

## **Individualizing Treatment in Von Willebrand Disease**

### **One size does not fit all**

1. The majority of type 1 von Willebrand disease patients do not require a desmopressin test dose to assess their response. *(this thesis)*
2. Individuals weighing more than 100 kilograms should receive a capped dose of 30 microgram desmopressin. *(this thesis)*
3. As von Willebrand factor (VWF) protects factor VIII from clearance, factor VIII pharmacokinetics should be assessed using a population pharmacokinetic model including VWF pharmacokinetics. *(this thesis)*
4. Baseline VWF propeptide/VWF antigen ratio does not correlate with clearance of VWF antigen and cannot be used to predict VWF antigen response after desmopressin. *(this thesis)*
5. Individuals with an identical VWF gene variant have a similar desmopressin response. *(this thesis)*
6. Correction of VWF - ADAMTS13 axis dysregulation in sickle cell disease largely reduces vascular occlusion and subsequent acute organ damage. *(Vital E.F. and Lam W.A., Curr Opin Hematol. 2023)*
7. Where evidence is lacking, guidelines should include consensus-based recommendations to reduce local provider preference and supply-based care. *(Goodarzi B. et al., Birth, 2022)*
8. Paternal leave has been associated with improved mental health outcomes for fathers. It reduces stress levels, enhances overall well-being, and provides an opportunity for fathers to balance work and family commitments. *(Murray C. et al., Aust J Labour Econ, 2017)*
9. Funding for prevention should be seen as an investment in the health of tomorrow and not as a budgeted expense, as is currently the case in the Netherlands. *(Raad voor Volksgezondheid en Samenleving, 2023)*
10. Climate justice is crucial because those who have contributed least to climate change are being disproportionately affected. *(IPCC AR6 Synthesis Report, 2023)*
11. "Strive not to be a success, but rather to be of value." *(Albert Einstein)*