Mae Brechu yn achub bywydau
Vaccination saves lives

Amddiffyn eich baban rhag llid yr ymennydd a septisemia

Heintiau a achosir gan facteria meningococol B

GIG CYMRU NHS WALES | Iechyd Cyhoeddus Cymru
Public Health Wales

Sganiwch fi i fynd i wefan Iechyd Cyhoeddus Cymru

Mae'r daflen hon yn disgrifio'r brechlyn MenB a'r clefydau y mae'n helpu i'w hamddiffyn rhagddynt. Mae hefyd yn cynnwys gwybodaeth am ddefnyddio paracetamol ar ôl cael brechiadau.

Ffeithiau allweddol

- **Amddiffyn eich baban rhag haint difrifol**
  Brechu yw un o'r ffyrdd gorau o amddiffyn eich baban rhag haint difrifol. Mae'r brechlyn MenB yn helpu i amddiffyn rhag clefyd meningococol, sy'n cael ei achosi gan germau a elwir yn facteria meningococol grŵp B (MenB).

- **Mae clefyd meningococol yn haint sy'n peryglu bywyd**
  Clefyd meningococol yw'r term a ddefnyddir i ddisgrifio dau salwch difrifol – llid yr ymennydd a septisemia.

  Mae **llid yr ymennydd** yn haint difrifol iawn sy'n achosi llid yn leinin yr ymennydd a llinyn asgwrn y cefn.

  Gwenwyn gwaed yw **septisemia**.

  Gall yr afiechydon hyn:
  - ymddangos yn sydyn
  - datblygu'n gyflym iawn
  - lladd mewn oriau, a
  - gadael goroeswyr ag anableddau gydol oes.

- **Mae Brechu yn Achub Bywydau**
  Mae rhaglen frechu MenB wedi lleihau'n sylweddol nifer yr achosion o lid yr ymennydd a septisemia ymhlith plant ifanc.

- **Mae tystiolaeth yn dangos bod y brechlyn MenB yn ddiogel ac yn effeithiol**
  Mae'r brechlyn wedi cael ei ddefnyddio ers nifer o flynyddoedd ac mae record ddiogelwch dda yn gysylltiedig ag ef.

- **Pryd i gael y brechlyn**
  Cynigir y brechlyn MenB am **ddim** yn rhan o raglen frechu plentyndod arferol y GIG. Dylai eich plentyn gael ei frechiad MenB pan fydd yn **wyth wythnos** oed, **12 wythnos** oed a **12 i 13 mis** oed.

Beth yw llid yr ymennydd?

Llid yn leinin yr ymennydd a llinyn asgwrn y cefn yw llid yr ymennydd. Gall ddatblygu'n gyflym iawn. Gall llid yr ymennydd arwain at fyddardod, dallineb, epilepsi (ffitiau), anawsterau dysgu ac weithiau at farwolaeth.

Beth yw MenB?

Mae bacteria meningococol yn achosi'r clefyd meningococol. Gall hyn arwain at ddau salwch difrifol – llid yr ymennydd a septisemia.Mae MenB yn fyr am facteria meningococol grŵp B.

Mae MenB yn un o sawl math (straen) o facteria meningococol. Mae'r mathau mwyaf cyffredin eraill yn cynnwys W, Y ac C.

Ffaith!

Yn ystod y pum mlynedd diwethaf achosodd MenB bron i 90% o'r achosion o glefydau meningococol yng Nghymru.

Mae'r brechlyn MenB yn helpu i amddiffyn babanod rhag clefyd MenB, ond nid yw'n amddiffyn rhag straeniau eraill o facteria meningococol. Mae brechlyn arall yn cael ei gynnig i bobl ifanc yn eu harddegau, i helpu i'w hamddiffyn rhag mathau meningococol A, C, W ac Y.

Gall y bacteria meningococol achosi brigiadau o achosion mewn meithrinfeydd, ysgolion a phrifysgolion.

Mae brechiadau meningococol wedi bod yn effeithiol iawn a dyma ein hamddiffyniad gorau yn erbyn clefyd meningococol, a all fod yn beryglus iawn. Fodd bynnag, nid yw llawer o blant wedi'u brechu'n llawn o hyd. Mae'n bwysig eu hamddiffyn oherwydd gallai clefyd meningococol ddatblygu'n gyflym iawn ac achosi problemau iechyd difrifol.

