Fast Action Can Save Lives After Head Injury

The death in March of actress Natasha Richardson following a ski accident focused the nation's attention on the issue of head injuries, which kill more than 50,000 Americans each year. But that number is just a small percentage of the estimated two-million significant head traumas that are sustained by people of all ages.

While these types of injuries are not always life threatening, experts caution people who have had a head trauma and those around them to pay careful attention to early signs of serious injury. These signs may include drowsiness, abnormal behavior, persistent headache, stiff neck, vomiting, memory loss or loss of consciousness. If the head injury is minor, symptoms often dissipate quickly, says Dr. Wally Ghurabi, director of emergency

Continued on page 7
Services in Santa Monica Continue to Expand

With the exception of organ transplantation, nearly all of the services offered at Ronald Reagan UCLA Medical Center in Westwood are now available at Santa Monica-UCLA Medical Center and Orthopaedic Hospital. Some services — including geriatrics, general surgery, sleep-disorders center, orthopaedic/spine surgery, cardiology, neurology, radiology and pain management — have been offered at the Santa Monica campus of UCLA Health System for several years. New UCLA services at Santa Monica include general medicine, general pediatrics, advanced gastroenterology endoscopy (including ERCP and endoscopic ultrasound), oncology services, and specialty surgical services such as breast, colorectal, and head and neck.

Whether patients are treated at UCLA Health System’s community clinics or hospitals in Westwood or Santa Monica, they receive the same exceptional care and compassion for which UCLA is known. National quality-rating agencies have recognized our clinical excellence and have named our geriatric services No. 1 in the country.

UCLA Launches Institute of Urologic Oncology

UCLA’s new Institute of Urologic Oncology brings together a multidisciplinary team of scientists and physicians to develop leading-edge therapies for the treatment of prostate, kidney, bladder and testicular cancers. Disciplines include urologic oncology, medical oncology, diagnostic and interventional radiology, pathology, nursing, basic sciences and clinical trials.

“This is a one-stop shop for patients. All the experts are involved in their care, all working together,” says urologist Arie Belldegrun, M.D., the institute’s director and a researcher at UCLA’s Jonsson Comprehensive Cancer Center. “Our goal is to bring all our resources to the patient, rather than the patient going from office to office to see everyone they need to see.”

Patients also benefit from the institute’s top diagnostic tools, expertise in robotic and minimally invasive surgery and the combined experience of the experts, who often treat the most complicated urologic cancer cases. In addition, a joint, multidisciplinary board representing all genitourinary specialties meets at the institute to discuss complicated and challenging tumor cases referred to UCLA.

“With this approach, we are able to get leading-edge therapies to patients faster, taking them out of the lab and into practice in much less time,” says Jean DeKernion, M.D., chair of the UCLA Department of Urology.
The widely publicized notion that autism is linked to childhood vaccines has no basis, and parents who decline to have their children immunized are exposing them to unnecessary health risks, says UCLA pediatric infectious-disease specialist James Cherry, M.D.

The scientific evidence is overwhelming that neither the measles-mumps-rubella (MMR) vaccine nor the vaccine preservative thimerosal is associated with autism risk, Dr. Cherry says. And earlier this year, a special court, made up of a panel of federal judges that considers cases involving alleged vaccine-related injuries, determined, after hearing testimony for two years, that there was insufficient evidence to prove an association between certain early-childhood vaccines and autism. The likely reason many parents have suspected a link, Dr. Cherry notes, is the timing association — the first dose of MMR generally is given between 12 and 15 months of age, and the first signs of autism can become apparent early in the second year of life. “A number of parents come in with misinformation,” Dr. Cherry says. “It is up to pediatricians to be persistent in explaining that these vaccines are safe and important.”

The choice to not immunize can lead to serious health consequences. The very diseases the vaccine prevents, for example, can themselves lead to autism-spectrum disorder, Dr. Cherry says, citing H. influenzae meningitis, pneumococcal meningitis, congenital rubella and measles encephalitis as examples.

There also are broader community-wide implications. “If everyone around you is immunized, you may be protected by ‘herd immunity,’ because the disease is not being transmitted in your community,” Dr. Cherry explains. “But we are now beginning to see measles and other outbreaks in communities where large segments of parents don't vaccinate their children because of misinformation.”

For more information on studies about vaccines and autism, go to: www.uclahealth.org/vaccines-autism

Early Intervention
Key to Treatment

It is not entirely clear why the diagnosis of autism and autism-spectrum disorders is on the rise, although part of the increase is attributed to a greater awareness among parents and healthcare providers, as well as more widespread use of assessment tools.

