## Thomas H Mcglashan

List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	Symptom assessment in schizophrenic prodromal states. Psychiatric Quarterly, 1999, 70, 273-287.	1.1	537
2	Progressive Reduction in Cortical Thickness as Psychosis Develops: A Multisite Longitudinal Neuroimaging Study of Youth at Elevated Clinical Risk. Biological Psychiatry, 2015, 77, 147-157.	0.7	516
3	Randomized, Double-Blind Trial of Olanzapine Versus Placebo in Patients Prodromally Symptomatic for Psychosis. American Journal of Psychiatry, 2006, 163, 790-799.	4.0	500
4	An Individualized Risk Calculator for Research in Prodromal Psychosis. American Journal of Psychiatry, 2016, 173, 980-988.	4.0	458
5	Association of Thalamic Dysconnectivity and Conversion to Psychosis in Youth and Young Adults at Elevated Clinical Risk. JAMA Psychiatry, 2015, 72, 882.	6.0	284
6	North American Prodrome Longitudinal Study: A Collaborative Multisite Approach to Prodromal Schizophrenia Research. Schizophrenia Bulletin, 2007, 33, 665-672.	2.3	258
7	North American Prodrome Longitudinal Study (NAPLS 2): Overview and recruitment. Schizophrenia Research, 2012, 142, 77-82.	1.1	235
8	The Varied Outcomes of Schizophrenia. Canadian Journal of Psychiatry, 1997, 42, 34-43.	0.9	220
9	At risk or not at risk? A metaâ€analysis of the prognostic accuracy of psychometric interviews for psychosis prediction. World Psychiatry, 2015, 14, 322-332.	4.8	209
10	Association of Neurocognition With Transition to Psychosis. JAMA Psychiatry, 2016, 73, 1239.	6.0	205
11	Automatic Auditory Processing Deficits in Schizophrenia and Clinical High-Risk Patients: Forecasting Psychosis Risk with Mismatch Negativity. Biological Psychiatry, 2014, 75, 459-469.	0.7	204
12	Towards a Psychosis Risk Blood Diagnostic for Persons Experiencing High-Risk Symptoms: Preliminary Results From the NAPLS Project. Schizophrenia Bulletin, 2015, 41, 419-428.	2.3	195
13	The Dark Side of the Moon: Meta-analytical Impact of Recruitment Strategies on Risk Enrichment in the Clinical High Risk State for Psychosis. Schizophrenia Bulletin, 2016, 42, 732-743.	2.3	183
14	Cerebello-thalamo-cortical hyperconnectivity as a state-independent functional neural signature for psychosis prediction and characterization. Nature Communications, 2018, 9, 3836.	5.8	156
15	Multisite reliability of MR-based functional connectivity. NeuroImage, 2017, 146, 959-970.	2.1	140
16	The Relationship of Neurocognition and Negative Symptoms to Social and Role Functioning Over Time in Individuals at Clinical High Risk in the First Phase of the North American Prodrome Longitudinal Study. Schizophrenia Bulletin, 2014, 40, 1452-1461.	2.3	137
17	Co-occurrence of mood and personality disorders: A report from the collaborative longitudinal personality disorders study (CLPS). , 1999, 10, 175-182.		132
18	Use of Machine Learning to Determine Deviance in Neuroanatomical Maturity Associated With Future Psychosis in Youths at Clinically High Risk. JAMA Psychiatry, 2018, 75, 960.	6.0	114

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19	Recruitment and Treatment Practices for Help-Seeking "Prodromal" Patients. Schizophrenia Bulletin, 2007, 33, 715-726.	2.3	105
20	Treatment Outcome of Personality Disorders. Canadian Journal of Psychiatry, 1998, 43, 237-250.	0.9	104
21	Early traumatic experiences in those at clinical high risk for psychosis. Microbial Biotechnology, 2013, 7, 300-305.	0.9	95
22	Comorbid diagnoses for youth at clinical high risk of psychosis. Schizophrenia Research, 2017, 190, 90-95.	1.1	95
23	Personality disorder risk factors for suicide attempts over 10 years of follow-up Personality Disorders: Theory, Research, and Treatment, 2015, 6, 161-167.	1.0	77
