

The Life of Others – Helmut Pahlke

7 June 1949 – 30 September 2010

“Life is a journey not a destination”



“ex juvantibus” experimental design – Demonstration of a cleaning problem in non-dismantable surgical devices, using a very basic approach



Helmut Pahlke is once again one step ahead ...

I first met him in 1993 at Moabit Hospital Berlin, because the manufacturer for whom I was working at that time had a problem with non-dismantable tubular instruments, designed for the field of minimally invasive abdominal surgery. Helmut loved problems. He could never say No and was therefore given one task after the other. He invested endless energy in finding solutions.

“Why is everyone talking about disinfection when we can’t even manage to clean the instruments?”

To prove that there was, indeed, a problem with cleaning, he set up a wash-tub, fitted a plastic cap to the distal end of the used tubular instruments, where the scissors and forces are placed. Next he fitted a surgical suction device, and we could see the reddish coloured liquid flow out. That was our first joint experimental design, something that was characteristic of his way of working. What have I at my disposal to solve a problem?

Helmut concentrated on the essentials. He had no interest in engaging in an academic discussion about suitable “process challenge devices (PCDs)” or medical device “simulators”.

Test devices? One took a problematic instrument, arthroscope or flexible bone reamer. Test soil? One took one’s own blood. Skin compatibility of a new formulation of washer-disinfectant agent? One immersed one’s forearms into the prepared solution and simply waited, recorded the results and described the skin changes

noted over the next few days (and weeks). The washer-disinfectant is not producing good results? Here he was known to make changes to the programmes or tried out cold precleaning, without any chemical products whatsoever.

And that was how our first meeting soon gave rise to a working relationship, in which at times I appeared to bear responsibility for the problems and he for the solutions. He was happy for me to record everything, compile reports for manufacturers and even sell to the public the task definition and associated solution: the firm Chirurgie InstrumentenAG Berlin came into being. An extended workbench for “para” clinical testing of medical devices in processes that were poorly structured. The final focus of our examinations and evaluation was always on the surgery department, on reprocessing, since our activities were always conducted in and with hospitals.

For ages now it has no longer been Moabit Hospital, which became closed to us – at times we camped out in a laundry room with our office. We received enquires from the various regional hospitals, and then also from hospitals in other regions. I recall situations when, because of serial process tests conducted on reprocessing equipment, Helmut not only spent the night in the office but even in the “sterilisation department”, so that he could continue his experiments once the programme had reached its end.

Helmut could get worked up time and again about how little the manifold nature of the duties of the “downstairs members of staff” were valued. Apart from dexterity, these call for technical and organizational skills; the standard of hygiene needed makes an understanding of medicine indispensable, otherwise one could not comprehend the barriers provided by protective clothing or why wearing jewellery was banned while on duty.

As is well known, to date there is still no officially recognized job description for a Sterilization Technical Assistant. What did he do? Year after year, he crisscrossed Germany promoting the Specialist Training Courses I – III, and expertise, devised by the German Society of Sterile Supply (DGSV). This he did on behalf of the Brandenburg Training Institute for Medicine and Social Affairs (Bildungswerk für Medizin und Soziales – BBW e. V.), and with the blessings of his employer.

In the meantime, I, or we, had set up a successful firm, and every year he drove 10,000 throughout Germany to help with this venture. Because that is how he viewed his work, which was his life. He was interested in other people’s life; he was happy if he could persuade people, help them. And, in any case, he was right!

This was not always well accepted, he complained about a lot, also complaining at times to members of staff, but in the process learned to become ever more persuasive. When he was not able to do something, he set about teaching himself how to do it. A qualified nurse, he initially wanted to become a window dresser. Working first as a nurse in dialysis, he soon began to assume more technical duties in the sterilization department.

Should he have his son explain to him the workings of a computer? Business management analyses for hospital management? Hospital planning? There was so much to learn! And his best pupil A. Hartwig was always there, motivating him with her questions to continue his quest for further development. Sometimes this was also simply driven by existence,

because he never did anything just for himself, very reluctantly for money, but willingly for others.

Time and again he stressed the importance of cleaning in the reprocessing chain, without which disinfection of medical devices was hampered. But also the use of physical measuring systems for chemical and biological evaluation of the final results in the late 1980s attested to his pio-neering spirit in the use of a now rapidly progressing reprocessing technology. The more or less accepted indicators and simulators were a welcome field for critical discussions, but containers too became increasingly caught in the crossfire, since in the meantime innovative tray systems had appeared on the market.

Devoted CSSD staff members like Helmut Pahlke raised such questions;

then they addressed such questions to the manufacturers, if they related to medical devices, or to operators if they concerned medical device management and processes. When he used the "I form" of address one knew he did so to assume personal responsibility, to have himself judged on the basis of what he was able to deliver. When working with others, he then consistently set about outperforming all others. That gave rise to a special humorous saying: "One's choice of doctor is a confidential matter", was something he was often heard to say.

Some manufacturers are today grateful for these encouragements, because they have made important changes to their products or because they have, indeed, at all been able to design a device. We, who worked with him, learned from him, taught him how to work with others and have place his trust in the team.

This explains the success of Chirurgie Instrumenten AG Berlin in dealing with companies set up as from 2001: Bringing to fruition the ideas and work of Helmut Pahlke – he was finally listened to. The Medical Devices & Processes FORUM has since 1999 served as a platform to discuss the progress made in our field and convince oneself of the validity of one's working practices.

On 30 September 2010, Helmut Pahlke took his final step, departing this life aged 61 years. Minimally invasive surgery was unable to save him. His hour had come, and he had to wait a long time for it. We miss you, Helmut!!!

Thomas W. Fengler

On 30 September 2010 I lost in Helmut Pahlke a good friend, a mentor but also a critic. Since the mid-1990s Helmut had been helping me thanks to his constructive criticism, which was not always easy to accept, so as not to lose track of the practical implications of our laboratory tests. Most of the knowledge I gained about the working practices of a sterile supply department came from Helmut. His expertise made a great impact on me



Dr. W. Michels and Helmut Pahlke at a workshop in Santiago de Chile, Universidad de Finis terrae

when developing and testing reprocessing procedures. In particular, the practical feasibility of any endeavour had to withstand his rigorous scrutiny. Developments, in which he often played a pivotal role, were put to the test in our laboratory. Often he presented me with new developments, saying: Klaus have a look to see if that will also work out. In all the years that we worked together, Helmut passed on his new insights during teaching activities and workshops. While he held firm opinions of his own, he was willing to be persuaded by others provided they had sound arguments.

We were together on one of his last business trips, together with Dr. Michels from Miele, in July/August 2010 in Chile and at the WFHSS Congress in Brazil. At a workshop in Santiago de Chile he gave such a thorough account of reprocessing of minimally invasive surgical instruments, arrangement of medical devices in the insertion cart, while explaining the potential problems encountered, that there was not enough time available to answer the many questions raised by the audience. Spontaneously, Helmut arranged appointments with hospitals so as to provide assistance on site. Instead of making allowances for his illness and taking a few days rest, he wanted to help and impart his knowledge to others: "Now that I'm here I can help, was his motto".

Right up to the very end he never gave up, and still had major plans. His serious illness prevented these from coming to fruition. Helmut has left more than his mark. We will miss his criticism and advice.

*Klaus Roth
On behalf of SMP GmbH*