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Vaccine Safety

Vaccine Safety Home

Diphtheria, Tetanus, and Pertussis Vaccines

Safety Information

About the Diseases

Diphtheria, tetanus, and pertussis are potentially serious bacterial diseases that can be prevented through vaccination.

Diphtheria can cause a thick membrane-like covering in the back of the throat. It can lead to breathing problems, paralysis, heart failure, and even death. The bacteria can spread from person to person by coughing, sneezing, or touching infected open sores or ulcers. Learn more about diphtheria.

Tetanus (also known as lockjaw) is a serious disease that causes painful tightening of the muscles, usually all over the body. It can lead to "locking" of the jaw, preventing a person from opening their mouth or swallowing. Tetanus leads to death in about 1 in 10 cases. The bacteria that cause tetanus is not spread from person to person. Instead, it is found in soil, dust, and manure (feces) and can get into the body through open wounds. Learn more about tetanus.

Pertussis (also known as whooping cough) is a highly contagious respiratory tract infection. Although it initially resembles an ordinary cold, whooping cough can become more serious, particularly in infants. The bacteria can spread from person to person by coughing, sneezing, or sharing the same breathing space for an extended period of time. Learn more about pertussis.

Vaccines are available that can help prevent these diseases. All infants and children, adolescents, and adults should get vaccinated. CDC recommends:

- Infants and children should get five doses of the DTaP vaccine between the ages of 2 months and 6 years.
- Children should get one dose of Tdap between the ages of 11 and 12 years.
- People who are pregnant should get one dose of the Tdap vaccine every pregnancy, preferably early in the 3rd trimester.
- Adults should get one dose of Tdap or Td every 10 years. Adults who have never received Tdap should get it in place of their next Td dose.

Vaccine Information Statements

Vaccine Information Statements (VISs) are information sheets produced by CDC that explain both the benefits and risks of a vaccine.

DTaP

Diphtheria, tetanus, and pertussis vaccine for infants and children

Tdap

Tetanus, diphtheria, and pertussis vaccine for adolescents and adults

Td

Tetanus and diphtheria vaccine for adolescents and adults

Available Vaccines and Package Inserts

There are several different types of vaccines that can safely help prevent diphtheria, tetanus, and pertussis:

- DTaP (diphtheria, tetanus, and acellular pertussis) vaccine, which is given to children
- **Tdap** (tetanus, diphtheria, and acellular pertussis) vaccine, which is given to adolescents and adults
- Td (tetanus and diphtheria) vaccine, which is given to adolescents and adults



Child and Adult Immunization Schedules

Get CDC's official recommended immunization schedules, including catch-up schedules, for children, adolescents, and adults.

Manufacturer Package Inserts

DTaP (for infants and children up to 7 years)

Daptacel [PDF – 26 pages] ☑

The Food and Drug Administration (FDA) approved this vaccine in 2002. It is approved for use in children who are 6 weeks through 6 years of age to protect against diphtheria, tetanus, and pertussis.

Infanrix [PDF – 19 pages]

FDA approved this vaccine in 1997. It is approved for use in children who are 6 weeks through 6 years of age to protect against diphtheria, tetanus, and pertussis.

Kinrix [PDF – 15 pages] ☑

FDA approved this vaccine in 2008. It is approved for use in children who are 4 to 6 years of age to protect against diphtheria, tetanus, pertussis, and polio.

Pediarix [PDF – 24 pages] ☑

FDA approved this vaccine in 2002. It is approved for use in children who are 6 weeks through 6 years of age to protect against diphtheria, tetanus, pertussis, polio, and hepatitis B.

Pentacel [PDF – 37 pages] ☑

FDA approved this vaccine in 2008. It is approved for use in children who are 6 weeks through 4 years of age to protect against diphtheria, tetanus, pertussis, *Haemophilus Influenzae* type B (Hib), and polio.

