

understanding



seasonal affective
disorder

Understanding seasonal affective disorder

This booklet is for anyone who experiences seasonal affective disorder (SAD). It describes the symptoms and the different types of treatment available. It also suggests ways that you can help yourself, and what friends and family can do to help.

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What is seasonal affective disorder (SAD)?

Seasonal affective disorder (SAD) is a form of depression that people experience at a particular time of year or during a particular season.

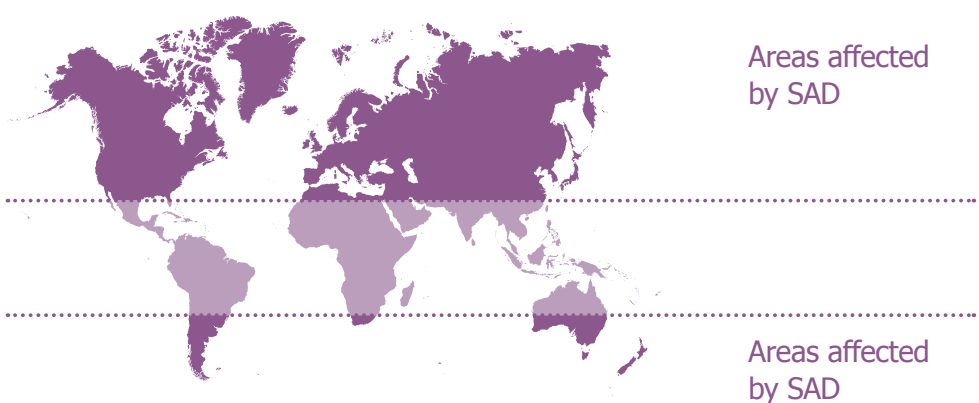
Most of us are affected by the change in seasons – it is normal to feel more cheerful and energetic when the sun is shining and the days are longer, or to find that you eat more or sleep longer in winter.

However, if you experience SAD, the change in seasons will have a much greater effect on your mood and energy levels, and lead to symptoms of depression that have a significant impact on your day-to-day life.

Most people experience SAD during the winter. Less commonly, some people find that they experience SAD in reverse – with depressive symptoms occurring in summer.

👤👤 *For years I suffered from depression. It started in the autumn, as the evenings drew in. By Christmas, I would be so low that I could barely get out of bed... One year, I felt so bad that I went to bed on Christmas Eve and refused to move.* 👤👤

You are more likely to experience SAD if you live in a country where there are significant changes to daylight, temperature and weather between seasons.



Because of this, SAD is more common in Scandinavia, Europe, North America, North Asia, and in southern parts of Australia and South America. It's extremely rare to find people with symptoms of SAD living near the equator, where daylight hours are long and bright all year round. In northern Europe, it is estimated that about one in ten people experience some symptoms of SAD.

What are the common signs of SAD?

If you experience SAD symptoms for two or three years, you are likely to receive a diagnosis of SAD. There are many different symptoms of SAD, and you may experience some or all of the following:

- lack of energy for everyday tasks, such as studying or going to work
- concentration problems
- sleep problems
- depression – feeling sad, low, tearful, guilty, like you have let others or yourself down; sometimes hopeless and despairing, sometimes apathetic and feeling nothing
- anxiety – tenseness and inability to cope with everyday stresses; panic attacks
- mood changes – in some people, bursts of hyperactivity and cheerfulness (known as hypomania) in spring and autumn
- overeating – particularly craving carbohydrates and putting on weight
- being more prone to illness – some people with SAD may have a lowered immune system during the winter, and may be more likely to get colds, infections and other illnesses
- loss of interest in sex or physical contact
- social and relationship problems – irritability or not wanting to see people; difficult or abusive behaviour
- alcohol or drug abuse.

●● *I first started feeling low in the winter months in my late 20s... Now, every autumn when the clocks change, I feel like I'm being buried alive. I want to hide away and hibernate until it's all over.* ●●

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In the UK, you may start to get SAD symptoms between September and November and they may continue until March, April or even May the following year. If you experience symptoms in reverse, they may begin around March and continue into the autumn. Symptoms tend to go away either suddenly (often with a short period of hyperactivity) or gradually, depending on the amount of sunlight in the spring and early summer.

For some people, symptoms are fairly mild and last for a shorter period, mainly during December, January and February, and are known as the 'winter blues', or sub-syndromal SAD. A small percentage of people have very severe symptoms and find it hard to carry out day-to-day tasks in winter without continuous treatment.

