



Team of *HELIOS International Office (HIO)*: Katerina Schmidke, Martina Sieben, Tina Karrenstein-Zartner, Tatjana Buchmüller, Laura Schiffer, Dr. Tatjana Bossa, Fabienne Wrobel (left to right)

On our behalf

○ News from the HELIOS International Office

- 10 years of experience: Foreign patients receive good all-round care
- Management change: Tatjana Buchmüller has been head of the HELIOS International Office (HIO) since 1 March 2016

Today, the HELIOS International Office (HIO) can look back on ten successful years. It was established in Berlin under

the leadership of Tina Karrenstein-Zartner and Fabienne Wrobel and has been situated at the HELIOS Hospital Krefeld since 2010. Our multilingual team treats foreign patients who are interested in medical treatment at one of our HELIOS Hospitals in Germany. We advise patients who have queries regarding therapy options, travel arrangements, financing, etc., but we also

provide support for relatives.

In this regard, our promise to all interested parties is to find the right specialist from within our network of hospitals without delay. The patient enjoys the tremendous advantage of comprehensive care from a single source: one central point of contact for our hospitals in all locations, brief waiting times due to timely allocation of appointments, and flexible support before, during and after treatment.

On 1 March 2016, Tatjana Buchmüller took over the leadership of the HIO, making her the central point of contact for all issues relating to the care of foreign patients at the HELIOS Hospitals. Her deputy is Tina Karrenstein-Zartner, who will continue to manage the day-to-day operations while also serving as the head of the HELIOS International Office, Netherlands. Communication training, regular team meetings and continuous exchange with the hospitals should further improve processes in the future. We are happy to answer your questions, please contact us any time.

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Berlin

○ A test spares patients chemotherapy

The gene expression test can spare breast cancer patients the discomfort of chemotherapy. This test is available at the medical centre at the *HELIOS Hospital Berlin-Zehlendorf*.

Every year, 70,000 women from all over Germany develop breast cancer. After undergoing radiation therapy and surgery, many women are also subjected to chemotherapy. In order to determine whether this form of therapy is likely to be effective or

whether it can be avoided, a “gene expression test”, which provides useful information, can be done. “In this test, biomarkers within the tumour cells are analysed – according to the activity of the genes in the tumour tissue, the risk of relapse or recurrence of the tumour can be estimated.

The higher the likelihood, the more important chemotherapy is. If the risk is low, anti-hormone therapy is often sufficient and those affected are spared the unpleasant side effects of chemotherapy,” says Dr. Thomas Mairinger. The institute he heads is the only HELIOS Hospital that offers the possibility of this test – however, it can be applied for patients in any of our hospitals.



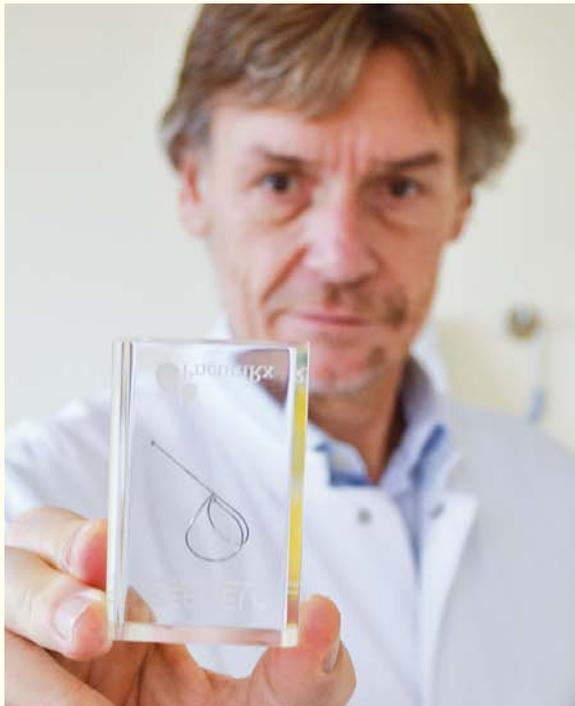
Dr. med. Susann Stephan-Falkenau leads the gene expression test project

The method is used on women who have oestrogen-sensitive mammary carcinoma in which the lymph nodes are not affected.

