Stellingen behorend bij het proefschrift:

**Cloacal Malformations**

**When all ends meet**

1. Patients with cloacal malformations are not just surgical patients, nor urological or gynecological ones. They are all three and should be treated likewise. *(This thesis)*

2. Both the anorecto vagino urethroplasty as well as the total urogenital mobilization are adequate techniques for cloacal reconstruction with similar rates of postoperative complications. *(This thesis)*

3. Age at cloacal reconstruction has no influence on long-term functional outcome. *(This thesis)*

4. The posterior sagittal technique, including techniques for cloacal malformation surgery, do not lead to additional bladder dysfunction. *(This thesis)*

5. Patients with cloacal malformations achieve similar quality of life as female patients with less complex anorectal malformations. *(This thesis)*

6. Cloaca is the most severe degree of imperforate anus. *(Hardy Hendren, Ann Surg 1998)*

7. The term ‘persistent cloaca’ for the human anomaly is a misnomer. *(Dietrich Kluth, Semin Ped Surg 2010)*

8. In een fictief West-Europees land met ca. 17 miljoen inwoners zou maximaal één centrum moeten zijn dat patiënten met een cloacale malformatie opereert.

9. Good clinical judgement comes from experience, experience comes from bad surgical management. *(Arthur C. Beall Jr./Alberto Peña)*

10. If you don’t take a temperature, you can’t find a fever and you may miss the cloaca. *(10th law of the House of God, S. Shem, 1978/Versteegh 2015)*

11. One good thing about music, when it hits you feel no pain. *(Bob Marley 1971)*