







Seasonal Affective Disorder and Addiction

As the holiday season comes to a close, those who are undergoing recovery may look for relief in the fact that they have 'survived' one of the toughest times of the year, successfully pushing through parties and reunions that while joyous, can often be stressful and loaded with temptation to drink. Yet those in recovery may be faced with another looming, if not a presciently relevant obstacle that affects an increasing amount of people every year; one that can weigh heavily in a recovering individual's mind often without them even knowing what it is: Seasonal Affective Disorder (SAD).

What is SAD?

SAD, alternatively referred to as the winter or summer blues, winter or summer depression, or seasonal depression, is a mood disorder in which people who exhibit stable mental health throughout the year experience depressive symptoms in the winter or summer; even early spring or late autumn, year after year.

From the Mayo Clinic:

"Symptoms of SAD may consist of difficulty waking up in the morning, morning sickness, a tendency to oversleep and over eat (especially a craving for carbohydrates) which leads to weight gain. Other symptoms include a lack of energy, difficulty concentrating on or completing tasks, and withdrawal from friends, family, and social activities and a decreased sex drive. All of this leads to depression, pessimistic feelings of hopelessness, and lack of pleasure which characterize a person suffering from this disorder. People who experience spring and summer depression show symptoms of classic depression including insomnia, anxiety, irritability, decreased appetite, weight loss, social withdrawal and decreased sex drive."

The incidences of SAD are more ubiquitous during winter time, and the onset of SAD has been linked to lack of exposure to natural light. While it is established that symptoms of depression in western countries rises during the holidays, SAD carries on throughout the rest of the season, and most people who experience SAD will experience a major depressive disorder, and often bi-polar disorder.

There are four indicators that are needed to meet the criteria of one who suspect they may be suffering from SAD: depressive episodes at a particular time of the year; remissions or mania/hypomania at a certain time of year which are often characterized by 'lows' during the winter season and unabatable highs in the summer; the patterns lasting a minimum of two years, and these seasonal depressive episodes outnumbering other depressive episodes throughout the patient's lifetime.



SAD and Addiction

While the links between SAD and addiction are debatable, the 'lows' associated with the season and onset of SAD are often mitigated by indulging in habitually addictive behavior, while the hypo-manic behavior associated with the 'high' period can lead the sufferer to engage in pleasurable activities that may have a high potential for negative psycho-social or physical consequences i.e. drug and alcohol abuse, shopping sprees, reckless sexual indiscretions, reckless driving, or foolish business investments. There is little doubt that those involved in the addiction recovery process will shoulder an added stressor if or when they are also dealing with a SAD.

According to Lee Vallis, addiction psychologist at The Cabin Chiang Mai, there can be clear conclusions drawn:

"In terms of addiction and depressive disorders, the jury is out (within the psychological and counseling community). Psychologists will tell you that depressive disorders will lead to engaging in addictive behaviors, while addiction counselors will maintain that it is 'classic addiction' that brings about depressive symptoms"

He maintains that the chemical imbalance brought on by substance abuse, more specifically the brain's inability to produce natural serotonin, is a classic trigger for depressive symptoms.

"This is most dangerous during the recovery period, where the onset of depression can push a recovering addict (sic) into relapse." Vallis states.

Treatment for SAD and Addiction

While the treatment for SAD is varied, ranging from light therapy (exposing one who is experiencing SAD to ultra-violet light, be it natural or artificial) and 'dawn' therapy to anti-depressants; there are also psychosocial treatments, including individual and group therapies that have proven vital in managing and overcoming SAD's incidence. Unsurprisingly most, if not all, of these treatments are utilized in addiction recovery and provide a holistic, non-chemical method in overcoming both addiction and SAD for an individual. Treatments of this sort include group therapy sessions and activities that can be tailored towards the following:

- Substance Abuse
- Stress management
- Weight control and nutrition
- Smoking cessation
- Time management
- Social skills and networking
- Wintertime activities
- Sleep education
- Self-esteem
- Sexual health

Vallis emphasizes that in addition to the treatments above, the 'blue' feeling experienced by SAD sufferers and other depressives as well as those in recovery can usually be dampened or extinguished by exercise and increased outdoor activity, particularly on sunny days, resulting in



increased solar exposure. "Exposure to light, especially in the morning on short walks, or sitting out at dawn, is regularly encouraged in treating depressive symptoms, as well as aiding sleep pattern regulation and injecting the body with vitamin D." It is important to note that vitamin D prevents toxicity within the body as well.

Furthermore, cognitive and mindful based behavior therapy has proven enormously successful in treatment, including the facilitation of 'awareness' whereby a person can recognize and distance themselves from the negative thought patterns and feelings, or "a catastrophic state of mind that will lead to feeling of doom and gloom and seemingly insurmountable problems" that can lead one to use drugs and alcohol or return to a pattern of substance abuse. Interestingly, light, exercise, as well as the cognitive and mindful based therapies utilized in the recovery process are regularly employed in remedying depressive symptoms as well.

A glance at The Cabin Chiang Mai's weekly schedule will quickly illustrate how the centre's addiction recovery program can perform the dual purpose of addressing the needs and requirements of one experiencing SAD as well recovery. The Cabin's natural warm and sunny climate in Chiang Mai, in conjunction with its careful and professionally constructed weekly routine of individual and group therapy, its fitness regiment, and outdoor activities and social excursions provide the individual with the tools necessary to address their specific recovery needs, as well as the challenges brought on by SAD.

Vallis maintains that the Cabin Chiang Mai provides the proper setting and tools to cope, overcome, and fully recover. "..it's really about recognizing what is going on and taking a hold of it before it spins out of control."





Sources:

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