1) From a patient perspective Totally Extra Peritoneal (TEP) repair is recommended over Lichtenstein repair in case of inguinal hernia. (this thesis)

2) Totally Extra Peritoneal (TEP) repair performed by an inexperienced surgeon leads to higher recurrence rates and risk of chronic postoperative inguinal pain (CPIP). (this thesis)

3) Young age is a prognostic negative factor for chronic postoperative inguinal pain (CPIP) in adult hernia repair. (this thesis)

4) The mesh used in tension free inguinal hernia repair does not play a significant causal role in chronic postoperative inguinal pain (CPIP). (this thesis)

5) The risk of chronic postoperative inguinal pain (CPIP) in the adult population can be individualized by using a risk prediction model. (this thesis)

6) No disease of human body, belonging to the province of surgeon, requires in its treatment a better combination of accurate anatomical knowledge with surgical skill than hernia in all its varieties. (Sir Astley Paston Cooper)

7) Although inguinal hernia surgery is marked as a low complex and high frequent surgical procedure, outcomes would also benefit from centralization/concentration comparable to high complex low frequent surgical procedures.

8) Differentiated root cause analysis of increased near miss reporting leads to better focused attention in medical handling aspects resulting in optimized quality and dramatic decrease of recurrences. (J. Benders)

9) Homeopathy sometimes cures because coincidence exists. (K. Kaptein 2006)

10) If there were only one truth, you couldn’t paint a hundred canvases on the same theme. (Pablo Picasso)

11) None of us is as smart as all of us. (Eric Schmidt, former executive chairman of Google)

Hester Langeveld, 10 december 2014