Juris J Meier

List of Publications by Year
in descending order

169 papers	16,696 citations	16791 66 h-index	17891 125 g-index
183 all docs	183 docs citations	183 times ranked	13685 citing authors

#	Article	IF	Citations
1	The incretin/glucagon system as a target for pharmacotherapy of obesity. Obesity Reviews, 2022, 23, .	3.1	26
2	Effect of upper gastrointestinal disease on the pharmacokinetics of oral semaglutide in subjects with type 2 diabetes. Diabetes, Obesity and Metabolism, 2022, 24, 684-692.	2.2	6
3	Acute effects of linagliptin on intact and total glucagonâ€like peptideâ€1 and gastric inhibitory polypeptide levels in insulinâ€dependent type 2 diabetes patients with and without moderate renal impairment. Diabetes, Obesity and Metabolism, 2022, 24, 806-815.	2.2	0
4	Measurement of Gastric Emptying Using a 13C-octanoic Acid Breath Test with Wagner-Nelson Analysis and Scintigraphy in Type 2 Diabetes. Experimental and Clinical Endocrinology and Diabetes, 2022, 130, 751-757.	0.6	7
5	Comparison of Insulin-Treated Patients with Ambiguous Diabetes Type with Definite Type 1 and Type 2 Diabetes Mellitus Subjects: A Clinical Perspective. Diabetes and Metabolism Journal, 2022, , .	1.8	0
6	Efficacy and safety of oral semaglutide by subgroups of patient characteristics in the <scp>PIONEER</scp> phase 3 programme. Diabetes, Obesity and Metabolism, 2022, 24, 1338-1350.	2.2	12
7	Concomitant iGlarLixi and Sodium-Glucose Co-transporter-2 Inhibitor Therapy in Adults with Type 2 Diabetes: LixiLan-G Trial and Real-World Evidence Results. Diabetes Therapy, 2022, 13, 205-215.	1.2	5
8	Patients with Type 1 Diabetes Treated with Insulin Pumps Need Widely Heterogeneous Basal Rate Profiles Ranging from Negligible to Pronounced Diurnal Variability. Journal of Diabetes Science and Technology, 2021, 15, 1262-1272.	1.3	8
9	GLP-1 receptor agonists in the treatment of type 2 diabetes â€“ state-of-the-art. Molecular Metabolism, 2021, 46, 101102.	3.0	518
10	Day-to-Day Variations in Fasting Plasma Glucose Do Not Influence Gastric Emptying in Subjects With Type 1 Diabetes. Diabetes Care, 2021, 44, 479-488.	4.3	10
11	Twenty-Four Hour Fasting (Basal Rate) Tests to Achieve Custom-Tailored, Hour-by-Hour Basal Insulin Infusion Rates in Patients With Type 1 Diabetes Using Insulin Pumps (CSII). Journal of Diabetes Science and Technology, 2021, 15, 360-370.	1.3	12
12	Another milestone in the evolution of GLP-1-based diabetes therapies. Nature Medicine, 2021, 27, 952-953.	15.2	3
13	Efficacy of Semaglutide in a Subcutaneous and an Oral Formulation. Frontiers in Endocrinology, 2021, 12, 645617.	1.5	42
14	Macronutrient intake, appetite, food preferences and exocrine pancreas function after treatment with shortâ€and longâ€acting glucagonâ€like peptideâ€1 receptor agonists in type 2 diabetes. Diabetes, Obesity and Metabolism, 2021, 23, 2344-2353.	2.2	8
15	Treatment of type 2 diabetes: challenges, hopes, and anticipated successes. Lancet Diabetes and Endocrinology,the, 2021, 9, 525-544.	5.5	121
16	Efficacy, Safety, and Mechanistic Insights of Cotadutide, a Dual Receptor Glucagon-Like Peptide-1 and Glucagon Agonist. Journal of Clinical Endocrinology and Metabolism, 2020, 105, 803-820.	1.8	75
17	No evidence of tachyphylaxis for insulinotropic actions of glucose-dependent insulinotropic polypeptide (GIP) in subjects with type 2 diabetes, their first-degree relatives, or in healthy subjects. Peptides, 2020, 125, 170176.	1.2	3
