Propositions pertaining to the thesis

Unisutural craniosynostosis:
simple or complex?

1. The prevalence of craniosynostosis is increasing, which cannot be attributed to more awareness alone. *(this thesis)*

2. Prenatal detection of unisutural craniosynostosis remains challenging, despite subtle changes in prenatal ultrasound parameters at 20 weeks of gestation. *(this thesis)*

3. Perinatal care providers should be involved in the craniofacial team, considering that perinatal complications are common in unisutural craniosynostosis patients and their mothers. *(this thesis)*

4. Venous cranial outflow obstruction is present in single suture craniosynostosis patients and should be one of the main subjects in (single suture) craniosynostosis research for the coming years. *(this thesis)*

5. Occipito-frontal head circumference measurement should take a prominent role in the post-operative follow-up of metopic synostosis patients as its deflection is closely related to the occurrence of intracranial hypertension. *(this thesis)*

6. Regrettably, the world of academia, from which the modern web sprung, has been among the most resistant to change and one of the last to embrace the internet revolution of open access publishing. *(K. Leetaru The future of open access: Why has academia not embraced the internet revolution? Forbes 2016)*

7. Academics receive an average of 312 spam invitations each month. Unsubscribing reduces the frequency of invitations by only 19% after one year. In total, 83% had little or no relevance to the recipients' research interests. *(A. Grey et al. We read spam a lot: prospective cohort study of unsolicited and unwanted academic invitations. BMJ 2016)*

8. Satisfaction with facial appearance of individuals with a congenital facial deformity will seldom reach the level of satisfaction of non-disfigured persons. A combination of surgical correction and psychological help may improve patient satisfaction. *(Versnel et al. Satisfaction with facial appearance and its determinants in adults with severe congenital facial disfigurement: a case referent study. J Plast Reconstr Aesthet Surg. 2010)*

9. The perfect microvascular anastomosis is only a robot away. *(L Mattos et al. Microsurgery Robots: addressing the needs of high-precision surgical interventions. Swiss Med Wkly, 2016)*

10. An innovative surgeon should always be inclined to ask 'Pourquoi pas?'. *(Dr. Paul Tessier, one of the 'founding fathers' of craniofacial surgery)*

11. Kein geloel, fuβball spielen! *(Ernst Happel)*