Danny Schechter

A Medical Mystery Tour
TOPIC OF CANCER
A MEDICAL MYSTERY TOUR

DANNY SCHECHTER
WITH SARAH DEBS SCHECHTER

ColdType
Fearing the Worst, Hoping for The Best
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Danny made several attempts to call me in September 2014. I missed them all. I was on holiday in Europe. But on October 1, the morning after I returned, he finally connected. “Where have you been?” he asked. “We need to talk. I’m in hospital. I have cancer, and I wanted you to be one of the first to know.” I made reassuring noises: a previous scare a year earlier had kick-started work on his previous book, *When South Africa Called, We Answered*. Until then, the manuscript – too kind a word, really – was a grab-bag of vaguely related files that neither of us had had the energy nor inclination to edit into a coherent narrative. Impending doom spurred us into action and the book, our seventh collaboration, was published as a *ColdType* e-book a couple of months later – just as he got the medical all-clear. Celebrations all round. There was no cancer, but there was a book, his best yet.

“This time it’s real,” he told me. “Are you writing a diary?” I wondered. “Yes, it’ll be our next book. The title is *Topic of Cancer.* It will, I hope, tell how I beat the disease. If not, well, I’m sure you’ll find something to do with it . . .”

A week later, the first pages of *Topic* dropped into my mailbox, other parts arriving at distressingly less regular intervals until February, when his illness was drawing to its unhappy conclusion.

Danny and I had our final conversation on Monday, March 16, a few hours after he had been admitted for his final hospital stay. I rang, among other reasons, to thank him for the copy of the paperback edition of *When Africa Called*, which I had just
received, in which he had inscribed, “For my partner and inspiration. For the books we have worked on and the values we uphold. Onward!” Danny was feeling very ill, and ended our too-brief chat by asking, “How’s the book coming along?” “Pretty well,” I lied (actually, I couldn’t face editing it until he was on the road to recovery); “I’ll have the first page proofs with you on Friday.”

After hanging up, I hastily finished a rough edit of the text and put the pages together. But it was too late for Danny. He died before I had a chance to mail the package.

This first edition of Topic of Cancer is published to coincide with a celebration of Danny’s birthday on June 27, at Judson Memorial Church in New York City.

Sarah Debs Schechter, Danny’s daughter, added the final chapter of this remarkable diary, a heartwarming – and heartwrenching – account of her dad’s final days.

Special thanks to Bill Schechter, Danny’s brother, who wrote the Foreword, and to Marta Steele, who edited the original manuscript and proofread the pages.

Finally, Danny – should you by any chance be reading this – I’d like to let you know that working with you has been exhilarating, occasionally exasperating, but always interesting. I’m proud to count you as a friend. But you already know that.

Onward!

Tony Sutton
Toronto, Canada
June 21, 2015
My brother Danny Schechter somehow managed to leave the Bronx without ever getting into a physical scrape, not an easy thing to do in our neighborhood. Full-on bareknuckle affairs were not unknown, but were rare. More often, a bad call on the playground basketball court would escalate into a whole lot of pushing and shoving. Or someone would decide to throw his buddy into the hedges that lined our community gardens, and then it was on. I don’t recall Danny ever getting into one of these tussles. He disliked physical conflict, at least outside the privacy of our bedroom wrestling ring. One time he was confronted by a few members of the Irish “Bailey Avenue Gang,” whose turf extended up to the western borders of our neighborhood. Taking a doctrinal page from the church down near Broadway, they accused him of being a “Christ killer” and began to chase him. Fortunately, he was fleet-footed enough to make it back home unscathed and perhaps a little wiser about the ways of the world.

Danny tended to back away from emotional conflict as well. He didn’t like that kind of tension and tried to find a way to ignore it, often by taking the line of least resistance or just by withdrawing into his own busy head. The one arena in which he was an indefatigable fighter was politics, and there he was prepared to stand with you toe-to-toe and trade blows for as long as it took. (I was going to say that he never got personal but, hmm, there was that day he called Kissinger a war criminal to his face). Danny was a great speaker, debater, and writer. His weapons
were words, and he never asked for quarter or gave it. He argued the facts as he saw them and stood firmly on his principles and sense of justice. His was one bugle that never blew retreat.

And so it wasn’t surprising that when he was first diagnosed with pancreatic cancer he started blogging, hurling words, thoughts, and reflections against the disease that was assailing him. I took it as a reflexive response that would peter out as he became sicker. What was surprising was that when the end came, and his daughter Sarah Debs Schechter took home the computer he insisted she bring to the Emergency Room so he could “finish some work,” she discovered on the hard-drive that he had written an entire book. In *Topic of Cancer*, he debates the disease, the cancer cells, the medical system, and his own mind. This is the story of an activist, who had risked everything in his lifetime struggle against American racism, the Vietnam War, Apartheid, and the corporate media, now taking on a new foe.

In this six-month-long battle, there was chemotherapy and there were words. The end came suddenly, as if the Bailey Avenue Gang had finally caught up with him.

Danny died on March 19, 2015. If there is an afterlife, you should be getting a blogpost soon. Meanwhile, our memory of this incandescent person will live on, as will those millions of words that informed and inspired us, made us laugh, and gave us courage.

*Bill Schechter*

*Brookline, Mass.*

*April 30, 2015*
PROLOGUE
DANNY SCHECHTER

Yes, I am being influenced by the better-known phrase, Tropic Of Cancer, defined by Merriam-Webster this way:

TROPIC OF CANCER
. . . The parallel of latitude that is approximately 23½ degrees north of the equator and that is the northernmost latitude reached by the overhead sun

Origin of TROPIC OF CANCER
From the sign of the zodiac which its celestial projection intersects.
First known use: 1545

And, yes, I read and was turned on by writer Henry Miller’s book Tropic of Cancer, which spoke more to the erotic. Google describes the e-book this way:

Now hailed as an American classic, Tropic of Cancer, Henry Miller’s masterpiece, was banned as obscene in this country for twenty-seven years after its first publication in Paris in 1934. Only a historic court ruling that changed American censorship standards, ushering in a new era of freedom and frankness in modern literature, permitted the publication of this first volume of Miller’s famed mixture of memoir and fiction, which chronicles with unapologetic gusto the bawdy adventures of a young expatriate writer, his friends, and the characters they meet in Paris in the 1930s. Tropic of Cancer is now considered, as Norman Mailer said,
“one of the ten or twenty great novels of our century.”

Miller’s work affirmed the power of humanity. He wrote, “One’s destination is never a place but rather a new way of looking at things,” and, “I have no money, no resources, no hopes. I am the happiest man alive.” He understood politics: “We have two American flags always: one for the rich and one for the poor. When the rich fly it, it means that things are under control; when the poor fly it, it means danger, revolution, anarchy.”

Well, this volume is not a novel, nor as eloquently composed, and if you are looking for bawdy, look elsewhere. It is faction, not fiction, a running commentary, part diary, part blog, part excursion into my fears and medical adventures, if they can be so called, after a diagnosis of the dreaded pancreatic cancer. It chronicles in real time how I am trying to survive one of the worst cancers around.

No wonder, many of the people who heard about it started their attempt to comfort me with the words “I am so sorry.” When Henry Valentine Miller wrote Tropic Of Cancer in 1935 about his adventures in Paris, he was never sorry.

Miller was born in 1891. As I researched his life, I came across a video called “bathroom monologue.” An older Miller is in a bathrobe in his toilet, yakking to the camera, showing off photos and paintings he posted on his wall.

What is interesting to me is that I have done something similar in my toilet, posing, not quite as artistically, but in a similar way. In his case and in mine, the bathroom is more than a place for defecating; it’s for thinking, too.

Danny Schechter
New York City,
December 18, 2014
SEPTMBER 2014
DAYS OF DIAGNOSIS

IT STARTED WITH A NOISE, A BELCH; FOLLOWED BY A BURP AND other body noises I don’t need to describe. I felt bloated and was, I assumed, in the throes of a bad acid reflux attack. I asked my doctor to change my meds. He did, but suggested we have a look inside my stomach to see if anything else was going on . . .

Two tests later by a specialist who also gave me one of those procedures that took down comedienne Joan Rivers. Happily. I had no throat issue! – I got the good news. Nothing wrong with my stomach even if it growls more than I want it to.

But, with good news, often, there’s not such good news. In my case, it was found in the tail of the organ behind my stomach, the pancreas. Sure enough, they found something they/we were not looking for, a small growth that may or may not be cancerous, but is painful and has to go.

Oy!

As everyone knows, growing old sometimes sucks, and in the case of this investigative reporter, I was suddenly consumed by the need to focus on investigating not the bloody intestines of the body politic, but my own body.

What to do? The first advice was encouraging: the odds of a successful operation are better because it is in the “tail,” not
“the head” that interacts with other organs. The test found the rest of my pancreas is just peachy keen.

However, if they do get it out, my spleen will probably have to come with it. As an opinion journalist, I have enough spleen to go around, but I am not sure what it will mean to yank the organ.

“Oh,” my doctor says, “plenty of people lose their spleens in car accidents and live without it.”

That sounds reassuring.

The doctor also invoked the 1% privilege argument. “You live in New York City. We have the best medical care in the world. There are many experienced doctors to turn to.”

Implicitly, that argument includes the unspoken proviso that, if you are poor and uninsured, you are not likely to get that best medical care. At the same time, I know he’s right, and, of course, I want the best care I can find.

Wouldn’t you?

And so, I am off and running into the medical maze, thankfully with indispensable support from family and friends. Google is my new best friend to find sources, but it’s confusing, and I don’t feel equipped to plan my own care, or self-medicate, although maybe some juicing will help. My personal doctor, who I think the world of, but who dropped me because my insurance had too many onerous regulations, and whom I now see less, but privately, started searching for a surgeon.

The good news: he found one, a “top man.” The bad news: My hoped-for “Dr. Miracle” took no insurance, thank you very much. I have now been recommended to another doctor at the same institution and will see her next week.

I have been advised to become an expert on my own problem and care. That’s easier said than done because once you seek out
advice, it can be contradictory and speculative.

First, I had to find out about pancreatic cancer. I didn’t even know what the pancreas does, only that I have one. Again, I called Google! They even had an illustration. It looks weird but showed an organ that plays a range of roles in maintaining a healthy body.

**Pancreas:**
The pancreas is a glandular organ in the digestive system and endocrine system of vertebrates. In humans, it is located in the abdominal cavity behind the stomach. It is an endocrine gland producing several important hormones, including insulin, glucagon, somatostatin, and pancreatic polypeptide which circulate in the blood. The pancreas is also a digestive organ, secreting pancreatic juice containing digestive enzymes that assist digestion and absorption of nutrients in the small intestine. These enzymes help to further break down the carbohydrates, proteins, and lipids in the chyme.

No one seems to know what causes it but, in my case, obesity and age are factors. Next stop on my tour of search engines: *Medicine Net*, although this was not easy reading, or at all clear to this non-medical person.

**What is pancreatic cancer?**
Cancers that develop within the pancreas fall into two major categories: (1) cancers of the endocrine pancreas (the part that makes insulin and other hormones) are called “islet cell” or “pancreatic neuroendocrine” cancers and (2) cancers of the exocrine pancreas (the part that makes enzymes). Islet cell cancers are rare and typically grow slowly compared to exocrine pancre-
atic cancers. Islet cell tumors often release hormones into the bloodstream and are further characterized by the hormones they produce (insulin, glucagon, gastrin, or other hormones). Cancers of the exocrine pancreas develop from the cells that line the system of ducts that deliver enzymes to the small intestine and are commonly referred to as pancreatic adenocarcinomas. Adenocarcinoma of the pancreas comprises 95% of all pancreatic ductal cancers and is the subject of this review.

Cells that line the ducts in the exocrine pancreas divide more rapidly than the tissues that surround them. For reasons that we do not understand, these cells can make a mistake when they copy their DNA as they are reproducing to replace other cells. In this manner, an abnormal cell can be made. When an abnormal ductal cell begins to divide in an unregulated way, a growth can form that is made up of abnormal looking and functioning cells. The abnormal changes that can be recognized under the microscope are called “dysplasia.” Often, dysplastic cells can undergo additional genetic mistakes over time and become even more abnormal. If these dysplastic cells invade through the walls of the duct from which they arise into the surrounding tissue, the dysplasia has become a malignant tumor (cancer).

**What are pancreatic cancer causes and risk factors?**
About 40,000 cases of pancreatic cancer occur yearly in the United States. *Most people who develop pancreatic cancer do so without any predisposing risk factors.* Perhaps the biggest risk factor is increasing age; being over the age of 60 puts an individual at greater risk. Rarely, there can be genetic syndromes that run in families that put individuals at higher risk such as BRCA-2 and, to a lesser extent, BRCA-1 gene mutations. Familial syndromes are unusual but it is important to let your doctor
know if anyone else in your family has been diagnosed with cancer.

To my knowledge you don’t get it from the NSA or North Korean agents. The answer to the question, “why me?” seems to be “why not?”

Ok, I’ve got it. I still don’t know why, and may never know.

We all know about Apple guru Steve Jobs’s fatal case of pancreatic cancer. The whole world was watching and supportive in his efforts to find a cure. In the end Ramzi Amri, a doctor at the Harvard Medical School, told Gawker: “Steve Jobs had a mild form of cancer that is not usually fatal, but seems to have ushered along his own death by delaying conventional treatment in favor of alternative remedies, a Harvard Medical School researcher and faculty member says. Jobs’s intractability, so often his greatest asset, may have been his undoing.”

But I’m not here to second guess the tragedy of Steve Jobs’s untimely death, but to think about what I should do now, or can do. There are networks of advocates to consult and other doctors to reach out to. What’s troubling to someone whose mostly uses (and maybe, abuses) the organ in his head, is that this means I have to put my mind into overdrive to avoid panicking and help me take the right path. I must say goodbye to any new projects I have been planning during my 72nd year; say goodbye for now to what passes for my “career.” I have mostly lived in my head; now I have to live for my body – that is, if it is going to live.

I flashed on the subject of one of my most recent books: Nelson Mandela. He told his family he would live to be 100. He had all the best medical resource of South Africa behind him. He died five years shy of his goal. My dad lived to 90½. Suddenly, that now seems like it may be an unattainable goal for me.
No one knows, especially me, how long I will live. Now, I have something more personal to think and obsess over. What the fuck to do?

While I was waiting for the CT scan in the NYU hospital center packed with other customers (patients?), I had a moment of humility. Suddenly, none of my other real or imagined claims to fame mattered: I was just Number 12 on the list of those to be serviced. No one wanted to hear my story, or care about my need to get on to my next meeting. They were too busy. “Just wait with everyone else,” I was told. “You are Number 12.”

On the following Monday, their report was out. I shared what it said with my daughter, Sarah:

4.6 x 4.3 cm hypo enhancing mass in the tail of the pancreas compatible with a neoplasm. Tumor encases the splenetic artery and invades the spleen. There is a loss of the fat plane between the tumor and posterior gastric wall. There is a mild surrounding inflammatory change. The splenic vein is occluded and there are perisplenic collaterals. Remainder of the Pancreas is normal. Biliary Trees: Non-dilated. Gallbladder is contracted.

No evidence of metastatic disease within the abdomen or pelvis. Segmented wall ticketing of the ascending colon possibly from underdistention versus colitis.

Huh? Translation needed.

Suddenly, I was in denial. What started with a bit of indigestion and a small pain in my “lower quadrant” was on its way to becoming a cancer diagnosis. I was lost and floundering. I had, I thought, just survived my worst medical nightmare after bubbles had turned up in my urine. Months of testing, blood, urine, and more, led my doctors to suspect three possible conditions:
1. Multiple myeloma, a form of cancer.
2. A deepening of my diabetes – (I was already “borderline” and/or
3. Kidney collapse

None of this was very encouraging. I was already trying to do something, mostly by eating less and exercising more, physically driven by a demanding and dynamic young personal trainer/dynamo. I was happy to be losing weight, and feeling stronger. But after all the probing, needles and nephrological advice and the spinning of countless scenarios of doom, both superdocs admitted they weren’t able to confirm their worst fears, and that, for now, at least, I would have to live with the bubble machine.

I was told that I should “keep on doing what you are doing” – e.g., exercising. “See you in six months.” But then, this happened, just five months down the line. Where could I find answers? Who, now, to turn to?

In my experience, there are always at least two networks of gurus to consult – the “know-how” specialists and the “know-who” connectors, who have been around the block, as we used to say, and close to the real street knowledge.

In my case, I reached out to Vicki Gordon, an old friend and TV power presence with an unrivalled global girls network that included a friend in LA whose former husband was afflicted by and survived the pancreatic cancer that I still didn’t know I had. That friend, as it turned out, was now working in the field of pancreatic research and had a friend in the medical management business at a high level. She would speak with him about me. (We knew each other from Boston half a lifetime ago.) She sent her article from the Wall Street Journal:
Leslie Michelson: Doctor to the 1% (and Maybe Someday to You)

The rich are different than you and me. Not only – yes, yes – do they have more money, but they’ve also heard of, and many have hired, Leslie Michelson. He’s their de facto primary go-to doc, though he holds no medical degree.

Mr. Michelson is the CEO of Private Health Management, an ultra-high-end company that borrows from concierge medicine, managed care, applied-sciences research and information technology while fitting into no neat category. The best analogue might be the investment and tax specialists that the affluent employ to run their finances; Mr. Michelson does the same for their health care. “Like private wealth management, just far more important,” he quips in his modern Beverly Hills offices, all green glass and steel, white walls, white floors.

Mr. Michelson, who sounds remarkably like the actor Michael Douglas, has spent 30 years in the health-care business and thinks he has learned what’s wrong and how to fix it. And how to profit from it. Thus Private Health, which he founded in 2007.

She told me, “This is a guy you probably would want on your medical team if you were confronting a serious affliction. At the same time, he is one of those very people most likely to be the most unaffordable. As the article explains, ‘if you have to ask what they cost, you can’t afford them.’ ”

At the same time, it was worth an inquiry, and soon VG was talking to him and setting up a conference call. It was all happening right now. Boom. Boom. Boom! An hour later, we were speaking. As we felt each other out, I was on the disbelieving, deferential side, not quite begging, but I am sure he could sense my hope for a knight in white armor. Then, out of the blue, he
reassured me with “music” I could dance to. “I know the article stressed we work for corporate bigwigs but I am a 60’s person,” he confided. “I want to change the system, not just help rich people.”

He explained that their approach was based on fostering better communication and teamwork between doctors, patient involvement, close attention to the latest breakthroughs, and careful case management. “Our whole system is derivative,” he told me. “We are just applying best practices.”

In addition, his organization maintained a constantly updated database of the best doctors based on their track records. “We want to assure excellence in care to get clients well. We do follow-up and monitor all the medical procedures.”

It was an impressive spiel, made more impressive by his years in the business and the people who swear by him. VG had already sent him my CT scan report. Based on his experience, he undoubtedly knew my pancreas better than I did.

Leslie stressed two points: first, allow people with real expertise to guide you. I reminded him of Steve Jobs opting to treat himself and delaying a pancreatic cancer surgery that could have saved him. It turns out, Leslie had written an article for Forbes about Jobs, making that very point. He wrote:

> Health care decisions are different from others. What matters when you find yourself seriously ill isn’t how smart, decisive, and accomplished you are in your chosen field. What matters is being smart enough to know that your judgment is compromised by emotions – and finding clarity through expert help.

> His second point: seek out the best medical help you can. He then shocked me by asking if he had been “presumptuous” in
booking appointments with me for Friday – it was Wednesday when we spoke – with a surgeon, Michael Lieberman, and an oncologist, Allyson Ocean at Cornell Weill on Manhattan’s trendy East Side.

He was going a mile a minute, and fortunately VG was writing it all down. I saddled up and went along. The sooner the better, I thought, and later “postponed” an appointment with another doctor at a different hospital.

On Friday morning, I was at V’s house at the appointed hour. We had a cup of coffee and I know she knew how freaked out I was. That other C Word: Cancer, can do that to you. I was on a journey in which the term PC moves from referencing Political Correctness to Pancreatic Cancer. Welcome to my new world!

Soon, we were in a cab, fighting the New York traffic, heading directly across town from West to East. Funny, how in New York most of the top hospitals are in the richest neighborhoods! They closed St Vincent’s, the one hospital we had on the lower West Side two years ago to rebuild it as a condo. As they say, in New York “reality is spelled realty.”

We arrived at the hospital to see Dr. Michael Lieberman, who Leslie thought was the best of the best. Funny, when we mentioned Michelson’s name to him, he didn’t know him. Clearly Leslie was drawing on in-depth research, not just some old boy network.

His bio is impressive: “Dr. Lieberman serves as Director of Surgical Oncology and Director of the Pancreas Center at New York-Presbyterian/Weill Cornell Medical Center. He is an Associate Professor of Clinical Surgery at Weill Medical College of Cornell University, and consultant at the Strang Cancer Prevention Center. Dr. Lieberman is Director of Surgery at the Jay Monahan Center for Gastrointestinal Health.”
Jay Monahan was the husband of former CBS News anchor Katie Couric, who came down with colon cancer a few years ago. Although she couldn’t save his life, she did raise a ton of money to set up the Center that now carries Jay’s name, with many endorsements from the entertainment industry, an industry both V and I had been part of, so it was in some ways like being home, except this facility was state of the art. No waiting here; we were ushered in the minute we arrived.

The first step in any medical visit is to show your insurance card, and then fill out pages and pages of information. I did that twice for the two doctors I was seeing. One doctor wanted a co-pay, the other, I am sure, will bill me.

**THE DOCTOR WILL SEE YOU NOW**

Dr. Lieberman was commanding from the moment we met, comfortable as an explainer and cautious as a promiser. He is proud of his hospital’s track record and laments that too many people come to see him when it’s too late, after the cancer has spread. He was personable and not in a hurry. He inspired confidence even as he explained they have to know much more before they can operate and these procedures can be very long and demanding. Nevertheless, he examined my CT scan just as his doctor-in-training Mr. (not yet Dr.) Wei was examining me. Check. Check. Check.

More questions. More explanations from mine. VG was taking notes. I can’t stop thinking about the movie *Alien*, fearing I have a mini-monster inside me. I was focusing but not totally concentrating because, like many others, I am not a strong believer in big medicine; and I really had no alternative and felt blessed to be in such smart hands.

VG scribbled away. I couldn’t read her notes any more than I
can read what doctors write. (I once tried when my dad was in the hospital: after making a big fuss, I got to see his records, but they were meaningless hieroglyphics.)

Happily VG’s assistant decoded and transcribed her far more ordered notes:

After looking at the cat scans and blood tests, he feels Danny is a good candidate for surgery.

He needs to confirm that the cancer hasn’t spread and is ordering a PET scan of his body and an endoscopic biopsy; he believes it is cancer.

**Description of the tumor:**
- In the tail of the pancreas
- Touches and involves the spleen and the splenic artery
- Touching the stomach and may be invading the stomach
- Possibly invading the fat around the pancreas and spleen
- Moderate-sized mass, does not affect any main blood vessels, everything he sees now can be removed

**How to proceed:**
- Next week, an endoscopic biopsy, a PET scan
- Feels it should be 4-6 treatments of chemotherapy and then surgery
- Moving forward it depends on the stage, the prognosis, if lymph nodes are involved and metastasis

**Right now:**
- Thinking of what’s there and chemo few months then surgery. They call it: Dystal pancreatectomy
- Splenectomy and stomach vaccinations prior to surgery be-
cause spleen takes out infection, spleen is the organ that protects from infection
- PET scan to look at whole body and ultrasound
- Start chemo first
- Medical doctor to clear him for surgery and cardiologist to evaluate
Can start week of September 29 and hope to put a port in this week

How do you see this?
- Endoscopy and PET scan next week – set plan after
- 2-3 days for pathology results
- PET scan next day
- Will need pre-treatment check-up before starting chemo
- Most likely 4 treatments for chemo, 2/month for 2 months but possibly a third month with 2 more treatments
- They will re-image and decide before making final decision on surgery

Whew, that was a lot to wrap my head around. VG was tracking everything, as I was trying to understand what it will mean.

There it is, my new life for the next few months and more. Clearly, there will be a recuperation period as well if everything goes according to plan.

If!

The next stop was in the building across the street, also ultramodern, but not inviting. Another temple to philanthropy from a Wall Street wonder with a donation from the Murdoch Foundation. That’s where I met the oncologist, i.e., cancer doc, Dr. Allyson Ocean, as warm and wise as you could hope for. She demonstrated a capacity for caring and projected a very savvy
approach to the process from the first smile. Like Dr. Lieberman, she was patient with her new patient’s dopey questions and understanding of any confusion I may have had, carefully repeating the journey ahead. She was there to take me deeper into the mysteries of my own body.

Here are VG’s notes of our meet-up from September 19:

- Uncertain what kind it is but believes it is adenocarcinoma, which is the most common and most aggressive form
- Other kind, neuroendocrine, is more slow glowing and requires a completely different treatment course; the kind Steve Jobs had
- If it is adenocarcinoma:
  - Best way to treat is to remove
  - She feels Danny is good candidate for surgery
  - Several months of pre-op chemo
  - If there are cells escaping, will treat those cells as well

**Treatment**

- Combo of 3 drug cocktail
  - 2 drugs administered for 1 day at hospital, 3rd is hooked up to mediport and will take 2 days to dispense
  - Treatment every two weeks for 2 months or 3 months depending on how tumor responds to therapy
  - Most effective, proven way to shrink tumor:
- Mediport put in before chemotherapy begins
- Medicine before to prevent nausea and vomiting
- They will give a shot to boost up white blood cell count because blood cell count can go down
- Risk of peripheral neuropathy – numbness of hands and feet
but usually associated with longer chemotherapy treatments

- 4-6 treatments prior to surgery, 2-3 months
- 2 are in office
- Home with last drug in cartridge – 2 days
- Possible hair loss
- If fever goes over 100.5, call
- Very infrequent possibility of mouth sores, which they treat

**Post-chemo:**
- Image after 4 sessions to see if two more sessions needed and to check if still in good standing to have surgery

**Summary:**
- Both doctors are in agreement for treatment and both cautiously optimistic
- Concurred 2-3 months of chemotherapy and assessment to make sure
- Surgery
- This will be confirmed after a PET scan and endoscopic biopsy to confirm it’s cancer, type it, and confirm that it hasn’t spread any farther than they see on original CT scan
- Both feel now, from what they can see, that it hasn’t spread and that he is good surgical candidate
- Feel they can remove the tail section of the pancreas, the spleen, the splenic artery and a portion of the stomach if necessary
- All can be done

**SEPTEMBER 24: THE BIG TEST**
It is time for the big test, an upper endoscopy procedure at the Greenberg Pavilion at the New York Presbyterian Hospital/Weill
Cornell Medical College. It is a huge and recently renovated building, and when you finally find Greenberg with its own elevators, you have been walking down an endless corridor for a lifetime. There, in the lobby, is a painting of Mr. Greenberg posing with his wife. He is the benefactor with naming rights, the former head of the AIG insurance company that played a big role in creating the financial crisis that caused the economy to be bailed out. Not clear if the fortune he made was made legally, but the hospital is not asking too many questions.

On Wall Street, Maurice Greenberg was known simply as “Ace,” and he was back in the news on the day of my visit. Reported the New York Times:

**Former AIG Executive Sues US Over $182 Billion Bailout, Saying It Wasn’t Favorable Enough**

One might call that, ‘chutzpah,’ as several irate lawmakers did, or ‘rubbing salt in the wounds’ of the American taxpayer. But to a few Wall Street financiers, a lawsuit that accuses the government of shortchanging the American International Group in its 2008 bailout is something else: a promising investment in a cause they support.

Maurice R. Greenberg, 89, the former AIG chief executive who still holds a large stake in the insurance company, filed the lawsuit on behalf of fellow shareholders. He has now raised several million dollars from three Wall Street companions to help cover the cost of the case. The investors, who are entitled to a cut of any damages Mr. Greenberg collects from the government, contributed about 15 percent of the tens of millions of dollars in legal costs, according to people with knowledge of the arrangement.”

“Ace,” however distasteful his tactics, doesn’t give up and, I
guess, the message to me is that I shouldn’t either. I was on time to the well-appointed Endoscopy Suite at 1:30 for a wheels-up procedure an hour later. I was there for an upper endoscopy, a procedure to examine the esophagus (tube to the stomach), the stomach, and the beginning of the small intestine. The endoscopy is a flexible tube. They want to look around inside my blighted pancreas and take a small pieces of tissue for biopsy.

I am to be sedated for a procedure that is to take 20 minutes. The area is buzzing with assistants, who take my temperature and blood pressure and check on my heart.

Unfortunately, there is a delay and back-up in the operating rooms. Hurry up and wait! In the interim, I undressed, redressed in hospital garb and met my doctor du jour, Reem Sharaiha, a beautiful young Jordanian woman with a big smile.

When I got into the room, there was also a knock-out anesthesia team on hand, again all young women – the doctor was a Harvard grad who looked like she was in her 20’s, and we were joined by a cyst specialist whom I didn’t meet.

The anesthesiologists were grilling me about what I eat, what medicines I take, and if any of my teeth were broken or chipped. They could have been police interrogators: they kept repeating the questions, committed to being sure. I was warned there might be bleeding but there wasn’t any. Remember, I had just had one of these procedures for my stomach in the less labor-intensive offices of my doctor a few weeks back, so I am now an “old hand” at endoscopy.

So there I was, in the capable hands of an Arab doctor on the Jewish New Year in a Presbyterian hospital. Perfect.

Results to come. If they knew what’s in there, they weren’t saying. My friend Steve showed up to escort me out. (Liability!) We went over to my friend June’s New Year’s dinner but I was
getting tired and left quickly with a bag of chicken and potato pancakes.

Next test: a PET scan on Thursday.

**SEPTEMBER 25: LA BAMBA**

Who would believe that someone is blasting the Richie Valens songs *La Bamba* at me as I lie strapped into a giant nuclear medicine imaging machine that is poring over every inch and foot of me. “Yo No Soy Marinero,” they sing. “Yo Soy Capitan.” (Translation: “I am not a sailor. I am a captain.”)

I felt more like a galley slave on this voyage as the next test in this medical journey looked more deeply at my innards using a radioactive nuclear “tracer” inside a vast modern-looking but creaky scan machine that takes up the whole room.

I have already had a CT scan, and now it’s time for a PET scan. Does the ASPCA know how animal names are being exploited by the medical industry? Here’s what it is supposed to do:

A positron emission tomography (PET) scan is an imaging test that uses a radioactive substance called a tracer to look for disease in the body. A PET scan shows how organs and tissues are working. This is different than magnetic resonance imaging (MRI) and computed tomography (CT), which show the structure of and blood flow to and from organs. A PET scan uses a small amount of radioactive material (tracer). The tracer is given through a vein (IV), most often on the inside of your elbow. The tracer travels through your blood and collects in organs and tissues. This helps the radiologist see certain areas of concern more clearly.

Got it? I am not sure I do.
Anyway, it is uncomfortable and you are told to be totally
still even as they play music that makes you want to move. “No
dancing,” was an instruction from Amy, a nurse with an infec-
tious smile, who got me started, but then went home before I
did, probably because her shift was done, leaving me nurseless.

I almost missed the test because of confusion over when it
was. I thought it was the same time as the endoscopy I had had
the day before, at 1:30. Actually, I was supposed to have been
there at 9:30 and was lucky that they could fit me in. I realize
now that I do need help in getting all these schedules right. I felt
like I had lost it. Maybe the rain and damp added to my dismal
mood.

They had a few problems with finding a working vein, so
there was a lot of poking and sticking and my arms now look
like a zebra except I am slathered in band aids, not stripes. I
really do feel like that proverbial slab of meat, while constantly
worrying: What they will find? How bad will it be? You can’t fool
this technology!

Back in PET scanland, first a nurse does the injecting and then
the technician comes in with the nuclear tracer bullet.

His name was Sunil and he wore a really sharp New York Yan-
kees silver watch as we discussed this big day in Yankee history
– Derek Jeter’s historic final game. Sunil has been doing this for
13 years and he’s a big fan of the Bronx Bombers even though
he’s of Indian descent and lives in New Jersey.

He finally got the tracer in, and was gone. I was ordered into
bed to nap for an hour and allow whatever it is to circulate.

