

Curriculum Vitae – Roderik Kraaijenhagen

Roderik Kraaijenhagen

Cardiologist, MD, PHD

NIPED (Netherlands Institute for Prevention and Early Diagnostics), Amsterdam, the Netherlands
Cardiometabolic and Cardiac Rehabilitation Center 'Arterium' Amsterdam, the Netherlands



**National CVD Prevention
Coordinator for the
Netherlands**

Contact:

Phone +31 6 24905600

[email](#)

Short CV

Dr. Roderik A. Kraaijenhagen (born May 13th 1968) is cardiologist in practice with a PhD in vascular medicine (Academic Medical Center, University of Amsterdam).

Affiliations:

- Medical director and co-founder of the Netherlands Institute for Prevention and Early Diagnostics (NIPED); knowledge institute for integrated prevention and early diagnostics and developer of the PreventionCompass, a scientific knowledge- and decision support system for integrated risk profiling and personalized follow-up.
- Director and co-founder of 'Arterium': Cardiometabolic and Cardiac Rehabilitation Center Amsterdam.
- Director and founder of the CardioVital program: national program for multidisciplinary out of hospital cardiac rehabilitation.
- Medical director of the LEEFH Foundation (formerly known as StOEH): National expert center for genetic- and familial screening and treatment of familial hypercholesterolemia (FH).
- Senior medical representative at ATAL-Medial: the largest thrombosis service in the Netherlands.

Committees:

- National Coordinator for CVD Prevention of the European Society of Cardiology
- President of the Committee for Cardiovascular Prevention and Rehabilitation of the Dutch Cardiology Society (NVVC-CCPH).
- President of the Dutch Multidisciplinary Council for Cardiac Rehabilitation (LMDOH).
- Member of the multidisciplinary guideline committee for cardiovascular risk management.
- Member of the multidisciplinary guideline committee for cardiac rehabilitation
- Member of the guideline committee for familial hypercholesterolemia.

Addendum to Roderik Kraaijenhagen's Curriculum Vitae

Recent publications

1. G.J. Geersing; N.P.A. Zuithoff; C. Kearon; D.R. Anderson; A.J. ten Cate-Hoek, J.L. Elf ; S.M. Bates; A.W. Hoes; R.A. Kraaijenhagen; R. Oudega; R.E.G. Schutgens; D.H. Biesma; S.M. Stevens; P.S. Wells; K.G.M. Moons. Exclusion of Deep Vein Thrombosis using the Wells-rule in various clinically important subgroups; An Individual Patient Data meta-analysis. *BMJ* 2014, accepted for publication.
2. Ferket BS, Colkesen EB, Visser JJ, Spronk S, Kraaijenhagen RA, Steyerberg EW, Hunink MG. Systematic review of guidelines on cardiovascular risk assessment: Which recommendations should clinicians follow for a cardiovascular health check? *Arch Intern Med.* 2010; 170(1):27-40.
3. Colkesen EB, Niessen MA, Peek N, Vosbergen S, Kraaijenhagen RA, van Kalken CK, Tijssen JG, Peters RJ. Initiation of health-behaviour change among employees participating in a web-based health risk assessment with tailored feedback. *J Occup Med Toxicol.* 2011 Mar 9; 6(1):1-5.
4. Colkesen EB, Ferket BS, Tijssen JG, Kraaijenhagen RA, van Kalken CK, Peters RJ. Effects on cardiovascular disease risk of a web-based health risk assessment with tailored health advice: a follow-up study. *Vasc Health Risk Manag.* 2011;7:67-74. 2011 Feb 9.
5. Colkesen EB, Kraaijenhagen RA, Frings-Dresen MH, Sluiter JK, van Kalken CK, Tijssen JG, Peters RJ. Participation in a workplace web-based health risk assessment program. *Occup Med (Lond).* 2011 Sep 2.
6. Niessen MA, Kraaijenhagen RA, Dijkgraaf MG, Van Pelt D, Van Kalken CK, Peek N. Impact of a Web-based worksite health promotion program on absenteeism. *J Occup Environ Med.* 2012 Apr; 54(4):404-8.
7. Niessen MA, Laan EL, Robroek SJ, Essink-Bot ML, Peek N, Kraaijenhagen RA, Van Kalken CK, Burdorf A. Determinants of participation in a web-based health risk assessment and consequences for health promotion programs. *J Med Internet Res.* 2013 Aug 9; 15(8):e151.
8. Vosbergen S, Janzen J, Stappers PJ, van Zwieten MC, Lacroix J, Idema K, van den Broek I, Kemps HM, Kraaijenhagen RA and Peek NB. A qualitative participatory study to identify experiences of coronary heart disease patients to support the development of online self-management services. *Int J Med. Inf.* 2013; 82: 1183-1194
9. Vosbergen S, Wiggers AM, Lacroix J, Jaspers M, Peek N. Using personas as an intermediate construct in the development of tailored messages: a Case Study. *Stud Health Technol Inform.* 2013; 194:195-201.

