

Thinking further together

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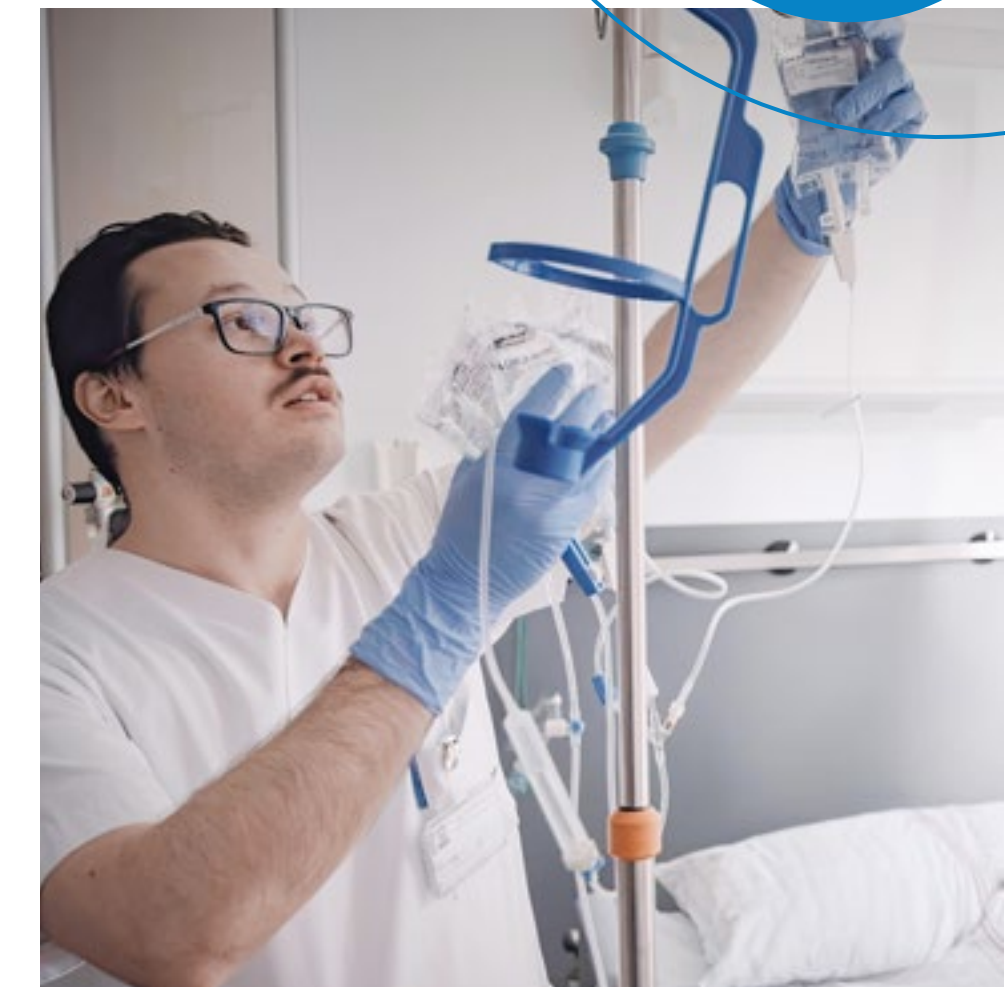
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Milestones

What shaped 2025? And what are the developments shaping the future of cancer medicine in the WTZ Consortium? Prof Annalen Bleckmann, Director of WTZ Münster, and Prof Dirk Schadendorf, Director of WTZ Essen, join General Managers Prof Philipp Lenz and Dr Stefan Palm in looking back at the key examples of progress achieved last year.



The beginning of our second funding period as an Oncological Center of Excellence marks a new chapter for WTZ. Building on the recommendations made by our international Scientific Advisory Board, we are continuing to develop our strategic cooperation – including collaboration with initiatives such as NCT West.”

Prof Dirk Schadendorf

In the wake of the programme of structural reforms being planned for hospitals, the central role played by university cancer centers in providing top-rate cancer care is absolutely clear. As an Oncological Center of Excellence we pool expertise, research and care and, in doing so, we perform a vital function as an anchor when working together with partner clinics in the region. For this to continue in the long term, appropriate funding is needed urgently.”

Prof Annalen Bleckmann





Through our involvement in the European EUnetCCC initiative, we are contributing our experience in the WTZ Consortium to the process of building up a pan-European network of Comprehensive Cancer Centers. We have established a high level of quality in cancer care here, and the aim is to make this available to other countries, too, in the long term."

Prof Philipp Lenz



At both our locations, patient involvement is an integral part of modern cancer medicine. In 2025, through the joint Patients Advisory Committee, patients played an active role in research projects or initiatives such as OncoPartner."

Prof Dirk Schadendorf



The evolution of WTZ from a single-site center into a multi-site network is an experience which other institutions in Europe can benefit from. Our partner center in Slovenia, established in 2025, represents a big step towards the harmonisation of cancer care in Europe."

Dr Stefan Palm



If applications involving artificial intelligence (AI) are to function properly in oncology, one thing in particular is necessary: high-quality, well-structured data. In 2025 we made substantial progress in standardising our clinical data, making them accessible and embedding them in a high-performance infrastructure. This is the only way to tap systematically into the potential which data and AI offer for cancer medicine.”

Dr Stefan Palm



As an acknowledged service provider in the genome sequencing pilot project, we took a major step forward in precision oncology in 2025. By means of a systematic molecular analysis of tumours, we can tailor therapies more and more precisely to the needs of individual patients. This is a decisive step on the way towards personalised cancer medicine. Through our participation in the pilot project, we are making a key contribution to making genomics part of standard care.”

Prof Annalen Bleckmann



With the establishment of a professorship for Palliative Medicine in Essen in 2025 we gave an important impetus to research for the good of seriously ill patients. Our joint research projects aim at innovative measures which have regard to the quality of life of the patients entrusted to us.”

Prof Philipp Lenz

New strategies in the WTZ Consortium provide optimum patient care and strengthen cancer research

International assessment, structural consolidation and a translational orientation

The WTZ Consortium is systematically preparing itself for the future – with an excellent assessment carried out by a top-class international Scientific Advisory Board, with new faces on the board in Essen, and with strategic initiatives such as access to the NCT-wide OCT² study programme, as well as to the genome sequencing pilot project. The aims are threefold: to transfer innovative research faster to clinical applications, to continue the harmonisation of cross-locational structures and to provide patients with even better access to personalised therapies.

Confirmation for WTZ after international assessment

A major event last year was the meeting of the Scientific Advisory Board (SAB) in November in Essen. Eight internationally acknowledged experts assessed the structures, the key performance indicators and the strategic perspectives of the WTZ Consortium. For Prof Jens Siveke, Medical Director at WTZ Essen, the feedback was unmistakable:



The WTZ Consortium stands for excellent oncology closely linked to research and care. With a clear strategic orientation, and with close cooperation between Essen and Münster and the region we cover, we are creating structures for best possible patient care which are setting standards both nationally and internationally.”

Prof Alex W. Friedrich
Medical Director and Chairman of the Board of UKM

“In comparison with the last wide-ranging assessment, we see a clear step forward in our development. In areas such as patient numbers and clinical studies we are on a par with leading European cancer centers.” Aspects that were given a particularly positive assessment were the smooth-running collaboration between WTZ Essen and WTZ Münster, the transparency of the key performance indicators and the clearly defined and successful entity programmes.

The SAB identified the multimodal depth of patient care as a particular strength. “At both our locations we have at our disposal the entire spectrum of highly specialised diagnostics and therapies – from ultra-modern imaging to complex surgical and radio-oncological procedures. This is by no means a matter of course when we look at other countries,” says Prof Annalen Bleckmann, Director of WTZ Münster. Specific focuses were also clearly named: digital oncology, immuno-oncology and radioligand therapy are seen as strategic flagship areas. The SAB considers the WTZ’s existing strong and highly supra-regional focus on rare tumours to be important and capable of further development, and here it recommends a more systematic involvement of international consortia.



Prof Dirk Schadendorf
Director and Chairman
of the Board of WTZ Essen

Strong leadership for a strong network

The WTZ sets off into the next phase of its development with key decisions regarding personnel and strategy. At WTZ Essen, Prof Angelika Eggert, an acknowledged oncology expert, returns to take up the position of Medical Director. She had already left her mark on the WTZ in earlier years and, before moving to Essen, held a leading position for many years at the Charité Hospital in Berlin. “With her scientific expertise and her clear oncological profile, Professor Eggert will play a decisive role in shaping the strategic orientation of



Prof Annalen Bleckmann
Director of WTZ Münster

our location,” says Prof Dirk Schadendorf, Director of WTZ Essen. An additional appointment to the Essen Board is the new Commercial Director, Dr Johannes Hütte.

Münster is characterised by continuity. The medical and commercial members of the Board were confirmed in their posts. “This stability enables us to plan securely for the coming years, and it strengthens the strategic further development of the network,” says Bleckmann.



“We have set ourselves the aim of getting innovations faster to patients – through strong networks, study programmes focusing on translation, and the systematic promotion of personalised medicine.”

Prof Angelika Eggert
Medical Director and Chairwoman
of the Board of UME



Prof Jens Siveke
Medical Director of WTZ Essen

Genome sequencing pilot study: precision medicine in the network

Participation in the national pilot study titled “Genome Sequencing – Oncological Diseases” represents a milestone in personalised oncology. The certified Center for Personalised Medicine at WTZ Münster had already been selected in 2025 to take part in the pilot study being funded by the German statutory health insurance funds. After the successful accreditation of its Pathology Department in 2025, WTZ Essen is likewise involved in the pilot study from 2026, contributing its expertise in the field of oncological diseases. Beckmann describes the clinical dimension thus: “By means of comprehensive molecular analyses we are increasingly able to adapt therapies to individual genetic changes in a tumour. For many patients, this opens up options which go beyond standard therapies.” As Schadendorf adds, “It is very gratifying that such far-reaching diagnostics can now be offered to patients at both WTZ locations, with the result that access to enhanced molecular diagnostics can be further harmonised there.”

Bridge to the NCT: access to the OCT² programme

Of strategic importance is the opening up of the National Center for Tumor Diseases (NCT) to non-associated Comprehensive Cancer Centers (CCC). From 2026, the Overarching Clinical Translational Trial Program (OCT²) provides for non-NCT CCCs to participate in NCT studies as recruiting centers. “This is a great opportunity for WTZ Münster,” says Prof Georg Lenz, Scientific Director of WTZ Münster. “Through its participation in the programme, it offers Comprehensive Cancer Centers which are not part of the NCT the opportunity to work with others and push forward with industry-independent questions and thus open up access for patients to innovative therapies.” Looking to the future, there are even provisions for taking on a leadership role in studies – if there is appropriate co-funding on the part of the federal states or universities.



Dr Johannes Hütte
Commercial Director on the Board of UME



Prof Georg Lenz
Scientific Director of WTZ Münster

Summer retreat: strategy in dialogue

The continuous development of strategies takes place not only in committee meetings. This was shown in 2025 by the first joint summer retreat held at WTZ Münster. In addition to a scientific programme with cross-locational content from all entity programmes, the focus was on informal discussions. “We presented not only status reports but also key issues for the future – jointly, transparently and with a view to synergies,” as Siveke emphasises. Bleckmann adds: “The retreat and the summer party afterwards strengthened the network at a personal level, too, as well as promoting junior researchers. With two strong locations such as we have, coming together in this way plays a decisive role.”



Discussions played a central role in the first summer retreat held by the WTZ Consortium.

Excellent

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Nuclear medicine in the WTZ Consortium

Joint research successes, new guidelines and therapies: milestones in a dynamic year of innovation

Essen and Münster joined forces to advance nuclear medicine – from the internationally acclaimed PROMISE study and the very latest imaging processes to new therapeutic approaches and ambitious new buildings. A glance back at the year 2025 shows how rapidly research and patient care are both growing.

What milestones at both locations can nuclear medicine in the WTZ Consortium point to?

