

Fighting Lung Disease

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Teens in Distress

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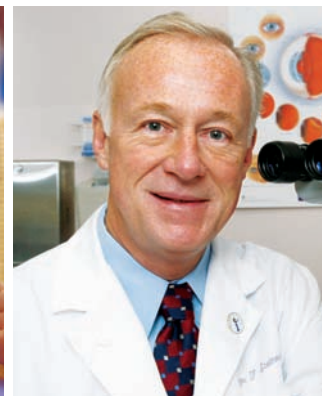
Genetic Counseling

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UCI Education Connection

④



A New Look at Cataract Surgery

⑥



Treating Brain Tumors

⑦

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FIGHTING Lung Cancer



The most effective way to improve the prognosis for lung cancer is to catch the disease before it spreads.

The very thought of lung cancer frightens most people—and for good reason.

This devastating disease claims the lives of more Americans annually than prostate, colorectal, breast, ovarian, uterine and brain cancers combined.

“Lung cancer has no symptoms in its early stages,” says **Dr. Henri Colt**, a pulmonologist at University of California, Irvine Medical Center. “As a result, only 16 percent of patients are diagnosed before the disease has spread, resulting in a high mortality rate.” Colt is a member of the medical center’s lung cancer team, which includes pulmonologists, thoracic (chest) surgeons, medical oncologists, pathologists, radiologists and radiation oncologists. The group meets weekly to discuss the best treatment plan for each patient undergoing lung cancer therapy at the medical center. Their recommendations often involve combinations of therapies, including several innovative, minimally invasive treatments.

“By the time 75 percent of patients are diagnosed with lung cancer, the disease is so advanced that

surgery isn’t an option,” says Colt. “The classic symptoms of coughing, breathing difficulties and pain usually don’t appear until the later stages. This is why early detection using low-dose spiral CT scans and bronchoscopic airway imaging is so important.” A bronchoscope is a viewing tube used to examine the respiratory tract and perform certain treatments.

If the disease is detected in the early stages, it can be cured by surgery—either open chest or minimally invasive. For advanced cases, radiation or chemotherapy can be helpful. Additionally, treatments that focus on affected parts of the body can control patients’ symptoms, improve their quality of life and extend survival. Among these targeted treatments are:

- **Brachytherapy.** This procedure consists of placing tiny sealed tubes filled with radioactive materials directly into or near a tumor. It’s often used to shrink or eliminate growths that are impacting a patient’s airway.
- **Radiofrequency ablation.** Known as RFA, this treatment entails the use of heat to eradicate abnormal tissue. An electrode-tipped tube is inserted into the tumor, destroying it from within.

- **Photodynamic therapy.** PDT combines a light-sensitive drug with laser energy to destroy cancer cells in targeted areas of the respiratory tract. PDT can eliminate small tumors growing in airways, relieving symptoms such as shortness of breath.

- **Intensity modulated radiation therapy.** IMRT involves precisely measured doses of radiation that are computer-designed to match to the exact size, shape and depth of malignant growths. It’s used to shrink tumors and reduce the pressure, pain and other symptoms of lung cancer.

- **Bronchoscopic resection and stenting.** Using a bronchoscope, doctors navigate to tumors that are obstructing airways. Then they destroy the growth with the help of a laser. Sometimes this process is followed by the implantation of a bronchial stent—a tiny, mesh tube used to keep narrowed airways open and make breathing easier.

These innovative therapies have made a positive difference in the lives of many lung cancer patients. But early diagnosis is the hope of the future. “Although 163,000 Americans will die of lung cancer this year, only two out of five people have ever talked with anyone about getting screened for the disease, according to the Lung Cancer Alliance,” says Colt. “The most effective way to improve outcomes for lung cancer is to catch the disease before it spreads.”

For referral to a UC Irvine Medical Center physician, call 1-877-UCI-DOCS or 714-456-5150.



A SMOKE-FREE ENVIRONMENT

Smoking is the No. 1 cause of lung cancer. For the health and safety of our patients, visitors and employees, UC Irvine Medical Center is now smoke free.

