

# Tomohiro Kubota

## List of Publications by Year in descending order

Source: <https://exaly.com/author-pdf/3432962/publications.pdf>

Version: 2024-02-01

16  
papers

295  
citations

1307594

7  
h-index

1199594

12  
g-index

16  
all docs

16  
docs citations

16  
times ranked

385  
citing authors

#	ARTICLE	IF	CITATIONS
1	Clinical practice guidance for childhood-onset systemic lupus erythematosus secondary publication. <i>Modern Rheumatology</i> , 2022, 32, 239-247.	1.8	1
2	A case of cryopyrin-associated periodic fever syndrome during canakinumab administration complicated by inflammatory bowel disease. <i>Clinical Rheumatology</i> , 2021, 40, 393-397.	2.2	3
3	Detailed analysis of Japanese patients with adenosine deaminase 2 deficiency reveals characteristic elevation of type II interferon signature and STAT1 hyperactivation. <i>Journal of Allergy and Clinical Immunology</i> , 2021, 148, 550-562.	2.9	30
4	Pediatric Dual-Energy X-Ray Absorptiometry in Japan: A Proposal for Shared Access to Equipment. <i>Journal of Nippon Medical School</i> , 2021, 88, 296-300.	0.9	0
5	Tocilizumab modifies clinical and laboratory features of macrophage activation syndrome complicating systemic juvenile idiopathic arthritis. <i>Pediatric Rheumatology</i> , 2020, 18, 2.	2.1	36
6	Clinical practice guidance for juvenile idiopathic arthritis (JIA) 2018. <i>Modern Rheumatology</i> , 2019, 29, 41-59.	1.8	25
7	Ultrasonographic imaging in phalangeal microgeodic syndrome: a case report. <i>Modern Rheumatology Case Reports</i> , 2019, 3, 67-69.	0.7	0
8	Clinical features and characteristics of uveitis associated with juvenile idiopathic arthritis in Japan: first report of the pediatric rheumatology association of Japan (PRAJ). <i>Pediatric Rheumatology</i> , 2019, 17, 15.	2.1	23
9	AB1050 TOCILIZUMAB MODIFIES CLINICAL MANIFESTATIONS AND LABORATORY FEATURES OF SYSTEMIC JUVENILE IDIOPATHIC ARTHRITIS ASSOCIATED MACROPHAGE ACTIVATION SYNDROME. , 2019, , .		0
10	S100A12 and vascular endothelial growth factor can differentiate Blau syndrome and familial Mediterranean fever from systemic juvenile idiopathic arthritis. <i>Clinical Rheumatology</i> , 2019, 38, 835-840.	2.2	6
11	Early prediction for over two years efficacy of the first biologic agent for polyarticular juvenile idiopathic arthritis: A multi-institutional study in Japan. <i>Modern Rheumatology</i> , 2018, 28, 826-831.	1.8	2
12	Validation of Classification Criteria of Macrophage Activation Syndrome in Japanese Patients With Systemic Juvenile Idiopathic Arthritis. <i>Arthritis Care and Research</i> , 2018, 70, 1412-1415.	3.4	15
13	Disease activity score in 28 joints at 3 months after the initiation of biologic agent can be a predictive target for switching to the second biologic agent in patients with polyarticular juvenile idiopathic arthritis. <i>Modern Rheumatology</i> , 2016, 26, 358-361.	1.8	3
14	The safety and effectiveness of HBV vaccination in patients with juvenile idiopathic arthritis controlled by treatment. <i>Modern Rheumatology</i> , 2016, 26, 368-371.	1.8	16
15	Interleukin-18 for predicting the development of macrophage activation syndrome in systemic juvenile idiopathic arthritis. <i>Clinical Immunology</i> , 2015, 160, 277-281.	3.2	135
16	A case of planned pregnancy with an interruption in infliximab administration in a 27-year-old female patient with rheumatoid-factor-positive polyarthritis juvenile idiopathic arthritis which improved after restarting infliximab and methotrexate. <i>Modern Rheumatology</i> , 2008, 18, 189-192.	1.8	0