

BEFORE THE STATE BOARD OF MEDICAL EXAMINERS

STATE OF COLORADO

Case No: ME 90-21

STIPULATION AND ORDER

IN THE MATTER OF THE DISCIPLINARY PROCEEDINGS REGARDING THE
LICENSE TO PRACTICE MEDICINE IN THE STATE OF COLORADO OF
GARY C. ADEN, M.D.

It is hereby stipulated by and between Inquiry Panel A ("Panel") of the Colorado State Board of Medical Examiners ("Board") and Gary C. Aden, M.D. ("Respondent"), as follows:

(1) Respondent was licensed to practice medicine in the State of Colorado on January 9, 1962, License No. 14167.

(2) The Panel has jurisdiction over the person of Respondent and the subject matter of this action.

(3) Respondent's license to practice medicine in the State of California expired on November 11, 1987 and has not been renewed.

(4) On November 25, 1987, Respondent voluntarily surrendered his original license to the Board of Medical Quality Assurance of the State of California.

(5) The California Board of Medical Quality Assurance filed an administrative action to revoke Respondent's license in June 1988.

(6) Respondent denied all accusations and stipulated to revocation of his California medical license in May 1989 as provided by his "statement to the Board and Stipulation to Revoke Medical License," a true copy of which is attached as Exhibit "A".

(7) Based upon a withdrawal of defense and the stipulation described above, the California State Medical Board revoked Respondent's license to practice medicine in the State of California in a default decision, a true copy of which is attached as Exhibit "B". Said revocation was effective on October 9, 1989.

(8) The Board has reviewed the information from the proceedings before the Board of Quality Assurance, Division of Medical Quality, Department of Consumer Affairs, State of California, and the findings and final order of that Board (Exhibit "B").

(9) The Board has authorized its legal counsel, the Office of the Attorney General, to institute administrative proceedings against Respondent pursuant to the Medical Practice Act, §§ 24-4-101 to 24-4-108, C.R.S. (1982).

(10) The Board possesses the statutory responsibility and obligation to protect the public health, safety and welfare as set forth in the Medical Practice Act, §§ 12-36-101 to 136, C.R.S. (1985).

(11) It is the intent and purpose of this Stipulation and Order to provide for settlement of all pending issues without the necessity of proceeding to a formal hearing where the Respondent would have to have the opportunity to present a defense or defenses to the alleged violations of the Medical Practice Act.

(12) Respondent understands that he has the right to a formal hearing pursuant to § 12-36-118, C.R.S. (1985). Respondent further understands and agrees that by entering into this stipulation and order he is waiving his right to a hearing, giving up his rights to present a defense by oral and documentary evidence, to submit rebuttal evidence, and to conduct cross-examination of witnesses, all on a voluntary and knowing basis.

(13) Respondent admits and agrees as follows:

(a) That in his practice of medicine from 1968 until 1986 he treated the patients described in Exhibit "B", the decision and order of the California Board of Medical Quality Assurance.

(b) His license to practice medicine in the State of California was revoked as described in the decision and order of the California Board of Medical Quality Assurance set forth in Exhibit "B".

(c) He did not admit the allegations made against him.

(14) By the facts set forth in paragraph 8 above, the Respondent admits and the Board hereby finds that the Respondent has violated the Medical Practice Act of Colorado, §§ 12-36-117 (1)(p) & (2), C.R.S. (1985).

(15) The Respondent understands that he has the right to consult with an attorney of his own choosing and that he has a right to a formal disciplinary hearing pursuant to § 12-36-118, C.R.S. (1985) with regard to the facts admitted in paragraph 8 above. Respondent further understands and agrees that by waiving his right to a hearing he is relieving the Board of its burden of proof. Respondent voluntarily and knowingly gives up his right to present his defense by oral testimony and documentary evidence, to conduct such cross-examination of witnesses as may be desired, and waives any and all substantive procedural motions and defense that could be raised if the hearing had been held.

(16) Respondent voluntarily offers and the Board hereby accepts the permanent relinquishment of his license to practice medicine in the State of Colorado. Respondent agrees not to seek reinstatement of his license to practice medicine in the State of Colorado or to seek a new license to practice medicine in the State of Colorado.

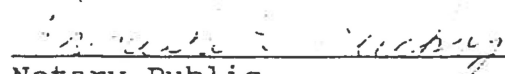
(17) This Stipulation and Order shall be a public record in the custody of the Board.

