Protect your baby against TB





The BCG **vaccine** This leaflet is about the Bacillus Calmette-Guérin (BCG) vaccine, which is offered to help protect your baby against tuberculosis (TB).

• All vaccines in the Immunisation Programme are provided free in Scotland by the NHS.



The BCG vaccine helps your baby develop protection (immunity) against TB in case they ever come into contact with it.

the benefits of **immunisation**

The World Health Organization states that the two things that have had the biggest impact on the world's health are clean water and vaccines. Your child should get all of the vaccines offered as they are all important to protect against different types of diseases.

Protects your family and the rest of your community.

For more information or advice, speak to your health professional or visit **www.nhsinform.scot/bcg**

What is the BCG vaccine?

The BCG vaccine contains a weakened form of the bacteria (germs) that cause TB. Because it is weakened, the vaccine does not actually cause TB. It helps your baby develop protection (immunity) against the disease in case they ever come into contact with it.

Who is offered the vaccine?

The BCG vaccine is offered to babies who are more likely to come into contact with someone with TB. This is because they either lived in an area with high rates of TB, or their parents or grandparents came from a country with high rates of TB.

If you answer 'Yes' to any of the questions below, your baby may need a BCG vaccine if they have not already had one.

- Are you, your family, your partner or their family from a country with a high rate of TB? These include countries in south-east Asia, sub-Saharan Africa and some countries in eastern Europe. (If in doubt, talk to a health professional or visit **www.nhsinform.scot/bcg**)
- Will you and your baby be going to live for more than three months, or travel frequently in, one of these countries in the near future?
- Is there anyone in your house, or anyone else who is likely to have prolonged contact with your baby, who either has TB (or has had it in the past) or comes from one of these countries?

Young babies are vulnerable

to serious diseases. It's important to make sure they're protected as early as possible through immunisation.

What is TB?

TB is a serious infectious disease. TB can progress quickly, more so in young children and babies, and can lead to TB meningitis (swelling of the lining of the brain) in babies.

In young people and adults it usually affects the lungs, although it can also affect the lymph glands, brain, joints, kidneys or bones. Most people in the UK recover fully after treatment, but this usually takes several months.

How is TB spread?

TB is usually spread when people with infectious TB in their lungs cough or sneeze. However, it usually takes close contact with an infectious person over a long period of time to catch the disease.

Not everyone with TB in their lungs is infectious. Once they're taking the right treatment, most people will become non-infectious after about two weeks.

The vaccine is usually offered soon after birth, either while your baby is still in hospital or soon after you go back home. However, the vaccine can be given at any time.

How common is TB?

TB is no longer a common disease in the UK. In Scotland, less than 300 new cases of TB are diagnosed every year. Most of these cases occur in adults over the age of 25. However, cases of TB can be found all over the world, with some countries experiencing high rates of TB. For a list of countries with a high rate of TB ask the health professional who gave you this leaflet or visit **www.nhsinform.scot/bcg**

The risk of getting TB is higher in people who have lived or worked in countries with high rates of TB.

What are the symptoms of TB?

TB can attack almost any part of the body, so the symptoms can be different. The symptoms may also be different in a baby from those in an adult. However, as TB is infectious, it's important that you can recognise the signs and symptoms.

You should get medical help if you, your baby or any other member of your family has any of the following:

- a persistent cough for more than three weeks
- lack of appetite and weight loss
- fever and/or night sweats
- extreme tiredness and fatigue
- new swellings that have not gone away after a few weeks
- coughing up blood.

How is the vaccine given?

While you hold your baby comfortably on your knee, the health professional will inject the vaccine just under the skin of the upper part of your baby's left arm.

Are there any side effects?

Immediately after the vaccine is given, a raised blister will appear. This shows that the vaccine has been given properly. Your health professional will be happy to answer any questions you have before your child gets their vaccines.

Within two to six weeks, a small spot will appear. This may be quite sore for a few days, but it will gradually get better if you do not cover it. It may leave a small scar.

Your baby may develop a small sore where the vaccine was given, this is a normal reaction. It's better to leave the sore uncovered if possible and it's fine to leave it uncovered when bathing. If you do need to cover it, use a dry dressing – never a waterproof plaster or creams – until a scab forms. This sore may take several months to heal completely.

If you're worried, or you think the sore has become infected, see your GP.

