

## Q&A

### When is the polio vaccine offered?

The polio vaccine is given when your child is:

- 8, 12 and 16 weeks old as part of the 6-in-1 vaccine
- 3 years and 4 months old as part of the 4-in-1 (DTaP/IPV) pre-school booster
- 14 years old as part of the 3-in-1 (Td/IPV) teenage booster

You need all 5 of these vaccinations to be fully vaccinated against polio.

### What does the 6-in-1 vaccine protect against?

The 6-in-1 is given as a single injection to protect your baby against 6 serious childhood conditions:

- diphtheria
- hepatitis B
- Hib (Haemophilus influenzae type b)
- polio
- tetanus
- whooping cough (pertussis)

For more information visit: <https://www.nhs.uk/conditions/vaccinations/6-in-1-infant-vaccine/>

### What does the 4-in-1 pre-school booster protect against?

The 4-in-1 pre-school booster vaccine is offered to children to boost their protection against 4 different serious conditions:

- diphtheria
- tetanus
- whooping cough
- polio

For more information, visit: <https://www.nhs.uk/conditions/vaccinations/4-in-1-pre-school-dtap-ipv-booster/>

### What does the 3-in-1 teenage booster protect against?

The teenage booster, also known as the 3-in-1 or the Td/IPV vaccine, is given to boost protection against 3 separate diseases: tetanus, diphtheria and polio.

For more information, visit: <https://www.nhs.uk/conditions/vaccinations/3-in-1-booster-questions-answers/>

### I am an adult and haven't been vaccinated, is it too late?

Adults are eligible to have the complete course of 5 doses. You can have a polio vaccination at any point for free on the NHS if you've never had a vaccination for polio or have not completed the course of 5 doses. Contact your GP to book an appointment.

### Do I need the vaccine if I've already had polio?

Yes, you should also get vaccinated even if you've had polio before as it protects against different types of polio.

## **Can you just get vaccinated with polio vaccine on its own if you didn't get it through routine programme?**

You will be caught up using the appropriate combination vaccine for your age and vaccination history.

## **Can I get polio from the polio part of the vaccine?**

The combined vaccines contain dead (inactivated) polio virus, which cannot cause polio.

## **I have seen on the news that there has been an outbreak of polio. What is the current situation?**

The UK Health Security Agency (UKHSA), working with the Medicines & Healthcare products Regulatory Agency (MHRA), has found poliovirus in sewage samples collected from the London Beckton Sewage Treatment Works.

As part of routine surveillance, it is normal for 1 to 3 'live-vaccine like' polioviruses to be detected each year in UK sewage samples but these have always been one-off findings that were not detected again. These previous detections occurred when an individual vaccinated overseas with the live oral polio vaccine (OPV) returned or travelled to the UK and briefly 'shed' traces of the vaccine-like poliovirus in their faeces.

Investigations are underway after several closely related viruses were found in sewage samples taken between February and May. The virus has continued to evolve and is now classified as a 'live vaccine-derived' poliovirus type 2 (VDPV2), which on rare occasions can cause serious illness, such as paralysis, in people who are not fully vaccinated.

The detection of a VDPV2 suggests it is likely there has been some spread between closely linked individuals in London and that they are now shedding the type 2 poliovirus strain in their faeces. The virus has only been detected in sewage samples and no associated cases of paralysis have been reported but investigations will aim to establish if any community transmission is occurring.

## **How many people do we estimate have it?**

Vaccine-derived poliovirus has only been identified in sewage samples collected from the London Beckton Sewage Treatment Works. No cases have been identified.

## **What should people do?**

The risk to the public overall is extremely low. However, if you or your child are not up to date with your polio vaccinations, please contact your GP. You can check if you or your child have had the vaccine through the red book, or by contacting your GP practice.

The best way to prevent polio is to make sure you and your child are up to date with your vaccinations

## **What types of polio vaccine are there and how are they used?**

There are two types of polio vaccine – inactivated polio vaccine (IPV) and oral polio vaccine (OPV).

IPV is the inactivated polio vaccine which is injectable and is what we have used in the UK since 2004.

In countries where polio is still circulating, OPV, the oral polio vaccine (given by mouth) is used because it is better at controlling outbreaks. OPV contains a weakened live virus that

mimics natural infection by growing in the gut and can be shed in faeces for a few weeks after people are vaccinated.

Because OPV generates an immune response in the gut it is very good at stopping the spread of polio, and it has been a very important tool in the global effort to eradicate polio.

### **What are the symptoms of polio?**

Most people with polio won't have any symptoms and will fight off the infection without even realising they were infected. A small number of people will experience a flu-like illness 3 to 21 days after they're infected.

Symptoms can include:

- a high temperature (fever) of 38C (100.4F) or above
- a sore throat
- a headache
- abdominal (tummy) pain
- aching muscles
- feeling and being sick

These symptoms will usually pass within about a week without any medical intervention.

In a small number of cases, between 1 in 100 to 1 in 1000 infections, the polio virus attacks the nerves in the spine and base of the brain. This can cause paralysis, usually in the legs, that develops over hours or days. If the breathing muscles are affected, it can be life threatening.

If you or your child is experiencing unusual symptoms that could be the beginning of paralysis you should always seek medical advice immediately. Symptoms include rapid onset of weakness in a limb which will be flaccid (or floppy). The weakness most often involves the legs, but sometimes affects the muscles of the head and neck or breathing.

After paralytic polio, movement will often slowly return over the next few weeks and months, but many people are left with persistent problems. If you are experiencing these symptoms you should consult a health professional immediately.