(18) This Stipulation and Order is entered into by Respondent voluntarily and without coercion and after his being fully advised as to his rights to a hearing and the consequences of this Stipulation and Order. The Order of the Board resulting from this Stipulation and Order shall possess the same force and effect as an order entered as a result of formal disciplinary hearing pursuant to § 12-36-118, C.R.S. (1985).

(19) This Order shall take effect on acceptance and signature by the Board.


GARY C. ADEN, M.D.

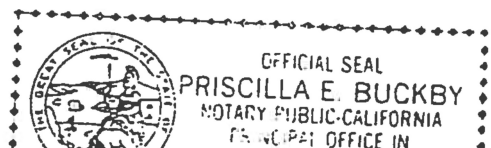
Subscribed and sworn to before me by Gary C. Aden, M.D.
in the County of SAN DIEGO, State of CALIFORNIA, this
21ST day of MAY, 1991.


Notary Public

PRISCILLA E. BUCKBY

My Commission expires:

DEC 5, 1991



COLORADO STATE BOARD OF
MEDICAL EXAMINERS

By Nancy Berlock

Effective date: this 7th day
of June 1991.

APPROVED AS TO FORM

FOR THE ATTORNEY GENERAL

James F. Carr
JAMES F. CARR, 9343
Assistant Attorney General
Regulatory Law Section

Attorneys for State Board
of Medical Examiners

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(303) 866-5129
AG Alpha No: RG ME DLFME
AG File No : CRL9005403.NH

Exhibit A

BEFORE THE
BOARD OF MEDICAL QUALITY ASSURANCE
DIVISION OF MEDICAL QUALITY
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation)	NO. 3816
Against:)	
GARY C. ADEN, M.D.)	STATEMENT TO THE BOARD
3563 4th Avenue)	AND STIPULATION TO
San Diego, CA 92103)	REVOKE MEDICAL LICENSE
Physician's and Surgeon's)	
Certificate No. C266441)	

I have decided that I do not wish to practice medicine again. This decision should not imply any admission to the accusations involved. In fact, a defense would have been provided were my physical, emotional, and financial resources not in a steady decline. I hereby forego any hearings before an administrative law judge scheduled between June 5, 1989 to July 14, 1989 realizing that the renewal of my license is contingent not only of payment of past due fees, but upon successfully defending, in whole or part, these matters in public.

The adverse local print and national tabloid media publicity, aided and abetted by state agency employees, concerning my case would irreparably damage any clinical effectiveness I might be able to bring to a given case even if my

1 physical and emotional condition were optimal. I might add that
2 former patients successfully treated by me over nearly thirty
3 years have no doubt suffered injury by the Board's apparent
4 policy to publicize these cases resulting in my vilification. It
5 is mystifying, especially because I discontinued practicing in
6 1987, surrendered my license to the Board in 1987, surrendered my
7 BNDD Certificate in 1987, dissolved my professional corporation
8 on June 30, 1988, and transferred all active patients to other
9 doctors in 1987.

10 For the sake of the record, complete records could have
11 been produced with certainty on only two of the seven
12 complainants. Of the remaining five, three have hospital
13 records but no outpatient records in the event they were seen as
14 outpatients. Two reasons exist for this deficiency:

15 (1) A long-standing policy of destroying records if a
16 patient were inactive for a period exceeding seven years; and

17 (2) A fire due to arson at an independent storage
18 facility in 1980.

19 It is believed that complete records could have been
20 produced on all seven complainants had each filed complaints on a
21 timely basis. Waiting ten to 15 years to do so is hardly timely.

22 Some other characteristics of the complainants need to
23 be described. Of the five patients hospitalized, four had
24 psychosis and one had organic brain syndrome. At least three and
25 possibly five had convulsive therapy. It should be noted that I
26 have no knowledge or responsibility for their subsequent
27 treatment.

28 The Board determined a need for me to have a

1 psychiatric evaluation. It so happened that the evaluation was
2 scheduled on the same day that an unanticipated closed settlement
3 of the litigation with J [REDACTED] R. was to become final. As her
4 behavior was unpredictable and her decision-making process
5 tempestuous, I felt my presence in town to be prepared to return
6 to court was imperative. Attempts to reschedule the examination
7 were met with an abrasive, "I'm just going to report you to the
8 attorney general." It should be noted that the petition for
9 evaluation was based upon the opinion of Gladys Whipple, M.D., a
10 former therapist of J [REDACTED] R., who never did turn over her
11 records in the context of the professional liability suit despite
12 repeated conventional requests. These records would have been
13 useful in the court proceedings. As the license expired at or
14 around the conclusion of the lawsuit ([REDACTED] v. Aden), I did
15 not pursue the matter further under the auspices of the State, in
16 any case.

