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John Moe: A note to our listeners, this episode contains mention of suicide.

Talking about trauma is a good thing. You know, trauma—like huge vents of great upheaval that caused a lot of damage? They're good to discuss, generally. Maybe not talking about all of it to everyone constantly, but processing it with therapists, writing about it, getting on top of your story and its effects.

Telling your story tends to be good and healthy. Hopefully, that's not a controversial statement. It can be healthy for the person doing the talking, and I think healthy for people listening as well. Because even though the stories can be very upsetting, very painful to imagine and inhabit by proxy—even for a few minutes—I think they provide wisdom and ideas on how to handle the listener's trauma, too. Because there's a darn good chance something terrible will happen in your life. And we're all stuck with each other, after all. We're all we have.

So, let's speak and listen and support one another. Granted, it's kind of a plus when the person doing the talking is a skilled comedian.

It's *Depresh Mode*. I'm John Moe. I'm glad you're here.

Transition: Spirited acoustic guitar.

John Moe: Ophira Eisenberg is a very funny standup comic, podcaster, and writer. She was the host of NPR's comedy trivia show *Ask Me Another*, and currently hosts the *Parenting is a Joke* podcast. Her standup and storytelling have been featured on Comedy Central's *Premium Blend*, various late night comedy programs, and on *The Moth Radio Hour*.

Her latest comedy specials, *Plant Based Jokes* and *Inside Jokes*, are available on streaming services. She's also the author of a memoir, *Screw Everyone: Sleeping My Way to Monogamy*. And Ophira has been through some things that we'll talk about—including a car accident at age eight, where Ophira was seriously injured, and her friend died. She also had cancer and experienced a miscarriage. Let's talk about that.

Transition: Spirited acoustic guitar.

John Moe: Ophira Eisenberg, welcome to *Depresh Mode*.

Ophira Eisenberg: Thanks, John.

John Moe: How are you today? Like, really?

Ophira Eisenberg: How am I? (*Chuckles.*) What? Like, really? I will tell you that my real state is actually being influenced by the fact that I went to go see—actually, I saw someone who has really done a lot of comedy in this particular vein of topic, Gary Gulman.

John Moe: Gary Gulman. He's got a new show, doesn't he?

Ophira Eisenberg: He does. And it's got some—you know, he talks about trauma and a lot about depression and how it manifested in his life originally and the events. And after that, I went out with a couple friends that I saw him with. And even though I said, “No, no, no. I cannot have two glasses of wine. I have to get up at six in the morning, because my kid goes to school—”

They said, “Yes, you can.”

And for some reason I said, “Oh yeah, okay, I can!” And so, this morning I had to—because it's hard when you're already—baseline is sad, and then you add depressants and lack of sleep. Then things will really crumble. So, this morning I did a 10-minute guided meditation, because I felt like that's all the time I had to try to not hate myself all day.

John Moe: For your health choices?

(Ophira agrees with a laugh.)

Okay, how did that work out?

Ophira Eisenberg: I mean, I guess it was a nice little nap.

(They laugh.)

John Moe: But when you call it a guided meditation, it sounds so much more enlightened.

Ophira Eisenberg: It sounds like—yeah. And it does sound like I'm actively doing something, so I can show up in a better space.

John Moe: Right. Right. There you go. There you go.

Ophira Eisenberg: Can I show up in a better space?

John Moe: Yeah! I guess that makes this the better space.

Ophira Eisenberg: This is the better space.

John Moe: Okay. Well, you're a host and an interviewer. How do you lead-in to, not one, but three traumatic events?

(Ophira cackles.)

Like, how do I open this conversation? Let's talk about that challenge host-to-host here.

Ophira Eisenberg: I know. It's like do you start with the big one? Do you do a little like, "Ha, ha, ha! I've experienced this! Any thoughts from your life?" Or yeah. "What was the worst? Rate them out of 10."

John Moe: Yeah. Do you go chronologically? Do you go alphabetically?

Ophira Eisenberg: Yeah. I mean, I think—or you just go like, "What happened in your last therapy session? What was the first?"

John Moe: What's top of mind?

Ophira Eisenberg: Yeah, no, it's a good question. I think there's no wrong answer.

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That's what I would say. You can start at the end; you can start in the middle. All that matters is that we get to talk about it at all.

John Moe: Yeah. Yeah. Well—

Ophira Eisenberg: Which is a good thing, truly.

