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Automated Transcription – Episode 2 Season 3 – Meet Niall Breslin

A diagnosis of breast cancer can cause a lifechanging ripple effect of impact, affecting those we love the most and those upon whom we lean, for comfort and strength in the most challenging of times. My name is Aisling Hurley and I'm the CEO of Breast Cancer Ireland and you're listening to More Than A Lump, a podcast that talks openly and honestly to a selection of guests about their very personal connections to breast cancer – be it through their career choice, their own first-hand experience of the disease, or through sharing the experience of close family members. My conversations will centre on how breast cancer has informed their perspective on life, love, family, health, their goals, and aspirations. Although each story is utterly unique, the one common thread that runs through each one, is that breast cancer is more than a lump.

Care Plus is Ireland's leading community pharmacy brand, offering expert advice and services for a healthier and happier you. Find your nearest Care Plus on careplus.ie or follow them on social media for daily health and wellness tips.

Niall Breslin, or "Bessie" is one of Ireland's most formidable and inspiring mental health advocates and public speakers. He's a bestselling author, podcaster, musician, philanthropist, and a former professional athlete.

Back in 2014, Niall very kindly judged our Strictly Against Breast Cancer gala event, which took place in the National Convention Center in front of over 500 supporters, friends and family. He was joined on the stage by the late Emma Hannigan, one of our beloved ambassadors who sadly passed away in 2018. Niall knows very well the work we do and he joins me today to share his own personal experience of facing his own health challenge and how this experience has informed his journey to becoming a leading figure in mindfulness for individuals and indeed organizations.

Niall you're very welcome to More Than a Lump podcast. We do appreciate the time you're taking to come into the studio today to chat to our listeners.

Speaker 2 (<u>02:05</u>):

My pleasure.

Speaker 1 (02:06):

I mentioned in my introduction that we met back in 2014 when you were one of our judges at our gala event. That was such a memorable event, wasn't it?

Speaker 2 (<u>02:14</u>):

I think the most memorable part of it is the fact that you had me judging a dancing competition. When I have to be absolutely clear with you, I am the worst dancer you have ever seen. I hurt people when they dance, and it's never me <laugh>. I've been asked every year to do the, the celebrity, the Oh yes thing.

Yeah. And I'm, I glad you don't have the insurance for me to be dancing on RT <laugh>. Honestly, it's, it's just something I have. I have tried it, and I remember sitting there that night going, what am I meant to say? Like, I'm like, I, I, there's some of the stuff that I was saying, and Emma was like, elbow me to say this. I was like, okay, cool. But, you know, at the end of the day, for me, dancing, singing, whatever it is, once you commit to it, that's what matters to me. So that's what I was looking for. Somebody who was just going for it. Even if they know they weren't great at at it, they were like, let's go for

Speaker 1 (03:00):

It. I know. And what was interesting is, and a lot of times we would look and we would say, right, okay, these people couldn't dance. You know, we taught them how to dance over like a 12 week period. You know, they'd come in one day a week into the dance studios, and they were partnered with somebody who possibly could dance and was better, but it was really, it was coming outta their comfort zone. Many were breast cancer survivors, as you know mm-hmm. <affirmative>, or had been impacted by the disease. So for me, it was always great to show just having empathy for them, you know, understanding how tough it is to get up in front of 500 people and dance. You know, even I used to say to them, look, the dance is only two minutes, 50 seconds, you'll be fine. And I thought they're going, eh, yeah. Did you want to do it yourself? No way.

Speaker 2 (<u>03:40</u>):

<laugh>. Well, I was watching strictly for the, for the first time I watched it on Saturday. I was like, right. Was it my, my partner's parents. I was like, she was, my mother was watching. I was like, oh God, I'll have to watch this. And I watched it and you know what? I was just going, I had so much admiration, like when you really get out of the kind of idea of the celebrity and the lights and stuff and the level of sacrifice that to be that good, you know, because by the end of it, like most of them, I couldn't tell the difference between professional dancers and, you know, that's how good it was. So, yeah, I have a lot of anyone who gives that a shot, like whether it's performing, singing, public speaking, dancing, it's, it's a huge fear for people. And even if it's two, two minutes and 50 seconds, it doesn't matter if it's 10 seconds. No. It's still the, it's the idea of getting up and doing it. So yeah. Anyone who does it that night, you know, it was, it was great craic as well. Like, it was just, it was a good feel, good vibe. And I think those types of events, it kind of breaks down the fear barrier that many people have, you know? Mm-hmm. <affirmative> mm-hmm.

Speaker 1 (<u>04:33</u>):

<a href="<a href="<a href=" <a href="<a href="<a href="<a href=" <a href="<a href="<a href="<>a href="<a href="<a href="<a href="<>a href="<a href="<a href="<>a href="<a href="<a href="<>a href="<a href="<a href="<a>h. You know, and we did it for so many years, and I suppose Covid stopped us dead in our tracks in 2020 because we were already training. So we had a whole team lined up. We'd been training since early January, and then March kicked in. Everybody locked down. So they were all devastated not to be actually coming to do it again, you know? Well,

Speaker 2 (04:58):

I think I shot myself in the foot now, so you, you, you can't get me back to judge. Cause people are like, what would you know about it? It's the same with the singing contest. You be singers and let the voice who are 10 times better singer than I am. I'm like trying to judge them. I'm like, mm, I can't really sit here and do this anymore. But, you know, at the end of the day, we were doing it from a place of meaning and

heart. Like you never, you know, with the voice and stuff. The thing about it was, I have a very different opinion of singers, the types of singers I like. Mm-hmm. <affirmative>, I like singers where I feel them. I don't, I, I don't need, I almost only hear them. I feel them. And my favorite singers are technically not great singers. You know, Joe Strummer and the people like that who are just, you know, you feel what they're saying. And then some people love real overs singing. I don't like that type of singer. Yeah. It doesn't, doesn't sing to me. So, yeah. Yeah. The voice was a, an interesting way of, of how art in any way is subjective.