Prof Wolfgang Fendler, a consultant at the Clinic for Nuclear Medicine at UME: Something that is particularly worthy of mention here is certainly the **PROMISE** initiative carried out by Essen and Münster: for this study we evaluated the PSMA-PET scans of over 15,000 patients, from more than 50 centers worldwide, in order to be able to make even more precise predictions regarding the course that prostate cancer can take and then apply therapies more individually. This project meant that we were not only awarded funding from the German Research Foundation but also received the German University Medicine Prize for 2025.

Prof Kambiz Rahbar, General Manager and Senior Physician at the Clinic for Nuclear Medicine at UKM:

Moreover, within 12 months the study was published twice in “European Urology” and once in “Lancet Oncology”. In addition to this, we were members of the committee of experts working on a revised version of the S3 Guideline on Prostate Carcinomas published in 2025.

For years now, WTZ Essen and WTZ Münster have been collaborating closely, both benefiting from one another’s research results. What topics did you push ahead with in particular in 2025?

Prof Wolfgang Fendler: Both locations are working on new radioligands which embed themselves in the connective tissue of tumours. Radiation makes possible an effective therapy, as well as precise diagnostics – so-called theranostics. This enables us to show where tumour cells are located in the body and, in particular, to treat tumours in this connective tissue – so-called sarcomas. In 2025 we became part of an EU HORIZON research consortium which will be undertaking clinical tests on this new therapy for the first time.



The close cooperation which exists between Essen and Münster enables us to make progress which would not be possible for one location to make by itself.”

Prof Kambiz Rahbar
General Manager and Senior Physician
at the Clinic for Nuclear Medicine at UKM

Nuclear medicine is a key driver of innovation in the WTZ Consortium. It combines high-precision imaging with new therapeutic processes, thus making possible individual and effective cancer treatment.”

Prof Wolfgang Fendler
Consultant at the Clinic for Nuclear Medicine,
Translational and Oncological Research at UME

Prof Kambiz Rahbar: In Münster, radioligand therapy to treat metastasised prostates is still creating a stir. The therapy, which was approved in 2022, relies on small molecules forming a bond with the surface of prostate tumours and metastases. If we mark them with radioactive Lutetium-177, they have the effect of targeted internal radiation directly at the tumour cell.

Prof Wolfgang Fendler: These therapies are excellent examples of the rapid transfer of research results to effective methods of treatment. One aim we have in working together is to build a bridge between experimental research and innovative therapies by quickly transferring new methods learned in radiopharmaceutical research to work carried out in hospitals.

As an Oncological Center of Excellence, WTZ uses the most up-to-date high-tech equipment – from PET-CT and PET-MRI to SPECT-CT. Are there plans to extend this?

Prof Kambiz Rahbar: A total-body PET scanner was installed at Münster in 2025. This is able to create three-dimensional images of almost the entire human body simultaneously. This means fast scanning and a marked reduction in exposure to radiation: instead of, typically, 20 to 25 minutes, the patient is inside the scanner for only a few minutes – with improved image quality. Also, a scan can be carried out while, and after, the radiopharmaceutical is injected. As a result, dynamic processes can be better recorded and quantified. Moreover, the new cyclotron in the Multiscale Imaging Centre (MIC) will be going into

operation in 2026, producing new isotopes for the PET. These, in connection with the total-body PET scanner, will, in particular, enable later scans to be carried after an injection.

Prof Wolfgang Fendler: At Essen University Hospital, nuclear medicine and radiopharmacy will come together in the future in a new Center for Nuclear Medicine. The most up-to-date diagnostics and high-quality inpatient care for cancer patients will be brought together and expanded. The new building is due to open in 2026.

Which highlight are you looking forward to in 2026?

Prof Kambiz Rahbar: In 2026 the annual meeting of the German Nuclear Medicine Society will be taking place at WTZ Münster. The motto will be “Preserving Traditions – Shaping the Future”, with more than 2,000 participants shaping Europe’s largest national platform for exchanges and discussions revolving around nuclear medicine: an ideal setting for exchanging ideas, meeting other people and learning together.



The total-body PET scanner, which was installed at Münster in 2025, is able to create three-dimensional images of almost the entire human body simultaneously.



The new building housing nuclear medicine at University Medicine Essen will be opened in June 2026.

NCT West: Speeding up translation, facilitating innovation

In NCT West, WTZ Essen and CIO Cologne are pooling their complementary strengths in top-level cancer research

The National Center for Tumour Diseases (NCT) is a long-term cooperation between the German Cancer Research Center (DKFZ), excellent partners in university medicine and other outstanding research partners at a variety of locations in Germany. The NCT's objective is the rapid, systematic transfer of innovations in cancer research in Germany to studies with the aim of successfully diagnosing cancer, in line with the latest research, and to treat it while preserving a high quality of life. In this, patients are research partners on an equal footing.

Building on the research structures already established in the joint Cancer Research Center Cologne Essen (CCCE), the West German Cancer Center (WTZ) Essen and the Center for Integrated Oncology (CIO) at University Hospital Cologne together form NCT West – a high-performance clinical trial ecosystem which systematically funds non-commercial studies enables patients to have early access to new methods of diagnosis and treatment. “NCT West is an instrument not only for developing good ideas but

also for incorporating them reliably in applications benefiting patients,” says Prof Martin Schuler, spokesperson for the NCT West at Essen Campus and Director of the Clinic for Internal Medicine (Cancer Research) at UME. In particular when the NCT was being built up, says Schuler, it was of decisive importance to continue focusing on the development of existing research strengths and, at the same time, on the creation of new structures for future studies.

ESPADURVA: NCT West's first bridging study

One visible result of this approach is the ESPADURVA study, headed by WTZ, which was the first NCT bridging study that was able to complete recruiting in 2025. Bridging studies serve to bridge the time between the beginning of new NCT structures and the approval for ideas for new studies. For this purpose, studies are submitted which are currently

running or which have already been planned and whose content clearly corresponds to the NCT's aims.

ESPADURVA is studying a highly complex, multi-modal therapy concept for locally advanced lung carcinomas. In the process, radiation, chemotherapy, operation and modern immunotherapy interact with a high degree of precision. “Our aim is to continue to improve local tumour control and, at the same time, reduce the risk of distant metastases,” explains Prof Martin Stuschke, Director of the Clinic for Radiation Therapy at UMW. The immunotherapy functions as additional therapeutic support and is intended to increase the successes achieved so far in any treatment.



With NCT West we are creating an environment in which innovative clinical studies are not the exception but the rule – for the direct benefit of patients.”

Prof Martin Schuler
Director of the Clinic for Internal Medicine (Cancer Research) at UME



Prof Martin Stuschke
Director of the Clinic for Radiation Therapy at UME



Prof Andreas Rink

Head of the Department of Minimally Invasive Oncological Surgery at the Clinic for General, Visceral, Vascular and Transplant Surgery at UME

The study continues a long tradition of research at WTZ Essen and is being carried out in close cooperation with other experienced centers. As a result of the involvement in NCT, it was possible to expand the study network and successfully complete the recruitment despite some pandemic-related delays. “Ambitious concepts such as these can only be put into practice in specialised centers with well-functioning interdisciplinary teams,” says Stuschke. The results are currently in the process of being evaluated.

LEONORA: A study with quality of life as its central aim

While ESPADURVA represents a successful bridging study, the LEONORA study exemplifies the new generation of studies which were initiated directly out of the NCT. The focus here is on the quality of life of patients with colorectal tumours after they have undergone surgical therapy. In a randomised design, the studies look at whether the targeted use of pro- and prebiotics can improve the post-operative quality of life. “From an oncological point of view, we have made enormous progress, and this makes it all the more important now to focus more strongly on functional limitations and long-term pressures,” explains Prof Andreas Rink, Head of the Department of Minimally Invasive Oncological Surgery at the Clinic for General, Visceral, Vascular and Transplant Surgery at UME.

LEONORA has an interdisciplinary character and includes not only clinical parameters but also translational questions such as those relating to the development of microbiomes and to immune status. For example, Rink has included in the study patients with so-called LARS syndrome, which is the malfunctioning of the bowel after the rectum has been removed. “Especially here there are indications that the microbiome might play an important role, and we are now systematically testing this hypothesis,” says Rink. The study was developed together with patients, and it is a good example of how patient involvement is practised at NCT.

Onco-Talk NRW: Discussing excellent cancer work with the public

In addition to funding innovative studies, NCT West also sees itself as a platform for spreading knowledge and entering into a dialogue with the public. Its series of top-class events, under the heading “Onco-Talk NRW” (*North Rhine-Westphalia*), was established in close cooperation with CIO Cologne and the NRW Ministry of Education and Science. The events are aimed specifically at attracting public interest in order to discuss the latest achievements and approaches on an equal basis with those attending. Taking the form of a discussion group directed by a moderator, the talks focus on major topics in modern oncology – science-based and at the same time easy-to-understand – ranging from new methods of treatment to Artificial Intelligence in the media and questions of personalised cancer therapies. “What is important for us,” Schuler explains, “is to make the progress achieved in research and hospital work transparent for members of the public and to enter into a dialogue with them face to face. The events are held several times a year, alternately in Essen and Cologne. Attendance is free of charge, and the events have proved highly popular.



NRW's Minister of Science Ina Brandes, Prof Martin Schluter (Deputy Director WTZ Essen) and Prof Michael Hallek (Director CIO Cologne) discuss progress in cancer research..

Well-positioned

A selection of new appointments in the WTZ Consortium



Prof Dominic Winter was awarded a Heisenberg professorship by the German Research Foundation with effect from 1 April 2025. Since then he has been Professor of Oncological Proteo-Metabolomics at the University of Duisburg-Essen. At University Hospital Essen he is researching into rare diseases and the role played by lysosomes, the cell's "recycling centers". After studying biotechnology he was awarded his PhD at the Harvard Medical School. Later he headed a research group at the University of Bonn. Winter's work combines state-of-the-art mass spectrometry with molecular-biological methods, with the aim of understanding how malfunctioning degradation processes contribute to the development of cancer. The aim is to identify new points of attack for therapies and to gain a better understanding of rare forms of cancer.



Prof Dana Branzei was awarded a Humboldt professorship by the Alexander von Humboldt Foundation in 2025, which she took up on 1 April 2025 at the University of Duisburg-Essen. The internationally renowned molecular biologist is undertaking research into how DNA repairs and chromosome structure interact, thereby assuring the stability of the genetic material. Previously, she worked in Italy for many years as a researcher and a (tenured) group leader; she is also a member of the European Molecular Biology Organization. At the Research Center One Health Ruhr, Branzei is studying in particular how cells recognise and rectify DNA damage during the replication of genetic material. The aim of her work is to gain a better understanding of the fundamental mechanisms involved in the development of cancer and to identify new approaches for treatments.



Junior Prof Selina Kathleen Jorch has, since April 2025, been a (W1 tenure track) Junior Professor of Pathophysiology and Plasticity of Inflammation, Infection and Resolution at the Clinic for Anaesthesiology, Operative Intensive Medicine and Pain Therapy at UKM. She studied for a bachelor's degree in Biology at the University of Gießen and took her master's degree in Molecular Biomedicine at the University of Münster, where she completed her PhD in the Department of Immunology. After this, she worked as a postdoc at the Snyder Institute for Chronic Diseases at the University of Calgary in Canada before subsequently heading a group of junior researchers at the "ImmunoSensation2" Cluster of Excellence at the University of Bonn.

In her work, Prof Jorch carries out research into the dynamics of the immune system in cases of inflammation and infection. Using high-resolution microscopic processes, her working group visualises the behaviour of immune cells directly in the tissue. The focus is on monocytes, macrophages and neutrophil granulocytes during bacterial infections or auto-inflammatory diseases. Her work contributes to a better understanding of fundamental mechanisms in inflammatory reactions – processes which also play a key role in tumour diseases.



