



SEASONAL AFFECTIVE DISORDER (SAD)

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See also:

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Books: [*Winter Blues: Everything You Need to Know to Beat Seasonal Affective Disorder* by Norman E. Rosenthal, M.D.](#)

Articles: http://en.wikipedia.org/wiki/Seasonal_affective_disorder

Audio/Video:

Websites: http://en.wikipedia.org/wiki/Seasonal_affective_disorder

Publications:

Organizations:

People: Norman E. Rosenthal, M.D.
Dr. Joseph Mercola

Integral Nutrition: Light Therapy
Dawn Therapy
Melatonin supplementation



Vitamin D
Fish Oil with EPA and DHA
Hemp Oil
Vitamin B1, B6 and Vitamin B-12 (Methylcobalamin or Hydroxocobalamin)

Conventional Approach: Pharmaceutical interventions

Terms:

HOW TO FEND OFF DEPRESSION IN WINTER

Source: www.mercola.com

Dr Mercola's Comments

Up to 14 million people in the U.S. alone suffer from Seasonal Affective Disorder (SAD), while about 25 million Americans suffer from the "winter blues," a condition not as serious as SAD but still requiring attention.

People with SAD tend to oversleep and overeat during the fall and winter. They easily tire, and find it difficult to maintain a regular schedule. Some become depressed and irritable, and lose interest in social interactions. Other symptoms include:

- A craving for sugary and/or starchy foods, usually resulting in weight gain
- Loss of self-esteem
- Difficulty concentrating and processing information
- Tension and inability to tolerate stress
- Decreased interest in sex and physical contact
- Full remission from depression occurs in the spring and summer months

The Major Cause of Winter Depression

The fact that SAD and the winter blues occur when the days begin to darken and sunlight is scarce is not a coincidence. Sunlight is crucial to human health, and when you don't get enough exposure to it your mood and physical health will suffer. More specifically, your serotonin levels (the hormone associated with elevating your mood) rise when you're exposed to bright light. You may have experienced this "high" feeling after spending some time on a sunny beach, for example.

Similarly, the sleep hormone melatonin also rises and falls (inversely) with light and darkness. When it's dark, your melatonin levels increase, which is why you may feel naturally tired when it begins to get dark outside (even when, in the heart of winter, this may be at only 4:00 p.m.).

It is because sunlight affects your melatonin-serotonin system that it works so well to alleviate the symptoms of the winter blues and elevates mood. In fact, studies have even found that light therapy

or phototherapy, which is the practice of using full-spectrum light therapeutically, works to relieve the symptoms of the winter blues and SAD better than antidepressant drugs.

Dawn simulation, a technique that replicates an earlier dawn through exposure to artificial light, is also proven to alleviate some SAD symptoms. You can easily implement this into your routine by using a dawn-simulating alarm clock, which have a special built-in light that gradually increases in intensity to simulate a natural sunrise.

Interestingly, vitamin D, which requires sun exposure to be produced in your body, is also linked to higher levels of serotonin, and it has been suggested that getting plenty of sunlight over the summer helps your body to maintain higher vitamin D levels in the winter, and therefore higher levels of serotonin as well.

Many Americans, however, do not get enough sunlight over the summer months, let alone during the winter, which is why full-spectrum light boxes used in the winter can be so helpful.

You can actually get many of the same benefits by replacing the regular light bulbs in your home and office with full-spectrum lighting. Natural sunlight is full spectrum, and when looking for the best full-spectrum bulbs for your home, look for the full spectrum of color (imagine the colors of the rainbow), as well as infrared and the three ultraviolet wavelengths. No other type of lighting source -- not "regular" or even "natural" light bulbs or fluorescent light bulbs -- contains these requirements.

I have personally used full-spectrum lighting for years now, and can honestly say that they have provided an enormous boost in my ability to tolerate the often gloomy days where I live (near Chicago).

In fact, I have my entire home lit with these full-spectrum light bulbs.

I don't consider them a replacement for real sunlight (nothing can do that), but they are the next best thing when the sun is not out, or when it's too cold to spend time outdoors.

