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**Title:** Understanding clinical outcome in patients with pituitary disease: a biopsychosocial approach
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1. Patients exposed to an episode of transient hypercortisolism show structural alterations in both grey- and white matter that are accompanied by functional changes in task conditions even after long-term remission (this thesis).

2. The increased hair cortisol levels found in (male) patients with adrenal insufficiency suggest presence of (temporary) supraphysiological cortisol levels during the current considered “physiological” glucocorticoid replacement schemes (this thesis).

3. Patients with glucocorticoid replacement therapy for adrenal insufficiency show psychological morbidity and mild cognitive impairments (this thesis).

4. Patients with pituitary disease benefit from a self-management intervention in terms of enhanced self-efficacy (this thesis).

5. Focus groups have the potential to access forms of knowledge other methods cannot (Wellings et al., 2000) and generate completely unexpected or novel knowledge (Wilkinson, 1998) (from Braun & Clarke, 2013).

6. It is difficult to identify a control intervention for behavioural treatment trials that is inactive but equally credible (Whitehead, Gastroenterology 2004).

7. Given that biological and physiological factors have an inconsistent relationship to symptoms; it is unlikely that treatments directed at biological and physiological factors alone, even if they can be identified, will be fully effective in the relief of symptoms (Wilson and Cleary, JAMA 1995).

8. Physiological measures should not predominate in the examination of patient well-being.

9. When one is sick….two need help (Randall, JAMA 1993).

10. Performing a PhD research project about self-management requires self-management.