

A Quick Look at Using Meningococcal Serogroup B (MenB) Vaccines

Indications for Use

- Routinely vaccinate persons 10 years and older who are at increased risk for meningococcal disease:
 - Anatomic or functional asplenia, including sickle cell disease
 - Persistent complement component deficiencies
 - Including inherited or chronic deficiencies in C3, C5-C9, properdin, factor H, factor D, or are taking a complement inhibitor such as eculizumab [Soliris®] or ravulizumab [Ultomiris®]¹
 - Microbiologists routinely exposed to isolates of *Neisseria meningitidis*
 - Exposure during a community outbreak (e.g., in community or organizational settings, and among MSM) attributable to serogroup B
- Based on shared clinical decision making, persons 16 through 23 years without high-risk conditions may receive either vaccine for short-term protection
 - Preferred age is 16 through 18 years
- Both **Trumenba**® and **Bexsero**® are licensed for persons aged 10-25 years; may give to persons aged 26 years and older based on the Advisory Committee on Immunization Practices (ACIP) recommendations
- **Booster Dose:** please see “Booster Doses” below

Schedule

- **Trumenba (MenB-FHbp)**
 - 3 dose series at 0, 1-2, 6 months for persons at increased risk or within an outbreak, **OR**
 - 2 dose series at 0, 6 months for persons 16 through 23 years who are **not** at increased risk or within an outbreak
 - If the 2nd dose is administered earlier than 6 months after the 1st dose, a 3rd dose should be administered at least 4 months after the 2nd dose
- **Bexsero (MenB-4C)**
 - 2 dose series at 0, 1 month after 1st dose

Vaccine Administration

- Intramuscular (IM) injection in the deltoid of the arm
 - 1- to 1.5-inch needle; 22-25 gauge
 - Use professional judgment when selecting needle length
- Can be given with other vaccines at the same visit, including Meningococcal Conjugate vaccine (MenACWY)
 - Use a different injection site, space at least 1-inch apart
- The same MenB vaccine brand **must** be used for all doses to complete the series, Trumenba and Bexsero are not interchangeable
 - Complete a series with 1 or the other vaccine; if a person has already received 1 dose of Bexsero and 1 of Trumenba, pick a brand and finish a recommended schedule with that brand; the next dose of the brand you pick should be separated by a minimum of 1 month after the last MenB dose
www.immunize.org/askexperts

Storage and Handling

- Store in the refrigerator unit between **36°-46°F (2°-8°C)**
 - Stand-alone purpose-built storage units preferred
- Do **not** freeze vaccine (discard if frozen)
- Keep in original box
- Bexsero and Trumenba supplied as 0.5 mL single-dose prefilled syringe
 - Shake prefilled syringes well before use
- Protect Bexsero from light
- Lay Trumenba syringes flat on shelf

¹Meningococcal vaccines should be administered at least 2 weeks before the first dose of complement inhibitor, unless the risk for delaying complement therapy outweighs the risk for developing meningococcal disease

Booster Doses (note: Trumenba and Bexsero are not interchangeable)

- Persons aged 10 years and older with complement component deficiency, complement inhibitor use¹, asplenia (including sickle cell disease), and microbiologists
 - Give a MenB booster dose 1 year after completion of a primary MenB series, then follow with a MenB booster every 2-3 years if the patient remains at risk
- Persons aged 10 years and older as determined by public health officials to be at increased risk during an outbreak
 - Give a one-time MenB booster dose if it has been 1 year or more since completion of a MenB primary series
 - An interval of greater than or equal to 6 months may be considered by public health officials depending on the specific outbreak, vaccination strategy, and projected duration of elevated risk

Contraindications

- An anaphylactic (severe allergic) reaction to a prior dose or a component of MenB vaccines

Precautions

- Moderate or severe acute illness with or without fever
- Latex sensitivity (Bexsero only)-prefilled syringes contain natural rubber latex in the tip caps
- Pregnancy or lactating (delay MenB unless at increased risk and vaccine benefits outweigh potential risks)

Further Points

- Children less than age 10 years are **not** recommended to receive either MenB vaccine, regardless of risk condition(s)
- Unlike Meningococcal Conjugate vaccines (MenACWY), MenB vaccines are **not routinely** recommended for adolescents aged 10 through 15 years without a risk condition, first-year college students living in residence halls, military recruits, international travelers, or persons with HIV infection
- There is no preference for the use of one brand of MenB vaccine over the other
- The ACIP meningococcal serogroup B vaccine recommendations state that the same vaccine must be used for all doses in the MenB series, including booster doses. If the brand of a previous dose is unavailable or cannot be determined, restart the primary series with the available brand
- The MenB Vaccine Information Statement (VIS), including information about the Michigan Care Improvement Registry (MCIR), can be found at www.michigan.gov/VIS or your local health department
- MenB vaccines in MCIR for persons aged 10 years and older with a high-risk indication
 - MCIR will display doses given at 10 years and older under Other Administrations; there is no second dose forecasting for this age group at this time (i.e., MCIR will not forecast for patients with high-risk indications)
- MenB vaccines in MCIR for persons aged 16 through 23 years without a high-risk indication
 - MenB vaccine will be forecasted as a general routine vaccine series for persons 16 through 23 years of age with a due date of the 16th birthday
 - MenB vaccine will display on the MCIR information screen and immunization status screen as “Discuss/Due Now”
 - Once dose 1 is given, the vaccine brand will be displayed as MenB-4C (Bexsero) or MenB-FHbp (Trumenba); MCIR will forecast dose 2 at the appropriate interval as DUE based on what MenB vaccine brand was given
 - If both MenB vaccine brands have been given as dose 1 and dose 2, MCIR will forecast the final MenB dose based on the last dose that was given
- Document Bexsero as “MenB-4C (Bexsero)” in MCIR and as “MenB (Bexsero)” on the vaccine administration record (VAR) & immunization record card
- Document Trumenba as “MenB-FHbp (Trumenba)” in MCIR and as “MenB (Trumenba)” on the vaccine administration record (VAR) & immunization record card
- For information regarding meningococcal conjugate vaccine (MenACWY) refer to the Meningococcal Conjugate Quick Look at www.michigan.gov/vaccinequicklooks and to the Meningococcal Conjugate vaccine recommendations at www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/mening.html
- For further information regarding meningococcal vaccines, refer to the CDC website “Meningococcal Vaccination for Adolescents: Information for Healthcare Professionals” at www.cdc.gov/vaccines/vpd/mening/hcp/adolescent-vaccine.html

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Publicly purchased MenB vaccine can be administered to eligible children aged 10 through 18 years through the Vaccines for Children (VFC) Program in private providers’ offices. Please see the VFC provider resource manual at www.michigan.gov/vfc for more information regarding the VFC requirements. Eligible children include those who are uninsured, underinsured, Medicaid eligible, Native American or Alaskan Natives. Contact your local health department for more information. For current Meningococcal vaccine recommendations visit www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/mening.html.