

EAA Andrology Training Centre

Department of Growth and Reproduction
Rigshospitalet, Copenhagen, Denmark

Centre Report

2017



Name and address of Centre:

University Department of Growth and Reproduction
Rigshospitalet, section 5064
Blegdamsvej 9
DK-2100 Copenhagen Denmark

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E-mail, department: vaekst-repro@rh.dk
E-mail, centre director: Niels.Joergensen@regionh.dk

History of Centre

The Department of Growth and Reproduction was formed in 1990 by Professor Niels Skakkebæk, who combined the Laboratory of Reproductive Biology, which had been in existence since 1972, with the Paediatric Endocrinology Unit which moved from Hvidovre Hospital (one of the University Hospitals of Copenhagen). By the end of July 2006 Niels Skakkebæk retired as head of department. Professor Anders Juul took over as head of the department. In 2005, before Niels Skakkebæk retired Dr. Niels Jørgensen chief of the clinical andrological functions of the department and EAA centre director.

The Department of Growth and Reproduction has clinical and research interests in reproductive development, function and disease as well as in growth and its disorders. The department is one of many departments, which are comprised within the Juliane Marie Centre for Children, Women and Reproduction. The other departments include Obstetrics & Gynaecology, the Fertility clinic, Paediatrics, Paediatric Surgery, Neonatology, Ultrasound and Clinical Genetics. The Juliane Marie Centre is one of 8 centres within Rigshospitalet (the National University Hospital).

Since the department was formed in 1990 the department has investigated and treated children, adolescents and adults with one or more of the following diagnoses: growth disorders, hypopituitarism, androgen insensitivity syndrome, congenital genital malformations, congenital adrenal hyperplasia, disturbed pubertal development, Kallman syndrome, Klinefelter syndrome, gynecomastia and testosterone deficiency. The department has long-standing expertise in diagnosing and treating male infertility problems, including post-treatment for testicular cancer. Since 2009 an increasing number of men with gynecomastia have been examined at the department. This change happened after the department managed to show that gynecomastia should be considered as an andrological disease rather than a condition needing primary surgical treatment.

Since the beginning the department has had its own laboratories:

- ***The semen laboratory*** investigates semen samples from men from infertile couples investigated at Rigshospitalet as well as couples treated at private fertility clinics. From January 2016 general practitioners started referring men for semen analysis as part of the initial investigation of infertile couples. Thereby the number of semen samples analysed at the laboratory increased significantly. Additionally, the laboratory examines semen samples from men included in scientific studies.
- ***The histological laboratory*** receives, processes and performs histological evaluation of testicular biopsies (including spermatogenesis assessment, diagnosis of testicular germ cell neoplasia and testicular dysgenesis). In addition, the laboratory contributes to research projects involving immunohistochemistry and *in situ* hy-

