



State of California—Health and Human Services Agency  
California Department of Public Health



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## Clinician Health Advisory

### **New vaccine recommendations to contain the outbreak of meningococcal disease in Southern California: what providers need to do August 16, 2016**

Since March 2016, 24 confirmed cases of serogroup C meningococcal disease, including two fatal cases, have been reported among residents of Los Angeles and Orange Counties and the City of Long Beach. Of the 24 cases, 22 are men and of these, 19 identified as men who have sex with men (MSM). Persons with HIV infection are known to be at increased risk of meningococcal disease, and two cases had HIV infection.

This is the largest meningococcal disease outbreak among MSM that has occurred in the United States to date. Prior to this outbreak, the largest meningococcal disease outbreak among MSM had been in New York City, which had 22 cases during 2010-2013, including 13 in 2012.

[Quadrivalent meningococcal conjugate vaccines](#) (MenACWY) protect against serogroup C disease, the serogroup causing clusters and outbreaks among MSM, as well as against A, W, and Y disease. Although serogroup B ([MenB](#)) vaccines are now available, serogroup B has not been associated with clusters or outbreaks among MSM.

On July 26, Los Angeles and Orange Counties and the City of Long Beach expanded their prior risk-based recommendations for MenACWY vaccine to include all MSM in these jurisdictions, regardless of risk or HIV status. In addition, San Diego County, which has not had an outbreak-associated meningococcal disease case, also issued a recommendation that all MSM be vaccinated.

#### **CDPH advises that healthcare providers recommend MenACWY vaccination for:**

- All MSM residing in Los Angeles, Orange and San Diego Counties and the City of Long Beach
- MSM residing outside of these jurisdictions who plan to travel to Los Angeles or Orange Counties or the City of Long Beach (to be effective, vaccination should occur  $\geq 2$  weeks prior to travel)
- All HIV-infected persons statewide

#### **Meningococcal vaccine recommendations**

- MSM who are not known to be HIV-positive, and who
  - reside in Los Angeles, Orange and San Diego Counties and the City of Long Beach should be offered 1 dose of MenACWY vaccine (Menveo® or Menactra®). Because meningococcal vaccine-induced immunity wanes, a booster dose should be given to those whose last dose of MenACWY vaccine was  $\geq 5$  years ago.
  - reside outside of these jurisdictions and plan to travel to Los Angeles or Orange Counties or the City of Long Beach may be offered MenACWY prior to travel (to be effective, vaccination should occur  $\geq 2$  weeks prior to travel).

- have not been tested for HIV infection within the last year should be offered an HIV test along with MenACWY vaccination.
- HIV-infected persons residing anywhere in the United States should routinely receive 2 doses of MenACWY vaccine (Menveo or Menactra), 8-12 weeks apart, as their primary series. Previously vaccinated HIV-infected persons who received only 1 dose of vaccine should receive a second dose at the earliest opportunity, at least 8 weeks after the previous dose. A booster dose should be given every 5 years if the previous dose was administered at ≥7 years of age.
  - Because of their increased risk for meningococcal disease, the U.S. Advisory Committee on Immunization Practices (ACIP) [voted on June 22, 2016](#) to recommend that all persons with HIV infection who are two months of age and older be routinely vaccinated with MenACWY vaccine. MenACWY is included on the [AIDS Drug Assistance Program](#) (ADAP) formulary.
- All adolescents should continue to be routinely vaccinated with MenACWY vaccine as per [current ACIP recommendations](#).
- Infants, children and adults with increased risk of meningococcal disease (due to underlying complement deficiency or asplenia, or due to exposure through travel, occupation, or outbreak) should continue to be routinely vaccinated with meningococcal vaccines as per [current ACIP recommendations](#).

Vaccine	Primary Schedule	Storage/Handling
<b>Menactra®</b> <b>(MenACWY-D)</b> <i>(Sanofi Pasteur)</i>	Single dose: 0.5mL (IM) No reconstitution required	<ul style="list-style-type: none"> <li>● Store MenACWY-D and MenACWY-CRM (lyophilized and liquid components) in the refrigerator between 35°F and 46°F (aim for 40°F).</li> <li>● Do not freeze any component – do not use if this happens.</li> </ul>
<b>Menveo®</b> <b>(MenACWY-CRM)</b> <i>(Novartis)</i>	Single dose: 0.5 mL (IM)	

\*Although Menactra® and Menveo® are licensed for persons through 55 years of age, they may be administered to persons 56 years of age and older.

**Where meningococcal vaccine can be obtained:**

Adults may locate meningococcal vaccine in their area by going to the outbreak’s informational page at <http://bit.do/menoutbreak>. The webpage include links to local health department vaccine clinic locations and the “Adult Vaccine Finder,” an online widget to help users locate vaccine based on their ZIP code.