David Geffen School of Medicine | UCLA Health

UCLA UROLOGY

UPDATE

UCLA Urology assistant professor Dr. Joseph D. Shirk heads clinical trials testing technology that converts CTs and MRIs to 3D images that can be viewed during robotic surgery to facilitate removal of tumors while improving outcomes.

Clinical Trials Provide Access to Tomorrow's Treatments Today

The past decade has seen an explosion of new drugs hitting the market that have extended survival and improved quality of life for urologic cancers, with many more working their way through the clinical trials pipeline — a process that can take years as they undergo the lengthy testing process required by the U.S. Food and Drug Administration (FDA).

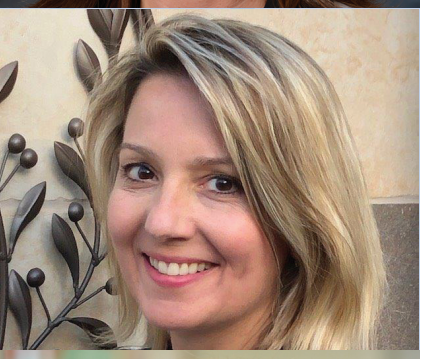
But for UCLA Urology patients, many of these cutting-edge treatments are available long before they receive approval for use in the general population. "Provenge, an immunotherapy for advanced prostate cancer, was approved by the FDA in 2010, but as far back as 2003, UCLA patients could get this state-of-the-art therapy through our clinical trials," notes Allan Pantuck, MD, MS, a UCLA Urology professor who serves as director of the UCLA Institute for Urologic Oncology (IUO)'s Genitourinary Clinical Trials team. "The same was true of Zytiga and Xtandi, effective prostate cancer drugs that came out of research in UCLA laboratories and were available to our patients for at least half a decade before getting FDA approval. By the time Sutent was approved for kidney cancer in 2006, we had been able to give it to several hundred patients."

At any one time, UCLA Urology runs dozens

continued on page 2

Fall 2020

VOL. 31 | NO. 4



From top to bottom: Allan Pantuck, MD, MS; A. Lenore Ackerman, MD, PhD; Jenny Lester, MPH; Nazy Zomorodian, MSN, CUNP; Victor Nitti, MD

continued from cover

of clinical trials through two teams — one based in the IUO for patients with urologic cancers, and a second, the *integrated* Clinical Trials Unit, offering treatment trials for benign urologic conditions. Some of the clinical trials are part of multicenter studies, or offered at UCLA through pharmaceutical companies or large governmental or academic groups; others are exclusive to UCLA, initiated by UCLA Urology investigators — often based on research that originated in UCLA laboratories.

Broadly speaking, clinical trials occupy a crucial middle ground in the three types of research conducted at academic medical institutions — translating laboratory discoveries into new diagnostic and treatment strategies that are carefully tested in patients before receiving FDA approval, at which point population-based research aims to ensure that the new therapies reach the patients who stand to benefit.

In some cases, the therapies offered through clinical trials not only hold the promise of becoming tomorrow's standard of care, but also represent the best remaining hope for patients who have run out of options after failing to benefit from current treatments. "What sets any cancer program apart are the clinical trials it offers of innovative drugs, technologies, and procedures that are not yet available to the general public," says Nazy Zomorodian, MSN, CUNP, a board-certified urology nurse practitioner and UCLA Urology instructor who serves as director of the IUO's Genitourinary Clinical Trials team. "This gives patients more treatment options, and the opportunity to be part of something bigger than themselves by pioneering treatment advances that will help future patients."

"We are highly committed to being able to offer these treatment options to our patients."

Clinical trials involve a stringent review process of measuring the safety and efficacy of new treatments before it is determined whether they should be approved for the general population. After preclinical research, phase I studies are mainly focused on ensuring the safety and tolerability of the drug or device; phase II focuses on efficacy; and phase III compares the treatment with the existing standard of care, often in multicenter studies.