Regardless, early identification of the disorder is critical, says Tanya Paparella, Ph.D., co-director of UCLA’s Early Childhood Partial Hospitalization Program (ECPHP) at Stewart and Lynda Resnick Neuropsychiatric Hospital at UCLA. “It is well established through research that the earlier you intervene, the better the results,” she says. “We also know that the interventions should be intensive, structured, consistent, integrated and individualized, with parents as full partners.”

Autism represents a wide spectrum of diagnoses. “It’s very hard to summarize autism because there are so many different presentations,” says Stephanny Freeman, Ph.D., co-director of the ECPHP.

While no two cases of autism spectrum are the same, the one common thread is a social communication disorder, Drs. Paparella and Freeman explain. Often, early signs can be seen in children beginning at about 12 months, when the child seems not to be responding to language — this can at first be misinterpreted as a hearing problem. Other signs include lack of hand gestures, sharing of experiences and social connections — parents may have trouble engaging their children in a game of peek-a-boo or pat-a-cake, for example.

At that point, Drs. Paparella and Freeman note, a pediatrician can administer a simple screening test, the Modified Checklist for Autism in Toddlers (MCHAT), to determine whether a referral is needed.

For more information about ECPHP, go to: www.semel.ucla.edu/ecphp
Prostate Cancer:

To Test or Not to Test?

That remains the question as two major studies offer mixed results about the efficacy of routine screening.

Two long-awaited studies in the United States and Europe to determine whether routine screening for prostate cancer is effective in saving lives have been released, with mixed results. They are the first to be based on large, randomized populations of men, who were followed for seven to 10 years. Both studies of the widespread prostate-specific antigen (PSA) test, which measures levels in the blood of a protein that is produced by the prostate and elevated in the presence of cancer, were published in The New England Journal of Medicine.

The American study suggested that routine screening does not lead to a reduction in deaths from prostate cancer and may, in fact, put many men at risk for unnecessary follow-up tests, treatments and negative side effects. The European study reported a 20-percent reduction in deaths among men who received PSA screening.

Professor of Urology Robert Reiter, M.D., director of the Prostate Cancer Treatment Program at UCLA, says the European study, at least, “clearly demonstrated the benefit of screening.” But the question still remains open, says Mark S. Litwin, M.D., professor of urology and health services in the David Geffen School of Medicine at UCLA and the UCLA School of Public Health. “Basically, what the two studies show is that if you are screened regularly, you’re more likely to be diagnosed with prostate cancer, but the question of whether you are less likely to die from prostate cancer is a lot less clear,” he says.

The reason is that prostate cancer generally grows very slowly, and for a large percentage of men who are diagnosed late in their lives it may never become a threat — they ultimately will die from some other cause. And with faster-growing cancers even early diagnosis might be too late. But after receiving a diagnosis of cancer, many of these men may choose to have treatments such as surgery or radiation therapy that can lead to problems with urinary, sexual or bowel function. According to the findings of the study, to save just one life, nearly 50 men must undergo treatment that is unnecessary.

Thus, “the controversy is about the concept of over-diagnosis or over-treatment,” Dr. Reiter says. “Like many treatments for many diseases, treatment for prostate cancer can have complications. And so the question is: What is the benefit versus the risk that the average man may get from treatment?”

For younger men, particularly if they are in a high-risk group — they have a family history of prostate cancer or are African American — PSA screening does make sense.

Though the findings of the studies were less than definitive, many physicians still believe that the PSA is a valuable test. “If used properly, PSA screening is an excellent test to detect
None of the challenges that Barry Broughton has faced in his life would be as difficult as learning that he had prostate cancer. But after undergoing minimally invasive robotic surgery to remove his cancerous prostate, performed by Dr. Robert Reiter, Barry was back on his feet the next day, and he quickly regained his urinary and sexual function. Most important, Barry is now cancer-free.

Dr. Robert Reiter
cancer and can help the doctor and the patient choose the best form of therapy, or whether therapy at all is the right thing to do,” Dr. Reiter says.

For younger men, particularly if they are in a high-risk group — they have a family history of prostate cancer or are African American — PSA screening does make sense, according to Dr. Litwin. “If you find out at age 48 that you have prostate cancer, it probably does make a difference in terms of your decision-making and long-term survival,” he says. “If there's any group for whom at least a baseline screening makes sense, that would be for younger men.”

Ultimately, the physicians say, the decision whether or not to be screened is a personal one, to be made in consultation with one's own doctor. “Most urologists are attuned to the issue of screening, and they should be able to discuss these issues with their patients,” Dr. Reiter says. Adds Dr. Litwin: “Studies can give us valuable information, but when the patient is behind the exam-room door with his doctor, all the decisions that have to be made are very personal and are informed by that patient's life experience.”

