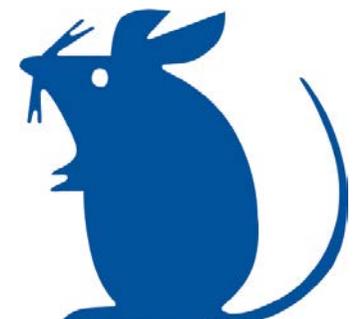


Immunisation Status	Immediate treatment			Later treatment
	Clean wound ¹	Tetanus Prone	High risk tetanus prone	
<p>Those aged 11 years and over, who have received an adequate priming course of tetanus vaccine² with the last dose within 10 years</p> <p>Children aged 5-10 years who have received priming course and pre-school booster</p> <p>Children under 5 years who have received an adequate priming course</p>	None required	None required	None required	Further doses as required to complete the recommended schedule (to ensure future immunity)
<p>Received adequate priming course of tetanus vaccine² but last dose more than 10 years ago</p> <p>Children aged 5-10 years who have received an adequate priming course but no preschool booster</p> <p><i>Includes UK born after 1961 with history of accepting vaccinations</i></p>	None required	Immediate reinforcing dose of vaccine	Immediate reinforcing dose of vaccine One dose of human tetanus immunoglobulin ³ in a different site	Further doses as required to complete the recommended schedule (to ensure future immunity)
<p>Not received adequate priming course of tetanus vaccine²</p> <p><i>Includes uncertain immunisation status and/ or born before 1961</i></p>	Immediate reinforcing dose of vaccine	Immediate reinforcing dose of vaccine One dose of human tetanus immunoglobulin ³ in a different site	Immediate reinforcing dose of vaccine One dose of human tetanus immunoglobulin ³ in a different site	

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Children's Emergency Department



Is your child protected against tetanus?
Information for parents, carers & relatives

Clean wound is defined as less than 6 hours old, non-penetrating with minor tissue damage.

Disclaimer: The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner. Authors: Children's Emergency Department (DB/AO)

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What is tetanus?

Tetanus is a disease of the nervous system caused by infection with the bacteria *Clostridium tetani*. Tetanus is a serious and potentially life-threatening disease which does not get better with antibiotics alone. Children with Tetanus usually need several different kinds of medicines to treat it including a blood product called immunoglobulin.

How can you catch tetanus?

Tetanus spores are found in **soil** or **manure**. Because of this, they can never be completely destroyed. They may get into the body through a puncture wound, burn or scratch which you may not have even noticed. The bacteria grow at the site of the injury and will make a person ill after about 10 days.

What are the symptoms of tetanus?

The main symptoms are:

- Stiffness in the jaw (lockjaw)
- General stiffness and spasms in the muscles
- Fever

Why immunise against tetanus?

Tetanus spores are commonly found in the environment. Tetanus can be fatal, especially to infants. Tetanus can't be spread from person to person, so relying on other people to be immunised to protect your child from tetanus won't work.

Vaccinations (relating to tetanus)

At 8, 12 and 16 weeks, your baby will be vaccinated against tetanus as part of their immunisation schedule.

The NHS does not provide a single tetanus vaccine. Your baby will receive the combined vaccine that protects them from: Diphtheria, tetanus, pertussis (whooping cough), polio, haemophilus influenza type b (hib) and hep B.

This is referred to as the 'primary course'. Your child will also receive a booster of the same combined vaccine at 3 and 14 years of age.

The combined UK vaccine does not contain thiomersal (mercury), egg protein or pork gelatine. It is inactivated, which means it does not contain any living bacteria. It cannot cause the diseases that it is protecting you from.

Wounds and burns and tetanus

Your child's wound or burn will be assessed as either 'clean' or 'tetanus prone'.

What are tetanus prone wounds and burns?

- Wounds or burns more than 6 hours old that require surgery.
- Wounds or burns that involve skin loss or a puncture injury where there has been contact with soil or manure.
- Wounds containing foreign objects, such as glass or metal.
- Open or compound fractures.
- Wounds or burns in children who are very unwell.

Whether clean or tetanus prone, a vaccination will be recommended if your child is not up-to-date with their immunisations. If your child is following the immunisation schedule as planned it is unlikely they will require any further protection against tetanus.

If your child is unimmunised or their tetanus immunisations are incomplete, they will need the combined vaccine either with or without the immunoglobulin treatment. The table on the other side of this leaflet shows how we come to this decision.

Reference Source:

www.gov.uk/government/publications/tetanus-the-green-book-chapter-30

Useful numbers:

NHS 111 - 24hr advice line
Practice Plus (Brighton walk-in Centre) 0333 321 0946
Practice Plus GP - 0300 130 3333
8am/8pm - 7 days a week