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Reversible Suppression of Hemostasis in Hibernation and Hypothermia

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Document Version

Publisher's PDF, also known as Version of record

Publication date:

2019

[Link to publication in University of Groningen/UMCG research database](#)

Citation for published version (APA):

de Vrij, E. (2019). *Reversible Suppression of Hemostasis in Hibernation and Hypothermia*. [Thesis fully internal (DIV), University of Groningen]. University of Groningen.

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APPENDICES

Nederlandse samenvatting

List of contributing authors

About the author

List of publications

Acknowledgements



NEDERLANDSE SAMENVATTING VOOR NIET-INGEWIJDEN

Inleidend

In dit hoofdstuk is het proefschrift in het Nederlands samengevat. Het proefschrift is tot stand gekomen uit een MD/PhD-traject, waarin de opleiding geneeskunde gecombineerd is met een promotietraject. Allereerst wordt nu de achtergrond van het onderzoek kort besproken, waarna één voor één de belangrijkste bevindingen per hoofdstuk worden samengevat. Biomedische terminologie wordt op enkele plekken tussenhaakjes uitgelegd. Dit hoofdstuk eindigt met een conclusie op basis van de bevindingen en interpretaties vanuit dit proefschrift.

Achtergrond en doel van het proefschrift

Trombose is de vorming van bloedstolsels door bloedplaatjes activatie en bloedstolling leidend tot afsluiting van een bloedvat en onderbreking van de bloeddorstroming naar een weefsel of orgaan. Trombose is een belangrijke doodsoorzaak en wereldwijde ziektebelasting, denk hierbij aan het hartinfarct, herseninfarct, trombosebeen en longembolieën¹⁻⁶. Zowel primaire als secundaire hemostase (het voorkomen van bloedingen door o.a. bloedstolling) zijn betrokken in veneuze (aderlijke) en arteriële (slagaderlijke) trombose. Het is te verwachten dat trombose ontstaat tijdens winterslaap vanwege verschillende factoren die in mens het trombose risico vergroten: langdurige onbeweeglijkheid⁷⁻⁹, stilstand van bloed in aders en hartboezems¹⁰, verhoogde bloed viscositeit (stroperigheid)¹¹⁻¹³, cycli van koeling-opwarming met relatieve hypoxie (zuurstoftekort) en herstel van zuurstof aanvoer met tekenen van endotheelschade^{7,14}, en overgewicht tijdens het begin van winterslaap¹⁵. Ondanks deze risicofactoren tonen winterslapers geen tekenen van trombose of embolisatie (losschieten van een bloedstolsel welke vervolgens elders een bloedvat afsluit), waarschijnlijk door veranderingen aan essentiële onderdelen van hemostase tijdens de winterslaap.

Het doel van dit proefschrift was om een overzicht te genereren van veranderingen aan belangrijke componenten van hemostase tijdens winterslaap in een enkele diersoort, namelijk de Syrische (goud)hamster. Een ander doel was om aan te tonen of deze veranderingen in niet-winterslapende zoogdieren kunnen worden nagebootst via geforceerde hypothermie (onderkoeling). Dit proefschrift focusde op het krijgen van inzicht in het onderliggende mechanisme van de torpor (laag metabole fase van winterslaap) geassocieerde reversibele trombopenie (laag aantal bloedplaatjes), en van de morfologische veranderingen van bloedplaatjes, inclusief de relatieve koude resistentie van het cytoskelet (moleculaire cel-skelet) van winterslaper bloedplaatjes. Het uiteindelijke doel omhelst het identificeren van mogelijke therapeutische aangrijpingspunten voor antitrombotische medicijnen en voor lange termijn opslag van bloedplaatjes voor transfusie.