Next Stop: getting into the spaceship-like machine was trick-
ier. They wanted my hands up over my head, but an accident I
had when I was thirteen has left my left elbow a bit off kilter, so
I couldn’t quite do it. The position began to hurt, so we had to
stop and start again with my arms strapped at my side.
And that’s where I remained for nearly an hour with the machine doing its thing. An operator in a control room was taking the images. They have had the machine for ten years, he told me, but he’s been here for 20. As it moves back and forth, it is very noisy. Maybe that’s why they offer the music, much of it Spanish, although Bob Marley had a welcome guest turn with his anthemic *One Love*.

That made my otherwise bleak day as patient #1 in the journey deeper into this disease. They told me they would send the results to my doctor on Friday. When I left, escorted by a friend, I was still radiated and preoccupied by my fears. The whole wing was empty.

I had been nuked.

**SEPTEMBER 26: BAD NIGHT**

I am home today, home with my worries and uncertainties. I sleep late. There were three unplanned contacts with the medical mother ship today.

VG emails to say that Leslie Michelson, director of the LA-based medical consulting/patient management firm that serves elite clients called to say that his firm has agreed to take me on as a patient/client/customer, gratis. Why?

I call to thank him. We discover that he’s coming to New York next week and have set up a luncheon. I suggested a Halal lunch truck, but Vicki knows better. We are meeting at the pricey Café Luxembourg near her house on Tuesday. This should be interesting. He did tell me – for the second time – to recognize that in diseases like this, it’s not all uphill. What does he know that I don’t?

The hospital called. The people who put in medical “ports” that enable chemo cocktails say they want to implant the device
on October 6. I need to bring someone along as an escort. Even though we still don’t have a diagnosis, it looks like the decision for chemo has been made. They know what I have still to find out.

I watch a video by Gary Null on what’s wrong with cancer treatments that also questions chemo. The video argues that it is not very successful. It also raises the question about mortality, asks if it’s worth it, or at least the doctors it interviews ask viewers to ask, especially on their expectations of success. He is Mr. Alt-Medicine. The video is not bullish on corporate medicine even as it is informative about how cancer wrecks your body. It says that treatments for cancer lag behind other diseases despite the highly hyped “WAR on Cancer.” It shows articles and stats. Persuasive, but not focused on what they think I have.

Then the office of Dr. Chuey, the doctor at Beth Israel, called. I visited him when I was still complaining about reflux. I wanted to get him on as my main doctor but he couldn’t see me for a month, a far more typical experience than the one I have had so far. His office was reminding me of our appointment. A lot has happened since that unsuccessful visit. Not all good. That appointment is also on Tuesday. Need to check the time.

I went out to watch a video last night and sat in a comfortable chair but began experiencing pain. Had to leave.

It’s 4:37 am. My brain is buzzing. I am not sleeping well, also worried about insurance. These procedures are all so costly. All of this is on my mind in the middle of the morning. Not good. Back to sleep, I hope.

SEPTEMBER 27: NO CHAMPAGNE YET

It’s 2:30 at the offices of Dr. Allyson Ocean, oncologist extraordinaire. Vicki has taxied in from the East Side. The doctor is in the house with her assistant typing notes. No one has passed out the
champagne yet, nor will they.

The news is not good. It’s cancer, now confirmed by two tests. It’s malignant cells, adenocarcinoma. I felt like crying but the tears wouldn’t come. No more denial, no more joking around. It’s reality time, and it’s clear no one really knows how much time I have.

The bad news with the bad news is that they have found two tiny nodules – less than a centimeter in size – outside the pancreas that means there may have been a spread. That ends my hope of a quick surgical solution. They find this when the PET scan machine “lights up.” So much for my hope that I would get a pass, although I sort of knew because of the pain in my side.

The prescription is a chemo cocktail called Folfirinox – a mix of 5 FPU Irinotecan and Oxasliplatin. They say that has the best track record. There is another concoction called Gemcitabine and Abraxane and then some clinical trials. They don’t have hard data. I have a CA19- blood tumor marker, a 755 in the lab results.

They also did a blood test used on Ashkenasi Eastern European Jews to check on a BRACCA gene. I asked if I get a discount because I am Jewish. Hahaha. No!

Later, my daughter Sarah told me she had the test and it was negative.

The chemo will start this week. Next week, they will put a port in my chest to make it easier to “infuse” me. I will have to take it twice a month, forever.

Yes, there are side effects. We will have to see. I always wanted a Yul Brynner look.

I also now have something in common with the great Rush Limbaugh: Oxycodone for pain. That’s scary. Can’t overdo it, but maybe I will be able to get some sleep.
**Web MD:**
Pancreatic cancer is a disease in which malignant (cancerous) cells form in the tissues of the pancreas. The pancreas is a gland located behind the stomach and in front of the spine. The pancreas produces digestive juices and hormones that regulate blood sugar. Cells called exocrine pancreas cells produce the digestive juices, while cells called endocrine pancreas cells produce the hormones. The majority of pancreatic cancers start in the exocrine cells.
I have been in overdrive. We pushed up the first chemo dose for today. Then I get the port in my chest and the pump and move to a regular schedule. I guess my private war on cancer has now officially begun.

Back at Allyson Ocean’s office at Cornell Weill for an 11:00 appointment. My Private Health PA Jessica is not here. She got stuck on the #6 train for twenty minutes and decided to hoof it from Lexington Ave. to York Ave. in high heels! The good news is she is a runner and fast! The bad news is she is going to be hurting later.

They take my blood pressure, weight, and blood – and my $40 co-pay. Jessica explains what the session will be: four hours of “infusion” of a cocktail of three deadly medicines preceded by other meds including one designed to head off nausea. Yet I feel that may still be coming, so I have some new meds if it does – one if it gets “severe” and another if it doesn’t.

I am in a comfortable chair with my arm plugged into a tube that drips it all in. It’s comfortable at first. No pain, but probably no gain, unless they do this again and again. My indigestion
stays with me. And then a cold band of sweat breaks out. At first I thought it was because I was wearing a sweater in a warm room. But I still have it when I arrive home, perhaps an indicator of vomiting to come. The nurse said I handled it very well and got the gold star as victim of the day. I held out for several hours in taking a piss, but when it came, it kept coming because I have had so much liquid poured into me.

This could become grueling. No end in sight.

On Monday, they will put in the port and attempt another of what I call a “kiskaectomy.” They are going to try to biopsy one of the newly found nodules. If they are not malignant, that might make me “receptive” for surgery.

I never thought I would ever want an operation!

My brother Bill called and is suggesting I move out of my house because the dirt here doesn’t mix well with a compromised immune system. I am open to doing so.

My friend, movie producer Anant Singh called in the morning from South Africa to check up on me. His best line: if you could help destroy apartheid, this is nothing!

Also had another call from a former South Africa Now colleague, Mwelli Mzizi, who seemed destroyed when I told him the diagnosis. Maybe I have to find a better way to discuss this.

Thanks to Jessica, I had my first Uber taxi ride home, avoiding most traffic. The driver, a woman from Nepal, says she is not making much more than when she drove a cab.

Jessica, like her boss, Leslie Michelson, is committed and skilled. We got a bit into her family history including some info about her Marine younger brother who had the guts to go for the glory in Afghanistan and is still fighting the ghosts.

Everyone has a story and their own pain.
WHAT TO DO?
Once your diagnosis is in, you start hearing from people who claim to know better than your doctors. They have members of their families who have beaten the Reaper. They know what you should eat and drink. They are suspicious of, and hostile toward, all Big Medicine. They have better doctors. Here’s a letter I received from Carole the next day. I don’t know her well. She’s sincere, if a bit of a know-it-all, more emotional than I. She’s a professional tour guide.

Hello, Danny,
What we suspected! My brother had adenocarcinoma. Don’t listen to your oncologist, you want to survive. There is little conventional medicine can do for you. They can give you chemo, which can pump you up for a couple of years and then that is it.

Please call Dr. Richard Linchitz in Glen Cove! The cancer you have is rare and difficult. He has cured himself of lung cancer and had a patient in his sixties with your cancer who was given off for gone and he is here today. It may cost you $40G!

Watch the film, “Dying To Have Known”, 80 Min, at www.dyingtohaveknown and you could contact the Gerson Institute in San Diego and Tijuana. Look into Max Gerson.

Also as advised, Dr Ralph Moss, cancer decisions, the Annie Appleseed Project.
If I had cancer, I would go to Germany straight away. The Huf-faland Clinic in Wiesbaden. Don’t forget, chemo came to us from Germany, so did radiation, both considered “wacky” when they first appeared.

Also, contact Vincent Gammill in San Diego, who runs the Mango clinic, Linchitz; Gamill all come via a well-known doctor. dispensing low-dose chemo, Dr. Tom Lodi.
Act now and use this week for research. Once you start with your guys, you lose your immune possibles.

The first thing I would change dramatically is how and what you eat. I saw you the other day wolfing down your food, not good. You eat so fast and don’t chew your food, which means you are losing most of the nutrients! Off all sugar and fats and take the time to enjoy your food, calmly and savoring each bite that you eat with style and finesse.

They say one cup of blueberries per day helps.

I have to go. I have said this all once. You do what you want; My guess is you will trust and opt for the standard, as you believe it. Again, watch the film which is free and also check out the Cancer Control Society In Los Angeles;

My doctor in Chinatown has helped a number of people, and I can have you call a friend who can be a reference. He saved her mother. She is involved in a health career and just finished an amazing phd from Columbia. Dr Chai at Lin Sister’s herb shop, Bowery 4. He will prescribe a regimen of herbs. They are easy to take. He will interview you and he is a reg md from China . . . Again, up to you. Also, the Annie Appleseed project was started by a cousin of good friends of mine in Brooklyn

Good luck and get going NOW!”

I sent it to my friend Marc, who has had a lot of experience in the medical world. His response: “I want to inform you that if I ever meet Carole, her tour guide career will be over since i will be wringing her neck.”

I received this letter in the morning the day after I got the bad news. Vicki was aghast and wondered if I was about to go running around Chinatown herb shops, or to the Black Forest. I am open to supplementary or complementary care, but right
now I am still in shock and need a clear plan of the type outlined by Dr. Ocean and Leslie Michelson, not a doctor, but the Chairman and CEO of his care management company, Private Health (“Care Without Compromise”).

I met Leslie yesterday. He was not selling me anything but giving me something. Leslie has offered the pro-bono personalized services of his company to manage my care. This will include help from an Expert Advisory Board, a network of specialist Physicians, health care when I am traveling, a local resource network, non-physician staff and facilities and infrastructure etc. Wow. He’s become my godsend in chief (GSIC).

They take a very systematic approach, monitor new findings, follow the biomedical research and clinical trials in detail. They inspire confidence without minimizing the risks and dangers.

Their bottom line is now mine: I have to beat the odds. I really don’t know what they are, but they are not good.

My brother Bill came to see me. He seemed more upset about getting my house in order. He was horrified at how I am living.

**OCTOBER 3: THE MOVE**

I hope this is not a move I will have to atone for. One side effect of my affliction is dropping immune levels. That’s scary because I am not sure how they measure that. In any event, it was decided by wiser heads than mine that my loft/apartment/pad/domicile is not as clean as it should be. This is less a comment on my mess than on its resemblance to a warehouse. It is dusty and could use a hazmat remake. Not ideal in a circumstance like this!

Time to leave, says my daughter Sarah, the West Coast coordinator of Team Rescue, and we have found a small hotel B&B around the corner from my place called the Colonial. As I was
debating moving in, Sarah was already on the phone booking me in for a week, while I opted for a weekend.

The apartment I am in is quite sweet: living room, bedroom, Jacuzzi, TV set, a comfortable bed, and a garden I can’t really use because it is pouring during my first full day here. I am here through Sunday and then move upstairs.

But it is restful and clean. Their maid army sees to that and takes pride in keeping it that way. I moved over two bags, my computer, of course, a box full of medicines that seems to grow by the day, and a pile of newly washed clothes.

Before shutting the suitcase, I added a bottle of seltzer and what I thought was a sealed bottle of still water. It wasn’t, so my clothes are drying out again. Leave it to me. Just to reinforce the point, my brother Bill has been circulating a picture of him at age four fixing the zipper on my jacket at age eight. Some things don’t change.

I have also been organizing escorts for my next hospital procedure on Monday. They are going to look at these mini-nodules that showed up in the PET scan and see if they are malignant. They will also put a port under my skin to make it easier to infused me with more chemo.

Had a dose of diarrhea today. What fun.

OCTOBER 6: THE TWOFER

I was back at Presbyterian for a “twofer” today, two back-to-back procedures, one a biopsy of one of those nodules in my lung, using a needle guided by a CT scan and then the placement of a port in my chest for future chemo infusions.

That meant two doctors, two treatment rooms, and lots of moderate anesthesia. Once again, there was a large crew ready to pounce – nurses galore and docs and assistants. People kept
coming up to introduce themselves. Maybe ten. Who can remember? Someone said they were part of the “faculty.” Not sure what that means. Will all of them bill me individually? Each had a specialized job to perform and waited patiently for their turn to torment me.

Smile.

The biopsy came first, so I was on a gurney being moved rapidly through the hall to the CT scan room. They don’t waste time. The procedure was tough because they had to twist their way in. I had been warned my lung could collapse. Happily, it didn’t, because that would have been far more painful. It seemed endless and left me hurting. I needed pain meds, but then they warned, if it persisted, use Tylenol. Translation: No big deal!

It didn’t.

They gave me more anti-pain med for the port and it was in before I had time to relax. So now, I have two more battle scars and am not supposed to shower for a few days or exercise. In at 9, out at 2:30! Wham bam! They know what they are doing!

At one point, as I was feeling sorry for myself, the wife of the guy in the next bed was insisting that her husband be given two Percosets for pain. The nurse had originally offered only one. She reminded her that her husband was an assault victim, seven stab wounds including one in the spine. I asked her if they caught the assailants. She said they had.

He got the pills. I will get my report in a few days.

Only in New York.

**OCTOBER 24: THE BIG ONE**

Time for the big test, an upper endoscopy procedure at the Greenberg Pavilion.

Picture Manhattan as two islands: an island of need and an
island of greed. Recent studies stress that it an inequality hot zone with unprecedented gaps between the poor and superrich with the middle shrinking away.

EMERGENCY

On the third week of the treatment mode of my ordeal, I found the “Big C” not as draining as the “small d” – diarrhea, not a topic that most people want to discuss. The new routine took over, and my world was soon reduced to sitting on the toilet dealing with nonstop runs, a demoralizing experience because you never know when they would happen or how exhausting they were. Not fun. Someone who had sent his life in political movements was now consumed by bowel movements!

At week’s end I moved out and into the Gem Hotel, an overly pricey, hip hotel carved out of the remains of what were called SRO, apartments for the poor of the poor on the corner of 8th Avenue and 22nd Street. If you want to see the real gentrification of Chelsea, you can see it here.

I was in a closet-like room, once again ingesting Gatorade and rice dishes, but nothing worked. They had me taking two diarrhea medicines, including Imodium in tablet form. Nothing!

So, it’s Sunday night and I’m bouncing off the small walls of my room when there is a knock at the door. It’s Tiffany, a medical doctor for hire with an iPhone for note-taking, a thermometer to see if I have any fever, and some related devices.

She announces, “I was sent by your daughter to see if you belong in the hospital.” She took a quick look at me and determined that I did. I was clearly very dehydrated, although I didn’t realize it. She had me pack some stuff – I didn’t have much – and decided that the closest hospital was NYU’s Langone Medical Center on the East Side. I told her I didn’t want an ambulance.
Part of me thought it was a joke.

I was sicker than I realized.

Sarah had offered her Uber account and the new cab service was there in a flash. I later learned that Sarah had, in effect, bribed Tiffany to come for a $250 house visit and then promised to UBER her back to her car.

Tiffany spent the time in the cab calling the hospital and arranging for emergency admission to a room on their cardiac floor which, I was told, was one of the newest. I was hustled from the front desk, with a quick stop for a stomach x-ray; up through one elevator, down a long hall and then up another in a new building complex that was expanding in front of our eyes. Later, when I left, I realized I had been in the building before.

I had become a neutro – a neutropenic patient with an uncertain condition that could have been seriously infected. We can’t be too careful in the Ebola era. For safety’s sake, I was put in a room that required all the nurses and attendants to protect from me from them and them from me. They wore face-covering masks and when I got there, special safety garb. It felt like I was now part of news I had been watching.

Some of the personnel were curious about why I had not gone to Presbyterian/Cornell Weill. “You should be there,” one nurse told me. I think the reason was that that’s where my records are, and because my oncologist, Dr. Allyson Ocean, was there.

It sort of made sense to me, too, except my daughter, who has been producing this “movie,” wanted me rehydrated with an IV as soon as possible. Hospitals don’t move quickly on Sundays usually, but this one did.

I must say my opening act was hardly a crowd pleaser when my runs ran all over the floor not once, but twice. That exhausted me and was more than embarrassing, not the way I like to in-
produce myself. The people who think I am full of shit probably don’t think of me in terms of a river of poop on the floor.

I have now been here four days and they promise to let me out tomorrow because my blood cell count has risen and they have found no infection. I still have the diarrhea, but it has subsided somewhat.

The routines are endless as your blood and blood pressure are attacked by an endless army of staffers who take it and keep track of it many times a day, no matter what you are trying to do. It’s not very restful, either. This is the former NYU Medical Center that is being modernized with big money from the Mr. Langone, and they are even building a new hospital inside the old.

So, in this house of repose, healing, rest, and rehab, every day starts off with the sound of piledrivers digging a new hole into the Manhattan bedrock that will become the foundation of the new building, one more in the endless race to promote philanthropists, project institutional power, and serve part of a public that needs serving.

Kenneth Langone, the NYU funder and patron, is not controversy-free. Despite apparent working-class origins and a stint as a carpenter, he soon gravitated toward Wall Street, not just as an investor, but as a political operative. He was a creator of ChoicePoint, the company that “cleansed” the Florida electorate in 2000, just in time for GWB’s Supreme Court-sanctioned coup, and became a major Republican Party fundraiser.

Later, as he maneuvered to turn the not-for-profit stock exchange into a for-profit engine of capitalist accumulation, he was challenged by then “Sheriff” of Wall Street, Eliot Spitzer, later the New York governor. It was reported that it was Lan-
gone who hired the private detective who outed Spitzer’s extracurricular sex exploits. Langone and Co. cheered as they helped engineer his fall.

As journalist Greg Palast put it, “Every time one of these fuckers gets indicted, they fund a new hospital.”

New York benefits, for sure, but not everyone in New York will reap the same rewards, as Capital magazine recently explained:

New York City is home to some of the most generous philanthropists in the world, who have helped create and nourish many of the nation’s premier academic medical centers and research laboratories.

But a by product of the competition between these brand-name, world-class institutions for donors’ attentions is the crowding out of New York City’s smaller, less known institutions. The asymmetric capacity to vie for philanthropic dollars perpetuates a system in which the biggest hospitals secure ever more funding while those that tend to serve poorer neighborhoods can’t access the wealthiest donors.

This means it’s hard for the hospitals that most urgently need new emergency departments and new pieces of equipment to get them. And while they’re merely struggling to deliver quality care under financial pressure, it becomes that much harder for them to undertake the transition to the kind of community-centered primary care services that public health experts believe are crucial from both a health and a long-term financial perspective.

New York has just been named one of the most unequal cities on the planet. As I lay here, I am staring out the window at the old Bellevue Hospital, now a giant men’s shelter, a sign of what I am talking about. Stories of hospital screw-ups in connection
with Ebola are all of the news. The most telling that goes beyond incompetence is in Spain, where a patient was rushed by helicopter to an emergency hospital only to discover that it had been closed months earlier in budget austerity layoffs.

Oops.

Back in my little corner of Langone heaven in the city that never sleeps, it is time to check out.

What do they serve this diarrhea-riddled body for breakfast? Prune Juice!

As I stripped off my hospital garb for one last nostalgic visit to the always near-by temporary commode, I was told not to use it. They had run out of the plastic bowls that fit into them, my final contribution to the hospital record book. It was time to return to big bathroom world.

CLASS SOLIDARITY

My mother was a hospital worker. She was the secretary at the first open heart surgery unit for children at Montefiore Hospital in the Bronx. (Ironically, some of my bedding today consists of sheets marked Montefiore.) She later worked at Lincoln Hospital in the South Bronx during its most volatile years as the spirit of Black Power swept through the community.

I knew something about those workers. The mom of my high school honey, Bonnie Feiner, worked for Leon Davis, who ran the drug store workers’ union and was a visionary leader of District 65 that spawned Local 1199, New York’s pioneering hospital workers’ union, led by trade union giant Cleveland Robinson.

She got me my first summer job in the summer of ’60 in the office of the organizing department. I mostly sorted membership cards in the pre-computer days, but they also pressed me into service as an organizer. I became part of the early morning team
handing out leaflets at the no-longer-existing Knickerbocker Hospital on Convent Avenue near City College in Harlem. The union later signed them up. My contribution was small.

(Note, as I write, my keyboard is being flecked with my falling hair, “thanks” to the chemo. It looks like snow!)

But the union had a big influence on me because of its idealism and political impact. It played a major role in support and funding for the civil rights movement. My first introduction to Dr. Martin Luther King Jr., whom the union adopted and backed until his death, was in the District 65 offices on Astor Place near NYU, where he spoke at a rally with Marion Wright (before she added the Edelman). My daughter Sarah would later speak at a high school graduation where Wright also appeared. She was then a student in Atlanta. Their joint eloquence was stunning and sucked me right into the civil rights movement back in 1960.

1199 also had/has a big impact on New York politics with its voter registration drives among working people, get-out-the-vote campaigns, and political strategy. It was behind the election of David Dinkins, the city’s first black mayor, and now Bill DeBlasio. It bolstered many strikes and sponsored many mass mobilizations. It later had its own internal issues but became known for its fierce advocacy, health, and welfare programs and as a force in national union and progressive politics. I was a witness and tried to help in the early days.

**HOSPITAL HISTORY**

- Birth: June 27, 1942, Jewish Memorial Hospital, Upper Manhattan. All windows were covered as per World War II security regulations. They expected the Nazis to bomb New York. The hospital was later closed. My mother wrote a poem about my birth.
Childhood accident, age ten. I fell on glass while playing in a field, deep gash in my hand. My dad rushed me to Lebanon Hospital on a Saturday afternoon. We are directed to a packed waiting room with people bleeding and crying. My father takes one look at the chaos, finds a white doctor coat, puts it on, and leads me into the back where he cleans the ooze, and using his army experience, stitches me up and bandages the wound. Another successful intervention by Dr. Jerry Schechter!

Childhood accident, age 13: I am fooling around in the playground across the street from our apartment and showing off to a neighborhood cutie named Lucy. We are on a seesaw. I am looking at her, not at what I am doing. I slip and try to break my fall by stretching out my arm. I feel a sharp jolt, my arm is broken. Everyone tells me not to move. Someone rushes to my house to get my dad, who’s just home from work.

An hour later, an aged ambulance arrives from Fordham Hospital, probably the worst in the Borough. The siren brings out a crowd of onlookers and kibitzers. How embarrassing, but what can I do? I am on the ground, on display for all to see. We get into the big box for the bumpiest ride of my life. If there was a hole or pothole along the way, this driver found it.

When we finally get there, they make me “comfortable” and then take an x-ray. That hurt, too. The doctor in charge in this charnel house reports it’s a very bad break, and that I probably won’t be able to use my arm again.

That’s all my dad needs to hear! “We are getting out of here,” he mumbles. He remembers an Army buddy, Dr. Gerry Morey, who had a skill of healing broken bones through manipulation, not surgery. He reaches him. It turns out he is on vacation upstate, two hours away, but agrees to come.

As a surgeon, Dr. Morey commands an operating room. All
these years later I still remember the anesthesia that knocked me out. I felt myself slipping away. He goes to work, slowly and carefully feeling his way and maneuvering the fragments in my elbow of what I am later told is a super-condular fracture of my left humerus. I never forgot that!

By mid-morning, he thinks he has it, and sets my arm in a cast. He also arranges to have me moved to Knickerbocker Hospital in Manhattan where he heads surgery, and which years later I help organize. This time, my dad drives. When I get there, they go to work setting up a rope-and-pulley system to help the bones slip into place. They change the cast. My left arm is now being lifted by this “jury-rigged” device. I was kept that way for three weeks in the hottest summer of my life. It worked. Today I can use my arm, although I still have a five percent disability.

- Westchester Memorial Hospital, built by the Rockefeller family in Tarrytown, “Sleepy Hollow,” New York, 1989. My mother, Ruth Lisa Schechter goes in for routine gall bladder surgery. The doctor pronounces the operation a success, but the patient dies. Then, suddenly, she revives. She goes home for a month and gets her literary and personal affairs in order. But then, her smoker’s body gives out. I race to say good-bye in the middle of the morning to find her ice cold body in a basement morgue, while my dad waits outside in deep grief.

- Earlier, my dad went to the same hospital for treatment of a sore toe. They treat it with some ointment but fail to diagnose the underlying problem. Later, it turns into a vascular condition that leads to nine operations and a partial amputation of his left leg. He sues for malpractice, but loses. He lives on to age 90½, and dies of lung cancer contracted in the Army, in a home hospice, not a hospital.

- There were more hospital visits along the way for me, includ-
ing one to Hanoi’s Bach Mai Hospital, attacked by US bombers two years earlier in 1972 as part of Nixon’s Christmas present to North Vietnam and, later, in another war zone, to El Salvador’s Maternidad, packed with pregnant woman in filthy conditions when I worked for ABC’s 20/20 news magazine.

My final story is happier: the birth of my daughter, Sarah Debs, at Boston’s now-closed Women’s Lying In Hospital on September 22, 1976. The only problem was getting there quickly because the traffic pattern changed due to school busing, so I had to drive on the sidewalk. Her mom’s water had broken. We made it. She was a month overcooked, but eager to join us.

**OCTOBER 16: GP VISIT**

I decided to take a walk and the subway to see the man who has been my doctor for 14 years. He is brilliant and I trust his judgment. He made room for me in his schedule and Jessica, my private care nurse, came along. I should have taken a cab. It was more tiring than I thought it would be. I realized again: I am sick. Her report:

Team, I accompanied Danny to his appt today with long-time internist, Dr. Dechiario. Dr. Dechiario felt that overall, he is doing as well as to be expected following his first round of chemo and subsequent hospitalization secondary to neutropenic fever and diarrhea. He has generalized weakness and fatigue, which is to be expected. Dr. Dechiario made one medication adjustment (decreased Lisinopril from 10 mg to 5 mg) and will likely be making more after labs that were drawn today become available for review. I will update the medication list and forward on as we go to account for the adjustments to his medication regimen. Dr. Dechiario will personally be speaking with Dr. Ocean as well to
ensure we are all on the same page. Danny also received the flu shot today. He is up to date on all other vaccinations.

Helen, social worker with NYU, contacted me regarding VNSNY services. A nurse and a social worker will be seeing Danny over the weekend. I believe the nurse will be arranging for a visit for tomorrow. Also, he should request to be seen by a physical therapist (PET) as well. There are times when Danny is a bit wobbly on his feet secondary to his generalized weakness and therefore a cane would be helpful for additional support and a PET can arrange for that.

In regards to caregivers, I met Eren’s sister, Saunie, and she is just as remarkable and seems to be a great addition to the team. He is currently receiving four hours of caregiver coverage and arrangements are in place to cover him daily.

The caregivers are ensuring he eats breakfast and lunch, but for dinner he is on his own. We need to make sure he is arranging for that as well.

Additionally, taking the subway is much too taxing for him at this point so going forward he is going to set up an UBER account on his phone (app has been downloaded to his iPhone) and he will just need to enter credit card info to get started. I ordered an UBER car to pick him up after his appt. I also loaned him $200 cash for the weekend because he had trouble getting money out at the bank and I wanted to be sure he had enough money to cover him for the weekend. He is looking forward to your visit on Monday, Sarah.

I will send an updated medical list in the near future. As always, please do not hesitate to reach out in the meantime.

Jessica L. Zambelli, MPA, PA-C
Director, Clinical Services
Private Health Management
MYSTERY

Years ago, in the early seventies, my Grandma Bessie got very sick and her doctor was puzzled. My father’s mother was at death’s door – her red blood cells were failing. She was rushed to Montefiore Hospital for exploratory surgery. The family followed and staked out the waiting room. An hour or more later, the doctor, his uniform stained with blood, came out to brief us. He said they opened her up and found nothing, but now she seemed to be getting better. “We call it exposure to operating room air,” he shrugged. And then he took his mask off and looked right at me. His next words, “Danny Schechter?” OMG – it was my college roommate’s best friend. Small world.

TRICK OR TREAT?

I may be making progress on the poop front. Fewer runs. Overall energy up although today I had to shlep over to the bank, and it was more exhausting than I thought it would be.

Had a rough night last night – felt anxious – hopeful that I can move back home on Saturday when my version of the Halloween witch moves out. Earlier tonight I crashed, but am back up. Will try to sleep again in ten minutes, 8 p.m.!

Been listening to music, trying to stay positive. Not always as easy as it sounds. The mayor of Boston died yesterday of cancer. His claim to fame: he shook the hands of half the population. (My father used to say he could never understand him not because of his Bhaaston accent but because he was an incoherent mumbler.) Not as impressive as the late governor of Michigan, Soapy Williams, who is said to have shaken every hand twice, and that was before we had sanitizer. Today, my health care consultant gave me a report on diet and nutritional supplements for patients/victims like myself. It begins:
You are a 72 year old gentleman recently diagnosed with metastatic pancreatic cancer. You are interested in incorporating a healthy diet to help improve overall strength and energy levels.

You bet I am. Too tired to read it now.

Kids are all over the streets trick-and-treating. Chelsea is a carnival of devil worshippers tonight. Everyone wants to be someone else, another gender or creature. Dentists love this holiday. The Candy Man is back. Here I am, trying to move forward, guided by the latest in science, and everyone around me is into goblins. Fun, fun, fun???

As a certified pooper, I don’t want to be a party pooper too or feel superior.

It looks like the Dems have blown another midterm election. Say good-bye to democracy. It’s back to the Middle Ages. Every day will soon be Halloween for Republicans!

It’s almost Halloween here in Chelsea, originally the gay heart of Manhattan, a community that has been hijacked by real estate interests with soaring rents and banks on every corner. A grassroots effort fought over for years to create a park over disused railway tracks up against a disinterested city is now a tourist destination and a magnet for more investment in pricey condos. Viva the High Line.

I have been camped out here back at the Colonial Guest House between hospital visits. I will be “going” to Halloween in cancer garb, a balding head, and aging face. It’s been a rough time for me with unshakable chemo-related diarrhea that turned into constipation and then an abscess in my behind. Weakening me on every front. I went for my second chemo appointment and my doctor saw my condition. She gave me only half a dose and had me take an endless blood transfusion to jack up my hemo-
globin levels. The next day I was back at my GI doctor, Dr. Tseng, who diagnosed an abscess in my tush.

The next day, blood showed up in my stool and I was off to the emergency room at Cornell Weill. I knew better than to go to an emergency room on a weekend but I had no choice. It was like the Black Hole of Calcutta – or at least how I imagined it to be. Overcrowded. Staff overwhelmed. Flies! No rooms at the inn. Overworked doctors and nurses trying to diagnose and treat in a babble of languages with translators.

“This is the best hospital in New York,” a nurse tells me. A surgical team fixes my behind and puts in a drain. Easy to soil your bed, hard to get it cleaned up. I am sure I am not the worst case here. I keep being promised a room, but there are no rooms. At least I am in a temp place, not in the hall. It is noisy, filled with screams, mental patients, and homeless people – the reality of New York and of course the sick and infirm want to be at the best place, but the sheer numbers make it hard to get everyone what they need.

I am in pain and they give me morphine. I feel like a civil war veteran, not in any class struggle but in my own ass struggle.

Finally, after two restless nights, I fall off to sleep, only to be awakened by a nurse. It’s 1 a.m., Monday. I have been here since 11 a.m. Saturday, technically a violation of the law that governs emergency room stays. But, hooray: I have won my reprieve from the governor. They are sending me upstairs to a room. Hallelujah!

A member of the transport/escort “team” arrives, puts my stuff on the stretcher and pushes me into elevator after elevator until I find myself in hospital heaven on the ultra-modern 14th floor in a room with a huge river view of Roosevelt Island and Queens. I am now in a bed that measures itself to your body. A
lovely nurse welcomes me. What a contrast! This is Upper East Side medicine! I have been saved, maybe even born again, in this Presbyterian hospital so favored by the Jews in the neighborhood.

One highlight: a young woman sticks her head in to tell me I’m about to be discharged, then she returns and says not yet. It turns out she is very nervous because after her shift, she and her beloved Kevin will be getting their marriage license.

