Mae Brechu yn achub bywydau
Vaccination saves lives

MMR vaccination

Protecting against measles, mumps and rubella infection

Iechyd Cyhoeddus Cymru
Public Health Wales

Why is the MMR vaccine important?

The MMR vaccine protects against three serious infections: measles, mumps and rubella.

Around 9 out of 10 young people have received the MMR vaccine in Wales and are protected against the diseases. For those who haven't had the MMR vaccine, the diseases (especially measles and mumps) still remain a threat to their health.

Why should I get the MMR vaccine?

The MMR vaccine is the safest, most effective way to protect yourself and your child against measles, mumps and rubella. Since the vaccine was introduced in 1988, these infections have become rare in the UK. However, there have been outbreaks of disease, especially measles, when the number of people having the vaccine has dropped.

! The MMR vaccine can protect you and your child from serious illness.

What does the vaccine protect against?

Measles

Measles is caused by a very infectious virus which can lead to serious and possibly life-threatening complications. Nearly everyone who catches it will have a high fever and a rash and will be very unwell. One in every 15 people gets complications, including infection of the lungs (pneumonia) and brain (encephalitis). Measles can kill – in a measles outbreak in Wales in 2013 over 1,200 people were infected, 88 needed hospital treatment and one person died.

Measles is one of the most infectious diseases known. You and your child are vulnerable to this deadly infection unless you are protected by the vaccine.

Mumps

Mumps virus causes painful, swollen glands in the face, neck and jaw, and a fever and headache. Complications include infection of the brain (encephalitis) and the brain covering (meningitis). It can also cause painful swelling of the testicles in males and ovaries in women. Just under half of all males who get mumps-related testicular pain and swelling notice some shrinkage of their testicles.

Rubella

Rubella (German measles) is also a disease caused by a virus spread by coughs and sneezes. In children it is usually mild and can go unnoticed but may cause a brief rash, swollen glands and a sore throat. But catching rubella while pregnant is very serious for the unborn baby. It can seriously damage their sight, hearing, heart and brain. This condition is called congenital rubella syndrome (CRS).

If women get rubella infection in the first three months of pregnancy it causes damage to the unborn baby in nine out of 10 cases. In the five years before the MMR vaccine was introduced, about 43 babies a year in the UK were born with congenital rubella syndrome.

When is the MMR vaccine offered?

The first dose of the MMR vaccine is offered between 12 and 13 months of age. By that age the immunity (protection) a baby had received from their mother against the diseases will have faded. The second dose is given at 3 years and 4 months, at the same time as the 4-in-1 pre-school booster vaccination. Both doses of the MMR vaccine are needed to get the best possible protection. Contact your GP surgery as soon as possible to catch up on any missed MMR vaccinations.

Dose 1

the first dose
between 12 and 13 months of age

Dose 2

the second dose
at 3 years and 4 months at the same time as the 4-in-1 pre-school booster vaccination

! You can catch up with missed MMR doses at any age.

Who else should have the vaccine?

Anyone born after 1970 who has not had two doses of the MMR vaccine should arrange to have it at their GP surgery.

Teenagers and young adults

If you have not had two doses of the MMR vaccine you are at risk of catching the diseases the vaccine protects against. If you have already had one dose you will only need one further dose, no matter how long ago you had your first dose. If you need two doses they can be given one month apart. Contact your GP surgery as soon as possible to catch up on any missed MMR vaccinations.

Women and pregnancy

Rubella can be a very serious infection for unborn babies. If you're planning to have a baby you should have had two doses of the MMR vaccine. As it is a live vaccine, you can't have it when you are pregnant and you should avoid getting pregnant for one month after having the MMR vaccination. If you have not had two doses, contact your GP surgery as soon as possible to catch up on any missed MMR vaccinations.

If you are pregnant or have just had a baby and are not sure if you've had two doses of the MMR vaccine, speak to your midwife or GP at your next appointment.

Older adults

Adults born in the UK before 1970 are very likely to have had measles, mumps and rubella as a child, so will already be protected. If you are not sure whether you have had these infections and are concerned, discuss it with your GP or nurse. Even if you think you have had the vaccines before but aren't sure or have no record of this, it is safe to receive further doses.

