

INTERVIEW I

DATE: May 16, 1969
INTERVIEWEE: J. WILLIS HURST
INTERVIEWER: T. H. BAKER
PLACE: Dr. Hurst's office, Atlanta, Georgia

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B: Sir, let me just outline very briefly the dates of your career here. You were born on October 21, 1920 in Cooper, Kentucky (Dr. Hurst note: Cooper has been absorbed into Monticello), and you have a bachelor's degree from the University of Georgia, a Bachelor of Science, and a medical degree from the Medical College of Georgia in 1944. You were an intern and resident at the Medical College of Georgia and then in the late forties a cardiac fellow at the Massachusetts General Hospital, studying I believe you said there with Dr. Paul Dudley White. You started a medical practice in Atlanta in 1949 as a specialist in cardiology, and from 1950 on have been with the Emory University Medical School, where you are now the professor and chairman of the Department of Internal Medicine. In the mid-forties you were in the U.S. Army Medical Corps, and in the mid-fifties you were assigned to the Bethesda Naval Hospital near Washington, where you eventually became head of cardiology [JWH note: and was discharged as a commander]. There is a great deal more that I have not mentioned, your authorship of several textbooks--I understand you have one in progress right now--and your membership in several medical associations. If they come up later, you can mention the specific ones. Is there anything that should be added to that outline, sir?

H: I would think not. That covers it pretty well.

B: All right, sir. Now, some general questions just to set the background. Did you have any knowledge of Mr. Johnson before his 1955 heart attack?

H: Only indirectly. Of course, at that time I was in Washington. The President was majority

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leader at that time, a very forceful majority leader, and was extremely well known. My contact with him was indirect then, through those that would be admitted to the naval hospital. Colleagues of his would occasionally come in to the hospital and talk about him. I felt I knew him indirectly prior to my first encounter with him.

B: Had you formed any impressions about him?

H: The only impression I had prior to meeting him, and this would be gathered from newspapers and from colleagues that would be admitted to the naval hospital there, is that he was an extremely capable man who really knew how to get things done and was an extremely patriotic man in the sense that he was fighting for what was best for this country. But I had no personal encounter until the time of his heart attack.

B: One more question just for the record, sir. Have you ever had any direct participation in politics in the sense of campaigning or overt partisan activity?

H: Oh, no, of course not. Absolutely not.

B: How would you classify yourself politically?

H: I would feel that most of the views I hold would be like those held by many in the Democratic Party. It's a little bit hard to answer that now in that there are so many views expressed by so many people in so many parties, so I'm a little reluctant to say that. But I'm not one that feels that a country can exist with status quo. Maybe the discussion then would be, how does one respond to a changing world? It would seem that action is needed. I'm not one that feels we can make progress by doing nothing, therefore over a period of time I have identified with certain views of the leaders of the Democratic Party more than I would with others.

B: That's a good enough summary.

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Then, sir, your first real acquaintanceship with Mr. Johnson was on the occasion of his 1955 heart attack.

H: That's right.

B: The background of that is that Mr. Johnson was majority leader then. It was July, 1955. He was on a visit to the [George] Brown estate near Washington, and there had the heart attack and was taken to Bethesda. Can you take up the story there?

H: That's correct. Prior to his arrival at Bethesda I was notified that he was to be admitted, therefore I was there when he was admitted to the hospital.

B: Was this a call from--the notification call--?

H: My call was from the front office of the hospital, of course. Then he arrived along with Mrs. Johnson and several others. Of course, the first order of business was to be certain that he was all right and arrive at a diagnosis, which we proceeded to do as rapidly as possible.

The interesting part about his story is that he was, as you say, out at the Brown estate in Virginia. I might add that I was to visit this place some years later with Mrs. Johnson and my close friend Jim Cain, and Luci and a friend, to discuss in detail the wisdom of his running for office, running for the presidency, when he was to run the race against [Barry] Goldwater. So I visited the area where his chest pain occurred for the first time some years later.

He was at the Brown estate at the time of his chest pain. I believe he was playing dominoes or some game with his friends there, including Brown, and began to have chest pain. Now, I'll interject some interesting notes, at least notes I hope are interesting along the line. Mr. Brown apparently had some medication and administered this to Mr. Johnson. Mr. Brown I believe had discussed, "maybe you're having a heart attack." A local physician was called. I'm sorry I never was able to learn his name, because he had

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the President moved on to the hospital as quickly as possible.

B: What sort of medication did Mr. Brown administer?

H: As I recall it, he gave him some quinidine. Now, just where he got the quinidine, I don't know. Fortunately it did no harm, and I suppose didn't influence matters one way or another. But an interesting thing occurred there. The physician who saw him suspected a heart attack and told Mr. Johnson that "I believe you're having a heart attack." In decisive fashion the President said, "If that is so, then we must act like I am and move on to the hospital."

So he arrived and was reasonably comfortable. He was pale and obviously disturbed. When I was working with him and noticed Mrs. Johnson out of the corner of my eye, I saw how disturbed she was, and made a mental note that as soon as the order of the business with the patient was taken care of, that I would move to talk with her as soon as possible.

B: What precisely were Mr. Johnson's symptoms at this stage?

H: Well, at that stage, just at admission, as I recall he was reasonably comfortable. As I'll mention in a moment, he later had additional pain requiring medication. He had experienced several episodes of discomfort beneath the breast bone, that is beneath the sternum, on several occasions during the days preceding his visit to the Brown estate. Once in a car at rest, and also with effort. This we know now was sort of the preliminary or what we call prodromal, or pre-heart attack phase, that we identify in many patients. That is, substernal discomfort occurring on several occasions prior to the prolonged discomfort that the patient has.

Then he came to the hospital. By then he was feeling a little better. But during the examination, I recall, he developed more substernal pain requiring medication for relief of the pain. An electrocardiogram was made, and I recall my feeling as I saw the electrocardiogram being delivered by the electrocardiograph machine. There it was no

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question about it; he had all of the changes of an inferior myocardial infarction, which was later to extend to the lateral portion of the heart as well. This was, remember, 1955. The heart rate was comparatively slow and we knew then that it was wise to use some atropine under these circumstances. I'm glad we did, because as the years have evolved we have learned that there are times with a fresh heart attack that a profoundly slow heart rate should be treated with atropine. This was not quite as well known by the general medical profession at that time as it is now.

Then I recall two or three key points that will shed some light on the personality of the President. As he saw me looking at the electrocardiogram he, of course, was sizing me up also, as one who was seeing him for the first time and one that would be involved in his care. He simply said, "What is your diagnosis?" And my response, based on the history of his substernal discomfort preceding that day, and the prolonged pain he had had that day, and the electrocardiographic findings, was, quote, "Sir, you have had a heart attack," unquote. Then in typical Johnson fashion I noticed his eyes narrowed slightly and he asked, "Are you sure? Are you certain?" And my response was, "Yes, I am certain." I always felt that it was fortunate that I could be certain, because I think one part of his personality is that he wants people to act with a degree of certainty, being prepared to give all the data required to prove what they've said. But he likes decisiveness and will test one to see if they have the proof to make such a decisive statement. In other words, I would wonder now if my later relationship would have been as close and warm had I been unable, or did not for some reason speak with reasonable certainty at that particular moment of his illness.

B: Sir, I think perhaps I should point out something at this point. You were then I believe thirty-five years old, which I think most laymen would believe would be rather young to be head of cardiology at a major hospital.

H: This I think would be thirty-four. You can clean this up later. Because July would precede my thirty-fifth birthday, which was in October.

