

### New Treatment Perspectives in Prader-Willi Syndrome

1. Young adults with Prader-Willi syndrome (PWS) who have attained adult height and were treated with growth hormone (GH) during childhood benefit from continuation of GH treatment, as GH maintains their improved fat mass and lean body mass, whereas body composition deteriorates if GH is discontinued. *(this thesis)*
2. Continuation of GH treatment in young adults with PWS after attainment of adult height is safe and does not jeopardize their metabolic health profile. *(this thesis)*
3. The switch to excessive weight gain in children with PWS coincides with an increase in the AG/UAG ratio, prior to the start of hyperphagia. *(this thesis)*
4. Even in the presence of very high fasting AG/UAG ratios, the ghrelin system of young adults with PWS shows a physiological response after glucose intake. *(this thesis)*
5. Oxytocin has promising effects on social and food-related behaviour in children with PWS aged 6 to 11 years. *(this thesis)*
6. Rare diseases are rare, but rare disease patients are numerous. *(Orpha.net / Reis et al. Clin Immunol 2015)*
7. Parental encouragement to clear one's plate during childhood is a predictor of plate clearing tendencies, which is associated with a heavier body weight in young adulthood. *(Robinson et al. Eur J Clin Nutr 2015)*
8. Cycling for at least one hour a week is associated with improved fitness and reduced cardiovascular disease risk factors. *(Larouche et al. Health Rep 2016)*
9. A healthy sunlight exposure might increase the brain's release of serotonin, which is associated with happiness and improved social functioning. *(Lambert et al. Lancet 2002)*
10. Research should close and not widen the gap between bench and bedside. *(Lenfant, N Engl J Med 2003)*
11. Everybody is a genius. But if you judge a fish by its ability to climb a tree, it will live its whole life believing that it is stupid. *(Albert Einstein)*

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