

Risk assessment in liver transplantation

1. Recipients of donation after circulatory death (DCD) grafts have good outcomes in the early postoperative phase, but the real burden of DCD liver transplantation arises after hospital discharge, according to the Comprehensive Complication Index. *(this thesis)*
2. Duration of hypoxia, rather than hypotension, during the agonal phase in DCD donation has a significant impact on the severity of hepatic ischemia/reperfusion injury and subsequent outcomes after DCD liver transplantation. *(this thesis)*
3. The UK DCD Risk Score is the most reliable prediction model for the detection of high-risk and futile donor and recipient combinations in DCD liver transplantation. *(this thesis)*
4. The postreperfusion syndrome during liver transplantation is the first manifestation of severe hepatic ischemia/reperfusion injury and predictive for the development of postoperative acute kidney injury. *(this thesis)*
5. The “Golden Hour” does not only apply to traumatology, but limiting warm ischemia time to this period is equally important in preventing acute kidney injury after DCD liver transplantation. *(this thesis)*
6. Solely the use of extended criteria grafts in liver transplantation is not associated with development of chronic kidney disease. *(this thesis)*
7. There are three scenarios for healthcare in the United Kingdom after Brexit: somewhat negative, very negative and disastrous *(adapted from Fahy et al, the Lancet, 2017)*
8. Three cups of coffee a day keeps the hepatologist away. *(based on The Rotterdam Study, Alferink et al, Journal of Hepatology, 2017)*
9. We diagnose only things we think about, we think only about things that we have studied.
10. Life would be tragic, if it weren't funny. *(Stephen Hawking)*
11. One does not discover new lands without consenting to lose sight of the shore for a very long time. *(Andre Gide)*