



UCLA UROLOGY

UPDATE



Through Septembeard.org, men grow beards during Prostate Cancer Awareness Month to raise money for research at major institutions, including UCLA Urology.

"Septembeard" Promotes Male **Bonding to Raise Awareness and Funds for Prostate Cancer Research**

hen Art Wagner went in for a routine physical in April 2009, the last thing he expected to learn was that he had cancer.

Mr. Wagner admits he was motivated to make his first visit to a doctor in about seven years out of vanity.

suggested I have a PSA test." The suggestion proved

"I had gotten in really good shape and wanted to hear the doctor tell me how well I was doing for a guy in my late 40s," he recalls. "My doctor did say that, but as I was getting ready to leave he

"This is a grassroots effort from people all over the country. We are gaining momentum."

The following summer and fall, Mr. Wagner, a San Francisco Bay Area

he had prostate cancer.

He underwent surgery in

July, followed by adjuvant

radiation therapy.

resident and longtime sports fan and participant,

pivotal. After learning his PSA was elevated, Mr.

Wagner returned for a biopsy, which revealed

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FALL 2013

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"Septembeard"

For more information on supporting UCLA Urology through Septembeard, visit www.septemberbeard.org



Septembeard funds support prostate cancer research at seven top institutions: UC San Francisco, Johns Hopkins, MD Anderson, Northwestern, Memorial Sloan-Kettering, the Mayo Clinic and UCLA Urology.

took note of the baseball Giants' improbable run that ended up in a World Series title. Inspired by closer Brian Wilson's vow not to shave during the season or post-season, "Fear the Beard" became a rallying cry on T-shirts and signs.

"Using the professional sports

analogy, the idea is to form

teams and get people to support

your team in an environment of

competition and camaraderie."

"I thought, no one is doing anything major in September, which Cancer Prostate Awareness Month," says Mr. Wagner, who has more than 25 years of experience in brand development,

sales, marketing and media. "Putting September and beards together seemed like an interesting hook."

The result is Septembeard.org, a nonprofit organization that raises money for prostate cancer research by having men grow a beard in September for prostate cancer awareness - and asking friends,

family members and colleagues to sponsor their pursuit through donations. "Using the professional sports analogy, the idea is to form teams and get people to support your team in an environment of competition and camaraderie," Mr. Wagner says. "It's also a nice excuse to grow a beard." This year marks the third Septembeard campaign, and the first in which UCLA Urology is a beneficiary institution.

Already, Septembeard has succeeded beyond what could have been predicted. Using Mr. Wagner's contacts in advertising and marketing to place public service announcements as a way to get the program off the ground, Septembeard raised \$127,000 in 2011, the organization's first year, far exceeding its goal of \$50,000. For the most part, the donations were small. "This is a grassroots effort from people all over the country, with \$10, \$25 and \$50 donations," Mr. Wagner says. Last year, Septembeard aimed to surpass its debut total. It succeeded and then some, raising more than \$260,000. "We are gaining momentum," Mr. Wagner notes.

Rather than sending donations to an existing foundation, Mr. Wagner decided to choose top prostate cancer research centers and write donation checks directly to them as a way of reducing administrative costs, ensuring that each institution would receive the largest percentage of each donation. He started with six, aiming for geographic diversity: UC San Francisco, Johns Hopkins, MD Anderson, Northwestern, Memorial Sloan-Kettering and Mayo Clinic. Entering the third year, Mr. Wagner asked his physician contacts at UC San Francisco and Johns Hopkins if any institution was missing from the list. "Without equivocation, both said if we wanted to have the best prostate cancer research and treatment

> country, we should include UCLA," Mr. Wagner says.

> Mr. Wagner notes that although annual prostate cancer and breast diagnoses cancer

and deaths are virtually identical, corporate and individual fundraising involvement and participation in breast cancer awareness activities far exceed those of prostate cancer. He believes this is partially attributable to social norms. "Many men, especially younger men, don't want to feel weak or vulnerable and will therefore go to great lengths to avoid the experience of these feelings," Mr. Wagner says. "Unfortunately, most discussions of illness, coupled with outdated social cues surrounding masculinity, trigger negative feelings and can inhibit men from participating in prostate cancer fundraising initiatives. Breast cancer initiatives have succeeded largely because women operate under a different social dynamic that encourages and supports caring for each other."

