

The Role of Digital Eye Strain in Functional Eye Pain.

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Introduction

With the increasing reliance on digital devices for work, communication, and entertainment, digital eye strain (DES) has become a widespread issue. Prolonged screen use can lead to various visual and physical symptoms, including eye discomfort, headaches, and blurred vision. One of the lesser-discussed aspects of digital eye strain is its contribution to functional eye pain (FEP), a type of chronic eye discomfort that arises without any structural abnormalities in the eye. While digital eye strain typically results from temporary visual stress, it can exacerbate or trigger functional eye pain, especially in individuals with underlying neuropathic issues. This article explores how digital eye strain plays a role in functional eye pain and provides insights into managing this modern-day problem [1].

Digital eye strain, also known as computer vision syndrome, encompasses a range of symptoms that arise from prolonged exposure to digital screens. Symptoms include dry eyes, headaches, blurred vision, and neck and shoulder pain. Factors such as poor lighting, improper screen distance, reduced blinking, and extended focus on close-up tasks contribute to these issues. Digital eye strain is typically considered temporary and resolves with rest and ergonomic adjustments. However, for individuals prone to chronic pain or neuropathic conditions like functional eye pain, digital eye strain can worsen their symptoms and lead to prolonged discomfort [2].

Functional eye pain differs from other types of eye discomfort because it cannot be traced to structural damage or disease in the eye. It is often classified as neuropathic eye pain, meaning that the pain originates from abnormalities in the nervous system rather than physical injury. Patients with functional eye pain may experience burning, aching, or sharp pain that persists even in the absence of visible inflammation or damage. The cause is typically linked to dysfunctional pain pathways, where the brain and nerves in the eyes process pain signals abnormally. Digital eye strain can exacerbate these pain pathways, making functional eye pain more intense or frequent [3].

The connection between digital eye strain and functional eye pain lies in the way prolonged screen use affects the ocular surface and nerve pathways in the eyes. During screen time, people tend to blink less frequently, which reduces the spread of the tear film across the surface of the eye, leading to dryness and irritation. In individuals with functional eye

pain, this irritation can trigger or worsen the pain signals from hypersensitive nerves. Additionally, the sustained focus on digital screens can increase muscle tension around the eyes, further aggravating neuropathic pain in those who are predisposed to it [4].

One of the major links between digital eye strain and functional eye pain is dry eye syndrome. Digital screen use often leads to incomplete blinking, which prevents adequate tear production and results in dry eyes. While dry eye symptoms can be uncomfortable for most people, they are particularly problematic for those with functional eye pain, as they can exacerbate the already heightened pain sensitivity in the corneal nerves. Dryness and irritation increase the risk of triggering neuropathic pain, as the nerves in the eye become more sensitive to even minor stimuli [5].

Central sensitization refers to the process by which the central nervous system becomes more sensitive to pain over time. This phenomenon can occur in individuals with chronic pain conditions, including functional eye pain. Prolonged screen use can contribute to central sensitization by placing constant strain on the eyes and visual system. The result is that even small triggers, such as slight dryness or minor visual stress, can cause disproportionate pain in people with sensitized nervous systems. In this context, digital eye strain can act as a chronic irritant that keeps the pain pathways activated, making functional eye pain worse [6].

Extended screen time not only affects the eyes' surface but also leads to visual fatigue and eye muscle strain. When focusing on a computer or mobile screen for long periods, the eye muscles responsible for maintaining clear vision at close distances become overworked. This constant muscle tension can cause discomfort around the eyes, which may transition into functional eye pain for those with existing neuropathic issues. For people with functional eye pain, this muscle strain can amplify their perception of pain, as their nerve pathways are already hypersensitive to discomfort [7].

One of the contributing factors to digital eye strain is blue light exposure from digital screens. Blue light, which is emitted by computers, smartphones, and tablets, has been shown to cause eye discomfort and contribute to digital eye strain. In individuals with functional eye pain, exposure to blue light may increase the sensitivity of the ocular nerves, leading to heightened pain perception. Blue light may also disrupt normal sleep patterns, which can exacerbate neuropathic

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pain conditions, as poor sleep is known to increase the body's sensitivity to pain [8].

Managing digital eye strain in individuals with functional eye pain requires a combination of strategies aimed at reducing screen-related discomfort and addressing the underlying neuropathic issues. Simple ergonomic adjustments, such as ensuring proper screen distance, adequate lighting, and regular breaks, can help reduce the strain on the eyes. The 20-20-20 rule, which recommends taking a 20-second break every 20 minutes to look at something 20 feet away, is an effective way to combat visual fatigue. Additionally, using artificial tears and lubricating eye drops can help alleviate dryness, while blue light filtering screens or glasses may reduce blue light exposure [9].

For individuals who experience functional eye pain exacerbated by digital eye strain, neuropathic pain management techniques are essential. These may include systemic medications like gabapentin or pregabalin, which target overactive nerves and reduce pain signaling. Topical treatments, such as low-dose anesthetic eye drops, can provide temporary relief by numbing the ocular surface. Beyond medications, non-pharmacological treatments like cognitive-behavioral therapy (CBT) and biofeedback can help patients manage their pain by addressing the emotional and psychological aspects of chronic discomfort [10].

Conclusion

The relationship between digital eye strain and functional eye pain highlights the complex interactions between modern technology and neuropathic pain conditions. While digital eye strain is a temporary problem for most people, it can significantly worsen symptoms in those with functional eye pain. Understanding this connection is key to developing effective management strategies that reduce screen-related discomfort and address the underlying neuropathic issues that

contribute to functional eye pain. By implementing ergonomic adjustments, using eye lubrication, and employing neuropathic pain management techniques, patients can achieve better control over their symptoms and improve their quality of life.

References

1. Rosenfield M. Computer vision syndrome: a review of ocular causes and potential treatments. *Ophthalmic Physiol Opt.* 2011;31(5):502-15.
2. Sheppard AL, Wolffsohn JS. Digital eye strain: prevalence, measurement and amelioration. *BMJ.* 2018;3(1):e000146.
3. Mehra D, Cohen NK, Galor A. Ocular surface pain: a narrative review. *Ophthalmol.* 2020;9(3):1-21.
4. Levitt AE, Galor A, Chowdhury AR, et al. Evidence that dry eye represents a chronic overlapping pain condition. *Mol pain.* 2017;13:1744806917729306.
5. Blehm C, Vishnu S, Khattak A. Computer vision syndrome: a review. *Surv Ophthalmol.* 2005;50(3):253-62.
6. Yang TJ, Yu Y, Yang JY. Involvement of transient receptor potential channels in ocular diseases: a narrative review. *Ann Transl Med.* 2022;10(15).
7. Rosenthal P, Borsook D. Ocular neuropathic pain. *Br J Ophthalmol.* 2016;100(1):128-34.
8. Pessoa BB. The Role of Vitreous and Vitreoretinal Interface in the Management of Diabetic Macular Edema.
9. Flaxman SR, Bourne RR, Resnikoff S. Global causes of blindness and distance vision impairment 1990–2020: a systematic review and meta-analysis. *Lancet Glob Health.* 2017;5(12):e1221-34.
10. Rusciano D, Pezzino S, Olivieri M. Research Open. *J Pharmacol.* 2020;3(2):1-34.