Sergio P A Toledo

List of Publications by Year
in descending order

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44	3,309	236925	243625
papers	citations	25 h-index	44 g-index

44	44	44	3246
all docs	docs citations	times ranked	citing authors

#	Article	IF	Citations
1	A HIF1Î± Regulatory Loop Links Hypoxia and Mitochondrial Signals in Pheochromocytomas. PLoS Genetics, 2005, 1, e8.	3.5	394
2	Germline mutations in TMEM127 confer susceptibility to pheochromocytoma. Nature Genetics, 2010, 42, 229-233.	21.4	364
3	Clinical Characteristics and Therapeutic Responses in Patients with Germ-LineAIPMutations and Pituitary Adenomas: An International Collaborative Study. Journal of Clinical Endocrinology and Metabolism, 2010, 95, E373-E383.	3.6	323
4	Exomic Sequencing of Medullary Thyroid Cancer Reveals Dominant and Mutually Exclusive Oncogenic Mutations in RET and RAS. Journal of Clinical Endocrinology and Metabolism, 2013, 98, E364-E369.	3.6	213
5	Familial Dwarfism due to a Novel Mutation of the Growth Hormone-Releasing Hormone Receptor Gene¹. Journal of Clinical Endocrinology and Metabolism, 1999, 84, 917-923.	3.6	188
6	Spectrum and Prevalence of FP/TMEM127 Gene Mutations in Pheochromocytomas and Paragangliomas. JAMA - Journal of the American Medical Association, 2010, 304, 2611.	7.4	174
7	The desmopressin stimulation test in the differential diagnosis of Cushing's syndrome. Clinical Endocrinology, 1993, 38, 463-472.	2.4	137
8	Outcomes of adrenal-sparing surgery or total adrenalectomy in phaeochromocytoma associated with multiple endocrine neoplasia type 2: an international retrospective population-based study. Lancet Oncology, The, 2014, 15, 648-655.	10.7	137
9	Impaired Adrenocorticotropin-Adrenal Axis in Combined Pituitary Hormone Deficiency Caused by a Two-Base Pair Deletion (301â€“302delAG) in the Prophet of Pit-1 Gene¹. Journal of Clinical Endocrinology and Metabolism, 2000, 85, 390-397.	3.6	119
10	Risk profiles and penetrance estimations in multiple endocrine neoplasia type 2A caused by germline RET mutations located in exon 10. Human Mutation, 2011, 32, 51-58.	2.5	117
11	Hypercalcitoninemia is not Pathognomonic of Medullary Thyroid Carcinoma. Clinics, 2009, 64, 699-706.	1.5	113
12	In vivo and in vitro oncogenic effects of HIF2A mutations in pheochromocytomas and paragangliomas. Endocrine-Related Cancer, 2013, 20, 349-359.	3.1	110
13	Novel Pheochromocytoma Susceptibility Loci Identified by Integrative Genomics. Cancer Research, 2005, 65, 9651-9658.	0.9	88
14	Germline Mutation in the Aryl Hydrocarbon Receptor Interacting Protein Gene in Familial Somatotropinoma. Journal of Clinical Endocrinology and Metabolism, 2007, 92, 1934-1937.	3.6	82
15	Early-onset, progressive, frequent, extensive, and severe bone mineral and renal complications in multiple endocrine neoplasia type 1â€“associated primary hyperparathyroidism. Journal of Bone and Mineral Research, 2010, 25, 2382-2391.	2.8	68
16	Penetrance of Functioning and Nonfunctioning Pancreatic Neuroendocrine Tumors in Multiple Endocrine Neoplasia Type 1 in the Second Decade of Life. Journal of Clinical Endocrinology and Metabolism, 2014, 99, E89-E96.	3.6	61
17	Growth Hormone-Releasing Peptide-2 Stimulates GH Secretion in GH-Deficient Patients with Mutated GH-Releasing Hormone Receptor1. Journal of Clinical Endocrinology and Metabolism, 2001, 86, 3279-3283.	3.6	50
18	Penetrance and Clinical Features of Pheochromocytoma in a Six-Generation Family Carrying a Germline TMEM127 Mutation. Journal of Clinical Endocrinology and Metabolism, 2015, 100, E308-E318.	3.6	44

