Letter From the CEO

UCSF Medical Center once again ranks among the nation’s top 10 hospitals, according to the 2015-2016 Best Hospitals survey conducted by U.S. News & World Report. Also, UCSF Benioff Children’s Hospitals (San Francisco and Oakland) were ranked among the country’s best pediatric hospitals in nine specialties.

At UCSF Medical Center, we treat some of the most complex conditions—see the stories featuring Laurie Littleton and Alex Kazan in this issue for two such examples. I am very proud that the extraordinary care delivered here has led the medical center to be recognized as one of America’s best.

Sincerely,

Mark R. Laret
Chief Executive Officer
UCSF Medical Center and UCSF Benioff Children’s Hospitals

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Main Websites:
www.ucsfhealth.org
www.ucsfbenioffchildrens.org

Online Versions:
www.ucsfhealth.org/healingabounds
www.ucsfbenioffchildrens.org/leapsandbounds

Primary Care:
www.ucsfhealth.org/primarycare

Outreach Clinics:
www.ucsfhealth.org/outreachclinics

Find a Doctor:
(888) 689-8273
www.ucsfhealth.org/findadoctor

Health Coverage:
www.ucsfhealth.org/healthinsurance

Our Hospitals:
UCSF Medical Center at Parnassus
505 Parnassus Ave.
San Francisco, CA 94143

UCSF Bakar Cancer Hospital
1855 Fourth St.
San Francisco, CA 94158

UCSF Benioff Children’s Hospital San Francisco
1975 Fourth St.
San Francisco, CA 94158

UCSF Betty Irene Moore Women’s Hospital
1855 Fourth St.
San Francisco, CA 94158

UCSF Medical Center at Mount Zion & UCSF Helen Diller Family Comprehensive Cancer Center
1600 Divisadero St.
San Francisco, CA 94115

UCSF Benioff Children’s Hospital Oakland
747 52nd St.
Oakland, CA 94609

Maps and Directions:
www.ucsfhealth.org/pathway

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2015 Open Enrollment:
If you are a member of a health maintenance organization (HMO) or a point of service (POS) plan and receive your health care in San Francisco, choose a primary care doctor who’s a member of Hill Physicians Medical Group in San Francisco. This ensures access to all specialists at UCSF Medical Center and UCSF Benioff Children’s Hospital San Francisco.

For more information, call us at (888) 689-8273 or visit www.ucsfhealth.org/accessucsf.
Our patient navigators will guide you step by step through your medical journey with us.

From joint replacement surgery to childbirth and cancer treatment, health care can be life changing. But it’s also unfamiliar territory for many patients, who can feel overwhelmed by the experience. At UCSF Medical Center, patient navigators—usually registered nurses—help guide patients throughout their health care journey.

As soon as a patient decides on hip or knee replacement surgery at UCSF Medical Center, he or she meets Rachael Wynne, a registered nurse and patient navigator in the UCSF Arthritis and Joint Replacement Center. Wynne becomes the patient’s primary point of contact throughout the process. “I answer all their questions, make sure they know exactly what to expect at every stage—where to go, how to prepare, what tests they’ll need, what recovery will be like, how to manage pain,” she says. Wynne’s role continues after discharge. “I’ll call them at home to see how they’re doing and make sure they have the services they need. It’s very reassuring for the patient.”

Moms-to-be who plan to deliver their babies at UCSF Betty Irene Moore Women’s Hospital rely on Michelle Ryan, a patient navigator for OB/GYN. Ryan leads tours of the new birth center and fields questions about the numerous options available for prenatal care at UCSF. “Women are excited, they’re nervous, and they have a lot of questions about our facility, about their upcoming birth experience,” Ryan says. “It’s such a special time in their lives.” She also visits new mothers in the postpartum unit and makes sure they’re connected with the services they need—whether it’s a breast pump rental or parenting classes at the UCSF Women’s Health Resource Center.

Geronima Cortese-Jimenez, a registered nurse and patient navigator at the UCSF Urologic Surgery and Oncology Clinic, guides patients facing a diagnosis of prostate or other urologic cancer. “A cancer diagnosis is scary. Having someone to talk you through the process, help you understand your diagnosis, what tests you need, and which doctors you need to see is so important,” she says. Patients come from all over the world to the renowned clinic. “What touches me the most is when I finally get to meet patients in person, after just talking by phone or email. I try to go over to the clinic when I know they’re coming. Often, we both tear up—it’s very emotional.”
Poised for Victory
While most of the world celebrated New Year’s 2014, surgeons in Redding, Calif., were removing a golf-ball-sized tumor from Laurie Littleton’s brain. It was a fast-growing glioblastoma, an aggressive form of brain cancer. Discovered on an MRI scan when Littleton was admitted to the hospital, the tumor had already grown by the time she had surgery two days later.