Speaker 1 (<u>05:47</u>):

Yeah, totally. Totally. And I suppose this podcast is all about helping us navigate the trauma of a breast cancer diagnosis and treatment, but for most of us life can throw, throw many, many challenges at us. So now can I ask you to share something of your own health crisis and how mindfulness has helped you?

Speaker 2 (<u>06:04</u>):

Yeah, I, you know, I've, I've been lucky, I suppose, physically in my life with, with issues. And I've had a few horrific kind of injuries from, from sport and stuff like that. But that's just part of your game. But I've, I've struggled since the age of about 13. When I came back. I lived in Israel and, you know, what's happening this week with the tr tragedy in Lebanon really hit home because I was there and my dad had four deployments in Lebanon. You know, and I think it was very raw for me and my family to see what was happening. And absolute hun just sincere condolences out to all the families. Like, eh, I don't think people realized what it's like to say goodbye to your dad or mother or your, or your mother at three or four in the morning. Yeah. To go away for six or 12 months.

(06:50):

That's what we were doing. So, huge sacrifices by the Irish Defense forces. And they, they deserve respect and a lot more respect. Respected, I often think they're given. And I went to Israel, I was 13, and when I came back I kind of experienced pretty traumatic time there in terms of, there was a war nine day war that we were in the middle of and, you know, mom shelters and all that kind of stuff. And, but I used to always think that my mental health, uh, journey was in some form of posttraumatic stress. But actually when I did dug deeper into it, and I went through my years of therapy, it was a very abusive primary school that, that had that kind of impact on me. Where, you know, it was very physically abusive in our school, very, you know, not to get into it in much detail, but it wasn't a great place to be.

(07:34):

And the most basic need of any child is to feel safe. Mm-hmm. <affirmative>, he removed that from a child, it will affect them for the rest of their life. Yeah. And that's why when we look at things like child homelessness in, in Ireland, we need to look past figures that'll affect them for the rest of their life. That's how social issues work like this. They don't work in isolation over course of your homeless for six months, and now you're not homeless that will stay with children. That's how psychology works. You know, your experiences influence your life. So for me, I went through my teenage years completely and utterly, uh, I suppose chronically panicking. Uh, it was the nineties. The only time I had ever heard mental health mention was when my hero died, Kirk Cobain. And I asked my teacher what happened, and he punched my desk and called them Mac coward.

(08:16):

So a lot of my work has driven from these experiences that if it was different for me as a teenager, I would've been able to navigate a lot of what I was going through. But then I carried that into

Adulthoods, and when I was a professional rugby player, I started experiencing quite acute depression to the point of, you know, not being able to eat, not getting outta bed, not functioning, but trying to be a professional athlete, which led to my retirement ultimately. Okay. Uh, and that was it. It was just, it was a consistent and constant fight with my, my mind for 15 years. And then I hit a rock bottom, which is often what happens. And actually part of that was 10 minutes before live TV show. I, I had a really, a really horrific panic attack. And I remember thinking, if that had happened on air, what would've people thought?

(09:02):

What would they have said about me? And actually, ironically, it was driven by the fear of what people would think if they had experienced it. So that kind of created the catalyst for me to kind of, to ultimately break down and start seeking help. I went to my doctor for the first time. Uh, I purged myself to my doctor. I, you know, I started speaking to my family, aga about it properly. And then that led me on a, a long journey with therapy and other forms of interventions and, you know, came back to a point, but I, I, I don't like this idea of coming back or cure. It's not, it's not, I'm always, I will always be an anxious person. It'll always be in me to be that, because my anxiety generally comes from my fear of others and what others are going through.

(09:52):

So it's an empathy, anxiety, I call it. Okay. I don't want to change that about myself. Mm-hmm. I love that about myself, but overwhelms me sometimes. So I need the tools to deal with that. Mm-hmm. Um, and things like, I haven't experienced kind of acute depression since probably my twenties to mid twenties. So, but having gone through it, I've quite, uh, it, it's, it's not a bad day. I think it's very important to point out. It's not a bad few days. It's a very, you know, it's classes of disability, you know, by World Health Organization and UN because you can't function. It's very hard to function when it's, when it's pretty cute. So that was my kind of experience. And then that led me on a, a complete scenic route of therapy, talking intervention supports medications and led me back into academia because I wanted to understand my own head as well as other people's heads and what I can do to help.

(10:47):

But ultimately what it all led me to understand is that we cannot talk about the human condition until we talk about our culture and our society and the influence that has on us. And that's where my, my studies are now bringing me into more, more in the area of sociology of like what are the social forces that allow people, uh, to get to those places of utter, utter difficulty. Um, and obviously there's medical doctors who, who will talk about the biology of it, but I'm more interested in the cultural elements of, cuz me, for me, much of what I went through, I could have dealt with if I was intervened early properly, uh, where I was able to express myself mm-hmm. <affirmative> where I was in an education system that caught me. Yeah. Where I had a health system that could intervene and support me mm-hmm. <affirmative>, I wouldn't have had to gone through all that. Yeah. So that's why I'm very passionate about early intervention and how we can do it.

Speaker 1 (11:42):

And it's interesting you say that because in so many of the podcasts that we have done with various different guests, um, those that have been through a breast cancer diagnosis, one of the key things that keeps cropping up is that sense of fear that not only so they're treated by the hospital and their medical team and that's great. And they're going every week or every other week to the hospital for their appointments. And as soon as those strings are cut and they're in remission, all of a sudden that fear

grips them. And they find so many, even 10 years, 11 years down the line, they're really still very anxious and very fearful. They got it once for no reason and they could get it again. And I don't think, like you say there, the services are there or the support mechanism is there to help them through that kind of, to navigate that section of, of treatment.

