

# UCI Health

SPRING/SUMMER 2011  
Vol. 15, No. 1

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**A Big Assist for  
Back Surgery**

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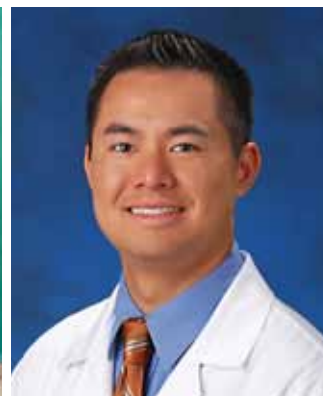
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## A Big Assist for Back Surgery

The spine is one of the body's most intricate structures.

**With 24 vertebrae and 23 discs** that act as cushions between the bones, a lot can happen along this complicated pathway—and treatment can be equally complex.

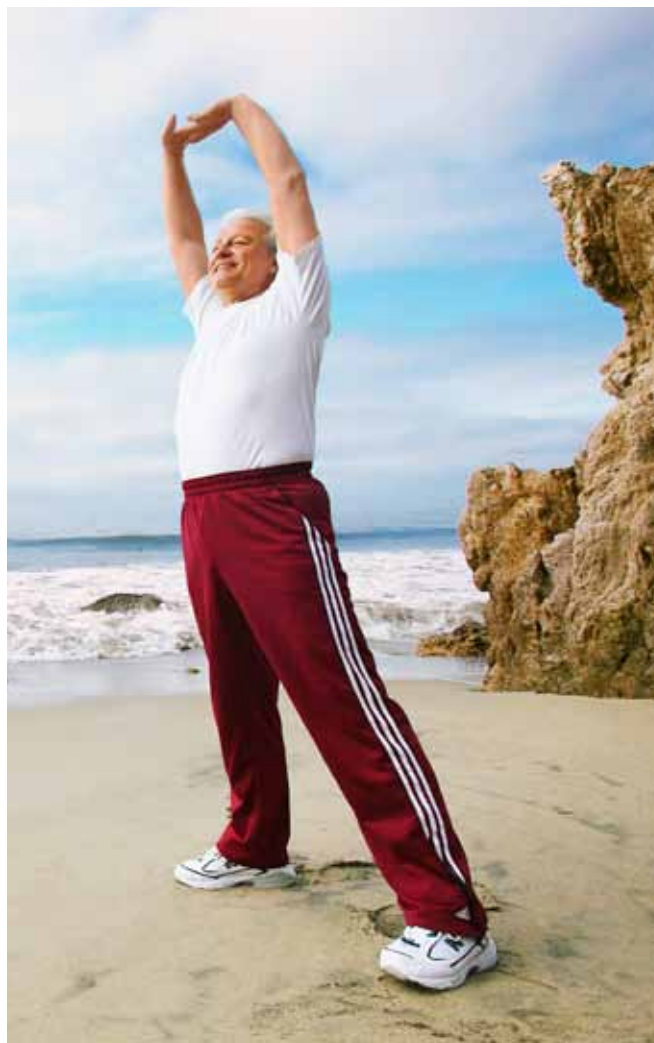
Now UC Irvine Healthcare surgeons are the first and only on the West Coast with a new tool to help them plan and perform back surgeries with exacting precision. Called the SpineAssist® surgical robot, the system has two components: a computerized workstation and a connected miniature robot.

**Surgical blueprints.** Several days before an operation, surgeons use the workstation to create a three-dimensional “surgical blueprint” for the procedure based on the patient’s individual anatomy as shown in a CT scan. The plan is so detailed it includes the exact angle at which screws and other implants must be introduced into the body for optimal results. “This miniature robotic system enables us to plan and ‘practice’ the operation even before the patient enters the operating room,” says **Dr. Nitin Bhatia**, chief of orthopaedic spine surgery.

The plan is updated by two fluoroscopes (X-rays) immediately before surgery. These two images are merged with the preoperative CT scan to form a 3-D picture of the patient’s spine. Its purpose is to ensure that the position of the patient on the operating room table matches the presurgical CT scan.

From that point on, there’s no need for further imaging. “Before the SpineAssist surgical robot

appeared on the scene, multiple X-rays were necessary to guide and confirm each implant’s location. This could add up to as many as 25 images during a single operation,” says Bhatia. But since SpineAssist has already prepared the guidance plan and identified precise implant locations before the operation, the need for X-rays during the procedure is eliminated. “This increases accuracy, makes the procedure shorter for the patient, and reduces the amount of radiation by 98 percent,” says Bhatia.