18	Efficacy and Safety of iGlarLixi, Fixed-Ratio Combination of Insulin Glargine and Lixisenatide, Compared with Basal-Bolus Regimen in Patients with TypeÂ2 Diabetes: Propensity Score Matched Analysis. Diabetes Therapy, 2020, 11, 305-318.	1.2	18

#	Article	IF	Citations
19	Effects of sequential treatment with lixisenatide, insulin glargine, or their combination on mealâ€related glycaemic excursions, insulin and glucagon secretion, and gastric emptying in patients with type 2 diabetes. Diabetes, Obesity and Metabolism, 2020, 22, 599-611.	2.2	10
20	Incretinâ€based glucoseâ€lowering medications and the risk of acute pancreatitis and malignancies: a metaâ€analysis based on cardiovascular outcomes trials. Diabetes, Obesity and Metabolism, 2020, 22, 699-704.	2.2	75
21	Reduced COVID-19 Mortality With Sitagliptin Treatment? Weighing the Dissemination of Potentially Lifesaving Findings Against the Assurance of High Scientific Standards. Diabetes Care, 2020, 43, 2906-2909.	4.3	30
22	Prediction of Individual Basal Rate Profiles From Patient Characteristics in Type 1 Diabetes on Insulin Pump Therapy. Journal of Diabetes Science and Technology, 2020, 15, 193229682097269.	1.3	3
23	Switching From Insulin Bolus Treatment to GLP-1 RAs Added to Continued Basal Insulin in People With Type 2 Diabetes on Basal-Bolus Insulin. Diabetes Care, 2020, 43, 2333-2335.	4.3	8
24	Efficacy and Safety of Short- and Long-Acting Glucagon-Like Peptide 1 Receptor Agonists on a Background of Basal Insulin in Type 2 Diabetes: A Meta-analysis. Diabetes Care, 2020, 43, 2303-2312.	4.3	54
25	GLP-1 receptor agonists in type 1 diabetes: a MAG1C bullet?. Lancet Diabetes and Endocrinology,the, 2020, 8, 262-264.	5.5	13
26	SGLT-2 Inhibition and the Endocrine Pancreatic Alpha Cell: Direct or Indirect Mechanisms of Inhibition?. Endocrinology, 2020, 161, .	1.4	1
27	Effects of Lixisenatide Versus Liraglutide (Short- and Long-Acting GLP-1 Receptor Agonists) on Esophageal and Gastric Function in Patients With Type 2 Diabetes. Diabetes Care, 2020, 43, 2137-2145.	4.3	21
28	Efficacy, safety and cardiovascular outcomes of onceâ€daily oral semaglutide in patients with type 2 diabetes: The <scp>PIONEER</scp> programme. Diabetes, Obesity and Metabolism, 2020, 22, 1263-1277.	2.2	68
29	Islet Amyloid in Patients With Diabetes Due to Exocrine Pancreatic Disorders, Type 2 Diabetes, and Nondiabetic Patients. Journal of Clinical Endocrinology and Metabolism, 2020, 105, 2595-2605.	1.8	13
30	Glucagon-like peptide 1 (GLP-1). Molecular Metabolism, 2019, 30, 72-130.	3.0	850
31	Characterization of Non-hormone Expressing Endocrine Cells in Fetal and Infant Human Pancreas. Frontiers in Endocrinology, 2019, 9, 791.	1.5	2
32	Importance of localization of insulinomas: a systematic analysis. Journal of Hepato-Biliary-Pancreatic Sciences, 2019, 26, 383-392.	1.4	15
33	Oral semaglutide versus subcutaneous liraglutide and placebo in type 2 diabetes (PIONEER 4): a randomised, double-blind, phase 3a trial. Lancet, The, 2019, 394, 39-50.	6.3	315
34	Pioneering oral peptide therapy for patients with type 2 diabetes. Lancet Diabetes and Endocrinology,the, 2019, 7, 500-502.	5.5	4
35	GIP and GLP-1: Stepsiblings Rather Than Monozygotic Twins Within the Incretin Family. Diabetes, 2019, 68, 897-900.	0.3	39
