

# Vital Signs

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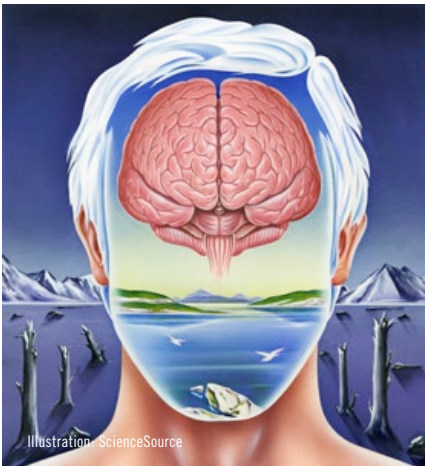


Illustration: ScienceSource

## As pandemic toll intensifies, so do stress reactions

The rollout of COVID-19 vaccines is offering hope and a path out of the pandemic, but for most people, the vaccines can't arrive fast enough and the anxiety accumulated over the past year continues to build. That, says Robert Bilder, PhD, chief of psychology at UCLA's Semel Institute for Neuroscience and Human Behavior, could lead, for many, to post-traumatic stress.

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## UCLA hospitals earn award for nursing excellence

Both Ronald Reagan UCLA Medical Center and UCLA Santa Monica Medical Center were recognized for nursing excellence by the American Nursing Credentialing Center Magnet Recognition Program. It was the fourth Magnet award for the Westwood hospital and the second for Santa Monica. Fewer than 10% of health care organizations out of nearly 6,200 nationwide are recognized as Magnet facilities. The award is conferred every four years to health care organizations that demonstrate excellence in nursing and patient care, as well as innovation in professional nursing practice.



## Save My Spot

UCLA Health has launched "Save My Spot," a new online feature for Immediate Care locations in Malibu, Marina del Rey and Santa Monica. "Save My Spot" helps patients to spend less time in the waiting room and get home faster. Simply select the Immediate Care location and choose any available same-day opening that informs the staff of your planned arrival time. Additional locations to be added soon. To use "Save My Spot," go to [uclahealth.org/immediate-care](https://uclahealth.org/immediate-care)

# What to know about home-based rapid COVID-19 tests

It is now possible to test for COVID-19 and receive quick results from the comfort of home. As of press time, the FDA has given emergency-use authorization to three home-based, self-administered tests. (More may have come out since.) While offering convenience and speed, the tests come with limitations. Katina Murray, MD, a UCLA family medicine physician in downtown Los Angeles, and Jacob Gold, MD, a UCLA internal medicine physician in Beverly Hills, discuss home-based tests and offer guidance for defending against the coronavirus.

### How do the home COVID-19 tests work?

They use nasal swabs and provide results in 30 minutes or less, Dr. Gold explains. "Two of the tests are antigen tests, and one is an RNA test, which is considered more accurate. But the gold standard of testing, which we use at the clinic, is PCR testing," he says.

### How accurate are they, and how confident can someone be who receives a negative result?

"While the tests boast an accuracy rate greater than 90%, that rate was obtained in a highly controlled testing environment," Dr. Murray says. "In the real world, you have to account for some degree of user error." Other factors also can impact test results. "These tests provide limited information. A false negative is more likely if you're in the early stages of infection or have no symptoms when you take the test," Dr. Murray says. "If there is a high rate of COVID-19 in your

area, you're having symptoms or you've been exposed to someone who tested positive, you can be pretty confident in a positive result. But if you test negative, there's still a chance that you have the virus." People who test positive should self-isolate for at least 10 days from the start of their symptoms. People exposed to someone who has tested positive should self-isolate and get tested five days after the exposure.

### When should one get tested by a health care provider?

"If you have access, testing with your health care provider is preferable," Dr. Murray says. "You'll get a higher quality test administered by someone who knows how to sample correctly. If you have moderate symptoms, your doctor can advise you on how to treat them. And if you have severe symptoms, you should be seen in person, probably in the hospital."

### What is the Swiss cheese model of pandemic defense?

An individual piece of Swiss cheese has holes, but when you stack several slices, all the holes get covered. In the same way, using multiple means of protection can help prevent the spread of coronavirus. A COVID test is one "layer" of protection.



"There's no substitute for masking, handwashing, social distancing and avoiding crowded spaces," Dr. Gold says.

### What else is key to COVID prevention?

"Keeping with the cheese metaphor, the vaccine is the biggest, thickest slice. It's most likely to help you avoid getting COVID or to have a mild case if you do," Dr. Murray says. "Even after vaccination, you should still continue with the other protective measures." Dr. Gold adds, "I want to address some concerns I've heard from patients. You absolutely cannot get COVID-19 from the vaccine, nor does it affect your genome. The vaccines are extremely safe. When your turn comes to get one, you should take it without hesitation," he says.

