



UCLA UROLOGY

UPDATE



A unique collaboration built by the L.A. County Department of Health Services, along with UCLA Urology's strong commitment to serving these communities, have resulted in top-quality urology care at three UCLA-affiliated county facilities where the department provides services: Martin Luther King, Jr., Community Hospital (top left), Harbor-UCLA Medical Center (below left), and Olive View-UCLA Medical Center (right).

Raising the Bar for Urologic Care Throughout Los Angeles County

At its core, the health care safety net is made up of hospitals and outpatient facilities that serve the more vulnerable members of society, regardless of their insurance status or ability to pay. Safety net patients often face health challenges from factors that include economic and housing instability, reduced access to services, and barriers to regular health care visits. In many parts of the country, these individuals have received care often described as patchwork, constrained by funding and lack of coordination.

But in Los Angeles, where UCLA Urology provides services in three UCLA-affiliated county facilities, a unique collaboration built by the L.A. County Department of Health Services (DHS), combined with the department's strong commitment to serving these communities, has raised the bar for what's possible in safety-net settings — in

the process, serving as a national model for academic urology collaboration with county hospitals and clinics.

"Our goal is to provide UCLA-quality care to everyone in the population," says Jonathan Bergman, MD, MPH, UCLA Urology associate professor and holder of the Mark S. Litwin, MD, Endowed Chair in Mentorship, who is one of the urologists at Olive View-UCLA Medical Center, a 377-bed academic county hospital serving much of the San Fernando

continued on page 2

Summer 2023

VOL. 34 | NO. 3

Donor Spotlight	p3
Alumni Profile	p4
Healthy at Every Age	p4
Letter from the Chair	p5
Kudos	p6
Introducing	p7
Transplant Leader Retires	p7
The Men's Clinic at UCLA	p8

continued from cover



UCLA Urology faculty pictured from top to bottom: Dr. Jonathan Bergman, a urologist at Olive View-UCLA Medical Center and chair of the L.A. County Department of Health Services Urology Primary Care Workgroup; Dr. Jeremy Blumberg, chief of urology at Harbor-UCLA Medical Center; and Dr. Stanley Frencher Jr., medical director for surgical outcomes and quality at Martin Luther King, Jr. Community Hospital.

and Antelope valleys. “We want to ensure that any patient who enters our system from any site gets the same quality care they would receive at UCLA facilities in Westwood and Santa Monica. And we have been able to achieve that.”

Dr. Bergman chairs the L.A. County-DHS Urology-Primary Care Workgroup, which connects all of the urologists who practice in county facilities, along with their primary care colleagues. In addition to Olive View, the network includes Harbor-UCLA Medical Center, a 570-bed teaching hospital and Level I Trauma Center in the South Bay community of Torrance; and Martin Luther King, Jr. Outpatient Center in South Los Angeles, which operates more than 70 primary care and specialty care clinics and is adjacent to the revitalized medical campus that includes the 131-bed Martin Luther King, Jr. Community Hospital (MLKCH), as well as USC-affiliated Los Angeles General Medical Center.

The collaboration among all urologists practicing at county facilities is designed to maximize access for patients and ensure they receive the highest-quality care. “The idea is to offer patients care in the right place, at the right time, with the right provider, consistent with the county’s mission,” Dr. Bergman explains. “Rather than each of the sites being siloed, we work together, combining resources to determine the best care that can be offered to every patient who enters a county facility, regardless of where that might be. We all love working within this model and have seen the improvement in care we can provide to our patients.”

By including primary care providers in the workgroup, the county’s urologists aim to address common urologic conditions at an earlier stage. “We work together on the management and workup of these conditions so that they are true partners,” Dr. Bergman explains. “Historically, physicians have done a good job taking care of the patient in front of them, but in the county system we feel ownership over the health of the entire population — including those who need to see us but weren’t able to or didn’t know they had a problem.” Dr. Bergman notes that the county also takes proactive measures to provide social work and

other support designed to overcome traditional barriers to timely care, such as assisting with transportation and childcare arrangements.

