

# The Happy Warrior

By Philip A. Baer, MDCM, FRCPC, FACP

*Who is the Happy Warrior? Who is he  
What every man in arms should wish to be?  
—It is the generous Spirit, who, when brought  
Among the tasks of real life, hath wrought  
Upon the plan that pleased his childish thought:  
Whose high endeavours are an inward light  
That makes the path before him always bright:  
Who, with a natural instinct to discern  
What knowledge can perform, is diligent to learn,  
Abides by this resolve, and stops not there,  
But makes his moral being his prime care.*

- William Wordsworth, "Character of the Happy Warrior," written following the death of British war hero Lord Nelson.

I looked back on my recent and upcoming columns written for the CRAJ and noticed a theme. I seem to be complaining a lot these days, whether about difficulties with surveys, payments, lunch engagements or retail pharmacists. Yet I am very happy in my work and in day-to-day life. Maybe venting about certain frustrations keeps me feeling positive? The concept of the Happy Warrior resonated with me, so I researched it a bit further.

While the poem is British, the Happy Warrior label is most associated with American presidential politics. *The American Spectator* magazine noted in 2006 that Grover Cleveland "loved the poem, would gladly recite it to friends, and directed that it be read at his funeral." Franklin D. Roosevelt used it in a speech nominating New York Governor Al Smith for president at the 1924 Democratic National Convention. The Al Smith charity dinner in October 2016 in New York City featured the two presidential candidates, Trump and Clinton, attempting to make humorous speeches about each other. Neither one came across as a Happy Warrior. Most often, the label has been used to describe American vice-presidents, from Hubert Humphrey in the 1960s to Joe Biden most recently. Others tagged with the moniker include current U.S. House Speaker Paul Ryan and the late Senator Ted Kennedy.

Clearly, a rheumatology office/clinic is not always a happy place. There are pressures to see more patients, fit people in quickly and deal with paperwork, as well as managing interactions with staff. Bad news has to be delivered hon-

estly and with empathy, from diagnosing a young woman with systemic lupus to a middle-aged man with rapidly progressive scleroderma and pulmonary fibrosis.

However, many of our interactions are typical of chronic disease management: stable patients doing well, who require periodic reassessments of clinical status, handling of inter-current flareups and comorbidities, adjustment of medication and monitoring of labwork and other indices of disease activity. These visits can be enjoyable for all involved parties, and "laughter being the best medicine" may come into play. A few examples come to mind:

My long-time rheumatoid arthritis patient who is now aged 90-plus, mentally sharp, and always comes to the office with her daughter. I was checking her pulse, which was 52, not unexpected as she was taking a beta-blocker. She asked me the number and when I divulged it, she looked at me and, in deadpan fashion, told her daughter it was low because "the doctor doesn't excite me." So now even nonagenarians are having a laugh at my expense! We all had a good chuckle over that one.

Another featured a young man who started to see me at age 16 with anemia, short stature and lower extremity pain of several years duration. He turned out to have juvenile-onset spondyloarthropathy, with hip damage and recurrent knee effusions. Nonsteroidal anti-inflammatory drugs (NSAIDs), physiotherapy and steroid injections to both knees were very effective. A few years later, he showed up for an appointment quite excited. He was taking some computer courses in college and showed me one of his assignments, an animation entitled "The Magic Needle." He said it was based on his first visits to my office, and the relief he experienced from intra-articular steroids. The storyline fit, but I noticed he had changed my name and his, for privacy reasons I assumed. It was only on further review that I noticed my name was now Dr. Cooper, and my image looked a lot like Dr. Sheldon Cooper of "Big Bang Theory" fame. Now, I am left to wonder if he is commenting on my intelligence and diagnostic acumen, or my social skills or lack thereof. I can laugh at it, but I am not going to ask him what he was really trying to say.

Medicine is serious business, but there is scope to enjoy the work and be a Happy Warrior. Just don't smile broadly as you are plunging a needle into a patient's joint; people don't appreciate that at all.

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