

Meningococcal Vaccine or Menactra

Quick Facts: What You Need to Know about Meningococcal

Meningococcal disease is a severe bacterial infection that can cause meningitis, bloodstream infection, and other localized infections. Although the disease is not common in the United States, in those who get it, symptoms develop and progress rapidly even leading to death in 24-48 hours.

Meningitis can lead to:

- loss of a limb,
- permanent neurologic impairment,
- or death.

Meningococcal bacteremia can result in:

- joint infection,
- pneumonia,
- organ system failure,
- shock,
- and death.

Meningococcal disease is spread by direct contact with large droplet respiratory secretions (coughing, sneezing, kissing, mouth-to-mouth resuscitation).

Fortunately, none of the bacteria that cause meningitis are as contagious as things like the common cold or the flu, and they are not spread by casual contact or by simply breathing the air where a person with meningitis has been. But close household contacts of persons with meningococcal disease are at greatly increased risk of infection.

Two Meningococcal vaccines are available in the United States:

- Meningococcal polysaccharide vaccine (MPSV4) has been available since the 1970s.
- Meningococcal conjugate vaccine (MCV4) was licensed in 2005.

Meningococcal vaccine can prevent 4 types of meningococcal disease, including 2 of the 3 types most common in the U.S. (serogroup C, Y, and W-135) and a type that causes epidemics in Africa (serogroup A). Meningococcal vaccine cannot prevent all types of the disease. But it does protect many people who might become sick if they didn't get the vaccine.

Both vaccines work well, and protect about 90% of those who get it. MVC4 is expected to give better, longer-lasting protection. MCV4 should also be better at preventing the disease from spreading from person to person. It is the preferred vaccine for those aged 11-55, and recently was recommended for children 2-10 who are at high risk.

Children Between 2 and 10 who are at High Risk of Disease

Adolescents and Adults Age 11-55

MCV4 is recommended for all children at their routine preadolescent visit (11 to 12 years of age). For those who have never gotten MCV4 previously, a dose is recommended at high school entry. MCV4 is the preferred vaccine for people 11 to 55 years of age, but MPSV4 can be used if MCV4 is not available. Other adolescents who want to decrease their risk of meningococcal disease can also get the vaccine.

Adults Over 55

The MPSV4 vaccine is recommended for certain high risk adults over 55. They include people who travel to, and United States citizens who reside in, countries where meningitis is hyperendemic or epidemic, persons with terminal complement deficiency (an immune system disorder) and persons with a damaged spleen or whose spleen has been removed. The number of doses needed depends on the person's age. Ask your doctor for more details.

Meningococcal vaccine is also recommended for other people at increased risk for meningococcal disease, including:

- College freshmen living in dormitories.
 - Microbiologists who are routinely exposed to meningococcal bacteria.
 - U.S. military recruits.
 - Anyone traveling to, or living in, a part of the world where meningococcal disease is common, such as parts of Africa.
 - Anyone who has a damaged spleen, or whose spleen has been removed.
 - Anyone who has terminal complement component deficiency (an immune system disorder).
 - People who might have been exposed to meningitis during an outbreak.
- Meningococcal conjugate vaccine may be given at the same time as other vaccines.

Anyone who has ever had a severe (life-threatening) allergic reaction to a previous dose of either meningococcal vaccine should not get another dose. Anyone who has a severe (life threatening) allergy to any vaccine component should not get the vaccine. Tell your healthcare provider if you have any severe allergies.

People who are mildly ill at the time the shot is scheduled can still get meningococcal vaccine. People with moderate or severe illnesses should usually wait until they recover. Your provider can advise you.

Meningococcal vaccine may be given to pregnant women.

Up to about half of people who get meningococcal vaccines have mild side effects, such as redness or pain where the shot was given. If these problems occur, they usually last for 1 or 2 days. Mild side effects are more common after MCV4 than after MPSV4. A small percentage of people who receive the vaccine develop a fever. Serious allergic reactions, within a few minutes to a few hours of the shot, are very rare. There have been a small number of reports of adolescent vaccine recipients who experience Guillain-Barre Syndrome (GBS) shortly after vaccination. While the CDC cannot yet determine if it is the vaccine that truly caused GBS, they are investigating it further. [Click here](#) for more information.

Look for any unusual condition, such as a high fever or behavior changes. Serious allergic reactions are extremely rare with any vaccine. If one were to occur, it would most likely be within a few minutes to a few hours after the shot. Signs can include difficulty breathing, weakness, hives, hoarseness or wheezing, fast heart beat, pallor, and dizziness.

What should I do?

- Call a doctor or get the person to a doctor right away.
- Tell your doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your doctor, nurse, or health department to file a Vaccine Adverse Event Reporting System (VAERS) form, or call VAERS yourself at 1-800-822-7967

<http://www.immunize.org/vis/menin06.pdf>