Moved to the UK?

If you have moved to live in the UK you may need two doses of the MMR vaccine. Different countries offer different vaccinations and not all may have used the combined MMR vaccine. If you don't have a record of the vaccines you have received or are not sure, discuss this with your GP or nurse. You may also need other routine UK vaccinations.

Are there any reasons why the vaccine should not be given?

There are very few reasons why the MMR vaccine cannot be given. If you or your child are ill with a fever on the day the vaccination is due, delay the appointment until you are better. If you or your child have a minor illness without a fever, such as a cold, the vaccination should be given as normal.

The vaccine should not be given to anyone who has had a severe (life-threatening) reaction to a previous dose of the vaccine or any ingredient in the vaccine.

The MMR vaccine should not be given to pregnant women or people who have a weakened immune system (are 'immunosuppressed') due to treatment or a disease.

Before receiving the MMR vaccine, you should tell the GP or nurse if you or your child:

- is immunosuppressed due to treatment for a serious condition, such as a transplant or cancer, or is taking high levels of steroids or medications that significantly affect the immune system;
- has a condition that affects the immune system; or
- has had convulsions (fits) not associated with fever.

You should also tell them if you are pregnant.

Can the vaccine be given to someone with allergies?

Yes. Asthma, eczema, food intolerances and egg allergies do not prevent someone from having the MMR vaccine.

Can the vaccine be given before 12 months of age?

Not usually, because immunity passed on from the mother can make the MMR vaccine less effective. Sometimes the vaccine may be offered to children from six months of age, for example before travel to areas where measles is circulating or during an outbreak. Any child who is given the MMR vaccine before the age of 12 months should still receive two further routine doses.

! If you or your child has missed any MMR vaccinations, it's important to catch up as soon as possible. Talk to your GP or nurse.

Is there gelatine in the MMR vaccine?

Gelatine is a substance used in a wide variety of foods and medicines, including vaccines. In the UK we currently use two MMR vaccines, called MMRvaxPro and Priorix. MMRvaxPro contains porcine (pork) gelatine. Priorix does not contain gelatine. Please speak to your GP or nurse if you need a vaccine that does not contain gelatine.

How will I know when the vaccinations are due?

An appointment will be sent to your home address when the vaccine is due. Most GP surgeries and health centres run vaccination clinics for children. If you change your address, please let your GP surgery know.

What happens at the appointment?

Your GP or nurse will explain about the vaccination and answer any questions you have. The vaccine is usually given as an injection in the upper arm.

What if I miss the appointment?

You should cancel an appointment beforehand if you can't make it. If you do miss the appointment or have to delay the vaccination, make a new appointment as soon as possible.

What are the side effects of the MMR vaccine?

Millions of doses of the MMR vaccine have been given worldwide for over 30 years. The vaccine has a very good safety record.

! Side effects are usually mild and are less common after the second dose.

People can sometimes get a sore arm where the injection was given. Some may develop a small lump where the needle was put in, and the area around it might also be slightly hot and red. This is normal and may last some weeks. It does not need any treatment.

The vaccine contains weakened types of live measles, mumps and rubella viruses. Because the viruses are weakened, people who have had the vaccine cannot infect other people. The three different viruses in the vaccine act at different times and may produce the following side effects after the first dose.

- Around six to 10 days after the vaccination, as the measles part of the vaccine starts to work, about one in 10 people may develop a fever and some develop a measles-like rash and a loss of appetite. Symptoms usually last two to three days.
- About three weeks after the vaccination, 1 in 50 people may get mumps-like symptoms (fever and swollen glands) after their vaccination as the mumps part of the vaccine starts to work.
- Rarely, one in every 1000 young children may have a fit caused by a fever following the vaccination. This fit is also called a febrile convulsion. However, if a young child who has not been vaccinated gets measles, they are five times more likely to have a fit.
- Very rarely, about 1 in 10,000 people may get a rash of small bruise-like spots in the six weeks after the vaccination. If this happens get advice from your GP.

Less than one in a million people develop encephalitis (swelling of the brain) after the MMR vaccine, but there is very little evidence that it is actually caused by the vaccine. However, if someone catches measles, the risk of developing encephalitis is over 100 times higher.

