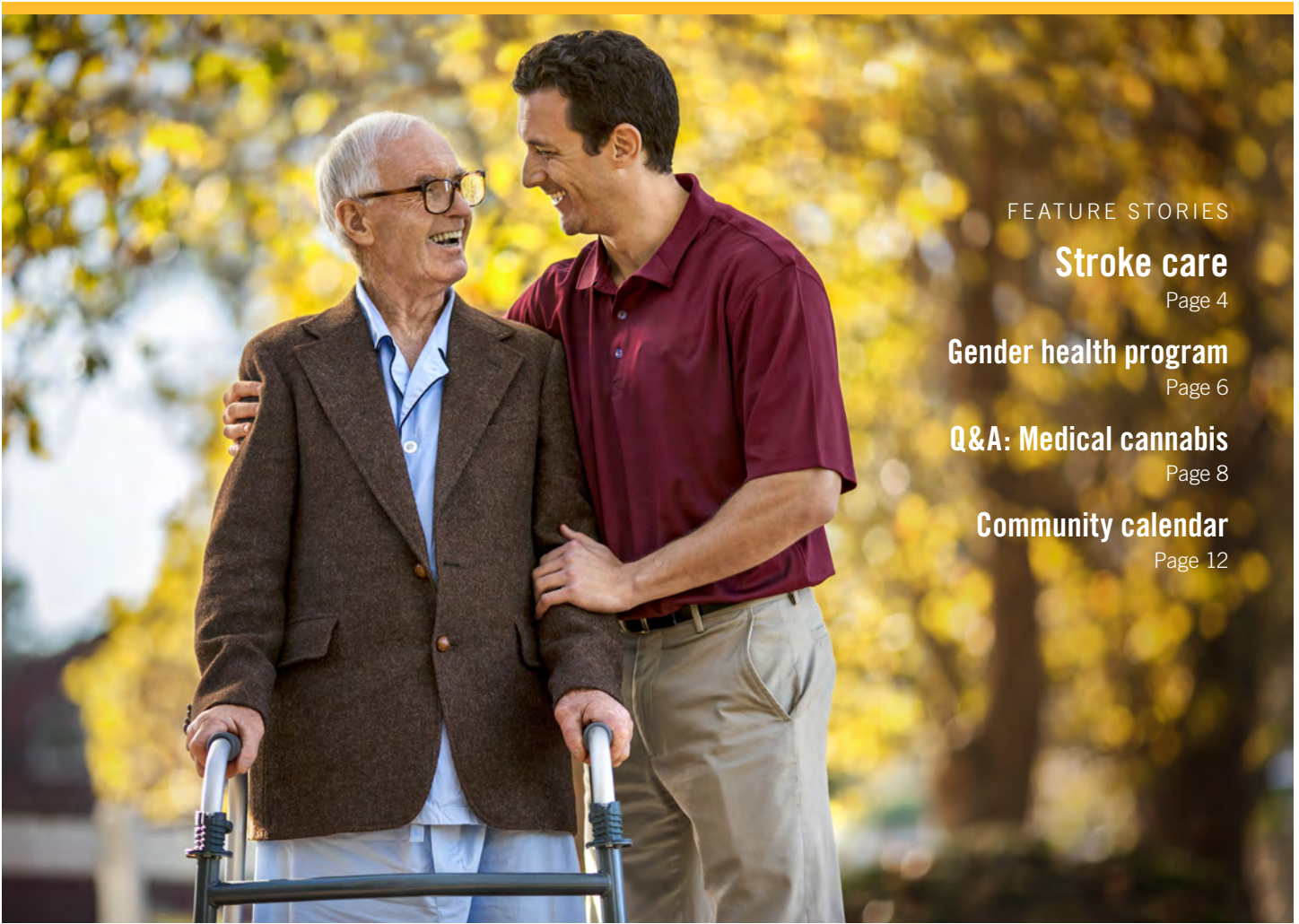


Vital Signs

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Early identification essential to treat postpartum depression

It's easy to assume that the weeks after giving birth are joyous ones for the new mother, but many women experience emotional lows — often referred to as “the baby blues” — in the postpartum period, says UCLA psychiatrist Vivien K. Burt, MD, founder and co-director of the outpatient Women's Life Center at UCLA.

And for 10-to-15 percent of women, what at first seems to be the blues evolves into a major episode of depression. Dr. Burt says that early identification and treatment of women with postpartum depression are essential to the well-being of both

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New UCLA Health office opens in Century City mall

UCLA Health is expanding with a new primary care and urgent care office in Century City at the Westfield Century City mall. This office joins the UCLA Health network of more than 160 primary and specialty clinics in convenient locations throughout Los Angeles, Orange and Ventura counties, including our offices in the Conejo Valley, Orange County, San Fernando Valley, Santa Clarita Valley, San Gabriel Valley, Simi Valley, South Bay, Ventura and Westside.



For more information or to find a location near you, go to: uclahealth.org

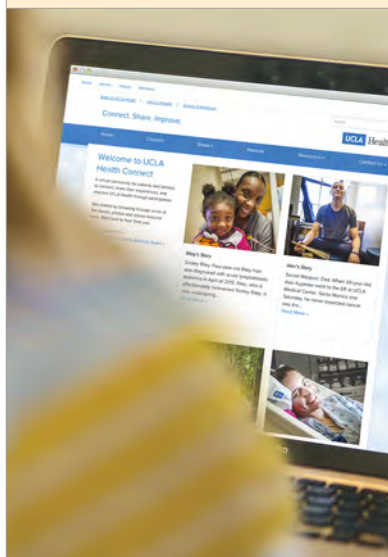


Body donations advance health care

A donation to the UCLA Donated Body Program provides important benefits to advance health care, which include developing new medical procedures, training the next generations of physicians and surgeons and increasing the understanding of disease development. Donated bodies are treated with respect, and each year medical students celebrate the donors and their families with a Ceremony of Thanks. Cremated remains are scattered in the ocean, and there is no cost to families.



To learn more about the UCLA Donated Body Program, go to: uclahealth.org/donatedbody



Connect with UCLA Health

UCLA Health Connect is a virtual community for patients and families to connect, share their experiences and improve UCLA Health through participation.

Get started by browsing some of the patient stories, photos and videos featured on our website. Then share your own story.

We'd love to hear from you.

Connect. Share. Improve.



