Vijay Anand Mittal

List of Publications by Year
in descending order

252	7,534	61857	85405
papers	citations	43 h-index	71 g-index

284	284	284	6619
all docs	docs citations	times ranked	citing authors

#	Article	IF	Citations
1	Stress and the Hypothalamic Pituitary Adrenal Axis in the Developmental Course of Schizophrenia. Annual Review of Clinical Psychology, 2008, 4, 189-216.	6.3	515
2	The Stress Cascade and Schizophrenia: Etiology and Onset. Schizophrenia Bulletin, 2003, 29, 671-692.	2.3	375
3	Beyond the FRN: Broadening the time-course of EEG and ERP components implicated in reward processing. International Journal of Psychophysiology, 2018, 132, 184-202.	0.5	207
4	Alterations in Brain Structures Related to Taste Reward Circuitry in Ill and Recovered Anorexia Nervosa and in Bulimia Nervosa. American Journal of Psychiatry, 2013, 170, 1152-1160.	4.0	191
5	Gene-Environment Interaction and Covariation in Schizophrenia: The Role of Obstetric Complications. Schizophrenia Bulletin, 2008, 34, 1083-1094.	2.3	177
6	Longitudinal Study of Stressful Life Events and Daily Stressors Among Adolescents at High Risk for Psychotic Disorders. Schizophrenia Bulletin, 2011, 37, 432-441.	2.3	119
7	Longitudinal Progression of Movement Abnormalities in Relation to Psychotic Symptoms in Adolescents at High Risk of Schizophrenia. Archives of General Psychiatry, 2008, 65, 165.	13.8	113
8	Orbitofrontal cortex volume and brain reward response in obesity. International Journal of Obesity, 2015, 39, 214-221.	1.6	112
9	Neurological Soft Signs Predict Abnormal Cerebellar-Thalamic Tract Development and Negative Symptoms in Adolescents at High Risk for Psychosis: A Longitudinal Perspective. Schizophrenia Bulletin, 2014, 40, 1204-1215.	2.3	110
10	Movement abnormalities predict conversion to Axis I psychosis among prodromal adolescents.. Journal of Abnormal Psychology, 2007, 116, 796-803.	2.0	104
11	Cerebellar networks in individuals at ultra highâ€risk of psychosis: Impact on postural sway and symptom severity. Human Brain Mapping, 2014, 35, 4064-4078.	1.9	104
12	Cerebello-thalamo-cortical networks predict positive symptom progression in individuals at ultra-high risk for psychosis. NeuroImage: Clinical, 2017, 14, 622-628.	1.4	101
13	What Can Different Motor Circuits Tell Us About Psychosis? An RDoC Perspective. Schizophrenia Bulletin, 2017, 43, 949-955.	2.3	100
14	The Relations Among Putative Biorisk Markers in Schizotypal Adolescents: Minor Physical Anomalies, Movement Abnormalities, and Salivary Cortisol. Biological Psychiatry, 2007, 61, 1179-1186.	0.7	93
15	Actigraphic-measured sleep disturbance predicts increased positive symptoms in adolescents at ultra high-risk for psychosis: A longitudinal study. Schizophrenia Research, 2015, 164, 15-20.	1.1	89
16	Markers of Basal Ganglia Dysfunction and Conversion to Psychosis: Neurocognitive Deficits and Dyskinesias in the Prodromal Period. Biological Psychiatry, 2010, 68, 93-99.	0.7	86
17	Research domain criteria (RDoC) grows up: Strengthening neurodevelopment investigation within the RDoC framework. Journal of Affective Disorders, 2017, 216, 30-35.	2.0	86
18	Language as a biomarker for psychosis: A natural language processing approach. Schizophrenia Research, 2020, 226, 158-166.	1.1	86

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19	Dysfunctional Activation of the Cerebellum in Schizophrenia. Clinical Psychological Science, 2015, 3, 545-566.	2.4	84
20	Sleep dysfunction and thalamic abnormalities in adolescents at ultra high-risk for psychosis. Schizophrenia Research, 2013, 151, 148-153.	1.1	83
21	Cerebellar-Motor Dysfunction in Schizophrenia and Psychosis-Risk: The Importance of Regional Cerebellar Analysis Approaches. Frontiers in Psychiatry, 2014, 5, 160.	1.3	76
