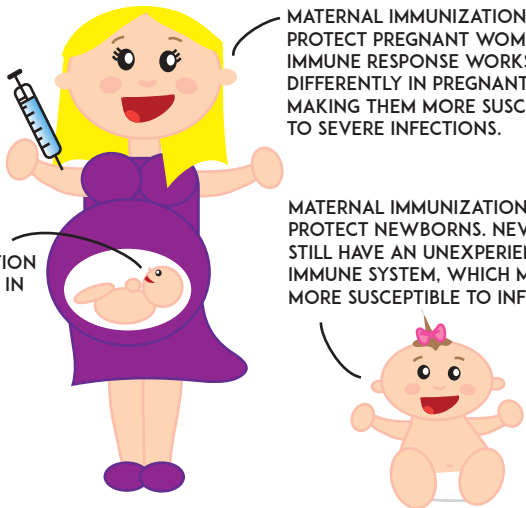


MATERNAL VACCINATION

WHY DO WE VACCINATE PREGNANT WOMEN?

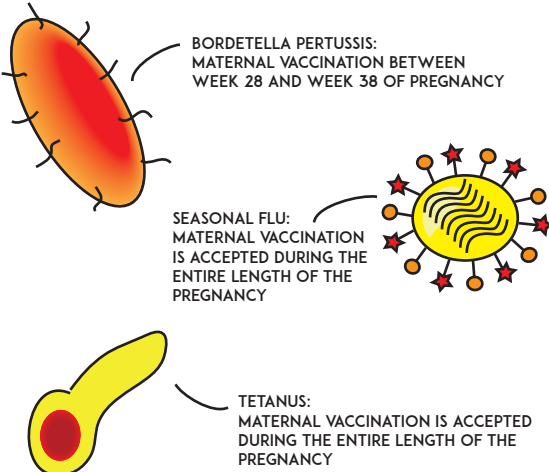


MATERNAL IMMUNIZATION CAN PREVENT DISEASE IN THE FETUS DURING A HIGH-RISK PERIOD.

MATERNAL IMMUNIZATION CAN PROTECT PREGNANT WOMEN. THE IMMUNE RESPONSE WORKS DIFFERENTLY IN PREGNANT WOMEN, MAKING THEM MORE SUSCEPTIBLE TO SEVERE INFECTIONS.

MATERNAL IMMUNIZATION CAN PROTECT NEWBORNS. NEWBORNS STILL HAVE AN UNEXPERIENCED IMMUNE SYSTEM, WHICH MAKES THEM MORE SUSCEPTIBLE TO INFECTIONS.

WHICH VACCINES ARE USED FOR MATERNAL VACCINATION?

