BLOCKING DRUG-RESISTANT HYPERTENSION AT ITS SOURCE

LASER LIGHT TRIAL OFFERS HOPE FOR PANCREATIC CANCER PATIENTS

UCI Health
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SUMMER 2026

live well

EXCEPTIONAL HEALTHCARE FOR SOUTHERN CALIFORNIA

A Lifesaving Exchange

A woman was able to get a kidney transplant because her husband donated his to another.

A LEGACY OF IMPACT. A FUTURE OF POSSIBILITY.

Fifty years ago, the University of California Board of Regents purchased Orange County Medical Center, laying the foundation for what would become UCI Health. What began as a single hospital has grown into one of California's leading academic health systems, united by one mission: Discover. Teach. Heal.

Today, more than 14,000 co-workers serve millions of people across our region, advancing our mission through exceptional patient care, education and research.

Most recently, through a unique partnership we opened the UCI Health — Irvine Rehabilitation Hospital, strengthening our ability to care for patients recovering from complex injuries, strokes, burns, cancer and other life-changing conditions. It also has a dedicated area for inpatient cancer rehabilitation — a first for the region.

As Orange County's only academic health system, we combine leading-edge research, education and patient care to bring our communities new treatments, innovative clinical trials and highly specialized care that isn't available everywhere. That commitment is reflected throughout this issue of *Live Well*.

In this issue, you'll meet patients whose lives have been transformed through innovative transplant care, groundbreaking clinical trials and multidisciplinary programs designed to improve health at every stage of life and demonstrate our unique model of care, which organizes our clinical experts around the patient throughout their care journey.

Together, these stories demonstrate how our physicians, researchers and care teams continue to advance medicine while delivering compassionate, personalized care.

Looking ahead also means being responsible stewards of the future. From the opening of the nation's first all-electric acute care hospital to advancing environmental sustainability across our operations, we're making investments that will benefit our patients and communities for generations to come.

As we celebrate this milestone, we're proud of what generations of physicians, nurses, researchers, educators and co-workers have built together. More importantly, we're focused on what's next — continuing to expand access to exceptional care, advance discovery and improve the health of the communities we serve.

Sincerely,

Chad T. Lefteris, FACHE
President and Chief Executive Officer
UCI Health

UCI Health

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SUPPORT UCI HEALTH

As Orange County's only academic health system, we are pushing the frontiers of lifesaving research while improving health and wellness in our community and beyond.

We cannot succeed without you. Please consider becoming an active partner in charting our future path.

With your support, we will make new medical breakthroughs, redefine patient care, educate the next generation of health professionals, and promote physical and mental well-being in our communities.

To make a gift supporting UCI Health or the research of our clinicians and scientists, to thank a caregiver or to honor a loved one's memory, email supporthealth@uci.edu, call 714-456-7350 or visit ucihealth.org/giving

USING LASER LIGHT TO TREAT INOPERABLE PANCREATIC TUMORS

WRITTEN BY NANCY SOKOLER STEINER

Pancreatic cancer has one of the lowest survival rates of all cancers. One reason is that for the 50% of patients with localized cancer (cancer that hasn't spread), two-thirds of them are not candidates for surgery. This is usually because their tumors wrap around major arteries that deliver blood to the abdomen, and surgery would risk damaging them.

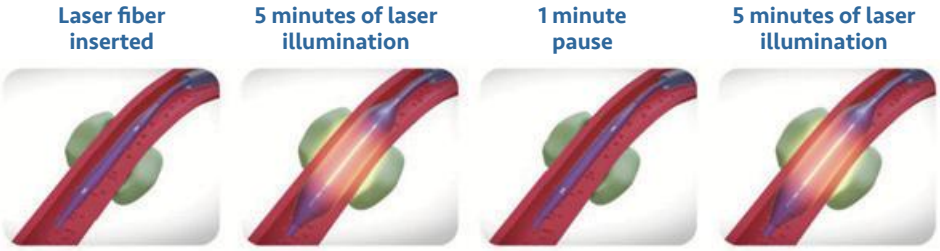
UCI Health interventional radiologist Dr. Nadine Abi-Jaoudeh hopes to change that. She is leading a first-in-human, phase 1 clinical trial using targeted laser light to activate a drug that destroys much of the tumor around the vessel, allowing surgical removal of the remainder.

"First, we inject the patient with a light-sensitive drug," she explains. "Then we insert a balloon into the tumor-encased blood vessel. Inside the balloon is a laser. When we turn it on, that activates the drug, killing the tumor surrounding the vessel."

UCI Health is one of only two U.S. cancer centers testing this potentially lifesaving approach. So far, six patients have received the treatment. Four of them had their tumors surgically removed, and three of those four showed no evidence of cancer cells at the surgical margins.

"This is a significant finding because patients with localized cancers who cannot undergo surgery have similarly low survival rates as patients with metastasized pancreatic cancer," says Abi-Jaoudeh, a professor of radiology at the UC Irvine School of Medicine.

Called vascular-targeted photodynamic therapy (VTP), the light treatment is delivered in two increments of five minutes each after participants have been injected with the drug padeliporfin. Patients then must spend three days in a dark room because exposure to light could cause damage to other areas, like the skin.



