

# Mã'nica R Gadelha

## List of Publications by Year in descending order

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140  
papers

6,290  
citations

87401

40  
h-index

93651

72  
g-index

144  
all docs

144  
docs citations

144  
times ranked

3806  
citing authors

#	ARTICLE	IF	CITATIONS
1	The Future of Somatostatin Receptor Ligands in Acromegaly. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2022, 107, 297-308.	1.8	35
2	Approach to the Patient: Differential Diagnosis of Cystic Sellar Lesions. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2022, 107, 1751-1758.	1.8	11
3	Randomized Trial of Osilodrostat for the Treatment of Cushing Disease. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2022, 107, e2882-e2895.	1.8	31
4	Pituitary MRI Standard and Advanced Sequences: Role in the Diagnosis and Characterization of Pituitary Adenomas. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2022, 107, 1431-1440.	1.8	6
5	Pituitary MRI Features in Acromegaly Resulting From Ectopic GHRH Secretion From a Neuroendocrine Tumor: Analysis of 30 Cases. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2022, 107, e3313-e3320.	1.8	7
6	Osilodrostat for the treatment of Cushing's disease: efficacy, stability, and persistence – Authors' reply. <i>Lancet Diabetes and Endocrinology</i> , 2022, 10, 385-387.	5.5	4
7	The NETting of pituitary adenoma: a gland illusion. <i>Pituitary</i> , 2022, 25, 349-351.	1.6	12
8	A Pituitary Society update to acromegaly management guidelines. <i>Pituitary</i> , 2021, 24, 1-13.	1.6	158
9	Telomerase expression in clinically non-functioning pituitary adenomas. <i>Endocrine</i> , 2021, 72, 208-215.	1.1	2
10	Glucocorticoid use in patients with adrenal insufficiency following administration of the COVID-19 vaccine: a pituitary society statement. <i>Pituitary</i> , 2021, 24, 143-145.	1.6	24
11	Pituitary Neoplasm Nomenclature Workshop: Does Adenoma Stand the Test of Time?. <i>Journal of the Endocrine Society</i> , 2021, 5, bvaa205.	0.1	31
12	Management of hypopituitarism: a perspective from the Brazilian Society of Endocrinology and Metabolism. <i>Archives of Endocrinology and Metabolism</i> , 2021, 65, 212-230.	0.3	5
13	Machine Learning-based Prediction Model for Treatment of Acromegaly With First-generation Somatostatin Receptor Ligands. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2021, 106, 2047-2056.	1.8	27
14	Cyclic ACTH-secreting thymic carcinoid: a case report and review of the literature. <i>Archives of Endocrinology and Metabolism</i> , 2021, 65, 512-516.	0.3	1
15	Apoplexy in sporadic pituitary adenomas: a single referral center experience and AIP mutation analysis. <i>Archives of Endocrinology and Metabolism</i> , 2021, 65, 295-304.	0.3	1
16	New and emerging pharmacological treatment options for acromegaly. <i>Expert Opinion on Pharmacotherapy</i> , 2021, 22, 1615-1623.	0.9	6
17	GH and IGF-I levels and tumor shrinkage in response to first generation somatostatin receptor ligands in acromegaly: a comparative study between two reference centers for pituitary diseases in Brazil. <i>Endocrine</i> , 2021, 74, 146-154.	1.1	3
18	Identification of mutant K-RAS in pituitary macroadenoma. <i>Pituitary</i> , 2021, 24, 746-753.	1.6	6

