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Antidepressant debated for winter's SAD people

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The shorter, darker days that herald winter's arrival can make anyone feel miserable.

But for approximately 20 percent of the population, that lack of sunlight can lead to a form of clinical depression called seasonal affective disorder, or SAD, which can last as long as six months.

The first specific drug treatment for the disorder is now available since the FDA's approval in June of a medication commonly used to treat depression and help people stop smoking. The antidepressant, Wellbutrin XL, has been found to prevent SAD episodes before they start, studies show.

Although that's raising hopes among long-term sufferers, doctors don't agree on whether the medication's risks outweigh its benefits.

Dr. Norman Rosenthal, author of "Winter Blues: Seasonal Affective Disorder: What It Is and How to Overcome It" (Guilford Press), heralds the approval of Wellbutrin XL as a safe, convenient way to keep SAD at bay. "The availability of a single pill that basically prevents the whole development of the illness is a very useful addition to our arsenal against this condition," said Rosenthal, a Rockville, Md.-based investigator who participated in studies leading to the FDA's approval. He is also a consultant for the drug's manufacturer, GlaxoSmithKline.

But Michael Terman, director of the Center for Light Treatment and Biological Rhythms at Columbia University Medical Center in Manhattan, isn't as optimistic.

"Historically, medications are given after you become depressed," he said. "There is no guarantee that a person is going to develop a clinically significant

major depression, so there is a chance that you are taking the drug unnecessarily."

SAD can occur during any season, but it typically strikes at the onset of the winter months, explains Dr. Arthur Rifkin, a psychiatrist at the Zucker Hillside Hospital in Glen Oaks. While the milder "winter doldrums" is characterized by sleep disturbances, feeling sluggish, a lack of motivation and by weight gain, a more serious form of SAD is considered major clinical depression. It is characterized by decreased or increased appetite, lethargy, feelings of hopelessness, restlessness or worthlessness, social withdrawal and sometimes suicidal thoughts.

But Rifkin said that although Wellbutrin XL is considered a well-tolerated drug, it is not without risks. Its label features a black-box warning regarding suicidal tendencies. Other side effects include restlessness, poor sleep, poor appetite and a risk of seizures.

Rifkin said the studies that demonstrated Wellbutrin's effectiveness at preventing SAD were not overwhelmingly supportive. "Most of the patients who had previous episodes did fine without medicine," he said.

What makes SAD unique from other major depressive episodes is its connection to light exposure.

Doctors have demonstrated that exposure to light via a light box for about 30 minutes per day can correct that problem. The exposure activates photoreceptors in the eye that link to an individual's biological clock. SAD appears to occur when the human biological clock attempts to play catch-up to the sun's rising schedule. "The clock is fighting against us in winter," Terman says.

Rosenthal is an advocate of light therapy, but he says many times people who are depressed are often too lethargic to seek treatment. Of the more than 1,000 people who participated in the Wellbutrin studies, he says, less than one quarter received light therapy.

Ultimately, doctors seem to agree that the decision on which SAD treatment to use comes down to the severity of a patient's condition. Terman said, "If you are experiencing a major depression, you should not use any treatment, including light, without professional supervision."

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