

ASKLEPIOS NEWSLETTER

Issue 2/2018



Photo: © Monkey Business/Fotolia.com

Dear Readers,

Not only is eating one of the vital functions of the human body, but it also brings pleasure. This often means gastro-intestinal diseases impact quality of life all the more. Whether digestive tract tumours, chronic inflammatory illnesses or other health issues of these internal organs: In the Asklepios clinics, our experts offer effective and gentle treatments. As always, several examples from our hospitals will show this.

One of these is the Asklepios Klinik Barmbek in Hamburg. I mention this location, because Barmbek has received the accolade of the “World’s Best Hospital for Medical Tourists” for the second time



Photo: © Udo Kroener/Fotolia.com

by the Medical Travel Quality Alliance. The jury named the clinic “excellent for medical tourists”, not only a tremendous success in the competition with other providers from around the world, but also shows the extent to which our clinics focus on foreign patients.

Wishing you the best of Health!

Regards

Dr. Thomas Wolfram
Chair Group Management Asklepios Klinik GmbH & Co. KGaA

Asklepios as a clinic operator

Asklepios is one of the largest operators of private clinics and healthcare facilities in Germany. Founded more than 30 years ago, the chain of clinics follows a responsible and sustainable strategy geared towards a high level of safety and quality. The group currently has more than 160 healthcare facilities spread across Germany between the Island of Sylt on the North Sea and Lindau by Lake Constance and employs more than 47,000 employees. In the 2017 fiscal year, Asklepios treated around 2.3 million patients.

Medical quality management at the highest level is an area in which Asklepios particularly excels. The clinic operators benefit from the group’s structure to promote knowledge transfer between the facilities and to provide particularly excellent treatment. The results are also published regularly. For instance, the Medical Findings Report is published annually at www.qualitätskliniken.de of which Asklepios is a charter member. Moreover, 25 criteria on patient safety are published regularly on the internet.

VISCERAL MEDICINE

Keyhole surgery at the highest level

The GastroClinic of Asklepios Klinik Altona in Hamburg looks back on a long tradition of cross-functional links between visceral surgery and gastroenterology. Here, surgeons and registrars decide together which therapy is likely to provide the best possible result with the lowest stress on the body. Subsequently, the GastroClinic offers the patient minimally invasive therapy, whether surgical or endoscopic, explains Professor Gero Puhl, Chief Physician of the department for General, Visceral and Vascular Surgery. For this, the expert has access to a special intervention and operation area, which is specially equipped for minimally invasive therapy processes. The core element is the fully-integrated high-tech endoscopy operating theatre EndoAlpha with networked high-performance optical equipment and HD mini cameras at the tip of an extremely thin endoscope. Only very few clinics in Germany have equipment like this. It allows a particularly high quality and safety level.

While the clinic's gastroenterologists carry out their endoscopic procedures through natural body openings, for example completely removing early forms of tumours in digestive tract, stomach or intestines, Puhl and his team or surgeons guide their instruments through several small incisions in the abdominal wall. "We can do around 75 percent of all operations in this gentle manner", Puhl reports. As well as standard operations for the therapy of hernias, gallstones or colonopathies, major cancer operations on digestive tract, stomach, liver, pancreas and rectum are part of the range of minimally invasive procedures carried out by his team. The clinic has special expertise in minimally invasive operations for digestive tract and rectal cancer. Patients come from far away for these interventions to be operated on by the specialists at the Asklepios Klinik Altona. Resections of the liver and pancreas are also often performed in a minimally invasive manner here, and colon operations even virtually in 100 percent of cases.



With the da Vinci Xi surgical robot, the Asklepios Klinik Altona is the only clinic in northern Germany to have the world's most modern system for robot-assisted interventions. It provides the surgeons a particularly good overview of the operating area and unique freedom of movement for their instruments. Puhl uses the robot for example for complex anatomical conditions and for special interventions which would otherwise require an open operation, therefore stressing the patient more.

The advantages of minimally invasive surgery are enormous, according to Puhl: "The minimisation of access trauma means faster recovery for the patient after the operation, lower requirement for pain relief, a lower complication rate, faster food intake, faster regeneration of intestinal function and a shorter stay in hospital."

Minimally invasive operations in the Asklepios Klinik Altona

- Abdominal tumours
- Benign and malignant diseases of the digestive tract and stomach
- Benign and malignant diseases of the colon and rectum
- Benign and malignant diseases of the pancreas
- Chronic inflammatory bowel diseases
- Liver tumours and cysts, portal vein hypertension
- Groin and abdominal hernias
- Gall bladder and bile ducts
- Thyroid gland, parathyroid and adrenal glands

Contact:

Professor Gero Puhl

Chief Physician of the Department for General, Visceral and Vascular Surgery (GastroClinic)

Asklepios Klinik Altona

Paul-Ehrlich-Straße 1 ▪ 22763 Hamburg

Tel.: +49 (0) 40 18 18 81-16 01 ▪ Fax: -49 07

www.asklepios.com/hamburg/altona/experts/general_surgery

VISCERAL MEDICINE

Chronic inflammatory bowel diseases (CED) under control

The chronic inflammatory bowel conditions (CED) Morbus Crohn and Colitis Ulcerosa are so complex and different from patient to patient, that therapy for those conditions provides a major challenge for the doctors treating them. Even though the technical and molecular genetic possibilities available today have brought many new insights and treatment approaches, these illnesses remain incurable. But nevertheless, the modern therapies can enormously improve the quality of life of the affected patient. The more sophisticated and targeted the treatment processes become, the greater the importance of science and experience of the treating doctors becomes in the selection of the correct medications and the monitoring of the therapy.