Once the operation is under way, the robotic arm guides the surgeon to the exact locations on the spine indicated in the preoperative plan. The guidance system is accurate to less than one millimeter, or 1/25th of an inch—about the size of the tip of a ballpoint pen. But guidance is where the robot’s work ends. The surgeon makes all incisions and places all the screws and other implants. “SpineAssist is a technologically advanced device that enhances planning and implementation,” says **Dr. Samuel Bederman**, a UC Irvine Healthcare orthopaedic spine surgeon, who has used the system for surgeries that range from relatively simple to very complex. “It’s a surgeon’s version of a preflight plan, mapping the way to attain best results, planning where the screws and other implants should be placed, and alerting us to subtle deviations in a patient’s anatomy that otherwise might not be apparent until surgery begins. This allows us to anticipate potential complications before they occur.”

**A faster recovery.** In addition to reduced radiation and less time on the operating room table, the robot offers patients several other advantages. On the top of the list are smaller incisions and increased protection for the spinal cord, spinal nerves and muscles. For patients, this adds up to a faster recovery. “Although the device is used most often to correct lumbar degenerative disorders, it can also be helpful in treating scoliosis and fractures, as well as correcting previously failed operations,” says Bederman.

UC Irvine Medical Center is the only hospital on the West Coast with a SpineAssist surgical robot. For an appointment with a UC Irvine Healthcare orthopaedic spine surgeon, call 714.456.7012.

# Customizing Women's Heart Care

**It's a myth that persists:**  
**Many women still believe**  
**that heart disease is primarily**  
**a man's problem.**

**But the facts tell another story.** "Each year, heart disease kills more women than men," says **Dr. Dawn Lombardo**, a cardiologist and director of UC Irvine Healthcare's Heart Failure Program. "Nearly five times as many women will die this year from heart attacks than from breast cancer. In fact, cardiovascular disease will claim more female lives than the top five causes of death for women combined, including all types of cancer. There's an urgent need for greater awareness of heart disease in women."



Lombardo and other UC Irvine researchers are studying gender-related differences in the treatment of heart disease. Their goal is to develop recommendations that will help customize cardiovascular care for women. They're leading the way by conducting clinical trials to assess the

effectiveness of various medications and devices, emphasizing female enrollment.

**Critical differences.** "Women have been underrepresented in cardiovascular disease clinical trials," says Lombardo. "As a result, treatment for women with coronary artery disease, stroke and high blood pressure is typically based on studies of male participants."

While many characteristics of heart disease are shared by both sexes, there are critical differences. For example, although chest pain is the most common sign of a heart attack in both males and females, only half of women report this symptom. "Instead, they are likely to mention more subtle symptoms such as shortness of breath, nausea and extreme fatigue—

all of which can be chalked up to other causes," says Lombardo.

**There's an urgent need for greater awareness of heart disease in women.**

As a result, treatment can be delayed because these symptoms aren't recognized as heart-related.

The American Heart Association (AHA) has responded to this gender

gap by issuing new prevention guidelines for women. Previous recommendations were based on male-dominated studies. "Many female cardiovascular patients tend to be older, sicker and prone to more complications compared to men who have heart disease," says **Dr. Shaista Malik**, a UC Irvine Healthcare cardiologist. "Also, certain risk factors are

only applicable to women. The new AHA guidelines incorporate more real-world recommendations."

For example, the updated guidelines single out certain medical conditions that increase a woman's risk of developing cardiovascular disease. Among them are lupus, arthritis, rheumatoid arthritis and certain pregnancy complications. "Women who experience gestational diabetes—a temporary rise in blood-glucose levels during pregnancy—have a 35 to 60 percent chance of developing a full-blown case of diabetes in the next 10 to 20 years," says Malik. "This puts them at high risk for a stroke and heart disease." The AHA also adds depression as a risk factor because it may determine how well women follow their doctor's recommendations.

**Lifetime risk.** Therapies once considered useful for preventing cardiovascular problems in women are now discouraged in the new AHA guidelines. Among them are hormone replacement therapy, antioxidants and folic acid.

The AHA update also puts a new emphasis on calculating a women's lifetime risk for heart disease. This differs from the current practice of determining a woman's 10-year risk, which is usually not elevated until she's in her 50s or 60s. "If risk factors are addressed earlier in life—for instance, when women are in their 30s and 40s—some serious problems can be averted through preventive measures," says Malik.

The AHA also recommends that women avoid cigarettes, get at least 150 minutes of moderate exercise or 75 minutes of vigorous exercise weekly, and maintain a body mass index of less than 25. Other recommendations include keeping total cholesterol at 200 or less, fasting blood-glucose under 100 and blood pressure at 120/80, while focusing on a low-sodium diet rich in fruits and vegetables. "Following these guidelines can add many healthy and productive years to a woman's lifetime," says Malik.

