on Posttreatment Follow-up Evaluation of Patients With Nonfunctioning Pituitary Adenomas. Neurosurgery, 2016, 79, E541-E543.	1.1	34
59	Update on adrenal insufficiency: diagnosis and management in pregnancy. Current Opinion in Endocrinology, Diabetes and Obesity, 2017, 24, 184-192.	2.3	34
60	Treatment options for Cushing disease after unsuccessful transsphenoidal surgery. Neurosurgical Focus, 2007, 23, 1-7.	2.3	33
61	Update on medical treatment for Cushingâ€™s disease. Clinical Diabetes and Endocrinology, 2016, 2, 16.	2.7	33
62	Effects of Pegvisomant and Pasireotide LAR on Vertebral Fractures in Acromegaly Resistant to First-generation SRLs. Journal of Clinical Endocrinology and Metabolism, 2020, 105, e100-e107.	3.6	33
63	More than a decade of real-world experience of pegvisomant for acromegaly: ACROSTUDY. European Journal of Endocrinology, 2021, 185, 525-538.	3.7	32
64	Failure of successful renal transplant to produce appropriate levels of 1,25-dihydroxyvitamin D. Osteoporosis International, 2007, 18, 363-368.	3.1	31
65	Relative adrenal insufficiency. Current Opinion in Endocrinology, Diabetes and Obesity, 2009, 16, 392-400.	2.3	31
66	Evaluation and Management of Adrenal Insufficiency in Critically ill Patients: Disease State Review. Endocrine Practice, 2017, 23, 716-725.	2.1	31
67	Clinical profile of silent growth hormone pituitary adenomas; higher recurrence rate compared to silent gonadotroph pituitary tumors, a large single center experience. Endocrine, 2017, 58, 528-534.	2.3	31
68	Hypercortisolemia Recurrence in Cushing's Disease; a Diagnostic Challenge. Frontiers in Endocrinology, 2019, 10, 740.	3.5	31
69	Pituitary Neoplasm Nomenclature Workshop: Does Adenoma Stand the Test of Time?. Journal of the Endocrine Society, 2021, 5, bvaa205.	0.2	31
70	Endocrinology in the time of COVID-19: Management of pituitary tumours. European Journal of Endocrinology, 2020, 183, G17-G23.	3.7	31
71	Medical Management of Persistent and Recurrent Cushing Disease. Neurosurgery Clinics of North America, 2012, 23, 653-668.	1.7	30
72	Mifepristone: is there a place in the treatment of Cushingâ€™s disease?. Endocrine, 2013, 44, 20-32.	2.3	30

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73	<scp>FRAX</scp> score in acromegaly: does it tell the whole story?. Clinical Endocrinology, 2014, 80, 614-616.	2.4	30
74	Recent Progress in the Medical Therapy of Pituitary Tumors. Endocrinology and Metabolism, 2017, 32, 162.	3.0	30
75	Clinical outcomes in male patients with lactotroph adenomas who required pituitary surgery: a retrospective single center study. Pituitary, 2018, 21, 454-462.	2.9	30
76	Use of late-night salivary cortisol to monitor response to medical treatment in Cushingâ€™s disease. European Journal of Endocrinology, 2020, 182, 207-217.	3.7	29
77	New avenues in the medical treatment of Cushingâ€™s disease: corticotroph tumor targeted therapy. Journal of Neuro-Oncology, 2013, 114, 1-11.	2.9	28
78	Silent somatotroph pituitary adenomas: an update. Pituitary, 2018, 21, 194-202.	2.9	28
79	Ipilimumab-induced hypophysitis, a single academic center experience. Pituitary, 2019, 22, 488-496.	2.9	28
80	Diagnostic utility of Gallium-68-somatostatin receptor PET/CT in ectopic ACTH-secreting tumors: a systematic literature review and single-center clinical experience. Pituitary, 2019, 22, 445-455.	2.9	28
81	Pasireotide: a novel treatment for patients with acromegaly. Drug Design, Development and Therapy, 2016, 10, 227.	4.3	27
