

Hellersen • Insight

The magazine of the
Sportklinik Hellersen

—
02.2025

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you to take
away!

THE FUTURE LIES IN TECHNICAL INNOVATION

How robots are revolutioni- zing the operating room

Expert interview with Chief Dr. Stefan Schmidl on
robot-assisted surgery and artificial intelligence in endopro-
sthetics



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As our patient, you are our focus. Our specialists take plenty of time to provide a thorough diagnosis and tailor your treatment to your individual needs. Thanks to our direct connection to the Sportklinik Hellersen, inpatient follow-up treatment can be provided quickly and efficiently at any time upon request.

Editorial

Dirk Burghaus

Chairman of the Board of Sportklinik Hellersen

Artificial intelligence is currently on everyone's lips. But what does that mean in concrete terms for everyday life in a specialized clinic such as the Sportklinik Hellersen? And how can patients benefit from this technology? We address precisely these questions in the current issue of Hellersen Insight.

At the Sportklinik Hellersen, AI has long been part of everyday clinical practice. It helps us evaluate large amounts of data, identify correlations, and make medical processes more efficient. This enables us to provide even more individualized and targeted care. At the same time, it is clear that artificial intelligence does not replace medical decisions. It supports medical expertise and creates space for what really matters — personalized, safe, and high-quality patient care.

Innovation is a central component of modern, patient-oriented treatment. Specialization is equally important as a key element of high-quality care. Dr. Stefan Schmidl, who has been Chief of the Center for Artificial Joint Replacement at the Sportklinik Hellersen since May of this year, demonstrates how the two go hand in hand. The expert combines state-of-the-art technology with many years of surgical experience and also relies on advanced robot-assisted procedures. In this interview, he talks about his motivation, his commitment to quality, and how technological precision can contribute to a noticeable improvement in quality of life.

Another prime example of specialization is our Deutsches Wirbelsäulen- und Skoliosezentrum. In the reversible part of this issue, we give you an exclusive insight into the close interdisciplinary collaboration between our highly specialized departments, which work together to develop tailor-made therapy concepts for patients with spinal disorders and misalignments.

Both in our print edition and in our interactive magazine, Dr. Sen will now guide you through our clinic world. The animated doctor refers to relevant videos, further information, and important notes that supplement and expand on the articles.

We hope you enjoy reading the new issue.

Dirk Burghaus
Yours



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Briefly noted

From our clinic world

AWARD

One of the top clinics nationwide

The Sportklinik Hellersen is one of the best orthopedic clinics in Germany: in the "Germany's Best Hospitals" study, the renowned F.A.Z. Institute ranked the specialist clinic third among all orthopedic clinics and specialist departments nationwide. The result underscores the high quality of medical care, specialization, and patient satisfaction.

"The entire #TeamHellersen works hard every day to provide our patients with excellent and personalized care. The fact that we are among the three best orthopedic clinics in Germany is a great success and a special recognition of our work," says Dirk Burghaus, CEO of the Sportklinik Hellersen.

For the study, the F.A.Z. Institute, which is part of the Frankfurter Allgemeine Zeitung publishing group, together with the market research company ServiceValue, evaluated quality reports from hospitals, ratings from the Federal Clinic Atlas, social

media monitoring, and patient opinions.



AWARD

Global award for international cooperation



As representative of the Sportklinik Hellersen in the Middle East, Africa, and Asia, Ahmed Almousa is committed to international cooperation between medical institutions worldwide. On behalf of the Sportklinik Hellersen, he has successfully established a medical cooperation network that connects the Middle East, Africa, and Turkey and improves efficiency in these regions through the sharing of medical resources. For these achievements, Ahmed Almousa received the DIKWP's International Cooperation Award, which is presented annually to individuals or institutions that make outstanding contributions to international cooperation.

"The award is a great tribute to Mr. Almousa's outstanding work and his commitment to international medical partnership. It underscores his significant contributions to the exchange of knowledge between continents and is a testament to the high level of expertise and reputation of the Sportklinik Hellersen in global healthcare," says Dirk Burghaus, CEO of the Sportklinik Hellersen.

Briefly noted

From our clinic world

INNOVATION

Pilot clinic for innovative sustainability project



The Sportklinik Hellersen is participating as a pilot clinic in the "Grüne Gründungen.NRW" (Green Start-ups.NRW) funding project. Together with the company CIRCULARMED and the Hospital Association, innovative waste and recycling management systems are being developed. The aim is to create a standardized, digitized, and sustainable waste disposal system that significantly increases the recycling rate in hospitals — currently still below 35 percent.

"For us, sustainability and modern medicine go hand in hand. We want to show that high-quality care and responsible use of resources can go together," emphasizes Stephan Franz, CEO of the Sportklinik Hellersen.

The two-year project will result in standards, development guidelines, and a digital training tool. After an assessment of the four pilot clinics, concepts will be implemented and further developed. Ultimately, nationally applicable standards will benefit hospitals. Optimized waste streams will reduce environmental impact and lower costs — an active contribution to sustainability in healthcare.

MVZ HELLERSEN

MVZ Hellersen strengthens outpatient care



There is also news from the medical care center (MVZ) at Sportklinik Hellersen: Dr. Henning Albrecht's orthopedic practice in Iserlohn recently joined the MVZ network. The aim is to secure and expand outpatient orthopedic care in the region. "My aim was to create security at an early stage — for myself personally, for my patients, my team, and for the continued existence of the practice," explains Dr. Henning Albrecht. The practice will remain on Wallstraße with the familiar team and range of treatments.

There are also changes in Lüdenscheid: Issam Rishmawi, who managed the MVZ at Wilhelmstraße 1 in Lüdenscheid, is taking his well-deserved retirement. He is being succeeded by Dr. Dirk Graeve, who brings a wealth of expertise from his many years of experience at several clinics.

The MVZ Hellersen comprises a total of seven specialist practices with 13 doctors in Lüdenscheid and Iserlohn.

Briefly noted

From our clinic world

AWARD

Stern once again honors specialist departments



The Sportklinik Hellersen continues to be one of the best addresses in Germany: in the current Stern Clinic List 2025/2026, the specialist areas of spinal surgery and cruciate ligament and meniscus treatments were recommended once again.

"This renewed award is a valuable recognition of the performance and commitment of our entire team. It clearly shows that specialization, the utmost care, and well-coordinated teamwork in the care of our patients make a decisive difference," says Dirk Burghaus, CEO of the Sportklinik Hellersen.

With the Deutsches Wirbelsäulen- und Skoliosezentrum, the Sportklinik Hellersen offers a supra-regional point of contact for patients with complex spinal disorders. In the field of cruciate ligament and meniscus treatments, the specialist clinic impresses with two highly specialized departments that perform a total of over 2,000 knee operations annually.

AWARD

New Chief in Anesthesiology



Dr. Timm Steuber has been the new Chief of Anesthesia at Sportklinik Hellersen since September 1, 2025. With over 20 years of experience in acute and emergency medicine, he places particular emphasis on patient safety and team culture. "For me, anesthesia stands for absolute safety, precision, and reliability. Every patient should feel 100 percent safe with us," says Dr. Timm Steuber.

His enthusiasm for medicine began in 1999 during his community service. After completing his specialist training and additional training in emergency medicine, he worked for many years in maximum care medicine, treating seriously injured patients, emergencies, and complex operations. These experiences shaped his calm demeanor in critical situations. With clarity, honesty, and motivation, he aims to strengthen the team culture in anesthesia in the long term.

Briefly noted

From our clinic world

EDUCATION

Top marks in training



The Industrie- und Handelskammer zu Hagen (SIHK) has honored Leon Scholz, a former trainee at the Sportklinik Hellersen, as one of the best graduates of his year in the office management training program. With a score of 92 percent in his final exam and an overall grade of 1.8, he has set new standards and more than earned this special recognition. The award ceremony took place on October 9 in a festive setting at the SIHK in Hagen.

"His great commitment, his willingness to learn, and his strong team spirit not only contributed significantly to his excellent graduation results, but also enriched our company. We are very proud of Mr. Stolz and congratulate him warmly on this award," says Leonie Schauland, Head of Human Resources at the Sportklinik Hellersen. Having completed his training, Leon Scholz now works in the purchasing department of the Sportklinik Hellersen.

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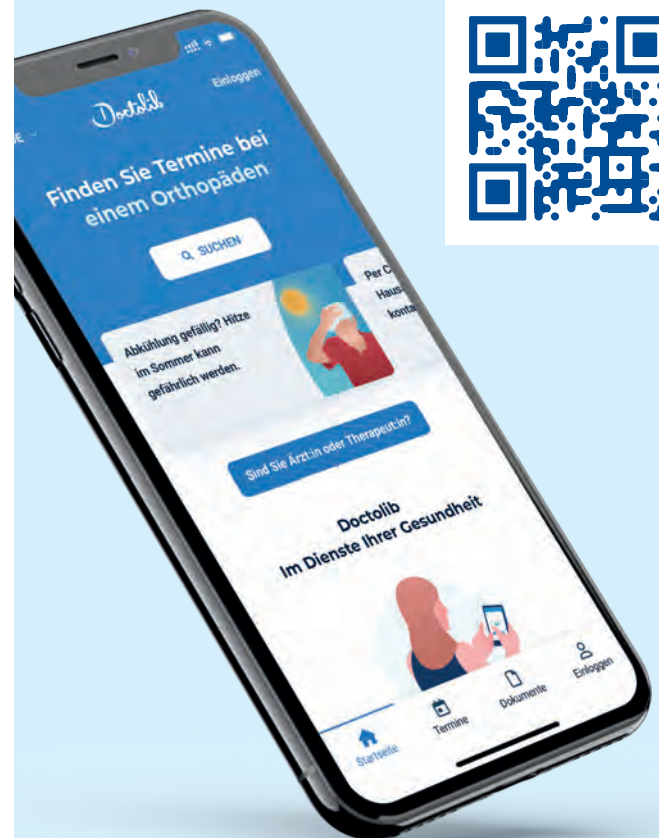
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doctor's appointments



Insight

Award

Leading innovator in healthcare and driving force for North Rhine-Westphalia as a sports location

FOCUS Business awards specialist clinic the seal of approval
“Leading Innovator 2026”



The Sportklinik Hellersen is one of Germany's most innovative companies and has been awarded the “Leading Innovator 2026” seal by FOCUS-Business. With 14 out of a possible 15 points, the specialist clinic achieved a near-perfect rating – well above the average of 11.4 points achieved by the 425 companies that received the award.

Four-time award winner:

Strength in organizational innovation

In four out of five categories examined — strategy and innovation culture, products and services, business model, and organization — Sportklinik Hellersen achieved top marks, clearly setting itself apart from the average of the companies that received awards. Particularly noteworthy is the area of organizational innovation, where Sportklinik Hellersen stands out in particular. “Thanks to innovative structures, agile working methods, and efficient processes, the specialist clinic is able to respond flexibly to change, minimize risks, and actively drive progress. This form of organizational culture strengthens cooperation, knowledge exchange, and the creative development of employees — a decisive success factor for the future,” praises FOCUS Business.

Furthermore, it is clear that the organizational structure developed at the Sportklinik Hellersen serves as a model not only in healthcare, but also in the high-performance sports environment. The close connection between sports medicine, science, and applied practice forms a cornerstone for the success of athletes in North Rhine-Westphalia – and strengthens the state's position as a potential venue for future Olympic Games.

„Innovation as an attitude“ –

Medicine and sports in lockstep

“This award confirms our commitment to combining modern medicine with strategic foresight, innovative treatment methods, and an open corporate culture. We are particularly proud of our strength in organizational innovation, which sets us apart from the competition. Only through specialization, international cooperation, and the use of digital technologies can we offer the highest quality and actively help shape the standards of tomorrow,” says Dirk Burg-haus, CEO of Sportklinik Hellersen, adding: “As the state's center of excellence for sports medicine, we also see it as our task to promote sporting excellence and to understand medical innovation as an integral part of modern sports promotion. With North Rhine-Westphalia's Olympic bid in mind, we see ourselves



as a strong partner for top-level sport and as an example of how medicine and competitive sport can shape the future together.”

Business models and the digital future

The Sportklinik Hellersen is also well positioned in terms of business models. It is continuously working to optimize treatment and organizational processes, implement digital solutions, and make patient care even more efficient. With the international Hellersen Hospital brand umbrella, the clinic has also created a platform that bundles medical excellence, promotes knowledge transfer, and enables new forms of collaboration.

This model also opens up new perspectives for sports medicine research and athlete care — from prevention and diagnostics to regeneration and return-to-competition support.

There is a particular focus on digitalization and the use of modern technologies. Artificial intelligence is increasingly taking center stage: in the future, it will analyze large amounts of data, recognize patterns, and relieve medical staff — with the aim of making



patient care even more precise and proactive.

Medical innovation with responsibility

An outstanding example of the innovative strength of the Sportklinik Hellersen is its robotics center, which uses the VELYS™ Robotic Assisted Solution System from Johnson & Johnson MedTech Orthopaedics. The clinic is one of the first facilities in Germany to establish robot-assisted procedures as an integral part of endoprosthetics, setting new standards in the process. The combination of state-of-the-art technology and highly specialized surgical expertise enables implantations with maximum precision and individual adaptation — further proof of the Sportklinik Hellersen's role as a pioneer for the medicine of tomorrow.

This technological pioneering role also extends

to competitive sports: the experience gained from robot-assisted surgery and precise motion analysis flows directly into the care of top athletes – an important component of the medical infrastructure of an Olympic venue.

“Our goal is not only to provide patients with state-of-the-art technology, but also to improve healthcare overall through innovative structures and sustainable strategies. We see innovation as a responsibility – for our patients, our employees, and the healthcare system of tomorrow,” emphasizes Dirk Burghaus.

“And this responsibility explicitly includes sports,” adds Dirk Burghaus. “Because only where medicine and sport interact at the highest level can top performances be achieved on a lasting basis – and North Rhine-Westphalia take on an international pioneering role as a sporting region.”

Between 7 and 15 points were required for the award. The Sportklinik Hellersen is one of the top 30 of the 425 companies that received the award, making it one of the most innovative companies in Germany.

