



ACIP Meningococcal Vaccines Work Group Introduction

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Work Group Chair

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Meningococcal Work Group Terms of Reference: Purpose and Initial Projects

- Purpose is to review data on meningococcal vaccines and to develop meningococcal vaccine policy options for ACIP consideration
- Initial Projects
 - Incorporate Menveo One-Vial into current Menveo recommendations
 - Develop recommendations for new pentavalent vaccines (MenABCWY)
 - GSK
 - Pfizer
 - Consider whether to recommend MenACWY vaccination for people experiencing homelessness

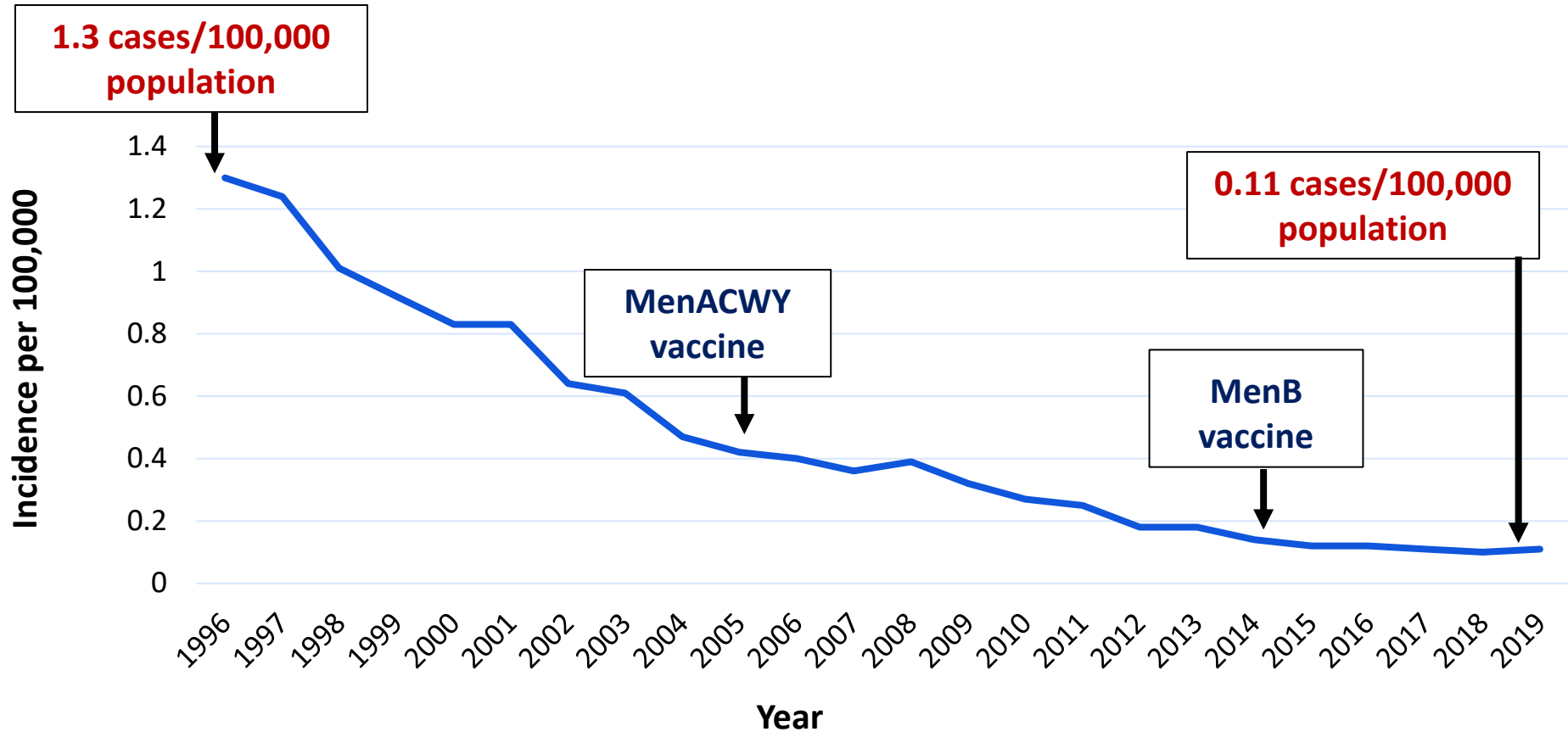
Project Timeline

Task	2022												2023												2024					
	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6					
Menveo One-Vial	Active			Active		Completed																								
GSK Pentavalent Vaccine	Completed	Active			Active			Active			Active			Active			Completed													
Pfizer Pentavalent Vaccine	Completed	Active											Completed																	
People Experiencing Homelessness	Completed						Active						Active						Completed											

