

UCI Health www.ucihealth.com

THE GIFT OF LIFE KIDNEY TRANSPLANTS

As America's population grows older, the number of people who need kidney transplants continues to increase.

Today, there are more than 72,000 people on the national waiting list for deceased-donor kidneys—and the average waiting time for these lifesaving organs has grown to about three years.

To help ease this shortage and give more patients a second chance at life, transplant specialists at University of California, Irvine Medical Center encourage live-donor transplants whenever possible. "Kidneys donated by living family members, friends or neighbors function better than deceased-donor organs, even if they're not a perfect match," says **Dr. Clarence Foster**, chief of kidney and pancreas transplant surgery with UC Irvine Healthcare.

A good match. What accounts for this? With deceased-donor kidney transplants, the organ is removed from a cardiac- or brain-dead person and assigned to a recipient with the closest genetic match within a predetermined geographical region. While the match is being completed, the organ is preserved for up to 48 hours in a cold environment. This can delay the kidney's function immediately after transplant. Kidneys from living donors are preserved for only a few minutes because transplantation into the recipient takes place almost immediately. Furthermore, living donors must undergo dozens of tests before they're considered candidates for the procedure. As a result, only the healthiest people—and the best kidneys—are selected for living-donor transplants. For this reason, transplant recipients usually need fewer immunosuppressive drugs to guard against organ rejection.

About 20 percent of UC Irvine Healthcare's kidney transplants involve live donors. To qualify as a donor, an individual must be at least 18 years old, in good physical health, and free from significant medical problems. Once these basic criteria are met, both the donor and recipient undergo an evaluation to see if they're a good match. If preliminary testing indicates

Living-donor transplants are the key to life for many kidney patients.

blood types and tissue samples are compatible, both parties undergo a thorough physical exam, including a spiral CT kidney scan and psychological assessment. After several weeks of intensive evaluation, donor/recipient pairs meeting all the criteria are approved for transplantation.

Improved outcomes. "On the day of the transplant, the donor and recipient are placed in adjacent operating suites so the organ can be transferred quickly," says **Dr. Craig Smith**, a UC Irvine Healthcare transplant surgeon. "In most cases, minimally invasive techniques are used to remove the donor's kidney, resulting in a faster recovery." Within minutes, the kidney is delivered to the

recipient, who is surgically prepared to receive it. The actual transplant procedure can take two to four hours to perform. Following the surgery, the recipient must take several anti-rejection medications and follow a lifelong medical regimen. But the payoff is considerable. According to the United Network for Organ Sharing, more than 90 percent of people who



receive a living-donor transplant are alive five years after the operation, compared with about 81 percent of deceased-donor kidney transplant patients.

UC Irvine Healthcare surgeons also perform pancreas and simultaneous pancreas-kidney transplants. "Not only do these operations allow patients with diabetes to become insulin-free, but many also experience a reversal or stabilization of diabetes-related problems such as kidney disease, nerve damage and eye problems," says Smith. For referral to a UC Irvine Healthcare transplant specialist, call 877.KDY.PANC.

Toll free 877.UCI.DOCS

CONTROLLING PAIN

Burning, stinging, stabbing, aching—people in pain understand the language of suffering.

But today, more effective therapies have freed millions from this terrible condition.

Pain is now recognized as a disease by itself—one that can cause other problems such as a weakened immune system, sleep problems and depression. “Chronic pain has a profound effect on both health and well-being because it actually rewires the nervous system,” explains **Dr. Arthur Zepeda**, a pain management specialist and director of University of California, Irvine Healthcare’s Pain Management Center. “Constant pain leads to inactivity, which can contribute to other ailments. This vicious cycle is so serious that it can prevent patients from fully participating in their recovery from injuries or illnesses.” Pain is so significant that the health care accreditation agency known as The Joint Commission pronounced pain relief a cornerstone of patient care in 2001.

How do specialists tackle pain? At the Pain Management Center, the process begins by identifying the precise nature of the pain—its

location, intensity, quality, frequency and cause.

