

STELLINGEN

Long-term clinical safety and efficacy of drug-eluting stents in real-world patients

1. The clinical trials completed so far, however, have included only elective patients with relatively noncomplex lesions and have excluded high-risk patients such as those presenting with acute myocardial infarction (MI) or those with left main stenosis or calcified lesions (this thesis)
2. Patients with acute coronary syndromes are at higher risk of early and late stent thrombosis with either BMS or DES, although very late stent thrombosis seems to be uniquely associated with DES (this thesis)
3. DES are safe and effective irrespective of age: they reduce TVR and overall MACE and are associated with non-significant reductions in mortality compared to BMS across all age groups (this thesis)
4. These results in unselected patients suggested that Drug-Eluting Stents could be used safely for multivessel percutaneous coronary intervention with reductions in clinical restenosis compared with Bare Metal Stents (this thesis)
5. It is very likely that during the next 5 years, we will see more 2nd and 3rd generation DES with ever-increasing biocompatibility and safety profiles will be investigated and released commercially (this thesis)
6. A person who never made a mistake never tried anything new (Albert Einstein)
7. All progress is precarious, and the solution of one problem brings us face to face with another problem (Martin Luther King Jr.)
8. If the future is unrealistic, it will remain the future; if the future is realistic, it will become the past fast (Patrick W. Serruys)
9. However beautiful the strategy, you should occasionally look at the results (Sir Winston Churchill)
10. Education: that which reveals to the wise, and conceals from the stupid, the vast limits of their knowledge (Mark Twain)
11. Freedom is not worth having if it does not include the freedom to make mistakes (Mahatma Gandhi)