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THE WHITE HOUSE

Office of the Press Secretary

PRESS BRIEFING BY LARRY SPEAKES

July 17, 1985

The Briefing Room

1:53 P.M. EDT

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PRESS BRIEFINGS
BY
LARRY SPEAKES

July 17, 1985

The Briefing Room

1:53 P.M. EDT

MR. SPEAKES: I have some announcements of a regular basis before I talk about the President, so if you'd let me get those out of the way.

The President today is announcing a number of plans to nominate officials for the Senate. The President is announcing Douglas H. Ginsburg to be Assistant Attorney General for the Anti-Trust Division, Richard Kennon Willard to be Assistant Attorney General for the Civil Division of the Justice Department.

He is announcing his intention to nominate Robert Keeley to be Ambassador of the United States to Greece, Francis J. Meehan to be Ambassador to the German Democratic Republic, and John Ferriter to be Ambassador to Djibouti.

In addition, he is announcing Anthony J. Calio to be Administrator of the National Oceanic and Atmospheric Administration, and Orson G. Swindle, III, to be Assistant Secretary of Commerce for the Economic Development Administration.

Q Swindle?

MR. SPEAKES: Sure.

- Q Sounds right, Lou says.
- Q We have --
- Q The guy has overcome his name.

There will be a special White House briefing on Central America on Thursday, July 18 at 2:30 p.m. in Room 450 of the Old EOB. It will be open to the press. The meeting is to mark the 6th anniversary of the Sandinista takeover in Managua, which took place on July 19, 1979. It will focus on the promises made at that time by the Sandinistas and their betrayal of them over the past six years.

Speakers will be Robert C. McFarlane, Assistant to the President for National Security Affairs, Elliot Abrams, Assistant Secretary of State for Inter-American Affairs, Dr. Constantine Menges, Special Assistant to the President for National Security Affairs, and members of the Civic Democratic Opposition from Nicaragua.

Coverage arrangements can be made by contacting the Office of Media Relations, 456-6623.

Q Is it true that Menges has been eased out of that post? The Washington Times this morning says --

MR. SPEAKES: I saw the story.

Q -- Menges, a true conservative, has been ousted by his enemies or something?

MR. SPEAKES: Well, I'll give you a -- the current status of Constantine Menges --

Q Is there paper on all these appointments?

MR. SPEAKES: Mr. -- Dr. Menges has moved from the Directorate on Latin America to the Directorate on International Communications and Information in NSC. Office was established several years ago to monitor and supervise our public diplomacy programs. By signing Mr. Menges to this position, NSC will take extensive knowledge of his -- take advantage of extensive knowledge and ability he has as a communicator. He will continue to serve as a senior staff member of the NSC, and Special Assistant to the President for national security affairs.

As far as the Senior Director for Latin American Affairs, Ray Burghardt is the person who is the head of that area.

Q The story is, was he moved because he was too staunchly --

MR. SPEAKES: No.

Q -- either anti-communist or hardliner or something like that?

MR. SPEAKES: No. The -- this morning, personal income and housing start figures are out for the month. Personal income was up five-tenths of a percent in June. This is another indication of continued steady growth in the nation's economy. The June figures follow a five percent decrease in May. That decrease was considered a statistical aberration created when special factors pushed up personal income in April.

Also, the delay of tax refunds continues to affect growth in disposable income. Most refunds were paid out in May, and disposable income rose correspondingly by 1.8 percent. When the funds declined in June, disposable income dropped 2.2 percent. When the effects of tax refunds is factored out, disposable income shows a steady, continued growth moving in step with personal income.

Personal consumption rose another six-tenths of a percent in June, matching the May figures. Housing starts in June were also up, rising 1.9 percent to a seasonally adjusted annual rate of 1.7 million units. The rate of the new permits issued fell off 3.7 percent, down to an annual rate of \$1.7 million.

With the sharp drop in mortgage interest rates in recent weeks, the housing industry is expected to see a sharp rise in activity in the closing summer months. With the economy continuing to grow at a steady sustainable rate, and Congress seemingly determined to reach some sort of agreement on budget cuts, the foreseeable economic future is a bright one. Passage of the President's growth-oriented tax reform package would be yet another step towards long-term fiscal growth.

- Q Good news, in other words?
- Q The personnel decisions --
- MR. SPEAKES: Pardon?
- Q Were the personnel decisions made last week or --

MR. SPEAKES: No, they were made -- several weeks ago. That's the way they were.

- Q Do we have paper on all of them?
- Q So you say you think passage of a budget compromise

is now likely? Is that --

MR. SPEAKES: No. No. Both agree on a deficit reduction package, but I'll come to the budget here in just a little bit more.

This morning, the President continues on a roll. In the words of Mrs. Reagan who spoke with him by telephone shortly before she left on her day trip today, "He's flying high." His first words when he left the room for his morning walk was, "Tennis, anyone?"

After -- last night, after watching a Lauren Bacall - Humphrey Bogart movie, he slept through the night for the first time. He went to sleep shortly after 11:00 p.m. and awakened at 5:00 a.m. He went back to sleep and awoke at 8:00 a.m. this morning.

Doctors saw him at that time. His vital signs are good, they're solid, they're normal. The temperature is entirely normal and has been for the last day or so.

Dr. Oller examined the President at midday, just a short while ago. The President's digestive system is beginning to return to normal function. Dr. Oller has placed the President on a clear liquids diet. This customarily includes boullion, jello, popsicles, apple juice and tea.

The President was visited this morning by the Vice President, Don Regan, Craig Fuller and myself at 10:15 a.m., and at that meeting, the President heard the sirens of the Bush motorcade arriving.

Bush was shown into a sitting room to await Don Regan's arrival to see the President, and the President surprised the Vice President by popping out of bed and coming into the sitting room adjacent.

The Vice President said, "I came to see you, not you to see me."

The President's first words were to deny still another report of his early demise. He said, "Somebody must be trying to make a buck."

The Vice President and --

- Q What?
- Q Can you do that again?
- Q Do that again. We didn't get that.
- Q -- follow you.
- Q You're going so fast.
- Q Are you referring to the false report in Europe on the money markets?

MR. SPEAKES: His first words to the group --

Q Is this Reagan?

