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Advancing personalized medicine in type 2 diabetes through better prediction of drug efficacy

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**Propositions
Belonging to the PhD thesis**

Advancing personalized medicine in type 2 diabetes through better prediction of drug efficacy

1. Personalized medicine in patients with type 2 diabetes is needed given the wide variability in terms of risk of progression and response to treatment. (This thesis)
2. Biomarkers based approaches are vital to improve personalized medicine, particularly for diagnostic, prognostic, and treatment selection purpose in patients with type 2 diabetes. (This thesis)
3. Albuminuria reduction is recommended by guidelines to lower the risk of kidney and cardiovascular outcomes in patients with type 2 diabetes, however, albuminuria improvement alone does not fully capture the long-term effects of the recommended drugs. (This thesis)
4. Improving multiple risk markers simultaneously in patients with type 2 diabetes is essential for long-term kidney and cardiovascular protection. (This thesis)
5. A risk score integrating multiple short-term drug effects is a valid tool to establish long-term drug effects. (This thesis)
6. An individualized risk and treatment effect estimation according to a multivariable risk based approach is the way forward to guide clinical decision making. (This thesis)
7. Dynamic biomarkers for drug response can be used to enrich a trial population with potential drug responders, to enhance the efficiency of clinical trials.
8. It is important to know what sort of person has a disease, than to know what sort of disease a person has. (Hippocrates)
9. We can't solve problems with the same thinking that caused them. (Albert Einstein)
10. All models are wrong, but some are useful. (George E.P. Box)