Professor Tanja Kühbacher is one of the most renowned national and international specialists for chronic inflammatory intestinal diseases. In order to use this expertise in the optimum manner, the university outpatient department for specialised gastroenterology of the Schleswig-Holstein University Hospital is located in the Gastroenterology Department in the Asklepios Westklinikum Hamburg.

“We are a member of the Germany-wide centre of excellence ‘Inflammation at interfaces’, which is sponsored by the Federal Ministry for Research”, explains Kühbacher regarding the special importance of his outpatient clinic. “This allows us to offer everything which is available globally in terms of therapies or therapy studies.” This is particularly important for patients where the usual approved treatments are not suitable. In the Westklinikum, they can benefit from therapies which are still in the approval process or in clinical trials. “Generally that is not possible elsewhere”, according to Kühbacher: “We treat many patients from overseas, especially from Russia and the USA, who come here regularly for particular therapies.”

Not all medicines need to be administered locally in the outpatient department, emphasises Kühbacher: “We can also prescribe many active ingredients as subcutaneous injections, and in the future even as tablets with the same effectiveness as the biologicals, and then check the therapy progress every 3 to 4 months.” During these checkup appointments on site, the therapies are then adjusted based on the current infection stage, and the necessary investigations scheduled for the ongoing treatment. If participation in a therapeutic study would be beneficial, Kühbacher also puts international patients in touch with specialists in their home

country, with whom she works together on a scientific level.

A decisive factor in the selection of the appropriate therapy is thorough diagnostics, which should be done as early as possible in the course of the illness. “Here in the Westklinikum we have all possibilities for diagnostics, from capsule endoscopy through to lung function tests, endoscopy and magnetic resonance tomography, even ecotrophology.”, explains Kühbacher. For the comprehensive diagnostics of a chronic inflammatory bowel disease, Kühbacher’s team of specialists generally need a week. It may take longer however until the therapies take effect: “We can offer the approach via the university outpatient hospital, but also as an outpatient.” Only patients with a chronically active disease require permanent therapy. This affects roughly 50 percent of the patients, the other half do not need to be treated the whole time, explains Kühbacher. For this reason, early comprehensive diagnostics is so important.

A further speciality of the Westklinikum is the large department for Psychosomatic Medicine, according to Kühbacher: “With chronic illnesses, the whole person is important, and not just individual organs.” In addition, these illnesses can also affect other organs outside the digestive system, such as eyes, joints, liver or skin. For this reason, the cross-functional cooperation of the experts in the Westklinikum is also major factor in the success of the treatments.

Contact:

Professor Tanja Kühbacher

Chief Physician Gastroenterology
Asklepios Westklinikum Hamburg
University outpatient department of the UKSH at
Asklepios Westklinikum
Suurheid 20
22559 Hamburg
Tel.: +49 (0) 40 81 91-27 53
Fax: +49 (0) 40 81 91-27 99
www.asklepios.com/hamburg/westklinikum/experten/gastroenterologie



VISCERAL MEDICINE

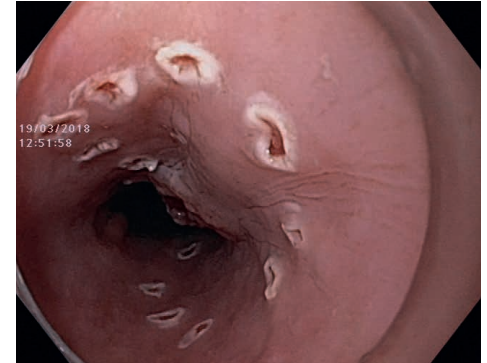
Endoscopic therapy of early-diagnosed stomach and bowel tumours

We have the large advances in endoscope technology to thank for the fact that malignant changes in the digestive tract, in the stomach, in the duodenum and the colon are found more and more frequently at an early stage, when they have not yet extended deep into the organ wall. And the modern endoscopes make it possible to remove these pre-tumours or early tumours in a particularly gentle manner – as part of a stomach or colonoscopy, without traditional operations.