Jenny Lester, MPH, clinical trials director of the *integrated* Clinical Trials Unit in UCLA's Department of Urology, notes that patients in clinical trials are closely followed, and often require additional visits and tests. "Each trial is overseen by an institutional review board, which sets strict requirements to ensure that patients understand what their participation means and are aware of any risks," she explains. Both UCLA Urology clinical trials groups look closely at the science and weigh the risks against potential benefits to patients before determining which clinical trials to proceed with. "There are always potential side effects, but patients benefit from the fact that we watch them so closely," Zomorodian says.

While generally associated with new drugs or drugs being used for new indications, clinical trials can also involve new devices or technological approaches to patient care. For example, Dr. Joseph D. Shirk heads a trial testing 3D imaging technology he has developed. His current study involves technology that converts prostate MRIs to 3D images that better show the prostate, mass, bladder, and nerves, with the surgeon able to view the model in a robot during surgery. "The study is to determine if the models allow the surgeon to fully remove the tumor while preserving the structures needed for continence and potency," Dr. Shirk explains.

The *integrated* Clinical Trials Unit runs studies on wide-ranging benign urologic conditions, from functional urology (including female pelvic medicine, lower urinary tract symptoms, and reconstructive urology) to the management of patients after kidney transplant. "We have trials that, if successful, would forever change the way patients are treated," Lester says. One such trial, headed by Dr. Jeffrey Veale, UCLA Urology associate professor and director of the UCLA Kidney Transplant Program's Kidney Exchange Program, aims to change the way transplant patients accept their kidney in order to prevent the need to be on anti-rejection medication for life.

Another active trial tests a new approach to

treat the symptoms of urinary stress incontinence through the injection into the urethra of the patient's own muscle cells. The trial is headed by Dr. Christopher Tarnay, associate professor of obstetrics and gynecology and urology. Victor Nitti, MD, professor of urology and obstetrics and gynecology, who oversees many of the benign urology clinical trials as chief of UCLA Urology's Division of Female Pelvic Medicine and Reconstructive Surgery, is set to lead a trial looking at the quality of life for patients who receive an implanted bladder pacemaker to treat problems with overactive bladder and urinary retention. The division's director of research, Dr. Lenore Ackerman, UCLA Urology assistant professor, conducts clinical studies on the impact of the microbiome on urinary symptoms, as well as the potential efficacy of a vaccination against urinary tract infections.

Dr. Nitti notes that many of the trials he leads are designed to provide data that can advance the state of the art in treatment. "Often, these trials are making an impact by improving our understanding of diseases and how they are treated, as opposed to giving patients a therapy they wouldn't otherwise have access to," he explains. Others could change the way care is delivered. Dr. Nitti is set to lead a large trial that will determine whether treating patients who have overactive bladder in part through telemedicine can achieve the same or improved outcomes and patient satisfaction as traditional in-person visits.

The IUO's Genitourinary Clinical Trials program runs trials for all types of urologic cancers, with the studies covering everything from localized, newly diagnosed cancers to end-stage disease. Some are for patients who have no other options after exhausting the available approved drugs; others are for treatments initially developed for advanced cancers that are being studied for earlier use; and still others are to potentially prevent cancers, or to use as adjunctive therapy before or after surgery to reduce the likelihood of the cancer recurring.

Compared with even a decade ago, many of the cancer trials are targeting patients with specific molecular profiles. "As the basic science advances and we understand the diseases at a genetic and molecular level, we are moving away from the 'one-size-fits-all' approach and toward testing drugs that take aim at a certain mutation and are offered specifically to patients with that mutation," Dr. Pantuck says. "When tested in everyone, a drug might not seem effective, but when we can focus on the subset of patients who are likely to benefit, we are more likely to achieve good results."

Assembling a clinical trials infrastructure requires a substantial investment. In addition to the medical and clinical directors, each team includes administrators, study coordinators, data managers, and regulatory managers, as well as specially trained nurses. "It costs quite a bit to run these studies," Dr. Pantuck says, "but we are highly committed to being able to offer these treatment options to our patients."

