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Kevin Gregory: Hello, and welcome to episode three of the HD Insights Podcast. I'm Kevin Gregory, director of education, communications, and outreach at the Huntington Study Group. On this episode, we spoke with Dr. Vicki Wheelock, who is a clinical professor at UC Davis Health. Dr. Wheelock is also the director of the UC Davis HDSA Center of Excellence, and a longtime member of the Huntington Study Group. I think you'll find Dr. Wheelock to be very passionate about helping the HD community through clinical research and expanding knowledge about Huntington's disease to a larger, global audience, as you'll learn later on. She is particularly active in the HD community, and our conversation was well-timed because Dr. Wheelock and her team at UC Davis are serving as the host site for our annual HSG meeting being held in Sacramento this November. At the conclusion of this episode, I'll provide more information about the annual meeting and website information to register.

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Kevin Gregory: Now sit back, relax, and enjoy episode three of the HD Insights Podcast.

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Kevin Gregory: Dr. Wheelock, thank you for joining us today on the HD Insights Podcast. I want to, before we get started here, really want to jump into your background. I think it's always important to understand how our researchers and people working in treatments for Huntington's disease have gotten to where they are now. Tell us a little bit about what got you into neurology, and specifically, how you ended up in the Huntington's disease field.

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Vicki Wheelock: Well, the answer is that I met an extraordinary woman. I had started at UC Davis. I joined the department as a junior faculty member, and my former chair introduced me to Judy Roberson, who was, at the time, a member of the HDSA Northern California Chapter board, and she was also a family member of ... Her husband had Huntington's disease, and her brother-in-law was also affected, and had started a foundation to help with Huntington's disease research and care. So I had a very incredible meeting with Judy Roberson. Back in April of 1997, she told me about her family. She brought me lots of pamphlets about HDSA. She provided lots of inspiration.

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Vicki Wheelock: At the time, the family was most interested Huntington's research, but I didn't have a background in research at that time. My training was in clinical neurology, so I suggested that we would go ahead and start a clinic for Huntington's disease patients. Through Judy's networking, we found out about the Huntington Study

[00:04:00] Group. In fact, she had had our site, UC Davis, qualified the year before I met her with the first eight patients who came to UC Davis.

Vicki Wheelock: So we were fortunate to be able to hire Terry Tempkin, a nurse practitioner that I had met through the community, and turned out to be an extraordinary partner in building our program. So we started our multidisciplinary clinic to let people know about it. The chapter board and chapter board members were wonderful in doing outreach to let people know about our clinic. And things went forward from there.

[00:04:30] Kevin Gregory: What were some of the challenges getting something like that started, really from the ground up, all those years ago? Was there any particular thing that sticks out to you as a challenge, or was it pretty smooth, and did you have a lot of support from the institution?

Vicki Wheelock: [00:05:00] I would say not a lot of challenges because of the funding that we were able to receive from the Joseph P. Roberson Foundation to help out with salary support. In the early days, we also had funding from two other foundations, the Charles and Margaret Pue Foundation and the [inaudible 00:05:11] Foundation. We used those funds to pay the salaries of the people working in the multidisciplinary clinics, so to pay for our nurse practitioner, our genetic counselor, our physical therapist, and very importantly, our social worker, who's really a key position in the center.

[00:05:30] Vicki Wheelock: So we were very fortunate because of the generosity and the caring of these wonderful individuals to help start our clinic. I think all of them wanted there to be a clinic especially for Huntington's disease, and they made that possible. UC Davis was wonderful about providing the space, and the resources, and things. They were very supportive of this. So there really were no barriers once we had the vision and once we had that very generous support.

[00:06:00] Kevin Gregory: How has your center grown over the years? What kind of patient population size did you start out with, and where are you now?

Vicki Wheelock: Yeah, we started ... That first year, there were eight patients, and within a year or so, we had probably 30 patients that we had seen. Then we were invited by HDSA to apply for Center of Excellence status. I believe that was in 1999, maybe a year or two later, very early in that program. We applied, and the first year, we did not get accepted. I received the most lovely rejection letter of my career from Barbara Boyle at HDSA. That was really a lovely letter saying, "We're so sorry we're not able to select and fund you this year, but we really want you to apply next year." As I said, it was something that was very memorable to me that, "Don't give up. Just keep trying. Reapply next year."

