



## Curriculum Vitae Sophie van Rijn

### *University address:*

Leiden University  
Faculty of Social and Behavioural Sciences  
Clinical Child and Adolescent Studies  
Wassenaarseweg 52  
2333 AK Leiden, The Netherlands  
071-5274060  
[srijn@fsw.leidenuniv.nl](mailto:srijn@fsw.leidenuniv.nl)

### *Home address:*

Vossenlaan 33  
3951 AK Maarn  
The Netherlands

---

**Name:** Sophie van Rijn  
**Date of Birth:** 17.03.1978  
**Geslacht:** female  
**Nationality:** Dutch nationality  
**Place of Birth:** Amsterdam, Netherlands (NL)

### **Current affiliations:**

- ❖ Primary affiliation: Leiden University, Clinical Child and Adolescent Studies
- ❖ Secondary affiliation: Leiden Institute of Brain and Cognition (LIBC)

### **Positions:**

- 2014 – now* Associate professor at Leiden University, Clinical Child and Adolescent Studies (fixed term, 0.8 fte)
- 2006 – 2014* Assistant professor at Leiden University, Clinical Child and Adolescent Studies (fixed term, 1.0 fte)

### **Academic education:**

- 2002 – 2007* Cum Laude doctorate in Neuropsychology at Utrecht University (May 24 2007)  
Thesis: Xploring social cognitive pathways to psychopathology: Studies with Klinefelter (XXY) men.  
Promotores: Prof. R.S. Kahn, Prof. A. Aleman, Prof. E. de Haan en prof. H. Swaab.  
(fixed term of 5 years, 0.8 fte)
- 1996 – 2001* Cum Laude Masters degree and Bachelor degree in Psychology (Neuropsychology) at the University of Amsterdam.

## Grants/prizes/awards:

- 2016: VIDI grant (personal grant, € 800,000), Netherlands Organization for Scientific Research NWO
- 2013: Gratama Science Prize, for young scientists who distinguish themselves by their innovative, socially relevant and challenging research (€ 25,000 )
- 2013: Leiden University support grant for talented female scientists (€ 15.000 )
- 2011: research grant Centrum Autisme (€ 266,000), co-applicant prof. Hanna Swaab
- 2008: VENI grant (personal grant, € 208,000), Netherlands Organization for Scientific Research NWO
- 2007: Cum laude PhD degree
- 2001: Cum laude master's degree

## Brief summary of research over the last five years:

My research is focused on the cognitive and neurobiological mechanisms involved in atypical social development, learning not only from behaviorally defined conditions (autism, psychosis, aggression) but specifically also from genetic conditions. The emphasis is on the impact of social impairments on mental health, and the identification of neuropsychological and neurobiological mechanisms that underlie these risks. My research activities have translated to the the following active lines of research in which I am principal investigator and primary daily supervisor:

- 2016-2020: Neurocognitive and neurobiological risk markers of psychopathology in toddlers with sex chromosome trisomies (3 PHD students)
- 2016-2020: Effectiveness of cognitive behavioral intervention in toddlers with sex chromosome trisomies (1 PHD student)
- 2014-2016 Effectiveness of selfmanagement training in young adults with an extra X chromosome (clinical resident)
- 2013-2016: Brain development in children with an extra X chromosome as compared to children with autism: evidence from MRI (1 PhD student)
- 2012-2017: Language and the organisation of thought: risk for psychopathology in children with an extra X chromosome (1 PhD student)
- 2012-2017: Cognitive and neurobiological parameters of emotion regulation and predictors of effectiveness of interventions in children with aggressive behavior problems (1 PhD student)
- 2010-2017: Emotion regulation in young children with autism: neurobiological mechanisms (1 PhD student)

These lines of research come together in the ambition to bridge the gap between fundamental research (neuroimaging, eyetracking, neurocognition, physiology, hormones, genetics) and daily life functioning, in order to unravel underlying mechanisms of difficulties that parents and children encounter and identify targets for intervention. As Chief Scientific Officer (CSO) of the TRIXY Center of Expertise at Leiden University, I'm in an excellent position to translate scientific research to clinical practice and society ([www.trixyexpertisecentrum.nl](http://www.trixyexpertisecentrum.nl)).