High-ranking political visit to the Sportklinik Hellersen

Focus on health and hospital policy, innovation,
internationalization, and Olympic prospects



State Secretary Matthias Heidmeier (second from left) visited the Sportklinik Hellersen and exchanged views with Dirk Burg-haus (left), CEO of the Sportklinik Hellersen, as well as Stefan Klett, President of the Landessportbund NRW and Sporthilfe NRW e.V., and board member Stephan Franz.

The Sportklinik Hellersen has been the focus of political interest on several occasions: Among others, Matthias Heidmeier, State Secretary in the Ministry of Labor, Health, and Social Affairs of North Rhine-Westphalia, CDU parliamentary group leader Thorsten Schick, and Heinrich Böckelühr, District President of the Arnsberg District Government, visited the clinic to learn about the work, development, and future strategies of the specialist clinic in Lüdenscheid.



Thorsten Schick (right) was also visiting to find out more about the services offered by the Sportklinik Hellersen.

Dirk Burghaus, CEO of Sportklinik Hellersen, and Stefan Klett, President of Landessportbund NRW and Sporthilfe NRW e. V., the organization that runs Sportklinik Hellersen, gave the politicians an insight into the clinic's modern, cutting-edge medicine, its international focus, and the close connection between medicine and sport.

Topics of the future: Healthcare, international bridges and innovation

The discussions focused, among other things, on the history of Sportklinik Hellersen, its orientation as a highly specialized clinic, and important developments. One important point was the internationalization strategy. With Hellersen Hospital, the specialist clinic has been building international bridges since 2023 and making its medical expertise available worldwide. The clinic is currently undergoing the qualification process with the Arab Board of Health Specializations—a step that will make it the first institution worldwide to be authorized to train Arab medical specialists outside the United Arab Emirates.

The Sportklinik Hellersen is an outstanding example of specialization, innovation, and commitment in healthcare. It shows how modern medicine and top athletic performance can go hand in hand.

Matthias Heidmeier

State Secretary in the Ministry of Labor, Health, and Social Affairs of the State of North Rhine-Westphalia

“The Sportklinik Hellersen is an outstanding example of specialization, innovation, and commitment in healthcare. It shows how modern medicine and top athletic performance can go hand in hand,” said State Secretary Matthias Heidmeier during his visit.

The field of endoprosthesis has also been specifically strengthened, and a significant milestone has been reached with the new robotics center, which was opened at the end of last year by NRW Health Minister Karl-Josef Laumann, opening up state-of-the-art surgical possibilities in Lüdenscheid. The

„The Sportklinik Hellersen stands for highly specialized care and great commitment to competitive sports. Facilities like this strengthen North Rhine-Westphalia as a sporting region—and we need precisely such structures if we want to position ourselves internationally with an Olympic bid.“

Stefan Klett
President of the Landessportbundes NRW

Sportklinik Hellersen has also undergone targeted development in other areas in recent years: the Deutsches Wirbelsäulen- und Skoliosezentrum was established and has been continuously expanded.

During the visits, the planned Olympic bid by the state of North Rhine-Westphalia was also discussed — a topic that met with great interest from all those involved. As a long-standing partner of organized sports, the Sportklinik Hellersen already makes an important contribution to the sports medical care and support of athletes. “The Sportklinik Hellersen stands for highly specialized care and great commitment to competitive sports. Facilities like this strengthen North Rhine-Westphalia as a sports state – and we need precisely such structures if we want to position ourselves internationally with an Olympic bid,” emphasizes Stefan Klett.

Close connection to competitive sports

This goes hand in hand with the Sportklinik Hellersen's involvement in elite sports — in particular, the role of individual physicians as team and association doctors. “The fact that the Sportklinik Hellersen already cares for numerous Olympic athletes makes it an indispensable component in the care of elite athletes in Germany. The clinic is a beacon of medical care and enjoys an excellent reputation far beyond the region. I was particularly impressed by how high-tech medicine and personal commitment go hand in hand here. Having such a facility in our region sends a strong signal for the Rhine-Ruhr

Olympic bid,” says Thorsten Schick.

The political visits made it clear that the Sportklinik Hellersen is valued far beyond the region as a medical center of excellence — not only for its professional excellence, but also as a source of ideas and a partner in the exchange between politics, health, and sports.

“Visits from political representatives are always a valuable opportunity for us to present our work and talk about the future of healthcare,” emphasizes Dirk Burghaus. “Open dialogue with state politicians is crucial for jointly shaping the future of modern, high-quality medicine.”

„The fact that the Sportklinik Hellersen already cares for numerous Olympic athletes makes it an indispensable component in the care of top athletes in Germany.“

Thorsten Schick
CDU-state parliamentary party leader



Insight

Award

Sportklinik Hellersen is one of the best clinics in Germany

FOCUS Gesundheit awards the specialist clinic in five categories



In 2026, the Sportklinik Hellersen is once again among the best clinics in Germany. The news magazine FOCUS Gesundheit confirms the leading position of the specialist clinic in five categories. This is based on extensive surveys of specialists and general practitioners, the evaluation of quality reports, and patient satisfaction.

- TOP Nationale Fachklinik
 - Hip surgery
 - Sports medicine/orthopedics
 - Spinal surgery
- TOP specialist clinic for international patients – orthopedics
- TOP regional hospital
 - North Rhine-Westphalia

New expertise in excellent hip surgery

The repeated recognition of hip surgery shows that patients have been receiving consistently high-quality medical care here for many years. Since May 1, 2025, Dr. Stefan Schmidl has been responsible for the Center for Artificial Joint Replacement. He succeeds Dr. Joachim Hagenah, who shaped the department for over two decades and made it a nationally recognized center for hip and knee endoprosthetics. With his experience in endoprosthetics, Dr. Stefan Schmidl is continuing the successful work and expanding the range of services to include state-of-the-art robot-assisted procedures.

Exzellenz in sports and spinal surgery

Sports medicine was also recognized once again. Under the direction of Dr. Ulrich Schneider, the sports medicine department at the Sportklinik Hellersen has established itself as a go-to address for professional athletes as well as recreational and amateur athletes. As an examination center for elite athletes of the Deutschen Olympischen Sportbundes (DOSB) and the Landessportbund NRW, athletes benefit from the team's special expertise. The knowledge and experience gained from caring for top athletes flows directly into the care of all patients.

The Deutsches Wirbelsäulen- und Skoliosezentrum also received an award. Chief Dr. Oliver Meier and his highly specialized team are dedicated to particularly complex spinal surgery. The Deutsches Wirbelsäulen- und Skoliosezentrum combines top-level medical expertise with state-of-the-art technology. Procedures are performed here that only a few clinics are able to offer in this form. The award impressively underscores our leading role in complex spinal surgery and shows that we set high standards in patient care," emphasizes Dirk Burghaus, CEO of Sportklinik Hellersen.

borders

The award in the category "TOP Specialist Clinic for International Patients" confirms the growing importance of Sportklinik Hellersen in global health-care. With Hellersen Hospital, the specialist clinic is consistently expanding its international presence and establishing partnerships that enable access to high-quality medical care worldwide. "Our international partnerships open up new opportunities for networked and outstanding quality patient care." They are a crucial building block in establishing our high standards worldwide and improving access to excellent medicine," emphasizes Dirk Burghaus. This is also illustrated by the recent award given to Ahmed Almousa, international representative of the Sportklinik Hellersen, who was honored with the DIKWP International Cooperation Award. This award recognizes his extraordinary commitment to establishing and sustainably promoting international medical collaborations.

In addition to national and international awards, the Sportklinik Hellersen was also named "TOP Regional Hospital" in North Rhine-Westphalia. FOCUS Gesundheit thus once again confirms the high quality of care in the Märkischer Kreis district and beyond. "At a time when the hospital landscape is undergoing major changes, specialization is of crucial importance. The clear focus on selected specialist areas and the high level of expertise of our team ensure top-quality care – both today and in the future," says Dirk Burghaus.



Insight

Award

Hellersen Insight wins national award

KU Awards 2025: Sportklinik Hellersen takes second place in the clinic magazine category



Since 2021, the hospital magazine “Hellersen Insight” has been providing information on medical topics, offering personal insights, and addressing developments in the healthcare sector. What began as a print magazine is now part of a cross-media communication strategy.

In addition to the traditional print product, the magazine is also available in an interactive format, with videos and related information added to the online version. Content is prepared in a targeted manner, communicated in an understandable way, and published across various channels. The project

“Hellersen Insight 2.0 – From Hospital Magazine to Media Platform” was awarded second place in the hospital magazine category at the KU Awards 2025. The award is presented annually by the trade magazine KU Gesundheitsmanagement and recognizes innovative communication projects in the healthcare sector. The award ceremony took place on October

16 in Berlin.

"Hospital communication must build trust and explain complex content clearly," says Sarah Burghaus, Head of Marketing, PR & Customer Service at Sportklinik Hellersen. "I am delighted that our work has been recognized. This shows that our communication strategy is not only effective, but also sets new standards – for modern, understandable, and targeted communication in the healthcare sector."

Digital, interactive, and international

The magazine has been completely redesigned: In addition to the print version, there is a digital edition at www.hellersen-insight.de, which integrates videos, animations, image galleries, and voice-over contributions. The online magazine is optimized for mobile devices, available in two languages, and also targets an international audience. The magazine thus fits seamlessly into the international orientation of Sportklinik Hellersen, which promotes global medical cooperation and knowledge exchange through the Hellersen Hospital.

"I am very pleased about the award – and especially about what it stands for: a completely reimagined clinic magazine that not only informs, but also touches, moves, and connects," says Dirk Burghaus, CEO of the Sportklinik Hellersen.

A key concern in this transformation process was to respond to changing information habits. "Our patients and interested parties consume content in very different ways today. With the online magazine, we are meeting these needs and offering a modern, cross-channel experience," explains Sarah Burghaus. The brand was further sharpened, stories were made visible, and the magazine was transformed into a modern, cross-media format.

ce



The magazine's content is created through an editorial process that takes all communication channels into account. Interviews are not only prepared for the print edition, but also provide video clips, social media posts, and additional content for the online version. This results in cross-media formats that can be flexibly adapted to different target groups.

Previous successes at the KU Awards

The Sportklinik Hellersen has already impressed the KU Awards several times with its clear and effective communication strategy. In 2022, the clinic magazine Hellersen Insight was also awarded second place in the Best Clinic Magazine category, and in 2023, the Sportklinik Hellersen took first place in the Online Marketing category. Particular praise was given to the successful combination of online and offline media to create a holistic, cross-channel brand presence that is consistently geared towards the needs of patients and interested parties.

Facts

The Sportkliniek in figures



13

Medical
specialist depart-
ments under one

The Sportkliniek Hellersen
provides comprehensive care
for injuries to the knee, hand,
shoulder, elbow, hip, spine,
foot, and ankle.

The range of services is roun-
ded off by plastic and aesthetic
surgery, sports medicine, and
specialized pain medicine.

8.000

Inpatient
treatments
per year

40.000

outpatients
per year



1.400

Pain patients
per year



2.400

Patients with
back pain
per year



4.500

Joint surgery
per year



586

Employees

*including subsidiaries

As of June 2025



1.030

Meniscus
surgeries
per year



2.000

Knee surgery
per year



850

Knee and hip prothe-
ses
per year



1.000

Shoulder surgery
per year



Patient feedback

Your opinion is important to us!



"Friendly, competent staff who take time for patients. Competent, patient-oriented, friendly, experienced."

Klinikbewertungen, July 2025

"From the moment we first walked in, we felt extremely well cared for here at the Sportklinik. In every department, we were treated with kindness, empathy, and professionalism. Even weeks after the operation, during a follow-up appointment, a nurse we happened to meet in the elevator asked how my son was doing. (...) Keep up the good work!"

Google, June 2025

"Very well-organized and fast procedures. The knee surgery was completely painless and successful. Couldn't have gone better."

Klinikbewertungen, March 2025

"... All the doctors and nurses do their work so lovingly that there is absolutely nothing to complain about. A big thank you for this pleasant and friendly support. ..."

Google, March 2025

"Everyone was very nice. It's now been 8 weeks since my surgery. Everything went well from the start and has healed nicely. Good advice."

Google, April 2025

"I am 100% satisfied with Dr. Stoll and his team after my cruciate ligament surgery—I can absolutely recommend them. I was mobile again very quickly and pain-free."

Klinikbewertungen, July 2025

"Great clinic! Superb staff and TOP DOCTORS!"

Klinikbewertungen, April 2025

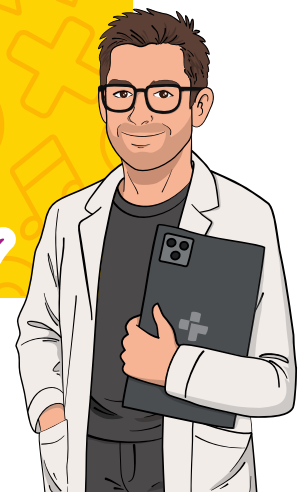
"A thoroughly positive stay. From the preliminary examinations to the surgery, everything ran very smoothly and was well coordinated. You immediately felt that you were in good hands. ..."

Google, Mai 2025

"... From the receptionists to the cleaning staff, doctors, and therapists, I have to say that I have never experienced such kindness and care anywhere else. ..."

Google, Juli 2025

Would you like to give us your feedback? We welcome your reviews on Facebook, Google, Klinikbewertungen or Jameda.



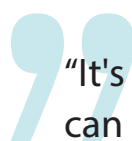
Brief profile

Dr. Stefan Schmidl
Chief at the Center for Joint Replacement



With Dr. Stefan Schmidl, the Sportklinik Hellersen has added another top specialist to its team of doctors. More than ten years ago, he began focusing on endoprosthetics and has since devoted himself intensively to this field, both surgically and scientifically. As an expert in primary and revision hip and knee endoprosthetics, his professional career has taken him to some of the most renowned endoprosthetics centers in Europe.

Dr. Stefan Schmidl has a clear goal: to improve the mobility and thus the quality of life of his patients in the long term. A particular focus of his work is on robot-assisted endoprosthetics. Since May 2025, he has not only been working as Chief at the Sportklinik Hellersen, but also heads the robotics center at the specialist clinic, which opened in the spring of this year. Here, state-of-the-art technology and excellent surgical expertise come together.