Mae'n bwysig amddiffyn plant rhag clefyd meningococol trwy wneud yn siŵr eu bod yn cael eu brechiadau MenB i fabanod a bod pobl ifanc yn eu harddegau yn cael eu brechiad MenACWY yn yr ysgol.

Gwiriwch lyfr coch eich plentyn neu gofynnwch yn eich practis meddyg teulu a gofalwch fod eich plentyn yn cael ei frechu os nad yw ei frechiadau'n gyfredol.

Sut mae bacteria MenB yn achosi salwch difrifol?

Mae bacteria MenB yn byw yng ngwddf tua 1 o bob 10 o bobl heb achosi'r un broblem - mewn gwirionedd, maen nhw'n helpu i adeiladu imiwnedd. Gall y bacteria ledaenu i bobl eraill trwy beswch, tisian neu gusanu.

Weithiau bydd y bacteria yn y gwddf yn mynd i mewn i'r llif gwaed, gan achosi septisemia, neu gallant gyrraedd yr ymennydd, gan arwain at lid yr ymennydd. Gall bacteria MenB achosi septisemia a llid yr ymennydd ar yr un pryd.

Ffaith!

Mae cael ei frechu yn amddiffyn eich plentyn rhag llid yr ymennydd a septisemia, ac mae hefyd yn helpu i gadw eraill yn ddiogel.

Pwy sydd fwyaf tebygol o gael MenB?

Mae MenB yn effeithio ar fabanod a phlant ifanc yn bennaf. Mae hyn am nad yw eu systemau imiwnedd wedi datblygu'n llawn i frwydro yn erbyn heintiau eto. Ond gall llid yr ymennydd a septisemia ddigwydd ar unrhyw oedran, felly mae'n bwysig adnabod arwyddion a symptomau'r clefydau.

Gall symptomau ymddangos mewn unrhyw drefn ac efallai na fydd rhai ohonynt yn ymddangos o gwbl. Gweler y llun isod am symptomau.

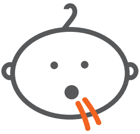
Babanod a phlant bach

Twymyn, dwylo a thraed oer

Gwrthod bwyd a chwydu

Cwynfanllyd, ddim yn hoffi cael eu trin

Cysglyd, llipa, ddim yn ymateb



Anadlu'n gyflym neu'n rhochian

Croen blotiog golau. Smotiau/ brech (gweler y prawf gwydr)

Crïo'n anarferol, griddfan

Y ffontanél (man meddal) yn dynn ac wedi chwyddo

Gwddw stiff, ddim yn hoffi goleuadau llachar

Confylsiynau neu drawiadau

Ffynhonnell: © meningitisnow.org

Ni fydd brech septisemia meningococol nodweddiadol yn pylu pan fyddwch yn pwyso arni. I'w gwirio, pwyswch ochr gwydr clir yn gadarn yn erbyn y croen (gweler y llun). Ni fydd pob plentyn yn cael y frech hon. Mae fel arfer yn dechrau fel smotiau bach ond yn datblygu'n gyflym yn batsys porffor dwfn.

Beth ddylwn i ei wneud os byddaf yn amau meningitis neu septisemia?

Peidiwch ag aros am frech.

Os yw eich baban neu eich plentyn bach yn sâl ac yn gwaethygu, mynnwch gymorth meddygol ar unwaith.

Gallai baban neu blentyn bach â llid yr ymennydd neu septisemia waethygu'n gyflym iawn. Parhewch i'w wirio.

Credwch yn eich greddf – mynnwch gymorth meddygol ar unwaith.

Cofiwch – ni fydd y symptomau'n ymddangos mewn trefn, ac efallai na fydd rhai ohonynt yn ymddangos o gwbl. Os oes gennych unrhyw amheuaeth am iechyd eich plentyn, mynnwch gymorth meddygol ar unwaith. Os na allwch gysylltu â'ch meddyg, ewch i adran achosion brys eich ysbyty agosaf.

Mae angen sylw meddygol brys ar rywun sydd â thwymyn a brech nad yw'n pylu dan bwysau. Gallwch wneud y prawf gwydr i wirio a yw brech yn pylu dan bwysau. I gael rhagor o wybodaeth, ewch i **www.meningitisnow.org** (safle allanol, Saesneg yn unig) neu ffoniwch llinell gymorth Meningitis Now ar **0808 80 10 388**.

A ellir trin clefyd MenB?