John Moe: Maybe we start with the accident that happened when you were eight.

Ophira Eisenberg: Right! Childhood trauma always brings people together.

John Moe: Well, you know, we're going for the triple play of trauma here. We're going for the arc through your life. And if we're going to go in an arc, we might as well start at the beginning. And not to laugh too much about what happened, but can you tell us what happened when you were eight years old?

Ophira Eisenberg: So, just to be honest, I can laugh about it. Only because I—you would not believe. When something happens when you're eight, and you are now, you know, decades past that— There's still more to examine on this, but I've examined this from a thousand different levels. I've written about it; I've talked about it. I've talked about it in platforms like *The Moth*, where a portion of the story was really built for entertainment. So, I'm not going to make light of something for comedic sake, but I definitely have a different take on it as time has gone by.

When I was eight years old, my mother was driving me and a friend and my brother back from a day of swimming. It was early summer, and as we were turning onto our street— This is not true, actually. As we were turning onto the street to drop off my friend who lived in the next neighborhood, an 18-year-old guy ran a red. And that was one of those streets that was like a highway. It was pretty fast-moving traffic on that day, and he ran a red, and the timing was such that he smashed into our car.

So, now I will tell you that I, personally—all of what I'm going to tell you next is what has been told to me. Because I have no recollection of even the summer before that. And I learned all about this very slowly. So, I was the worst survivor. I was in the back seat with my friend, and she did not survive. We had different injuries. I think some the same, but some different. And she did not survive. I was in bad shape. Obviously. So, what had happened, it happened in front of a hospital. And I've been told my entire life that it was so lucky that this happened in front of a hospital.

Even though—John, we can talk about this! I hate the word, “Isn't this lucky? Isn't that lucky?” ‘Cause part of me goes, “Well, wouldn't it be lucky if none of it happened at all?!”

John Moe: Yeah. Yeah. It's an awfully—it seems like an awfully artificial spin on something tragic.

Ophira Eisenberg: Right. So, I guess if you had to have luck in that situation, that would be it. And I had—so, they ripped me open. I had a lot of broken bones, and they had punctured my lung and my liver, and my spleen had ruptured. And I had a lot of you know, obviously failing organs and blood loss. And my face was smashed in, and broken bones. And they told my father that I had a 50/50 chance.

And my favorite thing that I have been told—and I think about this often, as we were just talking about luck and not-luck and sort of the idea of how people play odds in their mind of what is lucky and what is not—is that supposedly my father, upon hearing that, started screaming in the hospital, “50%! Did you hear that?! She's gonna live! 50%!” Which, you know, that man was not very positive. (*Chuckles.*) So, the fact that that was his moment to become an optimist or, you know—or that's how he showed up in that moment. So.

And sometimes when I've been told that story—because obviously, I was not conscious to hear it—I have been told it like, “He said it loud, like he wanted you to hear.” We put a lot of currency in all these things.

So, I did—yeah, I was a little kid. It was a lengthy—for a little kid—road to walking around and living a life like any other kid. Because I was in intensive care for a month and then the hospital for another month. And I did forget how to walk, I had to go to rehab to learn how to walk. So, I was just bedridden for too long. And I had a tracheotomy, because of the collapsed lung being repaired; I was not breathing. So, I was so weak.

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So, then they gave me a second operation of a trach. And then I didn't know that my friend had died for a while, because they didn't want to tell me that.

John Moe: Why didn't they want to tell you that?

Ophira Eisenberg: I think they were... I'm now making assumptions. I think they were scared. (*Laughs.*) I think that's the basis. I think they were scared. I think it was so tragic that no one knew how to talk about it almost at all. And I think they were afraid that in my—you

know—weakened, needing to recover, you know, “You're such a strong girl; you could make this happen,” kind of world, that they didn't want to upset me.

But I kept asking. I kept seeing her mom and asking her mom to bring her to come see me.

John Moe: And they wouldn't tell you?

Ophira Eisenberg: Because I didn't know. Yeah. And then—yeah, I was still in the hospital when they did tell me. But it was—it seemed to me like a while. Like, I felt like I was just—I pushed it. I just pushed it and pushed it.

John Moe: Did you understand what had happened?

Ophira Eisenberg: No, and I still remember what was said to me—at least, I think I do. And what was said to me was that they said, “Remember how you said, when you were unconscious, that it felt like you were sleeping for a long time?” Which I guess I had said that. And they said, “Yeah, well, she didn't wake up.”

