

Immunisation for babies in intensive and special care

The Royal Women's Hospital Fact Sheet / www.thewomens.org.au



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Is it safe for my baby to be immunised?

Yes. All of the routine immunisations are safe for premature and low birth weight babies. Reactions to immunisation may occur, but the risk is similar for *all* infants regardless of their birth weight, their gestation or how old they are when they receive the immunisation.

Why should I immunise my premature baby?

Premature babies are at *higher* risk of developing infections compared to babies born at term. Preterm infants are also *more likely* to suffer serious complications from these infections.

Fortunately, immunisations protect your baby from many childhood infections including diphtheria, tetanus, pertussis (whooping cough), polio, measles, hepatitis B, rotavirus and some forms of meningitis and pneumonia.

When should my baby be immunised?

It is recommended that all babies, whether premature or term, be immunised according to the **Australian National Immunisation Program Schedule**. That is at birth, then at two months, four months and six months of age (from birth).

Immunisations for all babies

Vaccine	Protects against
HB Vax II Paediatric	Hepatitis B which can cause chronic liver disease
Prevenar	Streptococcus pneumoniae which causes meningitis, pneumonia and septicaemia
Infanrix Hexa	Diphtheria and tetanus and pertussis and polio and hepatitis B and haemophilus influenza type B (Hib)
Rotateq	Rotavirus, the leading cause of gastroenteritis and diarrhoea in children
Hibernix	Haemophilus influenza type B (Hib), which can cause meningitis and septicaemia
MMR vaccine	Measles and mumps and rubella
Neisvac C	Meningococcus type C which can cause meningitis and septicaemia

Are there any differences between the preterm immunisation schedule and the immunisation schedule for babies born at term?

Your premature baby will receive the same vaccine dose as a term baby. Also, some premature babies need additional immunisations to protect against childhood pneumococcal disease and hepatitis B. These are given according to the schedule on page 2 (see table *).

1. Hepatitis B vaccination

If your baby was born before 32 weeks gestation or below 2000 grams at birth an extra hepatitis B immunisation at 12 months of age is advised.

2. Pneumococcal vaccination

If your baby was born before 28 weeks gestation an extra pneumococcal vaccination at 12 months and again at 4-5 years of age is advised.

Why is the preterm immunisation schedule different to the immunisation schedule for babies born at term?

A baby's immune system develops throughout pregnancy, but mostly in the third trimester. The immune system of your premature baby is therefore not as mature as a full term baby, and immunisations may not last as long. For this reason, extra doses of some immunisations are recommended for premature babies.

What if my baby is immunised late?

Immunisations are safe to be given one month apart, so try to arrange for the next immunisation sooner in order to keep up with the recommended schedule.

Are there extra immunisations that may help my baby?

Your baby: Influenza vaccine

This is recommended for all premature babies who should receive two half doses, one month apart.

The influenza vaccine is funded by the Australian government only for babies and children with chronic lung disease. Unfunded the vaccination will cost you \$17. Influenza can be given to babies as young as six months of age (after birth).

The influenza vaccine is updated yearly and an annual influenza vaccine is recommended each March and April.

Parents and carers: Boostrix and influenza vaccines

Parents of premature babies should receive a single dose of Boostrix (DTPa) which protects against Pertussis (whooping cough), as well as yearly influenza (flu) vaccination. Parents immunised against these diseases are less likely to pass them on to their babies and children. Your GP will be able to provide these.

What are the side effects of immunisations?

Reactions to immunisation are common, usually mild, occur soon after immunisation, and are short-lasting; including soreness, redness and swelling at an injection site for one to two days. Infants may be irritable, crying and unsettled for 24 hours following immunisation. Treatment is usually not required.

Occasionally, premature babies immunised in hospital may also have some apnoea. For this reason, your baby will be monitored for 48 hours after the immunisations. Severe reactions are extremely rare in premature babies.

For more information

Your baby's doctor, nurse or care manager are available to answer your questions

The Victorian Government immunisation website
www.health.vic.gov.au/immunisation

The National Centre for Immunisation Research and Surveillance, www.ncirs.usyd.edu.au

The Royal Children's Hospital Immunisation Service
 Telephone: (03) 9345 5522. For their guidelines and immunisation schedule look under clinical resources at <http://www.rch.org.au/genmed>

References

The Australian Immunisation Handbook, 9th edition 2008 available on their website: www.immunise.health.gov.au

The Royal Women's Hospital

Newborn Intensive & Special Care
 Cnr Flemington Rd and Grattan St
 Parkville VIC 3052
 Phone: (03) 8345-3400
 Website: www.thewomens.org.au

The Royal Women's Hospital Immunisation schedule

National Immunisation Schedule for infants born at term and differences* for preterm and low birth weight infants	Vaccine	Age				
		At Birth	2 mths	4 mths	6mths	12 mths
	HB Vax II paediatric	√				√*
	Infanrix hexa		√	√	√	
	Pneumococcal (Prevenar)		√	√	√	√*
	Oral Rotavirus		√	√	√	
	Hib (Hiberix)					√
	MMR (Priorix)					√
	Meningo C (Neisvac C)					√
Optional immunisation	Influenza Vaccine				√	

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