Prof Alpaslan Tasdogan is Professor of Tumour Metabolism at the University of Duisburg-Essen and undertakes research at WTZ Essen into the metabolic mechanisms of melanomas. In 2025 he was awarded the Fleur Hiege Memorial Prize, which is presented in recognition of outstanding scientific work in the field of skin cancer research – in Tasdogan’s case especially for his research into the role played by mitochondrial DNA in the metastasis of melanomas, which has opened up new approaches for possible treatment. After research stays in the USA he came back to Germany through a NRW returnee programme and, in late 2021, he set up his own group of junior researchers in Essen which was funded by an Emmy Noether programme of the German Research Foundation (DFG) and by an ERC Starting Grant. The aim of his work is to gain a better understanding of cancer cells and, from this, to derive new therapies to tackle them.



Prof Mitra Tewes was appointed Professor of Palliative Medicine at the University of Duisburg-Essen from 1 April 2025, receiving a W3 (highest level) professorship at the Faculty of Medicine. This is the first time that this professorship has been instituted, and it not only strengthens the structures of palliative medicine at WTZ but will also expand palliative medicine as a central element in patient care, teaching and research. Tewes has been working in the field of palliative care for many years now. She combines clinical expertise with a scientific approach and is especially involved in the continued development of patient-centred care models. In her work she also focuses on digital innovations in palliative medicine with the objective of further improving ways of looking after patients. Her aim is to make palliative care more visible – both nationally and internationally – and to provide more input for research and teaching.



Prof Esther Pogatzki-Zahn has, since February 2025, been Professor (level W3) of Pain Research at the Clinic for Anaesthesiology, Operative Intensive Medicine and Pain Therapy at UKM, where she works as a pain specialist and also heads the “Translational Pain Research” working group. After studying medicine and completing her specialist training in anaesthesiology, she has been working at UKM for many years now, undertaking both research and clinical activities and playing a decisive role in developing pain research in Münster.

Her research deals with peripheral and central mechanisms in pain development and with the chronification of pain. There is a focus in particular on post-operative, tumour-related and neuropathic pain, as well as on gender-specific aspects of pain medicine. In her work she combines experimental and clinical methods in order to carry out translational studies of the mechanisms of how pain arises. The aim is to detect risk factors at an early stage and to develop new strategies for prevention and therapy – also in order to improve care for patients who suffer pain arising from tumours or after operations to treat their cancer.

Monthly highlights



January
The WTZ Patients Advisory Committee and the Project Team meet once every two weeks or so, spread over the year, **to prepare the OncoPartner programme.**

Click here for article: "Support on equal terms"



January
Prof Uta Dirksen, Vice-Director of WTZ Essen, is the new **President of the European Society for Paediatric Oncology (SIOP Europe)**



21.3.
3rd Westphalian Cancer Day: Under the motto "Creating Perspectives", the WTZ Consortium invites allcomers to Patients' Day in Münster, funded by German Cancer Aid

January

February

March

1.1.
The WTZ Consortium's INSPIRE app, **funded by German Cancer Aid**, provides support for cancer patients after their therapy in alleviating the mental and physical after-effects

20.1.
7th Ruhr Cancer Day: Patients' Day at the WTZ Consortium in Essen – the event is once again supported by German Cancer Aid



4.2.
UKM OnlineTalk on World Cancer Day: Fighting cancer with CAR T cells

March
The Federal Ministry of Education and Research supports AI project DECIPHER-M, in which the Institute for Artificial Intelligence in Medicine in Essen is involved. The aim of the project is to analyse the spread of tumours and to optimise cancer treatment.



March
A trio of researchers from Münster decode the strategies of lymphatic cancer cells and receive the Junior Researchers Prize from the German Childhood Cancer Foundation and the Society for Paediatric Oncology and Haematology (GPOH)



8.4. University Medicine Essen (UME) is again named by the EU as a **Reference Center for rare types of cancer.**



April
Cooperation Breast Cancer Center UKM – Clemens Hospital

May
Essen cardiology researchers involved in drawing up new **S3 Guideline for “Supportive Therapy for Cancer Patients”**



June
Distinction for Prof Walter Stummer, Director of the Clinic for Neurosurgery at UKM, who becomes the **new President of the German Academy for Neurosurgery (DANC)**

April

May

June



10.4. Palliative medicine celebrates ten years at **UKM**. A reading from the book project “Danke” (“Thank You”) opens the series of events



23.5. 4th patients’ event in the **“Onco Compass” series at WTZ Essen**; the motto is “Living with Polyneuropathy”

13.6. **WTZ benefit concert – the “Light of Life”** – with a baroque ensemble and French organ music at St. Lambert’s Church in Münster: an evening of fine music in support of palliative medicine at UKM



21.6. **Cancer and its treatments are the focus of the roadshow** on the market square in Warendorf commemorating “100 Years of University Medicine in Münster”



24.6.
2nd Essen Onco-Talk NRW on the topic
 “From Patient to Professional: Can patients really advance cancer research?” with NRW Science Minister Ina Brandes

28–29.8.
 Successful **conclusion of the comprehensive assessment at WTZ Essen by OnkoZert** on behalf of the German Hospital Federation



4.9.
First joint summer retreat of the WTZ Consortium is held in Münster
[Click here for article “New strategies in the WTZ Consortium”](#)



11.9.
 Running for a good cause:
FiFunRun supports “OncoCARE Plus” at WTZ Münster

June

August

September



23.8
20th Sarcoma Tour by WTZ Essen to support research into sarcomas – with a record amount of donations totalling 281,436 euros

6.9.
4th benefit regatta “Rowing to fight cancer” in Essen has a record number of participants – almost 80 teams – taking part in support of sport and exercise therapies at WTZ Essen



12.9
 WTZ Münster takes part in the **“Long Night of University Medicine 2025”**



19.9.
6th Essen Oncological Care Symposium, with Münster also taking part, on “Innovative Care for Cancer Patients: Forward-Looking Concepts and Best-Practice Solutions”

1.10.
Preview of the documentary film “Pink Power” in Münster’s Schloßtheater dealing with life with, and after, breast cancer



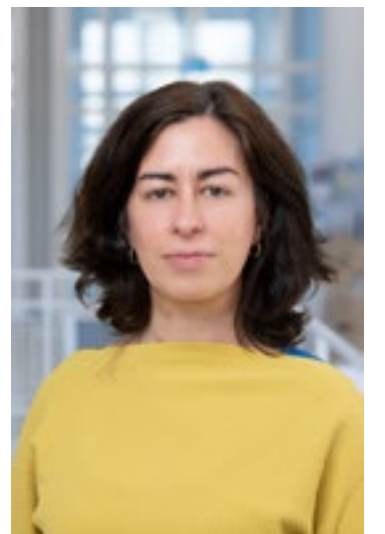
26.10.
 PROMISE study undertaken by the WTZ Consortium on the evaluation of PET images in cases of prostate cancer receives the **German University Medicine Prize for 2025.**

[Click here for article “Nuclear medicine in the WTZ Consortium”](#)



13.11.
NRW MPs Wibke Bruns and Mehrdad Mostofizadeh learn about data technology in cancer medicine at WTZ Essen and at the Institute for Artificial Intelligence in Medicine

December
 New **Heisenberg professorship**, funded by the German Research Foundation, for cancer researcher Dr Silvia Vega-Rubín-de-Celis



September

October

November

December



30.9.
 Accolade: Prof Hans Th. Eich, **Director of the Clinic for Radiation Therapy and Radiation Oncology at UKM**, is appointed as a Fellow at the 67th ASTRO annual congress in San Francisco.

1.10.
The Federal Joint Committee of German Public Health Agencies (G-BA) funds the BEPPO research project on exercise therapy for a better quality of life for children and adolescents with cancer



29.10.
7th Münster autumn symposium



17.11.
Scientific Advisory Board: eight internationally acknowledged experts assess structures, key performance indicators and strategic perspectives of the WTZ Consortium

[Click here for article “New strategies in the WTZ Consortium”](#)

27.11.
Research and cures – a discussion titled “From benign prostate illnesses to prostate cancer: everything a man should know”



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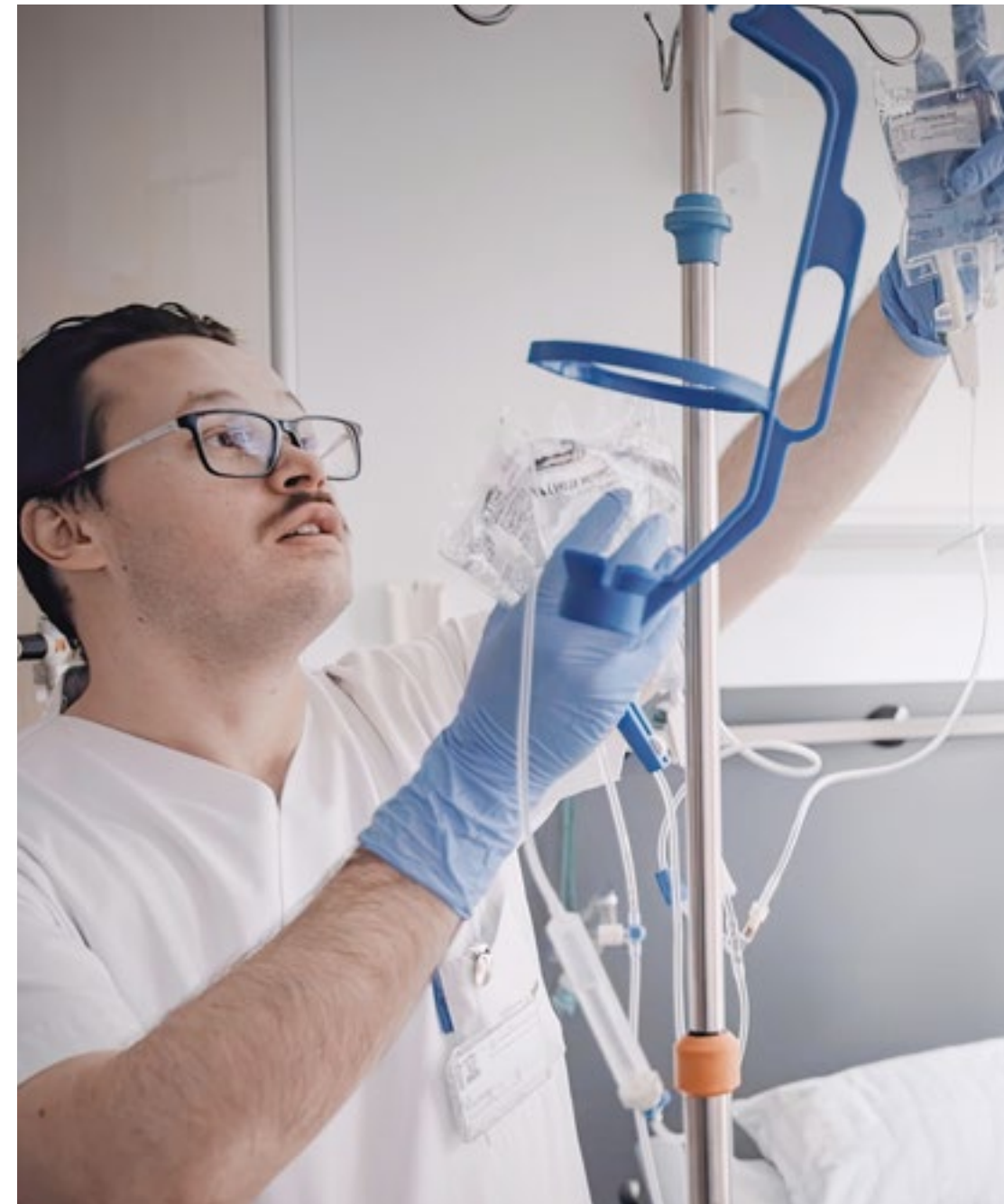
26 Palliative medicine in the WTZ Consortium

Evolving patient care together

Working together across locations strengthens the quality, continuity and visibility of oncological care

Nursing care is an integral part of oncological care at WTZ. With the aim of further developing this role across our locations, the “Oncological Care at WTZ” working group was set up back in 2023, combining the expertise which Essen and Münster have in nursing care and nursing science – with clear objectives: to make use of synergies and continuously improve care for cancer patients.

