Position statement on the use of paracetamol around the time of immunisation

The use of paracetamol around the time of immunisation is not contraindicated but is not routinely recommended for the National Immunisation Schedule vaccines.

- When administering the meningococcal B vaccine Bexero, either alone or with other vaccines, in children aged under 2 years prophylactic paracetamol is recommended to reduce the risk of high fever and injection site pain that occurs more commonly with this vaccine than other childhood vaccines.
- We do not recommend the routine use of paracetamol for management of fever, discomfort or pain associated with other childhood vaccines. However, when there is a clinical indication such as the child is miserable or distressed by fever, discomfort or pain following immunisation, paracetamol use is recommended.
- Ibuprofen is not recommended. A review of multiple studies identified that ibuprofen is less effective than paracetamol in preventing a fever of 38°C or higher, or injection site pain.

Health professionals are encouraged to discuss possible immunisation responses and non-pharmaceutical management of fever or discomfort with parents.

Fever is part of a robust immune system response to the meningococcal B vaccine Bexero, usually peaking around 6 hours after vaccination and settling over 24–48 hours. A fever over 38°C is more likely to occur in infants aged under 2 years after vaccination with Bexero compared with other routinely used infant vaccines. When Bexero is administered at the same visit as other Immunisation Schedule vaccines, a fever over 38°C or 39°C is almost twice as likely as when the Immunisation Schedule vaccines are given alone. Similarly, redness, swelling and/or mild–moderate pain around the injection site are also common expected immune responses to Bexero.

References