



UCLA UROLOGY

UPDATE



Above left: Kirsten Jepsen recently met Ken after he received Ms. Jepsen's kidney and a new lease on life. Above right: Following her surgery Ms. Jepsen was visited by her friend Debbie, who, thanks to Ms. Jepsen's generosity, will be prioritized if she needs kidney transplantation in the future.

Kidney Donors Can Give Now So Loved One Can Benefit Later

In the aftermath of the tragic death of her 21-year-old son Alec in 2016, Kirsten Jepsen experienced something beautiful: As a designated organ donor, Alec's two kidneys, liver and heart were recovered, shipped, and successfully transplanted into four individuals whose organs were failing them.

"It was Alec's birthday, and here these four people were having their own rebirth, able to lead new lives because of his organs," Ms. Jepsen says. "To know that out of my son's death at least there was now a future for them meant so much to me."

Ms. Jepsen was so moved by the experience that a year after her son's death, she decided she wanted to provide the gift of life for a fifth person, by donating one of her own kidneys.

Her plan was to be an altruistic donor, giving one of her kidneys to a stranger who needed it. But as she began to pursue the idea, Ms. Jepsen learned that one of her close friends since childhood had a genetic disorder that at some point was likely to cause her kidneys to fail. "Debbie never liked to talk about it, but I knew there was a problem, so I told her I wanted to be a donor and asked her if she needed a kidney," Ms. Jepsen says. "She said she

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to donate are biologically incompatible with their would-be donor. To overcome that hurdle, programs such as UCLA's perform kidney exchanges, in which two unmatched donor-recipient pairs with reciprocal compatibilities are brought together; and chains, in which an altruistic individual donates to a recipient with a willing but incompatible donor, then that incompatible donor gives to another person in another unmatched pair, and so on. UCLA has been involved in more chains than any other center.

The voucher program, established at UCLA in 2014 and now involving dozens of other transplant centers, overcomes another hurdle to living donors: chronological incompatibility. "Many people are incompatible not by blood type, but by time," explains Jeffrey Veale, MD, UCLA Urology associate professor and transplant surgeon who serves as director of the UCLA Kidney Exchange Program. "They can donate now, but their relative or friend won't need the kidney for a number of years."

The idea for the program came from a retired judge, Howard Broadman, whose grandson Quinn had been born with a single kidney that wasn't fully functioning. Although Quinn wasn't expected to need a kidney transplant for 10-15 years, if at all, Mr. Broadman knew he would likely be too old by then, so he approached the UCLA Kidney Exchange Program with a proposal: He would donate his kidney to a stranger now, and in return his grandson would receive a voucher that would prioritize him for a future kidney transplant if he needed it.

As an altruistic donor, Mr. Broadman started a chain, with his recipient's sister "paying it forward" and donating to another stranger with whom she was compatible; best of all for the retired judge, Quinn now has a voucher if he ever needs a kidney. Since then, more than 30 such donations have been made, and with the program being administered by the National Kidney Registry, voucher recipients can redeem their voucher at any participating

continued from cover

didn't now, but at some point she might."

Ms. Jepsen, who was about to turn 60, feared that she would be too old to donate by the time Debbie needed the organ, even if the two were found to be a biologically compatible pair. Then she learned she didn't have to wait to help her friend. Through the National Kidney Registry's Kidney Voucher Program, coordinated by the UCLA Kidney Exchange Program, she could donate her kidney to a stranger now and in doing so provide Debbie with a voucher that would allow her to be given priority for a live-donor kidney if she needed one.

UCLA is a world leader in kidney transplantation, having performed 400 of them in 2018. But approximately 94,000 people in the U.S. are on the waiting list, and it can take as long as 8-10 years before a suitable deceased donor becomes available. That has led to a national push to increase the number of living donors. Beyond the advantage of expanding the pool of available organs, a living donor's kidney functions for a median of 15 years, nearly double that of a kidney from a deceased donor.

More than one-third of people with kidney failure who have a friend or relative willing

"It gave her peace to know that if she needed a kidney, she would be able to get one."

Through the National Kidney Registry's Kidney Voucher Program, coordinated by the UCLA Kidney Exchange Program, Kirsten Jepsen (above left) was able to donate her kidney to a stranger now and, in doing so, allow her friend Debbie (above right) to be given priority for a live-donor kidney if she needs one in the future.

transplant center.

“The patients are the ones who are driving this,” says H. Albin Gritsch, MD, UCLA Urology clinical professor and surgical director of the UCLA Kidney Transplant Program. “This is philanthropy at the grassroots level, involving a different kind of donation. It’s very exciting.”

