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ORIGINAL RESEARCH

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Top researchers in andrology: a bibliometric and demographic analysis of the last 7 years

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Abstract

The aim of this study is to perform a bibliometric and demographic analysis of the 10 most productive researchers over the past 7 years in relation to the selection of key topics in andrology. We conducted a bibliometric analysis in December 2023, using Scopus Researcher Discovery. Seven major andrological topics were identified: erectile dysfunction (T_1), premature ejaculation (T_2), male infertility (T_3), Peyronie's disease (T_4), male hypogonadism (T_5), priapism (T_6), and low sexual desire (T_7). A total of 10 researchers per topic were identified (51 unique authors). Most were urologists (65%) or endocrinologists (23%). Most authors belonged to centers in the USA (35.7%) and Italy (32.9%). The majority of authors were male (77.1%) and over 40 years old (83.3% of authors of known age). The mean (standard deviation (SD)) H-index of the 10 top researchers was 42.6 (24.6), ranging from 6 to 119. Male infertility was the topic with the most articles (1110) written by the top 10 researchers and the most cited (20,585). Erectile dysfunction was the second topic for articles (678) and third for citations after male hypogonadism (6046 *vs.* 11,384). The mean (SD) impact factor of the journals in which the andrological articles were published varied from 3.5 (0.53) for premature ejaculation to 5.33 (1.85) for hypogonadism.

Keywords

Andrology; Bibliometric; Demographic; Researcher; Sexual medicine

1. Introduction

Andrology is a specialized branch of medicine that focuses on the diagnosis, prevention, and treatment of diseases of the male genital system. Consequently, the andrologist is a physician expert in male sexual and reproductive health [1]. To date, most andrologists are urologists or endocrinologists who have chosen male sexual medicine as their primary field of interest [2].

In recent decades, andrology has gained increasing clinical and scientific importance. Consequently, there has been an increase in the number of andrologists, a trend toward hyperspecialization, the emergence of various scientific societies worldwide, the expansion of research and the formulation of various international guidelines [3].

Some researchers dedicate their whole lives to the study of certain topics or subtopics of andrology, becoming opinion leaders in this regard. Obviously, not only the quantity but also the quality of research determines the impact of a researcher's activity on global knowledge and clinical practice. Several bibliometric parameters allow research activity to be objectively evaluated both quantitatively and qualitatively (*e.g.*, publication count, citation count, H-index, impact factor (IF), quartile) [4]. However, it is essential to note that some "masters of andrology" voluntarily chose not to dedicate themselves to research, preferring only clinical activity or surgery, but they are still considered leading experts in their field.

Knowledge of contemporary leaders in andrology research appears fundamental because it allows for the appropriate selection of panels of experts, scientific committees, research groups, conference invitations, and fellowship centers. Despite this, the number of articles available to fill this information gap is limited [5–7].

The aim of this study is to perform a bibliometric and demographic analysis of the 10 most productive researchers over the past 7 years (2017–2023) in relation to the selection of key topics in andrology.

2. Materials and methods

We conducted a bibliometric analysis in December 2023, using the Scopus Researcher Discovery tool (Elsevier, Netherlands).

Demographic data were subsequently extrapolated using common online search engines [8].

According to the European Association of Urology Guidelines 2023 on Sexual and Reproductive Health [9, 10], we identified seven major andrological topics: erectile dysfunction (T_1), premature ejaculation (T_2), male infertility (T_3), Peyronie's disease (T_4), male hypogonadism (T_5), priapism (T_6) and low sexual desire (T_7). For each topic, different combinations of keywords were used to obtain a list of authors with the highest number of publications relating to that topic from 2017 to 2023 (**Supplementary Table 1**). The research was limited to the last seven years because this was the maximum time window that could be explored using the tool used. All publications indexed in the Scopus database were considered for the purposes of ranking (clinical and preclinical studies; original articles, reviews, perspective papers, case reports, letters to editor, replies, editorial comments and published abstracts). We selected the first ten authors per topic (top researchers).