To read interviews with Drs. Litwin and Reiter on the issue of PSA screening and treatment for prostate cancer, go to: www.uclahealth.org/QA-Litwin www.uclahealth.org/QA-Reiter

New Tool Delivers Higher Doses of Radiation in Less Time

The UCLA Department of Radiation Oncology is the first center in the Los Angeles area to install a new, state-of-the-art, image-guided device that provides more accurate, concentrated doses of radiation, allowing patients to be treated in fewer visits with fewer side effects.

The Novalis TX has three imaging modalities to track the location of tumors during breathing and other movement, allowing physicians to pinpoint the location of the cancerous tissue and position patients so that radiation is delivered with the highest precision. The device also continuously shapes the radiation beam to mirror the tumor’s size and dimensions as it rotates around the patient, delivering treatment from different angles.

“In some cases, the period needed for radiation can be reduced from six weeks of daily treatments to just three to five days because of the high doses that can be delivered using the SBRT approach,” says Percy Lee, M.D., director of the UCLA Stereotactic Body Radiation Therapy (SBRT) Program and a researcher at UCLA’s Jonsson Comprehensive Cancer Center.

“It allows us to shape the dose and target tumors very precisely to protect normal tissues,” says UCLA radiation oncologist Michael Selch, M.D. The device “will open up new avenues of radiosurgery for us, allowing us to treat even difficult-to-plan tumors with unusual shapes.”

To watch a video about the Novalis TX, go to: http://streaming.uclahealth.org/novalistx

BARRY’S STORY

None of the challenges that Barry Broughton has faced in his life would be as difficult as learning that he had prostate cancer. But after undergoing minimally invasive robotic surgery to remove his cancerous prostate, performed by Dr. Robert Reiter, Barry was back on his feet the next day, and he quickly regained his urinary and sexual function. Most important, Barry is now cancer-free.

To watch a video about Barry Broughton’s surgery, go to: http://streaming.uclahealth.org/prostate-cancer

To watch a video about the Novalis TX, go to: http://streaming.uclahealth.org/novalistx

Photography: Nancy J. Williams
Improved Lenses May Eliminate Need for Glasses

Cataract removal is a safe and effective surgery, but many patients still depend on glasses afterward for reading. Recent advances in artificial intraocular lens (IOL) designs, however, may reduce or eliminate the need for glasses following surgery.

“The newer premium lenses enhance the optics of the eyes and make people less dependent on glasses,” explains ophthalmologist Kevin Miller, M.D., UCLA Medical Center and Orthopaedic Hospital. Patients are back to their routine within one or two weeks, compared with four to six weeks following a surgical procedure, she says. Because of the potential but limited risk of inducing premature ovarian failure, the procedure is done less frequently for women who still want to become pregnant, Dr. Hoffman adds.

Premium IOLs are designed to correct either astigmatism or presbyopia. Astigmatism-correcting lenses adjust for blurred vision resulting from an irregular-shaped cornea. Presbyopia-correcting lenses adjust for the inability of the eye to change focus. The decision to place a premium IOL, as opposed to a standard lens, is dictated by patient preference and preoperative clinical findings.

“The nature and scope of visual impairment before surgery is a good indicator as to the extent to which the lens will improve the quality of vision,” Dr. Miller says. “For example, with the astigmatism-correcting lens, patients must have enough astigmatism to justify placing it. For the presbyopia-correcting lens, patients must have decent visual potential.”

Currently, less than 10 percent of cataract surgery patients receive premium IOLs, but Dr. Miller expects that number to increase as the potential benefits become more widely known. “While perfect vision is hard to achieve, the goal is to help patients see without glasses after surgery,” Dr. Miller says.

For a video about the new lenses, go to: http://streaming.uclahealth.org/focal-lens

For more information about cataracts and premium IOLs, go to: http://jsei.org/cataract_extraction.htm

New Treatment Options Available for Uterine Fibroids

An estimated 50 to 70 percent of women have uterine fibroids — noncancerous growths that tend to develop during childbearing years. Most women are unaware that they have them, but 20 to 40 percent of women older than 35 experience symptoms, most commonly heavy menstrual flow.

Treatment options for uterine fibroids have increased dramatically in the last 20 years, according to UCLA obstetrician/gynecologist Michael Johnson, M.D. In the past, physicians were likely to advise removing the growths, but today the choice of treatment — including doing nothing — is largely driven by patient preference, Dr. Johnson says.

