Nicolle H R Litjens

List of Publications by Year
in descending order

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68	2,416	185998 28	214527 47
papers	citations	h-index	g-index

70	70	70	3041
all docs	docs citations	times ranked	citing authors

#	Article	IF	Citations
1	Activated CD4+ T Cells and Highly Differentiated Alloreactive CD4+ T Cells Distinguish Operationally Tolerant Liver Transplantation Recipients. Liver Transplantation, 2022, 28, 98-112.	1.3	8
2	ARHGDIB and AT1R autoantibodies are differentially related to the development and presence of chronic antibody-mediated rejection and fibrosis in kidney allografts. Human Immunology, 2021, 82, 89-96.	1.2	10
3	Expression of Senescence Marker TIGIT Identifies Polyfunctional Donor-Reactive CD4+ T Cells Preferentially Lost After Kidney Transplantation. Frontiers in Immunology, 2021, 12, 656846.	2.2	15
4	The FCGR3A 158ÂV/V-genotype is associated with decreased survival of renal allografts with chronic active antibody-mediated rejection. Scientific Reports, 2021, 11, 7903.	1.6	12
5	Effects of Morbid Obesity and Metabolic Syndrome on the Composition of Circulating Immune Subsets. Frontiers in Immunology, 2021, 12, 675018.	2.2	5
6	Alemtuzumab as Second-Line Treatment for Late Antibody-Mediated Rejection of Transplanted Kidneys. Transplantation Proceedings, 2021, 53, 2206-2211.	0.3	8
7	Current Tolerance-Associated Peripheral Blood Gene Expression Profiles After Liver Transplantation Are Influenced by Immunosuppressive Drugs and Prior Cytomegalovirus Infection. Frontiers in Immunology, 2021, 12, 738837.	2.2	1
8	Validation of a Combined Transcriptome and T Cell Receptor Alpha/Beta (TRA/TRB) Repertoire Assay at the Single Cell Level for Paucicellular Samples. Frontiers in Immunology, 2020, 11, 1999.	2.2	3
9	High numbers of differentiated CD28null CD8+ T cells are associated with a lowered risk for late rejection and graft loss after kidney transplantation. PLoS ONE, 2020, 15, e0228096.	1.1	12
10	A very low thymus function identifies patients with substantial increased risk for long-term mortality after kidney transplantation. Immunity and Ageing, 2020, 17, 4.	1.8	15
11	Title is missing!. , 2020, 15, e0228096.		0
12	Title is missing!. , 2020, 15, e0228096.		0
13	Title is missing!. , 2020, 15, e0228096.		0
14	Title is missing!. , 2020, 15, e0228096.		0
15	Title is missing!. , 2020, 15, e0228096.		0
16	Title is missing!. , 2020, 15, e0228096.		0
17	Increased CD16 expression on NK cells is indicative of antibody-dependent cell-mediated cytotoxicity in chronic-active antibody-mediated rejection. Transplant Immunology, 2019, 54, 52-58.	0.6	22
18	Immunosuppressive drug withdrawal late after liver transplantation improves the lipid profile and reduces infections. European Journal of Gastroenterology and Hepatology, 2019, 31, 1444-1451.	0.8	5

