



MOOD DISORDERS ASSOCIATION OF MANITOBA INC.

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SEASONAL AFFECTIVE DISORDER Questionnaire

Source: Outside In Ltd.

Please consult your doctor if you believe you may be suffering from a depressive illness.

This questionnaire is designed to help you assess whether you have SAD; it can also be used to help you assess how much bright light therapy is helping. It is based on the standard assessment tool used by doctors. You might like to talk it over with your doctor or another person in your household.

Not everyone will have every symptom, but the score should go down over the weeks.
Typical figures are over 20 when you have SAD and under 10 when you are better.

Compared to how you normally feel when you are well, how would you rate yourself on each of the following during the past week? Complete the following form and fill in the numbers in the boxes.

0=no different, 1=a little bit, 2=somewhat, 3=quite a lot, 4=definitely, badly

STANDARD depression symptoms score				
I have been ...	Before starting lights	After 1 week	After 2 weeks	After 3 weeks
➤ down and depressed				
➤ less interested in doing things or delaying doing things				
➤ less interested in sex				
➤ less interested in eating				
➤ losing weight				
➤ finding it hard to get to sleep				
➤ waking up in the night or sleep is restless				
➤ waking up too early				
➤ more tired than usual, heavy in my limbs, aching back or muscles or headaches				

I have been ...	Before starting lights	After 1 week	After 2 weeks	After 3 weeks
➤ guilty, I feel like a failure				
➤ feeling that life is not worth living				
➤ tense, irritable, worrying too much about little things				
➤ sure I'm ill or have a disease, unreasonably worried about my physical health				
➤ my thoughts or speech are slow				
➤ fidgety, restless, cannot keep still				
➤ morning is worse than evening				
➤ evening is worse than morning				
➤ feeling unreal, as if I am in a dream or cut off from what's going on around me				
➤ paranoid, suspicious				
➤ preoccupied, I have to keep checking things				
➤ having physical symptoms such as stomach problems, sweating, cramping, having to urinate frequently, dry mouth, sighing, heart palpitations, hyperventilating				
TOTAL <i>standard</i> depression score				
SUPPLEMENTAL depression symptoms score				
I have been ...	Before starting lights	After 1 week	After 2 weeks	After 3 weeks
➤ avoiding people, don't want to socialize				
➤ gaining weight				
➤ I WANT to eat more than usual				
➤ I ACTUALLY HAVE eaten more than usual				
➤ craving sweets or starchy foods				
➤ sleeping too much or I have been more tired than I should be				
➤ my mood or energy slumps in the afternoon then picks up at least an hour before bedtime				
TOTAL <i>supplemental</i> depression score				
COMBINED TOTAL depression score				

If you suspect you have SAD or a depressive illness, and the problem is undiagnosed or untreated, please consult your physician or other health professional as soon as possible.