

检索证明

经检索《Science Citation Index Expanded》（SCI-EXPANDED）数据库、《Journal Citation Reports》（JCR）数据库和《中国科学院文献情报中心期刊分区表升级版》，以下 2 篇文献的收录简要信息、期刊的影响因子及分区如下：

1. 标题: Appraising non-HDL-C, systolic pressure, and a nomogram-based diagnostic model as auxiliary biomarkers in confirming acute ischemic stroke and transient ischemic attack

作者: Fu, YP (Fu, Yuping);Zhu, Y (Zhu, Ya);Yan, S (Yan, Sha);Chen, YH (Chen, Yuheng);He, ZA (He, Zhi'an)

来源出版物: SCIENTIFIC REPORTS 卷:15 期:1 DOI:10.1038/s41598-025-97474-6
出版时间:APR 19 2025

Web of Science 核心合集中的“被引频次”：3 次

期刊《SCIENTIFIC REPORTS》2025 年影响因子为 4.9。

经检索《中国科学院文献情报中心期刊分区表升级版》，2025 年分区如下：

刊名	Scientific Reports		
年份	2025		
ISSN/EISSN	2045-2322/2045-2322		
Review	否		
OA Journal Index (OAJ)	否		
Open Access	是		
Web of Science	SCIE		
	学科	分区	Top 期刊
小类	MULTIDISCIPLINARY SCIENCES 综合性期刊	3	
大类	综合性期刊	3	否

2. 标题: Appraising histone H4 lysine 5 lactylation as a novel biomarker in breast cancer
作者: Zhu, Y (Zhu, Ya);Fu, YP (Fu, Yuping);Liu, FZ (Liu, Fengzhen);Yan, S (Yan, Sha);Yu, RL (Yu, Ruili)

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经检索《中国科学院文献情报中心期刊分区表升级版》，2025 年分区如下：

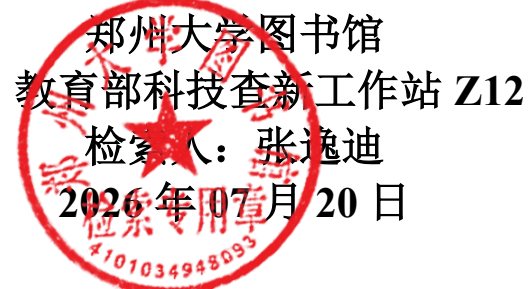
刊名	Scientific Reports		
年份	2025		
ISSN/EISSN	2045-2322/2045-2322		
Review	否		
OA Journal Index (OAJ)	否		
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Web of Science		SCIE	
	学科	分区	Top 期刊
小类	MULTIDISCIPLINARY SCIENCES 综合性期刊	3	
大类	综合性期刊	3	否

特此证明
(详细内容见附件)



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注：因 JCR 数据更新滞后，新出版论文的期刊影响因子以最新版 JCR 数据为参考。



郑州大学
ZHENGZHOU UNIVERSITY

第 1 条, 共 2 条

标题: Appraising non-HDL-C, systolic pressure, and a nomogram-based diagnostic model as auxiliary biomarkers in confirming acute ischemic stroke and transient ischemic attack

作者: Fu, YP (Fu, Yuping);Zhu, Y (Zhu, Ya);Yan, S (Yan, Sha);Chen, YH (Chen, Yuheng);He, ZA (He, Zhi'an)