And that was that.

John Moe: Hm. What did that knowledge and that memory, such as it was—? I mean, it sounds like there was obviously a big gap in the memory. What did that do to the rest of your childhood? Like, did that make you morose? Did that make you nervous? What effect did that have?

Ophira Eisenberg: So, you know. So, I was raised by the people we now call the Greatest Generation. So, they were much older. And my mother, you know—

John Moe: How did they get that title by the way? How did they—? Did they write that themselves?

Ophira Eisenberg: How did they get that title!? Oh god. I know. This is what we call reverse marketing.

(They chuckle.)

So, yeah, I don't think they would have—you know, can you imagine? Can you imagine if they were like, “We're gonna call you the Greatest Generation?”

They would have been like, “Get the fuck out of my face.”

(John chuckles.)

My father, you know, joined the British Army when he was—he was from Israel, but it wasn't even Israel back then. He joined the—lied about his age to join the British Army to fight against Germany. My mother was a young teenager in Holland during the war. Her

school got bombed by the Americans, she will always mention. And one day that she missed school, and all of her friends died.

I'm just setting the platform here that these people had dealt with horror. And so, this was not—this was a terrible horror. I mean, I can't even imagine. But it was very much like, (*clapping between words*) “And now we move forward.” So, I didn't know any better. But we never like sat down at the table and talked about it. No one ever asked me how I felt. They were very much like, “You get up and keep going. Looking back is terrible. You got to just keep going.”

(*They laugh.*)

John Moe: Yeah. I mean, did that work?

Ophira Eisenberg: So, I mean, I think as a kid, what you do—or at least myself as a kid, you start constructing narratives. Because you cannot figure it out. And you know, I think what—

So, there's the very common sort of like survivor's guilt, right? So, there's a lot. And people say things to you. So, the amount of times, you know, people say, “You know, it's a gift from God that you're here.” It's a lot of that. So, you're dealing with all these strange things coming at you. “Gift from God.”

And then, you know, I remember feeling like almost ashamed at the idea that I should feel lucky. Like, I felt so shameful about that, because I knew it was that someone else didn't make it. And so, I didn't like that at all. I didn't like it at all when anyone said— And there was a lot of that, like, “You must be here for a reason. It's a gift from God. It's a miracle from God that you made it here.”

And then I constructed this other thing in my mind, because I was aware that it was tragic. And you know, we used to have to do exercises at home just for my lung, to like try to exercise it and gain capacity.

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And there was like different medical appointments for a big part of my life. But I constructed this narrative that every person—(*chuckles*) this is so childish—had a quota of bad things they could go through in life that they had to endure, and that because this had happened to me so young, I had met my quota.

John Moe: Oh, wow.

Ophira Eisenberg: And now, nothing bad would ever happen to me again.

John Moe: Mm. You came up with that on your own?

Ophira Eisenberg: I guess so! I don't know where it came from. (*Laughs.*)

John Moe: Did you eventually get therapy about this incident?

(Ophira cackles.)

Did you eventually—like, as an adult or something—find someone to talk to about this and process this?

Ophira Eisenberg: I mean, not ‘til fairly recently, John. Not ‘til—I saw some therapists—

John Moe: And going on *The Moth* doesn’t technically count as therapy.

Ophira Eisenberg: No, no, no. I definitely went to a therapist before that. But I went to a—when I lived in Canada, even though mental health is popular in Canada too, but I would say not quite—Someone can fight me on this, but not quite as popular. And definitely when I grew up there, the idea that even a school psychologist would come talk to you, or anyone in the school would come address this? Absolutely, not. It was never spoken about. Never!

You know what they did? Which I think is such a weird thing. I don't know if, in your elementary, you kind of moved up with the same class—like, the same people more or less were in your class as you moved up in the elementary?

John Moe: Sure, yeah.

Ophira Eisenberg: Okay. Me too. Like, kindergarten, it's sort of like the same—whatever—20 people or so. Maybe some people in and out. That next—this happened between the third grade and fourth grade. They switched me to the other class, technically. Which I was like, “Who made that decision? What? And what was that about?”

Like, I can presuppose that's someone's idea like, “Oh, it would be too weird to have this absence. She might be feeling this absence of this person in class. So, we'll switch her to the other class where she has no friends. And let her start over there.”

John Moe: *(Chuckles.)* Well, where maybe she isn't known as the girl who was in that terrible accident.

