

INTERVIEW III

DATE: November 8, 1982
INTERVIEWEE: J. WILLIS HURST
INTERVIEWER: Michael L. Gillette
PLACE: Dr. Hurst's office, Atlanta, Georgia

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G: --we've already got one on the earlier ones.

H: Well, one of the interesting stories that followed his heart attack in 1955 goes like this. He came out to see me at Emory University Hospital in the fall of 1955. He was doing quite well. At that time Dr. Paul White was one of the leading cardiologists in the world, and it had been my pleasure to have worked with him, so we were good friends. He was seeing President Eisenhower. Well, I saw Majority Leader Johnson then and indicated he was doing quite well. A member of the press obviously came by, and I indicated in the press report that his electrocardiogram had returned to normal. Now, I hasten to add that the cardiogram made then was normal, but it was not identical to the normal that existed prior to his heart attack. That can happen. It was slightly different to the normal, say, of 1954 but it was now normal. In other words, during the heart attack he went through certain changes in the cardiogram. These evolved back to normal, but that normal was not exactly the same as the normal was prior to the attack. But anyhow I indicated that his electrocardiogram was normal.

The next day, which was Sunday I recall, I got a phone call from my old mentor and chief and one I love very much, Dr. Paul White, who as I said was seeing Eisenhower. So he said on the phone, "Willis, is Johnson's cardiogram normal?" I said, "Yes, sir, it's normal." He said, "Well, Eisenhower has just called me and wanted to know why his wasn't normal." (Laughter) So that's sort of a side issue. Dr. White used to tell that story himself.

But I think, in reflecting on his heart attack of 1955, which was on the under

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surface of the heart, that I can say that the most important aspect of that entire event was not only getting him through the attack, but also the fact that I felt that he should return to the Senate. Now mind you, this was in 1955, at which time it was not commonly accepted that you continued to work after a heart attack. But as I've said many times, I again should thank Dr. Paul White, with whom I trained, because he was a firm believer in people returning to work following a heart attack. So I was of the same philosophy at that time.

G: What causes a heart attack of this nature?

H: No one really knows the cause of a heart attack. It's due to disease in the coronary arteries that we call atherosclerosis, and we don't know the exact cause of that process. But it's a process in which the inner lining of the arteries becomes thickened and rough and gradually blocks the flow of blood in the arteries. You have to have a normal amount of blood flow in the coronary arteries to nourish heart muscle; you have to have a blood supply for heart muscle. So this process, atherosclerosis, blocks up the arteries so that the proper amount of blood cannot reach the heart muscle, and if that blockage occurs in a large enough artery over a short period of time, then there will be inadequate blood flow to a segment of the heart muscle. Now, the process, atherosclerosis, starts early in life and gradually builds up [in] varying speeds in different people. Then finally in some people a clot forms and obstructs the flow of blood in the artery. That produces the heart attack.

G: In this kind of heart attack does the heart stop pumping, is that what happens?

H: Well, not necessarily. Most of the time, no. It damages a segment of the heart muscle, and that part of the heart muscle may not function. But the majority of the heart muscle is still able to contract. Obviously the bigger the heart attack, the more pumping ability is damaged. We classified his 1955 attack as a moderately severe heart attack on the under

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surface and lateral surface of the heart. Of course, what we did for patients back then was different from what we do for patients now. That would be 1955.

G: Let me ask you, in your own mind at the time what sort of recovery did you envision as being possible?

H: Well, I operated under the heading that he would recover and would return to full activity. And as I say, I'd been influenced in my training a few years earlier by Dr. Paul White; that was his approach and that was my approach. I think that was an extremely important point because, at that time, I had much advice from all over that he couldn't possibly return to the active life of majority leader, which he worked at, as you well know, morning, noon and night.

So I guess you'd call it the process of a) doing what we could at that point to help him over the acute aspect of the problem, and then b) moving on to the rehabilitation back to active physical and mental activity.

G: What would you say, looking back on it, was the phase of the illness that was the most critical?

H: Well, I think in the beginning there.

G: He was conscious when he got to the hospital, wasn't he?

H: Oh, yes, he was conscious, by all means, but the blood pressure was quite low and we did have to use medication to raise the blood pressure. During that period there we were quite concerned about him.

