

“That’s Understandable” Season 2 - Mini Podcast 2
Reed Morano - Transcript
FINAL 10172024

Brendan (00:07)

Hello everyone, and welcome to That's Understandable. I'm your host, Brendan McEvoy, US head of external communications at AstraZeneca. Today, I'm joined by a special guest, Reed Morano. Reed is an American film director and cinematographer. She's the first woman in history to win both the Emmy and Directors Guild Award for directing a drama series in the same year for the pilot episode of The Handmaid's Tale. I can personally attest to Reed's passion for storytelling.

She directed AstraZeneca's recently released What Science Can Do films, and I got to spend a few days with her on set. has more than a passing interest in helping craft our stories, and with good reason. She has a powerful story of her own to tell and a message worth hearing. While preparing for her directorial debut, Meadowland, Reed received a cancer diagnosis. During the pre -production of the film, Reed began an intense treatment regimen which resulted in her cancer, enter remission, right as filming was set to start. But her journey was just beginning. I'm so glad to have you with us here today, Reed, and honored that you want to share your story with us.

Reed (01:17)

Thanks for having me.

Brendan (01:20)

So let's start with a bit of an introduction. Could you share a little bit about yourself, where you're from, and what inspired you to become a filmmaker?

Reed (01:28)

Well, I am from the East coast, mainly we moved around a lot when I was growing up, but I was born in Nebraska. It was only there until I was eight months old and pretty much from there went back to, you know, the East coast, New York area, New Hampshire, Vermont, a little bit in New Mexico. And I had to sort of move around a lot and make new friends at the same time. And at some point my.

My father, who traveled a lot for work and was a huge lover of film and movies, had got a, he procured somehow an old, like one of those giant VHS, like those cameras that had a hi -hat tape within the VHS tape in it, you know, you fade in and fade out. And he kind of pretty much put it in my hands and was like, you're going to be the family documentarian. And I was like, no, I'm all right. And he was like, no, you're doing it. Here's how you do it. And then I guess after that point, my mom said I never really put the camera down. I think it was a way for me to tell stories that I'd been previously writing, but like through in another format, basically.

Brendan (02:48)

Mm -hmm. So you said, right, so were you, were you writing sort of stories, you know, as you were growing up as well?

Reed (02:54)

Yeah. Yeah, when I was, I think it was even before I started really writing, actually, I was making books and stapling the pages together. And I was doing it from the time I started in school. And I think even when I was very young, we lived in this place, Fire Island, off the coast of Long Island, and there was only 32 kids in the whole school. And my teacher, some of my books into

the Fire Island, the Woodhull School Library, which, you know, there's only 32 kids in that school, so low stakes, but yeah, I used to love writing and I used to spend all my days writing on my mom's Commodore 64. And eventually when I got to high school, I started in photography. And, you know, I think that's because of the video camera that my father had given me. And so, you know, when it came time to decide what I was going to do for college and... going forward, he was like, well, you love telling stories and you love taking pictures, so it feels like you should go to film school.

Brendan (04:01)

That's awesome. So like today, you think about, fast forward to now, it the love of storytelling? Is that sort of what is why you love filmmaking and directing so much? Or is there something else to it?

Reed (04:16)

Well, there's a lot of parts to it. think one part is the one main part obviously is trying to create emotion, trying to find the sort of get to the heart of, you know, somebody's internal journey, their struggle, try to capture. I mean, that's the thing I think we always try to do in storytelling is try to find a new way to sort of make the audience be, you know, surprised they can have that feeling from what they're watching. And I think, you know, trying to define the undefinable. so that's probably the more in -depth answer, but the short, long and short of it is I just, as soon as I started going on to, I love carrying the camera and framing through the camera. So I don't think I consciously knew that until I went onto a film set and realized that was actually a job to be a cinematographer.

And I love the life of being on set, being with the crew, working with like a whole team of hundreds of people to make one thing together. It's just a really amazing bonding process and really inspiring. And you share something that, know, a feeling on set that you can never replicate again, it will always be different and individual to every job.

Brendan (05:43)

And as you're saying that, you know, I'm reflecting on the time this past summer working together and that was my first time ever, you know, on a set. And I mean, I still kind of, it's so vivid for me how cool of an experience it was, you know, thinking about to your point sort of how many players it takes to sort of make it all happen. But then also just, I mean, the dynamics, right? Of sort of seeing you interact with the actors, with the, you know, the

the, you know, all the different, you know, components and all the people that make it happen. So, yeah, I mean, it's a, for, for most, they probably will never get that experience, right. And I'm being on a set, but it's something for me that I, you know, will definitely remember for, a long time.

