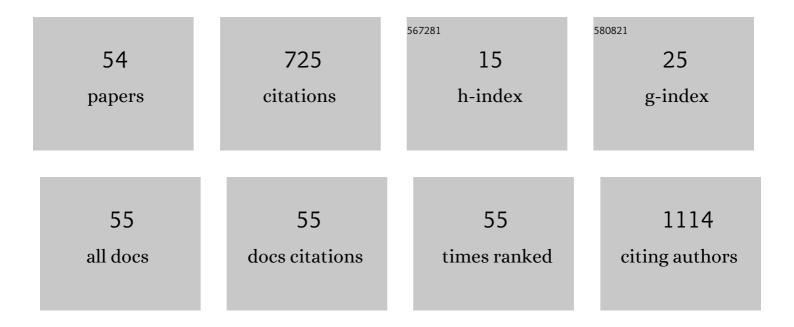
## Brun Jean-Frédéric

List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	Grape Polyphenols Prevent Fructose-Induced Oxidative Stress and Insulin Resistance in First-Degree Relatives of Type 2 Diabetic Patients. Diabetes Care, 2013, 36, 1454-1461.	8.6	113
2	Hemorheological alterations related to training and overtraining. Biorheology, 2010, 47, 95-115.	0.4	56
3	Limited Accuracy of Surrogates of Insulin Resistance during Puberty in Obese and Lean Children at Risk for Altered Glucoregulation. Journal of Clinical Endocrinology and Metabolism, 2005, 90, 761-767.	3.6	45
4	Obesity-related increase in whole blood viscosity includes different profiles according to fat localization. Clinical Hemorheology and Microcirculation, 2013, 55, 63-73.	1.7	41
5	Evaluation of insulin sensitivity and glucose effectiveness during a standardized breakfast test: comparison with the minimal model analysis of an intravenous glucose tolerance test. Metabolism: Clinical and Experimental, 2006, 55, 676-690.	3.4	37
6	Individualized Exercise Training at Maximal Fat Oxidation Combined with Fruit and Vegetable-Rich Diet in Overweight or Obese Women: The LIPOXmax-Réunion Randomized Controlled Trial. PLoS ONE, 2015, 10, e0139246.	2.5	32
7	Relationship between blood lactate concentration and substrate utilization during exercise in type 2 diabetic postmenopausal women. Metabolism: Clinical and Experimental, 2005, 54, 1102-1107.	3.4	31
8	Metabolic Influences Modulating Erythrocyte Deformability and Eryptosis. Metabolites, 2022, 12, 4.	2.9	26
9	Post-prandial hypoglycemia results from a non-glucose-dependent inappropriate insulin secretion in Roux-en-Y gastric bypassed patients. Metabolism: Clinical and Experimental, 2016, 65, 18-26.	3.4	23
10	Substrate oxidation during exercise at moderate and hard intensity in middle-aged and young athletes vs sedentary men. Metabolism: Clinical and Experimental, 2005, 54, 1411-1419.	3.4	21
11	Exercise hemorheology: Moving from old simplistic paradigms to a more complex picture. Clinical Hemorheology and Microcirculation, 2013, 55, 15-27.	1.7	20
12	Assessment of single-dose benzodiazepines on insulin secretion, insulin sensitivity and glucose effectiveness in healthy volunteers: a double-blind, placebo-controlled, randomized cross-over trial [ISRCTN08745124]. BMC Clinical Pharmacology, 2004, 4, 3.	2.5	18
13	Effects of exercise training on blood rheology: A meta-analysis. Clinical Hemorheology and Microcirculation, 2011, 49, 199-205.	1.7	18
14	Both overall adiposity and abdominal adiposity increase blood viscosity by separate mechanisms. Clinical Hemorheology and Microcirculation, 2011, 48, 257-263.	1.7	16
15	Relationships between insulin sensitivity measured with the oral minimal model and blood rheology. Clinical Hemorheology and Microcirculation, 2012, 51, 29-34.	1.7	15
16	Assessment of insulin sensitivity (S I) and glucose effectiveness (S G) from a standardized hyperglucidic breakfast test in type 2 diabetics exhibiting various levels of insulin resistance. Acta Diabetologica, 2013, 50, 143-153.	2.5	15
17	Long term (3 years) weight loss after low intensity endurance training targeted at the level of maximal muscular lipid oxidation. Integrative Obesity and Diabetes, 2018, 4, .	0.2	13
