

That's Hysterical! Now, Get Out!

Season 2 | Episode 11

My T-Break Becomes a Tea Break - A Surprising Turn of Events

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As soon as you say surgery, out comes the concerned faces. I don't want people to be concerned for me. I'm relatively excited about this. It's fun to give them that alleviation of, No, no, no, this is a good thing. On this episode of That's Hysterical. Now, get out. Give me a second. That was me hitting my drive ape of THC. Because in a surprising turn of events, get this, this is amazing. I think this is also the part where I put in a disclaimer, I am not a doctor. Do not take medical advice from me. Everything mentioned on this podcast is a personal story. Do not make medical decisions based on a podcast. However, in a surprising turn of events, I talked to the anesthesiologist. Well, the anesthesia Department, whoever's going to be taking care of my anesthesia at Yale, people. Yale, okay? Smart. You probably heard of them. They're smart. They went over a pre-op list of stuff. I had to make sure I was doing what I'm supposed to be doing, stopping my vitamins and supplements, going through my vitamins and supplements. And as she was going through all the stuff I could and could not do before surgery, she said, Don't smoke or drink the day of surgery.

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What? Record scratch. And I had to stop her and be like, Whoa, whoa, whoa. They told me I couldn't have pot for a week. And she's like, Well, yeah, that was originally what we were telling people before it was legal. Now remember, This is Yale. This is Yale. But also remember, we do not take medical advice from podcasts. Blanket statement over all podcasts. Your podcast is not your doctor. This is simply my documenting, my journey, including the day I was supposed to stop smoking pot. And as we've gone over in past episodes, I always have to think about new listeners. This should not be the first episode you listen to. Go Go back at least one episode. Listen to how pot has helped me for so long, maintain, manage, deal with the adenomyosis, the cramps, the bloating, the discomfort, the hormonal shifts, the bad moods, the back pain, the nausea, the nausea. I did not even remember the nausea. It had been so long until I took this 36-hour My doctor said I needed to stop smoking pot, so I'm going to stop smoking pot the week before my surgery. And then, and today was going to be the day that I officially stopped, but I stopped yesterday just because I was like, Let's just rip off the bandaid.

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I don't want to wake up and be like, okay, now I have to stop. I would like to wake up and have already stopped. I've learned something interesting with my ADHD, especially lately. If I really need to do something as much as I love to sit down and do something from start to finish, it's actually hard for me to get started. I wanted to trick myself with the pot to be like, Hey, we stopped smoking at noon yesterday actually. Even though today would have been the first day, noon was my last hurrah with the pot. It wasn't

even a big hurrah. It was the drags of what was left in the vape. I didn't even feel that much, but it was more I think, the I'm doing this motion for that feeling of I know I'm going to get relief with this pot from some way, from this bullshit adenomyosis. As soon as the person from the anesthesiologists Department talked to me about it and said, once it became legal, we realized when it was illegal, people couldn't tell them. That's the thing. I'm not going to party. I'm going to be rational here. However, it was a celebration.

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When she started talking and saying all this stuff, I put the phone on speaker. I ran downstairs to my husband, and I started jumping up and down in front of him to be like, Listen, listen, listen to what she's saying. I can have the pot. Oh my gosh. And the relief I feel, that wasn't the thing. This is just segue into the fact that I can record a podcast and not be thinking about this pain because once again, I can smoke pot and this alleviated so much of my pain. I didn't even realize I was going through. I didn't even realize I was going through until that first night. Oh my gosh. Last night was just awful. Just awful. Could not shut my brain off. Okay, so back to the thing that she, that surprised me, that she did take away, that she did tell me I couldn't have green tea. Green tea. My mind is blown from this because I hate tea. I've hated it my whole life. I always felt like it tasted like dirtwater. I never understood the appeal. No matter what I put in it, it tasted like... People would be like, Put honey in it, put cream in it.

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And I'd be like, Great. It tastes like dirtwater with honey in it. I don't understand. But four or five years ago at this point, I started intermittent fasting, and that actually helped with a lot of the pain and discomfort. I did so many things. I cannot believe I did so many things for this stupid adenomyosis. But I started intermittent fasting, and it helped with the inflammation, especially early in the mornings. One thing with intermittent fasting, I do at this point 18:06, so my eating window is 6 hours during the day, six-ish. I haven't been as stringent as I used to be when I was actively trying to lose weight, and now I'm more like, you know what? I've just been trying to be comfortable. To be honest, when I was skinny, I was cold, and that made everything worse. I like the layer of pudge. It keeps me warm. So I'm quite happy with Hell, it's been working really hard to deal with this ridiculous adenomyosis for so long. I was doing intermittent fasting, and the thing with intermittent fasting is you cannot eat anything for those 18 hours of fasting, and also your liquids are limited.

