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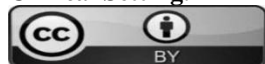
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A Pragmatic Realization of Humor in Selected Physician-Patient Speech

A B S T R A C T

Linguistically, features such as puns, irony, sarcasm, wit, and contrastive utterances often contribute to the complex concept of humor that people associate with communication. Humor involves not only linguistic elements but also extralinguistic factors that shape how it is delivered and perceived. Paul Grice (1975) proposed four cooperative principles—maxims of quantity, quality, relevance, and manner—that govern successful communication. However, Attardo (1990) argues that violating these maxims is a common phenomenon in humorous discourse. This study aims to analyse physician-patient conversational extracts through a linguistic pragmatic lens, using the classification system from Wit and Humor in Discourse Processing. It explores the mechanisms by which violations of Gricean maxims contribute to the creation of humor. The research adopts a qualitative approach, focusing on two levels of analysis: the pragmatic realization of humor and the violation of Gricean maxims. Findings indicate that the most frequently violated maxims in the selected extracts are the maxims of quality and manner. Furthermore, irony emerges as the most prevalent pragmatic mechanism used to generate humor through these violations. This study provides insights into the interplay between linguistic pragmatics and humor in medical communication contexts.

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الادراك التداولي للفكاهة في مختارات للحديث بين الطبيب والمريض

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المستخلص

من الناحية اللغوية، غالبًا ما تساهم سمات مثل التورية والسخرية والتهكم والطرفة والتعبيرات المتناقضة في المفهوم المعقد للفكاهة الذي يربطه الناس بالتواصل. لا تتضمن الفكاهة عناصر لغوية فحسب، بل تتضمن أيضًا عوامل غير لغوية تشكل كيفية توصيلها وإدراكها. اقترح بول جريس (١٩٧٥) أربعة مبادئ تعاونية - قواعد الكمية والجودة والملاءمة

والأسلوب - التي تحكم التواصل الناجح. ومع ذلك، يزعم أثارو (١٩٩٠) أن انتهاك هذه المبادئ ظاهرة شائعة في الخطاب الفكاهي. تهدف هذه الدراسة إلى تحليل مقتطفات المحادثة بين الطبيب والمريض من خلال رؤية برجماتية لغوية، باستخدام نظام التصنيف من كتاب الذكاء والفكاهة في معالجة الخطاب. يستكشف الآليات التي تساهم بها انتهاكات مبادئ جريس في خلق الفكاهة. يتبنى البحث نهجاً نوعياً، مع التركيز على مستويين من التحليل: الإدراك البرجماتي للفكاهة وانتهاك مبادئ جريس. تشير النتائج إلى أن المبادئ الأكثر انتهاكاً في المقتطفات المختارة هي مبادئ الجودة والأسلوب. علاوة على ذلك، تظهر السخرية باعتبارها الآلية البرجماتية الأكثر انتشاراً المستخدمة لتوليد الفكاهة من خلال هذه الانتهاكات. تقدم هذه الدراسة رؤى حول التفاعل بين البرجماتية اللغوية والفكاهة في سياقات الاتصال الطبي.

الكلمات المفتاحية: التداولية ومبادئ غرايس ، التداولية والفكاهة، الفكاهة والبيئة السريرية.

1. Introduction

In addition to improving patient-provider relationships, creating a safe environment, building trust, enhancing comprehension, and increasing information memory, effective communication is critical for facilitating talks between patients and healthcare providers that will lead to favorable outcomes. Patients can benefit greatly from the abundance of knowledge that healthcare professionals can impart to them; nevertheless, without good communication, the knowledge required to deliver high-quality treatment and enhance patient outcomes cannot be communicated (Slatore et al. 2010, p.138). In the healthcare setting, lack of interaction can result in unintentional patient discontent with care, a decline in patient participation in the discussion, and misunderstandings of the information shared (Linn et al. 2012, p. 871)

Laughter's effects on the mind of human, body, and spirit have studied in various fields, including medicine, psychology, and social sciences, and used in various settings. Many professionals overlook laughter and humor as healing tools in alternative and modern medicine. Since comedy is frequently seen as non-serious, professionals need to abandon traditional therapies and acquire methods for generating laughter and fun. Although studies indicates that humor and laughing can be utilized as a treatment for physiological benefits, they are frequently viewed as a means of distraction. They do, however, call for discernment and understanding and are susceptible to misunderstanding. To help clients more effectively, rehabilitation counselors need to be aware of the psychological and physical advantages of humor and laughter (Cassell, 1974).