Speaker 2 (<u>12:30</u>):

I don't think, you know, to be honest, my mom is involved, has been involved. Not anymore now cuz she's kind of, she needs to rest. But in Lark and Lenga, which is an emotional support service for, for people who are going through cancer and people in her remission. And firstly, I wanna say I, I I, I couldn't imagine what that feels like. Mm-hmm. So I'm not here to start talking about or theorizing, I couldn't imagine that level of fear and, uh, overwhelm that something comes into your life. My, my auntie passed away from breast cancer only, uh, three months ago. And, and I saw the fear that the whole family had to deal with mm-hmm. <affirmative>. So for me, what I wanted to do today is maybe talk about things that might be able to help you deal with that fear because that fear is normal.

(13:17):

Absolutely. And you shouldn't repress that fear or internalize it. The problem with fear is when we internalize it and we push it down, we don't express it. Cuz we've created a society that makes people really uncomfortable other people's pain. So we force them to, to mute it. That's not what you want to do here. Like anyone who's gone through cancer or is in remission, that fear is a perfectly healthy human response to what they've gone through. And they shouldn't. And we shouldn't even entertain the idea that people can't express it and work through it. And maybe there's some things I can suggest that might help that, but everyone I'm guessing is an incredibly subjective experience. You know, what, what's their infrastructure like, what's their family community like? Mm-hmm. <affirmative>, all these things probably play into this. Yeah. But when it comes back to the individual, the reason mindfulness, I'm really wary around mindfulness as a mindfulness teacher.

(14:07):

And because it's sold as the great panacea that'll solve all the world's problems. And it really isn't. And I think, you know, there's probably mindfulness teachers listen to this going, what are you saying? Mm-hmm. <affirmative>, we have to be honest about it. I think sometimes w we try to tell people not to feel these things. These things, we call it spiritual bypassing and mindfulness where they go, well, I'm meditating, so all the other bad stuff in my life I don't have to worry about. We see it in religion, especially when they say things like it's God's will bullshit. Absolutely. You know, come on now, that's spiritual bypassing. Yeah, absolutely. And it's, it's also what you're doing there is, it's a form of gaslighting really. Yeah. When you break it down mm-hmm. <affirmative>. So for me, what I try to do mindfulness is teach people that the emotions that we all experience is what makes us human beings.

(14:53):

Mm-hmm. <affirmative>, it's in fact, once it, back back to the cultural thing. Yeah. You sit in the, you know what you're mate and you come in and you say to them, I'm, I'm having a really tough time. And your mate's like, Ooh, do you wanna go for a pint? No, no, I don't. I just wanna talk about the, and this is what I'm very passionate about, is creating communities and frameworks for discussion so people don't have to repress these fears that they're naturally experiencing. Because of course you'd be, and what happens with fear though, and this is where we probably have to talk about this thing, we start to train ourselves to become hypervigilant. So if you get into the physi the physiology of fear, when your central

nervous system is on all the time because it thinks it's under, there's threat, threat, threat. That's how the central nervous system works.

(15:34):

It works off threat. You're the o the number one priority of your brain above everything else is to keep you alive. It's a security guard, it's an alarm system. And we always think it's trying to hurt us, but actually most of the time it's just trying to protect us. Okay. You know, after that, things like rational thinking come second, but the first job of your brain is to stop you being hit by cars or attacked by lines back in the day. Mm-hmm. That's what it's meant and that's how it functions. That is the same brain we have now. So what happens with that type of brain is the central nervous system is divided into the sympathetic nervous system and the parasympathetic nervous system. Now the parasympathetic is the kind of the rest and the, you know, watching Netflix, eating crap, having the crack, the sympathetic is right.

(16:15):

Something, something's about to happen and I need to be prepared for it. And I need to be ready for it. I'm in work, I have a meeting, I have a presentation, I'm about to be hit by a car, are, I've had a di cancer diagnosis, I'm in remission and I'm, I'm worried that it's going to come back. And you're stuck in this kind of hypervigilant, sympathetic nervous response and tiring. It's exhausting. Mm-hmm. <affirmative>, you know, you're, you have all these, you know, your adrenaline flushing around your body cuz it thinks it has to do something mm-hmm. <affirmative>. And over time that can become really tiring and exhausting and it can actually diminish the body's ability to, to deal with stuff. So for me, it, it, it's understanding, I always think understanding the physiology of fear and anxiety is a really helpful tool to figure out, well what am I gonna do about it? So I I can go through some techniques that can bring you out that fascinating response.

Speaker 1 (<u>16:58</u>):

It's fascinating because a couple of people who we've interviewed who are close friends now, and I absolutely get what you're saying because I know they've expressed that fear. Mm-hmm. And they have said how it grips them and they're afraid that even when they were coming through remission, hair was growing back. That the minute the hair started to look inverted com as normal, people would say, ah, you're great. You beat cancer. Sure you're fine. And they're going, oh my god. You know, the fear and anxiety I am going through at the moment,

Speaker 2 (17:26):

But you, what happens, I would imagine, is that your entire life is, is seen through that lens now, everything from your children to your family, to your job. You're, you're looking at it through the lens of fear of having this thing in the back of your head all the time. Mm-hmm. <affirmative>. And so, you know, you talk about mindfulness so that the actual psychological definition of mindfulness is paying attention to the present mo moment without judgment. And if I'm honest, that, you know, I guess that, that that's what it means. That doesn't mean a lot to me, <laugh>. Mm-hmm. And I'm a teacher, I'm like, oh, I get, I get, but then when you actually understand the context of that, it starts to make sense. So the context of it, what I say to young people who I work with is when they go that, what's that mean?

(<u>18:06</u>):

I said, well, I'll tell you what, get into an ice cold shower and the minute that water hits your back, tell me, are you thinking about what you have to do tomorrow or what you're doing you did yesterday? No,

it's present. You're present. Yeah, totally. And what we're trying to do, fear, fear is generally fear is processing the future, the future, the future, the future. What could come, what could come, what could happen, what could happen. And what happens is the, the mind starts preparing itself for the future all the time. And with that you start to have high core soil levels, your stress hormones, and you're, and you're hypervigilant. You think, what if, what if mm-hmm. <affirmative> and you're living in the future. Yeah. Which is completely understandable. Our, for some people that might be living in the past or ruminating of the past of what happened?