"It's great when you can help other people through your work. Manual work is also my passion, and as an endoprosthetist, I'm fortunate to be able to combine both activities in my job."

Dr. Stefan Schmidl
Chief, Center for Joint Replacement

Vita

- 2003 - 2009 Medical studies at the Friedrich Schiller University of Jena.
- 2010 - 2013 Clinic for Trauma, Hand, and Reconstructive Surgery University Hospital Jena
- 2013 - 2017 ENDO-clinic Hamburg
- 2017–2025 Senior Physician, ENDO Clinic Wuppertal, specializing in endoprosthetics
- Since May 2025 Chief, Sportklinik Hellersen

3 questions for....

Dr. Stefan Schmidl



Dr. Schmidl, what makes

ment

Respectful and collegial interaction is particularly important to me. I value flat hierarchies where tasks are clearly defined, as well as an open culture of error management. It is important to me that issues can be clarified directly and honestly in personal conversations — this not only promotes cooperation, but also trust within the team.

Where so you see the future of modern medicine?

In endoprosthetics, long-term findings are of central importance. Only after 15 to 20 years does it become clear how durable and successful a joint replacement really is — that's when the wheat is separated from the chaff.

I very much hope that robotics, and artificial intelligence in particular, will be developed to such an extent in the near future that we will be able to evaluate the data obtained today in a targeted manner. The vision is that, even before the operation, we will be able to

use individual parameters — such as anatomy, ligament tension, or previous surgeries — to precisely predict which individual fine adjustments are optimal for the respective patient or procedure. This would allow me to determine preoperatively how many degrees I need to change the leg axis or vary the rotation of the implants, depending on the patient's individual anatomy and the tension conditions in the knee joint measured live, in comparison with the existing data from many patients who have undergone surgery.

How do you prepare for complex operations?

Careful preparation is crucial for complex operations. This includes a comprehensive medical history of the patient, followed by thorough preoperative diagnostics and examination. X-rays, old implant records, and information about previously implanted prostheses play an important role. In cases of painful artificial joints, we always perform a joint puncture to rule out infection. This preoperative exclusion of infection is essential, as it has a significant impact on the further course of treatment. Logistical preparation is equally important. This includes having special implants available and, if necessary, ordering loan instruments. All these steps must be carefully planned and coordinated in advance to ensure that the operation runs smoothly and the patient receives the best possible care.

A heartfelt farewell – and a new beginning with outstanding expertise

Handover in endoprosthesis Hellersen:
Chief Dr. Stefan Schmidl succeeds Dr. Joachim Hagenah



Endoprosthesis surgery is a major procedure — it requires not only careful planning, but also the trust of patients. For over two decades, Dr. Joachim Hagenah was responsible for precisely this sensitive area at Sportklinik Hellersen: Together with his team, he treated countless patients and implanted more than 15,000 hip and knee prostheses. Now he is handing over the baton as Chief. Dr. Stefan Schmidl is succeeding Dr. Joachim Hagenah, who has played a decisive role in shaping and establishing the specialist department for artificial joint replacement at Sportklinik Hellersen since 2004.

Over the past 20 years, my team and I have established and continuously developed endoprosthetics at the Sportklinik Hellersen. I am delighted that we have found a competent, highly qualified successor in Dr. Schmidl. I am convinced that the Sportklinik Hellersen will benefit from his extensive expertise," says Dr. Joachim Hagenah.

Saying goodbye is not easy for the long-standing Chief: "After so many years, the Sportklinik Hellersen has become like a family to me — not only because of the long time I have spent there, but also because of the special atmosphere. That makes saying goodbye all the more difficult," he explains. He is all the more pleased to know that the department is in good hands and wishes his successor all the best.

Dr. Stefan Schmidl brings with him excellent expertise in the field of endoprosthetics. He is a proven specialist in

„The fascinating thing about endoprosthetics is the possibility of significantly improving mobility and thus quality of life, allowing patients to pursue their hobbies again or simply walk around town without pain..“

Dr. Stefan Schmidl
Chief of Center for Joint Replacement

the use and replacement of artificial joints. With experience from several thousand successfully implanted endoprostheses and comprehensive surgical expertise, he routinely performs even the most complex procedures. His career has taken him to the most renowned endoprosthetics centers in Europe, where he not only performed surgeries but also led teams and successfully implemented innovative treatment concepts. In addition to his clinical work, he has conducted scientific research in the field of endoprosthetics. His research focused on the service life of prostheses, infections, and hip joint dislocations. This refers to the dislocation of the hip prosthesis during certain movements or after a fall. Dr. Stefan Schmidl is currently contributing his expertise

to an international team and working on a consensus for fast-track endoprosthetics. Fast-track is a concept for improving the processes surrounding endoprosthetics patients. It includes preparation for surgery, optimized process management in the operating room, and intensive and early mobilization under physiotherapeutic guidance.


"The fascinating thing about endoprosthetics is the opportunity to noticeably improve mobility and thus quality of life, to pursue hobbies again or even just to be able to walk through the city without pain," explains Chief Dr. Stefan Schmidl. Thanks to surgical treatment, many patients can move much better again within a short time after years of restriction and pain, even achieving a pain-free everyday life.

The endoprosthetics specialist says of the medical profession itself: "It's wonderful when you can help other people through your work. Manual work is also my passion, and as an endoprosthetist, I am fortunate to be able to combine both activities in my profession."

What the Chief particularly likes about the Sportklinik Hellersen is its high level of specialization, which also corresponds to his own vision. "This is exactly what I was looking for. A specialist clinic that focuses on endoprosthetics in order to achieve the best results and quality," explains Dr. Stefan Schmidl. He was already familiar with the Sportklinik Hellersen from his time at the Endo Clinic in Hamburg. We are delighted to welcome Dr. Schmidl as chief at the Sportklinik Hellersen and are confident that he and his outstanding expertise in endoprosthetics will be a great asset to our clinic," says Dirk Burghaus, CEO of the Sportklinik Hellersen, welcoming the new chief to the Center for Joint Replacement. ■

From the department

Center for Joint Replacement



Future medicine: How robots are revolutionizing the operating room

Chief Dr. Stefan Schmidl on robot-assisted surgery and artificial intelligence in endoprosthetics

As head of the Robotics Center at Sportklinik Hellersen, Dr. Stefan Schmidl brings with him a wealth of experience in the field of robot-assisted surgery. He is an expert in the application of this innovative technology, particularly in knee endoprosthetics. In an interview, Dr. Stefan Schmidl discusses the future of endoprosthetics and the role he himself plays in it.

Dr. Schmidl, what possibilities does robot-assisted surgery offer?

Dr. Stefan Schmidl: Robot-assisted technology already enables significantly more precise implantation tailored to the individual patient—and we are only just getting started. The combination with artificial intelligence and the associated evaluation of large amounts of data from previous surgical procedures using robotics will open up many more possibilities in the coming years, from which our patients will benefit significantly.

What advantages are patients already benefiting from?

Dr. Stefan Schmidl: One example of progress can be seen in leg axis correction: the use of robots significantly reduces deviations such as bow legs or knock knees. The implants are aligned with millimeter precision throughout the entire range of motion.

Another particular advantage is the intraoperative dynamic assessment of ligament tension with trial implants throughout the entire range of motion. This allows changes to be made and individual intraoperative conditions to be influenced even before the original implants are

inserted. Stability, fit, and function can thus be checked in real time and adjusted directly if necessary. Continuous data collection during the operation also offers the possibility of making individual fine adjustments directly — even before the final implant is inserted.

Have you already worked with different robotic systems?

Dr. Stefan Schmidl: At the Robotics Center at the Sportklinik Hellersen, we work with the VELYS Robotic-Assisted Solution from DePuy Synthes. This is a system developed specifically for orthopedic surgery. Previously, I worked at the ENDO Clinic in Wuppertal with the Rosa Knee System from Zimmer Biomet, a robot from an American company. The handling is similar, but the VELYS Robotic-Assisted Solution is somewhat more delicate.

What innovations will artificial intelligence offer in the future, and where will the journey take us?

Dr. Stefan Schmidl: The enormous amount of data that the robot collects during the procedure offers huge potential — especially when this data is interpreted meaningfully with the help of intelligent analysis. In the future, this will allow preoperative planning to be tailored even more individually and precisely to the patient's anatomy and ligament conditions.

Currently, this requires a great deal of experience. An experienced surgeon can tell whether a knee is more contracted or lax and decide accordingly whether the implant should be fitted more tightly or require more rotation. The goal is to support — or even replace — such assessments with valid, data-based analyses in the future.

In this way, technical innovation can help to objectify subjective experience and significantly shorten the learning curve — to the benefit of surgeons and, above

all, patients.

What are your plans as Chief, and what is your goal for the further development of endoprosthetics at Hellersen?

Dr. Stefan Schmidl: In the long term, my goal is to establish the fast-track or early recovery concept. This involves intensive, holistic patient care before, during, and after prosthetic surgery. Through targeted mea-



asures such as early mobilization on the day of surgery, intensive physiotherapy support, and individual preparation, we can significantly shorten the recovery time. Such small but effective adjustments also help to further reduce the risk of complications such as thrombosis, embolism, or pneumonia. In addition, interdisciplinary cooperation with all departments involved is particularly important to me in order to implement the concept in a sustainable manner. Another focus for me is the continuous development of robot-assisted surgery — to further improve the precision and individualization of procedures and maintain the highest level of care. ▀

At the beginning of the year, the Sportklinik Hellersen became the first clinic in North Rhine-Westphalia to use the VELYS Robotic-Assisted Solution from DePuy Synthes. There is a video about this on our Instagram page.



In an interview with

Dirk Burghaus
Chairman of the Board of Sportklinik Hellersen



© Hanna Witte

No future without AI – The pioneer of sustainable medicine

Patient care, diagnostics, or documentation — the German healthcare system is under enormous pressure. The shortage of skilled workers has long been a reality and is having a noticeable impact on patients and staff. In addition, bureaucracy and administrative burdens are growing, and many processes are outdated and poorly networked. In contrast, AI is on everyone's lips and is certainly a useful and helpful addition. How does this fit together?

Dirk Burghaus, CEO of Sportklinik Hellersen, does not see AI as a vision of the future, but rather as a necessary response to current challenges. In an interview with Hellersen Insight, he explains which digital solutions Sportklinik Hellersen is already using and will soon be introducing to optimize processes, simplify patient pathways, and specifically reduce the workload of medical staff.

Why do you think the use of artificial intelligence is so necessary in healthcare?

Dirk Burghaus: Without the use of AI, the health-care system will no longer be able to efficiently handle the multitude of tasks in the future – neither medically nor organizationally. We are talking about a field of medicine in which unimaginable amounts of data have been accumulated worldwide over decades: diagnoses, research results, clinical experience – entire libraries full of knowledge. No human being can fully comprehend or remember this flood of information. AI can do that – it is able to analyze these huge amounts of data in a matter of seconds and derive recommendations for action accordingly.

If we aspire to provide the best possible care for our patients, then the use of AI is not only sensible, but also necessary in many respects. This is because AI provides information that a single doctor alone could not process in such breadth and speed. So it's about being able to make better decisions – in the interests of patients. And it's also about improving the working reality in clinics. We already have too few skilled workers who can handle the ever-increasing workload. AI helps us to make processes more efficient, save time, and use scarce human resources in a more targeted manner.

Is artificial intelligence already so advanced that it can provide meaningful support to doctors in their daily work in hospitals?

Dirk Burghaus: Yes, but with limitations. We are not yet at the point where AI can completely take over medical decisions – and that will not be the case in the foreseeable future. But even today, artificial intelligence can noticeably

relieve the burden on medical staff. For example, in the case of elevated cholesterol levels, AI can take over the evaluation and make initial recommendations based on defined parameters. This frees up time for what is essential – such as personal consultations with patients. And that is precisely the point: if doctors spend less time on documentation and evaluation, they can concentrate more on individual care. Many processes in everyday hospital life are still paper-based or involve multiple data collection. This is not only inefficient, but can also have a negative impact on the quality of treatment. The targeted use of AI makes it possible to bundle information more quickly, recognize patterns, and establish connections – and in many cases more effectively than a human being can.

Technological developments over the past two decades show a clear dynamic. If this progress continues exponentially, it is only a matter of time before AI can reliably take over simple diagnoses. Nevertheless, humans will remain irreplaceable in the future – especially in medicine. Medical expertise is needed to check results, classify them correctly, and take responsibility. AI can analyze and recommend, but it cannot decide. Its potential lies in complementing medical expertise – for more informed, faster, and safer decisions.



What specific applications are you planning or already using at Sportklinik Hellersen?

Dirk Burghaus: We are currently working on several AI-based projects with which we aim to optimize both patient care and internal processes. One of the most exciting projects is the use of realistic avatars for patient education. These are not simple animations, but digital images of, for example, our chief physicians and senior physicians, which are created on the basis of real video sequences. The avatar talks to the patient, explains procedures, and asks specific questions, for example, about anesthesia, preparation for surgery, or previous illnesses. All content is medically reviewed, regularly updated, and individually tailored to the respective treatment situation. This allows us to provide basic information in advance of treatment. This ensures greater safety and understanding on the part of the patient. At the same time, our doctors gain time for personal consultations, which will always remain individual.

We are also currently developing a system for AI-supported document pre-structuring. Some patients bring extensive previous findings with them. AI can help filter out the relevant information and prepare it accordingly for medical staff. This means less searching, a better overview, and shorter response times.

Administrative processes can also be significantly streamlined, for example through AI-based appointment scheduling. Patients can easily and automatically make appointments via a voice dialogue system. The systems learn and recognize typical requests. This not only reduces the workload on our switchboard, but also offers patients an uncomplicated first point of contact – around the clock.

How do your employees perceive developments in AI?

Dirk Burghaus: I am convinced that all of us – regardless of our professional field – will have to adapt more to changes in our tasks in the future. And faster than ever before. This is particularly true in the healthcare sector, where pressure is high and resources are severely limited. We are actively supporting this change at the Sportklinik Hellersen. It is important to us to involve our employees at an early stage, to inform and train them. It's not about replacing employees. And we're certainly not talking about staff cuts through the use of artificial intelligence. Rather, we are concerned with rethinking existing tasks and relieving employees of activities that take up a lot of time and capacity – such as massive mul-



tipple documentation or purely administrative processes. This is exactly where AI comes in. Those who are open to this development see it as an opportunity. They realize that they can once again focus more on their actual tasks and on their patients.

