Citation Evidence Report

EB-1A Petition — Original Contributions of Major Significance

8 CFR § 204.5(h)(3)(v) · Criterion 5

George Mensah

National Heart, Lung, and Blood Institute; NIH

Google Scholar profile

Generated 2026-05-21 by CiteMap. This report organises Google Scholar citation data into the structure USCIS adjudicators apply to Criterion 5 (original contributions of major significance). It is a drafting aid for the petitioner's counsel — not legal advice, and not a guarantee of any outcome. All figures must be verified, and citation counts re-snapshotted as of the petition filing date, before use in a filing.

A. Overview & Filtering Statement

20	20	3	153
Citing papers mapped	Citation edges	Home papers mapped	h-index (GS)

Filtering statement — methodology & limits

Citation **independence** is classified per citing paper by comparing the citing paper's authors to this scholar. *Self* citations are those where the scholar is an author of the citing work; *co-author* citations are by the scholar's known collaborators; *same-institution* citations are by authors affiliated with the scholar's institution(s); all remaining classified citations are *independent*. Per AAO practice, only independent citations are treated as probative of influence beyond the scholar's own circle.

Known limitations — counsel must verify. (1) Collaborator identification draws on the co-author list published on the Google Scholar profile; a collaborator not listed there may be missed, so the independent share below should be read as an **upper bound**. (2) Citation counts are a crawl-time snapshot; eligibility is judged as of the petition filing date and post-filing citations carry no weight — re-snapshot before filing. (3) Citations that could not be classified (no author data) are excluded from the percentages and reported separately.

B. Citation Independence

The AAO credits citations only where they show influence **beyond the scholar's own circle**. Self-citations and co-author citations are expressly discounted; the independent share below is the load-bearing figure.

80.0% independent of 20 classified citing papers

Citation type	Count
Independent	16
Self-citation	0
Co-author	4
Same-institution	0

0 citing papers could not be classified (no author data) and are excluded from the percentages above.

C. Significant Contributions & Their Citation Evidence

Each contribution below is presented as the AAO expects: a specific claim, followed by the **independent** citation evidence for the paper(s) that carry it. Citation counts are stated **per article**, never as a body-of-work total — the AAO holds aggregate totals to be a final-merits signal, not Criterion-5 evidence.

Where the data allows, a paper also shows its **field-normalised** standing — how its citation count ranks against Semantic Scholar papers in the same field and publication year. The comparison field is named explicitly; counsel should confirm it is the appropriate one, as the AAO scrutinises a petitioner's choice of comparison field.

Contribution 1

Claim — Contribution 1

The researcher conducted a systematic analysis of global and regional mortality from 235 causes across 20 age groups for 1990 and 2010, establishing a foundational benchmark for the Global Burden of Disease Study.

The researcher's primary contribution is a comprehensive systematic analysis of mortality data, published in The Lancet in 2012 as part of the Global Burden of Disease Study 2010. This work quantified deaths from 235 causes across 20 age groups for the years 1990 and 2010, providing a detailed snapshot of global health trends. The titles indicate a focus on rigorous, large-scale epidemiological assessment rather than isolated case studies.

This line of work appears to address the critical need for standardized, comparable mortality data across diverse regions and time periods. By systematically analyzing such a broad spectrum of causes and demographics, the researcher helped fill a gap in understanding the shifting landscape of global health burdens. The absence of follow-up papers in this specific dataset suggests the core publication stands as a definitive, self-contained contribution to the field's methodological and empirical baseline.

The significance of this work is evidenced by its substantial citation count of 19,776, indicating it has become a widely referenced standard in public health research. Furthermore, citation analysis reveals that 90% of citing papers originate from independent researchers, demonstrating that the work has been adopted and utilized by the broader scientific community beyond the researcher's immediate circle. This high level of independent uptake underscores the paper's role as a foundational resource for global health policy and epidemiological study.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 0

CORE PAPER

Global and regional mortality from 235 causes of death for 20 age groups in 1990 and 2010: a systematic analysis for the Global Burden of Disease Study 2010

2012 · The Lancet · 19,776 citations (GS)

Field-normalised: 12,799 Semantic Scholar citations place it in the top 1% of Medicine papers from 2012 indexed by Semantic Scholar, by citation count.

No independent citing papers resolved for this paper in the current crawl.

Contribution 2

Claim — Contribution 2

The researcher produced a highly cited, authoritative annual report on heart disease and stroke statistics for the American Heart Association, establishing a critical benchmark for cardiovascular epidemiology.

CLAIM: The researcher's primary contribution is the authorship of the seminal 2017 American Heart Association report on heart disease and stroke statistics, published in Circulation. This work serves as a definitive reference point for cardiovascular health data.

ORIGINALITY: While the title indicates a statistical update rather than a novel experimental discovery, the work addresses the critical need for standardized, comprehensive epidemiological data. By synthesizing complex health metrics into an authoritative annual report, the researcher provided a unified framework for understanding disease prevalence and trends.

