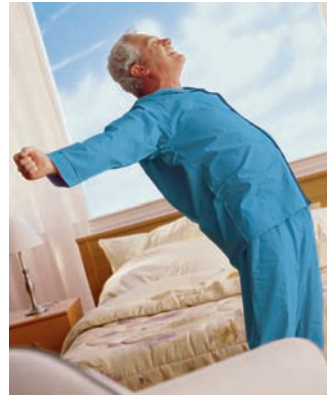




**Taking Aim
at Epilepsy**

①



**Minimally Invasive
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**HPV
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YES or NO?**

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UCI Health www.ucihealth.com

Taking Aim at EPILEPSY

Like bolts of lightning across a stormy sky, epileptic seizures send uncontrolled electrical impulses throughout the brain.

The result can range from staring spells lasting a few seconds to a complete loss of consciousness accompanied by convulsions.

About 60 percent of people with epilepsy can control their condition with medications or an implantable device called a vagus nerve stimulator. But the remaining 40 percent continue to struggle with the daily challenges of the disease—some experiencing up to 100 seizures a month.

Surgical options. But there's good news for people with difficult-to-control epilepsy. Using leading-edge surgical techniques, doctors can remove the precise portion of brain tissue triggering the attacks. Up to seventy percent of patients with certain types of epilepsy are seizure-free after the procedure. Of the remainder, a majority have fewer seizures, which are easier to control with less medication. The region most commonly treated is the temporal lobe, just behind the eye and above the ear.

Because this type of surgery requires a wide array of specialists and equipment, it's almost always performed at hospitals designated as a fourth-level comprehensive epilepsy center. University of California, Irvine Medical Center is one of only 60 facilities nationwide to be granted this status by the National Association of Epilepsy Centers (NAEC). "A level 4 rating indicates that we offer the most advanced diagnostic and therapeutic options for epilepsy available anywhere," says **Dr. Howard Kim**, clinical program director of the UCI Comprehensive Epilepsy Program. This includes state-of-the-art



For people with difficult-to-control epilepsy, surgery can be the key to a seizure-free life.

neurodiagnostic monitoring and a full spectrum of medical and surgical treatments.

A new life. About 3,000 epilepsy surgeries are performed each year in the United States. But many more people could benefit from the procedure, according to neurosurgeon **Dr. Devin Binder**, surgical director of the UCI Comprehensive Epilepsy Program. "Although as many as 200,000 people in this country may be candidates for epilepsy surgery,

few patients are aware of this treatment option," he says. "Younger individuals especially benefit from the operation. Once they're seizure-free, they can do the things people really care about—finish school, pursue a career and enjoy a normal family life." For this reason, Binder believes surgery shouldn't be considered the treatment of last resort.

Before surgery is performed, a series of noninvasive tests is conducted. They include a video-EEG monitoring study to analyze seizures, and MRI scans to look for structural causes of epilepsy. Functional imaging scans and other specialized tests are used to pinpoint the precise area of the brain responsible for the seizures. Then the UCI Comprehensive Epilepsy Program team reviews the test results and determines if the patient is a candidate for surgery. This collaborative effort draws on the combined skills of neurologists, neurosurgeons, neuroradiologists, neuropsychologists, EEG technologists and a clinical nursing coordinator. "It's a huge team effort," says Binder.

During epilepsy surgery, doctors use computer-generated three-dimensional imaging to help them pinpoint and eliminate the brain tissue causing the seizures. "The goal is to remove as little as possible, preserving all the patient's intellectual functions," says Binder. The operation is recommended only for people whose seizures are triggered from electrical activity in a discrete part of the brain, rather than diffused over the entire organ. But for those who qualify, the result can transform their lives.

For referral to a physician specializing in epilepsy surgery, call 714-456-6203.

Toll free 1-877-UCI-DOCS

Minimally Invasive Back Surgery



The spine is an amazing structure composed of 24 bones called vertebrae and an equal number of gel-like discs to separate them.

Held together by a network of muscles and tendons, the spine encases the spinal cord. This complex design allows us to be flexible, but it also causes a lot of trouble when parts develop problems. Last year, more than 500,000 people had spine surgery to get off the roller coaster of pain they'd been riding for months—and sometimes years.

