



# UCLA UROLOGY

UPDATE

"Everybody at IMPACT has been very supportive, friendly and uplifting. Thank you for everything you have done." • "Thank you for everything you guys have done for me. Because of IMPACT I was able to receive treatment and able to get my health back. I couldn't have done it without you and I greatly appreciate everything." • "My daughter, wife and I appreciate all you do for me." • "IMPACT has given a whole new light in my life". • "I really appreciated IMPACT from bottom of my heart." • "I appreciate all of the advice and information you have given to me before and after surgery. I am glad the program is around and I wish you can continue help with my questions. Thank you for all the advice you have given me. I wouldn't have been able to get all the health education materials I needed following the diet thank you through out my entire treatment. I want to thank IMPACT for all the help along the way. You have been so helpful. In the beginning I didn't know what to do and you guys were my angels." • "I want to thank IMPACT for allowing me to receive the treatment I needed to get better. My sister and I want to especially thank my nurse case manager for all her attention and may God bless her and everyone at IMPACT." • "I want to thank Program with all my heart for being able to cover my surgery and treatment until I was able to receive my MediCare benefits." • "IMPACT has been a God



Over the course of its 25-year history, IMPACT has received numerous testimonials from grateful participants.

## IMPACT at 25: UCLA Urology-Administered Statewide Program a Lifeline for Many

Jorge says it was a coworker who prompted him to get his first prostate-specific antigen (PSA) test in the fall of 2021. The uninsured factory worker had visited community health centers for low-cost care when he needed it, but had figured since he wasn't experiencing symptoms, the PSA test wasn't necessary.

"My coworker had a check-up and found his PSA level was really high," the Fontana, California, resident recalls. "He asked me if I'd had the test, and I said no. He told me, 'You should get it done.'"

Jorge got the test and learned his PSA was significantly elevated. Follow-up biopsy testing confirmed he had prostate cancer. The shock Jorge experienced from being told he had a potentially life-threatening condition was compounded by the financial reality. Getting treatment, he feared, "was beyond my means."

That's when Jorge's physician told him about a program called IMPACT (Improving Access, Counseling and Treatment for Californians with Prostate Cancer), which would not only allow him to receive free, high-quality prostate cancer care, but would assign him a clinical team that would provide assistance with everything from making appointments to filling prescriptions, while educating him on his disease and how he could take ownership over his care.

After going through radiation treatment and hormone therapy, Jorge's cancer is in

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Above, top photo: The IMPACT team, clockwise from lower left, includes Kristen C. Williams, Dr. Mark S. Litwin, Ericka Maldonado-Aviles, Yamilex Velgara, Jacqueline Gorodetsky, and Priscilla Valencia. Bottom: Members of the California Prostate Cancer Coalition, which has provided pivotal support for IMPACT in Sacramento (l. to r.): Bill Doss, Wes Sholes, Tiffany Razzo, Beverly Nicholson, Tom Kirk, Merel Grey Nissenberg, Stan Rosenfeld, Ericka Maldonado-Aviles (IMPACT program), and Earl Jones.

This page, second column: Laura Baybridge, IMPACT's founding administrator and currently executive chief administrative officer for the departments of Urology, Obstetrics & Gynecology, and Surgery at UCLA. Opposite page, top: Dr. William Aronson, UCLA Urology professor and IMPACT medical director. Opposite page, middle: Dr. Mark S. Litwin, UCLA Urology distinguished professor and IMPACT director.

remission. Whereas he once felt intimidated at his appointments, he's learned to bring a notebook and to ask questions whenever he is uncertain of a healthcare provider's advice. Thanks to education and counseling he received from IMPACT, Jorge has also adopted healthier eating habits that have kept his pre-diabetes in check. "The help they provide to make sure all my needs are met is truly magnificent," he says. "I don't even know how to describe it, but it's incredible."

Prostate cancer remains the second-leading cause of cancer-related death in U.S. males, despite the availability of highly effective treatments. When their prostate cancer is detected and treated at localized or regional stages, the vast majority of men survive for at least five years after diagnosis. But for men with little or no health insurance, timely diagnosis and appropriate treatment can be challenging. For these men, IMPACT, a statewide program established and administered by UCLA Urology, has served as a lifeline.