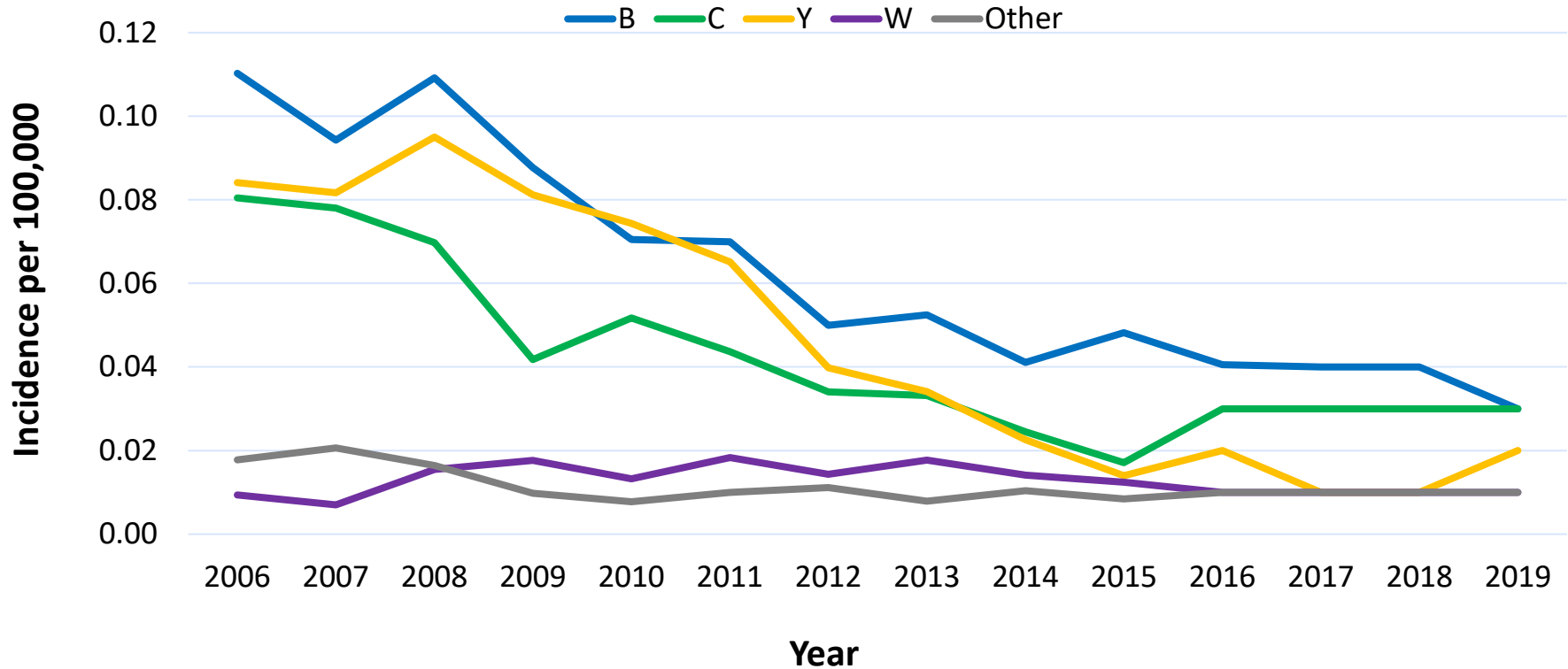
Meningococcal Vaccines Work Group

- ACIP Members
 - Katherine Poehling (Chair)
 - Lynn Bahta
 - Jamie Loehr
- Ex Officio Members
 - Margaret Bash (FDA)
 - Mark Connelly (FDA)
 - Francisco Leyva (NIH)
- CDC Lead
 - Sam Crowe (DBD/NCIRD)
- Liaisons and Consultants
 - Amra Resic (AAFP)
 - Samir Shah (AAP)
 - Sharon McMullen (ACHA)
 - Paul Cieslak (CSTE)
 - Jeff Goad (NFID)
 - Jessica Cataldi (PIDS)
 - Amy Middleman (SAHM)
 - David Stephens (Emory)
 - Denise De Las Nueces (BHCHP)
