MitraClip approved for some heart failure patients

People who have heart failure and an associated valve disease called mitral regurgitation typically have symptoms such as extreme fatigue and shortness of breath that affect their quality of life, and medications may not be enough to improve the condition. There now is a new treatment option that may restore these patients to fuller lives. In March, the Food and Drug Administration (FDA) approved use of a valve repair device, called MitraClip, for patients with moderate or severe mitral regurgitation and symptoms of heart failure.

MitraClip has been on the market since 2013 for patients with abnormalities in the mitral valve (the valve between the left atrium and the left ventricle) who cannot tolerate surgery. That condition is known as primary or degenerative mitral regurgitation.
UCLA Health ranked top in Los Angeles and California

UCLA Health earned the #1 ranking in both Los Angeles and California in this year’s assessment by U.S. News & World Report. UCLA Health also placed #6 on the national honor roll — the 30th consecutive year that UCLA has been named to the honor roll, which is reserved for just 20 hospitals. UCLA Health earned top 10 rankings in 12 specialties: nephrology (3), pulmonology and lung surgery (3), diabetes and endocrinology (4), geriatrics (4), ophthalmology at the UCLA Jules Stein and Doheny Eye Institutes (5), gastroenterology/gastrointestinal surgery (6), neurology and neurosurgery (6), cardiology and heart surgery (8), orthopaedics (8), psychiatry at the Resnick Neuropsychiatric Hospital at UCLA (8), rheumatology (9) and urology (10).

For more information about the 2019 U.S. News & World Report ranking, go to: uclahealth.org/best-hospitals

UCLA-SCOI strategic alliance

UCLA Health and the Southern California Orthopedic Institute have signed a strategic alliance that brings together two organizations with long-standing commitments to excellence in orthopaedic care to benefit patients. Under the alliance, the organizations will collaborate to offer patients in certain communities, including the San Fernando, Conejo and Santa Clarita valleys, along with Bakersfield, expanded options to access high-quality orthopaedic care closer to where they live or work. Both organizations also share a strong commitment to teaching future doctors and engaging in impactful research that will be bolstered by the alliance.

For more information about the UCLA Health-Southern California Orthopedic Institute alliance, go to: uclahealth.org/SCOI-alliance

UCLA performs 450th pediatric heart transplant

On June 26, UCLA’s Pediatric Heart and Heart-Lung Transplant Program performed its 450th heart transplant. The 14-year-old patient suffered from multiple complex cardiovascular issues. Launched in 1984, UCLA's program has grown to become one of busiest and most-referred pediatric heart transplantation centers in the western United States. “I am very proud of the program and the teamwork needed for such success,” says Juan Alejos, MD, director of the UCLA Pediatric Heart Transplant Program. “This achievement goes beyond the transplant program; it extends to the entire health care team involved in every step of the process.”
The ongoing outbreak of measles has raised serious concern among health care experts nationwide. The disease is highly contagious and can lead to severe complications, particularly in young children and individuals with weakened immune systems. Before development of the measles vaccine, the disease infected an estimated 3 million-to-4 million people in the United States, leading to the hospitalization of around 48,000 patients and the deaths of more than 400 people annually. While measles was declared eliminated in the United States in 2000, as of late August, the Centers for Disease Control and Prevention (CDC) reported 1,234 cases nationwide, with 67 of those in California, according to the California Department of Public Health. Daniel Uslan, MD, a UCLA infectious diseases physician in Westwood, and Siyi Yung, MD, a UCLA pediatrician in Santa Monica, discuss the nature of measles and the importance of the measles vaccine.

Why is measles dangerous?
For most people, measles typically involves a fever accompanied by a cough, runny nose, watery eyes and skin rash. But, in some cases, Dr. Uslan notes, measles can cause complications such as pneumonia, hearing loss or encephalitis (brain swelling). Measles may also cause pregnant women to give birth prematurely or to low-birth-weight babies. "Measles, which is spread through the air, is among the most contagious infectious diseases," he says. "On average, if you had a room of 100 unvaccinated people and someone with measles walked into that room, around 90 of them would come down with measles."

What is the benefit of the measles vaccine?
Vaccination is the most effective means of preventing measles. "One dose of vaccine is about 93 percent effective and two doses are about 97 percent effective at preventing measles," Dr. Yung says. The measles vaccine is part of the MMR (measles, mumps and rubella) vaccine. Since the vaccine contains live virus, it should not be given to people with weakened immune systems or to pregnant women.

When should vaccination be administered?
A first dose is recommended for children between 12-to-15 months of age, and a second dose between 4 and 6 years old. "If families are traveling internationally, the CDC recommends giving an early dose to infants over 6 months of age and a second dose to children over 1 year, with doses given at least 28 days apart," Dr. Yung says.

What about adults who don't know if they've been vaccinated?
"They should discuss this with their primary care doctor," Dr. Uslan says. "The physician may recommend having the patient’s blood tested to see if he or she is immune, or the doctor may recommend an MMR booster, especially if the patient will be traveling internationally or works in child care or health care settings."

