Editor: Henny van Dijk www.uthro.org April,2021

EMOTIONAL HEALTH RESOURCES IN THE AGE OF COVID

This past year has been a challenge in so many ways and surviving it might have been a struggle. Issues involving mental health, legal or financial problems all magnify when one is tied to their home and exchanges with family or friends became a major problem. We were ordered to stay home, wear masks, keep distances



and life as we knew it was turned topsy-turvy. I used to joke that this was a very good preliminary to being retired for those who were not or not yet. My daughter who works for Baylor College of Medicine has been working from home since February of 2020 and is still doing so in March of 2021. But returning to my first statement - survival of the Covid Challenge might have taken some real personal challenges that seemingly are almost unbearable and require doctor's visits, medications and more to tackle the despair. There is however help available for every UT Houston Retiree - the UTHealth Employee Assistance program, EAP for short. This program stands ready to help with Mental, Financial and Legal issues, is just a phone call away or via their website a form away. About that form - the third question asks you to name the organization of which you are a member and the answer is UTHealth. When asked for an email address just give them your actual email address (in my case hvandijk@comcast.net) so EAP can contact you for a appointment. Their Assessment & Referral specialists can then refer you to those who can help you. The standard consultation is for 5 - 30 min. visits with a licensed practitioner; the exchange is always confidential and offers you the opportunity to talk things out. Issues such as depression, bereavement or the heavy burden of being the caregiver will qualify for an EAP assessment and follow-up. Bereavement has become a major problem when families could not visit with those who had Covid or, in a worse case scenario, unable to say goodbye to their spouse, child or family member. The team at EAP is standing ready to help. I talked to Sharlene Johnson about a specific problem - the caregiver and she has organized a support group which gets together once a month on the second Wed. of the month from Noon till 1 PM, while the Bereavement group meets every fourth Thu. again from Noon to 1PM. You can self refer or your physician can refer you to the EAP which might be a good first step and might avoid medications.

Did you know that you have free limited consultation with a local attorney, free limited assistance preparing a simple will and free limited income tax consultation? The legal/financial assistance gives you 5 free - 30 min. consultations, but when additional consultations are necessary you can claim a 25% discount of the regular fee.

I also noticed on the website that Julie vanOrden, the wellness program director in the past who moved to a similar position in San Antonio is back in the UTHealth EAP fold, so if you are considering starting or continuing a wellness program she would be the person to contact. Julie is a dynamo I remembered from UTHRO's challenge test we as the UTRetiree 4-person team winning first place in the UT Systems Challenge and we have the hardware to prove it.

All in all think EAP when you have serious issues and contact them: by phone - 713-500-3327 or visit their website at https://www.uth.edu/uteap/about-us/contact-us

Henny van Dijk

Oh Yeah and One More Thing...



The membership fee for 2021 came due Jan.1, 2021 so please take a minute to pay your dues by sending your check for \$15.00 (retiree or retiree&spouse) made out to UTHRO to our treasurer, Margaret Zambrano 20903 Imperial Ridge Ln., Spring, TX, 77379

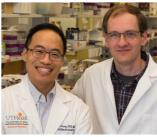
We are counting on your support so we can continue to bring you the newsletter, the educational events, and the trips to some of the more interesting places in Texas once this Covid threat has disappeared.

The renewal form can be found at our website www.uthro.org

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New Oral Cancer Therapy



UTHealth School of Dentistry Simon Young, DDS, MD, PhD, and Rice University Jeffrey Hartgerink, PhD, have created an immunotherapy they call "SynerGel," an injectable, biomaterial-based platform for intratumoral drug delivery. "Biomaterial-based drug deliv-

Young and Hartgerink ery is a rapidly growing area of

research, for its ability to control the release and presentation of bioactive signals and improve therapeutic efficacy." Immunotherapy is a method of treatment that uses a patient's own immune system to combat cancer or any other immune-susceptible disease.

In 2018, the pair published research on the use of a multidomain peptide gel to deliver ADU-S100, an immunotherapy drug from a class of "stimulator of interferon gene (STING) agonists." "To kill a tumor, from an immune standpoint, you want to ramp up the immune system to stimulate it to attack," Young said. "That's what our gel was created for. However, the one thing we didn't consider is tumors have a lot of cells in their environment that are actively suppressing the immune system. Meaning, not only do tumors emit molecules that cloak them and put the immune system to sleep, but there's actually immune cells there that are attracted to the tumor's microenvironment that almost protect the tumor from attack."

