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Using Humor in Healthcare: Is It A Risk Worth Taking?

Ava Trinh

While working at a small chiropractic practice in the summers, I noticed a comfortable and fond atmosphere between the patients and the chiropractor. The chiropractor formed relationships with most of his patients from the beginning, which I saw resulted in a build-up of trust and genuine satisfaction from both parties. His patients and shadowees have told me that the “environment at this office was so different” from other chiropractic clinics in that interactions were more personal and gleeful and not so “dull” or “superficial.” They treated each other as if they were good long-term friends, almost like family. Aside from his effective treatments and genuine care, I believe that some other factors also contribute to these positive reviews and chemistry: personal conversations infused with humor. During each appointment with a patient, he would converse with them with lighthearted, humorous comments. He would say, “What’s up old man, long time no see!” to a patient he had seen just last week, or “How are you and your 20th girlfriend doing?” to a patient who shared with him his love life. The patients and doctor would meet and leave with smiles and chuckles; an overall positive impact was made with each visit. Because I suspected that humor played a significant role in strengthening the relationships between the chiropractor and his patients, and thus contributed to a thriving business as patients spread positive awareness of his practice, I investigated humor’s role and impact in healthcare and the work field. While I researched its significance in these fields, I also came across controversies regarding this subject. Some individuals consider the use of humor in professional settings as inappropriate and risky, while others, in growing numbers, argue that it is a good relationship-building tool and provides numerous health benefits. What needs to be considered by all is that the primary goal in healthcare is to improve patient well-being while respecting their individual needs and the specific context of care, and adhering to ethical standards. Breaking down humor’s advantages and methods in which it can still adhere to healthcare’s primary goal will prove how it serves as an indispensable tool in these fields, outweighing the risks and cons it is perceived to have. As I head towards the medical field, I want to explore this subject and the topic of relevant ethics, the power of humor, and proper usage so that I can learn and also share with others an inexpensive way healthcare workers can help enhance patient relationships, health, and human performance and build a thriving healthcare community.



For ages, humor has been integrated into healthcare as a perceived aid in the healing process. For example, in the 14th century, French surgeon Henri de Mondeville used humor to distract patients from the pain endured during surgery as well as a therapy to aid recovery. German priest Martin Luther advised individuals with depression not to isolate themselves, but to surround themselves with friends who could joke and make them laugh (Savage et al.). During the polio outbreak in the 1930s, hospitals began bringing clowns in to cheer up sick children. It seemed as if a positive, light-hearted distraction from their condition helped boost the liveliness of patients and thus their mental and physical

health since the use of humor grew widespread throughout the years. Dr. Hunter “Patch” Adams, a doctor devoted to making people happier and healthier through humor, established the Gesundheit Institute in 1972, a hospital dedicated to spreading humor, fun, friendship and joy to patients. These examples serve to show that the belief that humor has therapeutic benefits has persisted for centuries.

Some caregivers, though, were still reluctant in using humor in healthcare because there was limited empirical evidence supporting the mechanisms mediating humor’s positive impact. With the lack of evidence, these caregivers deemed it not likely to be scientifically useful. However, this all changed in the 20th century when pioneering investigators examined the psychophysiological mechanisms of humor. Psychology Professor at Stanford University William F. Fry used a pulse oximeter and recorded that an increase in ventilation and muscle activity and the creation of forceful exhalation used to remove pulmonary secretions resulted after three minutes of continuous laughter. Dr. Lee S. Berk and colleagues also conducted a pioneering study in which they examined the impact of laughter-induced eustress (a “positive emotional state”) on cortisol and catecholamine concentrations and observed that humor reduced cortisol and catecholamine levels as well as increased the production of antibodies and endorphins, the body’s natural pain killers (Berk et al.). Furthermore, a more recent study conducted by Michael Miller, director of the Center for Preventive Cardiology, reported that laughter is linked to the healthy function of blood vessels. On another note, mental stress can negatively impact the endothelium by causing vasoconstriction, which could lead to a buildup of cholesterol and potentially to coronary artery disease. Miller’s studies documented that, during laughter, the endothelium facilitates vasodilation and an increase in blood flow (Miller et al.).

Just as humor has been scientifically found to be linked to many internal bodily benefits, it is also believed that humor can strengthen personal relationships and build bonds between patients, staff, and healthcare professionals. In 2013, Researchers Tanay and colleagues published a meta-analytical study that evaluated the effects of humor on adults undergoing cancer treatment. The researchers found that humor “enhances feelings of closeness or togetherness when shared in the context of trust between the patient and nurse and may be used as a coping mechanism in a stressful situation” (Tanay et al.). Recognizing and making light of incongruities or stressful situations such as the initial diagnosis of a disease or treatment process can elicit a positive emotional response that nurses and patients can share. Such shared experiences can create a sense of togetherness in the nurse-patient relationship. This can help patients feel less alone and more capable of handling their illnesses or injuries. Humor can build trust and, as research suggests, when two people (even strangers) laugh together, they are far more likely to like one another.