The starting point for the working group was the realisation that at both locations people were working on comparable topics – but often parallel to one another. “We noticed that we could work together on very similar topics, pooling our competences and harnessing synergies,” says Bernadette Hosters, Head of the Care Development and Research Department at UME, in describing the motivation behind setting up the working group. Just as in the case of the medical working groups, nursing care at WTZ was to be given its own living structure.



Bernadette Hosters
Head of the Care Development and Research Department at UME



Modern nursing care models, academic qualifications and a structured exchange of ideas between the locations all combine to make nursing a strong element within WTZ – as well as making it attractive for new team members.”

Thomas van den Hooven
Director of Nursing and Board Member at UKM

Nowadays the working group meets once every three months – alternately online and face to face. This format not only enables a detailed exchange of ideas to take place but also facilitates joint cooperation on content. In the view of the Nursing Directorates, this structure is a key factor in the success that has been achieved: “Nursing is a fundamental component in treating cancer patients and, as such, it has to be designed to be visible and effective,” says Thomas van den Hooven, Director of Nursing and Board Member at UKM. In this way, a platform was created which systematically brings together perspectives from nursing science, management experience and everyday nursing work.



Nursing is an integral part of cancer care. With expanded nursing roles, we have responsibility in a multiprofessional team, thereby creating real additional benefit for our patients.”

Andrea Schmidt-Rumposch
Director of Nursing
and Board Member at UME



Rigo Fangemann
Advanced Practice Nurse
at UKM



Timo Gottlieb
Advanced Practice
Nurse at UME

Cooperation with a concrete benefit

One example of this cooperation is the joint Journal Club, in which nursing specialists from Essen and Münster discuss articles from current journals on relevant oncological topics – from poor nutrition to chemotherapy-induced neuropathy. “Both the number of participants and the feedback show us that we’re on the right path here,” says Rigo Fangemann, Advanced Practice Nurse at UKM. The focus is always on the extent to which scientific findings can be transferred to practical work. “After all,” says Timo Gottlieb, Advanced Practice Nurse at UME, “the aim of the Journal Club is not to remain at the theoretical level but to present specific measures that can be applied in practice. This can also be seen in the joint development of nursing guidelines: currently, a cross-locational guideline on oral mucositis is being drafted, the aim of which is to



Close cooperation in the WTZ Consortium: cancer nursing specialists exchanged ideas at the 2025 Essen Nursing Symposium

harmonise information – especially considering that some patients are treated at both locations. Nowadays, it is a matter of course that representatives from each location contribute to the nursing symposia held by the other one. “The group has created an opportunity for people from a variety of levels to have discussions with one another,” explains Anna-Lena Reuter, Nursing Services Manager at UKM. For Andrea Schmidt-Rumposch, Director of Nursing and Board Member at UME, the decisive factor is, especially, the interdisciplinary communication between equals: “Nursing and medical care are complementary,” she says. “Each profession contributes its own specific expertise.”



Anna-Lena Reuter
Nursing Services Manager
at UKM

Nursing offers – digital and structured

A further focus in this cooperation is on the continuing development of patient-friendly offers which enable both inpatients and outpatients to be looked after well. At both locations, advanced practice nurses, nursing experts and oncological nursing specialists have set out to design cross-sector patient care. Advanced practice nurses are experienced nursing specialists with distinct clinical expertise who have completed at least one master’s degree course. At WTZ Essen, for example, online consultation hours were set up in 2025, offering both adult and paediatric cancer patients low-threshold advice outside any stays as inpatients. In Münster, a comparable approach was taken in the form of continuous support by advanced practice nurses for defined patient groups. “The low-threshold accessibility is a great help in avoiding unnecessary hospital visits and giving patients reassurance,” says Fangemann.



The OncoCARE Plus team at WTZ Münster specialises in providing nursing advice with regard to cancer patients.

Besides the offers for outpatients, specialist expertise is available for inpatients across departments at both locations: in Essen through the counselling services provided by oncology nurses, and in Münster through OncoCARE Plus, a standardised nursing advisory service, in a specialised team, for cancer patients. The offers can be requested by nursing specialists, by case managers or by medical staff. At both locations there are oncology working groups to further develop nursing care for cancer patients. “Besides getting nursing staff networked, the working group also aims at continuing to jointly develop oncological topics and ensuring that the latest results are transferred into practice,” Gottlieb explains. WTZ Essen and WTZ Münster both have the aim of integrating nursing expertise all along the course of treatment while avoiding the occurrence of any gaps in care between the inpatient and outpatient phases.

Support on equal terms

From 2026, at the instigation of the WTZ Patients Advisory Committee, cancer patients and those close to them will be receiving support from specially trained OncoPartners at both locations.

When cancer is diagnosed, it triggers uncertainty and fear – not only in those directly affected but also in close family and relatives. For this reason, from April 2026 WTZ will be training former patients, family members and anyone else interested to become so-called OncoPartners. They will be providing support to cancer patients in hospitals by contributing their special know-how and their individual experience.

“If someone is diagnosed with cancer, their world is turned completely upside down,” says Kristina Hardt, OncoPartner project manager in Essen, and she speaks from her own experience. “In such cases, it is good to know that there is a professionally trained person at your side who can support you through this difficult time on the basis of their own personal experience.” For this reason, and at the instigation of the Patients Advisory Committee, training will be given in future at both Essen and Münster to anyone who is interested, and they can then function as



OncoPartners provide something which unfortunately often gets lost in everyday hospital work: reliable support on an equal footing, combining specialist know-how with personal experience.”

Kristina Hardt
OncoPartner project management

a bridge between medical staff and patients. “They accompany patients to consultations with doctors, provide information on the counselling and support on offer at WTZ, and give emotional and practical support in everyday life,” explains Julia Beusing-Markmann from the WTZ Münster project team.

Training and supervision

Anyone interested in becoming an OncoPartner takes part in nine training units, each lasting three hours, to prepare them for their task. “We use the resources available and, in selecting the trainers, we recruit staff from the University Hospitals,” says Vanessa Schücker from the WTZ Münster project team. “These are specialists who are active for example in medical and nursing care or in pastoral care and social work,” she explains. They not only inform the future OncoPartners about the various offers of counselling and support at WTZ but also teach basic oncological knowledge and provide details of topics such as managing side effects, palliative medicine, sport and nutrition for cancer patients. “In addition to this specialist knowledge there is a training module on the subject of communication,” adds Julia Beusing-Markmann, “which deals with handling difficult conversations as well as not going beyond the partner’s own personal boundaries.” This ensures that the OncoPartners do not overburden themselves and do not transfer their own personal experiences to the person they’re talking to. “Mindfulness and self-care are very important to us, and we also offer professional supervision and regular informal meetings at which OncoPartners can exchange views and ideas with one another,” says Catharina Spohr from the project team at WTZ Essen. In critical cases, pastoral care is also available at both locations.



Julia Beusing-Markmann
Coordination of Patient Involvement / Self-Help, OncoPartner Pproject

From patients for patients

At the core of the OncoPartners project is the Patients Advisory Committee at WTZ. “Again and again, we hear that patients are often not aware of the many fantastic offers of support which we have at our locations,” says Kristina Hardt. So the aim was to create an additional point of contact bringing together the various players involved and providing support if there is a need to overcome inhibitions – for example when making contact with self-help groups or with palliative medicine specialists. “Together with the Patients Advisory Committee, the

project team then set up a working group which meets every two weeks to draw up the curriculum, recruit trainers and check contents to make sure they are written in a language that is easy for patients to understand,” says Julia Beusing-Markmann, describing how the project got going. The OncoPartners themselves decide how often they are on call, how much work they take on, and what personal resources they want to bring to the project. “At the moment



we aren’t able to assess how many patients at the WTZ locations will take up the offer to have an OncoPartner,” says Hardt. For this reason, the project will have a scientific underpinning and will be properly evaluated. “We hope this evaluation will provide us with further suggestions and ideas which will enable us to not only continue developing the project in the interests of our patients but also to implement it at all hospitals.”



Catharina Spohr
OncoPartner Project,
Patient Involvement & Self-Help



Vanessa Schücker
Patient Involvement, Coordination of OncoCARE Plus, OncoPartner Project

Palliative medicine in the WTZ Consortium

Optimum care and quality of life, for both inpatients and outpatients: this is the aim for the treatment of people who are incurably ill.

“I didn't actually want to go there, but it was the best thing that could have happened to me” – this is typically what patients say who have had their first contact with palliative medicine. Many people still associate it with the thought of pure end-of-life care, but palliative medicine has evolved into early and continuing support for patients with life-threatening illnesses.

“Thanks to constant improvements in treatment, people with cancer are living longer and longer,” says Prof Philipp Lenz, Medical Director of Palliative Medicine at UKM. “For this reason, it is becoming increasingly important to focus on patients' quality of life – as well as that of their families.” The aim which palliative medicine has is to support people who are incurably ill at an advanced stage – in the palliative care wards at both WTZ locations, as well as in Specialised Outpatients Palliative Care (SAPV). “Our efforts are concentrated on enabling people with the illness to lead a life which is as fulfilled, self-determined and as free from suffering as possible,” explains Prof Mitra Tewes, Director of

Palliative Medicine at UME. Tewes' appointment and, connected with this, the new establishment of a Chair of Palliative Medicine, is a milestone in palliative medical care and teaching, significantly raising its visibility both nationally and internationally.

Specialised Outpatients Palliative Care (SAPV)

SAPV was set up in Essen in September 2024 on the basis of many years' experience in palliative care for outpatients. A multiprofessional team provides care and support for critically ill patients and their families in their home environment. “The support provided ranges from pain therapy and organising aids to drawing up living wills,” Tewes explains. In Münster, the structures are slightly different: “There already exists a well-functioning palliative medicine network for outpatients and we work together with it,” says Lenz. In this network general practitioners, consultants, nursing staff and pastoral care workers all work together. “The focus is not on extending life



The Lancet Oncology Commission has identified a growing imbalance between technological innovation and the human dimensions of cancer care. Palliative medicine makes a decisive contribution to bridging this gap.”

Prof Philipp Lenz
Medical Director of Palliative Medicine at UKM

The WHO definition of palliative medicine does not even contain the words ‘dying’ or ‘death’. Palliative medicine deals with the quality of life of people who are incurably ill.”

Prof Mitra Tewes
Director of Palliative Medicine at UME



or curing the illness, but rather on treating stressful symptoms and improving the quality of life,” Lenz explains. “The focus is always on patients’ needs.” UKM has already been active in this field for a good ten years and, in 2025, the 10th anniversary of palliative medicine there was celebrated with a reading, a keynote lecture and a benefit concert.

Telemedicine in SAPV

With the aim of further expanding outpatient care, WTZ Essen and WTZ Münster have been collaborating since May 2025 in the funded project titled IMPULS-NRW. At the heart of this project is software which is already being used by most SAPV teams in North Rhine-Westphalia (NRW) today. “Our approach,” says Lenz, “is to integrate patients in this software by means of an app so that, for example, they can upload their vital parameters via a smartwatch, request a home visit, or have an online con-

sultation. In this way, it might be possible in future to identify people who would require action before any massive complaints occur.” The app is already available in all app stores, and it is designed to ensure a greater level of care assurance, particularly in rural areas.