Where do you currently see the biggest hurdles in the use of artificial intelligence?

Dirk Burghaus: One of the biggest hurdles lies in the area of IT structures – specifically in the interfaces between systems. Many software solutions in hospitals simply do not communicate with each other. This means that data has to be entered multiple times: weight, height, diagnoses, medications – often several times in different places. This is time-consuming, inefficient, and frustrating for everyone involved. Yet systems that make such double entries unnecessary have long been available. What is missing are uniform interfaces and the willingness of software providers to make them possible. Although there are legal requirements that these systems must communicate with each other, in reality this is unfortunately not yet working smoothly.

The second major hurdle is data protection. In Europe – and especially in Germany – we have created a data protection system that in many areas cannot keep up with reality. The so-called AI Act – a European law regulating artificial intelligence – is based, for example, on a level of knowledge that lags far behind the technological reality in many areas. Instead of enabling innovation, in its

current form it creates additional hurdles and uncertainties – especially in the highly sensitive healthcare sector. In practice, this means that innovation is blocked before it has even begun. We have been discussing electronic patient records for years, while in other countries all health data has long been centrally and securely recorded digitally.

One example is the United Arab Emirates. There, when you enter a doctor's office, your fingerprint is scanned and the doctor immediately has access to all your medical data – and only the doctor, of course. This is regulated in accordance with data protection laws, efficient, and secure. In Europe, on the other hand, we tend to think in terms of barriers rather than opportunities. This is not about abolishing data protection. It is about combining it sensibly with digital progress – in the interests of better care.

What developments are you aiming for at the Sportklinik Hellersen in the coming years – particularly with regard to AI and digitalization?

Dirk Burghaus: Over the next three to five years, we want to systematically integrate artificial intelligence into our clinic processes — not as an isolated measure, but as a well-thought-out overall concept. This affects all areas: from admission and medical documentation to aftercare. We not only want to make processes more efficient, but also further improve the quality of care. It is important to us that our employees are on board with this approach. That is why we are investing specifically in training and further education to strengthen their skills in using digital applications and give them confidence in their practical use.

In addition, we are focusing on international partnerships, for example with clinics in the United Arab Emirates. This exchange creates new perspectives and innovation impulses. It helps us to jointly develop standards that are viable across national borders.

What final conclusion would you draw?

Dirk Burghaus: Ultimately, I have a clear stance: technology is not an end in itself. It is a means to make medicine better, more humane, and more targeted. AI is key to this — but it takes people to unlock its potential responsibly.

Anyone who takes on medical responsibility cannot avo-

id using artificial intelligence — anything else would be a breach of the commitment to ensure the best possible care. So we should be bold and help shape the process instead of waiting to see what happens. ■

Guest article

Landessportbund NRW
Sandra Schöneich, Theo Düttmann

Stay fit even after surgery – with the digital exercise collection from Landessportbund NRW



© LSB NRW \ A. Bowinkelmann

Who doesn't know him: Commander Spock from Star Trek. Sounding similar, but somewhat less famous, is the SPOK of the Landessportbund NRW. This is not a case of word-finding difficulty on the part of the largest sports association in North Rhine-Westphalia, but rather an acronym for Sport Online Kartei (SPOK), or online sports database.

Anyone who wants to stay active after surgery and rehabilitation or is simply looking for new ideas for their own exercise program will find a treasure trove of exercises on the website spok.lsb.nrw/fitness. The platform offers over 200 detailed exercises for all age groups and fitness levels—ideal for getting back into sports or supplementing your own training plan.

SPOK, designed for exercise instructors in club sports, can also be used by individuals who want to train independently. The exercises are clearly categorized by muscle groups, materials, and exercise goals.

It is important to assess yourself accurately: Am I an experienced athlete – familiar with exercise – or a complete beginner? The latter are advised to learn the exercises with professional guidance. Talking to your orthopedist or a qualified trainer is also a sensible option when it comes to starting a self-made exercise program.

Particularly practical: the filter functions allow you to put together your own individual collection of exercises – tailored to your own needs and goals. For example, users can select specific exercises to strengthen their back or put together a program to mobilize certain areas of the body. Each exercise is accompanied by a clear description, information on the target muscles and training goal, as well as clear illustrations.

The platform is ideal for people who want to get back into exercise after rehabilitation, but also for anyone who wants to do something preventive for their health. The exercises are designed so that they can be done at home without much effort. For many exercises, all you need is a mat or towel to lie on. But even those who want to train with specific equipment such as a fitball, Theraband, or dumbbells will find what they are looking for here.

A special bonus: the website saves your personal favorites so you can create your own little training archive. This not only makes regular training more effective, but also more varied.

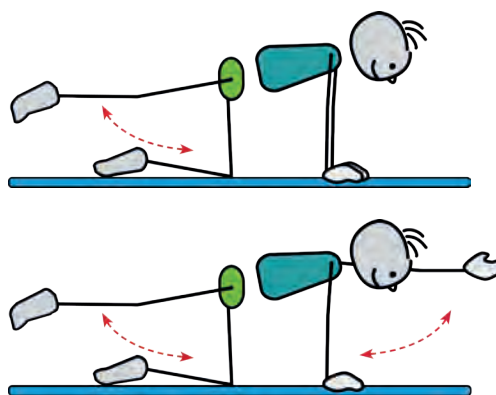
Our tip: If you are experienced in exercise, put together a small series of 3-5 exercises and get started. Whether for strengthening, mobilization, or simply for more flexibility in everyday life, SPOK offers the right exercise idea for every situation. If you are new to exercise, start with professional support.

Stay active, stay healthy!



Examples of exercises for back mobilization and strengthening:

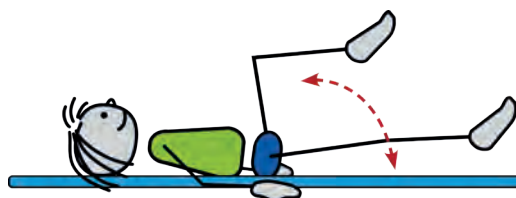
Arm/leg lifts on all fours



basin clock



Alternating leg lowering



© media team: Claudia Richter

Sport Online Kartei (SPOK)



Guest article

Kreissportbund Märkischer Kreis e.V.
Kirsten Nölle

50 years of being a sporting home

Kreissportbund Märkischer Kreis e.V. celebrates anniversary



© Oliver Bergmann / Iserlohner Kreisanzeiger

Standing from left: Marco Voge, Georg Schebesta, Anja Esser, Günther Nülle, Claudia Wrede, Markus Kisler, Monika Hermanns, Klaus Scharf, Heike Jarosch-Groß, Sebastian Pahlke, Brigitte Schmitz-Gerau, and Christian Schweitzer.
Front row from left: Solveig Schwiederski, Cedric Kleymann, and Kirsten Nölle.

As part of the municipal reorganization of Westphalia, the Märkischer Kreis was founded in its current form on January 1, 1975. In addition to many incorporations, there was also a forward-looking merger from a sporting perspective. On April 18, 1975, the sub-organizations that had previously operated at the city level merged to form Kreissportbund Märkischer Kreis e.V. (KSB for short), bringing 420 sports clubs under one roof at that time. This umbrella organization for organized sports has become more professional over the past 50 years and now offers 506 clubs (as of 2025) a sporting home.

Even though those responsible for the KSB today consider the founding of the district as the “big brother” to be the basis for their own anniversary, there is also an alternative timeline according to which the “Stadtverband für Leibesübungen Lüdenscheid” (Lüdenscheid City Association for Physical Exercise), founded in 1946, could have been the origin of the organization. A commemorative publication from 1986 states that sport, based on the principle of fairness, “can be the moral foundation of all action” and thus has a “socio-political significance that goes beyond leisure activities and health services.” Not much has changed in this basic view over the years. In fact, its importance has increased in times of increasing digitalization. This can be seen, for example, in the fact that sport is no longer part of the Ministry of the Interior at the political level, but that a separate Minister of State for Sport and Volunteering has been appointed to the Chancellery. This welcome institutional realignment is no coincidence. All the federations and associations organized under the Deutschen Olympischen Sportbundes (DOSB) work tirelessly to promote the interests of sport. The KSB is headed by Landessportbund NRW. The KSB oversees the respective city and municipal sports associations of the individual local authorities and, of course, the numerous sports clubs. This may seem very convoluted to outsiders, and the structure of organized sports is clearly hierarchical, but in essence, the focus is always on cooperation and mutual support.

With around 25.2 million members in sports clubs nationwide (as of 2024), sports are one of the most important pillars of society and certainly a reflection of society. The Kreissportbund Märkischer Kreis e.V. (Märkischer Kreis District Sports Association) therefore attaches great importance to focusing its work on current challenges and has recently concentrated its efforts on areas such as the prevention of sexualized violence in sport and sport as a means of combating loneliness.

A study commissioned by the Landessportbund NRW (North Rhine-Westphalia State Sports Federation) at the University of Koblenz recently took a closer look at the Märkischer Kreis, among other areas, to examine membership trends in sports clubs. The evaluation provides important insights for the future: in order to counteract the predicted decline in membership, it is particularly



important to target adults — especially women. Many sports clubs are so-called single-sport clubs with only one department, and especially in smaller communities, it could help to expand the range of activities on offer in order to appeal to more people. And the KSB's task is simply to initiate these processes so that the next 50 years of history can also be written.



From the department

sports medicine

Exercise during menopause? Now more than ever!

Alleviate symptoms and improve your
quality of life –

Sportmedizin Hellersen explains



Sudden hot flashes, restless nights, or weight gain — these are typical signs for middle-aged women that menopause has begun. Over several years, the production of the hormones estrogen and progesterone steadily decreases. This leads to physical and mental changes. It is not uncommon for affected women to find this transition stressful. But how can those affected deal with it? Can exercise help in this situation? Dr. Ulrich Schneider, leading senior physician at Sportmedizin Hellersen, and sports therapist Stefan Krakor explain.



The change in hormone balance brings about changes that are often noticeable in the form of hot flashes, sleep disturbances, mood swings, and even depressive moods or changes in sex life. But there are even more changes taking place in the body. In terms of metabolism, there is a decline in energy consumption and a decrease in fat burning, which often leads to weight gain and an increase in body fat. In addition, the muscles no longer respond as well to training stimuli. The risk of diseases such as diabetes, cardiovascular disease, and osteoporosis also increases during menopause.

"Increased physical activity plays a crucial role in counteracting these changes. Regular endurance training can boost energy metabolism again, so that weight can be maintained in combination with an appropriate diet," explains sports therapist Stefan Krakor. Regular moderate endurance activities can counteract the decline in fat burning. "This also reduces the risk of diabetes and cardiovascular disease," adds Dr. Ulrich Schneider.

Exercise can even help specifically in the context of reduced bone density in osteoporosis: "In weight-bearing movements such as strength training, the bones can be trained in such a way that bone loss is slowed down and the risk of later fractures is reduced. In addition, strength training can counteract age- and hormone-related muscle loss during menopause," explains Stefan Krakor. Although exercise cannot prevent the symptoms of menopause, those affected often find that the intensity of the symptoms is reduced. In addition, the positive effect of exercise on the psyche and well-being is particularly important during menopause. Whether walking, cycling, strength training, gymnastics, or yoga — exercise and physical activity become even more important for health

during menopause. However, it is important to remember to have fun while exercising.



Fancy getting into sport? The fitness check from Sportmedizin Hellersen shows you where you stand — and how to get started in a healthy way. You can find all the information you need on our



From the department

Foot and ankle surgery



The flat feet –

A balancing act for the feet

From harmless flat feet in children to a
painful problem in adulthood

If flat feet do not simply “grow out” during childhood, they can severely restrict mobility and quality of life. Andrea Knichel, Leading Senior Physician for Foot and Ankle Surgery and Pediatric Orthopedics at the Sportklinik Hellersen, explains what parents should look out for — and what modern treatment options are available for both children and adults.

What is flatfoot in children and what are the first symptoms?

Andrea Knichel: Flat feet appear in children when they start walking and are completely normal, as the muscles that support the arch of the foot first have to get used to the strain. In addition, during the first few months of walking, the arch of the foot is flat due to the thick layer of fat under the longitudinal arch. With

increasing age and strengthening of the muscles, the foot straightens and the fat pad reduces.

A permanent flat foot can only be observed until the end of foot growth (at around 12 years of age for girls and 14 years of age for boys). The inner ankle protrudes prominently, the foot is clearly tilted inward at the ankle joint, and the shoes are worn asymmetrically on the inside. In childhood, there is usually no pain — complaints

often only arise when footwear exerts uncomfortable pressure on the foot. Children with muscle weakness or motor impairments are particularly affected.

And what are the signs and symptoms in adulthood?

Andrea Knichel: Adults suffer from stress-related pain in the midfoot and rearfoot. This can limit both running and sports activities as well as the ability to work. An acquired flat foot is caused by increasing weakness or injury to a tendon on the inside of the foot. The load is no longer absorbed by the supporting joint structures and ligaments. With age, the elasticity and stability of the soft tissue structures decrease. This is followed by an increasingly painful misalignment with a lowering of the longitudinal arch of the foot and inward buckling of the ankle joint. Sometimes the changes begin painlessly, e.g., in diabetics or rheumatism patients.

In the case of congenital or childhood flat feet, pain often occurs in adulthood without any specific triggering event. This develops gradually and becomes more pronounced between the ages of 30 and 40.

What role do external factors play?

Andrea Knichel: Lack of exercise in childhood and childhood obesity play a decisive role. The choice of shoes is also crucial: shoes should always fit perfectly and should never be too small. This is especially important for children's feet, which are still growing, which is why feet should be measured regularly when buying shoes. Good rearfoot support and a solid footbed are recommended.

However, the best training for the feet is still walking barefoot. This trains the foot muscles and activates the sensorimotor system for stable foot positioning. The right choice of shoes is just as important for adults. Being overweight and a lack of exercise can also literally "flatten" the foot.