22	Updating the research domain criteria: the utility of a motor dimension. Psychological Medicine, 2015, 45, 2685-2689.	2.7	75
23	Regional cerebellar volume and cognitive function from adolescence to late middle age. Human Brain Mapping, 2015, 36, 1102-1120.	1.9	75
24	The clinical and prognostic value of motor abnormalities in psychosis, and the importance of instrumental assessment. Neuroscience and Biobehavioral Reviews, 2017, 80, 476-487.	2.9	75
25	Social relationships in young adults at ultra high risk for psychosis. Psychiatry Research, 2017, 247, 345-351.	1.7	74
26	Gesture behavior in unmedicated schizotypal adolescents.. Journal of Abnormal Psychology, 2006, 115, 351-358.	2.0	72
27	Motor System Pathology in Psychosis. Current Psychiatry Reports, 2017, 19, 97.	2.1	70
28	Evidence-Based Early Interventions for Individuals at Clinical High Risk for Psychosis. Journal of Nervous and Mental Disease, 2015, 203, 342-351.	0.5	69
29	A Meta-analytic Review of Auditory Event-Related Potential Components as Endophenotypes for Schizophrenia: Perspectives From First-Degree Relatives. Schizophrenia Bulletin, 2016, 42, 1504-1516.	2.3	68
30	Adolescents at clinical-high risk for psychosis: Circadian rhythm disturbances predict worsened prognosis at 1-year follow-up. Schizophrenia Research, 2017, 189, 37-42.	1.1	66
31	Elevated social Internet use and schizotypal personality disorder in adolescents. Schizophrenia Research, 2007, 94, 50-57.	1.1	65
32	Movement abnormalities and the progression of prodromal symptomatology in adolescents at risk for psychotic disorders.. Journal of Abnormal Psychology, 2007, 116, 260-267.	2.0	64
33	Diagnostic and Statistical Manual of Mental Disorders. Psychiatry Research, 2011, 189, 158-159.	1.7	62
34	Why We Should Take a Closer Look at Gestures. Schizophrenia Bulletin, 2016, 42, 259-261.	2.3	59
35	Widespread brain dysconnectivity associated with psychotic-like experiences in the general population. NeuroImage: Clinical, 2014, 4, 343-351.	1.4	57
36	<scp>I</scp>nternet addiction, reality substitution and longitudinal changes in psychoticâ€like experiences in young adults. Microbial Biotechnology, 2013, 7, 261-269.	0.9	55

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37	Differential motor and prefrontal cerebello-cortical network development: Evidence from multimodal neuroimaging. NeuroImage, 2016, 124, 591-601.	2.1	55
38	Neighborhood deprivation, prefrontal morphology and neurocognition in late childhood to early adolescence. NeuroImage, 2020, 220, 117086.	2.1	54
39	Physical activity level and medial temporal health in youth at ultra high-risk for psychosis.. Journal of Abnormal Psychology, 2013, 122, 1101-1110.	2.0	53
40	The utility of an RDoC motor domain to understand psychomotor symptoms in depression. Psychological Medicine, 2019, 49, 212-216.	2.7	51
41	Sleep dysfunction prior to the onset of schizophrenia: A review and neurodevelopmental diathesisâ€“stress conceptualization.. Clinical Psychology: Science and Practice, 2013, 20, 291-320.	0.6	50
42	Exercise Treatments for Psychosis: a Review. Current Treatment Options in Psychiatry, 2017, 4, 152-166.	0.7	50
43	Motor Clusters Reveal Differences in Risk for Psychosis, Cognitive Functioning, and Thalamocortical Connectivity: Evidence for Vulnerability Subtypes. Clinical Psychological Science, 2018, 6, 721-734.	2.4	50
44	Increased postural sway predicts negative symptom progression in youth at ultrahigh risk for psychosis. Schizophrenia Research, 2015, 162, 86-89.	1.1	49
45	Hippocampal Subregions Across the Psychosis Spectrum. Schizophrenia Bulletin, 2018, 44, 1091-1099.	2.3	49
46	Childhood Trauma and Neurocognition in Adults With Psychotic Disorders: A Systematic Review and Meta-analysis. Schizophrenia Bulletin, 2019, 45, 1195-1208.	2.3	48
