Multiple treatment options available to patients with epilepsy

Some two-dozen antiseizure drugs are now on the market to treat epilepsy, but it is estimated that one-third of the more than 3 million adults in the United States with the disorder continue to experience seizures despite being on medication. This is called medication-resistant epilepsy. Living with even occasional seizures has a substantial impact on quality of life, both from the seizure risk and the potential for cognitive impairment and sudden

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UCLA Health hospitals #1 in L.A. and state, #3 in U.S.

UCLA Health hospitals ranked #1 in both Los Angeles and California and #3 nationally in U.S. News & World Report’s annual survey. The rankings are intended to help patients make informed decisions about where to receive care for life-threatening conditions, as well as for more common, nonurgent procedures. UCLA Health once again earned a coveted spot on the national honor roll, which names 20 hospitals providing the highest-quality care across a wide range of procedures and conditions.

For more information about UCLA Health’s rankings, go to: uclahealth.org/best-hospitals

New UCLA Health community clinics open

UCLA Health is expanding with new primary and specialty care clinics in Calabasas, Marina del Rey, North Hollywood, San Luis Obispo, Santa Barbara, Santa Clarita, Torrance and West Hills. Stein Eye Center is also now open with ophthalmology services in its newest location in Calabasas. These clinics join the UCLA Health network of more than 200 primary and specialty clinics in convenient locations throughout Los Angeles, Orange, San Luis Obispo, Santa Barbara and Ventura counties.

For more information about clinics in your area, go to: uclahealth.org/locations
COVID-19 shot is safe to administer with other vaccines

Respiratory diseases increase in the fall, so it’s more important than ever for people who are eligible but have not yet gotten their COVID-19 vaccine to do so now. Fall is also the time to get the flu vaccine. Daniela Delgado, MD, a UCLA family medicine physician in Beverly Hills, and Jose Soza, MD, a UCLA family medicine physician in downtown Los Angeles, discuss the safety of getting the COVID-19 vaccine simultaneously with other vaccines and what other vaccines might be due.

What are the recommendations about administering the COVID-19 vaccine with other vaccines?

“The COVID-19 vaccine may be administered along with other vaccines,” Dr. Delgado says. “Out of an abundance of caution, the Centers for Disease Control and Prevention (CDC) originally recommended a 14-day interval between administering the COVID-19 vaccine and any other vaccines. But once they collected enough data, the CDC affirmed the safety of coadministering vaccines.” Dr. Soza adds that “certain vaccines that are associated with localized reactions, such as swelling or redness, can be given in different limbs. These include COVID-19, human papillomavirus (HPV), shingles and tetanus.”

Why don’t multiple vaccines overwhelm the immune system?

“There isn’t a cumulative effect for the immune system, which is built to constantly react and respond to multiple triggers,” Dr. Soza says.

What vaccines might adults need?

Dr. Delgado notes that adults need a tetanus, diphtheria and pertussis (Tdap) or tetanus and diphtheria (Td) booster vaccine every 10 years. Young adults may need a human papillomavirus (HPV) vaccine if they didn’t receive one during their teen years. Upon reaching age 50, adults should get a shingles vaccine, which is administered in two separate doses. Pneumonia shots start at age 65 or earlier for those with certain health conditions. “COVID-19 and shingles vaccines may cause fatigue, low-grade fever and muscle aches in some individuals,” Dr. Delgado says.

What about vaccines for adolescents and children?

At press time, the COVID-19 vaccine is authorized for adolescents ages 12 to 17. “They may also need a meningococcal vaccine and potentially a Tdap or Td booster,” Dr. Delgado says. “They may also get the HPV vaccine in that time frame if they have not completed the series previously.”

What about the flu vaccine?

“The flu is highly transmissible,” Dr. Soza says. “In addition to making people feel miserable, the flu can be fatal. According to the CDC, the flu kills an average of 36,000 people each year.”

He emphasizes the importance of getting the flu vaccine in September or October, before flu season reaches full force, and reiterates the safety of getting a flu shot at the same time as a COVID-19 vaccine.

What else is important to know about vaccines?