What Else Can Boost Your Mood During the Winter?

There are certain natural mood boosters that are worth trying no matter what the season. These include:

- 1. Exercise:** Regular physical activity works better than antidepressant drugs to improve your mood.
- 2. Get your omega-3:** Animal-based omega-3 fats like krill oil are linked to better emotional health. In fact, one study showed that people with lower blood levels of omega-3s were more likely to have symptoms of depression and a more negative outlook while those with higher blood levels demonstrated the opposite emotional states.
- 3. Go to sleep early.** You were designed to go to sleep when the sun sets and wake up when the sun rises. If you stray too far from this biological pattern you will disrupt delicate hormonal cycles in your body. In the winter, this may mean that you'll want to go to sleep a couple of hours earlier than in the

summer.

4. Avoid grains and sugars: These will increase your risk of insulin resistance, which is linked to depression (and diabetes). If you struggle with sugar cravings, using the Emotional Freedom Technique (EFT) is a simple way to overcome them.

If you know that winter depression tends to be an issue for you, keep in mind that you can use these tips year-round, long before your symptoms set in. By doing this there's a good chance you'll be able to keep a bright mood no matter what the season.

EYE COLOR AND SAD

Source:<http://www.ei-resource.org/illness-information/related-conditions/seasonal-affective-disorder-%28s.a.d%29/>

Another piece of evidence suggesting a genetic predisposition to SAD comes from a study conducted at Columbia University, NY, in 2002. This study of 165 SAD patients found differences in symptoms experienced by sufferers of different races, and also the intriguing result **that blue eyed people suffered less severe symptoms than those with darker eyes**. The researchers stated that "lightly pigmented eyes, in particular, may serve to enhance photic input during winter and allay depressive symptoms in vulnerable populations".¹ Essentially, lighter eye colour allows more light to enter the eye and thus reduce susceptibility to SAD during **the dark winter months**.

CFS / FIBROMYALGIA / MCS AND SAD

Source:<http://www.ei-resource.org/illness-information/related-conditions/seasonal-affective-disorder-%28s.a.d%29/>

SAD appears to be common amongst [chronic fatigue syndrome \(CFS\)](#) and [fibromyalgia](#) sufferers. Dr. Jacob Teitelbaum, a CFS and fibromyalgia specialist, and author of best selling book *From Fatigued to Fantastic*, addresses the issue of SAD with his patients. **Dr. Teitelbaum recommends using a 10,000 lux lightbox for 30-45 minutes every morning if his patients symptoms get worse during winter.** He is the only physician to have had the effectiveness of his CFS and fibromyalgia treatment protocol proven by clinical studies (of the kind used to test effectiveness of new pharmaceutical drugs). Dr. Teitelbaum is not the only doctor treating CFS and [fibromyalgia](#) patients for SAD, it is common amongst environmentally aware physicians.

The instincts of Dr. Teitelbaum and others is backed up by research that we looked at earlier. If you recall, a study published in 1998 involving 110 CFS patients found that a large proportion had depressive symptoms, and that these, and the typical CFS symptoms not associated with depression,

¹ Depress Anxiety. 2002;15(1):34-41. Depressive symptomatology differentiates subgroups of patients with seasonal affective disorder. Goel N, Terman M, Terman JS. Columbia University, New York, New York, USA. ngoel@wesleyan.edu

worsened during the winter months.² Like Dr. Teitelbaum the researchers recommend bright light therapy to improve symptoms of both CFS and SAD during the winter months.

The results from a research study published in 2000 also found a link between [multiple chemical sensitivity \(MCS\)](#) and SAD. Two hundred and twenty-five subjects, including normal volunteers and patients with previously documented seasonal affective disorder (SAD), chronic fatigue syndrome (CFS), Cushing's syndrome, Addison's disease and obsessive-compulsive disorder (OCD), completed questionnaires describing their reactions to exposures to various chemicals. Patients with CFS, Addison's disease and SAD self-reported more sensitivity to chemical exposures than normal controls.³ The researchers suggest that these illnesses are linked to chemical sensitivity through the HPA-axis, the body's stress control system, as it is known to be dysfunctional in all of these conditions.