Quadracel [PDF – 15 pages]

FDA approved this vaccine in 2015. It is approved for use in children who are 4 through 6 years of age to protect against diphtheria, tetanus, pertussis, and polio

Vaxelis [PDF – 20 pages] ☑

FDA approved this vaccine in 2018. It is approved for use in children aged 6 weeks through 4 years of age to protect against diphtheria, tetanus, pertussis, Hib, hepatitis B, and polio.

Tdap (for preteens, teens, and adults)

Boostrix [PDF – 26 pages]

FDA approved this vaccine in 2005. It is approved for use in people 10 years of age and older to protect against diphtheria, tetanus, and pertussis. FDA approved the use of the Boostrix vaccine in people who are pregnant to prevent infant pertussis in 2022.

Adacel [PDF – 29 pages]

FDA approved this vaccine in 2005. It is approved for use in people 10 to 64 years of age to protect against diphtheria, tetanus, and pertussis. FDA approved the use of the Adacel vaccine in people who are pregnant to prevent infant pertussis in 2023.

Td (for preteens, teens, and adults)

Generic tetanus and diphtheria vaccine - TDVax [PDF - 7 pages] ☑

There is a generic vaccine to protect against tetanus and diphtheria and in people 7 years of age and older. It was approved by FDA in 1967.

Tenivac [PDF – 14 pages] ☑

FDA approved this vaccine in 2003. It is approved for use in people 7 years of age and older to protect against tetanus and diphtheria.

Common Side Effects

DTaP and Tdap vaccine are safe and effective at preventing diphtheria, tetanus, and pertussis. Vaccines, like any medicine, can have side effects. The most common side effects are usually mild and go away on their own.

Severe allergic reactions following vaccination are rare but can be life threatening.

Symptoms of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness.

If such reactions occur, call 9-1-1 and get the person to the nearest hospital.

DTaP Vaccines (for infants and children up to 7 years)

Common Side Effects

- Soreness or swelling where the shot was given
- Fever
- Fussiness
- Feeling tired
- Loss of appetite
- Vomiting

Most side effects are mild to moderate and can last from 1 to 3 days.

Who Should Not Get DTaP Vaccine

DTaP is <u>not</u> for children ages 7 years and older.

A person who has ever had a life-threatening allergic reaction after a previous dose of a diphtheria, tetanus, or pertussis containing vaccine, or has a severe allergy to any part of this vaccine, should not get a DTaP vaccine.

Anyone who has been in a coma or had long, repeated seizures within 7 days of administration of a previous dose of any pertussis vaccine.

Parents should talk to their child's healthcare provider before getting the DTaP vaccine if their child:

- Developed a condition called Guillain-Barré Syndrome (GBS), or
- Had severe pain or swelling after a previous dose of any vaccine that protects against tetanus or diphtheria.

In some cases, the healthcare provider may decide to postpone the child's DTaP vaccination to a future visit.

Children who are moderately or severely ill with or without fever should usually wait until they recover before getting the DTaP vaccine.

Tdap Vaccines (for adolescents and adults)

Common Side Effects

- Pain, redness, or swelling where the shot was given
- Mild fever
- Headache
- Feeling tired
- Nausea, vomiting, diarrhea, stomachache

Who Should Not Get Tdap Vaccine

A person who has ever had a life-threatening allergic reaction after a previous dose of diphtheria, tetanus or pertussis containing vaccine, or has a severe allergy to any part of this vaccine, should <u>not</u> get Tdap vaccine.

Anyone who has been in a coma or has had long, repeated seizures within 7 days after any pertussis vaccine, unless a cause other than the vaccine was found. They can still get a Td vaccine.

A person should talk with their healthcare provider before getting the Tdap vaccine if they:

- Have a progressive or unstable neurologic disorder, including infantile spasms,
- Have uncontrolled seizures or progressive encephalopathy; Tdap should be deferred until neurologic status is clarified and stabilized

- Have developed a condition called Guillain-Barré Syndrome (GBS), or
- Are moderately or severely ill.

