

## Is ophthalmology becoming a pain in the neck?

Last year, one of the issues that we highlighted in an editorial for the Indian Journal of Ophthalmology was “physician burnout” - a state of mental exhaustion caused by the doctor’s professional life, characterized by emotional exhaustion, depersonalization, and a reduced sense of accomplishment.<sup>[1,2]</sup> A few of the many factors that contribute toward physician burn out included unpredictable work hours, mental exhaustion, emotional fatigue, challenging patients, and workplace-related issues. Apart from the mental and emotional toll that practicing medicine may take on the physician, there is another aspect that has slowly but most certainly reached alarming levels - the physical effect that hours of medical practice has on our bodies.

Various structured surveys among health-care professionals have found that many branches of medicine are physically demanding and leave a profound effect on the body. Specialties such as dentistry, orthopedics, and ophthalmology are specially hard on the body.<sup>[3-5]</sup> An average operating ophthalmologist shifts through many postures throughout the day – from a rather uncomfortable sitting posture at the slit lamp to a long hours spent looking into the operating microscope, sometimes for several hours; not to mention the cumulative duration spent peering through the indirect ophthalmoscope while examining the retina from all sides and angles.<sup>[6]</sup> Are we pushing ourselves to the brink without realizing it?

A survey among ophthalmologists from North America revealed that a staggering 52% of the ophthalmologists gave a recent history of neck, upper body, or lower back symptoms.<sup>[7]</sup> Nearly, 62% of the ophthalmologists who responded to a national survey in the United Kingdom reported that they suffered from either back or neck pain.<sup>[8]</sup> Another survey conducted among eye care professionals in Saudi Arabia showed that neck and back pain was reported by 70% of the participants.<sup>[9]</sup>

These musculoskeletal disorders (MSDs) are chronic disorders of the muscles, tendons, ligaments, nerves, and joints that arise due to long-term, chronic wear and tear, and repeated stress, rendering them susceptible to injury and damage. In our attempt to save time and improve efficiency, we are sadly paying a much bigger price. Poorly designed examination rooms and outdated microscopes with mismatched operating tables and chairs are just a few of the factors that can contribute to MSDs. Simple small things such as choosing the right chair with the ideal back curvature and lower back support, selecting thick carpet padding for the floors, and adjusting the height and angulation of our computer monitors can go a long way in easing the stress on our necks and backs. One of the most common mistakes we do is adjust our bodies to the design of the machine we use when, in fact, it should be the other way around. We need to make the machines work for us – it is imperative to make sure the examiner’s chair, the slit lamp position, and patient’s chair height are adjusted and aligned before examining the patient. Just as patient comfort is important, the examining doctor’s comfort is equally vital. Christopher Kent in this enlightening review has encapsulated that an ophthalmologist should keep in mind to remain pain-free and comfortable.<sup>[10]</sup> And finally, in the bigger scheme of things, we need to give our feedback to manufacturers and designers so that they can incorporate our suggestions and design and produce more ergonomic instruments and machines.

As is always – prevention is better than cure. The key is identification of our habits and correcting our posture. A small nagging headache or neck pain can soon transform into a recurrent one and then eventually into a chronic problem. It is no surprise that one’s ability to think, analyze, diagnose, and treat will be affected when he or she is in constant pain or discomfort. And finally, if you find yourself already suffering from the ill effects of a poor posture, it is important to stop self-diagnosing and self-medicating, instead seek professional help from our orthopedic and physiotherapy colleagues before it is too late. In addition, modern technology can help us in preventing work-related injuries. Smart gadgets such as ergonomic chairs and other equipment can be used to prevent these disorders. MSDs do not *have* to be an occupational hazard for ophthalmologists – not if we choose to avoid them!

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