

# STELLINGEN

behorende bij het proefschrift:

## Improving the Diagnosis of Prosthetic Heart Valve Endocarditis

1. Combined visual and quantitative  $^{18}\text{F}$ -FDG PET/CT is the most accurate diagnostic test in patients with suspected prosthetic heart valve endocarditis and should be considered early in their diagnostic work-up. (*This thesis*)
2.  $^{18}\text{F}$ -FDG PET/CT allows for detection of prosthetic heart valve endocarditis before structural complications occur, preventing missed diagnoses and allowing for timely antibiotic treatment, possibly reducing the need for high-risk reoperations. (*This thesis*)
3. Low inflammatory activity and prior use of certain surgical adhesives are important confounders that need to be taken into account, yet recent valve implantation is no reason to omit  $^{18}\text{F}$ -FDG PET/CT imaging in patients suspected of early prosthetic heart valve endocarditis. (*This thesis*)
4. Following prosthetic heart valve surgery or combined aortic valve and ascending aortic surgery, CT angiography is the imaging modality of choice for routine follow-up and evaluation of all complications. (*This thesis*)
5. In patients with prosthetic heart valve endocarditis, the radiation dose that comes with additional imaging should be evaluated in light of the mortality associated with a misdiagnosis or a delay in appropriate treatment. (*This thesis*)
6. Few diseases present greater difficulties in the way of diagnosis than malignant endocarditis, difficulties which in many cases are practically insurmountable. (*Osler W. BMJ 1885;3:577-79*)
7. The goal of new diagnostic studies should never be to replace –but rather to assess the additional value on top of– existing diagnostic tests, each with their specific strengths and weaknesses, to obtain a composite test with optimal diagnostic accuracy. (*Qin J et al. Stat Med. 2010;29:2905-19*)
8. In diagnostic studies in which a gold reference standard is not feasible or absent, expert panel diagnosis with staged unblinding of the index test result is the least-worst alternative. (*Bertens LCM et al. PLoS Med. 2013;10:e1001531*)
9. Investigators do their utmost best to prevent or control confounding. Unfortunately, in this process, errors are frequently made. (*Jager KJ et al. Kidney International 2008;73:256-260*)
10. Insights from investigations of rare diseases can help improve understanding of more-common conditions, and for researchers who venture into studies of such disorders, the experience can be uniquely rewarding. (*Madhusoodanan J. The Scientist. 2016;9:e1-e8*)
11. Everything is conditional. You just can't always anticipate the conditions. (*House MD, Season 3, Episode 7, Fox Broadcasting Company*)