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JOURNAL OF METABOLIC SYNDROME



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UNICAMP

Executive Editor for
Journal of Metabolic Syndrome

BIOGRAPHY

Gil Guerra-Junior is Full Professor of the Department of Pediatrics, Pediatric Endocrinology Unit, School of Medical Sciences at State University of Campinas (Unicamp) in Campinas, São Paulo, Brazil. Professor Guerra-Junior received his undergraduate education in Medicine at School of Medical Sciences, Unicamp, Brazil, and his master degree and Ph.D in Pediatrics at the same University. His research interests include growth, body composition, bone mass, and clinical and molecular studies in sex differentiation disorders. He has written extensively and published in leading scientific journals such as New England Journal of Medicine, Journal of Clinical Endocrinology and Metabolism, European Journal of Endocrinology, Clinical Endocrinology, Journal of Bone and Mineral Metabolism (105 papers; Citation Index: 350). He is reviewer of Clinical Genetics, Journal of Pediatric Endocrinology & Metabolism, Brazilian Journal of Medical and Biological Research, British Journal of Nutrition, Gynecological Endocrinology, International Journal of Andrology, Revista de Saúde Pública, Arquivos Brasileiros de Endocrinologia & Metabologia, Jornal de Pediatria, and others.

RESEARCH INTERESTS

Gil Guerra research interests include growth, body composition, bone mass, and clinical and molecular studies in sex differentiation disorders.

RECENT PUBLICATIONS

Effects of Programmed Physical Activity on Body Composition in Post-Pubertal Schoolchildren. Farias ED, Gonçalves EM, Morcillo AM, Guerra-Júnior G, Amancio OM. *J Pediatr (Rio J)*. 2014 Oct 8. pii: S0021-7557(14)00141-7.

Homozygous inactivating mutation in NANOS3 in two sisters with primary ovarian insufficiency. Santos MG, Machado AZ, Martins CN, Domenice S, Costa EM, Nishi MY, Ferraz-de-Souza B, Jorge SA, Pereira CA, Soardi FC, de Mello MP, Maciel-Guerra AT, Guerra-Junior G, Mendonca BB. *Biomed Res Int*. 2014;2014:787465.

Growth curves for girls with Turner syndrome. Bertapelli F, Barros-Filho Ade A, Antonio MÂ, Barbeta CJ, de Lemos-Marini SH, Guerra-Junior G. *Biomed Res Int*. 2014;2014:687978.

Growth and body composition in Brazilian female rhythmic gymnastics athletes. Camargo CT, Gomez-Campos RA, Cossio-Bolaños MA, Barbeta VJ, Arruda M, Guerra-Junior G. *J Sports Sci*. 2014;32(19):1790-6.

[The use of FISH on buccal smear to investigate mosaicism with a 45,X cell line: study on healthy men and patients with disorders of sex development]. de Paulo J, de Andrade JG, dos Santos AP, Gil-da-Silva-Lopes VL, Guerra-Júnior G, Maciel-Guerra AT. *Arq Bras Endocrinol Metabol*. 2014 Jun;58(4):328-34.

RECENT PUBLICATIONS

Genetic predictors of long-term response to growth hormone (GH) therapy in children with GH deficiency and Turner syndrome: the influence of a SOCS2 polymorphism. Braz AF, Costalonga EF, Trarbach EB, Scalco RC, Malaquias AC, Guerra-Junior G, Antonini SR, Mendonca BB, Arnhold IJ, Jorge AA. *J Clin Endocrinol Metab.* 2014 Sep;99(9):E1808-13.

Prader-Willi syndrome: a case report with atypical developmental features. Sewaybricker LE, Guaragna-Filho G, Paula GB, Andrade JG, Tincani BJ, D'Souza-Li L, Lemos-Marini SH, Maciel-Guerra AT, Guerra-Júnior G. *J Pediatr Endocrinol Metab.* 2014 Sep;27(9-10):983-8.

The novel p.Cys65Tyr mutation in NR5A1 gene in three 46,XY siblings with normal testosterone levels and their mother with primary ovarian insufficiency. Fabbri HC, de Andrade JG, Soardi FC, de Calais FL, Petroli RJ, Maciel-Guerra AT, Guerra-Júnior G, de Mello MP. *BMC Med Genet.* 2014 Jan 10;15:7.

