

Nutrition and disease course in inflammatory bowel disease

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Stellingen behorend bij het proefschrift

Nutrition and disease course in inflammatory bowel disease

Studies on dietary intake and nutritional status

1. Habitual dietary patterns can impact disease course in patients with IBD. (*this thesis*)
2. Geographical differences in dietary intake between regions, even within countries, should be taken into account when the association between dietary intake and disease course is studied. (*this thesis*)
3. Screening for malnutrition is recommended for all IBD outpatients by assessing multiple nutritional status parameters. (*this thesis*)
4. The interaction between nutritional status and disease course in IBD is bidirectional. (*this thesis*)
5. A holistic approach of IBD care, by addressing lifestyle disease modifiers such as diet quality, exercise, and psychosocial risk factors, will contribute to better disease management and patient well-being. (*this thesis*)
6. In an era of pressure on healthcare capacities and rising incidence of IBD, telemedicine systems could be a valuable tool for reorganizing IBD care towards more personalized and value-based healthcare. (*De Jong et al., The Lancet, 2017*)
7. Machine learning approaches are valuable for patient stratification, prediction of disease progression and therapy responses for fine-tuning treatment options with positive impacts on cost, health and safety. (*Seyed Tabib et al., Gut, 2020*)
8. Nutritional epidemiology is far from being a perfect science, but with a thorough understanding of the discipline, valuable insights on diet and health outcomes can be obtained from free-living populations. (*Satija et al., Advances in Nutrition, 2015*)
9. Education is not the learning of facts, but the training of the mind to think. (*Albert Einstein*)
10. Dubio, ergo sum. (*Hans Fiolet*)
11. Whatever you decide to do, make sure it makes you happy. (*Paulo Coelho*)