

A Commentary on Laughter Therapy

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Introduction

My article “El poder terapeutico de la risa” (The therapeutic power of laughter) was published in 2015 in the journal ‘Bioethics Update’ 1(2): 130-142 and was the most read of that journal in 2015 (560 downloads). It addressed a topic that was still rather marginal in the literature at that time, and was considered by many traditional doctors more as a curiosity than a serious medical issue. During the discussions that took place at the Interdisciplinary Center for Bioethics of the Panamerican University of Mexico City, however, it became soon clear that this was not a form of ‘alternative medicine’, but rather a new method susceptible of controlled applications in certain clinical situations. The scientific legitimacy of this method is supported by the analysis of the objective anatomical-physiological effects that laughing produces at the bodily level, but this is not the most significant point. Of direct medical interest is the appreciation of the positive effects that laughter produces at the psychological level and have impacts on the health of the patient. This topic has been studied in its general features [1-4], and with specific attention to laughter in [5-7]. One can say that it is a particular aspect of psychosomatic medicine that, as such, has a rather long tradition.

This theoretical framework has inspired practical applications especially as a valuable support in clinical situations that usually entail the use of anesthetic means, in particular in the case of pediatric treatments. Rigorous statistics have proved the efficiency of the laughter therapy in reducing the need of anesthetics in treatments with children [8]. As a consequence, this has become a specialized field of medical praxis, and specialized teams of ‘clown-doctors’ exist today at several health institutions.

Considered from a purely scientific point of view, this method appears as a confirmation of the doctrine of psycho-physical relations that is often accepted only in very general terms, but seldom taken seriously as a frame for medical diagnosis and therapy. From a wider point of view, the evidence of this psychophysical unity offers a support for the bioethical consideration of illness and of the patient, whose global ‘human nature’ oversteps the strict limits of biology and physiology and encompasses several other dimensions of the human life. This broadened optics has found its expression in the ‘ethics of care’ which includes a variety of sectors. Some of them are of a more specific medical nature (such as palliative treatments and care), and others concern the ‘quality of life’ in a fuller sense. Laughter therapy has attained a significant space in this new context, finding application in the care of elderly people. This is a natural consequence of the increasing importance that geriatrics has acquired today also in socially developed countries. Indeed the aging process experienced by developed countries means that the elderly constitute an age group that deserves specific attention, and one of the main current societal challenges is to maintain and improve the quality of life of the elderly. In this context, the benefits of participating in a Laughter Dynamics

activity for older people, in terms of its effects on their subjective and psychological well-being, has been the object of serious and convincing studies [9], and this issue finds significant attention in the literature [10-15].

From the bioethical point of view this broadening of the attention to laughter is not that surprising, because it mirrors the interdisciplinary approach of bioethics strictly linked with philosophical anthropology, that is, with the global understanding of the human being. In this understanding the relevance of laugh and humor has been stressed by several authors: see for instance [16-19]. From all that we can conclude that Laughter Therapy constitutes a significant example of the new horizons in which medicine is understood in contemporary societies.

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