Coronavirus-induced Computer Dependency Disorder

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INTRODUCTION

Until recently, Computer Dependency Disorder has been considered to be largely limited to sufferers younger than 40 years of age. Here we describe a new manifestation that shows increasing prevalence with age.

This condition, which was first reported among elderly populations during 2020, shows a distinctive progression. It often presents initially as its opposite – Computer Aversion Syndrome – but then slowly progresses through Computer Anxiety, Technological Euphoria, Computer Crash Phobia, Zoom Zombie and finally Computer Compulsion Complex.

MATERIALS AND METHODS

This study is based on the introspection of one 81-year-old woman who exhibited the extraordinary ability to manifest nearly 20 distinct pathologies within only seven months, reminding us that we all have undiscovered talents. The subject’s cognitive abilities were failing, but she could still occasionally pass the “I am not a robot” test that her browser regularly demanded of her.

RESULTS

The subject’s downward spiral, arising from the fear of a tiny crown-adorned virus, has manifested in the morbid conditions listed below.

**Triage Terror:** the knowledge that an elderly person is likely to be (and probably ethically should be) on the unfavorable side of the decision of who gets a ventilator in a swamped medical system.

*Triage Terror alternated with***

**Ventilator Vascillation:** indecision concerning the signing of a “Do Not Ventilate” form to help prevent oneself from becoming a ventilator vegetable.

*The two pathologies above led to***

**Isolation Idealization:** the hope that, if one stayed at home all day and also gets along seamlessly with one’s spouse (excuse the contradiction), then the crisis would evaporate.

*To maintain Isolation Idealization, the subject turned to***

**Computer Compensation Complex:** the hope that, if she and her friends all learned how to interact via the internet, then they would stay sane enough to maintain social isolation and not contribute to viral spread.
However, the effectiveness of Computer Compensation was counteracted by
App Apathy: boredom and downright dread about having to master the opaque
eccentricities of pertinent applications, especially since their tech-support staffs were
swamped and largely unavailable.

App Apathy was exacerbated by
Password Slip-up: indicated by a desk loaded with tiny slips of paper, each designating a
vital password for which the use had been forgotten.

Another counterbalance to Computer Compensation was
Fulminating Frustration: complicated by Computer Abuse Syndrome, expressed as the
desire to submerge a computer in the Pacific Ocean and smash a Cell Phone underfoot.

Also, the patient had some awareness of, and wished to avoid
Cellphone Cyborgism: the terminal condition in which a cell phone becomes an
irreplaceable body part that never leaves one’s presence, and for which separation feels like
death itself,

As well as,
Computer Crash Lobotomy: the complete loss of higher mental functions when a computer
refuses to do a requested task immediately

And
Coronavirus and Computer Virus Conflation: indicated by compulsive wiping of the
computer with 60% alcohol and the purchasing of masks for the computer’s mouse.

Nonetheless, the subject eventually progressed to
Internet Infatuation, accompanied by Ephemeral Euphoria: a temporary belief that
competence in Zoom would solve not only the current crisis but also the whole problem of
aging because social and physical isolation sometimes is a hallmark of old age.

However, this relatively positive pathology was rapidly followed by
Zoom Zonk: the feeling of being hit over the head by unending back-to-back Zoom meetings
and webinars.

Indications of Zoom Zonk include
Virtual Voyeurism: the uncontrollable desire to turn off one’s own computer camera while
continuing to observe the behavior of others on the computer screen.

And
Background Bewilderment: a feeling that the exotic backgrounds on Zoom video images
are soothingly constant and solid, whereas the human-like figures flickering in and out of
those backgrounds resemble ghosts.
Zoom Zonk pathology is also accompanied by

**Avatar Affinity**: the conviction that one’s avatar is much more lovable than one’s video image, leading to hiding behind the avatar.

And

**Lower extremity neglect**: a condition affecting all but the head and shoulders and resembling the behavior of brain-damaged “hemi-neglect” patients who deny the existence of the left or right sides of their bodies, refusing to wash, comb hair or even wear clothes on one side of the body.

**Prognosis.**

Bleak. At this time, the patient is in terminal stages of **Zoom Zombie** degeneration. We hope that she will not collapse from the related conditions of **Zoom Host Hysteria** and **Attention Attenuation**.

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**The author.** Dorothy L. Parker’s academic credentials for this psychiatric study are nil. She is a retired Professor of Bacteriology and Virology whose career emphasized organisms without brains. Her childhood interest in biology and genetics led to a BA in bacteriology from the University of South Dakota, one year of studying virology as a Fulbright Scholar at the University of Tübingen, Germany, and a PhD in molecular biology from U. California Berkeley. After 26 years of doing research and teaching at a campus of the University of Wisconsin, she retired to San Diego, where she continued with microbiological research at Scripps Institution of Oceanography for several years. She is a member of SDIS.

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