When Kirsten Jepsen learned she could help both her friend and a stranger in need through the UCLA Kidney Exchange Program, she didn’t hesitate. Earlier this year she had dinner with Ken, the man who received her kidney. “He had been on dialysis three days a week and thought that was how he was going to die,” Ms. Jepsen says. “It was awesome to meet him and hear how his life has completely changed.”

Her friend Debbie might never need a kidney, but is comforted in knowing that because of Ms. Jepsen, if she ever does she won’t have to wait long. “She was in tears, so honored by the fact that I would do this for her,” Ms. Jepsen says. “It gave her peace to know that if she needed a kidney, she would be able to get one.

“This has been an amazing experience. I wish I had another kidney to give.”

Major Endowment Supports UCLA Urology Trainees

UCLA Urology has received a \$1 million endowment from Richard C. Onofrio, MD, to establish a first-of-its kind educational endowment in resident education within the department. The endowment will support access to innovative educational programs for UCLA Urology residents — allowing them to optimize their training opportunities, tailor their training toward their individual career goals, and maximize their potential as future healthcare leaders.

“In establishing this endowment, Dr. Onofrio has ensured that future generations of urology trainees at UCLA have access to resources in support of their education,” says Mark S. Litwin, MD, MPH, UCLA Urology chair. “Training the next generation of physicians and scientists is core to our mission.”

UCLA Urology trainees spend one year rotating on general surgery services, then spend the next five years in urology, including a year of dedicated research. The clinical years are spent serving at five different sites, including two county hospitals and the nation’s busiest Veterans Affairs Medical Center, a unique learning opportunity that exposes trainees to a broad range of patient populations and health systems. Only a handful of urology programs in the U.S. include a research year; UCLA Urology’s is funded by the department, based on the belief that it is critical to bolstering residents’ careers. UCLA is also one of four sites selected to participate in the American Urological Association’s physician-scientist residency training program, designed to foster the growth of the next generation of basic science physician-scientists in urology.

“Educational approaches to how we teach our trainees are evolving,” notes Jennifer S. Singer, MD, UCLA Urology’s director of education. “We are retiring old methods and pursuing innovative approaches in medical education. Dr. Onofrio’s generosity will allow our department many of the necessary resources to be more effective teachers.”

Symposium Brings in Japanese Urologists

UCLA Urology hosted a three-day live symposium, jointly sponsored by the American Urological Association (AUA) and the Japanese Urological Association (JUA), in February. Next Frontiers in Urology 2019 was the fifth collaborative symposium jointly held by the two organizations since 2011. The 2019 course focused on the latest in the medical and surgical management of the areas deemed most essential to urologists, and featured lectures by prominent AUA and JUA senior urologists, including many UCLA Urology faculty. A major focus of the collaboration was the inclusion of young Japanese urologists and residents. In addition to a robust didactic program, 34 young JUA urologists participated in surgical observerships with UCLA Urology faculty.



Leonard (Leo) Liang, MD



As he was going through his six-year urology training with Kaiser Permanente in the late 1990s, Dr. Leonard (Leo) Liang had every intention of devoting his career to practicing general urology full-time. But during his residency, Dr. Liang did a rotation with the UCLA Kidney Transplant Program under the guidance of its surgical director, UCLA Urology's

Dr. H. Albin Gritsch. Inspired by the field of kidney transplantation and by his mentor, Dr. Liang decided to return in 2002 for a two-year UCLA Urology fellowship. Today he has a highly unusual role for a urologist — splitting his time between running a private solo general urology practice in Downtown Los Angeles and serving as a kidney transplant surgeon in support of the UCLA Urology program at Harbor-UCLA Medical Center.

“Dr. Gritsch is an excellent mentor and role model who has had a great influence on my career,” Dr. Liang says. “Whenever I have a difficult situation I always ask myself what he would do, and the answer is always not necessarily the easiest thing, but what is right for the patient.” The training had personal as well as professional benefits for Dr. Liang: During his residency rotation he met his future wife Dr. Alice Peng, who was a nephrology transplant fellow. They are raising two children.

Dr. Liang says he enjoys the variety associated with his solo practice, where he sees the full gamut of cases, helping to meet the needs of an underserved population and bolstered by his fluency in Spanish. In addition to performing transplants at Harbor-UCLA, he teaches UCLA Urology residents who rotate through the program. He also travels to hospitals all over Southern California in support of the nonprofit organization One Legacy in the recovery of organs from deceased donors that can then be used for transplant.

