



Beat the Winter Blues

Three out of four people who suffer from seasonal affective disorder are women. Keep SAD at bay by staying active this season.

BY JAYME OTTO

Meredith looked forward to ski season all year, but when it finally arrived, she didn't feel like skiing. The two-hour drive from her apartment to the slopes seemed like a chore. In fact, everything seemed like a chore. Some mornings the 31-year-old struggled just to get out of bed. "The scariest part was that I didn't care about anything," she says. "It was like I was just going through the motions of my life."

Meredith's symptoms eventually subsided, and she forgot about them—until the next winter when the cycle repeated. Each year she'd dismiss her experience as "winter blahs" or PMS and blame her lethargy on the shorter, darker days. The energetic middle-school teacher never considered depression. But depression is exactly what she had.

Seasonal affective disorder (SAD) is a variation of depression that plagues normally healthy people with depressive symptoms during the winter. These symptoms include feelings of hopelessness, anxiety, loss of energy, social withdrawal, oversleeping, loss of interest in hobbies, carbohydrate cravings, weight gain, and difficulty concentrating and processing information. Approximately 6 percent of Americans experi-

ence SAD, and another 14 percent experience subsyndromal Seasonal Affective Disorder, a milder form of SAD.

But Kathleen Hall, PhD, founder and CEO of The Stress Institute, believes the number of sufferers is actually higher and that many people go undiagnosed. Women are more susceptible to SAD than men, but women tend to do what Meredith did: blame their symptoms on other things, like PMS. They fail to see that the sum of the parts equals SAD. "As women we become very adept at making excuses for what we fear society will deem as irrational or overemotional behavior," Hall says.

Jim Sorrell, MD, a psychiatrist at the University of Nebraska Medical Center and an associate professor of psychiatry specializing in mood disorders, cites the holidays as a reason why many fail to detect SAD. During the holidays, people expect weight gain and more readily accept feelings of sadness due to physical distance from or even loss of loved ones. "It's a common misconception to consider symptoms of SAD as a normal part of the holiday season," Sorrell says. "This prohibits people from taking action to get the help they need."

Although most people who develop SAD have a genetic predisposition for depression or anxiety, studies show that seasonal mood variations are also related to light. SAD is particularly prevalent in the world's northernmost latitudes, such as Finland, and people living in North Dakota are more likely to experience SAD than those residing in Florida.

Sorrell says SAD could be a leftover evolutionary drive toward hibernation. It's also been linked to our unnatural tendency to structure our days around a clock instead of daylight. Other theories for the disorder's origin connect SAD with serotonin, a brain chemical responsible for mood, and melatonin, a hormone produced by the pineal gland in dim light and darkness. A recent study showed that the mutation of a gene expressing melanopsin, a chemical in the retina involved in circadian rhythms and other non-visual responses to light, increased SAD risk.

So how do you know if you have SAD? Gabriela Cora, MD, a psychiatrist in Florida, says the key determinant is that your symptoms are not present throughout the year, but then you start to feel "gloomy" come fall or winter. Things you used to care about no longer seem important, and you withdraw from people close to you. The symptoms can come on gradually or suddenly and are marked by oversleeping and overeating. The tricky thing about SAD, though, is that once you're consumed by it, it is difficult to self-diagnose.

Most people only seek treatment when symptoms begin impacting their ability to work or care for family. The bad news is that undiagnosed SAD can impede your ability to function normally. The good news? SAD is easy to treat, especially since sufferers can predict and plan for its onset.

The most effective treatment for SAD is light therapy, says Hall, which can be as simple as it sounds: "Get outside for 20 minutes each day," she recommends. "Natural light is better than anything you can buy for the indoors," But if you can't get out, purchase indoor lights specifically designed to combat SAD. During evenings or other times of limited sunlight, the average living room lighting is only 400 lux—that's just 4 percent as strong as the standard light therapy box (sometimes called a "SAD light") at 10,000 lux.

Other methods of coping with SAD include taking medication, most commonly antidepressants, and/or psychotherapy done in a coaching style that works to improve overall lifestyle. The practice of "snowbirding," moving from a northern state to a southern state like Florida for the winter, is another solution, although freedom to fly the coop isn't a reality for everyone.

If you suspect you have SAD, consult a health-care professional for evaluation. "Once you find out what works best for you in managing SAD, there's no reason you can't have an amazingly wonderful life," Hall says. Or an amazingly wonderful winter at least.



SELF Starter

To deal with seasonal affective disorder, Kathleen Hall, PhD, offers a proactive approach that she calls SELF. The acronym for this self-directed strategy stands for serenity, exercise, love, and food. Subscribe to these tenets for a better winter:

Serenity.

Hall says you can get your brain to release depression-fighting serotonin by listening to your favorite song, even for just five minutes a day. A huge body of research shows that people who meditate, follow guided-imagery tapes, or even listen to nature sounds on their iPod have increased serotonin levels. Also keep a flower nearby—something blooming will ease depression and increase productivity and creativity.

Exercise.

Physical activity produces serotonin and endorphins. Hall cites a study that found five 20-minute bouts of exercise per week decreased depression symptoms as much as the antidepressant Zoloft. Depression and exhaustion make exercise feel counterintuitive, but it's important to make yourself be active if you're feeling depressed and tired, says Hall. She recommends learning five yoga poses that you can do anywhere and practicing them daily, keeping 5-pound dumbbells by your desk and grabbing them for a quick 20 reps several times a day, and using the buddy system at work—find a co-worker to walk with at lunchtime. Then take a family walk after dinner, or head to a bowling alley if it's too cold outside—do whatever you can to get your body moving.

Love.

SAD causes a tendency to withdraw, so maintaining relationships is especially important in combating it. Hall says that connections with others can positively change the chemical makeup of the brain: When you're physically close to someone you care about, your brain produces oxytocin, a depression-fighting hormone. She suggests setting up automated reminders to e-mail or phone friends several times a week to stay in touch, as well as dining with a friend at least once a week.

Food.

Food has a powerful impact on mood and can be used as medicine. Hall recommends eating breakfast to help control mood swings throughout the day and jump-start metabolism. Omega-3 fatty acids help alleviate depression, so take flaxseed oil or fish oil as liquids or capsules. Another key supplement is vitamin B6, which has a calming effect and increases serotonin. Hall's favorite superfood is blueberries—she calls them "brain berries" because they're high in antioxidants, which improve brain function.