

# Xiaoxian Li

## List of Publications by Year in descending order

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75  
papers

4,876  
citations

304743

22  
h-index

118850

62  
g-index

75  
all docs

75  
docs citations

75  
times ranked

7440  
citing authors

#	ARTICLE	IF	CITATIONS
1	Utility of Oncotype DX score in clinical management for T1 estrogen receptor positive, HER2 negative, and lymph node negative breast cancer. <i>Breast Cancer Research and Treatment</i> , 2022, 192, 509-516.	2.5	4
2	Abstract P4-07-31: Racial disparities in breast cancer chiefly reside in the lesser-known quadruple-negative breast cancer. <i>Cancer Research</i> , 2022, 82, P4-07-31-P4-07-31.	0.9	0
3	Molecular Characterization and Prospective Evaluation of Pathologic Response and Outcomes with Neoadjuvant Therapy in Metaplastic Triple-Negative Breast Cancer. <i>Clinical Cancer Research</i> , 2022, 28, 2878-2889.	7.0	10
4	Development of Training Materials for Pathologists to Provide Machine Learning Validation Data of Tumor-Infiltrating Lymphocytes in Breast Cancer. <i>Cancers</i> , 2022, 14, 2467.	3.7	4
5	Dedifferentiation-mediated stem cell niche maintenance in early-stage ductal carcinoma in situ progression: insights from a multiscale modeling study. <i>Cell Death and Disease</i> , 2022, 13, .	6.3	5
6	The impact of obesity on triple negative breast cancer (TNBC) outcomes at a diverse academic cancer center.. <i>Journal of Clinical Oncology</i> , 2022, 40, e12529-e12529.	1.6	0
7	Impact of race on treatment outcomes in triple-negative breast cancer at an academic medical center.. <i>Journal of Clinical Oncology</i> , 2022, 40, e12616-e12616.	1.6	0
8	Magee Equations <sup>â„¢</sup> and response to neoadjuvant chemotherapy in ER+/HER2-negative breast cancer: a multi-institutional study. <i>Modern Pathology</i> , 2021, 34, 77-84.	5.5	14
9	Management of high-risk breast lesions diagnosed on core biopsies and experiences from prospective high-risk breast lesion conferences at an academic institution. <i>Breast Cancer Research and Treatment</i> , 2021, 185, 573-581.	2.5	15
10	Updates on Lobular Neoplasms, Papillary, Adenomyoepithelial, and Fibroepithelial Lesions of the Breast. <i>Archives of Pathology and Laboratory Medicine</i> , 2021, , .	2.5	2
11	Pan-cancer analysis of pathway-based gene expression pattern at the individual level reveals biomarkers of clinical prognosis. <i>Cell Reports Methods</i> , 2021, 1, 100050.	2.9	10
12	Expression of tdTomato and luciferase in a murine lung cancer alters the growth and immune microenvironment of the tumor. <i>PLoS ONE</i> , 2021, 16, e0254125.	2.5	12
13	Molecular Classification of Triple Negative Breast Cancer and the Emergence of Targeted Therapies. <i>Clinical Breast Cancer</i> , 2021, 21, 509-520.	2.4	13
14	Prognostic value of androgen receptor expression and molecular alterations in metastatic triple-negative or low hormone receptor breast carcinomas. <i>Human Pathology</i> , 2021, 116, 73-81.	2.0	1
15	The Incidence of Occult Malignant and High-Risk Pathologic Findings in Breast Reduction Specimens. <i>Plastic and Reconstructive Surgery</i> , 2021, 148, 534e-539e.	1.4	2
16	Clinicopathologic Factors Associated With Response to Neoadjuvant Anti-HER2 <sup>â„¢</sup> Directed Chemotherapy in HER2-Positive Breast Cancer. <i>Clinical Breast Cancer</i> , 2020, 20, 19-24.	2.4	24
17	Papilloma diagnosed on core biopsies has a low upgrade rate. <i>Clinical Imaging</i> , 2020, 60, 67-74.	1.5	16
18	The clinical significance of metastatic breast carcinoma to intramammary lymph node. <i>Breast Journal</i> , 2020, 26, 197-205.	1.0	1