Anecdotal reports also suggest a link between SAD and MCS, and the author has also experienced this. It is often the case that people suffering from MCS also have problems with SAD. The interesting thing is that not only do SAD symptoms abate during the summer but the severity of their MCS symptoms also decreases. They may be able to tolerate larger amounts of chemicals, or reactions on exposure are less severe or prolonged, or both. This all suggests that serotonin is involved with both conditions. We've discussed serotonin's role in SAD, but it could also be involved in chemical sensitivity. A leading theory for MCS involves over-sensitivity of the limbic system in the brain. The limbic system is intimately involved with mood and emotions, and has high levels of serotonin. We could therefore hypothesize that disruption of serotonin function could result in both SAD and multiple chemical sensitivity.

Gut dysbiosis may also be connected to SAD by way of serotonin function. Serotonin is produced from the amino acid tryptophan which we get from protein foods. Unfortunately, it is known that if a [gut dysbiosis](#) condition is present, the unfriendly microorganisms such as bacteria and yeast can get hold of the tryptophan themselves before we have time to absorb it through our intestines.⁴ Without sufficient supply of tryptophan, susceptible individuals are likely to become deficient in serotonin, with the result being various forms of depression, including SAD.⁵

There has been little research into a connection between autism and SAD but a report published in 1998 described 2 patients with learning disabilities who showed symptoms of SAD and responded to bright light therapy. The authors suggested more research was needed in this area (15).⁶

² Am J Med. 1998 Sep 28;105(3A):115S-124S. Chronic fatigue [syndrome](#) and seasonal affective disorder: comorbidity, diagnostic overlap, and implications for treatment. Terman M, Levine SM, Terman JS, Doherty S. Department of Psychiatry, College of Physicians and [Surgeons](#), Columbia University, New York State Psychiatric Institute, New York 10032, USA.

³ Psychiatry Res. 2000 Jul 24;95(1):67-74. Self-reported sensitivity to [chemical](#) exposures in five clinical populations and healthy controls. Nawab SS, Miller CS, Dale JK, Greenberg BD, Friedman TC, Chrousos GP, Straus SE, Rosenthal NE. Section on Biological Rhythms, National Institute of Mental Health, Bethesda, MD 20892-1390, USA. ssnawab@hotmail.com

⁴ The New England Journal of [Medicine](#), Vol. 270, No 19, May 7, 1964, pp. 994-1001. Normal bacterial populations of the intestine and their relation to intestinal function. Robert M. Donaldson, Jr.

⁵ Biol Psychiatry. 2005 Nov 15;58(10):825-30. Epub 2005 Jul 18. Effects of tryptophan depletion on the serotonin transporter in healthy humans. Praschak-Rieder N, Wilson AA, Hussey D, Carella A, Wei C, Ginovart N, Schwarz MJ, Zach J, Houle S, Meyer JH, Vivian M. Rakoff PET Imaging Centre, Centre for Addiction and Mental Health, and Department of Psychiatry, University of Toronto, Toronto, Canada.

⁶ J Affect Disord. 1998 Mar;48(2-3):145-8. Seasonal Affective Disorder and response to light in two patients with learning disability. Cooke LB, Thompson C. New Friends Hall, Stapleton, Bristol, UK.

LIGHT THERAPY

Source:http://en.wikipedia.org/wiki/Seasonal_affective_disorder

Photoperiod-related alterations of the duration of melatonin secretion may affect the seasonal mood cycles of SAD. This suggests that light therapy may be an effective treatment for SAD.^[19] Light therapy uses a [lightbox](#) which emits far more [lumens](#) than a customary incandescent lamp. Bright white "[full spectrum](#)" light at 10,000 lux, blue light at a wavelength of 480 nm at 2,500 lux or green light at a wavelength of 500 nm at 350 lux are used, with the first-mentioned historically preferred.^{[20][21]}