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You can't have things the way I did it. I'm saying you, again, do not take your health and medical advice from a podcast. But the way I did it is I usually only have water, seltzer, ice, and not seltzer that's flavor. Nothing flavor, nothing with artificial sugar, even if it's zero calories. I don't really want to get into Intermittent Fasting and the science behind that. I encourage you to do some research if you want to look into that. I would also encourage you to look into intuitive eating on top of it. If it is something just because because I no longer want to be in a space where I'm talking to people about their diet or weight loss or health-related things because I am not an expert, and I feel like I did a lot of things wrong to get to where I

am today. But at the same time, I feel like I'm in a good place now. But I also don't want to be that person to lead somebody in the wrong direction because I still don't want to dig into this hole. I don't know. I did a podcast where I lost all that weight, and I I really...

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I would talk about my bad periods and my bad PMS, and I would call it Shark Week. I would call my period Shark Week because it was just any semblance of motivation or trying to maintain a healthy lifestyle went out the window because everything with my period just took everything out of me. I was in survival mode for about seven... Well, it was usually a really bad three to four every month. And PMS was just the precursor to it all. So, yeah, I talked a lot about my period. I didn't know at the time that I had adenomyosis when I recorded that podcast. I may link to it. It's still one of those things where I don't want to talk about diet or body positivity almost ever again because that is so far off my mind. There are so many things about weight loss culture and diet culture that I'm still trying to pick apart and get out of my brain before I talk other people about it. Let's just leave it at that. But it is interesting when I think about how often my period played such a big part into my diet and how I felt about myself and my self-esteem.

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That podcast was a big part of that journey, so I can't discount it completely. It's just embarrassing to look back sometimes and be like, Oh, I'm learning all these things. It's almost like when you look back at a paper you were really proud of doing in second grade, but now you're in eighth grade, and it's like, if you turned in that paper now, you would just be disgusted with yourself. Or your teachers would be like, This is all correct, but you're at a different level now. So that's how I feel about that journey. And maybe that's something to go back to because as I was talking about it and trying to push it away as something I talk about on this podcast, I realized, Oh, that's also tied in with adenomyosis and the shame and the stuff I was trying to hide and what this hysterectomy might mean. I keep forgetting to ask people or research how the hormones will be affected with PMS afterwards. I don't know. I really don't know. If I'm not in that agonizing pain or I have that nausea where it's like, I'll just put anything in my stomach right now no matter what it is.

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And no, it's not carrots. Carrots are not going to settle my stomach the way a fucking croissant would. Let's be honest here. But no, never carrots, though. I was thinking, I'm like, I'll put anything in my stomach right now. Not carrots. It would usually be a croissant or something. But that survival mode, and that was all normalized to me. It still sounds normal. It's normal to the point where I would joke about it on a podcast. But that's my MO. When I was talking to my therapist today, I was making her laugh. I don't want to say that's how I feel like I win at therapy, but I feel good when I can make her laugh and she doesn't give me the concerned face. I've been able to normalize so much of this stuff to the point where the patterns of them became a joke. How I feel like I can talk about my hysterectomy to people as long as I make them laugh about it. Because as soon as you say surgery, out comes the concerned faces. I don't

want people to be concerned for me. I'm relatively excited about this. It's fun to give them that alleviation of, No, no, no, this is a good thing.

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Here's how I would like you to react, and it's a good reaction. It's not I'm going to come and I'm going to talk to you about my surgery. Are you ready for the big heavy shit? And it could be. Who knows? I'm not leaving that out of the equation. But right now I have a very positive mindset about it. I was very happy to talk to my therapist. It That was before I knew I couldn't have pot. So feeling good talking to her. You know what? I needed that. I feel like I needed that 36-hour break. And also to feel what it's like when I don't have to smoke pot as much as I do to deal with the pain and the discomfort. I put them together because it's not just pain. And this is really interesting. For my other business, I got to go to a woman's health talk talk one night, and it was all about heart health. They had a comedian, and they had some medical professionals up on stage talking about heart health, especially for women, because it's one of those things where you hear heart attack. Most likely, you think about the men in your family when it happens to all genders.

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Heart issues are something that happens to all genders. When women talk about heart health and what they experience during heart attacks or heart problems is they don't talk about pain. They experience more discomfort. That was one of the things that I brought from that night was, That makes a lot of sense because I don't have pain as much with adenomyosis. I have discomfort. It's almost worse than pain in a very odd way because It's almost like it's not somebody stabbing you and just the knife is there. It's somebody with a very dull butter knife, but they are continuously agitating you for hours. That's why I usually say pain and discomfort. But anyway, I wanted to share that shocking turn of events with you about the okay to have pot, no okay to having green tea. It blows my mind. I I didn't even talk that much about it. I'm so sorry. I went off on a tangent. Anyway, it's the green tea thing, apparently, I don't know, not good. Once again, don't take medical advice from podcast, but I find it really interesting. Also, the fact that I can have pot. I will trade one of my favorite things for another because this is one of my favorite things.

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I'm very excited now because it'll help me deal with the anxiety and then everybody else who is experiencing anxiety for me, to be perfectly honest. I'm glad I got to share this on a podcast. It will be a podcast after all. All right, with that, take care, folks.