To provide more emphasis on how humor can positively affect overall health, medical researchers argue that laughter may also improve patients’ and staffs’ moods and help “lessen stress, depression, and anxiety,” making individuals “feel happier and relaxed” (Mayo Clinic). Radiation oncologist Rajiv Samant shared his experience in the healthcare facility and claimed that humor

helped elevate the atmosphere for both his patients and health care professionals by reducing stress, elevating moods, and improving communication (Samant). Samant reported that his patients appreciate the use of humor and would like for their healthcare providers to reciprocate their jokes, smiles, and laughs, especially those cancer patients who want to be reassured that things are okay and try to take light in their situation. Furthermore, Psychology researchers Rene T. Proyer and Julia Raecke studied a group of Medical Assistants in Germany and reported that the Medical Assistants use humor for various coping and social and educational purposes (Raecke and Proyer). In a study conducted on nurses' experiences of humor in clinical settings, researcher Fatemeh Ghaffari and colleagues also reported that the majority of nurses believed that humor affected patient outcomes positively and that it preserved and promoted nurses' physical and mental health. They have used humor to cope with stressful personal-environment relations (e.g., dealing with patients who violate social norms) and to increase work enjoyment, frequency of flow, and perceived meaningfulness of work (Bartzik et al.). Based on their experiences, nurses considered humor a workplace requirement and essential for patient care in stressful situations (Ghaffari et al.).

While a growing number of individuals deem humor to be a positive tool in healthcare, there are those who consider humor to be dangerous as it has potential to harm relationships and even business. For one, it can lead to misunderstandings, offense, or discrimination when used inappropriately. Humor can be misinterpreted by the patient, which may cause more confusion or harm to both the patient and the staff. There are patients who say that they are "horrified that they could one day be the target of their physician's jokes" (Hardy). Others argue that it can be frustrating to a patient when a healthcare provider appears not to take something seriously when they use humor and consider it inappropriate when humor is used in a setting where critical conditions exist. It is argued that derogatory or cynical humor exists within healthcare professionals and students when they need to release stress or let off steam, and they happen to direct it towards patients, which is "unprofessional and unethical" (Aultman & Meyers). This goes to show that even some healthcare individuals find the use of humor unnecessary and potentially problematic.



Another issue that humor carries is the legal risks associated with it. These risks traditionally take the form of legal claims such as defamation, trademark dilution or infringement, harassment, and infliction of emotional distress. A doctor's use of humor can lead to a malpractice claim. The case of D.B. vs Ingham is a prime example. The patient (D.B.) was undergoing a colonoscopy and the anesthesiologist (Ingham) made several offensive comments about the patient to the gastroenterologist she was working with. Ingham's statements regarding D.B. were mean-spirited and extreme; she insulted the patient repeatedly, used disparaging language, and made false allegations about his medical condition. The jury found in favor of the plaintiff and awarded him 2 six-figure awards (along with punitive damages)—one award for a claim of defamation and the other for medical malpractice, presumably because such "jokes" between treating physicians were closely attuned enough to the patient's medical procedure to be considered within the scope of practice for medical malpractice purposes.

While considering these risks, it is important to remember that humor in medicine has noteworthy positive and therapeutic benefits. Besides, these risks can be minimized or avoided when conservatively selecting the content and manner of humor. For example, it is best to avoid using humor during any acute crisis (but it can help to adjust the crisis afterwards), when the patient needs quiet time, or when a patient is trying to communicate something important or trying to come to grips with any emotional crisis. It is also important to avoid ethnic jokes, sarcasm, and mockery, or humor at the expense of any other person (laugh with, not at), or joking about any patient or their condition. To avoid pitfalls is to remain positive and inclusive. With these considerations in mind, humor can actually be a low-risk way to positively influence some patients' experiences when used in combination with professional empathy, compassion, and knowledge; humor can humanize and strengthen physician-patient encounters.

It is also worth noting that maintaining professionalism and adhering to ethical standards is essential. The use of humor should have a balanced and context-dependent approach—that the appropriateness of humor in healthcare depends on the specific context, the patient's needs, and the healthcare provider's judgment. Humor should not be overused, underused, or compromise the quality of care or the patient's comfort. The common ground that all sides of the argument agree on is that the primary goal in healthcare is to improve patient well-being while respecting their individual needs and the specific context of care.



“HUMOR REMINDS US TO BE JOYOUS AND POSITIVE; IT REMINDS US TO BE HUMAN”

Medical individuals like Rajiv Samant (mentioned above) and medical student Everett Claridge advocate for ethical training and overall use of humor to be implemented in healthcare education. They argue that humor should be considered part of the communication skills training for all healthcare professionals, suggesting that it can elevate the atmosphere for both patients and health professionals and benefit mental health. However, there are also those, like educators and administrators, who will say that medical schools are already filled with more important and serious learning objectives and humor training shouldn't be as focused on. In response to that, Claridge argues that the

sheer stress of a demanding curriculum ... often leaves a 'doom and gloom' impression of medicine. It can be draining. Humour reminds us to be joyous and positive; it reminds us to be human. Medical trainees have argued that the stamina needed when caring for a patient with challenging conditions can come, in part, from the ability to find humour in the world of medicine. (Claridge)

With both arguments in mind, where one side is in favor of medical humor while the other side is against it, I've found more supporting weight to argue that humor is too useful of a tool for it not to be used. The increased scientific evidence supporting the emotion-mind-body relationship clearly documents that mood, thoughts, and feelings have a profound impact on our immune system and general health. When used in combination with professional empathy, compassion, and knowledge, humor carries the potential to create this impact and improve patient well-being, which is a primary goal in healthcare. While I understand that humor may not come naturally for some—and don't suggest for clinicians to spend more time trying to figure out how to make me laugh rather than staying on current best practices in their field, I encourage all that it's a habit worth learning considering its benefits in the healthcare world.

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