A light-sensitive drug, padeliporfin, is infused intravenously. A balloon is placed in the artery and inflated with a laser in the middle, which emits light and activates the drug. This kills the tumor surrounding the vessel and enables the surgeon to remove the rest.

That's why this approach isn't used to treat larger areas. Although tissue destruction begins immediately, the team waits two weeks before surgically removing the tumor's remains.

Abi-Jaoudeh is testing three incremental doses of laser illumination over the course of the trial to determine the most effective one. She says it is hard to estimate how soon the treatment could potentially become available to the public.

"If we're able to confirm that this approach works, we hope to move to the next phases of the trial," she explains. "If approved for further testing by the U.S. Food and Drug Administration, phase 2 and phase 3 trials would test VTP therapy in significantly more patients."

Abi-Jaoudeh was approached to lead the trial by the sponsor, ImPact Biotech, because of her expertise and that of the institution's multidisciplinary pancreatic cancer team. She also is one of the few physicians to use minimally invasive, non-thermal tumor ablation techniques for other types of pancreatic tumors.

The UCI Health Chao Family Comprehensive Cancer Center's pancreatic cancer specialists include her co-investigators: medical oncologist Dr. Jennifer B. Valerin and surgeons Dr. David K. Imagawa and Dr. Zeljka Jutric. The cancer center's full range of medical and surgical expertise also enables more comprehensive management of trial participants.

"In communities that don't have this level of expertise, once a patient is diagnosed with the nonoperable kind of pancreatic cancer, physicians and patients reasonably tend to give up," says Abi-Jaoudeh. "But there are a lot of solutions being worked on, like this one, to get these patients to surgery and ultimately cancer-free. We are advocating for better options and trying to get the word out to patients."

Learn more at ucihealth.org/pancreatic-cancer-trial

FIRST IN-HUMAN NEURAL STEM CELL THERAPY TESTED IN GROUNDBREAKING HUNTINGTON'S DISEASE TRIAL

UCI Health, the clinical enterprise of the University of California, Irvine, has launched the world's first in-human embryonic stem cell-derived clinical trial for Huntington's disease. The phase 1b/2a trial conducted by the UC Irvine Alpha Clinic, the clinical arm of the Sue & Bill Gross Stem Cell Research Center (SCRC), will evaluate the safety of the pluripotent neural stem cells, which are delivered to the brain with a precision 3D neurological mapping and targeting system.

The first patient was treated in May at UCI Health — Irvine. Neurosurgeon Dr. Jefferson W. Chen delivered the cell therapy in an MRI suite. A second patient is slated for treatment this summer.

The trial, called REGEN4HD, is the result of years of basic and translational science funded by the California Institute of Regenerative Medicine and carried out by a research team led by Leslie M. Thompson, PhD, co-director of the SCRC.

"This clinical trial highlights the important role that an interdisciplinary academic and clinical team, together with the Huntington's disease families, plays in advancing medicine," says Thompson, the clinical trial sponsor and Donald Bren Professor of psychiatry and human behavior and of neurobiology and behavior.

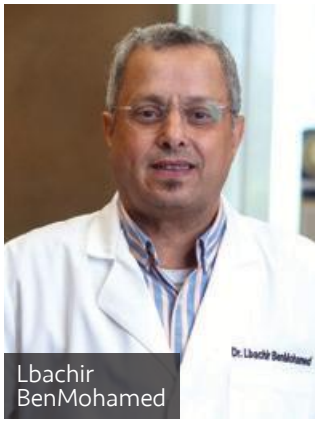
Dr. Michael J. Stamos

SCHOOL OF MEDICINE DEAN NAMED INTERIM VICE CHANCELLOR OF HEALTH AFFAIRS

UC Irvine Chancellor Howard Gillman has appointed Dr. Michael J. Stamos as interim vice chancellor of UC Irvine Health Affairs. Stamos will continue to serve as dean of the UC Irvine School of Medicine. He succeeds Dr. Steve A.N. Goldstein, who is now president of the University of New Mexico and its health system.

Stamos joined the medical school in 2002 and established the Division of Colon and Rectal Surgery within the Department of Surgery. He became department chair in 2010 and was named dean of the medical school in 2017.

Under his leadership, the school has steadily climbed in national research rankings and earned the highest accreditation possible from the Association of American Medical Colleges and the American Medical Association Liaison Committee on Medical Education. It has more than doubled its fundraising, greatly increased its research funding, developed new mission-based educational programs, substantially enlarged its full-time faculty and expanded its applicant pool.



Lbachir BenMohamed

IMMUNOLOGIST AWARDED $3.9 MILLION TO HELP PREVENT GENITAL HERPES

The National Institutes of Health awarded UC Irvine immunologist Lbachir BenMohamed, PhD, $3.93 million to test a novel therapeutic vaccine designed to prevent recurrent genital herpes, a lifelong viral infection that affects more than 60 million Americans and over 530 million people worldwide.

The five-year R01 award will support research on a next-generation vaccine to provide long-lasting protection against recurrent outbreaks of herpes simplex virus type 2, the leading cause of genital herpes. The project builds on years of research by BenMohamed and his collaborators.