Bright light therapy is effective^[14] with the patient sitting a prescribed distance, commonly 30–60 cm, in front of the box with her/his eyes open but not staring at the light source^[10] for 30–60 minutes. A 1995 study showed that green light therapy at doses of 350 lux produces melatonin suppression and phase shifts equivalent to 10,000 lux bright light therapy in winter depressives.^[20] A study published in May 2010 suggests that the blue light often used for SAD treatment should perhaps be replaced by green or white illumination.^[22] Discovering the best schedule is essential. One study has shown that up to 69% of patients find lightbox treatment inconvenient and as many as 19% stop use because of this.^[10]

[Dawn simulation](#) has also proven to be effective; in some studies, there is an 83% better response when compared to other bright light therapy.^[10]

When compared in a study to [negative air ionization](#), bright light was shown to be 57% effective vs. dawn stimulation 50%.^[6]

Patients using light therapy can experience improvement during the first week, but increased results are evident when continued throughout several weeks.^[10] Most studies have found it effective without use year round but rather as a seasonal treatment lasting for several weeks until frequent light exposure is naturally obtained.^[9]

SEASONAL AFFECTIVE DISORDER SUFFERERS NEED NATURAL SUNLIGHT, NOT ANTIDEPRESSANTS OR ARTIFICIAL LIGHT

Source: by Mike Adams, the Health Ranger, Editor of NaturalNews.com

http://www.naturalnews.com/001541_Seasonal_Affective_Disorder_natural_sunlight.html

There is a lot of information about seasonal affective disorder (S.A.D.) available on the internet and in the medical literature today, but most of the information about this disorder fails to inform readers about the real causes of it, and the simple, effective treatments for reversing it.

First, let's talk about the causes of seasonal affective disorder. The medical definition of SAD is: symptoms of depression coinciding with seasons of shorter days and less sunlight. This is blamed on the so-called biological internal clocks, or circadian rhythm, and it is said that SAD sufferers are more

likely to be women and younger persons. Other symptoms include a craving for sugary foods, such as sweets, candies, and refined carbohydrates. Now, all of this is true -- these are the accurate symptoms of seasonal affective disorder -- but what is the real cause of this disorder?

Much of the medical literature talks about the cause as being some sort of hormone imbalance. This is a distraction from the true cause of SAD, which is quite simply lack of exposure to natural sunlight. Or, put another way: sunlight on your skin. If you lack sufficient sunlight on your skin, you will suffer terrible health effects, including depression, osteoporosis, prostate cancer, breast cancer, and even schizophrenia. That's because the human body was designed to be exposed to sunlight on a frequent basis. We evolved, after all, under the natural sun -- not under fluorescent lighting, nor in an environment where we were eating prescription drugs off of the bushes and trees. Our environment was one with plentiful sunlight, and that is the environment in which we belong.

So despite what the medical literature might say, the one and only cause of seasonal affective disorder is lack of natural sunlight on your skin. This is because sunlight provides an essential element to the human body: something that you need on a frequent basis in order to achieve optimum health, just like vitamins and minerals and other phytonutrients that support your health. When you don't get natural sunlight on your skin, you suffer from a nutritional deficiency, just as if you weren't consuming vitamins or minerals.

If you go without natural sunlight for long enough, these symptoms will become apparent enough to be diagnosed by a physician, and that diagnosis will typically be named "seasonal affective disorder". The proper name for this, however, should be "sunlight deficiency" -- but of course that's far too simple and straightforward for modern medicine, which tends to complicate all diseases, and thereby put their treatments out of reach of common, everyday citizens. If it were called sunlight deficiency, you see, that would actually give people a better idea of what to do about it. And with that in mind, let's move on to the treatments of seasonal affective disorder.

Once again, the answers are remarkably simple. In order to reverse seasonal affective disorder, or sunlight deficiency, the only treatment necessary is of course to get more natural sunlight on your skin. I don't understand why this simple solution escapes the knowledge of doctors and medical researchers (or those who are steeped in the practices of western medicine). Sunlight is the answer, and all people need to do is step outside and expose their skin to natural sunlight -- without using sunscreen -- for a few minutes each day, and their body and nature will take care of the rest.

