

Strong together for vaccinations - MSD in Cooperation with InfectoPharm

Immunisation Schedule

(Standard vaccinations) for infants

Because the **First** (2) **Veal**(1) is Full of **Milestones**.

The protective vaccinations during the first year of life are also important milestones.

Starting with the completed basic immunizations during the first year.

Dear Parents:

Did you know that vaccinations are among the most important preventive measures in modern medicine? A large part of vaccinations is carried out in the early childhood years - but vaccinations are definitely not only "kid stuff". Adolescents and adults should also receive booster vaccinations so that continuous immunity can be maintained against deadly infectious diseases. At the same time, the risk of contagion, e.g., for unprotected infants, is minimized if there is a high vaccination rate among the population.

We have compiled information for you in this brochure on the important topic of "Vaccinations during the first year of life". At the end of the brochure, you will find a vaccination calendar for the basic immunizations to be completed during the first year of life as recommended by the German Standing Committee on Vaccination (STIKO).

Vaccinations for infants and small children

Vaccinations during the infant stage are important milestones for efficient defense against numerous pathogens. A high percentage of parents in Germany decide to have their children vaccinated, resulting in approximately 95 % of first graders receiving essential basic vaccinations. The current statistics for Germany show that extensive immunity is important. Outbreaks of infectious diseases such as measles, pertussis or mumps have been observed repeatedly in recent years. These sometimes severe diseases are highly contagious and can spread rapidly. To prevent further outbreaks in Germany, it is recommended that as many infants and small children as possible receive vaccinations according to the current recommendations of the STIKO.

The STIKO recommends the use of combination vaccines during infancy and early childhood, which can protect against multiple diseases. The advantage of these vaccines is that they allow for a significant reduction in the number of injections required.

The STIKO currently recommends that infants and small children receive vaccines against:

- Tetanus
- Diphtheria
- Pertussis
- · Haemophilus influenzae type b (Hib)
- Polio
- Hepatitis B
- Pneumococci

- Rotavirus
- Mumps
- Chicken pox
- Meningococci B and C
- Rubella
- Measles

Important: For basic immunization, the following vaccinations, as recommended by STIKO, should be completed during the first year of life:

- Rotavirus*
- 6 x vaccination against tetanus, diphtheria, pertussis, *Haemophilus influenzae* type b (Hib), poliomyelitis; poliomyelitis (polio for short), liver inflammation (hepatitis B)
- Pneumococci
- Meningococci B and C

You can find all important information about these five vaccinations and the underlying diseases on the following pages.



* Since the risk of complications increases with increasing age of the child to be vaccinated, the STIKO urgently recommends that the vaccinations be completed early. The series of vaccinations should be started by the age of 12 weeks at the latest and - depending on the vaccine - should be preferably completed by the age of 16 or 20 to 22 weeks, however, by the age of 24 or 32 weeks at the latest.

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Rotavirus infections

Pathogen	Rotavirus					
Transmission	Smear infection or via contaminated objects					
Clinical symptoms	Watery diarrhea as well as sudden vomiting and abdominal pain, frequently mild fever, cough and sniffles. Infants and small children usually develop a severe course of the disease due to considerable fluid loss and must be treated in the hospital.					
Vaccination	Single vaccine; basic immunization with an oral vaccine during infancy					

Lockjaw

(Tetanus)



PathogenBacteria Clostridium tetaniTransmissionThe bacteria hide in the earth and enter the body via small
wounds or pricks, e.g. due to splinters, nails or thorns.Clinical
symptomsCramps of facial muscles or other muscle groups.
Complications: cramps of the larynx and chest muscles can
lead to death by asphyxiation.VaccinationSingle or combination vaccine; basic immunization during
informula parks while basic immunization in

infancy and early childhood, booster vaccination in adolescence as well as every ten years during adulthood

Diphtheria

Pathogen	Bacteria Corynebacterium diphtheriae
Transmission	Droplet infection or direct contact
Clinical symptoms	Sore throat, fever up to 39 °C, swelling of the neck lymph nodes, paralysis of the soft palate, formation of coatings adhering to the roof of the mouth and throat down to the larynx. Croup cough with laryngeal diphtheria (especially in small children). Complications: choking, heart failure, paralysis of the head, face, trunk and breathing muscles
Vaccination	Combination vaccine; basic immunization during infancy and early childhood, booster vaccination in adolescence as well as every ten years during adulthood



Whooping cough

(Pertussis)

Pathogen	(Primary) Bacteria Bordetella pertussis
Transmission	Droplet infection
Clinical symptoms	Lengthy illness (6-7 weeks on average), flu-like symptoms, agonizing bouts of cough. Complications: pneumonia, inguinal hernias and fractured ribs or middle ear infection. High risk of complications in infants
Vaccination	Combination vaccine; basic immunization during infancy and early childhood, booster vaccination in adolescence as well as during adulthood, especially for women of childbearing age and during pregnancy and people they are in contact with



Haemophilus influenzae type b

(Hib)

