

What are the “Winter Blues”?

While it is normal during winter for many of us to eat more “rich” food, to keep indoors, & to have more difficulty getting out of bed, “Seasonal Affective Disorder” or SAD is a type of recurring depression that appears during autumn or winter, but tends to go once spring and summer arrive.

Symptoms of SAD may include: less energy; feeling withdrawn and non-communicative; irritability; increased appetite; poor concentration or memory; poor productivity; less creativity; feeling overwhelmed by simple tasks; less sex drive; suicidal ideation; weight gain; need for more sleep; & lack of motivation.

“Winter Blues” tends to refer to a milder, less severe, less debilitating form of SAD.

Around 0.3% of Australian adults experience SAD-like symptoms (Murray, G. APS Media Release, 2005, www.psychology.org.au).

It is more common in the northern hemisphere. Estimates are that 6% of US population has a severe form of SAD, and 14% of US population has a milder form (Rosenthal, 1998).

More common in women – especially the 20 to 40 age range (Rosenthal, 1998).

Why do people experience SAD, or the milder “winter blues”?

Possible explanations put forward include:

Reduced amount of sunlight in winter influences mood and behaviour – ie the brain’s chemistry is affected by light (Rosenthal, 1998).

- o Suggestions that the hormone melatonin is released by the pineal gland when it’s dark (ie more is released in winter), and that melatonin might affect mood.
- o Also suggestions that SAD is due to a lack of serotonin – that serotonin, a neurotransmitter, reaches its lowest level in the hypothalamus during winter – that light from the retina to the hypothalamus is needed to enhance serotonin transmission. (NB: Anti-depressant medications such as SSRIs work by increasing serotonin neurotransmission).
- o Suggestions that light is needed to keep circadian rhythms in check (eg that morning light influences release of dopamine and norepinephrine (that are involved with movement, arousal and alertness) and body’s ability to deal with stress (via hypothalamus, pituitary, and adrenal glands)) Need sunlight for vitamin D via the skin and for production of beta-endorphins.

Less social activity or social contact during winter

- o Eg Women with young children restricted to the home - more isolated (SAD is more prevalent among women)
- o Less opportunity to bounce your ideas/ thoughts off another person. Get locked into limited ways of thinking about situations?
- o World becomes more narrow or closed. Less distractions?

Less physical activity or exercise due to being indoors

- o Less physical activities to engage in
- o Not out in the garden. Not walking the dog as much
- o Less exercise can mean reduced energy levels, and decreased ability to respond to stress

BEAT THE WINTER BLUES OR “SAD”

The cold weather or storms

- o Keep us in bed longer. Sleep promotes more sleep
- o Too cold or bleak to be outdoors
- o Amount of positive or negative ions in the atmosphere? Some suggestion that negatively charged air particles improve mood (Rosenthal, 1998)

Changes in diet

- o More carbohydrates (sweets, pasta, bread) that enable tryptophan to move through the bloodstream. Tryptophan is needed to make serotonin. Rosenthal (1998) reports that patients with SAD feel more energized after eating carbohydrates, whereas controls feel lethargic. Resultant weight gain from eating lots of “carbs”. Might impact on self-image, self-esteem, overall physical health.

The body’s adaptation to the seasons (Rosenthal, 1998)

- o Perhaps we are meant to hibernate like a bear, but the pressures of modern life demand otherwise.
- o Adaptation to the seasons breaks down for some people? Genetically predisposed to SAD or the lesser “winter blues”?
- o Body is trying to conserve its stores of energy?

How can I overcome the “winter blues” or low mood?

Give myself regular exercise – preferably aerobic exercise (eg brisk walks), but also some anaerobic exercise (eg weight lifting). Benefits of walking for me include: it’s low impact; cheap; I can build up my fitness; I can talk at the same time; I can be outdoors; I don’t need any equipment; I can increase my heart rate and overall cardiovascular fitness; & I can vary where and when I walk.

Get out in the sunshine for at least one hour per day. Morning is best as the light is a signal for me to be awake and alert (“Sunshine is nature’s Prozac”). (NB: in summer early morning or late evening sunshine is better so as to avoid getting burnt)

- o Light therapy has been used in the northern hemisphere (where the days are much shorter in winter) to treat SAD. SAD patients sit approx. half a metre from a “light box” that emits 10000 lux of full spectrum (UV filtered) diffused light, anything from 20 to maybe 90 minutes a day – usually in the morning. We are fortunate to have more winter daylight in Australia, but we often don’t give ourselves time to enjoy it.
- o Go to a solarium (make informed decisions about what risks solariums may or may not pose)
- o Sit in a sunny room and read a book in the warmth
- o Allow more natural light into my home

Eat more fresh fruit and vegetables rather than too many carbohydrates in the form of cakes, bread, pasta, pizza, etc. (“One second on the lips, three months on the hips”).

Keep up social contact during the winter months – meet someone for lunch, stop for morning tea, see a movie with friends.

Limit how much I sleep. If I am sleeping long hours, I can try reducing the amount of sleep to maybe no more than 9 or 10 hours per day.

Distract myself with pleasurable activities – some active, some less active. Do things I enjoy like listening to relaxing music, reading, sewing, craft activities, gardening, kicking a ball, karaoke, dancing, etc.

Contact UNE Student Counselling and Psychological Services (CAPS) on (02) 6773 2897 for an appointment. Email: studentcounselling@une.edu.au or via [AskUNE](#)

References

Murray, G. (2005). How to beat the blues this winter. Media Release, APS, www.psychology.org.au.

Rosenthal, Norman. (1998). Winter Blues. Seasonal Affective Disorder. What it is and how to overcome it. New York: Guilford Press.

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