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Viral infections in young infants : epidemiologic and diagnostic aspects of ToRCH, enterovirus and human parechovirus

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STELLINGEN

behorende bij het proefschrift

Viral infections in young infants

**Epidemiologic and diagnostic aspects of ToRCH,
Enterovirus and Human Parechovirus infections**

1. The 'o', 'other pathogens', used in the ToRCH acronym should not be forgotten when composing a differential diagnosis on congenital infections. (*This thesis*)
2. Congenital CMV should be investigated in all neonates with isolated lenticulostrate vasculopathy (LSV) and in those that are 'unexplained' small for gestational age. A complete 'ToRCH-screening', for those indications, is redundant. (*This thesis*)
3. Enterovirus and Human Parechovirus PCR on serum and cerebrospinal fluid should be standard of care in all infants under 90 days of age with sepsis-like illness. (*This thesis*)
4. Long-term neurodevelopmental impairment one year after enterovirus or human parechovirus induced sepsis-like illness doesn't occur more often than in the general population. But larger and longer follow-up studies are needed to provide a more definite advice. (*This thesis*)
5. In young infants with enterovirus or human parechovirus induced sepsis-like illness the best screening for myocardial involvement is (remains) clinical vigilance. (*This thesis*)
6. Differences in severity of disease and the age of onset of human parechovirus central nervous system infection may influence gross motor function delay. (*Van Hinsbergh et al., Pediatr Infect Dis J 2019;38:110-4*).
7. Control and monitoring of enteroviruses is important in the era of future polio-eradication where other enteroviruses than poliovirus are likely to become an increasing important cause of severe infections associated with potential devastating consequences. (*Harvala et al., J Clin Virol 2018;101:11-7*)
8. The identification of prognostic markers for long term outcome of congenital cytomegalovirus infection would have a profound impact on parental counselling, postnatal interventions and the potential introduction of neonatal screening. (*Rovito et al., Clinica Chimica Acta 2017;473:191-7. With minor adjustment*)
9. A(nother) reason why congenital toxoplasmosis is disregarded in some countries is the lack of precise information about its impact on the population. Precise estimations on the burden of the disease can be achieved by systematic screening that will avoid bias or underreporting of cases and provide a clear view of its outcome. (*Wallon & Peyron, Pathogens 2018;7:25*)
10. What we know about Zika virus suggests that it should be classified as a ToRCH pathogen, so that the experience with traditional ToRCH pathogens can inform future research and public health priorities regarding Zika virus. (*Coyne & Lazaar, Nat Rev Microbiol 2016;14:707-15*)
11. Het voornemen om iedere dag te leren en het besluit je zo te bewegen dat anderen daartoe ook in de gelegenheid worden gesteld, maakt de geneeskunde gelijktijdig een wetenschap en een sociale kunst.