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B: That's right, your birthday is in October, you would have been thirty-four.

H: Well, I was fortunate in that I had already had my cardiology training at the Massachusetts General Hospital. This is simply a series of coincidences, that I would be called back to the navy, having had my cardiology training, be placed at the Bethesda Naval Hospital, and be called when he was ill. All of this would be a matter of chance, where many pieces just fell in together at the right time.

B: Did Mr. Johnson quiz you on your qualifications at any time during this?

H: No, no, he did not. Later in the convalescence we had, of course, hours of discussions, and he was very interested in what I'd done and what I wanted to do and things of this sort. Keep in mind that he was moderately ill. We later classified this as a moderately severe heart attack. I feel that his acceptance of me as one he would trust over the years occurred at this one point in time, when his personality and mine seemed to blend. I don't think any amount of training in the world would have meant anything at that moment if I had not responded with a decisive answer and moved with deliberate speed to relieve his discomfort. Remember, he had already said earlier to others, "If you think it's a heart attack, act like it." This is the way he functioned and wanted others to do the same.

Another thing, let me add here, was that his blood pressure dropped some and he was given medication for this for several days. We classified this as a moderately severe heart attack. But in those first few minutes also, I must say, two or three things took place that I think deserve comment. They've been published earlier, but my own memory and account would be as follows: Within minutes he assembled his staff, which then consisted of Walter Jenkins, George Reedy, and several others. He pointed out that he wanted to see Senator [Earle] Clements, who at that time, I believe, was a senator from Kentucky. He was already planning how he would have his position as majority leader covered during his convalescence.

Though I don't know the details, Senator Clements was to move into the position at that time. I only met Senator Clements a few times. I later knew his daughter, Bess

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Abell, quite well. But Senator Clements was, in my judgment, a rather remarkable man with much human understanding. I recall that he went to see Mr. Johnson many times. Later I was taking him somewhere in my car--this is some weeks later now--and he asked me to stop. He said, "I'll be back in a moment." He went in a ten-cent store and came back with toys to give to me to take home to my children. I say this because I think he was the right man for Mr. Johnson. He did many things that perhaps, left undone, would have worried Mr. Johnson.

So the point is, Mr. Johnson moved immediately to see that the order of business of his office was carried out through his staff and others that had been associated with him.

Secondly, his wit comes through many times when you deal with him person to person. I've always been distressed that his humor did not show too much in television and press activities. But person to person it was, I always felt, a very incredible kind of wit that deserves a historical notation. For example, there he is, having taken care of his business, and accepted the fact he has had a heart attack. He has the problems of convalescence to worry him and so forth. But still that same night, in the process of getting his thoughts in order, he talked with Lady Bird. Mrs. Johnson, I believe, was on his right and I was on the left. Mr. Johnson said, "What happened to those suits I ordered that were tailored for me?" Mrs. Johnson, in her typical way, soothing him, I think said something [like], "Well, let's don't worry about that now. They're all right." Something of this sort. And his response was, "Well, send them all back except the black one, because I may need it." But he said it with a smile at the time. His idea was, "I bought all these suits and I may not need but one."

All that I've just said took place within a few minutes. When I felt that he was comfortable, and stable, and that he had accepted his diagnosis and was talking with others, I still had Mrs. Johnson in mind and noted that she was across the hall in a room. So then I go to talk with her. My question, as I recall it, was, "Do you understand what is going on here now, Mrs. Johnson?" Her response was, "No, I do not," whereupon I sat and talked with her at some length about what the problem was and what we were doing about it. I've always felt that this was the beginning of our close friendship. A doctor

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always wants to talk to the family as quickly as possible. Sometimes, however, family members are in another part of the hospital where instant communication is not possible. But Mrs. Johnson was there in the room across from him, so I was able to talk with her as soon as it was safe to leave him. [So] this early relationship where, as quickly as I could, I was beginning to discuss the problems with her, got us off on a very good footing. I told her all I knew and our plans about handling the problems. I did all I could for her peace of mind at the moment as well.

So the two points that stand out are: that it was fortunate that the diagnosis could be clearly stated as quickly as possible, discussing the problems with Mrs. Johnson, and moving from that position to have discussions with them together. We then went through the period of convalescence in a very good relationship.

B: Did Mr. Johnson on this first day seem worried or frightened?

H: No, I would say in those early days that he did not seem frightened to me. I think in the first hours and days he thought about, "How do I get my job carried out, and there are matters that are important to this country that I was dealing with that must be done," and that he busied himself getting this done. And of course, in typical Johnson fashion, we steadily converted the entire floor into a working arena.

I might say that when he first came into the hospital that he was on the sixteenth floor, I believe. Of course, he's a tall man and the bed was not long enough for him. So we had to consider how to get a big bed for him. Then we wanted to get him on up to the seventeenth floor because it could be organized a little bit better for his particular needs and functions. I recall that I planned that we would have the new big bed arranged on the seventeenth floor and that at the right time, after several days, in order to allow his circulation to stabilize and his blood pressure to return to a good level, that we would move him from the sixteenth floor to the seventeenth floor in order for him to have better facilities, a better bed and things of this sort.

I remember staging this with what I thought was the greatest of care. I had every elevator just perfectly timed. There would be no problem; we'd up go one floor. Then I

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recall that we got in the elevator, and the electronic system had been rearranged so that we started to go down. This was a total surprise to me, because I had talked to every soul I knew to be sure we went *up* one floor, at the time I wanted it to go *up*. So for a moment he said nothing, and then on the way down, after going about six floors down when he knew we were trying to go up, he wanted to know pretty emphatically where we were going. I learned a little more about him then, in that any kind of little problem would certainly be looked at very carefully by him, and that he was one that paid attention to detail. He tolerated it quite well and chuckled a little about it.

So then we moved up to the seventeenth floor where he had a better room. And then people like Juanita Roberts, and Mary Rather, and I think Ashton Gonella was around some then, and Willie Day [Taylor] and quite a number of people of course gradually moved their offices, so to speak, out to the hospital. The staff, including Walter Jenkins, and George Reedy, and Bill Moyers, were frequent visitors. In fact, I guess they did a lot of their work from that floor.

One might ask, why did we let a man with a heart attack function this way? After all, the rule of the day then was to have peace and quiet and no problems. Well, in my judgment, as a physician one has to balance out a lot of things. Your objective is to get peace and quiet for your individual patient, not to have general rules that you apply to every individual patient. And looking at him as an individual, he would have less nervous tension, less problem, if he could with reasonableness get a job executed rather than sit and be worried and concerned that something was not being done. So for him as an individual, I always weighed out the advantages of doing something versus not doing something that would fit with his individual personality. I'm sure you know I've had much advice over the years that he should not do this, he should not do that. Whereas some of these rules may be good as general rules, the objective in good care for any patient is that you must individualize it. Specifically in the care of a heart-attack patient, one must make a choice--does it provide more peace of mind to get a few things done than to sit and worry and stew about the problem? So many of my decisions over the years have been based on my intimate knowledge of this particular man's personality.

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B: Did you discuss this kind of thing with him at that time, explain to him?

H: Of course. Oh, of course. Every step of the way, he knew everything, complete discussions of the entire problem. My view was then, and still is, that you answer questions as they ask them. I answered all his questions during the early period. After a few days I began to probe how far I should go in the education of the man as to what has happened to him. After a few days, in his case, I went over this in great detail. Even so, most patients do not understand the explanation in the beginning, and as time goes on you discuss it again. But at all times, at that point, 1955, I tried to function with the idea that we would achieve total rehabilitation of Mr. Johnson. I think today, some fourteen years later, it is common knowledge that we now insist upon most patients with heart attacks returning to their former work. In 1955 I had much advice from many people that obviously a man with a heart attack could not return to being majority leader, with all of the demands placed upon such an individual.