"This award allows us to advance an innovative immune-based strategy that not only boosts protective T cells but directs them to the tissues where the virus hides and reactivates," says the professor of immunology and director of the UC Irvine School of Medicine's Laboratory of Cellular and Molecular Immunology.

ANTI-CANCER CHALLENGE FUNDS DOZENS OF NEW RESEARCH PROJECTS

The UC Irvine Anti-Cancer Challenge has awarded more than $1.6 million in grant funding for 35 new and innovative research projects at the UCI Health Chao Family Comprehensive Cancer Center and its pediatric cancer affiliate, Rady Children's Health.

Funds raised at the ninth annual walk, run and ride event in October 2025 will support the pilot projects and early-phase clinical trials. That brings the total of investigator-initiated projects to 190 since 2017, when Orange County's premier run, walk and ride community fundraising event was founded.

Dr. Richard A. Van Etten, director of the cancer center and Anti-Cancer Challenge founder, noted the scientific progress made possible by community support for the event, which will be celebrating its 10th anniversary on Oct. 10.

"It has succeeded beyond my wildest dreams in what we've been able to accomplish with funds raised by the participants," Van Etten said at the Anti-Cancer Challenge kickoff event in June.

UCI HEALTH RECOGNIZED FOR ENVIRONMENTAL SUSTAINABILITY

Practice Greenhealth honored UCI Health with its Top 25 Environmental Excellence Award for a second time, placing it among North America's top health systems in the healthcare sustainability movement. It's the fifth consecutive year the organization has honored the academic health system.

The competitive Top 25 recognition is given to the highest scoring and highest performing of the more than 400 health organizations and 700 facilities that submit a Partner for Change application in the United States and Canada.

"This recognition from Practice Greenhealth reflects the meaningful progress we are making and our commitment to leading by example as healthcare organizations work to build a more sustainable future," says Chad T. Lefteris, president and CEO of UCI Health.

UCI Health also received two Circle of Excellence Awards for Energy and Transportation. UCI Health — Placentia Linda received an Energy Circle of Excellence Award and the Greenhealth Champion Award, which honors individual hospitals that deliver superior sustainability performance.

Additionally, UCI Health received *Healthcare Design* magazine's HCD 10 Outstanding Organization award, lauding the health system for approaching "environmental stewardship through the lens of patient health, community resilience and operational performance."

Once Greg Patterson donated a kidney through the Living Donor Program, his wife, Karen, seated, received what she calls her "Willy Wonka golden ticket" for a matching donor kidney.

Gift of a Lifetime

A husband donated his healthy kidney to a stranger so his wife could receive one to save her life.

WRITTEN BY LAUREL DIGANGI
PHOTOGRAPHED BY MICHAEL NEVEUX

When Karen Patterson was diagnosed at age 28 with the initial stages of polycystic kidney disease, she was concerned but not surprised. Her father was suffering from life-threatening health issues caused by the genetic disorder, and she had a 50% chance of inheriting it.

Patterson learned everything she could about the condition. "Because I still had 80% kidney function, I knew I had time," she says. "I had regular checkups and lived my life."

The symptoms of polycystic kidney disease (PKD) appeared gradually and progressed over the decades, starting with elevated blood pressure. By age 35, fluid-filled cysts had developed on and inside her kidneys — a hallmark of the disease. By her 50s, the cysts grew larger and often ruptured, causing pain and dangerous infections that severely affected her quality of life.

"I was at Disneyland with my grandkids when I suddenly started to feel out of breath," she says. "My ankles were swollen to the size of my knees. I had to be pushed in a wheelchair."

Alarmed, she feared her kidneys might soon fail and she would need a transplant or dialysis. Her husband, Greg Patterson, a director of billing and planning for a medical equipment company, had vowed early in their relationship to donate his kidney to her. Then he learned he was not a blood or tissue match.

However, through the UCI Health Living Donor Program and the National Kidney Registry, Greg was able to donate one of his kidneys to a matching recipient with end-stage kidney disease. His donation enabled Karen to receive a healthy kidney from a matched donor in the Midwest whose wife needed a kidney.

EXPANDING LIVING DONOR OPTIONS

UCI Health and its Living Donor Program is one of only 11 National Kidney Registry member centers in California. In recent years, the registry has created many options for living donor matches through paired exchanges, vouchers and other programs.

When nephrologist Dr. Uttam G. Reddy first joined the UCI Health Kidney Transplant Program in 2015, its surgical team performed about 40 transplants a year. In 2025, the team performed 233 — a five-fold increase in the number of patients they were able to help. Reddy, medical director of the program, expects the number of kidney transplants to continue to rise. Unfortunately, about 2,000 people in Orange County alone need a transplant.

"If more people step forward to be living donors, we can save lives by closing the gap on how long patients have to wait to get a kidney transplant," he says.

As Karen continued to monitor her worsening kidney function, she was dealt another blow. In 2019, at age 60, the retired medical assistant was diagnosed with breast cancer. She worried that cancer treatment might affect her ability to receive a future transplant. The leader of her PKD support group at a Lake Forest church suggested she contact Reddy, who had spoken to their group previously.