Reed (06:27)

Yeah, it's kind of, it's very, it's like, I always think of it like you're in a traveling circus kind of. It's very weird, but you get bonded to these people like they're your family. And in the best case scenario, everyone becomes family. And for me, on most sets, that's really, really what it has been, which is why I love working that way. know, it's, it's, and everyone gets locked into what's happening on the monitor and you can see, you know, everyone from the producers to like the grips and the PAs are like, you know, get tears in their eyes and it's really special.

Brendan (07:06)

Yeah, yeah. So, you're doing what you're what you love. Your career is on the rise. You're in the middle of shooting a project as the director of photography. And then boom, right. You're diagnosed with cancer. So how did you how did you find out about your cancer diagnosis?

Reed (07:22)

Well, I had actually, just finished shooting a really long series, this show, HBO show called Looking, that was on, you know, a while back. And I was in San Francisco for about six months working that show. I was a cinematographer on all eight episodes, which is not usual. Usually there's a, you alternate episodes because it's a lot of work. So I was just going straight for that whole time. And... I'm sure my immune system was run down, but I was just kind of going along and I went back home to be with my kids for a little bit. Then I went to Poland to go to cinematography festival. I was on the jury at, and the first day I got there, I looked in the mirror and I noticed there was a lump on the left side of my neck that was protruding. Like it was very obvious. And I was like, what is that? I touched it. knew it was hard and it didn't move. And I just, I didn't know that much about cancer, but I just,

heard, if you ever have a lump and it's hard and it doesn't move that it could be that. And I was there for the next seven days because I was on a jury. And so I couldn't really go to the doctor. went to a doctor at a clinic there, but I didn't, you know, he didn't even speak English. So there was no real answers from that. So I had to wait. And when I got back, I went to an ENT who did a biopsy and then promptly sent me to just basically was like, need to get this removed, whatever it is, it's atypical cells. my aunt who was a nurse in the city at the time had, a lot of doctors. And so she had a recommendation to go to a head and neck surgeon, Dr. Adam Jacobson, who worked at the time at Beth Israel. so I went to him and he did the same thing, a biopsy and he was sort of like, you know, we just need to, I think, take this out, whatever it is, we have to get rid of it. So, you know, he didn't make any snap judgments, but I'm sure at that time he probably knew what it was. So when I was doing the surgery, my mom and my husband were at the you know, at the hospital waiting. while I was still under, the doctor came out and said, you know, we discovered that the, you know, we took out the, it was a lymph node that had become infected and it became cancerous. And so usually in that area, comes from one of two places, either the tonsils or the base of the tongue. And he was like, is it all right if I poke around to see if I can find where the, where the source is, you know because it'd be easier for me now.

I could just take it right out if it's in the right place. So he did that. They said, yeah, of course. And he did that. And then he discovered that it was not, unfortunately, not on my tonsils, which would have been a lot simpler. Still a problem, but because of where it was positioned all the way down the base of my tongue, they had to do extreme chemo and radiation because they just, at that time anyway they would never operate there because of where it's positioned, know, depending on how big the tumor is and where it's positioned, it was sort of a stage two cancer at that point. And they didn't, if they had operated, there was a high risk or high likelihood of me becoming handicapped for life. Like basically I wouldn't be able to speak anymore or eat food by mouth. So.

Brendan (11:21)

Wow.

Reed (11:08)

They were, I was like, I didn't feel I really had a choice at that point. had to just, you know, do their recommendations.

Brendan (11:17)

Mm -hmm. You know, I was going to ask sort of about, you know, based on, you know, the setting of where you were in your career and just about to start this film and then having this happen, you know, what was that process like for you to sort of determine that you were going

to prioritize your health? I think you kind of said it right there, right? There really wasn't a choice. You know, it was...

