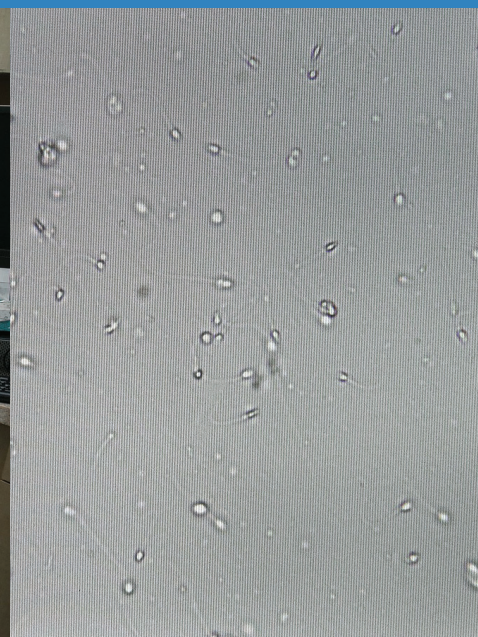
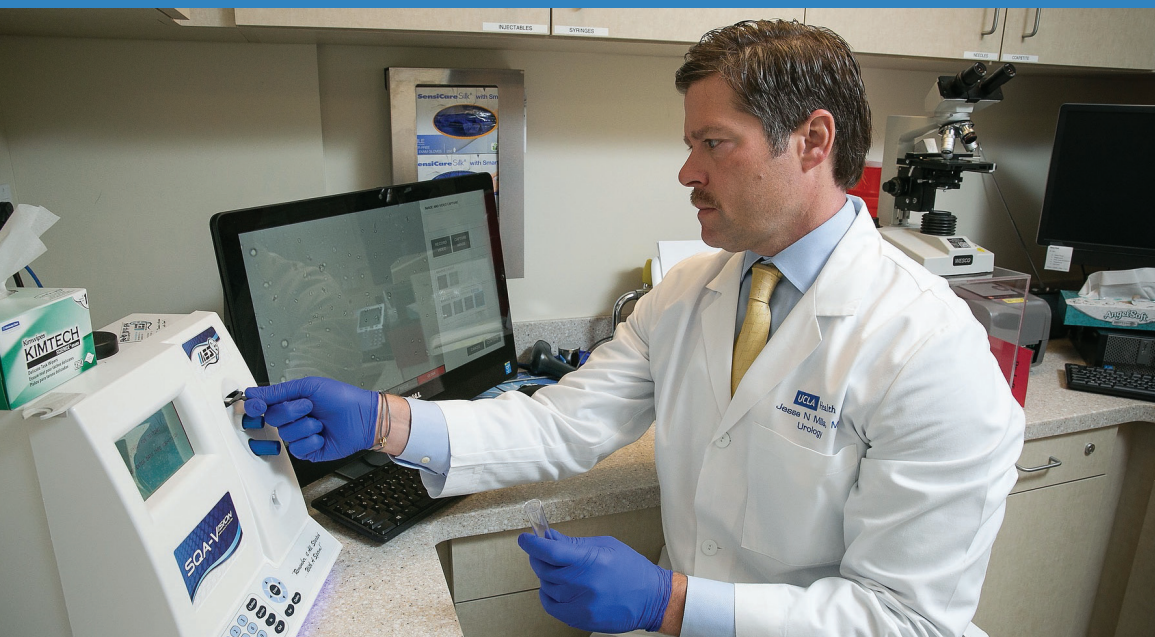




# UCLA UROLOGY

UPDATE



In its first year, the Men's Clinic at UCLA, under the direction of Jesse N. Mills, MD (left), has introduced important new services at UCLA. Among them is in-house semen analysis (right), which provides same-day results to patients with fertility concerns.

## Men's Clinic Continues to Change the Narrative, Add New Services

**T**he Men's Clinic at UCLA opened a year ago as a multidisciplinary health and wellness center aiming to “change the narrative” – a culture in which U.S. women tend to be attentive to their wellness and preventive health needs, while many men wait until they are sick rather than taking proactive steps to optimize their health.