NEW FACES

A. Lenore Ackerman, MD, PhD

Dr. Ackerman has joined UCLA Urology as assistant professor and director of research in the Division of Female Pelvic Medicine and Reconstructive Surgery (FPMRS). Dr. Ackerman is an NIH- and DoD-funded physician-scientist who will develop a translational research program focused on characterizing the role of inflammation and microbiome in symptomatic bladder dysfunction. Her work focuses on pelvic floor disorders, bladder muscle pathophysiology, and the related impact of the urinary microbiome. She is particularly interested in the application of machine learning to the diagnosis and phenotyping of benign urologic diseases to provide more objective diagnostics and better medical decision-making in the primary care setting. Dr. Ackerman earned her undergraduate degree, her MD, and her PhD in immunology from Yale University. She completed her urology residency and FPMRS fellowship at UCLA, where she studied inflammatory responses and the microbiome in overactive bladder as a Urology Care Foundation Research Scholar.

Joseph D. Shirk, MD

Dr. Shirk has joined UCLA Urology as an assistant professor with plans to establish a Center of Urological Surgical Innovation, which will provide a collaborative environment for the development and testing of new technology. Dr. Shirk's academic work focuses on advancing the science of surgical innovation with a focus on novel imaging techniques to optimize surgical planning. His clinical work focuses on patients with urological cancers. He is based at the Greater Los Angeles Veterans Affairs Medical Center, where he sees patients and teaches. Dr. Shirk earned undergraduate degrees in genetics and biochemistry from the University of Wisconsin and his MD from the Medical College of Wisconsin. He completed his urology residency and urologic oncology fellowship at UCLA, where he studied 3D imaging in kidney and prostate cancer as a Urology Care Foundation Research Scholar.

Open Clinical Trials

FEMALE PELVIC AND RECONSTRUCTIVE SURGERY

- Effect of Microablative CO2 Laser Therapy on the Vaginal and Urinary Bacterial and Fungal Microbiota of Postmenopausal Women with Genitourinary Syndrome of Menopause
  For more information, please contact Barb Domermuth at (310) 267-4331 or bdomermuth@mednet.ucla.edu

KIDNEY TRANSPLANT

- Donor Chimerism and Graft Survival Following Combined HLA-Identical Sibling Living Donor Kidney and Hematopoietic Stem Cell Transplantation Utilizing a Conditioning Regimen of Total Lymphoid Irradiation (TLI) and Rabbit Anti-Thymocyte Globulin (rATG)
  For more information, please contact Barb Domermuth at (310) 267-4331 or bdomermuth@mednet.ucla.edu

BLADDER CANCER

- A Study Using the Research Drug E7766 to Treat Your Bladder Cancer
- A New Study to Treat Your Bladder Cancer
- A Study for the Treatment of High-Risk Non-Muscle-Invasive Bladder Cancer (NMIBC)
- Pembrolizumab with Chemo for Small Cell Bladder Cancer
- Treatment for Patients with Bladder Cancer That Has Spread into the Muscle Tissue
- Use of Study Drug, Alt-803, Plus Bacillus Calmette-Guerin (BCG) to Stop the Growth of Tumor
  For more information, please contact Nazy Zomorodian at nzomorodian@mednet.ucla.edu or visit https://www.uclahealth.org/urology/iuo/clinical-trials

PROSTATE CANCER

- An Imaging Study to Evaluate the Effects of Hormonal Treatments on Prostate Cancer Imaging with PSMA PET
- A Study of Office-Based Focal Laser Ablation of the Prostate
- A Study for Men with Prostate Cancer Who Are Candidates for Radical Prostatectomy
- A Study Using the Research Drug Talazoparib with Enzalutamide to Treat Your Prostate Cancer
- A Study of FOR46 Given Every 21 Days for the Treatment of Your Prostate Cancer
- A Study Using the Research Drug AMG 160 to Treat Your Prostate Cancer
- A New Study to Treat Prostate Cancer in People Who Have Metastatic Castrate-Resistant Prostate Cancer (mCRPC) and DNA Repair Defects
- A Registry for Men with Advanced Prostate Cancer
- Active Surveillance for Cancer of the Prostate (ASCAP)
- Cryoablation Study
- Focal MR-Guided Focused Ultrasound Treatment of Localized Low and Intermediate Risk Prostate Lesions
- Fusion Biopsy: Prostate Cancer Imaging (Fusion Biopsy Study)
- High-Intensity Focused Ultrasound Study
- Hypo-Fractionated Stereotactic Body Radiotherapy in High Risk Prostate Cancer
- Pembrolizumab with Chemo for Neuroendocrine Prostate Cancer
- Pivotal Study of MRI-Guided Transurethral US Ablation to Treat Localized Prostate Cancer
- Short-Course of Radiotherapy Following Prostatectomy for Men with Advanced Prostate Cancer
- An Experimental Imaging Scan to Treat Your Prostate Cancer Recurrence with Radiation Therapy
- HITCH: Male Veterans Hospitalized Due to COVID-19 Illness
- MIRAGE Protocol for Prostate Cancer
  For more information, please contact Nazy Zomorodian at nzomorodian@mednet.ucla.edu or visit https://www.uclahealth.org/urology/iuo/clinical-trials