I might add that his humor came through even then, because I was at the left-hand side of his head at the head of the bed when he had the famous discussion about the suits he had recently ordered. He had ordered three suits and he, in his typical fashion, said,

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"Well, let's cancel two of them, but keep the black one; I'll use this regardless of what happens." So he was still filled with wit even during that particular phase.

G: I'm told that he asked to see three people: Mrs. Johnson, Skeeter [Felton M.] Johnston, and George Reedy. Do you recall [this]?

H: Oh, yes. I am so glad that I did one thing, namely, after I saw he was all right for the moment, that I stepped across the hall to have a long talk with Mrs. Johnson about his problem. As I recall it, she went with me, I believe, back into the room to see him. But he had his attack out in Virginia, as you know, and things had happened so rapidly that little had been said to Mrs. Johnson. I learned early in the medical profession that it's terribly important to seek out and discuss the problems with the immediate members of the family as quickly as it's wise to leave the patient. So I think that our friendship probably started then; that is, my friendship with Mrs. Johnson started then, because I did seek her out to discuss the problem.

I also feel that my relationship with President Johnson, which took on not only the role of doctor-patient, but I feel a close friendship as well, began when, in his typical fashion, as I was recording the electrocardiogram he asked me, "What is wrong?" I was able to be certain because the information was clear, and so I answered firmly and tersely, "Sir, you are having a heart attack." He sort of narrowed his eyes, as he was prone to do, and said, "Are you sure?" I said, "I'm certain." As I learned about him later, I know now if I had been unable to say, or if I had not been certain, or if I had wavered in how I said I was certain, or if the relationship had not been as definite as it was, he might not have trusted me. Because as you well know, if you said you were a secretary, then he expected certain things to be done as a secretary. If you were a doctor, he expected certain things to be done as a doctor. Whatever you called yourself, he had a pretty high standard of what he wanted.

G: Did you believe that within a certain period of time if his condition remained stable, if he

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didn't, say, suffer an additional attack or some other form of deterioration, that he would recover? Was there a critical time frame from this instant that you're talking about, twenty-four hours? Three days?

H: Well, as a general rule--and I believe I felt that way then--if things have gone well by the fourth day, then you feel, at least for the acute attack, that chances are pretty good that you'll pull through. Now, we already had information back then, too, that showed that an attack on the under surface of the heart carried with it a better long-range survival than a large attack on the front of the heart.

G: Why is that?

H: Because, as a general rule, the area of muscle that's damaged is usually not as big as it is when the artery serving the front side of the heart is involved, especially the first part of the artery known as the left anterior descending branch of the coronary artery. If the first part of the left anterior descending artery is obstructed it may lead to a rather large attack. So I felt that if we could move on through that attack [he would recover]. And by the fourth or fifth day it was looking quite favorable, although the press had indicated his time was over in the Senate. All types of ominous messages were printed here and there, and my job was to counteract them the best I could.

G: These were reaching him, too, I understand? He did get word of some of the radio--?

H: Oh, yes. Well, he would have word of all.

G: Was this upsetting to him?

H: Well, you will recall that he moved from [being] the most active person in the world as majority leader to lying up in the sickbed within just a few hours. I think that it did

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concern him; there was no way to say it did not. My contribution, or what I tried to do, was to point out that we were going to move on and that we expected him to return to the Senate after a period of rest.

G: Well, now, it seems that very quickly Jim Cain and Earle Clements issued statements to the effect that he would be back in January.

H: Yes.

G: How was this planned, do you recall?

H: Well, they were there, both of them of course close friends. I would discuss this with them, and they would do what they could to indicate that he would return to work.

G: Was this done for medical reasons or political reasons?

H: No, no. Let me say that I would have felt the same if he were a banker or a farmer or whatnot. Certainly I did not consider any political reasons; that just happened to be his occupation.

G: What I'm asking, do you think that he felt that his position as majority leader would be threatened unless he made it clear that he was coming back in January, that his doctor said that he would be all right in January, and Clements' role was only temporary?

