

# SAD? Blue? Depressed?

by Amber Dean, Peer Health Educator

So, the holidays are over, a new term is beginning and you're facing another four months of school. Feeling kind of down?? Maybe you're wondering how you can tell if you have the blues, or if you're actually suffering from depression, a diagnosable disorder included in the DSM IV (Diagnostic and Statistical Manual). Read on to find out!

According to Dr. Bob Drebit, a psychiatrist at the University Health Centre, a person suffering from depression will likely experience feelings of sadness and tearfulness, or frustration and irritability. So far, I'm sure most of us have experienced this range of emotions at one point or another. But one of the major symptoms of depression is described by Dr. Drebit as "a loss of interest, or a loss of pleasure in usual activities, so people give up the things that they used to enjoy doing so much".

Other symptoms can include insomnia or hypersomnia (excessive sleep), increased or decreased appetite, feelings of hopelessness or helplessness, and the kind of procrastination where you find the simplest decisions impossible to make. Severe depression usually results in feelings of being the worst person in the world. So you see that although having the blues and being depressed may sound similar in theory, there are some pretty clear distinctions between them!

In general, clinical depression has a higher incidence in adults than in adolescents, and Dr. Drebit feels that the chances of a person



experiencing a clinical depression that would benefit from treatment with medication sometime in their life is about 20%.

There are many different categories of depression included in the DSM IV. According to Dr. Drebit, the type most often experienced by the university population is an adjustment disorder with a depressed mood. This disorder usually results from an incident in one's past which would predispose them to a stronger reaction to incidences of grief or bereavement than would normally be expected.

Major depression is another category seen on campus. It can be described as a depression including "all of the classic symptoms of... sleep disturbances, lethargy, feelings of worthlessness, despondency, morbid thoughts and, on occasion, suicide attempts" (Reber, 189). Major depression is a clinical depression and usually requires treatment with antidepressants. Mature students

on campus are more prone to experiencing chronic depression, which is a low level depression usually resulting from low self esteem caused by the return to university and the necessity of dealing with many issues which weren't dealt with earlier. This type of depression is normally treated best with psychotherapy.

Would you be surprised to learn that depression is influenced by the seasons? Well, it's true! In fact there is a specific type of depression resulting from seasonal changes, called Seasonal Affective Disorder or SAD. In his article "Seasonal Affective Disorder: Emerging From the Dark", Dr. Raymond Lam defines SAD as a "mood disorder consisting of recurrent major depressive episodes occurring during a certain season, with regular remissions in another season" (53), and he states that the most common type of SAD is winter depression. Not surprisingly, then, this disorder is most often seen in northern and southern climates and is usually caused by exposure to less light or, occasionally, colder temperatures.

Most people affected by SAD respond well to light therapy, which requires spending a designated number of hours per day in front of a light box.

Some common symptoms of SAD include an increased appetite, and an increased amount of time spent sleeping, which are opposite to symptoms usually resulting from other types of depression. However, according to Dr. Drebit, SAD is difficult to diagnose in the university population because students' schedules tend to be erratic, so it's difficult to determine whether depression has resulted from the increased stress of returning to school or writing exams, or whether the seasonal changes are actually causing the depression.

Two methods are commonly used to treat patients suffering from depression, and these are pharmacotherapy, or treatment with antidepressants, and psychotherapy (talk therapy). Psychotherapy can be conducted in individual sessions or group sessions; both types are offered at the University Health Centre. The

University Health Centre also has a light box, and doctors have begun using it to treat patients they believe may be suffering from SAD. Dr. Drebit stresses that "what you use for treatment really depends on the individual".

I hope the distinctions between having the blues and being depressed are a little clearer now. If you think you've got a January case of the blues, get in touch with some friends and spend some time relaxing and doing things that you enjoy. If you think your depression is a little more serious than that, come see a doctor at the University Health Centre, or make an appointment to see your family doctor. There are ways of beating depression!!

For more information on avoiding unplanned pregnancy, managing stress, and generally staying healthy and productive as a student, visit the Student Health Resource Centre, 2-300 SUB, or surf over to [www.ualberta.ca/HealthInfo](http://www.ualberta.ca/HealthInfo)