

Propositions accompanying this thesis:

Maintaining Cognitive Health into Old Age *Population-wide and Personalized Preventive Strategies*

1. In old age, the burden of brain diseases equals that of heart disease. *(This thesis)*
2. A high prevalence of co-occurring chronic diseases in aging populations emphasizes the need to train more medical generalists in current and future health(care) systems. *(This thesis)*
3. Most clinical studies on patients with dementia are not representative of the actual patients that are seen in daily practice. *(This thesis)*
4. The horizon of dementia prediction models should be expanded to a lifetime perspective in order to capture the population that benefits most from preventive interventions. *(This thesis)*
5. Exclusion of older adults at high 10-year risk of cardiovascular disease could advance design of dementia prevention trials. *(This thesis)*
6. Emergence of SARS-CoV-2 stresses the importance of population-based investigations on the prevalence and prognosis of unheeded symptoms, both in- and outside pandemics.
7. General practice is based on a lie — a lie that we can do this safely and well in 10 minutes. (Margaret McCartney, the BMJ. 2017)
8. The young physician starts life with 20 drugs for each disease, and the old physician ends life with one drug for 20 diseases. (William Osler)
9. In whatever reasonable way living healthy is cataloged and health outcomes are captured, the latter improve when the former is practiced. (James M. Rippe, Encyclopedia of Lifestyle Medicine and Health. 2012)
10. Visualization can surprise you, but it doesn't scale well. Modeling scales well, but it can't surprise you. (Hadley Wickham)
11. Het krijgen van drie kinderen als promovendus, relativeert het schrijven van een proefschrift als vader.

Silvan Licher, October 8, 2021