36	Diabetes and Aging: From Treatment Goals to Pharmacologic Therapy. Frontiers in Endocrinology, 2019, 10, 45.	1.5	94

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37	Heart failure and type 2 diabetes: From cardiovascular outcome trials, with hope. Diabetes, Obesity and Metabolism, 2019, 21, 1081-1087.	2.2	39
38	MANAGEMENT OF ENDOCRINE DISEASE: Are all GLP-1 agonists equal in the treatment of type 2 diabetes?. European Journal of Endocrinology, 2019, 181, R211-R234.	1.9	156
39	The role of incretin-based therapies in the management of type 2 diabetes mellitus: perspectives on the past, present and future. Diabetes Mellitus, 2019, 22, 461-466.	0.5	1
40	Incretin hormones: Their role in health and disease. Diabetes, Obesity and Metabolism, 2018, 20, 5-21.	2.2	451
41	Adaptive changes in pancreas post Rouxâ€enâ€Y gastric bypass induced weight loss. Diabetes/Metabolism Research and Reviews, 2018, 34, e3025.	1.7	15
42	Propensityâ€scoreâ€matched comparative analyses of simultaneously administered fixedâ€ratio insulin glargine 100â€‰U and lixisenatide (iGlarLixi) vs sequential administration of insulin glargine and lixisenatide in uncontrolled type 2 diabetes. Diabetes, Obesity and Metabolism, 2018, 20, 2821-2829.	2.2	23
43	Basal rate tests (24â€hour fasts) performed in typeâ€1 diabetic subjects with either absolute fasting or snacks containing negligible carbohydrate amounts result in similar glucose profiles: <scp>A</scp> randomized controlled prospective trial. Diabetes, Obesity and Metabolism, 2017, 19, 783-790.	2.2	0
44	Impact of insulin glargine and lixisenatide on Î²â€cell function in patients with type 2 diabetes mellitus: <scp>A</scp> randomized openâ€label study. Diabetes, Obesity and Metabolism, 2017, 19, 1625-1629.	2.2	9
45	Incretinâ€based glucoseâ€lowering medications and the risk of acute pancreatitis and/or pancreatic cancer: Reassuring data from cardioâ€vascular outcome trials. Diabetes, Obesity and Metabolism, 2017, 19, 1327-1328.	2.2	17
46	A case series of verrucae vulgares mimicking hyperkeratosis in individuals with diabetic foot ulcers. Diabetic Medicine, 2017, 34, 1165-1168.	1.2	5
47	Sitagliptin plus basal insulin: simplifying in-hospital diabetes treatment?. Lancet Diabetes and Endocrinology,the, 2017, 5, 83-85.	5.5	10
48	Cardiovascular Actions and Clinical Outcomes With Glucagon-Like Peptide-1 Receptor Agonists and Dipeptidyl Peptidase-4 Inhibitors. Circulation, 2017, 136, 849-870.	1.6	415
49	Break point instead of ACE: acarbose, post-load glycaemic excursions, and cardiovascular events. Lancet Diabetes and Endocrinology,the, 2017, 5, 843-845.	5.5	2
50	Defects in Î±-Cell Function in Patients With Diabetes Due to Chronic Pancreatitis Compared With Patients With Type 2 Diabetes and Healthy Individuals. Diabetes Care, 2017, 40, 1314-1322.	4.3	21
51	Occurrence of nausea, vomiting and diarrhoea reported as adverse events in clinical trials studying glucagonâ€like peptideâ€1 receptor agonists: A systematic analysis of published clinical trials. Diabetes, Obesity and Metabolism, 2017, 19, 336-347.	2.2	194
52	A metaâ€analysis comparing clinical effects of shortâ€or longâ€acting <scp>GLP</scp>â€1 receptor agonists versus insulin treatment from headâ€toâ€head studies in type 2 diabetic patients. Diabetes, Obesity and Metabolism, 2017, 19, 216-227.	2.2	123
53	Criteria for Determining Malignancy in Pancreatic Intraductal Papillary Mucinous Neoplasm Based on Computed Tomography. Digestion, 2016, 94, 230-239.	1.2	6