Growth curves in Down syndrome: implications for clinical practice. Bertapelli F, Martin JE, Gonçalves EM, de Oliveira Barbeta VJ, Guerra-Júnior G. *Am J Med Genet A.* 2014 Mar;164A(3):844-7.

[Growth and body composition of a cohort of children and adolescents with type 1 diabetes]. Paulino MF, de Lemos-Marini SH, Guerra-Júnior G, Morcillo AM. *Arq Bras Endocrinol Metabol.* 2013 Nov;57(8):623-31.

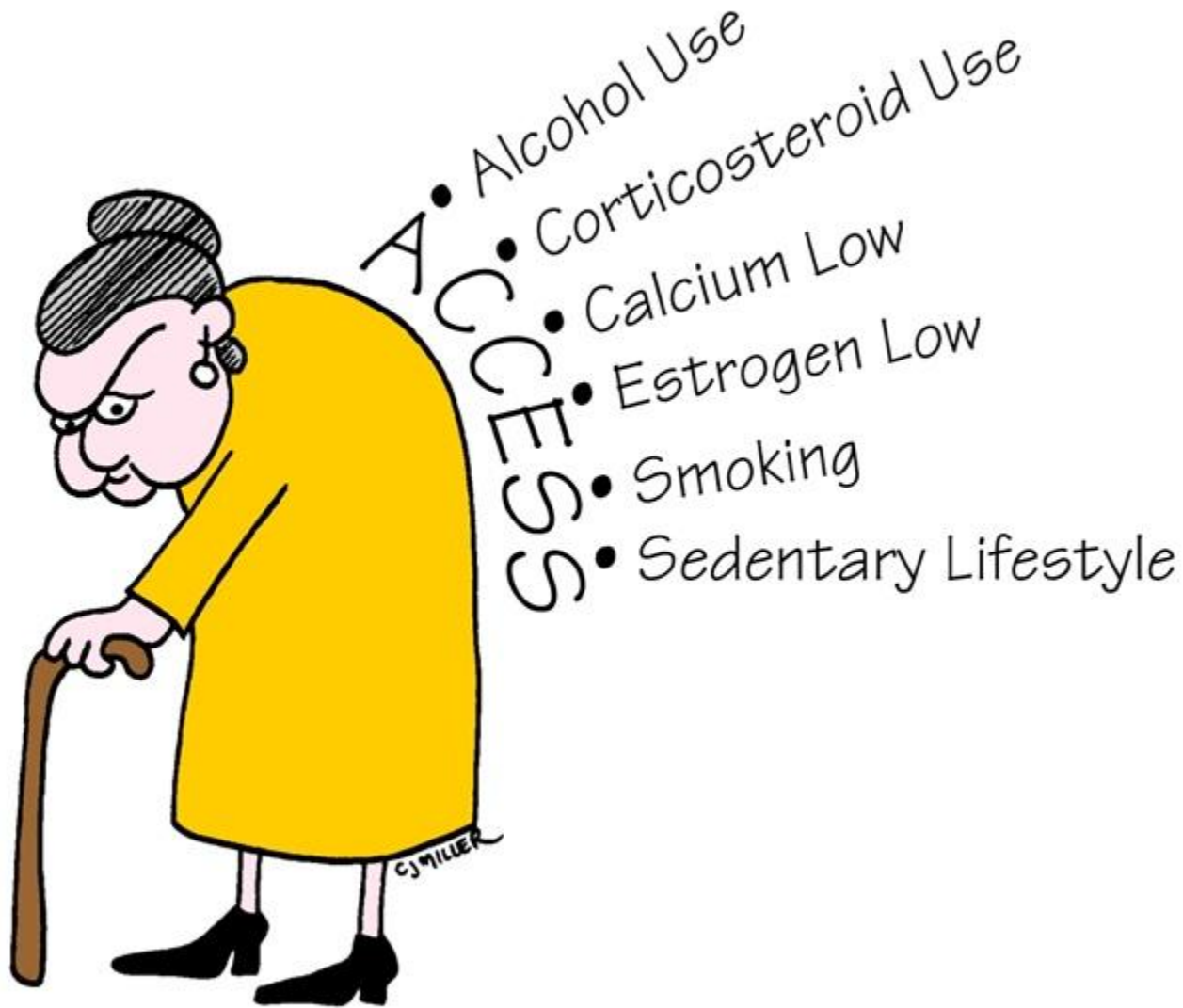
The sitting height/height ratio for age in healthy and short individuals and its potential role in selecting short children for SHOX analysis. Malaquias AC, Scalco RC, Fontenele EG, Costalonga EF, Baldin AD, Braz AF, Funari MF, Nishi MY, Guerra-Junior G, Mendonca BB, Arnhold IJ, Jorge AA. *Horm Res Paediatr.* 2013;80(6):449-56.

