WE ARE BRUINS,
WE ARE THE UCLA LMSA
“Medicine Is Our Passion, Diversity Is Our Strength”

LMSA at UCLA is home...so if you are reading this newsletter, welcome home! Our members are medical students from both the David Geffen School of Medicine (DGSOM) and Charles R. Drew University (Drew), and in addition we have extended family ties with “Chicanos in Community Medicine” (CCM) undergraduates and anyone else searching for a home in medicine. We have a deep rooted pride in our diverse backgrounds and pro-active “can-do” spirits that taken together make for an unyielding and self-perpetuating source of motivation to tackle on one of the greatest challenges of our time; alleviating health disparities. In our lifetimes (yes in our lifetimes) we will see change in the healthcare system because we have already set this force in motion through each of our commitments to the underserved, advancing science/medicine through research, and in cultivating a culture of mentorship and family. Unlike cell phone texting while driving laws, the laws of physics cannot be broken. Newton said that an object in motion remains in motion, unless acted on by an outside force. Well, put plainly, LMSA at UCLA is moving, shaking and growing in momentum so that the only effect a force acting on us can have, is to propel us forward towards our goal of making sure every person has access to quality healthcare. Our passion for medicine, to alleviate health disparities and to raise awareness of the issues affecting the Latino community is what fuels that force. The feature that keeps us aligned is our sense of family. As with any Latino family - music, food, and the company of friends is what keeps us united. Now that you have joined the family, join us at our next family potluck! We are excited that through this newsletter we can share our journeys in medicine, as well as provide you with an opportunity to be heard. We look forward to seeing you at the 2013 “LMSA Welcome BBQ” in August and the “Lennox Health Fair” in November!

Sincerely,
Kika Tobar and Bert Pineda
DGSOM and Drew LMSA Co-Chairs
On April 23rd, I was deeply saddened when I heard that Dr. Antronette K. “Toni” Yancey, MD, MPH had passed away at age 55 following her battle with lung cancer. The world of public health lost an inspiring leader. She was a UCLA public health professor, a well-published researcher, and the creator of the nationally known 10-minute Instant Recess® physical activity break, which serves as an evidence-based model to improve health and productivity. Furthermore, Dr. Yancey was a former college basketball player, poet, model, as well as a passionate and genuine mentor who had an impact on everyone she knew, including me.

I was first introduced to this incredibly fierce and dynamic mentor during my junior year in college when I competed for the UCLA Women’s Basketball team. After practice, I was getting extra shots up to prepare for a tough rivalry game against USC. As I was shooting, I saw a tall woman out of the corner of my eye crossing the John Wooden court. She was about 6’2” with long lanky limbs and cool braids, wearing colorful Nike sneakers and a pink UCLA Women’s Basketball T-shirt. “Damn, she looks like a baller!” I thought to myself. She had a warm smile on her face as she came closer and introduced herself as Dr. Toni Yancey. “Girl, you are quite the shooter!” she told me and gave me a high five. Dr. Yancey then went on to explain that she was part of the UCLA Athletic Committee overseeing the academic progress of student-athletes. She was also a physician and a professor, and had found out from my coaches that I was interested in applying to medical school. She wanted to reach out to me to see if I needed any help with figuring out my next steps with basketball and medical school.

From that day on, Dr. Yancey became my guardian angel and my friend, looking after me and supporting me as I finished my French major and completed my premedical studies at UCLA. After graduation, Dr. Yancey provided me with the opportunity to work with her wonderful team of public health doctoral students on various chronic disease prevention programs, including Instant Recess physical activity breaks that advocate short bursts of exercise. I truly felt fortunate to be surrounded by such a courageous and caring role model, and a champion who taught me the importance of tireless commitment and not taking “no” for an answer. As a true renaissance woman, Dr. Yancey taught me lessons that could not be learned in a classroom or even on a basketball court.

I would like to share a glimpse of her kind spirit through a few stanzas from her poem, “Did you ever have a mentor?,” which was dedicated to her own mentor Dr. Lester Breslow, MD, MPH:

Did someone ever allow you
To grow and evolve unfettered?
In surrounds quite loving
Shared passion always forthcoming
Did you ever have a mentor?
Friend, guide, torch carrier?
Hero, beacon, companion?
Emanation of spirit?
Walking here with us!

