Dear Friends,

The UCSF Osher Center’s patients, faculty, staff, and trainees remain resilient, adaptive, and compassionate – despite the overlapping health, societal, and climate crises happening around us. The UCSF Osher Center is truly a community, relying on one another to enhance and sustain our efforts to nurture health and inspire well-being.

In this spirit of community, we’ve chosen to revise our name: We are now the UCSF Osher Center for Integrative Health. Using “health” instead of “medicine” better reflects a shift to the promotion of wellness rather than simply the treatment of disease, emphasizes the interprofessional nature of our field, and highlights our core value of health equity.

This report describes many of our activities, including the launch of our Integrative Health Equity Initiative, which we’ve established to coordinate all of the center’s efforts to address health and health care injustice. We are striving to integrate health equity goals into all projects.

We are excited to be hiring additional clinicians so we can expand our patient services, which are more in demand than ever. We’re also enhancing our research capabilities to ensure that we lead the field in robust and inclusive studies.

Expansion of our training programs also is ongoing. This year, The Bernard Osher Foundation renewed its commitment to our work through a generous education endowment. Our clinical and faculty fellows training program, supported by the Coordinating Center of the Osher Collaborative, is flourishing. Our Advanced Training in Hospital-Based Massage Therapy Program provides massage therapists with education and clinical experience to serve inpatients.

Our long-standing work in public education in integrative health was recently given key support by The Bernard Osher Foundation in the form of a generous endowment for the UCSF Osher Mini Medical School for the Public.

We are grateful for our many friends who join us in our commitment to integrative health. Thank you for your ongoing support.

Shelley R. Adler, PhD
Director, UCSF Osher Center for Integrative Health
Osher Foundation Distinguished Professor of Integrative Health

Patient Care

Growing Our Work in Integrative Rheumatology

In the past decade, much progress has been made in treating rheumatic diseases like rheumatoid arthritis (RA) and systemic lupus erythematosus (SLE). Yet patients with these conditions still suffer from symptoms and side effects while treatments are being tested and refined.

Integrative rheumatologist Sarah Patterson, MD, completed predoctoral and postdoctoral fellowships in the UCSF Osher Center Training in Research in Integrative Medicine (TRIM) program, and is now an affiliated faculty member in the center.

“My training at the UCSF Osher Center enabled me to gain knowledge and skills required to develop an integrative rheumatology clinical practice and pursue a career as a physician-scientist at the intersection of rheumatology and integrative medicine,” she says. “My goal was to learn integrative treatment approaches that can be combined safely with state-of-the-art conventional biomedical approaches to achieve the best possible outcomes for my patients.”

With a K23 Career Development Award from the National Institutes of Health (NIH), Patterson is examining evidence-based integrative treatments for RA and SLE, beginning with a study to determine how psychological stress and resilience impact disease activity and symptom severity in RA. She plans to lead a clinical trial of a mindfulness-based stress reduction intervention for RA patients.

Nutrition for People with Rheumatic Diseases

Understanding how diet affects inflammation in people with rheumatic diseases can be challenging. There is no “one size fits all” diet, but studies on nutrition and health show that most people can improve their health by eating a plant-based diet rich in vegetables, fruits, whole grains, legumes, and nuts.

Food will not cure a condition or reverse damage that has already occurred, but it may reduce active inflammation, improve symptoms, and decrease the risk of future disease flareups. To learn more, visit the Nutrition for People with Rheumatic Diseases website: tinyurl.com/vf8b4wj7.
The UCSF Osher Center is partnering with the UCSF Helen Diller Family Comprehensive Cancer Center to test and implement models of integrative care for cancer patients. Thanks to funding from the Mount Zion Health Fund, the Patient-Centered Outcomes Research Institute, and other sources, more than a dozen pilot programs have been launched to benefit cancer patients.

