



**When parents
are aware, they
choose the best
possible care**



What you need to know about your baby's vaccinations



As a new parent, keeping track of your little one's vaccinations could be overwhelming. You may have several questions that race through your mind.

Worry not!

This information leaflet is meant to make the process comfortable for you and your little one through tips and tricks that make your journey easier.

Keep reading!

Vaccination can protect your baby from serious infections



A 6-in-1 vaccine given at 6, 10, 14 weeks of age can protect your child against six infectious diseases lurking around the corners.¹

1

Diphtheria- An infection that affects the throat and tonsils and usually spreads through respiratory droplets from coughing or sneezing. It leads to the build-up of a thick, gray coating in the throat or nose.²

2

Pertussis: Also known as whooping cough, due to the characteristic high-pitched whoop noise when a patient breathes in after a coughing fit. Infants can experience severe cough attacks that can make them turn blue or vomit. They are at risk of pneumonia, seizures, lung collapse and death.³

3

Tetanus: Also known as lockjaw, due to the characteristic muscle stiffness that begins in the jaw and neck. Tetanus is a serious infection that can result in death. It can be contracted via infected cuts, as it is commonly found in the natural environment.⁴

4

Poliomyelitis (polio): A highly infectious disease that attacks the central nervous system and brain, potentially resulting in severe and irreversible paralysis and may even result in death.⁵

5

Haemophilus influenzae type b (Hib) can cause meningitis (inflammation of the brain and spinal cord) and may even result in hospitalization.⁶

6

Hepatitis B: A potentially life-threatening infection that attacks the liver, causing characteristic yellowing of the skin. Almost half of all patients will show no signs of infection but may still develop a chronic infection.⁷

1. Kasi SG, et al. Indian Academy of Pediatrics (IAP) Advisory Committee on Vaccines and Immunization Practices (ACVIP): Recommended Immunization Schedule (2020-21) and Update on Immunization for Children Aged 0 Through 18 Years. Indian Pediatr. 2021 Jan 15;58(1):44-53. 2. Centers for Disease Control and Prevention [Internet]. About Diphtheria | CDC; [cited 2023 Feb 2]. Available from: <https://www.cdc.gov/diphtheria/about/index.html>. 3. Centers for Disease Control and Prevention [Internet]. Pinkbook: Pertussis | CDC; [cited 2023 Feb 2]. Available from: <https://www.cdc.gov/vaccines/pubs/pinkbook/pert.html>. 4. Centers for Disease Control and Prevention [Internet]. Pinkbook: Tetanus | CDC; [cited 2023 Feb 2]. Available from: <https://www.cdc.gov/vaccines/pubs/pinkbook/tetanus.html>. 5. Centers for Disease Control and Prevention [Internet]. Pinkbook: Poliomyelitis | CDC; [cited 2023 Feb 2]. Available from: <https://www.cdc.gov/vaccines/pubs/pinkbook/polio.html>. 6. Centers for Disease Control and Prevention [Internet]. Pinkbook: Haemophilus influenzae (Hib) | CDC; [cited 2023 Feb 2]. Available from: <https://www.cdc.gov/vaccines/pubs/pinkbook/hib.html>. 7. Centers for Disease Control and Prevention [Internet]. Pinkbook: Hepatitis B | CDC; [cited 2023 Feb 2]. Available from: <https://www.cdc.gov/vaccines/pubs/pinkbook/hepb.html>



Vaccines boost the body's natural defenses and can protect young children against infections that can result in serious harm or death.¹

All about 6-in-1 Combination Vaccines^{1,5}



Hexavalent (6-in-1)

6-in-1 vaccines offer protection against 6 diseases with a single shot at 6, 10 and 14 weeks^{1,2}



Less Painful

Some 6-in-1 combination vaccines have reduced frequency of injection site reactions, swelling, redness, warmth and tenderness for babies post vaccination³



Worldwide Proven Efficacy

Multiple clinical studies demonstrate that less painful vaccines effectively protect infants^{4,5}

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How you can ease your little one's vaccination experience¹

A firm, comforting hold prevents children from moving their arms and legs during injections, gives the health care professional steady control of the limb and the injection site, prevents frightening and encourages you to nurture and comfort your little one.

When your child is getting a shot in the leg¹



1. Hold the child on your lap
2. Place the child's arm under your armpit and apply gentle pressure with your upper arm for a secure, hug-like hold
3. Use your lower arm and hand to hold the child's other arm gently but securely
4. Anchor the child's feet firmly between your thighs or hold securely with your other hand

Tips for a less stressful vaccination visit- Simple ways to support your child before, during and after vaccination¹



Before their vaccination¹

- Read vaccine materials you received from your child's healthcare professional
- Write down any questions you may have
- Make a list of vaccines your child may need
- Learn more about the benefits and risks of the vaccines that your child will receive
- Carry your child's updated personal immunization record to their appointment

During the vaccination¹

- Distract and comfort your little one by cuddling, singing, or talking softly or with their favorite toy or book
- Smile and make eye contact frequently
- Hold your baby firmly on your lap, whenever possible
- Immediately after the vaccination, hold and cuddle them
- Soothe them using your voice, combined with praise and hugs
- Swaddle them, use skin-to-skin contact or breastfeed them

