

IMMUNIZATION WEEK

National Immunization Awareness Week 2020



FAQ on Immunization

Let's answer the questions you asked !

Should we vaccinate our children against the flu next year if we are expecting a second wave of COVID-19?

Yes!

There is **no relationship between influenza infection and COVID-19 infection**; they are separate viruses. While social distancing and infection control measures may decrease the circulating rate of influenza in the community, that does not change the effectiveness of the flu vaccine against influenza each year. We do not yet know how effective social distancing or other non-vaccine measures alone will be in decreasing rates of influenza.

Just as we are looking hopefully towards the possibility of a COVID-19 vaccine to reduce the significant burden of that virus on our community and our world, we already have **an annual flu shot that has been scientifically proven and tested to reduce the widespread burden of disease of influenza**. The flu vaccine “prevents tens of thousands of hospitalizations each year” and has been shown to significantly reduce a child’s risk of dying from the flu. We encourage you to get your influenza vaccination next fall, regardless of the COVID-19 situation, to ensure you and your family don’t get sick, or develop a serious or fatal complication of influenza, such as pneumonia or requiring hospitalization. People at higher risk of complications from the influenza vaccine are very young children, those who have lung or heart diseases, certain chronic health conditions or weakened immune systems, or seniors.

Using the same logic as we wait for a vaccine against COVID-19, please remember that vaccines save lives, including the flu shot.

We encourage you to get your influenza vaccination next fall, regardless of the COVID-19 situation, to ensure you and your family don’t get sick, or develop a serious or fatal complication of influenza.



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Why does a baby needs the hepatitis B vaccine at an early age when they are obviously not involved in drugs or at risk sexual behavior and no one in the family either?

Interesting one!

In British Columbia, Hepatitis B vaccination is provided as part of their routine immunizations at 2, 4, and 6 months of age, and again to certain children in Grade 6 if they did not receive the immunization in infancy . The timing of the vaccination schedule is slightly different in each province or territory in Canada.



As per Health Link BC, “Hepatitis B is a virus that attacks the liver. It can cause serious disease including permanent liver damage (cirrhosis). Hepatitis B is also one of the main causes of liver cancer, which can be fatal. **Hepatitis B virus is spread from one infected person to another by contact with blood or body fluids.** This includes an accidental or intentional poke with a used needle, being splashed in the mouth, nose, or eyes with infected blood, being bitten by an infected person, sharing items that may have blood on them such as a toothbrush, dental floss or razor, and by having unprotected sex with someone infected with the hepatitis B virus. **Mothers who are infected with hepatitis B virus can pass the virus to their newborn babies during delivery.**”

Infants who are infected with Hepatitis B are more likely to develop chronic disease, compared to adult counterparts. The recommended schedule is designed to protect children when they are vulnerable and before they are potentially exposed to vaccine-preventable diseases, especially prior to exposure at a young age where their immune system may be less mature.

Not all cases of hepatitis B are from high risk behaviours; for example, Hepatitis B is more endemic in certain parts of the world (including Asia). In areas of high Hepatitis B endemicity, it is most commonly spread vertically or horizontally during the first five years of life. Although cases are less common in Canada compared to other parts of the world, even in Canada, **a significant portion of cases are still from direct vertical transmission**

(from mother to baby during delivery) and from horizontal transmission during infancy or early childhood from a household contact, driving some provinces like British Columbia to vaccinate against Hepatitis B in infancy.

While not all provinces in Canada vaccinate in infancy, there are certain advantages in doing so. There is a combination vaccination available, so that we can immunize against Hepatitis B without adding additional shots. This also makes it easy to implement as a

universal program, and rates of uptake of the vaccine are higher than those of adolescent programs. Especially when given as part of a hexavalent vaccine along with other routine infant immunizations, it is cost-effective compared to a separate adolescent immunization program. The National Advisory Committee on Immunization (NACI) currently recommends either universal infant or adolescent HB immunization in Canada, but does not state a preference for one of these strategies over the other.

VACCINATE YOUR BABY AGAINST HEPATITIS B
IT COULD SAVE YOUR BABY'S LIFE.

WHAT IS HEPATITIS B?

- HEPATITIS B** is a serious liver disease caused by the **HEPATITIS B VIRUS**.
- HEPATITIS B OFTEN DOESN'T CAUSE SYMPTOMS.** Many people can live with hepatitis B for years without feeling sick.
- 1 IN 4** people living with hepatitis B can develop serious liver problems, **INCLUDING LIVER CANCER.**

DID YOU KNOW?

- All pregnant women are routinely tested for hepatitis B.
- People who find out they have hepatitis B can take steps to keep their baby and family protected.
- The **HEPATITIS B VACCINE** is the 1st cancer prevention vaccine.

How can we minimize pain during vaccination?

There are many ways to prepare a child for a more positive, less painful experience when going for their routine vaccinations.

