

Muhammad Abdul-Ghani

List of Publications by Year in descending order

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Version: 2024-02-01

199
papers

55,778
citations

2832

97
h-index

2896

196
g-index

202
all docs

202
docs citations

202
times ranked

38376
citing authors

#	ARTICLE	IF	CITATIONS
1	Combination therapy with pioglitazone/exenatide/metformin reduces the prevalence of hepatic fibrosis and steatosis: The efficacy and durability of initial combination therapy for type 2 diabetes (<sc>EDICT</sc>). <i>Diabetes, Obesity and Metabolism</i> , 2022, 24, 899-907.	2.2	15
2	Comprehensive analysis of circulating miRNA expression profiles in insulin resistance and type 2 diabetes in Qatari population. <i>International Journal of Transgender Health</i> , 2022, 15, 191-202.	1.1	0
3	Efficacy of lower doses of pioglitazone after stroke or transient ischaemic attack in patients with insulin resistance. <i>Diabetes, Obesity and Metabolism</i> , 2022, 24, 1150-1158.	2.2	13
4	Dapagliflozin Impairs the Suppression of Endogenous Glucose Production in Type 2 Diabetes Following Oral Glucose. <i>Diabetes Care</i> , 2022, 45, 1372-1380.	4.3	4
5	Modifying chronic kidney disease progression with the mineralocorticoid receptor antagonist finerenone in patients with type 2 diabetes. <i>Diabetes, Obesity and Metabolism</i> , 2022, 24, 1197-1205.	2.2	9
6	Effects of Sustained Hyperglycemia on Skeletal Muscle Lipids in Healthy Subjects. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2022, 107, e3177-e3185.	1.8	4
7	<sc>Type 2 diabetes</sc> subgroups and response to glucose-lowering therapy: Results from the <sc>EDICT</sc> and Qatar studies. <i>Diabetes, Obesity and Metabolism</i> , 2022, 24, 1810-1818.	2.2	3
8	FGF21 contributes to metabolic improvements elicited by combination therapy with exenatide and pioglitazone in patients with type 2 diabetes. <i>American Journal of Physiology - Endocrinology and Metabolism</i> , 2022, 323, E123-E132.	1.8	4
9	Effect of Mild Physiologic Hyperglycemia on Insulin Secretion, Insulin Clearance, and Insulin Sensitivity in Healthy Glucose-Tolerant Subjects. <i>Diabetes</i> , 2021, 70, 204-213.	0.3	15
10	Adaptation of Insulin Clearance to Metabolic Demand Is a Key Determinant of Glucose Tolerance. <i>Diabetes</i> , 2021, 70, 377-385.	0.3	47
11	Durability of Triple Combination Therapy Versus Stepwise Addition Therapy in Patients With New-Onset T2DM: 3-Year Follow-up of EDICT. <i>Diabetes Care</i> , 2021, 44, 433-439.	4.3	29
12	Pioglitazone corrects dysregulation of skeletal muscle mitochondrial proteins involved in ATP synthesis in type 2 diabetes. <i>Metabolism: Clinical and Experimental</i> , 2021, 114, 154416.	1.5	23
13	Pathophysiology of diabetic kidney disease: impact of SGLT2 inhibitors. <i>Nature Reviews Nephrology</i> , 2021, 17, 319-334.	4.1	244
14	Impaired Suppression of Glucagon in Obese Subjects Parallels Decline in Insulin Sensitivity and Beta-Cell Function. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2021, 106, 1398-1409.	1.8	16
15	Insulin Resistance and Hyperinsulinemia: the Egg and the Chicken. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2021, 106, 1897-1899.	1.8	16
16	Accuracy of 1-Hour Plasma Glucose During the Oral Glucose Tolerance Test in Diagnosis of Type 2 Diabetes in Adults: A Meta-analysis. <i>Diabetes Care</i> , 2021, 44, 1062-1069.	4.3	25
17	Adiponectin Alleviates Diet-Induced Inflammation in the Liver by Suppressing MCP-1 Expression and Macrophage Infiltration. <i>Diabetes</i> , 2021, 70, 1303-1316.	0.3	22
18	Therapeutic Manipulation of Myocardial Metabolism. <i>Journal of the American College of Cardiology</i> , 2021, 77, 2022-2039.	1.2	40

