

Strong Heart

Advanced cardiac valve surgery helped keep young weightlifter Arik Bibicoff in the gym. | Page 8

USC health

2026
ISSUE TWO

A PUBLICATION OF KECK MEDICINE OF USC

Keck
Medicine
of **USC**
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A woman wearing a bright yellow puffer jacket, a red beanie, and dark leggings is captured mid-jump over a large, mossy rock. She has her arms outstretched and a joyful expression. The background is a dense forest of evergreen trees with patches of snow on the ground and branches. The overall scene conveys a sense of freedom and outdoor adventure.

TOGETHER WE ARE

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Keck Medicine of USC is one of only two university-based medical systems in the Los Angeles area. Its internationally renowned physicians and scientists provide world-class patient care at Keck Hospital of USC, USC Norris Cancer Hospital, USC Verdugo Hills Hospital, USC Arcadia Hospital and more than 80 outpatient facilities throughout Los Angeles, Orange, Kern, Tulare, Ventura and Clark counties.

Keck Medical Center of USC, which includes Keck Hospital and USC Norris Cancer Hospital, is among the top 30 hospitals in the country in 8 specialties, as well as a top 10 hospital in California, according to U.S. News & World Report's 2026-27 Best Hospitals rankings.

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Vitals

Keck Medicine's Millionth Patient of the Year Finds New Trust in Healthcare

Sheryl Heyser grew up with religious beliefs that included abstaining from medical treatment. Because of this, Sheryl says, "I grew up with a distrust of all things medically related." Throughout her life, she rarely sought medical treatment.



Photo courtesy of Kevin Cao

However, when Sheryl's longtime cardiac arrhythmia symptoms became increasingly serious, she began to search for advanced care. "For as long as I can remember, I have had an irregular heartbeat, but I did not give it much thought," she says. "It was not until July 2021 that something happened to really raise alarm."

A passionate beekeeper, Sheryl one day experienced shortness of breath, extreme fatigue and a racing heart while tending bees. At a local hospital, she was diagnosed with atrial fibrillation (AFib), a type of irregular and rapid heartbeat (arrhythmia). She learned she would need ablation — a minimally invasive procedure that can help shield the heart from electrical triggers that cause an irregular heartbeat.

Sheryl began searching for a place to get that treatment.

In March 2022, a physician friend of her eldest son recommended that Sheryl see Keck Medicine of USC internal medicine physician Carrie Ward, MD. She says the level of care she received from Dr. Ward far surpassed anything she'd experienced. She also got a referral to Keck Medicine cardiologist Helga Van Herle, MD, and cardiac electrophysiologist Andrew Zadeh, MD.

"Dr. Zadeh was very thorough and provided me with all the information I needed to make an informed decision about my best course of treatment," Sheryl says. "It was evident that without an ablation, I would remain in AFib and would have an increased risk of stroke."

Following her ablation, Sheryl continued seeing Dr. Zadeh, who later addressed additional cardiac conditions, including symptomatic sinus bradycardia — in which the heart beats too slowly — and side effects of taking blood thinners. Sheryl says all her experiences were positive and helped her continue beekeeping.

Incidentally, Sheryl's June 2026 appointment with Dr. Zadeh marked a milestone: Sheryl became the one-millionth patient to visit Keck Medicine in the past 12 months.

She says her care from Keck Medicine has restored her faith and optimism in healthcare. Today, she sees numerous Keck Medicine providers, including for dermatology, gastroenterology, orthopedic surgery, rheumatology and physical therapy.

"I went from not trusting doctors at all to placing my complete trust in the professionals at Keck Medicine," she says. "My biggest regret is that I did not find Keck Medicine decades ago."

Ricardo Carrasco III



Keck Hospital of USC Recognized as Vizient Top Performer

Keck Hospital of USC has been named a top performer in the 2026 Bernard A. Birnbaum, MD, Quality Leadership Ranking by Vizient®, recognized for demonstrating excellence in delivering high-quality care based on the Vizient Quality and Accountability Study.

This marks the third consecutive year that Keck Hospital has received Vizient's highest recognition for quality and accountability. The hospital ranked No. 11 among 122 comprehensive academic medical centers nationwide.

"This recognition reflects the dedication of our physicians, nurses and staff who work every day to provide exceptional care to our patients," said Marty Sargeant, MBA, chief operating officer of Keck Medicine of USC and CEO of Keck Medical Center of USC. "Receiving this distinction for the third time in a row demonstrates our commitment to continuously improving quality and the patient experience."

Vizient, a leading healthcare performance improvement company, annually evaluates participating academic medical centers and health systems through its Quality and Accountability Study. The assessment measures performance across six domains: safety, mortality, effectiveness, efficiency, patient centeredness and variation in care.

"This year's recognition includes exceptional performance in patient centeredness, effectiveness and variation in care, reflecting Keck Hospital's commitment to patient experience while leveraging innovation and expertise to deliver the best possible quality outcomes," said Tom Bates, MBA, RN, chief quality officer for Keck Medicine.

The study factors in measures from the Vizient Clinical Data Base and includes performance data from the Hospital Consumer Assessment of Healthcare Providers and Systems survey and the CDC's National Healthcare Safety Network.

The recognition period spans from July 1, 2025, through July 30, 2026.

Keck Hospital of USC is a 343-bed acute care hospital and part of Keck Medicine of USC, the University of Southern California's medical enterprise.

When Is It Time for Back Surgery?

Since surgery for back pain involves the spine, decisions involving it merit ample consideration. Jeffrey C. Wang, MD, an orthopedic surgeon and co-director of the USC Spine Center, part of Keck Medicine of USC, shares what to consider.

Know all your treatment options

Back surgery should fit with your overall care plan and only be considered when it's the best option. This means you've tried all the reasonable nonsurgical options and conservative treatments.

Understand the pros and cons

You should have a basic grasp of your spinal condition and whether the surgery you're considering is likely to alleviate your symptoms. Nothing in surgery is guaranteed, so you should know the potential benefits as well as the risks.

Get physically ready

Undergo a complete medical evaluation and optimize your health before surgery. This often includes medical clearance, stopping all medications that could delay recovery and making sure any pain medications you're on are optimized before the procedure.

Do your homework

Nerves are normal. A red flag, however, is having many doubts. A preoperative meeting with your doctor can help. I always want my patients to feel comfortable with the surgery. Your hospital may also offer preoperative classes that can provide extra information.



The best way to stop a nosebleed is to apply pressure by externally pinching the side walls of your nose together with two fingers for 15 minutes to compress any blood vessels that may be bleeding.

If applying firm pressure doesn't stop it, seek medical attention.

MEET OUR STAFF

A Lifetime of Lung Transplant Care

Casey Wollenberg, MSN, RN, FNP-BC, a nurse practitioner and lung transplant coordinator with the USC Transplant Institute, part of Keck Medicine of USC, assists patients from the moment they get evaluated for lung transplant and throughout their post-transplant lives.



Ricardo Carrasco III

What does your job entail?

I help patients during their transplant evaluation process, pre-transplant and after transplant. Before transplant, I monitor the progression of their disease and readiness for transplant, helping them optimize any issues that might affect their success. After transplant, I help the patient with the protocol for immunosuppression and any complications that may arise. I also make medication adjustments and order and review diagnostic tests.

What excites you about your work?

The complexity of the medicine and the patients. Throughout my career, I have felt incredibly privileged to be one of the people who witnesses patients at their most vulnerable, and many times, at their most successful. Patient care needs to be patient-centered. We can't make anything algorithmic because each patient and their experience is unique, including their medical issues, disease characteristics, support system and psychosocial needs. As a nurse practitioner, I can take more time to answer a patient's questions and give thorough education to ensure their success.

What do you enjoy doing in your free time?

When I'm not taking care of people, I'm taking care of animals. I have a lot of pets. I also love learning. I like to study different languages and my ethnic heritage and background. I read anything I can get my hands on.

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How to Check for Testicular Cancer

Testicular cancer can develop in patients of all ages, but it's most common between ages 20 and 39. It's highly survivable when caught early, but, if left untreated, testicular cancer can metastasize and become life-threatening.

The experts of USC Urology, part of Keck Medicine of USC, share what you need to do to catch testicular cancer when it's easiest to treat.

To do a self-check:

- During or after bathing, stand in front of a mirror and check for abnormal testicle swelling.
- Using both hands, hold one of your testicles between your thumbs and fingers.
- Gently roll the testicle between your fingers, feeling for hard lumps, nodules or changes in size or shape. Make sure the testicle is smooth and firm.
- Repeat on the other side.

You should not feel any pain during the exam. If you feel pain that doesn't go away with a gentler touch, or you feel any soreness or heaviness, call your doctor.



Forgetfulness: What's Normal, What's Not

Misplace your car keys? Forget someone's name? Lapses in memory happen, but sometimes we wonder whether these slips are normal.