## Academic staff supervised:

PhDs	Completion date	Role:
Completed	Marcia Goddard (2015) Jantiene Schoorl (2017) Gemma Zantinge (2018)	For all PhD's: Primary daily supervisor (of project management, data-collection, analyses), financing of the project, design and writing of the project, primary supervisor in writing of articles and thesis
Ongoing	Marit Bierman: 2020 Francien Martin: 2020 Kimberly Kuiper: 2021 Nienke Bouw: 2021 Evelien Urbanus: 2021	For all PhD's: Primary daily supervisor (of project management, data-collection, analyses), writing or co-writing of the project grants, primary supervisor in writing of articles and thesis

### **International collaborations and experience:**

- August-September 2016: Working visit to Children's Hospital, University Hospital of Colorado, Denver (USA), to collaborate with dr Nicole Tartaglia, who is an expert in X and Y chromosome variations.
- April-May 2014: Working visit to Children's Hospital, University Hospital of Colorado, Denver (USA), to collaborate with dr Nicole Tartaglia, who is an expert in X and Y chromosome variations.
- Yearly invited presentations on AXYS conferences in the USA ( the national organization for sex chromosome variations).
- Regular invitations to contribute to 'Awares', an international online conference on autism
- Several invited presentations at Frambu, the national Resource Center for Rare Diseases in Oslo, Norway.
- Research collaborations with:
  - USA, Children's Hospital Colorado, Extraordinary Kids Clinics, dr. Nicole Tartaglia.
  - USA, George Washington University and Neurodevelopmental Diagnostic Center for Young Children, prof. dr. Carole Samango-Sprouse
  - Belgium, UZ Leuven, Center for Human Genetics: dr. Martiene Borghgraef.

### **Academic positions and activities:**

- Chief Scientific Officer (CSO) of the TRIXY Center of Expertise at Leiden University (TRIXY: TRIsomy of the X and Y chromosomes): responsible for envisioning, leading and coordinating research, and for communicating with the scientific community and societal partners.
- Member of the scientific Ethical Committee of the Faculty of Social and Behavioural Sciences, Leiden University
- Lab-coordinator of Clinical Child and Education Studies, Leiden University
- Member of the Scientific Advisory Board of the National Association for Klinefelter syndrome
- Head of the Scientific Curriculum, and member of the curriculum committee, examination committee and educational committee of the (4-year) postdoctoral training program for Specialist in Clinical Neuropsychology at RINO Utrecht
- Organiser of a national conference on sex chromosome trisomies (Sept 2015)
- Invitations to referee for international scientific journals, including Nature, Lancet, Molecular Psychiatry, Cortex, Journal of Child Psychology and Psychiatry, British Journal of Psychiatry, Journal of Autism and Developmental Disorders, American Journal of Medical Genetics, Neuropsychologia, Schizophrenia Bulletin, PLoS One, Psychiatry Research, Journal of Neuropsychology, Journal of Neuroscience, Neuropsychiatric Genetics, Physiology and Behavior, European Psychiatry, Journal of Andrology, Comprehensive Psychiatry, Cognitive and Behavioral Neurology, BMC Medical Genetics
- Grant proposal referee for the Wellcome Trust (UK) and the Israel Science Foundation.
- Member of the Dutch Neuropsychological Society (NVN)
- Member of the international Society for the Study of Behavioral Phenotypes (SSBP)

### **Teaching experience:**

- Coordinator division Scientific Research in postdoctoral training programme Specialist in Clinical Neuropsychology
- Coordinator masters programme 'Applied Neuroscience in Education and Child Studies'
- Coordinator and lecturer course Methods and Instruments in Cognitive and Affective Neuroscience (Researchmaster track)
- A range of clinical, theoretical and practical courses for masterstudents: Cognitive Neuropsychiatry , Neurodevelopmental Assessment and Treatment, Clinical Assessment and Treatment Specialization, Neurodevelopmental Disorders in Childhood and Adolescence, Methods and Instruments in Cognitive and Affective Neuroscience
- Supervision of 130 master students (internship/master thesis) and supervision of PhD students
- BKO certified (formal teaching qualification)