“The ability to collectively share our resources brings a lot of value to each site,” says Jeremy Blumberg, MD, UCLA Urology associate professor and chief of urology at Harbor-UCLA Medical Center. “If there is something we provide that another site doesn’t, and vice versa, we’re able to keep those patients within the system. We work together to make sure patients don’t have to wait too long to be treated. And when we need new equipment, we collaborate to secure those resources through the county.”

Dr. Blumberg notes that early on, Harbor-UCLA acquired robotic surgery equipment, and more recently the facility obtained two of the most up-to-date robots on the market. “At Harbor, urology has led the way in providing minimally invasive care, which every surgical subspecialty now provides,” Dr. Blumberg says. State-of-the-art prostate cancer imaging includes MRI-fusion biopsy as well as prostate-specific membrane antigen positron emission tomography (PSMA PET) scans for people with advanced prostate cancer.

As with the county’s other public hospitals, Harbor-UCLA serves low-income patients, many of whom are uninsured or underinsured, but no patient is turned away based on their ability to pay for the care. For the UCLA Urology residents and medical students who rotate through the Harbor-UCLA site, the experience affords an opportunity to better understand the complexities of seeing individuals with limited resources. “Treating these patients can be more challenging, but also highly

rewarding,” Dr. Blumberg says. “And the bottom line is that our patients are getting care that is as high-quality as you would find anywhere.”

UCLA Urology’s impact in South Los Angeles through its partnership with the Martin Luther King, Jr. Outpatient

Center has been dramatic, notes Stanley Frencher Jr., MD, MPH, UCLA Urology associate professor and medical director for surgical outcomes and quality at MLKCH. When Dr. Frencher joined the UCLA Urology faculty in 2014 as head of the MLK Outpatient Center’s urology division, there were only two urologists serving the 1.2

“Our goal is to provide UCLA-quality care to everyone in the population.”

million people living in the South Los Angeles community, and both were nearing retirement. Access has been bolstered greatly by the presence of Dr. Frencher as well as Dr. Allan Pantuck, UCLA Urology professor and vice chair; Dr. Aydin Pooli, a UCLA Urology assistant professor; and Dr. Dana Scott, a graduate of the UCLA Urology residency program.

Most recently, UCLA Urology announced that starting this summer, Juan José Andino, MD, MBA, a UCLA Male Reproductive Medicine and Surgery fellow, will bring men's health specialty care expertise to the MLK Outpatient Center, as well as taking calls at MLKCH. Dr. Andino will divide his time between South Los Angeles and Santa Monica, where the UCLA Men's Clinic is based. "This community has had no specialists in areas such as infertility, andrology, sexual health, erectile dysfunction, and Peyronie's disease," Dr. Frencher says. "Having Dr. Andino here will make a huge difference." Dr. Andino is a Bruin Scholar — part of a program created by the David Geffen School of Medicine at UCLA to retain trainees committed to uplifting underserved populations. In addition to clinical services, he is providing mentorship for underrepresented minorities in medicine, along with conducting research on disparities in urologic care.

In his own role as UCLA Urology's director of justice, equity, diversity and inclusion, Dr. Frencher is leading efforts to encourage individuals from historically underrepresented communities to go into urology through mentorship and early exposure to the field. Moreover, he says, "We see the work we do at MLK — bringing UCLA expertise and high-quality care to the community of South L.A. — as an opportunity to address inequities directly."

In 2014, UCLA Urology became one of the first three specialties to partner with MLK to provide services on a campus that includes both the privately supported community hospital and the county-affiliated multidisciplinary center — and Dr. Frencher says that partnership has made all the difference. "Urology is uniquely positioned here, in that we support all aspects of clinical services on the campus," he explains. "That means we can take care of any patient, no matter what door they walk through."

Other specialty services have sought to replicate that level of continuity of care, but with less success, Dr. Frencher says. He credits Dr. Litwin for recruiting and empowering him as a faculty member able to bring colleagues to the effort, and structuring his position so that he can practice on both the county and community hospital sides.