Toll free 1-877-UCI-DOCS

Teens in Distress

When teenagers struggle with mental health problems, can't attend school because of emotional issues, or are hospitalized for psychiatric disorders, their return to normal life can be filled with major challenges.

Finding the right level of care for these young people can be difficult for parents.

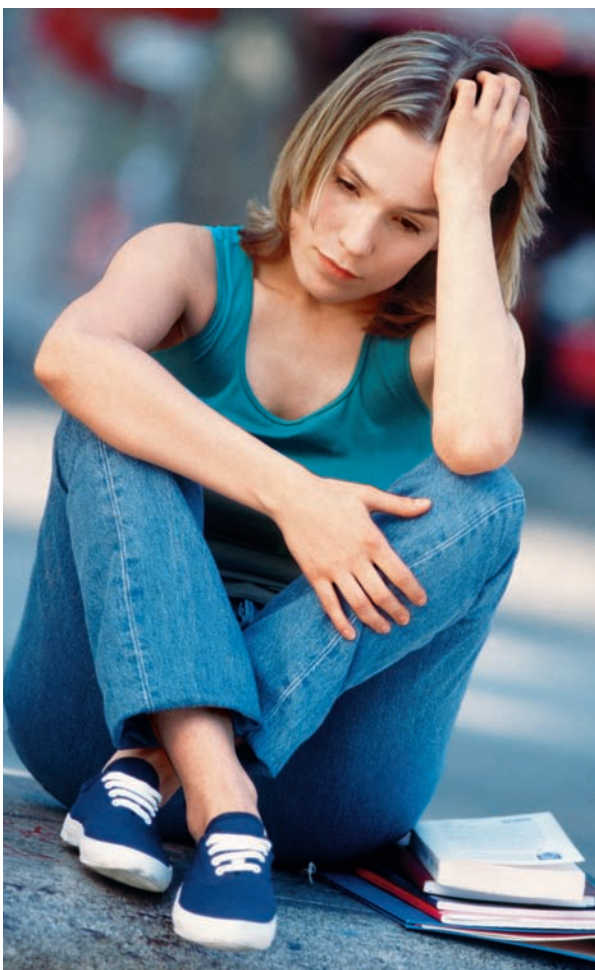
The new adolescent psychiatric partial hospitalization program at University of California, Irvine Medical Center is making the transition to

everyday life much easier for troubled teens. "Some young patients don't require 24-hour-a-day hospitalization, but still need a relatively high level of care and structure in their lives," says **Dr. Alan Hanft**, the program's medical director and a board-certified child and adolescent psychiatrist. "The program provides an appropriate level of care, acting as a bridge between hospitalization and reentry into the community. It's an important step

toward independence for young people struggling with many types of mental health issues." These include depression, anxiety, bipolar illness, psychotic episodes, eating disorders, attention-deficit-hyperactivity disorder and disruptive behaviors.

"Additionally, for some young people who don't require hospitalization, the program can act as a gateway to reentering the mainstream of life, including school," says Hanft.

Empowering patients. Here's how it works: From 8 a.m. to 5 p.m. Monday through Friday, partial hospitalization patients participate in a comprehensive program of individual, group and family therapy. At the close of each day, they return home to practice the skills they've learned, becoming progressively more self-sufficient and self-confident as time passes.



Partial hospitalization provides troubled teens with the support and structure they need to reenter the community.

Treatment plans are based on each person's unique diagnosis, developmental level, emotional and behavioral needs, and family situation. To empower young patients, the medical center's adolescent psychiatric team employs a multidisciplinary approach ranging from cognitive behavioral therapy to creative expression. This comprehensive program addresses a wide range of real-life issues such as anger management, conflict resolution, stress reduction,

medication management, assertiveness training, communication skills and more. There's also help for patients trying to cope with a psychiatric disorder and substance-abuse problem at the same time. For those with eating disorders, various modes of treatment

help with self-esteem issues and nutritional concerns. Participants also receive up to 90 minutes of daily school instruction by certified teachers. All together, the program provides a well-planned transition from intensive care to home and school. It also helps young patients develop the coping skills necessary to avoid a relapse.

