

## Stress reactivity and coping in seasonal and nonseasonal depression

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### Abstract

Stress, stress reactivity, and coping skill use were examined in individuals with seasonal depression, nonseasonal depression, and nondepressed controls. Although participants in the two depressed groups reported using more avoidance coping strategies than controls, only participants in the seasonal depressed group reported using more season-specific coping (i.e., light-related strategies) than participants in the nonseasonal depressed and control groups. Individuals in the seasonal depressed group also reporting using acceptance coping strategies less frequently than individuals in the control group. Only participants in the nonseasonal depressed group, however, exhibited greater psychophysiological arousal in reaction to a laboratory stressor (i.e., unsolvable anagram task) when compared to participants in the seasonal and nondepressed control groups. Participants in both depressed groups reported greater impact of negative life events during the past 6 months than did controls. Similarities and differences in the two types of depression may have implications for the conceptualization and treatment of seasonal depression.

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### Introduction

Over the past 20 years, researchers have begun to focus on etiological, treatment, and maintenance factors in the development and recurrence of seasonal depressive episodes. According to DSM-IV criteria (APA, 1994), a major depressive episode with a seasonal specifier is characterized by depressive episodes that typically begin in the fall/winter seasons with symptom remittance in the spring/summer seasons. Often referred to as Seasonal Affective Disorder (SAD; Rosenthal et al., 1984) in the research literature, seasonal depression is most prevalent among women (i.e., 80%; Hellekson, 1989; Rosen et al., 1990) and in individuals living in US northern latitudes (10% estimated prevalence rates in the Northeast versus 1.4% estimated prevalence rates in the Southeast; Rosen et al., 1990; Terman, 1988).

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In addition to reporting depressive symptoms associated with nonseasonal depression (e.g., sad mood, loss of interest in usual activities), SAD is characterized by anergia, hypersomnia, weight gain, and carbohydrate craving (e.g., Rosenthal et al., 1984). Given that current biological models propose that reduced sunlight, abnormal melatonin levels, and disruptions in circadian rhythm shifts play an important role in the development of SAD (e.g., Dalglish, Rosen, & Marks, 1996; Wehr et al., 2001), individuals with seasonal depression are typically treated with phototherapy (e.g., Rosenthal & Wehr, 1992; Terman, Amira, Terman, & Ross, 1998).

Young, Watel, Lahmeyer, and Eastman (1991) and Young (1999) proposed a dual vulnerability hypothesis in which individuals develop the more typical symptoms of a depressive episode in reaction to the presence of the neurovegetative symptoms of SAD (e.g., anergia, hypersomnia, carbohydrate craving). Thus, individuals may possess two distinct vulnerabilities—a propensity to develop the neurovegetative symptoms associated with SAD, and a propensity to develop symptoms associated with nonseasonal depression (e.g., depressed mood, increases in negative cognitions) in response to the SAD neurovegetative symptoms. The dual vulnerability hypothesis has prompted increased research on the applicability of psychological factors for the development, maintenance, and treatment of SAD episodes, although little is known about what factors lead to increased vulnerability to recurrent SAD episodes.

One psychological factor that researchers have recently begun to examine involves sensitivity to aversive events in seasonally depressed samples (e.g., Austen & Wilson, 2001; Rohan, Sigmon, & Dorhofer, 2003; Rohan, Sigmon, Dorhofer, & Boulard, 2004). Lewinsohn, Hoberman, Teri, and Hautzinger (1985) originally proposed that this sensitivity, characterized by greater psychophysiological responses to stress and increased behavioral avoidance, predisposed individuals to nonseasonal depression. In an initial investigation of psychophysiological arousal and seasonality (i.e., seasonal changes in mood and behavior), Austen and Wilson (2001) found that individuals with high and low levels of seasonal changes exhibited increased skin conductance reactivity in reaction to a stressful task during the winter months. Rohan and colleagues (2004) found that individuals with subsyndromal levels of SAD exhibited greater skin conductance reactivity to low light stimuli in winter and in spring when compared to nondepressed controls. However, it is difficult to determine whether these responses represent a general effect of depression or whether they are specific to SAD. In a recent study, researchers explored this issue and found that individuals with SAD exhibited greater skin conductance reactivity to winter scenes than individuals with nonseasonal depression and controls (Sigmon et al., *in press*). Overall, initial findings suggest that individuals with SAD may perceive seasonal stimuli as stressful and subsequently exhibit heightened psychophysiological arousal.

Although it is widely recognized that stress plays a crucial role in understanding the development and maintenance of nonseasonal depression (e.g., Brown & Harris, 1989; Brown, Harris, Hepworth, & Robinson, 1994; Kessler, 1997; Lewinsohn, Allen, Seeley, & Gotlib, 1999; Mazure, 1998), there is little research investigating stress in individuals diagnosed with SAD. Given that SAD is a cyclical disorder with specified onset and remittance at certain times of the year, it is important to identify the role that psychosocial stress and coping strategy use may play in symptom onset and severity. To date, studies have not investigated whether individuals with seasonal depression report elevated frequency of stressful life experiences, or whether they utilize coping strategies similar to those used by individuals with nonseasonal depression (e.g., Sherbourne, Hays, & Wells, 1995). For example, although studies consistently show that nonseasonal depression is associated with avoidant coping strategy use (e.g., Felsten, 2002), it is unclear whether avoidant coping is also associated with SAD.

The goal of the current study was to investigate stress reactivity, coping strategy use, and psychosocial stress impact in individuals with seasonal and nonseasonal depression. Although previous research has found increased psychophysiological response to season-specific stimuli in individuals with seasonal but not nonseasonal depression (Sigmon et al., *in press*), it remains unclear if general stressors (i.e., unsolvable anagram task, failure feedback) will elicit increases in psychophysiological reactivity in individuals with seasonal depression compared to individuals with nonseasonal depression. The primary hypothesis is that individuals in both depressed groups will exhibit greater psychophysiological arousal in reaction to the general stress tasks than nondepressed controls. It is also expected that individuals in the depressed group will experience more depressed mood after completing the unsolvable anagram and after receiving negative feedback on the task compared to controls. A second hypothesis is that individuals with seasonal and

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