

SLHC NURSE'S CORNER

JULIE SINGH, RN

January 2022

The Criticality of Seasonal Affective Disorder in the Elderly

Now that winter is upon us, many ailments would be front and center for the nursing community. Whilst the threat and concern over the 'Tridemic' make rightly deserved, excessive waves on every forum and media outlet, it does take attention away from certain; often unstated, critical psychophysiological conditions such as SAD (Seasonal affective disorder). How often have you or your colleagues attributed the detached, temperamental depressive changes in the elderly to the 'winter blues'? When it could have been seasonal depression or (SAD).

Seasonal affective disorder is for all intents and purposes a common health condition, that is if you know what you're looking for as it begins and ends around the same time window every year. The signs or symptoms of depression are likely to start in the fall and continue in the winter months, before they become remedied once spring or early summer rolls in.

SAD and Depression: SAD and Depression while similar in most aspects, have a distinct variation in the seasonal effects and frequency. SAD sets in during certain times of the year either Fall and winter or Spring and summer wherein the symptoms start off as mild and progress to a more severe level as the season continues in both timelines. SAD affects people at any age, but older adults and the elderly are typically prone to struggle with isolation and loneliness owing to underlying limitations in mobility and other conditions compounded by their vitamin D deficiency. As you all know, Vitamin D is a vital factor in the regulation of one's mood and energy levels so it's a given that the deficiency will lead to depressive symptoms.

Symptoms: It is by no means an exaggeration to say that all types of depression are overlooked in seniors as the easiest explanation comes in the form of cognitive decline or effects of aging. It is important to take note of the signs of depression so that the right attention and support are offered, SAD includes:

- Listless or hopeless body language and expressions or guilt nearly every day
- Detachment from activities that one normally enjoys
- Constant fatigue to the point of sluggishness
- Oversleep and lack of concentration
- Agitation and Anxiety leading to irritability
- Unstable weight changes and appetite levels

Treatment. Chronic caregivers also experience seasonal depression from stress just like the depressed elderly with serious illnesses who receive care from them throughout. The CDC estimates say that over 15-20% adults over 65 experience depression and one can take early action to prevent deeper depression by improving the quality of life.

Just like every form of depression, SAD can be treated with antidepressant medications which based on their prescribed dosage will at least take a few weeks to achieve their full effect. There are several non-pharmaceutical options for mitigating the symptoms of SAD such as:

- Increased light exposure in the form of sunlight or light box in light therapy to better regulate circadian rhythm
- Proactive attention to vitamin D levels for better mood and energy levels
- Regular physical activities like simple exercises, yoga will reduce anxiety and stress
- Never hesitate to seek assistance from a doctor at any point in time as senior counseling is a great resource
- Lifestyle changes and regular social interaction

If left unchecked, as it is the case with other types of depression SAD will worsen and lead to other problems in everyday life from social withdrawal at work or family, even substance abuse & eating disorders to downright suicidal thoughts or behavior.