Yes, I have and her name is Dr. Toni Yancey. I will remember and cherish her inspiring leadership as I follow in her footsteps in medicine. Most importantly, her spirit and lasting legacy will dwell in our hearts and continue to move us all.
It is 5:45 a.m. Twenty-seven undergraduate students gather around the bus turnaround in front of Ackerman station. Five rented vans pull up filled with eager physicians and residents, donated clothing, food, medications, and of course, a piñata filled with candy and toys. I watch as these future leaders pile up into the car for what would be a 4 hour drive across the southern border to a whole new world. After stopping for gas and breakfast somewhere in San Diego, we meet up one last time near the border before everyone loses signal on their cell phones and cross into a land mixed with Spanish road signs and restaurants featuring tacos dorados, menudo, and chilaquiles. Our caravan continues on to a Mexican government-run building where at 10 a.m. there is already a line of patients hoping to receive medical attention.

The CCMers, an undergrad premed group, have been making these trips to Tecate for several years, returning to this border town once a quarter. They collaborate with the Latino Student Health Project (LSHP), another premed student-run organization at UCLA, and several dedicated physicians to provide basic health care to patients who would otherwise never receive medical attention. After setting up tents, and rationing beans, rice, and multi vitamins for the patients; boxes of medication are taken out of storage, assembly line style, as the endocrine drugs are placed next to allergy medications and GI meds. Gracious donations of clothes and toys from various CCM'ers are also displayed out in one of the final sections of the health fair. The Tecate Clinic Health Fair is finally set up and patients are ready to be seen. Students take their place, taking vitals, registering patients, and handing out medications, clothes, food and toys. Other CCMer's who are veterans of the Tecate Clinic Health Fair provide information on diet, diabetes, sexual education, and more.

As a new medical student I was the visitor looking in on this well organized and structured event. I was truly impressed as these able minded bodies were making a difference in a nearby community, taking an entire day away from their families, friends, and studying for finals coming up that week, to help this underserved community. I looked on as patients would walk in and interact with students, explain their chief complaint and get their vitals checked. Doctors and their undergrad shadows would welcome their patients and provide the needed care. Some patients came alone to be seen, others came in bundles of families; many with children who took great joy in breaking open a piñata. Some patients were in great health and needed only a multi vitamin; others were diagnosed with serious medical conditions, like the patient with a mitral valve prolapse, who was advised to go to the hospital and seek follow-up care.

After the last patient was seen and clean up was taken care of, the CCMers and guests formed a circle to discuss the event. Positive feedback was given all around as these professional and compassionate

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students were praised for their hard work and professionalism. The Tecate Health Day Clinic was a huge success as many community members were helped.

The trip wouldn't be complete without stopping in town for some tacos and horchata. The streets were blasting with live music and the park full of street vendors and patrons. I had a great time, and it wasn't just because I walked away with some cajeta casera and a piñata of my own; it was because I had the pleasure of working with these individuals who dedicated an entire day to help the needy in this border town. They demonstrated compassion, professionalism, and true leadership that brought a community together. This also served as a reminder of the importance of health fairs and volunteer work; in these events everyone wins. I will always remember Tecate, the faces of those who were helped, and the inspiring individuals who made this possible.

**Student Profiles: The Next Generation of Latino Physicians**

We asked two DGSOM Latino students to share a bit about themselves to get to know who they are, how they got to DGSOM, and what their plans for the future are. In this edition, Carla Spades, a recent graduate, and Alberto Cardona, an MS2, give us a glimpse of themselves.

### Carla Spades

**Name:** Carla Spades  
**Undergraduate Institution:** SFSC / PCC/CSULA  
**DGSOM Status:** Resident – Class of ’13

I was born in LA and consider this my hometown. My mother emigrated to the U.S. in her 20’s, and built a life here for her family. I currently live in West Hollywood, and will be living here for the next few years of residency. I am the first in my family to graduate from college, and will be the first doctor too. I am honored to be a member of the first cohort of the UCLA PRIME program to graduate from UCLA DGSOM.

I attended college at San Francisco State, Pasadena City College, and graduated from Cal State L.A. I majored in Communicative Disorders with a minor in Biology. I initially planned on becoming a Speech Therapist or Audiologist based on my years of work with children with developmental disorders, but quickly realized I wanted to do more to help people. I wanted to make a tangible difference in people's lives and help them get well.

