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# Meningitis B

Protecting your baby against meningitis and septicaemia caused by meningococcal B bacteria



Information about MenB vaccine and recommended paracetamol use



This leaflet includes information about the MenB vaccine and the disease it will help protect against. It also includes information about the use of paracetamol after vaccination.

Two serious types of infection meningitis (inflammation of the lining of the brain) and septicaemia (blood poisoning) are usually caused by MenB. There is a vaccine to help protect against MenB infection.

Parents fear meningitis and septicaemia because they:

- come on suddenly
- progress very quickly
- can kill in hours
- can leave survivors with life-long disabilities.

## What is meningitis?

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

## What is septicaemia?

Septicaemia (blood poisoning) is a serious, life-threatening infection that gets worse very quickly. The risk of death is higher than with meningitis.

## What is MenB?

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

Most cases of meningitis and septicaemia in the UK are caused by the B type, especially in young children and teenagers. In the last 20 years between 500 and 1,700 people developed MenB disease every year in England and Wales. Around half of these cases occurred in children under five years of age. The meningococcal bacteria can also cause outbreaks in nurseries, schools and universities.

## **How does MenB spread?**

MenB bacteria live in the throat of about 1 in 10 of the population 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.

## **How do the MenB bacteria cause serious illness?**

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

## **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 strike at any age, so it is important to know the signs and symptoms of the diseases.

The signs and symptoms of meningitis and septicaemia shown below can appear in any order, some may not appear at all, and may include:



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/seizures

Source: [meningitisnow.org](http://meningitisnow.org)



The typical rash of meningococcal septicaemia does not fade when you press it. You can test for it by pressing the side of a clear glass firmly against the skin (see picture). Not all children develop this typical rash which usually starts as small pinpricks but spreads rapidly to form deep purple patches. 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, trust your instincts, get medical help urgently. If you can't get in touch with your doctor, attend the emergency department of your nearest hospital.



## **Can MenB disease be treated?**

MenB disease needs urgent admission to hospital and rapid treatment with antibiotics. If treatment is started quickly, individuals are more likely to avoid disability or death.

## Can MenB disease be prevented?

Yes. The MenB vaccine is designed to protect against most MenB infections. Since the vaccine was introduced the number of MenB cases in infants has dropped by around half.

## How will I know when immunisations are due?

Children are sent an appointment to have their MenB vaccination at the appropriate age. Most surgeries and health centres run special immunisation or baby clinics.

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

- two months, normally in the left thigh
- four months, normally in the left thigh
- 12–13 months, normally in the left thigh.

## This means my baby will have four vaccinations in one session between 12 and 13 months of age. Isn't that too much?

No; from birth, babies' immune systems protect them from the germs that surround them. Without this protection, babies would not be able to defend against the tens of thousands of bacteria and viruses that cover their skin, nose, throat and intestines. This protection carries on throughout life.

Studies have shown it is safe to have these four vaccinations at the same time and your baby will be protected from some very serious infections without delay. The vaccinations will be given in one session when your baby is between 12 and 13 months of age.

## **What if babies miss 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.

## **Does the MenB vaccine have any side effects?**

Your baby may get some redness and soreness where the vaccine was given and may be a bit irritable or feel poorly for a few days. The most common side effect of the vaccine is fever (a high temperature – above 37.5°C). You should give your baby the correct dose of infant strength paracetamol liquid straight after each of the first two doses of MenB vaccine to help reduce the risk of your baby getting a fever and to reduce the symptoms if fever does occur.

## **When should I give the paracetamol to my baby?**

You should give the first dose as soon as possible after the vaccination. Use only infant strength (120mg/5ml) paracetamol suspension. For very premature babies (born before 32 weeks gestation), paracetamol



should be prescribed by your doctor. One dose for a baby 2–6 months is half a teaspoon, or 2.5ml, measured using the spoon or syringe provided. Then give the second dose four to six hours after the first one and the third dose four to six hours after the second. You will need to do this after each of the first two MenB vaccinations.

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

Don't give the first dose before your vaccine visit, because your nurse will first need to check that your child doesn't have signs of an existing infection that can sometimes be a reason to delay vaccination.

## **What if my baby spits out the paracetamol?**

This doesn't usually happen, but if your baby spits out more than half the paracetamol within a few minutes of having it, then you can repeat the dose of paracetamol again straight away.