Less than one in a million people can have a severe reaction soon after vaccination, which causes breathing difficulties and may cause them to collapse. This is called an anaphylactic reaction and it can also happen with other medicines and food. These reactions are extremely rare and doctors and nurses are trained to manage them. People who have an anaphylactic reaction can be successfully treated and usually recover within a few hours.

If you or your child has a fever and feels unwell after the vaccination, you or they can take paracetamol or ibuprofen. Read the instructions on the packet carefully and take the correct dose for your or your child's age. We don't recommend taking these medicines beforehand to prevent a fever from developing.

Remember – children under 16 should not take medicines that contain aspirin.

You can report suspected side effects of vaccines and medicines through the Yellow Card scheme. You can do this online at **www.mhra.gov.uk/yellowcard** or by calling the Yellow Card scheme hotline on **0800 731 6789** (Monday to Friday, 9am to 5pm).

Where can I get more information?

If you have any questions or want more information, you can visit **111.wales.nhs.uk**, talk to your doctor or nurse or call **NHS 111 Wales**.

You can find out more information on vaccines offered in Wales at: **phw.nhs.wales/vaccines**

You can find out more about the vaccine, including its contents and possible side effects at **medicines.org.uk/emc**. You will need to enter the name of the vaccine (MMRvaxPro or Priorix) in the search box. You can also see the patient leaflet online.

You can report suspected side effects online at **www.mhra.gov.uk/yellowcard** or by downloading the Yellow Card app or calling **0800 731 6789** (Monday to Friday, 9am to 5pm).

A schedule showing which vaccinations are routinely offered in Wales is available from: **111.wales.nhs.uk/CompleteSchedule**

To order more copies of this leaflet, visit: **publichealthwales.org/HealthInformationResources**

To find out how the NHS uses your information, visit: **111.wales.nhs.uk/AboutUs/Yourinformation**

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Ble gallaf gael rhagor o wybodaeth?

Os oes gennych unrhyw gwestiynau neu os ydych am gael rhagor o wybodaeth, ewch i **111.wales.nhs.uk**, siaradwch â'ch meddyg neu nyrs neu ffoniwch **GIG 111 Cymru**.

Gallwch gael rhagor o wybodaeth am frechlynnau a gynigir yng Nghymru yn: **icc.gig.cymru/brechlyn**

Gallwch gael rhagor o wybodaeth am y brechlyn, ei gynhwysion a sgil-effeithiau posibl yn **medicines.org.uk/emc**. Bydd angen i chi roi enw'r brechlyn (MMRvaxPro neu Priorix) yn y blwch chwilio. Gallwch hefyd weld y daflen cleifion ar-lein.

Gallwch roi gwybod am sgil-effeithiau a amheuir yn **www.mhra.gov.uk/yellowcard** neu drwy lawrlwytho'r ap Yellow Card, neu drwy ffonio **0800 731 6789** (dydd Llun i ddydd Gwener, 9am i 5pm).

Mae amserlen sy'n dangos pa frechiadau a gynigir fel mater o drefn yng Nghymru ar gael o: **111.wales.nhs.uk/amserlangyflawn**

I archebu rhagor o gopïau o'r daflen hon, ewch i: **iechydcyhoedduscymru.org/adnoddau-gwybodaeth-iechyd**

I gael gwybod sut y mae'r GIG yn defnyddio eich gwybodaeth, ewch i: **111.wales.nhs.uk/amdanomni/eichgwybodaeth**

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- Yn anaml iawn, efallai y bydd 1 o bob 10,000 o bobl yn cael brech o smotiau bach tebyg i gleisiau yn y chwe wythnos ar ôl y brechiad. Os bydd hyn yn digwydd, gofynnwch am gyngor gan eich meddyg teulu.

Mae llai nag un o bob miliwn yn datblygu enseffalitis (chwyddo'r ymennydd) ar ôl y brechlyn MMR, ond prin iawn yw'r dystiolaeth ei fod yn cael ei achosi gan y brechlyn mewn gwirionedd. Fodd bynnag, os bydd rhywun yn dal y frech goch, mae'r risg o ddatblygu enseffalitis dros 100 gwaith yn uwch.