82	Magnetic resonance imaging inâ€ the management of prolactinomas; a review of the evidence. Pituitary, 2020, 23, 16-26.	2.9	27
83	Risk factors and management of pasireotide-associated hyperglycemia in acromegaly. Endocrine Connections, 2020, 9, 1178-1190.	1.9	27
84	Serum IGF-1 In the Diagnosis of Acromegaly and the Profile of Patients with Elevated IGF-1 but Normal Glucose-Suppressed Growth Hormone. Endocrine Practice, 2012, 18, 817-825.	2.1	26
85	MANAGEMENT OF ENDOCRINE DISEASE: Cardiovascular risk assessment, thromboembolism, and infection prevention in Cushingâ€™s syndrome: a practical approach. European Journal of Endocrinology, 2021, 184, R207-R224.	3.7	26
86	The role of combination medical therapy in the treatment of acromegaly. Pituitary, 2017, 20, 136-148.	2.9	25
87	Late-night salivary cortisol may be valuable for assessing treatment response in patients with Cushingâ€™s disease: 12-month, Phase III pasireotide study. Endocrine, 2016, 54, 516-523.	2.3	24
88	Longâ€term efficacy and safety of onceâ€monthly pasireotide in Cushing's disease: A Phase III extension study. Clinical Endocrinology, 2019, 91, 776-785.	2.4	24
89	Physiciansâ€™ awareness of gadolinium retention and MRI timing practices in the longitudinal management of pituitary tumors: a â€œPituitary Societyâ€•survey. Pituitary, 2019, 22, 37-45.	2.9	24
90	Fertility and Pregnancy in Women With Hypopituitarism: A Systematic Literature Review. Journal of Clinical Endocrinology and Metabolism, 2020, 105, e53-e65.	3.6	24

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91	Acromegaly in the elderly patients. Endocrine, 2020, 68, 16-31.	2.3	24
92	Pegvisomant and Pasireotide LAR as second line therapy in acromegaly: clinical effectiveness and predictors of response. European Journal of Endocrinology, 2021, 184, 217-229.	3.7	24
93	Pituitary society expert Delphi consensus: operative workflow in endoscopic transsphenoidal pituitary adenoma resection. Pituitary, 2021, 24, 839-853.	2.9	24
94	Medical Treatment of Cushing Disease. Endocrinology and Metabolism Clinics of North America, 2015, 44, 51-70.	3.2	23
95	Updates in adrenal steroidogenesis inhibitors for Cushingâ€™s syndrome â€“ A practical guide. Best Practice and Research in Clinical Endocrinology and Metabolism, 2021, 35, 101490.	4.7	23
96	Maintenance of response to oral octreotide compared with injectable somatostatin receptor ligands in patients with acromegaly: a phase 3, multicentre, randomised controlled trial. Lancet Diabetes and Endocrinology,the, 2022, 10, 102-111.	11.4	23
97	Second-line treatment for Cushing's disease when initial pituitary surgery is unsuccessful. Current Opinion in Endocrinology, Diabetes and Obesity, 2007, 14, 323-328.	2.3	22
98	Can we predict long-term remission after somatostatin analog withdrawal in patients with acromegaly? Results from a multicenter prospective trial. Endocrine, 2014, 46, 577-584.	2.3	22
99	Polycystic ovarian syndrome and Cushing's syndrome: a persistent diagnostic quandary. European Journal of Obstetrics, Gynecology and Reproductive Biology, 2014, 175, 145-148.	1.1	22
100	Acromegaly: Assessing the Disorder and Navigating the Therapeutic Options for Treatment. Endocrine Practice, 2014, 20, 7-17.	2.1	22
101	Pituitary-Directed Therapies for Cushingâ€™s Disease. Frontiers in Endocrinology, 2018, 9, 164.	3.5	22