Td Vaccine (for adolescents and adults)

Common Side Effects

- Pain, redness, or swelling where the shot was given
- Mild fever
- Headache
- · Feeling tired
- Nauseas, vomiting, diarrhea, or stomachache

Who Should Not Get Td Vaccine

A person who has ever had a severe allergic reaction after a previous dose of any tetanus or diphtheria containing vaccine should <u>not</u> get a Td vaccine.

People should talk to their healthcare provider before getting the Td vaccine if they:

- Had severe pain or swelling after any vaccine containing diphtheria or tetanus,
- Developed a condition called Guillain-Barré Syndrome (GBS), or
- Are moderately or severely ill.

A Closer Look at the Safety Data

DTaP (infants and children up to 7 years)

- DTaP safety reviews of Vaccine Adverse Event Reporting System (VAERS) reports found no unexpected health concerns related to the vaccine.
 - Several studies of DTaP vaccine safety have looked for neurologic problems or seizures after children were vaccinated and found that there is no increased risk for these concerns with the DTaP vaccine.
 - There is a small increased risk for febrile seizures when inactivated influenza vaccine (flu shot) is given during the same doctor's visit as a DTaP vaccine.

• DTaP may cause mild injection site reactions. However, severe injection site reactions are rare, and may be less frequent when the vaccine is injected into the leg rather than into the arm. Reactions happen about as often when DTaP is combined with other vaccines.

Tdap (adolescents and adults)

- Tdap safety reviews of VAERS reports have found no unexpected safety concerns for the general population, for people who are pregnant, or for adults over age 65.
- In the Vaccine Safety Datalink (VSD), studies have found no association between Tdap vaccination and Guillain-Barré Syndrome or other neurologic disorders. Other studies have found that there is no increased risk for other types of health problems, such as allergies, blood disorders, and chronic illnesses.
- Although injection site reactions are common, studies have found a low rate of severe injection site reactions. These local reactions are unusual even when the vaccine is given at the same time as Menactra, a <u>meningococcal vaccine</u>, or when a person receives several doses of Tdap vaccine over a short time period.

Seizures caused by fever are called "febrile seizures." When they occur in young children, these seizures are frightening for parents. However, most children recover from them quickly and have no long-lasting effects. Learn more about febrile seizures.

Which adverse events are considered "serious?"

By the Code of Federal Regulations (CFR) Title 21 \(\sigma\), an adverse event is defined as serious if it involves any of the following outcomes:

- Death
- A life-threatening adverse event
- A persistent or significant disability or incapacity
- A congenital anomaly or birth defect
- Hospitalization, or prolongation of existing hospitalization

Learn more about adverse events.

How CDC Monitors Vaccine Safety

CDC and FDA monitor the safety of vaccines after they are approved or authorized. If a problem is found with a vaccine, CDC and FDA will inform health officials, health care providers, and the public.

CDC uses 3 systems to monitor vaccine safety:

- The Vaccine Adverse Event Reporting System (VAERS): an early warning system, co-managed by CDC and FDA, to monitor for potential vaccine safety problems. Anyone can report possible vaccine side effects to VAERS.
- The Vaccine Safety Datalink (VSD): a collaboration between CDC and 13 healthcare organizations that conducts vaccine safety monitoring and research.
- The Clinical Immunization Safety Assessment (CISA) Project: a partnership between CDC and several medical research centers that provides expert consultation and conducts clinical research on vaccine-associated health risks.

More Information

Who Should Not Get Vaccinated

Some people should not get certain vaccines or should wait before getting them. Read the CDC guidelines for each vaccine.

Vaccine Abbreviations

Common vaccine abbreviations and acronyms.

FAQs about Combination Vaccines

From the Immunization Action Coalition.

Related Scientific Articles

DTaP Vaccines

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Moro PL, Perez-Vilar S, Lewis P, Bryant-Genevier M, Kamiya H, Cano M. Safety Surveillance of Diphtheria and Tetanus Toxoids and Acellular Pertussis (DTaP) Vaccines . *Pediatrics*. 2018 Jul; 142(1). pii: e20174171. Epub 2018 Jun 4.

