Author Searching in PubMed and
An Incomplete Yet Interesting Snapshot of UIC Authors

By Mary Shultz

PubMed searches the MEDLINE database which currently has over 22 million article citations from biomedical journals. Below I will show three options for conducting an author search in PubMed.

1. Quick search

The simplest way is to type the author’s last name and initials into the search box without using commas or periods.

Just click the Search button for the results. In this case, I retrieved 160 citations that had an author with the last name of Azar and the initials DT.

You can include the full first name if known. However, PubMed only started indexing the full names in 2002 so you could potentially miss a substantial number of citations. Using the same example, I searched again but used the author’s full first name. In this case, I retrieved 87 citations.
2. Advanced Search

Click the “Advanced” link located beneath the search box. Type in the author’s last name and initials. Select “Author” from the drop-down menu of search fields. Click the Search button.

You can also opt to click on the Show Index List link to the right of the search box after you have typed in the author’s name.

This will show you the various options with the number of citations for each author in parenthesis.
3. Using the field tag

Each citation in PubMed is made up of multiple fields: Author, Title, Journal Title, Volume, Abstract, Subject Headings, etc. Each field has a tag. For the author field the tag is AU. You can perform a specific field search by putting the tag in brackets next to your search term.

This option may be needed when you are searching for an author who has a last name that the system may interpret as a subject term. In the example above, I searched for an author with the last name of Needles and retrieved 71 citations. When I left off the Author field tag [au], I retrieved over 18,000 citations related to “needles” as a Medical Subject Heading (MeSH term) or as a keyword, but not as an author. Using the field tag forces the system to search the author field.

UIC AUTHORS – A QUICK LOOK

You can also search by author affiliation although PubMed typically only picks up the affiliation of the first author. To perform an affiliation search, use the “Advanced” link under the search box. On the next screen enter the author institution in the first search field under “Builder”. Then use the drop-down menu for fields and select “Affiliation”. Click search.

For example, in the search below, I entered University of Illinois at Chicago as the Affiliation.
I retrieved nearly 13,000 citations. I can narrow this by date by using the “Publication Dates” limits in the left sidebar. I selected the Custom Range and limited the search to September 2012. This narrowed my results to 113 citations.

You can also use the “Show Index List” option to see a number of narrower affiliations within UIC.

Looking at the 113 citations from September 2012, I found that a wide variety of UIC departments, centers, and institutes were represented by these authors including: the Colleges of Nursing, Medicine, Dentistry, and Applied Health Sciences. A wide variety of departments within the College of Medicine were represented including Psychiatry, Emergency Medicine, Pathology, Surgery, Ophthalmology and Visual Sciences, and many more.


Below are a dozen examples from September 2012. You can see the breadth of the research topics, study designs, and journals where our authors publish.

Brennan TE, Saadia-Redleaf MI.

**Occult middle ear and mastoid fluid in acute otitis externa.**

Laryngoscope. 122 : 92067-702012.
Department of Otolaryngology-Head and Neck Surgery, University of Illinois at Chicago

OBJECTIVES/HYPOTHESIS: Presence of fluid in the middle ear (ME) or mastoid air cells in acute otitis externa (OE) has not been reported. We hypothesize that in patients with OE there is often otitis media (occult middle ear and mastoid fluid) and secondary fluid in the mastoid air cell system, which is not seen during a clinical examination because of edema in the external canal skin. STUDY DESIGN: Retrospective chart review. METHODS: We reviewed the medical records of 209 patients who presented to our ear, nose, and throat (ENT) clinic with acute OE that was resolved with oral and/or topical antibiotics. RESULTS: Twenty-seven of the 209 patients presented with unilateral or bilateral acute OE (29 ears) and received a computed tomography (CT)
scan of their temporal bones, which was ordered by the Emergency Department or ENT services. Twenty-three of 29 ears (79%) showed fluid in the ME, mastoid, or both. Nine of the 10 patients (82%), who obtained their CT scan within 1 week of symptom onset, were found to have fluid. CONCLUSIONS: These findings support our hypothesis and serve to inform the medical community (both ENT and primary care) that fluid is often present in the ME or mastoid in patients with acute OE whose symptoms will resolve with oral and/or topical antibiotics.


