STELLINGEN

behorende bij het proefschrift

Clinical and genetic aspects of hypertrophic cardiomyopathy

1. Genotype-positive status is a risk factor for adverse outcome in patients with hypertrophic cardiomyopathy (HCM). (this thesis)

2. HCM caused by Dutch myosin-binding protein C founder mutations is not as benign as was previously thought. (this thesis)

3. Genetic testing facilitates HCM family screening by reducing the number of clinical screening visits to the outpatient clinic. (this thesis)

4. Anterior mitral valve leaflet length and global longitudinal strain are not useful parameters for the prediction of the development of HCM in genotype-positive, phenotype-negative relatives (this thesis)

5. Women with HCM present later in life with more advanced disease. (this thesis)

6. There needs to be much greater emphasis on personalized medicine in HCM, based on an individualized approach to diagnosis and risk assessment. (Elliott, European Heart Journal, 2017)

7. Incorporating genetic testing to identify at-risk mutation carriers, defining features of early disease, and developing therapies to mitigate fibrosis will foster vital new opportunities to change the natural history of HCM. (Ho, New England Journal of Medicine, 2010)

8. The ever increasing knowledge of disease continually reveals new problems and thus widens the scope of our ignorance. (Brigden, Heart, 1987)

9. Transportation noise contributes to the development of cardiovascular risk of coronary artery disease, arterial hypertension, stroke, and heart failure. (Munzel, Journal of the American College of Cardiology, 2018)

10. The only way to be totally free is through education (José Martí)

11. Tijd is de nieuwe luxe (Linda Evangelista)