“We are constantly advancing how we take care of children with diabetes and endocrine issues, while we work to shape the future by performing cutting-edge research and training the next generations of pediatric endocrinologists.”

UCLA PEDIATRIC ENDOCRINOLOGY – WESTWOOD FACULTY

Dennis Chia, MD  
Fellowship Director  
Growth  
General Endocrinology  
Diabetes

Harvey K. Chiu, MD  
Clinical Director, Thyroid Program  
Thyroid Nodules/Cancer  
General Endocrinology  
Diabetes

Yung-Ping Chin, MD  
Growth  
General Endocrinology  
Diabetes

Xingxing Kong, MD, PhD  
Research: Brown Fat, Exercise

Steven D. Mittelman, MD, PhD  
General Endocrinology  
Diabetes  
Research: Obesity and Cancer

Anna Pawlikowska-Haddal, MD, PhD  
General Endocrinology  
Diabetes  
Gender Medicine

Maureen Su, MD  
General Endocrinology  
Diabetes  
Research: Endocrine Autoimmunity

Michael Yeh, MD  
Director, Endocrine Surgery Program  
Endocrine Surgery

UCLA PEDIATRIC ENDOCRINOLOGY – MILLER CHILDREN’S HOSPITAL LONG BEACH FACULTY

Griselda Alvarez, MD  
General Endocrinology  
Diabetes  
Type 2 Diabetes

Rebecca Hicks, MD  
Clinical Director, Miller Endocrine Program  
General Endocrinology  
Diabetes

Erin Okawa, MD  
General Endocrinology  
Diabetes  
Congenital Hyperinsulinism

Roja Fallah, MD  
General Endocrinology  
Diabetes
I am pleased to present the growing Division of Pediatric Endocrinology at UCLA Mattel Children’s Hospital. Since I joined the division in April 2017, we have recruited seven faculty members and a new diabetes educator, opened three research laboratories, launched a hyperinsulinism program and started a pediatric gender program. We are constantly advancing how we take care of children with diabetes and endocrine issues, while we work to shape the future by performing cutting-edge research and training the next generations of pediatric endocrinologists.

In 2018, UCLA pediatric endocrinology began staffing the pediatric endocrine service at Miller Children’s & Women’s Hospital in Long Beach, where four UCLA faculty members with expertise in all aspects of pediatric endocrinology provide inpatient and outpatient care.

I am honored to be following in the footsteps of leaders in the field of endocrinology as the division chief of pediatric endocrinology at UCLA Mattel Children’s Hospital.

Steven D. Mittelman, MD, PhD

Chief, Division of Pediatric Endocrinology
UCLA Mattel Children’s Hospital
Hyperinsulinism program

Hyperinsulinism is a rare and complex disorder that causes moderate to severe hypoglycemia (low blood sugar levels) in newborns and children. UCLA is one of the few centers in the U.S. with a dedicated hyperinsulinism team. We also are the only center in Southern California, and one of just four in the U.S. able to perform the specialized F-DOPA PET-CT scans that often are required during the diagnostic evaluation of these patients.

“Dr. Mittelman and his team did an amazing job with our Mia. They answered all of our questions with kindness and clarity. They kept us informed and hopeful, but helped us maintain realistic expectations. They were patient and caring during what was quite easily the hardest time of our lives.”

The F-DOPA scanner allows the team to differentiate between the diffuse and focal forms of hyperinsulinism, helping to determine which patients will benefit the most from surgery.

Photomicrograph of healthy pancreas (left) from a child with diffuse hyperinsulinism (center) and from a child with focal congenital hyperinsulinism (right). Insulin-positive cells stain brown. 4X magnification.

PEDIATRIC ENDOCRINOLOGY
Steven Mittelman, MD, PhD
Erin Okawa, MD

NEONATOLOGY
Meena Garg, MD

PEDIATRIC SURGERY
Steven L. Lee, MD
Daniel A. DeUgarte, MD

RADIOLOGY
Martin Aurbach, MD
Theodore R. Hall, MD

PEDIATRIC PATHOLOGY
Jeffrey Goldstein, MD

PHARMACOLOGY
John Williams, PhD
Thyroid nodule clinic

While thyroid nodules are rare in children, they are much more likely to be malignant in children than in adults. It is important for children with thyroid nodules or who are at risk of thyroid cancer to be evaluated at a high-volume center with expertise in advanced diagnostic and treatment techniques. The prognosis for children with thyroid cancer who receive early and appropriate treatment is excellent.