10. Laan EK, Kraaijenhagen RA, Peek N, Busschers WB, Deutekom M, Bossuyt PM, Stronks K, Essink-Bot ML. Effectiveness of a web-based health risk assessment with individually-tailored feedback on lifestyle behaviour: study protocol. *BMC Public Health*. 2012 Mar 19;12:200.
11. Vosbergen S, Laan EK, Colkesen EB, Niessen MA, Kraaijenhagen RA, Essink-Bot ML, Peek N. Evaluation of end-user satisfaction among employees participating in a web-based health risk assessment with tailored feedback. *J Med Internet Res*. 2012 Oct 30;14(5):e140.
12. Vosbergen S, Mahieu GR, Laan EK, Kraaijenhagen RA, Jaspers M and Peek NB. Evaluating a Web-Based Health Risk Assessment With Tailored Feedback: What Does an Expert Focus Group Yield Compared to a Web-Based End-User Survey? *J Med Internet Res* 2014; 16: 1-15
13. Stegeman I, Kraaijenhagen RA, Bossuyt P. Integrated risk profiling allows prevention and early intervention. *Ned Tijdschr Geneeskd*. 2010; 154(13):1906.
14. Stegeman I, de Wijkerslooth TR, Stoop EM, van Leerdam M, van Ballegooijen M, Kraaijenhagen RA, Fockens P, Kuipers EJ, Dekker E, Bossuyt PM. Risk factors for false positive and for false negative test results in screening with fecal occult blood testing. *Int J Cancer*. 2013 May 3.
15. Stegeman I, de Wijkerslooth TR, Stoop EM, van Leerdam ME, Dekker E, van Ballegooijen M, Kuipers EJ, Fockens P, Kraaijenhagen RA, Bossuyt PM. Colorectal cancer risk factors in the detection of advanced adenoma and colorectal cancer. *Cancer Epidemiol*. 2013 Jun; 37(3):278-83.
16. De Wijkerslooth TR, Stoop EM, Bossuyt PM, Meijer GA, van Ballegooijen M, van Roon AH, Stegeman I, Kraaijenhagen RA, Fockens P, van Leerdam ME, Dekker E, Kuipers EJ. Immunochemical fecal occult blood testing is equally sensitive for proximal and distal advanced neoplasia. *Am J Gastroenterol*. 2012 Oct;107(10):1570-8.
17. Van Engen-Verheul M, de Vries H, Kemps H, Kraaijenhagen R, de Keizer N, Peek N. Cardiac rehabilitation uptake and its determinants in the Netherlands. *Eur J Prev Cardiol*. 2013 Apr; 20(2):349-56.
18. Hareld Kemps, Mariette van Engen-Verheul, Roderik Kraaijenhagen, Rick Goud, Irene Hellemans, Henk van Exel, Madoka Sunamura, Ron Peters, Niels Peek. Improving guideline adherence for cardiac rehabilitation in the Netherlands. *Neth Heart J*. 2011 Apr 13