

Stellingen behorende bij dit proefschrift:

**Age-related Renovascular Changes
consequences in late life**

1. *We are not ready to estimate kidney function in late life accurately. (this thesis)*
2. *There is no connection between the kidneys and the brain in the oldest old. (this thesis)*
3. *Elevated aortic stiffness impairs quality of late life. (this thesis)*
4. *Chronic inflammation, hormonal changes and metabolic disorders increase the pace of arterial, bone and muscle aging. (this thesis)*
5. *Orthostatic hypotension measurements only need to include information on diastolic blood pressure values in falls assessments. (this thesis)*
6. *To prevent a decrease in quality of life with aging, it is best to live in or move to The Netherlands. (A. Szende et al, Dordrecht: Springer Netherlands, 2014)*
7. *Chronic kidney disease in late life is not pathology it is physiology. (A.H. Abdelhafiz et al, Nephron Clin. Pract, 2010)*
8. *Chronic kidney disease is an aging accelerator. (J.P. Kooman et al, Nat. Rev. Nephrol, 2014)*
9. *Stiffening of the central arteries has more implications than stiffening of the peripheral arteries. (G.F. Mitchell J. Appl. Physiol (1985) 2008)*
10. *Nuclear factor erythroid 2–related factor 2 (NRF-2) activation and vitamin K supplementation are the key to counteract vascular aging. (L. Dai, Nephrol. Dial. Transplant 2020)*
11. *When you struggle with a problem, that is when you understand it. (E. Musk)*

Lisanne Tap

Rotterdam, 11-11-2020