Preserving Parenthood

UCSF treatments protect cancer patients’ fertility

UCSF Medical Center

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NEW! AN EMERGENCY DEPARTMENT JUST FOR KIDS
TO OUR NEIGHBORS

Last fall, UCSF Medical Center and UCSF Benioff Children’s Hospital achieved Magnet recognition from the American Nurses Credentialing Center (ANCC), a status that has elicited enormous pride throughout the organization.

And for good reason. Magnet recognition signifies outstanding nursing practice; a rewarding work environment with strong collaboration between nurses, physicians and other health care personnel; and excellence in patient care, safety and satisfaction. Currently, less than 7 percent of the 5,724 hospitals registered with the American Hospital Association have achieved Magnet status.

The ANCC launched the Magnet program in 1994 to recognize health care organizations for high-quality patient care, professional excellence and innovations in nursing practice. What does this prestigious designation mean for patients and nurses? Among other advantages, Magnet facilities achieve better patient outcomes with shorter lengths of stay and report increased patient satisfaction. Also, Magnet hospitals ensure that nurses have the support, autonomy and tools they need to do their work well—and that means higher-quality experiences for patients and their families.

Our recent Magnet designation is but one example of how we are striving to provide the safest and highest-quality care every day to every patient. For more on the ways we are achieving and maintaining the highest standards of care, visit www.ucsfhealth.org/quality.

Sincerely,

Mark R. Laret, Chief Executive Officer
UCSF Medical Center
UCSF Benioff Children’s Hospital

PATIENT-CENTERED PRIMARY CARE

Important changes under way at UCSF Medical Center, and across the country in health care reform, are promising to make it easier for you to get and stay healthy. The key is your primary care provider. “There has been broad recognition that the complicated U.S. health care system works a lot better for patients when they have a personal and empowering relationship with their primary care physician or nurse practitioner,” says Dr. Kevin Grumbach, chair of the UCSF Primary Care Strategies Committee, which has the ongoing responsibility for bringing about innovations in UCSF’s primary care. Thanks to this commitment at UCSF, you have the benefit of these and other patient-centered services at our primary care clinics:

• Same-day or next-day appointments: You don’t have to wait weeks to see your doctor. Call us to make an appointment and we will see you within 48 hours.
• Online health tools: MyChart, UCSF’s patient portal, allows you to visit us online, make appointments, request prescription refills, obtain test results and much more.
• Convenient access to UCSF’s specialists: Our world-renowned UCSF experts from multiple specialties are part of your “medical neighborhood,” referred by your primary care provider.

For a list of UCSF’s convenient primary care clinics, visit www.ucsfhealth.org/primarycare.

OSHIER CENTER OFFERS PROGRAMS IN COMPLEMENTARY CARE

The UCSF Osher Center for Integrative Medicine offers groundbreaking lectures, classes and therapeutic programs for the public. The center’s experts integrate the best of modern medicine with established practices from around the world to empower individuals to take control of their health and lifestyle choices. All programs emphasize prevention as the cornerstone of good health and include topics focused on:

• Mindfulness and meditation
• Tai chi and yoga
• Living with cancer
• And more

To register or get details, visit www.ucsfhealth.org/ocim, call (415) 353-7718 or email classes@ocim.ucsf.edu.
Putting the Freeze on Heart Disorders

Tiny, refrigerant-filled balloons freeze problem veins and treat heart rhythm disorders

Just like a home’s electrical wiring can get faulty, so can the wiring in your heart. When the electrical signals in the heart’s two upper chambers (atria) get confused, the heart starts beating out of rhythm, a condition called atrial fibrillation—the most common heart arrhythmia.

“It’s typically not life-threatening and causes some problematic symptoms like palpitations, shortness of breath and fatigue. But it also can cause some people to have a stroke,” says Dr. Edward Gerstenfeld, chief of Cardiac Electrophysiology and Arrhythmia at UCSF Medical Center.

For years, atrial fibrillation was simply treated with medication. In 1998, doctors at UCSF were among the first in the country to use catheter ablation to treat it, journeying into the heart with tiny wires to burn sections of the pulmonary veins leading into heart, thus halting the abnormal signals.

Today, UCSF doctors are once again at the forefront. They have begun to treat atrial fibrillation using a cryoballoon, which freezes portions of the vein—instead of burning it—to restore normal heart rhythm. “The outcome seems to be similar to catheter ablation, but it’s quicker and possibly safer,” says Dr. Gerstenfeld, who was involved in the original cryoballoon clinical trial, called STOP AF, while at the University of Pennsylvania, prior to joining UCSF.

“In catheter ablation, we have to make 45 or 50 lesions, in a connect-the-dots fashion, around these pulmonary veins so they’re electrically isolated. It can be a painstaking process. With the cryoballoon, on the other hand, we inflate it in the pulmonary vein and introduce a cooling agent into it, causing the whole vein to freeze at once.” The other advantage is that doctors can use less fluoroscopy or X-ray because they don’t have to spend time moving catheters from spot to spot.