H: See, he was very close to Senator Clements. I do not recall, and I must say that I obviously was not around all the time this kind of discussion was taking place, but at no time when I was there did I ever hear any question that he was concerned about retaining that position.

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G: Oh, really?

H: I think he was fairly comfortable about that, as far as I know. From the beginning I never said anything other than we'll get through this acute episode, and we'll have a period of rest and then return to work. So at least I was saying what I believed in that regard every day, and it may well be that he knew enough of the political world to know that they would begin to say that maybe he wouldn't [return] and so forth.

G: Well now, the majority leadership was one thing, and the presidency was something else again. But just before that heart attack there had been a number of stories suggesting that he was presidential timber and perhaps in 1956 he might be the Democratic nominee. When did you first get insights that Lyndon Johnson did have presidential hopes? Was it at all in connection with the heart attack? Do you think he felt that the heart attack--?

H: Well, of course everyone knew of the work of Majority Leader Johnson. I was head of cardiology at the Naval Hospital in Bethesda there at the time he came in. Being in Washington, and the fact that we did see a number of the members of the Senate and of the House at Bethesda Naval Hospital, made us perhaps think about this more than if we had been in San Diego or some other hospital, don't you see. So it was well known that he was an extremely capable majority leader, and about the time of the heart attack, major articles were written. As a matter of fact, I believe--I hope I'm accurate about this--I believe some of the papers had an article that very day, or the next day, already in the mill indicating that he was capable of becoming president.

I must say that I never saw him then or later indicate his great desire to be president. He obviously was a superb politician, and there's no question that being president I guess is the top of the line for a politician, so perhaps that was part of his overall ambition to be a superb professional. But he really would not say it that way. I never heard him say it that way. I never heard him say, "Oh, my, if I hadn't had this heart attack I would have been president. This has bashed my dreams of being [president]." I

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never heard anything like that. I think, like a lot of people that are ill, that the first response is you think of your family, and I think he did that. He thought of his friends. Then as things get better he begins to think of his future work. I think at that point his desire was to continue to be the best majority leader that he could. But I don't recall him feeling, "Look what's happened to me! I can't go the distance now and be president." I never heard that.

G: Let me ask you about your role as a psychologist, in effect, to buttress his attitude. I don't know how much of it is related to depression that heart attack patients have. Would you just go into this and explain what you. . . ?

H: Well, it's a little hard to express in detail. Let me say that as a cardiologist, as a subset of being an internist, how to deal with the psychological responses of patients becomes very important. That's true in everyone, so that I would not want it to appear that any intense psychological approaches were used here over and above what any good cardiologist-internist would be doing, and that we deal with it all the time. There's no question there's a letdown after a serious illness.

G: This is a physiological relationship?

H: And that in many instances that's quite normal, and that I did my best to respond to this in the best way that I could. In him I would add that it was interesting, because he's obviously a very brilliant person, a very perceptive person. He could judge the thoughts of someone or the response of someone perhaps--certainly better than anyone I've ever known. He was an instant psychologist of high order.

G: Give me an example of what you would do, though?

H: Well, we did a lot of what you'd call negotiating, because his personality was to

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negotiate.

G: Horse-trading, I guess.

H: So I learned very quickly that he might start off with some great demand that he would want, and I would recognize that he'd probably yield from that a little bit. I would start with perhaps almost an opposite view. As we'd sit and discuss it, we'd end up coming to a pretty reasonable idea that you could defend from a medical point of view. He would test me, as he did everybody; I think he would test anybody around him. He would set up systems to find out if I would say yes to something, then that could have a negative effect on him. So he would test me and I'd have to be very careful. You'd have to say, "Oh, no, no, that's not the way it is." Because if you said yes, then that would support his idea that he was quite sick and so forth. So it was a matter of negotiating out how much mail did he have, how many visitors would he have, all of that, because if you said no visitors, then he would assume that he was sicker than he was. So you end up permitting certain things in such a situation that you might not ordinarily permit.

G: How was the line drawn? Who could come in and who couldn't?