Drs. Delgado and Soza note that people with allergies, including allergies to medications or who have reacted to other vaccines in the past, can most often safely receive the COVID-19 vaccine, but they should speak with their physician. “It is very important for everyone to get their COVID-19 vaccine, as well as their regular preventive vaccines,” Dr. Delgado says. “Now is the time to get a physical and get current on any needed vaccines.” Adds Dr. Soza, “Patients who are hesitant about having multiple vaccines at once, or who have any other concerns about vaccination, should always feel comfortable reaching out to their physician. We want them to feel confident about their decisions.”

To find a UCLA Health location near you, go to: maps.uclahealth.org
When California enacted a law requiring that every pregnant woman receive mental health screening, UCLA Health professionals asked themselves what more they could do to ensure patients with concerning mental health symptoms receive the help they need. The result is the Maternal Outpatient Mental Health Services (MOMS) Clinic, which launched shortly after implementation of the state's Maternal Mental Health Screening Law in 2019 and is helping to connect pregnant and postpartum patients with depression, anxiety, post-traumatic stress and other mental health conditions to high-quality care and support. It is a need that has significantly increased during the COVID-19 pandemic.
“Too many women are falling through the cracks. We do a pretty good job of treating gestational diabetes and hypertension in pregnancy, but mental health disorders represent a higher percentage of those conditions that we routinely treat.”
This past January, breast-imaging radiologists at UCLA began noticing an unusual pattern in routine screening mammograms: abnormally enlarged lymph nodes in the armpit, a potential sign of cancer. But, in most cases, these enlarged nodes were not suspicious for cancer. When the radiologists called patients to gather additional information, they discovered that many of the women had recently received a COVID-19 vaccine in the corresponding arm that led to the swelling, what is known as axillary lymphadenopathy.

“The most important thing to know is that this is a normal response, showing that your immune system is doing what it is supposed to be doing to protect you against COVID,” says UCLA radiologist Melissa Joines, MD.

Indeed, other vaccines, including those for shingles, pneumonia, tetanus and even the flu, can cause similar immunogenic reactions seen on breast imaging. Not all women will have axillary lymphadenopathy after a vaccine, and many may not notice the swelling that can be seen on imaging.

Radiologists realized two things were drastically different and contributing to the increase. “Because of the rapid mass vaccination of our population, we were seeing more cases. And the COVID-19 vaccines seem to initiate a stronger immune reaction than some of the other vaccines,” Dr. Joines explains.

Clinicians across the country picked up the same pattern, and the national Society for Breast Imaging’s Patient Care and Delivery Committee issued new guidelines that addressed the temporary lymph node enlargements and “false positives” in mammograms after COVID-19 vaccines. With regard to scheduling, it recommended:

“If possible, and when it does not unduly delay care, consider scheduling screening exams prior to the first dose of a COVID-19 vaccination or four-to-six weeks following the second dose of a COVID-19 vaccination.”

UCLA breast surgeon Deanna J. Attai, MD, emphasizes those recommendations apply for women undergoing routine screening mammograms once a year or every other year if they are not high risk and no problems are suspected. “This does not apply to women undergoing diagnostic imaging when an actual problem exists — when they feel a lump, are experiencing pain, have nipple discharge or other symptoms,” Dr. Attai says. “Those women should schedule their diagnostic mammograms as soon as possible, regardless of the timing of the COVID-19 vaccine.”

Additionally, because routine cancer screenings, including mammograms, plummeted during the pandemic, UCLA physicians recommend that women overdue for routine mammograms schedule them as soon as they are able. “It’s important to stress that getting a screening mammogram ensures that breast cancer can be detected as early as possible,” says UCLA radiologist Hannah Milch, MD. And if you already have one scheduled, UCLA’s radiologists recommend keeping the appointment, as it may be difficult to reschedule.
later as radiology departments see an uptick in screenings.

The doctors stress that the same is also true for the COVID-19 vaccine, and they advise that no one should reschedule their COVID-19 vaccine appointments, and that completing the vaccine regimen as soon as possible is critical.

Over the past months, radiologists have become more skilled in recognizing the possibility of vaccine-induced swelling. Breast-imaging technologists now document a patient’s vaccination dates, as well as in which arm it was given. If the technologist doesn’t ask for the information, the doctors encourage patients to offer the information and ask that it be added to their chart. If the patient received the two-shot Pfizer or Moderna vaccine, it is important to note whether or not it has been one or two doses. This is key information that will be considered by the radiologists when reading the mammograms, Dr. Milch says. Another tip: If there is a history of breast cancer, the radiologists recommend receiving the vaccine in the opposite arm or, if possible, in the gluteal region to avoid any potential issues.