47	Striatal volumes and dyskinetic movements in youth at high-risk for psychosis. Schizophrenia Research, 2010, 123, 68-70.	1.1	47
48	Cerebellar Morphology and Procedural Learning Impairment in Neuroleptic-Naive Youth at Ultrahigh Risk of Psychosis. Clinical Psychological Science, 2014, 2, 152-164.	2.4	44
49	A review of negative symptom assessment strategies in youth at clinical high-risk for psychosis. Schizophrenia Research, 2020, 222, 104-112.	1.1	43
50	Hippocampal Shape Abnormalities Predict Symptom Progression in Neuroleptic-Free Youth at Ultrahigh Risk for Psychosis. Schizophrenia Bulletin, 2015, 42, sbv086.	2.3	42
51	Initial development and preliminary psychometric properties of the Prodromal Inventory of Negative Symptoms (PINS). Schizophrenia Research, 2017, 189, 43-49.	1.1	42
52	Associations between spontaneous movement abnormalities and psychotic-like experiences in the general population. Schizophrenia Research, 2011, 132, 194-196.	1.1	41
53	Resting cortisol level, self-concept, and putative familial environment in adolescents at ultra high-risk for psychotic disorders. Psychoneuroendocrinology, 2015, 57, 26-36.	1.3	41
54	Understanding Language Abnormalities and Associated Clinical Markers in Psychosis: The Promise of Computational Methods. Schizophrenia Bulletin, 2021, 47, 344-362.	2.3	41

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55	Ethical, Legal, and Clinical Considerations when Disclosing a Highâ€Risk Syndrome for Psychosis. Bioethics, 2015, 29, 543-556.	0.7	40
56	Relation of neurological soft signs to psychiatric symptoms in schizophrenia. Schizophrenia Research, 2007, 94, 37-44.	1.1	38
57	Mismatch and lexical retrieval gestures are associated with visual information processing, verbal production, and symptomatology in youth at high risk for psychosis. Schizophrenia Research, 2014, 158, 64-68.	1.1	38
58	Emotional and behavioral symptomatology reported by help-seeking youth at clinical high-risk for psychosis. Schizophrenia Research, 2015, 162, 79-85.	1.1	38
59	The association between sleep dysfunction and psychosis-like experiences among college students. Psychiatry Research, 2017, 248, 6-12.	1.7	38
60	Psychomotor slowing in Schizophrenia: Implications for endophenotype and biomarker development. Biomarkers in Neuropsychiatry, 2020, 2, 100016.	0.7	38
61	Abnormal movements are associated with poor psychosocial functioning in adolescents at high risk for psychosis. Schizophrenia Research, 2011, 130, 164-169.	1.1	37
62	Spontaneous parkinsonisms and striatal impairment in neuroleptic free youth at ultrahigh risk for psychosis. NPJ Schizophrenia, 2015, 1, .	2.0	37
63	Automated analysis of written narratives reveals abnormalities in referential cohesion in youth at ultra high risk for psychosis. Schizophrenia Research, 2018, 192, 82-88.	1.1	36
64	Neurocognition and conversion to psychosis in adolescents at high-risk. Schizophrenia Research, 2008, 101, 161-168.	1.1	35
65	The presentation of dermatoglyphic abnormalities in schizophrenia: A meta-analytic review. Schizophrenia Research, 2012, 142, 1-11.	1.1	34
66	Deficits in Early Stages of Face Processing in Schizophrenia: A Systematic Review of the P100 Component. Schizophrenia Bulletin, 2016, 42, 519-527.	2.3	34
67	Emotion processing in female youth: Testing the stability of the late positive potential. Psychophysiology, 2018, 55, e12977.	1.2	34
68	Sleep/Wake Regularity Associated with Default Mode Network Structure among Healthy Adolescents and Young Adults. Scientific Reports, 2020, 10, 509.	1.6	34
69	Intrinsic Functional Connectivity in Salience and Default Mode Networks and Aberrant Social Processes in Youth at Ultra-High Risk for Psychosis. PLoS ONE, 2015, 10, e0134936.	1.1	33