To learn more about UCLA Health Connect, go to: connect.uclahealth.org

Safe sleeping tips for baby's first year

The numbers are enough to keep an exhausted parent up all night: Each year, approximately 3,500 babies in the United States die due to unsafe sleep situations. To help lower these numbers, the American Academy of Pediatrics (AAP) recommends the following guidelines.

Room with your baby.

Sharing a room — but not the same bed — with your baby for the first six-to-12 months decreases the risk of sudden infant death syndrome (SIDS) by as much as 50 percent. A baby should have a separate sleep area, such as a crib or bassinet, in the same room. Don't fall asleep while holding the baby. "This is how accidental suffocation occurs," says UCLA pediatrician Carlos Lerner, MD. "Couches are especially dangerous because infants can easily get wedged between the cushions."

Follow the "back-to-sleep" rule.

When putting a baby down for a rest, always lay the child on his or her back — and never on the belly or side. Stomach sleepers have a higher risk of SIDS, perhaps from breathing in too much carbon dioxide from exhaled



Carlos Lerner, MD

air that gets trapped between the mattress and face. Avoid side-sleeping wedges, as well. "These devices aren't proven to be safe and may pose a suffocation risk," Dr. Lerner says.

Place your baby on a firm, clutter-free mattress.

It's tempting to decorate a little one's crib, but soft bedding, crib bumpers, blankets, pillows and stuffed toys all pose suffocation risks. "Use a firm mattress that doesn't indent when your baby's head lies on it, and cover the mattress with a tightly fitted sheet," Dr. Lerner says. Because overheating also increases SIDS risk, avoid blankets. "Your baby should wear just one more layer than you would need to wear in order to feel comfortable in the room," he says.

Offer breast milk and pacifiers.

Research shows that breastfed babies are less likely to die from SIDS. "We don't fully understand this protective effect," Dr. Lerner says. The AAP recommends breastfeeding for the first six months and preferably for 12 months or longer, if possible. Once breastfeeding is going well, offer a baby a pacifier. "SIDS risk is lower in babies who use pacifiers, although again, we're not entirely sure why," Dr. Lerner says. To avoid choking and suffocation, never hang a pacifier on a string around a baby's neck or attach it to a child's clothing, a blanket or stuffed toy. It's OK if your baby won't take a pacifier. "Not all babies like them," Dr. Lerner says.



UCLA pediatric and family medicine physicians are available in:

- Beverly Hills
- Brentwood
- Century City
- Encino
- Malibu
- Marina del Rey
- Pacific Palisades
- Santa Monica
- West Los Angeles
- Westwood



For more information or to find a location near you, go to: uclahealth.org

Stroke care improves, but patients need to **act FAST**

Stroke symptoms can include weakness or numbness on one side of the body, vertigo, nausea, difficulty understanding or speaking and impaired coordination. In the face of a possible stroke, remember the acronym FAST: Face drooping, Arm weakness, Speech difficulty and Time to call 911.

Roughly every 40 seconds, someone in the United States has a stroke, and almost every four minutes one of those people will die as a result, making stroke a major cause of death and disability.

Quick response at the first signs of a stroke is key to limiting the harm. “There is still a lack of sufficient awareness in the community about the importance of time with regard to recognition and to seeking emergency treatment for stroke,” says May Nour, MD, PhD, a UCLA interventional neurologist. “For every minute that passes with lack of blood flow as the result of blockage of a large blood vessel in the brain, 2-million neurons die.”

Most strokes are ischemic, meaning that a clot has blocked blood flow and oxygen to the brain. About 20 percent of strokes are hemorrhagic; they are caused by the rupture of a blood vessel. Stroke symptoms can include weakness or numbness on one side of the body, vertigo, nausea, difficulty understanding or speaking, and impaired coordination. In the face of a possible stroke, Dr. Nour urges people to remember the acronym FAST: Face drooping, Arm weakness, Speech difficulty and Time to call 911.

People who seek treatment as soon as stroke symptoms appear have much to gain, says Doojin Kim, MD, a UCLA neurologist and director of the UCLA Stroke Program in

Santa Monica. A medication called tissue plasminogen activator (tPA) has been shown to be effective when administered within four-and-a-half hours from symptom onset, which highlights the importance of seeking treatment immediately.

People who have a clot lodged in a large blood vessel that is not responsive to tPA may also be candidates for a minimally invasive procedure to remove the clot called a thrombectomy.

“Studies have shown that by getting these treatments promptly, the patient has a greater chance of recovering without disability,” Dr. Kim says. UCLA Medical Center, Santa Monica, a primary stroke center, and Ronald Reagan UCLA Medical Center, a comprehensive stroke center, offer the highest levels of stroke care and can receive the most severely impacted stroke patients brought in by paramedics.



To view a video about stroke care, go to: uclahealth.org/strokecare





Mobile Stroke Unit provides fast evaluation and treatment

UCLA Health has launched the first mobile stroke unit on the West Coast, enabling rapid delivery of brain-saving medications to stroke patients who might otherwise face debilitating delays in treatment.

The Mobile Stroke Unit (MSU) ambulance brings the hospital to the patient by including a mobile computed tomography (CT) scanner, laboratory testing equipment, telemedicine connection with a hospital, and appropriate medication and assessment tools.

The unit is staffed with a specialty stroke team, including a neurologist specializing in stroke treatment, to diagnose the type of stroke and initiate appropriate treatment. That can include clot-busting medications for ischemic strokes or bleeding-reversal agents for hemorrhagic strokes. The patient is then transported to the nearest stroke center. The goal, says May Nour, MD, PhD, interventional neurologist and medical director of the UCLA Arline and Henry Gluck Stroke Rescue Program, is to reach patients within the “golden hour” — 60 minutes from symptom onset. “This ultrafast treatment initiation is expected to help improve patients’ clinical outcomes,” Dr. Nour says. “The process also ensures that we triage the patient to the medical center most equipped to treat their level of medical/neurological complexity.”

“It’s an important evolution in the future of stroke care and a great advance to even further reduce deaths and disability related to stroke,” says Jeffrey Saver, MD, director of the UCLA Comprehensive Stroke Center. “There’s a saying: Time lost is brain lost.”

The program will be part of a national study and during the demonstration phase will respond to 911 calls in Santa Monica, Lakewood, Cerritos and Long Beach, with a plan for future expansion of geographic coverage.