Uterine fibroid embolization, for example, cuts off the blood supply to the fibroid, causing it to shrink. The procedure is performed by an interventional radiologist and takes about one hour, says Cheryl Hoffman, M.D., director of interventional radiology at Santa Monica-UCLA Medical Center and Orthopaedic Hospital. Patients are back to their routine within one or two weeks, compared with four to six weeks following a surgical procedure, she says. Because of the potential but limited risk of inducing premature ovarian failure, the procedure is done less frequently for women who still want to become pregnant, Dr. Hoffman adds.

Another procedure to treat small fibroids and preserve fertility involves a simple outpatient surgery: hysteroscopic myomectomy. During the procedure, a fiber-optic scope is passed through the cervix to cut out the fibroid. The procedure can also be done laparoscopically in some patients.

With procedures like embolization and hysteroscopic myomectomy more commonly available, “patients now determine when they want treatment, and select the type of treatment that works best for them,” says Dr. Johnson. He notes that, in most cases, fibroids aren’t inherently dangerous and almost never turn cancerous, and they often disappear after menopause. “For most women, it just depends on whether the symptoms are bothersome,” he says.

One exception, Dr. Johnson notes, is when fibroids are present during the reproductive years. He explains that for the vast majority of women, fibroids don’t affect fertility or the ability to carry a pregnancy, but, depending on their size and location, they can pose a risk. Such cases need to be evaluated on an individual basis, he says.

For more information, go to: www.obgyn.ucla.edu
www.urology.ucla.edu
What to Do When Hurt on the Playing Field

Most sports-related head injuries are mild concussions that typically will resolve without serious complications, but even a seemingly minor head injury should be evaluated by a physician and monitored closely, says John DiFiori, M.D., chief of the Division of Sports Medicine in the UCLA Department of Family Medicine.

Symptoms of a concussion are not always immediately evident, and the onset can be delayed even hours after the event, Dr. DiFiori explains.

Athletes suspected of having a concussion should stop playing and be evaluated as soon as possible, preferably on site. In some cases, what may seem initially to be a mild concussion may in fact be a more serious head injury. If such symptoms as prolonged loss of consciousness or persistent problems with speech, vision or coordination occur, or if symptoms steadily worsen, immediate medical attention should be sought.

Once the diagnosis of a concussion is confirmed, the athlete should rest from physical activity until his or her symptoms have completely resolved. At that point, the athlete should undergo a period of gradual increase in activity over several days under the supervision of a healthcare professional to ensure that symptoms do not recur prior to resuming full sports activity.

Signs and symptoms of a concussion include:

- Headache
- Dizziness
- Confusion
- Feeling in a “fog”
- Difficulty concentrating or remembering
- Nausea, vomiting
- Sensitivity to light or sounds
- Feeling off balance
- Loss of consciousness
- Amnesia

Head Injuries (continued from cover)

medicine at Santa Monica-UCLA Medical Center and Orthopaedic Hospital. A potentially severe head injury can cause symptoms such as confusion and disorientation, or a brief loss of consciousness followed by lucidity and then a loss of consciousness. “These are probably the most serious cases,” he says. People with persistent symptoms should seek immediate emergency evaluation, which usually includes a computed tomography (CT) scan of the head and neck.

Most serious head injuries involve either a concussion to the entire brain, which extensively damages nerve cells and fibers and usually results in a coma, or mass lesions. These lesions include an accumulation of blood between the skull and the lining of the brain, known as an epidural hematoma; a collection of blood between the dura and the brain (subdural hematoma); and bleeding within the brain tissue (intracerebral hemorrhage), explains Neil Martin, M.D., chair of the UCLA Department of Neurosurgery.

The outlook for patients with serious brain injuries depends on their overall health and how quickly they are evaluated and treated.

“An epidural hematoma can be removed by emergency surgery, and the patient will most often recover completely,” Dr. Martin says. “When there are more serious types of bleeding, such as a subdural hematoma or an intracerebral hemorrhage, patients may survive with surgery but will most likely experience long-term neurological problems.”

While surgical intervention and intensive-care monitoring are required for severe head injuries, mild head injuries usually require no specific treatment, but they should still be monitored closely.
Community Health Programs

UCLA Health System offers community programs and events to help our neighbors lead healthier lives through wellness education and the prevention of illness and injury.

**Aging / Senior Care**

**Exercise for Health**
**WEDNESDAY, JULY 22 / 2:00 to 3:30 pm**
Karen Hamill, UCLA physical therapist, will discuss how to begin and progress in an exercise program, and will teach proper body mechanics to prevent injury.

