

A reverence for life in turbulent times

→ Janet Fricker

A young child in wartime Germany, **Stephan Tanneberger** grew up to take a lead in oncology in the communist East, which achieved some of the lowest cancer mortality rates in Europe. His career was cut short after reunification, but Germany's loss proved a gain to the developing world, and to Italy, where he still works ensuring that patients are able to die at home and in dignity.

Grand themes of war and peace dominate the life and work of Stephan Tanneberger, the oncologist who first made his name running a world-class cancer institute in East Berlin, before reinventing himself, following reunification, as a palliative care specialist in Italy. Welcoming the opportunity to reflect back on a life dominated by the major historical events of the 20th century – World War II, the Cold War, the fall of the Berlin Wall – Tanneberger explains how his traumatic childhood experiences, where hunger was an everyday occurrence, hardened his resolve to seek both global peace and a peaceful end of life for patients.

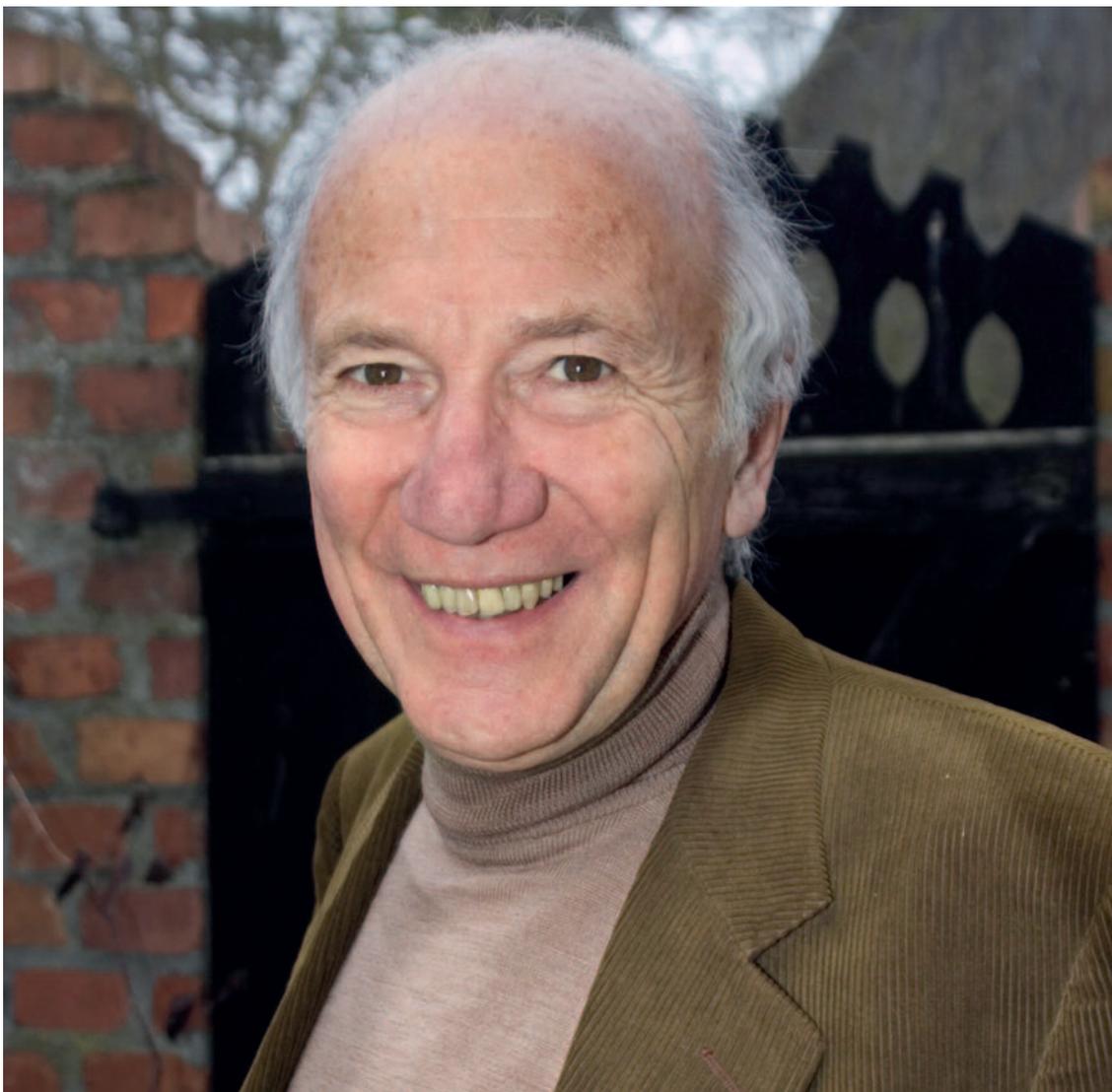
Born in 1935 in Chemnitz, an industrial city in Saxony, Tanneberger was just three when Germany invaded Poland. At first, his family were little affected by world events. “Everyone saw the war in a positive light – it made Germany appear more powerful. As children we were excited by the chocolate sent home by soldiers victorious in Netherlands and France. But I remember unsettling glimpses of Jewish children wearing the yellow Star of David on the streets, and my mother's distress at being powerless to help them.”

