

## Guide to vaccines for children under two years of age who were born prematurely

Most vaccines are given as an injection in the thigh or upper arm. Rotavirus vaccine is given as drops to be swallowed.

| When              | Diseases protected against  | Vaccine given                            |
|-------------------|---|--|
| Two months old    | Diphtheria, tetanus, pertussis (whooping cough), polio and <i>Haemophilus influenzae</i> type b (Hib) | DTaP/IPV/Hib                             |
|                   | Pneumococcal (13 serotypes)   | Pneumococcal conjugate vaccination (PCV) |
|                   | Meningococcal group B (MenB) <sup>1</sup>   | MenB <sup>1</sup>                        |
|                   | Rotavirus gastroenteritis   | Rotavirus                                |
| Three months old  | Diphtheria, tetanus, pertussis, polio and Hib   | DTaP/IPV/Hib                             |
|                   | Rotavirus   | Rotavirus                                |
| Four months old   | Diphtheria, tetanus, pertussis, polio and Hib   | DTaP/IPV/Hib                             |
|                   | Pneumococcal (13 serotypes)   | PCV                                      |
|                   | MenB <sup>1</sup>   | MenB <sup>1</sup>                        |
| Twelve months old | Hib and MenC  | Hib/MenC                                 |
|                   | Pneumococcal  | PCV                                      |
|                   | Measles, mumps and rubella (German measles)   | MMR <sup>2</sup>                         |
|                   | MenB <sup>1</sup>   | MenB booster <sup>1</sup>                |

1 Only infants born on or after 1 May 2015 are eligible to receive the Men B vaccine, please check with your GP.

2 Contains porcine gelatine

## Further information

A guide to immunisations up to one year of age contains more detailed information about the routine childhood immunisation programme. Ask your health visitor for a copy if you were not given one soon after the birth of your baby.

From two years onwards, children born prematurely should continue to follow the normal schedule see the leaflets *Pre-school immunisations – a guide to vaccinations at three and four months of age* and *Immunisations at secondary school – your questions answered*.

You can also visit: [www.nhs.uk/vaccinations](http://www.nhs.uk/vaccinations)



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# A quick guide to childhood immunisations for the parents of premature babies

Includes MenB vaccine



'The two public health interventions that have had the greatest impact on the world's health are clean water and vaccines' World Health Organization

### What is immunisation and why is it needed?

Immunisation is a way of protecting ourselves from serious diseases. There are some diseases that can kill children or cause lasting damage to their health. Immunisations are given to prepare your child's immune system (its natural defence system) to fight off those diseases when your child comes into contact with them.

### When should my baby be immunised?

It is important that your baby has their immunisations at the right age (see the back cover). This will help to keep the risk of your baby catching a serious disease as low as possible. The risk of side effects from some vaccines may increase if you put them off.

### My baby was born early. When should premature babies have their first immunisation?

Premature babies have a higher risk of infection. They should be immunised in line with the recommended schedule from two months after birth, no matter how premature they were. This may happen whilst your baby is in hospital, you will need to discuss this with your doctor.

### What happens at the appointment?

The doctor or nurse will explain the immunisation process to you, and answer any questions you have. The vaccine is injected into the muscle of the thigh. If your baby was born very prematurely then he/she may still be in hospital when the first routine immunisation is due.

### Are there any reasons why my baby should not be immunised?

There are very few reasons why babies cannot be immunised. The vaccines should not be given to babies who have had:

- a confirmed anaphylactic reaction (severe allergic reaction) to a previous dose of the vaccine, or
- a confirmed anaphylactic reaction to neomycin, streptomycin, or polymyxin B (antibiotics used in vaccines).

If your baby's immune system is 'suppressed' (because they are having treatment for a serious condition such as a transplant or cancer), then your baby may not be able to have some vaccines. Your doctor or practice nurse should get advice from a specialist.

There are no other medical reasons why these vaccines should definitely not be given.

### Dealing with common side effects

There may be redness, soreness or tenderness where the injection is given and a few babies may develop a mild fever. Make sure you keep your child cool by:

- giving them plenty of fluids,
- giving infant paracetamol liquid – check the dose with your doctor, and
- making sure they don't have too many layers of clothes or blankets on.

### Do not give medicines that contain aspirin to children under 16.

If your child's face feels hot to the touch, or if your child becomes ill, trust your instincts and ask your doctor for advice. Or call the free **NHS helpline 111**.

For more information about side effects, see *A guide to immunisations up to one year of age*.

### Watch out for meningitis and septicaemia (blood poisoning)

Hib, MenB, MenC and pneumococcal vaccines protect against the most important bacteria causing meningitis and septicaemia in children and young people. However, as these diseases can be caused by many other bacteria and viruses, it is important to know the signs and symptoms of these illnesses.

Early symptoms of meningitis include fever, being irritable and restless, vomiting and refusing food – symptoms that are also common with colds and flu. But a baby with meningitis or septicaemia can become seriously ill within hours.

Look out for **one or more** of the following symptoms.

- A high-pitched, moaning cry.
- Irritable when picked up.
- Drowsy, difficult to wake.
- Stiff with jerky movements (convulsions/fits).
- Pale, blotchy skin or turning blue.
- Fever, with cold hands and feet.
- Red or purple spots that do not fade under pressure. (Do the glass test explained below.)

Press the side of a clear glass against the rash and see if the rash fades and loses colour. If it doesn't, contact your doctor immediately.



If your child becomes ill with **one or more** of the signs or symptoms described above, contact your doctor urgently.

If you are still worried after getting advice, trust your instincts and take your child to your nearest hospital with an emergency department.