

Dear Paul,

8/8/76

After you called yesterday and earlier this morning when I was doing mechanical chores, like filing and making room in the files by shiftings to storage, Ebsen and his phlebitis were on my mind. In part I suppose this is because of my experiences. While I hope they are not typical and presume that Ebsen has the best medical care and advice he can find, from my own experience some of the doctors with the biggest reputations are not necessarily the best. Some do not keep up, either. I had to learn too much for myself.

And I was also fortunate in having a friend who cares, a man in New York with whom I was to meet anyway. He arranged for me to be examined by his internist. He made a big difference to me.

I do not assume that all cases are identical. I am inclined to believe that mine may not be the more common kind and that the blockage(s) are deeper.

What I believe may account for this being on my mind more than anything else is a comment you made and an experience for which I had not been prepared.

You said that Ebsen sits with his legs up. Good. My doctor did not tell me this but when I was in the hospital they kept the foot of the bed up and ordered me to keep my legs up when I was out of bed, so I learned that way. However, what I did not learn without pain is that there has to be a limit to uninterrupted sitting. If Ebsen has not been told this it can be disagreeable and can almost immediately interfere with his ability to walk normally on camera. It will not keep him from moving but he also will not forget it if it happens. Here is how I learned. First a funny to introduce it.

I had agreed to debate David Belin at Vanderbilt Univ. when I was hospitalized. It was about 5 days after diagnosis before I was hospitalized. I immediately wrote the lecture bureau because if I were hospitalized I'd be there when I was supposed to debate. They called the hospital. When? During that part of the admission physical that is a prostate examination. The very instant the finger penetrated the phone rang. It happens that the kid who took me to the hospital is here now. He answered the phone. They insisted on talking and I asked the doc when they should return the call. I had proposed Howard as a substitute and Vanderbilt, for reasons I do not know, insisted on me. With an estimate of when I could travel again it was set for 11/19/75.

I had not been out long. It was a week before I could walk more than the length of the house. Fortunately another student wanted to go with me. He also provided my transportation to and from the airport. So there was the debate. I apologized for the need to be sitting and for more than two hours I sat with my legs on my attache case. And I did Belin in, hardheaded hardhat that the Judenrat is.

There was a reception for us afterward in another building or a distant part of that one. This was the first time I stood up, to go there. I could hardly walk. With the debate over and my mind released I became aware that my feet were swollen. I probably was unaware when I loosened the laces. By the time I was back at the hotel I could barely get the shoes off. The next morning I could not get them on. Fortunately Bill had packed a pair of soft, Indian-type moccasins for me to wear in the hotel instead of bedroom slippers. I was able to get them on.

I was in Nashville, which is where Jimmy Ray is in jail. I did have things to discuss with him. And it was raining. I went to the jail and got soaking wet, especially the feet. Wet again getting out of the jail and to the car driven by a local student. We stopped at shoe stores on the way to the airport but I could get nothing I could get on that was soft. The kid with me bought a pair of boots he said were half the price he'd pay here. I got dry socks.

By the time I got to the ticket counter to check in I didn't have to say anything. The clerk took one look at me, asked me what it was and got a wheelchair. He then called the gate and said something to them. The student wheeled me down and the gate attendant, when the plane landed and unloaded, went out and locked the gate behind him. Soon the back stairs of that plane went down and then I was wheeled out and single-loaded through it. Now all I had told the ticket desk is phlebitis. They knew the rest. Before I was on the plane from the rear the crew had emptied the back two rows on the right and had folded

the seats in front down so I could put my legs on their backs. That is the way I travelled back to Washington. When the plane landed, without my asking, they had a wheelchair waiting. So they have had experience.

Another sidelight: in the aisle seat flanking me there just happened to be a pretty and pleasant Navy nurse on her way to reassignment at the Bethesda Navy Hospital. She took a look at my left ^{foot} and asked about it. She had a tape-measure in her cosmetics bag so she measured both and exclaimed "Phew!" at the difference. With the less-affected one also swollen. (Until they later had a swap she and the student spent pleasant evenings together. She was going to a point on our way so we drove her to the post.)

We stopped off to see my doctor. He examined me and said merely not to worry, that it happens sometimes! No more.

By then all he had me wearing as venous supports was knee-high surgical socks. When I had major thigh involvement.

Meanwhile, I had no idea what caused this and it worried me, I suppose.

It then happened that I had to go south again, coinciding with when Les Payne was going to be in Memphis. I again wanted to see Jimmy Ray so I arranged that and to meet Les at Nashville and to go to New York with him from there. I was to meet with this New York City friend. This will give you an idea of what you can do with phlebitis.

