



What vaccines are recommended now my child is **18 months?**

 SKAI : Sharing Knowledge About Immunisation

Three combined vaccines (Hib, MMRV and DTPa) are recommended for babies who are 18 months old. These vaccines strengthen children's immunity to seven diseases and protect them from one more (see next page). These vaccines are all given as needles, usually in your child's arms.

How will the vaccines affect my child?

The vaccines recommended for children who are 18 months old affect them in much the same way as the vaccines they usually get during their first year. The needles hurt a bit and most children cry for a few minutes afterwards. You can ask your doctor or nurse if they can give two of the needles at once so that the whole process is over just a little bit more quickly.

There are also some things you can do to help. There is a patch (EMLA®) you can buy at the chemist that you can use to numb your child's skin. You'll need to stick the patches on about an hour before you visit the doctor or nurse. You can also bring an activity or toy to distract your child during their vaccination. Encouraging young children to take deep breaths while they are getting needles - by blowing paper windmills or soap bubbles, or distracting them with a song, a video, or a game - actually reduces their pain. Cuddling a parent or carer, or breastfeeding during vaccinations (or straight afterwards) make them hurt less too¹.

Vaccines can make some children feel a little unwell for a day or two. The most common reactions to these vaccines are redness, soreness and swelling where the needle went in, not wanting to eat very much, fever, a slight headache, an achy feeling all over, or a slight swelling under their ears. These symptoms can make children grizzly or unsettled for a day or two. Some children get a small, hard bump (nodule) in one or both of the spots where the needles went in. These bumps don't usually hurt and go away by themselves after a few weeks. Some children get a fever and a slight rash about ten days after having the MMR vaccine. These reactions don't usually last more than a day or two, and they're a lot less serious than the diseases vaccinations protect children from².

What can I do if my child gets one of these reactions?

If your child feels hot, it can help to dress them in light (summer) clothes and give them extra water to drink or offer extra breastfeeds. If your child has a sore, red spot where the needle went in, it can help to put a cool cloth on it. Paracetamol (Panadol®, Dymadon®) can also help to ease a fever and relieve soreness. (Always follow the instructions on the packet.) Medical research has found that cuddles really do make children feel better. You can remind your doctor or nurse to give you a leaflet to help you remember these things today. **If you are worried about your child's reaction to a vaccination, you can get help from your doctor, or the nearest emergency department, or you can call Health Direct on 1800 222 222 at any time of the day or night.**

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Do the vaccines work?

The vaccines almost always prevent children from getting disease caused by Hib germs, measles, mumps, rubella, varicella (chickenpox), diphtheria, tetanus, and pertussis². Sometimes children who are vaccinated still catch one of these diseases, but they usually get much milder symptoms and recover more quickly than children who haven't had the vaccine.

What are the diseases these vaccines protect my child from?

One of the needles strengthens children's immunity to measles, mumps and rubella, and protects them from varicella. The other strengthens their immunity to diphtheria, tetanus and pertussis. All of these diseases are less common than they were before most children living in Australia were vaccinated, but are still common in other nearby countries. Children can still get these diseases in Australia, especially if they aren't vaccinated.

Are the diseases serious?

Hib bacteria (germs) cause a variety of serious illnesses, including swelling around the brain (meningitis), blood poisoning (sepsis), swelling in the throat (epiglottitis) and infection in the lungs (pneumonia). Babies can die from the diseases caused by Hib and those who survive often have brain damage. Hib spreads from person to person just like a common cold².

Measles is best known as a disease that causes a spotty rash. It spreads very easily, even before the rash starts, when a person who has caught it coughs or sneezes and another person is nearby. Measles can be very serious. It causes lung infections (pneumonia), blindness, bleeding (thrombocytopenia) and brain diseases (called meningitis and SSPE). SSPE is very rare, but children who get it do not survive. People who catch measles as children can also develop serious health issues later in life².

Mumps causes fever (high temperature), headache, sore throat, aching muscles and painful swellings in the neck, and sometimes the underarms or groin. Rarely, mumps can cause a brain infection (meningitis or encephalitis). It spreads like a common cold².