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**Alberto Cardona**  
**Undergraduate Institution:** ELAC / UCLA  
**DGSOM Status:** MS2 – Class of ’16

I was born in LA and have lived here my whole life. I did my undergrad at UCLA. Prior to transferring to UCLA, I did most of my undergrad work at East Los Angeles Community College (ELAC). Throughout my childhood and high school, I was always intrigued by the sciences but I never applied myself. In 2005 my brother who is a Marine called me while he was deployed in Iraq. He couldn’t talk much, but he did tell me to just give school a chance. That I had the potential to do so much more, if I just only applied myself. This single moment shifted my whole life, my confidence, and my focus. This was the moment that essentially got the ball rolling for me.

My biggest influences have been my parents, older brother and my wife. My parents emigrated from Mexico at a young age, and endured a tough life to give their children an opportunity for a life they never had. I could not negate

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Student Profiles: Continued

Alberto Cardona

all their hard work and sacrifices by not pushing myself and trying to achieve everything I am capable of. I am so grateful, and sometimes I feel like it’s unreal that I finally made it into medical school, that at times medical school doesn’t feel like a challenge, but more like a dream come true.

I have always known I want to work with the underserved communities of L.A. It’s where I grew up, it’s a community I can identify with, and it’s where I feel I can make the biggest difference. The specialty I choose is yet to be determined. If I had to make a decision today, I would be torn between Emergency Medicine and Family Medicine. I feel that in Family Medicine I would be able to work closer with the community and help alleviate the health disparities in the underserved communities, and in doing so inspire the inner-city youth to strive for a higher education. The reason Emergency Medicine also intrigues me is because I worked for 2 years as an EMT working 911 calls and I feel the most calm and at ease when I am confronted with high stress emergency situations and I believe these qualities would make me a good E.R. doctor.

The best advice I can give those wanting to enter medical school is, find out what your “drive” is. Find what will get you through the hard days, the long hours of studying, sleepless nights, loss of time with your loved ones, and all other sacrifices this path requires. Do not do it for the title, for the money, or the recognition. This is not what will get you through this long and arduous path. If you choose this path, do it for others. This will give you everything you need to get you through it all, and will help you achieve your dreams.

My fondest memory was prior to starting medical school. Hearing that I got accepted to medical school and seeing the joy in my wife, and my family and was all worth it. Finally hearing those words, “You have been accepted,” left me speechless and in tears. I am so grateful for my parents, my older brother, and my wonderful and supportive wife. Without them I wouldn’t have gotten this far. As for being in medical school, every day is exciting if you keep the right perspective. Always remember how tough it was to get here, how you would have given anything to be where you are now. For those students following this path and trying to get in, trust me when I say that your sacrifices and your hard work will one day pay off.

Carla Spades

something I don't believe I would have been able to do as a Speech-Language Pathologist.

Work-life balance has been the most challenging aspect for me. It is something I am working hard to improve upon before I begin residency. Taking time for self-care, and making sure I am healthy and whole is crucial. When exams come around, or I’m on a difficult rotation, self-care is the first thing to go. This is something I vow to do differently over the next 4 years.

I know it’s generic, but my greatest influence has been my mother. She endured incredible hardships and persevered to become a successful businesswoman. She valued education and hard work and instilled those values in me throughout my life. She is my pillar, and I am certain that without her love, support, and guidance I would not be the woman I am today.

I matched into Obstetrics and Gynecology at Cedars-Sinai Medical Center and will be starting residency in a few days. Ob/Gyn was my first rotation and my love for the field was nearly instant as I quickly realized that as an Ob/Gyn I will have the opportunity to help women through some of the most amazing and frightening moments of their lives. My experiences as a student solidified my love for the field: I had the honor of delivering a couple’s first child, I offered comfort as a woman experienced her first miscarriage, I helped counsel a woman about the benefits of chemotherapy for her newly diagnosed cancer, and I held a woman who mourned the loss of her twin fetuses. No other specialty promises me the honor and privilege of helping my patients through their joy and suffering. It is the perfect fit for me.