Physicians with a background in anesthesia or physical medicine and rehabilitation, with additional board certification in pain medicine, conduct the evaluation. Based on the findings, a multidisciplinary team of doctors, physical therapists, psychologists and others creates a customized treatment plan for the patient.

• **Post-injury pain syndromes.** Several types of oral medications can be used to treat post-injury pain syndromes. But to increase the effectiveness of drugs and decrease their side effects, pain specialists may place the medications directly into the spinal fluid with an implanted pump, which can be operated by the patient. Called an intrathecal drug delivery system, or “pain pump,” this method requires only a fraction of the medication that would be needed with pills. For other patients, a nerve block may be more beneficial. This involves injecting an

Effective pain therapies
have given millions of people
a second chance at life.

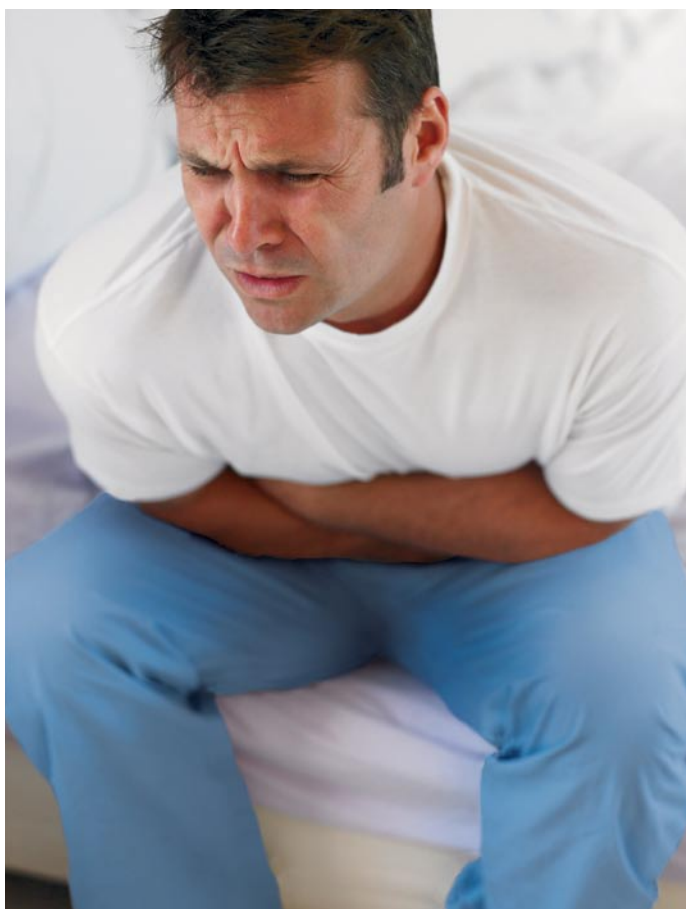
anesthetic close to a nerve pathway, which prevents pain messages from reaching the brain. Another option is spinal cord stimulation. In this procedure, electrodes are implanted close to the spinal cord, producing a tingling sensation that suppresses pain.

• **Cancer pain.** Doctors were once reluctant to prescribe opioids (drugs such as morphine and codeine) for cancer patients. But today these medications are standard care. “In pain management cases, the chance of developing an addiction is extremely low,” says Zepeda. Medications—alone or in combination—may be injected, taken orally or delivered through a patch. Pain pumps are also frequently used. From Tylenol to morphine, each drug plays an important role. “The goal,” says Zepeda, “is to provide the greatest comfort with the fewest side effects.” When medications fail to help as much as needed, doctors turn to other treatments. One option is a nerve block to stop pain impulses. Another is radiofrequency ablation, which deadens nerves with a burst of intense heat. A third is spinal cord stimulation. Acupuncture and other alternative therapies may also be used to enhance various pain therapies.

• **Musculoskeletal pain.** Affecting bones, joints and muscles, musculoskeletal pain can often be controlled by lifestyle changes and pain medications. Some patients, however, benefit from anesthetic or anti-inflammatory injections in painful joints and trigger points. For back problems, epidural steroid injections may be used to control the radiating pain caused by spinal nerve compression. But in some cases, surgery may be needed. “Minimally invasive procedures such as percutaneous discectomy or vertebroplasty can eliminate chronic pain for many patients suffering from herniated discs or spinal compression fractures,” says Zepeda. Some problems may also be helped with physical therapy, biofeedback and acupuncture. For referral to a UC Irvine Healthcare pain management specialist, call 877.UCI.DOCS.