Another app for cancer patients is currently being tested at WTZ Essen. In the funded project FAITH, an

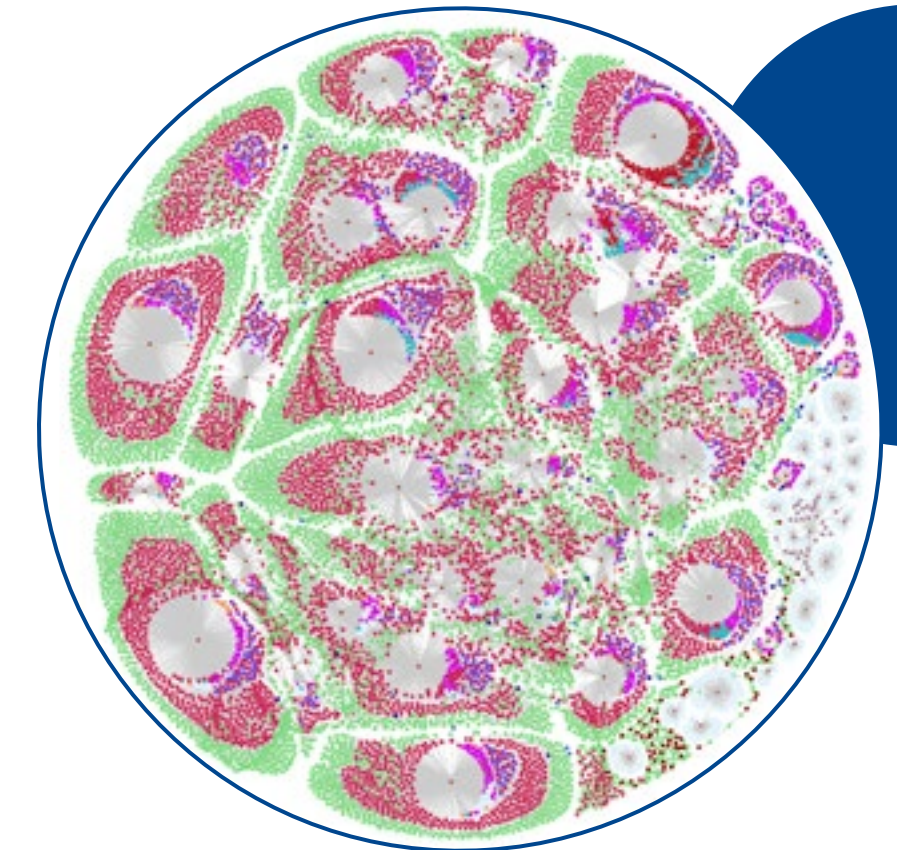
app is being developed which is designed to enable individually agreed interventions to be made in the case of cancer-induced fatigue. “Depending on the illness and the treatment, fatigue occurs in somewhere between 30 and 85 percent of patients,” says Tewes. The app records patients’ statements on how they are feeling, as well as real-time vital parameters via a smartwatch, then it evaluates this information by means of AI and delivers personalised therapeutic interventions relating to behaviour and exercise. In this way, the WTZ Consortium combines modern medicine, digital innovation and human attention into a holistic approach to palliative care – for a better quality of life in every phase of the illness.





Innovative

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Advancing cancer treatment with in-house cell therapies

CAR T-cell Therapy provides medicine with a new immunotherapy for patients with cancer.

CAR T cells are seen as being one of the most innovative developments in modern cancer medicine. They combine two key functions of the immune system in one tailor-made cell therapy – and this is opening up new options for treatment for patients with cancer or autoimmune diseases in cases where conventional forms of treatment have been exhausted. Today, WTZ is able to itself produce these highly complex cell therapy products at both its locations: in Münster with an academic science-based tradition, going back many years now, of developing CAR T cells; and in Essen with a licence granted in late 2024 which enables therapies to be carried out within the framework of individual curative trials.

CAR T cells (chimeric antigen receptor T cells) are genetically modified T cells in a person’s own body which can systematically recognise – and destroy – cancer cells. For this purpose, they are equipped with a certain receptor which enables them to recognise specific proteins on the surface of cancer cells. “To a certain extent CAR T cells are an immunological

mixture combining the best properties of two immune systems,” explains Prof Bastian von Tresckow, Deputy Director of the Clinic for Haematology and Stem Cell Transplants at UME. “They can enable tumour cells to become visible for the immune system and thus be successfully attacked,” adds Prof Claudia Rössig, Director of the Clinic for Paediatric Haematology and Oncology at UKM. Once they are injected, they circulate in the body and can have an effect over a period of months, or even years.

Pioneering work by paediatric oncology in Münster

Münster can look back on a long tradition of academic CAR T-cell research. Its origins lie in paediatric oncology, where rare diseases and small numbers of patients often stand in the way of commercial developments. In the case of many of our patients, there is simply no interest on the part of industry in developing CAR T cells,” Rössig explains. “That is



Producing our own CAR T cells opens up to us the opportunity to treat patients for whom there were no approved options for treatment.”

Prof Bastian von Tresckow
Deputy Director of the Clinic for Haematology and Stem Cell Transplants at UME

why we have been developing these therapies ourselves for many years now – not only in our research projects but also for clinical applications.”

The Institute of Transfusion Medicine in Münster has two licences to produce its own CAR T-cell products;



It is precisely in the case of rare diseases that the academic development of CAR T cells is indispensable: it is what drives innovation not only in oncology but also far beyond that.”

Prof Claudia Rössig
Director of the Clinic for Paediatric Haematology and Oncology at UKM

the products are used exclusively as part of clinical studies. This includes a CAR T product developed completely academically which is being tested in a Phase I study – funded by the Federal Ministry of Education and Research – involving children and adults with solid tumours. “The fact that a product



Prof Matthias Stelljes
Head of the Bone Marrow Transplant Department at UKM

we created ourselves progressed from preclinical development to clinical application is an extraordinary achievement,” says Prof Matthias Stelljes, Head of the Bone Marrow Transplant Department at UKM. “Such structures exist at only a very few locations.”

With its own production, Essen has new opportunities

CAR T cells are produced predominantly by specialist companies, and it is a process which entails complex logistics, long production times and strict regulatory stipulations. In November 2024, WTZ Essen was granted a licence to produce the cells themselves and has thus taken a decisive step forward. “Having our own production gives us back control over time, pro-

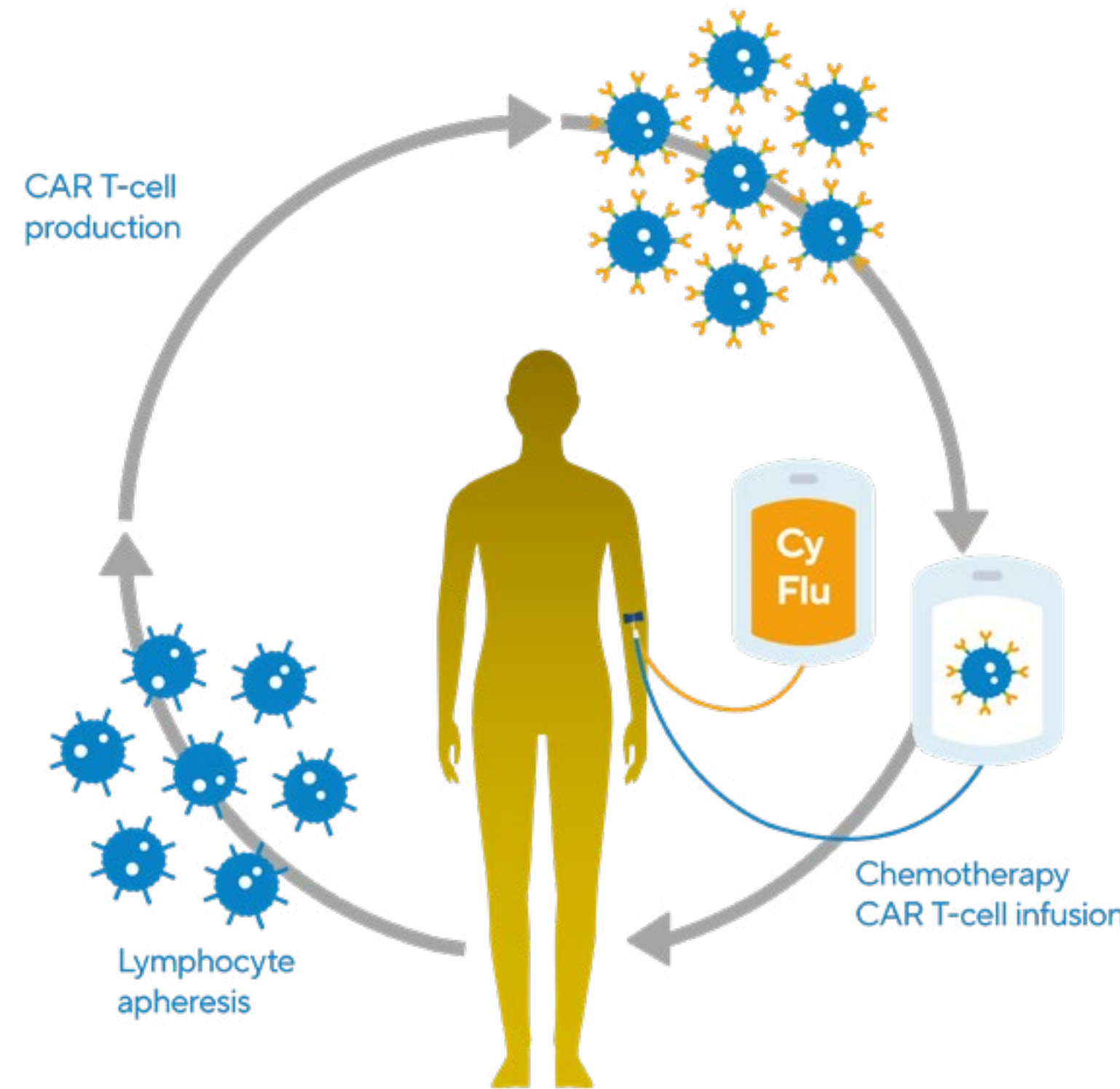
cesses and indications,” says von Tresckow. “Above all, it makes it possible to carry out treatments in cases where there are no approved commercial products.”

Production is carried out in Essen in a semi-closed system which allows a production process of around 12 days – much faster than external producers can achieve. In 2025 it was already possible to treat

several patients in individual curative trials when no other therapy would have been available for them. Dr Stefan Schönberger, a Senior Physician in the Department of Paediatric Haematology and Oncology at UME, also emphasises the importance of this approach: “Point-of-care production is a key component in being able to implement innovative cell therapies in a more flexible and patient-friendly way.”



Dr Stefan Schönberger
Senior Physician in the Department of Paediatric Haematology and Oncology at UME



CAR T-cell production process

Perspectives for personalised medicine

WTZ’s production of its own CAR T cells exemplifies its aim of transferring innovative therapies swiftly from research into clinical applications – across locations and in a complementary way. With its production licence, Essen is strengthening patient-friendly care in complex individual cases. “Both approaches are necessary and complement each other ideally,” says von Tresckow in summing up.

Where research begins: the new learning lab in Münster

Hands-on approach to research in an innovative learning environment

After an intensive planning phase, the learning lab (aka skills lab) at the Medical Faculty in Münster becomes operational. Using an architectural design which is fundamentally different from traditional structures, this marks the beginning of a new era in medical training.

The idea of the “learning hospital” is now quite well known – but what exactly is a “learning lab”?
Prof Bernhard Marschall, Dean of Studies at the Medical Faculty at the University of Münster:

Basically, with the learning lab we are systematically transferring the successful concept of the learning hospital – in other words, the structural learning of clinical skills – to the acquisition of scientific knowledge. It’s all about providing students at an early stage with real access to research: not just working diligently, as in existing models, but as a space for students’ own ideas, creativity and originality. We want to get away from the idea of a simple reproduction of knowledge and move towards developing an understanding of how science evolves, how data have to be interpreted, and how scientific findings



Research is about treading new paths. In these times of AI, human creativity is becoming ever more important – and with the learning lab we are creating the space for this.”

Prof Bernhard Marschall
 Dean of Studies at the Medical Faculty at the University of Münster



end up as guidelines and recommendations for treatment. The learning lab was thus consciously designed to be a place offering the freedom and the space for research – mentally as much as physically.

Dr Sönke Scherzer, Head of the Learning Lab at the Medical Faculty at the University of Münster: This freedom has also been expressed in the architecture: it begins with the agora – a large open area for communication, 1,600 square metres in size, and without any partitioning walls. It is quite consciously meant to be a central meeting place in which students from different semesters, disciplines and perspectives come together. Besides this, there is the actual laboratory area: in addition to a modern room for traditional light microscopy there is also the learning lab itself, which is designed for 70 to 80 students and divided up into ten work booths, each dedicated to a different topic. Here we cover the entire spectrum of modern medicine – from traditional biophysical and molecular-biological



The idea behind the architecture of the learning lab is to arouse curiosity, to promote encounters and to show that science is not a straightforward process but, rather, evolves in discussions, in thinking anew and in thinking ahead together.”

