

Innovation in neurosurgery: Evaluation of neurosurgical innovation, related ethics, and solutions

Muskens, I.S.

Citation

Muskens, I. S. (2021, April 1). *Innovation in neurosurgery: Evaluation of neurosurgical innovation, related ethics, and solutions*. Retrieved from https://hdl.handle.net/1887/3151773

Version: Publisher's Version

License: License agreement concerning inclusion of doctoral thesis in the

Institutional Repository of the University of Leiden

Downloaded from: https://hdl.handle.net/1887/3151773

Note: To cite this publication please use the final published version (if applicable).

Cover Page



Universiteit Leiden



The handle http://hdl.handle.net/1887/3151773 holds various files of this Leiden University dissertation.

Author: Muskens, I.S.

Title: Innovation in neurosurgery: Evaluation of neurosurgical innovation, related ethics,

and solutions

Issue date: 2021-04-01

Stellingen

behorend bij het proefschrift getiteld

Innovation in Neurosurgery

Evaluation of neurosurgical innovation, related ethics, and solutions

door Ivo S. Muskens, MD

- 1. The WovenEndobrige (WEB) device has not been sufficiently evaluated to justify its use for wide-neck intracranial aneurysms (this thesis).
- 2. The introduction of many innovative neurosurgical procedures is unstructured and unethical (this thesis).
- 3. The IDEAL Framework is usable for neurosurgical innovation but requires extensive efforts for successful adherence (this thesis).
- 4. Fair valuation of neurosurgical innovation may aid the structural and ethical introduction of novel procedures (this thesis).
- 5. Education, promotion, and room for specialty-specific nuance within the IDEAL framework recommendations could improve its uptake and help guide neurosurgical development to produce a high-quality evidence base for our practice. Ota et al., *The IDEAL framework in neurosurgery: a bibliometric analysis.*, Acta Neurochir (2020). doi: 10.1007/s00701-020-04477-5
- Agreeing on and implementing respected standard sets of outcomes for each medical condition is a practical and decisive step in accelerating value improvement in health care. Porter et al., Standardizing Patient Outcomes Measurement, N Engl J Med 2016; 374:504-506
- 7. The care-research distinction offers limited guidance for determining the adequate level of ethics regulations and oversight within an LHS. Wouters et al., *Learning health care systems: Highly needed but challenging*, Learn Health Sys. 2020;e10211.
- 8. After approval of medical devices, policymakers and regulators must stimulate post-marketing studies that correspond to the limitations of pre-approval studies, studies with a randomized design, improve the efficiency of RCTs, invest in data infrastructure, and creating new incentive and penalty mechanisms. Cipriani A. et al. *Generating comparative evidence on new drugs and devices after approval*, Lancet 2020 395:998-1010
- 9. Non nobis solum nati sumus (*Not for ourselves alone are we born Cicero*). The ultimate goal of the medical sciences is the improvement of patient' outcomes, not the advancement of academic careers or financial gain of those involved.
- 10. Firm believers in progress should beware of hypes as they form a threat to patients' safety.