102	Medical therapy for Cushingâ€™s disease: adrenal steroidogenesis inhibitors and glucocorticoid receptor blockers. Pituitary, 2015, 18, 245-252.	2.9	21
103	Updates in the Medical Treatment of Pituitary Adenomas. Hormone and Metabolic Research, 2020, 52, 8-24.	1.5	21
104	Off-Label Use and Misuse of Testosterone, Growth Hormone, Thyroid Hormone, and Adrenal Supplements: Risks and Costs of a Growing Problem. Endocrine Practice, 2020, 26, 340-353.	2.1	21
105	Normal Hypothalamic-Pituitary-Adrenal Axis by High-Dose Cosyntropin Testing in Patients with Abnormal Response to Low-Dose Cosyntropin Stimulation: A Retrospective Review. Endocrine Practice, 2010, 16, 64-70.	2.1	20
106	An evaluation of the Acromegaly Treatment Satisfaction Questionnaire (Acro-TSQ) in adult patients with acromegaly, including correlations with other patient-reported outcome measures: data from two large multicenter international studies. Pituitary, 2020, 23, 347-358.	2.9	20
107	Levoketoconazole improves clinical signs and symptoms and patient-reported outcomes in patients with Cushingâ€™s syndrome. Pituitary, 2021, 24, 104-115.	2.9	20
108	Results from ACROCOVID: an international survey on the care of acromegaly during the COVID-19 era. Endocrine, 2021, 71, 273-280.	2.3	20

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109	Recovery rate of adrenal function after surgery in patients with acromegaly is higher than in those with non-functioning pituitary tumors: a large single center study. Pituitary, 2015, 18, 701-709.	2.9	19
110	Stereotactic Radiation Therapy in Pituitary Adenomas, is it Better than Conventional Radiation Therapy. Acta Endocrinologica, 2017, 13, 476-490.	0.3	19
111	Depression and Impulsivity Self-Assessment Tools to Identify Dopamine Agonist Side Effects in Patients With Pituitary Adenomas. Frontiers in Endocrinology, 2020, 11, 579606.	3.5	19
112	Diabetes Insipidus, Panhypopituitarism, and Severe Mental Status Deterioration in a Patient with Chordoid Glioma: Case Report and Literature Review. Endocrine Practice, 2009, 15, 240-245.	2.1	18
113	The tale in evolution: clarity, consistency and consultation, not contradiction and confusion. Pituitary, 2020, 23, 476-477.	2.9	18
114	Disease and Treatment-Related Burden in Patients With Acromegaly Who Are Biochemically Controlled on Injectable Somatostatin Receptor Ligands. Frontiers in Endocrinology, 2021, 12, 627711.	3.5	18
115	COVID-19 and hypopituitarism. Reviews in Endocrine and Metabolic Disorders, 2022, 23, 215-231.	5.7	18
116	Cushing's syndrome might be underappreciated in patients seeking bariatric surgery: a plea for screening. Surgery for Obesity and Related Diseases, 2009, 5, 116-119.	1.2	17
117	Acromegaly: a review of current medical therapy and new drugs on the horizon. Neurosurgical Focus, 2010, 29, E15.	2.3	17
118	Prevalence of comorbidities and concomitant medication use in acromegaly: analysis of real-world data from the United States. Pituitary, 2022, 25, 296-307.	2.9	17
119	Management of patients with persistent or recurrent Cushingâ€™s disease after initial pituitary surgery. Expert Review of Endocrinology and Metabolism, 2020, 15, 321-339.	2.4	16
120	The role of combination medical therapy in acromegaly. Current Opinion in Endocrinology, Diabetes and Obesity, 2013, 20, 321-329.	2.3	15
121	Levoketoconazole in the Treatment of Patients With Cushingâ€™s Syndrome and Diabetes Mellitus: Results From the SONICS Phase 3 Study. Frontiers in Endocrinology, 2021, 12, 595894.	3.5	15