It wasn't until the prolonged siege of Stalingrad, in 1942, that most Germans became aware of the reality of war. “It represented a change in our perceptions. I witnessed the raw grief of my mother's friends who lost sons,” said Tanneberger.

Tanneberger's father Erich, a 42-year-old town hall official who had joined the Nazi party in 1938 as a condition of keeping his job, was called up to protect supply trains travelling to the Eastern front. That same year, allied bombing of Chemnitz started in earnest. “I've still got vivid memories of sitting enfolded in my mother's arms, listening to bombs exploding round us, wondering whether we'd be next.” The pattern of their normal existence broke down; days were spent catching up on sleep instead of attending school.

On March 5 1945, in operation Thunderclap, Chemnitz was attacked by 233 US and 760 British aircraft, razing the city to the ground. Their apartment building took a direct hit. Realising it was futile, the family abandoned attempts to fight the fires, and salvaged their possessions.

“Mother kept her head, taking only items necessary to keep us alive – bedding and small valuables



we could sell for food. My 14-year-old brother Konrad worked like a hero against the disaster of that night.”

There was no electricity or running water, and they were forced to lead a hand-to-mouth existence, sheltering in bombed out buildings until friends gave them accommodation in a garage. Days were spent scavenging for food and water – and trying to conserve their energy. “My mother pawned her rings to buy bread, but night after night we’d go to bed hungry. Our main goal was to survive,” said Tanneberger, remembering how his mother sacrificed her own rations for her children.

“The fact we survived is a tribute to her love. She was a wonderful woman.”

Eventually, the family were billeted in Niederwiesa, a small village outside Chemnitz. There, Tanneberger remembers the joy of having a permanent roof over their heads, and the surprising kindness of the occupying Russian troops, who gave the children bread and let them ride their ponies.

School resumed in September 1945, bringing a semblance of normality, though food shortages continued. “Although hungry we were energised and full of hope. There was a real desire to work for a better world,” says Tanneberger, who seems to

have been remarkably mature for a 10-year-old. “I worked really hard at school because I saw this as my route to becoming a professional, realising early on that getting a job was the best way of helping my mother.” As a school student, he excelled at science, and spent spare time playing football and competing in athletics events.

It wasn't until 1946 that his father came home again, released from a prisoner of war camp. “For 18 months we hadn't known whether my father was dead or alive. He returned an old man, totally malnourished, with bad oedema in his legs.”

As a former member of the Nazi party, the only employment open for him was back-breaking labour mining uranium in the mountains south of Chemnitz, so Erich was again forced to spend long periods away from his family, this time to earn the money to enable them to buy food. “World events robbed me of a childhood with my father. Between 1941 and 1951 he was away from home and completely out of my life,” says Tanneberger.

REVERENCE FOR LIFE

In 1954 Tanneberger enrolled at Karl Marx University of Leipzig to study chemistry. Inspired by the writings of Nobel Peace Prize winner Albert Schweitzer – a priest turned doctor who expressed his philosophy on the ‘reverence for life’ through founding a hospital in French Equatorial Africa – Tanneberger determined to study medicine after completing his chemistry degree in 1958. His decision was warmly supported by his professors Eberhard Leibnitz and Ullrich Behrens.