24	Neurocognition and Duration of Psychosis: A 10-year Follow-up of First-Episode Patients. Schizophrenia Bulletin, 2016, 42, sbv083.	2.3	77
25	Reliability of neuroanatomical measurements in a multisite longitudinal study of youth at risk for psychosis. Human Brain Mapping, 2014, 35, 2424-2434.	1.9	76
26	Reducing the duration of untreated psychosis and its impact in the U.S.: the STEP-ED study. BMC Psychiatry, 2014, 14, 335.	1.1	74
27	Clinical and functional characteristics of youth at clinical high-risk for psychosis who do not transition to psychosis. Psychological Medicine, 2019, 49, 1670-1677.	2.7	74
28	Specificity of Incident Diagnostic Outcomes in Patients at Clinical High Risk for Psychosis. Schizophrenia Bulletin, 2015, 41, 1066-1075.	2.3	71
29	Defining, operationalizing and measuring the duration of untreated psychosis: advances, limitations and future directions. Microbial Biotechnology, 2007, 1, 236-250.	0.9	66
30	Stress exposure and sensitivity in the clinical high-risk syndrome: Initial findings from the North American Prodrome Longitudinal Study (NAPLS). Schizophrenia Research, 2014, 160, 104-109.	1.1	66
31	Reliability of an fMRI paradigm for emotional processing in a multisite longitudinal study. Human Brain Mapping, 2015, 36, 2558-2579.	1.9	63
32	Early traumatic experiences, perceived discrimination and conversion to psychosis in those at clinical high risk for psychosis. Social Psychiatry and Psychiatric Epidemiology, 2016, 51, 497-503.	1.6	60
33	Association Between P300 Responses to Auditory Oddball Stimuli and Clinical Outcomes in the Psychosis Risk Syndrome. JAMA Psychiatry, 2019, 76, 1187.	6.0	59
34	Auditory hallucinations, network connectivity, and schizophrenia. Behavioral and Brain Sciences, 2004, 27, 860-861.	0.4	57
35	Subjective quality of life in first-episode psychosis. A ten year follow-up study. Schizophrenia Research, 2016, 172, 23-28.	1.1	56
36	Anxiety in youth at clinical high risk for psychosis. Microbial Biotechnology, 2017, 11, 480-487.	0.9	56

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37	Social cognition over time in individuals at clinical high risk for psychosis: Findings from the NAPLS-2 cohort. Schizophrenia Research, 2016, 171, 176-181.	1.1	55
38	The Effect of Substance Use on 10-Year Outcome in First-Episode Psychosis. Schizophrenia Bulletin, 2017, 43, 843-851.	2.3	55
39	The Global Functioning: Social and Role Scales—Further Validation in a Large Sample of Adolescents and Young Adults at Clinical High Risk for Psychosis. Schizophrenia Bulletin, 2019, 45, 763-772.	2.3	55
40	Toward Leveraging Human Connectomic Data in Large Consortia: Generalizability of fMRI-Based Brain Graphs Across Sites, Sessions, and Paradigms. Cerebral Cortex, 2019, 29, 1263-1279.	1.6	55
41	Stability and course of personality disorders: the need to consider comorbidities and continuities between axis I psychiatric disorders and axis II personality disorders. Psychiatric Quarterly, 2000, 71, 291-307.	1.1	54
42	Lack of Diagnostic Pluripotentiality in Patients at Clinical High Risk for Psychosis: Specificity of Comorbidity Persistence and Search for Pluripotential Subgroups. Schizophrenia Bulletin, 2018, 44, 254-263.	2.3	51
43	Auditory and Visual Oddball Stimulus Processing Deficits in Schizophrenia and the Psychosis Risk Syndrome: Forecasting Psychosis Risk With P300. Schizophrenia Bulletin, 2019, 45, 1068-1080.	2.3	49
44	Reliability of functional magnetic resonance imaging activation during working memory in a multi-site study: Analysis from the North American Prodrome Longitudinal Study. NeuroImage, 2014, 97, 41-52.	2.1	48
45	Cortical abnormalities in youth at clinical high-risk for psychosis: Findings from the NAPLS2 cohort. NeuroImage: Clinical, 2019, 23, 101862.	1.4	48
