

Propositions associated with this thesis:

Colon Cancer

- MATCHing patients and treatment -

1. Relevant variation in guideline adherence and daily practice exists regarding treatment for colon cancer which contributes to differences in survival. (*This thesis*)
2. Low socioeconomic status is associated with worse outcome in patients undergoing curative surgery for stage I-III colorectal cancer. (*This thesis*)
3. Consensus Molecular Subtypes (CMS) can be used to classify colon cancer patients. CMS 2 and 3 can be distinguished by a methylation marker panel with a sensitivity, specificity, and accuracy of > 90%. (*This thesis*)
4. In patients with chemo-naïve lymph node negative colon cancer, high diversity in circular RNAs is associated with favorable disease free survival. (*This thesis*)
5. Not administering adjuvant chemotherapy in stage III colon cancer patients can lead to poorer recurrence free survival, most present in patients with high T-stage and N-stage tumors. (*This thesis*)
6. Medicine still remains a science of uncertainty and an art of assessing probability. Until personalized medicine evolves to a level that a person's lifetime risk of clinically significant cancer formation and expected outcome can be computed with a great degree of precision and confidence, clinicians and patients have to be cognizant of the problem of cancer overdiagnosis and overtreatment. (*Bhatt et al. Expert Opin Pharmacotherapy, 2016*)
7. Good quality is less costly because of more accurate diagnoses, fewer treatment errors, lower complication rates, faster recovery, less invasive treatment, and the minimization of the need for treatment. More broadly, better health is less expensive than illness. (*Porter et al. Redefining Health Care: Creating Value-Based Competition on Results, 2006*)
8. Language is still the bedrock of clinical practice. (*Groopman, How Doctors Think 2007*)
9. Precision medicine is a data driven, knowledge driven, compassion driven, social intelligence driven, genetically compatible tailoring medical treatment and prevention systems for individual patients. (*Amit Ray*)
10. The Dunning-Kruger effect: The miscalibration of the incompetent stems from an error about the self, whereas the miscalibration of the highly competent stems from an error about others. (*Kruger et al. Journal of Personality and Social Psychology 1999*)
11. Het mag wat Rotterdammers kosten (H.F. Veen & P.T. Den Hoed)