For an appointment with a UC Irvine Healthcare cardiologist, call 714.456.6699.

# Surviving Colorectal Cancer

**Just a few years ago, the picture for people with colorectal cancer was far less hopeful than it is today.**

**Not only did these patients face** a significantly reduced life expectancy, but also more than half of those with rectal cancer ended up with a permanent colostomy—a surgical opening in the abdomen through which stool is excreted into an external bag. The current outlook for colon and rectal cancer patients is infinitely brighter. More people are surviving the disease, and an ever-growing number are colostomy-free.

At UC Irvine's Chao Family Comprehensive Cancer Center, all colon cancer patients and 95 percent of rectal cancer patients are able to avoid a permanent colostomy. This good news is due to the advanced, multidisciplinary care offered at the cancer center, including the latest radiation therapy, chemotherapy treatments and clinical trials. It's also due to the availability of leading-edge, minimally invasive surgical procedures—including robotic surgery—that focus on not only curing people with colorectal cancer, but also preserving their quality of life.

**Eliminating scars.** “Laparoscopic techniques have revolutionized surgery for colorectal cancer,” says **Dr. Michael Stamos**. An internationally acclaimed leader in his field, Stamos pioneered the “no-visible-scar” approach to colectomy. During this minimally invasive procedure, surgeons remove portions of the colon containing malignant tumors and reconnect the two ends using very small incisions hidden in the navel and other body contours. “This makes the operation virtually scarless,” Stamos says. “Since postoperative pain is directly related to incision size, patients who have had a minimally invasive colectomy experience less discomfort and a faster recovery than others.” In many other hospitals across the nation, colectomies continue to be performed through an 8- to 10-inch incision.

For rectal cancer, the gold standard of care is a total mesorectal excision (TME). During the procedure, the surgeon removes the cancerous portion of the rectum, as well as involved lymph nodes and blood



The outlook for colon and rectal cancer patients has never been brighter.

vessels. This technically challenging operation is now performed using robotic technology. “The robot’s powerful three-dimensional imaging system and highly precise instruments allow surgeons to work inside the tight confines of the pelvis with unmatched accuracy,” says **Dr. Alessio Pigazzi**, who was the first in the world to perform a robotic TME. “This

makes it easier to avoid the tiny nerves that govern bowel, bladder and sexual function.” Preserving the anal sphincter—the ring of muscles that governs bowel control—is essential to maintain normal bowel function. “The robot’s precision, combined with presurgical radiotherapy to shrink the tumor, helps us save as much of the rectum as possible, reducing the need for a colostomy,” says Pigazzi. A specialist in minimally invasive procedures for colon and rectal tumors, Pigazzi focuses his research on developing new robot-assisted applications for these types of cancer.

**The best defense.** Stamos, Pigazzi and other UC Irvine colorectal surgeons are also experts at another minimally invasive, sphincter-saving operation called the colonic J-pouch. “This procedure makes it possible to maintain near-normal bowel function through the creation of a pouch made from the large intestine and connected to the anus,” explains Stamos.

As important as these advances are, prevention remains the best defense against colorectal cancer. “The American Cancer Society recommends colonoscopy screening on a regular basis starting at age 50, and earlier for people who have a family history of the disease,” says hematologist-oncologist **Dr. Jason Zell**. “The test can detect growths in the rectum and colon years before they become life-threatening.” Zell heads up a number of colon cancer clinical trials, including several prevention studies sponsored by the National Institutes of Health. One study aims to prevent new colon tumors in 1,340 patients previously treated for colon cancer. “With proper screening and care, colorectal cancer is a preventable disease,” he says.

For referral to a UC Irvine Healthcare colorectal surgeon or oncologist, call 888.717.GIMD.



## Senior Seminars

For the latest information about senior seminars, call toll-free 877.456.3770 or visit [www.ucihealth.com](http://www.ucihealth.com). All seminars are free.

### Our Kidneys: Keeping Them Healthy as We Age

Dr. Michael Louie, UC Irvine urologist

- Wednesday, July 13, 2 p.m., Emerald Court, 1731 Medical Center Drive, Anaheim, RSVP: 714.778.5100

Dr. Jaime Landman, UC Irvine urologist

- Thursday, July 21, 1 p.m., Norman P. Murray Senior Center, 24932 Veterans Way, Mission Viejo
- Thursday, July 28, 11 a.m., Brea Senior Center, 500 S. Sievers Ave., Brea

### Matters of the Heart: A Look at Heart Health

Nathalie De Michelis, UC Irvine cardiovascular program manager

- Wednesday, August 10, 2 p.m., Emerald Court, 1731 Medical Center Drive, Anaheim, RSVP: 714.778.5100

