Iechyd Cyhoeddus Cymru
Public Health Wales

Mae Brechu yn achub bywydau
Vaccination saves lives

Brechiad BCG i fabanod a phlant

Mae'r daflen yma am y brechiad BCG sy'n cael ei gynnig i warchod eich plentyn rhag twbercwlosis.

Beth yw brechiad BCG?

Mae brechiad BCG yn cynnwys ffurf wedi'i gwanio ar y bacteria (germau) sy'n achosi twbercwlosis (TB). Nid yw'r brechiad yn achosi TB ond mae'n helpu eich plentyn i ddatblygu gwarchodaeth (imiwnedd) rhagddo os daw ef neu hi i gysylltiad ag o byth. Mae brechiad BCG yn hynod effeithiol am warchod babanod a phlant ifanc rhag y mathau prinnach a mwy difrifol o TB, fel TB llid yr ymennydd (chwydd yn y gorchuddion gwarchodol o amgylch yr ymennydd).

Pam mae fy mhlentyn yn cael cynnig brechiad BCG?

Mae brechiad BCG yn cael ei gynnig i fabanod a phlant ifanc sy'n fwy tebygol o ddod i gysylltiad â rhywun sydd â TB. Y rheswm am hyn yw naill ai am eu bod yn byw mewn ardal sydd â chyfraddau uchel o TB, neu mae eu rhieni neu eu teidiau a'u neiniau wedi dod o wlad sydd â chyfraddau uchel o TB. Mae achosion o TB i'w gweld ym mhob cwr o'r byd, gan gynnwys De Ddwyrain Asia, Affrica Is-Sahara a rhai gwledydd yn Nwyrain Ewrop.

Am restr o'r gwledydd sydd â chyfraddau uchel o TB ewch i:
www.gov.uk/government/publications/tuberculosis-tb-by-country-rates-per-100000-people

Os ydych chi'n ansicr ynghylch a yw eich plentyn yn debygol o ddod i gysylltiad ag unrhyw un sydd â TB, siaradwch â gweithiwr iechyd proffesiynol. Gyda niferoedd cynyddol o bobl yn teithio o amgylch y byd, mae'r risg i bobl ddod i gysylltiad â'r afiechyd yn cynyddu hefyd.

Beth yw TB?

Mae TB yn afiechyd difrifol sydd, fel rheol, yn effeithio ar yr ysgyfaint, ond mae'n gallu effeithio ar unrhyw ran o'r corff. Yn aml, mae TB yn datblygu'n araf a gall gymryd misoedd lawer i symptomau ymddangos. Mae'r rhan fwyaf o bobl yn y wlad yma'n gwella'n llwyr ar ôl triniaeth ond mae hyn yn cymryd misoedd fel rheol.

Sut mae TB yn cael ei ledaenu?

Fel rheol mae TB yn lledaenu pan mae pobl sydd â TB heintus yn eu hysgyfaint neu eu gwddw'n pesychu neu'n tisian. Fodd bynnag, fel rheol, mae angen cyswllt agos â pherson heintus dros gyfnod hir o amser i ddal yr afiechyd. Nid yw pawb sydd â TB yn eu hysgyfaint yn heintus. Unwaith maent yn cael y driniaeth briodol, bydd y rhan fwyaf o bobl yn stopio bod yn heintus ar ôl tua phythefnos.

Beth yw symptomau TB?

Hefyd, mae arwyddion yr afiechyd mewn babi’n gallu bod yn wahanol i oedolyn neu blentyn. Gall babanod gael symptomau cyffredinol iawn, fel bod yn flinedig iawn, ddim yn bwyta’n dda neu’n methu ennill pwysau. Gan fod TB sy’n effeithio ar yr ysgyfaint yn heintus, mae’n bwysig eich bod yn ymwybodol o’r symptomau y gallai babanod, plant hŷn ac oedolion eu cael.

Dylech gysylltu â meddyg os oes gennych chi, eich plentyn neu aelod arall o’ch teulu neu ffrind unrhyw un o’r canlynol:

Gall yr holl symptomau yma gael eu hachosi gan broblemau eraill.

Pa mor gyffredin yw TB?

Mae TB yn llawer llai cyffredin yn y DU nag yr oedd, ond mae nifer yr achosion wedi bod yn codi ers 1990. Yng Nghymru, mae TB dal yn gyflwr eithaf anghyffredin, gyda thua 100 o achosion yn cael diagnosis bob blwyddyn.

