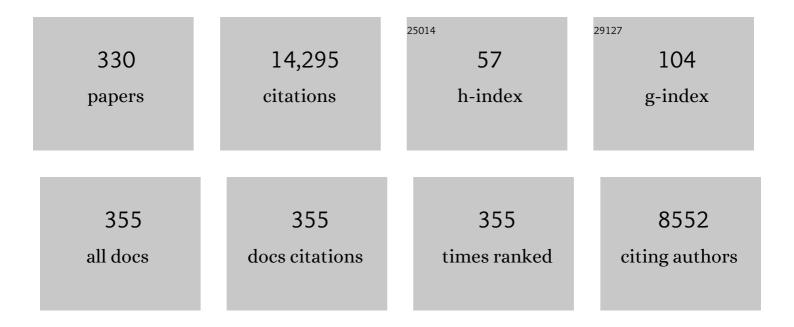
Barnaby Nelson

List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	Comorbid Depressive and Anxiety Disorders in 509 Individuals With an At-Risk Mental State: Impact on Psychopathology and Transition to Psychosis. Schizophrenia Bulletin, 2014, 40, 120-131.	2.3	499
2	Declining Transition Rate in Ultra High Risk (Prodromal) Services: Dilution or Reduction of Risk?. Schizophrenia Bulletin, 2007, 33, 673-681.	2.3	376
3	Long-term Follow-up of a Group at Ultra High Risk ("Prodromalâ€) for Psychosis. JAMA Psychiatry, 2013, 70, 793.	6.0	373
4	Heterogeneity of Psychosis Risk Within Individuals at Clinical High Risk. JAMA Psychiatry, 2016, 73, 113.	6.0	354
5	Validation of "prodromal―criteria to detect individuals at ultra high risk of psychosis: 2Âyear follow-up. Schizophrenia Research, 2008, 105, 10-17.	1.1	325
6	Beyond the "at risk mental state―concept: transitioning to transdiagnostic psychiatry. World Psychiatry, 2018, 17, 133-142.	4.8	311
7	Psychotic-Like Experiences in a Community Sample of Adolescents: Implications for the Continuum Model of Psychosis and Prediction of Schizophrenia. Australian and New Zealand Journal of Psychiatry, 2009, 43, 118-128.	1.3	309
8	The potential impact of COVID-19 on psychosis: A rapid review of contemporary epidemic and pandemic research. Schizophrenia Research, 2020, 222, 79-87.	1.1	272
9	Intervention in Individuals at Ultra-High Risk for Psychosis. Journal of Clinical Psychiatry, 2009, 70, 1206-1212.	1.1	258
10	Testing the Ultra High Risk (prodromal) criteria for the prediction of psychosis in a clinical sample of young people. Schizophrenia Research, 2006, 84, 57-66.	1.1	242
11	Basic Self-Disturbance Predicts Psychosis Onset in the Ultra High Risk for Psychosis "Prodromal" Population. Schizophrenia Bulletin, 2012, 38, 1277-1287.	2.3	236
12	Psychotic-like experiences and correlation with distress and depressive symptoms in a community sample of adolescents and young adults. Schizophrenia Research, 2010, 119, 258-265.	1.1	235
13	Outcomes of Nontransitioned Cases in a Sample at Ultra-High Risk for Psychosis. American Journal of Psychiatry, 2015, 172, 249-258.	4.0	235
14	Identifying Gene-Environment Interactions in Schizophrenia: Contemporary Challenges for Integrated, Large-scale Investigations. Schizophrenia Bulletin, 2014, 40, 729-736.	2.3	229
15	Moving From Static to Dynamic Models of the Onset of Mental Disorder. JAMA Psychiatry, 2017, 74, 528.	6.0	218
16	Effect of ω-3 Polyunsaturated Fatty Acids in Young People at Ultrahigh Risk for Psychotic Disorders. JAMA Psychiatry, 2017, 74, 19.	6.0	216
17	Clinical Staging: A Heuristic and Practical Strategy for New Research and Better Health and Social Outcomes for Psychotic and Related Mood Disorders. Canadian Journal of Psychiatry, 2010, 55, 486-497.	0.9	204
18	Neurocognitive predictors of functional outcome two to 13years after identification as ultra-high risk for psychosis. Schizophrenia Research, 2011, 132, 1-7.	1.1	182

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19	Anatomic Abnormalities of the Anterior Cingulate Cortex Before Psychosis Onset: An MRI Study of Ultra-High-Risk Individuals. Biological Psychiatry, 2008, 64, 758-765.	0.7	169
20	Experience of trauma and conversion to psychosis in an ultraâ€highâ€risk (prodromal) group. Acta Psychiatrica Scandinavica, 2010, 121, 377-384.	2.2	154
21	Transdiagnostic clinical staging in youth mental health: a first international consensus statement. World Psychiatry, 2020, 19, 233-242.	4.8	153
22	Emotion Recognition in Individuals at Clinical High-Risk for Schizophrenia. Schizophrenia Bulletin, 2012, 38, 1030-1039.	2.3	149
