

Prevalence of Digital Burnout among Medical Science Students of a Private College, Saudi Arabia

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ABSTRACT

Background: University students are more likely to experience digital burnout as they utilize and are exposed to digital gadgets regularly in both academic and personal contexts.

Purpose: To assess the prevalence of digital burnout among medical science students and correlate the digital burnout levels with various demographic variables.

Methods: Through convenient sampling, a descriptive cross-sectional study was conducted among 300 students (86.3%, males 13.7 %) from all programs and levels. The tools used to collect data were Tool 1 - Demographic Data and Tool 2 - Digital Burnout Scale (DBS).

Results: The results showed that 75% of the students reported moderate to slight burnout. Overall, and across all subcategories, mean scores indicate moderate degrees of burnout. A significant difference in digital burnout was observed across age groups ($F=4.62$, $p=0.011$), with individuals aged 24 and older reporting the highest levels of burnout compared to their younger counterparts. A statistically significant difference was found in the digital burnout scores among groups based on time spent online, i.e., more than 6 hours ($F=4.52$, $p=0.007$). Overall, the study indicates that the students experience moderate burnout, which is related to age and time spent on the devices.

Conclusion: Targeted approaches are required to address digital burnout, especially in seniors and those who spend an immense amount of time online. Institutions should study in deep implementing interventions to promote healthier digital habits and provide resources to support students' well-being in increasingly digital academic environments.

KEYWORDS: Burnout, Digital, Digital devices, Mental health, Technology.

INTRODUCTION

The rapid advancement of technology has led many individuals to embrace a digital lifestyle, which has a profound impact on both their professional and psychological growth [1]. Technology influences various facets of our lives, including social interactions, cognitive functions, behavior, emotions, and mental well-being. While digital communication, technology, and the internet provide numerous advantages, they also come with drawbacks such as loneliness, depression, low self-esteem, envy, addictive behaviors, and relationship challenges. The onset of COVID-19 and related lockdowns globally led to a significant increase in the time people spend online for work and their leisure time. Statistics reveal a rise in digital activities since the lockdown began: streaming web series and shows increased by 57%; social media use by 47%; messaging facilities by 39%; streaming music by 36%; mobile apps by 35%; video games by 15%; video creation and sharing by 14%; and podcast listening by 14%. Smartphone use reached 76%, laptops by 45%, desktops by 32%, tablets by 22%, smart TVs or streaming devices by 34%, gaming consoles by 17%, smart speakers by 11%, and smartwatches by 6.3%, according to global device usage data [3].

Digital technology has become an essential element of life today since the outbreak of the epidemic. According to Dienlin and Johannes (2020), the use of digital technology is “a general term that covers numerous devices, services and types of use” [4]. Digital usage has led to various forms of social media addiction, virtual chat, online shopping, online game addiction, and over downloading movies, photos, or apps. Those who are addicted to digital usage have low skills in managing the time to use the Internet. In addition, their quality of life and self-esteem has been affected negatively. Another important factor is the inappropriate



and excessive use of unintegrated digital teaching and learning technologies in the classroom. Their excessive use has commanded to digital burnout among students [5].

The term “burnout” refers to a state of mental, physical, or emotional exhaustion [6]. In their 2001 study, Maslach et al. defined burnout as a state of exhaustion characterized by prolonged physical and emotional fatigue, diminished job performance, lack of productivity, disengagement, and negative attitudes toward work [7]. Symptoms of digital burnout include reduced productivity, difficulty managing routines, persistent fatigue, and emotional instability [8].

Burnout negatively affects quality of life by significantly impacting mental, physical, and emotional well-being [9]. Digital burnout, in particular, manifests through symptoms such as reduced motivation, diminished performance, mental exhaustion, and various physical health issues. Some of the bad effects are low linguistic development, diminished engagement, and negative emotional responses. Digital burnout manifests through various symptoms, including insomnia, decreased work efficiency, family conflicts, exhaustion, stress, apathy, emotional detachment, difficulty regulating emotions, and both physical and mental health challenges. Burnout can take many various shapes throughout a person's life because it is both psychological and physical. Academic burnout originates from the concept of job burnout and is commonly defined by three main aspects: emotional exhaustion, cynicism, and a diminished sense of academic effectiveness [10].