Ophira Eisenberg: I was known as that girl in the terrible accident. There was no way around that.

John Moe: That's something you carried with you.

Ophira Eisenberg: Yeah. There's no way around that, and I can't even think of what that means. Because at the time when I was a kid, you know, I did have some friends, and we played. And I do remember people speaking—you know what? I remember at recess seeing a couple of my friends drawing with a stick in the mud. Oh my god, it sounds like I'm the Greatest Generation.

(John chuckles.)

They were drawing with a stick in the mud. And as I came by them, they scratched it all up. And they—somehow, I found out that they were drawing the route of how the cars collided. Like, they were drawing a map.

John Moe: Oh my god.

Ophira Eisenberg: So, it just— But now that I say this, I go, “Oh my god, everybody was trying to process this.”

John Moe: Everyone was trying to make sense of it.

Ophira Eisenberg: Eeeverybody was trying to make a sense of it, and no one was guiding us. So, I got—I think I did okay on my own? Question mark?

Until I would say—until really I kind of muddled my way through, but always suffered from depression a little bit. I took—you know, got on some antidepressants when I lived in Toronto and saw someone for a little while. Moved to New York. Definitely got into a routine with a therapist and had a few different ones but, nonetheless. And you know, it's all—it's the root of everything. It's the root of everything in my therapy sessions. *(Laughs.)*

John Moe: Yeah. Yeah. It's an origin story, for sure.

Transition: Spirited acoustic guitar.

John Moe: More with Ophira Eisenberg in a moment.

Transition: Gentle acoustic guitar.

John Moe: We're back, talking with comedian, writer, podcaster, Ophira Eisenberg.

When you dealt with some of these other things—when you dealt with cancer, when you dealt with the miscarriage—did you recall that sentiment? That now I faced the only tragedy? That I filled my quota? That, you know, this shouldn't be happening?

Ophira Eisenberg: Yes, absolutely.

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John Moe: Which came first, by the way? Cancer or the miscarriage?

Ophira Eisenberg: Cancer. But my miscarriage was going to potentially be another cancer.

John Moe: Oh, really?

Ophira Eisenberg: And it didn't, thank god. Because the miscarriage was—so, they do a biopsy if you have a miscarriage, depending on your type of miscarriage. In my case, they did. And it came back that it was something not unheard of, but fairly rare. And nothing to do—like, it wasn't based on my age or my health or anything. It's called a partial molar pregnancy, which just means that it was never going to be a viable fetus. It was like a kind of chromosomal mistake.

But it's—so, it's a grouping of irregular cells. And irregular cells that grow are—that's like the most reductionist definition of a cancer is a group of abnormal cells that are able to grow. And so, the best place for a group of cells to grow at all turns out to be the womb, which is why you can make a baby. (*Laughs.*) So, they freak out if there's any abnormal cells at all in a womb, because it is the ideal environment. So, to make sure that even with the scraping and the D&C, that there was nothing left, I had to give blood every week for six months while they are basically looking at the hormone levels. And that—all of this, weirdly, was the worst. That was the worst.

John Moe: The waiting to find out if there was something in there was the worst?

Ophira Eisenberg: I think—yeah. I think there was a combination of, you know, whenever— If you or anyone you know has ever gone through any kind of extended medical thing, you really feel like you are trapped. Like there is no way forward, like you are living in a state where there is potentially no future; the past is irrelevant, and you can't bank on the future. You're stuck! You're stuck in this liminal place. And it's not particularly kind or uplifting or like—you know. And if you're already depressed, (*chuckling*) it is a dark, dark hole.

And then just by virtue of the fact that they were looking at the hormone levels meant my hormone levels were super high. They'd risen quite high, because my body had prepared me for pregnancy. And then there was not anything. So, from a hormonal point of view, I was like—to put it bluntly, I was out of my mind, emotionally.

John Moe: Yeah. And this was happening with your miscarriage, all this testing and everything. This was after you had already gone through breast cancer.

Ophira Eisenberg: Just after. (*Laughs.*)

John Moe: Just after.

Ophira Eisenberg: Just after. I mean, it was like about—I finished the breast cancer diagnosis, surgery. And then I did radiation, and it was—my oncologist wanted me to take Tamoxifen, which is a drug. It's an estrogen related drug that is given—sorry. It's a drug that's given often to people with an estrogen—like, breast cancer, because there's so many different breast cancers.