The researcher uses a pragmatic approach to examine the types of humor that physicians and patients use to communicate. Humor can be interpreted from a pragmatic perspective as a departure from the Cooperative Principle. This study's exclusive focus is on humor as a deviation from the Cooperative Principle and its principles. Using the four Cooperative Principle maxims, the researcher will analyze the characters' verbal humor expressions and combine them with a classification system that is typical of the kinds of joke taxonomies humor researchers have found helpful.

The researcher has proposed such questions, as clarified above as follows:

1. What are the pragmatic realizations of humor employed by the selected physician-patient conversations based on the classification system from *Wit and Humor in Discourse Processing* by Long and Graesser in 1988?

2. How are the Grice's Maxims violated in every type of such humors in such conversations?

2. Theoretical Framework

2.1 Key Words

2.1.1 Pragmatics and Gricean Maxims

Chapman & Clark (2014, p.122) said that pragmatics is "an aspect of the study of language in use. It is concerned with how language users interact, communicate and interpret linguistic behavior". Pragmatics, as a subfield of linguistics, focuses on language communication, interaction, and interpretation. It comprises speech act theory, politeness, presupposition, turn taking, implicature, and other approaches. In 1975, Grice developed four maxims called the "Conversational Maxims." By violating such maxims, the procedure for obtaining humor from participants can be clarified (Renkema, 2004, p.20). Grice summarizes them as following:

- ❖ Maxim of quantity,
- ❖ Maxim of quality,
- ❖ Maxim of relation, and,
- ❖ Maxim of manner (Grice, 1975, pp.45-46).

There were plenty of times, Grice knew, when people did not follow the four well-known maxims, he originally enumerated them in 1975. Wilson and Sperber (1990) stated that since pragmatics just addresses verbal communication, and humor is neither exclusively nor even largely verbal, a more constrained view of humor is required within the context of pragmatic theory. In spite of this, it is believed that there are many benefits to approaching humor in this way. It must take a closer look at the goals of pragmatic theory in order to comprehend why. Pragmatics explains what an utterance expresses, whereas semantics explains what a sentence represents.

The significance of the relevance theory surpasses that of its competitors. Wilson and Sperber (1990) move past and just explain how utterances are understood to explore the larger issue of the principles guiding our information processing, whether it is communicated verbally or non-verbally. Relevance theory, a communication and cognition theory, aims to account for a wider range of data, including two sources of humor, challenging speech act theorists. They are:

- 1) non-verbal humor; and
- 2) unintentional humor. (Wilson & Sperber, 1990)

2.1.2 Humor

Humor is an entertaining act that uses language elements to create laughter, amusement, or a funny perception. Its primary function is to achieve a playful result through incongruity, hostility/disparagement, and release (Attardo, 2010). Humor is often attributed to the playful violation of language rules (Goldstein, 1990). Humor is cultivated through aggressiveness, contempt, and ridicule (Raskin, 1985). Release theory defines humor as a psychoanalytical concept that liberates language rules from linguistic constraints (Attardo,

1994; Raskin, 1985). Humor is conveyed through various mediums, including radio, television, sitcoms, blooper shows, stand-up comedy, political satire, and humorous advertisements, also in newspaper comic strips and cartoons, comedy movies, and humorous books (Martin, 2007, p.10).

- **Non-verbal Humor**

The followings are types of non-verbal humor:

- ❖ **Ridicule:** This is the first type which cannot be verbalized. It is a kind of mishap which happens to another human being and causes laughter to the observer. (Raskin, 1985, p.24).
- ❖ **Visual humor:** as in silent films, cartoons and clowning in which the interaction is possible with visuals to create humor (Ross, 2005, p.33).
- ❖ **Gags:** non-verbal humor depends on making traps for others causing laughter to both (Raskin, 1985, p.25).