"There is still a tremendous gap when it comes to specialty care here and in South L.A. as a whole," Dr. Frencher says. "The UCLA-MLK partnership in the Department of Urology is a model for how those specialty services can be effectively built out. UCLA is perfectly positioned to help fill the gaps, and urology is a model for how that can happen."

DONOR SPOTLIGHT

Doug and Susan Kranwinkle



Until recently, Doug Kranwinkle's connection to UCLA was through his service as a board member for the Rose Bowl Operating Company, a private corporation, owned by the City of Pasadena, responsible for

the governance and stewardship of the iconic 100-year-old stadium where UCLA plays its home football games.

An attorney and former executive vice president for the Spanish-language television network Univision, Kranwinkle is now retired but remains active in civic affairs, lending his skills and expertise to a variety of initiatives to support the city council in Pasadena, where he and his wife Susan reside. That includes his appointment to the Rose Bowl's board. "It's an interesting board with the difficult job of dealing with events at a 90,000-person stadium while taking into consideration that it's in the middle of a residential neighborhood," Kranwinkle says. "UCLA is a good tenant — we like that."

Kranwinkle's association with UCLA grew much more personal when he was diagnosed with bladder cancer a little more than two years ago. At the recommendation of a friend who had been treated by Dr. Mark S. Litwin, UCLA Urology chair, Kranwinkle contacted Dr. Litwin and got an appointment to meet with him, along with two other members of the team that would be overseeing his care — Dr. Alexandra Drakaki, associate professor of hematology/oncology and urology; and Dr. Michael Steinberg, professor and chair of radiation oncology.

Kranwinkle was immediately confident he had come to the right place. "I came away thinking, these are three of the most wonderful people I've ever met," he says. "They're thoughtful, smart, obviously well trained, and they seemed to have an answer to my problem. I knew I was in good hands, so I signed up, and now my cancer is gone."

Grateful for the care, Kranwinkle approached Dr. Litwin about his interest in donating to support the department. "He told me one of the things he most cared about was mentoring younger doctors," Kranwinkle recalls. "And I thought, what a great cause. I could dig deep and give to that. So I went home, spoke with Susan, and she said, 'Heck yes, let's do it.'"

The Kranwinkles have given many charitable gifts, but their donation to the recently established Mark S. Litwin, MD, Endowed Chair in Mentorship — now held by Dr. Jonathan Bergman, UCLA Urology associate professor — was the largest they had ever made. "Any time you're diagnosed with cancer, it gets your attention," Kranwinkle says. "But I was so impressed with the care I received, and the thought that I could help to make sure this expertise is passed on to younger doctors struck me as a great cause to support."

Jamal Nabhani, MD



In partnership with the Los Angeles County Department of Health Services (DHS), UCLA runs the urology programs at two of the three large public hospitals in L.A. County — Harbor-UCLA Medical Center and Olive View-UCLA Medical Center. The third, L.A. County+USC Medical Center, is affiliated with the University of

Southern California's Keck School of Medicine. And that program's director, Dr. Jamal Nabhani, received invaluable preparation for the position through his UCLA Urology fellowship training, under the tutelage of Drs. Mark S. Litwin and Christopher Saigal.

"Being part of the UCLA family for a couple of years was really helpful, in that just about all of the current urology leadership in DHS facilities are UCLA people, and we are a tight-knit group who share an ethos of providing outstanding urological care to the safety-net population in L.A.," says Dr. Nabhani, who in addition to directing the urology service at LAC+USC is an assistant professor of clinical urology at Keck, seeing patients as an endourologist and robotic surgeon at LAC+USC as well as at USC's two other affiliated hospitals. "It's a great working relationship in which we all communicate with each other regularly to ensure a well-run system."

Dr. Nabhani credits Dr. Litwin with fostering that ethos as a pioneer in both urology health services research and improving access to care for low-income and uninsured men with prostate cancer through his leadership in establishing the state-funded IMPACT program. "IMPACT started at a time before we had a good safety net for uninsured men with prostate cancer, and it filled the gap by allowing them to receive care," Dr. Nabhani says. "Now we have a great safety net, where patients are getting outstanding treatment for every urologic condition. And the commitment we all have to taking good care for our entire community was born out of that program that started at UCLA nearly 25 years ago."