Helena Chui, MD, chair of USC Neurology, part of Keck Medicine of USC, an internationally recognized Alzheimer's disease expert, shares several ways to tell the difference between normal forgetfulness and something more serious.



What's Normal

- Absentmindedness.
- Occasionally forgetting where you placed things.
- Forgetting facts over time. Like computers, our brains need to purge old data.
- A "tip of the tongue" memory slip that you remember later.
- Utilizing reminders to help you remember.
- Despite memory lapses, if your personality and mood remain the same.

What's Not Normal

- Frequent pauses to retrieve words or memories.
- Forgetting recent events.
- When loved ones notice memory loss before you do.
- Mood swings and personality changes also occur.
- Difficulty performing simple, routine tasks, like paying bills and dressing.
- Getting lost in familiar places.
- Repeating the same conversation.



what's the
Word?
Schwannoma
noun
[Shwah-NOH-muh]

A tumor that grows on a nerve cell, which is usually benign (noncancerous).

"It's not the nerve fiber itself that is the tumor; it's the myelin sheath around the nerve that turns into the tumor," says John Oghalai, MD, an otolaryngologist and chair of the USC Caruso Department of Otolaryngology – Head and Neck Surgery, part of Keck Medicine of USC, who specializes in ear and skull base surgery. "You can compare it to an electrical wire: it's not the copper inside; it's the plastic coating. The coating around the nerve starts growing out of control."

While schwannomas usually aren't cancerous, they can compress the affected nerve as well as damage surrounding structures like other nerves, the spinal cord or brain. They most commonly occur on the vestibular nerve, which can lead to problems with hearing, ringing in the ears and/or dizziness.

The standard treatments are surgery and/or radiation therapy. Both treatments can now be done using conservative measures to obtain excellent outcomes.

To learn more or make an appointment, call (800) USC-CARE or visit KeckMedicine.org.

The Big Question

It can be difficult to remember everything your doctor said at your appointment. Two Keck Medicine of USC experts share their advice for keeping track of medical information.

How can I remember important medical information?



As a primary care physician, I encourage all my patients to keep a notebook, binder or journal for their visits. In this log you can keep your own notes to track your symptoms and record how well various treatments are working for you. If you are tech-savvy, you can also use a cellphone or a tablet to keep notes. Bringing these logs/journals to each visit helps to keep your visit focused so that you can use your face-to-face time with your doctor efficiently.

Even patients who see multiple specialists for several complicated conditions can benefit from semiannual care-planning visits with a primary care provider. We serve as central providers who can review information from all your specialists and make sure each issue is being correctly monitored and that your medications are refilled.

Hearing and vision impairment also play a significant factor in remembering information. Hearing and vision loss happen so gradually that people often do not notice until family members bring it to their attention. Having these properly assessed and taken care of will improve daily function and communication, especially when it pertains to important medical information.

Nancy Moore, DO
Primary Care Physician
Internal Medicine



Many times, hearing a new diagnosis for the first time can be overwhelming. When emotions are high, it's completely normal to miss details or have trouble remembering everything discussed during your appointment.

One of the best things you can do is bring someone you trust with you. In my practice, which focuses on men's sexual medicine and fertility, many patients bring their partners. These conditions often affect both members of a couple, and having everyone involved in the conversation helps ensure we develop a treatment plan that aligns with each person's goals.

As physicians, we also have a responsibility to make complex medical information easier to understand. Before each visit ends, I review the diagnosis, summarize the key takeaways and provide patients with a simple checklist of next steps, so they remember exactly what to do once they get home.

And remember, your appointment doesn't have to be the end of the conversation. If questions come up later, don't hesitate to reach out to your care team through myUSCchart or by calling the office.

Kian Asanad, MD
Urologist and Director
USC Fertility & Men's Sexual Health Center
USC Urology

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How to Eat to Reduce Stomach Cancer Risk

While genetics have the strongest influence on your stomach cancer risk, diet can have a cumulative effect on your stomach's health over time, according to Sharon Shiraga, MD, an upper-gastrointestinal surgeon with Keck Medicine of USC.

As such, even people with a greater genetic risk may be able to help lower it through dietary and lifestyle changes, she says.

Dr. Shiraga advises eating:

Fewer commercially processed and preserved foods

"It's really hard to find prepackaged food without a very high content of sugar, salt and potentially harmful chemicals," Dr. Shiraga says.

More fruits and vegetables

The antioxidant compounds in produce can provide extra protection. When meal planning, try to fill half your plate with vegetables.

Mediterranean diet

It emphasizes whole, plant-based foods and healthy fats. Choose high-quality proteins like lean meat, fish and legumes. Avoid foods known to cause inflammation and eat fewer starches, including potatoes and pasta.

The goal isn't to create anxiety around every food choice but to "do your best to make healthy choices to reduce your overall risk," Dr. Shiraga says.

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Strong Heart

A cardiac valve surgery known as the Ross procedure gave a 21-year-old Arik Bibicoff the chance to continue an active lifestyle.

BY ERIN LAVIOLA

Arik Bibicoff at USC's Health Science Campus Fitness Center.

Examinations



Learn more about the USC Cardiac and Vascular Institute. Call (800) USC-CARE or scan the QR code.

More than a decade ago, at age 20, Arik Bibicoff's lifestyle centered on health and fitness. He exercised with weights several times per week, worked as a personal trainer and had a core group of friends who shared his passion for wellness.

But despite being in excellent shape, Arik was feeling tired every day. He started experiencing chest pain, shortness of breath, lightheadedness and vision problems.

He visited multiple doctors, an urgent care and an emergency room over several months, searching for answers. "My symptoms were brushed off because I was so young and in shape," Arik says. "They told me it was likely not enough sleep, or it was stress."

Just before his 21st birthday in 2015, an echocardiogram finally revealed the problem: Arik had a bicuspid aortic valve (BAV), a rare congenital heart defect. While patients with BAV are encouraged to exercise, high-intensity activities like weightlifting and contact sports can put pressure on the valve and lead to symptoms like Arik's.

Ross procedure leaders

After his diagnosis and consultations with numerous providers, Arik was disappointed by the choices initially presented to him. "The surgeons within my health plan had most of their experience treating patients much older than me, and they were offering surgical options that could limit me for the rest of my life," he says.

After asking everyone they knew for other recommendations, Arik and his family were referred to cardiothoracic surgeon Vaughn A. Starnes, MD.

Dr. Starnes is the executive director of the USC Cardiac and Vascular Institute, part of Keck Medicine of USC, and chief of surgery at Keck Medical Center of USC. At the Keck School of Medicine of USC, Dr. Starnes is a Distinguished Professor and chair of the Department of Surgery, as well as the H. Russell Smith Foundation Chair for Cardiovascular Thoracic Research.

Dr. Starnes is a widely recognized expert in treating congenital heart conditions in both adult and child patients and is most notably a leading authority on the Ross procedure. He told Arik that because of his age and fitness level, he was a great candidate for the procedure.

This advanced technique involves removing the damaged aortic valve and moving the patient's own pulmonary valve into that space. The pulmonary valve is then replaced with a donor valve.

Because the Ross procedure uses the patient's own valve to repair their damaged valve — as opposed to using a valve from a pig or a cow, or an artificial valve — the Ross procedure eliminates the need to take lifelong blood thinners, lowers the risk of infection or stroke and offers enhanced valve durability over the patient's lifetime. This affords patients, especially younger patients, the chance to resume a regular level of physical activity without restrictions and to maintain a quality of life that is on par with people without heart disease.

Arik is grateful that the Ross procedure was an option made possible by Dr. Starnes. "At the time, most surgeons only presented me with options that included a valve replacement using a cow or a pig's valve or an artificial valve. If I had gone that route, I would have faced many limitations post-surgery and for the rest of my life," he

"It gave me a new perspective on life that most young people do not think about until they are much older."

Arik Bibicoff

explains. "All the cardiologists and cardiac surgeons my family and I had consulted with prior to Dr. Starnes had not heard of the Ross procedure, or knew very little about it, so it was never presented to us as a viable option for my condition. It was Dr. Starnes who told us he felt comfortable that it would be an excellent fit for someone of my age and active lifestyle."

There was another sentimental reason for Arik to be hopeful: "I learned that my motivator, Arnold Schwarzenegger, was also born with a bicuspid valve and had the Ross procedure performed in 1997 by Dr. Starnes," Arik says. "It felt like fate."

Examinations

A full recovery

Arik's open-heart surgery took place in September 2015 at Keck Hospital of USC. Recovery included six days in the intensive care unit and months of physical therapy — and it allowed Arik to resume the life he wanted. Post-surgery, he went on to compete in a physique competition, graduate college and launch a successful new career.

"I am so appreciative that I was treated by the best doctors and support staff out there," he says. "It was the hardest and most painful experience of my life. It gave me a new perspective on life that most young people do not think about until they are much older. The cardiothoracic team at Keck Medicine was always there to support me during follow-up visits and numerous phone calls."

