

University of Groningen

Nuclear medicine strategies to image infectious and inflammatory diseases

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Stellingen bij het proefschrift “nuclear medicine strategies to image infectious and inflammatory diseases”

1. The ongoing progress in the understanding and knowledge of the pathophysiology of infectious and inflammatory diseases has led to the development of more specific radiopharmaceuticals, thereby providing better answers to the clinical questions (Chapter 1).
2. Reaching consensus within the nuclear community is essential to perform WBC scintigraphy standardized; it avoids false diagnoses and is the only way to compare publications of future multicentre trials. (Chapter 2 and 3).
3. Dual time point imaging with acquisition times corrected for decay and display of the images in number of counts avoid operator dependence and lead to high diagnostic accuracy (Chapter 2 and 3).
4. In the suspected infected diabetic foot, WBC scintigraphy is *the* nuclear imaging method of choice (Chapter 4).
5. In the suspected vascular prosthetic graft infection, ^{18}F -FDG-PET/CT is *the* best imaging modality with a high interobserver agreement (Chapter 5).
6. $^{99\text{m}}\text{Tc}$ -hynic-IL2 is a true marker for plaque inflammation and therefore of plaque instability (Chapter 6).
7. It is possible to differentiate between localized and systemic amyloidosis: high ^{18}F -FDG uptake in the localized type, no ^{18}F -FDG uptake in the systemic type (Chapter 7).
8. Heart uptake on a bone scan is a diagnostic marker for ATTR type amyloidosis; it depicts cardiac involvement earlier than echocardiography, ECG, and cardiac biomarkers (Chapter 8).
9. An invaluable role of nuclear medicine imaging of infectious and inflammatory diseases is looming ahead; to fulfil these prospects we need many people with devotion and enthusiasm (Chapter 9).
10. One of the most difficulties of human endeavours is adequate communication (Frans Wackers).
11. Whether you can observe a thing or not depends on the theory which you use. It is the theory which decides what can be observed (Albert Einstein).
12. Always expect the unexpected finding in every scan.
13. I was so happy to discover that even in Groningen and Rome they really love Feyenoord: “nait soezen moar broezen” and “facta, non verba”.
14. Your family will not remember you by your H-factor; they will remember you by all the things you did together.
15. Men gaat niet dood omdat men ziek is; men gaat dood omdat men geleefd heeft (People don't die because of illness; but because they have lived).