Dr Sönke Scherzer
Head of the Learning Lab at the Medical Faculty
at the University of Münster

methods to genome sequencing, bioinformatics and big-data analyses. The booths are arranged in an architecturally contorted way, with dead ends and bottlenecks to reflect how science actually functions: not in a straight line but by searching, groping, and discussing.

And how do the students get to discuss with one another? How is access to the agora and to individual laboratories regulated?

Prof Bernhard Marschall: Access has been deliberately designed to be as low-threshold as possible. The agora is conceived as an open space in which, on the one hand, curricular teaching is carried out and which, on the other, is in principle available for students to use round the clock. In addition to this there is something which is known in English-speaking countries as a “students union”: an open space in which students can meet, learn together, have discussions, develop projects or simply hang

out with one another. It is precisely these relaxed discussions which are a key element of our concept – not only because it is often here that the best ideas emerge but also because it promotes the most important objective of medical studies: professional identity formation.

Dr Sönke Scherzer: Naturally, there are clear rules for the use of the laboratory areas. Anyone who wants to carry out experiments in one of the booths must first undergo safety training and book themselves in for the booth in question. A central desk is planned which will stand in the middle of the lab. Qualified staff will be permanently on hand who can answer questions and provide support, and who will look to see that work is carried out in line with safety regulations and other rules. What is important to us is that we can offer on the one hand a genuinely free and open space and, on the other, a solid professional working environment.



Talking of a professional environment, will the learning lab remain an open space for experimentation in the long term, or is curricular teaching also due to be carried out here?

Prof Bernhard Marschall: In the pilot phase, we're starting off with select groups, collecting experience and further developing the concepts. Our aim in the long run is to embed the learning lab in curricular activities and to provide all students with an opportunity to spend continuous periods of time there in which they can take an intensive look at scientific questions, without any examination stress. This is a structural task, and one which will need time – but it is central to what we want to achieve.

Dr Sönke Scherzer: In order to provide students with optimum preparation for real-life research, applications will have to be written to carry out projects, and whether budgets are awarded will be decided in a peer-group process. And there will be our own internal journal, in which research findings will be published. The peer group will also decide on the journal's content.



What will the next step be if pioneering findings are made in the learning lab?

Dr Sönke Scherzer: If it turns out that a question is a valid one, that a model functions, or that an idea can evolve into a genuine research project, then the next step is clearly defined: the students move into the established research structures in the faculty, into the specialised labs, where they can pursue their projects with the appropriate infrastructure, depth and personal involvement – up to writing a PhD or applying for third-party funding.

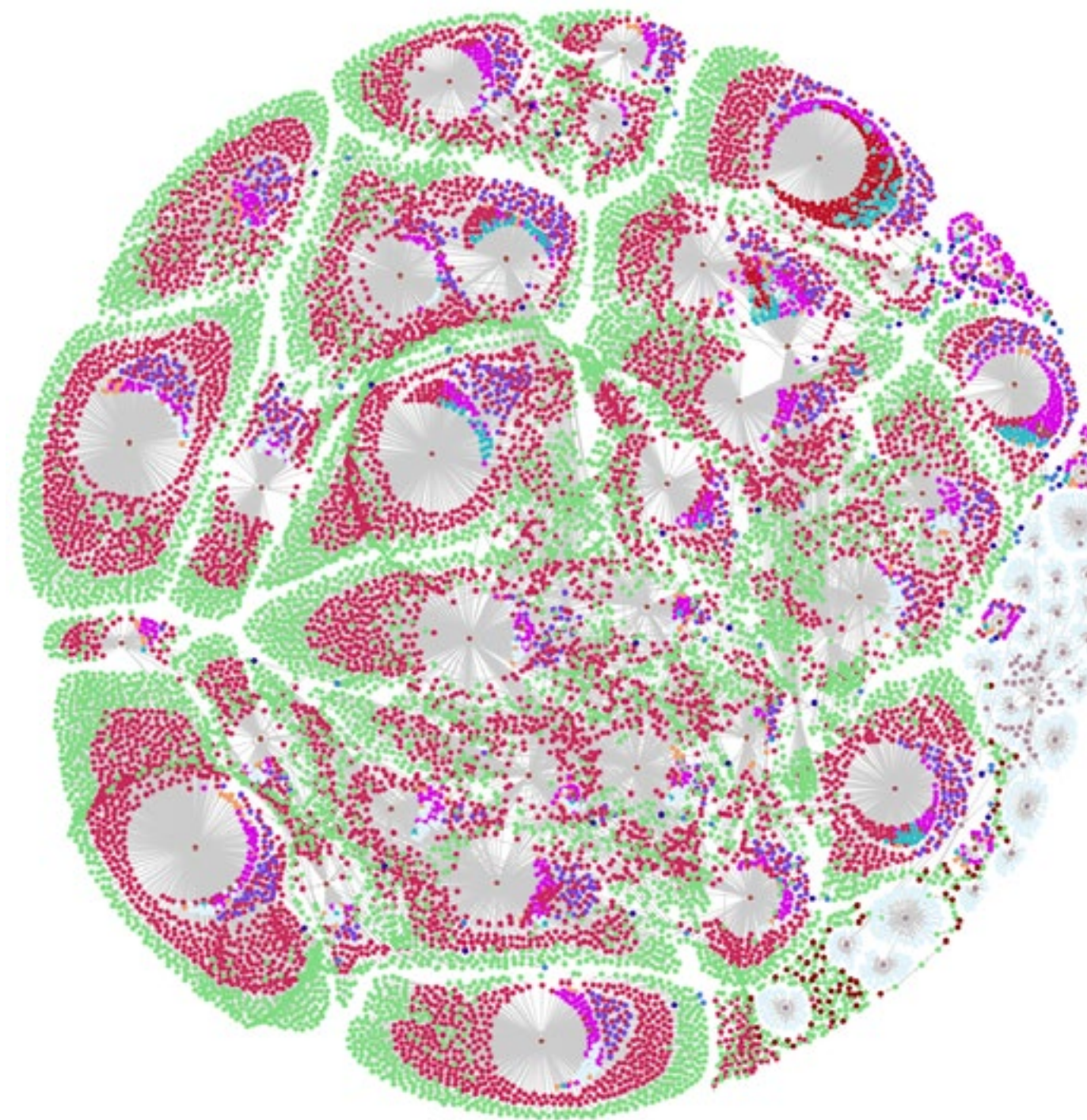
Prof Bernhard Marschall: The important thing here is that the idea is not to produce “finished products” in the learning lab, but to set thought processes in motion. If we manage to get students to move into research with their own ideas and with an interest in pursuing findings, then that will be a distinct bonus. And even if an idea does not become a big project, the learning effect is enormous. Students have then experienced how science functions – with all the diversions, doubts and corrections that are involved. That leaves a lasting impression and has an effect that goes way beyond the individual project. At a time when many an influencer on the Internet has a larger audience than science, it is important to give our own next generation of scientists a deep understanding of the rules of good scientific practice.

Making knowledge available at the point of care

“WisPerMed” is the name of a Research Training Group at WTZ Essen. The German acronym stands for “knowledge- and data-based personalisation of medicine at the point of care”.

Enormous quantities of data result from digitalisation in medicine: guidelines, studies, procedural documentation, therapies and diagnostics. However, there is often a gap between the existence of data and its usefulness in clinical work. It is precisely here that the WisPerMed Research Training Group’s work kicks in.

“Since 2021 the Training Group – funded by the German Research Foundation – has been researching into how medical decision-making processes can be personalised, made more transparent and be made directly useful in everyday work in clinics,” explains Felix Nensa, Prof of AI in Radiology at the Institute of Artificial Intelligence in Medicine at UME. What is special about it is that the Research Training Group belongs to the Computer Science Department, even though it is located in the Faculty of Medicine. “The focus is on making the knowledge contained in the data available where it is needed – at the point of care, in specific work being carried out on, and for, patients.”



Visualisation of FHIR data relating to cancer patients. The graphic depicts a complete set of patient data. The individual clusters represent medical encounters, surrounded by the associated FHIR resources. The illustrations make clear the structural variance in medical processes: while some data sets show a homogeneous distribution of many small encounters, others are characterised by a few dominant main encounters.



With WisPerMed, our aim is to make extra knowledge available to physicians and to generate new knowledge from data without placing restrictions on them in their decision-making independence. This presents a huge opportunity, especially in cancer medicine.”

Prof Felix Nensa
Professor of AI in Radiology at the
Institute of Artificial Intelligence
in Medicine at UME

Interdisciplinary, data-driven, patient-friendly

WisPerMed is deliberately interdisciplinary: computer scientists, psychologists, mathematicians and physicians all work closely together. The objective is to find a new way to combine methods from the fields of information extraction, knowledge representation, machine learning and user interaction – with the aim of linking clinically relevant information and making it available in an intelligent and, at the same time, easy-to-understand way. Unlike traditional PhD programmes, the focus is not on individual research questions but on providing structured, high-quality training for junior researchers in a common research framework. One of the topics is, for example, the integration of artificial intelligence in medical decision-making processes: here, data is linked intelligently and then systematically evaluated in such a way that recommendations for treatment can be generated and predictions can be made regarding resistances or side effects. Benefits also impact on efficiency and lower stress levels in everyday hospital life: data-driven process analyses reduce administrative hurdles, shorten waiting times and release medical staff from repetitive activities. “This means that there is more time for what is important: working on, and with, patients,” Nensa explains.



The WisPerMed team at the Institute of Medical Informatics, Biometrics and Epidemiology (IMIBE). The photo shows the group at a team meeting in 2024.

Supporting junior researchers, shaping the future

There are currently around a dozen doctoral students at the WisPerMed Research Training Group. They come not only from University Medicine Essen but also from the Faculties of Computer Science at the University of Duisburg-Essen and Dortmund Technical University. “We are the very first Research Training Group in which a University of Applied Sciences is involved,” says Nensa. The overriding topic is melanomas, and specific topics are assigned in a structured selection procedure. To prevent the established structures and research projects from petering out after the nine-year funding phase, some thinking is already being done about the future. “What we can well imagine is applying to turn the Research Training Group into a Collaborative Research Center,” Nensa explains.

Combining research and hospital work

Specific funding programmes exist in Münster and Essen to support physicians who would like to undertake research in addition to doing their hospital work.

Medical progress needs physicians who have received the best possible training in patient care as well as in research and who are working in both areas. This is why WTZ is promoting Clinician Scientist programmes at both locations. Anyone interested can apply with an idea for a project and, if they are successful, they are given protected research time during which others stand in for them in hospital. For this, in Essen, there is the University Medicine Essen Clinician Scientist Academy (UMEA) – funded by the German Research Foundation (DFG) and the Federal Ministry of Research, Technology and Space (BMFTR); in Münster there is the Clinician Scientist Programme titled “CareerS”, likewise funded by the DFG. Some of the talents receiving funding are presented here.



Every important innovation in cancer medicine begins with a clinical question. Here at WTZ, our programmes ensure that these questions do not get lost in everyday work but are transferred into excellent research – with the aim of making measurable improvements in diagnostics and treatment for our patients.”

Prof Annalen Bleckmann

Director of WTZ Münster. Until February 2026: Vice-Dean of Research and Junior Researchers and Dean’s Representative at the Medical Faculty of the University of Münster



Outstanding cancer research emerges when talent, time and structural support come together. At WTZ, we create specific framework conditions in which young physicians can deploy their scientific curiosity and develop sustainable career paths in translational oncology.”

Prof Anke Hinney

Vice-Dean for Academic Career Development and Diversity at the Medical Faculty of the University of Duisburg-Essen.



I don't want to just treat cancer all the time – I want to continue to advance prevention, too."

