



# 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).

## 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](http://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.

# 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.

## 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 bathe 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.)

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.**

## Where can I get more information?

If you have any questions or want more information, you can visit [111.wales.nhs.uk](https://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](https://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](https://www.medicines.org.uk/emc/product/9890/pil#about-medicine)

You can report suspected side effects online at [www.mhra.gov.uk/yellowcard](https://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](mailto:contact@tbalert.org)

To find out how the NHS uses your information, visit: [111.wales.nhs.uk/AboutUs/Yourinformation](https://111.wales.nhs.uk/AboutUs/Yourinformation)

To order more copies of this leaflet, visit: [phw.nhs.wales/health-information-resources](https://phw.nhs.wales/health-information-resources)





**ICC.GIG.CYMRU/ADNODDAU-GWYBODAETH-IECHYD**  
| archebu rhagor o gopïau o'r daflein hon, ewch i:

**111.WALES.NHS.UK/AMDANOMNI/EICHGWYBODAETH**  
| gael gwylod sut mae'r LIG yn defnyddio eich gwyloddaeth, ewch i:

neu e-bost: [contact@tbalert.org](mailto:contact@tbalert.org)  
Gallwch gysylltu â'r elusen TB Alert ar 020 8969 4830

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

[www.medicines.org.uk/emc/product/9890/pil/about-medicine](http://www.medicines.org.uk/emc/product/9890/pil/about-medicine)  
Gallwch gael gwylod mwy am y brechriad BCG a'i sglil-effeithiau posib yn:

o: **ICC.GIG.CYMRU/AMSERLENGYFLAWN**  
Mae rhestr sy'n dangos pa frechriadau a gyngir i bawb yng Nghymru ar gael  
darparwr ffôn).

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

ffoniwch **LIG 111 CYMRU**.  
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 urys neu

**Ble Mae Gae! Mwy o Wybodaeth?**

## ! Gofiwch, mae trin TB yn gymryd llawer o amser – mae ei atal yn gymanint haws.

- Oes unrhyw un yn eich tŷ, neu unrhyw un arall, sy'n debygol o gael cywstwod o wlad sydd a chyfraddau uchel o TB? hir a'ch plentyn ac sydd naiill ai â TB neu wedi ei gael yn y gorffenol, neu'n
- Ydi eich plentyn wedi byw am fwy na thri mis mewm gwlad sydd a chyfraddau uchel o TB, neu'n debygol o wnedd hyunny?
- Ydi eich plentyn wedi byw am fwy na thri mis mewm gwlad sydd a iechyd proffesiynol).
- Ydi eich plentyn, neu ydi un o'i rieni neu ei deidiau a'i neiniâu, o wlad sydd a chyfraddau uchel o TB? (Os nad ydych yn siŵr, siaradwch â gweithwyr ofyn i'ch meddyg neu nrys am frechriad BCG i'ch plentyn: Os yw eich ateb i unrhyw rai o'r cwestiynau canlynol yn **gadarhauol**, dy�ech lechyd Personal (llyfr coch) eich plentyn.

Mae'n bwysig gwneud yn siŵr bod cofnodi o'r brechriad BCG yng Nghofnodi gall y chwarennau yn yr ardal honno chwyddo). Mae'n cael ei frechriad BCG. Dyllek gwneud yn siŵr nad yw eich plentyn yn cael brechriad arall yn yr un traič a'r BCG am o leiaf dri mis wedyn (fel arall, Dylai eich babi ddechrau cael ei imiwneddio'n ddau fis oed, dim ots pryd

## Deus adegan i mi wybod unrhyw beth arall?

- mae gan eich plentyn (neu gall fod â) SCID.
- mae hanes teuloul o problemau gydair system imiwnedd (er enghraifft, HIV neu imiwnoddifygiant cyfun difrifol (SCID)); neu
- fe gawsoch chi therapi biolwgol imiwnoddifygiant tra oedd eich yn feicchiong;
- mae eich plentyn yn cael triniaeth am ganser neu gyflwr difrifol arall;

Er enghraifft:

Yn anaml iawn, mewm plant sydd a systemau imiwnedd gwan, gall y bacteria wrth y nrys neu'r meddyg os oes gan eich plentyn system imiwnedd wan, neu os oes amheuaeth am hyunny.

- Mae'n dioddef o haint cyffredinol ar y croen. (Os oes gan eich plentyn ddolurus, wedi cracio neu'n lildus.)
- Mae ganddo dymheredd uchel; neu

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

## Deus unrhyw resymau pam na ddyli i fy mhlenstyng ael?

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

Mae hyn yn gwbwl normal. Coffiwrch wneud yn siwr ei fod yn cael aer, pediwrch y bydd angen gwarcnod yr ardal gyda dresin sych. Cewch ymochi eich a'i wasgu a phediwrch â thynnu unrhyw gramen yn ffurfio. Weithiau, efallai chwe wthnos, bydd smotyn bach yn ymddangos a bydd yn dифeru efallai. Yn syth ar ôl y brechriad, bydd swigenn fach yn ymddangos. O fewn dwy i wella'n llwyr ac mae crath fechan yn debygol o fod yno am byth.