MR. SPEAKES: Yes. It's the President of the United States. His first words that day were to deny still another report of his demise. He said, "Somebody must be trying to make a buck." There were reports --

- Q Do you know what report -- Sorry.
- MR. SPEAKES: If you read the wire, you would know.
- Q Well, that's -- I know.
- MR. SPEAKES: There were --
- Q I did read the wire, and I'm asking ----

MR. SPEAKES: There were reports originating in the early morning hours on the money markets, this one beginning in Singapore, about the President's health.

- Q What? That he'd died?
- Q Yes.

MR. SPEAKES: The Vice President and the Chief of Staff discussed with the President the budget. They reported on their meeting with the Senate Finance Committee, Republican members here this morning.

The President, frankly, did most of the talking in the meeting. He emphasized that spending cuts are necessary. "We have to show real dollars in domestic spending savings. That's the only way to go. Tell them that."

- Q Can you slow down, please?
- Q Would you read that again, please.

MR. SPEAKES: They reviewed the prospects for the tax bill and discussed a wide range of foreign policy matters.

The President's quote, one more time, was, "We have to show real dollar cuts in domestic spending. That's the only way to go. Tell them that."

Earlier in the day, the President walked the length of the hallway, once again, spent the morning reading, watching television news, looked at the newspapers and read his foreign policy report.

 ${\tt Q}$ How long is that hallway? Is this inside his suite, the 6 -- 30 feet.

MR. SPEAKES: It's inside his suite. Oh, it's 70 feet, depending on how much time he whips around.

- Q Seventy feet each way or --
- Q Together?
- MR. SPEAKES: It's a good haul.
- Q Not a great hall. (Laughter.)

MR. SPEAKES: The President this morning signed a Supplemental Extradition Treaty between the United Kingdom and the United States which increases law enforcement in combatting terrorism. It was a significant step in improving law enforcement in this area.

In addition, he signed nominations this morning.

A steady stream of upbeat mail is being delivered to the White House from people all over the country, and the world, wishing the President a quick recovery from his surgery. Many are urging the President to get the proper amount of rest. And many say they are praying for him. Virtually all of them are showing a tremendous outpouring of affection for the President. Some are writing to him as if they were a family member. Many even begin their note, "Dear Ron" or "Dear Ronnie."

- U -

Many people who have been in similar situations have written in to say what they're doing after -- many years after their surgery.

Q Do you have any numbers on the amount of mail he's gotten?

MR. SPEAKES: No, we don't have figures yet. As you may know, the President stays in contact with many friends that he has had in all stages of his life before being President. These go back to stunt men, stage hands, producers and actors in Hollywood, even some of the lifeguards he used to work with and some old friends at WHO in Des Moines. Mrs. Reagan is taking these cards and letters from personal friends to the hospital with her when she goes and the President looks at them today. She sent a packet through Don Regan this morning.

Many of the letters mention the First Lady and express their best wishes for her. There was also great affection for Mrs. Reagan by those writing in. In fact, one of the telegrams Saturday was addressed to her by 2,000 young people at the Daytop Village, a drug rehabilitation center for young people in New York City. The telegram reads: "This weekend, 2,000 young people at Daytop Village are praying for the President and you at this critical hour." She's previously visited there.

The President this morning received a pot plant, I guess you would call it. The card read -- (laughter) --

- Q Pot?
- Q What kind of --
- Q Pot plant?

MR. SPEAKES: Potted plant.

Q -- party? (Laughter.)

MR. SPEAKES: The card read that "Someone as tough as you are should have something besides posies in the hospital room." It was signed by -- it was signed "Mac" -- Commerce Secretary Malcom Baldrige -- and it was a cactus.

Okay, questions?

Bruce?

Q If he's able to go on a clear liquid diet now, does that mean that the I.V. or -- is out or going to come out today?

MR. SPEAKES: I would judge it will come out shortly. He had the I.V. this morning, so --

Q It wasn't out yet?

 $$\operatorname{MR.}$ SPEAKES: It wasn't out when I saw him, but the doctor saw him after I saw him.

Q And also, I just -- I wasn't quite clear on the meeting. Bush arrived first and then you and Regan arrived shortly afterwards. Was this all one meeting that you were --

MR. SPEAKES: Yes. Bush was waiting, the President popped out of bed and popped in to see him and it was -- then Regan joined the meeting -- been going on for a couple of minutes because of the President's early arrival while Bush was waiting to into the bedroom.

Q Given this -- the --

- Q Fuller was there for that meeting too?
- MR. SPEAKES: Pardon?
- Q Fuller was there with the Vice President?
- MR. SPEAKES: Yes.
- Q Given the fact that the bowel function is beginning to resume, do the doctors now have a -- some estimate on when he'll be able to leave the hospital other than the one --
 - MR. SPEAKES: Seven to ten days.
 - Q All right.
 - Q Larry?
 - MR. SPEAKES: So, Gerald.
 - Q Has the bowel function actually started back now?
- MR. SPEAKES: I'd like to leave it just like I stated it and I did state it very plainly.
 - Q How long did he meet with Bush.
 - MR. SPEAKES: Forty-five minutes.
 - Q What kind --
- Q What was -- forty-five minutes the length of the meeting?
 - MR. SPEAKES: Forty-five minutes.
- Q What kind of post-operative testing is now taking place? Is it just an examination sort of thing. Is there any --
- MR. SPEAKES: Examination, blood work, laboratory tests, which are quite normal for any patient in his situation.

Ira?

Q What plans are there, if any, -- decided to have Bush stand in at various events? And if he does that, will he be using his own words or will he be making speeches on behalf of the President?

MR. SPEAKES: I would judge he would be using his own words; and there are not specifically any events out on the schedule that there will be a substitution for the President. This morning, the Vice President attended the Finance Committee breakfast and he'll attend another lunch tomorrow. Don Regan and James Baker are there.

Q Well, is he doing the teacher thing, for instance, on Friday?

MR. SPEAKES: Yes, I think he is standing in for that, I believe.

Q For example, is he going to make a speech that the White House shop has prepared that Reagan would have given or -- I'm trying to get a feel of how the --

MR. SPEAKES: He'll make his own speech, I'm sure.

David?

Q How does the White House react to the spending plan put together by the House Democrats? Is it sufficient?