Dr Anne Zaremba

Specialist for Dermatology and Venereology and Senior Physician at the Dermatology Clinic at UME



Dr Anne Zaremba is a specialist for dermatology and venereology and is a senior physician at the Dermatology Clinic at UME. Since April 2025 she has been receiving financial support for six years as part of the Advanced Clinician Scientist programme, enabling her also to build up her own working group. The focus of her clinical and her research work is on diagnostics and the treatment of skin cancer in the family.

What fascinates you about research?

After passing my *Abitur* exams I initially decided against studying medicine and opted for molecular biomedicine instead. I got a bachelor's degree in the subject and undertook basic research in immunology – very traditional, sitting at a desk in the lab. I thoroughly enjoyed the work but, at the same time, what was missing for me was contact with people as well as any immediate practical application of my knowledge. For this reason, I then studied medicine after all – but immunology never quite let go of me. And, as tumour immunology is closely linked to dermatology in Essen, I wrote my medical dissertation there and stayed there in the end.

What are you currently researching into?

I'm studying the genetic predisposition for skin cancer, especially melanomas, which occurs frequently in families. The Center for Skin Cancer in the Family which we set up here in Essen is unique in Germany as a place where patients can come if they have a corresponding tumour predisposition. Our aim is to be able to better identify genetic risk factors, to understand the biological mechanisms behind them, and then to derive specific consequences from that for prevention, diagnostics and patient care.

What are your plans for the future?

The primary aim is to continue building up the Center for Skin Cancer in the Family – as well as to gain a better understanding of the genes underlying any predisposition and their significance for the development of melanomas and other forms of skin cancer. We also want to push ahead with getting specialists networked with people seeking advice, with the long-term aim of developing a standardised procedure which can be offered to families affected – such as is already available for breast cancer and ovarian cancer in the family. My overriding aim is not to treat cancer once it's there but rather to recognise the risks at an early stage in order to make a better prediction and prevent the disease if at all possible.



What drives me primarily is to be able to actively shape medicine of the future."

Dr Marcel Kemper

Specialist for Internal Medicine, Haematology and Oncology at Medical Clinic A at UKM

Dr Marcel Kemper is a specialist for Internal Medicine, Haematology and Oncology at Medical Clinic A at UKM. He has been working at UKM since 2019, and since 2020 he has been a member of the Tumour Progression and Metastasis Formation working group headed by Prof Annalen Bleckmann. He is currently in the final year of his three-year Clinician Scientist period.

Dr Marcel Kemper

What fascinates you about research?

In my first job as a doctor in a rural general hospital I noticed relatively quickly that simply providing standard care for patients wasn't enough for me. I felt the need to go beyond everyday hospital work and get to grips with scientific topics. Ultimately, that was the reason for my move to a university hospital: here, there is an opportunity to combine research and hospital work and, as a result, not only to put existing therapies into practice but also to be involved in shaping the medicine of the future – whether through basic research or clinical scientific projects such as studies relating to new medication.



What are you currently researching into?

Our working group is studying extracellular vesicles, which play an important role in cell communication. My particular focus is on lung carcinomas, especially certain subgroups of patients with lung carcinomas who have a heightened risk of brain metastases. I'm trying to find out to what extent tumour cells interact via vesicles with immune cells in the central nervous system and thus facilitate the occurrence of metastases in the brain.

What are your plans for the future?

I was recently able to acquire third-party funding through a programme supported financially by the pharmaceuticals industry, and this funding will make it possible to realise some follow-up and spin-off projects after the end of my Clinician Scientist period. At the beginning of 2025 I was admitted to a consortium in which I am discussing this with international experts to push ahead with joint projects. Looking into the future, I see my clinical focus in thorax oncology, embedded in a translational setting. For me, this would include supervising clinical studies and maintaining close contacts between research and patient care.



Identifying new strategies for treatment is the primary aim of my research work."

Dr Vivian Rosery
Specialist for Internal Medicine, Haematology and Oncology at the Clinic for Internal Medicine (Tumour Research) at UME.



Dr Vivian Rosery is a specialist for Internal Medicine, Haematology and Oncology at the Clinic for Internal Medicine (Tumour Research) at UME, and she already took part in the UMEA Junior Clinician Scientist programme while she was doing her specialist training as a doctor. She is currently undertaking research as a Clinician Scientist into pancreatic cancer and bile duct cancer.

What fascinates you about research?

I was first fascinated by research during my studies with my experimental PhD on oesophageal cancer. At that time, it became clear to me that – despite intensive research work – there are many oncological diseases that we do not yet fully understand because of their complexity. At the same time, however, the stresses which patients feel – the pain, the therapy – are very high. So for me it was clear, from an early stage, that I was going to go into research, then into oncology. The aim of my research work is the development of new treatment strategies. What motivates me in particular is the direct contact with our patients.

What are you currently researching into?

As part of the UMEA Clinician Scientist programme I'm dealing with pancreatic cancer. My project is based on so-called patient-derived explants – in other words, samples of tumour tissue – which are preserved in a special culture technique in such a way that the tissue structure and, in particular, the immunological environment remain intact for as long as possible. The aim is to depict the situation

Dr Vivian Rosery

in the human tumour as realistically as possible. In this model we are testing chemotherapies and also, looking forward, immunotherapies and combination therapies. In this way we want to find out, in the long run, which patients benefit in particular from certain therapeutic configurations. I have also acquired additional funding to help in transferring this model to bile duct carcinomas – an entity for which there are likewise very restricted options for treatment.

What are your plans for the future?

In the long term I’m aiming at habilitation. I want to continue the systematic development of my research in this field and devise a drug-screening platform for pancreatic and bile duct carcinomas. As the experimental work can only be carried out to a limited extent, especially when you’re only working part-time, I’m planning to build up my own working group at some point in the future. For me it is important to create a lasting structure to continue developing these models so that they can be used for further questions which we have – and it is essential for me to have the connection with patients and with lab work. I see it as something of immense benefit that we provide clinical care for the patients whose samples we study in the lab and that we can follow the development of their treatment.



I want to understand why treatments work – and why they give rise to side effects.”

Dr Carolin Krekeler
Junior doctor at Medical Clinic A at UKM

Dr Carolin Krekeler is a junior doctor at Medical Clinic A at UKM and has been a member of the Clinician Scientist programme since January 2024. Because of her maternity leave, her membership of the programme was extended without further ado from three to four years. In her work she combines clinical work in the area of haematology with translational research into innovative immunotherapies.

What fascinates you about research?

In my inpatient care I predominantly treat patients with haematological diseases such as leukaemia and lymphomas. Many of them receive highly innovative forms of treatment which are still being clinically developed. In many of these treatments which are being studied, we still don’t completely understand the mechanisms of how they work. Why does one patient respond well, while another doesn’t? Why do certain side effects occur? What motivates me is working on this very question in order to make treatment safer and better in the long term.

What are you currently researching into?

The focus of my project is CAR T-cell Therapy in the case of lymphomas: a patient’s own immune cells in the body are modified genetically in such a way that they can systematically recognise and destroy the cancer cells. One serious side effect of this therapy – and one that has not been fully understood so far – is the neurological complications. These can range from writing difficulties to comas.



In my project I’m examining the hypothesis that, in combating the cancer cells, the T cells release lots of messenger substances which, in turn, over-activate the immune processes in the brain and thus trigger neurological symptoms. My aim is to gain a better understanding of mechanisms and to identify potential predictive markers or therapeutic approaches.

What are your plans for the future?

What I definitely want to do is pursue the combination of hospital work and research in the long term. In oncology, especially, bridging the two is essential if we want to rapidly transfer new findings to patient care. In all likelihood, I won’t be able to finish my current project within the funding period, so I will have to think about other funding possibilities in future. Irrespective of this, I would like to continue dealing with clinical topics from a scientific point of view – whether in the form of translational projects or of clinical studies.

Fighting lymphomas with reduced radiation dose

A study headed by WTZ Münster is looking at the treatment of rare lymphomas of the stomach and the duodenum.

The aim of the multicentric Phase II Study titled “GDL-ISRT 20 Gy” is to examine whether a lower radiation dose, with a simultaneously reduced volume of radiation, is just as effective as the standard therapy hitherto applied – and whether, in addition, it enhances patients’ quality of life.

“For some years now we have no longer been treating these rare lymphomas surgically but with a radiation therapy aimed at a cure,” explains Prof Gabriele Reinartz, senior physician at WTZ’s Clinic for Radiation Therapy – Radiation Oncology at UKM. Building on several preceding studies which already enabled a clear reduction to be made in the target volumes, the current study now goes one step further: instead of the usual 30 grays, only 20 grays are applied. For patients, this means a shortening of their period of treatment from three to two weeks and they can continue with this treatment as outpatients.

The study started up in 2019, in close cooperation with the International Lymphoma Radiation Oncology Group (ILROG), and it is being financed through

funding from the Interdisciplinary Center for Clinical Research at the University of Münster and from the German Lymphoma Aid organisation. Today, 17 centers with 84 patients both in Germany and abroad are participating: in addition to WTZ Essen, there are further locations in Germany and centers in Italy and China. “This international networking is of decisive importance, precisely in the case of rare diseases, in order to arrive at an adequate number of cases and thus enable clinical research to be done at a high level,” explains Dr Thomas Gauler, a senior physician at the Clinic for Radiation Therapy at WTZ Essen. Due to delays related to Covid-19 and the six-month follow-up period necessary, the study is expected to be completed in late 2026.

One special feature of the study is its translational approach. Complementing the radiation therapy, blood samples are taken at defined points in time in order to analyse biomarkers and correlate them with responses to the therapy. “For gastrointestinal lymphomas this biomarker-based approach is, scientifically speaking, uncharted territory,” says Prof Reinartz. The data acquired will help in gaining



That we, within the WTZ, are jointly enrolling patients in the study led by the Department of Radiation Oncology at UKM demonstrates the strength of this collaboration.

Prof Hans Th. Eich
Director of the Clinic for Radiation Therapy – Radiation Oncology at UKM



Prof Gabriele Reinartz
Senior Physician at the Clinic for Radiation Therapy – Radiation Oncology at UKM



Dr Thomas Gauler
Senior Physician at the Clinic for Radiation Therapy at UME

a better understanding of the symptoms of the disease and, in future, to make therapies even more targeted.

Combination therapy for metastasised bowel cancer

A study being carried out under the leadership of WTZ Essen has compared combined therapy – VEGFR-2 antibodies and a chemotherapeutic agent – with chemotherapy alone.



Even though the primary aim was not achieved, the RAMTAS study was an important step in gaining a better understanding of which groups of patients might be able to benefit from an anti-angiogenic combination therapy in late therapy phases – and it shows how valuable the close collaboration between locations within WTZ is.”

Prof Stefan Kasper-Virchow
Medical Director of Outpatient Oncology at UME

The aim of the multicentric study titled “AIO-KRK 0316-ass” was to examine whether combination therapy with anti-angiogenic therapy and chemotherapy increases patients’ chances of survival if they have metastatic colorectal cancer.

“What we often see in the case of metastatic colorectal carcinomas is that antiangiogenic therapies – in other words, the use of medication to inhibit vascularisation in tumours – can still be effective at advanced stages of diseases,” explains Prof Stefan Kasper-Virchow, the Medical Director of Outpatient Oncology at UME. “It was against this background that the idea arose of combining the antiangiogenic active ingredient ramucirumab with the orally available chemotherapeutic agent trifluridine/tipiracil in order to achieve a longer survival period than with the standard therapy.” Originally conceived as a Phase II study, the study protocol was expanded to a Phase III level due to the very good recruitment figures achieved: “Between January 2019 and February 2023 it was possible to include a total of 428 patients in



Molecular genetic analyses as an opportunity for tailored therapy in metastatic colorectal cancer.

the study,” reports Dr Andrea Kerkhoff, Director of the Oncological Day Hospital at Medical Clinic A at UKM, and responsible for the study on the Münster side.