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19	Safety and Efficacy of Switching Injected Peptide Long-Acting Somatostatin Receptor Ligands to Once Daily Oral Paltusotine: ACROBAT Edge Phase 2 Study. <i>Journal of the Endocrine Society</i> , 2021, 5, A526-A527.	0.1	3
20	The Glittre Activities of Daily Living Test in patients with acromegaly: Associations with hand function and health-related quality of life. <i>Journal of Back and Musculoskeletal Rehabilitation</i> , 2021, 34, 441-451.	0.4	4
21	Growth hormone-releasing hormone-secreting pulmonary neuroendocrine tumor associated with pituitary hyperplasia and somatotropinoma. <i>Archives of Endocrinology and Metabolism</i> , 2021, 65, 648-663.	0.3	2
22	gsp Mutation Is Not a Molecular Biomarker of Long-Term Response to First-Generation Somatostatin Receptor Ligands in Acromegaly. <i>Cancers</i> , 2021, 13, 4857.	1.7	10
23	Consensus on diagnosis and management of Cushing's disease: a guideline update. <i>Lancet Diabetes and Endocrinology</i> , 2021, 9, 847-875.	5.5	315
24	Current opinion on the diagnosis and management of non-functioning pituitary adenomas. <i>Expert Review of Endocrinology and Metabolism</i> , 2021, 16, 309-320.	1.2	2
25	Prolactinomas. <i>Presse Medicale</i> , 2021, 50, 104080.	0.8	8
26	A Consensus on the Diagnosis and Treatment of Acromegaly Comorbidities: An Update. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2020, 105, e937-e946.	1.8	207
27	Definition and diagnosis of aggressive pituitary tumors. <i>Reviews in Endocrine and Metabolic Disorders</i> , 2020, 21, 203-208.	2.6	33
28	Collision sellar lesions: coexistence of pituitary adenoma and Rathke cleft cyst—a single-center experience. <i>Endocrine</i> , 2020, 68, 174-181.	1.1	11
29	Accuracy of microcystic aspect on T2-weighted MRI for the diagnosis of silent corticotroph adenomas. <i>Clinical Endocrinology</i> , 2020, 92, 145-149.	1.2	16
30	Acromegaly. <i>Endocrinology and Metabolism Clinics of North America</i> , 2020, 49, 475-486.	1.2	14
31	Multidisciplinary management of acromegaly: A consensus. <i>Reviews in Endocrine and Metabolic Disorders</i> , 2020, 21, 667-678.	2.6	183
32	Cyclin A in nonfunctioning pituitary adenomas. <i>Endocrine</i> , 2020, 70, 380-387.	1.1	8
33	Letter to the Editor: "Our Response to COVID-19 as Endocrinologists and Diabetologists". <i>Journal of Clinical Endocrinology and Metabolism</i> , 2020, 105, e2661-e2662.	1.8	3
34	Risk factors and management of pasireotide-associated hyperglycemia in acromegaly. <i>Endocrine Connections</i> , 2020, 9, 1178-1190.	0.8	27
35	Novel therapies for acromegaly. <i>Endocrine Connections</i> , 2020, 9, R274-R285.	0.8	8
36	Use of late-night salivary cortisol to monitor response to medical treatment in Cushing's disease. <i>European Journal of Endocrinology</i> , 2020, 182, 207-217.	1.9	29

