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The compromised gut in the neonate

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Document Version Publisher's PDF, also known as Version of record

Publication date:

Link to publication in University of Groningen/UMCG research database

Citation for published version (APA): Schurink, M. (2016). The compromised gut in the neonate: Diagnostic and clinical aspects. [Groningen]: Rijksuniversiteit Groningen.

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Download date: 12-11-2019

'The Compromised Gut in the Neonate - Diagnostic and Clinical Aspects'

- 1. In preterm infants, both plasma and urinary I-FABP levels specifically identify NEC prior to appearance of diagnostic radiological signs suggestive for NEC. (this thesis)
- 2. Serial I-FABP measurements accurately predict development of complicated disease. (this thesis)
- 3. I-FABPu strongly correlates with I-FABPp, offering the clinician an opportunity to choose the most appropriate way of measuring I-FABP. (this thesis)
- 4. Calculating urinary IFABP/creatinine ratio seems redundant. (this thesis)
- 5. NIRS measurements in both the liver and infra-umbilical regions are safe and feasible, but their values can not be randomly substituted one for the other for the purpose of assessing splanchnic oxygenation. (this thesis)
- 6. In preterm infants, it may be possible to differentiate uncomplicated from complicated NEC by measuring the cerebral and splanchnic oxygenation. (this thesis)
- 7. In NEC patients, a fixed bowel loop on abdominal X-ray reflects disease severity and should therefore prompt surgical intervention. (this thesis)
- 8. Although in neonatal surgery creating an ostomy seems a valid option in certain situations, a considerable occurrence of complications and reoperations should be taken into account. (this thesis)
- 9. In the treatment of surgical short bowel syndrome, a well-organized multidisciplinary approach prevents the need for liver and/or small bowel transplantation and leads to intestinal autonomy in a great number of patients. (this thesis)
- 10. Assumption is the mother of all f#@\$-ups. (Al Sapienza, in Under Siege 2, 1995)
- 11. Despite my current place of work, NEC is more appealing as a medical condition than as a football club (Maarten Schurink)
- 12. The proof of intelligent life on other planets lies within the fact that NONE of them bothered to contact us. (unknown)
- 13. You measure what you care about. (Jan Gehl, Danish architect, in The Human Scale, 2012)