Propositions accompanying the thesis

Maternal iodine status, thyroid function during pregnancy, and child neurodevelopment

- 1. Mild iodine deficiency during pregnancy is not associated with meaningful changes in maternal thyroid function. (this thesis)
- 2. Optimal maternal iodine status in the first 14 weeks of gestation is important for fetal brain development. (this thesis)
- 3. There is no consistent evidence for an association between mild iodine deficiency during pregnancy and child behavioral problems. (this thesis)
- 4. Low FT4 is more robustly associated with lower child IQ than high TSH. (this thesis)
- 5. Country-specific determinants of maternal iodine status call for country-specific strategies to improve iodine intake during pregnancy. (this thesis)
- 6. Meta-analyses of individual participant data should ideally be informed by a rigorous systematic review that searches for both published and unpublished studies. (Ahmed et al., BMJ 2011)
- 7. Owing to the lack of strict criteria for heterogeneity, the value of a meta-analysis depends on the insight and choices of the meta-analyst.
- 8. It can be expected that overtreatment in pregnancy is more common if treatment focuses on reducing TSH, and FT4 is seldom monitored. (adapted from Hales et al., JCEM 2019)
- 9. Openly acknowledging the lack of knowledge is just as much a task of science as proclaiming the acquired knowledge.
- 10. To imagine we can end antisemitism is like dreaming we can reverse the aging process.
- 11. The noblest pleasure is the joy of understanding. (Leonardo da Vinci)