

Stellingen behorende bij het proefschrift:

Complications in Esophageal Surgery

1. The esophago-gastric anastomosis remains the Achilles heel of gastric tube reconstruction. (*this thesis*)
2. The end-to-end esophago-gastric anastomosis reduces leakage compared to the end-to-side anastomosis but is accompanied by a higher stricture rate. (*this thesis*)
3. Routine examination, gastroscopy or contrast swallow study, is not indicated after gastric tube reconstruction. (*this thesis*)
4. The Comprehensive Complication Index is the most sensitive tool to score postoperative complications. (*this thesis*)
5. Neoadjuvant chemo radiotherapy followed by surgery does not lead to more postoperative complications compared to surgery alone for esophageal carcinoma. (*this thesis*)
6. If you want to advance in science, do not drink tea.
7. Prophylactic open repair of abdominal aneurysm brings "early pain but later gain". (*Eur J Vasc Endovasc Surg. 2016 Dec;52(6):719-720*)
8. Patients with a high ethanol blood level are more likely to survive trauma. (*Alcohol. 2014 Jun;48(4):391-400*)
9. Cutting out bad habits is more effective than cutting out bad organs. (*Herbert M. Shelton*)
10. It's more important to know which person has the disease, than to know which disease the person has. (*Hippocrates*)
11. De anesthesist moet altijd verslappen, de chirurg nooit. (*dr. C.J. van Steensel, chirurg*)