This realization created the need for a two-pronged approach to immunotherapy - trigger an immune response and remove suppressive immune cells from the tumor's microenvironment.

To do this, a drug-mimicking peptide hydrogel was loaded with an antitumor cyclic dinucleotide (CDN) immunotherapy agonist to create SynerGel. The biomaterial combined inducible nitric oxide synthase inhibition with controlled delivery of CDN.

Over a year of testing starting in 2019, the SynerGel demonstrated a slower drug release than commercially available hydrogels, allowing for immune-mediated elimination of established treatment-resistant oral tumors in a murine model, with a median survival of 67.5 days compared with 44 days in no-treatment control. Total survivorship also increased from 20% in CDN drug-alone groups to 33% in SynerGel treated groups.

"This paper shows a logical progression of the technology," Young said. "Our in vitro work showed the STING agonist can be released in a sustained fashion in a controlled environment, but also this new version of our gel has bioactivity and can be injected into preclinical tumor models with a higher survival rate. The most exciting part of this research is it's only the beginning of this material's story. We're trying out new formulations to see if we can get even better results."

From an edited article by Kyle Rogers

Our Members—at—Large...



Efren Pena I joined UTHealth in 1988 under the HSC-G umbrella where I stayed until my departure in 2011. First starting at the Rec Center as an entry level Clerk and later advancing to administrative roles in Support Services, Houston Recovery Campus, General Accounting, Human Resources, and the EVP Office for Research (later reorganized to the Office of the Provost & EVP for Research). Working in support

of the Research enterprise gave me an appreciation of the hard work and dedication of the talented scientists and staff in the advancement of new discoveries. Lenjoyed supporting those efforts even in the ancillary roles I held.

I formed many professional relationships during my time at UTHealth. Many of those turned into lifelong friendships and that is the reason why I joined UTHRO.

In my downtime I enjoy cooking the Tex-Mex and southern comfort foods of my childhood.



Jeanie Mullin After a career in medical office management in the public sector, I joined UT Medical School in Houston in 1993 and worked in various administrative jobs such as: residency secretary in Otolaryngology, executive assistant to chairman in Radiology, senior executive assistant to the associate dean and president & CEO of University Care Plus, &

Manager of Alumni Affairs. I then took a job as Program Director of the National Youth Leadership Forum in Houston which enabled me to care for an ill parent with stage-IV cancer. I returned to UT Med School in 2007. I also met my husband, Rick Valentine at this time. Again, back at UT, I worked in admin positions in the Dept. of Neurobiology & Anatomy and Dept. of Neurology.

After departing employment at UT, my husband and I opened a music store. We now have an in-home music studio.

This is my fourth year as a member of UTHRO. I joined because I was a very active member of the University Classified Staff Council and was chairman on various committees. I met so many nice people while working at UT! I am hoping to continue to make new friends who want to be active and do things around Houston and maybe take some day trips.

New Alzheimer Findings ...

A lack of a protein in the brain that keeps our tissues healthy as we age is linked to Alzheimer's disease, according to recent research from UTHealth.

Early detection of the deficiency of Interleukin 33 (IL-33) with clinical interventions could help the brain age in a healthier way to prevent degenerative diseases, according to a paper published recently.

The findings showed that IL-33 was critical for removal of what senior author Yahuan Lou, PhD, described as "garbage" from brains, keeping cells healthier for a longer period of time, and helping minimize damage over time.

Lou is a professor in the Department of Diagnostic and Biomedical Sciences at UTHealth School of Dentistry. Corresponding author is João L. de Quevedo, MD, PhD, professor in the Department of Psychiatry and Behavioral Sciences at UTHealth.

"In the brain, normal neurons repair themselves by discarding abnormal proteins, similar to taking out the garbage," Lou said. "Although neurons get older in humans beginning around 35 to 40 years of age, continuing to minimize the 'garbage' or damaged DNA and proteins that buildup in the organs allow neurons to stay healthy and function properly – even as we age."