Under the leadership of Jesse N. Mills, MD, a UCLA Urology expert in male reproductive medicine and sexual health, the Santa Monica-based center is doing just that by offering state-of-the-art services that are helping to empower men to take charge of their health.

In the first year, the center has initiated three important services for its patients:

**In-House Semen Analysis.** Through a comprehensive semen analysis laboratory, patients at the Men's Clinic at UCLA can now get answers to their fertility

concerns on the same day they provide their sample; previously, the samples were sent to an off-campus lab and results took much longer. By providing same-day results, consultation and initiation of appropriate treatment plans, the clinic is able to reduce much of the anxiety and stress that comes from having to wait. “This is a huge step forward for men's health at UCLA,” says Dr. Mills.

The semen analysis is available for men who

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The Men's Clinic at UCLA incorporates diet and lifestyle modification along with appropriate therapy to improve sexual and reproductive health. The clinic is contributing to what its director, Dr. Mills (above), sees as a societal shift in which men take more control over their health and well-being.

*continued from cover*

are experiencing questions about their ability to conceive with their partner, as well as for testing fertility after a vasectomy or a vasectomy reversal. The analysis covers four major categories: volume, which can help to determine whether there is a blockage in the reproductive tract that is the source of the fertility difficulties; concentration, which measures the number of sperm per milliliter of ejaculate; motility, which measures the percentage of sperm that are swimming as

well as their speed; and morphology, which assesses the shape of the sperm to determine if that could be contributing to the problem.

**Preservation of Erectile Function After Urologic Surgery.** Both the radical prostatectomy for prostate cancer and the radical cystectomy for bladder cancer carry risks of erectile dysfunction following the surgery. Through a new interdisciplinary protocol at UCLA, prior to undergoing one of these operations patients are referred to the Men's Clinic at UCLA for a comprehensive sexual assessment; they are then followed after the surgery by the clinic's specialists to ensure they are optimizing sexual function, as well as cancer outcomes.

Dr. Mills explains that studies have found that proactively addressing preservation of sexual function results in better outcomes for men undergoing pelvic surgery. The treatment typically includes starting on oral medication before the operation and continuing for approximately six months post-surgically, as well as early use of physical therapy and penile injection therapy when appropriate. "There is science that we can draw on to preserve the function of the blood vessels after the surgery," Dr. Mills says. "And our surgeons understand that even if they have an outstanding record of preserving erectile function, working with us can improve outcomes. That multidisciplinary cooperation is the essence of what a men's clinic should be."

*"Our goal is to reach men who are motivated to do everything they can to maintain or improve their health."*

that 5-10 percent of men have Peyronie's disease, characterized by an abnormal bend of the penis during an erection. For some, this can be a psychologically traumatic condition that can inhibit normal sexual function. Now, through the Men's Clinic at UCLA, patients seeking treatment for the condition can receive a new therapeutic option available at a limited number of centers worldwide. Xiaflex, the brand name for a biologically active enzyme called collagenase clostridium histolyticum, is the first drug approved by the U.S. Food and Drug Administration for Peyronie's. Dr. Mills, who was a principal investigator of late-stage clinical trials of the drug, explains that the therapy, given by injection, helps dissolve the penile plaque that causes the curvature of the penis. "This can greatly improve a man's overall quality of life," he says.

Dr. Mills notes that unlike many men's health clinics, which focus on testosterone therapy, the Men's Clinic at UCLA aims to incorporate diet and lifestyle modification along with appropriate therapy to improve sexual health – potentially including testosterone replacement, medical and surgical therapies for erectile dysfunction, and treatment of infertility. "This is a comprehensive center that is not just treating one disease state, but multiple aspects of male health under one roof," he says.

Within its first year, Dr. Mills adds, the clinic has developed fruitful collaborative relationships with UCLA's sports medicine physicians to help address orthopedic concerns, as well as with addiction medicine specialists to assist recovering patients in optimizing their health. In the near future, Dr. Mills plans to pursue closer ties with other disciplines to which patients are often referred, such as cardiology and East-West medicine.

