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ALZHEIMER'S CHAPTER HAS MUCH AT STAKE IN SPLIT

Consolidation sought by U.S. board; S.D. group has to decide by Jan. 15

BY PAUL SISSON

Give up local control or go it alone.

Those are the options available to Alzheimer's Association chapters across the nation as they face a consolidation move made by their national board of directors — a push that has created deep divisions within the country's leading network of groups devoted to helping people deal with a fast-growing disease that still has no cure or effective treatment.

The San Diego affiliate has much at stake, including questions about the future of a special caregiver-support program it runs, a \$1 million donation it received recently for training and outreach, and its leading role in a groundbreaking initiative that has united scientists, patient advocates, philanthropists and lawmakers in raising regional awareness of Alzheimer's.

The 54 independently run chapters have until Jan. 15 to decide whether they will sign a merger agreement, which would transfer their operational authority and financial oversight to the headquarters staff, or continue operating independently but without the nationwide organization's established name recognition.

The consolidation strategy is the latest in a series of reorganization efforts among large charity groups that seek to concentrate decision-making powers in a bid

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WAVE FOR THE CAMERA



MISAEEL VIRGEN U-T

The Dorf family, (from left) Maxwell, 3, Jace, 1, Christina and Barron of San Diego, poses for a photo with Surfin' Santa at Seaport Village Saturday. Sites around the county kicked off the holiday season Saturday with uniquely local events. Story, A3.

NIXON TAPES AND THE MAN WHO SPILLED

Woodward book rewinds to Butterfield's revelation that upended presidency

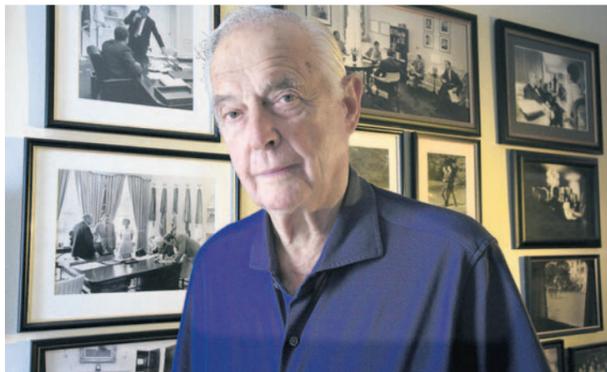
BY JOHN WILKENS

Alexander Butterfield knows what the first line of his obituary will say. He was the guy who lit the fuse.

On July 16, 1973, with much of the nation watching on television, Butterfield testified before a Senate committee investigating Watergate and revealed the existence of a secret voice-taping system in the Nixon White House. The tapes provided evidence of the president's role in the cover-up and led to his resignation.

Now 89, Butterfield lives in La Jolla, where more people seem to know him as the longtime companion of Audrey Geisel, Dr. Seuss' widow, than as an important figure in one of the nation's most famous political scandals.

That may change with the



NELVIN C. CEPEDA U-T

Alexander Butterfield served as a deputy aide in the Nixon White House. He has lived in La Jolla since 1992.

publication of a new book, "The Last of the President's Men," written by Bob Woodward, the legendary Washington Post journalist and best-selling author. The two will be at UC San Diego Friday for a sold-out event.

The book uses Butterfield's

four years in the White House (deputy assistant to the president) as another window into the motivations and machinations of Richard M. Nixon — his keen mind and strategic discipline, but also his festering hatreds and so-

SEE BUTTERFIELD • A8

DRUG ENFORCEMENT OF PHARMACIES STEPPED UP

Feds working to keep addictive prescription drugs off the street

BY KRISTINA DAVIS

On July 13, 2012, a pharmacy technician ordered 1,000 hydrocodone pills through the San Diego pharmacy he worked for.

But it was not a sanctioned order. The highly addictive drugs were either meant for his own consumption, or to restock the pharmacy's supply of pills he had already stolen, concluded the state Board of Pharmacy, which ultimately revoked his license after he was convicted of prescription forgery and burglary.

The incident helped spark a massive investigation into Medical Center Pharmacy, a collection of a dozen family-owned pharmacies that operate throughout San Die-

go County. What the U.S. Drug Enforcement Administration found was a system that lacked controls on the distribution of controlled substances, shoddy record-keeping and lax procedures on dispensing pseudoephedrine, which can be used to make methamphetamine, the U.S. Attorney's Office announced this month.

The investigation also found a total of 21,000 oxycodone and hydrocodone pills that were unaccounted for from four San Diego pharmacies over a two-year span. In some instances, the drugs are believed to have been delivered to a home used by pill seekers, authorities said.

The effort to combat the illegal flow of pharmaceuticals from legitimate businesses is intensifying as prescription drug abuse remains a top public health concern.