“Dr. Liang has been an invaluable physician, partner and educator at Harbor-UCLA for many years,” says Jeremy Blumberg, MD, UCLA Urology assistant professor and chief of urology at Harbor-UCLA Medical Center. “He is always available with a smile and a good story for the residents. Dr. Liang has also been known to bring his guitar so that he can serenade the OR staff while waiting to start some of his late-night cases.”

“As a transplant surgeon, I can be a bridge for living donors who are engaged in the ultimate act of caring,” Dr. Liang says. “And for deceased donors, I am able to serve as a bridge between a tragedy and a life-changing event thanks to the generosity of deceased individuals and their families. It's a great privilege to be part of that.”

Helene Spiegel, 1951-2019

Helene Spiegel had benefited greatly as the recipient of a living-donor kidney transplant at UCLA, and she wanted to make things as easy as possible for others going through the process. So, as a board member of the Thomas Spiegel Family Foundation, Ms. Spiegel championed the establishment of the Spiegel Recipient Lodging Program, a pilot program of assisting transplant recipients during a time of great need. The program provides funding to cover the on-campus housing of UCLA kidney transplant recipients for up to seven days after their hospital discharge — accommodations that allow the patients to feel safe and close to medical care during their initial recovery, facilitate their attendance at postoperative visits by minimizing travel, and provide them with excellent customer service.

H. Albin Gritsch, MD, surgical director of the UCLA Kidney Transplant Program and a UCLA Urology clinical professor, notes that the period immediately after a kidney transplant recipient is discharged from the hospital is a critical time that involves frequent follow-up appointments, constant monitoring and wellness education. Many patients in the UCLA program live hours away, particularly when factoring in traffic. Although medical care for a kidney transplant is covered by insurance for most Americans, kidney disease can have a significant economic impact on a family, and many lack the financial wherewithal to pay for a hotel during that time.

“Helene recognized that post-transplant, it can be extremely stressful for kidney recipients,” Dr. Gritsch says. “There is a risk of rejection and the need to adjust to multiple medications, which requires a number of follow-up appointments. She knew that the ability to stay local during that time is important both physically and mentally, and would help our patients achieve the best possible outcomes.”

The Spiegel Recipient Lodging Program was launched in February 2018, and 45 patients benefited in the first year with 202 nights of complimentary lodging. A typical example of the gratitude patients expressed for the program came from one transplant recipient, who said: “Please tell the donor, first of all, God bless them for being so giving ... the commute to get to UCLA is hard. It was God sent. Tell the donor that they made my life a whole lot easier.”



Spiegel Recipient Lodging Program beneficiaries (l. to r.) David Hood, Prince Escano, and Ramzy Henein

Letter from the Chair



Our kidney transplant program is about something much larger than what we do as physicians.

Dr. Kelsey Martin, dean of the David Geffen School of Medicine at UCLA, refers to a “cultural north star” that all of us as clinicians and academics (and humans) should pursue. The quiddity of this guiding framework includes three essential elements. The first is to *do what’s right*. In the face of financial pressures and societal inequities, as physicians we are obligated to make decisions grounded in ethics and evidence, always putting our patients’ interests first and seeking equipoise. The second is a fundamental signpost — *make things better*, both for individual patients and for the larger population. And the third is too often overlooked: *be kind*. We might not always be able to cure patients, but we must never fail to be honest, to listen, and to show compassion and empathy. Kindness in and of itself has considerable therapeutic value. And we should treat each other with kindness.

The UCLA Kidney Transplant Program, which is highlighted in this issue, exemplifies UCLA Urology’s adherence to all three of these desiderata. Through the dedication and excellence of the entire team, our program consistently achieves among the best outcomes with the highest volume of patients — through the generosity of deceased and living donors, these very sick individuals can return to good health. Our transplant program is also a leader in the effort to expand access to this life-saving surgery through such innovative initiatives as kidney exchanges and altruistic donor chains, in which an individual who wishes to donate a kidney to a stranger is matched with someone who has a biologically incompatible donor, whose donor is matched with someone else with an incompatible donor, and so on.

But our kidney transplant program is also about something much larger than what we do as physicians. It’s about the kindness of individuals and families who make the decision to be organ donors after a tragic death, and about people who make the selfless decision to become living donors as a way of helping to heal a loved one or even a complete stranger. These heroic kidney donors embody what we aspire to as physicians: By doing what they believe to be right and making things better for others, they demonstrate the power of kindness, and reaffirm our faith in the decency of those around us.

