Janneke van t Hooft
Postdoctoral Research Fellow, SCRDP/ Heart Disease Prevention

Bio
Janneke van ’t Hooft is a postdoc that started on the 28th of May 2019 at the Department of Preventive Medicine at Stanford. Previously she worked as a MD resident in gynecology at the Academic Medical Center of Amsterdam, The Netherlands. She also has a master degree in Clinical Epidemiology. She combines her clinical work with research in which she supervises several PhD students. Her previous research focused on improving evaluation research in obstetrics and gynecology by development of core outcome set and setting (international) research priorities in obstetrics and gynecology.

STANFORD ADVISORS
- John Ioannidis, Postdoctoral Faculty Sponsor
- John Ioannidis, Postdoctoral Research Mentor

Research & Scholarship
CURRENT RESEARCH AND SCHOLARLY INTERESTS
Identifying research waste in preterm birth prevention to increase the effectiveness and value of research investments.

Clinical research aims to produce knowledge that patients and doctors can use to decide on treatments, balancing between expected beneficial and harmful effects. In view of this, it is absolutely critical that the knowledge produced in research is valid, reliable and meaningful. Unfortunately, it is likely that a high proportion of research is not useful, or may even provide false findings, a problem defined as research waste.

The work I propose to do at the Meta-Research Innovation Center at Stanford will focus on research waste reduction where I will use prevention of preterm birth as the specific example how to evaluate current effectiveness and value of research.

As a medical doctor in obstetrics I’m confronted daily with the burden of preterm birth, which is the single most important cause of perinatal mortality and morbidity. While the volume published research on preterm birth is increasing, effective interventions for women (and their offspring) to actually prevent preterm birth are still lacking, preterm birth rates are rising and potentially effective interventions remain largely unvaluated. It is therefore timely to evaluate research waste in this area and subsequently increasing the quality and value of new research.