Krefeld

○ Tiny wires help patients to breathe easily again

COPD is one of the most common diseases in the world. According to an estimation by the World Health Organisation, over 200 million patients suffer from this chronic inflammatory disease which narrows the airways. Many of



Chief physician Dr. med. Manuel Streuter

them have already developed pulmonary emphysema. A constant battle for breath and the accompanying fear of suffocation are part of life for them. At

the *HELIOS Hospital Krefeld*, patients are now treated by the insertion of fine wire coils in order to reduce the over-inflation of the lungs. This helps them to breathe better.

“Everyone knows what it feels like to fight for breath, for example under water or after a sprint. For COPD sufferers, this is the normal state. The quality of life suffers tremendously, and they can also suffer from anxiety or depression,” explains Dr. Manuel Streuter, head physician of the

Lung Centre at the HELIOS Hospital Krefeld. But what exactly causes this shortness of breath? Our lungs contain millions of tiny, many-branched sacs called alveoli. Every day, they ensure that the oxygen contained in the air we breathe is transferred into the blood, while at the same time filtering out the spent carbon dioxide. In COPD patients, this process is seriously disrupted. “Because the small airways or bronchioli are inflamed, which causes them to swell and narrow, the inhaled air does not reach the alveoli easily,” says the pulmonary specialist. “If the inflammation in the bronchioli then spreads to the alveoli, they burst.” This results in

thousands of small sacs combining to form a single large one. This results in the development of an emphysema, a large pocket of air. This emphysema constantly increases in size, compressing other parts

of the lungs, which are still relatively intact. It becomes increasingly difficult for the patient to breathe, and physical stamina decreases rapidly. One of the most common causes of this debilitating disease is nicotine addiction.

In recent years, physicians have inserted one-way valves into certain bronchial passages. These allow trapped air to escape and prevent more air from entering, but if the emphysema is evenly spread throughout the lungs, these valves are of no avail. However, a tiny bent wire now brings new hope to those suffering from COPD.

“The tiny titanium spirals, which are referred to medically as coils, are gently inserted into the lungs with a bronchoscope. During this procedure, the coils are straightened out, but as soon as the tension on the wire is released, they snap back into a coil, thereby gathering up the damaged lung tissue and compressing it,” is how head physician Dr. Streuter explains this procedure which is now performed in Krefeld. By compressing the damaged tissue, the volume of the lungs is reduced and the elasticity restored. The procedure is performed under general anaesthesia and takes 30 to 40 minutes. As with the valves, the physical condition of COPD sufferers can be improved substantially. Fear of suffocation disappears, and a lung transplant can extend life expectancy in advanced cases. Our physicians use various procedures to test patients in advance to determine which of these treatments is most suitable for each patient.

HELIOS Prevention Center (HPC)

○ Do female hearts beat differently?

Men and women are different – even as patients. This apparently banal observation can have serious consequences: For example, in the recognition and treatment of a heart attack.

Women still live longer than men, die of cancer less frequently, cause fewer accidents, smoke less and drink less alcohol – these were the results of several studies by the Robert Koch Institute. According

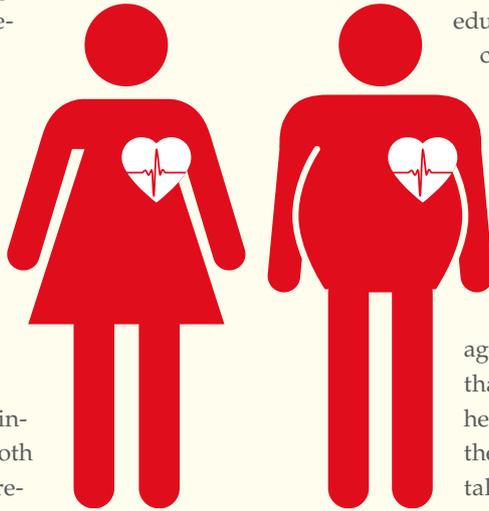
to the study, women are also more active, although both sexes are still too sedentary overall. And with regard to prevention, women are better and notice early symptoms sooner. So, all's well with the ladies? Unfortunately not, because at some point women run neck and neck with men when it comes to Germany's Number 1 cause of death – cardiovascular disease – and even overtake them as soon as the protection afforded by oestrogen disap-

pears at menopause. “The logical consequence would be to continue protecting women from heart disease by means of hormone therapy, but so far research has not shown any positive effects in this regard,” says Dr. med. Birgit Hildebrandt, Medical Director of *HPC*.

