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## **Subclinical hypothyroidism in community-dwelling older people: consequences and treatment outcomes**

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## Stellingen behorend bij het proefschrift getiteld

### **Subclinical hypothyroidism in community-dwelling older people Consequences and treatment outcomes**

1. In community-dwelling older people, compelling evidence of causal relationships between subclinical hypothyroidism and a variety of clinically or biologically relevant outcomes is lacking. (*this thesis*)
2. Diagnostic and therapeutic management of subclinical hypothyroidism in older people should not rely on additional laboratory measurements, including haemoglobin and antithyroperoxidase antibody levels. (*this thesis*)
3. Routine levothyroxine treatment for subclinical hypothyroidism fails to provide clinical benefits for community-dwelling older people. (*this thesis*)
4. Subclinical hypothyroidism in community-dwelling older people is, with few exceptions, not a disease and may be considered normal. (*this thesis*)
5. In many areas of medicine, and thyroidology in particular, the best available evidence to guide clinical decision-making is often of low quality. (*adapted from Sawka et al, Thyroid 2021*)
6. In order to optimally capitalise on the medical and societal challenges and opportunities presented by an aging global demographic, researchers have no time to waste to focus on older people.
7. When researchers design scientific studies, patient input should drive consideration of the full range of outcomes that patients consider important, rather than the restricted set of outcomes researchers often choose.
8. Guidelines ought to consider general criteria of effectiveness when considering patients as a group, but physicians should complement evidence by appraising patient context when considering them as individuals.
9. Academic success is a function of the ability to embrace positive research results, as well as the capability of celebrating research results that are 'as flat as pancake'.
10. Dutch medical research needs a paradigm shift: "The difference between medical research and agricultural research is that medical research is done by doctors but agricultural research is not done by farmers." (*Michael Healy, unpublished 1998*)
11. "If you can't explain it to a six year old, you really don't understand it yourself" proves to be an excellent measure for PhD-students as well (*often attributed to A. Einstein*)