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19	Insulin secretion is a strong predictor for need of insulin therapy in patients with new-onset diabetes and HbA1c of more than 10%: A post hoc analysis of the EDICT study. <i>Diabetes, Obesity and Metabolism</i> , 2021, 23, 1631-1639.	2.2	2
20	Preface: Cardiorenal Considerations for Type 2 Diabetes—Time to Exit the Dark Ages. <i>Diabetes Spectrum</i> , 2021, 34, 214-215.	0.4	0
21	Personalized approach for type 2 diabetes pharmacotherapy: where are we and where do we need to be?. <i>Expert Opinion on Pharmacotherapy</i> , 2021, 22, 1-13.	0.9	2
22	Sodium-Glucose Cotransporter 2 Inhibitors and the Kidney. <i>Diabetes Spectrum</i> , 2021, 34, 225-234.	0.4	1
23	Insulin Secretion Predicts the Response to Antidiabetic Therapy in Patients With New-onset Diabetes. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2021, 106, 3497-3504.	1.8	3
24	Hormone-substrate changes with exenatide plus dapagliflozin versus each drug alone: The randomized, active-controlled DURATION-8 study. <i>Diabetes, Obesity and Metabolism</i> , 2020, 22, 99-106.	2.2	5
25	Clinical Parameters, Fuel Oxidation, and Glucose Kinetics in Patients With Type 2 Diabetes Treated With Dapagliflozin Plus Saxagliptin. <i>Diabetes Care</i> , 2020, 43, 2519-2527.	4.3	3
26	Combination therapy with pioglitazone/exenatide improves beta-cell function and produces superior glycaemic control compared with basal/bolus insulin in poorly controlled type 2 diabetes: A 3-year follow-up of the Qatar study. <i>Diabetes, Obesity and Metabolism</i> , 2020, 22, 2287-2294.	2.2	7
27	Improved Beta Cell Glucose Sensitivity Plays Predominant Role in the Decrease in HbA1c with Cana and Lira in T2DM. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2020, 105, 3226-3233.	1.8	10
28	Increase in endogenous glucose production with SGLT2 inhibition is attenuated in individuals who underwent kidney transplantation and bilateral native nephrectomy. <i>Diabetologia</i> , 2020, 63, 2423-2433.	2.9	17
29	Evidence Against an Important Role of Plasma Insulin and Glucagon Concentrations in the Increase in EGP Caused by SGLT2 Inhibitors. <i>Diabetes</i> , 2020, 69, 681-688.	0.3	23
30	Combination Therapy With Canagliflozin Plus Liraglutide Exerts Additive Effect on Weight Loss, but Not on HbA1c, in Patients With Type 2 Diabetes. <i>Diabetes Care</i> , 2020, 43, 1234-1241.	4.3	30
31	The tumor suppressor TMEM127 regulates insulin sensitivity in a tissue-specific manner. <i>Nature Communications</i> , 2019, 10, 4720.	5.8	14
32	Glycated hemoglobin versus oral glucose tolerance test in the identification of subjects with prediabetes in Qatari population. <i>BMC Endocrine Disorders</i> , 2019, 19, 87.	0.9	4
33	Insulin Resistance and Atherosclerosis: Implications for Insulin-Sensitizing Agents. <i>Endocrine Reviews</i> , 2019, 40, 1447-1467.	8.9	210
34	Pioglitazone: The forgotten, cost-effective cardioprotective drug for type 2 diabetes. <i>Diabetes and Vascular Disease Research</i> , 2019, 16, 133-143.	0.9	155
35	Mild Physiologic Hyperglycemia Induces Hepatic Insulin Resistance in Healthy Normal Glucose-Tolerant Participants. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2019, 104, 2842-2850.	1.8	18
36	Exenatide modulates visual cortex responses. <i>Diabetes/Metabolism Research and Reviews</i> , 2019, 35, e3167.	1.7	3