23	Disturbance of Minimal Self (Ipseity) in Schizophrenia: Clarification and Current Status. Schizophrenia Bulletin, 2014, 40, 479-482.	2.3	146
24	Why We Need a Transdiagnostic Staging Approach to Emerging Psychopathology, Early Diagnosis, and Treatment. JAMA Psychiatry, 2016, 73, 191.	6.0	144
25	The psychosis threshold in Ultra High Risk (prodromal) research: Is it valid?. Schizophrenia Research, 2010, 120, 1-6.	1.1	138
26	What are the neurocognitive correlates of basic self-disturbance in schizophrenia?: Integrating phenomenology and neurocognition. Part 1 (Source monitoring deficits). Schizophrenia Research, 2014, 152, 12-19.	1.1	138
27	Relating Schizotypy and Personality to the Phenomenology of Creativity. Schizophrenia Bulletin, 2010, 36, 388-399.	2.3	135
28	What are the neurocognitive correlates of basic self-disturbance in schizophrenia?: Integrating phenomenology and neurocognition. Schizophrenia Research, 2014, 152, 20-27.	1.1	130
29	A disturbed sense of self in the psychosis prodrome: Linking phenomenology and neurobiology. Neuroscience and Biobehavioral Reviews, 2009, 33, 807-817.	2.9	129
30	Randomized Controlled Trial of Interventions for Young People at Ultra High Risk for Psychosis. Journal of Clinical Psychiatry, 2011, 72, 430-440.	1.1	128
31	Randomized Controlled Trial of Interventions for Young People at Ultra-High Risk of Psychosis. Journal of Clinical Psychiatry, 2013, 74, 349-356.	1.1	128
32	The Phenomenological Critique and Self-disturbance: Implications for Ultra-High Risk ("Prodrome") Research. Schizophrenia Bulletin, 2007, 34, 381-392.	2.3	121
33	Hippocampal pathology in individuals at ultra-high risk for psychosis: A multi-modal magnetic resonance study. Neurolmage, 2010, 52, 62-68.	2.1	111
34	Sexual Trauma Increases the Risk of Developing Psychosis in an Ultra High-Risk "Prodromal― Population. Schizophrenia Bulletin, 2014, 40, 697-706.	2.3	108
35	A preliminary evaluation of the validity of at-risk criteria for bipolar disorders in help-seeking adolescents and young adults. Journal of Affective Disorders, 2010, 127, 316-320.	2.0	104
36	The predictive validity of bipolar atâ€risk (prodromal) criteria in helpâ€seeking adolescents and young adults: a prospective study. Bipolar Disorders, 2014, 16, 493-504.	1.1	103

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37	Quality of information sources about mental disorders: a comparison of Wikipedia with centrally controlled web and printed sources. Psychological Medicine, 2012, 42, 1753-1762.	2.7	102
38	Anomalous self-experience in depersonalization and schizophrenia: A comparative investigation. Consciousness and Cognition, 2013, 22, 430-441.	0.8	101
39	Varieties of Self Disorder: A Bio-Pheno-Social Model of Schizophrenia. Schizophrenia Bulletin, 2018, 44, 720-727.	2.3	101
40	Enhancing social functioning in young people at Ultra High Risk (UHR) for psychosis: A pilot study of a novel strengths and mindfulness-based online social therapy. Schizophrenia Research, 2018, 202, 369-377.	1.1	99
41	Who needs antipsychotic medication in the earliest stages of psychosis? A reconsideration of benefits, risks, neurobiology and ethics in the era of early intervention. Schizophrenia Research, 2010, 119, 1-10.	1.1	97
42	Social cognition in clinical "at risk―for psychosis and first episode psychosis populations. Schizophrenia Research, 2012, 141, 204-209.	1.1	96
43	Negative psychotic symptoms and impaired role functioning predict transition outcomes in the at-risk mental state: a latent class cluster analysis study. Psychological Medicine, 2013, 43, 2311-2325.	2.7	95
44	Declining transition rates to psychotic disorder in "ultra-high risk―clients: Investigation of a dilution effect. Schizophrenia Research, 2016, 170, 130-136.	1.1	87