"I wasn't even his patient, and he spent 20 minutes helping me figure out how to get through this," Karen recalls.

Reddy told her that if she had a lumpectomy, she would likely be put on medication that would make her ineligible for a kidney transplant. After consulting with her oncologist, she opted to have a double mastectomy and reconstructive surgery.

Through her support group, Karen learned about the national registry and also became Reddy's patient.

She also discovered that kidney

disease patients didn't have to wait until they were on dialysis to be eligible for a transplant — a common misconception. Instead, she could join the kidney registry database once her kidney function, known as the glomerular filtration rate, had dropped to 20%.

FEWER COMPLICATIONS, BETTER OUTCOMES

"This option, called a preemptive transplant, is best," says Reddy. "When the patient is not yet on dialysis, there are fewer complications and better outcomes."

Greg had always accompanied Karen to her PKD support group meetings, conferences and doctor appointments. When he learned that he could still be a donor through the registry's paired exchange program, he was all in.

"The first thing they do is weigh you to see if you're a candidate," he says. "I lost 60 pounds, and I've stayed there."

Greg also underwent extensive medical tests to ensure he was healthy enough to donate. They revealed that he had an unusual kidney anatomy.

"Both his kidneys had three renal arteries instead of one, which is rare," says UCI Health transplant surgeon Dr. Hirohito Ichii. "That increased the risk of complications."

Greg underwent surgery to remove one of his healthy kidneys in October 2024. Although Ichii needed more time to complete the procedure because of the multiple arteries, it was a success. The healthy kidney was quickly flown to Northern California, where it was matched with a woman awaiting a deceased donor organ.

Greg bounced back quickly from the surgery. "Three or four days later, I felt pretty good. And after two or three weeks, I was back to where I was before."

Rather than have her kidney transplant at the same time as Greg's, Karen decided to wait until her husband was fully recovered and able to care for her after her surgery. She applied for a registry voucher, which she calls her "Willy Wonka golden ticket, good for one kidney."

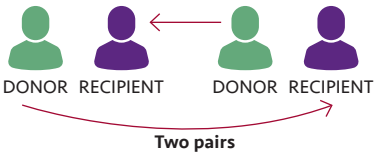
Six months later, in April 2025, when

BECOMING A LIVING DONOR

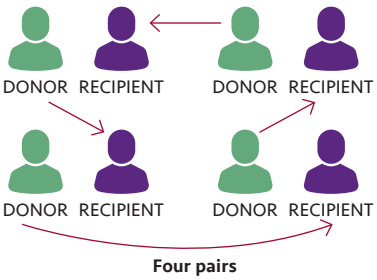
Deceased donor kidneys are a good option for patients with renal failure, but kidneys from living donors have many advantages. The patient may have a shorter wait, the donated kidney may last longer and the surgery can be scheduled when both donor and patient are at their healthiest, says transplant surgeon Dr. Christina Papageorge, who co-directs the UCI Health Living Donor Program with nephrologist Dr. Antoney J. Ferrey.

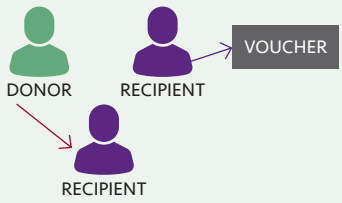
Donor options include:

- **Direct donation** — A person donates their healthy kidney, which is transplanted into a matched recipient.

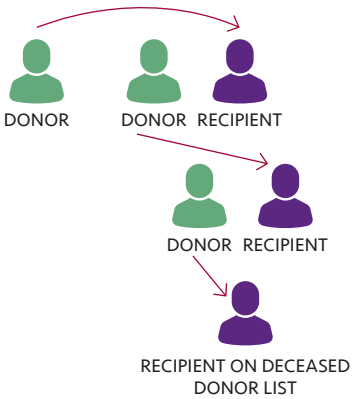


- **Paired exchange** — The kidneys of two donors are removed, then transplanted into their designated compatible recipients. This can include more than one pair, creating a loop of donors and recipients.





- **Voucher donation** — This paired-exchange option allows a donor to choose when to undergo surgery. The designated recipient gets a voucher for a matched kidney from a living donor in the U.S. registry database.



- **Altruistic donation** — A donor without an intended recipient can donate a kidney to a matching patient on the national waiting list.
- **End chain to waitlist** — An altruistic donor can initiate a living donor kidney transplant chain. The extra donor at the end of the chain is then matched with a patient at the top of the deceased donor wait list.

Greg and Karen Patterson give their thirsty pups, Zoey and Leo, a water break at Lago Santa Margarita's doggie fountain.

her kidney function had dropped to 17% and a matching donor was identified, she redeemed the voucher.

A SURGICAL CHALLENGE

Ichii says Karen's surgery also presented a unique problem. Typically, a patient's failing kidneys are left in the body during transplantation. Because her kidneys were unusually large and cystic, the surgeon removed them to make room for her healthy donor kidney and decrease the risk of further infections.