17 To put these matters behind me and to expeditiously
18 sever my relationship with licensing medical authorities, I have
19 instructed my attorney to enter a nolo contendere stipulation
20 with BMQA, California, and to take similar action in any other
21 jurisdiction in which I am licensed to practice.

22 To anyone who feels they have suffered at my hands, I
23 can only say that I am very sorry. To those who maintain
24 confidence in me, I say thank you. To those who have lost
25 confidence in me, I know how disappointed you must feel. To

26 / / / /

27 / / / /

28 / / / /

1 those who feel harmed, I deeply regret it.

2 I deeply regret these circumstances. Rather than take
3 anymore of the State's time, I'll take no time.

4 Respectfully yours,

5
6 
7 GARY C. ADEN, M.D.

8
9 I hereby stipulate to the revocation of my medical
10 license but specifically refuse to admit all charges brought
11 against me and specifically deny each of them.

12
13 DATED:

5/23/89

14 
15 GARY C. ADEN, M.D.

Board of Medical Quality Assurance

I do hereby certify that this document is a true and correct copy of the original on file in the office.

L. J. Hantman 12/13/89
SIGNED DATE
Deputy Chief
TITLE OF MEDICAL EXAMINER

JOHN K. VAN DE KAMP, Attorney General
of the State of California

ALAN S. METH,
Deputy Attorney General
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Attorneys for Complainant

BEFORE THE

DEC 18 1989

BOARD OF MEDICAL QUALITY ASSURANCE STATE OF COLORADO

DIVISION OF MEDICAL QUALITY

DEPARTMENT OF CONSUMER AFFAIRS

STATE OF CALIFORNIA

In the Matter of the Accusation
Against:

No. D-3816

GARY C. ADEN, M.D.
3563 4th Avenue
San Diego, California 92103

DEFAULT DECISION

Physician's and Surgeon's
Certificate No. C26644

Respondent.

FINDINGS OF FACT

1. On or about June 24, 1988, Complainant Kenneth Wagstaff, in his official capacity as Executive Director of the Board of Medical Quality Assurance Division of Medical Quality, Department of Consumer Affairs, State of California (hereinafter "Board"), filed Accusation No. D-3816 against Gary C. Aden, M.D. (hereinafter "respondent"). On or about April 4, 1989, complainant filed a supplemental accusation against respondent.

Exhibit B

1 2. On or about August 3, 1988, respondent filed a
2 Notice of Defense. On or about February 6, 1989, respondent was
3 served with a Notice of Hearing setting the hearing on the
4 accusation and supplemental accusation for June 5, 1989 through
5 July 14, 1989. On or about May 23, 1989, respondent voluntarily
6 waived his right to a hearing on the allegations contained in the
7 accusation and supplemental accusation.

8 3. On October 10, 1964, the Board issued Physician's
9 and Surgeon's Certificate No. C26644 to respondent. The license
10 expired on November 30, 1987.

11 4. Business and Professions Code section.118 provides,
12 in pertinent part:

13 "(b) The suspension, expiration, or forfeiture by
14 operation of law of a license issued by a board in the
15 department, or its suspension, forfeiture, or cancellation
16 by order of a court of law, or its surrender without written
17 consent of the board, shall not, during any period in which
18 it may be renewed, restored, reissued, or reinstated,
19 deprive the board of its authority to institute or continue
20 a disciplinary proceeding against the licensee upon any
21 ground provided by law or to enter an order suspending or
22 revoking the license or otherwise taking disciplinary action
23 against the license on any such ground."

24 5. Government Code section 11520 provides, in
25 pertinent part:

26 "(a) If the respondent fails to file a notice of
27 defense or to appear at the hearing, the agency may take

1 action based upon the respondent's express admissions or
2 upon other evidence and affidavits may be used as evidence
3 without any notice to respondent ..."

4 6. The Division of Medical Quality has jurisdiction to
5 revoke respondent's physician's and surgeon's certificate
6 pursuant to the following provisions of the Business and
7 Professions Code:

8 a. Section 2227 provides that the Division may revoke,
9 suspend for a period not to exceed one year, or place on
10 probation, the license of any licensee who has been found guilty
11 under the Medical Practice Act.

12 b. Section 2234 provides that the Division shall take
13 action against any licensee who is charged with unprofessional
14 conduct, which includes gross negligence.