How is flat feet diagnosed in adults and children?

Andrea Knichel: Flat feet are diagnosed in both children and adults through a thorough examination. The foot is assessed barefoot while standing and walking. In addition, the toe gait is tested to distinguish between fixed deformities or deformities caused by torn tendon structures and deformities that are still flexible. Fixed deformities in children can be attributed to congenital bone connections in the foot, while in adults they are



often due to advanced osteoarthritis in the midfoot or rearfoot area. In such cases, individually tailored treatment with or without surgery is required.

In addition to a physical examination, children also require X-ray diagnostics to assess the bone structure and remaining foot growth. Adults also undergo an X-ray examination to determine the extent of the misalignment and possible signs of joint wear. In addition, MRI is an important diagnostic tool for assessing soft tissue structures such as tendons and capsules — especially on the inside of the foot — as well as bone quality and possible overload reactions. This information is crucial for choosing the right individualized therapy.

What treatment options are available for flat feet in children?

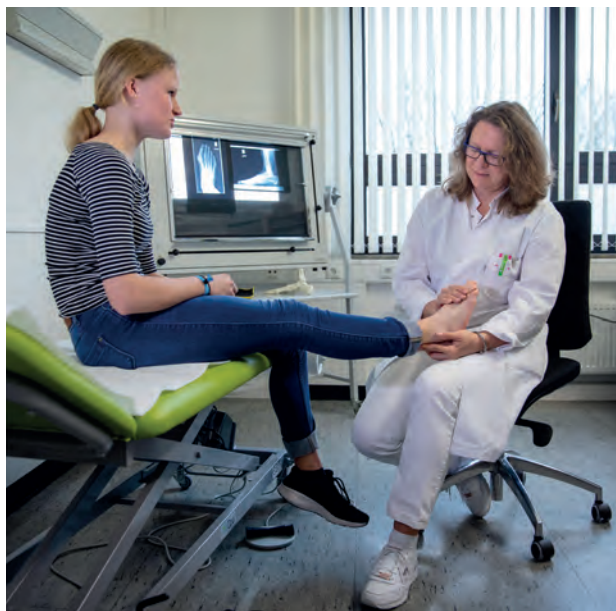
Andrea Knichel: In most cases, the treatment of flat feet in children begins with conservative measures. In the case of flexible flat feet, the focus is on strengthening the foot muscles. Walking barefoot is particularly effective, as it trains the muscles and improves sensory control of the foot at the same time. In addition, physiotherapy can help to improve foot position in cases of limited mobility or shortened calf muscles. The cooperation of parents is crucial here, as the exercises must be repeated regularly at home in order to achieve improvement. Simple everyday play also challenges and trains the whole body.

Shoe insoles are not necessary for children with normal muscular and motor development and flexible flat feet.

They are only fitted if pressure points or pain develop in the shoe. This does not steer foot growth in the “right” direction. Children with hypermobile joints or who suffer from muscle weakness, on the other hand, need supportive shoe inserts or foot orthoses.

When is surgery necessary for children?

Andrea Knichel: Surgical treatment is usually only considered if the deformity is pronounced or if pain



„Flat feet can be prevented in both children and adults through targeted measures.“

Andrea Knichel

Leading Senior Physician of Foot and Ankle Surgery and Pediatric Orthopedics

occurs. The ideal time is two years before the foot has finished growing (usually at age 9 for girls and age 10 for boys). The aim of such an operation is to take advantage of the remaining growth of the feet for correction. To do this, a minimal procedure is performed on the foot to prevent it from bending inward. The procedure keeps the foot in the correct position around the clock so that it can grow in the desired direction.

This method, called arthrorise, is effective and sustainable because the foot grows 24 hours a day, which is the only way to achieve a permanent correction. Shoe

inserts cannot achieve this because they are only worn for a limited time each day. Growth guidance in childhood can have a major impact on the future with very little effort.

What treatment options are available for flat feet in adulthood?

Andrea Knichel: Corrections of flat feet in adulthood are usually very extensive and require a long treatment period. Treatment requires a stage-appropriate approach, as the severity of the deformity and the condition of the tendons, joints, and bones can vary. In the early stages, when the tendon (posterior tibial tendon) is not yet torn, conservative measures are the primary focus. Pain and swelling often occur during weight-bearing activities, but the foot has not yet dropped. First, the tendon is relieved with supportive shoe inserts so that it can recover. Targeted strengthening exercises are then necessary to prevent recurrence.

In the more advanced stages, when structural changes to the tendons or joints are already present, the therapy must be individually tailored. If the misalignment is flexible and caused solely by a tendon defect, a joint-preserving procedure can be performed. This involves replacing the damaged tendon with a healthy one. In addition, correction of the heel position is necessary to improve the statics of the foot. However, if there is osteoarthritis, pronounced joint wear, in the affected joints, correction of the misalignment by stiffening the lower ankle joint is necessary.

Are there alternatives to surgery?

Andrea Knichel: For patients for whom surgery involves high risks, a custom-made orthopedic shoe is the most sensible option. This is made to measure based on a plaster cast or laser measurement. It cushions and supports the foot and ankle joint in the position dictated by the foot, thus reducing pain caused by overload and pressure points.

Both joint-preserving and joint-sacrificing surgeries require intensive and lengthy follow-up treatment. However, if they heal properly, they enable mobility to be maintained and, ideally, freedom from pain in everyday life.



Normaler Fuß



Plattfuß

How can flat feet be prevented?

Andrea Knichel: Both children and adults can prevent flat feet with targeted measures. It is particularly important for children to regularly train their muscles through play and sport. Walking barefoot outside in summer or wearing non-slip socks indoors is another important element that improves foot muscles, coordination, and sensorimotor skills. Maintaining a healthy body weight is also important, as being overweight puts excessive strain on the feet and impairs their development. Wearing the right shoes is essential: they should be regularly adjusted in length and width to accommodate foot growth and prevent the foot from slipping inside the shoe. Shoes with good cushioning insoles provide comfortable support for the foot; medical insoles should only be used in special cases.

Adults can also maintain the health of their feet by following the measures mentioned above. It is important to respond early to warning signs such as pain or changes in foot position and to consult a specialist. A healthy body weight also plays a central role here, as it prevents mechanical overload of the feet and significantly reduces the incidence of secondary diseases such as diabetes, which can lead to significant foot deformities.

Occasional barefoot walking and targeted exercises to strengthen the foot muscles can also help adult feet maintain their shape. When choosing shoes, a good fit is more important than fashion considerations. ▀

Ein Knick-Senkfuß kann zu Schmerzen führen und die Lebensqualität einschränken. In unserem Video erfahren Sie, wie Sie die Symptome erkennen und Eltern erhalten Tipps, wann bei Kindern Handlungsbedarf besteht.



From the department

Shoulder, elbow, knee surgery, and traumatology

Precision, team spirit, and highly specialized joint surgery

Chief Dr. Markus Leyh provides an insight into trauma surgery at Sportklinik Hellersen.



Injuries happen suddenly — in everyday life, during sports, or in leisure time. When bones break, ligaments tear, or joints are injured, fast and competent help is needed. In such moments, not only medical expertise is required, but also experience, teamwork, and genuine empathy. In this interview, Dr. Markus Leyh, Chief for Shoulder, Elbow, Knee Surgery, and Traumatology, talks about the particular strength of the collaboration within his team, the high level of specialization in his department due to its focus on specific treatments, and the fascination of trauma surgery.

Dr. Leyh, how would you describe the tasks and focus of trauma surgery in a few sentences?

Dr. Markus Leyh: Trauma surgery deals with the treatment of injuries caused by accidents. According to the definition of the professional association, these are sudden external impacts on the body that can lead to damage to health or even death. The task of trauma surgery is to treat the resulting injuries — with the clear goal of restoring physical function as best as possible and enabling those affected to return to their private and professional lives without pain.

What injuries or clinical pictures do you see and operate on most frequently?

Dr. Markus Leyh: There is no general answer to that question in trauma surgery. We see a wide range of injuries and treat all joint injuries and fractures near the joints – from acromioclavicular joint separations, shoulder fractures, and dislocations to elbow fractures, wrist fractures, knee ligament injuries, and tibial plateau fractures. Radius fractures and ankle fractures are very common injuries.

Are there seasonal differences in injuries — for example, more sports accidents in summer or more falls in winter?

Dr. Markus Leyh: That used to be the case. Today, it is less so. Injuries from ball sports occur all year round. And while in the past, more patients presented with skiing



accidents in winter, today there is an increase in bicycle accidents in summer. The number of injured cyclists has risen significantly in the summer months, particularly due to mountain biking and the use of pedelecs, which allow higher speeds. And in winter sports, too, the type of injury differs significantly between alpine skiers and snowboarders. While snowboarders more often suffer arm or shoulder injuries, injuries in alpine skiing usually affect the legs or knees.

What role does minimally invasive surgery play in your trauma surgery department?

Dr. Markus Leyh: Today, smaller incisions are possible overall, as assisted surgery with optics and new implants enables very stable treatment via smaller access routes — for example, in knee and shoulder joint operations. Some fractures can be operated on under arthroscopic control. In principle, however, the procedures that are necessary are used.

What distinguishes the trauma surgery at the Sportklinik Hellersen from other trauma surgery clinics or centers? Is there a special structure for emergency care?

Dr. Markus Leyh: The trauma surgery at the Sportklinik Hellersen differs from other trauma surgery facilities primarily in its focus on injuries close to joints and joint injuries – we refer to these as mono-injuries. This means injuries that are limited to one or two areas of the body. We do not treat severe or multiple injuries. This also applies to fractures near the pelvis or hip joint or fractures



of large long bones. These are treated at centers that specialize in this area. The particular advantage of the Sportklinik Hellersen lies in its ability to treat injuries to bone and joint surfaces as well as ligaments and cartilage structures in a highly differentiated manner. We specialize in complex joint injuries. Patients benefit from the targeted expertise of the individual specialists within our team, as our trauma surgeons and orthopedists work hand in hand as joint surgeons.

What would you describe as the greatest strengths of trauma surgery at the Sportklinik Hellersen?

Dr. Markus Leyh: The greatest strengths of trauma surgery at the Sportklinik Hellersen lie in the excellent results we achieve through the close cooperation of several experts. We have four specially trained trauma surgeons or specialist trauma surgeons who focus on the treatment of individual joints. Our doctors are highly specialized and work in both areas – orthopedic joint surgery and trauma surgery. This combination is an enormous advantage and very contemporary. What do I like about trauma surgery? An injured patient comes to you and you can help them quickly. You also see the results. The gratitude of the patients is enormous.

Finally, tell us what role the training of young doctors plays for you in trauma surgery.

Dr. Markus Leyh: I attach great importance to the training of young doctors. They determine our future and the future of the clinic—however, I also require certain skills and character traits in order to maintain the high level of medical care that we have in our clinic.

Thank you very much for the interview!



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Insight

From our clinic world

A day with Pascal Hagenah

Resident in shoulder, elbow, and
knee surgery and traumatology



Have you ever wondered what the daily routine of a resident physician in a specialist clinic looks like? What is the work of a young doctor like, who starts his rounds in the early hours of the morning, cares for patients throughout the day, assists in operations, and is committed to providing optimal care for his patients? In the section “A day with...,” we accompany assistant physician Pascal Hagenah through his varied and demanding working day at Sportklinik Hellersen.



7:20 a.m.:

The day begins for the assistant physician with the chief's rounds. Together with Dr. Markus Leyh, chief for shoulder, elbow, knee surgery, and traumatology, and the senior physicians in the department, he gets an

overview of the recovery of patients who have recently undergone surgery. While Dr. Markus Leyh gives the assistant doctors important instructions, Pascal Hagenah expertly changes bandages, treats wounds, and speaks reassuringly to the patients. One patient with a severe comminuted fracture hopes to be discharged, but the

Chief has to put her off: "We still need to observe her. The swelling has to go down before we can operate." For another patient, however, there is good news this morning: "If everything looks good, you can go home today," says Dr. Markus Leyh.



7:45 a.m.:

After rounds, the joint morning meeting of the endoprosthesis and shoulder, elbow, knee surgery, and traumatology departments begins. The assistant physicians, senior physicians, and chiefs of the departments review the X-ray images together. First, they focus on the post-operative X-ray images: How is the bone aligned after plating? Is the osteosynthesis material correctly positioned? One X-ray shows a particularly complex case: "If we perform such a procedure and you are interested in watching, you are welcome to come to the operating room," encourages Chief Dr. Markus Leyh the assistant physicians.

Next, the X-rays from the previous day's emergency service are reviewed. This involves documenting which patients were admitted during the shift, how the fracture occurred, what measures were or will be taken, and how the current images should be assessed.

In the case of complex fractures, senior physicians or chief physicians may re-examine the images and call the patients in for a check-up to ensure a complete diagnosis.



Another important part of the meeting is the surgery schedule for the day. Surgeries are prioritized, rescheduled if necessary, or emergencies are integrated into the schedule. With five regular and two outpatient operating rooms at Sportklinik Hellersen, planning requires the utmost precision to ensure an efficient and structured daily routine.



8:10 a.m.:

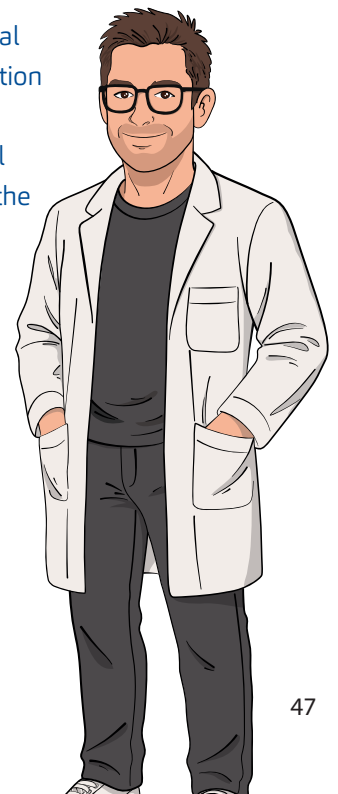
Chief Dr. Markus Leyh regularly takes the time to discuss the patients' health status in detail with the assistant physician. Together, they review medication adjustments, the next steps, and the next stages of treatment. Dr. Markus Leyh ensures that all measures are precisely coordinated. Through this personal exchange, Pascal Hagenah not only learns how to tailor treatment more effectively, but also gains valuable insights that help him develop further.