Mae angen i unrhyw un sydd â chlefyd MenB fynd i'r ysbyty ar frys a chael triniaeth â gwrthfiotigau ar unwaith. Os rhoddir triniaeth yn fuan, mae'n fwy tebygol y gellir osgoi anabledd neu farwolaeth.

A ellir atal clefyd MenB?

Mae'r brechlyn MenB wedi'i gynllunio i amddiffyn rhag y rhan fwyaf o heintiau MenB. Ers i'r brechlyn MenB gael ei gyflwyno yn 2015, bu gostyngiad o dros 60% yn nifer yr achosion o'r clefyd MenB ymhlith plant ifanc erbyn trydedd flwyddyn y rhaglen frechu.

Pryd fydd fy maban yn cael cynnig y brechlyn MenB?

Dylid rhoi'r brechlyn MenB gyda'r brechiadau arferol eraill yn:

- **wyth wythnos oed**
- **12 wythnos oed, a**
- **12 i 13 mis oed.**

Fel arfer rhoddir y brechiad yn y glun.

Anfonir apwyntiadau i blant ar gyfer eu brechiad MenB. Mae'r rhan fwyaf o bractisiau meddyg teulu a chanolfannau iechyd yn cynnal clinigau brechu arbennig neu glinigau babanod.

I gael gwybodaeth am yr amserlenni imiwneiddio arferol ar gyfer Cymru, gweler: **icc.gig.cymru/AmserlenGyflawn**

A yw'n ddiogel i fy maban gael y brechlyn MenB gyda brechiadau eraill rhwng 12 a 13 mis oed?

Mae astudiaethau'n dangos ei bod yn ddiogel rhoi'r brechlyn MenB gyda'r brechiadau arferol eraill rhwng 12 a 13 mis oed, fel y gellir amddiffyn eich baban rhag heintiau difrifol ar unwaith.

Brechiad MenB – Pryd ddylwn i roi paracetamol i fy maban ar ôl iddo gael ei frechiad?

Efallai y bydd eich baban yn cael twymyn ar ôl unrhyw frechiad, ond mae'n fwy cyffredin pan roddir y brechlyn MenB gyda'r brechiadau babanod arferol eraill. Bydd rhoi paracetamol i'ch baban yn fuan ar ôl iddo gael ei frechiad a pheidio ag aros i dwymyn ddatblygu yn lleihau'r risg y bydd ganddo dwymyn.

Rhowch y dos cyntaf o baracetamol cyn gynted â phosibl ar ôl i'ch baban gael ei frechiad. Rhowch baracetamol hylif cryfder addas i fabanod (120mg/5ml) yn unig. Ar gyfer babanod cynamserol iawn (a aned cyn 32 wythnos), dylai meddyg roi paracetamol ar bresgripsiwn iddynt.

Dosau paracetamol ar ôl y ddau frechiad MenB cyntaf

Ar gyfer babanod rhwng wyth wythnos a chwe mis oed, rhowch hanner llwy de (2.5ml) gan ddefnyddio'r llwy neu'r chwistrell a ddarperir gyda'r feddyginiaeth.

Oed y baban	**Fel arfer yn 8 wythnos hyd at 6 mis oed**
Dos 1	Un dos 2.5ml (60mg) cyn gynted â phosibl ar ôl y brechiad.
Dos 2	Un dos 2.5ml (60mg) 4 i 6 awr ar ôl y dos cyntaf.
Dos 3	Un dos 2.5ml (60mg) 4 i 6 awr ar ôl yr ail ddos.

Dilynwch yr amserlen hon ar ôl pob un o'r ddau frechiad MenB cyntaf.

Mae'r wybodaeth hon yn berthnasol ar ôl i'ch baban gael y brechlyn MenB. Os bydd twymyn ar eich baban ar unrhyw adeg arall, dylech ddilyn y cyfarwyddiadau a'r cyngor am y dos a roddir ar y pecyn cynnyrch a'r daflen wybodaeth i gleifion.

Sicrhewch fod gennych gyflenwad o baracetamol cryfder addas i fabanod gartref cyn apwyntiad brechu cyntaf eich baban. Gallwch ei brynu mewn fferyllfa neu archfarchnad.

Peidiwch â rhoi'r dos cyntaf cyn eich apwyntiad brechlyn, gan fod angen i'r nyrs wirio am arwyddion o heintiau cyfredol, a allai olygu gohirio'r brechiad.