Reed (11:40)

Yeah, there wasn't really a choice. mean, I guess I was in a bit of a bind because of a few, for a few reasons. One, I didn't, I'd never been faced with a huge health decision before like that. I have children and things like that, but I never was really sick. I was always pretty healthy my whole life, knock on wood, which was very lucky. So it was really bizarre thing. And as a family, we were, I was at the start of my career. So you know, we were not financially stable. So there wasn't really a scenario in which we could like, I could just stop working for a minute and we could think about like potentially alternative routes. didn't really, and I didn't know enough, I guess about health in general to really think you didn't take that advice. It wasn't painted as a bad option. It was painted as sort of a, and I think for some people it is, some people it was a simpler process. For me, I didn't know all the things that were to come. thought, okay, I'm going to do three months of chemo and radiation and then I'll be back to work again. You know, just was like, all right, this really stinks, but I have to do it. You know, they asked me if I wanted to freeze my eggs. I already had two sons and you know, again, we were pretty poor and that wasn't really even an option. And I was like, I'm not going to be greedy. I'm lucky enough to have two healthy boys, right now I just need to get rid of whatever this is and do it fast because I was kind of a workaholic and I was not used to missing work.

Brendan (13:20)

And what was that, you know, as you were balancing going through this treatment and doing the prep work for MediLand, like how was that? Like how were you able to balance that? And, you know, in terms of how you were feeling as going through the treatment, what sort of obstacles or, you know, setbacks?

Reed (13:41)

Well, you know, we were pretty, we were pretty far off from shooting at the time when I got the diagnosis. However, I was in prep for another film that was supposed to be, to shoot as a cinematographer. And, that was going to hold me, hold us over until I started directing Meadowland, you know, sometime later the next year. So I was diagnosed in December. The treatment started in January. I remember the first few weeks I felt pretty much fine and I had to go to Sundance because I had a film showing at Sundance at that time, I believe it was the Skeleton Twins. Maybe I had another film there too at the same time, but I couldn't really participate in the Sundance life. I was tired, very tired at night. I wasn't drinking obviously because I was on my treatment already and nobody knew.

So I was just kind of going about early and being a little sort of unsocial at this event that was supposed to be to, you know, promote myself. And that was odd. then when I, you know, I would say about three weeks into the treatment, I had planned, I thought I would still be able to work and do some jobs. But when I, when they told me the treatment schedule, actually, that was when I was like, that was the first time I really got upset because they were like,

I figured I would just go and get the radiation when I'm on lunch. The movie I was shooting in New York City, this is perfect. And every day on set lunch, the time lunches changes and the people at the hospital were like, no, you just, you come in when we tell you, you're gonna come in every day and it's gonna be probably the same time most days and you can't miss it and et cetera. And I was like, this is...

obviously not going to work. So I had to actually leave a job, which meant our family then had, you know, one less income. And then ultimately my husband, at the time he had to also stop

working because about three weeks into my treatment, I remember I was having like brunch with my family. My mom was visiting and everything.

I said to them, feel like this is gonna be my last meal. And they were like, what are you talking about? Like, you're fine, you know? But I could already tell things were tasting weird. Everything was much more sort of, like I was feeling it a lot more. And I didn't know where it was going, but I just had this weird feeling. And literally the next day I was in so much pain in my mouth that I couldn't drink water even. And then I knew I had to get what they had been trying to avoid with the treatment, which what they said they didn't do for everybody anymore. They used to automatically do it was give you a feeding tube. And so I probably went for about a week without food and very minimal liquids. And until they could schedule the time for me to get the feeding tube put in. you know, at that point, my my husband had to stop working too because it became like a full -time job to take care of me.

Brendan (16:56)

No, mean that, you know, it's, I'm sure listeners who have been through either similar situations themselves or a family, you know, the family member can relate that it's sort of this journey, right? Where there's not necessarily a, you know, one path or, sort of like a clear line on how each person is going to navigate it how you kind of encounter those situations and deal with them. you know, I, one of the things that is striking me as we're talking is, you know, this, there seems to be in the way that you tell the story, this sense of optimism, right? In that you kind of just continue to push through and, you know, keep going. So, you know, I'm, I'm curious what, was, you talked about your, you know, your family and your kids and your career. Are those, were those kind of the things that you, you know, thought about to kind of push you through as you were heading on this journey or were there other sort of contributors to maintain that optimism to progress through the journey?

Reed (18:08)

Yeah. Well, you know, I am a generally optimistic person. always have been. I'm the type of person where if there's a setback, I, you know, it still will get to me, but I'll, I'll, I'll use it as an, in a way to myself, almost like an opportunity to, to prove to myself that I can achieve something.