Osteoporosis

Osteoporosis is a disease in which bones become fragile and more likely to fracture. Usually the bone loses density, which measures the amount of calcium and minerals in the bone.

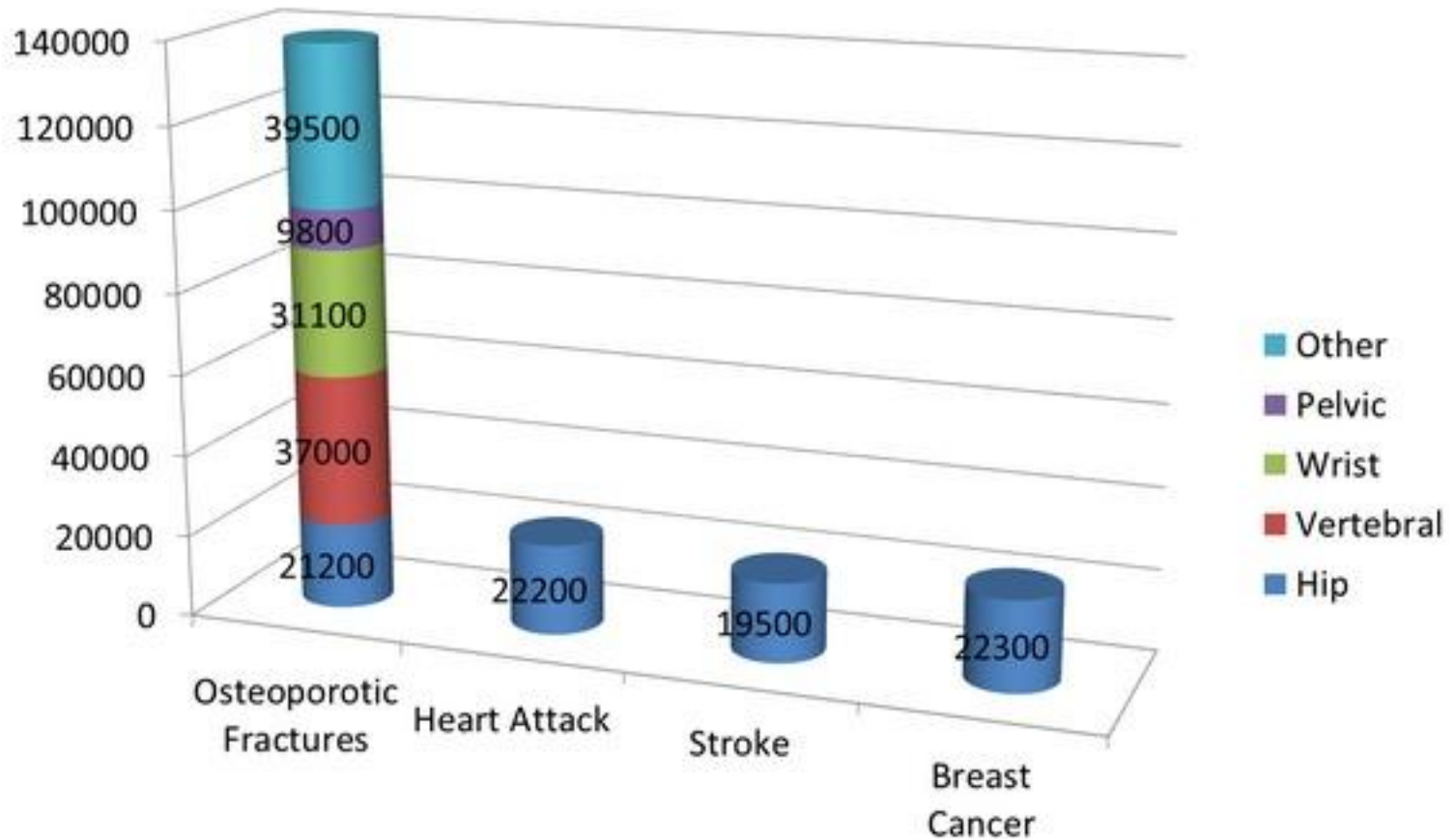


OSTEOPOROSIS RISK FACTORS



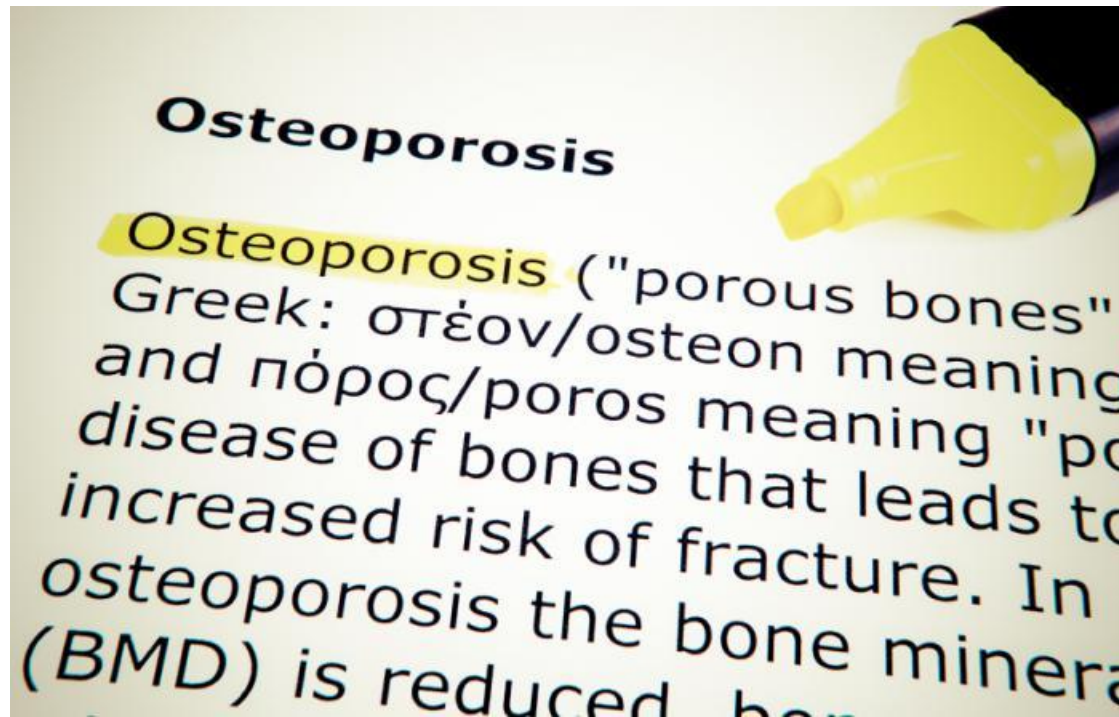
“Access” (leads to) Osteoporosis

Annual Incidence of Common Diseases



Fractures from osteoporosis are more common than heart attack, stroke and breast cancer combined. At least one in three women and one in five men will suffer from an osteoporotic fracture during their lifetime.

Osteoporosis is a disease characterized by low bone mass and deterioration of bone tissue. This leads to increased bone fragility and risk of fracture (broken bones), particularly of the hip, spine, wrist and shoulder. Osteoporosis is often known as “the silent thief” because bone loss occurs without symptoms.



METABOLIC SYNDROME RELATED JOURNALS

- **Diabetology & Metabolic Syndrome**
- **Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy**
- **Metabolic Syndrome and Related Disorders**
- **Journal of Diabetes & Metabolic Disorders**
- **Global Journal of Obesity, Diabetes and Metabolic Syndrome**

METABOLIC SYNDROME RELATED CONFERENCES

- **Keystone Symposia on Molecular and Cellular Biology**
- **Cardiometabolic Health Congress**
- **International Conference on Prehypertension and Cardio Metabolic Syndrome**

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Thank you!
Jim



Electronic Signature

A handwritten signature in black ink, appearing to read "Jed Quinn". The signature is written in a cursive style with a prominent vertical stroke on the left side.