

SERVICIO DE ENDOCRINOLOGÍA Y NUTRICIÓN



Manuel Luque Ramírez

Facultativo Especialista en Endocrinología y Nutrición.

Doctor en Medicina por la Universidad de Alcalá.

Jefe de Sección del Área Diagnóstica y Terapéutica en Endocrinología y Nutrición (ADYTEN).

Consulta Monográfica de Endocrinología Reproductiva.

Áreas de interés: Endocrinología Reproductiva. Hiperandrogenismo.

BIOGRAPHICAL SKETCH			
NAME: Luque Ramírez, Manuel. BIRTH DATE & LOCATION: May 13, 1975, Madrid, Spain		POSITION TITLE: Head of Diagnosis and Therapeutic Unit	
EDUCATION/TRAINING			
INSTITUTION AND LOCATION	DEGREE	YEAR(s)	FIELD OF STUDY
Universidad Complutense de Madrid	M.D.	1999	Medicine & Surgery
Hospital Universitario Ramón y Cajal	Specialist	2004	Endocrinology & Nutrition
Universidad de Alcalá	Ph.D.	2008	Medicine & Surgery
Universidad Internacional Menéndez Pelayo	M.B.A.	2018	Endocrinology & Nutrition
Universidad de Alcalá	Adjunct Professor	2018	Endocrinology & Nutrition
Agencia Nacional de Evaluación de la Calidad y Acreditación (ANECA)	Senior Lecturer/Associate Professor accreditation	2022	Health Sciences

A. Positions and Honors.

Positions and Employment

2000-2004	Medical Residency, Endocrinology & Nutrition, Hospital Universitario Ramón y Cajal, Madrid
2004-2013	Assistant in Endocrinology, Department of Endocrinology, Hospital Universitario La Princesa, Madrid
2006-2013	Mentor of Resident Physicians, Department of Endocrinology, Hospital Universitario La Princesa, Madrid
2007-2013	Honorary Professor of Medicine & Endocrinology, Universidad Autónoma de Madrid, Madrid
2013-2017	Assistant in Endocrinology & Clinical Nutrition, Department of Endocrinology & Clinical Nutrition, Hospital Universitario Ramón y Cajal, Madrid
2018-present	Head of Diagnosis and Therapeutics Unit
2018-present	Co-Principal Investigator, Diabetes, Obesity and Human Reproduction Research Group, Centro de Investigación Biomédica en Red Diabetes y Enfermedades Metabólicas Asociadas CIBERDEM & Universidad de Alcalá

Other Experience and Professional Memberships

- Instituto Ramón y Cajal de Investigación Sanitaria (IRYCIS) Advisory Committees: Clinical Research Ethic Committee (2013-2021), Scientific Committee (2015-2017).
- Member of Hospital Universitario Ramón y Cajal Teaching Commission (2015-2018).

Honors

- 2002 Resident Physician from Madrid Award, Ilustre Colegio Oficial de Médicos de Madrid.
- 2003 Boehringer Ingelheim Award, Pneumology and Thoracic Surgery Society from Madrid.
- 2005 Diario Médico Award.
- 2008 Almirall Award for Research in Vascular Risk Factors, Spanish Society of Endocrinology and Nutrition
- 2008 Elsevier-Doyma Award, Spanish Society of Endocrinology and Nutrition
- 2009 Lilly Award for Research in Obesity and Metabolic Syndrome, Spanish Society of Endocrinology and Nutrition.
- 2015 Almirall Award for Research in Vascular Risk Factors, Spanish Society of Endocrinology and Nutrition
- 2019 Grant for "Proyectos de Investigación en el Aspecto Socio Sanitaria de la Diabetes Tipo 1 en la Comunidad de Madrid" SEN DIMAD 2019
- 2020 Best research publication, SENDIMAD 2020. 2020 Best oral communication award, SENDIMAD 2020.