KIDNEY CANCER

- Sestamibi Imaging for the Characterization of Renal Masses
- BMS Checkmate: A Study for Kidney Cancer Patients After Nephrectomy
- Molecular Imaging of Renal Tumors
- Testing the Addition of the Drug Nivolumab Before and After Surgery for Renal Cell Cancer
- Brachytherapy for Large Kidney Tumors
  For more information, please contact Nazy Zomorodian at nzomorodian@mednet.ucla.edu or visit https://www.uclahealth.org/urology/iuo/clinical-trials

Leading IMPACT Program Advocate Dies

Sam Wells, a leading advocate for prostate cancer patients who played a key role in supporting the UCLA Urology-led IMPACT program, now in its 20th year, which has brought critical medical care to thousands of low-income, uninsured California men with prostate cancer, died in March at the age of 80 after a long illness. Following his own prostate cancer diagnosis in 2002, Wells learned the importance of becoming an advocate for himself. He put those lessons to use, volunteering to help others facing the disease. “Sam was instrumental in achieving the original renewal of IMPACT, and through his lobbying efforts and securing strong legislative support, he remained steadfast in his involvement with the program throughout the last two decades of his life,” says Dr. Mark Litwin, UCLA Urology chair and IMPACT director. “Sam was reliably the first volunteer to help.”

Letter from the **Chair**

The nationwide protests that began in May following the police killings of George Floyd and Breonna Taylor represented a long-overdue outcry against systemic racism in the U.S., which dates back four centuries. As our country grapples with the fundamental changes necessary to move toward a more equitable society, it's imperative that institutions such as ours look ourselves in the mirror and take stock of how we can do better.

It's imperative that institutions such as ours ... take stock of how we can do better.

UCLA Urology's interest and active engagement on the issue of racial diversity, equity, and inclusion can be traced to well before the uprising that began earlier this year. Since the start of my tenure as department chair nearly a decade ago, a core part of our mission has been to recruit trainees and faculty from diverse racial, ethnic, gender, religious, and socioeconomic backgrounds. Through a purposeful and proactive strategy, we have experienced great success in attracting, hiring, and retaining a remarkably diverse group of talented residents, fellows, and faculty. At the same time, we have nurtured a culture of inclusiveness throughout UCLA Urology — embracing differences and learning from each other. Beyond addressing historical inequities, these changes make us much better as a department. The doctor-patient connection is essential to providing quality care, and our patients benefit when their provider team looks like and shares common experiences with them. More than that, learning from people with diverse life perspectives makes us all better physicians and better human beings.

Although we are proud of our progress, we also know that we have more work ahead. With that in mind, I recently appointed a high-level UCLA Urology task force to look at issues of racial and social justice as they pertain to our department. Co-chaired by Drs. Stanley Frencher and Jesse Mills, this task force includes a diverse group of faculty, trainees, medical students, and staff who are meeting regularly to develop recommendations for actions we can take. Obviously, the problem of systemic racism is much bigger than urology, but it's also an issue with significant public health implications. And so we pledge to remain committed to moving decisively in ways that will improve the health of our patients and contribute to a more equitable society.