70	Cerebellar Transcranial Direct Current Stimulation Improves Procedural Learning in Nonclinical Psychosis: A Double-Blind Crossover Study. Schizophrenia Bulletin, 2018, 44, 1373-1380.	2.3	33
71	Minor physical anomalies and vulnerability in prodromal youth. Schizophrenia Research, 2011, 129, 116-121.	1.1	32
72	Patients with schizophrenia show aberrant patterns of basal ganglia activation: Evidence from ALE meta-analysis. NeuroImage: Clinical, 2017, 14, 450-463.	1.4	32

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73	The impact of emotion awareness and regulation on psychotic symptoms during daily functioning. NPJ Schizophrenia, 2020, 6, 7.	2.0	32
74	Emotion regulation across the psychosis continuum. Development and Psychopathology, 2020, 32, 219-227.	1.4	31
75	Visual context processing dysfunctions in youth at high risk for psychosis: Resistance to the Ebbinghaus illusion and its symptom and social and role functioning correlates.. Journal of Abnormal Psychology, 2015, 124, 953-960.	2.0	30
76	Resting state connectivity dynamics in individuals at risk for psychosis.. Journal of Abnormal Psychology, 2018, 127, 314-325.	2.0	30
77	Striatal abnormalities and spontaneous dyskinesias in non-clinical psychosis. Schizophrenia Research, 2013, 151, 141-147.	1.1	29
78	Abnormal hippocampalâ€“thalamic white matter tract development and positive symptom course in individuals at ultra-high risk for psychosis. NPJ Schizophrenia, 2015, 1, .	2.0	29
79	Identification and Treatment of a Pineal Region Tumor in an Adolescent With Prodromal Psychotic Symptoms. American Journal of Psychiatry, 2010, 167, 1033-1037.	4.0	28
80	Core beliefs in healthy youth and youth at ultra high-risk for psychosis: Dimensionality and links to depression, anxiety, and attenuated psychotic symptoms. Development and Psychopathology, 2019, 31, 379-392.	1.4	28
81	Counterpoint. Early intervention for psychosis risk syndromes: Minimizing risk and maximizing benefit. Schizophrenia Research, 2021, 227, 10-17.	1.1	28
82	Stronger default mode network connectivity is associated with poorer clinical insight in youth at ultra high-risk for psychotic disorders. Schizophrenia Research, 2018, 193, 244-250.	1.1	27
83	Handwriting Analysis Indicates Spontaneous Dyskinesias in Neuroleptic Naïve Adolescents at High Risk for Psychosis. Journal of Visualized Experiments, 2013, , e50852.	0.2	25
84	Beat and metaphoric gestures are differentially associated with regional cerebellar and cortical volumes. Human Brain Mapping, 2015, 36, 4016-4030.	1.9	25
85	Neuroleptic-free youth at ultrahigh risk for psychosis evidence diminished emotion reactivity that is predicted by depression and anxiety. Schizophrenia Research, 2018, 193, 428-434.	1.1	25
86	External validation and extension of the NAPLS-2 and SIPS-RC personalized risk calculators in an independent clinical high-risk sample. Psychiatry Research, 2019, 279, 9-14.	1.7	25
87	Distinct and opposite profiles of connectivity during selfâ€reference task and rest in youth at clinical high risk for psychosis. Human Brain Mapping, 2019, 40, 3254-3264.	1.9	25
88	Combating the Dangers of Sedentary Activity on Child and Adolescent Mental Health During the Time of COVID-19. Journal of the American Academy of Child and Adolescent Psychiatry, 2020, 59, 1197-1198.	0.3	25
89	Dermatoglyphic asymmetries and frontoâ€striatal dysfunction in young adults reporting nonâ€clinical psychosis. Acta Psychiatrica Scandinavica, 2012, 126, 290-297.	2.2	24
90	Factor Analysis of Negative Symptom Items in the Structured Interview for Prodromal Syndromes. Schizophrenia Bulletin, 2019, 45, 1042-1050.	2.3	24

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91	Gesture deficits and apraxia in schizophrenia. Cortex, 2020, 133, 65-75.	1.1	24