Medical Emergencies



Each week, millions of viewers tune in to “ER.” But it’s one thing to watch a TV drama about a hospital emergency room—and another to experience a real-life emergency.

How do you know when it’s time to go to the emergency room (ER), and what can you expect when you arrive there?

“An emergency is an injury or illness that needs immediate treatment to preserve life or relieve serious symptoms,” says **Dr. Mark Langdorf**, emergency room medical director with University of California, Irvine Healthcare. “Because these events can affect your ability to drive or think clearly, it’s best to have someone take you to the emergency room, if possible.” But if life-threatening symptoms are involved (see box to right), you should call 911 immediately.

When you arrive at the ER by car, your first stop will be the triage desk. A nurse will take your blood

pressure and other vital signs while asking about your symptoms and medical history. This information determines the order in which patients are treated, with the most serious cases getting top priority. If your situation is urgent, you’ll be cared for immediately. “Our emergency room is a designated cardiac receiving center,” says Langdorf. “This means the hospital is equipped to perform balloon angioplasty within 90 minutes of the time a heart attack patient arrives in the ER. The procedure involves opening blocked coronary arteries by using a balloon-tipped catheter.” People with stroke symptoms are treated just as promptly, with CT scans and other tests administered minutes after a patient’s arrival in the ER, and clot-dissolving drugs given within an hour.

The ER team. “As a Level I trauma center, we have a team ready to perform emergency surgery 24 hours a day,” says Langdorf. “Doctors from 23 different specialties ranging from neurology to dermatology are also available for immediate consultation. This level of service is not available at most hospitals.”

The ER is staffed by 13 board-certified emergency physicians—many with decades of experience. The team also includes more than 80 specially trained nurses and numerous other emergency and support personnel. “We’re experts in treating everyone from newborns to seniors for a wide variety of medical problems ranging from infections to poisonings and pregnancy problems,” says Langdorf. Additionally, as the only academic medical center in Orange County, UC Irvine Medical Center trains dozens of emergency doctors each year.

To help emergency physicians take care of you, remember to bring your doctor’s name and phone number, any recent tests or X-ray results, and a list of your medications. If it’s more convenient, you can bring the prescription containers themselves. Once your initial examination is complete, the ER physician may order X-rays, laboratory tests or other

screenings. “With round-the-clock access to a panel of specialists, the latest technology and advanced imaging, our ER team can diagnose complex problems in just a few hours,” says Langdorf. “In a non-emergency setting, this same process could take several weeks and multiple visits to a doctor’s office.” Throughout the course of diagnosis and treatment, the ER staff places a strong emphasis on controlling patients’ pain—both in the emergency room and upon discharge. If more pain medication is needed, patients should feel free to tell their doctor or nurse.

The next step. What should you expect once the cause of your problem is determined? “Patients have the right to understand their diagnosis, including the results of tests and treatments,” Langdorf says. “They should also expect to participate in decisions regarding their care.” Langdorf is particularly concerned that people take their medication as directed after they leave the emergency room. “If paying for a prescription is a problem, patients should tell their doctor. Their good health is our priority.”

LIFE-THREATENING EMERGENCIES

Call 911 if you or someone else experiences any of the following symptoms:

- Sudden trouble breathing
- Passing out or feeling dizzy and confused
- Sudden difficulty speaking or seeing, and/or weakness of the arms, legs or face
- Chest pain in anyone over the age of 35
- Severe bleeding
- High fever with confusion
- Poisoning or overdose

Toll free 877.UCI.DOCS

the Education Connection

Classes are free of charge to University California, Irvine Healthcare patients and their families, UC Irvine employees and volunteers. Exceptions are the Joslin Diabetes Center, Balance and Mobility for Seniors, meditation, and health care skills programs. Certain classes are also available in **Spanish & Vietnamese**. Unless otherwise indicated, all classes are located at UC Irvine Manchester Pavilion, 200 S. Manchester Ave., Suite 840, Orange. 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. Cost: \$20. Free peak flow meter. Friday, Oct 26, Dec 7 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: Sept 25 or 28 1-3 p.m.
Class sessions: Oct 2 - Nov 27 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, Oct 25, Nov 29 6-8:30 p.m.