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被引频次合计: 4

使用次数 (最近 180 天): 0

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引用的参考文献数: 46

摘要: Acute ischemic stroke (AIS) is characterized by the abrupt onset of neurological dysfunction stemming from focal brain ischemia, confirmed through imaging evidence of infarction. In contrast, transient ischemic attack (TIA) manifests with neurological deficits in the absence of infarction, with imaging serving as the definitive diagnostic criterion. This study aims to assess the diagnostic value of combining non-high-density lipoprotein cholesterol (non-HDL-C) and blood pressure (BP) in differentiating AIS from TIA. We recruited 207 untreated AIS patients diagnosed within 72 h and 99 age- and gender-matched TIA patients. Upon admission, serum non-HDL-C levels, other lipid profiles, and BP measurements were obtained. Binary logistic regression was employed to identify risk factors, while receiver operator characteristic (ROC) curves were used to evaluate diagnostic performance. Furthermore, least absolute shrinkage and selection operator (LASSO) regression coupled with multivariate logistic regression was utilized to develop a nomogram model. The AIS group exhibited higher prevalence rates of hypertension, diabetes, family history of diabetes, and smoking ($P < 0.05$). Notably, non-HDL-C, systolic BP, diastolic BP, and other lipid markers were significantly elevated in the AIS group ($P < 0.05$). Multivariate analysis pinpointed non-HDL-C (OR [odds ratio] = 1.663, 95% CI [confidence interval]: 1.239-2.234, $P < 0.01$) and systolic BP (OR = 1.035, 95% CI: 1.012-1.057, $P < 0.01$) as independent risk factors. ROC analysis revealed that systolic BP alone achieved an AUC of 0.686 (sensitivity: 78.7%, specificity: 51.5%), whereas the combination of systolic BP and non-HDL-C enhanced diagnostic accuracy (AUC [area under the ROC curve] = 0.736, sensitivity: 75.4%, specificity: 64.6%). A nomogram incorporating low-density lipoprotein cholesterol (LDL-C), glucose (GLU), homocysteine, and smoking demonstrated high predictive accuracy, with training and validation AUCs of 0.769 and 0.704, respectively. Non-HDL-C and systolic BP emerge as independent risk factors for AIS, and their combined use augments diagnostic precision in differentiating AIS from TIA. A nomogram model presents a practical differentiation tool, particularly in settings with limited resources.

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语言: English

文献类型: Article

作者关键词: Acute ischemic stroke;Transient ischemic attack;Non-high density lipoprotein cholesterol;Systolic pressure

KeyWords Plus: ABCD2 SCORE; BLOOD-PRESSURE; MANAGEMENT; RISK; TIA; PERFUSION

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第 2 条, 共 2 条

标题: Appraising histone H4 lysine 5 lactylation as a novel biomarker in breast cancer
作者: Zhu, Y (Zhu, Ya);Fu, YP (Fu, Yuping);Liu, FZ (Liu, Fengzhen);Yan, S (Yan, Sha);Yu, RL (Yu, Ruili)
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被引频次合计: 14
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摘要: Background Posttranslational modifications of histone lysine (K) have integral connections with cell metabolism, and participate in the carcinogenesis of various cancers. This study focuses on evaluating the expression of histone H4 lys 5 lactylation (H4K5lac) and its clinical role in breast cancer (BC). Methods During this research, immunohistochemistry (IHC) and immunoblotting, utilizing a specific primary anti-L-lactyl-histone H4 (Lys 5) rabbit monoclonal antibody, were employed to assess H4K5lac expression in BC tissue chips. H4K5lac expression in the peripheral blood mononuclear cells (PBMCs) of BC patients was investigated through immunoblotting. Results IHC revealed upregulation of histone H4K5lac in both triple-negative breast cancer (TNBC) and non-TNBC tissues, with positive rate of 91.40% [170/(150 + 19 + 17)] and 93.64% (103/110) in TNBC and non-TNBC tissues, respectively. Expression of H4K5lac demonstrated positive correlations with lymph nodes (p), and Ki-67 expression. Survival analysis indicated a negative correlation between H4K5lac expression and overall survival (OS) time in both TNBC (HR [hazard ratio] = 2.773, 95%CI [confidence interval]: 1.128-6.851, P = 0.0384) and non-TNBC cases (HR = 2.156, 95%CI: 1.011-4.599, P = 0.0275). Furthermore, elevated levels of H4K5lac were observed in the PBMCs of BC cases, and H4K5lac expression is positively correlated with serum lactate and carcinoembryonic antigen (CEA) levels. Conclusions Histone H4K5lac exhibits increased levels in both BC tissues and PBMCs, suggesting its potential as a promising biomarker for BC. This study might pave the way toward novel lactylation treatment strategies in BC.

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作者关键词: Breast cancer;Lactylation;Prognosis;Biomarker
KeyWords Plus: EXPRESSION; LACTATE

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