The DEA, which enforces pharmacy compliance with federal drug

SEE PHARMACIES • A17

DAN McSWAIN

Coming to terms with Chargers' L.A. bid



Wednesday might deliver a wake-up call to San Diego's long Chargers nightmare.

The NFL's 32 owners will meet in Dallas to discuss, among other topics, which team or teams can move into the lucrative Los Angeles market. It's the league's last regularly scheduled such meeting until March.

Contradictory reports and rumors are flying. Owners are said to be struggling over whether to vote on relocation at a special meeting in January or to wait until March, which may effectively punt the whole decision for another year.

Really? San Diego either loses its

team, or endures yet another cycle of drama?

Yep. From the local fan's perspective, the major players have essentially wasted 2015.

This is no vindication of Mark Fabiani, the Chargers counsel who predicted precisely this outcome back in January. After all, Fabiani and his boss, team CEO Dean Spanos, engineered the fans' Lost Year with relentless focus on their Carson stadium partnership with the Oakland Raiders.

But their collaborator was San Diego Mayor Kevin Faulconer, who until June shunned the bargaining table in favor of deploying a task force. Then, in August, he largely ignored its findings to float a "framework" financing concept for a Mission

Valley stadium.

Since then, we've been told, the mayor has been tirelessly negotiating directly with NFL relocation honcho Eric Grubman, having been rejected by the Chargers.

Now we know better. The intervening months have been mostly theater, the negotiating equivalent of a half-time show; the kind with a marching band, not Beyoncé.

Last week, the city released — after trying to keep it secret — a 24-page "term sheet" Faulconer gave NFL officials, apparently in late September. League executives required just two pages to point out that his opus of legalese didn't offer many terms at all, especially those required to actually build a stadium.

SEE McSWAIN • A8

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FROM PAGE ONE



HAYNE PALMOUR IV U-T

Becca Beville, a respite program volunteer with the San Diego chapter of the Alzheimer's Association, helps Dale Laney, 83, who has dementia, fix his photo album with tape while in his home in San Diego.

ALZHEIMER'S • Focus on national group tax filings

FROM A1
for greater national influence. The American Cancer Society recently completed a similar roll-up, for example, while the American Heart Association centralized more than a decade ago.

Supporters of consolidation said it can reduce overhead costs, increase quality control and enable organizations to take broader and higher-profile actions — all without sacrificing the capacity to meet distinctive needs in one city versus another.

Opponents said they fear losing the flexibility that allows them to tailor programs to the specific needs of individual communities and pursue their own innovative ideas.

In an Oct. 3 vote taken during the association's national assembly, exactly half of the independent chapters voted against consolidation while the other half backed it.

John Nienstedt, secretary of the local Alzheimer's Association chapter board, said members are wrestling with concerns about their ability to sustain locally focused programs and about what they believe are disturbing financial trends in the headquarters office's tax statements.

"Given what we've seen from national, we're not confident they could do justice to, or replicate, what we're doing in San Diego," Nienstedt said.

By most measures, San Diego has been doing quite a bit on the anti-Alzheimer's front during recent years.

In 2014, the chapter here was key to helping form a coalition with local research institutions, government agencies and health providers that launched the Alzheimer's Project, which has begun funding local research, beefing up support networks for the region's estimated 150,000 caregivers and raising public consciousness of the disease.

In September, the local affiliate was one of 11 nationwide to win a \$1 million grant aimed at boosting Alzheimer's training and outreach. The group hosts hundreds of classes for caregivers each year, serves more than 30,000 people annually and has created a groundbreaking respite-care program in which specially trained volunteers spend time with patients — say, a few hours per week — so caregivers can get a breather from their physically and emotionally demanding work.

Pamela Isaacs and her husband, Dale Laney, regularly welcome respite program volunteer Becca Beville into their San Diego home. Laney, 83, has been diagnosed with dementia and has mild cognitive impairment. He may have trouble remembering recent events and balancing his check-

book, but he had no trouble grasping the idea of consolidation.

"It's a big risk. We don't need to be fixed," Laney said during his time with Beville on Wednesday.

Stewart Putnam, chair of the national board, said efforts are under way to create a core set of national guidelines for all chapters to follow. Those benchmarks, he said, will be based on the best evidence available and will help make sure that no matter which chapter patients or caregivers visit, they will receive a consistent level of services.

Although the specifics have not been worked out, Putnam believes there will be room for local chapters to innovate — as long as they are already providing all of the core services mandated by the national headquarters. Currently, local boards are free to undertake whatever new endeavors they wish as long as they can find the volunteers and donations to make it happen.

"If they made a compelling argument, it's hard for me to imagine it wouldn't be accepted," Putnam said.

He also said the consolidation would not mean layoffs for local affiliates.

Paging through the merger agreement put together by the national organization, Mary Ball, chief executive of the chapter covering San Diego and Imperial counties, said there is not much black-and-white language that specifies how affiliates would be able to preserve their programs or start new ones.