Looking back on his healthcare journey of more than a decade ago, "Today, I feel like I am in the best shape of my life," Arik says. "I am so appreciative that I was treated by the best doctors and support staff out there. Whenever we email or visit Dr. Starnes and his team, we always say the same thing: 'We are forever grateful.' This experience has made me appreciate what life has to offer and made me a stronger person, since I was forced to overcome a very daunting condition and medical setback at such a young age."



Vaughn Starnes, MD
Rated 4.9 out of 5 stars

4.9 ★★★★★

Reviews from Keck Medicine
patients, as of Sept. 1, 2026

"Whenever we email or visit
Dr. Starnes and his team,
we always say...
'We are forever grateful.'"

Arik Bibicoff



Uncharted Waters

Author and keynote speaker
Goldie Chan navigates a new stage of life
as a young breast cancer patient.

BY JENNIFER GREBOW

Goldie Chan at The Iliad Bookshop
in North Hollywood.



Learn more about USC Norris' breast cancer services. Call (800) USC-CARE or scan the QR code.

Goldie Chan is a professional at guiding others. As the founder of Los Angeles-based agency Warm Robots, she helps companies develop successful brand strategies. As a keynote speaker and author, she shows rising professionals how to shape their own personal brand. But when Goldie was suddenly diagnosed with breast cancer in March 2022, she found herself without a roadmap, needing to navigate a new world as a cancer patient.

When she was diagnosed, Goldie was already a regular patient of Keck Medicine of USC, where her primary care doctor was Katherine Gibson, MD. After a breast exam in early 2022, additional testing and biopsies revealed that Goldie had Stage II breast cancer.

Goldie was classified as an adolescent and young adult (AYA) cancer patient, meaning a person diagnosed with cancer between the ages of 15 and 39.

The news came as a shock to Goldie, who was a thriving professional busy traveling, hanging out at cafes with friends and staying active. "Physically, I felt strong, as I had been working out or doing hot yoga daily," Goldie says.

She was quickly referred to the breast cancer specialists of the USC Norris Comprehensive Cancer Center, part of Keck Medicine. There, her team was led by breast surgical

oncologist Fumito Ito, MD, PhD, and medical oncologist and hematologist Danielle Sterrenberg, MD.

Entering unfamiliar territory

Goldie began six months of treatment on multiple chemotherapy drugs. She then underwent surgery at USC Norris Cancer Hospital for a lumpectomy in October 2022, followed by four weeks of daily radiation therapy. At the start of 2023, she began six months of infusions with a targeted anticancer medication — adotrastuzumab emtansine — used to treat patients with HER2-positive breast cancer.

Goldie remembers how foreign these experiences were — and how her Keck Medicine care team helped her throughout, answering any questions she had. "I had a laundry list of questions," she recalls.

They gave her tools for keeping track of the vast amounts of information she was getting. Goldie recounts, "While it was confusing and overwhelming at times, it was very helpful that Dr. Ito initially gave me a booklet and a binder to store business cards and documents. I was then able to have a system for storing papers and important documents."

Then came treatment. "The treatment itself was very difficult physically," Goldie says. "Chemotherapy started out easy. But by the third round, everything tasted like hot, metallic trash, and I was struggling to drink Ensure to get enough calories. I started to

"One helpful thing during treatment was constantly being offered warm blankets — a simple gesture that was so welcome."

Goldie Chan

suffer from deep exhaustion, lack of appetite, neuropathy in my hands and feet, hair loss, stress and anxiety and also chronic dehydration. Sometimes, I would struggle simply to sit up straight."

Through it all, her care team monitored her closely, administering emergency infusions when needed and helping her find clinics near her home whenever commuting was too difficult. They also made sure to immediately scan and biopsy any concerning areas that emerged to ensure the cancer wasn't growing or spreading.

Goldie says other kinds of support made a big difference, too. "One helpful thing during treatment was constantly being offered warm blankets — a simple gesture that was so welcome," she says. She also describes the nursing team as "so warm and helpful, offering hugs when I needed them." During treatment, Goldie also found comfort in wearing custom gloves and socks with ice packs, as well as a light therapy helmet to block neuropathy and to try to



Fumito Ito, MD, PhD
Rated 4.8 out of 5 stars

4.8 ★★★★★



Danielle Sterrenberg, MD
Rated 4.9 out of 5 stars

4.9 ★★★★★

Reviews from Keck Medicine patients, as of Sept. 1, 2026

Continued on Page 31

I Want to Get Something Off My Chest:

What Is Causing My Chest Pain?

BY ERIN LAVIOLA

Never ignore chest pain. While it's not always heart-related, experts emphasize it's critically important to rule out life-threatening cardiac reasons first.

Five Keck Medicine of USC specialists share common causes and treatment options.

Cardiovascular

According to interventional cardiologist Ray Matthews, MD, see a cardiologist if you have a family history of heart disease or have conditions such as diabetes or elevated cholesterol. Chest tightness with exercise is also a red flag. Sudden, squeezing chest pain that “feels like the worst pain of your life and doesn’t go away within a few minutes” warrants a 911 call.

Emergencies:

- Aortic dissection
- Heart attack

Chronic conditions requiring cardiologic management:

- Atrial fibrillation
- Coronary artery disease
- Heart valve diseases like aortic stenosis

Treatment options:

- Medications to lower blood pressure and cholesterol
- Supervised exercise and dietary changes
- Stenting procedures
- Minimally invasive or open-heart surgery



Gastrointestinal

“Reflux is probably the most common cause of non-cardiac chest pain, when acid and bile injure the esophagus,” says gastrointestinal surgeon John Lipham, MD. If medications don’t ease the chest pain, specialists can perform swallowing tests, an upper endoscopy or a high-resolution manometry test to diagnose esophageal issues such as:

- **Gastroesophageal reflux**
- **Esophageal motility disorders:** When muscles and nerves in the esophagus cause difficulty swallowing
- **Esophageal strictures:** Abnormal narrowing of the food pipe

Treatments:

- Diet adjustments
- Acid-reducing or muscle-relaxing medications
- Endoscopic procedures

Thoracic/Pulmonary

Problems with the lungs or issues affecting the muscles, bones and nerves within the chest cavity can cause discomfort ranging from tender to sharp. “New onset pain with shortness of breath or a fainting episode needs prompt evaluation in an emergency department,” says thoracic surgeon Graeme Rosenberg, MD.

Potential causes:

- **Costochondritis:** Inflammation of cartilage connecting the ribs to the sternum
- **Pneumothorax:** A collapsed lung
- **Pulmonary embolism:** Blood clot in the lungs
- Rib fractures
- Severe pneumonia
- Lung inflammation

Treatment depends on cause but may include:

- Supplemental oxygen
- Nonsteroidal anti-inflammatory medications
- Placement of a chest tube
- Blood-thinning medications
- Surgery

Musculoskeletal

Chest pain that occurs when touching a certain area or when making specific movements can indicate a musculoskeletal problem. Sports medicine physician Cara Hall, MD, says she often sees overuse injuries in athletes whose sports involve repetitive motion, like rowing or golf. “Illnesses with a lot of coughing can also cause stress to the ribs or the muscles in between,” says Dr. Hall, adding that the three most common causes of chest pain she treats are:

- **Costochondritis**
- **Intercostal muscle strain**
- **Rib stress reaction**

Treatments:

- Icing
- Anti-inflammatory medication
- Rest
- Physical therapy

Psychological

Psychiatrist Steven Siegel, MD, PhD, explains that if chest pain only occurs during specific stressful situations, and other physical reasons have been ruled out, then the underlying cause could be psychological. “Then we can address what makes it go away, like redirecting your attention or learning how to put things in a context,” he says.

Potential causes:

- Panic disorders
- Anxiety
- Depression
- Hypervigilance

Treatments:

- Cognitive behavioral therapy
- Breathing techniques
- Antidepressants

To learn more or to schedule an appointment, call (800) USC-CARE or visit [KeckMedicine.org](https://www.KeckMedicine.org)





Learn more about the USC Brain Tumor Center. Call (800) USC-Care or scan the QR code.

Karen Ross wasn't used to being the one who needed help. The head of her own law firm in Las Vegas, single mother to three sons and supporter of her mother and disabled brother, she typically took care of others. But now, debilitating symptoms began to alter her role.

For nearly a year and a half, she had lived with severe headaches, nausea, visual disturbances and facial pain. On Thanksgiving Day 2020, the once high-energy 42-year-old reached her breaking point. "I couldn't even summon the energy to set the table for my family's dinner," she says.

In the months before, Karen received conflicting diagnoses, from allergies to a potential jaw disorder. Over-the-counter allergy medicine helped diminish the pain — for a little while. But Karen could feel her body shutting down.

In early 2021, she had an MRI that showed a tumor known as a meningioma at the base of her skull, where the brain meets the spinal cord. "This is not me," Karen recalls thinking. "Only, it was me."

Next, she had a closeup MRI to determine if the mass was benign or cancerous. Fortunately the verdict was "most likely" benign.

