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## **Things change: The early identification of patients with an unfavourable prognosis**

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### **Citation**

Boer, S. (2020, November 5). *Things change: The early identification of patients with an unfavourable prognosis*. Retrieved from <https://hdl.handle.net/1887/138009>

Version: Publisher's Version

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## **Stellingen**

behorende bij het proefschrift

### ***THINGS CHANGE. THE EARLY IDENTIFICATION OF PATIENTS AT RISK OF AN UNFAVOURABLE PROGNOSIS.***

1. A limited proportion of patients utilizes a substantial proportion of (mental) healthcare resources. (this thesis)
2. Early treatment response could be a proxy of different aspects concerning treatment effectiveness, e.g. adequateness of initial treatment and/or drugs, the mutual trust between clinician and patient and behavioral aspects such as treatment adherence. (this thesis)
3. The level of control of chronic conditions could be the resultant of commonly known predictors and/or risk factors of the chronic condition itself. (this thesis)
4. Treatment response adds an important insight that can be used to guide decisions regarding the treatment plan. (this thesis)
5. Prediction models can eventually affect individuals' health and cost-effectiveness of care only when the information (e.g. predicted risk) provided by the model changes individuals' and care providers' behavior and (self-)management decisions. (Moons, Grobbee 2012)
6. Routine healthcare data are mostly not collected for research purposes, but healthcare driven. Therefore, the researcher always has to ensure the completeness, validity, and applicability of the data for the question of interest. (Rosendaal 2014)
7. The initiated treatment does not always improve health outcomes as expected, or could be substantially reduced without adverse effects. (Choosing Wisely 2020)
8. Patients tend to feel safer when they participate in their own treatment plan; which creates individualization of treatment. (Henshall C, Marzano L, Smith K, Attenburrow MJ, Puntis S, Zlodre J, et al. 2017)
9. Have no fear of perfection, because you will never reach it. (naar Salvador Dalí, 1904-1989)
10. Patience is not the ability to wait, but the ability to keep a good attitude while waiting.