### Female Urinary Incontinence

Dr. Karen Noblett, UC Irvine urogynecologist

- Friday, August 12, 1 p.m., OASIS Senior Center, 801 Narcissus Ave., Corona del Mar

### The Aging Spine

Dr. Samuel Bederman, UC Irvine spine surgeon

- Tuesday, August 23, 1 p.m., Florence Sylvester Senior Center, 23721 Moulton Parkway, Laguna Hills

### Living With Diabetes: Eating Out and Exercise

Mary Jean Christian, certified diabetes educator, Joslin Diabetes Center at UC Irvine

- Tuesday, September 13, 1 p.m., Florence Sylvester Senior Center, 23721 Moulton Parkway, Laguna Hills

### Effects of Aging on Voice and Swallowing

Dr. Sunil Verma, UC Irvine laryngologist

- Tuesday, October 11, 1 p.m., Florence Sylvester Senior Center, 23721 Moulton Parkway, Laguna Hills

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# Seniors: Ask the Doctor

## Prostate Surgery

UC Irvine Healthcare is a nationally recognized leader in robotic prostate cancer surgery. Join us as urologist Dr. Michael Louie discusses advances in the surgical treatment of prostate problems.

### Q What's the purpose of the prostate?

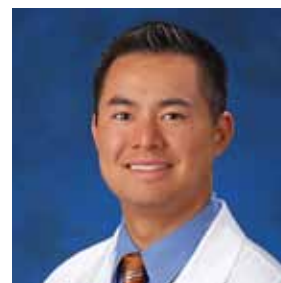
**A** The prostate is involved in the production of semen. It's located deep within the pelvis, under the bladder. It surrounds the urethra—a tube that transports urine and semen out of the body. The gland is adjacent to nerves that govern sexual function. It's also near the urinary sphincter, which allows people to control when they want to urinate.

### Q What are the most common prostate problems men experience?

**A** By age 50, a majority of men have developed some degree of benign prostatic hypertrophy (BPH)—enlargement of the prostate gland. Around this time of life, prostate cancer also becomes more prevalent. For this reason, men should have regular digital rectal exams and baseline prostate-specific antigen (PSA) testing starting at age 40.

### Q What are the symptoms?

**A** BPH symptoms include the frequent need to urinate at night, a weak stream of urine, difficulty starting and stopping urination, and incomplete emptying of the bladder. In contrast, prostate cancer may not cause any symptoms until it's significantly advanced. At this point, a man may have blood in his urine. He may also experience the inability to urinate or suffer from kidney failure due to prostate-related blockage.



Dr. Michael Louie is a board-certified urologist. He will present a talk entitled "Our Kidneys: Keeping Them Healthy as We Age" on Wednesday, July 13, at Emerald Court, 1731 Medical Center Drive, Anaheim. See Senior Seminar listing to left.

### Q How often is surgery necessary?

**A** Up to 80 percent of men with prostate cancer and 33 percent of BPH patients eventually need an operation. Fortunately, surgery now involves far less pain and recovery time than ever before. This is due to the introduction of robotic surgery for prostate cancer and BPH, as well as new procedures such as button TURP and GreenLight™ laser surgery.

### Q How do button TURP and GreenLight therapy benefit men with BPH?

**A** Button transurethral resection of the prostate—or button TURP—is a new method of removing the portion of the enlarged prostate that's impacting the urethra and making it difficult to urinate. Earlier versions of TURP involved removing part of the prostate through the urethra using cutting loops or lasers. A major risk was bleeding. Button TURP, however, minimizes bleeding by gently vaporizing the affected tissue with a button-like device. An alternative is GreenLight laser surgery, which also vaporizes excess prostate tissue, but with laser light energy.

### Q What about robotic surgery?

**A** The robot has revolutionized BPH and prostate surgery. Its three-dimensional imaging system, dexterity and precision allow surgeons to access the prostate through a few small incisions rather than the 5- to 6-inch abdominal opening required for standard surgery. This means less blood loss, fewer days in the hospital, reduced sexual and urinary side effects, and a faster return to everyday activities.

For an appointment or more information, please call 866.456.7005 or visit [www.ucihealth.com](http://www.ucihealth.com).

# EPILEPSY AND WOMEN

**Puberty, pregnancy, menopause and beyond. Every stage of a woman's life is different, influenced by an ever-changing ebb and flow of hormones.**

**But for women with epilepsy,** this can present a special challenge. "Fluctuating levels of estrogen can increase the number and intensity of seizures," says **Dr. Mona Sazgar**, director of UC Irvine Healthcare's Comprehensive Epilepsy Program and an epileptologist—a neurologist specializing in epilepsy. The program is designated by the National Association of Epilepsy Centers as a Level 4



comprehensive epilepsy center—the highest ranking given—and offers unique subspecialty services to help women afflicted with the disorder.

