

Economic evaluations in healthcare

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PROPOSITIONS

belonging to the dissertation

Economic Evaluations in Healthcare: Methodological Considerations and Applications on Cost-Effectiveness of ACE Inhibitor Treatment for Renal Disease Prevention

Charles Christian Adarkwah

10 September 2015

- 1) Renal disease, especially end-stage renal disease, is a huge and increasing burden for health care systems. (this dissertation)
- 2) ACE inhibitors and ARBS are cost-effective in patients with type 2 diabetes without evidence of albuminuria and in patients with advanced non-diabetic renal insufficiency to delay progression of renal disease in Germany and the Netherlands. (this dissertation)
- 3) Cost-effectiveness results of ACE inhibitors and ARBs in renal disease suggest to reconsider current treatment guidelines in respect to end-stage renal disease prevention. (this dissertation)
- 4) Consumption costs should be included in the numerator of the ICER not only for life extending but also for quality-of-life enhancing interventions, at least for those who spontaneously consider non-health-related utility from treatment. (this dissertation)
- 5) Every researcher is at risk to induce bias in the economic evaluation performed. Researchers should be aware of this fact and aim to minimize bias systematically. (this dissertation)
- 6) The ECOBIAS checklist can be seen as a complementary tool next to existing guidelines and checklists and might help to increase trust in economic evaluations. (this dissertation and valorisation)
- 7) "Make everything as simple as possible, but not simpler." — Gerd Gigerenzer
- 8) "Poison is in everything, and nothing is without poison. The dosage makes it either a poison or a remedy." — Paracelsus
- 9) "Music expresses that which cannot be said and on which it is impossible to be silent." — Victor Hugo
- 10) Friends don't let friends clap hands on one and three.