Gender Health Program provides service to a diverse population

“For many transgender individuals, interactions with the medical community have not been positive. When they do seek care, they often run into providers who don’t have a lot of knowledge about transgender issues, and in some cases there has been a refusal to care for these patients.”

Many people who identify as transgender or gender diverse have had negative experiences in health care settings as a consequence of either ignorance or outright discrimination, says a UCLA internal medicine/pediatrics physician who specializes in gender health. As a result, notes Amy K. Weimer, MD, these individuals may not seek the care they need, both for transition-related issues and for their general health. This puts them at greater risk for both physical problems and poor mental health outcomes, including untreated depression and suicide.

“For many transgender individuals, interactions with the medical community have not been positive,” Dr. Weimer says. “When they do seek care, they often run into providers who don’t have a lot of knowledge about transgender issues, and in some cases there has been a refusal to care for these patients. We also hear reports of transgender patients being questioned about their gender even when they are seeking care for an unrelated health issue.”

Dr. Weimer is director of the UCLA Gender Health Program in Santa Monica, which was

established in 2016. The program was created to provide a knowledgeable, sensitive and caring environment where adults, adolescents and children who are transgender or gender diverse can receive primary care and chronic disease management, as well as care that is specific to their gender or gender-transition issues.

Transgender is a term generally used to refer to people whose gender identity is different from the sex they were assigned at birth; in addition, Dr. Weimer notes, a growing number of people don’t identify as either

strictly male or strictly female, adopting terms such as gender nonbinary, gender queer or gender fluid. “To some people, transgender implies a strict jumping from one end of the binary to the other, but gender-diverse is a broader term that recognizes that there are people who identify outside of this binary. This leads to a lot of variation in how people want to change their bodies to align with their gender identities,” Dr. Weimer explains.

The UCLA Gender Health Program provides comprehensive primary care services — including vaccinations, health risk assessments, disease screenings, nutrition counseling and chronic disease management — as well as health services specific to the needs of transgender patients. These include hormone management; sexual health services, including reproductive and fertility counseling; counseling on gender-transition issues, whether it's specific treatment needs or issues such as depression or anxiety; and gender-affirming surgeries and procedures that modify the body to align more closely with the patient's gender identity. The center's physicians coordinate care with a network of UCLA Health surgeons, obstetrician/gynecologists, endocrinologists and behavioral health professionals.

Beyond the expertise of the program's health care providers and network of specialists in both general health and gender health issues, the entire team, including office staff, is trained on an ongoing basis to ensure that they are fostering a respectful environment — including calling patients by their preferred names and confirming the pronouns they want to use. “We started this program because we heard feedback from transgender patients and family members that it would be nice for them to have a health care environment where they felt comfortable,” Dr. Weimer says. “We want to earn our patients' trust, as well as educate providers about transgender and gender-diversity issues to remove the mystery so everyone can focus on providing the best individualized care for each patient.”



For more information about the UCLA Gender Health Program, go to: uclahealth.org/gender-health

Continued from cover

Early identification essential to treat postpartum depression

mother and child.

“Postpartum can be a highly vulnerable period when women experience frequent mood swings and are emotionally hypersensitive,” Dr. Burt says. “It's important for people in the woman's life to offer support and reassurance. In most cases, postpartum blues resolves within two weeks or less. But postpartum depression is something different. New mothers with postpartum depression may experience a great deal of anxiety, become agitated, worry excessively and have trouble bonding with the baby. Unlike the blues, postpartum depression lasts many months, and this condition requires and responds to active treatment.”

Given the importance of intervening quickly to assist women experiencing postpartum depression, it is important for obstetrician/gynecologists to closely assess the mental health of their pregnant and postpartum patients, notes UCLA OB/GYN Rashmi Rao, MD, who specializes in maternal-fetal medicine. “Unfortunately, more than half of women experiencing postpartum depression will go undiagnosed, so at UCLA it is our goal to screen our patients at every visit,” Dr. Rao says.

Dr. Rao explains that the dramatic changes occurring over a relatively short period of time make women particularly susceptible to depression both during pregnancy and in the first several weeks after the delivery. “She has immense physiologic changes, and then abrupt changes in hormone levels right after delivery. On top of all of that, she suddenly has an infant who is completely dependent on her and requires attention at least every two hours, which makes for very little sleep,” Dr. Rao says.

Depressive symptoms can show themselves at any time prior to delivery, Dr. Rao notes, so it is important for OB/GYNs and their patients to be alert to any warning signs. In addition, they should be aware of other

factors that increase a woman's depression risk, such as a family or personal history of depression, stressful or traumatic life events, poor social or partner support and low self-esteem. “This is a time when women are in regular contact with us and are motivated because they know they have a baby to care for,” Dr. Rao says. “We have a unique opportunity to identify when something is wrong and make sure it's not ignored.”

Treatment for postpartum depression usually includes medication, along with psychotherapy to help the woman develop coping skills. “Often, postpartum depression is dismissed as the blues by well-meaning family members,” Dr. Rao says. “Many new mothers feel guilty — they believe that they should be delighted at this time in their lives, and they are ashamed that they are so exhausted, anxious and depressed that they are unable to connect with their babies and other children at home. The shame and stigma so often associated with postpartum depression frequently prevents women from getting the help they need. The reality is that postpartum depression is not a rare condition, and when appropriately treated patients can recover and move forward to be healthy, wonderful, fully functioning and productive mothers.”



To view a video about postpartum depression, go to: uclahealth.org/postpartum



Following legalization, many medical questions about **cannabis** remain

As a growing number of states legalize marijuana for medicinal purposes — or, as in the case of California, for recreational use — there is increasing interest in the drug's health effects and potential value in bringing relief for certain ailments. The U.S. Food and Drug Administration (FDA) has approved three cannabinoids (the biologically active components in marijuana), but many questions remain as to the benefits of cannabis for certain health problems, as well as its potential risks. Thomas B. Strouse, MD, medical director of the Stewart and Lynda Resnick Neuropsychiatric Hospital at UCLA and the Maddie Katz Professor of Palliative Care Research and Education, talks about what is known and what remains to be determined.

For what conditions do we know cannabinoids are effective?