## Publications in international peer-reviewed journals:

1. van Rijn S. The underlying mechanisms of neurobehavioral risks in sex chromosome trisomies. *Dev Med Child Neurol.* 2018 Nov;60(11):1071.
2. van Rijn S. Salivary testosterone in relation to social cognition and social anxiety in children and adolescents with 47,XXY (Klinefelter syndrome). *PLoS One.* 2018 Jul 23;13(7):e0200882.
3. Pijper J, de Wied M, van Rijn S, van Goozen S, Swaab H, Meeus W. Executive Attention and Empathy-Related Responses in Boys with Oppositional Defiant Disorder or Conduct Disorder, With and Without Comorbid Anxiety Disorder. *Child Psychiatry Hum Dev.* 2018 May 11.
4. Zantinge G, van Rijn S, Stockmann L, Swaab H. Concordance between physiological arousal and emotion expression during fear in young children with autism spectrum disorders. *Autism.* 2018 Mar
5. Samango-Sprouse C, Stapleton E, Chea S, Lawson P, Sadeghin T, Cappello C, de Sonnevile L, van Rijn S. International investigation of neurocognitive and behavioral phenotype in 47,XXY (Klinefelter syndrome): Predicting individual differences. *Am J Med Genet A.* 2018 Apr;176(4):877-885.
6. van Rijn S, de Sonnevile L, Swaab H. The nature of social cognitive deficits in children and adults with Klinefelter syndrome (47,XXY). *Genes Brain Behav.* 2018 Jul;17(6):e12465.
7. Schoorl J, van Rijn S, de Wied M, van Goozen S, Swaab H. Boys with Oppositional Defiant Disorder/Conduct Disorder Show Impaired Adaptation During Stress: An Executive Functioning Study. *Child Psychiatry Hum Dev.* 2018 Apr;49(2):298-307.
8. van Rijn S, Barneveld P, Descheemaeker MJ, Giltay J, Swaab H. The effect of early life stress on the cognitive phenotype of children with an extra X chromosome (47,XXY/47,XXX). *Child Neuropsychol.* 2018 Feb;24(2):277-286.
9. Schoorl J, **van Rijn S**, de Wied M, van Goozen S, Swaab H. 2018. Boys with Oppositional Defiant Disorder/Conduct Disorder Show Impaired Adaptation During Stress: An Executive Functioning Study. *Child Psychiatry Hum Dev.* (impact factor 2.0)
10. Zantinge G, **van Rijn S**, Stockmann L, Swaab H. 2017. Physiological Arousal and Emotion Regulation Strategies in Young Children with Autism Spectrum Disorders. *J Autism Dev Disord.* (impact factor 3.3)
11. Zantinge G, **van Rijn S**, Stockmann L, Swaab H. 2017. Psychophysiological responses to emotions of others in young children with autism spectrum disorders: Correlates of social functioning. *Autism Res.* (impact factor 3.8)
12. Ketelaars MP, In't Velt A, Mol A, Swaab H, Bodrij F, **van Rijn S**. 2017. Social attention and autism symptoms in high functioning women with autism spectrum disorders. *Res Dev Disabil* 64:78-86. (impact factor 1.6)
13. Dijkhuis, R.R., Ziermans, T.B., Van Rijn, S., Staal, W.G. & Swaab, H. (2017) Self-regulation and quality of life in high-functioning young adults with autism. *Autism*, **21**, 896-906.
14. Miers, A.C., Ziermans, T. & **van Rijn, S.** (2017) Connecting the dots between schizotypal symptoms and social anxiety in youth with an extra X chromosome: A mediating role for catastrophizing. *Brain sciences*, **7**, 113.
15. Schoorl, J., **Van Rijn, S.**, de Wied, M., Van Goozen, S.H. & Swaab, H. (2017b) Neurobiological stress responses predict aggression in boys with oppositional defiant disorder/conduct disorder: a 1-year follow-up intervention study. *Eur. Child Adolesc. Psychiatry*, 1-9.
16. Ziermans, T., Swaab, H., Stockmann, A., de Bruin, E. & **van Rijn, S.** (2017) Formal Thought Disorder and Executive Functioning in Children and Adolescents with Autism Spectrum Disorder: Old Leads and New Avenues. *J Autism Dev Disord*, 1-13.
17. Pijper J, de Wied M, **van Rijn S**, van Goozen S, Swaab H, Meeus W. 2016. Callous unemotional traits, autism spectrum disorder symptoms and empathy in boys with oppositional defiant disorder or conduct disorder. *Psychiatry Res* 245:340-345. (impact factor 2.5)
18. Dijkhuis RR, Ziermans TB, **Van Rijn S**, Staal WG, Swaab H. 2016. Self-regulation and quality of life in high-functioning young adults with autism. *Autism.* (impact factor 3.7)
19. Ziermans T, Swaab H, Stockmann A, de Bruin E, **van Rijn S**. 2017. Formal Thought Disorder and Executive Functioning in Children and Adolescents with Autism Spectrum Disorder: Old Leads and New Avenues. *J Autism Dev Disord.* (impact factor 3.3)
20. Goddard MN, **van Rijn S**, Rombouts S, Swaab H. 2016. White matter microstructure in a genetically defined