He paid his way through medical school with a job in the pharmaceutical company which was financing labs in the chemical institute of the Academy of Sciences. For years he followed a punishing



Ward round at East Berlin's Robert Rössle Institute. Tanneberger became director of this prestigious cancer centre at the tender age of 38

schedule, working for the company between 7 am and 9 am, then off to medical school between 9 am and 4 pm, returning to do an eight-hour shift at the company between 4 pm and midnight. “I was perpetually on my bike, pedalling furiously between the two centres,” he remembers, nostalgically.

Graduating in 1964 with a medical degree and a PhD, he saw oncology as the perfect way to combine his basic science background and humanitarian interests. He started work at the renowned Robert Rössle Clinic in Berlin (the cancer centre of the Academy of Sciences), gaining experience in treating cancer patients, and taking qualifications in internal medicine.

Unused to the concept of free time, he spent his evenings in the lab, researching chemotherapy – a rapidly developing field stimulated by the discovery that cancer could be treated through the therapeutic

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tic application of chemical warfare agents. Aware that chemotherapy did not work in all patients and that combining these highly toxic drugs could be very dangerous – and decades before his time – Tanneberger had idea of ‘individualising’ treatment using only the drugs most effective in that patient. He took cancer cells from individual patients and exposed them to a variety of chemotherapy drugs in the test tube to see which proved most effective. The group performed clinical trials to see if their predictions had clinical relevance.

Although ultimately let down by primitive methodology, Tanneberger published a number of ground-breaking papers, and brought the concept into the public arena. The prognostic assays now on the market and targeted chemotherapy vindicate his early ideas.

A LEADERSHIP ROLE

Burning the candle at both ends brought Tanneberger to the attention of Hans Gummel, a distinguished cancer surgeon and director of the Robert Rössle Clinic. Late one evening in 1972, while Tanneberger was still toiling over his test-tubes, he took an unexpected phone call from Gummel, who requested him to come directly to his home. A man of few words, Gummel said, “The people in the Academy believe I need a successor. That will be you.” End of conversation. Tanneberger, whose first emotion was complete shock, recalls, “At the time I was 37, and in a very junior position – the last person to head up an international institution with 350 beds and 1,000 staff.”

A few months later Gummel died suddenly of a stroke, leaving a power vacuum at the cancer centre. To compensate for his lack of experience, Tanneberger was sent on a year-long programme visiting cancer centres around the world, including Roswell Park Memorial Hospital in Buffalo, New York, the Karolinska Institute in Stockholm, Vienna’s Institut Krebsforschung, the All-Union Cancer Centre in Moscow and the Imperial Cancer

Research Fund in London. “The opportunity to take time out to learn managerial skills was a great gift to me,” he says.

This was not Tanneberger’s first experience of overseas travel and the West. His interest in cell biology and tissue culture had given him access to the international science stage, when he became a member of the European Study Group for Human Tumour Cell Investigation. Here he attended overseas meetings with people like Jack Ambrose, Sam Franks, Gio Astaldi, Hans Limburg, George Barski, Marc Mareel and Luciano Morasca. Visiting West Germany he had his fair share of ‘John le Carré’ experiences, where attractive women knocked on his hotel bedroom door late into the night, declaring their undying love. “It was Cold War,” he says with a laugh. “I never felt tempted to defect. The GDR had provided me with ten years of education, and I felt obliged morally to repay what I received. Besides, my family were in East Germany.”

In 1970 Tanneberger married Sigrun, a theatre student he met while first working in Berlin. Their children, Thomas (an agriculture publisher and journalist), Katharina (a psychiatrist) and Franziska (an environmental scientist), were born between 1970 and 1978. With Tanneberger working long hours and travelling a lot, childcare was left to his wife. “She did a great job, and I’ve always had the philosophy that it’s important to spend quality time with children. The small amounts of time we had together were highly organised, and on holiday I taught them all to ski or sail,” he says.

CANCER CONTROL IN THE GDR

Cancer care was well organised in the GDR, remembers Tanneberger. Tobacco advertising was not permitted and screening systems were in place, with Pap smear programmes introduced in 1976 for cervical cancer, lung X-rays offered to everyone over 40, and a programme to teach breast self-examination to women. The country had a national cancer registry and a national

cancer plan, which included the recommendation that surgeons should only operate if they performed a minimum of 100 similar procedures each year. The net result was that cancer mortality in East Germany was significantly lower than in West Germany. Tanneberger's institute was appointed a WHO Collaborating Center.