After completing his urology residency at LAC+USC, Dr. Nabhani came to UCLA for his fellowship as part of the National Clinician Scholars Program. "While medical training teaches you how to be a doctor, in this program you learn how the system works — where the funding comes from, what the opportunities are to improve it, and how you can measure and improve quality of care," he explains. Dr. Nabhani's focus was on how best to address health disparities. "One of the biggest lessons I took away from the fellowship came from observing Dr. Litwin's leadership," he says. "He's someone who has trained so many successful people over the years, and yet still has such energy and enthusiasm to want to inspire another generation to carry on the work he pioneered. That's something I hope to emulate."

BPH Treatments

Benign prostatic hyperplasia (BPH) refers to a noncancerous enlargement of the prostate that is very common as men age. This enlargement can begin to obstruct the urethra, the channel through which urine flows, leading to urinary symptoms. It can lead to men not being able to fully empty their bladder, which increases the risk for urinary tract infections and bladder stones. BPH can also lead to urinary retention — the inability to void without a catheter.

When BPH symptoms begin to impede quality of life, it's a good idea to seek an evaluation. There are many BPH treatments, typically starting with medication. Alpha blockers relax the urinary channel to make urination easier. 5-alpha reductase inhibitors shrink the size of the prostate over a course of about six months. Anticholinergics and beta-3 agonists relax the bladder, which can be effective for men who have problems with urgency. These medications can come with sexual and other side effects.

The longtime gold standard of BPH surgery is the transurethral resection of the prostate (TURP), which uses imaging to visualize the obstructive portions of the prostate and then employs electrocautery to shave down the tissue to open the urinary channel. TURP is highly effective in improving urine flow, though patients may experience sexual side effects. Other types of surgical procedures include photo-selective vaporization of the prostate (PVP), which uses laser energy to destroy the overgrown tissue; the robotic simple prostatectomy, which removes all of the prostate tissue other than the capsule around it; and holmium laser enucleation of the prostate (HoLEP), which endoscopically removes the majority of the prostate.

The newest BPH surgery offered at UCLA is Aquablation. This procedure uses an image-guided high-pressure water jet to precisely destroy excess prostate tissue. The use of water rather than cautery reduces the risk of erectile dysfunction, and high-definition imaging allows for preservation of the structures involved in ejaculation. Aquablation takes less time to perform than TURP, though it still requires an overnight stay in the hospital.

In addition to surgeries, minimally invasive procedures can also treat BPH, and have the advantage of being done as an outpatient. These procedures have minimal risk of sexual side effects. UroLift employs tiny anchors to reconfigure the prostate tissue so that it no longer blocks the urethra. Rezūm uses steam vapor to trigger cell death in the obstructive tissue areas within several weeks to months after the procedure. iTIND is a small stent-like device that is placed in the prostatic urethra for 5-7 days, causing tissue necrosis in key areas that can contribute to BPH symptoms.

The optimal BPH treatment depends on symptoms and preferences regarding side effects, as well as the size and configuration of the prostate. Multiple UCLA Urology faculty members are available to evaluate BPH and discuss the optimal treatment options.

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



Letter from the Chair



Although we are based in Westwood, Santa Monica, Burbank, and Santa Clarita, UCLA Urology is deeply invested in communities across Los Angeles. As a state-funded public university, part of our mandate is to serve the broader populace, but our department has taken steps that set us apart from most major academic medical centers in other parts of the country.

Our work within the Los Angeles County health system brings immense value to our department.

Our cover story in this issue highlights how this commitment leads to the delivery of the top-of-the-line urologic care UCLA is known for in communities stretching to the north, via our affiliation with Olive View-UCLA Medical Center in the northern San Fernando Valley; to the south, through our affiliation with Harbor-UCLA Medical Center in the South Bay; to the east, via our relationship with Martin Luther King, Jr. Outpatient Center and Martin Luther King, Jr. Community Hospital in South Los Angeles; and across the 405 to the Greater Los Angeles Veterans Affairs Medical Center. What's different is that we consider Olive View, Harbor, MLK, and the VA to be as core to our department as our flagship locations. The faculty who staff these hospitals are full-time UCLA Urology faculty members who interact with the other members of the department in ongoing academic and clinical collaborations. At grand rounds and in our conferences, the challenging cases we see in these settings are presented to the larger UCLA Urology brain trust in an effort to optimize care. Patients at these county hospitals who are eligible for clinical trials offered at any of our facilities can easily access them.