Spanish Breastfeeding (1 Session)

Tuesday, Oct 16, Nov 20, Dec 18 5:15-7:30 p.m.
Location: UC Irvine Family Health Center Santa Ana

Diabetic Diet (1 Session)

Food choices, portions and how they affect diabetes. Cost: \$20. Monday, Dec 3 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, Nov 19, Dec 10 4-6 p.m.

Spanish Diabetes Management Overview (1 Session)

Wednesday, Oct 3, Oct 24, Nov 7, Nov 28, Dec 5, Dec 26 6-8:30 p.m.

Location: UCI Family Health Center Anaheim
Wednesday, Oct 10, Nov 14, Dec 12 6-8:30 p.m.
Location: UC Irvine Manchester Pavilion

Vietnamese Diabetes Management Overview (1 Session)

Wednesday, Oct 3, Nov 7, Dec 5 8:30-10:30 a.m.
Location: UC Irvine 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, Oct 15, 22, 29, and Nov 5 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. Wednesday, Nov 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, Oct 23, Dec 4 4-6 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, treatment, management of side effects and injection training. Family members and other support persons are encouraged to attend. Pre-registration required: 714.456.8764
First Friday every month 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. Wednesday, Oct 24 6-8 p.m.

Living Well With Heart Failure (1 Session)

Overview of heart failure, symptoms, basic lifestyle changes to manage the condition including diet, exercise and medications. Cost: \$20. Monday, Oct 22, Dec 10 1:30-3:30 p.m.

Maternity Tea & Tour

Learn about maternity services and tour the UC Irvine Maternity Unit. Cost: Free to all. Thursday, Oct 25 1:30-3:30 p.m.
Location: UC Irvine Medical Center, 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, Oct 1 - 22 6-7 p.m.



Meditation Special Topic: Body Scan (1 Session)

Teaches awareness of each part of the body in sequence. Used to relieve short-term and chronic pain, promote relaxation and facilitate stress relief using visualization. Cost: \$20. Monday, Nov 19 6-7 p.m.

Newborn Care (1 Session)

Infant feeding, dressing, bathing, diapering, normal newborn appearance and signs and symptoms of illness. Cost: \$20. Monday, Oct 8, Dec 3 6-8:30 p.m.

Spanish Newborn Care (1 Session)

Tuesday, Nov 27 5:15-7:30 p.m.
Location: UC Irvine Family Health Center Santa Ana

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, Cesarean delivery, medication and anesthesia. Cost: Free to all. Tuesdays, Oct 30 - Dec 4 7-9:30 p.m.
Tuesday class location: Santiago Canyon College Orange Center
Wednesdays, Oct 31 - Dec 5 7-9:30 p.m.
Thursdays, Nov 1 - Dec 13 7-9:30 p.m.
Wed & Thurs location: UC Irvine Medical Center Library, room 2105

Spanish Prepared Childbirth (4-Session Series)

Tuesdays, Oct 23 - Nov 13 5:15-7:30 p.m.
Location: UC Irvine 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, Oct 10, Nov 14, Dec 12 4-5 p.m.
Location: UC Irvine Medical Center 2 Tower Conference Room (2nd floor of main hospital)



Stop Smoking (4-Session Series)

Stop smoking by discussing what to do before you quit smoking and how to live life afterward. Cost: \$80.
 Mondays, Oct 1 – 22 10 a.m.-noon
 Mondays, Nov 5 – Dec 3 10 a.m.-noon
 Thursdays, Dec 6 – 27 4:30-6:30 p.m.
Spanish Stop Smoking (4-Session Series)
 Tuesdays, Oct 2 – 23 4:30-6:30 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.
 Thursdays, Oct 4 – 25 9:30-11:30 a.m.