Gall llai nag un o bob miliwn gael adwaith difrifol yn fuan ar ôl cael eu brechu, sy'n achosi anawsterau anadlu ac a allai achosi iddynt fynd yn anymwybodol. Gelwir hyn yn adwaith anaffylactig a gall hefyd ddigwydd gyda. meddyginiaethau eraill a bwyd. Mae'r adweithiau hyn yn eithriadol o brin ac mae meddygon a nyrsys wedi'u hyfforddi i'w rheoli. Gellir trin pobl sy'n cael adwaith anaffylactig yn llwyddiannus ac fel arfer maent yn gwella o fewn ychydig oriau.

Os oes gennych chi neu'n plentyn dwymyn ac yn teimlo'n sâl ar ôl y brechiad, gallwch chi neu nhw gymryd parasetamol neu ibuprofen. Darllenwch y cyfarwyddiadau ar y pecyn yn ofalus a chymryd y dos cywir ar gyfer eich oedran chi neu'ch plentyn. Nid ydym yn argymell cymryd y meddyginiaethau hyn ymlaen llaw i atal twymyn rhag datblygu.

! Cofiwch – ni ddylai plant o dan 16 oed gymryd meddyginiaethau sy'n cynnwys aspirin.

Gallwch roi gwybod am unrhyw sgil-effeithiau tybiedig brechlynnau a meddyginiaethau drwy'r cynllun Yellow Card. Gallwch wneud hyn ar-lein yn **www.mhra.gov.uk/yellowcard** neu drwy ffonio llinell gymorth Yellow Card ar **0800 731 6789** (dydd Llun i ddydd Gwener, 9am i 5pm).

Beth yw sgil-effeithiau'r brechlyn MMR?

Mae miliynau o ddosau o'r brechlyn MMR wedi'u rhoi yn fyd-eang ers dros 30 mlynedd. Mae gan y brechlyn record ddiogelwch dda iawn.

> **Mae sgil-effeithiau fel arfer yn ysgafn ac yn llai cyffredin ar ôl yr ail ddos.**

Weithiau gall pobl gael braich ddolurus lle rhoddwyd y pigiad. Gall rhai ddatblygu lwmp bach lle rhoddwyd y nodwydd i mewn, a gall yr ardal o'i amgylch fod ychydig bach yn boeth ac yn goch. Mae hyn yn arferol a gall bara rhai wythnosau. Nid oes angen unrhyw driniaeth arno.

Mae'r brechlyn yn cynnwys mathau gwanedig o feirysau byw y frech goch, clwy'r pennau a rwbela. Oherwydd bod y feirysau wedi'u gwanhau, ni all pobl sydd wedi cael y brechlyn heintio pobl eraill. Mae'r tri feirws gwahanol yn y brechlyn yn gweithredu ar wahanol adegau a gallant achosi'r sgil-effeithiau canlynol ar ôl y dos cyntaf.

- Tua chwech i 10 diwrnod ar ôl y brechiad, wrth i ran y frech goch o'r brechlyn ddechrau gweithio, gall tua un o bob 10 o bobl ddatblygu twymyn ac mae rhai'n datblygu brech debyg i'r frech goch a cholli archwaeth. Mae symptomau fel arfer yn para dau i dri diwrnod.
- Tua thair wythnos ar ôl y brechiad, gall 1 o bob 50 o bobl gael symptomau tebyg i glwy'r pennau (twymyn a chwarennau chwyddedig) ar ôl eu brechiad wrth i'r rhan clwy'r pennau o'r brechlyn ddechrau gweithio.
- Yn anaml, gall un o bob 1000 o blant ifanc gael ffit a achosir gan dwymyn yn dilyn y brechiad. Mae'r ffit hon hefyd yn cael ei galw'n ffit wres. Fodd bynnag, os yw plentyn bach nad yw wedi cael ei frechu yn cael y frech goch, mae'r plentyn bum gwaith yn fwy tebygol o gael ffit.

A oes gelatin yn y brechlyn MMR?