My best advice is to say: RELAX!!!! Looking back, I stressed out SO hard during medical school. I was constantly afraid I would fail an exam or screw up on a rotation, so much so that I didn't enjoy a lot of what DGSOM had to offer. I realize now that I could have relaxed a lot more. I worked hard, I should have played hard too. My fondest memory is “Match Day”, for sure. Opening my envelope and seeing my top choice residency program was a dream come true. It was a culmination of all the hard work and effort I put into medical school (and my Masters program) over the past 5 years. That was the moment I saw my future, and it was bright and beautiful. I will never forget that day.

Didn’t get enough of Carla and Alberto? Don’t worry! We have the extended version of the student profiles and more on our website. http://www.medstudent.ucla.edu/students/wordpress/lmsa/
“The secret to success is to know thyself because in this world there is a lot of rejection.”

The voice of Dr. David Hayes-Bautista, Professor of Medicine and Director of the Center for the Study of Latino Health and Culture at David Geffen School of Medicine, sincerely advises medical students on how to have a successful career. He explains they need to research things they are passionate about. He goes on to say, “it must light a fire in your belly because no matter how many headaches or hours you devout, it takes an average of five tries for a project to be funded by NIH and twice as many rejections to get published.”

Dr. David Hayes-Bautista has had his fair share of obstacles before becoming world renowned in Latino health. Born an Angelino, his family has had roots here for over a century. During his first experience with the Los Angeles school system they called him “mentally retarded,” but after moving to the greater San Luis Obispo area something happened. Expectations grew, and he was functioning at a sixth grade level when he was only in third grade! Following his father’s footsteps, he studied engineering at UC Berkeley. It didn’t take long before boredom stuck, grades dropped, and education seemed overrated. He found himself in Mexico questioning the world and learning about poverty, politics, underdevelopment, and pieces of unwritten US history. He craved knowledge about his people, but once back at Berkeley he found professors talking down to them as “deviant groups.” Everyone had their own label or “truth” of what Latino meant, from prisoners, drug addicts, and prostitutes, to immigrants, gardeners, or the “help.” Despite these forthcomings, it was an exciting time. In 1967, he was in the heart of the Chicano movement. People involved in farmer’s issues, anti-war, Mexican American Student Confederation (MASC), third world strike all bled Chicano, and it spoke to him.

After graduating, he simultaneously worked as a doctoral candidate in medical sociology at UCSF and as founding director of La Clinica de la Raza. The East Oakland St. Elizabeth Parish saw a need for free health services to serve the Chicano Latino Community, and Dr. Hayes-Bautista made it happen. Unfortunately, there was no data reflecting the needs of the Latino population, but almost anything done met a need. In two years, he had his PhD, completed his dissertation on “How people get a sense of being Chicano,” and as a side note learned how Latinos associated with health without any assumptions, just agency. Afterwards, he became the first ever-Chicano faculty at UC Berkeley where his own dean told him not to “study this Chicano stuff since no one cares about it.” It is a good thing he studied it anyway, and received his tenure in four years.

Despite all these obstacles to do what he loved, the biggest obstacle he has faced is the baked-in assumptions about how Latinos “are,” and his attempts to get everyone on board to get past them. If people are going to keep doing research on baked assumptions, then the community is never going to have the research they need and deserve. He urges medical students including those who want to serve the community to get in any type of research they can. “There is so much we do not know about Latino Health,” he says. As future providers, he wants everyone to know there is no secret or set of checkmarks when it comes to serving the Latino community. Assumptions must be eliminated. We are treating patients, who happen to be Latino, and they deserve to be treated as individuals like anyone else in all specialties, not just primary care.

When asked about what could make the biggest impact in the Latino communities, two things came to mind. First, he does not agree with the mindset to leave out the recent immigrant and undocumented from the Affordable Care Act. They are young, vivacious, healthy, have fewer strokes, fewer cancers, use services less, smoke less, drink less, and if included, would have helped offset the cost of the aging baby boomers. Second is culture. The epidemiological paradox of the Latino population shows that the more acculturated Latinos become, the unhealthier they become. If we can help facilitate the maintenance of culture between generations, then the populations could potentially become healthier. Even ideas of “Latinization” adding years to your life may not be far from the truth. However, research needs to be done.