I think one of the reasons why this simple but wholly effective treatment is not promoted by the medical community is because it is outside the control of doctors, prescription drug companies and the FDA. The FDA can't regulate sunlight, and therefore they can't approve it as a medical device. I'm sure this comes as a great let-down to the agency, which would of course love to not only regulate natural sunlight, but control who can sell it and who can get it. If that were the case, you can bet that the health benefits of natural sunlight would be front-page news. If it could be encapsulated into a pill and sold to patients for \$1000 a month, you would hear all sorts of amazing news about the miracles of natural sunlight. Doctors would be taking pills and raving about the health benefits, and patients would be on lifetime prescriptions of this vibrational nutrition drug.

But of course natural sunlight is not available in capsule form -- it's available free of charge, and so western medicine has no financial interest whatsoever in educating people about its benefits. In fact, people who get natural sunlight and reverse their own state of clinical depression or seasonal affective

disorder actually take profits away from Big Pharma, so in reality there's a strong incentive for pharmaceutical companies to make sure people never learn about how to heal themselves with natural sunlight: it causes a drop in their profits! (In a similar way, Big Pharma also works hard to prevent prevention by suppressing information about nutrition, herbs and nutritional supplements that actually prevent chronic disease, but that's another article...)

A person who makes a point to get natural sunlight on their skin on a frequent basis -- daily, if possible -- will experience a wide range of healthful benefits, including improvement in mood and an ending of any state of depression they may have experienced, increased bone density and reversal of symptoms of osteoporosis, help in reversing prostate cancer and breast cancer, and enhanced mood and brain function. Before long, the patient will of course no longer qualify as having seasonal affective disorder, and if they were to visit a physician, that doctor would tell them they no longer have the disorder. So, reversing seasonal affective disorder is not only simple and straightforward, it is also free of charge and something that you are unlikely to be advised to do from anyone in the western medical community (i.e. the vast majority of doctors).

Depending on where you live, of course, it may be difficult for you to get natural sunlight on a regular basis, and so the next best thing is to get high-intensity, full-spectrum lighting, which is available from various light boxes and seasonal affective disorder treatment devices. These are essentially very bright lights that radiate some of the same frequencies as the natural sun directly onto your skin (and into your eyes) where they have a similar effect. However, this is only the second best thing. Nothing replaces the natural sun in terms of intensity and frequency. So light boxes are a good choice if you can't get the sun, but if you live in a climate where you can get regular sunlight, then natural sunlight is of course your best choice.

Moving on, the idea that many people with seasonal affective disorder are treated with anti-depressant drugs strikes me as extremely bad medicine, if not an outright con on the part of doctors and pharmaceutical companies. When people lack nothing more than natural sunlight, but are doped up on anti-depressant drugs that have been linked with increased rates of suicides and that dramatically alter brain chemistry in ways that we still fully don't understand, that is, I think, the epitome of modern medicine. It endangers the health of patients in exchange for generating profits for pharmacies and pharmaceutical companies while ignoring the simple, free and most effective methods for treating the disorder in the first place. This is a common theme in western medicine, of course: ignoring the free treatments that really work (like drinking water, getting sunlight, taking low-cost nutritional supplements) while treating symptoms with high-profit prescription drugs that merely mask symptoms and do nothing to address the underlying cause of the disorder or disease.

Of course, these pharmaceutical companies very much want everyone with seasonal affective disorder to be taking these antidepressant drugs on a regular basis. And many physicians fail to properly diagnose clinical depression as nothing more than a sunlight deficiency, therefore they end up prescribing these drugs and then, two years later, after the patient has been on the drugs, they still wonder why the patient isn't getting any better. The answer is because they're still not getting natural sunlight on their skin. So, once again, the answer is nature, not drugs.

The other point here concerns sunscreen. In modern society, people have been brainwashed into somehow believing that the sun is a great bringer of evil that should be avoided at all costs. People put sunscreen on their skin every time they step outside, and they cover their bodies with clothing and hats in order to avoid any speck of light from touching their pale, white skin. This is absurd.