92	Chronic stress, structural exposures and neurobiological mechanisms: A stimulation, discrepancy and deprivation model of psychosis. International Review of Neurobiology, 2020, 152, 41-69.	0.9	24
93	Reactivity to uncertain threat as a familial vulnerability factor for alcohol use disorder. Psychological Medicine, 2016, 46, 3349-3358.	2.7	23
94	Perceived social stress and symptom severity among help-seeking adolescents with versus without clinical high-risk for psychosis. Schizophrenia Research, 2018, 192, 364-370.	1.1	23
95	Deconstructing Negative Symptoms in Individuals at Clinical High-Risk for Psychosis: Evidence for Volitional and Diminished Emotionality Subgroups That Predict Clinical Presentation and Functional Outcome. Schizophrenia Bulletin, 2021, 47, 54-63.	2.3	23
96	Alterations in facial expressivity in youth at clinical high-risk for psychosis.. Journal of Abnormal Psychology, 2019, 128, 341-351.	2.0	23
97	A Supervised Exercise Intervention for Youth at Risk for Psychosis. Journal of Clinical Psychiatry, 2017, 78, e1167-e1173.	1.1	23
98	Beat gestures and postural control in youth at ultrahigh risk for psychosis. Schizophrenia Research, 2017, 185, 197-199.	1.1	22
99	Investigating the association between emotion regulation and distress in adults with psychotic-like experiences. Psychiatry Research, 2017, 256, 66-70.	1.7	21
100	Self-reported sleep disturbances associated with procedural learning impairment in adolescents at ultra-high risk for psychosis. Schizophrenia Research, 2017, 190, 160-163.	1.1	21
101	What prevents youth at clinical high risk for psychosis from engaging in physical activity? An examination of the barriers to physical activity. Schizophrenia Research, 2018, 201, 400-405.	1.1	21
102	The Critical Need for Help-Seeking Controls in Clinical High-Risk Research. Clinical Psychological Science, 2019, 7, 1171-1189.	2.4	21
103	Narrative identity in the psychosis spectrum: A systematic review and developmental model. Clinical Psychology Review, 2021, 88, 102067.	6.0	21
104	Transcranial Direct Current Stimulation, Symptomatology, and Cognition in Psychosis: A Qualitative Review. Frontiers in Behavioral Neuroscience, 2018, 12, 94.	1.0	20
105	The impact of inflammation on neurocognition and risk for psychosis: a critical review. European Archives of Psychiatry and Clinical Neuroscience, 2020, 270, 793-802.	1.8	20
106	Construct validity for computational linguistic metrics in individuals at clinical risk for psychosis: Associations with clinical ratings. Schizophrenia Research, 2022, 245, 90-96.	1.1	20
107	Hypothalamicâ€“pituitaryâ€“adrenal axis dysfunction in non-clinical psychosis. Psychiatry Research, 2013, 206, 315-317.	1.7	19
108	Motor behavior reflects reduced hemispheric asymmetry in the psychosis risk period. Schizophrenia Research, 2016, 170, 137-142.	1.1	19

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109	The relationship between cannabis use and cortisol levels in youth at ultra high-risk for psychosis. Psychoneuroendocrinology, 2017, 83, 58-64.	1.3	19
110	Bullying victimization and perpetration in a community sample of youth with psychotic like experiences. Schizophrenia Research, 2018, 195, 534-536.	1.1	19
111	Advances in the neurobiology of stress and psychosis. Schizophrenia Research, 2019, 213, 1-5.	1.1	19
112	Modeling perception and behavior in individuals at clinical high risk for psychosis: Support for the predictive processing framework. Schizophrenia Research, 2020, 226, 167-175.	1.1	19
113	The cerebellum and learning of non-motor associations in individuals at clinical-high risk for psychosis. NeuroImage: Clinical, 2018, 19, 137-146.	1.4	18