(18:47):

Should I have done this? Could I have done this? And what happens is we're not actually living in the actual space where, where fear does not exist and fear does not exist in the present moment. It's, that's the thing. Unless you're actually being eaten by a lion, it'll be fairly scary. But in the point of being able to be present, that's the power of what presence does. Because back to your central nervous system, it's not thinking about what I has to do tomorrow. And now the real thing to say about this, this is really hard to be present because the modern world is conditioned our mind to be anything but mindful doesn't want you to be mindful. It wants you to be buying, it wants you to be online. It wants your attention to be everywhere except on yourself and your own self-awareness. And that is what I'm trying to teach in mindfulness is if we can take that back now, it's okay to be scared for a few hours a day.

(19:32):

It's just, it's all the time. Yeah. It's draining. It's draining. How do we get into a space? Is there a breathing techniques that we can do? And they might work for you. Let's put them in your art's pocket that they work for you when you need them. So the next time you feel that overwhelm coming, what are you gonna do about it? And then what happens is you start to empower the individual to realize this fear is normal. And when it happens, I have things that I can do. I don't just need to accept this wave of fear consuming me. And over time, if you, when you teach things like meditation, you teach people how to naturally just become more present in their everyday lives and their relationships. Communication, but also in the way they look at the world. And, but the other thing say in that is you have to think of the future.

(20:13):

You have to think, especially if you're in your mission, you have to think right. I have to, I have to look after myself. I have to do what the doctor told me. I have to plan for stuff. It's just, when you're doing that all the time mm-hmm. <affirmative>, it gets overwhelming and it overwhelms me. You know, when I think of the future all the time, and this is not a lecture because I'm the exact same. My head is up my arms half the time. Like, I dunno where it is. But I know that I have it in my ability to come back to the present moment because I've trained myself to, so no matter how overwhelmed I get, if I'm not sleeping, I can come back to the present moment, come back to the present. And that, and ultimately when you keep practicing that something changes in your, and what changes is, is self-awareness. You become really aware of yourself. And mindfulness is not about relaxation. That's the big everyone. I think that is, that is

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Speaker 1 (20:58):
The, the sort of the myth that
Speaker 2 (21:00):
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The people have. It's a side effect maybe. Yeah. You know, because you're accepting yourself, you're more present. But if, if someone's selling you the package of relaxation without knowing the full context of your life and what you've, you've dealt with, whether, whether you're a cancer, you in remission of cancer, what el what else is going on? It's just what we call Mac mindfulness or mindfulness light. They're just trying to com commodify the idea of mindfulness. But for me, I don't like that it's people I don't know what you're carrying or dealing with. Mm-hmm. They know what's going on in your life. I cannot give you an inspirational quote and think that's gonna solve your problems. Cause that's just reductionist. Mm-hmm. So that's how I look at mindfulness. The full spectrum of human emotion, the good, the bad, and the ugly. That's what makes us human.

(21:42):

And I struggle sometimes with the wellness industry because it's, it's just at times another form of silence that we grew up with for generations where back in the day you just weren't allowed to talk about emotion really. But now you're only allowed to talk about good emotions. Yeah. Just, just to be the positive ones. Yeah. But well that's just nonsense. And it's the repression of emotion that I think can cause an awful, I feel Gama who talks a lot about, you know, incredible, incredible man and anyone listening to this who hasn't read Gamas work where he believes traumas stored in the body. You know? And he, he talks about this a lot. He's, he, he really opened up the idea of to me is not to repress that fear. And I remember in therapy, it's a pretty long answer, but I remember my therapist and this amazing psychologist, like, and this guy went through the rigor at me.

(22:29):

Now I had him every which way. He didn't know how to deal with me because I was, I was intellectualizing everything. And he couldn't, he couldn't pin me down. Mm. And there was one thing he said that shifted everything in me. And I was talking about being beaten up by a teacher in school and holding onto that I'd a like, could cut under my eye that I still have a scarf from a teacher punching me. And he said, what would you do if you went back to that teacher now if you saw him now, what would you say? And I'd be like, oh, why did you do it? And he goes, what would you say now? And I said, I was being all nice about it. He goes, your anger seems quite reasonable. He said, and then he roared at me, he says, it's okay.

(23:03):

Mm-hmm. <affirmative>. And he said, it's okay to literally, and I just started spitting Yeah. Anger. And I realized I'd just been holding all this in for years. And I remember that day going out to the Lake <inaudible> and it's called the, the Primal Screen Therapy. And just started screaming at the lake. Poor old fishes were terrifying <laugh>. But it was just, I realized I tent that up for so long. And I could imagine if you're holding onto fear and also the unfairness of it all, you know, Vicky's a Vicky feeling a close friend of mine. Yeah. I was at that memorial and I was sitting and when I heard her family talking, that's the thing I left. It was the unfairness of it. So it's okay to be angry. Yeah. You know, and I think it's actually, it's not okay to repress it. Yeah. And there's two types of anger.

(23:45):

There's, there's misguided anger and there's righteous anger. And misguided anger is a toxic energy. You can see it just go on Twitter for five seconds. That's, that's misguided anger. Right. We're angry with all the wrong people. We're angry with, you know, not the people that cause most of the problems. Yeah. And the people who own the likes of Twitter, we're not angry with them. We're angry with teachers and we're angry with, you know, bus drivers and cuz they, you know, because it's just, that's what we do. That's misguided anger. But, uh, righteous anger is a powerful, powerful thing. And that, that's what

changes society. That's what drives shifts. That's what we saw in marriage equality. You know, you saw a whole country come together, really. Mm-hmm. And it was righteous anger. And I think it's okay to be angry and it's okay to let it

Speaker 1 (24:27):

Out. So I suppose now even in talking about the sort of the righteous anger and being present, like we have a lot of patient ambassadors who are going through a metastatic diagnosis. And for that, that, you know, metastatic often means where the cancer, the primary cancer has traveled to other major organs and these women are living with cancer. So, you know, there is certainly an anger around that. But I suppose the most important thing is, and I see it with so many of them, is living in the moment, living in the present and not thinking too far down the line.