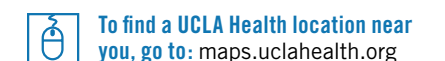
Photos: UCLA Health, iStock



Katina Murray, MD



Jacob Gold, MD





# Is it safe to return to a normal routine after COVID-19 vaccine?

You waited your turn, made it to a vaccine site, received your first dose of the COVID-19 vaccine — maybe even your second — and now you would like to return to some semblance of normal life, perhaps host a dinner party or get on a plane to visit family you haven't seen for a year.



But experts say that even after receiving both doses and waiting the two-to-four weeks it takes to develop maximum immunity, the safest way forward is to continue masking, handwashing, social distancing and not gathering with people from outside your household. “There’s some promising data out there, but we still need more information

on whether or not being vaccinated actually prevents you from carrying the virus and spreading it to others,” says Annabelle de St. Maurice, MD, MPH, co-chief infection prevention officer for UCLA Health.

“You still need to be cautious.”

Dr. de St. Maurice offers some answers to questions about COVID-19 and the vaccines.

Photo: iStock

## Can I still spread the virus even after I'm fully vaccinated?

“Scientists are continuing to study this, and early data are promising. We know that 95% of the time, you won't get sick, but we need to continue to investigate how effective the vaccines are at preventing spread of the virus.”

## Why should we get the recommended two vaccine doses rather than just settle for the limited immunity one shot might provide?

“There are a few reasons. These vaccines were studied as a two-dose series, so we know that the two doses provide a 95% efficacy. If you just get one dose, we know from the clinical trial data that it provides some protection, but we don't know if that protection lasts as long as if you got two doses. Also, when you get that second shot, it refines your immune system to be even more effective against the virus. Without the second dose, you may not have as strong of an immune response, and so for some of these variants we are seeing, maybe having only one dose could be even less effective compared to when they did the clinical trial data.”

## Do the vaccines from Pfizer and Moderna appear to be protective against these variants?

“Some of the vaccines are more effective than others against some of the variants, so it really depends. Thus far, it does seem like there's at least some level of protection from the vaccines.”

## The single-dose vaccine from Johnson & Johnson is reportedly 72% effective against moderate and severe disease, which is lower than Pfizer and Moderna's 95% efficacy. Is it still worth getting?

“We care about hospitalization and death, and all of the vaccines are effective against those outcomes. The key thing is, if you're offered a vaccine, you should take it. Because, even though we're seeing cases decrease, we certainly don't want someone to be hospitalized or die because he or she is waiting for something better. All of these vaccines are excellent.”

## Do people who have recovered from COVID-19 only need one dose of vaccine?

“I think they probably have been sort of primed, but at this time, I recommend that they get both doses. Natural infection may not give you the same level of antibodies as vaccination, so that's why it's recommended that even if you had natural infection that you receive the vaccine.”

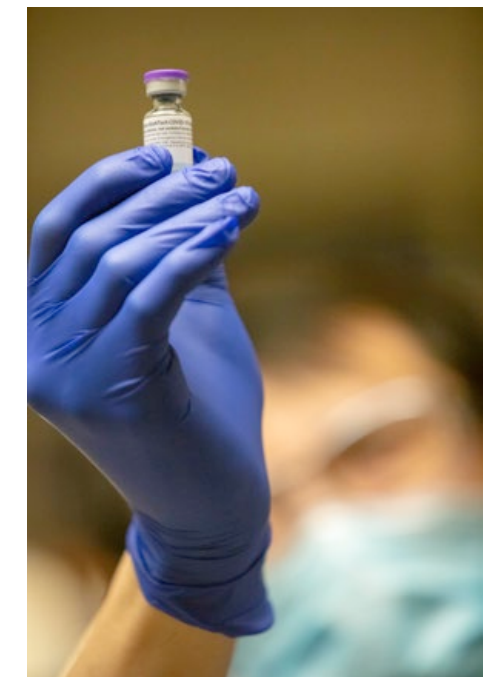
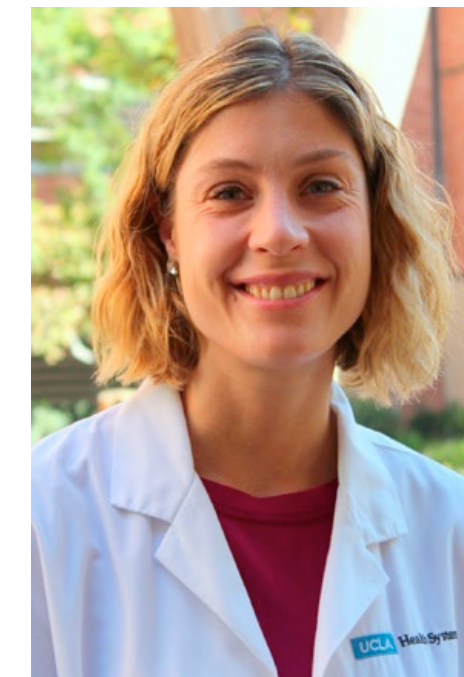
**“We all have to pitch in in order to help get ourselves out of it. Until we have a significant portion of our population immunized, we won't be able to go back to normal.”**