Beth os bydd gan fy maban dwymyn ar ôl cael y tri dos o baracetamol?

- Efallai y bydd gan rai babanod dwymyn ar ôl eu brechiad, hyd yn oed os byddant wedi cael tri dos o baracetamol.
- Yn ystod y 48 awr ar ôl cael y brechiad, os bydd gan eich baban dwymyn o hyd a'i fod yn iach fel arall, gallwch barhau i roi'r un dos o 2.5 ml (60mg) o baracetamol hylif cryfder addas i fabanod (120mg/5ml) iddo.
- Arhoswch o leiaf bedair awr rhwng dosau bob amser a pheidiwch byth â rhoi mwy na phedwar dos mewn 24 awr.
- Cadwch eich baban yn lled oer drwy wneud yn siŵr nad oes ganddo ormod o haenau o ddillad neu flancedi a rhowch lawer o hylifau iddo. Os yw eich baban yn cael ei fwydo ar y fron, llaeth y fron yw'r hylif gorau i'w roi iddo.

Os bydd gan eich baban dwymyn 48 awr ar ôl cael y brechiad, neu os ydych yn pryderu am iechyd eich baban ar unrhyw adeg:

- **credwch yn eich greddf a siaradwch â'ch meddyg teulu, neu**
- **cysylltwch â GIG 111 Cymru drwy ffonio 111.**

A oes angen paracetamol ar fy maban gyda phob brechiad MenB?

Bydd angen paracetamol ar eich plentyn gyda brechiadau MenB a roddir pan fydd dan 12 mis oed.

Fodd bynnag, nid oes angen paracetamol fel mater o drefn gyda'r brechlyn MenB a roddir ar ôl iddo fod yn 12 mis oed. Mae hyn oherwydd y bydd llai o risg o gael twymyn erbyn iddo gyrraedd yr oedran hwn.

! Peidiwch byth â rhoi meddyginiaethau sy'n cynnwys aspirin i blant dan 16 oed.

A oes unrhyw fabanod na ddylent gael y brechlyn?

Ni ddylid rhoi'r brechlyn i fabanod sydd wedi cael ymateb difrifol (sy'n peryglu bywyd) i:

- dos blaenorol o'r brechlyn neu
- unrhyw gynhwysyn yn y brechlyn.

Siaradwch â'r person sy'n rhoi 'r brechlyn i'ch babi, os yw'ch babi wedi cael adwaith alergaidd difrifol i'r brechlyn neu'r cynhwysion yn y gorffennol.

Beth os bydd fy maban yn sâl ar ddiwrnod yr apwyntiad?

Os bydd gan eich baban fân anhwylder heb dwymyn, fel annwyd, gall gael ei frechiad fel arfer. Os bydd eich baban yn sâl a bod ganddo dwymyn, gohiriwch ei frechiad nes ei fod wedi gwella.

Os bydd eich baban:

- ag anhwylder gwaedu (fel hemoffilia, pan nad yw'r gwaed yn ceulo'n iawn)
- wedi cael ffit nad yw'n gysylltiedig â thwymyn
- wedi cael ei eni'n gynamserol iawn, neu
- â phroblem gyda'i system imiwnedd

siaradwch â'ch meddyg, nyrs practis neu ymwelydd iechyd cyn i'ch baban gael unrhyw frechiad.

Beth os bydd fy maban yn colli ei frechiadau MenB pan fydd yn bryd iddo eu cael?

Os bydd eich baban yn colli unrhyw un o'i frechiadau, siaradwch â'ch meddyg neu nyrs practis er mwyn aildrefnu iddo eu cael cyn gynted â phosibl.

Cofiwch, mae'n bwysig cadw'n gyfredol gyda'r rhan fwyaf o'r brechiadau sy'n cael eu colli. Os bydd eich plentyn wedi colli brechiad a'i fod yn hŷn na'r oedran a argymhellir, siaradwch â'ch meddyg teulu, nyrs practis neu ymwelydd iechyd.

A oes gan y brechlyn MenB unrhyw sgil-effeithiau?

Fel pob meddyginiaeth, gall brechlynnau achosi sgil-effeithiau. Mae'r rhan fwyaf o'r rhain yn ysgafn ac yn rhai tymor byr, ac ni fydd pawb yn eu cael.

Sgil-effaith mwyaf cyffredin y brechlyn yw twymyn (tymheredd uchel – uwch na 38˚C). Dylech roi'r dos cywir o hylif paracetamol i'ch baban i helpu i leihau'r risg y bydd yn cael twymyn.

