Jonatan Ising Bagger

List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	Glucagon Clearance Is Preserved in Type 2 Diabetes. Diabetes, 2022, 71, 73-82.	0.3	6
2	THERAPY OF ENDOCRINE DISEASE: Amylin and calcitonin – physiology and pharmacology. European Journal of Endocrinology, 2022, 186, R93-R111.	1.9	4
3	The effect of curcumin on hepatic fat content in individuals with obesity. Diabetes, Obesity and Metabolism, 2022, 24, 2192-2202.	2.2	8
4	Glucagonostatic Potency of GLP-1 in Patients With Type 2 Diabetes, Patients With Type 1 Diabetes, and Healthy Control Subjects. Diabetes, 2021, 70, 1347-1356.	0.3	9
5	Acute hypoglycemia and risk of cardiac arrhythmias in insulin-treated type 2 diabetes and controls. European Journal of Endocrinology, 2021, 185, 343-353.	1.9	12
6	Metabolic effects of 1-week binge drinking and fast food intake during Roskilde Festival in young healthy male adults. European Journal of Endocrinology, 2021, 185, 23-32.	1.9	2
7	Mechanisms in Endocrinology: The physiology of neuronostatin. European Journal of Endocrinology, 2021, 185, R93-R101.	1.9	0
8	Hepatic microbiome in healthy lean and obese humans. JHEP Reports, 2021, 3, 100299.	2.6	15
9	Circulating Levels of the Soluble Receptor for AGE (sRAGE) during Escalating Oral Glucose Dosages and Corresponding Isoglycaemic i.v. Glucose Infusions in Individuals with and without Type 2 Diabetes. Nutrients, 2020, 12, 2928.	1.7	2
10	One Year's Treatment with the Glucagon-Like Peptide 1 Receptor Agonist Liraglutide Decreases Hepatic Fat Content in Women with Nonalcoholic Fatty Liver Disease and Prior Gestational Diabetes Mellitus in a Randomized, Placebo-Controlled Trial. Journal of Clinical Medicine, 2020, 9, 3213.	1.0	14
11	Glucagon Resistance at the Level of Amino Acid Turnover in Obese Subjects With Hepatic Steatosis. Diabetes, 2020, 69, 1090-1099.	0.3	50
12	Amylin and Calcitonin: Potential Therapeutic Strategies to Reduce Body Weight and Liver Fat. Frontiers in Endocrinology, 2020, 11, 617400.	1.5	25
13	No detectable effect of a type 2 diabetes-associated TCF7L2 genotype on the incretin effect. Endocrine Connections, 2020, 9, 1221-1232.	0.8	2
14	The Effects of Dual GLP-1/GIP Receptor Agonism on Glucagon Secretion—A Review. International Journal of Molecular Sciences, 2019, 20, 4092.	1.8	47
15	Hepatic transcriptome signatures in patients with varying degrees of nonalcoholic fatty liver disease compared with healthy normal-weight individuals. American Journal of Physiology - Renal Physiology, 2019, 316, G462-G472.	1.6	162
16	1721-P: Effect of the TCF7L2 Variant rs7903146 T Allele on the Incretin Effect in Individuals with Normal Glucose Tolerance or Type 2 Diabetes. Diabetes, 2019, 68, .	0.3	0
17	Is glucagonâ€like peptideâ€1 fully protected by the dipeptidyl peptidase 4 inhibitor sitagliptin when administered to patients with type 2 diabetes?. Diabetes, Obesity and Metabolism, 2018, 20, 1937-1943. 	2.2	3
18	Effects of Smoking Versus Nonsmoking on Postprandial Glucose Metabolism in Heavy Smokers Compared With Nonsmokers. Diabetes Care, 2018, 41, 1260-1267.	4.3	13