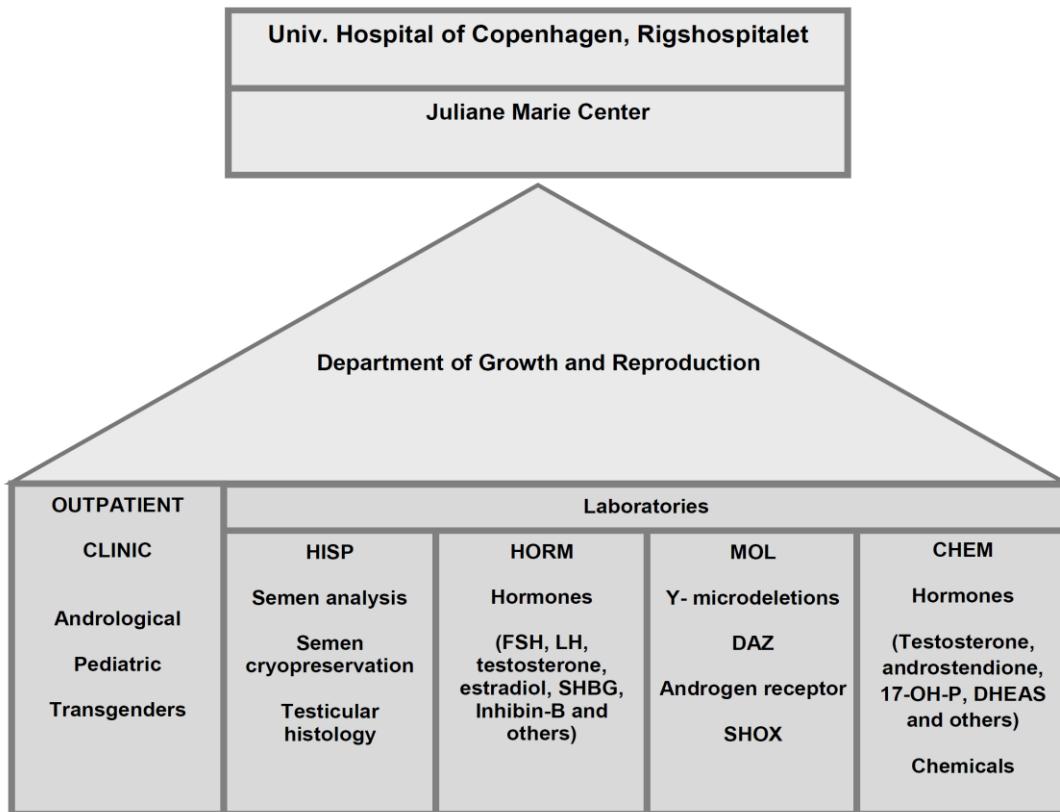
bridisation.

- **The semen bank** stores ejaculates from patients referred before treatment that potentially will impair their future semen quality, mainly cancer treatment or immunosuppressive treatment.
- **The hormone laboratory** measures hormones relevant for clinical and research activities (FSH, LH, Testosterone, SHBG, Estradiol, Inhibin A and B, Growth Hormone, IGF-I (Insulin-like Growth Factor I) and IGF-BP3. Several other hormones are determined as part of research projects.
- **The molecular biology laboratory** mainly performs analysis for Y-chromosome microdeletions and presence of *SRY* as well as determination of various genetic polymorphisms.
- **The laboratory of chemical analysis** is equipped with a high resolution liquid chromatography - tandem mass spectrometry (HPLC-MS/MS) - and performs analysis of phthalates, parabens and alkyl phenols in various biological matrixes such as serum, urine, breast milk and placenta tissue in numerous basic research projects related to male reproduction. By the use of HPLC-MS/MS the laboratory has also recently started to androgens.

In 2012 the department decided to seek accreditation of all its laboratory activities. The first laboratory to become accredited was the hormone laboratory in 2013. Since 2016 all laboratory activities have been certified by the Danish Accreditation Fund (DANAK) according to ISO standard 15189.

The department has been an EAA certified training centre in andrology since 1994.

Organization of Centre



6

Educational activities

Twice annually: One day course in Andrology for medical students

Post graduate courses (since EAA-report 2013):

- September 5-8 2017, Zagreb, Croatia: EAA SUMMER SCHOOL - Testis Histology and Pathology for Clinical Andrologists and Embryologists, in Zagreb, Croatia. Organized jointly by EAA training centres in Zagreb and Copenhagen.
- April 11-13 2016, Malmö, Sweden: Male infertility. Organized jointly by EAA training centres in Malmö and Copenhagen.
- November 24-27 2015, Copenhagen, Denmark: From primordial germ cells to spermatozoa.
- September 17-19 2015, Copenhagen, Denmark: Male Sexology. Organized jointly by EAA training centres in Rome, Stockholm and Copenhagen.
- January 22-24 2014, Copenhagen, Denmark: Andrological Endocrinology. Organized jointly by EAA training centres in Stockholm and Copenhagen.
- January 9-11 2013, Copenhagen, Denmark: Male infertility. Organized jointly by EAA training centres in Malmö and Copenhagen.