❖ **Mark S. Litwin, MD, MPH**
Professor and Chair, UCLA Urology

Kudos

Carol Bennett, MD, UCLA Urology professor, chief of urology at the Greater Los Angeles Veterans Affairs Medical Center, and Henry E. Singleton Chair in Urology at UCLA, and **Isla Garraway, MD, PhD,** UCLA Urology associate professor, were recognized by UCLA Health as two of 100 trailblazing women who are making a tremendous impact in their respective areas of expertise. Drs. Bennett and Garraway were featured in UCLA Health's "100 in 100," a celebration of Women's Equality Day on the 100th anniversary of the passage of the 19th Amendment to the U.S. Constitution establishing women's right to vote.

Wayne Brisbane, MD, UCLA Urology fellow, received a $100,000 grant from the Phase I Foundation to study "MicroUltrasound for Detection and Localization of Prostate Cancer." Dr. Brisbane's mentor is **Dr. Leonard Marks**.

Karim Chamie, MD, UCLA Urology assistant professor, was co-author on a paper, "Primary chemoablation of low-grade upper tract urothelial carcinoma using UGN-101, a mitomycin-containing reverse thermal gel (OLYMPUS): an open-label, single-arm, phase 3 trial," published in *The Lancet*.

Ryan Chuang, MD, UCLA Urology resident, was first author of an article, "Hemi-gland cryoablation of clinically significant prostate cancer: Intermediate-term follow-up via MRI-guided biopsy," scheduled for publication in the November issue of the *Journal of Urology*. Dr. Chuang's mentor is **Dr. Leonard Marks.**

Isla Garraway, MD, PhD, UCLA Urology associate professor, was co-author of a paper, "Prostate cancer reactivates developmental epigenomic programs during metastatic progression," published in *Nature Genetics*.

Efe Chantal Ghanney, MD, fourth-year UCLA Urology resident, received a 2019-2020 Excellence in Teaching with Humanism Residents and Fellows Award from the David Geffen School of Medicine at UCLA (DGSOM) and the Medical Student Council. The award, created and presented by the DGSOM medical student body, recognizes residents and fellows who model exemplary behavior toward medical students and other members of the health care team.

Kathy Huen, MD, UCLA Urology resident, was recently awarded the Good Catch Award by the UCLA Health Quality Department.

Rajiv Jayadevan, MD, UCLA Urology resident, is first author of a paper, "Decisional conflict and knowledge among patients with varicocele seeking treatment for infertility," published in *Urology*. His faculty mentor for the project was **Dr. Jesse Mills.**

Mark S. Litwin, MD, MPH, UCLA Urology professor and chair, and **Dr. Deborah Krakow,** UCLA Obstetrics & Gynecology professor and chair, were awarded a prestigious five-year, $2 million T32 training grant from the National Cancer Institute. As part of the departments' joint academic, clinical, and administrative activities, they will lead the new research training fellowship, Patient-Centered Outcomes Research Training in Urologic and Gynecologic Cancers.

Victor Nitti, MD, UCLA Urology professor, received a one-year, $10,000 fellowship grant from Medtronic to support a fellow in the Division of Female Pelvic Medicine & Reconstructive Surgery.

Robert Reiter, MD, UCLA Urology professor, received a gift of $28,100 from Jon Williams via the Arizona Community Foundation for continued support of Dr. Reiter's prostate cancer research under the heading of "Maximizing Anti-Tumor Immunity in Prostate Cancer."

Robert Shahinyan, fourth-year DGSOM student, is first author of the manuscript "Direct-to-consumer internet prescription platforms overlook crucial pathology found during traditional office evaluation of young men with erectile dysfunction" in *Urology*. Among his co-authors were UCLA Urology resident alumnus **Dr. Matthew Pollard**, fellowship alumnus **Dr. Justin Nork**, and UCLA Urology faculty members **Drs. Jesse Mills** and **Sriram Eleswarapu**.

Brian Shuch, MD, UCLA Urology associate professor, was co-author on a paper, "Oncometabolite-induced inhibition of the lysine demethylase KDM4B as a molecular biological mechanism of DNA disruption in cancer," published in *Nature*.