114	Measuring facets of reward sensitivity, inhibition, and impulse control in individuals with problematic Internet use. Psychiatry Research, 2019, 275, 351-358.	1.7	18
115	As Motor System Pathophysiology Returns to the Forefront of Psychosis Research, Clinical Implications Should Hold Center Stage. Schizophrenia Bulletin, 2019, 45, 495-497.	2.3	18
116	Racial and Ethnic Biases in Computational Approaches to Psychopathology. Schizophrenia Bulletin, 2022, 48, 285-288.	2.3	18
117	Emotion recognition and social/role dysfunction in non-clinical psychosis. Schizophrenia Research, 2013, 143, 70-73.	1.1	17
118	Cross-Cutting Advancements Usher in a New Era for Motor Research in Psychosis. Schizophrenia Bulletin, 2016, 42, 1322-1325.	2.3	17
119	Motion energy analysis reveals altered body movement in youth at risk for psychosis. Schizophrenia Research, 2018, 200, 35-41.	1.1	17
120	Bullying victimization in typically developing and clinical high risk (CHR) adolescents: A multimodal imaging study. Schizophrenia Research, 2019, 213, 40-47.	1.1	16
121	Timing of menarche and abnormal hippocampal connectivity in youth at clinical-high risk for psychosis. Psychoneuroendocrinology, 2020, 117, 104672.	1.3	16
122	Neuropsychological Performance Among Individuals at Clinical High-Risk for Psychosis vs Putatively Low-Risk Peers With Other Psychopathology: A Systematic Review and Meta-Analysis. Schizophrenia Bulletin, 2022, 48, 999-1010.	2.3	16
123	BDNF Val66Met and spontaneous dyskinesias in non-clinical psychosis. Schizophrenia Research, 2012, 140, 65-70.	1.1	15
124	Differential relations of locus of control to perceived social stress among help-seeking adolescents at low vs. high clinical risk of psychosis. Schizophrenia Research, 2017, 184, 39-44.	1.1	15
125	Assessing validity of retrospective recall of physical activity in individuals with psychosis-like experiences. Psychiatry Research, 2019, 273, 211-217.	1.7	15
126	Individual Differences and Psychosis-Risk Screening: Practical Suggestions to Improve the Scope and Quality of Early Identification. Frontiers in Psychiatry, 2019, 10, 6.	1.3	15

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127	Detecting motor slowing in clinical high risk for psychosis in a computerized finger tapping model. European Archives of Psychiatry and Clinical Neuroscience, 2020, 270, 393-397.	1.8	15
128	Three types of psychotic-like experiences in youth at clinical high risk for psychosis. European Archives of Psychiatry and Clinical Neuroscience, 2021, 271, 733-744.	1.8	15
129	Alterations in facial expressions of emotion: Determining the promise of ultrathin slicing approaches and comparing human and automated coding methods in psychosis risk.. Emotion, 2022, 22, 714-724.	1.5	15
130	Sensorimotor and Activity Psychosis-Risk (SMAP-R) Scale: An Exploration of Scale Structure With Replication and Validation. Schizophrenia Bulletin, 2021, 47, 332-343.	2.3	14
131	Balancing the Public Health Costs of Psychosis vs Mass Incarceration With the Legalization of Cannabis. JAMA Psychiatry, 2021, 78, 246.	6.0	14
132	Advances in clinical staging, early intervention, and the prevention of psychosis. F1000Research, 2019, 8, 2027.	0.8	14
133	Translating RDoC to real-world impact in developmental psychopathology: A neurodevelopmental framework for application of mental health risk calculators. Development and Psychopathology, 2021, 33, 1665-1684.	1.4	14
134	Prenatal exposure to viral infection and conversion among adolescents at high-risk for psychotic disorders. Schizophrenia Research, 2008, 99, 375-376.	1.1	13
135	Coping with family stress in individuals at clinical high-risk for psychosis. Schizophrenia Research, 2020, 216, 222-228.	1.1	13
136	Enhancing Psychosis Risk Prediction Through Computational Cognitive Neuroscience. Schizophrenia Bulletin, 2020, 46, 1346-1352.	2.3	13