More broadly, the Men's Clinic at UCLA is contributing to what Dr. Mills believes is an important societal shift, with men taking more control over their health and well-being. "Our goal is to reach men who are motivated to do everything they can to maintain or improve their health," Dr. Mills says. "We hope to bring men into the health care system at an earlier age so that they can take the steps that will keep them active and help to prevent the illnesses that commonly afflict men as they get older."

**New Therapy for Peyronie's Disease.** It's estimated



# Fourth-Year Residents Take Time Away from Patient Care to Focus on Research

At the halfway point in their training, UCLA Urology residents step away from the clinics and operating rooms to spend a year conducting research. Far removed from the fast-paced world of patient care, they can be found in the laboratory, working with research associates and technicians under the supervision of UCLA Urology faculty members who are dedicated to research. Supported in many cases by private philanthropy, the residents spend their fourth year pursuing a research question in their area of interest. In the process of learning under the tutelage of their faculty mentors and helping to advance the science, they gain an appreciation for the biological underpinnings of the conditions they see as clinicians. Following are the paths chosen by UCLA Urology's 2016-17 fourth-year residents:



**Dr. Matthew Pollard**

is working on a care redesign project for UCLA patients with kidney stones. The research team, headed by Dr. Christopher Saigal, UCLA Urology professor and vice chair, is undertaking an exhaustive analysis that calculates the cost of every aspect of the patient's experience – from the initial visit and care planning through any surgical interventions and follow-up. The analysis seeks to better understand all finances associated with the stone care process in order to identify ways costs can be reduced while maintaining optimal outcomes for patients. Beyond the cost analysis, the care redesign is based on patient feedback. Dr. Pollard is conducting extensive interviews with patients about their overall experience in getting their kidney stone treated at UCLA Urology to learn more about the best aspects of their care, as well as aspects that can be improved.

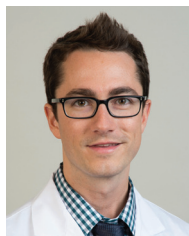
"As reimbursement patterns change and the way we take care of patients continues to evolve, it's important for physicians to take the lead in evaluating our health care system and trying to redesign it in a way that will be best for our patients," explains Dr. Pollard, whose work is funded by a grant from the H & H Lee Surgical Research Scholars program. "Since passage of the Affordable Care Act, physicians – and particularly surgeons – haven't had as much of a voice in this evolving health care system as we should. I hope to be able to incorporate this type of policy work into my future practice, and it's been great to learn under Dr. Saigal, who is a leader in this field."



**Dr. Stephanie Chu** is spending her research year in an untraditional way. Dr. Chu is involved in two projects, both funded by the department and under the guidance of Dr. Jonathan Bergman,

UCLA Urology assistant professor. One is looking at the rates of advance-care planning at the VA Greater Los Angeles Healthcare System after implementation of an integrated urology-palliative care clinic, as well as the preferences of veterans regarding their end-of-life care. The second is a case-study of highly regarded urology residency programs to pinpoint the elements in them that contribute to their success, as well as to identify new tools for teaching emerging urologic skills, such as robotic surgery. "I have always had an interest in education – especially training programs, which are often a targetable area for improvement," Dr. Chu explains.

In addition to her research, Dr. Chu is using the time to pursue an MPH in epidemiology, toward the ultimate goal of integrating clinical medicine with population-based research. "A degree in public health will enable me to engage in meaningful epidemiological research by teaching me skills such as biostatistics and study design, as well as allowing me to make valuable connections with people working in the field of public health," Dr. Chu says. "The support of the department, under the leadership of Dr. Litwin, has enabled me to pursue further training during my residency that I might otherwise not be able to engage in. I am extremely grateful for this opportunity."



**Dr. Andrew T. Lenis** is spending the fourth year of his residency working with two UCLA Urology faculty members, Drs. Karim Chamie and Allan Pantuck, on translational research aiming to

utilize novel immunotherapeutic agents in the treatment of urothelial carcinoma, a type of cancer that typically occurs in the urinary system. They plan to use these therapies for localized cancer that has not yet spread. The approach represents a radical shift from how these immune-system approaches are currently used – primarily as systemic treatments for metastatic disease.