Under the direction of Harvey K. Chiu, MD, UCLA’s pediatric thyroid program is one of the few in Southern California that specializes in the diagnosis, treatment and care of children with thyroid nodules. Dr. Chiu’s ability to perform ultrasound-guided biopsies and have the tissue analyzed by on-site pathology at the patient’s initial visit makes UCLA’s program unique. Dr. Chiu also uses a needle-less device to induce anesthesia, minimizing stress and pain in children.

Patients can get an ultrasound done by a trained endocrinologist during their initial visit.

While thyroid nodules are usually benign, up to 20 percent can be a sign of thyroid cancer in children. Ultrasound-guided biopsies are more accurate than standard techniques and help make the right diagnosis while avoiding unnecessary surgery.
Gender clinic for children

Our mission is to deliver compassionate, inclusive and equitable care to support our diverse LGBTQ (Lesbian, Gay, Bisexual, Transgender, Queer/Questioning) community.

The UCLA Gender Health Program was created in 2016 under the leadership of Amy Weimer, MD, and Mark Litwin, MD. The goal of this patient- and family-centered program is to individualize patient care, looking at gender in the context of the whole person. As a program with a strong foundation in primary care, gender services are an important part of the full care we provide.

Our program brings together a multidisciplinary team to provide comprehensive and compassionate care in a safe and welcoming environment for gender-diverse patients of all ages. The team includes specialists from primary care (internal medicine and pediatrics), plastic surgery, vocal surgery and speech therapy, endocrinology, gynecology, urology, psychiatry, and behavioral health. Care coordinators assist patients with navigating their care. The UCLA Gender Health Program has cared for hundreds of patients, helping them to reach their goals of living their authentic lives.

UCLA and UCLA Health have a strong tradition of supporting the rights of all individuals. UCLA Health has been recognized by the Human Rights Campaign Foundation as an “LGBTQ Healthcare Equality Leader.” We specialize in providing sensitive, safe and compassionate care to all patients who come through our doors.

To further this mission, UCLA Health formed an Equitable Care Committee (ECC) to support its LGBTQ Health Initiative. The ECC includes executive leadership, physician champions and workgroups that strive to address issues pertaining to LGBTQ patients and their families, including but not limited to issues involving access to health care, family visitation, workforce cultural competency on LGBTQ issues, community engagement and quality of health care.

The UCLA Gender Health Program has been an integral part of fulfilling this mission, and the Division of Pediatric Endocrinology is proud to contribute to this effort and provide sensitive care to all our patients.

“We are committed to helping families learn their options and make the best possible choices for their child. We understand that parents and children may be at different places in their exploration of gender and understanding of options. We want them to know that they can come in just to learn more as an important first step. We will work together with the whole family to move forward with their own individual plan.”

— Dr. Amy Weimer

Anna Pawlikowska-Haddal, MD, PhD

Dr. Haddal works closely with the gender health team to manage and guide the hormonal therapies that many patients need.

Amy Weimer, MD

Dr. Weimer completed her dual residency in internal medicine and pediatrics at Cedars-Sinai Medical Center and served as chief resident in internal medicine. She became deeply interested in health care for transgender and gender-diverse patients and founded the UCLA Gender Health Program. She is committed to providing excellent care for transgender and gender-diverse patients of all ages, as well as improving the education of physicians and physicians-in-training on transgender health.

Mark S. Litwin, MD

Dr. Litwin, chair of UCLA Urology, did his surgical training at Harvard and specializes in urologic oncology. A former board member of the Gay & Lesbian Medical Association, he created and directs IMPACT, a state-funded program that provides free medical care statewide for low-income, uninsured men with prostate cancer.
Improving child health through research

UCLA is one of the leading research institutions in the world and receives more than $1 billion in extramural research funding every year, making it the nation’s 9th largest research university.

Our division benefits from this rich research environment, allowing us to contribute to cutting-edge bench, translational and clinical research to improve child health.

The Division of Pediatric Endocrinology supports both bench and clinical research projects. We are an affiliate site for TrialNet, a multicenter consortium funded by NIDDK and JDRF that provides our patients opportunities to screen family members for diabetes risk and participate in cutting-edge diabetes prevention trials. Researchers are working together with industry partners such as Xeris Pharmaceuticals and Enspire Bio to develop new treatment modalities to benefit children.

UCLA's Metabolism Research Theme aims to translate basic science discoveries to patient care in several areas, including the control of body weight, the link between metabolism and cancer, and gender differences in the susceptibility to metabolic diseases. Drs. Mittelman and Xingxing Kong have labs in the newly renovated Metabolism Theme space, where they contribute to and benefit from the rich scientific environment.