54	Histological changes in endocrine and exocrine pancreatic tissue from patients exposed to incretinâ€based therapies. Diabetes, Obesity and Metabolism, 2016, 18, 1253-1262.	2.2	13

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55	Impact of proton pump inhibitor treatment on pancreatic beta-cell area and beta-cell proliferation in humans. European Journal of Endocrinology, 2016, 175, 467-476.	1.9	2
56	Gastrointestinal safety of incretin therapies: are we there yet?. Nature Reviews Gastroenterology and Hepatology, 2016, 13, 630-632.	8.2	5
57	Incretin mimetics and insulin â€" closing the gap to normoglycaemia. Nature Reviews Endocrinology, 2016, 12, 689-690.	4.3	2
58	The insulinotropic effect of pulsatile compared with continuous intravenous delivery of GLP-1. Diabetologia, 2016, 59, 966-969.	2.9	1
59	The incretin effect in healthy individuals and those with type 2 diabetes: physiology, pathophysiology, and response to therapeutic interventions. Lancet Diabetes and Endocrinology,the, 2016, 4, 525-536.	5.5	310
60	Abundance and turnover of GLP-1 producing L-cells in ileal mucosa are not different in patients with and without type 2 diabetes. Metabolism: Clinical and Experimental, 2016, 65, 84-91.	1.5	12
61	Differential expression of cell-cycle regulators in human beta-cells derived from insulinoma tissue. Metabolism: Clinical and Experimental, 2016, 65, 736-746.	1.5	9
62	Î²-Cell Deficit in Obese Type 2 Diabetes, a Minor Role of Î²-Cell Dedifferentiation and Degranulation. Journal of Clinical Endocrinology and Metabolism, 2016, 101, 523-532.	1.8	107
63	Insulin Secretion. , 2016, , 546-555.e5.		3
64	Diabetes associated with pancreatic diseases. Current Opinion in Gastroenterology, 2015, 31, 400-406.	1.0	35
65	Incretin-based therapies: where will we be 50Âyears from now?. Diabetologia, 2015, 58, 1745-1750.	2.9	39
66	Hyperglycemia Potentiates the Slowing of Gastric Emptying Induced by Exogenous GLP-1. Diabetes Care, 2015, 38, 1123-1129.	4.3	28
67	Upper gastrointestinal motility and symptoms in individuals with diabetes, prediabetes and normal glucose tolerance. Diabetologia, 2015, 58, 1175-1182.	2.9	36
68	Effects of glucose-dependent insulinotropic polypeptide on gastric emptying, glycaemia and insulinaemia during critical illness: a prospective, double blind, randomised, crossover study. Critical Care, 2015, 19, 20.	2.5	18
69	Contrasting Effects of Lixisenatide and Liraglutide on Postprandial Glycemic Control, Gastric Emptying, and Safety Parameters in Patients With Type 2 Diabetes on Optimized Insulin Glargine With or Without Metformin: A Randomized, Open-Label Trial. Diabetes Care, 2015, 38, 1263-1273.	4.3	216
70	Studying Pancreatic Risks Caused by Incretin-Based Therapies. Journal of Diabetes Science and Technology, 2014, 8, 895-897.	1.3	4
71	Glucagon-Like Peptide 1 Attenuates the Acceleration of Gastric Emptying Induced by Hypoglycemia in Healthy Subjects. Diabetes Care, 2014, 37, 1509-1515.	4.3	32
72	Pancreatitis and incretin-based drugs: clarity or confusion?. Lancet Diabetes and Endocrinology,the, 2014, 2, 92-93.	5.5	6

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73	Risk of pancreatitis in patients treated with incretin-based therapies. Diabetologia, 2014, 57, 1320-1324.	2.9	84