“As the months have gone by, we have become more familiar with this issue,” Dr. Joines adds. “And having a prominent lymph node in and of itself without a clinically or mammographically suspicious breast mass is a rare manifestation of breast cancer.”

Additionally, the doctors stress that there is no correlation between the COVID-19 vaccine and breast cancer. “When this first started to hit the medical and the lay press, some of the headlines implied that there was a link between the vaccines and breast cancer,” Dr. Attai says. “An enlargement of the lymph nodes in imaging certainly alone doesn’t suggest breast cancer.”

Dr. Joines says that many patients report having lymph nodes suspicious for breast cancer, but it turns out to be something else. “When this first started, it hit the medical and the lay press, some of the headlines implied that there was a link between the vaccines and breast cancer,” Dr. Joines says. “And having a prominent lymph node in and of itself without a clinically or mammographically suspicious breast mass is a rare manifestation of breast cancer.”

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For more information about medical and surgical treatment options for epilepsy and seizure disorders at UCLA, go to: uclahealth.org/neurology/seizure-disorder-center
Essential oils have gone mainstream, offering proven therapeutic value

For many people, the fragrant scent of essential oils derived from flowers, trees or spices are a soothing balm to calm nerves and promote relaxation and wellbeing. A growing body of research now attests to the therapeutic value of these plant-derived elixirs. “Essential oils have made their way into mainstream practice,” says Elizabeth Ko, MD, medical director of the UCLA Health Integrative Medicine Collaborative. “And it begs the question of the larger practice of integrative medicine, which blends conventional medicine with these nonpharmacologic, evidence-based practices, like essential oils, massage, yoga and acupuncture.”

What are essential oils?

**Dr. Ko:** “Essential oils are volatile liquid substances extracted from plants, usually flowers, herbs or trees. The liquid is extracted through steam distillation or by machine, and during that process, the fragrance is released, hence the word ‘aromatic.’ These oils are highly concentrated. For example, it takes about 220 pounds of lavender flowers to make one pound of essential oil. Essential oils are quickly absorbed by smell receptors that are linked to the limbic system, which controls heart rate,
Peppermint oil, which has an eye-opening, bright scent, appears to increase memory and alertness.

What are some other popular oils?
Dr. Ko: “Cinnamon, chamomile, tea tree and eucalyptus, which one study found effective in reducing pain and inflammation. When shopping for essential oils, I recommend that people look for formulations that are 100% pure. Beware of ultra-low prices, as pure oils generally cost at least $10 for a half-ounce bottle.

How long does it last?
Dr. Ko: “Effects from essential-oil aromatherapy tend to be short-lived. It’s not on the order of hours; probably more on the order of minutes. Still, a half-ounce bottle will likely last months, even with frequent use, since only a drop or two is needed to produce perceptible fragrance. With the variety, general safety and increasingly documented efficacy of essential oils, I suggest that those who are curious take an experimental approach to see what smells they like and what feelings are elicited. It can be a nice way to explore.”

For more information about the UCLA Health Integrative Medicine Collaborative, go to: uclahealth.org/integrative-medicine
Patients who have been placed on ventilators to aid breathing are unable to speak. Some other inpatients are nonverbal for different reasons, or there might be language barriers to expressing their basic needs. Now, an iPad application available to UCLA Health patients, called VidaTalk, may allow patients with significant communication challenges to express basic needs or even complex ideas to medical personnel and loved ones, says Andrew Erman, director of speech pathology.

Erman says the app is “highly intuitive” and can be used in multiple languages. “Sometimes a patient just wants to ask for something, but they don’t speak English. Our hope is that with this app, nurses can swiftly find out what a patient needs, without the time required to reach an online interpreter for something small,” he says. The app is to express basic needs and does not replace interpreter services, he notes.

Application of the technology has been coordinated by audiology and speech pathology, nursing, information services, respiratory therapy and rehabilitation services. The iPad-based app is available to patients on all units.

VidaTalk offers more than 100 simple phrases to allow patients to express needs, feelings, pain level and location. The app has a keyboard on which patients may type messages, and all patient inputs are spoken aloud by the app. The app also allows patients to communicate by drawing.