Algemene uitingen van hemostase onderdrukking in winterslaap

We bepaalden de componenten van hemostase die veranderd zijn tijdens torpor en waarschijnlijk trombose voorkomen. In **Hoofdstuk 2** onderzochten we de effecten van winterslaap en hypothermie op de dynamiek van circulerende bloedplaatjes in zowel winterslapende als niet-winterslapende zoogdieren. Ook onderzochten we het effect van een farmacologisch middel (5'-AMP) om torpor te induceren. Het verlagen van de lichaamstemperatuur is waarschijnlijk een van de belangrijkste aansturende krachten voor de reversibele daling in bloedplaatjes aantal in zowel winterslapende als niet-winterslapende diersoorten wanneer zij blootgesteld zijn aan geforceerde hypothermie. De hieropvolgende trombopenie (lage plaatjes aantal) tijdens de lage lichaamstemperatuur herstelde snel tijdens opwarming in alle onderzochte diersoorten wanneer zij weer eutherm werden, hetzij door natuurlijke arousal hetzij door geforceerd opwarmen. Door de snelheid van herstel hypothetiseerden wij dat een opslag en vrijlaat mechanisme ten grondslag ligt aan de trombopenie bij lage lichaamstemperatuur, in plaats van het onherstelbaar afbreken en vervolgen weer aanmaken van bloedplaatjes. We vonden verder dat plaatjes integriteit behouden bleef tijdens winterslaap en hypothermie in zowel winterslapende als niet-winterslapende diersoorten, omdat er geen tekenen waren van bloedplaatjes activatie gedurende de experimenten en functionaliteit van bloedplaatjes herstelde bij het bereiken van euthermie. Bovendien speelt de milt geen grote rol in de temperatuur gestuurde opslag en vrijlating van bloedplaatjes, aangezien het verwijderen van de milt alvorens de winterslaap geen effect had op de daling in bloedplaatjes aantal tijdens winterslaap. Interessant genoeg leidde farmacologische inductie van torpor door 5'-AMP injectie niet tot daling van bloedplaatjes aantal, ondanks dat de lichaamstemperatuur wel daalde. 5'-AMP interfereert daarom mogelijk met het onderliggende mechanisme van de temperatuur gestuurde bloedplaatjes dynamiek. Samenvattend is de temperatuur afhankelijke bloedplaatjes daling een grote aanpassing in het primaire hemostase systeem tijdens torpor.

In aanvulling hierop hebben we in **Hoofdstuk 3** belangrijke determinanten onderzocht van het bloedstolling systeem tijdens winterslaap in de Syrische hamster, namelijk die van primaire en secundaire hemostase als ook die van het fibrinolytische systeem. De hemostase is zeer waarschijnlijk geremd in torpor, zoals gesymboliseerd door verminderde trombine generatie met verlengde stollingstijden (PT en APTT), welke herstelden in arousal. Activatie secundaire hemostase en fibrinolyse is onwaarschijnlijk tijdens torpor gezien het plasma niveau van D-dimer laag blijft gedurende de winterslaap.

Het onderdrukken van hemostase gebeurt ogenschijnlijk door vermindering van aantal bloedplaatjes en het niveau van von Willebrand Factor (VWF), fibrinogeen, stollingsfactor V, VIII, IX, XI en door het toenemen van het plasminogeen niveau. De verminderde hemo-

stase werd gedeeltelijk tegengewerkt door matige stijging in factor II en X en een afname in antistolling factoren antithrombine, proteïne C en plasmine inhibitor. Hoe dan ook laat onze data zien dat tijdens torpor de hemostatische balans duidelijk helt naar remming wat gecorrigeerd wordt tijdens arousal.

Mechanismen van hemostase onderdrukking in winterslaap en hypothermie

Het onderliggende mechanisme van de bloedplaatjes dynamiek in winterslapende hamsters werd verder onderzocht in **Hoofdstuk 4**. In deze studie toonden we aan dat plaatjes opslag en vrijlating ten grondslag ligt aan de reversibele trombopenie in torpor in de hamster. Fluorescente bloedplaatjes volgden na transfusie dezelfde dynamiek in de bloedsomloop gedurende torpor-arousal cycli als de bloedplaatjes van de ontvanger. Vrijwel alle getransfundeerde bloedplaatjes herstelden zich in de bloedsomloop tijdens arousal en waren dus niet irreversibel verwijderd van de bloedsomloop. Bloedplaatjes lieten daarnaast geen tekenen zien van activatie. Verder toonden we aan dat de levensduur van bloedplaatjes met 50% is verlengd tijdens winterslaap vergeleken met niet-winterslapende hamsters. Tot slot toonden we met electronen microscopy analyse van bloedplaatjes in organen aan, dat lever sinusoiden in plaats van de milt of long de meest waarschijnlijke opslag en vrijlaat locatie is voor bloedplaatjes. Opgeslagen bloedplaatjes in lever sinusoiden waren niet gedegranuleerd. Dus, lage lichaamstemperatuur leidt tot trombopenie tijdens torpor via reversibele opslag, aannemelijk in de lever sinusoiden, wat zich herstelt tijdens opwarming tijdens arousal en gebeurt ogenschijnlijk zonder activatie en degranulatie van bloedplaatjes. Gezien de locatie van bloedplaatjes ophoping aan lever sinusoidaal endotheel, de lage bloedstroomsnelheid en de verhoogde bloed viscositeit tijdens torpor en gezien de reversibele aard van plaatjes opslag tijdens arousal, is marginatie van bloedplaatjes aan het endotheel het meest waarschijnlijke onderliggende mechanisme aan de plaatjes aantal daling.