- **Verbal Humor**

Martin (2007) states that Long and Graesser in their book *Wit and Humor in Discourse Processing* identify 12 categories of spontaneous humor, The groups were categorized based on their intentions or humor use, these include:

1. **Irony :** The speaker's statement has a literal meaning that contradicts the intended meaning.\
2. **Satire:** aggressive humor which refers to a form of humor that humorously criticizes social institutions or policies.
3. **Metaphor:** it a figure of speech that compares two different things without using the words "like" or "as." It describes an object or action in a way that is not literally true but helps explain an idea or make a comparison, it is deemed as a source of conversational humor,
4. **Understatement and (5) Overstatement:** Repetition of something with a different emphasis can change its meaning.
6. **Self-deprecation:** Humorous remarks often target oneself as the subject, demonstrating modesty, easing the listener, or ingratiating oneself with the listener.
7. **Teasing:** Humorous remarks are humorous comments made at the listener's personal appearance or foibles, without serious insult or offense, unlike sarcasm.
8. **Rhetorical questions:** Rhetorical questions are often humorous as they violate conversational expectations and surprise the person asking, often intended to entertain a conversational partner.
9. **Clever replies to serious statements:** Misconstrued statements or questions are clever or nonsensical responses to serious statements or questions, intentionally misinterpreted to convey a different meaning.
10. **Double entendres:** Misperception is the deliberate misinterpretation or misinterpretation of a statement or word to evoke a dual meaning, often sexual in nature.
11. **Transformations of frozen expressions:** The process involves transforming commonly known phrases, adages, or sayings into innovative and original statements.

12. Puns: The use of humor of a word that evokes a second meaning, typically based on a homophone.

These various types of humor are categorized as "Non-verbal Humor" and "Verbal Humor.". This study focuses only on the verbal humor.

2.1.3 The Violation of Pragmatic Maxims

Attardo (1994) explores Paul Grice's Cooperative Principle and conversational maxims in his writings on humor pragmatics. He presents the problem of maxims as a paradox, arguing that jokes frequently violate maxims, yet they can convey information without noticeable noise. Attardo's ruling states that jokes are paradoxical as they violate the Maxims of Quality, Quantity, Relationship, and Ambiguity, making them a violation of the CP. The concept of communication should be expanded to accommodate different levels and types (Attardo, 1993). The Relief theory suggests humor as a stress reliever, releasing excess nervous energy, leading to laughter and happiness, thereby reducing psychological stress (Buijzen, 2004). The Relief theory suggests that humor can help overcome sociocultural inhibitions and reveal suppressed desires, causing laughter when tension builds up as the tickler ticks "strikes." (Schaeffer 1981). Herbert Spencer, Freud, and Kant argued that humor physiologically releases psychological energy, highlighting it as an economic phenomenon (Clewis, 2020). Eddie Tafoya's relief theory suggests humans balance physical and psychological needs, often causing guilt and lack of fulfillment, which can be temporarily relieved through humor in literature (Tafoya, 2009).

2.1.4 Humor and Clinical Setting

Robinson (1991) states that although medicine is a serious profession, doctors have long attempted to inject humor and lightness into the more serious parts of their work. Although humor is common in healthcare settings, much of it takes place amongst professionals rather than between patients and doctors. Irony, "put-downs," and gallows humor are examples of this type of humor that emerges in reaction to the challenging and stressful circumstances that develop in the medical field. The clinical setting of humor determines its value in the doctor-patient interaction. Depending on various circumstances, patients, and doctor personalities, a humorous attempt may be therapeutic, alienating, or just a failure. The model or style of the doctor-patient relationship that is being used is one aspect of the setting.

Beck (1997) argues that despite humor being a potent tool for crisis resolution, individuals often find it hurtful during such situations. The butt of a joke determines its appreciability, with self-deprecating humor generally appreciated, while humor aimed at a group or individuals used to degrade or insult is generally unappreciated. In a crisis, individuals often integrate the situation into their emotional being, interpreting humor as aimed at them, leading to feelings of hurtfulness or insensitivity. Crisis humor's health benefits require individuals to maintain a sufficient distance from the crisis, whether it's proximal, emotional, or temporal. Humor explains why we enjoy insulting others and how social intimacy can arise when joke-telling is used cooperatively.