Tanneberger felt that the GDR had a great deal it could teach other countries about cancer organisation. In 1978, while director of the Robert Rössle Institute, he joined the UICC (International Union Against Cancer) faculty to teach doctors in India about chemotherapy. In this capacity, Tanneberger had memorable talks with Indira Ghandi, then prime minister, about the cancer situation in her country and entered into a correspondence with her. The visit sparked in him an enduring interest to help cancer patients in the developing world.

On the downside, says Tanneberger, GDR medicine lacked not only instruments and drugs, but also nurses and cleaners, due to the lack of immigration. "Every day we had to think creatively about how to get hold of new drugs, equipment and staff." Eventually he joined the Socialist Unity Party of Germany (SED). "To help my patients I felt that it was really important to get to know influential people. I also had to keep up relations with the STASI – the secret police – because this was the single institution that could help if our western equipment was out of order. For the benefit of my patients I'd have been willing to make a contract with the devil himself," he says, adding that "my partners in the GDR establishment were not devils, but politicians making errors, like myself, including people who had fought many years against Hitler, like my friend Hans Lautenschläger."

Towards the close of the 1980s Tanneberger found himself 'engaged' by the idea of 'perestroika'



Swords into ploughshares. This former Nazi military prison in Anklam, north Germany, is now home to the Otto Lilienthal Peace Centre, which Tanneberger initiated in 2004 and which occupies much of his time and energy

that was emerging in Russia. At home there were rumblings, with staff meetings called to challenge his authority. "The clarion call was 'Remove your chiefs'. Questions were asked about my foreign travel, the director's privileges (like a personal parking space) and my membership of the SED," he says. "When I could no longer see any chance of continuing to work for my ideas, I took up the President of the Academy of Sciences' offer of extended leave," he says, adding that it was the open hostility of former friends and colleagues that he found most upsetting.

Tanneberger never returned to the job: after unification less than 10% of university professors from the GDR retained their chairs. "An entire generation of academics was eliminated – it was both a personal tragedy for them and for Germany, which lost so many good brains," he says.

Determined to continue working, and to support

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his family, Tanneberger was employed between 1990 and 1991 as a consultant to the WHO, undertaking fact-finding trips to India, Bangladesh, Korea and Albania to gather evidence to develop cancer control programmes. “The break was a godsend, giving me both time to reflect on what had happened and the opportunity to do something tangible for developing countries,” said Tanneberger.

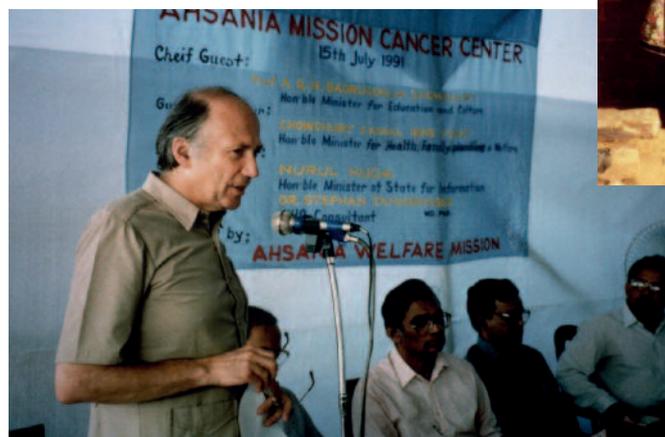
SUPPORTING DIGNITY AT THE END OF LIFE
 Salvation, and the start of a totally new chapter in Tanneberger’s life, came in the form of a job offer from the Associazione Nazionale Tumori (ANT), a non-profit organisation based in Bologna, Italy. ANT, launched by Franco Pannuti in 1978, promotes the philosophy of ‘eubiosia’, guaranteeing terminally ill patients the basic human right of dignity in their own homes until the end of their life. The term ‘eubiosia’ was chosen, says Tanneberger, “to counteract the triumphant march towards euthanasia” in Europe, which ANT sees as the medical and social inability to achieve a harmonious end to biological life.