If measles was declared eliminated in 2000, why are we now seeing so many cases?
"While measles may have been eliminated in the United States, there are other countries where the disease has been ongoing," Dr. Uslan says. "Unvaccinated travelers may acquire measles in a foreign country and bring it back to the United States." Also, the CDC estimates that a vaccination rate of around 95 percent is required to prevent measles from being transmitted. However, that rate is lower in some communities due to hesitancy about having their children vaccinated, Dr. Yung notes. "Families may have heard rumors about the measles vaccine being associated with certain conditions such as autism spectrum disorder, but science has disproved that," Dr. Yung says. "They should know that the measles vaccine is very safe and very effective."
The Food and Drug Administration (FDA) has approved the use of a procedure that is highly beneficial for people with movement disorders such as Parkinson’s disease to treat some patients with severe epilepsy. The procedure, deep brain stimulation (DBS), involves implantation of a “brain pacemaker” to send electrical impulses to targeted areas of the brain to relieve symptoms and reduce seizures.

The FDA approved the procedure in the fall as adjunctive therapy for patients ages 18 and above with severe epilepsy in which multiple medications have failed to provide relief from their debilitating seizures. Last November, the UCLA Seizure Disorder Center and Department of Neurosurgery performed California’s first DBS procedure for epilepsy following the FDA approval.

DBS is analogous to a cardiac pacemaker, but instead of correcting abnormal heart rhythms, it corrects abnormal brain rhythms that spread through the brain to cause seizures. Ausaf Bari, MD, PhD, a UCLA neurosurgeon who specializes in DBS procedures, explains that, in this procedure, the surgeon makes two small openings in the skull, through which a sophisticated computer navigation system guides the placement of two electrodes, one on each side of the brain. A battery-operated device implanted under the skin below the collar bone is then used to send continuous electrical signals to an area of the brain that can control the seizures.

More than 3 million people in the U.S. have active epilepsy. Some two-dozen antiseizure drugs have been introduced in recent decades, but as many as one-third of individuals with the disorder continue to experience seizures regardless of what drug they are prescribed. For these patients, the best hope for a cure has been surgery to remove tissue in the area of the brain where the seizures originate. Dr. Bari notes, however, that an estimated 80- to 90 percent of patients with intractable epilepsy are not candidates for resective surgery — in many cases because their seizures originate from areas of the brain that serve critical functions such as memory or language and can’t be removed.

Without the ability to control their seizures, these individuals have experienced significant compromises to their quality of life, along with the potential for cognitive impairment and sudden death from epilepsy. “It can be extremely debilitating, to the point of interfering with people’s ability to have a normal social life and perform at a high level at school or work,” Dr. Bari says. “With DBS, we can finally offer something that can provide these individuals with a chance for some level of relief from their seizures.”

Having an effective treatment option for patients with intractable epilepsy who are not candidates for traditional surgery is a particularly welcomed development for the pediatric population, adds Aria Fallah, MD, a UCLA pediatric epilepsy surgeon. While the procedure currently is approved for patients 18 years of age and older, “we are carefully studying its use in the pediatric population by considering it for our patients who have continued debilitating seizures and have exhausted all other standard surgical options,” Dr. Fallah says. “Epilepsy can interfere with a child’s brain development, so stopping the seizures at an earlier age is extremely important to preserve their brain function.” Being able to utilize DBS to help these patients “can significantly affect their life trajectory,” he says.

UCLA’s epilepsy surgeons have been performing DBS for more than two decades. “This is a therapy that has been shown to be safe for conditions such as Parkinson’s disease and essential tremor,” Dr. Bari says. “We are using the same technology for epilepsy, but in a different part of the brain.” The DBS neurosurgeons work closely with neurologists at the UCLA Epilepsy Center, who play a critical role in selecting the appropriate surgical candidates, fine-tuning the therapy and managing the patient’s medication after the device is implanted, Dr. Bari notes. Long-term results from the large clinical trial that led to the FDA’s approval of DBS for epilepsy patients show that patients can experience up to a 70 percent reduction in seizure frequency, Dr. Bari adds.

DBS has the advantage of minimal side effects compared to antiseizure medicines, Dr. Fallah says. DBS is considered to be a palliative treatment — it lowers the seizure frequency and burden — and not a cure for epilepsy. Dr. Fallah notes that “this is a reversible operation, so if there is a better option in the future, we can remove the DBS device.”
MitraClip approved for some heart failure patients

The FDA is now permitting MitraClip for patients with a normal mitral valve who develop heart failure along with moderate to severe mitral regurgitation because the left heart chamber is no longer functioning properly — a condition known as functional regurgitation.

“The MitraClip was developed as an alternative to surgery if the valve is leaky because regurgitation is from a degenerative problem,” says Marcella Califon Press, MD, an interventional cardiologist. “The exciting development is there is this whole other group of people with functional regurgitation who now can be helped by use of the MitraClip device.”

Mitral regurgitation occurs when blood leaks backward through the mitral valve into the heart’s left atrium. In patients with functional mitral regurgitation, the valve is not damaged, but the left heart chamber does not function properly, interfering with blood flow through the valve and worsening the symptoms of heart failure.

Cardiologists typically try various medications to treat the condition or may use cardiac synchronization, which involves implanting a pacemaker in the heart to improve heart rhythm. But those options may not be enough. “There are so many patients who have heart failure and are on medication who remain symptomatic,” Dr. Press says. “We can now offer them another therapy that could make a big difference in their quality of life.”

The MitraClip treatment is a minimally invasive procedure performed by an interventional cardiologist. The physician threads a thin catheter through the femoral vein in the groin and guides it to the heart’s left atrium through a small puncture. The MitraClip is guided toward the mitral valve using ultrasound. The device is deployed and attaches to the two leaflets of the valve to clip them together and reduce the backflow of blood. Dr. Press says that Mitraclip implantation is a safe treatment option with low rates of procedural-related complications.