Twenty-five years after its establishment, IMPACT continues to stand apart as the only statewide program of its kind to support low-income uninsured men with free, high-quality, comprehensive prostate cancer treatment and services through partnerships with doctors, hospitals, community providers, local health departments, and community-based health organizations up and down the state. IMPACT's clinical support teams, led by nurse case managers, guide patients through every step and work with them to ensure they receive support services while empowering them to become better healthcare consumers.

In the course of its 25-year history, IMPACT has served more than 2,300 men through its network of providers. The program currently contracts with more than 600 healthcare providers, as well as mental health professionals, local health departments, hospitals, outpatient facilities, pharmaceutical companies, and others for the additional services patients need. The groundbreaking program continues to receive more than \$3 million in funding each year

from the California Department of Health Care Services (DHCS), which contracts with UCLA Urology to administer the program.

"A cancer diagnosis is extraordinarily disruptive to every aspect of any person's life, but for individuals who are functioning in the margins of our economy, it's especially difficult," says Dr. Mark S. Litwin, the UCLA Urology distinguished professor who started IMPACT and still serves as its director. "We are thrilled the State of California continues to recognize that despite improvements in our safety net, many fall through the cracks, and for them, this program fulfills an important need."



Laura Baybridge, who was IMPACT's founding administrator and currently serves as executive chief administrative officer for the departments of Urology, Obstetrics & Gynecology, and

Surgery at UCLA, says the program's one-of-a-kind status is a testament to the commitment of both the State of California and IMPACT providers in prioritizing the needs of a historically underserved population. "For the providers we contract with to see IMPACT patients in their community, it's often a lot of extra work to facilitate all of their needs, but they remain committed because it's the right thing to do," Baybridge says. "These providers show up for our patients every day, even looking for ways to support them after they are no longer enrolled."

To become eligible for IMPACT enrollment, an individual must be a California resident who has been diagnosed with prostate cancer and has little or no health insurance, with an income at or below 200% of the Federal Poverty Level (currently \$64,300 per year for a family of four). In many cases, IMPACT enrollees earn too much to qualify for Medi-Cal (California's Medicaid program), which caps at 138% of the Federal Poverty Level, but can't afford to purchase coverage through Covered California, the insurance marketplace established by the Affordable Care Act. Others are considered

*"A key goal of this program is to ensure financial barriers do not stand in the way of life-saving care."*

underinsured, with severe financial burdens that would render cancer treatment unaffordable without IMPACT.



Dr. William Aronson, UCLA Urology professor and medical director of IMPACT, published a study in the program's first decade showing IMPACT patients presented with significantly more advanced disease than men outside the program — most likely because they weren't receiving screening services shown to reduce the diagnosis of later-stage cancers.

"These patients need extra care and support," Dr. Aronson says.

Notably, Dr. Aronson adds, the care provided by IMPACT is of the highest quality, leveraging UCLA Urology's association with the latest clinical and scientific advances. "We carefully screen all of the physicians we sign up and make sure our patients are receiving state-of-the-art treatments," Dr. Aronson says.

"From the beginning, we required that the procedural care be state-of-the-art," Dr. Litwin explains. "Besides making sure IMPACT patients got the same quality of services patients would receive at a top academic medical center such as UCLA, our hope was that would help ensure IMPACT doctors provide that level of care for all of their patients."



In designing IMPACT, Dr. Litwin worked closely with public health nurses and nurse scientists on what would become a central element of the program and a key contributor to the high-quality care patients receive. IMPACT pairs each enrollee with a nurse case manager and clinical team that works closely with the patient to ensure they know when to seek care,

how to navigate the system to secure an appointment, and how to effectively communicate with providers about their needs and preferences.

"Many of these patients have had minimal access to healthcare before enrolling in IMPACT," Dr. Litwin says. "IMPACT's clinical team works with them to develop the knowledge and skills they need to take an active role in their own care by asking questions, advocating for their needs, and engaging in healthy behaviors that help minimize symptoms and treatment side effects."