MR. SPEAKES: It is something that we're going to have to study. We have not completed a detailed study of it. But at first flush, it seems to fall too far short of the Senate version. \$64 billion in hard domestic cuts in the Senate budget. The House version proposes an \$8.3 billion over three years, which is only 13 percent of the Senate total. So at first --

Q Well, Larry, how long -- you have said before, you have said that this is the week it needs to be resolved. Are you going to have your study completed in time for this week?

MR. SPEAKES: We're studying and so are -- the Senate Republican group is studying. Yes, we'll have our study completed and we'll be talking to them about it, and hopefully, they will be able to work out -- work further on it.

Lou?

Q Larry, what were those numbers again?

Q Is there any plans for the President to call any Senators or members of Congress?

MR. SPEAKES: Not at the moment.

Q Could you repeat the question.

MR. SPEAKES: Any plans to call Senators or Congressmen? Not at the moment. There's nothing -- nobody on the legislative staff has said, you need to call so-and-so.

Q Has he made any phone calls yet?

MR. SPEAKES: Talked to Mrs. Reagan this morning. I don't know whether he's made any additional.

Somebody asked for the figures again?

Q Yes.

MR. SPEAKES: \$64 billion, hard domestic cuts, Senate budget. \$8.3 billion, House proposal, or 13 percent over three

years.

Q There was some talk over the weekend that if the budget thing showed any progress, that there might be some people from the Hill in to see the President by the end of the week. Is that at all possible?

MR. SPEAKES: No --

- Q Question?
- Q Question, Larry?
- Q Could you repeat the question?

MR. SPEAKES: Is anybody coming in to see the President from the Hill? Nothing scheduled, no.

So, Bernie.

Q Larry, could you clarify why the President and the First Lady don't want the doctors to speak to reporters?

MR. SPEAKES: Personal.

Q What was the question?

MR. SPEAKES: You've got to speak up on the front row.

Why don't the President want the doctors to speak to the reporters? They feel very strongly about the confidentiality of the doctor-patient relationship. And I don't think anyone can argue that the White House and the doctors, including the entire medical team on one day and the key figures on the final day out at the hospital when we were out there, have not been totally forthcoming, in greater detail, I would say, than any previous Presidential illness. We have presented the facts. We have presented them in detail. We have presented experts to you. We have presented people that were in place in the surgery, people that had dealt with the President's case over a number of years, and they have come straightforward. There has been a full and total presentation of the facts.

Now, I think there are a lot of people out there that wish to second guess. They'll have to have it, but those who know the President's case have appeared before you, I think probably a total of -- oh, an hour-and-a-half, if not more than an hour-and-a-half and answered questions until they were totally exhausted -- until the questions were exhausted and the process became repetitive three or four times over.

Q I think you're wrong about previous Presidential illnesses. In 1981, Mr. Reagan's own doctors met the press in individual interviews throughout the period of his convalescence from that bullet wound --

MR. SPEAKES: No.

Q -- and answered questions repeatedly.

MR. SPEAKES: But you've made a statement just yesterday that you were not satisfied with the reporting done there.

- Q Because they were misleading.
- Q Yes, one doctor in particular, I think, --
- MR. SPEAKES: But what I am telling you --
- Q -- many of us felt misled us.

MR. SPEAKES: What I'm telling you is the facts presented in this surgery have been full, complete and they have given you everything that has occurred there. And it has come straight from those who were sitting in the surgery, not a go-between, straight from those sitting in the surgery.

Q Larry, I wonder if it might be possible, considering the number of reports that have come out since those briefings, to have access, again, to those experts to answer some of the questions and some of the charges that have come up, to give them an opportunity --

MR. SPEAKES: Tell me what they are.

Q -- to defend themselves.

MR. SPEAKES: Tell me what you want to ask.

- Q I got one of those.
- Q Ask Dr. Ruge about the May 18th, 1984, examination, which we haven't been able to reach him on.

MR. SPEAKES: Well, do you suggest I produce Dr. Ruge here? No --

Q Yes.

MR. SPEAKES: -- no, I'm not.

Q We'll be happy to submit written questions, I mean, if he'd like --

MR. SPEAKES: Dr. Ruge is no longer a White House employee. He's no longer the personal physician to the President. I think you have seen the statement by Dr. Cattau, extensive discussion on that. You had every opportunity to ask him the questions following the surgery. He answered in detail. You have asked Dr. Rosenberg that on two occasions and he has answered it. And you have interviewed all the political figures that were involved in it, from top to bottom, and you have their answers. I don't know where you can go with that anymore. You can try, and you can hash it around,

around, but that's where you stand.

- Q Larry, there's another question which is --
- MR. SPEAKES: Did you have more medical questions that were troubling you?
 - Q I have one.
 - Q I have one.
- $\ensuremath{\mathtt{Q}}$ $\ensuremath{\mathtt{I}}$ mean, I think that there have been a lot of questions that have been raised.
 - MR. SPEAKES: Like what?
- ${\tt Q}$ And it seems to me that it would be in their interest to have an opportunity to --
 - MR. SPEAKES: Tell me what the questions are, Mike.
 - Q -- answer these in detail --
 - MR. SPEAKES: Don't throw out --
 - Q One is that -- One --
 - Q Larry, I have a question.
 - Q One -- Larry, one is that --
 - MR. SPEAKES: Hold your horse.
 - Q We could --
 - MR. SPEAKES: I mean, I'm right here and I'll be here --
 - Q We can sit down and --
- MR. SPEAKES: -- and I've been here day and night for five days.
- Q We can sit down and prepare some questions. I don't think --
 - MR. SPEAKES: No, ask me what they are.
 - Q Why don't you yield to me, so I --
 - Q But you know what the questions are --
 - Q Well, Chris has a question.
 - MR. SPEAKES: All right. What are they?
 - Q Well, one of them is that --
 - MR. SPEAKES: Everybody --
- Q One of them is that there has been criticism that Rosenberg was unduly pessimistic about the President's five-year survival rate, and given the description of the tumor that he gave, that it should have been better than 50 percent. It should be more like 75 percent or 80 percent.
- $$\operatorname{MR.}$ SPEAKES: No, the people that were talking about it did not have the detail that --

They did not have the detail. Okay. The tumor removed from the President was a moderately well differentiated adenocarcinoma of the cecum arising from villus adenoma. That's what we said. Now, the questions is, what Duke's level do you give it?

Q B.