45	Predictive validity of clinical variables in the "at risk―for psychosis population: International comparison with results from the North American Prodrome Longitudinal Study. Schizophrenia Research, 2011, 126, 51-57.	1.1	79
46	PACE: a specialised service for young people at risk of psychotic disorders. Medical Journal of Australia, 2007, 187, S43-6.	0.8	78
47	Should a "Risk Syndrome for Psychosis―be included in the DSMV?. Schizophrenia Research, 2010, 120, 7-15.	1.1	78
48	Broad clinical highâ€risk mental state (CHARMS): Methodology of a cohort study validating criteria for pluripotent risk. Microbial Biotechnology, 2019, 13, 379-386.	0.9	76
49	The Ultra-High Risk Concept—A Review. Canadian Journal of Psychiatry, 2013, 58, 5-12.	0.9	75
50	Randomized Controlled Trial of Interventions for Young People at Ultra-High Risk of Psychosis: Study Design and Baseline Characteristics. Australian and New Zealand Journal of Psychiatry, 2009, 43, 818-829.	1.3	74
51	Association of Structural Magnetic Resonance Imaging Measures With Psychosis Onset in Individuals at Clinical High Risk for Developing Psychosis. JAMA Psychiatry, 2021, 78, 753.	6.0	74
52	Ultra high risk (UHR) for psychosis criteria: Are there different levels of risk for transition to psychosis?. Schizophrenia Research, 2011, 125, 62-68.	1.1	71
53	Rationale and First Results of Developing At-Risk (Prodromal) Criteria for Bipolar Disorder. Current Pharmaceutical Design, 2012, 18, 358-375.	0.9	70
54	PET imaging of putative microglial activation in individuals at ultra-high risk for psychosis, recently diagnosed and chronically ill with schizophrenia. Translational Psychiatry, 2017, 7, e1225-e1225.	2.4	70

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55	The lived experience of psychosis: a bottomâ€up review coâ€written by experts by experience and academics. World Psychiatry, 2022, 21, 168-188.	4.8	67
56	Hallucinations Beyond Voices: A Conceptual Review of the Phenomenology of Altered Perception in Psychosis. Schizophrenia Bulletin, 2019, 45, S67-S77.	2.3	66
57	The relationship between coping and subclinical psychotic experiences in adolescents from the general population – a longitudinal study. Psychological Medicine, 2011, 41, 2535-2546.	2.7	63
58	Declining transition rates to psychosis: the contribution of potential changes in referral pathways to an ultra–highâ€risk service. Microbial Biotechnology, 2015, 9, 200-206.	0.9	63
59	Cognitive-Behavioral Therapy for Schizophrenia: A Critical Evaluation of Its Theoretical Framework from a Clinical-Phenomenological Perspective. Psychopathology, 2013, 46, 249-265.	1.1	60
60	Using clinical information to make individualized prognostic predictions in people at ultra high risk for psychosis. Schizophrenia Research, 2017, 184, 32-38.	1.1	58
61	Psychotic symptoms with sexual content in the "ultra high risk―for psychosis population: Frequency and association with sexual trauma. Psychiatry Research, 2010, 177, 84-91.	1.7	57
62	Facial and vocal affect perception in people at ultraâ€high risk of psychosis, firstâ€episode schizophrenia and healthy controls. Microbial Biotechnology, 2012, 6, 450-454.	0.9	57
63	Development of Proteomic Prediction Models for Transition to Psychotic Disorder in the Clinical High-Risk State and Psychotic Experiences in Adolescence. JAMA Psychiatry, 2021, 78, 77.	6.0	57
64	Towards Precision Medicine in Psychosis: Benefits and Challenges of Multimodal Multicenter Studies—PSYSCAN: Translating Neuroimaging Findings From Research into Clinical Practice. Schizophrenia Bulletin, 2020, 46, 432-441.	2.3	56
65	Not all firstâ€episode psychosis is the same: preliminary evidence of greater basic selfâ€disturbance in schizophrenia spectrum cases. Microbial Biotechnology, 2013, 7, 200-204.	0.9	55