Engaging in such practices will rapidly move any person towards all of the symptoms of seasonal affective disorder. That's why people who use a lot of sunscreen and avoid the sun typically are depressed and have very low bone density (as well as suffering from chronic diseases like prostate cancer or breast cancer).

So sunscreen actually blocks the one nutrient that most people are lacking in modern society: natural sunlight. It's nutrition that you simply must have in order to be healthy, and sunscreen gets in the way of your body receiving that nutrition. That's how crazy our modern society has become: we purposely apply cancer-causing sunscreen lotions containing toxic fragrance chemicals in order to block out the healing rays of the sun that provide essential nutrition to the human body. How's that for health insanity? And in the mean time, most doctors remain clueless about any of this. When was the last time your doctor actually prescribed "more sunlight?"

The bottom line to all of this is that seasonal affective disorder is treated in the same way that many chronic diseases should be treated: that is, relying on nature -- sunlight, plants, fresh air, clean organic food, regular physical exercise, superfoods, sea vegetables, and living foods. You don't need anti-depressant drugs, and in fact to treat seasonal affective disorder, you don't need to visit a doctor or interact with anybody from western medicine at all. This is one disorder that is best treated by steering clear of organized medicine in its entirety. Visit a naturopathic physician, and she'll tell you basically the same thing I've been telling you here: go outside and get more sunlight. This isn't rocket science, folks.

NATURAL TREATMENT FOR DEPRESSION AND SEASONAL AFFECTIVE DISORDER

Source: by Gayle Eversole, CRNP, PhD, AHG, DHo

<http://www.alternativementalhealth.com/articles/seasonal.htm>

Light is important for all living things. With autumn we experience equal hours of darkness and daylight. Light continues to shorten dramatically until winter solstice when daylight in Moscow is just over eight hours each day.

Less light brings hibernation naturally. During fall and winter the lack of light causes about 20% of people to experience Seasonal Affective Disorder (SAD). In northern latitudes incidence can be up to 10%. Closer to the equator it drops to 1-2 %.

First reports of SAD appeared in the 19th Century, but it was not until 1984 that it surfaced in psychiatry. Seasonal Affective Disorder, a type of depression reoccurring at specific times of the year, is still frequently misdiagnosed. Most commonly, the onset of depression begins in September through November, and lessens in March through May. SAD affects men, women, children, and even pets.

Medical treatment relies on anti-depressant drugs. The newer drugs, called serotonin reuptake inhibitors (SSRI), come with many side effects, and studies show they do little to help. Recent studies at Harvard Medical School clearly show that essential fatty acids from flax, fish, and some plants are more effective than SSRI drugs. Another accepted treatment is the light box. A study at the University of British Columbia showed that supplementing with tryptophan (found in nutritional yeast or 5 HTP) and vitamin D3, along with morning light therapy, achieved a 64% improvement in symptoms. Light hungry sufferers seeking relief from symptoms that affect mind, body, and their

internal body clock instinctively seek more light. Bright light therapy is a fluorescent light box that produces an intensity of 2,500 to 10,000 lux at a comfortable distance (1-2'). 85% of sufferers usually respond to this treatment within 3-5 days. Dawn stimulators are another type of light therapy that is helpful, as is changing all lighting at home and office to full spectrum bulbs and tubes. (You'll find these at Tri-State) Accompanying difficulties with sleep is related to suppression of the hormone melatonin. You can get this naturally in nutritional yeast or by mixing ¼ cup ricotta cheese with dark cherries. I do not encourage synthetic hormone supplementation.

St. John's Wort is useful in treating SAD. Hyla Cass, MD recommends St. John's Wort to promote restful sleep and enhance dreaming.

A study in 1993 shows that St. John's Wort improved the condition of those who regularly experience winter depression. The extract has been thoroughly researched as a natural anti-depressant. A total of 1,592 patients have been studied in 25 double-blind controlled studies. The studies show St. John's Wort produces improvements in anxiety, depression, and sleep disturbances, and without side effects. Use organic, whole herb extracts for the best results.

Other helpful natural remedies for SAD include color, sound, homeopathy, flower essences, and essential oils. Ayurvedic Medicine suggests that carrying a quartz crystal is helpful.