De bevindingen in **Hoofdstuk 2** toonden aan dat de bloedplaatjes dynamiek temperatuursafhankelijk is en toepasbaar in niet-winterslapende zoogdieren. Derhalve onderzochten we verder in **Hoofdstuk 5** de opslag locatie en het mechanisme voor reversibele trombopenie in niet-winterslapende zoogdieren. Met behulp van (intravitaal) beeldvormende studies in rat en muis toonden we dat marginatie van bloedplaatjes aan lever sinusoidaal endotheel tijdens hypothermie het onderliggende mechanisme behelst van de reversibele trombopenie. Bovendien sloten we een rol uit van de milt in hypothermie geïnduceerde trombopenie door het uitvoeren van milttextirpatie alvorens en tijdens de onderkoeling, waarvan er geen effect was op de temperatuursafhankelijke bloedplaatjes dynamiek. In **Hoofdstuk 4** waren de opgeslagen bloedplaatjes in lever sinusoiden soms gezien in een speer vorm met verlengde microtubuli, wat in lijn is met eerdere bevindingen van gekoelde grondeekhoorn bloedplaatjes^{16, 17}. Reddick et al. stelden voor dat

deze speer vorm in eekhoorn bloedplaatjes zou kunnen leiden tot vastlopen in de milt en dientengevolge tot de trombopenie¹⁶. Wij lieten echter zien dat de milt niet betrokken is bij de temperatuursafhankelijke bloedplaatjes dynamiek in hamster (**Hoofdstuk 2**), wat recentelijk ook is bevestigd in grondeekhoorn¹⁸. Echter, bloedplaatjes zouden alsnog kunnen vastlopen in de lever door vormverandering tijdens torpor. Of deze vormverandering van bloedplaatjes ook tijdens hypothermie gebeurt in niet-winterslapers en dus een vereiste zou kunnen zijn voor de opslag in lever sinusoiden is nog niet onderzocht. Daarom werd in **Hoofdstuk 6** de rol van veranderingen aan het cytoskelet onderzocht in vormveranderingen van bloedplaatjes tijdens winterslaap en vergeleken met vormveranderingen van bloedplaatjes van mens en andere niet-winterslapende diersoorten tijdens *ex vivo* koeling. Wij lieten zien dat in torpor met lage lichaamstemperatuur de circulerende hamster bloedplaatjes ofwel speer vormig danwel discus vormig zijn met behoud van cytoskelet structuur van tubuline. Daarentegen depolymeriseerde de tubuline in bloedplaatjes van muis, rat en mens tijdens lage *ex vivo* temperatuur, met als gevolg een bolvorm met het ontstaan van filopodia, lijkend op geactiveerde bloedplaatjes. Ondanks deze ogenschijnlijke activatie, na *ex vivo* koeling en opwarming was er geen stijging in expressie van activatie markers op bloedplaatjes uit winterslapende en niet-winterslapende dieren. We waren succesvol in het induceren van de speervorm in bloedplaatjes van muis, rat en mens na opwarming van de kou, welk mechanisme afhankelijk was van tubuline polymerisatie via de colchicine bindingsplaats op tubuline. Dus verlaging van temperatuur induceert een speervorm in bloedplaatjes van winterslapers, terwijl het weer opwarmen juist speervorming uitlokt in bloedplaatjes van niet-winterslapers. Daarom is het onwaarschijnlijk dat de speervorm een vereiste is voor bloedplaatjesopslag in lever sinusoiden tijdens hypothermie, aangezien niet-winterslapers geen speervorm maken in de kou. Winterslaper bloedplaatjes lijken ook nog eens beschermd tegen activatie door de kou en tegen het afbreken van het tubuline cytoskelet door de kou.