Mae gelatin yn sylwedd a ddefnyddir mewn amrywiaeth eang o fwydydd a meddyginiaethau, gan gynnwys brechlynnau. Yn y DU rydym ar hyn o bryd yn defnyddio dau frechlyn MMR, o’r enw MMRvaxPro a Priorix. Mae MMRvaxPro yn cynnwys gelatin moch. Nid yw Priorix yn cynnwys gelatin. Siaradwch â’ch meddyg neu nyrs os oes angen brechlyn arnoch nad yw’n cynnwys gelatin.

Sut y byddaf yn gwybod pryd y bydd angen i mi gael y brechiadau?

Bydd apwyntiad yn cael ei anfon i’ch cyfeiriad cartref pan fydd angen i chi gael y brechlyn. Mae’r rhan fwyaf o feddygfeydd a chanolfannau iechyd yn cynnal clinigau brechu i blant. Os byddwch yn newid eich cyfeiriad, rhowch wybod i’ch meddygfa.

Beth fydd yn digwydd yn yr apwyntiad?

Bydd eich meddyg teulu neu nyrs yn esbonio’r brechiad ac yn ateb unrhyw gwestiynau sydd gennych. Fel arfer, rhoddir y brechlyn fel pigiad yn rhan uchaf y fraich.

Beth os byddaf yn colli’r apwyntiad?

Dylech ganslo apwyntiad ymlaen llaw os na allwch fod yn bresennol. Os byddwch yn colli’r apwyntiad neu’n gorfod gohirio’r brechiad, trefnwch apwyntiad newydd cyn gynted â phosibl.

A ellir rhoi’r brechlyn i rywun ag alergeddau?

Gellir. Nid yw asthma, ecsema, anoddefiadau bwyd ac alergeddau wyau yn atal rhywun rhag cael y brechlyn MMR.

A ellir rhoi’r brechlyn cyn 12 mis oed?

Ddim fel arfer, oherwydd gall imiwnedd a drosglwyddir o’r fam wneud y brechlyn MMR yn llai effeithiol. Weithiau gellir cynnig y brechlyn i blant o chwe mis oed, er enghraifft cyn teithio i ardaloedd lle mae’r frech goch yn mynd ar led neu yn ystod brigiad o achosion. Dylai unrhyw blentyn sy’n cael y brechlyn MMR cyn 12 mis oed barhau i gael dau ddos arferol arall.

Os ydych chi neu’ch plentyn wedi colli unrhyw frechiadau MMR, mae’n bwysig dal i fyny cyn gynted â phosibl. Siaradwch â’ch meddyg teulu neu nyrs.

Wedi symud i’r DU?

Os ydych wedi symud i fyw yn y DU efallai y bydd angen dau ddos o’r brechlyn MMR arnoch. Mae gwahanol wledydd yn cynnig brechiadau gwahanol ac efallai nad yw pob un ohonynt wedi defnyddio’r brechlyn MMR cyfunol. Os nad oes gennych gofnod o’r brechlynnau rydych wedi’u derbyn neu os nad ydych yn siŵr, trafodwch hyn gyda’ch meddyg teulu neu nyrs. Efallai y bydd angen brechiadau arferol eraill yn y DU arnoch hefyd.

A oes unrhyw resymau pam na ddylid rhoi’r brechlyn?

Prin iawn yw’r rhesymau pam na ellir rhoi’r brechlyn MMR. Os ydych chi neu’ch plentyn yn sâl gyda thwymyn ar y diwrnod y mae angen i chi gael y brechiad, gohiriwch yr apwyntiad nes eich bod yn well. Os oes gennych chi neu eich plentyn salwch ysgafn heb dwymyn, fel annwyd, dylid rhoi’r brechlyn fel arfer.

Ni ddylid rhoi’r brechlyn i unrhyw un sydd wedi cael adwaith difrifol (sy’n bygwth bywyd) i ddos blaenorol o’r brechlyn neu unrhyw gynhwysyn yn y brechlyn.

Ni ddylid rhoi’r brechlyn MMR i fenywod beichiog na phobl sydd â system imiwnedd wannach (sy’n ‘imiwnoataliedig’) oherwydd triniaeth neu glefyd.

