

What you need to know about

Seasonal Affective Disorder (S.A.D.)

What is it?

Many people experience seasonal changes in feelings of well being and in energy, sleep patterns and eating patterns, to a greater or lesser degree. The “winter blues” or “February blahs” are common. But some people experience powerful changes to the degree that it becomes a form of clinical depression, called Seasonal Affective Disorder (S.A.D.)

How prevalent is it?

About 2 to 6% of Canadians will experience S.A.D. in their lifetime. Another 15% experience a milder form of S.A.D.

Who is at risk?

Adults are at a higher risk of S.A.D. than children or teenagers. After the age of 50, the risk of S.A.D. starts to decline.

Women are up to eight times as likely as men to report having S.A.D.

People in northern countries are more likely to experience S.A.D. than those who live closer to the equator because the days get shorter the further north you go.

S.A.D. tends to run in families — most individuals with S.A.D. have at least one close relative with a history of depression.

What are the risk factors/triggers?

A variety of psychological, social and biological factors may contribute to S.A.D. Some known factors are:

- Inherent vulnerability
- Light deprivation
- Stress
- Biological factors unique to the individual, as well as hormonal changes due to physical conditions
- Early childhood trauma

What are the symptoms?

- Oversleeping— sometimes an increase of 2 to 4 or more hours per day
- Lethargy (low energy)
- Intense craving for carbohydrates
- Weight gain
- Withdrawal from social contacts
- Depressed mood occurring over at least two consecutive winters, alternating with non-depressed periods in the spring and summer

What do I need to tell my doctor?

- Write down any symptoms you’ve had
- Write down key personal information
- Make a list of all medications you are taking
- Write down questions to ask your doctor
- Take a family member or friend along

Discuss all of your symptoms with your doctor and describe how they are affecting your life (e.g. sleeping several extra hours per day and missing work/school/ appointments). Your doctor can suggest or provide appropriate therapy. Make sure to discuss all of the available treatments and medications and their benefits and side effects before making any decisions.

What are the treatment options?

Light therapy has been found to have an anti-depressant effect in 70% of people with S.A.D. Most people find relief within two weeks of beginning light therapy.

Light therapy involves exposure to bright light under specific conditions. The light can be delivered through special lights or through a light visor. Daily treatment sessions usually last from 15-30 minutes. Because homemade light fixtures have the potential to damage the eyes, it is best to purchase approved light therapy units.

A few mild side effects have been reported, including eyestrain, headaches, irritability and insomnia, the latter occurring if treatment is taken too late in the day.

Avoid self-diagnosis and self-treatment. There may be existing medical conditions that can interfere with light treatment. Consult your doctor. Be aware of eye problems or medications taken with photosensitivity as a side effect.

Other treatment options include psychotherapy and antidepressant medication. Your doctor will discuss this with you. Complementary treatment, such as peer support groups or other support programs, may also be helpful.

Finally, additional treatments such as massage, mindfulness and meditation, shiatsu, therapeutic touch, aromatherapy, tai chi, Pilates and yoga can also help to improve wellness.

What are the things I need to do to get well?

Stick to your treatment plan. Don't skip psychotherapy sessions. Even if you're feeling well, continue to take medication as prescribed.

Learn about S.A.D. Empower yourself by learning about your condition.

Pay attention to the warning signs. Find out what triggers your S.A.D. Make a plan so that you know what to do if your symptoms get worse. Contact your doctor or therapist if you notice any changes. Ask friends or family to watch out for warning signs.

Get exercise. Physical activity may help reduce the symptoms of S.A.D. Consider walking, jogging, swimming, gardening, or any other physical activity.

Avoid alcohol and illicit drugs. It may seem like they lessen your problems, but in the long run, they generally worsen symptoms and make S.A.D. harder to treat.

Get adequate sleep. This is especially important. If you're having trouble sleeping, talk to your doctor about what you can do.

Maintain an adequate diet. The Canada Food Guide is a useful reference in helping you choose to eat well.

What else can I read?

Canadian Consensus Guidelines for the Treatment of Seasonal Affective Disorder, edited by Raymond W. Lam and Anthony J. Levitt, Clinical and Academic Publishing (1999)

Don't be SAD, Your Guide to Conquering Seasonal Affective Disorder, Celeste A. Peters, Script Publishing Inc. (1994)

Winter Blues, Norman E. Rosenthal, The Guilford Press (1998)

Where else can I go to learn more?

University of British Columbia
S.A.D. information page
<http://ubcsad.bc-alter.net/home.htm>

The Society for Light Treatment
and Biological Rhythms
www.sltbr.org

Dr. Rosenthal on S.A.D.
(an interview with Katie Couric)
www.normanrosenthal.com/video1.html



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