Conclusies

Samenvattend hebben we in dit proefschrift een aantal belangrijke elementen van primaire hemostase, secundaire hemostase en fibrinolyse geïdentificeerd die door hun aanpassing de activatie van het bloedstollingsstelsel van de Syrische hamster voorkomt tijdens de winterslaap. We hebben ons gefocust op de primaire hemostase en ontraadselden de temperatuursafhankelijkheid van het mechanisme dat ten grondslag ligt aan de reversibele trombopenie in winterslapers en niet-winterslapers. We verklaarden de daling in bloedplaatjes tijdens torpor met een belangrijke rol voor de lever door opslag en later vrijlating van bloedplaatjes, resulterend in een 50% verlenging van de levensduur van winterslaper bloedplaatjes. Verder maakten we duidelijk dat lage temperaturen de

bloedplaatjes van winterslapers en niet-winterslapers niet activeerden ondanks de opvallende - doch omkeerbare - vormveranderingen. Gezamenlijk helpen deze bevindingen van dit proefschrift ons om te begrijpen waarom winterslapende zoogdieren zoals de Syrische hamster niet lijden aan tromboembolische complicaties tijdens en na de winterslaap. Bovendien bestaat de temperatuursafhankelijke onderdrukking van bloedstolling ook in niet-winterslapende zoogdieren alsook de eigenschap om omkeerbaar de vorm van bloedplaatjes te veranderen zonder hen te activeren. Deze resultaten kunnen in de toekomst leiden tot nieuwe antitrombotische strategieën en de langdurige koude opslag van bloedplaatjes voor transfusie.

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ABOUT THE AUTHOR

On 28th November 1988 I was born and hereafter raised in Stiens, Friesland, the Netherlands. At the age of 18 I finished secondary school at the Christelijk Gymnasium Beyers Naudé in Leeuwarden in 2007 and started studying Biology at the University of Groningen, since I didn't draw a place by lot for the study Medicine. This lottery for Medicine was unsuccessful the year after as well, so I continued and finished the Bachelor Degree in Biology in 2010. During my bachelor my major focused on Biomedical Sciences, e.g. via several research projects, and my minor focused on Medicine. One of my bachelor research projects studied the role of platelets in kidney transplantation, which sparked my fascination for platelets. My interest in science started to grow. By passing an entrance and selection exam I finally started studying Medicine in the same year via a fast-track (zij-instroom) program and qualified for the Bachelor of Medicine in one year to commence the master program afterwards. I realized I wanted to continue both research and Medicine and my MD/PhD proposal got accepted at the lab of prof. Henning in the Department of Clinical Pharmacy and Pharmacology. During the next years I alternated the master program with PhD research. I experienced medical internships in Groningen, Assen, Zwolle, Meppel, Harderwijk, Emmeloord and in Kumi - Uganda. My final half year of internships of choice were in Plastic, Reconstructive and Hand Surgery in the hospitals Medical Center Leeuwarden and University Medical Center Groningen. I obtained a grant to perform additional experiments which extended my PhD research, and part of the research I performed in Strasbourg, France. In 2017 I obtained my degree as Medical doctor and I started working in the Surgery department of Martini Hospital in Groningen, where I finished writing the PhD thesis.

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ACKNOWLEDGEMENTS

The work culminated into this thesis has been the result of the cooperation with many colleagues and the support of many friends and family. Although my name is at the center of it all, I would like to send words of gratitude to all involved in this successful MD/PhD project. Although many parts in science and in this MD/PhD project had to be scheduled up front and quite meticulously, going through this list of acknowledgements you will find that coincidence and meeting people by chance provided opportunities that I embraced to engage this journey with all the help I needed, for which I am very grateful.

First of all, I would like to thank my promotor, professor **Rob Henning**. Dear Rob, our connection was established already in my first year of studying Biology, approximately 10 years ago. I was impressed by your presentation skills in one of our Biomedical Research classes and we got and stayed in touch since the Autumn school for vascular medicine that year. The increasingly bigger projects I started with you and Hjalmar, in the department of (back then) Clinical Pharmacology, during my bachelor of Biology already planted a seed to one day start my own bigger project. Although I first continued developing my research skills via several other laboratories in the UMCG, you were the one to provide me the opportunity of an MD/PhD program in which I could develop my own research line and you provided me freedom in studying the topic of my choice with methods of my choice, all with proper supervision, guidance and advice when needed. Your enthusiasm for research has been contagious and I was happy to share your optimistic view on study results. Thank you for showing me how to view results in different perspectives and always provide feedback within a day or two fashion. Your view on research and thinking out of the box I gladly incorporated and will continue my take on science.

