

Stellingen behorende bij het proefschrift:

## MACROPHAGE PHENOTYPES IN DEGENERATIVE JOINT DISEASES

1. High levels of macrophages alone do not induce the onset of osteoarthritic features. (*This thesis*)
2. Management of specific macrophage phenotypes can be a good approach to guide osteoarthritis progression. (*This thesis*)
3. Determination of the inflammatory state of the synovium is imperative when using modulation of macrophage phenotypes for a personalized medicine approach. (*This thesis*)
4. Modulation of the behaviour of macrophages can circumvent some adverse effects of biomaterials after implantation. (*This thesis*)
5. Distinction of macrophage phenotypes is important to understand their therapeutic potential in joint diseases. (*This thesis*)
6. Nothing in life is to be feared, it is only to be understood and now is the time to understand more, so that we may fear less. (*Marie Skłodowska-Curie*)
7. "Fee-for-service" payment systems often penalize health care organizations and health care professionals who find ways to deliver care more efficiently and fail to reward those who improve the quality of care. (*Obama B, JAMA 2016*)
8. The impact factor is often used, improperly, to provide a mathematical measure of a scientist's productivity, on the basis of where they published their results. (*Roberts, Nature 2017*)
9. Mixed cultures of bone marrow-derived mesenchymal stem cells and ear or nasal chondrocytes can be advantageous for cell-based cartilage repair in the head and neck area. (*Pleumeekers MM et al. Plast Reconstr Surg. 2015*)
10. Science involves confronting our absolute stupidity. The more comfortable we become with being stupid, the deeper we will wade into the unknown and the more likely we are to make big discoveries. (*Schwartz MA, J Cell Sci 2008*)
11. Life is like a piano, what you get out of it depends on how you play it. (*Tom Lehrer*)