So I remember believing at the time, and I haven't thought about this in a while, but I remember thinking when I got the cancer, I was like, well, I'm gonna shoot my film while I have cancer, you know? Like, I'm gonna still shoot. And then when I found out I couldn't, that's when I got a bit depressed. Then when I couldn't eat food, you know, that's when I really got depressed because I think people don't realize how big of a part that is. It's hard enough for I think anyone going through cancer. Everyone's cancer journey is so individual and there's no way one can compare to the other. Everyone's dealing with their own thing. is as much as there are similarities from treatment to treatment or situation to situation, it's like you just can never compare. And I just remember thinking like, wow, I had to get the one that makes it so I can't eat food. Like, it just was like, like that's like the one thing I could still, you know,

Food is so comforting and that's when I really went into a dark place and I guess I must have sort of stayed in bed for that whole week, like, you know, when I first found out and I ended up getting like, you know, deep panthrombo -sis in both my legs and I couldn't walk. And then I had to start, you know, being on blood thinners on Labanocs and, you know, my husband had to give me...

shots in my abdomen like every single day. And I had to do that for like three months. But anyway, I did have the kids there. They were very young and they weren't in school yet. They were like five and three, my two sons. And they were, they would come into the room, into my

bedroom and come and like check on me and like visit me with me and talk to me. And, you know, there was a period of time where I couldn't talk towards the second half of the treatment, past the treatment. I didn't talk for about two months because of how the mucositis in my mouth and everything just became so difficult that it was unnecessary pain. And so I even had a dry erase board I would write on and my oldest son had like started to learn to write. And so he would write me a message, even though he could talk to me, he would write back and forth with me on the dry erase board. So I think in a lot of ways the kids, were the biggest, you know, getting through it for the kids was a really huge reason. I mean, there was a game my son was playing at the time on the Xbox. I forget what it was, but it was a little kid's game, but it had this character whose mother becomes ill and dies. my, you know, their dad at the time was like, realized that and was like, God, you know, he had been playing this game prior to when I got sick.

So anyway, I just really felt like I never really thought I was in danger of, but I knew I was in danger of potentially being, having an irreversible handicap that could change my life forever. So, you know, even though I, I felt that, I guess I sort of felt like I had to just, whenever I was feeling sorry for myself or feeling in a really low place, I would see the kids and it would make me feel like, I'm doing this for myself so I can be with them so I can be better for them.

Brendan (22:00)

Yeah. you know, I, I really can't thank you enough for, sharing, you know, that I being so vulnerable and sharing your story, because I, like I said, I think, you know, I'm obviously, you know, touched by hearing it and, and I can imagine that it's gonna, like I said, resonate with so many it just, and how, you know, and how, you know, one unfortunate, a diagnosis of cancer is right. And how it flips your life around.

But, you in listening to you shared, you know, how. Sort of the resilience in, you know, progressing through that journey and staying optimistic. And, you know, I, I just think it's, you know, I'm personally grateful that you're, know, that you're here to share that story. You know, with, with all of our listeners, I, I did, before, before we stopped, though, I did want to ask a couple other questions, if that's okay. and so.

When we were last together, when we were together for the shoot a few months back, you mentioned that you were somewhat forced, if you will, to believe in or trust in what science can do. And I think that happens to a lot of people. They're pushed to the brink or have an unexpected diagnosis or medical condition. And science feels like a bit uncertain, right? It's an uncertain world in which you're kind of thrown. And so, you know,

In your specific experience, what were sort of the benefits or drawbacks of leaning into that science or trusting in that science when you were diagnosed?

Reed (23:40)

Well, I mean, obviously the ultimate benefit is that I am here and able to share the story with you. I didn't realize, I guess I didn't realize, even though it's stage two, you know, to me, I was like, well, I don't think that that's as big a deal, but I did have to deal with it. I had to deal with it because it would become a very big deal and it would spread and it could become worse. And, you know, I think the, ultimately, that treatment at that time when I had it, which was back in 2014, it was a pretty barbaric treatment at that time because people, we do over time, catches up and learns and it's oftentimes through the treatments change over time and they become more as...

people learn more, they become more tolerable usually a little bit, maybe there's parts that were unnecessary that were done before that they learn about later. And at that time it was very

new and they didn't know much about it. So they had to sort of throw everything at the wall that, you you have to have the max amount of radiation and chemo to ensure you don't, because they would like, we would never operate on that tumor to take it out unless it was the absolute last resort, unless you go through this crazy treatment and somehow it's still there, then there is a chance we might have to operate on it. So of course, you know, from the time I finished my treatment in March to the time I was able to get the answer about whether or not it worked, which was June, beginning of June. So that was three months of like waiting to find out if it even worked. I knew there was a chance still that there was a small possibility that I might have to have that surgery, which would make me unable to speak or eat. And I you know, I wasn't really worried until the very last few days, then I started to get worried about it, ultimately it ended up being a positive outcome in the sense that they got rid of the cancer. And, you know, at the time I couldn't eat or...

