Teenage Immunisations

Introduction

This guide is for teenagers aged 12 to 16, and their parents or guardians. It explains:

- the immunisations that are given to young people, usually when they are still at school
- why these immunisations are needed, and
- what side effects they might have.

The guide also answers some of the most common questions about these immunisations. In particular, it describes the Td/IPV vaccine that boosts the protection you got as a child against tetanus (T), diphtheria (d) and polio (IPV – inactivated polio vaccine). It also describes the Men ACWY vaccine that is being introduced as a booster dose in 2015/16.

If you have any questions or want more information, talk to your doctor, school nurse or the immunisation team. Details of other sources of information are given at the bottom of the page overleaf.

Your questions answered

Why do we need immunisation?

The national immunisation programme has meant that dangerous diseases, such as polio, have disappeared in the UK. But these diseases could come back – they are still around in many countries throughout the world. That's why it's so important for you to protect yourself. In the UK, diseases are kept at bay by the high immunisation rates.

How do vaccines work?

A vaccine contains a small part of the bacterium or virus that causes a disease, or tiny amounts of the chemicals the bacterium produces. Vaccines work by causing the body's immune system to make antibodies (substances to fight infections and diseases). So if you come into contact with the infection, the antibodies will recognise it and protect you.

Tetanus, diphtheria, polio and meningitis

What is tetanus?

Tetanus is a painful disease affecting the nervous system which can lead to muscle spasms, cause breathing problems and can kill. It is caused when germs found in the soil and manure get into the body through open cuts or burns. Tetanus cannot be passed from person to person.

What is diphtheria?

Diphtheria is a serious disease that usually begins with a sore throat and can quickly cause breathing problems. It can damage the heart and nervous system, and in severe cases, it can kill.

What is polio?

Polio is a virus that attacks the nervous system which can cause permanent paralysis of muscles. If it affects the chest muscles or the brain, polio can kill.

What is meningitis?

Meningitis is inflammation of the lining of the brain, and can be the result of infection with a virus, bacteria, or other disease-causing organism, or as a result of injury. As well as meningitis, meningococcal infection can lead to septicaemia (blood poisoning), which can be very serious, especially if not diagnosed early, and can lead to death. See section on: **Knowing about meningitis and septicaemia**

If I was immunised against tetanus, diphtheria and polio as a child, am I still protected?

You may still have some protection, but you need this booster to complete your routine immunisations and give you longer term protection.

How many boosters do I need to have?

You need a total of five doses of tetanus, diphtheria and polio vaccines to build up and keep your immunity. You should have had:

- the first three doses as a baby
- the fourth dose when you were between three and five years old, before you started school, and
- the fifth dose is in Year 9/10

Meningitis ACWY vaccine is a one off dose given between the ages of 13 to 18 to give protection against four strains of meningitis.

If you think you have missed any of your doses, talk to the school nurse or your doctor.

Will I need more boosters in the future?

You will probably not need further boosters of these vaccines. However, you may need extra doses of some vaccines if you are visiting certain countries. Check with the nurse at your surgery.

How will I be given the Td/IPV and Men ACWY boosters?

You will have two injections - one in each upper arm, 2.5cm apart in the same arm. Nobody likes injections, but it is very quick. The needles used are small and you should feel only a tiny pinprick. If you are a bit nervous about having the injection, tell the nurse before you have it.

Are there any reasons why I should not be immunised?

There are very few teenagers who cannot have the Td/IPV and Men ACWY vaccines.

You should not have the vaccine if you have had:

- a confirmed anaphylactic reaction to a previous vaccine, or
- a confirmed anaphylactic reaction to neomycin, streptomycin or polymyxin B (antibiotics that may be added to vaccines in very tiny amounts). There are no other medical reasons why these vaccines should not be given. If you are worried, talk to the nurse or doctor.

What if I am ill on the day of the appointment?

If you have a minor illness without a fever, such as a cold, you should have the immunisation. If you are ill with a fever, put the immunisation off until you have recovered. This is to avoid the fever being associated with the vaccine and the vaccine increasing the fever you already have. If you have:

• had a bleeding disorder, or

had convulsions (fits) not associated with fever

Speak to your doctor or nurse before having the immunisation.