46	Association of baseline inflammatory markers and the development of negative symptoms in individuals at clinical high risk for psychosis. Brain, Behavior, and Immunity, 2019, 76, 268-274.	2.0	48
47	A Neural Network Simulation of Hallucinated "Voices―and Associated Speech Perception Impairments in Schizophrenic Patients. Journal of Cognitive Neuroscience, 1995, 7, 479-496.	1.1	46
48	Theory of mind, emotion recognition and social perception in individuals at clinical high risk for psychosis: Findings from the NAPLS-2 cohort. Schizophrenia Research: Cognition, 2015, 2, 133-139.	0.7	46
49	Current status specifiers for patients at clinical high risk for psychosis. Schizophrenia Research, 2014, 158, 69-75.	1.1	45
50	Depression and clinical high-risk states: Baseline presentation of depressed vs. non-depressed participants in the NAPLS-2 cohort. Schizophrenia Research, 2018, 192, 357-363.	1.1	45
51	Personality heterogeneity in PTSD: Distinct temperament and interpersonal typologies Psychological Assessment, 2014, 26, 23-34.	1.2	44
52	Severity of thought disorder predicts psychosis in persons at clinical high-risk. Schizophrenia Research, 2015, 169, 169-177.	1.1	43
53	Treatment and violent behavior in persons with first episode psychosis during a 10-year prospective follow-up study. Schizophrenia Research, 2014, 156, 272-276.	1.1	42
54	North American Prodrome Longitudinal Study (NAPLS 3): Methods and baseline description. Schizophrenia Research, 2022, 243, 262-267.	1.1	39

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55	Progressive reconfiguration of resting-state brain networks as psychosis develops: Preliminary results from the North American Prodrome Longitudinal Study (NAPLS) consortium. Schizophrenia Research, 2020, 226, 30-37.	1.1	36
56	Depressive symptoms in firstâ€episode psychosis: a 10â€year followâ€up study. Microbial Biotechnology, 2016, 10, 227-233.	0.9	35
57	Characterizing Covariant Trajectories of Individuals at Clinical High Risk for Psychosis Across Symptomatic and Functional Domains. American Journal of Psychiatry, 2020, 177, 164-171.	4.0	34
58	Individual change after genocide in Bosnian survivors of "ethnic cleansing― Assessing personality dysfunction. Journal of Traumatic Stress, 1998, 11, 147-153.	1.0	32
59	Ventricular enlargement and progressive reduction of cortical gray matter are linked in prodromal youth who develop psychosis. Schizophrenia Research, 2017, 189, 169-174.	1.1	32
60	Toward Generalizable and Transdiagnostic Tools for Psychosis Prediction: An Independent Validation and Improvement of the NAPLS-2 Risk Calculator in the Multisite PRONIA Cohort. Biological Psychiatry, 2021, 90, 632-642.	0.7	32
61	Neurocognitive profiles in the prodrome to psychosis in NAPLS-1. Schizophrenia Research, 2019, 204, 311-319.	1.1	30
62	Association of Borderline Personality Disorder Criteria With Suicide Attempts. JAMA Psychiatry, 2021, 78, 187.	6.0	30
63	Primary prevention of psychosis through interventions in the symptomatic prodromal phase, a pragmatic Norwegian Ultra High Risk study. BMC Psychiatry, 2015, 15, 89.	1.1	29
64	Counterpoint. Early intervention for psychosis risk syndromes: Minimizing risk and maximizing benefit. Schizophrenia Research, 2021, 227, 10-17.	1.1	28
65	Early detection and intervention in psychosis: an ethical paradigm shift. British Journal of Psychiatry, 2005, 187, s113-s115.	1.7	27
66	Prodromal Symptom Severity Predicts Accelerated Gray Matter Reduction and Third Ventricle Expansion among Clinically High-Risk Youth Developing Psychotic Disorders. Molecular Neuropsychiatry, 2015, 1, 13-22.	3.0	27
67	Should I Stay or Should I Go? FMRI Study of Response Inhibition in Early Illness Schizophrenia and Risk for Psychosis. Schizophrenia Bulletin, 2019, 45, 158-168.	2.3	27
