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### IN BRIEF

## New Meningococcal Serogroup B Vaccination Recommendations

The Advisory Committee on Immunization Practices (ACIP) has issued new recommendations for meningococcal vaccination.<sup>1</sup> Booster vaccination against *Neisseria meningitidis* serogroup B (MenB) is now recommended in persons at increased risk for meningococcal disease (see Table 1). MenB booster doses were not recommended previously for any population.

Two MenB vaccines (*Bexsero*, *Trumenba*) are licensed in the US. Persons  $\geq 10$  years old at increased risk for meningococcal disease should receive a two-dose primary series of *Bexsero* or a three-dose primary series of *Trumenba*. Persons who remain at increased risk should receive a booster dose of the same MenB vaccine 1 year after completing the primary series and every 2-3 years thereafter. During an outbreak, previously vaccinated persons should receive a single booster dose if  $\geq 1$  year has passed since completion of the primary series.<sup>1</sup>

MenB vaccination is not routinely recommended for adolescents, but a two-dose MenB primary series may be considered for young adults 16-23 years old (preferably at 16-18 years) to provide short-term

Table 1. Some Persons at Increased Risk for Meningococcal Serogroup B Disease

- ▶ Patients with persistent complement component deficiencies
- ▶ Patients who are receiving a complement inhibitor
- ▶ Patients with anatomic or functional asplenia
- ▶ Microbiologists who are routinely exposed to *N. meningitidis*
- ▶ Any person during a *N. meningitidis* serogroup B outbreak

protection during a period of increased risk (e.g., among first-year college students living in dormitories).<sup>1</sup>

Recommendations for vaccination against *N. meningitidis* serogroups A, C, W, and Y (MenACWY) have remained unchanged.<sup>1,2</sup> Two quadrivalent MenACWY vaccines (*Menactra*, *Menveo*) are currently available in the US; a third quadrivalent vaccine that uses tetanus toxoid as a protein carrier (*MenQuadfi*) was licensed in 2020 and is expected to become available in the first quarter of 2021.<sup>3</sup> Healthy adolescents should receive one dose at age 11-12 years and a booster dose at age 16 years. Persons at increased risk for meningococcal disease can receive MenACWY vaccination beginning at age 2 months and should receive periodic booster doses.<sup>1</sup> ■

1. SA Mbaeyi et al. Meningococcal vaccination: recommendations of the Advisory Committee on Immunization Practices, United States, 2020. *MMWR Recomm Rep* 2020; 69(RR-9):1.
2. Adult immunization. *Med Lett Drugs Ther* 2018; 60:73.
3. A new conjugate meningococcal vaccine (*MenQuadfi*). *Med Lett Drugs Ther* 2021 (in press).

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