Speaker 2 (25:01):

Yeah. I mean, in theory I think that sounds good. But I think when it happens, this is, this is back to the idea of like, you know, me trying to put myself in a position to hear those words in front of a doctor and how I would react and how I would feel, I just don't know. But I know I've had so many conversations with Vicky and one of them was down, we were doing a gig down in, um, KK and me and her went out after it. And it was about two hours conversations. Cause everyone was off partying and we of course we were like the drinking, drinking tea, talking crap <laugh>. And she said to me, um, I said, what happened when you realized, you know, what did, what was, what did you feel? She goes, first she said, just un unexplainable anger. And then she said, in time I started to realize that, um, I'm gonna live the life that's in front of me.

(26:00):

I remember saying that to me. And I said, well, how'd you go about that? And she goes, you, you, you have to make yourself. She goes, I spent so much of my life chasing a life that I ultimately miss living it. I remember thinking that. Right. That to me is what it meant. And she talked about her kids. She talked about the things she wanted to do. And she then said something to me that actually was just very difficult to hear. She wants, she wanted me to play a song at her funeral, a song called Postcards. And she asked me would I play it at her funeral. And I was of course go, geez, no, Vicky, stop. No. Don't you know mm-hmm. Trying to make all these excuses saying, oh don't be like that Vicky. You know, everything will work out. And she, she was like, no, it won't.

(26:41):

And I remember just, there was a huge power in her acceptance that she goes, I dunno, at that time, I think she'd nearly, she lived a lot longer from that. She, she, she wasn't sure at that point. She had many years ahead of herself that she absolutely had, like, she really sucked every Yeah. Bit of it out of it. And that was the thing to me was just this idea of, uh, we wrote a song for her that was on, on her, uh, documentary called Play God. And the opening line of the song was, she was talking about when you're, when you're born, she said, when you're born and when you realize you haven't got much time left, that's when you almost feel most alive. And she said, the opening line of the song is, for the first time since I've come into this world, I've returned back to a place where the sanctuary of my youthful mother's arms holds me safe and her embrace.

(<u>27:33</u>):

And it's her as a child. Wow. And then the last point is her realizing that, you know, this. So, so somewhere in the middle, I think people, I, we lose ourselves a little bit and we start, whether it's cancer

or whether it's anything we get, we got caught up in the just myriad of bullshit that doesn't matter in the world, genuinely doesn't matter. Like I'm just watching stuff in the news and people whinging about things online. I'm like looking at it going, everything comes into sharper focus when you realize, and it's, that's, that's all I can understand is, is is true her experience. And obviously family members. And even with my auntie, like unfortunately my auntie, uh, she didn't feel well throughout the, the pandemic. And of course like everybody didn't go to the doctor and, you know, and, and these we're gonna see waves of this stuff.

(28:19):

And this is the thing I think about. We, we haven't processed this and we don't need to amend what happened, like the pandemic. Everyone, no one had, no one enjoyed it really. But we haven't processed it. Like we haven't processed that. And I look at maybe I can't help but think my uncle will be angry. Yeah. You know, so Yeah. I think it's about, for me, all this stuff I'm talking about, it's about let's put all the emotions on the table here and if you've a cancer diagnosis this terminal, you have every single Right. To have every single one of those emotions. Yeah. And you have every right to have a place to talk about them and express them. And you have every right to have the emotional scaffolding around you to hold you up. So I think that's, cuz then it's the individual themselves is subjective. How they deal with it is how they deal with it. But they should be given space to, to, to be angry, to be happy, to be present, whatever it is. Uh, it's, you know, and I think that's what I learned from Vicky

Speaker 1 (29:12):

And how do we, I suppose how do we demonstrate gratitude for all the things we do have and that are with us currently.

Speaker 2 (29:20):

Yeah. I think, I think everybody could learn that. Yeah. That idea of so much of our energy and life goes on the stuff that we don't have mm-hmm. <affirmative> and often very little of the stuff goes on, the stuff that's right in front of us. Yeah. Uh, I learned that the hard way, you know, and I, I always believed that my life was four years ahead of myself. Five years. Well, when I get that, when I get to that point, and then I got to that point and realized this point is kind of, now I want to go to another point. Yeah. And now I'm just on this merry ground and I'm kind of, I think, I think it's called a head on treadmill or something like that, where you basically, I wanna get promoted, then you get promoted, but I wanna get promoted again because the human condition just keeps Yeah.

(29:57):

Pushing us cause desire. Right. So when you go back to mindfulness desire, which is a huge driving force of the human condition, desire, desire, desire. It's funny because desire's so fleeting. You get it and then you're like, oh, that was okay. You know, the same like the real simple examples of pizza. You know what I mean? You're thinking, you ordering your, and then the payoff is never an acc. Great. Yeah. So it's, it, the idea of gratitude is, is is actually really bringing your energy into what is in front of you right now. And it, I always found with gratitude, I do technique, I'll bring you through it. I call it, I do it with kids, I do it with kids to offset jealousy. Oh. So we do, uh, with the <inaudible> schools program, but also with, with the kids books that I write. And this works really well with adults and it's called Take Five for Kids.

(30:45):

But I do it every morning and I've been doing it every morning for seven, eight years now. And the minute I wake up in the morning, I think of five things I have in my life that I'm thankful for. I actually just

go on my hand and I just spend a couple of, you know, 10, 15 seconds on each one. And I mean, it's the simplest stuff. Like the last couple of weeks it's been like my, my bed is warm, you know, it's actually Bic outside of a warm bed. It's lovely mm-hmm. <affirmative> and I really simple stuff. And then I was like, ah, man, I got really nice coffee today. Yeah. I know this sounds ridiculous. And then I would think about my mom and I would just spend 10 or 15 seconds and I would get outta bed and I would feel very present, but I would also feel very connected.

