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The autoimmune hypothesis of narcolepsy and its unexplored clinical features

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Stellingen behorend bij het proefschrift getiteld

THE AUTOIMMUNE HYPOTHESIS OF NARCOLEPSY
AND ITS UNEXPLORED CLINICAL FEATURES

door Mink Sebastian Schinkelshoek

1. The autoimmune response leading to narcolepsy type 1 can be swift and short-lived (this thesis)
2. The existence of cross-reactive T cells functionally targeting both H1N1 virus and hypocretin-producing neurons has not been demonstrated (this thesis, amongst others)
3. Immune cell composition of people with narcolepsy type 1 and healthy people differs (this thesis)
4. Considering narcolepsy type 1 and post-H1N1 narcolepsy as different entities is unjustified and blurs research on the pathogenesis of narcolepsy type 1 (this thesis, chapter HLA)
5. Describing narcolepsy type 1 by only its core symptoms is obsolete and might prevent early diagnosis (this thesis, partly based on Quaedackers et al, Nat Sci Sleep 2021)
6. Patient-reported outcome measures (PROMs) should serve as primary endpoints in clinical trials for narcolepsy type 1 (based on Weaver et al, J. Sleep Res 2021)
7. Understanding the role of hypocretin in metabolism could benefit many more people than only those with narcolepsy type 1 (based on review Straat et al, Front Endocrinol 2020)
8. One could live a reasonably normal life with narcolepsy, when recognized early and treated well (based on informative movie by Dutch Narcolepsy Patient Association (NVN) 2018)
9. When you have eliminated the impossible, the truth must be whatever remains, however improbable that may be (based on Sherlock Holmes in Arthur Conan Doyle's 'The Sign of Four' 1890)
10. A PhD trajectory is often compared to a marathon, but I think it is more like being a sprinter; long stretches of hard work punctuated by brief moments in which you are given the opportunity to perform and show your work (based on Michael Johnson in BBC documentary 'Survival of the Fastest' 2014)