Sut mae fy mhlentyn yn cael ei imiwneiddio?

Bydd eich plentyn yn cael y brechiad BCG yn rhan uchaf ei fraich chwith.

Fel rheol cynigir y brechiad yn fuan ar ôl iddo gael ei eni, tra mae eich babi dal yn yr ysbyty, ond gellir ei roi ar unrhyw adeg mewn clinig arbenigol.

Oes unrhyw sgîl-effeithiau o'r brechiad?

Yn syth ar ôl y brechiad, bydd swigen fechan yn ymddangos. O fewn dwy i chwe wythnos, bydd smotyn bach yn ymddangos a bydd yn diferu efallai. Mae hyn yn gwbl normal. Cofiwch wneud yn siŵr ei fod yn cael aer, peidiwch â'i wasgu a pheidiwch â thynnu unrhyw gramen sy'n ffurfio. Weithiau, efallai y bydd angen gwarchod yr ardal gyda dresin sych. Cewch ymolchi eich plentyn a mynd ag o i nofio fel arfer. Efallai y bydd y briw yn cymryd misoedd i wella'n llwyr ac mae craith fechan yn debygol o fod yno am byth.

! Os ydych chi'n bryderus neu'n meddwl bod y briw wedi'i heintio, ewch i weld eich meddyg.

Oes unrhyw resymau pam na ddylai fy mhlentyn gael brechiad BCG?

Fel gyda'r rhan fwyaf o frechiadau eraill, efallai na fydd y brechiad yn cael ei roi, neu dylid oedi cyn ei roi, os yw'r canlynol yn berthnasol i'ch plentyn:

- mae ganddo dymheredd uchel; neu
- mae'n dioddef o haint cyffredinol ar y croen. (Os oes gan eich plentyn ecsema, bydd y nyrs neu'r meddyg yn dewis safle brechu heb fod yn ddolurus, wedi cracio neu'n llidus.)

Yn anaml iawn, mewn plant sydd â systemau imiwnedd gwan, gall y bacteria yn y brechiad achosi haint difrifol. Mae'n bwysig iawn eich bod yn dweud wrth y nyrs neu'r meddyg os oes gan eich plentyn system imiwnedd wan, neu os oes amheuaeth am hynny.

Er enghraifft:

- mae eich plentyn yn cael triniaeth am ganser neu gyflwr difrifol arall;
- fe gawsoch chi therapi biolegol imiwnoddiffygiant tra oeddech yn feichiog;
- mae hanes teuluol o broblemau gyda'r system imiwnedd (er enghraifft, HIV neu imiwnoddiffygiant cyfun difrifol (SCID)); neu
- mae gan eich plentyn (neu gall fod â) SCID.

Oes angen i mi wybod unrhyw beth arall?

Dylai eich babi ddechrau cael ei imiwneiddio'n ddau fis oed, dim ots pryd mae'n cael ei frechiad BCG. Dylech wneud yn siŵr nad yw eich plentyn yn cael brechiad arall yn yr un fraich â'r BCG am o leiaf dri mis wedyn (fel arall, gall y chwarennau yn yr ardal honno chwyddo).

Mae'n bwysig gwneud yn siŵr bod cofnod o'r brechiad BCG yng Nghofnod Iechyd Personol (llyfr coch) eich plentyn.

Os yw eich ateb i unrhyw rai o'r cwestiynau canlynol yn **gadarnhaol**, dylech ofyn i'ch meddyg neu nyrs am frechiad BCG i'ch plentyn:

- Ydi eich plentyn, neu ydi un o'i rieni neu ei deidiau a'i neiniau, o wlad sydd â chyfraddau uchel o TB?(Os nad ydych yn siŵr, siaradwch â gweithiwr iechyd proffesiynol.)
- Ydi eich plentyn wedi byw am fwy na thri mis mewn gwlad sydd â chyfraddau uchel o TB, neu'n debygol o wneud hynny?
- Oes unrhyw un yn eich tŷ, neu unrhyw un arall, sy'n debygol o gael cyswllt hir â'ch plentyn ac sydd naill ai â TB neu wedi ei gael yn y gorffennol, neu'n dod o wlad sydd â chyfraddau uchel o TB?