[00:07:00] Vicki Wheelock: When we reapplied, we were then awarded the status of being a Center of Excellence based on the fact that we had this multidisciplinary clinic and the resources in place. The first year after that designation, Kevin, we had 60 new

[00:07:30] patients come to see us. So that designation really put us on the map, and then families from all over knew about us and to start to come. Over the years, we've tracked our visits and tracked our new patients and the work that we've done. I'm going to pause here for a second to bring a number in that I'd like to share with you. I didn't have that opened up when we started, but I'd like to go ahead and do that.

Kevin Gregory: Absolutely. That's amazing, just even that jump from the first couple years after starting to get from eight patients to 30 in the first year, and then another jump up to 60 within just a couple years' time.
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Vicki Wheelock: This was before social media too, right? I mean, this was ... I mean, we had internet, but it was ... Yeah, so the word really got out there. So let's take a look here. Oh, that's one folder that I wanted, but there's another one in here. Let's see. Yeah, okay. Because I do track these things because I've been very interested over the years in terms of what our numbers have been. We have seen 663 new patients, and we've conducted 4,500 followup visits since 2001. How do you like those numbers?
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Kevin Gregory: That is amazing. That is absolutely amazing.

Vicki Wheelock: Yeah, so we have a really, really busy center. We are seeing lots more people now for predictive testing. We actually have a program put in place through our health system for anonymous predictive testing. That's been operational since 2011. Before that, before the electronic health record, we were able to offer anonymous testing in the paper chart era, but once we got the electronic health record, we had to develop a process so that we could still see patients who were registered into the system, but we have a pseudonym for them. Many, many people who are doing predictive testing prefer to do it that way. That's something that's been keeping us really busy as well.
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Vicki Wheelock: I've also tracked ... We joined the Huntington Study Group in 1997, and back then there was the UHDRS project to bring people in for an observational visit using a UHDRS tool, and to follow them over time. Since that time, we've participated in 18 Huntington's disease research studies, most of them through the HSG, but not all, and I've tracked 1,900 Huntington's disease study patient visits since 2001. So we're very busy at our center.
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Vicki Wheelock: We're really proud, our mission really is centered on care, and multidisciplinary care, and the best possible care, but our additional, very significant mission is to participate in Huntington's disease research because we have this huge unmet need of treatments, and so we have always contributed to that, and invited everybody that we see to be part of research if they'd like to. I think that that's one of the most important things about Huntington's is that we have hope for the future; we have hope for how research will impact our patients, and their lives, and the next generation, for sure.
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Kevin Gregory: And that brings up a great point, because we've actually had some questions come in from people that have listened to the podcast. From your perspective, given that you've been a part of so many different studies and trials over the years, what are some of the more interesting research results that you've seen over that time in HD? And even now, with some of the new, novel treatments coming out, what are some of the interesting changes that you're starting to see in terms of research results?

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Vicki Wheelock: Good question, actually. I think two pivotal things are we do have two drugs that are FDA-approved for Huntington's disease in the United States. That's tetrabenazine and deutetabenazine. Those, of course, were studies that were done with the Huntington Study Group. So we've had that impact of having FDA-approved treatments for the chorea for Huntington's disease, but what's really been lacking overall has been the disease-modifying treatment that we hope would delay or prevent onset of Huntington's disease, or to slow the progress of Huntington's disease until the time that we, of course, would have the cure that we're all looking for.

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Vicki Wheelock: I think an overall perspective would be that, through tremendous amount of work with the Huntington Study Group, with a lot of wonderful colleagues, I would say in North America, but around the world that we've worked with, and with many, many, many patients and families, we have this great set of observational data about the clinical manifestations of Huntington's disease, and the progression, and the types of challenges that people are faced. That's been done extraordinarily well, and that's sort of the foundation, I would say, for all the work that's coming forward now. That allowed the investigators, whether they're from the pharmaceutical industry, or whether they're from government-sponsored research, to understand the best outcome measures that would show whether or not the treatment is making a difference. That's extremely important.

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Vicki Wheelock: I look back, and I see that that the Unified Huntington's Disease Rating Scale, which was developed way back in the early 1990s, has proven to be a very robust measure of how patients are doing with Huntington's disease, and also a very robust measure of outcome. But other things that I think are very interesting are the fact that we have biomarkers now, we have the ability to measure mutant Huntingtin protein and the cerebrospinal fluid. We have, I think, really interesting work going on about using volumetric imaging as an outcome measure. So those are three that I'm very excited about.