Dr. David Hayes-Bautista leaves us with the advice to figure out our passions, stick to them, conduct research, work where we feel comfortable, lose all assumptions, learn Spanish, and marry Latino!
LMSA IN THE COMMUNITY

Kasee Houston and Caleb Wilson smile as they pose with Dr. Wilbert Jordan, medical director of the OASIS Clinic of King/Drew Medical Center, during the “Leadership in Action” Series hosted by the PRIME program.

Henry Lew (left) and Lyndon Gonzalez (right) talk in the CHS plaza prior to the “Ceremony of Thanks” which celebrates and gives thanks to the families of those who have donated their body for the advancement of medicine and medical research.

Jennifer Menjivar, Karen Martinez, Jasmin Reyes, and David Torres Barba join students from CSU Fullerton who have just finished touring the DGSOM campus. The LMSA often hosts different groups who wish to know more about our medical school.

LMSA members pose for a picture as they prepare materials and logistics for the “Lennox Health Fair” celebrated last March. LMSA organizes these health fairs twice a year in the Lennox School District in Los Angeles.

LMSA members Jasmin Reyes (left), Jennifer Menjivar (middle right) and Erica Tukiainen (right), along with their UCLA/UCR peer Tony Casillas (center left), prepare to educate day laborers on healthy eating and exercise techniques as part of their “Salud y Trabajo” Project.

Members of the undergraduate CCM group along with some LMSA members pose after reaching the top of the hike trail in Temezcal Canyon. These types of activities are a common way to increase collaboration between the two groups and foster mentorship as well as build camaraderie.
I read the unequivocal language of hard work in their tough surface and tectonic grooves, an earthly chronicle of scars and amputations.

I also read in them the fields that grow our food, the avenues that lead to our homes, the churches where priests speak of transcendental things.

I don’t ask whether people reduced by illness are legal or illegal — it’s none of my business. Men and women transcend documents. People are more complex than a birth certificate, a passport or a driver’s license.

Medicine is based on observation: first see, deduce after. The contrary process lacks merit. Prejudice is the professional epitaph of physicians. Perhaps, this is why Chesterton wrote “the chief object of education is not to learn, but to unlearn.”

Some say that my patient isn’t entitled to healthcare for lacking a document.

I disagree.

Some are writing laws to coerce physicians into betraying patients.

I will never cooperate.

My opinion is not based on emotion: it is rooted in my knowledge of biology and medicine. It is based on an ancient codex of professional honor.

We depend on those who plant trees in times of uncertainty — what kind of man cuts down the tree that gives him shade?

- Lucas Restrepo, MD, PhD

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**A MINUTE FOR REFLECTION...**

"Today She Is Happy"

Today she is happy.
Yesterday she was in pain — physical? emotional? psychological?
Who can tell... The agony was in her face.
Today she is happy.

The other day I saw her resting—not quite what you would call sleeping,
but resting nonetheless.
Resting in a moment of peace? from exhaustion? out of apathy?
Who can tell... The calm was in her face.
Today she is happy.

Now every day the streets are her home—last night the alley,
in the morning that bench, lunchtime by the store front,
an evening spent on that stretch of sidewalk.

Why such a vast place for a home?
Was it poverty? orphanage? job loss? drugs? mental illness?
voluntary social isolation (amidst so many passersby)?
Who can know... The stories are in her face.

We all have our stories to tell, our moments we’ve lived,
the struggles we face, the thoughts that we bear.
Who can know the feelings we carry as we pass in the street... Today she is happy.

- Joaquin Galarza, MS2

**“Chiromancy”**

The hand is the measure of man. The specifications are: twice the radius of a fruit, the full diameter of a tree’s branch. Evolution’s subtle demiurge plays dice well.

If “the eyes are the windows of the soul,” then it may not be invalid to say that the hands are windows to a life.

The hands of my father didn’t betray that he was an engineer. His fondness for carpentry carved in his hands a catalog of injuries. He was proud of them; each scratch conveyed a jovial anecdote and ethical commentary. Covered in sawdust, he’d tell me: “Work is your patrimony; work defines what kind of man you are; respect is earned with work, not with the geography of your cradle or inferences from your appearance.”

The homunculus of the motor cortex concurs with its disproportionate thumb. Handedness and language, co-segregated in solidarity, define the biped that pretends to be the “measure of all things.”

Every time I see an immigrant in the hospital, I show his or her hands to my students and residents, and say: “These are the hands of a worker.”

- Joaquin Galarza, MS2