



Always cough or sneeze into a disposable tissue

Sneeze Hygiene

- Always cough or sneeze into a disposable tissue
- If you do not have a tissue readily available,
 - DO NOT cough or sneeze into your hands! This is a common mistake.
 - Learn to cough or sneeze into your sleeve instead
- If you do cough or sneeze into your hands, wash them immediately.
- Dispose of soiled tissues carefully
- Handkerchiefs may be used provided they are replaced and washed regularly.
- If you have any respiratory illness
 - wash your hands frequently
 - avoid hand-shakes and similar social contact.

How can I obtain more information?

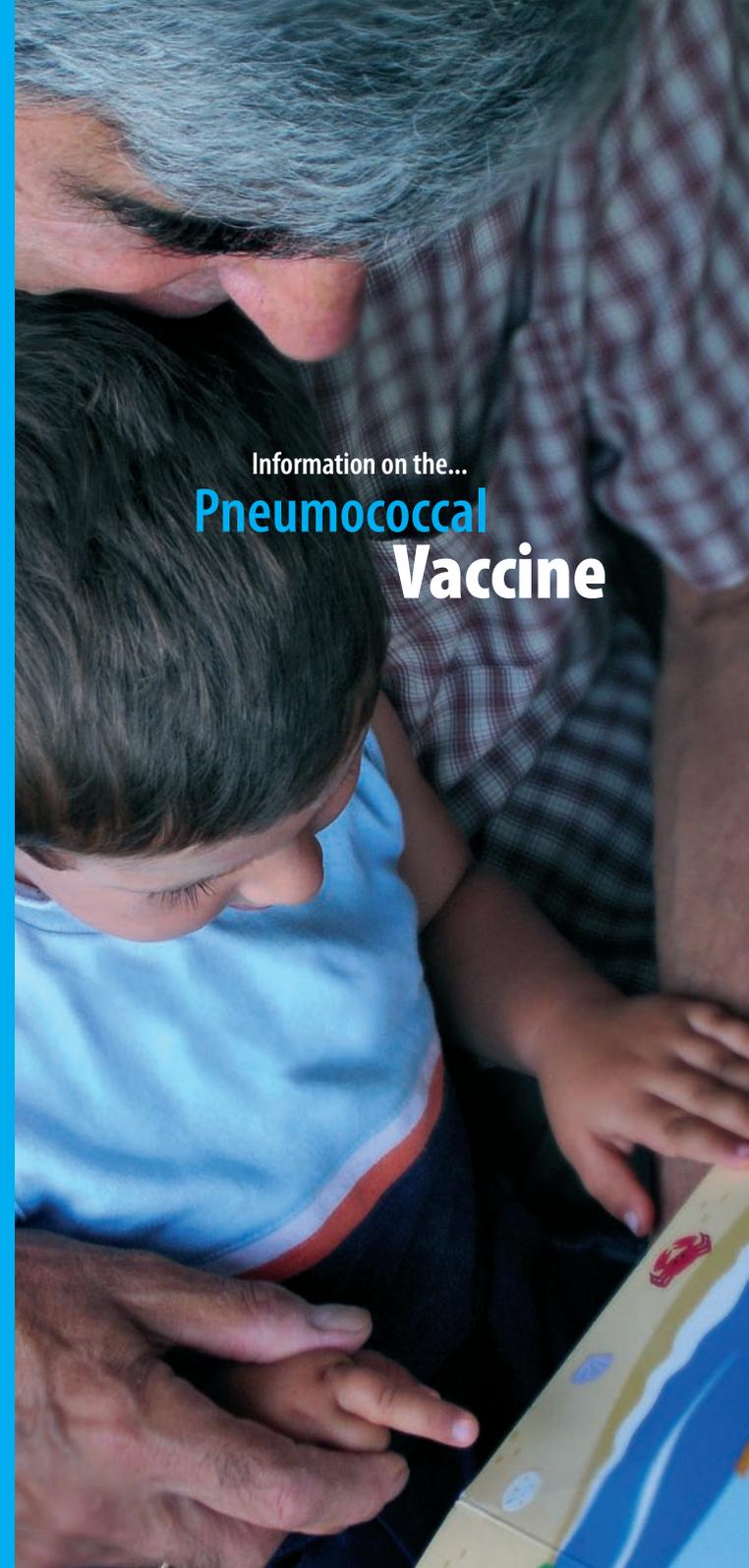
General advice is available on the Health Promotion website: www.health.gov.gi

Similar advice may also be available on the webpages of the Health Protection Agency: www.hpa.org.uk and the NHS Immunisation site: www.immunisation.nhs.uk

Vaccination schedule

| Population Group | Vaccine used |
|--------------------|------------------------------|
| | Conjugate vaccine |
| Infant and child | 2 months, 4 months (2 doses) |
| Adult at high-risk | none |
| Over 65s | none |

| Population Group | Polysaccharide vaccine |
|--------------------|------------------------|
| | Infant and child |
| Adult at high-risk | Any time (1 dose) |
| Over 65s | Any time (1 dose) |



Information on the... Pneumococcal Vaccine

What is pneumococcal disease?