By defining three traits—digital aging, digital deprivation, and emotional exhaustion—Erten and Özdemir improved the idea of digital burnout. The inability to balance the real and virtual worlds due to excessive use of digital platforms is called "digital aging." Digital deprivation is the condition in which avoiding digital platforms causes negative physical or psychological effects. [11]. Emotional exhaustion states to the depletion or draining of emotional resources. Spending too much time online surges the risk of developing a digital addiction and leads to digital fatigue.

In conclusion, university students are more likely to experience digital burnout if they utilize and are exposed to digital gadgets on a regular basis in both academic and personal contexts. The benefits of evaluating nursing students' digital burnout are as follows: they can learn about their condition and find strategies to address it; teachers can update their curricula and include new teaching methods; and schools can provide better counseling and guidance services. In other words, it can help students make the required changes for a happier and healthier life. We think this study will contribute to the advancement of more research on the possible impacts of digital burnout on learning and academic performance.

MATERIALS AND METHODS

2.1. Participants

A total of 300 university students took part in this study. 83.0% were from the nursing specialty, the most significant demographic, followed by MLT students with 8.3% and pharmacy students with 8.7%. The sample was chosen using a convenience, non-random sampling technique [12].

2.2. Data Collection Tool

1. This study collected data using two instruments: a questionnaire for descriptive characteristics and the Digital Burnout Scale (DBS). “Google Form” was used in the questionnaire, which consists of two parts. Part one contains Demographic Data, including 11 descriptive variables of students enrolled in Mohammed Al-Mana College for Medical Sciences. This includes age, gender, Educational major and level, marital status, digital devices used, average time spent on the Internet per day (hour), effect on academic performance etc. Part two includes the Digital burnout scale (DBS). The original 24-item Digital Burnout Scale (DBS) originally developed by Erten and Ozdemir (2020) was modified for use in this study. With a Cronbach's alpha coefficient of 0.946, the modified scale demonstrates strong validity with regard to item content and structure. The 21 items are categorized into three subscales: emotional exhaustion, digital aging, and digital deprivation. Each item is rated by participants using a three-point Likert scale, with "3" denoting "Always," "2" denoting "Sometimes," and "1" denoting "Never."

- The digital aging subscale evaluates an individual's difficulty in balancing the real and virtual worlds due to excessive time spent on digital platforms. It comprises 11 items, with total scores ranging from 11 to 33. Higher scores reflect greater levels of digital aging.

- The digital deprivation subscale evaluates the extent to which an individual experiences physical or psychological discomfort when disconnected from digital platforms. This subscale includes six items, with total scores ranging from 6 to 18. Higher scores indicate a greater level of digital deprivation.
- The "emotional exhaustion" subscale measures the extent of emotional fatigue experienced by an individual. Comprising four items, the total score ranges from 5 to 12, with higher scores indicating greater levels of emotional exhaustion.

The burnout assessment tool categorized scores as follows: Severe Burnout (63–52), Moderate Burnout (51–42), Slight Burnout (41–32), and No Burnout for scores of 31 or below.

The data collection tool is derived from a standardized tool, and an English version was used since English is the medium of instruction in the college. The scale used by the researcher was finalized based on the feedback and recommendations provided by experts.

2.3. Ethical considerations

The Institutional Review Board approved the study (Approval No: SR/RP/157). Every student was fully informed about the goals and methods of the study, and those who consented to participate gave their informed consent. The data were gathered through an online survey presented on Google Forms. Before taking part in the study, participants were required to read and agree to an informed consent form on the first page of the survey. Only individuals who provided their consent were included in the study sample. To protect participant privacy, the survey was designed to minimize the collection of personal information.

2.4 Data analysis

The data analysis was conducted using IBM SPSS Statistics (version 25.0), with a significance level set at 0.05. The data was summarized using descriptive statistics, such as mean, percentage, and frequency values (as well as minimum and maximum scores). Shapiro-Wilk test was used to analyze the total burnout scores following the normal distribution, as their p-values (.140) are above the threshold of 0.05. ANOVA test was used to Compare the demographic data and prevalence of Digital Burnout.