MR. SPEAKES: A Duke's B-l. The tumor extended into the muscularis externa -- M-U-S-C-U-L-A-R-I-S -- separate word -- E-X-T-E-R-N-A -- and approached close to, but did not penetrate the serosa -- S-E-R-O-S-A -- of the bowel wall. There was no evidence of vascular or lymphatic invasion. Now, there are five layers of the bowel wall. The first is the mucosa, the second is the muscularis, the third is the submucosa, the forth is the muscularis externa, the fifth is the serosa. This went to the fourth layer of the bowel wall and did not penetrate the fifth layer of the bowel wall.

The Duke's B-l rating is rated -- is according to the Astler Coller modification of the Duke's rating.

Q What are you talking about, Larry?

MR. SPEAKES: A-S-T-L-E-R C-O-L-L-E-R.

Q Well we -- we wanted to deal in technical terms, not layman's. (Laughter.)

MR. SPEAKES: Now, does that clear that up? You got any questions on that?

 $\,$ Q $\,$ Yes -- yes I do. But the question is, that given that description, some people have said that his prognosis is better than Rosenberg said it was.

MR. SPEAKES: No, they have not seen this description of it. They do not know how far it --

Q Well, Larry --

Q So, are you standing -- are you -- does Rosenberg still stand on the -- better than fifty percent --

MR. SPEAKES: Absolutely. And the people that Newsday talked -- who's Newsday -- raise your hand. The people that Newsday talked to -- you better go back to your man -- Sugarman.

Q Sugardaddy.

Q Sugarbaker.

MR. SPEAKES: Sugarbaker.

Q Sugardaddy. (Laughter.)

MR. SPEAKES: Well, Sugarbaker says he didn't do it and your guy got it wrong --

Q He said he talked to Dr. Rosenberg.

MR. SPEAKES: And he made -- he put Sugarbaker and others in there for about 19 paragraphs and me for one with this and he still misrepresented -- he didn't have any earthly understanding -- is that you?

Q No --

MR. SPEAKES: And he calls himself a medical reporter.

 ${\tt Q} = {\tt But}$, can we get access to Dr. Rosenberg to clarify? He apparently --

MR. SPEAKES: This is clarification right here. This is it.

Q This isn't Dr. Rosenberg?

MR. SPEAKES: Yes. This is total clarification.

Q Larry, there's still a lot of --

Q Larry?

MR. SPEAKES: What?

 ${\tt Q}$ -- questions about the 14 month -- why the President did or did not do 14 months ago --

MR. SPEAKES: Okay. You have Dr. Cattau and you have Dr. Rosenberg and you have Dr. Oller --

Q Larry, the problem with that --

MR. SPEAKES: -- commenting extensively. Review your video tapes of about an hour and a half and you will have the answer to that.

Q The problem with that is --

MR. SPEAKES: That is the answer to that and that's where the answer's going to stay.

 $\,$ Q $\,$ -- Dr. Rosenberg didn't enter the case until last Friday. He's told us that repeatedly.

MR. SPEAKES: But Dr. Rosenberg stated to you that he reviewed the case record in its entirety and he was satisfied with it

 ${\tt Q} = {\tt But}$, don't you think we have a right to ask questions as to --

MR. SPEAKES: You've asked him.

Q -- what advice was given 14 months ago?

MR. SPEAKES: No, you don't.

Q Who gave it?

MR. SPEAKES: No, you don't.

Q In other words, the President either received good advice and acted on it, or he received bad advice --

Q And didn't know it.

Q -- and acted on that.

MR. SPEAKES: You have heard --

 $\ensuremath{\text{Q}}$ Well, maybe he received good advice and then he decided not to do it.

 $$\operatorname{MR.}$ SPEAKES: You have heard what the doctors said. We've gone as far as we're going to go on that.

Q Yes, but you know, if he got bad advice, I think there's a national interest in knowing it.

MR. SPEAKES: Sam, I know how the media operates in this and I know exactly what you're up to. I've seen you do it before -- not in medical cases, but in other cases. And you're just going to have to keep barking up --

 ${\tt Q}$ ${\tt Yes,}$ and you were part of the Nixon administration and you saw it happen there.

MR. SPEAKES: You're just going to have to start barking up that tree. You're just going to have to keep barking up that tree.

Q Well, but, Larry, until you provide some answers, don't you know that we will?

MR. SPEAKES: No, no. You won't because you're going to run into a deadend.

 $\,$ Q $\,$ Is the President unhappy with the diagnosis that he had and all the -- $\,$

MR. SPEAKES: He is not, no. He is not, no.

- Q -- the care that he had --
- Q He is not?

MR. SPEAKES: He is not. No. I told you three times.

Mike?

- Q He is not, no, what?
- Q What's the question?
- Q Larry, can you --
- Q Not unhappy.
- Q Not unhappy with the advice he got 14 months ago?

MR. SPEAKES: If you have specific medical questions, ask them. Johanna has one.

Q Larry, I think I've been called on.

MR. SPEAKES: Yes, but you missed your turn --

Q No, I didn't. I was being interrupted. But I would like to ask my question.

MR. SPEAKES: You couldn't think of your question. Johanna's next.

Q Larry, I would like to ask my question, please. You called on me.

MR. SPEAKES: I called on Johanna. And that's my privilege.

Q My question -- my question is --

MR. SPEAKES: I'm sorry. I'm sorry.

Q I'd like the question in the record if you won't accept it --

MR. SPEAKES: I'm sorry, I will come back to you, Mike. But you were at a loss for words when I called on you.

 ${\tt Q} = {\tt I}$ was not at a loss for words, I was being interrupted by a $-\!\!\!\!-$

MR. SPEAKES: No, you deferred to --

Q -- colleague of mine and I was trying to be polite.

MR. SPEAKES: You deferred to Mr. Wallace.

Q I beg your pardon.

MR. SPEAKES: So I will go back here to the correspondent for Gannett Newspapers and get her question. It's a medical question.

- Q I just want to make -- I would be happy if Mike would like to ask his first. (Laughter.)
 - Q Thank you very much. My question is --

MR. SPEAKES: No, but I've already called on you. I'm sorry. (Laughter.)

- Q Oh, come on.
- Q I'll ask one.
- Q Larry --
- Q I just want to be clear on the --
- Q You've got a spider behind you.
- Q Our medical writer talked to Rosenberg's assistant yesterday who said that --

MR. SPEAKES: And who is Rosenberg's assistant?

