

## **Seasonal Affective Disorder (SAD) / Winter Blues – Written by Tarek Aziz, M.D. – Psychiatry, Hocking Valley Medical Group**

Seasonal Affective Disorder (SAD) is a type of depression that comes and goes with the seasons. It occurs more in the late fall and early winter and usually goes away afterwards.

### **Signs and Symptoms**

SAD usually occurs with Major Depression, becoming worse during these seasons, but typically patients have Major Depression first.

#### **Symptoms of Major Depression**

- Feeling depressed most of the day, nearly every day
- Feeling hopeless or worthless
- Having low energy
- Losing interest in activities
- Sleep problems
- Appetite or weight changes
- Irritability
- Difficulty concentrating

#### **Symptoms of Winter Pattern of SAD/ Winter Blues:**

- Low energy
- Sleeping too much
- Overeating and weight gain
- Craving for carbohydrates and sugars
- Social withdrawal (feel like “hibernating”)

### **Risk Factors for SAD**

Winter Blues happens more frequently in:

- Females
- Living far from the equator
- Family history of depression
- Having depression or Bipolar disorder. The symptoms of depression may worsen with the seasons if you have one of these conditions.
- Younger Age. Younger adults have a higher risk of SAD than older adults

Biological Causes:

- People with SAD may have trouble regulating serotonin, the neurotransmitter involved in depression.
- Your biological clock (circadian rhythm). The reduced level of sunlight in fall and winter may cause winter-onset SAD. Decreased sunlight may disrupt your body's internal clock and lead to feelings of depression.
- People with SAD may overproduce the hormone melatonin. Darkness increases production of melatonin, which regulates sleep. As winter days become shorter,

- melatonin production increases, leaving people with SAD to feel sleepier and more lethargic, often with delayed circadian rhythms.
- People with SAD also may produce less Vitamin D. Vitamin D is believed to play a role in serotonin activity. *Vitamin D insufficiency may be associated with clinically significant depression symptoms.*

## Treatments and Therapies

These may be used alone or in combination.

**Medication:** Selective Serotonin Reuptake Inhibitors (SSRIs) are used to treat SAD. The FDA has also approved the use of Bupropion (Wellbutrin), for SAD treatment.

**Light Therapy:** Light therapy has been a mainstay of treatment for SAD since the 1980s. The idea behind light therapy is to replace the diminished sunshine of the fall and winter months using daily exposure to bright, artificial light. Symptoms of SAD may be relieved by sitting in front of a light box first thing in the morning, on a daily basis from the early fall until spring. Most typically require 20-60 minutes of exposure to 10,000 lux of cool-white fluorescent light, an amount that is about 20 times greater than ordinary indoor lighting.

**Psychotherapy:** Cognitive behavioral therapy (CBT) is type of psychotherapy that is effective for SAD.

**Vitamin D:** At present, vitamin D supplementation by itself is not regarded as an effective SAD treatment. The reason behind its use is that low blood levels of vitamin D were found in people with SAD. However, the evidence for its use has been mixed.

## Complications

Social withdrawal

School or work problems

Substance abuse

Other mental health disorders such as anxiety or eating disorders

Suicidal thoughts or behavior