

Clinician Resources: Seasonal Affective Disorder

What is Seasonal Affective Disorder?

Seasonal Affective Disorder (SAD) is a major form of depression that occurs at the same time each year, usually beginning in the late fall to early winter months and ends in the spring. Mild forms of SAD are commonly referred to as “winter blues” but some people have a more severe form, which requires treatment.

What causes SAD?

The exact cause of SAD isn't fully understood, but it is believed that it may be related to the amount of daylight during the autumn and winter. The amount of sunlight can affect the levels of chemicals and hormones in the brain such as serotonin and melatonin. Serotonin plays a role in lifting the mood and Melatonin affects sleep and mood patterns. It is thought that people with SAD respond to a decrease in light by producing too little or too much of these chemicals.

What are the symptoms?

- Low mood for most of the day
- Fatigue
- Increased sleep
- Increased appetite
- Weight gain
- Irritability
- Interpersonal difficulties
- A heavy leaden feeling in the arms and legs
- In extreme cases suicidal thoughts

What is the treatment for SAD?

There are a number of steps you can suggest to your patients to help lessen the effects of SAD.

- Live and work in bright environments
- Plan a daily outside activity
- Sit near windows when inside
- Exercise Daily
- Eat a well balanced diet
- Practice relaxation and stress management
- Follow a consistent sleep routine
- Suggest the prescription of antidepressant medication therapy-as used for Major Depressive Disorder
- Use a sunlight simulating electronic device (light therapy)-see below

SAD FACTS

- 4 to 6 percent of the general population experience SAD
- Women outnumber men four to one
- SAD usually begins in a person's early twenties
- Statistics show SAD becomes increasingly more common and more severe the farther people are from the equator

The Use of Light Therapy

What is Light Therapy?

Research has shown that exposure to bright, artificial light can improve symptoms in two out of three cases of SAD. A 10,000-lux light box administers light therapy. This light is at least ten times stronger than normal light bulbs, very similar to natural daylight and won't harm your eyes.

How does a patient use light therapy?

The patient sits in front of the light box so that the light is on their face. It is not necessary to look directly into the light and most people do it while they read, eat, watch TV or sit at the computer. Generally, therapy begins with daily sessions of 10 to 15 minutes, which are gradually increased to 30 to 45 minute sessions. For most people, light therapy is most effective if used in the morning, upon waking. It is recommended that they begin light therapy in the early fall and continue the therapy until spring, when outdoor light alone is sufficient.

How soon does light therapy work?

Most people notice improvement in 2 to 4 days. In some cases, symptoms may not improve for several weeks. If symptoms are worsening or do not improve after 4-6 weeks seek alternative treatment.

Are there any side effects or risks?

Side effects are uncommon but may include...

- Headache
- Irritability
- Fatigue
- Difficulty sleeping (if used late in the day)
- Eyestrain

Where can I find a light box?

- Apollo Light Systems, www.apollolightsystems.com (lists multiple sites for light therapy)
- The sun box company, www.sunbox.com

(The cost of light boxes can range from \$150 to \$400 depending on the product that the patient decides to purchase. Some insurance companies may help with the cost

and the Health Flexible Spending Account can be used towards this purchase.)

Criteria for the light box

- Should provide 10,000 lux of illumination. (If the light has a lower lux increase the time of exposure. Example: 10,000-30 min, 5,000-1 hour, 2,400-2 hours)
- Fluorescent lamps should have a smooth diffusing screen that filters UV rays
- Lamps should give off a white light rather than colored light. “Full spectrum” lamps or blue (or bluish) lamps provide no known therapeutic advantage.
- Light should be projected downward toward the eyes at an angle to minimize aversive visual glare.
- Smaller is not better: when using a compact light box, even a small head movement will take the eyes out of the therapeutic range of the light.

More information about SAD can be found online, www.mayoclinic.com has a comprehensive overview.