"[Dr. Zada] gave it to me straight — with heart."

Karen Ross

Searching for a brain tumor expert

Determined, Karen launched a journey of discovery. Her goal: to find the best neurosurgeon to remove her tumor. Ultimately, she would interview 10 neurosurgeons at leading institutions across the country, online and in person — no small feat during the COVID-19 pandemic.

Eight said no to surgery because her tumor abutted a major vein in the back of her head called the transverse sinus. They offered other solutions that would leave part of the tumor intact. Karen wasn't satisfied.



Embracing Every Moment

BY CANDACE PEARSON

After searching far and wide for a neurosurgeon willing to remove her brain tumor, Las Vegas lawyer Karen Ross says she now lives in gratitude for the USC Brain Tumor Center.



**Karen Ross
at Descanso
Gardens in
La Cañada
Flintridge.**

“I live in gratitude.”

Karen Ross

Then she met Gabriel Zada, MD, a Keck Medicine of USC neurosurgeon and co-director of the USC Brain Tumor Center.

An internationally recognized neurosurgeon-scientist, Dr. Zada specializes in the treatment of brain, pituitary and skull base tumors using minimally invasive and open surgical approaches. His resumé includes over 3,000 complex brain tumor operations.

After traveling from Las Vegas, Karen walked into Dr. Zada's office at Keck Medical Center of USC in Los Angeles, holding a thick binder of research she had compiled, much like evidence she might carry into court. Dr. Zada gently closed her binder and said, "Karen, you need to have faith in the person you choose," which Karen says put her at ease.

He stood out because "he didn't rush," she says. "He gave it to me straight — with heart." And he said yes to surgery.

"I felt confident we could get all of the tumor out and keep her safe," Dr. Zada says.

According to Dr. Zada, the USC Brain Tumor Center sets a priority on balancing technical excellence with compassionate care and patient-focused medicine.

"From the beginning, we approach each case as if we were a patient or a patient's family," he says. "We put ourselves in their shoes and understand what they go through when they get a brain tumor diagnosis."

As Karen found out, even though 98% of meningiomas are benign, they are invasive, meaning they can grow into normal tissue and affect vision, speech, movement and cognition.

And although meningiomas are among the most common brain tumors, there are no medications currently available to treat them — but Dr. Zada and his research team are at the forefront of developing new treatments.

In Dr. Zada's research laboratory, he and his team explore the genetic underpinnings of meningiomas and other brain tumors. Recently, the researchers found "a serious gene of interest in meningioma progression," he says, which they hope may lead to new targeted treatments for these tumors.

Surgery for benign meningioma

On April 7, 2021, Karen underwent surgery. Dr. Zada was accompanied by two other neurosurgeons and an experienced operating room team. Before entering the operating room, Karen recalls Dr. Zada telling her, "We are all going to fight for you."

Waiting for results was her younger brother, Daniel, who had flown in from Sicily to offer his support — initially on the phone, but later in person as COVID restrictions on visiting hours eased.

When Karen woke, she learned that her tumor had been successfully removed — in its entirety. Her nausea and facial pain were gone. Her most severe headaches were gone.

Next came recovery, which proved a challenging time. Over months of occupational therapy, Karen

relearned balance, coordination and confidence. Her most debilitating symptoms had vanished, but she faced changes in executive functioning and heightened anxiety. "You are not the same person after brain surgery," she says.

With the help of continued therapy and time, she has slowly readjusted to her new life and renewed health.

Her "very special experience" at Keck Medicine, Karen says, is "a testament to what is possible when medical excellence is paired with humanity."

She praises the Keck Hospital of USC team, from the staff who handled insurance clearances to her postsurgical nurse, "who made me laugh every day."

Grateful way forward

Karen took three and a half years away from work. "I needed that additional time to understand myself better," she says.

She hired staff to maintain her legal office and found support from friends, clients and the local law community. She spent more time with her three sons, Jordan, then 14; Jacob, 9; and Aiden, 4.

She also began meeting with other patients confronting brain tumor surgery, some referred by Dr. Zada — a commitment to supporting others that she continues to make.

In April 2026, Karen marked five years tumor-free. She is back at work, with her practice busier than ever. But she no longer misses "the moment," she says, whether that moment is a cup of coffee with a friend or a school event with one of her sons. "I live in gratitude."



Gabriel Zada, MD
Rated 5 out of 5 stars

5.0 ★★★★★

Reviews from Keck Medicine patients, as of Sept. 1, 2026

First-Time Mom

Facing the nerve-wracking unknowns of first-time parenthood, Micaela Hewus found refuge in the maternity care at USC Arcadia Hospital.

BY HOPE HAMASHIGE



Learn more about USC-AH's maternity care services. Scan the QR code or call (800) 388-2838 for a free physician referral.

Micaela Hewus says she isn't someone who cruises through life without a care. Major life decisions, especially, could bring her a swell of anxiety.

When she became pregnant for the first time, in early 2025, several unsettling things began happening to her body. Nearly all food and even water tasted terrible, and she was having serious sleeping problems for the first time in her life.

"So many things came up that I wasn't expecting, I had never heard of before and that weren't great to deal with," says Micaela, 36, a resident of Pasadena. Because it was her first pregnancy, she did not know why these things were happening and whether they were signs of trouble with her pregnancy.

Looking back, Micaela says she peppered her doctor, Leslie Korostoff, MD, an OB/GYN with Keck Medicine of USC, with an endless stream of questions, both at her prenatal visits as well as via phone and email. Rather than judging her, Micaela says, Dr. Korostoff provided the exact sort of responses she needed.

Dr. Korostoff patiently answered all her questions, gave her reassurances and helped her understand that the

unusual changes she was experiencing were in no way a sign that her pregnancy was off track.

"I was telling her what I was going through and asking her if it was normal and whether I should be concerned," Micaela says. "As someone who can be a little anxious, I felt that she was so affirming, and it was truly appreciated."

Emotional support for expectant moms

Prenatal care for both mom and baby, notes Dr. Korostoff, involves far more than checking vital signs and the development of the baby: It involves guidance and emotional support. It isn't unusual, she says, for expectant moms to have more questions than answers, particularly when pregnant for the first time.

"Prenatal visits are critical and involve a lot more than providing patients with medical care," says Dr. Korostoff, who delivers babies at USC Arcadia Hospital (USC-AH), part of Keck Medicine. "These visits are opportunities for expectant parents to get support, which they all need during this time. It is also a time for them to get as much relevant information as they need to carry on with confidence through the pregnancy."

Giving her patients information is important, Dr. Korostoff says, because questions about diet and exercise and unexpected changes in pregnant women's bodies can help keep both mother and baby healthy throughout the pregnancy. Likewise, helping parents develop birth plans prepares them for the delivery, an event that comes with its own concerns.

Being the planner that she is, Micaela, together with her husband, signed up for a tour of the labor and delivery section of USC-AH. Micaela was happily surprised by the size of the rooms and the fact that it didn't seem as institutional as some hospitals.

"The rooms are all private and huge and had windows looking out onto a golf course," Micaela says. "There was also a garden that was only open to women in labor so they could walk