The following demographic and bibliometric parameters were collected for each top researcher: name, ranking position, gender, country (based on primary affiliation and not place of birth), age, H-index, number of articles on the topic, number of citations on the topic and the IF of journals in which articles on the topic were published. The H-index is defined as the maximum value of *h* such that the given author has published *h* papers that have each been cited at least *h* times [11]. IF is defined as a measure of the frequency with which the "average article" in a journal has been cited in a particular year or period (according to the Journal Citation Report by Clarivate) [12].

All data were collected in Excel sheets and subsequently summarized in text and tables. Categorical variables were described using absolute and relative frequencies, whereas continuous variables were reported as means and standard deviations (SDs). No specific statistical tests or software were used. If the same researcher appeared on multiple topics, we counted them multiple times for data processing.

3. Results

A total of 10 researchers per topic were identified. More specifically, 51 unique authors were found, 15 of whom were assigned to more than one topic. However, only 2/15 (Salonia and Yafi) were associated with more than two topics. The 10 top researchers on andrological topics are reported in Table 1. Most of the top researchers were from centers in the USA (35.7%), Italy (32.9%) and China (14.3%). Furthermore, the majority of them were male (77.1%) and over 40 years old (83.3% of authors of a known age). Most were urologists (65%) or endocrinologists (23%). The demographic characteristics of the top researchers are presented in Fig. 1. The stratification of the demographic data by sex is presented in **Supplementary Table 2**.

The mean (SD) H-index of the 10 top researchers was 42.6 (24.6), ranging from 6 to 119. Only 6/59 (10.2%) authors had an H-index of >70 (Fig. 2). The number of articles and citations for each author and topic are reported in Table 2.

Male infertility was the topic with the most articles (1110) written by the top 10 researchers and the most citations (20,585). Erectile dysfunction was the second topic for articles (678) and the third for citations [13] after male hypogonadism (6046 *vs.* 11,384). Low sexual desire and priapism were the topics with the fewest articles (69 and 100, respectively), whereas priapism and premature ejaculation were the topics with the fewest citations (682 and 1020, respectively) (Table 2). The mean (SD) IF of the journals in which the andrological articles by top researchers were published varied from 3.5 (0.53) for premature ejaculation to 5.26 (2.78) and 5.33 (1.85) for male infertility and hypogonadism, respectively (Table 3).

4. Discussion

In examining the leading figures in andrology over the past seven years, several notable patterns and trends have been identified, significantly shaping our understanding of current and future directions in this medical specialty.

The majority of distinguished andrology researchers are urologists and endocrinologists. This finding aligns with our expectations, as these disciplines are closely linked to male sexual and reproductive health, and in clinical practice, most andrologists belong to these medical categories [14, 15]. However, it should not be forgotten that many other health professionals can be involved in andrological research, such as sexologists, biologists, pharmacologists and rehabilitators. Andrology remains a multidisciplinary branch [16] in which collaboration between different clinical and academic figures is fundamental.

Our analysis also indicates that several researchers are prominent across various andrological subjects, highlighting their significant scientific impact and comprehensive expertise, regardless of a specific topic or specialization [17].

Furthermore, our study reveals a high concentration of top researchers in the USA and Italy, probably deriving from the profound tradition regarding [18] research and the sensitivity of the scientific community toward sexual medicine in these regions. This geographic distribution could explain the strong presence of Italian andrologists in European scientific panels and conferences [19–21].

Our article also uncovers a notable gender imbalance among leading researchers, who are currently mainly male. This gap reflects historical gender bias in andrology and related fields. More specifically, it highlights the cultural and social barriers that have discouraged women's involvement in male sexual medicine and research. Fortunately, this trend shows signs of changing with andrology becoming increasingly inclusive toward women [22, 23]. This change of direction, as well as being right, must be encouraged, as women are necessary to broaden the perspectives in andrological research and, therefore, significantly improve it.

In terms of age, most top researchers are above the age of 40, reflecting the time required to establish a notable research career and accumulate significant scholarly contributions. More specifically, we found that the predominant age group was between 40 and 60 years, with fewer researchers over 60 years, likely due to a focus on recent research output rather than lifetime production and a possible decline in the publication rate toward the end of academic career.

TABLE 1. The 10 top researchers by andrological topics (2017–2023).