“Complementary therapies are in high demand among cancer patients,” says Maria Chao, DrPH, MPA, associate director of research and of clinical research and analytics at the UCSF Osher Center and the study’s principal investigator. “For instance, 86% of breast cancer patients and a little more than half of lung cancer patients use complementary techniques. But not everyone has the same access.”

One current study is examining whether adding acupuncture, pain counseling, or both can help reduce pain and medication use among hospitalized cancer patients. Pain counseling involves providing patients with supportive listening and teaching them coping skills. Other studies are examining the benefits of nutrition counseling and complementary therapies to relieve symptoms such as nausea.

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“I’m excited and hopeful about my future in pediatrics. The UCSF Osher Center is allowing me to be the doctor that I wanted to be.”

Priya Jain, MD
Integrative Techniques for Pain Management

**Mindfulness for Reducing Depression**

Although depression is a mental health disorder, it can lead to physical pain – and physical pain can trigger depression.

Rick Hecht, MD, the Osher Foundation Professor of Research in Integrative Health, and Dr. Adler are continuing studies on how mindfulness-based cognitive therapy (MBCT) can help patients cope with depression. MBCT combines meditation with cognitive behavioral therapy techniques and has been shown to significantly improve depression and anxiety.

“We know that an eight-week MBCT program prevents depression relapse at least as well as using antidepressant medications,” Dr. Hecht says, noting that many participants eventually relapse. The study team believes they can make MBCT even more effective. “Initial focus-group results have found strong interest from participants and teachers in maintenance approaches, such as booster classes. This new study is aimed at understanding the perceived needs of MBCT teachers and participants, and how we can best extend the long-term benefits of MBCT.”

**Heat to Treat Depression**

Integrative clinical psychologist Ashley Mason, PhD, is studying whether heat treatment using a sauna can improve depression. This builds on preliminary data suggesting that traditional practices such as sauna, steam baths, and sweat lodges influence biological pathways that can improve mood.

**Group Pain Management for Opioid Use**

In 2020 and 2021, San Francisco experienced higher fatalities due to the ongoing opioid epidemic than from COVID. “COVID created a vacuum in supportive services for opioid abuse,” Chao says. Since 2016, the UCSF Osher Center, has partnered with the Tom Waddell Urban Health Center, a clinic in San Francisco’s Tenderloin neighborhood that assists underserved residents with health needs, including recovery from opioid reliance. With in-person groups still limited due to the pandemic, the center is now leading a virtual group Integrative Pain Management Program, serving patients who have experienced ongoing chronic pain and have a current opioid prescription. They aim to teach participants integrative methods of alleviating pain while reducing reliance on opioids. They’ve also learned that group care offers added benefits.

“We know that people in chronic pain also suffer from social isolation, and sometimes depression, since their condition exacerbates their ability to have social lives,” Chao says. “But in our qualitative interviews, people have talked about how the group setting provides support, a sense of community, and fewer feelings of being alone.”

Mira Toveg, LAc, and Maria Chao, DrPH, MPA, discuss acupuncture points.
Many people in our focus groups spoke about using lovingkindness meditation as a coping tool to navigate global happenings, including COVID and structural racism.

Ariana Thompson-Lastad, PhD

Lovingkindness to Cope with Trauma

In 2021, the UCSF Osher Center completed its study of lovingkindness meditation, in partnership with East Bay Meditation Center (EBMC) in downtown Oakland. The Lovingkindness with Intersectional Neuroscience and Diverse Meditators (KIND) study looked at how this meditation technique works, builds community, and heals meditators’ minds and bodies.

The study was conducted remotely during the pandemic. This wasn’t the original plan, but it had a silver lining. “Because of the virtual format, a lot of people from around the world could connect with EBMC,” says Ariana Thompson-Lastad, PhD, a new UCSF Osher Center research faculty member and co-leader of the study. “We all learned how important it is to make these programs accessible to people with disabilities or other hardships in visiting the space in person.”

