

Stellingen behorend bij proefschrift “Identifying and modifying the impinging hip”

1. General practitioners are essential in the detection of femoroacetabular impingement syndrome and should be trained in identifying symptomatic FAI syndrome (this thesis)
2. Dynamic 3D CT scanning can non-invasively detect a reduction in anatomical range of motion of the hip joint caused by a cam morphology (this thesis)
3. Computer assisted intra-operative navigation is likely to improve the accuracy of cam and pincer resection in the near future (this thesis)
4. Patients with FAI syndrome should be registered in a national database (LROI) including the PROMs pre- and postoperatively such as the HOS-NL, iHOT-12, and VAS for pain, to determine long-term effect of FAI syndrome on patients' functioning and osteoarthritis development (this thesis)
5. Shared decision making in treatment is essential and can only be optimally done if prediction models and risk factors for outcome trajectories are identified (this thesis)
6. An important part of orthopaedic scientific research should not only focus on results of surgical intervention or non-surgical treatment, but should strive to prevent the necessity of these treatments
7. The success of orthopaedic interventions such as hip arthroscopy, is mainly determined by correct indication assessment
8. Details make perfection, and perfection is not a detail (Leonardo Da Vinci)
9. When you can't seem to find an answer to the problem that faces you, it may be time to consider whether you're asking the right question (Alaric Tekiahyn)
10. The greatest glory in living lies not in never falling, but in rising every time we fall. (Nelson Mandela)
11. You'll never walk alone