66	Omega-3 Fatty Acid Supplementation in Adolescents with Borderline Personality Disorder and Ultra-High Risk Criteria for Psychosis: A Post Hoc Subgroup Analysis of a Double—Blind, Randomized Controlled Trial. Canadian Journal of Psychiatry, 2013, 58, 402-408.	0.9	55
67	NEURAPROâ€E study protocol: a multicentre randomized controlled trial of omegaâ€3 fatty acids and cognitiveâ€behavioural case management for patients at ultra high risk of schizophrenia and other psychotic disorders. Microbial Biotechnology, 2017, 11, 418-428.	0.9	55
68	At-risk studies and clinical antecedents of psychosis, bipolar disorder and depression: a scoping review in the context of clinical staging. Psychological Medicine, 2019, 49, 177-189.	2.7	55
69	Neuroprotective Effects of Low-dose Lithium in Individuals at Ultra-high Risk for Psychosis. A Longitudinal MRI/MRS Study. Current Pharmaceutical Design, 2012, 18, 570-575.	0.9	54
70	Clinical trajectories in the ultra-high risk for psychosis population. Schizophrenia Research, 2018, 197, 550-556.	1.1	54
71	The Phenomenological Model of Psychotic Vulnerability and Its Possible Implications for Psychological Interventions in the Ultra-High Risk (â€~Prodromal') Population. Psychopathology, 2009, 42, 283-292.	1.1	52
72	Staged Treatment in Early Psychosis: A sequential multiple assignment randomised trial of interventions for ultra high risk of psychosis patients. Microbial Biotechnology, 2018, 12, 292-306.	0.9	52

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73	Preventive interventions for individuals at ultra high risk for psychosis: An updated and extended meta-analysis. Clinical Psychology Review, 2021, 86, 102005.	6.0	52
74	Emotion recognition as a predictor of transition to a psychotic disorder in ultra-high risk participants. Schizophrenia Research, 2014, 153, 25-31.	1.1	51
75	Childhood maltreatment and transition to psychotic disorder independently predict long-term functioning in young people at ultra-high risk for psychosis. Psychological Medicine, 2015, 45, 3453-3465.	2.7	51
76	The neurophenomenology of early psychosis: An integrative empirical study. Consciousness and Cognition, 2020, 77, 102845.	0.8	51
77	Young people at ultra high risk for psychosis: a research update. Microbial Biotechnology, 2011, 5, 52-57.	0.9	50
78	Sources of clinical distress in young people at ultra high risk of psychosis. Schizophrenia Research, 2015, 165, 15-21.	1.1	50
79	Investigation of peripheral complement factors across stages of psychosis. Schizophrenia Research, 2019, 204, 30-37.	1.1	50
80	The NEURAPRO Biomarker Analysis: Long-Chain Omega-3 Fatty Acids Improve 6-Month and 12-Month Outcomes in Youths at Ultra-High Risk for Psychosis. Biological Psychiatry, 2020, 87, 243-252.	0.7	48
81	Neuroharmony: A new tool for harmonizing volumetric MRI data from unseen scanners. NeuroImage, 2020, 220, 117127.	2.1	48
82	Does disturbance of self underlie social cognition deficits in schizophrenia and other psychotic disorders?. Microbial Biotechnology, 2009, 3, 83-93.	0.9	47
83	Further examination of the reducing transition rate in ultra high risk for psychosis samples: The possible role of earlier intervention. Schizophrenia Research, 2016, 174, 43-49.	1.1	47
84	Amygdala and insula volumes prior to illness onset in bipolar disorder: A magnetic resonance imaging study. Psychiatry Research - Neuroimaging, 2012, 201, 34-39.	0.9	46
85	Discrete Alterations of Brain Network Structural Covariance in Individuals at Ultra-High Risk for Psychosis. Biological Psychiatry, 2015, 77, 989-996.	0.7	46