68	Relation between premorbid adjustment, duration of untreated psychosis and close interpersonal trauma in firstâ€episode psychosis. Microbial Biotechnology, 2018, 12, 316-323.	0.9	26
69	Eugen Bleuler: Centennial Anniversary of His 1911 Publication of Dementia Praecox or the Group of Schizophrenias. Schizophrenia Bulletin, 2011, 37, 1101-1103.	2.3	25
70	Stress perception following childhood adversity: Unique associations with adversity type and sex. Development and Psychopathology, 2020, 32, 343-356.	1.4	25
71	Sleep problems and attenuated psychotic symptoms in youth at clinical high-risk for psychosis. Psychiatry Research, 2019, 282, 112492.	1.7	24
72	Latent class cluster analysis of symptom ratings identifies distinct subgroups within the clinical high risk for psychosis syndrome. Schizophrenia Research, 2018, 197, 522-530.	1.1	22

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73	Predictive validity of conversion from the clinical high risk syndrome to frank psychosis. Schizophrenia Research, 2020, 216, 184-191.	1.1	22
74	Causes and predictors of premature death in firstâ€episode schizophrenia spectrum disorders. World Psychiatry, 2017, 16, 217-218.	4.8	21
75	Impact of childhood adversity on corticolimbic volumes in youth at clinical high-risk for psychosis. Schizophrenia Research, 2019, 213, 48-55.	1.1	21
76	Stressor-Cortisol Concordance Among Individuals at Clinical High-Risk for Psychosis: Novel Findings from the NAPLS Cohort. Psychoneuroendocrinology, 2020, 115, 104649.	1.3	21
77	Mismatch Negativity in Response to Auditory Deviance and Risk for Future Psychosis in Youth at Clinical High Risk for Psychosis. JAMA Psychiatry, 2022, 79, 780.	6.0	21
78	Healthy adolescent performance on the MATRICS Consensus Cognitive Battery (MCCB): Developmental data from two samples of volunteers. Schizophrenia Research, 2016, 172, 106-113.	1.1	20
79	The content of attenuated psychotic symptoms in those at clinical high risk for psychosis. Psychiatry Research, 2014, 219, 506-512.	1.7	19
80	10 year course of IQ in first-episode psychosis: Relationship between duration of psychosis and long-term intellectual trajectories. Psychiatry Research, 2015, 225, 515-521.	1.7	19
81	Personality disorders in firstâ€episode psychosis. Personality and Mental Health, 2008, 2, 230-239.	0.6	18
82	Evaluating the impact of cannabis use on thalamic connectivity in youth at clinical high risk of psychosis. BMC Psychiatry, 2015, 15, 276.	1.1	18
83	Commentary: Progress, Issues, and Implications of Prodromal Research: An Inside View. Schizophrenia Bulletin, 2003, 29, 851-858.	2.3	17
84	Functional Capacity Assessed by the Map Task in Individuals at Clinical High-Risk for Psychosis. Schizophrenia Bulletin, 2016, 42, 1234-1242.	2.3	17
85	Treatment Precedes Positive Symptoms in North American Adolescent and Young Adult Clinical High Risk Cohort. Journal of Clinical Child and Adolescent Psychology, 2018, 47, 69-78.	2.2	17
86	Incorporating cortisol into the NAPLS2 individualized risk calculator for prediction of psychosis. Schizophrenia Research, 2021, 227, 95-100.	1.1	17
87	Duration of the psychosis prodrome. Schizophrenia Research, 2020, 216, 443-449.	1.1	16
88	Exploration of clinical high-risk dropouts. Schizophrenia Research, 2018, 195, 579-580.	1.1	15
89	Adding a neuroanatomical biomarker to an individualized risk calculator for psychosis: A proof-of-concept study. Schizophrenia Research, 2019, 208, 41-43.	1.1	15
90	White matter changes in psychosis risk relate to development and are not impacted by the transition to psychosis. Molecular Psychiatry, 2021, 26, 6833-6844.	4.1	15

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91	Sleep Disturbance in Individuals at Clinical High Risk for Psychosis. Schizophrenia Bulletin, 2022, 48, 111-121.	2.3	15