Mae sgil-effeithiau cyffredin eraill yn cynnwys:

- ychydig o gochni a dolur yn y fan lle rhoddwyd y brechlyn
- teimlo'n bigog
- brech
- crio anarferol
- teimlo'n gysglyd
- colli archwaeth neu deimlo'n sâl
- dolur rhydd, a
- chur pen/pen tost.

Gweler y dudalen gefn am ragor o fanylion ar:

- y brechlyn, gan gynnwys y sgil-effeithiau posibl, ac
- adrodd am sgil-effeithiau a amheuir trwy gynllun y Cerdyn Melyn.

Os bydd gennych gwestiynau am sgil-effeithiau, gallwch ofyn i'r unigolyn a fydd yn rhoi'r brechlyn.

Os byddwch yn poeni am eich plentyn ar ôl iddo gael y brechlyn, dylech siarad â'ch ymwelydd iechyd, meddyg teulu neu nyrs practis. Gallwch hefyd gysylltu â GIG Cymru drwy ffonio **111**. Mae galwadau i GIG 111 Cymru am ddim o linellau tir a ffonau symudol.

A all fy maban gael clefyd meningococol ar ôl iddo gael ei frechu?

Brechu yw un o'r ffyrdd mwyaf effeithiol o atal salwch difrifol a achosir gan facteria MenB. Nid yw'r un brechlyn 100% yn effeithiol, felly mae'n dal yn bwysig adnabod arwyddion a symptomau clefyd meningococol (llid yr ymennydd a septisemia), hyd yn oed os yw eich plentyn wedi cael ei frechu. Mae rhagor o wybodaeth ar gael yn:

Meningitis signs and symptoms | Meningitis Now (safle allanol, Saesneg yn unig)

Meningitis Symptoms in Babies | Meningitis Research Foundation (safle allanol, Saesneg yn unig)

Meningococcal disease | Vaccine Knowledge Project (safle allanol, Saesneg yn unig)

I weld yr amserlenni imiwneiddio arferol ar gyfer Cymru, ewch i: **icc.gig.cymru/AmserlenGyflawn**

Mae'r wybodaeth yn y daflen hon yn gywir ar adeg ei chyhoeddi. I gael yr wybodaeth ddiweddaraf, ewch i **icc.gig.cymru/brechlynnau**

Rhagor o wybodaeth

Meningitis Now

Ewch i: **www.meningitisnow.org**
(safle allanol, Saesneg yn unig)
Llinell gymorth am ddim: **0808 80 10 388**
(9yb i 5yh, dydd Llun i ddydd Gwener)
E-bost: **helpline@meningitisnow.org**
(Mae e-byst yn cael eu hateb yn ystod oriau swyddfa yn unig.)

Meningitis Research Foundation

Ewch i: **www.meningitis.org**
(safle allanol, Saesneg yn unig)
Llinell gymorth am ddim: **080 8800 3344**
(9yb i 5yh, dydd Llun i ddydd Gwener)
E-bost: **helpline@meningitis.org**
(Mae e-byst yn cael eu hateb yn ystod oriau swyddfa yn unig.)

Os oes gennych unrhyw gwestiynau, neu os hoffech mwy o wybodaeth, gallwch ymweld â **111.wales.nhs.uk** (safle allanol), siaradwch â'ch meddyg neu nyrs neu cysylltwch â GIG 111 Cymru drwy ffonio **111**.

Gallwch gael rhagor o wybodaeth am frechlynnau a gynigir yng Nghymru o **icc.gig.cymru/brechlynnau**

I gael rhagor o wybodaeth am y brechlyn, cynhwysion y brechlyn a'r sgil-effeithiau posibl, ewch i **medicines.org.uk/emc** (safle allanol, Saesneg yn unig). Rhowch enw'r brechlyn yn y blwch chwilio. Gallwch hefyd weld y daflen i gleifion ar-lein.

Gallwch ddod o hyd i enw'r brechlyn yn **icc.gig.cymru/brechlynMenB**

Dylech roi gwybod am sgil-effeithiau a amheuir ar-lein yn **www.mhra.gov.uk/yellowcard** (safle allanol, Saesneg yn unig), drwy lawrlwytho ap y Cerdyn Melyn, neu drwy ffonio **0800 731 6789** (Dydd Llun i Ddydd Gwener, 9yb i 5yh).