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Vicki Wheelock: Ralf Reilmann in Germany has a wonderful program for doing quantitative measures of motor performance, which are superb. Julie Stout has a wonderful assay that she put together for patients to measure their cognitive abilities over time. It's multidimensional, so different types of cognitive abilities are being looked at. These are all things that have put into place the ability for us to have the current and the upcoming trials that will help us to tell if some of the potentially disease-modifying treatments are going to be effective or not.

Kevin Gregory: I think that's a great point, and I'm glad you brought that up because without having that underlying data, you wouldn't be seeing all these new types of treatments. It's not a matter of people necessarily getting into studies where they're testing a drug. What you're saying is it's equally as important to have these longitudinal or these long-term observational studies, correct?
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Vicki Wheelock: Absolutely. They're the foundation over the work that we're doing now. But honestly, the excitement is, in the current treatment trials, the two antisense oligonucleotide trials that are ongoing right now with sponsors Wave and Roche are, I think, really, terribly exciting for all of us as investigators, and the Huntington's patients, and the community are very excited about them. This is the best shot that we've had so far.
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Vicki Wheelock: The thing that's so exciting about this is it's targeting the cause of Huntington's disease. It's going right to the messenger RNA for the protein. To look at that as a potential treatment is very, very exciting. I have a lot of hope right now. I have a lot of optimism about where we are. There are other things on the horizon that will be coming forward in the next year or two that I think are also super exciting. So this is clearly the best time in my career as far as what we're looking forward to in Huntington's research.
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Kevin Gregory: That's incredible. One of the other things in terms of expanding that knowledge base and that understanding, and I know that you recently undertook, was a delegation from UC Davis. You went to China, to Beijing to collaborate with a group there. Can you tell us a little bit about that experience and the tie-in with HD?

Vicki Wheelock: Certainly. Actually, Kevin, this is something that comes directly from the Huntington Study Group, and let me tell you how that happened. As you know, the HSG is very involved in continuing medical education for physicians and clinicians involved in caring for patients with Huntington's disease through the CME4HD program that's led up Mary Edmondson and Martha Nance.
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Vicki Wheelock: Another major mission of our center, and also of the HSG and HDSA, of course, is to provide education and best practices, and to help clinicians take care of patients with Huntington's because not every patient is able to live nearby or have access to a Center of Excellence. As many as we have now, there's still a gap in that care. But we also recognize that Huntington's disease is found in every country in the entire world.
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Vicki Wheelock: A couple years ago, the CME4HD was videotaped, and launched on the web so that people could go ahead, and log in, and take the course, and become more familiar with and learn a lot about the clinical manifestations of Huntington's disease across the lifespan. I was really interested to see from the [inaudible 00:17:39] report a few months later about who was taking the course, and who was looking at this, and where this was reaching. It was astounding. It was everywhere in the world. It was in South America, and throughout North America, and Europe, and Russia, an
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[00:18:00] Australia. But I noticed something right away on the map. There was nobody in China, nobody in South Korea, nobody in Japan had logged in or looked at the course. I wondered about that, and it got me thinking about the fact that we don't really have a lot of communication with physicians and patients in China, or in Japan, or in South Korea. I became pretty curious about that, and I wanted to try to understand that.

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Vicki Wheelock: Shortly after that came out, my colleague, Dr. Lin Zhang, who's a movement disorders neurologist in my department for many years now, and by the way, he did his fellowship at University of Rochester before he came here to Sacramento. He has very deep connections in Beijing and through a number of medical institutions and universities in China through doing education through the Movement Disorder Society and other professional activities over the years. We hosted a number of neurologists to come as fellows to UC Davis to work in Parkinson's disease and movement disorders over the years.

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Vicki Wheelock: He actually asked me many times to come on a trip with him to China, and I was always busy with one thing or another. It just wasn't really a good time. But when he asked me in 2018, I had just seen this data about the fact that we didn't have people adopting this education program in China, and I thought, "You know? This would be a great opportunity to go meet clinicians there, and find out where are patients going who have Huntington's disease, and what are the care models there, and how do they approach this, and would there be any potential for collaboration for research, for outreach, for care."