Beginning Hatha Yoga

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 for 6 classes.
 Every Tuesday 5-6 p.m.
 Location: UC Irvine Manchester Pavilion, 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 techniques to foster better health while coping with cancer. No art experience required. Information: 714.456.5235
 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 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 207 & 208, Orange

Breast Cancer Education/Support Series

Ongoing series for women with breast cancer, providing opportunity to meet with experts. Information: 714.456.5819
 Mondays, Oct 1, Nov 5, Dec 3 3-4 p.m.
 Location: Chao Family Comprehensive Cancer Center, 4th floor conference room

Burn Survivors Support Group

Information: 714.456.5641
 Thursdays, Sept 20, Oct 18, Nov 15, Dec 20 Noon -1 p.m.
 Location: Neuropsychiatric Center, conference room 101

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: 949.UCI.ADHD (949.824.2343) or www.cdc.uci.edu.chadd.shtml. No RSVP necessary.
 Wednesdays, Oct 10, Nov 14, Dec 12 7-9 p.m.
 Location: UC Irvine 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, no Dec meeting 7-8:30 p.m.
 Location: Neuropsychiatric Center, conference room 101

Kidney and Pancreas Transplant Support Group

Education and support for pre-dialysis, dialysis, pre-transplant and post-transplant patients, family members and friends. Information: 714.456.8342
 Fourth Wednesday every month 4-5:30 p.m.
 Location: Medical library, 2nd floor, room 2105

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, no meetings Nov 22, Dec 12 and 26 due to holidays 6:30-8 p.m.
 Location: Breast Health Center, Chao Family Comprehensive Cancer Center, 3rd floor

Pacemaker and Defibrillator Support Group

For patients and families to learn about pacemakers and defibrillators
 Information and reservations: Carmen Quiroz, 714.456.7918
 Wednesday, Jan 16 5:30-7:30 p.m.
 Location: Medical library, 2nd floor, 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

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.
 Please call for location

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: Neuropsychiatric Center, conference room 101

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

Survivors Support Group

Support for teens facing the challenges of illness. Information: 714.456.2295
 Wednesdays, Sept 26, Oct 24, Nov 28, Dec 19 4:30-6 p.m.
 Location: Neuropsychiatric Center, conference room 101

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: 714.962.2369
 Second Saturday every month, Nov 10, Jan 12 1-3 p.m.
 Location: Medical library, 2nd floor, room 2107

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, no meeting Dec 25
 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. Registration: 714.456.7291.
 Cost: \$74 (includes parking pass, card and book).
 Wednesday, Sept 26 8:30 a.m.-2 p.m.
 Wednesday, Oct 24 8:30 a.m.-2 p.m.
 Wednesday, Nov 28 8:30 a.m.-2 p.m.

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, 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

Toll free 877.UCI.DOCS



David N. Bailey, M.D., is UC Irvine vice chancellor for health affairs

What's in a Name?

There is a new name for University of California, Irvine's efforts to bring world-class medical care to patients. It is University of California, Irvine Healthcare. Or UC Irvine Healthcare.

UC Irvine Healthcare represents the patient care services of UC Irvine. It comprises UC Irvine Medical Center, University Children's Hospital and University Physicians & Surgeons, the group of nearly 450 doctors that practices medicine at the medical center, ambulatory or outpatient locations, and physicians' offices. At the helm of UC Irvine Healthcare is **Dr. David N. Bailey**, UC Irvine vice chancellor for health affairs.

UC Irvine Medical Center is Orange County's only academic medical center. Currently under construction is a \$382 million new university hospital, located on the northern perimeter of the medical center grounds, that will provide a patient-centered environment while enhancing UC Irvine's medical services, education and research. Located in Orange, the medical center also has affiliated doctors' offices throughout Orange County and in Long Beach.

