



Universiteit
Leiden
The Netherlands

Improving breast cancer outcome by preoperative systemic therapy and image-guided surgery

Mieog, J.S.D.

Citation

Mieog, J. S. D. (2011, October 26). *Improving breast cancer outcome by preoperative systemic therapy and image-guided surgery*. Retrieved from <https://hdl.handle.net/1887/17983>

Version: Corrected Publisher's Version
[Licence agreement concerning inclusion of doctoral thesis in the Institutional Repository of the University of Leiden](#)
License:
Downloaded from: <https://hdl.handle.net/1887/17983>

Note: To cite this publication please use the final published version (if applicable).

STELLINGEN

behorend bij het proefschrift

Improving breast cancer outcome by preoperative systemic therapy and image-guided surgery

1. To obtain acceptable local recurrence rates following preoperative chemotherapy adequate surgery is necessary after complete clinical response. (*this thesis*)
2. Expression of the cancer stem cell marker aldehyde dehydrogenase-1 is of prognostic significance in young breast cancer patients and not in elderly patients. (*this thesis*)
3. Clinical introduction of tumor-specific targeting strategies using near-infrared fluorescence imaging has the potential to increase the radical resection rate in breast-conserving surgery. (*this thesis*)
4. There is no direct benefit of premixing indocyanine green with human serum albumin prior to injection for sentinel lymph node mapping in breast cancer patients. (*this thesis*)
5. That which is logical is apt not to be true, and that which is true often seems illogical.
Bernard Fisher, Cancer Res 1980; 40:3863
6. Tumors cannot acquire resistance to resection. *Roger Tsien, 2008 Nobel Prize winner*
7. The problem is background, not signal. *John Frangioni, Mol Imaging 2009; 8:303-4*
8. The greatest lesson in life is to know that even fools are right sometimes. *Winston Churchill*
9. Wetenschappelijk schrijven is de kunst van het weglaten.
10. Bij medische subsidies bestaat er een omgekeerde relatie tussen de vereiste uitgebreidheid van een subsidieaanvraag en de hoogte van het te verkrijgen beursbedrag.
11. Teneinde de hogere kosten te compenseren die bij de operatieve behandeling van patiënten met ernstig overgewicht ontstaan door de langere operatietijd, hogere kans op complicaties en langere herstelperiode, dient er een nieuwe bekostigingsschaal toegevoegd te worden, de DBC-plus.
12. Common-sense evidence: in het land der dubbelblinden is eenoog koning.