122	â€œRelativeâ€•adRenal insufficiency in cRitical illness. Endocrine Practice, 2009, 15, 632-640.	2.1	14
123	Insight into cardiovascular risk factors in patients with acromegaly. Endocrine, 2014, 47, 1-2.	2.3	14
124	Development of a novel patient-reported measure for acromegaly: the Acro-TSQ. Pituitary, 2019, 22, 581-593.	2.9	14
125	Safety and Efficacy of Subcutaneous Pasireotide in Patients With Cushing's Disease: Results From an Open-Label, Multicenter, Single-Arm, Multinational, Expanded-Access Study. Frontiers in Endocrinology, 2019, 10, 436.	3.5	13
126	High prevalence of adrenal insufficiency at diagnosis and headache recovery in surgically resected Rathkeâ€™s cleft cystsâ€”a large retrospective single center study. Endocrine, 2019, 63, 463-469.	2.3	13

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127	A Novel Etiology of Hypophysitis. Endocrinology and Metabolism Clinics of North America, 2020, 49, 387-399.	3.2	13
128	Personalized Medical Treatment of Patients With Acromegaly: AÂReview. Endocrine Practice, 2022, 28, 321-332.	2.1	13
129	Successful Treatment of Sulfonylurea-Induced Prolonged Hypoglycemia with Use of Octreotide. Endocrine Practice, 2006, 12, 635-640.	2.1	12
130	Discovery of Cushingâ€™s Syndrome After Bariatric Surgery: Multicenter Series of 16 Patients. Obesity Surgery, 2015, 25, 2306-2313.	2.1	12
131	Glucose metabolism outcomes in acromegaly patients on treatment with pasireotide-LAR or pasireotide-LAR plus Pegvisomant. Endocrine, 2021, 73, 658-666.	2.3	11
132	Oral octreotide capsules for the treatment of acromegaly: comparison of 2 phase 3 trial results. Pituitary, 2021, 24, 943-953.	2.9	11
133	Clinical features and complications of acromegaly at diagnosis are not all the same: data from two large referral centers. Endocrine Connections, 2021, 10, 731-741.	1.9	11
134	Nonfunctioning Pituitary Microadenomas: Should Imaging Interval be Extended? A Large Single-center Cohort Study. Journal of Clinical Endocrinology and Metabolism, 2022, 107, e1231-e1241.	3.6	11
135	Candida Meningitis After Transsphenoidal Surgery: A Single-Institution Case Series and Literature Review. World Neurosurgery, 2017, 108, 41-49.	1.3	10
136	Mifepristone Increases Thyroid Hormone Requirements in Patients With Central Hypothyroidism: A Multicenter Study. Journal of the Endocrine Society, 2019, 3, 1707-1714.	0.2	10
137	Advances in the pharmacotherapy of patients with acromegaly. Discovery Medicine, 2014, 17, 329-38.	0.5	10
138	Pituitary Disorders and COVID-19, Reimagining Care: The Pandemic A Year and Counting. Frontiers in Endocrinology, 2021, 12, 656025.	3.5	9
139	Pituitary-directed medical therapy in Cushingâ€™s disease. Pituitary, 2015, 18, 238-244.	2.9	8
140	Preoperative Lateralization Modalities for Cushing Disease: Is Dynamic Magnetic Resonance Imaging or Cavernous Sinus Sampling More Predictive of Intraoperative Findings?. Journal of Neurological Surgery, Part B: Skull Base, 2015, 76, 218-224.	0.8	8
141	Medical treatment of acromegaly in pregnancy, highlights on new reports. Endocrine, 2015, 49, 577-579.	2.3	8
142	Cystic appearance on magnetic resonance imaging in bihormonal growth hormone and prolactin tumors in acromegaly. Pituitary, 2020, 23, 672-680.	2.9	8
143	Levoketoconazole: a novel treatment for endogenous Cushing's syndrome. Expert Review of Endocrinology and Metabolism, 2021, 16, 159-174.	2.4	8