With that in mind, Mr. Wagner structured Septembeard in a way that would promote male bonding. "I want the guys to feel they are in this together," he says. So Septembeard encourages participants to form teams and name them. To foster competition, each team is placed in a geographic division – Western, Southwestern, Midwestern, Southeastern and Eastern – and a "Leaderbeard" on the organization's website (septembeard.org) updates in real time the top 10 teams in each division in money raised.

"The competition aspect really helps in raising the money," Mr. Wagner says. He notes that last year, one of his close friends would call almost every day to discuss where his team stood. "He'd say, 'Oh no, this team just passed us by \$10; I'm putting another \$20 in,' "Mr. Wagner remembers. "That was the intent – to get everyone to work harder because they want to finish as high as they can – which means donating as much to prostate cancer research as possible." One of the teams carries special meaning for Mr. Wagner – he created the Arthur F. Wagner Memorial Team in memory of his father, who died of prostate cancer last year.



Mr. Wagner intends for Septembeard to bring to prostate cancer fundraising four tenets that he believes have historically inspired men to take action: fun/humor, teamwork, competition and victory. "We cheer loudest for our heroes and teams in their moment of victory," he says. "And

we use humor to open the door to discuss serious matters. The goal of Septembeard is to open up the dialogue and make men comfortable talking about it in a way that it's not a downer, but instead they're pulling together and supporting each other."

For more information about establishing a team and supporting UCLA Urology by participating in this year's Septembeard, visit www.septembeard.org.

Letter from the Chair



s a leading urology program within a world-renowned academic medical center, UCLA Urology delivers state-of-the-art therapies to patients who seek our care for the full spectrum of urologic conditions. But our mission extends beyond the diagnosis and treatment we provide. It also includes research that identifies the causes of urologic diseases, develops and tests new and better treatments and prevention strategies, and disseminates these advances throughout the community.

One obvious indication of UCLA Urology's prominence in research is reflected in our consistent place at or near the top when it comes to competitive research funding from the National Institutes of Health. The volume of our funded studies tells only part of the story, though. At least as important is our strength across the continuum by which discoveries are made and brought to fruition to save and improve lives.

In the laboratory, our scientists unravel the genetic factors and molecular processes that drive the formation of tumors and other urologic disorders. Their critical findings fuel the work of our clinical researchers, who collaborate with our basic scientists to translate these laboratory discoveries into new and better treatments to be tested in clinical trials.

When translational science first became a hot topic and a top priority in the biomedical community, it typically referred to moving promising laboratory discoveries into the clinic through effective therapies. But in recent years it has become clear that developing an effective treatment means little if the benefit doesn't reach the wider population. And at UCLA Urology, we are also a leader in the population sciences – research into how advances can be disseminated widely into community practice. Research has shown that U.S. patients receive only half of recommended, evidence-based services. Closing that gap requires partnerships with the community as we seek to share knowledge and ensure that patients and practitioners everywhere are aware of the most recent advances to make the best informed choices.

While we are proud to count some of the most talented and renowned investigators among our faculty, the power of UCLA Urology's research effort lies not in individuals but in the collective strengths we have in basic, clinical and population sciences. It lies in the closeness with which scientists at all points on the continuum work together to move discoveries to the clinic and the community – to you, our partners in this effort.

Mark S. Litwin, MD, MPH
 Professor and Chair
 UCLA Urology

UCLA Urology Symposium Features Leaders in Community Efforts to Improve Health of African-American Men

mid continuing disparities between the health of African-American men and that of other racial and ethnic groups, a UCLA Urology symposium held in May brought in leaders of community-based health outreach to share lessons they have learned in initiatives aimed at promoting better health through community interaction and trust-building.

"Innovative Methods to Improve the Health of African-American Men," a half-day symposium held at Ronald Reagan UCLA Medical Center, featured presentations by four experts who have pioneered novel approaches to addressing the issue, including partnering with community barbershops frequented by African-American men.

"This symposium brought together medical experts and community organizers to share important insights into how best to translate scientific knowledge to the broader population," says Mark S. Litwin, MD, MPH, UCLA Urology chair. "It is part of the core mission of the UCLA Health System."

For a variety of reasons, African-American men suffer much worse health than other groups. As an example, 40 percent of black men die prematurely from cardiovascular disease, compared with 21 percent of white men. African-American men also have the highest rates of prostate cancer deaths. "It is extremely important that we continue to develop innovative ways to address the health of minority men, because these disparities represent a problem that isn't going away," says Stanley Frencher, MD, MPH, a former Robert Wood Johnson Clinical Scholar at UCLA who is currently chief resident in urology at Yale School of Medicine.