! Cofiwch, mae trin TB yn cymryd llawer o amser – mae ei atal yn gymaint haws.

Ble mae cael mwy o wybodaeth?

Os oes gennych chi unrhyw gwestiynau neu os ydych chi eisiau mwy o wybodaeth, ewch i **111.wales.nhs.uk**, siaradwch â'ch meddyg neu nyrs neu ffoniwch **GIG 111 Cymru**.

Os nad yw **111** ar gael yn eich ardal chi, ffoniwch **0845 46 47**. Mae galwadau o linellau tir a ffonau symudol yn costio 2c y funud (a ffi arferol eich darparwr ffôn).

Mae rhestr sy'n dangos pa frechiadau a gynigir i bawb yng Nghymru ar gael o: **icc.gig.cymru/AmserlenGyflawn**

Gallwch gael gwybod mwy am y brechiad BCG a'i sgîl-effeithiau posib yn: **www.medicines.org.uk/emc/product/9890/pil#about-medicine**

Gallwch roi gwybod am unrhyw sgîl-effeithiau rydych chi'n eu hamau ar-lein yn **www.mhra.gov.uk/yellowcard** neu drwy lawrlwytho'r ap Yellow Card neu drwy ffonio **0800 731 6789** (Llun - Gwener, 9am i 5pm).

Gallwch gysylltu â'r elusen TB Alert ar **020 8969 4830**
neu e-bost: **contact@tbalert.org**

I gael gwybod sut mae'r GIG yn defnyddio eich gwybodaeth, ewch i: **111.wales.nhs.uk/amdanomni/eichgwybodaeth**

I archebu rhagor o gopïau o'r daflen hon, ewch i: **icc.gig.cymru/adnoddau-gwybodaeth-iechyd**

Fersiwn 1 | Chwefror 2025
© Ymddiriedolaeth y GIG Iechyd Cyhoeddus Cymru
ISBN 978-1-83766-577-8

Where can I get more information?

If you have any questions or want more information, you can visit **111.wales.nhs.uk**, talk to your doctor or nurse or call **NHS 111 Wales**.

If **111** is not available in your area, please call **0845 46 47**. Calls from landlines and mobiles cost 2p per minute (plus your telephone provider's usual charge).

A schedule showing which immunisations are routinely offered in Wales is available from: **phw.nhs.wales/CompleteSchedule**

You can find out more about the BCG vaccine and possible side effects at: **www.medicines.org.uk/emc/product/9890/pil#about-medicine**

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

You can contact the charity TB Alert on **020 8969 4830** or email: **contact@tbalert.org**

To find out how the NHS uses your information, visit: **111.wales.nhs.uk/AboutUs/Yourinformation**

To order more copies of this leaflet, visit: **phw.nhs.wales/health-information-resources**

Crystal Mark 23796
Clarity approved by Plain English Campaign

Version 1 | February 2025
© Public Health Wales NHS Trust
ISBN 978-1-83766-577-8

Rarely, in children who have weakened immune systems, the bacteria in the vaccine can cause serious infection. It is very important that you tell the nurse or doctor if your child has, or is suspected of having, a weakened immune system.

For example:

- your child is having treatment for cancer or another serious condition;
- you had immunosuppressive biological therapy while pregnant;
- there is a family history of problems with the immune system (for example, HIV or severe combined immunodeficiency (SCID)); or
- your child has (or might have) SCID.

Do I need to know anything else?

Your baby should start their routine immunisations at two months of age, regardless of when they have their BCG vaccination. You should make sure that your child is not given another injection in the same arm as the BCG for at least three months afterwards (otherwise the glands in that area may swell).

It is important to make sure that there is a record of the BCG vaccination in your child's Personal Child Health Record (red book).

If you answer **'Yes'** to any of the following questions, you should ask your doctor or nurse about a BCG vaccine for your child.

- Is your child, one of their parents or a grandparent from a country with high rates of TB? (If you're not sure, talk to a health professional.)
- Has your child lived for more than three months in a country with high rates of TB, or are they likely to?
- Has anyone in your household, or anyone else who is likely to have prolonged contact with your child, got TB, had TB in the past, or come from a country with high rates of TB?

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

How common is TB?

TB is much less common in the UK than it was, but the number of cases has been rising since 1990. In Wales, TB is still a fairly uncommon condition, with around 100 cases diagnosed each year.