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37	Glucose-Mediated Glucose Disposal at Baseline Insulin Is Impaired in IFG. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2019, 104, 163-171.	1.8	14
38	Pioglitazone prevents the increase in plasma ketone concentration associated with dapagliflozin in insulin-treated T2DM patients: Results from the Qatar Study. <i>Diabetes, Obesity and Metabolism</i> , 2019, 21, 705-709.	2.2	3
39	Insulin Resistance the Link between T2DM and CVD: Basic Mechanisms and Clinical Implications. <i>Current Vascular Pharmacology</i> , 2019, 17, 153-163.	0.8	39
40	Impaired left ventricular diastolic function in T2DM patients is closely related to glycemic control. <i>Endocrinology, Diabetes and Metabolism</i> , 2018, 1, e00014.	1.0	6
41	Empagliflozin Treatment Is Associated With Improved β -Cell Function in Type 2 Diabetes Mellitus. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2018, 103, 1402-1407.	1.8	63
42	Slope of change in HbA _{1c} from baseline with empagliflozin compared with sitagliptin or glimepiride in patients with type 2 diabetes. <i>Endocrinology, Diabetes and Metabolism</i> , 2018, 1, e00016.	1.0	12
43	Endogenous Glucose Production and Hormonal Changes in Response to Canagliflozin and Liraglutide Combination Therapy. <i>Diabetes</i> , 2018, 67, 1182-1189.	0.3	44
44	Insulin secretion predicts the response to therapy with exenatide plus pioglitazone, but not to basal/bolus insulin in poorly controlled T2DM patients: Results from the Qatar study. <i>Diabetes, Obesity and Metabolism</i> , 2018, 20, 1075-1079.	2.2	7
45	Glucose lowering and vascular protective effects of cycloset added to GLP-1 receptor agonists in patients with type 2 diabetes. <i>Endocrinology, Diabetes and Metabolism</i> , 2018, 1, e00034.	1.0	9
46	Petition to replace current OGTT criteria for diagnosing prediabetes with the 1-hour post-load plasma glucose ≥ 155 mg/dl (8.6 mmol/L). <i>Diabetes Research and Clinical Practice</i> , 2018, 146, 18-33.	1.1	71
47	Effect of Chronic Hyperglycemia on Glucose Metabolism in Subjects With Normal Glucose Tolerance. <i>Diabetes</i> , 2018, 67, 2507-2517.	0.3	26
48	Reduced skeletal muscle phosphocreatine concentration in type 2 diabetic patients: a quantitative image-based phosphorus-31 MR spectroscopy study. <i>American Journal of Physiology - Endocrinology and Metabolism</i> , 2018, 315, E229-E239.	1.8	15
49	Pioglitazone and cardiovascular risk in T2DM patients: is it good for all?. <i>Annals of Translational Medicine</i> , 2018, 6, 192-192.	0.7	4
50	Therapeutic strategies for type 2 diabetes mellitus patients with very high HbA _{1c} : is insulin the only option?. <i>Annals of Translational Medicine</i> , 2018, 6, S95-S95.	0.7	3
51	Combination Therapy With Exenatide Plus Pioglitazone Versus Basal/Bolus Insulin in Patients With Poorly Controlled Type 2 Diabetes on Sulfonylurea Plus Metformin: The Qatar Study. <i>Diabetes Care</i> , 2017, 40, 325-331.	4.3	32
52	Role of Adipose Tissue Insulin Resistance in the Natural History of Type 2 Diabetes: Results From the San Antonio Metabolism Study. <i>Diabetes</i> , 2017, 66, 815-822.	0.3	234
53	Determinants of the increase in ketone concentration during SGLT2 inhibition in NGT, IFG and T2DM patients. <i>Diabetes, Obesity and Metabolism</i> , 2017, 19, 809-813.	2.2	61
54	Empagliflozin and Kinetics of Renal Glucose Transport in Healthy Individuals and Individuals With Type 2 Diabetes. <i>Diabetes</i> , 2017, 66, 1999-2006.	0.3	67

