Propositions accompanying the thesis

OPTIMIZING ANTIVIRAL THERAPY FOR CHRONIC HEPATITIS B

A controlled shift towards cure

1. The benefits of stopping nucleos(t)ide analogue therapy before HBsAg loss remain limited, especially for pretreatment HBeAg-positive Asian patients with chronic hepatitis B. *(this thesis)*
2. A rapid viral load increase upon nucleos(t)ide analogue discontinuation predicts the greatest risk of severe biochemical flares, which may prompt close monitoring or immediate retreatment. *(this thesis)*
3. The best candidates for pegylated-interferon add-on among HBeAg-positive patients with chronic hepatitis B are those that are interferon-naïve and have low values of HBsAg and HBV DNA. *(this thesis)*
4. Dose-adjustment of tenofovir disoproxil fumarate could be a feasible option to reverse further renal decline during long-term antiviral treatment. *(this thesis)*
5. Despite the rare use of hepatotoxins, physicians should actively address use of complementary and alternative medicine and specific harmful constituents as part of standard clinical care. *(this thesis)*
6. Combination treatments appear to be an unavoidable strategy to improve functional cure in chronic hepatitis B. *(Lok, Hepatology 2017)*
7. The cost of combination curative treatments may become problematic in low- and middle-income countries, given the low cost of generic nucleos(t)ide analogues and the minimal monitoring required. *(Dusheiko, Liver Int 2020)*
8. A goal for medicine and its practitioners is to strive to provide the means by which the poor can cease to be unwell. *(Kumar & Clark)*
9. In Nederland zijn er 2 miljoen mensen die bij gezondheidsklachten niet meer uitsluitend op de huisarts vertrouwen. *(Duyvendak, NRC Handelsblad 2021)*
10. False news is virtually always more likely to be retweeted than the truth because of humans, not robots. *(Vosoughi, Science 2018)*
11. Kleur heb je nooit zelf, kleur krijg je door anderen. *(Arthur Japin, 1997)*

Kin Seng Liem