

Confronting smokers with previously undetected airflow limitation for smoking cessation

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Statements

accessory to the PhD thesis

Confronting smokers with airflow limitation for smoking cessation

Daniel Kotz

Maastricht, 21 November 2008

1. In smokers who are interested in quitting, confrontation with abnormal results from spirometry does not increase long-term smoking cessation rates. *(this thesis)*
2. A counselling approach in which smokers are confronted with evidence of airflow limitation can decrease smokers' self-exempting beliefs (i.e. denial of being at risk of a smoking-related disease) and may subsequently increase short-term smoking cessation rates. *(this thesis)*
3. The sample for the development of a symptom-based diagnostic tool for early detection of chronic obstructive pulmonary disease (COPD) should be stratified by smoking status. *(this thesis)*
4. The social gradient in smoking prevalence cannot be explained by variation in the rates of attempts to quit but rather by a lower likelihood of success of these attempts in smokers from lower social grades. *(this thesis)*
5. Perceived lack of patients' motivation to quit smoking is the most important barrier to health care professionals' smoking cessation activities.
6. The transtheoretical (stages-of-change) model should be put to rest. *(West, Addiction 2005; 100 (8): 1036-1039)*
7. Scientific researchers should report a unique researcher identification number on all their scientific output. *(Cals & Kotz, Lancet 2008; 371 (9631): 2152-2153)*
8. The copy/paste function of word processing programmes is a threat to science.
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9. Many Europeans have a negative attitude towards the European Union because they take its many positive accomplishments for granted (such as everybody's right to travel, work and live throughout the union).
10. Germans who are nice and funny are often perceived as "not typically German" by Dutch people.
11. Music is the only language that can be spoken directly from heart to heart.