(31:21):

And that's a practice, a functional practice that I use. And I always find that practice more, more powerful when I don't feel like doing it. That was, that's something I'm, I I tried to do a lot. I tried to build it into my day, but somebody, you know, who's going through such difficulty, it that might be really testing some days, you know, and Yeah. But it, it is, it is a really good functional tool to become present and use gratitude as a form of presence. And I mean, there's, there's streams of evidence around gratitude and the power of it. Like Doc, Dr. Andrew Huberman, I dunno if you listen to the Huberman in that podcast, he has this amazing podcast about the science behind gratitude. Really the fundamental, and I don't wanna science this up because sometimes I think when you're talking about something like, you know, something as heartbreaking as cancer for people, you can sometimes just turn it into science and statistics.

(32:10):

And I think that dehumanizes things sometimes. But if you wanna understand why gratitude can really bring you into the present moment and actually will almost be a form of healing. Re uh, Dr. Aandra p Huberman, the Huberman Labs podcast is amazing. And when I look around the science of mindfulness and the mind, I look to him because it's very clear, you know, it's, it's very functional. And for people who, who like the kind of science side, then there's the spiritual side, which you, you want to feel, feel connected to something bigger than just yourself, which I could imagine could be quite therapeutic and supportive for somebody who feels, who's in a position of terminal a terminal diagnosis or incurable cancer to to know that they're like, I'm not religious <a href="https://doi.org/10.1001/journal.org/10.1001/jo

(33:02):

He says that religion destroyed spirituality. He said, cuz spirituality is really powerful. The idea that there's something that we're all connected, there's something bigger than just ourselves. You know, you don't have to, it doesn't have to be a God, but if religion brings you faith, rock and roll, go for it. Yeah. Whatever brings you comfort, take it. But for me, spirituality brings me comfort. I believe that I'm connected to everybody else. Eh, what that helps me do is stay as present, but it also stops me throwing people under a bus when they do or say something stupid on Twitter like everyone else wants to do. And if it makes me feel right, it's so spirituality, I think it's a word we overuse and it has connotations in Ireland especially that can be quite negative. But spirituality is just about understanding. There's a, there's something bigger mm-hmm. <affirmative>.

(33:49):

And it's, I think what I think what it is is getting all, um, hippie on you now, but I think it's a shared consciousness. I think we're all connected. I think there's a shared consciousness among all of us. Uh, and in that I think that's why, that's why I'm quite optimistic and positive about life with, at a time when the world feels like it's, it's, it's, it's in a really difficult place mm-hmm. <affirmative> across the world. I I I think if you stop looking and judging the world through the, the lens of Twitter mm-hmm. You'll realize we're not all so bad. Mm-hmm. And stop chasing, stop chasing. We're not, humans aren't,

Twitter's a terrible metric to judge humanity on. Terrible, terrible. It just brings out the very worst of people. And really, when you wanna see the best of people get in front of them.

(34:38):

Yeah. You know, and if they need your help, like, I mean, like even strangers, that's the thing. So that's what I try to look at and that's what gratitude is to me. I, and, and I need to be really clear here, gratitude isn't about blinding positivity. Mm-hmm. If you have a counter diagnosis, you, you don't have to be blindingly positive. Sure. It's a city, it's a, that's, that's a toxic thing to mm-hmm. <affirmative> put on people. But it's the idea of bringing it back to what you do control and what you control is where you focus in any given moment. And Victor Frankl has this quote that all my work is driven by Victor Frankl. Was anyone who hasn't read the book, man. Sure. Meaning it's the book that changed my life. Victor Frankl was a doctor who went into Auswitch. He was, he, he was like everybody else now.

(35:23):

So she was tortured, he was absolutely brutalized. And his mindset was, the only way I can survive this is to see hope or hope doesn't exist. He was going at the, the, the, the soldier who was beating him up. He's like, oh my, my God, the stitching's lovely on your jacket. Yeah. That's where he was just mentally. But he has this quote, he says, you can take everything from a human except that the last of the great human freedoms. And that's to choose one's, one's attitude in any given set of circumstances to choose one's own way. Yeah. No matter what happens in life, that's one freedom no one can thank you. You can always come back. This I have, I can choose to be grateful in this moment. Yeah. I have absolute power to choose that. Mm-hmm. <affirmative> or I can choose, you know, to, to, to cry or I can choose to scream at fishes out in the lake.

(36:09):

Yeah. But it's, it's when you're in the present moment, it's your control. Control. Yeah. And that's the, that's the power. It comes back to stoicism, the philosophy of stoicism and the dichotomy of control. You know, putting all your energy on the stuff you've no control over will always overwhelm you always bringing it back and, and there's gonna be things you don't control that you just have to roll with and get over. You know? But really when you come back to it, you realize there's so much power there. Yeah. Yeah. Know, you can't control, like with something like the, the, the, the pain of a cancer diagnosis, there's so much in that you, you probably don't have control over. Yeah. But there's, there is, there's never lose that. There's definitely a part of it that you do. Yeah. And if you can bring your energy to that somehow, uh, it can help you.

(36:55):

And you might need therapy to help. I mean, my, my mentor when I was doing my master's, Dr. Paul Dalton worked specifically with, you know, the psychology of pan uh, cancer and people going through cancer and who are, are in remission to cancer. And he works with them. He's, he's done in the life stuff. He, it's, it's listened to him, speaks incredible. So all this stuff is, is, is is where I would've been very, I would've listened to him very in like, it's cuz he said himself, working with somebody, uh, on an end of life thing is, is one of the most eye-opening, life-affirming things you'll ever do as a human being. Mm-hmm. <affirmative>. And he's done it, you know, a few times. And yeah. So I do think, as I said, back to the dichotomy of control mm-hmm.

