

# Clown therapy: not only a pediatric matter

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Clown therapy is currently an important aspect of the hospital care setting in pediatric units worldwide, since the notorious Patch Adams first introduced this practice in hospital not too long ago. As he recently reiterated, love and humour are key features of this context of the medical setting (1).

Particularly, clown doctors help surgical and oncological patients to deal and forget the stress and anxiety of surgical procedures or specific debilitating therapies. Lots of studies have been published over the years regarding the effects of clown therapy on pediatric patients. In detail, only in the last few years, Meiri *et al.* studied the role of clown therapy in reducing the stress and anxiety during intra-venous cannulation or venipuncture in children aged 2–10 years compared with local application of an anesthetic cream (EMLA<sup>®</sup>, AstraZeneca, London, UK). They concluded that medical clowns help to reduce stress and anxiety, even if medical clowning does not reduce the pain in these children (2). Similarly, Felluga *et al.* found that clown therapy is useful in reducing children's anxiety during painful procedures also in an emergency department (3). Furthermore, two recent meta-analysis of the literature confirmed the important role of clown therapy in reducing stress and anxiety both in children and their parents before surgery or invasive investigations (4,5). Meanwhile, literature is scant of studies and evidences about clown therapy and its effects on adult patients. Notably, Dionigi and Canestrari found that clown doctors could be a good expedient to reduce stress and anxiety in non-children patients (6). Despite this, further studies are needed to deepen and confirm the role of medical clowning in adults.

In conclusion, as already promulgated by Patch Adams, clown therapy should be encouraged also in adult patients undergoing specific invasive procedures and its effects on

these patients should be studied more in deep. Additionally, this could help all of us to not forget that we are not only surgeons or doctors and, moreover, that they are not only patients.

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## Footnote

*Conflicts of Interest:* The author has no conflicts of interest to declare.

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