## The vaccines are here, but will this pandemic ever really end?

“We all have to pitch in in order to help get ourselves out of it. Until we have a significant portion of our population immunized, we won't be able to go back to normal. The long and short of it is that, unfortunately, we can't go back to

normal right now, but eventually we will, if people just do their part: Follow public health guidelines and get vaccinated when you can.”

 For ongoing information about the coronavirus from UCLA Health, go to: [uclahealth.org/coronavirus](https://uclahealth.org/coronavirus)



Dr. Annabelle de St. Maurice (top left) cautions that even after vaccination, the safest way forward is to continue masking, handwashing, social distancing and not gathering with people from outside your household.

Photos: (vaccines) Ann Johansson; (de St. Maurice) Courtesy of UCLA Health





## What pregnant women should know about vaccines against COVID-19

A vaccine is clearly the most promising strategy for combating COVID-19 for the general population, but its safety for pregnant women, who were not included in the vaccine trials, is less clear. But that doesn't mean the COVID-19 vaccines are unsafe for pregnant women. Many types of vaccines have been safely given to pregnant and lactating women for decades.

The recommendation is that women and their health care providers should weigh the benefits and risks together. When making a decision about a vaccine, there are a few things to consider: the availability of safety data on the vaccine, the risks of getting COVID-19 while pregnant, and a woman's individual health risk, such as having an underlying medical condition, for developing severe disease.

"Pregnant women have two options — to get a vaccine when it's available or to wait for more information about how the vaccine affects pregnant women," says UCLA OB/GYN Rashmi Rao, MD. "The American College of Obstetrician Gynecologists recommends that COVID-19 vaccines should not be withheld from pregnant individuals who meet criteria for vaccination. However, it's a decision that is best made in collaboration with a health care professional who knows your personal medical history."

Photo: iStock

While the vaccines have not been tested in pregnant women, there were participants in the clinical trials who did become pregnant, notes Yalda Afshar, MD, PhD, a specialist in maternal and fetal medicine. "There have been no reports of any problems with these pregnancies, and they are continuing to be monitored," she says.

Going forward, as pregnant individuals get a vaccine, the U.S. Food and Drug Administration will gather detailed information about its safety

**"Pregnant women have two options – to get a vaccine when it's available or to wait for more information about how the vaccine affects pregnant women."**

and effectiveness during pregnancy, Dr. Afshar says. The Centers for Disease Control and Prevention, along with other federal partners, will monitor new vaccines for serious side effects using existing vaccine safety monitoring systems.

Dr. Rao says that for women who are breastfeeding, "the benefits of vaccination outweigh the very small safety concerns. You do not have to delay or stop breastfeeding just because you get a vaccine." Nor is there any reason for women who are trying to conceive or undergoing fertility treatment to delay getting the vaccine. "Since these are not live vaccines, there is no reason to delay trying to get pregnant or delaying fertility treatment because of your vaccination schedule," Dr. Rao says.

And while some people experience side effects after vaccination, they generally are mild and often produce a normal bodily response to the vaccine and the development of antibodies to protect against the disease, Dr. Afshar notes. Acetaminophen generally is sufficient to address such side effects as fever or pain, she says.

 For more information about pregnancy, lactation the COVID-19 vaccine, go to: [tinyurl.com/Pregnancy-COVID-19](https://tinyurl.com/Pregnancy-COVID-19)

Continued from cover

## As pandemic toll intensifies, so do stress reactions

"At times like this, many people are experiencing levels of anxiety unlike anything they've experienced before," Dr. Bilder says.

Beyond the sheer weight of the pandemic itself, "there are other levels of loss that people are experiencing. Many are grieving the loss of loved ones. Even more widespread is the loss of social contact. In contrast to our prior lives where human contacts occurred spontaneously every day, now it's critical that we reach out to others intentionally, and build in the opportunity to be in touch with the people that we know."

