



Diseases prevented by the routine 18 month vaccinations

Information for parents

Which vaccinations are offered to children at 18 months of age?

The Department of Health recommends the following vaccinations for children at 18 months of age:

Non-Aboriginal children:

One injection of the chicken pox vaccine (Varilrix)

Aboriginal children:

One injection of the chicken pox vaccine (Varilrix)

One injection of the pneumococcal vaccine (Pneumovax 23)

One injection of the Hepatitis A vaccine (Vaqta)

These vaccinations give your child maximum protection against the following diseases:

Chickenpox is a common acute viral infection that can come on quickly. This infection is passed from person to person by coughing, sneezing and direct contact with the fluid in the blisters of the rash. This is why it is very important to wash hands after touching the rash. It takes 14 to 16 days for symptoms to appear after exposure and the person is infectious from two days before the rash appears (that is, during the coughing, runny nose stage) until all blisters have formed crusts, usually five days.

Symptoms include fever, fatigue and a generalised rash characterised by small

blisters. The chickenpox rash (blisters) gradually develops all over the body.

Pneumococcal is a common acute bacterial infection that is passed from person to person through airborne and droplets spread by coughing, sneezing, kissing or contact with items such as toys that have been freshly soiled by throat or nose discharges, for example, when the child puts it in their mouth.

It takes three to four days for symptoms to appear after exposure and the person remains infectious until the bacteria are no longer present in nose and throat secretions.

Symptoms depend on which part of the body the pneumococcal bacterium infects, for example:

- if it gets into the blood stream, it causes bacteraemia
- if it gets into the brain it causes meningitis
- if it gets into the lungs it causes pneumonia
- if it gets into the middle ear it causes otitis media

Hepatitis A is a viral infection of the liver. Transmission to others occurs through direct contact with stools and poor hand hygiene. It can also be spread through contaminated water or food (when stools get into the water supply or onto food). It can take 15–50 days (usually 28–30 days) after exposure for symptoms to show.



The infected person remains infectious in the two weeks before yellowing of the skin/eyes (jaundice) occurs, and then slightly infectious for the week following.

Children under the age of three years rarely have symptoms. Older children and adults are more likely to have symptoms lasting 1–2 weeks, or in severe cases, up to several months. Symptoms when present may include abdominal discomfort, loss of appetite, nausea, low grade fever and tiredness, sometimes followed by yellow skin and eyes, dark urine and pale stools.

The best way to stop the spread of hepatitis A is by careful hand washing with soap and warm water:

- after going to toilet or changing nappies
- before eating
- before preparing food

This vaccine is offered to all Aboriginal children at 12 months of age and a booster dose at 18 months of age.

What do you need to tell the doctor or nurse when taking your child for a vaccination?

Please let the doctor or nurse know if your child:

- is unwell at the time of vaccination
- has had a severe reaction following any vaccination
- has a severe allergy
- has had a live vaccine within the last month (e.g. tuberculosis, measles, mumps, rubella, yellow fever)
- has had an injection of immunoglobulin or a whole blood transfusion in the last 3 months

- has a disease that lowers immunity, (e.g. leukaemia, cancer, HIV/AIDS) or is having a treatment which lowers immunity (e.g. steroid drugs such as hydrocortisone or prednisolone, radiotherapy, chemotherapy)
- lives with someone who has a disease/illness that lowers immunity or who is having treatment that lowers immunity
- has a medical condition affecting the brain or spinal cord
- is living with someone who is not immunised.

Vaccinations are available from participating GPs, community health immunisation clinics, local government authorities or Aboriginal medical services.

