

Melatonin for Headache

Melatonin is a medication used to help prevent certain headache conditions. You need to take it every day. It is a naturally occurring hormone that helps regulate sleep. It is not licensed for use in headache. Sometimes a medicine is used “off-label”. This means it is not officially licensed for this condition, but there is good evidence that it is safe and effective. Melatonin is widely used by headache specialists and supported by clinical evidence.

Before Starting Melatonin:

Your prescriber will consider several factors before prescribing melatonin to make sure it’s safe and suitable for you.

Please tell your prescriber if you have:

- Liver problems
- Epilepsy
- Have rheumatoid arthritis, multiple sclerosis or lupus, or any other autoimmune condition
- Depression or mood disorders
- Sleep disorders that have not been assessed

Tell your doctor about **all other medications or supplements**, as melatonin can interact with some treatments.

How Do I Take Melatonin?

You will start on a low dose of melatonin, which will be gradually increased. This helps your body adjust and reduces the chance of side-effects.

The schedules below are a guide, but your prescriber may change it to suit your individual needs. Your prescriber will advise you on your starting dose. Your prescriber may choose either an immediate-release or modified-release form, based on their clinical experience, as both are similarly effective.

Melatonin is taken **once daily in the evening**, usually **within 2 hours of going to sleep**.

Dose increase schedule (2mg tablets)	
	Evening
For 3 days take:	2mg
For 3 days take:	4mg
For 3 days take:	6mg
For 3 days take:	8mg
Thereafter take:	10mg

If your symptoms improve but are not fully controlled, your prescriber may continue to increase the dose, if well-tolerated, **up to 20mg at night**. Response to medication is individual, although people find 10-20mg a day helpful.

This leaflet reflects a consensus of current clinical practice as agreed by the British Association for the Study of Headache (BASH) Council. It is intended to provide information to support clinical decision-making and does not constitute prescriptive guidance that must be followed in all cases. Clinicians should continue to exercise their own professional judgement and tailor management to the individual. The content reflects the collective experience of headache specialists across the UK, whose contributions are gratefully acknowledged, and recognises the ongoing evolution of best practice. This leaflet should be read in conjunction with the Summary of Product Characteristics and the patient information leaflet provided with all medication.

How Long Should I Try It?

- Continue increasing your melatonin dose following the advice above until your headache attacks resolve or you experience side effects that you cannot tolerate. Drowsiness or sedation may limit how quickly or how far the dose can be increased. Do not increase beyond the highest dose that you can tolerate.
- Your prescriber or GP will review your treatment regularly
- Melatonin can usually be stopped without gradual reduction
- If you are taking melatonin for cluster headache and it is working well (for example you have been free from cluster headaches for at least two weeks), you should discuss stopping melatonin with your prescriber. If you have chronic cluster headache, longer-term treatment may be recommended.

What Are the Possible Side-Effects?

Some people get side-effects. These usually get better as your body gets used to the medication.

This is not a full list of side-effects. Please read the information leaflet that comes with your medication for more details.

The most common side-effects are:

- Feeling sleepy or drowsy
- Dizziness
- Headache
- Feeling tired

Less commonly:

- Nausea
- Mood changes

If you feel tired or dizzy do not drive a car, ride a bike, or use tools or machinery

Pregnancy and Breastfeeding

If you are pregnant, planning a pregnancy, or breastfeeding, speak to your doctor, prescriber or pharmacist before taking melatonin.

Melatonin is **not usually recommended** during pregnancy or breastfeeding due to limited safety information.

- Do not take it if you are pregnant or trying for a baby
- Speak to your GP for advice about safe contraception and pregnancy planning

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