"At one point in the hospital, I was hooked up to four poles with nine infusion bags hanging from them. It was all kind of a blur," says Karen, who had a lengthy and more difficult recovery than Greg. "What I do remember is the kindness of everyone who cared for me. The whole UCI Health Kidney Transplant Program — all the nurses, doctors, the whole experience — couldn't have been any better."

After a six-month waiting period, organ donors and recipients are allowed to contact each other if both agree. Karen and her donor have established an email friendship.

"He's a lovely man, and his wife, who also got a donor kidney, is doing well," she says.

Now 66, Karen is thriving with 98% kidney function. "People tell me that they'd never know I'd ever had anything wrong, that I look incredibly healthy," she says.

Reddy says kidney transplantation is truly transformative. "You see people's lives change overnight. As our program grows, one of our goals is to have a standalone clinic where pre- and post-transplant patients can come for all their transplant needs."

A CLOSER BOND

Before her transplant, Karen and Greg often had to cancel travel plans due to her illness. "Greg was always good-natured about it and put my health and comfort first," Karen says.

They now enjoy short day trips with their dachshund mix, Leo, and "crazy" Chihuahua, Zoey. A trip to Big Bear is coming soon.

"My recovery took about a year, and I'll be on antirejection medicines for the rest of my life," she says. "But I'm so active now and feeling much better."

Today Karen volunteers with Local Love, a ministry at her church that distributes donations of food, new clothing and toys to local families in need. Greg is grateful to see her healthy and happy.

"Because donating an organ is a lifetime decision you make for the other person," he says, "the surgeries have drawn us even closer." ■

Learn more at ucihealth.org/kidney-transplant

UCI Health gynecologist Dr. Rebecca M. Sauer believes women deserve high-quality, evidence-based care for symptoms of perimenopause and menopause.

CONFRONTING THE SYMPTOMS OF MENOPAUSE

Women need comprehensive, collaborative care to promote longevity and quality of life.

WRITTEN BY NANCY SOKOLER STEINER
PHOTOGRAPHED BY REMY HAYNES

Each year, an estimated 1.3 million U.S. women reach menopause, and another 2 million will enter perimenopause as their body's estrogen levels begin to wane. One in three women over age 40 experiences severe symptoms but receives limited help from their doctors. UCI Health gynecologist Dr. Rebecca M. Sauer aims to change that with the Comprehensive Menopause Program, launching this fall.

Sauer and gynecologist Dr. Donna G. Baick, both menopause-certified physicians, are enlisting a range of specialists to offer coordinated care to address patients' symptoms and promote longevity and quality of life. Sauer spoke with *Live Well* about the importance of providing specialized care for this phase in every woman's life.

What are your goals with this program?

We want to create a space for women to feel comfortable speaking about their symptoms and to know they'll receive evidence-based treatment options. We also want to educate primary care providers and community physicians about midlife issues and include them as part of the curriculum for medical students and residents. As Orange County's only academic health system, we already collaborate with subspecialists who have expertise in women's health.

Our network of UCI Health colleagues includes cardiologists specializing in women's heart health, endocrinologists focusing on osteoporosis and bone health, urogynecologists and urologists who address bladder and pelvic floor issues, and a reproductive health psychiatrist. We also have breast specialists, neurologists and experts in obesity and integrative medicine. By assessing each woman's unique symptoms and health risks, we can develop tailored, proactive strategies.

What are the stages of menopause?

Women reach menopause when they have experienced 12 months without a menstrual period due to natural causes, rather than from surgery, medication or other therapies. The

Sauer, conferring with medical assistant Samantha Figueroa, works with fellow UCI Health specialists to address her patients' unique symptoms with proactive treatment strategies.

median age of menopause for U.S. women is 51, but it can occur anywhere from the early 40s to early 60s. Menopause is preceded by perimenopause when the body's estrogen levels start to decline. During this time, menstrual cycles may fluctuate by weeks or months. As with pregnancy, how women experience perimenopause and menopause can vary.

What are the most common symptoms you see in your patients?

About 85% of women experience symptoms that affect their quality of life. The most common are hot flashes and night sweats. Many women also suffer with sleep disturbances and mood changes, such as anxiety, depression and irritability. We also see urogenital symptoms such as urinary urgency and vaginal dryness resulting in painful intercourse, as well as joint pain and brain fog.

What about weight gain and the so-called "menopause belly"?

With age, the body's metabolism slows down in both women and men, which can lead to weight gain. In women, changes in estrogen receptor activity tend to drive added weight to the midsection. Many women also undergo immense stress during perimenopause and menopause, making it harder to lose weight. When we can improve their sleep and quality of life, they often find it easier to lose or at least stabilize their weight.

How do you treat menopause symptoms?

First, we rule out other medical conditions, such as autoimmune disease, thyroid disorders or vitamin deficiencies that may contribute to their symptoms. Nonmedical approaches such as cognitive behavioral therapy may help some women, as do yoga and acupuncture. Omega-3 supplements have been shown to help with mood swings.

The U.S. Food and Drug Administration recently removed warning labels on menopause hormone therapy (MHT) products, typically estrogen and progesterone. They can help relieve hot flashes, night sweats and sleep and mood problems. We use bioidentical hormones — chemically identical to what the body naturally produces.

