Digital Device Use, Computer Vision Syndrome, and Sleep Quality among Saudi Arabia's Undergraduate Population

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ABSTRACT

Study design: Cross sectional

Background: Computers and visual display terminals are now an essential part of both our personal and professional lives thanks to phenomenal advancements in technology. Universities make substantial use of computers as a teaching and learning tool. Medical professionals can now access tools like medication formularies and medical calculators on their smart phones while holding text books. This necessitates reflection on the possible harmful health conditions that digital natives' increased screen time.

Methods: Data for this cross-sectional study were gathered using a specially designed questionnaire that included demographic questions as well as questions about CVS and sleep disorders. After the group of experts had several conversations, a questionnaire was created. A language expert, a researcher, and a subject specialist made up this panel.

Result: We had 60% prevalence of CVS, we did not observe any significant differences while comparing gender With 20-20 rules.

Conclusion: In summary ,a significant number of college students have both poor sleep quality and CVS. This is A serious public health concern that requires consideration.

Key words: Computer, Vision, Syndrome, Sleep, Diseases

INTRODUCTION

Computers and visual display terminals are essential part of both our personal and professional lives thanks to phenomenal advancements in technology. Universities make substantial use of computers as a teaching and learning tool. Medical professionals can now access tools like medication formularies and medical calculators on their smart phones while holding textbooks. This necessitates reflectiononthepossibleharmfulhealthconditionsthatdigitalnatives' increased screen time¹⁻³.

When people use computers for extended periods of time during the day or night, either compulsively or routinely, they might develop a constellation of ocular and extra ocular symptoms known as computer vision syndrome (CVS). These symptoms include dry eyes, irritated eyes, headaches, light or glare sensitivity, blurred vision, red eyes, burning eyes, excessive tear production, double vision, discomfort from contact lenses, changes in color perception, slowness in focusing, and pain in the neck, shoulders, and back. Ocular (anomalous ocular surfaces or accommodative spasms) and/or extra ocular (ergonomic) etiologies can cause CVS^{4,5}.

Being aware is a crucial first step toward recovery. It is critical that

aspiring physicians understand the current state of society. The foundation of managing CVS continues to be prevention. Reasonable information leads to understanding, and comprehension of the illness provides the means to put early preventive measures into place and start therapy^{6,7}.

Headaches ,double vision, blurred vision, eye strain, weariness, teary eyes, sensitivity to light, burning sensation, and dryness of the ocular surface are among the symptoms of CVS. It is impossible to exaggerate the importance of CVS for public health, and policymakers, physicians, and researchers must take note of this. The most common occupational hazard of the twenty-first century is computer vision syndrome, which, depending on the population under study, affects 63% to 89% of computer users^{8,9}.

Millions of people fall ages are at risk of CVS because to the increasing expansion of digital gadgets, which has become an indispensable part of daily life. All age groups' use of digital gadgets has significantly expanded in developed nations in recent years. Furthermore, the use of digital gadgets has grown in developing nations, leading to a high

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burden of CVS because of low accessibility, low use of PPE, and little time for breaks from using devices. A significant public health issue, CVS increases the risk of errors at work, impairs vision, lowers productivity, and lowers job satisfaction¹⁰.

A large portion of the population uses digital gadgets frequently, particularly computers and smart phones: university students. Even though the majority of university students in Aseer(KSA)possess and operate a laptop or desktop computer, students who use digital devices frequently are predicted to have lower-quality sleep. University students will be particularly negatively impacted by worse sleep quality because sleep is crucial for learning functions such as memory and focus^{11,12}. The association between undergraduates' usage of digital devices and their quality of sleep has not yet been investigated. Examining CVS and its relationship to sleep quality in an Aseer undergraduate population was the goal of the current study.

METHODS

Data for this cross-sectional study were gathered using a specially designed questionnaire that included demographic questions as well as questions about CVS and sleep disorders. After the group of experts had several conversations, a questionnaire was created. A language expert, a researcher, and a subject specialist made up this panel. The questionnaire Cronbach alpha was computed. Data were coded and entered into the SPSS ver. 20 program after collection in order to perform descriptive statistics mean, standard deviation, frequencies, and % ages were computed. At the 5% level of significance, chi- square test was employed to assess significance differences. Using an electronic version of the questionnaire, information was gathered from respondents, social media channels were also used to distribute the questionnaire. King Khalid University provided ethical approval. The time frame for the study was January 2023–July 2023.

RESULTS

The cronbach alpha of the questionnaire was 0.85, mean SD of age was

26.9 (12.5)

Aspertable 1, 66.67% were single while 26.67% were married, 42.0% were using spectacles 95.6% using Electronic devices in bedtime.

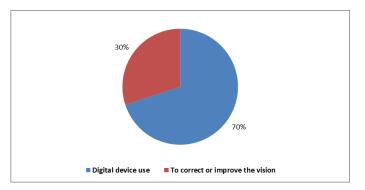


Figure1:Reasons for usage of spectacles

As per figure 1, 30% used spectacles for to correct or improve the vision, while 30% for usage of E- devices.

