

NIXON IMPROVING, BUT PERIL IS CITED

Doctor Notes Concern Over
Potential for Hemorrhage
—Pain Is Eased

By LAWRENCE K. ALTMAN

Special to The New York Times

LONG BEACH, Calif., Nov. 1 —Former President Richard M. Nixon's doctor said today that he "is slowly and steadily improving" and had less pain, although he still needed "critical care" for complication resulting from an operation last Tuesday.

Dr. John C. Lungren, Mr. Nixon's physician, said in a bulletin that the former President's "oozing of blood" had apparently stopped. Nevertheless, the specialist in internal medicine said "we are still concerned with the potential danger of hemorrhage."

Dr. Lungren issued the bulletin an hour and a half before greeting President Ford as he arrived to visit Mr. Nixon in an intensive care unit on the seventh floor of Memorial Hospital Medical Center of Long Beach.

In his bulletin, Dr. Lungren said President Ford's visit "would prove to be extremely therapeutic at this time." He limited the visit to eight minutes.

Pain Subsides

Dr. Lungren said Mr. Nixon was experiencing less pain in his left flank, where the blood that had leaked internally had located. Dr. Lungren said he had removed a tube from Mr. Nixon's nose. The tube had passed through Mr. Nixon's nostril and flowed into the stomach to help relieve the paralytic ileus condition that had temporarily immobilized the former President's bowels. "The paralysis of his bowel is less this morning," Dr. Lungren said.

Improvement in Mr. Nixon's bowel condition was not the only reason for Dr. Lungren's guarded statements about Mr. Nixon's apparent rally. Dr. Lungren previously had described Mr. Nixon's vital signs as "table." Today he said: "The latest vital signs are improved."

Mr. Nixon's latest reported blood pressure was 150/84. Yesterday it was reported as 140/80. On two occasions when Mr. Nixon was President, his blood pressure was reported as 120/74 and 118/82.

The former President's pulse was 80. Electrocardiographic monitoring showed Mr. Nixon's heart to be beating in a normal sinus rhythm.

Most doctors would consider all the blood pressure and pulse recordings within the range of normal for the President's condition at the time they were measured.

At no point has Dr. Lungren reported the lowest blood pressure recorded when Mr. Nixon went into shock six hours after an operation to clamp a vein in his pelvis.

Mr. Nixon's temperature remains slightly elevated at 99.4 degrees.

But Dr. Lungren's concern for keeping Mr. Nixon under what he called "critical care" reflects the potential for Mr. Nixon to bleed further.

Mr. Nixon's bleeding since Tuesday has amounted to about 75 per cent of the body's total blood volume—about 10 or so pints, according to Dr. Lungren. This is more blood than previously appreciated.

Today's bulletin said Mr.



Associated Press

Ronald L. Ziegler of Richard M. Nixon's staff greeting President Ford on his arrival for a visit to Mr. Nixon yesterday at hospital in Long Beach, Calif.

Nixon's hemoglobin count had risen from 9.6 to 11.6 grams and that his hematocrit had risen from 27.3 to 34.6 as of 7 A.M. The hemoglobin count and hematocrit are two tests to measure the number of red cells in the blood.

The rise, Dr. Lungren said, "was accomplished with a transfusion of one unit of fresh blood last night." A unit is equivalent to a pint.

Even after the additional transfusion, Mr. Nixon's blood tests show he is anemic. The normal values for Mr. Nixon's hemoglobin count would be about 15 and his hematocrit 44 or so.

Mr. Nixon received an additional blood transfusion this morning. It was his sixth in the last four days.

At a news conference last night, Dr. James Harper, one of the surgeons who operated on Mr. Nixon, said the former President had received six transfusions. This would have meant that Mr. Nixon received two transfusions yesterday, as reported today in The New York Times.

Late today, Dr. Lungren said that just four transfusions had been given before the news conference. A fifth transfusion was given last night after the conference. The sixth transfusion was given this morning, according to a hospital spokesman.

Drop in Platelet Count

Mr. Nixon has suffered a drop in his platelet count, which is another reason Dr. Lungren said that his team was "very cognizant of the fact that there are dangers lurking in the background, real dangers, true dangers."

Platelets are disk-shaped elements in the blood that play a key role in the normal process of blood clotting.

In today's bulletin Dr. Lungren said Mr. Nixon's platelet count reached a low of 69,000. The count usually is about 300,000 platelets per cubic millimeter, with a range of 140,000 to 450,000.

Though a level 69,000 borders on the worrisome level, a nationally prominent blood specialist not connected with the Nixon case said in an interview that it probably was not low enough to be the primary cause of Mr. Nixon's bleeding.

Dr. Lungren said that the intensive care team had transfused eight units of platelets into Mr. Nixon's veins. The

or separated out from larger quantities of blood. Platelets are fragile and must be transfused within a few hours after donations to a blood bank.

Dr. Lungren has had consultations with at least four surgeons, but it is not known whether a hematologist, or a blood specialist, has joined the team.

The hematologist interviewed, who asked that his name not be used, said that it was too early to tell from limited data in Dr. Lungren's bulletin whether the platelet drop was due to a dilutional factor as a result of the six transfusions, or whether it indicated that Mr. Nixon was suffering from yet another complication called D.I.C., for diffuse intravascular coagulation. D.I.C. is one of the most serious blood disorders and can result from a wide variety of other conditions.

D.I.C. is characterized by extremely complex defects in the multistep blood-clotting mechanism. Once D.I.C. begins, the platelet count can drop quickly. Platelet transfusions can be helpful in some D.I.C. cases. The answer should come from repeated platelet and other blood tests, the hematologist said.