"Returning to everyday life after living in the secure environment of an inpatient treatment facility can be quite difficult," says Hanft. "The same is true for teenagers who drop out of school due to emotional problems. Many of these young people must still face the same set of circumstances as they did before they got help."

Positive changes. Under the direction of a board-certified child/adolescent psychiatrist, and guided by a team of mental health experts, teenagers learn solution-oriented strategies and new ways of behaving to address their problems. "The staff focuses on maximizing patients' strengths, teaching them how to make responsible choices, and helping them bring about positive changes," says Hanft. The team consists of psychiatrists, registered nurses, clinical social workers, rehabilitation therapists, dietitians and certified teachers.

At the heart of all treatment is the family. Weekly family therapy sessions are mandatory and parental involvement in group meetings is strongly recommended. "The full participation of family members is extremely important for meaningful changes to occur," says Hanft.

UC Irvine Medical Center offers a complete spectrum of inpatient and outpatient psychiatric treatment for young people ages 12 to 18 years. For more information, call 1-877-UCI-DOCS or 714-456-5843.

GENETIC COUNSELING

A sister diagnosed with breast cancer in her thirties. A father claimed by colorectal cancer in his forties. A mother stricken by ovarian cancer—and a maternal aunt who suffered the same fate.

These disturbing scenarios are a tragic fact of life for millions of American families. But few of the survivors know that their family tree could be the key to saving their own lives.

The cancer genetics clinic at University of California, Irvine Medical Center helps people who are concerned about cancers that strike early or often in their families. The goal: to determine if the disease is hereditary—and if so, whether the person has a genetic predisposition for developing it.

Your family tree could be the key to saving your life.

“All cancer is genetic, but only a small number of cases involve inherited gene mutations,” says genetic counselor **Ann Walker**, director of the graduate program in genetic counseling at the University of California, Irvine. “For example, of the more than 381,000 new cases of breast, ovarian or colorectal cancer reported last year, only 5 to 10 percent are believed to be caused by a family predisposition to the disease.”

Inheriting cancer. But for people who come from families with inherited forms of cancer, the odds of developing the disease can be staggering. “Women with mutations in the BRCA1 or BRCA2 genes can have a lifetime risk of developing breast cancer as high as 85 percent,” says **Dr. Wendy Brewster**, a gynecologic oncologist and epidemiologist at UC Irvine Medical Center. This compares to 12 percent in the general population. “Additionally, women with BRCA1 or 2 mutations have a 35 to 65 percent lifetime

risk of developing ovarian cancer, while women with no family history have a risk just under 2 percent.”

Likewise, the chance of getting colorectal cancer is substantially higher in families where a first-degree relative (parent or sibling) has been diagnosed with the disease before age 50. One type of hereditary colon cancer called Lynch Syndrome is triggered by defects in a family of genes responsible for repairing DNA damage. Accounting for 2 to 5 percent of all colon cancers in the United States, it often strikes people in their mid-40s. Individuals with a mutation in one of these genes have about an 80 percent lifetime risk of developing colon cancer.

Assessing risk.

“Typically, people with close relatives who developed cancer at an unusually early age benefit from genetic counseling,” says **Dr. Homayoon Sanati**, an oncologist at UC Irvine Medical Center. “Individuals from families with multiple cases of the same type of cancer are also good candidates for this type of evaluation.”

At UC Irvine Medical Center, the process begins with a detailed family history. A board-certified counselor specializing in cancer genetics maps out a detailed family tree, called a pedigree. The counselor may also review medical records of affected relatives. If a hereditary form of cancer is suspected, a gene-analysis blood test may follow, sometimes along with other evaluations. When all the facts are in, the counselor assesses whether the patient is at risk for the type of cancer that’s afflicted other family members. “At the heart of the process is education,”

says Walker, who points out that not everyone who has a mutation will get cancer. “In addition to supporting patients emotionally through this process,



genetic counselors also suggest strategies to help lower their risk and protect them from the disease.”

For women at increased risk for breast cancer, periodic ultrasounds and frequent mammograms starting sooner than typically recommended can catch the disease in its early stages, if it develops. Regular pelvic exams, ultrasounds and CA125 blood tests can help detect early-stage ovarian cancer in high-risk women. And early, frequent colonoscopies can alert doctors to signs of impending trouble in those at high risk for colon cancer.