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Vicki Wheelock: Our partners in Beijing were interested in having a talk about stem cell research, and that's why they were reaching out to me to come. And I'm happy to talk about stem cell research and our projects in stem cell research for Huntington's disease, but I also reached out and tried to find people that could partner with us around Huntington's disease. It was a little bit difficult, but we succeeded in finding the head of the neurogenetics program at Peking University, who is Dr. Wang. Then we also found Dr. [inaudible 00:20:27], who is at Capital University, and that was through a connection from Martha Nance and a member of the HD [inaudible 00:20:35] that I found Dr. Wang.

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Vicki Wheelock: We met in 2018 for the first time. Got to know each other. Shared updates about research. Then we had the opportunity to return this year, in 2019, and as part of that visit, Dr. Wang decided to host a symposium for Huntington's disease patients at her institution. She invited our group to give presentations to the family members. She also invited [Liu Gao 00:21:04], who is the founder of the Chinese Huntington's disease association, to give a talk about her advocacy organization, and about the status of Huntington's disease prevalence, and the healthcare models, and some of the unmet needs that she's seen. Her organization has already started to develop wonderful materials, education materials, and outreach.

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Vicki Wheelock: So when we had the symposium, it was a wonderful opportunity to meet with

[00:22:00] patients and families who came from throughout China. Not just from Beijing, but from, in some cases, very far away to attend the symposium, to meet with Dr. Wang and her colleagues who are experts in Huntington's disease, and also to share research and ask questions, and for us to give information about the work that we're doing. It was an extraordinary experience. I look back on that day of meeting with the patients and families, and they were extraordinarily warm and very welcoming. They had wonderful questions. I felt this real connection with these patients and families that, the thing that I still hear in the United States, that this is a tremendous community, and they need partners in healthcare, and they are very open and very welcoming so that we can learn from them, and also do things with them together to try to help care and education, and hopefully provide more opportunities in China for HD research.

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Kevin Gregory: That's amazing. Is there any one thing that sticks out in your mind that you were surprised to learn upon the visit, or surprised to discover, or something that wasn't expected?

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Vicki Wheelock: I think I ... Let me think about this for a second, Kevin. Let's see. If there's anything that wasn't expected ... I think that ... I'm pausing here, considering what my answer's going to be to this question. I would say if there's anything that surprised me, it was the similarity and alliance of the patients and families in China. I had not met them in 2018. This was the first time that I was meeting with them, and the idea that they have developed a network, that they're banding together, that they're holding education programs, that they're doing all the same things that we're doing, but that we hadn't yet met one another or formed a connection. I think that the surprising thing was that there's just, I think, a very natural affinity across even international boundaries for coming together and finding ways to enhance care and education about Huntington's.

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Vicki Wheelock: The infrastructure is there, and now it's the personal networking, it's the meeting one another and getting to know each other, just like it is here in the United States. That's how we can help each, and we can elevate the care, and elevate the level of education, and importantly, provide hope to the patients and families for a better future, for better and better care, and for better treatments through research.

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Speaker 1: We'll return to the interview on the HD Insights Podcast in a moment. We hope that you're enjoying this episode. As a nonprofit organization, the Huntington Study Group relies on the generous support from the community and listeners like you to continue bringing you in-depth content on HD, like this podcast series. If you like what you're hearing and are interested in supporting HD Insights through a grant or donation, please contact through our email address, info@hsglimited.org, or by calling toll free at 1-800-487-7671. We greatly appreciate your support. And now, back to our episode.

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Kevin Gregory: Dr. Wheelock, I want to switch gears a little bit, but kind of piggyback something

[00:26:00] that you alluded to. You started talking about what initiated that exchange with the team in China was really what came out of the CME4HD work that you've been a part of. I know that, currently, with the courses that the HSG hosts online, your topic presentation is on the impact on youth of HD. So I wanted to talk a little bit about there, because you've been very involved with youth and with the juvenile progression of the disease. Let's start there.

Kevin Gregory: [00:26:30] HD can really impact youth in two ways, either through direct development of the symptoms by a child, or by a child being thrust into the role of caregiver or dealing with a parent who develops symptoms of HD. I wanted to start with maybe you talking a little bit about the latter, the burden on children who have a parent stricken with Huntington's disease. What do you see in them? What is the thing or the things that you try to do to help guide children who are dealing with that role as a caregiver at such a young age?