15 c. Section 726 provides that the commission by a
16 physician of any act of sexual abuse, misconduct, or relations
17 with a patient which is substantially related to the
18 qualifications, functions, or duties of a physician constitutes
19 unprofessional conduct and grounds for disciplinary action.

20 d. Section 821 provides:

21 "The licentiate's failure to comply with an order
22 issued under Section 820 shall constitute grounds for
23 the suspension or revocation of the licentiate's
24 certificate or license."

25 7. Respondent has subjected his license to discipline
26 under Business and Professions Code sections 2234, 726, and 821
27 in connection with his care and treatment of the following

1 patients as follows:

2 N [REDACTED] P.

3 A. In approximately January, 1972, N [REDACTED] P.
4 became a psychiatric patient of respondent. During her first few
5 therapy sessions with respondent, N [REDACTED] P. told respondent about
6 the marital and sexual problems she was having with her husband.

7 B. In approximately March, 1972, respondent gave
8 N [REDACTED] P. the book The Story of "O" and told her to read it.
9 Respondent gave her approximately 12 other books which referred
10 to sado-masochism, where the female characters were whipped and
11 controlled. Respondent discussed each of the books in detail
12 with N [REDACTED] P.

13 C. In approximately April, 1972, respondent
14 directed N [REDACTED] P. to come to the next therapy session without
15 wearing any underwear and to wear a dress. She complied with
16 these directions. During this session, while her eyes were
17 closed, respondent came over to where she was sitting and placed
18 his hand under her dress to check if she was wearing underwear.
19 Respondent then massaged her pubic area for about 10 minutes.
20 Respondent directed her not to wear a brassiere or underwear for
21 the next therapy session.

22 D. Therapy sessions which followed consisted of
23 N [REDACTED] P. sitting in a chair with her eyes closed. Respondent
24 directed her not to move her arms from the armrests. Respondent
25 then positioned her legs on a footstool or placed them apart, and
26 he would kneel down with his head near her knees. Respondent
27 massaged her breasts and vagina, talked to her about the books,

1 and talked about sexual orgasms. Respondent also described
2 characters in the books being whipped and having orgasms.
3 Respondent told N [REDACTED] P. this was the type of therapy that
4 Sigmund Freud practiced.

5 E. During the summer of 1972, respondent called
6 N [REDACTED] P. at her home on a number of occasions. Respondent would
7 talk about a book and make sexually explicit statements.
8 Respondent directed N [REDACTED] P. to answer the calls in her bedroom,
9 to masturbate at home, and then to masturbate while he was
10 talking to her on the telephone. N [REDACTED] P. refused to do this but
11 told respondent she did.

12 F. In late summer of 1972, respondent told N [REDACTED]
13 P. during a therapy session that he was coming to her house the
14 following week and that she should buy a certain brand of Scotch
15 liquor, dress up in a 1950's style dress, and buy a riding crop.
16 She complied with these directions.

17 G. On a Friday night shortly thereafter,
18 respondent came to N [REDACTED] P.'s home. Respondent gave N [REDACTED] P. an
19 injection in her buttocks. After drinking Scotch with N [REDACTED] P.,
20 respondent removed the 1950's style dress she was wearing.
21 Respondent directed N [REDACTED] P. into the bedroom, had her lie face
22 down on the bed, and tied her hands and feet to the four corners
23 of the bed. He then began to whip her with the riding crop until
24 she passed out. She awoke the next morning naked, untied, in
25 pain, with her back severely bruised, lacerated and bleeding, and
26 with a recollection of having experienced some form of vaginal
27 penetration.

1 H. The following Monday, M. P. called
2 respondent's office and cancelled her remaining appointments with
3 him. That evening, respondent called her and told her she was
4 not well enough to stop therapy. Thereafter, respondent began
5 calling her at night, but would not identify himself. The calls
6 were obscene in nature. The phone calls continued for
7 approximately six weeks but eventually stopped.

8 A. C.

9 A. In 1968, A. C. became a psychiatric patient
10 of respondent. She sought therapy because she was depressed.

11 B. On or about the summer of 1971, during therapy
12 sessions, respondent began telling A. C. that she had nice legs.
13 Later in 1971, respondent told A. C. several times that she did
14 not have "the guts to have an affair." Respondent once told A.
15 C.: "You'd be scared to death if I asked you to come over here
16 and sit on my lap."

17 C. A. C. saw respondent for therapy sessions
18 during 1971 and 1972. In the summer of 1972, A. C. moved away.
19 However, she did have a therapy session with respondent around
20 Christmas, 1972.