Our work within the Los Angeles County health system brings immense value to our department. Faculty and trainees practicing in these venues learn about the critical importance of the social determinants of health, and how we often need to think beyond the patient's immediate medical condition in order to ensure outstanding care. The diversity of the patients we serve resonates with the diversity of our faculty and trainees, providing important lessons on people's lived experiences. These experiences reinforce in all of our doctors the value and importance of community-based work with historically marginalized populations.

Much of the groundwork for our department's ever-strengthening ties with the L.A. County system was laid by IMPACT, a statewide prostate cancer treatment program serving low-income, uninsured men in California. Established by UCLA Urology in 2001, it is funded by the California Department of Public Health and was recently renewed for its 23rd year — still administered by our department. All of this work is our way of leaning in to the fourth pillar of UCLA Urology's mission. Academic urology departments have long emphasized teaching, research, and clinical care, but just as important is our work engaging with the diverse communities of Los Angeles. This work is vital to our identity.

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

Kudos

Juan José Andino, MD, MBA, UCLA Male Reproductive Medicine and Surgery Fellow, was selected as one of four Bruin Scholars across UCLA Health. As a Bruin Scholar, Dr. Andino will receive support from the Office of Justice, Equity, Diversity and Inclusion at the UCLA David Geffen School of Medicine. The program, which was launched in early 2023, was created to retain trainees who are committed to uplifting underserved populations to become faculty. Dr. Andino's three project focus areas are mentorship development for underrepresented students, similar to the infrastructure that exists for the University of California-wide integrative summer research program in urology; data collection and research to understand barriers to urologic care for patients at Martin Luther King, Jr. Community Hospital, building on the work of former UCLA Urology fellow **Dr. Denise Asafu-Adjei**; and health policy and advocacy efforts at local, state, and national levels to improve access to care, including leveraging telehealth at UCLA and MLK.

UCLA Urology residents **John Cabri, MD**, **Ashley Green-Lott, MD**, and **Kyle Zuniga, MD**, each received a \$25,000 H & H Lee Research Grant in support of their fourth-year resident research year. Dr. Cabri will be mentored by **Dr. A. Lenore Ackerman** for his project, "Financial Toxicity, Stigma, and Social Isolation in Patients with Urinary Incontinence and Overactive Bladder." Dr. Green-Lott will be mentored by **Dr. Isla Garraway** on her project, "Military Exposure Contributors to Prostate Cancer Incidence, Aggressiveness and Molecular Features in the United States Veterans Population." Dr. Zuniga will be mentored by **Dr. Lynn Stothers** and Dr. Ackerman on his project, "Heart Rate and Heart Rate Variability During Voiding: Patterns and Determinants Related to Cardiovascular Disease Risk."

Sanjay K. Das, MD, fellow in UCLA Urology's NIH-funded T32 training program UCLA Patient-Centered Outcomes Research Training in Urologic and Gynecologic Cancers (PCORT UroGynCan), had his manuscript, "The impact of blue light cystoscopy use among non-muscle invasive bladder cancer patients in an equal access setting: Implications on recurrence and time to recurrence," published in the journal *Clinical Genitourinary Cancer*. This research was also presented at the ASCO

Genitourinary Cancers Symposium in San Francisco. Dr. Das had an editorial with his mentor, Dr. Stephen J. Freedland, published in the journal *Cancer Prevention Research*.

Ashley Green-Lott, MD, UCLA Urology resident, will receive a grant from the Association of VA Surgeons Resident Research Award in support of her project, "Military Exposure Contributors to Prostate Cancer Incidence, Aggressiveness and Molecular Features in the United States Veterans Population."