86	Neurocognition as a predictor of transition to psychotic disorder and functional outcomes in ultra-high risk participants: Findings from the NEURAPRO randomized clinical trial. Schizophrenia Research, 2019, 206, 67-74.	1.1	46
87	The Comprehensive Assessment of At-Risk Mental States: From mapping the onset to mapping the structure. Schizophrenia Research, 2011, 127, 107-114.	1.1	45
88	A longitudinal study of obsessive-compulsive disorder in individuals at ultra-high risk for psychosis. Journal of Psychiatric Research, 2011, 45, 1140-1145.	1.5	45
89	Anomalous self-experiences contribute independently to social dysfunction in the early phases of schizophrenia and psychotic bipolar disorder. Comprehensive Psychiatry, 2014, 55, 475-482.	1.5	45
90	Psychosocial Intervention With or Without Antipsychotic Medication for First-Episode Psychosis: A Randomized Noninferiority Clinical Trial. Schizophrenia Bulletin Open, 2020, 1, .	0.9	45

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91	Randomized Comparison of Group Cognitive Behaviour Therapy and Group Psychoeducation in Acute Patients with Schizophrenia: Effects on Subjective Quality of Life. Australian and New Zealand Journal of Psychiatry, 2010, 44, 144-150.	1.3	44
92	Can We Detect Psychotic-like Experiences in the General Population?. Current Pharmaceutical Design, 2012, 18, 376-385.	0.9	44
93	Neurocognitive predictors of transition to psychosis: medium- to long-term findings from a sample at ultra-high risk for psychosis. Psychological Medicine, 2013, 43, 2349-2360.	2.7	44
94	Differentiating the effect of antipsychotic medication and illness on brain volume reductions in first-episode psychosis: A Longitudinal, Randomised, Triple-blind, Placebo-controlled MRI Study. Neuropsychopharmacology, 2021, 46, 1494-1501.	2.8	44
95	Reduced parahippocampal cortical thickness in subjects at ultra-high risk for psychosis. Psychological Medicine, 2014, 44, 489-498.	2.7	43
96	Anomalous self-experience and childhood trauma in first-episode schizophrenia. Comprehensive Psychiatry, 2015, 56, 35-41.	1.5	43
97	Medusa's Stare: A Case Study of Working With Self-Disturbance in the Early Phase of Schizophrenia. Clinical Case Studies, 2009, 8, 489-504.	0.5	42
98	Baseline grey matter volume of non-transitioned "ultra high risk―for psychosis individuals with and without attenuated psychotic symptoms at long-term follow-up. Schizophrenia Research, 2016, 173, 152-158.	1.1	42
99	Dysregulated Lipid Metabolism Precedes Onset of Psychosis. Biological Psychiatry, 2021, 89, 288-297.	0.7	42
100	Subclinical psychosis and depression: Co-occurring phenomena that do not predict each other over time. Schizophrenia Research, 2011, 130, 277-281.	1.1	41
101	History of trauma and the association with baseline symptoms in an Ultra-High Risk for psychosis cohort. Psychiatry Research, 2013, 210, 75-81.	1.7	41
102	Neurocognitive functioning in the prodrome of mania—an exploratory study. Journal of Affective Disorders, 2013, 147, 441-445.	2.0	41
103	Cannabis-induced attenuated psychotic symptoms: implications for prognosis in young people at ultra-high risk for psychosis. Psychological Medicine, 2017, 47, 616-626.	2.7	41
104	The role of self-disturbances and cognitive biases in the relationship between traumatic life events and psychosis proneness in a non-clinical sample. Schizophrenia Research, 2018, 193, 218-224.	1.1	41
105	NEURAPRO: a multi-centre RCT of omega-3 polyunsaturated fatty acids versus placebo in young people at ultra-high risk of psychotic disorders—medium-term follow-up and clinical course. NPJ Schizophrenia, 2018, 4, 11.	2.0	41
106	Sulcogyral pattern and sulcal count of the orbitofrontal cortex in individuals at ultra high risk for psychosis. Schizophrenia Research, 2014, 154, 93-99.	1.1	40
