

Meningococcal Immunization Guidance during the Midwestern Outbreak

Background

- Outbreaks of meningococcal disease serogroup C among men who have sex with men (MSM) have been reported in the U.S. (NYC, LA) and in Europe.
- In July 2015, MDH identified a death due to meningitis serogroup C.
- Lab tests show that this case was connected to an ongoing outbreak of meningococcal disease occurring among men who have sex with men (MSM) in Chicago.
- Many of the cases in this outbreak have been found to be HIV positive, as was the Minnesota case who died.

Immunization Recommendations

- MDH advises vaccination of MSM, particularly those who are HIV-infected.
- Quadrivalent vaccines that protect against A, C, Y and W-135 should be used for the current serogroup C meningococcal disease outbreak.
- There are two types of quadrivalent meningococcal vaccine: a polysaccharide capsule vaccine and a protein-conjugated vaccine.
- Conjugate vaccines induce immune memory and subsequent boosting, so the CDC has advised that persons who are at risk for meningococcal disease, in this situation, be given the protein conjugate meningococcal vaccine, regardless of their age.
 - This includes persons 56 years of age and older for whom neither conjugate meningococcal vaccine is FDA-approved.
- The two quadrivalent meningococcal conjugate vaccines (MenACWY) are:
 - Menactra (MenACWY-D)
 - Menveo (MenACWY-CRM)

Previous Vaccination Status	Not HIV-infected	HIV-infected
Never vaccinated	1 dose MenACWY (Menactra or Menveo)	2 doses MenACWY, 8 weeks apart
Received 1 dose in the last 5 years	No dose necessary	1 dose MenACWY
Received 2 doses in the past 5 years	No dose necessary	
Received 1 or more doses more than 5 years ago	1 dose MenACWY	

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