



Ministry of Health & Family Welfare
Government of India

Frequently Asked Questions on Immunization



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(For Religious Leaders,
Media Persons, CSOs, Influencers
& Other Stakeholders)

2017



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AGE VACCINE SCHEDULE



Birth

6 Weeks

10 Weeks

14 Weeks

BCG				
Hep B				
OPV				
RVV*				
fIPV				
PCV*				
Pentavalent				
Measles/ MR*				
JE*				
DPT				
TT				

TT-1
(Earliest Possible)

TT-2

TT-Booster[#]



Pregnant
Woman



4 Weeks

*If received 2 TT doses in Pregnancy within last 3 years



9-12 Months

16-24 Months

5-6 Years

10 Years

16 Years

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* Wherever Applicable

Question

1. What is immunization?

Ans:- Immunization is the process whereby a child is protected against an infectious disease by administration of one or more doses of a vaccine, either by injection or by drops in the mouth.

Question

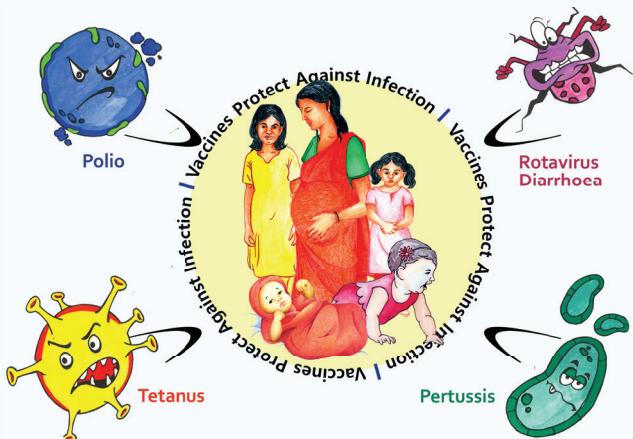
2. What are the benefits of immunization?

Ans:- Immunization protects children against certain specific and serious diseases, which otherwise would lead to stress, worry and expense of having a child become very ill and possibly die from a disease that could be prevented by administration of a vaccine.

Question

3. How do vaccines protect children from disease-causing organisms?

Ans:- Protection against different infections is due to the presence of some protective substances in the blood (known as “antibodies”), which kills the disease-causing organisms or neutralizes their effect when they enter the body. Vaccines contain a weakened form, killed form or part of the disease-causing agent (bacteria or virus), which when introduced into the child’s body by a correct route



and technique activates a protective response against a targeted pathogen through generation of specific antibodies. These protective substances or antibodies further protect a child in case of a subsequent episode of infection.

Question

4. At what age should immunization start for any child?

Ans:-Under Universal Immunization Programme, immunization of children starts as soon as child is born. Vaccination against **childhood tuberculosis (BCG)**, **polio (OPV)** and **maternally transmitted Hepatitis B (Hep B vaccine)** are given to a child immediately after birth. After this, specific vaccines are given at recommended ages and routes as outlined in National Immunization Schedule.

Question

5. Why is timely vaccination important for children?

Ans:-Vaccines ensure the best protection to children when they are given at the right ages, and in required number of doses. At certain period of life, there is a maximum incidence of a particular disease. Therefore, to prevent harm caused by the disease, vaccines are provided at that particular age. For example, the occurrence of Polio is maximum in children below 5 years of age; hence, vaccination against polio is given in routine immunization as well as in campaigns to children below 5 years of age. Similarly, number of doses required is determined by the level of protection required to prevent serious infections.

The National Immunization Schedule clearly mentions different vaccines, ages at which they are to be given, and doses required for ensuring full protection from vaccine-preventable diseases.

When children are not vaccinated, or if there is a delay in getting the vaccination, they remain unprotected and have increased chances of getting serious infection.

Question

6. How much does the vaccination cost?

Ans:-Vaccines are costly and government spends a lot of money in procuring them, and storing and transporting them at correct temperature. However all immunization services including vaccines, syringes, Mother and Child Protection card and also medicines and supplements are given to all children **free of cost**, at the government health facilities.

Similarly, immunization services to pregnant women are also provided free of cost at the government health facilities.

Question

7. Where should the parents take their children for vaccination?

Ans:-The parents/ caregivers can visit any government health facility, including hospitals, medical colleges, urban dispensaries, Primary Health Centres (PHCs), Community Health Centres (CHCs), sub-centres and Anganwadi centres to get their children vaccinated. In villages and some urban areas (like slums and mohallas), ANMs organize immunization sessions for providing immunization services to children.