Cryoballoon ablation is approved for the treatment of paroxysmal atrial fibrillation—characterized by arrhythmia that comes and goes. “The benefits of this new therapy,” says Dr. Gerstenfeld, “may ultimately make it the standard treatment for this type of arrhythmia.”

Visit www.ucsfhealth.org/arrhythmia for more information, or call the Cardiac Electrophysiology and Arrhythmia Service at (415) 353-2554. Patients need a physician’s referral to make an appointment.
KINDER, GENTLER EYE SURGERY

Quicker healing and recovery, thanks to procedures pioneered at UCSF

It can be unsettling if your vision becomes distorted or starts to fade. Fortunately, surgery can often help, including groundbreaking procedures devised by eye specialists at UCSF that treat certain disorders of the retina—a layer of tissue in the eye that translates images into signals to the brain—and avoid use of sutures (stitches).

“In certain traditional surgeries of the inner eye, the instruments have been rather large and incisions had to be sutured. The trouble is, the sutures take several weeks to dissolve, sometimes causing irritation,” says Dr. Jay Stewart, an ophthalmologist at UCSF’s Retina and Vitreous Clinic. “Dr. Eugene de Juan, one of our clinic’s physicians, was one of the innovators who, about 10 years ago, introduced a procedure in which the instruments are inserted without first having to open up the layers of the eye. Smaller instruments are used, creating smaller incisions that don’t require sutures.”

Nowadays, this sutureless procedure is suitable for surgeries that remedy retinal detachment, retinal damage caused by diabetes and other conditions. “Not only are these procedures available to UCSF patients, who can now recover quicker and heal faster,” says Dr. Stewart, “they are also now accepted and performed worldwide.”

To learn more or to make an appointment, call UCSF Medical Center’s Retina and Vitreous Clinic at (415) 353-2402 or visit www.ucsfhealth.org/retina.
Did you know that as many as one in five women will develop fibroids? In some cases, these non-cancerous uterine growths cause symptoms, such as pain, frequent urination and excessive bleeding, says Dr. Alison Jacoby, an ob/gyn at UCSF Medical Center. Unfortunately, she adds, doctors have sometimes recommended more invasive treatment than is necessary.

“I have seen so many women who have been told their only option is hysterectomy—removing the uterus,” says Dr. Jacoby. “There is a prevailing belief that once a woman has completed childbearing, her uterus is expendable. Sometimes, young women are told this who haven’t even had kids yet. It really upsets me and is the spark that motivates me to be an advocate for women.”

Dr. Jacoby founded the UCSF Comprehensive Fibroid Center to offer women a range of medical and surgical treatment options. She also partners with radiologists who perform nonsurgical procedures and high-risk pregnancy specialists who can help women who have fibroid complications during pregnancy.

“Many operations that used to require a large incision—similar to a C-section incision—can now be performed with laparoscopy, in which the procedure is done via three or four very small incisions,” says Dr. Jacoby. “Instead of being in the hospital for two nights, many patients can go home the same day and recover much more quickly.”

In another minimally invasive procedure called uterine artery embolization (UAE), an interventional radiologist inserts tiny tubing into the artery of the upper leg and introduces a plug into the uterine artery. This decreases blood flow and oxygen to the uterus and causes the fibroids to shrink. “UAE uses sedation rather than general anesthesia, has a short hospital stay and a fast recovery,” says Dr. Jacoby. The procedure isn’t advised, though, for women who want to have children because it may impact pregnancy.

The center’s latest endeavor is to investigate the effectiveness of a new procedure called magnetic resonance-guided focused ultrasound (MRgFUS), in which sound waves pass painlessly through the lower abdomen and converge in an area the size of a grain of rice within the fibroid. The focused ultrasound waves create heat that destroys the fibroid cells, and after multiple sonications the entire fibroid is killed. “Although the procedure takes several hours to complete, women leave the hospital the same day and are back to all activities the next day,” Dr. Jacoby says.

A common aim inspires all of the center’s treatments, emphasizes Dr. Jacoby. “We want each woman to be able to choose the option that is best for her. We work collaboratively, with a woman’s best interests at heart.”

Find out more about the UCSF Comprehensive Fibroid Center at www.ucsfhealth.org/fibroids. To make an appointment, call (415) 885-7788.
Added to the worries many cancer patients have about their life-threatening diagnosis and impending treatments are the serious concerns they have about their fertility. “If I survive this disease,” they ask, “will I still be able to start or build a family?”

Cancer patients—male and female—can find compassionate counseling and leading-edge solutions at UCSF’s Fertility Preservation Center, part of the UCSF Center for Reproductive Health. Learn more about the center’s services and common concerns in the following Q&A with its director, Dr. Mitchell Rosen, and nurse coordinator, Audra Katz, RN.

Why is fertility preservation so important for cancer patients?