“Our hope is that with this app nurses can swiftly find out what a patient needs, without the time required to reach an online interpreter for something small.”

For more information about UCLA Health patient access services and assistance, go to: uclahealth.org/patient-services
Peripheral artery disease is a serious concern that needs to be addressed

“Ask the Doctors” is a nationally syndicated column written by Eve Glazier, MD, president of the UCLA Health Faculty Practice Group, and Elizabeth Ko, MD, medical director of the UCLA Health Integrative Medicine Collaborative.

DEAR DOCTORS: I walk about two miles to my job when the weather is good. Lately, I get cramps in my left calf and right thigh, but they go away if I rest. We’ve got a wellness program at work, and the nurse says it sounds like peripheral artery disease. What is that? Can it be cured?

DEAR READER: Peripheral arterial disease, or PAD, occurs when a narrowing of the arteries impedes the flow of oxygenated blood from the heart to the limbs. It’s a common circulatory problem that affects more than 8 million people over the age of 40 in the United States. Although PAD can arise in the arms, it’s seen most often in the legs. The arterial narrowing is the result of an accumulation of plaque within the artery walls. Plaque is a fatty, sticky substance made up of cholesterol, calcium, cellular waste products and the byproducts of inflammation. It hardens over time, and the build-up narrows the arteries. This is a condition known as atherosclerosis, and it is the most common cause of PAD.

Many people with PAD have no symptoms. About one-fourth experience muscle cramps, typically in the calves, thighs or hips. The cramping occurs during exercise, because the arteries that serve the leg muscles have become too narrow to keep up with the demand for oxygen-rich blood. The pain often recedes after a few moments of rest as the need for oxygen declines. Additional symptoms of peripheral artery disease can include leg pain that persists even at rest, numbness, slow-healing cuts or wounds in the feet or toes and a decrease in body temperature of the affected extremities. Risk factors for the condition include high blood pressure, smoking, type 2 diabetes, high cholesterol and being age 65 or older.

Diagnosis includes a medical history, a physical exam and detailed information about your symptoms. The doctor will assess the pulse in the affected limbs and compare blood pressure in your lower leg to blood pressure in your arm. It’s possible a scan to visualize the arteries will be needed. Treatment focuses on stopping the progression of the disease, and also managing or reducing existing symptoms. The biggest risk factor for atherosclerosis, and thus for PAD, is smoking. For smokers, it’s essential that you stop. As we’ve discussed here before, quitting can be hard. Please enlist the help of a health care provider. They can help smokers to craft a plan, offer guidance on appropriate cessation products and strategies, and also offer ongoing support.

Regular exercise is essential, as well. This may take the form of something known as supervised exercise therapy. These targeted exercises, done under the guidance of a specialist, have been shown to help reduce symptoms and improve quality of life. A diet and medications to address high cholesterol and high blood pressure are often part of treatment for PAD. If these treatments aren’t helpful, surgical repair of blocked vessels, known as angioplasty, may be needed. Since the symptoms that you have described match those of PAD, and the condition increases the risk of heart attack and stroke, we think it’s important for you to be seen by your health care provider.
Community Health Programs

OCTOBER / NOVEMBER / DECEMBER 2021 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.

INTEGRATIVE MEDICINE

Virtual Yoga Therapy
Yoga therapy blends gentle physical postures with breathing techniques and meditation. Practice from your home, office or outdoors; no mat needed.
When: Tuesdays and Thursdays / noon — 12:30 pm
Where: Teleconference session
Register: tinyurl.com/virtual-yoga-therapy

Integrative Medicine Wellbeing Workshops
Join experts from the UCLA Health Integrative Medicine Collaborative as they present each month on intriguing topics, such as diet and immunity, resilience, cannabis and health and East-West approaches to pain management. Visit our website for up-to-date topic information: http://www.uclahealth.org/integrative-medicine
When: Mondays, Oct. 18 and Nov. 8 / noon – 1 pm
Where: UCLA Luskin Conference Center
Register: tinyurl.com/wellbeing-webinars

Integrative Medicine Conference
Join experts from UCLA Health for our inaugural conference on integrative health — An Integrated U: Healing from Bench to Bedside. The conference will feature a full day of lectures on topics including Alzheimer’s disease, East-West medicine, the gut microbiome and the brain, mindfulness, cannabis and personalized nutrition. There will also be many fascinating exhibits to explore.
When: Friday, Nov. 5 / 8 am — 4 pm
Where: UCLA Luskin Conference Center
Register: uclahealth.org/integrative-medicine