I gael gwybod sut mae'r GIG yn defnyddio'ch gwybodaeth, ewch i **111.wales.nhs.uk/amdanomni/eichgwybodaeth** (safle allanol).

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Further information

Meningitis Now

Visit: **www.meningitisnow.org** (external site)
Free helpline: **0808 80 10 388** (9am to 4pm, Monday to Friday)
Email: **helpline@meningitisnow.org**
(Emails are answered during office hours only.)

Meningitis Research Foundation

Visit: **www.meningitis.org** (external site)
Free helpline: **080 8800 3344** (9am to 5pm, Monday to Friday)
Email: **helpline@meningitis.org**
(Emails are answered during office hours only.)

If you have any questions or want more information, you can visit **111.wales.nhs.uk** (external site), talk to your doctor or nurse, or contact NHS 111 Wales by calling **111**.

You can find out more information on vaccines offered in Wales at **phw.nhs.wales/vaccines**

To find out more about the vaccine, including its contents and possible side effects, go to: **medicines.org.uk/emc** (external site). Enter the name of the vaccine in the search box. You can also see the patient leaflet online.

You can find the name of the vaccine at **phw.nhs.wales/MenBvaccine**

You should report suspected side effects online at **www.mhra.gov.uk/yellowcard** (external site), by downloading the Yellow Card app, or by calling **0800 731 6789** (Monday to Friday, 9am to 5pm).

To find out how the NHS uses your information, go to **111.wales.nhs.uk/AboutUs/Yourinformation** (external site).

Crystal Mark 25615
Clarity approved by Plain English Campaign

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See the back page for more details on:

- the vaccine, including possible side effects, and
- reporting suspected side effects through the Yellow Card scheme.

If you have any questions about side effects, you can ask the person giving the vaccine.

If you are worried about your child after the vaccination you should speak to your health visitor, GP or practice nurse. You can also contact NHS Wales by calling **111**. Calls to NHS 111 Wales are free from landlines and mobile phones.

Can my baby still get meningococcal disease when they are vaccinated?

Vaccination is one of the most effective ways to prevent severe illness caused by MenB bacteria. No vaccine is 100% effective, so it is still important to know the signs and symptoms of meningococcal disease (meningitis and septicaemia), even if your child is vaccinated. More information is available at:

Meningitis signs and symptoms | Meningitis Now (external site)

Meningitis Symptoms in Babies | Meningitis Research Foundation (external site)

Meningococcal disease | Vaccine Knowledge Project (external site)

To see the routine immunisation schedules for Wales, visit: **phw.nhs.wales/CompleteSchedule**

The information in this leaflet is correct at the time of publication. For the most up-to-date information, please visit **phw.nhs.wales/vaccines**

What if my baby misses their MenB vaccinations when they are due?

If your baby misses any of their vaccinations speak to your doctor or practice nurse to rearrange them as soon as possible.

Remember, it's important to catch up on most missed vaccinations. If your child has missed a vaccination and is older than the recommended age, talk to your GP, practice nurse or health visitor.

Does the MenB vaccine have any side effects?

Like all medicines, vaccines can cause side effects. Most of these are mild and short term, and not everyone gets them.

The most common side effect of the vaccine is fever (a high temperature – above 38˚C). You should give your baby the correct dose of liquid paracetamol to help reduce the risk of fever.

Other common side effects include:

- some redness and soreness where the vaccine was given
- feeling irritable
- a rash
- unusual crying
- sleepiness
- loss of appetite or feeling sick
- diarrhoea, and
- a headache.

Are there any babies who should not have the vaccine?

The vaccine should not be given to babies who have had a serious (life-threatening) reaction to:

- a previous dose of the vaccine or
- any ingredient in the vaccine.

If your baby has had a serious allergic reaction to the vaccine or ingredients in the past, tell the person giving your baby the vaccine.

What if my baby is ill on the day of the appointment?

If your baby has a minor illness without a fever, such as a cold, they can have their vaccinations as normal. If your baby is ill with a fever, delay their vaccination until they have recovered.

If your baby:

- has a bleeding disorder (such as haemophilia, where the blood doesn't clot properly)
- has had a fit not associated with fever
- was born very prematurely, or
- has a problem with their immune system

speak to your doctor, practice nurse or health visitor before your baby has any vaccination.

What if my baby still has a fever after having had the three doses of paracetamol?

