It could be more than just the winter blues

By ACSH Staff — January 14, 2015

Seasonal affective disorder (SAD) is a type of depression related to changes in seasons. Most people with SAD experience symptoms that start in the fall and continue throughout the winter months, then fade away as spring begins. Symptoms of major depression that may be part of SAD include feeling depressed most of the day, having low energy, losing interest in activities once enjoyed, having difficulty concentrating, or even thoughts of death or suicide. Symptoms more specific to winter-onset SAD include irritability, tiredness, problems getting along with people, heavy feelings in the arms or legs, oversleeping, and carbohydrate cravings/weight gain. About 10 percent of Americans suffer from SAD.

Because seasonal depression is temporary, people who are affected by SAD often brush it off as natural winter blues that everyone needs to tough it through. However, steps can be taken to alleviate symptoms. Bright white light therapy is the main treatment for SAD, with the most supporting evidence. Shortening of days is a major contributing factor to SAD: it is thought that lack of sunlight disrupts circadian rhythm and leads to chemical imbalances in the brain.

When timed correctly, based on an estimate of the individual’s circadian rhythm phase while depressed, symptom reduction is strikingly rapid -- often within days, says Dr. Michael Terman, MD, of Columbia University Medical Center in New York. Patients should sit in front of a white light box (which shines much brighter than indoor lighting) every morning for 30 minutes or more, depending on a doctor’s recommendation. According to the National Institutes of Health, there is evidence that light therapy relieves SAD symptoms in up to 70 percent of patients.

Unfortunately, administration of light therapy by clinicians has been sloppy in many cases, without knowledge of or care in applying dosing and timing principles parallel to pharmacotherapy, continues Dr. Terman. Furthermore, many SAD suffers opt to self-treat rather than seek clinical guidance. The result, of course, is lower efficacy.
Light therapy is considered a first line treatment for SAD, but it doesn't work for everyone. Other therapies include cognitive-behavioral therapy and antidepressants. Also the basics, such as adequate sleep, consuming healthy foods and beverages, and regular exercise can help to improve mood all year round.

ACSH's Dr. Gil Ross added this: SAD, sad, or whatever, if a patient is immobilized with affective disorder, or of course expresses thoughts of self-harm (which must be inquired about of every such patient!), urgent intervention including hospitalization is indicated.