What causes SAD?

The exact causes of SAD are still unclear. However, there are several theories about what causes it and why some people are more vulnerable to it than others.

The effects of light

When light hits the back of the eye (the retina), messages are passed to the part of the brain (the hypothalamus) that rules sleep, appetite, sex drive, temperature, mood and activity. If there's not enough light, these functions are likely to slow down and gradually stop. Some people seem to need a lot more light than others for their body to function normally, and are therefore more likely to develop SAD symptoms if there are low levels of light.

Low serotonin levels

There are several brain chemicals involved in SAD, but the main one is serotonin. People experiencing depression have been found to have lower levels of serotonin, particularly in winter. It is thought that the brain's system for releasing and absorbing serotonin to regulate moods might not work properly in people with SAD.

High melatonin levels

When it's dark, the pineal gland in the brain produces the hormone melatonin which makes us sleep. When it becomes light again, it stops producing melatonin and we wake up. It has been found that people with SAD produce much higher melatonin levels in winter than other people. This is also what happens to animals when they hibernate.

However, the relationship between melatonin levels and SAD is still unclear. We know that if someone with high melatonin levels is exposed to bright light, their melatonin levels drop to normal. However, trials have shown that even after their melatonin levels have returned to normal, most people continue to experience the depressive symptoms of SAD. This suggests that melatonin is unlikely to be the only cause of SAD.

Disrupted body clock

Your brain sets your body clock (circadian rhythm) by the hours of daylight. One theory is that if you experience SAD, the part of the brain that does this doesn't work properly and so your body clock slows down, leading to tiredness and depression. However, as bright light (in the morning or from light treatment) appears to reduce symptoms of SAD, a problem with this part of the brain is unlikely to be the only cause of SAD. Also, some experts have argued that it is natural for the body clock to try to slow down in the winter months.

Other possible triggers

Like other forms of depression, SAD has also been reported to have been triggered by an unwelcome or traumatic life event, such a major loss or bereavement, an assault, or by serious illness. It may also be triggered by physical illness, a change to diet or medication, or the use (or withdrawal from) street drugs and alcohol (see Mind's booklet *Understanding depression* for more information). People who have lived near the equator for part of their lives and then moved to the UK seem to be particularly vulnerable to developing SAD.

What can I do to help myself?

Many people with SAD notice that their symptoms of depression are seasonal and develop self-help strategies that allow them to manage the condition themselves, either on their own or with other treatment. Here are some suggestions that might be helpful.

Make the most of natural light

We know that being outdoors throughout the winter doesn't cure SAD, because people who work outside also experience SAD symptoms. However, it is still worth taking opportunities to be exposed to natural light when possible. Going outdoors, particularly around midday or on bright days, can be effective in reducing symptoms. It might help to try to wear sunglasses a bit less often to allow greater exposure to natural light (only if it is safe and comfortable to do so). Having pale colours within the home that reflect light from outside can also be helpful.

Avoid stress

People are more likely to suffer from stress in winter. If you find this time of year difficult, try to plan ahead to reduce the amount of stressful or difficult activities you have during this time. Plan stressful events for summer where possible, particularly major ones, such as changing jobs, moving home, doing decorating or repairs or having a baby.

Take advantage of times when you feel well in summer to prepare for the winter – for example, by buying Christmas presents or stocking up your kitchen cupboards. If you can, try to make more spare time to rest, relax or do pleasant activities in the winter. Perhaps pamper yourself physically with a massage, or learn a relaxation technique to help you unwind. (See Mind's booklet *How to manage stress*.)

👉👉 *I find keeping warm makes me feel better. I go to the gym – I do a short work out, around fifteen minutes and then sit in the sauna. Ten minutes in there and a nice shower and I feel a lot better.* 👉👉

Exercise and eat well

Try to keep physically active during the winter. While you may not feel like it at the time, physical activity can be very effective in lifting your mood and increasing your energy levels. It doesn't have to be anything particularly strenuous – doing housework, gardening or going for a gentle walk can all help. Doing something physical outside in a green space, such as the park or the countryside, has been shown to be especially helpful.

A healthy diet is also important, and you should try to balance the common SAD craving for carbohydrates, such as pasta and potatoes, with plenty of fresh fruit and vegetables. Some people find that taking extra vitamin B12 is helpful.