"About half of all women with epilepsy have more seizures when estrogen levels spike during ovulation or progesterone levels fall at the onset of their menstrual period," says Sazgar. But there are some strategies that may help to avoid cycle-related seizures. One is to increase the dose of antiepileptic drugs (AEDs) the patient takes during this time of month until an effective level has been reached. Another is to add a progestogen-only drug in the hope it will protect against these seizures. It's also important for women to pay close attention to lifestyle factors, such as avoiding stress and alcohol.

**Fine-tuning treatment.** The hormone-seizure connection can also make birth control a challenge. "Certain AEDs speed the breakdown of contraceptive hormones in birth control pills, injections and implants, making them less effective in preventing pregnancy," says Sazgar. To counteract this, the patient's contraceptive can be switched to another with higher doses of estrogen, or the type of AED can be changed. "Several risk factors associated with higher estrogen doses need to be considered, such as the potential for blood clots," says Sazgar. Another safeguard is to supplement hormonal birth control methods with a barrier device such as a diaphragm.

## **Fluctuating levels of estrogen can increase the number and intensity of seizures in women.**

Pregnancy and the postpartum period can pose additional problems as hormone levels surge and decline. About 90 percent of women with epilepsy have healthy babies, with a 4 to 10 percent chance of a birth defect. "It's important for women with a seizure disorder to see a high-risk obstetrician (perinatologist) and epileptologist before they become pregnant so

medications can be adjusted months in advance," says Sazgar. "By the time a woman becomes pregnant, changing AEDs can become problematic." The new AED may not be effective in controlling the patient's seizures, which can lead to miscarriage, pre-term birth and deformities.

"Although a majority of women experience no change in seizure frequency during pregnancy, about 10 percent have fewer seizures and 25 percent have more," says Sazgar. She recalls an extreme case of a patient at a community hospital who suffered continuous, uncontrolled seizures before and after delivering a baby at 32 weeks. The new mother was put into a medically induced coma after several combinations of AEDs were tried to no avail. The patient was finally transferred to UC Irvine Medical Center, where the area of the brain triggering her seizures was identified through sophisticated testing. After undergoing surgery to remove the brain tissue responsible for the convulsions, she has been seizure-free.

**Controlling epilepsy.** Menopause also brings its challenges. The normal process of aging can affect the way AEDs are absorbed and delivered throughout the body. "Medications must be fine-tuned at this time, with special attention to those that affect bone health," says Sazgar. Hormone replacement therapy (HRT) is an option to prevent the development of osteoporosis and control menopausal symptoms such as hot flashes. But since estrogen can trigger seizures, the type of HRT that's selected is very important.

"Today, we have a greater understanding of how to manage epilepsy," says Sazgar. "Thousands of people are able to control their condition rather than letting it control them. But it's critical that women with epilepsy get ongoing, specialized care to optimize their health and live full, productive lives." For more information on UC Irvine Healthcare's program for women with epilepsy, call 877.UCI.DOCS.

# the Education Connection

Most classes are free of charge to UC Irvine Healthcare patients, employees, volunteers and their families. Exceptions are the Joslin Diabetes Center, Mind Over Mood and meditation programs. Certain programs are also available in Spanish. All classes are located at UC Irvine Medical Center above the Grunigen Medical Library in the 2nd floor classrooms, unless otherwise indicated. Parking in the Visitor Structure will be validated at your health class. Registration is required. Call toll-free 877.UCI.DOCS or 877.824.3627 for registration and information.

## FAMILY HEALTH

### Asthma and Adults (1 Session)

Learn how to control asthma and not have it control you by learning what it is and how to manage it.  
Cost: \$20/non-UC Irvine patients. Free peak flow meter.  
Friday, July 8, Oct 14 5-7 p.m.

### Spanish Attention and Behavior Problems (10-Session Series)

Free parenting skills classes for parents of children ages 3-5 with attention and behavior problems. Offered through a joint project of UC Irvine and CHOC Children's. Information: 949.824.2462 or www.cuidar.net. Call for meeting dates, times and locations throughout Orange County.

### Breastfeeding (1 Session)

Includes process of milk production, how to breastfeed, avoiding potential problems and returning to work.  
Cost: \$20/non-UC Irvine patients.  
Thursday, July 14, Aug 11, Sept 8, Oct 13 6-8:30 p.m.