Wender (1996) stated Humor in medicine helps bridge interpersonal gaps, communicate caring, and alleviate anxiety. Patients use humor to express frustration and reveal hidden agendas, allowing physicians to address deeper concerns and provide support. Humor can alleviate stress in patients and medical professionals by temporarily forgetting anxiety and pain, and by fostering open communication, it can ease difficult issues and alleviate tension in medical settings (Rakel, 1989). Introducing humor and laughter into the health care setting is intended to improve a patient's mood and quality of life (Simon, 1989).

3. The Analytical Part

3.1 Data Analysis

The data for this study are five extracts collected randomly from different online web sites.

Example 1:

A patient sits in the room of examination.

A doctor enters the room *"Hello, how are you?"* in a pleasant manner

The patient replies, *"Fine."*

The doctor counters, *"Not true,"*

[The patient laughs]

The First Level : The Pragmatic Realization of Humor

1. **Irony:** The irony lies in the immediate contradiction of the polite, socially expected response. The speaker humorously acknowledges that the standard response ("Fine") is not accurate, which adds a layer of irony to the interaction.
2. **Pun:** The doctor used humor to reassure her patient, demonstrating that they are more aware than the patient, and to validate and support them, thereby reducing relational distance.
3. **Irony :** The humor arises from the unexpected contradiction. The typical response to "How are you?" is "Fine," but immediately contradicting it with "Not true" catches the listener off guard and creates a humorous effect

The Second Level : Grice's Maxims Violation

1. **Maxim of Quality:** The initial response "Fine" is contradicted by "Not true," indicating that the first statement was not truthful. The maxim of quality, which mandates speakers to provide truthful information, is violated.
2. **Maxim of Manner:** The contradiction introduces ambiguity and a lack of clarity. The listener is initially given a standard, clear response ("Fine"), but this is immediately muddled by the follow-up ("Not true"), which can be confusing. This violates the maxim of manner, which calls for clarity and avoidance of ambiguity.

Example 2:

A doctor enters a patient's room.

The patient, dressed in bed, is just finishing breakfast.

By greeting the patient, *“Good morning. Looks like you ate well. Why didn’t you leave any for me?”* [The patient laughs.]

First Level : Pragmatic Realization of Humor

4. ***Hyperbole and Exaggeration:*** The suggestion that the person ate so much that there was nothing left is an exaggeration. This hyperbole enhances the humor by making the situation more absurd and playful than it actually is.
5. ***Irony:*** There is an ironic twist in the playful complaint. The speaker is pretending to be upset about not getting any food, but the light-hearted tone indicates that it is not a genuine grievance.
6. ***Rhetorical Question:*** The question is a playful and non-serious accusation. It implies familiarity and a close relationship between the speaker and the listener, where such teasing is understood and appreciated.
7. ***Metaphor:*** Referring to the listener having "eaten all" is a metaphorical way to comment on their appearance or the quantity of food they might have consumed. This figurative language adds a layer of interpretation that might not be immediately clear to all listeners.

The Second Level : Grice's Maxims Violation

1. ***Maxim of Quality:*** The speaker likely does not genuinely believe that the listener ate all the available food. The statement is exaggerated and not meant to be taken literally. The speaker's exaggeration goes against the maxim of quality, which mandates the provision of truthful and evidence-based information.
2. ***Maxim of Manner:*** Instead of directly expressing a feeling or observation, the speaker uses an indirect and humorous accusation. This indirect approach can be seen as ambiguous because it is not immediately clear whether the speaker is serious or joking.
3. ***Maxim of Relation:*** The humorous twist about eating well and not leaving any food is not directly relevant to the context of a morning greeting. This unexpected connection between the greeting and the playful accusation violates the maxim of relation by introducing an unrelated topic.
4. ***Maxim of Quantity:*** The violation of the maxim of quantity through the inclusion of unnecessary and implied information serves to create humor and engage the listener. It makes the conversation more lively and entertaining, but it also provides more information than what is strictly required for the context.

