



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 babies 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. Premature babies 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 2 months (can be given from 6 weeks), 4 months, 6 months (from birth) and beyond.

Immunisations for all babies

Vaccine	Protects against
H-B-Vax II Paediatric® or Engerix-B Paediatric	Hepatitis B which can cause chronic liver disease
Prevenar 13®	Streptococcus pneumoniae which causes meningitis, pneumonia and septicaemia
Infanrix Hexa®	Diphtheria, tetanus, pertussis, polio, hepatitis B, and haemophilus influenza type B (Hib)
Rotarix®	Rotavirus, the leading cause of gastroenteritis and diarrhoea in children
ActHIB®	Haemophilus influenza type B (Hib), which can cause meningitis and septicaemia
M-M-R II® or Priorix®	Measles and mumps and rubella
Nimenrix®	Meningococcus types A, C, W and Y

Note: An additional vaccine to protect against meningococcus type B is recommended for all Aboriginal and Torres Strait Islander children.

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

Your premature baby will receive the same vaccine dose as a term baby. Some premature babies need additional immunisations to protect against childhood pneumococcal disease and hepatitis B. These are given according to the schedule on page 3 (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 or is at risk for pneumococcal disease, an extra pneumococcal vaccination is given at 6 months and 2 doses of a different type of pneumococcal vaccination (Pneumovax 23) are given at 4 years of age and at least 5 years after that.

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.

What extra immunisations may help my baby?

Your baby: Influenza vaccine

This is recommended for all premature babies. They should receive two doses for the first time (one month apart) then one dose subsequent years

The influenza vaccine is funded by the Australian government for babies and children until the age of 5 years. 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 or April.

Parents and carers: Boostrix, influenza and Covid-19 vaccines

Parents of premature babies should receive a single dose of Boostrix (DTPa) which protects against Pertussis (whooping cough), as well as a 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.

Parents and carers are advised to receive Covid-19 vaccines as per Department of Health recommendation to protect themselves and their babies.

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. Babies 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.

Newborn Intensive Care Unit

The Royal Women's Hospital
Cnr Flemington Rd and Grattan St Parkville VIC 3052
T: (03) 8345 3400

Special Care Nursery

The Women's at Sandringham
193 Bluff Rd Sandringham VIC 3191
T: (03) 9076 1572

The Victorian Government immunisation website

www.health.vic.gov.au/immunisation

The National Centre for Immunisation Research and Surveillance

www.ncirs.org.au

The Royal Children's Hospital Immunisation Service

T: (03) 9345 5522.

For their guidelines and immunisation schedule look at: www.rch.org.au/immunisation

National Immunisation Schedule for babies born at term and differences for preterm and low birth weight babies

Vaccine	At birth	2 mths (can be at given 6 weeks of age)	4 mths	6 mths	12 mths	18 mths	4 years
Hepatitis B (H-B-Vax® II Paediatric or Engerix-B® Paediatric)	√				‡		
DTP, hepatitis B, polio, Hib (Infanrix® hexa)		√	√	√			
Pneumococcal (Prevenar 13®)		√	√	‡	√		
Oral Rotavirus (Rotarix®)		√	√				
Meningococcal B (Bexsero®)		√#	√#	√#	√#		
Hib (ActHIB®)						√	
MMR (M-M-R II or Priorix®)					√		
Meningococcal ACWY (Nimenrix®)					√		
MMRV (Priorix-Tetra® or ProQuad®)						√	
DTP (Infanrix®) or Tripacel®)						√	
DTP, polio (Infanrix IPV® or Quadracel®)							√

Additional recommended immunisation

Vaccine	At birth	2 mths (can be at given 6 weeks of age)	4 mths	6 mths	12 mths	18 mths	4 years
Influenza				√*			
Pneumococcal (Pneumovax 23®)							‡

DTP = diphtheria, tetanus, pertussis; HiB = Haemophilus influenza type B; MMR= measles, mumps, rubella; MMRV = measles, mumps, rubella, varicella

* and a second dose 4 weeks later for the first time only, then one dose every year after that.

‡ for preterm babies with specified risk factors (as described in this factsheet)

for all Aboriginal and Torres Strait Islander children

Disclaimer: This fact sheet provides general information only. For specific advice about your or your baby's healthcare needs, you should seek advice from your health professional. The Royal Women's Hospital does not accept any responsibility for loss or damage arising from your reliance on this fact sheet instead of seeing a health professional. If you or your baby require urgent medical attention, please contact your nearest emergency department. © The Royal Women's Hospital 2022