

Propositions accompanying the thesis:  
**Biological Determinants of Depression:  
An epidemiological approach**

1. Psychiatric and cognitive problems are less important determinants of the negative feedback control of the HPA-axis than gender, socioeconomic status and poor health (*this thesis*).
2. Genetic variation in the key protein domain of the cortisol binding globulin explains inter-individual differences in cortisol (*this thesis*).
3. Impaired vasomotor reactivity, which reflects microangiopathy but also autonomous disturbances in cerebral arteries, is a specific predictor of depressive disorders (*this thesis*).
4. A $\beta$  peptides play a role in the etiology of depression independent of dementia (*this thesis*).
5. A phenotypically more inclusive approach may help to achieve the large sample sizes needed to detect susceptibility loci for depression (*this thesis*).
6. A better understanding of the impact of immigration and acculturation on diet change would improve the public health.
7. Important psychiatric traits such as anger, irritability, and apathy are not well-represented in the current psychiatric classification systems and are thus often inappropriately diagnosed and cared for by psychiatrists.
8. The acquired wisdom that certain conditions or events bring about other conditions or events is an important survival trait. (Kenneth Rothman)
9. The frequency of somatic representation of depression declines with the transitional process in developing countries.
10. The increasing civil solidarity can partly compensate the negative health effects of oppression.
11. One should read poetry to understand the effects of common genetic variants:  
"To live! Like a tree alone and free. Like a forest in brotherhood." (Nazim Hikmet Ran, 1930s)

*Nese Direk, June 23, 2017, Rotterdam*