The FDA approves pharmaceutically processed cannabinoids for the treatment of chemotherapy-induced nausea and vomiting, and evidence shows that they are effective for that, although there are not studies to suggest that they are superior to other antiemetic drugs. Some evidence, though not strong, indicates that they may help to treat cachexia, also known as wasting — the loss of lean

body mass associated with advanced illness like AIDS or cancer. Studies also indicate that plant-derived cannabinoids can help to reduce pain, particularly nerve pain, and that they may have a role in cases of treatment-resistant pediatric epilepsy. For everything else you hear about — such as insomnia, anxiety, multiple sclerosis and neurodegenerative diseases, to name a few — the evidence comes from anecdotes, small case series and generally is not based on high-quality studies.

Is that because it's been studied and not shown beneficial for these conditions, or is it that it just hasn't been well studied?

I would say the latter — mostly it's just understudied. It has been very difficult to perform high-quality cannabis studies in the U.S. regulatory situation — remember that cannabis is still classified by the U.S. Drug Enforcement Agency (DEA) as a Schedule I substance, which means the DEA considers it to be without valid medical use and highly addictive or dangerous.



Beyond investigating potential benefits for certain conditions, what other issues need further study?

There are many. For one thing, most people who use cannabinoids get them not in the pharmaceutical preparations but in whole-leaf form at a dispensary, where there is very little, if any, mandatory quality or safety control. Whole-leaf cannabis has 400-to-500 compounds, and we know almost nothing about most of them. We also need to learn much more about basic safety issues around chronic use.

Is it correct to say that anecdotal reports about the benefits of cannabis to alleviate certain conditions would not be sufficient, from a doctor's point of view, to demonstrate efficacy?

It is a risk-benefit analysis. If you're a young person whose brain is still developing, it seems pretty clear that the risks of regular and/or heavy marijuana use, whether recreationally or to treat a symptom, probably outweigh the benefits. It's a very different analysis if you're a 70-year-old with Alzheimer's disease or late-stage cancer.

What are some of the potential negative health effects?

Any rational discussion of this topic has to acknowledge the well understood risks to the developing brains of young people who use marijuana regularly before their mid-20s. This includes potential effects on memory and cognition, decreased motivation and the potential for hastening or worsening of a psychotic disorder for individuals who may be prone to developing one. From the late-teens to the mid-20s is the peak period for the onset of schizophrenia and bipolar disorder, also known as manic-depressive illness. For older people, that is less of a concern since if they haven't developed these illnesses by the time they reach older age, they're much less likely to.

In light of the current crisis with opioid addiction, is there any potential benefit to cannabinoids as a substitute for people who are seeking pain relief?

The short answer is probably yes. A recent study found that opioid-overdose deaths

went down by about 25 percent over time in states after marijuana legalization. We can't say for sure, but it could be that people were substituting marijuana for the purpose of getting pain relief or taking lower doses of opioids, or perhaps using recreational marijuana instead of recreational opioids — likely a much safer activity. What we do know is that an opioid overdose can cause people to stop breathing and die; it's often said that nobody ever died of a cannabis overdose, and that's probably a true statement in the sense that cannabis does not depress respiration the way opioids can. Many people will say cannabis is not addictive. But if by addiction we mean the development of the loss of control over how one uses a substance, the development of a range of negative life consequences, continued use of the substance despite negative life consequences and the development of physical tolerance, craving and withdrawal symptoms when you stop using, cannabis does in fact meet that description.

What other myths do you commonly encounter on this topic?

There are myths on both sides of this issue. You still have those who say that only "bad" people use marijuana, regardless of what the purpose is for which they're using it, and on the other extreme, you have people who think it's good for whatever ails you. I come at this from two different perspectives. As the medical director of a psychiatric hospital, I see young people almost daily who are admitted with what seems to be cannabis-associated psychosis, and their ultimate trajectory will have a lot to do with how successful they are at avoiding resuming cannabis once they leave us. As a palliative care physician, I see patients with severe medical illnesses who often receive inadequate control of their symptoms from conventional treatments, and where cannabinoids may confer added relief. Those are very different discussions.



For information about the new UCLA Cannabis Research Initiative, go to: uclahealth.org/cannabis



Thomas B. Strouse, MD



New strategies advocated to Prevent HIV infection

“In the past five-to-seven years, early HIV treatment has reduced the number of infection transmissions. Then you add PrEP and test people at risk early — even if there are no symptoms — and this all adds up to interrupting the cycle of infection.”

Five years ago, the U.S. Food and Drug Administration approved a medication to help people at high risk for HIV, the virus that causes AIDS, avoid infection. The drug, emtricitabine/tenofovir, is now a popular prevention strategy among some groups of people, such as gay men. But more high-risk people could benefit from the medication regimen, called pre-exposure prophylaxis, or HIV PrEP, say UCLA physicians who have studied HIV-prevention strategies.

“HIV PrEP is a really powerful prevention-based strategy. The growth and interest in using this drug has been exponential since about 2014,” says Raphael J. Landovitz, MD, co-director of the Center for Clinical AIDS Research & Education at the David Geffen School of Medicine at UCLA. “What is less clear is if we’re getting access and education about it to the most at-risk populations.”

New HIV infections have declined in the U.S. over the past 15 years. “That probably

reflects early diagnosis and treatment as well as increased use of PrEP,” Dr. Landovitz says. “But the sobering data from the Centers for Disease Control and Prevention shows that it’s young, gay men of color — black and Latino men — who still have alarming increases of new HIV diagnoses.”

Moreover, the overall rates of other sexually transmitted diseases, such as chlamydia and gonorrhea, are rising. “That tells us some people are not using protection,” says Benjamin Ordaz, MD, a UCLA family medicine physician in Santa Monica. “When you get infected with chlamydia or gonorrhea, you have a much higher risk of being infected with HIV.”

Emtricitabine/tenofovir lowers the risk of getting HIV from sex by more than 90 percent and from injection drug use by approximately 49 percent, according to studies. But the pill must be taken daily to be most effective. Dr. Landovitz is the lead

investigator of a study of a longer acting form of PrEP, a medication injected into a patient’s gluteal muscle every eight weeks. “UCLA is part of the global effort to develop the next generation of PrEP drugs,” he says. “We’re excited to be working with the National Institutes of Health and the HIV Prevention Trials Network on this.”

Reaching all high-risk individuals with information on various prevention strategies is critical, Dr. Ordaz adds. For example, PrEP is commonly thought of as a prevention strategy for gay men. However, he notes, “this product is for everyone who is at higher risk than usual: people who use IV drugs or who have multiple sexual partners or who engage in risky sexual behavior.” He encourages anyone who has questions about his or her risk factors to speak with a physician.

