Seasonal affective disorder — also referred to as SAD or the winter blues — is a form of depression that affects patients primarily in the fall and winter months. As many as 10 million U.S. residents have SAD. Most patients are women who first experienced symptoms in their 20s, but SAD can also affect men, children and teenagers.

**Symptoms of SAD**

People with SAD experience the same general symptoms as people with other forms of depression, but with a key difference: Symptoms occur around the same time each year, typically during the colder months, and then disappear in the spring and summer. For a few people (less than 10% of those with SAD), symptoms occur during the summer months and get better in winter.

You might have SAD if you experience some of the following symptoms:

- fatigue, lack of energy or daytime sleepiness
- trouble sleeping, insomnia or oversleeping
- irritability
- cravings for high-carbohydrate foods
- lack of interest in activities you normally enjoy
- social withdrawal

**Limited Light**

Although the exact cause of the condition is unknown, many researchers believe that SAD results from a mismatch between a person’s circadian rhythms — individual patterns of sleepiness and wakefulness — and environmental patterns of light and darkness.

Limited sunlight in the fall and winter months means that many people must wake up before sunrise and go to sleep long after sunset. Relying on the alarm clock rather than on sunlight to signal sleep and waking can cause some people to experience symptoms of depression.

Also, certain brain chemicals that can influence mood are produced or suppressed during periods of darkness. Melatonin, a hormone that signals sleep, is secreted in low light. And serotonin, a neurotransmitter that counters depression, seems to be triggered by sunlight.

People who work at night or who work long hours in buildings with few windows can experience SAD year-round. Other susceptible people can experience a bout of SAD during extended periods of overcast weather.

**Light Therapy**

People with mild winter blues may find that they feel better with more exposure to natural daylight. Spending more time outdoors or moving a workspace near a window may help.

People who can’t make these changes and those with more serious symptoms can often experience improvement with light therapy, which uses a light box with specially developed lights that mimic natural sunshine.

Even though it appears white, most indoor lighting is actually yellow-orange in color. Yet each color is necessary for health. Recent research has found that blue wavelengths of light reduce melatonin and help us to wake up and even to see better.

A light box, as well as light bulbs and tubes in our offices and homes, should produce the full range of wavelengths or colors that make up natural light.

**Treatment**

Treatment with a light box should be tailored to each patient. The intensity of the light, the length of exposure and the time of day of treatment can be adjusted for better results. Symptoms can lift in as little as a week. Your nurse practitioner can prescribe a light box, and it may be covered by your health insurance.

In addition to helping with SAD symptoms, some research shows that light boxes can have positive effects on premenstrual syndrome and calcium absorption.

Other studies suggest that seasonal affective disorder might improve with melatonin supplements. Like all dietary supplements, melatonin hasn’t been evaluated by the Food and Drug Administration, and there are no officially recommended melatonin doses for treating SAD.

If your SAD isn’t helped with light therapy, your nurse practitioner may prescribe an antidepressant. Only one medication — Wellbutrin XL — is currently approved for treating SAD. ❖