Visit somewhere with more light

If you can afford it, a holiday to a sunnier climate is likely to reduce symptoms, but you may find that on returning to the UK your SAD will temporarily become much worse. It seems that the contrast in light levels can do more harm than good sometimes, so check with your doctor or the SAD Association before going away if you have any doubts. (See 'Useful contacts' on p.15.)

Consider using a light box

Using a light box has been found to be an effective treatment for SAD, as it increases your exposure to light during the winter months. Light boxes are at least ten times the intensity of household lights. They are available in different strengths and sizes – for SAD, a strength of at least 2,500 lux is recommended. You can also get them as visors.

People benefit from using a light box in different ways. Many people find that it is useful to use one every day, but it is best to experiment to find a routine that works for you. The average use is one or two hours a day during darker months and the maximum is about four hours. Some light boxes are much brighter and can cut treatment time down to half an hour. You can use your lights at any time of day, although it's best not to use it before you go to bed, as the effect of the light may make it hard to sleep.

Occasionally, people report side effects from using a light box, such as headaches, irritability or, in very rare cases, nausea. Changing your position may help, but if problems persist, you should stop using it. If you use a light box regularly, you should tell your optician and make sure you have an annual eye check-up. If you have existing eye problems, you should check with your optician that they are safe for you to use. You can't get light boxes on the NHS, so it's best to try one out before buying – manufacturers and suppliers may be able to offer you a free trial, or you could hire one for a short period first. (See 'Useful contacts' on p.15.)

Improve your support network

Think about joining a support group. Sharing your experience with others who know what it's like can be very therapeutic. Many support groups for depression will have members who experience SAD or find they feel worse at certain times of the year. Your GP or local Mind should be able to advise you about groups that may be suitable for you in your area. (See 'Useful contacts' on p.15.)

Knowing that you are not alone and that help is available can make SAD easier to cope with. Get as much support as possible from your family and friends. Tell them about the condition, so they know what to expect and how to help. If your GP doesn't know about SAD, you can get more information from the organisations listed in 'Useful contacts' on p.15.

What treatments are available?

If you find that you cannot manage your symptoms yourself, or that they are starting to have a significant impact on your day-to-day life, you might find it helpful to talk to your GP. They will be able to give you further information and discuss treatment options with you. You may want to discuss your treatment with your GP regularly, particularly if symptoms worsen, or do not get better after trying different treatment options.

Your doctor should discuss all your treatment options with you, and your views and preferences should be taken into account when making decisions about your treatment.

Talking treatments

Talking treatments, such as counselling, psychotherapy or cognitive behaviour therapy (CBT), can be extremely useful in helping people to cope with SAD symptoms. They can also help you recognise and deal with other factors that may be contributing to your symptoms. (See Mind's booklet *Making sense of talking treatments*.)

Cognitive behaviour therapy (CBT) is often offered for SAD. It aims to identify connections between your thoughts, feelings and behaviour, and helps you develop practical skills to manage them. Although it is often short-term, it may last up to 12 months. You may also be offered computerised CBT for mild SAD, which uses a programme you can follow either by yourself or in addition to sessions with a therapist. (See Mind's booklet *Making sense of cognitive behaviour therapy*.)

Your GP should be able to give you information about talking treatments and refer you to a local practitioner. Waiting times to access talking treatments on the NHS can be long, so you may choose to see a therapist privately. The British Association for Counselling and Psychotherapy (BACP) maintains a list of accredited practitioners (see 'Useful contacts' on p.15). Some offer a reduced fee for people on a limited income.

Antidepressants

Antidepressant drugs work on brain chemicals (such as serotonin) to lift your mood. They don't cure SAD, but can help you cope better with some of the symptoms. If you are offered antidepressants, you will usually be offered SSRI (selective serotonin reuptake inhibitor) antidepressants, such as paroxetine (Seroxat), sertraline (Lustral) and fluoxetine (Prozac).

SSRIs have been shown to be effective in treating severe cases of SAD, but are not recommended as a treatment for mild or moderate SAD. They can be combined with light treatment and taken seasonally so they have more effect during the winter. SSRI antidepressants have to be taken for around two to six weeks before becoming effective, so you may want to begin taking them a few weeks before your symptoms usually begin to get the maximum benefit.

Occasionally, you may also be offered older antidepressants such as amitriptyline, imipramine and dosulepin, but these are not usually used as they can increase symptoms like sleepiness. All antidepressants can cause side effects, so it is important to discuss these and the possible benefits of taking them with your GP before starting treatment. (See Mind's booklet *Making sense of antidepressants* for more information.)