Jennifer Singer, MD, UCLA Urology clinical professor, joined the Societies of Pediatric Urology Executive Committee and was recently named vice chief of staff at Ronald Reagan UCLA Medical Center.

Jeffrey L. Veale, MD, UCLA Urology clinical professor, was senior author of a paper, "Ensuring the need is met: A 50-year simulation study of the National Kidney Registry's family voucher program," published in the *American Journal of Transplantation*.

Dyvon Walker, fourth-year DGSOM student, is first author of a paper entitled "Impact of treatment-related adverse events on efficacy of intralesional collagenase therapy for Peyronie's disease" in the *International Journal of Impotence Research*. Walker also authored an article entitled "Erectile dysfunction and neurological comorbidities: a contemporary review" in *Current Sexual Health Reports*. His faculty mentors are **Drs. Sriram Eleswarapu** and **Jesse Mills**.

The **UCLA SPORE in Prostate Cancer** announced $525,000 in funding support for 11 translational research projects in prostate cancer. The awards encompass three awardees under the Career Enhancement Program, with the goal of supporting and attracting new investigators to the field of prostate cancer (both early career and established investigators). An additional eight awards were made as part of the Developmental Research Program, which aims to support novel translational approaches to the diagnosis and treatment of men with prostate cancer. Awardees were **Drs. Paul Boutros, Dino Di Carlo, Ajit Divakaruni, William Hsu, Minna Lee, Neil Lin, Chongyuan Luo, Robert Reiter, John Wilson Phillips, Hans David Ulmert,** and **Huihui Ye**.

DONOR SPOTLIGHT

Bruce Lee, Driven to Cure

When 19-year-old Andrew Lee was diagnosed with stage 4 kidney cancer caused by a rare disease known as hereditary leiomyomatosis and renal cell cancer (HLRCC) in 2015, he decided to devote his remaining time to raising awareness of HLRCC and rare kidney cancers, while also supporting research efforts by enrolling in clinical trials for the disease.

A fan of the "Fast & Furious" movie franchise, Lee took an unusual tact, starting a nonprofit organization, Driven to Cure, that incorporated his love of cars. With his brother, he shared his story on social media and built a following. And with his dream car — a 2015 Nissan GTR he received as a gift from his father — he spread the word at car shows. "By the time Andrew passed away, on Easter Sunday 2019, we had gone to approximately 27 car events throughout the country and received donations from people in 33 countries," says Bruce Lee, Andrew's father. "Then in the first five days after his passing, we received donations from people in 160 countries."

In an effort to extend his life and contribute to the search for an HLRCC cure, Andrew Lee enrolled in seven clinical trials after his diagnosis. One of them, at Yale, involved Dr. Brian Shuch, who has since come to UCLA, where he is a UCLA Urology associate professor, the Henry Alvin and Carrie L. Meinhardt Chair for Kidney Cancer Research, and director of the Institute of Urologic Oncology Kidney Cancer Program. Andrew and Bruce Lee developed a close relationship with Dr. Shuch as Andrew underwent the treatment regimens of clinical trials at Yale, Georgetown and the National Institutes of Health. "What's great about Dr. Shuch is his focus on collaboration," Bruce Lee says. "Especially with rare diseases, doctors sharing information is so important."

Driven to Cure has continued to thrive, having now raised more than $800,000 since its inception and being recognized as a major source of information for people with HLRCC as it promotes advocacy and funding for research on rare genetic forms of kidney cancer. In January, the Lee family presented Dr. Shuch and the collaborative Kidney Cancer Program that he leads with a check for $102,483 to support the research of Dr. Shuch and his multidisciplinary colleagues across the UCLA Jonsson Comprehensive Cancer Center. The gift also served as a formal declaration by Driven to Cure of the UCLA Kidney Cancer Program as a West Coast center of excellence for its diagnosis, treatment, and research into rare genetic kidney cancers such as HLRCC.

"Rare cancers tend to receive little attention," Bruce Lee says. "Dr. Shuch has brought his collaborative approach to UCLA, and spending time with him and his colleagues we were able to learn about the really cutting-edge work they are doing. We are excited to support the team."