Leslie Korostoff, MD
Rated 4.7 out of 5 stars

4.7 ★★★★★

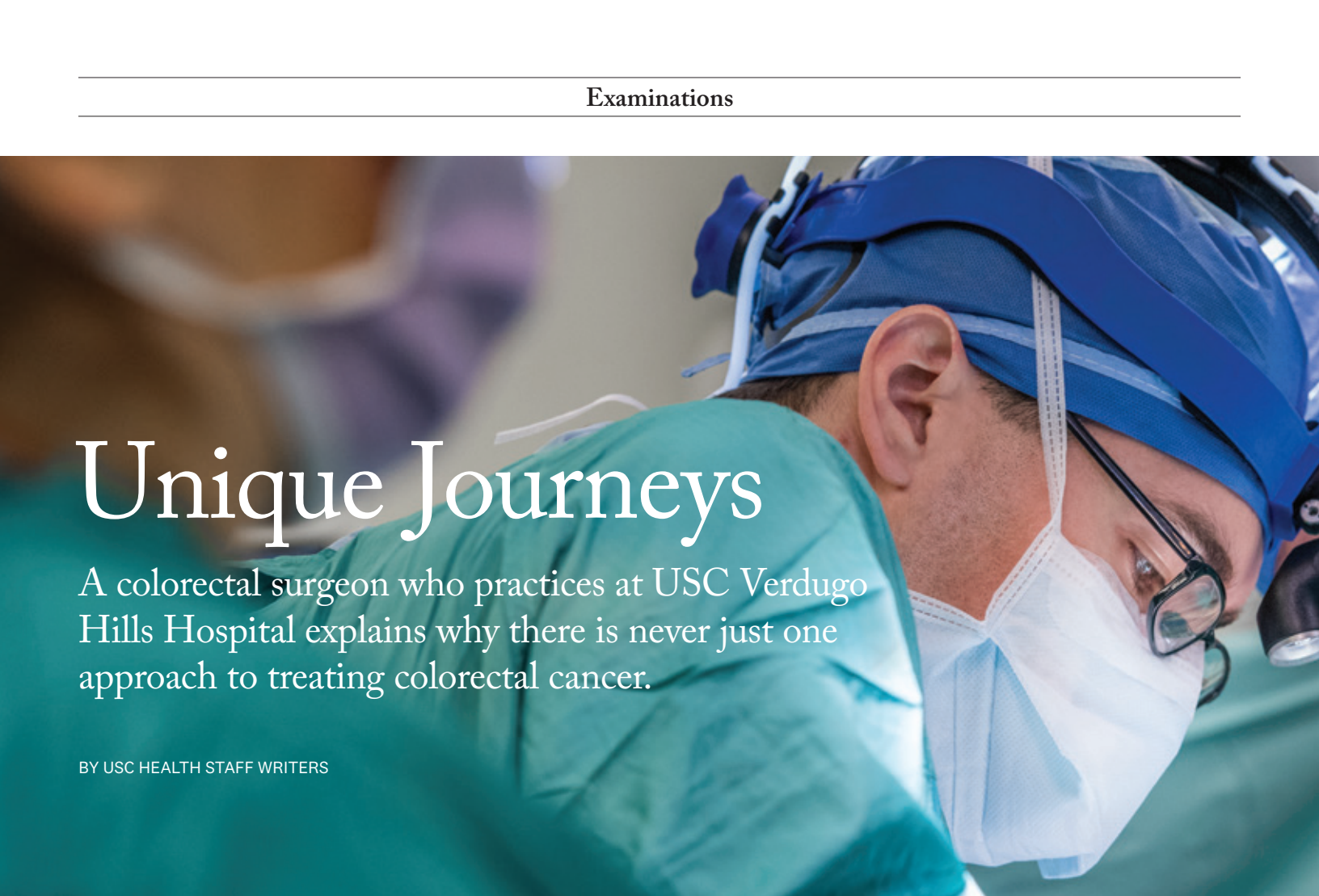
Reviews from Keck Medicine patients, as of Sept. 1, 2026

Continued on Page 31

“As someone who can
be a little anxious,
I felt that [Dr. Korostoff]
was so affirming, and it
was truly appreciated.”

Micaela Hewus

*Micaela Hewus and her
child in Covina.*



Unique Journeys

A colorectal surgeon who practices at USC Verdugo Hills Hospital explains why there is never just one approach to treating colorectal cancer.

BY USC HEALTH STAFF WRITERS



Learn more about USC-VHH's colorectal surgery services. Call (800) USC-CARE or scan the QR code.

If you've been diagnosed with colorectal cancer and your treatment plan includes surgery, this situation is undoubtedly frightening.

Knowing key facts about surgical treatment for colorectal cancer may ease your fear and help you on your journey. In fact, most colorectal cancer patients do well and maintain a high quality of life.

Kyle Cologne, MD, a colorectal surgeon with the USC Colorectal Cancer Program and USC Verdugo Hills Hospital, part of Keck Medicine of USC, shares what to know about colorectal cancer and treatment options.

Why is colorectal cancer care not one-size-fits-all?

Not all cancers behave and/or are treated the same way, as a variety of factors influence what we do.

This is important to remember as you gather information online or from friends, family members or others who have experienced colorectal cancer care. Their advice may differ from your doctor's. These differences do not mean you're getting the wrong treatment, or that you are being over- or undertreated or that your family and friends were treated incorrectly.

It simply means that treatment plans are individualized to each patient's unique

situation and cancer — particularly now, when we have started to include personalized genetics in these decisions. Some patients need chemotherapy; others need radiation. Some need both. Sometimes treatments are administered before surgery; sometimes afterward. There are even different types of chemotherapy to consider, depending on the genetic signals that may make some more effective. Many patients undergo surgery to remove a portion of the intestine, and some may require removal of other organs.

Navigating your own treatment plan can get quite complicated. The best medical care teams are those who are committed to successfully walking you through the steps of your cancer journey.



Kyle Cologne, MD,
performing surgery.

Ricardo Carrasco III

What are the survival rates?

In general, colorectal cancer survival rates are very good overall, in many cases exceeding 90% when involving early-stage disease.

The best way to ensure good survival is to get screened before symptoms develop. Screening should happen around age 45, or 10 years before the age when any first-degree relative (parents or siblings) was diagnosed with colorectal cancer — whichever is sooner. Encourage loved ones to get screened as well.

Your doctor can discuss various screening options, including colonoscopy, stool testing and blood testing. These tests increase the chances of detecting colorectal cancer early. Doing so improves survival rates. Anyone experiencing rectal bleeding, weight loss or other changes in their bowel function should speak to their doctor, as they may require further investigation or testing.

Survival rates also depend on the cancer's stage. This includes how deep into the layers of the intestine the cancer has grown and whether any lymph nodes outside the intestine wall are involved.

Finally, rates also depend on whether the tumor has spread to other organs, including the liver, lungs or nearby organs such as the bladder or uterus.

While more advanced tumors — stage 3 or stage 4 tumors — have lower survival rates overall, good results can be achieved, especially when care plans involve multidisciplinary medical teams that combine the expertise and resources of a broad range of healthcare specialists.

Colon cancer versus rectal cancer: What is the difference?

Because the rectum sits low in the pelvis, which is a narrow space, rectal cancers are treated a little differently. It is much more common to be prescribed chemotherapy and/or radiation before surgery to try to shrink these tumors first, which increases the chance of successful removal during surgery.

Rectal cancers also require additional testing, such as an MRI or ultrasound, to get a better sense of the estimated stage of the cancer. This will help determine which treatment options are best for you.

It can be difficult to know whether your tumor is in the colon or in the rectum, so your doctors may want to confirm the exact location. This can be critical in determining the right action plan.

Important considerations when determining treatment options include: the size of the tumor and its location within the intestine; any symptoms including blockage, bleeding or a change in baseline bowel habits; how well your sphincter muscle works; what your CT and/or MRI imaging tests show; and any previous surgery and whether radiation therapy is needed.

Deciding on the right care plan can be a complex process that requires discussion between the patient, surgeon and often a medical and/or radiation oncologist. At Keck Medicine, these complicated cases are also reviewed by an expert multidisciplinary panel to gain input from a variety of doctors.

What should I know about surgery?

In most colorectal cancer cases, surgery can be done using minimally invasive (laparoscopic or robotic) technology, meaning through small incisions. This makes recovery faster and has a variety of other benefits.

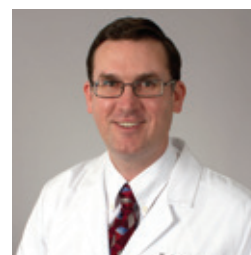
Some circumstances, such as scarring from prior surgery or tumor-related factors, may require a bigger incision that makes a minimally invasive approach less likely to be successful. The recovery from this type of surgery does include some pain, but enhanced recovery and multimodal pain-control regimens can enable shorter hospital stays and a faster return to a normal life.

Will I need a colostomy or ileostomy bag?

While this is never our first option, some circumstances may require an ostomy bag, such as low tumors, nutritional considerations, development of rare complications and/or a need for more treatment. While most patients will not require this, particularly for colon cancers, it can be an important part of the treatment process. Many ostomy bags can also be reversible.

How should I seek guidance?

Talk to a knowledgeable and expertly trained colorectal surgeon, preferably one who is board certified, works at a multidisciplinary center and collaborates with a whole cancer team. The physicians at USC-VHH, as part of Keck Medicine, do exactly this and can help you get the best possible treatment in what can be a difficult time in your life.



Kyle Cologne, MD
Rated 4.9 out of 5 stars

4.9 ★★★★★

Reviews from Keck Medicine
patients, as of Sept. 1, 2026

Consultations

Keck Medicine Hospitals Recognized for Heart and Stroke Care

Keck Hospital of USC, USC Norris Cancer Hospital, USC Arcadia Hospital (USC-AH) and USC Verdugo Hills Hospital (USC-VHH) collectively received numerous American Heart Association (AHA) Get With The Guidelines® achievement awards for heart and stroke care.

Get With The Guidelines® is the AHA's hospital-based quality improvement program that provides hospitals with the latest research-based guidelines and recognizes hospitals' commitment to delivering high-quality, evidenced-based cardiovascular and stroke care.

Awards for heart failure care recognize reduced hospital readmissions and improved quality of life for patients with heart failure. Hospitals must take specific measures to improve medication adherence, provide early follow-up care and enhance patient education.

Resuscitation care awards reflect rapid recognition and timely intervention of in-hospital cardiac arrest, using best practices that improve survival and patient outcomes. Hospitals given the Target: Survival award achieve the top 60% survival rate among

all hospitals nationwide who participate in the Get With The Guidelines – Resuscitation registry.