B. Publication record (JAN/2023):

B.1. PUBLICATIONS (NCBI): <https://www.ncbi.nlm.nih.gov/myncbi/manuel.luque%20ramirez.1/bibliography/public/>
h-INDEX (JAN-2023): 34 (WoS) / 38 (ResearchGate) / 42 (Google Scholar).

ALL CITATIONS (JAN-2023): 3,926 (Wos).

ALL CITATIONS EXCLUDING SELF-CITATIONS (JAN-2023): 3,596 (WoS).

MEAN CITATIONS PER ITEM (JAN-2023): 31.16 (WoS).

AVERAGE CITATIONS PER YEAR (JAN-2023): 178.45 (WoS) .

AVERAGE CITATIONS PER YEAR (2018-2023): 46.14 (WoS).

NUMBER OF PUBLICATIONS D1 (JAN/2023): 33 (WoS). **NUMBER OF PUBLICATIONS Q1 (JAN/2023):** 54 (WoS). **NUMBER OF PUBLICATIONS Q2 (JAN/2023):** 19 (WoS). **ORCID:** 0000-0002-6002-4237.

B.2. Selected peer-reviewed publications (1st author or senior)

1. *Genomic variants in polycystic ovary syndrome.* Clin Chim Acta. 2006; 366: 14-26.
2. *Obesity is the major determinant of the abnormalities in blood pressure found in young women with the polycystic ovary syndrome.* J Clin Endocrinol Metab. 2007; 92 (6): 2141-8.
3. *Comparison of ethinyl-estradiol plus cyproterone acetate versus metformin effects on classic metabolic cardiovascular risk factors in women with the polycystic ovary syndrome.* J Clin Endocrinol Metab 2007; 92 (6): 2136-40.
4. *The increased body iron stores of obese women with polycystic ovary syndrome are a consequence of insulin resistance and hyperinsulinism, and do not result from reduced menstrual losses.* Diabetes Care. 2007; 30 (9): 2309-13.
5. *Cost of management of invasive growth hormone (GH)-secreting macroadenoma.* J Endocrinol Invest. 2007; 30 (7): 541-5.
6. *Androgen excess is associated with the increased carotid intima-media thickness observed in young women with polycystic ovary syndrome.* Hum Reprod. 2007; 22 (12): 3197-203.
7. *Serum uric acid concentration as non-classic cardiovascular risk factor in women with polycystic ovary syndrome: effect of treatment with ethinyl-estradiol plus cyproterone acetate versus metformin.* Hum Reprod. 2008; 23 (7): 1594-601.
8. *Effects of metformin versus ethinyl-estradiol plus cyproterone acetate on ambulatory blood pressure monitoring and carotid intima media thickness in women with the polycystic ovary syndrome.* Fertil Steril. 2009; 91(6): 2527-36.
9. *Antiandrogenic contraceptives increase serum adiponectin in obese polycystic ovary syndrome patients.* Obesity (Silver Spring). 2009; 17(1): 3-9.
10. *Effects of an antiandrogenic oral contraceptive pill compared with metformin on blood coagulation tests and endothelial function in women with the polycystic ovary syndrome: influence of obesity and smoking.* Eur J Endocrinol. 2009; 160(3): 469-80.
11. *The efficacy of octreotide LAR as first-line therapy for patients newly diagnosed of acromegaly is independent of tumour extension. Predictive factors of tumour and biochemical response.* Horm Metab Res 2010; 42(1): 38-44.
12. *The determinants of insulin sensitivity, beta-cell function, and glucose tolerance are different in patients with polycystic ovary syndrome and in women who do not have hyperandrogenism.* Fertil Steril. 2010; 94 (6): 2214-21.
13. *Treatment of polycystic ovary syndrome (PCOS) with metformin ameliorates insulin resistance in parallel with the decrease of serum interleukin-6 concentrations.* Horm Metab Res. 2010; 42 (11): 815-20.
14. *Role of decreased circulating hepcidin concentrations in the iron excess of women with the polycystic ovary syndrome.* J Clin Endocrinol Metab 2011; 96(3): 846-52.
15. *Role of androgen-mediated enhancement of erythropoiesis in the increased body iron stores of patients with polycystic ovary syndrome.* Fertil Steril 2011; 95(5): 1730-5.e1.
16. *Sexual dimorphism in adipose tissue function as evidenced by circulating adipokine concentrations in the fasting state and after an oral glucose challenge.* Hum Reprod. 2013; 28 (7): 1908-18.
17. *Office blood pressure, ambulatory blood pressure monitoring, and echocardiographic abnormalities in women with polycystic ovary syndrome: role of obesity and androgen excess.* Hypertension. 2014; 63 (3): 624-9.
18. *The striking similarities in the metabolic associations of female androgen excess and male androgen deficiency.* Hum Reprod 2014; 29 (10): 2083-91.
19. *Polycystic ovary syndrome as a paradigm for prehypertension, prediabetes, and preobesity.* Curr Hypertens Rep 2014; 16 (12): 500.
20. *Influence of adrenal hyperandrogenism on the clinical and metabolic phenotype for women with polycystic ovary syndrome.* Fertil Steril 2015; 103: 795
21. *Referral bias in female functional hyperandrogenism and polycystic ovary syndrome.* Eur J Endocrinol 2015 Aug 4. pii: EJE-15-0646
22. *Targets to treat androgen excess in polycystic ovary syndrome.* Expert Opin Ther Targets 2015; 19(11): 1545-60.
23. *Effects of glucose ingestion on circulating inflammatory mediators: influence of sex and weight excess.* Clin Nutr 2017; 36(2): 522-9.
24. *Adrenal hyperandrogenism and polycystic ovary syndrome.* Curr Pharm Des 2016; 22(36): 5588-602.
25. *Combined oral contraceptives and/or antiandrogens versus insulin sensitizers for polycystic ovary syndrome: a systematic review and meta-analysis.* Human Reprod Update 2017; Dec 27.
26. *Role of sampling times and serum cortisol cut-off concentrations on the routine assessment of adrenal function using the standard cosyntropin test in an academic hospital from Spain: a retrospective chart review.* BMJ Open; 8(5):e019273.