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19	Patients with benign papilloma diagnosed on core biopsies and concordant pathology-radiology findings can be followed: experiences from multi-specialty high-risk breast lesion conferences in an academic center. <i>Breast Cancer Research and Treatment</i> , 2020, 183, 577-584.	2.5	7
20	Evaluation of PD-L1, tumor-infiltrating lymphocytes, and CD8+ and FOXP3+ immune cells in HER2-positive breast cancer treated with neoadjuvant therapies. <i>Breast Cancer Research and Treatment</i> , 2020, 183, 599-606.	2.5	11
21	HER2 immunohistochemistry staining positivity is strongly predictive of tumor response to neoadjuvant chemotherapy in HER2 positive breast cancer. <i>Pathology Research and Practice</i> , 2020, 216, 153155.	2.3	9
22	A comprehensive overview of metaplastic breast cancer: clinical features and molecular aberrations. <i>Breast Cancer Research</i> , 2020, 22, 121.	5.0	89
23	Combined HER3-EGFR score in triple-negative breast cancer provides prognostic and predictive significance superior to individual biomarkers. <i>Scientific Reports</i> , 2020, 10, 3009.	3.3	34
24	Quantitative digital imaging analysis of HER2 immunohistochemistry predicts the response to anti-HER2 neoadjuvant chemotherapy in HER2-positive breast carcinoma. <i>Breast Cancer Research and Treatment</i> , 2020, 180, 321-329.	2.5	18
25	Different Breast Cancer Subtypes Show Different Metastatic Patterns: A Study from A Large Public Database. <i>Asian Pacific Journal of Cancer Prevention</i> , 2020, 21, 3587-3593.	1.2	25
26	Invasive Ductal Carcinoma (NOS) of the Breast. , 2019, , 25-37.		0
27	A randomized, controlled phase II trial of neoadjuvant ado-trastuzumab emtansine, lapatinib, and nab-paclitaxel versus trastuzumab, pertuzumab, and paclitaxel in HER2-positive breast cancer (TEAL). <i>Journal of Clinical Oncology</i> , 2019, 37, 1784-1791.	10.7	314
28	Use of Everolimus and Trastuzumab in Addition to Endocrine Therapy in Hormone-Refractory Metastatic Breast Cancer. <i>Clinical Breast Cancer</i> , 2019, 19, 188-196.	2.4	2
29	The FDA-Approved Breast Cancer HER2 Evaluation Kit (HercepTest; Dako) May Miss Some HER2-Positive Breast Cancers. <i>American Journal of Clinical Pathology</i> , 2019, 151, 504-510.	0.7	5
30	ER+/HER2+ Breast Cancer Has Different Metastatic Patterns and Better Survival Than ER+/HER2- Breast Cancer. <i>Clinical Breast Cancer</i> , 2019, 19, 236-245.	2.4	83
31	Evaluation of Prognosis in Hormone Receptor-Positive/HER2-Negative and Lymph Node-Negative Breast Cancer With Low Oncotype DX Recurrence Score. <i>Clinical Breast Cancer</i> , 2018, 18, 347-352.	2.4	5
32	Comparing breast biomarker status between routine immunohistochemistry and FISH studies and Oncotype DX testing, a study of 610 cases. <i>Breast Journal</i> , 2018, 24, 889-893.	1.0	10
33	CDK9 Expression Shows Role as a Potential Prognostic Biomarker in Breast Cancer Patients Who Fail to Achieve Pathologic Complete Response after Neoadjuvant Chemotherapy. <i>International Journal of Breast Cancer</i> , 2018, 2018, 1-9.	1.2	22
34	Magee Equation Recurrence Score Is Associated With Distal Metastatic Risk in Male Breast Carcinomas. <i>American Journal of Clinical Pathology</i> , 2018, 150, 491-498.	0.7	3
35	Validation of the newly proposed American Joint Committee on Cancer (AJCC) breast cancer prognostic staging group and proposing a new staging system using the National Cancer Database. <i>Breast Cancer Research and Treatment</i> , 2018, 171, 303-313.	2.5	24
36	Care 001: Multicenter randomized open label phase II trial of neoadjuvant trastuzumabemtansine (T-DM1) in combination with lapatinib and nab-paclitaxel compared with paclitaxel, trastuzumab and pertuzumab in HER 2 neu over-expressed breast cancer patients (TEAL study).. <i>Journal of Clinical Oncology</i> , 2018, 36, 581-581.	1.6	1

