Propositions belonging to the thesis

**Hyperthermia-induced degradation of BRCA2**

From bedside to bench and back again

1. It is currently unclear whether physics or biology will make the largest contribution to driving hyperthermia application in cancer treatment forward.  
   *This thesis and Dewhirst et al, Int J Hyperthermia, 2017*

2. To optimally attenuate homologous recombination, hyperthermia should be applied for one hour in the range between 41-43 °C, following rather than preceding irradiation.  
   *This thesis*

3. Incorrect localization of RAD51 may be a better biomarker for heat deposition *in situ* than heat-mediated degradation of BRCA2.  
   *This thesis*

4. Identifying the type of proteasome that mediates the final step of BRCA2 degradation upon hyperthermia treatment is not straightforward.  
   *This thesis*

5. HSP90 is currently the most promising target to enhance local effects of hyperthermia.  
   *This thesis*

6. Hyperthermia is generally regarded as an experimental treatment with no realistic future in clinical cancer therapy. This is totally wrong.  
   *Horsman and Overgaard, Clinical Oncology, 2008*

7. Cancer is a disease of the genes. If not eradicated, cancer can therefore always find a way to develop resistance to precision medicine.

8. Both scientists who aim to find a cure for cancer and cancer patients undergoing treatment should adhere to the Alpe ‘d Huzes motto: “opgeven is geen optie”.

9. The most dangerous result is the one you were hoping for.  
   *Levi Garraway, Nature 2017*

10. It’s not a silly question if you can’t answer it.  
    *Jostein Gaarder, Sophies Verden, 1991*

11. Angst is mar veur eben, spiet is veur altied.  
    *Daniël Lohues, Allenig II, 2008*

Nathalie van den Tempel, 2017