I am here for a day and a half and then back in Chelsea Tuesday afternoon. It takes hours to get my discharge papers largely because my RN is having his first day on the job. So I am charged for a second day. Luckily, I get an African cab driver with whom I can share stories about people we both know. The diarrhea is still with me but it seems, hopefully, to be tapering off a bit. Please God. I am exhausted and fall asleep at 7:30 p.m.

It’s been about a month since my diagnosis, or sentence.

THE BILL

A few weeks later, a bill comes in for this hospital interlude.

<table>
<thead>
<tr>
<th>Service</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine Semi-Private</td>
<td>$14,000</td>
</tr>
<tr>
<td>Medicine Private</td>
<td>7,750</td>
</tr>
<tr>
<td>Laboratory Services</td>
<td>2,563.44</td>
</tr>
<tr>
<td>Radiology Ultrasound</td>
<td>1,558.01</td>
</tr>
<tr>
<td>Emergency Room Services</td>
<td>1,182.12</td>
</tr>
</tbody>
</table>

I owe $750. I will challenge it with the company they outsourced billing to. I later learned the hospitals negotiate all the bills down.
The third chemo session came and went. I have settled into a regimen of infusion by IV and pump. Happily, had no side effects but I don’t think they are giving me full doses of the poison because my rectum is still not fully healed. Am eating and sleeping and, more importantly, pooping.

Lots of energy going into cleaning my loft. Eren is an amazing worker, carting out nine bags of garbage and junk earlier in the week. The place is a long way from being cozy but being home has bolstered my morale and saved my budget.

Getting all sorts of outside help. A physical therapist from the Visiting Nurses Service came by and showed me exercises. A group called God’s Love is delivering food, and friends are starting to visit, but I have to toss them out by 9 p.m. to go to sleep.

Still using Ambien and fear an addiction.

I could barely pay attention to the mid-term election because it was clear the Democrats were committing suicide. Painful. I wrote a column on it, to be published in Venezuela – so much for my influence in US politics!

I have to keep focused on the politics of personal survival as this patient copes with cancer, but I did go out to vote out of some sense of duty and ritual. Took me a while to mark in my
ballot, Voted for the Green Party. The rest were just too painful.

GET WELL!
I have had emails from comrades old and new from around the world. That feels good. I am not soliciting sympathy and fear having to spend too much energy sending thanks or answering questions like, “How do you feel?”

Meanwhile, I did get a surprise package from the Harpers, whom I don’t know in Maryville, Tennessee. It was a big envelope of cards, drawings, and hand-colored greetings from kids sending love and telling me to “Kick Cancer’s Butt” in colorful language.

Thank you Mozi, Leah, Ruth, Annie, Lydia Fox, Erin “the other fabulous one,” Erina Gardiner (“Well, I can’t say, ‘Oh you’re such a sweet guy’, cause I don’t know you, like at all. But I have a feeling that If I did know you, I’d say you were sweet, amazing, ‘eye-opening’ inspiring, miraculous, cooler than a baby narwal skiing alongside a squirrel person”). Abigail says her mom won her battle and so can you, Henry Profitt, Ruth “Stay up in the clouds, It’s cooler up there,” Kaitlin Carpenter “We Are Praying for You.” Sarah, Annie, Emma, Alyssa, and Gracie all love me, Gracie (“Live Life To The Fullest”), Rich (“Just Because You Have Cancer Doesn’t Mean Your Life is Over! It Isn’t”). Nick, Gerwell, Liam, David, Andrew Delzitt, Annie Mariette, Gavin Ward, Phillip, Jacob Robertson, Matthew, Caroline Malone, Luke, Phillip W., Jackie, Jess Harper, Henry, age 8, “Have Hope, Keep The Faith.” Ruthie writes about Annie:

1. I like chicken.
2. I like unicorns.
3. Me and my friends like to trick people into thinking I have an older brother that will bring us sparrows from his job at the
Wildlife Preserve Center.
4. Ruth is a butt.
5. I am obsessed with everything
6. I have a collection of books called “My Friends.”
7. I was born in Neverland. (This is fascinating because my daughter, Sarah, is producing the new Peter Pan movie, “pan,” all about Neverland, and I am wearing a Neverland hat from the movie to keep my hairless head warm!)
8. My thoughts are stars I cannot fathom into constellations.
9. You Are So Inspiring.
10. You Are So Kewl.

Ruth: “I don’t know Much about You, but I know enough that you don’t deserve what happened to you . . . We love you even though you’re a stranger. (Is that creepy?) Oh, Well.”

And, from Marley Profitt, this quote identified only as Unknown. “While I find your religion hateful, closed minded and utterly ridiculous, I am still praying for you.”

Huh?

Then there were embarrassing embraces from old friends, including filmmaker Kevin Keating: “Danny, Screening the ‘Surveillance’ pieces with you that you’ve produced despite the catastrophic health development, was a graphic reminder of your constant determination and the skills you somehow marshal to realize the ideas and discoveries you pursue for all to learn and benefit from. You display commitment and a passion for sharing your knowledge to make social change that is, and always has been worthy of respect and admiration. I will do as I can to assist you as you face the challenges coming at you. I have deep respect and affection for you, comrade, and the work we have done over the many years is cherished, thank you.”
Singer Pia Raug writes from Copenhagen: “Please, for once in your adult life, concentrate on yourself to help your good doctors heal you as best they can. Do not run away from private feelings. Use this time to remember – and maybe even find – the young boy, the man Danny, you left behind at some point. An old philosopher friend of mine once asked a very thought-provoking question at a medical conference: “Yes – but what if cancer deep down is grief on cell level?” If there was some kind of truth in his wondering, then we might have a tool to assist your doctors helping you.”

And finally, for now, Abbas writes from Iran: “Your cancer was very bad news. I hope and I pray, God (Allah) would soon give you health.”

**NOVEMBER 11: BACK ON THE HILL**

It’s Veterans’ Day and, as a veteran of a prolonged health scare at Columbia on 168th Street over bubbles in my urine, I was back to see Dr. Gregory Mears who has just been named “Physician of the Year.” That’s a big deal at an elite hospital, at any hospital.

This was a once-postponed six-month checkup that now has a new focus – cancer. Dr. Mears is a blood man or hematologist and heard my latest sad story. Jessica was along to explore if there was some connection between then and now – and Meers was approving of the chemo regimen I am now under. That was comforting. A real second opinion!

He also had some suggestions about diet – more vegetables, less rice, etc., more of a Mediterranean diet, and advised me to do more physical training. He thinks I can still lose more weight.

While most of his concerns were medical, he was very disapproving of my unimpressive sweat suit and overall look. I had not dressed to impress. He kept repeating that I needed to shave
off my chemo-ravaged facial stubble.

Yes, Sir, Dr. Mears! The next day I did so!

For a full report on the Mears session, here are Jessica’s more complete notes:

Danny’s appt with Dr. Mears (hematologist) went well today. Dr. Mears was very encouraging and felt Danny was on the right path in regards to treatment of his metastatic pancreatic disease.

Danny has been under Dr. Mears’ care since early 2014 following a diagnosis of Monoclonal Gammopathy of Undetermined Significance (MGUS). MGUS is not cancer, but Danny will need to continue under the care of Dr. Mears (about every 6 months) because a small percentage of MGUS patients will progress to develop myeloma (most commonly), amyloidosis, lymphoma, or chronic lymphocytic leukemia. Dr. Mears’ office obtained blood today and will evaluate for progression of disease, but at this time, Danny remains asymptomatic from an MGUS standpoint. If blood work obtained today reveals minimal evidence of disease (as was the case six months ago), treatment will not be indicated. We should expect results in about a week and I will notify the team with any changes to this current treatment plan. After review of preliminary lab values, Dr. Mears does not expect that Danny’s MGUS has progressed to any of the above mentioned.

In regards to Danny’s diet, Dr. Mears suggested the following:

- Avoid simple carbohydrates (i.e., white rice, pasta, breads, free sugars), and stick with whole grains
- Mediterranean diet suggested (fish, chicken) and avoid red meats

GLWD has a nutritionist and we will relay this information to her regarding Danny’s meal deliveries. Continual participation in a daily exercise regimen is highly encouraged and I will work
with his PT on developing a daily exercise routine that he can follow on his own going forward.

Additionally, we can consider adding fish oil supplements to Danny’s medication regimen. I will work with Danny’s PCP on this.

Overall, Danny looked great today and is feeling well. Please do not hesitate to contact me with any questions or concerns.

Regards, Jessica

POLITICS OF HEALTH CARE

I had a bit of a telephone go around with United Healthcare, my Medicare Complete “provider.” They called me with an “offer” to send a doctor over on a home visit to see how I am doing after I was in the hospital. The ostensible purpose was to see how “my” company can serve me better. It was a free benefit and I was jumping for it until I started thinking about it. Why do they need to do their own examination of me when they have access to all my medical records? This has to be a cost containment or research effort aimed at helping them, not me. I asked can they give me examples of how these visits help their customers and they really couldn’t. It started sounding like more corporate surveillance, not a needed service. They are supposed to call me back. This time a nurse was with me who said I didn’t need it. Later I learn that most money invested in the last election came from healthcare companies that backed Republicans with the hope of “reforming” the health care reform that they supported as a way of getting more customers and chopping regulations they don’t like. They were funding all the GOP attacks on Obamacare.

The only documents I found online were non-partisan donations from 2012. The Center for Responsive Politics reported:
Physicians and other health professionals are traditionally the largest source of federal campaign contributions in this sector, which contributed a record $260.4 million to federal candidates during the 2012 election cycle. Aside from doctors’ associations, pharmaceutical companies and HMOs are consistently generous givers. *Certain industries within the sector, such as nurses, give more generously to Democrats, but on the whole Republicans traditionally have gained the most from contributions by health interests.*

This report on Newser was stranger than fiction:

**Dead People have Donated $586K to Politicians and Some People Want Those Donations to be Unlimited**

Last week, someone noticed that a super PAC loyal to Mitch McConnell had gotten a $100,000 contribution from GOP mega-donor Bob Perry on June 3, which seemed odd given that Perry died back on April 13. The PAC later said there had been a clerical error. . . .”

Hmm . . . .

**NOVEMBER 15: THE STREETS ARE CLOGGED**

My daughter Sarah is in from the coast assembling furniture from Ikea that she ordered for me. She wants me to stop living like I was in a college dorm, circa 1962. I have to admit her taste is good. Some other good news in the home improvement department: I have a new DVD player and a turntable to play my old albums as well as a second TV armed with Netflix.

Slowly I move into the 21st Century.

Also visiting, is the Vietnamese American filmmaker Tiana,
whose new movie, “The General and Me,” currently in post in Krakow, Poland; Hanoi, Vietnam; and LA, is about her friendship with the legendary North Vietnamese General Vo Nguyen Giap, with whom she engaged in many conversations for over two decades.

He’s the military man who deserves credit for defeating the US and France. A hero there, he is still feared and reviled by some in the Vietnamese overseas community.

More visitors are making a pilgrimage to what they think is – and could be – a temple of the dying. I am told by one friend that everything happens for a reason, and that the cancer is a sign that my life has changed – ultimately, for the better, as if it is a life test. Perhaps, that’s a variant on the old saying, “whatever doesn’t kill you makes you stronger.”

So far, I am NDY – Not Dead Yet.

NOVEMBER 18: LOOKING FOR LOVE!

Today was a full dose day. Saw Doctor Ocean, who was pretty positive for the first time putting the fall in my cancer marker in context. Mine went to under 550 from over 700. She added one more fact – that most of the markers she sees are in the thousands. Fingers crossed.

Tried to see my friend Adelaide Gomer who is at the hospital for a hip replacement, but she was having a bad day and asked me to come another time. June did come over and we found Café Raqueta, a great lunch place with Spanish food. Viva los plantaines.

I couldn’t help but flirt with my astoundingly beautiful nurse, Janna. She humored me. I asked her if she was an ageist. After I explained what that is, she said she had been, but not now. Was that an opening? She is in her twenties. I am not.
She grew up in Boston – Dorchester to be exact, and so we had some reference points in common. She’s sassy, playful, outspoken, super-competent, and oversees the IV that delivers the toxic chemicals that could kill me as fast as the cancer they will hopefully nuke. She knows her job even as she makes it look simple. She showed me how to take my chemo pump off. All business, with some humorous shtick thrown in, even though being in her presence pumps me up!

The fact that she stirs my libido at a time when I barely have one may be the only “vital sign” that is really meaningful, although my health aide, Saunie, herself a Jamaican beauty, says she won’t get in the middle of my fantasy. She was amused, and may think I was being a jerk.

I guess it’s Janna’s youth that mesmerizes me, and the fact that here I am, a case of arrested development, who rarely thinks of himself as old. Now, I am trapped in an infusion center with chemo dribbling through my veins into my heart and points South, in which my own age, 72 (a young 72, I insist) is more and more evident, given my hairless head and drying up skin.

She says that being bald is the new cool, and most men she sees have no hair. How’s that for the cultural zeitgeist?

I wonder how I can get to “know her better” when, the truth is, I can’t. We may be of different ages, races, and generations but the ultimate divide is I am the patient and she is the nurse, a distinction that, in this age and place, makes for a real difference. That kind of fraternization is, I assume, against all the rules. Period.

The fact that, with my life on the line, I am still acting like an adolescent must mean that I still have women on my mind. I insist that’s because I like women; some say that I am a misogynist. Trust me, I am not. If you don’t trust me, that request won’t
have any impact on your cynical soul. So, yes, I am again looking for love in all the wrong places. The truth is I am alone and lonely, and I am also a big bad failure at the senior love game.

I don’t feel good about myself, especially now that people see me as someone to be pitied. My doctor asked if I was taking the mild anti-depression drug she prescribed. No, I said, should I? She nodded, as if she could see through my up-beat bluster. But why shouldn’t I be depressed? Besides my uncertain condition, our generation and movements for change seem still-born, a lot of talk, little action. The government is in the hands of the Right, including the White House. No wonder so many have tuned out and turned off as even the ratings of the tepid MSNBC – what passes for “liberal news” – is down the rat hole. Never mind that the planet is imploding, climate change is threatening, wars are worsening, the political stalemate deepens at home, and soon the crazies will have even more power.

At this moment, my voice is largely still although I will have an article coming out in the Cairo Review of International Affairs. That’s Cairo, Egypt. So much for my impact here. As for South Africa and the freedom movement I gave so much to, that’s rapidly going downhill, too.

That’s why I have moved back from the political to the personal. Most men are still attracted to women even if, in this age, that seems to be increasing passé and as dreadful rapes dominate the news. I plead not guilty to that charge of hostility to women as the father of a daughter, ex-husband to two wives, one for five years, the other for fourteen, and someone who admittedly has had a history of, shall I say, mixed feelings about monogamy. I can swear I was always sincere, probably naïve, even if I did hurt the people I cared about. That’s a contradiction I never resolved. I was never macho, in fact, probably too
submissive. I fear rejection,

Flirting during chemo, in a hospital on a constant death-watch may be a no-no. Am I incorrigible? Am I being punished for my past excesses and peccadillos? Am I being punished for too many affairs and too little time spent building friendships and relationships?

Like the doctors that surround me, I try to do no harm.

My dad had warned me, “Daniel, keep your pecker in your pants. Don’t let it invade your brain.” I did not always live up to that advice and my sexual preoccupations led to a many momentary pleasures but, in the end, caused a lot of misery.

I grew up in the era of drugs, sex, and rock and roll. We experimented with communal living. Many of us lived out our fantasies, others messed up their lives. We wanted it all and, often, ended up with far less.

Living on the edge of what may be the last stage of life, I have to take responsibility for my misjudgments, wasted time, and character flaws, even as I do have many friends of the other gender whom I care deeply about. My support network is women-led, as are my health care workers. I am friendly with my ex-wives and many former girlfriends, despite our often bitter divorces and break-ups. Maybe it goes back to my Mom, who was an original feminist and inspiration in the women’s poetry movement. I cared deeply for her and was a mommy’s boy but also resented her at times. I was never a jock and gravitated to student politics and journalism. The civil rights movement became my teacher.

I hope I don’t sound as pathetic as I sometimes feel. I try not to be too hard on myself. I live more like a monk these days than a misanthrope. I am a flop at dating of every kind. I talk big but, as they say, I write checks that my ass can’t cash.
I soon began to get tired and crawled into bed, back in a loft complete with a newly installed state of the art toilet with a double button: one for pee, the other for poo. My downstairs neighbor, Lionel, gave me his plunger as a gift, for self-protection.

I am all dressed up with nowhere to go.

MORE ON OUR HOSPITALS: TIM WU IN THE NEW YORKER

The sinkhole effect – which is not confined to airlines – means that we need to take a much closer look at mega-mergers in the essential industries whose services are hard to avoid and which have a disproportionate effect on quality of life. Looking at examples from other industries, like hospitals, can be even more alarming. During the early aughts, the Federal Trade Commission analyzed several completed hospital mergers. Those studies revealed two unmistakable results: 1) an increase in prices explainable only by a reduction in competition, and 2) the same or worse outcomes, as measured by indicators that included patient mortality. Other studies have largely confirmed the results. Higher prices and more dead patients; it doesn’t really get worse than that.

NOVEMBER 19: LETTER FROM ANNIE

Annie is twelve, and was one of the kids who wrote to me as part of a class effort to “Kick Cancer in the Butt.” Now, she writes again with a Knoxville postal imprint (Knoxville was one of the civil rights venues I visited in 1961, and where I met Ewell Reagen, a Unitarian Minister who later came to Cornell. His church was also the scene of a shooting by racist fanatics who confused Unitarianism with communism.)

To Danny Schechter (You have a cool last name)

I wrote you another letter because I heard you were writing a
book!! I am so excited. I am working on a book that I am going to try to publish, I can’t wait until your book comes out. I want to be an author when I grow up, and this means a lot, I heard there was going to be a chapter with us in it! That’s cool, even though I am already famous. Just kidding, People at School don’t know why I am their queen anyway . . . We Love Yew.

How snarky these kids are. I am going to send her one of my books. They are having a big Christmas parade in Louisville, TN, population 2100.

**NOVEMBER 20: MOVIE TIME**

I spent part of the day next door at the Bow Tie Chelsea Cinema that is hosting the NY Documentary Festival. Saw two films – one is Rory’s Kennedy’s outrageously one-sided and deeply flawed account of the day the Americans and some of their Vietnamese employees fled Saigon. Very disappointed – and surprised by all the hype it has received despite its obviously revisionist, ideological, and pro-war point of view. In 1976, my account of these same events was called *The Fall of Washington*.

Later I returned to see Laura Poitras’s Snowden saga, *Citizen Four*. Intriguing, but did not add much to the story other than offering some fascinating exchanges between the whistleblower and the journalists who brought his findings to the world. It let us see what we hadn’t before, and how encryption works.

On the positive side, this was the day that the couch Sarah bought for me was delivered. Looks great! On the problematic side, I am feeling a new pain. Don’t know what it is.

Paul Jay of *The Real News Network* and Fatima Sesay of *Sahara Reporters* visited.
NOVEMBER 21: AFFECTIONATE MEMORIES

Kevin Keating comes back with Tommy Walker, the soundman on our Mandela tour film in 1990, and who was with me when I pitched the film to HBO, and was asked by the head of documentaries if Mandela spoke English. He wanted to strangle her. Kevin’s comment now:

“Visiting with you yesterday with Tommy alongside seemed less dramatic, warmer, felt less edgy than my first time with you last week, and despite the reminder/presence of the strange drip-object machine on your chest, you seemed physically more sure and more at ease, the yellow “Neverland” logo on your black knit cap less odd, the tone was filled with affection and lovely and amusing re-emergences of tales of our long mutual friendships, sharing our Mandela memories, you bringing forward your unique descriptive powers to render your observations, moments of your experiencing deep history with South Africa and the history of perpetual struggle you have participated in and documented for all. I’m confident that we can repeat and extend the positive experience, set up a visit schedule that is comfortable for you, and Tommy and I both can be available to hang out, or pass by with things you may need. Sarah’s recent presence, illustrated from the new comfy IKEA furniture circle, your contagious pride as you speak of her is reassuring. Please give her contact information, and perhaps during her next visit we can join together.”

Other visitors: Filmmaker Bernie Stone, music executive Danny Goldberg.

NOVEMBER 22: WHAT?

My doctor told me today that my cancer marker went from 540 to 7! Normal is 0 to 40. Is this possible? She said she never saw
this happen and has to do a new test because it could be a FALSE POSITIVE. I have never been called NORMAL! Don’t spread this around!

WORRIES AND FEARS: DAILY HEALTH POST

- chemotherapy drugs directly damage DNA
- chemotherapy boosts cancer growth
- 68% increase in chemo drugs since 2003
- 75% increase in cancer projected by 2030

JESSICA’S UPDATE

Danny is doing remarkably well from a clinical and social standpoint; his cancer markers are trending down remarkably and he is feeling strong and stable. He is developing close relationships with his caregivers and remains busy overseeing the home improvements that are being implemented in his beautiful Chelsea loft. Danny is seen routinely in his home by VNSNY for his nursing and physical therapy needs. His home care nurse, Dawning, reveals that his blood pressure is well-controlled on Lisinopril 5 mg daily and she also reports his perirectal lesion is also improving, with no signs of infection. Additionally, I spoke with Danny’s Internist, Dr. Dechiario, last evening and further adjustments were made to Danny’s medication regimen secondary to improvement in his cholesterol levels. Crestor was decreased to 10 mg daily in lieu of 40 mg daily. Please see the updated medication list that reflects these changes.

I also had the opportunity to speak with Dr. Ocean today; she is very pleased with Danny’s response to chemo thus far. She will be ordering surveillance scans following Danny’s sixth chemo infusion (rather than his fourth infusion, which was just this week) due to his clinical presentation and evidence of decreased cancer markers. Dr. Ocean is coordinating molecular testing with
Foundation Medicine and she will provide an update on where we stand with this at his next evaluation, which is scheduled for Wednesday, December 3 (see chemo calendar attached). Arrangements will need to be made with GLWD for meal delivery for Wednesday, December 3, as Danny will not be home to accept the food delivery. We are still waiting on results from Dr. Mears’ evaluation, but it is very likely that Danny remains stable from a hematological standpoint. I will forward on any pertinent findings following review of his report.


**NOVEMBER 23: RESTLESS**

The anniversary of JFK’s assassination has come and gone. Even as there may be promising news on my front, I had a very restless night, up every few hours, worrying about every pain. I thought the cancer had infiltrated my brain. I have to get my will together and stop dawdling. Worrying.

**NOVEMBER 24: THANKS FOR YOUR SUPPORT**

I looked at my phone and discovered that tomorrow is Thanksgiving. (But then, later, I was told that Thanksgiving is always on a Thursday even if it is not on the 25th. I should have known that.) This year I am so thankful to so many that have supported me to this point. There are too many to thank. I would be lost without them. You and I know who you are. I give thanks, time and again.

The year is speeding by. Still have a pain of undermined location, but I slept interrupted only by a noisy rain. Everything seems so quiet as the country cooks for tomorrow. Fascinating
how rituals and holidays define us still. It feels like summer outside although snow is predicted in a few days.

Sue Rabkin, once a member of the ANC’s Umkhonto armed struggle, now an employee of the South African government, emails a greeting: “Gosh. I don’t know anyone who has done as well as you on chemo. What a plus! I’m sure it’s a rough ride, but then life is a rough ride with unexpected twists and turns, so you are well prepared. Saw your film on Kennedy on ETV yesterday so you are in our thoughts. Talking of twists and turns – I am going into hospital next week for a knee replacement. It’s going to be two weeks of agony and six weeks on crutches, but then, God willing, I will be back to normal. Six months of pain in my knee has led me to this. So we can send each other good vibes from one hospital to the other.”

Marion Barry, the former mayor of Washington, DC, died at 78. I first met him as the Chairman of SNCC, the Student Non-Violent Coordinating Committee. He went from the Movement into Politics into drugs and Jail and, then, back into politics. Sam Smith wrote this in 2006:

Marion Barry and I split back in the 1980s. I can’t remember the exact issue, but it was one time too many that Marion had promised one thing and then done another.

I first met Marion in 1966. We were both in our 20s and he was looking for a white guy who would handle the press. He had just organized the largest local protest movement in the city’s history, a bus boycott, and I had participated and written about it. The typical twenty-something doesn’t get over 100,000 people to stop doing something for a day. I gladly took on the assignment.

We hit it off and remained allies even after the day Stokely Carmichael walked into SNCC headquarters and said that we
whites were no longer welcome in the civil rights movement. Barry would later describe me as one of the first whites who would have anything to do with him. I backed him when he ran for school board and in his first two mayoral bids. And in those days, I have to say, he got pretty good press.

But even by the time of the second run for mayor, I was feeling queasy. A couple of friends and I held a fundraiser for Marion but our wives would have nothing to do with it. I introduced him by listing the reasons why people might be ambivalent about Barry and then added, “On the other hand…” Marion pointedly wiped his brow.

I was already becoming aware of Marion’s addiction to that most dangerous, if legal, drug called power. Later, I would be listening to a talk show discussing a book about cocaine in the executive suite and suddenly realize how similar the two addictions were and how I could no longer tell which was affecting Barry more . . . .

FERGUSON, MO: TODAY’S THE DAY

The Grand Jury decides whether or not to indict the policeman who killed Michael Brown. Activists are on alert. Everyone knows they will let him off, and they did! What impact will more protests have? They show us the gap and the pain.

NOVEMBER 25: NOW THE REACTION

The progressive news is dominated by reactions to Ferguson. I wasn’t up to going to Union Square to protest. Marc Kusnetz dropped by on his way from the hospital where he is taking a new medication for his lung issues. And then, Bob Coen came by. He worked with me on South Africa Now. These days, he makes investigative documentaries and has taken up the Japanese art
of Reikki. He is now a practitioner and gave me a very comfort-
ing session to Asian Music. It is non-invasive and involves lay-
ing on the hands. It was very relaxing. Later I re-signed up with
Fresh Direct to have food delivered. It started to get colder in the
afternoon. Tomorrow, it will snow. Another season gets under-
way. My two ex-wives are reaching out. I guess I wasn’t totally the
bad guy.

HISTORY LESSON – FROM ABOUT HEALTH

Origin of the Word “Cancer”
The word cancer came from the father of medicine, Hippocrates,
a Greek physician. Hippocrates used the Greek words, carcinos
and carcinoma to describe tumors, thus calling cancer “karki-
nos.” The Greek terms actually were words to describe a crab,
which Hippocrates thought a tumor resembled. Although Hippo-
crates may have named “Cancer,” he was certainly not the first to
discover the disease. The history of cancer actually begins much
earlier.

The First Documented Case of Cancer
The world’s oldest documented case of cancer hails from ancient
Egypt, in 1500 B.C. The details were recorded on a papyrus, docu-
menting 8 cases of tumors occurring on the breast. It was treated
by cauterization, a method to destroy tissue with a hot instru-
ment called “the fire drill.” It was also recorded that there was no
treatment for the disease, only palliative treatment.

There is evidence that the ancient Egyptians were able to tell
the difference between malignant and benign tumors. Accord-
ing to inscriptions, surface tumors were surgically removed in a
similar manner as they are removed today. In ancient Egypt, it
was believed cancer was caused by the Gods.
HEALTH Q&A: WHO DISCOVERED PANCREATIC CANCER?

In 1869 Paul Langerhans discovered the Islets of the pancreas where Insulin was made. The first successful removal of a peri-ampullary cancer was carried out by William Halsted in 1898 and this involved local excision. ChaCha at ya!!! Source: http://www.chacha.com/question/who-discovered-pancreatic-cancer

NOVEMBER 26: HARD-BOILED EGGS

More pain last night. Snow expected on what started as a rainy day as temperature dropped from the fifties to the thirties, Frank on Floor 6 writes: “Did anyone have workers or service people in the building yesterday? I went outside to the stairs for my workout last night and noticed that someone had a little picnic of hardboiled eggs, salt and pepper right outside my door and about two inches away from a garbage container. I’m quite disturbed by the lack of respect, breach of security, and sheer laziness (had they simply thrown the garbage in the garbage, I would have never known about it!). It’s still up there if anyone is curious and can swipe for fingerprints and DNA (I saw on CSI that they can put back together an eggshell and dust for prints).”

I discovered that my storage room had been unlocked. Since I couldn’t find the key, I tried to close it. Whoops, now it is locked again and, as I don’t have the key, I realise this little carelessness will require a pricey locksmith to undo. Can’t blame this on the cancer.

ANOTHER BILL: THIS ONE FROM NYU LANGONE

In October, as I reported, I spent a few days fighting diarrhea and being rehydrated at NYU Langone. (Got there late on a Sun-
day, and left early Thurs.) I spent the time in bed and mostly on a commode. The bill finally came in on November 18, almost a month later. NYU charged United Health Care $43,396.02 with $13,692.00 for one bed in a two-bed room. They charged me $4,500 for the Emergency Room that I spent no time in, and $471 for X-rays they insisted I take, and that was never explained to me, and for drugs: $11,664.12.

They want me to pay $750.

**NOVEMBER 27: GIVING THANKS**

It’s been 68 days since the diagnosis and discovery of cancer’s invasion into my pancreas and wherever else. It’s thrown my life for a loop, what with medical tests, chemo treatments, and realizing that my body has taken over from my mind. What it does or doesn’t do, how it responds or not to the toxic infusions I have been getting will tell the story.

I do what little I can by trying to stay positive, eat well, sleep, and rest and hope for the best. I am not always able to do that, given my worrying nature, but so far so good. I have lost a lot of weight – as well as my hair – and appear strong to most people despite the latest pains that hurt and scare me.

It’s Thanksgiving Day, and I will be going to a dinner later. I give thanks to so many people who have expressed concern for me, checked in on me, and actively help me cope.

Today, the traditional Thanksgiving dinner includes turkey, stuffing, mashed potatoes, candied yams, cranberry sauce, and pumpkin pie. But if one were to create a historically accurate feast, consisting of only those foods that historians are certain were served at the so-called “first Thanksgiving,” there would be slimmer pickings. “Wildfowl was there. Corn, in grain form for bread or for porridge, was there. Venison was there,” says
Culinary (honest, that’s what she is) Kathleen Wall. “These are absolutes.”

Two primary sources – the only surviving documents that reference the meal – confirm that these staples were part of the harvest celebration shared by the Pilgrims and Wampanoag at Plymouth Colony in 1621.

**NOVEMBER 29: BILL FROM BILL**

My brother Bill is here and went shopping for all the things I needed and then passed the bill on to me. I am just kibitzing with him, but I did need lamps and all the stuff he bought. We also talked about the new will I need to create and how to divide up what I have and may soon lose.

From Tanzania, life moves on, Daniel Nyalusi writes: “Hi mate, How are you doing? It has been a long time mate. Hope you are doing great. I have a son now, his name is Derek. Hope to see you soon in January.”

Then, again, after I told him my news: “I just came back from Uganda today where I had a masterclass in documentary filmmaking. This is a shock news to me but God will keep you strong and you will fight it. I’m so sorry my friend about this, I will come see you early January and let’s all fight it.”

“Is your daughter there with you? Or who is there with you? Wish I can be around there to help you with small errands. I wish you a quick recovery my good friend.”

Steve called from Pakistan: “How are you?” I am sure the NSA recorded that one.”

From Firoozeh in Tehran, Iran: “I have been digging hard to find a thread of my bottom line of existence to throw a rope for you because that is the only worthwhile source of being I have! There was only nothingness until my love managed to fo-
cus this morning from the heights of the line of horizon of the Alborz mountain range across my window on the 13th floor at Tehran: here and now . . . But that belongs to all of us upon the earth. You have been springing out of it pouring out your specific happiness for us to share with you. I have been always imbibing every bit of your out-sourcing acts in life.

“\[I\] hope you would catch the hang on the loop, to reverse the cyclic pattern: to love yourself sufficiently, by the power of awareness; to forgive all faults & mistakes and allow the fluidity of life power to wash away all the malware in your body. Thereafter, just smile to myself challenging diseases and getting well by myself you would make the journey within by your own multi-layered self-awareness! And just slide back into your perfect form of healthy-nests!”

From Marta Steele, author/writer/editor, in Washington, DC: “Bravo! Keep shoveling it in! What’s the news on the chemo side effects? Appetite is a sign of health!”