Warm colors of yellow, orange, and red stimulate mood in color baths, lighting, room decor and clothing. People with hypertension should avoid too much red. These same colors in food provide anti-oxidants that reduce the effects mood swings brought on by allergies. Other research has found that using a negative air ionizer to lessen indoor allergies helps reduce mood swings.

Gustav Holst's compositions Mars and Jupiter, from The Planets, are examples of music that helps alleviate depression.

In classical homeopathy, using cell salts of Mag Phos, Kali Phos, or Nat Mur, offers relief from depression, depending on symptoms. The flower essence of Mustard lifts the shadow of gloom from the light and joy of life.

Jasmine essential oil is anti-depressant and euphoric. It stimulates beta brain wave activity as measured by EEG. You might also enjoy using citrus oils that stimulate the autonomic nervous system, such as lemon.

I've always suggested walking and laughing. You'll get mood lifting exercise, walking just 20 minutes at noon, even on dark days. This also supplies enough natural light to stimulate the pineal gland to set your body clock, and promote vitamin D production in skin. Laughing always stimulates endorphins; those neurotransmitters that make us feel good.

VITAMIN D RECOMMENDED TO COMBAT SEASONAL AFFECTIVE DISORDER

Source: www.northjersey.com by Debra Winters <http://www.northjersey.com/news/>

For anyone suffering from Seasonal Affective Disorder (SAD), soaking up the sun and increasing your intake of Vitamin D are known assisters when daylight hours are shortened.

SAD refers to episodes of depression which occur annually during fall or winter. The disorder is known to begin in adolescence or early adulthood and usually occurs more often in women compared to men.

It should be noted that "cabin fever" or just the plain "winter blues" are not to be confused with SAD despite the current winter that has besieged the northeast with over 50 inches of snow having fallen so far. People who reside in locations with long winter nights are not necessarily more likely to have SAD, according to the National Institute of Health.

Although the cause of SAD is not known, there are some contributing factors, including ambient light, body temperature, and hormone regulation.

However, Dr. Christian Holle, associate professor in Psychology at William [Paterson](#) University, says SAD is related to the amount of sunlight and cloud cover and not necessarily colder temperatures. There is also a correlation to lower melatonin levels, but it's not the main cause.

Melatonin is a hormone secreted by the pineal gland in the brain which helps to regulate other hormones and maintains the body's circadian rhythm, an interval 24-hour "clock" that plays an integral role in falling asleep and waking up. When it's dark outside, the body produces more melatonin and when it's light, the production of melatonin drops. Exposure to bright lights in the evening or too little light in daytime can disrupt your body's normal melatonin cycles.

Seeking the company of others during this time is highly suggested according to Holle.

"People suffering from SAD should not isolate themselves but rather seek out social contacts," noted Holle.

Regular exercise is also important and sometimes difficult to do outside during winter months, so Holle offers the idea of walking around an indoor mall making about four to five trips or even joining an inexpensive gym.

Mental outlook, says Holle, is also an integral part in dealing with SAD.

"You must keep thinking that winter is almost over and that spring and summer will be here very soon," added Holle.

If symptoms persist, Holle recommends possibly speaking with a professional, especially if it interferes with your job. For those who know people suffering from SAD, it's important to monitor that individual, particularly when their mood is diminishing.

"Thoughts of suicide should especially be paid close attention to, although warning signs can be subtle," Holle added.

Registered Dietitian Karen Goldberg of the YM-YWHA of North Jersey in [Wayne](#), says loading up on Vitamin D is highly recommended and even more so for SAD sufferers.

"Most people don't get an ample amount of Vitamin D on a daily basis to begin with," Goldbery admitted.

A proper intake of Vitamin D can be found in certain types of fish, including salmon which has 794 international units, Mackerel (388 international units, but is high in mercury), and tuna fish, which has 302 international units. At least three ounces should be digested to acquire the necessary amount of Vitamin D.

"Fatty fish and fish oils are very important to your daily diet," she adds.

