

“A compelling mixture of memoir, reflection and philosophy, this is a startlingly honest and important book.”

– Rev. Michael Coren, columnist and bestselling author

Ralph Benmergui

I Thought

He Was

Dead

a spiritual memoir



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He Was  
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A SPIRITUAL MEMOIR

Ralph Benmergui



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Published by James Street North Books  
an imprint of Wolsak and Wynn Publishers  
280 James Street North  
Hamilton, ON L8R 2L3  
[www.wolsakandwynn.ca](http://www.wolsakandwynn.ca)

Publisher and Editor: Noelle Allen | Copy editor: Andrew Wilmot  
Cover and interior design: Jennifer Rawlinson  
Cover images: Beach Walk, Adam Goldberg Photography; microphone and chair vector illustration, jemastock  
Author photograph: Chelsea Smith, Vintage Chic Portrait  
Typeset in Minion and Six Hands  
Printed by Brant Service Press Ltd., Brantford, Canada

Printed on certified 100% post-consumer Rolland Enviro Paper.

10 9 8 7 6 5 4 3 2 1



The publisher gratefully acknowledges the support of the Ontario Arts Council, the Canada Council for the Arts and the Government of Canada.

### **Library and Archives Canada Cataloguing in Publication**

Title: I thought he was dead / Ralph Benmergui.

Names: Benmergui, Ralph, author.

Identifiers: Canadiana 20210257601 | ISBN 9781989496336 (softcover)

Subjects: LCSH: Benmergui, Ralph. | LCSH: Television personalities—Canada—Biography. | LCSH: Radio personalities—Canada—Biography. | LCSH: Sephardim—Canada—Biography. | LCSH: Old age. | LCGFT: Autobiographies.

Classification: LCC PN1992.4.B46 A3 2021 | DDC 791.4502/8092—dc23

*For my boys, Jonah, Chas, Emmanuel and Isaiah, and to  
Cortney, my beloved wife, who has filled my heart with love*

*For my father, Mair Soto Benmergui  
May his memory be a blessing*



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# Stents, Radiation and the Dawn of Mortality: A Leaf Falls

It was 5:15 a.m. and the dead of winter. As usual I had dressed in the dark, tiptoed downstairs and was on my way to work as a jazz radio morning show host. I opened the front door, and as the first blast of winter air filled my lungs, I felt what I can best describe as a clutching scream of sorrow in my chest. Was this anxiety? I'd had anxiety attacks in my early twenties. Now, at fifty-four, was this an encore?

I had been through a divorce, remarried and now had two teenagers living with me half the time, along with two more boys under three tucked away upstairs. I took a second breath, and again felt that clutch at my throat, my chest and my upper back. I thought about turning around and going right back

inside, into the warmth of my house, but when you host a daily morning show you can't just call at the last minute and tell them you're not quite up to it today. If you do, the last question you'll be asked is whether you're all right. I went to work.

As days passed, I felt as if my batteries were wearing out. I was tired – profoundly so. Eventually I went to see my doctor. A note on his door said the office was temporarily closed. I groaned. Now I would have to go to the walk-in clinic. I didn't have time for this crap. Still, I went.

Strange thing about doctors: You're supposed to be on time, they're supposed to listen to you and every other patient. Instead, you sit and wait, wondering what the person sitting across from you in the reception area has. Eventually you are called, but only so that you can wait even longer. This time alone, surrounded by anatomy charts and tongue depressors. Finally, the wait is over, the doctor enters.

This practitioner was cold, aloof. He held himself in a way that said, Ignore this clinic, I'm better than this. He stared at his sheet and asked what brought me in. "Well," I replied, "my doctor doesn't seem to be around so I came here."

"Who is your doctor?" he asked. I told him the name. "Oh, him. He's dead."

I was shocked, both at the news and at how remarkably insensitive this man had been in telling me. I liked my now-dead doctor; he was a kind, casual practitioner. He would enter the waiting room with a flourish and call your name with a "Come on down" sense of enthusiasm. His office was piled high with papers, the walls covered with golf memorabilia he had collected over so many afternoons when he had closed the office early and hit the greens. He usually had a Diet Coke in hand. I found

out later, by returning to his office and speaking to his loyal and loving receptionist, that he had died alone on his couch from insulin shock. Turns out he'd been severely diabetic.