Nicholas Nickols, MD, PhD, associate professor of radiation oncology and urology, was honored as an outstanding researcher during the 2023 National Veterans Administration Research Week by the Secretary of VA Affairs. Dr. Nickols' leadership in both oncology research and educational and clinical oncology has put him at the forefront of VA support for President Biden's Cancer Moonshot and its goal of cutting the death rate from cancer by 50% over the next 25 years. Dr. Nickols and his team developed the first positron emission tomography imaging program within the Veterans Health Administration and demonstrated its value at a molecular level in the planning of radiation therapy for prostate cancer. Dr. Nickols has also helped build a collection of subject-matter experts and mentors from across the oncology field to form Greater Los Angeles VA's Prostate Cancer Clinical Research Team.

Vadim Osadchiy, MD, UCLA Urology resident, and his co-authors **Roshan Bal, Emeran A. Mayer, Rama Kunapuli, Tien Dong, Priten Vora, Danny Petrusek, Cathy Liu, Jean Stains, and Arpana Gupta**, had their manuscript, "Machine learning model to predict obesity using gut metabolite and brain microstructure data," published in *Scientific Reports*.

Kymora B. Scotland, MD, PhD, UCLA Urology assistant professor, and her co-authors **Georgina Dominique, Kevin Kunitsky, Gilles Natchagande, Mohamed Jalloh, Abeselom Lemma Gebreamlak, Isiaka Lawal, Michel Michaël Agoukpe, Fred D. Hodonou, Dodji Magloire Ines Yeve, Josué D. G. Avakoudjo, Kurt McCammon, and Graham Watson**, had their manuscript, "Evaluation of augmented reality technology in global urologic surgery," published in *The American Journal of Surgery*.

Adam Weiner, MD, UCLA Urology instructor and fellow in urologic oncology, had his first-author manuscript, "A novel prostate cancer subtyping classifier based on luminal and basal phenotypes," published in the journal *Cancer*. Dr. Weiner will spend the second year of his fellowship in the lab of **Dr. Robert Reiter** working on prostate cancer and building on the foundation he began as a resident under the guidance of Dr. Ted Schaeffer, professor and chair of urology at Northwestern. Dr. Weiner was also selected as the second annual Ginsburg fellow, receiving the prestigious Dr. Allen and Charlotte Ginsburg Fellowship in Precision Genomic Medicine. This award will support his research.

JJ H. Zhang, MD, urologic oncology fellow, had nine manuscripts accepted for publication as first author in the following journals: *Bladder Cancer Journal*, *Practice Update*, *Doximity Op-Med*, *UroToday*, *Urology*, *European Urologic Oncology Journal*, *AUA Update Editorial Board*, and *Kidney Cancer Journal*. Dr. Zhang had an additional two manuscripts published in *Cancer* and the *Journal of Urology* with her co-authors. She also received a one-year mentorship award from the Society of Urologic Oncology Clinical Trials Consortium to develop her clinical trial proposal entitled "Neoadjuvant PD-1 and TIM-3 Inhibition in Muscle-Invasive Bladder Cancer." Her mentors for this award are UCLA Urology's **Dr. Karim Chamie** and Dr. Seth Lerner of Baylor University.

UCLA Urology was well represented at this year's American Urological Association Annual Meeting in Chicago, with 33 poster and podium presentations from residents, medical students, fellows, and faculty members on a diverse range of topics, including: male infertility, geriatric urology, basic science research, renal cell carcinoma, prostate cancer, telehealth, adolescent varicocele, interstitial cystitis/bladder pain, quality of life and shared decision making, bladder cancer, UTIs, oncocytoma, ureteral reconstruction, vaginal surgery, use of virtual reality in surgery, BPH, erectile dysfunction, and kidney stones. Of note, abstracts by **Dr. Wayne Brisbane** and **Dr. Renea Sturm**, presented at the Engineering and Urology section, were ranked in the top 10 nationally.