Vicki Wheelock: [00:27:00] Kevin, great question. I will tell you right now, I'm not an expert in this area. I have experience as a physician seeing many, many patients over the years, and seeing patients who bring their children or their grandchildren, and by children, that might even include either small children, or teens, or young adults, to appointments with them, and then fielding questions, of course, over the years from families who are concerned about a child at risk, or concerned about a child, about their coping.

Vicki Wheelock: [00:28:00] But I do want to say that the experts in this area would be HDYO; would be the people who are actually talking to and directly interacting with young people, because I think that there's not always the opportunity to have these conversations in a clinic visit when we're caring for somebody who has Huntington's disease. But I think the most important thing, in my perspective as a physician, is that being open and being comfortable as the adult. The grandparents, and the parents, and the aunts and uncles, and everybody in the family can be open with young people about talking about Huntington's disease, and make it safe for children to ask questions of their parents, of their family members.

Vicki Wheelock: [00:28:30] That openness, that ability to be able to talk about Huntington's openly, I think, is the single most important thing because there's a lot of fear, there's a lot of lack of knowledge, and those two things can make things so much worse. I think it can really be very harmful. So if we are able to help encourage the adults to share information, to not be afraid to talk to young people and answer their questions, to give them enough information so that they can have their curiosity satisfied, that's going to be super important.

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Vicki Wheelock: [00:29:30] The other thing, of course, is recognizing that the stress in the family for somebody who has Huntington's disease affects every single person in that family, so we're always checking in about how various individuals are doing, and talking about getting resources, and having help for children, having school counselors, or having counselors through their healthcare available to them to give them the support that they need, the importance of the community. I really think it's important for

[00:30:00] young people to know about HDYO, to know about NYA through HDSA to have an outlet with their peers, super important, where they can reach out and talk to other people who are going through the same thing, because there's no one else who's better able to help them.

Vicki Wheelock: I think that that type of health ... We didn't use to have that. We used to get asked about that a lot in the early days. Now it's grown up, it's blossomed, and it's very real and very accessible. So I think that that would be the most important message I would give. So the openness and linking to those existing resources, super, super important.

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Kevin Gregory: What about the disease itself? When HD is diagnosed in a child, it's called juvenile Huntington's disease, or JHD, but I've heard you, in conversations or when we've talked, that it's more appropriate to call it juvenile onset HD. What makes that distinction so important?

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Vicki Wheelock: Well, several things. First of all, juvenile is kind of a vague term. Our classical definition would be onset before age 21. I think some people who are 19 or 20 wouldn't necessarily consider themselves to be juveniles, so I think there's a little bit of a language piece there. But I think it's mostly because juvenile onset Huntington's is awfully rare. It's very uncommon, so less than 10% of Huntington's disease happens before age 20, and then less than 1% or 2% before age 10 in the truly early childhood years. So we're talking about something that's really very rare.

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Vicki Wheelock: But it turns out that in the age group, especially between 10 and 20, or between 10 and 25, we sometimes are seeing HD onset in that group, and it's not something you just wake up with one day, as you know. It's a slow process to reach a diagnostic threshold with Huntington's. So having the idea that there's a juvenile onset, that the process started, that maybe some of the symptoms or some of the challenges started before age 21, maybe they weren't diagnosed before age 21. They were present, and they are very apparent in young people in their 20s and in their 30s, I think is an important part of this. That's why I think it's more correct to use the juvenile onset. The span of ages that can be affected, and the fact that it's the onset of a disease, but then it extends into adulthood for people who have onset above age 10 years.

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Kevin Gregory: You talked about HDYO, and the work that they do, and the need to bring in other resources into play. This year, UC Davis is serving as the host site for the HSG annual meeting, HSG 2019 in November, and I know you've been instrumental in helping pull together a planning committee for the Family Day event on the Saturday of that session on November 9th. Tell us a little bit about the group that you pulled together. I think it's an absolute powerhouse, but it's very well representative of the advocacy community that you have out in Sacramento and in the Northern California Bay area, as well as an agenda that's very inclusive for youth, for families, for adults, for caregivers. Just talk a little bit about the team that you've brought in. And some of the names that you talked about at the very

beginning of this podcast are involved as well, correct?

