



Infant Massage and Immunisation

There are always questions about infant massage and immunisations. Recommendations are often given to parents that have been based on 'folk law' rather than any clinical evidence. Advice that mothers should not massage their baby for 2-4 days after their vaccinations can cause confusion, as in the IAIM training the ethos is that massage is baby led and if the baby is not feeling like a massage they will indicate this to the parent.

In order to clarify the situation and obtain a professional opinion, Cherry Bond CIMI, RSCN, RGN, Brazelton Assessor (NBAS) contacted Dr Robert M Jacobson, Professor of Paediatrics in the Department of Paediatric and Adolescent Medicine at the Mayo Clinic in Minnesota. His reply is shown below.:

Reply from Dr Robert Jacobson

First of all, the only published study I've seen against massage was one involving vigorous rubbing at the injection site immediately after vaccination. It resulted in much more local inflammation without improvement in immune response. There is no physiologic reason why one should fear a non-injection site massage at any point after the vaccination. I would imagine that the skin-to-skin contact would soothe the baby.

Vaccines vary in their "release." Live vaccines like the measles-mumps-rubella and the BCG create attenuated infections. The measles-mumps-rubella vaccine gives a limited rash and fever to a proportion of recipients 10 days to 3 weeks after vaccination.

The BCG also causes a delayed reaction. "A normal dermatologic reaction to BCG vaccination is a red indurated (firm or hardened) area measuring 5-15mm. A crust is formed around this induration, which is soft at the centre for 3-4 weeks. At 6-10 weeks, the crust falls off, leaving a flat 3 to 7mm scar. A 1977 study suggests 10mm as the cut off point for the size of a normal reaction. Regional lymphadenopathy (abnormal enlargement of

the lymph nodes) in the absence of erythema (redness of the skin) or vesicle formation (fluid filled pimple) should also be considered a normal reaction to the vaccine."

Extract taken from *Clinical Infectious Diseases*, 2000;31:S75-S76.

Most vaccines are inactivated vaccines that merely present an antigen to the body. A day at day-care or school presents more antigens than the antigens these vaccines expose the infant to. Multiple vaccines do not change how any one of the vaccines behave: in fact the FDA requires evidence showing a single vaccine behaves just as well when given with other vaccines as it does when given alone. When inactivated vaccines do cause reactions such as redness or soreness at the injection site or a transient low-grade fever, the reaction shows up and resolves over hours or a day or two.

Finally, here are two wonderful web sites where you can learn more:

www.cdc.gov

www.immunize.org

A CIMI's Experience

By Isla Ball

A mother in my group was concerned about whether or not to massage her baby's legs as he had been immunised two days previously. I suggested that she position herself and her baby in preparation for massage, look into the baby's eyes, place her hand gently over the vaccination site on one leg and ask:

"How does that feel?"

Her baby responded positively, so I suggested the mother gave the vaccination area a gentle rub. Whilst doing this the mother asked:

"Is that ok? What do you think about me massaging your leg?"

She thought he seemed happy with that, but when she began the massage he grumbled, grunted and kicked her.

"Maybe that's a bit sore so shall we leave that leg?"

She tried the same thing with the other leg, and although his body felt relaxed, his eyes looked slightly wary.

"Shall we try massaging your leg from just below the knee and see how that feels?"

He smiled and accepted his mother's good idea and they both enjoyed the massage together.



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www.iaim.org.uk