INTRODUCING... *The new UCLA Urology residents:*

Mamdouh Aker, MD



Medical School: UCLA David Geffen School of Medicine

Area of Interest: Prostate cancer

Why UCLA Urology: “During medical school I took a huge interest in prostate cancer, and the incredible faculty of the UCLA Urology program always provided me an avenue to explore this interest and other aspects of urology. I had the opportunity to work with many of them, and each provided such meaningful mentorship and knowledge. I’m excited to continue to train under world-renowned faculty where I can receive some of the top training in the world while also feeling at home in a community of welcoming people.”

David Ho, MD



Medical School: UCLA David Geffen School of Medicine

Areas of Interest: Health services research, including determining costs of service delivery within urologic care and utilizing health care economics to assess opportunities for process improvement and to expand access to care

Why UCLA Urology: “Throughout medical school, I was fortunate to meet dynamic and inspiring residents and attendings who selflessly mentored and supported my interests in urology. I am confident that UCLA is an environment that will cultivate my aspirations to be an academic surgeon.”

Eric Song, MD



Medical School: Saint Louis University School of Medicine

Areas of Interest: Analyzing outcomes in the surgical vs. medical management of upper-tract carcinomas, and identifying predictors of mortality in female urethral trauma

Why UCLA Urology: “The robust mentorship of faculty at the forefront of research, as well as the close camaraderie amongst residents, were elements I witnessed on my away rotation with UCLA Urology that encouraged me to apply for the residency program enthusiastically. I’m most looking forward to working with world-class mentors and to caring for the diverse population of Los Angeles.”

Savannah Starr, MD



Medical School: UCLA David Geffen School of Medicine

Areas of Interest: Urologic oncology, health disparities, and global urology

Why UCLA Urology: “As a medical student at UCLA, I was fortunate to have firsthand experience with UCLA Urology and knew it was the institution that could propel me anywhere I could imagine in the field of urology. I experienced the value of working in multiple health systems, the varied research opportunities, and the mentorship that will help me succeed in residency.”

Derian Taylor, MD

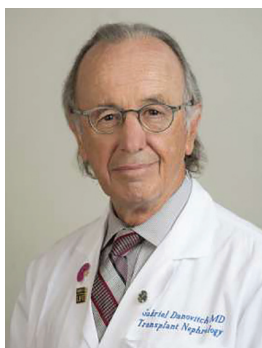


Medical School: Saint Louis University School of Medicine

Areas of Interest: Pediatric urology, reconstructive urology, female pelvic medicine and reconstructive surgery, and research in quality improvement, health care disparities and outcomes, and cost-effective analysis

Why UCLA Urology: “I knew I would be getting high-level training and would join a program dedicated to diversity, equity, and inclusion. But the family feel is what really drew me in. The level of welcome and excitement I received when it was announced I was joining the team is enough to carry me through all the rough days that lie ahead.”

LONGTIME TRANSPLANT LEADER RETIRES



Gabriel M. Danovitch, MD, longtime medical director of the Kidney and Pancreas Transplant Program at UCLA, announced his retirement effective June 30, 2023. Dr. Danovitch joined the UCLA Department of Medicine in 1979, and has led the Kidney and Pancreas Transplant Program since 1983. Under his leadership, the renowned program has become one of the largest and most successful in the

United States. A distinguished professor of medicine who holds the John J. Kuiper Chair in Nephrology and Renal Transplantation, Dr. Danovitch is an internationally recognized authority on transplant immunosuppression, clinical transplant care, transplant ethics, and public policy. He has mentored generations of nephrologists and transplant physicians. A celebration of his career will take place later this year.



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U C L A



UCLA Health hospitals in
Westwood and Santa Monica placed
5 in the nation in the 2022-23
U.S. News and World Report rankings.



The Men's Clinic at UCLA

DID YOU KNOW?

Your age can affect the quality of your sperm. Researchers at the Men's Clinic at UCLA have partnered with UCLA molecular biologists to identify biological "epigenetic clocks" that impact sperm health.

The Men's Clinic at UCLA is a comprehensive, multidisciplinary health and wellness center located in Santa Monica, now with locations in Burbank and Santa Clarita.

For more information or to make an appointment, call (310) 794-7700.



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