Taking up the post of head of quality control in 1993, Tanneberger’s job was to

oversee the work of the 250 doctors operating the ‘hospital at home’ initiative in the community.

Practically every day Tanneberger went into four or five patients’ homes – he estimates that overall he met an astonishing 20,000 families living with cancer. He saw first hand the suffering of families, something he says doctors working in hospitals rarely have the opportunity to fully appreciate. “We should never consider patients in isolation, and we should never forget that, for the doctor, an operation or any examination is a ‘routine’ procedure, but for the patient it is often a unique event in his life.”

The experience inspired him to write a book,



An internationalist. Tanneberger has always looked for ways to put his experience to use in poorer countries.

- ▲ Visiting a family in New Delhi, 1992, while working with CanSupport, which provides home-based palliative care
- ◀ Presenting proposals for a national anti-cancer plan for Bangladesh to leading policy makers, including the ministers for health, education and information, 1991



One of My Family has Cancer: What Can I Do?, which provides practical advice for relatives on things like caring for the dying and how to talk to them. From his time at ANT he feels strongly that adult children taking care of their dying parents should be given the same employment rights to stay at home as parents caring for new-born children. This view was reinforced when he extended the ANT programme to developing countries, and found that cancer patients in places like India were never alone, and received far more support from family members. “In the old times people died with their families gathered round to say goodbye. Now all too often families call the emergency services and they die in the intensive care unit. Families have to learn to let nature take its course,” he says.

There are also implications here for euthanasia, he adds. “The real risk of legalising euthanasia is that the state will not feel pressure to develop palliative care.” Tanneberger is also troubled by the aggressive use of chemotherapy near the end of people’s lives. “We are living now in a time of overuse of anti-neoplastic drugs. I have changed a little bit from a front runner to a warner of cancer chemotherapy,” he says smiling.

While professionally rewarding, the move to Italy led to the breakdown of Tanneberger’s marriage. He and his wife, who remained in Germany, gradually drifted apart, going their separate ways in 2000. The break, he says, was the ultimate price the family paid for the fall of the Berlin Wall. Prior to that, they had been a ‘good family’.

Today Tanneberger is semi-retired, although still

Peace work. Tanneberger’s commitment to a world free from war brought him into contact with Pope John Paul II, in 1982, when he joined a group of scientists in Rome to elaborate the text of the Vatican’s Declaration of Prevention of Nuclear War

working as a consultant to the ANT, and as a part-time professor in palliative oncology at the University of Bologna. His other duty is to fight against cancer in developing countries, working with the European School of Oncology (ESO) and the International Network for Cancer Treatment and Research (INCTR). “I try to meet the two great challenges for oncology in the 21st century: dignity of life by better palliative cancer care in the industrialised world – where cancer is becoming more and more a ‘natural cause’ of death – and less death from cancer in developing countries, where cancer is exploding.”

Hobbies include sport, as always in his life, and writing. Drawing on his experiences in both war time and oncology, he has published two books on the lives of the ordinary people he encountered.

GLOBALISATION FOR PEACE AND HEALTH

Undoubtedly his overriding enthusiasm is for the Otto Lilienthal Zentrum für Friedensarbeit, a peace centre that he initiated in 2004 in Anklam, north Germany. This idea developed over decades out of his meetings with outstanding persons like Pope John Paul II, Linus Pauling, Umberto Veronesi, Nikolai Blochin and Vittorio Prodi.

“The \$1,400 billion spent globally on war for oil each year would be far better spent solving fundamental world problems like cancer, climate change, the energy crisis and AIDS. We need this money to control the real threats to the world, rather than the man-made ones,” he says.

Oncologists, he maintains, have a vital role to play. As he says at the end of *Cancer in Developing Countries*, a book he co-edited with Franco Cavalli, “We live in a world of military and financial globalisation but we need a globalisation for peace and health. Oncologists can make significant contributions to overcoming this historical error, and will be motivated by the enormous and unnecessary suffering of millions of cancer patients.”

Until close friends tell him he is “too old to talk”, Tanneberger vows to continuing fighting his personal battles against war and cancer. On current form he hasn’t got anything to fear for a while.