Secondly, my copromotor **Hjalmar Bouma**. Dear Hjalmar, also we met about a decade ago and I'm happy to have been part of your MD/PhD program at that time. I always wondered how you were able to perform so many things in life, study, work and remain such a sociable and nice guy. From you I learned our catchphrase 'als je teveel hooi op je vork neemt, moet je een grotere vork nemen' (lit. if you put too much on your fork, you need a bigger fork). And the fork became bigger and bigger. Thank you for also your brainstorm sessions, advices, fast feedback and laboratory ingredients/samples remaining from your PhD time. It was nice we were able to work together in the lab, in the hospital during my internships, as well as on a social level non-werk related.

Thirdly, I am very grateful to professor **Ton Lisman**. Dear Ton, also our journey in science goes back many years to 2010. After finishing my bachelor in Biology I started Medicine with a fast track program (zij-instroom) and met you to setup my master research in collaboration with the department of Experimental Nephrology. Learning from you about platelets and the coagulation system as well as the interesting connections with the liver set part of the stage for my MD/PhD plan. I learned a lot from you including your view on writing manuscripts and interpreting results. Thank you also for the 'diamond knife' necessary in part of our imaging studies in hibernating hamsters. You were always available for a brainstorm session and for quick feedback on manuscripts and fresh data. I am glad to collaborate with you and your team on several parts of this thesis, including the coagulation studies and especially in the intravital imaging study allowing to add another cherry on the pie.

Next, I am thankful to the PhD examining committee for taking time to assess this thesis. Professor **Nicole Juffermans**, thank you for your time evaluating the work in this thesis and coming to the North for the defense. I hope our fascination for hibernation and its translation to patients may sprout ideas that help you in your research line as well. Professor **Karina Meijer**, I am grateful to have presented part of my work in one of your Hematology research meetings and receiving your feedback and ideas that helped me in future presentations. Thank you also for your time assessing this thesis and being present in the defense. Professor **Scott Cooper**, dear Scott, part of your research in hibernating ground squirrels has inspired me to investigate further. I am very glad we met during the International Hibernation Symposium in 2016 and ever since stayed in touch. The scientific community would benefit from more people with your friendly view on science and publishing.

My paranympths **Maike Goris** and **René Mulder** have been a great help throughout the work on this thesis. It was through my project that you coincidentally met again after studying together several years before. Maike, it feels like we go way back, indeed about a decade ago after meeting Rob en Hjalmar and starting my scientific adventure. You taught me several micro-surgical skills and a lot on animal handling and tissue processing. Our shared love for imaging techniques further catalyzed all the imaging studies we performed, including the amazing intravital microscopy studies.

René, what started as a relatively small project to measure some plasma samples from hibernating hamsters expanded more and more into a great project to further understand the hemostatic system besides just the focus on primary hemostasis I had until then. You were always flexible with our difficult logistics of awakening hamsters, blood sampling, cycling from Zernike campus back to UMCG and performing aggregometry or other assays. You witnessed the busy schedule of an MD/PhD

student throughout my internships and work in the hospital and remained helpful in the background and supportive. Thanks to both of you for all your help and friendship. I would like to thank the people from the **Department of Clinical Pharmacy and Pharmacology**. During our meetings or in the hallway there have always been colleagues that added to the positive working vibe and provided me with nice feedback or a different view on the topic. Specifically, I want to thank my fellow PhD colleagues throughout the years, including **Deli, Mahdi, Marit, Nagesh, George, Linde, Marziyeh joon, Vera, Jojanneke, Marloes, Dalibor, Sebastiaan, Arash, Marie, Valeria, Lauren, Koen**. The office wouldn't have been the same without you! Thanks also to **Hendrik and Leo**, I always appreciated your input in meeting discussions. Furthermore, I appreciate all the help from the secretary, especially **Alexandra and Ardy**, you were always ready to help out. Technical help was also available, and I am grateful to **Maaïke, Femke, Marry** and **Azuwerus** for teaching me the proper laboratory techniques and helping out in my experiments.