Next came six weeks of daily radiation and chemotherapy. But the 45-year-old Redding native knew her cancer treatment would be challenging. “These cancers almost always recur. By the time some people finish therapy, the tumor is back,” she says.

Then Littleton learned that UCSF’s Brain Tumor Research Center was conducting a clinical trial to test an experimental vaccine for her type of glioblastoma. Neuro-oncologist Dr. Nicholas Butowski explains that a cancer gene called EGFRvIII fuels some glioblastoma tumors, making them spread more aggressively through the brain. The vaccine stimulates the immune system to produce an attack against the cancer gene, potentially helping patients fight their own cancer.

“Clinical trials are the best way to learn what works in treating diseases like brain cancer,” Butowski says. “They contribute to medical research, help future generations and often benefit the participants.”

Littleton participated in the 12-month trial, which included standard oral chemotherapy along with the experimental vaccine, given as a monthly injection. She successfully completed the yearlong trial in March 2015 and continues to take the vaccine, with frequent follow-ups at the Brain Tumor Research Center. Her brain scans show no signs of cancer and she’s doing remarkably well—working, running, studying yoga. The results of the trial will be available at the end of 2015, including data on patients who received the experimental vaccine, or a placebo only.

Littleton is unfailingly upbeat, with high praise for the Brain Tumor Research Center, one of the nation’s largest and most comprehensive programs for brain cancer research and treatment. The program’s goal is not only to extend life with innovative therapies, but to help patients with brain and spinal cord tumors live well.

“UCSF is fantastic,” Littleton says. “They don’t treat you as a tumor, but as a real person. They want you to be happy as well as healthy.”

For more on brain tumor treatment at UCSF, visit www.ucsfhealth.org/neuro-onc.
Bittersweet
Education is the key to regaining a healthy relationship with sugar. That’s where SugarScience comes in.

For breakfast, a glazed donut with sprinkles. For lunch, a can of soda and container of yogurt with syrupy fruit. And before bed, a bowl of ice cream.

If you’re like many Americans, you consume nearly three times the daily amount of added sugar allowed for a healthy diet. And there’s growing proof all this sugar isn’t just making us overweight—it’s also making us sick.

That’s one of many conclusions arrived at by SugarScience, a national educational initiative launched by UCSF researchers. Based on a review of more than 8,000 scientific papers, this groundbreaking effort is showcasing key findings about how added sugar can undermine people’s health.

Unlike the sugar that occurs naturally in whole foods like fresh fruit, added sugar is any caloric sweetener that’s added in food preparation—at the table, in the kitchen or in the processing plant. It can be difficult to know how much you’re consuming, since added sugar is hidden in 74 percent of all processed foods, ranging from bread to salad dressing. Furthermore, it masquerades under at least 60 aliases like sucrose and high-fructose corn syrup. “Sugar used to be a condiment, now it’s a diet staple,” says Dr. Robert Lustig, a pediatric endocrinologist at UCSF Benioff Children’s Hospital San Francisco.

So how much is too much? According to the American Heart Association, any added sugar in excess of six teaspoons (25 grams) per day for women, nine teaspoons (38 grams) for men, and three to six teaspoons (12 to 25 grams) for children can lead to trouble.

Due to America’s sweet tooth, physicians are now seeing new health problems like nonalcoholic fatty liver disease (NFLD). It’s caused by the liver processing sugar—specifically fructose—in a way similar to alcohol. “NFLD is the fastest rising cause of liver transplantation in America,” says Dr. Laura Schmidt, a UCSF School of Medicine professor. “You don’t see changes like that in such a short period without a major change in environment.”

A big part of that change is sugar consumption. “It’s a public health crisis,” says Dr. Kirsten Bibbins-Domingo, director of the UCSF Center for Vulnerable Populations.

Want to know more? Visit www.sugarscience.org.

UCSF has eliminated the sale of sugary beverages on its hospital campuses, alternatively offering healthier choices to align with the findings of SugarScience.
Housed in the gleaming new UCSF Betty Irene Moore Women’s Hospital, with its soaring atriums, rooftop gardens and nature-inspired decor, the Birth Center embodies a new vision of maternity care—a space that’s both intimate and sophisticated, blending the comforts of home with the highest level of medical expertise. “The goal was to create a comforting environment where every patient, from low risk to high risk, would feel she’s in the best possible place to have her baby,” says Dr. Mari-Paule Thiet, chief of obstetrics at UCSF.