B: Was this kind of advice coming from your fellow physicians?

H: Fellow physicians as well as notes from letters and laymen of all varieties. But that was somewhat the feeling of the country then about an individual who's had a heart attack. I should be thankful that I had worked with Dr. Paul White, whose mission in life, I think, was to rehabilitate people with heart disease back to their former work. So it was pretty much second nature to me that I should rehabilitate Mr. Johnson back to the job he held, namely majority leader.

B: When did you come to the conclusion that the heart attack had run its course, if I'm using the proper language here, and that this kind of rehabilitation could begin?

H: Well, as a matter of fact, I think since we know that the majority who are in a hospital with a heart attack are rehabilitated, that one can start on the positive side in the very beginning. So I was on the positive side at all times. There was a greater chance that he

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could be rehabilitated than not. Then as days and weeks went by and the complications we look for did not occur, I felt stronger and stronger about his rehabilitation. I think that this approach was of great value to Mr. Johnson because he was an active man, and was at that time in an extremely important position. He loved the position as majority leader. He was right in the thick of things. He's an activist in the sense that he wants to be on the firing line in any kind of activity. The idea that he could not return to an active role would have been, I think, a very serious psychological problem for him.

As time passed, like many patients, he began to feel, "Well, here I've had a heart attack. Will I be able to return to work?" I spent many, many hours discussing this with him. As many people do, he had periods of depression. That is not abnormal, because many patients experience some depression. But it did require some time and much discussion, and progressive, step-by-step active rehabilitation for him to counter the depression. This continued later when he left the hospital and went to his Washington home. His home then was on--I've forgotten the name of the street now. [Thirtieth Place] Not The Elms, of course. It was a nice but not elaborate home.

After [his] discharge from the hospital I visited him twice a day and stayed some time with him. Later I went with him to the Ranch. Incidentally, I've always felt that he had his greatest peace and rest at the Ranch. He was deeply rooted to that area of Texas. He got peace of mind there that I don't think he got anywhere else. I flew to Texas with him, Mrs. Johnson, the children, and the beagle that he first had. All of them were named LBJ, including the beagle, which is L--the B was Beagle.

B: That was Little Beagle Johnson.

H: Something like that. All the other dogs were descendants of that beagle. They all became very famous dogs.

I stayed with him at the Ranch and met his doctors there. There were three of them involved. We felt that in Johnson City we needed some doctors from around the area, Fredericksburg, Stonewall, and Johnson City. I met with them, discussed all the problems. Then I will recall vividly--he stood in the back of the house and waved

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goodbye as I got in the car with his good friend, the manager of his television station, Mr. [Jesse] Kellam, who then transported me back to Austin.

I'll pick this part of the story up later, but from the time of admission until his convalescence at the Ranch, he was still actively running things through his staff there at the hospital. He would have periods where he wondered if he could return to active leadership. If I made any contribution at all here, it's that we did seem to have a good relationship and one that, along with Mrs. Johnson, developed into a friendship of trust. As we worked through his problems, the constant push toward rehabilitation and return to the Senate was foremost in my mind. Within this context many nonmedical things happened that I think are of interest, but I would not want us to lose sight of the fact that in 1955 the idea that someone with a heart attack returning to an active role as Senate majority leader was not generally accepted. Somehow, however, we were able--with his tenacity and his desire to be active, even though punctuated with periods of doubt as any normal person would have--to accomplish the goal of total rehabilitation.

I remember when Eisenhower came to visit him. Johnson's attack was only a few days before Eisenhower's. As I recall it, Johnson was still in the hospital when Ike had his heart attack out in Colorado. It might be worth checking on this--of course I don't know with certainty, but it's my understanding that there was a letter written to Johnson by Ike, who was then in Colorado, who left it unsigned, because Ike's heart attack occurred sometime between writing it and signing it. And I think that might be a very interesting thing to check on.

B: What was Mr. Johnson's reaction when he heard about President Eisenhower's heart attack?

H: As I recall this, it was one of concern and regret but not one of great anxiety that it could happen to him again. He felt close to and respected Eisenhower. He was greatly concerned that he was ill, and I'm sure felt the load of the Washington activity even more so, because during those years, Eisenhower and Johnson worked closely together to achieve major legislation.

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Nixon I recall visited, also. Many, many people did. Mr. Johnson was always quite kind to me in wanting me to be there and meet the people who visited him in the hospital.

Now to interject a little humor and reveal a little of the Johnson "needle," one of the things I remember then was that I used to discuss with him that he really should not dwell on little problems too much. When a fountain pen didn't work, or something of that sort, it could cause him as much momentary frustration as some large major problem. In fact, I really always thought he tackled and handled major problems, even crises, better than he handled little things that plague most of us. I discussed this with him. Sooner or later something would happen that was of small consequence--like the elevator going down a few floors when it should have been going up. He didn't comment much about that one. But I remember a fountain pen didn't work, and I would always try to interject that this, after all, wasn't too important. I would say, "Don't worry about little things." Well, he, of course, has a tremendous memory and is a very brilliant man. He tucked away my discussion with him, that he should not worry about little things. Well, this is a prelude to demonstrating his method of winning a battle with me to show that I, too, worry about little things. We all do, I guess. But he wanted to show me, I think, that I too worried about little things, not just him.

This event followed a press conference that was held in his room. I was there, and a few questions were asked. Then, if you'll recall, the insignia of the navy [for my rank] is an oak leaf, which is attached to the collar. At a distance it looks a little bit like a star. Well, when the report came out in the Washington paper, some reporter had misinterpreted the navy insignia as a star and reported, "Rear Admiral Willis Hurst says" the following thing. Well, he knew that this would be a little bit irritating to me. So he called me up to the room and he said, "You know about these little things now. You're not supposed to be upset about little things. I have something I want you to read that just came out in the papers and I want to see your reaction to it." So of course I read the report and had a mixture of embarrassment, frustration, wondering what could I do to stop this. And of course he just thought this was the funniest thing in the world. Then he said, "Now you remember about those little things? This is really not very important, you

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know."

So I said, "Mr. Johnson, you've got to stop these reports. This is embarrassing. I am not a rear admiral," you know. He said he would try. Later he called me to his room and said it had been stopped in all papers except the *Atlanta Constitution* and the *Journal*, my hometown papers. So it appeared in the front page of my hometown newspapers in relatively large print, "Rear Admiral So-and-so has said" the following things and so forth. So he taught me a little something there. When you can't control everything around you, you begin to take things in stride a little bit, you see.

Now, to show you how he would get on this kind of kick and stay on it: I got a call to come to his hospital room. He said, "I want you to meet Secretary Anderson." I believe Anderson was deputy secretary of defense. I recognized that he had obvious enormous authority over me, let me say that. So Mr. Johnson said, "I know how you've been worrying about being made a rear admiral. Despite your best efforts, you're still worrying about it. I thought maybe Mr. Anderson here might be able to break you a few ranks because he has the authority to do so, and I've asked him to see if he can lower your rank back to your desired rank before I leave the hospital." So you see, he was thinking about my worrying about little things days after my reaction to the rear admiral story.

Then, as I say, we took him home and I visited him many times there and then went with him to the Ranch.

B: Excuse me. Before we get out of the hospital stage, were any other physicians called in while he was still in the hospital?