Speaker 1 (37:37):

<affirmative> would, you've given, well you've given me food for thought. Um, and I'm sure the listeners as well. I mean, I do think the resources that you've mentioned, you know, whether it is the Hoberman Lab podcast, whether it is, you know, um, Victor

Speaker 2 (37:50):

Franklin, Victor Franklin Frank.

Speaker 1 (37:51):

Yeah, yeah, yeah. Okay. And even Dr. Paul Dalton. Yeah. I mean that's, that's that their resources. And this is a resource podcast. So I do think that people could take value in your recommendations.

Speaker 2 (38:02):

Yeah. And there's loads other ones I like, like breathing techniques. Like, so the breath, so I had another clear thing here. I had a terrible relationship with my breath because I had panic disorder. And every time I focused on my breath out of a panic attack, because that was the biggest manifestation of my panic was I can't breathe. I can't breathe anyone in. And I'm gonna guess many people listening to this have a panic attacks because they're quite common. They're horrible, but they're common, more common than people realize. So I use these different techniques when I feel that wave of overwhelm come and it comes at me. Like I've had a, a professionally, not the best years I've ever had this year, year. And, and it was just, I remember saying to my partner, wave after wave, and she was like, how are you dealing with this?

(38:39):

I says, because number one, rejection's part of my job. I'm in creative industry, I'm going to get rejected. I'm gonna get hurt. It's how I react to that hurt. So for example, I would take the first week and go, my God, I'm miserable. And I'd allow myself to be miserable. And then I know I come back from it. But if it ever got too overwhelming, I have a few techniques I'd like to teach people that might help them in the moment. Mm-hmm. <affirmative>, the first one's, the physiological site. Now back to my mate, Andrew Huberman, who, who I'm lucky enough to have on the had in the Where is My Mind podcast. So if you wanna listen to his episode with me, he teaches this breath and this breath is game changing and I do it all the time. And it's, it basically he explains it better, but it offsets a kind, a reaction in the brain that's like a WhatsApp message to the central nervous system to go your grand step back, your grand.

(39:28):

And for people hitting that heightened level of overwhelm, this might be helpful. Mm-hmm. <affirmative>. So what it is, it's two inhales. So you, it's true the nose always breathe through the nose for many myriad of different ra reasons to en engage with something called the vagus nerve. And the vagus nerve is the nerve that runs from the body up to the brain, not the other way around, which is what most nerves do. And it's, it, it basically is, is very much associated with relax, relaxing. So it's two inhales. And as you, you're getting to the end of the first inhale, you take another inhale, I'll do, I'll practice it here. And then the key is the long, really long prolonged exhale. As long as you can make your exhale. So the breath is,

(40:13):

Do that three times. Anyone listening to this right now, do that three times you will feel a little high. The breath is a superpower. The breath will bring you to the present moment because that's the only place

the breath is, it cannot be anywhere else. Yeah. So it's two inhales, one inhale through the nose. And just as you're about to get the end of the first inhale, go again. Yeah. And now three long exhale. So that's called the physiological site. It's an absolute amazing breath breathing technique for overwhelm. The other one, and I'm gonna guess anyone who's in remission or who, who has had a diagnosis sleep will probably get massively affected because obviously the mind will start to race. You'll start to think a lot. And that's the normal course you're thinking a lot like Yeah. You know, so this technique I use is really, so when you, you are overwhelmed, right?

(40:58):

Mm-hmm. Here's the key is you need, you need to get out of your head the last place you want to be. When the mind is running, riot is in the mind, it isn't gonna solve their problems yet. Mm-hmm. <affirmative>, it's skip, get into the body. So what I do is I started, I, so, and you can't see this, what do you might the camera there, but I start rolling my finger, my thumb and my finger, uh, beside my thumb. See the next finger, isn't it? Mm. Start rolling the two of 'em together really fast. And I start pretending that's my mind. It's really busy. Really, really busy. Look how fast my mind is. So you're acknowledging you have a busy mind and you start to breathe. And really what you're trying to do is just be wary of the contact between the two fingers. Just focus on the contact between the two fingers and breathe.

(41:35):

And you really just focus and then start to slow it down. Start to slow the circles down. As if the mind you're, you're actually asking the mind to slow down when you're getting outta the body and into the, into the outta the mind, into the body. And you can do this when you're lying in bed. If you wake up in the middle of the night, if you're, if you're having a bit of a night nightmare, acknowledge the mind is busy. Mm-hmm. <affirmative>, don't pretend otherwise, but to start to slow it down. But what you're doing is you're getting into the body and that's slowing down the brain. Yeah. The brain's getting into what we call the neo cortex, which is the rational thinking. You're getting out with the Olympic system. Yeah. Or the amygdala hijack. I know this is all a bit, you know, brainy, but it's good to know this stuff.

(42:10):

And the other one I do that is really effective is when you're lying in bed, take 20 breaths and with each breath, imagine the body getting heavier and heavier and heavier and heavier. I mean, you're bet into the bed now you're, you're like lead by the 20th, you're sunk, you're sunk into the bed. Then take 20 breaths and imagine the body getting lighter and lighter and lighter and lighter. So you're almost floating. It's 40 breaths and you're focusing on the weight and the light. And what you're doing is you're getting out, you're getting into this present moment functionally, and you're stopping this overwhelm. So the next time you feel overwhelmed and you go, might that work for me last time? Yeah. I can use that again. And I can use that again. You're going for lunch with your kids and you don't get, you know, and it's an hour and you're putting all this pressure yourself.

(42:52):

I, you know, going for lunch with the kids, they're probably worried about me. I have to do all this stuff and I have to make sure just get present with them. Yeah. Get present with them by doing these types of techniques. And the last breath that is, I call it the tranquilizer breath. Um, which probably a terrible name for it, but it's because it really makes me sleepy and it makes me very, very, very relaxed. So I have two more breaths and give you way too much. 4, 7, 8, breathing. Breathe in for four, hold for seven and out for eight. And do that 10 times and you will feel like slightly drunk. It's the best way to describe it. You're all this oxygen going to the brain, you're becoming very functionally present. And it's just enter the nose for four, hold for seven, and now for eight.