After vaccination¹

- Review any information your doctor gives you about the vaccine
- Use a cool, wet cloth to reduce soreness and swelling in the place where the injection was given
- Mild reactions from shots, such as pain at the injection site, rash or fever are normal and will soon go away
- Reduce any fever with a cold sponge bath or a non-aspirin pain reliever with the permission of your pediatrician
- Ensure that your child is hydrated within the first 24 hours after getting the vaccine

Vaccines that your baby needs as per IAP recommendations²

Take a look at the vaccines that your baby needs to stay protected at different ages as they grow up

Birth	6 weeks	10 weeks	14 weeks	6 months
BCG OPV Hep B-1 (BD) ^a	DTaP/ Rota-1 DTwP-1 PCV-1 IPV-1 ^c Hib-1 Hep B-2	DTaP/ Rota-2 DTwP-2 PCV-2 IPV-2 ^c Hib-2 Hep B-3	DTaP/ Rota-3 ^d DTwP-3 PCV-3 IPV-3 ^c Hib-3 Hep B-4 ^b	IIV-1 ^e Typhoid conjugate vaccine [@]
7 months	9 months	12 months	13 months	15 months
IIV-2	MMR-1 MCV-1 ^k Yellow Fever Vaccine [*]	Hep A MCV-2 ^{*k} JE-1 [*] Oral Cholera Vaccine-1 [*]	JE-2 [*] Oral Cholera Vaccine-2 [*]	MMR-2 Varicella-1 PCV booster
16-18 months	18-19 months	2-3 years	4-6 years	10-12 years
DTwP/DTaP-B1 HiB-B1 IPV ^c -B1	Hep A-2 ^f Varicella-2 ^g	MCV ^k PPSV23 [*]	DTwP/DTaP-B2 IPV ^c -B2 MMR-3	Tdap ^h HPV ^{ij}

*Vaccines used in special situations

BD- Birth Dose, ACVIP- Advisory Committee on Vaccines & Immunization Practices; @- Typhoid Conjugate vaccine can be administered between 6-9 months. BCG- Bacille Calmette Guerin vaccine; OPV - Oral Polio Vaccine; Hep B – Hepatitis B; DTaP/ DTwP - Diphtheria-Tetanus acellular Pertussis /Diphtheria Tetanus whole cell Pertussis; IPV- Injectable Polio Vaccine; Hib- Haemophilus influenzae type b; Rota- Rotavirus; PCV- Pneumococcal Conjugate Vaccine; PPSV- Pneumococcal Polysaccharide vaccine; IIV- Inactivated Influenza Vaccine; MMR- Measles Mumps Rubella; HepA- Hepatitis A; HPV- Human Papillomavirus; Tdap- Tetanus and diphtheria toxoids with acellular pertussis; MCV: Meningococcal Vaccine; JE: Japanese Encephalitis

(a) To be given within 24 h after birth. When this is missed, it can be administered at first contact with health facility; (b) An extra dose of Hepatitis B vaccine is permitted as part of a combination vaccine when use of this combination vaccine is necessary; (c) IPV can be given as part of a combination vaccine; (d) 3rd dose of Rota vaccine is not necessary for RV1; (e) Influenza vaccine should be started after 6 mo of age, 2 doses 4 wks apart, usually in the pre-monsoon period. At other times of the year, the most recent available strain should be used. Annual influenza vaccination should be continued, for all, till 5 y of age; after the age of 5y, this vaccine is recommended in the high-risk group only; (f) Single dose is to be given for the live attenuated Hepatitis A vaccine. The inactivated vaccine needs two doses; (g) 2nd dose of Varicella vaccine should be given 3-6 mo of age after dose 1. However, it can be administered anytime 3 mo after dose 1 or at 4-6 y; (h) Tdap should not be administered as the second booster of DPT at 4-6 y. For delayed 2nd booster, Tdap can be given after 7 y of age. A dose of Tdap is necessary at 10-12 y, irrespective of previous Tdap administration. If Tdap is unavailable/unaffordable, it can be substituted with Td; (i) Before 14 completed years, HPV vaccines are recommended as a 2-dose schedule, 6 mo apart; (j) From 15th y onwards and the immunocompromised subjects at all ages, HPV vaccines are recommended as a 3-dose schedule, 0-1-6 (HPV2) or 0-2-6 (HPV4); (k) MenACWY-DT is approved in a 2-dose schedule between 9-23 mo. Minimum interval between two doses should be 3 mo. MenACWY-CRM is also recommended as a single dose schedule after 2 y of age. (l) Due to the nature of rabies (an infectious zoonotic viral disease that is almost always fatal following the onset of clinical symptoms³), there is no defined age indication for vaccine use. This is in alignment with ACVIP's recommendation for rabies vaccine use across all children aged 0 through 18 years in special situations²

Kudos to you for taking the best shot towards your baby's care!

You've done a great job in going that extra mile to prepare for your little one's vaccination visit!

To know more about vaccinations, talk to your pediatrician now.

IAP: Indian Academy of Pediatrics

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