PhD courses (since EAA-report 2013):

- November 30-December 2 2016, Copenhagen, Denmark: The hypothalamic-pituitary-gonadal axis throughout life
 - April 27-27 2015, Copenhagen, Denmark: Disorders of Sex Development (DSD)- the roles of genes and the environment
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Clinical activities

The summary statistics of the clinical activities of the andrological section of Department of Growth and Reproduction are shown in section 4.

For all main categories of referred patients (infertile, gynecomastia, testosterone deficiency and semen banking) standardized procedures are used. The principle is that after referral a standardized diagnostic procedure is performed followed by a consultation in the out-patient clinic when the initial results are available. E.g. for infertile men results of two recent semen samples have to be available together with results of blood samples analyzed for reproductive hormone levels and relevant genetics before the first actual visit in the out-patient clinic takes place. At this visit the detailed patient history is obtained, and a physical examination is performed – including ultrasound examination of testicles. The results of the investigations is then discussed with the patient and a conclusion made regarding further work-up or treatment.

Research activities

The department has research activities within pediatric as well as adult andrology besides research within growth disorders.

Focus areas are:

- Normal testicular development and function
 - Early exposures and adverse developmental effects on testicular function
 - Early and current exposures effect on sexual maturation in humans
 - Pubertal development
 - Adult life style and testis function
 - Temporal trends and age-related changes in testis function
 - Testicular function and long-term health
 - Bone-gonadal interaction
 - Improvement of methods of semen analysis
 - Development of non-invasive method(s) for screening for spermatogenesis in azoospermic men
 - Germ cell cancer – clinical and epigenetic aspects
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 E-mail, centre director: Niels.Joergensen@regionh.dk

Type of Centre

University
 University Hospital
 Private Centre

Other (please specify) _____

1a. Director

Niels Jørgensen, MD, PhD, specialist in medical endocrinology and EAA certified clinical andrologist

Academician

Affiliated Member

Clinical Andrologist

1b. Director

Head of department, Anders Juul, MD, Professor, specialist in pediatrics and EAA certified clinical andrologist

Academician

Affiliated Member

Clinical Andrologist

2. Clinical responsible

Niels Jørgensen, MD, PhD, specialist in medical endocrinology and EAA certified clinical andrologist

Academician

Affiliated Member

Clinical Andrologist

3. Present Staff (*Senior Scientists*)

1) Name Lise Aksglæde
Degree MD, PhD
Speciality Clinical Genetics

Academician Affiliated Member Clinical Andrologist

2) Name Peter Christiansen
Degree MD
Speciality Pediatrics (pediatric and adult andrology)

Academician Affiliated Member Clinical Andrologist

3) Name Katharina Main
Degree MD, PhD
Speciality Pediatrics (pediatric andrology)

Academician Affiliated Member Clinical Andrologist

Insert any additional staff below (*if required*)

MD/Biologists/Chemists

1) Name Sheida Anvari Aria
Degree MD
Speciality -
Full time/part time Full time clinical andrology

Academician Affiliated Member Clinical Andrologist

2) Name Martin Blomberg Jensen
Degree MD, PhD
Speciality -
Full time/part time Full time clinical and basic research

Academician Affiliated Member Clinical Andrologist

3) Name Hanne Frederiksen
Degree MSc, PhD
Speciality Chemist
Full time/part time Full time

Academician Affiliated Member Clinical Andrologist

4) Name Trine Holm Johannsen
 Degree MD, PhD
 Speciality Clinical Chemistry
 Full time/part time Full time

Academician Affiliated Member Clinical Andrologist

5) Name Jørgen Holm Petersen
 Degree MSc, PhD
 Speciality Statistician
 Full time/part time Part time