- group at increased risk of autism symptoms, and a comparison with idiopathic autism: an exploratory study. *Brain imaging and behavior* 10(4):1280-1288. ([impact factor 3.9](#))
21. Schoorl J, **van Rijn S**, de Wied M, van Goozen S, Swaab H. 2016. Emotion Regulation Difficulties in Boys with Oppositional Defiant Disorder/Conduct Disorder and the Relation with Comorbid Autism Traits and Attention Deficit Traits. *PLoS One* 11(7):e0159323. ([impact factor 3.5](#))
  22. Schoorl J, **van Rijn S**, de Wied M, van Goozen SH, Swaab H. 2017. Neurobiological stress responses predict aggression in boys with oppositional defiant disorder/conduct disorder: a 1-year follow-up intervention study. *Eur Child Adolesc Psychiatry*. ([impact factor 3.3](#))
  23. **van Rijn S**, Barneveld P, Descheemaeker MJ, Giltay J, Swaab H. 2016. The effect of early life stress on the cognitive phenotype of children with an extra X chromosome (47,XXY/47,XXX). *Child Neuropsychol*:1-10.
  24. Ketelaars, M. P., In't Velt, A., Mol, A., Swaab, H., & **Van Rijn, S.** (in press). Emotion Recognition and Alexithymia in High Functioning Females with Autism Spectrum Disorder. *Research in Autism Spectrum Disorders*. ([impact factor 2.2](#))
  25. Schoorl, J., Van Rijn, S., De Wied, M., Van Goozen, S. H. M., & Swaab, H. (in press). Variability in emotional/behavioral problems in boys with Disruptive Behavior Disorders: the role of arousal. *European Child and Adolescent Psychiatry*. ([impact factor 3.3](#))
  26. Goddard, M. N., Swaab, H., Rombouts, S. A., & **van Rijn, S.** (2015). Neural systems for social cognition: gray matter volume abnormalities in boys at high genetic risk of autism symptoms, and a comparison with idiopathic autism spectrum disorder. *European Archives of Psychiatry and Clinical Neuroscience*. ([impact factor 3.5](#))
  27. **van Rijn, S.** (2015). Social Attention in 47,XXY (Klinefelter Syndrome): Visual Scanning of Facial Expressions Using Eyetracking. *Journal of the International Neuropsychological Society*, 21(5), 364-372. ([impact factor 3.0](#))
  28. van der Velde, J., Swart, M., **van Rijn, S.**, van der Meer, L., Wunderink, L., Wiersma, D., . . . Aleman, A. (2015). Cognitive Alexithymia Is Associated with the Degree of Risk for Psychosis. *Plos One*, 10(6), e0124803. ([impact factor 3.7](#))
  29. **van Rijn, S.**, & Swaab, H. (2015). Executive dysfunction and the relation with behavioral problems in children with 47,XXY and 47,XXX. *Genes Brain and Behavior*, 14(2), 200-208. ([impact factor 3.5](#))
  30. **van Rijn, S.**, Kroonenberg, P., Ziermans, T., & Swaab, H. (2015). The Dimensional Structure of the Schizotypal Personality Questionnaire Adapted for Children (SPQ-C-D): An Evaluation in the Dutch Population and a Comparison to Adult Populations. *Advances in Psychiatry*, 2015(Article ID 938784).
  31. **van Rijn, S.**, Stockmann, L., van Buggenhout, G., van Ravenswaaij-Arts, C., & Swaab, H. (2014). Social cognition and underlying cognitive mechanisms in children with an extra X chromosome: a comparison with autism spectrum disorder. *Genes Brain and Behavior*, 13(5), 459-467. ([impact factor 3.5](#))
  32. **van Rijn, S.**, Barendse, M., van Goozen, S., & Swaab, H. (2014). Social attention, affective arousal and empathy in men with Klinefelter syndrome (47,XXY): evidence from eyetracking and skin conductance. *PLoS One*, 9(1), e84721. ([impact factor 3.7](#))
  33. Brandenburg, M. N., **van Rijn, S.**, Rombouts, S. A., Veer, I. M., & Swaab, H. (2014). A comparison of neural correlates underlying social cognition in Klinefelter syndrome and autism. *Social cognitive and affective neuroscience*, 9(12), 1926-1933. ([impact factor 5.9](#))
  34. **van Rijn, S.**, Stockmann, L., Borghgraef, M., Bruining, H., van Raavenswaaij-Arts, C., Govaerts, L., Swaab, H. (2014). The social behavioral phenotype in boys and girls with an extra X chromosome: a comparison with autism spectrum disorder. *Journal of Autism and Developmental Disorders*, 44(2):310-320. ([impact factor 3.4](#))
  35. Fagel, S. S. A., Swaab, H., De Sonnevile, L. M., **Van Rijn, S.**, Pieterse, J. K., Scheepers, F., & Van Engeland, H. (2013). Development of schizotypal symptoms following psychiatric disorders in childhood or adolescence. *European Child and Adolescent Psychiatry*, 22(11):683-92. ([impact factor 3.6](#))
  36. Barneveld, P. S., de Sonnevile, L., **van Rijn, S.**, van Engeland, H., & Swaab, H. (2013). Impaired Response Inhibition in Autism Spectrum Disorders, a Marker of Vulnerability to Schizophrenia Spectrum Disorders? *Journal of the International Neuropsychological Society : JINS*, 19(6):646-55. ([impact factor 3.0](#))
  37. **van Rijn, S.**, de Sonnevile, L., Lahuis, B., Pieterse, J., van Engeland, H., & Swaab, H. (2012). Executive Function in MCDD and PDD-NOS: A Study of Inhibitory Control, Attention Regulation and Behavioral