Pathogen	Bacteria Haemophilus influenzae type b				
Transmission	Droplet infection, but also via contact with infectious respiratory tract secretions				
Clinical symptoms	It can lead to meningeal, epiglottal or lung inflammation as well as blood poisoning (sepsis) with severe courses of the disease. Infants in their first year of life are especially at risk of deadly complications.				
Vaccination	Single or combination vaccine; basic immunization during infancy and early childhood. No booster vaccinations are necessary. Vaccination of people with certain underlying health conditions				



Polio

(Poliomyelitis; polio for short)

Pathogen	Polio virus
Transmission	The virus is excreted in the stool and primarily transferred via smear infection, but also via droplet infection or contaminated drinking water.
Clinical symptoms	The disease runs its course without symptoms in approximately 95 % of infected people. Approx. 5 % suffer from fever as well as a sore throat and headache. In a few cases, flaccid paralysis of the arm and leg muscles, and partly of the speaking, swallowing or breathing muscles, occurs. Complications: lasting paralysis, muscle wasting, decreased bone growth as well as joint destruction
Vaccination	Combination vaccine; basic immunization during infancy and early childhood, booster vaccination during adolescence. Vaccination of migrants, people traveling to at-risk countries as well as people in certain professions

Liver inflammation

(Hepatitis B)

Pathogen	Hepatitis B virus				
Transmission	Mainly sexual contact or via other bodily fluids				
Clinical symptoms	Initially flu-like symptoms, which may be accompanied by nausea and vomiting. One third of those sick have jaundice (yellow coloring of the skin). The illness can be especially chronic in small children. Complications: liver cirrhosis				
Vaccination	Single or combination vaccine; basic immunization during infancy and early childhood, which should be caught up during adolescence at the latest. Certain professions should receive the vaccination such as medical personal, people with an underlying health condition as well as people traveling to at-risk countries.				

Pneumococci diseases

Pathogen	Bacteria Streptococcus pneumoniae
Transmission	Droplet infection
Clinical symptoms	Middle ear infection, sinus infection or pneumonia. In addition, meningeal inflammation and blood poisoning in the case of severe courses of the disease. Infants and small children in the first two years of life and the elderly as well as people with a weakened immune system and chronic diseases are especially at risk of severe infection.
Vaccination	Single vaccine; basic immunization during infancy and early childhood. Vaccination of people over 60 years of age as well as people with underlying health conditions or in certain professions

Meningococci diseases

Pathogen	Bacteria Neisseria meningitidis					
Transmission	Droplet infection or direct contact					
Clinical symptoms	First, flu-like symptoms occur. Then, severe headaches, a high fever, nausea, sensitivity to light and neck stiffness suddenly appear. Afterward, it can lead to meningeal inflammation and/or bacterial blood poisoning ("sepsis") in many cases. Complications: septic shock, developmental disorders, paralysis, cranial nerve paralysis, seizures and damage to the inner ear up to and including deafness					
Vaccination	Single vaccine; basic immunization during early childhood. Vaccination of people with certain underlying health conditions or at an increased risk of infection as well as people traveling to					

Immunisation Schedule (Standard vaccinations) for infants

at-risk countries.

Excerpt from the STIKO Immunisation Schedule of vaccinations completed during the first year of life

	Age in weeks	Age in months					
Vaccination	6	2	3	4	5-10	11*	12
		U4			U5	U	16
Rotavirus	G	1ª	G2	(G3)			
Tetanus ^b		G1		G2		G3 ^d	
Diphtheria ^b		G1		G2		G3 ^d	
Pertussis ^b		G1		G2		G3 ^d	
Hib ^b H. influenzae type b		G1		G2		G3 ^d	
Poliomyelitis ^b		G1		G2		G3 ^d	
Hepatitis B ^b		G1		G2		G3 ^d	
Pneumococci ^b		G1		G2		G3 ^d	
Meningococci B ^c		G1		G2			G3 ^d
Meningococci C							G1

Recommended vaccination date

Catch-up vaccination (Basic immunisation of all persons not yet vaccinated or completion of an incomplete series of vaccinations)

Table modified by MSD after Robert Koch-Institut (RKI). Recommendations of the Standing Committee on Vaccination (STIKO) of RKI. Status as of: January 2024. Epid Bull 2024;4:1-72.

STIKO Immunisation Schedule (English version): go.msd.com/stiko-immunisation-schedule

Explanations:

G: Basic immunization (in up to 3 partial vaccinations G1-G3), U: Early detection examination

- **a** First vaccine dose as early as the age of 6 weeks; depending on the vaccine used 2 or 3 vaccine doses at an interval of at least 4 weeks.
- **b** Premature infants: Additional vaccine dose at the age of 3 months, i.e. a total of 4 vaccine doses
- c 3 doses at the age of 2 to 23 months; from the age of 24 months, the vaccination series consists of 2 doses
- d Minimum distance from the previous dose: 6 months

* Vaccinations can be spread over multiple vaccination appointments.



Additional information on MSD and the subject of vaccinations:



www.msd-gesundheit.de/impfungen/



www.impfen-info.de



www.msd.de

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