Academician Affiliated Member Clinical Andrologist

6) Name John Nielsen
 Degree MSc
 Speciality Biologist
 Full time/part time Full time

Academician Affiliated Member Clinical Andrologist

7) Name Anne Jørgensen
 Degree MSc, PhD
 Speciality Biologist
 Full time/part time Full time

Academician Affiliated Member Clinical Andrologist

7) Name Kristian Almstrup
 Degree MSc, PhD
 Speciality Biologist
 Full time/part time Full time

Academician Affiliated Member Clinical Andrologist

9) Name Jørgen Christensen
 Degree
 Speciality IT support
 Full time/part time Full time

Academician Affiliated Member Clinical Andrologist

10) Name Niels E. Skakkebæk
Degree Professor, MD
Speciality Pediatrics
Full time/part time _____

Academician Affiliated Member Clinical Andrologist

Insert any additional staff below (if required)

Specialists

1) Name Line Cleemann, MD, pediatrics
2) Name Ann-Margrethe Rønholt Christensen, MD, pediatrics
3) Name Kristian Almstrup, MSc

PhD Students

1) Name Maria Assens (pediatric project)
2) Name Ida Marie Boiesen (andrological project)
3) Name Alexander Busch (pediatric-andrological project)
4) Name Dorte Egeberg (andrological project)
5) Name Lasse Bøllehus Hansen (andrological project)
6) Name Marie L Johansen (pediatric-andrological project)
7) Name Cecilie Melau (andrological project)
8) Name Li Juul Mortensen (andrological project)
9) Name Nina Mørup (andrological project)
10) Name Malte Stær Nissen (andrological project)
11) Name Lærke Priskorn (andrological project)

Nurses

1) Name Dorte Marslev
2) Name Camilla Birch Olsen
3) Name Tanja Rosenberg

Laboratory Technicians

Semen and histology lab

1) Name Mia Romero
2) Name Lene Andersen
3) Name Camilla Campen
4) Name Kirsten Lønberg
5) Name Ana Nielsen
6) Name Käthe Nielsen
7) Name Hahn Phan

8) Name	Nina Schmidt
9) Name	Maiken Simonsen
10) Name	Sabina Sultanova
11) Name	Marie Louise Ulmestål

Hormone and chemical lab

12) Name	Jannie Hennings
13) Name	Stine Ehlern Andersen
14) Name	Yet Christensen
15) Name	Farshid Ghazi
16) Name	Krisine Harrild
17) Name	Mariann Henriksen
18) Name	Ole Nielsen
19) Name	Maiken Probst
20) Name	Irina Safonenko
21) Name	Marianne Seilund

Molecular biology lab

22) Name	Inger Garn
23) Name	Brian Vendelbo Hansen
24) Name	Camilla Tang Thomsen
25) Name	Dijana Maslovaric

Blood sampling

26) Name	Anette Fosgerau
27) Name	Morten Petersen

Administrative Personnel

1) Name	Kathrine Hurtigkarl
2) Name	Tine Michelsen
3) Name	Britt Stricker
4) Name	Tina Tronier
5) Name	Birgitte Havmøller
6) Name	Hanne Lyhne
7) Name	Vibeke Nielsen

4. Clinical Activity

A. Outpatients: Consultations per year in the last 3 years

	2014	2015	2016
New patients	921	1115	1141
Follow-up patients	1903	1562	1447

Referral diagnoses in the last years (%)	2014	2015	2016
Infertility	55	62	57
Erectile dysfunction	<1	<1	<1
Hypogonadotropic Hypogonadism	<2	<2	<2
Klinefelter	<1	<1	<1
Gynaecomastia	30	25	26
Testosterone deficiency	14	10	15
Varicocele	<1	<1	<1
Cryptorchidism	<1	<1	<1
Male sex accessory gland infections	<1	<1	<1
Testicular tumours	<1	<1	<1
Disorders of gender identity	<1	<1	<2
Other	<1	<1	<1