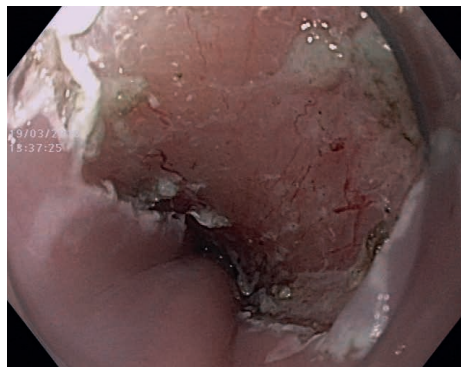
Professor Siegbert Faiss and his team from the Department for Gastroenterology and Interventional Endoscopy at the Asklepios Klinik Barmbek belong to the pioneers of this innovative process. The specialists in the clinic have particularly large experience in so-called endoscopic submucosa dissection (ESD). Using this technology, even large early flat-growing carcinomas can be removed in one piece and with the necessary safety margins from the stomach or bowel, protecting the affected organ. "First we inject a fluid into the submucosa, i.e. the layer located below the mucous membrane, to lift the tumour away from the muscle layer", Faiss explains the process. "After this we cut the affected mucous membrane with special endoscopic scalpels which are only a few millimetres in size, first around the tumour and then sever the connective tissue of the submucosa, to remove the suspect tissue from the organ in a single step with the endoscope." As well as preserving the affected organ and reducing stress on the patient, the distinct edges of the removed tissue are a major advantage of this process. In this way, the pathologists at the clinic are able to tell very well whether the tumour really was removed in its entirety, or whether malignant cells may have been left behind. In this case, a traditional operation would still need to be carried out for safety. The disadvantage of ESD is that this procedure is technically so complex that the doctors



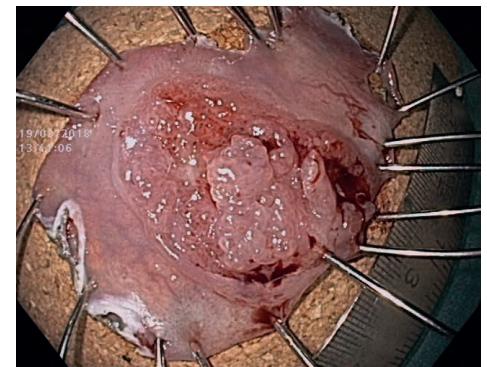
Barrett early carcinoma in the distal oesophagus



Marking of the resection edges with safety margins to the tumour



Resection area in the distal oesophagus after complete ESD



Resection pinned to cork with the central complete removed tumour

require a lot of practice and experience. For this reason, the endoscopic submucosa dissection should only be carried out by experienced specialists in larger, technically well equipped centres such as in the Asklepios Klinik Barmbek.

Typical applications of ESD are early carcinomas of the stomach as well as so-called Barrett early carcinomas. With healing rates of 80-90 percent, endoscopic therapy has equally successful outcomes over the long term as traditional and much more stressful operations. For early carcinomas with a diameter of more than two centimetres, ESD is the endoscopic therapy process of choice, since other more widespread endoscopic processes can only remove such tumours piece by piece, and entail a significantly higher recurrence risk. With endoscopic full wall resection (FTRD), Professor Faiss and his team offer an additional highly innovative procedure. This also allows such tumours to be removed gently with the endoscope, as have already

spread deeper into the organ wall. To date this new technology has been used in particular in cases of adenoma recurrences or incomplete removal of stage I carcinomas in the colon and rectum.

Contact

Professor Siegbert Faiss

Chief Physician of the Department for Gastroenterology and Interventional Endoscopy
Asklepios Klinik Barmbek
Rübenkamp 220
22307 Hamburg
Tel.: +49 (0) 40 18 18 82-38 11
Fax: +49 (0) 40 18 18 82-38 09
www.asklepios.com/hamburg/barmbek/experten/gastroenterologie



- Asklepios: acute-care clinic for somatic diseases
- ▲ Asklepios: specialist clinic for psychiatry
- Asklepios: post-acute/rehab clinic
- Asklepios: other healthcare facilities
(including day-care hospital, psychiatric outpatient clinics (PIA), health centre, care facility)

* Facility under management

- MediClin: acute-care clinic for somatic diseases
- ▲ MediClin: specialist clinic for psychiatry
- MediClin: post-acute/rehab clinic
- MediClin: other healthcare facilities
(including day-care hospital, health centre, care home)

See also:

Asklepios Klinik Altona

■ Professor Gero Puhl
Tel.: +49 (0) 40 18 18 81-16 01
g.puhl@asklepios.com

Asklepios Klinik Barmbek

■ Professor Siegbert Faiss
Tel.: +49 (0) 40 18 18 82-38 11
s.faiss@asklepios.com

Asklepios Klinik Radeberg

■ Professor Jürgen Weitz
Tel.: +49 (0) 3528 459-53 01
j.weitz@asklepios.com

Asklepios Klinik St. Georg

■ Professor Carolin Tonus
Tel.: +49 (0) 40 18 18 85-21 88
c.tonus@asklepios.com

Asklepios Westklinikum Hamburg

■ Professor Tanja Kühbacher
Tel.: +49 (0) 40 81 91-27 53
t.kuehbacher@asklepios.com

Photo: Asklepios