- Adaptivity. *Journal of Autism and Developmental Disorders*. ([impact factor 3.4](#))
38. **van Rijn, S.**, M. Bierman, H. Bruining, H. Swaab (2012). Vulnerability for autism traits in boys and men with an extra X chromosome (47,XXY): the mediating role of cognitive flexibility. *Journal of Psychiatric Research*, 46(10): 1300-1306. ([impact factor 4.1](#))
  39. **van Rijn, S.**, P. Schothorst, M. Van 't Wout, M. Sprong, T. Ziermans, H.v. Engeland, A. Aleman, and H. Swaab (2011) Affective dysfunctions in adolescents at risk for psychosis: Emotion awareness and social functioning. *Psychiatry Research*, 187(1-2), 100-105. ([impact factor 2.7](#))
  40. **van Rijn, S.**, & Swaab, H. (2011). Vulnerability for psychopathology in Klinefelter syndrome: age-specific and cognitive-specific risk profiles. *Acta Paediatrica*, 100(6), 908-916. ([impact factor 1.8](#))
  41. **van Rijn, S.**, Aleman, A., de Sonnevile, L., Sprong, M., Ziermans, T., Schothorst, P., et al. (2011). Neuroendocrine markers of high risk for psychosis: salivary testosterone in adolescent boys with prodromal symptoms. *Psychological Medicine*, 41(8), 1815-1822. ([impact factor 5.4](#))
  42. **van Rijn, S.**, Aleman, A., de Sonnevile, L., Sprong, M., Ziermans, T., Schothorst, P., Van Engeland, H., Swaab, H.. (2011). Misattribution of facial expressions of emotion in adolescents at increased risk of psychosis: the role of inhibitory control. *Psychological Medicine*, 41(3), 499-508. ([impact factor 5.4](#))
  43. **van Rijn, S.**, Swaab, H., Magnée, M., van Engeland, H., & Kemner, C. (2011). Psychophysiological markers of vulnerability to psychopathology in men with an extra X chromosome (XXY). *PLoS ONE*, 6(5), e20292. ([impact factor 3.7](#))
  44. Bruining, H., Swaab, H., de Sonnevile, L. M. J., **van Rijn, S.**, van Engeland, H., & Kas, M. J. H. (2011) In search for significant cognitive features in Klinefelter syndrome through cross-species comparison of a supernumerary X chromosome. *Genes, Brain and Behavior*, 10(6), 658-62. ([impact factor 3.5](#))
  45. **van Rijn, S.**, Aleman, A., de Sonnevile, L., Sprong, M., Ziermans, T., Schothorst, P., et al. (2012). Reply: Adiposity as a possible mediator of low testosterone salivary levels in adolescent boys in prodromal stages of psychosis. *Psychological Medicine*, 41(9). ([impact factor 5.4](#))
  46. **van Rijn, S.**, Swaab, H., Baas, D., de Haan, E., Kahn, R. S., & Aleman, A. (2012) Neural systems for social cognition in Klinefelter syndrome (47,XXY): evidence from fMRI. *Social Cognitive and Affective Neuroscience* 7(6):689-697. ([impact factor 5.9](#))
  47. Barneveld P, Pieterse J, de Sonnevile L, **van Rijn S**, Lahuis B, van Engeland H, & Swaab H. (2011) Overlap of autistic and schizotypal traits in adolescents with Autism Spectrum Disorders. *Schizophrenia Research*, 126: 231-236. ([impact factor 4.4](#))
  48. **Van Rijn, S.**, Aleman, A., De Sonnevile, L., & Swaab, H. (2009). Cognitive mechanisms underlying disorganization of thought in a genetic syndrome (47, xxy). *Schizophrenia Research*, 112, 91-98. (impact 4.2). ([impact factor 4.4](#))
  49. van 't Wout, M., van **Rijn, S.**, Jellema, T., Kahn, R. S., & Aleman, A. (2009). Deficits in implicit attention to social signals in schizophrenia and high risk groups: behavioural evidence from a new illusion. *PLoS one*, 4(5), e5581. ([impact factor 3.7](#))
  50. Jellema, T., Lorteije, J., **Van Rijn, S.**, Van T' Wout, M., De Haan, E., Van Engeland, H., et al. (2009). Involuntary interpretation of social cues is compromised in autism spectrum disorders. *Autism Research*, 2(4), 192-204. ([impact factor 4.5](#))
  51. Zijlstra, R., Bierman, M., Swaab, H. and **Van Rijn, S.** (2010). Role of the X chromosome in social behavioural dysfunction and autism-like behavior. *European Psychiatric Review*, 3(1), 47-50. (not yet indexed)
  52. Bruining, H., **S. Van Rijn**, H. Swaab, J. Giltay, W. Kates, M.J. Kas, H.V. Engeland, and L.D. Sonnevile (2010). The parent-of-origin of the extra x chromosome may differentially affect psychopathology in Klinefelter syndrome. *Biological Psychiatry*, 68(12), 1156-1162. ([impact factor 9.5](#))
  53. **Van Rijn, S.**, Aleman, A., Swaab, H., Krijn, T., Vingerhoets, G., & Kahn, R.S. (2007). What is said versus how it is said: Comprehension of affective prosody in men with Klinefelter (47,XXY) syndrome. *Journal of the International Neuropsychological Society (JINS)*, 13(6), 1065-1070. ([impact factor 3.0](#))
  54. **Van Rijn, S.**, Aleman, A., Swaab, H., & Kahn, R. (2007). X-chromosome abnormality and schizophrenia, *British Journal of Psychiatry*, 190 (5), 450. ([impact factor 6.6](#))
  55. Boks, M. P. M., De Vette, M., Sommer, I., **Van Rijn, S.**, Giltay, J. C., Swaab, H., & Kahn, R. S. (2007). Psychiatric morbidity and x-chromosomal origin in a Klinefelter sample. *Schizophrenia Research*, 93(1-3), 399-402. ([impact factor 4.4](#))