Deeply distracted, I sat staring at this other healer, the kind that, for whatever reason, seemed to leave their heart outside the examination room. I proceeded to tell him about my chest pains.

“Does cold air affect you more?”

“Yes, it does,” I replied.

“Are you running out of breath after climbing stairs?”

Much as I didn't want to admit it, that too was correct.

“You're describing angina,” he said. “I can't help you. But I can refer you to a cardiologist.”

I thanked him and left.

My doctor was dead, I was in trouble and life – my life – was changing. It all seemed so fragile. I walked up the street and back to my house, my family, my job.

The cardiologist was kind. I sensed that he knew me from my radio work, something that I find often leads to a certain generosity from which most patients don't benefit. It was a way of saying thank you for keeping me company, if only as a disembodied voice.

With the niceties out of the way, the diagnostics began. The progression of the symptoms was, by the look on his face, profound. I failed the stress test. I failed most of the tests. I had begun the journey across the bridge from a person of interest, as they say in the crime world, to a prime suspect. Meanwhile I stayed on the air, doing my morning shift from six to ten every morning, five days a week. I was unhappy and scared. It seemed like I was living someone else's life. How could this be? I had just started a second family and now I felt like I was letting everybody down.

Like most men I know, I had been raised to provide, to satisfy a primal imperative as an urbanized hunter-gatherer – granted, a very winded hunter-gatherer. Finally, after excusing myself from almost all my household chores and lying on the couch, trying to keep my breathing shallow so as not to rouse the angina beast, my wife had had enough. She was scared, and that fear came out as anger.

I felt I knew what she was thinking: “How could you do this to me, leave me with these children to raise? I should have known. What was I thinking, marrying an old(er) man?”

She took me to the hospital where my cardiologist checked my vitals and pronounced, “You have to go to a hospital across town, right now. They will be waiting for you. You’re getting an angiogram so that they can look inside and see what’s happening.” I gathered up my car keys and looked into the very worried eyes of my wife, who couldn’t decide whether to comfort me or give me a stern lecture about taking lousy care of myself. The doctor, seeing the keys in my hand, stopped me as I shuffled toward the door.

“You’re not thinking of driving, are you?”

“Yes,” I muttered. “It’s the only time the pain goes away.”

“If you insist on driving, I’m going to have to call the police.” He turned to my wife. “Under no circumstances is he to drive.” She took my keys.

Three hours later, I was on a table, catheter inserted through my wrist and straight into my heart, an inky dye being injected into my clogged arteries. I was awake and watching the screen. The blockages were clearly visible. The doctor made that sound that contractors make when renovating a kitchen. You know, where they cut out a piece of drywall and look at your electrical

wiring and go, “Oooh, no, yeah, mmm.” At this point he left.

A second doctor appeared. This one, I was told, was proficient in the art of passing drug-alluded stents – little tubes, really – through the body and lodging them in place so that the plaque-filled dam could burst. When he achieved that small miracle, the arterial tree that runs through my heart came back to full flower. I felt the pressure build in my chest, and then relief. It was over. I was told that both arteries were 95 percent blocked. One, the LAD, or the “widow-maker” as they call it, was within days, if not hours, of bringing on a massive heart attack.

At that moment my world view began to change. I went from what others described as a young fifty-ish broadcast personality to a man with heart disease, two chaotic teenagers and two little boys. This was my first inkling that life, indeed, is not a rehearsal. It ended my delusion that dying was something that other people did. It ended my self-sustaining myth that I was in no way finished with what I had to do here, and because of that my number, quite simply, could not be up.

It’s quite spectacular, really, how we can wake up every morning and convince ourselves that others may die, indeed will die, but that we are not part of the conversation. If you ask me, I’ll say, well of course I’ll die. But deep down, I feel that if I carry that cold hard stone around with me in any real way, then meaning and purpose will simply fade.

All these existential thoughts, lovely as they may be, were rudely interrupted when the stents that had been working fine, at least for the first six months, started acting up. I had a restenosis, as they call it, where the artery for the crucial one, the widow-maker, had over-healed, building a new blockage. It was back to the hospital then, where a third stent was inserted.