Pneumococcal disease refers to a range of infections, including pneumonia, meningitis and septicaemia (blood poisoning) caused by a bacterium. It is a major cause of death and suffering in the very young children and elderly people.

Pneumococcal meningitis is a particularly nasty infection that occurs in young children and older people, has a high death rate (about 20%) and more often results in permanent damage like deafness or epilepsy. People of adult age are susceptible too, particularly those who fall into certain risk categories (see box "Who is at Greater Risk?"). Pneumococcal pneumonia alone is estimated to affect 1 in 1000 adults each year, of whom 10-20% die.

What causes pneumococcal disease?

Pneumococcal disease is caused by the bacterium (germ) *Streptococcus pneumoniae* (also called the pneumococcus). There are nearly a hundred different variants of the pneumococcus, but only 10 of these are together responsible for most of the infections. Increasingly this bacterium is showing resistance to antibiotics, making prevention by immunisation much more important.

How is it spread?

The bacteria that cause pneumococcal disease are spread by coughing, sneezing or close contact between people (see box "Sneeze Hygiene"). The bacteria may live in the nose and throat without doing any harm, but sometimes they can invade the lungs (causing pneumonia), the bloodstream (causing septicaemia) or the brain (causing meningitis).

Can the disease be prevented?

A vaccine called the polysaccharide vaccine first became available in 1992 and has been used in Gibraltar for many years. However, this vaccine had side-effects and limitations which made it safe for use only in selected adults who were at high-risk. It also did not work in babies. In 2002, a conjugate vaccine became available, which is safe to use in babies. Both vaccines have around 70-90% success.

Who should have the vaccine?

It is now considered good practice to offer immunisation to (a) all babies (b) all people over 65 years and (c) someone who is at greater risk (see box).

Who is at greater risk?

People who have :

- Impaired immunity (eg diabetes, HIV, cancer, etc.);
- Skull defects and skull fractures;
- Brain shunts, cochlear implants and other risk of cerebrospinal fluid leaks;
- No spleen or dysfunction of the spleen;
- Chronic lung disease
- Chronic heart disease
- Chronic kidney disease
- Chronic liver disease
- Previous serious pneumococcal disease (children under 5 years only) are at particular risk from pneumococcal infection

So which vaccine is used?

Actually both. Each vaccine has different strengths and weaknesses. The conjugate vaccine is better for use in babies and young children, while the polysaccharide vaccine is better for adults and for 2-year booster doses. Hence the standard vaccination programme uses the two vaccines at different stages.

Are the vaccines safe?

Yes. Both vaccines are inactivated, do not contain any live bacteria and thus cannot themselves cause the disease. Both vaccines have been extensively tested and both vaccines are free from mercury. These vaccines can also be given at the same time as other vaccines such as influenza and routine childhood vaccine. The vaccine is routinely used in many European countries, Australia, the USA and Canada.

When is the vaccine given?

In the case of babies, the vaccine is integrated with the routine childhood programme and is offered at 2 months, 4 months and 15 months. In adults and elderly people, a single dose is given, usually timed alongside the flu vaccination programme.

Boosters are not generally advisable, but may be used in selected individuals for whom the benefits outweigh the risks.

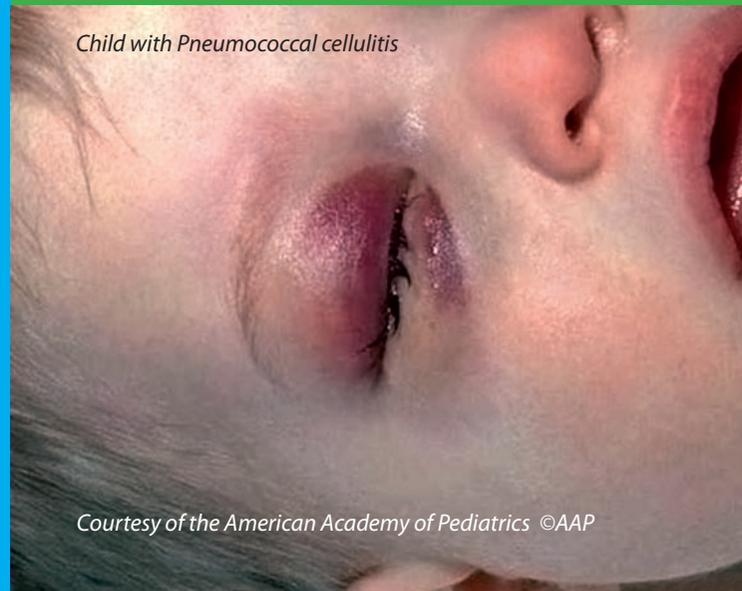
Are there any side effects?

Side effects are usually mild and don't last very long. The site of the injection may be sore and there may be a slight temperature for a day accompanied by swelling of the arm for up to three days. But these generally wear off.

How frequently should the vaccine be taken?

Usually it only needs to be taken once in a lifetime. Some people with certain spleen or kidney disorders may need additional doses.

Child with Pneumococcal cellulitis



Courtesy of the American Academy of Pediatrics ©AAP