Have you ever noticed how different you feel when the sun is shining on your face? How about when it’s rainy and dreary here in BC? How do you feel then? Everyone’s mood can be affected by the weather. It dictates what we wear, when we travel and what activities we choose to do. But when the seasons change, bringing long term changes in the weather, temperature and length of day, some people are affected in other ways. The seasonal changes can affect their entire sense of well-being. If you find that you feel like a completely different person depending on the season, you may have a mental illness called seasonal affective disorder.

What is it?
Seasonal affective disorder, or SAD, is a kind of depression that appears at certain times of the year. It usually begins in the fall when the days get shorter and lasts through the winter. SAD doesn’t only happen in the colder months though. A less common form of seasonal affective disorder affects people in the summer months and usually starts in the spring. It isn’t really clear what causes SAD, but it’s thought that winter SAD may be caused by lack of sunlight. But this may not be the whole answer, as it’s also thought to run in families: 13–17% of people who develop SAD have an immediate family member with the disorder.
Could I have SAD?

- I feel like sleeping all the time, or I’m having trouble getting a good night’s sleep
- I’m tired all the time, it makes it hard for me to carry out daily tasks
- My appetite has changed, particularly more cravings for sugary and starchy foods
- I’m gaining weight
- I feel sad, guilty and down on myself
- I feel hopeless
- I’m irritable
- I’m avoiding people or activities I used to enjoy
- I feel tense and stressed
- I’ve lost interest in sex and other physical contact

If some of these feelings seem to happen each year, have a real impact on your life, and improve during certain seasons, talk to your doctor.

It is very important not to diagnose yourself without speaking to your doctor because there may be other causes for these symptoms. And even if it does turn out to be depression, it may not be the SAD form of depression.

Who does it affect?

About 2 to 3% of Canadians will experience SAD in their lifetime. Another 15% will experience a milder form of SAD that leaves them only slightly depressed, but still able to live their life without major disruptions. People with seasonal affective disorder make up about 10% of all depression cases. There are some groups of people who are at higher risk of seasonal affective disorder.

- Adults — are at higher risk of SAD than children and teenagers. After the age of 50, the risk of SAD starts to decline. Researchers aren’t yet sure why.
- Women — may be more likely to experience SAD. Some research found that women may be up to nine times more likely to be diagnosed than men.
- People in more northern countries or cities — are more likely to experience SAD than those who live close to the equator. The amount of daylight you receive changes as you move north, and that change is thought to be part of SAD.

What can I do about it?

If you think you might have seasonal affective disorder, talk to your doctor. Your doctor can help rule out any other causes for your symptoms, like thyroid problems or other types of depression. Some common treatments for SAD include:

Light therapy — has been proven effective for people with seasonal affective disorder. It involves sitting near a special kind of light for about half an hour a day. The intense artificial light causes a chemical change in the brain that improves mood and helps relieve SAD symptoms. Light therapy should not be done without first consulting your doctor because there are side-effects to this treatment. Sixty to 80 per cent of people with SAD find substantial relief from light therapy.

Medication — can be helpful for treating all kinds of depression, including SAD. Different kinds of medication work in different ways. Talk to your doctor to find out if medication is right for you and how you should use it.

Counselling — such as an approach known as cognitive-behavioural therapy (CBT), is effective for depression. A health professional who uses this approach can teach you skills to help change your view of the world around you. They do this by coaching you to break the negative patterns of depression including the thoughts and actions that can keep the depression going. CBT may be used alongside other treatments like light therapy or medication.
Self-help—can help you feel better. Regular exercise, a healthy diet, good sleep habits, staying connected to others, balanced thinking techniques, and managing stress have all been shown to reduce the symptoms of depression. These are helpful if you have only mild changes in your mood that follow a seasonal pattern. Doing these things can also help alongside treatment for more moderate or severe symptoms.

Although there are many alternative therapies for depression, there is less evidence available that they actually work. Some people find that certain herbal remedies help with their mild depression symptoms like those experienced with SAD. Remember that even herbal remedies can have side-effects and may interfere with other medications. Dosages can also vary depending on the brand you use. Talk about the risks and benefits of herbal or other alternative treatments with your health care provider and make sure they know all the different treatments you are trying.

tips to ease your winter sad symptoms

- Spend more time outdoors during the day
- Try to arrange the spaces you spend time in to maximize sunlight exposure
- Keep curtains open during the day
- Trim tree branches or hedges that may be blocking some of the light from getting into your home
- Move furniture so that you sit near a window or, if you exercise indoors, set up your exercise equipment by a window
- Install skylights and add lamps
- Build physical activity into your lifestyle preferably before SAD symptoms take hold. Physical activity relieves stress, builds energy and increases both your physical and mental well-being and resilience
- Make a habit of taking a daily noon-hour walk, particularly if you commute to school or work in the dark hours of the day
- When all else fails, try a winter vacation in sunny climates—if the pocketbook and work schedule allow. Keep in mind that the symptoms will recur after you return home
- Try to resist the carbohydrate and sleep cravings that come with SAD
If you have SAD, the best first step is always to talk to your doctor. They can help you decide which, if any of the above treatments would be best for you. If you think you have seasonal depression, it’s also important to see a doctor first to rule out other explanations for your symptoms. In addition to talking to your family doctor, check out the resources below for more seasonal affective disorder information:

**Resources, available in English only, are:**

**Mood Disorders Association of BC**  
Visit www.mdabc.net or call 604-873-0103 (in the Lower Mainland) or 1-855-282-7979 (in the rest of BC) for resources and information on mood disorders. You’ll also find more information on support groups around the province.

**Canadian Mental Health Association, BC Division**  
Visit www.cmha.bc.ca or call 1-800-555-8222 (toll-free in BC) or 604-688-3234 (in Greater Vancouver) for information and community resources on mental health or any mental illness.

**Your Local Crisis Line**  
Crisis lines aren’t only for people in crisis. You can call for information on local services or if you just need someone to talk to. If you are in distress, call 310-6789 (do not add 604, 778 or 250 before the number) 24 hours a day to connect to a BC crisis line, without a wait or busy signal. The crisis lines linked in through 310-6789 have received advanced training in mental health issues and services by members of the BC Partners for Mental Health and Addictions Information.

**HealthLink BC**  
Call 811 or visit www.healthlinkbc.ca to access free, non-emergency health information for anyone in your family, including mental health information. Through 811, you can also speak to a registered nurse about symptoms you’re worried about, or talk with a pharmacist about medication questions.

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This fact sheet was written by the Canadian Mental Health Association’s BC Division. The references for this fact sheet come from reputable government or academic sources and research studies. Please contact us if you would like the footnotes for this fact sheet. Fact sheets have been vetted by clinicians where appropriate.