56. Aleman, A, Swart, M, and **Van Rijn, S.** (2008). Brain imaging, genetics and emotion, *Biological Psychology*, 79 (1), 58-69. (impact factor 3.5)
57. **Van Rijn, S.**, Swaab, H., Aleman, A., & Kahn, R.S. (2008). Social behavior and autism traits in a sex chromosomal disorder: Klinefelter (47XXY) syndrome, *Journal of Autism and Developmental Disorders*, 38(9), 1634-1641. (impact factor 3.4)
58. **Van Rijn, S.**, Swaab, H. & Aleman, A. (2008). Psychosis and autism as two developmental windows on a disordered social brain (short communication). *Behavioral and Brain Sciences*, 31(3), 280-281. (impact factor 14.9)
59. **Van Rijn, S.**, Aleman, A., Swaab, H., Vink, M., Sommer, I. & Kahn, R. (2008). Effects of an extra X chromosome on language lateralization: an fMRI study with Klinefelter men (47,XXY). *Schizophrenia Research*, 101(1-3), 17-25. (impact factor 4.4)
60. **Van Rijn, S.**, Swaab, H., Aleman, A., & Kahn, R.S. (2006). X chromosomal effects on social cognitive processing and emotion regulation: A study with klinefelter men (47,xxy). *Schizophrenia Research*, 84(2-3), 194-203. (impact factor 4.4)
61. **Van Rijn, S.**, Aleman, A., Swaab, H., & Kahn, R.S. (2006). Klinefelter's syndrome (karyotype 47,xxy) and schizophrenia-spectrum pathology. *British Journal of Psychiatry*, 189(5), 459-461. (impact factor 5.4)
62. **Van Rijn, S.**, Aleman, A., Swaab, H., & Kahn, R.S. (2005). Neurobiology of emotion and high risk for schizophrenia: Role of the amygdala and the x-chromosome. *Neuroscience and Biobehavioural Reviews*, 29(3), 385-397. (impact factor 10.3)
63. **Van Rijn, S.**, Aleman, A., van Diessen, E., Berckmoes, C., Vingerhoets, G., & Kahn, R.S. (2005). What is said or how it is said makes a difference: Role of the right fronto-parietal operculum in emotional prosody as revealed by repetitive tms. *European Journal of Neuroscience*, 21(11), 3195-3200. (impact factor 3.7)