Liang JL, Tiwari T, Moro P, et al. Prevention of Pertussis, Tetanus, and Diphtheria with Vaccines in the United States: Recommendations of the Advisory Committee on Immunization Practices (ACIP ☑). *MMWR* Recomm Rep 2018 April; 67(No. RR-2): 1–44.

Duffy J, Weintraub E, Hambidge S, Jackson L, Kharbanda E, Klein N, et al. Febrile Seizure Risk Following Vaccination in children 6-23 months . Pediatrics. 2016 Jul; 138(1). Epub 2016 Jun 6,

Kawai AT, Martin D, Kulldorff M, Li L, Cole DV, McMahill-Walraven CN, Selvam N, Selvan MS, Lee GM. Febrile Seizures After 2010-2011 Trivalent Inactivated Influenza Vaccine ☑ . *Pediatrics*. 2015 Oct; 136(4): e848-55. Epub 2015 Dep 14.

Jackson LA, Peterson D, Nelson JC, Marcy SM, Naleway AL, Nordin JD, Donahue JG, Hambidge SJ, Balsbaugh C, Baxter R, Marsh T, Madziwa L, Weintraub E. Vaccination site and risk of local reactions in children 1 through 6 years of age

. Pediatrics. 2013 Feb; 131(2): 283-9. Epub 2013 Jan 14.

Nelson JC, Yu O, Dominguez-Islas CP, Cook AJ, Peterson D, Greene SK, Yih WK, Daley MF, Jacobsen SJ, Klein NP, Weintraub ES, Broder KR, Jackson LA. Adapting group sequential methods to observational postlicensure vaccine safety surveillance: results of a pentavalent combination DTaP-IPV-Hib vaccine safety study . Am J Epidemiol. 2013 Jan 15; 177(2): 131-41. Epub 2013 Jan 4.

Sun Y, Christensen J, Hviid A, Li J, Vedsted P, Olsen J, Vestergaard M. Risk of febrile seizures and epilepsy after vaccination with diphtheria, tetanus, acellular pertussis, inactivated poliovirus, and Haemophilus influenzae type B . JAMA. 2012 Feb 22; 307(8): 823-31.

Jackson LA, Yu O, Nelson JC, Dominguez C, Peterson D, Baxter R, Hambidge SJ, Naleway AL, Belongia EA, Nordin JD, Baggs J; Vaccine Safety Datalink Team. Injection site and risk of medically attended local reactions to acellular pertussis vaccine . Pediatrics. 2011 Mar; 127(3): e581-7. Epub 2011 Feb 7.

Andrews N, Stowe J, Wise L, Miller E. Post-licensure comparison of the safety profile of diphtheria/tetanus/whole cell pertussis/haemophilus influenza type b vaccine and a 5-in-1 diphtheria/tetanus/acellular pertussis/haemophilus influenza type b/polio vaccine in the United Kingdom . *Vaccine*. 2010 Oct 18; 28(44): 7215-20. Epub 2010 Aug 26.

Huang WT, Gargiullo PM, Broder KR, Weintraub ES, Iskander JK, Klein NP, Baggs JM; Vaccine Safety Datalink Team. Lack of association between acellular pertussis vaccine and seizures in early childhood. Pediatrics. 2010 Aug; 126(2): 263-9. Epub 2010 Jul 19.

Zangwill KM, Eriksen E, Lee M, Lee J, Marcy SM, Friedland LR, Weston W, Howe B, Ward JI. A population-based, postlicensure evaluation of the safety of a combination diphtheria, tetanus, acellular pertussis, hepatitis B, and inactivated poliovirus vaccine in a large managed care organization . *Pediatrics*. 2008 Dec; 122(6): e1179-85.

Moore DL, Le Saux N, Scheifele D, Halperin SA; Members of the Canadian Paediatric Society/Health Canada Immunization Monitoring Program Active (IMPACT).Lack of evidence of encephalopathy related to pertussis vaccine: active surveillance by IMPACT, Canada, 1993-2002 . *Pediatr Infect Dis J.* 2004 Jun; 23(6): 568-71.