- Q I do not know the name --
- Q A former employee at NCI.
- Q Don't disclose the name.
- $\,$ Q $\,$ -- said that Duke B-l comes with the diagnosis of a 70 to 90 percent survival --

MR. SPEAKES: But was he talking about the Astler Coller modification?

Q Yes, he was.

MR. SPEAKES: Are you sure of that? I don't think you are.

 $\ensuremath{\mathtt{Q}}$ I gave her that information as relayed from your office.

MR. SPEAKES: Yes. I don't think you are.

Q So you're saying that -- you're sticking -- even though it's a Duke B-1, you're still calling it the 50 percent level?

MR. SPEAKES: That's exactly what the doctor said -- better than 50 percent.

So, yes.

Q Have the President's -- have any of the President's children called him, and why haven't they visited him up to now?

MR. SPEAKES: Mrs. Reagan --

Q And do they have plans to?

MR. SPEAKES: Mrs. Reagan answered that. Read The Washington Post of yesterday, I believe, and that will give you the answer.

Lou?

Q Are there any plans for them to visit him before he leaves the hospital?

MR. SPEAKES: Not at the moment, no.

- Q Well, what is the answer?
- Q Have they called him on the telephone?

MR. SPEAKES: Look, the President is doing extremely well and I cannot help you make any more controversy anywhere else. The President --

Q Have they called him?

MR. SPEAKES: The President is doing extremely well.

Q It's a simple question --

MR. SPEAKES: -- and yesterday you were trying to find out why he didn't ask any questions in the five minutes -- that was yesterday's story. Now, today, you're trying to bark up other trees here and I'm just not going to --

Q -- any visitors --

MR. SPEAKES: -- play those games.

Q Yes, but you see, we still have that question. Your answer to that question, why he didn't ask any questions, and the answer of a senior official who cannot be identified are different.

MR. SPEAKES: Were virtually identical. Were virtually identical.

Q A senior official who cannot be identified told some of us that the President didn't want to know any more about it. Didn't seem to want to know any more information. And that's a little different answer.

MR. SPEAKES: Sam, you, once again, find yourself seizing on something that you like to make out of a statement -- that was much longer than that because I was seated in the meeting, as you well know, and he said virtually --

Q Well, I can play the tape for you.

MR. SPEAKES: He said virtually the same thing I said.

Q Are you refusing to answer the question about the children calling?

MR. SPEAKES: I am not playing games with you all.

Okay, Lou.

- Q Larry, the other day, a doctor --
- Q You're very tired, Larry.

MR. SPEAKES: I'm not tired. I'm just tired of you people. That's exactly what I'm tired of.

Q Why don't you send in a pinch-hitter who can --

- MR. SPEAKES: You don't need a pinch-hitter.
- Q Well then answer our questions.

MR. SPEAKES: I sit here and give you a complete report of the President, and that's what you're getting.

- Q What about our questions that you won't answer?
- MR. SPEAKES: Now, if you want to move on to other stuff, you can.
 - Well, actually, I have a question I'm trying to ask.
 - MR. SPEAKES: Okay, fine.
- Q The other day, as I remember what Dr. Rosenberg said, he put it between 50 percent and three-quarters, I think he said.

MR. SPEAKES: No, no. I think he just said a majority or better than 50 percent.

Q -- and what you're saying today, which I gather is coming from Dr. Rosenberg is that you're just saying it's better than 50 percent? You're not quantifying --

MR. SPEAKES: Exactly what he said stands true, and this is a further clarification, Lou, because of the criticism that it was a better rating than that, and the doctor says this is the reason, because he's using it as a B-l under this variation of it, and that shows you exactly how far the invasion was in the intestine wall --

Q This is his answer to the criticism that's been expressed by some doctors it should be higher if it's a Duke's B-1.

MR. SPEAKES: That's right -- exactly.

Q Can you explain the variation, because you did it in a very technical term. What is the variation of a B-1 that makes it a 50 -- better than 50 percent as opposed to 75 percent?

MR. SPEAKES: Well, this is the so-called Astler Coller

Q Can you spell that?

MR. SPEAKES: A-S-T-L-E-R C-O-L-L-E-R, which is a modification. There are six or seven modifications of the Duke's scale. This is one of the modifications. He is using that modification, and he tells you how far that the -- that it was extended into the wall of the bowel. That is where he arrives at his B-l designation.

- Q Larry?
- Q So you're saying, Larry, because it's into the fourth of the five layers, that is fairly deep, and that's why it's no better than 50 percent plus one, or something like that?

 $$\operatorname{MR}.$$ SPEAKES: That's why it's a B-1 and that's why he says the Aster Coller.

- Q This one -- go higher in his percentage?
- Q Are you going to release those pictures today?

MR. SPEAKES: I don't know.

Q Larry, is that part of the pathological report, and

wouldn't a lot of this second-guessing be cleared up with the release of the pathological report?

MR. SPEAKES: This is part of the pathological report, and you've seen the details here, so --

Q Larry, can you be any more -- do you intend to release the pathological report?

MR. SPEAKES: No, do not.

Q Well, wouldn't a lot of this second-guessing be cleared up with that if the experts had a chance to view that?

MR. SPEAKES: The doctors have spoken on it in great detail.

Frank?

Q Larry, is the President on schedule, or ahead of schedule for his release from the hospital?

MR. SPEAKES: I don't think there has ever been a schedule set other than seven to ten days, so --

Frank?

Q Following up on the conversation that we had immediately after the doctors' briefing at the hospital and Dr. Rosenberg's statement, "The President has cancer," medically speaking, have you gone back to Dr. Rosenberg and found out --

MR. SPEAKES: Sure I did, and I got back to you that day and you were out and I gave it to Mick.

- Q Well, from a medical point of view, would you --
- Q -- husband did the information. (Laughter.)

MR. SPEAKES: Yes. He indicated that it would have been better phrased to say that the specimen removed from the President had cancer.

Q Larry?

MR. SPEAKES: Yes? All the way to the back, I hear Leo.

Q About the statistical stuff, did Dr. Rosenberg use the 50 percent plus? Because I remember both to describe survival rate as well as the likelihood that the President would never again contract cancer.

MR. SPEAKES: I think you're wrong on the second part. I don't think he said that.