H: Oh, yes. By all means. Before I say that, I might add too that back in 1955 we had some evidence that smoking was not good for the lungs. There was less evidence it was harmful to the heart. It was still debated, still is today in 1969, but I personally don't think there's any real question about it being harmful. Because he had a history of a little bronchial trouble, I felt he should stop smoking and really told him only once that in my judgment he should stop smoking. And believe it or not, he did stop and has, to my knowledge, never smoked again. Again, it was a very positive statement that I felt we

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had enough evidence for him to stop smoking, and that since several days had elapsed in the hospital when he had not smoked, this was an ideal time to stop, which he did. And he's never smoked since. (JWH note: See later discussion. He returned to smoking one and a half years before he died in 1973.)

B: Were there any other suggestions from you for changes in personal habits, drinking habits, for example?

H: Well, of course he was moderately obese then. We started a weight reduction program in the hospital, which he has carried out to varying degrees ever since. He was on a low-fat, low-cholesterol diet. He was, after a few days, permitted to sit in a chair and begin simple exercises.

B: Is this exercise or therapy?

H: Just passive exercises, because some people in bed or in a chair don't use their full range of motion. It is important to keep the legs moving to prevent little clots in the leg veins and things of this sort. All this was done, with a steady view of rehabilitation.

Of course, many of my colleagues there in the navy also saw Mr. Johnson. I should point out that Dr. Lawn Thompson, an old friend of the family who I believe had seen Mrs. Johnson as a patient, was there for a moment to comfort the family during this time. Then some days later we did notify two individuals at the Mayo Clinic who later were to become my very closest friends, Dr. Jim Cain, who was from Texas and had known Mr. Johnson for many years, and Dr. Howard Burchell. Dr. Cain and Ida May, his wife, and the Johnsons had been very close. Mr. Johnson had periodically been to the Mayo Clinic and had one of his renal stones diagnosed there. So although Dr. Cain's interest was gastroenterology, as a family friend he was called. He brought with him Dr. Howard Burchell, who is really one of the nation's greatest cardiologists and one I respect very much. We do a lot of work together now (in 1969). As a matter of fact, he is now editor of one of our scientific journals, *Circulation*. He is a man of great renown and one

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that I respect and feel close to. Well, it was Johnson's heart attack that began my friendship with Jim Cain and Howard Burchell.

B: Did these other man have any serious criticisms of your proposed rehabilitation technique?

H: Well, as far as I know, not at all, but I suppose in all honesty you should ask them. But I would feel that we were all three of uniform mind in this. Jim Cain and I worked very closely with the Johnsons over the years, and we have been extremely close. I don't believe Dr. Burchell saw Johnson again. I think one of the by-products of an illness, of the Johnson illness, is that I've met so many people and have enlarged my own circle of friends, and Jim Cain would be one of the very closest. He visited me here in Atlanta just about a month ago. We were to find ourselves involved in many things related to these problems as the years went by, and worked at all times with virtually complete unified opinion.

Things worked out nicely. Although I was interested in all of medicine, my most intensive training was in cardiology and Dr. Cain's interest was in gastroenterology. It turned out that, over the years, Johnson needed both of us. I think we have been a very effective team, and worked closely with George Burkley, and Jim Young, and Bill Voss, and Lay Fox, and many of those that were involved in the White House dispensary area, which is the quarters for the White House physicians there. All of this worked out very nicely.

B: Those days in the hospital, as Mr. Johnson began to resume his activity, did you have to kind of monitor that? Did he have a tendency to want to do more faster than you thought he should?

H: No, I must say in his rehabilitation things worked nicely. I would emphasize again that I believe this man decided he trusted me during our initial meeting. And I would put it at one specific point--when I reported in a clear-cut fashion that he had a heart attack.

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Therefore, as we moved along, I felt at all times that he would move and respond pretty much in the manner I wanted him to.

B: Did you work with the staff members to explain to them what you were doing to make sure that they kept things going?

H: Oh, yes, and made again many new friends there with the entire staff that I learned to respect and enjoy, and over the years I became related to in so many ways.

B: Did this activity tend to disrupt the normal workings of the hospital?

H: Well, that's a hard question. Obviously, when someone of this stature is admitted to a hospital it creates a new environment. For example, it was not customary for every patient to have their staff move in so that work could be continued. On the other hand, it's very clear that some of the functions of the government had to be carried on at that time. In his position as majority leader, he obviously had things he had to do that all of us don't have to do. So in that sense things were different. In those early days I was asked to make arrangements for many things. So I was intimately involved with a great deal of activity, and I must say that the CO of the hospital recognized this-- I'm sure he'd dealt with many similar problems before--and was extremely cooperative. Admiral [Gordon B.] Tayloe and Ferguson (I think he was an admiral also) were involved intimately.

B: Okay. All we have to do is just check the record of [inaudible].

H: Right. Tayloe and Ferguson were in the front office then. They were extremely cooperative and encouraged me to handle as much of these problems as I possibly could, which I did.

B: I was going to ask if any other patients suffered because of the involvement here?

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H: No, because the staff was clearly large enough to handle this kind of problem. So I would say emphatically no to that question.

B: What was Mrs. Johnson doing during all of this? Of course, she moved into the hospital.

H: She moved into the hospital. Each day I spent time discussing the problems with her. We frequently had our meals together. She was perfectly aware that we were attempting to move ahead toward rehabilitation during all this time. It was during these times, of course, I made friends with Luci and Lynda and the family. Sam Houston, Mr. Johnson's brother, was a frequent visitor. Mr. Sam Rayburn, of course, was by. Many people were by to see Mr. Johnson.

B: Including Mr. Johnson's mother, I believe.

H: Including Mr. Johnson's mother, who was a beautiful gray-haired lady. I met her only the one time, which I regret, because she was destined to die a few years later.

Well, I think this pretty well summarizes the experience at the hospital, the Ranch, and the beginning of return to active work.

The trip to the Ranch was in Mr. Wesley West's plane.

B: That's Mr. West of Houston?

H: Yes, I believe so.

Later Mr. Johnson came to Emory here in Atlanta to see me. I had been discharged from the navy and had returned to my position at Emory.

B: How much later, sir?

H: I had been in contact with his doctors there. Then he was to come here before Christmas for an exam. I found that he was doing quite well. He was emotionally very much on top of things by then and feeling that he would be right back in the saddle, which he was by

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the following January.

B: Let me get the date straight here. This would have been in December of 1955 that he came--

H: Something like that.

B: --here to the Emory Medical School for examination.

H: That's right. To be examined, right.

B: Were you out of the navy by then?

H: Oh, yes. Oh, yes. I had returned, as I recall, around September.

B: Is that the normal expiration of your duty time?

H: Yes.

B: Mr. Johnson had nothing to do with that?

H: Oh, heavens, no! Oh, heavens, no! No, I stayed on in Washington in the navy for a few months after he was at the Ranch. But to clarify that point, may I state that I had been in the army and was discharged a captain. I was very fortunate to be in a very wonderful hospital, Fitzsimmons General Hospital. After being there nearly a year and a half, members of my family had a very unfortunate accident involving my wife's mother, her sister, one baby, and two older children. The mother died and the little baby died, and the sister was injured very badly, including a brain injury. So I had to fly home from Denver and stay with the family. The sister was still unconscious. She was in Crawford W. Long Hospital in Atlanta. At that point I felt I needed more leave and my CO back at

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Denver pointed out that it would be possible for me to be released under these circumstances. In fact it was easier to do that than to get extended leave. And I was released.