B. Ultrasound (testis, penile, prostate), approximately *

	2014	2015	2016
Total	994	1063	1020
Controls (estimated)	50	50	50

* performed at the Department of Growth and Reproduction

C. Andrological surgery procedures

	2014	2015	2016
Testicular biopsies	0	0	0
Varicocele ligation	0	0	0
Prostate biopsies	0	0	0
BPH	0	0	0
Prostate cancer	0	0	0
Vasectomy	0	0	0
Vaso-vasostomy	0	0	0
Other	0	0	0

14

5. A. Andrology laboratory activity

	2014	2015	2016
Semen analyses	1671	1465	3966
Sperm antibodies	434	604	491
Seminal markers (fructose)	46	62	96

5. B. Andrology laboratory activity

Sperm banking donors Yes No

Sperm banking cancer patients Yes No

<i>If yes:</i>			
	2014	2015	2016
Number of samples/patients	547/238	482/239	536/282

5. C. Histopathological evaluation of biopsies Yes No

5. D. Reproductive Hormones Assays Yes No

If yes please specify type of assays and number of samples

	2014	2015	2016
FSH (Immunofluorometric)	7715	9800	5378
LH (Immunofluorometric)	9664	11704	7070
Testosterone (RIA)	7552	8697	5874
SHBG (Immunofluorometric assay)	8713	10338	6046
Estradiol (RIA)	7970	9897	5631
Inhibin-B (ELISA)	9080	9562	6402
Androgens (LC-MS/MS) *	1142	1203	1444
Total	51836	61201	37845

*: Includes testosterone (and calculated free-testosterone), androstendione, 17-OH-progesterone and DHEAS

5. E. Y chromosome microdeletions according to EAA/EMQN guidelines Yes No

<i>If yes</i>			
	2014	2015	2016
Number of samples	578	535	697

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Participation to the EAA quality control scheme? Yes No

If no, specify if available in another lab of the same hospital Yes No

Blood karyotyping Yes No

If no, specify if available in another lab of the same hospital Yes No

Other genetic tests (please specify)

AR-Q-PCR

DAZ-copies

SHOX

6. Collaborations with other Clinical Units of the University/Hospital

IVF Unit	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Urology Clinic	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Endocrine Clinic	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Genetics Lab/Unit	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Paediatric Unit	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Central Hospital Laboratory	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Private Centres	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

7. Clinical teaching activity

	Number
A: Trainees in the last five years	5
B: Trainees who passed EAA-ESAU\exam for Clinical Andrologist in the last 5 yrs	5
C: Trainees working in the centre preparing to pass the EAA-ESAU examination	1
D: PhD Students (achieving their PhD-degree 2012-16)	10
E: Medical Students	Approx 10
F: Other students (MSc)	Approx 10

Re: D

1. Tinggaard, J (2016): *Body composition in normal weight children Methodological aspects and early determinants* (Pediatric).
2. Olesen, I (2016): *Comorbidities and long term testicular function in men with severely impaired semen quality* (Andrological).
3. Mieritz, MG (2016): *Gynecomastia in Danish boys and men: The Association to Endogenous Hormones, Growth and Body Composition in the Development of Gynaecomastia* (Andrological).
4. Lassen, TH (2014): *Human phenol exposure: Temporal variability and associations with birth outcomes, anogenital distance and adult male reproductive health* (Andrological).
5. Hagen, C (2014): *Ovarian function in healthy girls and Turner Syndrome patients: with special focus on anti-Müllerian hormone* (Pediatric).
6. Jensen, MB (2014): *Vitamin D and male reproduction* (Andrological).
7. Mouritsen, AK (2013): *Adrenal Function in Danish Children: Importance of Environmental and Genetic Factors* (Pediatric)
8. Dalgaard, MD (2013): *Genetic variability in the pathogenesis of Testicular Dysgenesis Syndrome* (Andrological).
9. Veje, CW (2012): *Prenatal exposure to modern pesticides and possible effects on childhood growth and reproductive development* (Pediatric).
10. Joensen, UN (2012): *Environmental Endocrine Disruptors and Adult Testicular Function: Epidemiological studies of exposure and susceptibility to phthalates and perfluorinated chemicals, and the associations to reproductive hormones and semen quality in Danish men from the general population* (Andrological)