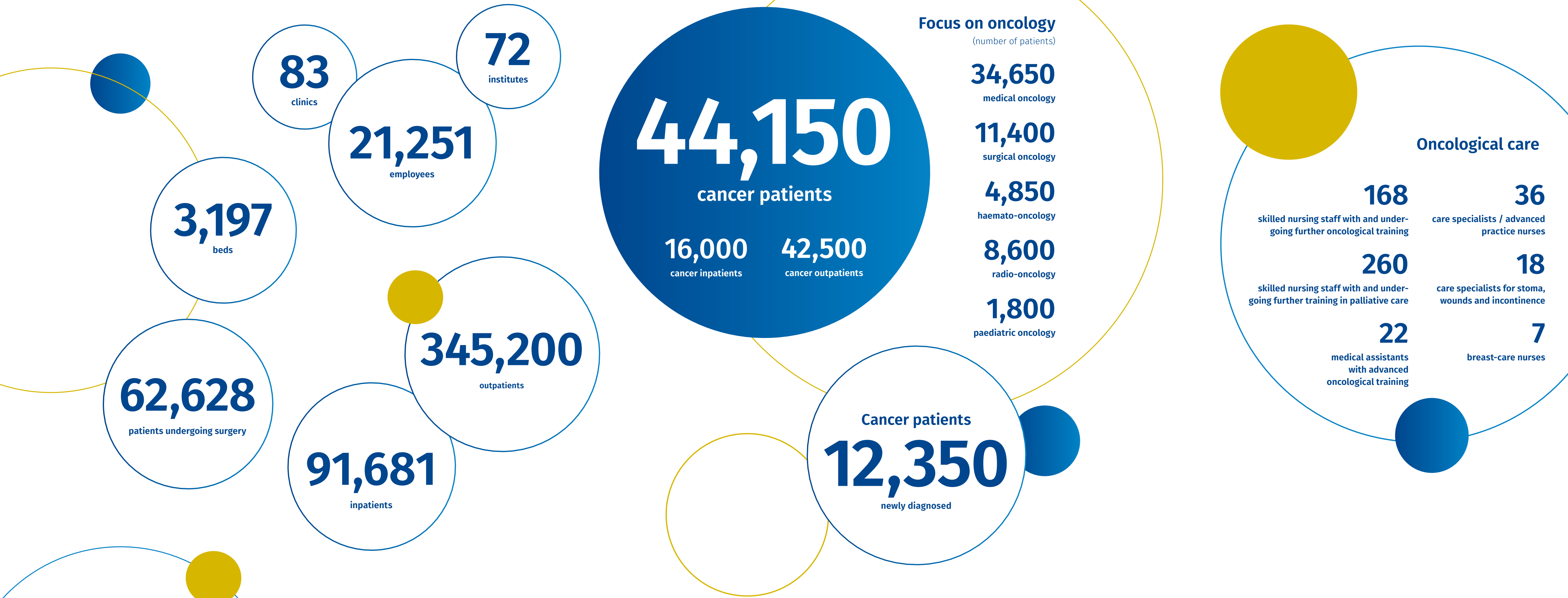
The primary aim of the study – a significant improvement in overall survival – was narrowly missed. Nevertheless, analyses of subgroups showed indications of longer survival – especially in women and in patients with a primary tumour on the left side. These observations supply important starting points for accompanying translational research: predictive biomarkers are currently being analysed in a project funded by the German Consortium for Translational Cancer Research (DKTK) in collaboration with the Department of Translational Oncology of Solid Tumours, the Institute of Artificial Intelligence in Medicine (IKIM), the Charité Hospital in Berlin and Frankfurt and Ulm University Hospitals. The aim is to identify groups of patients that might be especially able to benefit from combination therapy. “It is precisely these molecular analyses which are essential for applying therapies in a more precise and individualised way in future,” says Kasper-Virchow.



Dr Andrea Kerkhoff
Director of the Oncological Day Hospital at Medical Clinic A at UKM

Excellence in figures

University Hospital Essen and University Hospital Münster



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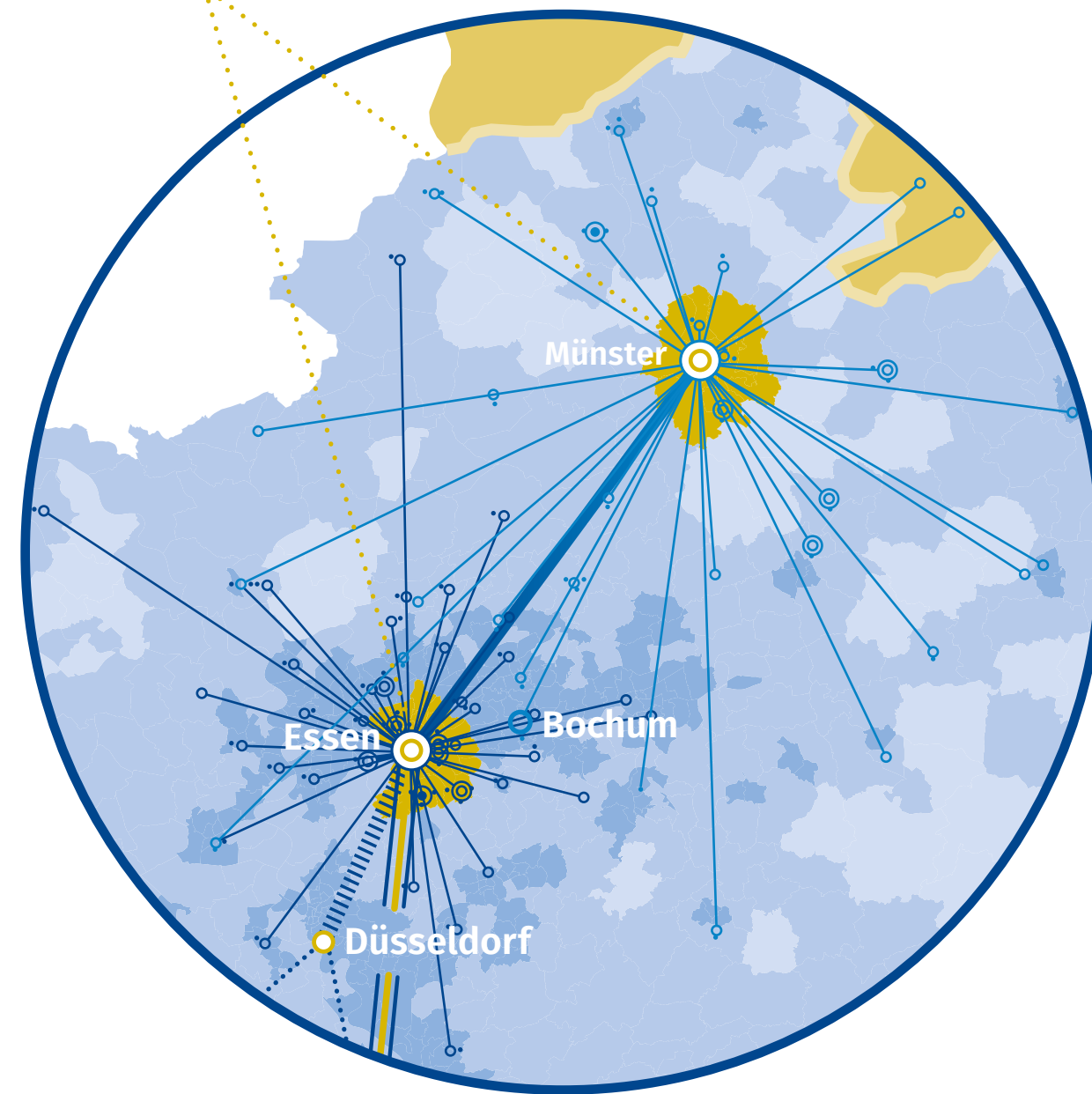
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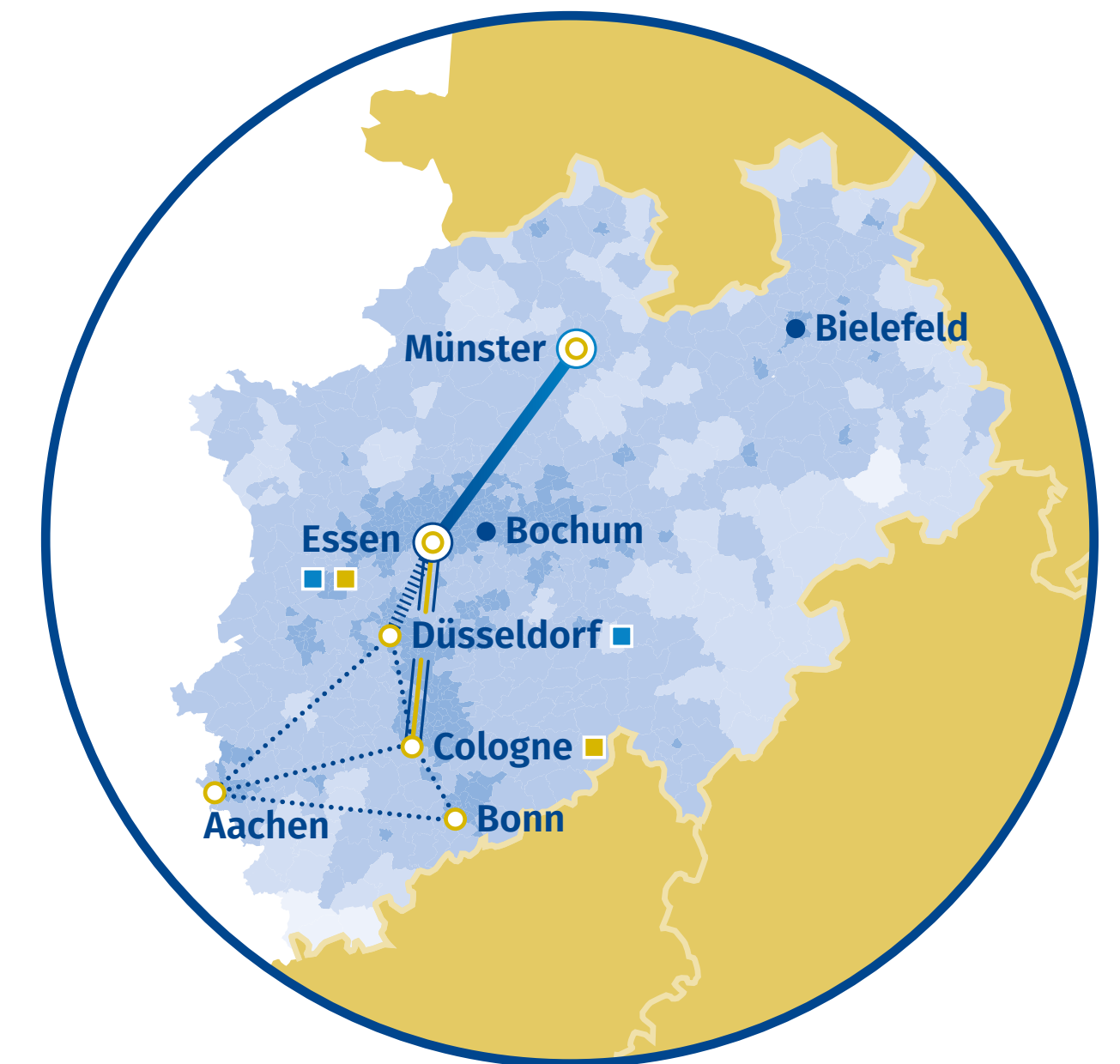
Network with regional cooperations

- COOPERATION PARTNER ESSEN
- COOPERATION PARTNER MÜNSTER



Oncology Networks

- CCC NETWORK LOCATION
- NOE – NETWORK OF EXCELLENCE IN CANCER MEDICINE NRW ESSEN, Essen, Münster, Cologne, Düsseldorf, Bonn, Aachen
- WTZ CONSORTIUM Essen, Münster
- CIO ABCD – Center for Integrated Oncology Aachen Bonn Cologne Düsseldorf
- ||||| DTKK PARTNER LOCATION DÜSSELDORF/ESSEN
- ==== CCCE – Cancer Research Center Cologne Essen
- NCT WEST Essen, Cologne
- NCT LOCATION
- DTKK LOCATION



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Text

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Graphics and Design

goldmarie design
Broda & Broda GbR | Münster

Picture credits UME

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