Q But you're using it solely on the five-year survival rate.

MR. SPEAKES: That's right, yes.

Q -- and does he have anything more precise than

50 percent plus? I mean, other doctors are talking about 70, 80, 90.

MR. SPEAKES: Well, Leo, as you might guess, there are many, many studies on survivability and recurrence rates. I think he was giving you a combination of those studies, and that's why he did not name a specific number.

Q No, no, what I'm asking is there anything in the report that, for instance, is more specific than 50 percent plus? Do you have 55, 60? Can you be more precise or is the report of the doctors more precise?

MR. SPEAKES: Well, Leo, as I indicated, there are a number of studies. I think you would find some variation in the percentage figure in those studies. The doctor was giving you a generalization of all those studies, and that is why he was general in his saying a majority.

Q Yes, but has he been more specific than that --

MR. SPEAKES: No, he has not.

Q -- to Mrs. Reagan or anyone --

MR. SPEAKES: No, he has not. So --

John?

Q Larry, it's clear that you find this, what you call second-guessing about the President's treatment and diagnosis, somewhat disconcerting. Does that reflect --

MR. SPEAKES: Distasteful.

Q Does that reflect the President's viewpoint as well?

MR. SPEAKES: I don't think the President has expressed a viewpoint on it. I think that sums up my view of it.

Q What about the First Lady? Is she upset about it?

MR. SPEAKES: I'm just not going into all of the details. The President and the First Lady have very strong feelings about the privilege of doctor-patient relationship. Mrs. Reagan grew up in a medical family. And they have very strong feelings about it. They've expressed that.

And as I say, this illness of the President has been -more detail has been provided on this illness than any other
Presidential illness in history. And you have had had the
opportunity to question firsthand the entire surgical team, and you
have had an opportunity to talk to the two leaders of it and the
government's number one cancer surgeon about the pathological report
-- pathology report.

And that, to me, strikes as a very forthcoming attitude on the part of the White House. A great bit of detail has been provided. And I think we have done it fairly, openly. We've not turned down a single question. You had the doctor the other day say to the question, "Has anybody told you not to say anything," the answer was unequivocally, "No." And, in addition, we have been --we've just given you every opportunity in the world.

Q Larry, I have to say that I agree with you, that you've been extremely forthcoming. But by not allowing them to talk to us, you leave sort of a suggestion that there is something that you're holding back on.

MR. SPEAKES: Well, I can tell you there is not.

Q I doubt that there is from everything that you've given. But why, then, not let us ask the questions to remove this one last --

MR. SPEAKES: You had that. You had the opportunity, but please tell me what your questions are.

Q I don't have any --

MR. SPEAKES: Well, see, no one has any.

 ${\tt Q}$ -- but I think that by not allowing the doctors to talk you leave that impression.

Q I do. I gave some, and you've tried to tell me they're silly.

MR. SPEAKES: What is your question?

Q I want to know what advice the President received 14 months ago and from whom? And I would like to know it in detail and specificity --

MR. SPEAKES: Well, I --

 $\,$ Q $\,$ -- concerning the question of whether he ought to have had a further examination at that time.

MR. SPEAKES: You asked that to Dr. Cattau, and Dr. Cattau gave you the answer on it.

Q Larry --

Q Dr. Cattau's answer was a very general answer.

MR. SPEAKES: Yes, I was going to get back to you earlier, wasn't I? Go ahead.

Q Thank you. Regarding that first examination, Dr. Cattau told us at his briefing on Saturday that the polyp that President Reagan had in May of '84 -- that was discovered then -- was an inflammatory polyp. You never told us that at the time --

MR. SPEAKES: Yes I did.

Q No, I don't -- I think if you check the record you'll find you didn't.

MR. SPEAKES: No. Look back at the record. I --

Q And -- if you would -- what --

MR. SPEAKES: I told you in '81 -- in '83, is it? Yes.

Q 4.

0 '84.

MR. SPEAKES: -- '84 the original polyp was an inflammatory polyp. In March of this year, it was referred to as a pseudo-polyp. I was asked what the difference in the two terms were and I said they're interchangeable. Inflammatory polyps, as I'm sure you know, are almost never cancerous. Almost 100 percent are never cancerous and most doctors do not recommend even removal of that polyp -- an inflammatory polyp.

Q I think, Larry, and I don't want to get into an argument with you here, but I think if you'll check the record you'll find that --

MR. SPEAKES: -- off my desk -- from Connie. It says "hospital" on it.

Yes, I can show -- I don't think I have the '84 out, but I have the '85 out and the question is addressed in there.

Q Can you tell me -- why -- I know in '85 -- I'm not talking about '85.

MR. SPEAKES: '85 was referred to --

Q I'm talking about 1984 when you gave your briefing on the results of the President's physical.

MR. SPEAKES: It was called an inflammatory polyp.

Q If you'll check the record --

MR. SPEAKES: I will.

Q The other question: has the White House or anyone from the White House or the medical team been in touch with Dr. Ruge, either to follow up on the advice he gave the President or to ask him if he would address this question?

MR. SPEAKES: I -- certain discussions within the White House -- within the medical profession -- in all cases within the White House, are not things that we go into day in and day out, and we're not going to give you a log of all the telephone conversations -- of all private conversations that take place. So --

Q But will you answer my question as to whether anyone from the White House was in touch with him?

MR. SPEAKES: No. I won't answer the question. So --

Q Will you -- can you tell me whether or not anyone

from the White House advised Dr. Ruge not to speak publicly about this case?

MR. SPEAKES: You know Dr. Ruge.

Q I know Dr. Ruge. But, can you answer my question, please?

MR. SPEAKES: No, no one did.

- Q No -- you say no one did?
- Q -- no one did?
- Q No one did what?

MR. SPEAKES: No one did, no. This is the briefing of March 11, 1985 in which you spent more time on BMW's -- on the --

Q If that's '85, Larry, that's not the briefing I'm talking about.

MR. SPEAKES: Pardon?

Q If that's '85, that's not the briefing I'm talking about.

MR. SPEAKES: Yes, but I -- here's what I'm going to tell you. The question came up -- "There are reasons it's called a pseudo-polyp," I say. "It's not a polyp -- a pseudo-polyp. And they are there. This is exactly the same kind of polyp that was removed from the tests last year.

