Exploring APC mosaicism: prevalence, clinical consequences and underlying causes

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Stellingen behorende bij het proefschrift getiteld:

Exploring *APC* mosaicism; prevalence, clinical consequences and underlying causes

1. *APC* mosaicism analysis should be performed in all unexplained polyposis patients. (this thesis)

2. To be able to determine mosaicism, a minimum of three colorectal lesions should be analyzed. (this thesis)

3. The presence of multiple upper intestinal tract adenomas should also be a criterion to test for *APC* mosaicism. (this thesis)

4. A past or current presence of *pks*$^{+}$ *E. coli* bacteria in the colon is an additional explanation for developing colorectal adenomas. (this thesis)

5. A de novo mutation in the *APC* gene during embryogenesis is not the sole cause of mosaicism

6. The c.835-8A>G *APC* DNA mutation serves as a biomarker of a current or prior *pks*$^{+}$ *E. coli* infection, which may modify patient surveillance and management. (Georgeson et al. 2023, this thesis)

7. Screening for *pks*$^{+}$ *E. coli* bacteria in feces should be implemented in the population-based colorectal cancer screening program.

8. The use of certain probiotics might not be as harmless as we think.

9. Science communication is essential to bridge the gap between scientists and laypeople

10. The key to a fulfilling career is a healthy work-life balance