From Indonesia: “My friend said about the foods that are good for health, called Herbalife Research in America. I’ll try it, you too. Let’s try . . . ”

Aziz Pahad, former Deputy Minister of Foreign Affairs of South Africa, inscribed his new book to me: “Dear Danny, greetings from Durban. Thanks for initial critical comments. I hope the book has overcome some of its earlier weaknesses and will make some contribution to the mobilisation of the new generation.”

From Frank, Upstairs: “Was just thinking about you. Hope all is well. We should visit sometime soon; will be in town next week.”

Raymond McGovern, Former CIA Analyst who served seven Presidents and nine CIA Directors: “Hi from someone who is lucky to be allowed out pending trial (on Dec. 8). I was very sad to hear of your illness, Danny. Chemo saved me from the lym-
phoma; chemo seems to work well on tough kids from the Bronx. I’m now free of the Big C. My wife Rita’s and my thoughts are with you particularly these days. Was just talking to Cat. Told her I would like nothing better than to be able to stop by and see you after my trial . . . assuming they don’t send me up the River! Perhaps for a while on afternoon of the 8th? Hope you are reasonably comfortable . . . and hopeful.”

I wrote him back and thought, in light of his becoming more religious, he might help me with the man upstairs!

His response: “We have no direct line, as GWB professed to have, to ‘the almighty,’ but know of some folks who may be close . . . like Dorothy Day and other folks who cared about the poor . . . like Yahweh and Jesus and Mohammed did/do. Dorothy should be enough; we’ll get her working on it.“

Eric Tait Jr, with whom I worked at 20/20: “Saying prayers to Ancestors/Gods etc. for your overcoming/prevailing . . . positive outlook very crucial.”

VIEWING PLEASURE?
Watching TV/HBO for “entertainment.” What do we see?

**Wit (TV MOVIE) 2001:** A renowned professor is forced to reassess her life when she is diagnosed with terminal ovarian cancer.

**Director:** Mike Nichols

**Writers:** Margaret Edson (play), Emma Thompson (teleplay)

Starring Emma Thompson.

Based on the Margaret Edson play, Vivian Bearing is a literal, hardnosed English professor who has been diagnosed with terminal ovarian cancer. During the story, she reflects on her reactions to the cycle the cancer takes, the treatments, and significant events in her life. The people that watch over her are Jason
Posner, who only finds faith in being a doctor; Susie Monahan, a nurse with a human side who is the only one in the hospital that cares for Vivian’s condition; and Dr. Kelekian, the head doctor who just wants results no matter what they are.

I am sure it was aired in memory of Director Mike Nichols who just died.
DECEMBER 2014
WHAT MONTH WAS MY JESUS BORN?

DECEMBER 1: MONTH 4 BEGINS
FOUGHT A PULSING NECK PAIN ON THE LEFT SIDE ALL NIGHT. The pain meds did not subdue it. Worried the cancer is heading north. My friend Nenad Bach’s son, Ivo, a new doctor, says there is a spot in the neck known for being a lymph node or something. This is not just painful, but scary. Heading to the hospital to see someone else. Will try to see Dr. Ocean. Dr. O did not feel or find anything alarming but will order a CT scan of the pain in my neck which I hope will show that I am just a pain in her neck. (I later had a CT Scan on the neck. They found sinosis, a form of arthritis, no cancer. I must be freaking out.)

Cancer News in the News
McClatchy Newspapers 12/1
The emerging popularity of low-premium, high-deductible health insurance plans that hold patients responsible for a greater share of their medical care costs is exacting a financial and administrative toll on small physician practices and ambulatory surgical centers.

The CEO of a Pittsburgh company that handles billing for local
independent physicians says one of her client practices has seen its outstanding accounts receivable double in the last four years, a trend directly tied to patients who can’t pay their deductible at the time they receive care.

“Many of my clients are just resigned to it, that it’s just another layer of management that is not welcome,” said Donna Kell of the Kell Group billing services that works with local physician practices. “But it’s slowing their ability for paying themselves. Their take-home pay is going down.”

High-deductible plans are proliferating as employer-based plans look to lower or contain their annual health-care costs. The benefits consulting firm Mercer recently said its annual employer survey showed that nearly half of larger employers now offer a high-deductible plan. Meanwhile, enrollment in those plans has jumped from 18 percent to 23 percent in the past year, with individual deductibles in some plans averaging $2,500.

While consumers are moving to the high-deductible plans, “very rarely do patients understand deductibles, and co-pays and co-insurance,” said Ashley Santoro, practice manager for Cardiovascular Disease Specialists of Pittsburgh, a three-physician group. “If we bill an insurer, we would be reimbursed in seven to 10 days. If a patient gets a bill for $600, you’re lucky if you can get paid $25 a month.

How Tommy Chong Beat Cancer with Homegrown Cannabis Medicine

By Alex Pietrowski, Staff, Waking Times, December 2, 2014

As the movement for the liberation of cannabis gains momentum, and attitudes toward this relaxing and healing plant evolve, we are witnessing an explosion in innovation around how cannabis is used, both as a medicine and for recreational purposes.
DeCEMBER 2014

Finally overcoming its reputation as a mind-bending, psychoactive drug that makes you stoned, lazy and useless, cannabis is being celebrated for its healing benefits.

Pioneers in the field of medical marijuana are discovering that much of the medicinal value of cannabis is packed away in its non-psychoactive cannabinoids. The Cannabis plant contains over 60 cannabinoids, which are carbon-containing terpenophenic compounds concentrated in the viscous resin of the glandular trichomes on the cannabis plant bud. There are psychoactive cannabinoids, such as Delta-9-Tetrahydrocannabinol (THC), while others, such as cannabidiol (CBD), have no psychoactive effects while offering profound healing properties.

Due to the Schedule I criminal status of the cannabis plant, for many decades it has been difficult for marijuana researchers to understand the relationship between the therapeutic benefits of the cannabis plant and its psychoactive effects. Yet, today, you don’t have to “get high” to benefit from the healing power of cannabis, because, over the last decade many CBD-rich strains are being grown for and by medicinal marijuana users.

The CBD compound in cannabis can actually counter the psychoactive effects of THC.

Knowledge about the therapeutic potential of cannabis products has been greatly improved by a large number of clinical trials in recent years. . . . There is now clear evidence that cannabinoids are useful for the treatment of various medical conditions.” ~ Investigators from the nova-Institute and the Hannover Medical School in Germany.

Although most medical establishments and professionals would not dare to admit it, many people believe that cannabis, particularly organic CBD oil, can be used to treat, and perhaps even heal, cancer.
Additionally, hundreds of research studies have shown that cannabis-based medications, such as medical marijuana, cannabis oil and marijuana edibles, can be used to relieve symptoms of chronic pain, muscle spasms, nausea and vomiting as a result of chemotherapy, loss of appetite in HIV/AIDS, Gilles de la Tourette syndrome, multiple sclerosis and neuropathic pain (nerve pain).

CBDs hold the most promise for the use of cannabis in the treatment of serious medical conditions. CBDs have been tested in the treatment of cancer cells and are found to significantly inhibit cancer cell growth. They also assist in the uptake of other cancer drugs, increasing their effectiveness.”

In a high-profile case of the healing power of CBD’s, famous actor, comedian, and marijuana advocate Tommy Chong shocked his fans in 2011 when he announced that he had been diagnosed with prostate cancer. As a challenge to the world at that time, he stated his determination to cure his cancer with medical cannabis and began a journey to do just that. By changing his diet and consuming, CBD rich cannabis oil Tommy beat cancer, which he announced in 2013.

In a recent interview in 2014, Tommy talked in greater detail about how he came to the decision to try hemp oil, and how the process worked for him. Remarkably, he mentions that he had his CBD oil made from plants that he legally grew on his own rooftop, bred to have a high CBD count.

While non-psychoactive CBD-rich hemp oil is gaining in renown as a natural medicine, Tommy Chong believes that the high-potency sedative and calming effects of the oil, the psychoactive component, is also a very beneficial part of the healing process. He talks about the nature and benefits of cannabis and why so many of the major cancer treatment centers are ignoring
the evidence that cannabis is an effective treatment.

While much of this is certainly good news for the public and for those in search of healing from cannabis, the US federal law (as well as law in many countries) continues to categorize cannabis as a Schedule I drug.

Numerous medical research studies and real life examples of the plant's healing power continue to surface, yet politics has been slow and bureaucratic in responding, likely swayed by heavy lobbying dollars of the pharmaceutical industry, to the quickly evolving landscape of new discoveries when it comes to natural plant medicines.

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DECEMBER 5: CHEMO SESSIONS

I had seen Dr. Ocean on Monday to call her attention to a few-days-old pain in my neck that I feared might be related to cancer traveling toward my head. A doctor, a son of a friend, told me there is lymph node there on the left side that is known to attract cancer. Dr. Ocean felt around the area but felt nothing. She did order a CT scan for my neck next Monday at 10:10 in the morning but did not sound too concerned.

She also ordered a blood sample to check on the marker and told me I will get a full body scan after the sixth session in two weeks. Will it be a Bad News Bear or will it be a Chanukah or
Christmas gift? I had no adverse reaction to this session as of 7 p.m. but did have an unrelated outbreak of diarrhea on Monday and Tuesday. So far, not today.

After the uneventful session run by with the usual aplomb by Nurse #1, Janna – pronounced YANNA – observed by June and Millie, I left with a recharged chemo pump that is now pumping away. I then went to a local imaging joint to have my leg looked at. Dr. Ocean was alarmed when my right ankle seemed swollen, and explained that a blood clot is a possible chemo side effect. The technician went up and down my leg, and hooray, no clot.

I left the house at 9 and got back at 4:30. $40 co-pay, and $39 in cab fares. I saw fellow pancreat Ann Glauber and met her sensational social worker daughter. Ann has been fighting since last June and is organizing a media campaign to elevate the visibility of pancreatic cancer.

Meanwhile at NY Presbyterian across the street, LBN reports:

**RIP:** Herman Badillo, America’s first Puerto Rican-born congressman and a fixture in New York City politics for four decades who championed civil rights, jobs, housing and education reforms, died on Wednesday in Manhattan. He was 85. His death, at New York-Presbyterian/Weill Cornell hospital, was caused by complications of congestive heart failure, his son David said.

**MEMORY**

*Massachusetts Daily Obituaries:*

*Massachusetts Obituaries 12/05/08*

SCHECHTER, Jerry Of Brookline, formerly of the Bronx and Croton-on-Hudson, NY, December 2, 2008, at 90, of illness. Husband
of the late poet Ruth Lisa Schechter. Father of Danny Schechter, Bill Schechter, and of Denzil McKenzie. Grandfather of Sarah, Ethan, and Jamie Schechter. Father-in-law of Sandy Shea. Brother of the late George Schechter and brother-in-law of Dana Schechter. Uncle of Marc and David Schechter. Devoted friend of Loris Altman. Master of Toughie, Auric, and Truly. Graduate of DeWitt Clinton HS. in the Bronx, Garment Worker, Union activist, Workmen’s Circle member, Amalgamated “Cooperator,” veteran, and sculptor. Survived the Great Depression and WWII. He saw it all, told it the way it was, and lived a life that pointed the way to “A Besserer Velt” – a better, more just world. He was our “working class hero.” He met his responsibilities to his family, to his community, and to humanity. He was a friend to all, except those who took advantage of others. No flowers. Please make contributions to the National Yiddish Book Center, YIVO Institute for Jewish Research, or the US Holocaust Museum. Memorial gathering to be announced. Private burial at Mt. Auburn.

STAIRWAY TO HEAVEN

I have been getting love bombed. First, a surprise call from Charles Laquidara, the heart and soul of WBCN Radio when I worked there in the 70’s, and now living in retirement exile on Maui in Hawaii. Charles was our rock ‘n’ roll station’s star morning man, with a mass following and progressive political instincts. One of his unforgettable moments was a comment he made after the station ran a commercial for Honeywell Cameras, a store in Harvard Square. He said to rush right over there to buy a product from a company napalming babies in Vietnam, a reference to the corporation.

What a No-No! The store sued the station claiming that Charles was blaming them for Vietnam atrocities. The case ac-
tually went to trial in the courtroom where Sacco and Vanzetti were sentenced to death for a hold-up, but mostly for their anarchist politics. With the help of one of Boston’s top lawyers, he ran a “truth defense” about Honeywell and was acquitted.

Anyway, there he was on the phone. The rock ‘n’ roll he blasted for years blew out his eardrums and he now wears hearing aids. We chatted about the old days and how I became the News Director and then News Dissector at the station. He was so warm and caring for someone always known for a quick one liner. That conversation made my day.

And then today, Friday, two cards, each with sentimental and supportive language arrived. One was from Linda McKenzie, soon to be ex-wife of my Jamaican brother and lawyer Denzel, who urged me to see the “beauty of the simple gifts surrounding you, that you taste what thoroughly delights you, and that you continue to speak for those that are not heard.”

Michael Smith, my one-time Associate Producer at ABC 20/20, whom I haven’t heard from in ages, ran into Nenad Bach in Westchester and sent me a card advising, “My thoughts and prayers are with you. Without sounding solicitous, superficial or saccharine, you have been one of the strongest influences in my life. I have such respect for who you are and all that you have accomplished and continue to do so.” OMG, Michael was hardly a political activist but I am glad that I touched him in some way.

DECEMBER 7: WHERE ALL THIS BEGAN

**CLG: Obama gets CT scan, fiber optic test for sore throat caused by acid reflux, officials say 6 Dec 2014**

President Obama received medical treatment Saturday for a persistent sore throat that his doctor said is being caused by acid reflux. The president was treated in the morning by an ear, nose
and throat specialist from Fort Belvoir Medical Center, under the supervision of his physician, Dr. Ronny Jackson. He said the specialist conducted a fiber optic exam, based on the president’s sore throat symptoms over the past couple weeks and that the results showed soft-tissue swelling in the back of the throat. It is unclear where the exam was conducted because Obama did not officially leave the White House until 2 p.m. for a second exam.

Jeff Cohen, founder of FAIR and Professor of Journalism at Ithaca College, writes: “... best wishes and vibes. You have meant a lot to me and my path over the decades.”

DECEMBER 8: UNTIL IT TAKES ROOT

“Hi Danny, Wanted to say hello. Hope you’re continuing to make good progress. These have been interesting weeks. Terrible things happening but at the same time some amazing things as well. The marches have been quite thrilling. May be the beginning of a whole movement rebirth. Has the feel of early Occupy – hope it lasts until it really takes root.” –Stephanie.

Airline Chairman’s Daughter Goes Nuts In Plane

It’s never easy being a flight attendant, but some passengers are tougher than others. On Friday, the daughter of Korean Air’s CEO ordered a plane that was about to take off back to the gate to remove one of the flight attendants. Why? The crew member had the nerve to serve the special first-class passenger macadamia nuts in a paper bag instead of a dish. (WorldCrunch)

DECEMBER 8: JESSICA’S REPORT

Attached you will find the dates and times of your next two chemo appts scheduled for Wednesday, December 17th and Tues-
day, December 30th. Please note that you will have to contact GLWD to schedule an alternate food delivery for Wednesday, December 17th.

Dr. Ocean obtained blood work recently that indicated that your tumor markers are decreasing, which is a very good sign. In addition to blood markers, following your upcoming sixth round of chemo on December 17th, Dr. Ocean will be ordering some scans to access the appearance of the pancreatic mass and surrounding tissue. Based on review of these scans, Dr. Ocean will either decide that you will be staying the course (continuing you on your current chemotherapy regimen) or she may decide that another treatment is better suited for you going forward. We will discuss this in greater detail when this time comes.

In the meantime, due to some swelling of your lower extremity, Dr. Ocean ordered an ultrasound of your legs to rule out blood clots, which was unremarkable. Therefore, the swelling is likely secondary to a condition known as peripheral edema. This occurs when tiny blood vessels in the legs leak fluid into the surrounding tissues. This excess fluid causes the tissues in the leg to swell. Please be sure to elevate your legs when sitting or lying down to reduce this swelling.

Additionally, you had some neck pain so Dr. Ocean ordered a CT scan to get a better understanding of your symptoms. You are obtaining the CT scan today and we will discuss the findings when the results are available for review.

Danny, your brother indicated that you seem to be more tired than usual. As we all know, chemotherapy can cause symptoms of fatigue and lethargy. I will discuss this with you in more detail over the phone, but this is an important point to bring up with Dr. Ocean as well.
DECEMBER 11: THE PARADE

The days are shorter, the nights longer, the weather a mix of rain with some snow. I have been burrowing in my apartment, and probably not resting enough or drinking enough water. A routine has settled in with an endless parade of visitors and dinner guests. I am not complaining. It gives me a chance for conversation and banter even as I feel any influence I may have had about the world is in the past. The many decorations on my walls remind me of my glory days.

In the last week, I reconnected with my old pals Hila and Gerry Feil, Greg Palast and Leni, Bebe, an international lawyer from the Congo, while my pal Cat brought former CIA analyst Ray McGovern, a fellow refugee from the Bronx, and disaffected former State Department Iraq operative Peter Van Buren.

At the same time, I am trying to inventory my memorabilia and many boxes in hope that Cornell Library will find some of the endless stuff I have collected over the years of interest.

I hope to follow in the footsteps of my neighbor and close friend Bill Adler, who writes: “National Public Radio ran a swell little report last night about the Adler hip-hop archive’s moving from my basement to Cornell University. It was produced by the great Jon Kalish: Cornell to Digitize A Rich Hip-Hop Archive http://www.npr.org/blogs/therecord/2014/12/10/369841627/cornell-to-digitize-a-rich-hip-hop-archive

I am trapped by my history. I found a picture of my interviewing Vietnam’s Paris Peace talk negotiator Le Duc Tho in Hanoi in 1974, which is now up on the wall. Will anyone be interested in it? I just wrote a piece for Telesur on the Ghosts of Vietnam.

At the same time, I am addicted to watching HBO’s Newsroom about an industry I worked in. It is so well done but will soon be over as is much of the news business. The show seems to be
anticipating the news and the trends against news and analysis on the air. It is entertainment, yet feels like a documentary.

My brother is down today from Boston, the advance man for the whole family including wife Sandy and sons, my nephews, Ethan and Jamie and significant others and daughter Sarah.

Don’t think we ever had a family event like this before. Among other things, we will decide on future renovations in my loft.

Also, last night, another reality sandwich was shown – a documentary on the great late writer, Susan Sontag, who lived down the block from me on 23rd Street and whom I interviewed, a sequence that appears in the film about her involvement with Sarajevo. She beat cancer twice, but the third time a transplant operation failed and so did she. The cancer sequences were very well done, but ultimately a battle lost.

Strange that I happened to chance upon it.

FLASHBACK: NEW YORK TIMES, JANUARY 30, 1978:

Susan Sontag Found Crisis of Cancer Added a Fierce Intensity to Life

She didn’t even have a doctor – “I’d always been in excellent health,” she shrugs – and Susan Sontag made the appointment for herself as an afterthought while arranging a checkup for her son. Fortuitous timing, as it turned out: Not only did she have breast cancer, “but they said I’d have been dead in six months if I hadn’t caught it.”

That was two years ago. In the meantime, Susan Sontag has, among other things, had a mastectomy and various follow-up operations; written another book (the provocative “On Photography,” which was published by Farrar, Straus & Giroux and last week won the National Book Critics Circle Award for criticism); undergone chemotherapy, started her third novel, and re-evalu-
ated her whole life.

Being Susan Sontag, a name regularly coupled with the description “the intellectual” (if not “the essayist,” “the filmmaker,” or “the novelist”), she has also put her critical mind to work on the matter at hand, and come up with a thoughtful treatise called “Illness as Metaphor.”

The work, which started out as a lecture and is now being converted into another book, deals with the cultural and literary associations that have long surrounded such potent diseases as cancer and tuberculosis. Her own first responses, Miss Sontag admits, were on a more visceral level: “Panic. Animal terror. I found myself doing very primitive sorts of things, like sleeping with the light on the first couple of months. I was afraid of the dark. You really do feel as though you’re looking into that black hole.”

These days Miss Sontag, who turned 45 last week, neither looks nor sounds like a woman in the grip of terror. Tall, rangy, and handsome, her coal-black hair streaked dramatically with silver, she exudes energy and warmth. Nonetheless, she makes a point of openness about her illness, “because it can be helpful to other people, and because it’s very important to break the taboo. People are very reluctant to deal with the thought of death; they see it as some shameful secret, and to many people cancer equals death. I thought that, too. And I had to rethink everything – what I thought, what I wanted to do.”

From an essay by her son, David Rieff: “Of course, I was out of my depth. We all are, I think, since nothing really prepares you for the mortal illness of a loved one. Talking about it, thinking about it, abstractly trying to conceive of it, even dealing with it with people who are less close to you – none of those things seems in the end to be central to what you have to do.”
I am having some more trouble sleeping. Trying not to worry, a challenge that seems to haunt all the Jews all the time. Oy!

**MEDICAL NEWS TODAY**

A synthetic derivative of vitamin D was found by Salk Institute researchers to collapse the barrier of cells shielding pancreatic tumors, making this seemingly impenetrable cancer much more susceptible to therapeutic drugs.

The discovery has led to human trials for pancreatic cancer, even in advance of its publication in the journal Cell. By attacking a wound repair mechanism called fibrosis, the findings may also have implications for other tough-to-treat tumors, such as lung, kidney and liver cancer.

“While the success of this drug in humans with pancreatic cancer is still unclear, the findings in animal studies were strong, raising hope that ongoing clinical trials will give people with this terrible disease hope for a truly new type of therapy,” says Ronald Evans, director of Salk’s Gene Expression Laboratory and senior author of the new paper.

**MEDICAL SECRETS/CONSPIRACY YESTERDAY**

I do keep getting these dispatches. This one is from *Natural News*:

Thirty-one years ago, a man wrote a book exposing the politics involved in cancer therapy. It painted a picture of a world in which an effective control for cancer existed but was outlawed because it couldn't line the pockets of the powerful pharmaceutical industry. In 31 years, little has changed.

G. Edward Griffin’s 1974 book *World without Cancer* is as poignant today as the day it was written, and in some circles,
just as controversial. That’s because Griffin tells the story of a powerful substance that, despite its potential to aid in the fight against cancer, few cancer sufferers will ever know about, and that their doctors certainly will not offer them. That substance is vitamin B-17, also called Laetrile, and it is a naturally-occurring substance that has been banned for use in the control of cancer in the United States.

Learn more: http://www.naturalnews.com/012923_cancer_treatments_world_without.html#ixzz3LghpoQx8

DECEMBER 13: NO WORD

Still no word from Dr. O. about my last Chemo. Should I be worried? Her office says she’s busy. A Christmas rush?

Family here for the weekend bringing gifts: Sarah brought Roku, a device that imports Netflix etc., and Bill and Sandy a coffee machine. What more do I need? Entertainment and caffeine.

DECEMBER 15: LAST EPISODE

Saw the last episode of Newsroom last night. It kept a window of hope open for TV news as MacKenzie McHale becomes network president.

Leonard Cohen:

Ring the bells that still can ring
Forget your perfect offering
There is a crack in everything
That’s how the light gets in.”

Pia writes again from Denmark: “Dear Danny, I had a visit from you in my dream last night. You breezed in for a conference in the morning and had to leave again already at 11 PM the same
night. You invited me to go with you to a “get-together” after the conference (this time, it seemed, I was not to be a stowaway); But everybody wanted to meet you and talk to you, so we were far apart in the big room. I mingled and talked to a few strangers until I saw you sitting alone and quite miserable in a corner (finally let alone from people who wanted a piece of you!). I fought my way through the crowd to get to you – and alas – the very minute I sat down to talk with you and share a hug – I woke up. So we did not get the chance to share – but it felt good to see you. Thanks. Hope you are coping reasonably – and do not feel too abandoned. Does your system agree with the chemo?”

**IN MY NEWS**

My visiting Nurse Dornie came to see me today. Vital signs are fine and my leg, which has swollen, is not too bad. She is very thorough, but also plays by the rules lest she be accused of Medicare Fraud, which she defines as being too nice to her patients. She says she will have to drop me because I seem to be leveling off with no big problems or wounds. I am “stabilized.” My vital signs are consistently good and I seem strong.

Others are more in need. Their case load is growing. They have no time for lunch. My nurse cut me loose despite our political affinities. Goodbye Visiting Nurse Service! They may, however, be available again if and when my condition worsens.

**Also visiting:** Mike Locker and wife Stephanie, political friends since the 1960s, and Steve Berger. Steve is borrowing my car.

Last night, I was up at three, thinking about a friend’s daughter, about Sarah’s age. She is, believe it or not, the Deputy Director of the CIA. I woke up at 3 thinking of her, thinking she must resign after all these torture revelations. I started composing a letter in my mind and then worked it into something more po-
etic. I sent a copy to Ray McGovern who worked there for years and to her dad. Not sure if I will get her email or if he will forward it on. (He didn’t. Read on)

Love On The Dark Side

“... the CIA will be getting a real gem. Having served at CIA (and as NSC Legal Adviser), I can attest that CIA does not adjust easily to outsiders. But I think Avril will be different and that CIA officials will quickly come to love and respect her. Although this move is usual, Avril will be a good pick for CIA.”

Lawfare: Switcheroo: Avril Haines Nominated to be Deputy Director of the CIA by John Bellinger

Wednesday, June 12, 2013 at 4:29 p.m.
An Appeal from a Neighbor and One-Time Admirer
Danny Schechter, News Dissector

Oh, Deputy Director, My Deputy Director
Your fearful run is done.

It’s time, Avril, to step down from the house of secrets and stress positions, to bid the CIA adieu before I post a sign on the High Line that demands, Avril Haines, RESIGN!

You were a child of the West Side, I think we met. I know your dad and his causes. It may have been when you ran that cool bookstore in Baltimore, in those years as a patron of the humanities
before you became a servant of inhumanity,
a slave to the despicable John Brennan
who, as every Indian knows,
speaks with forked tongue.

Oh Avril, is this your destiny?
Legal beagle to the Torture squad?
Everyone likes you because you stay in the background
Politely muttering yes sir and no,
Silently cranking out documents in the early hours of the morn-
ing to rationalize
the unrationalizable,
to become the new John Yoo.

You are a lawyer and presumably know about international
human rights law which means you can’t be a whore
Deputy Director, how did you allow yourself to become
such a subservient tool of power?

“Just following orders?”
Haven’t we heard that before?

Don’t you know you too will be judged?
just as the world now judges what your agency did and is doing
to hide rectal truths no one want to face.

Courage, girl: Step down while you can
Disassociate yourself, my queen,
from the lying machine
if only to command Respect,
your own and ours.
Get ahead of the game, Ms Haines,
show remorse.,
Deputy Director,
Be a moral force
Or face
a lifetime of consequences

OUTCOME
Did not have a good reaction to this effort from the family. Tom Haines, the dad, was defensive but also alarmed and fears a conflict with his daughter. He was panicking when he spoke to me so I dropped it, in part because I really can’t become combative these days. I have to remain positive for my own health and recovery, or so I think. I would like to see her quit. I don’t think she will. But, guess what, a few days later, it was reported that Av, as she is known, was transferred from the CIA to the White House to work under NSC Director Susan Rice. I guess my concerns were in the air.

NIGHT OUT
My old friend Evelyn Leopold, veteran Reuters reporter and UN Correspondent, invited met to the annual dinner of the UN Correspondents Association at a fancy dining hall on 42nd Street. It was black tie but I wore a black suit. I wasn’t the only one. The women were in gowns. These are the reporters from all over the world and the Secretary General Ban Ki Moon was on hand joking with the crowd and taking a few barbs, all in good humor.

Richard Roth of CNN was back with funny videos and a pot full of jokes, some of which fell flat because so many were watching their phones, not the stage. Boccelli sang, but I had to leave before Sting took the stage. It is a very clubby event and I saw old friends
and some enemies. I won one of their awards years ago. It felt good going out but I realized that I really don’t have the strength to party into the night, There was a tension between that sense of the UN’s importance and the realization that it lacks the power to solve problems and often cocks things up.

**CHEMO SIX**

The good news relayed to me first by Vicki and then Dr. Ocean is that my cancer “marker” in my blood has dropped from over 800 to 200, actually 217. That seems to be a cause for celebration, but I am holding back on my partying because cancer markers are considered “the Poor Man’s CT Scan” and can be unreliable and bounce around. Just to confirm all this, they have now scheduled a proper CT scan for me on the day after Christmas, maybe to signal the resurrection, December 27 at 9 a.m. Sorry, Macy’s, I will be late for the annual post Xmas sale.

Private Health’s Jessica Zambelli emailed this breaking news bulletin to our network, on December 19:

**Dear All,**

Danny remains stable from a medical and social standpoint; he has now completed cycle #6 of his current chemotherapy regimen under the direction of Dr. Allyson Ocean. Danny’s cancer marker (CA 19-9) is down to 217, previous upwards of 800. Recent CT scan of his neck obtained secondary to complaints of left-sided neck pain (which has resolved) was unremarkable. Danny is scheduled for his routine surveillance scans on December 26, 2014. Following review of these scans, Dr. Ocean will determine if Danny will continue on his current treatment course which seems likely based on his clinical picture.

Danny remains strong and upbeat, keeping busy entertaining
his supportive family and many friends from around the world.

Please do not hesitate to reach out to me with any questions or concerns.

Happy Holidays, Jessica

So, it’s down, down and away – I hope. I did twist my ankle dancing for my nephews, but with a few nights of elevation, I am back in action.

Visitors continue to stream in, I am enjoying watching Idris Elba, with whom I worked on the Mandela movie, in his BBC series *Luther* via Netflix. I have some new movies to watch and even did a Skype Interview with RT on Putin’s three-hour press conference that I didn’t watch but, of course, have opinions on.

Today, I fired off a response to an inquiry from Telesur in Latin America on the great Sony hack attack. I wonder when Hollywood will make a movie on that!

Here’s what I wrote. I haven’t seen this view in many places:

President Obama has now spoken, condemning Sony pictures for withdrawing its *Interview* movie without talking to him. “I wish they had spoken to me first,” he said without referencing published reports that indicated representatives of the State Department has told the studio they approved of its message.

Since when do entertainment companies have to clear their decisions with the White House?

Everyone is talking about Sony, but few about the movie chains that unbooked the controversial film that dramatizes the assassination of a foreign leader. I wonder how the President would have felt if any of his psychotic domestic enemies had envisioned his own murder on film to supplement their hot streaming and hate-filled political rhetoric? It’s ironic, but all of us grew up in a
culture where shouting “fire!” in a crowded theater was considered an illegitimate exercise of Free Speech.

Blowing up the head of the leader of a super-paranoid nation (which had, no one recalls, lost a million people in a war of aggression launched by a South Korean dictator who colluded with the Imperial Japanese invaders and the US military in a war which has yet to be officially ended) is to them a threatening act, not adolescent humor. (Already that scene has been leaked and picked up by The Hill, the newspaper that covers Congress. What a thrill. Hahaha!)

Recall that this is not the first movie putdown of North Korea. James Bond was there first. So was Angelina Jolie, and then Vice News rolled in with its mockumentary.

Provocateurs of the world, unite! There is no garbage we cannot dump.

So far, the “proof” of Pyongyang’s role is still as cloudy as the evidence that Russia shot down that Malaysian plane because there has been no legitimate public inquiry. The hysterical US media might learn something by practicing Chairman Mao’s famous dictum, “no investigation, no right to speak.”

A LIST
Cinematic hostility to North Korea is not an original idea. Here’s a list from Wikipedia on Kim bashing over the years:

DOCUMENTARIES
Defilada (1988)
Decades Apart: North Korea (2000). A 24-minute documentary (ABC Australia / Journeyman Pictures) about family reunifica-
tions of North and South Koreans in North Korea.

**Discovery Times: Children of the Secret State** (2000)
Welcome to North Korea, original title: Noord-Korea (2001) is a 50-minute Dutch documentary directed by Raymond Feddema and Peter Tetteroo. The film won the 2001 International Emmy award for Best Documentary.


**The Game of Their Lives** (2002)

**Frontline/World: Suspicious Minds** (2003)


**Secret Nation** (2003)

**Nuclear Nightmare: Understanding North Korea** (2003). A 45-minute Discovery Channel documentary which has been criticized for its superficiality.


