

A Season for Depression

According to the National Weather Service, the winter solstice, or the shortest day of the year, will be on Wednesday, December 21st. Other meteorologists will sight the first day of December as the first day of meteorologic winter. Either way individuals who experience a seasonal pattern to depression already know that the days have become much shorter, and they are well into a bout of recurring depression popularly referred to as “Seasonal Affective Disorder” or SAD. Their symptoms of depression most likely began to increase in late September or early October with the shortening of the days moving into autumn. What is depression effected by seasonal changes exactly and what can be done to reduce its effect is important to know this time of year. Here is a deeper dive into this kind of depression.

First, let’s be clear about what is clinical or Major Depressive Disorder. According to the *Diagnostic and Statistical Manual of Mental Disorders 5* (DSM-5), the guide published by the American Psychiatric Association that therapists use to diagnosis, depression may be diagnosed if at least five symptoms have been present for a period of two consecutive weeks. Symptoms may include a down depressed mood, a decrease of interest in previously enjoyable activities, feelings of worthlessness and guilt, along with problems sleeping that could be either too much sleep or an inability to sleep. Sometimes a depressed person may experience weight gain or weight loss as well. A very serious symptom is recurrent thoughts of death. Thoughts of death, or for that matter suicide, is a symptom of great concern and highlights the seriousness of depression in general. The bottom line is that when major depression is present there is significant impairment or distress.

A second set of things to consider in determining if someone is experiencing major depression are the absence of a medical condition, substance use, and having had a recent significant loss, such as the loss of a job or the death of a loved one. This would include seasonal loss of employment. It is also important to note the absence as well of ever having a period of unusually high energy referred to as a manic episode. Some health conditions can mimic depression, so it is important to see your primary care provider to get a clear diagnosis.

The final diagnostic feature for a seasonal pattern to depression, therapists do not actually use the term “Seasonal Affective Disorder”, is that the depression has occurred over a period of two years with the symptoms subsiding or going away when the seasons change. Most often the season pattern is over the winter months, with symptoms of depression going away when spring and summer arrive. However, sometimes it can also appear in summer for some individuals and the depression is reduced with the beginning of autumn. To fully observe if there is a seasonal pattern to a person’s depression may require looking at a person’s whole life and not just the past year or two.

Once it is certain that the diagnosis is major depression with a seasonal pattern, there are steps that can be taken to help reduce or manage the depression. Going to see the doctor is an important first step. Medications can help reduce the effects of depression for many people. Increasing exposure to light can also help. Light bulbs or a “light box” that mimics outdoor light used for a period of time daily throughout the winter months may cause changes in the brain that can assist in elevating the depressed mood. Of course, just getting outside when the weather permits and being physically active can also help. Seeking out a therapist who can assist in managing depression is also advised. Although it may be difficult, it is important to seek out activities that are positive and enjoyable. Work to build a positive lifestyle, including spending time with people you enjoy, and getting routine exercise are also basics to managing depression in general. Finally, once it is clear there is a reoccurring seasonal pattern to the depression then plans can be made for how to cope with future bouts of depression by noting what does help and having a way to implement the plans when needed in future years.

When ever someone is depressed, the risk of suicide may increase. Help can be reached by going to any hospital emergency department or by calling the 988 Suicide and Crisis Lifeline.

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