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19	Co-inhibitory profile and cytotoxicity of CD57+PD-1â˜ T cells in end-stage renal disease patients. Clinical and Experimental Immunology, 2018, 191, 363-372.	1.1	6
20	CD4+CD28null T cells are not alloreactive unless stimulated by interleukin-15. American Journal of Transplantation, 2018, 18, 341-350.	2.6	10
21	A comprehensive characterization of aggravated aging-related changes in T lymphocytes and monocytes in end-stage renal disease: the iESRD study. Immunity and Ageing, 2018, 15, 27.	1.8	43
22	Potential Beneficial Effects of Cytomegalovirus Infection after Transplantation. Frontiers in Immunology, 2018, 9, 389.	2.2	49
23	Lymph node and circulating T cell characteristics are strongly correlated in end-stage renal disease patients, but highly differentiated T cells reside within the circulation. Clinical and Experimental Immunology, 2017, 188, 299-310.	1.1	15
24	Pretransplant Numbers of CD16 + Monocytes as a Novel Biomarker to Predict Acute Rejection After Kidney Transplantation: A Pilot Study. American Journal of Transplantation, 2017, 17, 2659-2667.	2.6	29
25	Natural regulatory T cells from patients with end-stage renal disease can be used for large-scaleÂgeneration of highly suppressive alloantigen-specific Tregs. Kidney International, 2017, 91, 1203-1213.	2.6	10
26	pERK-dependent defective TCR-mediated activation of CD4+ T cells in end-stage renal disease patients. Immunity and Ageing, 2017, 14, 14.	1.8	12
27	Belatacept Does Not Inhibit Follicular T Cell-Dependent B-Cell Differentiation in Kidney Transplantation. Frontiers in Immunology, 2017, 8, 641.	2.2	25
28	Protective Cytomegalovirus (CMV)-Specific T-Cell Immunity Is Frequent in Kidney Transplant Patients without Serum Anti-CMV Antibodies. Frontiers in Immunology, 2017, 8, 1137.	2.2	22
29	T-Cell Composition of the Lymph Node Is Associated with the Risk for Early Rejection after Renal Transplantation. Frontiers in Immunology, 2017, 8, 1416.	2.2	9
30	End-Stage Renal Disease Causes Skewing in the TCR VÎ²-Repertoire Primarily within CD8+ T Cell Subsets. Frontiers in Immunology, 2017, 8, 1826.	2.2	19
31	Latency for cytomegalovirus impacts T cell ageing significantly in elderly end-stage renal disease patients. Clinical and Experimental Immunology, 2016, 186, 239-248.	1.1	13
32	Uremia-Associated Premature Aging of T Cells Does Not Predict Infectious Complications After Renal Transplantation. American Journal of Transplantation, 2016, 16, 2324-2333.	2.6	17
33	Loss of CD28 on Peripheral T Cells Decreases the Risk for Early Acute Rejection after Kidney Transplantation. PLoS ONE, 2016, 11, e0150826.	1.1	46
34	End stage renal disease patients have a skewed T cell receptor VÎ² repertoire. Immunity and Ageing, 2015, 12, 28.	1.8	20
35	Primary Cytomegalovirus Infection Significantly Impacts Circulating T Cells in Kidney Transplant Recipients. American Journal of Transplantation, 2015, 15, 3143-3156.	2.6	28
36	Encapsulating peritoneal sclerosis is associated with T-cell activation. Nephrology Dialysis Transplantation, 2015, 30, 1568-1576.	0.4	13

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37	Chronic Kidney Disease and Premature Ageing of the Adaptive Immune Response. Current Urology Reports, 2015, 16, 471.	1.0	48
38	Allogeneic Mature Human Dendritic Cells Generate Superior Alloreactive Regulatory T Cells in the Presence of IL-15. Journal of Immunology, 2015, 194, 5282-5293.	0.4	12
39	Follicular T helper cells and humoral reactivity in kidney transplant patients. Clinical and Experimental Immunology, 2015, 180, 329-340.	1.1	107
40	Rotterdam: Main port for organ transplantation research in the Netherlands. Transplant Immunology, 2014, 31, 200-206.	0.6	1
41	Uremia-associated immunological aging is stably imprinted in the T-cell system and not reversed by kidney transplantation. Transplant International, 2014, 27, 1272-1284.	0.8	55
42	Substantial Proliferation of Human Renal Tubular Epithelial Cellâ€“Reactive CD4+CD28null Memory T Cells, Which Is Resistant to Tacrolimus and Everolimus. Transplantation, 2014, 97, 47-55.	0.5	17
43	T-cell ageing in end-stage renal disease patients: Assessment and clinical relevance. World Journal of Nephrology, 2014, 3, 268.	0.8	30
44	Mesenchymal stem cells control alloreactive CD8+CD28â^'T cells. Clinical and Experimental Immunology, 2013, 174, 449-458.	1.1	41
45	Cytomegalovirus contributes partly to uraemia-associated premature immunological ageing of the T cell compartment. Clinical and Experimental Immunology, 2013, 174, 424-432.	1.1	36
46	Activation-induced CD137 is a fast assay for identification and multi-parameter flow cytometric analysis of alloreactive T cells. Clinical and Experimental Immunology, 2013, 174, 179-191.	1.1	48
47	Human adipose-tissue derived mesenchymal stem cells induce functional de-novo regulatory T cells with methylated FOXP3 gene DNA. Clinical and Experimental Immunology, 2013, 173, 343-354.	1.1	79
48	Loss of Renal Function Causes Premature Aging of the Immune System. Blood Purification, 2013, 36, 173-178.	0.9	61
49	Kinetics of Homeostatic Proliferation and Thymopoiesis after rATG Induction Therapy in Kidney Transplant Patients. Transplantation, 2013, 96, 904-913.	0.5	36
50	Circulating CD4+CD28null T Cells May Increase the Risk of an Atherosclerotic Vascular Event Shortly after Kidney Transplantation. Journal of Transplantation, 2013, 2013, 1-8.	0.3	15
51	Identification of Circulating Human Antigen-Reactive CD4+FOXP3+ Natural Regulatory T Cells. Journal of Immunology, 2012, 188, 1083-1090.	0.4	32
52	Terminally Differentiated CD8+ Temra Cells Are Associated With the Risk for Acute Kidney Allograft Rejection. Transplantation, 2012, 94, 63-69.	0.5	75
53	Systemic varicella zoster virus reactive effector memory Tâ€cells impaired in the elderly and in kidney transplant recipients. Journal of Medical Virology, 2012, 84, 2018-2025.	2.5	26
54	A killer on the road: circulating CD4+CD28null T cells as cardiovascular risk factor in ESRD patients. Journal of Nephrology, 2012, 25, 183-191.	0.9	40