92	Deficits in auditory predictive coding in individuals with the psychosis risk syndrome: Prediction of conversion to psychosis Journal of Abnormal Psychology, 2020, 129, 599-611.	2.0	15
93	Childhood trauma histories in adolescent inpatients. Journal of Traumatic Stress, 1997, 10, 291-298.	1.0	14
94	The Violent Content in Attenuated Psychotic Symptoms. Psychiatry Research, 2016, 242, 61-66.	1.7	14
95	Altered Brain Activation During Memory Retrieval Precedes and Predicts Conversion to Psychosis in Individuals at Clinical High Risk. Schizophrenia Bulletin, 2019, 45, 924-933.	2.3	14
96	Evaluating the relationship between cannabis use and IQ in youth and young adults at clinical high risk of psychosis. Psychiatry Research, 2015, 230, 878-884.	1.7	13
97	Age-related trajectories of social cognition in youth at clinical high risk for psychosis: An exploratory study. Schizophrenia Research, 2018, 201, 130-136.	1.1	13
98	Duration of Untreated Psychosis: Getting Both the Timing and the Sample Right. American Journal of Psychiatry, 2020, 177, 1183-1183.	4.0	13
99	Psychiatric Morbidity Differences in Male and Female Adolescent Inpatients With Alcohol Use Disorders. Journal of Youth and Adolescence, 1998, 27, 29-41.	1.9	12
100	Traumatic brain injury in individuals at clinical high risk for psychosis. Schizophrenia Research, 2016, 174, 77-81.	1.1	12
101	The Role of microRNA Expression in Cortical Development During Conversion to Psychosis. Neuropsychopharmacology, 2017, 42, 2188-2195.	2.8	12
102	Social decline in the psychosis prodrome: Predictor potential and heterogeneity of outcome. Schizophrenia Research, 2021, 227, 44-51.	1.1	12
103	Tobacco use and psychosis risk in persons at clinical high risk. Microbial Biotechnology, 2019, 13, 1173-1181.	0.9	11
104	Genetic and clinical analyses of psychosis spectrum symptoms in a large multiethnic youth cohort reveal significant link with ADHD. Translational Psychiatry, 2021, 11, 80.	2.4	11
105	Analyzing the Duration of Untreated Psychosis. JAMA Psychiatry, 2016, 73, 1094.	6.0	10
106	The role of a family history of psychosis for youth at clinical high risk of psychosis. Microbial Biotechnology, 2019, 13, 251-256.	0.9	10
107	Associations between childhood adversity, cognitive schemas and attenuated psychotic symptoms. Microbial Biotechnology, 2021, 15, 818-827.	0.9	10
108	Stability of mismatch negativity eventâ€related potentials in a multisite study. International Journal of Methods in Psychiatric Research, 2020, 29, e1819.	1.1	10

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109	Abnormally Large Baseline P300 Amplitude Is Associated With Conversion to Psychosis in Clinical High Risk Individuals With a History of Autism: A Pilot Study. Frontiers in Psychiatry, 2021, 12, 591127.	1.3	10
110	Identifying Unmet Therapeutic Domains in Schizophrenia Patients: The Early Contributions of Wayne Fenton From Chestnut Lodge. Schizophrenia Bulletin, 2007, 33, 1086-1092.	2.3	9
111	Selection for psychosocial treatment for youth at clinical high risk for psychosis based on the North American Prodrome Longitudinal Study individualized risk calculator. Microbial Biotechnology, 2021, 15, 96-103.	0.9	9
112	Relation between cannabis use and subcortical volumes in people at clinical high risk of psychosis. Psychiatry Research - Neuroimaging, 2016, 254, 3-9.	0.9	8
113	Is going into stable symptomatic remission associated with a more positive development of life satisfaction? A 10-year follow-up study of first episode psychosis. Schizophrenia Research, 2018, 193, 364-369.	1.1	8
114	Discriminatory experiences predict neuroanatomical changes and anxiety among healthy individuals and those at clinical high risk for psychosis. NeuroImage: Clinical, 2021, 31, 102757.	1.4	8