**A State of Mind** (2004)

**North Korea: A Day in the Life** (2004)
North Korea: The Border and the War (2004)
Return to the Border (2005)
Dear Pyongyang (2005)
60 Minutes: The Hermit Kingdom (2006)
Crossing the Line (VMS /Koryo Tours 2006)
Friends of Kim (2006). A 71-minute documentary about a group of members of the Korean Friendship Association, who travel to North Korea to demonstrate their support for the North Korean regime.
Nordkorea: Einblicke in ein verschlossenes Land, which translates to North Korea: Insights into a Secretive Country (2006). A 43-minute German documentary about a changing society. The film covers i.a. the following topics: the Kimchi harvest, energy shortages, the North Korean preschool system, the North Korean famine, English lessons in North Korean schools, private farm markets and restaurants, demand-driven shoe production, a Buddhist temple, a bowling alley, and the International Friendship Exhibition.
Kims Reich: Unterwegs in Nordkorea, which translates to Kim’s Kingdom: Travelling in North Korea (2006). A 27-minute
German documentary about a Swiss tourist group. The film covers the Arirang Festival, a visit to a Buddhist temple, the demilitarized zone, and the mountains of Kuwŏlsan and Myohyang-san.

**National Geographic: Inside North Korea (2007)**

**Undercover in North Korea (2007)**

**An American in North Korea (2007)**

**North Korea: Hell on Earth**

**National Geographic: Don’t Tell My Mother I’m In . . .** (Episode on North Korea)

**North Korea: A Legacy of Tension (2007)**

**The Vice Guide to North Korea (2007)**

**Kimjongilia (2008)**

**Vítejte v KLDR!** (English title: Welcome to the DPRK!) (2008) is a 71-minute Czech documentary about a Czech tourist group traveling to North Korea.

**Seven Days In North Korea (2008)** is a documentary by David Pluth focusing on North Korea’s history, present, and culture.

**Yodok Stories (2008)**

**Themepark 1984 (2009)**

**Kim Jong Il's Comedy Club (2009)**

**Unreported World: China/North Korea: The Great Escape (2009).** North Koreans flee the border north to China.

**This World: Escaping North Korea (2010).** North Koreans risk everything to reach South Korea.

**North Korean Film Madness (2010),** about the North Korean film industry.

**Departures (2010)**

**The Red Chapel (2010).** A Danish documentary about a fictional theatre group who want to perform in North Korea. The same footage was used in the 4-part documentary Det Røde Kapel (2006) and Kim Jong Il's Comedy Club (2009).

Wide Angle: Crossing Heaven’s Border (PBS)


Camp 14: Total Control Zone (2012). Director Marc Wiese’s portrait of inhumanity chronicles the story of Shin Dong-hyuk, who was born in a North Korean prison camp but escaped at age 23.

DPRK: The Land of Whispers (2013)

Aim High In Creation! (2013)


The Defector: Escape from North Korea, a 2013 Canadian documentary

Frontline: Secret State of North Korea (2014)

10 Days in North Korea (2014)

DRAMA OR FICTION

The Bridges at Toko-Ri (1954)

Target Zero (1955)

Jet Attack (1958)

The Manchurian Candidate (1962 film) (1962)

MASH (1970)

Pulgasari (1985)

The Rescue (1988)

Provocateur (1998)
Shiri (1999)
Joint Security Area (2000)
Die Another Day (2002)
Silmido (2003)
Spy Girl (2004)
Stealth (2005)
Welcome to Dongmakgol (2005) (does not explicitly indicate whether it is set in North Korea)
Behind Enemy Lines II: Axis of Evil (2006)
Comrades in Dreams (2006)
Crossing (2008) Film
71: Into the Fire (2010)
Salt (2010)
Secret Reunion (2010)
Dance Town (2011)
Poongsan (Pungsangae) (2011)
Winter Butterfly (2011)
Red Dawn (2012)
Comrade Kim Goes Flying (2012)
Meet in Pyongyang (2012)
Olympus Has Fallen (2013)
The Berlin File (2013)
The Interview (2014)
Diplomats (2015)
THE INNER SELF
On a more personal note, the “stability” that Jessica speaks of was punctuated last night when I broke down in a friend’s company with fears, tears, and unrealized hopes. I guess I had to get it out of my system, and I was, in her view, too hard on myself.

Look how fucked up the world is, although the change in our Cuba policy only took half a century but seems to be happening, that is, until the Repugs take over and work to sabotage it.

Finian Cunningham speaks some truth about that:

Purple prose aside, the hard detail is that the ongoing illegal American embargo on Cuba will stay in place. Moreover, the move comes as Washington slaps on more sanctions against Russia and unleashes new sanctions on Venezuela.

End of the Cold War? Well, possibly, if we are thinking in a narrow way about historic US-Soviet relations. But in terms of ongoing American hegemonic attitude towards other nations, the Cold War has never stopped and will never stop as long as America sees itself as entitled to dictate to others in order to advance its political and economic interests.

DECEMBER 20: COINCIDENTAL RESIGNATION?
The Washington Post is reporting this morning that the Deputy Director of the CIA, Avril Haines, who I was calling on to step down earlier in the week because of the torture scandal, suddenly and abruptly left the agency to become Deputy Director to National Security Advisor Susan Rice.

I couldn’t help thinking that perhaps my email to her, sent to her dad, was intercepted and that she quit the CIA to pre-empt her own role in the scandal from becoming public. Is it possible? Or just a coincidence?
I will never know.

Later in the day, her dad dropped by to tell me more about his daughter’s ascent from an internship at the State Department to the center of the intelligence apparatus and a trusted apparatchik for Barack Obama, who used her frequently to help resolve intergovernmental conflicts. She is 45.

Before his visit, I was visited by my friend Christine Doudna, once a well-known journalist and member of the New York Media Forum that I was part of in the 1980s.

Her husband Rick, whom I first met when he worked for Salomon Brothers in 1987, was with her. He later went into the film finance business and seems very familiar with my daughter’s role in the movie biz.

Unfortunately, we last visited Rick back then on the day the market crashed, and watched him watch the rapid decline of stock prices from a monitor on his desk while shouts of misery came up from the trading floor. We had hoped to get some help in financing our company, Globalvision, then an emerging start-up. It was not to be.

As he watched his firm’s fortune slowly decline, he spoke to us about the importance of “closing” financial transactions, telling us an apocryphal story of one of his colleagues who was mesmerized by a woman whom he took to a Broadway show, seats on the aisle. When the play ended, he escorted her to the Rainbow Room at Rockefeller Center and, after that, to a late night jazz loft. He couldn’t do enough or spend enough to impress her. He then suggested going out for an early breakfast. At that point, now in the early hours of the morning, she turned to him and asked simply, “Will we have any time to fuck?”

It was a lesson in the importance of sealing a deal, a lesson we needed to learn but never did.
DECEMBER 21: WHAT ELSE SHOULD I BE DOING?

I feel like I have become very passive, guided by my chemo schedule but not taking enough of my own initiatives. But, what to do? Many friends are making suggestions, offering advice and contacts, but so far, I have been hesitant to improvise on my medical regimen. Am I scared? I keep thinking I must be doing more. But, what?

Some of the suggestions:

1. Juicing daily, even a vegan diet. Yes? No?
2. Reach out to an acupuncturist? My Falun Dafa friend Gail recommends New York’s Dr. Li as a Chinese miracle worker.
3. Explore what the Mayo Clinic is offering in its new Pancreatic Cancer program,
4. Contact Dr Shoshang: The cancer doctor profiled on 60 Minutes?
5. Wrote to Dr. Maharaj in Florida for more info on his clinical trial?

I don’t know what makes sense. In a few days, they will do a scan and have better information on how and if the chemo is shrinking the tumor. I guess it’s best to wait.

DECEMBER 23: A SCAN FOR CHRISTMAS

Friends drop by. Ian Escuela, my partner on Mediachannel, made a surprise visit, along with Bill Lichtenstein, who was my intern at WBCN back in the early 70’s, then a colleague at 20/20 and now the director of a massive archival project and film on WBCN and the glory days in Boston. We had lunch with singer Stephen Said, who reprised his heartbreaking experience in hav-
ing his daughter kidnapped by his ex-wife, taken to France, and kept outside the net of legal recovery.

Sarah has been here and we have had some good conversations about her years here and experiences now as a movie producer. How impressive she is, and how amazingly successful, all through her own efforts.

And how proud I am. She is my greatest production.

Still feeling some pangs of pain as if the cancer feels compelled to remind me it is still there. Everyone seems so positive but I am not sure what punch it still packs. I have been warned not to underestimate its lethality.

**OTHER NEWS OF THE DAY**

Heard from Jesse Jackson’s daughter. He is going to reach out to the Mayo Clinic to find out what they are doing on the pancreatic front. I have checked it out online, and it seems like a research effort, not trials of any kind. One disturbing fact in their presentation – only 6% of those afflicted survive. Not good!

- From review in *New York Review of Books*: “More than 40 percent of oncologists admit to offering treatments they believe are unlikely to work.” – Atul Gawande, author of *Being Mortal: Medicine and What Matters in the End*.

- Comedian Dying: “My short bio: I am a 28 year old comedian dying of cancer. I have been on MTV, Sirius XM Radio, toured North America doing stand up and lived one hell of a life. I started a web series called The Funny Thing About Cancer to help inspire people to have more fun with life. @hahahaddon on Twitter - Josh Haddon. http://youtu.be/vdfJgny-DP8?t=1m34s

**DECEMBER 24: BLAST FROM THE PAST**

Last night, I had a visit from former 20/20 and Nightline corre-
spondent Dave Marash, a journalist I admire. He is in New York for a few days, and we had our own salon about our days at the network. Bill Lichtenstein added some stories and then I went over to Marc Kusnetz’s house for a delayed dinner – delayed until his wife Leslie came home to cook it! (smile) – where the discussion continued. Dave had worked with Marc at CBS radio before both got into TV. Dave is now doing a radio show and acting as News Director at a Santa Fe, New Mexico, community radio station where I was once interviewed.

Turns out Dave’s wife Amy has a blog, Cancer is So Funny about her successful fight against colon cancer. Illustrated. Funny. Check it out: http://cancerissofunny.blogspot.com

Hamid Reza writes from Tehran: “We did not know anything about the cancer, and we, all Press TV staff, pray to God you will win the fight.”

DECEMBER 25: CHRISTMAS 2014

Visited by the Chinese filmmaker Joanne Cheng, just in from Beijing. Lunch with Lionel and Joyce. In the middle of the day, my health aide, Eren, heard that one of her 93-year-old patients, Mr. Harold Kaplan, died. I encouraged her to visit the family asap, and she did. Today is the day of the birth of a celebrated “savior,” but life and death go on.

XMAS MEMO FROM OUR PHYSICIAN’S ASSISTANT

Team Schechter, I just wanted to say THANK YOU for the incredibly generous gift. I don’t know what to say other than it is my pleasure working with you all. I am blown away by the support, love, and attention that you all provide to Danny in his most vulnerable hour and I am privileged to work with each and
every one of you. Danny, you make me smile big – thank you for brightening my days. I will be in touch with an update on Danny soon – tomorrow are his surveillance scans. Vicki will be accompanying him to his appt with Dr. Ocean on December 31st when he will get the results.

Merry Christmas, team!

Jessica L. Zambelli, MPA-C
Director, Clinical Services
Private Health Management

DECEMBER 26: SCAN DAY

I was at the appointed place at the appointed time, early actually, for my big scan. It took an hour to drink the liquid they gave me in a big bottle. And, then, almost an hour to wait for a CT room to be free. They injected the contrast into my arm and then rolled me in and out of the big imaging machine.

Wham, Bam!

Now, I wait until Wednesday for a meeting with Dr. Ocean and the verdict on progress, if any. As I walked down the long hall to the CT scan machine room, I flashed on being a convict taking his last walk from the prison into the gas chamber. That image took me over for about a second before I returned to my perennial mode of positivity. Now all I have to do is wait. Two lawyers visited tonight: Jamie Prince and Bibi. I am loved. Maybe.

I spent part of the day packing away more of my files and memorabilia. Had a letter today from Robert Cox, curator UMASS-Amherst Library: “Danny, It’s great to hear from you and I hope you’re doing as well as can be under the circumstances. When the time is right for you, I’d love to talk – phone or visit or whatever you prefer. We are a great fit up here, I think, and there are so many intersections between your career and our folks. I’m
amazed at all you’ve managed to do from NSM to underground news to media to the African connections (wish we had more, though, on the ANC), and let me tell you, the word “packrat” is guaranteed to make an archivist melt. All things considered, I can certainly try to come up with some funds for you if it would help. Cornell may well be able to come up with more, but I will do my best. Looking forward to talking when convenient and wishing you the best til then.”

DECEMBER 27: WATCHING HOUSE OF CARDS

Tonight, a subplot involves a former Congressman dying of pancreatic cancer. I can’t escape this affliction. It’s on my TV, not just in my body. Call it death-tainment!

One scene involves physical sex as Congressman Frank Underwood’s (Kevin Spacey) wife Clare (Robin Wright) reaches under the suffering patient’s covers to offer her friend some physical relief. Why doesn’t that happen to me?

DECEMBER 28: DAY OUT

I decide to go out, take a friend for a ride. No health aide today. I walk to the parking lot, got my car, and find I can still drive. I learned when I was 17. We go to one of my favorite destinations, the Cloisters in Ft Tryon Park in Washington Heights. It now costs $25 to enter the museum, so we don’t, but instead go to the nearby restaurant in the park that I learn is closing that very day for renovations for four months. Whew, just in time.

Had a great time, very Christmassy, even drank half a beer. Suddenly I felt normal for the first time in months. I played goo-goo with a fifteen-month-old at the next table, thought of Sarah.

But then, as if in the command of ritual, I drove to the Bronx,
to my old neighborhood, the Amalgamated Cooperative houses on Van Cortlandt Park South. I said I wanted to show her where I grew up, but the pull was more psychological, I guess, like a bird back to the nest, thinking of my folks and grandfolks who lived there, as if it was a sanctuary of history and calm. I didn’t stop.

Just drove through as if following some need. Some want to be buried at Wounded Knee; I guess I will take the enclave that I grew up in and shaped my values. For the second time this year, I drove through the historic Woodlawn Cemetery with its Victorian mausoleums and historic obelisks where the one percent of an earlier era honored themselves, and their patrimony.

Maybe I have death on my mind. From their website:

Thousands of visitors come to Woodlawn Cemetery each year to see the monuments and mausoleums designed by the nation’s most accomplished architects, landscape designers, and sculptors. Individuals, families, and groups walk our grounds searching for the final resting places of many historic figures including artists and writers, civic leaders, entrepreneurs, great entertainers, and jazz musicians.

Among the residents in this city of the dead:

**Cullen, Countee** (1903-1946): Raised in Harlem by the Reverend Frederick Ashbury Cullen, Countee became a poet whose writings gained renown during the Harlem Renaissance. His works were published in literary magazines including The Crisis and Opportunity.

**Melville, Herman** (1819-1891) One of America’s greatest writers, Melville is best known as the author of the novel Moby Dick.

**Nast, Thomas** (1840-1902): Nast was a cartoonist and illustrator who created what is typically considered the classic image of
Santa Claus for Harper’s magazine in 1863. He was well known for his political cartoons and was responsible for the creation of the Republican elephant and Democrat donkey mascots.

I also said hello and goodbye again to many jazz greats who dug this piece of land in the Bronx. This band of the departed includes:

**Davis, Miles** (1926-1991): An innovator in hard bop and fusion, Davis came to New York to study at the Juilliard School of Music. In 1959, he released the studio album *Kind Of Blue*, one of the greatest jazz recordings of all time.

**Ellington, Duke** (1899-1974): Often considered “America’s greatest composer,” Ellington received the Presidential Medal of Freedom in 1969. His career spanned more than fifty years and included illustrious compositions such as “Satin Doll,” “Mood Indigo,” and “Solitude.”

**Hampton, Lionel** (1908-2002): The “King of the Vibes” was a composer, bandleader, and great philanthropist. His recording *Flying Home* is considered one of the most influential in American musical history.

**Handy, William Christopher “W.C.”** (1873-1958): The “Father of the Blues” was born in Florence, Alabama, and rose to fame when his songs were published and played across America. His signature song, “St. Louis Blues,” is inscribed on his grave. He is also known for writing “Beale Street Blues” and “Memphis Blues.”

**Hawkins, Coleman** (1904-1969)
Credited as the jazz pioneer that turned a comic tenor saxophone into a romantic horn, Hawkins played with the Fletcher Henderson orchestra when he first came to New York. The Missouri
native is best remembered for his classic 1939 recording “Body and Soul.”


Jacquet created an entirely new style and sound for the tenor saxophone in the early 1940’s, elevating the instrument to a colorful and pre-eminent role in the world of jazz music. In 1942, at the age of nineteen, Jacquet was catapulted to immediate international fame with his classic solo on the very first recording of his career, “Flying Home.”

**Jackson, Milt** (1923-1999)

Jackson was one of the co-founders of the famous Modern Jazz Quartet, whose popularity he attributed to “an uncanny ability to take classical music and improvise on it, integrating it with jazz and pop.”

**McLean, Jackie** (1932-2006)

Born in New York, alto saxophone player McLean started out at a young age with many of the jazz greats including Miles Davis, Sonny Rollins, and Art Blakey. He was recognized as a Jazz Master by the National Endowment of the Arts and was the founder of the Jackie McLean Institute of Jazz at the University of Hartford.

**DECEMBER 29: THE YEAR IN CANCER**

Five-year-old Spider-Man fan Jayden Wilson loses fight with cancer (Comic Book Resources): Jayden Wilson, the terminally ill boy who became an Internet sensation last month when his father dressed as Spider-Man to surprise him.

British grandfather celebrates beating three types of cancer in a year with trek to South Pole Telegraph.co.uk

8-year-old boy battling cancer joins Bloomfield College basketball team (NJ.com)
UK: Dec 2, 2014 – 46% of men and 54% of women cancer patients diagnosed in 2010-2011 in England and Wales are predicted to survive 10 or more years: Patients won’t get vital pancreatic cancer drug that can extend life on the NHS (Daily Mail): The first breakthrough drug for pancreatic cancer in 20 years will not... is very depressing news for patients with metastatic pancreatic cancer...

Stats: Estimated new cases and deaths from pancreatic cancer in the United States in 2014:
New cases: 46,420
Deaths: 39,590


It was the last night of the last day of the year and I was having trouble sleeping. When day breaks, I will find out my fate. It’s in my cells, inside my body. What will the CT scan show? The doctor has not called me. Maybe she wants to give me the bad news herself. My optimism is being tested. I can’t sleep.

My friend Steve has offered to drive Saunie and me to the hospital. I am up early, gobbling down some Trader Joe’s O’s and yogurt. Soon dressed, and ready to hear my fate. Maybe it’s a Jewish thing to expect the worst. I am pacing around. Hurry up and wait!

Saunie arrives with time to spare and we head downstairs to wait. The main door does not deter the cold. Soon it is 8, no Steve. I had stressed the importance of being on time, and besides we have to pick up Vicki Gordon at her house on the far West Side and then head across town, from 70th and West End
to the far East Side on York and 70th. What is the traffic? Is it the usual horror?

7:10: Please, Steve. I don’t need more anxiety. I have plenty. I finally page him. “Sorry,” he says, “I overslept.” What? Not today, I say to myself. What if Dr. Ocean is off on her rounds? The wait begins. I am freaking out. I am ready to hop into a cab. Finally, he texts, “Meet me on 8th and 23rd.” It’s freezing. I duck into a store for warmth and, then, back onto the street, back into the store and back onto the street. Saunie is calming me down. I am convinced that a start of a bad day will lead to a worse situation. It’s a sign. Fortunately, I am wrong. Steve is there in a flash. Lo and behold, there is no traffic. Vicki is calling, “Where are you?” “There in a second,” I reply.

Steve complains about the new 25 mph speed limit in New York but we are there at 8:35. She is ready and we are off again. I am convinced we will be late. Another brilliant prediction!

We are early. The nurse Denise is there to check my vital signs. She ushers us into a room and then tells us. The doctor is late. Late? These are not words I want to hear. “Dr. Ocean is always late,” confides Denise. I am now livid with myself for being so anxious. I feel ridiculous.

When she shows up, the computer is not working, and it takes her a while to access the report on the scan. She explains she has been busy and hasn’t seen it. And then, it’s in front of her and she’s reading it in front of us. She smiles, and says “that’s good.” And then “That’s good again.”

I am on the edge of finger biting collapse.

What’s good? Let’s let my Nurse Jessica share the news that she sent to our list of supporters, that is, after I relayed the news myself to my daughter who is calling from her vacation in Mexico.
I am in shock. The good kind of shock! She writes:

Dear all, I am very happy to report that Danny’s surveillance CT scan of chest, abdomen and pelvis obtained on Friday, December 27th revealed complete resolution of a previously biopsied 8 mm left upper lobe lung lesion and a grossly stable pancreatic lesion with no evidence of spread of disease. Dr. Ocean was very pleased with these findings and also reported his CA 19-9 is down to 149, from upwards of 800. He will continue on his current chemotherapy regimen with Folfirinox infusions every two weeks as before. Clinically, Danny remains very active and strong and enjoys entertaining his family and friends in his newly renovated apartment in Chelsea, Manhattan. 

Happy New Year!
Warm Regards, Jessica

Jessica L. Zambelli, MPA-C
Director, Clinical Services
Private Health Management

Good news on New Year’s Eve. What a present! The doctor also commented on my overall demeanor and strength. I never understood, as she explained, that many pancreatic patients stay in bed all day, are in pain, isolated and depressed.

It was then I understood how much non-medical factors affect cancer patients. My daughter was right on the need to renovate the apartment and bolster my morale. She was right about the importance of congenial home health aides and to fight any tendency I had to feel sorry for myself.

I called pancreatic cancer a “monster,” but Dr. Ocean said her colleagues call it “the Beast,” but then opined that “I am ‘taming’ the Beast.”
I will take it.

Incidentally I also asked her about the homeopathic serum made from scorpions I received from Cuba, and she advised to hold off. In fact, non-medical factors may be linked to my recovery and even getting cancer in the first place, for no one seems to be fully sure why it happens.
JANUARY 2015
LOOKING FOR A GOOD SIGN

On January 1, Yahoo carried this intriguing article:

*Is Cancer Risk Mostly Affected By Genes, Lifestyle, Or Just Plain Bad Luck?*

While cancer can strike anyone – young or old, unhealthy and healthy – we do have some idea of what can affect risk. Genetics often play a role, for instance, as do lifestyle habits. But according to a new study from Johns Hopkins University researchers, much of cancer risk may actually be due to mere chance.

Cancer develops when stem cells of a given tissue make random mistakes, mutating unchecked after one chemical letter of DNA is incorrectly swapped for another – the equivalent of a cell ”oops.” It happens without warning, like the body’s roll of the die. For the new study, published in the journal Science, researchers wanted to see how much of overall cancer risk was due to these unpreventable random mutations, independent of other factors like heredity and lifestyle.

““There is this question that is fundamental in cancer research: How much of cancer is due to environmental factors, and how much is due to inherited factors?” Christian Tomasetti, PhD, a biomatematician and assistant professor of oncology at the Johns
Hopkins University School of Medicine and Bloomberg School of Public Health, tells Yahoo Health. “To answer that question, however, the idea came that it would be important to determine first how much of cancer was simply due to ‘replicative chance.’”

To measure this, the researchers plotted the number of stem cell divisions in 31 types of tissues over the course of a lifetime against the lifetime risk of developing cancer in the given tissue. From this chart, the scientists were able to see the correlation between number of divisions and cancer risk – and from that correlation, researchers were able to determine the incidence of cancer in a given tissue due to replicative chance.

Ultimately, researchers found that roughly two-thirds of the cancer incidence was due to this replicative chance, or simply “bad luck.” (However, it’s worth noting researchers did not examine some cancers, such as breast and prostate cancers, because of lack of reliable stem-cell turnover information.)

But don’t assume you’re simply doomed to the hand fate deals you. After additional analysis, researchers found that of the 31 cancers examined, 22 could be explained by “bad luck” – but for the other nine, there was another factor aside from simple chance that likely contributed to the cancer.

This is presumably because environmental and hereditary factors play a role in development.”

Next day, LBN replayed it this way for the masses:

**JANUARY 2: JUST A MATTER OF LUCK?**

*Biological Bad Luck Blamed In Two-Thirds Of Cancer Cases*

Plain old bad luck plays a major role in determining who gets
cancer and who does not, according to researchers who found that two-thirds of cancer incidence of various types can be blamed on random mutations and not heredity or risky habits like smoking.

The researchers said on Thursday random DNA mutations accumulating in various parts of the body during ordinary cell division are the prime culprits behind many cancer types. They looked at 31 cancer types and found that 22 of them, including leukemia and pancreatic, bone, testicular, ovarian and brain cancer, could be explained largely by these random mutations – essentially biological bad luck.”

There was also other news today for cancer patients like myself. This is via a service called Levine Breaking News:

**Cancer Dip Spares 1.5m Americans**

A report released Tuesday found that a 22 percent decrease in cancer death rates during the past 20 years has saved the lives of more than 1.5 million Americans, according to the American Cancer Society. The annual report pointed to a decline in US smoking habits, more cancer-prevention awareness, cancer treatment improvements, and advances in early detection practices as the factors behind the death rate drop.

The American Cancer Society looked at cancer diagnoses, mortality and survival data to find that the pace of cancer deaths is decreasing in every state, with Northeastern states marking the biggest decrease of 25 to 30 percent. “The continuing drops we’re seeing in cancer mortality are reason to celebrate, but not to stop,” said John R. Seffrin, chief executive officer of the American Cancer Society.
Happy to pass that on, although the American Cancer Society is not, I am told, the most objective source of reliable information. After Jessica’s report flew around the Internet, I started getting cheers and congrats from fans and friends. That was heartening. I hope they don’t think this is over yet. After the meeting I was back in the infusion chair for the start of a new round of chemo. I asked the doctor if I would ever get this growth out of me. She said that she thinks surgery is no longer indicated because of the danger of spread. She said this is a chronic disease and that I will always be living with cancer and will need medicine. Not an encouraging prospect. But it sure beats the alternative.

2014: THE YEAR OF CANCER

Cancer is not just what I was diagnosed with in the year gone by. It is a metaphor for something deeper – a cancer of corruption, war mongering, race hatred, and duplicity in high places the world over. From the Ukraine, where a US-backed coup led to months of Putin bashing, to an election that had the lowest turnout since the Civil War in a House and Senate that enjoy a mere 10 percent approval rating, to Ferguson and Staten Island and now Los Angeles, where black lives don’t matter in police actions.

The idea of a cancer in our system is not new. John Dean, President Nixon’s lawyer, told him back in 1973, “We have a cancer within, close to the presidency that is growing.” Nixon translated his remarks into a request for a million dollars to blackmail his critics. That’s a cancer compounding a cancer.

Red Pepper, the feisty British political magazine, complains about another aspect of all this: Misplaced “cancer heroism”:

Mike Marquese wrote in 2009 in The Politics of Cancer:
Obituaries routinely inform us that so-and-so has died ‘after a brave battle against cancer.’ I’m waiting for the day I get to read one that says so-and-so has died ‘after a pathetically feeble battle against cancer . . . ’

One thing I’ve come to appreciate since I was diagnosed with multiple myeloma (a cancer of the blood) two years ago is how unreal both notions are. It’s just not like that.

The stress on cancer patients’ “bravery” and “courage” implies that if you can’t “conquer” your cancer, there’s something wrong with you, some weakness or flaw. If your cancer progresses rapidly, is it your fault? Does it reflect some failure of willpower?

In blaming the victim, the ideology attached to cancer mirrors the bootstrap individualism of the neoliberal order, in which “failure” and “success” become the ultimate duality, dished out according to individual merit, and the poor are poor because of their own weaknesses.

And Louis Proyect, who worked at Sloane-Kettering Memorial, a leading cancer hospital, wrote on Counterpunch that hospitals are often complicit in making things worse for cancer patients.

When I was working at Sloan-Kettering, I read a terrific book titled The Cancer Industry that along with The Cancer Wars is essential reading for those with a class analysis. To this day, I remember what the book said about Hubert Humphrey’s stay at Sloan-Kettering. I don’t have the book handy but these paragraphs from a 1990 review should suffice:

Among the horrors stories in The Cancer Industry is the case history of Senator Hubert Humphrey, who was operated on by a team of surgeons at Memorial Sloan-Kettering on October 6, 1976. His surgeon appeared before the press and television cam-

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eras to announce that the senator was cured by the operation, but as a preventive measure, to “wipe out any microscopic colonies of cancer cells that may be hidden in the body, treatment would begin with experimental drugs.”

Moss describes the aftermath: “Within about a year, Senator Humphrey was dead. In that short time he had withered from a vigorous middle-aged man to an old, balding and feeble cancer victim. Humphrey himself blamed chemotherapy . . . calling it ‘bottled death’ and refusing in the end to return to Memorial Hospital for drug treatment.”

**JANUARY 2: GOVERNOR DIES**

The big news in New York these days is the death of former Governor Mario Cuomo, who died on the very day that his son Andrew was sworn in for a second term as governor. I met both of them, finding the dad far more impressive than the son. I mentioned my meeting to my friend Gary, who is a stringer for WINS, the most listened-to news radio station. He pitched the station to interview me and was by in a flash, and I was soon on their air as a “political analyst.” I must have done a good job because their desk editor called me early this morning to do another interview. Gary laughed: “At least you are getting heard in your own country again!”

More on 2014 from Devon Maloney, in Wired:

**2014 Kinda Sucked: A Look at Our Slow Descent into Dystopia**

This year was, to put it as gently as possible, the devil’s playground. Oh sure, every year has its horrors and there are far worse annums behind us (the Crusades, anyone?), but 2014 proved to
be a year in which long-festering social, environmental, and political problems were exposed in ways we have not seen in a very long time.

Thank social media, or globalization, or perhaps the recent explosion of hyper-accessible dystopian entertainment (though that is something of a chicken/egg scenario), but no single year in recent memory has so closely resembled the exaggerated conditions employed as metaphorical warnings in dystopian sci-fi. In fact, a lot of dystopian fiction we saw this year is at the very least on par with everyday realities, if not tame by comparison.

STUDY FINDS THE UNITED STATES HAS BECOME A PLUTOCRACY

Dystopic Effect: A Princeton/Northwestern study released this year found that dystopia is not just a figure of speech – Congress doesn’t listen to constituents unless they are rich, and the interests of the top 10 percent are about 15 times as important to lawmakers as those held by the rest of us.

JANUARY 3: EMAIL FROM FRIEND IN MEXICO

“I’m so glad that you are open to dealing with this challenge nutritionally and not taking the path of blind trust in the conventional medical establishment. You have the courage and love for life to beat this. Please check out this guy who specializes in pancreatic cancer and luckily is in NYC on East 36th St. – http://www.dr-gonzalez.com/index.htm

“Dr. Gonzalez has been engaged in a decades-long battle with the conventional medical establishment, for whom ‘alternative cancer treatments’ are ‘forbidden.’ Dr. Gonzalez combines a diet based on metabolic type with personalized supplements, including omega-3 fats and pancreatic enzymes, and a detoxification protocol; he also requires that patients optimize their vitamin D
levels, in addition to other treatment modalities


“Also, there is a lovely place in Puerto Rico that I attended for a week where you can get started on your cure. http://www.annwigmore.org/ I highly recommend it.”

QUOTE FROM RICHARD BLOCH, CO-FOUNDER H&R BLOCK, INC., AND FOUNDER OF THE R. A. BLOCH CANCER FOUNDATION

There is no such thing as false hope for a cancer patient. Hope is as unique with each individual as a fingerprint. For some it is the hope to make a complete recovery. But it might also be the hope to die peacefully; the hope to live until a specific event happens; the hope to live with the disease; the hope to have their doctor with them when needed; the hope to enjoy today. Just as each case of cancer is unique, each person is different. Each individual has the right to be told all their options and then decide for themselves.

POEM FROM PANCANDIARIES.BLOGSPOT.COM

Today I leave you with a poem (author unknown) that I saw hanging in the infusion center one day when my dad was receiving chemo treatments. When I saw this poem I felt more at ease and I often think about its comforting words whenever I’m feeling stricken with anxiety and despair.

*What Cancer Cannot Do*

It cannot cripple love.
It cannot shatter hope.
It cannot corrode faith.
It cannot destroy peace.
It cannot kill friendship.
It cannot suppress memories.
It cannot silence courage.
It cannot invade the soul.
It cannot steal eternal life.
It cannot conquer the spirit.

FROM MENSCHES OF NOTE
Journalist Dave Marash writes from New Mexico: “Happy New Year, and mazel tov on your excellent report card. This is all good news. It was such a pleasure to spend time with you and Bill and Marc. I look forward to doing it again when I am next in the Big City. Amy and I head home tomorrow after a terrific time with good friends, good food and good music. Who could ask for anything more?”