KIDNEY DISEASE

Monthly Chat with Dr. Rastogi and UCLA CORE Kidney Health Team
UCLA CORE Kidney Health Program presents our “Monthly Chat with Dr. Rastogi and UCLA CORE Kidney Team of Experts” that will take place the first day of every month. A wide variety of topics related to kidney disease and high blood pressure, including but not limited to, prevention, diagnosis, management, dialysis, transplantation and kidney health life choices will be discussed. In addition to our usual experts, we will also be joined by our Circle of CORE patient advocates and support group. This will be an interactive session with an opportunity to ask questions during the event. You can also send your questions, prior to the event, via e-mail. You can e-mail us at COREKidney@mednet.ucla.edu.
When: Friday, Oct. 1 / 5 – 6 pm
Monday, Nov. 1 / 5 – 6 pm
Wednesday, Dec. 1 / 5 – 6 pm
Where: Teleconference session
RSVP: tinyurl.com/rastogi-chat

Kidney Health Q and A
Dr. Ira Kurtz, MD, FRCP, FASN, Distinguished Professor and Chief of the Division of Nephrology at UCLA, hosts a monthly Q and A session on all aspects of kidney disease. Dr. Kurtz will answer questions on the various causes of acute and chronic kidney disease and medications that injure the kidneys among other kidney related topics, including treatment options.
When: Thursdays, Nov. 18 and Dec. 16 / 7 – 7:45 pm
Where: Teleconference session
RSVP: lblum@mednet.ucla.edu

MULTIPLE SCLEROSIS

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

Free From Falls
An eight-week program designed for people with multiple sclerosis who walk with or without a cane and may be at risk for falling. Learn about risks for falls, how to reduce those risks and exercises to improve balance and mobility.
Where: Marilyn Hilton MS Achievement Center
Info & Application: 310-267-4071

MOVEMENT DISORDERS

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. Lecture followed by Q&A.
When: Saturday, Dec. 11 / 9 am – noon
Where: Teleconference session
RSVP: ucla.tremor@gmail.com

PODIATRY

Bunions and Bunion Surgery
Bob Baravarian, DPM, will discuss bunions and the latest surgical and nonsurgical treatments.
When: Tuesday, Oct. 19 / 5:45 – 6:45 pm
Where: Teleconference session
RSVP: 310-828-0011 to receive the Zoom invitation

Ankle Arthritis and Ankle Replacement
Bob Baravarian, DPM, will discuss the latest advances in treating foot and ankle arthritis, including injection joint lubrication, arthroscopic cleanup, joint-preservation surgery, fusion surgery and ankle replacement surgery.
When: Tuesday, Nov. 16 / 5:45 – 6:45 pm
Where: Teleconference session
RSVP: 310-828-0011 to receive the Zoom invitation

Heel and Ankle Pain
Gary Briskin, DPM, will discuss common causes of heel and ankle pain, as well as surgical and nonsurgical therapies.
When: Tuesday, Dec. 21 / 5:45 – 6:45 pm
Where: Teleconference session
RSVP: 310-828-0011 to receive the Zoom invitation

WELLNESS

Mindfulness Classes and Events (ongoing)
UCLA’s Mindful Awareness Research Center offers free classes, workshops and events teaching mindfulness techniques and practices to reduce stress and promote wellbeing.
When: Monday and Thursday 12:30 pm meditations
Where: Teleconference session
Info: uclahealth.org/marc
UCLA Health

IN CALIFORNIA
AND TOP 3 IN THE NATION

U.S. News & World Report Best Hospitals
COVID-19 Clinical Trials

UCLA conducts research for a wide range of medical disorders and offers patients opportunities to participate in research and clinical trials. Below is a description of just one of our many active clinical trials dedicated to the research and treatment of COVID-19, followed by a list of some of the other clinical studies at UCLA Health that are actively recruiting participants.

