1. Family-based studies are not passé, but instead provide powerful insight into the pathophysiology of human disease (This thesis).

2. Impaired white matter development is potentially aetiological in the vulnerability for schizophrenia (This thesis).

3. Segregation with disease of candidate variants in families provides another layer of converging evidence for pathogenicity, which is complementary to case/control studies (This thesis).

4. Family-based studies can provide the basis for developing personalized interventions (This thesis).

5. Genetic counselling and testing should be part of the diagnostic algorithm in adult psychiatry for patients with a syndromic presentation (This thesis).

6. It would be improbable that there is no organization in the genetics underlying psychiatric disorders (Kenneth Kendler, Molecular Psychiatry, 2013, 18, 1058-1066).


8. Tunnel vision should be avoided. Not all disease aetiology will be solely genetic in nature (Polderman et al, Nature Genetics, 2015, 47, 702-709).

9. Mental disorders are biological disorders (Thomas Insel, National Institutes of Mental Health, Director's Blog, 29 April 2013).

10. The narcissism of small differences between psychoanalysis and the neurosciences is counterproductive. Both fields should instead embrace each others’ methods and not dwell on erroneous determinism of their founding fathers (Eric Kandel, American Journal of Psychiatry, 1999, 156, 505-524).

11. Nothing is art if it does not come from nature (Antoni Gaudi i Cornet).

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