Musician Nile Rogers comments: “Dearest Danny, this is the best news of the new year so far!! I love you brother.”

CONDOLENCES
Stuart Scott of ESPN has just died of a cancer he had since 2007. He was 49. Among his last comments at an award Ceremony: “I also realized something else recently. I said, ‘I’m not losing. I’m still here. I’m fighting. I’m not losing.’ But I’ve got to amend that. When you die, that does not mean that you lose to cancer. You beat cancer by how you live, why you live and the manner in which you live. So live. Live. Fight like hell.”

The Washington Post reported:

“Scott’s cancer was first diagnosed when his appendix was removed in 2007. It recurred four years later and again in 2013.”
Scott fought the disease by working himself into shape with a mixed martial arts regimen that helped him cope with 58 infusions of chemotherapy and three extensive abdominal surgeries. He did not, he told the New York Times last March, know his prognosis.

“I never ask what stage I’m in,” he said then. “I haven’t wanted to know. It won’t change anything to me. All I know is that it would cause more worry and a higher degree of freak out. Stage 1, 2 or 8, it doesn’t matter. I’m trying to fight it the best I can.”

Sportswriter Dave Zirin wrote in The Nation:

When I was diagnosed with cancer in July, I felt like a loser. I get how illogical, infantile, and insulting such a statement appears. It insults not only myself but everyone who gets the diagnosis that they have “the Big C.” I felt like a loser partly out of self-pity and partly because I was convinced that I must have done something to bring this on myself: my diet, my stress, my cellphone, my personal habits and petty addictions.

Even though I would never think this about anyone else, I was quick to beat myself up. It was a stark realization that as much as I critique and protest this maddening, even brutal, culture we all endure, I’m still a product of it and its lessons are seared into me. If you’re not a winner, you’re a loser. If you get cancer, you must have done something to deserve it. Like the morally toxic Parker Brothers board game my sister and I played endlessly when I was a kid, I was a loser at the “game of life.” It is no exaggeration that ESPN’s Stuart Scott, who died Sunday from cancer at the age of 49, rescued me from my diagnosis-depression and inspired me not so much to “fight” my cancer but to get off my damn back.
SURVIVOR IN THE UK

“I’m supposed to be dead now,” admits Wilko Johnson, the guitarist who was told that he may not survive past October after being diagnosed with terminal cancer.

But on Thursday night Johnson was hailed as a musical innovator by an audience of his rock peers as he prepares to record a final album with Roger Daltrey.

Since being diagnosed with terminal pancreatic cancer, the former Dr Feelgood guitarist, 66, says he has never felt more “vividly alive”. Johnson refused chemotherapy treatment so that he would have the strength to complete a “farewell tour” in Spring, where he basked in the adoration of fans.—The Independent, (UK), January 4.

JANUARY 5: WORK

I was a workaholic, going from project to project, from at least 1979. I justified it in political terms and also found myself with underfunded projects that demanded lots of time. Some considered me prolific, others driven to distraction. My life had little balance, but I thrived in the momentum. Never a dull moment. But now I have none, and it’s probably a good thing. For too long, I validated myself by my productivity: films, books, blogs, etc. Even this past year, with four months “off,” I finished two books, five hours of TV docs on Mandela, and a six-part series on the American Surveillance State for PressTV in Iran and now RT.

Someone must like my work. Today, I learned that my surveillance TV series won “the Golden Lantern” top prize at an Iranian film festival. Does that mean it will be shown on any channel in the US of A? I doubt it.

From Ramesh Sharma in India: “Hi Danny, Hope you are re-
covering well from your health problems. Heard about it last month when I met Anant’s cousin in Goa. Stay Blessed! We need robust voices like yours to sound loud and clear! Wishing you and your loved ones a very healthy, happy and prosperous 2015!”

From My Long-time Physician, Dr. Alan Dechario: “Hi, That’s great news! I’m so happy to hear it! Thank you for letting me know. Take care and Happy New Year!”

**JANUARY 6: THE NEW YORKER ASKS: IS IT POSSIBLE TO CONTROL CANCER WITHOUT KILLING IT?” GOOD QUESTION!**

Jerome Groopman:

Most cancers, once they spread, are incurable. Cancer researchers are desperate to raise the number of patients who go into remission, to prolong those remissions, and to ultimately prevent relapse. So when a new way of attacking cancer comes along, it is often greeted with incautious euphoria and an assumption that the new paradigm can be quickly converted into a cure for all cancers.

In 1971, President Nixon announced the War on Cancer, based on the mounting belief, born of research in the nineteen-sixties, that cancer is caused by viruses. As it turns out, although viruses often cause cancer in lower animals, they do so less frequently in humans.

In 1989, Harold Varmus and Michael Bishop won the Nobel Prize for their discovery, thirteen years earlier, that normal genes could mutate into cancer-causing oncogenes, which appear to drive the unchecked growth and behavior of malignant cells. Cancer was now seen as a genetic disease, and in some cases, such as familial breast cancer, genetic tests were developed that could indicate whether an individual was at high risk for the malignancy.
JANUARY 7: FOX NEWS TO THE RESCUE

A 17-year-old cancer patient and her mother are fighting the state of Connecticut over her right to refuse chemotherapy treatment.

Jackie Fortin explained that her daughter, identified only as Cassandra C., understands that chemotherapy would kill the cancer, along with “everything in your body,” and does not want to undergo the treatment. “[These] are her human constitutional rights to not put poison in her body,” Fortin said. “Her rights have been taken away. She has been forced to put chemo in her body.”

JANUARY 8: MORE MESSAGES

From my friend Rie Shigamatsu, in California: “Hi Danny, I wish I could come and show you my CarePages in person, unfortunately, we were just in NYC in late December, but only for two days so we only had time to spend with Ron’s family. I don’t know how broadly your news has been shared with your friends etc, and I know you have a HUGE network of people who respect and love you. I also know that when you are going through treatment it is so exhausting, not only physically but emotionally, to try to keep in touch with everyone who wants to know how you are doing. This is why I found my blog made it easier to send updates to my friends/family and receive messages of encouragement.

“It was so interesting to see the people who supported me, some who I didn’t even know that well and was very gratifying and gave extra comfort and strength. Not sure of your feeling on this, but the power of prayer is very well documented. And although I know pancreatic cancer is very, very serious, I did a quick Google search yesterday and found a lot of people who had survived and continued to live many more happy years. So
take heart, dear Danny, mind over matter and that’s where having this virtual support system can be so helpful.

“I am attaching the email which we sent out, with the details of my blog, which is still online so you can see it, just in case this may be helpful for you. If so, I would be more than happy to set it up for you!”

Here’s that email:

From: Ron Collett <ronc@numetrics.com>
Cc: Rie Shigematsu Collett <rshigematsu@hotmail.com>
Sent: Monday, September 7, 2009 10:51:25 AM
Subject: The Challenge Ahead . . .

Dear Friends,

I’m writing to let you know that we’ve had a rather unexpected health issue come up. We recently received the results of a biopsy conducted on a suspicious lump that Rié found in her breast and, unfortunately, it turns out that she has breast cancer. Naturally, it was a huge shock, as she has always been the pillar of health. We’re doing great psychologically and emotionally, but as you can imagine, it’s always difficult sharing this kind of news with friends and family.

At first we weren’t sure how broadly to communicate the situation, but Rié felt strongly that you should hear it directly from us rather than “through the grapevine,” especially since breast cancer affects so many women – one in eight in the US – and perhaps our experience might encourage increased vigilance with regard to early detection. In fact, if it hadn’t been for a friend of ours who was also recently diagnosed with breast cancer and was very open about sharing helpful information, we might not have caught it as early. (Note: in Rié’s case, it did not show up in a
mammogram, but rather an ultrasound.)

We have a great team of doctors at Palo Alto Medical Foundation and Stanford Hospital, where surgery has been scheduled for September 11th. We also have great confidence in the medical science, although surely it will be a challenging time during the next 12 months. If you would like to keep up-to-date on Rié’s progress and recovery, you can sign up to a “blog” we’ve created to keep friends and family informed. Please go to www.carepages.com and create a login. Enter “RieShigematsuCollett” in the box for the CarePage name, and you’ll go to her pages. If you want to send Rié a note you can do so through the CarePages or to her email at rshigematsu@hotmail.com.

Thank you for your friendship and support. – Ron

JANUARY 8: ROCK AND ROLL

It’s one in the morning and I am not sleeping well. It’s cold in the house with temperatures dipping to freezing outside. Maybe I am frozen, too. I seem to be trapped in the past, as a mountain of boxes, stuffed with memorabilia, and artifacts of an era gone by. At least in those days, I had more hope than I have today as I watch the decline of our culture and well-being.

Seeking some relief, I turned to HBO and there was another part of my past on display for all to see, as an “induction ceremony” for the Rock’n’ Roll Hall of Fame rock and rolled into the early hours. Of course, since I’m an alumnus of a rock radio station, the music has been part of my life for as long as I can remember.

On stage tonight at Brooklyn’s was a tribute to KISS. The band was introduced by Tom Morello with a brilliantly written and delivered speed rap. Tom was wearing an International Workers of the World hat and a red star on his shirt, probably the very antithesis of what KISS represents but he praised the band’s 40
years of making music in a colorful and heartfelt way.

I remembered my own experience meeting Gene Simmons, the larger than life rocker with the longest tongue in the world as a guest on a show I produced for ABC. We had our picture taken together along with an evangelist who was denouncing rock and roll as the devil’s music.

Next up was the artist once known as Cat Stevens, who left the scene to find comfort as a convert to the Muslim faith, and who changed his name to Yousef Islam, and developed a new following worldwide. He is a gentle soul, and was well received in Brooklyn when he was introduced after an affectionate introduction from Paul Simon’s former partner Artie Garfunkel. I was thrilled to see him overcome the anti-Muslim hatred in America.

A few years back, I hung out with him at an AIDS concert in Cape Town, South Africa, sponsored by the Mandela Foundation, and featuring Queen and other artists. I found him culturally savvy without bitterness and a sincere voice for tolerance.

Next on the small screen was a big man: Ahmir “Questlove” Thompson, the drummer for Philadelphia hip-hop band The Roots, there to introduce fellow Philly stars Daryl Hall and John Oates. He is as eloquent as they come in popular music and appeared as both an advocate for his hometown and Hall and Oates.

They did a great set fusing their distinctive bluesy pop with an upbeat rock song. Although nothing was said about their interests or politics, I met John and Daryl when they joined us as artists in the anti-apartheid anthem Sun City.

At that point I was going to try to get back to sleep, but to my surprise, there was BRUUUUCE, honoring the members of his E-Street Band. I had to watch that and it was everything a Springsteen show is, passionate insights, uplifting music, and many surprises.
I was moved by Bruce honoring his band and, in the process, acknowledging that he didn’t always treat his mates as well as he might have, especially my friend Steve Van Zandt. He paid tribute to all the band members this time around and they hailed the Boss who is also their boss.

I thought back to my first story on Bruce and the band back in 85 when *Born in the USA* topped the charts. I focused on his opposition to the Vietnam war and was probably one of the first to profile the many artists from E Street including Patty, who would later become his wife. In many ways this musical and verbal tribute was overdue and at the same time an update to what I tried to do so many years later.

**FOX: BAD HABIT: YOUR MORNING BACON FIX**

Bacon makes everything better – except your health. People who ate the most processed meats (2.5 slices of bacon or sausage links a day) were 19 percent more likely to develop pancreatic cancer, according to a recent study. Smoked and cured meats contain a type of iron that may damage intestinal cells and lead to colon and rectal cancer as well, said Alice Bender, registered dietician, of the American Institute for Cancer Research. Preservatives called nitrites might also break down into damaging by-products that make cells more vulnerable to cancer.

**JANUARY 10: BEST WISHES FROM SOUTH AFRICA**

Email from Kevin Harris, South African Filmmaker: “Hey Danny, Many thanks - it never ends. I’ve always regarded you as invincible - so strength to your current battle - put your head down and keep up the good report cards. Love and thinking of you from all of us here - please keep me in the loop with your progress. Take care & all the best.”
From today’s Financial Times – A memoir by an English activ-
ist who was part of an effort I also took part in South Africa in 1967:

Bob Newland says he had no idea how important his work had been to the anti-apartheid struggle:

A leaflet bomb isn’t really a bomb, it’s more like a firework. When detonated, leaflets bearing information fly 40ft-50ft up in the air before cascading down into the crowds. I got involved in it as part of the anti-apartheid struggle in the 1970s. I was living in London when a friend from the Young Communist League approached me one night and told me I had been selected for a special task: to set off leaflet bombs in South Africa.

It was part of a plan devised by the African National Congress (ANC) after its main leadership was arrested in 1963. It enlisted white students and young workers in the UK who could circum-
vent the Pass Laws in effect in South Africa to spread its message and keep its name alive among the non-white people. We became known as the “London Recruits.” I wasn’t sure what I was getting into but I trusted my friend.

I was 21 years old and unemployed. This was critical to the plan because the ANC wanted recruits without children or solid ties. We were told we could get captured and tortured but we were young and enthusiastic and considered ourselves bulletproof.

We made the bombs using plastic buckets that we bought from a local hardware store in South Africa. We hid them in carrier bags, and some leaflet bombers placed plastic spiders on top to ward off unwanted attention in the moments before detonation. No one was ever hurt or arrested while leaflet bombing.

We placed them in bus or train stations that thousands of black South Africans would pass through as they went home
from the city at 5 pm. When the explosives went off, the leaflets fell into the crowds, who snatched them up before the security forces could move in.

We used basic egg or kitchen timers. But they were very inaccurate. Someone I know was setting up a bomb in their hotel room when the timer sprang back up. Luckily there were fireworks outside and they could easily explain the noise. But leaflets were hanging from the ceiling and the wardrobes and they had to rush to clean up.

The ANC also gave us training in how to escape detection. Everyone knows this now because of TV shows but they taught us to look in shop windows for reflections of people behind us or, if we were being followed, to slip into a building and come out from the other side. One afternoon we had some free time so we visited Soweto to get a measure of the scale of the place and the circumstances people were living in. Once there, we got caught up in a roadblock and were petrified the police would stop us and find the leaflet bombs in the back of our car.

I was in South Africa for only four days but the ANC continued to use leaflet bombs for nearly three years. Travelling to Johannesburg was my first time flying and staying in a hotel. Airport security wasn’t as severe in the 1970s – we carried the explosives in the bottom of a Fortnum & Mason biscuit tin that I said was a gift for someone I would be visiting.

We were ordered not to talk about our activities. I came back to the UK to work for the Communist party and, later, for the Morning Star and Greenwich council.

Some of the London Recruits went back to South Africa in 2012 for the launch of a book about us, and we were invited to Thabo Mbeki’s 70th birthday party. In his speech he dedicated the event to the London Recruits who, he said, had come to help
them in their darkest hour. And we just wept because we had no idea how important this little thing had been.

A guide to the London Recruits’ leaflet bombs is featured in ‘Disobedient Objects’, an exhibition at the Victoria and Albert Museum (until February 1)

SHIPS OF RESISTANCE

I have been watching the Netflix series *House of Cards* that dramatizes, in one subplot, a Congressman who fights to reopen a shipyard on the Delaware River until his congressional higher-ups decide to shut it down despite all of his promises. In the end it was all about political wheeling and dealing.

As it happens, yesterday my brother and my sister-in-law took me to see a Broadway show on a similar theme – *The Last Ship*, featuring songs by Sting. It was a musical reminiscent of a Brecht play showcasing the spirit of the working class in England that ends up occupying the shipyard to build a last ship as a message of solidarity in the spirit of an Irish priest who backed “the lads” and a culture that has been largely wiped out. It was rousing, hopeful, and dramatic with a message of resistance that did my heart good. Great music too!

I have been arguing about the tragic *Charlie Hebdo* attack and murders in France. Here’s a comment by Glenn Greenwald in *The Intercept*:

*In Solidarity With a Free Press: Some More Blasphemous Cartoons*

Defending free speech and free press rights, which typically means defending the right to disseminate the very ideas society finds most repellent, has been one of my principal passions for the last 20 years: previously as a lawyer and now as a journalist. So I consider it
positive when large numbers of people loudly invoke this principle, as has been happening over the last 48 hours in response to the horrific attack on Charlie Hebdo in Paris.

Usually, defending free speech rights is much more of a lonely task. For instance, the day before the Paris murders, I wrote an article about multiple cases where Muslims are being prosecuted and even imprisoned by western governments for their online political speech – assaults that have provoked relatively little protest, including from those free speech champions who have been so vocal this week.

I've previously covered cases where Muslims were imprisoned for many years in the US for things like translating and posting “extremist” videos to the internet, writing scholarly articles in defense of Palestinian groups and expressing harsh criticism of Israel, and even including a Hezbollah channel in a cable package.

That's all well beyond the numerous cases of jobs being lost or careers destroyed for expressing criticism of Israel or (much more dangerously and rarely) Judaism. I'm hoping this week's celebration of free speech values will generate widespread opposition to all of these long-standing and growing infringements of core political rights in the west, not just some.”

I am sorry, Glenn, in my view this has little to do with free speech and a lot more to do with the war – mostly one sided – that the West has waged on Yemen and in Iraq and Syria. The magazine was a “soft target,” a part of a psychological operation to sow fear and force the government to crack down on Muslims who would be more likely to join the jihadi crusade. The magazine was a convenient symbol to strike out at.

Here's veteran Middle East correspondent Patrick Cockburn:
“Did the massacre at *Charlie Hebdo* succeed, in terms of furthering the interests of extreme jihadi al-Qaeda-type Islamic movements? The incident itself is over with the deaths of the murderers, but the degree of their success will only become clear when we see how far French political leaders are lured into an overreaction.

It was worrying to see *Le Monde*’s banner headline: “*Le 11 Septembre Français.*” First, it simply is not true: there were 2,977 victims of the 9/11 attacks and 17 victims in last week’s shootings in Paris. The shock was far greater in the United States than in France because of the visual impact of aircraft crashing into the twin towers, and their spectacular collapse.

It is important to keep a sense of proportion about such atrocities, because the perpetrators, whether linked to Islamic State (ISIS), al-Qaeda, or freelance jihadis, select targets that will guarantee maximum publicity. “The media is half jihad” is a slogan sometime seen on jihadi websites.

Misleading analogies between 7/1 in France and 9/11 in the US should create a sense of foreboding. The most important victory of Osama bin Laden did not come on the day the 19 mainly Saudi hijackers took command of the planes, but in the months and years which followed as President Bush led the US into wars in Iraq and Afghanistan in which American troops fought Muslims. As the US resorted to rendition, the mistreatment and torture of prisoners, expanded security agencies and limited civil rights for its own people, it delegitimized itself and acted as recruiting sergeant for al-Qaeda and its clones. If bin Laden had been hiding in the attic of the White House giving instructions to those in the rest of the building he could not have devised a cocktail of measures more likely to aid his cause.
I am blessed to have more than one family. In 2001, just a few days after the World Trade Center disappeared, I was asked to film some artists doing a remake of Nile Roger’s hit song *We Are Family*. A few artists became more than 200 participants as an apolitical song popular at weddings and bar mitzvahs turned into an anthem for tolerance, a song to heal a fractured world.

The event was inspiring. Spike Lee made a music video. And I did a documentary that had an enthusiastic response at Sundance. But this was not to be a one shot. The We Are Family Foundation emerged from the project, and is still thriving with a focus on youth development all over the world. Musician Niles Rodger and, especially, his girlfriend/colleague/and superwoman Nancy Hunt made all this happen.

Nancy came to see me on Monday. She told me about Niles’ successful bout with prostate cancer. We had a great conversation, and I learned that her brother, a doctor, helps run the ebola effort at The White House. Afterwards she wrote me a letter, and then tipped off some of the key players in the foundation.

That led to an onslaught of wonderful letters: “It was wonderful to see you today - thank you for having me over to your vault of history! Wow, what a collection of life events. You, my friend, are doing so well and if Nile or I can be of help, please let us know. Nile is going to reach out to you to set a time to come by after he returns from Hawaii this week. He would like to see you.

“And, as promised, here is our very own Global Teen Leader, Jack Andraka, giving his TED talk about his pancreatic cancer breakthrough.

http://www.ted.com/talks/jack_andraka_a_promising_test_for_pancreatic_cancer_from_a_teenager?language=en

“This was almost two years ago . . . and he has done so much
JANUARY 2015

since then. I was in touch with him tonight and he would be honored to connect with you.

Keep me posted . . . and let’s make a date for dinner soon. – Much love, Nancy?

Mark Barondess is on the board of We Are Family, a prominent lawyer in DC who represented CNN Talk Show host Larry King for many years. He wrote:

“Nancy just shared with me the news regarding your health. I can’t believe that such a disease would even try to pick a fight with you – it obviously does not know who it is up against. Please stay strong and keep us posted. You are a very important part of the WAFF family and have been since the very beginning. Without you, we would not be who we are today. Now go kick that cancer’s ass and let us know whatever we can do to support you in that fight, although I’m confident you and your docs will score a knockout with our help. My very best regards and wishes.” Mark A. Barondess, Esq. – Miller Barondess LLP

Record executive Tommy Silverman is an old friend who invited me to direct the We Are Family Film: “Danny, Just heard the news. This will have to be the new year that you change. Time to release everything you are holding on to including this diagnosis. I would love to see you and help you with your healing when you are ready. How can we see this as an opportunity for growth? Time to be optimistic. There is no longer a choice. When can we talk? Love Always”

Henry Schleiff runs the Discovery Network’s ID Channel and has been on the We Are Family board from the inception: “Danny, For a guy like you who discovered the field of investigative journalism and related compelling documentaries, I just assume your present condition is part of some new project you are working on . . . Accordingly, I expect you to finish this thing
successfully and get onto your next assignment: you are just too
good of a journalist to spend too much time on this - and, you
are too respected by our industry to not be needed by all of us
to inform, entertain and, indeed, inspire us with your passion,
commitment and work . . . ! In the short interim before your full
recovery, please know that your many friends and colleagues
hold you in our prayers and thoughts!”

After Henry wrote, so did Nile Rodgers, the music maker,
project orchestrator and Nancy’s partner and significant other:
“Dearest Danny, I couldn’t agree with Henry more!! I’ll pop by
and see you as soon as I return from Hawaii, in a few days. Can-
ger was and is the toughest battle of my life, but I’m still here
after four years . . . and I just soldier on and keep “looking down
the road,” towards my next assignment.”

And then this big surprise, a note from Kathy Sledge of the Sledge
Sisters who sang the original hit version of We Are family, a singer
of power and sensitivity: “Hi Danny, Just a brief email to send some
“sunshine” your way! and I am lifting up special prayers for you!
We all don’t get to see each other often but know that We Certainly
Are Family!! Love & looking forward to seeing you!”

**JANUARY 13: GOOD NEWS ON THE MARKER FRONT**

My 8th Chemo infusion went off smoothly. There was more
good news when I met with Dr. Ocean: My blood cancer marker
dropped another 40 points from 149 to 109

Good News, says the doc.

Bad news for me last night. As usual, I tried to do two things
at once, put on a warmer sweat shirt and maneuver the wires in
my pump. I was half asleep and fell on my ass. Nothing broken
except my pride and a big pain in my side.
Dear all,

Danny remains stable from a clinical standpoint. Dr. Ocean was again very pleased that Danny’s tumor marker, CA 19-9, is down to 109 indicating that the chemo is working. He will continue on his chemo regimen as directed. Danny is expressing some difficulty with sleep. For this, we recommend he take melatonin 3 mg supplements at night.

Right now Danny’s night-day pattern is out of alignment. He has been having difficulty falling asleep and I have been getting reports the following day that he is sleeping soundly well into the afternoon, thereby throwing off his sleep cycle. Melatonin is safe and effective if taken as directed. Dr. Ocean has prescribed Ambien 5 mg for sleep. Ambien is also very effective, but I would prefer if Danny tried melatonin first. He will need to be patient and gave it some time for his body to readjust to a normal sleeping pattern.

Danny is a candidate for at-home medical visits so we have recommended Doctor to Your Door (D2D), which will be covered by Danny’s insurance. Danny would be seen on a routine basis (every 4 to 6 weeks) to oversee his overall, general care. This means that a health care professional will get eyes on Danny every 1-2 months in his home and can manage all non-cancer related issues. D2D providers can also collaborate with Dr. Dechiario, his long-time internist and Danny can continue to see Dr. Dechiario as needed.

We are recommending D2D because it is becoming taxing for Danny to get to his doctors’ offices for routine needs. His appt schedule is already taxing just with his Dr. Ocean visits alone; he goes to Dr. O’s office twice a week, every other week. D2D can
also refer in PET, OT, and even behavior therapists who can treat Danny in his home on a temporary basis when the needs arise. Important to note, D2D is by appt only, meaning if Danny called urgently and wanted to be seen that same day, it is unlikely they could come out and see him that day.

Therefore, for urgent needs, we recommend Danny go to The Beth Israel Medical Group, a medical group very near to his home, for management of any urgent needs. He is known to this group and he likes the treating physicians there. However, we would just have to be sure that all medications, recommendations, etc are communicated between all treating providers so everyone remains on the same page.

Soon, additional work will begin on his apartment in hopes to prevent unnecessary fall risks. This is very important because Danny remains with some unsteady balance, putting him at greater risk for falls. He sustained a fall two nights ago while putting on his sweater. Luckily, no serious injuries occurred. Although this fall was not due to the condition of his apartment, it is a reminder that we need to remove any potential safety hazards.

Lastly, Danny has a cold. He will need to stay well-hydrated and maintain a well-balanced diet in hopes to prevent an infection from settling in. Please notify me if Danny runs a low-grade fever or if his symptoms do not improve or worsen over the next several days. It is my pleasure to participate in the care of Danny. Please do not hesitate to reach out to me with any questions or concerns. Regards, Jessica

Jessica L. Zambelli, MPA-C
Director, Clinical Services
Private Health Management
“CANCERTAINMENT”

Why is Cancer so embedded in American life? I was watching *Breaking Bad* on Netflix. The lead character is diagnosed with lung cancer. I switch over to an episode of *BOSS* about the Mayor of Chicago. There is no escape. He had contracted Parkinson’s disease. Want more? Here’s a list of the top 25 dramas featuring Cancers:  http://www.avclub.com/article/thats-cancertainment-25-great-songs-books-films-al-37419


That’s cancertainment!: 25 great songs, books, films, albums, and TV shows in which cancer plays a major role

I could spend all of my time cataloguing medical excesses and lapses even as my future seems dependent on the world of big pharma and the doctorate.

Example from the *Washington Post*:

*Flu Vaccine Only 23% Effective*

This year’s flu vaccine is better than nothing but not by much. The CDC said Thursday that the shot only reduces a person’s chance of having to go to the doctor for the flu by 23 percent. “Commonly, it’s been closer to 60 percent,” said Brendan Flannery, an epidemiologist in the CDC’s influenza division. This year’s vaccine is considered to have one of the lowest success rates of the past decade because experts didn’t correctly predict the flu strains that would make people sick. By the time flu season hit, two-thirds of H3N2 viruses making people sick with the flu were not included in the vaccine.
**Why Medicare Advantage Costs Taxpayers Billions More Than It Should**

By Fred Schulte, David Donald and Erin Durkin June 4, 2014

A Center for Public Integrity investigation detailing questionable spending by private Medicare plans has been awarded the prestigious Philip Meyer Journalism Award for social science reporting. The series, *Medicare Advantage Money Grab*, documented how Medicare Advantage plans, created more than a decade ago to control health care spending on the elderly, have instead wasted $70 billion dollars through manipulation of a tool called “risk scores” from 2008 through 2013. The formula is supposed to pay health plans more for sicker patients and less for healthy people - but it often pays too much. Medicare Advantage plans now cover nearly 16 million seniors at an estimated cost to taxpayers of more than $150 billion last year.

The series also explained how the federal government has for years missed opportunities to corral overcharges and other billing errors tied to the abuse of risk scores. It painted a picture of the growing power of the Medicare Advantage industry and its sway over members of Congress. The series also foreshadows possible problems with the Affordable Care Act as it uses the risk score system.

Enuff already! This is the kind of corruption that permeates our healthcare system. You know it, and I know it, and it adds zillions to our medical bills.

**JANUARY 16: MARTIN LUTHER KING DAY**

I was put to sleep by Al Sharpton’s annual DC based breakfast to raise money for his National Action Movement at a hotel. It was
predictably on CSPAN. Most of the people he introduced were there as courtiers from the corporate sector including Obama cabin members who had worked for such civil rights groups as Walmarts, Macy’s and AT&T. I keep forgetting that the movement that King led and so many sacrificed for is now a business, and we need to ‘get our share.’ Go Rev.

I was at home today, living in what is coming to resemble my own Museum of Pre-Revolutionary culture, my march down memory lane with walls festooned with posters and artifacts from my world travels. I want to preserve my history but it does make me feel sometimes like a show-off and phony. I guess I am living in the past, but at least I am living. During the day, I am upbeat but at night a sadness descends, At the same time I just learned that the bible speaks of my namesake, Daniel this way: “During the night the mystery was revealed to Daniel in a vision. Then Daniel praised the God of heaven.” – **Daniel 2:22**

**PARALLEL COMMENTARIES**

*Matthew Henry’s Concise Commentary*

2:14-23 Daniel humbly prayed that God would discover to him the king’s dream, and the meaning of it. Praying friends are valuable friends; and it well becomes the greatest and best men to desire the prayers of others. Let us show that we value our friends, and their prayers. They were particular in prayer. And whatever we pray for, we can expect nothing but as the gift of God’s mercies. God gives us leave in prayer to tell our wants and burdens. Their plea with God was, the peril they were in. The mercy Daniel and his fellows prayed for, was bestowed. The fervent prayers of righteous men avail much. Daniel was thankful to God for making known that to him, which saved the lives of himself and his fellows. How much more should we be thankful to God, for making
known the great salvation of the soul to those who are not among
the worldly wise and prudent!

Eric Mann, the LA based political activist, and fellow Cornellian responds to my notifying him of my condition: “Hi Danny, Almost speechless. Obviously very powerful news, you are such an important historical figure and while I’m not sure you understand, a very powerful formative force in my political life. I wished you had been a “fraternity” revolutionary – it would have been easier to grasp (of course not really) but you were I think the first real white radical/revolutionary I met. Like many new ideas they are simultaneously attractive and very threatening. In my reconstruction of history you brought me into the Fayette County referendum to bring, exactly, the “fraternity establishment” part of the united front – which you and Doug Dowd wanted me to be sure I understood – and I resented (no one wants to see themselves in the mirror) but in just that process I came out a very different person than when I came in – as we said and still say, a “radicalizing experience.”

“I assume you are in New York? Yes? Let me know about urgent timelines – I will come to see you and always have important business in New York but you would be the business. I don’t need another reason to visit you. Yes, it was great seeing you at Cornell, the chance of them doing something for Chaney, Goodman, and Schwerner with their money are slim and none.”

**JANUARY 22: WARS ARE NEVER FAR AWAY**

I have been trying very hard to stay focused on my personal issues – even as I keep getting letters from friends and acquaintances that there is nothing to worry about because I am a survivor, strong etc. I want to believe it. Here’s a comment from
South African film publicist Dezi Rorich, “You are a survivor and I know you will be fine. Everyone around me who has the big C are doing well in recovery, if not completely recovered. God bless.”

I wish the stats on pancreatic cancer reflected that anecdotal optimism. At the same time I can’t only think about cancer deaths when so many wars rage on. Writes Tom Engelhart on his Tom Dispatch:

In a sense, there are only two operative words in twenty-first-century Washington: more and war. In this context, there really is just one well-policed party of thought in town. It matters not a whit that, under the ministrations of that “party,” the Pentagon and the rest of the national security state have grown to monstrous proportions, even though American war and security policies don’t have a significant success to their name.

I have been following the debates about the Oscar-nominated movie American Sniper by rightwinger Clint Eastwood, Its doing boffo business and even it is a piece of shit, as Matt Taibi has the guts to point out in a piece in Rolling Stone called, “http://www.rollingstone.com/politics/news/american-sniper-is-almost-too-dumb-to-criticize-20150121 - He writes in part:

I saw American Sniper last night, and hated it slightly less than I expected to. Like most Clint Eastwood movies – and I like Clint Eastwood movies for the most part – it’s a simple, well-lit little fairy tale with the nutritional value of a fortune cookie that serves up a neatly-arranged helping of cheers and tears for target audiences, and panics at the thought of embracing more than one or two ideas at any time.
It's usually silly to get upset about the self-righteous way Hollywood moviemakers routinely turn serious subjects into baby food. Film-industry people angrily reject the notion that their movies have to be about anything (except things like “character” and “narrative” and “arc,” subjects they can talk about endlessly).