Stroke care awards recognize hospitals' prompt stroke response. Rapid diagnosis and treatment are critical in minimizing brain injury, preserving neurological function and improving patient outcomes. Target: Stroke Honor Roll awards recognize hospitals' reduced time between eligible patients' arrival at the hospital and specialized treatments to remove the clot causing the stroke.

The Target: Stroke Honor Roll Advanced Therapy designation is the highest award given to Comprehensive Stroke Centers, which provide the highest level of specialized stroke care for qualifying patients. Specialized treatments include a blood clot removal procedure (thrombectomy) and administering a medication that breaks up blood clots (tenecteplase).

Diabetes care honor roll awards recognize specialized care for patients with Type 2 diabetes, who may be at higher risk for complications, when hospitalized due to heart disease or stroke.

The 2026 awards given to Keck Medicine's hospitals are:

Keck Hospital

- Get With The Guidelines — Heart Failure Gold Plus
- Target: Heart Failure Optimal
- Target: Type 2 Diabetes Honor Roll
- Get With the Guidelines — Resuscitation Gold
- Target: Survival
- Target: CPR

USC Norris

- Get With The Guidelines — Resuscitation Gold

USC-AH

- Get With The Guidelines — Stroke Gold Plus
- Target: Stroke Honor Roll Elite Plus
- Target: Stroke Honor Roll Advanced Therapy
- Target: Type 2 Diabetes Honor Roll

USC-VHH

- Get With The Guidelines — Stroke Silver Plus
- Target: Stroke Honor Roll Elite
- Target: Type 2 Diabetes Honor Roll



Keck Hospital Earns Five Stars on CMS Quality Star Rating Report



Ricardo Carrasco III

Keck Hospital of USC earned five stars, the highest rating possible, on the Centers for Medicare & Medicaid Services (CMS) 2026 quality star rating report. This is the third year the hospital has received five stars.

Keck Hospital is among only 29 hospitals in California — and only one of 385 nationally — to receive five stars on the one-to-five-star rating system.

“Receiving this prestigious recognition validates the hospital’s continuous commitment to patient safety and best possible outcomes, and demonstrates the dedication and hard work of our physicians, nurses and staff,” said Marty Sargeant, MBA, chief operating officer of Keck Medicine of USC and CEO of Keck Medical Center of USC.

The CMS hospital quality star rating summarizes a variety of measures across

five areas of quality into a single star rating for each hospital. The five areas include:

- **Readmission** — returns to the hospital following a hospitalization.
- **Mortality** — death rates in the 30 days following a hospitalization.
- **Safety of care** — potentially preventable injury and complications due to care provided during a hospitalization.
- **Timely and effective care.**
- **Patient experience** — includes how effectively physicians and nurses communicate with patients and whether patients would recommend the hospital to others.

This CMS five-star designation follows Keck Hospital earning an “A” Hospital Safety Grade from The Leapfrog Group, an independent national nonprofit focused on patient safety, in the spring of 2026. It was the 12th “A” Grade for Keck Hospital since 2019.

The CMS rating system was launched in 2016 to help patients and caregivers make informed decisions when selecting a hospital. Hospitals report quality data to the CMS through multiple reporting programs, and the data is then reviewed and standardized to calculate hospital star rankings.

“Receiving this prestigious recognition validates the hospital’s continuous commitment to patient safety and best possible outcomes, and demonstrates the dedication and hard work of our physicians, nurses and staff.”

Marty Sargeant, MBA



USC Arcadia Hospital Enhances Care with New Surgery Recovery Unit

USC Arcadia Hospital (USC-AH) has expanded its surgical services with the opening of a new 12-bed surgical recovery unit designed to support patients awakening from anesthesia after procedures. The unit opened for patients in March 2026.

The post-anesthesia care unit (PACU) will enhance patient safety and comfort during one of the most critical phases of surgical care through specialized monitoring tools and dedicated clinical teams equipped to care for patients with complex medical conditions.

The PACU construction was funded by a \$7.5 million gift from the Charles Huang Foundation.



Representatives from the Charles Huang Foundation and USC-AH leadership pose during the PACU's ribbon-cutting ceremony.

"This significant gift from the Charles Huang Foundation supports USC Arcadia Hospital's continued commitment to meeting the growing healthcare needs of the San Gabriel

Valley," said Ikenna (Ike) Mmeje, MHSA, president and CEO of USC-AH. "We look forward to continuing to elevate our high-quality medical care from diagnosis through surgical intervention and beyond."

This gift is also being used to help build a hybrid operating room, an advanced suite currently under construction that will leverage image-guided interventional capabilities to support complex multidisciplinary surgeries, including cardiac and vascular procedures.

"We want to do all in our power to help expand needed healthcare services at the local level," said Charles Huang, PhD, who has lived in Arcadia for over 20 years. "With this new center, the hospital will further distinguish itself as a center of excellence and serve our local communities more efficiently and effectively."

The new unit also improves efficiencies between the operating room and post-surgical care teams to support patient recovery.

"We are proud to strengthen our ability to provide advanced, efficient and attentive post-surgical care for our local community thanks to the Charles Huang Foundation and Dr. Charles Huang," said Sandra Chen Lau, president of the USC-AH Foundation. "The PACU allows us to further our vision of offering world-class care close to home."

Reduced Environmental Impact Earns Awards for Keck Medical Center and USC-VHH

Keck Medical Center of USC and USC Verdugo Hills Hospital were recipients of 2026 Practice Greenhealth Environmental Excellence Awards in recognition of their achievement in healthcare sustainability.

Keck Medical Center, which consists of Keck Hospital of USC and USC Norris Cancer Hospital, earned the Greenhealth Leader Award. This competitive award celebrates hospitals that have not only earned an award for all-around sustainability achievement, but that have also been identified as the top scoring programs for each category of sustainability. USC-VHH received a Greenhealth Recognition Award for its commitment to sustainability.

Keck Medicine of USC has made sustainability a priority in recent years. One area of huge success is reducing greenhouse gas emissions — gases that trap heat in the atmosphere. Operating rooms have traditionally produced relatively large amounts of greenhouse gases due to anesthetic agents used during surgeries. Keck Medical Center has significantly and meaningfully reduced these emissions.

At USC-VHH, LED retrofitting of all lighting in common areas, offices and work areas reduced electricity use by almost half.



Ricardo Carrasco III



Tanaz Ferzandi, MD, MBA, MA, Named Chief Medical Officer for Keck Medical Center

In August, Tanaz Ferzandi, MD, MBA, MA, was named chief medical officer for Keck Medical Center of USC, which includes Keck Hospital of USC and USC Norris Cancer Hospital.

"This is an exciting milestone for our organization, and I am

confident that Dr. Ferzandi's leadership will advance our clinical mission in meaningful ways," said Marty Sargeant, MBA, chief operating officer of Keck Medicine of USC and CEO of Keck Medical Center of USC, in an announcement.

According to Sargeant's announcement, Dr. Ferzandi will serve as the senior physician voice on Keck Medical Center's executive team, advancing clinical quality, safety and outcomes through partnership, credibility and collaboration.

In the role, her focus will include medical staff leadership, governance and physician engagement; clinical strategy, technology adoption and care model innovation; graduate Medical Education

partnership and regulatory readiness; as well as alignment across academic, clinical and operational partners.

Dr. Ferzandi joined Keck Medicine in 2019 as director of urogynecology and reconstructive pelvic surgery and served as service line chief of obstetrics and gynecology and vice chief of staff of Keck Hospital at the time of her appointment to chief medical officer. She is also a professor of clinical obstetrics and gynecology at the Keck School of Medicine of USC.

"Dr. Ferzandi brings an exceptional combination of clinical expertise, academic leadership and administrative experience to this role," Sargeant said in his announcement. "Her deep roots in medical staff leadership, including serving as president of the medical staff at Tufts Medical Center, make her well-positioned to bridge the physician community and executive leadership at Keck Medical Center."

Dr. Ferzandi previously served as president of the American Urogynecologic Society in 2025 and is a fellow of the American College of Surgeons. She has received numerous honors, including the 2024 USC Choi Family Award for Excellence in Patient-Centered Care.

Keck Medicine Earns LGBTQ+ Healthcare Equality Leader Designation



Keck Medicine of USC hospitals and USC Student Health, part of Keck Medicine, received the LGBTQ+ Healthcare Equality Leader designation in the Human Rights Campaign Foundation's 2026 Healthcare Equality Index (HEI).

HEI is the industry-standard benchmarking tool for LGBTQ+ inclusion and equity practices in the healthcare field, judging hospitals on five criteria: Non-Discrimination and Staff Training; Patient Services and Support; Employee

Benefits and Policies; Patient and Community Engagement; and Responsible Citizenship.

To receive LGBTQ+ Healthcare Equality Leader designation, healthcare facilities must receive the maximum score in each criteria and earn an overall score of 100.