A study of 614 patients with functional mitral regurgitation published late last year in the *New England Journal of Medicine* showed that the risk of being rehospitalized for heart failure symptoms was reduced by about 47 percent in people who received the MitraClip compared to those who continued medication therapy. The risk of death within two years was reduced by about 37 percent. “We’ve seen how much better patients feel after this,” Dr. Press says. “One of the most gratifying things is how the quality of life of our patients improves. They are able to walk longer, and they feel better and come to the hospital less often. For some patients, it is life changing.”
A growing number of patients with a heart valve condition known as aortic stenosis can avoid open-heart surgery and opt for a minimally invasive procedure known as transcatheter aortic valve replacement (TAVR). Two studies published earlier this year showed that TAVR is safe and effective for younger and healthier patients. Previously, the procedure to replace a faulty heart valve was reserved for frail patients who are at higher risk from open-heart surgery.

In August, the Food and Drug Administration approved TAVR for lower risk patients, making it the procedure-of-choice for aortic stenosis patients who are experiencing symptoms, says cardiologist Olcay Aksoy, MD, a leader of the TAVR program at UCLA. “For our patients with aortic stenosis, this will increase access to TAVR, improve outcomes and enable quicker recovery,” Dr. Aksoy says.

Aortic stenosis is a condition in which the opening of the aortic valve narrows and restricts blood flow. As the condition worsens and more blood flow is blocked, people begin to experience fatigue, shortness of breath, chest pains and dizziness. Left untreated, the condition can lead to heart failure. Prior to 2011, the faulty valve was replaced during open-heart surgery. With TAVR, the valve is replaced by inserting a catheter into the heart from a small opening in the chest or groin. “Patients with a severe degree of narrowing have a shorter lifespan,” Dr. Aksoy says. “This is a disease that we take very seriously and treat aggressively as much as possible. TAVR will make patients feel better, improve quality of life and help them live longer.”

TAVR has been available since 2016 for moderate-risk patients. The latest research supports recommending the procedure for a majority of aortic stenosis patients who are experiencing symptoms, Dr. Aksoy says. One study showed the rate of complications in low-risk patients, such as death, stroke or rehospitalization, was 8.5 percent in the TAVR group compared to 15.1 percent in the surgery group. The second study of low-risk patients found...
lower rates of complications, death, rehospitalization and the onset of atrial fibrillation in the TAVR patients compared to surgery patients.

“Surgery is a great option and fixes the problem, but cardiac surgery is associated with a long recovery time,” Dr. Aksoy says. For patients who are eligible for the procedure, TAVR is as effective and “a lot less invasive. Patients often go home the next day. They are back to their normal lives in three-to-four days.”

Another recent study found that medical centers that do a higher volume of TAVR procedures have significantly lower death rates. “We are a high-volume center,” Dr. Aksoy says. “At UCLA, we have a heart team consisting of doctors from several disciplines, and we evaluate our patients carefully to decide how best to treat them after a thorough investigation. While there are some limitations to the TAVR procedure, and surgery may remain a better option for some of our patients, I expect that TAVR will and should be a first-line therapy for most patients.”

To learn more about TAVR at UCLA, go to: heart.ucla.edu/tavr

UCLA cardiologists and heart surgeons have been at the forefront of developing innovations to the procedure that have improved safety and outcomes while reducing the cost.
The Marilyn Hilton MS Achievement Center at UCLA empowers people with multiple sclerosis to take control of their health and well-being through educational and experiential programs. Established in 2001, the center is a collaborative effort of the UCLA Department of Neurology and the Southern California & Nevada Chapter of the National Multiple Sclerosis Society, with support from the Hilton Foundation. It offers wellness interventions that complement the medical treatment participants receive for the disease. It is open to all patients with MS, regardless of where they receive their medical care. Executive director Elise Herlihy, RN, MSN, and medical director Barbara Giesser, MD, talked about the center and its approach to promoting wellness.

**How is the Marilyn Hilton MS Achievement Center different from other programs for people living with MS?**

**Elise Herlihy:** Traditionally, adult day programs are available for people with MS to receive medication and nursing or custodial care with quality-of-life activities based on age and ability. That is not what our achievement center is about. Our center attracts and empowers those with MS who want to make substantive changes to improve their lives. We do not provide neurologic care; we are focused on strategies to enhance health and wellness for individuals all along the MS spectrum, from the newly diagnosed to people who have been living with MS for many years. We offer a variety of innovative MS-focused programs provided by a multidisciplinary team of highly experienced professionals from the Department of Neurology, Department of Clinical Nutrition, UCLA Rehabilitation Services, as well as yoga instructors, mental health professionals, speech and language pathologists and volunteers.

**How do lifestyle and wellness services benefit the overall well-being of people with MS?**

**Dr. Barbara Giesser:** When the center was established 18 years ago, medical professionals were just beginning to appreciate the importance of lifestyle and wellness strategies. That now is the standard of care, but back then it really wasn’t, so the concept of this kind of a center was visionary. Today, we treat exercise as a therapeutic modality; we have data from clinical trials that it reduces many symptoms in MS, improves the ability to function and improves quality of life. We also are starting to get data on the importance of nutrition and a healthy diet. And, we now recognize from studies that smoking is probably the single worst thing for someone with MS.

**Herlihy:** Social support also is very important. We offer art therapy sessions, which are led by a mental health professional, during which participants have a chance to discuss, in a safe and confidential environment, how they are coping with MS and any challenges they are facing. We also know that for people with MS, connecting with others who have MS and learning how others are coping is valuable. The center serves as a therapeutic community.
What programs does the center offer?

