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Personalised approaches to improve tuberculosis care

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Propositions of the PhD Thesis

Personalised approaches to improve tuberculosis care

Cutting tuberculosis' many coats according to specific cloths

Ioana Ștefania Mărgineanu

- 1. Patient reported outcomes provide additional dimensions to programmatically reported outcomes.
- 2. Models predicting tuberculosis outcomes need to be setting-centred in order to be meaningful for improving treatment.
- 3. Therapeutic drug monitoring indications require evidence based revision in order to increase relevance and feasibility.
- 4. Cost-effectiveness presents a larger challenge to implementing therapeutic drug monitoring than therapeutic drug monitoring evidence.
- 5. Low tuberculosis infection prevention uptake is a shortcoming of the healthcare system and not a lack of motivation of the migrants.
- 6. Digital health can facilitate clinician-patient relationships, but cannot replace them.
- 7. Digital health could enhance every step of TB clinical care if it is introduced in a programmatic, patient-oriented way.
- 8. Trying to get people who know a lot of things to agree on a few simple things is like herding cats.
- 9. Post colonialism, capitalism, and patriarchism are the three main beams supporting the (universal) glass ceiling.
- 10. There are three skills we should aim to teach the young: critical thinking, curiosity, and common sense.