18	Oxidative mechanisms at rest and during exercise. Clinica Chimica Acta, 2007, 383, 1-20.	1.1	11

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19	Blood rheology and body composition as determinants of exercise performance in female rugby players. Clinical Hemorheology and Microcirculation, 2011, 49, 207-214.	1.7	11
20	Minimal model-derived insulin sensitivity, insulin secretion and glucose tolerance: relationships with blood rheology. Clinical Hemorheology and Microcirculation, 2012, 51, 21-27.	1.7	11
21	Beyond the Calorie Paradigm: Taking into Account in Practice the Balance of Fat and Carbohydrate Oxidation during Exercise?. Nutrients, 2022, 14, 1605.	4.1	11
22	Blood rheology as a mirror of endocrine and metabolic homeostasis in health and disease1. Clinical Hemorheology and Microcirculation, 2018, 69, 239-265.	1.7	10
23	In vitro influence of zinc and magnesium on the deformability of red blood cells artificially hardened by heating. Biological Trace Element Research, 1995, 47, 247-255.	3.5	9
24	Are metabolically healthy obese patients also hemorheologically healthy?. Clinical Hemorheology and Microcirculation, 2015, 61, 39-46.	1.7	9
25	Nutrition as a determinant of blood rheology and fibrinogen in athletes. Clinical Hemorheology and Microcirculation, 2004, 30, 1-8.	1.7	9
26	Body composition and exercise performance as determinants of blood rheology in middle-aged patients exhibiting the metabolic syndrome. Clinical Hemorheology and Microcirculation, 2011, 49, 215-223.	1.7	8
27	Impact of a Mobile Telerehabilitation Solution on Metabolic Health Outcomes and Rehabilitation Adherence in Patients With Obesity: Randomized Controlled Trial. JMIR MHealth and UHealth, 2021, 9, e28242.	3.7	8
28	Reciprocal relationships between blood lactate and hemorheology in athletes: another hemorheologic paradox?. Clinical Hemorheology and Microcirculation, 2004, 30, 331-7.	1.7	8
29	Interrelationships among body composition, blood rheology and exercise performance. Clinical Hemorheology and Microcirculation, 2011, 49, 183-197.	1.7	7
30	Nutritional and metabolic determinants of blood rheology differ between trained and sedentary individuals. Clinical Hemorheology and Microcirculation, 2013, 55, 39-54.	1.7	7
31	Exercise Makes More than an Energy Deficit: Toward Improved Protocols for the Management of Obesity?. EBioMedicine, 2015, 2, 1862-1863.	6.1	7
32	ß-cell pancreatic dysfunction plays a role in hyperglycemic peaks observed after gastric bypass surgery of obese patients. Surgery for Obesity and Related Diseases, 2016, 12, 795-802.	1.2	7
33	Seeking the optimal hematocrit: May hemorheological modelling provide a solution?. Clinical Hemorheology and Microcirculation, 2018, 69, 493-501.	1.7	6
34	Prediction of hematocrit and red cell deformability with whole body biological impedance. Clinical Hemorheology and Microcirculation, 2010, 44, 237-244.	1.7	5
35	Segmental bioelectrical impedance analysis (SBIA) and blood rheology: Reducing the gap between in vivo and in vitro?. Clinical Hemorheology and Microcirculation, 2017, 64, 603-611.	1.7	5
36	Blood rheology and body composition as determinants of exercise performance in male soccer players. Clinical Hemorheology and Microcirculation, 2011, 49, 225-230.	1.7	4

