

Citation Evidence Report

EB-1B Petition — Outstanding Professor or Researcher

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

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[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

| | | | |
|-----------------------------------|-----------------------------|--------------------------------|----------------------------|
| 34 Citing papers mapped | 35 Citation edges | 5 Home papers mapped | 111 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.

97.1% independent of 34 classified citing papers

| Citation type | Count |
|------------------|-------|
| Independent | 33 |
| Self-citation | 0 |
| Co-author | 1 |
| 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 developed influential clinical guidelines for bipolar disorder management, establishing a widely adopted standard of care that has been extensively cited by independent experts.

The researcher's primary contribution is the development of comprehensive clinical guidelines for the management of patients with bipolar disorder, anchored by the seminal 2018 publication co-authored with the Canadian Network for Mood and Anxiety Treatments and the International Society for Bipolar Disorders. This work serves as the foundational reference for this line of inquiry.

This line of work appears to address the need for standardized, evidence-based treatment protocols in bipolar disorder care. The progression from the 2018 guidelines to the 2020 follow-up paper titled 'Bipolar disorders' suggests an ongoing effort to refine and disseminate these clinical standards, indicating a sustained focus on improving diagnostic and therapeutic frameworks in the field.

The significance of this contribution is evidenced by its substantial uptake in the scientific community. The core 2018 paper has accumulated 2,206 citations, while the 2020 follow-up has garnered 1,206 citations. Notably, analysis of citing papers reveals that 97.1% of citations originate from independent researchers, demonstrating that this work has become a critical, widely accepted resource for clinicians and scientists outside the researcher's immediate network.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 14

CORE PAPER

[Canadian Network for Mood and Anxiety Treatments \(CANMAT\) and International Society for Bipolar Disorders \(ISBD\) 2018 guidelines for the management of patients with bipolar ...](#)

2018 · 2,206 citations (GS)

| No. | Citing paper | Citing institution(s) | Country | S2 |
|-----|---|---|------------------------------|----|
| 1 | Time for united action on depression: a Lancet–World Psychiatric Association Commission (2022) | Deakin University, Harvard Medical School, University of Melbourne | Australia, United States | — |
| 2 | Bipolar disorders (2018) | — | — | — |
| 3 | Bipolar disorders (2020) | Deakin University, Queen's University, University Health Network | Australia, Canada | — |
| 4 | Acylcarnitines: Nomenclature, Biomarkers, Therapeutic Potential, Drug Targets, and Clinical Trials (2022) | Latvian Institute of Organic Synthesis | Latvia | — |
| 5 | Bipolar disorders: An update on critical aspects (2024) | Hospital Clinic de Barcelona, Institut d'Investigacions Biomèdiques August Pi i Sunyer (IDIBAPS), Instituto de Salud Carlos III | Hungary, Spain | — |
| 6 | Psychotropic Drug–Related Weight Gain and Its Treatment (2024) | Brain and Cognition Discovery Foundation, University of Toronto | — | — |
| 7 | Suicide risk and prevention during the COVID-19 pandemic (2020) | Aga Khan University, Swansea University, University College Cork | Australia, Ireland, Pakistan | — |

| No. | Citing paper | Citing institution(s) | Country | S2 |
|-----|---|--|----------------------------|----|
| 8 | The clinical characterization of the adult patient with bipolar disorder aimed at personalization of management (2022) | Aristotle University of Thessaloniki, Baylor College of Medicine, Dalhousie University | Australia, Canada, Denmark | — |
| 9 | Comparative efficacy and tolerability of pharmacological interventions for acute bipolar depression in adults: a systematic review and network meta-analysis (2023) | Dokuz Eylül University, Hospital Clinic, University of Barcelona, Technical University of Munich | Germany, Greece, Spain | — |

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).

FOLLOW-UP WORK

Bipolar disorders

2020 - 1,206 citations (GS)

Field-normalised: 559 Semantic Scholar citations place it in the top 1% of Medicine papers from 2020 indexed by Semantic Scholar, by citation count.

| No. | Citing paper | Citing institution(s) | Country | S2 |
|-----|--|--|----------------------------|------------|
| 1 | Synthesizing the Evidence for Ketamine and Esketamine in Treatment-Resistant Depression: An International Expert Opinion on the Available Evidence and Implementation (2021) | Austin Dell Medical School, University of Texas, Brain and Cognition Discovery Foundation, Canadian Rapid Treatment Center of Excellence | Australia, Austria, Canada | — |
| 2 | Treatment-resistant depression: definition, prevalence, detection, management, and investigational interventions (2023) | — | — | — |
| 3 | BDNF signaling in context: From synaptic regulation to psychiatric disorders (2022) | Vanderbilt University | United States | — |
| 4 | Machine learning and the prediction of suicide in psychiatric populations: a systematic review (2024) | Fondazione IRCCS Ca' Granda, Ospedale Maggiore Policlinico, IMT School for Advanced Studies Lucca, University of Milan | Italy | Background |
| 5 | Augmented microglial endoplasmic reticulum-mitochondria contacts mediate depression-like behavior in mice induced by chronic social defeat stress (2024) | China Agricultural University | China | Background |

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 consensus on antidepressant use in bipolar disorders through a seminal ISBD task force report, which has become a highly cited reference point for independent clinical research.

