Propositions belonging to the thesis:

Better decision making in cancer: screening tests and prediction models

1. Informed consent in cancer screening programs should be supported by patient decision aids to sustain patient autonomy. *This thesis*

2. Offering prophylactic hysterectomy to women with Lynch Syndrome is cost-effective, but the decision to undergo such resections should always be accompanied by individual weighing of preferences and utilities. *This thesis*

3. Prophylactic hysterectomy might be considered in women with Lynch Syndrome until the age of 80, as long as the relative increase in costs is small and outweighs the risks of potential unnecessary surgery. *This thesis*

4. The usefulness of prediction models for endometrial cancer is limited due to methodological shortcomings. Prediction models should be externally validated before clinical application to avoid misleading individual risk estimates. *This thesis*

5. Predicting regression of precursor cancer lesions can aid physicians in determining an optimal, individualized treatment strategy to limit harm and prevent over-treatment. *This thesis*

6. It is often difficult to acquire relevant management information from hospital data due to the availability of large amounts of data and the limited process capability. *Chen SS. Telematics and informatics, 2017*


9. People are incapable of valuing health until sickness comes, allowing them to reflect on their taken-for-granted health. *Albrecht GL. Handbook of social studies in health and medicine, 2003*

10. The healthcare system should allow variation in practice, provided that variation is based on clinical differences and preferences rather than on other factors such as payment method, geography or system proclivities. *Krumholz. JAMA, 2017*

11. May your choices reflect your hopes, not your fears. *Nelson Mandela*

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