"Q Did you say it was a pseudo-polyp, too?

"MR. SPEAKES: Yes. This year's polyp was a pseudo-polyp.

"Q Last year's polyp wasn't a pseudo-polyp, was it?

"MR. SPEAKES: Well, it was.

I think it's a difference in terminology that the doctors referred to."

Q That doesn't address my question, Larry, which was why didn't you tell us in 1984 what kind of a polyp it was?

MR. SPEAKES: I think they also referred to it as a fibroid polyp in '84, too, the doctors did.

What you're doing, Mike, is going against the thesis of -- that the group is trying to preach an inflammatory polyp in '84 is a much less serious polyp. And you're trying to -- some of you are trying to make the case that it was a much more serious thing that required more of a followup.

An inflammatory polyp is one that the doctors very often do not recommend even removAL.

- Q But we're not --
- Q I'm not here to debate you, Larry. I asked you a question. And I think that --

MR. SPEAKES: I understand.

- Q I mean, that's what we're here for.
- MR. SPEAKES: But I was pointing out to you --

MR. SPEAKES: I understand.

- Q -- question, and I gave you the question.
- MR. SPEAKES: I understand. But I am pointing out --
- Q I'm still waiting for an answer.

MR. SPEAKES: I am pointing out to you -- I'll have to dig out the report -- but I am pointing out to you that an inflammatory polyp, a fibroid polyp, a psuedo polyp is a polyp that is the same kind discovered in '84, the same kind discovered in '85. In either case, the polyps are the kind that many doctors do not even recommend removal.

Chris. Then I'll go to the back for a while.

- Q Two things. On the photos, when are you going to decide whether you're going to release them?
 - MR. SPEAKES: Before you have to go on the air with them.
- $\,$ Q $\,$ Well, I mean, why would it -- at 2:30 p.m. would it still be a question? I mean --
- MR. SPEAKES: Because you have to send them to the lab and get them printed up, is what you have to do.
- Q And, secondly, I'm still confused on this one question of the variation as to why this is different than a typical B-1. If the variation goes to the fourth wall does the normal B-1 -- B-2, rather -- Duke's B, rather, go to --
- MR. SPEAKES: See, there are three or four -- there are at least four that I'm aware of, B-1, -2, -3 and -4.
 - Q Right.

MR. SPEAKES: This is the B-1.

Q Right.

 $\,$ MR. SPEAKES: The B-1 is listed this way because it goes to the fourth layer --

- Q Well, what would the normal --
- Q B-1's the worst B. Is that what you're saying?
- Q -- the best --

MR. SPEAKES: The best of the B's.

Q Is the fourth wall the furthest away?

MR. SPEAKES: Yes. It's the furthest on the outside. But it did not penetrate the fifth wall.

- Q That would make it a B- --
- Q What's B-2?
- Q A C, rather.

 $$\operatorname{MR.}$ SPEAKES: I don't know the answer to that. I can find out for you.

Gerald.

 ${\tt Q}$ -- sure I understand this. We will not have a chance to talk to the doctors anymore. And that is a decision of the Reagans. Is that what you're --

MR. SPEAKES: No, not necessarily. The doctors are not giving private interviews. They have been presented extensively in briefing rooms. And the doctors -- we're just not talking and answering every doctor out in the country that might presume to throw something up on this.

Lou.

- Q Do you have -- Go ahead --
- Q And that is a decision of the Reagans, is that what you're saying?

MR. SPEAKES: It is a decisions -- on the Reagans that their case has been discussed extensively and reporters have asked questions for an hour-and-a-half, if not more, of the doctors. And that, they feel very strongly about the patient -- the doctor-patient relationship is a private and confidential one and that they wish it to remain that way.

Now, anytime we present the doctors, they will come into a briefing room and answer questions for everybody. They're just not giving private interviews, is what it amounts to.

Lou.

Q My question is, if I remember correctly, after the President was wounded in 1981, and returned to the White House, there were reports -- the doctors came out here and gave us reports on his convalescence. Does the White House still plan to make doctors available, as you described them in this Briefing Room or in a briefing room?

MR. SPEAKES: Lou, we haven't crossed that bridge yet If we decide to, certainly we will. But we've not decided to yet. Just

have not made a decision on it.

The President seems to be in the superlative area as far as recuperation. And, at the moment, there are no questions that are pending about the President's recovery.

 ${\tt Q} = {\tt Well}$, that was the case the last time, too. He made a very rapid and --

MR. SPEAKES: But there appeared --

Q -- recovery.

MR. SPEAKES: The questions, for the most part, fall in the category of trying to second-guess by people who do not know the President's case.

I promised the back, Bruce. Let me try Sheila.

Q Do you know whether the President is aware of the interest his case has -- the trend it has sparked for other people to check on their own --

MR. SPEAKES: Yes, he is.

Q And has he expressed himself on it?

MR. SPEAKES: Yes, he has, and he's very pleased that people are doing that.

 ${\tt Q}$ Will he take part in any kind of active public information campaign, like -- the United Way --

MR. SPEAKES: I think previously he has, and I'm sure he would in the future. But, at the moment, we really haven't addressed any -- doing any public service spots yet.

 $\,$ Q $\,$ -- a clarification on your report you released that went into detail about the walls -- Was that Dr. Rosenberg quoting from the pathologial report that was --

MR. SPEAKES: No.

Q -- authored by someone else, or is that --

MR. SPEAKES: That was Dr. Rosenberg expressing what is in it. I wouldn't call this a quote.

Ira.

Q When Mrs. Thatcher called her condolences here, she spoke to Regan. And I'm wondering, in terms of protocol, why that didn't go to Bush, and, also, what other expressions have you had from foreign governments.

MR. SPEAKES: We had a number, which I enumerated here. It came into the hospital and the Chief of Staff was enroute from the hospital home. It was referred to his home because he was the one person at the hospital.

Owen.

Q But has there been anything since Gorbachev yesterday? Any other --

MR. SPEAKES: Oh, I'm sure there have.

Q -- expressions --

MR. SPEAKES: I just don't have a total on it.

Owen.

 $\ensuremath{\mathtt{Q}}$ Has the President made or taken any phone calls, other than from Mrs. Reagan?

MR. SPEAKES: That's the only one I know of, Owen.

 ${\tt Q}$ -- the White House taking phone calls that, in the course of a normal day, he might be taking?

