Immunisation
the safest way to protect your child

BCG and your baby
Protecting babies against TB
This leaflet is about the BCG (Bacillus Calmette-Guerin) vaccination that is being offered to protect your baby against tuberculosis (TB).

What is BCG vaccine?
BCG vaccine contains a weakened form of the bacteria (germs) that cause TB. Because it is weakened it doesn’t actually cause TB, but it helps your baby develop protection (immunity) against the disease in case he or she ever comes into contact with it.

What is TB?
TB is a serious infectious disease that can lead to TB meningitis (swelling of the lining of the brain) in babies. In young people and adults it usually affects the lungs, but it can also affect the glands, brain or bones. Treatment for TB takes several months. While most people in this country recover fully after treatment, TB meningitis can be fatal or cause severe disability.

How is TB caught?
You can only catch TB from someone whose lungs or throat are already infected and who is coughing. When they cough, a spray of tiny droplets is produced that contain the germs. If you breathe in the droplets you too can catch the disease. Although these droplets can stay in the air for quite long periods of time, in general, it takes close and lengthy contact with an infected person for the disease to spread.
How common is TB?
In the UK in the 1950s, there were over 50,000 new cases of TB every year. Today, this number has dropped to about 8,000 new cases a year (of which approximately 65 are from Northern Ireland) but this is still an increase from around 5,500 new cases a year in the early 1990s. So, while it is unlikely that you will get infected, everybody should be aware of the symptoms of TB. This is especially important because TB is a widespread disease worldwide and is increasing in many areas (see pages 6 and 7). With greater numbers of people travelling around the world, the risk increases that people who have lived or worked in countries with high rates of TB will come into contact with the disease or bring it into this country.

What are the symptoms of TB?
TB can affect practically any part of the body, so the symptoms vary and the signs of the disease in a baby may be different from those in an adult. However, as TB is infectious, it is important that you can recognise the disease in someone else. You should contact a doctor if your baby, or any other member of your family, or a friend has any of the following:

- a cough that lasts for more than three weeks
- a fever
- sweating, especially at night
- weight loss
- feeling tired
- coughing up blood.

Why is my baby being offered BCG?
In the UK, like many other countries, BCG is offered to babies who are more likely than the general population to come into contact with someone with TB. This is because they either live in an area with high rates of TB or their parents or grandparents came from a country with high rates of TB (see pages 6 and 7). The vaccination is free and is usually offered after the birth either in hospital or when you return home.
How is my baby immunised?
Your baby will be given the BCG vaccination in the upper part of the left arm.

Are there any side effects?
Immediately after the injection, a raised blister will appear. This shows that the injection has been given properly.

Within two to six weeks of the injection, a small spot will appear. This may be quite sore for a few days, but it should gradually heal if you don’t cover it. It may leave a small scar.

Occasionally, your baby may develop a shallow sore where they had the injection. If this is oozing fluid and needs to be covered, use a dry dressing – never a plaster – until a scab forms. This sore may take as long as several months to heal.

If you are worried or you think the sore has become infected, see your doctor or nurse.

Very rarely, a vaccine may cause an allergic reaction, such as a rash or itching affecting some or all of the body. Even more rarely, children may have a severe reaction to the immunisation, causing difficulty breathing and possibly collapse. This is called anaphylaxis. A recent study has shown that one case of anaphylaxis is reported in about half a million immunisations given. Although allergic reactions can be worrying, treatment leads to a rapid and full recovery.

Are there any reasons why my baby shouldn’t have the BCG vaccination?
The injection should not be given or should be delayed if your baby:

- has a high fever
- is having treatment for cancer or other serious conditions that weaken the immune system
- may be HIV positive (ie if the mother is HIV positive)
- is suffering from a generalised skin condition, eg eczema
- will be living in a household with someone with suspected or confirmed TB that hasn’t yet been treated. In this case, the BCG vaccination may need to be postponed – this will be discussed with you.
**Do I need to know anything else?**
Your baby can start their routine primary immunisations at two months of age regardless of when they have their BCG.

However, you should make sure that your baby is not given another injection in the same limb as the BCG for at least three months afterwards, otherwise the glands in that area may swell.

Also make sure that there is a record of the BCG vaccination in your child’s Personal Child Health Record (PCHR) for future reference.

**How can I tell if my baby needs a BCG vaccination?**
If you answer ‘Yes’ to any of these questions, your baby should have a BCG vaccination if he or she hasn’t already had one.

- Is either of your baby’s parents or any of the grandparents from a country with a high rate of TB (as listed on pages 6 and 7)?
- Will you and your baby be going to live for more than a month 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 long-term close contact with your baby, who either has TB, or has had it in the past five years or comes from one of these countries?

**Can I request a BCG vaccination for myself or my children?**
Only those individuals who have specific risk factors for TB (see above) will be offered a BCG vaccination. You or your child will be assessed to see if you meet the criteria before being offered a vaccination.
Countries with annual rates of TB of 40/100,000 of the population or greater

Afghanistan  |  Ecuador  
Algeria     |  El Salvador  
Angola      |  Equatorial Guinea  
Armenia     |  Eritrea  
Azerbaijan  |  Ethiopia  
Bahrain     |  Gabon  
Bangladesh  |  Gambia  
Belarus     |  Georgia  
Belize      |  Ghana  
Benin       |  Guatemala  
Bhutan      |  Guinea  
Bolivia     |  Guinea-Bissau  
Bosnia Herzegovina |  Guyana  
Botswana   |  Haiti  
Brazil      |  Honduras  
Brunei Darussalam |  India  
Bulgaria    |  Indonesia  
Burkina Faso |  Iraq  
Burundi     |  Kazakhstan  
Cambodia    |  Kenya  
Cameroon    |  Kiribati  
Cape Verde  |  Kyrgyzstan  
Central African Republic |  Lao People’s Democratic Republic  
Chad        |  Latvia  
China       |  Lesotho  
China, Hong Kong SAR |  Liberia  
China, Macao SAR |  Lithuania  
Colombia    |  
Comoros     |  
Congo       |  
Côte d’Ivoire |  
Croatia    |  
Democratic People’s Republic of Korea |  
Democratic Republic of Congo |  
Djibouti   |  
Dominican Republic |  

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For an up-to-date list of countries with high rates of TB, check the website www.hpa.org.uk/web/HPAweb&HPAwebStandard/HPAweb_C/1195733758290
If you want more information on TB, or the BCG vaccine or any other immunisations, or if you want this leaflet in other languages, speak to your doctor, health visitor, midwife or nurse, or visit the DHSSPS website www.dhsspsni.gov.uk/immunisation. Additional information is available on www.immunisation.nhs.uk

Remember, treating TB takes a long time, preventing it is much easier.