But new developments in minimally invasive spine surgery are making life easier for many patients. University of California, Irvine Medical Center physicians are leading the way by offering the newest procedures available anywhere. “By bringing together

two medical specialties—neurosurgery and orthopedic surgery—the UCI Multidisciplinary Spine Program is among the most progressive in the country,” says neurosurgeon **Dr. Burak Ozgur**, co-director of the program. Neurosurgeons are experts in the nervous system, including the spinal column and spinal cord. They're highly skilled in the use of high-powered microscopes, which aid them in working with spinal tissue. Orthopedic specialists are authorities on the musculoskeletal system, including bones, joints, ligaments, tendons, muscles and nerves.

“When doctors from these two specialties combine their expertise, they enhance each other's efforts,” says orthopedic surgeon **Dr. Nitin Bhatia**, co-director of the UCI Multidisciplinary Spine Program.

“This enables them to address any aspect of spinal surgery.” Ozgur and Bhatia are both fellowship-trained in spine surgery and experts in leading-edge minimally invasive spinal procedures.

“It's now possible to decompress pinched nerves, replace herniated discs, repair damaged joints and fuse bones, all through small incisions,” says Bhatia.

Saving the muscles. The difference this approach makes can be seen clearly in a procedure called extreme lateral interbody fusion (XLIF). Involving the “welding” together of vertebrae to stabilize the spine, XLIF is used to help people with conditions that require spinal fusion such as herniated discs or scoliosis. “In the past, accessing the vertebrae for a spinal fusion required major incisions, combined with cutting and manipulating muscles to get to the backbone,” explains Ozgur.

“But using minimally invasive XLIF techniques, we can access the vertebrae through a two-inch incision in the patient's side.” Guided by high-end imaging and monitoring equipment, doctors remove the disc material from between the vertebrae and replace it with finely ground bone particles packed into a tiny metal cage. Over time, the bone grows through the openings in the cage and around the device, fusing the two vertebrae. “Because the operation is performed through a thin tube, doctors can reach the spine by going through natural separations in the muscles, rather than cutting or pulling them apart,” says Ozgur. “This helps avoid failed back syndrome, a debilitating condition that can occur due to muscle trauma.”

[It's now possible to decompress pinched nerves, replace herniated discs, repair joints and fuse bones using minimally invasive methods.](#)

X-Stop. Another minimally invasive operation called the X-Stop procedure repairs a common problem called lumbar spinal stenosis. “This painful situation develops in the lower back when bone spurs, damaged discs or unstable vertebrae narrow the space for the spinal cord,” says Bhatia. Before minimally invasive methods for spine surgery were available, doctors routinely made a five-inch incision to correct the condition. “It began at the buttocks and continued to the small of the back,” explains Bhatia. “But today, the X-Stop approach, which is performed on an outpatient basis, requires only a single two-inch incision in the center of the spine.” Not all patients are candidates for the XLIF or X-Stop procedures. But those who qualify benefit greatly from the impressive advances made in minimally invasive spine surgery over the past few years.

For referral to a UC Irvine Medical Center spine specialist, call 714-456-BACK.

Living with Bowel Disease

Although bathroom humor keeps audiences chuckling, bowel problems are no laughing matter for people with Crohn's disease or ulcerative colitis.

Known collectively as inflammatory bowel disease (IBD), these conditions affect more than 1 million Americans, causing untold pain, stress and embarrassment.

Plagued by severe cramps, diarrhea, chronic abdominal pain, fever, weight loss and rectal bleeding, people with IBD must often plan their lives around convenient access to a restroom. But there's hope. "With proper treatment and follow-up, most IBD patients can lead normal, pain-free lives," says **Dr. Nimisha Parekh**, an expert in stomach and intestinal disorders at the H. H. Chao Comprehensive Digestive Disease Center (CDDC). Parekh is fellowship-trained in gastroenterology with a concentration in IBD, making her a rare subspecialist in the condition. She's part of a team comprising more than 20 CDDC specialists who provide leading-edge care for people suffering from a wide range of digestive diseases, including IBD.

Because Crohn's and ulcerative colitis share similar symptoms, differentiating between the two can be a real challenge. Yet the way each of these conditions affects the digestive tract differs notably.

An expert diagnosis. "With Crohn's, inflammation appears in patches anywhere along the digestive tract, penetrating all layers of the intestinal lining," says Parekh. "With ulcerative colitis, inflammation and ulcers are limited to the top layer of the intestinal lining in the large intestine. Both types of IBD are believed to be caused by a dysregulation of the immune system in genetically susceptible people."