The government health department has ensured that immunization services are provided at the facility nearest to the beneficiary. It is important to understand that under National Immunization Schedule, vaccines are not provided house to house, except in special campaigns and drives like polio.



Question

8. Which vaccines are better for children – those provided by private practitioners or those provided at the government health facilities?

Ans:- All vaccines available in the country are licensed by **Drug Controller General of India (DCGI)**. Therefore, are safe for use. Both government and private sectors procure same vaccines from government-approved and licensed manufacturers. However, complete immunization services are given to all the children and pregnant women free of cost, at government health facility.

Question

9. Why do private providers offer some vaccines that are not available in the Government's programme?

Ans:- Universal Immunization Programme (UIP) implemented by Ministry of Health & Family Welfare(MoHFW), Government of India has a larger role of ensuring that all children and pregnant mothers are protected from diseases that infect, disable or kill a large number of children and pregnant women. On the other hand, private providers cater to individual children and parents who approach to them for services on chargeable basis.

Question

10. We have heard of cases when a child suffered from a disease although s/he had taken vaccine against that disease. So, what is the use of taking vaccines?

Ans:- Vaccines have been used for a long time and have been proven to be effective. But like any other medicine, no vaccine is 100% effective. The level of protection generated by a vaccine may vary from one child to another due to difference in response of the immune system. Children suffering from malnutrition and repeated episodes of diarrhoea tend to have a diminished protection level after being vaccinated. However, malnutrition and mild

diarrhoea are not contraindications to vaccination.

Thus, in some children the disease can occur even if the child is vaccinated against that disease. However, in such cases the severity of the disease is less as compared to children who have never been vaccinated.

Question

11. Which vaccines are currently provided in India's Universal Immunization Programme?

Ans:- Under India's Universal Immunization Programme 12 different vaccines are provided to beneficiaries free of cost, through government health system. These are – BCG, OPV, Hepatitis B, Pentavalent, Rotavirus Vaccine*, PCV*, IPV, Measles/MR*, JE*, DPT, and TT.

The vaccines administered in UIP and the diseases prevented by them are as follows:

Vaccine	Disease Prevented
BCG	Childhood Tuberculosis (or Primary Complex)
OPV	Poliomyelitis
Hepatitis B	Hepatitis B
Pentavalent	Diphtheria, Pertussis (Whooping Cough), Tetanus, Hib infection (causing pneumonia and meningitis), and Hepatitis B
RVV*	Rotavirus diarrhoea
IPV	Poliomyelitis
Measles	Measles
MR*	Measles and Rubella
JE*	Japanese Encephalitis
DPT	Diphtheria, Pertussis, and Tetanus
TT	Tetanus (in new-born and pregnant women)
PCV*	Pneumococcal Pneumonia

* Wherever Applicable

Question

12. Why have certain vaccines been introduced in selected states only?

Ans:- There are two reasons for this:

- ➡ Whenever new vaccines are introduced in UIP, then initially, they are rolled out in some states and gradually expanded across all states and districts of the country. For example, Rotavirus Vaccine and PCV.
- ➡ Secondly, some vaccines protect against disease causing organisms that are not present everywhere. In such cases, vaccines are only introduced in districts where that specific disease-causing agent causes the disease. For example, JE vaccine to prevent Japanese Encephalitis.

Question

13. If a child has received all doses of a vaccine through routine immunization. Will s/he still require additional doses during a campaign?

Ans:- Yes. A campaign is organized to ensure that majority of vulnerable age group get immunized to control transmission of disease causing organism. Thus, even if a child has received the age-specific and recommended vaccines in routine immunization, s/he should get "additional" doses of the vaccine during campaigns. Also, if a child has received doses of a vaccine during a campaign, s/he should complete the vaccine schedule through routine immunization as well.

For example, all children up to 5 years of age should continue to receive OPV doses during the Pulse Polio campaigns, even after receiving OPV and IPV doses in routine immunization.

Question

14. If any child has got infected or has suffered from some disease in the past, will s/he still require vaccination against that disease?

Ans:- Yes. Most of the diseases (for example, Diphtheria,

Tetanus, Rotavirus diarrhoea, Hib pneumonia, Measles, and JE) only results in short-term protection even after full blown infection and disease. Therefore, in these cases a child will still require all recommended doses of the vaccine as per the immunization schedule.

Question

15. What vaccines are given to a pregnant woman?

Ans:- Only **Tetanus Toxoid (TT)** vaccine is given to a pregnant woman.