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55	Premature aging of circulating T cells in patients with end-stage renal disease. Kidney International, 2011, 80, 208-217.	2.6	181
56	Circulating pro-inflammatory CD4posCD28null T cells are independently associated with cardiovascular disease in ESRD patients. Nephrology Dialysis Transplantation, 2010, 25, 3640-3646.	0.4	55
57	CMV Seropositivity Determines Epoetin Dose and Hemoglobin Levels in Patients with CKD. Journal of the American Society of Nephrology: JASN, 2009, 20, 2661-2666.	3.0	26
58	The human alloreactive CD4+ T-cell repertoire is biased to a Th17 response and the frequency is inversely related to the number of HLA class II mismatches. Blood, 2009, 114, 3947-3955.	0.6	33
59	Hepatitis B vaccine-specific CD4+ T cells can be detected and characterised at the single cell level: Limited usefulness of dendritic cells as signal enhancers. Journal of Immunological Methods, 2008, 330, 1-11.	0.6	31
60	IL-2 Producing Memory CD4+ T Lymphocytes Are Closely Associated with the Generation of IgG-Secreting Plasma Cells. Journal of Immunology, 2008, 181, 3665-3673.	0.4	50
61	Expansion of cytolytic CD4+CD28â^' T cells in end-stage renal disease. Kidney International, 2008, 74, 760-767.	2.6	95
62	Seropositivity for cytomegalovirus in patients with end-stage renal disease is strongly associated with atherosclerotic disease. Nephrology Dialysis Transplantation, 2007, 22, 3298-3303.	0.4	65
63	Progressive loss of renal function is associated with activation and depletion of naive T lymphocytes. Clinical Immunology, 2006, 118, 83-91.	1.4	126
64	Pharmacokinetics of oral fumarates in healthy subjects. British Journal of Clinical Pharmacology, 2004, 58, 429-432.	1.1	124
65	Psoriasis Is Not Associated with IL-12p70/IL-12p40 Production and IL12B Promoter Polymorphism. Journal of Investigative Dermatology, 2004, 122, 923-926.	0.3	22
66	In vitro pharmacokinetics of anti-psoriatic fumaric acid esters. BMC Pharmacology, 2004, 4, 22.	0.4	62
67	Monomethylfumarate affects polarization of monocyte-derived dendritic cells resulting in down-regulated Th1 lymphocyte responses. European Journal of Immunology, 2004, 34, 565-575.	1.6	99
68	Time Course of Atrial Fibrillation-induced Cellular Structural Remodeling in Atria of the Goat. Journal of Molecular and Cellular Cardiology, 2001, 33, 2083-2094.	0.9	186