Leandro Kasuki

List of Publications by Year
in descending order

Source: https://exaly.com/author-pdf/7822023/publications.pdf

Version: 2024-02-01

56 papers	1,529 citations	331538 21 h-index	330025 37 g-index
56 all docs	56 docs citations	56 times ranked	1373 citing authors

#	Article	IF	Citations
1	Systemic Complications of Acromegaly and the Impact of the Current Treatment Landscape: An Update. Endocrine Reviews, 2019, 40, 268-332.	8.9	226
2	Novel pathway for somatostatin analogs in patients with acromegaly. Trends in Endocrinology and Metabolism, 2013, 24, 238-246.	3.1	126
3	Interpreting biochemical control response rates with first-generation somatostatin analogues in acromegaly. Pituitary, 2016, 19, 235-247.	1.6	93
4	Truncated somatostatin receptor variant sst5TMD4 confers aggressive features (proliferation,) Tj ETQq0 0 0 rgBT /Overlock 10 Tf 50 62	3.2	72
5	The genetic background of acromegaly. Pituitary, 2017, 20, 10-21.	1.6	65
6	Predictors of surgical outcome and early criteria of remission in acromegaly. Endocrine, 2018, 60, 415-422.	1.1	61
7	Regulation of Aryl Hydrocarbon Receptor Interacting Protein (AIP) Protein Expression by MiR-34a in Sporadic Somatotropinomas. PLoS ONE, 2015, 10, e0117107.	1.1	59
8	MANAGEMENT OF ENDOCRINE DISEASE: Personalized medicine in the treatment of acromegaly. European Journal of Endocrinology, 2018, 178, R89-R100.	1.9	56
9	Ki-67 is a predictor of acromegaly control with octreotide LAR independent of SSTR2 status and relates to cytokeratin pattern. European Journal of Endocrinology, 2013, 169, 217-223.	1.9	55
10	Low Frequency of Cardiomyopathy Using Cardiac Magnetic Resonance Imaging in an Acromegaly Contemporary Cohort. Journal of Clinical Endocrinology and Metabolism, 2015, 100, 4447-4455.	1.8	51
11	Determinants of morbidities and mortality in acromegaly. Archives of Endocrinology and Metabolism, 2020, 63, 630-637.	0.3	39
12	Low frequency of cardniac arrhythmias and lack of structural heart disease in medically-naÃ¯ve acromegaly patients: a prospective study at baseline and after 1Âyear of somatostatin analogs treatment. Pituitary, 2016, 19, 582-589.	1.6	36
13	The Future of Somatostatin Receptor Ligands in Acromegaly. Journal of Clinical Endocrinology and Metabolism, 2022, 107, 297-308.	1.8	35
14	Definition and diagnosis of aggressive pituitary tumors. Reviews in Endocrine and Metabolic Disorders, 2020, 21, 203-208.	2.6	33
15	Cabergoline treatment in acromegaly: cons. Endocrine, 2014, 46, 220-225.	1.1	31
16	Splicing Machinery is Dysregulated in Pituitary Neuroendocrine Tumors and is Associated with Aggressiveness Features. Cancers, 2019, 11, 1439.	1.7	30
17	Machine Learning-based Prediction Model for Treatment of Acromegaly With First-generation Somatostatin Receptor Ligands. Journal of Clinical Endocrinology and Metabolism, 2021, 106, 2047-2056.	1.8	27
18	Two-dimensional speckle tracking echocardiography demonstrates no effect of active acromegaly on left ventricular strain. Pituitary, 2017, 20, 349-357.	1.6	23

#	Article	IF	Citations
19	Low risk of coronary artery disease in patients with acromegaly. Endocrine, 2015, 50, 749-755.	1.1	21
20	Treatment escape reduces the effectiveness of cabergoline during longâ€term treatment of acromegaly in monotherapy or in association with firstâ€generation somatostatin receptor ligands. Clinical Endocrinology, 2018, 88, 889-895.	1.2	21
21	Management of pituitary incidentaloma. Best Practice and Research in Clinical Endocrinology and Metabolism, 2019, 33, 101268.	2.2	21
22	Clinical significance of filamin A in patients with acromegaly and its association with somatostatin and dopamine receptor profiles. Scientific Reports, 2019, 9, 1122.	1.6	21
23	Acromegalic patients lost to follow-up: a pilot study. Pituitary, 2013, 16, 245-250.	1.6	20
24	Balance Control and Peripheral Muscle Function in Aging: A Comparison Between Individuals with Acromegaly and Healthy Subjects. Journal of Aging and Physical Activity, 2017, 25, 218-227.	0.5	20
25	Experience with pegvisomant treatment in acromegaly in a single Brazilian tertiary reference center: efficacy, safety and predictors of response. Archives of Endocrinology and Metabolism, 2016, 60, 479-485.	0.3	19
26	On the Functional Capacity and Quality of Life of Patients with Acromegaly: Are They Candidates for Rehabilitation Programs?. Journal of Physical Therapy Science, 2013, 25, 1497-1501.	0.2	18
27	Posture and balance control in patients with acromegaly: Results of a cross-sectional study. Gait and Posture, 2014, 40, 154-159.	0.6	18
28	AIP mutations in Brazilian patients with sporadic pituitary adenomas: a single-center evaluation. Endocrine Connections, 2017, 6, 914-925.	0.8	18
29	Molecular evidence and clinical importance of Î²â€arrestins expression in patients with acromegaly. Journal of Cellular and Molecular Medicine, 2018, 22, 2110-2116.	1.6	18
30	Brazilian multicenter study on pegvisomant treatment in acromegaly. Archives of Endocrinology and Metabolism, 2019, 63, 328-336.	0.3	16
31	Accuracy of microcystic aspect on T2â€weighted MRI for the diagnosis of silent corticotroph adenomas. Clinical Endocrinology, 2020, 92, 145-149.	1.2	16
32	Frequency of familial pituitary adenoma syndromes among patients with functioning pituitary adenomas in a reference outpatient clinic. Journal of Endocrinological Investigation, 2017, 40, 1381-1387.	1.8	14
33	Acromegaly. Endocrinology and Metabolism Clinics of North America, 2020, 49, 475-486.	1.2	14
34	Resistance to octreotide LAR in acromegalic patients with high SSTR2 expression: analysis of AIP expression. Arquivos Brasileiros De Endocrinologia E Metabologia, 2012, 56, 501-506.	1.3	13
35	Parameters of knee isokinetic dynamometry in individuals with acromegaly: Association with growth hormone levels and general fatigue. Isokinetics and Exercise Science, 2016, 24, 331-340.	0.2	12
36	What is the effect of peripheral muscle fatigue, pulmonary function, and body composition on functional exercise capacity in acromegalic patients?. Journal of Physical Therapy Science, 2015, 27, 719-724.	0.2	11

