Growth, endocrine function and quality of life after haematopoietic stem cell transplantation

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Stellingen behorend bij het proefschrift

‘Growth, endocrine function and quality of life after haematopoietic stem cell transplantation’

1. Both incidence and severity of growth impairment after single fraction total-body irradiation with absorbed doses ≤ 8 Gy and a high instantaneous dose rate of 25 cGy x min^{-1} are comparable to that reported after fractionated or hyperfractionated total-body irradiation (*this thesis*).
2. ‘Small for gestational age of unknown origin with insufficient catch-up growth’ is a descriptive term for a subgroup of patients with idiopathic short stature, and should not be used as diagnostic entity.
3. Fractionation does not reduce the incidence of gonadal failure in children receiving total-body irradiation based conditioning for haematopoietic stem cell transplantation (*this thesis*).
4. Dubbelzinnigheid bestaat slechts bij de gratie van de toehoorders.
5. Variation in the reported incidence of growth hormone deficiency after total-body irradiation based conditioning for haematopoietic cell transplantation depends more on the diagnostic criteria for growth hormone deficiency than on the conditioning regimen used.
6. Radiation-free, busulphan-based conditioning for haematopoietic stem cell transplantation may be associated with growth hormone deficiency (*this thesis*).
7. "The only reason for time is so that everything doesn't happen at once." Albert Einstein (1879-1955).
8. Treatment with recombinant human growth hormone will increase growth of most children with radiation induced growth impairment, irrespective of growth hormone secretion status (*this thesis*).
9. A 2-year course of Letrozole increases predicted adult height as effectively as treatment with a GnRH analogue in boys with idiopathic short stature, without postponing pubertal development and without negative effects on bone mineral density. (*JCEM 2005;90:6396–6402*).
10. Prediction of adult height is like weather forecasting: lowering expectations will increase patients’ satisfaction with reality.
11. Patterns of growth and body proportions after total-body irradiation should be analysed separately for both sexes (*this thesis*).
12. "In theory, there is no difference between theory and practice. But, in practice, there is." Jan L.A. van de Snepscheut (1953-1994).

Stellingen