Are there any reasons why my baby should not have the BCG vaccine?

The BCG vaccine should be delayed if your baby has a high fever. The BCG vaccine may also be delayed in babies born to mothers who received treatment during pregnancy or breastfeeding that may have weakened their immune system, such as anti-TNF therapy (please consult your own GP practice for further advice if this applies to you).

The BCG vaccine should not be given if your baby:

- has a weak immune system due to any disease or treatment
- is HIV positive
- is suffering from a generalised septic skin condition babies with eczema can be given the vaccine in an area without skin lesions (broken skin)
- is less than two years of age and lives in a household where an active TB case is suspected or confirmed (your baby can receive the BCG vaccine if testing confirms they are not already infected with TB)
- has had a confirmed anaphylactic reaction (severe allergic reaction) to an ingredient of the vaccine.



Your child may feel some discomfort and be upset for a few minutes, but they will usually settle down after a cuddle.

Is the vaccine safe?

Before they're allowed to be used, all medicines (including vaccines) are tested for safety and effectiveness. Once they're in use, the safety of vaccines continues to be monitored.

Do I need to know anything else?

Your baby can start their routine childhood immunisations, including diphtheria, tetanus, pertussis (whooping cough), pneumococcal, polio, Haemophilus influenzae type b (Hib), hepatitis B, rotavirus and meningococcal B (MenB) from 2 months of age, regardless of when they have their BCG vaccine.

You do not need to wait any extra time before starting their routine childhood immunisations (see inside back cover).

However, your baby should not be given another vaccine in the same arm as the BCG vaccine for at least three months afterwards, otherwise their glands may swell.

Make sure that there's a record of the BCG vaccine in your child's personal child health record (Red Book).



How the NHS handles your information

You have rights in relation to the access and the use of your personal health information. For more information about your rights or how the NHS uses your personal information in accordance with the General Data Protection Regulation (GDPR), you can phone the NHS inform helpline free on **0800 22 44 88** (textphone **18001 0800 22 44 88**) and ask to speak to a healthcare adviser or visit **www.nhsinform.scot/confidentiality** and/or **www.nhsinform.scot/data-protection**

The timetable on the following page is subject to change. Visit **www.nhsinform.scot/immunisation** for the most up-to-date information.

When to immunise	Diseases protected against	Vaccine given
8 weeks old	 Diphtheria, tetanus, pertussis (whooping cough), polio, Haemophilus influenzae type b (Hib) and hepatitis B (HepB) 	• Six-in-one (DTaP/IPV/Hib/HepB)
	• Rotavirus	Rotavirus
	• Meningitis B (MenB)	• MenB
12 weeks old	 Diphtheria, tetanus, whooping cough, polio, Hib and HepB 	• Six-in-one (DTaP/IPV/Hib/HepB)
	Pneumococcal disease	 Pneumococcal
	Rotavirus	Rotavirus
16 weeks old	 Diphtheria, tetanus, whooping cough, polio, Hib and HepB 	 Six-in-one (DTaP/IPV/Hib/HepB)
	• Meningitis B (MenB)	• MenB
Between 12 and 13 months old – within a month of the first birthday	• Hib and meningococcal group C	• Hib/MenC
	Pneumococcal disease	 Pneumococcal
	 Measles, mumps and rubella (German measles) 	• MMR
	• Meningitis B (MenB)	• MenB
Every year from age 2 until the end of primary school	• Flu	• Flu
3 years 4 months old or soon after	 Diphtheria, tetanus, whooping cough and polio 	• Four-in-one (DTaP/IPV)
	 Measles, mumps and rubella (German measles) 	 MMR (check first dose has been given)
11 to 13 years old	 Cancers caused by human papillomavirus (HPV) including cervical cancer (in women) and some head and neck, and anogenital cancers (in men and women) 	• HPV
Around 14 years old	• Tetanus, diphtheria and polio	Td/IPV, and check MMR status
	Meningococcal groups ACWY	 MenACWY



Other formats available at:



Published by Public Health Scotland 1 South Gyle Crescent Edinburgh EH12 9EB © Public Health Scotland 2020 All rights reserved.

Established on 1 April 2020, Public Health Scotland is Scotland's national public agency for improving and protecting the health and wellbeing of Scotland's people.



www.publichealthscotland.scot