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Toll-like receptor 4 (TLR4) has a key role in the initiation of innate immunity and in the regulation of adaptive immune responses. Using microarray analysis and PCR, TLR4 expression was observed to increase in murine skin wounds at the early stages. The cellular location of TLR4 was primarily in keratinocytes at the wound edges. The closure of excisional wounds was significantly delayed in TLR4-deficient (C3H/HeJ) as compared with wild-type mice, and both IL-1beta and IL-6 production were significantly lower in the wounds of TLR4-deficient mice. EGF also markedly decreased in the wound edge of epidermis in TLR4-deficient mice. In vitro studies confirmed that a wound stimulus induces TLR4 mRNA expression in primary normal human epidermal keratinocytes (NHEK). In vitro injury also induced the phosphorylation of p38 and JNK MAPK (Jun N-terminal kinase mitogen-activated protein kinase) and the expression of IL-1beta and tumor necrosis factor-alpha by NHEK. Blockade of TLR4 delayed NHEK migration and abolished the phosphorylation of p38 and JNK MAPK, and blockade of TLR4 and/or p38/JNK abolished IL-1beta production. The results suggest that inflammatory cytokine production by injured NHEK is stimulated via the TLR4-p38 and JNK MAPK signaling pathway. Together, the results provide evidence for a role of TLR4 at sites of injury, and suggest that TLR4 is an important regulator of wound inflammation.


Division of Community Health Sciences, School of Public Health, University of Illinois at Chicago

Anxiety is heightened for mothers of premature infants, potentially interfering with early mothering. This study describes relationships among race/ethnicity, language, and anxiety for women at social-environmental risk who deliver a premature infant. Postnatal baseline interview data from a randomized trial testing a behavioral intervention for mothers and infants (29-34 weeks gestational age) were used to examine maternal state (STAI-Y1) and trait (STAI-Y2) anxiety among Blacks and Latinas, and by language preference. Latinas (n = 97) had an elevated prevalence of high (>/= 40) state anxiety compared to Blacks (n = 97), with Latinas preferring a Spanish to an English interview.
reporting the highest levels of state anxiety. Trait anxiety did not differ across groups. Culturally appropriate interventions are needed to reduce anxiety among Latina mothers delivering premature infants, especially among those with limited English language proficiency. A racially/ethnically diverse workforce, bilingual healthcare providers, and trained medical interpreters may help to ensure better outcomes.

Grayson DR, Guidotti A.  
*The dynamics of DNA methylation in schizophrenia and related psychiatric disorders.*  
Neuropsychopharmacology. Advance online publication, 5 September 2012; doi:10.1038/npp.2012.125.  
The Psychiatric Institute, Department of Psychiatry, College of Medicine, University of Illinois at Chicago

Major psychiatric disorders such as schizophrenia (SZ) and bipolar disorder (BP) with psychosis (BP+) express a complex symptomatology characterized by positive symptoms, negative symptoms, and cognitive impairment. Postmortem studies of human SZ and BP+ brains show considerable alterations in the transcriptome of a variety of cortical structures, including multiple mRNAs that are downregulated in both inhibitory GABAergic and excitatory pyramidal neurons compared with non-psychiatric subjects (NPS). Several reports show increased expression of DNA methyltransferases in telencephalic GABAergic neurons. Accumulating evidence suggests a critical role for altered DNA methylation processes in the pathogenesis of SZ and related psychiatric disorders. The establishment and maintenance of CpG site methylation is essential during central nervous system differentiation and this methylation has been implicated in synaptic plasticity, learning, and memory. Atypical hypermethylation of candidate gene promoters expressed in GABAergic neurons is associated with transcriptional downregulation of the corresponding mRNAs, including glutamic acid decarboxylase 67 (GAD67) and reelin (RELN). Recent reports indicate that the methylation status of promoter proximal CpG dinucleotides is in a dynamic balance between DNA methylation and DNA hydroxymethylation. Hydroxymethylation and subsequent DNA demethylation is more complex and involves additional proteins downstream of 5-hydroxymethylcytosine, including members of the base excision repair (BER) pathway. Recent advances in our understanding of altered CpG methylation, hydroxymethylation, and active DNA demethylation provide a framework for the identification of new targets, which may be exploited for the pharmacological intervention of the psychosis associated with SZ and possibly BP+.

