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**Author:** Debonnaire, Philippe Jean Marc Rita  
**Title:** Advanced echocardiography and clinical surrogates to risk stratify and manage patients with structural heart disease  
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PROPOSITIONS

Stellingen behorend bij het proefschrift

ADVANCED ECHOCARDIOGRAPHY AND CLINICAL SURROGATES TO RISK STRATIFY
AND MANAGE PATIENTS WITH STRUCTURAL HEART DISEASE

1. The normal mitral valve is a functional complex that relies on normal morphology, geometry and function of all its constituents. (Curr Opin Cardiol. 2012 Sep 27(5):455-464; this thesis)

2. Mitral valve leaflets should not be regarded as ‘innocent bystander’ in functional mitral regurgitation patients, but might represent a biological or interventional therapeutic target. (Eur Heart J Cardiovasc Imaging. 2015 Mar 16(3):290-299; this thesis)

3. 3-Dimensional transesophageal echocardiography has become a prerequisite for adequate patient selection, procedural guidance and clinical success of patients undergoing percutaneous mitral valve repair using MitraClip. (Eurolntervention. 2014 Nov 10(7):884-886; this thesis)

4. Non invasive cardiac imaging of left ventricular fibrosis might further refine timing of surgery in patients with left-sided valvular heart disease and ultimately improve outcome after surgery. (Heart. 2015 Mar 101(5):397-407; this thesis)

5. Intensification of follow-up surveillance for atrial fibrillation in hypertrophic cardiomyopathy patients should not be restricted to patients with enlarged left atrial diameter only, contrary to current recommendations. (Submitted; this thesis)

6. Just measuring the ejection fraction leaves out all information on pressure, tissue properties, and the transformation from shortening of the individual contractile elements into the global deformation of the left ventricle. (Bijnens, Eur J Echocardiogr. 2009 Mar 10(2):216-226)
7. The low positive predictive value of any of the sudden cardiac death (SCD) risk factors in hypertrophic cardiomyopathy and the variability in the strength of data introduce a degree of ambiguity to the SCD risk assessment and dramatically limit the applicability of counting the number of risk factors as the primary risk assessment methodology. (Gersh, *Circulation*. 2011 Dec 124(24):2761-2796)

8. Since strain imaging can identify left ventricular dysfunction earlier than conventional methods, this opens a new perspective in heart failure prophylaxis and primary prevention with institution of therapeutic measures before the patients develop symptoms and irreversible myocardial dysfunction. (Smiseth, *Eur Heart J*. 2015 Oct: Epub ahead of print)

9. Luck is when preparation meets opportunity. (Seneca, 3 BC-65 AD)

10. Quality means doing it right when no one is looking. (Henry Ford, 1863-1947)

11. One only sees what he looks for and one only looks for what he knows. (Dr Merrill Sosman, 1890-1959)

12. Medicine is a science of uncertainty and an art of probability. (Sir Dr William Osler, 1849-1919)