MR. SPEAKES: The President usually initiates phone calls, and people who need to talk to him, I don't -- not that many phone calls come in to the President. I think people -- the President usually initiates phone calls.

So, the White House is operating virtually the same as it has with the President here. His office simply happens to be in the hospital room at the moment.

 $\,$ Q $\,$ On the issue of national security -- normally, McFarlane briefs him in person in the morning. Now, these -- he has written briefing reports that are --

MR. SPEAKES: Everyday he gets both a written and a verbal briefing. In the case of the weekends, normally he gets a written briefing. In the case of the weeks at the ranch, he has gotten a written briefing. In the case of the three work days that he's been -- has not been in the Oval Office, he's gotten a written briefing.

Q Has he been required during his stay to make any specific decisions on foreign policy or have they been --

MR. SPEAKES: I just really can't -- I'm just not going to go into that kind of stuff.

Let me go to Nelson. What?

Q I don't understand that. You don't want to say if he has or not?

MR. SPEAKES: No. I just can't -- I'm just not going to tell you what somebody might have said in the back room of the White House. I'm not going to tell you when the President makes decisions. We don't normally tell you that, so we don't tell you now. It's no different in our minds.

 $\,$ Q $\,$ Well, you normally do tell us when the President makes a decision. You usually announce it more -- I seem to recall during the hostage situation --

MR. SPEAKES: You may see about one percent of the foreign policy decisions the President makes on a normal occasion, and you will see that many here. The President made a foreign policy decision today, if you want to characterize it as that. He signed a treaty.

Q That's the kind of thing I --

MR. SPEAKES: That's true, but that's publicly announced. There are many more that you don't see on an ordinary basis and there are many more you haven't seen here.

Q Would you tell us if there have been any decisions that have been postponed pending his return?

MR. SPEAKES: No, no decisions -- domestic, foreign, or otherwise -- have not -- have been postponed.

 $\ensuremath{\mathbb{Q}}$ Do you know whether he's going to make his radio speech Saturday yet?

MR. SPEAKES: Don't know, Nelson. If we do, we'll certainly let you know in time.

Let me try the front row again. Mike.

Q Getting to that radio speech, does the President have a sore throat from the tube? Did he mention that today?

MR. SPEAKES: No, he didn't mention it at all, and he spoke in a very firm voice today and didn't seem to be -- perhaps if he talked longer, he might have a bit of hoarseness. But it didn't trouble him at all today.

Q And Senator Dole said this morning that he'd sent some names down to the White House for potential calls on the line-item veto. Do you know if anyone else is going to make those calls if the President --

MR. SPEAKES: No, I haven't seen them or any -- I haven't heard anybody discussing about the President making them. So I don't know.

- Q I have a medical question.
- Q How long will --
- Q Is the President taking longer and more frequent walks now? Has his ache decreased again? Is he still getting antibiotics?

MR. SPEAKES: The answer to one and three is, yes. I didn't get your second question.

Q Is the amount of pain that he was having initially still subsiding?

MR. SPEAKES: Yes, it is still subsiding. He was — got up out of the chair today and walked across the room without any visible sign of pain. I'm sure there's a little discomfort here and there this soon after surgery but doesn't give any evidence of any major discomfort at all.

Q How long will he be on the liquid diet?

MR. SPEAKES: Don't know. I think they just watch and make a decision as they progress.

So, Bernie?

Q Has he talked to Regan about his schedule when he comes back or about August?

MR. SPEAKES: They talked about that yesterday and about what we would do on the schedule. The President does plan to greet and meet with President Li of China on Tuesday. Other meetings will be scheduled on a regular basis.

The President is certainly going to recuperate in a normal fashion which would require for rest each day over a period of weeks. He does plan to go to California. Chances are he'll go out a day or two early, but not any more than a day or two earlier, and return at the normal time from California.

Q Does he plan to do the state dinner Tuesday night? That's a state visit, isn't it?

MR. SPEAKES: I would judge that there will be a state dinner and the President will participate in it. I think he may very well be just getting out of the hospital. But the President does feel it's important to meet with the President of the People's Republic and he will do so. The visit will go on and he will greet him. There will be a meeting and we will work out details later.

 ${\tt Q}\,$ Does that mean sitting all the way through the state dinner or just perhaps greeting --

MR. SPEAKES: I think he'll eat. He'll probably be looking for a good meal. (Laughter.)

Q Can you just give us a good sense to what extent Don Regan's role has changed these past few days -- what he's doing differently now, what new things he's doing that he wasn't doing prior to the President's --

MR. SPEAKES: There is -- Don Regan's schedule is pretty much as it has been in the past with the exception of a daily trip up to the hospital and meeting with the President there instead of here. He went to the Hill yesterday to meet with the House and Senate leaders on the budget. But he's done that before. He sat in on a breakfast and talked to the House -- to the Senate Finance Committee Republicans today. He's done that before. He presided over a

legislative strategy today and he's done that before.

Q Besides his trip to the hospital, what is he doing different? I take it you're saying nothing.

MR. SPEAKES: I'm sure there are a few things that he does to take up the slack, but nothing more than that.

These fellows are going to see the senior official, which others saw yesterday and someone sees everyday.

Sheilah?

Q Do you have any comment on The Washington Times story that the Soviets are pressuring the Syrians --

 $$\operatorname{MR.}$ SPEAKES: We saw that story and we have no confirmation of it.

Q What story is that, Larry?

MR. SPEAKES: About the Soviets pressuring the Syrians to give in, to help on the -- on the thing.

Q Can you tell us what happened in the Senate Finance Committee meeting?

MR. SPEAKES: It was a discussion both of the budget and of the prospects for tax reform. I don't have any details since I didn't get over there.

Q Will you be able to later?

MR. SPEAKES: What?

Q Will you be able to get some details?

MR. SPEAKES: I don't think so. I mean, it was a discussion -- about all that it amounted to.

Q Do you know if Regan has talked to the President about a new budget director and do you anticipate there might be an announcement before he's released from the hospital?

MR. SPEAKES: There could be. Don Regan is continuing to progress on talking to people from a list that he will show to the President and let the President make the decision. They have talked about it, yes. And he will talk more about it as time goes by.

I think we've about exhausted everybody.

THE PRESS: Thank you.

END 2:45 P.M. EDT

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