Melatonin Liquid (Melatonin®)

Trade Name	Melatonin Tablets Circadin® Melatonin capsules Swanson
Class	'Sleep' Hormone
Mechanism of Action	Melatonin is a naturally occurring hormone that is produced by the pineal gland. It is used to improve quality of sleep by controlling circadian rhythm. In addition melatonin is also involved in thermoregulation, vasodilation and vasoconstriction, haematopoiesis and immune function[1].
Indication	Improvement of quality of sleep cycle.
Contraindications	Hypersentivity to melatonin or the suspending agent used to make the liquid oraplus/orasweet. Not recommended for use in patients with autoimmune disease due to lack of clinical data in this patient group. Avoid in patients with hepatic impairment due to risk of decreased clearance. Some reports suggest melatonin may affect seizure control use with caution in epileptic patients.
Supplied As	Melatonin Oral Liquid **1mg/mL** made by pharmacy on request
Dilution	Nil
Dosage	**0.5mg in the evening** is the starting dose used in neonates Dose can be increased to 2mg if required
Interval	Once daily
Administration	Give with a feed
Compatible with	Can be given with milk or water
Incompatible with	Do not mix in the same syringe as any other medicines.
Monitoring	Monitor for signs of unwanted sedation or alteration in seizure control.
Stability	Expiry is 30 days from day of manufacture.
Storage	Store oral liquid at room temperature.
Adverse Reactions…	Adverse effects of melatonin are considered to be fairly uncommon but have been reported to include: abdominal pain, dyspepsia, dry mouth, mouth ulceration, weight gain, hypertension, chest pain, malaise, dizziness, restlessness, nervousness, irritability, anxiety, migraine, proteinuria, glycosuria, pruritus, rash, dry skin; *rarely* thirst, flatulence, halitosis, salivation, vomiting, gastritis, hypertriglyceridaemia, palpitation, syncope, hot

… Adverse Reactions	flushes, aggression, impaired memory, restless legs syndrome, paraesthesia, mood changes, priapism, increased libido, prostatitis, polyuria, haematuria, leucopenia, thrombocytopenia, electrolyte disturbances, muscle spasm, arthritis, lacrimation, visual disturbances, nail disorder
Interactions	Increased sedation in combination with other sedative medication. In some patients caffeine may increase the concentration of melatonin and increase sedation, in others the stimulatory effect of caffeine may oppose the sleep inducing effect of melatonin. Citalopram, cimetidine and ciprofloxacin may increase melatonin concentrations. Carbamazepine and rifampicin may reduce melatonin concentrations.
Metabolism	Melatonin is predominantly metabolised by the enzyme CYP1A2 in the liver.
Comments	
References	1. https://bpac.org.nz/BPJ/2015/August/melatonin.aspx 2. www.nzfchildren.org.nz 3. *www.southworcsccg.nhs.uk/EasySiteWeb/GatewayLink.aspx?alId=41253* 4. *https://www.bacdis.org.uk/policy/documents/melatonin_scp_-_1301.pdf*5. 5. 5. *www.micromedexsolutions.com*
Updated By	A Lynn, B Robertshawe. August 2018 A Lynn, B Robertshawe October 2021 (routine review)