ImmunizeBC and It Doesn't Have to Hurt has some excellent recommendations on this topic. The main takeaways include:

- **Prepare your child before the visit.** If they are old enough to understand, explain the importance of the vaccines, the process by which they are given, and be supportive.
- **Speak honestly**, and don't focus on statements such as "it will be over soon" as they can cause more distress. Remember that, "Your child is sensitive to your language and tone. If you speak positively about vaccines, your child is more likely to feel positive about it as well."
- For young children, **comfort your child** at the appointment by providing a cuddle comfortable seated position on your lap, providing distractions, breastfeeding or providing a sucrose solution to the baby.
- **Distractions**, including songs, games, bubbles, and taking deep breaths can help with a child's vaccination experiences. Older children can try muscle tension techniques.
- **Sometimes numbing creams or patches can be used**, and can be purchased without a prescription from most pharmacies.
- For more resources to share with families, check out at <https://itdoesnthavetohurt.ca/resources/>



Is there any mercury in vaccines?

Thimerosal is an ethyl mercury derivative

When some patients ask about mercury in vaccines, they are thinking about Thimerosal. Thimerosal is an ethyl mercury derivative. It is a preservative used only in multi-dose vials of vaccines, and not in single-dose vials or syringes. Low doses of thimerosal have not been shown to produce any negative health effects. Nevertheless, no vaccine in Canada since March 2001 for routine use in children contains thimerosal, with the exception of some influenza vaccines. DTaP, polio and Hib vaccines have not contained this preservative since 1997-98. The MMR vaccine used in Canada has never contained thimerosal.

Curious what adjuvants, preservatives, and other additives are in vaccinations? Patients asking you about a specific one? Check out the Canada immunization guide here: <https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-1-key-immunization-information/page-15-contents-immunizing-agents-available-use-canada.html#p1c14a2>

When can I blame a fever on a recent immunization?

Fevers and other minor side effects from vaccinations (including soreness and redness around the site of the immunization) typically only last 1-2 days after the immunization itself.

The fevers associated with vaccines are generally not harmful and can be treated symptomatically, including offering more to drink, or allowing your child to breastfeed more if they breastfeed; keeping them comfortable including removing extra layers of clothing, and treating the fevers with antipyretics.



Do too many vaccines at once overwhelm the immune system?

Vaccines train the immune system to recognize and fight certain viruses or bacteria. The vaccines contain small doses of certain molecules, called antigens, from the disease, which trigger and train the body to build an appropriate immune response to that disease. So, then you are equipped to fight the disease in real life, if you were ever exposed to it again.

Our bodies encounter many more antigens like this during daily living, than we do through a vaccination dose. Our immune systems are actually built strong to handle thousands of antigens per day! And, over the last 3 decades, we have significantly decreased the number of antigens in today's vaccines to a very minimal dose. For example, in 1980 the diphtheria, tetanus and acellular pertussis (DTaP) vaccine had 3017 antigens. At present, infants receiving recommended vaccines starting at two months of age come into contact with only 34 antigens – just 34 antigens among the millions handled every day by our immune systems.




Immunization Schedule for B.C. Infants and Children

Vaccine	2 Months	4 Months	6 Months	12 Months	18 Months	Starting at 4 Years of Age (Kindergarten Entry)
Chickenpox (Varicella) Vaccine (#44b) ¹				<input checked="" type="checkbox"/>		
Diphtheria, Tetanus, Pertussis, Hepatitis B, Polio, and Haemophilus influenzae type b (DTaP-HB-IPV-Hib) Vaccine (#105)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
Diphtheria, Tetanus, Pertussis, Polio, Haemophilus influenzae Type b (DTaP-IPV-Hib) Vaccine (#15b)					<input checked="" type="checkbox"/>	
Hepatitis A Vaccine (#33) Indigenous children only			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
Inactivated Influenza (Flu) Vaccine (#12d) ²			<input checked="" type="checkbox"/> Annually for children 6 months to 4 years of age			
Measles, Mumps, Rubella (MMR) Vaccine (#14a)				<input checked="" type="checkbox"/>		
Measles, Mumps, Rubella and Varicella (MMRV) Vaccine (#14e) ¹						<input checked="" type="checkbox"/>
Meningococcal C Conjugate (Men-C) Vaccine (#23a)	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		
Pneumococcal Conjugate (PCV 13) Vaccine (#62a)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		
Rotavirus Vaccine (RotaTeq®) (#104)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			
Tetanus, Diphtheria, Pertussis, Polio (Tdap-IPV) Vaccine (#15a)						<input checked="" type="checkbox"/>

TEST YOUR KNOWLEDGE ON VACCINATION !

Click here to enter the chance to win a prize from I Boost Immunity

[Immunization Quiz](#)

EARN A VACCINE FOR SOMEONE IN NEED BY ANSWERING A QUIZ!

Click here to beat the average score, and I Boost Immunity will donate one vaccine to someone in need through UNICEF Canada. You could immunize a whole family, or even a village!

[Beat the quiz, Earn vaccines !](#)

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