Are there any side effects?

It is common to get some swelling, redness or tenderness where you have the injection. Sometimes a small painless lump develops, but this usually disappears in a few weeks. More serious effects are rare but include fever, headache, dizziness, feeling sick and swollen glands. If you feel unwell after the immunisation, take paracetamol or ibuprofen. Read the instructions on the bottle

carefully and take the correct dose for your age. If necessary, take a second dose four to six hours later. If your temperature is still high after the second dose, speak to your GP or call **NHS 111.** It is not recommended that these medicines are given before or after vaccination in anticipation of a fever.

Remember, if you are under 16 you should not take medicines that contain aspirin.

Does this vaccine contain thiomersal?

No. These boosters vaccine do not contain thiomersal. Thiomersal is a mercury based preservative. For more information about thiomersal, see www.nhs.uk/vaccinations

Are these only immunisations I need to have now?

When you are having your Td/IPV and Men ACWY boosters, it's a good idea to check with the nurse or doctor that all your other immunisations are up to date (for example, MMR (measles, mumps and rubella), and, for some people, hepatitis B).

It's particularly important to check that your MMR immunisation is up to date because some teenagers have not had two doses of MMR

If you have never had the MMR vaccine, you should have one dose now and another one month later. You may experience side effects from the MMR vaccine for up to six weeks after the immunisation. The symptoms are similar to those caused by the diseases, but much milder. Speak to your school nurse or doctor if you are at all concerned.

You should also talk to your doctor or school nurse if you are 'immunosuppressed' because you are having treatment for a serious condition such as a transplant or cancer, or you have a condition that affects your immune system, such as severe primary immunodeficiency. The doctor or nurse will get specialist advice on using live vaccines.

Knowing about meningitis and septicaemia

Meningitis is infection of the lining of the brain. The same germs that cause meningitis can cause septicaemia (blood poisoning). Meningitis and septicaemia are both very serious – they can cause permanent disability and death and the signs can come on quickly – so you must get treatment straight away. If you haven't been immunised against meningitis ACWY, you should have this done now.

What do I look for?

Early symptoms of meningitis and septicaemia are mild and similar to those you get with flu (such as feeling hot, being sick, and pain in the back or joints). However, for meningitis, the most important signs to look out for are:

a stiff neck

- a very bad headache (this alone is not a reason to get medical help)
- lights hurting your eyes
- vomiting
- a fever
- drowsy, less responsive, confused, and
 red or purple spots that don't fade under pressure (do the glass test explained below).

For septicaemia, the most important signs to look out for are:

- sleepiness, less responsive or confused (a late sign in septicaemia)
 severe pains and aches in the arms, legs and joints
- very cold hands and feet
- shivering
- rapid breathing
- red or purple spots that don't fade under pressure (do the glass test explained below)
- vomiting
- a fever, and
- diarrhoea and stomach cramps.

What should I do?

If you get one or more of the symptoms above, get help urgently. If you get treatment for meningitis and septicaemia quickly, you stand the best chance of making a full recovery. If you can't get in touch with your doctor, or are still worried after getting advice, trust your own instincts and go to the emergency department of your nearest hospital or ask a friend to take you. The 'glass test'

Press the side of a clear drinking glass firmly against the rash so you can see if the rash fades and loses colour under pressure. If it doesn't change colour, contact your doctor immediately.

Where can I get more information?

School Nursing Immunisation Team 0161 366 2139.

For general information about teenage vaccinations, visit the website at www.nhs.uk/vaccinations or call NHS 111

For more information on meningitis

The Meningitis Research Foundation - Free helpline 080 8800 3344 (9am to 10pm weekdays, 10am to 8pm weekends and holidays) www.meningitis.org

Meningitis Trust - Free 24 hour helpline 0808 80 10 388 www.meningitis-trust.org Meningitis UK - 0117 947 6320 www.meningitisuk.org