RESULTS

300 university students participated in this study, with 83.0% of the total nursing students comprising the most prominent demographic, followed by MLT students at 8.3% and pharmacy students at 8.7%, according to Table 1. There was a good representation of students from all three university years: first year (38.7%), second year (26.3%), and third year (35.0%). Most of the sample is female (86.3%), and most are single (77.7%). 52.0% were between the ages of 21 and 23, and 28.0% were between the ages of 17 and 20. Most students (52.3%) spent 6 hours or more daily on digital media, while 40.7% spent 4 to 6 hours, and a small percentage (7.0%) spent 1 to 3 hours. Most users (97.0%) favored smartphones, with 58.3% favoring tablets. Almost half of them (48.3%) said using digital devices hurts their grades, while 51.7% said it didn't affect them. Being aware of the detrimental implications of excessive usage, the majority (67.3%) actively sought to minimize their screen time. Additionally, three-quarters of respondents thought universities should teach students how to avoid and cope with digital fatigue.

Table 1: Demographic Characteristics of study participants.

		Frequency	%
Age	17 -20 years	84	28.0 %
	21-23 years	156	52.0 %
	24 and above	60	20.0 %
gender	Female	259	86.3 %
	Male	41	13.7 %
marital status	Single	233	77.7 %
	Married	63	21.0 %
	Divorce	4	1.3 %
Academic level	First-year	116	38.7 %
	Second year	79	26.3 %



	Third year	105	35.0 %
Academic program	Nursing	249	83.0 %
	MLT	25	8.3 %
	Pharmacy	26	8.7 %
Average time spent	1 - 3 Hrs.	21	7.0 %
	4 -6 Hrs.	122	40.7 %
	More than 6 hrs.	157	52.3 %
Digital Devices used	Smartphone	291	97.0 %
	No	9	3.0 %
	Tablet	175	58.3 %
	No	125	41.7 %
	Desktop	29	9.7 %
	No	271	90.3 %
	Smartwatch	69	23.0 %
	No	231	77.0 %
	Others	10	3.3 %
No	290	96.7 %	
Academic performance Affected	Yes	145	48.3 %
	No	155	51.7 %
Limit Screen time	Yes	202	67.3 %
	No	98	32.7 %
Colleges should Provide Education	Yes	227	75.7 %
	No	73	24.3 %
Chronic Illness	Yes	53	17.7 %
	No	247	82.3 %
Total		300	

Table 2 illustrates that 75% of the students surveyed reported moderate to slight burnout, indicating that many students are starting to feel the consequences of digital involvement and are at risk for more severe symptoms of digital burnout. The average burnout score (38.5) falls into the "slight Burnout" category, indicating a significant prevalence of slight burnout symptoms among students. Overall, and across all subcategories, mean scores indicate moderate degrees of burnout.

Shapiro-Wilk tests indicate that the total burnout scores follow the normal distribution, as their p-values (.140) are above the threshold of 0.05. So, the ANOVA test will be used to compare between groups.

Table 2: Prevalence of Burnout.

		Frequency	%
Prevalence of Burnout	No Burnout	62	20.7 %
	Slight Burnout	129	43.0 %
	Moderate Burnout	96	32.0 %
	Severe Burnout	13	4.3 %



	Digital Burnout	Subcategories		
		Digital Aging	Digital Deprivation	Emotional Exhaustion
Mean	38.48	19.33	12.68	6.46
Median	39	19	12.5	6
SD	7.79	4.39	3.27	1.92
Minimum	21	11	6	4
Maximum	62	33	18	12

Table 3 indicates a statistically significant difference in digital burnout among the age groups ($F=4.62, p=0.011$). Younger students (17–20 years) report the lowest mean burnout scores ($M=37.2, SD= 6.97$). The oldest group (24 and above) reported the highest burnout scores ($M=40.7, SD=6.79$).

Table 3: ANOVA test Compare the age groups and Digital Burnout.

Group Descriptives					
	Age	N	Mean	SD	SE
Digital Burnout	17 -20years	84	37.2	6.97	0.76
	21-23 years	156	38.3	8.41	0.674
	24 and above	60	40.7	6.79	0.877
One-Way ANOVA					
	F	df1	df2	p	
Digital Burnout	4.62	2	156	0.011	

Table 4 shows a statistically significant difference in digital burnout scores among groups based on online time ($F=4.52, p=0.007$). Increased online time correlates with higher digital burnout scores, highlighting excessive digital engagement as a critical risk factor. Students spending more than 6 hours online are at significantly higher risk, with mean burnout scores notably ($M=39.82, SD=7.578$) higher than those spending less time ($M=35.48, SD=7.594$).