Disparities in health such as those affecting African-American men have emerged as a major public health concern in recent years. The U.S. Office of Minority Health & Health Equity declared, "The future health of the nation will be determined to a large extent by how effectively we work with communities to reduce and eliminate health disparities between non-minority and minority populations experiencing disproportionate burden of disease, disability, and death." But Dr. Frencher notes that much of the research

in the field has been focused on identifying the disparities and their causes. "Few research projects or programs have



Jody Heymann, MD, PhD, dean of the UCLA Fielding School of Public Health and Distinguished Professor of Epidemiology

demonstrated an ability to close the gap," he says. "This symposium highlighted how a group of researchers, advocates and physicians succeeded by using resources that were there in the community."

Dr. Frencher has dedicated his academic career to understanding prostate cancer screening patterns in minority communities and

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how a group of researchers,

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promoting awareness through communitybased outreach. As a Robert Wood Johnson Clinical Scholar at UCLA he worked with The Black Barbershop

Outreach Program to increase understanding of cardiovascular disease and prostate cancer in Los Angeles' African-American communities.

The Black Barbershop Outreach Program was founded by Bill Releford, DPM, a podiatrist who was also one of the presenters at the UCLA Urology symposium. Since it was launched in 2007, the program has reached tens of thousands of men across the country by providing culturally specific education aimed at increasing screening for cardiovascular disease (diabetes and hypertension); education about diet, exercise and the signs and symptoms of common chronic disease – including information about choices related to prostate cancer diagnosis and treatment; and referrals to local health care providers for free or low-



Left to right: Bill Releford, DPM; Anita Linton, MA; Mark S. Litwin, MD, MPH, Stanley Frencher, MD, MPH; Brian Rivers, PhD, MPH



Dean A. Eugene Washington, MD, MSc, vice chancellor of UCLA Health Sciences and dean of the David Geffen School of Medicine

cost health services. The program targets blackowned barbershops because they represent a cultural institution that regularly attracts large numbers of African-American men, providing an environment of trust and an avenue to disseminate health information.

The symposium opened with welcoming addresses by Dr. A. Eugene Washington, vice chancellor of UCLA Health Sciences and dean of the David Geffen School of Medicine; and Dr. Jody Heymann, dean of the UCLA Fielding School of Public Health. In addition to Drs. Frencher and Releford, presenters included Anita Linton, MA, national barbershop initiative coordinator of Prostate Net, which trains barbers as lay health advisors; and Brian Rivers, PhD, MPH, a member of the research faculty at Moffitt Cancer Center and gubernatorial appointee to the Executive Council of the State of Florida Cancer Control and Advisory Board, whose research examines the effectiveness of mobile health applications in assisting with the delivery of salient and tailored prostate cancer control and prevention messages to African-American men.

"This symposium had a unique, yet critical, translational aspect that is urgently needed to address disparities in health and health care – bringing a transdisciplinary group of people together who are all focusing on better health outcomes for African-American men, sharing best practices, and seeing how we can effectively collaborate to best address this issue at the individual, community and policy levels," Dr. Rivers says. "It was a very important step in the right direction."

ALUMNI PROFILE

Amnon Zisman, MD



everal months into his new position as chair of the Department of Urology at Assaf Harofeh Medical Center in Zerifin, Israel, Amnon Zisman, MD, is applying lessons he learned while a urologic oncology fellow at UCLA more than a decade ago.

"UCLA Urology is the role model for a multi-unit department in which people work together to leverage everyone's own expertise," Dr. Zisman says. "This is not typically how it works in Israel, where you often have

physicians trying to do everything, which can lead to competition. That's not good for the department – it prevents people from focusing on fields of interest and becoming more proficient and efficient in their area."

Dr. Zisman grew up in Israel and completed his residency training at the 850-bed Assaf Harofeh Medical Center, located south of Tel Aviv. In 1999 he began a two-year stint as a urologic oncology fellow at UCLA under the mentorship of Dr. Arie Belldegrun before returning to Assaf Harofeh in 2001. He was appointed vice chair of the urology department in 2004, and assumed the leadership in April of this year.

