

Stellingen behorende bij het proefschrift:

Acute Kidney Injury in Critically Ill Children

Do not squeeze the kidneys!

1. The presence of AKI in patients at the time of admission to a pediatric ICU is greatly underestimated. (this thesis)
2. The use of loop diuretics during ECMO with concomitant continuous hemofiltration should be considered an independent risk factor for death. (this thesis)
3. Reference values of the urinary biomarker NGAL vary with age and gender. (this thesis)
4. The use of only one biomarker – e.g. NGAL or KIM-1 – is insufficient to identify patients at risk of AKI. (this thesis)
5. ECMO survivors, especially those with a prior history of acute kidney injury, are at risk of developing chronic kidney disease or hypertension necessitating adequate treatment on the long term. (this thesis)
6. Socioeconomic status is associated with parental consent for their child's participation in pediatric clinical trials. (Hoberman A, et al. JAMA Pediatr 2013;167(6):561-6)
7. Good communication and effective teamwork between intensivists, nephrologists and other specialists involved is vital to optimize the outcome for each individual child in the ICU. (Kiessling SG, et al. Pediatric Nephrology in the ICU, 2008)
8. There are some four million different kinds of animals and plants in the world. Four million different solutions to the problems of staying alive. (David Attenborough, Life on Earth: A Natural History)
9. Dutch cyclists should use their bicycle on a regular basis since more cycling reduces the risk of severe single-bicycle crashes. (Schepers P, Inj Prev 2012;18(4):240-245)
10. Once the travel bug bites there is no known antidote, and I know that I shall be happily infected until the end of my life. (Michael Palin)
11. Het verlies van de basisbeurs is een ernstige bedreiging voor het verrichten van promotieonderzoek vóór aanvang van de co-schappen.