SEASON AFFECTIVE DISORDER
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PREDICT YOUR WEATHER

ANGRY

DEPRESSED

SO-SO

HAPPY

GLOOMY

AFRAID
SEASON AFFECTIVE DISORDER

Is a type of depression that's related to changes in seasons — sad begins and ends at about the same times every year.
THE HISTORY

DISCOVERED IN 1845

NAMED IN 1980

LIGHT THERAPY IN 2000’S
EFFECT ON THE HYPOTHALAMUS

MELATONIN

CIRCADIAN RHYTHM

SEROTONIN
IN THE WINTER THERE IS A DECREASE IN THE AMOUNT OF NATURAL LIGHT THAT REACHES US. THIS IS DUE PARTLY TO LESS DAYLIGHT HOURS AND PARTLY TO CHANGING WEATHER PATTERNS.
THIS LACK OF SUNLIGHT CAUSES A REDUCTION IN SEROTONIN PRODUCTION AND AN INCREASE IN THE LEVEL OF MELATONIN. THIS PRODUCES THE SYMPTOMS ASSOCIATED WITH SAD.
MOST SEVERE SYMPTOMS OCCUR IN THE MONTHS OF DECEMBER, JANUARY, & FEBRUARY
AFFECTS HALF A MILLION PEOPLE
S.A.D. AND GENDER

S.A.D. AFFECTS FOUR TIMES AS MANY WOMEN AS IT DOES MEN
THE INCIDENCE OF SAD IS HIGHER THE FARTHER NORTH YOU LIVE. FOR EXAMPLE, THE CONDITION IS SEVEN TIMES MORE COMMON IN WASHINGTON STATE THAN IN FLORIDA.
ALTHOUGH CHILDREN CAN BE DIAGNOSED WITH S.A.D. THE ONSET TYPICALLY OCCURS AFTER AGE 20
DSM-5

• The DSM-5 criteria for diagnosing depression with a seasonal pattern includes having these experiences for at least the last two years:
  • Depression that begins during a specific season every year
  • Depression that ends during a specific season every year
  • No episodes of depression during the season in which you experience a normal mood
  • Many more seasons of depression than seasons without depression over the lifetime of your illness
Classification of SAD

• In order to qualify as SAD a diagnosis must meet 4 criteria:
  • Depressive periods at a particular time of year
  • Relapse into depression or mania/hypomania at a particular time of year
  • Pattern of depression lasting two or more years with no nonseasonal major depressive episodes during the same period
  • The instances of depression following a seasonal pattern must outnumber other instances of depression throughout patient's life
WHAT ARE THE SYMPTOMS OF S.A.D.?
NOT BEING ABLE TO STAY AWAKE

DISTURBED/UNEASY SLEEP

OVERSLEEPING
REGULARLY OCCURRING SYMPTOMS OF DEPRESSION DURING THE FALL OR WINTER MONTHS.

INCLUDING LOSS OF FEELINGS
AVOIDING SOCIAL SITUATIONS

PULLING AWAY FROM FRIENDS
EXTREMES OF MOOD
INCREASE IN PMS
SYMPTOMS IN WOMEN
OVER-EATING

INCREASED CRAVING FOR SUGARY OR CARBOHYDRATE RICH FOODS
LOSS OF LIBIDO
INCREASE IN ANXIETY
WEAKENED IMMUNE SYSTEM
THOSE WITH MILD SYMPTOMS CAN BENEFIT FROM SPENDING TIME OUTDOORS DURING DAYLIGHT HOURS.
A sixty minute walk in the sunlight is very effective.
EXERCISING DAILY – OUTDOORS WHEN POSSIBLE
DAILY LOG

NOTING WEATHER CONDITIONS, ENERGY LEVELS, MOODS, APPETITE/WEIGHT, SLEEP TIMES AND ACTIVITIES.
AVOID STAYING UP LATE, AS MUCH AS POSSIBLE, WHICH DISRUPTS SLEEP SCHEDULE AND BIOLOGICAL CLOCK.
HURRICANE WARNING

• Imagine that a Hurricane Warning has just been issued for your area.

• A category five hurricane is forecast to make landfall in four hours and you are in its direct path.

• What are you going to need to survive the hurricane? What or who are you going to want with you?
Light Therapy (LT)

The least invasive, most natural and effective treatment of Seasonal Affective D/O (SAD)

The original theory behind LT was that it would cause a normalization of the phase-shift delay in SAD, to lengthen the photoperiod in winter in those with SAD and to suppress the production of melatonin by the pineal gland.
Psychotherapy

• Cognitive Therapy
• Behavioral Interventions
• Social Skills
• Positive Self-Talk
• Interpersonal Therapy

Psychotherapy requires significant commitment whereas treatment of depressive disorders with medication requires less effort.
Depression and Suicide

- Serious depression involves a long-lasting sad mood that doesn’t let up and a loss of pleasure in things you once enjoyed.
- Thoughts of death, negative thoughts of oneself, hopelessness, changes in appetite or sleep can also occur.
- Depression distorts one’s viewpoint making them focus only on their failures.
- Depressed thinking can convince someone that there is nothing to live for.
Elderly Suicide

- There is one elderly suicide every 83 minutes
- The elderly account for more than 25% of all suicides.
- 83% of elderly suicide are males, age 65 or older
- Elderly people have the highest level of suicide completion: 1 suicide for every 4 attempts.
- One of the leading causes of suicide among the elderly is depression, often undiagnosed &/or untreated.
Red Flags for Suicide Risk

- Mental Disorders
- Substance Abuse
- Family Hx. of Suicide
- Significant Loss
- Social Isolation
- Aggression/Impulsivity
- Access to Firearms
- Physical Illness

Having one of these risk factors doesn’t mean a person is in danger of killing him/herself. It just means the person is more vulnerable.
Danger Signs

- A previous attempt
- Verbal threats
- Change in behavior
- Signs of Depression
- Problems in school
- Themes of death
- Substance Abuse
- Unusual purchases
- Giving away possessions
DEPRESSION

- BORED
- ANGER
- FEAR
- GUILT
- HURT
- WORRY
- ALONE
EXPRESSION OF EMOTION
M-n-M FEELINGS

M&M FEEDINGS

AFRAID

HAPPY

SAD

ANGER

JEALOUS

A TIME YOU FELT LIKE DIRT
SELF-TALK

REALISTIC GOALS

COGNITIVE DISTORTIONS

PROCESS REALISTIC
ANTI-DEPRESSANTS.
Medication

• SSRI’s
• Prozac
• Zoloft
• Paxil
• Celexa
• Luvux
Self-Care

- Support
- Exercise
- Learning
- Fun
- Competence
- Awareness
- Relaxation
- Evaluation