107	Functional Connectivity in Antipsychotic-Treated and Antipsychotic-Naive Patients With First-Episode Psychosis and Low Risk of Self-harm or Aggression. JAMA Psychiatry, 2021, 78, 994.	6.0	40
108	Self-disturbances, cognitive biases and insecure attachment as mechanisms of the relationship between traumatic life events and psychotic-like experiences in non-clinical adults – A path analysis. Psychiatry Research, 2018, 259, 571-578.	1.7	39

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109	Persistent negative symptoms in individuals at Ultra High Risk for psychosis. Schizophrenia Research, 2019, 206, 355-361.	1.1	39
110	The interplay between childhood trauma, cognitive biases, psychotic-like experiences and depression and their additive impact on predicting lifetime suicidal behavior in young adults. Psychological Medicine, 2020, 50, 116-124.	2.7	39
111	White matter integrity in individuals at ultra-high risk for psychosis: a systematic review and discussion of the role of polyunsaturated fatty acids. BMC Psychiatry, 2016, 16, 287.	1.1	38
112	Child Maltreatment and Clinical Outcome in Individuals at Ultra-High Risk for Psychosis in the EU-GEI High Risk Study. Schizophrenia Bulletin, 2018, 44, 584-592.	2.3	38
113	Externalized attributional bias in the Ultra High Risk (UHR) for psychosis population. Psychiatry Research, 2013, 206, 200-205.	1.7	37
114	Psychotic-like experiences as overdetermined phenomena: When do they increase risk for psychotic disorder?. Schizophrenia Research, 2009, 108, 303-304.	1.1	34
115	IntrospectionIntrospection and schizophrenia: A comparative investigation of anomalous self experiences. Consciousness and Cognition, 2013, 22, 853-867.	0.8	34
116	Childhood trauma and psychosis: new perspectives on aetiology and treatment. Microbial Biotechnology, 2013, 7, 1-4.	0.9	34
117	Is basic selfâ€disturbance in ultraâ€high risk for psychosis (â€~prodromal') patients associated with borderline personality pathology?. Microbial Biotechnology, 2013, 7, 306-310.	0.9	34
118	Its Own Reward: A Phenomenological Study of Artistic Creativity. Journal of Phenomenological Psychology, 2007, 38, 217-255.	0.7	33
119	â€~At-risk' for psychosis research: where are we heading?. Epidemiology and Psychiatric Sciences, 2012, 21, 329-334.	1.8	33
120	Transition to first episode psychosis in ultra high risk populations: Does baseline functioning hold the key?. Schizophrenia Research, 2013, 143, 132-137.	1.1	33
121	Prospective progression from high-prevalence disorders to bipolar disorder: Exploring characteristics of pre-illness stages. Journal of Affective Disorders, 2015, 183, 45-48.	2.0	33
122	Psychotic experience subtypes, poor mental health status and helpâ€seeking behaviour in a community sample of young adults. Microbial Biotechnology, 2012, 6, 300-308.	0.9	32
123	Effects of NRG1 and DAOA genetic variation on transition to psychosis in individuals at ultra-high risk for psychosis. Translational Psychiatry, 2013, 3, e251-e251.	2.4	31
124	Impaired mismatch negativity to frequency deviants in individuals at ultra-high risk for psychosis, and preliminary evidence for further impairment with transition to psychosis. Schizophrenia Research, 2018, 191, 95-100.	1.1	31
125	The approved Italian version of the comprehensive assessment of atâ€risk mental states (CAARMSâ€ITA): Field test and psychometric features. Microbial Biotechnology, 2019, 13, 810-817.	0.9	31
126	Follow-up factor structure of schizotypy and its clinical associations in a help-seeking sample meeting ultra-high risk for psychosis criteria at baseline. Comprehensive Psychiatry, 2013, 54, 173-180.	1.5	30