Early in the program, IMPACT became aware of three brothers who had all been diagnosed and treated for prostate cancer within a short period. One was enrolled in IMPACT while the other two had private insurance, and it was the IMPACT patient who, in discussions with his siblings, concluded he had the best care, largely because of the navigation assistance. "Many of these patients are crisis-managing their lives and their health — we have patients with housing insecurities, food insecurities, and a whole host of other issues," Baybridge says. "IMPACT provides assistance and instills a sense of self-efficacy in patients that transcends their treatment."

Toward that end, a major part of the program is patient education. IMPACT distributes print and audio materials available in multiple languages, empowering patients and their families through knowledge about prostate cancer and its treatments. "Patients are encouraged to bring a notebook with questions, and to know it's OK to speak up if what their doctor says doesn't sound good to them, or they don't understand," says Kristen C. Williams, who serves as IMPACT's project liaison, facilitating interactions and contracts between UCLA Urology and DHCS.

More recently, with the expansion of Medi-Cal eligibility, the IMPACT team has been instrumental in helping eligible enrollees transition to the program so they can receive more comprehensive coverage outside of the prostate cancer realm, without any interruption in their treatment. "Our goal is to help our enrollees feel more comfortable as healthcare consumers," explains Ericka Maldonado-Aviles, IMPACT's program manager.

IMPACT has had many champions, both in communities and in state leadership positions. One of the major proponents since the beginning has been the California Prostate Cancer Coalition (CPCC), a nonprofit coalition of physicians, prostate cancer survivors and their families, support groups, and others concerned about prostate cancer in the state. The coalition played a key role in the successful lobbying for the passage of Senate Bill 650 in 2005. That bill, sponsored by Sen. Deborah Ortiz, made IMPACT a permanent part of the state Department of Public Health's Cancer Control Branch, which went a long way toward stabilizing its funding. "We had four men who would walk the halls of Sacramento, getting to know all of the legislators and pushing for this legislation every time it came up," recalls Merel Grey Nissenberg, CPCC's founding president. "We knew there were so many men who would be nowhere without this program."

Dr. Litwin points out the last 25 years have shown that even with improvements in the safety net, IMPACT remains essential for a segment of the population. "Access to effective treatment saves lives," he says. "A key goal of this program is to ensure financial barriers do not stand in the way of life-saving care, and receiving prostate cancer treatment isn't dependent on a patient's income."

## NEW FACULTY

### Donald Hannoun, MD



Dr. Hannoun has joined UCLA Urology faculty as an associate diplomat physician. Dr. Hannoun completed his urology residency at the USC Institute of Urology, followed by a fellowship in minimally invasive urology and endourology at Cedars-Sinai Medical Center. His clinical interests include general urology, endourology, and robotic surgery. He has practiced for 11 years at City of Hope, and will be seeing patients in Santa Clarita. Appointments can be made by calling (310) 794-7700.

## ALUMNI PROFILE

### Hung-Jui (Ray) Tan, MD, MSHPM



When Dr. Hung-Jui (Ray) Tan embarked on three years of UCLA Urology advanced training in 2013, it was to gain expertise in two distinct areas: as a urologic oncologist, through a fellowship with the UCLA Institute of Urologic Oncology; and as a health services researcher, via the Robert Wood Johnson Clinical Scholars

Program. More than a decade later, as a member of the urology faculty at the University of North Carolina (UNC) and, since 2023, chief of UNC's Division of Urologic Oncology, Dr. Tan frequently finds himself drawing on both his fellowship-specific training and the other state-of-the-art clinical and scientific activities he encountered as a member of one of the nation's leading urology departments.

"UCLA runs the annual State of the Art Urology Conference, and that's really the mantra for the department all year round," Dr. Tan says. "Since starting my faculty position, and especially now as division chief, my UCLA experience has inspired me to constantly make sure we have the best and newest treatment options for patients with urologic cancers here at UNC."