This is the same Hollywood culture that turned the horror and divisiveness of the Vietnam War era into a movie about a platitudinous doofus with leg braces who in the face of terrible moral choices eats chocolates and plays Ping-Pong."

As it happens I am still consumed about the Vietnam War, the passion of my generation. I have been helping the Vietnamese-American filmmaker Tiana from a distance and in a small way. I wrote about her movie in one of the few commentaries I have been doing:

**Voices From The Ghosts of Vietnam Are Being Heard Again: Which Should We Listen To?**

Danny Schechter, New York, New York: It’s been nearly 40 years since what the American media called “The Fall of Saigon” and the Vietnamese referred to as the Liberation. I saw it then as the Fall of Washington.

The ghosts of Vietnam are back, thanks to two filmmakers with very different takes. The first is Rory Kennedy, Bobby Kennedy’s youngest daughter. Her one-sided account, *Last days In Vietnam*, has already been nominated for an Oscar. The second is Tiana, an American of South Vietnamese origin, who made the film, *From Hollywood To Hanoi*, years ago to promote reconciliation between our two countries.

Tiana is finishing a movie called *The General and Me*, on her unlikely conversations (for someone from a virulently anti-com-
munist family) with North Vietnam’s legendary and late General Vo Nguyen Giap, aka the “Red Napoleon,” a.k.a the man whose military doctrines defeated the French Army and later the Pentagon’s brutal Vietnamization strategy.

Giap created the Vietnamese resistance Army at Ho Chi Minh’s request in 1944, and without training, became a military genius. Tiana has two other self-promoted US “geniuses” in her movie too: pathetic walk-ons by former US General William Westmoreland, and an arrogant ex-Defense Secretary, Robert MacNamara, who could not conceal his contempt for her.

Rory’s highly-hyped and well-funded movie depicts footage we have seen before of the hurried evacuation of US soldiers and some of their Vietnamese conscripts in a long and bloody war that was lost almost from its earliest days.

Rather than look at the reasons for that loss, Rory has, with support from HBO and PBS’s American Experience series, tried to present a heroic picture of Americans in their last days in Saigon, coping with a mad ambassador, and in some cases rebelling against US policy.

(I have loved some of Rory’s work before, but this had ideological agenda written all over it.)

These two films, all these years later, mirror the cultural and political divides of the times with one film, in effect, rationalizing the war, and portraying the American military as compassionate, and the other, for one of the first times, offering views from the other side that Americans never heard.

Even if her Uncle JFK did escalate the war, despite his back and forth doubts, a member of the Kennedy Family is still treated as a cultural icon in a culture that can’t remember details of what happened yesterday, much less forty year ago. Rory’s work has been acclaimed; Tiana’s has not yet been seen. She labels the
forgetting deliberate, what she calls, “Nam-Nesia.”

Gerald Perry writes in Arts Fuse: “The mushy reviews of Last Days in Vietnam (a 94% Rotten Tomatoes approval rating) are extraordinarily similar. They praise filmmaker Rory Kennedy for documenting a forgotten moment of American history, the chaotic days in 1975 when the US raced to leave Saigon and South Vietnam steps ahead of the advancing North Vietnamese Army. And the critics are pumped up with pride at the stories Kennedy has uncovered of brave and noble American soldiers and a few anti-establishment American diplomats who helped evacuate many South Vietnamese—by boat, plane, and helicopter—who presumably would be enslaved or murdered by the Communist North Vietnamese.

What hardly anyone observed is that Kennedy, daughter of peacenik Robert Kennedy, is offering a flag-waving whitewash of the war in Vietnam. The North Vietnamese are characterized, with no exceptions, as Isis-like warriors murdering all their opposition on the way from Hanoi to Saigon. And, after entering Saigon, annihilating those who oppose them, or sending their enemies to re-education camps. The South Vietnamese? This amazed me: there is not any mention of the much-documented corruption of the various puppet governments, and of the South Vietnamese army as a coercive instrument of torture and killings. Each South Vietnamese ex-soldier who is interviewed is allowed to tell his shiny story, including a high-ranking officer. There’s no blood attached to any of them.

This did not surprise me. In 1976, the anniversary of the American Revolution, I published a small book featuring the views of Vietnam’s top military strategists including General Vo Nguyen Giap called How We Won The War. It was based on articles I wrote in the aftermath of the defeat of the US–backed Saigon military
in 1975. Predictably, it got no pickup. There were many post-mortems about what we did wrong, but, few if any, about what they did right. Surely, that story is historically more significant than how we cut tail and ran.

I wrote then: “The American press was never much help in our efforts to find out more about those remarkable Vietnamese people who have now managed to out-organize, outfight, and defeat a succession of US backed regimes. When the US media did recognize the other side’s existence, they did so with disdain, distortion and denigration . . . the US never came to terms with the fact it was defending a government which had no support and attempting to crush one that did.

A group of LA-based film critics later wrote to PBS:

“Rory Kennedy’s egregiously unbalanced, out-of-context, dubiously propagandistic Last Days in Vietnam is currently in theatrical release, a production of the PBS series, An American Experience. We are appalled by the extraordinarily one-sided nature of Kennedy’s rewrite of history that only shows the US government’s and the Republic of Vietnam’s side of the story, and never offers the points of view of the millions of Americans who opposed the war and of those who fought on the side of the National Liberation Front and North Vietnam.”

So much for “balance!”

The protest was all for naught. Public Television retreated into its archive of knee-jerk form letters and responded to criticisms of one program with a defense that cited all the programs they ran, most decades old, while announcing that a new multi-million dollar series on Vietnam by their always well-funded doc superstar, Ken Burns, is in the works. Typical!

They avoided details like these:

- Rory focused on the story of efforts to save allied officers
and their families in a Saigon ("Arvin") Army known for its cor-
ruption and brutality.

- It cited atrocities allegedly committed by the Communists like the “Hue Massacre,” an event thoroughly investigated and exposed as false by US Vietnam Scholar Gareth Porter.
- It cited violations of the Paris Peace agreement by the North without mentioning the many more egregious and concealed vi-
olations by the US-backed South Vietnamese forces.
- It showed the madness and mania of US Ambassador Graham Martin as if he was an exception to a history of earlier US officials who escalated the war with massive casualties. It of-
fered no historical context or background
  - It implied that all the people of Saigon would be butchered or imprisoned; that was not the case.
  - It referenced escaping ships racing to Con Son Island without mentioning that that island off the coast of Saigon hosted, like Guantanamo does today, brutal prison camps filled with “tiger cages” where Vietnamese opponents of the military regime were kept, killed and tortured.
  - Perry asks: “Where in this documentary are the anti-war voices of those who were American soldiers in Vietnam and became disillusioned by the terrible things we did there? Who in this film speaks of our random bombing of North Vietnam? Of the massacre at My Lai? And for the CIA, where is mention of the heinous tortures of South Vietnamese under CIA director William Colby? As for Kissinger, it’s madly frustrating to see his self-serving rhetoric go completely unchallenged. Where are you, Errol Morris, when needed? Instead, the world’s number one war criminal at large (Vietnam, Cambodia, Laos, Chile, etc.) is a wel-
come and honored guest to this documentary commissioned by PBS’s American Experience.”
And, on and on!

It’s been 40 years. What have we learned? The Obama Administration, aided by our Secretary of State, a Vietnamese speaker no less, named John Kerry, once the leader of Vietnam Veterans Against the War, had turned into an apologist for the American role in the war, and an arms salesman to Vietnam which fears the Chinese today more than the Americans.

Whose voice should we listen to? Rory Kennedy with her slick and costly archive-footage based mockumentary of history, or Tiana who is struggling to bring Vietnamese voices and a deliberately buried history to life?

Why are these Vietnam films always – “AAU – all About Us?”

At any rate, last night, I turned on my TV when, once again the war raged on in the movie *Heavy Metal Jacket* on HBO, with vivid battle scenes, including one involving a sniper, an Anti-American sniper this time, a young woman in the black pajamas of the National Liberation Front and with an NLF flag on display. She had cut down many American soldiers until a military unit caught up with her. One person against the US Army!

She was badly wounded and praying. I didn’t have the appetite to watch another Vietnamese resistance fighter go out in a blaze of bullets. The movie interviewed soldiers who were well propagandized about why they were there, and reflected the ignorance of the times and probably our times.

**OTHER FILM NEWS**

- I was also sent two film clips – one shot by the late, great Ricky Leacock at MIT of a protest chanting “Ho! Ho! Ho Chi Minh!” and a YouTube clip of a great anti-Vietnam war song by Jamaican reggae star Jimmy Cliff: https://www.youtube.com/watch?v=OChrbIR6oHs
• The long-delayed interactive educational video “London Recruits”, made for the V&A Museum in London, has now come online. It is described as an “experiential video.” Here is the link: http://londonrecruits-staging.herokuapp.com

JANUARY 23: HIDING MY DRUGS

My sleeping problems continue. My nurse Jessica fears that I am overusing Ambien. She had my health aide Sauni hide it. I felt ganged up on, while Saunie likened me to a junkie who needed his fix. She may be right.

JANUARY 25: ADVICE FROM JOY ELIOT, RETIRED REUTERS REPORTER

“As part of Stand Up 2 Cancer, Katie Couric reports on an $18 million grant given to doctors conducting a clinical trial on patients with pancreatic cancer . . . . Perhaps you could call her, or her producer, and get references, so you could ask the doctors about joining the trials? My prayers go up for you.”
JANUARY 26: THE EVE OF THE STORM:

It’s Storm Armageddon. Cold, Windy, Snowy. Tomorrow, the forces of Nature are expected to erupt with a major dump. Postponed my chemo infusion to Wed. Quiet day – only a few medical bills. Once again while watching Netflix – this time the blacklist series – another cancer episode. Seems like all the series have them.

An article I wrote for the Cairo Review on American politics was published. When will US outlets want to hear from me?

Hollywood fears havoc, reports the Wrap: “From Broadway to award shows, organizers are scrambling to shuffle planned events because of the storm.”

I also indirectly heard from Iran’s Ayatollah in Chief:

Dear Danny Schechter
As it may come to your attention, the Supreme Leader of the Islamic Republic of Iran, Grand Ayatollah Sayyid Ali Khamenei has recently written an open letter to the youth in Europe and North America on the 21st of January, 2015. In his letter, he urged the young Westerners to explore Islam and question the prejudiced views of the media and politicians.

Because such a message is of great importance in terms of retracting the misconceptions of Islam, we have started the process of collecting the responses of independent thinkers across the world to pass it over to the office of Supreme Leader.

If you wish to be among those who would want to answer and comment on this historic message, not just as a scholar but as a parent and a conscious human being, please write us a letter and address it directly to the Supreme Leader expressing your opinion.
More bad news on the freedom of expression front, the Washington Post reports:

**Former CIA officer Jeffrey Sterling convicted in leak case**
A former CIA officer involved in a highly secretive operation to give faulty nuclear plans to Iran was convicted Monday of giving classified information about his work to a New York Times reporter and author. Jeffrey Sterling, 47, was convicted of nine counts of unauthorized disclosure of national defense information and other related charges for leaking materials that prosecutors said put lives at risk and compromised one of the US government’s few mechanisms to deter Iran’s nuclear aspirations.”

Wikileaks also issued a release denouncing Google for collaborating with government requests for info on their staffers – and then keeping that collaboration secret.

**THE GOOD NEWS: SYRIZA WINS IN GREECE**
I met their leader at a conference some years back at the CUNY Graduate Center. Impressive! One of the few major wins against the shameful politics of Austerity.

**BBC: US TALK SHOW PIONEER FRANKLIN DIES**
Joe Franklin, who was a New York TV host for 43 years and is credited by some as having invented the talk show format, dies at the age of 88. Read more:
   http://www.bbc.co.uk/news/entertainment-arts-30972694
I interviewed Joe for the film I made about TV sex pioneer Ugly George. I was seeking to show the hypocrisy in the TV world that condemned him and then imitated him. My film is called Boob Tube.
FEBRUARY
PREPARING FOR MY BIG PARTY

FEBRUARY 6: ANOTHER CANCER SCENE ON TV

This time it’s on the show Scandal where a Supreme Court Justice is shown in a chemo infusion session, not unlike the ones I am having. Maybe the inspiration is the real Supreme: Ruth Bader Ginsberg, who it is said to have beaten pancreatic cancer.

FEBRUARY 9: CHEMO NUMBER 10

My chemo appointments are now on. Being infused with chemo seems to be all that I do. This week, there was no movement in my cancer marker but the doctor treated that news positively saying I am still at 94, a sign of stability.

She doubled my Ambien dose so I am sleeping better. Less pain all around although as it gets bleaker outside, I have a harder time fighting depression, although I am being positive.

I have finished my Greatest Hits album as a gift for the people who have stood by me, and my party next week looks like it will be well attended, unless there is a major storm.

All the news focus is on NBC anchor Brian Williams who is being accused of embellishing the news about an experience he had in Iraq. Of course there is no coverage of the pathetic one-
sided coverage of the world in which he was a minor player, before he became a public one.

And, then there was the death of 60 Minutes’ Bob Simon, and a few days later, David Carr, brilliant media correspondent of the New York Times, who died of lung cancer and a heart attack just after hosting a panel discussion with Ed Snowden, Glenn Greenwald and filmmaker Laura Poitras. He tragically collapsed in his office. My friend Cat Watters has been trying to get me on a cannabis regimen. I thought it was for pains I don’t seem to have, but not true. Here’s what she sent:

**Watch as the active ingredient in marijuana, THC, kills cancer cells**

Since 1974 studies have shown that cannabis has anti-tumor effects. The results of the 1974 study, reported in an Aug. 18, 1974, Washington Post newspaper feature, were that cannabis’s component, THC, “slowed the growth of lung cancers, breast cancers and a virus-induced leukemia in laboratory mice, and prolonged their lives by as much as 36 percent.” In 1975 an article in the Journal of the National cancer institute titled *Antineoplastic Activity of Cannabinoids*, they reported that “Lewis lung adenocarcinoma growth was retarded by the oral administration of tetrahydrocannabinol (THC) and cannabinol (CBD). Mice treated for 20 consecutive days with THC and CBD had reduced primary tumor size.”

In 1998, a research team at Madrid’s Complutense University led by Dr. Manuel Guzman discovered that THC can selectively induce programmed cell death in brain tumor cells without negatively impacting surrounding healthy cells. They reported in the March 2002 issue of *Nature Medicine* they had destroyed incurable brain cancer tumors in rats by injecting them with THC. And
in 2007 even Harvard Researchers found that compounds in cannabis cut the growth of lung cancer. There is also an organization called The SETH Group that showed compounds in cannabis can stop the growth of human glioblastoma multiforma (GBM) brain cancer cells. The SETH Group says “No chemotherapy can match this nontoxic anti-cancer action.” Even last year in 2012 a pair of scientists at California Pacific Medical Center in San Francisco found THC stops metastasis in many kinds of aggressive cancer. - See more at: http://www.cureyourown cancer.org/lincolns-story-why-cyoc-started

FEBRUARY 16: POET LAUREATE DIES OF PanCREATIC CANCER

NPR tells us that Philip Levine revealed the poetry in the lives of working people – and especially the people and places of his youth – in the auto factories, while Rebecca Curson, of The Observer, published one of his poems – What Work Is – in an article headed, Philip Levine, Poet of the Working Class, Has Died:

What Work Is
We stand in the rain in a long line
waiting at Ford Highland Park. For work.
You know what work is – if you’re
old enough to read this you know what
work is, although you may not do it.
Forget you. This is about waiting,
shifting from one foot to another.
Feeling the light rain falling like mist
into your hair, blurring your vision
until you think you see your own brother
ahead of you, maybe ten places.
You rub your glasses with your fingers, and of course it’s someone else’s brother, narrower across the shoulders than yours but with the same sad slouch, the grin that does not hide the stubbornness, the sad refusal to give in to rain, to the hours of wasted waiting, to the knowledge that somewhere ahead a man is waiting who will say, “No, we’re not hiring today,” for any reason he wants. You love your brother, now suddenly you can hardly stand the love flooding you for your brother, who’s not beside you or behind or ahead because he’s home trying to sleep off a miserable night shift at Cadillac so he can get up before noon to study his German. Works eight hours a night so he can sing Wagner, the opera you hate most, the worst music ever invented. How long has it been since you told him you loved him, held his wide shoulders, opened your eyes wide and said those words, and maybe kissed his cheek? You’ve never done something so simple, so obvious, not because you’re too young or too dumb, not because you’re jealous or even mean or incapable of crying in the presence of another man, no, just because you don’t know what work is.
In today’s society, we are put on edge any time we hear a word with any sort of gravity. Cancer is one of those words. Television shows are breaking that cancer taboo, paving the way of finally discussing an issue that affected about 1.6 million people in 2011, according to the American Cancer Society. Shows have long written in cancer characters but it wasn’t until recently that they were main characters. Depending on the show, characters have battled with hearing the news, telling their family and friends, and everything from chemo to death.

Here’s a list of shows that have successfully bridged the gap between dealing with weighty issues and commercial success.

1. **Breaking Bad**: Walter White is a normal high school chemistry teacher diagnosed with stage III lung cancer on the first episode. He decides to keep it from his pregnant wife and son so he doesn’t worry them. He makes the life-changing decision to get into business with a former student and make meth.

   This past Sunday, the show finished its fourth season to a whopping 1.9 million viewers.

   *Breaking Bad* has won countless awards including the Emmy Award for Outstanding Lead Actor in a Drama Series to Bryan Cranston three years in a row.

   **Success:** Very high.

2. **The Big C**: Cathy Jamison, also a high school teacher, is diagnosed with stage IV melanoma. Along with Walter White, she keeps it from her family and decides to dabble on the wilder
side of things. She starts off with buying an expensive car, having an affair, and kicking her husband out of the house. It was nominated for several categories in this year’s Emmy Awards and Laura Linney won Best Actress at the Golden Globes.

_The Big C_ was renewed for a third season in September.

**Success:** The show drew the largest audience in eight years for its season one premiere for Showtime.

3. **Sex in the City:** Samantha Jones, one of the fabulous New York women from HBO’s hit series, was diagnosed with breast cancer in the show’s final season. She referred to her cancer several times but it was never really discussed between her and the girls other than the outrageous wigs she’d find.

It wasn’t until she spoke to a room full of cancer survivors that she showed her true colors on the subject, leading every woman to stand up and throw off their wigs.

_Sex in the City_ ran for six seasons. Along the way, the show was adapted into two movies, a book series entitled “The Carrie Diaries,” and is now developing a CW prequel series.

**Success:** High.

4. **Grey’s Anatomy:** Izzie Stevens, the model turned surgeon, was diagnosed with stage IV metastatic melanoma in the fifth season. She’s given a 5 percent survival chance and goes through a never-ending amount of treatment. Stevens was written off the show after miraculously living through her cancer that had taken over her liver, skin, and brain.

_Grey’s Anatomy_ is one of the longest-running hospital shows on basic television since the times of “ER.”

The show is barely starting its eighth season this year and Patrick Dempsey’s last season with the show.

With each of these shows, a different depiction of cancer is given. The scripts show the serious sides of cancer with added drama and action, but each also brings a light-hearted comedy to the mix. The shows are so successful because they bring life to something that affects many households and families. Cancer is finally stepping out of its dark corner and into the light with television and movie roles.

Even as I piece together this topic of cancer, I have noticed a proliferation of personal story-telling of cancer experiences. It seems to parallel the daily output of obituaries that carries the C Word as the cause of death. It is relentless, despite the so-called War on Cancer, although I have observed that people, including cancer victims, are living longer.

Perhaps the best written of these pieces appeared this month in the New York Times, the memoir and observations of a medical doctor who writes on health issues with alacrity, charm, and humor. Dr. Oliver Sachs, who has done so much to edify us on a wide range of issues, paradoxes, and miraculous breakthroughs now tells us his luck has run out;

A month ago, I felt that I was in good health, even robust health. At 81, I still swim a mile a day. But my luck has run out – a few weeks ago I learned that I have multiple metastases in the liver.

Nine years ago it was discovered that I had a rare tumor of the eye, an ocular melanoma. Although the radiation and lasering to remove the tumor ultimately left me blind in that eye, only in very rare cases do such tumors metastasize. I am among the unlucky 2 percent.

I feel grateful that I have been granted nine years of good
health and productivity since the original diagnosis, but now I am face to face with dying. The cancer occupies a third of my liver, and though its advance may be slowed, this particular sort of cancer cannot be halted .

I have been increasingly conscious, for the last 10 years or so, of deaths among my contemporaries. My generation is on the way out, and each death I have felt as an abruption, a tearing away of part of myself. There will be no one like us when we are gone, but then there is no one like anyone else, ever.

When people die, they cannot be replaced. They leave holes that cannot be filled, for it is the fate – the genetic and neural fate – of every human being to be a unique individual, to find his own path, to live his own life, to die his own death.

I cannot pretend I am without fear. But my predominant feeling is one of gratitude. I have loved and been loved; I have been given much and I have given something in return; I have read and traveled and thought and written.

I wish I could write like him, and think like that, too, but I can honor his contribution. I know it makes my insights pale in comparison, but they represent a view that should be heard. Viva Oliver Sacks.

**FEBRUARY 19: IT’S MY PARTY**

Thanks to the efforts of my friends Christine Douna and Ham Fish, we had a party at my newly renovated and painted loft. I called it a rebirth party but most people thought it was my birthday party, even some who know I was born in June. It was great to be surrounded by at least 50 friends who vowed they won’t let me suffer alone. That felt good. I spoke, going on as I tend to do, thanking people by name and expressing my appre-
ciation. It was a warm gathering of my community, the sort of event that shows the solidarity that binds us. As it turns out, I have received copies of my new book, *When South Africa Called, We Answered*, about the solidarity movement I was part of in the fight against apartheid. And then, my *Greatest Hits* album was done, and everyone who came got one. I hope they will like it.

**LBN Investigates Cancer**

1. Several factors increase the risk of cancer (officially known as malignant neoplasm), including pollutants, tobacco use, certain infections, radiation, obesity, and lack of physical exercise.
2. An estimated 5 to 10% of cancers are entirely hereditary. Most cancers develop through a combination of hereditary and environmental factors.
3. Smoking causes an estimated 90% of lung cancer. Tobacco has killed 50 million people in the last decade. If trends continue, a billion people will die from tobacco use and exposure this century, which equates to one person every six seconds.
4. Those who sleep less than six hours a night are more likely to develop colon cancer than those who sleep more.
5. Cancer has two main characteristics: abnormal cell growth and the ability to spread to other parts of the body (metastasis).
6. In 2008, there were an estimated 12,667,500 new cases of cancer worldwide. Eastern Asia had the most new cases (3,720,000) and Micronesia the fewest (700). North America had approximately 1,603,900 new cases.
7. One in eight deaths in the world are due to cancer. Cancer causes more deaths than AIDS, tuberculosis, and malaria combined.
8. Cancer is the leading cause of death in developed countries and the second leading cause of death in developing countries, after heart disease. Globally, heart disease is the number one killer. In
2008, 7.6 million people died of cancer globally, which equates to 21,000 cancer deaths a day. By 2030, 21.4 million new cancer cases are expected to occur globally with 13.2 million cancer deaths.

10. In 2006, a virus called xenotropic murine leukemia virus-related virus (XMRV) was discovered in prostate cells, leading scientists to believe the virus may play a role in causing aggressive prostate cancer.

11. Nitrites are chemical additives used to preserve and add flavoring to most lunch meats, including cold cuts and hot dogs. Once in the body, they react with body chemicals and turn into cancer-causing carcinogens. Americans eat more than 20 billion hot dogs per year.

12. The most common cancer in women globally is breast cancer, with an estimated 1.4 million new cases diagnosed in 2008. Breast cancer is also the leading cause of cancer death in women worldwide, with an estimated 458,400 deaths a year.

13. Approximately 15% of all cancers worldwide are due to infections. Undeveloped countries have a higher rate of cancers due to infection (26%) than in developed countries (8%). The microbes most responsible for cancer are the bacterium Helicobacter pylori (gastric cancer), HPV (cervical and other cancers), and Hepatitis B and C (liver cancer).

14. Researchers believe that more than half of all cancers and cancer deaths are potentially preventable.

15. Lung, prostate, and stomach cancers are the most commonly diagnosed cancers in men. Breast, cervix, and colorectal cancers are the most commonly diagnosed cancers in women.

**FEBRUARY 22: ANNIE MOODY, 74**

When you are writing about what may be the last days of your own life, you become more attentive to the obituaries and no-
tices of friends and acquaintances who have died. My eyes were
drawn to a death notice and tribute to a friend I met in the civil
inghts movement, Annie Moody, who wrote a moving account
of growing up in Mississippi. Her book was reviewed in the New
York Times by the late Senator Ted Kennedy. It’s a very moving
account by a movement hero who later lost her way and suf-
fered from a mental breakdown. Before that happened, she was
interviewed for an oral history project at Jackson State Univer-
sity. Anne Spencer asked her:

Do you think that most people who worked in the civil rights
movement, in Core, in SNCC suffered, talked about it the people
who were off licking their wounds and don’t come back to make
this next generation aware?”

Moody: I crawl into a corner like a cat, and I lick my wounds,
and I heal myself. You can’t do it in the midst of all the turbu-
ulence. You have to step away and get a different perspective on
things. Sometimes you are too closely involved to actually see
it. You are too closely involved; You aren’t even aware of your
feelings. Sometimes you don’t even know if you are hurting and
when you step outside, when you take a step or so backwards,
and then you can look, you can see.

Last night I talked about how the movement died. The move-
ment died because it failed to come up with creative new tech-
niques of protest.

I’m not talking about the structure of the movement as a
whole, not just an organization. I’m not talking about an organi-
zation, because the movement to me goes beyond organization.
But we failed to come up with creative new techniques of protest.
I mean people, when all the novelty had gone out of this, the
sensitive, creative people, regardless to how dedicated you are,
regardless to how . . . You would crack up in a situation like that.
You see what I’m saying?

**FEBRUARY 25: WHAT GOES DOWN CAN ALSO GO UP**

For months now, I have been reporting on the fall in my cancer blood marker, a stream of good news that had my doctor pleased and gave me certain bragging rights. It was down from over 800 to 94. That 94 came back a week later, a sign of “stability” I was told.

In the back of my head was an earlier warning that you can’t take anything for granted in this disease. I had read about successful operations that later failed. I have been warned that you don’t beat this cancer for good but will need continuing medication. There’s a reason doctors call it the “beast.”

This week, I learned that my cancer marker went up, from 94 to 110, a small rise that she didn’t take seriously, but the same time noted that my blood levels were elevated, suggesting a possible infection. She has moved up my next CT scan to next week. Right now, whatever it is, is “vague” to her, but alarming to me. I am chemo plus day one and tired from the chemo pump I am wearing. Fortunately, I take it off tomorrow. Still having constipation. Yuk.

The only good news: Spring is coming.

**FATHER TED**

Just as February bid adieu, even as the cold stayed with us, the country lost a few more giants, Dori Maynard, the daughter of the great journalist Bob Maynard, unexpectedly passed. I got to know her dad at the Nieman Foundation and then admired her journalistic training center in Oakland, CA, where her father became so well known as a reporter and editor par excellence.
You would suspect that I would follow the lives and deaths of colleagues, but there was another casualty at month’s end who I met by chance. Father Rev. Theodore Hesburgh, Ex-President of University of Notre Dame. He died at 97. He had been the president of Notre Dame and more than a major figure in the civil rights fight and outspoken civic leader.

As fate had it, I was invited to speak at Notre Dame on human rights and, having never been there, I arranged to go on a football weekend when the school explodes into an amazing athletic ritual. Notre Dame is known as a home of college football, the home of the “Fighting Irish,” and the center of the Catholic University World.

Hesburgh was a priest who became a larger than life celebrity, as the New York Times explained:

Father Hesburgh held more than a dozen White House appointments under six presidents. For years, he was chairman of the United States Commission on Civil Rights and of the Select Commission on Immigration and Refugee Policy.

Yet he was never awed by the power of the Oval Office. He tangled with the Nixon administration over busing, civil rights and other issues, skirmishes that led to his resignation as chairman of the Civil Rights Commission. He also fought a White House plan to use federal troops to put down campus demonstrations and persuaded the president to drop the idea.

I walked through a library named after him, and casually asked if he was still alive. It turned out he was very much alive, in his 90’s, retired but consigned to a full library floor named after him and his special collection.

I asked to meet him. I guess he didn’t have many visitors and
I was welcomed to an audience on “his” tenth floor. He didn’t know me from a hole in the wall but he was incredibly hospitable and welcomed me into his lair. He was sitting alone on a leather chair, drinking scotch and smoking, believe it or not, Cuban cigars.

He was a character, down to earth, especially when I told him I had been a civil rights activist who knew of his exploits and saluted him from the 1960’s. Not sure how many Jewish fans he had from the Bronx.

Anyway, he told me how President Eisenhower asked him to head a civil rights commission. In those days, there was no consensus or momentum driving the struggle. Hesburgh knew about all the discord and feared that any meeting would break down into discord. He came up with a brilliant idea. He invited the Commissioners to get away from phones and pols to a fishing vacation spot in the obscure north of Minnesota where they would all be able to relax and come up with a plan, despite their differences. And they did. Father Ted knew that the setting was important and he engineered an environment that could start the ball rolling.

One more thing: I told him about my work to change our media system through Mediachannel.org. He agreed that the media was a mess and offered to help. I asked him if he would write a letter of endorsement and he agreed to write and sign one. And he did. We didn’t exploit it very effectively, but it was great to have him among our supporters.
MARCH 2015
THE IDES OF MARCH

MARCH 1: MORE TIRED, LESS ENTHUSIASTIC

This has been some battle, not just with cancer but with a winter that won’t quit: unseasonably cold weather and tons of snow. Sections of the country have been paralyzed and it has affected national morale. In one sense, it’s been a good time to be inside and I have spent the time organizing my archives, getting my apartment renovated and doing what writing I can. The chemo has kept me tired and after a long period of seeming progress, I am not sure what progress if any I am making.

My most recent scan on the cinco de Mayo should tell part of the story or help explain why my cancer marker seems to be going up. I do feel more tired, and less enthusiastic.

MARCH 10: STAY POSITIVE

Hi Team Schechter,

As you all know, Danny went for surveillance scans on March 5 with puzzling findings. There seems to be evidence of spread of disease; however; his cancer marker is only slightly elevated despite these findings. One would expect a much higher tumor marker value in the setting of these recent findings. Also, Dan-
ny’s WBCs are elevated signifying an infection, although he is not experiencing any symptoms to correlate.

Dr. Ocean is perplexed by recent CT results and elevated WBCs – she will be presenting Danny’s case at tumor board tomorrow evening – she believes there is a possibility that this could be an infectious process rather than a spread of disease. Dr. Ocean prescribed Danny an antibiotic, Levaquin 500 mg daily for 10 days, and plans to rescan in two weeks’ time to see if there is any resolution of the masses seen on CT scan results.

If this does prove to be metastatic in nature, Dr. Ocean will consider the use of Fulfixirinox rather than the Folfox. This is what Danny originally had for his first treatment but the dose was modified secondary to his neuropenic fever and abscess. However, now he has more help and is at his own home so it is very reasonable to consider this as a possibility. And then there is always second and third line therapies to consider.

Danny, stay positive and fight this infection. Drink plenty of fluid and continue to eat healthy. Also be sure to rest. And again, stay positive!

Jessica L. Zambelli, MPA-C
Director, Clinical Services
Private Health Management

MARCH 13: DAUGHTER SARAH TAKES OVER
That was the last entry in Danny’s diary. The end of his story is told by his daughter Sarah Debs Schechter in the following chapter.
SEVEN DAYS IN MARCH
SARAH SCHECHTER

MY DAD WANTED PEOPLE TO UNDERSTAND

Sarah Debs Schechter here. Daughter of Danny Schechter, The News Dissector. Named after Eugene V. Debs and Students for a Democratic Society (my initials were a point of pride for both of us). I hate that I am writing this. I hate that I have to write this. I hate that my father isn’t writing the last chapter of this book. A chapter that should have been called “Remission” or something more clever, given my dad’s way with words. (“The Remission Condition”? “Remission Ignition”? “Cancer’s Submission to Remission?” Who knows?). I hate that he isn’t here to pitch a better title.