Example 3:

An obesity patient asks her slim doctor, *“How do you stay so thin?”*

The doctor demurs, *“My wife can’t cook.”*

[patient laughs]

First Level : Pragmatic Realization of Humor

8. **Overstatement :** The response exaggerates the situation by implying that the wife’s cooking is so bad that it has a direct impact on the speaker’s weight. This hyperbole adds to the humor by amplifying the situation beyond realistic proportions.
9. **Irony:** There is an ironic twist in the response. Instead of attributing staying thin to a common reason like diet or exercise, the speaker humorously credits the wife’s cooking, which is not typically considered a positive attribute. This irony adds a layer of sophistication to the humor.
10. **Irony:** The humor arises from the unexpected connection between the question about staying thin and the seemingly unrelated answer about the wife’s cooking skills. This incongruity catches the listener off guard, creating a humorous effect.
11. **Clever replies to serious statements:** The response is concise and witty, delivering the punchline in a brief and impactful manner. This economy of words enhances the comedic timing and effectiveness.

The Second Level : Grice’s Maxims Violation

1. **Maxim of Quality:** The speaker likely does not literally mean that their thinness is solely due to their wife’s inability to cook. The statement is hyperbolic and not a factual explanation. This exaggeration and potential untruthfulness violate the maxim of quality, which requires providing truthful and evidence-based information.
2. **Maxim of Manner:** The response uses humor and sarcasm, which introduces ambiguity and potential confusion. It’s not a straightforward or clear answer, violating the maxim of manner that calls for clarity and avoidance of ambiguity.
3. **Maxim of Relation:** it seems that the response is relevant to the question about staying thin, but it does not address it in an unexpected way to bring humorous manner.

Example 4:

An old patient says *“I’m like the old gray mare—she ain’t what she used to be.”*

As complaining of her disabling osteoarthritis remarks,

Her physician replies, *“So why not just stay home in the corral where it’s comfortable and stop worrying about getting out?”*

[patient laughs]

The First Level : The Pragmatic Realization of Humor

12. **Metaphor:** "Stay home in the corral": This part of the statement extends the metaphor of the "old gray mare." The "corral" represents a safe, comfortable, and familiar place.

13. **Metaphor:** "Stop worrying about getting out": This suggests that the speaker (the "old gray mare") should avoid the stress and effort of trying to do things they might no longer be capable of or comfortable doing.
14. **Irony:** The doctor uses humor to gently suggest that perhaps the speaker should accept their current limitations and focus on comfort and well-being rather than pushing themselves too hard.
15. **Rhetorical Question:** The response is empathetic but delivered in a light-hearted and humorous manner. The doctor is acknowledging the speaker's feelings of aging or decreased ability, but doing so in a way that doesn't feel harsh or discouraging.

The Second Level : Grice's Maxims Violation

1. **Maxim of Manner:** The statement uses metaphor and humor, which introduces a level of ambiguity and non-clarity. It's not straightforward or literal, which might confuse someone who does not understand the intended humor. This indirect and figurative language violates the maxim of manner, which calls for clarity and avoidance of ambiguity.
2. **Maxim of Quality:** The speaker is not literally comparing themselves to a horse. The statement is a humorous exaggeration and not a factual description, violating the maxim that requires speakers to be truthful and provide evidence-based information. On the other hand, the doctor is not genuinely suggesting that the patient should literally "stay in the corral." The statement is not factually accurate and is intended as a humorous metaphor. This intentional untruthfulness violates the maxim of quality, which requires providing truthful information.

Example 5:

The patient says : "*Can't you prescribe some cyanide?*"

The doctor responses, "*I would, except it'd be bad for business—I wouldn't get any more follow-up visits out of you.*"

[Both laugh]

First Level : Pragmatic Realization of Humor:

16. **Irony:** The pragmatic meaning of the patient's phrase "*Can't you prescribe some cyanide?*" is often understood as an irony to express humor. In this context, the speaker is likely expressing extreme frustration, despair, or a sense of hopelessness, using an exaggerated and morbid request to highlight their emotional state.
17. **Irony:** There's a clear irony in the doctor's statement "*I would, except it'd be bad for business—I wouldn't get any more follow-up visits out of you*". The doctor ironically suggests that prescribing a lethal substance would be "bad for business" because the patient would not survive to make any more follow-up visits.
18. **Clever replies to serious statements:** The doctor's use of humor serves multiple pragmatic functions. It provides a gentle and non-confrontational way to refuse a request,

alleviates any tension or discomfort, and reinforces the professional relationship between doctor and patient.

