

Seasonal affective disorder prevention and treatment

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Dear Mayo Clinic: Is seasonal affective disorder considered depression? If so, should I be treated for it year-round even though it comes and goes?

A: Seasonal affective disorder, or SAD, is a form of depression. Year-round treatment with medication for SAD may be recommended in some cases. But research has shown that, for many people with a history of SAD, treatment with a light box beginning in early fall can be useful in preventing SAD. Medication starting at that time may be helpful, too.

SAD is a type of depression that primarily affects people during the fall and winter months. The lower levels of sunlight in the winter and fall, particularly in locations farther from the equator, can disturb your internal clock. This disruption may lead to feelings of depression. The change in seasons also can influence your body's melatonin and serotonin - natural substances that play a role in sleep timing and mood. When combined, these factors may lead to SAD.

SAD is more than just feeling blue as the days get shorter or having the doldrums in January. Instead, it involves persistent, pervasive symptoms of <u>depression</u> during wintertime. Those symptoms may include feeling sad, angry or easily irritable most of the day nearly every day, lack of interest in activities you usually enjoy, difficulty concentrating, persistent tiredness, lack of energy and, in some cases, feeling that life isn't worth living or having suicidal thoughts.



People with SAD often feel the need to sleep considerably more than usual. SAD generally causes people to want to eat more, too, and they often gain weight. Carbohydrate cravings are common. SAD symptoms may get worse as winter progresses. By definition, the symptoms fade as daylight lengthens during springtime.

Effective treatments for SAD are available. Light box therapy is particularly useful. Light boxes mimic outdoor light by emitting a broad-spectrum ultraviolet light. The most common prescription is 30 minutes of light box use at the beginning of every morning, with the box 12 to 24 inches away. The intensity of the light box is recorded in lux, which is a measure of the amount of light you receive at a specific distance from a light source. The recommended intensity of the light typically is 10,000 lux.

Many people use light boxes while getting ready for the day, reading the paper or having breakfast. Again, starting light box therapy in early autumn may help prevent SAD from developing during the winter months.

Medication also may be part of treatment for SAD. The antidepressant medication bupropion has been approved by the U.S. Food and Drug Administration for the prevention of SAD. Other antidepressant medications may be effective, as well. These medications can be helpful for people who have a pattern of SAD and know that they are predisposed to developing it. If you've had SAD in the past, starting to take medication in early fall before the days get significantly shorter may prevent SAD symptoms or, if symptoms do appear, it can reduce their length and severity.

There are some self-care steps you can take all year long that may help reduce your risk of SAD, too. They include exercising regularly, maintaining healthy-sleep habits and a predictable sleep/wake cycle,



eating a healthy diet and limiting the amount of sugary foods you eat.

In addition, going outside on sunny days can make a difference. In the winter, when snow is on the ground, clear days can be brilliantly bright. Exposure to that natural sunlight can help ease SAD. Psychotherapy recently has been found to be effective for SAD, as well. The treatment that has shown the most success for prevention and treatment is cognitive behavioral therapy for SAD, or CBT-SAD.

If you've been diagnosed with SAD in the past or you suspect you have it, talk to your doctor about prevention and treatment options. Even if SAD can't always be prevented, there are treatments available that can help you successfully manage your symptoms and make the winter months easier to take.

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