1. High expression of IGSF4 in pediatric AML with MLL-rearrangements and t(9;11)(p22;q23) is explained by promoter demethylation. (this thesis)

2. Differences in miRNA expression reflect the genetic heterogeneity of pediatric AML. (this thesis)

3. RUNX1 mutations occur rarely in de novo pediatric AML and seem associated with poor outcome. (this thesis)

4. Epigenetic events like miRNA deregulation and DNA methylation contribute to leukemogenesis in pediatric AML, thereby providing promising candidates for future research towards targeted therapy. (this thesis)

5. MiR-9 is a tumor suppressor in pediatric AML characterized by t(8;21). (this thesis)

6. Only international collaboration will provide adequate numbers of pediatric AML patients to power trial questions investigating new targeted therapies within subgroups. (U. Creutzig, Blood 2012)

7. The good, what particular men may do separately in relieving the sick, is small, compared with what they may do collectively. (B. Franklin, 1751)

8. We need to view data as a community resource, much like a shared park, rather than as personal property. (J. Drazen, NEJM 2015)

9. The good physician treats the disease; the great physician treats the patient who has the disease. (William Osler)

10. Elke Nederlander moet vrij zijn om zijn eigen arts te kiezen. (n.a.v. aanpassing artikel 13 zorgverzekeringswet, december 2014)

11. It takes courage to grow up and turn out to be who you really are. (E.E. Cummings)