Dr. Zisman came to UCLA Urology at a time when Dr. Belldegrun and colleagues were beginning to show dramatic results with targeted immunotherapy for renal cell carcinoma. That made UCLA the obvious place for Dr. Zisman, who had an interest in kidney cancer, to pursue his training. "The collaboration with medical oncologists in implementing clinical trials within the ward and the integral role of research nurses were among the things that worked so well while I was at UCLA, and that were not so obvious in Israel," Dr. Zisman says. "I learned a lot about how a department should work, and I am meticulously implementing that model now."

Among his former UCLA colleagues, the admiration is mutual. "Amnon was one of the most prolific fellows I trained," says Dr. Belldegrun, director of the UCLA Institute of Urologic Oncology and Roy and Carol Doumani Chair in Urologic Oncology. "He was able to use his limited time at UCLA to complete basic research projects in the lab, publish them in outstanding journals, and establish his legacy project: the creation of a comprehensive UCLA kidney cancer database. This ongoing database has since been updated to include close to 3,000 patients treated at the UCLA Kidney Cancer Program, forming the basis for more than 150 peer-reviewed publications. A generation of subsequent UCLA urologic oncology fellows has continued to carry Amnon's projects and initiatives."



UCLA Urology Providing Staff, Services at MLK-MACC

ecognizing UCLA's expertise, experience, and commitment to community, the Los Angeles County Department of Health Services has asked UCLA Urology to provide staffing and services for the Martin Luther King, Jr. Multi-Service Ambulatory Care Center (MLK-MACC) in South Los Angeles with the retirement of Drs. Nand Datta and Medhi Jam.

Dr. Larissa Rodríguez, co-director of UCLA Urology's Division of Pelvic Medicine and Reconstructive Surgery, will head the urology clinic at MLK-MACC. In a further expansion of the partnership, other UCLA Urology physicians will begin working at MLK-MACC in January, when the new state-of-the-art, community-focused hospital is expected to open.



Dr. Larissa Rodríguez

Peyronie's Disease

Urologic conditions affect people across the life spectrum. In each issue of the UCLA Urology Update we discuss a urologic condition and how it can be addressed.

Peyronie's disease is a disorder in which a non-cancerous layer of scar tissue develops under the skin in the upper or lower part of the penis. This inflammation tends to result in a bent or curved penis during erection that can cause pain and lead to difficulties during sexual intercourse. Peyronie's disease often affects intimacy in relationships and can have a psychological impact on the man. In the most severe cases it is treated with surgery; in many more mild cases, the symptoms will improve without any treatment.

Peyronie's disease has been found to occur in about 1 percent of men, although that may be a low estimate given that many men, particularly those with mild symptoms, don't report the problem to their doctor. Certain conditions have been associated with increased risk, including an inherited abnormality of human leukocyte antigen B7 and a connective tissue disorder such as lupus, diabetes, vascular inflammation, and vitamin E deficiency. Trauma to the penis, either through injury or an invasive penile procedure, can cause a sudden onset of the condition.

Symptoms of Peyronie's disease may include painful erection, an upward or downward bend or curve in the penis during erection, and a thick layer of hardened tissue on at least one side of the penis. In many cases, the disease is associated with a degree of erectile dysfunction, though usually not complete impotence. Other times, there may be no significant pain or the pain may subside, but the curvature can impair intercourse. In about one in five patients, hardened tissue also develops in other parts of the body, such as the hands or feet.

Treatment aims to reduce any pain and maintain sexual function. In many cases, particularly those that are mild, patients are advised to wait at least 1-2 years to see if the symptoms will resolve themselves. Nonsurgical techniques tend to be unproven, although some patients have reported benefits. These treatments include vitamin E supplementation; B-complex vitamins; and injections of calcium channel blockers, collagenase, steroids such as cortisone, and interferon alpha-2b. Surgery can be effective, but is usually reserved for the most severe and persistent cases.

Dr. Jacob Rajfer, UCLA Urologist, specializes in the diagnosis and treatment of Peyronie's disease.

For more information, visit the Healthy at Every Age section of www.uclaurology.com. To make an appointment, call (310) 794-7700.



Kudos

UCLA Urology ranks No. 4 in the country in *U.S. News & World Report's* annual survey. *U.S. News* surveyed nearly 10,000 specialists and sifted through data for approximately 5,000 hospitals to rank the best in 16 adult specialties, from cancer to urology. Death rates, patient safety and hospital reputation were a few of the factors considered.