74	Do current incretin mimetics exploit the full therapeutic potential inherent in GLP-1 receptor stimulation?. Diabetologia, 2013, 56, 1878-1883.	2.9	36
75	Hyperglycaemia is associated with impaired pulsatile insulin secretion: effect of basal insulin therapy. Diabetes, Obesity and Metabolism, 2013, 15, 258-263.	2.2	16
76	Role of Reduced Î²-Cell Mass Versus Impaired Î²-Cell Function in the Pathogenesis of Type 2 Diabetes. Diabetes Care, 2013, 36, S113-S119.	4.3	201
77	The Effect of Exogenous Glucose-Dependent Insulinotropic Polypeptide in Combination With Glucagon-Like Peptide-1 on Glycemia in the Critically Ill. Diabetes Care, 2013, 36, 3333-3336.	4.3	20
78	Diagnostic Accuracy of an â€œAmendedâ€•Insulinâ€“Glucose Ratio for the Biochemical Diagnosis of Insulinomas. Annals of Internal Medicine, 2012, 157, 767.	2.0	34
79	GLP-1 receptor agonists for individualized treatment of type 2 diabetes mellitus. Nature Reviews Endocrinology, 2012, 8, 728-742.	4.3	971
80	Impaired Crosstalk between Pulsatile Insulin and Glucagon Secretion in Prediabetic Individuals. Journal of Clinical Endocrinology and Metabolism, 2012, 97, E791-E795.	1.8	34
81	Inpatient Treatment of Type 2 Diabetes. Deutsches Ärzteblatt International, 2012, 109, 466-74.	0.6	15
82	Pancreatic diabetes manifests when beta cell area declines by approximately 65% in humans. Diabetologia, 2012, 55, 1346-1354.	2.9	123
83	Long-term recovery of Î²-cell function after partial pancreatectomy in humans. Metabolism: Clinical and Experimental, 2012, 61, 620-624.	1.5	22
84	GLP-1 analogues and insulin: sound the wedding bells?. Nature Reviews Endocrinology, 2011, 7, 193-195.	4.3	24
85	Cell cycle control of Î²-cell replication in the prenatal and postnatal human pancreas. American Journal of Physiology - Endocrinology and Metabolism, 2011, 300, E221-E230.	1.8	60
86	Loss of Inverse Relationship Between Pulsatile Insulin and Glucagon Secretion in Patients With Type 2 Diabetes. Diabetes, 2011, 60, 2160-2168.	0.3	104
87	Secretion of glucagon-like peptide-1 (GLP-1) in type 2 diabetes: what is up, what is down?. Diabetologia, 2011, 54, 10-18.	2.9	402
88	Dapagliflozin Versus Glipizide as Add-on Therapy in Patients With Type 2 Diabetes Who Have Inadequate Glycemic Control With Metformin. Diabetes Care, 2011, 34, 2015-2022.	4.3	479
89	GIP Does Not Potentiate the Antidiabetic Effects of GLP-1 in Hyperglycemic Patients With Type 2 Diabetes. Diabetes, 2011, 60, 1270-1276.	0.3	141
90	Chronic Reduction of Fasting Glycemia With Insulin Glargine Improves First- and Second-Phase Insulin Secretion in Patients With Type 2 Diabetes. Diabetes Care, 2011, 34, 2048-2053.	4.3	41

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91	Rapid Tachyphylaxis of the Glucagon-Like Peptide 1â€“Induced Deceleration of Gastric Emptying in Humans. Diabetes, 2011, 60, 1561-1565.	0.3	291
92	Diminished glucagon suppression after Î²-cell reduction is due to impaired Î±-cell function rather than an expansion of Î±-cell mass. American Journal of Physiology - Endocrinology and Metabolism, 2011, 300, E717-E723.	1.8	30
93	Determinants of glucose control in patients with chronic pancreatitis. Diabetologia, 2010, 53, 1062-1069.	2.9	36
94	Endogenous hyperinsulinaemia in insulinoma patients is not associated with changes in beta-cell area and turnover in the tumor-adjacent pancreas. Regulatory Peptides, 2010, 165, 180-185.	1.9	3