8:30 a.m.:

In the doctor's office, Pascal Hagenah turns his attention to his next task: preparing the doctor's letter for the patient who is to be discharged today. He carefully summarizes all relevant medical information — from the diagnosis and treatments performed to the recommen-

The daily routine of a hospital physician is diverse. In our section "A Day With," you can accompany resident Pascal Hagenah from his rounds to the operating room.





„Ich finde es spannend, in einer spezialisierten Klinik zu arbeiten, in der ich von erfahrenen Kollegen aus verschiedenen Fachbereichen lernen kann.“

Pascal Hagenah
Assistenzarzt Schulter-, Ellenbogen-, Kniechirurgie
und Traumatologie

ded follow-up measures. The doctor's letter serves as an important basis for further treatment and aftercare, both for the patient and for other treating physicians.



8:45 a.m.:

The assistant doctor takes over the emergency room. On his way there, he takes a quick look into the treatment room to see if a patient has already arrived. Since no patient is waiting for him at this point, he continues on to the emergency room to care for a patient in the pre-admission area.



8:50 a.m.:

In the pre-admission area, he welcomes a mother with her 16-year-old son, who is scheduled to undergo surgery the next day for a cruciate ligament rupture. The examination begins with a thorough medical history, during which he asks the patient about his medical history and current symptoms. He is particularly interested in the answer to the question "Have you ever had surgery on your left knee?" in order to better assess any risks or complications. He also asks about medication, previous illnesses, allergies, and sporting activities. The 16-year-old plays soccer regularly. This is followed by an examination of the knee, during which Pascal Hagenah again checks how far the leg can be bent and stretched

preoperatively, as this is crucial for the healing process.

After the examination, the assistant doctor explains the surgical procedure to the patient and his mother: "We will reconstruct the cruciate ligament using the body's own tissue so that you can be active again quickly." This is followed by detailed information about the course of the operation and the associated risks. "There are possible risks such as infections or complications with the transplant, but these are rare," he says, discussing the most important points with the patient.



9:30 a.m.:

The prepared doctor's letter is signed by Chief Dr. Leyh. Pascal Hagenah then takes over the patient's discharge.



9:50 a.m.:

Now it's time to prepare for the upcoming operation. Today, he is assisting with knee arthroscopy in the outpatient operating room. "If an operation is already scheduled the day before, I make sure to find out specific information about the procedure in advance so that I am optimally prepared." Thorough planning is essential for him, especially when he is performing the operation himself — even though he can always count on the support of a senior physician.



10:15 a.m.:

The outpatient procedure begins: The surgical team is ready and the monitor shows the first images of the knee joint. A senior physician performs the arthroscopy while the assistant physician supports him, hands him instruments, and closely monitors the procedure. With precise movements, fine medical instruments are inserted through the small incisions in the skin to repair the medial meniscus and treat cartilage damage. Every detail is visible on the monitor, allowing the team to work with precision.



11:20 a.m.:

Back in the emergency room, an emergency awaits him. It is a work-related accident: a patient slipped on his way to work and fell on his knee. The patient is now complaining of severe pain in his knee and tailbone. The resident takes on the case and requests an X-ray for a thorough examination to rule out possible injuries.

The six-year training program in orthopedics and trauma surgery is primarily practice-oriented: Resident physicians learn through surgical procedures and everyday clinical work.



11:30 a.m.:

No sooner is he back in the doctor's office than the phone rings again. Another work-related accident. A woman fell yesterday and wants to have her pain checked out. Here, too, after a physical examination, the patient is referred to the X-ray department.



11:40 a.m.:

The first patient, who injured himself on his way to work, is back in the emergency room. After Pascal Hagenah examines the X-rays of the knee and coccyx and finds nothing unusual, he calls in the senior physician, Dr. Kerstin Hengstmann. She examines the patient again and looks at the images thoroughly. The senior physician also finds no injuries. Despite the unremarkable findings, it is decided that the patient should take it easy. He is therefore given a sick note for one week to relieve and rest the affected knee and coccyx area.



11:50 a.m.:

The patient is also back in the emergency room. After the senior physician has thoroughly reviewed her case, she gives the all-clear. The examinations and X-rays have shown no abnormalities and there are no signs of serious injuries.



12:10 a.m.:

Take a break! Take a deep breath and recharge your batteries before continuing with your work.



12:40 a.m.:

Time for the necessary ward work: The assistant physician documents treatment steps, writes doctor's letters, and checks or changes medication. If necessary, he or she adjusts the therapy or carries out further examinations, always in close consultation with the senior physicians or the chief to ensure that all measures correspond



to the best possible patient care.

At the same time, after consulting with a senior physician, he or she processes requests for pension insurance applications, fills out forms, answers specific questions, and has the documents checked to ensure their accuracy.



15:15 p.m.:

Today, Pascal Hagenah is taking over the emergency service, which begins at 3:15 p.m. following the regular opening hours of the outpatient clinics.

In principle, an assistant physician must be fit for duty for this service — fitness for duty is assessed by the Chief. The physician on duty on site must be able to treat acute emergencies in-house together with the anesthesiologists.

In addition, expertise in radiation protection is required. Only then can the assistant physician independently order and evaluate X-rays. Obtaining an X-ray license requires at least one year of training, during which assistant physicians acquire the necessary expertise to indicate and interpret X-ray images.

To be fit for duty, the assistant physician must also have a sound knowledge of orthopedics and trauma surgery and be able to apply bandages and casts. In the emergency service, their tasks include providing initial care to patients, making diagnoses, and evaluating X-rays. A senior physician on call is available by telephone at all times.

The emergency service ends at 7:30 a.m. the following morning. As his last official act, the doctor on duty, Pascal Hagenah, presents all patients from the emergency service to the team. The X-rays are reviewed together during the morning meeting. He then takes off his doctor's coat – the emergency service is over, and there were no special incidents.



Step by step towards specialist medical training

After successfully completing their medical studies, prospective doctors must decide on a specialty. In Germany, further training to become a specialist takes five to six years, depending on the field.

While searching for a suitable training position in the field of orthopedics and trauma surgery, Pascal Hagenah decided on the Sportklinik Hellersen. He learned about a vacancy through his father, Dr. Joachim Hagenah, who was working as a chief in endoprosthesis at the time. The prospect of working at a renowned clinic close to home while gaining valuable professional experience





ultimately prompted him to apply. He was already familiar with the clinic from various internships and thus had the opportunity to work with his father — a wish he had long cherished.

At the Sportklinik Hellersen, Pascal Hagenah found the ideal conditions for his specialist training. The six-year training program in orthopedics and trauma surgery is primarily practice-oriented: assistant doctors learn through surgical procedures and everyday clinical work. „At the beginning, you hold the hooks, and later, with more experience, you are allowed to operate independently,” he explains. A particular highlight was his first endoprosthesis operation, which he was able to perform together with his father, Dr. Joachim Hagenah – an unforgettable experience.

What Pascal Hagenah particularly appreciates about working at Sportklinik Hellersen is the high level of expertise. „I find it exciting to work in a specialized clinic where I can learn from experienced colleagues from various fields,” he says. Rotating through different surgical departments and conservative orthopedics has already given him a wide range of expertise.

Despite the positive experiences he is gaining at the Sportklinik Hellersen, he also has to work in other clinics in order to complete his specialist training. „It's part of the process to deepen and apply my knowledge of trauma surgery, intensive care, and emergency medicine in larger hospitals. But afterwards, I would like to return to the Sportklinik Hellersen,” explains Pascal Hagenah. On October 1, Pascal Hagenah transferred to another clinic to complete his specialist training.

„At the beginning, you hold the hooks, but later, with more experience, you can operate independently.”

Pascal Hagenah
Assistant physician for shoulder, elbow, and
knee surgery and traumatology

Hellersen Insight

Das Magazin der Sportklinik Hellersen

02.2025

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Unsere Expertise rund um Ihren Rücken

Das Deutsche Wirbelsäulen- und Skoliosezentrum
an der Sportklinik Hellersen

Ihre Wirbelsäule in den besten Händen

Im Deutschen Wirbelsäulen- und Skoliosezentrum helfen wir Ihnen, Ihre Beweglichkeit wiederherzustellen und Ihren Schmerz effektiv zu lindern. Unser spezialisiertes Team setzt auf einen ganzheitlichen Ansatz und behandelt jede Erkrankung individuell – sei es ein Bandscheibenvorfall, Ischiasschmerzen oder komplexe Wirbelsäuleninstabilitäten wie Skoliose. Dabei profitieren die Patienten von einer engen interdisziplinären Zusammenarbeit von Orthopäden, spezialisierten Wirbelsäulenchirurgen und Neurochirurgen – stets mit dem Anspruch, zunächst alle nicht-operativen Möglichkeiten auszuschöpfen.

Wir entwickeln individuelle Therapieansätze und setzen dabei auf hochmoderne Verfahren – darunter endoskopisch-minimalinvasive Techniken, die besonders gewebeschonend sind. So ermöglichen wir unseren Patientinnen und Patienten eine schnellere Genesung und eine zügige Rückkehr in den Alltag. Vertrauen Sie auf unsere langjährige Expertise – für eine schmerzfreie und bewegliche Zukunft!



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Aus dem Fachbereich

Deutsches Wirbelsäulen- und Skoliosezentrum

Drei Spezialbereiche mit einem Ziel: Ihre Rückengesundheit

Das Deutsche Wirbelsäulen- und Skoliosezentrum
an der Sportklinik Hellersen



Rückenschmerzen, ein Bandscheibenvorfall, Fehlstellungen wie eine Skoliose oder Instabilitäten der Wirbelsäule – die Ursachen für Beschwerden am Rücken sind so vielfältig wie die Menschen, die darunter leiden. Umso wichtiger ist eine Behandlung, die nicht nur höchsten medizinischen Standards entspricht, sondern zugleich auf die Patientinnen und Patienten abgestimmt ist.

Genau dafür steht das Deutsche Wirbelsäulen- und Skoliosezentrum (DWSZ) an der Sportklinik Hellersen. Von der konservativen Therapie über minimal-invasive und endoskopische Verfahren bis hin zu komplexen chirurgischen Eingriffen bündeln die hochspezialisierten Fachbereiche ihre Kompetenzen und decken gemeinsam das gesamte Spektrum moderner Wirbelsäulenmedizin ab.

Durch die enge interdisziplinäre Zusammenarbeit kann für jeden Patienten die Behandlungsmethode gewählt werden, die medizinisch notwendig und individuell angemessen ist. Im Mittelpunkt steht stets eine möglichst schonende, patientennahe Versorgung, die sich auf modernste Technik, langjährige Erfahrung und ein eingespieltes Expertenteam stützt.

Konservative Orthopädie:

Die nicht-operative Behandlung

Nicht jede Rückenerkrankung muss operativ behandelt werden – häufig führen gezielte, nicht-invasive Maßnahmen bereits zu einer nachhaltigen Linderung. In der Konservativen Orthopädie unter der Leitung von Chefarzt Dr. Stefan Nolte steht eine schonende, ganzheitlich ausgerichtete Therapie im Vordergrund.

Zum Einsatz kommen unter anderem präzise gesetzte Injektionen, manualmedizinische Verfahren – spezielle Handgriffe zur Lösung blockierter oder gereizter Strukturen – sowie individuell abgestimmte Schmerz- und Bewegungstherapien. Ergänzt wird das Spektrum durch moderne Techniken wie die interventionelle Wirbelsäulenthherapie, bei der unter bildgebender Kontrolle Medikamente gezielt an die betroffenen Stellen der Wirbelsäule eingebracht werden.

Ein besonderes Merkmal der konservativen Behandlung im Deutschen Wirbelsäulen- und Skoliosezentrum ist die enge Zusammenarbeit mit den operativen Fachbereichen. Bereits bei der Diagnostik werden alle therapeutischen Möglichkeiten gemeinsam betrachtet und interdisziplinär abgewogen. So lässt sich frühzeitig erkennen, ob der konservative Weg erfolgversprechend ist – oder ob minimalinvasive oder chirurgische Verfahren notwendig sind.

Wirbelsäulenchirurgie:

Minimalinvasiv, mikroskopisch und hochpräzise

Wenn konservative Therapien nicht mehr ausreichen, bietet die Wirbelsäulenchirurgie eine moderne und zugleich gewebeschonende Behandlungsoption. Unter der Leitung von Chefarzt Dieter Henigin kommen minimalinvasive mikrochirurgische Verfahren zum Einsatz, die sich insbesondere bei Bandscheibenvorfällen, Spinalkanalverengungen oder chronischen Nervenkompressionssyndromen bewährt haben.

Mit Hilfe eines Operationsmikroskops lassen sich feinste Strukturen präzise darstellen und gezielt behandeln. Gleichzeitig wird durch die lediglich kleinen

Hautschnitte das umliegende Gewebe weitgehend geschont. Die starke Vergrößerung ermöglicht ein äußerst präzises Vorgehen bei minimaler Belastung für den Patienten. Auch komplexere Eingriffe können so differenziert, strukturerhaltend und unter optimaler Sichtkontrolle durchgeführt werden.

Spezielle Wirbelsäulenchirurgie:

Expertise für komplexe Krankheitsbilder

Die Expertise der Fachärzte der Speziellen Wirbelsäulenchirurgie liegt in der Behandlung besonders herausfordernder Diagnosen – etwa bei Verformungen, Verkrümmungen oder altersbedingten Veränderungen durch Verschleiß. Unter der Leitung von Chefarzt Dr. Oliver Meier werden unter anderem Wirbelkörperfrakturen, höhergradige Instabilitäten und strukturelle Deformitäten therapiert.

Ziel der differenzierten chirurgischen Eingriffe ist es, die Statik der Wirbelsäule wiederherzustellen, Fehlstellungen zu korrigieren und die Stabilität dauerhaft zu sichern. Durch die weitreichende operative Erfahrung des Teams können auch komplexe Krankheitsverläufe präzise beurteilt und individuell behandelt werden – für eine langfristige Verbesserung der Lebensqualität.

