Seasonal affective disorder: ways to beat the winter blues

As winter draws closer, some people will begin to experience recurring winter depression, or seasonal affective disorder (SAD). Anne Farmer shares her advice on how to beat the winter blues

ith winter just around the corner, some of us will start to feel the onset of the 'winter blues'. Feeling low because of the grey gloomy winter days is quite normal, but for some people the shorter days of winter can trigger the onset of a more severe depressive illness.

Just as it is natural for us to feel more energised and happy when the sun is shining and the weather is warm, research has shown that many of us feel miserable and lethargic, with a tendency to eat and sleep more in winter.

However, while around 17 per cent of Britons experience this type of 'winter blues', around 7% of the population suffer from a more serious form of recurring winter depression (NHS, 2010).

Seasonal Affective Disorder (SAD) is a type of depression that occurs regularly on a seasonal basis; usually in winter. It is more common in younger people, especially those in their twenties, and, like depression in general, is twice as likely to affect women.

Symptoms of SAD

SAD is characterised by a low mood (depression). Other symptoms include low self-esteem and self-confidence, a loss of pleasure in usual activities, loss of hope for the future, marked lethargy, feelings of guilt and social withdrawal among others. Wishing to be dead or even thinking of suicide may also occur.

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SAD is thought to be triggered by the lack of sunlight exposure in winter

Unlike non-seasonal depression, SAD sufferers are more likely to sleep excessively rather than have disrupted sleep patterns. People experiencing SAD tend to eat more rather than less, usually craving carbohydrate-rich, and sweet foods, which can result in weight gain in many sufferers.

SAD symptoms generally begin as the days start to get shorter in the autumn. Many sufferers cite the clocks going back in October as being the start of their symptoms. November through to February are the worst months for most and for the majority, symptoms start to improve by spring time, and may even disappear completely over summer. SAD is believed to be triggered largely by lack of exposure

to natural sunlight. In the winter, days are considerably shorter, with many people making their way both to and from work, school or college in the dark. Low clouds and rain further obscure the sun during daylight hours, and the shorter days limit the time available to get outdoors to experience what natural light is available during the winter.

However, even on the darkest winter days, there is still more natural daylight getting through the cloud cover than it is possible to obtain from artificial lighting. The problem for most people is that there is little desire or opportunity to get out into the natural light. Most of us work indoors under artificial lights all day, and

cold weather makes it difficult to venture outside during lunch hours. By the time we head home, it is usually completely dark.

Treating SAD

It is important for anyone suffering from seasonally-recurring depression to first talk to their GP. Most people who experience SAD are able to alleviate their symptoms through methods like light therapy, or increased exercise and socialising.

Around 85% of SAD sufferers benefit from light therapy, which consists of sitting in front of a light source that is much more powerful than ordinary domestic or office lighting (NHS, 2010). The most common light source is a box about the size of a sheet of A4 paper that stands on a desk or table. SAD sufferers sit in front of the box for around an hour daily during winter months.

It is best to use the box in the morning but some people use theirs in the evening for convenience. However, it is important not to use the light box too late at night as light treatment may make it difficult to sleep. To work effectively light treatment needs to be started before the onset of symptoms and continued every day until after the episode is ended. Any break from treatment will lead to a relapse.

Winter holidays

For those who can afford it, going away on holiday to warmer climates can provide temporary relief from SAD. Research shows that latitudes around those of North Africa or the Canary Islands can provide complete relief but anywhere at latitude lower than the UK will help reduce symptoms.

SAD sufferers who have lived in the Antipodes (Australia, New Zealand or South America or South Africa) say that their symptoms completely disappeared while they were living there. While going away on holiday during the winter months to somewhere with more sunlight will provide some respite, the benefits will only last while on holiday and symptoms are likely to re-emerge back home.

However for some, lifestyle changes are not enough to overcome SAD and medication, therapy or hospital respite may be required.

South London and Maudsley NHS
Foundation Trust has a specialist
tertiary service, including out-patient
and inpatient assessment for those
who need a second opinion about their
affective disorders, including SAD, and
is available to people across the UK. The
inpatient service, based at the Bethlem
Royal Hospital also treats complicated
or resistant mood disorders.

Further information

- The Seasonal Affective Disorder Association: www.sada.org.uk
- South London and Maudsely Trust Affective Disorders Service:

www.national.slam.nhs.uk/affectivedisorders

References

NHS (2010) Seasonal affective disorder. www.nhs.uk/ conditions/seasonal-affective-disorder (accessed 19 October 2010)

Advice for sufferers of SAD

Keep active

Research suggests that a daily walk is helpful in beating the winter blues. As well as exposing a person to natural daylight, exercise also boosts energy levels and the immune system.

Get outside

Get as much natural daylight as possible, especially at midday and on bright days. If you work in an office under artificial lighting try to get out at lunch time, even if it's raining. Go for a walk or eat lunch on a park bench if the weather permits. Try to plan some outdoor activities during your spare time too.

Keep warm

Being cold makes you more depressed and staying warm can reduce psychological distress, such as the winter blues, by half. Keep warm with hot drinks and food, layered clothing and efficient heating in living areas.

Eat healthily

A healthy diet boosts your mood, provides energy and prevents weight gain. Try not to give in to a sweet tooth as putting on weight will have on impact on your self-esteem and confidence

Lighten up

Around 85% of SAD sufferers benefit from light therapy. This consists of sitting in front of a light source that is much more powerful than ordinary domestic or office lighting. The most common light source is a box about the size of a sheet of A4 paper that stands on a desk or table. SAD sufferers sit in front of the box for around an hour daily during winter months. Light treatment should be started before symptoms begin and continued throughout winter. Unfortunately, light boxes are rarely available via the NHS. Contact the Seasonal Affective Disorder Association (SADA) for reputable suppliers.

Take a winter holiday

If you can afford it, going away during the winter months to somewhere with more sunlight will provide some respite from the SAD symptoms. Unfortunately, this will only last while you are away and the symptoms will return once you are back home.

See your friends and family

Socialising with friends and family helps prevent the winter blues, and don't give in to the temptation to stay at home alone.

Talk it through

Talking treatments such as counselling, psychotherapy or cognitive behavioural therapy (CBT) can help you cope with symptoms. Contact your local GP for further information.

Join a support group

Joining a SAD support group is an opportunity to share your experiences with others who know what its like to have SAD.

Seek help

If your symptoms are so bad that you can't live a normal life, see your GP for medical help. In severe cases of SAD, prescription antidepressant tablets, therapy or a hospital stay may be an option.