Since Crohn's and ulcerative colitis can be mistaken for each other, an expert diagnosis is critical. Testing usually involves a physical exam, blood tests, X-rays

and endoscopic procedures. Colonoscopy is considered the gold standard for diagnosing IBD. It involves the insertion of a flexible, lighted tube to look directly at the lining of the gastrointestinal tract from the anus to the lower end of the small intestine. Small samples of the intestinal lining may be taken during the procedure for examination under a microscope.

But even with the most advanced testing, it can be difficult for doctors to distinguish between Crohn's and ulcerative colitis. For this reason, the disease is classified as indeterminate colitis in about 10 percent of all cases.

"Treatment for IBD is highly individualized," says Parekh. For many patients, medications can manage the condition, resulting in long periods of remission. But for others, surgery is the only answer.

With proper treatment and follow-up, most people with inflammatory bowel disease can live normal lives.

One such operation is called a resection. It involves removing the diseased portion of the intestine and reconnecting the two healthy ends. Resections can be performed laparoscopically through tiny incisions,

significantly reducing postoperative pain and speeding recovery.

Another solution. In other cases, the diseased colon must be removed, followed by the creation of a permanent opening known as a stoma. An artificial passageway allows feces



to pass from the intestine to the outside of the body. The matter is collected in an ostomy bag, which is worn externally. However, in patients with ulcerative colitis, doctors routinely perform a procedure called an ileal pouch anal anastomosis. By fashioning a section of the small intestine into a pouch on the inside of the body and joining it to the anus, CDDC doctors are able to eliminate the need for an external bag. This is extremely complex surgery and should only be performed by highly trained colorectal surgeons with extensive experience in treating ulcerative colitis.

For referral to a UC Irvine Medical Center physician specializing in IBD, call toll free 1-888-717-GIMD.

Toll free 1-877-UCI-DOCS

Classes are free of charge to UC 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 classes 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, Apr 27, Jun 8 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: Apr 3 and 6 1-3 p.m. Class sessions: Apr 10 – Jun 1 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, Apr 19, Jun 14 6-8:30 p.m.

Spanish Breastfeeding (1 Session)

Tuesday, Apr 10, May 22, Jun 19 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, May 7, Jun 4 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, Apr 9, May 14 4-6 p.m.

Spanish Diabetes Management Overview (1 Session)

Wednesday, Apr 4, May 2, Jun 6 6-8 p.m. Location: UCI Family Health Center Anaheim
Wednesday, Apr 11, May 9, Jun 13 6-8 p.m. Location: UCI Manchester Pavilion

Vietnamese Diabetes Management Overview (1 Session)

Wednesday, Apr 4, May 2, Jun 6 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, Jun 11 – Jul 2 4-6 p.m.

Vietnamese Diabetes Management Series

Wednesdays, May 9, Jun 13, Jul 11, Aug 8 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, May 16 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, Apr 24, Jun 26 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, Apr 25 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, Apr 5, Jun 7 1:30-3:30 p.m.

Maternity Tea & Tour

Learn about maternity services and tour the medical center's Maternity Unit. Cost: Free to all. Thursday, Apr 26, May 24, Jun 28 1:30-3:30 p.m. Location: UCI Neuropsychiatric Center, conference room 101

Meditation Intermediate/Advanced (2-Session Series)

For those who have an established meditation practice and want additional guidance. No special clothing or equipment is required. Cost: \$20. Monday, May 7, 14 6-7 p.m.

Meditation Special Topic: Grief Recovery (1 Session)

Learn how meditation can help one recover from grief through guided visualization. Cost: \$20. Monday, Apr 9 6-7 p.m.

Meditation Special Topic: Tea Ceremony (1 Session)

Transforms the ordinary act of drinking tea into a social communal activity with elements of grace and spirituality. Limit 8 participants. Cost: \$30. Monday, Jun 11 6-7:30 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 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



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 \$17 for book.
Tuesdays 6:30-8 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, Apr 2, Jun 11 6-8:30 p.m.

Spanish Newborn Care (1 Session)

Tuesday May 29 5:15-7:30 p.m.
Location: UCI 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, surgical delivery, medication and anesthesia. Cost: Free to all.

Wednesdays, Apr 18 – May 23 7-9:30 p.m.
Thursdays, Apr 19 – May 24 7-9:30 p.m.