"Local boards will have input into things, but there is no authority. We want to continue to serve the community and build programs," Ball said.

"The need in San Diego is so great, and our board is concerned about all of the decisions being made in Chicago."

Financial debate

In recent months, affiliates have been scrutinizing their national parent organization's tax filings. Some have noted that the headquarters group's spending on research grants has dropped from \$28 million in 2007 to \$13 million in 2013. They also have complained about the compensation for chief executive Harry Johns, which totaled \$2.8 million in 2012. And they have criticized the growth of the national staff's payroll — from \$18 million in 2005 to more than \$45 million in 2013.

Local chapters send 40 percent of all undesignated donations to the national coffers. Donors can request that 100 percent of their contributions go to local causes, or they can specify that all of their money be dedicated to a particular program or service.

By the numbers

In 2015, the Alzheimer's Association chapter serving San Diego and Imperial counties said it has:

- Served more than 30,000 people
- Answered more than 10,500 helpline calls
- Led 36 family and friend support groups attended by 4,800 people
- Conducted 250 classes, workshops and conferences
- Provided more than 2,500 respite hours for caregivers
- Conducted 500 family care consultations

"I am outraged when I see the amount of money that leaves San Diego and goes to the national organization. I see that their payroll has increased substantially and the money into research has decreased substantially," said San Diego County Supervisor Dianne Jacob, who has called for greater awareness, coordination and resources for battling Alzheimer's disease.

"As far as I'm concerned, the national Alzheimer's Association could take a page out of the playbook of our local chapter. If the local board makes the decision to break away, they have my wholehearted support," she added.

Putnam said several factors have influenced the national organization's numbers.

For one thing, he said, the headquarters team has had to take over operations for nearly 30 chapters since 2005. That means incorporating into its budget millions of dollars for salaries, travel expenses and other costs previously borne by those affiliates.

In addition, he said the Great Recession curtailed the public's willingness to donate money for Alzheimer's research, but that those contributions have started to rebound.

The national group has budgeted \$19 million for research grants in the current year.

As for the chief executive's salary, Putnam said that was based on the recommendations of outside experts on compensation for nonprofits' top leaders.

"We use benchmarks from compensation consultants, and we're currently well below the 90th percentile for executive compensation," Putnam said.

He said the parent organization's current leaders are making a difference. For instance, Alzheimer's research funding from the Na-

tional Institutes of Health, the nation's dominant grant giver for the life sciences, is expected to hit \$950 million next year if the current federal spending plan is approved. That's up from \$450 million a few years ago.

"These are all activities and outcomes that I believe are the result of our senior staff in Chicago, and I believe in the work that our senior team has done," Putnam said, adding that he believes local chapters' efforts are key to the success as well.

Centralization trend

In many ways, the consolidation movement among nonprofit organizations mirrors the merger trends seen in industry. For both worlds, centralization of far-flung, often highly variable operations can bring about financial savings.

John Graham, chief executive of the American Society of Association Executives, said he was running the National Diabetes Association when it consolidated in the mid-1990s.

"In the first year, we saved 20 percent in administrative costs that could go back toward programs," he said. "We were able to eliminate redundancy in terms of auditing and tax filing and other things that you have to duplicate for every single chapter."

There are also advantages in being able to undertake a new initiative and know that it will be implemented nationwide, he said. He stressed that this aspect is especially important for public-awareness campaigns, where a single message, repeated in the same way across every chapter, can achieve a larger effect.

And consolidation can attract larger corporate donors that lend their support only to prominent, nationwide initiatives.

"If you take a check from a company and you promise you're going to use it a certain way, when you're in a federated system, national can't guarantee that the money is going to be used the same way in every location," Graham said.

But he added that local chapters are correct in their concerns about maintaining the ability to develop tailored programs that serve distinctive needs in each community.

"A good question that should be asked is whether the strategy for local programming you're executing in San Diego is 90 percent aligned with the national strategy," Graham said.

The San Diego chapter's board has not said when it would cast its final vote on the consolidation agreement.

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PHARMACIES Federal agents say proper record-keeping helpful in fight

FROM A1
laws, has increased the amount of surprise inspections on businesses in recent years. And the state board that licenses pharmacists and similar workers is considering making it mandatory for pharmacies to inventory their drug supplies once every quarter to better stem the illicit flow.

Pharmacies are currently required to report when drugs go missing. Last year in California, 1 million dosages of pills were reported lost, said Virginia Herold, executive officer of the state board. The year before it was about 1.5 million.

"The problem is controlled substances are so valuable on the street compared to their value in the pharmacy," Herold said. Some pills go for \$30 each or more, she added.

Employees who divert pills are either addicted to the drugs themselves, or just selling them for the money, said DEA Supervisory Special Agent Thomas Lenox.