St John's wort

St John's wort is a popular herbal remedy that some people find helpful to deal with mild or moderate symptoms of SAD. However, it is not suitable for severe SAD or if you use a light box as it can make your skin very sensitive to light. You shouldn't take St John's wort if you are taking prescription antidepressants. You should also seek advice from your GP or a pharmacist before using it with any other medication, as it can interfere with their effects. (See Mind's online booklet *Making sense of St John's wort*.)

Bright light therapy

Although you can use a light box to increase your light exposure yourself (see p.9), in some cases, a more structured course of light therapy supervised by a medical professional may be useful. While light therapy is recommended by the National Institute for Health and Care Excellence (NICE) for SAD, it is not usually available on the NHS. If it's not available in your area, a private health company may be able to provide it. Your GP should be able to advise you about what you can access in your area.

Specialist SAD services

If you require more intensive support, your GP may refer you to a psychiatrist or service that specialises in treating SAD. Unfortunately, there are only a few NHS clinics specifically for SAD available, so it can be difficult to get a referral and you may have to wait a long time for an appointment.

What can friends and family do to help?

This section is for friends and family who want to support someone they know who has seasonal affective disorder (SAD).

SAD can have a major impact on someone's life, and leave them feeling very ill for half of the year. Feelings of hopelessness, helplessness and worthlessness often mean that people avoid their friends and relatives rather than ask for help or support. However, this is a time when they need your help and support most.

Perhaps the most important thing that you can do is to encourage your friend or relative to seek appropriate treatment. You can reassure them that it is possible to do something to improve their situation, but you need to do so in a caring and sympathetic way.

If you are able, you might want to offer them practical support to help with this. For example, you could:

- help out with household tasks, particularly if they need time for treatment such as seeing a counsellor or light therapy
- if they are taking antidepressants, help them to cope with any side effects where you can – for example by letting them lie in if they have disturbed sleep
- be particularly sensitive about how many demands they can cope with – for example, avoid having large numbers of house guests at once during winter.

As well as these practical steps, you can show that you care by listening sympathetically, by being affectionate, by appreciating them, or simply by spending time with them.

Even with support, someone with SAD can be irritable or find it difficult to relate to other people. It can be hard to support someone if they do not appear to appreciate the help you are trying to offer. You may find that you need to be a bit more patient than usual. Try not to blame the person for being depressed, or tell them to 'pull themselves together'. They are probably already blaming themselves, and criticism is likely to make them feel even worse. Remember that with help and understanding they are likely to feel better in time.

Supporting a friend or relative can be difficult, and you may want to seek support to help you cope. There may be a local support group for people in a similar situation, or you might want to talk to your GP about getting help for yourself. (See Mind's booklet *How to cope as a carer* for more information).

Useful contacts

Mind

Mind Infoline: 0300 123 3393
 email: info@mind.org.uk
 web: mind.org.uk
 Details of local Minds, and Mind's
 Legal Advice Line. Language Line is
 available for talking in a language
 other than English.

British Association for Counselling and Psychotherapy (BACP)

tel: 01455 883 300
 web: itsgoodtotalk.org.uk
 For practitioners in your area.

Lumie

tel: 01954 780 500
 web: lumie.com
 Information on light boxes and SAD.

NHS Choices

web: nhs.uk
 Information about SAD.

SAD Association

web: sada.org.uk
 Information and support.

SAD shop

information line: 01704 500 505
 web: sad-lighthire.co.uk
 Information on light boxes and SAD.

Further information

To read or print Mind's information booklets for free, visit mind.org.uk
 or contact Mind infoline on 0300 123 3393 or at info@mind.org.uk

To buy copies of Mind's information booklets, visit mind.org.uk
 phone 0844 448 4448 or email publications@mind.org.uk

This booklet was written by Sam Challis

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Mind
 (National Association for Mental Health)
 15-19 Broadway
 London E15 4BQ
 tel: 020 8519 2122
 fax: 020 8522 1725
 web: mind.org.uk

Mind

We're Mind, the mental health charity for England and Wales. We believe no one should have to face a mental health problem alone. We're here for you. Today. Now. We're on your doorstep, on the end of a phone or online. Whether you're stressed, depressed or in crisis. We'll listen, give you advice, support and fight your corner. And we'll push for a better deal and respect for everyone experiencing a mental health problem.

Mind Infoline: 0300 123 3393

info@mind.org.uk

mind.org.uk