	Author 1	Author 2	Author 3	Author 4	Author 5	Author 6	Author 7	Author 8	Author 9	Author 10
Erectile dysfunction	Seftel AD	Ramasamy R	Yafi FA	Capogrosso P	Burnett AL	Liu J	Salonia A	Wang T	Gross MS	Kholer TS
Premature ejaculation	Zhang X	Jannini EA	Rowland DL	Dai Y	Gao M	Jiang H	Liu P	Chen J	Gao J	Yang J
Male infertility	Agarwal AK	Niederberger CS	Henkel RR	Calogero AE	Cannarella R	Sengupta P	La Vignera S	Hotaling JM	Condorelli RA	Eisenberg M
Peyronie's disease	Ziegelmann MJ	Levine LA	Ralph DJ	Kohler TS	Seftel AD	Trost LW	Hatzichristodc GS	Yafi FA	Russo GI	Salonia A
Male hypogonadism	Corona G	Maggi MC	Ramasamy R	Calogero AE	Salonia A	Condorelli RA	Ferlin A	Rastrelli G	La Vignera S	Cannarella R
Priapism	Burnett AL	Ralph DJ	Muneer A	Gross MS	Morey AF	Kadioglu A	Costa FF	Yafi FA	Munarriz RM	Johnson MJ
Low sexual desire	Muise A	Maggi MC	Rastrelli G	Bashin SA	Corona G	Rosen NO	Salonia A	Impett EA	Capogrosso P	Boeri L

Ranking based on the total number of publications on the topic according to Scopus Researcher Discovery tool (Elsevier, Netherlands).
Last update: December 2023.

