

# The State of Undergraduate Medical Education

- > Current undergraduate medical education is a considerable undertaking for students
- > Up to 73% of medical students suffer from depressive symptoms related to educational rigors 1
- > A key feature of the clinical years of undergraduate medical education is to prepare students for the rigors of residency training with 24-hour call shifts and periods on night services
- $\succ$  These factors coalesce to explain the excessive prevalence of sleep pathology in medical students, with 23% reporting hypersomnia and 18% reporting insomnia 2

# Seasonal Affective Disorder (SAD) <sup>3</sup>

- $\succ$ SAD is a form of depression that mainly occurs in Fall and Winter months, remitting in the Spring & Summer
- >Depleted light exposure results in neuropsychiatric changes associated with "depressed mood, loss of pleasure, change in appetite, sleep disturbances, reduced energy, neurocognitive dysfunction, or suicidal ideation/behavior"

Commonly affects those in 20s		Females	
	Epidemiology		
Positive relationship with northern latitude		Can b movi	e precipitated b ng geographies

- >A meta analysis of 8 randomized controlled trials found that bright light therapy was effective at treating symptoms of SAD with an effect size of 0.84, which are comparable to the benefits of antidepressants 4
- $\geq$ In addition, BLT monotherapy has been shown to improve symptoms of nonseasonal unipolar depression as well as ADHD 5, 6



>To design a replicable model of Bright Light Therapy Self-Checkout for Undergraduate Medical Education Institutions

- students)
- interactive instructive workshop

# Bright Light Lamp Checkout Program at AMC

- Purchased \$25 BLT lamps to be stored in an accessible location in the library



4) Golden RN, Gaynes BN, Ekstrom RD, et al. The efficacy of light therapy in the treatment of mood disorders: a review and meta-analysis of the evidence. Am J Psychiatry. 2005;162(4):656-662. doi:10.1176/appi.ajp.162.4.656 5) Al-Karawi D, Jubair L. Bright light therapy for nonseasonal depression: Meta-analysis of clinical trials. J Affect Disord. 2016;198:64-71. doi:10.1016/j.jad.2016.03.016

6) Rybak YE, McNeely HE, Mackenzie BE, Jain UR, Levitan RD. An open trial of light therapy in adult attention-deficit/hyperactivity disorder. *J Clin Psychiatry*. 2006;67(10):1527-1535. doi:10.4088/jcp.v67n1006

### Lessons Learned & Future Directions

Raise awareness about depression, SAD, and BLT at start of intervention and during winter seasons

Explore prevalence of SAD in undergraduate medical students

Investigate benefits of BLT on undergraduate medical student mood and performance

### Conclusions

Depressive symptoms are common in medical students, and low-risk treatments are preferable and available

An institutional BLT self-checkout program is feasible and scalable

Bright light therapy is a promising, cost-effective solution with a low risk profile that medical schools can employ to help improve the acute and long-term wellbeing of medical students

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### References

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3) Avery D, Roy-Byrne PP, Solomon D. Seasonal affective disorder: Epidemiology, clinical features, assessment, and diagnosis. December 2020. https://www-uptodate-com.elibrary.amc.edu/contents/seasonal-affective-disorder-epidemiology-clinical-features-assessment-

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