Such outreach has multiple benefits. "In part, it helps to shore up your own social network. But, in addition, you're not only supporting others, you also are likely to gain quite a bit out of helping someone else," Dr. Bilder says. "That provides an increase in the level of meaning and purpose to your own life."

Finding a purpose amid the crisis is key. "Being very explicit about what you find important and valuable, and doubling down your efforts on doing that, are very important," Dr. Bilder says. "At the same time, it's important not to put such a great burden on yourself that it's unrealistic."

Difficulty sleeping also has been a significant issue for many people during the pandemic. "It's quite striking how many people reported, following the onset of the pandemic, that they were experiencing insomnia," Dr. Bilder says.

To maintain more regular sleep cycles — appropriate rest being a key protective factor against COVID-19 — he recommends exercise and other activities programmed through the day, especially outside, in the sunlight, safely distanced from others. He also recommends decreasing exposure to blue/green light, one of the causes of insomnia, at the end of the day. Blue/green light is emitted by smartphones

and other common electronic devices. "When you think about all the good things you might be able to do for your immune system, getting good sleep is one of the key things," he says.

Ultimately, Dr. Bilder believes that the pandemic will have a dramatic impact on society. "It feels like it's a part of the grand arc of history, and one that I hope pushes us toward a greater sense of community and spirit, and that forges a more collectivist alliance for the greater good," he says. He views the current circumstance as "part of the

**"It feels like it's a part of the grand arc of history, and one that I hope pushes us toward a greater sense of community and spirit, and that forges a more collectivist alliance for the greater good."**

pressure that helps us all realize that we have bigger common enemies than we have bigger differences among us."

And he believes that once stay-at-home orders and distancing requirements are lifted, people will realize how much they've missed interacting with other humans. "There's one silver lining to facing such existential threats, which supports us asking, 'What is really important? What are the things and people I value the most?'" he says. "I think a lot of people now probably value more the personal contact and connections they used to take for granted."



# Child-wellness visits are more important than ever during the COVID-19 pandemic

As the COVID-19 pandemic continues into 2021, hesitancy in tending to routine health care isn't just affecting adults, it is having an impact on children, too, as a large percentage have missed well-child appointments due to the pandemic.

"While visits have significantly increased since last spring's shutdown, the number of well-child visits is still lower than pre-pandemic levels," says UCLA pediatrician Carlos Lerner, MD. Though several "unknowns" have contributed to the confusion many parents

**"Without in-person physical education, we've had to shift toward more holistic ways for teaching kids how to stay active, such as hiking, yoga and even dancing at home."**

are experiencing during this time, skipping preventive pediatric visits could lead to health consequences down the road, he says.

"I do think families are having to make difficult choices with confusing information

presented to them, in terms of what activities to continue and what not to resume," Dr. Lerner says. Families and caretakers should prioritize well-child or wellness visits, especially when it comes to vaccinations.

With vaccination rates declining due to the pandemic, Dr. Lerner says there is an increasing risk of other diseases spreading in the community. "This is a particular time to make sure that we're protecting children from other diseases, such as measles," he says. "For the youngest of babies, whooping cough and influenza remain significant concerns and are, for them, potentially more dangerous than COVID-19."

Apart from routine vaccinations, Dr. Lerner says there are many other reasons that parents should continue wellness visits for their children, including assessments for behavioral and mental health, growth and nutrition.

For example, obesity is of increasing concern, Dr. Lerner says. "Many kids are more sedentary [during the pandemic], spending more time in front of screens and may be eating more while at home," he says.

To address this issue, Sound Body Sound Mind, a UCLA Health program to combat childhood obesity in middle and high schools, shifted its focus to provide an online physical and education curriculum for children at home. "Traditionally, schools serve as a backstop for many health concerns," says Matt Flesock,

director of the program. "Without in-person physical education, we've had to shift toward more holistic ways for teaching kids how to stay active, such as hiking, yoga and even dancing at home."

**"In some cases, the schools help us identify more serious issues that may be going on in the home. With remote learning, we've really lost one of the few remaining sources of expert contact with the child."**

Child anxiety also is of concern after months of remote education, lack of interaction with friends and other pandemic-driven stressors. Kate Sheehan, managing director of the UCLA Center for Child Anxiety, Resilience, Education and Support, says that anxiety can make kids argumentative, illogical and angry. Some children may become avoidant or lash out in a tantrum.

Dr. Lerner says that after families and

caretakers, schools are where many health concerns may come to light. "It could be something as simple as not being able to see the behavior or speech issues," he says. "In some cases, the schools help us identify more serious issues that may be going on in the home. With remote learning, we've really lost one of the few remaining sources of expert contact with the child."