Most insurance companies cover genetic counseling and testing. For information on UC Irvine Medical Center’s cancer genetic counseling services, call 714-456-5780.

the UCI Education Connection

Classes are free of charge to University of California, Irvine Medical Center patients and their families, UC Irvine employees and volunteers. Exceptions are the Joslin Diabetes Center, Mind Over Mood, Balance and Mobility for Seniors, meditation, yoga and health-care skills programs. Certain programs are also available in **Spanish & Vietnamese**. Unless otherwise indicated, all classes are located at UCI Manchester Pavilion, 200 S. Manchester Ave., Suite 840, Orange. Registration is required. Call toll free 1-877-UCI-DOCS or 1-877-824-3627 for registration and information.

FAMILY HEALTH

Asthma and Adults (1 Session)

Learn how to control asthma and not have it control you. Cost: \$20. Free peak flow meter. Friday, Feb 16 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 Children's Hospital of Orange County. Information: 949-824-2462 or www.cuidar.net. Call for meeting dates, times and locations throughout Orange County.

Balance and Mobility for Seniors: A class that helps you stay on your feet. (16-Session Series)

Designed to improve balance and mobility and reduce the risk of falls. Also focuses on flexibility, strength and endurance. Participants must be medically stable senior adults who live independently and can walk at least 200 feet safely without the use of any assistive devices. A written medical clearance is required. Prior to class, participants must schedule a 30-minute evaluation. Cost: \$80. Includes evaluation. Tuesdays and Fridays. Evaluations: Jan 9 and 12 1-3 p.m.
Class sessions: Jan 16 - March 9 1-2 p.m.

Breastfeeding (1 Session)

Includes process of milk production, how to breastfeed, avoiding potential problems and returning to work. Cost: \$20. Thursday, Jan 18, Feb 15, Mar 22 6-8:30 p.m.

Spanish Breastfeeding (1 Session)

Tuesday, Jan 23, Mar 6 5:15-7:30 p.m.
Location: UCI Family Health Center Santa Ana

Diabetic Diet (1 Session)

Food choices, portions and how they affect diabetes. Cost: \$20. Monday, Feb 5, Mar 5 4-6 p.m.

Diabetes Management Overview (1 Session)

Methods to control blood-sugar levels through diet, exercise, medication and lifestyle changes. Cost: \$20. Free glucometer. Monday, Jan 22, Feb 12 4-6 p.m.

Spanish Diabetes Management Overview (1 Session)

Wednesday, Jan 3, Feb 7, Mar 7 6-8 p.m.
Location: UCI Family Health Center Anaheim
Wednesday, Feb 14, Mar 14 6-8 p.m.
Location: UCI Manchester Pavilion

www.ucihealth.com



Vietnamese Diabetes Management Overview (1 Session)

Wednesday, Jan 10, Feb 7, Mar 7 8:30-10:30 a.m.
Location: UCI Manchester Pavilion

Diabetes Management Series (4-Session Series)

Meal planning, exercise, medications, monitoring your blood sugar and lifestyle changes to help you avoid complications. Cost: \$80. Free glucometer. Mondays, Mar 12 - Apr 2 4-6 p.m.

Vietnamese Diabetes Management Series

Wednesdays, Jan 17, Feb 14, Mar 14 & Apr 11 8:30-10:30 a.m.
Location: UCI Westminster Medical Center

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. Wednesday, Jan 17, Mar 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. Cost: \$20. Tuesday, Feb 27 4-6 p.m.

Hepatitis C Pretreatment Education (1 Session)

For the person who is considering or about to begin hepatitis C treatment. Includes information about hepatitis C, treatment, management of side effects and injection training. Family members and other loved ones are encouraged to attend. Pre-registration required: 714-456-8764. First Friday every month 9-10:30 a.m.
Location: UCI 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. Wednesday, Jan 31 6-8 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. Thursday, Feb 1 1:30-3:30 p.m.