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37	Versatility of â€~hemorheologic fitness' according to exercise intensity: emphasis on the "healthy primitive lifestyle― Korea Australia Rheology Journal, 2014, 26, 249-253.	1.7	4
38	Are overall adiposity and abdominal adiposity separate or redundant determinants of blood viscosity?. Clinical Hemorheology and Microcirculation, 2015, 61, 31-38.	1.7	4
39	Exercise-induced changes in hematocrit and hematocrit/viscosity ratio in male rugby players. Clinical Hemorheology and Microcirculation, 2017, 64, 817-826.	1.7	4
40	One-year follow-up of blood viscosity factors and hematocrit/viscosity ratio inÂelite soccer players. Clinical Hemorheology and Microcirculation, 2017, 64, 799-808.	1.7	4
41	Prediction of RBC aggregability and deformability by whole body bioimpedance measurements analyzed according to Hanai's mixture conductivity theory. Clinical Hemorheology and Microcirculation, 2011, 47, 151-161.	1.7	3
42	Hematocrit and hematocrit viscosity ratio during exercise in athletes: Even closer to predicted optimal values?. Clinical Hemorheology and Microcirculation, 2017, 64, 777-787.	1.7	3
43	Leg electrical resistance predicts venous blood viscosity and hematocrit. Clinical Hemorheology and Microcirculation, 2019, 71, 397-402.	1.7	3
44	Hemorheologic effects of low intensity endurance training in type 2 diabetic patients: A pilot study. Clinical Hemorheology and Microcirculation, 2016, 61, 579-589.	1.7	1
45	Rise in RBC aggregability and concomitant decrease in blood pressure 10Âdays afterÂinjection of the long acting erythropoietin analogue methoxy polyethylene glycol-epoetin-β (MIRCERAî). Clinical Hemorheology and Microcirculation, 2017, 64, 809-816.	1.7	1
46	« Optimal » vs actual hematocrit in obesity and overweight. Clinical Hemorheology and Microcirculation, 2017, 64, 593-601.	1.7	1
47	Actual vs optimal fetal hematocrit measuredÂwith punctures of cord blood inÂutero: Relationship with umbilical arteryÂresistance. Clinical Hemorheology and Microcirculation, 2017, 64, 789-797.	1.7	1
48	Shear-dependency of the predicted ideal hematocrit. Clinical Hemorheology and Microcirculation, 2019, 71, 379-385.	1.7	1
49	Exercise targeted at the level of maximal lipid oxidation (LIPOXmax) improves weight loss, decreases orexigenic pulsions and increases satiety after sleeve gastrectomy. Global Journal of Obesity, Diabetes and Metabolic Syndrome, 0, , 017-021.	0.3	1
50	The 6-minute walk-test in type 2 diabetics predicts to some extent maximal aerobic capacity but not its training-induced improvement. Annals of Musculoskeletal Medicine, 2020, , 003-009.	0.6	1
51	The ESCHM "1st Hemorheology Daysâ€, 19 - 21 July 2017 in Puchberg/Schneeberg, Austria. Clinical Hemorheology and Microcirculation, 2018, 69, 491-492.	1.7	Ο
52	Fetal growth retardation and hemorheological predictors of oxygen delivery in hypertensive vs normotensive pregnant women. Clinical Hemorheology and Microcirculation, 2019, 71, 387-396.	1.7	0
53	Purified egg protein supplementation has beneficial effects on body composition, metabolism and eating behavior and results in a more sustained weight loss than low fat diet. Integrative Obesity and Diabetes, 2018, 4, .	0.2	0
54	Subjects with substituted hypothyroidism oxidize more lipids and carbohydrates during exercise. Annals of Musculoskeletal Medicine, 0, , 013-016.	0.6	0