STUDIES ON CARTILAGE AND BONE DISEASE IN MUCOPOLYSACCHARIDOSES AND MUCOLIPIDOSES

1. The foetal origin of the cartilage and bone pathology in Mucopolysaccharidosis and Mucolipidosis patients poses the greatest challenge for adequate treatment. (dit proefschrift)

2. The level of residual enzyme activity of α-L-iduronidase correlates with the severity of the phenotype in Mucopolysaccharidoses type I. (dit proefschrift)

3. In Mucopolysaccharisosis type VI, the final shape and angle of the femoral head differs between individual patients. (dit proefschrift)

4. Severe skeletal abnormalities, resulting from abnormal bone development and severe progressive osteoarthritis, are the hallmarks of adult Mucolipidosis type III. (dit proefschrift)

5. Craniosynostosis occurs frequently in MPS patients and signs and symptoms of increased intracranial pressure should be monitored in both neuronopathic and non-neuronopathic patients as surgical intervention is possible. (dit proefschrift)

6. Developmental changes in the hip joint of the femoral head or the acetabulum affects their co-adaptive relationship leading to responsive growth of its companion. (Siffert 1981)

7. The low-dose EOS imaging system is a reliable and reproducible method for 3D acetabular orientation in the standing position and a new perspective for analysing femoroacetabular abnormalities in the functional position. (Thelen 2016)

8. Whole exome (genome) sequencing contributes to the understanding of rare and common human diseases. (Choi 2009)

9. The best revenge is to live on and prove yourself. (Eddie Vedder)

10. Je gaat het pas zien als je het door hebt. (Johan Cruijff)

11. In iedere traan schuilt een mooie herinnering. (Jari Schouten)

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