Herlihy: Our flagship program, REACH to Achieve, is a comprehensive health and wellness program for people who have been living with MS for some period of time and are experiencing challenges related to their symptoms. They come in once a week on an ongoing basis for wellness activities that include recreation, adaptive fitness, adaptive yoga, cognitive stimulation, emotional wellness, nutrition and health education. In addition, the center offers several multi-week programs, some on the weekends to make it easier for those who work during the week. Living Well is for people who have been diagnosed with MS within the last couple of years. It serves as an introductory course where they learn about MS, the medications to control the disease and other strategies to manage symptoms, as well as exercise, nutrition, stress management, employment and disclosure concerns and ways to optimize their well-being and restore balance in their lives. Our Exercise and MS program is offered for individuals who are mobile and want to work with a fitness specialist and recreation therapist to learn about the various components of exercise and how to use functional exercises to improve their wellness and manage their symptoms. CogniFitness, for people living with MS who are experiencing mild cognitive problems, provides strategies and tools for dealing with common memory and cognitive challenges. Free From Falls is a multi-week fall-prevention program for people with MS who are able to walk but might be at risk for falling. The center also links participants with the National MS Society’s MS Navigator program, which connects them to other resources and support.

How effective are these programs?

Dr. Giesser: When the center was being developed, part of the idea was that it could serve as a place to pilot programs, with those that prove to be successful and beneficial then going nationwide. That is what has happened with many of our programs that now are being offered by the National MS Society chapters, and the Marilyn Hilton MS Achievement Center at UCLA achievement center as a whole has served as a national model.

How has the outlook for individuals newly diagnosed with MS improved over the years?

Dr. Giesser: The prognosis is so much more hopeful now. When I started working in the MS field almost 40 years ago, we didn’t have any disease-modifying therapies and didn’t appreciate the importance of wellness strategies. Today, when I talk to young, newly diagnosed patients, I tell them that while it is true that we cannot cure MS, we can control it. We have medications that will limit future nerve damage and limit attacks, medications and other treatments to ameliorate symptoms and improve function, and we have wellness strategies. With a combination of appropriate neurologic care, medication and healthy living and wellness strategies, we can make significant improvements in their lives.

For more information about the Marilyn Hilton MS Achievement Center at UCLA, go to: uclahealth.org/neurology/ms-achievement-center
Pelvic floor disorders are among the most common health concerns facing women, particularly as they age. But many women — whether out of embarrassment, a lack of awareness that their problem can be addressed or because their medical provider doesn’t bring it up — suffer in silence. However, when brought to the attention of experts, such conditions as urinary incontinence, pelvic pain or pelvic organ prolapse can be treated successfully.

To better address the needs of women with these disorders, subspecialists from UCLA’s departments of urology and obstetrics and gynecology have established the UCLA Center for Women’s Pelvic Health, which opened in June. “Female pelvic medicine patients have traditionally been treated by either urologists or urogynecologists,” explains Victor Nitti, MD, the Shlomo Raz Chair in urology and co-director of the new center. “By combining the expertise of these two departments in a collaborative, multidisciplinary center, we can ensure that each patient receives optimal care for her condition.”

Dr. Nitti notes that approximately one-in-three women will at some point in their lives experience a pelvic floor disorder, and about one-in-nine women will need surgery. The pelvic dysfunction often is a delayed consequence of pregnancy and vaginal delivery, particularly in the case of stress urinary incontinence — the unintentional leaking of urine when physical movement or activity puts pressure on the bladder.

Age is the most important risk factor for all conditions related to pelvic dysfunction. “As the body gets older, the pelvic floor wears down, just as our knees tend to weaken as we age,” says Christopher Tarnay, MD, associate professor of obstetrics and gynecology and urology and co-director of the center. “As a result, many older women struggle with age-related declinations in function.”

Conditions such as urinary incontinence, overactive bladder (characterized by a frequent or sudden urge to urinate) or prolapse (in which the muscles and tissues surrounding the pelvic organs weaken or loosen, causing one or more of the organs to drop or protrude into or out of the vagina) can significantly affect a woman’s quality of life. Many women will reduce or avoid exercise and social situations, as well as activities where they might not have access to a clean and accessible bathroom. Intimacy with partners often is affected. “Women with these conditions may experience reduced self-esteem and are at higher risk for depression,” Dr. Tarnay says. “At our center we can offer treatments to restore that function.”

The center provides state-of-the-art care for women with the most common problems related to pelvic function, as well as women with less common conditions. The spectrum of treatments ranges from conservative, nonsurgical approaches to complex reconstructive surgeries. Many of the conditions can be managed with behavioral modifications, as well as pelvic floor exercises and physical therapy. Some can be treated with medication, or with innovative therapies such as neuromodulation, Botox injections and the use of a patient’s own tissues or stem cells. Surgical options include minimally invasive laparoscopic, robotic and vaginal procedures, as well as major reconstructive surgeries.

“Our goal is to individualize therapies for patients according to their condition, lifestyle and treatment goals,” Dr. Nitti says.

Another important goal of the center is to raise awareness that pelvic floor disorders are both common and treatable, and to provide a compassionate space where women feel comfortable discussing sensitive issues.