144	Recent advances in the medical treatment of Cushingâ€™s disease. F1000prime Reports, 2014, 6, 18.	5.9	8

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145	Perioperative Management of a Patient With Cushing Disease. Journal of the Endocrine Society, 2022, 6, bvac010.	0.2	8
146	Monitoring Patient Improvement Parameters following Pasireotide Treatment in Cushingâ€™s Disease. Case Reports in Endocrinology, 2013, 2013, 1-5.	0.4	7
147	Absence of immunostaining for growth hormone in a subset of patients with acromegaly. Pituitary, 2014, 17, 103-108.	2.9	7
148	The journey in diagnosis and treatment, from pituitary adenoma to aggressive pituitary tumors. Reviews in Endocrine and Metabolic Disorders, 2020, 21, 201-202.	5.7	7
149	Pituitary Society Delphi Survey: An international perspective on endocrine management of patients undergoing transsphenoidal surgery for pituitary adenomas. Pituitary, 2022, 25, 64-73.	2.9	7
150	Patient-reported outcomes in patients with acromegaly treated with pegvisomant in the ACROSTUDY extension: A real-world experience. Pituitary, 2022, 25, 420-432.	2.9	7
151	Cabergoline-Induced Cerebral Spinal Fluid Leak in a Patient With a Large Prolactinoma and MEN1. , 2010, 20, 198-202.		5
152	Medical Therapy with Pasireotide in Recurrent Cushingâ€™s Disease: Experience of Patients Treated for At Least 1â€‰Year at a Single Center. Frontiers in Endocrinology, 2017, 8, 35.	3.5	5
153	Growth hormone deficiency and replacement effect on adult bone mass: A clinical update. Current Opinion in Endocrine and Metabolic Research, 2018, 3, 7-20.	1.4	5
154	Echocardiographic findings in acromegaly: prevalence of concentric left ventricular remodeling in a large single-center cohort. Journal of Endocrinological Investigation, 2021, 44, 2665-2674.	3.3	5
155	Long-Term Control of Urinary Free Cortisol With Osilodrostat in Patients With Cushingâ€™s Disease: Final Results From the LINC 2 Study. Journal of the Endocrine Society, 2021, 5, A521-A522.	0.2	5
156	What to Do with Incidentally Discovered Pituitary Abnormalities?. Medical Clinics of North America, 2021, 105, 1081-1098.	2.5	5
157	Metformin-based oral antidiabetic therapy proved effective in hyperglycaemia associated with pasireotide in patients with acromegaly. Endocrine Abstracts, 0, , .	0.0	5
158	Pasireotide alone or in combination with cabergoline effectively controls urinary free cortisol levels: results from a prospective study in patients with Cushing's disease (CAPACITY). Endocrine Abstracts, 0, , .	0.0	5
159	Non-functioning pituitary adenomas, not all the same and certainly not boring!. Pituitary, 2018, 21, 109-110.	2.9	4
160	Recombinant growth hormone treatment, osteoporosis and fractures, more complicated than it seems!. Endocrine, 2018, 59, 463-465.	2.3	4
161	Thromboembolic disease in hypercortisolism. Current Opinion in Endocrinology, Diabetes and Obesity, 2021, 28, 330-336.	2.3	4
162	Safety and Efficacy of Levoketoconazole in the Treatment of Endogenous Cushingâ€™s Syndrome (LOGICS): Results From a Double-Blind, Placebo-Controlled, Randomized Withdrawal Study. Journal of the Endocrine Society, 2021, 5, A526-A526.	0.2	4

#	Article	IF	Citations
163	Switching patients with acromegaly from octreotide LAR to pasireotide LAR improves biochemical control: crossover extension to a randomized, double-blind, multicenter, Phase III study. Endocrine Abstracts, 0, , .	0.0	4
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