## **How do I treat my baby if he or she has a fever?**

The paracetamol should help to prevent fever after vaccination. If your baby still has a fever after the first three doses of paracetamol,

but is otherwise well, you can continue giving your baby paracetamol for up to 48 hours. You should always leave at least four hours between doses and never give more than four doses in a day. You can try to keep your baby cool by making sure they don't have too many layers of clothes or blankets on. If your baby is unwell, trust your instincts and speak to your GP or call NHS Direct Wales on **0845 4647**.

*If 48 hours after vaccination your baby still has a fever you should speak to your GP or call NHS Direct Wales on **0845 46 47**.*

## **Does my baby need paracetamol with the second set of vaccinations at three months?**

The risk of fever is lower when the routine infant vaccinations are given **without** the MenB vaccine. Your baby will not receive the MenB vaccine at the three month vaccinations, so the risk of fever is lower. However, if your baby does get a fever and seems unwell, you can give your baby paracetamol at that time.

## **Does my baby need paracetamol with the booster vaccinations at 12–13 months?**

At 12–13 months, the risk of fever after routine vaccinations with or without the MenB is similar. So, your baby does not need three doses of paracetamol with their routine 12–13 month vaccinations. However, if your baby does get a fever and seems unwell, you can give your baby paracetamol at that time.

## **Can babies under three months of age have paracetamol?**

The patient information leaflet that comes in a pack of paracetamol may say that no more than two doses should be given to children aged two to three months without talking to a doctor or pharmacist. This was recommended because fevers in young children can be caused by an infection. Recently, experts have advised that after the vaccines given at two months of age, it is safe to give paracetamol for up to 48 hours. This is because it is much more likely that fever after vaccination is caused by the vaccine rather than an infection. The advice on the patient information leaflet is expected to change to fit with this advice soon.

*Do not give your baby other medicines unless they have been prescribed by your doctor.*

*Never give medicines containing aspirin to children under 16 years.*

## **Are there any babies who shouldn't have the vaccination?**

The vaccine should not be given to babies who have had a severe life threatening reaction to a previous dose of the vaccine, or any ingredient in 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, the vaccinations can be given as normal. If your baby is ill with a fever, put off the immunisation until your baby has recovered.

If your baby:

- has a bleeding disorder (for example, haemophilia, where the blood doesn't clot properly)
- has had a fit not caused by fever.

Speak to your doctor, practice nurse or health visitor before your child has any vaccination.

The MenB vaccine helps protect infants and young children from meningitis and septicaemia caused by the MenB bacteria but other bacteria and viruses can also cause these conditions.

## Does my baby have to be vaccinated?

In the UK, parents can decide whether or not to have their children immunised.

Vaccination is recommended because it gives your baby protection against serious diseases, most of which can kill. Around the world, many children are now routinely protected with vaccines. Because of this, some of the world's most serious diseases may soon disappear.

## Yellow Card scheme

Members of the public can report suspected side effects of vaccines and medicines through the Yellow Card scheme.

This can be done by visiting [www.yellowcard.gov.uk](http://www.yellowcard.gov.uk) or by calling the Yellow Card hotline on **0808 100 3352** (available Monday to Friday, 10:00–14:00).

## Where can I get more information?

You can find out more about the vaccine used including vaccine contents and potential side effects at [www.medicines.org.uk/emc/](http://www.medicines.org.uk/emc/) by entering Bexsero® in the search box and looking at the patient information leaflet (PIL).

The routine immunisation schedule showing which immunisations are offered in Wales is available from [www.nhsdirect.wales.nhs.uk/livewell/vaccinations/Leaflets/](http://www.nhsdirect.wales.nhs.uk/livewell/vaccinations/Leaflets/)

If you have any questions or want more information, talk to your doctor or nurse or call NHS Direct Wales on **0845 4647** or visit [www.nhsdirect.wales.nhs.uk](http://www.nhsdirect.wales.nhs.uk)

Or contact:

**Meningitis Research Foundation**  
**0808 8003 344 / [www.meningitis.org](http://www.meningitis.org)**

**Meningitis Now**  
9:00-17:00 (Monday-Friday)  
**0808 8010 388 / [www.meningitisnow.org](http://www.meningitisnow.org)**

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