Cyn cael y brechlyn MMR, dylech ddweud wrth y meddyg teulu neu’r nyrs os ydych chi neu’ch plentyn:

- â system imiwnedd wannach oherwydd triniaeth ar gyfer cyflwr difrifol, fel trawsblaniad neu ganser, neu’n cymryd lefelau uchel o steroidau neu feddyginiaethau sy’n effeithio’n sylweddol ar y system imiwnedd;
- â chyflwr sy’n effeithio ar y system imiwnedd; neu
- wedi cael confylsiynau (ffitiau) nad ydynt yn gysylltiedig â thwymyn.

Dylech hefyd ddweud wrthynt os ydych yn feichiog.

Pwy arall ddylai gael y brechlyn?

! Dylai unrhyw un a anwyd ar ôl 1970 nad yw wedi cael dau ddos o'r brechlyn MMR drefnu i'w gael yn eu meddygfa.

Plant yn eu harddegau ac oedolion ifanc

Os nad ydych wedi cael dau ddos o'r brechlyn MMR rydych mewn perygl o ddal y clefydau y mae'r brechlyn yn amddiffyn yn eu herbyn. Os ydych eisoes wedi cael un dos, dim ond un dos arall fydd ei angen arnoch, waeth pa mor bell yn ôl y cawsoch eich dos cyntaf. Os oes angen dau ddos arnoch, gellir eu rhoi fis ar wahân. Cysylltwch â'ch meddygfa cyn gynted â phosibl i ddal i fyny ar unrhyw frechiadau MMR a gollwyd.

Menywod a beichiogrwydd

Gall rwbela fod yn haint difrifol iawn i fabanod yn y groth. Os ydych yn bwriadu cael babi dylech fod wedi cael dau ddos o'r brechlyn MMR. Gan ei fod yn frechlyn byw, ni allwch ei gael pan fyddwch yn feichiog a dylech osgoi beichiogi am fis ar ôl cael y brechiad MMR. Os nad ydych wedi cael dau ddos, cysylltwch â'ch meddygfa cyn gynted â phosibl i ddal i fyny ar unrhyw frechiadau MMR a gollwyd.

Os ydych yn feichiog neu newydd gael babi ac nad ydych yn siŵr a ydych wedi cael dau ddos o'r brechlyn MMR, siaradwch â'ch bydwraig neu'ch meddyg teulu yn eich apwyntiad nesaf.

Oedolion hŷn

Mae oedolion a anwyd yn y DU cyn 1970 yn debygol iawn o fod wedi cael y frech goch, clwy'r pennau a rwbela pan oeddent yn blentyn, felly byddant eisoes wedi'u hamddiffyn. Os nad ydych yn siŵr a ydych wedi cael yr heintiau hyn ac yn pryderu, trafodwch hyn gyda'ch meddyg teulu neu nyrs. Hyd yn oed os ydych yn meddwl eich bod wedi cael y brechlynnau yn y gorffennol ond ddim yn siŵr neu heb gofnod o hyn, mae'n ddiogel derbyn dosau pellach.

Os bydd menywod yn cael haint rwbela yn ystod tri mis cyntaf beichiogrwydd mae'n achosi niwed i'r baban yn y groth mewn naw o bob 10 achos. Yn ystod y pum mlynedd cyn cyflwyno'r brechlyn MMR, ganwyd tua 43 o fabanod bob blwyddyn yn y DU gyda syndrom rwbela cynhenid.

Pryd mae'r brechlyn MMR yn cael ei gynnig?

Mae'r dos cyntaf o'r brechlyn MMR yn cael ei gynnig rhwng 12 a 13 mis oed. Erbyn yr oedran hwnnw bydd yr imiwnedd (amddiffyniad) yr oedd babi wedi'i gael gan ei fam yn erbyn y clefydau wedi pylu. Rhoddir yr ail ddos pan fyddant yn 3 mlwydd oed a 4 mis, ar yr un pryd â'r brechiad atgyfnerthu 4 mewn 1 i blant cyn oed ysgol. Mae angen y ddau ddos o'r brechlyn MMR er mwyn cael yr amddiffyniad gorau posibl. Cysylltwch â'ch meddygfa cyn gynted â phosibl i ddal i fyny ar unrhyw frechiadau MMR a gollwyd.

