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## The challenge of quality assessment and regional perfusion to increase donor organ utilisation

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# Stellingen

Behorend bij het proefschrift

## **The challenge of quality assessment and regional perfusion to increase donor organ utilisation**

1. The holy grail in assessment of donor organ quality is the identification and successful validation of molecular markers with integrated clinical data that captures organ viability and predicts a successful outcome in the recipient.
2. Considering the significant organ shortage, it is not justified to discard donor kidneys with acute kidney injury. (*This thesis*)
3. Measurement of Flavin MonoNucleotide in perfusate should be validated with mass spectroscopy and is not a biomarker to predict post-transplant kidney function. (*This thesis*)
4. Combining methylation sensitive restriction enzymes with duplex digital PCR is a fast and easy method to specifically quantify  $\beta$ -cells using unmethylated *INS*-DNA. (*This thesis*)
5. To establish superiority of abdominal normothermic regional perfusion as the ultimate form of perfusion in controlled donation after circulatory death donors, a randomised clinical trial remains necessary. (*This thesis*)
6. Consensus on a uniform definition of 'organ utilisation' is necessary to allow comparison of data and explore disparity.
7. Authors and editors ought to embrace and report both 'positive' and 'negative' results instead of favouring positive and neglecting negative results in order to appease their audience.
8. Consenting for organ donation and transplantation not only demonstrates true altruism but also better preserves our environment in a world that longs for more empathy and sustainability.
9. Compare yourself to who you were yesterday, not to who someone else is today. (*Jordan B. Peterson - 12 Rules for Life: An Antidote to Chaos*) – My Mantra.
10. The primary ingredient for progress (during a PhD) is optimism. The unwavering belief that something can be better drives us forward. (*Adapted from Simon Sinek*).