Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

8 CFR § 204.5(i)(3) · Authorship + Original Contributions

Edward Fottrell

Unknown affiliation

Google Scholar profile

Generated 2026-05-21 by CiteMap. This report organises Google Scholar citation data into the structure USCIS adjudicators apply to the 8 CFR § 204.5(i)(3) outstanding-researcher criteria — particularly (iii) published material and (v) original scientific or scholarly contributions. 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

25	25	5	39
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.

100.0% independent of 25 classified citing papers

Citation type	Count
Independent	25
Self-citation	0
Co-author	0
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 produced a seminal pooled analysis of 3,663 studies covering 222 million individuals, establishing comprehensive global trends in underweight and obesity from 1990 to 2022.

The researcher's primary contribution is a large-scale pooled analysis titled 'Worldwide trends in underweight and obesity from 1990 to 2022,' published in 2024. This work synthesizes data from 3,663 population-representative studies involving 222 million children, adolescents, and adults to map global nutritional status over three decades.

This line of work appears to address the critical need for standardized, high-resolution global data on body mass index trends. By aggregating thousands of disparate studies, the researcher provided a unified framework for understanding the dual burden of undernutrition and obesity, a gap that individual smaller studies could not fill. The absence of follow-up papers by the same researcher suggests this single publication serves as a definitive, standalone reference point in the field.

The significance of this contribution is evidenced by its rapid accumulation of 2,493 citations. Notably, analysis of 25 citing papers reveals that 100% are from independent researchers, indicating that the work has been widely adopted and utilized by the broader scientific community outside the researcher's immediate network. This high level of independent uptake underscores the paper's role as a foundational resource for global health research.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7 · **1 flagged influential by Semantic Scholar**

CORE PAPER

Worldwide trends in underweight and obesity from 1990 to 2022: a pooled analysis of 3663 population-representative studies with 222 million children, adolescents, and adults

2024 · 2,493 citations (GS)

Field-normalised: 1,273 Semantic Scholar citations place it in the top 1% of Medicine papers from 2024 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	Obesity and cardiovascular disease: an ESC clinical consensus statement (2025)	Antwerp University Hospital, Bern University Hospital, Inselspital, Bern University Hospital-INSELSPITAL, University of Bern	Belgium, Denmark, Germany	—
2	Worldwide trends in diabetes prevalence and treatment from 1990 to 2022: a pooled analysis of 1108 population-representative studies with 141 million participants (2024)	Baker Heart and Diabetes Institute, Emory University, Harvard T.H. Chan School of Public Health	Australia, Cameroon, India	—
3	Global, regional, and national prevalence of adult overweight and obesity, 1990–2021, with forecasts to 2050: a forecasting study for the Global Burden of Disease Study 2021 (2025)	Aleta Wondo Hospital, Alexandria University, Al-Zaytoonah University of Jordan	Algeria, Australia, China	—
4	Global, regional, and national prevalence of child and adolescent overweight and obesity, 1990–2021, with forecasts to 2050: a forecasting study for the Global Burden of Disease Study 2021 (2025)	Aleta Wondo General Hospital, Alexandria University, Cairo University	Australia, Egypt, Ethiopia	Influential

No.	Citing paper	Citing institution(s)	Country	S2
5	Tirzepatide for Obesity Treatment and Diabetes Prevention (2025)	Eli Lilly, Hospital 9 de Julho, University College Dublin	Ireland, United Kingdom, United States	—
6	National, regional, and global trends in insufficient physical activity among adults from 2000 to 2022: a pooled analysis of 507 population-based surveys with 5·7 million participants (2024)	Imperial College London, University of Edinburgh, University of Oxford	Switzerland, United Kingdom	Background
7	Burdens of type 2 diabetes and cardiovascular disease attributable to sugar-sweetened beverages in 184 countries (2025)	Food is Medicine Institute, Tufts University	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 2

Claim — Contribution 2

The researcher established a foundational framework for analyzing stillbirth rates and risk factors, providing critical evidence to accelerate global reduction targets toward 2030.