What is an academic medical center? It is where leading-edge patient care comes together with research and the education of tomorrow's doctors. Top physicians and surgeons with years of specialty training provide care to patients, while passing their knowledge and skills to young doctors in training. Academic medical centers provide highly specialized services not available at community hospitals, such as UC Irvine's Level I trauma center, regional burn center, Level III neonatal center, and the only National Cancer Institute-designated comprehensive cancer center in Orange County. In addition, patients at an academic medical center have first access to the advances that come from research, with the opportunity to enroll in clinical trials that test new methods that can lead to better treatments.

Compassionate care, cutting-edge services and a first-class medical center are at the heart of our new name. Welcome to UC Irvine Healthcare.

UC IRVINE • HEALTHCARE

www.ucihealth.com

Seniors: Ask the Doctor

A Good Night's Sleep

Sleep problems are an ongoing concern for many seniors. But with proper medical care, older people can sleep the entire night and wake up rested. Join Dr. Marcel Hungs, a neurologist and director of University of California, Irvine Healthcare's Center for Sleep Medicine, as he discusses seniors and sleep.

Q How much sleep should older people get?

A Most people 65 and older need 7 to 9 hours of sleep. But about 50 percent of seniors get far less. Sleep deprivation can lead to daytime sleepiness, difficulty concentrating, irritability and accidents. It can also put people at risk for memory loss, heart disease and stroke.

Q What causes sleep problems?

A There are dozens of different types of sleep disorders that can affect the quality or quantity of a person's sleep. Stress, depression, poor sleep habits and a shift in the sleep-wake cycle contribute to some sleep difficulties. So do certain medications, nicotine, caffeine, alcohol and a host of physical problems. Unfortunately, many people take sleeping pills that are not adjusted to their age and weight, making them so drowsy they're at risk for falls.

Q Is it normal for older people to have trouble sleeping?

A It's a fact that seniors get an average of 1.3 fewer hours of sleep each night than when they were 20, and they experience about half the amount of deep sleep. But sleep disorders aren't a part of normal aging.

Q What are some of the most common sleep disorders?

A Insomnia is probably the most widespread. But others such as obstructive sleep apnea are also common. This condition involves excessive snoring, interspersed by periods of silence when breathing stops, followed by loud gasps as the person struggles to breathe again. The sleeper doesn't wake up during these episodes, but is exhausted the next day. Restless leg syndrome is another frequent sleep disorder. It involves crawling or twitching sensations inside the legs, sometimes keeping people awake for hours.

Q How are sleep problems diagnosed?

A At the Center for Sleep Medicine at UC Irvine Medical Center, a sleep evaluation includes a physical exam, sleep history and sleep log kept by the patient. It may also involve an overnight sleep study and daytime nap assessment to monitor a patient's brain activity, sleep states, heart rate, breathing, oxygen levels, and leg and eye movements. Once this information is compiled, the reason for most sleep disorders is usually evident.

Q What's the next step?

A The treatment for a sleep disorder depends on the cause. Insomnia can be addressed by lifestyle changes, behavioral modification, pain management and medications. Sleep apnea may be treated with minor surgery, a breathing device called a C-PAP mask or other methods. And restless leg syndrome responds well to drug therapy. The important point, however, is that there's help for all sleep disorders. No one should have to suffer in silence.



Dr. Marcel Hungs is a board-certified neurologist and sleep disorders specialist. He is an expert in sleep disorders affecting children, older adults, and people with stroke, sleep apnea and Parkinson's disease.

Children and EAR INFECTIONS



Parents know the symptoms all too well: shrill crying, ear tugging, fussiness and fever.

By age three, more than 75 percent of children have experienced middle-ear infections, also known as acute otitis media (AOM).

Second only to well baby checkups as the reason for pediatric office visits, AOM can lead to episodes of what is medically known as otitis media with effusion (OME)—a condition in which fluid builds behind the eardrum, causing infection and severe pain. “OME is the most common cause of hearing loss in young patients,” says **Dr. Robin Steinberg-Epstein**, a UC Irvine Healthcare pediatrician.