For more information about the UCLA Center for Women’s Pelvic Health, go to: uclahealth.org/womens-pelvic-health
UCLA’s Program for the Education and Enrichment of Relational Skills (PEERS) is among the only evidence-based social skills interventions for individuals with autism spectrum disorder (ASD). Developed at UCLA in 2005, the program began with adolescents, but it has expanded to offer services for both young adults and preschoolers, as well as for those who are not on the autism spectrum but are motivated to overcome the social challenges associated with attention-deficit/hyperactivity disorder, anxiety and depression. The program imparts skills related to making and keeping friends, and counsels on handling conflict, rejection and bullying.

A pair of additional programs are debuting this year — PEERS for Careers, which assists young adults on the autism spectrum as they transition from college to work; and PEERS for Dating, the first evidence-based dating intervention for young adults with ASD.

A key feature of the PEERS programs, which run continuously as 16-week sessions in which groups meet weekly for 90 minutes, is the incorporation of parents or caregivers as “social coaches” who attend concurrent sessions, then help to generalize the newly learned skills to real-world settings.

“When you include parents and caregivers, the treatment never ends,” says clinical psychologist and associate clinical professor Elizabeth Laugeson, PsyD, founder and director of the UCLA PEERS Clinic. “Our research indicates that the gains made from this short-term intervention are maintained long after it ends, in part because it continues to be reinforced.”

PEERS, which now has been adopted in more than 70 countries and translated into more than a dozen languages, also emphasizes what Dr. Laugeson calls “ecologically valid” social skills. “We study what socially successful people do and break that down into concrete rules and steps, rather than teaching what adults think young people should do in social situations,” Dr. Laugeson says. As an example, when young people are struggling socially and trying to meet a new group of people, she notes, they often are advised to go up and introduce themselves — a strategy that can come across as awkward. PEERS teaches a more organic approach that starts with listening unobtrusively before taking advantage of a pause in the conversation to say something on the topic, then assessing the group’s interest based on nonverbal cues. The introduction comes later, if at all.

“For children who struggle socially, the evidence shows that our approach of breaking down social interactions into concrete rules and steps, demonstrating what those skills look like, then having them practice the skills — reinforced by the parent or caregiver — is effective,” Dr. Laugeson says.

Her team has published more than two-dozen peer-reviewed studies documenting the program’s efficacy. And, while the heart of PEERS continues to be the groups for young people on the autism spectrum, Dr. Laugeson and her colleagues discovered early on that the skills taught by PEERS could benefit anyone who is socially struggling and motivated to improve. “Most social skills interventions tend to be ineffective, because they aren’t evidence based,” Dr. Laugeson says. “PEERS is based on what works, and as a result, we see big improvements in overall social skills — particularly in areas such as cooperation, engagement and social responsiveness.”

“PEERS aims to improve social skills for young people with autism spectrum disorder.”

“We study what socially successful people do and break that down into concrete rules and steps, rather than teaching what adults think young people should do in social situations.”

For more information about PEERS, go to: semel.ucla.edu/peers
Community Health Programs

OCTOBER, NOVEMBER, DECEMBER 2019 COMMUNITY CALENDAR EVENTS

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.

AGING

Fall Prevention
Learn about common risk factors for falls and strategies to prevent falls and stay safe and steady as you age.

When: Tuesday, Dec 10 / 2 – 3:30 pm
Where: Collins & Katz Family YMCA, 1466 S Westgate Ave, West LA
RSVP: connect.uclahealth.org/calendar or 800-516-5323

BRAIN

OCD Overview
Sarosh Motivala, PhD, UCLA Adult OCD physician, will present various strategies to help with obsessive-compulsive disorders.

When: Wednesday, Nov 20 / 7 – 8:30 pm
Where: UCLA Medical Center, Santa Monica, 1250 16th St, Auditorium
RSVP: connect.uclahealth.org/calendar or 800-516-5323

CANCER (CONTINUED)

Preventing Skin Cancer
Joseph Greco, MD, UCLA dermatologist, will speak about the symptoms and treatments for skin cancer and emphasize the importance of sun protection.

When: Thursday, Nov 7 / 2:30 – 4 pm
Where: Annex at Westchester Family YMCA, 4020 Alverstone Av
RSVP: connect.uclahealth.org/calendar or 800-516-5323

Cancer Pain Management
Sandra Sacks, MD, UCLA anesthesiologist, will discuss the causes of cancer pain, how people can work with their health care team to control it, and methods to improve a patient’s quality of life.

When: Friday, Nov 15, Noon – 1:30 pm
Where: Cancer Support Community – Los Angeles, 1990 S Bundy Dr, Ste 100
RSVP: connect.uclahealth.org/calendar or 800-516-5323

Cancer Genetics Update
Dorcas Chi, MD, UCLA oncologist, will focus on the understanding of hereditary breast ovarian cancer syndrome and other hereditary GI cancer syndromes.

When: Tuesday, Nov 19 / 6:30 – 8 pm
Where: Cancer Support Community Pasadena, 76 E Del Mar Bl, Ste 215
RSVP: connect.uclahealth.org/calendar or 800-516-5323

Cancer: Insiders and Outsiders
Michael Eselun, BCC, interfaith chaplain, reflects on the cancer experience that can sometimes leave us feeling like we do not belong anywhere — an outsider in every sense.

When: Tuesday, Nov 19 / 7 – 9pm
Where: Ronald Reagan Medical Ctr, 757 Westwood Plz, B130
Info: 310-794-6644

DEMENTIA

Alzheimer’s Disease and Dementia
Learn how Alzheimer’s disease and dementia are diagnosed, managed and treated.

