Stellingen behorende bij het proefschrift:

**Coronary Artery Disease:**
from Atherosclerosis to Cardiogenic Shock

1. Intravascular ultrasound virtual histology is able to identify vulnerable plaques that may cause coronary events. (*this thesis*)

2. Near-infrared spectroscopy is able to measure lipid core burden in coronary atherosclerosis, which is a predictor of cardiovascular outcome. (*this thesis*)

3. Blood biomarkers of inflammation, unfavorable lipid profile, elevated coagulation and myocardial necrosis are associated with high-risk coronary plaque characteristics. (*this thesis*)

4. Proteomics- and lipidomics-based research carry potential to reveal novel blood biomarkers of coronary artery disease. (*this thesis*)

5. It is important to search for treatment strategies that can lower mortality of cardiogenic shock in the acute phase. The fact that survivors have a favorable long-term clinical outcome is encouraging. (*this thesis*)

6. Intra-aortic balloon pump counterpulsation remains the method of first choice for mechanical circulatory assistance in cardiogenic shock, despite the lack of a proven survival benefit. (*this thesis*)

7. The risk of a vulnerable patient is affected by vulnerable plaque and/or vulnerable blood and/or vulnerable myocardium. A comprehensive assessment must consider all of the above. *Naghavi - Circulation. 2003;108:1664-1672*

8. If the endpoint is not reached, the value of the therapy is not proved. This does not mean that the therapy is proved to be of no value. *King - J Am Coll Cardiol Intv. 2011;4:134-135*

9. “Angioplasties are a little like potato chips. You can’t have just one.” *William Castelli*

10. “The important thing is not to stop questioning. Curiosity has its own reason for existing.” *Albert Einstein*

11. Alone we go faster, together we go further.