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55	Combination therapy with <scp>GLP</scp>â€1 receptor agonist and <scp>SGLT2</scp> inhibitor. Diabetes, Obesity and Metabolism, 2017, 19, 1353-1362.	2.2	120
56	Sodiumâ€glucose coâ€transporter (<scp>SGLT</scp>) and glucose transporter (<scp>GLUT</scp>) expression in the kidney of type 2 diabetic subjects. Diabetes, Obesity and Metabolism, 2017, 19, 1322-1326.	2.2	74
57	Efficacy of Exenatide Plus Pioglitazone Vs Basal/Bolus Insulin in T2DM Patients With Very High HbA1c. Journal of Clinical Endocrinology and Metabolism, 2017, 102, 2162-2170.	1.8	12
58	Cardiovascular Disease and Type 2 Diabetes: Has the Dawn of a New Era Arrived?. Diabetes Care, 2017, 40, 813-820.	4.3	109
59	Inhibition of Renal Sodiumâ€Glucose Cotransport With Empagliflozin Lowers Fasting Plasma Glucose and Improves Î²-Cell Function in Subjects With Impaired Fasting Glucose. Diabetes, 2017, 66, 2495-2502.	0.3	21
60	Consensus Statement by the American Association of Clinical Endocrinologists and American College of Endocrinology on the Comprehensive type 2 Diabetes Management Algorithm â€ 2017 Executive Summary. Endocrine Practice, 2017, 23, 207-238.	1.1	362
61	Impact of ethnicity and obesity on insulin resistance in two ethnic groups at very high risk of type 2 diabetes. Diabetes and Metabolism, 2017, 43, 292-294.	1.4	5
62	Renal, metabolic and cardiovascular considerations of SGLT2 inhibition. Nature Reviews Nephrology, 2017, 13, 11-26.	4.1	398
63	Pioglitazone inhibits mitochondrial pyruvate metabolism and glucose production in hepatocytes. FEBS Journal, 2017, 284, 451-465.	2.2	27
64	Pioglitazone Improves Left Ventricular Diastolic Function in Subjects With Diabetes. Diabetes Care, 2017, 40, 1530-1536.	4.3	45
65	Is It Time to Change the Type 2 Diabetes Treatment Paradigm? Yes! GLP-1 RAs Should Replace Metformin in the Type 2 Diabetes Algorithm. Diabetes Care, 2017, 40, 1121-1127.	4.3	43
66	The Primary Glucose-Lowering Effect of Metformin Resides in the Gut, Not the Circulation: Results From Short-term Pharmacokinetic and 12-Week Dose-Ranging Studies. Diabetes Care, 2016, 39, 198-205.	4.3	240
67	Prediabetes and risk of diabetes and associated complications. Current Opinion in Clinical Nutrition and Metabolic Care, 2016, 19, 394-399.	1.3	35
68	Once-daily delayed-release metformin lowers plasma glucose and enhances fasting and postprandial GLP-1 and PYY: results from two randomised trials. Diabetologia, 2016, 59, 1645-1654.	2.9	95
69	SGLT2 Inhibitors and Cardiovascular Risk: Lessons Learned From the EMPA-REG OUTCOME Study. Diabetes Care, 2016, 39, 717-725.	4.3	244
70	Discordance Between Central (Brain) and Pancreatic Action of Exenatide in Lean and Obese Subjects. Diabetes Care, 2016, 39, 1804-1810.	4.3	15
71	Dapagliflozin Enhances Fat Oxidation and Ketone Production in Patients With Type 2 Diabetes. Diabetes Care, 2016, 39, 2036-2041.	4.3	155
72	Revitalization of pioglitazone: the optimum agent to be combined with a sodiumâ€glucose coâ€transporterâ€2 inhibitor. Diabetes, Obesity and Metabolism, 2016, 18, 454-462.	2.2	44