Women who've had a hysterectomy don't need progesterone. Women who have been diagnosed with hormone-positive cancer, particularly breast cancer, or who have a history of blood clots should consult their medical oncologist or cardiologist.

Why was MHT discouraged for so many years?

Large studies in the early 2000s linked MHT to a higher risk for breast cancer, but they were conducted on menopausal women in their 60s and 70s. They didn't look at perimenopausal women. Also, the hormones used then were different from the bioidentical ones we prescribe today.

Research now shows that the risk of adverse effects from MHT is lower in women whose final menstrual period occurred within the last 10 years. Smaller studies also suggest that the breast cancer risk may be much lower than originally thought.

That said, I advise women to continue regular breast cancer screening with mammograms. MHT does carry a slight increase in risk for blood clots, stroke and pulmonary embolism. But the risks are lower when estrogen is applied by patch, gel or spray. Conversely, MHT can help prevent osteoporosis, slightly lower the risk of colon cancer and reduce urinary tract infections.

What else should women know about menopause?

Women know their bodies best and they should feel confident in seeking help for their symptoms. Menopause is individualized — someone else's journey is not your own. Know that your symptoms are real and find a healthcare provider who listens to you. ■

Learn more about the physician at ucihealth.org/rebecca-sauer

Before cheering on their favorite team, Anaheim Ducks fans gather outside the Honda Center to visit UCI Health booths at Health & Wellness Night.

Dr. Robert Redfield is interviewed by Ducks reporter Alyson Lozoff.

The team honored U.S. Marine vet and emergency room nurse Kyle Hanson (top) here with his wife, Arica, and children.

Left to right, Anaheim Ducks senior vice president Merit Tully, Xenia Morales, Dr. Uttam Reddy, Nadia Morales and team mascot Wild Wing.

Anaheim Ducks broadcaster Aaron Cooney interviews Dr. Christina Papageorge.

PHOTOS COURTESY OF THE ANAHEIM DUCKS AND UCI HEALTH

HEALTH AND WELLNESS NIGHT WITH THE ANAHEIM DUCKS

UCI Health and the Anaheim Ducks celebrated Health & Wellness Night on March 30 at the Honda Center, where UCI Health co-workers held a health fair at the Puck Drop Patio.

The evening's Community Spotlight honorees were sisters Xenia Morales and Nadia Morales and their nephrologist, Dr. Uttam Reddy, medical director of the UCI Health Kidney Transplant Program. He has managed their care since 2014, when one of Nadia's kidneys was transplanted into Xenia to save her life.

UCI Health kidney transplant surgeons Dr. Robert Redfield and Dr. Christina M. Papageorge were also interviewed about the need for living donors like Nadia Morales to save the lives of more than 700 UCI Health patients awaiting a kidney transplant.

The Ducks also paid tribute to Kyle Hansen, a UCI Health emergency registered nurse and Marine Corps veteran, in a Salute to Those Who Serve, while other UCI Health co-workers rode Zamboni ice resurfacing machines onto the rink during intermissions.

PHOTOS COURTESY OF THE CROHN'S & COLITIS FOUNDATION

The UCI Health exhibit's "inflatable colon" promotes awareness of colon health and the importance of colon cancer screenings.

TAKING STEPS TOWARD CURES

On May 9, UCI Health joined the Crohn's & Colitis Foundation to help raise funds for inflammatory bowel disease research and to raise awareness about screening guidelines and the rising incidence of colorectal cancer among adults under 50. The UCI Health exhibit featured an "inflatable colon" — a walkthrough, large-scale model of the digestive tract designed to make complex medical concepts more accessible.

GUN VIOLENCE AWARENESS

UCI Health co-workers, Orange County elected officials and community organizations came together on June 5 in recognition of National Gun Violence Awareness Day to raise awareness about the growing number of gun violence-related injuries and deaths. UCI Health — Orange treated 99 firearm-related injuries in 2025, underscoring the importance of local organizations working together to help reduce gun violence.

Flags are raised for National Gun Violence Awareness Day.

Orange flowers and ribbons honor victims.

PHOTOS BY KELLY GREEAR

Attendees gather at UCI Health — Orange to mark Gun Violence Awareness Day. Orange is worn by hunters to protect themselves and symbolizes the lives lost by gun violence.

A volunteer at Stop the Bleed training demonstrates how to limit blood loss at the scene of a trauma.

HEALTH CLASSES

Our classes can help improve your well-being and prevent disease. Most are free, but some do have fees. Registration is required. Classes are held online via Zoom except where noted.

Visit ucihealth.org/events or call 657-282-6357 for more information.

ADVANCE DIRECTIVES
Sept. 1, Oct. 6, Nov. 3, Dec. 1 | 12:30–1:15 p.m.

BREASTFEEDING
Sept. 3, Oct. 1, Nov. 5, Dec. 3, Jan. 7 | 6–9 p.m.

DIABETES OVERVIEW
Sept. 30, Oct. 28, Nov. 18, Dec. 8 | 3:30–4:30 p.m.

