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The human dimension in the assessment of medicines

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The march towards an ever-advancing modernity and the widespread distribution of the associated harms has forced a new dialogue on risk (this thesis)

Experts do not have a veridical view of risks but instead have their own set of perceptions that are related to demographic and situational characteristics (this thesis)

Medical assessors have a measurable risk attitude that predicts how risky they perceive a drug via the use of a cognitive shortcut (heuristic): that benefit is the opposite of risk (this thesis)

Divergent views between regulators and experts are known to occur but are accepted as professional differences. Divergent views between experts and public however, are regarded as failure of comprehension on the part of the public (this thesis)

Regulators are more sensitive to increase in risks caused by medical treatment than are patients (this thesis)

The challenge of moving public participation in risk assessment from a limited engagement of a small number of representatives working within the current evaluative structure into a broader interaction with a more representative public can be met by the application of an existing multi-criteria methodology (this thesis)

As aptly summed by Moore, the aspiration for democracy in science is that "technical is political, the political should be democratic and the democratic should be participatory" (Moore A, 2010)

Behind every great man there is an even greater woman

Education is an admirable thing, but it is [good] to remember from time to time that nothing that is worth knowing can be taught (Oscar Wilde)