### Spanish Breastfeeding (1 Session)

Wednesday, Aug 10, Sept 21 9-11:15 a.m.  
Location: UC Irvine Family Health Center Santa Ana

### Children and Adults with ADHD (CHADD)

Free seminar for parents interested in learning about ADD/ADHD in children. Guest speaker at every meeting. Information: 949.824.8736, www.uci.edu.chadd.shtml or egermer@uci.edu. RSVP is necessary.  
Second Wednesday every month 7-9 p.m.  
Location: UC Irvine Child Development Center, 19722 MacArthur Blvd., Irvine

### Diabetes Management Overview (1 Session)

Methods to control blood-sugar levels through diet, exercise, medication and lifestyle changes. Cost: \$20/non-UC Irvine patients. Free glucometer.  
Wednesday, Aug 10, Sept 14 4-6 p.m.

### Spanish Diabetes Management Overview (1 Session)

Wednesday, July 27, Aug 3, Aug 24, Sept 7, Sept 28, Oct 5 5:30-7:30 p.m.  
Location: UC Irvine Family Health Center Anaheim  
Thursday, July 28, Aug 25, Sept 22, Oct 27 4-6 p.m.  
Location: UC Irvine Family Health Center Santa Ana

### Diabetes Management Series (3-Session Series)

To help you avoid complications, information about the disease process and lifestyle changes, including food, exercise, medications and monitoring your blood sugar is discussed.  
Cost: \$60/non-UC Irvine patients. Free glucometer.  
Wednesdays, Sept 14-28 4-6 p.m.

### Diabetic Diet (1 Session)

Teaches food choices, portions and how they affect diabetes. Learn how to keep your blood-sugar levels at the healthiest range. Cost: \$20/non-UC Irvine patients.  
Monday, Aug 1, Oct 3 4-6 p.m.

### Early Pregnancy (1 Session)

For expectant mothers and their birth partners in the first four months of pregnancy. Includes nutrition, exercise, prenatal care, warning signs and car safety.  
Cost: \$20/non-UC Irvine patients.  
Wednesday, July 20, Sept 21 6-8 p.m.

### Heart-Healthy Diet (Cholesterol Awareness) (1 Session)

Learn the American Heart Association guidelines about low-fat, low-sodium and low-cholesterol diets while still enjoying your diet. Cost: \$20/non-UC Irvine patients.  
Monday, July 18, Sept 19 4-5:30 p.m.

### Hepatitis C Pre-Treatment Education (1 Session)

For the person who is considering or about to begin hepatitis C treatment. Includes information about hepatitis C, transmission, treatment, management of side effects and injection training. Family members and other support persons encouraged to attend. Pre-registration required: 714.456.7642  
Friday, Aug 5, Oct 14 9-10:30 a.m.  
Location: UC Irvine Medical Center, Neuropsychiatric Center, conference room 101

### Hypertension (High Blood Pressure) Management (1 Session)

How to control blood pressure through diet, exercise, medication and lifestyle changes. Cost: \$20/non-UC Irvine patients.  
Tuesday, Aug 9, Oct 11 5-7 p.m.

### Living Well With Heart Failure (1 Session)

Overview of heart failure, symptoms and basic lifestyle changes to manage the condition, including diet, exercise and medications. Cost: \$20/non-UC Irvine patients.  
Monday, July 18, Sept 19 2-3:30 p.m.

### Maternity Tea & Tour

Learn about maternity services and tour the UC Irvine Medical Center Maternity Unit. Cost: Free to all.  
Thursday, July 28, Aug 25, Sept 22, Oct 27 1:30-3:30 p.m.  
Location: UC Irvine Medical Center, Neuropsychiatric Center, conference room 101

### Meditation for Health (4-Session Series)

This program will help participants learn how meditation can help to promote good health and a better quality of life. An introduction to the art of meditation, including a discussion of the various types and styles. Cost: \$40.  
Mondays, Sept 12, 19, 26 & Oct 3 6:30-7:30 p.m.  
Location: UC Irvine Douglas Hospital, conference room 3005

### Meditation for Health Special Topic NEW: Breathing Exercises (1 Session)

Introducing basic, easy-to-learn breathing techniques you can do at home to relax and reduce stress. This class may increase your awareness of your mind-body connection and can enhance a deeper level of meditation and spirituality. Cost: \$20.  
Monday, Oct 17 6:30-7:30 p.m.  
Location: UC Irvine Douglas Hospital, conference room 3005

### Newborn Care (1 Session)

Infant feeding, dressing, bathing, diapering, normal newborn appearance, and signs and symptoms of illness. Cost: \$20/non-UC Irvine patients.  
Friday, July 15, Aug 5, Oct 7, Nov 4 6-8:30 p.m.

### Spanish Newborn Care (1 Session)

Wednesday, Aug 17, Sept 28 9-11:15 a.m.  
Location: UC Irvine Family Health Center Santa Ana

### Nutrition Counseling

Individual nutrition counseling with a registered dietitian. Includes nutrition assessment, personalized meal plan and nutrition education. Call 877.UCI.DOCS to make an appointment. Cost: Call 877.824.3627 to check current nutrition counseling charges. Call your insurance company to check for coverage.

