



Initially founded by three fresh doctors, the start-up MiaMed designs a web-based, user-oriented medical study aid software, that is supposed to become a globally accessible source for validated medical knowledge. I visited them for just another day at the start-up office, had a very good coffee and met one of the cofounders. Working in a homely and creative atmosphere does not shut its doors for doctors. And one might have a much broader impact doing medicine outside the hospital. While completely forgetting time.

Startup for Change

We were four friends leaving the hospital together. Katrin became a musician. Irena went into psychiatry and started her anti-depressant Botox venture. And then there is Myrna. She is a quirky, very social young lady, loves photography and film, theatre and travelling. Being the youngest of our group she is still searching inside a mountain of passion for a thread that leads to something beautiful. Part of the journey should take place somewhere on the other side of the planet. To combine her interest and earn the necessary centavos for the trip she took on a job as an editor at the start-up MiaMed.

I lock my bike to a sticker-pasted pole and gaze at the huge entrance to this typical 19th century building from the industrial era. It's located right in the creative epicenter, in one of the hipper areas in Berlin. All around, people are living their life in coffee places, bars, the obligatory Späti and the neighboring park. Cars, cyclists and metro pass by the lively street, which is covered by the first few fallen leaves from tall trees. The huge door buzzes and gives way into a sacredly bright and royal staircase.

The initial idea came to the minds of three friends studying together for med school finals in Göttingen, a small place in central Germany. This exam is known to be an obstacle and requires several months of preparation.

"There was a CD-based software with questions, but it was so frustrating to use. It was technically very simple, it always crashed and you could never come back to anything, because you would not find it anymore." Sievert, one of the cofounders, sighs. "Also the content was almost entirely written by students and not even cross-checked. So while sitting in front of it every day, we thought, someone has to do something about it. It was so obvious."

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On the ground-floor Myrna stands in an apartment-like hallway with wooden flooring, high ceiling and stucco. No white coat of course, but panties and a comfy cardigan. Cables are running around every corner and in between boxes and all different sorts of tables are arranged in the middle of the rooms, each of them armed with one or two big screens and a notebook, revealing smiling eyes. They look like a bunch of happy kids having a gaming-session.

"All three of us were not living up to the standard idea of a doctor's career and to specialize as soon as possible. We were interested in a lot of different things. We were still living in our student environments and did not need much. We did not have much to loose at the time, so we just started with borrowed money from family and friends. Of course we did not have a doctor's salary, but that was not the point." Sievert is wearing sneakers and a shirt that looks like a forever favorite. He might still not need much.

Myrna takes the flight of stone steps walking shoeless, on socks. "Right now we are occupying three floors. The building is owned by a lawyer, who has his office on the first floor, the two upper floors and the ground floor are used by MiaMed and there is still not enough space."

MiaMed rapidly expanded after the success of their first release of 'Amboss' in 2013. By now they have added a part for preclinical students and a part for medical professionals. "The idea is that it can follow you along all the way from preclinics to professional level and that you can find accurate information adapted to your current needs. A young, beginning doctor like us does not always have very specific detailed questions. When you see your first patient in the E.R presenting with a stroke, your question will be 'lysis, yes or no?' This is our user-

based approach that makes our platform more attractive than other providers, offering only very specific information. Our software grows with the user, also language-wise."

On the next floor it becomes more apparent that doctors run this place. A skeleton (that misses one arm) is greeting next to an entrance. At the wall an old-fashioned light box shows x-rays of lung tip tuberculosis. It complements the Persian carpet and grand-ma's flower-pattern-embroidery couch. It is more than obvious that this is a creative space and a medical institution.

"I have worked in anaesthesiology for one year, too. But if you have done this before, you are kind of spoiled. Here we can create so many things and how we work together is completely different. There you work to rule and you have to execute exactly what you are told. There is no room for thinking about something new. It is only about that your sick people are being passed in and out in time and the next one is sleeping. That is all that counts.