Then as time passed, of course, the Korean War came along and new criteria were established regarding the return to service. So, because I had not completed my first tour of duty, I was recalled. I was vulnerable because I had entered the army when I was a sophomore in medical school in the ASTP program. I was not needed in the army and was assigned to the navy. [In] the intervening years I had specialized in heart disease at the Massachusetts General Hospital.

So I was drafted into the navy and, because I had had cardiology training, was placed at the naval hospital in Bethesda. So my naval time went beyond approximately a year and a half also, so that the two tours of duty together counted up to a total of approximately three years.

B: Then the check here at Emory in December of 1955, this was just a routine kind of check?

H: Routine check, and he was doing extremely well.

B: Did the family come with him?

H: Yes, Mrs. Johnson did. I remember George Reedy and Juanita Roberts. I don't recall other members at the time.

B: Did you make arrangements then for periodic checks?

H: Yes, but not in any specific way. By then a friendship had developed where I would feel certainly free to pick up the phone and talk with them about many matters. And they would pick up the phone, especially Mrs. Johnson, and discuss problems with me. When I would for some reason be in Washington for any other reason, I stayed with the

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Johnsons. I might add that during the following years, I visited them in their home in Washington and at the White House. Except for maybe once or twice the visits were made for other purposes, but this would be the time I would also see and check him.

B: Did you need to be constantly watching such things as diet, weight control, rest?

H: Yes, but not to an obsessive degree that made him unhappy. He was doing extremely well, and incidentally, he had no difficulty with his heart during the years as vice president or during the years as president. We remained in constant check of many things, and offered advice all along that we hoped was good regarding weight, activity, appropriate rest, things of this sort. But never to any rigid degree. A doctor has to blend his suggestions and recommendations with the personality of the patient. Looking at it in general, as far as his health is concerned, I think the record will show that he has handled this reasonably well, though at times we would worry he was a little too heavy or was under too much stress--he's one that fills up his days regardless of whether he's president or not. He is one that goes day and night. As a matter of fact the day he became president, I issued a statement that I didn't know anyone who could do more and work harder and be more active and accomplish more in twenty-four hours than Mr. Johnson.

B: That may be an answer to the question I was getting ready to ask, which was, did you find him health conscious or health aware, that is, aware that he had to take a certain amount of care of himself?

H: Well, I think he went through this, as most of us do, periodically. He would go up to a point where his weight would begin to worry him, and this, too, became an interesting "little thing," because I wanted him to stay as lean as he could. Well, it got to be a very interesting encounter when I would arrive on one of my many visits with him. If he had gained, he took the offensive. He would say, "Willis, you've put on a little weight, haven't you?" and he wouldn't get off the subject. And of course I had. So before I could say a word, you see, he was attacking the fact that I had gained a few pounds and then it

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would take some time to get back to the fact that maybe he'd better look at himself as well. He'd go through periods of having a contest with Lady Bird over who could lose the most. He would needle me and others, if we had gained. By then he would be losing, and he would be pointing out to others now they had gained.

B: Did Mrs. Johnson keep kind of a watch on this kind of thing?

H: Oh, she did very well, would leave him notes periodically. Mrs. Johnson, of course, is an extremely capable, skilled, devoted person and I think has contributed a great deal to this very effective team of Johnsons. Her maturity and intelligence and, I would say, her understanding of people and her joy in living was a very great asset to him, and I must say to all who were around her. This I think was reflected in her activities in the White House.

B: You mentioned that she would call you occasionally. Were these generally about specifically medical matters?

H: Medical matters; periodically some question on diet or things of this sort. But by then I had, I feel, a close relationship with them. She would call for me and my wife to come to the Ranch for a weekend, or could to come to Washington, that there was something rather interesting there that they'd like for us to see. So some calls were about medical matters, and some were not. If she came through Atlanta, I would go out to the airport and meet with her.

Then another interesting thing happened. I was sitting here at my office one morning. This would be maybe 1958. Sam Rayburn had been ill. And incidentally, I built my home here in Atlanta before I entered the navy, and rented it when I was away. Fortuitously, I rented it to Sam Rayburn's niece, Mrs. Juliet Rayburn Lowry. The Lowrys happened to be good friends of Mrs. Ruth Strange, who was my executive secretary for many years. Therefore, Mr. Sam would visit here in Atlanta and stay in my own home, and of course the Johnsons and Mr. Rayburn were very close friends.

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Once I was sitting here about 1957 or 1958--we can check the record, but it was the day of Sam Rayburn's funeral [November 18, 1961], and I got a call--

B: Sam Rayburn's funeral would have been in 1961, I think.

H: All right. So I was sitting here, as I recall, just before eight o'clock, and I got a call from Phoenix, Arizona--it might have been Santa Fe--and it was Mrs. Johnson--no, the first one on the phone was Mr. Johnson. He said, "Bird wants to talk to you." She came on the phone and said, "We're on the way to Sam Rayburn's funeral, but my brother in Santa Fe, New Mexico, Tony Taylor, has had a heart attack. Can you come?" I said, "Of course, I'll come." "And then the other question is, what do we do about the funeral?" So my suggestion to them at the time was that Mr. Johnson go to the funeral, but Mrs. Johnson go to be with Tony, that her job was to be with her living brother. So Mr. Johnson went on to Sam Rayburn's funeral and Mrs. Johnson made her way to Santa Fe.

Then I was able to get a plane leaving about eight-twenty here, and fly first to Dallas, where I was picked up in a private plane by Warren Woodward, who was a close friend of the Johnsons. I flew on from Dallas in a private plane to Santa Fe and was there by something like one o'clock. As I recall it, I saw him, spent the night, and came back the next day. He too had had a heart attack, and I'm pleased to say that during the years since then he has had no problems from his heart. He's had other problems, but none from the heart. And he too was rehabilitated to an active life. He's the only living brother of Mrs. Johnson. He's Tony Taylor.

B: Sir, you have a practice here and rather large responsibilities at the Medical School. Did this kind of thing ever get demanding?

H: Well, my work in Atlanta has always been as a consultant and I have worked closely with many physicians. Working as a consultant, it has been possible to arrange my activity to fit the needs. Many of my patients are in other states and come from other states. Because my duties in the Medical School are large, I have a good staff. And since I'm

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devoted to teaching medical students and interns and residents, [I] make the best contribution I can to medical literature, which is also a form of teaching, and investigate as many new things as I can. Because of my setup, it's been possible to carry out the duties of the head of a department in a medical school and do consultant work and respond to calls from Mrs. Johnson and Mr. Johnson.

Later as he entered the vice presidency period, he went on many trips, as you know, to many parts of the world, and I usually went with him. I believe Dr. Cain went on one trip with him, but I think I attended all the others. This was a hard-working type of activity that took us to the seats of government all over the world. My job was to be certain that he and Mrs. Johnson and Lynda and the others had good medical care should it be needed. In addition, one must remember that it requires a large staff of people to do this kind of work. A physician has many duties on the trips, because he must attend the entire group of people. Everyone must remain mobile. A serious illness of anyone could cause a large problem.

Therefore, as I think back on all the trips that took us to Puerto Rico, Africa, France, Switzerland, Belgium, Holland, Lebanon, Iran, Italy, Turkey, Cyprus, Greece, Luxembourg, and many others, the healthiest people in the group would commonly be the Johnsons. Other members of the group would have minor illnesses that one has as a tourist. But I had to keep the members of the entire group mobile so they could be at the next place at the right time.