Magana S, Smith LE.  
*The use of the autism diagnostic interview-revised with a Latino population of adolescents and adults with autism.*  
The Psychiatric Institute, Department of Disability and Human Development, University of Illinois at Chicago

Research shows that Latinos are less likely to be diagnosed with autism than their non-Latino counterparts. One factor that may contribute to these differences is that autism diagnostic instruments have not been adapted for the Latino population. The present study compared scores from the Autism Diagnostic Interview-Revised for two groups:
48 Latino adolescents and adults with autism and a matched sample of 96 non-Latino Whites. There were no significant differences between the two groups in total impairments in social reciprocity or communication. However, lower levels of restrictive-and-repetitive behaviors were found among Latino adolescents and adults with autism compared to Whites. Findings suggest that there may be cultural equivalency in some domains, but others may warrant further exploration.


A retrospective matched case-control study of hospitalized patients with vancomycin-resistant Enterococcus (VRE) infection with reduced susceptibility to linezolid was performed in order to identify risk factors for this infection and describe patient outcomes. Forty-eight linezolid nonsusceptible VRE cases were identified between January 1, 2000, and September 30, 2008, and compared to 96 controls with linezolid-susceptible VRE, matched based on culture date and anatomic site of infection. Demographic, clinical and microbiological data were collected. On univariable analysis, risk factors for reduced linezolid susceptibility included allogeneic hematopoietic stem cell transplant and/or solid organ transplant (odds ratio [OR]: 2.63; 95% confidence interval [CI]: 1.13-6.15; P = 0.025), receipt of immunosuppressive medications (OR: 2.39; 95% CI: 1.08-5.29; P = 0.032) including corticosteroids (OR: 2.40; 95% CI: 1.03-5.58; P = 0.042) and noncorticosteroid immunosuppressives (OR: 2.31; 95% CI: 1.00-5.30; P = 0.049), and receipt of linezolid within 1 year prior to infection (OR: 34.50, 95% CI: 4.60-259.02; P < 0.001). On multivariable analysis, only receipt of linezolid within 1 year remained an independent risk factor for reduced linezolid susceptibility (OR: 31.84; 95% CI: 4.20-241.39; P < 0.001), although most patients with VRE with reduced linezolid susceptibility had not received linezolid in the year prior. Reduced linezolid susceptibility did not impact patient outcomes including clinical or microbiological cure, hospital length of stay, or all-cause mortality.

Taber DR, Chriqui JF, Perna FM, Powell LM, Chaloupka FJ. Weight status among adolescents in states that govern competitive food nutrition content. Pediatrics. 130 : 3437-442012. Health Policy Center, Institute for Health Research and Policy, University of Illinois at Chicago

