### PREVALENCE OF ACUTE NECK PAIN AND DEFORMITY AMONG UNDER GRADUATE NON-MEDICAL STUDENTS IN SARGODHA

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### ABSTRACT

### **Background:**

Acute neck pain is abrupt, intense pain that can radiate to the head, shoulders, arms, or hands. It typically subsides within days or weeks with rest, physical therapy and other self-care measures. You play an important role in the prevention, treatment and recovery process of neck pain.

### **Objective:**

The purpose of this study was to determine the frequency of acute neck pain and deformity among undergraduate non-medical students in Sargodha.

### Methodology:

This study was done on colleges with 288 sample size according to inclusion and exclusion criteria. A questionnaire was distributed among students at different colleges by using non-probability convenience sampling techniques. Selfmade questionnaire was distributed to all students. Students were assessed by measuring the resting head posture by using a Goniometer. This obtained data was tabulated and statistically analyzed.

### **Results:**

Out of 288 non-medical students 56.3% non-medical had <50 CVA angle, and 43.8% had >50 CVA angle. Association between duration of mobile usage (hours) with posture of neck in sitting was checked by using Chi- square test. Results were found to be statistically significant. With regards to this syndrome and pain, this study revealed that CVA angle decrease in those students who used mobile phone for more than 5 hours per day. Results were statistically analyzed by using Chi-square text.

### **Conclusion:**

This study concludes that text posture affects upper cervical muscles and ligaments which can lead to spinal deformity. 56.3% of students were affected by neck pain when using mobile phone. There were 61.1% participants who had flexed neck posture in sitting position due to excessive usage of mobile phones. 43.8% of the non-medical students who took part in this study had a CVA angle greater than 50, while 56.3% did not.

Indexed terms\_ Pain, Range of motion, exercises

### I. Introduction:

Neck pain is a leading cause of disability inadults, reported in up to 20% of adults, with many presenting for assessment. Acute neck pain is abrupt, intense pain that can radiate to the head, shoulders, arms, or hands. It typically subsides within days or weeks with rest, physical therapy and other self-care measures. You play an important role in the prevention, treatment and recovery process of neck pain.(1) Neck pain is the fourth leading cause of disability, with an annual prevalence rate exceeding 30%.(2) Acute neck pain Most episodes of acute neckpain resolve within two months, although about half of patients continue to have low grade symptoms or recurrences.(3) Text messaging among students caused a significantly neck pain and greater angle of head flexion (p 0.05) than any of the other tasks, andit caused a significantly greater head flexion while seated than standing. According to the study's findings, text messaging is one of the app categories for smart phones that are used most frequently. Text messaging apps could be a primary factor in neck

pain in heavy smart phone users.(4) In today's environment, people spend more time on portable devices such as smart phones, computers, tablets, and e-readers. Mobile technology has improved so much, which is the reason for the pain in the neck." The text neck" is the result of long- term neck flexion while bending over modern electronic gadgets.(5) Text neck syndrome, which causes severe neck pain and muscular spasm in students who study for lengthy periods, is caused by a flexed forward head position. Another reason for severe neck pain is the excessive use of mobile phones.(6) It should be referred to as the "pain of the modern era," such as computers, cell phones, and other clever gadgets. The result of this study shows that responders 'neck impairment is more significant compared to the study's conclusion.(7) Mobile Phones could indicate a risk factor for various health issues. Long-term users' issues, each of the signs, and unfavorable no correlation could be established between the effects seen in our investigation and caused exclusively by using cell phones.(8) A musculo skeletal ailment called neck discomfort or neck dysfunction,

accompanied by physical disability or functional restriction is brought on by poor posture.(9) General aches and pains, postural tiredness in the neck, shoulders, and arms, and ongoing soreness or discomfort in soft tissues can all be signs of neck pain. The aligned neck appears to have a slight lordotic curve. Long-term computer use, rounded- shoulder posture, and poor neck alignment disrupt thenatural lorneck's dotty curve, which causes a muscle imbalance. As a result, neck aches are the leading contributing causes of neck pain; according to theory, they are long-term, low-intensity strains and tensions as well as poor posture. Periods of Use of computers, frequency of breaks, key-board operation, computer monitor placement, input device usage, and kind of neck ache in the office. Reaching for the mouse tool ow, Leaning forward to use the computer, too, and some work station flaws can cause neck pain.(10) Many previous study had conducted on neck pain among physiotherapy medical students and general population. The main objective of this study was to fill this gap by using goniometer and neck disability index to determine the prevalence of acute neck pain and it is associated risk factors among non-medical students in Sargodha division and general precautionary measures should be taken to prevent this syndrome.