8. Formal Andrology teaching programYes No *If yes:* specify duration (years/months):Years Months **9. Research Activity** (maximum 1 page)

Research topics have been listed page 7.

10 selected publications 2012-16:

1. Skakkebaek, NE, Rajpert-De Meyts, E, Buck Louis, GM, Toppari, J, Andersson, A-M, Eisenberg, ML, Jensen, TK, Jørgensen, N, Swan, SH, Sapra, KJ, Ziebe, S, Priskorn, L & Juul, A 2016, 'Male Reproductive Disorders and Fertility Trends: Influences of Environment and Genetic Susceptibility' *Physiological Reviews*, vol 96, nr. 1, s. 55-97. DOI: 10.1152/physrev.00017.2015 (**IF 27.3**)
2. Rajpert-De Meyts, E, McGlynn, KA, Okamoto, K, Jewett, MAS & Bokemeyer, C 2016, 'Testicular germ cell tumours' *Lancet*, vol 387, nr. 10029, s. 1762-1774. DOI: doi:10.1016/S0140-6736(15)00991-5 (**IF 47.8**)
3. Nordkap, L, Jensen, TK, Hansen, ÅM, Lassen, TH, Bang, AK, Joensen, UN, Blomberg Jensen, M, Skakkebæk, NE & Jørgensen, N 2016, 'Psychological stress and testicular function: a cross-sectional study of 1,215 Danish men' *Fertility and sterility*, vol 105, nr. 1, s. 174-187.e2. DOI: 10.1016/j.fertnstert.2015.09.016 (**IF 4.4**)
4. Jørgensen, N, Joensen, UN, Toppari, J, Punab, M, Erenpreiss, J, Zilaitiene, B, Paasch, U, Salzbrunn, A, Fernandez, MF, Virtanen, HE, Matulevicius, V, Olea, N, Jensen, TK, Petersen, JH, Skakkebæk, NE & Andersson, A-M 2016, 'Compensated reduction in Leydig cell function is associated with lower semen quality variables: a study of 8182 European young men' *Human reproduction (Oxford, England)*, vol 31, nr. 5, s. 947-57. DOI: 10.1093/humrep/dew021 (**IF 5.0**)
5. Damsgaard, J, Joensen, UN, Carlsen, E, Erenpreiss, J, Blomberg Jensen, M, Matulevicius, V, Zilaitiene, B, Olesen, IA, Perheentupa, A, Punab, M, Salzbrunn, A, Toppari, J, Virtanen, HE, Juul, A, Skakkebæk, NE & Jørgensen, N 2016, 'Varicocele Is Associated with Impaired Semen Quality and Reproductive Hormone Levels: A Study of 7035 Healthy Young Men from Six European Countries' *European Urology*, vol 70, nr. 6, s. 1019-1029. DOI: 10.1016/j.eururo.2016.06.044 (**IF 16.3**)
6. Jørgensen, A, Nielsen, JE, Perlman, S, Lundvall, L, Mitchell, RT, Juul, A & Rajpert-De Meyts, E 2015, 'Ex vivo culture of human fetal gonads: manipulation of meiosis signalling by retinoic acid treatment disrupts testis development' *Human reproduction (Oxford, England)*, vol 30, nr. 10, s. 2351-63. DOI: 10.1093/humrep/dev194 (**IF 5.0**)
7. Holmboe, SA, Vradi, E, Kold Jensen, T, Linneberg, A, Husemoen, LLN, Scheike, T, Skakkebæk, NE, Juul, A & Andersson, A-M 2015, 'The association of reproductive hormone levels and all-cause, cancer and cardiovascular disease mortality in men' *The Journal of clinical endocrinology and metabolism*, vol 100, nr. 12, s. 4472-80. DOI: 10.1210/jc.2015-2460 (**IF 5.5**)
8. Lassen, TH, Frederiksen, H, Jensen, TK, Petersen, JH, Joensen, UN, Main, KM, Skakkebaek, NE, Juul, A, Jørgensen, N & Andersson, A-M 2014, 'Urinary bisphenol A levels in young men: association with reproductive hormones and semen quality' *Environmental Health Perspectives*, vol 122, nr. 5, s. 478-84. DOI: 10.1289/ehp.1307309 (**IF 9.8**)
9. Joensen, UN, Jørgensen, N, Meldgaard, M, Frederiksen, H, Andersson, A-M, Menné, T, Johansen, JD, Carlsen, BC, Stender, S, Szecsi, PB, Skakkebaek, NE, Rajpert-De Meyts, E & Thyssen, JP 2014, 'Associations of Filaggrin Gene Loss-of-Function Variants with Urinary Phthalate Metabolites and Testicular Function in Young Danish Men' *Environmental Health Perspectives*, vol 122, nr. 4, s. 345-350. DOI: 10.1289/ehp.1306720 (**IF 9.8**)
10. Rud, CN, Daugaard, G, Rajpert-De Meyts, E, Skakkebæk, NE, Petersen, JH & Jørgensen, N 2013, 'Sperm Concentration, Testicular Volume and Age Predict Risk of Carcinoma In Situ in Contrala-