Thompson-Lastad, who completed postdoctoral training in the UCSF Osher Center’s TRIM Fellowship, notes that study participants also were affected by 2020’s racial justice protests. “Many people in our focus groups spoke about using lovingkindness meditation as a coping tool to navigate global happenings, including COVID and structural racism,” she says, noting that the project is helping the UCSF Osher Center better understand how lovingkindness meditation can support people with chronic health conditions.

Training Comprehensive Approach to Improving Health Equity

The UCSF Osher Center is committed to reducing health inequities with projects on several fronts, all brought together under the umbrella of the Integrative Health Equity Initiative.

The initiative consolidates and advances the center’s multifaceted efforts to address long-standing inequities in health and health care, using the unique framework of integrative health across its research, training, and clinical missions. It also includes an initial, yearlong, antiracism-in-health-care training program that trainees and faculty and staff members complete.

With funding from the National Institutes of Health, the center has launched the Integrative Health Equity and Applied Research (IHEAR) Fellowship, an eight-week summer training program for predoctoral students from across the health professions. The UCSF Osher Center aims to ensure that 50% of each IHEAR cohort consists of students from underrepresented or disadvantaged populations. The 2021 cohort included nine fellows, with eight of them from underrepresented groups.

“Creating a more diverse workforce goes hand in hand with improving health equity for patients in our region,” says Chao, who also is associate director for health equity and diversity at the UCSF Osher Center.

One of the IHEAR fellows, Chanda Williams, successfully applied for a TRIM fellowship to continue her integrative health research training at UCSF. “I’m interested in the role of complementary and integrative health approaches in advancing health equity to improve outcomes for the chronically underserved,” says Williams, a certified yoga therapist who is now pursuing a PhD in psychology. “The TRIM program was a natural next step for me in refining and enhancing my skills and knowledge in integrative medicine, specifically in designing and conducting rigorous research.”

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Maria Chao, DrPH, MPA
The UCSF Osher Center houses the Coordinating Center for the Osher Collaborative for Integrative Health – the international consortium of seven academic Osher Centers – and supports numerous programs in this role, including the Osher Collaborative Clinical Faculty Fellowship. The yearlong fellowship provides advanced training in integrative health to clinicians, who can immediately use these techniques in their practices.

The fellowship’s co-directors are Dhruva and Melinda Ring, MD, director of the Northwestern University Osher Center for Integrative Health.

“We’ve designed an amazing and robust curriculum that covers nutrition, mind-body medicine, manual techniques, spirituality, and more,” says Lisa Howard, Osher Coordinating Center manager, who provides administrative leadership for the program. “It’s an interactive learning experience, with faculty members from across the Osher Collaborative teaching our fellows and the fellows teaching each other about their specialties and perspectives. They learn a lot and build great connections with colleagues.”

Fellows have included specialists in anesthesiology, family and community medicine, obstetrics/gynecology, oncology, pediatrics, and rheumatology.

The Osher Foundation recently provided a generous endowment for the program that will support its further curriculum development and expansion, including opening the fellowship to clinicians outside of the Osher Centers.

Briana Bruce, MD
2020 Osher Collaborative Clinical Faculty Fellow
Pediatric Hospitalist, Sanford Bemidji Medical Center

“I am so grateful to have participated in the Osher Collaborative Faculty Fellowship. I learned what it means to practice integrative health using an evidence-based approach. After completing the fellowship, I feel well equipped to incorporate more integrative topics into my practice and look forward to continuing my learning journey as an integrative pediatrician.”

Ann Marie Vertovec, MD
2020 Osher Collaborative Clinical Faculty Fellow
Emergency Medicine Physician, Northwestern University

“The Osher Fellowship in Integrative Health is an antidote to physician burnout. I learned so much about maximizing health, the vast research and science behind the many different areas of integrative medicine, and how to assimilate and present this information to colleagues and to my patients in a compassionate way. I use this knowledge every day in my practice.”
UCSF Thanks You for Your Support

For more information about the UCSF Osher Center and how you can contribute to its mission, please contact Sarah Krumholz, Senior Director of University Development:

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