Table 4: ANOVA test compares Time spent online groups and Digital Burnout and its categories.

Group Descriptives					
	Average Time spent Oline	N	Mean	SD	SE
Digital Burnout	1 - 3 Hrs.	21	35.48	7.594	1.657
	4 -6 Hrs.	122	37.26	7.819	0.7079
	More than 6 Hrs.	157	39.82	7.578	0.6048
One-Way ANOVA					
	F	df1	df2	p	
Digital Burnout	5.52	2	56.1	0.007	



Table 5 explores the relationships between Digital burnout and various demographic factors, as well as the average time spent online. A moderate positive correlation indicates that increased online time is associated with higher digital burnout scores ($r=0.189$, $p=0.001$). Marital status and average time spent online show weak but statistically significant positive correlations with digital burnout ($r=0.122$, $p=0.034$). Married students may require additional support due to slightly higher burnout scores, possibly influenced by dual responsibilities in academic and personal life. Gender, academic year, and educational program show no significant relationships with burnout, implying that these factors may not directly influence burnout levels in this sample.

Table 5: Correlation between Digital Burnout, Demographic data, and the average online time.

		Gender	Marital	Academic Year	Academic Program	Average time spent	Digital Burnout
Gender	Pearson Correlation	1	0.122*	-0.040	-0.059	0.040	0.064
	Sig. (2-tailed)		0.035	0.494	0.310	0.487	0.267
	N	300	300	300	300	300	300
Marital	Pearson Correlation	0.122*	1	-0.055	-0.110	-0.014	0.122*
	Sig. (2-tailed)	0.035		0.346	0.056	0.810	0.034
	N	300	300	300	300	300	300
Academic Year	Pearson Correlation	-0.040	-0.055	1	0.018	0.006	-0.029
	Sig. (2-tailed)	0.494	0.346		0.754	0.915	0.619
	N	300	300	300	300	300	300
Academic Program	Pearson Correlation	-0.059	-0.110	0.018	1	0.023	-0.012
	Sig. (2-tailed)	0.310	0.056	0.754		0.693	0.841
	N	300	300	300	300	300	300
Average time spent	Pearson Correlation	0.040	-0.014	0.006	0.023	1	0.189**
	Sig. (2-tailed)	0.487	0.810	0.915	0.693		0.001
	N	300	300	300	300	300	300
Digital Burnout	Pearson Correlation	0.064	0.122*	-0.029	-0.012	0.189**	1
	Sig. (2-tailed)	0.267	0.034	0.619	0.841	0.001	
	N	300	300	300	300	300	300

*. Correlation is significant at the 0.05 level (2-tailed).

**. Correlation is significant at the 0.01 level (2-tailed).

DISCUSSION

The result of this study is in congruence with earlier research on digital burnout among students enrolled in medical and healthcare programs. The notable percentage of nursing students (83%) affected by burnout is consistent with the research of Kong et al. (2023) and Durmuş et al. (2022), who stated that nursing students are particularly vulnerable due to the demanding academic requirements and extensive use of technology inherent to their training [13, 14]. According to Sharma et al. (2020), excessive use of digital devices, particularly throughout the COVID-19 lockdown, increased burnout [15]. Further verifies that more than half of the participants reported spending six or more hours daily on digital platforms. Furthermore, 48.3% of students say that digital exhaustion harms their academic performance, confirming the results of Song et al. (2022) and Jafari et al. (2022), highlighting the connection between extended screen time and academic burnout [16, 17].

Surprisingly, 67.3% of the students said they were actively trying to reduce their screen time, indicating an increased awareness of digital exhaustion and its detrimental effects. Pospos et al. (2018) noted that addressing burnout and adopting coping mechanisms may significantly improve psychological well-being, and this tendency is in line with their findings [18]. Furthermore, the recommendations of Kumpikaitė-Valiūnienė et al. (2021), who emphasized the importance of digital literacy for alleviating stress and preventing burnout, are by the opinion of three-quarters of respondents that universities should provide training on managing digital fatigue [19].