And I kept pushing her and saying, “Is it mandatory I take it, or is it recommended?” And because I went to Sloan Kettering, and I know a little bit from just looking at different cancer hospitals that— Everything I've done with medicine, if I could bestow on anyone, is that it's

called the medical arts for a reason. The more doctors you talk to, the more you will realize that they all have an approach. I really think that they should give us portfolios. Let's see all your work. I want to see a painting. I want to see a song. Like, I—

John Moe: (*Chuckles.*) Contrasting monologues.

Ophira Eisenberg: Because you're getting their handiwork on you and their approach, and everyone's a little different. And Sloan Kettering is the most conservative in terms of their approach. And there's a great comfort in that, but they will like annihilate cancer—right? And a lot of people have different philosophies.

There's a lot of—especially with breast cancer, there's a big movement of like basically breast preservation, that you are trying to remove as little tissue as possible. Because that's better if you can, for a lot of different reasons. But Sloan was very much like, “You will remove the most tissue ever and give the most drugs ever!”

So, I kept pushing Tamoxifen. Because if you take tamoxifen, you cannot get pregnant.

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And there was this little, tiny glimmer in my mind about getting pregnant. I don't even know why. It had never occurred to me before.

John Moe: Yeah. When were you diagnosed? How old were you when this was happening?

Ophira Eisenberg: For the cancer? I got like 40 on the mark. Yeah.

John Moe: Wow, okay. What kind of pressure did you feel to be brave?

(*Ophira laughs.*)

And to make it okay for other people that you were going through this?

Ophira Eisenberg: Oh, that is what I railed against the most. Now, you know, just to be clear, it was an early-stage breast cancer. Although, I think something happened to me mentally, that was never able to accept that. One, like I'd mentioned, I built up this whole invincibility, childish narrative in my mind. But somehow, John, it existed in me. So ridiculous. And some sort of preservation/protection—I don't know. But it was still in me, that that's who I was. And it was my story in my mind.

And then this happened, and that shattered. Like, I just couldn't believe it. And so many people ask why, when terrible things happen to them—whether it's a diagnosis—just any number of things. Why, why? Why me? Why, why? A terrible question, because often there isn't an answer.

John Moe: Yeah.

Ophira Eisenberg: And it's not your fault. But man, I felt so betrayed. And unfortunately, the person that delivered the information to me was a stand-in for my OBGYN, who was on maternity leave. And this person was not skilled and did not—wasn't even supposed to do this, because an OBGYN isn't supposed to read the results of a mammogram. That's supposed to be handed to someone else, if it's something like this.

And so, she brought me in after calling me and saying I had breast cancer on the phone while I was actually doing a rehearsal for the third show of *Ask Me Another* in Washington, DC. Brutal. And then we called—I went into her office, and she said, “You have breast cancer.”

And we were like, “Well, what stage?”

And she was like, “Could be stage one. Could be stage four. Could have spread to your lung. Could have spread to your liver. Could be in your lymph nodes. Could be in your blood.”

We're like, “What are you talking—?! Am I gonna die?”

“It could be fate.”

I mean, she wasn't supposed to say any of this stuff! And when then someone actually interpreted the thing, they were like, “Okay, it's not life threatening, basically, if we treat it now.”

But because I had gone down that path, when someone told me I had—I will admit—a life threatening—said I was potentially gonna die? My first thought was, “Don't worry, I'll take care of that.”

John Moe: What does that mean?

Ophira Eisenberg: I was like, “I'll kill myself. I'm not going through this.” And I feel like through the entire cancer journey, I never bounced back from that.

John Moe: From that darkness?

Ophira Eisenberg: From that darkness. I never got to the place where I was like, “Okay, we're dealing with this. It's not going to be life threatening if we just do this.” I was angry. I hated it. I was a bad patient. I was a bad patient. And part of me— And I hated the pink ribbon campaign. (*Chuckles.*) I hated seeing those fucking pink bows everywhere. And I hated the pictures of all the women smiling on bikes.

I get it. I totally get it. Because it's—you need community, and you need something to be uplifting. But I felt like it silenced me. And I kept thinking of other people with more intense diagnoses and harder and longer treatments, and how it might be silencing them, and how they were being told—as I felt like I was being told—to smile and be brave and be a great patient. And you know, let's all band together!

And I was like, “What if that's not it? Like, I'm not sprinkling glitter on this pile of shit.”