For his clinical practice, Dr. Tan applies his UCLA Urology training in performing advanced robotic and open surgery for patients with urologic cancers. He was instrumental in developing UNC's prostate MRI and fusion biopsy program, taking a page from programs at UCLA led by Drs. Robert Reiter and Leonard Marks; and robotic-assisted Retroperitoneal Lymph Node Dissection, a minimally invasive technique for treating testicular cancer patients that he learned from Dr. Mark S. Litwin. As division chief, Dr. Tan has built out the targeted focal therapy program for prostate cancer, a major innovation spearheaded by Dr. Marks. Administratively, Dr. Tan has also taken steps to substantially improve the time to diagnosis for patients with elevated PSA — drawing, again, from quality improvement work he was exposed to by UCLA Urology faculty such as Dr. Litwin and Dr. Christopher Saigal.

In his own research, Dr. Tan's focus has been on how patients and physicians can be supported in making the best possible treatment decision based on available data. Ongoing studies in that area are funded by a career development award from the American Cancer Society and a U.S. Department of Defense grant. A separate Department of Defense grant focuses on well-being and survivorship for testicular cancer patients.

"I had inspired mentorship during my UCLA Urology training, which has greatly shaped my career trajectory," Dr. Tan says. "Of equal influence, though, was the exposure to all the cutting-edge work led by UCLA faculty that I had no intention of pursuing but has been essential to my position here at UNC."

## DONOR SPOTLIGHT

### Supporting Fellowship Training In Complex Stone Treatment

Anyone who has experienced a kidney stone episode knows all too well that the discomfort can be excruciating. While some stones will pass on their own, others require treatment — and in the most complex cases, the technical know-how to effectively remove the stone in a minimally invasive way can be found only at a highly specialized academic center such as UCLA.

Thanks to a generous philanthropic gift, Dr. Matthew Dunn, UCLA Urology associate clinical professor and director of the UCLA Endourology and Stone Treatment Center, is able to train one fellow each year in the complex endoscopic procedures involved in successfully managing the most challenging stones cases. UCLA's endourology fellowship focuses on the complex minimally invasive surgeries involved in kidney stone management, while also preparing fellows in robotic urinary tract reconstruction and endoscopic management of benign prostatic hyperplasia — including via the specialized procedure known as Holmium Laser Enucleation of the Prostate (HoLEP).

For the complex kidney stone cases, Dr. Dunn trains fellows in percutaneous renal stone management, which typically involves making a small incision in the patient's flank and/or back, then inserting a scope and special instruments to locate, break up, and remove the stone. "This is still a procedure that requires a great deal of skill and extra training," Dr. Dunn says. "And thanks to the philanthropic support we have received, UCLA has become a hub for that training."

When Dr. Dunn joined the UCLA Urology faculty as director of the UCLA Endourology and Stone Treatment Center in 2017, he performed nearly all of these minimally invasive procedures. Now there are three other fellowship-trained endourologists at the center, including Dr. Fuad Elkhoury, whom Dr. Dunn mentored through the endoscopic fellowship. Others have gone on to start endourology programs across the country and internationally.

"Like most fields within urology, we have been moving into a more minimally invasive environment, which increases the emphasis on technically complicated cases that require advanced training," Dr. Dunn says. "We continue to serve as a center of excellence for the most complex referrals, but through this fellowship, we have been able to send experts out into communities so that more patients can benefit."

Dr. Dunn says teaching fellows is among the most rewarding aspects of his work. "I love being able to train the next generation," he says. "It's gratifying to know that when I retire, the skills that I obtained will endure and patients will continue to receive state-of-the-art care. We are very grateful for the generous donors who make this kind of training possible."

If you are interested in supporting a UCLA Urology fellowship, visit <https://giving.ucla.edu/givetourology/> or scan this QR code:



# Letter from the Chair



As a premier urology program situated within one of the world's top academic medical centers, UCLA Urology has an impressive track record of superb clinical care and transformational research. Our physicians are celebrated for their ability to diagnose and treat the most complex and vexing cases while also providing the highest quality of care for urologically common situations. Our scientists (and clinician-scientists) are rightfully recognized for their innovative and impactful scholarship: discovering molecular and mechanistic origins of disease, trailblazing new ways to diagnose or treat urologic conditions, and understanding the implications and improvement of quality of life. The unifying theme of our clinical and research enterprises is to improve and prolong as many lives as possible.