Now, I think the trips to Italy deserve comment. It was on the last trip to Italy where I think we might make some comments, because he was scheduled to go to the funeral of the Pope, Pope John [XXIII]. By then he was vice president. I had many conversations with Dr. Janet Travell, who was President Kennedy's physician at the White House, and she had collected the data also on the Vice President. So she would contact me regarding the trips and the types of injections that should be given, and simply alert me to this. And the Johnsons would ask me frequently to go on the trips with them. On this second trip to Rome, when we were to go to the Pope's funeral, he began to have a little pain in the back. It was not alarming at that time, but on the way over it was becoming increasingly severe. It became very apparent that this was kidney colic. I

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guess this would be 1961; it would be the first year of the vice presidency. It would be 1961 [1963]. Therefore we had to relieve his pain while he went through the impressive, but long, ceremony of the burial at the last requiem for Pope John. He did go through this in great pain and of course you can't be taking medication every hour under these circumstances. So that during the ceremony, he was in considerable pain. That night he had a great deal of discomfort. On the way back from Rome to Washington, I made arrangements by radio for him to go to Bethesda Naval Hospital for a thorough study about his renal stone. This was later to play a more important role, you see, as the years went by.

I think again on some of the wit that we might bring up, especially on some of the trips when we would be in the air for many hours and in various types of facilities at night. As his physician, I was sometimes afforded the privilege of being in the room adjacent to his and would have breakfast with them frequently. But Mr. Johnson was not a man, in my judgment, who demanded the finest food. His likes and dislikes in food obviously went back, as it does with all of us, to our early years of life, and he had great preference for good Texas food. Away, the fancy food did not appeal to him very much. As a matter of fact, he frequently took his own canned soup and his canned spinach, a couple of his favorites, with him on the plane wherever he'd go. If we were out in an area where it was exotic food, he would, for example, have Paul Glynn, his aide, be off in some little room with a sterno can warming up his soup and spinach. Somehow this could get served to him without offending a large number of people that had prepared all the exotic food.

I remember once in Beirut, Lebanon, I think it was the Phoenicia Hotel there, the day's work was done and he was still finishing up some of his work and asked us, "Why don't you go on up and order your dinner, and I'll be up in a moment." So we did. Then in a little while he came in. We had already ordered. So the maitre d' and all the waiters and waitresses were just bowing and scraping to the Vice President, ready to give him the finest of food. Paul Glynn pulled out a can and said, "Would you warm this up for him?" whereupon they looked at it and took it in the back. They heated up the American canned soup, and put it in the most beautiful silver container you can possibly imagine and

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served it to Johnson with great fanfare, as if it were the delicacy of the world.

B: I would think that for medical reasons alone, food and water would be watched on trips like that. Did you take your own water with you, for example?

H: Oh, yes. But that's not unique. I think if you stop and think, that's not really unique to a president. Many travelers do this when they visit a country. And he had his own preference for water. I've forgotten which one it was, in a white label with blue letters on it, and I think it was from Texas, I'm not certain of this point though.

B: Texas bottles a number of mineral waters.

H: I think so.

B: I have a question in here that verges on the impertinent, but someone is bound to notice it and ask. Is all of this activity on your part donated?

H: I would say. . . .

B: Obviously you have a personal relationship here, but--

H: Yes. Yes.

B: --to put it as bluntly as possible, do you send bills and get paid for this?

H: No. No. Let me enlarge on that.

B: Obviously--

H: Of course, when I was in the navy, no. Then since then I would say no, with maybe two

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kinds of exceptions. On the trips, there was a per diem that was given, something of that sort. But that would not be rendered as a professional bill. When I was the physician for the entire party, there would be a per diem allowed for that, but that is not like a professional fee for service.

Then on the hospitalizations during his presidency, they would pay expenses for me to fly up. On the first one, I believe a small bill was rendered at the request of Dr. Burkley, who had at his disposal some funds for consultation fees that were allocated for such a purpose. As I recall it on the second one, I don't believe there was one. But in my frequent examinations of him, no bill was rendered. Ninety times in a hundred when I'd visit the White House, I would examine him early in the morning or late at night. He's one that would like to sit and talk and do a lot of his work from twelve midnight to 2:00 a.m., and I spent many nights sitting with him, occasionally talking. I believe they paid expenses such as plane fare when specific things were requested, such as, "Would you meet with us to make a decision regarding whether he should run?" to having a formal examination, one that would be signed and released prior to running for president or something of that sort. But the only bill, specific bill, rendered was a small one, a standard consultative fee, requested or pointed out to me by Admiral Burkley, who had had consultation funds at his disposal.

B: To back up a little in time--

H: I must say, by 1956 and [especially] now, I would have great difficulty even conceiving of sending a bill, just as I would not send a bill to my next door neighbor. I felt, and I believe they felt, that we had established a very close relationship. Accordingly, I stayed at their home whenever I was in Washington for committee work or some other reason.

B: To get back to that time you just mentioned, 1956, the year after the heart attack and the year of the Democratic nominating convention and the presidential election, did either of the Johnsons ever discuss with you the possibility of Mr. Johnson becoming president at that time?

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H: This was 1956, you're asking me?

B: 1956, yes sir. There has been some speculation as to when Mr. Johnson's presidential ambitions developed.

H: Well, I don't know about that. I suppose that would be up to him to say. But many people were discussing this at the time of his heart attack in 1955. And as I recall it, the Sunday following the heart attack there were many newspapers in this country that were already running articles about it. This was some sort of a peak period when it was very clear that he was a man that could be considered presidential timber. A lot of that hit that Sunday following the heart attack in 1955. Now, how that originated, of course, I don't know, and in order to really be certain about that I would want to pull out those old newspapers. But that is my recollection. I don't know what he thought. I know that Mrs. Johnson frequently said that they were not working for that. I can recall that. But all the elements were there. It would be virtually impossible, I think, to look at his enormous talent and capability as majority leader, and not consider him as presidential timber.

I think I should relate a little bit about the day of the assassination.

B: Let me see. Is there anything in connection with the events of 1960?

H: No. This was when he was majority leader and the nominee was to be Johnson or Kennedy, is this [correct]?

B: Yes, sir, that would have been in 1960.

H: Right. Well, I remember my own reflections at that time, namely that he was sticking with his job as majority leader right down to the wire and felt he could not actively pursue the nomination at that time. As you will recall, at least as I recall it, he really did not make his move for the nomination until very, very late. I don't know just what that

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meant. I think people know him as a superb politician, but he's also one of superb loyalty to the job being done, and I would think as a politician he started late, and that he knew it.

B: At any time in there, did either he or Mrs. Johnson discuss with you whether or not his heart could stand the presidency?

H: No, they did not. No, they did not.

B: Was the rehabilitation going so well that this was a question that was not likely to be asked?

H: Oh, yes, I mean I think by then it was very clear he was functioning very well indeed.

B: You mentioned that Mr. Johnson personally and as a patient needs the work as a part of rehabilitation.

H: Yes.

B: During those years when he was vice president and had much less to do than the Senate majority leader has, did this adversely affect his health?

H: Well, I think that he had to adjust and I would think this was not easy. But I think he did it as well as anyone possibly could. I think he recognized the role that a vice president must have. I think he did the very best he could with that role. I know nothing of the interplays that were developing at that time, not one thing, interplays between various political leaders and things of that sort. I think he wanted to serve President Kennedy to the best of his ability. I never heard him say anything but the highest praise for Jack Kennedy, and he felt he was superb. As far as I could see, the relationship between these two men was excellent, and that he wanted to serve him. Knowing his dynamic approach to everything, I think it's to his great credit that he could shift from an extremely active

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decision-making role as majority leader to the role of vice president.