Keck Medicine hospitals include Keck Hospital of USC, USC Norris Cancer Hospital, USC Verdugo Hills Hospital (USC-VHH) and USC Arcadia Hospital (USC-AH). This marks the eighth time that Keck Hospital, USC Norris and USC-VHH have received the LGBTQ+ Healthcare Equality Leader distinction, and the second time that USC-AH has received the designation since joining Keck Medicine in 2022.

USC Student Health, which provides comprehensive healthcare to USC students, participated in the survey for the third time and joins a select group of college healthcare providers in receiving the leader designation.

Labwork

Fruits, Vegetables and Whole Grains May Increase Early Lung Cancer Risk

A diet rich in fruit, vegetables and whole grains is generally recommended for better health and to lower the risk of cancer and other diseases.

However, new research from USC Norris Comprehensive Cancer Center, part of Keck Medicine of USC, suggests that this diet may put nonsmoking Americans under the age of 50 at greater risk of developing lung cancer.

“Our research shows that younger nonsmokers who eat a higher quantity of healthy foods than the general population are more likely to develop lung cancer,” said Jorge Nieva, MD, a medical oncologist and lung cancer specialist with USC Norris and lead investigator of the study. “These counterintuitive findings raise important questions about an unknown environmental risk factor for lung cancer related to otherwise beneficial food that needs to be addressed.”

Dr. Nieva and his fellow researchers speculate that this risk factor may be pesticides. Commercially produced (nonorganic) fruits, vegetables and whole grains are more likely to have a higher residue of pesticides than dairy, meat and many processed

foods, according to Dr. Nieva. He also notes that agricultural workers exposed to pesticides typically have higher rates of lung cancer.

The study also showed that young women who don’t smoke have higher rates of lung cancer than men, and that women tended to also have a diet higher in produce and whole grains.

Lung cancer has typically affected older adults, men more than women, and smokers. Decreased smoking rates have led to fewer cases, except for in one

group — nonsmokers age 50 and younger, especially women, who are now more likely to get lung cancer than men.

In the study, researchers used published data on average pesticide levels for food categories such as fruits, vegetables and grains to estimate exposure. The next step, Dr. Nieva said, is to confirm the link by measuring pesticide levels in blood or urine samples from patients. This could also help reveal whether some pesticides increase lung cancer risk more than others.

“These counterintuitive findings raise important questions about an unknown environmental risk factor for lung cancer...”

Jorge Nieva, MD



Body Mass Index Found to Underestimate Obesity Levels

Medical experts have typically calculated obesity using body mass index (BMI), a calculation based on a person's height and weight.

Recently, however, some practitioners have adopted a newer measure called clinical obesity, which identifies obesity based on fat around the abdomen coupled with weight-related health issues.

A new study from Keck Medicine of USC, published in June in the *Annals of Internal Medicine*, quantifies how often BMI may miss cases of obesity. The research shows that one quarter of people considered to have a normal (healthy) BMI meet the standard of clinical obesity. And 50% of those deemed overweight by their BMI would be reclassified as obese.

"Many people assume that if their BMI says they are not obese, they don't have to worry about the many health problems linked to obesity," said Brian P. Lee, MD, MAS, a hepatologist and liver transplant specialist with Keck Medicine and principal investigator of the study. "Our findings show that millions of Americans may already have obesity-related health impacts and may be missing needed health interventions."

Those with normal or overweight BMIs do not currently qualify for pharmacologic or surgical treatments for obesity, and physicians may not flag them as needing lifestyle modifications, added Dr. Lee.

"BMI is problematic because it does not specifically measure body fat and instead reflects total body weight, which includes muscle and bone," Dr. Lee said. "So a muscular person can have a very high BMI but not have excess fat, while someone without much muscle can have a normal BMI but have excess fat causing health problems."

Clinical obesity specifically examines fat around the waist, known as adipose fat, and is more accurate in determining obesity and obesity-linked health problems, Dr. Lee said.

Clinicians determine clinical obesity through waist circumference, waist-to-hip ratio and waist-to-height ratio. If someone has extra fat by at least two of those measurements and has evidence of health issues associated with extra fat, such as heart disease or chronic hip or knee pain, they are considered clinically obese, Dr. Lee said.

Fish Oil Supplements May Not Prevent Alzheimer's-Related Decline

Americans spend more than \$1 billion annually on fish oil supplements, partly due to purported cognitive benefits from their omega-3 fatty acids, essential nutrients that help form brain cell connections needed for cognition.

However, a new Keck Medicine of USC study published in June in *eBioMedicine* suggests that increasing omega-3 levels via supplements has little effect on brain health. The two-year study showed that high doses of omega-3s did not improve memory, cognitive function or brain cell loss in areas of the brain related to Alzheimer's.

"While omega-3s play an important role in forming brain cell connections needed for cognition, our results do not support fish oil supplements as a preventive measure against Alzheimer's," said Hussein Naji Yassine, MD, director of the USC Center for Personalized Brain Health and lead investigator of the study.

Researchers recruited 365 adults, ages 55 to 80, who rarely ate fish, which is rich in omega-3s, and who study authors considered at risk for Alzheimer's. Participants randomly received either daily fish oil supplements or a placebo. The supplements contained docosahexaenoic acid (DHA), a key omega-3 involved in brain function.

After six months, an average 17% increase of DHA levels was found in patients' brains, confirming the omega-3 reached its intended target. But participants who took DHA supplements did no better on memory and cognitive tests after two years than those who took a placebo. Brain scans also showed that supplements did not prevent shrinkage of the hippocampus, a brain region important for memory that is often used as a marker of brain aging and Alzheimer's risk.

"We're now focused on better understanding how the brain processes omega-3s and whether factors, such as poor health, dietary pattern, genetic risk and age, may change the brain's ability to effectively absorb and use omega-3s," Dr. Yassine said. "We are working to develop medications that may help the brain better utilize these nutrients to preserve cognitive function."





There are hundreds of **clinical trials and studies** taking place at Keck Medicine of USC, giving participants access to novel and potentially promising therapies that may not be available elsewhere. For more information on open clinical trials, visit clinicaltrials.gov.

Can a New Chemotherapy and Immunotherapy Approach Help Treat Recurrent Head and Neck Cancer?

Recurrent or persistent squamous cell cancers of the mouth, throat or voice box are challenging to treat. Standard treatment is surgery, but it often fails to eradicate the cancer, so researchers are studying new options.

The USC Norris Comprehensive Cancer Center, part of Keck Medicine of USC, is the only Southern California location for a phase II trial sponsored by the National Cancer Institute studying whether adding chemotherapy and/or immunotherapy before surgery can improve survival of patients with recurrent PD-L1-positive head and neck squamous cell carcinoma.

What should patients expect?

Patients will randomly be assigned to one of three groups. The standard-treatment group will undergo surgery. The second group will start with six weeks of chemotherapy (carboplatin and paclitaxel) before getting surgery. The third group will start with six weeks of chemotherapy (carboplatin and paclitaxel) plus immunotherapy (cemiplimab) before getting surgery. In all groups, patients deemed high-risk post-surgery will receive six weeks of radiation therapy and chemotherapy (cisplatin).

All patients will undergo CT and PET imaging to track disease progression throughout the study. Post-study, patients will be monitored at 12 weeks or the end of postoperative radiation, then every three months for two years, every six months for years three and four, and annually thereafter.

For more information, visit <https://clinicaltrials.gov/study/NCT07195734>.

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Jacob Stephen Thomas, MD

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Uncharted Waters

Continued from Page 13

prevent hair loss, although she did lose her hair after her last round of chemotherapy.

Goldie remembers the jarring feeling of not seeing other young cancer patients around her. “As an AYA patient, it often felt isolating to not look like other patients in the infusion room and patient queues,” she remembers.

Through it all, Goldie’s loved ones were there. “In the beginning, I received a mountain of ‘get well’ gifts from friends, family and fans, including more than 10 pounds of ginger candy, nearly 100 pairs of fuzzy socks and more. Another comforting gift I received from a friend was a cow that could be heated in the microwave.”

Her digital media savvy helped her stay in touch with her network during treatment. “I relied on Twitter at the time to share my statuses and my #proofoflife pictures to share that I was still alive,” she says.

When Goldie completed her last infusion in July 2023 and her infusion port was finally removed, “it felt like a huge milestone,” she says.

Reflecting and recovering

Goldie will continue receiving hormone therapy for the next 10 years to reduce estrogen levels and the risk of cancer reoccurring. She also takes daily oral medications of exemestane and occasional injections of leuprolide to lower estrogen levels, plus periodic infusions with zoledronic acid to strengthen her bones.

Dr. Sterrenberg calls Goldie’s prognosis positive. “Goldie has shown remarkable strength throughout her treatment, and it’s

incredibly gratifying to see how well she is doing today,” she says.

“Recovery is a winding process,” Goldie says. “I still go back to the hospital for post-treatment. Most days I feel better, as my appetite is back, but emotionally I now struggle with aspects of cancer survivorship. It is an up-and-down process as I go through feelings of loss and gratefulness to be alive.”