Jackson LA, Carste BA, Malais D, Froeschle J. Retrospective population-based assessment of medically attended injection site reactions, seizures, allergic responses and febrile episodes after acellular pertussis vaccine combined with diphtheria and tetanus toxoids . *Pediatr Infect Dis J.* 2002 Aug; 21(8): 781-6.

Tdap Vaccines



Havers FP, Moro P, Hunter P, Hariri S, Bernstein H. Use of Tetanus Toxoid, Reduced Diphtheria Toxoid, and Acellular Pertussis (Tdap) Vaccines — Updated Recommendations of the Advisory Committee on Immunization Practices. *MMWR Morb Mortal Wkly Rep.* 2020;69(3);77–83

Berenson AB, Hirth JM, Rahman M, Laz TH, Rupp RE, Sarpong KO. Maternal and infant outcomes among women vaccinated against pertussis during pregnancy . *Hum Vaccin Immunother*. 2016 Aug 2; 12(8): 1965-1971. Epub 2016 Mar 22.

Petousis-Harris H, Walls T, Watson D, Paynter J, Graham P, Turner N. Safety of Tdap vaccine in pregnant women: an observational study. BMJ Open. 2016 Apr 18; 6(4): e010911.

Moro PL, Cragan J, Tepper N, Zheteyeva Y, Museru O, Lewis P, Broder K. Enhanced surveillance of tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis (Tdap) vaccines in pregnancy in the Vaccine Adverse Event Reporting System (VAERS), 2011-2015 ☑. *Vaccine*. 2016 Apr 29; 34(20): 2349-53. Epub 2016 Mar 22.

Regan AK, Tracey LE, Blyth CC, Richmond PC, Effler PV. A prospective cohort study assessing the reactogenicity of pertussis and influenza vaccines administered during pregnancy.

Vaccine. 2016 Apr 29; 34(20): 2299-304. Epub 2016 Mar 31.

Kharbanda EO, Vazquez-Benitez G, Lipkind HS, Klein NP, Cheetham TC, Naleway AL, Lee GM, Hambidge S, Jackson ML, Omer SB, McCarthy N, Nordin JD. Maternal Tdap vaccination: Coverage and acute safety outcomes in the vaccine safety datalink, 2007-2013.

Vaccine. 2016 Feb 10; 34(7): 968-73. Epub 2016 Jan 4.

Walls T, Graham P, Petousis-Harris H, Hill L, Austin N. Infant outcomes after exposure to Tdap vaccine in pregnancy: an observational study ☑. *BMJ Open.* 2016 Jan 6; 6(1): e009536.

Sukumaran L, McCarthy NL, Kharbanda EO, Weintraub ES, Vazquez-Benitez G, McNeil MM, Li R, Klein NP, Hambidge SJ, Naleway AL, Lugg MM, Jackson ML, King JP, DeStefano F, Omer SB, Orenstein WA. Safety of Tetanus Toxoid, Reduced Diphtheria Toxoid, and Acellular Pertussis and Influenza Vaccinations in Pregnancy . Obstet Gynecol. 2015 Nov; 126(5): 1069-74.

Sukumaran L, McCarthy NL, Kharbanda EO, McNeil MM, Naleway AL, Klein NP, Jackson ML, Hambidge SJ, Lugg MM, Li R, Weintraub ES, Bednarczyk RA, King JP, DeStefano F, Orenstein WA, Omer SB. Association of Tdap Vaccination With Acute Events and Adverse Birth Outcomes Among Pregnant Women With Prior Tetanus-Containing Immunizations

1. JAMA. 2015 Oct 20; 314(15): 1581-7.

Morgan JL, Baggari SR, McIntire DD, Sheffield JS. Pregnancy outcomes after antepartum tetanus, diphtheria, and acellular pertussis vaccination ☑. *Obstet Gynecol.* 2015 Jun; 125(6): 1433-8.

