

Stellingen behorende bij het proefschrift

**Outcome and Comparative Effectiveness Research in Traumatic Brain Injury:  
A methodological perspective**

1. Although post-concussion symptoms and psychiatric disorders occur frequently after mild TBI, it is uncertain whether they are *caused* by mild TBI (*this thesis*)
2. Prediction modelling to identify mild TBI patients at risk for post-concussion symptoms and psychiatric disorders is currently unsuccessful (*this thesis*)
3. Comprehensive provider profiling should be a standard component of multicenter studies (*this thesis*)
4. Multicenter observational comparative effectiveness research is a promising approach to expand our knowledge on treatment effectiveness in TBI (*this thesis*)
5. Living systematic reviews are a solution for the lack of currency of systematic reviews and guidelines in TBI (*this thesis*)
6. PhD students are at higher risk of developing psychiatric disorders (*Levecque et al., Research Policy, 2017*) than patients who sustained a TBI
7. Political correctness can distort research (*Hunter, Sciences and Society 2005*)
8. Something that has not been definitively proven as effective must not be interpreted to mean that it does not have clinical utility, should not be continued, or should not be reimbursed. In fact, it should remain the topic of active research investigation (*based on Chesnut, 1999. AHCPR*)
9. Pregnancy, childbearing and motherhood have no effect on the mother's research productivity, measured with the CW index, in the first three years after the birth of her first child (*Krapf et al. 2014, working paper, federal reserve bank of st. Louis*)
10. The most effective treatment for anxiety is exposure (*Chambless & Ollendick, Annual Review of Psychology, 2001*)
11. In the middle of difficulty lies opportunity (*Einstein*)

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