27. *Certified testosterone immunoassays for hyperandrogenaemia.* Eur J Clin Invest. 2018 Dec;48(12):e13029.
28. *The peripheral atherosclerotic profile in patients with type 1 diabetes warrants a thorough vascular assessment of asymptomatic patients.* Diabetes Metab Res Rev. 2019 Feb;35(2):e3088.
29. *Association of Cardiovascular Autonomic Dysfunction With Peripheral Arterial Stiffness in Patients With Type 1 Diabetes.* J Clin Endocrinol Metab. 2019 Jul 1;104(7):2675-2684.
30. *Sexual Dimorphism and Sex Steroids Influence Cardiovascular Autonomic Neuropathy in Patients With Type 1 Diabetes.* Diabetes Care. 2019 Nov;42(11):e175-e178.
31. *Efficacy and Safety of SGLT2 Inhibitors in Type 1 Diabetes After the Introduction of an Off-Lab el Use Protocol for Clinical Practice.* Diabetes Technol Ther. 2020 Mar;22(3):208-215.
32. *A safety evaluation of current medications for adult women with the polycystic ovarian syndrome notpursuing pregnancy.* Expert Opin Drug Saf. 2020 Dec;19(12):1559-1576.
33. *Iron Overload in Functional Hyperandrogenism: In a Randomized Trial, Bloodletting Does Not Improve Metabolic Outcomes.* J Clin Endocrinol Metab. 2021 Mar 25;106(4):e1559-e1573.
34. *Fasting serum copeptin and asymptomatic peripheral artery disease: No association in patients with type 1 diabetesmellitus.* Diabetes Metab. 2021 May;47(3):101207.
35. *Bloodletting has no effect on the blood pressure abnormalities of hyperandrogenic women taking oral contraceptives in a randomized clinical trial.* Sci Rep. 2021 Nov 11;11(1):22097.
36. *Type 1 diabetes mellitus and polycystic ovary syndrome.* Nat Rev Endocrinol. 2021 Dec;17(12):701-702.
37. *High serum copeptin may be a marker of an increased carotid intima-media thickness in asymptomatic patients with type 1 diabetes.* J Diabetes Complications. 2022 Jan;36(1):108085.
38. *Impact of excluding hyperglycemia from international diabetes federation metabolic syndrome diagnostic criteria on prevalence of the syndrome and its association with microvascular complications, in adult patients with type 1 diabetes.* Endocrine. 2022 Jun;76(3):601-611
39. *Effect of Iron Depletion by Bloodletting vs. Observation on Oxidative Stress Biomarkers of Women with Functional Hyperandrogenism Taking a Combined Oral Contraceptive: A Randomized Clinical Trial.* J Clin Med 2022 Jul 3;11(13):3864.
40. *Serum metabolomics profiling by proton nuclear magnetic resonance spectroscopy reveals sexual dimorphism and masculinization of intermediate metabolism in women with polycystic ovary syndrome (PCOS)* Biol Sex Differ 2023 Apr 19;14(1):21.
41. *Arterial stiffness is not associated with changes in the circadian pattern of blood pressure in patients with type 1 diabetes mellitus and cardiovascular autonomic dysfunction.* Diab Vasc Dis Res 2023 May-Jun;20(3):14791641231173621
42. *PCOS during the menopausal transition and after menopause: a systematic review and meta-analysis.* Hum Reprod Update 2023 Nov 2;29(6):741-772.
43. *Serum metabolomics profiling by proton nuclear magnetic resonance spectrometry of the response to single oral macronutrient challenges in women with polycystic ovary syndrome (PCOS) compared with male and female controls.* Biol Sex Differ 2023 Sep 22;14(1):62.