The antibiotic question. But what’s the best way to treat this common ailment? Until recently, U.S. doctors wrote about 15 million prescriptions annually to treat ear infections—more than for any other childhood ailment. But revised clinical

guidelines released in 2004 by the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP) are changing this approach. The two groups recommended antibiotics for ear infections in children under age two, as well as for those with severe ear pain and/or temperatures of 102.2 or more. Antibiotics were also recommended for all children whose AOM symptoms didn’t improve within 72 hours. But for those who don’t fall within these guidelines, the condition usually heals itself. To relieve discomfort during

the waiting period, ibuprofen, acetaminophen and warm compresses to the ear can help. “This change in perspective is based on a major study showing that a wait-and-see approach is as effective as antibiotics in resolving most childhood ear infections,” says Steinberg-Epstein. “The new guidelines also reflect doctors’ growing concern about antibiotic resistance.”

The wait-and-see approach is as effective as antibiotics in resolving most childhood ear infections.

Recommendations have also changed for children who have chronic OME—ear infections with fluid buildup that persist for months. “Fluid in the middle ear interferes with the way the eardrum and ear bones function,” says Steinberg-Epstein. “This can lead to various degrees of hearing loss—a particularly serious situation during the early years of language development when a child is learning to speak by listening.”

Ear tubes. In the past, ear tubes were the automatic and immediate answer to chronic OME. But today, this remedy also has been put on the wait-and-see list. In fact, the AAP, AAFP and American Academy of Otolaryngology-Head Neck Surgery recently recommended that children with OME simply be watched closely for three to six months without taking further measures. “In many cases, the ear fluid disappears on its own,” says Steinberg-Epstein. “But if the problem persists over a period of three months—or if there’s evidence of related hearing, speech or behavior problems—ear tubes should be considered.”

In addition to OME, there are many other causes of childhood hearing loss, ranging from pre-birth infections to head injuries and diseases such as bacterial meningitis. “Although the hearing of newborns is tested almost universally in hospitals throughout the nation, a lot can happen between birth and the time a child enters school,” says **Dr. Hamid Djalilian**, a UC Irvine Healthcare ear and hearing specialist. For this reason, experts urge parents to stay alert for hearing problems. By 4 months, a child should respond to a parent’s voice. By 9 months, babies should react to sound-making toys. By 16 months, babies should respond to their name and say at least three words such as “mama,” “dada,” or “ball.” And by 24 months, they should say between 100 and 200 words, follow simple commands, and speak in two-word sentences. Telltale signs that an older child has a potential hearing loss include problems at school, difficulty pronouncing words correctly, turning up the television volume excessively high, and asking “what?” or “huh?” repeatedly. For referral to a pediatrician or ear specialist, call 877.UCI.DOCS.



UNIVERSITY
CHILDREN’S HOSPITAL
UC IRVINE MEDICAL CENTER

Toll free 877.UCI.DOCS

UNIVERSITY of CALIFORNIA • IRVINE
HEALTHCARE

333 City Blvd. W., Suite 1250
Orange, CA 92868-2990
www.ucihealth.com

© 2007, The Regents of the University of California

The information contained in this newsletter is not meant to replace the advice of your physician. Please send comments to UC Irvine Health Affairs Marketing Department, 333 City Boulevard West, Suite 1250, Orange, CA 92868.



University of California, Irvine Medical Center is recognized as one of "America's Best Hospitals" in geriatrics and urology. For more information, visit www.ucihealth.com.

UCIRVINE

UNIVERSITY of CALIFORNIA, IRVINE • HEALTHCARE

UCI Health

FALL 2007
Vol. 11, No. 3

www.ucihealth.com



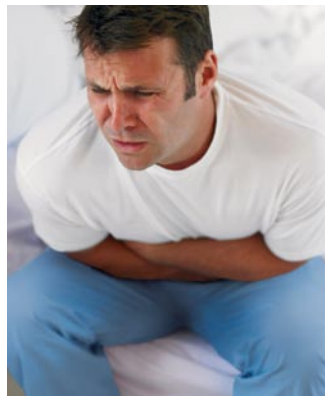
**The Gift of Life:
Kidney Transplants**

①



**Controlling
Pain**

②



**Medical
Emergencies**

③



**Education
Connection**

④



**A Good
Night's Sleep**

⑥



**Children and
Ear Infections**

⑦