### Prepared Childbirth – Lamaze (5-Session Series)

Offered in conjunction with Santiago Canyon College Continuing Education. For expectant mothers and their birth partners beginning the sixth month of pregnancy. Topics include relaxation, Lamaze techniques, labor and birth, cesarean delivery, medication and anesthesia. Cost: Free to all.  
Tuesdays, Sept 6-Oct 4, Oct 18-Nov 15 7-9:30 p.m.  
Tuesday Location: Santiago Canyon College, Orange Education Center, 1465 N. Batavia St., Orange Center. Register through SCC Continuing Education, 714.628.5900  
Wednesdays, Sept 7-Oct 5, Oct 19-Nov 16 7-9:30 p.m.  
Thursdays, Sept 8-Oct 6, Oct 20-Nov 17 7-9:30 p.m.  
Wed & Thurs Location: UC Irvine Medical Center Building 56, room 113

### Spanish Prepared Childbirth (4-Session Series)

Wednesdays, Aug 24-Sept 14, Oct 26-Nov 16 9-11:15 a.m.  
Location: UC Irvine Family Health Center Santa Ana

### Joslin Diabetes Center Education Classes

Joslin Diabetes Center at University of California, Irvine offers classes to help people learn how to successfully manage their diabetes. "Diabetes Today" offers single-topic sessions that address specific issues of diabetes management. Classes are held at the center, located at Gottschalk Medical Plaza on the UC Irvine campus. There is a fee and insurance pre-authorization is recommended. For a full description or to schedule an appointment, please call Joslin Diabetes Center at UC Irvine at 949.824.8656 or visit [www.ucihealth.com/joslin](http://www.ucihealth.com/joslin).



**Joslin Diabetes Center**

at UNIVERSITY of CALIFORNIA • IRVINE



### Preparing for Surgery – Mind, Body, Spirit (Twice Monthly)

Learn how to prepare before surgery. Includes anesthesia choices, pain management strategies, relaxation techniques, and what to expect at the hospital before, during and after surgery. Cost: Free to all.  
Monday, Aug 1, 15, Sept 19, Oct 3, 17, Nov 7, 21 3-4:30 p.m.  
Location: UC Irvine Douglas Hospital, 3rd floor, room 3001

### Weight Management/Intuitive Eating (4-Session Series)

Intuitive Eating will teach you how to create a healthy relationship with your food, mind and body—where you ultimately become the expert of your own body. Cost \$80/non-UC Irvine patients.  
Thursdays, Aug 4–25 6:30-8 p.m.

### WOW – Wise Old(er) Women

Therapy group for women 65 and older experiencing depression, anxiety or difficulty adjusting to situational challenges and stressors. Group members learn to use the wisdom acquired through a lifetime of experience to improve life satisfaction and a sense of well-being. Medicare and supplemental insurance plans accepted.  
Information: 714.480.2421  
Fridays 10-11:30 a.m.  
Location: SeniorHealth Center, Pavilion IV, UC Irvine Medical Center

## SUPPORT GROUPS

All support groups are free and held at UC Irvine Medical Center, 101 The City Drive South, Orange, CA, unless otherwise noted. For a complete list, please visit [www.ucihealth.com/events](http://www.ucihealth.com/events).

### Art for the Soul

Creative techniques to foster better health while coping with cancer. No art experience required. Information: 714.456.5235  
First, third and fifth Thursday every month 10 a.m.-noon  
Location: Chao Family Comprehensive Cancer Center, 1st floor, Patient and Family Resource Center

### Bariatric Surgery Support Group

Offers support for patients before and after laparoscopic weight-loss surgery. Information: 888.717.4463 or 714.456.6185  
Third Tuesday every month 6:30-8:30 p.m.  
Location: UC Irvine Manchester Pavilion, 200 S. Manchester Ave., 2nd floor, rooms 210 and 211, Orange

### Brain Tumor Education/Support Group

For individuals diagnosed with brain tumors and those who support them. Meetings are led by a social worker. Some meetings will include a speaker. Information: 714.456.8609  
Second Monday every month 6-7:30 p.m.  
Location: Chao Family Comprehensive Cancer Center, 4th floor conference room

### Burn Survivors Support Group

Annual burn survivors' picnic  
Information: 714.456.7437  
Thursday, July 14 4-7 p.m.  
Location: Lawn in front of Shanbrom Hall, Bldg. 55  
Support group  
Information: 714.456.7437  
Thursday, Aug 18, Sept 15 Noon-1:30 p.m.  
Location: UC Irvine Douglas Hospital, 5th floor conference room 5843