**WHERE:** Westside Family YMCA, 11311 La Grange Avenue, West Los Angeles
**TO RSVP:** (800) 516-5323

**Aesthetic Rejuvenation of the Hand**
**WEDNESDAY, JULY 22 / 7:00 to 8:30 pm**
Kodi Azari, M.D., UCLA hand surgeon, will discuss methods to aesthetically rejuvenate the hand and prevent signs of aging.

**WHERE:** Santa Monica Family YMCA, 1332 6th Street, Santa Monica
**TO RSVP:** (800) 516-5323

**Understanding Medicare**
**THURSDAY, SEPTEMBER 10 / 1:00 to 3:00 pm**
Learn about what Medicare does and does not cover, how to fill in the gaps, and Medicare drug benefits.

**WHERE:** Community Room, Burton Chace Park, 13650 Mindanao Way, Marina del Rey
**TO RSVP:** (800) 516-5323

**Oh, My Aching Shoulders!**
**THURSDAY, SEPTEMBER 24 / 7:00 to 8:30 pm**
Seth Gamradt, M.D., UCLA orthopaedic surgeon, will discuss treatments for rotator cuff tears, impingement syndrome and shoulder arthritis.

**WHERE:** Fireside Room, First United Methodist Church, 1008 11th Street, Santa Monica
**TO RSVP:** (800) 516-5323

**Successful Aging**
**THURSDAY, SEPTEMBER 24 / Noon to 1:30 pm**
Sonja Rosen, M.D., UCLA geriatrician, will share strategies to help maintain your health and well-being. Preventive measures, health screenings and methods to retain independence will be discussed.

**WHERE:** Santa Monica Family YMCA, 1332 6th Street, Santa Monica
**TO RSVP:** (800) 516-5323

**Medical Research Participation**
**TUESDAY, SEPTEMBER 29 / 7:00 to 8:30 pm**
Laurie Shaker-Irwin, Ph.D., UCLA research subject advocate and assistant professor of medicine, will discuss the issues involved with taking part in research studies: what is expected from participants (as a healthy volunteer or for a special medical condition), understanding the benefits and risks, and the informed consent process. Information about current studies at UCLA will be discussed.

**WHERE:** Fireside Room, First United Methodist Church, 1008 11th Street, Santa Monica
**TO RSVP:** (800) 516-5323

**Alzheimer’s Disease**

**Lowering Your Risk for Alzheimer’s Disease**
**THURSDAY, SEPTEMBER 24 / 10:00 to 11:30 am**
Joshua Grill, Ph.D., director of the Kagan Alzheimer’s Treatment Development Program, Easton Center for Alzheimer’s Disease Research at UCLA, will provide an update on current research about lowering the risk for Alzheimer’s disease.

**WHERE:** Santa Monica Family YMCA, 1332 6th Street, Santa Monica
**TO RSVP:** (800) 516-5323

**Arterial Disease**

**Atrial Fibrillation Update**
**TUESDAY, SEPTEMBER 8 / 1:00 to 2:30 pm**
Eric Buch, M.D., UCLA cardiologist, will discuss atrial fibrillation, the most common heart rhythm disorder in people over 50, and discuss risk factors, diagnostic tests and treatment options.

**WHERE:** Culver City Senior Center, 4095 Overland Avenue, Culver City
**TO RSVP:** (800) 516-5323

**Cancer**

**Husbands / Partners of Women with Cancer**
**MONDAYS, JULY 6 TO SEPTEMBER 28 / 7:30 to 9:30 pm**
Learn ways to support your wife or partner with cancer in a seven-week group program. Light refreshments served.

**WHERE:** 200 UCLA Medical Plaza, Suite 502
**INFO:** (310) 794-6365

**Breast Cancer Treatment**
**TUESDAY, JULY 14 / 7:00 to 9:00 pm**
Olga Olevsky, M.D., UCLA medical oncologist, will discuss the diverse biology/pathophysiology of breast cancer, and multiple modalities for the treatment for breast cancer.

**WHERE:** MIMIC Auditorium, B130
**INFO:** (310) 794-6644

**Colon Cancer Update**
**THURSDAY, JULY 23 / Noon to 1:30 pm**
Saeed Sadeghi, M.D., UCLA oncologist, will discuss screening recommendations and treatments for colon cancer.