#	Article	IF	Citations
37	Physical exercise improves functional capacity and quality of life in patients with acromegaly: a 12-week follow-up study. Endocrine, 2019, 66, 301-309.	1.1	11
38	gsp Mutation Is Not a Molecular Biomarker of Long-Term Response to First-Generation Somatostatin Receptor Ligands in Acromegaly. Cancers, 2021, 13, 4857.	1.7	10
39	Cyclin A in nonfunctioning pituitary adenomas. Endocrine, 2020, 70, 380-387.	1.1	8
40	Microarchitectural parameters and bone mineral density in patients with tumourâ€induced osteomalacia by HRâ€pQCT and DXA. Clinical Endocrinology, 2021, 95, 587-594.	1.2	8
41	Novel therapies for acromegaly. Endocrine Connections, 2020, 9, R274-R285.	0.8	8
42	Low Energy Availability Interferes With Exercise-Associated Bone Effects in Female Long-Distance Triathletes as Detected by HR-pQCT. Journal of Clinical Densitometry, 2022, 25, 160-167.	0.5	7
43	New and emerging pharmacological treatment options for acromegaly. Expert Opinion on Pharmacotherapy, 2021, 22, 1615-1623.	0.9	6
44	Pituitary MRI Standard and Advanced Sequences: Role in the Diagnosis and Characterization of Pituitary Adenomas. Journal of Clinical Endocrinology and Metabolism, 2022, 107, 1431-1440.	1.8	6
45	Innovative therapeutics in acromegaly. Best Practice and Research in Clinical Endocrinology and Metabolism, 2022, 36, 101679.	2.2	6
46	Management of hypopituitarism: a perspective from the Brazilian Society of Endocrinology and Metabolism. Archives of Endocrinology and Metabolism, 2021, 65, 212-230.	0.3	5
47	A prospective study on the efficacy of oral estrogen in female patients with acromegaly. Pituitary, 2022, 25, 433-443.	1.6	5
48	Growth hormone receptor exon 3 isoforms may have no importance in the clinical setting of multiethnic Brazilian acromegaly patients. Pituitary, 2016, 19, 375-380.	1.6	4
49	The effectiveness of a therapist-oriented home rehabilitation program for a patient with acromegaly: A case study. Journal of Bodywork and Movement Therapies, 2019, 23, 634-642.	0.5	4
50	The Glittre Activities of Daily Living Test in patients with acromegaly: Associations with hand function and health-related quality of life. Journal of Back and Musculoskeletal Rehabilitation, 2021, 34, 441-451.	0.4	4
51	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. Endocrine, 2021, 74, 146-154.	1.1	3
52	Reply to â€œPredictors of surgical outcome and early criteria of remission in acromegalyâ€”some controversial issuesâ€. Endocrine, 2019, 63, 190-191.	1.1	2
53	Growth hormone-releasing hormone-secreting pulmonary neuroendocrine tumor associated with pituitary hyperplasia and somatotropinoma. Archives of Endocrinology and Metabolism, 2021, 65, 648-663.	0.3	2
54	Apoplexy in sporadic pituitary adenomas: a single referral center experience and AIP mutation analysis. Archives of Endocrinology and Metabolism, 2021, 65, 295-304.	0.3	1

#	Article	IF	Citations
55	Evidence-based guidelines in acromegaly: implications on the clinic. Expert Review of Endocrinology and Metabolism, 2016, 11, 171-175.	1.2	0
56	Clinical and functional variables can predict general fatigue in patients with acromegaly: an explanatory model approach. Archives of Endocrinology and Metabolism, 2019, 63, 235-240.	0.3	0