UCLA Urology's Kidney Transplant Program is the leading transplant program in terms of the volume and outcomes of living donor kidney exchanges performed. The Kidney Transplant Program began in 1963, and UCLA performed some of the first successful kidney transplants in the United States. To date, UCLA has performed more than 6,000 successful kidney transplants. With the full resources of a major academic medical center, the program offers transplant services to patients with complex medical conditions. Innovative approaches have been developed to minimize the risk of living kidney donation and provide patients with the best chance of finding a compatible donor.

Richard Ehrlich, MD, senior physician, was featured in UCLA's *U* Magazine. In addition to being a distinguished physician and surgeon, he is also a preeminent photographer.

Susanne Henning, PhD, adjunct professor, has joined UCLA Urology and will be working with Dr. William Aronson to study the ability of quercetin, an antioxidant, in enhancing the bioavailability and activity of green tea polyphenols for prostate cancer.

Alan Kaplan, MD, UCLA Urology fellow, was selected by the American College of Surgeons to present his essay, "Putting Patient Rankings into Perspective," at its Clinical Congress 2013 Symposium in Washington, DC in October. His essay was one of two selected in the nation.

Allan Pantuck, MD, associate professor, received a grant from the University of California Cancer Research Coordinating Committee to study "Rationally based combination immunotherapy: Active specific dendritic cell based vaccine (DC-Ad-GM·CAIX) and immune-checkpoint blockade targeting the PD1/PD-L1 pathway."

Shlomo Raz, MD, professor and director of the Division of Pelvic Medicine and Reconstructive Surgery, was the first recipient of the Shlomo Raz Medal during the congress of the Confederación Americana de Urología held in San Jose, Costa Rica in August, in recognition of his many contributions to the education of Latin American urologists. The association includes more than 8,000 members from Spain, Mexico, and South and Central America. Robert Reiter, MD, MBA, professor and director of the UCLA Urology Prostate Cancer Program, was appointed to serve on the American Urological Association's Research Council for the next four years. He was selected as the Astra Zeneca Visiting Professor in Prostate Cancer, and will visit and speak with urologists throughout Australia in November. Dr. Reiter also received FDA approval for a new prostate cancer imaging study with an I-124 A11 anti-PSCA minibody. This Phase I study will be led by Dr. Allan Pantuck. Dr. Reiter's Stand Up to Cancer clinical study obtaining biopsies from men with castration-resistant prostate cancer was approved and is now accruing patients.

Nazy Zomorodian, RN, MSN, was appointed to the UCLA Urology faculty as a clinical instructor of urology. Since 2001, Ms. Zomorodian has served as administrative and nursing director of UCLA Urology's Genitourinary Oncology Clinical Trials Office. She is highly distinguished in her field: In 2003 she earned the MacFarland Award for Excellence in Urology Practice. Ms. Zomorodian administers all therapeutic investigatory oncology drug treatments for trials conducted in the UCLA Institute of Urologic Oncology. In addition to her clinical responsibilities, Ms. Zomorodian works closely with medical students, residents and fellows to support their education in clinical research conduct, management and budgeting.



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U.S.News & World Report's
Best Hospital Survey ranks UCLA as
the No. 5 hospital and UCLA Urology
as the No. 4 department in the country.



UCLA Medical Group ranks as one of California's top-performing physician organizations.



UCLA Urology Prostate Cancer Program Renewed as Prestigious SPORE



Dr. Robert Reiter

CLA Urology's Prostate Cancer Program has received renewal notification from the National Cancer Institute (NCI) as a Specialized Program of Research Excellence (SPORE) site in prostate cancer under the leadership of Robert Reiter, MD, MBA, Bing Professor of Urologic Research. The five-year, \$11.6 million grant further expands UCLA's renowned prostate cancer program, bringing in researchers and clinicians from many disciplines across the campus to unravel the mysteries of prostate cancer.

The renewal marks the beginning of a third cycle of funding aimed at improving prevention, detection and treatment of a disease that will kill 30,000 American men this year. Estimates by the NCI are that more than 238,000 men will be diagnosed with prostate cancer in 2013. By the end of the current funding period, the UCLA Prostate Cancer Program will have held the prestigious SPORE designation for 15 years.

The UCLA prostate SPORE is the only one in California and one of approximately seven in the United States. The grants bring together researchers who might not otherwise have a chance to collaborate in large academic and medical institutions toward the goal of translating basic research from the laboratories into patient care much more quickly and effectively.

UPDATE

Fall 2013 | VOL. 24 | NO. 4

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