Kharbanda EO, Vazquez-Benitez G, Lipkind HS, Klein NP, Cheetham TC, Naleway A, Omer SB, Hambidge SJ, Lee GM, Jackson ML, McCarthy NL, DeStefano F, Nordin JD. Evaluation of the association of maternal pertussis vaccination with obstetric events and birth outcomes . *JAMA*. 2014 Nov 12; 312(18): 1897-904.

Donegan K, King B, Bryan P. Safety of pertussis vaccination in pregnant women in UK: observational study ☑ . *BMJ.* 2014 Jul 11; 349: g4219.

Shakib JH, Korgenski K, Sheng X, Varner MW, Pavia AT, Byington CL. Tetanus, diphtheria, acellular pertussis vaccine during pregnancy: pregnancy and infant health outcomes . *J Pediatr*. 2013 Nov; 163(5): 1422-6.e1-4. Epub 2013 Jul 26.

Chang S, O'Connor PM, Slade BA, Woo EJ. U.S. Postlicensure safety surveillance for adolescent and adult tetanus, diphtheria and acellular pertussis vaccines: 2005-2007 ☑. *Vaccine*. 2013 Feb 27; 31(10): 1447-52. Epub 2012 Nov 8.

Zheteyeva YA, Moro PL, Tepper NK, Rasmussen SA, Barash FE, Revzina NV, Kissin D, Lewis PW, Yue X, Haber P, Tokars JI, Vellozzi C, Broder KR. Adverse event reports after tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccines in pregnant women . Am J Obstet Gynecol. 2012 Jul; 207(1): 59.e1-7. Epub 2012 May 14.

Moro PL, Yue X, Lewis P, Haber P, Broder K. Adverse events after tetanus toxoid, reduced diphtheria toxoid and acellular pertussis (Tdap) vaccine administered to adults 65 years of age and older reported to the Vaccine Adverse Event Reporting System (VAERS), 2005-2010. *Vaccine*. 2011 Nov 21; 29(50): 9404-8. Epub 2011 Sep 13.

Nordin JD, Yih WK, Kulldorff M, Weintraub E. Tdap and GBS (letter) . Vaccine. 2011 Feb 1; 29(6): 1122.

Talbot EA, Brown KH, Kirkland KB, Baughman AL, Halperin SA, et al. The safety of immunizing with tetanus-diphtheria-acellular pertussis vaccine (Tdap) less than 2 years following previous tetanus vaccination: Experience during a mass vaccination campaign of healthcare personnel during a respiratory illness outbreak.

Vaccine. 2010 Nov; 28(50): 8001-7. Epub 2010 Sep 25.

Klein NP, Hansen J, Lewis E, Lyon L, Nguyen B, et al. Post-marketing safety evaluation of a tetanus toxoid, reduced diphtheria toxoid and 3-component acellular pertussis vaccine administered to a cohort of adolescents in a United States health maintenance organization. Pediatr Infect Dis J. 2010 Jul; 29(7): 613-7.

Jackson LA, Yu O, Nelson J, Belongia EA, Hambidge SJ, et al. Risk of medically attended local reactions following diphtheria toxoid containing vaccines in adolescents and young adults: A Vaccine Safety Datalink study.

Vaccine. 2009 Aug 6; 27(36): 4912-6. Epub 2009 Jun 28.

Yih WK, Nordin JD, Kulldorff M, Lewis E, Lieu TA, et al. An assessment of the safety of adolescent and adult tetanus-diphtheria-acellular pertussis (Tdap) vaccine, using active surveillance for adverse events in the Vaccine Safety Datalink.

Vaccine. 2009 Jul 9; 27(32):4257-62. Epub 2009 May 30.

Halperin SA, Sweet L, Baxendale D, Neatby A, Rykers P, et al. How soon after a prior tetanus-diphtheria vaccination can one give adult formulation tetanus-diphtheria-acellular pertussis vaccine? Pediatr Infect Dis J. 2006; 25(3): 195-200.

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