Stellingen behorende bij het proefschrift

Influence of (Co-)Medication on Haemostatic Biomarkers

1. Use of statins but not of antiplatelet agents is associated with a modest decrease in D-dimer levels. *(this thesis)*
2. The most difficult associations to detect are those for groups of drugs that unexpectedly increase the risk of VTE. *(this thesis)*
3. Rosuvastatin use leads to an improved fibrinolysis profile compared to non-use. *(this thesis)*
4. Among the cholesterol lowering drugs, statins but not PCSK9-inhibitors are proven to have antithrombotic pleiotropic effects. *(this thesis)*
5. The YEARS algorithm is an important improvement in the diagnostic process in all patients with suspected pulmonary embolism when compared to the Wells score. *(this thesis)*
6. A meta-analysis is only an imperfect observational study. *(Packer M., Circulation. 2017 Nov 28;136(22):2097-2099)*
7. Anticoagulation clinics should always be informed when a drug is stopped or prescribed to patients who are treated with vitamin K antagonists in order to be able to more frequently check INR values, also when these drugs are not commonly known to affect coagulation. *(Andersson M.L. et al. Eur J Clin Pharmacol. 2019 Oct;75(10):1387-1392)*
8. Not all of the 46% potentially preventable hospital admissions reported in the HARM-study are actually preventable in clinical practice. *(Eindrapport: vervolgonderzoek medicatieveiligheid, jan 2017)*
9. Point-of-care ultrasound (PoCUS) is an emerging important diagnostic tool for internists. *(Olgers T.J. et al. Neth J Med. 2019 Jun;77(5):168-176.)*
10. A good decision is based on knowledge and not on numbers. *(Plato)*
11. When life gets you down, you know what you gotta do? Just keep swimming. *(Dory, movie Finding Nemo, Disney, 2003)*

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