

Michael W O'reilly

List of Publications by Year in descending order

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Version: 2024-02-01

43
papers

2,294
citations

236925

25
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289244

40
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all docs

44
docs citations

44
times ranked

2875
citing authors

#	ARTICLE	IF	CITATIONS
1	Adrenal insufficiency is common amongst kidney transplant recipients receiving maintenance prednisolone and can be predicted using morning cortisol. <i>Nephrology Dialysis Transplantation</i> , 2023, 38, 236-245.	0.7	4
2	Cardiometabolic Disease Burden and Steroid Excretion in Benign Adrenal Tumors. <i>Annals of Internal Medicine</i> , 2022, 175, 325-334.	3.9	53
3	Approach to androgen excess in women: Clinical and biochemical insights. <i>Clinical Endocrinology</i> , 2022, 97, 174-186.	2.4	26
4	Approach to the Patient: Hyponatremia and the Syndrome of Inappropriate Antidiuresis (SIAD). <i>Journal of Clinical Endocrinology and Metabolism</i> , 2022, 107, 2362-2376.	3.6	9
5	Cardiometabolic and psychological effects of dual-release hydrocortisone: a cross-over study. <i>European Journal of Endocrinology</i> , 2021, 184, 253-265.	3.7	13
6	Growth Hormone/Insulin Growth Factor Axis in Sex Steroid Associated Disorders and Related Cancers. <i>Frontiers in Cell and Developmental Biology</i> , 2021, 9, 630503.	3.7	16
7	Increased COVID-19 infections in women with polycystic ovary syndrome: a population-based study. <i>European Journal of Endocrinology</i> , 2021, 184, 637-645.	3.7	65
8	Polycystic Ovary Syndrome, Combined Oral Contraceptives, and the Risk of Dysglycemia: A Population-Based Cohort Study With a Nested Pharmacoepidemiological Case-Control Study. <i>Diabetes Care</i> , 2021, 44, 2758-2766.	8.6	4
9	Urine steroid metabolomics for the differential diagnosis of adrenal incidentalomas in the EURINE-ACT study: a prospective test validation study. <i>Lancet Diabetes and Endocrinology</i> , 2020, 8, 773-781.	11.4	129
10	Implicating androgen excess in propagating metabolic disease in polycystic ovary syndrome. <i>Therapeutic Advances in Endocrinology and Metabolism</i> , 2020, 11, 204201882093431.	3.2	25
11	Natural History of Adrenal Incidentalomas With and Without Mild Autonomous Cortisol Excess. <i>Annals of Internal Medicine</i> , 2019, 171, 107.	3.9	145
12	Serum testosterone, sex hormone-binding globulin and sex-specific risk of incident type 2 diabetes in a retrospective primary care cohort. <i>Clinical Endocrinology</i> , 2019, 90, 145-154.	2.4	42
13	A unique androgen excess signature in idiopathic intracranial hypertension is linked to cerebrospinal fluid dynamics. <i>JCI Insight</i> , 2019, 4, .	5.0	55
14	Increased risk of obstructive sleep apnoea in women with polycystic ovary syndrome: a population-based cohort study. <i>European Journal of Endocrinology</i> , 2019, 180, 265-272.	3.7	40
15	Causes, patterns and severity of androgen excess in 487 consecutively recruited pre- and post-pubertal children. <i>European Journal of Endocrinology</i> , 2019, 180, 213-221.	3.7	22
16	OR29-2 Mild Autonomous Cortisol Excess (MACE) in Adrenal Incidentalomas - Metabolic Risk Profile and Urinary Steroid Metabolome Analysis in 1208 Prospectively Recruited Patients. <i>Journal of the Endocrine Society</i> , 2019, 3, .	0.2	0
17	MON-203 Local Activation of 11-Oxygenated Androgens by AKR1C3 Is the Predominant Source of Androgens in Human Female Adipose Tissue. <i>Journal of the Endocrine Society</i> , 2019, 3, .	0.2	0
18	SAT-368 Natural History Of Adrenal Incidentalomas With And Without Mild Autonomous Cortisol Excess; A Systematic Review And Meta-analysis. <i>Journal of the Endocrine Society</i> , 2019, 3, .	0.2	1