The UCLA Children’s Discovery and Innovation Institute (CDI) connects all research and training activities related to improving children’s health and health care, from discoveries in basic science through translation to clinical care and implementation in community practice through collaborations and networks established locally, nationally and globally. The CDI provides intramural grants, mentoring activities, and seminars and symposia. Since 2012, the CDI has funded approximately 94 grants (nearly $7 million in total funding). CDI members have received $33 million in extramural funding in FY2018.

David Geffen School of Medicine Research Themes

The biomedical challenges of the 21st Century will be solved by scientific communities — networks of scientists with common interests but diverse skills and expertise. In order to align our research enterprise with this scientific landscape, The David Geffen School of Medicine at UCLA has established six Unified Research Themes to stimulate interaction between UCLA’s top scientists and clinicians.
Brown fat and exercise

How exercise can help our fat burn calories

Researchers know that exercise can increase the amount of brown fat in our bodies. Dr. Kong and her colleagues recently uncovered the mechanism behind the other side of the relationship: how brown fat influences muscle function. Published in Cell Metabolism, Dr. Kong's study found that mice lacking interferon regulatory factor 4 (IRF4), a gene that regulates thermogenesis, had impaired exercise ability. Researchers also discovered that the hormone myostatin, which inhibits muscle growth, increased in these mice.

Myostatin, and its relationship with brown adipose tissue (BAT), presents an important avenue for further research. Myostatin levels are higher in those with obesity or type 2 diabetes. Animals that lack myostatin — or are treated with substances that block its activity — have significantly more muscle mass and lower levels of white fat.

If the discoveries made by Dr. Kong and her team are found to be consistent in humans, the findings would change the way we understand weight gain. While more work needs to be done, this exciting new link between muscle and brown fat could provide opportunities to develop novel therapies to fight obesity and type 2 diabetes.

Endocrine autoimmunity

How the immune system can work with or against the endocrine system

Many endocrine diseases are caused by autoimmunity, but we do not understand why some children are predisposed to develop endocrine autoimmunity. Maureen Su, MD, is hoping to gain insight on how we can manipulate the immune system to avoid autoimmunity while still effectively eradicating infection.

In one project, Dr. Su explores why females have greater risk of autoimmunity. She found that estrogens decrease and androgens increase the activity of the Aire autoimmune regulator gene, which may contribute to this gender effect. Dr. Su is further investigating how puberty might affect this gene and autoimmunity risk.

Dr. Su hopes that a better understanding of our immune system will help us learn to prevent autoimmune diseases. She is also exploring ways to enhance the immune system's ability to kill cells in order to treat diseases such as melanoma.

Self-reactive progenitor T cells in the thymus are eliminated through negative selection by medullary thymic epithelial cells (mTECs). mTECs normally express Aire, a putative transcription factor that drives the expression of a large number of self-antigens (e.g. insulin, PD, TRP-1). Recognition of these mTEC-derived self-antigens triggers deletion of self-reactive T-cells — a key element of self-tolerance. In APS1, Aire-deficient individuals do not up-regulate the expression of organ-specific self-antigens, and thus don’t recognize and destroy these self-reactive T cells leading to autoimmune disease.
Obesity and cancer

Research could change how doctors treat leukemia and other cancers that are protected by fat tissue

Obesity and cancer risk have a mysterious relationship, with obesity increasing the risk for 13 types of cancer. For some cancers — including pediatric cancers — obesity lowers survival rates. With an increasing population of overweight and obese children in the United States, researchers and physicians are racing to understand this connection, and what to do about it.

Steven D. Mittelman, MD, PhD, is among those looking for clues to improve children’s survival and recovery from cancer. Unlike most cancer researchers, Dr. Mittelman explores the connection from the perspective of fat cells rather than cancer cells; he’s trying to understand the environment in the body that fat cultivates that leaves some people more vulnerable to cancer. His research focuses on acute lymphoblastic leukemia (ALL), which is the most common cancer in children. Obese children with ALL have a 50 percent higher relapse rate than non-obese children.

Dr. Mittelman’s research uses cell culture, animal models, and clinical samples, and has shown that fat cells attract ALL cells, feed them with amino acids and fats, and provide signals that help the ALL cells avoid apoptosis and resist chemotherapy. Fat cells also absorb and metabolize some of the chemotherapy drugs meant to combat ALL, reducing treatment effectiveness. These findings are vital for understanding leukemia and many other cancers that grow in the bone marrow or around fat cells, including cancers of the breast, colon, ovary and pancreas.