137	Abnormal Gesture Perception and Clinical High-Risk for Psychosis. Schizophrenia Bulletin, 2021, 47, 938-947.	2.3	13
138	Motor Abnormalities, Depression Risk, and Clinical Course in Adolescence. Biological Psychiatry Global Open Science, 2022, 2, 61-69.	1.0	13
139	Movement Abnormalities: A Putative Biomarker of Risk for Psychosis. , 2009, , 239-258.		13
140	Community Psychosis Risk Screening: An Instrument Development Investigation. Journal of Psychiatry and Brain Science, 2020, 5, .	0.3	13
141	Low physical activity is associated with two hypokinetic motor abnormalities in psychosis. Journal of Psychiatric Research, 2022, 146, 258-263.	1.5	13
142	Childhood dyspraxia predicts adult-onset nonaffectiveâ€“psychosis-spectrum disorder. Development and Psychopathology, 2015, 27, 1323-1330.	1.4	12
143	Clinical correlates of aberrant conversational turn-taking in youth at clinical high-risk for psychosis. Schizophrenia Research, 2019, 204, 419-420.	1.1	12
144	Global and Specific Cortical Volume Asymmetries in Individuals With Psychosis Risk Syndrome and Schizophrenia: A Mixed Cross-sectional and Longitudinal Perspective. Schizophrenia Bulletin, 2020, 46, 713-721.	2.3	12

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145	Neighborhood crime, socioeconomic status, and suspiciousness in adolescents and young adults at Clinical High Risk (CHR) for psychosis. Schizophrenia Research, 2020, 215, 74-80.	1.1	12
146	Transdiagnostic Dimensions of Psychiatric Comorbidity in Individuals at Clinical High Risk for Psychosis: A Preliminary Study Informed by HiTOP. Frontiers in Psychiatry, 2020, 11, 614710.	1.3	12
147	Hand gesture performance is impaired in major depressive disorder: A matter of working memory performance?. Journal of Affective Disorders, 2021, 292, 81-88.	2.0	12
148	An Examination of Psychomotor Disturbance in Current and Remitted MDD: An RDoC Study. Journal of Psychiatry and Brain Science, 2020, 5, .	0.3	12
149	Exercise Intervention in Individuals at Clinical High Risk for Psychosis: Benefits to Fitness, Symptoms, Hippocampal Volumes, and Functional Connectivity. Schizophrenia Bulletin, 2022, 48, 1394-1405.	2.3	12
150	Obstetric complications and risk for conversion to psychosis among individuals at high clinical risk. Microbial Biotechnology, 2009, 3, 226-230.	0.9	11
151	Orbitofrontal cortex volume and intrinsic religiosity in non-clinical psychosis. Psychiatry Research - Neuroimaging, 2014, 222, 124-130.	0.9	11
152	Normative adolescent experiences may confound assessment of positive symptoms in youth at ultra-high risk for psychosis. Schizophrenia Research, 2015, 166, 358-359.	1.1	11
153	Disruptions in neural connectivity associated with reduced susceptibility to a depth inversion illusion in youth at ultra high risk for psychosis. NeuroImage: Clinical, 2016, 12, 681-690.	1.4	11
154	Fluctuating dermatoglyphic asymmetries in youth at ultrahigh-risk for psychotic disorders. Schizophrenia Research, 2016, 170, 301-303.	1.1	11
155	Differentiating implicit and explicit theory of mind and associated neural networks in youth at Clinical High Risk (CHR) for psychosis. Schizophrenia Research, 2019, 208, 173-181.	1.1	11
156	Timing dysfunction and cerebellar resting state functional connectivity abnormalities in youth at clinical high-risk for psychosis. Psychological Medicine, 2021, 51, 1289-1298.	2.7	11
157	Contingent Negative Variation Blunting and Psychomotor Dysfunction in Schizophrenia: A Systematic Review. Schizophrenia Bulletin, 2020, 46, 1144-1154.	2.3	11
158	Depression and Psychosis Risk Shared Vulnerability for Motor Signs Across Development, Symptom Dimensions, and Familial Risk. Schizophrenia Bulletin, 2022, 48, 752-762.	2.3	11
