

Annex 4.

Dear parent!

I would like your consent for the next (re)vaccination of your child (first name and surname) _____ against **diphtheria, tetanus, pertussis and poliomyelitis** in accordance with the national immunisation schedule.

Immunisation is carried out using the diphtheria, tetanus, pertussis and poliomyelitis combined vaccine (**DTPa-IPV**).

The child is given one injection in the upper arm area. Post-vaccination side effects may include redness, soreness and swelling at the injection site. Less common side effects may include fever, headache, muscle pain, malaise and very rarely hives. The aforementioned symptoms usually resolve within two to three days.

General information about diphtheria, tetanus, pertussis and poliomyelitis is attached.

If you have any questions, please call _____, Mon-Fri at _____ or send an email to _____

School nurse _____

Parent _____
(first name and surname)

I consent: _____
(date, signature)

Diphtheria

What is diphtheria?

Diphtheria is an acute bacterial infection.

How does a person get infected with pertussis?

The source of infection is an infected person or a carrier. The disease spreads from person to person via direct contact and droplets when coughing or sneezing. Diphtheria can be contracted at any age.

What are the symptoms of diphtheria?

The primary clinical symptoms are fever, swollen lymph nodes, sore throat, neuropathy, loss of voice, cough, respiratory failure and difficulty swallowing. Complications affect the kidneys, heart and nervous system. Paralysis of the soft palate and pneumonia may also occur. In countries with no routine vaccination, mortality from diphtheria ranges from 1.5–25%.

How to avoid infection?

The most effective way to protect children against infection is timely vaccination. In Estonia, children, adolescents and adults are routinely vaccinated against diphtheria in accordance with the immunisation schedule as follows:

Age Vaccine dose

3 months first dose

4.5 months second dose

6 months third dose

1.5–2 years fourth dose (first revaccination)

6–7 years fifth dose (second revaccination)

15–17 years sixth dose (third revaccination)

25, 35 etc every 10 years

Tetanus

What is tetanus?

Tetanus, or lockjaw, is a bacterial infection.

How does a person get infected with pertussis?

Infection may occur when soil particles containing the pathogen get into a scratch or wound.

What are the symptoms of tetanus?

Tetanus is characterised by increased muscle tone and spasms. Tetanus usually starts with spasms in the jaw muscles, followed by difficulty swallowing and stiffness of the neck, shoulder and back muscles. Later, all voluntary muscles are affected. In milder cases the disease is treatable, but in more severe cases it is fatal.

How to avoid infection? The surest method of prevention is vaccination.

In Estonia, children, adolescents and adults are routinely vaccinated against tetanus in accordance with the immunisation schedule as follows:

Age Vaccine dose

3 months first dose

4.5 months second dose

6 months third dose

1.5–2 years fourth dose (first revaccination)

6–7 years fifth dose (second revaccination)

15–17 years sixth dose (third revaccination)

25, 35 etc every 10 years

The vaccine is highly immunogenic, with post-vaccination immunity lasting at least five years.

Pertussis

What is pertussis?

Pertussis is an acute respiratory infection characterised by long-term coughing fits that last for weeks or even months. Pertussis is also called the 100-day cough. Pertussis is especially dangerous for infants – the majority of deaths occur among infants under 3 months of age.

How does a person get infected with pertussis?

The source of infection is an infected person. The disease spreads from person to person via direct contact and droplets when coughing or sneezing. Pertussis can be contracted at any age.

What are the symptoms of pertussis?

The first symptoms of the disease resemble those of the common cold: rhinitis, sneezing, low-grade fever, sore throat and a mild cough. The cough gradually worsens, which develops after one to two weeks into slowly intensifying coughing fits characteristic of pertussis. In young children, it is common to hear a whistling sound at the end of the coughing fit as they inhale. The coughing fit may also end with vomiting. The coughing fits often occur at night. Post-recovery immunity is not lifelong, and pertussis can be contracted more than once.

How to avoid infection?

The surest method of prevention is vaccination. The pertussis vaccine is given to children as part of a combined vaccine. Pursuant to the immunisation schedule, children and adolescents are vaccinated against pertussis as follows:

Age Vaccine dose

3 months first dose

4.5 months second dose

6 months third dose

1.5–2 years fourth dose (first revaccination)

6–7 years fifth dose (second revaccination)

15–17 years sixth dose (third revaccination)

Post-vaccination immunity is also not lifelong – it usually lasts 5–7 years. In children and adults vaccinated against pertussis, the course of the disease is usually milder and atypical.

Poliomyelitis

What is poliomyelitis?

Poliomyelitis, or polio, is an acute viral infection characterised by symptoms of general intoxication and often damage to the central nervous system, manifesting as flaccid paralysis.

How does a person get infected with poliomyelitis?

The source of infection is an infected person or carrier who spreads the virus via faeces and upper respiratory secretions. The infection is transmitted from person to person primarily through contaminated food, water and items, or through the air.

What are the symptoms of poliomyelitis?

The risk group primarily includes children under 5 years of age. Although poliomyelitis is predominantly a children's disease, adults can also contract it. Typical symptoms include aches in various areas of the body, especially the back when palpating the vertebral column and bending the head or back muscles.

Pain often occurs in the limbs that later develop paralysis. Paralysis occurs in 1/200 cases, 5–10% of which are fatal. Around ¼ of patients who experience paralysis become disabled.

How to avoid infection?

The surest method of prevention is vaccination. The poliomyelitis vaccine is given to children as part of a combined vaccine. Pursuant to the immunisation schedule, children and adolescents are vaccinated against poliomyelitis as follows:

Age Vaccine dose

3 months first dose

4.5 months second dose

6 months third dose

1.5–2 years fourth dose (first revaccination)

6–7 years fifth dose (second revaccination)

The vaccine used for immunisation is the inactivated poliomyelitis vaccine (IPV), which contains inactivated viruses that do not cause illness. The protective efficacy of the vaccine is 99%. The IPV vaccine is given to children either as a single vaccine or as part of a combined vaccine. Post-vaccination immunity is believed to be lifelong, provided that the child has received all vaccine doses prescribed by the national immunisation schedule.