## **Osemeke Osokogu - PROPOSITIONS**

- 1. To estimate the occurrence of childhood diseases from dynamic electronic health care databases, researchers should consider both the peculiarities of the disease and the data sources (this thesis).
- 2. To compare and further develop methods for pediatric drug safety signal detection in spontaneous reporting databases, a large pediatric-specific drug-adverse event reference set is required (this thesis).
- 3. Pediatric drug safety signal detection in spontaneous reporting databases unmasks invisible associations when age stratification is applied (this thesis).
- 4. To increase the internal validity of pediatric pharmacoepidemiological safety and effectiveness studies, the methods of these studies should be improved (this thesis).
- 5. When applying propensity scores to control for confounding by indication in pediatric comparative effectiveness studies on asthma medication, the confounders occurring just prior to drug initiation are the most important (this thesis).
- 6. To rapidly improve knowledge about drug effects in children, more researchers with specific training in pediatric drug research are required; adequate funding is needed and methods and tools should be shared across geographical boundaries and drug regulatory jurisdictions.
- 7. Doctors and patients need as much data as possible to make an informed decision about what treatment is best (Ben Goldacre, 1974 date).
- 8. Children are not small adults (Moore, The Lancet 1998).
- 9. If you can find a path with no obstacles, it probably doesn't lead anywhere (Frank A. Clark, 1860 1936).
- 10. To be a good scientist, you should not only propose new ideas but also be willing and ready to oppose the same ideas in the face of new evidence.
- 11. Perhaps you are slow, or should I rather say methodical? What truly matters is that you maintain your focus and finish well.