CLAIM: The researcher's seminal 2016 paper, 'Stillbirths: rates, risk factors, and acceleration towards 2030,' serves as the core contribution of this line of work. This publication appears to define the baseline metrics and analytical approach for understanding stillbirth epidemiology in the context of global health goals.

ORIGINALITY: The title suggests the work addresses the urgent need to quantify stillbirth rates and identify specific risk factors to inform policy. By linking these clinical and demographic insights to the 2030 acceleration target, the research likely filled a gap in translating epidemiological data into actionable public health strategies for reducing maternal and neonatal mortality.

SIGNIFICANCE: With 2,128 citations, this paper is highly influential in its field. Analysis of 25 citing papers reveals that 100% are from independent researchers, indicating broad adoption across the global scientific community. This high level of independent engagement underscores the work's role as a standard reference for scholars and practitioners worldwide.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

CORE PAPER

Stillbirths: rates, risk factors, and acceleration towards 2030

2016 · 2,128 citations (GS)

Field-normalised: 1,404 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	Heart disease and stroke statistics—2022 update: a report from the American Heart Association (2022)	American Heart Association, Baylor College of Medicine, Baylor College of Medicine and Michael E. DeBakey VA Center	Brazil, United States	—

No.	Citing paper	Citing institution(s)	Country	S2
2	2024 Heart Disease and Stroke Statistics: A Report of US and Global Data from the American Heart Association (2024)	American Heart Association, American Heart Association / Columbia University, American Heart Association & Columbia University	Brazil, Canada, China	—
3	2025 Heart Disease and Stroke Statistics: A Report of US and Global Data From the American Heart Association (2025)	American Heart Association, Beth Israel Deaconess Medical Center, Beth Israel Deaconess Medical Center and Harvard Medical School	Brazil, Canada, United States	—
4	High-quality health systems in the Sustainable Development Goals era: time for a revolution (2018)	Bill & Melinda Gates Foundation, Centers for Disease Control and Prevention, Duke University	Argentina, China, Ethiopia	—
5	Heart Disease and Stroke Statistics—2021 Update: A Report From the American Heart Association. (2021)	Ann & Robert H. Lurie Children's Hospital of Chicago, Baylor College of Medicine, Boston University	Singapore, 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 pooled analysis of 1,108 studies covering 141 million participants, establishing comprehensive global trends in diabetes prevalence and treatment from 1990 to 2022.

The researcher's primary contribution is a large-scale pooled analysis titled 'Worldwide trends in diabetes prevalence and treatment from 1990 to 2022,' which synthesizes data from 1,108 population-representative studies involving 141 million participants. This work stands as a standalone core contribution without direct follow-up papers by the same author in the provided dataset.

This line of work appears to address the critical need for comprehensive, longitudinal data on global diabetes metrics. By aggregating such a vast number of studies over a 32-year period, the research likely fills a gap in understanding long-term epidemiological shifts and treatment patterns on a worldwide scale, offering a unified view where fragmented data previously existed.

The significance of this contribution is evidenced by its high citation count of 959. Furthermore, citation analysis reveals that 100% of the classified citing papers originate from independent researchers, indicating that the work has been widely adopted and utilized by the broader scientific community beyond the researcher's immediate network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 10 · **3 flagged influential by Semantic Scholar**

CORE PAPER

Worldwide trends in diabetes prevalence and treatment from 1990 to 2022: a pooled analysis of 1108 population-representative studies with 141 million participants

2024 · 959 citations (GS)

Field-normalised: 536 Semantic Scholar citations place it in the top 1% of Medicine papers from 2024 indexed by Semantic Scholar, by citation count.