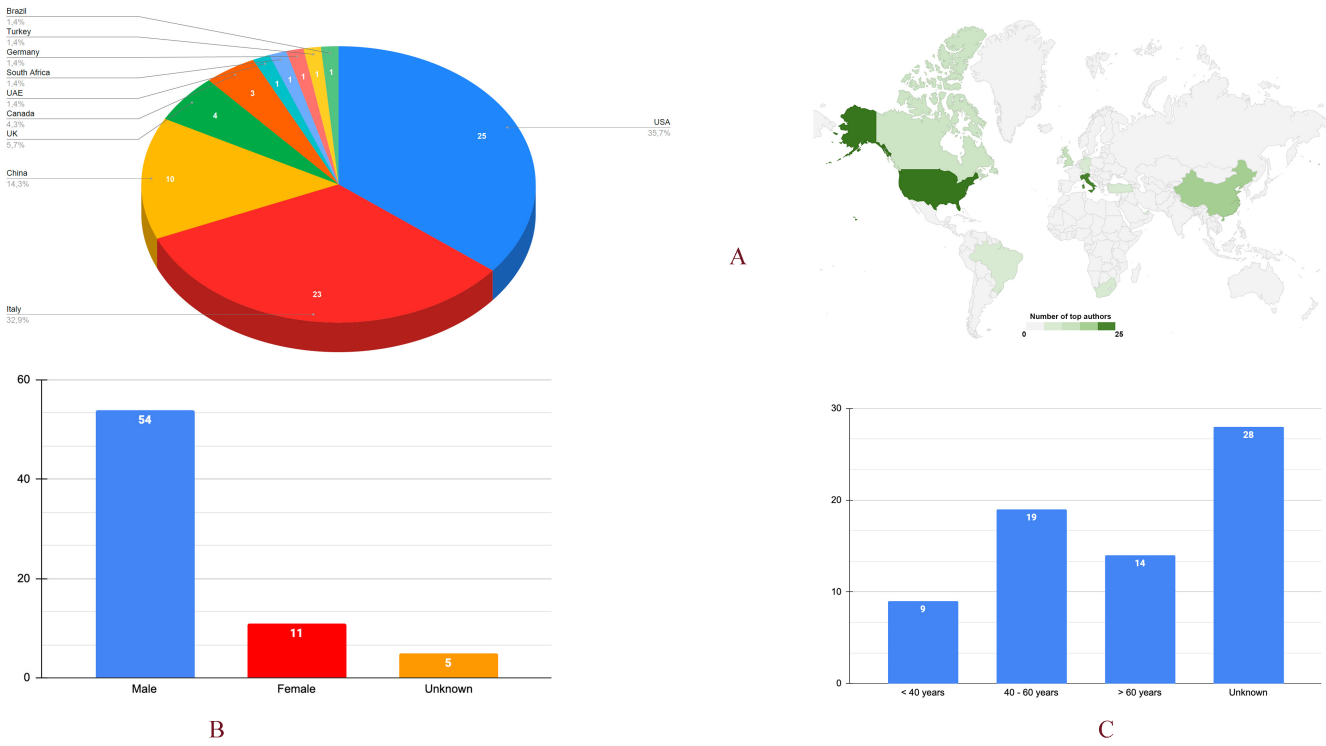

FIGURE 1. Demographic characteristics of the top researchers. (A) Country; (B) Gender; (C) Age. Country was based on primary affiliation and not place of birth.

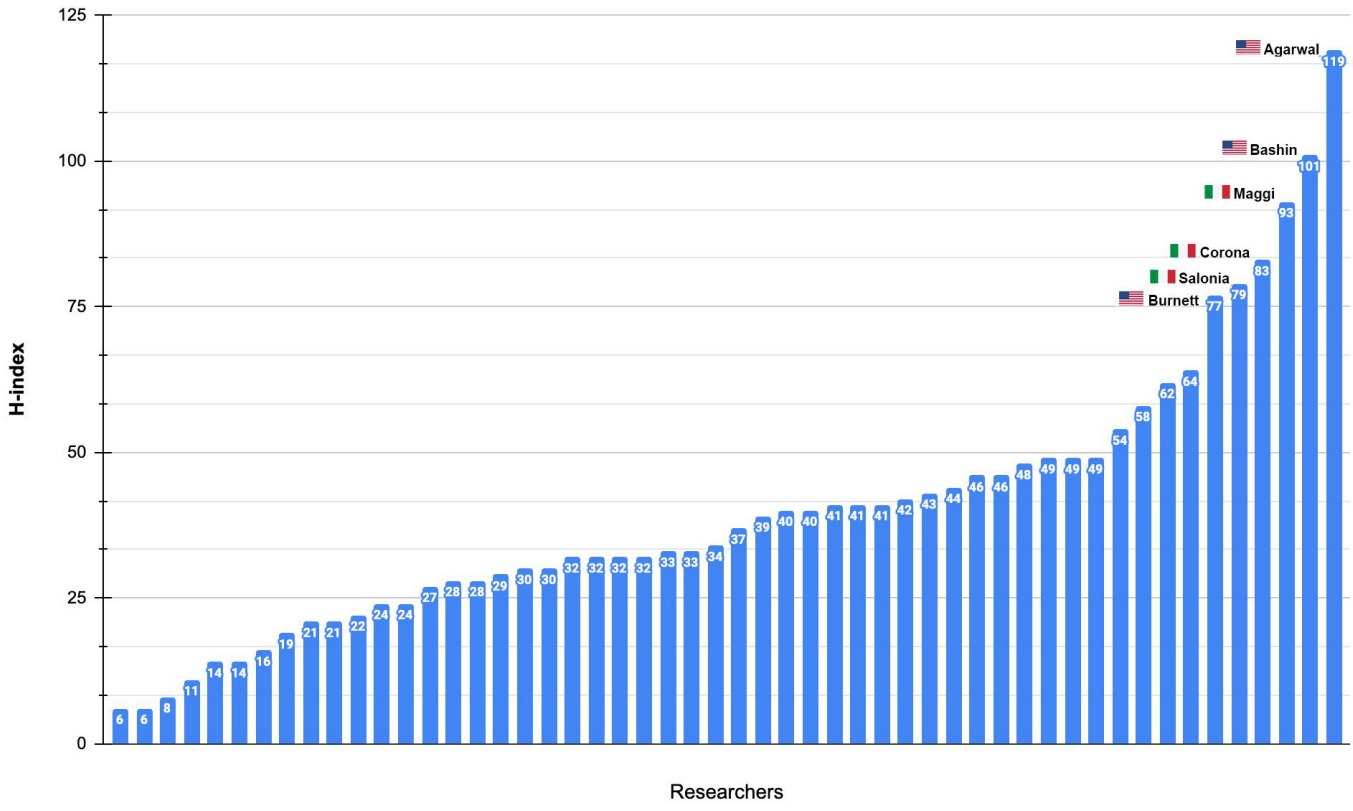

FIGURE 2. H-index of the top researchers. Data according to Scopus. Last update: December 2023.

