Nixon Improves But Condition Remains Critical

By Stuart Auerbach and Robert Meyers Washington Post Staff Writers

LONG BEACH, Calif., Oct. 30-Former President Nixon, somewhat improved after going into life-threatening shock following surgery Tuesday, remained in critical con-dition today as his doctors worried about further complications and the danger of more blood clots forming in his leg.

While the doctors told reporters at Memorial Hospital Medical Center here that Mr. Nixon's internal bleeding had stopped, they cautiously said it is still too "premature" for them to make a prognosis on the former President's chances of recovery.

Moreover, the medical bulletin failed to mention whether Mr. Nixon was alert or conscious during the day. Ronald L. Ziegler, the former President's chief aide, declined to tell reporters whether Mr. Nixon was conscious.

"He ought to be conscious," said one medical expert not connected with the case. "Word of his consciousness is conspicuous by its absence in the medical bulletin." Dr. John C. Lungren, Mr. Nixon's chief physician, and Dr. Eldon Hickman, the surgeon who operated Tuesday morning to block off a clotted vein in his left leg, said he is still in the intensive

left leg, said he is still in the intensive care unit of the hospital here.

The special treatment provided in that unit probably saved Mr. Nixon's life Tuesday afternoon, when massive internal bleeding caused him to go into shock. His doctors said they gave him three pints of blood, and other experts not connected with the case said that means he lost a large amount of blood—four pints or more.

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"We're fortunate that he was in intensive care and that the doctors were handy," Ziegler told reporters. "There's no question we almost lost President Nixon yesterday [Tuesday] afternoon."

The internal bleeding behind the lining of the abdomen probably was not connected with the surgery. Doctors said it was caused by the heavy doses of anti-coagulant, blood-thinning drugs that Mr. Nixon had received in an attempt to cut the had received in an attempt to cut the formation of potentially dangerous blood clots in his phlebitis-stricken left leg.

Hickman performed the surgery—putting a plastic clip on a large vein in Mr. Nixon's leg just above the clot—to block other masses of coagulated blood from flowing to the former President's lungs, where they could cause death.

Doctors stopped the anti-coagulation treatment before the surgery, but Lundgren and Hickman said today, "Hopefully, we can resume anti-coagulant therapy when we feel safe that the bleeding from

when we feel safe that the bleeding from surgery is no longer a danger."

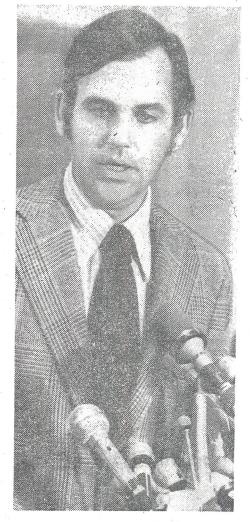
Nonetheless, one California doctor not connected with the case worried that the spontaneous nature of Mr. Nixon's internal bleeding could signify that more complications lie about plications lie ahead.

Among the major problems that Mr. Nixon's doctors were concerned with today was the possibility of kidney failure—a complication that sometimes follows massive losses of blood. To check this, medical experts say, Mr. Nixon's doctors will keep a close check on his urinary output.

"It's crucial to maintain kidney function," said one doctor not connected with

the case.

There is also the possibility—though less likely than the possibility of kidney prob-



Ziegler briefs reporters at hospital.

lems developing - that Mr. Nixon could suffer a heart attack or stroke as a result of the shock that followed the loss of the blood. His heartbeat and respiration are therefore being monitored continually in the intensive-care unit.

One other problem arising from the discontinuation of the anti-coagulation therapy is the possibility that large blood clots will develop either above the blocked vein or in veins, such as his right leg, where clots have not formed before.

One doctor said "a rebound phenome-on"—where the risk of clots increases sometimes follows the discontinuation of anti-coagulant treatment.

One expert speculated that a man such as Mr. Nixon, who has been under great emotional stress and who has been de-scribed by Ziegler as being in a "depress-ed" frame of mind, runs a heavy risk of developing "stress gastric ulcers," which could also cause internal bleeding, after

All these potential dangers kept Mr. Nixon on the critical list today. One doctor familiar with the case said it is a usual precaution to keep a man on the critical

list after he has suffered significant complications following an operation.

The designation "critical" is the most serious of the four descriptions used by the California Hospital Association and other hospitals to give an indication of a

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Associated Press

Mrs. Nixon and daughters Julie Eisenhower and Tricia Cox walk through hospital to Mr. Nixon's bedside.

NIXON, From A1

patient's condition. Mr. Nixon's condition differs slightly from the association definition of critical in that doctors reported that his vital signs—pulse, blood pressure, respiration and temperature—were stable today.

The doctors said that they have inserted a tube through Mr. Nixon's nose into his gastrointestinal tract to prevent swelling of his abdomen because he is suffering from paralytic ileus, which has stopped the normal flow of gas through his intestinal system. If the gas were not sucked out it would cause swelling and discomfort. The doctors said this frequently occurs after internal bleeding such as Mr. Nixon suffered.

Dr. Lungren said that he had been in touch with President Ford's personal physician, Dr. William Lukash, Tuesday/night and this morning and was keeping him informed of Mr. Nixon's condition 29 oct

The former President's wife, Pat, and their daughters, Julie Eisenhower and Tricia Cox, visited their father's bedside late Tuesday and have spent most of today in the hospital.

The two Nixon daughters flew out from the East Coast late Tuesday and are staying with their mother and Rose Mary Woods, Mr. Nixon's long-time personal secretary, at a nearby private residence.

"I know President Nixon has not lost the will to live," Ziegler said in response to a question. "He has handled the hospital situation with great courage.... he is a man of great courage and strength and will pull out of this," Ziegler predicted.

Ziegler again responded to questions about Mr. Nixon's lack of medical insurance by saying that if he had gone into a military hospital he would have been charged the prevailing rate of about \$60 a day. However, Ziegler said the Memorial Hospital Center of Long Beach was chosen because of its facilities and because Dr. Lungren had formerly been chief of staff there.

Mr. Nixon is occupying a room that costs \$94 a day. Ziegler says all costs incurred at the hospital must and will be paid for by the former President "from his personal funds."

Ziegler said Mr. Nixon has received get-well telephone calls from President Ford's wife, Betty; from California Gov. Ronald Reagan; the Rev. Billy Graham; Dr. Norman Vincent Peale; and friends and former staff members. The phone in Mr. Nixon's room is often answered by Manolo Sanchez, Mr. Nixon's long-time valet, Ziegler said.

Mr. Nixon resigned from office on Aug. 9 and entered the hospital about six weeks later on Sept. 23 for treatment of recurrent phlebitis. He stayed at the hospital until Oct. 4, when he returned to Casa Pacifica, his estate at San Clemente. Three weeks later, on Oct. 23, he was hurriedly readmitted to the hospital after blood tests revealed the presence of new clotting activity in his left leg. Last Monday night a new and potentially fatal clot was discovered high in his left thigh, and doctors made the decision to operate.