### Diabetes Support Group

Open discussion on the ups and downs of diabetes self-management for those living with the disease. Family members also invited. Information: 949.824.8656  
First Monday every month 6-8 p.m.  
(No July or Sept meeting)  
Location: Gottschalk Medical Plaza, multispecialty suite, UC Irvine campus, 1 Medical Plaza Drive, Irvine

### Epilepsy Educational Support Group

Social and educational support group for adults with epilepsy, offered in collaboration with the Epilepsy Alliance of Orange County. Guest speaker at most meetings. Information: 714.557.0202  
Fridays, July 15, Sept 16 7-8:30 p.m.  
Location: Neuropsychiatric Center, conference room 101

### Inflammatory Bowel Disease Support Group

An ongoing support group for individuals with the diagnosis of Crohn's disease or ulcerative colitis. Topics may include stress management, coping strategies, alternative medicine, dating/relationships and more. Information: 714.456.7057  
First Wednesday every month 6:30-8:30 p.m.  
Location: Chao Family Comprehensive Cancer Center, 2nd floor

### Kidney and Pancreas Transplant Support Group

Education and support for those with renal disease, for dialysis patients, and family and friends. Information: 714.456.8342  
First Friday every month 2:30-3:30 p.m.

### Spanish Kidney and Pancreas Transplant Support Group

First Friday every month 1:30-2:30 p.m.  
Location: UC Irvine Manchester Pavilion, 200 S. Manchester Ave., 8th floor, classroom C, Orange

### Korean Women's Share and Care Group

Help and support for Korean-speaking women with cancer. Information: 714.456.5057  
Second Thursday every month 3-4:30 p.m.  
Location: Chao Family Comprehensive Cancer Center, 4th floor conference room

### Look Good, Feel Better

Help with appearance changes during cancer treatments. Information: 800.227.2345  
Monday, July 25, Sept 22 10 a.m.-noon  
Location: Chao Family Comprehensive Cancer Center, 4th floor conference room

### Multiple Myeloma Support Group

Information: 800.452.2873, ext. 233  
First Thursday every month 6:30-8:30 p.m.  
Location: Neuropsychiatric Center, conference room 101

### NAMI (National Alliance on Mental Illness) Support Group

Support and resources for family and friends of individuals with mental illness, to provide help in coping with their loved one's illness. Information: 714.456.5801  
First and third Tuesday every month 6-7:30 p.m.  
Location: Neuropsychiatric Center, check in at lobby reception desk

### Spinal Cord Support Group

For those recovering from spinal cord injuries. Families, friends and caregivers are also welcome. Lunch box is available. Information: 714.456.6628  
Third Tuesday every month 1-2 p.m.  
Location: Neuropsychiatric Center, Acute Rehabilitation Unit, common area

### Spanish Super Sibs Klub

Therapeutic workshop for children ages 8–12 with siblings who have special needs, including chronic illness, developmental delay, medical needs or cognitive issues. Information & registration: 714.456.5395  
Third Saturday every month 9:30 a.m.-noon  
Location: Neuropsychiatric Center, conference room 101

### Support for People With Oral, Head & Neck Cancers (SPOHNC-UCI-Orange)

Information: 714.456.5235  
Monday, July 11, Aug 1, Sept 12 6:30-8 p.m.  
Location: Chao Family Comprehensive Cancer Center, 3rd floor, Breast Health Center

### Trigeminal Neuralgia Association Support Group

Information, education and support for patients and their families living with TN and related facial pain conditions. Guest speaker at every meeting. Information: 714.730.1600  
Fourth Saturday every other month  
July 23, Sept 24 1-3 p.m.  
Location: 2nd floor above medical library, rooms 2105, 2106

### Women's Share and Care Group

Support and education for women with cancer. Information: 714.456.8609  
Second and fourth Tuesday every month 10-11:30 a.m.  
Speaker on fourth Tuesday  
Location: Chao Family Comprehensive Cancer Center, 4th floor conference room

### Spanish Women With Gynecological Cancer

Information: 714.456.7934  
Third Tuesday every month 6-7:30 p.m.  
Location: Chao Family Comprehensive Cancer Center, 1st floor, Resource Center

### Young Women's Thriving and Surviving Support Group

Started by two young women who have overcome breast cancer, this educational group is for women 18 to 45 surviving any type of cancer. Information: 714.456.7057  
Second Monday every month 6:30-8:30 p.m.  
Location: Gottschalk Medical Plaza, UC Irvine campus, 1 Medical Plaza Drive, Irvine



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333 City Blvd. W., Suite 1250  
Orange, CA 92868-2990  
[www.ucihealth.com](http://www.ucihealth.com)

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