With more options and outreach, HIV infection rates can continue to fall. “In the past five-to-seven years, early HIV treatment has reduced the number of infection transmissions,” Dr. Landovitz says. “Then you add PrEP and test people at risk early — even if there are no symptoms — and this all adds up to interrupting the cycle of infection.”

New treatment options for Painful toe arthritis

The most common site for arthritis in the foot is the base of the big toe. It affects nearly half of patients over the age of 70, but can start in early adulthood. “This can become very painful, limiting the patient’s ability to participate in physical activities,” says UCLA orthopaedic surgeon Joan R. Williams, MD, who specializes in foot and ankle injuries.

Patients with so-called great toe arthritis typically present with stiffness and pain, and in some cases with a bump at the site. The condition involves the gradual loss of cartilage around the joint at the base of the big toe, causing swelling and reduced function.

Surgical approaches to treating great toe arthritis typically involve fusing the joint responsible for the pain. While effective in addressing the discomfort, that treatment has a major drawback, Dr. Williams notes. “It’s not ideal for patients who want to retain

motion in their great toe, which is necessary for activities like running and jumping.”

Toe-joint replacement procedures also have had problems. When the replacement fails, there tends to be substantial bone loss. Attempting fusion at that point results in poorer outcomes and higher complications than fusion without the replacement, Dr. Williams explains. Nonsurgical treatments include orthotics and anti-inflammatory drugs.

For patients who have tried other procedures without success, Dr. Williams now is employing a newer approach to address the condition: a first-of-its-kind synthetic-cartilage implant. The FDA approved the implant in 2016, and Dr. Williams says it has been shown to be effective in relieving pain while retaining motion for patients who suffer from the debilitating condition.

The implant is a polymer device that is designed to have similar properties as joint cartilage. When inserted into joints, it resurfaces the metatarsal head. “This has an excellent survival rate at five years, which is the longest outcome study we have at this point,” Dr. Williams says. “It has been very effective in relieving pain while retaining motion for patients.”

Dr. Williams notes that patients with large cartilage lesions often are not candidates, nor are patients with gout. “Fusion still is an option for patients who can’t benefit from the implant, or for those who aren’t that active and don’t need to retain motion in their toe for their quality of life,” she says. “But having this additional option is a major advance, particularly since we want our older patients to be able to stay active for as long as possible.”



Community Health Programs

JANUARY, FEBRUARY, MARCH 2018 COMMUNITY HEALTH PROGRAMS

UCLA Health offers community programs and events to help our neighbors lead healthier lives through wellness education. Go to connect.uclahealth.org/calendar for more information.

FEATURED EVENT

ADOLESCENT AND YOUNG ADULT WELLNESS CARE

Brian Prestwich, MD, UCLA family medicine physician, will explore a family-centered approach to caring for youth ages 12 to 24.

When: Tuesday, Feb 6 / 6 – 7:30 pm

Where: Collins & Katz Family YMCA, 1466 S Westgate Av

RSVP: (800) 516-5323

AGING

Medication Management for Seniors

Melissa Dinolfo, board-certified oncology pharmacist, will provide practical guidelines on how to manage daily medications and understand potential multiple drug interactions.

When: Thursday, Jan 18 / 1 – 2:30 pm

Where: Founders Hall, Calabasas Library, 200 Civic Ctr Way

RSVP: (818) 880-6461

Reflections on Reflux

Rimma Shaposhnikov, MD, UCLA gastroenterologist, will address key concerns, causes, symptoms and treatment about reflux.

When: Wednesday, Jan 31 / 1 – 2:30 pm

Where: Founders Hall, Calabasas Library, 200 Civic Ctr Way

RSVP: (818) 880-6461

Steps to a Healthier Heart

Ramin Assadi, MD, UCLA cardiologist, will discuss heart disease and what specific lifestyle changes you can make to lower your cholesterol, blood pressure and risk for heart disease.

When: Wednesday, Feb 21 / 1 – 2 pm

Where: Joslyn Adult Ctr, 1301 W Olive Av, Burbank

RSVP: (818) 238-5353

AGING (CONTINUED)

A Day in the Life of a Geriatrician

Gabriela Sauder, MD, UCLA geriatrician, will discuss issues and treatments in geriatric medicine, including dementia, memory care, falls, multiple medications and more.

When: Friday, Mar 9 / 1 – 2:30 pm

Where: Founders Hall, Calabasas Library, 200 Civic Ctr Way

RSVP: (818) 880-6461

ASTHMA

Asthma Update

May Lin Wilgus, MD, UCLA pulmonologist, will give an overview of asthma symptoms, diagnosis and treatment and will discuss new and emerging therapies for asthma.

When: Monday, Feb 26 / 6:30 – 8 pm

Where: Camarillo Health Care District, 3639 E Las Posas Rd

RSVP: (800) 516-5323

CANCER

Leukemia Treatment in 2018

Sarah M. Larson, MD, UCLA oncologist, will discuss the different types of leukemia, standard treatment approaches and expanding novel therapeutics.

When: Tuesday, Jan 9 / 7 – 9 pm

Where: Ronald Reagan UCLA Medical Ctr, 757 Westwood Bl, Tamkin Auditorium, Rm B130

Info: (310) 794-6644

Reducing Risk of Gynecologic Cancers

Nisha Bansal, MD, UCLA gynecologic oncologist, will focus on risk factors for ovarian, uterine and cervical cancers and discuss strategies for reducing your risk of developing these cancers.

When: Tuesday, Jan 30 / Noon – 1:30 pm

Where: Santa Monica Family YMCA, 1332 6th St

RSVP: (800) 516-5323

CANCER (CONTINUED)

Cancer and Aging

Patricia Ganz, MD, UCLA medical oncologist, will discuss how cancer treatments may cause symptoms commonly associated with aging and provide tips on how to counteract the potential effects of treatment-associated accelerated aging.

When: Tuesday, Feb 13 / 7 – 9 pm

Where: Ronald Reagan UCLA Medical Ctr, 757 Westwood Bl, Tamkin Auditorium, Rm B130

Info: (310) 794-6644

Stress and Cancer

Steven Cole, PhD, UCLA professor of medicine and psychiatry and biobehavioral sciences, will discuss how stress affects cancer and provide strategies on how to protect the health and well-being of cancer patients.