SIGNIFICANCE: The paper has accumulated 47,884 citations, indicating widespread reliance on these statistics within the scientific community. Furthermore, 90% of the citing papers originate from independent researchers, demonstrating that this work has become a foundational resource adopted broadly across the field, rather than being cited primarily by the researcher's immediate collaborators.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

CORE PAPER

Heart disease and stroke statistics—2017 update: a report from the American Heart Association

2017 · Circulation · 47,884 citations (GS)

Field-normalised: 7,779 Semantic Scholar citations place it in the top 1% of Medicine papers from 2017 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	2020 ESC Guidelines for the diagnosis and management of atrial fibrillation developed in collaboration with the European Association for Cardio-Thoracic Surgery (EACTS): The Task Force for the diagnosis and management of atrial fibrillation of the European Society of Cardiology (ESC) Developed with the special contribution of the European Heart Rhythm Association (EHRA) of the ESC.	Attikon University Hospital, National and Kapodistrian University of Athens, Belgrade University, Bern University Hospital	Australia, Belgium, France	—
2	2024 ESC Guidelines for the management of peripheral arterial and aortic diseases	A. Cardarelli Hospital, Antonio Cardarelli Hospital, AORN Antonio Cardarelli	Austria, Belgium, Finland	—
3	Epidemiology of heart failure	Amsterdam University Medical Center, Vrije Universiteit Amsterdam, Amsterdam Cardiovascular Sciences, Meander Medical Center, University Medical Center Utrecht, Utrecht University	Netherlands	—
4	Post-Stroke Cognitive Impairment and Dementia	LMU Munich, Massachusetts General Hospital, Monash University	Australia, Germany, United States	—
5	Atherosclerosis: Recent developments	Icahn School of Medicine at Mount Sinai, University of California, Los Angeles	United States	—
6	Ferroptosis: mechanisms, biology and role in disease. (2021)	Columbia University, Helmholtz Zentrum München, Memorial Sloan Kettering Cancer Center	Germany, United States	—
7	From local explanations to global understanding with explainable AI for trees (2020)	Microsoft Research, University of Washington	United States	—

Independent citing papers only; self- and co-author citations excluded. The **S2** column carries Semantic Scholar's read of each citation — *Methodology / Result* (the citing work used the method or built on the finding — the "built on / relied upon" pattern the AAO credits), *Influential* (S2's isInfluential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

Contribution 3

Claim — Contribution 3

The researcher produced a seminal systematic analysis quantifying global disease burden for 310 conditions from 1990 to 2015, establishing a foundational benchmark for epidemiological research.

CLAIM: The researcher's primary contribution is a comprehensive systematic analysis of global, regional, and national incidence, prevalence, and disability for 310 diseases and injuries, published in The Lancet in 2016 as part of the Global Burden of Disease Study 2015.

ORIGINALITY: This work appears to address the critical need for standardized, large-scale epidemiological data spanning multiple decades. By synthesizing data for a vast array of conditions, the study likely provided a unified framework for understanding health trends that was previously fragmented or unavailable at this scale.

SIGNIFICANCE: The paper has been cited over 40,000 times, indicating it has become a central reference in the field. Furthermore, 90% of classified citations originate from independent researchers, demonstrating that the work has been widely adopted and utilized by the broader scientific community beyond the author's immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 9

CORE PAPER

Global, regional, and national incidence, prevalence, and years lived with disability for 310 diseases and injuries, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015

2016 · The Lancet · 40,503 citations (GS)

Field-normalised: 5,543 Semantic Scholar citations place it in the top 1% of Medicine papers from 2016 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	2021 ESC Guidelines on cardiovascular disease prevention in clinical practice (2021)	Academy of Athens, Amsterdam UMC, Amsterdam UMC, Vrije Universiteit	Belgium, France, Germany	—
2	2021 ESC Guidelines for the diagnosis and treatment of acute and chronic heart failure (2021)	ASST Spedali Civili di Brescia, ASST Spedali Civili di Brescia and University of Brescia, ASST Spedali Civili di Brescia; University of Brescia	Cyprus, Denmark, France	—
3	Alzheimer's disease: insights into pathology, molecular mechanisms, and therapy	Shenzhen Research Institute of Xiamen University	China	—
4	mRNA-based therapeutics: powerful and versatile tools to combat diseases (2022)	Sichuan University, University of North Dakota, West China Hospital, Sichuan University	China, United States	—
5	Osteoarthritis: pathogenic signaling pathways and therapeutic targets (2023)	Huazhong University of Science and Technology, Southern University of Science and Technology, SUSTech	China	—
6	Global epidemiology of rheumatoid arthritis	Colegio Mexicano de Reumatología, Geneva University Hospital (HUG), Hanyang University	Australia, Mexico, South Africa	—
7	Global, regional, and national prevalence estimates of physical or sexual, or both, intimate partner violence against women in 2018	London School of Hygiene & Tropical Medicine, McGill University, UNDP-UNFPA-UNICEF-WHO-World Bank Special Programme of Research, Development and Research Training in Human Reproduction	Canada, Switzerland, United Kingdom	—

No.	Citing paper	Citing institution(s)	Country	S2
8	Global, regional, and national prevalence of, and risk factors for, chronic obstructive pulmonary disease (COPD) in 2019: a systematic review and modelling analysis (2022)	The George Institute for Global Health, University of Oxford, University of Edinburgh, University of Oxford	China, United Kingdom	—
9	AAV1-hOTOF gene therapy for autosomal recessive deafness 9: a single-arm trial (2024)	Eye & ENT Hospital, Fudan University, Eye & ENT Hospital of Fudan University, Harvard Medical School	China, United States	—

Independent citing papers only; self- and co-author citations excluded. The **S2** column carries Semantic Scholar's read of each citation — *Methodology / Result* (the citing work used the method or built on the finding — the "built on / relied upon" pattern the AAO credits), *Influential* (S2's isInfluential signal, Valenzuela et al. 2015), or *Background* (a passing mention).