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37	Pasireotide for acromegaly: long-term outcomes from an extension to the Phase III PAOLA study. <i>European Journal of Endocrinology</i> , 2020, 182, 583.	1.9	36
38	Determinants of morbidities and mortality in acromegaly. <i>Archives of Endocrinology and Metabolism</i> , 2020, 63, 630-637.	0.3	39
39	Brazilian multicenter study on pegvisomant treatment in acromegaly. <i>Archives of Endocrinology and Metabolism</i> , 2019, 63, 328-336.	0.3	16
40	Physical exercise improves functional capacity and quality of life in patients with acromegaly: a 12-week follow-up study. <i>Endocrine</i> , 2019, 66, 301-309.	1.1	11
41	Splicing Machinery is Dysregulated in Pituitary Neuroendocrine Tumors and is Associated with Aggressiveness Features. <i>Cancers</i> , 2019, 11, 1439.	1.7	30
42	The effectiveness of a therapist-oriented home rehabilitation program for a patient with acromegaly: A case study. <i>Journal of Bodywork and Movement Therapies</i> , 2019, 23, 634-642.	0.5	4
43	Clinical and functional variables can predict general fatigue in patients with acromegaly: an explanatory model approach. <i>Archives of Endocrinology and Metabolism</i> , 2019, 63, 235-240.	0.3	0
44	Management of pituitary incidentaloma. <i>Best Practice and Research in Clinical Endocrinology and Metabolism</i> , 2019, 33, 101268.	2.2	21
45	Clinical significance of filamin A in patients with acromegaly and its association with somatostatin and dopamine receptor profiles. <i>Scientific Reports</i> , 2019, 9, 1122.	1.6	21
46	Systemic Complications of Acromegaly and the Impact of the Current Treatment Landscape: An Update. <i>Endocrine Reviews</i> , 2019, 40, 268-332.	8.9	226
47	Evaluation of the Efficacy and Safety of Switching to Pasireotide in Patients With Acromegaly Inadequately Controlled With First-Generation Somatostatin Analogs. <i>Frontiers in Endocrinology</i> , 2019, 10, 931.	1.5	21
48	SAT-433 Long-Acting Pasireotide Provides Clinical Benefit to Patients with Uncontrolled Acromegaly over Continued Treatment with First-Generation Somatostatin Analogues (SSAs): Results from Phase 3b, Open-Label Study. <i>Journal of the Endocrine Society</i> , 2019, 3, .	0.1	1
49	Treatment escape reduces the effectiveness of cabergoline during long-term treatment of acromegaly in monotherapy or in association with first-generation somatostatin receptor ligands. <i>Clinical Endocrinology</i> , 2018, 88, 889-895.	1.2	21
50	Predictors of surgical outcome and early criteria of remission in acromegaly. <i>Endocrine</i> , 2018, 60, 415-422.	1.1	61
51	Molecular evidence and clinical importance of Î²-arrestins expression in patients with acromegaly. <i>Journal of Cellular and Molecular Medicine</i> , 2018, 22, 2110-2116.	1.6	18
52	Apoplexy in nonfunctioning pituitary adenomas. <i>Pituitary</i> , 2018, 21, 138-144.	1.6	47
53	MANAGEMENT OF ENDOCRINE DISEASE: Personalized medicine in the treatment of acromegaly. <i>European Journal of Endocrinology</i> , 2018, 178, R89-R100.	1.9	56
54	Controversial issues in the management of hyperprolactinemia and prolactinomas " An overview by the Neuroendocrinology Department of the Brazilian Society of Endocrinology and Metabolism. <i>Archives of Endocrinology and Metabolism</i> , 2018, 62, 236-263.	0.3	69