During the next while, I found myself in a rehab centre as part of the healing regimen offered by the hospital. I was suddenly surrounded by dozens of people with heart disease. At least half also had diabetes. I started the program with a stress test, where you walk on a treadmill with a plastic mask strapped to your head and a tube between your teeth attached to a monitoring device of some kind. I stood there on a treadmill feeling awkward, like I was on a space station a la Stanley Kubrick's *2001: A Space Odyssey*.

I was snapped back to earth by the cardiologist, who had positioned herself in front of a bank of machines and asked without looking up, "Before we begin, any questions?"

"Yes." I lifted the mask from my mouth. "Why me? I mean, no offense, but I don't look like any of those men in the waiting room. They're big and old and tired looking."

Her back was still to me as she checked the machines I was attached to. "Tell me about your family heart history," she said.

I began to rattle off all the cardiac "events" in my family's history. The list was impressive: heart attack, stroke, bypass, angina. She stopped me somewhere in the middle of this depressing litany of broken hearts.

"It's mostly genetic," she told me. I was immediately comforted. In fact, I was downright brimming with a newfound arrogance. This had nothing to do with getting older, or years of stress, smoke and ambition. This was fated, and as such there was little to learn from it. It was in my genes, I thought, as if my genes belonged to some other fool and not me.

Part of the vulnerability that comes before a diagnosis is some portion of guilt. What did I do? What didn't I do? Sometimes when sharing news with friends about someone's

grave illness or death, there emerges a stream of conversation that revolves around what they, the afflicted one, did wrong. Implied in that is the idea that we deserve our fates. I drank, I smoked, I definitely ate too much pizza. If I had just done it “right,” I wouldn’t have failed. I wouldn’t have to die.

The inference is that death is for others; that a moral and good life, including, apparently, a rather healthy portion of dark green leafy produce, will save me from their end. Regardless of the facts, and they are irrefutable, we dance into the night certain that if we just get the footwork right the sun will rise yet again.

Having just become a man with little drug-coated tubes in my arteries, it was incumbent on me to not fail. I had to eat right, take lots of daily meds and above all, keep moving. Hell, they even wanted me to jog. When I see people jogging, I find it annoying. Especially the ones that carry on a full conversation with their running partner as they motor along, as if to say, “I’m not even winded – gasping is for wimps.”

So, in spite of my rehab coach’s best intentions, I knew this jogging thing wasn’t in the cards. We settled on a gentler path – walking, quickly, and a lot. At first, we did this on an indoor track at the rehab facility. I started out doing inner fist pumps as I lapped my fellow walkers. Eventually I realized the ridiculousness of my achievement, unclenched my inner fist and just concentrated on getting my times down, my humility up and my heart rate steady.





# What Doesn't Kill Ya

So here I was, a fifty-four-year-old man with heart disease. I can't deny that I felt a certain sadness when I began to process what I had just been through. It was as if Death itself had suddenly and without warning given me a little shake, saying, "Hi there, just checking in with you. That could have been it, you know. If I hadn't tipped you off with the angina thing you would have been another one of those guys who just does a face plant on the sidewalk on an otherwise lovely day. You'd have been mine before you hit the ground."

Odd as it may sound, there is something comforting in that face-plant thing. No long slow battle with some hideous ailment, no burden to family and friends and, most importantly, no suffering. That is what we fear most – the suffering. But, as concentration camp survivor Dr. Viktor Frankl said: "If there is a

meaning in life at all, then there must be a meaning in suffering. Suffering is an ineradicable part of life, even as fate and death. Without suffering and death, human life cannot be complete.”

If that is true, then why do we compound our suffering by taking such great efforts to avoid it? Are we so driven to seek pleasure that we learn nothing from our pain? I have always thought that the only real teacher in my life has been pain. What pushes me forward is not the desire-driven moments of escape and fleeting euphoria – those moments are small, sweet fruits; it is the pain. If I bring myself into a relationship with pain, breathe through it and transform my anxious fear of it so that I am available to it – that pain sears, scars and focuses me. When I am wounded, I’m given the opportunity to tend to that wound, and in that caring bring forth a loving attitude toward myself and an unfolding compassion for others.

