Carotid imaging in cardiovascular risk assessment

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Stellingen behorende bij het proefschrift

Carotid Imaging in Cardiovascular Risk Assessment

1) It is feasible to incorporate carotid ultrasound measurements in routine clinical practice (this thesis)

2) Physicians can reliably detect carotid plaque but cannot accurately estimate intima media thickness in an outpatient clinical setting (this thesis)

3) Subclinical carotid atherosclerosis is highly prevalent in asymptomatic patients, even those with low estimated cardiovascular risk scores (this thesis)

4) Carotid MRI consistently yields higher wall thickness values than ultrasound intima-media thickness, possibly due to inclusion of the lamina adventitia (this thesis)

5) Carotid ultrasound is the most direct and non-invasive method to diagnose atherosclerosis - *Pignoli P, Tremoli E, Poli A, Oreste P, Paoletti R.* s.l. : Circulation, 1986, Vols. 74(6):1399-406

6) Abnormal carotid ultrasound findings are the result of all traditional and non-traditional cardiovascular risk factors - *Santos IS, Alencar AP, Rundek T, Goulart AC, Barreto SM, Pereira AC, Benseñor IM, Lotufo PA.:* Arteriosclerosis, Thrombosis, and Vascular Biology. 2015;35:2054-2059

7) Carotid arterial abnormalities are associated with higher cardio- and cerebrovascular morbidity and mortality – multiple references summarized in tabel 1 of chapter 1

8) Carotid MRI is a promising imaging modality for determining subclinical atherosclerosis but currently lacks the supportive epidemiological evidence to warrant its use in clinical practice - *Makris GC, Teng Z, Patterson AJ, Lin JM, Young V, Graves MJ, Gillard JH.* s.l. : Br J Radiol., 2015, Vol. 88(1052).

9) What can be asserted without evidence can be dismissed without evidence and exceptional claims demand exceptional evidence – Christopher Hitchens

10) Women are less funny than men due to evolutionary causes – Christopher Hitchens

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15 mei 2018