

University of Groningen

App-based treatment for female urinary incontinence

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DOI:
[10.33612/diss.182829039](https://doi.org/10.33612/diss.182829039)

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Document Version
Publisher's PDF, also known as Version of record

Publication date:
2021

[Link to publication in University of Groningen/UMCG research database](#)

Citation for published version (APA):

Loohuis, A. M. M. (2021). *App-based treatment for female urinary incontinence: evidence-based eHealth as an alternative to care-as-usual*. [Thesis fully internal (DIV), University of Groningen]. University of Groningen. <https://doi.org/10.33612/diss.182829039>

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STELLINGEN

1. Een app-behandeling voor ongewild urineverlies bij vrouwen is een werkzaam en kostenbesparend alternatief voor de bestaande standaard zorg. (Dit proefschrift)
2. Werving van patiënten via sociale media is erg geschikt voor onderzoek naar ziekten waar een taboe op heerst. (Dit proefschrift)
3. De extra functies die een app kan bieden zijn niet voor elke patiënt een toevoeging en kunnen zelfs belemmerend werken voor het uiteindelijk effect van de behandeling. (Dit proefschrift)
4. Het personaliseren van de keuze tussen app-behandeling en standaard zorg door middel van een predictiemodel verhoogt potentieel het effect van behandeling op zowel individueel niveau als op groepsniveau. (Dit proefschrift)
5. "An app is not a drug with one active ingredient, it is a complex intervention and should be developed and evaluated as such." (Craig et al. 2008)
6. "Deciding how to do your research depends on a clear understanding of why you are doing the research." (Morgan DL)
7. The solution to evidence based eHealth should not lie in study designs that are more practical and fast but of lower quality, it should rather lie in high-quality study designs assessing the principles underlying treatment effect with generalizability to other eHealth-interventions.
8. An app-based treatment needs continuous development and evaluation.
9. There is need for central regulation, support and guidance of evidence based eHealth, to guard quality of the interventions and to guide end-users to the available effective treatment options, including care-as-usual.
10. An app-based treatment for UI could also improve care-as-usual and lower taboo by creating awareness, normalizing the condition, and empowering women to demand sufficient treatment.
11. "The true outcome of research is determined by the influence it has had and the changes in society it has ignited."(Holmberg)
"Je wil in de telegraaf komen."(te Winkel, persbureau UMCG)
12. "Twijfel is het begin van wijsheid." (Aristoteles)
13. In de huisartsgeneeskunde is evidence belangrijk, maar ligt empirie aan de basis van de meeste dagelijkse beslissingen. (naar Stella Torn Broers, Siebolt van Dijk en anderen)