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73	Diverted sleeve gastrectomy with ileal transposition in overweight, obese, and morbidly obese patients with type 2 diabetes: results of 1-year follow-up. <i>Surgery for Obesity and Related Diseases</i> , 2016, 12, 541-549.	1.0	9
74	Type 2 diabetes mellitus. <i>Nature Reviews Disease Primers</i> , 2015, 1, 15019.	18.1	1,308
75	Combination of Empagliflozin and Linagliptin as Second-Line Therapy in Subjects With Type 2 Diabetes Inadequately Controlled on Metformin. <i>Diabetes Care</i> , 2015, 38, 384-393.	4.3	241
76	Dapagliflozin Lowers Plasma Glucose Concentration and Improves β -Cell Function. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2015, 100, 1927-1932.	1.8	133
77	Fiber orientation measurements by diffusion tensor imaging improve hydrogen-1 magnetic resonance spectroscopy of intramyocellular lipids in human leg muscles. <i>Journal of Medical Imaging</i> , 2015, 2, 026002.	0.8	3
78	Renal sodium-glucose cotransporter inhibition in the management of type 2 diabetes mellitus. <i>American Journal of Physiology - Renal Physiology</i> , 2015, 309, F889-F900.	1.3	113
79	Initial combination therapy with metformin, pioglitazone and exenatide is more effective than sequential add-on therapy in subjects with new-onset diabetes. Results from the efficacy and durability of initial combination therapy for type 2 diabetes (EDICT): a randomized trial. <i>Diabetes, Obesity and Metabolism</i> , 2015, 17, 268-275.	2.2	160
80	Effect of vildagliptin add-on treatment to metformin on plasma asymmetric dimethylarginine in type 2 diabetes mellitus patients. <i>Drug Design, Development and Therapy</i> , 2014, 8, 239.	2.0	7
81	The Disposition Index Does Not Reflect β -Cell Function in IGT Subjects Treated With Pioglitazone. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2014, 99, 3774-3781.	1.8	34
82	Strong Association Between Insulin-Mediated Glucose Uptake and the 2-Hour, Not the Fasting Plasma Glucose Concentration, in the Normal Glucose Tolerance Range. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2014, 99, 3444-3449.	1.8	9
83	What are the pharmacotherapy options for treating prediabetes?. <i>Expert Opinion on Pharmacotherapy</i> , 2014, 15, 2003-2018.	0.9	21
84	Dapagliflozin improves muscle insulin sensitivity but enhances endogenous glucose production. <i>Journal of Clinical Investigation</i> , 2014, 124, 509-514.	3.9	661
85	Prevention of Diabetes With Pioglitazone in ACT NOW. <i>Diabetes</i> , 2013, 62, 3920-3926.	0.3	83
86	Mechanisms of Glucose Lowering of Dipeptidyl Peptidase-4 Inhibitor Sitagliptin When Used Alone or With Metformin in Type 2 Diabetes. <i>Diabetes Care</i> , 2013, 36, 2756-2762.	4.3	52
87	Non-Alcoholic Fatty Liver Disease (NAFLD) and Its Connection with Insulin Resistance, Dyslipidemia, Atherosclerosis and Coronary Heart Disease. <i>Nutrients</i> , 2013, 5, 1544-1560.	1.7	648
88	Pioglitazone Slows Progression of Atherosclerosis in Prediabetes Independent of Changes in Cardiovascular Risk Factors. <i>Arteriosclerosis, Thrombosis, and Vascular Biology</i> , 2013, 33, 393-399.	1.1	97
89	Pleiotropic Effects of Thiazolidinediones: Implications for the Treatment of Patients With Type 2 Diabetes Mellitus. <i>Hospital Practice (1995)</i> , 2013, 41, 132-147.	0.5	24
90	In Vivo Actions of Peroxisome Proliferator-Activated Receptors. <i>Diabetes Care</i> , 2013, 36, S162-S174.	4.3	94

