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As winter recedes, SAD subsides

For those suffering from Seasonal Affective Disorder, springtime will be a welcome release from the winter blues

AT THIS time of year, as the days get brighter and the "grand stretch" in the evenings becomes undeniable, many of us will notice a concurrent lightening of our mood.

It's not at all unusual to have felt lethargic, anxious and irritable during the winter months. Symptoms such as fatigue, a craving for carbohydrates resulting in unwelcome weight gain, hypersomnia, loss of libido and poor motivation are experienced to some degree by a significant portion of the population.

This should not cause too much alarm as it has been estimated that one in four of us living at this latitude will suffer in this way. Understanding the underlying cause of our lassitude should help us to cope when the days draw in again later this year. It is only when seasonally dependent symptoms of depression become severe enough to be classified as an illness by a clinician that professional help may be required.

Although references to winter sadness date back to as early as 400 BC, the era of Hippocrates, Seasonal Affective Disorder (SAD) was only formally recognised and described in 1984 by South African-born psychiatrist Norman E Rosenthal as a result of his research work with the US National Institute of Mental Health.

Keen to understand the underlying

reasons for his own feelings of melancholy during the winter months, Rosenthal determined that SAD is a recurrent depressive or bipolar disorder that varies in severity and has a distinct seasonal pattern, with full remission being experienced during the summer months.

While depression associated with SAD is usually mild to moderate, it is important the condition be diagnosed and treated, if necessary, as in severe cases patients may experience suicidal tendencies. Rosenthal's pioneering work explored treatments for the condition, specifically in the area of light therapy.

In Ireland, we commonly associate Seasonal Affective Disorder with Nordic winters, where virtually perpetual darkness triggers understandable depression in many who dwell at the outer reaches of our continent. However, since lack of winter sunshine is the issue, Ireland's northerly latitude leaves us particularly susceptible to the condition too.

In order to establish the extent of the problem here, it's useful to look at US research showing that while the incidence of SAD in Florida was less than 1 per cent of the general population, this rose to 3 per cent in Canada and a sizeable 10 per cent in Alaska. As Dublin lies on a similar latitude to the Canadian city of Edmonton, it's likely that the incidence of SAD is somewhat comparable here. People may have felt worse this year than last as the presence of snow, reflecting what light there is, is thought to help the condition.

Speaking on the topic of depression earlier this year, Dr Declan Lyons, consultant psychiatrist at St Patricks University Hospital, Dublin, confirmed that SAD is a very genuine issue for some Irish people, typically having its onset during autumn before lifting again in spring.

SAD is more commonly diagnosed in women than men. Women are four times more likely to suffer from this disorder than their male counterparts, and women of childbearing age are particularly susceptible. This is often attributed to differences in biochemical responses to seasonal variation. The onset of SAD is most common in the second and third decades of life, but it has on occasion been diagnosed in children and can impair their emotional development.

Neolithic man, whose main means of survival was farming, knew the importance of living in harmony with the seasons and adjusted the pattern of life to fit, rising with the sun and maximising available daylight.

Up until the onset of the industrial revolution, 75 per cent of the population of Western Europe worked outdoors. Nowadays our modern lifestyle

ignores nature's cues, condemning all but 10 per cent of us to an indoor existence that dictates that we rise for work before dawn only to return home when the sun has long disappeared.

As with all forms of depression, recognising the symptoms is the key to tackling SAD. Once diagnosis has been made, an effective treatment plan can be implemented. Exposure to natural sunlight is very helpful and Dr Lyons believes that something as simple as taking a sun holiday around mid-term break in October can make a significant difference. Maximising exposure to daylight during the winter months by getting out for a walk or even sitting close to a window can help.

The most commonly prescribed treatment is light therapy, also known as phototherapy. More recently, cumbersome light boxes have been replaced by a more manageable device. The recognition that photoreceptors in our brain are more sensitive to daylight than our eyes has led to the development of an iPod-like gadget, costing about €200, that delivers a daily dose of artificial sunshine straight to the brain via the ears.

The results of initial clinical trials, presented at the 2011 International Forum on Mood and Anxiety Disorders in Budapest, found that 74 to 79 per cent of sufferers were totally cured of depressive symptoms after using this device for just eight to 12 minutes per day.

Alternative and complementary therapies to phototherapy are also often recommended, and Lyons confirms that medication sometimes has a role to play. Talking treatments such as counselling, psychotherapy or cognitive behaviour therapy (CBT) have proven to be effective too, and a combined approach is commonly used.

Above all, we can take heart from the knowledge that the arrival of spring has signalled a return to improved mood and enhanced wellbeing.

**ELEANOR
FITZSIMONS**

"Repeatedly, I saw in these cases moodiness set in in autumn and pass over in spring 'when the sap shoots in the trees' to excitement, corresponding in a certain sense to the emotional changes which come over even healthy individuals at the changes of the seasons"

- Emil Kraepelin, German psychiatrist and founder of modern scientific psychiatry, 1921

SAD: WHAT IS IT?

Symptoms

- Lethargy
- Hypersomnia and daytime fatigue
- Depression, feelings of despondency and unhappiness
- Anxiety and an inability to cope
- Unsociability and irritability towards others
- Loss of libido
- Craving for carbohydrates, particularly sugar, resulting in weight gain

Treatments

- Self-help by maximising time spent outdoors, eating well and exercising
- Light therapy (phototherapy)
- Medication
- Talking therapies including cognitive behavioural therapy (CBT)