Dos 1

y dos cyntaf
rhwng 12 a 13 mis oed

Dos 2

yr ail ddos
yn 3 oed a 4 mis ar yr un pryd â'r brechiad atgyfnerthu 4 mewn 1 i blant cyn oed ysgol

! Gallwch ddal i fyny ag unrhyw ddosau MMR a gollwyd ar unrhyw oedran.

Beth mae'r brechlyn yn amddiffyn yn ei erbyn?

Y Frech Goch

Achosir y frech goch gan feirws heintus iawn a all arwain at gymhlethdodau difrifol a allai fygwth bywyd. Bydd bron bawb sy'n ei dal yn dioddef twymyn uchel a brech a byddant yn sâl iawn. Mae un o bob 15 o bobl yn cael cymhlethdodau, gan gynnwys heintio'r ysgyfaint (niwmonia) a'r ymennydd (enseffalitis). Gall y frech goch ladd – mewn brigiad o achosion o'r frech goch yng Nghymru yn 2013 cafodd dros 1,200 o bobl eu heintio, roedd angen triniaeth ysbyty ar 88 o bobl a bu farw un person.

Y frech goch yw un o'r clefydau mwyaf heintus y gwyddom amdano. Rydych chi a'ch plentyn yn agored i'r haint marwol hwn oni bai eich bod wedi'ch amddiffyn gan y brechlyn.

Clwy'r pennau

Mae clwy'r pennau yn achosi chwarennau poenus, chwyddedig yn yr wyneb, y gwddf a'r ên, a thwymyn a phen tost/cur pen. Mae'r cymhlethdodau yn cynnwys haint ar yr ymennydd (enseffalitis) a gorchudd yr ymennydd (llid yr ymennydd). Gall hefyd achosi chwyddo poenus yn y ceilliau mewn dynion a'r ofarïau mewn menywod. Mae ychydig o dan hanner yr holl ddynion sy'n cael poen a chwyddo yn y ceilliau sy'n gysylltiedig â chlwy'r pennau yn sylwi ar rywfaint o grebachu o ran eu ceilliau.

Rwbela

Mae rwbela (brech goch yr Almaen) hefyd yn glefyd a achosir gan feirws a ledaenir gan beswch a thisian. Mae fel arfer yn ysgafn mewn plant ac efallai na fydd neb yn sylwi arni ond gall achosi brech fer, chwarennau chwyddedig a gwddf tost. Ond mae dal rwbela tra'n feichiog yn ddifrifol iawn i'r baban yn y groth. Gall niweidio ei olwg, ei glyw, ei galon a'i ymennydd yn ddifrifol. Gelwir y cyflwr hwn yn syndrom rwbela cynhenid (CRS).

Pam mae’r brechlyn MMR yn bwysig?

Mae’r brechlyn MMR yn amddiffyn rhag tri haint difrifol: y frech goch, clwy’r pennau a rwbela.

Mae tua 9 o bob 10 o bobl ifanc wedi cael y brechlyn MMR yng Nghymru ac maent wedi’u hamddiffyn rhag y clefydau. I’r rhai nad ydynt wedi cael y brechlyn MMR, mae’r clefydau (yn enwedig y frech goch a chlwy’r pennau) yn dal i fod yn fygythiad i’w hiechyd.

Pam y dylwn gael y brechlyn MMR?

Y brechlyn MMR yw’r ffordd fwyaf diogel a mwyaf effeithiol o amddiffyn eich hun a’ch plentyn rhag y frech goch, clwy’r pennau a rwbela. Ers cyflwyno’r brechlyn yn 1988, mae’r heintiau hyn wedi mynd yn brin yn y DU. Fodd bynnag, cafwyd achosion o glefyd, yn enwedig y frech goch, yn dilyn gostyngiad yn nifer y bobl sy’n cael y brechlyn.

! Gall y brechlyn MMR eich amddiffyn chi a’ch plentyn rhag salwch difrifol.

Mae Brechu yn achub bywydau
Vaccination saves lives

Brechiad MMR

Amddiffyn rhag y frech goch, clwy'r pennau a rwbela

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