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55	A review of Cushing's disease treatment by the Department of Neuroendocrinology of the Brazilian Society of Endocrinology and Metabolism. <i>Archives of Endocrinology and Metabolism</i> , 2018, 62, 87-105.	0.3	3
56	Somatic USP8 mutations are frequent events in corticotroph tumor progression causing Nelson's tumor. <i>European Journal of Endocrinology</i> , 2018, 178, 57-63.	1.9	37
57	Computed tomography airway lumen volumetry in patients with acromegaly: Association with growth hormone levels and lung function. <i>Journal of Medical Imaging and Radiation Oncology</i> , 2017, 61, 591-599.	0.9	7
58	The genetic background of acromegaly. <i>Pituitary</i> , 2017, 20, 10-21.	1.6	65
59	Somatostatin receptor ligands in the treatment of acromegaly. <i>Pituitary</i> , 2017, 20, 100-108.	1.6	91
60	Long-Term Remission of Acromegaly after Octreotide Withdrawal Is an Uncommon and Frequently Unsustainable Event. <i>Neuroendocrinology</i> , 2017, 104, 273-279.	1.2	14
61	AIP mutations in Brazilian patients with sporadic pituitary adenomas: a single-center evaluation. <i>Endocrine Connections</i> , 2017, 6, 914-925.	0.8	18
62	Balance Control and Peripheral Muscle Function in Aging: A Comparison Between Individuals with Acromegaly and Healthy Subjects. <i>Journal of Aging and Physical Activity</i> , 2017, 25, 218-227.	0.5	20
63	Somatotropinomas inadequately controlled with octreotide may over-respond to pasireotide: the importance of dose adjustment to achieve long-term biochemical control. <i>Hormones</i> , 2017, 16, 84-91.	0.9	9
64	Experience with pegvisomant treatment in acromegaly in a single Brazilian tertiary reference center: efficacy, safety and predictors of response. <i>Archives of Endocrinology and Metabolism</i> , 2016, 60, 479-485.	0.3	19
65	Recommendations of the Neuroendocrinology Department of the Brazilian Society of Endocrinology and Metabolism for the diagnosis of Cushing's disease in Brazil. <i>Archives of Endocrinology and Metabolism</i> , 2016, 60, 267-286.	0.3	14
66	A review on the diagnosis and treatment of patients with clinically nonfunctioning pituitary adenoma by the Neuroendocrinology Department of the Brazilian Society of Endocrinology and Metabolism. <i>Archives of Endocrinology and Metabolism</i> , 2016, 60, 374-390.	0.3	20
67	Growth hormone receptor exon 3 isoforms may have no importance in the clinical setting of multiethnic Brazilian acromegaly patients. <i>Pituitary</i> , 2016, 19, 375-380.	1.6	4
68	Low frequency of cardiac arrhythmias and lack of structural heart disease in medically-naïve acromegaly patients: a prospective study at baseline and after 1 year of somatostatin analogs treatment. <i>Pituitary</i> , 2016, 19, 582-589.	1.6	36
69	Interpreting biochemical control response rates with first-generation somatostatin analogues in acromegaly. <i>Pituitary</i> , 2016, 19, 235-247.	1.6	93
70	Challenges in the diagnosis and management of acromegaly: a focus on comorbidities. <i>Pituitary</i> , 2016, 19, 448-457.	1.6	108
71	Switching patients with acromegaly from octreotide to pasireotide improves biochemical control: crossover extension to a randomized, double-blind, Phase III study. <i>BMC Endocrine Disorders</i> , 2016, 16, 16.	0.9	63
72	Pasireotide for the treatment of acromegaly. <i>Expert Opinion on Pharmacotherapy</i> , 2016, 17, 579-588.	0.9	24