teral Testis of Men with Testicular Germ Cell Cancer' *Journal of Urology*, vol 190, nr. 6, s. 2074-2080. DOI: 10.1016/j.juro.2013.06.023 (**IF 5.2**)

10. Research Funding

Please specify the amount of available funds in the last 3 years and their source (Government, European Union, University, Local Government, Pharmaceutical Industries, Banks, Foundations....)

Year	For each year approximately 3 mill. euros
Total amount (€)	
Funding	
Source(s)	

Insert any additional funding below if required

Full list of Publications, Department of Growth and Reproduction 2012-16:

2016

11. Ulbright, TM, Amin, MB, Balzer, B, Berney, DM, Epstein, JI, Guo, C, Idrees, MT, Looijenga, LHJ, Paner, G, Rajpert-De Meyts, E, Skakkebæk, NE, Tikoo, SK, Yilmaz, A & Oosterhuis, JW 2016, WHO Classification of Tumours of the Urinary System and Male Genital Organs. i H Moch, PA Humphrey, TM Ulbright & VE Reuter (red), *WHO Classification of Tumours of the Urinary System and Male Genital Organs.*.. 4 udg, vol. 8, s. 189-226.
12. Rogol, AD & Skakkebæk, NE 2016, 'Sperm retrieval in adolescent males with Klinefelter syndrome: medical and ethical issues' *Translational Pediatrics*, vol 5, nr. 2, s. 104-6. DOI: 10.21037/tp.2016.04.05
13. Wohlfart-Veje, C, Korsholm Mouritsen, A, Hagen, CP, Tinggaard, J, Grunnet Mieritz, M, Boas, M, Holm Petersen, J, Skakkebæk, NE & Main, KM 2016, 'Pubertal onset in boys and girls is influenced by pubertal timing of both parents' *The Journal of clinical endocrinology and metabolism*, vol 101, nr. 7, s. 2667-2674. DOI: 10.1210/jc.2016-1073
14. Varimo, T, Hero, M, Laitinen, E-M, Miettinen, PJ, Tommiska, J, Känsäkoski, J, Juul, A & Raivio, T 2016, 'Childhood growth in boys with congenital hypogonadotropic hypogonadism' *Pediatric Research*, vol 79, nr. 5, s. 705-9. DOI: 10.1038/pr.2015.278
15. Upners, EN & Juul, A 2016, 'Evaluation and phenotypic characteristics of 293 Danish girls with tall stature: effects of oral administration of natural 17 β -estradiol' *Pediatric Research*, vol 80, nr. 5, s. 693-701. DOI: 10.1038/pr.2016.128
16. Trasande, L, Zoeller, RT, Hass, U, Kortenkamp, A, Grandjean, P, Myers, JP, DiGangi, J, Hunt, PM, Rudel, R, Sathyarayana, S, Bellanger, M, Hauser, R, Legler, J, Skakkebaek, NE & Heindel, JJ 2016, 'Burden of disease and costs of exposure to endocrine disrupting chemicals in the European Union: an updated analysis' *Andrology*, vol 4, nr. 4, s. 565-72. DOI: 10.1111/andr.12178
