

High school immunisation pack

Year 8 and year 9



Year 8 - Human papilloma virus (HPV)

What is HPV?

The HPV virus increases the risk of developing some cancers such as:

- Cervical cancer
- Penile cancer
- Some mouth and throat cancers
- Some cancers of the anus and genital areas.

Genital HPV viruses are transmitted by sexual contact with an infected individual, primarily through sexual intercourse.

HPV lives on the skin in and around the whole genital area, so using condoms does not provide complete protection from HPV.

Having the HPV vaccine

All children aged 12 to 13 (school year 8) are offered the HPV vaccine. The vaccine is given in the upper arm. If you miss getting this, the HPV vaccine is available for free on the NHS for all girls under 25 and boys born after 1 September 2006.

Contact your school vaccination team or GP surgery if you or your child were eligible for the HPV vaccine but did not get vaccinated.

Do these vaccines hurt and what are the possible side effects?

It's like a little pinch. You may get soreness and some redness and swelling in your arm after the injection – you may also get a headache,

but these symptoms should disappear after one or two days.

The most common adverse reaction observed after HPV vaccine administration is mild to moderate short lasting pain at the injection site. An immediate localised stinging sensation has also been reported. Redness has also been reported at the injection site. Other reactions commonly reported are headache, myalgia, fatigue, and low grade fever.

Is the vaccine safe?

HPV national vaccination programme was introduced in 2008 to protect secondary school Year 8 girls (aged 12 to 13 years old) Due to the success rate the campaign was then extended and offered to year 8 boys in September 2019. It's used in over 80 countries including the US, Australia, Canada, and most of Western Europe.

Year 9 - MENACWY vaccine and adolescent three in one booster

What is MEN ACWY?

Meningococcal disease is rare but life threatening disease caused by meningococcal bacteria. It is very serious and requires urgent hospital treatment. It can lead to life changing disabilities such as amputations, hearing loss, brain damage and scars. Teenagers and young adults are in one of the highest risk groups for this disease. Meningococcal disease can cause both meningitis and septicaemia. Meningitis is when bacteria reach the meninges (the lining around the brain and spinal cord) and cause dangerous swelling. Septicaemia is when bacteria enter the bloodstream and cause blood poisoning which can trigger sepsis. Sepsis is an overwhelming and life threatening immune response to any infection and can lead to tissue damage, organ failure and death.

What causes meningococcal disease?

Meningococcal disease is caused by different groups of meningococcal bacteria. In the UK it is almost always caused by one of four meningococcal groups commonly known as MenB, MenC, MenW or MenY. These can be prevented with vaccines. MenA disease is rare in the UK but can also be prevented by the adolescent three in one booster.

Adolsecent three in one booster

The three in one teenage booster is offered to young people in year 9 and boosts protection against tetanus, diphtheria and polio. This vaccine is usually given same day as MENACWY vaccine. One in each upper arm.

What is Diptheria?

Diphtheria is a highly contagious bacterial infection. It's spread by coughs and sneezes, or through close contact with someone who is infected. You can also get it by sharing items, such as cups, cutlery, clothing or bedding, with an infected

person. Diphtheria can be a serious illness and sometimes fatal, especially in children, if it's not treated quickly. Vaccination can prevent it.

What is Polio?

Polio is a serious infection that's now very rare because of the vaccination programme. Your chance of getting polio in the UK is extremely low. This is because most people are fully vaccinated. Polio was eradicated in Europe in 2003.

Polio can affect the brain and nerves, such as weakness in your muscles (paralysis), usually in the legs. If the paralysis affects the muscles used for breathing, it can be life threatening.

Polio usually spreads through contact with the poo of an infected person. For example, from not washing your hands properly and putting them in your mouth, or from contaminated food or water. It can also spread through coughs or sneezes.

What is Tetanus?

Tetanus is a serious but rare condition caused by bacteria getting into a wound. Tetanus bacteria can survive for a long time outside the body and are commonly found in soil and the manure of animals such as horses and cows.

If the bacteria enter the body through a wound they can quickly multiply and release a toxin that affects the nerves, causing symptoms such as muscle stiffness and spasms.

Do these vaccines hurt and what are the possible side effects?

It's like a sting. You may get soreness and some redness and swelling in your arm after the injection – you may also get a headache, but these symptoms should disappear after one or two days. The most common adverse reaction observed after MenACWY 3 in booster vaccine administration is mild to moderate short lasting pain at the injection site. An immediate localised stinging sensation has also been reported. Redness has also been reported at the injection site. Other reactions

commonly reported are headache, myalgia, fatigue, and low grade fever.

Is the vaccine safe?

In 2015 the routine MenC vaccine was replaced by Men ACWY to help against other strains of meningococcal. The vaccine has been used for many years across the world and has an excellent safety record. Serious side effects from the vaccine are rare.

MMR

The measles, mumps and rubella (MMR) vaccine is also offered as a catch up programme to young people if they have missed any doses when they were younger.

Having the vaccination

Who decides whether a young person receives a vaccination?

Parents or guardians with parental responsibility make this decision. It is therefore worth reminding parents of the importance of completing the consent form they are sent ahead of the scheduled vaccination sessions.

Some older children may be sufficiently mature to provide their own consent if their parents have not returned a consent form and they express a wish to have a vaccine on the day of the session. The immunisation team will speak to the young person and will be responsible for assessing the appropriateness of administering the vaccine. This will include making every effort to contact the parent to seek their verbal consent and/or an assessment of the individual child's capacity to self consent, where appropriate.

How to consent/decline

You will receive a link from school closer to when your child is due their vaccinations. Please complete even if your decision is not to vaccinate, to prevent further correspondence from the Immunisation team.

If you would like to discuss these vaccines, require a translator, more information or support completing the consent form, please call your local immunisation team:

- **Liverpool School Immunisation Team:**
0151 295 3833
mcn-tr.vacandimms.team@nhs.net
- **Sefton School Immunisation Team:**
0151 247 6130
mcn-tr.seftonimmunisationteam@nhs.net
- **Knowsley, Halton & St Helens Schools**
0151 351 8805
mcn-tr.schoolimmunisations@nhs.net

Consent form - <https://econsent.merseycare.nhs.uk/> (to give consent or decline).

For further information, please visit:
www.merseycare.nhs.uk/imms

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Phone: 0151 471 2377

Freephone: 0800 328 2941

Email: palsandcomplaints@merseycare.nhs.uk

To request this leaflet in an alternative format or language, please speak to a member of staff.

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