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Clinical epidemiology of commonly occurring anxiety disorders : insights into the phenomenology and course of anxiety disorders from the Leiden Routine Outcome Monitoring Study

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Clinical epidemiology of commonly occurring anxiety disorders

1. Findings from studies in the general population may not be readily generalizable to patients in clinical practice, as these patients represent only a subset of the subjects with anxiety disorders in the general population. *This thesis*
2. Findings from this thesis point at the importance of taking personality traits into account when studying anxiety, as dysfunctional personality traits may be associated with higher unobserved anxiety severity as well as chronic course. *This thesis*
3. Suicidal ideation is common in outpatients with anxiety disorders, and deserves attention in research. *This thesis*
4. Although budget cuts have been stifling, it must be noted that while a minimal ROM may cost less than a comprehensive ROM, it may chiefly serve administrative purposes, and fail to live up to its potential. *This thesis*
5. Clinical epidemiological studies are needed to study the predictors of individual differences in treatment response. Kessler, R. C. (2007). *Psychiatric epidemiology: challenges and opportunities. Int Rev Psychiatry, 19, 509-521.*
6. The false conflict between those who advocate randomised trials in all situations and those who believe observational data provide sufficient evidence needs to be replaced with mutual recognition of the complementary roles of the two approaches. Black, N. (1996). *Why we need observational studies to evaluate the effectiveness of healthcare. BMJ, 312, 1215-1218.*
7. The multimethod approach is the preferred method for assessing patients. Using this approach, clinicians are able to build up complete profiles of their patients' illnesses and make full assessments of the efficacy of treatment and their return to normal social functioning. Moller, H.J. (2000) *Rating depressed patients: Observer- versus self-assessment. Eur Psychiatry 15, 160-172.*
8. ROM provides an infrastructure that may be uniquely suited to conducting large ecologically valid clinical trials that may help answer questions relevant to staging and profiling. Arfken, C.L. & Balon, R. (2014) *Another look at outcomes and outcome measures in psychiatry: cui bono? Psychother Psychosom, 83, 6-9.*
9. Negative results matter. Curry, S. (2015) Occams corner: on the importance of being negative. *The Guardian, 05-08.*
10. The life of a PhD student is no bed of rose petals. Meuldijk, D. *personal communication, May 2015.*