



HEALTH WATCH: Don't Get S.A.D., Be Glad

by Patrick Bufi, ND

Do you find yourself feeling “blue” when winter rolls around? I’m not talking about the occasional low mood that is a normal part of a healthy life. I’m talking about extended periods, or recurring bouts, of feeling low or depressed that seem to go along with changing seasons. If so, you may be suffering from Seasonal Affective Disorder, appropriately abbreviated “SAD”... no joke. It’s also known as “winter blues” or “holiday blues,” because it is most common in winter.

What types of S.A.D. are there?

There are two basic types of SAD. The most common is winter-onset depression that usually begins in the fall or winter and will typically go away by summer. Summer-onset depression, also known as “Reverse SAD,” affects far fewer people and begins in spring or summer, going away by winter.

What are the symptoms?

As with other forms of depression, SAD symptoms may include feelings of guilt, hopelessness, loss of usual enjoyment and various physical complaints. In addition, you typically see the following, although not everyone experiences the same symptoms.

For Winter S.A.D.

Craving for carbohydrates

Weight gain

Fatigue

Increased sleep

Difficulty concentrating

Irritability and anxiety

Decreased sex drive

For Summer S.A.D.

Decreased appetite

Weight loss

Insomnia

Irritability and anxiety

Agitation

Increased sex drive

Who Gets S.A.D. and why?

As many as 500,000 people in the U.S. have winter-onset SAD, and it affects women more often than men, typically not before age 20. The risk of SAD then decreases with age (see, getting older isn’t all bad!).

The cause is linked to sunlight exposure, or lack thereof, and to the production of the hormones melatonin and serotonin. In winter, when the hours of daylight decrease and therefore also our sunlight exposure, melatonin goes up and serotonin goes down. (Melatonin is what makes bears hibernate in the winter.) The opposite is true for summer SAD.

In northern regions like ours, winter-onset SAD is more common, because our winters are long and dark.

How is it treated?

Increasing exposure to sunlight can improve symptoms. Light therapy, using a full-spectrum light box, is another option for winter SAD. Light therapy has few side effects when used correctly; however, if used too late in the day, it may cause insomnia. Exercise and a balanced diet are helpful, as well.

In addition, various types of plant-derived supplements may be effective, such as Vitamin D3 – the Sunshine Vitamin (see related article: [Supplement Spotlight](#)), Hypericum perforatum, also known as St. John’s wort, and melatonin. Better yet, combining supplements with light therapy may be most effective. But talk with your doctor first. Even natural supplements, whether used alone or in combination with other therapies, must be used correctly and judiciously.

Finally, if your SAD is severe, your doctor may want you to try specific medicines or behavior therapy, which may be used along with light therapy. ❖