H: Well, as you well know, the hospital floor at the Bethesda Naval Hospital was converted practically into headquarters for his staff, and numerous people were working in various rooms there. Juanita Roberts and Mary Rather and a good part of the staff were up there. Well, of course, they were helping him get things done, and you would try to be reasonable about that. To have him do none of it would have been a negative quantity from a psychological point of view, and to try to keep him from going all day would require the negotiation, you see. So we permitted him to do some work, and he would see various people, senators that he knew. I recall that Eisenhower, of course, visited and Vice President Nixon visited.

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G: Were you in the room when President Eisenhower visited him?

H: No, I was standing just outside. I was in the room when Vice President Nixon was there.

G: Was that visit at all indicative of their relationship? Did you get any insights?

H: No--with Nixon?

G: Yes.

H: Not a bit. This was a meaningful visit, but at the level of a visitor to a sick patient. I heard no political discussions at all.

G: Was it cordial?

H: Yes, very cordial.

President Johnson had great respect for President Eisenhower, and I think--as I guess the record shows, though I'm not expert in it--that as majority leader he assisted President Eisenhower in many, many ways, and much of the legislation that got through was because of his expertise as a majority leader.

An interesting thing happened, to show the wit of the man. I would discuss with him the fact that he tended to get a little irritated over minor things during that period. And a lot of us are that way, you know, a pencil that wouldn't write or a typewriter that didn't do right. So I discussed this with him and said, "Gee, these are mighty little things to be upset about." He called me upstairs one day and said, "You recall yesterday the press was here, and they saw you and wanted to know who you were and I told them," or something like that. He said, "There's a article coming out, and it says 'Rear Admiral Hurst' is the headline" or something. Now, at that time, I can assure you I was not a rear admiral. What had happened is the reporter had seen the oak leaf of the navy on my

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collar and thought it was a star. Well, I was just embarrassed to death. And he said, "I don't think you ought to worry about that. That's just a little thing." And I said, "No, you've got to stop that now! Can you stop it?" and he said he'd try. So I think he got it stopped in a few papers, but it ended up in the *Atlanta Constitution* on the front page, "Rear Admiral Hurst," at a time when I was not an admiral.

G: How about some other examples of his humor, his wit?

H: Well, over the years I was really impressed with it, because I think many great people have a sense of humor. I've come to be concerned when people don't. But he had many, many interesting stories to tell, as you know, but I won't relate them here.

He loved stories about ministers, it seemed to me, Texas ministers in little small towns. My favorite of them, and he had many, had to do with the story of a little church that each year would dismiss their minister. One year a minister was there, and he waited for that fateful day, and they selected him to stay. So this surprised the minister, and he asked the board that made the recommendation why that was the case, "The last ten ministers lasted one year, and I'm going to be retained." So the answer he got was, "Well, you see, Minister, we really don't want a preacher here, and you're the closest thing to it we could find." Now, he'd tell that in relationship to being president or something like that. But he knew many, many stories.

G: Was part of his humor an ability to exaggerate something to the point that it was ridiculous or--?

H: Oh, yes, and he would use it in every way, but [he liked] practical jokes, sort of practical-joke humor. I recall the day Lester Maddox was inaugurated governor here in Georgia, he called me at home in Atlanta and said, "I was just calling to congratulate you on your new governor. I've been looking at the TV. I was surprised"--or something like this--"I was surprised to see you sitting on the platform with him at the inauguration. Do you

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have any comments to make about this?" you know. He knew I wasn't exactly a Lester Maddox fan. He just played this to the hilt, don't you see.

Another time I recall I was spending the night with him at The Elms, and this has always interested me. I have to piece it together, because I couldn't get the whole story, but apparently somebody called him one night, which of course anyone can do. The Vice President was listed in the Washington telephone book. He got a call one night, and I believe he was listening, but the Secret Service [was] also listening. And it was obvious the caller was drunk, just so drunk he couldn't say whatever he wanted to say. But somehow they got out his name and phone number. He probably was calling from some bar or something. So the next night, the Vice President called him, and this guy was so astonished. By then he was sober, and he was so astonished he didn't know what to say. Johnson said, "This is Vice President Lyndon Johnson. Did you want me?" The guy just couldn't talk. The effect of his alcohol had worn off.