Maternity Tea & Tour

Learn about maternity services and tour the maternity unit. Cost: Free to all. Thursday, Jan 25, Feb 22, Mar 22 1:30-3:30 p.m.
Location: UCI Neuropsychiatric Center, conference room 101

Meditation for Health (4-Session Series)

An introduction to the art of meditation, including a discussion of the various types and styles. No special clothing or equipment is required. Cost: \$40. Mondays, Mar 5 - 26 6-7 p.m.

Mind Over Mood

Cognitive therapy group for depression, anxiety, anger and stress-related disorders. Pre-registration required: 714-456-5902. Cost: \$40 per session, plus \$16.08 for book. Mondays 6:15-7:45 p.m.
Location: UCI Neuropsychiatric Center, conference room 302

Newborn Care (1 Session)

Infant feeding, dressing, bathing, diapering, normal newborn appearance and signs and symptoms of illness. Cost: \$20. Monday, Feb 5 6-8:30 p.m.
Spanish Newborn Care (1 Session)
Tuesday Mar 13 5:15-7:30 p.m.
Location: UCI Family Health Center Santa Ana

Joslin Diabetes Center Education Classes

Joslin Diabetes Center at University of California, Irvine offers two types of classes to help people learn how to successfully manage their diabetes. "Steps to Success" is a five-session, comprehensive, educational program. "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 of the programs, registration, or to schedule an appointment with a physician, please call Joslin Diabetes Center at UC Irvine at 949-824-8656 or visit www.ucihealth.com/joslin.



Joslin Diabetes Center
at University of California, Irvine



Lamaze Prepared Childbirth (6-Session Series)

Offered in conjunction with Santiago Canyon College Continuing Education. For expectant mothers and their birth partners beginning the 6th month of pregnancy. Topics include relaxation, Lamaze techniques, labor and birth, surgical delivery, medication and anesthesia. Cost: Free to all.

Wednesdays, Jan 10 - Feb 14 7-9:30 p.m.
Thursdays, Jan 11 - Feb 15 7-9:30 p.m.
Wednesdays, Feb 28 - Apr 4 7-9:30 p.m.
Thursdays Mar 1 - Apr 5 7-9:30 p.m.

Location: UC Irvine Medical Center Library, room 2105

Spanish Prepared Childbirth (4-Session Series)

Tuesdays, Feb 6 - 27 5:15-7:30 p.m.
Location: UCI Family Health Center Santa Ana

Siblings (1 Session)

For children about to become big brothers and big sisters who want to learn what will happen when Mom goes to the hospital to have the baby. Cost: \$20.

Wednesday, Jan 10, Feb 14, Mar 14 4-5 p.m.
Location: UCI Neuropsychiatric Center, conference room 302

Stop Smoking (4-Session Series)

Stop smoking by discussing what to do before you quit smoking and how to live life afterward. Cost: \$80.

Tuesdays, Jan 9 - 30 Noon-2 p.m.
Mondays, Feb 8 - Mar 5 10 a.m.-noon
Thursdays, Mar 8 - 29 Noon-2 p.m.

Weight Control (4-Session Series)

Identify your healthy weight and learn about meal planning, the food-guide pyramid, exercise, label reading, restaurant dining, recipe modification and maintenance. Cost: \$80.

Tuesdays, Mar 6 - 27 4-6 p.m.

Beginning Hatha Yoga (Monthly Series)

Wear loose-fitting workout clothes. Pack a cool-down sweatshirt and a yoga mat or beach towel. It's best not to eat or drink two hours prior to class. Cost: \$30 per month.

Every Tuesday 5-6 p.m.
Location: 200 S. Manchester Ave., basement training room

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.