COVID-19 SARS Vaccinations: Systemic Allergic Reactions to SARS-CoV-2 Vaccinations

Allergic reactions have been reported to occur after vaccination with both the Pfizer-BioNTech COVID-19 vaccine and the Moderna COVID-19 vaccine. Allergic reactions range from mild to severe and include life-threatening anaphylactic reactions, although no deaths have been reported with either vaccine. This study is designed to estimate the proportions of systemic allergic reactions to the Pfizer and Moderna vaccines in a High-Allergy/Mast Cell Disorder (HA/MCD) population and determine whether those proportions are higher in the HA/MCD group than in a population without severe allergies or mast cell disorders.

For more information, including descriptions of active COVID-19 clinical trials at UCLA Health, please visit: uclahealth.org/covid-19-clinical-trials

More open and actively recruiting clinical studies at UCLA Health:

- Adult Inpatient SARS-CoV-2 Vaccine Effectiveness Surveillance
- Imaging the Blood Brain Barrier with Brain Structure and Function in Post-acute-sequelae SARS-CoV-2 Infection (PASC) Presenting with Neuropsychiatric and Cognitive Symptoms
- COVID-19 SARS Vaccinations: Systemic Allergic Reactions to SARS-CoV-2 Vaccinations
- COVID-19 Vaccine Responses in Patients with Autoimmune Disease
- Anti-thrombotics for Adults Hospitalized with COVID-19 (ACTIV-4)
- Long-term, follow-up, Study of Patients with COVID-19 Associated Pneumonia Who Participated in a Designated Genentech/Roche-Sponsored Study or Genentech/Roche-Supported Investigator-initiated Placebo-controlled or Active-controlled Study
- PK and Safety of Remdesivir for Treatment of COVID-19 in Pregnant and Non-Pregnant Women in the U.S.
- Immune Modulators for Treating COVID-19
- Surveillance of Respiratory Viruses in the Critically Ill: 2020-2021 IVY Network Surveillance Study
- ACTIV-3: Therapeutics for Inpatients with COVID-19
- Innovative Support for Patients with SARS-CoV-2 Infections (COVID-19) Registry (INSPIRE)
- Early Detection of Health Improvement and Decline through Remote Health Monitoring in COVID-19 Positive Patients and in Those with Known Exposure of COVID-19
- The Safety of Molnupiravir (EIDD-2801) and Its Effect on Viral Shedding of SARS-CoV-2 (END-COVID)
- ACTIV-2: A Study for Outpatients with COVID-19
- NCI COVID-19 in Cancer Patients, NCCAPS Study
- Study of Mavrilimumab (KPL-301) in Participants Hospitalized with Severe Corona Virus Disease 2019 (COVID-19) Pneumonia and Hyper-inflammation
- Study to Evaluate the Safety, Tolerability, Pharmacokinetics and Efficacy of Remdesivir (GS-5734™) in Participants from Birth to < 18 Years of Age with Coronavirus Disease 2019 (COVID-19)
- Understanding COVID-19 in Households (COVID-19 Household Transmission Study)
- Wearable Devices for the Early Detection of COVID-19
- COVID-19 Surveillance in Healthcare Workers and Patients: Observational Studies from the Influenza Vaccine Effectiveness in the Critically Ill (IVY) Network
- COVID Evaluation of Risk for Emergency Departments (COVERED) Project
- COVID-19 Recovered Volunteer Research Participant Pool Registry
- An Observational Study Evaluating Viral Shedding and Development of Immune Responses in Mother-infant Pairs Affected by COVID-19
- Role of Children in Transmission of COVID-19 to Immunocompromised Patients
- Assessment of Potential Risk Factors for 2019 Novel Coronavirus (SARS-CoV-2) Infection among High-risk Populations in Health Care and Emergency Service Settings
- Observational Cohort of Hospitalized Patients with COVID-19 at UCLA
UCLA patients need blood donations

The need for blood and plasma during the COVID-19 pandemic remains acute. Blood donation is a way for healthy people to make a significant contribution during this difficult time. The UCLA Blood & Platelet Center follows the precautions recommended by the American Association of Blood Banks to keep donors and staff safe. For more information and to schedule an appointment to donate, go to: uclahealth.org/gotblood
GET BACK TO
YOUR DOCTOR
YOUR HEALTH
YOUR JOY
#WeLoveAHealthyLA

U.S. News & World Report’s Best Hospital Survey ranks UCLA #1 in Los Angeles and California and #3 in the nation.

Subscribe to Vital Signs & Health Tips for Parents electronically: uclahealth.org/enews uclahealth.org/getsocial

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