C. Research Support Role: selected grants as Principal & Contributor Researcher

- 1- ENDOPCOS (17-OCT-2003 to 17-OCT-2006) Ramón y Cajal University Hospital. The polycystic ovary syndrome and associated cardiovascular risk factors. Changes after treatment with an insulin sensitizer, metformin, versus an oral contraceptive, etinil-estradiol plus cyproterone acetate, and influence of obesity on these risk factors.
- 2- FIS PI050341 (01-JAN-2006 to 31-DEC-2008) Spanish Ministry of Health. A global approach to the study of the polycystic ovary syndrome as an early marker of the metabolic inflammatory cardiovascular syndrome.
- 3- FIS PI080944 (01-JAN-2009 to 31-DEC-2011) Spanish Ministry of Science and Innovation. Influence of androgens on the development of abdominal adiposity and on the dysfunction of visceral fat in humans, as pathogenetic factors for insulin resistance and diabetes.
- 4- FIS PI1100357 (01-JAN-2012 to 31-DEC-2015) Spanish Ministry of Economy and Competitiveness. Hormonal, metabolic, inflammatory and oxidant responses to the different macronutrients of diet: influence of sex steroids.
- 5- FIS PI 14/0069 (01-JAN-2015 to 31-DEC-2018) Spanish Ministry of Economy and Competitiveness. Effect of the decrease in iron tissue depots on the cardiovascular risk factors of women with the polycystic ovary syndrome. A "proof-of-concept" study.
- 6- FIS PI 18/01122 (01-JAN-1999 to 31-DEC-2021) Body Fat as Determinant of Female Gonadal Dysfunction.
- 7- FIS PI21/00116 (01-JAN-2021 to 31-DEC-2024). Validation of biomarkers for the diagnosis, prognosis, and prediction of therapeutic outcomes in women with polycystic ovary syndrome (PCOS).
- 8- FIS PI22/00616. Dimorfismo sexual y biomarcadores inflamatorios en pacientes con diabetes mellitus tipo 1 y neuropatía cardíaca autonómica.

Good Clinical Practices (GCPs) training: NIDA Clinical Trials Network (6 hours). Course completion date: 6-JAN-2023.