Art for the Soul

Creative and fun expression for individuals faced with the challenges of cancer. No art experience is necessary. Information: 714-456-8609

Third Thursday every month 10 a.m.-noon
Location: Chao Family Comprehensive Cancer Center, 1st floor resource center

Bariatric Surgery Support Group

Offers support for patients before and after laparoscopic weight-loss surgery. Information: 888-717-4463
Third Tuesday every month 6:30-8:30 p.m.
Location: UCI Manchester Pavilion, 200 S. Manchester Ave., Ste. 840, classrooms B & C, Orange

Burn Survivors Support Group

Information: 714-456-5304 or 714-456-8938
Third Thursday every month 6-7:30 p.m.
Location: Acute Rehabilitation Unit/3-South, recreation room

Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)

For parents and professionals interested in learning about ADD/ADHD in children and adults. Guest speaker at every meeting. Information: 714-630-5214, 949-824-2343 or www.chadd.org
Second Wednesday every month 7-9 p.m.
UCI Child Development Center, 19262 Jamboree Road, Irvine

Epilepsy Support Group

Social and educational support group for adults with epilepsy, offered in collaboration with the Epilepsy Alliance of Orange County. Guest speaker at every meeting. Information: 714-557-0202
Third Friday every month 7-8:30 p.m.
Location: UCI Neuropsychiatric Center, conference room 101

Korean Women's Share and Care Group

Help and support for Korean-speaking women with cancer. Information: 714-456-5057
First Thursday every month 3-4:30 p.m.
Location: Chao Family Comprehensive Cancer Center, 4th floor conference room

Living with Cancer

Help for cancer patients and their loved ones. Information: 714-456-8609
Second and fourth Thursdays every month 6:30-8 p.m.
Location: Breast Health Center, Chao Family Comprehensive Cancer Center, 3rd floor

Look Good, Feel Better

Help with appearance changes during cancer treatments. Reservations: 949-261-9446, option #3
Second Monday every other month, Feb 12, Apr 9 10 a.m.-noon
Location: Chao Family Comprehensive Cancer Center, 4th floor conference room

National Alliance on Mental Illness (NAMI)

Support and education for those caring for someone with mental illness, provided by others struggling with similar issues. Information: 714-456-5843
Every Tuesday 6-7:30 p.m.
Location: UCI Neuropsychiatric Center, occupational therapy room 191

Pacemaker and Defibrillator Support Group

For patients with pacemakers and defibrillators and for their families. Information: 714-456-5984
Wednesday, April 18 5:30-7:30 p.m.
Location: Medical library, second floor auditorium, room 2107

Sarcoma Education and Support Group

Formal presentation followed by separate group discussions for young adults and older adults, led by social worker. Information: 714-456-8609
Third Tuesday every month 3-4:30 p.m.
Location: Chao Family Comprehensive Cancer Center, 4th floor conference room

Spanish Super Sibs Klub

Therapeutic workshop for children ages 8-12 with siblings who have disabilities or chronic illnesses. Information: 714-532-8778
Third Saturday every month 9:30 a.m.-noon
Location: UCI Neuropsychiatric Center, conference room 101

Survivors Support Group

Support and education for teenagers who have chronic or life-threatening illnesses. Information: 714-456-2295
Fourth Friday every month 4-5:30 p.m.
Location: UCI Neuropsychiatric Center, conference room 101

Spinal Cord Support Group

For those with spinal cord injuries and their families. Information: 714-456-6628
Third Monday every month, except holidays 1:30-3 p.m.
Location: Acute Rehabilitation Unit/3-South, recreation room

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

Information: 714-456-5235
First Monday every month 6:30-8 p.m.
Location: Breast Health Center, Chao Family Comprehensive Cancer Center, 3rd floor

Women's Care and Share 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

HEALTH CARE SKILLS

Basic Life Support – Health Care Provider

Adult, pediatric and infant CPR, two-rescuer CPR, foreign-body airway obstruction, AED and barrier devices. Based on American Heart Association standards and guidelines for 2006. Registration: 714-456-7291.
Cost: \$72 (includes parking pass, card and book).
Wednesday, Jan 24 8:30 a.m.-4 p.m.
Wednesday, Feb 28 8:30 a.m.-4 p.m.
Wednesday, Mar 28 8:30 a.m.-4 p.m.

Register for classes online at

www.ucihealth.com/events

Toll free 1-877-UCI-DOCS



Orange County Supervisor Bill Campbell, chairman of the Board of Supervisors, left, presents a congratulatory certificate to University of California, Irvine Chancellor Michael V. Drake, M.D., at the topping-out gala for the new university hospital.