"Our translational research in this field is unique in that it allows me to work with surgeon-scientists within our department, as well as

outside collaborators and researchers in the pharmaceutical industry," says Dr. Lenis, who is funded by an H & H Surgical Research Scholars program grant. "Outside of the lab, I am able to participate in the wealth of clinical and health services-related research in urologic oncology here at UCLA."

Dr. Lenis hopes to use this year to expand his repertoire of basic and translational science techniques, generate results from his group's project, and ultimately provide evidence that could lead to a trial of a new immunotherapy for upper-tract urothelial cell carcinoma. After pursuing a fellowship in urologic oncology, he plans to devote his career to a combination of clinical oncology, research, and medical education.



For **Dr. Tonye "TJ"**

**Jones**, the research year is an opportunity to delve deeper into a problem that has been personal since well before he started medical school. As an African-American who lost his grandfather

to metastatic prostate cancer, Dr. Jones has long been interested in contributing to a better understanding of why the disease affects African-American men at a disproportionately high rate, as well as to finding better treatments that can help all prostate cancer patients. He is currently working with Dr. Leonard S. Marks, UCLA Urology professor, in studying focal therapy for prostate cancer. The research builds on Dr. Marks' work in targeted biopsy, which uses magnetic resonance imaging to identify suspicious areas of the prostate, then fuses the findings with real-time ultrasound in a special device. Focal therapy offers the potential to employ the same system to better target tumors for treatment through approaches such as laser ablation and high-intensity focused ultrasound, while leaving healthy prostate tissue untouched.

Dr. Jones, who recently received the Jerry Janger Award from the STOP CANCER foundation to support his work, has found that the life of a researcher is vastly different from that of a clinician. "In your first three years, everything moves very quickly – you're giving of yourself to many different people during the day, whether it's patients or the health care team," he says. "As a researcher I am just as busy, but my time is my own and it's a much different pace. It's been great to focus heavily on a single problem to the extent that I know more about focal therapy for prostate cancer than most people in the world. Having never done a research year there is a learning curve, but any time you're uncomfortable, that just means that you are growing."

# Filling a Critical Need: Philanthropy's Impact on UCLA Urology Research and Care

*As the following examples attest, philanthropic supporters of UCLA Urology are making a huge impact on the department's research and programs – and in doing so, touching the lives of countless patients and their families. These are several from a long list of generous gifts and pledges made for the 2016 season.*

**Jeffrey and Lori Frieden** continue to provide invaluable support to **Shlomo Raz, MD**, and UCLA Urology's Division of Pelvic Medicine and Reconstructive Surgery (PMRS) fellowship program. The Friedens' recent gift of \$500,000 to support the highest-priority needs of the PMRS division is the latest of multiple donations to the program, including an initial gift in August 2013 to support the PMRS fellowship program and another to support the PMRS suite remodeling and expansion.

Dr. Raz is widely renowned in the field of female urology, having pioneered innovations that are now standards of care worldwide for vaginal and uterine prolapse, urinary incontinence, pelvic floor disorders, voiding dysfunction, and surgical reconstruction after cancer. The Friedens are strong supporters of Dr. Raz and his training program and are invested in continuing his legacy through the fellowship program.

Since 2012, **Hugh and Keets Cassar** have supported the research of **Dr. Leonard S. Marks**, UCLA Urology professor and director of the Active Surveillance for Cancer of the Prostate program. The couple gave \$25,000 this year in a continuation of their support for Dr. Marks, who has been at the forefront

of targeted biopsy and focal therapy for diagnosing and treating prostate cancer.

A multidisciplinary UCLA team headed by Dr. Marks and including urologists, radiologists, pathologists and biomedical engineers has developed and studied a new approach to prostate biopsy that employs magnetic resonance imaging to visualize the prostate tumor, then fuses the images with real-time ultrasound to enable the urologist to see the lesion in real time when performing the biopsy. The approach, which has proved to be much more accurate than the conventional biopsy, serves two major purposes: detecting cancers that would have otherwise been missed, thus directing patients to appropriate treatment at an earlier stage; and offering a degree of reassurance to other patients who have elevated PSA but no detectable cancer so that they can avoid unnecessary treatment.