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73	Evidence-based guidelines in acromegaly: implications on the clinic. <i>Expert Review of Endocrinology and Metabolism</i> , 2016, 11, 171-175.	1.2	0
74	Effect of pasireotide on glucose- and growth hormone-related biomarkers in patients with inadequately controlled acromegaly. <i>Endocrine</i> , 2016, 53, 210-219.	1.1	59
75	What is the effect of peripheral muscle fatigue, pulmonary function, and body composition on functional exercise capacity in acromegalic patients?. <i>Journal of Physical Therapy Science</i> , 2015, 27, 719-724.	0.2	11
76	Bone density and microarchitecture in endogenous hypercortisolism. <i>Clinical Endocrinology</i> , 2015, 83, 468-474.	1.2	36
77	Insulin-like growth factor (IgF)-I, IgF binding protein-3, and prostate cancer: correlation with gleason score. <i>International Braz J Urol: Official Journal of the Brazilian Society of Urology</i> , 2015, 41, 110-115.	0.7	10
78	Regulation of Aryl Hydrocarbon Receptor Interacting Protein (AIP) Protein Expression by MiR-34a in Sporadic Somatotropinomas. <i>PLoS ONE</i> , 2015, 10, e0117107.	1.1	59
79	Lanreotide Autogel 120µmg at extended dosing intervals in patients with acromegaly biochemically controlled with octreotide LAR: the LEAD study. <i>European Journal of Endocrinology</i> , 2015, 173, 313-323.	1.9	37
80	Adverse effects of glucocorticoids: coagulopathy. <i>European Journal of Endocrinology</i> , 2015, 173, M11-M21.	1.9	72
81	Low Frequency of Cardiomyopathy Using Cardiac Magnetic Resonance Imaging in an Acromegaly Contemporary Cohort. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2015, 100, 4447-4455.	1.8	51
82	Truncated somatostatin receptor variant sst5TMD4 confers aggressive features (proliferation, Tj ETQq0 0 0 rgBT /Overlock 10 Tf 50 38)	3.2	72
83	Pituitary Tumor Management in Pregnancy. <i>Endocrinology and Metabolism Clinics of North America</i> , 2015, 44, 181-197.	1.2	25
84	A paradigm shift in the medical treatment of acromegaly: from a "trial and error"™ to a personalized therapeutic decision-making process. <i>Clinical Endocrinology</i> , 2015, 83, 1-2.	1.2	23
85	Ipilimumab-induced hypophysitis: review of the literature. <i>Journal of Endocrinological Investigation</i> , 2015, 38, 1159-1166.	1.8	56
86	Dopamine receptor subtype 2 expression profile in nonfunctioning pituitary adenomas and <i>in vivo</i> response to cabergoline therapy. <i>Clinical Endocrinology</i> , 2015, 82, 739-746.	1.2	49
87	The Gene of the Ubiquitin-Specific Protease 8 Is Frequently Mutated in Adenomas Causing Cushing's Disease. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2015, 100, E997-E1004.	1.8	163
88	Landscape of Familial Isolated and Young-Onset Pituitary Adenomas: Prospective Diagnosis in <i>AIP</i> Mutation Carriers. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2015, 100, E1242-E1254.	1.8	144
89	Current reliability of the Immulite® assay for measurement of serum IGF-1 in the Brazilian adult population. <i>Archives of Endocrinology and Metabolism</i> , 2015, 59, 195-196.	0.3	1
90	Acromegaly and pregnancy: a prospective study. <i>European Journal of Endocrinology</i> , 2014, 170, 301-310.	1.9	39

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91	Rotation thromboelastometry and the hypercoagulable state in <sc>C</sc>ushing's syndrome. <i>Clinical Endocrinology</i> , 2014, 81, 657-664.	1.2	16
92	Treatment effectiveness of pasireotide on health-related quality of life in patients with Cushing's disease. <i>European Journal of Endocrinology</i> , 2014, 171, 89-98.	1.9	26
93	Posture and balance control in patients with acromegaly: Results of a cross-sectional study. <i>Gait and Posture</i> , 2014, 40, 154-159.	0.6	18
94	Cabergoline treatment in acromegaly: cons. <i>Endocrine</i> , 2014, 46, 220-225.	1.1	31
95	Prevalence of obstructive sleep apnea in patients with prolactinoma before and after treatment with dopamine agonists. <i>Pituitary</i> , 2014, 17, 441-449.	1.6	25
96	Efficacy of medical treatment in <sc>C</sc>ushing's disease: a systematic review. <i>Clinical Endocrinology</i> , 2014, 80, 1-12.	1.2	59
97	Pasireotide versus continued treatment with octreotide or lanreotide in patients with inadequately controlled acromegaly (PAOLA): a randomised, phase 3 trial. <i>Lancet Diabetes and Endocrinology</i> , the, 2014, 2, 875-884.	5.5	309
98	Acromegalic patients lost to follow-up: a pilot study. <i>Pituitary</i> , 2013, 16, 245-250.	1.6	20
99	Genetics of Pituitary Adenomas. <i>Frontiers of Hormone Research</i> , 2013, 41, 111-140.	1.0	61
100	Giant prolactinomas: the therapeutic approach. <i>Clinical Endocrinology</i> , 2013, 79, 447-456.	1.2	91
101	Pulmonary function testing and chest tomography in patients with acromegaly. <i>Multidisciplinary Respiratory Medicine</i> , 2013, 8, 70.	0.6	14
102	Novel pathway for somatostatin analogs in patients with acromegaly. <i>Trends in Endocrinology and Metabolism</i> , 2013, 24, 238-246.	3.1	126
103	Ki-67 is a predictor of acromegaly control with octreotide LAR independent of SSTR2 status and relates to cytokeratin pattern. <i>European Journal of Endocrinology</i> , 2013, 169, 217-223.	1.9	55
104	On the Functional Capacity and Quality of Life of Patients with Acromegaly: Are They Candidates for Rehabilitation Programs?. <i>Journal of Physical Therapy Science</i> , 2013, 25, 1497-1501.	0.2	18
105	The Role of Temozolomide in the Treatment of a Patient With a Pure Silent Pituitary Somatotroph Carcinoma. <i>Endocrine Practice</i> , 2013, 19, e145-e149.	1.1	21
106	Lycopene and Beta-Carotene Induce Growth Inhibition and Proapoptotic Effects on ACTH-Secreting Pituitary Adenoma Cells. <i>PLoS ONE</i> , 2013, 8, e62773.	1.1	35
107	ZAC1 and SSTR2 Are Downregulated in Non-Functioning Pituitary Adenomas but Not in somatotropinomas. <i>PLoS ONE</i> , 2013, 8, e77406.	1.1	25
108	AIP expression in sporadic somatotropinomas is a predictor of the response to octreotide LAR therapy independent of SSTR2 expression. <i>Endocrine-Related Cancer</i> , 2012, 19, L25-L29.	1.6	100