**WHERE:** Santa Monica Family YMCA, 1332 6th Street, Santa Monica
**TO RSVP:** (800) 516-5323

**FIND MORE ONLINE**
www.uclahealth.org/calendar
Updates for Prostate Cancer Patients

TUESDAY, JULY 28 / 6:00 to 7:30 pm
This is the first in a series of updates from the UCLA Department of Urology on the latest treatments and research for prostate cancer. Scheduled topics include nutrition, robot surgery and active surveillance. Speakers include William Aronson, M.D.; Robert Reiter, M.D.; and Leonard Marks, M.D.
INFO: (310) 794-1397

Colon and Gastrointestinal Tract Cancers

TUESDAY, AUGUST 11 / 7:00 to 9:00 pm
J. Randolph Hecht, M.D., director, UCLA GI Oncology Program, medical oncologist/gastroenterologist/researcher, will discuss gastrointestinal tract cancers (esophagus, stomach, pancreas, liver) and colon cancer. The latest treatment approaches for localized and widespread disease, new targeted therapies that reduce toxicity and improve survival, current recommendations for prevention and early detection, and the effect of family history on the risk of GI tract cancers will be discussed.
WHERE: MMRC Auditorium, B130
INFO: (310) 794-6644

Prostate Cancer: New Treatments

TUESDAY, SEPTEMBER 15 / 7:00 to 9:00 pm
Christopher Saigal, M.D., M.P.H., UCLA urologist and researcher, will discuss the Prostate Specific Antigen (PSA) test, developments in the latest minimally invasive treatment for localized prostate cancer and experimental treatments.
WHERE: MMRC Auditorium, B130
INFO: (310) 794-6644

Diabetes

Diabetes Update

WEDNESDAY, JULY 29 / 12:30 to 1:30 pm
UCLA family physician Laura Conley, M.D., will discuss ways of reducing the risk of getting diabetes, and current management techniques and treatments.
WHERE: Sunrise of Playa Vista, 5555 Playa Vista Drive, Playa Vista
TO RSVP: (800) 516-5323

Diabetes

MONDAY, SEPTEMBER 14 / 11:00 am to 12:30 pm
Archana Bindra, M.D., UCLA endocrinologist, will discuss complications and medical treatments for Type 2 diabetes.
WHERE: Westwood Horizons, 947 Tiverton Avenue, Westwood
TO RSVP: (800) 516-5323

Multiple Sclerosis

Living Well with MS

MONDAYS, SEPTEMBER 21 TO DECEMBER 7 / CALL FOR DATES AND TIMES
UCLA offers a 12-week comprehensive wellness program with education, fitness, nutrition and spiritual wellness for people recently diagnosed with multiple sclerosis.
WHERE: Marilyn Hilton MS Achievement Center at UCLA
TO RSVP: (310) 267-4071

Orthopaedics

Total Hip / Knee Replacement for Arthritis

WEDNESDAY, SEPTEMBER 2 / 7:00 to 8:30 pm
Daniel Oakes, M.D., UCLA orthopaedic surgeon, will focus on treating arthritis in the hip and knee with replacements. Ways to minimize perioperative pain and new advances in implants and techniques for faster recovery will be discussed.
WHERE: Santa Monica Family YMCA, 1332 6th Street, Santa Monica
TO RSVP: (800) 516-5323

Plastic Surgery

Facial Rejuvenation

THURSDAY, JULY 9 / 6:00 to 7:00 pm
James P. Bradley, M.D., board-certified UCLA plastic surgeon, will present a live demonstration of surgical procedures to rejuvenate the face.
WHERE: 200 UCLA Medical Plaza, Suite 465
TO RSVP: (800) 825-2752 or visit www.uclaplasticsurgery.com

Exclusively Faces

THURSDAY, JULY 23 / 6:00 to 7:00 pm
Jaco Festekjian, M.D., board-certified UCLA plastic surgeon, will discuss the latest facial rejuvenation options, including skin care, injectibles, peels and surgical procedures to regain a more youthful appearance.
WHERE: 200 UCLA Medical Plaza, Suite 465
TO RSVP: (800) 825-2752 or visit www.uclaplasticsurgery.com

New Advances in Hair Restoration

WEDNESDAY, SEPTEMBER 23 / 7:00 to 8:00 pm
Jeffrey Rawnsley, M.D., UCLA head and neck surgeon, will present a live demonstration of the latest ways to recreate a natural hairline.
WHERE: 200 UCLA Medical Plaza, Suite 550
TO RSVP: (310) 570-0244

Pulmonology

The Importance of Treating Asthma

WEDNESDAY, SEPTEMBER 23 / 2:30 to 4:00 pm
Gerard Frank, M.D., UCLA pulmonologist, will discuss diagnosis, symptom relief and treatments for asthma.
WHERE: OASIS lecture room, Macy's, Westside Pavilion
TO RSVP: (800) 516-5323

