1) Renal disease, especially end-stage renal disease, is a huge and increasing burden for health care systems. (this dissertation)

2) ACE inhibitors and ARBS are cost-effective in patients with type 2 diabetes without evidence of albuminuria and in patients with advanced non-diabetic renal insufficiency to delay progression of renal disease in Germany and the Netherlands. (this dissertation)

3) Cost-effectiveness results of ACE inhibitors and ARBs in renal disease suggest to reconsider current treatment guidelines in respect to end-stage renal disease prevention. (this dissertation)

4) Consumption costs should be included in the numerator of the ICER not only for life extending but also for quality-of-life enhancing interventions, at least for those who spontaneously consider non-health-related utility from treatment. (this dissertation)

5) Every researcher is at risk to induce bias in the economic evaluation performed. Researchers should be aware of this fact and aim to minimize bias systematically. (this dissertation)

6) The ECOBIAS checklist can be seen as a complementary tool next to existing guidelines and checklists and might help to increase trust in economic evaluations. (this dissertation and valorisation)

7) “Make everything as simple as possible, but not simpler.” — Gerd Gigerenzer

8) “Poison is in everything, and nothing is without poison. The dosage makes it either a poison or a remedy.” — Paracelsus

9) “Music expresses that which cannot be said and on which it is impossible to be silent.” — Victor Hugo

10) Friends don't let friends clap hands on one and three.