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109	Growth of an aggressive tumor during pregnancy in an acromegalic patient. <i>Endocrine Journal</i> , 2012, 59, 313-319.	0.7	23
110	A Subcutaneous Octreotide Hydrogel Implant for the Treatment of Acromegaly. <i>Endocrine Practice</i> , 2012, 18, 870-881.	1.1	9
111	Resistance to octreotide LAR in acromegalic patients with high SSTR2 expression: analysis of AIP expression. <i>Arquivos Brasileiros De Endocrinologia E Metabologia</i> , 2012, 56, 501-506.	1.3	13
112	BMI and Metabolic Profile in Patients With Prolactinoma Before and After Treatment With Dopamine Agonists. <i>Obesity</i> , 2011, 19, 800-805.	1.5	136
113	Sellar and suprasellar mixed germ cell tumor mimicking a pituitary adenoma. <i>Pituitary</i> , 2011, 14, 345-350.	1.6	16
114	Hematologic neoplasias and acromegaly. <i>Pituitary</i> , 2011, 14, 377-381.	1.6	7
115	Low Aryl Hydrocarbon Receptor-Interacting Protein Expression Is a Better Marker of Invasiveness in Somatotropinomas than Ki-67 and p53. <i>Neuroendocrinology</i> , 2011, 94, 39-48.	1.2	69
116	Management of acromegaly in Latin America: expert panel recommendations. <i>Pituitary</i> , 2010, 13, 168-175.	1.6	31
117	Familial isolated pituitary adenomas experience at a single center: clinical importance of AIP mutation screening. <i>Arquivos Brasileiros De Endocrinologia E Metabologia</i> , 2010, 54, 698-704.	1.3	23
118	Growth hormone isoforms in acromegalic patients before and after treatment with octreotide LAR. <i>Growth Hormone and IGF Research</i> , 2010, 20, 87-92.	0.5	11
119	Germ cell tumor presenting as sellar mass with suprasellar extension and long history of hypopituitarism. <i>Neuroendocrinology Letters</i> , 2010, 31, 306-9.	0.2	2
120	Expression Analysis of Dopamine Receptor Subtypes in Normal Human Pituitaries, Nonfunctioning Pituitary Adenomas and Somatotropinomas, and the Association between Dopamine and Somatostatin Receptors with Clinical Response to Octreotide-LAR in Acromegaly. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2009, 94, 1931-1937.	1.8	120
121	Utility of [18F] fluoro-2-deoxy-d-glucose positron emission tomography in the localization of ectopic ACTH-secreting tumors. <i>Pituitary</i> , 2009, 12, 380-383.	1.6	19
122	Prevalence of gsp oncogene in somatotropinomas and clinically non-functioning pituitary adenomas: our experience. <i>Pituitary</i> , 2009, 12, 165-169.	1.6	32
123	Octreotide LAR vs. surgery in newly diagnosed patients with acromegaly: a randomized, open-label, multicentre study. <i>Clinical Endocrinology</i> , 2009, 70, 757-768.	1.2	108
124	Pituitary apoplexy during treatment of cystic macroprolactinomas with cabergoline. <i>Pituitary</i> , 2008, 11, 287-292.	1.6	40
125	The Role of the Aryl Hydrocarbon Receptor-Interacting Protein Gene in Familial and Sporadic Pituitary Adenomas. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2008, 93, 2390-2401.	1.8	273
126	Prevalence of discordant GH and IGF-I levels in acromegalics at diagnosis, after surgical treatment and during treatment with octreotide LAR®. <i>Growth Hormone and IGF Research</i> , 2008, 18, 389-393.	0.5	53



