

# WINTER BLUES

COPING WITH SEASONAL DEPRESSION



**Kinwell**

Christine Heller, Ph.D.

# Group Agreements

- Arrive on time, let facilitator know of planned absences
- Keep group confidential
- Silence cell phones, close other distractions
- Bring an attitude of acceptance and non-judgment for self and others
- Group is an “open” format, meaning people may join throughout the series
- Respond with chat box and emojis
- Stay on mute unless speaking to the group
- Be on camera

# What to Expect

**Week 1:** Introductions, Learn about SAD, Explore your seasonal patterns

**Week 2:** Circadian rhythm, Light therapy

**Week 3:** Mindset, thoughts & beliefs about winter; Challenging automatic thoughts

**Week 4:** Special guest Valerie Wintler, ARNP, joins us to talk about biological aspects of SAD, medications and supplements that help / don't help.

**Week 5:** Lifestyle supports: diet, exercise and substances; Stress management; Community and social engagement

**Week 6:** Create your individualized Winter Blues survival plan

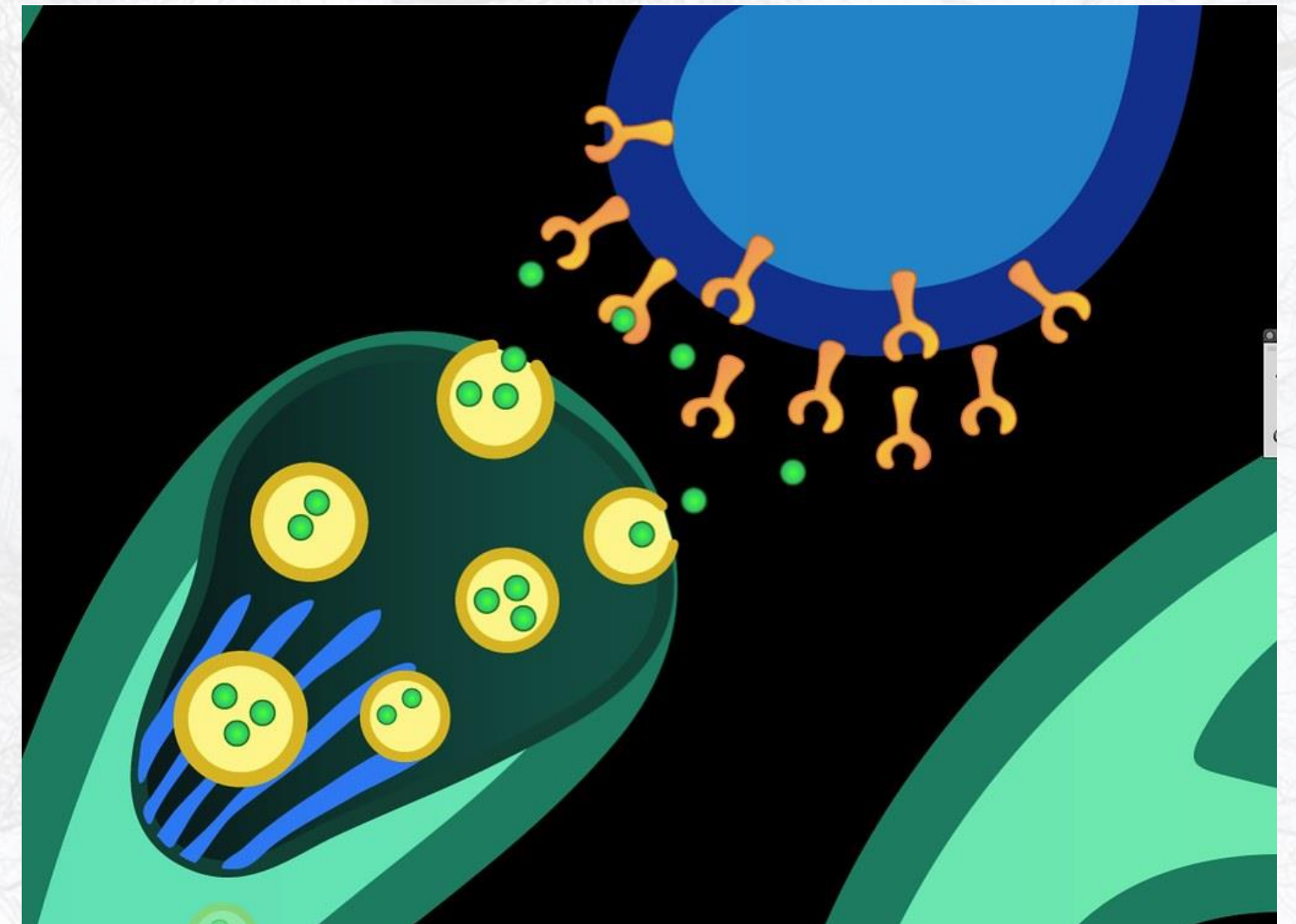


# Neurobiology

- Circadian Rhythm Disruption
- Non-Circadian effect of light
- Retinal Subsensitivity
- Genetics
- Neurotransmitters, like serotonin
- Hormones

# The Role of Neurotransmitters

- **Serotonin:** The “serenity” chemical.
  - Helps you feel calm, in a good mood, and reduces irritability
- **Dopamine:** The “pleasure” chemical.
  - Impacts motivation, reward system, and attention
- **Norepinephrine:** The “energy” chemical.
  - Makes you feel vital and alert



# Medications & Supplements



# Medications

Medications for SAD are like those when treating other kinds of depression, and typically work on the neurotransmitters including:

- Serotonin
- Norepinephrine
- Dopamine
- GABA
- Glutamate





# First Line Medications

- **Selective Serotonin Reuptake Inhibitors (SSRI's):**  
Zoloft (sertraline), Prozac (fluoxetine), Paxil (paroxetine),  
Celexa (citalopram), Lexapro (escitalopram)
- **Serotonin Norepinephrine Reuptake Inhibitors (SNRI's):**  
Effexor (venlafaxine), Cymbalta (duloxetine),  
Pristiq (desvenlafaxine)
- **Other Antidepressants: Wellbutrin (bupropion)**

# Debunking Myths about Medications

- “I’ll get hooked”
- “I’ll turn into someone else”
- “Taking drugs is the easy way out, it’s a sign of weakness”
- “If I start taking these pills, I’ll be dependent on them for the rest of my life”
- ...Any other myths you’ve heard about taking medications for mental health?



# Supplements

## The good:

- Purchased over the counter
- May be more accepted by someone hesitant or unsure regarding medication
- Risk of harm/adverse effects *generally* is lower

## The bad:

- Lacking clinical evidence that supports their use
- Expensive
- May be challenging to identify medication interactions
- Unregulated market



# Supplements

- Vitamin D
- Vitamin B
- Omega-3 fatty acids
- St. John's Wort
- Ashwagandha
- Ginko Biloba
- S-adenosyl-L-methionine (SAMe)

A winter scene with snow-covered trees and a bench. The image shows a path leading through a forest of snow-laden trees. In the foreground, there is a black metal bench covered in snow, and a small wooden post. The ground is covered in a thick layer of snow. The sky is overcast and grey.

**Questions and Answers  
with our Medical Provider  
Special Guest  
Valerie Wintler, ARNP**

# Next week:

- Lifestyle: diet, exercise, and substances
- Stress management & mindfulness practice
- Community and social engagement

