

## Doctor's Report

# Blood Clot Has Moved to Nixon's Lung

### Long Beach

A dime-sized blood clot from former President Nixon's leg has moved to his right lung and is "a potentially dangerous situation, but not critical at this time," his doctor announced yesterday.

Dr. John C. Lungren, speaking at a press conference at Memorial Hospital Medical Center, said that surgery is not anticipated. Mr. Nixon entered the hospital Monday for treatment of persistent phlebitis of his left leg.

The former President "has a very good chance of recovery," Lungren said, "but it will take time."

He said the real danger would be if another clot broke off and moved to a lung.

Discovery of an "embolus in the right, mid-upper lung field of the lateral surface" was made Tuesday afternoon after consultation with Dr. Earl Dore, chief of nuclear medicine for the hospital and associate clinical professor of radiology at UCLA.

"Naturally," said Lungren, "this means that the hospitalization will be longer." He indicated it was his "professional guess" that Mr. Nixon might have to remain in the hospital "perhaps to the middle of next week, or maybe the end."

An embolism — an obstructed blood vessel — kills the lung tissue around it. The actual size of the dead lung area was not disclosed.

Lungren indicated that the clot itself was discovered through the use of a special type of lung scanner called the airway patency scan.

Asked about the former President's attitude in view of the new finding, the phy-

sician answered, "He has a hell of a will to live. . . His mood is remarkable for what he is going through."

The doctor said "exhaustive studies" are being made to discover the primary cause of the problem.

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which began as a painful swelling of the left leg just before Mr. Nixon left on his Middle East trip last June.

Asked whether the stress experienced by the man who resigned the presidency in early August might have something to do with the physical problems, Lungren agreed that physical stress and fatigue "may be a factor."

But he suggested that other causes are also possible — from simple physical inactivity to hypercoagulability of the blood (a strong tendency to clot), or even malignancy, including leukemia.

Lungren said Mr. Nixon had not complained of chest pains or shown other symptoms of a lung embolism. "However," He said, "It is not unusual to have a silent clot. . . just like it's not unusual to have a silent heart attack."

Since the new discovery, Mr. Nixon has been receiv-

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ing the same treatment he has had since entering the hospital, according to the doctor — oral anti-coagulation plus intravenous coumadin and intravenous heparin drip.

After resigning and leaving the White House in early August, Mr. Nixon for a time had no real problem with the phlebitis other than continued swelling whenever he stood for a time or rode in vehicles for a distance.

He was warned by his physician of that time, Dr. Walter Tkach, an Air Force major general, that he should consider the matter serious if he experienced any discomfort above the knee.

The pain occurred earlier this month, after Mr. Nixon left the White House and while he was staying at the estate of Ambassador Walter Annenberg near Palm Spring.

Dr. Lungren was called in and went to Palm Springs to examine his patient. He found the upper thigh swollen and pain in the saphenous vein of the left calf.

Lungren advised hospitalization because he did not wish to begin anti-coagulation treatment on an outpatient.

Mr. Nixon had resisted hospitalization, according to Tkach, who said the former President told him, "If I go into the hospital, I'll never come out alive."

On September 18, Lungren saw Mr. Nixon in San Clemente and found the upper thigh apparently recovered and the swelling gone.

But the physician told his patient that because of the continuing problem in the lower leg, anti-coagulant therapy should begin — and that it should not be attempted outside the hospital.

It was then, Lungren said, that Mr. Nixon agreed to enter the hospital.

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Dr. John Lungren said Mr. Nixon has a 'very good chance of recovery'