ALUMNI PROFILE

Frédéric Pouliot, MD, PhD

In 2008, as a urology resident at Laval University and Québec City University Hospital Medical Center in Canada, Dr. Frédéric Pouliot concluded that conventional imaging tools for detecting prostate cancer metastasis were not nearly as precise or accurate as they needed to be. With that in mind, Dr. Pouliot — who in addition to his medical degree had earned a PhD in molecular biology — decided UCLA would be the ideal place for his urologic oncology fellowship.

"UCLA had both promising preclinical programs and clinical trials for the molecular imaging technology that was in development at the time," Dr. Pouliot recalls. "I knew I would receive strong clinical training in advanced surgeries for prostate and kidney cancer from some of the most renowned urologic oncology surgeons, while also being able to pursue molecular imaging research with a talented, multidisciplinary group of basic scientists."

After completing his UCLA Urology fellowship, Dr. Pouliot returned to Laval University, where he is currently an associate professor in the Department of Surgery as well as a urologic oncologist at Québec City University Hospital Medical Center. As a government-funded clinician-scientist, Dr. Pouliot divides his time between seeing prostate and kidney cancer patients and conducting research that evolved from his UCLA Urology training.

Based on the work he did at UCLA, Dr. Pouliot returned to Québec to establish one of Canada's first research programs focused on molecular imaging of prostate cancer. Molecular imaging is most commonly used to stage or re-stage prostate cancer, either before surgery or after failure of the primary therapy, but it is also valuable as a biomarker for therapeutic response. Dr. Pouliot is currently leading studies involving imaging and radio-ligand therapy — in which a PET tracer used to image the metastasis is linked with a radioisotope. "The tracer brings that radioisotope to the metastasis and once the radioisotope disintegrates, it kills the cells around it," Dr. Pouliot explains. "This is a novel, promising therapy in prostate cancer."

Dr. Pouliot believes one of the most valuable aspects of his UCLA Urology training experience was the exposure he received to the teamwork among basic scientists and clinicians so crucial to bringing laboratory discoveries to fruition. "UCLA is very unusual in its translational science emphasis — the idea that when you have collaborations among people from many disciplines who work in the laboratory and with patients, you can make a bigger impact on patient care," he says. "As someone with both a basic science and clinical background, that's the type of research I wanted to do, and at UCLA I learned that when you put the right people together, almost anything is possible."

David Geffen School of Medicine | UCLA Health

UCLA Urology
405 Hilgard Avenue
Box 951738
Los Angeles, CA 90095-1738

U.S.News & World Report's
UCLA Health hospitals in
Westwood and Santa Monica placed
No. 1 in Los Angeles,
No. 1 in California and
No. 4 in the nation in the 2020-21
U.S. News and World Report rankings.