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37	Phase ib study of trastuzumab emtansine (TDM1) in combination with lapatinib and nab-paclitaxel in metastatic HER2-neu overexpressed breast cancer patients: Stela results.. Journal of Clinical Oncology, 2018, 36, 1035-1035.	1.6	5
38	Multi-institutional study of nuclear KIFC1 as a biomarker of poor prognosis in African American women with triple-negative breast cancer. Scientific Reports, 2017, 7, 42289.	3.3	30
39	Tumor-infiltrating lymphocytes are significantly associated with better overall survival and disease-free survival in triple-negative but not estrogen receptorâ€“positive breast cancers. Human Pathology, 2017, 64, 7-12.	2.0	64
40	Hormone Receptor-Positive Breast Cancer HasÂaÂWorse Prognosis in Male Than in FemaleÂPatients. Clinical Breast Cancer, 2017, 17, 356-366.	2.4	29
41	New Developments in Breast Cancer and Their Impact on Daily Practice in Pathology. Archives of Pathology and Laboratory Medicine, 2017, 141, 490-498.	2.5	40
42	Role of RPL39 in Metaplastic Breast Cancer. Journal of the National Cancer Institute, 2017, 109, djw292.	6.3	55
43	High tumor budding count is associated with adverse clinicopathologic features and poor prognosis in breast carcinoma. Human Pathology, 2017, 66, 222-229.	2.0	30
44	Triple-negative breast cancer has worse overall survival and cause-specific survival than non-triple-negative breast cancer. Breast Cancer Research and Treatment, 2017, 161, 279-287.	2.5	335
45	Comparison of Oncotype DX With Modified Magee Equation Recurrence Scores in Low-Grade Invasive Carcinoma of Breast. American Journal of Clinical Pathology, 2017, 148, 167-172.	0.7	20
46	Targeted drugs and diagnostic assays Companions in the race to combat ethnic disparity. Frontiers in Bioscience - Landmark, 2017, 22, 193-211.	3.0	5
47	African American patients with breast cancer have worse prognosis than white patients in certain subtypes and stages. Breast Cancer Research and Treatment, 2017, 166, 743-755.	2.5	14
48	Whole exome sequencing of metaplastic breast cancer (MpBC): Effect of mutation status on survival.. Journal of Clinical Oncology, 2017, 35, 1090-1090.	1.6	3
49	Distinctions in Breast Tumor Recurrence Patterns Post-Therapy among Racially Distinct Populations. PLoS ONE, 2017, 12, e0170095.	2.5	10
50	HER3-EGFR score to predict clinical outcomes in triple-negative breast cancer.. Journal of Clinical Oncology, 2017, 35, 11612-11612.	1.6	0
51	An African-specific polymorphism in the <i>TP53</i> gene impairs p53 tumor suppressor function in a mouse model. Genes and Development, 2016, 30, 918-930.	5.9	277
52	<i>Anti</i> -3- <sup>18</sup> F-FACBC ( <sup>18</sup> F-Fluciclovine) PET/CT of Breast Cancer: An Exploratory Study. Journal of Nuclear Medicine, 2016, 57, 1357-1363.	5.0	53
53	Stromal PD-L1 Expression Is Associated With Better Disease-Free Survival in Triple-Negative Breast Cancer. American Journal of Clinical Pathology, 2016, 146, 496-502.	0.7	78
54	Estrogen Receptor and Cytokeratin 5 Are Reliable Markers to Separate Usual Ductal Hyperplasia From Atypical Ductal Hyperplasia and Low-Grade Ductal Carcinoma In Situ. Archives of Pathology and Laboratory Medicine, 2016, 140, 686-689.	2.5	24