When: Tuesday, Oct 15 / 3 – 4:30 pm
Where: Belmont Village, 10475 Wilsyure Bl, West LA
RSVP: connect.uclahealth.org/calendar or 800-516-5323

Is It Dementia or Alzheimer’s Disease?
(in Spanish)
This seminar will describe the difference between dementia and Alzheimer’s disease, while distinguishing the different types of dementias and their specific behavioral and cognitive presentations.

When: Monday, Oct 21 / 6:30 – 8 pm
Where: Pico Branch Library, 2201 Pico Bl
RSVP: connect.uclahealth.org or 800-516-5323

FEATURED EVENT

2ND ACT FALL EVENT
Nina Shapiro, MD, UCLA surgeon and author of the new book HYPE: A Doctor’s Guide to Medical Myths, Exaggerated Claims and Bad Advice discusses risk management, causation versus correlation, and how to distinguish between a research-backed study vs headline hype.

When: Thursday, Oct 24 / 6:30 – 8 pm
Where: James West Alumni Center, 325 Westwood Plz, Collins Conf Rm
RSVP: giving.ucla.edu/2ndActFall2019 or for questions, please contact SecondAct@alumni.ucla.edu
**DEMENTIA** (CONTINUED)

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**Early-Onset Dementia (ongoing)**
Memory Care is a weekly, three-hour program for middle-aged dementia patients (age 65 and younger) to support people with memory challenges and their caregivers.

**Where:** Thursdays / 1 – 4 pm  
**Where:** UCLA Longevity Center, 10945 Le Conte Av

**Santa Monica**  
**When:** Tuesdays, Dec 17 & 24, Dec 30 / 8 am – 11 am  
**Where:** 2020 Santa Monica Bl, Conf Rm 2nd fl

**Porter Ranch**  
**When:** Mondays, Dec 16 / 10 am – 1 pm  
**Where:** 19950 Rinaldi St, Ste 300

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**Living with Type 2 Diabetes**  
This ADA-certified self-care class will help you gain confidence to successfully manage your diabetes. A physician referral is required. Covered by most medical insurance policies.

**Where:** Thursdays / 8 am – 11 am

**When:** Mondays, Oct 14 & 21, Nov 11 & 18, Dec 2 & 9 / 8:30 am – 11:30 am

**Where:** 2020 Santa Monica Bl, Conf Rm 2nd fl

**Porter Ranch**
**When:** Mondays, Oct 21 & Dec 9 / 8 am – 11 am
**Where:** 19950 Rinaldi St, Ste 300

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**Basic Diabetes Nutrition Group Class**  
This two-hour ADA-certified class will teach you how to plan satisfying meals to maintain healthy blood-sugar levels. A physician referral is required. Covered by most medical insurance policies.

**Where:** Thursdays / 8 am – 11 am

**When:** Mondays, Oct 14 & 21, Nov 11 & 18, Dec 2 & 9 / 8:30 am – 11:30 am

**Where:** 2020 Santa Monica Bl, Conf Rm 2nd fl

**Redondo Beach**
**When:** Thursdays, Oct 17, Nov 14 & 21 / 8 am – 11:30 am
**Where:** 514 N Prospect Av, Ste 103

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**Learning to Manage Gestational Diabetes**  
This ADA-certified self-care class will help you successfully manage your diabetes. A physician referral is required. Covered by most medical insurance policies.

**Where:** Thursdays / 8 am – 11 am

**When:** Every Thursday of each month – time may vary by date

**Santa Monica**
**Where:** 2020 Santa Monica Bl, Conf Rm, 2nd fl

**Torrance**
**When:** Every Friday of each month – time may vary by date
**Where:** 3445 East Pacific Coast Hwy, Ste 100

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**DIABETES**

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**Integrative Medicine Class**  
This class will teach patients integrative approaches to manage diabetes, including gentle yoga, mindfulness and nutrition counseling.

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

**Santa Monica**  
**When:** Tuesdays, Oct 1, 22 & 29, Nov 5 & 26, Dec 3 / 10 am – Noon  
**Where:** 2020 Santa Monica Bl, Conf Rm 2nd fl

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**Diet**

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**Struggling with Being Overweight?**  
Lillian Chen, MD, UCLA internist, will give practical and effective tips to improve your diet to achieve a healthy weight.

**When:** Tuesday, Dec 10 / 10:30 am – Noon  
**Where:** Torrance-South Bay Family YMCA, 2900 W Sepulveda Blvd

**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

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**Optimizing Your Gut Microbiome**

Learn about the gut microbiome, gut flora and ways to improve them by optimizing your diet.

**When:** Friday, Nov 8 / Noon – 1:30 pm  
**Where:** Hawthorne Public Library, 12700 Grevelles Av

**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

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**East-West Medicine**

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**East-West Strategies to Energize!**

Isabella Lai, MD, UCLA Center for East-West Medicine, will discuss natural and lifestyle modalities to help you gain more energy and accomplish your goals.

**When:** Monday, Nov 4 / 10:30 am – Noon  
**Where:** Sunrise of Westlake Village, 3101 Townsgate Rd

**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

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**Stressed Out?**

Learn about integrative and east-west modalities to control stress and improve health and well-being.

**When:** Wednesday, Dec 11 / Noon – 1:30 pm  
**Where:** Santa Monica Family YMCA, 1332 6th St

**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

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**Gout**

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**Gout Update**

Masoom Modi, MD, UCLA rheumatologist, will review the role and proper use of medications and other treatments for gout.