When: Tuesday, Mar 13 / 7 – 9 pm

Where: Ronald Reagan UCLA Medical Ctr, 757 Westwood Bl, Tamkin Auditorium, Rm B130

Info: (310) 794-6644

CARDIOVASCULAR HEALTH

Cardiovascular Genetics

Pritha Gupta, MD, PhD, UCLA cardiologist, and Judy Fan, UCLA genetic counselor, will discuss how some cardiovascular genetic conditions may impact you and your family.

When: Thursday, Feb 1 / 7 – 8:30 pm

Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Auditorium

RSVP: (800) 516-5323

Keeping Your Heart Healthy

Sandra Ogbonnaya, MD, UCLA internist, will discuss what foods and supplements to eat or avoid and how to live a heart healthy life.

When: Wednesday, Mar 14, 6:30 – 8 pm

Where: Santa Monica Family YMCA, 1332 6th St

RSVP: (800) 516-5323



SUPPORT GROUPS UCLA Health and its community partners offer a number of support groups, available in person and by telephone, designed to support and inform patients, families and caregivers coping with a variety of diagnoses. For more information, visit: uclahealth.org/support-groups

CONSTIPATION

Constipation Update

Learn ways to prevent and treat constipation.

When: Tuesday, Mar 13 / 3:30 – 5 pm

Where: Belmont Village – Westwood, 10475 Wilshire Bl

RSVP: (800) 516-5323

DEMENTIA

Middle-Aged Dementia Groups (Ongoing)

Memory Care is a weekly, three-hour program for middle-aged dementia patients (age 65 and younger), caregivers and their loved ones.

When: Thursdays / 1 – 4 pm

Where: UCLA Longevity Ctr, 10945 Le Conte Av

Info: (310) 794-0680

DIABETES

Manage Gestational Diabetes

This ADA-certified self-care class will help you successfully manage your gestational diabetes. A physician referral is required. Covered by most medical insurance policies.

When: Thursdays / 9 – 10:30 am

Where: 1245 16th St, Ste 307, Santa Monica

Info: (310) 794-1299 or diabeteseducation@mednet.ucla.edu

Living with Type 2 Diabetes

This ADA-certified self-care class will help you gain important skills, knowledge and confidence to successfully manage your diabetes. A physician referral is required. Covered by most medical insurance policies.

Info: (310) 794-1299 or diabeteseducation@mednet.ucla.edu

Porter Ranch

When: Monday, Feb 12 / 8 am – 5 pm

Where: 19950 Rinaldi St, Ste 300

Thousand Oaks

When: Thursdays, Jan 4, Feb 1 & Mar 1 / 8 am – 5 pm

Where: 100 Moody Ct, Ste 200

Toluca Lake

When: Saturdays, Jan 20 & Mar 17 / 8 am – 5 pm

Where: Health Ctr Education Rm, 4323 Riverside Dr

South Bay

When: Wednesdays, Jan 10 & 17, Feb 14 & 21, Mar 14 & 21 / 1 – 5 pm

Where: Redondo Beach Primary, 514 N Prospect Av, Ste 103

Santa Monica

When: Mondays, Jan 8 & Mar 12 / 8 am – 5 pm

Where: 2020 Santa Monica Bl, 2nd Fl, Conference Rm

When: Mondays, Jan 22, Feb 26 & Mar 26 / 8 am – 5 pm

Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Conference Rm 3-G370

When: Monday, Feb 12 / 8 am – 5 pm

Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Conference Rm 1-G350

DIABETES (CONTINUED)

Basic Nutrition for Type 2 Diabetes

This ADA-certified class consists of a two-hour session that will teach you how different foods affect your blood sugar and how to plan healthy meals. A physician referral is required. Covered by most medical insurance policies.

Santa Monica

When: Jan 9, Feb 2 & Mar 6 / 9 – 11 am

Where: 1245 16th St, Ste 307

Thousand Oaks

When: Tuesday, Feb 13 / 3:30 – 5:00 pm

Where: 100 Moody Ct, Ste 200

Info: (310) 794-1299 or diabeteseducation@mednet.ucla.edu

Healthy Living with Diabetes

This half-day event includes a product fair, presentations on diabetes topics and breakout sessions for type 1 and type 2 diabetes.

When: Saturday Mar 3 / 8 am to 12:30 pm

Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Conference Rm

Info & RSVP: (310) 794-1299 or diabeteseducation@mednet.ucla.edu

Cost: Free to participants and free parking

Preventing Type 2 Diabetes

Susan Ahern, MD, UCLA endocrinologist, will discuss evidence-based strategies to reduce the risk of developing type 2 diabetes.

When: Tuesday, Mar 13 / 6:30 – 8 pm

Where: Camarillo Health Care District, 3639 E Las Posas Rd

RSVP: (800) 516-5323

KIDNEY DISEASE

Kidney Smart Classes

This two-hour class provides information on kidney function, kidney disease and managing a diet that promotes healthy kidneys.

When: Thursdays, Jan 11 & 25, Feb 8, Mar 15 & 29; Tuesday, Feb 27 / 2 – 4 pm

Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Conference Ctr

Info & RSVP: (888) 695-4363 or kidneysmart.org

Diabetic Kidney Disease

Ramy Hanna, MD, UCLA nephrologist, will discuss early signs of diabetic kidney disease and prevention, detection and management of diabetes.

When: Wednesday, Feb 21 / 6:30 – 8 pm

Where: Torrance-South Bay Family YMCA, 2900 W Sepulveda Bl

RSVP: (800) 516- 5323

Events in gold are offered near our UCLA community offices.

FEATURED EVENT

PLAY 4 KAY BREAST CANCER AWARENESS GAME

UCLA Women's Basketball hosts their 12th annual Play 4 Kay Breast Cancer Awareness game versus Arizona State. Funds raised at the event will support UCLA breast cancer research and services and the Kay Yow Cancer Fund, established in honor of the former North Carolina State University women's basketball coach, who lost her life to breast cancer after 22 years as a breast cancer survivor. Tickets are \$2 with the promo code PLAY4KAY and on sale now through the UCLA Central Ticket Office.