21 D. A. C. began to see respondent for therapy
22 sessions on a regular basis beginning in June, 1973. During one
23 session, respondent asked Ann C. to sit in his lap. She walked
24 over to him, sat in his lap, and they exchanged hugs and kisses.
25 Respondent then engaged in an act of sexual intercourse with A.
26 C. in his office.

27 E. A. C. returned to respondent's office for her

1 next appointment about three weeks later and another act of
2 sexual intercourse occurred after respondent asked her to sit in
3 his lap. Thereafter, further acts of sexual intercourse occurred
4 during some of A ■ C.'s therapy sessions with respondent,
5 including, but not limited to, in December, 1973 and on A ■ C.'s
6 birthday on March 13, 1974. Therapy sessions with respondent
7 ceased in April, 1974.

8 J ■ R.

9 A. On or about October 1, 1975, J ■ R.
10 consulted respondent for the purpose of obtaining a diagnosis and
11 treatment of a psychological illness. She was hospitalized by
12 respondent at Vista Hill Hospital for purposes of testing, and
13 remained there for about three months. In early 1976, respondent
14 advised her that she had an incurable illness which required
15 medication and therapy by him for the rest of her life. J ■
16 R. remained his patient through approximately July, 1981.

17 B. During the course of her therapy, respondent
18 continually prescribed medications for J ■ R., including but
19 not limited to Parnate, Valium, Ritalin, Mellaril, Florinef
20 Acetate and Dexedrine. J ■ R. was hospitalized four to six
21 times for drug reactions and became dependent on the drugs.

22 C. On or about February 11, 1976, respondent first
23 hypnotized J ■ R. and thereafter hypnotized her regularly. As
24 a result of the hypnosis and/or drugs, J ■ R. was unable to
25 recall many of the events which transpired between her and
26 respondent until approximately May, 1982.

27 D. During the time that J ■ R. was a patient

1 of respondent, the following acts of a sexual nature took place:

2 1. On two occasion during 1978, respondent came
3 to Judith R.'s apartment and they engaged in sexual intercourse.

4 2. On approximately six to eight occasions
5 between 1976 and 1981, J [REDACTED] R. took off all her clothes during
6 therapy sessions while in respondent's office and laid down naked
7 on the floor. Respondent then touched J [REDACTED] R.'s body in a
8 sexual fashion.

9 3. On one occasion during a therapy session in
10 respondent's office, respondent placed a hose in J [REDACTED] R.'s
11 vagina.

12 4. On more than one occasion during therapy
13 sessions in respondent's office, J [REDACTED] R. was regressed to
14 childhood, and respondent inserted a type of sexual toy called a
15 "snow cone" in J [REDACTED] R.'s rectum. The first time this occurred
16 was on or about February 11, 1976.

17 5. On at least one occasion during a therapy
18 session in respondent's office, J [REDACTED] R. had her eyes closed and
19 was imagining she was driving a car, with respondent in the back
20 seat exhorting her to go faster and faster. She then opened her
21 eyes and discovered she was on the floor masturbating.

22 6. On one occasion during a therapy session in
23 respondent's office, J [REDACTED] R. was regressed to childhood with
24 her eyes closed, and respondent talked about a baby in a baby
25 house which was on fire. J [REDACTED] R. was supposed to put out the
26 fire. She opened her eyes and found she was holding a tube in
27 her vaginal area.

1 7. On one occasion during a therapy session in
2 respondent's office, J [REDACTED] R. stood naked on top of respondent's
3 desk and respondent placed his hands on her vaginal area.

4 8. On or about February 11, 1976, while in
5 respondent's office, respondent performed a physical examination
6 on J [REDACTED] R. which included a rectal and vaginal check, and
7 insertion of a drain in her rectum. Respondent then got down on
8 the floor between her legs while J [REDACTED] R. was standing, and
9 while performing a vaginal examination, told J [REDACTED] R. he was
10 "eating [her] come."

11 9. Between October, 1980, and September, 1981,
12 respondent regularly called J [REDACTED] R. at her home and frequently
13 discussed sexual matters. During some of these conversations,
14 respondent discussed his own sexual wishes and bizarre sex acts.

15 10. On or about October, 1980, respondent
16 directed J [REDACTED] R. to buy the book The Story of "O", read it and
17 relate to it. Respondent subsequently told J [REDACTED] R. he wanted
18 her to be an "O" and he would be the master.

