

## **Information on Melatonin for Parents and Child Care Providers**

- One study found that some melatonin has potentially dangerous amounts of melatonin—much more than was listed on the label. This includes the melatonin found in the form of gummies.
- During the pandemic calls for **pediatric melatonin ingestions** to the United States **Poison Control Centers increased 530%** from 2012 to 2021 and were associated with **27,795 emergency department and clinic visits**. 4,384 children needed in-patient hospital care. **Two children died**.
- **Melatonin should only be given to a child after a discussion with the child’s health care provider.**
- Melatonin may be a **short-term** way to help some children get rest while trying to establish good bedtime routines.
- Melatonin might help children with some neurodevelopmental disorders such as autism or attention-deficit hyperactivity disorder (ADHD). Its use in these circumstances should be **carefully monitored a child’s health care provider**.
- Melatonin should not be a substitute for a good bedtime routine. It should never be a “stand alone” solution and should *always* be accompanied by healthy sleep practices.
- There are **concerns about how it might affect a child’s growth and development, particularly during puberty**. Because melatonin is a hormone, it’s possible that melatonin supplements could affect hormonal development, including menstrual cycles, and overproduction of the hormone prolactin.
- Studies have also found that **morning sleepiness, drowsiness, headaches, agitation** and possible increased urination at night are the most common side effects that occur while taking melatonin.
- Melatonin **may interact with other medicines a child takes**.
- Parents/guardians need to talk to their child’s health care provider to see if there are issues that might be causing their child’s sleep difficulties. Interference by naptime might be caused by an ear infection, separation anxiety, teething, or other medical conditions.
- Melatonin dietary supplements can be made from animals or microorganisms, but most often they’re made synthetically.
- For information about poison risks, visit the Poison Control website or call 1-800-222-1222. If a child has collapsed, is having a seizure, trouble breathing or can’t be awakened, call 911.

## Tips About Melatonin

- Melatonin is **sold** as sleep aid. It can be **found over the counter as a dietary supplement**.
- Melatonin is **not regulated by the Food and Drug Administration (FDA)**. It is **not approved** as a sleep aid. Some melatonin supplements contain serotonin, cannabidiol (CBD) or varying amounts of melatonin.
- **Reports of poisonings in children from melatonin has rapidly increased.**
- **Two children have died** since 2021 from melatonin.
- Melatonin should **only be used after a discussion with a child’s healthcare provider and after healthy sleep habits that do not include medication have been tried.**
- If melatonin is going to be used, the **American Academy of Pediatrics (AAP) encourages parents and healthcare providers to make those decisions together—cautiously and carefully.**
- There are no specific guidelines on melatonin dosing for children, it can be confusing. Always have the parent/guardian talk to their child’s health care provider about the proper dose and timing of melatonin. Maintain **a note from a health care provider** before melatonin is given in a child care setting.
- The key to successful nap time is consistency with routines. Routines are great for children and well worth the time it takes to get them going.
- There may be a risk of **allergic reactions to melatonin** supplements.
- In general, melatonin **should not be given to healthy, typically developing children under age five.**

Sources: Healthychildren.org; JAMA Network (American Medical Association); U.S. Department of Health and Human Services; National Center for Complementary and Integrative Health; Boston’s Children’s Hospital; Harvard Medical School; Sleep Foundation