 - April Ramsey — (BHCHP)
- CDC Contributors
 - LeAnne Fox (DBD/NCIRD)
 - Susan Hariri (DBD/NCIRD)
 - Lucy McNamara (DBD/NCIRD)
 - Alison Albert (DBD/NCIRD)
 - Noele Nelson (DBD/NCIRD)
 - Jonathan Duffy (DHQP/NCEZID)
 - Tanya Myers (DHQP/NCEZID)
 - Ismael Ortega-Sanchez (DVD/NCIRD)
 - Liz Velazquez (ISD/NCIRD)
 - Jessica MacNeil (ACIP Secretariat)
- GRADE/EtR
 - Doug Campos-Outcalt (Arizona)
 - Rebecca Morgan (McMaster)

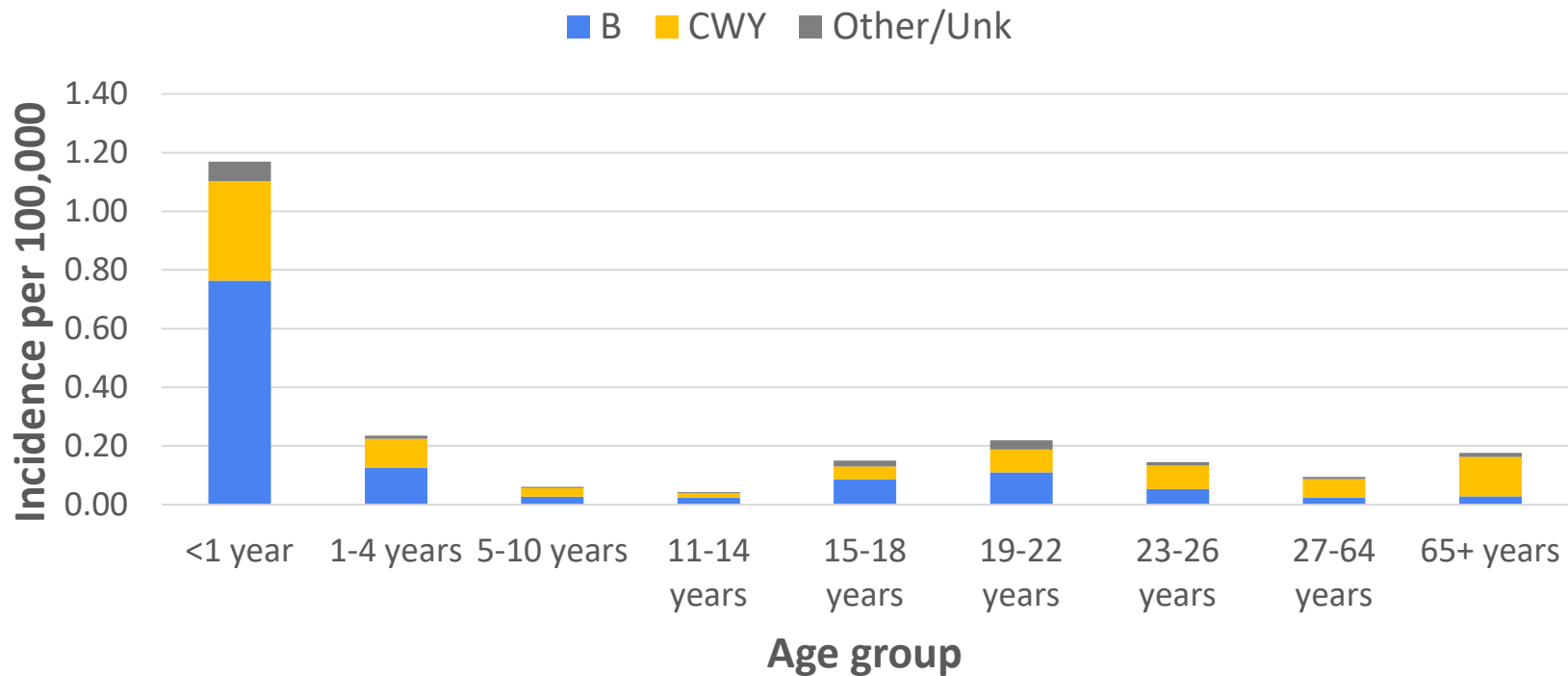
Meningococcal Disease Incidence — United States, 1996–2019