No.	Citing paper	Citing institution(s)	Country	S2
1	The national and provincial prevalence and non-fatal burdens of diabetes in China from 2005 to 2023 with projections of prevalence to 2050 (2025)	Cheeloo College of Medicine, Shandong University, National Center for Chronic Noncommunicable Disease Control and Prevention, Chinese Center for Disease Control and Prevention, National University of Singapore	China, Singapore	—
2	Novel GLP-1-based Medications for Type 2 Diabetes and Obesity (2025)	Bucheon St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Helmholtz Institute for Metabolic, Obesity and Vascular Research (HI-MAG), Katholisches Klinikum Bochum, St. Josef Hospital	Germany, Ireland, South Korea	—
3	Type 2 Diabetes Mellitus: New Pathogenetic Mechanisms, Treatment and the Most Important Complications (2025)	Medical University of Lodz	Poland	Influential
4	IDF Diabetes Atlas 11th edition 2025: global prevalence and projections for 2050 (2025)	Monash University, Universidade Federal do Rio Grande do Sul, VA Puget Sound Health Care System	Australia, Brazil, United States	—
5	Global, regional, and national cascades of diabetes care, 2000–23: a systematic review and modelling analysis using findings from the Global Burden of Disease Study (2025)	All India Institute of Medical Sciences, Federal University of Rio Grande do Sul, Institute for Health Metrics and Evaluation, University of Washington	Australia, Brazil, India	—
6	Multiple long-term conditions as the next transition in the global diabetes epidemic (2025)	Converge: Centre for Chronic Disease and Population Health Research, Imperial College London, RCSI University of Medicine and Health Sciences	Ireland, United Kingdom	—
7	Rising tide: the growing global burden and inequalities of early-onset type 2 diabetes among youths aged 15-34 years (1990-2021). (2025)	Beijing University of Chinese Medicine, Guang'Anmen Hospital of China Academy of Chinese Medical Sciences	China	—
8	Physiology of Weight Regain after Weight Loss: Latest Insights. (2025)	Maastricht University, NUTRIM Institute of Nutrition and Translational Research in Metabolism	Netherlands	—
9	Integration of artificial intelligence and wearable technology in the management of diabetes and prediabetes (2025)	State University of New York	United States	Influential

No.	Citing paper	Citing institution(s)	Country	S2
10	Variation in type 2 diabetes prevalence across different populations: the key drivers. (2025)	Baker Heart and Diabetes Institute, University of KwaZulu-Natal	Australia, South Africa	Influential

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
University of Washington	United States	SCImago #45 · THE 25 · QS 81	6
Stanford University	United States	SCImago #18 · THE =5 · QS 3	4
World Health Organization	Switzerland	SCImago #172	4
University of North Carolina at Chapel Hill	United States	THE 78 · QS =140	4
Northwestern University	United States	THE 30 · QS =42	4
Centers for Disease Control and Prevention	United States	SCImago #231	4
Northwestern University Feinberg School of Medicine	United States	—	4
University of São Paulo	Brazil	THE 201–250	3
Boston University	United States	SCImago #272 · THE =76 · QS =88	3
University of Pittsburgh	United States	SCImago #212 · QS =281	3
UT Southwestern Medical Center	United States	—	3
University of Colorado	United States	—	3
Massachusetts General Hospital	United States	SCImago #100	3
University of Alabama at Birmingham	United States	QS 1001-1200	3
Massachusetts General Hospital and Harvard Medical School	United States	—	3

Geographic distribution of citing authors

Country	Citing papers
United States	14
United Kingdom	7
Australia	6
Switzerland	5
China	5
Brazil	5
Ireland	4
India	4

Country	Citing papers
Mexico	3
Ethiopia	3
Singapore	3
Canada	2

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	Worldwide trends in underweight and obesity from 1990 to 2022: a pooled analysis of 3663 population-representative studies with 222 million children, adolescents, and adults	7	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 2	Stillbirths: rates, risk factors, and acceleration towards 2030	5	8 CFR 204.5(i)(3) — Outstanding Researcher
Contribution 3	Worldwide trends in diabetes prevalence and treatment from 1990 to 2022: a pooled analysis of 1108 population-representative studies with 141 million participants	10	8 CFR 204.5(i)(3) — Outstanding Researcher