But he had an interesting way of doing things. At one point he called me in Atlanta and said, "I think you ought to be in the naval reserve." And it had to do with the fact I was traveling a lot with him. I think the plan was, when they called me, I'd be on active duty, and then when I got back home I'd be off of active duty. I guess on the phone I sort of procrastinated or whatnot, and he became just a touch impatient and said, "Now you understand, I can draft you." (Laughter) So I got his message all right.

One time he called and wanted me to go down to Nicaragua. The dictator [Somoza] was ill with a heart attack. I think the call came in maybe at nine o'clock at night or something like that, and he said, "Now a Jetstar will be out at the airport to pick you up," and whatnot. He was constantly one up, you see. I said, "Well, how long do you think I'll be down there?" I thought I ought to tell my wife and family something. There was a pause on the other end, and he said, "Don't you think you ought to see the patient first?" which obviously is right. How in the world could he know how long I needed to stay down there? Regrettably, the patient died while we were in the air on the way down.

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G: Is that right?

H: Yes. I called back to report to him. There's a note there about that, which was sad.

But he, I think, had the best understanding of people of anyone I've known. When we would travel and go to the embassies he would gather the people that worked in the embassy down into the room to talk to them. He would tell them how much he, representing this country, appreciated what they were doing. There's no question he could bring genuine tears to the eyes at any time when he started talking about the loyalty of individuals to the country. A lot of people don't realize that he had very deep feelings about the country, and that he really appreciated everybody's contribution to making it better. He felt that everybody had a right to say what they wanted to say, too. He thought the problem in minorities, I've heard him say, would be solved by giving them the right to vote. This view made me realize that he could cut through a mass of just piles of problems and come up with a bottom line somewhere. I've seen him with children, and I'm sure nearly everyone sees him as a tough politician, but I've seen him with children, as sensitive as any human being I've ever known. He loved children, which a lot of people don't realize. So there were a lot of facets to him.

He would reflect at times--I've heard him do this--he felt that you have a view and I have a view, and let's compromise and see if we can't get something out of it. Rather than being poles apart, there must be something that we share that we can push forward. He saw that as democracy. Others would see that as dealing. He was a master at it, but got labeled I think a little too harshly, because it basically was trying to come up with common ground in which there was agreement.

G: I notice while he was in the hospital that Senator Russell also visited him, Richard Russell.

H: Yes.

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G: You must have known of their relationship over the years and had some--

H: Well, it's a very interesting thing. I served as Russell's physician in consultation several times; he would be admitted at Walter Reed [Hospital]. Therefore I knew of their friendship and I can only say now that I think they both admired, respected, and loved each other enormously. They had a few differences from time to time toward the end of their careers, but I do not believe it ever eroded the enormous respect they had for each other. Each time, if I left one of them, I was given a warm message to take to the other, and vice versa. So I think they had great respect for each other. Each recognized the absolute enormous talent in the other and both recognized that each had the country at heart.

G: Did Johnson see Russell as somewhat a mentor, in terms of how to be senator?

H: Well, to a degree. I think when President Johnson was majority leader that he would have listed Walter George, from Georgia, and Senator Russell as certainly among the most able senators. He had great respect for Georgia because of his contact with these two people, who were, over a long period, honest, hard-working, humble people. In fact, I do recall, now that you mention it, and he told me this story I guess because I'm from Georgia and Senator George is from Georgia--he said that when he became majority leader he went to Senator George, or saw him, and said, "When I'm up in front pleading for this or that, and I see your face and it reflects no, I will stop. If it reflects yes, I shall go ahead." And that's because George was such a powerful, highly respected senator at that point in time. They were, therefore, great friends. So that he thought a lot of Russell and a great deal of Senator George.

G: Any memories of Russell's visits to the hospital during this heart attack period?

H: Yes, he did. I believe he visited him. I'm not certain of that, but I think so. I was seeing

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Senator Russell a bit then in my capacity there at the Naval Hospital, too. But then I saw him, Russell, a great many years later when he would become ill and go to [Walter Reed].

G: Was that when he had emphysema?

H: Emphysema and other problems.

G: Now, LBJ's mother was also there to visit him.

H: Yes, I met her.

G: Tell me about her.