I was speaking at Goldsboro, N.C. That and a few drinks with the faculty people lasted until about 1 a.m. I was up at something before 5 to be ready for a six o'clock ride to the airport about an hour away, to make a 7 plane. How did I go to Nashville? I had to go to Atlanta first. Flew that far south to make a connection to fly northwest. It was raining in the east and snowing when I got to Nashville. I cabbied to the jail, spent the day there with no lunch and was at the Nashville airport in time to meet Les' plane. (This was the tip on which he spoke to those to whom I'd referred him after my correct analysis of the Adams testimony before the Church committee, when he got added proof of the FBI Memphis Cointelpro involvement in the King assassination.) So we had an hour, euphoric for me, in the airport bar. It was also work, as was the trip to New York. We got there at 9 p.m. Another reporter friend met me so he and I could work, as we did until 2 a.m. in a New York bar. I then went to the hotel near the home of my friend, who was the first of his family to recover from the flu all had. Seven a.m. we met for breakfast, then he took a nap while I worked on notes, then he took me to his internist, where I began to learn so much. But with all that travel and excitement and so little sleep, I was perfectly okay except for what he detected of the phlebitis of which I had no knowledge. I've gone into this as encouragement. You can work hard with it. It is probably good to do it.

When I told this doctor of the Belin experience is the first time I knew that you can't sit for too long. He said if I got up and walked from my office to the kitchen once every 20-30 minutes that would be okay but not to sit for more than a half-hour at a time without walking ~~around~~ around ~~xxx~~ a little. I've done it twice while writing this, just the length of the house.

When my medical insurer, to whom I pay \$1,200 a year for this kind of lousy care and now must continue to because anyone else would have a waiver, did not provide the vascular consultations the New York internist recommended, I found a local vascular man. He is the only one, I think a Greek refugee, with a very heavy accent and limited command of English. But a warm man. He gave me the notes with which to get my hospital records for him. This alone is how I knew the extent of the pre-hospitalization damage and its permanence. Now I had been on an anti-coagulant for six months and was getting fat from little exercise. I was concerned and wanted to know about exercises. He ~~xxx~~ threw up his hands when I asked about bicycling. And so I learned that I am not supposed to fall, ~~exercise~~ bruise myself, etc, with particular care for the legs. An exercycle? Fine. So I have one and can use it days I can't walk because of the weather or when my feet feel numb. I have a point in this: I think that for one who has to read scripts and one of means and space in his home it should be no trick at all to be able to do what I do, read while I walk around inside, or even to ride the exercycle while reading from a reading stand in front of it. Just ride it longer and without as much vigor, which will shake the body and disturb reading.

With any damage to the valves in the veins of the legs the thing is to make the muscles do what the valves used to do. Once I learned this I forced myself. It was very good for me. I've told you how I have an increasing sense of well-being and how the discomforts have gradually disappeared. I am sure that a by-product of my use of my legs is the stretching of the minor vessels. I can see it now. They are doing more work and I am getting along fine with the main veins gone. Entirely in the left leg and thigh, with limited arterial function on both legs, especially the feet. It is now a joy to me when, after some vigorous grass-mowing by hand on the steeper slopes I come into the house, take my venous supports off and see all that red in the toes. I then sit, rest and read ~~xxxx~~ until I've sweated off. The exertion is the best medicine.

Being on camera is different, of course. But remember when you walked to the FBI with Jim and me and Wiseman met us at the escort desk and we then walked outside and stood and talked for a while? If you were not with us that time then when it happened we stood for more than a half hour and talked. I merely move. It is that simple. A muscle works and the blood works, too. That, I think is one of the keys to replacing the loss, whether it be great or little.

Going along with this I believe vitamins have helped. Some, in excess, can be hurtful. Some are not. Some do not store in the body, like C. Lil has had an interest in vitamins for years and has read extensively. It happens that our dentist has become a nutritionist. And some well-known medical people have become interested in phlebitis. Dr. Alton Ochsner, in New Orleans, is one. Politically he is a nut but medically he has been fantastic. Lil showed me an article of his in which he said phlebitis is a disease of the sitting-down. I believe he also said in it that in his experience Vitamin E is excellent therapy. I know there are other doctors who treat phlebitis, successfully, with this and no medication. My dentist, who is an old friend, speaks often about a pair of doctors who may be in your area, the Shute brothers. They treat with Vitamin E.

Where he is uncertain he says so. He is a very conservative man in all ways. He is uncertain about which form of Vitamin Eⁿ to use.

He is not an amateur in this. He has taken training. I've seen the certificates, like medical degrees, in his office.

There has, in his opinion, been no resolution of the question is entirely natural and part natural-part synthetic Vitamin E better. He says that in some ways the natural is superior but on phlebitis there remains the question. His suggestion, based on the fact that there is no danger of O.D., is to take both, I think he said 1,500 units daily. I leave this up to Lil.

However, I surely can guarantee you that between this exercising the legs and the vitamins I'm back to where I was in how I feel except from the occasional discomfort from the Jobst supports. I'm here, I feel fine, so I'm also sold on the Jobst supports.

I don't know if any of this can mean anything to Ebsen. But my mother is 85, not well, and she brings her joy.

Best,