

# NYTimes Latest Bulletin on Nixon

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LONG BEACH, Calif., Nov. 4—Following is the text of a bulletin issued at 9:15 A.M. today by Dr. John C. Lungren, personal physician to former President Richard M. Nixon, at Memorial Hospital Medical Center, on his patients condition:

Special to The New York Times

Former President Nixon still continues to show gradual improvement. His vital signs are stable.

We will attempt careful ambulation today in his room with help. During this activity he will be closely monitored.

We're still concerned that the minor effusion still persists in the left lung (effusion means presence of a minor amount of fluid in the lung which is probably secondary to irritation of the diaphragm from the hematoma).

We're still working with hematologists in the department of pathology to rule out any abnormality in his blood analysis to account for the platelet deficiency.

He remains under sub-intensive care.

Upon Mr. Nixon's rehospitalization, I asked Dr. William Smith, director of pharmacy services at Memorial Hospital Medical Center and an assistant clinical professor, U.S.C. School of Pharmacy, to use the best scientific method to determine how Mr. Nixon handles the anticoagulant drug Coumadin. This request was made on Thursday morning, Oct. 24.

Dr. Smith on that day assigned two pharmacists of his staff who have specialized in anticoagulant drugs the task of analyzing the previous anticoagulation program of Mr. Nixon.

In addition, he telephoned a colleague, Dr. William Barr, professor and chairman, department of pharmacy and pharmaceuticals, Medical College of Virginia, to see if the special computer systems they have been developing could be used to determine the parameters of how Mr. Nixon handles the drug.

Since that time, our Dr.

Smith, Dr. Barr and a staff of their pharmacokinetics laboratory have completed and tested several computer programs using both digital and analog computers.

Last week, I received an initial computer generated plot of Mr. Nixon's anticoagulation program through Oct. 27, which has proven very useful.

The computer programs will assist us in deciding the importance of such parameters as: absorption rate, blood level drug concentrations and relationships to laboratory tests, and elimination rate of the drugs, all specific to Mr. Nixon. These parameters now have been tentatively determined but require verification by actual drug blood level studies. Blood samples<sup>8</sup> have been drawn and will be sent to Virginia early this week for assay. With this data, the computer will provide us with several drug dosing curves from which we can select the best anticagulation program specific for Mr. Nixon.

I would like to add, Dr. Smith informs me that the for anticoagulant drugs and analog computer programs several other drugs will soon be available on site at Memorial Hospital Medical Center for future patients. Every patient from here on out who gets admitted on anticoagulation therapy will have this new service available to them.

The pharmacy staff and drug information service at Memorial Hospital continues to assist with reviewing all drugs for Mr. Nixon for possible reactions and interactions and serving as resources for drug-related questions.