OBJECTIVES: To determine if state laws regulating nutrition content of foods and beverages sold outside of federal school meal programs ("competitive foods") are associated with lower adolescent weight gain. METHODS: The Westlaw legal database identified state competitive food laws that were scored by using the Classification of Laws Associated with School Students criteria. States were classified as having strong, weak, or no competitive food laws in 2003 and 2006 based on law strength and comprehensiveness. Objective height and weight data were obtained from 6300 students in 40 states in fifth and eighth grade (2004 and 2007, respectively) within the
Early Childhood Longitudinal Study-Kindergarten Class. General linear models estimated the association between baseline state laws (2003) and within-student changes in BMI, overweight status, and obesity status. Fixed-effect models estimated the association between law changes during follow-up (2003-2006) and within-student changes in BMI and weight status. RESULTS: Students exposed to strong laws at baseline gained, on average, 0.25 fewer BMI units (95% confidence interval: -0.54, 0.03) and were less likely to remain overweight or obese over time than students in states with no laws. Students also gained fewer BMI units if exposed to consistently strong laws throughout follow-up (beta = -0.44, 95% confidence interval: -0.71, -0.18). Conversely, students exposed to weaker laws in 2006 than 2003 had similar BMI gain as those not exposed in either year. CONCLUSIONS: Laws that regulate competitive food nutrition content may reduce adolescent BMI change if they are comprehensive, contain strong language, and are enacted across grade levels.

Thompson CK, Hornby TG.

Divergent modulation of clinical measures of volitional and reflexive motor behaviors following serotonergic medication in human incomplete spinal cord injury.


Kinesiology and Nutrition, University of Illinois at Chicago

An incomplete spinal cord injury (SCI) results in profound impairments in volitional strength and reflex excitability, which contribute to loss of function. Human and animal models suggest that disruption of monoaminergic input, particularly serotonin (5HT), from supraspinal centers contributes this impaired motor function following SCI. In the present study, we investigated the effects of 5HT medications on motor function in individuals with chronic (> 1 yr) SCI. Clinical measures of strength, spasticity/spasms, and walking ability were assessed on 12 individuals with chronic incomplete SCI following acute administration of either 8 mg cyproheptadine, a 5HT antagonist, or 10 mg escitalopram, a selective 5HT reuptake inhibitor (SSRI), in a double-blinded, randomized, crossover fashion. Results indicate that 5HT medications modulate both volitional and reflexive behaviors with little change in walking performance; 5HT antagonist medications depressed clinical measures of strength and spasticity/spasms whereas SSRIs augmented both strength and spasticity/spasms. These changes are consistent with the dysregulation of 5HT-sensitive spinal neurons following SCI. This understanding may augment clinicians' awareness of the motor consequences of 5HT medications.

White-Traut R, Wink T, Minehart T, Holditch-Davis D.

Frequency of premature infant engagement and disengagement behaviors during two maternally administered interventions.


College of Nursing, Department Head of Women, Children, and Family Health Science, University of Illinois at Chicago

Although sensitive maternal behaviors improve later quality of mother-infant interaction and subsequently infant development, little is known regarding how an intervention
might promote early premature infant social interactive behavior. This study compared
the frequency of premature infant engagement and disengagement behaviors during
two maternally administered interventions, the multi-sensory auditory, tactile, visual and
vestibular intervention (ATVV) and kangaroo care (KC) for 26 infants between 31 and
46 weeks PMA. The ATVV intervention elicited more disengagement (M = 24 vs. 12, p =
.0003), trended toward more engagement (M = 21 vs. 15.7, p = .06) and more potent
engagement (M = 24 vs. 12, p = .0003), subtle disengagement (M = 25 vs. 11.9, p <
.0001), and potent disengagement (M = 22.9 vs. 14, p = .006) behaviors than did KC.
The ATVV intervention may be an intervention to promote the infant's learning how to
regulate engagement and disengagement behaviors.

