

# Meningococcal B Vaccine

<p><b>Vaccine Description</b></p>	<ul style="list-style-type: none"> <li>• Brands: Bexsero® (MenB-4C), Trumenba® (MenB-FHbp)</li> <li>• Inactivated (recombinant) vaccine             <ul style="list-style-type: none"> <li>◦ MenB-4C contains 3 recombinant cell surface proteins</li> <li>◦ MenB-FHbp contains 2 FHbp variants</li> </ul> </li> <li>• Bexsero®: Tip cap contains natural rubber latex</li> <li>• See package insert</li> </ul>
<p><b>Dose &amp; Route</b></p>	<ul style="list-style-type: none"> <li>• Dose: 0.5 mL</li> <li>• Route: IM in deltoid region of upper arm. (Precaution: hemophilia, thrombocytopenia, and anticoagulation therapy)</li> <li>• See package insert</li> </ul>
<p><b>Indications</b></p>	<ul style="list-style-type: none"> <li>• MenB vaccine routinely recommended for people 10 years of age and older at increased risk due to:             <ul style="list-style-type: none"> <li>◦ a serogroup B meningococcal disease outbreak,</li> <li>◦ being routinely exposed to <i>Neisseria meningitidis</i> occupationally, or</li> <li>◦ certain medical conditions such as:                 <ul style="list-style-type: none"> <li>▪ a non-functioning, absent, or removed spleen (asplenia)</li> <li>▪ a complement (immune) component deficiency (e.g., C5-C9, properdin, factor H, factor D)</li> <li>▪ Receiving a complement inhibitor (i.e., Solaris)</li> </ul> </li> </ul> </li> <li>• Although safety and efficacy of MenB vaccine is not established in adults ≥26 years of age, ACIP recommends routine vaccination in adults ≥26 years of age with the above risk factors.</li> <li>• MenB vaccines may be prescribed <b>based on shared decision making</b> for healthy first-year college students living in residence halls, military recruits, or other adolescents (preferably at 16 through 18 years of age).</li> <li>• MenB vaccine is not recommended for persons who travel to or reside in countries where meningococcal disease is hyperendemic or epidemic (because the risk for meningococcal disease in these countries generally is not caused by serogroup B).</li> <li>• Before administering MenB vaccines, providers should consult the package insert for precautions, warnings, and contraindications.</li> </ul>
<p><b>Administration Schedule</b></p>	<ul style="list-style-type: none"> <li>• Trumenba® (MenB-FHbp) and Bexsero® (MenB-4C) are licensed as both a 2-dose (at 0 and 6 months) and 3-dose (at 0, 1-2, and 6 months) series.</li> <li>• For persons at increased risk for meningococcal disease (see indications): administer 3 doses of either Bexsero® or Trumenba® at 0, 1-2, and 6 months.</li> <li>• For healthy adolescents not at increased risk: administer 2 doses of either Bexsero® or Trumenba® at 0 and 6 months.</li> <li>• **The 3-dose series (0,1-2,6 months) may be used to optimize rapid protection for individuals who initiate the vaccine series less than 6 months prior to increased risk (e.g., students with less than 6 months before college entry).</li> <li>• Bexsero® and Trumenba® are NOT interchangeable.</li> <li>• May be given with other age-appropriate vaccines but at a different anatomic site if feasible.</li> </ul>

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(Continued)

<b>Booster</b>	<ul style="list-style-type: none"> <li>• Booster doses for previously vaccinated persons is not routinely recommended unless person becomes or remains at increased risk. A booster dose 1 year after primary series and every 2-3 years can be considered.</li> <li>• An order by a privileged provider is required.</li> </ul>
<b>Contraindications</b>	<ul style="list-style-type: none"> <li>• Severe allergic reaction to a previous dose of Bexsero® or Trumenba® or any component of the vaccines.</li> </ul>
<b>Special Considerations</b>	<ul style="list-style-type: none"> <li>• Defer administration of MenB vaccine during pregnancy or lactation, unless the woman is at increased risk for disease and benefits of vaccination outweigh potential risks.</li> <li>• If the second dose is administered earlier than 6 months after the first dose, a third dose should be administered at least 4 months after the second dose.</li> <li>• Immediately prior to administration of either vaccine, shake single-dose prefilled syringe well to obtain a homogeneous suspension.</li> <li>• Either MenB vaccine may be administered to immunosuppressed individuals; however, immune response may be reduced.</li> <li>• Storage and Handling:             <ul style="list-style-type: none"> <li>◦ Bexsero®: 2–8°C; protect from light. Do not freeze; if freezing occurs, discard vaccine.</li> <li>◦ Trumenba®: 2–8°C. Store syringes horizontally (lying flat) to minimize redispersion time. Do not freeze; if freezing occurs, discard vaccine</li> </ul> </li> <li>• **Penbraya® (MenABCWY) is licensed as a 2-dose series given 6 months apart, for individuals aged 10-25 years. Pfizer’s MenABCWY vaccine may be used when both MenACWY and MenB are indicated at the same visit.</li> <li>• The MenB component of Penbraya® is the MenB vaccine Trumenba®. As Trumenba® and Bexsero® are not interchangeable, a primary series and any future MenB booster doses must be of the same brand.</li> </ul>
<ul style="list-style-type: none"> <li>• VIS: <a href="https://www.cdc.gov/vaccines/hcp/vis/vis-statements/mening-serogroup.html">https://www.cdc.gov/vaccines/hcp/vis/vis-statements/mening-serogroup.html</a></li> <li>• Standing Orders: <a href="http://www.health.mil/standingorders">www.health.mil/standingorders</a></li> <li>• Additional education may be found at <a href="http://www.health.mil/meningococcal">www.health.mil/meningococcal</a></li> </ul>	