

**INFORMATION ON
VACCINATION** **DEAR PARENTS,**

The vaccinations recommended in the Swiss vaccination plan aim to protect children from serious disease – diphtheria, tetanus, polio, meningitis, hepatitis, FSME (tick-borne encephalitis), human papillomavirus (HPV) – as well as to prevent complications from certain other illnesses such as whooping cough, measles, mumps, German measles (rubella).

Most of these diseases and their complications are unfortunately not so rare that the risk of being affected is negligible. With the latest generation of vaccines (available since 1999), reactions have become very rare so that this can no longer be used as an argument against vaccination. From the point of view of alternative medicine we can say that Samuel Hahnemann, the founder of homeopathy, regarded vaccinations as homeopathic treatment and was therefore in favour of them. In some cases it is necessary to make an individual decision about whether to vaccinate or not – for example, if your child suffers from allergies or certain other diseases. If you are thinking of omitting some of the recommended vaccinations for your child, you must ask yourself the following basic question: *"How would we react if our child suffered permanent damage from an illness that could have been prevented by vaccination?"* Careful consideration of this question nearly always leads to a decision to vaccinate.

Diphtheria, Tetanus, Whooping Cough, Polio, Hib — BASIC VACCINATION

Timing: 2 mths / 4 mths / 6 mths / 7 yrs / repeat every 10 yrs

Diphtheria and tetanus are generally fatal infections which have become extremely rare thanks to vaccination. Injuries requiring treatment of wounds necessitate a tetanus booster if the last vaccination was more than two years ago. The haemophilus influenzae type B (Hib) vaccine offers good protection against the most common form of bacterial meningitis as well as epiglottitis. Both illnesses often have a fatal outcome.

Meningococcus C, Pneumococcus (Meningitis) — ADDITIONAL VACCINATION

Timing: 2 mths / 4 mths

Since 2006 vaccinations against two further forms of bacterial meningitis have been introduced. Both illnesses are very acute and often have a fatal outcome. Unfortunately it is not possible to integrate these vaccines in the above-mentioned combination vaccine, so each dose means an extra injection. If the vaccinations are not administered during babyhood, they can be done later.

Measles, Mumps, German Measles (Rubella) — BASIC VACCINATION

Timing: 9-12 mths / 18 mths

Measles can lead to dangerous complications such as meningitis, myocarditis, bronchiolitis, pneumonia, and appendicitis (frequency in the European epidemic of 2007-2009: 1 in 300 unvaccinated children). 20% of meningitis and myocarditis cases are fatal and a further 20% cause disability. The aim of the measles vaccination is to prevent such complications. We strongly recommend it. The mumps vaccination serves to prevent the complications of sterility and hardness of hearing. All girls should be vaccinated against rubella by the

age of 14 at the latest, to prevent rubella during pregnancy. This can damage the unborn child, leading to extremely serious disability. Boys are also vaccinated to prevent infection of pregnant women.

FSME (Tick-Borne Encephalitis) — OPTIONAL VACCINATION

Timing: from age of 6, 3 vaccinations, repeat every 10 yrs

Early summer meningoencephalitis is a viral disease transmitted by ticks that can lead to meningitis. Since the area affected by FSME is continually expanding, this vaccination is recommended for people who spend more than 14 days a year in the woods. For borreliosis (Lyme disease), also transmitted by ticks, there is no vaccination available. If recognised early enough, however, it can be treated with antibiotics.

Procedure for tick bites: Spray the tick with Parapic®, grasp with fine tweezers and pull (without twisting) to remove. This procedure often causes the tick to break but this is harmless. Disinfect the bite (best with Betadine®) and observe for the next 2 weeks. *If a small bluish lump or a circular expanding rash appears at the site of the bite, you must see a doctor.*

Hepatitis A and B (Liver Infection) — OPTIONAL VACCINATION

Timing: 11-15 yrs old (3 vaccinations in 7 months)

Hepatitis is a liver disease that can lead to cirrhosis. It is caused by a smear infection or contaminated foods (hepatitis A) or can be transmitted by blood, saliva, or sexual contact (hepatitis B). Those who work in the health service, travel to developing countries or have contact with drug addicts are especially vulnerable. This vaccination is essential in such cases. We always recommend that the two vaccinations are administered together.

Human Papillomavirus, HPV (Cervical Cancer) — OPTIONAL VACCINATION

Timing: 11-14 yrs old, 3 vaccinations, only for girls

This vaccination reduces the risk of cancer of the cervix in girls. It should be given before the start of sexual activity and does not exempt the girl from the usual gynaecological screening.

PLEASE INDICATE BELOW THE VACCINATIONS THAT YOU WISH TO HAVE ADMINISTERED TO YOUR CHILD AND HAND US THIS FORM BEFORE THE FIRST OR THE NEXT VACCINATION.

WE WOULD LIKE YOU TO VACCINATE OUR CHILD AGAINST THE FOLLOWING DISEASES (PLEASE TICK AS RELEVANT):

- DIPHTHERIA
- POLIO
- MENINGOCOCCUS
- MEASLES
- FSME
- HPV
- TETANUS
- HIB
- PNEUMOCOCCUS
- MUMPS
- HEPATITIS A
- WHOOPING COUGH
- RUBELLA
- HEPATITIS B

NAME / FIRST NAME OF CHILD

BORN (DD/MM/YYYY)

DATE

PARENT'S SIGNATURE