Stephen Jenkinson, author of *Die Wise*, spent decades in palliative care – or as he calls it, the death industry. He views suffering as a product of our wanting, and the pain we feel when relief is denied. “Suffering . . . comes from an unwillingness in this culture to recognize how on the take we have been through the entire course of our lives here, how willing and able we are to wring from the world all we desire and require from it, as if that were the reason the world is here at all.”

Jenkinson sees the bitterness some encounter as they enter into their dying this way: “So many people I worked with died with the grudge of *being owed something* by life that they now won’t live to collect on. Their deaths were a theft and betrayal.”

In thinking of my own demise, I sometimes get the nagging feeling that I will waste my last breath feeling hard done by. Feeling really sorry for myself. Why me? I wasn’t finished.

I have things I want to say, do, feel. There have to be a lot more awful people who should go before me. But let's not get ahead of ourselves.

For now, there was something strangely comforting in identifying myself as someone with heart disease. Perhaps I could jump the bitter-last-days queue. Just go about my business and then just drop. A clutch of the left arm, heart attack and . . . out. But I still needed time to digest all this new and not-so-wonderful information. I felt quite secretive about my new condition. I only told certain people, and I certainly wasn't going online to share my trials and tribulations with "friends" and "followers." That would signal that I was headed for the sidelines, moving to the back of the sidewalk as the parade passed me by. I had already had a taste of that in my forties with back surgery. I had been stricken with sciatic pain, a powerful searing pain like a toothache that travels from the lower spine, down the back of the leg and into the foot. While I suffered from this, I was still walking to the nearest transit stop and slowly making my way to the CBC broadcast studios; there I had to stand on set and host a one-hour town hall talk show five days a week. I walked to the train very slowly as people thirty years older breezed past me. Every step was excruciating.

Through that pain I gained humility. I had typically ignored stories about people with lasting injuries, but now I cried to think of these poor people who just happened to be in the wrong place at the wrong time, often described in newscasts as having sustained serious but non-life-threatening injuries. Perhaps they'd been looking left when a car, approaching from

the right, came out of nowhere and changed their lives forever. My heart went out to them as I started to get an inkling of how so many people suffer chronic pain without respite.

You see, every passing malady confronts the false sense of entitlement we all have, which Jenkinson writes about in *Die Wise*. We wrap ourselves in the nostalgic fog of the ego, the urge to stay the same, forever and always. Our hair never turns grey; our clothes stay tight to the body. We yearn not for wisdom but for a kind of vitality that reassures us that we still have utility; that someone will need us, pay us, hear us. Like Tom Cruise or Jennifer Aniston in their fifties, grabbing you by the voyeuristic eyeballs and challenging you to think of them as anything other than sexy twenty-six-year-olds.

In a world where so much is commodified, we become a demographic – in this case one that apparently ambles to the drugstore for the seniors’ discounts. Or, if the fifty-five-plus magazines are to be believed, we spend our days travelling the world, hang-gliding into our late seventies and getting a little “work” done on our bodies. We must prove that we are still vital, active and – most importantly – buying stuff. When you’re thirty-seven, you still have at least four more car purchases ahead of you. By sixty-seven, you’re looking for a vehicle that has some lumbar support and, the good Lord willing, heated seats.

I’ve had my brush with mortality, my wake-up call. But let’s tap on the brakes here. I was still in my mid-fifties, with a second family that included two new boys under four. I had been blessed through my working life with many meaningful opportunities. Still, I was feeling the need to retreat from parts of that life.

I had been a broadcaster and a public figure for a long time, and some of it had been hard. I was aware when someone would

walk by and whisper my name, impressed not necessarily by me but by the fact that I was from the land of television. I, like many of my colleagues, always felt a bit awkward about that. Sometimes a person would stand in front of me, looking me over like a department store mannequin, and say to their friend, “Do you know this guy? Wait, don't tell me your name. You're on TV. It's one of those funny names, Brent, Brent-something.”

“No, Ben! It's Ben-something,” her friend would pipe in. I have to tell you, these folks must be angels sent down to poke your ego in the eye. Yet, I had seen so much beauty, interviewed so many fascinating people and reaped the comforting rewards that come with being a public person in Canada. But now, with what I had been through, a door had been opened – this door had been opened before in my life, I just hadn't walked through.

The lessons of life are only heard when we are ready to listen.