**Sheldon and Carol Appel** are longtime friends and supporters of UCLA Urology, having been donors since the early 1980s. This year, the couple supported the department yet again with a gift of \$50,000 to the UCLA Urological Fund, which benefits the education needs of the department.

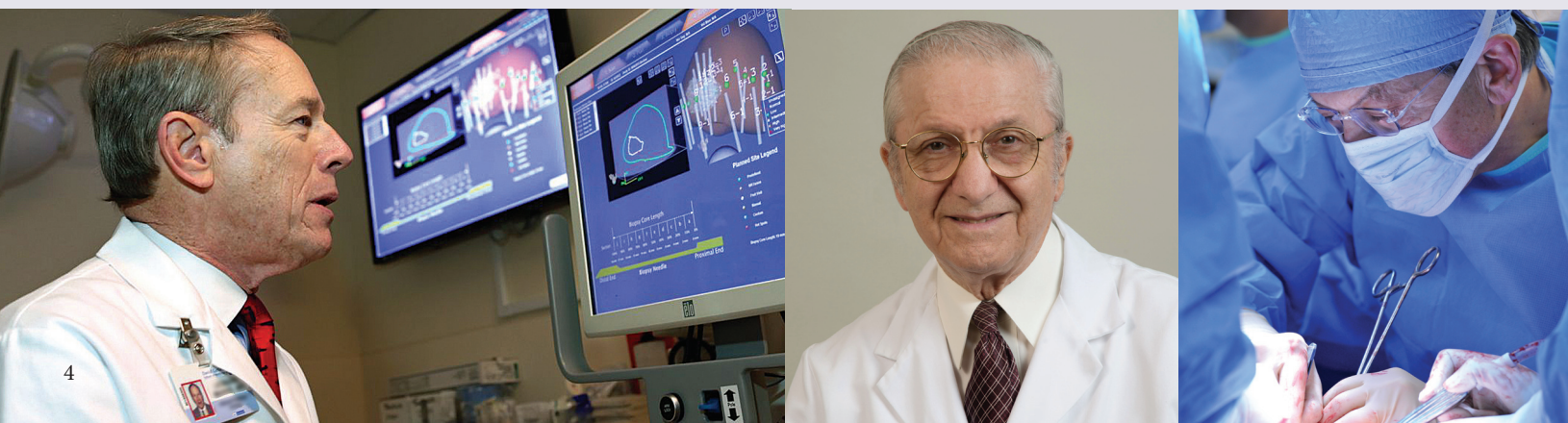
Mr. Appel was one of the visionaries who, along with Joseph J. Kaufman, MD, conceived of the UCLA Frank Clark Urology Center. He was among the first patients treated with the then-new, revolutionary lithotripter (a device used to pulverize and remove ureteral and renal stones) in Munich, Germany. Returning to Los Angeles, he convinced Dr. Kaufman, then

chief of the Division of Urology, that UCLA should bring both the lithotripter and one of its inventors, Dr. Christian Chaussey, to UCLA. Frank Clark, then a Regent of the University of California, realized the importance of this plan and collaborated with Mr. Appel to raise funds to build the Frank Clark Urology Center as a site for the new technology and a modern outpatient facility.

Two of UCLA and UCLA Health's biggest champions and advocates, **Ralph and Shirley Shapiro** most recently gave a gift to support Dr. Marks. Mr. Shapiro earned his bachelor's degree in business administration in 1953 and his JD in 1958, both from UCLA. His wife, Shirley, received her bachelor's degree from UCLA in 1959.

**Bert and Doris Ladd** most recently supported UCLA's Institute of Urologic Oncology with a \$250,000 pledge. Raised in the Kansas and Oklahoma oil fields, Mr. Ladd served as a pilot in the Army Air Forces during World War II and is a graduate petroleum engineer from the University of Kansas who forged a long and successful career in the energy business. Impressed with the treatment he received from UCLA Urology after being diagnosed with prostate cancer nearly 20 years ago, he and his wife have supported the department ever since. UCLA's Institute of Urologic Oncology, under the leadership of **Arie Beldegrun, MD**, brings together a multidisciplinary team of scientists and physicians to develop leading-edge therapies for the treatment of prostate, kidney, bladder and testicular cancers.