17. Tinggaard, J, Wohlfart-Veje, C, Husby, S, Christiansen, L, Skakkebæk, NE, Jensen, TK, Grandjean, P, Main, KM & Andersen, HR 2016, 'Prenatal pesticide exposure and PON1 genotype is associated with adolescent body fat distribution evaluated by dual X-ray absorptiometry (DXA)' *Andrology*, vol 4, nr. 4, s. 735-44. DOI: 10.1111/andr.12194
18. Thankamony, A, Jensen, RB, O'Connell, SM, Day, F, Kirk, J, Donaldson, M, Ivarsson, S-A, Söder, O, Roche, E, Hoey, H, Ong, KK, Dunger, DB & Juul, A 2016, 'Adiposity in children born small for gestational age is associated with β -cell function, genetic variants for insulin resistance and response to growth hormone treatment' *The Journal of clinical endocrinology and metabolism*, vol 101, nr. 1, s. 131-42. DOI: 10.1210/jc.2015-3019
19. Teumer, A, Qi, Q, Nethander, M, Aschard, H, Bandinelli, S, Beekman, M, Berndt, SI, Bidlingmaier, M, Broer, L, Cappola, A, Ceda, GP, Chanock, S, Chen, M-H, Chen, TC, Chen, Y-DI, Chung, J, Del Greco Miglianico, F, Eriksson, J, Ferrucci, L, Friedrich, N, Gnewuch, C, Goodarzi, MO, Grarup, N, Guo, T, Hammer, E, Hayes, RB, Hicks, AA, Hofman, A, Houwing-Duistermaat, JJ, Hu, F, Hunter, DJ, Husemoen, LL, Isaacs, A, Jacobs, KB, Janssen, JAMJL, Jansson, J-O, Jehmlich, N, Johnson, S, Juul, A, Karlsson, M, Kilpelainen, TO, Kovacs, P, Kraft, P, Li, C, Linneberg, A, Liu, Y, Loos, RJF, Lorentzon, M, Lu, Y, Maggio, M, Magi, R, Meigs, J, Mellström, D, Nauck, M, Newman, AB, Pollak, MN, Pramstaller, PP, Prokopenko, I, Psaty, BM, Reincke, M, Rimm, EB, Rotter, JI, Saint Pierre, A, Schurmann, C, Seshadri, S, Sjögren, K, Slagboom, PE, Strickler, HD, Stumvoll, M, Suh, Y, Sun, Q, Zhang, C, Svensson, J, Tanaka, T, Tare, A, Tönjes, A, Uh, H-W, van Duijn, CM, van Heemst, D, Vandenput, L, Vasan, RS, Völker, U, Willems, SM, Ohlsson, C, Wallaschofski, H, Kaplan, RC & CHARGE Longevity Working Group 2016, 'Genomewide meta-analysis identifies loci associated with IGF-I and IGFBP-3 levels with impact on age-related traits' *Aging Cell*, vol 15, nr. 5, s. 811-24. DOI: 10.1111/ace.12490
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