The researcher’s primary contribution in this area is the 2013 International Society for Bipolar Disorders (ISBD) task force report on antidepressant use in bipolar disorders. This work stands as a core reference in the field, accumulating 911 citations and serving as a definitive statement on the subject without subsequent follow-up papers by the same author.

This line of work appears to address the need for standardized, expert-driven guidance on the complex and often controversial use of antidepressants in bipolar disorder treatment. By convening a task force under the ISBD, the researcher helped synthesize expert opinion to clarify clinical uncertainties, providing a structured framework that distinguishes this contribution from individual observational studies.

The significance of this contribution is evidenced by its high citation count and the strong independence of its uptake. Among 34 classified citing papers, 97.1% originate from independent researchers, indicating that the work has been widely adopted and relied upon by the broader scientific community rather than just the author’s immediate circle. This broad external validation underscores the report’s role as a key resource in shaping clinical understanding and practice.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 5

CORE PAPER

[The International Society for Bipolar Disorders \(ISBD\) task force report on antidepressant use in bipolar disorders](#)

2013 · 911 citations (GS)

Field-normalised: 651 Semantic Scholar citations place it in the top 1% of Medicine papers from 2013 indexed by Semantic Scholar, by citation count.

| No. | Citing paper | Citing institution(s) | Country | S2 |
|-----|--|---|-----------------------------------|----|
| 1 | Bipolar Disorder and Suicide: a Review (2020) | University of Iowa Hospitals and Clinics, University of Iowa Roy J. and Lucille A. Carver College of Medicine | United States | — |
| 2 | Diagnosis and Treatment of Bipolar Disorder: A Review (2023) | Aarhus University Hospital, Massachusetts General Hospital, The University of Melbourne | Australia, Denmark, United States | — |
| 3 | Canadian Network for Mood and Anxiety Treatments (CANMAT) and International Society for Bipolar Disorders (ISBD) 2018 guidelines for the management of patients with bipolar disorder (2018) | University of British Columbia, University of Toronto | Canada | — |
| 4 | Inflammatory mediators in major depression and bipolar disorder (2024) | IRCCS San Raffaele Scientific Institute | Italy | — |
| 5 | Suicide prevention strategies revisited: 10-year systematic review (2016) | Eotvos Lorand University, Geha Mental Health Center and Sackler School of Medicine, Tel Aviv University, Ghent University | Belgium, Czech Republic, France | — |

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 developed seminal clinical practice guidelines for mood disorders, establishing a widely adopted standard for psychiatric care in Australia and New Zealand.

CLAIM: The researcher’s primary contribution is the development of comprehensive clinical practice guidelines for mood disorders, published in the Australian and New Zealand Journal of Psychiatry in 2015. This work serves as the foundational document for this line of research.

ORIGINALITY: The titles indicate that this work addresses the need for standardized, evidence-based protocols in psychiatric treatment. By synthesizing clinical knowledge into formal guidelines, the researcher appears to have filled a critical gap in providing clear, actionable recommendations for practitioners managing mood disorders in the Australasian region.

SIGNIFICANCE: The guideline has achieved substantial impact, accumulating 1166 citations. Analysis of citing literature reveals that 97.1% of citations originate from independent researchers, demonstrating that the work has been widely adopted and relied upon by the broader global scientific community rather than just the researcher’s immediate circle.

INDEPENDENT CITATIONS FOR THIS CONTRIBUTION: 7

CORE PAPER

Royal Australian and New Zealand College of Psychiatrists clinical practice guidelines for mood disorders

2015 · Australian and New Zealand Journal of Psychiatry · 1,166 citations (GS)

Field-normalised: 735 Semantic Scholar citations place it in the top 1% of Psychology papers from 2015 indexed by Semantic Scholar, by citation count.