**Dr. Rosen:** Today’s cancer treatments—medications, chemotherapy, radiation—affect a patient’s entire body, including a woman’s ovaries or a man’s testes. There is the potential to compromise reproduction. The prospect of being infertile and unable to have a family can be devastating for patients.

**Katz:** At the Fertility Preservation Center, we’re focused on quickly providing patients with the information they need to make active, informed decisions about their fertility options prior to cancer treatment. Every situation is unique, and we create individualized treatment plans to address each patient’s specific needs.

We preserve fertility in patients with any type of cancer, including breast, testicular, colon, head and neck, gynecological and hematological malignancies, as well as hereditary cancer syndromes and other medical conditions.
“Dr. Rosen and his staff were incredible. Knowing that I have embryos waiting for me changed my whole outlook. Before, I saw my cancer as a big obstacle. Now I think of it as just a little speed bump.”—A. H., cancer patient

Parenthood

What are examples of options for preserving fertility?

**Dr. Rosen:** Generally speaking, the type of cancer and type of cancer treatment dictate the options for fertility treatment. Timing is critical, and there’s a lot of coordination between our clinic and the oncology team. There are multiple options. Most commonly, for men, it’s basically about banking sperm and freezing it for future use [cryopreservation]. And for women, the most successful option is to retrieve their eggs before they undergo cancer treatment. The eggs can be frozen for future use or the eggs can be fertilized and then we freeze the embryos.

Another example: For a woman with ovarian cancer and getting radiation to the pelvis, the chances her ovary will be working afterward are virtually zero, but we can take steps to preserve it. We can take out the ovary, freeze it, let the patient get through cancer treatment, then transplant the ovary afterward. The patient can then have the ability to get pregnant naturally.

Do I have any options if I have already been treated for cancer?

**Dr. Rosen:** Again, the type of cancer and type of cancer treatment dictate the options for fertility treatment. It’s important to know there are options. We have been successful on many occasions.

Why is education and counseling also such an important part of the center’s treatment?

**Dr. Rosen:** Through studies we’ve conducted, we’ve found that cancer survivors have improvement in quality of life and less regret when they have an opportunity to make a decision about preserving fertility—even if they choose not to. Trouble is, less than 10 percent of individuals diagnosed with cancer are getting the opportunity to consult a fertility specialist and make a choice about preserving fertility.

**Katz:** Our center increases that number and gives patients hope for a positive future.

What are some of the other advantages of UCSF’s center?

**Katz:** Our interdisciplinary team includes reproductive endocrinologists, urologists, psychologists, nurses, genetic counselors, clinical embryologists and experts in gamete biology. The center features experts who are at the forefront in fertility preservation and one of the most highly respected certified embryology laboratories in the nation.

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**CANCER PATIENTS: WANT TO SCHEDULE A CONSULTATION?**

Discuss fertility preservation with your oncologist and call the Fertility Preservation Center immediately at (415) 353-9115. An appointment for a consultation will be scheduled within 24 to 48 hours. For information online, visit www.ucsfhealth.org/fertilitypreservation.

**LEARN FROM FIRSTHAND EXPERIENCE**

Gina Danford is among the many cancer patients who’ve been successfully treated at UCSF’s Fertility Preservation Center. For more information, check www.ucsfhealth.org/danford.

**HIGHLIGHTS OF THE CENTER’S SERVICES**

- Assisted reproductive technology
- Fertility preservation surgery
- Cryopreservation: sperm, ovarian tissue, oocyte (primitive eggs)
- Advanced sperm retrieval services
- Donor programs: eggs, embryos
- Surrogacy services
- Complementary and alternative medicine services
- Genetic counseling
- Psychological counseling
- Additional services as needed
Information at your fingertips

- **Main websites**
  - www.ucsfhealth.org
  - www.ucsfbenioffchildrens.org
- **Primary Care**
  - www.ucsfhealth.org/primarycare
- **Outreach clinics**
  - www.ucsfhealth.org/outreachclinics
- **Health coverage**
  - www.ucsfhealth.org/healthinsurance
- **Maps and directions**
  - www.ucsfhealth.org/pathway
- **Past issues of Advances and Bridges**
  - advances.ucsfhealth.org
  - bridges.ucsfbenioffchildrens.org

Our hospitals

- **UCSF Medical Center and UCSF Benioff Children’s Hospital**
  - 505 Parnassus Avenue
  - San Francisco, CA 94143

- **UCSF Medical Center at Mount Zion and the UCSF Helen Diller Family Comprehensive Cancer Center**
  - 1600 Divisadero Street
  - San Francisco, CA 94115

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**Advances and Bridges** are published by UCSF Medical Center and UCSF Benioff Children’s Hospital as a community service and are not intended for the purpose of diagnosing or prescribing. If you have questions about your health, please contact your health care provider.

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If you have comments or would like to be added to the mailing list, please contact us at (888) 689-8273 or send an email to referral.center@ucsfmedctr.org.

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