The Birth Center has 36 beds for mothers and newborns and nine spacious labor and delivery suites. All rooms are private, most with garden views.

Thoughtful touches for the laboring mother and loved ones abound. Every labor and delivery suite has its own whirlpool tub to ease discomfort in a warm, rejuvenating bath. “The tubs are very popular,” says Thiet. And thanks to our wireless monitors, laboring women can safely stroll the hallways. Every room has a sleeper sofa for guests and a bedside tablet, making movies, music, even ordering meals, just a click away.

Not every birth goes according to plan. And when rare complications do arise, it’s good to know that with our Level IV NICU and expert team of specialists, there’s no better place to be. “We’re ready to handle any emergency immediately,” says Thiet.

And the team’s collaborative approach to the birth experience means that every woman’s wishes are listened to and respected. “We have nurse midwives on our staff and welcome doulas for women who desire those options,” says Thiet. “We want every woman and her family to have the best possible birth experience.”

For more on the Birth Center, visit www.ucsfmissionbayhospitals.org/women.
The Heart of Innovation

In late 2013, Alex Kazan was preparing to die. In need of a heart transplant, he was too ill to survive the long wait for a donor organ and was considered too weak for a ventricular assist device (VAD)—a mechanical pump that helps support failing hearts before transplantation. Seemingly out of options, the business owner and fitness buff began putting his affairs in order.

But Kazan didn’t die, and in April 2014, he was referred to Dr. Liviu Klein, who directs UCSF Medical Center’s Mechanical Circulatory Support and Heart Failure Device Program. “Alex was in bad shape, but we had the expertise to implant a heart pump that would allow him to live a relatively normal life while waiting for a transplant,” Klein says.

Unlike older pumps, newer versions may last up to 10 years. In addition to buying time for people like Kazan, they’re also used to permanently support heart failure patients unable to undergo transplantation. In October, Kazan received a technologically advanced heart pump about the size of a hockey puck. The device—a miniature centrifugal pump connected to an external controller and battery pack—sends oxygenated blood from his heart’s left ventricle to the rest of his body in a continuous flow.

“Other heart pumps are bulky, aren’t suitable for women and must be implanted in the abdomen during open-heart surgery,” Klein explains. “This device is smaller and can be placed directly in the chest using minimally invasive techniques, so patients recover much faster.”

A thin, flexible tube that extends through the skin links the pump to the controller. This device runs the pump while providing text messages and alerts on a small screen to help patients manage the system. Most people carry the controller in a fanny pack, computer case or purse.

For Kazan, the pump has been a small miracle. He’s back at the gym and running three businesses while he waits for a new heart. “Dr. Klein and his team were extraordinary,” he says.

According to Klein, Kazan’s story isn’t unique. “The result with VADs can be as dramatic as a transplant,” he says. “People are able to resume active lifestyles, including returning to work, exercising on a treadmill and biking.”

To learn more about ventricular assist devices, visit www.ucsfhealth.org/VAD.
Breath of Life

An infection was robbing little Lydia of her ability to breathe. Until ECMO treatment let her lungs rest and heal.

Pokémon, video games and Barbie®: It doesn’t take much to make 8-year-old Lydia Ledford happy. Last December, however, the second grader’s life took a dramatic turn. Days after she earned her yellow belt in karate, the child who’s described by her mother as “a happy person—a peaceful presence to everyone” caught the flu and developed life-threatening complications.

“Lydia began coughing just before New Year’s Eve, was lethargic and had a backache, but no fever,” says Lydia’s mother, Emily Ledford. “I took her to an urgent care center in Bakersfield just to be on the safe side.” (Continued on page 11)
Every day, the physician-scientists at UCSF Benioff Children’s Hospital Pediatric Brain Center combine forces to treat the most challenging brain disorders affecting children’s lives. Even the rarest neurological conditions are no strangers to this team.

Now in its new location on the Mission Bay campus, the Pediatric Brain Center (PBC) houses top experts from virtually every discipline related to children’s brain health—from neurosurgery and neuro-oncology to neurogenetics and behavioral health, just to name a few.

“Having all these specialists in one place makes it so much easier for our patients and families,” says Dr. Heather Fullerton, pediatric neurologist and PBC medical director. “They can get the care they need quickly and under one roof.”