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

Kudos

William Aronson, MD, chief of urology at Olive View-UCLA Medical Center and chief of urologic oncology at the West Los Angeles VA Medical Center, received a \$100,000 grant from Fish Importers (CenSea, Inc.) to support his clinical trial, “Fish-Based Diet For Prostate Cancer Patients On Active Surveillance.”

UCLA medical student **Daniel Brownstein** and UCLA Urology’s **Dr. Nishant Patel** were selected to present their study “A Qualitative Analysis of Decisional Conflict in Kidney Stone Patients” during the 2019 American Urological Association annual meeting in Chicago. Dr. Patel was selected to give the Plenary Take Home Message for Stone Disease at the same meeting.

Nicholas Donin, MD, UCLA Urology assistant clinical professor, and his colleagues **Lorna Kwan** and **Drs. Andrew T. Lenis, Alexandra Drakaki, Mark S. Litwin, and Karim Chamie** had their manuscript, “Second primary lung cancer in United States cancer survivors, 1992-2008,” accepted for publication in the *Journal of Clinical Oncology*.

Richard M. Ehrlich, MD, UCLA Urology professor emeritus, had 35 polaroid images from the book *Faces of Promise: Looking Beyond Autism* accepted into the permanent collection of the Houston Museum of Fine Arts, which houses one of the most important photography collections extant. Dr. Ehrlich’s sixth book, *Surface Aria: Inside the Outside*, was recently published.

UCLA Urology faculty **Isla Garraway, MD, PhD**, and **Andrew Goldstein, PhD**, were invited speakers and participated in The 3rd Leo and Anne Albert Charitable Trust Workshop: Reducing the Burden of Bone Metastatic Prostate Cancer, held

February 8-9 at UC San Diego.

Joseph Shirk, MD, UCLA Urology fellow, received a Urology Care Foundation 2019 Research Scholar Award for his grant, “3D, Virtual Reality Imaging for Robotic Prostatectomy.” His mentor is **Dr. Christopher Saigal**.

Sriram Eleswarapu, MD, PhD, UCLA Urology fellow, received a Urology Care Foundation 2019 Research Scholar Award for his grant, “Engineering Novel Biomimetic Hydrogels for Tunica Albuginea Regeneration in Peyronie’s Disease and Penile Injury.” His mentors are **Drs. Jesse Mills, Jacob Rajfer, Ali Khademhosseini, and Ali Dabaja**. Dr. Eleswarapu also received a Sexual Medicine Society of North America grant for his project, “Quantitative Evaluation of Peyronie’s Disease Deformities Using 3D Photogrammetry.”

Izak Faiena, MD, UCLA Urology fellow, was awarded the Society for Immunotherapy of Cancer’s (SITC) travel award to attend the SITC Winter School for young physicians and researchers starting careers in cancer immunotherapy. Dr. Faiena and his colleagues **Drs. Stephanie H. Astrow, David A. Elashoff, Rajul Jain, Adrian Bot, Karim Chamie, Arie S. Belldegrun, Allan J. Pantuck, and Alexandra Drakaki** had a paper related to the expression of important immune markers in bladder cancer accepted in *Cancer Immunology and Immunotherapy*; the study will be featured on the cover of a future issue of the journal.

Taylor Sadun, MD, UCLA Urology resident, gave a podium presentation entitled “Molecular Hallmarks of mpMRI Visibility in Prostate Cancer” at the 2019 Longmire Scientific Day. Her mentor is **Dr. Robert Reiter**.

Rajiv Jayadevan, MD, UCLA Urology resident, received a Society for the Study of Male Reproduction Men’s Health Traveling Fellowship, which provides residents with intensive exposure to male fertility medicine and sexual medicine training.

David C. Johnson, MD, MPH, UCLA Urology fellow, and colleagues **Lorna Kwan** and **Drs. Steven S. Raman, Sohrab A. Mirak, Amirhossein M. Bajgirani, William Hsu, Cleo K. Maehara, Preet Ahuja, Izak Faiena, Aydin Pooli, Amirali Salmasi, Anthony Sisk, Ely R. Felker, David S.K. Lu, and Robert Reiter** had their manuscript, “Detection of individual prostate cancer foci via multiparametric magnetic resonance imaging,” published in the journal *European Urology*.

Aydin Pooli, MD, UCLA Urology fellow, co-authored five abstracts presented at the 2019 Genitourinary Cancers Symposium of the American Society of Clinical Oncology (GU ASCO) meeting in San Francisco, and co-authored a paper published in *European Urology*.

Two publications by **Jeffrey Veale, MD**, UCLA Urology associate professor and director of the UCLA Kidney Exchange Program, were the third- and fourth-most read publications by transplant surgeons in 2018: “A review of 1,748 kidney paired donation transplants” and “Shipping living donor kidneys and transplant recipient outcomes.”