H: Well, she was a quiet, attractive woman. Our contact was over just a few hours, as I recall it. But it was quite obvious that he thought a lot, a great deal of his mother and father. It would be hard for me to know which one of the two influenced him most, because both of them had a profound influence on him.

G: Did he ever talk about that?

H: Oh, yes.

G: What did he say?

H: He said more than once that his father taught him that he should be able to go in a room and be able to determine who's for you and who's against you. If you can't do that, he said, you probably can't be a successful politician. Apparently he learned a lot of his professionalism from his father.

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As to his mother, I think it had to do with leadership as a person, so to speak. I guess this sums it up: I recall reading a letter somewhere--it may be exhibited in one of the spots there on the Ranch--where young Lyndon had written his mother something about the press giving him a hard time, something like that, and she wrote back, "That was no more than a blemish on the diamond," or something like that. That meant that people were looking carefully at him, and that he should not assume that the rest of the diamond wouldn't take him through in his career. So she apparently was a pretty good psychologist herself, as most mothers are, I guess.

G: What was her role there in the hospital?

H: She just visited him while he was ill. Yes. I don't think she stayed more than a few days maybe, and I only recall seeing her one afternoon.

G: We should also talk about Mrs. Johnson in the hospital.

H: Yes.

G: I understand she stayed there [inaudible].

H: Yes. Mrs. Johnson--

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G: --role there.

H: Well, as I indicated earlier, when President Johnson, then Majority Leader Johnson, came into the hospital in Bethesda, obviously I went immediately to him--in fact, we were waiting for him--made the cardiogram, assessed that he was having a heart attack. He

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wanted to make certain, so he asked, "Are you certain?" and I said, "Yes, I'm certain." And I am absolutely convinced that that short little period there, that interplay, was terribly important in establishing what I feel was a very good working relationship, both as doctor-patient but also as friend. As soon as I felt that he was stable I went across the hallway there to see Mrs. Johnson, who did not at that point know a great deal of what was going on. So I spent quite a bit of time discussing it with her and then, of course, spent some time every day discussing it with her.

G: What did you tell her?

H: Well, exactly that he was having a heart attack. At that point his blood pressure was a bit low and we were working with that. And then [I] explained to her what a heart attack was, as we try to with all patients. What varies from patient to patient is that the doctor has to sense how much detailed information a patient wants at a particular point in time. In other words, the goal should be to explain to patients what's going on. The speed in which you do that, and the timing in which you do that, becomes quite important. As I recall, I discussed with her what it was and what we were doing about it, and wanted to be certain that she was comfortable. As I recall it, she stayed at least for several days there at the hospital. Then I began to organize the immediate environs of the hospital.

G: Did she ask you how she could help or what--?

H: Oh, I'm sure she did. She, as you know, is an extremely smart, perceptive person that has constantly grown in sensitivity and her ability to handle all kinds of problems. She always amazed me in her ability to cope with the unexpected. She came through then, and now comes through, as an extremely wise, caring kind of person. So we became very close friends. At that point in time, as I recall it, Luci was seven and Lynda was twelve. After Majority Leader Johnson left the hospital and went to their home there in Washington, I would make daily visits there until we took him back to the Ranch.

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G: He stayed at [3921] 30th Place about a month, is that right?

H: That's right. And then to the Ranch. Then, later in the fall, he came here to Emory to see me.

We were preparing all the time for him to return to work. And in his case, it happened to be as an active majority leader in the Senate. He worked longer and harder than nearly anyone and really had no difficulty from his heart during the period he was majority leader, and vice president, and president.

G: How did the heart attack change him in terms of his habits? I know--did he smoke?

H: Well, he actually smoked before the heart attack. He stopped with little discussion. I simply said that that was the one thing we knew then that was quite essential, and so he stopped. Now he always said he wanted to smoke, and he [never again] smoked until a few years before his death.

G: Stopped smoking?

H: Yes. I'll discuss that maybe in a later tape, because there are some fascinating aspects of his returning to smoking. But he didn't smoke, I don't believe, for sixteen years there. He certainly didn't smoke until about two years before his death. But he always wanted to, and he used to hold them in his hand and roll them and make you think he was about to smoke, you know, that kind of thing.

G: Did he carry a pack of cigarettes around with him?