Ergänzt wird das Behandlungsspektrum durch modernste minimalinvasive und endoskopische Verfahren. Dabei lassen sich viele Erkrankungen wie Bandscheibenvorfälle, Spinalkanalstenosen oder osteoporotische Frakturen besonders gewebeschonend über einen nur 8 Millimeter kleinen Hautschnitt behandeln. Die Muskulatur und stabilisierenden Strukturen bleiben dabei weitgehend unversehrt, was eine schnelle Rehabilitation und geringe postoperative Beschwerden ermöglicht.

Mehr Informationen zum
Deutschen Wirbelsäulen- und
Skoliosezentrum finden Sie auf
unserer Website!



Aus dem Fachbereich

Spezielle Wirbelsäulenchirurgie

Frühkindliche Skoliose

Warum eine schnelle Diagnose und kontinuierliche Kontrolle wichtig sind

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Hellersen Insight



An sonnigen Strandtagen, wenn Kinder fröhlich in ihrer Badebekleidung spielen und ihre Körperlinien deutlich sichtbar sind, können kleine Auffälligkeiten wie eine ungleichmäßige Schulterhöhe, eine asymmetrische Taillenlinie oder ein leichter Rippenbuckel besonders ins Auge fallen. Diese visuellen Hinweise sind häufig erste Anzeichen einer frühkindlichen Skoliose. Im Interview erklärt Dr. Oliver Meier, Chefarzt der Speziellen Wirbelsäulenchirurgie im Deutschen Wirbelsäulen- und Skoliosezentrum an der Sportklinik Hellersen, wie Eltern diese Symptome frühzeitig erkennen können und welche Behandlungsmöglichkeiten es gibt.

Was genau ist Skoliose, und wie häufig tritt sie bei Kindern auf?

Dr. Oliver Meier: Skoliose ist eine dreidimensionale Deformität der Wirbelsäule. Sie äußert sich durch eine Seitwärtsbiegung, die gleichzeitig mit einer Rotation der Wirbelsäule einhergeht. Diese Erkrankung ist gar nicht so selten – etwa 0,5 % bis 2 % der Kinder sind davon betroffen. Allerdings bedeutet das Vorhandensein von Skoliose nicht zwangsläufig, dass jede Form der Erkrankung behandelt oder operiert werden muss.

Wie können Eltern bei ihren Kindern erste Anzeichen einer Skoliose erkennen?

Dr. Oliver Meier: Oft bemerken Eltern die Skoliose bei ihren Kindern nach einem Strandurlaub, wenn die Kinder lediglich Badebekleidung getragen haben. Hier fällt am häufigsten der Rippenbuckel auf, der durch die Rotation der Wirbelsäule und des Thorax entsteht. Wenn die Lokalisation der Skoliose tiefer liegt, also nicht im Thoraxbereich, dann bildet sich ein ungleiches Taillendreieck, welches ebenfalls auf eine Skoliose hindeuten kann. Eltern sollten auf solche Hinweise sowie auf eine ungleichmäßige Schulter- oder Beckenstellung achten.

Wie wird eine Skoliose diagnostiziert und welche Behandlungsmöglichkeiten gibt es bei Kindern?

Dr. Oliver Meier: Einer Diagnose geht meist eine Untersuchung beim Kinderarzt voraus. Wenn dieser Auffälligkeiten feststellt, wird das Kind zum Orthopäden überwiesen. Dort wird die Skoliose genauer untersucht und der Schweregrad der Deformität festgestellt. Anschließend werden die Kinder dann oftmals bei uns im Deutschen Wirbelsäulen- und Skoliosezentrum an der Sportklinik Hellersen zur weiteren Behandlung vorgestellt.

Die Therapie richtet sich maßgeblich nach dem Schweregrad der Krümmung. Um diesen zu bestimmen, fertigen wir Röntgenbilder der gesamten Wirbelsäule an. Diese Aufnahmen ermöglichen uns, den Krümmungswinkel genau zu messen und den Verlauf der Erkrankung zu überwachen.

Bei leichteren Fällen genügt oft eine spezielle Krankengymnastik, wie die Katharina-Schroth-Therapie, die darauf abzielt, die dreidimensionale

Fehlstellung der Wirbelsäule in eine symmetrischere Position zu bringen. Auch stationäre Kuraufenthalte können dabei unterstützen, frühkindliche Skoliose zu behandeln. Bei stärker ausgeprägter Krümmung kann eine Korsetttherapie das Wachstum der Wirbelsäule steuern und eine Verschlimmerung verhindern. In besonders schweren Fällen bleibt jedoch nur die operative Korrektur als Option.

Wie lange dauert die Behandlung von Skoliose und wie wichtig sind regelmäßige Kontrollen?

Dr. Oliver Meier: Der Behandlungserfolg hängt stark vom Zeitpunkt des Therapiebeginns ab. Je früher die Behandlung startet, desto besser sind die Chancen auf eine Verbesserung. Wenn der Patient ausgewachsen ist, wie beispielsweise ein 16-jähriges Mädchen, dann können konservative Maßnahmen nicht mehr greifen. Es ist entscheidend, dass die Therapie konsequent und regelmäßig erfolgt, idealerweise durch denselben Arzt, der den Fortschritt überwacht. Regelmäßige Kontrollen sind



dabei essenziell. Kinder mit Skoliose sollten mindestens alle sechs Monate untersucht werden, um das Fortschreiten der Erkrankung zu verhindern.

Gibt es Faktoren, die die Wahrscheinlichkeit einer Skoliose erhöhen?

Dr. Oliver Meier: Obwohl die genaue Ursache der Skoliose nicht ganz bekannt ist, wird vermutet, dass es sich um eine Wachstumsstörung der Knochen und des Muskel-Bandapparates handelt. Faktoren wie Übergewicht und eine schlecht trainierte Muskulatur können die Erkrankung allerdings verstärken. Regelmäßige Bewegung und eine ausgewogene Ernährung sind daher zur Prävention wichtig.

Welche Rolle spielt das Deutsche Wirbelsäulen- und Skoliosezentrum in der Behandlung von Skoliose?

Dr. Oliver Meier: Wir bieten eine umfassende Betreuung durch ein erfahrenes Team von Ärzten, die über Jahrzehnte lange Expertise in der Behandlung von Skoliose verfügen. Diese Erfahrung ist entscheidend für eine erfolgreiche und langfristige Betreuung der Patienten.

Benötigt man eine Überweisung, um im Zentrum behandelt zu werden?

Dr. Oliver Meier: Ja, für eine Behandlung im Deutschen Wirbelsäulen- und Skoliosezentrum ist eine Überweisung von einem Orthopäden, Kinderarzt oder Chirurgen erforderlich.

Wie Eltern erste Anzeichen einer Skoliose erkennen und was dann zu tun ist, erklärt Chefarzt Dr. Oliver Meier im Video. Jetzt reinschauen und mehr erfahren!



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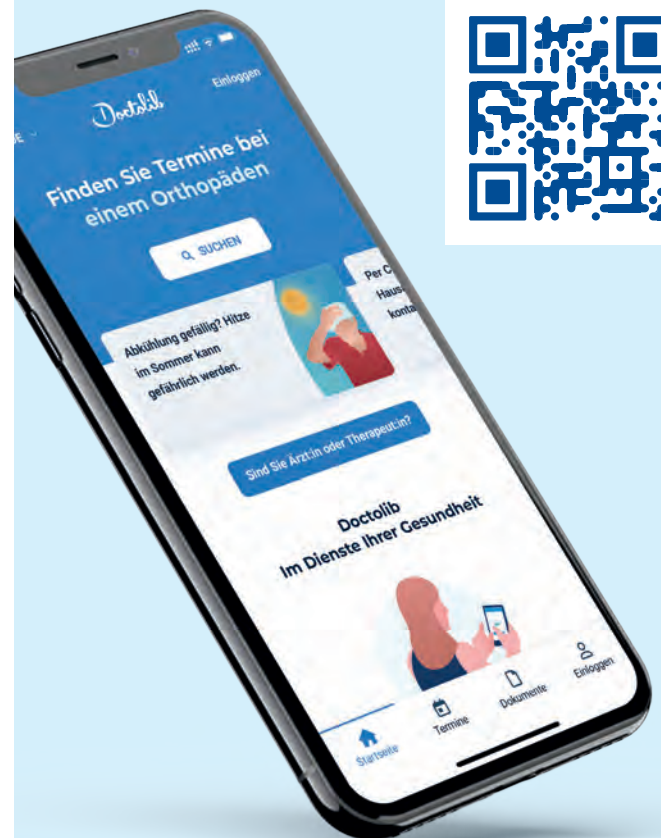
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Aus dem Fachbereich

Spezielle Wirbelsäulenchirurgie

Minimaler Eingriff und maximale Kompetenz – eine besonders schonende und effektive Patientenversorgung

Die Sportklinik Hellersen erweitert ihr Spektrum um modernste endoskopisch-minimalinvasive Eingriffe



Das Deutsche Wirbelsäulen- und Skoliosezentrum an der Sportklinik Hellersen wächst weiter: Seit Mitte des Jahres wird das Angebot um endoskopisch-minimalinvasive Wirbelsäuleneingriffe erweitert. Die Sportklinik Hellersen baut damit die Spezialisierung im Bereich der Speziellen Wirbelsäulenchirurgie gezielt aus – mit einem Verfahren, das besonders gewebeschonend und patientenfreundlich ist.

Neben den bewährten mikroskopisch-minimalinvasiven Verfahren an der Hals-, Brust- und Lendenwirbelsäule kommen modernste endoskopische Techniken zum Einsatz. So können unter anderem Bandscheibenvorfälle, Nervenwurzelkompressionen und Spinalkanalstenosen endoskopisch operiert werden. Ebenso bestimmte Formen von Wirbelkörpergleiten, degenerative Skoliosen und osteoporotische Frakturen an der Wirbelsäule – ein entscheidender Fortschritt für die Versorgung komplexer Krankheitsbilder.

„Durch das endoskopische Verfahren ergänzen wir gezielt unser bestehendes Portfolio – dieses ermöglicht uns, für bestimmte Indikationen noch schonendere Eingriffe anzubieten. Entscheidend ist dabei unser interdisziplinärer Ansatz: Durch die enge Zusammenarbeit spezialisierter Fachrichtungen können wir für jede Patientin und jeden Patienten eine individuell abgestimmte, qualitativ hochwer-

tige Behandlung gewährleisten“, sagt Dr. Oliver Meier, Chefarzt für Spezielle Wirbelsäulenchirurgie im Deutschen Wirbelsäulen- und Skoliosezentrum an der Sportklinik Hellersen. Eigens für dieses neue Verfahren wurde das Team der Speziellen Wirbelsäulenchirurgie um weitere erfahrene Oberärzte ergänzt, die eng mit den bewährten Experten des Fachbereichs zusammenarbeiten.

„Diese Innovation ist ein strategischer Meilenstein für unsere Klinik und verschafft uns in dieser einzigartigen Kombination eine Vorreiterrolle, die nationale wie internationale Beachtung findet.“

Dirk Burghaus

Vorstandsvorsitzender der Sportklinik Hellersen

Ein wesentlicher Vorteil des endoskopischen Verfahrens ist die schonende Vorgehensweise: Ein lediglich 8 Millimeter kleiner Hautschnitt genügt – Muskulatur und stabilisierende Strukturen bleiben weitgehend unversehrt. Dies ermöglicht eine schnellere Rehabilitation der Patienten.

„Diese Innovation ist ein strategischer Meilenstein für unsere Klinik und verschafft uns in dieser einzigartigen Kombination eine Vorreiterrolle, die nationale wie internationale Beachtung findet“, sagt Dirk Burghaus, Vorstandsvorsitzender der Sportklinik Hellersen. „Gerade heute suchen Patientinnen und Patienten gezielt nach sanften, aber hochwirksamen Behandlungsmethoden. Wir bieten ihnen eine moderne Lösung – und stärken zugleich unsere Rolle als spezialisiertes Zentrum für Wirbelsäulen- und Skoliosechirurgie.“



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Eine gerade einmal 8 mm kleiner Schnitt bei einer größtmöglichen Wirkung. Das minimalinvasive-endoskopische Operationsverfahren ist sanft, gewebeschonend und patientenfreundlich. Mehr über diese Technik erfahren Sie in unserem Video auf Youtube.



Aus dem Fachbereich

Spezielle Wirbelsäulenchirurgie

Chirurgische Präzision trifft internationales Publikum

Wirbelsäulenchirurgen der Sportklinik Hellersen
operieren live auf Kongress in China



Wenn es um moderne Behandlungskonzepte bei Skoliose geht, gehört das Deutsche Wirbelsäulen- und Skoliosezentrum der Sportklinik Hellersen zu den führenden Einrichtungen in Deutschland. Diese Expertise findet auch internationale Anerkennung: Chefarzt Dr. Oliver Meier, Liang Zhou, Leitender Oberarzt der Speziellen Wirbelsäulenchirurgie, und eine operationstechnische Assistentin der Sportklinik Hellersen besuchten als geladene Gäste den renommierten Fachkongress im Wuhan in China.

Im Mittelpunkt des „Deutsch-Chinesischen Forums über die Entwicklung der Diagnose und Behandlung von Wirbelsäulendeformitäten bei Kindern“ standen innovative Therapieansätze. Zu den Kongress-Teilnehmern zählten führende Wirbelsäulenspezialisten aus chinesischen Metropolen sowie renommierte Vertreter internationaler Fachgesellschaften – darunter auch der designierte Vorsitzende der Scoliosis Research Society, eine weltweit führende Wirbelsäulengesellschaft.