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127	Prevalence of sleep apnea and metabolic abnormalities in patients with acromegaly and analysis of cephalometric parameters by magnetic resonance imaging.. European Journal of Endocrinology, 2008, 158, 459-465.	1.9	77
128	Quantitative analysis of somatostatin receptor subtypes (1â€“5) gene expression levels in somatotropinomas and correlation to in vivo hormonal and tumor volume responses to treatment with octreotide LAR. European Journal of Endocrinology, 2008, 158, 295-303.	1.9	160
129	Quantitative analysis of somatostatin receptor subtype (SSTR1â€“5) gene expression levels in somatotropinomas and non-functioning pituitary adenomas. European Journal of Endocrinology, 2007, 156, 65-74.	1.9	196
130	Acromegaly Secondary to Growth Hormone-releasing Hormone Secreted by an Incidentally Discovered Pheochromocytoma. Endocrine Pathology, 2007, 18, 46-52.	5.2	39
131	Osteosarcoma and acromegaly: A case report and review of the litereture. Journal of Endocrinological Investigation, 2006, 29, 1006-1011.	1.8	17
132	Tumor Deletion Mapping of Chromosomal Region 13q14 in 43 Growth Hormone Secreting Pituitary Adenomas. Endocrine, 2005, 28, 131-136.	2.2	7
133	Expression of Retinoblastoma Protein in Human Growth Hormoneâ€“Secreting Pituitary Adenomas. Endocrine Pathology, 2005, 16, 053-062.	5.2	17
134	Etiologic aspects and management of acromegaly. Arquivos Brasileiros De Endocrinologia E Metabologia, 2005, 49, 626-640.	1.3	12
135	A meiotic recombination in a new isolated familial somatotropinoma kindred. European Journal of Endocrinology, 2004, 150, 643-648.	1.9	38
136	Optic pathways tuberculoma mimicking glioma: case report. World Neurosurgery, 2003, 60, 349-353.	1.3	16
137	Cavernous carotid artery pseudo-aneurysm treated by stenting in acromegalic patient. Arquivos De Neuro-Psiquiatria, 2003, 61, 459-462.	0.3	21
138	Authorsâ€™ Response: Isolated Familial Somatotropinomas: Does the Disease Map to 11q13 or to 2p16?. Journal of Clinical Endocrinology and Metabolism, 2000, 85, 4921-4921.	1.8	1
139	Loss of Heterozygosity on Chromosome 11q13 in Two Families with Acromegaly/Gigantism Is Independent of Mutations of the Multiple Endocrine Neoplasia Type I Gene<sup>1</sup>. Journal of Clinical Endocrinology and Metabolism, 1999, 84, 249-256.	1.8	80
140	Acromegaly and Non-Hodgkinâ€™s Lymphoma. Endocrine Practice, 1998, 4, 279-281.	1.1	7