

Meningococcal B Vaccination

All adolescents and young adults who are at increased risk for serogroup B meningococcal disease should receive Meningococcal B (MenB) vaccine. This includes patients with anatomic or functional asplenia (including sickle cell disease), persistent complement component deficiency, or complement inhibitor use.

Shared clinical decision-making (SCDM) is recommended regarding MenB vaccination for healthy people 16–23 years of age. SCDM recommendations are meant to be flexible and informed by the characteristics, values, and preferences of the individual patient and the clinical discretion of the health care provider.

When you decide to discuss MenB vaccination with people 16–23 years of age:

Remember:



- MenB vaccine is not routinely recommended for all people in this age group.
- The vaccine series provides short-term protection against most strains of serogroup B meningococcal bacteria circulating in the United States.

Consider:



- Serogroup B meningococcal disease is an uncommon but deadly disease. In recent years, between 20 and 50 cases occurred each year in 16- through 23-year-old people in the United States.
- A low risk of exposure or infection does not mean a person cannot get a MenB vaccine. It is just one potentially important consideration in SCDM.
- Serogroup B meningococcal disease cases most commonly affect young adults who attend a four-year university, are freshmen, live in on-campus housing, or participate in sororities or fraternities.
- MenB vaccines are safe and effective, but they only offer short-term protection (1 to 2 years) to those who get vaccinated.

How to vaccinate:



- If you and your patient decide MenB vaccination is appropriate, administer a 2-dose series of a MenB vaccine, one each at month 0 (the first vaccine appointment) and 6 months later.
 - To optimize rapid protection (e.g., for students starting college in less than 6 months), a 3-dose series (0, 1–2, 6 months) may be administered.
- MenB-4C and MenB-FHbp are not interchangeable.
- MenB vaccines should not be administered to a person who has had a severe allergic reaction (e.g., anaphylaxis) to a:
 - Previous dose of MenB vaccine
 - Component of the vaccine
- In pregnant women, delay vaccination until after pregnancy unless the patient is at increased risk and the benefits of vaccination outweigh the potential risks.



Additional information:

CDC Child and Adolescent Immunization Schedule by Age:
www.cdc.gov/vaccines/hcp/imz-schedules/child-adolescent-age.html

CDC Adult Immunization Schedule by Age:
www.cdc.gov/vaccines/hcp/imz-schedules/adult-age.html

CDC Meningococcal Vaccine Recommendations:
www.cdc.gov/meningococcal/hcp/vaccine-recommendations/index.html