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Vicki Wheelock: Yeah, yeah. So Martha Nance is actually the lead from the HSG for organizing this day. We started phone calls, as you know, way back in the beginning of the year for this. I want to thank her hugely for all of her efforts in doing this. We have a powerhouse of Huntington's disease advocates, and patients, and families in Northern California. I mentioned Judy Roberson, who is the president of the Joseph P. Roberson Foundation. We also have a wonderful chapter, HDSA Northern

[00:34:30] California Chapter, and chapter membership is involved. We are so fortunate to have Katie Jackson and Help 4 HD also based here in the Sacramento area, although, of course, they have a global reach. Then I asked Terry Tempkin, who was my dear colleague and partner in this work for 18 years before she retired in 2016, to join us as well in planning this committee. Terry's working post-retirement with Help 4 HD, and she's involved in a lot of the programming that they're doing around the country and internationally.

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Vicki Wheelock: So that would describe the people who are involved in the planning, but we've been able, through your help, and also through Kristen's help, to engage HDYO, to engage, through Katie, and Terry, and Judy, a number of family members and advocates from California, but also from throughout the country who are going to come together to help with our vision of presenting a family program that will be targeting HD across the lifecycle. We have a lot of programming for youth, and young people, and people with juvenile onset Huntington's disease, but also for people with more typical onset in adult life. We are going to cover late onset Huntington's disease because we have families where there's a very late onset. In some of those families, it's a first recognition of Huntington's in the family. So there's quite a need, I would say.

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Vicki Wheelock: But this has been a joy to work with these experts and wonderful advocates. They have great ideas. I am very excited about the programming for Family Day, and I'm very happy that we can offer this to the regional families, and maybe some from out of town who will be coming for the evening because I can promise them that they will be hearing from tremendous experts and people with great experience and insight into Huntington's disease. So it's going to be a great day.

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Kevin Gregory: And you mentioned the concept this session and the location being regional. I know that you coordinate, correct, with a number of HD centers that are pretty close in proximity, so you have a really large patient population that you interact with?

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Vicki Wheelock: We do. Actually, we have an affiliation with Kaiser Northern California. We have an affiliation with their Huntington's disease clinic, which is also a Center of Excellence, and then our sister universities, UC San Francisco and Stanford, are both a couple of hours away. So in Northern California, we have four Centers of Excellence. We have the HDSA chapter, we have Help 4 HD, we have just a richness of resources, these family foundations who've been helping to support HD care and

research over the years.

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Vicki Wheelock: I'm really so proud that HSG will be coming to our region, and that our region will be able to get up close and friendly with the members of the Huntington Study Group, and to see the latest and greatest research and what's coming in the future, but also for the HSG to be able to see the tremendous community that we have here in Northern California. So, to me, it's win-win.

Kevin Gregory: Yeah, absolutely, and I can tell you we're very excited to be there. Personally, I love visiting Sacramento. I think people will enjoy it. It's usually a perfect time of year at the beginning of November. We're very excited to be there.

Kevin Gregory: Dr. Wheelock, I just want to wrap it up with a couple quick questions for you on a personal level. I like to ask this of everybody that we talk to. The first question is: In your career, who's the one person that, or there could be multiple people, I suppose, but who do you most consider your mentor?

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Vicki Wheelock: Okay, first name that comes up is Martha Nance. The first Huntington's meeting that I attended was the HDSA National Convention in 1997. That was in Rochester, New York, and hosted, really, I think, hosted by the HSG and the chapter there. I went to all the talks, and I identified these are the people who know everything. So that was Martha Nance, and Mark Guttman, and Ira Shoulson was there. That was the first time that I met him. But I really reached out to Martha. As a mentor, she's been tremendously helpful to me and taught me a great deal, because I have lots to learn about Huntington's. I also think of Sue Perlman, who is at UCLA, as another really important mentor in Huntington's disease and neurogenetics. Tom Bird is another person that I always looked up to tremendously.

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Vicki Wheelock: But I think the person that's been the greatest inspiration to all of us has been Ira Shoulson, starting the Huntington Study Group, and the work that he did, and the organization that he built. No other person could've done what he did. I think there are many, many Ira Shoulson acolytes out there who were very lucky to work with him, and attend the annual meetings, and be part of studies that he headed. So that would be my list.

Kevin Gregory: Yeah, I absolutely agree. I've had the pleasure ... I mean, he's still very active, and I'm enjoying some projects that we're working closely with him on.

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Kevin Gregory: Dr. Wheelock, the last question I'll ask you today is: What is the thing in your life that you consider your proudest accomplishment? And believe me, it sounds like you've had a lot of them. I know you're very enthusiastic and energetic about all of them, but if there's one thing you could point to above all else, what would that be?