As schools stop having that day-to-day

contact with kids, pediatricians serve as an important safety net for children, which is why it is important to stay in communication with them, Dr. Lerner says. He notes that most pediatricians are able to schedule telehealth or virtual visits, as well as communicate over the phone. He says even if a parent is unsure if something is worth coming in for, it is a good idea to call. "You don't have to make this decision alone," he says.



Photo: iStock

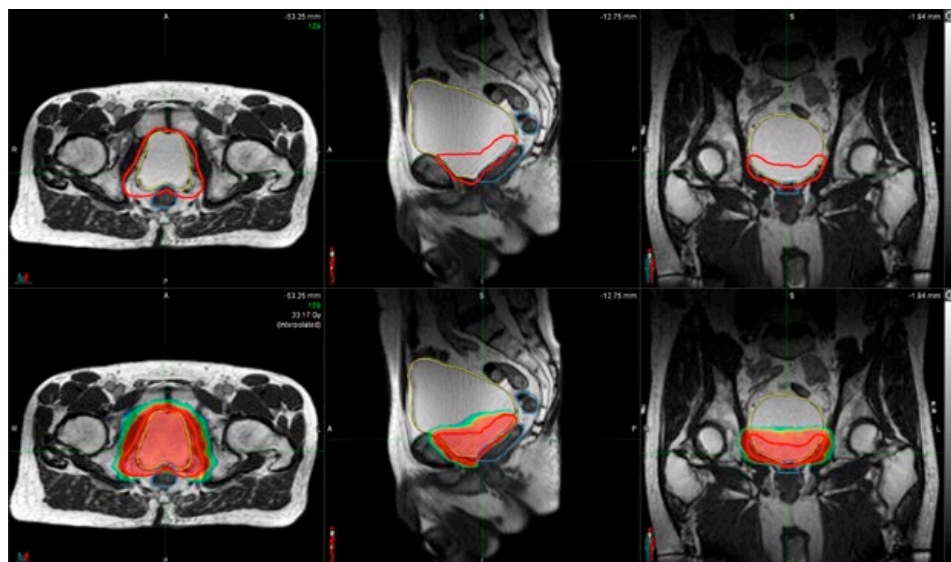


# Advances in radiation technology help physicians deliver more precise and effective cancer treatment

A new advance in radiation-therapy equipment is giving physicians the ability to better visualize tumors and internal anatomy, allowing more accurate delivery of necessary treatments.

The equipment, called the MRIdian LINAC, is an improvement over older technologies, because it uses a built-in MRI to guide radiation treatment in real time, explains UCLA radiation oncologist Amar Kishan, MD. “This makes a critical difference. MRIs have a much better spatial resolution than a CT scan,” which has been the traditional method to locate and map out areas that need to be treated but has limitations because it does not always provide the clearest picture of internal anatomy, particularly in the abdomen and pelvis. Because MRIdian can see and track soft tissue and tumors in real time, it “allows physicians to adjust radiation treatment to more accurately deliver this therapy at the right dosage and to exactly the right area,” Dr. Kishan says. This form of external beam radiation therapy allows radiation oncologists to provide treatment while reducing exposure of healthy tissues.

The MRIdian is currently available only at a limited number of major medical centers, including UCLA, which began using



MRI images from the MRIdian device for a patient undergoing radiation therapy after surgical removal of the prostate show an outline of the bladder (yellow) and the target area suspected of harboring cancer cells (red), with the colorwash indicating the gradient of dose that is delivered.

Image: Courtesy of Dr. Amar Kishan

which is why we have two major clinical trials ongoing,” Dr. Kishan says. “One is for patients who have not had surgery, and the other is for patients who have had surgery and need radiation afterward.” Because of MRIdian’s improved effectiveness in accounting for daily changes in anatomy, Dr. Kishan and his research team are able to safely deliver higher doses of radiation to patients. Dr. Kishan explains that after prostate cancer surgery, for example, the treatment is delivered in the space between the bladder and the rectum. These two organs change in size. This makes the MRI-guided treatment with better resolution an improved option for more precise prostate cancer treatment.

In previous studies, Dr. Kishan has found that treatment for some cancers with higher doses of radiation over a shorter period of time can be as successful as a significantly longer

course of treatment. For example, in one such previous study, the results showed that radiation therapy sessions could be cut from 45 days to four or five days, with the same successful outcomes as the longer course of treatment.

Having to come in daily for treatment over an extended period of time can be very burdensome on a patient, but “with the improvements we are seeing with a device like MRIdian, treatment can be delivered safely and effectively in a much shorter time frame without additional toxicity or compromising any chance of a cure,” Dr. Kishan says.