HEALTHY LIVING SERIES
Sept. 8, 22; Oct. 6, 20; Nov. 3, 17; Dec. 1, 15, 29 | English 3–4 p.m., Spanish 10–11 a.m.
Register for English classes at 714-456-7514.
Register for Spanish classes at 714-456-3739.

LIVING WELL WITH HEART FAILURE
Sept. 8, Nov. 10, Jan. 12 | 3:30–4:30 p.m.

NEWBORN CARE
Sept. 10, 21; Oct. 8, 19; Nov. 12, 16; Dec. 10, 14 | 6–9 p.m.

PRENATAL PELVIC FLOOR WORKSHOP
Sept. 26, Nov. 14 | 1–2 p.m.
In-person, 200 S. Manchester Ave., Suite 120, Orange

CHILDBIRTH PREPARATION SERIES
Sept. 9, 16, 23, 30; Oct. 14, 21, 28 & Nov. 4; Nov. 18, 25 & Dec. 2, 9 | 6–8 p.m.
In-person: 11190 Warner Ave., Suite 214, Fountain Valley

PLANT-BASED COOKING WORKSHOP
Nov. 6 | Noon–1 p.m.

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PREPARING FOR SURGERY — MIND, BODY AND SPIRIT
Sept. 7, Oct. 6, Nov. 2, Dec. 7, Jan. 4 | Noon–1:30 p.m.

STROKE PREVENTION
Sept. 30, Nov. 25, Jan. 27 | 4–5 p.m
Register at 866-STROKE-3 (866-787-6533).

FIND HELP WORKSHOP SERIES
Sept. 24, Oct. 29 | Noon–1 p.m.

WEIGHT LOSS & BARIATRIC SURGERY
Sept. 15, Oct. 20, Nov. 17, Dec. 15, Jan. 19 | 6–7 p.m.

EVENTS

UCI Health and UC Irvine are proud to sponsor these free community events and lectures on a variety of health topics.

UC IRVINE ANTI-CANCER CHALLENGE

Oct. 10 | Run, ride or walk in the 10th annual Anti-Cancer Challenge to raise funds for vital research at the Chao Family Comprehensive Cancer Center. Activities begin at 6 a.m. at Aldrich Park on the UC Irvine campus. To learn more, visit anti-cancerchallenge.org and join the challenge.

MEDICINE IN OUR BACKYARD NEWPORT BEACH LIBRARY LECTURES

Sept. 22 | Understanding hearing loss and the latest treatment options — Hamid R. Djalilian, MD
Oct. 13 | What else can I do?: Integrative whole-person cancer care — Gary E. Deng, MD, PhD
Nov. 17 | Age-related macular degeneration: Changes in vision and long-term prevention — Andrew W. Browne, MD, PhD

Presentations begin at 7 p.m. at the Newport Beach Central Library, 1000 Avocado Ave., Newport Beach. Doors open at 6:30 p.m. Q&A will follow the doctor's lecture. Visit nbplf.foundation/programs/medicine-in-our-backyard to register for these free talks.

UCI HEALTH — FOUNTAIN VALLEY COMMUNITY LECTURE

Oct. 9 | Protecting your brain health — Nirav Patel, MD

The lecture begins at 1 p.m. at the Center at Founders Village Senior & Community Center, 17967 Bushard St., Fountain Valley. Registration is required. Visit ucihealth.org/FV-lectures to register.

UCI HEALTH — PLACENTIA LINDA COMMUNITY LECTURE

Nov. 18 | Helping your child stay healthy this winter — Andrew Lee, MD

The presentation begins at 2 p.m. at the Yorba Linda Public Library Community Room, 4852 Lakeview Ave., Yorba Linda. Registration is required. Visit ucihealth.org/PL-lectures to register.

GAVIN HERBERT EYE INSTITUTE COMMUNITY LECTURES

Sept. 1 | What you need to know about contact lenses — Joseph Bui, OD
Oct. 6 | Oculoplastics: Sags and bags — Seanna Grob, MD
Nov. 10 | Living with vision loss — Karen Lin, OD; Nilima Tanna, OT
Dec. 1 | How to take care of your child's vision — Charlotte Gore, MD

Visit ophthalmology.uci.edu/events to register for the 7 p.m. online lectures. Email ghei@uci.edu to learn more.

SUE & BILL GROSS STEM CELL RESEARCH CENTER LECTURES

Sept. 15 | Fine-tuning brain tissue to model neurological disorders — Momoko Watanabe, PhD, and Raymond Wang, MD
Oct. 6 | The future of stem cell therapy: A Stem Cell Awareness Day presentation — Aileen Anderson, PhD
Nov. 3 | Harnessing sweetness to treat cancer and autoimmunity — Michael Demetriou, MD, PhD, and Paresh Purohit, PhD
Dec. 1 | Neural stem cell trials for traumatic brain injury: Past, present and future — Brian Cummings, PhD, and Jefferson Chen, MD, PhD

Presentations, which are subject to change, begin at 7 p.m. in Gross Hall, 845 Health Sciences Road, Irvine. Visit www.bit.ly/UCI-SCRCEvents or email scrcdirector@hs.uci.edu to register.