Regardless of this, the myth stubbornly remains: Men die of heart failure and women of breast cancer. On the contrary, the figures of the Federal Statistical Office indicate that 25 percent of all female deaths in 2014 were due to cardiovascular disease; only around 4 percent from breast cancer. “Severe pain in the chest ra-

diating out to the arms and back are well-known classical symptoms of heart disease, but as a rule, this applies to men," says Hildebrandt. Women, on the other hand, are more likely to suffer from nausea and vomiting and diffused upper-abdominal pain.

Back pain and disturbed sleep are also common symptoms. These non-specific symptoms often lead to incorrect diagnoses – by both patient and physician – resulting in the loss of valuable time on the way to the doctor or in the emergency room. "False diagnoses and incorrect therapies may be the cause of the high mortality rate in women as a result of heart attacks," says the internal



medicine specialist. The remedy: To pay more attention to the female symptoms of heart attack. And to educate women accordingly.

But the treatment of heart disease is also associated with a higher risk in women: On average, they are older than men when a heart attack brings them to the hospital, and the admission of these patients is more often an emergency. Generally, the rate of complications for heart catheter and bypass surgery is higher in women. "Thanks to advances in medicine and improved specialist treatment, how-

ever, a positive trend can be noticed in this regard," says Birgit Hildebrandt.

The good news: The risk of developing heart disease can be enormously reduced – by up to 80 percent – in both men and women, if they lead a healthy lifestyle from the beginning. "In concrete terms, this means regular physical exercise with weight and endurance training, no nicotine, limited alcohol consumption, a balanced diet, and avoiding obesity," says Dr Hildebrandt.

"With our checkups at HPC, we want to sensitise participants to these subjects at an early stage and motivate them to practice a healthy lifestyle."

Of course, this strategy also helps to prevent national diseases such as type II diabetes, hypertension, intestinal cancer and diseases of the spine and joints. This underscores the fact that a healthy lifestyle is well worth it.

Wiesbaden

○ New clinic for paediatric surgery and congenital defects opens in Wiesbaden

With the addition of this new specialist department, the HELIOS Dr. Horst Schmidt Kliniken Wiesbaden (HSK) have expanded the scope of treatment for their smallest patients. "We are pleased that, together with the Clinic for Paediatric and Adolescent Medicine and the Obstetrics Clinic, we are now also able to provide very special paediatric therapy options in a separate clinic," says Dr. med. Salmai Tural, who took over the management of the clinic on 1 April.



PD Dr. med. Salmai Tural, director of the clinic

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Surgery already performed on premature babies weighing only 350 grams

Tural and his team provide the full spectrum of paediatric surgery. The main fo-

cus is on surgery to correct deformities in premature and newborn babies and on microinvasive paediatric surgery, using the smallest instruments in the world, which have a diameter between 1.9 and 2.4mm. "Surgically and mentally, operating on premature babies is extremely challenging, but when one sees the babies again a few years later, it makes one very happy," says Tural. Often, such surgery corrects a deformity permanently, enabling the children to live completely normal lives. Tural, who is known throughout Germany for his expertise in the treatment of patients with funnel or pigeon chest, regularly treats patients from all over Germany.

Tural is originally from Afghanistan. During his medical studies, he went to Czechoslovakia and then, motivated by love, to Germany. He spent many years at the Universitätsmedizin (University Clinic) in Mainz as the acting head of the Clinic and Polyclinic for Paediatric Surgery. Within the framework of a cooperation programme between the two hospi-



Chief physician Patrick Saalabian

tals, he has already performed surgery at the HELIOS HSK in certain special cases in recent years. Chief physicians Nadine Heumann and Patrick Saalabian are also members of his highly specialised team.

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