Question

16. Why do pregnant women require vaccination?

Ans:- TT vaccine is given to all pregnant women to protect them and their children from Tetanus. Tetanus, also known as Lockjaw, is a life-threatening disease of new-borns causing seizures, and severe muscle spasms, leading to death by respiratory failure.

Question

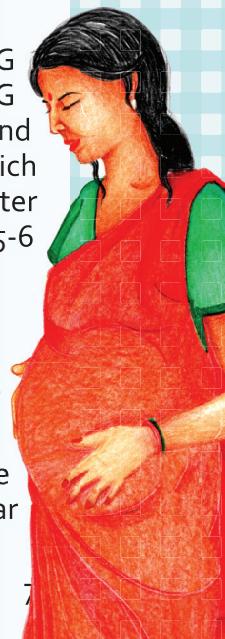
17. Is scarring a normal reaction after BCG administration?

Ans:- Yes. Scarring is a normal reaction after BCG administration. Two weeks after administration of BCG vaccine, the place of injection usually becomes red and hard. It then changes to an elevation in the skin which grows to maximum size by the fourth week. This later crack, discharges pus, gradually changes into crust (5-6 weeks), finally leaving a small scar (after 8 weeks).

Question

18. What should be done if in any child scar does not form after BCG vaccination?

Ans:- There is no need to re-vaccinate the child even if there is no scar formation. There are some cases, when scar



does not form after BCG vaccination, although vaccine has developed protection against the disease.

Question

19. What is pentavalent vaccine and why is it beneficial for children?

Ans:- Pentavalent vaccine has been introduced recently in the national immunization schedule. A single vaccine provides protection to children against five serious diseases viz. Diphtheria, Pertussis, Tetanus, Haemophilus Influenza Type B infections (leading to pneumonia and brain fever) and Hepatitis B. Three doses of this vaccine are given to the child at 6, 10, 14 weeks.

Question

20. Since India is declared polio-free, why vaccination against polio is given to children in routine immunization as well as during pulse polio campaigns?

Ans:- Even though India has been declared polio-free, polio infection is still present in some countries. There is a constant risk of an infected person traveling into India and spreading polio infection. Therefore, it is important to vaccinate children and keep their protection high till polio virus is finished from the world.

Question

21. Why is a vaccine against rubella being introduced into UIP?

Ans:- Rubella is a viral disease, and its infection during pregnancy can cause abortion or stillbirth and may also lead to multiple birth defects in the new-born (like blindness, deafness, heart defects, development delays, and many other lifelong disabilities). Rubella vaccines have been in use in private sector for a long time. Now, Rubella vaccine is being introduced in UIP as Measles-Rubella (MR) vaccine to prevent rubella infection in children and young adults.

MR vaccination campaign is a special campaign to vaccinate all children in the age group of 9 months to less than 15 years with one additional dose of MR vaccine. This campaign will ensure that majority of these children are immunized against Measles and Rubella which will stop the transmission of this deadly disease from one person to another. Once the transmission of Measles and Rubella is controlled the pregnant women will not be infected from these diseases.

Question

22. Is MR vaccine used during the campaigns safe for children?

Ans:- Yes. MR vaccine used during MR campaigns as well as in routine immunization has been proven to be highly safe and effective. This vaccine is WHO pre-qualified, is manufactured in India, and is being used in several other neighbouring countries like Bangladesh, Sri Lanka, Nepal, and Myanmar.



Question

23. Why is there pain and swelling at the injection site?

Ans:- In case of injectable vaccines (like Hepatitis B, pentavalent, DPT and IPV), infants may have redness, mild pain, and swelling at the injection site. This is absolutely normal and goes within 1-3 days. This is not related to quality, safety or efficacy of the vaccines.

Question

24. What is the reason for fever coming after vaccination?

Ans:- Occurrence of mild fever (specifically after Pentavalent and DPT vaccines) is result of normal reaction that vaccines have on body system. This fever is generally mild in nature, self-limiting, and goes within 1-2 days.

Question

25. If a child is sick, can s/he be vaccinated?

Ans:- A sick child suffering from mild illness (like cough, cold, or mild fever), mild diarrhoea or vomiting can be safely vaccinated with injectable or oral vaccines. However, a child who has some serious illness or is hospitalized (like in high grade fever, severe diarrhoea, etc.), should not be vaccinated until his or her condition improves.