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B: Sir, during these years when you were so close to the Johnson family, did you ever see Mr. Johnson's bad side or in any bad moments? For example, some people have said that he has a very severe temper or that he has a tendency to have moods, be up and down. Has any of this ever come to your notice?

H: Well, as a physician, I must say that I have observed several aspects to Mr. Johnson's personality. First of all, I think he is a witty man, as I've indicated earlier. I think he is extremely intelligent. I think that there is no one who, when working person to person, is more persuasive, literally no one. He is a people man, meaning by that that he has learned most of what he knows by direct contact with people. Though he read some, I feel that he always had the view, "Why read this man's book? Why not spend an evening with the man?" On our trips he would be with people all the time, learning, working with them. I think his perceptiveness, his knowledge of human psychology, is incredible. Most of this, I think, he simply learned the hard way, so to speak. He would have many moods, and there are many facets to his personality. This I think no one doubts. I've seen him display the most compassionate side. I can recall times when, with him in the White House, he would reach over and pick up a phone to check on some sick patient in some distant city. A surprise call from the President would do a great deal for a sick person. I've seen him in anguish over seeing a hungry child in a foreign country. There's no question he has great compassion.

I've seen him frustrated because things were not going precisely as he had planned. He was one that, if there was a complex problem and it had numerous parts, he could tell you the area where it might go wrong. He might exert his influence in that area, because by experience he knew where the weak spot was.

I've seen him at times, quote, "ride the staff," unquote. This is common knowledge, or at least it has been reported many times. But I think what hasn't been said

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is that the staff also became so devoted and understanding that they knew this his anger was transient. There is a story--I wasn't there, but I will tell it to show you what I mean--he was taking George Reedy to task at the Ranch once, just ripping him up and down, and all the time he had a gift for him. He was really preparing the whole scene for the presentation of the gift. He was not angry at all. He knew that he at times displayed his anger, so in the setting of pretending to be angry, he was really getting ready to reverse his feelings 180 degrees with the presentation of a gift. So after a moment of, quote, "questioning the competence or ability of a devoted staff member," he was very prompt to sing his praises and show that he recognized his talent. How often this took place I do not know.

I think, in my own relationship, I do not recall any time where he carried this sort of thing to an extreme with me. At times he carried the kidding a little too far, but not in a derogatory sense ever. Just as I mentioned in the story that he shouldn't worry about little things at the time of the heart attack, he made great use of the fact that he knew I would be annoyed by having a little thing, like being mistakenly called a rear admiral, reported to the newspaper. Well, he could carry this pretty far, but at no time do I recall feeling anything other than a fond kidding, so to speak, between us. And I must say that I would kid him in reverse. In that relationship it was also fair game for me to kid or joke about a matter that I knew might make its point just the same. There was some truth to the kidding, if you understand what I'm saying.

B: Yes. What would be an example of that, sir?

H: Of my kidding him?

B: Yes.

H: Oh, for example, if his response to me when I walked in would be, "You've gained weight," then I would say, "Now, look, you know I know what you're telling me. You're telling me you're having a heck of a time controlling your weight. This offense is pretty

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obvious to see, Mr. President." Occasionally I suppose that he would say something to Lady Bird that might be misinterpreted by some around them who didn't know them well. She was very understanding, and I must say, I believe the two are very devoted to each other, and over the years I have admired their very warm relationship so very much.

B: These moods of the President, does he tend to go further in either direction than most people, toward despondency on one hand, ebullience on the other?

H: Well, I think he goes through full swings, but when you say "than most people," I don't know. A lot of people have different moods at different times. I think that he went through the full swing, and for myself, I think that this is far more exciting than for one who has no swings at all. I would say that this makes him a very interesting person, much more than a predictable, flat kind of responsiveness that can virtually be computerized. No, I think he was very sensitive to many things, sensitive to the slightest change in an individual. He was a brilliant observer of people.

B: Did he continue to worry about little things, even after he became president?

H: Oh, I think to a degree he always worried about little things. Not to an abnormal degree. I think that it does make sense that if you're in charge of something, or you have the responsibility of the majority leadership, or the vice presidency, or the presidency, it is a little hard to understand why in the midst of something, your fountain pen won't work. You've just built a jet or you've done this kind of complex kind of business, you see, and some little thing like that wouldn't work.

He loves gadgets, as I'm sure you know. He has television sets in his bedroom and in his living room, in the Oval Office, and in the little room adjacent to his office. He had many [television] sets, at times as many as three lined up so that he could see all three simultaneously, keeping two silent. He could determine by observing the image which one he really wanted to hear. He could play the buttons on the selector with great skill and could ascertain what was going on, while at the same time he could look at the

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ticker tape in his office. He would pull it out of the equipment in order to get the last line just as quickly as he could, and talking to someone else at the same time. In other words, nobody else could take into his or her brain as many facts at once as he could and synthesize them, and come up with an opinion. This literally was a dozen intellectual feats accomplished at once.

(Interruption)

B: Sir, in this kind of personal characteristic we've been talking about, is there any evidence of instability from a medical point of view?

H: Well, I would have to answer this question by saying an overwhelming resounding no. Now, if you asked me, did he always respond in perfect fashion, then I would say no, because that would mean that we expect a human to do inhuman things. I don't think any man can respond perfectly at all times. But I could say, although he has many sides to his personality, that the overwhelming thrust of the personality is one of activity, of getting things done, of being quite competent at getting things done. It would seem to me that if anybody watched him function, that this particular thrust was never lost, even though there might be areas of minutiae where one could say he didn't respond appropriately. So I would say, for anyone that accomplishes as much as he did, who thought through as many things as he did, that the percentage of times that he was not responding with perfection would be smaller than it would be for most people.

B: Is that kind of personality particularly subject to frustration?

H: Well, I would say in Mr. Johnson's case that he would be more frustrated during those years if he were not doing things. He is a man that has great ideas and wants to execute them. It would seem to me that it's almost a release of his frustration for him to be working on a complex problem that he feels he can solve. I think it's really true that the more complex the problem, the cooler the man is. I don't think there's any question about

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that.

B: If my questioning is getting inane, just stop me, but in this regard is the satisfaction for Mr. Johnson in working on the problem or in the solution of the problem?

H: I don't know that I could answer that. I think he got satisfaction in both. I think he looked with pride on so many things that he did. I also think he enjoyed seeing the job being solved as well, because my impression is, after all those years of working with problems, that within one flash of his mind the whole thing is outlined as to how the problem should be solved.

B: I was asking because you kind of wonder what the effect must have been on a man like that of the Vietnamese problem, with its enormous complexity.

H: Well, he certainly worried and was concerned. This was his gnawing problem. How could he solve this problem? Of course, I know no more about this than anyone else except to observe him try to get that problem solved. He receives information daily that is not generally available. In fact, he receives minute-to-minute information that the average citizen doesn't get. He is seeking and searching and praying for a solution that would be acceptable to the country. This problem, along with equal rights for all people, I think would be foremost in his mind. If anyone ever wanted to be the president of *all* the people, he does.

B: Sir, it's ten to twelve. Do you have to move on?

H: All right.

I might say a little bit about the day of the Kennedy assassination.

B: Glad to, if you have time to go into it now.

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H: I was in New York at an American Heart Association planning meeting when the news came on the radio and we were told that President Kennedy had been shot in Dallas. Then of course we all began to listen. Not known to me then, but later it was clear, Dr. Travell had already tried to reach me in Atlanta and had discovered that I was in New York. She wanted me to come to Washington (See *Office Hours Day and Night* by Dr. Janet Travell).

B: Did you hear those first reports that Mr. Johnson might have had a heart attack?