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91	Characterization of Renal Glucose Reabsorption in Response to Dapagliflozin in Healthy Subjects and Subjects With Type 2 Diabetes. <i>Diabetes Care</i> , 2013, 36, 3169-3176.	4.3	233
92	Novel Hypothesis to Explain Why SGLT2 Inhibitors Inhibit Only 30-50% of Filtered Glucose Load in Humans. <i>Diabetes</i> , 2013, 62, 3324-3328.	0.3	198
93	Distinct β -Cell Defects in Impaired Fasting Glucose and Impaired Glucose Tolerance. <i>Diabetes</i> , 2012, 61, 447-453.	0.3	96
94	Efficacy and Tolerability of the DPP-4 Inhibitor Alogliptin Combined with Pioglitazone, in Metformin-Treated Patients with Type 2 Diabetes. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2012, 97, 1615-1622.	1.8	88
95	The role of the kidneys in glucose homeostasis: a new path towards normalizing glycaemia. <i>Diabetes, Obesity and Metabolism</i> , 2012, 14, 5-14.	2.2	398
96	Preservation of β -Cell Function: The Key to Diabetes Prevention. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2011, 96, 2354-2366.	1.8	207
97	Pioglitazone for Diabetes Prevention in Impaired Glucose Tolerance. <i>New England Journal of Medicine</i> , 2011, 364, 1104-1115.	13.9	646
98	Impaired early- but not late-phase insulin secretion in subjects with impaired fasting glucose. <i>Acta Diabetologica</i> , 2011, 48, 209-217.	1.2	55
99	Effect of Exenatide on Splanchnic and Peripheral Glucose Metabolism in Type 2 Diabetic Subjects. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2011, 96, 1763-1770.	1.8	45
100	Bromocriptine: A Sympatholytic, D2-Dopamine Agonist for the Treatment of Type 2 Diabetes. <i>Diabetes Care</i> , 2011, 34, 789-794.	4.3	209
101	The Relationship Between β -Cell Function and Glycated Hemoglobin: Results from the Veterans Administration Genetic Epidemiology Study. <i>Diabetes Care</i> , 2011, 34, 1006-1010.	4.3	53
102	Role of Sodium-Glucose Cotransporter 2 (SGLT 2) Inhibitors in the Treatment of Type 2 Diabetes. <i>Endocrine Reviews</i> , 2011, 32, 515-531.	8.9	344
103	Insulin resistance, lipotoxicity, type 2 diabetes and atherosclerosis: the missing links. The Claude Bernard Lecture 2009. <i>Diabetologia</i> , 2010, 53, 1270-1287.	2.9	678
104	Relationship of baseline HbA _{1c} and efficacy of current glucose-lowering therapies: a meta-analysis of randomized clinical trials. <i>Diabetic Medicine</i> , 2010, 27, 309-317.	1.2	183
105	Effects of Exenatide Plus Rosiglitazone on β -Cell Function and Insulin Sensitivity in Subjects With Type 2 Diabetes on Metformin. <i>Diabetes Care</i> , 2010, 33, 951-957.	4.3	100
106	Pathogenesis of Insulin Resistance in Skeletal Muscle. <i>Journal of Biomedicine and Biotechnology</i> , 2010, 2010, 1-19.	3.0	441
107	Effects of Pioglitazone on Intramyocellular Fat Metabolism in Patients with Type 2 Diabetes Mellitus. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2010, 95, 1916-1923.	1.8	72
108	Pioglitazone stimulates AMP-activated protein kinase signalling and increases the expression of genes involved in adiponectin signalling, mitochondrial function and fat oxidation in human skeletal muscle in vivo: a randomised trial. <i>Diabetologia</i> , 2009, 52, 723-732.	2.9	127

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109	From the Triumvirate to the Ominous Octet: A New Paradigm for the Treatment of Type 2 Diabetes Mellitus. <i>Diabetes</i> , 2009, 58, 773-795.	0.3	2,251
110	Effects of exenatide versus sitagliptin on postprandial glucose, insulin and glucagon secretion, gastric emptying, and caloric intake: a randomized, cross-over study. <i>Current Medical Research and Opinion</i> , 2008, 24, 2943-2952.	0.9	341
111	Rosiglitazone and pioglitazone similarly improve insulin sensitivity and secretion, glucose tolerance and adipocytokines in type 2 diabetic patients. <i>Diabetes, Obesity and Metabolism</i> , 2008, 10, 1204-1211.	2.2	76
112	Elevated Toll-Like Receptor 4 Expression and Signaling in Muscle From Insulin-Resistant Subjects. <i>Diabetes</i> , 2008, 57, 2595-2602.	0.3	319
113	Insulin Reduces Plasma Arginase Activity in Type 2 Diabetic Patients. <i>Diabetes Care</i> , 2008, 31, 134-139.	4.3	97
114	Decreased Non-Insulin-Dependent Glucose Clearance Contributes to the Rise in Fasting Plasma Glucose in the Nondiabetic Range. <i>Diabetes Care</i> , 2008, 31, 311-315.	4.3	30
115	The relationship between fasting hyperglycemia and insulin secretion in subjects with normal or impaired glucose tolerance. <i>American Journal of Physiology - Endocrinology and Metabolism</i> , 2008, 295, E401-E406.	1.8	70
116	Mechanism of action of exenatide to reduce postprandial hyperglycemia in type 2 diabetes. <i>American Journal of Physiology - Endocrinology and Metabolism</i> , 2008, 294, E846-E852.	1.8	144
117	Effect of acute physiological hyperinsulinemia on gene expression in human skeletal muscle in vivo. <i>American Journal of Physiology - Endocrinology and Metabolism</i> , 2008, 294, E910-E917.	1.8	76
118	Thiazolidinediones improve β -cell function in type 2 diabetic patients. <i>American Journal of Physiology - Endocrinology and Metabolism</i> , 2007, 292, E871-E883.	1.8	167
119	Relationship Between Hepatic/Visceral Fat and Hepatic Insulin Resistance in Nondiabetic and Type 2 Diabetic Subjects. <i>Gastroenterology</i> , 2007, 133, 496-506.	0.6	500
120	Reduction in Hematocrit and Hemoglobin Following Pioglitazone Treatment is not Hemodilutional in Type II Diabetes Mellitus. <i>Clinical Pharmacology and Therapeutics</i> , 2007, 82, 275-281.	2.3	80
121	Effects of peroxisome proliferator-activated receptor (PPAR)- α and PPAR- γ agonists on glucose and lipid metabolism in patients with type 2 diabetes mellitus. <i>Diabetologia</i> , 2007, 50, 1723-1731.	2.9	124
122	A Placebo-Controlled Trial of Pioglitazone in Subjects with Nonalcoholic Steatohepatitis. <i>New England Journal of Medicine</i> , 2006, 355, 2297-2307.	13.9	1,584
123	Comprehensive assessment of postischemic vascular reactivity in Hispanic children and adults with and without diabetes mellitus. <i>Pediatric Diabetes</i> , 2006, 7, 329-335.	1.2	13
124	Insulin resistance and endothelial dysfunction: the road map to cardiovascular diseases. <i>Diabetes/Metabolism Research and Reviews</i> , 2006, 22, 423-436.	1.7	373
125	The Effect of Pioglitazone on the Liver: Role of adiponectin. <i>Diabetes Care</i> , 2006, 29, 2275-2281.	4.3	76
126	Reduced Skeletal Muscle Inhibitor of β -Actin Content Is Associated With Insulin Resistance in Subjects With Type 2 Diabetes: Reversal by Exercise Training. <i>Diabetes</i> , 2006, 55, 760-767.	0.3	124