„In der Live-Operation konnten wir zeigen, wie wir mit modernen chirurgischen Techniken und höchsten Qualitätsstandards operieren.“

Dr. Oliver Meier

Chefarzt der Speziellen Wirbelsäulenchirurgie
am Deutschen Wirbelsäulen- und Skoliosezentrum

Ein Höhepunkt des Kongresses war eine Skoliose-Operation, die Dr. Oliver Meier und Liang Zhou gemeinsam bei einer chinesischen Patientin durchführten. Der Eingriff wurde live übertragen und gewährte dem internationalen Fachpublikum unmittelbare Einblicke in die chirurgische Vorgehensweise des deutschen Teams. „In der Live-Operation konnten wir zeigen, wie wir mit modernen chirurgischen Techniken und höchsten Qualitätsstandards operieren“, erklärt Dr. Oliver Meier. Für einen reibungslosen Ablauf war die Unterstützung der mitgereisten operationstechnischen Assistentin der Sportklinik Hellersen entscheidend. „Unsere Technik erfordert das freie Setzen der Schrauben – das funktioniert nur mit einem eingespielten Team“, betont der Chefarzt der Speziellen Wirbelsäulenchirurgie. Die Präzision und Effizienz des OP-Teams stießen bei den chinesischen Gastgebern auf große Anerkennung – ein deutliches Zeichen für den hohen Stellenwert der Chirurgen der Sportklinik Hellersen im internationalen Vergleich.



Der viertägige Kongress stand ganz im Zeichen des fachlichen Austauschs über aktuelle Ansätze in der Diagnose und Behandlung kindlicher Wirbelsäulendeformitäten. In mehreren Fachvorträgen stellten die Wirbelsäulenspezialisten der Sportklinik Hellersen bewährte und weiterentwickelte Behandlungskonzepte bei neuromuskulären und frühkindlichen Skoliosen vor.

Besonderes Interesse weckte der vorgestellte Einsatz magnetisch gesteuerter mitwachsender Implantate – ein innovatives Verfahren, bei dem die Lüdenscheider Spezialisten über ausgewiesene operative Expertise verfügen.

In Fallbesprechungen wurden verschiedene Behandlungsansätze anhand konkreter Patientenbeispiele diskutiert. Während Dr. Oliver Meier und Liang Zhou abgeschlossene Fälle präsentierten, brachten die chinesischen Kollegen offene Fallverläufe ein – die Grundlage für den intensiven internationalen Dialog der Experten.

„Der direkte Vergleich unterschiedlicher Vorgehensweisen in der Skoliosebehandlung bietet wertvolle Impulse für die Weiterentwicklung eigener Therapiekonzepte“, betont Dr. Oliver Meier und Liang Zhou ergänzt: „Im Rahmen des Kongresses wurden innovative zukunftsweisende Technologien vorgestellt, die das Potenzial haben, die chirurgische Präzision und Behandlungsqualität nachhaltig zu verbessern.“



„Im Rahmen des Kongresses wurden innovative zukunftsweisende Technologien vorgestellt, die das Potenzial haben, die chirurgische Präzision und Behandlungsqualität nachhaltig zu verbessern.“


Liang Zhou

Leitender Oberarzt der Speziellen Wirbelsäulenchirurgie
am Deutschen Wirbelsäulen- und Skoliosezentrum

Besonders beeindruckend für die Delegation der Sportklinik Hellersen war hingegen die Vorstellung einer 3D-Drucktechnologie für die OP-Planung. Bei schwierigen Fällen, wie etwa komplexen Wirbelsäulendeformitäten, können die chinesischen Kollegen patientenspezifische 3D-Schablonen erstellen, die für die präzise Planung der Operation verwendet werden. „Diese Technologie ermöglicht eine genaue und individuelle Planung der Eingriffe“, erklärt Dr. Oliver Meier.

Im Rahmen des Kongresses wurde zudem eine innovative KI-basierte Skoliose-App vorgestellt, entwickelt von einer Professorin aus Hongkong. Diese App bietet eine Möglichkeit für Eltern, selbst Übungen mit ihren Kindern zu Hause durchzuführen und den Fortschritt durch das Hochladen von Bildern

zu überwachen. Über die App können die Daten direkt an die Klinik weitergeleitet werden, wodurch Nachuntersuchungen nicht mehr zwingend vor Ort im Krankenhaus stattfinden müssen. Die App erkennt zudem frühzeitig Anzeichen von Skoliose und wird mittlerweile in allen Schulen und von Eltern in Peking genutzt. „Das war schon Zukunftsgeschichte“, berichtet Dr. Oliver Meier begeistert von seinen Eindrücken.

Gleichzeitig bestätigen die vorgestellten Ansätze den Weg, den die Sportklinik Hellersen bereits konsequent verfolgt: digitale und präventive Entwicklungen frühzeitig aufzugreifen und gezielt in die Versorgung zu integrieren – immer mit dem Anspruch, die Behandlungsqualität stetig weiterzuentwickeln. 



Spitzenexpertise der Sportklinik Hellersen trifft medizinische Pionierarbeit in Libyen

Zeyad Langhi, Oberarzt im Deutschen Wirbelsäulen- und Skoliosezentrum der Sportklinik Hellersen, versorgt ehrenamtlich Patienten in seinem Heimatland



Oberarzt Zeyad Langhi gemeinsam mit Dr. Oliver Meier, Chefarzt der Speziellen Wirbelsäulenchirurgie im Deutschen Wirbelsäulen- und Skoliosezentrum, in der Sportklinik Hellersen.

Wenn Zeyad Langhi in sein Heimatland Libyen reist, packt er nicht nur Kleidung und Geschenke für seine Familie ein – sondern auch die Erfahrung aus fast zwei Jahrzehnten Wirbelsäulenchirurgie in Deutschland.

Was für viele ein gewöhnlicher Heimaturlaub wäre, wird für ihn zur medizinischen Lebensmission.



Allein bei seinem letzten Besuch suchten 200 Menschen seinen Rat.



Zeyad Langhi ist Oberarzt für Spezielle Wirbelsäulenchirurgie am Deutschen Wirbelsäulen- und Skoliosezentrum an der Sportklinik Hellersen. Geboren in Libyen, kam er 2005 nach Deutschland, ursprünglich mit dem Ziel der fachlichen Weiterbildung. Heute ist er nicht nur ein geschätzter Wirbelsäulenspezialist in Deutschland, sondern auch Hoffnungsträger für hunderte Patienten in seinem Heimatland – besonders im strukturschwachen Süden Libyens.

Engagement aus Überzeugung

Seine Frau und seine Kinder leben mittlerweile wieder in Libyen. Zwei bis drei Mal im Jahr reist er für einige Wochen zu ihnen und nutzt die Zeit ebenfalls, um sich um die medizinische Versorgung in seiner Heimat zu kümmern. „Ich kenne die Menschen dort und habe selbst früher im Krankenhaus gearbeitet“, berichtet Zeyad Langhi. Nach seinem Medizinstudium war er zweieinhalb Jahre in Libyen als Arzt tätig. Seit rund sechs Jahren verbindet er die Reise zu seiner Familie, um dort zu helfen, wo Hilfe dringend gebraucht wird. Vor Ort bietet er ehrenamtlich Sprechstunden an. Allein bei seinem letzten Besuch suchten 200 Menschen seinen Rat. Die Patienten kommen teilweise mit hochkomplexen Beschwerden, weil sie von der Expertise des Spezialisten wissen – und viele möchten sich auch direkt von ihm operieren lassen.

Die Voraussetzungen vor Ort sind jedoch alles andere als einfach: Im Süden des Landes fehlt es an Fachärzten, Ausrüstung und funktionierender Infrastruktur. Lediglich eine allgemeine Grundversorgung ist gegeben. „Große komplexe orthopädische Eingriffe sind dort nicht möglich – die Patienten müssen dazu in den Norden reisen, zum Beispiel nach Bengasi“, erklärt der Oberarzt der Sportklinik Hellersen. Auch er selbst operiert seine libyschen Patienten in Bengasi – sowohl in privaten als auch staatlichen Kliniken. Der Bedarf ist groß, ebenso das Vertrauen: „Die meisten Patienten kommen auf Empfehlung – jedes Jahr werden es mehr“, sagt er. Während Zeyad Langhi sich in der Sportklinik Hellersen auf die Spezielle Wirbelsäulenchirurgie spezialisiert hat, reicht sein Operationsspektrum in der medizinischen Unterstützung in Libyen von endoprothetischen Eingriffen über Arthroskopien bis hin zu komplexen Wirbelsäulenoperationen und der Versorgung schwerer Unfallverletzungen sowie Traumarevisionen. Unterstützt wird er bei der Planung der Sprechstunden und Operationen vor Ort von seinem Neffen und dessen Frau, die ebenfalls Ärztin ist.

„Ich kenne die Menschen dort und habe selbst früher im Krankenhaus gearbeitet.“

Zeyad Langhi
Oberarzt Spezielle Wirbelsäulenchirurgie im
Deutschen Wirbelsäulen- und Skoliosezentrum



Die Patienten kommen teilweise mit hochkomplexen Beschwerden, weil sie von der Expertise des Spezialisten wissen – und viele möchten sich auch direkt von ihm operieren lassen.

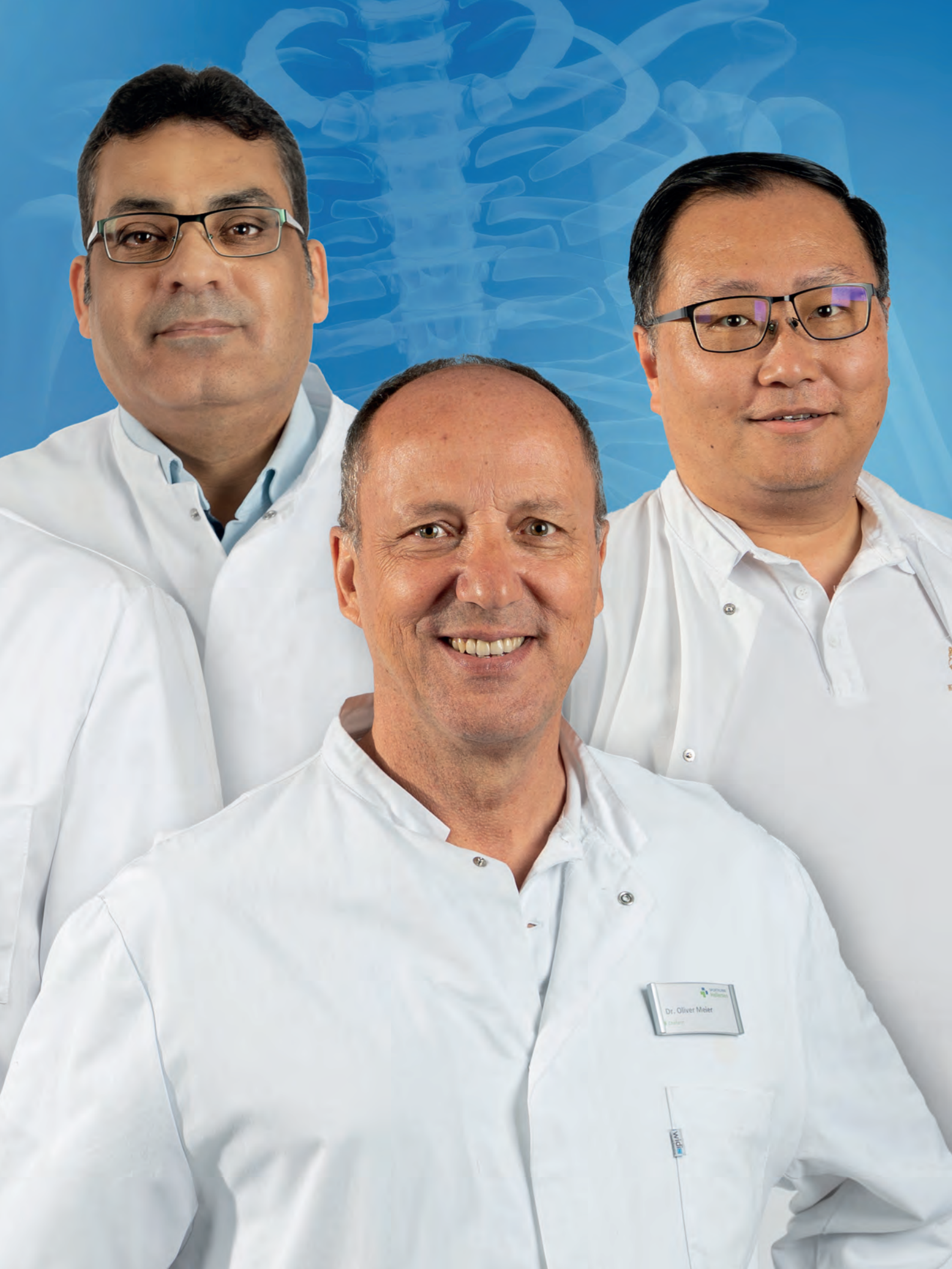


Ein Arzt, zwei Heimaten – und eine Mission

2005 kam Zeyad Langhi für ein Stipendium nach Deutschland und war am Klinikum in Bonn Bad Godesberg tätig. Er wollte sich im Bereich Orthopädie und Unfallchirurgie weiterbilden. Nach dem Ende des Stipendiums 2012 verhinderte der Krieg in Libyen seine Rückkehr – Zeyad Langhi blieb in Deutschland. In der Werner-Wicker-Klinik in Bad Wildungen spezialisierte er sich unter der Leitung von Dr. Oliver Meier, heute Chefarzt an der Sportklinik Hellersen, auf die Wirbelsäulenchirurgie. Es folgten zehn Jahre am Klinikum Bielefeld, zuletzt als Kommissarischer Leiter. Seit Juni 2024 ist er Oberarzt am Deutschen Wirbelsäulen- und Skoliosezentrum der Sportklinik Hellersen – und ein Beispiel dafür, wie internationale Expertise Patienten weltweit zugutekommen kann.

Vita Zeyad Langhi

- 1995-2001 Medizinstudium in Bengasi in Libyen
- 2002-2005 Aljala Krankenhaus Libyen
- 2005 Stipendium in Deutschland, in Bonn Bad Godesberg
- 2007-2012 Klinikum Bielefeld
- 2012-2014 Werner-Wicker-Klinik Bad Wildungen
- 2014 Oberarzt und Sektionsleiter Wirbelsäulenchirurgie Klinikum Bielefeld und seit 2023 Kommissarischer Leiter
- Seit Juni 2024 Oberarzt der Speziellen Wirbelsäulenchirurgie im Deutschen Wirbelsäulen- und Skoliosezentrum an der Sportklinik Hellersen





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