So, I was very angry the whole time. And the surgery for this is barbaric, and there is no—and I was just told to take Xanax. And I was like, “No.” (*Laughing.*) I also just refused everything. I was like, “Oh, you just want to drug me up to shut me up. No.”

John Moe: Why didn't—?

Ophira Eisenberg: What a bad patient I am. (*Laughs.*)

John Moe: Yeah, didn't that make it worse? Didn't you realize that that was gonna make it worse? Or did it make it worse?

Ophira Eisenberg: I mean, nothing was pleasant. But I was like, “I'm not taking a drug to make you feel better.”

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I felt like they were like, “Oh, you seem to be going through a lot of anxiety.”

I was like, “Well, how do you want to help that?” And their answer was: take a medication. I was like, “You got nothing else? No. The answer is no. How about something human? Try a human something. Got anything human? No? Okay.”

John Moe: It's interesting to me—and these are completely different events, the car accident and the cancer. But there was so much after the car accident of “Let's not deal with it; let's not even tell her that her friend died, but then let's not process this horrifying tragedy that occurred.” And then when you're faced with the cancer, you're like, “Just walk through the middle of it. Just give me all of it on a plate, and let's live the horror, you know, in a fully realized way.”

Ophira Eisenberg: So, I think you should—you're like a borderline therapist. You are a borderline therapist, John!

John Moe: (*Chuckling.*) I'm a talk show host.

Ophira Eisenberg: Yeah, I know. But I'm sure from just— You know, obviously you've talked about this stuff for a while, so I'm sure you're—you know—a smart guy; you can start putting it together. But I think you're right. And I think what happens—which I've definitely spoken about in a room with a licensed professional—is that in a way like, you can run, but you can't hide. And the tragedy of the car accident was never fully dealt with.

And so, when the cancer happened, you could call it the second car accident. Like, in a way, it was, “There we go. Oh, you think your wounds have healed? We have just cut them open, and now it's fresh.”

Because I think the—you know, I think the sort of platitudes that we throw around, and just the stories that we like to tell in our culture are very much like you as a survivor of anything. You have resilience. And we say like, you know, “What doesn't kill you makes you stronger.” Gary Gulman actually talked a little bit about that in his show. And sometimes it doesn't! Like, sometimes what doesn't kill you doesn't make you stronger. It makes it harder, because you can't believe you have to do it again.

I mean, I think as a nation, that's how everyone's feeling right now. And I think—because I don't know what it would have been like for me to fully process it. If I just imagine—let's just pretend I had a great team that walked me through, especially as a child, of how to think and come to terms with the car accident, and I was given all the information, and I knew— I still feel like I'm missing information. That I understood it and knew it, and the cancer is still part of the story, how would have that have gone down? Would I have gone, “You know what? I've been through worse. I can get through this.”

That's what you want to imagine. But yeah. I definitely had to go back to the beginning. So, I was a very awful patient, the whole way.

(John chuckles.)

Transition: Spirited acoustic guitar.

John Moe: More with awful patient Ophira Eisenberg after the break.

Promo:

Music: Exciting synth.

Mallory O'Meara: Hey, there! Do you like books about various shades of gray?

Brea Grant: Maybe 50 of 'em? Or books about winged men searching for soulmates?

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Brea: You can find our new show by visiting MaximumFun.org/spicy. That's MaximumFun.org/spicy.

(*Music ends.*)

Promo:

Music: Sophisticated electronic harpsichord.

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Teresa McElroy: And I'm your wife host, Teresa McElroy.

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Teresa: Manners, shmanners, get it?

(*Music ends.*)

[00:35:00]

Transition: Gentle acoustic guitar.

John Moe: Talking with Ophira Eisenberg about traumatic events, including her cancer—during which she says she was an awful patient.

Did that feel good to just say “fuck it” to the other approach?

Ophira Eisenberg: A little bit. A little bit. And I think I felt like I— (*Sighs.*) I mean, I don't think it was helpful to anyone, but I felt like I needed to see through it. I felt like I needed to see through the fact that like every office in Sloan Kettering is the same beige and the same kind of bland nature photo. They change the photos depending on—like, the art on the walls;

they change the photos depending on the season. And so, you get to figure out how many seasons you've been there by looking at the photos on the wall.

But there's like nothing else of any—you'll never find someone with a picture of their child on their desk or, you know, a vase. There's nothing. It's so generic. And I felt like that was purposeful. Because you have this entire place—whether you see it as a treatment center, or a morgue—filled with people who are dealing with some of the heaviest stuff in their life. And the idea that they might attach to something I think is what they're—someone came in and told them that's not what you want to do.