Rubella is sometimes called 'German measles'. It is usually a very mild illness, like a common cold, but it spreads very easily from one person to another. If a pregnant woman catches rubella, her baby will almost certainly be born deaf, blind or brain damaged. Vaccinating young children also protects mothers and babies from rubella².

Varicella is usually called chickenpox. It is a virus that spreads easily from person to person like a cold or flu. It causes fever and itchy red spots that become blisters. The condition is usually mild for children, but can be very serious for adults. Pregnant women who get chickenpox can get pneumonia, encephalitis (brain swelling), and hepatitis (liver disease). Their babies may be born underweight, with scars on their skin, or with arms, legs and brains that do not develop normally. These babies can also get a painful disease called shingles in the first few years of their lives. Vaccinating children against varicella helps protect mothers and babies².

Diphtheria is a serious disease that can cause a membrane (or skin) to grow over a child's throat and stop them from breathing. Diphtheria is very rare in Australia now, but the vaccine is still used to protect children from catching diphtheria from people who have travelled to places where it is more common².

Tetanus is sometimes called lockjaw. Tetanus affects all the muscles in the body, including the ones used for breathing. The germ that causes tetanus lives in the soil, which means children can get tetanus through a cut, a burn, a bite or even just a prick (from a nail or a thorn)².

Pertussis is usually called whooping cough. It spreads very easily from one person to another through the air when someone who has it coughs or sneezes. The germ that causes it irritates the airways causing coughing fits that can be very severe. Small babies can die from whooping cough².

I've heard vaccines can have serious side effects. Is this true?

Serious side effects can happen, but they are very, very rare. About one child out of every 3000 has febrile convulsions² (fits or seizures) about seven to 10 days after their first MMR vaccination. This can happen when a child's temperature (fever) goes up suddenly. Febrile convulsions happen more often when toddlers have an illness that gives them a fever (like a cold) than they do after vaccination. Once the child's temperature stops going up, the seizures stop. Children who have this reaction usually recover quickly.

About three to five in every one million (1,000,000) children who get the MMR vaccine have a reaction that results in bruising or bleeding (thrombocytopenia). It usually lasts for between one and six months and then gets better.

Fewer than one in one million (1,000,000) children have a serious allergic reaction (anaphylaxis) to one of the ingredients in one of the vaccines². If this happens, it usually happens before you and your child leave the clinic. Your doctor or nurse knows how to help children who have this reaction to recover very quickly. Anaphylaxis is frightening but extremely rare.

Side effects that last more than a few hours or a few days are extremely rare and happen for less than one in one million (1,000,000) vaccinated children². **If you are worried about your child, you can get help from your doctor or the nearest emergency department or call Health Direct on 1800 022 222.**

Where can I get more information?

If you would like more information about childhood vaccination or the diseases they protect against you can:

- go to the SKAI website, talkingaboutimmunisation.org
- call the **National Immunisation Hotline on 1800 671 811**
- or you can write question in the space below and ask your doctor or nurse when you see them.

What is next?

When your child is four years old a combined DTPa/IPV vaccine is recommended to strengthen their immunity to diphtheria, tetanus, pertussis and polio. It is given as a needle in your child's arm.

What questions would you like answered before getting your child's needles?

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I have no questions

References

1. Taddio A, et al. Reducing pain during vaccine injections: clinical practice guideline. Canadian Medical Association Journal 2015;187:975-982.
2. Australian Immunisation Handbook 10th Edition (Updated June 2015). Australian Government Department of Health: Canberra.

This information sheet was written by a group of researchers called the SKAI Collaboration. It was developed by Nina Berry PhD and Julie Leask PhD from the University of Sydney, Margie Danchin PhD from the University of Melbourne, Tom Snelling PhD from the Telethon Kids Institute, and Kristine Macartney MD and Melina Georgousakis PhD from NCIRS. The project is funded by the Australian Government Department of Health.