19. *Hyperbole*: The request for cyanide is an extreme exaggeration, used to highlight the speaker's frustration or despair. This hyperbole creates a humorous effect by amplifying the situation beyond realistic proportions.

20. *Overstatement*: The statement assumes that prescribing cyanide is an overstatement to express distress, rather than a literal request.

The Second Level : Grice's Maxims Violation

1. Maxim of Manner: The statement is clear in its literal meaning, but it's ambiguous in terms of its true intent. The patient is using a dramatic and darkly humorous metaphor to convey their emotional state, which might obscure the true seriousness or context of their feelings. The doctor's response can be seen as ambiguous because it uses a business perspective to discuss a serious, life-threatening matter (cyanide prescription). This response is intentionally obscure to maintain the humorous tone. According to the Complexity, the response is less straightforward than a simple "no," introducing a layer of humor that requires the listener to interpret the underlying meaning.

2. Maxim of Quality: First, the intentional untruthfulness of the patient's speech goes against the maxim of quality, which mandates truthfulness and avoids providing false information. On the other side, the doctor humorously suggests that prescribing cyanide would be bad for business because the patient wouldn't return for follow-up visits. This statement is clearly false because the doctor would never actually consider prescribing cyanide, and it wouldn't genuinely be a business consideration.

3. 2 Findings

This study has found that all conversational maxims were violated to create humor in the five extracts. The most flouted maxims are the Maxims of Quality and Manner, while the least is the Maxim of Quantity.

Table 1. The frequency of the pragmatic realizations of humor

Pragmatic realization of humor	Frequency	Percentage
Irony	8	40%
Metaphor	3	15%
Pun	1	5%
Overstatement	2	10%
Clever replies to serious statements	2	10%
Rhetorical Question	2	10%
Hyperbole	2	10%
Total	20	100%

The table above shows the number and percentage of each pragmatic realization of humor by all the five examples. Almost it was created by the use of irony (40%), making it the most pragmatic realization in the examples, while metaphor is repeated three times about (15%), these numbers differ with the least use of pun (5%) of the examples. However there is an equal repetition of overstatement, clever replies to serious statements, rhetorical question, and hyperbole about (10%).

Table 2. The Frequency of the Grice Maxims Violation

Maxims	Frequency	Percentage
Quality	5	38.5%
Manner	5	38.5%
Quantity	1	7.5%
Relation	2	15.5%
Total	13	100%

The table above shows the number and percentage of each maxim's flouting by all the five examples. Almost they were created by violating the Maxims of Quality and Manner (38.5%), making them the most flouted maxims in the examples. However, this number differs with the least flouted maxim, the Maxim of Quantity, which was flouted in (7.5%) of the examples. As further proven by the percentages of flouting of the other maxim, the Maxim of Relation (15.5%). The differences in the number of flouting of each maxim imply that the observed speakers prefer to flout two maxims over the others as a strategy of creating humor.

Conclusions

This paper provides a pragmatic realization of humor in physician-patient communication with the violation of the Gricean maxims in relation to the *Long and Graesser* categories of spontaneous humor. The paper reveals that Gricean maxims can be violated in physician-patient contexts, often creating humorous situations. The most frequently violated maxims are manner and quality, with irony being the most common pragmatic realization.. Researchers discovered that physicians intentionally violate Gricean maxims, while patients unintentionally violate these maxims and create unintentional humor.

In conclusion, humor reduces stress, anxiety, depression, and psychological distress in everyday interactions and therapeutic settings. It improves communication, emotional ties, conflict resolution, and relationship building. Adding humor enhances moods and creates a more joyful environment, making doctor-patient relationships more enjoyable, regardless of the subject.

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