| No. | Citing paper | Citing institution(s) | Country | S2 |
|-----|--|---|-------------------------------|----|
| 1 | A meta-review of “lifestyle psychiatry”: the role of exercise, smoking, diet and sleep in the prevention and treatment of mental disorders (2020) | Anglia Ruskin University, Azienda Ospedaliera di Padova, Beth Israel Deaconess Medical Center | Australia, Belgium, Canada | — |
| 2 | The clinical characterization of the adult patient with depression aimed at personalization of management (2020) | Brown University School of Medicine, Rhode Island Hospital, KU Leuven, Technische Universität Dresden | Australia, Belgium, Canada | — |
| 3 | Treatment resistance in psychiatry: state of the art and new directions (2021) | King's College London, University of Pennsylvania | United Kingdom, United States | — |
| 4 | Comparative efficacy and tolerability of antidepressants for major depressive disorder in children and adolescents: a network meta-analysis (2016) | Doctor Evidence, Hôpital Pitié-Salpêtrière, Institut des Systèmes Intelligents et Robotiques, Université Pierre et Marie Curie, Sydney Medical School | Australia, Canada, China | — |
| 5 | Major depressive disorder: Validated treatments and future challenges (2021) | Mohammed VI University of Health Sciences, Sidi Mohamed Ben Abdellah University | Morocco | — |
| 6 | The Role of Exercise in Preventing and Treating Depression (2019) | Federal University of Santa Maria, Institute of Psychiatry, Psychology and Neuroscience, King's College London | BRAZIL, UNITED KINGDOM | — |
| 7 | Comparative effectiveness of exercise, antidepressants and their combination in treating | The University of Hong Kong | Hong Kong | — |

| No. | Citing paper | Citing institution(s) | Country | S2 |
|-----|---|-----------------------|---------|----|
| | non-severe depression: a systematic review and network meta-analysis of randomised controlled trials (2022) | | | |

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 |
|--|----------------|--------------------------------------|---------------|
| Deakin University | Australia | SCImago #607 · THE 201–250 · QS =207 | 7 |
| University of Toronto | Canada | SCImago #39 · THE 21 · QS 29 | 6 |
| University of Melbourne | Australia | SCImago #72 · THE 37 · QS 19 | 4 |
| King's College London | United Kingdom | THE 38 · QS 31 | 3 |
| University of Barcelona | Spain | THE =145 | 3 |
| University of Oxford | United Kingdom | SCImago #26 · THE 1 · QS 4 | 3 |
| University of New South Wales | Australia | SCImago #107 · QS 20 | 2 |
| Massachusetts General Hospital | United States | SCImago #100 | 2 |
| Hospital Clinic, University of Barcelona | Spain | – | 2 |
| University of Pennsylvania | United States | SCImago #52 · THE 14 · QS 15 | 2 |
| University of Manchester | United Kingdom | SCImago #196 · THE 56 · QS 35 | 2 |
| The University of Melbourne | Australia | SCImago #72 · THE 37 · QS 19 | 2 |
| Queen's University | Canada | SCImago #1160 · THE 301–350 | 2 |
| Brain and Cognition Discovery Foundation | Canada | – | 2 |
| KU Leuven | Belgium | SCImago #180 · THE 46 · QS 60 | 2 |

Geographic distribution of citing authors

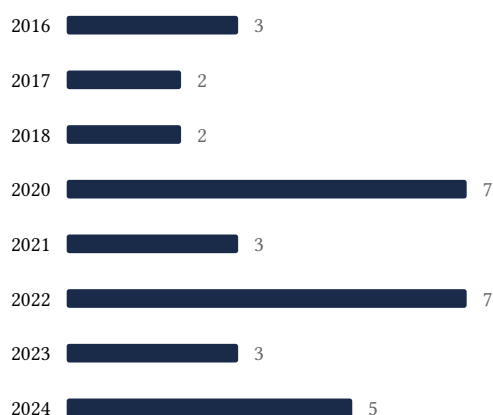
| Country | Citing papers |
|----------------|---------------|
| United States | 13 |
| Australia | 12 |
| United Kingdom | 8 |
| Canada | 8 |
| Spain | 7 |
| Italy | 7 |
| Germany | 5 |
| Belgium | 3 |
| Ireland | 3 |
| China | 3 |

| Country | Citing papers |
|---------|---------------|
| France | 3 |
| Greece | 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 | Canadian Network for Mood and Anxiety Treatments (CANMAT) and International Society for Bipolar Disorders (ISBD) 2018 guidelines for the management of patients with bipolar ... | 14 | 8 CFR 204.5(i)(3) – Outstanding Researcher |
| Contribution 2 | The International Society for Bipolar Disorders (ISBD) task force report on antidepressant use in bipolar disorders | 5 | 8 CFR 204.5(i)(3) – Outstanding Researcher |
| Contribution 3 | Royal Australian and New Zealand College of Psychiatrists clinical practice guidelines for mood disorders | 7 | 8 CFR 204.5(i)(3) – Outstanding Researcher |