- Some babies might still get a fever after their vaccination, even if they've had three doses of paracetamol.
- In the 48 hours after vaccination, if your baby still has a fever but is otherwise well, you can continue to give them the same 2.5 ml dose (60mg) of infant-strength (120mg/5ml) liquid paracetamol.
- Always wait at least four hours between doses and never give more than four doses in 24 hours.
- Keep your baby cool by making sure they don't have too many layers of clothes or blankets and give them lots of fluids. If your baby is breastfed, the best fluid to give is breast milk.

If 48 hours after their vaccination your baby still has a fever, or if you are concerned about your baby's health at any time:

- **trust your instincts and speak to your GP, or**
- **contact NHS 111 Wales by calling 111.**

Does my baby need paracetamol with every MenB vaccination?

Your child will need paracetamol with MenB vaccinations given under 12 months of age.

However, paracetamol is not routinely needed after the MenB vaccine given at 12 months. This is because by this age, the risk of fever is less.

Never give medicines containing aspirin to children under 16 years.

Paracetamol doses after the first two MenB vaccinations

For babies aged eight weeks to six months, give half a teaspoon (2.5ml) using the spoon or syringe provided with the medicine.

Age of baby	**Usually at 8 weeks, up to 6 months of age**
Dose 1	One 2.5ml (60mg) dose as soon as possible after vaccination.
Dose 2	One 2.5ml (60mg) dose 4 to 6 hours after first dose.
Dose 3	One 2.5ml (60mg) dose 4 to 6 hours after second dose.

Follow this schedule after each of the first two MenB vaccinations.

This information applies after your baby has had the MenB vaccine. If your baby has a fever at any other time, you should follow the instructions and dose advice on the product packaging and patient information leaflet.

Make sure you have a supply of infant-strength paracetamol at home before your baby's first vaccination appointment. You can buy it from a pharmacy or supermarket.

Don't give the first dose before your vaccine visit, as the nurse needs to check for signs of existing infection, which may mean delaying the vaccination.

Is it safe for my baby to have the MenB vaccine with other vaccinations between 12 and 13 months of age?

Studies show it's safe to give the MenB vaccine with other routine vaccinations between 12 and 13 months of age, so your baby can be protected from serious infections right away.

MenB vaccination – When should I give paracetamol to my baby after their vaccination?

Your baby may get a fever after any vaccination, but it is more common when the MenB vaccine is given with the other routine infant vaccinations. Giving your baby paracetamol soon after their vaccination and not waiting for a fever to develop will reduce the risk of them having a fever.

Give the first dose of paracetamol as soon as possible after your baby has had their vaccination. Use only infant-strength (120mg/5ml) liquid paracetamol. For very premature babies (born before 32 weeks), a doctor should prescribe the paracetamol.

Someone with a fever and a rash that does not fade under pressure needs urgent medical attention. You can use the glass test to check whether a rash fades under pressure. For more information, see **www.meningitisnow.org** (external site) or call the Meningitis Now helpline on **0808 80 10 388**.

Can MenB disease be treated?

Anyone who has MenB disease needs to go to hospital urgently and have immediate treatment with antibiotics. If treatment is started quickly, disability or death are more likely to be avoided.

Can MenB disease be prevented?

The MenB vaccine is designed to protect against most MenB infections. Since the MenB vaccine was introduced in 2015, cases of MenB disease in young children fell by over 60% by the third year of the vaccination programme.

When will my baby be offered the MenB vaccine?

The MenB vaccine should be given with other routine vaccinations at:

- **eight weeks**
- **12 weeks, and**
- **12 to 13 months.**

The vaccination is usually given in the thigh.

Children are sent appointments for their MenB vaccination. Most surgeries and health centres run special vaccination or baby clinics.

For information about routine immunisation schedules for Wales, see:
phw.nhs.wales/CompleteSchedule

A typical meningococcal septicaemia rash doesn't fade when you press it. To check for it, press the side of a clear glass firmly against the skin (see picture). Not all children get this rash. It usually starts as small spots but quickly becomes deep purple patches.

Source: © meningitisnow.org

What should I do if I suspect meningitis or septicaemia?

Do not wait for a rash.

If your baby or toddler is ill and getting worse, get medical help immediately.

A baby or toddler with meningitis or septicaemia could get a lot worse very quickly. Keep checking them.

Trust your instincts – get medical help immediately.

