



Universiteit
Leiden
The Netherlands

Diagnosis and treatment of prolactinomas: the patient's perspective anno 2025

Trigt, V.R. van

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Stellingen behorende bij het proefschrift getiteld Diagnosis and Treatment of Prolactinomas - The Patient's Perspective anno 2025

1. Solely striving for normoprolactinemia leads to underestimation of treatment success, as a group of patients achieves clinically satisfactory results with recovery of the gonadal axis, and resolution of prolactinoma-related symptoms without normalization of prolactin levels (*this thesis*).
2. High-quality prospective observational studies incorporating propensity score matching are more appropriate to assess treatment modalities in prolactinoma care than randomized controlled trials (*this thesis*).
3. Standardization of prolactinoma outcome parameters is important to improve prolactinoma care (*this thesis*).
4. In addition to patients with Knosp 0 or 1 tumors (as stated in the Pituitary Society Consensus Statement, 2023), primary surgical treatment may also be proposed for selected patients with Knosp 2 prolactinoma (*this thesis*).
5. Functional imaging can improve clinical outcomes in selected patients with prolactinoma remnants that are not clearly visible on conventional MRI, when performed by an experienced pituitary team (*this thesis*).
6. Despite 'benign' histology, by the nature of the vital anatomy surrounding the sella and the multisystem effects of hormonal dysfunction, pituitary adenomas may drastically affect quality of life (*M. Castle-Kirschbaum et al., Neurosurgery, 2022*).
7. Pituitary Centers of Excellence should have at least one dedicated nurse (specialist) who is responsible for implementation and evaluation of patient-reported outcome measures.
8. All pituitary neurosurgical centers should be required to regularly report their neurosurgical outcomes, including complication rates, as is done in the Quality Registry NeuroSurgery (QRNS).
9. The following statement is particularly relevant to patients with a prolactinoma: "It is much more important to know what sort of a patient has a disease than what sort of a disease a patient has" (*Sir William Osler, 1904*).
10. The focus in healthcare should shift towards prevention of diseases, instead of merely treating the sequelae of poor lifestyle.