You know, I wasn't eating solid food. I had a feeding tube until there was a lot of sort of effects that I wasn't made aware could happen. I guess I didn't know how important it was to do certain things that they told me to do, which I realized now I couldn't have done anyway. Like there was these swallowing exercises and all these things. And if I could go back in time, I would have tried a lot harder to do all those things to help myself because I have a lot of problems now with that.

Reed (26:17)

But I couldn't have because my reaction to the treatment was so extremely horrible. And it's not like that for everybody, but I'm one of the people who had it like that. So there was no way for me to know. I, you know, came out of it, you know, not, I was like gargling gel lidocaine from February until like the end of October of that year. Even after I found out I was in remission in June, I was in so much pain all the time following it. And then I had my feeding tube in from, you know, beginning of February till August, basically, right before I, you know, I round July 31st is when I got the feeding tube out. Finally, we started shooting Meadowland in like around August 13th, August 12th or something. And all that was fine. But like, you know, a lot of things happen where you like your that don't work right afterwards. And I think there's a lot of focus on how to get rid of cancer, but not a lot of focus on what people who've had cancer deal with after having a treatment like that, because you're never the same. And in my case, I was dealing with an atrophy in my jaw, atrophy in my main muscle, in my neck, so my arm wasn't working, know, anywhere where the fibrosis and radiation happened, it was worsening over time. I didn't realize it was getting worse over time. I thought if anything, I was going to get better. And then later, you know, in 20, about six years later, I started having issues speaking and swallowing and I didn't realize they were related to the cancer because it had been six years. So I was kind of like, what even is this? It took me about two years...

Eventually I finally figured out it probably had something to do with that. And I went to see some doctors, my doctors in New York and they were like, listen, it's radiation, it's neuropathy probably, but we don't really, know, nothing you can do about it. just gonna, the radiation never leaves you. It sort of is there. That's just the problem, you know, it's like, and I remember my radiation oncologist at the time had said, when I was in treatment had said, you know, I know this is really hard. And just when I couldn't speak and I couldn't.

Brendan (28:46)

Mmmm

Reed (28:47)

He was like, but you, I have to kill some of you in order to save all of you.

And that's true because there's parts that don't are of me that are never gonna be the same. Most people might not know, but there's times, you know, starting in 2020 where I started to have this speaking issue where occasionally if I got tired and stuff, the left side of my tongue would just stop working. So it sort of sounded like I was slurring my words, you know.

And I couldn't just go around telling everyone, hey, I'm so sorry, this is because of the cancer. No one, there's like a joke I had with someone I worked with a long time ago where she's like, is that because of the cancer? know, because like we kind of were on a joking, you know, thing about it. But this was prior to me having this speaking and swallowing issue, which then I was like, what is this? And it took me two years to find this amazing doctor in Sacramento at UC Davis, Dr. Peter Belafsky, who's doing a stem cell clinical trials for the very thing that I have. Apparently it's like a very rare condition that less than 10 % of patients who had had an neck cancer get about anywhere from five to eight years after treatment, which is essentially this intermittent, this sort of disintegration of, like, you know, deterioration of your ability to speak and swallow. And I asked him, well, what happens to the people who are further along in it than me? And he was like, they are on feeding tubes, like permanently. And I was like, the speaking thing, what about the speaking thing? Because sometimes I can't, it sounds like I, you know, the speech thing is sort of like, there would be moments where I couldn't.

I knew the word I wanted to say, I knew I wasn't going to be able to pronounce it. And I'd be like on pitches with, you know, trying to pitch a movie to a studio or something. And suddenly I'd have the exact right description that I was going to talk about. And then suddenly I knew, I felt it coming on and I knew I wasn't going to be able to say the next word. And I'd have to very quickly without skipping a beat, think of what's going to be the next, how am going to say this differently, but with the same like emphasis that's going to sell it.

Brendan (31:1)

Mm -hmm.

Reed (31:12)

Also, they don't know what I'm going through. And when the swallowing thing would happen, I couldn't speak or swallow at all. So was just totally random what happened. Anyway, so once I met that doctor that following summer, this was last summer now, so a year ago, I started, you know, I basically started getting injections of my stem cells all in that area. And, you know, I don't know the outcome yet.