SUPPORT GROUPS

To learn more about our support groups, call or email the contacts listed below or visit ucihealth.org/events

ADVANCED HEART FAILURE & VAD
714-456-7514

ATAXIA SUPPORT
rmardiro@hs.uci.edu

BARIATRIC SUPPORT
alisont3@hs.uci.edu

BURN SURVIVORS
714-456-7437

CHRONIC LYMPHOCYTIC LEUKEMIA
tevans@cllsociety.org

DEMENTIA CAREGIVERS
949-814-4793

DIABETES SUPPORT
ttvo4@hs.uci.edu

FACIAL PAIN ASSOCIATION
octnafpa@yahoo.com

KOREAN WOMEN'S CANCER SUPPORT
714-875-4658

MASTECTOMY SUPPORT
949-518-5124 or vbassili@hs.uci.edu

NEW MOTHER SUPPORT
ttvo4@hs.uci.edu

OSTOMY ASSOCIATION
714-637-7971

PANCREATIC CANCER
949-814-4784

PARKINSON'S DISEASE
parkinsonsgroup@hs.uci.edu

STEM CELL TRANSPLANT
vzamora@hs.uci.edu

STROKE SUPPORT
866-STROKE-3 (866-787-6533)

TRAUMATIC BRAIN INJURY
traumainjuryprevention@hs.uci.edu

YOUNG ADULT CANCER
caps@hs.uci.edu

Dr. Thomas Cesario, outside UCI Health — Irvine, is thrilled that the long-held dream of a hospital on the university campus has finally come true.

Photo by Tameka Jacobs

A DREAM FULFILLED

Dr. Thomas Cesario, the longest-serving dean in the history of UC Irvine School of Medicine, was an infectious disease fellow when he arrived in 1971. At that time, doctors and trainees commuted 12 miles to the aged county hospital built in 1914 in the City of Orange. After the University of California Board of Regents acquired the hospital in 1976, he and many other faculty members lobbied hard to build a modern facility on the Irvine campus. Those hopes fizzled, but by 2006, work began on a new hospital in Orange. When it opened in 2009, he was wowed by its gleaming tower and modern technologies. But it was no match for the thrill of seeing UCI Health – Irvine, a state-of-the-art, acute care hospital, finally open on the Irvine campus on Dec. 10, 2025. Now 86, he reflects on his early days at UCI Health and the dream of so many of his long-ago colleagues now realized.

Learn more at ucihealth.org/50thanniversary

"My wife, Mary, and I drove from Boston in a 1969 Pontiac with a new baby and our 3-year-old daughter Kristen (now chair of the medical school's Department of Dermatology). We came down Interstate 5, passed Disneyland and stopped for a look at the Orange County Medical Center.

It wasn't much different than Boston City Hospital, an older hospital where I'd trained. When I started work in the summer of 1971, I looked in one of the patient rooms. It was sweltering. I saw a bedpan on a table by the window with a block of ice in it and a fan blowing behind it. I asked the nurses, 'What is that?'

'That's air conditioning,' they said. I had to laugh at their ingenuity and the humor in doing something so preposterous! Those were some very dedicated nurses. I mean, nothing else would cool the room for the patients, right?

But I was shocked to find two actual jail cells with bars and big locks on another floor. They were for jail inmates who needed to be hospitalized. Once, one of the prisoners went after someone, and a resident tackled him before he could get away. The county Board of Supervisors gave him a big award!

Another time I was working in the ER when a prisoner with a long chain came after me. An attending physician rushed him. In Boston, when police brought in prisoners, they'd sit with them the entire time.

In those early days, the hospital was struggling to survive financially. Patients with private insurance were sent to other more modern hospitals. After working there for 38 years, in 2009 we finally got a new hospital, now called UCI Health — Orange, and it was great.

But today, the new UCI Health — Irvine hospital and medical complex is beyond the wildest dreams of my generation. You have a thoroughly modern cancer center, a huge surgical floor with all the latest equipment and a spectacular hospital in a beautiful setting. You can eat your meal on a veranda and look out over the marsh. It's like paradise!

Now we're a six-hospital system! It's incredible. I think we may have more hospitals and more beds than any other medical school in the UC Health system. We fought to have this built for over 50 years. A lot of sweat and anxiety went into that. Now it's finally here."

— Dr. Thomas Cesario

For 50 years, we've been part of your life, and you've been part of ours.

Discover a legacy of impact.

Celebrating 50 Years

UCI Health

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STROKE 2026 GOLD PLUS GET WITH THE GUIDELINES

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RIDE. RUN. WALK.

TO DEFEAT CANCER

Saturday, Oct. 10 at UC Irvine

Celebrate a decade of impact at the 10th annual UC Irvine Anti-Cancer Challenge! Ride, run or walk to fund critical research aimed at saving lives with new insights into cancer prevention, treatments and cures. Every participant-raised dollar supports pilot projects and early phase clinical trials at the UCI Health Chao Family Comprehensive Cancer Center.

Register today at anti-cancerchallenge.org

10 YEARS

UC Irvine
Anti-Cancer Challenge