H: Yes, this was exactly what I was leading to. Reporters were saying on TV that he might have had a heart attack, and that he was holding his arm and a few things like that. So, not knowing that Dr. Travell had tried to reach me in Atlanta and had tracked me down to New York, I called and checked in and said, "I'm in New York. If I'm needed, this is where I am." Later it became apparent that they did want me to come by. So my plane left New York I guess maybe an hour after Mr. Johnson's plane left Dallas. It turned out that I landed in Washington at exactly the same time his plane landed. I listened to his speech, the very effective but short speech that he made at Andrews Air Force Base, while I was riding a taxi from the National Airport in to The Elms. By then he had moved from his first home to The Elms, which was truly a beautiful home.

So I arrived there at The Elms. He went on to the Senate Office Building, I believe. Mrs. Johnson appeared and--

B: To the Executive Office Building, I believe, next door to the White House.

H: The Executive Office Building, right. Mrs. Johnson arrived at The Elms. As I recall it, there were several people there, including Mrs. Liz Carpenter, and Horace Busby and his wife, Bill Moyers, Carter--

B: Cliff Carter.

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H: Cliff Carter.

B: Jack Valenti?

H: Jack Valenti, and I think Mary Margaret, his wife, was there. So I talked with Mrs. Johnson. Luci was there but Lynda was not. And then later--

B: What did you and Mrs. Johnson talk about?

H: Well, you know it's hard to say exactly, but she said something like this: "We will want everybody's help. We've got to pull this together and we'll give it our very best, and we want everybody's help."

B: Had you at any time during this made a quick check of Mr. Johnson's health?

H: He had not arrived, you see.

B: Oh, I see.

H: He arrived a little later. I think the records will show when. Really the only part of any examination then was to first identify whether the story of arm pain was true. The fact is he had had no discomfort whatever and he felt quite well indeed. So this was no time to embark upon an extensive examination at all. Such an exam was not needed, because he felt quite well.

B: You can tell a great deal just by looking at someone.

H: Well, obviously, yes. And the fact that he had had no discomfort at all and that the radio reports were erroneous.

As we sat in the den and discussed the events of the day, he did not wish to see

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television that recounted this. It was on television but he did not wish to see it. He had great love and respect for Mr. Kennedy, and it was extremely painful for him to see his face at that time.

B: Was he on the telephone during this time?

H: Not much early on. We were sitting down in the den, this group around him. He did look up at Mr. Sam Rayburn's photograph that was on the wall and said, as I recall it, "Mr. Sam, I wish you were here now. We need you," something like that. In the midst of it, he turned around and asked for the man who was apparently top official in the Secret Service. He said, "I want to tell you what Rufus Youngblood did today." Rufus was the number-one Secret Service agent and was assigned to the [Vice] President, along with Jerry Kivett who was assigned to Mrs. Johnson. They had several Secret Service agents that went on all the trips with us, but Rufus was assigned to Mr. Johnson. So Mr. Johnson was talking to the head of Secret Service--I'm not sure he's head of the whole thing, but the top-ranking officer there that night. And he said, "I want to tell you what Rufus Youngblood did today. After the shot, he threw himself on me and threw me into the floor of the back seat of the car"--which was an open vehicle--"and he threw himself on top of my body, thereby to protect me." He wanted this to be on record. Johnson is a very compassionate, thoughtful man, even in times of crisis.

B: Did the group there that night do any speculating about the reasons behind the assassination?

H: No, this was a discussion among friends, not a very active conversation I must say, just a few sentences breaking the silence.

Then later on I went on to spend the night with Horace Busby. He was intent in seeing no break in the stride of this country, and to handle this transition with great compassion and great skill. He was obviously beginning, at the end of the evening, to turn his thoughts toward his actions for the next few days.

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Let's see, there were one or two other points I wanted to make.

(Interruption)

B: Sir, at this time or during the transition there, were you approached about becoming presidential physician? That is, the White House physician.

H: There was discussion about this at that time. It was my feeling that I could best serve the President remaining in civilian life, so to speak, where I was seeing many patients, where I could do my best to stay alert to the changes in medical progress. I could serve his needs best as a consultant and advisor, not within the confines of the White House.

But later, after he was elected president--

B: After the election of 1964?

H: After the election of 1964, I was specifically requested to come to the White House for the weekend, where Mrs. Johnson had hoped that I might accept this position. The President spent a moderate amount of time in discussion regarding me becoming the White House physician. This was, I believe, in 1965. I badly wanted on the one hand to accept the offer. I certainly considered it a great honor. The question still came up in my mind, though, about how long a physician could remain effective and knowledgeable, outside the mainstream of medicine. So as a friend I wanted to do it, but in the doing, over a number of years--say four of them--I was concerned that my skill would change because I would not be in the mainstream of medicine. I pointed out that a well patient does not need a physician every day, and that a physician needs more than one patient to remain competent. Therefore--

B: Without denigrating the post, the job must involve an awful lot of just plain routine.

H: Yes, the physician there takes care of so many things in the White House. But the area

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where you would want to remain quite competent, as competent as you could be, would be in the area of cardiovascular disease, because that's what his problem had been earlier.

I had great respect for Dr. Burkley, who followed Dr. Janet Travell, who was President Kennedy's physician. Dr. Burkley had been in the navy a long time, and was competent regarding getting things done. I recommended that Dr. Burkley become the White House physician. Then [we had] the idea that we would have a couple of additional men in on sort of a rotation. They would also work out of Bethesda Naval Hospital, so they could keep their hand in, so to speak, but give White House coverage as well. Dr. Burkley was very skilled at making all kinds of arrangements and things of this sort. (Readers should read my other interviews for more information.)

So I was asked at that time to come permanently, and I wanted to very badly, but felt that I would serve him best if I remained as a consultant and saw many patients under many circumstances.

B: Did the Johnsons understand this? Mr. Johnson is known to be a mighty persuasive man.

H: Let me say that his skill was displayed at this, but that I continued to feel that I should not accept the offer. I recognized that he wanted it and that maybe my reaction would be against his wishes, but I felt in the long run that would be proper. And I might add to that, I'm a little embarrassed that this is on a personal note, but I would add that over the years I think that he too realized that this decision was proper. Because as we gathered to determine whether he could run in his 1964 election, the fact that I was not the White House physician, the fact that I still met with my colleagues in the profession and tried to do the best possible job in the field, the fact that I felt he was asymptomatic, was doing well, and could run, I suspect was heard and accepted far more than it would have been had I been inside the White House issuing a similar statement.

Then as time goes on I think he realized in many ways that this was a wise decision. In fact the last time I was with him at the White House--they were kind enough to have my wife and young son visit--we were going out in his car to the ship in the Potomac. On the way out he was sort of talking to my wife, but he said, "You know, one

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man doesn't need one doctor every day. It's not good for the man and it's not good for the doctor. A doctor needs more than one patient to remain competent." Now, I know him well enough to know he was trying to tell me that he recognized I had been right. So I said, "Well, you know, sir, this was what I really was trying to tell you some time ago." He said, to needle me, "Oh, you didn't care anything about me. You didn't want to come on up here. You had other things you wanted to do," and off in the typical Johnson manner. It had moved from an intellectual decision to the fact, "No, you didn't want to come up here and help me. I needed your help and you had other things you wanted to do. I know what you did." I knew that he really didn't mean the latter, that he was trying to tell me that he forgave me.

I think perhaps we will stop there.

B: It's probably a good stopping place, sir.

H: I hope--

End of Tape 2 of 2 and Interview I

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J. WILLIS HURST

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