*Essential to our DNA is UCLA Urology's unwavering commitment to delivering services to traditionally underserved populations.*

Essential to our DNA is UCLA Urology's unwavering commitment to delivering services to traditionally underserved populations — including uninsured and underinsured — on our main campuses and at safety net hospitals. This issue of our newsletter showcases an emblematic example of that commitment as we celebrate the 25th anniversary of IMPACT (Improving Access, Counseling and Treatment for Californians with Prostate Cancer). Established and administered by UCLA Urology, IMPACT is the only statewide program of its kind to offer free, high-quality prostate cancer treatment and related services to uninsured, low-income men.

IMPACT epitomizes a commitment to partnerships through which UCLA Urology provides high-quality services at three Los Angeles County facilities: Olive View-UCLA Medical Center, serving much of the San Fernando and Antelope Valleys; Harbor-UCLA Medical Center in the South Bay (Torrance); and Martin Luther King, Jr. Outpatient Center in South Los Angeles. UCLA Urology also delivers state-of-the-art care to Veterans at the VA West Los Angeles Medical Center.

Beyond meeting a critical need for the population of Los Angeles, these affiliations serve as ideal training sites for medical students, residents, and fellows — providing them with experience caring for members of our community and exposure to a breadth of people and experiences.

In July, we will welcome our four newest residents, an incredibly talented and enthusiastic group of young doctors who were at the top of our list of desired candidates. For the best and brightest future urologists, UCLA remains a destination — not just for our leadership in patient care and discovery, but also for our commitment to ensuring the advances we foster reach all segments of our community.

❖ **Scott Eggener, MD**  
*Professor and Chair, UCLA Urology*

# Kudos

**Juan José Andino, MD, MBA, UCLA** Urology assistant clinical professor, had a manuscript, “Penile Prosthesis Infection: Normalizing Salvage Surgery from Education to Practice,” published in the *Journal of Sexual Medicine*. It was completed in collaboration with former UCLA Sexual Medicine fellow **Jasper Bash**, who is now on the faculty at Oregon Health & Science University. Dr. Andino provided expert commentary in the *New York Times* article, “5 Things Doctors Wish Men Knew About Sexual Health.”

**Jonathan Bergman, MD, MPH, UCLA** Urology clinical professor and holder of the Mark S. Litwin, MD, Endowed Chair in Mentorship, was named an American Urological Association (AUA) 2026 Young Urologist of the Year, an award presented annually to select early-career urologists in recognition of their efforts and commitment to advancing the development of fellow young urologists. This year’s honorees will be formally recognized at the Young Urologists Forum during the 2026 AUA annual meeting in Washington, DC.

**Nicholas Donin, MD, UCLA** Urology assistant clinical professor, has been appointed to serve as program director for the department’s residency program. **Drs. Rajiv Jayadevan** and **Juan José Andino** will act as associate residency program directors.

**Alexandra Drakaki, MD, PhD, UCLA** professor of hematology/oncology and urology, had three manuscripts accepted for publication that reflect the new or upcoming standard of care for bladder cancer, led by researchers at UCLA: “PD37-09 The First Report Of Disease-Free Survival Analyses From The Niagara Trial Of Perioperative Durvalumab Plus Neoadjuvant Chemotherapy in Muscle-Invasive Bladder Cancer” in the *Journal of Urology*; “SGNDV-001: Disitamab Vedotin with Pembrolizumab in HER2-expressing Locally Advanced

or Metastatic Urothelial Carcinoma” in the journal *Future Oncology*; and “Enfortumab Vedotin Plus Pembrolizumab in Untreated Locally Advanced or Metastatic Urothelial Carcinoma: 2.5-year Median Follow-up of the Phase III EV-302/KEYNOTE-A39 Trial” in the *Annals of Oncology*. Dr. Drakaki was invited to serve on the Genitourinary Cancer Guideline Advisory Group.

**Sriram Eleswarapu, MD, PhD, UCLA** Urology director of andrology research, has been promoted to health sciences associate clinical professor in recognition of his extensive work in sexual medicine and his impactful contributions to research, clinical care, and education. At the Sexual Medicine Society of North America annual meeting last October, he presented on strategies to mitigate penile length loss after radical prostatectomy.