Besides pill diversion, other major problems that authorities look for is poor record-keeping and pharmacists who are more focused on filling a prescription than doing their due diligence to make sure the prescription is legitimate and not stolen, forged or counterfeit.

"The one thing is, it's all paper," Lenox said of the stringent record-keeping required of pharmacies. "You either have the documentation or not. If you don't have them, you're in violation."

Investigators say the problems are seen just as much at large, chain pharmacies as at smaller mom-and-pop pharmacies. The only difference is volume: Missing pills are also sometimes spotted faster at the larger chains due to more-stringent corporate policies in place, Herold said.

Earlier this year, CVS Pharmacies and the U.S. Attorney's Office entered into a \$22 million settlement after an investigation showed some pharmacies in Florida were knowingly filling illegitimate prescriptions for painkillers.

Authorities can go after offending pharmacies in various ways, from sending a letter of admonition to taking away the DEA registration that allows them to sell controlled substances to civil enforcement to criminal charges. The state board can also go after licenses of individual workers. Licensed workers do undergo background checks, Herold said.

In the Medical Center Pharmacy investigation, authorities went the civil enforcement route, resulting in a \$750,000 settlement last week.

The corporation, owned by Joseph and John Grasela, operates several storefronts under names such as Galloway Medical Center Pharmacy, Community Medical Center Pharmacy and Medical Center Pharmacy.

Besides the missing pills, authorities said the pharmacies also violated the Combat Methamphetamine Epidemic Act, which requires pharmacies to keep a logbook of sales of certain over-the-counter medications that can be used to make meth.

The records must include the buyer and the product purchased, and are intended to prevent individuals from buying large quantities of the same drug.

The pharmacies have had problems with the board before, Herold said. As part of the settlement, the owners have agreed to implement new inventory-control measures, authorities said.

This case is just the most recent example of similar pharmacy misconduct in the county.

Last year, a Hillcrest pharmacist lost her Sixth Avenue Pharmacy over allegations of failing to account for 16,000 missing oxycodone pills, dispensing drugs with invalid or non-existent prescriptions, exchanging drugs for services or advancing pills to customers, according to the U.S. Attorney's Office.

In 2008, federal agents raided three San Diego pharmacies on allegations that several employees were diverting painkillers.

The DEA works closely with the pharmacy board to educate pharmacists on drug trends, how to spot theft, and security measures such as surveillance cameras, keeping addictive drugs under lock and key and keeping stocks of such painkillers low.

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RULE ON WOMEN IN CLINICAL TRIALS FALLS SHORT

NIH can't tell if researchers are examining outcomes by sex to see if men and women are affected differently

KAISER HEALTH NEWS

WASHINGTON

First, the good news: Twenty-two years after Congress ordered the National Institutes of Health to include all women in the clinical trials it funds, women make up more than half the participants.

Now the bad news: According to a new report from the Government Accountability Office, NIH still isn't able to tell Congress — or anyone else — whether researchers are examining outcomes by sex to see if men and women are affected differently by what's being tested. Scientists are required to analyze results by gender in most cases, but NIH has no central process for collecting the information or making it available.

Yet such differences are the rea-

son to include a mix of men and women in clinical trials. A drug or other treatment that works for a man might be less effective for a woman, or even harmful. For example, in 2013, the Food and Drug Administration lowered the recommended dose for the popular sleeping pill Ambien after it became clear that the drug took longer to leave women's systems and could pose a danger the next morning.

The GAO says that NIH can't assure Congress that it's supporting research that can "shape improved medical practice for both women and men." NIH reports spending \$30 billion a year on medical research. Most of the money funds grants to more than 300,000 researchers at about 2,500 medical schools, universities and other research facilities. The agency also

supports projects by its own scientists, most of them at NIH's Bethesda, Md., campus.

This is not the first time the GAO has criticized NIH for its implementation of the 1993 mandate that women be included in research trials. In 2000, it said the agency needed to do a better job ensuring "that certain clinical trials be designed and carried out to permit valid analysis by sex."

NIH officials, reacting to the new report, said improvements are in the works, but they did not specify a timetable. The agency has 60 days to formally respond to the GAO.

Meanwhile, those who fought to require parity in clinical trials have been left sputtering.

"It's just very frustrating," said Patricia Schroeder, a Democrat

who represented Colorado in the U.S. House.

"It reminds me of when you ask your children to move the clothes from the washer to the dryer. Then you go back and the clothes are still wet, and they say, 'Well, you didn't tell me to turn the dryer on,'" she said.

Schroeder said she became interested in the subject in the early 1990s, when studies came out showing that a daily aspirin could prevent heart attacks — and when she learned that all the test subjects had been male. "They didn't even use female rats," she said.

Today, there is growing scientific evidence of just how biologically different men and women are, as well as how differently they sometimes react to drugs and other medical interventions.