Wilkie DJ, Ezenwa MO.
Pain and symptom management in palliative care and at end of life.
Center of Excellence for End-of-Life Transition Research, University of Illinois at Chicago

The purpose of this review is to provide a literature update of the research published
since 2004 on pain and symptom management in palliative care and at end of life. Findings suggest that pain and symptoms are inadequately assessed and managed, even at the end of life. Although not pervasive, there is evidence of racial/ethnic
disparities in symptom management in palliative care and at end of life. There is a need
for a broader conceptualization and measurement of pain and symptom management
as multidimensional experiences. There is insufficient evidence about mechanisms
underlying pain at end of life. Although there are advances in the knowledge of pain as
a multidimensional experience and the many symptoms that occur sometimes with pain,
gaps remain. One approach to addressing the gaps will involve assessment and
management of pain and symptoms as multidimensional experiences in people
receiving palliative care and at end of life.

Williams EM, Evans CA, Reisberg DJ, Begole EA.
Nasal outcomes of presurgical nasal molding in complete unilateral cleft lip and
 palate.
Int. J. Dent. 2012, epub 2012 Sep 11: 6438962012
Department of Orthodontics, University of Illinois at Chicago

Objective. Short-term nasal forms following primary lip repair were compared between
presurgical nasal molding and control groups. Aim. To compare nasal symmetry
between patients that had nasal molding and lip repair with those that had only lip
repair. Design. Retrospective case-control study Patients. Complete unilateral CL+P
patients had basilar and frontal photographs at two time points: (1) initial (2)
postsurgical. 28 nasal molding patients and 14 control patients were included.
Intervention. Presurgical nasal molding was performed prior to primary lip repair in
intervention group. No nasal molding was performed in control group. Hypothesis. Nasal
molding combined with lip surgery repair according to the Millard procedure provides
superior nasal symmetry than surgery alone for nostril height-width ratios and alar
groove ratios. Statistics. Shapiro-Wilk test of normality and Student's t-tests. Results. A
statistically significant difference was found for postsurgical nostril height-width ratio (P
<.05). No other statistically significant differences were found. Conclusions. Nasal molding and surgery resulted in more symmetrical nostril height-width ratios than surgery alone. Alar groove ratios were not statistically significantly different between groups perhaps because application of nasal molding was not early enough; postsurgical nasal splints were not utilized; overcorrection was not performed for nasal molding.

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Sarcoidosis, a systemic granulomatous syndrome invariably affecting the lung, typically spontaneously remits but in approximately 20% of cases progresses with severe lung dysfunction or cardiac and neurologic involvement (complicated sarcoidosis). Unfortunately, current biomarkers fail to distinguish patients with remitting (uncomplicated) sarcoidosis from other fibrotic lung disorders, and fail to identify individuals at risk for complicated sarcoidosis. We utilized genome-wide peripheral blood gene expression analysis to identify a 20-gene sarcoidosis biomarker signature distinguishing sarcoidosis (n = 39) from healthy controls (n = 35, 86% classification accuracy) and which served as a molecular signature for complicated sarcoidosis (n = 17). As aberrancies in T cell receptor (TCR) signaling, JAK-STAT (JS) signaling, and cytokine-cytokine receptor (CCR) signaling are implicated in sarcoidosis pathogenesis, a 31-gene signature comprised of T cell signaling pathway genes associated with sarcoidosis (TCR/JS/CCR) was compared to the unbiased 20-gene biomarker signature but proved inferior in prediction accuracy in distinguishing complicated from uncomplicated sarcoidosis. Additional validation strategies included significant association of single nucleotide polymorphisms (SNPs) in signature genes with sarcoidosis susceptibility and severity (unbiased signature genes - CX3CR1, FKBP1A, NOG, RBM12B, SENS3, TSHZ2; T cell/JAK-STAT pathway genes such as AKT3, CBLB, DLG1, IFNG, IL2RA, IL7R, ITK, JUN, MALT1, NFATC2, PLCG1, SPRED1). In summary, this validated peripheral blood molecular gene signature appears to be a valuable biomarker in identifying cases with sarcoidosis and predicting risk for complicated sarcoidosis.
The citations above are just a small sampling of the types of research published by UIC authors during September 2012. I hope you find these to be impressive examples of the research conducted at the University of Illinois at Chicago.

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