

## Managing Seasonal Affective Disorder (SAD) During The Winter

It is the time of year where members may be feeling “winter blues.” Seasonal Affective Disorder (SAD) symptoms start late fall or early winter when the days get shorter. It is a winter pattern that diminishes during the spring and summer months.

SAD is a type of depression characterized by a recurrent seasonal pattern. Symptoms last around 4-5 months of the year. Not every person with SAD experiences all symptoms associated with this type of depression.

Symptoms of this type of depression can include:

- Persistent sad, anxious, or detached mood most of the day, every day, for at least 2 weeks
- Feelings of hopelessness or pessimism
- Feelings of irritability, frustration, or restlessness
- Feelings of guilt, worthlessness, or helplessness
- Loss of interest or pleasure in hobbies and activities
- Decreased energy, fatigue, or feeling slowed down.
- Difficulty concentrating, remembering, or making decisions.
- Changes in sleep or appetite or unplanned weight changes
- Aches or pains, headaches, gastrointestinal digestive issues that do not have a physical cause and linger with treatment.
- Thoughts of death or suicide or suicide attempts

For winter-pattern SAD, additional symptoms can include:

- Oversleeping (hypersomnia)
- Excessive consumption, driven by craving for carbohydrates, resulting in weight gain.
- Social withdrawal (feeling like “hibernating”)

Seasonal affective disorder is different from holiday blues, which is feelings of anxiety or sadness brought on by stresses at this time of year.

## Seasonal Affective Disorder Diagnosed

A diagnosis of SAD meets the following criteria:

- Symptoms of depression or the more specific symptoms of winter-pattern seasonal affective disorder (SAD) above.
- Individuals with SAD may experience recurrent depressive episodes that consistently align with specific seasons (like winter or summer) over at least two years, although not everyone with SAD will exhibit symptoms every year.
- There will be a noticeable increase in depressive episodes which occur during a particular season compared to other times of the year.

SAD is a type of depression that is more common in women than men, and in people living farther north. For example, people in Alaska or New England are more likely to develop SAD than people in Texas or Florida.

SAD is more common in people with depression or bipolar disorder, especially bipolar II disorder, which involves repeated depressive episodes and hypomanic episodes (less severe than the typical manic episodes of bipolar I disorder). Additionally, people with SAD tend to have other mental disorders, such as attention-deficit/hyperactivity disorder, eating disorder, anxiety disorder, or panic disorder.

Research shows that individuals experiencing winter seasonal affective disorder (SAD) exhibit decreased levels of serotonin, a neurotransmitter crucial for mood regulation, and evidence suggests sunlight plays a key role in maintaining healthy serotonin levels, potentially contributing to SAD symptoms during the winter months. Therefore, shorter daylight hours may prevent the molecules from properly functioning. This may contribute to decreased serotonin levels in the winter.

Other studies suggest that both forms of SAD-winter and summer, relate to altered levels of melatonin. This hormone is important for maintaining the normal sleep-wake cycle. In late fall and winter, shorter daylight hours leave many people with little to no sun exposure, signaling the brain to create too much of the sleep-regulating hormone melatonin.

Fluctuations in serotonin and melatonin levels can significantly disrupt daily routines, leading to noticeable changes in sleep patterns, mood, and overall behavior. These chemicals help maintain the body's daily rhythm tied to the seasonal night-day cycle. In people with SAD, changes in the levels of serotonin and melatonin disrupt normal daily rhythms.

### Treatments Used in SAD Diagnosis



These treatments can be used alone or in combination:

- Light therapy-this has been the mainstay for treating winter pattern SAD, it exposes persons to bright light to replace diminished natural sunlight in darker months.
- Psychotherapy-talk therapy teaches new ways of thinking, behaviors and changing habits that contribute to depression. Cognitive behavioral therapy (CBT) is aimed challenging and changing thoughts and behaviors to improve depressive and anxious feelings.
- Antidepressant medication-these medications can be used in combination with talk therapy and reminder antidepressants usually take 4-8 weeks to be effective.
- Vitamin D-studies have mixed results but may improve symptoms of winter pattern SAD.

### References:

1. <https://www.nimh.nih.gov/health/publications/seasonal-affective-disorder-sad-more-than-the-winter-blues>
2. <https://www.nimh.nih.gov/health/publications/seasonal-affective-disorder-listing>

### REFERRED DRUG LIST UPDATES CAN BE FOUND HERE:

	
ACC-RBHA, DD, ALTCS and DCS CHP	Behavioral Health (Non-Title 19/21)

**\*\* Drugs that are not on the formulary will require a PA (prior authorization) request to be submitted\*\***

**Reminder** for quicker determinations of a Prior Authorization use the ePA link for Our Providers: Please click [here to initiate an electronic prior authorization \(ePA\)](#) request.

*This newsletter is brought to you by the Mercy Care Pharmacy Team. For questions, please email Fanny A Musto ([MustoF@mercycares.org](mailto:MustoF@mercycares.org)), Denise Volkov ([VolkovD@mercycares.org](mailto:VolkovD@mercycares.org)) or Trennette Gilbert ([gilbert@mercycares.org](mailto:gilbert@mercycares.org))*