



November 30, 2010 <http://understandmymind.com>

## Info about SAD

By Lisa Jancarik



The cold, soaking rain has finally arrived in Pittsburgh after many days of unlooked-for, delicious sunshine. Yes, November is starting to mean it around here, and moods are suffering a bit. Friends have complained online about getting out of bed or commuting in the dark. But how much of the complaining is normal kvetching about the onset of cold weather versus expression of seasonal affective disorder symptoms?

It seems a little hard to pin down, and I had some misconceptions about SAD when I last posted to say I was going to look into the subject. Since that time, I've read a few scholarly articles on the topic (see Resources below) and corresponded with an expert on the topic, Dr. Michael Terman. Dr. Terman is a professor in the Department of Psychiatry at Columbia University, director of the Center for Light Treatment and Biological Rhythms at Columbia University Medical Center, and president of the Center for Environmental Therapeutics.

I'm still no expert, so please don't use what you read here to self-diagnose or cook up your own treatment.

### *The Statistics*

So what about the kvetching on Facebook? Well, I've seen statistics for SAD ranging from 1 to 9.7% of the population experiencing SAD, depending on latitude, gender and some other factors listed below. However, I find the 4 to 6% range reported in *American Family Physician* a lot more plausible. The same journal further reported a possible 10 to 20% of the general population experiencing "subsyndromal features"...people like me, who complain about the weather but generally go about our business without letting it ruin our moods for more than a couple of days.

Some epidemiological data about SAD:

- SAD has a higher prevalence in northern latitudes than nearer the equator.
- SAD is reported more frequently in North America than Europe.
- The data also suggest that women are more commonly affected than men.
- Age 23 the mean age of onset, but SAD afflicts people in the 50- to 60-year-old range very commonly.
- SAD is associated with a history of major depression or bipolar depression, and in fact is defined in the *Diagnostic and Statistical Manual of Mental Disorders IV* (DSM IV) as a specifier for these conditions, not a separate diagnosis.

This last point is a particularly important one. A depressive episode that happens to occur during the winter is not automatically seasonal affective disorder. The distinction matters because the treatments for major depression, bipolar depression and SAD differ and need to be managed by a professional in each case. More about treatment follows.

### *Defining Depression and SAD*

Some symptoms of depression (and this is not an exhaustive list): *Depressed mood*

- *Loss of pleasure in all, or almost all, activities*
- *Significant weight loss without dieting or weight gain, or change in appetite (weight gain typifies SAD)*

- *Insomnia or sleeping more (the latter typifies SAD)*
- *Moving noticeably more slowly or seeming agitated/twitchy*
- *Fatigue or loss of energy*
- *Feelings of worthlessness or excessive/inappropriate guilt*
- *Indecisiveness or inability to focus*
- *Recurrent thoughts of death (not just fear of dying) and/or suicide*

Seasonal affective disorder may apply if a person routinely experiences these symptoms at a particular time of year, and then the symptoms go away or change to mania during another characteristic time of year. Significantly, to make the DSM IV's "Major Depressive Disorder, Recurrent, With Seasonal Pattern", the person can't have had any periods of depression not tied to the season during the same period of two years. Also, over the person's lifetime, the number of depressive episodes linked to the season must substantially outnumber non-seasonal depressions.

It's tricky to judge whether or not a depression has anything to do with the season, a point Dr. Terman impressed upon me.

"Individuals may have no idea—based on their isolated, personal experience—whether the mood change they experience in winter is clinically relevant," he said.

Dr. Terman suggested an online, free, confidential self-assessment tool at [http://www.cet.org/eng/Tools\\_ENG.html](http://www.cet.org/eng/Tools_ENG.html)<sup>[2]</sup> for anyone who thinks he or she might be suffering from a depressive mood disorder. It assesses the likelihood of a mood disorder and attempts to distinguish between seasonal and non-seasonal mood symptoms. However, the online assessment is offered as a starting point for discussion with the user's own doctor. In fact, the results page for the online survey will urge the user to pursue and findings with a clinician.

### ***Treating SAD***

When I first thought about writing on this topic, all I really knew about seasonal affective disorder was that people who had it used special lighting to treat the symptoms. A lot of the overly general information on the internet led me, as a casual reader, to wonder why use special lighting to mimic daylight? Why not just go outside?

"Getting outdoors during the winter can be helpful—more so if winter symptoms are very mild—but it is not a reliable solution," Dr. Terman told me. He went on to point out two important flaws in this strategy. "People with winter depression often have little motivation or energy for such a routine, which is further complicated by inclement weather."

So what's the deal with the light boxes, then? According to Dr. Terman, light boxes "trick the brain" into thinking the season is different, resetting the circadian rhythm earlier. With later winter sunrises, the body's natural clock can drift later, and the light box corrects this tendency with use just after awakening (and the predawn timetable means going outside at this hour would be pointless). An article in *American Family Physician* attributes this reset to an adjustment in "the circadian pattern of melatonin secretion."

Dr. Terman warns that "people who fall into a major depressive episode in winter should not purchase and use light boxes without clinical supervision. There are too many ways to do it wrong, with a risk of worsening rather than relieving symptoms."

In other words, don't think that the sunlamp your mother uses for her houseplants is a substitute for a light box, or that a "dawn" alarm clock will do the trick (many of these clocks are sold without clinical data to support any claims of effectiveness). Lighting not specifically designed to treat SAD may not be bright enough or have the necessarily UV filtration.

If you have SAD, then you would need not only a light box of the proper kind but a clinician's supervision to know what to do with it. Interestingly, there has been some recent work to suggest that light boxes may help non-seasonal depression as well.

What about me? I definitely had a little dip in my mood for a few days after Halloween, but by the time my first article posted, I was already starting to shake it off. I wouldn't describe myself as depressed now, so I haven't sought treatment for my mood this year. I do wonder, though, if I hadn't had a mild SAD in years past—I have a history of moderate depression in my twenties, and I still associate some of those times with the gray winter. As a woman with a depressive history, I did fit the profile of a fairly typical SAD sufferer during my twenties.

My strategy of getting outside more and cleaning up inside wouldn't qualify as treatment for a real clinical depression, but I am deriving a great deal of satisfaction from both efforts. Our puppy enforces trips outside and builds some pleasant associations with the crisp outdoor air as she frolics at the dog park (I admit it...she's growing on me). This year, the gray skies of the Pittsburgh late fall and winter aren't holding me back. I hope the same will be true for you.

*Understand My Mind wishes to thank Dr. Michael Terman for his contributions to this article. Any factual errors in this article are mine. Please do not use this article as a means for self-diagnosis or treatment of any mood symptoms you may be experiencing. Please consult your MD, psychotherapist or medical provider for more information, treatment and support service.*

## **Resources**

Website for the Center for Environmental Therapeutics: [http://www.cet.org/eng/Index\\_ENG.html](http://www.cet.org/eng/Index_ENG.html)<sup>[3]</sup>

From CNS Spectrums: <http://www.cnsspectrums.com/aspx/articleDetail.aspx?articleid=265><sup>[4]</sup>

From American Family Physician: <http://www.aafp.org/afp/2006/1101/p1521.html><sup>[5]</sup>,  
<http://www.aafp.org/afp/980315ap/saeed.html><sup>[6]</sup>