**When:** Wednesday, Dec 11 / 2 – 3:30 pm  
**Where:** Brookdale Northridge, 17650 Devonshire St

**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

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**HEALTH INFORMATION**

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**FEATURED EVENT**

**FLU SHOT**

UCLA Health’s community flu-shot clinics help protect residents during flu season by offering vaccinations for adults and children ages 5 years and older. The shots are $40, if not covered by insurance. Standard or high-dose vaccines are available. Free for UCLA Health 50 Plus members. For more info, call 800-516-5323.

**Santa Monica**
**When:** Saturday, Oct 12 / Noon – 4 pm  
**Where:** 2424 Wilshire Blvd

**Info:** 310-828-4530

**Marina del Rey**
**When:** Sunday, Oct 13 / Noon – 4 pm  
**Where:** 4560 Admiralty Wy, Ste 100

**Info:** 310-827-3700

**Malibu**
**When:** Saturdays, Oct 19 & Nov 16 / Noon – 4 pm  
**Where:** 23815 Stuart Ranch Rd, Ste 301

**Info:** 310-317-0034

**Woodland Hills**
**When:** Sunday, Oct 20 / 11 am – 1 pm  
**Where:** The Village at Westfield Topanga, 6344 Topanga Canyon Blvd, Ste 2040

**Info:** 818-610-0292

**Century City**
**When:** Sunday, Oct 27 / Noon – 4 pm  
**Where:** Westfield Century City, 10250 Santa Monica Blvd, Ste 2440

**Info:** 310-286-0122

**Culver City**
**When:** Sunday, Nov 3 / 10 am – 2 pm  
**Where:** Westfield Culver City, 6000 Sepulveda Blvd, Ste 2660

**Info:** 310-313-0020
KIDNEY CARE

UKEEP | Drugs and Medications: What You Should Know
Anjay Rastogi, MD, PhD, Pharmacologist, Professor of Medicine and Clinical Chief of Nephrology, will be going over what you should know about drugs and medications. Everyone will find this information very useful whether they have kidney disease or not.
Where: Sunday, Dec 8 / 1 – 4 pm
Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Conference Ctr
RSVP: 310-516-5323

LGBT HEALTH

How to Support Transgender Youth
Jessica Bernacki, PhD, and Brandon Ito, MD, MPH, UCLA behavioral health providers, will discuss recommendations for supporting gender-diverse youth from childhood into young adulthood.
Where: Tuesday, Nov 12 / 2:30 – 4 pm
Where: UCLA Medical Center, Santa Monica, 1250 16th St, Conf Room 3
RSVP: connect.uclahealth.org/calendar or 800-516-5323

PrEP for HIV Prevention
Ghassan Khoury, MD, UCLA infectious disease physician and HIV specialist, will give an overview of all you need to know about PrEP for HIV prevention.
Where: Wednesday, Nov 30 / 3 – 4:30 pm
Where: Ronald Reagan UCLA Medical Ctr, 1466 S Westgate Av, West LA
RSVP: connect.uclahealth.org/calendar or 800-516-5323

MULTIPLE SCLEROSIS

REACH to Achieve Program (ongoing)
This weekly comprehensive wellness program focuses on fitness, yoga, memory, emotional well-being, recreation, nutrition and health education for individuals with multiple sclerosis.
Where: Marilyn Hilton MS Achievement Center
Info & Application: 310-267-4071

MULTIPLE SCLEROSIS (CONTINUED)

Beyond Diagnosis
A program for those newly diagnosed with MS. Join MS professionals from UCLA and the National MS Society in a conversation about the disease and wellness practices to help you live your best life with MS.
Where: Marilyn Hilton MS Achievement Center
Info & Application: 310-481-1107

PAIN MANAGEMENT

Back, Hip, Arm and Leg Pain
Jui Villablanc, MD, and Reza Jahan, MD, UCLA interventional neuroradiologists, will explore common causes of back, hip, arm and leg pain and available treatment options.
Where: UCLA Medical Ctr, Santa Monica, 1250 16th St, Auditorium
RSVP: connect.uclahealth.org/calendar or 800-516-5323

PEDIATRICS

Speech and Language in Children
Nicole Schussel, MS, CCC-SLP, UCLA speech-language pathologist, will discuss speech and language development in children and strategies to improve communication abilities at home.
Where: Monday, Oct 7 / 6 – 8 pm
Where: Ronald Reagan UCLA Medical Ctr, 757 Westwood Bl, Conf Rm B124 A&B
RSVP: nchussel@mednet.ucla.edu
Seating is limited.

PODIATRY

Bunions and Bunion Surgery
Bob Baravarian, DPM, will discuss bunions and the latest surgical and nonsurgical treatments.
Where: Tuesday, Oct 15 / 5:45 – 6:45 pm
Where: Ronald Reagan UCLA Medical Ctr, 757 Westwood Bl, B Level Rooms B124 A & B
RSVP: smolina@mednet.ucla.edu

Heel and Ankle Pain
Gary Briskin, DPM, will discuss common causes of heel and ankle pain, as well as surgical and nonsurgical therapies.
Where: Tuesday, Nov 19 / 5:45 – 6:45 pm
Where: Ronald Reagan UCLA Medical Ctr, 757 Westwood Bl, B Level Rooms B124 A & B
RSVP: 310-828-0011

