Immunisation and pregnancy

Summary

- Immunisation can protect you and your unborn baby against many infectious diseases.
- If you are planning to have a baby, try to have your vaccinations up to date before you become pregnant.
- All women should receive influenza and whooping cough vaccines during every pregnancy.
- The influenza vaccine can be given at any time during pregnancy and is free during pregnancy under the National Immunisation Program (NIP).
- Some vaccines are best avoided during pregnancy unless you and your unborn baby are at risk of an infectious disease. Talk to your doctor or midwife about which immunisations are recommended for you during your pregnancy.
- Serious side effects or allergic reactions to vaccines are rare.

Some infectious diseases can cause serious harm to pregnant women or their unborn babies. If you are planning to have a baby, try to get up to date with your immunisations before you become pregnant.

Immunisation can protect you and your unborn baby from infectious diseases such as chickenpox, influenza, measles, mumps, rubella (German measles), diphtheria, tetanus, whooping cough (pertussis), pneumococcal disease and hepatitis B.

Serious side effects or allergic reactions to vaccines are rare.

All women should receive influenza and whooping cough vaccines during every pregnancy.

Risk of infectious diseases during pregnancy

If a pregnant woman becomes infected with some diseases, her unborn baby can be harmed. Newborn children can also be harmed if their mothers have an infection.

Examples of infections that are harmful to babies include:

- **rubella** – can cause defects in the brain, heart, eyes and ears of the baby and increases the risk of miscarriage and stillbirth.
- **chickenpox** – can cause defects in the brain, eyes, skin and limbs of the baby.
- **measles** – increases the risk of miscarriage, premature birth or stillbirth.
- **mumps** – increases the risk of miscarriage.
- **hepatitis B** – can cause acute hepatitis B infection that can be passed on to the baby during birth, and both mother and baby have the potential to become ‘carriers’ of hepatitis B (the virus is not cleared from the body).
- **influenza** – increases the risk of miscarriage, premature birth or stillbirth and increases the risk of severe illness and death in the mother.
- **whooping cough** (pertussis) – can cause pneumonia, seizures, encephalopathy and the death of the baby.

Immunisation before pregnancy

If you are planning for a baby, preparations you can make include:

- visiting your doctor for a health check-up,
- asking your doctor for a blood test to check your immunity if you are not sure which immunisations you’ve had. If your immunisation status for a particular disease remains unknown, your doctor will usually recommend that you are vaccinated.
- making sure you are fully immunised against chickenpox, influenza, measles, mumps, rubella, diphtheria, tetanus and whooping cough. If you are not up to date with any of these immunisations, your doctor can

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advise you about catch-up doses. Influenza vaccine is free and recommended to be given at any time during pregnancy and whooping cough vaccine is recommended in every pregnancy in the third trimester, ideally between 28 and 32 weeks gestation and up until the birth of the baby.

- asking anyone else living in your house to be immunised to reduce the risk of diseases being passed to your newborn baby.
- waiting to fall pregnant for at least one month after receiving live vaccines such as the measles, mumps and rubella (MMR) vaccine or the chickenpox vaccine (check with your doctor about this).

Immunisation during pregnancy

Issues to consider with immunisation in pregnancy include:

- Flu (influenza) infection can cause serious complications in a pregnant woman, which may include the need for hospital treatment. Flu (influenza) immunisation is free and recommended at any time during pregnancy. There is no evidence that the vaccine will harm the unborn baby.
- A whooping cough combination vaccine including tetanus and diphtheria protection is recommended to be given in the second trimester of every pregnancy, ideally between 20 and 32 weeks gestation, but it can be given up until delivery. Vaccination during pregnancy has been shown to benefit the newborn by passing protection from the mother to the baby. Whooping cough infection can cause serious complications in a baby, which may include death.

In Victoria, the whooping cough combination vaccine is free for:

- pregnant women from 20 weeks gestation during every pregnancy
- partners of women who are at least 20 weeks pregnant – if the partner has not received a pertussis booster in the last ten years.

As well as being immunised, you can reduce your risk of catching infectious diseases by washing your hands regularly, avoiding international travel and avoiding close contact with sick people.

Immunisation after pregnancy

If you didn’t update your immunisations before becoming pregnant, see your doctor after you have given birth. If you are fully immunised, it will help protect your newborn against infection, and reduce the risk of illness and birth defects if you become pregnant later.

Immunising a mother who is breastfeeding will not cause harm to the baby. It is safe for mothers to be immunised while breastfeeding.

Immunisation for babies

In the first months of life, a baby is protected from some infections by antibodies transferred from the mother during pregnancy. When these antibodies wear off, the baby is at risk of serious infection.

Breastfeeding provides protection against some germs, but it does not provide immunity to your baby for vaccine-preventable illnesses like whooping cough and diphtheria. Immunisation from an early age is highly recommended for all Australian children. Having your baby immunised helps to protect them from the most serious childhood infections, some of which may threaten their lives.

Read more about childhood immunisation, and the National Immunisation Program Schedule.

Most premature babies tolerate immunisations. Be advised by your doctor. In general, there is no need to delay the childhood vaccination schedule unless your baby is very unwell.

Read more about vaccination for preterm infants.

Immunisation and HALO

The immunisations you may need are decided by your health, age, lifestyle and occupation. Together, these factors are referred to as HALO.

Talk to your doctor or immunisation provider if you think you or someone in your care has health, age, lifestyle or occupation factors that could mean immunisation is necessary. You can check your immunisation HALO using the

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Immunisation for Life infographic (pdf) downloadable poster.

Where to get help

- Your doctor or **midwife**
- In an emergency, always call triple zero (000)
- Emergency department of your nearest hospital
- Your local government immunisation service – (visit **Know Your Council** to find your local government authority)
- **Maternal and Child Health Line** (24 hours) Tel. **13 22 29**
- **NURSE-ON-CALL** Tel. **1300 60 60 24** – for expert health information and advice (24 hours, 7 days)
- **Immunisation Program**, Department of Health and Human Services, Victorian Government Tel. **1300 882 008**
- **National Immunisation Hotline** Tel. **1800 671 811**
- **Pharmacist**
- **Victorian vaccine safety service (SAEFVIC)** Tel. **1300 882 924** – the line is attended between 9 am and 4 pm and you can leave a message at all other times

This page has been produced in consultation with and approved by:

Department of Health and Human Services - RHP&R - Health Protection - Communicable Disease Prevention and Control Unit

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