Dr. Mittelman’s lab also has uncovered a potential silver lining to the obesity-leukemia link: Preclinical data suggest that initiating a calorie-restricted diet during chemotherapy treatment may improve leukemia outcomes. Based on this and other clinical data, Dr. Mittelman worked closely with Dr. Etan Orgel to launch a clinical trial of diet and exercise in children with ALL during their initial chemotherapy (NCT02708108). This trial should be completed in late 2019.

Dr. Mittelman’s work is supported by two R01 grants from the National Cancer Institute and a grant from Gabrielle’s Angel Foundation.
Diabetes education program

The Division of Pediatric Endocrinology provides a multidisciplinary approach to help patients and families manage their diabetes. Our team works to help our patients develop and hone their internal motivations to reach their individual health goals. Embedded psychologists provide counseling, advice and referrals for families.

Supported in part by a generous gift from the Stockton Family, we have recently redesigned our approach to diabetes care and education. Motivational interviewing helps enable patients and families to better partner with members of the health care team to improve problem-solving and optimize diabetes management. Patients and family members have learning opportunities at every visit, with competencies tracked in the electronic medical record.

Our team includes three certified diabetes educators (CDEs) who help our patients manage their diabetes. These include Patty Beckwith, RD, MPH, who has helped care for patients at UCLA for more than 25 years; Karishma Gounder, BSN, RN, PHN, CDE, who previously worked in the pediatric intensive care unit; and Debbie Olson, RN, CDE, who is passionate about educating and empowering families with diabetes.

Three social workers provide support to our patients and families. Sabah Akmal, Jennifer Chou and Sylvia Villasenor work closely with our families to help them navigate school, work and the health care system while managing their diabetes and health.

We are fortunate to have psychologists who see patients at our diabetes clinics. Kanchi Wijesekera, PhD, is an attending psychologist who specializes in trauma and pediatrics and provides family-centered consultations for youths and families in a number of pediatric clinics. Natacha Emerson, PhD, is a pediatric psychology postdoctoral fellow who is interested in adherence to medical regimens and transition to adult healthcare for adolescents and young adults.

UCLA hosts family support group meetings in collaboration with the diabetes research organization JDRF. Faculty, staff, and volunteers, design programming for parents/caregivers, teens and children. These events encourage families to interact and learn in a pleasant environment.

Patients and families enjoy a peaceful stroll through UCLA's Botanical Garden during a diabetes event.

Staff and volunteers of 2018 UCLA Mattel Children's Hospital Pediatric Diabetes Kick-off event.
Training the next generations

Our Endocrine Fellowship Program has a long and distinguished history of clinical, research and educational excellence. Tailored to the specific talents and interests of each trainee, this program excels in preparing individuals for successful careers in academic and clinical pediatric endocrinology. Our three-year training program strives to attract top candidates with a strong interest in academic medicine.

Fellows at UCLA have several unique opportunities, including receiving thyroid ultrasound and biopsy training, attending an annual fellows’ retreat and choosing from thousands of UCLA faculty to help with their scholarly project.

Dr. Shenoy has taken advantage of the strong educational emphasis at UCLA to develop a curriculum for pediatric residents rotating in endocrinology. While participating in the David Geffen School of Medicine Medical Education Fellowship, Dr. Shenoy developed instructional videos that provide high-yield clinical education in a concise format, as well as pre- and post-tests for residents. Dr. Shenoy is finishing a study to evaluate this e-learning curriculum at two Southern California centers.

Dennis Chia, MD
Program Director, Pediatric Endocrinology Fellowship
Associate Clinical Professor of Pediatrics

Dr. Chia became the Fellowship Program Director in 2018. He was previously the Program Director at Montefiore Children's Hospital, and has extensive clinical and teaching experience. Dr. Chia spent several years doing laboratory research on growth hormone signaling.

Ranjit Shenoy, MD
Third-year Fellow

In addition to our local efforts, UCLA is helping to improve endocrine fellowship training nationally. Dr. Ranjit Shenoy, currently a third-year fellow, is leading a team of fellows and faculty to publish the first oral clinical competency examination for pediatric endocrinology fellows. Dr. Shenoy believes that providing objective, formative feedback to fellows regarding gaps in their clinical knowledge can help program directors and fellows optimize training.
To help us continue to pursue our missions of providing outstanding clinical care, research, and education in pediatric endocrinology, please consider supporting us with a donation:

**UCLA Children's Health Development**
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[uclahealth.org/pedsendocrinology](http://uclahealth.org/pedsendocrinology)