Trends in Meningococcal Disease Incidence by Serogroup — United States, 2006–2019



Average Annual Incidence by Age Group and Serogroup — United States, 2010–2019



Meningococcal Vaccines Licensed in the United States

Vaccine	Type	Manufacturer	Serogroups	Licensed ages
Menactra	Conjugate – Diphtheria toxoid	Sanofi Pasteur	A, C, W, Y	9 mo–55 yrs
Menveo	Conjugate – CRM ₁₉₇	GSK	A, C, W, Y	2 mo–55 yrs
MenQuadfi	Conjugate – tetanus toxoid	Sanofi Pasteur	A, C, W, Y	2+ yrs
Trumenba	Protein	Pfizer	B	10–25 yrs
Bexsero	Protein	GSK	B	10–25 yrs

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MenQuadfi	Conjugate – tetanus toxoid	Sanofi Pasteur	A, C, W, Y	2+ yrs
Trumenba	Protein	Pfizer	B	10–25 yrs
Bexsero	Protein	GSK	B	10–25 yrs

ACIP MenACWY and MenB Vaccine Recommendations for Healthy Adolescents

- **MenACWY vaccine:** Routine administration for all adolescents aged 11–18 years, first dose at 11–12 years and second dose at 16 years.
- **MenB vaccine:** A two-dose MenB vaccine series may be administered to adolescents and young adults aged 16–23 years based on shared clinical decision-making; the preferred age for MenB vaccination is 16–18 years.

ACIP MenACWY and MenB Vaccine Recommendations for Persons at Increased Risk for Meningococcal Disease

Risk group	MenACWY Vaccine	MenB Vaccine
Persons with complement component deficiency, including patients taking complement inhibitors	Aged ≥ 2 months	Aged ≥ 10 years
Persons with functional or anatomic asplenia (including sickle cell disease)	Aged ≥ 2 months	Aged ≥ 10 years
Persons with HIV infection	Aged ≥ 2 months	No recommendation
Microbiologists routinely exposed to <i>Neisseria meningitidis</i>	As appropriate	As appropriate
Persons exposed during an outbreak of meningococcal disease due to a vaccine-preventable serogroup	Aged ≥ 2 months	Aged ≥ 10 years
Persons who travel to or reside in countries where meningococcal disease is endemic or hyperendemic	Aged ≥ 2 months	No recommendation

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