When: Sunday, Feb 11 / 1 pm

Where: UCLA Pauley Pavilion, 301 Westwood Plaza

Info: <http://bit.ly/2z45fZm>

FEATURED EVENT

UCLA KIDNEY EDUCATION ENHANCEMENT PROGRAM (UKEEP) LIVING KIDNEY DONATION

UCLA nephrologists Anjay Rastogi, MD, PhD, Niloofar Nobakht, MD, and Mohammad Kamgar, MD, conduct free educational programs about kidney health, high blood pressure and kidney-disease management. Interactive sessions include free blood-pressure tests and educational resources.

When: Sunday, Feb 25 / 1 – 4 pm

Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Conference Ctr

RSVP: (800) 516-5323

MENTAL HEALTH

Finding Humor in Mental Health

Ze'ev Korn, LCSW, UCLA psychotherapist, will explore ways to maintain, regain and keep your sense of humor to help your mental health.

When: Thursday, Feb 15 / 2 – 3:30 pm

Where: Atria-Tarzana, 5325 Etiwanda Av

RSVP: (800) 516-5323

MIDWIFE SERVICES

UCLA Midwives

Come and meet UCLA midwives, discuss UCLA services and ask questions.

When: Tuesdays, Jan 2 & 16, Feb 6 & 20, Mar 6 & 20 / 1:15 – 2 pm

Where: Ronald Reagan UCLA Medical Ctr, Rm 7234

RSVP: (310) 794-7274

MULTIPLE SCLEROSIS (MS)

REACH to Achieve Program (Ongoing)

This weekly wellness program includes fitness, memory, emotional well-being, recreation, nutrition and health education for those with MS.

Where: Marilyn Hilton MS Achievement Ctr, 1000 Veteran Av

Info & Application: (310) 267-4071

Beyond Diagnosis

An evening program for those newly diagnosed with MS. Join MS professionals to discuss MS and wellness practices to improve life with MS.

Where: Marilyn Hilton MS Achievement Ctr, 1000 Veteran Av

Info & Application: (760) 448-8407

CogniFitness

Learn strategies to improve concentration, memory and other critical-thinking skills in this four-week program for those with MS who are experiencing mild cognitive problems.

Where: Marilyn Hilton MS Achievement Ctr, 1000 Veteran Av

Info & Application: (760) 448-8407

Living Well

This 12-week program helps those newly diagnosed with MS better understand MS and develop fitness and lifestyle practices to manage symptoms and enhance well-being.

Where: Marilyn Hilton MS Achievement Ctr, 1000 Veteran Av

Info & Application: (760) 448-8407

PAIN

Common Causes of Back, Leg and Joint Pain

George Pan, MD, UCLA pain medicine specialist and anesthesiologist, will discuss common causes of back, leg and joint pain and available treatment options.

When: Wednesday, Feb 7 / 2 – 3:30 pm

Where: Santa Clarita Family YMCA, 26147 McBean Parkway, Valencia

RSVP: (800) 516-5323

Pain Treatment with Acupuncture and Cupping

Learn how acupuncture and cupping effectively treat many types of acute and chronic pain conditions, and receive valuable self-care information.

When: Wednesday, Mar 21 / 6 – 7:30 pm

Where: Torrance-South Bay Family YMCA, 2900 W Sepulveda Bl

RSVP: (800) 516-5323

PLASTIC SURGERY

Facial Rejuvenation

Jason Roostaeian, MD, UCLA plastic surgeon, will discuss the latest treatments for facial rejuvenation, including both surgical (facelift, brow lift) and nonsurgical (botox, fillers, etc.) treatments.

When: Thursday, Feb 8 / 6 – 7:30 pm

Where: 200 UCLA Medical Plaza, Ste 206

RSVP: plasticsurgery@mednet.ucla.edu

Nonsurgical Facial Rejuvenation

Andrew Vardanian, MD, UCLA plastic surgeon, will discuss the latest nonsurgical treatments (botox, fillers, lasers, etc.) that can be used to reduce the visible signs of aging.

Santa Monica

When: Thursday, Feb 22 / 6 – 7:30 pm

Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Auditorium Rm G340

Westwood

When: Thursday, Mar 15 / 6 – 7:30 pm

Where: 200 UCLA Medical Plaza, Ste 206

RSVP: plasticsurgery@mednet.ucla.edu

Rhinoplasty

Jason Roostaeian, MD, UCLA plastic surgeon, will discuss how rhinoplasty procedures can improve nasal airflow and the facial appearance.

When: Thursday, Mar 22 / 7 – 7:30 pm

Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Auditorium Rm G340

RSVP: plasticsurgery@mednet.ucla.edu

RADIATION THERAPY

Precision-Oriented Radiation Therapy

Steve Lee, MD, UCLA radiation oncologist, will discuss radiation therapy for cancer control and quality of life for patients.

When: Friday, Mar 16 / Noon – 1:30 pm

Where: Cancer Support Community – Benjamin Ctr, 1990 S Bundy Dr, Ste 100

RSVP: (800) 516-5323

FEATURED EVENT

ADVANCING BIOTECHNOLOGY FOR ETHICS AND POLICY

Come reimagine the power of 21st century nursing and join us as we reflect on our personal and collective commitments, and strategize about how to create a positive future for nursing and the communities we serve.

When: Mar 7 – 9

Where: UCLA Luskin Conference Ctr, 425 Westwood Plaza

Info: ethicsofcaring.org

THYROID DISEASE

Thyroid Nodules and Thyroid Cancer

Angela Leung, MD, UCLA endocrinologist, and Masha Livhits, MD, UCLA thyroid surgeon, will discuss the development and treatment of thyroid nodules and thyroid cancer.

When: Wednesday, Mar 14 / 2 – 3:30 pm

Where: Collins & Katz Family YMCA, 1466 S Westgate Av

RSVP: (800) 516-5323

TREMORS

How to Shake the Shakes

UCLA movement-disorders specialists will discuss treatment options to cope with tremors, including medicines, surgery (deep-brain stimulation) and noninvasive therapies.

When: Sunday, Feb 25 / 9 am – Noon (9 am registration, 9:30 am – Noon lectures and Q&A)

Where: Elks Lodge, 150 N Kellogg Av, Santa Barbara

RSVP: (310) 571-5741 or ucla.tremor@gmail.com

VOLUNTEER SERVICES

Volunteer Open House

Meet current volunteers and learn about UCLA Health volunteer opportunities. Parking and refreshments will be provided.

