

**Screening and Surveillance of the Gastrointestinal Tract**

1. The diagnostic yield for detecting clinically relevant premalignant gastric lesion can be improved by adding one extra follow up endoscopy – *this thesis*
2. Optimisation of gastric surveillance based on stratifying patient risk factors will increase surveillance efficiency – *this thesis*
3. High risk regions for gastric cancer may implement dual screening for gastric and colorectal cancer by analysing *H. pylori* in the fecal immunochemical test – *this thesis*
4. Currently available data shows that lowering the start age limit for colorectal cancer screening in the Netherlands from 55 to 50 years is effective – *this thesis*
5. Colon Capsule Endoscopy has proven to be a sufficient screening alternative when colonoscopy is not preferred – *this thesis*
6. Introducing any form of prevention programmes will enhance inequity within societies. *Hofmann, Journal of Evaluation in Clinical Practice, 2016*
7. Robots are taking over the world. *Stidham, Gastroenterology & Hepatology, 2020*
8. Prevention is the key to any health condition - it all starts by living a healthy lifestyle and this is an individuals' responsibility. *Reifegerste, et al. Database of Variables for Content Analysis, 2021*
9. A health screening provides a false feeling of security. *Wieten, Gut, 2019*
10. A PhD trajectory is like running a marathon; remember to pace yourself. *Greep et al., the American Journal of Medicine, 2021*
11. "In de zon zitten kan ook in je achtertuin" – *Papa †*