19 M [REDACTED] M.

20 A. In approximately September, 1969, M [REDACTED] M.
21 became a psychiatric patient of respondent. She sought therapy
22 because she was depressed. She had been married since 1960.

23 B. After two or three visits, respondent told
24 M [REDACTED] M. that her problems were sexual in nature, that she had too
25 many sexual inhibitions, she needed to overcome them, she needed
26 to relax before she could work on them, and he suggested
27 hypnosis. Respondent's hypnosis technique consisted of having

1 M M. breathe fast, close her eyes and relax. The patient's
2 eyes remained closed during hypnosis.

3 C. When M M. was hypnotized, respondent talked
4 to her about her being a prostitute, followed by discussions of
5 her day to day activities.

6 D. At approximately the sixth therapy session,
7 respondent directed M M. to take her clothes off. When M
8 M. objected, respondent became angry and threatened not to treat
9 her. M M. removed her clothes. Respondent told her to lay
10 down on the sofa, relax, keep her eyes closed, and that he was
11 going to spank her, that she would enjoy it, and that she wanted
12 it and deserved it. Respondent directed M M. to roll over on
13 her stomach. When she did so, he spanked her buttocks with his
14 hands, causing her buttocks to become red and bruised.
15 Respondent then unzipped his pants, lowered them, and attempted
16 to have sexual intercourse with M M., but was unable to
17 penetrate her.

18 E. Part of each of the next three or four therapy
19 sessions included respondent spanking M M. Following the
20 spanking, respondent asked M M. to perform oral sex on him and
21 she did. Because she had no prior experience, respondent showed
22 her where to put her hands and her mouth. Respondent sat in a
23 chair and M M. knelt in front of him. One time after oral
24 sex, respondent masturbated in front of M M. until he
25 ejaculated. While this was occurring, respondent talked about
26 her "being a whore." During approximately two of these sessions,
27 respondent told M M. to disrobe and he attempted to have

1 sexual intercourse with her but was unable to. During the
2 sessions when M. did not disrobe, respondent lifted her
3 dress and spanked her on her panties. While he did this,
4 respondent said M. needed it, wanted it, and enjoyed it.
5 Respondent directed M. not to talk about their sessions.

6 F. In approximately December, 1969, respondent
7 told M. that they needed more privacy than was available in
8 his office and that they needed to move to a motel. Throughout
9 1970, respondent and M. met nearly every week in a motel.
10 In 1971, M. moved to Covina, and they met approximately
11 twice a week. Occasionally, respondent would meet M. in the
12 Los Angeles area, and they met on more than one occasion at the
13 Disneyland Hotel. Thereafter, the meetings between respondent
14 and M. became infrequent, until 1975, when M. moved to
15 Georgia. Between 1975 and 1985, they met in various cities while
16 respondent was attending conventions. Each such meeting lasted
17 for about two or three days. Their meetings ended in 1985.

18 G. When respondent and M. first met in a
19 motel in late 1969, respondent tied her hands to the back of the
20 bed, had M. lie on her stomach, and beat her mostly on her
21 buttocks with his belt. Respondent told M. that she wanted
22 this and enjoyed it, and directed her not to cry. However, she
23 did cry and became black and blue from the beating.

24 H. The beatings at the motels continued over a
25 long period of time. Occasionally, respondent would become
26 sexually excited and massage M.'s vagina and anus with his
27 hands, masturbate, or direct M. to masturbate herself in

1 front of him. Sexual intercourse occurred but on an infrequent
2 basis. Respondent purchased presents for M. M., including a
3 black skirt, blouse, bra, and hose.

4 I. During 1971, M. M. became pregnant by
5 respondent. Respondent said it was all right for her to have the
6 baby but that he could not tell anyone it was his. Respondent
7 arranged for and paid for an abortion to be performed in a motel
8 room.

9 J. Also during 1971, M. M. took an overdose of
10 tranquilizers and had to be hospitalized at Sharp Hospital.

11 K. Sometime in 1977 or 1978, M. M. visited
12 respondent at his apartment in San Diego. Respondent gave her a
13 shot of morphine, shaved her pubic area with a razor, took a
14 metal stick with a loop on the end, held it over a flame, and
15 branded her by touching the hot iron to the skin of her pubic
16 area. The brand is in the shape of a question mark. Respondent
17 told M. M. he was putting his brand on her, that it showed
18 ownership, and that she was doing what he wanted her to do. The
19 brand burned and later blistered and scabbed over. Respondent
20 gave her morphine shots over the next few days for the pain.