UCLA has been approved to be a member of ReSKU (Registry for Stones of the Kidney and Ureter), a multi-institutional collaborative led by UC San Francisco that harnesses the power of the electronic medical record to extract vital data on kidney stone patients.

Kidney Donation

Kidney transplantation is one of medicine's greatest miracles — restoring health to individuals who are extremely sick and, in some cases, near death. Unfortunately, there are not enough donor kidneys for everyone who needs one. In the United States, approximately 94,000 people are on the waiting list for a donor kidney — a wait that can last several years, and sometimes as long as a decade. Anyone has the potential to save the lives of strangers or loved ones by consenting to donate their organs upon their death or by donating a kidney during their life.

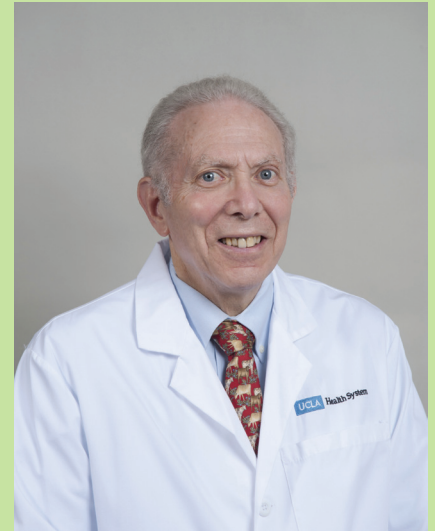
A kidney transplant can be a life-saving procedure for someone with kidney failure, a condition in which kidneys can function at only a fraction of their normal capacity. Without a transplant, individuals with end-stage kidney disease need to be on dialysis to stay alive. Everyone is eligible to sign up to be an organ donor and potentially donate the gift of life upon his or her death. In California, this can be done in person or online through the Department of Motor Vehicles, or by visiting donatelifecalifornia.org. Individuals who choose to be organ donors should let their family members and other loved ones know, so that they can support their wishes.

People with two healthy kidneys may also be eligible to donate one of them in life, either to someone they know or as a non-directed, altruistic donor. On average, kidneys transplanted from living donors have a significantly longer duration than deceased donor kidneys; in addition, a living person who donates his or her kidney helps both the recipient and the next person on the waiting list, who moves up as a result. Individuals interested in becoming living donors undergo both a physical and psychological evaluation to ensure that they are suitable, as well as blood testing to determine compatibility with their recipient. Many kidney transplant programs, including UCLA's, perform kidney exchanges or chain transplantations, which bring together incompatible living donors with others to ensure a match. The most recent innovation is a nonprofit program to provide vouchers for individuals who want to donate to a stranger now, in exchange for a loved one being prioritized for a living donor kidney in case he or she needs one (see this issue's cover story).

The UCLA Kidney Transplant Program is one of the largest in the country, with among the best outcomes. For more information, visit uclahealth.org/transplants/kidney, or to learn more about becoming a living donor, please call (866) 672-5333.



James R. Orecklin, MD, MPH 1940 - 2019



Dr. James Orecklin, a long-time UCLA Urology faculty member, passed away in February with his family at his side.

Dr. Orecklin completed his urology residency at the Wadsworth VA and Harbor-UCLA medical centers, then spent 26 years in community practice in Santa Monica, during which he served as a UCLA Urology volunteer clinical faculty member. In 1999, he and his community practice partners, including Drs. David Leff and Arthur Schapiro, joined the UCLA Urology full-time faculty, bringing their clinical experience and practical knowledge to the department.

In 2001, Dr. Orecklin and Dr. Mark S. Litwin, UCLA Urology chair, created the state-funded IMPACT program, which will soon enter its 20th year of providing free prostate cancer treatment for low-income, uninsured men throughout California. Dr. Orecklin served as IMPACT's medical director for 13 years until his retirement, then continued to contribute to the program's administration.



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U.S. News & World Report's
UCLA Health hospitals in
Westwood and Santa Monica placed
No. 1 in Los Angeles,
No. 2 in California and
No. 7 in the nation in the 2018-19
U.S. News and World Report rankings.



UCLA Urology: #7 in the Nation
Highest Ranked in Los Angeles



The Men's Clinic at UCLA

DID YOU KNOW?

Men under 45 with erectile dysfunction (ED) have double the risk of heart disease and other metabolic abnormalities. At the Men's Clinic at UCLA, all men with ED undergo a comprehensive evaluation to screen for diseases that could affect health and longevity.

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



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