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19	Causes, Patterns, and Severity of Androgen Excess in 1205 Consecutively Recruited Women. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2018, 103, 1214-1223.	3.6	50
20	Evaluating the Fat Distribution in Idiopathic Intracranial Hypertension Using Dual-Energy X-ray Absorptiometry Scanning. <i>Neuro-Ophthalmology</i> , 2018, 42, 99-104.	1.0	42
21	Metabolic Concepts in Idiopathic Intracranial Hypertension and Their Potential for Therapeutic Intervention. <i>Journal of Neuro-Ophthalmology</i> , 2018, 38, 522-530.	0.8	78
22	Polycystic ovary syndrome, androgen excess, and the risk of nonalcoholic fatty liver disease in women: A longitudinal study based on a United Kingdom primary care database. <i>PLoS Medicine</i> , 2018, 15, e1002542.	8.4	119
23	Outcome of Nonfunctioning Pituitary Adenomas That Regrow After Primary Treatment: A Study From Two Large UK Centers. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2017, 102, 1889-1897.	3.6	68
24	11-Oxygenated C19 Steroids Are the Predominant Androgens in Polycystic Ovary Syndrome. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2017, 102, 840-848.	3.6	192
25	MECHANISMS IN ENDOCRINOLOGY: The sexually dimorphic role of androgens in human metabolic disease. <i>European Journal of Endocrinology</i> , 2017, 177, R125-R143.	3.7	105
26	What Do Transgender Patients Teach Us About Idiopathic Intracranial Hypertension?. <i>Neuro-Ophthalmology</i> , 2017, 41, 326-329.	1.0	35
27	AKR1C3-Mediated Adipose Androgen Generation Drives Lipotoxicity in Women With Polycystic Ovary Syndrome. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2017, 102, 3327-3339.	3.6	133
28	Acute Hypercortisolemia Exerts Depot-Specific Effects on Abdominal and Femoral Adipose Tissue Function. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2017, 102, 1091-1101.	3.6	8
29	ACTH and gonadotropin deficiencies predict mortality in patients treated for nonfunctioning pituitary adenoma: long-term follow-up of 519 patients in two large European centres. <i>Clinical Endocrinology</i> , 2016, 85, 748-756.	2.4	46
30	Advanced nonalcoholic fatty liver disease and adipose tissue fibrosis in patients with Alstr�m syndrome. <i>Liver International</i> , 2016, 36, 1704-1712.	3.9	23
31	CHARACTERISING FAT DISTRIBUTION AND RESPONSE TO WEIGHT LOSS IN IIH. <i>Journal of Neurology, Neurosurgery and Psychiatry</i> , 2016, 87, e1.208-e1.	1.9	0
32	SFRP2 Is Associated with Increased Adiposity and VEGF Expression. <i>PLoS ONE</i> , 2016, 11, e0163777.	2.5	27
33	Effect of insulin on AKR1C3 expression in female adipose tissue: in-vivo and in-vitro study of adipose androgen generation in polycystic ovary syndrome. <i>Lancet, The</i> , 2015, 385, S16.	13.7	43
34	PAPSS2 Deficiency Causes Androgen Excess via Impaired DHEA Sulfationâ€”In Vitro and in Vivo Studies in a Family Harboring Two Novel PAPSS2 Mutations. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2015, 100, E672-E680.	3.6	62
35	Hyperandrogenemia Predicts Metabolic Phenotype in Polycystic Ovary Syndrome: The Utility of Serum Androstenedione. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2014, 99, 1027-1036.	3.6	231
36	Understanding androgen action in adipose tissue. <i>Journal of Steroid Biochemistry and Molecular Biology</i> , 2014, 143, 277-284.	2.5	120

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37	A comparative quality assessment of evidence-based clinical guidelines in endocrinology. <i>Clinical Endocrinology</i> , 2013, 78, 183-190.	2.4	35
38	ATLANTIC-DIP: Raised Maternal Body Mass Index (BMI) Adversely Affects Maternal and Fetal Outcomes in Glucose-Tolerant Women According to International Association of Diabetes and Pregnancy Study Groups (IADPSG) Criteria. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2012, 97, E608-E612.	3.6	53
39	Atlantic DIP: high prevalence of abnormal glucose tolerance post partum is reduced by breast-feeding in women with prior gestational diabetes mellitus. <i>European Journal of Endocrinology</i> , 2011, 165, 953-959.	3.7	88
40	Rho A/Rho kinase: human umbilical artery mRNA expression in normal and pre eclamptic pregnancies and functional role in isoprostane-induced vasoconstriction. <i>Reproduction</i> , 2006, 132, 169-176.	2.6	21
41	Specific PGF _{2α} receptor (FP) antagonism and human uterine contractility <i>in vitro</i> . <i>BJOG: an International Journal of Obstetrics and Gynaecology</i> , 2005, 112, 1034-1042.	2.3	23
42	Functional effects of 17alpha-hydroxyprogesterone caproate (17P) on human myometrial contractility <i>in vitro</i> . <i>Reproductive Biology and Endocrinology</i> , 2004, 2, 80.	3.3	28
43	Improving Door-to-Drug time and ST segment resolution in AMI by moving thrombolysis administration to the Emergency Department. <i>International Emergency Nursing</i> , 2004, 12, 2-9.	0.7	15