

University of Groningen

Autoimmune bullous diseases

Rashid, Hanan

DOI:
[10.33612/diss.219399495](https://doi.org/10.33612/diss.219399495)

IMPORTANT NOTE: You are advised to consult the publisher's version (publisher's PDF) if you wish to cite from it. Please check the document version below.

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

Publication date:
2022

[Link to publication in University of Groningen/UMCG research database](#)

Citation for published version (APA):
Rashid, H. (2022). *Autoimmune bullous diseases: insights into diagnosis and disease management*. University of Groningen. <https://doi.org/10.33612/diss.219399495>

Copyright

Other than for strictly personal use, it is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), unless the work is under an open content license (like Creative Commons).

The publication may also be distributed here under the terms of Article 25fa of the Dutch Copyright Act, indicated by the "Taverne" license. More information can be found on the University of Groningen website: <https://www.rug.nl/library/open-access/self-archiving-pure/taverne-amendment>.

Take-down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Downloaded from the University of Groningen/UMCG research database (Pure): <http://www.rug.nl/research/portal>. For technical reasons the number of authors shown on this cover page is limited to 10 maximum.

Stellingen

behorende bij het proefschrift

Autoimmune bullous diseases Insights into diagnosis and disease management

1. A mucosal biopsy for direct immunofluorescence microscopy is the most sensitive test for mucous membrane pemphigoid, yet serological analysis is always recommended. - This thesis
2. The diagnosis of mucous membrane pemphigoid can be established with a skin biopsy for direct immunofluorescence microscopy. - This thesis
3. A dermatologist should keep an eye on possible disease aggravation of mucous membrane pemphigoid and organize a multidisciplinary follow-up. - This thesis
4. Every patient with mucous membrane pemphigoid should be screened for anti-laminin 332 reactivity, and when present screened for malignancy. - This thesis
5. Maintenance infusions of rituximab in pemphigus prevent relapses, although the optimal dosage regimen still needs to be determined. - This thesis
6. Rituximab is a suitable treatment for patients with pemphigoid with a steroid sparing effect. - This thesis
7. The quality of life in patients with pemphigus and pemphigoid should not only be reported in literature, but have a larger role in clinical daily practice. - This thesis
8. Dual inhibition of complement C5 and leukotriene B4 is a promising therapeutic strategy in bullous and nonbullous pemphigoid. - This thesis
9. The greater danger lies not in setting our aim too high and falling short; but in setting our aim too low, and achieving our mark. - Michelangelo
10. Fall down seven times, get up eight. - Unknown

Hanan Rashid
22 juni 2022