H: Did he carry a pack?

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G: Yes, afterward.

H: I don't know, but it's certainly possible. That fits the role, that he might take it in his hand and not smoke it, would test himself a bit, but he did not smoke.

G: Did he ever consult you and say, "I would like to start up again, what do you think?"

H: Not until he was already beginning to, two years before his death. I'm not sure just when he started back. But that I think might require another tape to get us to that spot. But he used to say, "Are you sure it's helping me, not smoking?" and I'd say, "I'm absolutely certain that it's helping you, not smoking."

G: Now, how else did he change his regimen after the heart attack?

H: Well, I'm not sure he changed an awful lot. I think obviously for a few months he did. We had him lose weight; he was quite overweight at the time of his heart attack. He lost down and stayed with his low-fat, low cholesterol diet, and he would constantly go up and down as many people do, including me.

That was another thing. If I came in to see him, he'd be the aggressor, you see. If he thought I was going to say something about his weight, well, you can be assured, if he had gained, that he was going to attack me on my weight before I ever had a chance to comment on his weight, don't you see. So that by the time I would walk in the room, he would begin to discuss very seriously how much weight I might have gained or something like that. That was always a signal that he'd gained weight.

G: While he was recovering, did you try to filter out, say, his activities? Like listening to the radio, was this a problem? Did he want to listen to the radio?

H: Oh, he'd want to listen to the radio. I felt that was all right. He read many newspapers,

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and I felt that was all right. But later, in later illnesses, by then he had access to more television sets, and he loved to have three going at the [same] time, and would turn the sound down on two of them and listen to the other, and then alternate them. He got pretty good at listening to three TVs at one time. As I'll discuss maybe later, we used to talk to him about that a little bit, that maybe one or two was enough, three going at once was not as essential. But back in 1955 I think he had a TV at the house; I don't recall a TV at the hospital in 1955.

G: Was there anything else that you restricted in terms of the things that you didn't want him to do while he was in the hospital? Telephone calls?

H: Oh, he loved to use the telephone, as everyone who's been around him knows. I suppose I was reasonably lenient about a lot of those things, in that if I thought he was enjoying something, I didn't think there was enough scientific evidence to interfere with something. So he certainly did more than you would have wanted many people to have done at that point, but then he dealt with that kind of thing with such ease that I never thought that that placed him under any undue or undesirable stress, so to speak. Once again, the things that stressed him would be minor things that might not have stressed other people. Everybody is stressed by different things.

G: But why do you think he was cooler and more detached in the face of a major crisis than he was a minor irritant?

H: Oh, I think, as I've tried to think about it and him and other people, nearly everybody has some little thing that bothers them that seems unreasonable, including me. I believe it's because you think well, goodness, you could really take care of this little thing, whereas [with] something big you know it's a tough problem and therefore taking care of it is expected to be tough. But you don't understand why papers are on the floor if you've got a staff that's supposed to be picking up paper. That's the point, that that seems relatively

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simple, why can't we do that? So I think perfectionists and people that turn out a lot of work may be a little bit intolerant about little things, whereas the big things they understand are big and will take a little more time, work and effort.

G: While he was recovering in the hospital, to what extent did he keep up with what was going on in the Senate?

H: Oh, he kept up.

G: Did he?

H: There's never been a time that President Johnson didn't keep up.

G: How did he do it? How did he know what was going on in the Senate?

H: Well, he still had the newspapers and he still had the staff come in at the appropriate time.

G: And they reported--

H: That would be George Reedy at that time. Bill Moyers was on the staff, obviously, at that time. But George Reedy was press secretary then.

G: Did he give advice to Earle Clements, the acting leader during this interval, do you know?

H: I certainly was there many times when Mr. Clements was there. I was terribly impressed with him. In fact, I recall that I took him back from the hospital somewhere. He stopped at a department store and came out and brought me toys to give to my children. I thought

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that was not needed, but I appreciated the act. I took them home to my children. Mr. Clements was a very kind man, and he and Mr. Johnson were very close friends. I'm sure they were in frequent contact.

G: Shall we break here? I've used quite a bit of your time.

End of Tape 2 of 2 and Interview III

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J. WILLIS HURST

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