

Efficacy and toxicity of asparaginases during prospective drug monitoring in patients with childhood acute lymphoblastic leukemia

1. PEGasparaginase should be used instead of native *E.coli* asparaginase already in induction therapy for leukemia (this thesis).
2. The starting dose of PEGasparaginase dose should be lowered from 2,500 IU/m² to 1,500 IU/m² (this thesis).
3. Therapeutic drug monitoring of asparaginase should be used to individualize the dose and to detect silent inactivation (this thesis).
4. Desensitization approaches are not advisable in case of silent inactivation of PEGasparaginase; instead, it is recommended to switch to *Erwinia* asparaginase (this thesis).
5. Severe dyslipidemia occurs frequently as a side effect of asparaginase, but is temporary and is no clinical reason to interrupt asparaginase therapy (this thesis).
6. Monitoring of the serum asparaginase activity levels is a better way to detect inactivation of asparaginase than measuring serum asparaginase antibodies (this thesis).
7. Running has taught me, perhaps more than anything else, that there's *no reason to fear starting lines...or other new beginnings* (Amby Burfoot).
8. We must use time wisely and forever realize that the time is always ripe to do right (Nelson Mandela).
9. When it is obvious that the goals cannot be reached, don't adjust the goals, adjust the action steps (Confucius).
10. Als elke vrijwilliger een ster kreeg, werd het nooit meer donker (Loesje).
11. Home is where I work, and I work everywhere (Alfred Nobel).

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