Goldberg also suggests a tablespoon daily of Cod Liver oil, although it's usually not the first choice of taste. A multi vitamin or Vitamin D on its own is also helpful as is dairy-based products such as milk or yogurt fortified with Vitamin D.

"Usually 400 international units are recommended, however nowadays some doctors are saying between 1,000 to 2,000 international units a day are even better," Goldberg stated.

Symptoms of SAD include afternoon slumps with decreased energy and concentration, increased appetite with weight gain, increased sleep and excessive daytime fatigue, lack of energy and loss of interest in work and other activities, slow, sluggish, lethargic movement, social withdrawal, and unhappiness and irritability.

Differences between regular depression and SAD as far as symptoms are concerned include weight loss as opposed to weight gain and problems sleeping instead of increased sleep.

BEATING SEASONAL AFFECTIVE DISORDER THE NATURAL WAY

Source: www.mercola.com

A bedside device that simulates sunrise may provide relief from the winter depression known as seasonal affective disorder or SAD.

"Negative air ionization" may also be effective.

A new study has shown that the two techniques, when activated toward the end of sleep, are as effective as bright light therapy upon waking up, an established treatment for SAD. Dawn simulation and negative air ionization are more convenient than bright light therapy, which involves sitting at a bright light box for 30 minutes each morning.

In the study, 99 adults with SAD were randomly assigned one of five treatments: dawn simulation, a brief dawn "pulse," bright light therapy, high flow rate negative air ionization, or low flow rate ionization.

Full dawn simulation, high negative air ionization, and bright light therapy were roughly equal in terms of the improvement in SAD symptoms; improvement was seen in between 48 percent and 57 percent of subjects receiving these therapies. In contrast, only 23 percent of those receiving low flow rate ionization showed improvement.

Further, 43 percent of those receiving sunrise pulse treatment showed improvement, but it also exacerbated depressive symptoms in other patients.

Dr. Mercola's Comments:

It is great to see additional research documenting safer and more natural ways to overcome Seasonal Affective Disorder (SAD), including dawn simulation and light therapy.

I believe that the ideal is not to require the use of any alarm and to have enough flexibility in your schedule where you can wake up at any time. It took me a number of years to get to this place, and I now routinely wake up around 4:30 a.m. without any alarm at all. If I am really tired or go to bed later I might sleep in till 6, but either way doesn't harm my schedule.

Prior to developing this pattern I did rely on an alarm, and there is no question in my mind that the sun alarm that causes your lights to come on very slowly (thus representing a normal sunrise) is far easier on your adrenals than music or an alarm.

Differing amounts of light trigger your body to produce hormones that control when you fall asleep and when you wake up. When your eyes detect an increased level of light, a signal is sent to your brain's pineal gland.

Your pineal then triggers the production of the hormone serotonin, which causes you to slowly awaken. This natural method of waking leaves you feeling refreshed and energized. At the other end of the circadian scale, in response to darkness, your pineal gland triggers the production of the hormone melatonin.

People with seasonal affective disorder instinctively shift their melatonin levels with the seasons, paralleling the hibernation patterns of mammals. In people with SAD, the duration of melatonin secretion becomes longer in winter and shorter in summer, just as it occurs in other mammals -- controlling the changes that occur in people when they get depressed in the winter.

Synthetic and natural supplements of melatonin are readily available in this country and may be purchased as a dietary supplement without prescription. However, there is much debate about its safety. Supplemental melatonin should be used with great caution irrespective of the dose until more is known of its safety and efficacy. I recommend limiting its use to jet lag only.

However, artificially produced serotonin cannot be utilized by your body and is ineffective. Your brain's blood barrier does not allow synthetically or naturally produced substitutes for the hormone serotonin to enter or be utilized by our brains. But sunrise simulation can cause your brain to produce it naturally.

In addition to being good for SAD, dawn simulators also help prevent cancer. According to recent studies, circadian rhythms have been demonstrated to have an effect on who may get cancer, when medical treatments are best administered, as well as who will get pregnant and when.

It is also important to sleep in complete darkness as even small amounts of light leaking into your bedroom can decrease your melatonin levels and increase your risk of cancer.