115	Changes in symptom content from a clinical highâ€risk state to conversion to psychosis. Microbial Biotechnology, 2019, 13, 257-263.	0.9	7
116	Cross-paradigm connectivity: reliability, stability, and utility. Brain Imaging and Behavior, 2021, 15, 614-629.	1.1	7
117	Depression: An actionable outcome for those at clinical high-risk. Schizophrenia Research, 2021, 227, 38-43.	1.1	7
118	Individualized Prediction of Prodromal Symptom Remission for Youth at Clinical High Risk for Psychosis. Schizophrenia Bulletin, 2022, 48, 395-404.	2.3	7
119	Trajectories of PTSD and substance use disorders in a longitudinal study of personality disorders Psychological Trauma: Theory, Research, Practice, and Policy, 2009, 1, 269-281.	1.4	6
120	Perceptual abnormalities in clinical high risk youth and the role of trauma, cannabis use and anxiety. Psychiatry Research, 2017, 258, 462-468.	1.7	6
121	Reliability of mismatch negativity event-related potentials in a multisite, traveling subjects study. Clinical Neurophysiology, 2020, 131, 2899-2909.	0.7	6
122	The association between migrant status and transition in an ultra-high risk for psychosis population. Social Psychiatry and Psychiatric Epidemiology, 2021, 56, 943-952.	1.6	5
123	Borderline personality disorder symptom networks across adolescent and adult clinical samples: examining symptom centrality and replicability. Psychological Medicine, 2023, 53, 2946-2953.	2.7	5
124	Attentional and intellectual deficits in unmedicated behavior-disordered adolescent inpatients. Journal of Youth and Adolescence, 1996, 25, 127-135.	1.9	4
125	Evidence of Slow Neural Processing, Developmental Differences and Sensitivity to Cannabis Effects in a Sample at Clinical High Risk for Psychosis From the NAPLS Consortium Assessed With the Human Startle Paradigm. Frontiers in Psychiatry, 2020, 11, 833.	1.3	4
126	Concordance and factor structure of subthreshold positive symptoms in youth at clinical high risk for psychosis. Schizophrenia Research, 2021, 227, 72-77.	1.1	4

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127	Visual cortical plasticity and the risk for psychosis: An interim analysis of the North American Prodrome Longitudinal Study. Schizophrenia Research, 2021, 230, 26-37.	1.1	4
128	Depression Predicts Global Functional Outcomes in Individuals at Clinical High Risk for Psychosis. Psychiatric Research and Clinical Practice, 2021, 3, 163-171.	1.3	4
129	Bullying in clinical high risk for psychosis participants from the NAPLS-3 cohort. Social Psychiatry and Psychiatric Epidemiology, 2022, 57, 1379-1388.	1.6	4
130	Treating schizophrenia earlier in life and the potential for prevention. Current Psychosis & Therapeutics Reports, 2003, 1, 35-40.	0.1	2
131	Treatment Timing vs Treatment Type in First-Episode Psychosis: A Paradigm Shift in Strategy and Effectiveness. Schizophrenia Bulletin, 2012, 38, 902-903.	2.3	2
132	Life Event Stress and Reduced Cortical Thickness in Youth at Clinical High Risk for Psychosis and Healthy Control Subjects. Biological Psychiatry: Cognitive Neuroscience and Neuroimaging, 2022, 7, 171-179.	1.1	2
133	Anxiety in youth at clinical high-risk for psychosis: A two-year follow-up. Schizophrenia Research, 2021, 236, 87-88.	1.1	1
134	Alterations of Speech, Thought, Perception, and Self-Experience. , 2015, , 536-546.		0
135	Personality and life events in a personality disorder sample Personality Disorders: Theory, Research, and Treatment, 2017, 8, 376-382.	1.0	0
136	Symptom remission at 12-weeks is a strong predictor for long term outcome. Psychological Medicine, 2020, 50, 2464-2464.	2.7	0
137	Longitudinal impact of trauma in the North American Prodrome Longitudinal Studyâ€3. Microbial Biotechnology, 2022, 16, 1211-1216.	0.9	0