Growing up in a family of teachers (guitar teacher and kinder garten teacher as parents, biology and Dutch language teachers as brothers, and even their spouses as teachers) I ended up liking to teach several students throughout my MD/PhD project, from bachelor to masterprojects, from Biology, Biomedical Technology and Lifescience students to Pharmaceutical science and Medicine. I'm happy all of you showed interest in my project and were willing to spend much of your time with me in and outside the lab. Thanks **Anne de Groot, Anniek van Stralen, Angelica Rodriguez, Bob Schut, Cynthia Thissen, Daryll Eichhorn, Eva Hoeks, Gert Vondeling, Koen Hendriks, Manolis Kyrloglou, Maurits Roorda, Pedro Romero Herrera, Rosalie Willemsen, Ulrike Weerman, Vincent de Jager, and Warner Hoornenberg**.

Throughout this project I collaborated with several other departments to which I am much obliged. I believe working together results in synergy, rather than just the work of two groups added together. I am very happy for what we achieved altogether.

The **Department of Surgery - Surgery Research Laboratory** has been of great help already before starting my PhD project, during my bachelor research and master research, and we continued working together the last years. Many colleagues remain interested in my work, and I'm always happy to share updates with each other, thanks for your shared enthusiasm! Besides professor **Ton Lisman**, specifically I would like to thank **Jelle Adelmeijer** and **Susanne Veldhuis**. Dear **Jelle**, thank you for your help in sample analysis and explanations for a deeper understanding of the methods used. I think we both wondered why don't these hamsters just respond like humans or mice,

but always have to make our analysis more difficult. I'm happy we were able to get our analysis in the end! Dear **Susanne**, I always enjoyed working with you and I'm very grateful for your help in setting up our intravital imaging study. You helped me to further improve my microsurgical skills and liver preparations. The imaging itself was a challenge, and then I wanted to make it even more difficult by combining it with our cooling and rewarming protocol of the animals. We managed, and the results were great. I hope at home your plants and family are growing well. Wishing all of you the best and I hope that our research future will connect again someday.

The **Department of Cell Biology - University Medical Imaging Center**. The hours I have spent here.. sometimes it felt like the evening or night shifts in the hospital, but always culminating in a great amount of data and images. **Ben Giepmans, Jeroen Kuipers, Klaas Sjollema, Michel Meijer**, thank you all for your help in the imaging studies. Thank you for providing the course, training, and supervision for all light-, fluorescence-, and electron-microscopy imaging that I needed. Performing the intravital imaging study was a great challenge as well as the live cell imaging of platelets, but with your help, flexibility and patience it resulted in amazing images and timelapse analyses. **Ben**, I am grateful for your help and feedback in all projects, you were always interested in the progress. I hope you and your family are doing well. Thank you **Jeroen** for all the hours and preparations to enable nanotomography with great electron microscopy images in hamsters. I hope you will continue your photography as well. Thank you **Klaas** for always being there for me to help with analyses, macro's, or setting up new techniques, cooling-rewarming and imaging, with ice or water and electricity nearby, with proper safety measurements all was possible. I believe we first met during my bachelor project with **Kiran Katta** and **Jaap van den Born**, imaging platelets in transplanted kidneys about ten years ago now, which also sparked my interest in platelets and imaging, I'm happy we stayed in good contact ever since. The help in need **Michel**, thanks for taking over when Klaas couldn't make it. I am glad you were able to help in our intravital imaging, it was fun working with you!

To the **Department of Anesthesiology** I am grateful for their continuous cooperation with our department. I always enjoyed the interest and discussions, for instance with **Anne Epema** in any random hallway within the UMCG, but mostly near Rob's office, and I am especially grateful to **Martin Houwetjes**. Dear **Martin**, I always respected with how much dedication you worked and your eye for detail in our experiments. Without your help I am sure I wouldn't have gotten as far with the hypothermia experiments as we did now. With your help I further improved on my microsurgical skills. I always

enjoyed your solutions and creations with little tubing, T-pieces and silicon to fully optimize our catheters for infusions and blood sampling. I hope you enjoy your well-deserved retirement! Thanks for all the help.

To the **Department of Laboratory Medicine**, I want to extend my gratitude especially to the section of Special Hematology, to **Michaël Lukens** and **René Mulder** and all the colleagues in the lab. You were of great help in our investigations of the hemostatic system in hibernating hamsters. Thank you for your continuous efforts and help in our submissions, I am sure we will soon succeed in publishing.