21 L. On two occasions, respondent took M. M. to
22 massage parlors in Orange County. After their massages,
23 respondent directed the female masseuse to perform oral sex on
24 M. M. while respondent watched, and then had her perform oral
25 sex on him while M. M. watched.

26 M. In September, 1981, M. M. met respondent in
27 Las Vegas, Nevada. Respondent gave her an injection in her left

1 arm which caused her severe pain. Later, respondent gave her
2 some pills for the pain, and they engaged in their ritual with
3 the belt. The pain increased and M. went to a hospital
4 emergency room where she remained for the night. Respondent
5 picked her up the next day and took her back to their motel, but
6 she remained sick. M. returned to Atlanta, Georgia the next
7 day and entered a hospital, where she remained for 10 days. Her
8 left arm developed a severe infection.

9 N. In 1985, M. met respondent in a motel in
10 Atlanta. While they were there, respondent put his belt around
11 M.'s neck and pulled on it until she passed out. When she
12 regained consciousness, he pulled it again until she passed out
13 again. This occurred several more times. The next morning, M.
14 M. had a sore throat and told respondent she was afraid.
15 Respondent told her to trust him, that he knew what he was doing,
16 and that he was not going to "snuff" her out. M. became
17 afraid of respondent and the potential for an accidental death.

18 O. M. left respondent and attempted a drug
19 overdose. She was admitted to a hospital in Chamblee, Georgia
20 for a 21 day rehabilitation program. Since then, she has been
21 under the care of a psychiatrist.

22 B. C.

23 A. In March, 1971, B. C. became depressed
24 and attempted to commit suicide. She was referred to respondent
25 who first saw her on or about March 17, 1971. Respondent
26 admitted her to Mercy Hospital and treated her there for
27 approximately three months. The in-patient treatment included 12

1 electro-shock treatments.

2 B. Upon her release from Mercy Hospital in
3 approximately May, 1971, B [REDACTED] C. began therapy with respondent
4 on an out-patient basis at respondent's office. The first few
5 visits consisted of some discussion and periods of silence. She
6 was also given six additional electro-shock treatments at Mercy
7 Hospital on an out-patient basis.

8 C. After a few visits, respondent said that he
9 wanted to do something different. He directed B [REDACTED] C. to
10 close her eyes and relax, and to remove her clothes while she
11 remained seated in the chair. While B [REDACTED] C. took off her
12 clothes, respondent called her a whore and said she was no good.
13 After a while, respondent told her to get dressed and open her
14 eyes.

15 D. At every therapy session which followed,
16 respondent directed B [REDACTED] C. to undress. Respondent continued
17 to call her a whore or some other similar word, and said she was
18 no good.

19 E. During the therapy sessions, respondent
20 generally talked to B [REDACTED] C. from his chair. However, on
21 several occasions, he walked over to B [REDACTED] C.'s chair and
22 struck her with her brassiere and said degrading things to her as
23 he did so. On some occasions, respondent unzipped his pants and
24 stood in front of B [REDACTED] C. One time, respondent directed
25 B [REDACTED] C. to fondle his penis, which she did. On two occasions,
26 respondent ejaculated on her face while she remained seated in
27 her chair. Respondent did not touch her, but told her to wear

1 sexier clothes.

2 F. During a therapy session several months after
3 the sessions began, respondent directed B [REDACTED] C. to lie down
4 on the floor of his office. B [REDACTED] C. was naked. Respondent
5 got on top of her and engaged in an act of sexual intercourse.

6 G. Thereafter, B [REDACTED] C.'s therapy with
7 respondent became infrequent, and ceased after October 31, 1972.
8 She has been in therapy with several therapists since that time.

9 M [REDACTED] D.

10 A. On or about May, 1975, M [REDACTED] D. became a
11 psychiatric patient of respondent after she became very
12 depressed. She was hospitalized by respondent at Vista Hill
13 Hospital. After she was discharged, she saw respondent on a
14 regular basis in his office.

15 B. Respondent regularly commenced the therapy
16 sessions by placing M [REDACTED] D. under hypnosis and instructing her
17 not to open her eyes. Respondent frequently discussed the
18 subject of masturbation, and this caused her to become
19 embarrassed.

20 C. During three or four therapy sessions,
21 respondent instructed M [REDACTED] D. to pull down her pantyhose and
22 underwear and to touch her genital area. M [REDACTED] D. refused.
23 Respondent attempted to pull down her pantyhose and underwear.
24 He also attempted to touch her genitals. M [REDACTED] D. fought
25 against him and respondent stopped.