**Kathy Huen, MD, MPH, UCLA** Urology assistant clinical professor, had a manuscript, “Healthcare Transition in Spina Bifida: A National Mixed Method Study,” published in the journal *Health Care Transitions*.

**Leonard Marks, MD, UCLA** Urology professor and deKernion Endowed Chair in Urology, provided expert commentary for the *New York Times* article, “Do All Cancers Need to Be Treated? Some Doctors Say No.”

**Jesse Mills, MD, UCLA** Urology clinical professor and director of The Men’s Clinic at UCLA, has been invited to serve on the editorial board of the *Asian Journal of Andrology* for the 2025–2030 term. He recently delivered a lecture on “Optimizing Penile Implant Outcomes” and led a resident course on “Evaluation of the Infertile Male” at the 77th Annual Meeting of the Korean Urological Association in Seoul, Korea.

**Nima Nassiri, MD, UCLA** Urology assistant clinical professor, was featured in *Time Magazine’s* Time100: Most Influential People in Health 2026.

**Stephanie Pannell, MD, UCLA** Urology assistant clinical professor, had her manuscript, “Assessing the Correlation of At-home Audio Testing and In-office Uroflowmetry: Moving Towards a New Gold Standard,” published in *Urology*. Co-authors included fourth-year medical student **Raeven Grant, Kymora Scotland, David Yao, Karan Thaker, Camille Watson, Yash Motwani, Myung-Shin Sim, and Abigail Lavold**. The research was funded in part by Dr. Yao’s Winston Faculty Research Grant.

**Victoria Rodriguez, PhD, MSW, MPH, UCLA** a fellow in the UCLA Patient-Centered Outcomes Research Training in Urologic & Gynecologic Cancers (PCORT) T32 mentored training program, had two manuscripts published: “Disparities in Health-Related Quality of Life Between Low-Income Latino and White Men with Prostate Cancer” in the *Journal of Cancer Survivorship*; and “Endometrial Cancer Therapy in 2026” in *Current Opinion in Obstetrics & Gynecology*. She had her abstract, “Survivorship Experiences and Health-Related Quality of Life Impacts among Young Gynecologic Cancer Survivors: A Qualitative Study,” accepted for a poster presentation at the American Society of Preventive Oncology (ASPO) meeting in April 2026 in Denver. Dr. Rodriguez received the Iris Cantor-UCLA Women’s Health Center Jan R. Cloyde Legacy Fund Travel Award. She will also serve on the ASPO special interest group leadership council. **Drs. Mark S. Litwin, Beth Karlan, and Dana Chase** are her primary mentors.

**Kymora Scotland, MD, PhD, UCLA** Urology assistant professor, and her research team — **Joseph Borrell, Nancy Quintanilla, Allison Glasco, Marissa Pentco, James Koshy, Maria Parco, and Aboubacar Kaba** — had their article, “Evaluating Surgical Ergonomics: An Analysis of Musculoskeletal Pain Across 11 Urologic Procedures,” accepted into the *JU Open Plus*.

## Advances in Bladder Cancer Treatment

**Eliya Shachar, MD**, PCORT T32 fellow, received a one-year, \$30,000 Jonsson Comprehensive Cancer Center Postdoc Fellowship Grant for her prospective study, “Mind-Body Stress Biomarkers and Treatment Response in Metastatic Gynecologic Cancer.” Her primary mentors are **Dr. Beth Karlan** and **Dr. Mark S. Litwin**.

**Brian Shuch, MD**, UCLA Urology professor, director of the Kidney Cancer Program, and Meinhardt Chair for Kidney Cancer Research, and his research team — **Pratik Kanabur, Zhou Tony Su, Aboubacar Kaba, Nirmish Singla, Mohammad Allaf, and Hiten Patel** — had their article, “Cost-Effectiveness of Incorporating [89Zr]Zr-Girentuximab PET-CT for Characterizing Small Renal Masses,” accepted for publication in the *Journal of Urology*.