Her advice to other cancer patients, especially younger ones, is to lean on your circle of friends and ask for help when you need it. She remembers how her own “personal care team of Rob, Candy and Jamie” helped drive her to and from doctor appointments, surgeries and biopsies and to pick up any medications she needed. Also, she recommends, “Bring a large tote bag or rolling bag that can hold any snacks, water, books or games that you might want during treatment.”

Goldie is busy back at work, where she continues to share her perspectives, now further deepened by her cancer journey. Her insights have been published in outlets like Forbes, The New York Times and Fast Company.

In October 2025, Goldie experienced another milestone: publication of her first book, “Personal Branding for Introverts.” In the bestselling book, Goldie also describes her cancer experience and thanks her Keck Medicine care team for helping her through a very difficult time.

“Cancer is a journey where becoming a survivor is a new stage of life,” she says. “It’s not easy, but it’s much easier with a good team around you.”

First-Time Mom

Continued from Page 20

around if they wanted to. Seeing these spaces made me feel really comfortable about delivering at USC Arcadia.”

Importance of labor experience

Dr. Korostoff notes that the team at USC-AH strives to make the labor and delivery experience as positive as possible for their patients because the experience actually has consequences for both mom and baby.

Having a positive birth experience is a combination of factors, she notes, that includes providing women in labor both comfort and privacy, as well as training the labor and delivery staff to be supportive, knowledgeable and professional. USC-AH also has doctors who are trained to provide emergency obstetric care in the hospital 24 hours a day, which gives a lot of women peace of mind.

“It is widely known that a more positive birth experience helps with postpartum healing, bonding between mom and baby and successful breastfeeding,” Dr. Korostoff says.

When the time came in October 2025 for Micaela to deliver her baby, she quickly learned that labor doesn’t follow a script. She was in labor for longer than most first-time mothers and, while she hoped she would not need drugs, she eventually chose to have an epidural to get her through the pain.

She also experienced a dramatic drop in her own heart rate, which prompted the medical staff to keep careful watch over her and her baby without rattling Micaela or her husband.

Looking back on that day, Micaela commends the labor and delivery nurses and Dr. Korostoff for reassuring her and helping her make informed decisions throughout her labor.

“They really kept their calm throughout, which helped me not to worry even though a few things seemed kind of scary,” Micaela says. “People talked us through everything that was happening and helped us understand what was going on with me and the baby. I am really grateful for Dr. Korostoff and for the staff at USC Arcadia.”

A little over a year after giving birth, Micaela and her husband are settling nicely into a new life as parents of a healthy baby. Like many new parents, they are a bit sleep-deprived but thankful that their little one is healthy and happy.



Perspective: Personalized Medicine, Improved Outcomes

For patients with cancer, *how* we treat their disease matters. New advancements in personalized medicine, in which treatments are tailored to the patient's unique needs, are leading to cures and helping people live their lives fully without debilitating side effects.

A prime example of this type of customized care offered at USC Norris Comprehensive Cancer Center is CAR-T cell therapy, a groundbreaking immunotherapy that is improving outcomes for patients with certain blood cancers who previously didn't have options.

CAR-T cell therapy gives the immune system the weaponry it needs to fight the cancer. The patient's white blood cells are collected and engineered to be super soldiers, then put back into the body to find and kill cancer cells.

Our ability to design an individualized treatment plan engineered by a patient's own biology allows us to explore new dimensions of patient-focused medicine, personalizing not only our bedside care but also our clinical decision making. This all-encompassing personalization is leading to better results.

I've seen CAR-T cell therapy cure people who didn't have any hope of a cure in the past. I meet one of my patients, who has been in remission for more than 10 years after CAR-T cell therapy, on the ski slopes each year to celebrate his continued good health.

Seeing these high-concept treatments really work and give patients the quality of life they want is incredibly gratifying.

Here at USC Norris, we're continuing to push the boundaries — in the laboratory and in the clinic — on what is possible in cancer care. As an NCI-designated comprehensive cancer center, combined with the specialized resources of an academic medical system, USC Norris is making innovative progress every day to improve the lives of our patients.

Not long ago, immunotherapies were still experimental. Today, the field has exploded, with incredible benefit for patients whose situations would have previously seemed hopeless. As a provider, these capabilities allow me to better take care of my patients in every sense. I'm excited to see how much further we have yet to go.

Ann Mohrbacher, MD, is a hematologist oncologist and director of the autologous stem cell transplantation program with USC Norris Comprehensive Cancer Center, part of Keck Medicine of USC.



Ann Mohrbacher, MD

KECK MEDICINE OF USC LOCATIONS

Arcadia

USC Arcadia Hospital

300 W. Huntington Drive

Family Medicine

57 Wheeler Ave., Unit D

Multiple Specialties

125 W. Huntington Drive,
Buildings A & B

Multiple Specialties

301 W. Huntington Drive,
Suites 107, 407, 607, 618

OB/GYN

289 W. Huntington Drive, Suite 202

Ophthalmology

65 N. First Ave., Suite 101

Orthopaedic Surgery

488 E. Santa Clara St., Suite 101

Bakersfield

Urology

9500 Stockdale Highway, Suite 202

Beverly Hills

Multiple Specialties

9033 Wilshire Blvd.,
Suites 300, 305, 360, 400, 406

Buena Park

Oncology/Hematology/Radiation

Oncology

5832 Beach Blvd., Suites 101, 201

Burbank

Maternal-Fetal Medicine

191 S. Buena Vista St., Suite 435

Covina

Urology

420 W. Rowland St., 2nd Floor

Downtown Los Angeles

Multiple Specialties

830 S. Flower St., Suites A100, B100

El Segundo

Orthopaedic Surgery

555 N. Nash St., Suite B

Physical Therapy

2101 E. El Segundo Blvd., Suite 101

Glendale

USC Verdugo Hills Hospital

1812 Verdugo Blvd.

Multiple Specialties

1808 Verdugo Blvd., Suites 112, 208,
209, 318, 404, 413, 420

Ophthalmology/Optomety

500 N. Central Ave., Suite 400

Orthopaedic Surgery

1818 Verdugo Blvd., Suite 300

Otolaryngology

222 W. Eulalia St., Suite 200

Hollywood

Maternal-Fetal Medicine

1300 N. Vermont Ave.,

Suites 301, 905

Irvine

Oncology/Hematology

3500 Barranca Pkwy., Suite 200

Koreatown

Multiple Specialties

500 S. Virgil Ave., Suite 502

La Cañada Flintridge

Multiple Specialties

1751 Foothill Blvd., Suite 2

Otolaryngology

1370 Foothill Blvd., Suite 100

La Crescenta-Montrose

Occupational and Physical

Therapy

2340 Honolulu Ave.

Las Vegas

Transplant

2911 N. Tenaya Way, Suite 106

Los Angeles

Keck Hospital of USC

1500 San Pablo St.

USC Norris Comprehensive

Cancer Center and Hospital

1441 Eastlake Ave.

USC Healthcare Center 1

(Building 1)

Multiple Specialties

1510 San Pablo St.

Willametta Keck Day Healthcare

Center 2 (Building 2)

Multiple Specialties

1520 San Pablo St.

Norris Healthcare Center 3

(Building 3)

Multiple Specialties

1516 San Pablo St.

USC Healthcare Center 4

(Building 4)

Multiple Specialties

1450 San Pablo St.

Multiple Specialties

1640 Marengo St., Suites 100, 102,
200, 500, 505

Optometry

835 W. Jefferson Blvd., Suite 1720

Manhattan Beach

Orthopaedic Surgery/

Occupational and Physical

Therapy

400 S. Sepulveda Blvd.,
Suites 105, 110, 200

Mission Hills

Maternal-Fetal Medicine

11550 Indian Hills Road, Suite 380



Monterey Park

Cardiology

500 N. Garfield Ave., Suite 304

Newport Beach

Multiple Specialties

350 Old Newport Blvd.

Oncology/Hematology

330 Old Newport Blvd.,
Suites 100, 200

Radiation Oncology/Imaging

4590 MacArthur Blvd., Suite 100

Pasadena

Infertility/IVF

55 S. Lake Ave., 9th Floor

Maternal-Fetal Medicine

39 Congress St., Suite 301

Multiple Specialties

590 S. Fair Oaks Ave.

Multiple Specialties

625 S. Fair Oaks Ave.,
South Lobby, Suite 400

San Pedro

Orthopaedic Surgery

1360 W. 6th St., Suite East F

Santa Clarita

Multiple Specialties

25751 McBean Parkway,
Suites 110, 300, 305

Orthopaedic Surgery

23929 McBean Parkway, Suite 200

Torrance

Orthopaedic Surgery/Occupational

and Physical Therapy

2990 Lomita Blvd., Suite B

University Park Campus

Multiple Specialties

1031 W. 34th St., Suites 100, 304, 430,
450, 452, 500

Locations accurate as of Sept. 2026

Keck Medicine of **USC**

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Los Angeles, CA 90032

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listening and partnering with you at every step of life.

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