## **Vaccines for life**

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Prof Nurs Today 2023;27(1):17-18

Republished from: SAPA. 2023;23(1):24-25

Vaccines work by stimulating the immune system's defence mechanisms to recognise an infectious agent and destroy it before it can make the person ill. Children under five years of age are more susceptible to disease as their immune systems are not fully developed.

Delays or disruptions in children receiving their scheduled vaccines have occurred for various reasons, such as misinformation, vaccine hesitancy, the COVID-19 pandemic, poverty and conflict. As a consequence, outbreaks of vaccine-preventable diseases, such as measles, are occurring around the world and in South Africa.

Certain vaccines are recommended throughout the lifetime of an individual. Infants are susceptible to diseases at a very young age. Therefore, they need to receive vaccines as early as possible after birth, receiving booster doses as they age to extend the protection.

South Africa's Expanded Programme of Immunisation (EPI) (Figure 1) provides the following free routine immunisations to infants and children from birth until 12 years of age:

- BCG (tuberculosis vaccine)
- Oral polio vaccine
- Rotavirus vaccine
- 6-in-1 combination vaccine protecting against tetanus, pertussis, polio, *haemophilus influenzae type b*, and hepatitis B
- Pneumococcal vaccine
- Measles vaccine
- Tetanus and diphtheria combined vaccine

In addition to these vaccines, a vaccine is provided to females in public schools from nine years of age that protects against cancer caused by the human papillomavirus. Other vaccines are available in the private sector and may be given as an alternative to, or in addition to, the vaccines available in the government sector. These vaccines include, amongst others, the measles-mumps-rubella vaccine (MMR), the chickenpox vaccine, the hepatitis A vaccine and the meningococcal meningitis vaccine.

## Age of cl How and where it is given BCG Bacilles Calmette Guerin At birth Right arm OPV (0) Oral Polio Vaccine Drops by mouth 6 weeks OPV (1) Oral Polio Vaccine Drops by mouth RV (1) Rotavirus Vaccine Liquid by mouth DTaP-IPV-Hib-HBV (1) Diphtheria Intramuscular/left thigh Tetanus, Acellular Pertussis, Inactivated Polio Vaccine and Haemophilus Influenzae Type B and Hepatitis B Combined PCV (1) Pneumococcal Conjugated Intramuscular/ right thigh 10 weeks DTaP-IPV-Hib-HBV (2) Diphtheria, Intramuscular/left thigh Tetanus, Acellular Pertussis, Inactivated Polio Vaccine and Haemophilus Influenzae Type B and Hepatitis B Combined 14 weeks RV (2) Rotavirus Vaccine Liquid by mouth DTaP-IPV-Hib-HBV (3) Diphtheria. Intramuscular/left thigh Tetanus Acellular Pertus Inactivated Polio Vaccine a Haemophilus Influenzae Type B and Hepatitis B Combined PCV (2) Pneumococcal Conjugated Intramuscular/right thigh Measles Vaccine (1)\*\* 6 months Subcutaneous/left thigh 9 months PCV(3) Pneumococcal Conjugated Intramuscular/right thigh Vaccine 12 months Measles Vaccine (2)\*\* Subcutaneous/right arm 18 months DTaP-IPV-Hib-HBV (4) Diphtheria. Intramuscular/left arm Tetanus, Acellular Pertussis, Inactivated Polio Vaccine and Haemophilus Influenzae Type B and Hepatitis B Combined 6 years (both boys and girls) Td Vaccine Tetanus and reduced Intramuscular/left arm ength of Diphtheria 12 years (both boys and girls) Td Vaccine Tetanus and reduced strength of Diphtheria Vaccine Intramuscular/left arm

\*Rotavirus Vaccine should NOT be administered after 24 weeks \*\*Do not administer with any other vaccine



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Figure I: The current EPI schedule

## EXPANDED PROGRAMME ON IMMUNISATION – EPI (SA) REVISED CHILDHOOD IMMUNISATION SCHEDULE FROM DECEMBER 2015

The prevention of outbreaks of vaccine-preventable diseases, many of which haven't been seen for years, depends on routine vaccines being given at the correct time to as many children as possible. It is estimated that 25 million infants went without routine lifesaving vaccines in 2021. Every clinic visit should be seen as an opportunity to review the child's vaccination card and, if necessary, catch up any vaccines that the child may have missed in the past.

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