**“This new technology has particular advantages for patients with prostate cancer, which is why we have two major clinical trials ongoing.”**

it in December 2019 at Ronald Reagan UCLA Medical Center. The technology can be employed to treat any type of soft-tissue cancer and tumor, and it currently is being used by UCLA Health Jonsson Comprehensive Cancer Center in multiple clinical trials for pancreatic cancer, sarcomas and prostate cancer.

“This new technology has particular advantages for patients with prostate cancer,

# Is exercise safe after COVID-19?

ASK THE DOCTORS



Drs. Eizabeth Ko and Eve Glazier  
Photo: Juliane Backman

“Ask the Doctors” is a nationally syndicated column written by Eve Glazier, MD, president of the UCLA Health Faculty Practice Group, and Elizabeth Ko, MD, medical director of the UCLA Health Integrative Medicine Collaborative.



**DEAR DOCTORS:** I’m a 38-year-old man, very athletic, and I got really sick with the coronavirus. I didn’t land in the hospital, but it’s been a month and I’m still not 100 percent. I want to get back to running and lifting weights. Is it safe to exercise after COVID-19?

**DEAR READER:** We have to begin with the reminder that we’re still in the early stages of learning about the virus and the disease that it causes. That said, a growing body of research suggests that, for some people who have recovered from COVID-19, a range of adverse health effects can continue after the initial disease has run its course. This is particularly true for older patients and those with preexisting health conditions. There may also be a link between how severe

someone’s illness was and their risk of developing more serious complications once they have recovered.

Although we think of COVID-19 as a respiratory illness, it can damage other organs, adversely affect the body’s blood-clotting mechanisms and cause lingering systemic inflammation. Scans of patients who have

recovered from COVID-19 reveal damage to the lungs, heart and kidneys, as well as dangerous levels of blood-clot production. Survivors report lingering pain, shortness of breath, so-called “brain fog” and persistent fatigue. Some people experience heart arrhythmias, and some develop hypertension. A number of recovering patients also find themselves dealing with ongoing episodes of depression and anxiety.

When it comes to exercise, the current advice for people recovering from mild or moderate COVID-19, and who were not hospitalized, is to wait at least two weeks before resuming physical activity. It’s not only much-needed rest; it’s also an opportunity to evaluate how you feel being up and about, what kind of activity causes fatigue and at what point you tire. For those who

experience a continual recovery in the weeks after being ill, it is considered safe to gradually resume physical activity once the two-week rest period is over. But it’s important to ease back into being active. Pushing yourself post-illness does more harm than good.

Since you report that you were significantly ill with COVID-19, you should check in with your health care provider before working out again. Describe the course of your illness and everything you’re experiencing since recovering. It’s possible you’ll be asked to undergo some diagnostic tests to assess heart and lung function before being cleared for more vigorous activity. Athletes who have recovered from COVID-19 are finding initial workouts to be challenging. In addition to a light cough and mild shortness of breath, they report a dive in stamina. If you experience more severe symptoms, such as an irregular or racing heartbeat, chest pain or tightness or severe or long-lasting shortness of breath, it’s important to immediately stop what you’re doing and check in with your health care provider.

Athletes are used to bouncing back from a cold or the flu, and the slow trajectory of COVID-19 recovery can be frustrating. But please don’t try to push it. Moving forward slowly and cautiously is your best shot at a full recovery.

To Ask the Doctors, e-mail: askthedoctors@mednet.ucla.edu

# Community Health Programs

## APRIL/MAY/JUNE 2021 COMMUNITY CALENDAR EVENTS

UCLA Health offers community programs and events to help our neighbors lead healthier lives through wellness education. Go to [connect.uclahealth.org/calendar](https://connect.uclahealth.org/calendar) for more information.

### BRAIN HEALTH

#### Dementia (ongoing)

Memory Care is a weekly, 90-minute program for memory-challenged, middle-aged people and their loved ones. It teaches memory techniques and strategies and offers support to people with memory challenges and their caregivers.

**When:** Tuesdays or Thursdays

**Where:** Teleconference session

**Info & Cost:** [Longevity@mednet.ucla.edu](mailto:Longevity@mednet.ucla.edu)

### KIDNEY

#### Peritoneal Dialysis

UCLA CORE Kidney Program presents Anjay Rastogi, MD, PhD, clinical chief of nephrology, who will discuss peritoneal dialysis, a type of dialysis that patients can be trained to do at home. He will cover various aspects of peritoneal dialysis including eligibility, training and potential complications.