RESEARCH INFORMATION

Stem Cell Research: Bench to Bedside, Discovery Pathway to Treatments
Steve Peckman will present an overview of UCLA’s Broad Stem Cell Research Center, including treatments and cures for blinding eye diseases, cancer, genetic disorders, neurological diseases and injury treatment.
Where: Monday, Nov 4 / 3 – 4:30 pm
Where: Santa Monica Family YMCA, 1332 6th St
RSVP: connect.uclahealth.org/calendar or 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.
Where: Tuesday, Dec 17 / 5:45 – 6:45 pm
Where: Ronald Reagan UCLA Medical Ctr, 757 Westwood Bl, B Level Rooms B124 A & B
RSVP: nmolina@mednet.ucla.edu

VOLUNTEER

UCLA Health Volunteer Open House
Join Volunteer Services for a nonstudent open house to present all the rewarding opportunities available to volunteers. Refreshments and parking validation will be provided.
Where: Friday, Nov 8 / 10 – 11:30 am
Where: Ronald Reagan UCLA Medical Ctr, 757 Westwood Bl, B Level Rooms B124 A & B
RSVP: smolina@mednet.ucla.edu

WALK WITH A DOC

Walk With A Doc
Join UCLA Health physicians for an informative, brief discussion on a current health topic, followed by a refreshing stroll at your own pace!
Info: uclahealth.org/walk-with-a-doc
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 special events. Call 800-516-5323 or go to uclahealth.org/50plus to sign up. To learn more about our 50 Plus program and events, subscribe to our Focus: 50 Plus e-newsletter by e-mailing us at fiftyplus@mednet.ucla.edu

FEATURED EVENT

**50 REDISCOVERING U: THE ADVENTURE CONTINUES**

Cheryl Hunter, best-selling author, and Meredith Maran, discuss reinvention and resilience, and offer workshops on Yoga as Medicine, Maximizing Brain Health, Globetrotting on a Budget, and Get Your Dance Groove On.

**When:** Saturday, Oct 19 / 1 – 4 pm
**Where:** UCLA Medical Ctr, Santa Monica, 1250 16th St, Conference Ctr
**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

**50 Vaccinations for Older Adults**

Learn which vaccinations are recommended for older adults to prevent diseases and maintain good health and vitality.

**When:** Tuesday, Oct 22 / 2 – 3:30 pm
**Where:** Belmont Village, 10475 Wilshire Blvd
**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

**50 Osteoporosis Update**

Hannah Karp Wiefel, MD, UCLA family medicine physician, will discuss what osteoporosis is, how to prevent it and how to treat it.

**When:** Thursday, Oct 24 / 10:30 am – Noon
**Where:** ONEGeneration, 18255 Victory Blvd, Reseda
**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

**50 Cultivating Health and Longevity with East-West Medicine**

Raina Tsuda, DAcM, UCLA acupuncturist, will discuss Eastern Medicine’s approach to cultivating health and longevity through nourishing the mind, diet, exercise and sleep.

**When:** Tuesday, Nov 12 / 6:30 – 8 pm
**Where:** Camarillo Health Care District, 3639 E Las Posas Rd
**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

**50 Conservative Treatments for Hand Osteoarthritis**

Adrienne Tesarek, UCLA occupational therapist, will discuss the evidence supporting conservative therapeutic interventions for treating osteoarthritis in the finger joints.

**When:** Monday, Nov 18 / 1:30 – 3 pm
**Where:** WISE & Healthy Aging, 1527 4th St, Santa Monica
**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

**50 The Enlarged Prostate — What Every Man Needs to Know**

Nicholas Donin, MD, UCLA urologist, will discuss the ABCs of prostate health in the aging male, covering diagnosis, evaluation and treatments for prostate problems.

**When:** Thursday, Nov 7 / 1 – 2:30 pm
**Where:** Santa Clarita Family YMCA, 26147 McBean Parkway, Valencia
**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

**50 Planning for End of Life**

Learn about advance health care directives, palliative care and hospice care.

**When:** Tuesday, Nov 12 / 2 – 3:30 pm
**Where:** Collins & Katz Family YMCA, 1466 S Westgate Ave, West LA
**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

**50 High Blood Pressure**

Renata Selak Stankovic, MD, UCLA internist, will discuss what you need to do to keep your blood pressure checked and at healthy levels to avoid health complications like heart disease, stroke and death.

**When:** Friday, Nov 22 / 10 – 11:30 am
**Where:** Brookdale Northridge, 17650 Devonshire St
**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

**50 Treating Back Pain**

Paris N. Sadoughi, MD, UCLA pain management specialist, will discuss the causes of upper, middle and lower back pain, present treatment options and potential side effects of various treatments.

**When:** Wednesday, Dec 4 / 1:30 – 3 pm
**Where:** WISE & Healthy Aging, 1527 4th St, Santa Monica
**RSVP:** connect.uclahealth.org/calendar or 800-516-5323

**50 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:** Winter classes begin January 6.

**Where:** Locations vary by UCLA campus.
**Info & Cost:** semel.ucla.edu/longevity/senior-scholars-program-longevity-center or srsciences@mednet.ucla.edu or 310-794-0679
Veterans Day and UCLA – 100 Years Strong

On November 11, 2019, help honor America’s military on the Centennial of Veterans Day by supporting UCLA Health Operation Mend. Operation Mend heals our nation’s post-9/11 military, veterans and family members by providing innovative, comprehensive, world-class care for the physical and psychological wounds of war. Your tax deductible donation to Operation Mend will change lives immediately.

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Memo: Patient Care Fund – #61743o

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