Transformations

Construction of the University of California, Irvine Medical Center's new university hospital has been "topped out." The last beam of structural steel for the seven-story hospital was lifted into place at a topping-out gala in late summer 2006, marking a milestone in the building of the state-of-the-art health care facility.

In the coming months, the new hospital will continue to materialize. The steel "skeleton" will soon be covered by the building's "skin," or exterior walls.

To date, about 750 donors have contributed to the new university hospital. In anticipation of the topping out, more than 160 donors signed a distinctive yellow beam at a celebratory event in May. Medical center employees also were invited to sign a white beam. The special beams, with signatures preserved, are on display at the medical center.

The \$372 million hospital will offer the latest in medical technology, paired with pioneering care provided in quiet, patient-friendly rooms. The new hospital also will foster research and physician education. It will have 191 beds and 13 surgical suites. This is in addition to the existing 102 beds in the medical center's tower and the 84-bed Neuropsychiatric Center.

The new hospital is being constructed on the north side of the existing medical center grounds. It will replace the current main hospital building, built in 1960, which will be demolished after the new hospital is opened. During construction, all inpatient and outpatient care continues uninterrupted.

For more information about UC Irvine Medical Center's new university hospital, please visit www.ucihealth.com/newhospital. UC Irvine Medical Center thanks patients and visitors for their understanding during this time of transformation.

www.ucihealth.com

Seniors: Ask the Doctor

A New Look at Cataract Surgery

New developments in cataract surgery are helping people see better than ever before. Join us as ophthalmologist Dr. Roger Steinert, director of refractive, cornea and cataract surgery at University of California, Irvine Medical Center, discusses the newest developments in this field.

Q What is a cataract?
A It's a clouding of the eye's natural lens that's just behind the colored iris. When the lens becomes hazy, it prevents light from focusing properly on the retina. The result is blurry or distorted vision, an altered perception of colors, and problems with bright lights—particularly at night. Surgery is usually performed when the cataracts begin to interfere with a person's quality of life.

Q What happens during cataract surgery?
A The cloudy lens is removed and replaced with a man-made, custom-powered intraocular lens (IOL). Until recently, only single-focus implants were available. Because they were usually powered for distance vision, patients had to wear bifocals or reading glasses after surgery to see up close or at arm's length. But now, a new generation of FDA-approved IOLs is restoring clear vision to cataract patients at all distances, without the need for glasses or contact lenses.

Q How do the new IOLs work?
A There are two types of new IOLs—multifocal and accommodating. Both give patients a range of vision that the older, single-focus IOLs can't duplicate. Multifocal lenses work by focusing light from different distances on the retina. They don't move when the eye muscles contract or relax. Accommodating lenses move backward and forward to change focus from near to intermediate and far. They're controlled by the eye muscles in the same way that the human lens is.

Q Do the new lenses have any drawbacks?
A Because each type of IOL works differently, not all implants are right for every patient. Accommodating IOLs involve retraining the eye muscles to focus. Multifocal IOLs sometimes involve a natural learning curve as the brain trains itself to interpret the different focus the lens creates. Glare and nighttime halo effects may also occur with multifocal lenses, but usually diminish over time. Patients should work closely with their ophthalmologists to determine the best choice for them.

Q What about results?
A A trial conducted by the FDA of the Crystalens™ accommodating IOL showed that 98 percent of patients could see well enough to pass a driver's test and read the newspaper without glasses. In a clinical study of the ReZoom™ multifocal IOL, 92 percent of patients reported they never or only occasionally had to wear glasses. Another FDA trial involving the ReSTOR™ multifocal IOL demonstrated that 80 percent of patients never wore glasses after the procedure. Typically, vision at all distances is 20/25 or better after surgery.

Q Will Medicare cover the cost of the new IOLs?
A Multifocal and accommodating IOLs cost more than the older lenses. When the newer implants are used, Medicare covers the surgical procedure in full, but the patient is responsible for the difference in cost between the traditional IOLs and the newer ones.