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19	High Penetrance of Pheochromocytoma Associated with the Novel C634Y/Y791F Double Germline Mutation in theRETProtooncogene. Journal of Clinical Endocrinology and Metabolism, 2010, 95, 1318-1327.	3.6	43
20	NovelMEN1germline mutations in Brazilian families with multiple endocrine neoplasia typeÂ1. Clinical Endocrinology, 2007, 67, 377-384.	2.4	41
21	Comprehensive assessment of the disputed RET Y791F variant shows no association with medullary thyroid carcinoma susceptibility. Endocrine-Related Cancer, 2015, 22, 65-76.	3.1	41
22	A NovelVal648IleSubstitution inRETProtooncogene Observed in aCys634ArgMultiple Endocrine Neoplasia Type 2A Kindred Presenting with an Adrenocorticotropin-Producing Pheochromocytoma. Journal of Clinical Endocrinology and Metabolism, 2002, 87, 5658-5661.	3.6	35
23	Isolated familial somatotropinoma: 11q13-loh and gene/protein expression analysis suggests a possible involvement of aip also in non-pituitary tumorigenesis. Clinics, 2010, 65, 407-415.	1.5	33
24	Bone mineral density analysis in patients with primary hyperparathyroidism associated with multiple endocrine neoplasia type 1 after total parathyroidectomy. Clinical Endocrinology, 2010, 72, 462-468.	2.4	31
25	Biochemical, bone and renal patterns in hyperparathyroidism associated with multiple endocrine neoplasia type 1. Clinics, 2012, 67, 99-108.	1.5	28
26	Study of the Multiple Endocrine Neoplasia Type 1, Growth Hormone-Releasing Hormone Receptor, GsÎ±, and Gi2Î± Genes in Isolated Familial Acromegaly1. Journal of Clinical Endocrinology and Metabolism, 2001, 86, 542-544.	3.6	26
27	Assessment of Depression, Anxiety, Quality of Life, and Coping in Long-Standing Multiple Endocrine Neoplasia Type 2 Patients. Thyroid, 2017, 27, 693-706.	4.5	26
28	Association between the p27 rs2066827 variant and tumor multiplicity in patients harboring MEN1 germline mutations. European Journal of Endocrinology, 2014, 171, 335-342.	3.7	25
29	Genotype and phenotype landscape of MEN2 in 554 medullary thyroid cancer patients: the BrasMEN study. Endocrine Connections, 2019, 8, 289-298.	1.9	25
30	p27 variant and corticotropinoma susceptibility: a genetic and in vitro study. Endocrine-Related Cancer, 2014, 21, 395-404.	3.1	20
31	Immunohistochemistry of medullary thyroid carcinoma and C-cell hyperplasia by an affinity-purified anti-human calcitonin antiserum. Cancer, 1993, 72, 1356-1363.	4.1	18
32	Growth hormone response to growth hormone-releasing peptide-2 in growth hormone-deficient Little mice. Clinics, 2012, 67, 265-272.	1.5	16
33	Calcitonin deficiency in early stages of chronic autoimmune thyroiditis. Clinical Endocrinology, 1998, 49, 69-75.	2.4	15
34	Germline mutation landscape of multiple endocrine neoplasia type 1 using full gene next-generation sequencing. European Journal of Endocrinology, 2018, 179, 391-407.	3.7	14
35	A differential diagnosis of inherited endocrine tumors and their tumor counterparts. Clinics, 2013, 68, 1039-1056.	1.5	14
36	Familial Isolated Pituitary Adenoma: Evidence for Genetic Heterogeneity. Frontiers of Hormone Research, 2010, 38, 77-86.	1.0	13

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37	Post-surgical follow-up of primary hyperparathyroidism associated with multiple endocrine neoplasia type 1. Clinics, 2012, 67, 169-172.	1.5	13
38	Sporadic Medullary Thyroid Carcinoma: Clinical Data From A University Hospital. Clinics, 2009, 64, 379-386.	1.5	13
39	Somatotroph pituitary adenoma with acromegaly and autosomal dominant polycystic kidney disease: SSTR5 polymorphism and PKD1 mutation. Pituitary, 2012, 15, 342-349.	2.9	10
40	Narrowing the gap of personalized medicine in emerging countries: the case of multiple endocrine neoplasias in Brazil. Clinics, 2012, 67, 3-6.	1.5	10
41	Surgical approach to medullary thyroid carcinoma associated with multiple endocrine neoplasia type 2. Clinics, 2012, 67, 149-154.	1.5	9
42	RET haplotype, not linked to the C620R activating mutation, associated with Hirschsprung disease in a novel MEN2 family. Clinics, 2012, 67, 57-61.	1.5	3
43	RET Y791F: alone or accompanied?. Archives of Endocrinology and Metabolism, 2015, 59, 476-477.	0.6	3
44	Assessing the emerging oncogene protein kinase C epsilon as a candidate gene in families with Carney complexâ€2. Clinical Endocrinology, 2012, 76, 147-148.	2.4	2