The large kitchen spreads the ultimate feeling that I am just coming for coffee in a shared flat. A mattress is leaning against the cupboard. There is another bed with pillows. "I think someone stayed over night." Myrna makes a sandwich and coffee. The fridge is stuffed with all kinds of colorful vegetables, cheese, beer, wine, milk. "There is an intern who is responsible for groceries and someone cooks for lunch every day." We sit down on benches at the large wooden table with bowls of fresh fruit. She already told me, she learns a lot while editing the medical content for the software. There is another thing she learned. Shaping figures with the foam of the latte.

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"Of course the working circumstances were not very convenient either. I do work a lot here, too. But it is the inflexibility that makes hospital work so annoying. What struck me most was, that every time I looked at the clock in the operation theatre, I thought 'how long to go still?' and now I am looking at the clock and startle 'so late already, but I still wanted to do this and this and this..! That I found very glaring."

While we are talking, other people enter the room. It is a funny mix of bright people, everyone looks different, from unimposing to eccentric, but it smells like team spirit. When we walk around later, they are all back on their chairs, busy bees, but no stress. There is a lot of exchange. A comfortably productive atmosphere. The doctors are glad to show me the backbone of the program and how they think about explanations to the exam questions. The graphic designer proudly points at his work on the wall - internal organ anatomy. Sievert has his desk in one of these rooms, together with everybody else.

"Here, we have a lot of creative tasks, even doctors can shape things and come up with new ideas. Something, that we are not usually used to. But it does exist." He smiles. "Of course we have graphic designers and software designers, who know, what works. But we can always think with them from the medical perspective and what will be accepted by the target group."



By now there are approx. 130 people working for Miamed, which comes down to 80-90 full-time positions, of which one third is doing home-office. Many are young doctors, but also specialists work on validation of the content. Everybody has a permanent employment. There is a lot of trust and loyalty. Everyone has ideas. And everyone has a voice.

"I do not feel like a boss. We have a very loyal environment here. There is no hierarchical top-downstructure. It's not like someone has a better opinion, just because he was part of the team for a longer time. We usually take decisions together. Plus we have three CEOs, which I am not. I am 'just' one of the founders. And we split the work. I work mostly on the content and coordinate new projects."

The project Myrna is working on aims at a new version in English language, which is supposed to be the first step into a global expansion and a big step into social impact.

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"Of course we are already helping patients indirectly by delivering actual information and eventually not only in Germany but on a world-wide scale. In English language we can reach approx. 2/3 of the global population and as soon as they have an internet connection, which is also becoming more and more accessible these days, they can get access to knowledge. Sometimes it is not easy to filter this bunch of information. So when you manage to create a gateway, where everybody knows he will get valid information for professional users, that would change a lot."

We get to the top floor with a balcony and a view. In Germany they seem to have a large impact already. 85.000 users benefit from their work by now. For a small penny of only 5EUR per month. Miamed makes it a main goal to connect to the users. And that pays off. "Thanks for the best learning software of all times." says one comment on their website. Another one goes "It was more than time for a program like this, but you already know. How fantastic I think it is, I cannot even tell you."



Dr. Sievert Weiss, co-founder of Miamed

"Of course, I am proud to see what grew out of it. But you do not think about how cool it is every day. It becomes routine, too." Sievert is a very unassuming, calm person with seemingly natural will-power and bravery. "In the beginning you clearly don't think that it will become something like this. You sit in front of a white sheet of paper and you don't have anything yet. And then you think 'god, how are we going to do this.'"

I leap back down the royal staircase to leave this dynamic hub of inspiring people. I tell Myrna goodbye. It's good to see her so happy these days. After our dark and exhausting hospital times she now got back to her shining lightness. She fits this place or the place fits her. Because in contrary to the clinical work, there is growth in here, there is a sense of future and a wind of change.

And everyone can shape a part of it.

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