Dr. Roger Steinert is an ophthalmologist who is internationally known for his work in cataract surgery, corneal transplantation and refractive surgery, including LASIK. His areas of interest include advanced optics, laser technologies and other leading-edge techniques to enhance the outcomes of complex eye surgeries. He is immediate past president of the American Society of Cataract and Refractive Surgery. For an appointment, please call 714-456-7183.

TREATING BRAIN TUMORS

There's nothing simple about the human brain. Not only is it the center of thought, memory and emotion, but it also controls breathing, movement and other important functions.

Equally complex are the conditions that affect this organ, including brain tumors, both malignant and benign.

"The brain is vulnerable to more than 120 different types of tumors—and no two are identical," says **Dr. Mark Linskey**, a neurosurgeon and chair of the Department of Neurological Surgery at University of California, Irvine Medical Center. He is also co-director of the neuro-oncology program at the Chao Family Comprehensive Cancer Center at UC Irvine Medical Center, one of only 39 National Cancer Institute-designated comprehensive cancer centers in the United States.

In good hands. The neurosurgeons who comprise the brain tumor team operate on more than 150 patients yearly, making the medical center a high-volume site for this type of surgery. To ensure the best outcomes, neurosurgeons work closely with a multidisciplinary team of neuro-oncologists, neuro-ophthalmologists, neuroradiologists, neuropathologists, radiation oncologists and otolaryngologists (ear, nose and throat specialists). Leading-edge equipment complements the physician expertise, including the first intraoperative MR scanner in Orange and San Diego counties. It all adds up to a program that's one of the most comprehensive in the region.

Last year, 36-year-old Christina Stoker learned how important access to a top-notch brain tumor program can be. The Rancho Santa Margarita resident suddenly lost the hearing in her right ear and began suffering from severe headaches and loss of balance. After several months of seeing doctors who attributed her symptoms to stress, allergies, an infection and teeth



Christina Stoker, shown with her sons Derek (left) and Brandon, survived a brain tumor after receiving leading-edge care at UC Irvine Medical Center.

The brain is vulnerable to more than 120 different types of tumors—and no two are identical.

grinding, Stoker contacted a neurologist. Following an examination, he ordered CT and MRI scans of her brain. In February 2005, Stoker and her husband delivered the CT images to the neurologist—but not before they peeked at the results. "We saw the tumor, glowing white," she recalls. "It was the worst day of my life." Stoker had a tumor that was a little larger than a golf ball at the base of her skull, impacting her brain stem and the cranial nerve responsible for hearing. Surgical access to this area is extremely challenging because of the complex anatomy of the skull base and the tumor's position deep within the head near important brain structures.

Stoker was referred to a neurosurgeon at her community hospital. Meanwhile, her family and friends began inquiring about brain surgeons—and Linskey's name came up repeatedly. Anxious to connect with an expert in the field, Stoker called his office, desperately requesting an appointment. Linskey met with her that week. "I immediately knew I was in good hands and that he really cared about me," she says. "He even asked me about symptoms I hadn't noticed, such as my eye twitching when I looked to the right." By the time Stoker got to her car, she'd decided Linskey would perform her surgery.

A delicate operation. During the next four weeks, the mother of two had numerous tests at UC Irvine Medical Center to confirm the location and type of tumor, including how it was impacting nearby structures. "The skull base is the bony structure that sits beneath the brain and brain stem," explains Linskey. "It houses the nerves responsible for sight, eye movement, swallowing, facial sensation, hearing, balance and other functions. Several major blood vessels are also located there, making the skull base one of the most difficult areas on which to operate."

On March 29, 2005, Linskey performed a delicate, eight-hour procedure to remove Stoker's tumor. Using a state-of-the-art intraoperative brain navigational system, he was able to remove the entire growth while preserving important nearby structures.

Due to the aggressive nature of Stoker's tumor, surgery was followed by several weeks of intensity-modulated radiation therapy (IMRT). Extremely precise, it conforms to the exact contours of the target area, sparing nearby healthy tissue. Today, the young mother is back to work and treasuring the time she spends with her husband and children. "There's nothing I can't do that I want to do," she says.

For referral to a UC Irvine Medical Center brain specialist, call 714-456-6392.

Toll free 1-877-UCI-DOCS

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