



# NHLAP

## NEW HAMPSHIRE



## OCTOBER 2019

# Newsletter

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### *NH LCL Monthly Meeting*

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Lawyers Concerned for Lawyers (LCL) is a monthly meeting on the **SECOND TUESDAY OF EACH MONTH** of NH lawyers, judges and law students who come together for free, confidential peer support for any issue that interferes with professional competence. Absolutely confidential.

October 8 at 6:00 p.m.

Airport Diner, 2280 Brown Ave, Manchester

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The NH Bar Association has made it possible for the bar-wide distribution of the monthly NHLAP Newsletter as of May, 2019. NHLAP is sincerely grateful for the leadership and assistance of NHBA in this endeavor.

# **SEASONAL AFFECTIVE DISORDER**

Fall is encroaching and that means shorter daylight hours. There is a change in the air- the anticipation of fall holidays, the ever-present pumpkin spice and the beautiful fall foliage of New England. Yet, this can be a very difficult transitional time for many. There is a very real medical reason that that this time of year can be challenging. It's not the "Winter Blues" - a phrase that diminishes the seriousness of both the symptoms and the medical disorder behind it. The reason is Seasonal Affective Disorder or S.A.D.

SAD is a real and serious type of depression that comes and goes with the seasons, most often the fall/winter season. It coincides with the changing of the clock or "Fall Back" when we stop utilizing daylight savings time here in the United States. Medically speaking, this cannot come at a worse time.

SAD is not a separate depressive disorder, but an exacerbation of an already present Major Depressive Disorder. So, if you already have Depression, you are much more likely to have SAD. As in Depression, a neurological chemical imbalance occurs which is prompted by shorter daylight hours and less available sunlight. This is different than Depression because not only is there difficulty with serotonin reuptake (getting the "feel good" mood hormone from synapse to synapse) but this neurotransmitter is working 5-10% more inefficiently than with Depression alone.

SAD is also marked with an overproduction of melatonin, the hormone responsible for regulating sleep. Because our circadian rhythms are off with the time change and with the lack of sunlight, this overproduction of melatonin creates the feeling of exhaustion, lack of energy and general difficulty getting up and getting going in the morning.

## Symptoms of SAD:

**5 or More Symptoms lasting at least 2 weeks**

**Depressed mood most of the day, nearly every day;**

**Markedly diminished interest or pleasure in most activities most of the day, nearly every day;**

**Significant weight loss when not dieting or significant weight gain;**

**Slowing down of thought and physical movement;**

**Fatigue or loss of energy nearly every day;**

**Feelings of worthlessness or excessive guilt nearly every day;**

**Diminished ability to think or concentrate nearly every day;**

**Recurrent thoughts of death, suicidal ideation without a specific plan or a specific plan for suicide or a suicide attempt;**

Feeling "Sad" is not SAD. Feeling "Sad" is also not Depression. This is significant distress or impairment to social or occupational daily functioning. Inability to work, socialize or get through routine daily life is not simply "feeling blue" but a serious, yet common, medical illness that negatively affects how you feel, how you think and how you act. It is easily diagnosed, and it is easily treated.

It is easy to pass off recurrent depressive symptoms as situational or just going through a “bad time.” However, the key to understanding and then treating Depression and/or S.A.D is in the duration. It is true that anyone can feel depressed because of a major disappointment, an ending of a relationship or grief associated with a significant loss. S.A.D is different because it lasts weeks, often months, for days on end. Very little that would “snap” someone out of a depressed mood will work for someone suffering from Depression or S.A.D.

A diagnosis of S.A.D is very treatable, which is good news to legal employers. If either Depression or S.A.D goes untreated the impairment of functionality translates to decreased productivity in the best of cases and legal malpractice in the worst. There is no reason for someone to suffer with SAD and no downside for employers to encourage diagnosis and treatment.

There is no reason to suffer through the changes of the seasons. It may make for funny punch lines, but it is a very real, very serious and potentially life-threatening medical condition which requires care and attention.

38 million Americans struggle with Depression. 38% of lawyers report that they have suffered with Depressive symptoms during their legal career. 9% of New Englanders suffer with S.A.D., most of which lasts 40% of the year. The life, productivity and disability lost to Depression and S.A.D. will be greater than that of accidents, cancer, stroke or any other health concerns, save heart disease. This is the number one problem not only facing Americans in general, but lawyers in particular. The lack of response, the lack of support and the lack of understanding is fueling this senseless epidemic.