**When:** Thursday, May 13 / 5 – 6 pm

**Where:** Teleconference session

**RSVP:** [COREKidney@mednet.ucla.edu](mailto:COREKidney@mednet.ucla.edu) to receive the Zoom invitation

#### Living Kidney Donation

UCLA CORE Kidney Program presents Anjay Rastogi, MD, PhD, clinical chief of nephrology, who will discuss various aspects of living kidney donation, including the application, eligibility, comprehensive evaluation and transplantation process.

**When:** Tuesday, June 8 / 5 – 6 pm

**Where:** Teleconference session

**RSVP:** [COREKidney@mednet.ucla.edu](mailto:COREKidney@mednet.ucla.edu) to receive the Zoom invitation

### MOVEMENT DISORDERS

#### How to Shake the Shakes

UCLA movement disorders specialists will discuss treatment options to cope with tremors, including medicines, surgery (deep-brain stimulation) and noninvasive therapies. Lecture followed by Q&A.

**When:** Saturday, May 22 / 9 am — noon

**Where:** Teleconference session

**RSVP:** [ucla.tremor@gmail.com](mailto:ucla.tremor@gmail.com)

### MULTIPLE SCLEROSIS

#### REACH to Achieve Program (Ongoing)

This weekly comprehensive wellness program focuses on fitness, memory, emotional well-being, recreation, nutrition and health education for those living with multiple sclerosis.

**Where:** Teleconference & Marilyn Hilton MS Achievement Center, 1000 Veteran Ave.

**Info & Application:** 310-267-4071

#### Exercise and MS

This 12-week program will teach those with MS how to use exercise to improve overall wellness and manage MS symptoms. Participants must be able to easily walk a minimum of 25 feet with or without a cane or walker.

**When:** Monday afternoons

**Where:** Marilyn Hilton MS Achievement Center, 1000 Veteran Ave.

**Info & Application:** 310-267-4071

### PODIATRY

#### Heel and Ankle Pain

Gary Briskin, DPM, will discuss common causes of heel and ankle pain, as well as surgical and nonsurgical therapies.

**When:** Tuesday, May 18 / 5:45 – 6:45 pm

**Where:** Teleconference session

**RSVP:** 310-828-0011 to receive the Zoom invitation

#### Ankle Arthritis and Ankle Replacement

Bob Baravarian, DPM, will discuss the latest advances in treating foot and ankle arthritis, including injection joint lubrication, arthroscopic cleanup, joint-preservation surgery, fusion surgery and ankle-replacement surgery.

**When:** Tuesday, Jun 15 / 5:45 – 6:45 pm

**Where:** Teleconference session

**RSVP:** 310-828-0011 to receive the Zoom invitation



## UCLA patients need blood donations

The need for blood and plasma during the COVID-19 pandemic remains acute. Blood donation is a way for healthy people to make a significant contribution during this difficult time. The UCLA Blood & Platelet Center follows the precautions recommended by the American Association of Blood Banks to keep donors and staff safe. For more information and to schedule an appointment to donate, go to: [uclahealth.org/gotblood](https://uclahealth.org/gotblood)



UCLA HEALTH 50 PLUS IS A FREE MEMBERSHIP PROGRAM that offers individuals age 50 and older access to educational lectures, exercise opportunities, information on community and health resources, a free flu shot, Tech Help for U, and health insurance information. Go to [uclahealth.org/50plus](http://uclahealth.org/50plus) to become a member or call 800-516-5323.

To socially distance and stay safer at home, all of our health talks will be held virtually. Go to [connect.uclahealth.org/calendar](http://connect.uclahealth.org/calendar) to see a full listing of programs. To learn how to use Zoom to participate in teleconference sessions through UCLA Health, contact our office at 800-516-5323 and we'll send printed instructions.

**5+** Memory Training Course (monthly)

Memory Training is an innovative, four-session educational program for improving memory designed for people with mild memory concerns (not dementia). Participants will develop good memory habits and techniques to improve their memory.

**When:** Please email for next session date

**Where:** Teleconference session

**Info & Cost:** [longevity@mednet.ucla.edu](mailto:longevity@mednet.ucla.edu)

**5+** Brain Boosters (quarterly)

Brain Boosters provides information on healthy aging research and exercises to enhance overall cognitive function.

**When:** Please email for next session date

**Where:** Teleconference session

**Info & Cost:** [longevity@mednet.ucla.edu](mailto:longevity@mednet.ucla.edu)

**5+** Senior Scholars

The UCLA Longevity Center invites adults age 50 and older to audit undergraduate courses taught by UCLA's distinguished professors.

**When:** Session A begins June 21; applications open April 26 and close May 28. Session C begins Aug. 2; applications open April 26 and close July 5

**Info & Cost:** [semel.ucla.edu/longevity/senior-scholars-program-longevity-center](http://semel.ucla.edu/longevity/senior-scholars-program-longevity-center) or [srscholars@mednet.ucla.edu](mailto:srscholars@mednet.ucla.edu) or 310-794-0679

**5+** Brain Boot Camp (monthly)

This interactive educational program provides participants with lifestyle strategies and tools to keep their brains vital and healthy.