We, it's a double blind study. she does, they don't, doctors don't know. And I don't know whether or not I actually got to my own stem cells or if it was just the placebo, but it's been like night and day for me so far. So even if it is a placebo effect, which I really don't think it is, I actually think I must've gotten the stem cells because it is so different. If we had, if I hadn't gotten that on this call, you know, on this podcast, we would be, you know, you, we would have had to take a few breaks and you would have heard it happen and coming out. And it's really a scary thing because my whole job is based on being able to communicate. And obviously everyone wants needs to eat, you know, so anyway, so that's, that's helpful. Like, you know, the part where I had that happen, that is the part where I'm like, this makes me so mad that I had to do this. But then the part where I met Dr. Balovsky too, you know, I'm like,

He's doing something through science as well. know, like we're learning new things every day and miracles, you know, there are some things that can happen that are really great that can come out of it. But you have to be really careful and know that there are risks involved.

Brendan (32:51)

Yeah. No, thank you. It's all very fascinating, especially when you think about being in remission from cancer and then having effects later down the road, things that you wouldn't be able to predict. I guess my final question for you, is just how are you today? What's life like today? I feel like it's, we leave our listeners hanging, right? If I didn't sort of ask you like, just simply how are you today?

Reed (33:30)

Yeah. Very, I mean, I'm very grateful because I can have, first of all, I can do this call with you and you can understand the words that I'm saying for the most part. It's not always easy. There are still good days and bad days. know, yesterday I was having a bit of trouble. It's, but it's nothing like when it was really bad, but I would, you know, I can feel that uncertain days I have, I can feel my tongue, my throat kind of struggling to to sort of do what it has to do, do its job. But today I feel good. And I think that's, you know, I also feel a lot more aware about how to take care of my body. I know the things that it needs. So much of the medicine you need is what you put in your body, like your food. And I was not the healthiest person beforehand. And so I feel like today I'm, you know, happier because I feel like I'm more in control of the direction my health is taking because of how aware I have to become going through this process. And I'm just grateful that, you know, I obviously wish I didn't have cancer, but at the same time, it has, you know, I have to, I did have it. There was no choice. I went through it. It was happened. It happened. And I can't change that.

So I try to look at the positives that came out of it, which is that, you know, it, as a person, it sort of widened my, changed my view of the world, changed my view of people around me, changed how I, my attitude about things. And, you know, it makes you make the most of what you're in. And so, you know, I always know.

The situations I'm in, even if it gets bad or it gets stressful, I've been probably to a worse place. And it's helpful in those moments to think like, okay, you know what? Everyone I love is healthy right now. That's actually my biggest fear after having cancer is I just really don't want anyone around me to have to go through that.

I feel like I'm strong enough to probably go through it again. Unfortunately, if I had to, that's not my biggest fear. My biggest fear is literally anything happening to anyone I love, you or my friends. And so I, but I do think I just feel happy to be here and be able to carry on this conversation, you know?

Brendan (36:15)

Yeah. Yeah, no, thank you. I'm glad you're here too. And I thank you again for this conversation, for sharing your story, for being so vulnerable and also for taking this experience and fueling the work that we were able to do together. I'm really excited for...

you know, for people to see these films that were directed by you and filmed by you. And as well as, you know, there'll be some footage of sort of behind the scenes, if you will, of you as well in making these films. I'm really excited. So just a huge thank you, Reid. I really, really appreciate it.

Reed (36:58)

Thanks, Brendan. mean, it was really, it was a great experience and it was, I'm really glad that, you know, it turned out the way that it did. We were able to, think, capture some, it's very hard in a short amount of time on little spots like that to try to capture the type of emotion I know you guys wanted to convey. And I just feel like, you know, it was.

It's rare when you get to have that beautiful of an experience on something which is so short, you know?

Brendan (37:30)

Mm -hmm. Yeah, and I think in just sharing the films with some colleagues and some other inside and outside the company, the reaction has just been really positive. I think it just really resonates and really the spirit of what we're trying to do in showing the impact that innovation has through a very personal humanistic way, I think really comes through there. again, just, you know, thank you. Thank you for partnering on this and, and yeah. And, and thank you for this conversation.

Reed (38:14)

Thank you.

Brendan (38:27)

Great. So for our listeners to see those films directed by Reid and some other behind the scenes footage, you can check out [whatsciencecando .com](http://whatsciencecando.com). We'll also include that link in the show notes for easy access. Thanks again for listening. And as always, be well, be healthy, be understanding.

END OF SHOW