Philanthropists have made a major difference in supporting the important work of many in the department, including (l. to r.) Dr. Leonard S. Marks, director of the Active Surveillance for Cancer of the Prostate program; Dr. Shlomo Raz, director of UCLA Urology's Division of Pelvic Medicine and Reconstructive Surgery; and Dr. Arie Beldegrun, director of the UCLA Institute for Urologic Oncology.





# Letter from the Chair



*The philanthropic  
support we receive comes  
in many forms, and  
every gift is valued.*

In each issue of this newsletter, we share with you some of the ways in which UCLA Urology is fulfilling the four core pieces of our mission: conducting cutting-edge research that can lead to new treatments and cures of urological conditions; educating the next generation of leaders in urological health and science through our residency and fellowship programs; optimizing urological health through partnerships and outreach to the community; and providing state-of-the-art care as we seek to help heal humankind, one urological patient at a time. But around the holiday season, at a time when many of us pause to take inventory of the things for which we are thankful, I believe it's important to point out some of the people who make these successful endeavors possible – you, our supporters.

As the articles in this issue make clear, the philanthropic support we receive comes in many forms, and every gift is valued. Donations toward our research programs are critical in this era of shrinking federal and foundation dollars. It's difficult to get any grants from traditional sources, but especially for the high-risk/high-reward, “out-of-the-box” projects that can often yield exciting outcomes. More than ever, philanthropy propels our scientific efforts forward.

The same can be said for the impact of philanthropic dollars in supporting the other aspects of our mission. With state funds no longer available to support our department's teaching efforts, we rely on the generosity of our donors to fund our faculty teachers in putting on educational programs, as well as the learners – residents and fellows who can gain so much from attending professional conferences and seminars. Community service is another traditionally underfunded but critical part of our mission, and philanthropy allows us to stay active outside the traditional university confines. Finally, although the majority of our clinical services are reimbursed by third-party payers, private donors help to support important services that aren't covered through traditional sources, such as the out-of-pocket expenses of altruistic donors to our UCLA Kidney Exchange program (see, for example, the article on page 7).

We wish our extended UCLA Urology family all the best this holiday season. We appreciate all you do to support the important work of our department.

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



## Larry and Joni Flax

**O**n Larry and Joni Flax's 26th wedding anniversary in 2014, the couple learned that Joni had cancer in her right kidney. "It was a huge surprise," Mrs. Flax recalls. "And we needed to move quickly."

Fortunately, testing showed the cancer to be localized, and after Dr. Litwin, UCLA Urology chair, and his team performed robotic surgery to remove Mrs. Flax's kidney, she was determined to be cancer free. Relieved and grateful, the couple told Dr. Litwin they wanted to show their appreciation for the care Mrs. Flax had received by supporting promising research within the department.

As successful restaurateurs – Mr. Flax co-founded the popular California Pizza Kitchen chain – the Flaxes have been active philanthropists since well before Mrs. Flax was diagnosed. "Joni and I have been fortunate to be successful with our business, and feel that because we have the ability to give back, we should do so," Mr. Flax says. "We have supported other medical and educational causes, but this time felt closer to home."

Dr. Litwin introduced the couple to Dr. Karim Chamie, who has been developing a new approach to treating patients with urothelial carcinoma, a type of cancer that typically affects the urinary system. Dr. Chamie's group is using a novel hydrogel polymer base mixed with either chemotherapy (for low-grade cancer) or immunotherapy (for high-grade cancer). The technology is designed to minimize the unnecessary removal of kidneys; moreover, while high-grade tumors tend not to respond to local chemotherapy, stimulating the immune system to target these cancers appears promising. Dr. Chamie is currently mixing the same novel hydrogel with agents that prevent cancer cells from evading the immune system.