During middle age, neurons in the brain undergo accelerated aging, which interferes with the body's ability to detoxify or repair damaged DNA and proteins. "Without those anti-aging processes, human neurons begin to die or no longer function correctly at a much higher rate by 60 to 65 years of age," Lou said.

In most people with Alzheimer's, symptoms first appear in their mid-60s and the brain disorder slowly destroys memory and thinking skills and eventually the ability to carry out the simplest tasks.

According to the authors, an additional mechanism on the IL-33 molecule serves as a control agent and accelerates drainage of abnormal proteins from the brain. The newly discovered mechanism is, as Lou described, a "sewage" system in the brain called the glymphatic system, which is composed of tiny spaces surrounding the veins that gets rid of brain debris. Defects in the glymphatic system, would lead to the accumulation of abnormal proteins that are linked to Alzheimer's disease in humans.

The study unveils the importance of a molecule called aquaporin 4, a water "pump" in the brain that drives water to remove the waste surrounding the neuron close to blood vessel tubing in the brain. However, once the IL-33 gene is knocked out, these small "pumps" are no longer produced.

Lou said when these mechanisms are broken, the brain accelerates in aging, which leads to Alzheimer's disease and death. Since this process largely starts at middle age, he proposes the period between adulthood and old age is a good time to review levels of IL-33 and other related biomarkers, such as those found in blood and urine, for early diagnosis of Alzheimer's disease. These screenings can become a preventive measure for patients with or without a history of degenerative disease. *John David Powell*

The Keukenhof at its Best...

After all the bad experiences this past year and as a true Dutch guy I wanted to get you in the mood for better things to come and I thought this article might be a great start. Henny van Dijik



The Most Beautiful Flower Garden In The World Has No Visitors For The First Time In 71 Years. As a real Dutchman, and photographer I am a big fan of our flowers and spring is the ideal time for tulips, daffodils, hyacinths and freesias all in their colorful glory at the world-famous Keukenhof, the most beautiful tulip garden in the world. Every year millions of tourists visit this garden. That's a huge lot considering the garden is only open in spring! Every year, a hard-working crew makes sure the garden looks as good as ever, including this year. But...this year is 'special'. Keukenhof is closed, for the first time in 71 years. But that doesn't mean there are no flowers. On the contrary; the flowers look incredible and get as much attention and care as always. Because even without people, nature and the show of the garden goes on.

I've been photographing the tulips since forever, mostly in the countryside, but there was one thing that I still wanted to capture one time in my life: Keukenhof without any other people. This seemed impossible, until this year. With the COVID-19 virus keeping everyone at home and tourists away, I knew this was my only chance of making this happen. When I visited the park it looked at its best. Walking around there all alone, with only the sounds of birds and the incredible smell of all these flowers, is an experience by itself. I sometimes just sat next to the flowers and the water, enjoying nature. It was just a magical experience.



Having no people in the park allowed me to photograph paths and angles in a certain way that you normally don't get to see because of the crowds.

This photo series aims to show the beauty of the park through these images.

Too bad there's no smell involved.

Edited from a photo essay by Albert Dros

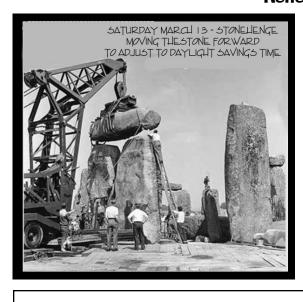
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The University of Texas Houston Retiree Organization 5827 White Clover Dr. Richmond, TX 77469

To update your address or phone number please contact us at 281-655-1983

And Now For Something Completely Different...

Reflecting on a hour gained...



That
Damned
Time
Change...

Had To Go Around And Fix All My Clocks...



UTHRO OFFICERS 2021

PresidentKathryn Bradley281-239-7980kbradley77469@gmail.comVice-PresBarbara Kelly832-465-1040bkelly0127@gmail.comSecretaryDaun Gray713-668-1816dgsoct@yahoo.com

Treasurer Margaret Zambrano 281-655-1983 20903 Imperial Ridge Ln., Spring, TX, 77379 zambrano55@sbcglobal.net

Web Administrators Henny van Dijk, Pat Grealy & Glenn Schreyer Newsletter Editor Henny van Dijk