Santa Monica Relay for Life

FRIDAY, JULY 17 TO SATURDAY, JULY 18 / 7:00 pm to 7:00 pm
Want to fight back against cancer? Join us at the American Cancer Society's Relay for Life in Santa Monica. Special activities for survivors.
WHERE: Corsair Field, Santa Monica College, 1900 Pico Blvd., Santa Monica
INFO: (213) 427-7295 or visit www.RelayForLife.org/SantaMonicaCA

FIND MORE ONLINE
www.uclaplasticsurgery.com
### Vision Care

**Advanced Laser Vision Correction**

**THURSDAYS, JULY 23, AUGUST 20 OR SEPTEMBER 24 / 6:30 to 7:30 pm**

UCLA ophthalmologists will discuss Expanded Custom LASIK and other new technologies to improve nearsightedness, farsightedness, presbyopia and astigmatism.

**WHERE:** RPB Auditorium, Jules Stein Eye Institute  
**TO RSVP:** (310) 825-2737 or www.uclaser.com

### Research and Trials

**Treating Post-Cancer Fatigue**

Seeking breast cancer survivors with persistent, post-treatment fatigue for a research study comparing the effectiveness of a Yoga Program to a Wellness Seminar Series for improvements in energy, mood and biological functioning. Classes are designed specifically for breast cancer survivors, ages 40 to 65, who are post-menopausal and have completed all surgeries, chemotherapy and radiation at least six months ago.

**INFO:** (310) 267-4423

**Treatment of Senior Depression**

The UCLA Geriatric Psychiatry Research Program is conducting a four-month research study on the experimental drug combination for the treatment of depression for those who are 60 years of age and older. All participants will be given the study drug citalopram (Celexa) and methylphenidate (Ritalin) either together or in combination with a placebo. A complete psychiatric evaluation will be provided. Subjects will be paid for participating.

**INFO:** (310) 794-4619 or (310) 983-3375

**Senior Depression & Tai Chi**

If you are 60 years or older, feeling stressed or depressed, hopeless, sad, or have loss of interest or pleasure in activities, anxiety, or insomnia, UCLA is conducting a four-month research study using a study drug in conjunction with Tai Chi Chih (a set of slow-paced movements) or health education. If you are not currently receiving any psychiatric treatment with effective medications, you may qualify. Medical and psychiatric evaluations and limited physical exams are provided as part of the study. Evaluations and study drug are provided at no charge.

**INFO:** (310) 794-4619 or (310) 794-9523

### Weight Loss

**Weight Loss Surgery**

**ONGOING / CALL FOR DATES AND TIMES**

Is weight-loss surgery right for you? Learn about the types of surgery available as well as outcomes and complications. Attendance is mandatory prior to being seen in the clinic.

**INFO:** (310) 825-7163 or visit www.bariatrics.ucla.edu for schedule and information

### Wellness

**Mindfulness Meditation**

**WEDNESDAY, JULY 15 / 1:00 to 2:30 pm**

Diana Winston will discuss and demonstrate mindfulness practices, its effectiveness in reducing stress, boosting the immune system and increasing attention.

**WHERE:** Community Room, Burton Chace Park, 13650 Mindanao Way, Marina del Rey  
**TO RSVP:** (800) 516-5323

“Freedom from Smoking” Program

**TUESDAYS, JULY 7 / 4:00 to 6:00 pm**

UCLA offers an eight-week smoking cessation program that discusses pharmaceutical options and how to handle stress, weight control and social situations after quitting. Cost: $120.

**WHERE:** 200 UCLA Medical Plaza, Room 206  
**TO RSVP:** (310) 825-0014 or lharning@mednet.ucla.edu

### Featured Event

**Skin Cancer Update**

**WEDNESDAY, SEPTEMBER 16 / 2:30 to 4:00 pm**

Early detection is the key to preventing the morbidity and mortality of skin cancer, the most common cancer affecting Americans. Thomas Su, M.D., UCLA dermatologist, will offer key tips to help people catch this very common cancer early.

**WHERE:** OASIS lecture room, Macy’s, Westside Pavilion  
**TO RSVP:** (800) 516-5323
“UCLA Healthcare 50-Plus has *improved my life* and provided information to understand the connections among my multiple problems.”

— P.D., Westchester

### 50+ HealthCare

**UCLA HEALTHCARE 50-PLUS IS A FREE PROGRAM** offering educational lectures, a walking program, information on community and health resources, membership amenities and special events. To receive a membership application, please call (800) 516-5323.