With so many worthy causes from which to choose, the Flaxes have in recent years adopted a credo to guide their philanthropy: That which gets measured gets done. "Rather than making one gift and then walking away, we like to be involved, staying informed about the progress and renewing our involvement based on that progress," Mr. Flax explains. The Flaxes have seen the positive results – and have continued to support Dr. Chamie's efforts. "The trajectory of this successful research project is due not only to the very generous support of Joni and Larry, but also to their involvement and enthusiasm in seeing this novel treatment strategy becoming a reality," Dr. Chamie says.

Beyond the data, the Flaxes have felt a personal connection to Dr. Chamie's work. "When I first found out I had cancer, I felt like a victim," Mrs. Flax recalls. "It was a feeling I didn't know, and didn't want to ever have. Supporting this kind of research gave me a sense of empowerment – of helping to find an answer not just for myself, but also for others. That feeling is really helpful when you are trying to persevere and not give in to an insidious disease."

## Helen "Tami" Housley, MD

**I**t's been 17 years since she completed her UCLA Urology training, but Dr. Helen "Tami" Housley continues to reap the benefits.

Dr. Housley, currently a urologist with the VA Southern Nevada Healthcare System, has been a frequent attendee of the UCLA State-of-the-Art Urology Conference, the annual meeting where UCLA Urology faculty and other expert

presenters discuss some of the most challenging clinical issues facing practicing urologists. While attending one of the courses, she met with Carol Bennett, MD, chief of urology at the West Los Angeles VA Medical Center. That has led to a mutually beneficial partnership between the two VA urology departments.

"We are a small department with three-and-a-half full-time providers, and we are now sending some of our patients to West Los Angeles for state-of-the-art robotic surgery and oncology care," Dr. Housley says. "At the same time, we will be receiving some of the West L.A. patients in areas where we have significant availability and time, and we are talking about the possibility of becoming a second site for some of their clinical trials. Through Dr. Bennett I have met some of the other UCLA Urology faculty who work at the VA. It's been great to come full circle as I start to work with them in these new avenues of integration and continuity of care."

After completing her UCLA Urology residency in 1999, Dr. Housley spent 14 years in a busy private practice in Nevada before joining the urology department at the VA Southern Nevada Healthcare System. "I have much more time for patient education than I did in private practice, where we did the best we could but it was quite busy," Dr. Housley says. "The VA is very patient-centric, with many educational materials as well as process and quality metrics that we can use to improve the patient experience. To be able to educate patients about their disease and empower them to make a choice that's best for them is very rewarding."

Dr. Housley's UCLA Urology training came at a time when concepts that are becoming standard today – including patient-centered care and evaluation of clinical pathways to improve quality – were just beginning to take hold, thanks in part to the leadership of UCLA Urology faculty. "I learned that it's not enough just to cure a disease, but that we also must consider the patient's quality of life and actively engage the patient in decisions," Dr. Housley says. "So much of what I learned at UCLA are things I use every day in practice."





# Jane Seymour Hosts 'BREED LIFE' Event to Support Altruistic Kidney Donors



The Breed Life launch event was attended by, among others, actor Alan Thicke (second from left), actress Jane Seymour (middle), and restaurateur Chris Breed (fourth from left), who started the organization to support the UCLA Kidney Exchange Program, along with altruistic kidney donors.

Chris Breed's life dramatically changed on the day in December 2011 when he received a kidney transplant at UCLA, and the Los Angeles-based restaurateur resolved to make it possible for more people to have the same experience.

While Mr. Breed received his kidney from a friend, he was amazed to learn from his UCLA Urology transplant surgeon, Dr. Jeffrey Veale, about so-called altruistic, or non-directed, donors – people who donate one of their kidneys to someone they've never met. The UCLA Kidney Exchange Program, directed by Dr. Veale, is a national leader in expanding the pool of living donors through strategies that include altruistic donations.

"These altruistic donors have never really had a spotlight shone on them, and they often have to pay out-of-pocket expenses such as flight and hotel in order to donate a kidney to a stranger," Dr. Veale notes. "Mr. Breed was moved by their generosity, and he wanted to try to support them."