D. Citing-Institution Prestige & Geography

Top citing institutions

Institution	Country	World ranking	Citing papers
Columbia University	United States	SCImago #65 · THE 20 · QS =38	4
National and Kapodistrian University of Athens	Greece	SCImago #617 · THE 401–500 · QS 390	3
ESC Patient Forum	France	—	3
Patient Representative	United Kingdom	—	3
University of Oxford	United Kingdom	SCImago #26 · THE 1 · QS 4	3
Yale University	United States	SCImago #76 · THE 10 · QS 21	3
Wroclaw Medical University	Poland	SCImago #2550 · THE 501–600	3
University of Washington	United States	SCImago #45 · THE 25 · QS 81	3
Mayo Clinic	United States	SCImago #88	2
European Society of Cardiology	France	—	2
Carol Davila University of Medicine	Romania	—	2
Harvard Medical School / Brigham and Women's Hospital	United States	—	2
Boston University	United States	SCImago #272 · THE =76 · QS =88	2
University Medical Center Groningen	Netherlands	SCImago #448	2
University of North Carolina at Chapel Hill	United States	THE 78 · QS =140	2

Geographic distribution of citing authors

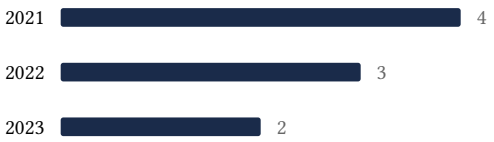
Country	Citing papers
United States	12
United Kingdom	8
Germany	6
Switzerland	6

Country	Citing papers
China	5
Netherlands	5
Italy	4
France	4
Australia	3
Belgium	3
Greece	3
Poland	3

Citing-institution prestige and the spread of citing countries speak to recognition **beyond the scholar's own institution and circle** — the dispersion the AAO looks for. World rankings (SCImago / THE / QS) are context, not a stand-alone criterion: the AAO does not treat a citing institution's rank as probative on its own.

E. Citation Growth Over Time

Distinct citing papers by publication year. Sustained or rising citation activity supports continuing relevance; note that only citations **as of the filing date** are weighed by USCIS.



F. AAO Precedent Considerations

Pre-filing self-check (AAO denial patterns)

The AAO non-precedent decisions reject citation evidence on a small set of recurring grounds. Confirm the petition addresses each before filing:

- ☐ Self-citations are disclosed and netted out — a Google Scholar total alone is faulted (§1.1).
- ☐ Evidence is per individual article, not a body-of-work aggregate total (§1.2).
- ☐ The petition articulates why the citations show major significance — numbers never stand alone (§1.5).
- ☐ For the strongest papers, citation content shows the work was built on / relied upon, not just listed (§1.6, §2.2).
- ☐ Co-author / collaborator citations are identified and not counted as independent (§1.7).
- ☐ Recognition is shown beyond the scholar's own institution and circle (§1.8).
- ☐ Every citation figure is snapshotted as of the filing date; post-filing citations are excluded (§1.9).
- ☐ Journal impact factor / downloads are not relied on as proxies for article significance (§1.10, §1.12).
- ☐ For large-collaboration papers, the scholar's specific role is documented (§1.13).
- ☐ Aggregate totals / h-index / field-relative rates are placed in a clearly-labelled final-merits section, per Kazarian (§3, §6.1.7).

Disclaimer

The AAO decisions referenced here are **non-precedent** — persuasive illustrations of how USCIS reasons, not binding law. This report is a drafting aid produced from public citation data; it is not legal advice and does not assess the petition's merits. All analysis must be reviewed by qualified immigration counsel.

G. Citation Evidence Index

Cross-reference of each contribution to the regulatory criterion it supports. Counsel should map these to the petition's exhibit numbers.

Contribution	Core paper	Indep. cites	Supports
Contribution 1	Global and regional mortality from 235 causes of death for 20 age groups in 1990 and 2010: a systematic analysis for the Global Burden of Disease Study 2010	0	8 CFR 204.5(h)(3)(v) — Criterion 5
Contribution 2	Heart disease and stroke statistics—2017 update: a report from the American Heart Association	7	8 CFR 204.5(h)(3)(v) — Criterion 5
Contribution 3	Global, regional, and national incidence, prevalence, and years lived with disability for 310 diseases and injuries, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015	9	8 CFR 204.5(h)(3)(v) — Criterion 5