#### **Publications in national (refereed) journals:**

1. **Van Rijn, S.**, & Swaab, H. (2007). The cognitive and neural basis of social dysfunctioning in men with Klinefelter syndrome [De cognitieve en neurale basis van sociaal disfunctioneren bij mannen met het Klinefelter syndroom]. *Neuropraxis*, 11(4), 99-106.
2. **Van Rijn, S.**, & Swaab, H. (2015). The cognitive and behavioral phenotype of children with an extra X chromosome: Klinefelter syndrome (47,XXY) and Trisomy X (47,XXX) [Het cognitieve en gedragsfenotype van kinderen met een extra X-chromosoom: Klinefelter syndroom (47,XXY) en Trisomie X (47,XXX)]. *Tijdschrift voor Neuropsychologie*, 10(2), 89-103.

#### **Book chapters:**

1. **Van Rijn, S.**, Van 't Wout M. and Spikman, J. (2012). [Sociale cognitie en emotie] Social cognition and emotion. In [Klinische Neuropsychologie] *Clinical Neuropsychology*. Amsterdam: Boom.
2. **Van Rijn, S.**, & Swaab, H. (2011). [Sociale cognitie, emotie en het brein in ontwikkeling] Social cognition, emotion and the developing brain. In Swaab, Bouma, Hendriksen, Konig (Ed.), [Klinische Kinderneuropsychologie] *Clinical Childneuropsychology*. Amsterdam: Boom.

#### **Books:**

1. Van Rijn, S. Langenhoff, J. and Cover, V. (2017). [Opgroeien met het syndroom van Klinefelter (47,XXY), Trisomie X (47,XXX) of 47,XYY: Een handboek voor ouders en betrokkenen] *Growing up with Klinefelter syndrome, (47,XXY), Trisomy X (47,XXX) or 47,XYY: A handbook for parents and clinicians*. Leiden: TRIXY Center of Expertise.

**Impact of publications:**

My RG score on Research Gate is 34.8, which translates to my score being higher than 92.5 % of all Research Gate members ([www.researchgate.net/profile/Sophie\\_Van\\_Rijn2](http://www.researchgate.net/profile/Sophie_Van_Rijn2)).

My average impact factor is 4.6 and my median impact factor 3.7. To compare, the median impact factors typical for my field (Clinical Psychology, Biological Psychology, Developmental Psychology, Psychiatry) are between 1.7 and 1.9, as derived from Web of Science JCR Journal Citation Reports.