

# Melatonin and Children



#### What is melatonin?

For general information on melatonin please see our melatonin web page.

#### What can children use melatonin for?

In children, melatonin is typically used to treat difficulties with going to sleep or staying asleep. It may benefit children who are developing normally as well as children with Attention Deficit Hyperactivity Disorder, autism, other developmental disabilities or visual impairment.

For most children with sleep problems, there is a specific cause which should be identified and treated before melatonin is considered as an option. For example a child might not be able to get to sleep due to their anxiety. If the child is anxious, there are things to try first such as relaxation techniques and visual imagery. See our Anxiety and Sleep page. In some cases, the sleep problem may be related to the child's behaviour. If this is the case the parents should try to change the child's behaviour at bedtime. See our Behavioural Sleep Problems in School Aged Children page for some tips on how to do this. Other sleep disorders in children are described in our Sleep Problems and Sleep Disorders in School Aged Children page.

## Important Things to Know About Melatonin Use in Children

- · Melatonin is a hormone which helps regulate sleep.
- If your child cannot sleep, the first things to try are strategies to change behaviour that will help with better sleep. Melatonin may be suggested if these have already been tried but were not successful.
- Melatonin is most often used in children with sleep disorders related to Attention Deficit Hyperactivity Disorder, autism, other developmental disabilities or visual impairment.
- In Australia melatonin needs a prescription and is available in different forms.
- In the short term, it seems to work well and be safe. Only a few studies have looked at its long term use in children. But those that have, suggest that it is safe.

## How much melatonin should my child take?

If your child's paediatrician or sleep specialist has prescribed melatonin, the dose will depend on your child's age. A young child needs less than an older child. Amounts may vary from 0.5 mg to 6 mg. There does not seem to be any reason to take more than this. All forms of melatonin need a doctor's prescription in Australia. The most common preparation in Australia is 2 mg in a tablet form and this is available from chemists with a prescription. It is a slow release form to last all through the night. This is much like the melatonin that occurs naturally. Melatonin is also available in liquid form or in immediate release tablet form from compounding pharmacies.

## When should my child take it?

To help your child go to sleep, the best time to take the melatonin is around 30-60 minutes before you want them to go to bed. You may need to try giving it at different times to work out when is best for them. Discuss this with your child's doctor.

Be sure to use it along with a good pre-bed routine. The bedroom should be dark and comfortable. It is important that it is free from electronic media (such as TVs, electronic games and phones) which may distract the child and make it difficult to sleep. See also Good Sleep Habits. Children should not use computers for at least an hour before going to bed. A light snack before bed is OK, but drinking and eating should be avoided if possible for at least 2 hours before bed.

### Can melatonin cause problems?

Melatonin use in children appears to be safe and works well in the short term.

Long term use is only appropriate if it is because of an specific sleep issue, such as may be seen in children with developmental problems or visual impairment.

Side effects in children are very rare. When people report them, it is not yet certain if they are caused by melatonin or by something else. You should talk about this with your doctor.

### Where can I find out more?

Most research about melatonin in children has focussed on children with specific conditions or developmental problems. The following links are to short summaries of scholarly articles:

http://onlinelibrary.wiley.com/doi/10.1111/j.1600-079X.2009.00681.x/full

http://jcn.sagepub.com/content/23/5/482.short

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Disclaimer - Information provided here is general in nature and should not be seen as a substitute for professional medical advice. Ongoing concerns about sleep or other medical conditions should be discussed with your local doctor.



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