159	Cerebellar Contributions to Social Cognition in ASD: A Predictive Processing Framework. Frontiers in Integrative Neuroscience, 2022, 16, 810425.	1.0	11
160	Negative symptom measurement in individuals at-risk for psychosis. Psychiatry Research, 2013, 205, 181-182.	1.7	10
161	Increased Internet use and poorer ability to manage emotions in youth at high-risk for psychosis. Schizophrenia Research: Cognition, 2015, 2, 220-226.	0.7	10
162	The cannabis conundrum: Thinking outside the THC box. Journal of Clinical Pharmacology, 2015, 55, 839-841.	1.0	10

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163	Sex differences in morning cortisol in youth at ultra-high-risk for psychosis. Psychoneuroendocrinology, 2016, 72, 87-93.	1.3	10
164	Validity of a two-item screen for early psychosis. Psychiatry Research, 2018, 270, 861-868.	1.7	10
165	Assessing Developmental Environmental Risk Factor Exposure in Clinical High Risk for Psychosis Individuals: Preliminary Results Using the Individual and Structural Exposure to Stress in Psychosis-Risk States Scale. Journal of Clinical Medicine, 2019, 8, 994.	1.0	10
166	Early childhood social communication deficits in youth at clinical high-risk for psychosis: Associations with functioning and risk. Development and Psychopathology, 2020, 32, 559-572.	1.4	10
167	Embracing heterogeneity creates new opportunities for understanding and treating those at clinical-high risk for psychosis. Schizophrenia Research, 2021, 227, 1-3.	1.1	10
168	Motor Behavior is Relevant for Understanding Mechanism, Bolstering Prediction, And Improving Treatment: A Transdiagnostic Perspective. Schizophrenia Bulletin, 2022, 48, 741-748.	2.3	10
169	Nicotine usage is associated with elevated processing speed, spatial working memory, and visual learning performance in youth at ultrahigh-risk for psychosis. Psychiatry Research, 2014, 220, 687-690.	1.7	9
170	The latent structure of depressive symptoms across clinical high risk and chronic phases of psychotic illness. Translational Psychiatry, 2019, 9, 229.	2.4	9
171	Efficacy and mechanisms of non-invasive brain stimulation to enhance exposure therapy: A review. Clinical Psychology Review, 2019, 70, 64-78.	6.0	9
172	Cortical Morphometry in the Psychosis Risk Period: A Comprehensive Perspective of Surface Features. Biological Psychiatry: Cognitive Neuroscience and Neuroimaging, 2019, 4, 434-443.	1.1	9
173	Longitudinal Assessment and Functional Neuroimaging of Movement Variability Reveal Novel Insights Into Motor Dysfunction in Clinical High Risk for Psychosis. Schizophrenia Bulletin, 2020, 46, 1567-1576.	2.3	9
174	Acute Physiological and Psychological Stress Response in Youth at Clinical High-Risk for Psychosis. Frontiers in Psychiatry, 2021, 12, 641762.	1.3	9
175	Increased face detection responses on the mooney faces test in people at clinical high risk for psychosis. NPJ Schizophrenia, 2021, 7, 26.	2.0	9
176	Heterogeneity of emotional experience in schizophrenia: Trait affect profiles predict clinical presentation and functional outcome.. Journal of Abnormal Psychology, 2020, 129, 760-767.	2.0	9
177	Actigraphically measured psychomotor slowing in depression: systematic review and meta-analysis. Psychological Medicine, 2022, 52, 1208-1221.	2.7	9
178	Self-reported cannabis use is inconsistent with the results from drug-screening in youth at ultra high-risk for psychosis in Colorado. Schizophrenia Research, 2014, 157, 317-318.	1.1	8
179	Instrument-based assessment of motor function yields no evidence of dyskinesia in adult first-degree biological relatives of individuals with schizophrenia and schizoaffective disorder. Psychiatry Research, 2019, 272, 135-140.	1.7	8
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