TABLE 2. Articles and citations for each top researcher and andrological topic (2017–2023).

	N articles T_1	N articles T_2	N articles T_3	N articles T_4	N articles T_5	N articles T_6	N articles T_7	N citations T_1	N citations T_2	N citations T_3	N citations T_4	N citations T_5	N citations T_6	N citations T_7
Author 1	131	26	253	57	71	20	10	410	81	5829	436	2367	95	130
Author 2	86	25	131	47	67	12	9	718	201	613	422	2029	49	264
Author 3	66	22	109	41	59	11	8	575	144	2968	443	476	205	193
Author 4	64	21	109	38	47	10	7	743	142	1886	306	1044	43	184
Author 5	64	21	89	37	45	9	7	922	150	950	33	1126	44	256
Author 6	63	15	87	36	44	9	6	524	19	1836	452	1017	33	67
Author 7	63	14	86	34	41	9	6	866	118	1746	429	715	53	80
Author 8	50	14	81	34	41	8	6	475	63	1724	260	1085	104	118
Author 9	46	13	85	26	40	6	5	224	39	1522	405	955	33	64
Author 10	45	12	80	25	32	6	5	589	63	1511	297	570	23	53
Total articles or citations on topic among the 10 top researchers	678	183	1110	375	487	100	69	6046	1020	20,585	3483	11,384	682	1409
Mean (SD) articles or citations on topic among the 10 top researchers	67.8 (25.4)	18.3 (5.3)	111 (52.5)	37.5 (9.5)	48.7 (12.7)	10 (4.08)	6.9 (1.5)	604.6 (212.9)	102 (57.8)	2058.5 (1462)	348.3 (141)	1138.4 (605.9)	68.2 (54.8)	140.9 (79.2)

SD: Standard Deviation; T_1: erectile dysfunction; T_2: premature ejaculation; T_3: male infertility; T_4: Peyronie's disease; T_5: male hypogonadism; T_6: priapism; T_7: low sexual desire. Data according to Scopus. Last update: December 2023.

TABLE 3. Mean (SD) IF of journals on which 10 top researchers published articles (2017–2023).

	IF journals T_1	IF journals T_2	IF journals T_3	IF journals T_4	IF journals T_5	IF journals T_6	IF journals T_7
Author 1	4.54 (1.96)	3.25 (3.37)	6.72 (23.21)	2.85 (1.42)	6.72 (13.82)	4.17 (2.0)	4.01 (1.84)
Author 2	3.87 (4.02)	4.22 (3.54)	4.46 (2.39)	4.19 (5.53)	7.13 (13.84)	4.18 (4.69)	4.07 (2.28)
Author 3	3.08 (1.53)	2.93 (1.54)	9.33 (31.97)	5.0 (5.74)	3.7 (4.06)	2.7 (1.78)	3.48 (1.69)
Author 4	5.18 (4.96)	3.41 (1.56)	3.14 (2.1)	3.07 (1.43)	3.76 (1.77)	3.73 (1.47)	7.91 (5.89)
Author 5	4.03 (3.89)	4.46 (2.20)	3.48 (1.98)	4.82 (2.75)	8.58 (16.19)	4.0 (2.37)	4.07 (2.28)
Author 6	5.17 (4.3)	3.17 (0.75)	2.12 (1.98)	3.12 (1.38)	3.9 (1.67)	2.23 (1.37)	3.18 (0.54)
Author 7	9.64 (17.3)	3.8 (1.16)	3.27 (1.94)	4.59 (3.99)	4.2 (3.65)	6.48 (8.12)	4.52 (1.8)
Author 8	4.36 (1.92)	3.14 (1.5)	10.03 (23.71)	2.76 (1.29)	7.21 (16.09)	4.26 (1.6)	4.16 (2.0)
Author 9	2.71 (1.52)	2.89 (1.17)	3.3 (1.92)	5.66 (6.42)	4.12 (1.88)	3.85 (1.89)	3.82 (1.89)
Author 10	3.14 (1.69)	3.74 (0.69)	6.78 (14.2)	3.7 (1.56)	4.0 (1.7)	2.52 (1.32)	4.23 (2.09)
Total	4.57 (1.97)	3.5 (0.53)	5.26 (2.78)	3.97 (1.02)	5.33 (1.85)	4.24 (1.47)	4.35 (1.30)