Location: UC Irvine Medical Center Library, room 2105

Tuesdays, Apr 17 – May 22 7-9:30 p.m.
Tuesday class location: Santiago Canyon College Orange Center

Spanish Prepared Childbirth (4-Session Series)

Cost: Free to all.
Tuesdays, Apr 24 - May 15 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, Apr 11, May 9, Jun 13 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, Apr 2 - 23 10 a.m.-noon
Tuesdays, May 1 - 22 Noon-2 p.m.
Tuesdays, Jun 5 - 26 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.

Tuesdays, May 22 – Jun 12 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.

Bariatric Surgery Support Group

Offers support for patients before and after laparoscopic weight-loss surgery. Information: 714-456-6185
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 Noon -1 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: 949-UCI-ADHD (949-824-2343) or www.cdc.uci.edu/chadd.shtml
Wednesdays, Apr 18, May 9, Jun 13 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: 714-456-8609
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: 1-800-ACS-2345
Mondays, Apr 9, Jun 11 10 a.m.-noon
Location: Chao Family Comprehensive Cancer Center, 4th floor conference room

Pacemaker and Defibrillator Support Group

For patients with pacemakers and defibrillators and for their families. Information: 714-456-7918
Wednesday, Apr 18 5:30-7:30 p.m.
Location: Medical library, second floor auditorium, room 2107

Third Annual Melanoma Symposium

For patients, families and caretakers. Presented in association with The Melanoma Research Foundation.
Saturday, April 21, 2007, noon-3 p.m.
Location: University of California, Irvine campus
For more information and reservations, call 1-800-MRF-1290.

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 for teens facing the challenges of illness. Information: 714-456-2295
Fridays, Mar 23, Apr 27, May 18, Jun 22 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 Share and Care Group

Support and education for women with cancer. Information: 714-456-8609
Second and fourth Tuesday every month 10-11:30 a.m.
Speaker on fourth Tuesday
Location: Chao Family Comprehensive Cancer Center, 4th floor conference room

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, Mar 28 8:30 a.m.-4 p.m.
Wednesday, Apr 25 8:30 a.m.-4 p.m.
Wednesday, May 23 8:30 a.m.-4 p.m.

Toll free 1-877-UCI-DOCS



What will it look like? A digital rendering of the new hospital.

Transformations

Color and shape are defining the emerging new university hospital at University of California, Irvine Medical Center. Recent construction has focused on installation of towering exterior walls of soft sand color that can be seen from the Santa Ana and Garden Grove freeways, as well as from bustling surface streets.

The seven-story building's exterior is made of precast concrete, with golden-hued stones at the base and soft white window sills. The windows are a light grey-green energy-efficient glass. Stair towers will be made of copper-penny colored metal.

Once the exterior structures are in place, construction will focus on building and installing interior features for quiet, patient-friendly rooms, as well as for treatment areas that will support the latest medical technology and equipment.

Completion is expected in early 2009. 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 and will replace the current main hospital building, built in 1960. During construction, all inpatient and outpatient care continues uninterrupted.

As part of the construction of the \$372 million hospital, the entrance to UC Irvine Medical Center's Emergency Department has been moved. Construction has been completed on the new Emergency Department lobby and reception area, accessible directly from Medical Center Drive, where there is parking nearby.

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

www.ucihealth.com

Seniors: Ask the Doctor

Evaluating Long-Term Care

Deciding when it's time for long-term care is one of the most daunting challenges facing seniors and those who love them. Join Dr. Sonia Sehgal, a geriatrician with UCI SeniorHealth Center, as she discusses residential care options.

Q When is it time for long-term care?

A There are usually many signs that a person is no longer capable of living independently. Having difficulty with the activities of daily living—bathing, toileting, dressing, grooming and eating—is one. Others include forgetting medications, having trouble walking and being unable to keep the house in order. Chronic conditions such as arthritis, failing vision, impaired hearing, paranoia, depression and memory loss can add to the dilemma.

Q How can home-health care and assisted living help?

A Home-health care allows people to remain in their own residences attended by helpers ranging from homemakers and aides to nurses. Services may range from hands-on nursing care to housework and help with bathing, dressing and more. Assisted living facilities provide many of the same services—except for skilled nursing help—in a group setting. Residents live in private apartments, eat in a communal dining room, have access to transportation and can participate in scheduled social activities, if they wish.

Q What about nursing homes?

A They offer a fully supervised environment for people who need 24-hour nursing care, rehabilitation or protective supervision. A higher level of care is provided at skilled nursing facilities, which can act as bridges between hospitalization and going home.

Q Do family doctors visit long-term care facilities?