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55	Epithelioid sarcoma of the vulva and its clinical implication: A case report and review of the literature. <i>Gynecologic Oncology Reports</i> , 2016, 15, 31-33.	0.6	18
56	Biomarkers Predicting Pathologic Complete Response to Neoadjuvant Chemotherapy in Breast Cancer. <i>American Journal of Clinical Pathology</i> , 2016, 145, 871-878.	0.7	67
57	GATA-3 and FOXA1 expression is useful to differentiate breast carcinoma from other carcinomas. <i>Human Pathology</i> , 2016, 47, 26-31.	2.0	75
58	Multi-institutional study of triple negative breast cancer stratification by a metric that quantifies cell cycling kinetics.. <i>Journal of Clinical Oncology</i> , 2016, 34, 1091-1091.	1.6	0
59	A combined HER3-EGFR score in triple-negative breast cancer: racial differences.. <i>Journal of Clinical Oncology</i> , 2016, 34, e12560-e12560.	1.6	0
60	A multi-institutional study of racial differences in androgen receptor status among triple-negative breast cancers.. <i>Journal of Clinical Oncology</i> , 2016, 34, 1089-1089.	1.6	1
61	High Pathologic Complete Response in Her2-Positive, Early-Stage Breast Cancer to a Novel Nonanthracycline Neoadjuvant Chemotherapy. <i>Clinical Breast Cancer</i> , 2015, 15, 31-36.	2.4	15
62	Rampant centrosome amplification underlies more aggressive disease course of triple negative breast cancers. <i>Oncotarget</i> , 2015, 6, 10487-10497.	1.8	58
63	A novel metric to quantify cell-cycling kinetics and refine the Nottingham Grading System to improve breast cancer patient stratification.. <i>Journal of Clinical Oncology</i> , 2015, 33, e22149-e22149.	1.6	0
64	A novel prognostic index to improve patient stratification compared to the Nottingham grading system.. <i>Journal of Clinical Oncology</i> , 2015, 33, e22170-e22170.	1.6	0
65	Nuclear HSET as a negative prognostic indicator and racial disparity biomarker in breast cancer patients.. <i>Journal of Clinical Oncology</i> , 2015, 33, 1078-1078.	1.6	6
66	Consequences of passages: Mitotic indices and centrosome amplification levels variance between patients' tumors and cancer cells cultured in vitro.. <i>Journal of Clinical Oncology</i> , 2015, 33, e13518-e13518.	1.6	0
67	Rampant centrosome amplification and aggressive disease course of triple-negative breast cancers.. <i>Journal of Clinical Oncology</i> , 2015, 33, 1075-1075.	1.6	1
68	Sorting the mixed bag: Tumor grade reassignment of Nottingham Grade II patients using pattern classification techniques.. <i>Journal of Clinical Oncology</i> , 2015, 33, e22165-e22165.	1.6	0
69	Targeting RPL39 and MLF2 reduces tumor initiation and metastasis in breast cancer by inhibiting nitric oxide synthase signaling. <i>Proceedings of the National Academy of Sciences of the United States of America</i> , 2014, 111, 8838-8843.	7.1	99
70	Phase 2 trial of trastuzumab and/or everolimus in hormone-resistant HER2-negative metastatic breast cancer.. <i>Journal of Clinical Oncology</i> , 2014, 32, 576-576.	1.6	0
71	Diagnostic utility of E-cadherin and P120 catenin cocktail immunostain in distinguishing DCIS from LCIS. <i>International Journal of Clinical and Experimental Pathology</i> , 2014, 7, 2551-7.	0.5	9
72	The effect of prolonged cold ischemia time on estrogen receptor immunohistochemistry in breast cancer. <i>Modern Pathology</i> , 2013, 26, 71-78.	5.5	44

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73	Residual breast cancers after conventional therapy display mesenchymal as well as tumor-initiating features. Proceedings of the National Academy of Sciences of the United States of America, 2009, 106, 13820-13825.	7.1	1,257
74	Intrinsic Resistance of Tumorigenic Breast Cancer Cells to Chemotherapy. Journal of the National Cancer Institute, 2008, 100, 672-679.	6.3	1,632
75	Deep Learning-Based Pathology Image Analysis Enhances Magee Feature Correlation With Oncotype DX Breast Recurrence Score. Frontiers in Medicine, 0, 9, .	2.6	8