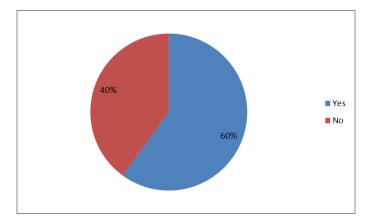


Figure 2: Prevalence of CVS As per figure02, we had 60% prevalence of cvs.

DISCUSSION

The objective of this study is to Examining CVS and its relationship to sleep quality in an Aseer undergraduate population. In the current study, the prevalence of CVS was 60.0%. Accordingtoother research,

Table1: Demographics and practices

Factors	Freq.	%	Freq.	%	Freq.	%	Freq.	%
Marital status	Single		Married		Widowe	ed	Divorce	d
	300	66.67%	120	26.67%	15	3.33%	15	3.33%
Monthly Income (In SAD)	Less that	in 5000	5000 -10	0000	Above 1	10000		
Monthly Income (In SAR)	125	27.78%	200	44.44%	125			
Year of college	1		2	3			above 4	
	130	28.89%	75	16.67%	80	17.77%	170	38%
	Yes		No					
Bedtime Smartphone use								
_	430	95.56%	20	4.44%				
Spectacle use	189	42.00%	261	58.00%				

Table 2: Practices

Less than	5-10	above 10 years
20%	45%	35%
Less than 3 hours	3-6 hours	above6 hours
19%	41%	40%
Yes	No	
71%	29%	
	20% Less than 3 hours 19% Yes	20% 45% Less than 3 hours 3-6 hours 19% 41% Yes No

As per table 02, 45% using E-devices from 5-10 years, 41% used for 3-6 hours, 71% were taking breaks during usage of E-devices. 2

Table 3: Diseases

	No symptoms	Mild	Moderate	Severe
Headache	20%	25%	25%	30%
Burning eye sensation	45%	10%	8%	37%
Eye redness	33%	19%	17%	31%
Blurred vision	29%	15%	11%	45%
Dry eyes (tearing)	12%	19%	18%	51%
Neck and shoulder pain	30%	19%	25%	26%

Aspertable03,30% hadsevereheadacheissues,51& hadseveredryeyesissue,37% hadsevereburningyesissues,31% eyereadiness,45% severe blurred vision

Table 4: Sleep disorders

	once a week	Three or more times a week	Not during the past month	twice a week
Can not get to sleep within 30 minutes	28%	12%	39%	21.00%
During the past month, how often have you				
Taken medicine to help you sleep (prescribed	18%	19%	31%	32.00%
or "over the counter")?				

As per table 04, 39% cannot get the sleep during the past month, while ,32% took twice a week medication for sleep

$Table 5: A gewise comparisons between a wareness regarding 20\mathchar`20\mathchar~20\ma$

Age	Are you aware of the 20-20-20 rule? (Every 20 min, look at an object 20 ft away for 20s.)			
	Yes	No		
Lessthan25	46%	54%		
Above 25	44%	56%		
N S(Not significant)				

N.S(Not significant)

Aspertable05, we did not observe any significant differences while comparing gender with 20-20 ruleawareness.

the frequency of CVS varies among different populations, ranging from 63% to 89%. Additionally, although statistically not significant, our study revealed that the prevalence of CVS was not significantly higher in men (75.22%) than in women $(81.3\%)^{12-14}$.

People need to be made aware of the detrimental consequences continuous use of electronics has on eyesight, as CVS is currently

under diagnosed. According to a study, knowledge and practices related to ergonomics were shown to be significantly higher in people who use computers frequently than seldom. This increased risk of acquiring CVS was attributed to higher knowledge in ergonomics among frequent computer users¹³.

When using digital gadgets continuously without interruptions, the eye is forced to focus for extended periods of time, which can cause visual tirednessandasthenopiasymptoms.BecauseofthepresentCOVID-19 pandemic, numerous institutions have shifted their lectures online, and it is anticipated that university students globally will utilize more digital devices, this result is important for both physicians and students. It is anticipated that average time spent on digital devices would rise as early all students take programs online. In certain populations, this could lead to a rise in the frequency and severity of CVS. Some of these individuals may experience a decline in their quality of life and productivity at work as a result of CVS symptoms¹¹⁻¹⁴.

Concern over how using digital devices affects sleep quality is growing. With the rapid growth of technology and the transition to a digital world, digital gadgets are now an essential and vital part of our daily lives. These findings are consistent with other research showing that excessive use of digital devices negatively affects sleep quality in a variety of populations, including college students. Additionally, a study found a direct correlation between widespread sleep issues and heavy digital device use. While the current study found a strong correlation between the usage of digital devices and the quality of sleep¹²⁻¹⁴.

Being a cross-sectional study, one of the study's weaknesses was that it only provided a picture of CVS at one particular point in time, providing little insight into the circumstances that may have caused it. The diagnosis of CVS was made solely based on self-reported symptoms; no ocular examination was performed.

CONCLUSION

In summary, a significant number of college students have both poor sleep quality and CVS. This is a serious public health concern that requires consideration. Moreover, medical students have a low level of awareness and knowledge of CVS. It is necessary to put knowledge into practice. In medical students, CVS is strongly linked to poor sleep quality.

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Competing Interest: None

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