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127	Insulin Secretion and Action in Subjects With Impaired Fasting Glucose and Impaired Glucose Tolerance: Results From the Veterans Administration Genetic Epidemiology Study. <i>Diabetes</i> , 2006, 55, 1430-1435.	0.3	429
128	Contributions of beta-cell dysfunction and insulin resistance to the pathogenesis of impaired glucose tolerance and impaired fasting glucose. <i>Diabetes Care</i> , 2006, 29, 1130-9.	4.3	382
129	Effect of a Sustained Reduction in Plasma Free Fatty Acid Concentration on Intramuscular Long-Chain Fatty Acyl-CoAs and Insulin Action in Type 2 Diabetic Patients. <i>Diabetes</i> , 2005, 54, 3148-3153.	0.3	162
130	β-Cell Function in Subjects Spanning the Range from Normal Glucose Tolerance to Overt Diabetes: A New Analysis. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2005, 90, 493-500.	1.8	470
131	Dose-Response Effect of Elevated Plasma Free Fatty Acid on Insulin Signaling. <i>Diabetes</i> , 2005, 54, 1640-1648.	0.3	333
132	Insulin Resistance Is Associated with Impaired Nitric Oxide Synthase Activity in Skeletal Muscle of Type 2 Diabetic Subjects. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2005, 90, 1100-1105.	1.8	124
133	Lipid Infusion Decreases the Expression of Nuclear Encoded Mitochondrial Genes and Increases the Expression of Extracellular Matrix Genes in Human Skeletal Muscle. <i>Journal of Biological Chemistry</i> , 2005, 280, 10290-10297.	1.6	217
134	A Meta-analysis Comparing the Effect of Thiazolidinediones on Cardiovascular Risk Factors. <i>Archives of Internal Medicine</i> , 2004, 164, 2097.	4.3	264
135	Decreased Plasma Adiponectin Concentrations Are Closely Related to Hepatic Fat Content and Hepatic Insulin Resistance in Pioglitazone-Treated Type 2 Diabetic Patients. <i>Journal of Clinical Endocrinology and Metabolism</i> , 2004, 89, 200-206.	1.8	340
136	Discordant effects of a chronic physiological increase in plasma FFA on insulin signaling in healthy subjects with or without a family history of type 2 diabetes. <i>American Journal of Physiology - Endocrinology and Metabolism</i> , 2004, 287, E537-E546.	1.8	89
137	Dysfunctional fat cells, lipotoxicity and type 2 diabetes. <i>International Journal of Clinical Practice</i> , 2004, 58, 9-21.	0.8	175
138	Beta-cell dysfunction and glucose intolerance: results from the San Antonio metabolism (SAM) study. <i>Diabetologia</i> , 2004, 47, 31-39.	2.9	287
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