Thanks also to the **Department of Pharmaceutical Analysis**, specifically to professor **Sabeth Verpoorte** and to **Patty Mulder**. I am grateful for your help and lending all equipment for the flow and temperature experiments. The promising data resulted in nice (poster) presentations and is also implemented in the discussion in this thesis. Dear Patty, thank you so much for your enthusiasm and help, I hope we will be able to continue with the interventions for a better understanding of the mechanism behind the platelet margination.

To the **Department of Medical Biology and Pathology** I am grateful for the fruitful discussions with professors **Ingrid Molema** and **Marco Harmsen**, and for the help of **Henk Moorlag** in supplying all the HUVEC's and cell culture medium required for our *in vitro* experiments in collaboration with the Department of Pharmaceutical Analysis.

Much gratitude also to the **Cytometry Center**, especially to **Geert Mesander** for the great help in teaching and problem solving throughout all flow cytometry measurements.

Microsurgical skills were required for many experiments. I am very glad I had great teachers, such as **Martin Houwertjes**, **Maaïke Goris**, **Susanne Veldhuis**, but also the colleagues from the **Microsurgery team** of the **Central Animal Facility** who taught me a lot during the microsurgery course. Special gratitude to **Annemieke Smit-van Oosten** and **Michel Weij**. Thank you for always being available for technical advice and support, and for the occasional blood samples, it was always a pleasure working with you. Thanks also to **Darryll Eichhorn** for your help as a student in my project and later also for your microsurgical assistance in our hypothermia rewarming and platelet transfusion experiments.

This brings me to the other colleagues of the **Central Animal Facility**. Thanks to all involved in the experiments and caretaking of the animals as well as the secretariat

and front office for always being interested in the developments of my work and personal life. Special gratitude also to the members of the **Institutional Animal Care and Use Committee** (previously DEC) for the refreshing discussions and help in fine-tuning the protocols, thank you **Catriene Thuring** and **Miriam van der Meulen**.

Several people from Zernike campus I want to thank for making it possible to perform the hibernation experiments and daily torpor experiments in the climate controlled chambers. **Wanda**, without your help as biotechnician the experiments would have been even more difficult or impossible to perform logistically, thanks for your flexibility and teachings. **Roelof Hut**, it was always nice to work with you and with your master student **Koen Klaver** we were able to pull off a great daily torpor experiment in mice with loads of data, several parts of it also present in this thesis. I also want to thank all the animal caretakers. Although in hibernation research we get used to waking up in the middle of the night to pet hamsters or wake them up from hibernation, without the animal caretakers during daytime it would have been logistically impossible to perform all these hibernation experiments.

My gratitude also extends outside of the Netherlands to the French Bloodbank, specifically the **Etablissement Français du Sang** in Strasbourg. Learning your protocols at first hand was really useful and performing the experiments together added a great value to my PhD research. Thank you **Christian Gachet** and **François Lanza**, and also **Catherine, Sylvie, Anita, Morgane, Nicolas, Marie-Belle** and **Reine** for the warm welcome and great help in the lab. I wish you all the best and hope our paths may cross again some time. Merçi beaucoup!

My appreciation also for more French colleagues, working in the field of hibernation, specifically in Evolutionary Ecophysiology. It was a great pleasure to be welcomed to the **Department of Ecology, Physiology and Ethology** in Strasbourg, by **Caroline Habold** and **Mathilde Tissier**, nice to meet you both also in the conference in Las Vegas. It was amazing to see the quality of your setup for hibernation in European hamsters and to see the hamsters themselves given their endangered status in several European countries. I hope the collaboration of our labs with that of **Sylvain Giroud** in Vienna will lead to more knowledge on hibernation physiology.

I always appreciated **my friends** supporting me and remaining interested in the topic and progress of my research, whether they were also MD/PhD or PhD candidates or without any research background. I'm also grateful to **my family** for their continuous support already from the start of my studies until the end, and even now on my

new journey to get into specialization. Thank you for your everlasting love and trust. Although I acquired the MD title first, thanks to the experience with **my colleagues** in the **Surgery department** of the **Martini Hospital** this MD title started to mean something. Likewise, I hope after obtaining this PhD title, my future career will give more meaning to it.

Dear **Susana**, you are my best supporter and partner in life, thank you for all your help and completing me, without you this adventure of life wouldn't be this successful.