

Bright Light Therapy for University of Notre Dame Students, Faculty and Staff

Light therapy has been found to be an effective treatment for seasonal depression (aka, SAD or the “winter blues”), non-seasonal depression, depression during pregnancy, postpartum depression, PMS, seasonal fluctuations for bulimia, circadian sleep phase disorders, and jet lag.

University of Notre Dame students, faculty and staff use the University Counseling Center’s Light Box for bright light therapy in our **Inner Resources Room** located in Room 305 of Saint Liam Hall (please sign up online at <http://ucc.nd.edu/>). Notre Dame students who are *clients* at the University Counseling Center (call 631-7336 or come to the 3rd floor of Saint Liam Hall) can make arrangements

with a therapist to check out one of our light boxes to take home for a two-week trial period. Light therapy is typically scheduled in the morning for about a half an hour daily. If after two weeks you find that light treatment is beneficial, you may wish to arrange to purchase a light box so that you can continue to use one for your own personal use every day at the optimum time for you. Students can purchase a light box through the campus pharmacy in Saint Liam for an excellent price, \$150.00. Light boxes can be purchased without a prescription, and we can provide referrals to companies which manufacture them. In some cases, with a prescription for a light box from a psychiatrist or physician, your insurance company may be able to reimburse you for a portion of your expense. Contact your insurance company to discuss coverage and necessary documentation.



You can self-assess your symptoms of depression to determine seasonality using the AUTO-PIDS (Personal Inventory for Depression and SAD, see <http://www.cet.org>). However, it's important to know that symptoms of stress and depression can have multiple causes, including environmental, social, emotional, and medical. *We recommend that you meet regularly with a qualified health service provider (therapist, physician or psychiatrist) in order to determine if light therapy is recommended and to have your response to bright light treatment monitored. Do consult your health care professional who understands your specific situation before beginning any self-guided stress management or depression treatment program.* If you are a degree-seeking Notre Dame student, you can schedule to meet with one of our staff therapists and consult with our psychiatrist. You can determine an estimate of the most therapeutic time for you to use light therapy by measuring your symptoms on the Morningness-Eveningness Questionnaire (see <http://www.cet.org>). If your questionnaire results recommend that the most therapeutic time for you to conduct light therapy is prior to when our office opens at 8:00 am, you can still use our Inner Resources Room light box after our office opens and receive some therapeutic effects, knowing that you may not receive the full benefit from the treatment. Your health care provider is likely to recommend using the light box *every day for at least two weeks* to determine if light therapy will be beneficial to you. Note that if you find that light therapy is beneficial, you will need to buy your own light box to keep using it every day thereafter to maintain the benefits.

To determine the optimum position of the lamp, the light board should be centered and there should be a 15 degree angle between the tilt of the light and your eyes. In other words, the level of your eyes should be in the center of the light board when the board is tilted at a 15 degree angle towards you. There are two brightness settings on the Day-Light box, and the brightest setting is 10,000 lux which has been found to be therapeutic for depression and SAD. However, if you are not used to a light box, initially it is better to gradually get used to the light's brightness by adjusting duration and distance.

During initial sessions greater distance from the light and less time duration is better than more. We recommend starting light therapy by staying approximately 40 inches from the light for 30 minutes. You may feel a bit dehydrated with regular light therapy so we recommend drinking extra liquids. Over the course of a week you can move closer until you are about 12-15 inches from the light for 30 minutes. You won't ever need to get closer than this. Your eyes must be open for the therapeutic effect to occur but you should NOT stare directly at the light. While sitting under the light you may wish to choose an activity that is pleasant and relaxing but it is best not to sleep during your light therapy exposure. You can read, write, use the computer, listen to music, or use your cell phone while sitting under the light. We highly recommend that you read educational resources about depression, seasonal affective disorder, and about light therapy treatment (e.g., *Winter Blues* by Norman Rosenthal, M.D.).

During light therapy, *you should keep to a regular sleep schedule* (going to sleep and waking up at regular times, for example, from 11:00 p.m. to 7:00 a.m.). For other self help tips for depression, read the handouts available in the desk drawer of the Inner Resources Room.

We recommend keeping a daily mood log and taking a weekly depression questionnaire to measure your response to treatment. You can use the AutoSIGH on <http://www.cet.org> and/or your health care provider can provide instruments. Response may start in a few days, and by two weeks your symptoms should be definitely improving. Most people with the "winter blues" choose to continue light therapy throughout the winter until the springtime, typically from November through February, but this may vary among individuals. When light therapy treatment is interrupted, symptoms do not usually reappear for a few days, so most people can stop the treatment for one or two days without much problem (e.g., for the weekend). When there is a good response to light therapy, some people like to experiment with the timing and duration of daily light exposure e.g., by reducing the daily exposure to 15 minutes, or using the light at a more convenient time of the day (e.g., 4:00 p.m.). We suggest making one change at a time, for 2 weeks. If symptoms start returning, go back to the original dosing schedule.

There are no reported harmful effects on the eyes with light therapy as described, but the long-term effects have not yet been studied. *If you have eye problems (e.g., retinal disease, cataracts, or diabetes), or if you are taking medication that increases photosensitivity, or if you have any worries about eye damage, please see your doctor.*

Some people experience mild headaches, nausea, dizziness, insomnia, or eye strain when using the lights. These symptoms usually occur at the beginning of treatment, and get better in a few days. Otherwise, they can be relieved by reducing the daily exposure time, or by sitting slightly farther away from the lights. *Occasionally people report feeling irritable, or euphoric, or being "too high" when treated with light therapy. If you experience these symptoms, or if you ever feel suicidal, the treatment should be stopped, and you should contact your health care provider, your therapist or the on-call therapist in the University Counseling Center immediately.* If light therapy is restarted, we recommend that you use a shorter exposure time (e.g., 15 minutes per day) or sit slightly farther away from the light. People with bipolar disorder or any history of hypomanic symptoms (manic-depressive illness) should consult with their therapist and psychiatrist before using light therapy.

Most people with SAD or major depression can benefit substantially from light therapy, but not everyone will respond to light therapy. If you do not receive some beneficial response within two to four weeks, talk to your therapist or health care provider. Your health care provider can arrange for you to receive other highly effective treatments, such as psychotherapy and/or antidepressant medication, with or without light therapy.