

- 1 While, statistically, AKI is an independent risk factor for mortality and chronic kidney disease, this risk strongly depends on the individual susceptibility for accelerated kidney injury. *This thesis*
- 2 AKI following cardiac transplantation is a risk factor for mortality and renal impairment, but if ongoing deterioration in renal function during the first post-operative year is limited, the cardiac transplantation recipient has a relatively good long-term prognosis. *This thesis*
- 3 Therapeutic interventions for AKI are not yet available and additional research on prevention, therapeutic targets and follow-up is warranted. *This thesis*
- 4 Implementation of new biomarkers for AKI is only of value when early therapeutic interventions are available and adverse outcome is potentially avoidable. *This thesis*
- 5 Follow-up by a nephrologist in the outpatient clinic is warranted for AKI survivors most susceptible for on-going deterioration in renal function. *This thesis*
- 6 Progression from AKI depends on the balance of adaptive and maladaptive repair, and an understanding of these events is key to predicting the degree of progression. Basile DP, et al. Progression after AKI: understanding maladaptive repair processes to predict and identify therapeutic treatments. *J Am Soc Nephrol.* 2016; 27(3): 687-697
- 7 While the vast majority of cases will fit both AKI diagnostic criteria as well as clinical judgement, AKI is still a clinical diagnosis. Not all cases will fit within the proposed definition and not all cases fitting the definition should be diagnosed as AKI. KDIGO AKI workgroup. KDIGO clinical practice guidelines for acute kidney injury. *Kidney Int, Suppl.* 2012; 2: 1-138
- 8 Those extra five minutes spend on your patient are often more valuable than the most advanced treatment.
- 9 Hiding within those mounds of data is knowledge that could change a life of a patient, or change the world. Quote by Atul Butte. Goldman A. King of the mountain – Digging data for a better world. *Stanford Medicine.* 2012; summer edition: 21-25
- 10 The shadow side of evidence-based medicine is that it can lead to impersonal care: people are not statistical averages, and scientific results must be translated to the individual. Linnemann E. Waarom patienten niet altijd gebaat zijn bij statistiek, richtlijnen en protocollen. *Volkskrant:* 08-07-2017
- 11 Fishin' for a good time starts with throwin' in your line. Tom Waits