95	Is the Diminished Incretin Effect in Type 2 Diabetes Just an Epi-Phenomenon of Impaired Î²-Cell Function?. Diabetes, 2010, 59, 1117-1125.	0.3	189
96	Proinsulin levels in patients with pancreatic diabetes are associated with functional changes in insulin secretion rather than pancreatic Î²-cell area. European Journal of Endocrinology, 2010, 163, 551-558.	1.9	17
97	Î²-cell development and turnover during prenatal life in humans. European Journal of Endocrinology, 2010, 162, 559-568.	1.9	85
98	Impact of Exogenous Hyperglucagonemia on Postprandial Concentrations of Gastric Inhibitory Polypeptide and Glucagon-Like Peptide-1 in Humans. Journal of Clinical Endocrinology and Metabolism, 2010, 95, 4061-4065.	1.8	6
99	Selective amino acid deficiency in patients with impaired glucose tolerance and type 2 diabetes. Regulatory Peptides, 2010, 160, 75-80.	1.9	97
100	Validation of different replication markers for the detection of beta-cell proliferation in human pancreatic tissue. Regulatory Peptides, 2010, 162, 115-121.	1.9	19
101	Individualised incretin-based treatment for type 2 diabetes. Lancet, The, 2010, 376, 393-394.	6.3	14
102	Waking up the gut in critically ill patients. Critical Care, 2010, 14, 183.	2.5	4
103	Insulin Secretion. , 2010, , 624-635.		0
104	Linking the Genetics of Type 2 Diabetes With Low Birth Weight: A Role for Prenatal Islet Maldevelopment?. Diabetes, 2009, 58, 1255-1256.	0.3	31
105	Hyperglycemia Acutely Lowers the Postprandial Excursions of Glucagon-Like Peptide-1 and Gastric Inhibitory Polypeptide in Humans. Journal of Clinical Endocrinology and Metabolism, 2009, 94, 1379-1385.	1.8	51
106	Impaired Glucose-Induced Glucagon Suppression after Partial Pancreatectomy. Journal of Clinical Endocrinology and Metabolism, 2009, 94, 2857-2863.	1.8	27
107	Metabolic consequences of a 50% partial pancreatectomy in humans. Diabetologia, 2009, 52, 306-317.	2.9	77
108	Excess glycaemic excursions after an oral glucose tolerance test compared with a mixed meal challenge and selfâ€measured home glucose profiles: is the OGTT a valid predictor of postprandial hyperglycaemia and vice versa?. Diabetes, Obesity and Metabolism, 2009, 11, 213-222.	2.2	43

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109	The contribution of incretin hormones to the pathogenesis of type 2 diabetes. Best Practice and Research in Clinical Endocrinology and Metabolism, 2009, 23, 433-441.	2.2	31
110	Reduced Pancreatic Volume and Î²-Cell Area in Patients With Chronic Pancreatitis. Gastroenterology, 2009, 136, 513-522.	0.6	93
111	Functional Assessment of Pancreatic Î²-Cell Area in Humans. Diabetes, 2009, 58, 1595-1603.	0.3	147
112	Amino Acid Malnutrition in Patients With Chronic Pancreatitis and Pancreatic Carcinoma. Pancreas, 2009, 38, 416-421.	0.5	47
113	Beta cell mass in diabetes: a realistic therapeutic target?. Diabetologia, 2008, 51, 703-713.	2.9	141
114	Partial Pancreatectomy in Adult Humans Does Not Provoke Î²-Cell Regeneration. Diabetes, 2008, 57, 142-149.	0.3	152
115	Î²-Cell Replication Is the Primary Mechanism Subserving the Postnatal Expansion of Î²-Cell Mass in Humans. Diabetes, 2008, 57, 1584-1594.	0.3	616
116	Is secretion of glucagon-like peptide-1 reduced in type 2 diabetes mellitus?. Nature Clinical Practice Endocrinology and Metabolism, 2008, 4, 606-607.	2.9	39
117	Predictors of Incretin Concentrations in Subjects With Normal, Impaired, and Diabetic Glucose Tolerance. Diabetes, 2008, 57, 678-687.	0.3	307