#### 50+ Injury Prevention with the Timeless Body System
**TUESDAY, JULY 28 / 12:30 to 1:30 pm**
Learn about a unique exercise system from the creator, Nurit Krauss, which combines elements of fitness into an efficient sequence of movements to work the entire body and nervous system, and to reduce the risk of injuries.
**WHERE:** YWCA Santa Monica Westside, 2019 14th Street, Santa Monica
**TO RSVP:** (800) 516-5323

#### 50+ Invest Wisely
**THURSDAY, JULY 30 / 2:00 to 3:30 pm**
Learn how to manage your financial portfolio, how investments should be selected and analyzed, how to identify and address important investment and financial planning risks, and why the sequence of your returns is a huge factor in determining how long your money will last.
**WHERE:** Fireside Room, First United Methodist Church, 1008 11th Street, Santa Monica
**TO RSVP:** (800) 516-5323

#### 50+ Good Health
**WEDNESDAY, AUGUST 12 / 2:00 to 3:30 pm**
UCLA physical therapist Lynn Matsuzaki will focus on how to improve your posture with exercise and daily activities.
**WHERE:** Westside Family YMCA, 11311 La Grange Avenue, West Los Angeles
**TO RSVP:** (800) 516-5323

#### 50+ Seniors Against Investment Fraud
**THURSDAY, AUGUST 27 / Noon to 1:30 pm**
Learn how to fight consumer fraud and become a knowledgeable consumer, and not a victim, of telemarketing solicitations and other fraudulent schemes.
**WHERE:** Santa Monica Family YMCA, 1332 6th Street, Santa Monica
**TO RSVP:** (800) 516-5323

#### 50+ Keep Your Balance
**TUESDAY, SEPTEMBER 1 / 2:00 to 3:30 pm**
Do you have a fear of falling? Jiin Kim-Daines, UCLA physical therapist, will discuss exercises to maintain good balance and to avoid falls and fractures.
**WHERE:** Westside Family YMCA, 11311 La Grange Avenue, West Los Angeles
**TO RSVP:** (800) 516-5323

#### 50+ Heart Disease
**TUESDAY, SEPTEMBER 15 / 2:30 to 4:00 pm**
Discover ways to reduce your risk of heart disease and learn about its causes, diagnosis and treatments.
**WHERE:** Sunrise Assisted Living, 1312 15th Street, Santa Monica
**TO RSVP:** (800) 516-5323

#### 50+ YMCA Senior Open House
**THURSDAY, SEPTEMBER 24 / 9:00 am to 2:00 pm**
Attend health seminars, exercise classes, tours of the facilities and more.
**WHERE:** Santa Monica Family YMCA, 1332 6th Street, Santa Monica
**INFO:** (310) 393-2721, ext. 135

#### 50+ Age Is Just a Number
**WEDNESDAY, SEPTEMBER 30/2:00 to 3:30 pm**
Explore the myths, stereotypes and realities of aging and how they affect individuals. Older adults will learn strategies to lead fulfilling, vibrant and satisfying lives.
**WHERE:** Westside Family YMCA, 11311 La Grange Avenue, West Los Angeles
**TO RSVP:** (800) 516-5323

#### 50+ Memory Training Class
**CALL FOR DATES AND TIMES**
Participate in a five-week course on practical memory-enhancing techniques based on research by UCLA psychiatrist and memory expert Gary Small, M.D. The course is not for those with any form of dementia.
**Cost:** $15 for the series.
**TO RSVP:** (800) 516-5323

#### 50+ Westside Walkers — Free Mall Walking Program
**TUESDAYS AND THURSDAYS / 8:00 to 10:00 am**
Sign in at Macy’s storefront on level 2.5, Westside Pavilion on Pico Blvd., between Overland Avenue and Westwood Blvd., West Los Angeles.
**INFO:** (800) 516-5323

#### FIND MORE ONLINE
[www.uclahealth.org/calendar](http://www.uclahealth.org/calendar)
Be a Hero

UCLA’s Blood & Platelet Center now has two convenient locations for making life-giving donations: in the heart of Westwood Village, at 1045 Gayley Avenue, and in the newly opened site on the A-Level of Ackerman Union on the UCLA campus. Both centers offer courtesy parking for donors. For an appointment and to discuss courtesy parking options, call (310) 825-0888, ext. 2.

For more information about making a donation, go to:
www.gotblood.ucla.edu

Grateful for Your Gifts

UCLA Health System is grateful for gifts received from our patients and their families and friends. Your support makes it possible for our physicians, nurses and care partners to save, extend and improve lives by providing the most technologically advanced care in a safe, private and dignified manner. Contributions from thoughtful and generous friends have helped make us a world-acclaimed, comprehensive health system. Your donation to Partnership for Care will help us deliver essential services that mend the body and heal both heart and soul.

To make a gift, call (310) 206-0500, or go to:
www.uclahealth.org/giving