NHLAP is a resource for support, education and referrals to help effectively combat the symptoms of S.A.D. We are here for you.

## Treatment of SAD:

### Medication

FDA approved medication for SAD are SSRIs which are selective serotonin reuptake inhibitors, which help more serotonin move from synapse to synapse increasing a positive mood (Prozac, Paxil, Zoloft, etc.); and

Bupropion, which is often used as an add-on to SSRIs when they provide an incomplete response (Wellbutrin, Zyban, etc.);

### Light Therapy

Electric lights of 10,000 lux of cool, white fluorescent light for 20-60 minutes every morning. Replenishes natural light lost during the winter months;

### Psychotherapy

Cognitive Behavioral Therapy (CBT) which identifies negative thoughts and replaces them with positive thoughts and positive behavioral activities that stimulate a dopamine response (“feel good” hormones) to naturally elevate mood.



## FREE ON-LINE PEER SUPPORT

### Depression and Bipolar Support Alliance

(DBSA), is a free, online support group providing people living with depression and bipolar disorder a place to share experiences, discuss coping skills and offer hope to one another. DBSA support groups are peer led, meaning they are facilitated by someone living with a mood disorder. Currently, there are groups for peers, young adults, and friends and family members. Info at [www.dbsalliance.org](http://www.dbsalliance.org) or 800-826-3632.



**The Lawyers Depression Project (LDP)**, a group of attorneys who themselves suffer from depression, have launched a grassroots project aimed at addressing depression and other mental health issues in the legal profession. The group hosts a confidential forum at [www.knowtime.com](http://www.knowtime.com) and weekly online peer-to-peer support group meetings, offering members the option of anonymity. To participate, members need only share emergency contact information with the group's founders (Joseph Milowic III & Aaron Kaufman, both attorneys who suffer from depression) to receive an anonymous knowtime email address for use with group meetings and to participate in the group's web forum. For more information, please contact [Joe@knowtime.com](mailto:Joe@knowtime.com)

## MONTHLY RESOURCE



## SPOTLIGHT

### BOOK PICK:

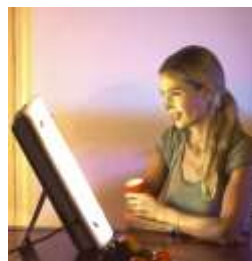
**Winter Blues: Everything You Need to Know to Beat Seasonal Affective Disorder** by Norman E. Rosenthal, MD, Guilford Press (2012)



Dr. Rosenthal is internationally recognized for his pioneering contributions to understand S.A.D. and using light therapy to treat it. He is a clinical professor at Georgetown Medical School and has conducted over 20 years of research at the National Institute of Mental Health.

### ANOTHER PICK: Article

**All the Ways We'll Beat the Winter Blues This Season** by Ellis Shechet and the *New York Times*. Tips for people dealing with problematic moods.



NY Times/Getty Images

[NY Times Article Link](#) (Ctrl + Click to follow)



## WHAT IS NHLAP?

We are a confidential, independent 501(c)(3) non-profit to assist NH lawyers, judges and law students with any issue that may impact or impair the ability to practice law. Many lawyers think we only help with substance misuse. Although that is a very important part of NHLAP, it is not the sole focus of our work. We help with anything that has become problematic. Some examples are depression, anxiety and other mental health issues; grief; cognitive limitations resulting from aging; eating disorders; professional dissatisfaction and burn-out; work-life imbalance and time management strategies.

We are here to help before consequences of these issues become problematic, public or both. We are not part of the NH court system nor the NH Bar. Because we are solely funded by a per attorney mandatory assessment, we are akin to an additional lawyer insurance policy- we can help individuals or legal employers understand the risks in ignoring these very real issues and point to concrete solutions.

We are your resource. We are here to help make your legal practice something you enjoy, not something you endure.

**1-877-224-6060**

Add NHLAP to your social media accounts to receive wellness updates and links to wellness articles as they relate to the law. We are on Facebook, LinkedIn, Twitter and Instagram. Just click on the links on the first page to see how we are harnessing the power of social media to keep you better informed.



## QUICK TIP

### WELLNESS QUICK TIP: CULTIVATE GRATITUDE

Every night, before you go to sleep, write down 3 things you are grateful for. (Repetition allowed.) Research shows that people who do this get happier almost immediately and stay happier for as long as they continue this practice.

“As we express gratitude, we must never forget that the highest appreciation is not to utter words, but to live by them.” -John Fitzgerald Kennedy

“When I started counting my blessings, my whole life turned around.”

Willie Nelson