Question

26. If a child is delivered by surgery (Caesarean section) or is born before 9 months. Can s/he receive vaccination?

Ans:- Yes. All children must be vaccinated as per the national immunization schedule. Vaccination should be provided to all children. It does not matter if:

- ➡ They are delivered by surgery or it is a normal delivery
- ➡ They are delivered at a private or government health facility, or at home

- ➡ They are delivered before completing 9 months of gestation
- ➡ The mother is suffering from any medical condition
- ➡ Have low weight at birth

Question

27. We have heard that OPV leads to impotency, and MR vaccine leads to autism. Is this true?

Ans:- No. All vaccines used in Universal Immunization Programme are tested and recommended for their quality and efficacy, and they are highly safe and effective. **NO VACCINE LEADS TO IMPOTENCY OR AUTISM.**

Question

28. Can vaccines cause allergy?

Ans:- Some children may be allergic to certain vaccines or component of vaccine (like antibiotic or preservative), and administration of vaccine in such children can result in allergic reaction, like itching, or appearance of red spots on the body, soon after vaccination.

Question

29. Can more than one vaccine be administered safely to children at the same time? What is its benefit?

Ans:- Yes. More than one vaccine can be administered to the child safely at the same time. It does not cause any adverse event nor has any effect on the effectiveness of individual vaccines.

Administering more than one vaccine as per schedule to a child during the same immunization session reduces the number of visits and avoids extra travel and time to get the child vaccinated.

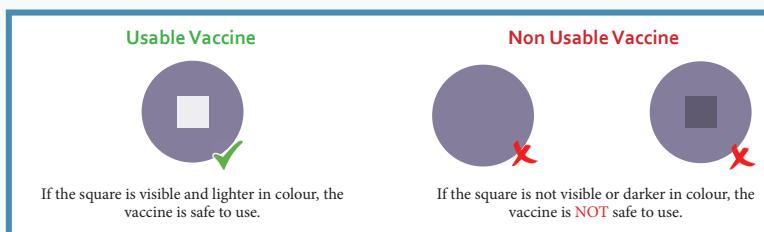
Question

30. How is quality of vaccines maintained at immunization session?

Ans:- Quality of vaccines can be ensured by maintaining correct temperature for storage of vaccines. At the immunization session site, health worker takes out one ice pack from the vaccine carrier and places the non-freeze sensitive vaccine vials on it. Freeze-sensitive vaccines are not placed on the ice pack. This ensures that the optimum temperature of the vaccines is maintained.

Vaccine carrier is the box that ANMs use to carry vaccines to the session site. It is an insulated box which is packed with 4 conditioned ice packs to maintain correct storage temperature inside for vaccines for up to 12 hours. This ensures that vaccine vials are safely carried from storage point to the session sites and back, and kept at correct temperature at the session site.

Square placed within the blue circle on the label or cap of the vial called Vaccine Vial Monitor (VVM), gives information about the heat exposure over a period that affects the vaccine potency. It serves to inform health worker/vaccinator whether vaccine is potent enough to be administered to the child or not.



In addition, health workers mention the date and time of opening the vial to ensure the vaccines are not used beyond the recommended time after opening the vial.

Question

31. What are AD syringes?

Ans:- AD or Auto Disabled syringes are specialized plastic syringes introduced in UIP for administering injectable vaccines. Once used, these syringes get locked. This avoids reuse or misuse of used syringes and ensures prevention of transmission of infections from one child to another.



Question

32. Is Vitamin A also a vaccine?

Ans:- No. Vitamin A is not a vaccine. It is a micronutrient that children require for growth and development and it helps protect against disease and is good for eye health.



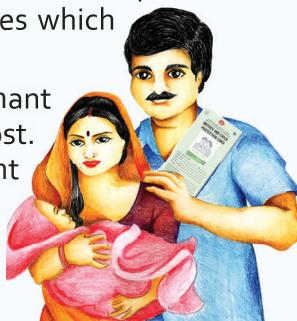
Question

33. What is Mother and Child Protection (MCP) card?

Ans:- MCP card is a document that shows the record of vaccines received (date and age) by a child. It also helps to see the vaccines and their number of doses which are due for a child.

This card is given to all pregnant women and children, free of cost.

MCP card is given to a pregnant woman at time of confirmation of pregnancy, and the same card continues till complete vaccination of her child.



Question

34. What should be done if due vaccine is not available at the health facility or session site?

Ans:- In such situations, the health worker will give the child all available vaccines for which s/he is eligible and will be called for the remaining vaccination in the next immunization session. However, the parents may also go to higher level health facility for getting scheduled vaccines, or wait for next immunization session day.

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