

Meningococcal Conjugate Vaccines (MCV4)

<p>Age Indications for MCV4 Vaccines</p> <p>Menactra® (sanofi pasteur): for aged 9 months through 55 years MENVEO® (Novartis): for aged 2 through 55 years</p> <p>Indications for Use and Schedule</p> <ul style="list-style-type: none"> · Routinely administer: <ul style="list-style-type: none"> - One dose at aged 11-12 years; booster dose at age 16 years · Adolescent catch-up schedule: <ul style="list-style-type: none"> - If 1st dose given at aged 13 through 15 years, give a booster dose at aged 16 through 18 years - If 1st dose given at age 16 years or older, a booster dose is <u>not</u> recommended · Recommended for persons aged 9 months through 55 years at high risk for disease (see below) · Minimum interval <ul style="list-style-type: none"> - 8 weeks between 2 doses for all ages 	<p>Vaccine Administration</p> <ul style="list-style-type: none"> · Intramuscular (IM) injection in the deltoid of the arm <ul style="list-style-type: none"> - 1-1.5 inch, 22-25 gauge needle · Use professional judgment in selecting needle length · Give simultaneously with all vaccines <u>except</u>: For children aged 2 years & older with asplenia, if using Menactra® give PCV¹ series 1st & Menactra² 4 weeks later <p>Storage and Handling</p> <ul style="list-style-type: none"> · Store in the refrigerator between 35°-46° F (2°-8° C); Do NOT freeze · Keep in the original box · Menactra is ready to use; shake well · MENVEO must be reconstituted <ul style="list-style-type: none"> - Draw up MenCYW liquid (diluent) - Add to Men A vial: invert: shake well
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PERSONS WITH CERTAIN MEDICAL OR OTHER RISK CONDITIONS

- Children aged 9-23 months:
 - Persistent complement component deficiency: 2-dose primary series (0, 3 mo) & 1st booster dose in 3 years, then every 5 years
 - Travel or current outbreak: 2-dose primary series (0, 3 mo; may use 0, 2 mo for travel); if continued risk, 1st booster dose 3 years later
- Persons aged 2-55 years with persistent terminal complement deficiency or asplenia (functional or anatomic):
 - Aged 2-6 years: 2-dose primary series (0, 2 mo) & 1st booster dose in 3 years then a booster dose every 5 years thereafter
 - Aged 7-55 years: 2-dose primary series (0, 2 mo) & a booster dose every 5 years thereafter
- Persons aged 2-55 years who are at increased risk due to prolonged exposure (e.g., travel to/living in endemic areas, current outbreak, microbiologists exposed to *N. meningitidis*) or when required (e.g., military recruits, travel to Mecca during annual Hajj):
 - Give 1 dose; if the person remains at increased risk, a booster dose is recommended (based on age):
 - 3 years later for children vaccinated at aged 2 through 6 years
 - 5 years later for persons vaccinated at age 7 years or older
- Persons aged 2-55 years with HIV & an indication for vaccination should receive a 2-dose primary series (0, 2 mo)
 - Need and interval for booster dose determined by risk factor
 - HIV without another risk factor present, is not a medical indication for meningococcal vaccination
- Ensure students age 21 years or younger who are entering college/living in dorm have received a dose of MCV4 in the last 5 years
 - Consider 1 dose of MCV4 for students age 21 years or younger who are currently attending college, with no dose in the last 5 years
 - MCV4 is not routinely recommended for healthy persons age 22 years or older

CONTRAINDICATIONS

- An anaphylactic (severe allergic) reaction to a prior dose or a component of MCV4 vaccine

PRECAUTIONS

- Moderate to severe acute illness

FURTHER POINTS

- Persons indicated for a 2-dose primary series who previously received only a 1st dose of MCV4, should get a 2nd dose of MCV4 as soon as feasible; forecast the booster dose (if applicable) from the date of the 2nd primary series dose
- MPSV4 (Meningococcal Polysaccharide Vaccine), while approved for persons age 2 years & older, should only be used for persons age 56 years & older or when a contraindication to MCV4 (but not MPSV4) exists
- Persons who inadvertently receive MPSV4 should be revaccinated with MCV4 using a minimum interval of 8 weeks
- Both MCV4 vaccines contain serotypes A, C, Y, and W-135. Serotype B is not in either vaccine.
- Meningococcal Vaccine Information Statement (VIS), can be found at <http://www.immunize.org/vis/>
- Use the lot number on the outside box of MENVEO to document in GRITS and on the VAR

¹ PCV is Pneumococcal Conjugate Vaccine; ensure at least one supplemental dose of PCV13 (Pevnar13®) is given to children with asplenia

² MCV4/MENVEO may be given to children age 2 years and older with PCV or at any interval before/after PCV

Resources: Updated Recommendations for Use of MCV4, ACIP 2010, MMWR 01/28/11 and other Meningococcal Vaccine Updates, including the Use of MCV4 for children aged 9-23 months are located at www.cdc.gov/vaccines/recs.