Patients who come to the PBC are surrounded by some of the most brilliant medical minds in subspecialties like pediatric stroke, epilepsy, brain tumors, headache, movement disorders and autism. The team was among the first to use deep brain stimulation—a method where a device is implanted in the brain—to treat dystonia, a common movement disorder. Cortical brain mapping, which identifies areas of essential brain function before surgery, was also pioneered here. It’s this kind of expertise that draws patients throughout the country and the world. “Because we have such a wide array of experts, we manage the most complex cases that can’t be treated at other institutions,” says Dr. Nalin Gupta, neurosurgeon and PBC surgical director.

Treating a child’s still-developing brain requires special expertise. “There’s a vast difference between the brain of a toddler and a teenager,” says Gupta. “And they’re all different from adults, so we can’t treat them in the same way.”

And because most PBC physicians are also active researchers, they’re constantly working on new breakthroughs in the treatment and diagnosis of these devastating conditions. The UCSF Sandler Neurosciences Research Center, where innovative brain care research takes place, is literally across the street. “We can see firsthand the benefit of our research on patients’ lives, so we’re always pushing that envelope,” says Fullerton. “Our goal is to give our patients access to the newest and best treatments available anywhere.”

Learn more about the Pediatric Brain Center at www.ucsfhealth.org/pbc.
Unbelievably, a chest X-ray showed that Lydia’s lungs were filled with fluid and her right lung was collapsing. The cause was a raging bacterial lung infection, which developed seemingly overnight as a complication of the flu. In respiratory failure, Lydia was rushed to a local hospital, then transferred to a nearby children’s hospital where she was placed on a ventilator. But her condition continued to worsen and she was airlifted within hours to UCSF Benioff Children’s Hospital for specialized care, including extracorporeal membrane oxygenation (ECMO).

“ECMO works like an external artificial lung,” says Dr. Benjamin Padilla, a UCSF pediatric surgeon. The patient’s blood is pumped through a machine where it’s oxygenated before being sent back to the body. With the machine doing the work for the lungs, they can rest and heal.

“Because Lydia’s lungs were so severely damaged, she remained on ECMO for 55 days,” says Dr. Peter Oishi, pediatric critical care specialist. Meanwhile, more than 100 people from virtually every specialty in the hospital mobilized to care for the critically ill child. And together, they worked miracles.

On Easter Sunday—94 days after Lydia was admitted—the bubbly little girl went home. Today, her lungs are completely healed. “The staff not only saved my daughter’s life, but became like family,” says Ledford. For Drs. Padilla and Oishi, the family feeling is mutual. “Within a month, Lydia’s parents sent us photos of her participating in karate class,” recalls Dr. Padilla. “It was just wonderful.”

To see photos of Lydia’s discharge from the hospital, visit www.facebook.com/UCSFBenioffChildrens and click on “Photos.”

“Worried About Wetting?”

“If a potty-trained child can’t completely control urination during the day, is over the age of 7 and still bedwetting, or having ongoing difficulties being potty trained, parents should consider an evaluation,” says Anne Arnhym, a pediatric nurse practitioner at the UCSF Children’s Continence Clinic. She points out there are many reasons for wetting, but the majority of children’s bladder-control problems are caused at least in part by constipation—even if the child has regular bowel movements.

“The bladder and bowel are side by side in the abdomen,” Arnhym explains. “When stool accumulates in the colon, it puts pressure on the bladder. This makes it difficult for the bladder to fill and empty properly.” Another common cause of pediatric urinary incontinence is ignoring the body’s signals when it’s time for a bathroom break. “If left untreated, wetting can become chronic and more difficult to treat,” says Arnhym. “It may also be traumatic for the child, especially if wetting occurs around peers. But there are many strategies that can help children overcome incontinence.”

Arnhym presents a program called the Pediatric Urology Parent (PUP) seminar. The free, 90-minute meeting provides families with an understanding of bowel and bladder dysfunction and how it’s treated, as well as tips to try at home before coming for an appointment. “The PUP seminar, with homework included—followed by a prompt appointment at the UCSF Children’s Continence Clinic—equals dry and happy kids,” says Dr. Laurence Baskin, chief of pediatric urology.

For information on the seminar, call (415) 353-2083.
Among the Nation’s Best

UCSF Medical Center is one of the nation’s premier hospitals for the 14th consecutive year, ranked as the eighth best hospital in the country in the 2015-2016 Best Hospitals survey from U.S. News & World Report.

It is the only hospital in Northern California ranked in the top 10 on the Honor Roll, which highlights hospitals that are exceptional in numerous medical specialties.

UCSF Benioff Children’s Hospital campuses in San Francisco and Oakland are among the nation’s premier children’s hospitals in nine pediatric specialties, according to the U.S. News 2015-2016 Best Children’s Hospitals rankings.