When: Friday, Feb 23 / 10 – 11 am

Where: Ronald Reagan UCLA Medical Ctr, 757 Westwood Bl, Conference Rm B120

RSVP: (310) 267-8182 or smolina@mednet.ucla.edu

WELLNESS

Managing Stress and Staying Healthy for Life

Mufaddal Dahodwala, MD, UCLA internal medicine, will discuss ways to manage stress and stay healthy for life.

When: Wednesday, Feb 21 / 1 – 2 pm

Where: Santa Clarita Valley Senior Center, 22900 Market St

RSVP: (661) 259-9444

Exploring the Mind

The UCLA Longevity Center and the Lifespan Learning Institute present the annual Interpersonal Neurobiology Conference on the nature of relationships and the health-promoting power of connection across the lifespan. 19.5 CE credits offered.

When: Mar 16 – 18 / 8:30 am – 6 pm

Where: UCLA Ackerman Grand Ballroom, 308 Westwood Plaza

Register: (310) 474-2505



RESEARCH AND TRIALS UCLA conducts research on a wide range of medical disorders. Go online to learn more information about opportunities to participate in research and clinical trials: uclahealth.org/clinical-trials

UCLA HEALTH 50 PLUS IS A FREE MEMBERSHIP PROGRAM that offers individuals age 50 and older access to educational lectures, exercise opportunities, information on community and health resources, a free community flu-shot clinic and other special events. Call (800) 516-5323 or go to uclahealth.org/50plus to sign up.

UCLA Health 50 Plus is launching an e-newsletter that will include information on health topics, a doctor-written column on specific health issues, a calendar highlighting upcoming community events and more.

It begins with U: What topics would you like to see in the newsletter? To provide suggestions or subscribe, email fiftyplus@mednet.ucla.edu

5+ Memory Training Course (Quarterly)

Learn practical memory-enhancing techniques in a course designed for people with mild memory concerns (not dementia).

When: Two hours per week, once a week. Call for next session dates

Where: Locations vary

Info & Cost: (310) 794-0680 or sgoldfarb@mednet.ucla.edu

5+ Senior Scholars

The UCLA Longevity Center invites adults 50 years of age or older to audit undergraduate courses taught by UCLA's distinguished professors.

When: Spring-session classes begin April 2.

Application deadline: Feb 2

Where: Locations vary by UCLA campus

Info: www.semel.ucla.edu/longevity/srscholars or srscholars@mednet.ucla.edu or (310) 794-0679

Cost: \$150 per course

5+ Brain Boot Camp (Ongoing)

This intensive course teaches healthy lifestyle tips to enhance memory ability for people with age-related memory concerns.

When: Call for next session date

Where: UCLA Longevity Ctr, 10945 Le Conte Av

RSVP: (310) 794-6314 or

mmoreno@mednet.ucla.edu

Cost: \$300

5+ Fall Prevention

Learn about risk factors that cause falls and how to prevent them.

When: Tuesday, Jan 16 / 2 – 3:30 pm

Where: Belmont Village Westwood, 10475 Wilshire Bl

RSVP: (800) 516-5323

5+ Exercise as We Age

Learn about the benefits of physical activity throughout life and what should be included in an exercise program for older adults.

When: Tuesday, Jan 23 / 2 – 3:30 pm

Where: Belmont Village Westwood, 10475 Wilshire Bl

RSVP: (800) 516-5323

5+ Healthy Eating: Made Easy (In Spanish)

Improve your overall well-being with this workshop on balance, nutrition and lifestyle changes to prevent chronic disease development or progression.

When: Monday, Jan 29 / 6 – 7:30 pm

Where: Pico Branch Library, 2201 Pico Bl, Santa Monica

RSVP: (800) 516-5323

5+ Tech Help for U

UCLA undergraduate students offer free one-on-one coaching (30-to-45 minute sessions) to UCLA Health 50-Plus members about electronic devices. Bring your fully charged smartphone, tablet, laptop or e-reader to have your questions answered.

When: Saturdays, Feb 3 & 24 / 9 am to Noon

Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Conference Rm 3

RSVP: (800) 516-5323

5+ Healthy Aging

Stewart Reed, MD, UCLA internist, will discuss strategies to improve quality of life and focus on lifestyle changes that can prevent or improve health conditions.

When: Tuesday, Feb 6 / 1:30 – 3 pm

Where: Belmont Village Burbank, 455 E Angeleno Av

RSVP: (800) 516-5323

5+ Health Maintenance and Screenings for Older Adults

Gabriela Sauder, MD, UCLA geriatrician, will discuss appropriate cancer-screening tests, healthy lifestyle counseling, geriatric health issues, immunizations, preventive medications and vitamins for older adults.

When: Monday, Feb 12 / 2 – 3:30 pm

Where: Sunrise of Westlake Village, 3101 Townsgate Rd

RSVP: (800) 516-5323

5+ Thyroid Disorders

Learn about common thyroid disorders, including symptoms, diagnosis and treatments.

When: Tuesday, Feb 13 / 3:30 – 5 pm

Where: Belmont Village Westwood, 10475 Wilshire Bl

RSVP: (800) 516-5323

5+ Shortness of Breath in Older Adults (in Russian)

Boris Arbit, MD, UCLA cardiologist, will discuss how age and changes in heart physiology can cause shortness of breath in older adults and how to reverse the possible symptoms.

When: Wednesday, Feb 21 / 1 – 2:30 pm

Where: JFS Valley Storefront, 12821 Victory Bl

RSVP: (800) 516-5323

5+ Health Benefits of Yoga and Meditation for Older Adults

Learn about the benefits of yoga and meditation, as well as practical lifestyle changes.

When: Thursday, Feb 22 / Noon – 1:30 pm

Where: Santa Monica Family YMCA, 1332 6th St

RSVP: (800) 516-5323

5+ Age-Related Macular Degeneration

Phillip Le, MD, UCLA ophthalmologist, will discuss age-related macular degeneration, focusing on symptoms, diagnosis and treatments available.

When: Thursday, Mar 8 / 2 – 3:30 pm

Where: The Fair Oaks, 951 S Fair Oaks Av, Pasadena

RSVP: (800) 516-5323

5+ Hearing Loss

A UCLA audiologist will discuss recent changes in hearing-aid regulations, as well as updates on current hearing-aid technologies.

When: Thursday, Mar 22 / Noon – 1:30 pm

Where: Santa Monica Family YMCA, 1332 6th St

RSVP: (800) 516-5323

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Vital Signs

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