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127	Pluripotential Risk and Clinical Staging: Theoretical Considerations and Preliminary Data From a Transdiagnostic Risk Identification Approach. Frontiers in Psychiatry, 2020, 11, 553578.	1.3	30
128	Basic Self-Disturbance in the Schizophrenia Spectrum: Taking Stock and Moving Forward. Psychopathology, 2015, 48, 301-309.	1.1	29
129	Examining the association between social cognition and functioning in individuals at ultra-high risk for psychosis. Australian and New Zealand Journal of Psychiatry, 2017, 51, 83-92.	1.3	29
130	Impaired action self-monitoring and cognitive confidence among ultra-high risk for psychosis and first-episode psychosis patients. European Psychiatry, 2018, 47, 67-75.	0.1	29
131	Individualized Prediction of Transition to Psychosis in 1,676 Individuals at Clinical High Risk: Development and Validation of a Multivariable Prediction Model Based on Individual Patient Data Meta-Analysis. Frontiers in Psychiatry, 2019, 10, 345.	1.3	29
132	Long-term employment among people at ultra-high risk for psychosis. Schizophrenia Research, 2017, 184, 26-31.	1.1	28
133	The Ultra-High-Risk for psychosis groups: Evidence to maintain the status quo. Schizophrenia Research, 2018, 195, 543-548.	1.1	28
134	Can Clinicians Predict Psychosis in an Ultra High Risk Group?. Australian and New Zealand Journal of Psychiatry, 2010, 44, 625-630.	1.3	27
135	Should a risk syndrome for first episode psychosis be included in the DSM-5?. Current Opinion in Psychiatry, 2011, 24, 128-133.	3.1	27
136	Borderline personality features and development of psychosis in an â€~Ultra High Risk' (UHR) population: a case control study. Microbial Biotechnology, 2012, 6, 247-255.	0.9	27
137	Longitudinal Cognitive Performance in Individuals at Ultrahigh Risk for Psychosis: A 10-year Follow-up. Schizophrenia Bulletin, 2019, 45, 1101-1111.	2.3	27
138	Comparison of erythrocyte omega-3 index, fatty acids and molecular phospholipid species in people at ultra-high risk of developing psychosis and healthy people. Schizophrenia Research, 2020, 226, 44-51.	1.1	27
139	The reality of at risk mental state services: a response to recent criticisms. Psychological Medicine, 2021, 51, 212-218.	2.7	26
140	Integrating clinical staging and phenomenological psychopathology to add depth, nuance, and utility to clinical phenotyping: a heuristic challenge. Lancet Psychiatry,the, 2021, 8, 162-168.	3.7	25
141	How Does It Feel? The Development of the Experience of Creativity Questionnaire. Creativity Research Journal, 2009, 21, 43-53.	1.7	24
142	Altered depth of the olfactory sulcus in ultra high-risk individuals and patients with psychotic disorders. Schizophrenia Research, 2014, 153, 18-24.	1.1	24
143	Olfactory identification deficits at identification as ultra-high risk for psychosis are associated with poor functional outcome. Schizophrenia Research, 2015, 161, 156-162.	1.1	24
144	Borderline personality pathology in young people at ultra high risk of developing a psychotic disorder. Microbial Biotechnology, 2017, 11, 208-214.	0.9	24

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145	The construct validity of the Inventory of Psychotic‣ike Anomalous Selfâ€Experiences (IPASE) as a measure of minimal selfâ€disturbance: Preliminary data. Microbial Biotechnology, 2019, 13, 686-691.	0.9	24
146	Dynamic Association Between Interpersonal Functioning and Positive Symptom Dimensions of Psychosis Over Time: A Longitudinal Study of Healthy Adolescents. Schizophrenia Bulletin, 2013, 39, 179-185.	2.3	23
147	Attenuated Psychosis Syndrome: Don't Jump the Gun. Psychopathology, 2014, 47, 292-296.	1.1	23
148	Social environmental risk factors for transition to psychosis in an Ultra-High Risk population. Schizophrenia Research, 2015, 161, 150-155.	1.1	23
