



What vaccines are recommended now my child is

12 months?

Now that your child is 12 months old, three age-specific vaccines are recommended (4vMenCV, 13vPCV, and MMR). These three vaccines protect children from five diseases (see next page). It is also recommended that your child gets an influenza vaccine every year before the influenza season. Influenza vaccines are free and can be given at the same time as age-specific vaccines. These vaccines are all given as needles, usually in your child's arms.

How will the vaccines affect my child?

Needles hurt a bit and most children cry for a few minutes afterwards. Your doctor or nurse may be able to give both needles at once.

There are also some things you can do to help too. Sugar is known to reduce pain for young children so you can give your child a sweetened drink or a lolly just before they get their needles. You can bring an activity or toy to distract your child or encourage them to take deep breaths during the visit. Hand-held video games, blowing paper windmills or bubble mix, comforting cuddles and breastfeeding during vaccination or straight after are also known to help reduce pain.¹

These vaccines may make children feel a little unwell for a few days. They may feel tired and grizzly or unsettled, and may sleep a little more than they usually do. 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, a rash, nausea (feeling sick), or a slight swelling under their ears. 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 from.²

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 baby'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 022 222 at any time of the day or night.**

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Do the vaccines work?

The vaccines almost always prevent children from getting the diseases described below. 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?

The three age-specific vaccines recommended for your child at 12 months of age protect your child from five diseases. The 4vMenCV vaccine protects against meningococcal disease caused by four types of meningococcus (A, C, W, and Y). The 13vPCV protects your child from pneumococcal disease caused by 13 types of pneumococcus. And the combined MMR vaccine protects your child from measles, mumps and rubella. All of these diseases are much less common than they were before most children living in Australia were vaccinated but are still common in other countries around us. Children can still get these diseases in Australia, especially if they aren't vaccinated. An influenza vaccine is the best way to protect your child against influenza, sometimes called 'the flu'.

Are the diseases serious?

Meningococcal disease is caused by bacteria (germs) called meningococcus. This disease can cause brain swelling (meningitis) and blood poisoning (sepsis). It spreads from person to person just like a cold. Children who catch meningococcal disease often have parts of their hands, toes, arms or legs amputated (cut off) to save their lives. Children who survive Hib meningitis often have brain damage.²

Pneumococcal disease is caused by germs (bacteria) that can cause swelling around the brain (meningitis), infection in the lungs (pneumonia), ear infections (otitis media) that can damage hearing, and other serious diseases. Children can catch it from each other just like they catch colds.²

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 life.²

Mumps causes fever, headache, sore throat, aching muscles and painful swellings in the neck, and sometimes the underarms or groin. Rarely, it can cause a brain infection or swelling (meningitis or encephalitis). It spreads like a common cold.²

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 rubella.²

Influenza is an illness caused by influenza viruses. Although some of the symptoms are similar, influenza usually much worse and lasts longer than the common cold. Even if your child is usually healthy, influenza can make them very unwell. Influenza can lead to serious conditions like severe lung infection (pneumonia) or swelling of the brain (encephalitis). Babies and children under five years are more likely to get severe influenza and need treatment in hospital.²

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

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(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 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 vaccines.² 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 children.² **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 children from you can:

- go to the SKAI website, talkingaboutimmunisation.org.au
- or you can write your questions in the space below and ask your doctor or nurse when you see them.

What is next?

When your child is 18 months old, three age-specific are recommended. One is a combined MMRV vaccine to strengthen their immunity to measles, mumps and rubella, and to protect them from varicella (chickenpox). The other two vaccines (DTPa and Hib) strengthen their immunity against diphtheria, tetanus, pertussis and Hib.

If your child has had an influenza vaccine for the first time, they will need a second dose four weeks later to strengthen their immunity. The second year your child gets an influenza vaccine (and every year after that), they will only need one dose. It is recommended that your child gets an influenza vaccine every year before the influenza season.

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 Technical Advisory Group on Immunisation (ATAGI). Australian Immunisation Handbook, Australian Government Department of Health, Canberra, 2018, immunisationhandbook.health.gov.au.

This information sheet was written by a group of researchers called the SKAI Collaboration. It was developed by Nina Chad 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.

12 months | SKAI Info sheet: July 2020



Australian Government
Department of Health