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19	Determinants of Fasting Hyperglucagonemia in Patients with Type 2 Diabetes and Nondiabetic Control Subjects. Metabolic Syndrome and Related Disorders, 2018, 16, 530-536.	0.5	22
20	Glucagon Resistance at the Level of Amino Acid Turnover and Ureagenesis in Obese Subjects with Hepatic Steatosis. Diabetes, 2018, 67, 147-OR.	0.3	1
21	Clinical Features and Hepatic Molecular Characteristics in NAFLD and NASH Patients Compared to Normal Weight Healthy Individuals. Diabetes, 2018, 67, .	0.3	1
22	Women with prior gestational diabetes mellitus and prediabetes are characterised by a decreased incretin effect. Diabetologia, 2017, 60, 1344-1353.	2.9	14
23	Mathematical Modelling of Glucoseâ€Dependent Insulinotropic Polypeptide and Glucagonâ€like Peptideâ€1 following Ingestion of Glucose. Basic and Clinical Pharmacology and Toxicology, 2017, 121, 290-297.	1.2	8
24	Impaired beta cell sensitivity to incretins in type 2 diabetes is insufficiently compensated by higher incretin response. Nutrition, Metabolism and Cardiovascular Diseases, 2017, 27, 1123-1129.	1.1	16
25	Physiological and pathophysiological aspects of incretin hormones and glucagon. Danish Medical Journal, 2017, 64, .	0.5	1
26	Semimechanistic model describing gastric emptying and glucose absorption in healthy subjects and patients with type 2 diabetes. Journal of Clinical Pharmacology, 2016, 56, 340-348.	1.0	14
27	Diabetic Ketoacidosis in a Patient with Type 2 Diabetes After Initiation of Sodium–Glucose Cotransporter 2 Inhibitor Treatment. Basic and Clinical Pharmacology and Toxicology, 2016, 118, 168-170.	1.2	35
28	Involvement of steatosis-induced glucagon resistance in hyperglucagonaemia. Medical Hypotheses, 2016, 86, 100-103.	0.8	24
29	Higher Endogenous Clucose Production During OGTT vs Isoglycemic Intravenous Glucose Infusion. Journal of Clinical Endocrinology and Metabolism, 2016, 101, 4377-4384.	1.8	12
30	Evidence of Extrapancreatic Glucagon Secretion in Man. Diabetes, 2016, 65, 585-597.	0.3	136
31	Postprandial incretin and islet hormone responses and dipeptidyl-peptidase 4 enzymatic activity in patients with maturity onset diabetes of the young. European Journal of Endocrinology, 2015, 173, 205-215.	1.9	11
32	Effect of Oxyntomodulin, Glucagon, GLP-1, and Combined Glucagon +GLP-1 Infusion on Food Intake, Appetite, and Resting Energy Expenditure. Journal of Clinical Endocrinology and Metabolism, 2015, 100, 4541-4552.	1.8	65
33	Incretin Effect and Glucagon Responses to Oral and Intravenous Glucose in Patients With Maturity-Onset Diabetes of the Young–Type 2 and Type 3. Diabetes, 2014, 63, 2838-2844.	0.3	43
34	Glucagon and Type 2 Diabetes: the Return of the Alpha Cell. Current Diabetes Reports, 2014, 14, 555.	1.7	96
35	Glucagon responses to increasing oral loads of glucose and corresponding isoglycaemic intravenous glucose infusions in patients with type 2 diabetes and healthy individuals. Diabetologia, 2014, 57, 1720-1725.	2.9	56
36	Glucose-Lowering Effects and Low Risk of Hypoglycemia in Patients With Maturity-Onset Diabetes of the Young When Treated With a GLP-1 Receptor Agonist: A Double-Blind, Randomized, Crossover Trial. Diabetes Care, 2014, 37, 1797-1805.	4.3	94

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37	Reduced postprandial <scp>GLP</scp> â€l responses in women with gestational diabetes mellitus. Diabetes, Obesity and Metabolism, 2013, 15, 713-720.	2.2	37
38	Mechanisms of the Incretin Effect in Subjects with Normal Glucose Tolerance and Patients with Type 2 Diabetes. PLoS ONE, 2013, 8, e73154.	1.1	38
39	Impaired Incretin-Induced Amplification of Insulin Secretion after Glucose Homeostatic Dysregulation in Healthy Subjects. Journal of Clinical Endocrinology and Metabolism, 2012, 97, 1363-1370.	1.8	61
40	Glucagon antagonism as a potential therapeutic target in type 2 diabetes. Diabetes, Obesity and Metabolism, 2011, 13, 965-971.	2.2	114
41	Increased Postprandial GIP and Glucagon Responses, But Unaltered GLP-1 Response after Intervention with Steroid Hormone, Relative Physical Inactivity, And High-Calorie Diet in Healthy Subjects. Journal of Clinical Endocrinology and Metabolism, 2011, 96, 447-453.	1.8	152
42	Impaired Regulation of the Incretin Effect in Patients with Type 2 Diabetes. Journal of Clinical Endocrinology and Metabolism, 2011, 96, 737-745.	1.8	190
43	The separate and combined impact of the intestinal hormones, GIP, GLP-1, and GLP-2, on glucagon secretion in type 2 diabetes. American Journal of Physiology - Endocrinology and Metabolism, 2011, 300, E1038-E1046.	1.8	148
44	Therapy for Obesity Based on Gastrointestinal Hormones. Review of Diabetic Studies, 2011, 8, 339-347.	0.5	9
45	The Alpha-Cell as Target for Type 2 Diabetes Therapy. Review of Diabetic Studies, 2011, 8, 369-381.	0.5	49
46	Reduced Glucose Tolerance and Insulin Resistance Induced by Steroid Treatment, Relative Physical Inactivity, and High-Calorie Diet Impairs the Incretin Effect in Healthy Subjects. Journal of Clinical Endocrinology and Metabolism, 2010, 95, 3309-3317.	1.8	92