149	Testing a neurophenomenological model of basic self disturbance inÂearly psychosis. World Psychiatry, 2019, 18, 104-105.	4.8	23
150	Association of Adverse Outcomes With Emotion Processing and Its Neural Substrate in Individuals at Clinical High Risk for Psychosis. JAMA Psychiatry, 2020, 77, 190.	6.0	23
151	Cognitive functioning throughout adulthood and illness stages in individuals with psychotic disorders and their unaffected siblings. Molecular Psychiatry, 2021, 26, 4529-4543.	4.1	23
152	Does specific psychopathology predict development of psychosis in ultra high-risk (UHR) patients?. Australian and New Zealand Journal of Psychiatry, 2013, 47, 380-390.	1.3	22
153	Recent Meta-Analyses in the Clinical High Risk for Psychosis Population: Clinical Interpretation of Findings and Suggestions for Future Research. Frontiers in Psychiatry, 2018, 9, 502.	1.3	22
154	Relationship Between Polyunsaturated Fatty Acids and Psychopathology in the NEURAPRO Clinical Trial. Frontiers in Psychiatry, 2019, 10, 393.	1.3	22
155	Staging model in psychiatry: Review of the evolution of electroencephalography abnormalities in major psychiatric disorders. Microbial Biotechnology, 2019, 13, 1319-1328.	0.9	22
156	Neuroanatomical Predictors of Functional Outcome in Individuals at Ultra-High Risk for Psychosis. Schizophrenia Bulletin, 2016, 43, sbw086.	2.3	21
157	The Ultra High Risk Approach to Define Psychosis Risk. Current Pharmaceutical Design, 2012, 18, 346-350.	0.9	20
158	Do affective or dissociative symptoms mediate the association between childhood sexual trauma and transition to psychosis in an ultra-high risk cohort?. Psychiatry Research, 2016, 236, 182-185.	1.7	20
159	Opening the Black Box of Cognitive-Behavioural Case Management in Clients with Ultra-High Risk for Psychosis. Psychotherapy and Psychosomatics, 2017, 86, 292-299.	4.0	20
160	Development and Validation of a New Measure of Everyday Adolescent Functioning: The Multidimensional Adolescent Functioning Scale. Journal of Adolescent Health, 2013, 52, 195-200.	1.2	19
161	Validation of the <scp>A</scp> rabic version of the <scp>C</scp> omprehensive <scp>A</scp> ssessment of <scp>A</scp> t <scp>R</scp> isk <scp>M</scp> ental <scp>S</scp> tates (<scp>CAARMS</scp>) in <scp>T</scp> unisian adolescents and young adults. Microbial Biotechnology, 2014, 8, 147-154.	0.9	19
162	Detail, dynamics and depth: useful correctives for some current research trends. British Journal of Psychiatry, 2018, 212, 262-264.	1.7	19

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163	A new method for analysing transition to psychosis: Joint modelling of timeâ€ŧoâ€event outcome with timeâ€dependent predictors. International Journal of Methods in Psychiatric Research, 2018, 27, .	1.1	19
164	Gender differences of patients at-risk for psychosis regarding symptomatology, drug use, comorbidity and functioning – Results from the EU-GEI study. European Psychiatry, 2019, 59, 52-59.	0.1	19
165	Can antipsychotic dose reduction lead to better functional recovery in firstâ€episode psychosis? A randomized controlledâ€ŧrial of antipsychotic dose reduction. The reduce trial: Study protocol. Microbial Biotechnology, 2019, 13, 1345-1356.	0.9	19
166	Staged treatment and acceptability guidelines in early psychosis study (STAGES): A randomized placebo controlled trial of intensive psychosocial treatment plus or minus antipsychotic medication for firstâ€episode psychosis with lowâ€risk of selfâ€harm or aggression. Study protocol and baseline characteristics of participants. Microbial Biotechnology, 2019, 13, 953-960.	0.9	19
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