Remember – symptoms do not appear in order, and some may not appear at all. If you are in any doubt about the health of your child, get medical help immediately. If you can't get in touch with your doctor, go to the emergency department of your nearest hospital.

Symptoms may appear in any order and some may not appear at all. See the illustration below for symptoms.

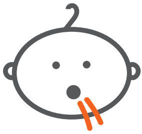
Babies and toddlers

Fever, cold hands and feet

Refusing food and vomiting

Fretful, dislike being handled

Drowsy, floppy, unresponsive


Rapid breathing or grunting

Pale, blotchy skin. Spots/rash (see glass test)

Unusual cry, moaning

Tense bulging fontanelle (soft spot)

Stiff neck, dislike bright lights

Convulsions or seizures

Source: © meningitisnow.org

It is important to protect children against meningococcal disease by making sure they get their infant MenB vaccinations and teenagers get their MenACWY vaccination in school.

Check your child's red book or with your GP surgery and get your child vaccinated if they are not up to date.

How do the MenB bacteria cause serious illness?

MenB bacteria live in the throats of about 1 in 10 of people without causing any problems at all – in fact, they help build up immunity. The bacteria can spread to other people through coughing, sneezing or kissing.

Sometimes the bacteria in the throat get into the bloodstream, causing septicaemia, or they may get to the brain, leading to meningitis. MenB bacteria can cause both septicaemia and meningitis at the same time.

Fact!

Getting vaccinated not only protects your child from meningitis and septicaemia, but it also helps keep others safe too.

Who is most likely to get MenB?

MenB mostly affects infants and young children. This is because their immune systems aren't yet fully developed to fight off infection. But meningitis and septicaemia can happen at any age, so it is important to know the signs and symptoms of the diseases.

What is meningitis?

Meningitis is inflammation of the lining of the brain and spinal cord. It can progress very quickly. Meningitis can lead to deafness, blindness, epilepsy (fits), learning difficulties and sometimes death.

What is MenB?

Meningococcal bacteria cause meningococcal disease. This can lead to two serious illnesses – meningitis and septicaemia.

MenB is short for meningococcal group B bacteria. MenB is one of several types (strains) of meningococcal bacteria. The other most common types include W, Y and C.

Fact! **During the last five years MenB caused nearly 90% of meningococcal disease cases in Wales.**

The MenB vaccine helps protect babies against MenB disease, but it does not protect against other strains of meningococcal bacteria. Another vaccine is offered to teenagers, to help protect them against meningococcal types A, C, W and Y.

The meningococcal bacteria may cause outbreaks in nurseries, schools and universities.

Meningococcal vaccinations have been very effective and are our best defence against meningococcal disease, which can be very dangerous. However, many children are still not fully vaccinated. It's important to protect them because meningococcal disease could develop very quickly and cause serious health problems.

This leaflet describes the MenB vaccine and the diseases it helps protect against. It also includes information about using paracetamol after vaccinations.

Key facts

- **Protect your baby from serious infection**
  Vaccination is one of the best ways to protect your baby from serious infection. The MenB vaccine helps protect against meningococcal disease, which is caused by germs called meningococcal group B (MenB) bacteria.

- **Meningococcal disease is a life-threatening infection**
  Meningococcal disease is the term used to describe two serious illnesses – meningitis and septicaemia.

  Meningitis is a very serious infection which causes inflammation of the lining of the brain and spinal cord.

  Septicaemia is blood poisoning.

  These illnesses can:
  - come on suddenly
  - progress very quickly
  - kill in hours, and
  - leave survivors with lifelong disabilities.

- **Vaccination saves lives**
  The MenB vaccination programme has significantly reduced cases of meningitis and septicaemia in young children.

- **Evidence shows that the MenB vaccine is safe and effective**
  The vaccine has been used for many years and has a good safety record.

- **When to get the vaccine**
  The MenB vaccine is offered for **free** as part of the routine NHS childhood vaccination programme. Your child should have their MenB vaccination at **eight weeks, 12 weeks** and **12 to 13 months.**

Mae Brechu yn achub bywydau
Vaccination saves lives

Protect your baby against meningitis and septicaemia

Infections caused by meningococcal B bacteria

Mae'r gwybodaeth hon ar gael yn Gymraeg.
This information is available in Welsh.

GIG Cymru NHS Wales | Iechyd Cyhoeddus Cymru Public Health Wales

Scan me to go to the Public Health Wales website