## Deus unrhyw sglil-effeithiau o'r brechriad?

Fel rheol cynigir y brechriad yn fun ar ôl iddo gael ei eni, tra mae eich babi dal yn yr ysbty, ond gelir ei roi ar unrhyw adeg mewm clinig arbennigol.

Bydd eich plentyn yn cael y brechriad BCG yn rhian uchaf ei fraich chwirth.

## Sut mae fy mhlenstyng yn cael ei imiwlennidio?

Mae TB yn llawer llai gyffredin 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 diagnostis bob blwyddyn.

## Pa mor gyffredin yw TB?

Gall yr hol symptomau yma gael eu hachosi gan problemau eraill.



Hefyd, mae arwyddion yr afiechyd mewnw babi'n gallu bod yn wahanol i oedolyn neu bleintyn. Gall babanod gael symptomau cyffredinol iawn, fel fod TB sy'n effeithio ar yr ysgyflaint yn heintus, mae'n bwyisig eich bod yn bod yn flinedig iawn, ddim yn bwyta'n dda neu'n methu ennil pwyasu. Gan ymwybodol o'r symptomau y gallai babanod, plant hy'n ac oedolion eu cael. Dylid gysylltu â meddyg os oes gennych chi, eich plentyu neu aelod arall o'ch teulu neu ffrind unrhyw un o'r canlynol:

**Beth yr symptomau TB?**

# Yn eiddo Gwyddonol a Pholys a Phrifysau Cymru

Fel rheol mae TB yn lledeanu pan mae pobl sydd â TB heintus yn eu hysgyfaint neu eu gweddwn pesychu neu'n tisian. Fodd bynnag, fel rheol, mae angen cyswilt agos â pherson heintus dros gyfnd hir o amser i ddal yr afiechyd. Nid yw pawb sydd â TB yn eu hysgyfaint yn heintus. Unwedi maeent yn cael y driniaeth brodol, bydd y rhain fwyaf o bobl yn stopio bod yn heintus ar ôl tua phythefnos.

## Sut mae TB yn cael ei leddeanu?

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 gyrryd misoedd lawer i symptomau ymddangos. Mae'r rhain fwyaf o bobl yn y wlad yma'n gwellach llwyd ar ôl triniaeth ond mae hy'n cymryd misoedd fel rheol.

## Beth yw TB?

Os ydych chi'n an sicr ynglych a yw eich plentyn yn ddebrygol o dodd i gysylltiad ag unrhyw un sydd â TB, siaradwch â gweithwyr iechyd proffesiynol. Gyda niferedd cynyddol o bobl yn teithio o amgylch y byd, mae'r risg i bobl dodd i gysylltiad â'r afiechyd yn cynyddu hefyd.

Am restor o'r gweledydd sydd â chyfraddau uchel o TB e Welch i: [www.gov.uk/government/publications/tuberculosis-tb-by-country-rates-per-100000-people](http://www.gov.uk/government/publications/tuberculosis-tb-by-country-rates-per-100000-people)

Mae brechriad BCG yn cael ei gynning i fabanod a phlant ifanc sy'n fwy tebygol o dodd i gysylltiad â rhywun sydd â TB. Y rheswm am hy'n yw nai llai 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 mhoib cwr o'r byd, gan gynnwys De Dwyrain Asia, Africa Is-Sahara a rhai gweledydd yn Nywrain Ewrop.

## Pam mae fy mhlenydn yn cael cynning brechriad BCG?

Mae brechriad BCG yn cynnwys ffurf weddî'i gwani o ar y bactera (germau) sy'n achosi twbercwllosi (TB). Nid yw'r brechriad yn achosi TB ond mae'n helppu eich plenyn i ddabтыгу gwarchoedeth (imiwnedd) rhagddo os daw ef neu hi i gysylltiad ag o byth. Mae brechriad BCG yn hynd effeithiol am warchod babanod a phlant ifanc rhag y mathau prinnaach a mwy difrifol o TB, fel TB llid yr ymennyd (chwydd yn y gorcheddion gwarhodol o amgylch yr ymennyd).

## Beth yw brechriad BCG?

Mae'r datlen yma am y brechriad BCG sy'n cael ei gynnig i warchod eich plenyn rhag twbercwllosi.

# Brechriad BCG i fabaonad a phlant

