Stephen M Rosenthal

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/13009/publications.pdf

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37 papers

2,505 citations

430874 18 h-index 35 g-index

40 all docs

40 docs citations

40 times ranked

1900 citing authors

#	Article	IF	CITATIONS
1	Growth in Transgender/Gender-Diverse Youth in the First Year of Treatment With Gonadotropin-Releasing Hormone Agonists. Journal of Adolescent Health, 2022, 70, 108-113.	2.5	9
2	The effect of gender-affirming hormone treatment on serum creatinine in transgender and gender-diverse youth: implications for estimating GFR. Pediatric Nephrology, 2022, 37, 2141-2150.	1.7	4
3	Interpretation of Bone Mineral Density Z-Scores by Dual-Energy X-Ray Absorptiometry in Transgender and Gender Diverse Youth Prior to Gender-Affirming Medical Therapy. Journal of Clinical Densitometry, 2022, 25, 559-568.	1.2	4
4	Psychosocial Characteristics of Transgender Youth Seeking Gender-Affirming Medical Treatment: Baseline Findings From the Trans Youth Care Study. Journal of Adolescent Health, 2021, 68, 1104-1111.	2.5	37
5	Histrelin Implants for Suppression of Puberty in Youth with Gender Dysphoria: A Comparison of 50 mcg/Day (Vantas) and 65 mcg/Day (SupprelinLA). Transgender Health, 2021, 6, 36-42.	2.5	9
6	Bell v Tavistock and Portman NHS Foundation Trust [2020] EWHC 3274: Weighing current knowledge and uncertainties in decisions about gender-related treatment for transgender adolescents. International Journal of Transgender Health, 2021, 22, 217-224.	2.3	23
7	Association of High-Density Lipoprotein Cholesterol With Sex Steroid Treatment in Transgender and Gender-Diverse Youth. JAMA Pediatrics, 2021, 175, 520.	6.2	7
8	Challenges in the care of transgender and gender-diverse youth: an endocrinologist's view. Nature Reviews Endocrinology, 2021, 17, 581-591.	9.6	26
9	Increasing Access to Care for Transgender/Gender Diverse Youth Using Telehealth: A Quality Improvement Project. Telemedicine Journal and E-Health, 2021, , .	2.8	8
10	A Closer Look at the Psychosocial Realities of LGBTQ Youth. , 2021, , 25-26.		0
11	Sexual Assault Risk and School Facility Restrictions in Gender Minority Youth., 2021,, 80-81.		o
12	Consensus Parameter: Research Methodologies to Evaluate Neurodevelopmental Effects of Pubertal Suppression in Transgender Youth. Transgender Health, 2020, 5, 246-257.	2.5	22
13	Physiological and Metabolic Characteristics of a Cohort of Transgender and Gender-Diverse Youth in the United States. Journal of Adolescent Health, 2020, 67, 376-383.	2.5	12
14	Low Bone Mineral Density in Early Pubertal Transgender/Gender Diverse Youth: Findings From the Trans Youth Care Study. Journal of the Endocrine Society, 2020, 4, byaa065.	0.2	33
15	Response to Letter to the Editor: "Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons: An Endocrine Society Clinical Practice Guideline― Journal of Clinical Endocrinology and Metabolism, 2019, 104, 5102-5103.	3.6	2
16	Creating the Trans Youth Research Network: A Collaborative Research Endeavor. Transgender Health, 2019, 4, 304-312.	2.5	11
17	Sexual Assault Risk and School Facility Restrictions in Gender Minority Youth. Pediatrics, 2019, 143, .	2.1	4
18	Impact of Early Medical Treatment for Transgender Youth: Protocol for the Longitudinal, Observational Trans Youth Care Study. JMIR Research Protocols, 2019, 8, e14434.	1.0	52

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19	A Closer Look at the Psychosocial Realities of LGBTQ Youth. Pediatrics, 2018, 141, .	2.1	7
20	Enhancing Pediatric Trainees' and Students' Knowledge in Providing Care to Transgender Youth. Journal of Adolescent Health, 2017, 60, 425-430.	2.5	57
21	Statement on gender-affirmative approach to care from the pediatric endocrine society special interest group on transgender health. Current Opinion in Pediatrics, 2017, 29, 475-480.	2.0	44
22	Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons: An Endocrine Society* Clinical Practice Guideline. Journal of Clinical Endocrinology and Metabolism, 2017, 102, 3869-3903.	3.6	1,442
23	Transgender youth: current concepts. Annals of Pediatric Endocrinology and Metabolism, 2016, 21, 185.	2.3	31
24	Health Care Providers' Comfort With and Barriers to Care of Transgender Youth. Journal of Adolescent Health, 2015, 56, 251-253.	2.5	152
25	Gender Variance and Dysphoria in Children and Adolescents. Pediatric Clinics of North America, 2015, 62, 1001-1016.	1.8	43
26	Treating Transgender Youth: Pushing the Dialogue Forward. Journal of Adolescent Health, 2015, 57, 357-358.	2.5	2
27	Approach to the Patient: Transgender Youth: Endocrine Considerations. Journal of Clinical Endocrinology and Metabolism, 2014, 99, 4379-4389.	3.6	120
28	Psychological and Medical Care of Gender Nonconforming Youth. Pediatrics, 2014, 134, 1184-1192.	2.1	96
29	Statement 4: therapy should be offered to children with idiopathic short stature (ISS) whose heights are < -2.25 standard deviation (SD) score. Pediatric Endocrinology Reviews, 2008, 5 Suppl 3, 847-52.	1.2	0
30	Early Stimulation and Late Inhibition of Extracellular Signal-Regulated Kinase 1/2 Phosphorylation by IGF-I: A Potential Mechanism Mediating the Switch in IGF-I Action on Skeletal Muscle Cell Differentiation. Endocrinology, 2002, 143, 511-516.	2.8	19
31	Growth Factor-Stimulated Phosphorylation of Akt and p70S6K Is Differentially Inhibited by LY294002 and Wortmannin*. Endocrinology, 2001, 142, 498-501.	2.8	44
32	Growth Factor-Stimulated Phosphorylation of Akt and p70S6K Is Differentially Inhibited by LY294002 and Wortmannin. Endocrinology, 2001, 142, 498-501.	2.8	18
33	Opposing early inhibitory and late stimulatory effects of insulin-like growth factor-l on myogenin gene transcription. Journal of Cellular Biochemistry, 2000, 78, 617-626.	2.6	26
34	Adjunctive Growth Hormone during Ovarian Hyperstimulation Increases Levels of Insulin-Like Growth Factor Binding Proteins in Follicular Fluid: A Randomized, Placebo-Controlled, Cross-Over Study*. Journal of Clinical Endocrinology and Metabolism, 1997, 82, 1171-1176.	3.6	12
35	Embryonic expression of tenascin-X suggests a role in limb, muscle, and heart development. Developmental Dynamics, 1995, 203, 491-504.	1.8	90
36	A monoclonal antibody to the T-cell receptor increases IGF-I receptor content in normal T-lymphocytes: Comparison with phytohemagglutinin. Journal of Cellular Biochemistry, 1992, 48, 81-85.	2.6	10

#	Article	IF	CITATIONS
37	Short Term Continuous Intravenous Infusion of Growth Hormone (GH) Inhibits GH-Releasing Hormone-Induced GH Secretion: A Time-Dependent Effect*. Journal of Clinical Endocrinology and Metabolism, 1989, 68, 1101-1105.	3.6	28