#### Materials & Methods: II.

A cross sectional study design was used to determine the prevalence of neck pain and deformity among undergraduate students and study was conducted in different colleges of Sargodha. The sample size was 288 calculated by using this formula n=z<sup>2</sup>p (1 $p)/d^2P=25.4\%=0.25.(11)$ 

Both male and female students, students who have neck pain less than 3 months, used electronic devices for >5 hours/day (12), who used smart devices in sitting or bad position and willing to participate in research were included. EXCLUSION CRITERIA was Students with fracture, Traumatic injury to the cervical spine, Congenital abnormality and Neurological or cardiovascular problem.(13) Nonprobability convenient sampling approach was accustomed to recruit the individuals for the study. Data collection tools were Neck disability index, Numeric Pain Rating Scale for pain and Smart phone addictions scale -short version. After informed consent, questionnaire was distributed among nonmedical students for collection of data. This procedure had performed by handout. Data was analyzed through SPSS version 20.2.1 Software for windows.

#### III. RESULTS

In this cross-sectional observational study 288 nonmedical undergraduate students were assessed for

neck pain by using convenient sampling technique. The data was collected from the non-medical students in Sargodha, and was analyzed by using SPSS. Biodemographics including age, gender, sex and occupation were included. The mean age of participants was 21.20+/- 2.045. Out of 288 participants 69.79% were female and 30.21% were male. Results showed that 56.3% of students had <50CVA angle due to text neck syndrome and 43.8% had >50 CVA angle due to text neck syndrome where as normal angle of CVA is equal to 50. The result indicated that 25.7% non-medical undergraduate students participated in this study were using laptop. 64.2% students were using mobile phone and 10.1% students were using personal computer. There were 46.5% non-medical students spent <5 hours on electronic devices and 53.5% students spent >5hours on electronic devices. There were 61.1% participants had flexed neck posture in sitting position due to excessive usage of mobile phone and 38.9% students had extension. 18.1% non-medical undergraduate students participated in this study had pain inshoulder, 54.2% students had neck pain, and 19.1% students had pain in upper extremity and 8.7% students had no pain. 16.0% non-medical studentsparticipated in this study had no pain on NPRS scale, 42.4% students had mild pain, and 32.2% students hadmoderate pain and 9.4% had severe pain on numeric pain rating scale.13.5% non-medical students participated in this study had no disability, 34.7% non-medical students had mild disability, and 33.3% non-medical students had moderate disability, 11.8% non-medical students had severe disability, and 6.6% non-medical students had

complete

disability.56.3% non-medical students participated in this study had<50 CVA angle, and 43.8% had >50 CVA angle. There was significant association of duration of mobile usage (hours) among non-medical students with posture of neck in sitting as p-value <0.05 which was checked by Chi-Square test. There was significant association between CVA angle and posture of neck among non-medical students as pvalue <0.05, this showed that the result was significant which checked by Chi-Square test was.

#### IV. **Discussion:**

This cross-sectional study was conducted to identify the prevalence of neck pain among undergraduatenonmedical students. Acute neck pain is abrupt, intense pain that can radiate to the head, shoulders, arms, or hands. It typically subsides within days or weeks with rest, physical therapy and other self-care measures. The most typical source is neck ache and soreness. Additionally prolonged use of smart phones while forward head flexion led to the pain, shoulder pain and limited range of motion.