How is my child immunised?

Your child will be given the BCG injection in the upper part of their left arm.

The vaccination is usually offered soon after birth while your baby is still in hospital, but it can be given at any time in a specialist clinic.

Are there any side effects from the vaccine?

Immediately after the injection, a raised blister will appear. Within two to six weeks a small spot will appear and may weep or ooze. It is completely normal for this to happen. Leave it open to the air, do not squeeze it and try not to dislodge any scab that may have formed. Occasionally, you may need to protect the sore area with a dry dressing. You can wash and bath your child and take them swimming as normal. The sore may take several months to heal completely, and a small scar is likely to remain.

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

Are there any reasons why my child should not have the BCG vaccination?

As with most other immunisations, the injection may not be given or should be delayed if your baby:

- has a high fever; or
- is suffering from a generalised skin condition. (If they have eczema, the nurse or doctor will choose an injection site that is not inflamed, cracked or sore.)

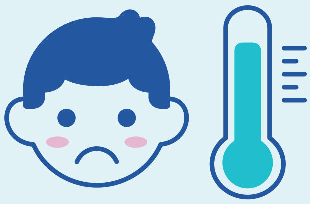
What are the symptoms of TB?

The symptoms of TB can vary depending on which part of the body is affected. Also, the signs of disease in a baby may be different from those in an adult or child. Babies may have very general symptoms such as being extremely tired, not eating well and failing to gain weight. As TB that affects the lungs is infectious, it is important that you are aware of the symptoms that babies, older children and adults could have.

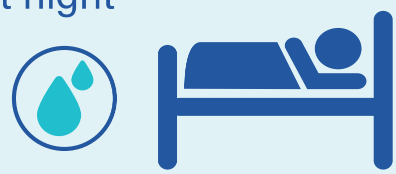
You should contact a doctor if you, your child, any other member of your family or a friend has any of the following:

A persistent cough that lasts for more than three weeks

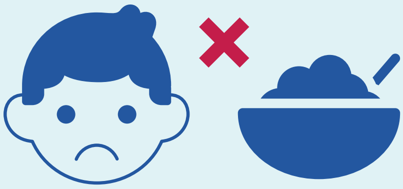
A fever



Heavy sweating at night

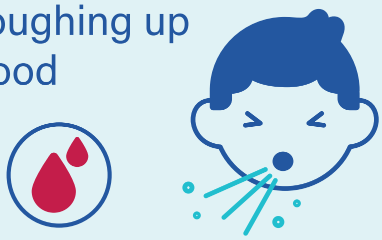


Loss of appetite



Being very tired

Coughing up blood



Unexplained weight loss or, for babies and children, failure to gain weight appropriately for their age

All of these symptoms may also be caused by other problems.

Why is my child being offered the BCG vaccine?

The BCG vaccine is offered to babies and young children who are more likely 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. Cases of TB can be found all over the world, including in South-East Asia, sub-Saharan Africa and some countries in Eastern Europe.

For a list of countries with high rates of TB visit: **www.gov.uk/government/publications/tuberculosis-tb-by-country-rates-per-100000-people**

If you are not sure whether your child is likely to come into contact with anyone who has had TB, talk to a health professional. With increasing numbers of people travelling around the world, the risk of people coming into contact with the disease also increases.

What is TB?

TB is a serious disease that usually affects the lungs but can affect any part of the body. TB often develops slowly, and it can take several months for symptoms to appear. Most people in this country 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 or throat cough or sneeze. However, it usually needs close contact with an infectious person over a long time to catch the disease. Not everyone with TB in their lungs is infectious. Once they are taking the right treatment, most people will stop being infectious after about two weeks.

GIG CYMRU NHS WALES | Iechyd Cyhoeddus Cymru / Public Health Wales

Mae Brechu yn achub bywydau
Vaccination saves lives

BCG vaccine for babies and children

This leaflet is about the BCG vaccination that is being offered to protect your child against tuberculosis.

What is the BCG vaccine?

The BCG vaccine contains a weakened form of the bacteria (germs) that cause tuberculosis (TB). The vaccine doesn't cause TB, but it helps your child develop protection (immunity) against it in case they ever come into contact with it. The BCG vaccination is particularly effective in protecting babies and young children against the more rare and severe forms of TB, such as TB meningitis (swelling of the protective coverings around the brain).