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Vicki Wheelock: One thing in my life would be family, without a doubt. That's the most important thing to me. That's the thing I'm proudest of and the thing that's nearest and dearest to my heart. I very much want to say that I've been blessed by my family, by my all generations of my family, from my parents on down. I do think that everyone in my family knows a little bit about Huntington's, and that my immediate my family, my husband and my son, have been very understanding of their mom working hard on Huntington's disease all these years. They supported me a great deal. So that's the thing that I'm the proudest of.

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Vicki Wheelock: If there's something professionally that I'm proudest of, that is I'm proudest that Terry Tempkin and I were able to launch our program in the way that we did, and that we were able to attract a phenomenal team of people to work together. The people that I work with in my center are people that I would trust with my life, and that give great meaning to my professional career by virtue of their excellence and their really strong connection and caring for Huntington's patients and families. They're tremendous experts.

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Vicki Wheelock: But also I have wonderful new, young colleagues, two younger colleagues, and I see that our center has a future beyond my time in the department as well. I can see that the program that we've started is one that will be sustaining, and will be doing Huntington's care and Huntington's research for many years to come. But when we have a cure, we're going to be very busy too. So we're going to need to have a very strong clinical presence so that we can identify, and test, and care for, and treat patients from families with Huntington's disease. So I'm really proud of the fact that there's such a phenomenal team assembled.

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Kevin Gregory: Well, again, we thank you so much for joining us on the HD Insights Podcast, Dr. Wheelock. It's been our pleasure to chat with you. We look forward to seeing you at HSG 2019 in Sacramento, November 7th through the 9th.

Vicki Wheelock: Thank you very much, Kevin. Appreciate it.

Kevin Gregory: That concludes our conversation with Dr. Vicki Wheelock from UC Davis. During the conversation, Dr. Wheelock discussed a few items that I wanted to share some further information on for our audience regarding CME4HD training and our annual meeting.

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Kevin Gregory: CME4HD is a free training offering from the Huntington Study Group, and while it's intended primarily towards an audience of healthcare providers, anyone can take the training. The online, self-paced content follows the course and progression of HD, and offers critical insights from our highly experienced HSG faculty members. Healthcare professionals can also earn up to 3.25 continuing education credits. For more information, and to sign up for a free account, go to huntingtonstudygroup.org/cme4hd-online. That's huntingtonstudygroup, all one word, .org, slash, C-M-E, the number four, HD, hyphen, online.

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Kevin Gregory: We also talked at length about the HSG annual meeting. HSG 2019: Navigating HD is being held this year in Sacramento California at the downtown Hyatt Regency. Each year, the Huntington Study Group holds our annual meeting in a different city, and brings together the leading HD experts, researchers, investigators, coordinators, prominent members of the HD community, HD advocacy, and industry together. The goal of the annual meeting is to provide a forum to share knowledge, ideas, and the latest in HD research.

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Kevin Gregory: The main general sessions will be held on Thursday, November 7th and Friday, November 8th. For more information on the main sessions, agenda, and registration, please visit huntingtonstudygroup.org/hsg2019-reg. In addition to the main sessions, we also hold a family education day event on Saturday, November 9th. This event is geared specifically for HD patients, family members, and caregivers to learn more about the things that are most important to them, while also hearing more about the latest developments in HD treatments. HSG 2019 Family Day is free to attend, but we ask that you sign up online so that we can ensure adequate seating and food. For more details on the agenda and a link to sign up, go to huntingtonstudygroup.org/hsg2019-familyday. Family day is all one word on this.

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Kevin Gregory: Thank you again for downloading and listening to the HD Insights Podcast. Look for episode four with Dr. Victor Sung from the University of Alabama at Birmingham coming soon.

[00:46:00]

Speaker 1: We hope you enjoyed this edition of the HD Insights Podcast. Remember to subscribe to this podcast to make sure you automatically get the latest episodes to your device. Please rate and review this podcast with your feedback so we can continue providing the best possible content. If you are interested in providing financial support for the work needed to produce this content, you can do so by becoming an ongoing sponsor or through a tax deductible donation. To do so, please email us at info@hsglimited.org, that's I-N-F-O at H-S-G limited .org, or by calling our toll free number at 1-800-487-7671.

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Speaker 1: Thank you for joining us on the HD Insights Podcast from the Huntington Study Group.