(43:42):

Even doing that, I feel with tummy feels relaxed. 10 of them. So start building these into your every day. And the other one is cadence. Breathing, slow your respiratory rate down to, to six breath a minute. So we usually take about 14 breaths, 16 breaths a minute. If you're anxious, you're gonna take about 20 breaths a minute. So when you start to cadence, breathe, which is six. So all you have to do is I do this watching TV at night cuz I have to really calm myself down before I go to bed. Cause I've a, I have a very racy head. Mm-hmm. <affirmative>. So breathe in for five in my left hand and I breathe out for five in my right hand. And I just do that for time and no one even knows I'm doing it. Do that for 10 minutes. And what you're doing is you're settling down the respiratory rate, you're settling down the mind and the brain.

(44:21):

The body, the body knows it's now getting ready to rest. So these are functional things that you can do. But these should not offset the fact that course you're anxious, course you're scared, course you're angry. You're not trying to diminish them. No. Or push them away or avoid them. Because avoidance is the root of all disorder. Don't avoid those feelings. Yeah. Express them, but learn how to deal with them and, and that's what I do with my anxiety. Is that right? I'm anxious today, why am I anxious? This, this, this and this. What I'm gonna do about it? I'm gonna do this at eight o'clock. I'm gonna not put on Twitter and I'm gonna breathe cadence breathing for 10 minutes. Once again. Back to control. Yeah. Take, I have control over that. Yeah.

Speaker 1 (44:59):

Yeah. Mm-hmm. <affirmative>, that makes so much sense. I even, even for, regardless of going through a breast cancer diagnosis, I think in life in general, you know, I am one of these people who's under on the merry-go-round constantly. But learning the couple of techniques that you've just said is fantastic. Mm-hmm. <affirmative>, I will practice it now. I know people around me are probably laughing cuz they'll think I'll ever do it, but I will because

Speaker 2 (45:23):

Make it work for you. Yeah. You know, you don't need to sit here, listen at the whale music and burning incense and like some people find meditation really challenging, really difficult. And sometimes it's not for them. But here's what I want to promise anyone. Mindfulness is for anybody. There's a way of making it work for you. Mm-hmm. What's the thing you love doing the most in the world? Whether it's, I'm a musician, I like playing golf, I don't care what it is. Yeah. Do it mindfully. Do it in the moment. Don't bring your phone. Yeah. Give yourself that space. That's called informal mindfulness. It's really powerful. Like I'm not sitting here telling people to start meditating. That's what you want to do. Do it. Mm-hmm. <affirmative>, that's what I do. Mm-hmm. <affirmative>. But I've taken nine, anyone knowing anyone who knew me 15 years ago would fall off their chair laughing to think that I'm a meditation teacher. Mm-hmm. <affirmative>, I couldn't sit still for 10 seconds. 15 years ago, I couldn't, my skin felt like it was crawling. That's how unsettled I felt all the time. I had to train myself into presence. It wasn't easy, it was challenging. And I'm not trying to pretend otherwise, but it is an incredibly rewarding place to start to learn that in generally in the present moment, you're safe. Mm-hmm. <affirmative>, and you're connected to something. And that's what I

Speaker 1 (46:28):

Do. Yeah. And I suppose Nile, you know, I watch the, um, the waiting room dance as it's called on Instagram. You know, where I see a lot of our patient ambassadors and supporters every six months going back for their checkup. You know, Georgie talks about it. So many talk about it where they're there shaking the leg waiting because that fear, like that, that fear. So I do think these techniques will be really, really a godsend for them. Yeah. You know, they're so, and they're simple. Yeah. That's what I love about them. They're simple and as you say, you control it.

Speaker 2 (46:55):

You control it. And, and also just that fear once back to the normality of that fear, of course you're scared. Yeah. Of course. You're fearful. Talk about it, you know, be present with it. And that's the thing. Don't pathologically, there's nothing wrong with you. You're, it's the right way to, to feel normal. Yeah. But I do think when it becomes overwhelming, and it feels like we're, I guess I had a cardiac MRI recently, and I don't fit in the MRI machines, which, which was even more anxiety inducing. Yeah. And I, I, I am, I'm claustrophobic. Yeah. And I'm six, six foot six. So I'm probably every right to be. But they put you the whole way in and you're in there for 45 minutes and they've, and they gave you an, gave me an injection that makes your heart go faster, because they're trying to test your heart.

(47:41):

So I'm in here and then they start playing Rod Stewart, my headphones. I'm like, oh my God. And I, I'm kind of find myself, and I could, I, I, I was going, this thing's gonna squash me all, I think. And I said, don't be a hypocrite. Come on, come back to what, you know, watch your first principles here. How do you start the breed? And I started and like, and this is what happens. You can still feel the anxiety there, but it just stops over. It stops. It doesn't have control over you anymore. It's there. You can see it. Yeah. I always say it's like, it's like being in, it's raining outside. Right. It's absolutely pouring outside, but you're inside looking at the rain. Yeah. That's what you diffuse yourself a little bit from your anxiety. Mm-hmm. And you go, it's normal. But I'm gonna put you over there for, for 25 minutes here, and I'm gonna focus on my breath and pass a moment. So, you know, go have a coffee or something, but stop reminding me for 20 minutes. Excellent. And that's, let me get through this. Yeah. Get me through this. Yeah.

Speaker 1 (48:26):

Well now thank you so much for joining us today. I do think that anyone who listens to this amazing podcast will get certain resources that will help them, whether it's through their diagnosis or just in general in life. So thank you very much for joining us on

Speaker 2 (48:39):

More Than a Lump. My pleasure.

Speaker 1 (48:41):

The information in this podcast is based on the personal stories of those we have chatted to. If you are concerned in any way, please contact your GP immediately, or you can contact us@breastcancerireland.com.