A In some cases, yes, but it depends on the doctor's practice policies. UCI SeniorHealth Center doctors are strong proponents of continuing the physician-patient relationship and visit several local facilities on a regular basis.

Q What's the first step in selecting long-term care?

A A good starting point is to contact the California Registry toll free at 800-777-7575. This organization inspects and rates assisted living facilities, home-health care organizations and nursing homes. It can supply you with a free list of long-term care facilities in your area with their ratings.

Q What if a person doesn't want help?

A If a loved one is adamant about not getting help, the UCI Health Assessment Program for Seniors may smooth the way. It provides in-depth patient assessments by geriatric specialists to assist in making informed decisions about living arrangements. In some cases, a family intervention may be necessary to discuss housing with parents. Ultimately, establishing a conservatorship, which is legal control over the person's affairs, may be necessary.



Dr. Sonia Sehgal is a geriatrician at the UCI SeniorHealth Center and an expert in matters affecting seniors. She will present a free public seminar on the symptoms and treatment of shingles (herpes zoster) on Friday, March 30 at 1 p.m. The seminar will be held at Oasis Senior Center, 800 Marguerite Ave., Corona del Mar. For more information, call toll free 1-877-UCI-DOCS.

HPV Vaccinations: YES or NO?

More than 20 million men and women nationwide are currently infected with the human papillomavirus (HPV)—and another 6.2 million get it each year.

This potentially deadly infection

can lead to cervical cancer in females—a disease that strikes 10,000 American women each year and accounts for the deaths of 3,700 others.

But now the first vaccine ever developed for preventing cancer has the potential to eliminate this sexually transmitted disease in women. Called Gardasil, it was approved by the U.S. Food and Drug Administration in 2006. The vaccine is recommended for girls ages 11 to 12 when they receive routine immunizations, but can be given to those as young as 9. It's administered in three doses over a period of six months. The vaccine is also recommended for females 13 to 26 years of age.

A new vaccine protects against the four viruses responsible for a majority of cervical cancers.

“Studies show that Gardasil provides nearly 100 percent protection against HPV 6, 11, 16 and 18—the four viruses responsible for a majority of cervical cancers and genital warts,” says **Dr. Wendy Brewster**, an epidemiologist and surgical oncologist at University of California, Irvine Medical Center. Types 16 and 18 cause 70 percent of cervical cancer cases. Types 6 and 11 are responsible for 90 percent of genital warts, which don't cause cervical cancer, but are highly contagious. Although immunization will not protect against any of the four HPV strains women already have, it can guard against the others.

“Ideally, girls and women will get the vaccine before becoming sexually active,” says Brewster. In today's world, this may be earlier than many parents are

willing to admit. Government surveys have found that about 7 percent of young people have had sexual intercourse before age 13, while almost 25 percent have done so by age 15. Brewster advocates abstinence for young people until they're physically and emotionally mature. But as a physician, she's aware that many young people—even those whose families believe they would never have sex so early in life—are exposed to HPV.

Cervical cancer.

“The virus can be spread through intercourse, anal or oral sex, and genital skin-to-skin contact,” says Brewster. “Research shows that HPV infections typically occur soon after a young person becomes sexually active.” In a study of female college students in the United States, 43 percent became infected with HPV within three years of beginning sexual activity.

Cervical cancer, however, takes several years to develop. It begins when HPV hijacks a few cervical cells. Trouble develops when the virus invades normal cells located in the deepest layer of skin, which are constantly dividing to replenish the layer above it. This may cause a chronic infection that can persist for years

without symptoms, potentially developing into abnormal tissue. These changes still aren't cancer, and can continue over time before they become malignant. “It can take years for the initial infection to develop into cancer,” says Brewster. Annual Pap tests can catch this problem early.

A new frontier. What should parents tell their daughters when it's time for the HPV vaccine? “It

depends on a child's maturity level,” says Brewster. “If an 11-year-old is already showing signs of puberty, it may be the right time to discuss sexuality with her, including diseases such as HPV. But if the child is less mature, parents may want to treat the HPV vaccination like all others, explaining in general terms that it's to prevent a certain type of cancer.”

The HPV vaccine is currently being studied for use in older women, men and boys. “It's the first time a vaccine has been specifically developed for cancer prevention,” says Brewster. “The HPV vaccine represents an exciting, new frontier in medicine.” For referral to a UC Irvine

Medical Center pediatrician, call 1-877-UCI-DOCS.



Toll free 1-877-UCI-DOCS

UCI Medical Center

University of California, Irvine

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

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