In previous study 51.8% students sometimes feelsneck pain after using their smart phones and 10.7% felt moderate pain when rating on NPRS. These results could attribute those musculoskeletal disorders in young population suggested that neck pain the 4<sup>th</sup> leading cause of disability. These results support our study results out of 288 students, 16.0% non-medical undergraduate students participated inthis study had no pain on NPRS scale, 42.4% students had mild pain on NPRS scale, 32.2% students had moderate pain on NPRS scale and 9.4% had severe pain on numeric pain rating scale.(14) In this current study according to neck disability index the total score is 50 out of which the score in the range (0-4) are considered no disability in which no- medical students participated was 13.5% while 34.7% non-medical students had mild disability and 33.5% student had moderate disability 11.8% students had severe disability, 6.6% medical students hadcomplete disability whereas in previous study conducted to check prevalence of text neck syndrome in young adult population compare to current study where according to neck disability index score range (0-4) 68% young adult had no disability while score range (5-4) 30% population had mild disability, score range (15-24) had 1% population which is considered as moderate disability the score range in range (25- 34) were considered as severe disability and had 1% population, score greater than 35% were considered as complete disability which was present in 0% population.(15) A study conducted by Dalia EMeisha in Saudi Arabia. Prevalence rate of musculoskeletal disorders once determined 70%. Results of neck pain 84.6%. The risk of neck pain increased with age if proper postural was not maintained. In relation to these current study 54.2% students was reported with neck pain. Neck pain was due to poor sitting, sitting posture and ergonomic design chairs.(16) In another study conducted to check prevalence of neck pain and SMS thumb among smart phone users in college going students, disability of neck might be due to frequent neck flexion posture that cause changes in natural curve of spine that increases stress on spine and cause pain in neck musculature. In our study disability of neck among smart phone users causes neck flexion postures due to using mobile phone long period of time result in changes in spinal curve pain in neck musculature.(17) In previous study smaller craniovertebral angle values are indicative of increased degree and severity off onward headposture. This study support current study which reported 56.3% of non-medical undergraduate student had craniovertebral angle greater than 50 due to text neck syndrome whereas normal craniovertebral angle is 50.(18)

### V. Conclusion:

This study concluded that neck pain is most common in this era. The symptoms of neck pain and disability arise in children and adults because of increased usage of mobile phones. 56.3% of student's wereaffected by neck pain when using mobile phone. However, there was a significant relation between craniovertebral angle with hours of mobile usage and craniovertebral angle with posture of neck. More thanhalf of nonmedical undergraduate students in a studyhad pain in shoulder and upper extremity from using mobile phones while sitting down. There were 61.1% participants who had flexed neck posture in sitting position due to excessive usage of mobile phones.43.8% of the non-medical students who took part in this study had a CVA angle greater than 50. while 56.3% did not.

### Acknowledgement:

All the authors have been informed of their inclusion and have approved this.

### **Disclaimer:**

This research has not been presented or published in any conference or book.

### **Conflict of interest:**

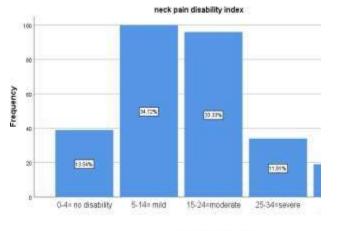
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# Table 1: Association betweenHours and posture of neck

	Value	Df	Asymptomatic significance (2-sided)
Pearson Chi-Square	30.766	1	0.0000
Likelihood Ratio	31.238	1	0.0000
Linear-by- Linear Association	30.659	1	0.0000
No. of valid cases	288	1	



neck pain disability index

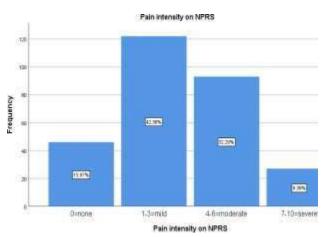
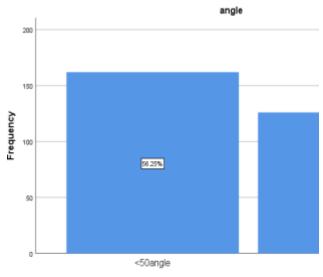


Figure 2: Numeric Pain Rating Scale:



angle

### Figure 3: Bar Chart of Craniovertebral angle:

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Figure 1: Neck Disability Index:

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