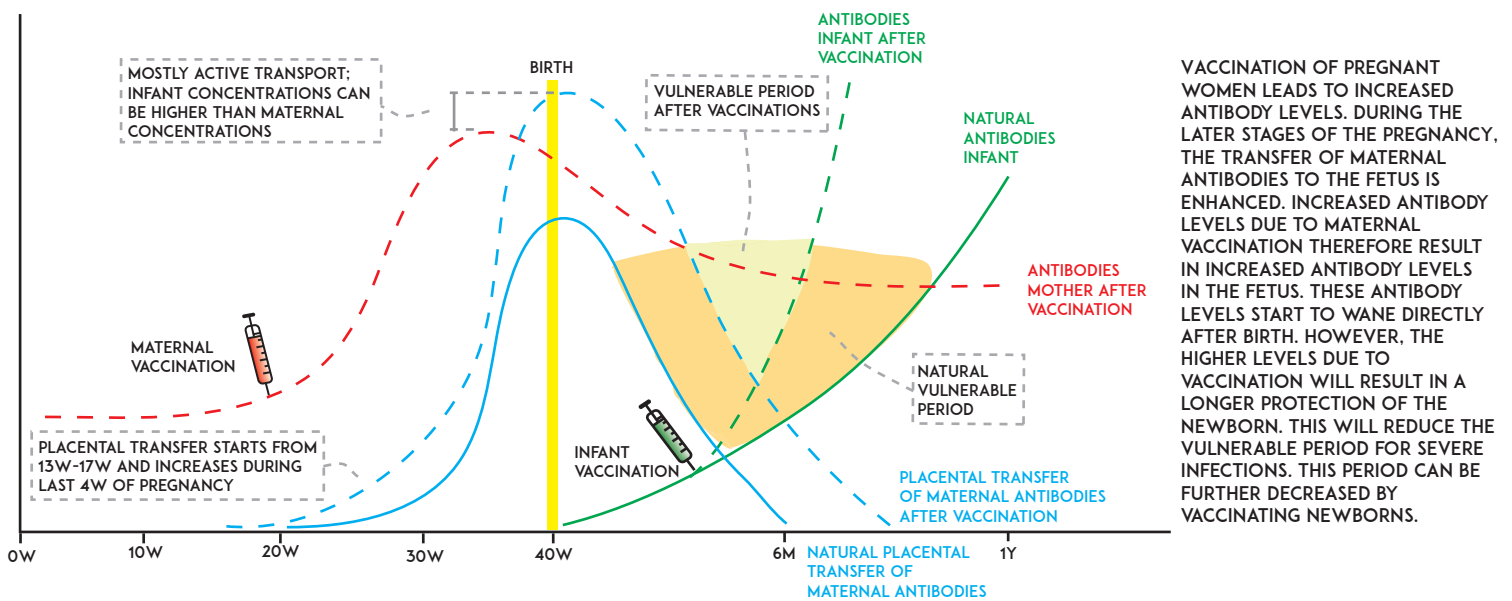


BORDETELLA PERTUSSIS: MATERNAL VACCINATION BETWEEN WEEK 28 AND WEEK 38 OF PREGNANCY

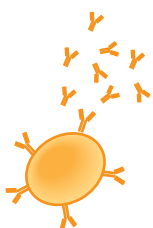
SEASONAL FLU: MATERNAL VACCINATION IS ACCEPTED DURING THE ENTIRE LENGTH OF THE PREGNANCY

TETANUS: MATERNAL VACCINATION IS ACCEPTED DURING THE ENTIRE LENGTH OF THE PREGNANCY

HOW DOES MATERNAL VACCINATION PROTECT THE NEWBORN?



POSSIBLE DISADVANTAGES OF MATERNAL VACCINATION



BLUNTING

THE PRESENCE OF MATERNAL ANTIBODIES IN A NEWBORN MIGHT BLUNT THE ANTIBODY PRODUCTION BY THE NEWBORN ITSELF, WHICH COULD LEAD TO SUBOPTIMAL ANTIBODY LEVELS.

SAFETY FOR MOTHER AND CHILD

LIVE ATTENUATED VACCINES, E.G. THE MEASLES MUMPS RUBELLA VACCINE (MMR), ARE CONTRA-INDICATED AS THEY COULD POSE A RISK FOR BOTH THE MOTHER AS WELL AS THE FETUS.

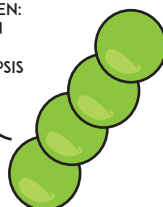


POTENTIAL FUTURE MATERNAL VACCINES



RESPIRATORY SYNCYTIAL VIRUS: MATERNAL VACCINATION COULD POTENTIALLY PREVENT SEVERE RESPIRATORY INFECTIONS IN YOUNG INFANTS

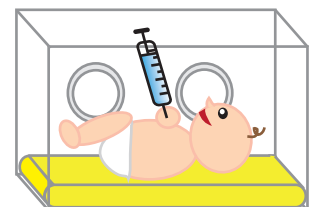
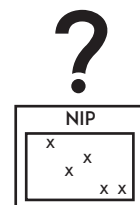
GROUP B STREPTOCOCCUS: MATERNAL VACCINATION COULD POTENTIALLY PREVENT NEONATAL SEPSIS AND MENINGITIS



PRETERM VACCINATION

BECAUSE OF THEIR UNEXPERIENCED IMMUNE RESPONSES AND THE REDUCED PLACENTAL TRANSFER OF MATERNAL ANTIBODIES, PRETERM INFANTS HAVE AN INCREASED RISK FOR INFECTIOUS DISEASES WITH A SEVERE COURSE.

CURRENT POLICY IS TO VACCINATE PRETERM INFANTS USING THE SAME NIP SCHEDULE AS TERM INFANTS.



NEW STUDIES ARE LOOKING INTO THE POTENTIAL RISKS AND BENEFITS OF EARLIER VACCINATION OF PRETERM INFANTS.