The fact that 75% of medical science students suffer from moderate to mild burnout shows how prevalent this problem is. The findings of Zis et al. (2021) and Li et al. (2021), who highlighted the mental health risks related to digital learning settings, agree with this pattern [19, 21]. As Erschens et al. (2019) reported, 43% of students in this group exhibited early signs of burnout, which could progress to more severe burnout if intervention is not provided [22].

With a focus on how age affects burnout scores, this study examined the prevalence of digital burnout among Eastern Province medical science students. According to the investigation, age is a significant factor in burnout susceptibility, highlighting substantial variations between age groups. The oldest group of students (those aged 24 and up) reported the highest levels of burnout ($M = 40.7$, $SD = 6.79$), while the youngest group (those aged 17–20) had the lowest average scores ($M = 37.2$, $SD = 6.97$). Given that this difference was statistically significant ($F = 4.62$, $p = 0.011$), it is likely that younger students are better able to handle the demands of online learning and digital tools. The findings of Zis et al. (2021) and Song et al. (2022), who observed that younger, tech-savvy students generally experience less burnout than older students, are consistent with this finding. Furthermore, younger students might have fewer responsibilities outside academics, contributing to lower stress levels in digital learning settings [20, 16]. On the other hand, burnout was more prevalent among older students (24 and older), possibly because of added stressors such as work, difficult coursework, and family commitments. This supports the findings of Zis et al. (2021) and Tams et al. (2020), who discovered that older students frequently balance more outside obligations, which might worsen stress and burnout [20,23]. Moreover, for older students who did not grow up in fully digital environments, adapting to modern digital platforms may add to their sense of overwhelm.

The study also highlighted the impact of time spent online on burnout levels. Compared to students who spent less time online ($M = 35.48$, $SD = 7.594$), those who spent more than six hours online reported much higher burnout levels ($M = 39.82$, $SD = 7.578$). This result illustrates the adverse effects of extended computer use on mental health and is in congruence with Zis et al. (2021) and Sharma et al. (2020) [20, 15]. Excessive online activity can cause burnout, emotional exhaustion, and cognitive overload. Similar findings were made by Tams et al. (2020), who pointed out that prolonged use of digital platforms can affect people's capacity for task management, raising stress levels and causing burnout [23].

Interestingly, students between four to six hours online had moderate burnout scores ($M = 37.26$, $SD = 7.819$), reinforcing that digital burnout escalates with increased online activity. This "dose-dependent" relationship is echoed in the works of Song et al. (2022) and Durmuş et al. (2022). As digital learning environments become more prevalent, particularly in the post-COVID-19 era, prolonged digital engagement continues to affect students' mental health and well-being negatively (Göldağ, 2022; Kumpikaitė-Valiūnienė et al., 2021) [19].

The study examined how demographic characteristics influence medical science students' burnout. Time spent online showed a moderate positive correlation with burnout ($r = 0.189$, $p = 0.001$), reinforcing findings by Kong et al. (2023) and Zis et al. (2021) (12,19). Interestingly, marital status also exhibited a weak yet significant positive correlation with burnout ($r = 0.122$, $p = 0.034$). This suggests that married students may be more burned out because of the combined demands of home and school obligations. This is in line with studies by Pospos et al. (2018) and Jafari et al. (2022), which emphasize the necessity of providing married students with specialized support [16,18].

However, the study found no significant correlation between burnout and factors such as gender, academic year, or program of study. This contrasts with previous findings by Kong et al. (2023) and Almutairi et al. (2022), which showed that these demographic factors influenced burnout. The present study may not accurately represent how these parameters interact with other variables, like online time or program structure [13,24].

CONCLUSION

Targeted strategies are essential to effectively manage digital burnout, especially for older students and those with high online exposure. Educational institutions should prioritize interventions that foster healthier digital habits and create supportive environments. Offering resources and promoting well-being can help students thrive in today's increasingly digital academic landscape.

Conflict of interest

The authors have stated that they have no competing interests.



Funding

No funding was reported.

Data availability

All of the data that support the findings of this study are available in the main text.

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Cite this Article: Lewis, S., Kannan, L.S., Sivapalan, N., Danie, S., Anna, R.A., Ali, M.D. (2025). Prevalence of Digital Burnout among Medical Science Students of a Private College, Saudi Arabia. International Journal of Current Science Research and Review, 8(5), pp. 2070-2078. DOI: <https://doi.org/10.47191/ijcsrr/V8-i5-14>