(John affirms.)

But that genericness—like, I felt like I wanted to talk to someone about how ridiculous it was. Like, how all these attempts to make things less hard made it harder and less human.

John Moe: You wanted all the information. You wanted everything you could get your hands on.

Ophira Eisenberg: I wanted all the information. And I think I ended up going to a therapist/psychologist who worked at Sloan Kettering, because I found out—a little too late, I may add!—that they offer health services within the hospital for free or for a low cost. I did have insurance at the time. So, to talk to you— And so, I did see this guy a bunch of times, and I don't remember much about it. But I do remember saying to him, “What do you do with people who come in here and have days, weeks, months left in their life?”

And he said, “We start talking about priorities.”

And I got to say, that was one of the most helpful things anyone has ever said to me about anything. And it was the phrasing. Priorities. He didn't say like, “We start talking about like their bucket list or what they love or a passion.” It was priorities, because priorities can be “move the money”. I don't know. Priorities can be like “sell the house”. Priorities can be, you know, “See my brother, hug my—” You know, it's I thought that was so—

I don't know. It's simple. It's so simple, yet I'd never heard it before. And that is one of the things I think about all the time. When I get very low, I go, “It's time to think about the priorities.” And not in terms of like sealing up the house, but I'm like, let's get the top three things out there right now that are important to you. And everything else is garbage.

John Moe: Was your approach to handling the miscarriage similar to your approach to handling the cancer?

Ophira Eisenberg: I was a lot nicer to those techs. *(Laughs.)* Because those poor techs—I mean, on some level, they have the worst job. Any technician, they are not allowed to give you any indication of what they are seeing on their screens. They're just not. But they know! They know how to interpret stuff. They have to. And we're all—I mean, I feel like I'm always staring at them, like studying their every facial tick, like I can break this covert spy and figure out where—you know, the truth.

And so, I was a lot nicer to those texts. But you know. I mean, the radiation felt very much the same. I don't know if you've ever had to go in for any kind of medical thing that is just so—like, routine in the sense that you have to do it continuously, every day, every week, for a long period of time. It wears on you. That's just your entire life. Your entire life is just mapping that out. The travel, the this, the time, the appointments. You're always waiting. I mean, in New York you're always just waiting, because everyone's running behind.

[00:40:00]

So, I hated it. But I was a lot nicer to those people. And then they would send me the results in the fucking portal! And I—

John Moe: *(Under his breath.)* Oh, the portal.

Ophira Eisenberg: THE PORTAL!

John Moe: *(Chuckles.)* It's the worst.

Ophira Eisenberg: It is the worst! I now say no to the portal for everything. For everything. Yeah—oh, you know. And yeah, so the portal was—every time I got the results, I basically saw the numbers going down. So, that was a happy day. And then you would just go— You feel like your life is an apartment that's on a week-to-week lease.

You're like, “Got another week! Proceed!” It's a very weird way to live. And you know, just—I don't— I can't believe I glossed over this with the cancer. Now I feel like I'm trauma piling. But anyways.

John Moe: Well, you've had some trauma. *(Chuckles.)* It's not piling; it's just sorting.

Ophira Eisenberg: So, then we—you know, we have this cancer diagnosis. I go for the surgery. This woman—they're all great. All the people that work there are great, in terms of they're highly skilled. They don't have those jobs because they finished in the middle of their class. Okay? They're the top. And there's plenty of people, by the way, in the medical field who finished at the bottom of their class. Just be aware of that. *(Laughs.)*

John Moe: Yeah. And they're still called Doctor.

Ophira Eisenberg: They're still Doctor! There's a reason why we said the term “the good doctor”. Not all of them are good! *(Laughs.)*

John Moe: At some point, you're going to get in an airplane with the worst pilot in their class.

Ophira Eisenberg: Exactly! Exactly. I think about that all the time.

She was good. And she—you know. (*Frustrated sound.*) So, this is—they're removing tissue, but it's not a—like, it's not something you can see, like a black mark or something. You know, they're using wires that they've stuck in your body based on the mammography, and they're cutting in. It's this very like almost blind art of taking out this tissue. And then they sewed me back up, and I healed a bit.

