

Some people notice that they don't feel as good in the winter months, particularly if they live somewhere where the climate changes a lot and it is dark during the winter.

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# SAD *Syndrome*



This feeling can interfere with their lives - some people say that it feels "like

hibernation". This is what is called Seasonal Affective Disorder (SAD). The term "Winter Depression" and "Winter Blues" has also been used to describe this. SAD is clinically important, since approximately 2-5% of the general population in temperate climates are affected.

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## Symptoms

Symptoms of seasonal depression are typically consistent with those that occur with depression, and sometimes it can be difficult to tell if someone has seasonal depression or other types of depression. Symptoms that are typically more common in seasonal depression than in other forms of depression are carbohydrate craving, increased appetite, excessive sleepiness, and weight gain. A diagnosis of seasonal depression can be made after two consecutive occurrences of depression that occur and end at the same time every year, with the symptoms subsiding the rest of the year. Specific symptoms of seasonal depression can include:

- Depression: misery, guilt, loss of self-esteem, hopelessness, diminished interest in activities, despair, and apathy
- Anxiety: tension and inability to tolerate stress
- Mood changes: extremes of mood and, in some, periods of mania in spring and summer
- Sleep problems: desire to oversleep and difficulty staying awake or, sometimes, disturbed sleep and early morning waking
- Lethargy: feeling of fatigue and inability to carry out normal routine
- Overeating: craving for starchy and sweet foods resulting in weight gain
- Social problems: irritability and desire to avoid social contact
- Sexual problems: loss of libido and decreased interest in physical contact

## Causes

The specific cause of seasonal affective disorder remains unknown. Some factors that may come into play include:

- The reduced level of sunlight in autumn and winter may cause winter-onset SAD. This decrease in sunlight may disrupt the body's internal clock and lead to feelings of depression.
- A drop in serotonin, that affects mood, might play a role in SAD. Reduced sunlight can cause a drop in serotonin that may trigger depression.
- The change in season can disrupt the balance of the body's level of melatonin, which plays a role in sleep patterns and mood.

Factors that may increase the risk of seasonal affective disorder include:

- Like other types of depression, SAD is most common in women during the years when they can have children. It is about three times more common in women than it is in men. SAD is less common in children and in older adults, affecting men and women equally.
- Family history. People with SAD may be more likely to have blood relatives with SAD or another form of depression.

- Having clinical depression or bipolar disorder. Symptoms of depression may worsen seasonally in people who have one of these conditions.
- Living far from the equator. SAD appears to be more common among people who live far north or south of the equator. This may be due to decreased sunlight during the winter and longer days during the summer months.

## Treatment

There are four major types of treatment for SAD:

- Medication
- Light therapy
- Psychotherapy
- Vitamin D

## 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, light boxes filter out the ultraviolet rays and 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.



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## Medication

Selective Serotonin Reuptake Inhibitors (SSRIs) are used to treat SAD. It has also shown that bupropion is effective for treating SAD. These are more effective if taken at the beginning of the SAD season, just before symptoms appear. Usually, they are taken daily until springtime.

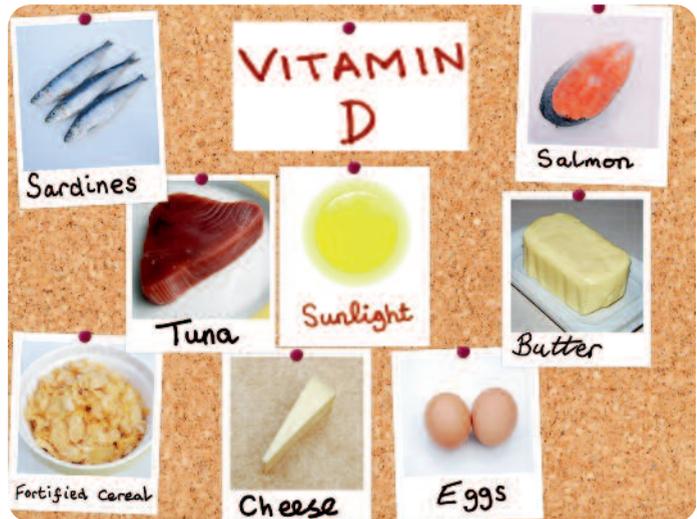
## Psychotherapy

Cognitive behavioural therapy (CBT) is effective for SAD.

Traditional cognitive behavioural therapy has been adapted for use with SAD (CBT-SAD). CBT-SAD relies on basic techniques of CBT such as identifying negative thoughts and replacing them with more positive thoughts along with behavioural activation. Behavioural activation seeks to help the person identify activities that are engaging and pleasurable, whether indoors or outdoors, to improve coping with winter.

## 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. The low levels are usually due to insufficient dietary intake or insufficient exposure to sunshine. However, the evidence for its use has been mixed. While some studies



suggest vitamin D supplementation may be as effective as light therapy.

## Prevention

Because of its predictable pattern of recurrence, patients with SAD may begin light therapy in the early autumn before the onset of symptoms. CBT may reduce the recurrence and severity of depressive.

One study showed that patients with a history of SAD who were randomized to take bupropion XL (300 mg per day)

starting in the early autumn had lower recurrence rates than those in the placebo group; however, results did not reach statistical significance because the recurrence rates were low overall, even in the placebo group. Some experts recommend certain lifestyle adjustments to prevent SAD symptoms, including exercising more often, increasing light in the home, practicing relaxation and stress management techniques, spending more time outside, and visiting sunnier, warmer climates.



### References

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