

Stellingen behorend bij het proefschrift van  
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**Unraveling *MLL*-rearranged  
Pediatric Acute Myeloid Leukemia**

1. The correct diagnosis of pediatric AML requires the use of many different techniques, which can be replaced successfully by using gene expression profiling in half of the cases. (dit proefschrift)
2. *EVII* overexpression is not an independent prognostic factor in pediatric AML. (dit proefschrift)
3. The outcome of *MLL*-rearranged AML depends on the translocation partner, which indicates that specific *MLL*-rearrangements should be routinely screened for at diagnosis. (dit proefschrift)
4. Inactivation of the tumor-suppressor gene *NF1* is a novel mechanism to activate the RAS-pathway in acute leukemia. (dit proefschrift)
5. Overexpression of *BRE* is mainly restricted to *MLL*-rearranged AML with t(9;11)(p22;q23), and is an independent favorable prognostic factor. (dit proefschrift)
6. Since pediatric AML is a genomically stable disease, genome wide association studies and whole genome sequencing are necessary to identify new aberrations involved in leukemogenesis. (Ley *et al.* NEJM 2010)
7. Low patient numbers limit the development of individualized treatment of pediatric AML.
8. Uiteindelijk lukt het altijd om ons in de tijd zo aan te passen, dat we vaak weer net zo tevreden en gelukkig zijn als voorheen. (CBS, Bevolkingstrends, 3<sup>e</sup> kwartaal 2010)
9. "You may never know what results come of your action, but if you do nothing there will be no result." (Mohandas Karamchand Gandhi, 1869-1948)
10. "To finish first, you first must finish." (Rick Mears, 4x Indy 500 winner)
11. Tijdens het promoveren realiseer je pas hoe kostbaar de tijd met je meest dierbaren is.