**When:** Please email for next session date

**Where:** Teleconference session

**Info & Cost:** [longevity@mednet.ucla.edu](mailto:longevity@mednet.ucla.edu)

**COVID-19 Clinical Trials**

UCLA conducts research for a wide range of medical disorders and offers patients opportunities to participate in research and clinical trials. Below are some of our active clinical trials dedicated to the research and treatment of COVID-19.

**TRACE COVID-19 (Tracking Electrocardiographic Changes in COVID-19)**

In the TRACE COVID-19 study, we are investigating whether COVID-19 infection causes any changes in heart electrocardiogram (ECG) tracings that can be detected by wearable devices, such as the Apple Watch. The goal is to determine whether the ECG can detect COVID-19 infection before the onset of any symptoms. Study participants will be asked to use their Apple Watch to obtain their ECG and fill out a very short survey daily. All data are de-identified (anonymized). For more details and to enroll in the study, please go to the study website: [tracecovid19study.com](http://tracecovid19study.com)

**Innovative Support for Patients With SARS-CoV-2 Infections (COVID-19) Registry (INSPIRE)**

This study will use a digital platform to longitudinally track comprehensive information, including patient self-report as well as data that describe the process and outcome of care in the electronic medical record (EMR) of a large representative sample of patients under investigation for SARS-CoV-2. The objective is to generate knowledge rapidly using digital tools and collaborative sciences to produce real-time data, analysis and reporting compared to more traditional methods. An additional goal is to promote an open science approach whereby scientists, with proper approvals and in line with the permissions granted by the participants, have the opportunity to work with data in ways that protect individual privacy but promote rapid dissemination and implementation of knowledge.

**Early Detection of Health Improvement and Decline through Remote Health Monitoring in COVID-19 Positive Patients and in Those with Known Exposure of COVID-19**


The main goal of this study is to evaluate and help predict decline in at-risk populations with COVID-19 or those exposed to COVID-19+ individuals who could benefit from having a remote monitoring system in their homes to provide valuable information to their care teams. As part of this study, you will receive a kit in the mail with a smart watch, sleep-tracking device, thermometer, oximeter and a tablet. Daily surveys with your symptoms will be collected, which you can also share with your doctor. At the end of the study, you will be asked to do a one-time online survey and return your system kit to UCLA via mail. We believe the activity data collected by the system will help us to identify and predict those who are at higher risk for decline due to the virus or predict exposure and virus outcome.

**Immune Modulators for Treating COVID-19**

ACTIV-1 IM is a master protocol designed to evaluate multiple investigational agents for the treatment of moderately or severely ill patients infected with SARS-CoV-2. The research objectives are to evaluate each agent with respect to speed of recovery, mortality, illness severity and hospital resource utilization. Each agent will be evaluated as add-on therapy to the standard of care (SoC) in use at the local clinics, including remdesivir (provided). The SoC may change during the course of the study based on other research findings. Comparisons of the agents among themselves is not a research objective. The study population corresponds to moderately and severely ill patients infected with COVID-19. Recruitment will target patients already hospitalized for treatment of COVID-19 infection, as well as patients being treated for COVID-19 infection in Emergency Departments while waiting to be admitted to the hospital. Patients both in and out of the ICU are included in the study population.

**Antithrombotics for Adults Hospitalized with COVID-19 (ACTIV-4)**

This is a randomized, open-label, adaptive platform trial to compare the effectiveness of antithrombotic strategies for prevention of adverse outcomes in COVID-19 positive inpatients.

 For more information, including a full list of active COVID-19 clinical trials at UCLA Health, please visit: [uclahealth.org/covid-19-clinical-trials](http://uclahealth.org/covid-19-clinical-trials)



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David Geffen School of Medicine at UCLA ranks #6 in Research and #11 in Primary Care nationwide.

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## Celebrate caregivers with a gift to UCLA Health

Over this past year, UCLA Health care providers, researchers and staff have worked tirelessly on behalf of our patients and community, demonstrating their dedication on the frontlines of the pandemic to save lives, meet the ongoing needs of our patients and broader community, and advance life-changing discoveries to diagnose, treat and cure disease.

This past month, we celebrated National Doctors' Day, kicking off a season of giving that continues through Nurses' and Hospital Weeks in May. Now, more than ever, it is important to recognize those who give us hope, health and healing. Please consider making a tax-deductible gift to UCLA Health today.

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