**David Yao, MD**, UCLA Urology assistant clinical professor, had an abstract accepted for a poster presentation at the National Comprehensive Cancer Network meeting in March 2026: “The Effects of Prostate Cancer Germline Genetic Testing on New and Existing Life Insurance Policies in California.” The co-authors are all from UCLA: **Matthew J Phillipi; Ashley Appleton, MD; Talar Hagopian; and Camille Watson**.

**Scott Eggener, MD**, UCLA Urology professor and chair, had two manuscripts published: “Randomized, Prospective Evaluation of Hemostatic Agents in Robotic-Assisted Laparoscopic Partial Nephrectomy” in the *Journal of Urology*, and “Stockholm3 Versus Prostate-specific Antigen in Prostate Cancer Screening: 9-year Outcomes Demonstrating Improved Detection of Aggressive Cancers and Reduced Overdiagnosis from the STHLM3 Trial” in *European Urology*. Dr. Eggener was a visiting professor at Stanford University, Icahn School of Medicine at Mount Sinai, and Northwell. He completed his tenure as associate editor (prostate cancer) for the *Journal of Urology*.

More than 80,000 people in the U.S. are diagnosed with bladder cancer each year — three-fourths of them men, making it the fourth-most-common cancer in males behind only prostate, lung, and colorectal cancer. The vast majority of cases are known as non-muscle invasive bladder cancer, meaning that the cancer hasn’t yet invaded the muscular lining of the bladder wall. Once the cancer penetrates the bladder wall’s muscular lining, it has the potential to spread to the lymph nodes and other organs, a much more aggressive form.

While non-muscle invasive bladder cancer is not immediately life-threatening, it has a high rate of recurrence, putting patients at risk of their cancer progressing to the muscle-invasive form. In an effort to prevent recurrence, patients with non-muscle invasive bladder cancer are treated with topical therapies, including the immunotherapy drug BCG, as well as chemotherapy drugs.

Historically, when patients have experienced a recurrence despite these therapies, radical treatment was often recommended, including surgical removal of the bladder. But in recent years, several new drugs have become available that have been effective in treating recurrences, and with limited toxicity. These medications — which range from immunotherapy and gene therapy approaches to chemotherapy drugs designed to release in the bladder over time — have enabled many patients to avoid surgery, and in some cases are successful in ablating the tumors completely. Drugs now used for patients with high-risk non-muscle invasive bladder cancer who are no longer responding to BCG include Keytruda, Adstiladrin, Anktiva combined with BCG, and most recently Inlexzo. The QUILT trial involving Anktiva + BCG was FDA-approved after a clinical trial led by Dr. Karim Chamie, UCLA Urology professor. Zuspuri, a newly approved drug developed in part based on preclinical research at UCLA, is effective for patients with less aggressive but recurrent cancers.

With all of these new tools for treating recurrent bladder cancer, researchers are seeking to better predict — in some cases, with the aid of artificial intelligence — which patients are most likely to benefit from which drugs; the most effective sequence in which to administer them; and whether certain drugs used in combination might enhance the efficacy of the treatment. UCLA Urology remains at the forefront of this fast-evolving field, ensuring that patients have access to the newest treatment approaches.

For more information, visit [www.uclaurology.com](http://www.uclaurology.com). To make an appointment, call (310) 794-7700.





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U C L A



U.S. News & World Report's annual Best Hospitals survey ranks UCLA Health on the 2025-2026 Best Hospitals Honor Roll, which represents the top hospitals nationally for excellence in multiple areas of care. In California, UCLA Health ranked as #1 in the state and Los Angeles. UCLA Urology was ranked as the nation's #7 urology department.



# The Men's Clinic at UCLA

## DID YOU KNOW?

The new weight-loss medicines often deplete muscle and bone mass in men unless combined with improved protein intake, resistance training, and optimal hormone management. The team at The Men's Clinic at UCLA (TMC) now offers combined GLP1 and hormone replacement therapy through its comprehensive service line. Patients meet with a TMC physician, who develops a care plan with TMC's advanced practice provider and trained GLP nurse to guide them through their fitness and weight-loss journey.

*The Men's Clinic at UCLA is a comprehensive, multidisciplinary health and wellness center located in Santa Monica, with a satellite clinic in Burbank. For more information or to make an appointment, call (310) 794-7700.*



### UPDATE

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