



e-quilibrium

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SAD

During the winter months, many people experience what may be described as the “winter blues.” Common symptoms include increased fatigue, increased sleep, decreased interest in activities, and increased appetite and weight gain. The increased appetite usually involves cravings for carbohydrates, especially sugars and starches. There may or may not be feelings of depression. Comparing this symptom cluster to hibernation seems warranted.

Are the “winter blues” the same as seasonal affective disorder (SAD)? According to the DSM-IV, SAD is only diagnosed when there is a seasonal pattern to a person’s recurrent major depressive episodes, or a seasonal pattern in bipolar disorder. In other words, SAD is considered a specific form of another mood disorder, not a unique disorder itself. Furthermore, seasonal affective disorder may be marked by hypomanic or manic episodes in the spring or summer. Suffice it to say that SAD is officially a condition more complex and severe than the “winter blues.” (This could change in the upcoming DSM-V as some experts argue that seasonal affective disorder should itself be an independent diagnostic category.)

There is a geographic pattern to both SAD and the “winter blues.” In the northern hemisphere, prevalence increases as latitudes progress to the north. This isn’t a cold weather phenomenon, rather it is a “light” phenomenon. While most people’s moods and circadian cycles are affected by light exposure, it appears that some people are particularly light sensitive and hence more likely to experience seasonal mood changes. When seasonal mood changes are severe, or when

there is a noticeable decline in functioning, it is important to seek professional treatment.

Light therapy (exposure to full spectrum bright light) for persons with winter mood changes has proven to be effective. The most common prescription for use of a “light box” is to have exposure to 10,000 lux for 30 minutes, with morning exposure commonly found to be most helpful. Of note, studies of treatment for SAD tend to find that light therapy is at least as effective, and in some cases more effective, than treatment with antidepressant medication.

There are lifestyle factors that can play a role in reducing the susceptibility to and severity of both the “winter blues” and SAD. When possible, getting natural light exposure (even if it is cloudy) during the winter months is important. Regular exercise is certainly imperative, and when done outside during daylight is a way to simultaneously get light exposure (e.g., noontime walks). Trying to maintain a well-balanced diet, along with portion control, can help ward off weight gain. To the extent possible, maintaining a usual sleep-wake cycle is beneficial, including the avoidance of excessive sleep. Additionally, staying involved socially, and in other activities that are typically enjoyed, is advisable.

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