Most of all, I hate cancer.

I hope people read this book. Not just because my dad was brilliant and funny and always had an incredibly quick mind that was able to process information and package it for consumption in a highly original and insightful way. I hope people also read this because writing was his best way of connecting to people and he wanted to connect. He wanted people to understand his fears, his experiences, and his perspective. He wanted friends to understand why he didn’t always call them back during these
last months, he wanted his family to know how hard he was trying to live, and he wanted everyone to know what it felt like to go through this. He was a reporter until the very end. He even insisted on taking his computer and several clippings to hospital with him that final time because he had two articles to finish.

I always knew my dad had a lot of friends. I mean, A. LOT. OF. FRIENDS. As far back as I could remember he was always introducing me to people. They were every age, every race, spoke with every type of accent. Some were rich, some were poor: it didn’t matter to him because he loved people. Honestly, a few were even certifiably crazy, but he really just saw the best in people and hoped people saw the best in him.

I don’t think I fully understood how many of these friends were touched by him until after he died. I can’t count the number of people who have reached out to me in person, over the phone, by text, or email to tell me stories I had never heard before about how he helped them, encouraged them, and believed in them. The ripples that he made in the world through his life and work are enormous and reach every corner of the world. He was always trying to get me to meet with some person he had met, always hoping I could help them or give them advice. If I am totally honest, and I should be because he has been in the preceding pages, I didn’t always want to do it. “Daaaaddd, really?? WHO is this person anyway? WHY do I have to meet them?” But he did it because he was a “connector.” The type of person who saw the world as an interconnected place, and why shouldn’t I help them? He was right. Every time I did it, it felt great. And that’s what he did every day. I even found emails from him trying to get his last intern Magdalena into fashion shows while he battled cancer. And he did get her in. Because he could. And why shouldn’t we help people if we can? He was
shameless about asking, but even more shameless about giving. I hope people realize that this book is his final gift.

**THE ONLY ORGAN YOU CAN THINK ABOUT**

Tony Sutton asked me to write about the events that happened after my dad stopped writing this book, but I want to back up first. I first heard about his health problems at the beginning of 2014. I still don’t know if those problems (bubbles in his urine) were related to his eventual cancer diagnosis, but they were the first sign of trouble. The first sign that he might be destructible after all. This didn’t seem possible. Early in September, as I was finishing my first movie as a producer in London, he started having more tests done. He called me when the word “pancreas” first entered the conversation.

Funny how an organ you never think about could suddenly be the only organ you can think about. But early on, it seemed like we caught it in time. “Maybe there is a growth. I’m having a test.” Later, “It looks like it is a growth, I’m having another test.” Then, “It’s cancer, and I think they’re going to remove my pancreas.” I look back on how worried we were about facing that surgery and now I can’t even believe THAT is what we were worried about! I wish that had been the process that unfolded.

Finally, on my 38th birthday, he got the full diagnosis. It was, without a doubt, the single worst birthday present I ever could have got. Thank god for our Guardian Angel, Vicki Gordon (often referred to in these pages as VG). She swooped in and helped in so many ways. In those first few days, I googled “stage 4 pancreatic cancer.” It was terrifying. I read that only 20 percent of patients live 12 months. But we kept hearing about how it was in the tail, which was better, and the spots that made it “stage 4” were so small on his lung and it wasn’t even in his liver. My
dad didn’t want to know the odds, but I felt I had to know. I think he might have known, too, but refused to accept them as a fact. Ever the journalist, he was looking for a second source to confirm it and, I think, subconsciously he thought he was the second source. So the only way to fact check it was to live through it.

Right after he was diagnosed, I was crying at my friend Lorene’s house, and it felt like I was already in mourning. The next day I was crying in my car, listening to Bruce Springsteen (my dad loved Bruce) and suddenly I realized, “He’s not dead: I can call him right now.” That was one of two distinct moments of deep relief I felt throughout this ordeal. So I called him. And he didn’t answer. And his voicemail was full. I frantically kept on calling. Finally he picked up. “Where were you? Are you okay???? I’ve been trying to reach you!” I said, trying (and failing) to sound calm. He told me he was in the subway, that he had just been to Brooklyn to speak at a panel about his latest book about South Africa. I was so relieved. This was the MOST normal conversation we had had in weeks. He was busy running around. He was being himself. This allowed me to cultivate some denial – he is still doing his thing; this will be fine.

I flew in and saw him for the first time in early October and I was so shocked and heartbroken to see how weak he was. I thought, “My dad is dying. He can’t beat this.” But those awful early days passed and, after a few horrible incidents, he bounced back. We got him the help he needed (in the form of more angels, this time the Jamaican family of Eren, Clair, and Saunie). There was an awful dehydration incident (these are sadly common from what I have been told about chemo) and then he really seemed to get better. This allowed me to reanimate that initial hope and denial.
The medical team Vicki got him was top notch. He was responding to treatment. He was weak, but he seemed to be getting better. He lost his hair, so I bought him hats. There were days when he needed help walking and getting dressed. These were terrible days because my dad had been a rocket ship of movement and energy my whole life. And two blocks did him in. It was hard to watch and hard to accept for both of us. I don’t think he had spent six months in a row without getting on an airplane or a train and going somewhere fascinating since he was in high school. He hadn’t spent six consecutive months in New York in forever. Of the many lousy, horrible things about all this, I am still mad that he didn’t make it to spring. That he suffered through the dark, cold, awful winter of 2014-2015 and didn’t get to feel the beautiful days of spring or the feeling of the sun warming his face.

By all accounts, he was responding really well. We all began to retreat into denial. I stopped calling him every day as his cancer markers continued to drop. We planned a trip for him to come to Los Angeles and stay with me for a while. Another huge regret I have is that we never got that. I appreciate that doctors have to remain hopeful and see the potential of recovery, but I do wish that, when the cancer markers stopped dropping, they had told us that he should come visit. I wanted him to sit in the sun and not worry about anything. I wanted him to be reminded of how good the life I had built for myself was, I wanted him to be reminded that he could rebuild his life once he was better and that he didn’t have to worry about me. And selfishly, I just wanted him to be with me.

CELL PHONE THAT BROKE MY HEART
This digital age is a strange one. A person’s death suddenly
means all their stuff is ownerless, all the things they spent a lifetime amassing. But their emails keep coming, and their cell phones keep ringing. When I got back to California after my dad died, I had his cell phone with me. What broke my heart (even more) was that his phone immediately remembered my wi-fi. It’s a minor detail, but it amazed me nonetheless. “Dad, you were here. You WERE actually here.” Why couldn’t he be here again? It wasn’t fair. But cancer isn’t fair.

Sorry for the digressions, but what I have found about grief is that it is not linear. It is not orderly. It doesn’t really make sense. Turning off his cellphone was one of the hardest things I had to do. It was a task I thought would mean nothing – just one thing off the check list, but I found myself bawling afterwards because it meant he really WASN’T coming back. Another extension of him ceased to be.

**END OF THE DENIAL**

Dad really made the best of that cold winter. He loved having visitors, he loved hanging out with Saunie and Eren and Magdelena. He loved seeing me and his brother Bill and his sister-in-law Sandy, who came with an amazing and appreciated regularity. I wish I had flown back more, but that denial (fueled by his dropping cancer markers) made me think we had more time. Also, as anyone who knew him would agree, it also just seemed impossible to think anything could truly stop him.

The denial started to crack at the beginning of March when we (Vicki, Bill and I) found out the chemo wasn’t really working anymore. His blood tests were puzzling. His markers were starting to inch up. But the doctors started talking about secondary treatments. There were still options being discussed. There were expensive DNA tests to administer. Plans to consider. Clinical
trials. DIFFERENT clinical trials to choose between. Multiple options to consider. This felt like another bump in the road. He hadn’t been told, he’d just given a ridiculously complicated chart that he asked every visitor to try to make sense of. I told him I didn’t want to read it because I wouldn’t be able to understand it. Truthfully, it had been explained to me. We were just waiting for the doctors to agree on a recommendation before we told him. Because, by this point, he was really scared. He couldn’t sleep and he became very lonely at night. Saunie and Eren knew this and said he should have a night nurse. Danny’s brother Bill asked him if he needed a night nurse. My dad said no. We shouldn’t have listened. Another lesson I learned in March: ALWAYS LISTEN TO YOUR HOME HEALTH CARE WORKERS. They spend the most time with the patient and they have seen every stage before.

MARCH 13: TWO WEEKS TOGETHER

I flew in to spend two weeks with him on Friday, March 13th. There was little indication this would be my last visit. I was in town to shoot a pilot and thought it would be great to stay with him for at least two weeks. Really be able to hang out. The night I arrived he was happy to see me. I learned later that he had been excited all week. I wish I had known how much he was looking forward to my visits. I would have come earlier. More often. These are the sorts of circular regrets that pop up on a semi-regular basis when I think about it. Regret is an unfortunate side effect of grief.

That Friday night was great. His friend came over, a brilliant professor on her way to do charity work overseas. She was impressive. My dad was impressive. We just talked. It felt so normal. It was the last normal night we ever had together.
He went to sleep. Chemo is a bitch on the body and he was easily wiped out. I had stayed up watching TV and he came out to sit with me. I was surprised because I helped him take his pills, including Oxycodone. That’s strong stuff, but clearly his pain was stronger.

I turned off the TV and we sat in the dark talking. It was the last great conversation we had. Not the last important one. But the last one that resembled the talks we had had all my life. The kind of talks where we subtly dance around each other as we circled in on the truth, on our feelings, our thoughts, our theories.

I remember the yellow glow from the street below casting subtle shadows across his face. He told me he was having more pain at night, he was scared about the latest test results, he couldn’t get comfortable lying down and moved back and forth from the bed to the couch. I said I would get him a better chair for his bedside.

He said, “I don’t know how much time I have left.”

“Dad, no one knows. My friend Joy’s mom was crossing the street and got hit by a truck out of nowhere. None of us know how much time we have. We have to focus on what we do have.”

He said, “Yeah, I guess you’re right. And I guess 72 years is a long time.”

He paused. We watched the shadows play on the ceiling. “I certainly packed a lot in, didn’t I?”

We laughed.

He did. He certainly did.

**MARCH 14: A CRASH IN THE NIGHT**

The next morning, Saturday, I went to work. He called me, asked when I was coming home. I wished I had never left that morning, but again regret seems to be the white noise in the back-
ground when I force myself to really think about those days.

He was clearly tired when I got home. Honestly, he didn’t look good. I thought he had gained a lot of weight. Now I know it was fluid filling up his organs. I feel guilty and ashamed writing this but my father’s honesty in the preceding pages forces me on.

He went to sleep. I stayed up for a while, he came out once or twice, but I finally tucked him in, told him he had to get rest. I went to bed.

In the middle of the night I was startled awake by a loud crash. My dog started barking. We ran into dad’s room and he was lying on the floor. He had fallen trying to get back into his bed. He seemed so out of it. I thought he fell because he had taken oxy and a sleeping pill and he was drugged. For the record, he really didn’t abuse those pills, or alcohol for that matter. He was a man of moderation in that area (work, travel, food, they were different matters).

I was so groggy myself, having come in from LA and having worked in the cold all day. I helped him into bed. He wanted water. I got it for him. I went back to bed. I don’t know why I didn’t just lie down in his bed. It might have been too hard for me to see him like this and not be able to go into the next room and pretend it wasn’t so bad.

He woke up a lot that night. He almost crashed into his TV at one point. He kept wanting to go to the couch, then back to his bed. Let it be known I am NOT great at being super tired. I am not good at being cheerful when woken up. I was very patient, but I did keep pleading with him to just stay in bed. “Please Dad. PLLLEEASE. Just try to get some sleep.”

It was a rough night.
I went to work on Sunday. Again, I don’t know why I did that. The irony is that I have never met anyone in my life who works as hard as my father. Clearly the apple didn’t fall too far from the tree. I told his nurses he had had a bad night. I got him a protein shake and I assumed he would sleep most of the day. He slept some.

It was freezing cold in New York and we were shooting in a subway tunnel. I went in search of hand warmers at Duane Reade and heard them playing “Cat's Cradle” over the loudspeaker. It broke my heart. I got the message and headed home. I called him and asked him what he wanted to eat. He asked for Boston Market – turkey and spinach. That was the last meal he ever ate. And he barely ate any of it. He really had stopped eating because his stomach hurt. Can you believe it? That was his last meal. And he couldn’t eat it. I went and got him apple sauce. He liked that. We talked about what kind of recliner chair he wanted and I showed him options online. Something easy for him to get in and out of.

We laid in bed and watched a documentary, but we couldn’t focus on it and turned it off to watch the finale of “The Jinx.” It was riveting. Exceptional TV. We talked about it but he was clearly tired, because if he hadn’t been so sick, he would have had so much to say. It was hard to watch a man who always had so much to say struggle to find focus.

He asked for a Diet Coke but I told him he shouldn’t have caffeine this late. I went out and got him a ginger ale instead. And I got more apple sauce.

He tried to sleep. It was so much worse than the night before. He was up every hour of the night. He was in pain. He could not get comfortable. Neither of us had slept the night before and
both of us were at the edge of whatever sanity we had left. He fell several times. I kept asking him to stay in bed, but he couldn’t. At one point he fell on the floor of the living room and I tried to help him up but I wasn’t strong enough. We tried and tried. He said I should get out the dolly he had bought to move boxes, so he could wheel himself back to bed. God, he was so weak. I wouldn’t let him do that because he might hurt himself more, and because it just seemed insane.

I moved pillows and a blanket onto the floor of the living room and asked him to try to sleep. He was just so focused on the idea that if he was in bed, the couch would be more comfortable, and vice versa. He was like that until he died. He was always a body in motion: his spirit couldn’t settle, ever. At one point he said he thought he should go to the hospital. I asked him to wait until morning. I’m not sure this was the right decision. He never wanted to go to the hospital so the fact that he did meant he was REALLY in pain. BUT on the other hand, given how horrifically bad the ER is/was, I’m doubtful he would have been any happier.

All night he kept calling me to get him things – water, ginger ale, apple sauce. It struck me as the first of several moments in the days leading to his death when I became the parent and he was the child. Feeding my father apple sauce, thinking about how he fed me when I was a child struck me as deeply meaningful. Because this act – spoon to mouth – was a part of the language of parent and child, it was comforting. Yet it was like a photographic negative – the opposite of how it was supposed to look. The opposite of my muscle memory, like walking backwards.
MARCH 16: WIND ON HIS FACE

This morning Saunie came and confirmed that dad was really poorly. We called for Jessica to come over. While waiting for her to arrive I went out to get him the recliner he wanted.

I was buying him a chair. He was dead three days later.

Jessica agreed he should go to the hospital. She thought he likely had an infection. I asked her if this could be the end. She said she really didn’t think so. He had been sicker than this in the fall and bounced back. His levels weren’t that bad. Saunie gave me a look that, in retrospect, I understand to mean, “He looks like he’s dying to me.” But who wants to interpret that look? Who wants to think it could be the end? We gathered his things. We argued over which pair of shoes he should wear. The ones that were easiest to get on started to hurt his feet after a while. But he was so weak we went with easy. He wanted his computer because he still had two articles to finish.

“Saunie, get those two newspaper clippings on my desk! I need them!” he said as we walked to the elevator.

We waited for the Uber taxi in front of his door. The door I had been coming home to for thirty years. He was so weak and cold.

It was the last time he ever stood in front of that door. It was the last time he ever wore shoes.

It was the last time he ever felt wind on his face.

Or the sun.

He tried to befriend the driver on the way to the hospital. He always did that. He always wanted to know where people were from. He wanted to talk about the political situation in their home country or their neighborhood. He always wanted to know about people.

That was the last car ride he ever took.
27 HOURS IN THE EMERGENCY ROOM

We got to the Cornell Weil ER and it was horrible. A truly horrendous experience. As Saunie said, “I wouldn’t take a dead rat to this hospital.” He spent 27 hours waiting for a bed. TWENTY SEVEN HOURS IN THE ER. We were lucky that he wasn’t under the fluorescent lights in the hallway where beds were jammed next to each other, so the whole floor looked like Los Angeles at rush hour. But he did share a room with a guy who was off his meds so I am not suggesting the semi-private room was somehow luxurious. He still wasn’t sleeping well. There was more apple sauce, more complaining that he had to pee. More wanting to go to the chair, then bed, then the chair.

At one he asked for his father. I knew deep down this was a very bad sign. My mind flashed back to my grandfather calling out for his mother shortly before he died. His doctor visited and I asked again, “Is he dying?” She said that she thought it was an infection, but he would pull through. She was clear that the cancer was serious and this was bad, but no one wanted to believe he was dying.

When he asked for his father, I asked my dad, “Why were you thinking about your father?”

“I always do.”

I whispered softly back to him, “I guess I always will, too.” But I don’t think he heard me.

MARCH 17: BACK TO THE BRONX

I was insane enough to go to work on Tuesday for a little while. But even I, my father’s daughter, couldn’t handle it, so I left. The people at the ER would only tell me he was “stable.” I can’t imagine how anyone who was in that ER for 24 hours could ever be described as stable. I think a part of me believed that if I kept
to the plan (the original plan was to go to work, then hang out with him at night), he would also stick to it and stay alive. What can I say? The terror of impending death makes for all sorts of rationalizations.

He was out of it. So weak. He talked about Jesse Jackson, about having to go to Detroit. But mainly about having to go the Bronx. Again, a part of me recognized these as REALLY BAD SIGNS. Talking about going home and his dad? NOT GOOD. But again, everyone seemed to think he would get better. He was fine on Friday. He had also earned “the yellow badge of courage,” a yellow bracelet warning that you are a “fall risk” because he kept trying to leave. I can’t blame him and am proud of him for that final award.

MARCH 18: “YOUR DAD LOOKS LIKE HE IS DYING”

Wednesday morning I got a call from the resident on the floor my dad had been transferred to. This was not a good call. This was a “your dad looks like he is dying to me and he may die today” call. I grabbed his favorite blanket and got in a cab and then dashed into the hospital. I called my uncle and aunt. Told them to hurry. Then I called my mom and asked her to fly to NYC TODAY because I would need her. I called Vicki Gordon. Then I remembered my dad’s list of emergency contacts so I called them. I don’t know why I did this. My uncle really didn’t understand why all these people showed up. They did because I called them, and I called them because I thought that’s what you are supposed to do. I don’t know why I thought that. It wasn’t the smartest move I made but it was fitting in a certain way because he was always surrounded by people.

Even though my dad had survived the circle of hell that was the ER, we were now in a different horrid place. He was sharing
his room with an old man who had obviously lost his mind. It was heartbreaking and I tried to have compassion for him but my dad was dying and he wouldn’t shut up. “WHERE IS MY CAT!!! SOMEONE STOLE MY CAT!!!” followed by “DOES SOMEONE WANT THIS CAT? I DON’T WANT IT!!!!” And then back again. I begged and pleaded for a private room. I offered money and gave them my credit card.

Our last important conversation happened on Wednesday when I said, “Dad. I love you.” And he said, “I love you, too.” I held his hand a lot. I got damp towels to cool his forehead.

My father spent his life questioning people. Questioning authority. Looking for the truth. Sometime on Wednesday he opened his eyes, must have been noon — clear blue eyes that looked so young, and asked me, “Am I dying?” This was by far the worst question I have ever been asked and certainly the hardest question he has ever asked (and he has asked a LOT OF TOUGH QUESTIONS). This is a man who asked Kissinger if he had any regrets. Yet I think we would both agree this was harder. I looked at him. Tears filled my eyes. I said, “Maybe.” I’m not sure if this was the right answer. Truthfully, there is no good answer to this except, “of course not!” But I couldn’t possibly lie to a man who devoted his life to truth.

Hospice people came to see me. I felt I was in a horrible, horrible TV movie. Then his doctor came and she was filled with HOPE. This could be an infection. This could also be leukemia, but a type that is treatable! Just need to wait on the blood test. I asked her what I had been asking everyone, Is he dying? She didn’t think so. This was such a deep relief to me that I called my mom and told her I wasn’t sure she needed to come now. We debated it, then figured, “Well, you bought the ticket, at least come see him.” That night I read all of *Topic of Cancer*. I cried
over how good it was, how honest. I cried to think he might not be writing a happy ending for it. I cried that the world could be losing someone as amazing as he was. As a quick aside, my dad has been trying to get me to read and watch all of his work since I was a kid. I didn’t always do it. I think it is a common child/parent dynamic. I’m sorry for that, too. Sometimes acknowledging his work felt like acknowledging the thing I resented as a kid – the thing that came first a lot.

**MARCH 19: HIS LAST SMILE**

By Thursday morning it was clear he was getting weaker, NOT better. I asked about the test results we were waiting for. The ones that will determine treatment and could make him better. Well, it turns out the hospital LOST THEM (again, I think of Sau- nie’s comment, “I wouldn’t take a dead rat to that hospital”). So they’d do them again.

He couldn’t really talk by Thursday. He was too consumed by the pain but he could hear everything. Especially because the hospital STILL hadn’t given him morphine (clearly we were all in denial), I told him I had read his book. He smiled. I told him how good it was. He really smiled. That may have been his last smile.

Finally, on a call at 11 am on Thursday, March 19, with his doctor, I asked yet again, “IS HE DYING?”

This time she said yes.

“He was fine on Friday.”

“No one knows how much time they have.”

My mom arrived. It was such a blessing to know that when I fell apart, which was inevitable, she would be there. I went down-stairs and demanded that if my dad was going to die, he at least deserved to die in a room where a man in a diaper wasn’t yelling
“YOU STOLE MY CAT!” They finally gave me a room. I ran back upstairs to give him the good news. He had been in this hospital before and bragged to me about this amazing room with a view of the river. It must have been noon then. I had been asking for over a day for them to drain the fluid in his belly because it was making him so uncomfortable. I ran up to tell everyone that I had got a private room and walked in on all these nurses talking about him as if he weren’t there. They wanted to take him to another room to drain him, but that meant that he would be alone. We didn’t want that. At this point my dad had taken off his clothes and was just under a sheet (another thing Saunie and Eren told me would happen). I told him about the room and he starting shaking his head, No. Not to bother. He had loved that room. That view. There were to be no more views for him.

At this point, he knew he was dying. I was the one still in denial. I held his hand and talked to him. My uncle did the same. Danny was clearly so uncomfortable. The doctors told us it could take days or weeks. My uncle went for a sandwich. I was holding Dad’s hand and talking to him. I told him how much I loved him, how it was okay to let go, how proud I was of him, how many people loved him, how amazing his life was. I just kept talking to him. Saunie had also told me (notice a theme here) that when people are really, really close to dying their eyes go back in their head and they sort of choke on their tongue. I kept talking to my dad. My mom was holding his other hand. They had been divorced forever but they were friends and, as my mom pointed out, it was probably a comfort to him to know someone would be taking care of me.

My dad’s eyes fluttered and Saunie screamed. I knew what that meant. I asked her to go get my uncle. I have no idea how long this went on. It could have been five minutes, it could have
been an hour. I just kept talking to him. “I love you. It’s okay. I love you. It’s okay.” A chant for the dying.

Of course, it wasn’t okay in the traditional sense of the word. It was the opposite of okay. My mom told me to keep talking to him – studies suggest that hearing is the last thing to shut off. So I held his hand and kept talking so he wouldn’t feel alone. When his tongue started to act funny I shut my eyes. But I kept holding his hand and talking. My friend Lorene, who had lost her father, gave me the advice, “You don’t have to look at all of it.” I was glad for that advice and I freely share it with whoever reads this.

I held his hand.
He left.
His body was still there but he was GONE.

My dad was always in a hurry his whole life so I guess it’s pretty fitting that he ended up dying so quickly.

I left the room. I sank to the floor sobbing. I felt as if I had been punched. I heard everyone else crying. The only comfort was that he didn’t go through it alone.

I think it was about 3 pm. I left the hospital. The hospital I had got to know intimately in the last few days. I was impressed with myself that I knew how to walk through the labyrinthine lobby and exactly which elevator to go to, and now I would never need to come here again. I don’t think I could ever go back.

My uncle took my aunt to see his body and found my dad’s doctor, Dr. Ocean, crying at the foot of the bed. She really did love him. She really didn’t want him to die. She may have wanted him to live so much that it took her a while to admit what was really happening. I get that.

Denial is a side effect of dying, too.
MARCH 20-26: THE BATTERY THAT KEPT THE ENTIRE CITY GOING

The next week was a blur. Two of my best friends flew in to help me. I will forever be grateful to Heather and Sandy. A third (Lear-ka) joined us. I heard from so many people whose lives he had affected. Every time his phone rang I picked it up and told whoever was on the other end that he was gone. I can’t tell you how many people gasped and wailed and cried. How many told me how much he had meant to them. It was an enormous comfort to see and feel how many lives he touched. It made me feel not alone in my grief. It made me feel his life had mattered.

A gaping wound had opened up in my life, in my soul, and I couldn’t understand how the sun kept rising and people kept walking around NYC just living their lives. I wanted to shout at them: “DON’T YOU KNOW? HE IS GONE!” A part of me was deeply shocked to see that NYC kept buzzing along at all. If it had turned out that he had been the battery that had kept the entire city going I wouldn’t have been surprised. But every person who took the time to talk about how they were affected by his death gave me great comfort. I didn’t want more people to be sad, but I needed to know how big the ripples of his life and death were.

Some people admitted feeling guilty they didn’t come see him more. I tried to make them feel better but I was also sort of mad. Why didn’t you? But that is likely partial projection and just sadness and anger at the universe that my dad was lonely. What can you do? It’s all over now, Baby blue. I wore his sweatshirt for a week.

The last week of my father’s life and the first week of my life without my father were the two worst weeks of my life.
MAKING SENSE OF IT ALL

But this isn’t a book about mourning. It’s about cancer. Living with it. Fighting it, and unfortunately, sometimes dying from it. So now that you know how it ended (sadly, but surrounded by love), I will say that cancer did a number of good things. Don’t get me wrong, I would trade all this good stuff for my dad. I would trade every wonderful moment and memory to have him back and healthy. But cancer didn’t give me that choice. So now I have to try to make sense of what did come out of this.

Being forced to stay in New York also forced my dad to stop running around, stop being on the move. Stopped him from running away from day-to-day life. Being stuck in New York meant his friends knew where to find him. June Golden came over all the time and Bill Adler talked about how nice it was to know where he was. To know you could stop by and he’d be there. Cancer gave him the opportunity to put his life in perspective—both literally (he organized his archives) and figuratively. He got a perspective I don’t think he had ever had the time to cultivate before. He appreciated the people in his life more than ever.

A LESSON ABOUT GIVING

My dad was always a terrible gift giver. He still owes me a bicycle for my eleventh birthday (all I have is a picture of a bike on a Max Headroom card). When I was twelve I didn’t know what to give my best friend for her birthday. He picked up a four foot pencil from the store Think Big (a very 1980s store) and said, “Here give this to her.” Mind you, it was already in our house. He didn’t actually buy it. But I gave it to her because I generally followed his advice. It went over about as well as you would imagine. But something magical happened when he got cancer. Because he was forced to be present in a way he never had been
before, he learned WHY you give gifts. He learned how that felt. He wanted to give his chemo nurse, his doctor, his nurses, his physical therapist gifts. THIS WAS HIS IDEA. He was too weak to get them so we talked a little about who the people were and I bought gifts. I also got a box of cards (with Santa... sorry Dad). At first he tried to write one card for Saunie, Eren, and Claire. I scolded him. “No! Everyone gets their own card. WITH a personal message.” He did it. Saunie recorded a video of him giving Dr. Ocean her present. His smile was SO BIG. Watching that video made me realize how much he finally got it. How good it could feel to give a gift to someone. How good it made him feel when they read the card he had written. Without cancer, he wouldn’t have learned that lesson or felt that joy.

He even got me a cashmere sweater. He was so proud and happy when he gave it to me. That smile made up for any and all IOU’s or bicycles.

THE GIFT OF SMALL MOMENTS

Danny Schechter the News Dissector could have died suddenly from a heart attack at some small airport in Africa. He could have caught malaria. He could have been killed in a car accident (he did drive a Smart Car, after all). But instead he got cancer. There is a gift that comes in this. The gift is the time we had once we realized how limited our time together might be. He got so much out of it. We all did. A better relationship with me, with his brother, with his friends. A few moments when the fear receded and he saw just how amazing every moment could be. How good it felt to give a gift. To sit still. To be alive.

Cancer fucking sucks. I wish it on no one. He lost his battle with cancer, but cancer didn’t win. He won, we won, everyone who got to spend any time with him won. He fought the same
way he fought apartheid. The same way he fought in the civil rights movement. Sometimes we would talk about how sad he was that all those political victories didn’t stick. That South Africa still had problems, that America still had problems. But I would argue back that it was still better than if he hadn’t fought. He HAD made a difference. People WERE better off and it was the right thing to do. Fighting cancer was the right thing to do and his life made a huge difference in the world. We are all better off from his battle.

I will miss him every day of my life and I will hate cancer every day for taking him away from me, at 72. Cancer has deprived me of the experience of my father walking me down the aisle, or watching him see my name (his name) on the big screen at the end of my first film. Of every other conversation and email and laugh we would have had. Cancer has deprived the world of a man who fought really hard to make life better for everyone, not just himself. When my grandfather was dying, I asked him if he had any advice for me. He told me to write a book. This was strange advice considering I am not a writer. But I guess he was right after all. I hope my dad would have been okay with what I have written. I hope he would have been proud. I hope he knew just how proud I was of him. I hope you all read this far and realize what a remarkable human being he was.

These are my contributions to *Topic of Cancer*. My dad wrote a lot about terrible atrocities. Cancer is one of them. But cancer did teach us all a lot of things. I am grateful he shared this book with me. I hope you will be grateful, too. I hope you can learn about the topic of cancer without having to learn about the topic of death.

I hope that some day soon no child will have to finish the last chapter of their own parents’ experience of cancer. I hope
everyone will be able to write their own happy ending. Until them, appreciate every minute. Every experience. Every laugh. Every time someone can squeeze your hand. Appreciate it all. And live. Live long. Live large. Live well. Just live. I know my dad certainly did.

“I certainly packed a lot in, didn’t I?” Yes Daddy-o. You sure did.

*Sarah Debs Schechter*
*Los Angeles*
*June 20, 2015*
The family smile: Danny with daughter Sarah
Books by Danny Schechter

When South Africa Called, we Answered
Cosimo Books, ColdType.net (eBook) 2014

Madiba A to Z: The Many Faces of Nelson Mandela
Seven Stories Press

Dissecting the News & Lighting the Fuse
NewsDissector.net, ColdType.net (eBook), 2013

Blogathon
Cosimo Books, 2012

Occupy: Dissecting Occupy Wall Street
Cosimo Books, 2012
ColdType.Net (eBook)

Foreword to The Report of the Financial Crisis Inquiry
Commission of The United States
Cosimo Books, 2011

The Crime of Our Time: Why Wall Street
is Not Too Big to Jail
The Disinformation Company, 2010

Introduction to The History of The Standard Oil Company,
by Ida M. Tarbell
Cosimo Books, 2009

Plunder: Investigating Our Economic Calamity
Cosimo Books, 2008
When News Lies: Media Complicity and the Iraq War
Select Books, 2006

The Death of Media and the Fight to Save Democracy
Melville House Publishing, 2005

Embedded: Weapons of Mass Deception
(How the Media Failed to Cover the War on Iraq)
Prometheus Books, 2003

Media Wars: News at a Time of Terror
Rowman & Littlefield Publishers (USA), 2003
Innovatio Books (Bonn, Germany), 2002

News Dissector: Passions Pieces and Polemics
Akashic Books, 2001
ElectronPress.com, 2000

Hail to the Thief: How the Media “Stole”
the 2000 Presidential Election
[Edited with Roland Schatz]
Innovatio Books, 2000
ElectronPress.com (USA)

Falun Gong’s Challenge to China

The More You Watch the Less You Know
Seven Stories Press, 1997, 1999
“It started with a noise, a belch; followed by a burp and other body noises I don’t need to describe. I felt bloated and was, I assumed, in the throes of a bad acid reflux attack. I asked my doctor to change my meds. He did, but suggested we have a look inside my stomach to see if anything else was going on.”

Those are the first words of Danny Schechter’s final – and most remarkable - book, in which he takes us with him on his six-month Medical Mystery Tour, “a running commentary, part diary, part blog, part excursion into my fears and medical adventures, if they can be so called, after a diagnosis of the dreaded pancreatic cancer.”

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