118	Orlistat Inhibition of Intestinal Lipase Acutely Increases Appetite and Attenuates Postprandial Glucagon-Like Peptide-1-(7â€“36)-Amide-1, Cholecystokinin, and Peptide YY Concentrations. Journal of Clinical Endocrinology and Metabolism, 2008, 93, 3995-3998.	1.8	77
119	Incretins and Regulation of Insulin Secretion. , 2008, , 335-378.		4
120	Reduction of hepatic insulin clearance after oral glucose ingestion is not mediated by glucagon-like peptide 1 or gastric inhibitory polypeptide in humans. American Journal of Physiology - Endocrinology and Metabolism, 2007, 293, E849-E856.	1.8	65
121	Glucagon-like peptide 1 (GLP-1) suppresses ghrelin levels in humans via increased insulin secretion. Regulatory Peptides, 2007, 143, 64-68.	1.9	70
122	The replication of Î² cells in normal physiology, in disease and for therapy. Nature Clinical Practice Endocrinology and Metabolism, 2007, 3, 758-768.	2.9	238
123	Pancreas volumes in humans from birth to age one hundred taking into account sex, obesity, and presence of typeâ€2 diabetes. Clinical Anatomy, 2007, 20, 933-942.	1.5	378
124	Suppression of glucagon secretion is lower after oral glucose administration than during intravenous glucose administration in human subjects. Diabetologia, 2007, 50, 806-813.	2.9	75
125	Modestly increased beta cell apoptosis but no increased beta cell replication in recent-onset type 1 diabetic patients who died of diabetic ketoacidosis. Diabetologia, 2007, 50, 2323-2331.	2.9	116
126	The enteroinsular axis may mediate the diabetogenic effects of TCF7L2 polymorphisms. Diabetologia, 2007, 50, 2413-2416.	2.9	19

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127	The Incretin Modulators â€“ Incretin Mimetics (GLP-1 Receptor Agonists) and Incretin Enhancers (DPP-4) Tj ETQq1 1 0.784314 rgBT /Ov	1	
128	Intrahepatic Transplanted Islets in Humans Secrete Insulin in a Coordinate Pulsatile Manner Directly Into the Liver. Diabetes, 2006, 55, 2324-2332.	0.3	36
129	Glucagon-Like Peptide 2 Stimulates Glucagon Secretion, Enhances Lipid Absorption, and Inhibits Gastric Acid Secretion in Humans. Gastroenterology, 2006, 130, 44-54.	0.6	218
130	Glucagon-like peptide 2 inhibits ghrelin secretion in humans. Regulatory Peptides, 2006, 137, 173-178.	1.9	15
131	Postprandial Suppression of Glucagon Secretion Depends on Intact Pulsatile Insulin Secretion: Further Evidence for the Intraislet Insulin Hypothesis. Diabetes, 2006, 55, 1051-1056.	0.3	128
132	Increased vulnerability of newly forming beta cells to cytokine-induced cell death. Diabetologia, 2006, 49, 83-89.	2.9	53
133	Glucagon-like peptide 1 abolishes the postprandial rise in triglyceride concentrations and lowers levels of non-esterified fatty acids in humans. Diabetologia, 2006, 49, 452-458.	2.9	244
134	Direct evidence of attempted beta cell regeneration in an 89-year-old patient with recent-onset type 1 diabetes. Diabetologia, 2006, 49, 1838-1844.	2.9	177
135	Increased islet beta cell replication adjacent to intrapancreatic gastrinomas in humans. Diabetologia, 2006, 49, 2689-2696.	2.9	62
136	Response to comment on: Meier JJ, Lin JC, Butler AE, Galasso R, Martinez DS, Butler PC (2006) Direct evidence of attempted beta cell regeneration in an 89-year-old patient with recent-onset type 1 diabetes. Diabetologia 49:1838â€“1844. Diabetologia, 2006, 49, 2803-2804.	2.9	7