Breed Life ([www.breedlife.org](http://www.breedlife.org)) was launched with the goal of supporting the UCLA Kidney Exchange Program through its vision "to inspire individuals to pay forward by gifting life." At a kickoff event held last June at the Malibu home of actress Jane Seymour, the organization raised donations that will enable altruistic donors to travel to meet their recipient. "This is

important, as sometimes the altruistic donor's kidney is shipped out of state to an appropriate compatible recipient," Dr. Veale explains. "Breed Life feels that it is important for the altruistic donor to meet the person whose life he or she saved, while helping to spread the word about living donation."

## UCLA Launches 'Voucher Program' for a Future Kidney Transplantation

Kidney transplantation saves lives, but the demand for donor kidneys far exceeds the supply. More than 100,000 people are on the waiting list in the U.S., and for some it can take as long as 8-10 years before a suitable deceased donor becomes available. The UCLA Kidney Exchange Program continues to find innovative ways to increase the living donor pool. In December 2014, UCLA in concert with the National Kidney Registry initiated a "voucher" program that is now beginning to spread across the country.

The idea came from a 64-year-old retired judge, Howard Broadman, whose 4-year-old grandson Quinn was born with a single kidney that wasn't fully functioning. Although Quinn might not need a lifesaving transplant for 10-15 years, Mr. Broadman wanted to donate a kidney now before his advancing age would restrict him from completing the

donor operation. He approached the UCLA Kidney Exchange Program and proposed to donate a kidney to a stranger if, in return, his grandson would obtain a "voucher" that could help prioritize him for a future kidney transplant when needed. The voucher program was approved by both the UCLA Living Donor Committee and the National Kidney Registry Medical Board. Following Mr. Broadman's first voucher donation, at least 12 other transplant centers have joined the program, and two more voucher donations have been completed in the United States.

The program is a win-win: Not only is Mr. Broadman's grandson prioritized for a future kidney when needed, but Mr. Broadman was able to meet the woman who now has his kidney, as well as her sister, who also donated a kidney as part of a chain of transplantations. "There are many people who want to donate a kidney now, but it's not the right time for their relative or friend to go through the transplant procedure," says Dr. Jeffrey Veale, director of the UCLA Kidney Exchange Program. "We think this could be a game-changer by chronologically unlocking the donor from the recipient, thereby liberating many more potential living donations."

For further information on the voucher donation program, see Dr. Veale's Wall Street Journal Op-Ed at <http://www.wsj.com/articles/give-a-kidney-get-a-kidney-1470265583>.



David Geffen  
School of Medicine

**UCLA** Health

UCLA Urology  
405 Hilgard Avenue  
Box 951738  
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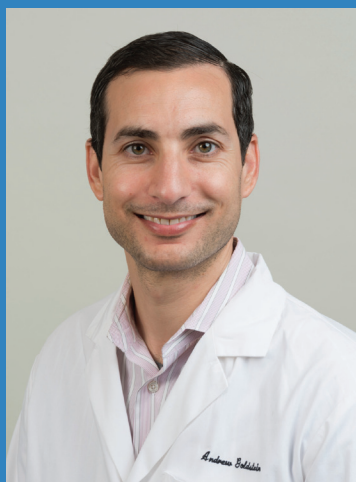
*U.S. News & World Report's*  
Best Hospital Survey ranks UCLA as  
the No. 3 hospital and UCLA Urology  
as the No. 3 department in the country.

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



## NEW FACES

### Andrew Goldstein, PhD



Dr. Goldstein has joined the UCLA Urology faculty as an assistant professor; he also has a faculty appointment in the Department of Molecular, Cell & Developmental Biology at UCLA, and is a member of the Broad Stem Cell Research Center and Jonsson Comprehensive Cancer Center at UCLA. Dr. Goldstein attended Dartmouth College, where he was a two-time NCAA Division 1 All-American lacrosse player. He completed his PhD in the UCLA laboratory of Dr. Owen Witte, then went on to become the inaugural fellow of the Broad Stem Cell Research Center. He received a Prostate Cancer Foundation Young Investigator Award and a Department of Defense Prostate Cancer Research Program Idea Development Award.

#### UPDATE

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