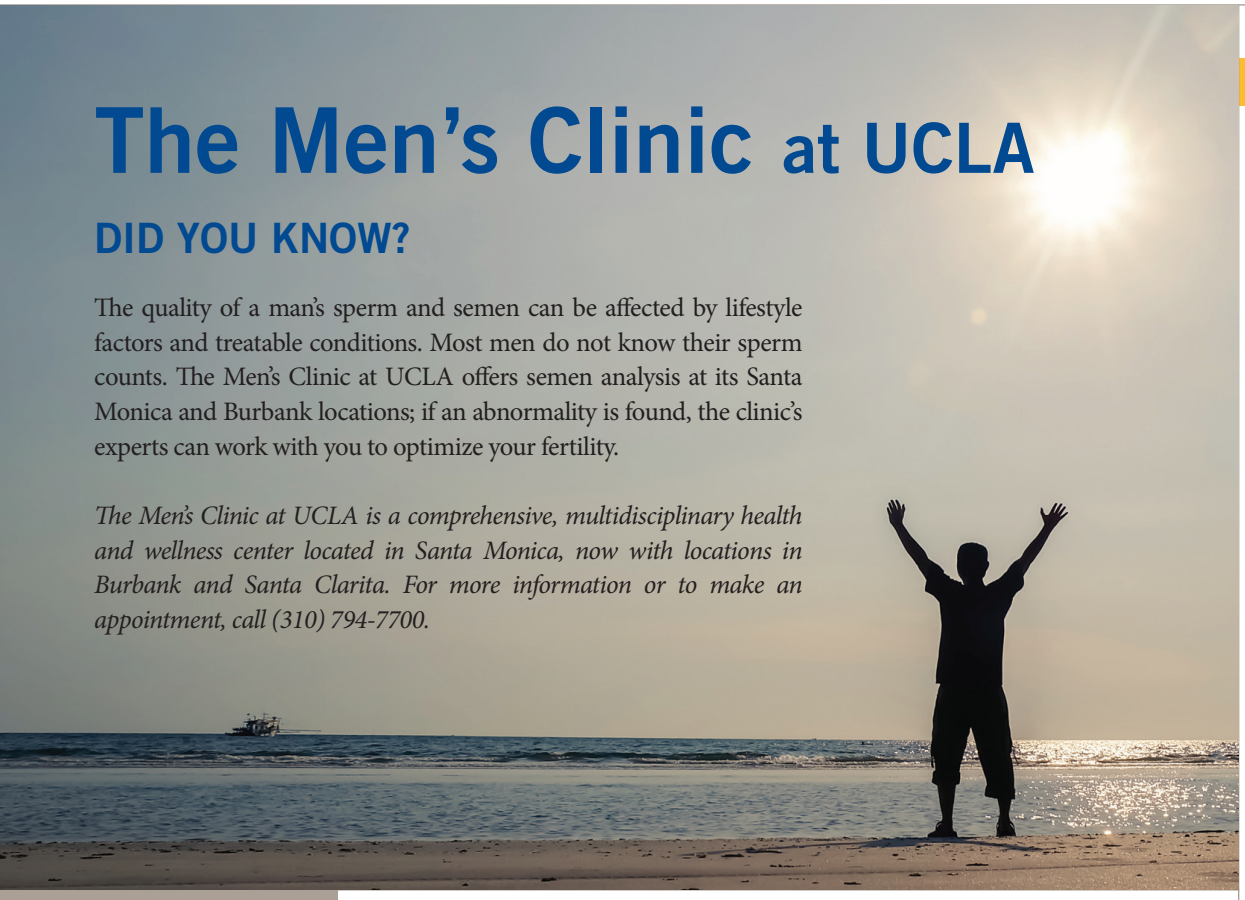
UCLA Urology: #6 in the Nation
Highest Ranked in Los Angeles

The Men's Clinic at UCLA

DID YOU KNOW?

The quality of a man's sperm and semen can be affected by lifestyle factors and treatable conditions. Most men do not know their sperm counts. The Men's Clinic at UCLA offers semen analysis at its Santa Monica and Burbank locations; if an abnormality is found, the clinic's experts can work with you to optimize your fertility.

The Men's Clinic at UCLA is a comprehensive, multidisciplinary health and wellness center located in Santa Monica, now with locations in Burbank and Santa Clarita. For more information or to make an appointment, call (310) 794-7700.



Give Now. Here's How.

Contributions to UCLA Urology support our research programs and help our faculty make the cutting-edge discoveries that can save lives. You can make a gift to UCLA Urology by logging on to *http://giving.ucla.edu/urology*. Please call (310) 206-4565 if you have any questions about making a gift to UCLA Urology.

UPDATE
Fall 2020 | VOL. 31 | NO. 4

DEPARTMENT CHAIR
Mark S. Litwin, MD, MPH

CHIEF ADMINISTRATIVE OFFICER
Laura A. Baybridge

EDITOR
Dan Gordon

EDITORIAL ADVISORS
Sarah E. Connor, MPH
Heidi Saravia

DESIGN
Wildhirt Fowlkes Graphics, Inc.

VISIT UCLA UROLOGY'S WEBSITE:
www.urology.ucla.edu

Urology Appointment Line: (310) 794-7700
UCLA Urology Website: www.urology.ucla.edu

If you received multiple copies of this newsletter, please feel free to share one with a friend or colleague.