

**Deep vein thrombosis : diagnostic and prognostic challenges** Dronkers, C.E.A.

### Citation

Dronkers, C. E. A. (2019, January 8). *Deep vein thrombosis : diagnostic and prognostic challenges*. Retrieved from https://hdl.handle.net/1887/68270

Version: Not Applicable (or Unknown)

License: License agreement concerning inclusion of doctoral thesis in the

Institutional Repository of the University of Leiden

Downloaded from: <a href="https://hdl.handle.net/1887/68270">https://hdl.handle.net/1887/68270</a>

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

# Cover Page



# Universiteit Leiden



The handle <a href="http://hdl.handle.net/1887/68270">http://hdl.handle.net/1887/68270</a> holds various files of this Leiden University dissertation.

**Author**: Dronkers, C.E.A.

Title: Deep vein thrombosis: diagnostic and prognostic challenges

**Issue Date:** 2019-01-08

#### Stellingen behorende bij het proefschrift

## 'Deep Vein Thrombosis: Diagnostic and Prognostic Challenges'

- The diagnostic safety threshold of all future diagnostic studies in deep vein thrombosis should be adjusted to the disease prevalence in the study population. (this thesis)
- 2. In the future, MRDTI (Magnetic Resonance Direct Thrombus Imaging) may be used as a followup test, in case compression ultrasonography is not conclusive. (this thesis)
- 3. Because 20% of patients with acute venous thromboembolism discontinue treatment with direct oral anticoagulant (DOAC) therapy prematurely, further research into the consequences is pertinent. (this thesis)
- Persistent residual thrombosis after deep vein thrombosis is a predictor for post thrombotic syndrome. (this thesis)
- 5. In patients with acute proximal deep vein thrombosis, the addition of pharmacomechanical catheter-directed thrombolysis to anticoagulation is not recommended because it does not result in a lower risk of post-thrombotic syndrome and is associated with a higher risk of major bleeding. (S. Vedanthan, N Engl J Med. 2017 Dec 7;377(23):2240-2252)
- 6. In patients with isolated subsegmental pulmonary embolism and low risk of recurrent venous thromboembolism, thoroughly clinical surveillance is favoured above anticoagulation therapy, especially in patients with a high risk of bleeding. (L. K. Moores JAMA Internal Medicine 2018; 178: 1274-1275)
- Immediate compression therapy to prevent post thrombotic complaints could be considered for patients with acute deep vein thrombosis of the leg. (E.E. Amin, Blood 2018; 2018-03-836783)
- 8. A shift toward the acknowledgment and acceptance of uncertainty is essential for us as physicians, for our patients, and for our health care system as a whole. (A.L. Simpkin, N Engl J Med 2016; 375:1713-1715)
- 9. There are, in truth, no specialties in internal medicine, since to know fully many of the most important diseases a physician must be familiar with their manifestations in many organs. (adapted from Sir William Osler 1849-1919)
- 10. Don't let appearances fool you. There's always only one reality. (Haruki Murakami, 1Q84,2009)

  There is no such thing as almost thrombosis.
- 11. Simplicity is the final achievement. (adapted from Frédéric Chopin, 1810-1849)