IF: Impact Factor; SD: Standard Deviation; T_1: erectile dysfunction; T_2: premature ejaculation; T_3: male infertility; T_4: Peyronie's disease; T_5: male hypogonadism; T_6: priapism; T_7: low sexual desire.
Data according to Journal Citation Report by Clarivate. Last update: December 2023.

The mean H-index among leading researchers in andrology is impressively high (approximately 43), indicating a significant impact on the academic world. However, the H-indices we found were influenced by the authors' entire body of work, not just their contributions to andrology. Notably, researchers specializing in less common areas, such as priapism and premature ejaculation, show lower H-indices, suggesting that prominence can be achieved by focusing on hyperspecialized and less-explored topics. On the other hand, the authors with the highest H-index, particularly those above 70, confirm the strong influence of American and Italian researchers on producing high-impact andrological research.

Considering the Uro-Andrological category [24, 25], the IF of journals in which papers are published by top researchers in andrology is on average moderate to high, reflecting the substantial quality of journals and, consequently, of the articles themselves.

Lastly, the topics of male infertility, erectile dysfunction, and hypogonadism are the most researched by top scholars, likely due to their high prevalence, significant societal impact, and high interest from the scientific and medical community [26–29]. Conversely, conditions such as priapism receive less attention due to their rarity [30], while premature ejaculation, despite its high prevalence, appears to be under investigated, probably due to the lack of demand for patient support and clinical emphasis from healthcare professionals, highlighting a significant gap in addressing this problem.

This is the most up-to-date bibliographic and demographic analysis of researchers in male sexual medicine. It offers a snapshot of the current leaders in andrology investigation and an overview of recent trends in andrology research. Moreover, it has the advantage of analyzing objective parameters and is based on a universally recognized database. However, our article should be interpreted considering several limitations. Despite the careful selection of keywords, some papers may have been missed. Scopus is a database that does not include all articles available in the literature. The topics analyzed were selected using an objective criterion, but many other topics were excluded. As already mentioned, some expert andrologists decide not to dedicate themselves to research and are therefore automatically excluded from the list of "top researchers". Our results are limited to the time period analyzed. The contribution of the authors in each article may be variable and was not analyzed (*e.g.*, position in the authors list, authors contribution declaration). The quality of an article can be deduced from the IF of the journal in which it is published and from the citations received, but it also depends on the type of paper, study design, and other factors that are not analyzed. In addition, the IF is an indicator of the quality of a journal, which varies from year to year and can be better interpreted by knowing the quartile to which the journal belongs; however, we only analyzed the 2023 IF and did not investigate the quartiles. Self-citations were not investigated.

5. Conclusions

Current leaders in andrology research are primarily endocrinologists and urologists. From a demographic point of view, this group includes mainly men, over 40 years old, from US, Italian and Chinese institutions. Male infertility, erectile dysfunction, and hypogonadism are the most investigated topics by contemporary top andrology researchers.

AVAILABILITY OF DATA AND MATERIALS

Raw tables are available upon appropriate request to the corresponding author.

AUTHOR CONTRIBUTIONS

ST—draft writing. CM—conceptualization, study design. RB, LN and FC—editing and grammatical review. DA, LS, FB and CQ—scientific review. MDS—supervision. ST, MT, MS, MO, LR and AL—data extraction. AR, GDR, SP and PC—tables creation. LR, MO, GDR, SP and PC—figures creation.

ETHICS APPROVAL AND CONSENT TO PARTICIPATE

Not applicable.

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CONFLICT OF INTEREST

The authors declare no conflict of interest.

SUPPLEMENTARY MATERIAL

Supplementary material associated with this article can be found, in the online version, at https://oss.jomh.org/files/article/1829445967601909760/attachment/Supplementary%20material.docx.

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