And then I went back in for them for testing to see how they did. And they thought they saw more. So, they were like, “Okay, you're gonna get another surgery.” And you know, I think I already felt like I was hanging off the precipice, but that was it. That was it. I was already not a nice patient. Then I was enraged. And you have to get little points of—tiny little dots on your body tattooed for the radiation, which was every day for a month. And I don't have any tattoos. I have a lot of scars, obviously, from these different operations that I had when I was a kid. And I did not want those tattoos.

And I just—I was like, “What if I was an Orthodox Jew?” Like, I was trying to come at it—I gave those people such a fucking hard time. And these techs who were fresh out of med school are doing this tattooing. And they have tattooed themselves on their wrist or whatever, to show you how it's such not a big deal. And I was like, “Nope! No. No tattoos.”

And they were like, “Is it religious?”

And I'd go, “Yeah.”

And finally the radiologist, who was this celebrated radiologist that was, you know, the head there, came and talked to me. And he was—I remember he had a British accent. And he just sat down, and we talked. And it was really the first time that I'd had just a real, human conversation. Because a lot of time it's a machine, you know. It's a machine. That's why I said no to the Xanax, because I just felt like they were like, “Ugh.” Like, I felt like a bad dog. Like, the bad dog at the kennel that kept barking.

(*They laugh.*)

And they were like, “Ugh, can we just put some Prozac in the kibble?”

John Moe: Some Trazodone.

Ophira Eisenberg: (*Laughs.*) And so, we talked. And he was very rational, and he was really nice. And I agreed. And then I agreed. And I walked back into that room not at all defeated. (*Chuckling.*) Truly, I was so mad to see that tech again. It's like, “Fine. Don't think you won, sister!”

John Moe: Was the anger—like, was that a source of power that you needed when you felt powerless?

Ophira Eisenberg: I think so, yes. Absolutely. Absolutely. I think it was definitely coming from that. And I do—you know, I feel really—I feel this way all the time in every walk of life.

[00:45:00]

Like, at a Starbucks. Any time I feel like I am being made to go through—you know, like not everything should feel like the DMV. You know? Not everything should just feel like this is a faceless machine, and you will be provided this generic situation, and you will respond to it well and move on. Like, I just cannot do that. I can't.

John Moe: Do you think about him in terms of that quota of tragedy that people have to face?

Ophira Eisenberg: God, I wish that existed. Now that I am older and wiser and look around this world, I realize that I have only—even with all my trauma-loading, I have only survived a minimal, compared to many other people, sadly. So, my quota is rather low. But that also being said, John, anyone that I talk to that's like, “Nothing bad has ever happened to me,” I'm like, “Okay, so we will not be friends.”

(They laugh.)

Because I am not interested in that!

John Moe: Ophira Eisenberg, I want to thank you so much for talking today.

Ophira Eisenberg: Oh, come on, my pleasure. *(Laughing.)* I feel better. Do people—? I hope people say that all the time.

John Moe: We'll schedule another interview for next week.

Ophira Eisenberg: *(Cackles.)* Thank you so much.

Music: “Building Wings” by Rhett Miller, an up-tempo acoustic guitar song. The music continues quietly under the dialogue.

John Moe: That's Ophira Eisenberg. You can hear her podcast, *Parenting is a Joke*, wherever you get podcasts.

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Our electric mail address is DepreshMode@MaximumFun.org.

Hi, credits listeners. It was -8 degrees when I let the dogs out this morning. And whenever it's minus anything, I feel like I owe the world degrees. Somehow I gotta cough up eight degrees to give to the world. I don't know where I'm gonna find eight degrees.

Depresh Mode is made possible by your contributions. Our production team includes Raghu Manavalan, Kevin Ferguson, and me. We get booking help from Mara Davis. Rhett Miller wrote and performed our theme song, "Building Wings". *Depresh Mode* is a production of Maximum Fun and Poputchik. I'm John Moe. Bye now.

Music: "Building Wings" by Rhett Miller.

I'm always falling off of cliffs, now

Building wings on the way down

I am figuring things out

Building wings, building wings, building wings

No one knows the reason

Maybe there's no reason

I just keep believing

No one knows the answer

Maybe there's no answer

I just keep on dancing

I'm always falling off of cliffs, now

Building wings on the way down

I am figuring things out...

(Music fades out.)

Transition: Cheerful ukulele chord.

Speaker 1: Maximum Fun.

Speaker 2: A worker-owned network.

Speaker 3: Of artist owned shows.

Speaker 4: Supported—

Speaker 5: —directly—

Speaker 6: —by you!