26 D. During several sessions, respondent talked
27 about two of M [REDACTED] D.'s co-workers and described in detail the

1 supposed sexual activity which occurred between the two co-
2 workers.

3 E. During M [REDACTED] D.'s last therapy session with
4 respondent, he locked the door to his office and hypnotized her.
5 Respondent pulled at her pantyhose and she fought against him.
6 Respondent told her to relax, took her by the hand, and had her
7 lie down on the floor. Respondent tried to pull down her
8 pantyhose but M [REDACTED] D. resisted. Respondent then lowered his
9 pants and laid down on top of M [REDACTED] D. She felt his skin and
10 his penis against her. M [REDACTED] D. started flailing her arms and
11 legs and he got up.

12 F. M [REDACTED] D.'s last therapy session with
13 respondent occurred within one year of his first seeing her.
14 Thereafter, she was hospitalized in 1983, and has been seeing a
15 therapist on a regular basis.

16 L [REDACTED] B.

17 A. On or about April 26, 1982, I [REDACTED] B. became a
18 psychiatric patient of respondent after she became depressed due
19 to marital problems. She saw respondent once a week for a total
20 of four sessions.

21 B. L [REDACTED] B. told respondent that she was
22 experiencing sexual problems with her husband, and respondent
23 said she could either continue with her marriage, divorce her
24 husband, or have an affair. After her second session, respondent
25 called her at home at night and told her to see the movie "The
26 Story of O." After the third session, respondent said he wanted
27 I [REDACTED] B. to expand sexually and encouraged her to masturbate at

1 home. He continued to call her at home at night. At the fourth
2 session, respondent said that therapy was finished, but that he
3 could see her for a follow-up in six months. He continued to
4 call her at night.

5 C. A few weeks later, respondent came to L [REDACTED]
6 B.'s house. They had a few drinks and eventually engaged in
7 sexual intercourse. Respondent called her a whore, and when
8 L [REDACTED] B. objected, respondent hit her on the buttocks. This
9 occurred several more times.

10 D. The sexual relationship between respondent and
11 L [REDACTED] B. continued until 1986. Included in their relationship
12 were repeated spankings, whippings with a belt, chains, leather
13 straps, and blindfolds. On several occasions, respondent placed
14 his belt around Linda B.'s neck and pulled it tight. L [REDACTED] B.
15 passed out one or two times from this.

16 E. On four occasions during approximately 1982,
17 respondent injected L [REDACTED] B. with intravenous drugs, including
18 ritalin. On other occasions, they sniffed butyl nitrate
19 together. Respondent also gave her pills.

20 F. During the summer of 1983, respondent tied
21 L [REDACTED] B. up in the bedroom of his condominium and then branded
22 her on the her skin near her vagina with a hot brass branding
23 rod. The brand was in the shape of respondent's initials "GCA."

24 G. L [REDACTED] B. is presently in therapy with a
25 psychiatrist.

26 OTHER MATTERS

27 A. On September 16, 1987, the Division issued an

1 order in Case No. P-104 ordering respondent to undergo a
2 psychiatric examination pursuant to section 820 of the Code.
3 This order was served on respondent by mail on September 23,
4 1987. An appointment was made for respondent to be examined on
5 November 23, 1987, by a psychiatrist appointed by the Division.
6 On November 20, 1987, respondent advised the medical consultant
7 of the Board that he would not keep his appointment to see said
8 psychiatrist.

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DETERMINATION OF ISSUES

1. Respondent is subject to disciplinary action pursuant to sections 2227, 2234, 726 and 821 of the Business and Professions Code by reason of the Finding of Facts numbers 1 through 7, above.

2. On or about May 23, 1989, respondent submitted to the Board a "Statement to the Board and Stipulation to Revoke Medical License" in which respondent stipulated to the revocation of his medical license but specifically refused to admit the charges brought against him.

ORDER OF THE BOARD

Physician's and Surgeon's Certificate number C26644, heretofore issued to respondent Gary C. Aden, M.D., is hereby revoked. This Order shall become effective on October 9, 1989.

Pursuant to Government Code section 11520, subdivision (b), respondent is entitled to make any showing by way of mitigation prior to and including the effective date of this decision.

Made this 8th day of September, 1989.

Theresa Claassen

FOR THE BOARD OF MEDICAL QUALITY ASSURANCE
DIVISION OF MEDICAL QUALITY

THERESA CLAASSEN
Secretary/Treasurer