PROPOSITIONS

belonging to the dissertation

HEALTH TECHNOLOGY ASSESSMENT OF HYPERPHOSPHATEMIA MANAGEMENT AMONG HEMODILAYSIS PATIENTS IN LEBANON

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1. Hemodialysis and hyperphosphatemia represent a substantial economic burden to the national health system and to Lebanese society. (this dissertation)

2. We lack conclusive evidence on the cost-effectiveness of phosphorus-lowering interventions among hemodialysis patients. (this dissertation)

3. Intensive nutrition education for hyperphosphatemia management is clinically effective in decreasing serum phosphorus without compromising the nutritional status of hyperphosphatemic hemodialysis patients. (this dissertation)

4. A concerted effort from all stakeholders is needed to build capacities and bridge current gaps in health technology assessment evidence building in Lebanon. (this dissertation)

5. One of the greatest opportunities to improve patient outcomes will probably come not from discovering new treatments, but from more effective delivery of existing therapies. (Pronovost et al., 2004)

6. A health technology assessment agency in Lebanon is not only a viable option, but also a necessity within the current reform in the Lebanese health sector.

7. Increased stakeholder involvement throughout the process can help to capture and improve the real-world value and applicability of health technology assessments. Nevertheless stakeholder involvement needs to be transparent and well-managed in order to ensure that the objectivity of assessments is not compromised. (Sorenson et al., 2008)

8. Having dedicated dietitians providing intensive nutrition education is a clinically effective and possibly an economically attractive intervention among hemodialysis patients. This model of nutrition care could be proposed for developing countries like Lebanon.

9. I have come that they may have life, and have it to the full. (John 10:10)