137	Incretins and the development of type 2 diabetes. Current Diabetes Reports, 2006, 6, 194-201.	1.7	81
138	The Potential for Stem Cell Therapy in Diabetes. Pediatric Research, 2006, 59, 65R-73R.	1.1	50
139	The glucagon-like peptide-1 metabolite GLP-1-(9â€“36) amide reduces postprandial glycemia independently of gastric emptying and insulin secretion in humans. American Journal of Physiology - Endocrinology and Metabolism, 2006, 290, E1118-E1123.	1.8	90
140	Hyperinsulinemic Hypoglycemia After Gastric Bypass Surgery Is Not Accompanied by Islet Hyperplasia or Increased Â-Cell Turnover. Diabetes Care, 2006, 29, 1554-1559.	4.3	234
141	Influence of gastric inhibitory polypeptide on pentagastrin-stimulated gastric acid secretion in patients with type 2 diabetes and healthy controls. World Journal of Gastroenterology, 2006, 12, 1874.	1.4	8
142	Glucagon-like peptide 1(GLP-1) in biology and pathology. Diabetes/Metabolism Research and Reviews, 2005, 21, 91-117.	1.7	250
143	Secretion of incretin hormones and the insulinotropic effect of gastric inhibitory polypeptide in women with a history of gestational diabetes. Diabetologia, 2005, 48, 1872-1881.	2.9	72
144	Sustained beta cell apoptosis in patients with long-standing type 1 diabetes: indirect evidence for islet regeneration?. Diabetologia, 2005, 48, 2221-2228.	2.9	441

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145	GLP-1, Incretin Mimetics and DPP 4 Inhibitors: New Ways in the Treatment of Type 2 Diabetes. Current Medicinal Chemistry Immunology, Endocrine & Metabolic Agents, 2005, 5, 485-497.	0.2	3
146	Erythromycin Antagonizes the Deceleration of Gastric Emptying by Glucagon-Like Peptide 1 and Unmasks Its Insulinotropic Effect in Healthy Subjects. Diabetes, 2005, 54, 2212-2218.	0.3	113
147	Plasma Glucose at Hospital Admission and Previous Metabolic Control Determine Myocardial Infarct Size and Survival in Patients With and Without Type 2 Diabetes: The Langendreer Myocardial Infarction and Blood Glucose in Diabetic Patients Assessment (LAMBDA). Diabetes Care, 2005, 28, 2551-2553.	4.3	73
148	Pulsatile Insulin Secretion Dictates Systemic Insulin Delivery by Regulating Hepatic Insulin Extraction In Humans. Diabetes, 2005, 54, 1649-1656.	0.3	201
149	Glucagon-like peptide 1 and its derivatives in the treatment of diabetes. Regulatory Peptides, 2005, 128, 135-148.	1.9	160
150	GIP as a Potential Therapeutic Agent?. Hormone and Metabolic Research, 2004, 36, 859-866.	0.7	42
151	Stimulation of Insulin Secretion by Intravenous Bolus Injection and Continuous Infusion of Gastric Inhibitory Polypeptide in Patients With Type 2 Diabetes and Healthy Control Subjects. Diabetes, 2004, 53, S220-S224.	0.3	73
152	Gastric Inhibitory Polypeptide and Glucagon-Like Peptide-1 in the Pathogenesis of Type 2 Diabetes. Diabetes, 2004, 53, S190-S196.	0.3	177
153	Secretion, Degradation, and Elimination of Glucagon-Like Peptide 1 and Gastric Inhibitory Polypeptide in Patients with Chronic Renal Insufficiency and Healthy Control Subjects. Diabetes, 2004, 53, 654-662.	0.3	277
154	Is impairment of ischaemic preconditioning by sulfonylurea drugs clinically important?. British Heart Journal, 2004, 90, 9-12.	2.2	96
155	Glucose-dependent insulinotropic polypeptide/gastric inhibitory polypeptide. Best Practice and Research in Clinical Endocrinology and Metabolism, 2004, 18, 587-606.	2.2	52
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